'26 APR 6 PM 3:50:37

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

Date: 04/03/2026

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
Watts, Alan, B.	209630	Jan. 1, 1917 ME

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: Sep. 3, 2015 ME

State of Residence (upon entry into service):

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

Researcher Signature: Andrew Burns

CIVILIAN SERVICE

(Agency & Location)

From: To:

(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-00724563

CMRS Search Request Number(s): ~~CGS-02832849~~

Attendant Signature:

Remarks:

'26 MAY 13 AM 9:58:17

SCREENING NOTES

☒ Reviewed and Nothing Removed AH

☐ 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:

Photog_____ No._____

Ship_____ Date_____

Location_____

THIS INFORMATION IS REQUIRED

Caption must include Names (left to right), ratings, home towns or cities with street addresses No. AND COMPLETE STORY OF PICTURE:—

WATTS, Alan B.

209-630

DD2CG 44041

Home town newspapers_____

ENCLOSE ONLY ONE NEGATIVE AND ITS CONTACT PRINT. SEND NEGATIVE TO: CHIEF, PUBLIC RELATIONS DIVISION, U. S. COAST GUARD, WASHINGTON 25, D. C.

NAVCG-2816

INFORMAL INFORMATION REPLY

DATE 4-20-81

RE: WATTS, ALAN B 209-630

DATE OF INQUIRY	RECEIVED ON	ON BEHALF OF

REFERRED TO NPRC BY

THE REPLY TO THE INQUIRY WILL BE FOUND IN THE CHECKED ITEM(S). IF IT IS NECESSARY TO WRITE TO US AGAIN CONCERNING THIS SUBJECT, PLEASE RETURN ALL PAPERS TO THIS CENTER.

☒ Copies of requested military ☒ personnel ☐ medical records are attached.

☐ We regret some of the copies are of poor quality; however, they are the best copies obtainable.

☐ The Privacy Act of 1974 does not permit the release of a social security number or other personal information to the public without the authorization of the veteran concerned. Therefore, personal identifying data relating to other persons have been deleted from the attached documents.

☐ Military personnel, upon discharge from the Armed Forces, are issued a discharge certificate. These certificates are prepared in the original only; therefore, copies cannot be furnished. The law does provide that upon presentation of satisfactory proof of loss (such as a signed statement), an honorably discharged veteran or the surviving spouse may be given a "certificate in lieu of lost or destroyed discharge." Before we can consider a certificate lost in the mail, 60 days must have passed since date of discharge. We are unable to issue a certificate in lieu to anyone other than as provided by law.

☐ The document you have requested, DD Form 214, Report of Separation, was not used until Jan. 1, 1950. However, a similar form was used when you were separated. A copy of it is attached.

☐ At the time you were separated, it was not the practice to issue a document which served as a report of separation.

☐ The original Report of Separation was issued at the time of separation. Another original cannot be issued. The attached copy, however, will serve the same purpose as the original.

☐ Since you had no active service, active duty for training or active duty for training for a period of less than 90 days, no Report of Separation was issued.

☐ Your service record does not contain a copy of a Report of Separation, or its equivalent.

☒ We are furnishing the attached GSA Form 6954, Certification of Military Service, in lieu of the requested document. This will verify your military service and may be used for any official purpose.

☐ The medical records you request: ☐ The documents you request pertaining to discharge: have been lent to the Veterans Administration and may be obtained from the VA office shown below.

☐ Your Reenlistment Eligibility (RE) Code issued upon release from active duty on _____ is: _____.

☐ Your record of service in the _____ indicates you were in a POW status from _____ to _____.

☐ The reason and authority for your separation from active duty/discharge on _____ is _____.

FOR INFORMATION CONCERNING YOUR CLAIM # WE SUGGEST YOU CONTACT THE NEAREST VA OFFICE

ALAN B. WATTS
15 HIGH STREET
MACHIAS, MAINE 04654

6NCP/MN-C
J. Hitchlow
FOR
NATIONAL PERSONNEL RECORDS CENTER
(Military Personnel Records)
9700 Page Boulevard
St. Louis, MO 63132

GENERAL SERVICES ADMINISTRATION

☆ U.S. GOVERNMENT PRINTING OFFICE: 1980-765-010 R6-6923 (10/80)

APRIL 6,1981

NATIONAL PERSONNEL RECORD CENTER
(MILITARY PERSONNEL RECORDS-COAST GUARD)
GSA, 9700 PAGE BOULEVARD
ST: LOUIS, MISSOURI 63132

DEAR SIR;

PLEASE SEND ME MY GENERAL ADMINSTRATION TITLE C- NUMBER.

ALSO A COPY OF MY UNITED COAST COAST GUARD DISCHARGE. I RETIRED APRIL 1,1958 FROM SOUTH WEST HARBOR COAST GUARD STATION, SOUTH WEST HARBOR, MAINE.

RESPECTFULLY

Alan B. Watts

ALAN B. WATTS (209-630) BMC (RET)
15 HIGH STREET
MACHIAS, MAINE 04654

United States of America

Certification of
Military Service

This certifies that	Alan B. Watts 209 630
was a member of the	United States Coast Guard
from	February 15, 1938
to	May 4, 1944
Service was terminated by	Honorable Discharge
Last Grade, Rank, or Rating	BM1c
Active Service Dates	Same as above

Given at St. Louis, Missouri, on April 20, 1981

National Personnel Records Center
(Military Personnel Records)
National Archives and Records Service
General Services Administration

THE ADMINISTRATOR OF GENERAL SERVICES ADMINISTRATION IS THE PHYSICAL CUSTODIAN OF THIS PERSON'S MILITARY RECORD.

(This form not valid without official seal.)

R6-6954 (1/81)

United States of America

Certification of
Military Service

This certifies that Alan B. Watts 209 630

was a member of the United States Coast Guard

from May 5, 1944

to May 4, 1948

Service was terminated by Honorable Discharge

Last Grade, Rank, or Rating BM1(L)

Active Service Dates Same as above

Given at St. Louis, Missouri, on April 20, 1981

National Personnel Records Center
(Military Personnel Records)
National Archives and Records Service
General Services Administration

United States of America

Certification of
Military Service

This certifies that Alan B. Watts 209 630

was a member of the United States Coast Guard

from May 13, 1952

to April 1, 1958

Service was terminated by Honorable Discharge

Last Grade, Rank, or Rating BMC

Active Service Dates Same as above

Given at St. Louis, Missouri, on April 20, 1981

National Personnel Records Center
(Military Personnel Records)
National Archives and Records Service
General Services Administration

THE ADMINISTRATOR OF GENERAL SERVICES ADMINISTRATION IS THE PHYSICAL CUSTODIAN OF THIS PERSON'S MILITARY RECORD.

(This form not valid without official seal.)

R6-6954 (1/81)

REPORT SYMBOL. (N) BB-1

CHARACTER OF SEPARATION: HONORABLE

REPORT OF SEPARATION FROM THE [redacted] FORCES OF THE UNITED STATES

DEPARTMENT: [redacted] COAST GUARD

SEPARATION DATA

1. LAST NAME - FIRST NAME - MIDDLE NAME	2. SERVICE NUMBER	3. GRADE - RATE - RANK AND DATE OF APPOINTMENT	4. COMPONENT AND BRANCH OR CLASS
WATTS, ALAN BRENNEN	209-630	BM1	USCG

5. QUALIFICATIONS

SPECIALTY NUMBER OR SYMBOL	RELATED CIVILIAN OCCUPATION AND D. O. T. NUMBER
**	**

6. EFFECTIVE DATE OF SEPARATION: DAY 12 | MONTH MAY | YEAR 52

7. TYPE OF SEPARATION: Discharge

8. REASON AND AUTHORITY FOR SEPARATION: ART 12-3-42A(1) CG Regs.

9. PLACE OF SEPARATION: Boston, Mass.

10. DATE OF BIRTH			11. PLACE OF BIRTH (City and State)	12. DESCRIPTION					
DAY	MONTH	YEAR		SEX	RACE	COLOR HAIR	COLOR EYES	HEIGHT	WEIGHT
1	JAN	17	Jonesboro, Maine	Male	Caucasian	Brn	Blue	71	180

SELECTIVE SERVICE DATA

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

16. ENLISTED IN OR TRANSFERRED TO A RESERVE COMPONENT			
YES	NO	COMPONENT AND BRANCH OR CLASS	COGNIZANT DISTRICT OR AREA COMMAND
	X	***	**

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

18. GRADE - RATE OR RANK AT TIME OF ENTRY INTO ACTIVE SERVICE: BM1

19. DATE AND PLACE OF ENTRY INTO ACTIVE SERVICE				20. HOME ADDRESS AT TIME OF ENTRY INTO ACTIVE SERVICE (St., R.F.D., County, City and State)
DAY	MONTH	YEAR	PLACE (City and State)	
5	MAY	48	Southwest Harbor	O'Brien Ave., Machias, Maine

SERVICE DATA

STATEMENT OF SERVICE FOR PAY PURPOSES

	A. YEARS	B. MONTHS	C. DAYS
21. NET (USCG) SERVICE COMPLETED FOR PAY PURPOSES EXCLUDING THIS PERIOD	10	02	20
22. NET SERVICE COMPLETED FOR PAY PURPOSES THIS PERIOD	04	00	08
23. OTHER SERVICE (Act of 16 June 1942 as amended) COMPLETED FOR PAY PURPOSES			
24. TOTAL NET SERVICE COMPLETED FOR PAY PURPOSES	14	02	28

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

DAY	MONTH	YEAR	AMOUNT
*	*	*	*

26. FOREIGN AND/OR SEA SERVICE

YEARS	MONTHS	DAYS
)	)	)

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

Authorized Good Conduct Medal

28. MOST SIGNIFICANT DUTY ASSIGNMENT: LightHouse station Libby Island

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

30. SERVICE SCHOOLS OR COLLEGES, COLLEGE TRAINING COURSES AND/OR POST. GRAD. COURSES SUCCESSFULLY COMPLETED: ****

DATES (From—To)	MAJOR COURSE	31. SERVICE TRAINING COURSES SUCCESSFULLY COMPLETED
***	***	****

INSURANCE AND PAY DATA

GOVERNMENT INSURANCE INFORMATION: IF PREMIUM IS NOT PAID WHEN DUE OR WITHIN THIRTY-ONE DAYS THEREAFTER, INSURANCE WILL LAPSE. MAKE CHECKS OR MONEY ORDERS PAYABLE TO THE TREASURER OF THE UNITED STATES. FORWARD PAYMENTS FOR N.S.L.I. TO THE COLLECTIONS UNIT, VA BRANCH OFFICE HAVING JURISDICTION OF AREA IN WHICH YOU MAINTAIN PERMANENT RESIDENCE. FORWARD PAYMENTS FOR U.S.G.L.I. TO COLLECTIONS DIVISION, VETERANS ADMINISTRATION, WASHINGTON 25, D. C. WHEN MAKING INSURANCE PAYMENTS BE SURE TO GIVE FULL NAME AND PERMANENT ADDRESS FOR MAILING PURPOSES, SERVICE SERIAL NUMBER AND POLICY NUMBER(S) IF KNOWN.

32. KIND OF INSURANCE (amount and premium due each month)		33. MONTH ALLOTMENT DISCONTINUED	34. MONTH NEXT PREMIUM DUE
N. S. L. I.	U. S. G. L. I.		
***	***	***	****

35. TOTAL PAYMENT UPON SEPARATION	36. TRAVEL OR MILEAGE ALLOWANCE INCLUDED IN TOTAL PAYMENT	37. DISBURSING OFFICER'S NAME AND SYMBOL NUMBER
562.92	19.62	(A373) T.M.KROTKY, CPCLK, ACO.

AUTHENTICATION

36. REMARKS (Continue on reverse): Recommended for reenlistment

39. SIGNATURE OF OFFICER AUTHORIZED TO SIGN: S Pisicchio

NAME, GRADE AND TITLE (Typed): S. PISICCHIO, LT. USCG By direction

PERSONAL DATA

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

COMPENSATION, PENSION, INSURANCE, BENEFITS, ETC. | CLAIM NUMBER: ****

41. DATES OF LAST CIVILIAN EMPLOYMENT		42. MAIN CIVILIAN OCCUPATION	43. NAME AND ADDRESS OF LAST CIVILIAN EMPLOYER
FROM	TO		
****		Fisherman	Self employed

44. UNITED STATES CITIZEN	45. MARITAL STATUS	46. NON-SERVICE EDUCATION (Years successfully completed)				
YES / NO		GRAMMAR	HIGH SCHOOL	COLLEGE	DEGREE(S)	MAJOR COURSE OR FIELD
X	Married	8	2	)	0	0

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

48. SIGNATURE OF PERSON BEING SEPARATED: Alan B. Watts

Alan B. Watts

ALL ENTRIES APPLY TO CURRENT PERIOD OF SERVICE (unless otherwise indicated)

DD FORM-214

HEADQUARTERS COPY Army and Air Force: Attach To Service Record
Navy: To Bureau of Naval Personnel, Washington, D. C.

REQUEST FOR INFORMATION FROM UNIFORMED SERVICES

TOE 420

1. IDENTIFICATION OF VETERAN *(to be completed by Social Security Administration)*

NAME USED IN SERVICE *(Last, first, middle)*	DATE OF BIRTH	DATE OF DEATH	SOCIAL SECURITY NUMBER
Alan B. Watts	1/1/17		004-07-5842

PERIODS OF ACTIVE MILITARY SERVICE

BRANCH OF SERVICE	DATE ACTIVE DUTY BEGAN	DATE MEMBERSHIP ENDED	SERVICE NUMBER	RATE OR RANK
U.S.C.G.	2/15/38	4/1/58	209-630	CPO E-7

PERIODS OF MILITARY RESERVE MEMBERSHIP DATING AFTER DUTY SHOWN ABOVE. IF NONE, CHECK THIS BLOCK. ☐

BRANCH OF SERVICE	DATE MEMBERSHIP BEGAN	DATE MEMBERSHIP ENDED	SERVICE NUMBER	RATE OR RANK

PRESENT STATUS *(or status at death):* ☐ Military Retiree ☐ Discharged *(No current military status)*

2. CERTIFICATION REQUESTED *(Social Security will check applicable blocks)*

☒ active service after Sept. 7, 1939 *(Part A on reverse)*

☐ retired or retainer pay *(Part B on reverse)*

☐ evidence of age or date of birth in military file *(Part C on reverse)*

REMARKS BY SOCIAL SECURITY ADMINISTRATION:

INSTRUCTIONS FOR UNIFORMED SERVICE OR GSA RECORDS CENTER

In all cases, please verify the veteran's name and service number furnished by the Social Security Administration. If identical with the military file, check "Yes" in the spaces provided on the reverse of this form; if different, check "No" and enter the name and/or service number shown in the military file.

Then certify the information requested by the Social Security Administration in item 2 above. All applicable items in the block are to be filled in by the certifying organization. If you need additional space or remarks are appropriate, use the "Remarks" space on the reverse.

The duplicate copy of this form should be kept in the veteran's military file whenever a certification about retired or retainer pay (Part B) is furnished. If there is ever a subsequent change made in the retirement record which affects the information furnished, the Social Security Administration should be advised accordingly.

PART A – This information permits the Social Security Administration to determine whether the veteran had active military or naval service during World War II (September 16, 1940–July 24, 1947) or post-World War II (July 25, 1947–December 31, 1956) for which military service wage credits may be granted. List each period of service and identify all periods of service designated as "active duty for training."

PART B – Social Security needs this information to determine whether wage credits are precluded because another Federal Agency has determined that a periodic benefit is payable based in whole or part on active military service in World War II or post-World War II.

Military retired pay is based on the WW II or post-WW II period of service, as the case may be, if active service in the period *has ever* been directly credited (used) in establishing eligibility to the retired pay, or in computing the amount of such pay. Transfer to the Fleet Naval (or Marine Corps) Reserve is treated the same as a normal retirement for purposes of completing this form. A decision to retire an individual, when officially approved, constitutes a retirement even though for any reason no retired pay is ever made.

Items 1(c) and (d) – Active service was "used" in establishing eligibility to retired pay if it comprises part of the total minimum service required for retirement according to the provisions of law under which the veteran was actually retired. The fact that he was eligible for retirement under some other provision of law is immaterial.

Item 2(a) – Retired pay is "fixed" when one of several applicable formulas for computing retirement pay is selected. If the individual is given the option of deciding which formula is to be used, the pay is not "fixed" until the selection is made and approved.

Items 2(a), (b) and (c) – A "multiple of active service" is that number used to represent years of active service when computing retirement pay. For purposes of this multiple, fractions of one-half year or more of active service are counted as a whole year. However, when computing longevity retirement and pay from the Public Health Service, the multiple is the last full year.

Item 3 – The terms "active duty" and "active duty for training" have the same meaning as defined in Sec. 102 of Public Law 881, 84th Congress (Servicemen's and Veterans' Survivor Benefits Act).

PART C – This information is requested where proof of the veteran's age is needed to adjudicate his Social Security claim.

The oldest record giving the veteran's date of birth or age should be certified. However, if a later record contains discrepant date of birth or age, certify that record as well. (The "Remarks" block may be used as necessary.)

When certifying *age*, it is important to show the date as of which the age was given. For example, some World War I discharge or separation records may show the veteran's age when he entered service. In this case, the date of entry into service is the "Date As of Which Age Was Given" while the date of discharge may be the "Date Record Established."

(Originating Office)
SOCIAL SECURITY ADMINISTRATION

The information requested in item 2 above is needed by the Social Security Administration to adjudicate a claim based on the account of the above veteran. All available identifying information has been provided.

SIGNATURE OF SSA OFFICIAL

TITLE	DATE

FORM SSA-654 (3-74)

DEPARTMENT OF
HEALTH, EDUCATION, AND WELFARE
SOCIAL SECURITY ADMINISTRATION

CERTIFICATION BY UNIFORMED SERVICES

In response to the request on the reverse of this form the following information is hereby certified.

NAME OF VETERAN AS SHOWN IN MILITARY FILE

SAME AS FURNISHED BY SSA ☐ YES ☐ NO

SERVICE NUMBER

SAME AS FURNISHED BY SSA ☐ YES ☐ NO

A–CERTIFICATION ABOUT ACTIVE SERVICE AFTER SEPTEMBER 7, 1939

1. DATE(S) OF ENTRY INTO ACTIVE SERVICE
15 FEB 38
5 MAY 41

2. DATE(S) OF SEPARATION FROM ACTIVE SERVICE
14 FEB 41
1 APR 58

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

*IF CHARACTER OF SEPARATION WAS NOT *Honorable, Under Honorable Conditions, Dishonorable,* NOR *Bad Conduct* AS A RESULT OF A *General* COURT MARTIAL, CHECK REASON FOR SEPARATION BELOW:

a. ☐ DESERTION.
b. ☐ RESIGNATION FOR THE GOOD OF THE SERVICE *(Officers Only).*
c. ☐ CONSCIENTIOUS OBJECTOR WHO REFUSED TO WEAR THE UNIFORM OR OTHERWISE TO COMPLY WITH LAWFUL ORDERS OF COMPETENT MILITARY AUTHORITY.
d. ☐ CONVICTION BY A CIVIL COURT FOR TREASON, SABOTAGE, ESPIONAGE, MURDER, RAPE, ARSON, BURGLARY, ROBBERY, KIDNAPPING, ASSAULT WITH INTENT TO KILL, ASSAULT WITH A DANGEROUS WEAPON, OR OF AN ATTEMPT TO COMMIT ANY OF THESE CRIMES.
e. ☐ NONE OF THE ABOVE.

4. *If period of service was less than 90 days,* WAS INDIVIDUAL DISCHARGED OR RELEASED FROM ACTIVE SERVICE AS RESULT OF INJURY OR DISABILITY INCURRED OR AGGRAVATED IN SERVICE IN LINE OF DUTY?
☐ YES ☐ NO

5. IF A PERIOD OF SERVICE HAD AN ENTRY DATE AFTER 12/31/46 AND BEFORE 12/16/50, BY WHICH OF THE FOLLOWING WAS ENTRY EFFECTED?
☐ VOLUNTARY ENLISTMENT ☐ INDUCTION THROUGH MILITARY DRAFT ☐ CALL OR RECALL FROM MILITARY RESERVE

B–SERVICE DEPT. CERTIFICATION ABOUT RETIRED OR RETAINER PAY *(See instructions on reverse side)*

IF THE VETERAN WAS NEVER RETIRED or TRANSFERRED TO THE FLEET RESERVE, check this box. . . . ☐
Sign and return the form without answering items 1, 2 and 3 below.

1. (a) Was this veteran an enlisted member of the Army, Air Force, Navy, Marine Corps, or Coast Guard and retired after September 15, 1940, and before October 1, 1949, because of disability? . . . . . ☐ Yes ☐ No

(b) Was this veteran ever retired or transferred to the Fleet Naval (or Marine Corps) Reserve after September 15, 1940, for any reason other than disability which is the proximate result of the performance of active duty? . . . . . ☐ Yes ☐ No

If answer to 1 (a) or 1 (b) is "Yes," answer (c) and (d).

(c) Was active service after September 15, 1940, and before July 25, 1947, used to establish eligibility to receive retirement or retainer pay? . . . . . ☐ Yes ☐ No

(d) Was active service after July 24, 1947, and before January 1, 1957, used to establish eligibility to receive retirement or retainer pay? . . . . . ☐ Yes ☐ No

2. (a) Has the retirement (or retainer) pay of this individual ever been fixed under a formula which includes a multiple of active service? . . . . . ☐ Yes ☐ No

If answer is "Yes," answer (b) and (c).

(b) Was this multiple increased because of active service occurring after September 15, 1940, and before July 25, 1947? . . . . . ☐ Yes ☐ No

(c) Was this multiple increased because of active service occurring after July 24, 1947, and before January 1, 1957? . . . . . ☐ Yes ☐ No

[illegible]id the veteran have active duty or active duty for training after December 31, 1956? . . . ☐ Yes ☐ No

CERTIFICATION OF EVIDENCE OF AGE OR DATE OF BIRTH IN MILITARY FILE

[illegible]E OF RECORD OR DOCUMENT | DATE RECORD ESTAB. | PLACE OF BIRTH

DATE OF BIRTH | AGE *(If date of birth not given)* | DATE AS OF WHICH AGE WAS GIVEN *(e.g., date of entry)*

REMARKS BY CERTIFYING ORGANIZATION

NRW 10-20-78

NAME OF CERTIFYING ORGANIZATION | SIGNATURE

RANK OR TITLE | DATE

CG-2511 (Revised)
Form approved by Comptroller General, U. S.
February 25, 1938

ADDRESS THE COMMANDANT, U. S. COAST GUARD
AND REFER TO NO. (PE-RK 3)
CG-73

STATEMENT OF CREDITABLE SERVICE

UNITED STATES COAST GUARD HEADQUARTERS

WASHINGTON 16 August, 1950

From: Commandant.

To: Commanding Officer, CG Group, Portsmouth, N. H.
VIA: Commander, 1st CG District (pmp)
SUBJECT: WATTS, Alan Brennen (209-630) BM1(L)(AN), USCG.

Statement of service of.
REF: Ltr dtd 2-28-50 fm CO., Southwest Harbor, Me.

1. The following is a statement of the service of the above-named man for the purpose of computing pay:

Entered Service	Service Terminated	Absent Without Leave (Inclusive dates)		Sickness Due to Own Misconduct (Inclusive dates)		Nonperformance of Duty Because of (Inclusive dates)	
		FROM—	TO—	FROM—	TO—	FROM—	TO—
U.S.C.G.							
2-15-38	5-4-44 H D	NONE		NONE		NONE	
5-5-44	5-4-48 H D	NONE		NONE		NONE	
5-5-48							
Now serving							

B. A. SHAW
By direction

U. S. GOVERNMENT PRINTING OFFICE 16—32658-3

Return to 3-13
id
B

CG-2511 (Revised)
Form approved by Comptroller General, U. S.
February 25, 1938

ADDRESS THE COMMANDANT, U. S. COAST GUARD
AND REFER TO NO. (PS-EEG 3)
CG-73

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		FROM—	TO—	FROM—	TO—	FROM—	TO—
U.S.C.G.							
2-15-38	5-4-44 H D	NONE		NONE		NONE	
5-5-44	5-4-48 H D	NONE		NONE		NONE	
5-5-48							
Now serving							

D. A. SHAW
By direction

U. S. GOVERNMENT PRINTING OFFICE 16—32658-2

PE-14

UNITED STATES COAST GUARD

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

PE-1

19 February 1958

TONO: 53063/99201X

From: Commandant
To: WATTS, Alan R. (209-630) BMC, USCG
Via: Commander, First Coast Guard District (p)

Subj: Retirement; travel

1. Your application for retirement has been approved by the Commandant pursuant to the provisions of Title 14, United States Code, Section 355, and he has fixed the effective date of your retirement as 1 April 1958. Therefore, on that date you are placed on the inactive retired list of the United States Coast Guard. You will be separated in accordance with Chapter 12, Personnel Manual.

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

3. Travel expenses incident to the execution of this order are chargeable to travel order number indicated above. Transportation of dependents and shipment of household goods to your home of selection will be provided at government expense only if completed within one year from date of retirement.

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

R. E. MERRILL
By direction

Encl:
(1) Information relative to retirement

WHERE TREATED	DIAGNOSIS	BEGAN	ENDED	I. P. O. P.

WHERE TREATED	DIAGNOSIS	BEGAN	ENDED	I. P. O. P.
ROCKLAND ME	Typhoid inoc: Smallpox vacc.	2-16-38	3-18-38	OP
ROCKLAND ME	AT, inoc	2- 5-42	3-10-42	OP
ROCKLAND ME	S.P. Vacc	8-5-42	8-12-42	OP

NAME WATTS, Alan Brennen

SERVICE NO. 209-630

TREASURY DEPARTMENT
U. S. COAST GUARD
CGHQ-3433 (Rev. 11-53)

STATEMENT OF SERVICE - RETIRED PERSONNEL

LAST NAME	FIRST NAME	MIDDLE INITIAL	SERVICE NUMBER
WATTS,	Alan	B.	209-630

DATE OF BIRTH (Mo.-Day-Yr.)	GRADE OR RATE IN WHICH SERVING	PERMANENT GRADE OR RATE	GRADE OR RATE IN WHICH PLACED ON RETIRED LIST	EFFECTIVE DATE OF RETIREMENT (Mo.-Day-Yr.)
January 1, 1917	BMC	BMC	BMC	April 1, 1958

REASON FOR RETIREMENT

20 year service retirement

HAS INDIVIDUAL EVER HELD A GRADE OR RATE HIGHER THAN THAT HELD ON THE EFFECTIVE DATE OF RETIREMENT? ☐ YES ☒ NO IF "YES," LIST HIGHEST GRADE OR RATE HELD.

ON ENLISTED 20 YEAR RETIREMENTS, INDICATE WHETHER 10% ADDITIONAL FOR GOOD CONDUCT IS AUTHORIZED ☒ YES ☐ NO

TYPE OF SERVICE	FOR RETIREMENT (Active)			FOR PAY PURPOSES (Active and Inactive)		
	YEARS	MONTHS	DAYS	YEARS	MONTHS	DAYS
COAST GUARD	20	1	16	20	1	16
LIGHTHOUSE						
BUREAU MARINE INSPECTION						
ARMY						
NATIONAL GUARD						
NAVY						
NAVAL RESERVE						
NAVAL MILITIA						
MARINE CORPS						
AIR FORCE						
COAST & GEODETIC SURVEY						
INDICATE OTHER SERVICE HERE:						
TOTAL SERVICE TO EFFECTIVE DATE OF RETIREMENT	20	1	16	20	1	16

DATE	SIGNATURE
24 March 1958	A. E. McLANE

FOR USE BY MRS

TYPE RETIREMENT	PHYSICAL DIAGNOSIS	FILE NUMBER

F. Terry

Return to 3-13

PREVIOUS EDITIONS OF THIS FORM ARE OBSOLETE.

4393 Treasury CGHQ Wash. D.C.

NAME	SERVICE NO.	DATE OF RETIREMENT	RETIRED GRADE OR RATE
WATTS, Alan Brennen	209-630	4-1-58.	BMC

IF MAN HELD A GRADE OR RATING HIGHER THAN PRESENT RETIRED GRADE OR RATING, INDICATE HIGHEST GRADE OR RATING HELD DURING COAST GUARD SERVICE.

ENLISTED	DISCHARGED	MARK	PERIOD	COMPUTATION	ENLISTED	DISCHARGED	MARK	PERIOD	COMPUTATION
2-15-38	2-14-41	4.	36 M	144.					
2-15-41	5-4-44	4.	39 "	156.					
5-5-44	5-4-48	4	48 "	192					
5-5-48	5-12-52	4	48 "	192.					
5-13-52	4-1-58	4	71 "	284.					
		TOTAL	242 "	968.			TOTAL		

FINAL AVERAGE CONDUCT MARK	ENTITLED TO 10% FOR GOOD CONDUCT (Check appropriate box)	✓	YES		NO
4.					

DATE	COMPUTED BY	DATE	VERIFIED BY
3-21-58	Stricklin	3/24/58	EBuchan

TREASURY DEPARTMENT, U. S. COAST GUARD, CGHQ – 3534 (6-54)

6084

COMPUTATION OF AVERAGE CONDUCT MARKS FOR RETIRED PERSONNEL

3-31-57 ~~19~~ 20 - 1 - 16 4-1-58

18 / 1 / 16 Service for Retirement WATTS, Alan B. 209-630 BMC

Yrs. Mos. Days (Name) (ltr- 2-27-57) (Service No.) (Rate)

32

3-1-57

as of 31 March, 1956

ACTIVE SERVICE

	YEARS	MONTHS	DAYS
COAST GUARD	18	1	16
NAVY			
ARMY			
MARINE CORPS			
LIGHTHOUSE (Retirement)			
TOTAL SERVICE FOR RETIREMENT	18	1	16
INACTIVE SERVICE (Specify)			
LIGHTHOUSE (For Pay Purposes)			
TOTAL SERVICE FOR PAY PURPOSES	18	1	16

HIGHEST RANK OR RATING HELD BMC

Service Computed by Computed by FG Jerry 3-6-57

Service Verified by [illegible] 3-6-57

am

Retired Boat 666 ex WIZ6

ACS61A-2

.RE .URY DEPAR.MENT
U. S. Coast Guard
Form CGD1-FL-40 (6-57)

UNITED STATES COAST GUARD

Address Reply to:
Comdr., 1st CG District
1400 Custom House Boston, Mass.

Date: 31 MARCH 1958
File: L16-5/MM

From: WATTS, ALAN B. (209-630) BMC, USCG
To: Commandant (PS-2)
Via: (1) Commanding Officer,
(2) Authorized Certifying Officer

Subj: Notification of Change in Dependency Status for BAQ

1. Notification is made of the following change in dependency status which reduces or terminates entitlement to basic allowance for quarters. Documents required

Name of Dependent(s)	Relationship	Date and Nature of Change
LOUISE WATTS(W)(LC-1)	WIFE	4/1/58 RETIRED

2. The following allotment stoppage is requested:

Allottee	Month of Last Payment	Amount
LOUISE WATTS (w)(LC-1)	MARCH 1958	157.10

3. The following allotment start is requested:

Allottee's Name and address	Relationship	Mo. 1st Pmt.	Amount

For support of: _____

3-13
FILE

_____ (Signature of member, if required)

FIRST ENDORSEMENT

Date: _____
L16-5/MM

From: Commanding Officer, _____
To: Commandant (PS-2)
Via: Authorized Certifying Officer

U. A. SECTION
16 AUG 1960

1. Forwarded.

_____ (Commanding Officer By direction)

SECOND ENDORSEMENT
From: Authorized Certifying Officer
To: Commandant (PS-2)

1. Forwarded. BAQ (W)(LC-1) terminated as of 31 MARCH 1958 (and BAQ _____ commenced as of _____). Allotment action requested above entered on current pay record on 31 MARCH 1958.

J. E. GILES, CHSPCK, W-2, USCG
(Authorized Certifying Officer)

(For Comdt (PS-2) use only)
15 APR 1958
NO BAQ Payments Authorized for
____ dependents commencing
4/1/58
Chief, Dependents Allowance
545 to FP-1 on 15 APR 1958
CNL

3 APR 1958

UNITED STATES COAST GUARD

ADDRESS REPLY TO

11 October, 1950
Boon Island Light Station
New Castle N.H.

REFER TO FILE
From: WATTS, Alan B. (209-630) BM1(L)(AN)
To: Commandant (pmm)

Via: Commanding Officer, CG Group, Gloucester, Mass.
Authorized certifying Officer

Subj: Application for payment of basic allowance for quarters

1. I do hereby apply for basic allowance for quarters under the dependent assistance Act of 1950, on behalf of the relatives hereinafter named, and do certify the following to be true to the best of my knowledge and belief:

Name and address of dependant	Relationship	Place of marrage, Date birth 6of children
Louise Watts	Wife	Married, 16 February, 1940 Machias, Maine.
Wayne Alan Watts	Son	4 October, 1940, Machias,M

2. I hereby consent to checkage against my pay for any basic allowance for quarters paid on account of any relative later determined not to be a dependant as defined in existing laws and regulations.

3. I fubther certify that my dependants are not in occupancy of public quarters (except for brief visits in quarters assigned to another member), and that the aboved named dependants are not members of the armed forces on active duty.

4. Following are full names and addresses of each allottee, amount to be allotted to each, and month of first payment:

Allottee:	Month, 1st payment	Amount
Louise Watts, Machias, Maine	~~1 November, 1950~~ 8/54	$ ~~147.50~~ 157.10

Date on or after 1 Aug. from which basic allowance for quarters claimed for each dependant 1 August, 1950,

Alan B. Watts

Alan B. Watts, BM1(L)(AN)

Ind-1
Portsmouth Harbor LB Station
New Castle, N.H.

17 October, 1950

From: Officer in Charge, Portsmouth Harbor LB Station
To: COMMANDANT (PMM)

Via: 1. Commanding Officer, CG Group, Gloucester, Mass.
2. Authorized Certifying Officer.

Forwarded.

Cleo B. Faulkingham

Cleo B.Faulkingham, BMC(L)

NOV 2 1950

Ind-2
GROUP GLOUCESTER
Gloucester, Mass.

19 October, 1950

From: Commanding Officer
To: Commandant (PMM)
Via: Commander, 1st Coast Guard District Authorized Certifying Officer

Forwarded

A. E. HUNTLEY, CBOSN

Ind-3
ClCGD
Boston, Mass.

30 October, 1950

From: Authorized Certifying Officer
To: Commandant (PMM)

Forwarded, allotment totalling $147.50 registered, 1st. payment November, 1950.

W.E. SPARKS
CPCLK. USCG.

BAQ Payments Authorized for

2 dependents commencing

8/1/50

O.C. Goodman

Chief, Family Allowance Sec.

67.50

From compensation of -

APPLICATION FOR ALLOTMENT "Q-1"

WATTS, Alan B. (209-630) BM1

PAYABLE TO

Monthly allotment in the amount of

ONE HUNDRED FIFTY SEVEN AND 10/100 ($157.10) Dollars.
(Words) (Figures)

Name Louise Watts (W)

Street and No.

Post office MACHIAS State MAINE

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

Name

Reason for allotment

First payment: Month August, 1952

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

Rank or rating U. S. C. G.

, 19

Approved, allotment granted.

Commanding

Commander, District.

Witnessed and registered 12 August, 1952

T. M. KROTKY, CPCLK, A CO, USCG.
Pay officer,

16—12642—1

NOTICE TO PAYEE

This allotment has been placed in effect with first payment to be made for the month of

Checks will be mailed you on the last day of each month without further action on your part. Keep this office advised of any change of your address.

All inquiries regarding this allotment should show the name of the allotter and be addressed to the Allotment Disbursing Officer, U. S. Coast Guard, Washington, D. C.

Allotment Disbursing Officer.

DO NOT FOLD — MAIL FLAT

* Allotter or member immediate family

ALLOTMENT STOPPAGE "Q-1"

(209-630) BM1

Amount $ 147.60

Stop allotment after payment

Name Louise Watts (W)

for the month of July 19 52
for which checkage has been made.

Street and No.

REASON FOR STOPPAGE:

Post office MACHIAS State MAINE

(Signature of Allotter)

Rank or rating

APPROVED:

Commanding or
Commander District

STOPPAGE REGISTERED, Date 12 August , 1952

U. S. C. G.

Pay Officer T.M.KROTKY, CPCLK, ACO, USCG.

NOTICE TO ALLOTTEE

You are advised that this allotment has been discontinued after payment for the month indicated for the reason stated above.

Allotment Disbursing Officer.

©

ABSTRACT OF SERVICE—ENLISTED PERSONNEL

CG-2996 (Rev. 7-52)

1. NAME	2. SERVICE NO.	3. RATE (*Pencil*)	4. DATE RPTD. DIST. (*Pencil*)

5. EFFECTIVE DATE DATE REPORTED	6. UNIT	7. DATE DEPARTED	8. SERVICE YRS.	8. SERVICE MOS.	8. SERVICE DAYS	9. REMARKS	10. CARD NO.
10-1-52	GOOSE ROCKS LS	1-19-54					CGI-4750
1-19-54	Burnt Island LBS					CR BMC 9-1-54	
	"					CR BMC(T) 10-1-54	
	"	1-25-57				CR BMC 10-22-55	
1-29-57	Depot SW Harbor	9-1-58					
	RETIRED 20 yrs.						

1. NAME	2. SERVICE NO.	3. RATE (*Pencil*)	4. DATE RPTD. DIST. (*Pencil*)	
WATTS, Alan Brennen	209-630	BMC (T) (AV)	F-3-45	16—67555-1

WATTS, Alan Brennen (NAME) 209-630 (SERVICE NUMBER)

MARITAL STATUS M
NUMBER OF DEPENDENTS

Other creditable service— YRS. MOS. DAYS

Birth, date of 1 January, 1917
Birth, place of Jonesboro, Maine
Citizenship NB

UNIT	DATE	RATE	SERVICE YRS.	SERVICE MOS.	SERVICE DAYS	REMARKS
	Prior	Sea Service				
	Prior	Shore Service				
Port. Hbr LBS	5-13-56	BM1-1 (AN)				TR
Boon Is. L/S	6-6-56	"				TR
C.CG-D (Cactus) (TD)	5-12-52	"				TR
"	5-12-52	"				HDEE
"	5-13-52	"				REEN (6) years
Boon Is. L/S	5-13-52	"				TR
Goose Rocks L/S	10-1-52	"				Rptd

(2)

TREASURY DEPARTMENT
U. S. COAST GUARD
C.G. 9545
Revised Sept. 1941

WATTS, Alan Brenner — 209-630
(NAME) — (SERVICE NUMBER)

SINGLE
MARRIED X
WIDOWED
DIVORCED

Other creditable service — YRS. MOS. DAYS

Birth, date of 1 Januar y 1917
Birth, place of Jonesboro, Maine
Citizenship NB

16-11203-2

UNIT	DATE	RATE	SERVICE YRS.	SERVICE MOS.	SERVICE DAYS	REMARKS
S.W. Harbor (O.)	5-4-48	BMI (L)				Ind. Moose Peak LT
S W Harbor (O.)	5-5-48	BMI (L)				RE (Hqrs Reg. Auth 89.)
Moose Peak Grp (O1)	7-1-48	BMI (L)				Reg (Moose Peak LT)
[illegible]	5-6-48	BMI (L)				[illegible]
Groton Trad Sta	5-17-48	BMI (R)				to A to N.
Portsmouth Sta	1-11-49	BMI (L) (AN)				Ce. (CLTC ET.
Comdr. 1st CGD	1-28-49	BMI (L) (AN)				TR. Adm.
Moose Peak Grp (O1)	1-29-49	BMI (L) (AN)				TR. (Moose Peak LOS)

(1)

Form 9545
TREASURY DEPARTMENT
COAST GUARD
Revised Mar., 1930

(1) 2-14-42

B-42
B-43

SINGLE
MARRIED X
WIDOWED
DIVORCED

REGISTER ENLISTED FORCE

WATTS, Alan Brennon 209-630

Other creditable service— YRS. MOS. DAYS

Birth, date of, January 1, 1917

Birth, place of, Jonesboro, Maine

Citizenship, N. 2-13-47 ✓

2—8095

UNIT	DATE	RATE	SERVICE YRS.	SERVICE MOS.	SERVICE DAYS	REMARKS
BURNT ISLAND (1)	2-15-38	Surfman				SPECIAL TEMPORARY Orig. Enl. THREE YEARS Auth. F-2525-B- 2-9-38
BURNT ISLAND (BD)	7-1-39	Surfman				G.O. 37. 7-20-39
PORT CLYDE STA (BD)		Surfman				REORGANIZATION
PORT CLYDE STA(BD)	2-14-41	Surfman				HD. Auth: F.2525-B 2-9-41
PORT CLYDE STA(BD)	×2-15-41	Surfman				Re. THREE YEARS SPEC. TEMP.
PORT CLYDE STA.(BD)	× 6-10-42	B.M.2c.(Pro)				CR
Port Clyde Sta	1-27-43	BM 1c (Pro)				CR
Coltp Rockland Me	10-21-43	BM 1C (Pro)				DD Rate Made Perm ALCOAST 143-43 11-3-43
Port Clyde Sta.	11-4-43	BM 1C (Pro)				DD. (C.G. 38648)
Port Clyde Sta.	5-4-44	BM 1c (Pro)	3	7	20	HD ENL. EXT. PERD. FORM 2525B
Port Clyde Sta.	5-5-44	BM 1c (Pro)				RE. REG. EST. 4 YRS. AUTH. FORM 2525B
Westjonesport 01	4-3-45	BM 1C Perm				Tr. Great Wass Isl Station
Rockland Sta 01	8-1-46	BM 1c				Perm Moose Peak light x L/B
Rockland Sta 01	3-1-47	BM 1c (L)				Ct 476 2-27-47
S.W. Harbor Sta 01	4-2-48	BM 1c (L)				C. PC 36/47

TREASURY DEPARTMENT
U. S. COAST GUARD
CGHQ -3646 (12-55)

COMPLETE AND RETURN TO HQ

DESIGNATION OF BENEFICIARY FOR UNPAID RETIRED PAY

(See instructions on reverse side)

File 3-13

I hereby cancel any and all previous designations of beneficiaries to receive any amount of retired pay due and payable at my death and do designate the individuals named hereon to receive any such sums. I understand that this designation of beneficiary will remain in full force and effect until cancelled by me in writing.

RETIRED MEMBERS NAME *(Last, First, Middle)*	SERVICE NO.	GRADE OR RATE
WATTS, Alan B.	209-630	~~BMC~~ BMC

DESIGNATION OF BENEFICIARY

SHARE	NAME	ADDRESS	RELATIONSHIP
100%	Louise D. Watts	High Street Machias, Maine	Wife
%	Wayne A. Watts	High Street Machias, Maine	Son
%			

SIGNATURE AND ADDRESS OF WITNESS

Henry A Dircksen
Henry A. Dircken
Machias, Maine

SIGNATURE AND ADDRESS OF RETIRED MEMBER

Alan B. Watts
Alan B. Watts
High Street
Machias, Maine

DATE SIGNED
4/10/58

From - Mrs. Louise D. Watts.
15 High St.
Machias, Me

UNITED STATES COAST GUARD, WASHINGTON 25, D. C.

You are requested to furnish the Chief, Dependents Allowance Section, Coast Guard Headquarters with a certified copy of your marriage certificate.

Note: Failure to return this notice with the required certificate within twenty (20) days will result in suspension of your monthly BAQ allotment.

MAY

APR 20 1956

MAY 7 1956

(Form T-2)

RECORD OF A MARRIAGE

Groom Alan B. Watts

Bride Louise Dircksen

Residence of Groom Jonesboro, Maine

" " Bride Machias, Maine

Age of Groom 23

" " Bride 21

Color of Groom W

" " Bride W

Occupation of Groom U.S.Coast Guard

" " Bride Teacher

Birthplace of Groom Jonesboro, Maine

" " Bride Portland, Maine

No. of Marriage of Groom 1st

" " " " Bride 1st

Groom Widowed or Divorced S

Bride " " " S

Intention filed February 6, 1940

By whom married William R. Riddiough

Residence Machias, Maine

Official Station* Clergyman

Date of Marriage February 16, 1940

Place Machias, Maine

Clergyman, Justice of the Peace, etc.

(Record continued over)

MAY 7 1956

(Record Continued)

GROOM'S FATHER AND MOTHER

Father's Name Fred N. Watts

" Residence Jonesboro, Maine

" Color W

" Occupation Carpenter

" Birthplace Rogue Bluffs, Maine

Mother's Name Florence Look

" Residence Jonesboro, Maine

" Color W

" Occupation Housewife

" Birthplace Jonesboro, Maine

BRIDE'S FATHER AND MOTHER

Father's Name Johannes Dircksen

" Residence Machias, Maine

" Color W

" Occupation Baker

" Birthplace Denmark

Mother's Name Etta Fish

" Residence Machias, Maine

" Color W

" Occupation Housewife

" Birthplace Jonesboro, Maine

STATE OF MAINE

I hereby certify that the above marriage record is correct to the best of my knowledge and belief.

Florence B. Boynton

Clerk of Machias, Maine.

UNITED STATES COAST GUARD

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

PS-2
23 March 1956
P7

Mrs. Louise Watts
Machias, Maine

Re: WATTS, Alan B. (209-630) BM1(L)(AN)

Dear Madam:

The above named enlisted member of the United States Coast Guard has registered a Class Q allotment under the provisions of the Dependents Assistance Act of 1950. This allotment has been processed and if you are not currently receiving payment of this allotment, you may expect to receive payment in the very near future. However, for the payment of this allotment to continue, it will be necessary for you to forward the items checked below to the Chief, Dependents Allowance Section, United States Coast Guard Headquarters, Washington 25, D.C., with a minimum of delay:

☐ A certified copy of your certificate of marriage.

☐ A copy of your decree of divorce from each of your former marriages, certified by the clerk of court where issued. (Note: If a former marriage was dissolved by death, a certified copy of the certificate of death must be forwarded.)

☒ A certified copy of the PUBLIC RECORD OF BIRTH of, Wayne Alan Watts showing the full name of both parents.

(Note: This must be a copy of the public record of birth as issued by the Bureau of Vital Statistics of the State where the child was born. Notifications of Birth Registration, Baptismal Certificates, Hospital Certificates, etc., are not acceptable.)

☒ Unless the requested document is received in this office within ten (10) days from date, allotment checks may be withheld.

SECOND REQUEST

Sincerely yours,

F. S. TURNER
Lieutenant, U. S. Coast Guard
Chief, Dependents Allowance Section
By direction of the Commandant

4965 Treas. CGHQ Wash.DC

APR 16 1956

State of Maine

COPY OF A RECORD OF BIRTH

Place of Birth Machias, Maine

Child's Name Wayne Alan Watts

Date of Birth October 4, 1940 Sex Male Color White

Living or Stillborn Living Number of Child 1st Number of Children This Mother Now Living -

Father of Child

Name Alan Brennan Watts

Color W Age 23

Birthplace Jonesboro, Maine

Residence Machias, Maine

Street O'Brien Ave. No. --

Occupation Coast guard

Mother of Child

Maiden Name Louise Dircksen

Color W Age 21

Residence Machias, Maine

Birthplace Portland, Maine

Occupation Housewife

Name and address of physician (or other person) reporting this birth John F. Hanson, MD., Machias, Maine

Date when received by town clerk Oct. 21, 1940

I hereby certify that the above record is correct to the best of my knowledge and belief.

(Signed) Evelyn C. Hanscom, Clerk of Machias, Maine

I HEREBY CERTIFY that the foregoing is a true copy of a record of birth on file at the Division of Vital Statistics in Augusta, Maine.

ATTEST: Edson K Labrack, State Registrar, by [illegible], Clerk

BH-VS-CR 1 (1930)

APR 16 1956

UNITED STATES COAST GUARD

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

PS-2
P7
23 March 1956

Mrs. Louise Watts
Machias, Maine

Re: WATTS, Alan B. (209-630) BM1(L)(AN)

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SECOND REQUEST

Sincerely yours,

F. S. TURNER
Lieutenant, U. S. Coast Guard
Chief, Dependents Allowance Section
By direction of the Commandant

4965 Treas. CGHQ Wash.DC

Special pending file:KGG/hcd

UNITED STATES COAST GUARD

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

PS-2
18 October 1955
P7

Mrs. Louise Watts
Machias, Maine

Re: WATTS, Alan B. (209-630) BM1(L)(AN)

Dear Madam:

The above named enlisted member of the United States Coast Guard has registered a Class Q allotment under the provisions of the Dependents Assistance Act of 1950. This allotment has been processed and if you are not currently receiving payment of this allotment, you may expect to receive payment in the very near future. However, for the payment of this allotment to continue, it will be necessary for you to forward the items checked below to the Chief, Dependents Allowance Section, United States Coast Guard Headquarters, Washington 25, D.C., with a minimum of delay:

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(Note: This must be a copy of the public record of birth as issued by the Bureau of Vital Statistics of the State where the child was born. Notifications of Birth Registration, Baptismal Certificates, Hospital Certificates, etc., are not acceptable.)

☐

Sincerely yours,

F. S. TURNER
Lieutenant, U. S. Coast Guard
Chief, Dependents Allowance Section
By direction of the Commandant

4965 Treas. CGHQ Wash.DC

Pending file: CNL/hcd

From FA 820 documents

BAQ CLASS	DATE AUTH.	ANNUAL REDET.	DATE CANCELLED	REASON
~~(W)(LC-1)~~	~~11/43~~	~~9/44~~		
			MC	2/14/40 (Louise Dirksen) Machias, Maine
(W)(LC-1)	8/1/50			
			BC	10/4/40 (Wayne Alan Watts) KGG
(W)(LC)			3/30/58	Retired CNL

3-V-V?

3-1-58

UNITED STATES COAST GUARD

PERSONNEL DIVISION

ADDRESS REPLY TO:
COMMANDER
USCG GROUP
SOUTHWEST HARBOR, MAINE

FEB 28 9 49 AM 1957

H.J.

27 February 1957
P19-2

From: WATTS, Alan B. (209-630) BMC, USCG
To: Commandant (PE)
Via: (1) Commander, CG Group, Southwest Harbor, Maine
(2) Commander, First Coast Guard District (p)

Subj: Retirement; request for

Ref: (a) Personnel Instruction No. 8-57

1. I request retirement on the first day of March, 1958, or as soon thereafter as possible.

2. I understand that I will enter into my next pay period on 15 February 1960.

Alan B. Watts
ALAN B. WATTS

---

27 February 1957
P19-2

FIRST ENDORSEMENT

From: Commander, CG Group, Southwest Harbor, Maine
To: Commandant (PE)
Via: Commander, First Coast Guard District (p)

1. Forwarded for consideration.

G. W. Hupper.
G. W. HUPPER

---

p
28 February 1957

1957 MAR 4 14 12

PEA-A

SECOND ENDORSEMENT

From: Commander, First Coast Guard District
To: Commandant (PE)

1. Forwarded, approved.

Service as of 3-31-56

George R. Leslie
GEORGE R. LESLIE
By direction

18 yrs. 1 mo. 16 days

COMMANDER
USCG GROUP
SOUTHWEST HARBOR, MAINE

27 February 1957
P19-2

From: WATTS, Alan B. (209-630) BMC, USCG
To: Commandant (PE)
Via: (1) Commander, CG Group, Southwest Harbor, Maine
(2) Commander, First Coast Guard District (p)

Subj: Retirement; request for

Ref: (a) Personnel Instruction No. 8-57

1. I request retirement on the first day of March, 1958, or as soon thereafter as possible.

2. I understand that I will enter into my next pay period on 15 February 1960.

ALAN B. WATTS

---

27 February 1957
P19-2

FIRST ENDORSEMENT

From: Commander, CG Group, Southwest Harbor, Maine
To: Commandant (PE)
Via: Commander, First Coast Guard District (p)

1. Forwarded for consideration.

G. W. HUPPER

---

p
28 February 1957

SECOND ENDORSEMENT

From: Commander, First Coast Guard District
To: Commandant (PE)

1. Forwarded, approved.

GEORGE R. LESLIE
By direction

UNITED STATES COAST GUARD

RECEIVED
PERSONNEL DIVISION
JAN 21 10 17 AM 1958
FILE:

ADDRESS REPLY TO:
COMMANDER
USCG GROUP
SOUTHWEST HARBOR, MAINE

20 January 1958
P19-2 1958

CCGD
BOSTON 9, MASS.

From: WATTS, Alan B. (209-630)BMC, USCG
To: Commander, First Coast Guard District(p)
Via: Commander, CG Group, Southwest Harbor, Maine

Subj: Retirement List; request for information

Ref: (a) WATTS, Alan B. ltr P19-2 dtd 2/27/57

1. It is requested that the retirement list at headquarters be checked to ascertain if my name has been included.

Alan B. Watts
Alan B. Watts

First Endorsement 20 January 1958

From: Commander, CG Group, Southwest Harbor, Maine
To: Commander, First Coast Guard District (p)

1. Forwarded for action.

G. W. Hupper
G. W. HUPPER

---

p
MMP19-2
22 January 1958

1958 JAN 24 12 27

SECOND ENDORSEMENT on WATTS, Alan B. (209-630) BMC, USCG ltr of 1-20-58

From: Commander, First Coast Guard District
To: Commandant (PE)

1. Forwarded, readdressed.

J. F. Curry
J. F. CURRY
By direction

19-1-16
No. 32, April 1st

UNITED STATES COAST GUARD

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

PE-1
19 February 1958

TONO: 53063/99201X

FILE

From: Commandant
To: MATTS, Alan D. (209-630) BMC, USCG
Via: Commander, First Coast Guard District (p)

Subj: Retirement; travel

1. Your application for retirement has been approved by the Commandant pursuant to the provisions of Title 14, United States Code, Section 355, and he has fixed the effective date of your retirement as 1 April 1958. Therefore, on that date you are placed on the inactive retired list of the United States Coast Guard. You will be separated in accordance with Chapter 12, Personnel Manual.

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

3. Travel expenses incident to the execution of this order are chargeable to travel order number indicated above. Transportation of dependents and shipment of household goods to your home of selection will be provided at government expense only if completed within one year from date of retirement.

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

R. E. MORELL
By direction

1958 FEB 19 13 17
PEA-A

Encl:
(1) Information relative to retirement

42. HHISTOCK: ncb ret to 3-11

MILITARY PAY ORDER

MILITARY PAY ORDER NO. 246-58

NOTED L.D.G.

ORGANIZATION AND STATION: USCG GROUP SOUTHWEST HARBOR, MAINE

DATE: 1 APRIL 1958

TO DISBURSING OFFICER:

YOU ARE HEREBY AUTHORIZED TO OPEN, ADJUST OR CLOSE, AS INDICATED, THE PAY RECORDS OF THE INDIVIDUALS LISTED BELOW.

SERVICE NO.	LAST NAME—FIRST NAME—MIDDLE INITIAL	REASON FOR CHANGE	YEAR 1958 FROM—	YEAR 1958 TO—
209-630	WATTS, ALAN B.	2400, 3/31/58 Voluntarily Retired from USCG. Auth: COMDT(PE-1)ltr dtd 2/19/58 USCG TONO 53063/99201X Elects MA fm Boston, Mass. to Machias, Maine	3/31	F.O.
		NO FURTHER ENTRIES BELOW THIS LINE		

SYMBOL NO. (*Entered by D. O.*)	TYPED NAME AND GRADE OF CERTIFYING OFFICER	SIGNATURE OF CERTIFYING OFFICER
	C. W. HUPPER, CHBOSN W-2, USCG GROUP COMMANDER	C W Hupper

DD FORM 1 NOV 49 114

Replaces NME Form 114, 1 Dec 48, which may be used.

☆ U. S. GOVERNMENT PRINTING OFFICE 16—57771-2

FORM PRESCRIBED BY COMPTROLLER GENERAL, U. S. FEBRUARY 8, 1949

TREASURY DEPARTMENT
U. S. COAST GUARD
CG-3312 REVISED
FORM APPROVED BY
COMPTROLLER GENERAL, U. S.
NOVEMBER 12, 1953

INDIVIDUAL ORDER TO ADJUST PAY RECORD

Lon

1. LEAVE RATIONS OR LOSS OF PAY BY REASON OF ABSENCE:

- [x] ON ANNUAL LEAVE, AOL or AWOL period, if any, excused as unavoidable
- [ ] ON SICK LEAVE, AOL or AWOL period, if any, excused as unavoidable
- [ ] ON ANNUAL LEAVE, AOL period, if any, not excused as unavoidable
- [ ] ON SICK LEAVE, AOL period, if any, not excused as unavoidable
- [ ] WITHOUT LEAVE, not excused as unavoidable
- [ ] OVER LIBERTY, not excused as unavoidable

	HOUR	DATE
DEPARTURE	001	3/19/58
LEAVE OR LIBERTY EXPIRED	0900	4/1/58
RETURNED TO COAST GUARD JURISDICTION	2350	3/31/58

NOTED L.D.C.

NUMBER DAYS CHARGED TO LEAVE RECORD TWELVE(12)

Credit leave rations and/or check pay in accordance with the Comptrollers Manual.

2. CHANGE RATE: TO _____ (*Rate*) FROM _____ (*Rate*)

EFFECTIVE _____ (*Date change effected*) AUTHORITY _____ AUTHORITY RECEIVED _____ (*Date*)

3. CHANGE IN SERVICE FOR PAY PURPOSES:

	YEARS	MONTHS	DAYS
OTHER SERVICE*			
COAST GUARD SERVICE			
NET SERVICE OF			

ON _____ (*Date*) COMPLETED

* *Career Compensation Act of 1949. Statement of service filed in service record.*

4. COMMUTED RATIONS: FROM _____ (*Date*) TO _____ (*Date*)

Permission to mess separately has been granted. Commutation of rations to a mess or subsistence in kind has not and will not be authorized or furnished for this period.

5. SUBSISTENCE ALLOWANCE: FROM _____ (*Hour and date*) TO _____ (*Hour and date*) AT $ _____ per day

Rations in kind not available or furnished for this period.

6. QUARTERS ALLOWANCE: _____ (*Date*) TO _____ (*Date*) AT $ _____ per mo.

No Government quarters available. AND/OR AT $ _____ per day

7. MISCONDUCT: The below-named individual has been incapacitated for duty from _____ (*Date of admission*)

to _____ (*Date of discharge*) as a result of his own:

- [ ] INTEMPERATE USE OF DRUGS
- [ ] INTEMPERATE USE OF ALCOHOLIC LIQUORS

8. MISCELLANEOUS PAY ORDERS:

The Authorized Certifying Officer is authorized and directed to adjust pay record of the below-named individual for the reason and period stated above.

NOTE: VOID IF MORE THAN ONE ITEM IS COMPLETED

EFFECTIVE FOR ITEM 1 (Number) ONLY	SIGNATURE	GRADE AND TITLE	C. O. ORDER NO.
	G. W. HUPP R	CHOSEN W-2, ORUCOM	247-58
SHIP OR STATION		NAME OF A. C. O.	
USCG DEPOT SOUTHWEST HARBOR, ME.			

NAME (Last)	(First)	(Middle)	SERVICE NO.	RATE
WATTS,	ALAN	BRENNAN	209-630	BMC

INDIVIDUAL ORDER TO ADJUST PAY RECORD 16—69873-1 PAGE 12

ENLISTED PERSONNEL DATA CARD

CG-3291 (3-52)

1. NAME: LAST	FIRST	INITIAL	2. SERVICE NO.	3. RATE	4. PRESENT UNIT
WATTS,	Alan	B.	209-630	BM1 AN	Goose Rocks L/S

5. DATE ENLISTED	6. TERM ENL/EXT.	7. DATE EXP. ENL/EXT.	8. ACTIVE DUTY DATE	9. TERM REQ. ACT. DUTY	10. EXPECTED RELEASE DATE	11. DATE PREPARED
5-13-52	6	5-12-58	- -	- -	- -	6-7-52

12. DATE OF BIRTH	13. RACE	14. NO. DEPENDENTS	15. LOCATION OF DEPENDENTS	16. HOME OF RECORD	17. PFWOAD	18. LEGAL RES.
1-1-17	CAU	W~~IFE~~ 1 DC	Machias, Me.	- -	- -	Maine

19. CIVILIAN EDUCATION	20. LANGUAGE QUALIFICATIONS	21. CIVILIAN OCCUPATION
HS2	none	Coast Guard enlisted man

22. SPECIAL SKILLS, LICENSES, ETC.

none

CODING SPACE

23. TEST SCORES no record

GCT _____ MA _____ EK _____ SP _____ CA _____

AR _____ READ _____ MK _____ PI _____

24. EXPERIENCE (*Months*)

WITHIN CLUS: ASHORE 171 AFLOAT _____

OUTSIDE CLUS: ASHORE _____ AFLOAT _____

25. SERVICE PRIOR TO THIS ENLISTMENT

a. BRANCH USCG

b. ACTIVE SERVICE

12 YRS. 2 MOS. 28 DAYS

c. OTHER SERVICE

_____ YRS. _____ MOS. _____ DAYS

d. TOTAL NET SERVICE FOR PAY

14 ~~12~~ YRS. 2 MOS. 28 DAYS

26. SERVICE FOR BASIC PAY

16 2-14-54

COMP. ~~12~~ 14 YRS. ON ~~2-14-52~~

27. SERVICE FOR RETIREMENT

COMP. 14 YRS. ON ~~2-14-52~~

28. OFF DUTY TRAINING

CG Institute
Non-rate to Cox
Date completion UNK

29. SERVICE SCHOOLS COMPLETED

CGTS, Groton, Conn.
Aids to Navigation 24 weeks
1-17-49 AN designator

30. PROMOTION RECORD

RATE AND DESIG.	PERM. OR PRO.	EFF. DATE
BM1 AN	PERM.	11-3-45
BMC	PRO	10-1-54

31. REMARKS

1 Depot SW Harbor

32. RPTD DIST.

2-15-38

33. RPTD UNIT

10-1-54

1. NAME: LAST	FIRST	INITIAL	2. SERVICE NO.	3. RATE	4. PRESENT UNIT
WATTS,	Alan	B.	209-630	BMC(AN)	T Dunwoodal LBS

CG 3506-1

File 3-13

FP-4
13 May, 1958
MR

From: Commandant
To: Alan B. Watts (209-630) BMC, USCG, Retired
High Street
Machias, Maine

Subj: Retired Pay; allotment from

1. In reply to your recent letter requesting that premiums on your policy No. 5,071,484 to Sun Life Assurance Company of America be paid by allotment from your retired pay, you are advised that existing regulations do not permit the approval of this allotment.

2. Applications for allotment of pay submitted by retired personnel subsequent to retirement for purposes other than payment of premiums on Government and National Life Insurance policies, assessments to the Navy Mutual Aid Association and repayment of indebtedness to the government will not be approved by the Commandant.

Mailed 5/13/58 dc

C. C. GORDON
By direction

CPOLK:ds 6-17

acc 54310

Ret - 1 april - 58 COMDT (PS)

12-31-81

APPLICATION FOR ARMED FORCES IDENTIFICATION CARD, DD 2N
NAVPERS 2721 (NEW 3-59)

IA 0105-403-6700

PRINT OR TYPE

PART I—TO BE COMPLETED BY APPLICANT

SSAN: 004 07 5842

NAME (Last, First, Middle ini.)	GRADE OR RATE	OFFICER DESIGNATOR	FILE/SERVICE NO.
WATTS Alan B	~~BMC~~ CPO (E-7)		209 630

DUTY ASSIGNMENT— SHIP, STATION, OR DEPARTMENT (ENTER MAILING ADDRESS IF NOT ON ACTIVE DUTY)

15 High Street
Machias Maine 04654

FILED PE-91

REASON FOR REQUESTING CARD

- [ ] INITIAL ISSUE
- [ ] ENTRY ON EXTENDED ACTIVE DUTY
- [ ] RELEASED TO INACTIVE DUTY
- [XX] RETIRED WITH PAY
- [ ] REPLACE MUTILATED CARD
- [ ] REPLACE LOST, STOLEN, OR DESTROYED CARD (Explain on reverse)
- [ ] CHANGE IN GRADE
- [ ] PRESENT CARD EXPIRED
- [ ] OTHER (Specify)

DATE OF BIRTH	WEIGHT	HEIGHT	COLOR HAIR	COLOR EYES	BLOOD TYPE
1/1/17	155	71"	BROWN	BLUE	A

DATE OF APPLICATION: 23 SEP 71

SIGNATURE OF APPLICANT: Alan B Watts

PART II—TO BE COMPLETED BY VERIFYING OFFICER

The data entered in the items above have been verified and corrected as noted in the appropriate items:

TYPE OF DD2N TO BE ISSUED
- [ ] GREEN [ ] RED
- [X] GRAY (DD2CG)

GRAY CARD ONLY
X NOCIVMEDCARE
- [X] MEDICARE AUTHORIZED
- [ ] MEDICARE NOT AUTHORIZED

EXPIRATION DATE: AFTER 12-31-81 INDEFINITE

SIGNATURE, TITLE AND MAILING ADDRESS OF VERIFYING OFFICER
S. HUTCHINSON, Chief
Records Branch
Enlisted Personnel Division
U. S. Coast Guard, Washington, D. C.

S Hutchinson

PART III—TO BE COMPLETED BY ISSUING OFFICER

CARD NO. ISSUED	DATE OF ISSUE	SIGNATURE, TITLE AND MAILING ADDRESS OF ISSUING OFFICER
15778	10-8-71	T. B. IRISH, JR., LCDR, USCG, PO

T B Irish Jr

DEPARTMENT OF
HEALTH, EDUCATION, AND WELFARE
SOCIAL SECURITY ADMINISTRATION

CERTIFICATION BY UNIFORMED SERVICES

In response to the request on the reverse of this form the following information is hereby certified.

NAME OF VETERAN AS SHOWN IN MILITARY FILE	SERVICE NUMBER
SAME AS FURNISHED BY SSA ☐ YES ☐ NO	SAME AS FURNISHED BY SSA ☐ YES ☐ NO

A–CERTIFICATION ABOUT ACTIVE SERVICE AFTER SEPTEMBER 7, 1939

1. DATE(S) OF ENTRY INTO ACTIVE SERVICE: 15 Feb 1938

2. DATE(S) OF SEPARATION FROM ACTIVE SERVICE: 1 April 1958

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

*IF CHARACTER OF SEPARATION WAS NOT *Honorable, Under Honorable Conditions, Dishonorable,* NOR *Bad Conduct* AS A RESULT OF A *General* COURT MARTIAL, CHECK REASON FOR SEPARATION BELOW:

a. ☐ DESERTION.

b. ☐ RESIGNATION FOR THE GOOD OF THE SERVICE *(Officers Only).*

c. ☐ CONSCIENTIOUS OBJECTOR WHO REFUSED TO WEAR THE UNIFORM OR OTHERWISE TO COMPLY WITH LAWFUL ORDERS OF COMPETENT MILITARY AUTHORITY.

d. ☐ CONVICTION BY A CIVIL COURT FOR TREASON, SABOTAGE, ESPIONAGE, MURDER, RAPE, ARSON, BURGLARY, ROBBERY, KIDNAPPING, ASSAULT WITH INTENT TO KILL, ASSAULT WITH A DANGEROUS WEAPON, OR OF AN ATTEMPT TO COMMIT ANY OF THESE CRIMES.

e. ☐ NONE OF THE ABOVE.

4. *If period of service was less than 90 days,* WAS INDIVIDUAL DISCHARGED OR RELEASED FROM ACTIVE SERVICE AS RESULT OF INJURY OR DISABILITY INCURRED OR AGGRAVATED IN SERVICE IN LINE OF DUTY?

☐ YES ☐ NO

5. IF A PERIOD OF SERVICE HAD AN ENTRY DATE AFTER 12/31/46 AND BEFORE 12/16/50, BY WHICH OF THE FOLLOWING WAS ENTRY EFFECTED?

☐ VOLUNTARY ENLISTMENT ☐ INDUCTION THROUGH MILITARY DRAFT ☐ CALL OR RECALL FROM MILITARY RESERVE

B–SERVICE DEPT. CERTIFICATION ABOUT RETIRED OR RETAINER PAY *(See instructions on reverse side)*

IF THE VETERAN WAS NEVER RETIRED or TRANSFERRED TO THE FLEET RESERVE, check this box. . . . ☐
Sign and return the form without answering items 1, 2 and 3 below.

1. (a) Was this veteran an enlisted member of the Army, Air Force, Navy, Marine Corps, or Coast Guard and retired after September 15, 1940, and before October 1, 1949, because of disability?	☐ Yes	☐ No
(b) Was this veteran ever retired or transferred to the Fleet Naval (or Marine Corps) Reserve after September 15, 1940, for any reason other than disability which is the proximate result of the performance of active duty?	☐ Yes	☐ No
If answer to 1 (a) or 1 (b) is "Yes," answer (c) and (d).		
(c) Was active service after September 15, 1940, and before July 25, 1947, used to establish eligibility to receive retirement or retainer pay?	☐ Yes	☐ No
(d) Was active service after July 24, 1947, and before January 1, 1957, used to establish eligibility to receive retirement or retainer pay?	☐ Yes	☐ No
2. (a) Has the retirement (or retainer) pay of this individual ever been fixed under a formula which includes a multiple of active service?	☐ Yes	☐ No
If answer is "Yes," answer (b) and (c).		
(b) Was this multiple increased because of active service occurring after September 15, 1940, and before July 25, 1947?	☐ Yes	☐ No
(c) Was this multiple increased because of active service occurring after July 24, 1947, and before January 1, 1957?	☐ Yes	☐ No
3. Did the veteran have active duty or active duty for training after December 31, 1956?	☐ Yes	☐ No

C–CERTIFICATION OF EVIDENCE OF AGE OR DATE OF BIRTH IN MILITARY FILE

NAME OF RECORD OR DOCUMENT	DATE RECORD ESTAB.	PLACE OF BIRTH

DATE OF BIRTH	AGE *(If date of birth not given)*	DATE AS OF WHICH AGE WAS GIVEN *(e.g., date of entry)*

REMARKS BY CERTIFYING ORGANIZATION

NAME OF CERTIFYING ORGANIZATION	SIGNATURE
NAV 1-8-79 Amyen	
	RANK OR TITLE / DATE

1. IDENTIFICATION OF VETERAN *(to be completed by Social Security Administration)*

NAME USED IN SERVICE *(Last, first, middle)*	DATE OF BIRTH	DATE OF DEATH	SOCIAL SECURITY NUMBER
Alan R. Watts	1/1/17		004-07-5842

PERIODS OF ACTIVE MILITARY SERVICE

BRANCH OF SERVICE	DATE ACTIVE DUTY BEGAN	DATE MEMBERSHIP ENDED	SERVICE NUMBER	RATE OR RANK
U.S.C.G.	2/15/38	4/1/58	209-630	CPO E-7

PERIODS OF MILITARY RESERVE MEMBERSHIP DATING AFTER DUTY SHOWN ABOVE. IF NONE, CHECK THIS BLOCK. ☐

BRANCH OF SERVICE	DATE MEMBERSHIP BEGAN	DATE MEMBERSHIP ENDED	SERVICE NUMBER	RATE OR RANK

PRESENT STATUS *(or status at death)*: ☐ Military Retiree ☐ Discharged *(No current military status)*

2. CERTIFICATION REQUESTED *(Social Security will check applicable blocks)*

☒ active service after Sept. 7, 1939 *(Part A on reverse)*
☐ retired or retainer pay *(Part B on reverse)*
☐ evidence of age or date of birth in military file *(Part C on reverse)*

REMARKS BY SOCIAL SECURITY ADMINISTRATION:

INSTRUCTIONS FOR UNIFORMED SERVICE OR GSA RECORDS CENTER

In all cases, please verify the veteran's name and service number furnished by the Social Security Administration. If identical with the military file, check "Yes" in the spaces provided on the reverse of this form; if different, check "No" and enter the name and/or service number shown in the military file.

Then certify the information requested by the Social Security Administration in item 2 above. All applicable items in the block are to be filled in by the certifying organization. If you need additional space or remarks are appropriate, use the "Remarks" space on the reverse.

The duplicate copy of this form should be kept in the veteran's military file whenever a certification about retired pay or retainer pay (Part B) is furnished. If there is ever a subsequent change made in the retirement record which affects the information furnished, the Social Security Administration should be advised accordingly.

PART A – This information permits the Social Security Administration to determine whether the veteran had active military or naval service during World War II (September 16, 1940–July 24, 1947) or post-World War II (July 25, 1947–December 31, 1956) for which military service credits may be granted. List each period of service and identify all periods of service designated as "active duty for training."

PART B – Social Security needs this information to determine whether wage credits are precluded because another Federal Agency has determined that a periodic benefit is payable based in whole or part on active military service in World War II or post-World War II.

Military retired pay is based on the WW II or post-WW II period of service, as the case may be, if active service in the period *has ever* been directly credited (used) in establishing eligibility to the retired pay, or in computing the amount of such pay. Transfer to the Fleet Naval (or Marine Corps) Reserve is treated the same as a normal retirement for purposes of completing this form. A decision to retire an individual, when officially approved, constitutes a retirement even though for any reason no retired pay is ever made.

Items 1(c) and (d) – Active service was "used" in establishing eligibility to retired pay if it comprises part of the total minimum service required for retirement according to the provisions of law under which the veteran was actually retired. The fact that he was eligible for retirement under some other provision of law is immaterial.

Item 2(a) – Retired pay is "fixed" when one of several applicable formulas for computing retirement pay is selected. If the individual is given the option of deciding which formula is to be used, the pay is not "fixed" until the selection is made and approved.

Items 2(a), (b) and (c) – A "multiple of active service" is that number used to represent years of active service when computing retirement pay. For purposes of this multiple, fractions of one-half year or more of active service are counted as a whole year. However, when computing longevity retirement and pay from the Public Health Service, the multiple is the last full year.

Item 3 – The terms "active duty" and "active duty for training" have the same meaning as defined in Sec. 102 of Public Law 881, 84th Congress (Servicemen's and Veterans' Survivor Benefits Act).

PART C – This information is requested where proof of the veteran's age is needed to adjudicate his Social Security claim.

The oldest record giving the veteran's date of birth or age should be certified. However, if a later record contains discrepant date of birth or age, certify that record as well. (The "Remarks" block may be used as necessary.)

When certifying *age*, it is important to show the date as of which the age was given. For example, some World War I discharge or separation records may show the veteran's age when he entered service. In this case, the date of entry into service is the "Date As of Which Age Was Given" while the date of discharge may be the "Date Record Established."

CLAYTON, MISSOURI
JAN 3 1979
71742
SSA DISTRICT OFFICE

(Originating Office)
SOCIAL SECURITY ADMINISTRATION

202 Harlow St.
Federal Office Building
Bangor, ME 04401

The information requested in item 2 above is needed by the Social Security Administration to adjudicate a claim based on the account of the above veteran. All available identifying information has been provided.

SIGNATURE OF SSA OFFICIAL

TITLE | DATE

FORM SSA-654 (3-74)

NC3 CG

Reg # 004/444

15 High Street
Machias, Maine 04654
Sept. 26, 1978

Commandant (GFPS)
Dept. of Transportation
U.S. Coast Guard
Washington, D.C. 20590

Dear Sir:

For Social Security purposes, it has been requested that I supply them with information pretaining to my Military Service between 1951-1958. The form number they requested is DD214. I would appreciate a copy of this information forwarded to me.

Respectfully yours,
Alan B. Watts

Alan B. Watts (209-630) CPO (E-7)
S.S. No. 004-07-5842

Sent 10-12-78 dr

DEPARTMENT OF
HEALTH, EDUCATION, AND WELFARE
SOCIAL SECURITY ADMINISTRATION

CERTIFICATION BY UNIFORMED SERVICES

In response to the request on the reverse of this form the following information is hereby certified.

NAME OF VETERAN AS SHOWN IN MILITARY FILE	SERVICE NUMBER
SAME AS FURNISHED BY SSA [X] YES [ ] NO	SAME AS FURNISHED BY SSA [X] YES [ ] NO

A–CERTIFICATION ABOUT ACTIVE SERVICE AFTER SEPTEMBER 7, 1939

1. DATE(S) OF ENTRY INTO ACTIVE SERVICE	2. DATE(S) OF SEPARATION FROM ACTIVE SERVICE	3. CHARACTER OF SEPARATION(S) * (*If Bad Conduct*, INDICATE IF GIVEN AS A RESULT OF A *General* COURT MARTIAL)
15 FEB 38 5 MAY 41	14 FEB 41 1 APR 58	HON HON

*IF CHARACTER OF SEPARATION WAS NOT *Honorable, Under Honorable Conditions, Dishonorable,* NOR *Bad Conduct* AS A RESULT OF A *General* COURT MARTIAL, CHECK REASON FOR SEPARATION BELOW:

a. [ ] DESERTION.

b. [ ] RESIGNATION FOR THE GOOD OF THE SERVICE *(Officers Only)*.

c. [ ] CONSCIENTIOUS OBJECTOR WHO REFUSED TO WEAR THE UNIFORM OR OTHERWISE TO COMPLY WITH LAWFUL ORDERS OF COMPETENT MILITARY AUTHORITY.

d. [ ] CONVICTION BY A CIVIL COURT FOR TREASON, SABOTAGE, ESPIONAGE, MURDER, RAPE, ARSON, BURGLARY, ROBBERY, KIDNAPPING, ASSAULT WITH INTENT TO KILL, ASSAULT WITH A DANGEROUS WEAPON, OR OF AN ATTEMPT TO COMMIT ANY OF THESE CRIMES.

e. [ ] NONE OF THE ABOVE.

4. *If period of service was less than 90 days,* WAS INDIVIDUAL DISCHARGED OR RELEASED FROM ACTIVE SERVICE AS RESULT OF INJURY OR DISABILITY INCURRED OR AGGRAVATED IN SERVICE IN LINE OF DUTY?

[ ] YES [ ] NO

5. IF A PERIOD OF SERVICE HAD AN ENTRY DATE AFTER 12/31/46 AND BEFORE 12/16/50, BY WHICH OF THE FOLLOWING WAS ENTRY EFFECTED?

[X] VOLUNTARY ENLISTMENT [ ] INDUCTION THROUGH MILITARY DRAFT [ ] CALL OR RECALL FROM MILITARY RESERVE

B–SERVICE DEPT. CERTIFICATION ABOUT RETIRED OR RETAINER PAY *(See instructions on reverse side)*

IF THE VETERAN WAS NEVER RETIRED or TRANSFERRED TO THE FLEET RESERVE, check this box. . . . [ ]
Sign and return the form without answering items 1, 2 and 3 below.

1. (a) Was this veteran an enlisted member of the Army, Air Force, Navy, Marine Corps, or Coast Guard and retired after September 15, 1940, and before October 1, 1949, because of disability? . . . . . [ ] Yes [ ] No

   (b) Was this veteran ever retired or transferred to the Fleet Naval (or Marine Corps) Reserve after September 15, 1940, for any reason other than disability which is the proximate result of the performance of active duty? . . . . . [ ] Yes [ ] No

   If answer to 1 (a) or 1 (b) is "Yes," answer (c) and (d).

   (c) Was active service after September 15, 1940, and before July 25, 1947, used to establish eligibility to receive retirement or retainer pay? . . . . . [ ] Yes [ ] No

   (d) Was active service after July 24, 1947, and before January 1, 1957, used to establish eligibility to receive retirement or retainer pay? . . . . . [ ] Yes [ ] No

2. (a) Has the retirement (or retainer) pay of this individual ever been fixed under a formula which includes a multiple of active service? . . . . . [ ] Yes [ ] No

   If answer is "Yes," answer (b) and (c).

   (b) Was this multiple increased because of active service occurring after September 15, 1940, and before July 25, 1947? . . . . . [ ] Yes [ ] No

   (c) Was this multiple increased because of active service occurring after July 24, 1947, and before January 1, 1957? . . . . . [ ] Yes [ ] No

3. Did the veteran have active duty or active duty for training after December 31, 1956? . . . [ ] Yes [ ] No

C–CERTIFICATION OF EVIDENCE OF AGE OR DATE OF BIRTH IN MILITARY FILE

NAME OF RECORD OR DOCUMENT	DATE RECORD ESTAB.	PLACE OF BIRTH

*DATE OF BIRTH	AGE *(If date of birth not given)*	DATE AS OF WHICH AGE WAS GIVEN *(e.g., date of entry)*

REMARKS BY CERTIFYING ORGANIZATION

NCW
CODE: NCPM DATE: 10-30-78
NATIONAL PERSONNEL RECORDS CENTER (MPR), GSA
ST. LOUIS, MO 63132
BY: T. Jones

NAME OF CERTIFYING ORGANIZATION	SIGNATURE
	RANK OR TITLE / DATE

REQUEST FOR INFORMATION FROM UNIFORMED SERVICES OON 14424 OE 420

1. IDENTIFICATION OF VETERAN *(to be completed by Social Security Administration)*

NAME USED IN SERVICE *(Last, first, middle)*	DATE OF BIRTH	DATE OF DEATH	SOCIAL SECURITY NUMBER
Alan B. Watts	1/1/17		004-07-5842

PERIODS OF ACTIVE MILITARY SERVICE

BRANCH OF SERVICE	DATE ACTIVE DUTY BEGAN	DATE MEMBERSHIP ENDED	SERVICE NUMBER	RATE OR RANK
U.S.C.G.	2/15/38	4/1/58	209-630	CPO E-7

PERIODS OF MILITARY RESERVE MEMBERSHIP DATING AFTER DUTY SHOWN ABOVE. IF NONE, CHECK THIS BLOCK. ☐

BRANCH OF SERVICE	DATE MEMBERSHIP BEGAN	DATE MEMBERSHIP ENDED	SERVICE NUMBER	RATE OR RANK

PRESENT STATUS *(or status at death):* ☐ Military Retiree ☐ Discharged *(No current military status)*

2. CERTIFICATION REQUESTED *(Social Security will check applicable blocks)*

☒ active service after Sept. 7, 1939 *(Part A on reverse)*
☐ retired or retainer pay *(Part B on reverse)*
☐ evidence of age or date of birth in military file *(Part C on reverse)*

REMARKS BY SOCIAL SECURITY ADMINISTRATION:

INSTRUCTIONS FOR UNIFORMED SERVICE OR GSA RECORDS CENTER

In all cases, please verify the veteran's name and service number furnished by the Social Security Administration. If identical with the military file, check "Yes" in the spaces provided on the reverse of this form; if different, check "No" and enter the name and/or service number shown in the military file.

Then certify the information requested by the Social Security Administration in item 2 above. All applicable items in the block are to be filled in by the certifying organization. If you need additional space or remarks are appropriate, use the "Remarks" space on the reverse.

The duplicate copy of this form should be kept in the veteran's military file whenever a certification about retired or retainer pay (Part B) is furnished. If there is ever a subsequent change made in the retirement record which affects the information furnished, the Social Security Administration should be advised accordingly.

PART A – This information permits the Social Security Administration to determine whether the veteran had active military or naval service during World War II (September 16, 1940–July 24, 1947) or post-World War II (July 25, 1947–December 31, 1956) for which military service wage credits may be granted. List each period of service and identify all periods of service designated as "active duty for training."

PART B – Social Security needs this information to determine whether wage credits are precluded because another Federal Agency has determined that a periodic benefit is payable based in whole or part on active military service in World War II or post-World War II.

Military retired pay is based on the WW II or post-WW II period of service, as the case may be, if active service in the period *has ever* been directly credited (used) in establishing eligibility to the retired pay, or in computing the amount of such pay. Transfer to the Fleet Naval (or Marine Corps) Reserve is treated the same as a normal retirement for purposes of completing this form. A decision to retire an individual, when officially approved, constitutes a retirement even though for any reason no retired pay is ever made.

Items 1(c) and (d) – Active service was "used" in establishing eligibility to retired pay if it comprises part of the total minimum service required for retirement according to the provisions of law under which the veteran was actually retired. The fact that he was eligible for retirement under some other provision of law is immaterial.

Item 2(a) – Retired pay is "fixed" when one of several applicable formulas for computing retirement pay is selected. If the individual is given the option of deciding which formula is to be used, the pay is not "fixed" until the selection is made and approved.

Items 2(a), (b) and (c) – A "multiple of active service" is that number used to represent years of active service when computing retirement pay. For purposes of this multiple, fractions of one-half year or more of active service are counted as a whole year. However, when computing longevity retirement and pay from the Public Health Service, the multiple is the last full year.

Item 3 – The terms "active duty" and "active duty for training" have the same meaning as defined in Sec. 102 of Public Law 881, 84th Congress (Servicemen's and Veterans' Survivor Benefits Act).

PART C – This information is requested where proof of the veteran's age is needed to adjudicate his Social Security claim.

The oldest record giving the veteran's date of birth or age should be certified. However, if a later record contains discrepant date of birth or age, certify that record as well. (The "Remarks" block may be used as necessary.)

When certifying *age*, it is important to show the date as of which the age was given. For example, some World War I discharge or separation records may show the veteran's age when he entered service. In this case, the date of entry into service is the "Date As of Which Age Was Given" while the date of discharge may be the "Date Record Established."

(Originating Office)
SOCIAL SECURITY ADMINISTRATION

FILE W/O ACTION
NO RETARM ADD.
10-23-78 TJ

The information requested in item 2 above is needed by the Social Security Administration to adjudicate a claim based on the account of the above veteran. All available identifying information has been provided.

SIGNATURE OF SSA OFFICIAL

TITLE | DATE

FORM SSA-654 (3-74)

REQUEST FOR INFORMATION FROM UNIFORMED SERVICES

TOE 420

1. IDENTIFICATION OF VETERAN *(to be completed by Social Security Administration)*

NAME USED IN SERVICE *(Last, first, middle)*	DATE OF BIRTH	DATE OF DEATH	SOCIAL SECURITY NUMBER
Alan R. Watts	1/1/17		004-07-5842

PERIODS OF ACTIVE MILITARY SERVICE

BRANCH OF SERVICE	DATE ACTIVE DUTY BEGAN	DATE MEMBERSHIP ENDED	SERVICE NUMBER	RATE OR RANK
U.S.C.G.	2/15/38	4/1/58	209-630	CPO E-7

PERIODS OF MILITARY RESERVE MEMBERSHIP DATING AFTER DUTY SHOWN ABOVE. IF NONE, CHECK THIS BLOCK. ☐

BRANCH OF SERVICE	DATE MEMBERSHIP BEGAN	DATE MEMBERSHIP ENDED	SERVICE NUMBER	RATE OR RANK

PRESENT STATUS *(or status at death):* ☐ Military Retiree ☐ Discharged *(No current military status)*

2. CERTIFICATION REQUESTED *(Social Security will check applicable blocks)*

☒ active service after Sept. 7, 1939 *(Part A on reverse)*

☐ retired or retainer pay *(Part B on reverse)*

☐ evidence of age or date of birth in military file *(Part C on reverse*

REMARKS BY SOCIAL SECURITY ADMINISTRATION:

follow up

INSTRUCTIONS FOR UNIFORMED SERVICE OR GSA RECORDS CENTER

In all cases, please verify the veteran's name and service number furnished by the Social Security Administration. If identical with the military file, check "Yes" in the spaces provided on the reverse of this form; if different, check "No" and enter the name and/or service number shown in the military file.

Then certify the information requested by the Social Security Administration in item 2 above. All applicable items in the block are to be filled in by the certifying organization. If you need additional space or remarks are appropriate, use the "Remarks" space on the reverse.

The duplicate copy of this form should be kept in the veteran's military file whenever a certification about retired or retainer pay (Part B) is furnished. If there is ever a subsequent change made in the retirement record which affects the information furnished, the Social Security Administration should be advised accordingly.

PART A – This information permits the Social Security Administration to determine whether the veteran had active military or naval service during World War II (September 16, 1940–July 24, 1947) or post-World War II (July 25, 1947–December 31, 1956) for which military service wage credits may be granted. List each period of service and identify all periods of service designated as "active duty for training."

PART B – Social Security needs this information to determine whether wage credits are precluded because another Federal Agency has determined that a periodic benefit is payable based in whole or part on active military service in World War II or post-World War II.

Military retired pay is based on the WW II or post-WW II period of service, as the case may be, if active service in the period *has ever* been directly credited (used) in establishing eligibility to the retired pay, or in computing the amount of such pay. Transfer to the Fleet Naval (or Marine Corps) Reserve is treated the same as a normal retirement for purposes of completing this form. A decision to retire an individual, when officially approved, constitutes a retirement even though for any reason no retired pay is ever made.

Items 1(c) and (d) – Active service was "used" in establishing eligibility to retired pay if it comprises part of the total minimum service required for retirement according to the provisions of law under which the veteran was actually retired. The fact that he was eligible for retirement under some other provision of law is immaterial.

Item 2(a) – Retired pay is "fixed" when one of several applicable formulas for computing retirement pay is selected. If the individual is given the option of deciding which formula is to be used, the pay is not "fixed" until the selection is made and approved.

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Item 3 – The terms "active duty" and "active duty for training" have the same meaning as defined in Sec. 102 of Public Law 881, 84th Congress (Servicemen's and Veterans' Survivor Benefits Act).

PART C – This information is requested where proof of the veteran's age is needed to adjudicate his Social Security claim.

The oldest record giving the veteran's date of birth or age should be certified. However, if a later record contains discrepant date of birth or age, certify that record as well. (The "Remarks" block may be used as necessary.)

When certifying *age*, it is important to show the date as of which the age was given. For example, some World War I discharge or separation records may show a veteran's age when he entered service. In this case, the date of entry into service is the "Date As of Which Age Was Given" while the date of discharge may be the "Date Record Established."

CLAYTON, MISSOURI
NOV 13 1978
71742
SSA DISTRICT OFFICE

(Originating Office)
SOCIAL SECURITY ADMINISTRATION

The information requested in item 2 above is needed by the Social Security Administration to adjudicate a claim based on the account of the above-named veteran. All available identifying information has been provided.

SIGNATURE OF SSA OFFICIAL

TITLE | DATE

SSA-654

DEPARTMENT OF
HEALTH, EDUCATION, AND WELFARE
SOCIAL SECURITY ADMINISTRATION

CERTIFICATION BY UNIFORMED SERVICES

In response to the request on the reverse of this form the following information is hereby certified.

NAME OF VETERAN AS SHOWN IN MILITARY FILE	SERVICE NUMBER
SAME AS FURNISHED BY SSA ☐ YES ☐ NO	SAME AS FURNISHED BY SSA ☐ YES ☐ NO

A–CERTIFICATION ABOUT ACTIVE SERVICE AFTER SEPTEMBER 7, 1939

1. DATE(S) OF ENTRY INTO ACTIVE SERVICE: 2-15-38

2. DATE(S) OF SEPARATION FROM ACTIVE SERVICE: 4-1-58

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

*IF CHARACTER OF SEPARATION WAS NOT *Honorable, Under Honorable Conditions, Dishonorable,* NOR *Bad Conduct* AS A RESULT OF A *General* COURT MARTIAL, CHECK REASON FOR SEPARATION BELOW: HON.

a. ☐ DESERTION.

b. ☐ RESIGNATION FOR THE GOOD OF THE SERVICE *(Officers Only)*.

c. ☐ CONSCIENTIOUS OBJECTOR WHO REFUSED TO WEAR THE UNIFORM OR OTHERWISE TO COMPLY WITH LAWFUL ORDERS OF COMPETENT MILITARY AUTHORITY.

d. ☐ CONVICTION BY A CIVIL COURT FOR TREASON, SABOTAGE, ESPIONAGE, MURDER, RAPE, ARSON, BURGLARY, ROBBERY, KIDNAPPING, ASSAULT WITH INTENT TO KILL, ASSAULT WITH A DANGEROUS WEAPON, OR OF AN ATTEMPT TO COMMIT ANY OF THESE CRIMES.

e. ☐ NONE OF THE ABOVE.

4. *If period of service was less than 90 days,* WAS INDIVIDUAL DISCHARGED OR RELEASED FROM ACTIVE SERVICE AS RESULT OF INJURY OR DISABILITY INCURRED OR AGGRAVATED IN SERVICE IN LINE OF DUTY? ☐ YES ☐ NO

5. IF A PERIOD OF SERVICE HAD AN ENTRY DATE AFTER 12/31/46 AND BEFORE 12/16/50, BY WHICH OF THE FOLLOWING WAS ENTRY EFFECTED? ☐ VOLUNTARY ENLISTMENT ☐ INDUCTION THROUGH MILITARY DRAFT ☐ CALL OR RECALL FROM MILITARY RESERVE

B–SERVICE DEPT. CERTIFICATION ABOUT RETIRED OR RETAINER PAY *(See instructions on reverse side)*

IF THE VETERAN WAS NEVER RETIRED or TRANSFERRED TO THE FLEET RESERVE, check this box. . . . ☐
Sign and return the form without answering items 1, 2 and 3 below.

1. (a) Was this veteran an enlisted member of the Army, Air Force, Navy, Marine Corps, or Coast Guard and retired after September 15, 1940, and before October 1, 1949, because of disability? . . . . . ☐ Yes ☐ No

   (b) Was this veteran ever retired or transferred to the Fleet Naval (or Marine Corps) Reserve after September 15, 1940, for any reason other than disability which is the proximate result of the performance of active duty? . . . . . ☐ Yes ☐ No

   If answer to 1 (a) or 1 (b) is "Yes," answer (c) and (d).

   (c) Was active service after September 15, 1940, and before July 25, 1947, used to establish eligibility to receive retirement or retainer pay? . . . . . ☐ Yes ☐ No

   (d) Was active service after July 24, 1947, and before January 1, 1957, used to establish eligibility to receive retirement or retainer pay? . . . . . ☐ Yes ☐ No

2. (a) Has the retirement (or retainer) pay of this individual ever been fixed under a formula which includes a multiple of active service? . . . . . ☐ Yes ☐ No

   If answer is "Yes," answer (b) and (c).

   (b) Was this multiple increased because of active service occurring after September 15, 1940, and before July 25, 1947? . . . . . ☐ Yes ☐ No

   (c) Was this multiple increased because of active service occurring after July 24, 1947, and before January 1, 1957? . . . . . ☐ Yes ☐ No

3. Did the veteran have active duty or active duty for training after December 31, 1956? . . . ☐ Yes ☐ No

C–CERTIFICATION OF EVIDENCE OF AGE OR DATE OF BIRTH IN MILITARY FILE

NAME OF RECORD OR DOCUMENT	DATE RECORD ESTAB.	PLACE OF BIRTH

DATE OF BIRTH	AGE *(If date of birth not given)*	DATE AS OF WHICH AGE WAS GIVEN *(e.g., date of entry)*

REMARKS BY CERTIFYING ORGANIZATION

NAME OF CERTIFYING ORGANIZATION: NWC 11-208	SIGNATURE: G Hair
	RANK OR TITLE	DATE

AARONS, Edward S.	1828 W. Tioga St., Philadelphia, Pa.
ALEO, Alphonse	89 Liverpool St., East Boston, Mass.
ALEXANDER, Jack O.	1227 Sullivan St., Seattle, Wash.
ALEXANDER, Kyle W.	2212 Windsor St., Waco, Texas
ANDERSON, Luverne J.	Scarville, Iowa
ANDERSON, Nicholas J.	16 Grace St., Rockland, Maine
ANDERSON, Reuben A. Jr.	4 Chesterfield Road, Milton, Mass.
ASH, Romell R.	Pleasant Grove, Utah
ASHBURN, William F.	c/o General Delivery, Trey, N. C.
BAKER, James B.	1708 Minor Ave., Apt. 5, Seattle, Wash.
BAKER, John L.	Prosper, Texas
BECKER, Louis H.	1820 Pierce Ave., Niagara Falls, N.Y.
BERGERON, Russell	PO Box #2, Schriever, La.
BIRMINGHAM, Charles H.	1714 Warwick Ave., Baltimore, Md.
BISHOP, Albert R.	4118 No. Minnesota St., Portland, Oregon
BRIDGES, Zebedee J.	3100 Ellis Ave, Chicago, Ill.
BROWNING, George A.	130 Henry St., Portsmouth, Va.
BRISICK, Joseph W.	11 East Colfax Ave., Roselle Park, N.J.
BRITT, James J.	43 Pount St., Lockport, N.Y.
BRITT, Edgar F.	918 Buchanan St., N.W., Washington, D.C.
[illegible]	
BURLEW, Norman	Railway Ave., Belford, N.J.
CHAGNON, Crosby E.	3030 San Marino St., Los Angeles, Calif.
COHEN, Arthur	284 Smith St., Brooklyn, N.Y.
BECKER, Raymond W.	Pomeroy, Iowa
ANDERSON, Roy C.	Route 5, Kingsport, Tenn.
ASPIN, Anne M.	1835 Patterson Ave., Chicago, Ill.
ASTARITA, Raymond W.	US Merchant Marine Academy, Great Neck, L.I.,N.Y.
BAKER, Richard S.	1529 Beacon St., Brookline, Mass.
[illegible]	
BREUCHERT, William E.	Jennings Lodge, Oregon
CALLAHAN, Adam L.	213 Harrison, S.W., Canton 6, Ohio
CALLOWAY, Cecil C.	USCG Merchant Marine Trasta, Ft. Trumbull, New London Conn.
CALLHAM, Donald E.	6226 Loomis Blvd., Chicago, Ill.
CHAGNON, Verdun E.	2561 Beals St., Detroit, Mich.
CHAMBLISS, Oscar E.	Route #3, Hattiesburg, Miss.
CIESLIK, Floyd J.	4602 So. 42nd St., Omaha, Nebr.
CICHY, Alexander F.	1908 8th Ave., Brooklyn, N.Y.
ALLARD, Lennert	844 Roscoe St., Chicago, Ill.
ALLEN, Carline G.	2830 Main St., Calwa City, Calif.
ALLEN, Dorothy E.	444 Hamilton St., Worcester, Mass.
ANDERSON, Rudolph	Millers Ferry, Fla.
ASHTON, William S. Jr.	215 English, Monterey, Calif.
BAKER, Keith W.	Corydon, Iowa
BAKER, Robert P.	1577 S. Gordon St., Atlanta, Ga.
BAKER, Stanley R. Jr.	280 Highland Ave., Somerville, Mass.
BARRETT, Robert H.	1417 41st No., Seattle, Wash.
BERCHANDLER, Theodore E.	1520 Bellaire Pl., Pittsburgh, Pa.
BERGMANN, William F.	1401 Hemlock St., N.W., Washington, D.C.
BERGSTROM, Hazel J.	900 Queen Anne St., Seattle, Wash.
BISHOP, Joseph H. Jr.	1175 Andrews Ave., Lakewood, Ohio
BISHOP, Stuart B.	234 North Main St., Southampton, N.Y.
BONANNI, Vincent A.	23 Irving St., Albany, N.Y.
BONAVISA, Peter	2332 Second Ave., New York, N.Y.
BOYER, Jack J.	2219 South Oregon Ave., St. Louis, Mo.

3-13 file

UNITED STATES COAST GUARD

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

PS
5 December, 1952
FILE: XXX PS P15/MM

From: Commandant
To: Commander, Rockland Group
Via: Commander, 1st CG District (p)

Subj: WATTS, Alan B.(209-630)BML1(AN)
good conduct awards, information relative to.

Ref: (a) Personnel Circular No. 33-49.

1. In reply to yourletter of 18 November 1952, MM/P15,

you are informed that the subject man's record indicates his eligibility for good conduct awards for his active service is as follows:

FROM	TO	UNIT	REMARKS
2-15-38	2-14-41		Medal issued
2-15-41	2-14-44	CG-38668	Bar due
2-15-44	2-14-47	Group, Rockland, Me.	Bar due
2-15-47	2-14-50	Moose Peak LBS	Bar due

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

2. His marks in proficiency in rating and conduct from 15 February 1950 to the end of his enlistment 12 May 1952 are:

DATE	PROFICIENCY	CONDUCT	DATE	PROFICIENCY	CONDUCT
3-31-50	3.6	4.0	5-10-50	3.6	4.0
6-30-50	3.0	4.0	9-30-50	3.7	4.0
12-31-50	3.7	4.0	3-31-51	3.7	4.0
6-30-51	3.8	4.0	9-30-51	3.8	4.0
12-31-51	3.8	4.0	3-31-52	3.8	4.0
5-7-52	3.8	4.0	5-12-52	3.8	4.0

B. V. BALL
By direction

BRH:lis rm 2002

18 November 1952

11 M/P15

From: CO, CG Group, Rockland, Me

Re 2-15-41 ✓
4.0 5-4-44 medal issued
Hq 2-14-41 ✓

End 2-15-38 ✓
4.0
2-14-41

~~Ad~~
Recd 5-5-44 ✓
4.0
~~Ad~~ 5-4-48 ✓

~~Ad~~ 5-5-48 ✓
Recd 4.0
~~Ad~~ 5-12-52
Recd 5-13-52 ✓

Bar due
2-14-44
CG-38668

Bar due
2-14-47
Group, Rockland, Me

63/m

Bar due
2-14-50
Moose Peak LB/S

prog marks:

3-31-50	3.6	4.0
6-30-50	3.0	4.0
12-31-50	3.7	4.0
6-30-51	3.8	4.0
12-31-51	3.8	4.0
5-7-52	3.8	4.0
5-10-50	3.6	4.0
9-30-50	3.7	4.0
3-31-51	3.7	4.0
9-30-51	3.8	4.0
3-31-52	3.8	4.0
5-12-52	3.8	4.0

UNITED STATES COAST GUARD

ADDRESS REPLY TO
THE COMMANDANT (PMM)
REFER TO FILE: CG-

WASHINGTON 25, D. C.

My dear

The Commandant, United States Coast Guard, has the honor to forward herewith the awards of

made posthumously to your

In order that you may understand the significance of the above awards there are inclosed bulletins which set forth the regulations governing the issuance. Please acknowledge receipt on the inclosed form CG-2927. In the event you have previously received the awards from any other source, it is requested that you return the medals.

By direction of the Commandant.

Sincerely yours,

N. W. SPROW
Commander, U. S. Coast Guard
Assistant Chief, Military Morale Division

Incls.

A7168

EDUCATION AND SPECIAL QUALIFICATIONS

NOTE: This form to be filled out by enlisted men upon original entry into the Coast Guard and forwarded to Headquarters with enlistment papers.

Watts, Alan Brennen (209-630) Surfman.
(Name in full - surname to left) (Service number) (Rating)

EDUCATION:

(a) Grammar School Eight grade.
(Indicate here the highest grade completed)

(b) High School Three years.
(Indicate number of years attended)

(c) College None.
(Indicate years attended, named of college, degrees if any attained, any special or scientific course pursued and completed.

EXPERIENCE:

Indicate in the parenthesis after each of the following the number of years served at each:

Aviation Rigger	(0)	Aviation Mechanic	(0)
Accountant	(0)	Book-keeper	(0)
Carpenter	(0)	Cabinet maker	(0)
Draftsman	(0)	Dentist	(0)
Electrician (General)	(0)	Electrician (Telephone)	(0)
Engraver	(0)	Engineer (Steam)	(0)
Engineer (Diesel)	(0)	Lathe Operator	(0)
Machinist	(0)	Mechanical Engineer	(0)
Pattern-maker	(0)	Pharmacist	(0)
Photographer (General)	(0)	Plumber and Fitter	(0)
Photographer (Aviation)	(0)	Secretary	(0)
Sign-Painter	(0)	Stenographer	(0)
Telephone Linesman	(0)	Telegrapher	(0)
Welder	(0)		

Set forth briefly, yet succinctly, below any previous experience or training not covered above. Also set forth such remarks as will indicate more fully the experience you have had in trades which you have followed as well as such remarks you desire to make regarding education and courses pursued:

(Reverse side of form may be utilized if required).

TREASURY DEPARTMENT
U. S. COAST GUARD
CG 2500 (Rev. 7-50)

ENLISTMENT CONTRACT

(60)

PE-PR-30

UNITED STATES { COAST GUARD / ~~COAST GUARD RESERVE~~ }

ENLISTMENT OF WATTS, ALAN BRENNEN (Full name, surname to left); 209-630 (Service number); $ 213.15 (Pay per month)

Accepted for enlistment at Boston, Mass.; EM1(L)AN (Rating in which enlisted)

Enlisted at Office, Commander, 1st CG District; 13 MAY, 1952 (Date of enlistment)

Transferred to * * * * * (Place) (Date)

Occupation MARINER Citizenship* N.B. If naturalized, place and date of naturalization * * * * Certificate No. * * *

Date of birth 1 January, 1917 Place of birth Jonesboro, Maine

Legal address High Street, Machias, Maine (Street and number) (Town) (County) (State)

Married or single Married Name and address of next of kin or legal guardian

WIFE: Louise Watts - High Street, Machias, Maine (Relationship) (Address)

Continuous Service Certificate * * (Number) Previous service { Coast Guard / ~~Reserve~~ } 14 (Years) 2 (Months) 28 (Days)

First enlisted 15 February, 1938 (Date) at Burnt Island LBS, Port Clyde (Place) and was last discharged 12 May, 1952 (Date) from Office, Commander, 1st CG District (Unit)

with Honorable (Character) discharge as BM1 (Rate) No. * * * *

Previous Navy service NONE (Years) (Months) (Days) Previous Marine Corps service NONE (Years) (Months) (Days)

Previous Army service NONE (Years) (Months) (Days) Previous Air Force service NONE (Years) (Months) (Days)

Age 35 years 4 months. Height 5 feet 11 inches. Weight 180 pounds.

Eyes Blue Sex Male Hair Brown Complexion Ruddy Race Caucasian

Personal characteristics marks, etc. VSULA; Appendectomy scar

For and in consideration of the pay or wages due to the ratings which may from time to time be assigned me during the continuance of my service, I agree to and with LT. S. PISICCHIO of the United States Coast Guard, as follows:

First: To enter the Coast Guard of the United States and to report to such station or vessel as I may be ordered to join, and to the utmost of my power and ability discharge my several services or duties and be in everything conformable and obedient to the several requirements and lawful commands of the officers who may be placed over me.

Second: I oblige and subject myself to serve { Six years from 13 May, 1952 / during minority until ....., 19..... } unless sooner discharged by proper authority.

*Citizenship—Use expressions "NB" for native born; "NZ" for naturalized; "NPI" for native of Philippine Islands; "NPR" for native of Puerto Rico.

16—8420-8

In the event of war or National emergency declared by the President to exist during my term of service, I oblige and subject myself to serve until 6 months after the end of the war or National emergency if so required by the Secretary of the Navy unless I voluntarily reenlist or extend my enlistment. I understand that when so detained, I am not entitled to enlistment allowance and that in time of war the addition of one-quarter pay as specified in the Act of July 11, 1941, is not applicable.

I also oblige myself, during such service, to comply with and be subject to such laws, regulations, and discipline for the government of the Coast Guard as are or shall be established by the Congress of the United States or other competent authority, and to submit to treatment for the prevention of smallpox, typhoid (typhoid prophylaxis), and to such other preventive measures as may be considered necessary by proper authorities.

Third: I am of the legal age to enlist; I have never deserted from the United States Coast Guard, Navy, Army, Air Force, or Marine Corps; I have never been discharged from the United States Service or other service on account of disability or through sentence of either civilian or military court; and I have never been discharged from any service, civil or military, except with good character and for the reasons given by me to the recruiting officer prior to enlistment. I am not a member of the Coast Guard Reserve, Naval Reserve, Naval Militia, Marine Corps Reserve, National Guard, Army Reserve, Air Force Reserve, or Air National Guard.

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

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

Oath of Allegiance: I, Alan Brannen Watts. do solemnly swear (or affirm) that I will bear true faith and allegiance to the United States of America, and that I will serve them honestly and faithfully against all their enemies whomsoever, and that I will obey the orders of the President of the United States and the orders of the officers appointed over me, according to the laws of the United States and the regulations governing the Coast Guard, and the Uniform Code of Military Justice.

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

Alan B. Watts

Alan B. Watts.

(Signature in own handwriting, surname to right)

Subscribed and sworn to before me this 13th day of May, A. D. 19 52

S. PISICCHIO

S. PISICCHIO, LT. USCG

(Commanding officer, notary public, or other officer qualified to administer oaths)

By direction

(Title)

Citizenship substantiated and contract perfected.

S. PISICCHIO

S. PISICCHIO, LT. USCG

By direction

....., *U. S. C. G., Enlisting Officer.*

EXTENSION OF ENLISTMENT CONTRACT

(Unit) (Place) (Date)

Enlistment extended until ..... by reason of .....

under authority of .....

(Signature of man)

(Signature of commanding officer)

16—8420-3 U. S. GOVERNMENT PRINTING OFFICE

13. EXAMINING FACILITY 1-1-17 2. DATE OF BIRTH M 3. RACE W 11. PLACE OF ENL. Los Angeles 9. TOTAL YRS. MILITARY SERVICE

1. NAME—FIRST Alan MIDDLE B. LAST Watts 4. ADDRESS (Number, street or RFD, city or town, State) 1st St.

n 88
50)
D BY
E BUDGET
R A-24

REPORT OF MEDICAL EXAMINATION

1. NAME—FIRST NAME—MIDDLE NAME	2. GRADE AND COMPONENT OR POSITION	3. IDENTIFICATION NO.
WATTS, Alan B.	BM1	299-630
4. HOME ADDRESS (*Number, street or R.F.D., city or town, zone and State*)	**5. PURPOSE OF EXAMINATION**	**6. DATE OF EXAMINATION**
High St. Machias, Me.	Re-enlistment	4-29-52

7. SEX	8. RACE	9. TOTAL YRS. GOVT. SERVICE MILITARY	CIVILIAN	10. DEPARTMENT, AGENCY, OR SERVICE	11. ORGANIZATION UNIT
M	W	14		Treasury	USCG

12. DATE OF BIRTH	13. PLACE OF BIRTH	14. NAME, RELATIONSHIP, AND ADDRESS OF NEXT OF KIN
1-1-17	Jonesboro, Me.	Wife: Louise Address same as #4

15. EXAMINING FACILITY OR EXAMINER, AND ADDRESS	16. OTHER INFORMATION
DMO Boston	Glouster Group

17. RATING OR SPECIALTY — TIME IN THIS CAPACITY: TOTAL — LAST SIX MONTHS

CLINICAL EVALUATION

NORMAL	ABNORMAL	(*Check each item in appropriate column; enter "N. E." if not evaluated*)
X		18. HEAD, FACE, NECK, AND SCALP
X		19. NOSE
X		20. SINUSES
X		21. MOUTH AND THROAT
X		22. EARS—GENERAL (*Int. & ext. canals*) (*Auditory acuity under items 70 and 71*)
X		23. DRUMS (*Perforation*)
X		24. EYES—GENERAL (*Visual acuity and refraction under items 59, 60, and 61*)
X		25. OPHTHALMOSCOPIC
X		26. PUPILS (*Equality and reaction*)
X		27. OCULAR MOTILITY (*Associated parallel movements, nystagmus*)
X		28. LUNGS AND CHEST (*Include breasts*)
X		29. HEART (*Thrust, size, rhythm, sounds*)
X		30. VASCULAR SYSTEM (*Varicosities, etc.*)
X		31. ABDOMEN AND VISCERA (*Include hernia*)
X		32. ANUS AND RECTUM (*Hemorrhoids, fistulae*) (*Prostate if indicated*)
X		33. ENDOCRINE SYSTEM
X		34. G-U SYSTEM
X		35. UPPER EXTREMITIES (*Strength, range of motion*)
X		36. FEET
X		37. LOWER EXTREMITIES (*Except feet*) (*Strength, range of motion*)
X		38. SPINE, OTHER MUSCULOSKELETAL
XXXXX		39. IDENTIFYING BODY MARKS, SCARS, TATTOOS
X		40. SKIN, LYMPHATICS
X		41. NEUROLOGIC (*Equilibrium tests under item 78*)
X		42. PSYCHIATRIC (*Specify any personality deviation*)
Females only		(*Check how done*)
		43. PELVIC ☐ VAGINAL ☐ RECTAL

NOTES.—Describe every abnormality in detail. (Enter pertinent item number before each comment; continue in item 73 and use additional sheets if necessary.)

#39 Appendectomy scar.

Alan B. Watts

By direction

(*Continue in item 73*)

44. DENTAL (*Place appropriate symbols above or below number of upper and lower teeth, respectively*)

O.—*Restorable teeth* /.—*Nonrestorable teeth* X.—*Missing teeth* XXX.—*Replaced by dentures* (6 × 8).—*Fixed bridge, brackets to include abutments*

REMARKS AND ADDITIONAL DENTAL DEFECTS AND DISEASES

RIGHT																LEFT
X	2	3	4	5	6	7	8	9	10	11	12	13	14	15	X	
32	31	30	29	28	27	26	25	24	23	22	21	20	19	18	17	
X	O	-X-	O										-X-		X	

LABORATORY FINDINGS

45. URINALYSIS: SP. GR. 1.022			46. CHEST X-RAY (*Place, date, film number, result*)	47. SEROLOGY (*Specify test used and result*)
ALBUMIN	SUGAR	MICROSCOPIC		
neg	neg		4-29-52 NEGATIVE	NEGATIVE 4-29-52

48. EKG	49. BLOOD TYPE AND RH FACTOR	50. OTHER TESTS

MEASUREMENTS AND OTHER FINDINGS

51. HEIGHT	52. WEIGHT	53. COLOR HAIR	54. COLOR EYES	55. BUILD	56. TEMP.
71	180	brn	blue	SLENDER ☐ MEDIUM ☒ HEAVY ☐ OBESE ☐	98.6

57. BLOOD PRESSURE (*Arm at heart level*)

SITTING	SYS. 138	RECUM-BENT	SYS. 135	STANDING (3 min.)	SYS. 140
	DIAS. 83		DIAS. 80		DIAS. 85

58. PULSE (*Arm at heart level*)

SITTING	AFTER EXERCISE	2 MIN. AFTER	RECUMBENT	AFTER STANDING 3 MIN.
84	94	88	84	86

59. DISTANT VISION

RIGHT 20/ 20 CORR. TO 20/

LEFT 20/ 20 — — CORR. TO 20/

60. REFRACTION

BY S. CX

BY S. CX — —

61. NEAR VISION

CORR. TO BY

CORR. TO BY

62. HETEROPHORIA: (*Specify distance*) ES° EX°

R. H. L. H. PRISM DIV. PRISM CONV. PC PD

63. ACCOMMODATION RIGHT LEFT

64. COLOR VISION (*Test used and result*) PIP normal

65. DEPTH PERCEPTION (*Test used and score*) UNCORRECTED CORRECTED

66. FIELD OF VISION

67. NIGHT VISION (*Test used and score*)

68. RED LENS

69. INTRAOCULAR TENSION

70. HEARING

RIGHT WV 15 /15 SV /15

LEFT WV 15 /15 SV /15

71. AUDIOMETER

	250 256	500 512	1000 1024	2000 2048	3000 3200	4000 4096	8000 8192	
RIGHT								
LEFT								

72. PSYCHOLOGICAL AND PSYCHOMOTOR (*Tests used and score*)

73. NOTES (*Continued*) **AND SIGNIFICANT OR INTERVAL HISTORY**

(*Use additional sheets of plain paper if necessary*)

74. SUMMARY OF DEFECTS AND DIAGNOSES (*List diagnoses with item numbers*)

75. RECOMMENDATIONS—FURTHER SPECIALIST EXAMINATIONS INDICATED (*Specify*)

76. PHYSICAL PROFILE

P	U	L	H	E	S

77. EXAMINEE (*Check*)

☒ IS

☐ IS NOT QUALIFIED FOR Re-enlistment

78. IF NOT QUALIFIED, LIST DISQUALIFYING DEFECTS BY ITEM NUMBER

PHYSICAL CATEGORY

A	B	C	E

79. TYPED OR PRINTED NAME OF PHYSICIAN

JACK SA SURG USPHS(R)

SIGNATURE

80. TYPED OR PRINTED NAME OF PHYSICIAN

SIGNATURE

81. TYPED OR PRINTED NAME OF DENTIST OR PHYSICIAN (*Indicate which*)

USPHS(R)

SIGNATURE

82. TYPED OR PRINTED NAME OF REVIEWING OR APPROVING AUTHORITY

SIGNATURE

NUMBER OF ATTACHED SHEETS

GOVERNMENT PRINTING OFFICE 16—62288-1

This is to certify that I
and have been informed
have been informed
agree with the

CERTIFICATE OF PHYSICAL QUALIFICATION FOR DISCHARGE

12 May, 1952
(Date)

This is to certify that I have been given a physical examination and have been found physically qualified for discharge: that I have been informed of the findings and (do or do not) _____ agree with the findings.

Objections: _____

_____

_____

_____

Signed: Alan B. Watts
Alan B. Watts
(Name)

_____ _____
(Serv. No.) (Rate)

Witnessed by
Discharge Officer: S. PISICCHIO LT, USCG
By direction

SIONS AS TO MEMBERSHIP IN OR ASSOCIATION WITH CERTAIN ORGANIZATIONS

ciations which may be considered as establishing reasonable ds for invoking appropriate penalties include but are not lim- to membership in, affiliation with, or sympathetic association th, any foreign or domestic organization, association, movement, roup or combination of persons having the following characteristics:

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

Given under my hand this 13 day of MAY 19 52

Signature of Witnessing Officer

S. PISICCHIO LT, USCG

By direction

Signature of Person Making Certification

Alan B. Watts

Alan B. Watts

U. S. GOVERNMENT PRINTING OFFICE : 1950—O-919201

LOYALTY CERTIFICATE FOR PERSONNEL OF THE ARMED FORCES

INSTRUCTIONS ON THE USE OF THIS FORM

The Department of Defense has the authority to establish and promulgate detailed procedures to implement the national policy relating to loyalty of persons entering on duty with the Armed Forces. This has been determined by appropriate authority to include restrictions as to membership in or association with certain organizations and of certain standards of conduct. If Federal Constitutional Privilege against self-crimination; i. e., the making of a statement which will expose you to criminal trial, is claimed about all or any part of any conduct, membership, or association in question you may so claim by stating in the space indicated "Federal Constitutional Privilege is Claimed" or "Federal Constitutional Privilege is Claimed as to .....," describing the specific part of any conduct, membership, or association about which claim is made.

Concealment of, misrepresentation as to, or failure to divulge in full, conduct or associations of the character set forth in the provisions, at the time of execution of these certificates in any component of the Department of Defense may constitute grounds for discharge, separation, or other disposition of personnel, and action shall be taken by the Armed Forces for causing trial before a general court martial, or the facts will be made known to appropriate civil authorities, as the law may provide in such cases. Upon indication that any person has misrepresented, concealed, or failed to divulge in full previous conduct or associations of the character set forth, the Service having responsibility thereof shall take appropriate action.

Consequently, you must read the following provisions as to membership in or association with certain organizations and as to standards of conduct very carefully and be sure you understand them. If there is anything which you do not understand in either of these sets of provisions or in the certifications to be made, ask a commissioned officer to explain them to you. When you are certain that you understand both the provisions and the certificates, complete the certificates and sign them in the presence of a witnessing officer. Penalties for making a false statement may be very severe.

PROVISIONS AS TO STANDARDS OF CONDUCT

1. Conduct which may be considered as establishing reasonable grounds for invoking appropriate penalties shall include, but is not limited to, one or more of the following:

(*a*) Sabotage, espionage, or attempts or preparations therefor, or intimate and sympathetic associations with or voluntary assistance to persons who the subject of investigation has reasonable cause to believe may be spies or saboteurs.

(*b*) Treason, sedition, or writings and acts which can reasonably be considered as intended to encourage seditious or treasonable opinions or actions.

(*c*) Advocacy of revolution or of force or violence to alter the existing constitutional form of government of the United States; advocacy of revolution or of force or violence to bring about economic, political, or social change.

(*d*) Intentional unauthorized disclosure to any person under circumstances which may indicate disloyalty to the United States, of documents or information of a classified or nonpublic character.

(*e*) Acting, attempting to act, or knowingly failing to act when such conduct is calculated to serve the interests of another government in preference to the interests of the United States of America.

I certify, as regards the standards of conduct, that:

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

2. I have read the provisions applying to the standards of conduct and I understand them.

3. If I have engaged in any such conduct, I have so indicated by describing in the statement below the nature thereof.

4. If I have not engaged in any such conduct, I have so indicated by writing "None" or "None to my knowledge" in the statement below.

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

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

Statement as to certification of conduct (*Attach additional sheets if necessary for a full, detailed statement*):

Typed Full Name of Person Making Certification	Service No. (*If any*)	Status for Which Being Considered (*e. g., Com O, WO, Enl, ROTC affiliation, etc.*)
WATTS, Alan B.	209-630	Reenlisting
Station to Which Certification Submitted	Typed Name and Grade of Witnessing Officer	
Commander, 1st CG District	S. PISICCHIO LT, USCG	

DD FORM 1 APR 50 98 Replaces NME Form 98, 1 Oct 48, which is obsolete. By direction

Consolidated List of Organizations Designated by the Attorney General on October 30, 1950, Pursuant to Executive Order No. 9835

Fascist:
Heimuska Kai, also known as Nokubei Heieki Gimusha Kai, Zaibei Nihonjin, Heiyaku Gimusha Kai, and Zaibei Hemusha Kai (*Japanese residing in America Military Conscripts Association*)
Hinode Kai (*Imperial Japanese Reservists*)
Hinomaru Kai (*Rising Sun Flag Society—a group of Japanese war veterans*)
Hokubei Zaigo Shoke Dan (*North American Reserve Officers Association*)
Japanese Association of America
Japanese Overseas Central Society (*Kaigai Dobo Chuo Kai*)
Japanese Overseas Convention, Tokyo, Japan, 1940
Japanese Protective Association (*Recruiting Organization*)
Jikyoku lin Kai (*Current Affairs Association*)
Kibei Seinen Kai (*Association of U. S. citizens of Japanese ancestry who have returned to America after studying in Japan*)
Nanka Teikoku Gunyudan (*Imperial Military Friends Group or Southern California War Veterans*)
Nichibei Kogyo Kaisha (*The Great Fujii Theatre*)
Northwest Japanese Association
Peace Movement of Ethiopia
Sakura Kai (*Patriotic Society, or Cherry Association—composed of veterans of Russo-Japanese War*)
Shinto Temples
Sokoku Kai (*Fatherland Society*)
Suiko Sha (*Reserve Officers Association of Los Angeles*)

Fascist:
American Nationalist Party
American National Labor Party
American National Socialist League
American National Socialist Party
American Patriots, Inc.
Ausland-Organization der NSDAP, Overseas Branch of Nazi Party
Association of German Nationals (*Reichsdeutsche Vereinigung*)
Central Organization of the German-American National Alliance (*Deutsche-Amerikanische Einheitsfront*)
Citizens Protective League
Committee for Nationalist Action
Dante Alighieri Society
Federation of Italian War Veterans in the U. S. A., Inc. (*Associazione Nazionale Conbattenti Italiani, Federazione degli Stati Uniti d'America*)
Friends of the New Germany (*Freunde des Neuen Deutschlands*)
German-American Bund (*Amerika-deutscher Volksbund*)
German-American Republican League
German-American Vocational League (*Deutsche-Amerikanische Berufsige-meinschaft*)
Kyffhaeuser, also known as Kyffhaeuser League (*Kyffhaeuser Bund*), Kyffhaeuser Fellowship (*Kyffhaeuser Kameradschaft*)
Kyffhaeuser War Relief (*Kyffhaeuser Kriegshilfswerk*)
Lictor Society (*Italian Black Shirts*)
Mario Morgantini Circle
National Blue Star Mothers of America
Nationalist Action League

Communist:
Abraham Lincoln Brigade
Abraham Lincoln School, Chicago, Ill.
Action Committee to Free Spain Now
American Association for Reconstruction in Yugoslavia, Inc.
American Branch of the Federation of Greek Maritime Unions
American Committee for European Workers' Relief
American Committee for Protection of Foreign Born
American Committee for Spanish Freedom
American Committee for Yugoslav Relief, Inc.
American Council for a Democratic Greece, formerly known as the Greek American Council; Greek American Committee for National Unity
American Council on Soviet Relations
American Croatian Congress
American Jewish Labor Council
American League Against War and Fascism
American League for Peace and Democracy
American Peace Mobilization
American Polish Labor Council
American Rescue Ship Mission (*a project of the United American Spanish Aid Committee*)
American Russian Institute, New York
American Russian Institute, Philadelphia
American Russian Institute (*of San Francisco*)
American Russian Institute of Southern California, Los Angeles
American Slav Congress
American Youth Congress
American Youth for Democracy
Armenian Progressive League of America
Boston School for Marxist Studies, Boston, Mass.
California Labor School, Inc., 216 Market Street, San Francisco, Calif.
Central Council of American Women of Croatian Descent, also known as Central Council of American Croatian Women, National Council of Croatian Women
Citizens Committee to Free Earl Browder
Citizens Committee for Harry Bridges
Civil Rights Congress and its affiliated organizations, including:
  Civil Rights Congress for Texas
  Veterans Against Discrimination of Civil Rights Congress of New York
Comite Coordinador Pro Republica Espanola
Committee for a Democratic Far Eastern Policy
Commonwealth College, Mena, Ark.
Communist Party, U. S. A., its subdivisions, subsidiaries, and affiliates, including:
  Citizens Committee of the Upper West Side (*New York City*)
  Committee to Aid the Fighting South
  Daily Worker Press Club
  Dennis Defense Committee
  Labor Research Association, Inc.
  Southern Negro Youth Congress
  United May Day Committee
  United Negro and Allied Veterans of America
  Yiddisher Kultur Farband
Communist Political Association, its subdivisions, subsidiaries, and affiliates, including:
  Florida Press and Educational League
  Peoples Educational and Press Association of Texas
  Virginia League for Peoples Education
Connecticut State Youth Conference
Congress of American Revolutionary Writers
Congress of American Women
Council on African Affairs
Council for Pan-American Democracy
Detroit Youth Assembly
Emergency Conference to Save Spanish Refugees (*founding body of the North American Spanish Aid Committee*)
Friends of the Soviet Union
George Washington Carver School, New York City
Hawaii Civil Liberties Committee
Hollywood Writers Mobilization for Defense
Hungarian-American Council for Democracy
Independent Socialist League
International Labor Defense
International Workers Order, its subdivisions, subsidiaries, and affiliates, including:
  American-Russian Fraternal Society
  Carpatho-Russian Peoples Society
  Cervantes Fraternal Society
  Croatian Benevolent Fraternity
  Finnish-American Mutual Aid Society
  Garibaldi American Fraternal Society
  Hellenic-American Brotherhood
  Hungarian Brotherhood
  Jewish Peoples Fraternal Order
  People's Radio Foundation, Inc.
  Polonia Society of the IWO
  Romanian-American Fraternal Society
  Serbian-American Fraternal Society
  Slovak Workers Society
  Ukranian-American Fraternal Union
Jefferson School of Social Science, New York City
Jewish Peoples Committee
Joint Anti-Fascist Refugee Committee
Joseph Weydemeyer School of Social Science, St. Louis, Mo.
Labor Youth League
League of American Writers
Macedonian-American People's League
Michigan Civil Rights Federation
Michigan School of Social Science
National Committee for the Defense of Political Prisoners
National Committee to Win the Peace
National Conference on American Policy in China and the Far East (*A Conference called by the Committee for a Democratic Far Eastern Policy*)
National Council of Americans of Croatian Descent
National Council of American-Soviet Friendship
National Federation for Constitutional Liberties
National Negro Congress
Nature Friends of America (*since 1935*)
Negro Labor Victory Committee
[illegible]tee for Publications
[illegible]can Committee to Aid Spanish Democracy
[illegible] American Spanish Aid Committee
Ohio School of Social Sciences
Oklahoma Committee to Defend Political Prisoners
Pacific Northwest Labor School, Seattle, Washington
Partido del Pueblo of Panama (*operating in the Canal Zone*)
Peoples Educational Association (*Incorporated under name Los Angeles Educational Association, Inc.*) also known as Peoples Educational Center, Peoples University, People's School
People's Institute of Applied Religion
Philadelphia School of Social Science and Art
Photo League (*New York City*)
Progressive German-Americans, also known as Progressive German-Americans of Chicago
Proletarian Party of America
Revolutionary Workers League
Samuel Adams School, Boston, Mass.
Schappes Defense Committee
Schneiderman-Darcy Defense Committee
School of Jewish Studies, New York City
Seattle Labor School, Seattle, Wash.
Serbian Vidovdan Council
Slovenian-American National Council
Socialist Workers Party, including American Committee for European Workers' Relief
Socialist Youth League
Tom Paine School of Social Science, Philadelphia, Pa.
Tom Paine School of Westchester, N. Y.
Union of American Croatians
United American Spanish Aid Committee
United Committee of South Slavic Americans
United Harlem Tenants and Consumers Organization
Veterans of the Abraham Lincoln Brigade
Walt Whitman School of Social Science, Newark, N. J.
Washington Bookshop Association
Washington Committee for Democratic Action
Washington Commonwealth Federation
Wisconsin Conference on Social Legislation
Workers Alliance
Workers Party, including Socialist Youth League
Young Communist League

Subversive:
Communist Party, U. S. A., its subdivisions, subsidiaries, and affiliates
Communist Political Association, its subdivisions, subsidiaries, and affiliates, including:
  Florida Press and Educational League
  Peoples Educational and Press Association of Texas
  Virginia League for Peoples Education
German-American Bund
Independent Socialist League
Partido del Pueblo of Panama (*operating in the Canal Zone*)
Socialist Workers Party
Workers Party
Young Communist League

Organizations which have "adopted a policy of advocating or approving the commission of acts of force and violence to deny others their rights under the Constitution of the United States":
American Christian Nationalist Party
Associated Klans of America
Association of Georgia Klans
Columbians
Knights of the White Camellia
Ku Klux Klan
Original Southern Klans, Incorporated
Protestant War Veterans of the United States, Inc.
Silver Shirt Legion of America

Organizations which "seek to alter the form of government of the United States by unconstitutional means":
Communist Party, U. S. A., its subdivisions, subsidiaries, and affiliates
Communist Political Association, its subdivisions, subsidiaries, and affiliates, including:
  Florida Press and Educational League
  Peoples Educational and Press Association of Texas
  Virginia League for Peoples Education
Independent Socialist League
Industrial Workers of the World
Nationalist Party of Puerto Rico
Partido del Pueblo of Panama (*operating in the Canal Zone*)
Socialist Workers Party
Workers Party
Young Communist League

THE FOLLOWING ADDITIONS TO AND DELETIONS FROM THE ABOVE LIST HAVE BEEN MADE BY SUBSEQUENT EXECUTIVE ORDERS AND LETTERS:

I HAVE READ THE LIST ABOVE INCLUDING ALL ADDITIONS AND DELETIONS.

SIGNATURE OF PERSON MAKING CERTIFICATE
Alan B. Watts
Alan B. Watts

SIGNATURE OF WITNESSING OFFICER
S. PISICCHIO LT, USCG
By direction

DD FORM 1 DEC 50 98a Edition of 1 Feb 50 is obsolete.

U. S. GOVERNMENT PRINTING OFFICE : 1951—O-925558

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

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

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

1. DESIGNATOR'S LAST NAME-FIRST NAME-MIDDLE NAME	2. SERVICE NO.	3. GRADE, RANK OR RATE	4. SERVICE ☐ USA ☐ USN ☐ USAF ☐ USMC ☒ USCG
WATTS, ALAN BRENNEN	209-630	BM1	

5. FIRST NAME-MIDDLE NAME-LAST NAME OF PERSON TO BE NOTIFIED IN CASE OF EMERGENCY *(Person with permanent address is advisable)*	RELATIONSHIP *(If friend, so state)*
LOUISE WATTS	WIFE

ADDRESS *(Number, Street, City and State)*
HIGH STREET, MACHIAS, MAINE

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

6. SPOUSE *(First name, Middle Name, Last name) (If none, or if deceased or divorced, so state)*	ADDRESS *(Number, Street, City and State)*
LOUISE WATTS	SAME

7. CHILDREN FIRST NAME-MIDDLE NAME-LAST NAME	ADDRESS *(Number, Street, City and State)*	MARRIED OR SINGLE	SEX	AGE
WAYNE WATTS	SAME	SINGLE	M	11

(Continue on reverse side)

8. NAME OF FATHER *(or male guardian) (First name, Middle name, Last name)*	ADDRESS *(Number, Street, City and State)*
FRED WATTS	JONESBORO, MAINE

9. NAME OF MOTHER *(or female guardian) (First name, Middle name, Last name)*	ADDRESS *(Number, Street, City and State)*
FLORENCE WATTS	SAME

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

10. FIRST NAME-MIDDLE NAME-LAST NAME	RELATIONSHIP
FLORENCE WATTS	MOTHER

ADDRESS *(Number, Street, City and State)*
SAME

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

11. FIRST NAME-MIDDLE NAME-LAST NAME	RELATIONSHIP
FRED WATTS	FATHER

ADDRESS *(Number, Street, City and State)*
SAME

VOLUNTARY ENTRIES

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

12. FULL NAME OF COMPANY	ADDRESS OF HOME OFFICE	POLICY NO.
* * *	* * *	* *

(Continue on reverse side)

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

13. FIRST NAME-MIDDLE NAME-LAST NAME	RELATIONSHIP
LOUISE WATTS	~~MOTHER~~ Wife
ADDRESS *(Number, Street, City and State)* SAME	RECEIVE EACH MONTH 100 % OF MY PAY.

MILITARY ADDRESS	DATE SIGNED	SIGNATURE OF DESIGNATOR
Office, Comdr., 1st CG District Boston, Mass.	13 MAY 52	Alan B. Watts Alan B. Watts

DD FORM 1 JUL 50 93 REPLACES DD FORM 93, 1 JAN 50: NME FORM 93 1 OCT 48: NAVMC 118 (15 PD): NAVPERS 601, PAGES 7 AND 8: AND NCG 2529, WHICH MAY BE USED UNTIL 1 JANUARY 1951, WHEN THEY WILL ALL BECOME OBSOLETE.

BENEFICIARIES OF LIFE

side of form prior to making entries)

1. FIRST NAME-MIDDLE NAME-LAST NAME OF PERSON MAKING DESIGNATION (Person with permanent address is advisable)	2. SERVICE NO.	3. GRADE, RANK OR RATE	4. SERVICE ☐ USA ☐ USN ☐ USAF ☐ USMC ☐ USCG
ALAN BRINNER WATTS	209 630	BM1	

ADDRESS (Number, Street, City and State) LOUISE WATTS HIGH STREET, MACHIAS, MAINE — RELATIONSHIP (If friend, so state) WIFE

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

6. SPOUSE (First name, Middle Name, Last name) (If none, or if deceased or divorced, so state) LOUISE WATTS — ADDRESS (Number, Street, City and State) SAME

7. CHILDREN

FIRST NAME-MIDDLE NAME-LAST NAME	ADDRESS (Number, Street, City and State)	MARRIED OR SINGLE	SEX	AGE
WAYNE WATTS	SAME	SINGLE	M	11

(Continue on reverse side)

8. NAME OF FATHER (or male guardian) (First name, Middle name, Last name) FRED WATTS — ADDRESS (Number, Street, City and State) JONESBORO, MAINE

9. NAME OF MOTHER (or female guardian) (First name, Middle name, Last name) FLORENCE WATTS — ADDRESS (Number, Street, City and State) SAME

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

10. FIRST NAME-MIDDLE NAME-LAST NAME FLORENCE WATTS — RELATIONSHIP MOTHER

ADDRESS (Number, Street, City and State) SAME

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

11. FIRST NAME-MIDDLE NAME-LAST NAME FRED WATTS — RELATIONSHIP FATHER

ADDRESS (Number, Street, City and State) SAME

VOLUNTARY ENTRIES

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

12. FULL NAME OF COMPANY	ADDRESS OF HOME OFFICE	POLICY NO.
* * *	* * *	* *

(Continue on reverse side)

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

13. FIRST NAME-MIDDLE NAME-LAST NAME LOUISE WATTS — RELATIONSHIP MOTHER Wife

ADDRESS (Number, Street, City and State) SAME — RECEIVE EACH MONTH 100 % OF MY PAY.

MILITARY ADDRESS	DATE SIGNED	SIGNATURE OF DESIGNATOR
Office, Comdr., 1st CG District Boston, Mass.	13 MAY 52	Alan B. Watts Alan B. Watts

DD FORM 1 JUL 50 93 REPLACES DD FORM 93, 1 JAN 50: NME FORM 93 1 OCT 48: NAVMC 118 (15 PD): NAVPERS 601, PAGES 7 AND 8: AND NCG 2529, WHICH MAY BE USED UNTIL 1 JANUARY 1951, WHEN THEY WILL ALL BECOME OBSOLETE.

TREASURY DEPARTMENT
U. S. COAST GUARD
CG-2500C (Sheet 3) (8-49)

TERMINATION OF SERVICE

NAME	SERVICE NO.	RATING
WATTS, Alan B.	209-630	BM1(L)(AN)
UNIT	**LOCATION**	**DATE REPORTED**
Commander, 1st CG District	Boston, Mass.	28 April, 1952
FINAL AVERAGE EFFICIENCY MARKS →	**PROFICIENCY IN RATING**	**CONDUCT**
	3.7	4.0

DEDUCTIBLE TIME WHILE ATTACHED — [XXX] NONE — [ ] ENTERED IN DEDUCTIBLE TIME ARTICLE OF RECORD

DISPOSITION OF IDENTIFICATION CREDENTIALS — [ ] SURRENDERED — [ ] NOT SURRENDERED *(Explanation below)*

STATEMENTS OF DISCHARGEE

EXPLANATION OF NON-SURRENDER OF IDENTIFICATION CREDENTIALS

Machias, Maine
PLACE TO WHICH TRAVEL ALLOWANCE IS ELECTED

DISPOSITION OF UNUSED LEAVE

- [ ] NOT ELIGIBLE FOR CASH COMPENSATION
- [XX] ELECTS TO RECEIVE CASH COMPENSATION
- [ ] ELECTS OR REQUIRED TO CARRY OVER UNUSED LEAVE TO NEW ENLISTMENT

RECEIPT OF THE FOLLOWING IS ACKNOWLEDGED

- [ ] HONORABLE DISCHARGE BUTTON
- [XXX] SATISFACTORY SERVICE CARD NO.
- [ ] INFORMATION RELATIVE TO RIGHTS AND BENEFITS AS A VETERAN
- [XXX] HONORABLE DISCHARGE CERTIFICATE

ADDRESS SUBSEQUENT TO DISCHARGE *(If to be reenlisted on day following discharge, so state)*

Reenlisting

SIGNATURE OF DISCHARGEE
Alan B. Watts
Alan B. Watts

REMARKS

DISCHARGE

DATE	TYPE OF DISCHARGE
5-12-52	HONORABLE

REASON
Expiration of Enlistment

AUTHORITY
12-3-42 4(1) CG Regs.

MUSTERING OUT PAY

[ ] ENTITLED — [XXX] NOT ENTITLED

AMOUNT PAID	VOUCHER NO.	CHECK NO.

TRAVEL ALLOWANCE AND PAY

PAID TA FROM	TO
Boston, Mass	Michias, Maine
TOTAL TA	**TOTAL TA & PAY** *(In full to date of discharge)*
19.62	562.92
CHECK NO.	**NAME OF PAY OFFICER**
	T.M.KROTKY, CDCLK, ACO.

CREDITABLE SERVICE THIS ENLISTMENT

YEARS	MONTHS	DAYS
4	0	8

REENLISTMENT RECOMMENDATION

[XXX] RECOMMENDED — [ ] NOT RECOMMENDED

Certified to be correct upon termination of service

S. PISICCHIO LT, USCG
By direction OFFICER

B 4530

N. C. G.-2511 A
Form approved by
Comptroller General, U. S.
January 31, 1941

UNITED STATES COAST GUARD

STATEMENT OF CREDITABLE SERVICE

(For Enlistment Allowance)

Office, Commander, 1st CG District, Boston, Mass.
(Unit)

WATTS, ALAN BRENNEN — 12 MAY 52
(Name in full—surname to the left) (Date)

209-630 — BM1
(Service number) (Rating on discharge)

	Year	Month	Day
Date of last enlistment (for 4 years)	48	05	05
Enlistment extended (for ..... years from)			08
Date of discharge (HONORABLE) (Character of discharge)	52	05	12
Total time of last enlistment period			

NUMBER OF—		
Years	Months	Days
4	0	8

ABSENT TIME DURING PERIOD (Inclusive dates to be shown)

Absent Without Leave			Absent Due to Own Misconduct			Absent Due to Confinement		
From—	To—	Days	From—	To—	Days	From—	To—	Days
NONE			NONE			NONE		

Total Absence (0 days)

Creditable time served during last enlistment period	4	0	8

I CERTIFY that the above is a full, true, and correct statement of creditable service of the above-mentioned man during the period of his last enlistment.

S. PISICCHIO

Date 12 May, 19 52 (Rank) Lieutenant, U. S. C. G.
By direction *Commanding officer.*

REENLISTMENT OR EXTENSION OF ENLISTMENT

Date 13 MAY, 19 52 Office, Comdr., 1st CG District, Boston, Mass.
(Unit and place)

I CERTIFY that the above-named man Reenlisted for
(Reenlisted or voluntarily extended his enlistment)
a period of Six years from this date.

S. PISICCHIO

(Rank) Lieutenant, U. S. C. G.
By direction *Commanding officer.*

16—20908-1

TREASURY DEPARTMENT
U. S. COAST GUARD
CG-2599 (REV. 5-50)

REPORT OF CHANGE IN PERSONNEL

No. 5-252

LAST NAME, FIRST NAME, INITIAL	SERVICE NO.	PRESENT GRADE OR RATING
WATTS, ALAN BRENNEN	209-630	~~EM1~~ BM1
REPORTING UNIT	**LOCATION**	**DATE**
OC1CGD	Boston, Mass.	13 MAY 52
UNIT TO WHICH ATTACHED	**LOCATION**	**ACCOUNTING CODE NO.**
ADMIN		01-510000-41

TIME
DATE
REPORTED FROM:
FOR

AUTH:

TIME
DATE
TRANSFERRED TO:
FOR

AUTH:

CHANGED IN {GRADE / RATING} FROM _____ TO _____ EFFECTIVE _____

AUTH:

OTHER CHANGES (SPECIFY)

13 MAY 52-Reenlisted this date in a Regular Enlistment for a period of Six(6) yrs.
Elects reenlistment Bonus in amount of $360.00

AUTH: Art 12-3-19 CG Regulations

S. PISICCHIO, LT. USCG
By direction
(Signature—Grade and Title)

SPACE BELOW IS FOR HEADQUARTERS' USE ONLY

EXAMINED	POSTED	FLEX

16—40355-4 U. S. GOVERNMENT PRINTING OFFICE

TREASURY DEPARTMENT
U. S. COAST GUARD
CG-2599 (REV. 5-50)

REPORT OF CHANGE IN PERSONNEL

No. 5-251

LAST NAME, FIRST NAME, INITIAL	SERVICE NO.	PRESENT GRADE OR RATING
WATTS, Alan B.	209-630	BM1(L)(AN)
REPORTING UNIT	**LOCATION**	**DATE**
Commander, 1st CG District	Boston, Mass.	5-12-52
UNIT TO WHICH ATTACHED	**LOCATION**	**ACCOUNTING CODE NO.**
ADMIN	Boston, Mass.	01-510000-41

TIME
DATE
REPORTED FROM:
FOR

AUTH:

TIME
DATE
TRANSFERRED TO:
FOR

AUTH:

CHANGED IN {GRADE / RATING} FROM _____ TO _____ EFFECTIVE _____

AUTH:

OTHER CHANGES (SPECIFY)

12 MAY 52 - Issued HONORABLE DISCHARGE, this date, by reason of expiration of enlistment.

Not entitled to MOP

Entitled to MA fm POD: Boston, Mass., to HA Machias, Maine.

Leave balance on discharge certified to be 60 days.

Creditable CG service, this enlistment, 4 yrs., 0 mos., 8 days.

Has declared intentions to reenlist on day following discharge.

AUTHD: 12-3-42A(1) CG Regs.

S. PISICCHIO LT, USCG
(Signature—Grade and Title)
By direction

SPACE BELOW IS FOR HEADQUARTERS' USE ONLY

EXAMINED	POSTED	FLEX

16—40355-4 U. S. GOVERNMENT PRINTING OFFICE

RECORD OF WATTS, Alan Brennen (Full name, surname to the left) 209-630 (Service Number)

8. LEAVE ACCOUNT WITH PAY

Ship or station	Date		Number of days	Balance		Signature
	Departed	Returned		Annual	Reenlist	

9. ABSENCE FROM DUTY WITHOUT PAY

Ship or station	Number of days	From—	To—	Remarks	Signature
Grp, S.W.Hbr,Me.	NO	DEDUCTIBLE TIME WHILE ATTACHED THIS UNIT			Lt.
Grp, Moose Peak,Me.	NO	DEDUCTIBLE TIME WHILE ATTACHED THIS UNIT			BM1(I ByDi
CGTS, GROTON, CT		NO DEDUCTIBLE TIME WHILE ATTACHED TO THIS UNIT			
Grp.,Moose Peak,Me.	NO	DEDUCTIBLE TIME WHILE ATTACHED TO THIS UNIT			CBOSI
BOON ISL. LTSta	NO	DEDUCTIBLE TIME WHILE ATTACHED TO THIS UNIT			CO

10. TRIALS BY COURTS MARTIAL

Ship or station	Date	REMARKS: Kind of court, charge, sentence of court, and action of reviewing authority

NCG 2500-C
(Rev. June 1942)

Sheet 1

SERVICE RECORD

RECORD OF WATTS, Alan Brennen — 209-630
(Full name, surname to the left) (Service number)

1. TRANSFERS

Departed from— Unit	Date	Signature	Reported to— Unit	Date	Signature
Grp, S.W.Hbr,Me.	6-30-48	Lt.	Grp,Moose Peak,Me	7-1-48	Lt.
Grp, Moose Peak,Me.	8-16-48	BMC(L) ByDir	CGTS, GROTON, CT.	AUG 17 1948	A.S. ALEXANDER, S.Clk., USCG, By dir.
CGTS, GROTON, CT.	JAN 17 1949	A.S. ALEXANDER S.Clk., USCG, By dir.			
COMDR.1CGD: Rptd 1-28-49 Dptd 1-28-49 Attached less than 48 hours. No marks assigned. No deductible time. No breach of discipline.					By Dir.
Moose Peak LB Sta.	5-10-50	CBOSN	Grp,Moose Peak,Me.	1-29-49	LT.
GRP GLOUCESTER	5/7/52	CO	GRP PORTSMOUTH	5-13-50	CO
GRP PORTSMOUTH TR TO GRP GLOUCESTER 5/15/52	OC1CGD	5-12-52 By dir.	OC1CGD	4-28-52	LT, By direction

2. CHANGES IN RATING

Unit	Rated or disrated to—	Date	Signature
CGTS, GROTON, CT.	C/R fm BMI(L) to BMI(L-XAP) Auth: PC 76-44	JAN 17 1949	A.S. ALEXANDER, S.Clk., USCG, By dir.

3. DETAILS—RESERVE ACTIVE DUTY

Ship or station	Date From—	Date To—	Duty	Signature
Portsmouth Hbr. IBS	5-13-50	6-6-50	Active	CO
Boon Island LT. Sta.	6-6-50		Active	CO

4. SWIMMING QUALIFICATIONS

Unit	Date of qualification	Signature

16—9676-2

RECORD OF WATTS, Alan Brennen 209-630
(Full name, surname to the left) (Service number)

5. SPECIAL QUALIFICATIONS

Ship	Date	Proficient in—	Signature
CGTS, GROTON, CT.	JAN 17 1949	Satisfactorily completed course of instruction in Aids to Navigation School, with a mark of 88.1; and No. 2 in a class of 7	A. S. ALEXANDER CAPT., USCG, By dir.

6. EFFICIENCY MARKS

Date	Rate	Proficiency in rating	Seamanship	Mechanical ability	Ability as leader of men	Conduct	Signature
6-30-48	BM1(L)	3.6	3.6	3.4	3.6	4.0	Grp, SW Hbr, Me LT.
8-16-48	BM1(L)	3.6	3.6	3.4	3.6	4.0	Grp, Moose Peak, Me BM1(L)
JAN 17 1949	BM1(L)(AN)	UNDERGOING TRAINING				4.0	CGTS, GROTON, CT. A. S. ALEXANDER, CAPT., USCG, By dir.
~~3-31-49~~	~~BM1(L)(AN)~~	~~3.6~~	~~3.6~~	~~3.4~~	~~3.6~~	~~4.0~~	~~Grp., SW Hbr, Me.~~ LT.
3-31-49	BM1(L)(AN)	3.6	3.6	3.4	3.6	4.0	Grp., Moose Peak, Me. LT.
6-30-49	BM1(L)(AN)	3.6	3.6	3.4	3.6	4.0	Grp., Moose Peak, Me LT.
9-30-49	BM1(L)(AN)	3.6	3.6	3.4	3.6	4.0	Grp., Moose Peak, Me. CBOS
12-31-49	BM1(L)(AN)	3.6	3.6	3.4	3.6	4.0	GRP, MOOSE PEAK, ME. CBOS
3-31-50	BM1(L)(AN)	3.6	3.6	3.4	3.6	4.0	MOOSE PEAK LBS CBOSN
5-10-50	BM1(L)(AN)	3.6	3.6	3.4	3.6	4.0	MOOSE PEAK LBS CBOSN
6-30-50	BM1(L)AN	3.0	3.7	3.6	3.7	4.0	GRP PORTSMOUTH CO
9-30-~~40~~50	BM1(L)AN	3.7	3.7	3.6	3.7	4.0	BOON IS. LT. STA. CO
12-31-50	BM1(L)(AN)	3.7	3.7	3.6	3.7	4.0	BOONE IS.LT. STA. CO
3-31-51	BM1 (L)	3.7	3.7	3.6	3.7	4.0	BOONE IS LT STA. CO
6-30-51	BM1L(AN)	3.8	3.8	3.7	3.8	4.0	BOON IS. LT. STA. CO
9-30-51	BM1(AN)	3.8	3.8	3.7	3.8	4.0	BOON ISL.LT.STA. CO
12/31/51	BM1	3.8	3.8	3.7	3.8	4.0	BOOM LSL.LT.STA. CO
3/31/52	BM1(L)(AN)	3.8	3.8	3.7	3.8	4.0	BOON ISL. LTSta CO
5/7/52	~~BM1(L)(AN)~~	~~3.8~~	~~3.8~~	~~3.7~~	~~3.8~~	~~4.0~~	~~BOON ISL. LTSta~~ CO
5-12-52 AVERAGE	~~XBM1(L)(AN)~~	3.8	--	--	--	4.0	OClCGD LTR dir.

Upon receipt of Enlistment Record it shall be checked to see that previous marks have been entered. The last unit at which service is rendered will be held responsible for the completeness of the marks.

7. COMMENDATIONS AND AWARDS

(Award of medals, citations, headquarters commendation, honorable discharge button, etc.)

Ship or station	Date	REMARKS

16—0676-2

CG 2500-C
(Rev. 4-49)

RECORD OF _____ _____
(Full name, surname to the left) (Service number)

8. LEAVE RECORD

ACCRUED LEAVE				LEAVE TAKEN							
Reason and Date	Creditable service for leave purposes		Number of days earned	Departed		Returned		Type and reason	Number of days	Balance due	SIGNATURE AND UNIT
	Months	Days		Hour	Date	Hour	Date				
5-12-52	10	12								26	
HDEE ELECTS LUMP SUM PAYMENT OF $_____ FOR UNUSED LEAVE ON DISCHARGE										60	OC1CGD LTBydr
Paid $543.30 for (60) sixty days unused leave BP&L and Allow. 5/12/52.											T.M.KROTKY, CPC1K, ACO.
				1-18-49	1-22-49	ACC	REG	5	0		Bydir C1CGD
				1-23-49	1-27-49	ADV	REG	5	-5		Bycir C1CGD
ANCR	6-30-49	30							25		LT. Grp., Moose Peak, Me.
BBF	7-1-49	25							25		LT Grp. Moose Peak, Me.
				7-29-49	8-2-49	ACC	REG	5	20		LCDR Grp., Moose Peak, Me.
				11-10-49	11-24-49	ACC	REG	15	5		CBOSN Grp., Moose Peak, Me.
ANCR	6-30-50	30							35		CO
BBF	7-1-50	35							35		CO
				11-18-50	11-22-50	ACC	REG	5	30		CO
ANCR	6-30-51	30							60		CO GRP PORTSMOUTH
BBF	7-1-51								60		CO GRO PORTSMOUTH
				8-15-51	8-24-51	ACC	REG	10	50		CO
				11-6-51	11-10-51	ACC	REG	5	45		CO
				3-20-52	3-24-52	ACC	REG	5	40		CO GRP PORTSMOUTH

PERIODS FOR WHICH LEAVE DOES NOT ACCRUE

FROM (Inclusive dates)	TO	REASON	NO. DAYS	CO's SIGNATURE AND UNIT

WATTS, Alan Brennen (Full name, surname to left) 209-630 (Service No.)

LEAVE RECORD

ACCRUED CREDITS			LEAVE TAKEN					BAL DUE	CO's SIGNATURE AND UNIT
REASON	DATE	NO. DAYS	FROM (Inclusive dates)	TO	TYPE OF LEAVE	REASON FOR LEAVE	NO. DAYS	NO. DAYS	
Reenl.	5-5-48	00							
ANCR	6-30-48	5						5	LT.
BBF	7-1-48	5							LT.
			1-18-49	1-22-49	ACC	REG	5	0	Bydir C1CGD
			1-23-49	1-27-49	ADV	REG	5	-5	Bycir C1CGD
ANCR	6-30-49	30						25	LT. Grp., Moose Peak, Me.
BBF	7-1-49	25						25	LT Grp, Moose Peak, Me.
			7-29-49	8-2-49	ACC	REG	5	20	LCDR Grp., Moose Peak, Me.
			11-10-49	11-24-49	ACC	REG	15	5	CBOSN Grp., Moose Peak, Me.
ANCR	6-30-50	30						35	CO
BBF	7-1-50	35						35	CO
			11-18-50	11-22-50	ACC	REG	5	30	CO
ANCR	6-30-51	30						60	CO GRP PORTSMOUTH
BBF	7-1-51							60	CO GRO PORTSMOUTH
			8-15-51	8-24-51	ACC	REG	10	50	CO
			11-6-51	11-10-51	ACC	REG	5	45	CO
			3-20-52	3-24-52	ACC	REG	5	40	CO GRP PORTSMOUTH

RE-PR-30

PERIODS FOR WHICH LEAVE DOES NOT ACCRUE

FROM (Inclusive dates)	TO	REASON	NO. DAYS	CO's SIGNATURE AND UNIT

TREASURY DEPARTMENT
U. S. COAST GUARD
CG-2599 (REV. 5-50)

REPORT OF CHANGE IN PERSONNEL

No. 5-448

LAST NAME, FIRST NAME, INITIAL	SERVICE NO.	PRESENT GRADE OR RATING
WATTS, Alan B.	209-630	BM1(AN)

REPORTING UNIT	LOCATION	DATE
OC1CGD	Boston, Mass.	20 May, 1952
UNIT TO WHICH ATTACHED	**LOCATION**	**ACCOUNTING CODE NO.**
ADMIN	Boston, Mass.	01-510000-41

TIME 1434 REPORTED FROM: CG Group Gloucester
DATE 5-12 FOR TD in connection with disch. & reenl.

AUTH: CO/L 5-12-52 MM/P16-3

TIME 1615 TRANSFERRED TO: CG Group Gloucester
DATE 5-13 FOR RESDU TD completed

AUTH: C1CGD/Ind-1 5-13-52

CHANGED IN {GRADE / RATING} FROM _____ TO _____ EFFECTIVE _____

AUTH:

OTHER CHANGES (SPECIFY)

S. FISICCHIO, LT, USCG
By direction (*Signature—Grade and Title*)

SPACE BELOW IS FOR HEADQUARTERS' USE ONLY

EXAMINED	POSTED	FLEX

16—40355-4 U. S. GOVERNMENT PRINTING OFFICE

TREASURY DEPARTMENT
U. S. COAST GUARD
CG-2599 (REV. 5-50)

REPORT OF CHANGE IN PERSONNEL

No. 5-52

LAST NAME, FIRST NAME, INITIAL	SERVICE NO.	PRESENT GRADE OR RATING
WATTS, Alan B.	209-630	BM1(L)(AN)

REPORTING UNIT	LOCATION	DATE
Boon Island Light Station Portsmouth Grp	New Castle N.H.	5/14/52
UNIT TO WHICH ATTACHED	**LOCATION**	**ACCOUNTING CODE NO.**
Boon Island Light Station	New Castle N.H.	01-300425

TIME 1100
DATE 5/14/52

REPORTED FROM: OC1CGD
FOR Resumption of regular duty.

AUTH: C/O/L dated 12 May, 1952 MM/P16-3

TIME
DATE

TRANSFERRED TO:
FOR

AUTH:

CHANGED IN {GRADE / RATING} FROM _____ TO _____ EFFECTIVE _____

AUTH:

OTHER CHANGES (SPECIFY)

Orig. PE-PR-20

Alan B. Watts
Alan B. Watts, BM1(L)(AN)
(Signature—Grade and Title)

SPACE BELOW IS FOR HEADQUARTERS' USE ONLY

EXAMINED	POSTED	FLEX

16—40355-4 U. S. GOVERNMENT PRINTING OFFICE

C6 H9

TREASURY DEPARTMENT
U. S. COAST GUARD
CG-2599 (REV. 5-50)

REPORT OF CHANGE IN PERSONNEL

No. 5-398

LAST NAME, FIRST NAME, INITIAL	SERVICE NO.	PRESENT GRADE OR RATING
WATTS, Alan B.	209-630	BM1(AN)
REPORTING UNIT	**LOCATION**	**DATE**
OC1CGD	Boston, Mass.	19 May, 1952
UNIT TO WHICH ATTACHED	**LOCATION**	**ACCOUNTING CODE NO.**
ADMIN	Boston, Mass.	01-5100000-41

TIME 1434 REPORTED FROM: CG Group Gloucester
DATE 5-12 FOR TD in connection with discharge and reenl.

AUTH: CO/L 5-12-52 MM/P16-3

TIME TRANSFERRED TO:
DATE FOR

AUTH:

CHANGED IN {GRADE / RATING} FROM _____ TO _____ EFFECTIVE _____

AUTH:

OTHER CHANGES (SPECIFY)

S. PISICCHIO, LT, USCG
By direction
(Signature—Grade and Title)

SPACE BELOW IS FOR HEADQUARTERS' USE ONLY

EXAMINED	POSTED	FLEX

16—40355-4 U. S. GOVERNMENT PRINTING OFFICE

4-851

WATTS, Alan B. 209-630 BMLl

OC1CGD Boston, Mass. 1 May, 1952

ADMIN Boston, Mass. 01-510000-41

SERVICE RECORD

1600
4-29-52

CG Group Gloucester, Mass.
PESDU

C1CGD/L 4-28-52

S. PISICCHIO, LT, USCG
By direction

TREASURY DEPARTMENT
U. S. COAST GUARD
CG-2599 (REV. 5-50)

NE-FR-30

REPORT OF CHANGE IN PERSONNEL

No. 4-52

LAST NAME, FIRST NAME, INITIAL	SERVICE NO.	PRESENT GRADE OR RATING
WATTS, Alan B.	209-630	BM1(L)(AN)

REPORTING UNIT	LOCATION	DATE

UNIT TO WHICH ATTACHED	LOCATION	ACCOUNTING CODE NO.
Boon Island Light Station	New Castle, N.H.	01-300425

TIME
DATE

REPORTED FROM:
FOR

AUTH:

TIME 0930
DATE 5/12/52

TRANSFERRED TO: OCLCGD
FOR Assignment to temporary duty in connection with discharge and reenlistment.

AUTH: C/O/L dated 12 May, 1952 MM/P16-3

CHANGED IN {GRADE / RATING} FROM _____ TO _____ EFFECTIVE _____

AUTH:

OTHER CHANGES (SPECIFY)

Alan B. Watts

Alan B. Watts, BM1(L)(AN)
(Signature—Grade and Title)

SPACE BELOW IS FOR HEADQUARTERS' USE ONLY

EXAMINED	POSTED	FLEX

16—40355-4 U. S. GOVERNMENT PRINTING OFFICE

4-872

WATTS, Alan B.	209-630	BML1
OC1CGD	Boston, Mass.	5 May, 1952
ADMIN	Boston, Mass.	01-510000-41

1306
4-28-52

CG Group Gloucester
~~TAD in connection with~~ Disch & Reenl

CO/L 4-15-52 MN/P16-3 Ind-1 4-28-52

S. PISICCHIO, LT, USCG
By direction

SERVICE RECORD

TREASURY DEPARTMENT
U. S. COAST GUARD
CG-2599 (REV. 5-50)

REPORT OF CHANGE IN PERSONNEL

No. 4-872

LAST NAME, FIRST NAME, INITIAL	SERVICE NO.	PRESENT GRADE OR RATING
WATTS, Alan B.	209-630	BML1
REPORTING UNIT	**LOCATION**	**DATE**
OC1CGD	Boston, Mass.	5 May, 1952
UNIT TO WHICH ATTACHED	**LOCATION**	**ACCOUNTING CODE NO.**
ADMIN	Boston, Mass.	01-510000-41

TIME 1306
DATE 4-28-52

REPORTED FROM: CG Group Gloucester
FOR TAD in connection with Disch & Reenl

AUTH: CO/L 4-15-52 MM/P16-3 Ind-1 4-28-52

TIME
DATE

TRANSFERRED TO:
FOR

AUTH:

CHANGED IN {GRADE / RATING} FROM _____ TO _____ EFFECTIVE _____

AUTH:

OTHER CHANGES (SPECIFY)

S. PISICCHIO, LT, USCG
By direction
(Signature—Grade and Title)

SPACE BELOW IS FOR HEADQUARTERS' USE ONLY

EXAMINED	POSTED	FLEX

16—40355-4 U. S. GOVERNMENT PRINTING OFFICE

4-52

WATTS, Alan B. 209-630 EM1(L)(AN)

Boon Island Light Station New Castle N.H. 4/29/52

Boon Island Light Station New Castle N.H. 01-300425

2100
4/29/52

CGCGD
Assuption of regular duty.

CGCGD/L 29 April, 1952

Alan B. Watts, EM1(L)(AN)
USCG

TREASURY DEPARTMENT
U.S. COAST GUARD
CG-2599 (REV. 5-50)

REPORT OF CHANGE IN PERSONNEL

No. 4-52

LAST NAME, FIRST NAME, INITIAL	SERVICE NO.	PRESENT GRADE OR RATING
WATTS, Alan B.	209-630	BM1(L)(AN)

REPORTING UNIT	LOCATION	DATE
Boon Island Light Station	New Castle N.H.	4/29/52
UNIT TO WHICH ATTACHED	**LOCATION**	**ACCOUNTING CODE NO.**
Boon Island Light Station	New Castle N.H.	01-300425

TIME 2100
DATE 4/29/52

REPORTED FROM: ClCGD
FOR Assumption of regular duty.

AUTH: ClCGD/L 29 April, 1952

TIME
DATE

TRANSFERRED TO:
FOR

AUTH:

CHANGED IN {GRADE / RATING} FROM _____ TO _____ EFFECTIVE _____

AUTH:

OTHER CHANGES (SPECIFY)

PE-PR-20

Alan B. Watts
Alan B. Watts, BM1(L)(AN)
OinC (Signature—Grade and Title)

SPACE BELOW IS FOR HEADQUARTERS' USE ONLY

EXAMINED	POSTED	FLEX

16—40355-4 U. S. GOVERNMENT PRINTING OFFICE

TREASURY DEPARTMENT
U. S. COAST GUARD
CG-2599 (Rev. 5-50)

REPORT OF CHANGE IN PERSONNEL

No. 4-851

LAST NAME, FIRST NAME, INITIAL	SERVICE NO.	PRESENT GRADE OR RATING
WATTS, Alan B.	209-630	BM1l

REPORTING UNIT	LOCATION	DATE
OC1CGD	Boston, Mass.	1 May, 1952
UNIT TO WHICH ATTACHED	**LOCATION**	**ACCOUNTING CODE NO.**
ADMIN	Boston, Mass.	01-510000-41

TIME
DATE

REPORTED FROM:
FOR

AUTH:

TIME 1600
DATE 4-29-52

TRANSFERRED TO: CG Group Gloucester, Mass.
FOR RESDU

AUTH: C1CGD/L 4-28-52

CHANGED IN {GRADE / RATING} FROM _____ TO _____ EFFECTIVE _____

AUTH:

OTHER CHANGES (SPECIFY)

S. PISICCHIO, LT, USCG
By direction
(Signature—Grade and Title)

SPACE BELOW IS FOR HEADQUARTERS' USE ONLY

EXAMINED	POSTED	FLEX

16—40355-4 U. S. GOVERNMENT PRINTING OFFICE

3-52

WATTS, Alan B. (209-630) EM1(L)(AN)

Boon Island Light Station New Castle N.H. 01-300425

1030
4/28/52 CICGD
Temporary additional duty in connection with discharge and reenlistment

C/O letter dated 15 April, 1952

Alan B. Watts, EM1(L)(AN)
OinC

TREASURY DEPARTMENT
U. S. COAST GUARD
CG-2599 (REV. 5-50)

REPORT OF CHANGE IN PERSONNEL

Hqtrs

No. 3-52

PE-PR-26

LAST NAME, FIRST NAME, INITIAL	SERVICE NO.	PRESENT GRADE OR RATING
WATTS, Alan B.	(209-630)	BM1(L)(AN)

REPORTING UNIT	LOCATION	DATE

UNIT TO WHICH ATTACHED	LOCATION	ACCOUNTING CODE NO.
Boon Island Light Station	New Castle N.H.	01-300425

TIME
DATE

REPORTED FROM:
FOR

AUTH:

TIME 1030
DATE 4/28/52

TRANSFERRED TO: C1CGD
FOR Temporary additional duty in connection with discharge and reenlistment

AUTH: C/O letter dated 15 April, 1952

CHANGED IN {GRADE / RATING} FROM _____ TO _____ EFFECTIVE _____

AUTH:

OTHER CHANGES (SPECIFY)

Alan B. Watts
Alan B. Watts, BM1(L)(AN)
OinC (Signature—Grade and Title)

SPACE BELOW IS FOR HEADQUARTERS' USE ONLY

EXAMINED	POSTED	FLEX

16—40355-4 U. S. GOVERNMENT PRINTING OFFICE

GLOUCESTER, MASSACHUSETTS

Commanding Officer
CG Group Gloucester

15 April, 1952
MM/P16-3

AUTHORIZATION NO.01-4158

From: Commanding Officer CG Group Gloucester
To: WATTS, Alan B. (209-630)BM1(AN)-BOON ISLAND

Subj: Orders; transfer; temporary additional duty; travel

Ref: (a)CCGD1/L dated 9 April, 1952, MM/P16-3

1. In accordnace with instructions contained in reference (a) you are directed to proceed to Boston, Mass., and report to the Commander 1st CG District that place for temporary additional duty in commention with discharge and reenlistment. Upon completion of this temporary additional duty you will return to your regular station and duties.

2. You will depart as soon as practicable after arrival of relief.

3. Travel necessary to the execution of this order is required by the public interests and is authorized, chargeable against District travel allotment symbol 01-20. Allowances as prescribed by Joint travle Regulations are applicable.

4. Travle may be performed via privately owned conveyance, railroad, bus, water and/or air.

5. You will carry your health record with you.

6. No proceed time authorized.

CC: C1CGD(p)
C1CGD(f)
Service Record
File

A.E. HUNTLEY

Ind-1
Boon Island Light Station
New Castle N.H.

28 April, 1952

Departed Portsmouth Hbr. L/B Station at _____, 28 April, 1952 to comply with instrusction contained in reference (a) of this letter.

Alan B. Watts, BM1(L)(AN)
OinC

GLOUCESTER, MASSACHUSETTS

Commanding Officer
CG Group Gloucester

15 April, 1952
NS/P16-3

AUTHORIZATION NO. Gl-4158

From: Commanding Officer CG Group Gloucester
To: WATTS, Alan S. (209-430) SN&I(AN)-RHODE ISLAND

Subj: Orders; transfer; temporary additional duty; travel

Ref: (a) CGCGGl/t dated 9 April, 1952, NS/P16-3

1. In accordance with instructions contained in reference (a) you are directed to proceed to Boston, Mass., and report to the Commander 1st CG District that place for temporary additional duty in connection with discharge and reenlistment. Upon completion of this temporary additional duty you will return to your regular station and duties.

2. You will depart as soon as practicable after arrival of relief.

3. Travel necessary to the execution of this order is required by the public interests and is authorized, chargeable against District travel allotment symbol Gl-20. Allowances as prescribed by Joint Travle Regulations are applicable.

4. Travle may be performed via privately owned conveyance, railroad, bus, water and/or air.

5. You will carry your health record with you.

6. No proceed time authorized.

CC: CGCGD(p)
CGCGD(f)
Service Record
File

A.E. BUSTLEY

UNITED STATES COAST GUARD

ADDRESS REPLY TO
Commander, 1st CG District
Boston 9, Mass.

p
9 April, 1952
MM/P16-3

ORDER NO. 01-4158

From: Commander, 1st CG District
To: Commanding Officer, Gloucester Group

Subj: Personnel; orders, transfer, travel

1. Transfer WATTS, Alan B. (209-630) BML1(AN), attached to the Portsmouth Harbor LBS, to report to the Commander, 1st CG District, for assignment to temporary additional duty in connection with physical examination for discharge and reenlistment. Upon completion of this temporary additional duty, WATTS will return to his regular unit for resumption of his regular status.

2. This order constitutes a permanent change of station from present station to NOT APPLICABLE. (Attention is invited to Personnel Circular No. 29-48).

3. Travel necessary to the execution of this order is required by the public interests and is authorized, chargeable against DISTRICT travel allotment symbol 01-20. Allowances as prescribed by Joint Travel Regulations are applicable.

4. Proceed time is not authorized.

A. C. JONES
By direction

CC: Finance
OIC Portsmouth Harbor, LBS

dlvpt 28 apr 1952

Portsmouth Harbor LB Station
New Castle, N.H.

APR 7 RECD

MM/P14-4

5 April, 1952

From: Officer in Charge, Portsmouth Harbor LB Station
To: Commander, First Coast Guard District

Subj: WATTS, Alan B. (209-630) BM1(L)AN - BOON ISLAND LIGHT STATION; expiration of enlistment

The current enlistment of the subject-named man expires on 4 May, 1952 and you are advised that he desires to reenlist.

Cleo B. Faulkingham

Cleo B. Faulkingham, BMC(L)

CC: CO., CG Gr. Gloucester

TREASURY DEPARTMENT
U. S. COAST GUARD
CG-2599 (REV. 5-50)

REPORT OF CHANGE IN PERSONNEL

No. _____

LAST NAME, FIRST NAME, INITIAL	SERVICE NO.	PRESENT GRADE OR RATING
WATTS, Alan B. PE-PR-30	209-630	BM1(L) AN
REPORTING UNIT	**LOCATION**	**DATE**
Portsmouth Harbor LB Station	New Castle, N.H.	25 March, 1952
UNIT TO WHICH ATTACHED	**LOCATION**	**ACCOUNTING CODE NO.**
Boon Island Light Station	York, Maine	01-300424

TIME
DATE

REPORTED FROM:
FOR

PE-PR-26

AUTH:

TIME
DATE

TRANSFERRED TO:
FOR

AUTH:

CHANGED IN {GRADE / RATING} FROM _____ TO _____ EFFECTIVE _____

AUTH:

OTHER CHANGES (SPECIFY) 0830, 25 March, 1952 returned from five (5) days leave of absence granted by the CO., CG Group, Gloucester, Mass.

Cleo B. Faulkingham

Cleo B.Faulkingham, BMC(L) OIC
(Signature—Grade and Title)

SPACE BELOW IS FOR HEADQUARTERS' USE ONLY

EXAMINED	POSTED	FLEX

16—40355-4 U. S. GOVERNMENT PRINTING OFFICE

WATTS, Alan B. 209-630 BM1(L) AM

Portsmouth Harbor LB Station New Castle, N.H. 25 March, 1952

Boon Island Light Station York, Maine 01-300424

0830, 25 March, 1952 returned from five (5) days leave of absence granted by the CO., CG Group, Gloucester, Mass.

Cleo B.Faulkingham, BMC(L) OIC

APPLICATION FOR LEAVE OF ABSENCE
UNITED STATES COAST GUARD
NAVCG 2519 (REV. 5-45)

WARNING: YOU ARE WARNED NOT TO DISCUSS ANY ACTIVITIES OR THE MOVEMENTS OR LOCATIONS OF VESSELS; NOR TO PARTICIPATE IN A PRESS CONFERENCE OR TALK TO REPORTERS OR OVER THE RADIO EXCEPT AFTER CONSULTATION WITH AND CLEARANCE OF SUBJECT MATTER BY A PUBLIC RELATIONS OFFICER OF THE NAVY OR COAST GUARD.

UNIT	ADDRESS	DATE
Boon Island Light Sta.	New Castle N.H.	23 February, 1952

FROM (REQUESTER):	TO	VIA:
WATTS, Alan B. (209-630) BM1(L)	Commanding Officer, CG Group, Gloucester, Mass.	Officer-In-Charge, Port's. Hbr. L/B Station New Castle N.H.

THE FOLLOWING LEAVE IS REQUESTED:

NO. OF DAYS LEAVE	NO. OF DAYS TRAVEL	TO DEPART	No. OF DAYS LEAVE DURING FISCAL YEAR	No. OF DAYS LEAVE CURRENT ENLISTMENT YEAR	DATE OF EXPIRATION CURRENT ENLISTMENT YEAR
5		On or about 15 February, 1952 MARCH	15	15	4 May, 1952

REASON FOR REQUEST: Acc. Leave

My address on leave will be: High Street., Machias, Maine. (Tel 292-2)

I will immediately inform my commanding officer of any change in address while on leave.

Alan B. Watts

Alan B. Watts, BM1(L)(AN)
(Signature of applicant)

INDORSEMENTS

Ind.-1 Unit: Portsmouth Harbor LB Station Date: 26 February, 1952
Leave record indicates balance of 45 days' annual and 0 days' Reenlistment Leave due.
Forwarded [X] APPROVED [ ] NOT APPROVED (because)
Returned [ ] GRANTED [ ] NOT GRANTED (because)

Cleo B. Faulkingham

Cleo B.Faulkingham, BMC(L) OIC
COMMANDING EXECUTIVE PERSONNEL OFFICER

Ind.-2 Unit: CG GROUP, GLOUCESTER Date: 27 February, 1952
Forwarded [ ] APPROVED [ ] NOT APPROVED (because)
Returned [X] GRANTED [ ] NOT GRANTED (because)

A. E. HUNTLEY, CBOSN
PERS FORCES COMDR COMMANDING OFFICER.

Ind.-3 COAST GUARD HEADQUARTERS, Washington, D. C. Date:
Returned [ ] GRANTED [ ] NOT GRANTED.

COMMANDANT.

Ind.-4 Unit: Portsmouth Harbor LB Station Date: 19 March, 1952
Departed at 0900 this date. This leave of absence will expire before 0900
25 March, 1952, at Portsmouth Harbor LB Station and is subject to the special instructions indicated on reverse hereof.

Cleo B. Faulkingham

Cleo B.Faulkingham, BMC(L) OIC
COMMANDING EXECUTIVE PERSONNEL OFFICER

Ind.-5 Unit: Date:
Granted ..... days extension of leave to expire before noon, ...
Authority:

Signature and rank Title

Ind.-6 Unit: Portsmouth Harbor LB Station Date: 25 March 1952
Reported at 0830 this date, having taken 5 days' leave and 0 days' TT.

Cleo B. Faulkingham

Cleo B.Faulkingham, BMC(L) OIC
COMMANDING—EXECUTIVE—PERSONNEL OFFICER.

16—40220-3

[OVER]

WATTS, Alan B. 209-630 BM1(L) AN

Portsmouth Harbor LH Station New Castle, N.H. 19 March, 1952

BOON ISLAND LIGHT STATION York, Maine 01-300424

0900, 19 March, 1952 departed on five (5) days leave of absence granted by the Commanding Officer, CG Group, Gloucester, Mass.

Cleo B. Faulkingham

Cleo B. Faulkingham, BM2(L) OIC

TREASURY DEPARTMENT
U. S. COAST GUARD
CG-2599 (REV. 5-50)

REPORT OF CHANGE IN PERSONNEL

No. _____

LAST NAME, FIRST NAME, INITIAL	SERVICE NO.	PRESENT GRADE OR RATING
WATTS, Alan B.	209-630	BM1(L) AN
REPORTING UNIT	**LOCATION**	**DATE**
Portsmouth Harbor LB Station	New Castle, N.H.	19 March, 1952
UNIT TO WHICH ATTACHED	**LOCATION**	**ACCOUNTING CODE NO.**
BOON ISLAND LIGHT STATION	York, Maine	01-300424

TIME
DATE
REPORTED FROM:
FOR

PE-PR-26

AUTH:

TIME
DATE
TRANSFERRED TO:
FOR

AUTH:

CHANGED IN {GRADE / RATING} FROM _____ TO _____ EFFECTIVE _____

AUTH:

OTHER CHANGES (SPECIFY) 0900, 19 March, 1952 departed on five (5) days leave of absence granted by the Commanding Officer, CG Group, Gloucester, Mass.

Cleo B. Faulkingham

Cleo B. Faulkingham, BMC(L) OIC
(Signature—Grade and Title)

SPACE BELOW IS FOR HEADQUARTERS' USE ONLY

EXAMINED	POSTED	FLEX

16—40355-4 U. S. GOVERNMENT PRINTING OFFICE

Grp Portsmouth ✓

RECEIVED
PERSONNEL DIVISION
JAN 5 9 14 AM 1952
COGD
BOSTON, MASS.

Commander
1st CG District
1400 Custom House
Boston 9, Massachusetts

3 January, 1952
P15/A23

From: Commander, First Coast Guard District
To: WATTS, Alen B., (209-630) BM1(AN)

Subj: Excellent condition of Boon Island Light Station, appreciation of

1. A recent inspection report indicates that your performance of duty as Officer-in-Charge of Boon Island Light Station has been superior in that the quarters, light, and machinery have been maintained in an excellent state of cleanliness and effective operation. The appearance of the station, both the exterior and interior of all buildings, reflects credit on you and the men assigned during your term of duty as Officer-in-Charge.

2. A copy of this letter will be filed in your personnel jacket.

M. G. BRADBURY

RECEIVED
JAN 11 1952
GLOUCESTER LIFEBOAT STATION

SERVICE RECORD

MBC/1

WATTS, Alan B. 209-630 BM1(L) AM

CG Group, Portsmouth, N.H. Boon Island Light Station New Castle, N.H.

01-200430 01-300424 11 November, 1951

0815, 11 November, 1951 returned from five (5) days leave of absence granted by the CO., CG Group, Gloucester, Mass.

Glen E. Faulkingham, BMC(L)
Officer in Charge

REPORT OF CHANGE IN PERSONNEL
TREASURY DEPARTMENT
United States Coast Guard
CG-2599 (REV. 3-48)

DE-PR-39

No. _____

SURNAME, FIRST NAME, INITIAL	SERVICE OR SIGNAL NO.	PRESENT RANK OR RATING
WATTS, Alan B.	209-630	BM1(L) AN
MAJOR UNIT NAME	**MINOR UNIT NAME**	**LOCATION**
CG Group, Portsmouth, N.H.	Boon Island Light Station	New Castle, N.H.
MAJOR UNIT ITEM NO. OR VESSEL'S ASSIGNED DISTRICT	**MINOR UNIT ITEM NO.**	**DATE**
01-200430	01-300424	11 November, 1951

TIME
DATE
REPORTED FROM:
FOR

AUTH:

TIME
DATE
TRANSFERRED TO:
FOR

AUTH:

CHANGED IN {RANK / RATING} FROM _____ TO _____ EFFECTIVE _____

AUTH:

OTHER CHANGES (SPECIFY) 0815, 11 November, 1951 returned from five (5) days leave of absence granted by the CO., CG Group, Gloucester, Mass.

EXTRA COMPENSATION

FAMILY ALLOWANCES		MAQ/D	S & Q	FLIGHT PAY	SEA DUTY	ARMS QUAL.	AWARDS MEDALS	
CLASS A NO. DEP.	CLASS B NO. DEP.							

Cleo B. Faulkingham
Cleo B. Faulkingham, BMC(L)
Officer In Charge (Commanding)

SPACE BELOW IS FOR HEADQUARTERS' USE ONLY

ENLISTED PERSONNEL

RATE	DIST.	FOR. DOM.		UNIT		RATE LOSS

RECORDS

EXAMINED	POSTED	CODED

OFFICER PERSONNEL

GRADE	CHAR. APPT.	STATE	DIST.	SEA, SHORE	DUTY		DATE

16—40355-3 U. S. GOVERNMENT PRINTING OFFICE

TREASURY DEPARTMENT
U. S. COAST GUARD
CG-2599 (REV. 5-50)

REPORT OF CHANGE IN PERSONNEL

No. _____

LAST NAME, FIRST NAME, INITIAL	SERVICE NO.	PRESENT GRADE OR RATING
WATTS, Alan B.	209-630	BM1(L) AN
REPORTING UNIT	**LOCATION**	**DATE**
Boon Island Light Station	New Castle, N.H.	5 November, 1951
UNIT TO WHICH ATTACHED	**LOCATION**	**ACCOUNTING CODE NO.**
CG Group, Portsmouth, N.H.	New Castle, N.H.	01-300424

TIME
DATE
REPORTED FROM:
FOR

AUTH:

TIME
DATE
TRANSFERRED TO:
FOR

AUTH:

CHANGED IN {GRADE / RATING} FROM _____ TO _____ EFFECTIVE DE-PR-49

AUTH:

OTHER CHANGES (SPECIFY)

0900, 5 November, 1951 departed on five (5) days annual leave granted by the Commanding Officer, CG Group, Gloucester, Mass.

Cleo B. Faulkingham

Cleo B.Faulkingham, BMC(L) OIC
(Signature—Grade and Title)

SPACE BELOW IS FOR HEADQUARTERS' USE ONLY

EXAMINED	POSTED	FLEX

16—40355-4 U. S. GOVERNMENT PRINTING OFFICE

APPLICATION FOR LEAVE OF ABSENCE
UNITED STATES COAST GUARD
NAVCG 2519 (REV. 5-45)

WARNING: YOU ARE WARNED NOT TO DISCUSS ANY ACTIVITIES OR THE MOVEMENTS OR LOCATIONS OF VESSELS; NOR TO PARTICIPATE IN A PRESS CONFERENCE OR TALK TO REPORTERS OR OVER THE RADIO EXCEPT AFTER CONSULTATION WITH AND CLEARANCE OF SUBJECT MATTER BY A PUBLIC RELATIONS OFFICER OF THE NAVY OR COAST GUARD.

UNIT	ADDRESS	DATE
Boon Island Light Sta.	New Castle N.H.	16 October, 1951

FROM (REQUESTER):	TO	VIA:
WATTS, Alan B. (209-630) BM1(L)	Commanding Officer, CG Group, Gloucester, Mass.	Officer-in-Charge, Ports. Hbr. L/B Station

THE FOLLOWING LEAVE IS REQUESTED:

NO. OF DAYS LEAVE	NO. OF DAYS TRAVEL	TO DEPART	No. OF DAYS LEAVE DURING FISCAL YEAR	No. OF DAYS LEAVE CURRENT ENLISTMENT YEAR	DATE OF EXPIRATION CURRENT ENLISTMENT YEAR
5	0	On or about 5 Nov, 1951	10	10	4 May, 1952

REASON FOR REQUEST:

Acc. Leave

My address on leave will be: High Street, Machias, Maine Te l. 292-2

I will immediately inform my commanding officer of any change in address while on leave.

Alan B. Watts

Alan B. Watts, BM1(L)
(Signature of applicant)

INDORSEMENTS

Ind.-1 Unit: Portsmouth Harbor LB Station Date: 17 October, 1951
Leave record indicates balance of 50 days' annual and - - days' Reenlistment Leave due.
Forwarded ☒ APPROVED ☐ NOT APPROVED (because)
Returned ☐ GRANTED ☐ NOT GRANTED (because)

Cleo B. Faulkingham

Cleo B.Faulkingham, BMC(L) OIC
~~COMMANDING EXECUTIVE PERSONNEL OFFICER~~

Ind.-2 Unit: CG GROUP, GLOUCESTER Date: 20 October, 1951
Forwarded ☐ APPROVED ☐ NOT APPROVED (because)
Returned ☒ GRANTED ☐ NOT GRANTED (because)
If competent relief is available.

A. E. HUNTLEY, CBOSN
~~EXECUTIVE OFFICER~~ COMMANDING OFFICER.

Ind.-3 COAST GUARD HEADQUARTERS, Washington, D. C. Date:
Returned ☐ GRANTED ☐ NOT GRANTED.

COMMANDANT.

Ind.-4 Unit: Portsmouth Harbor LB Station Date: 5 November, 1951
Departed at 0900 this date. This leave of absence will expire before 0900
11 November, 1951, at Portsmouth Harbor LB Station and is subject to the special instructions indicated on reverse hereof.

Cleo B. Faulkingham

Cleo B.Faulkingham, BMC(L) Officer in Charge
~~COMMANDING EXECUTIVE PERSONNEL OFFICER~~

Ind.-5 Unit: Date:
Granted ..... days extension of leave to expire before noon, ...
Authority:

Signature and rank Title

Ind.-6 Unit: Portsmouth Harbor LB Station Date: 11 November, 1951
Reported at 0815 this date, having taken 5 days' leave and 0 days' TT.

Cleo B. Faulkingham

Cleo B.Faulkingham, BMC(L) Officer in Charge
~~COMMANDING EXECUTIVE PERSONNEL OFFICER~~

16—40220-3

[OVER]

WATTS, Alan B.	209-630	BM1(L) AN
Boon Island Light Station	New Castle, N.H.	5 November, 1951
CG Group, Portsmouth, N.H.	New Castle, N.H.	01-300424

0900, 5 November, 1951 departed on five (5) days annual leave granted by the Commanding Officer, CG Group, Gloucester, Mass.

Cleo B.Faulkingham, BMC(L) OIC

Commander, 1st CG District
Boston 9, Mass.

p
25 October, 1951
MK

From: Commander, 1st CG District
To: Commander, CG Group Gloucester

Subj: WATTS, Alan B. (209-630) BML1(AN); transfer request for, disapproval of

Advise subject man that no action will be taken on his request dated 16 October, 1951, file MK, in view of the fact that he is required to complete two years tour of duty to be eligible for rotation, in accordance with Aids to Navigation Circular 3-51. However, his name has been placed on file at this office.

A. G. JONES
By direction

Officer-in-Charge, Boon Isl. Lt. Sta.
New Ca s tle N.H.

16 October, 1951
MM

From: WA TTS, Alan B. (209-630) BM1(L)(AW); Boon Isl. Lt. Sta.
To: Commander. 1st CG District
Via: (1) Commanding Officer, CG Group, Gloucester, Mass.
(2) Officer-in-Charge, CG Group, Portsmouth, N.H.

Subj: Transfer request for;

Refs: C1CGD/L dated 10 November, 1950 (MM)

1. It is requested that a transfer from Boon Island Light Station to Moose Peak Light and L/B Station, West Jonesport, Maine be considered.

2. My reason for the subject request is I have been stationed at Boon Island Light for a period of sixteen months. Also to be stationed near my home located in Machias, Maine. Financial conditions existing at this time prevent moving my family near my present station. This transfer at the present time is not a hardship request, this is what I am trying to prevent. Being familiar with this location, Ibelieve my services are more value to the service at this station than my present station.

3. The Officer-in-Charge, Moose Peak station states he is in favor of this transfer.

4. If this transfer can not be considered, I would like to remain at my present station.

Alan B. Watts

Alan B. Watts, BM1(L)(AW)
OinC

CC: CG Group, Gloucester, Mass. ✓
CG Group, Portsmouth, N.H.
CG Group, West Jonesport, Maine

Ind-1
Portsmouth Harbor LB Station 17 October, 1951

From: Officer in Charge, Portsmouth Harbor LB Station
To: Commander, First Coast Guard District (p)

Via: Commanding Officer, CG Group, Gloucester, Mass.

Forwarded approved, providing suitable replacement is furnished.

Cleo B.Faulkingham, BMC(L)

Ind-2 to OinC, Boon Is. Lt. Sta.
dated 16 Oct. 1951
CG Group, Gloucester

20 October, 1951
MM/P16-2

From: Commanding Officer, CG Group, Gloucester
To: Commander, 1st CG District (p)

1. Forwarded approved.

2. Efficiency marks for subject man as follows: PIR-3.8; Cond-4.0. There is no disciplinary action pending.

A. E. HUNTLEY

APPLICATION FOR LEAVE OF ABSENCE
UNITED STATES COAST GUARD
NAVCG 2519 (REV. 5-45)

WARNING: YOU ARE WARNED NOT TO DISCUSS ANY ACTIVITIES OR THE MOVEMENTS OR LOCATIONS OF VESSELS; NOR TO PARTICIPATE IN A PRESS CONFERENCE OR TALK TO REPORTERS OR OVER THE RADIO EXCEPT AFTER CONSULTATION WITH AND CLEARANCE OF SUBJECT MATTER BY A PUBLIC RELATIONS OFFICER OF THE NAVY OR COAST GUARD.

UNIT	ADDRESS	DATE
Boon Island Light Station	New Castle, N.H.	31 July, 1951

FROM (REQUESTER):	TO	VIA:
WATTS, Alan B. (209-630) BM1(L)	Commanding Officer, CG Group, Gloucester, Mass.	Officer in Charge, Portsmouth Harbor LB Station

THE FOLLOWING LEAVE IS REQUESTED:

NO. OF DAYS LEAVE	NO. OF DAYS TRAVEL	TO DEPART	No. OF DAYS LEAVE DURING FISCAL YEAR	No. OF DAYS LEAVE CURRENT ENLISTMENT YEAR	DATE OF EXPIRATION CURRENT ENLISTMENT YEAR
10	0	on or about 14 August, 1951	0	0	4 May, 1952

REASON FOR REQUEST:

Reg Acc. Leave

My address on leave will be: Machias Maine

I will immediately inform my commanding officer of any change in address while on leave.

Alan B. Watts
Alan B. Watts
(Signature of applicant)

INDORSEMENTS

Ind.-1 Unit: Portsmouth Harbor LB Station Date: 31 July, 1951

Leave record indicates balance of 60 days' annual and 0 days' Reenlistment Leave due.

Forwarded [X] APPROVED [ ] NOT APPROVED (because)

Returned [X] GRANTED [ ] NOT GRANTED (because)

Cleo B. Faulkingham
Cleo B. Faulkingham, BMC(L) Officer in Charge

Ind.-2 Unit: CG GROUP, GLOUCESTER Date: 1 August, 1951

Forwarded [ ] APPROVED [ ] NOT APPROVED (because)

Returned [X] GRANTED [ ] NOT GRANTED (because)

A. E. HUNTLEY, CBOSN
COMMANDING OFFICER.

Ind.-3 COAST GUARD HEADQUARTERS, Washington, D. C. Date:

Returned [ ] GRANTED [ ] NOT GRANTED.

COMMANDANT.

Ind.-4 Unit: Portsmouth Harbor LB Station Date: 14 August, 1951

Departed at 0900 this date. This leave of absence will expire before 0900 25 August, 1951, at Portsmouth Harbor LB Station and is subject to the special instructions indicated on reverse hereof.

Cleo B. Faulkingham
Cleo B. Faulkingham, BMC(L) OIC

Ind.-5 Unit: Date:

Granted ..... days extension of leave to expire before noon, ...

Authority:

Signature and rank Title

Ind.-6 Unit: Portsmouth Harbor LB Station Date: 25 August, 1951

Reported at 0805, 25 August, 1951 this date, having taken 10 days' leave and 0 days' TT.

Sylvester E. Andrews
Sylvester E. Andrews, BM1(L)
COMMANDING EXECUTIVE—PERSONNEL OFFICER.
Officer in Charge, Acting.

16—40220-3

[over]

WATTS, Alan B. 209-630 BM1(L) AN

GG Group, Portsmouth, N.H. Boon Island Light Station New Castle, N.H.

01-200430 01-300424 25 August, 1951

0805, 25 August, 1951 Reported at this unit from ten (10) days leave of absence granted by the CO., GG Group, Gloucester, Mass.

Art. 504 P.I.

Sylvester E.Andrews, BM1(L)
Officer in Charge, Acting.

REPORT OF CHANGE IN PERSONNEL

TREASURY DEPARTMENT
United States Coast Guard
CG-2599 (REV. 3-48)

No. _____

SURNAME, FIRST NAME, INITIAL	SERVICE OR SIGNAL NO.	PRESENT RANK OR RATING
WATTS, Alan B.	209-630	BM1(L) AN

MAJOR UNIT NAME	MINOR UNIT NAME	LOCATION
CG Group, Portsmouth, N.H.	Boon Island Light Station	New Castle, N.H.

MAJOR UNIT ITEM NO. OR VESSEL'S ASSIGNED DISTRICT	MINOR UNIT ITEM NO.	DATE
01-200430	01-300424	25 August, 1951

TIME
DATE

REPORTED FROM:
FOR

AUTH:

TIME
DATE

TRANSFERRED TO:
FOR

AUTH:

CHANGED IN {RANK / RATING} FROM _____ TO _____ EFFECTIVE _____

AUTH:

OTHER CHANGES (SPECIFY)

0805, 25 August, 1951 Reported at this unit from ten (10) days leave of absence granted by the CO., CG Group, Glouwester, Mass.

Art. 504 P.I.

EXTRA COMPENSATION

FAMILY ALLOWANCES		MAQ/D	S & Q	FLIGHT PAY	SEA DUTY	ARMS QUAL.	AWARDS MEDALS	
CLASS A NO. DEP.	CLASS B NO. DEP.							

Sylvester E. Andrews
Sylvester E. Andrews, BM1(L)
Officer in Charge, Acting.

SPACE BELOW IS FOR HEADQUARTERS' USE ONLY

ENLISTED PERSONNEL

RATE	DIST.	FOR. DOM.		UNIT		RATE LOSS

RECORDS

EXAMINED	POSTED	CODED

OFFICER PERSONNEL

GRADE	CHAR. APPT.	STATE	DIST.	SEA, SHORE	DUTY		DATE

16—40355-3 U. S. GOVERNMENT PRINTING OFFICE

REPORT OF CHANGE IN PERSONNEL
TREASURY DEPARTMENT
United States Coast Guard
CG-2599 (REV. 3-48)

RE-PR-30

No. _____

SURNAME, FIRST NAME, INITIAL	SERVICE OR SIGNAL NO.	PRESENT RANK OR RATING
WATTS, Alan B.	209-630	BM1(L)AN
MAJOR UNIT NAME	**MINOR UNIT NAME**	**LOCATION**
CG Group, Portsmouth, N.H.	Boon Islend Light Station	New Castle, N.H.
MAJOR UNIT ITEM NO. OR VESSEL'S ASSIGNED DISTRICT	**MINOR UNIT ITEM NO.**	**DATE**
01-200430	01-300424	14 August, 1951

TIME
DATE
REPORTED FROM:
FOR

AUTH:

TIME
DATE
TRANSFERRED TO:
FOR

AUTH:

CHANGED IN {RANK / RATING} FROM _____ TO _____ EFFECTIVE _____

AUTH:

OTHER CHANGES (SPECIFY). 0900, 14 August, 1951 departed on ten (10) days leave of absence granted by the CO., CG Group, Gloucester, Mass.
Art. 504 P. I.

EXTRA COMPENSATION

FAMILY ALLOWANCES		MAQ/D	S & Q	FLIGHT PAY	SEA DUTY	ARMS QUAL.	AWARDS MEDALS	
CLASS A NO. DEP.	CLASS B NO. DEP.							

Cleo B. Faulkingham
Cleo B. Faulkingham, EMC(L)
Officer in Charge

SPACE BELOW IS FOR HEADQUARTERS' USE ONLY

ENLISTED PERSONNEL

RATE	DIST.	FOR. DOM.		UNIT		RATE LOSS

RECORDS

EXAMINED	POSTED	CODED

OFFICER PERSONNEL

GRADE	CHAR. APPT.	STATE	DIST.	SEA, SHORE	DUTY		DATE

16—40355-3 U. S. GOVERNMENT PRINTING OFFICE

WATTS, Alan B. | 209-630 | BM1(L)AN

CG Group, Portsmouth, N.H. | Boon Island Light Station | New Castle, N.H.

01-200430 | 01-300424 | 14 August, 1951

0900, 14 August, 1951 departed on ten (10) days leave of absence granted by the CO., CG Group, Gloucester, Mass.
Art. 504 P. I.

Cleo B. Faulkingham, BMC(L)
Officer in Charge

From compensation of

APPLICATION FOR ALLOTMENT

"Q" Allotment

WATTS, Alan B. (209-630) EM1(L) (AM)

PAYABLE TO

Monthly allotment in the amount

One hundred forty-seven dollars and fifty cents (Words) ($147.50 (Figures)) Dollars.

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

Name

Reason for allotment Support of dependent wife and one (1) child.

Name Louise Watts

Street and No

Post office Machias State Maine

First payment: Month ~~October~~ NOV, 1950

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

Alan B. Watts

Rank or rating EM1(L) (AM) U. S. C. G.

19 October, 1950

Approved, allotment granted.

A. E. HUNTLEY, CDSN

Commanding Group Gloucester

Commander, District.

Witnessed and registered 30 Oct., 1950

W.E. SPARKS, CPCLK, USCG.

Pay officer, ACO 1373

16—12642—1

It will be noted mo. of first pay't has been changed to read Nov. 50 instead of Oct '~~DSD~~ 50 to agree with Form 2528A recD

ACKNOWLEDGMENT

FOR INFORMATION OF PAY OFFICER:

This allotment has been placed in effect.

Allotment Disbursing Officer.

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

DO NOT FOLD — MAIL FLAT

* Allotter or member immediate family

E H G

WATTS, Alan B. 209-630 BM1(L) AM

CG Group, Portsmouth, N.H. Boon Island Light Station New Castle, N.H.

01-200430 01-300425 17 November, 1950

0900, 17 November, 1950 departed on five (5) days leave of absence granted by the Commanding Officer, CG Group, Gloucester, Mass.

Art. 504 P. I.

Cleo B.Faulkingham, BMC(L)
Officer in Charge

Boon Island Light Station
New Castle N.H.

21 October, 1950
File- 601

From: WATTS, Alan B. (209-630) BM1(L)(AN)
To: Commander, 1St. Coast Guard District

Via: Officer-In-Charge, Portsmouth Harbor L/B Station, New Castle N.H.
Commanding Officer, CG Group Gloucester, Mass.

Subj: Transfer, Request for:

1. It is requested that I be transferred from Boon Island Light Station to Moose Peak Light and L/B Station West Jonesport, Maine.
2. My reason for the above request is to be nearer my family and due to financial circumstances at this time. My home which is partly built is located at Machias, Maine and the bills in regards to my home prevent moving my family nearer my present station.
3. If Moose Peak Light and L/B Station can not be considered any Lightor Lifeboat Station would be appreciated that is in that vicinity.
4. My past twelve years has been served at Lifeboat Stations and is believed my services would be more valuable to the service at one of these stations.

Alan B. Watts, BM1(L)(AN)

Ind-1
Portsmouth Harbor LB Station
New Castle, N.H. 21 October, 1950

From: Officer in Charge, CG Group Portsmouth, N.H.
To: Commander, First Coast Guard District

Via: Commanding Officer, CG Group, Gloucester, Mass.

Forwarded Approved, providing replacement is furnished.

Cleo B.Faulkingham, BMC(L)

Ind-1
CG Group Gloucester 24 October, 1950

1. Forwarded approved if replacement is furnished.

A. E. HUNTLEY

UNITED STATES COAST GUARD

DATE 11 October, 1950

UNIT Boon Island Lt. Sta.

LOCATION New Castle, N. H.

From: WATTS, Alan B. (209-630) BM1(L)(AN)
To: THE COMMANDANT (PMM)
Via: 1. Commanding Officer

2. Authorized Certifying Officer,

Subj: Application for payment of basic allowance for quarters

1. I hereby apply for basic allowance for quarters under the Dependents Assistance Act of 1950, on behalf of the relatives hereinafter named, and do certify the following to be true to the best of my knowledge and belief:

NAME AND ADDRESS OF DEPENDENT (include full given name)	RELATIONSHIP	REMARKS - Such as date & place of marriage; divorce, etc; date birth of children, custodianship, (use reverse for additional data)
Louise Watts	Wife	16 Feb. 1940 - Machias, Maine
Wayne Alan Watts	Son	4 Oct. 1950 - Machias, Maine

2. I hereby consent to checkage against my pay for any basic allowance for quarters paid on account of any relative later determined not to be a dependent as defined in existing laws and regulations.

3. I further certify that my dependents Are not (insert "are" or "are not") in occupancy of public quarters (except for brief visits in quarters assigned to another member), and that the above-named dependents are not members of the armed forces on active duty.

4. Following are full names and addresses of each allottee, amount to be allotted to each, and month of first payment:

ALLOTTEES:	Month, 1st payment	Amount
Louise Watts , Machias, Maine	November, 1950	$ 147.50
		$
		$
		$
	TOTAL ALLOTMENTS	$ 147.50

Date on or after 1 August from which Basic Allowance for Quarters Claimed for each dependent 1 November, 1950

Alan B. Watts
(NAME OF MEMBER)

Ind-1
UNIT: CG Groups Gloucester
LOCATION: Gloucester, Mass.

DATE: 19 October, 1950

From: Commanding Officer,
To: THE COMMANDANT (PMM)
Via: Authorized Certifying Officer,

Forwarded.

A. E. HUNTLEY
(Commanding Officer,)

Ind-2
UNIT:

DATE:

LOCATION:

From: Authorized Certifying Officer,
To: THE COMMANDANT (PMM)

Forwarded. "Allotment(s) totalling $_____, registered, effective 1st payment _____."

(Authorized Certifying Officer)

REPORT OF CHANGE IN PERSONNEL

UNITED STATES COAST GUARD

NAVCG-2599 (REV. 6-44)

PE-PR-30

SURNAME, FIRST NAME, INITIAL	SERVICE NO.	PRESENT RANK OR RATING
WATTS, Alan B.	209-630	BM1(L) AN

MAJOR UNIT NAME	MINOR UNIT NAME	LOCATION
CG Group, Portsmouth N.H.	Boon Island Light Station	New Castle, N.H.

UNIT ITEM No. OR VESSEL'S ASSIGNED DISTRICT		DATE
01-200430	01-300425	23 November, 1950

TIME
DATE
REPORTED FROM:
FOR

DUTY CODE NO. AUTH:

TIME
DATE
TRANSFERRED TO:
FOR

AUTH:

CHANGED IN {RANK / RATING} FROM _____ TO _____ EFFECTIVE _____

DUTY CODE NO. AUTH:

OTHER CHANGES (SPECIFY)

0830, 23 November, 1950 returned from five (5) days leave of absence granted by the Commanding Officer, CG Group, Gloucester, Mass.

Art. 504 P. I.

DUTY CODE NO. AUTH:

Cleo B. Faulkingham

Cleo B. Faulkingham, BM1(L)
(Commanding)
Officer In Charge

SPACE BELOW IS FOR HEADQUARTERS' USE ONLY

Enlisted Personnel				
Rate	Pay Grade	District	Foreign Domestic	Duty
II	XIV	XVII	XX	XXI

Officer Personnel			
District	Sea Shore	Foreign Domestic	Duty
XI	XIV	XV	XVIII

Records	
Posting	Coding

Machine Accounting
Punched _____
Verified _____

U. S. GOVERNMENT PRINTING OFFICE 16—40355-1

WATTS, Alan B. 209-630 BM1(L) AH

CG Group, Portsmouth N.H. Boon Island Light Station New Castle, N.H.

01-200430 01-300425 23 November, 1950

0830, 23 November, 1950 returned from five (5) days leave of absence granted by the Commanding Officer, CG Group, Gloucester, Mass.

Art. 504 P. I.

Cleo F. Paul[illegible]ngham, BM1(L)
Officer in Charge

Portsmouth Clf (01)

TRANSCRIPT OF REQUEST FOR STATEMENT OF SERVICE

Name, Service No., Rate WATTS, Alan B. (209-630) BM1(L)(AM)

Requested by Comdr. CG Gr. Southwest Harbor, Me. letter dated 2-28-50

Remarks:

PRIOR SERVICE (Other than Coast Guard)

BRANCH OF SERVICE: ( ) Army ( ) Navy ( ) Marine Corps

( ) National Guard, State of _____

Service No. _____

DATE ENLISTED _____ PLACE OF ENLISTMENT _____

DATE DISCHARGED _____ PLACE OF DISCHARGE _____

INACTIVE DUTY FROM _____ TO _____

DATE OF BIRTH _____ PLACE OF BIRTH _____

REPORT OF CHANGE IN PERSONNEL
UNITED STATES COAST GUARD
NAVCG-2599 (REV. 6-44)

PE-PR-3[illegible]

SURNAME, FIRST NAME, INITIAL	[illegible] NO.	PRESENT RANK OR RATING
WATTS, Alan B.	209-630	BM1(L) AN

MAJOR UNIT NAME	MINOR UNIT NAME	LOCATION
CG Group, Portsmouth, N.H.	Boon Island Light Station	New Castle, N.H.

UNIT ITEM No. OR VESSEL'S ASSIGNED DISTRICT		DATE
01-200430	01-300425	17 November, 1950

TIME
DATE
REPORTED FROM:
FOR

DUTY CODE NO.
AUTH:

TIME
DATE
TRANSFERRED TO:
FOR

AUTH:

CHANGED IN {RANK / RATING} FROM _____ TO _____ EFFECTIVE _____

DUTY CODE NO.
AUTH:

OTHER CHANGES (SPECIFY)
0900, 17 November, 1950 departed on five (5) days leave of absence granted by the Commanding Officer, CG Group, Gloucester, Mass.

Art. 504 P. I.

DUTY CODE NO.
AUTH:

Cleo B. Faulkingham
Cleo B. Faulkingham, BMC(L)
Officer in Charge

SPACE BELOW IS FOR HEADQUARTERS' USE ONLY

Enlisted Personnel				
Rate	Pay Grade	District	Foreign Domestic	Duty
II	XIV	XVII	XX	XXI

Officer Personnel			
District	Sea Shore	Foreign Domestic	Duty
XI	XIV	XV	XVIII

Records	
Posting	Coding

Machine Accounting
Punched _____
Verified _____

U. S. GOVERNMENT PRINTING OFFICE 16—40355-1

APPLICATION FOR LEAVE OF ABSENCE
UNITED STATES COAST GUARD
NAVCG 2519 (REV. 5-45)

WARNING: YOU ARE WARNED NOT TO DISCUSS ANY ACTIVITIES OR THE MOVEMENTS OR LOCATIONS OF VESSELS; NOR TO PARTICIPATE IN A PRESS CONFERENCE OR TALK TO REPORTERS OR OVER THE RADIO EXCEPT AFTER CONSULTATION WITH AND CLEARANCE OF SUBJECT MATTER BY A PUBLIC RELATIONS OFFICER OF THE NAVY OR COAST GUARD.

UNIT	ADDRESS	DATE
Boon Island Light Station	New Castle, N.H.	24 October, 1950

FROM (REQUESTER):	TO	VIA:
WATTS, Alan B. (209-630) BM1(L) AN	Commanding Officer, CG Group Gloucester, Mass.	Officer in Charge, CG Group, Portsmouth, N.H.

THE FOLLOWING LEAVE IS REQUESTED:

NO. OF DAYS LEAVE	NO. OF DAYS TRAVEL	TO DEPART	No. OF DAYS LEAVE DURING FISCAL YEAR	No. OF DAYS LEAVE CURRENT ENLISTMENT YEAR	DATE OF EXPIRATION CURRENT ENLISTMENT YEAR
5	0	on or about 15 November, 1950	0	0	4 May, 1951

REASON FOR REQUEST:

Reg. Acc. Leave

My address on leave will be: Machias, Maine

I will immediately inform my commanding officer of any change in address while on leave.

Alan B. Watts
Alan B. Watts
(Signature of applicant)

INDORSEMENTS

CG Group, Portsmouth, N.H.

Ind.-1 Unit: Portsmouth Harbor LB Station Date:

Leave record indicates balance of 35 days' annual and -- days' Reenlistment Leave due.

Forwarded ☒ APPROVED ☐ NOT APPROVED (because)

Returned ☐ GRANTED ☐ NOT GRANTED (because)

Cleo B. Faulkingham
Cleo B.Faulkingham, BMC(L) OIC
COMMANDING—EXECUTIVE—PERSONNEL OFFICER.

Ind.-2 Unit: CG GROUP GLOUCESTER Date: 31 October, 1950

Forwarded ☐ APPROVED ☐ NOT APPROVED (because)

Returned ☒ GRANTED ☐ NOT GRANTED (because)

A. E. HUNTLEY, CBOSN
COMMANDING OFFICER.

Ind.-3 COAST GUARD HEADQUARTERS, Washington, D. C. Date:

Returned ☐ GRANTED ☐ NOT GRANTED.

COMMANDANT.

Ind.-4 Unit: Portsmouth Harbor LB Station Date: 17 November, 1950

Departed at 0900 this date. This leave of absence will expire before 0900 23 November, 1950, at Portsmouth Hbr. LB Station and is subject to the special instructions indicated on reverse hereof.

Cleo B. Faulkingham
Cleo B.Faulkingham, BMC(L) Officer in Charge
COMMANDING—EXECUTIVE—PERSONNEL OFFICER.

Ind.-5 Unit: Date:

Granted ..... days extension of leave to expire before noon, ...

Authority:

Signature and rank Title

CG Group, Portsmouth, N.H.

Ind.-6 Unit: Portsmouth Harbor LB Station Date: 23 November, 1950

Reported at 0830 this date, having taken 5 days' leave and 0 days' TT.

Cleo B. Faulkingham
Cleo B.Faulkingham, BMC(L) OIC
COMMANDING—EXECUTIVE—PERSONNEL OFFICER.

16—40220-3

[OVER]

WATTS, Alan B. 209-630 BM1(L) an

CG Group, Portsmouth, N.H. Boon Island Light Station New Castle, N.H.

6 June, 1950

1330
6 June, 1950 Portsmouth Harbor LB Station
assignment to duty.

CLCGD/L 29 May, 1950 (pmp-73-531).

Cleo P.Faulkingham, BMC(L)
Officer in Charge CG Group Portsmouth
N.H.

REPORT OF CHANGE IN PERSONNEL

TREASURY DEPARTMENT
United States Coast Guard
CG-2599 (REV. 3-48)

No. _____

SURNAME, FIRST NAME, INITIAL	SERVICE OR SIGNAL NO.	PRESENT RANK OR RATING
WATTS, Alan B.	209-630	BM1(L) an

MAJOR UNIT NAME	MINOR UNIT NAME	LOCATION
CG Group, Portsmouth, N.H.	Boon Island Light Station	New Castle, N.H.
MAJOR UNIT ITEM NO. OR VESSEL'S ASSIGNED DISTRICT	**MINOR UNIT ITEM NO.**	**DATE**
		6 June, 1950

TIME 1330
DATE 6 June, 1950

REPORTED FROM: Portsmouth Harbor LB Station
FOR assignment to duty.

AUTH: C1CGD/L 29 May, 1950 (pmp-73-531).

TIME
DATE

TRANSFERRED TO:
FOR

AUTH:

CHANGED IN {RANK / RATING} FROM _____ TO _____ EFFECTIVE _____

AUTH:

OTHER CHANGES (SPECIFY)

EXTRA COMPENSATION

FAMILY ALLOWANCES		MAQ/D	S & Q	FLIGHT PAY	SEA DUTY	ARMS QUAL.	AWARDS MEDALS	
CLASS A NO. DEP.	CLASS B NO. DEP.							

Cleo B. Faulkingham
Cleo B. Faulkingham, BMC(L)
Officer in Charge (Commanding) CG Group Portsmouth N.H.

SPACE BELOW IS FOR HEADQUARTERS' USE ONLY

ENLISTED PERSONNEL

RATE	DIST.	FOR. DOM.		UNIT		RATE LOSS

RECORDS

EXAMINED	POSTED	CODED
	PE-PR-25	

OFFICER PERSONNEL

GRADE	CHAR. APPT.	STATE	DIST.	SEA, SHORE	DUTY		DATE

16—40355-3 U. S. GOVERNMENT PRINTING OFFICE

WATTS, Alan B. 209-630 EM 1 (L) AN

CG Group, Portsmouth, N.H. Portsmouth Harbor LH Station New Castle, N.H.

6 June, 1950

1220 Boon Island Light Station
6 June, 1950 Assignment to duty

CICGD/L 29 May, 1950 (pmp-73-531)

Cleo E. Faulkingham, Officer in Charge BMC(L)

REPORT OF CHANGE IN PERSONNEL

TREASURY DEPARTMENT
United States Coast Guard
CG-2599 (REV. 3-48)

No. _____

SURNAME, FIRST NAME, INITIAL	SERVICE OR SIGNAL NO.	PRESENT RANK OR RATING
WATTS, Alan B.	209-630	BM 1 (L) AN

MAJOR UNIT NAME	MINOR UNIT NAME	LOCATION
CG Group, Portsmouth, N.H.	Portsmouth Harbor LB Station	New Castle, N.H.
MAJOR UNIT ITEM NO. OR VESSEL'S ASSIGNED DISTRICT	**MINOR UNIT ITEM NO.**	**DATE** 6 June, 1950

TIME
DATE

REPORTED FROM:
FOR

PE-PR-27

AUTH:

TIME 1220
DATE 6 June, 1950

TRANSFERRED TO: Boon Island Light Station
FOR Assignment to duty

AUTH: C1CGD/L 29 May, 1950 (pmp-73-531)

CHANGED IN {RANK / RATING} FROM _____ TO _____ EFFECTIVE _____

AUTH:

OTHER CHANGES (SPECIFY)

EXTRA COMPENSATION

FAMILY ALLOWANCES		MAQ/D	S & Q	FLIGHT PAY	SEA DUTY	ARMS QUAL.	AWARDS MEDALS	
CLASS A NO. DEP.	CLASS B NO. DEP.							

Cleo B. Faulkingham, SMC(L)
Officer in Charge
(Commanding.)

SPACE BELOW IS FOR HEADQUARTERS' USE ONLY

ENLISTED PERSONNEL

RATE	DIST.	FOR. DOM.		UNIT		RATE LOSS

RECORDS

EXAMINED	POSTED	CODED

OFFICER PERSONNEL

GRADE	CHAR. APPT.	STATE	DIST.	SEA, SHORE	DUTY		DATE

16—40355-3 U. S. GOVERNMENT PRINTING OFFICE

Commander, 1st CG District
Boston, Mass.

22 May, 1950
File 123-463-700

From: Commander, 1st Coast Guard District
To: WATTS, Alan B. (209-630) BM1 (L) - Portsmouth Harbor LBS
Via: Commanding Officer, CG Group, Gloucester

Subj: Negligence; U.S. Government Property; safeguarding of

1. The District Commander has reviewed the Administrative Report inquiring into the loss of a pistol, caliber .22, Ace, serial # 4563, which was discovered missing on 20 April, 1950, from Moose Peak Lifeboat Station.

2. The District Commander notes you were relieved as Officer-in-Charge of Moose Peak Lifeboat Station, on 29 December, 1949, and that an inventory of small arms was not effected upon being relieved as required by Article 1218, Pay and Supply Instructions. The report further indicates that a daily check of small arms was not accomplished and an appropriate entry recorded in the station log as required by Section F, Ordnance, Readiness and Gunnery Circular No. 13-46, dated 7 October, 1946.

3. It is the District Commander's opinion that you were negligent in failing to comply with the existing regulations, instructions and directives. Had the required inventory been taken, the loss of the pistol would have been discovered earlier and possibly the theft prevented.

4. You are hereby advised to be more diligent in the future in the performance of your duties.

5. The Group Commander shall take this letter into consideration when assigning the next quarterly marks for WATTS.

6. A copy of this letter will be made part of your official record.

L.B. OLSON

CC: CHIEF, PERSONNEL DIV.

Southwest Harbor, Maine

Commander
Coast Guard Group

Order No. 014003
8 May, 1950
File: pmp-73-531

From: Commander, CG GROUP, Southwest Harbor, Maine
To: WATTS, Alan B. (209-630) BM1(AN) - Moose Peak Lifeboat Station

Subj: Orders; transfer; travel

Ref: (a) CCGD1 Ltr of 12 April, 1950, file pmp-73-531

1. Upon receipt hereof and in accordance with the instructions contained in reference (a), you are detached from all duties previously assigned and directed to proceed and report to the Officer-in-Charge, Portsmouth Harbor Lifeboat Station, New Castle, New Hampshire, for assignment to duty.

2. This order constitutes a permanent change of station from West Jonesport, Maine to New Castle, New Hampshire. Before any travel of dependents is performed under this permanent change of station order, a request for obligation of funds will be submitted on Form CG-9824 in accordance with Art. 462, P&SI. Before any shipment of household effects is made, a request for obligation of funds will be submitted on Form CG-2658 in accordance with Art. 475, P&SI.

3. Travel necessary to the execution of this order is required by the public interests and is authorized, chargeable against District travel allotment symbol 01-20.

4. Travel may be performed at own expense subject to reimbursement at the rate of three cents per mile via the shortest usually traveled route in accordance with Article 438, P&SI.

5. Your personnel records will be forwarded to the Commander, CG GROUP, Gloucester, Mass.

6. The accountable unit upon your detachment from this office will be Commander, CG GROUP, Gloucester, Mass.

7. Proceed time is authorized, plus one (1) day travel time, to report prior 2400, 13 May, 1950.

8. Delivered and detached at 1005, this date.

E. B. DRINKWATER

CC: CO CG GROUP, Gloucester, Mass.
COMDR., 1CGD (pmp)
OIC, Portsmouth Harbor Lifeboat Sta.
File

Rptd 13 May 1950

Commander, 1st CG District
Boston, Mass.

22 May, 1950
file 123-463-700

From: Commander, 1st Coast Guard District
To: WATTS, Alan B. (209-630) BM1 (L) - Portsmouth Harbor LBS
Via: Commanding Officer, CG Group, Gloucester

Subj: Negligence; U.S. Government Property; safeguarding of

1. The District Commander has reviewed the Administrative Report inquiring into the loss of a pistol, caliber .22, Ace, serial # 4563, which was discovered missing on 20 April, 1950, from Moose Peak Lifeboat Station.

2. The District Commander notes you were relieved as Officer-in-Charge of Moose Peak Lifeboat Station, on 29 December, 1949, and that an inventory of small arms was not effected upon being relieved as required by Article 1218, Pay and Supply Instructions. The report further indicates that a daily check of small arms was not accomplished and an appropriate entry recorded in the station log as required by Section F, Ordnance, Readiness and Gunnery Circular No. 13-46, dated 7 October, 1946.

3. It is the District Commander's opinion that you were negligent in failing to comply with the existing regulations, instructions and directives. Had the required inventory been taken, the loss of the pistol would have been discovered earlier and possibly the theft prevented.

4. You are hereby advised to be more diligent in the future in the performance of your duties.

5. The Group Commander shall take this letter into consideration when assigning the next quarterly marks for WATTS.

6. A copy of this letter will be made part of your official record.

L.B. OLSON

CC: CHIEF, PERSONNEL DIV.

REPORT OF CHANGE IN PERSONNEL

TREASURY DEPARTMENT
United States Coast Guard
CG-2599 (REV. 3-48)

No. _____

SURNAME, FIRST NAME, INITIAL	SERVICE OR SIGNAL NO.	PRESENT RANK OR RATING
WATTS, Alan B.	(209-630)	BM1 (L)(AN)

MAJOR UNIT NAME	MINOR UNIT NAME	LOCATION
CG Group, Portsmouth N.H.	Portsmouth Har. L/B Station	New Castle, N.H.
MAJOR UNIT ITEM NO. OR VESSEL'S ASSIGNED DISTRICT	**MINOR UNIT ITEM NO.**	**DATE**
		13 May 1950

TIME 1130
DATE 13 May 1950

REPORTED FROM: CG Group Southwest Harbor, Maine
FOR ASDU

AUTH: CCGD1 Ltr of 12 April, 1950, pmp-73-531

TIME
DATE

TRANSFERRED TO: Moose Peak Grp
FOR 1-29-49

AUTH:

CHANGED IN {RANK / RATING} FROM _____ TO _____ EFFECTIVE _____

AUTH:

OTHER CHANGES (SPECIFY)

EXTRA COMPENSATION

FAMILY ALLOWANCES		MAQ/D	S & Q	FLIGHT PAY	SEA DUTY	ARMS QUAL.	AWARDS MEDALS	
CLASS A NO. DEP.	CLASS B NO. DEP.							

Jordan Orr BMC L
Jordan Orr BMC (L) OinC
(Commanding.)

SPACE BELOW IS FOR HEADQUARTERS' USE ONLY

ENLISTED PERSONNEL

RATE	DIST.	FOR. DOM.		UNIT		RATE LOSS

RECORDS

EXAMINED	POSTED	CODED

FILED

OFFICER PERSONNEL

GRADE	CHAR. APPT.	STATE	DIST.	SEA, SHORE	DUTY		DATE

16—40355-3 U. S. GOVERNMENT PRINTING OFFICE

FAMILY ALLOWANCES AUTHORIZATION

TO PAY OR DISCONTINUE
NAV. B. and A. Form 546

☐ START ☒ STOP ☐ SUPERSEDING ☐ NO. 844469

F.C.C. NEW	DATE RECEIVED	BLOCK NO.	SUPERSEDES NO.	DISCONTINUES NO.	(Number ↑)
F.C.C. PREVIOUS		SERVICE NO. 209-630	SERVICEMAN'S NAME (Last, first, middle) WATTS, Alan B.	RATE BM1	PREVIOUS SERV. NO.

DEBIT AMOUNT	CREDIT AMOUNT	ACTION CODE	PAYEE	BEGINNING OR STOP AFTER DATE	NAME AND ADDRESS OF PAYEE	RELATIONSHIP	BIRTH DATE / REASON DISCONTINUED	CHECKAGE / DATE LAST PAYMENT	CLASS	CODE	PT	P#	MOS. RET. / OVP.	TOTAL AMOUNT RETROACTIVE
	x x x	88	P	11-43	Louise Watts Tenants Harbor, Maine.	Wife			A					
x x x				12-49										x x x
	x x x				Alan W. Watts	Son	10-40		A					
x x x														x x x
	x x x													
x x x														x x x
	x x x													
x x x														x x x
	x x x													
x x x														x x x
	x x x													
x x x														x x x
		TOTALS ←	DATE OF APPLICATION		DATE REPORTING FOR ACTIVE DUTY		DATE INITIAL PAYMENT AUTHORIZED						TOTAL RETROACTIVE AMOUNT	

DISCONTINUANCE

REMARKS

FA Amount $80. Lump sum checkage FA 10-49 thru 12-49 $240.

Entitlement ceased 9-49.

ITEM SUSPENDED

CHECKAGE (LL)

LAST MONTH CHECKAGE

COMPUTED BY

EDITED BY

REVIEWED BY

Chief, FA Section
BY AUTHORITY OF THE SECRETARY OF THE NAVY

NAVPERS 1 3 January 1950

BUPERS COPY

NAVY DEPARTMENT

AUTHORIZATION FOR FAMILY ALLOWANCES

AUTH. NUMBER 975,338

☐ SUPERSEDING

☐ SUPPLEMENTAL

☐

SUPERSEDES AUTH. NO. _____

SERVICE NO. ON PREVIOUS AUTH. _____

WATTS, Alan B. — SERVICEMAN'S NAME - LAST, FIRST AND MIDDLE

(209-630) — SERVICE NUMBER

B.M.1c. — RATING

CLASS	PAYEE	PAYEE NO.	NAME AND ADDRESS	RELATIONSHIP	DATE OF BIRTH MO.	DATE OF BIRTH YR.
A	P	1	Louise Watts, Tenants Harbor, Maine.	Wife		
A		1	Alan W. Watts, Same.	Son	10	40

BUREAU OF PERSONNEL COPY

COMPUTED BY _____ REVIEWED BY _____

CHECKAGE (LEGAL LIMITATION) _____ TOTAL AMOUNTS OF CHECKS _____

REMARKS: (EXPLAIN LEGAL LIMITATION, EXCEPTIONS TO AGE LIMITATIONS, ETC.)

None

DATE OF APPLICATION	
DATE REPORTING FOR ACTIVE DUTY	
MONTH OF FIRST REGULAR PAYMENT CLASS A	Nov., 1943
MONTH OF FIRST REGULAR PAYMENT CLASS B OR B-1	
INITIAL PAYMENT AUTHORIZED FOR MONTH OF	None
BLOCK NUMBER	

DATE 27 December, 1943

THE DEPENDENT(S) NAMED ABOVE ARE HEREBY CERTIFIED TO THE PAYMASTER GENERAL OF THE NAVY AS ENTITLED TO PAYMENT OF THE MONTHLY FAMILY ALLOWANCES AUTHORIZED BY PUBLIC LAW 625 (77TH CONGRESS - 2ND SESSION), AS AMENDED.

BY AUTHORITY OF THE SECRETARY OF THE NAVY.

Chief, Military Morale Section

☑ COMMANDANT, U. S. COAST GUARD (ENLISTED MEN, MARINE CORPS)
☐ COMMANDANT, MARINE CORPS (ENLISTED MEN, MARINE CORPS)

I. I, WATTS (Last name) Alan (First name) Brennen (Middle name) B.M.1c (Rate or rank)

U. S. COAST GUARD STA., PORT CLYDE, ME. (209-630)
(Organization) (Service or serial number)

do hereby apply for the family allowance authorized by Servicemen's Dependents Allowance Act of 1942, for the following-named relatives and/or dependents who are related to me in the manner stated below and those named under Class B are each dependent upon me for a substantial portion of their support. I understand that a monthly deduction will be made from my pay in the amount as required by law ($22 for Class A *or* B dependents or $27 for Class A *and* B dependents).

II. CLASS A

List: Wife, children (including legally adopted child, stepchild, acknowledged illegitimate child), former wife divorced (to whom alimony is still payable). If you have no dependents in Class A, write "None."

1. WATTS (Last name) Louise (First name) (Middle name) (Wife) (Relationship) (Date of birth if minor)
(Number and street or R. F. D.) Tenants Harbor (City or post office) Maine. (State)

2. WATTS (Last name) Alan (First name) Wayne (Middle name) (Son) (Relationship) 4 October, 1940 (Date of birth if minor)
Same as above. (Number and street or R. F. D.) (City or post office) (State)

3. (Last name) (First name) (Middle name) (Relationship) (Date of birth if minor)
(Number and street or R. F. D.) (City or post office) (State)

4. (Last name) (First name) (Middle name) (Relationship) (Date of birth if minor)
(Number and street or R. F. D.) (City or post office) (State)

(State name and address of the adult person to whom check is to be sent for each minor or incompetent dependent named above)

Louise Watts (Name) Tenants Harbor (Number and street or R. F. D.) (City or post office) Maine. (State)

(Name) (Number and street or R. F. D.) (City or post office) (State)

(Name) (Number and street or R. F. D.) (City or post office) (State)

Date and place of marriage to present wife 16 February, 1940 at Machias, Me.

Date and place of marriage to divorced wife

Amount of monthly alimony or support payment decreed by court order or legal agreement for former wife divorced, or wife and/or child living separate and apart, $

Date alimony or support payment ceases

Name and location of court

Name and designate any child included above who is legally adopted or has been acknowledged as illegitimate

16—20368-1

brother, adopted sister, grandchildren).

Give following information as to each Class B dependent claimed:

1. _____
(Full name) (Relationship) (Date of birth if minor)

_____
(Number and street or R. F. D.) (City or post office) (State)

*Estimated monthly income this dependent, $*_____ *My total contribution last year, $*_____

2. _____
(Full name) (Relationship) (Date of birth if minor)

_____
(Number and street or R. F. D.) (City or post office) (State)

*Estimated monthly income this dependent, $*_____ *My total contribution last year, $*_____

3. _____
(Full name) (Relationship) (Date of birth if minor)

_____
(Number and street or R. F. D.) (City or post office) (State)

*Estimated monthly income this dependent, $*_____ *My total contribution last year, $*_____

U.S.C.G. DISBURSING OFFICE PAY OFFICE RECEIVED NOV 18 '43

4. _____
(Full name) (Relationship) (Date of birth if minor)

_____
(Number and street or R. F. D.) (City or post office) (State)

*Estimated monthly income this dependent, $*_____ *My total contribution last year, $*_____

5. _____
(Full name) (Relationship) (Date of birth if minor)

_____
(Number and street or R. F. D.) (City or post office) (State)

*Estimated monthly income this dependent, $*_____ *My total contribution last year, $*_____

(State name and address of the adult person to whom check is to be sent for each minor or incompetent dependent named above)

_____
(Full name) (Number and street or R. F. D.) (City or post office) (State)

_____
(Full name) (Number and street or R. F. D.) (City or post office) (State)

_____
(Full name) (Number and street or R. F. D.) (City or post office) (State)

State any other facts pertinent to this claim or in explanation thereof:

_____

_____

Alan B. Watts
Alan B. Watts
(Signature)

Subscribed and sworn to before me, this 12th day of November 19 43

(Oath may be executed by any commissioned officer, notary public, or person legally authorized to administer oaths.)

J. R. Holmes
J. R. Holmes, Ensign (T)
(Signature)

Commanding Officer.
(Title)

16—29368-1

Date: 3 January 1950

MONTHLY FAMILY ALLOWANCE

To: Audit Subsection - Room 6110
From: Military Morale Division

WATTS, Alan B. (209-630)	BM1	1st CGD.
Name	Rating	Unit
Class A	$22.00	Began: Nov. 1943 Ter. Sept. 1949
Disbursing Officer	Monthly Checkage	Month of First Entitlement

88 Lump sum checkage FA 10-49 thru 12-49 $240.

S. K. FRICK
Chief, FA Section

1920 rwl

Government Contributions $ 58.00
FA-A and/or B A
Month of first payment November, 1943
FA amount $ 80.00
Name of payee
Louise Watts

W. E. SPARKS, CPCLK, USCG
Comdr. 1st CG District (fp)
Station of Auth. Cert. Officer

Lump sum checkage FA $ 240.00 10, 11, 12
Entitlement ceased - 30 September, 1949

CG HEADQUARTERS

Washington 25, D. C.

3 January 1950
(Date)

Receipt of the above notification is hereby acknowledged. Family allowance payments will be terminated after payment for the month of December 1949.
Gov. Cont. $58.

Enter lump sum checkage $80.00 for December, 1949, also. Ref: AIDIST #97.

Chief, Military Morale Div.

rwl

Notification of Change in Status for Family Allowance Purposes

WATTS, ALAN B. (Name) 209-630 (Service No.) BM1 (Rating)

To: Chief, Military Morale Division, CG Headquarters, Washington 25, D.C.

You are hereby notified of change in status as indicated below in the case of the person named above.

(x) *Checkage is being discontinued as provided in regulations after checkage for the month of September, 1949.

( ) *Checkage is being continued as required by regulations pending notification to stop.

1 October, 1949
DATE OF CHANGE IN STATUS

88 - Career Compensation Act, 1949
NATURE OF CHANGE IN STATUS

*Mark applicable status of checkage with "X" inserting month of last checkage if discontinued.

Government Contributions $ 58.00
A
FA-A and/or B
Month of first payment November, 1943
FA amount $ 80.00
Name of payee
Louise Watts

W. E. SPARKS, CPCLK, USCG
Comdr. 1st CG District (fp)
Station of Auth. Cert. Officer

Lump sum checkage FA $ 240.00 10, 11, 12
Entitlement ceased - 30 September, 1949

CG HEADQUARTERS

Washington 25, D. C.

3 January 1950
(Date)

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Gov. Cont. $58.

~~Enter lump sum checkage $80.00 for December, 1949, also. Ref: AIDIST #97.~~

Chief, Military Morale Div.

rwl

REPORT OF CHANGE IN PERSONNEL

UNITED STATES COAST GUARD

NAVCG-2599 (REV. 6-44)

SURNAME, FIRST NAME, INITIAL	SERVICE No.	PRESENT RANK OR RATING
WATTS., Alan B.	209-630	EM1, (L)

MAJOR UNIT NAME	MINOR UNIT NAME	LOCATION
GROUP, Moose Peak, Maine	Moose Peak L/B Station	West Jonesport, Maine

UNIT ITEM No. OR VESSEL'S ASSIGNED DISTRICT: 01-023

DATE: 8, May, 1950

TIME
DATE

REPORTED FROM:
FOR

PE-PR-27

DUTY CODE NO. AUTH:

TIME 0800
DATE 5/8/50

TRANSFERRED TO: SWHBR, DEPOT, Southwest Harbor, Maine, for further transfer to Portsmouth Harbor, Station, Portsmouth, N.H. For assignment to duty.
FOR

AUTH: Verbal Orders; C/O SWHBR, GROUP.

CHANGED IN {RANK / RATING} FROM _____ TO _____ EFFECTIVE _____

DUTY CODE NO. AUTH:

OTHER CHANGES (SPECIFY)

DUTY CODE NO. AUTH:

Payson K. Tucker

PAYSON K. TUCKER, BMC, (L) USCG.
(Commanding)

SPACE BELOW IS FOR HEADQUARTERS' USE ONLY

Enlisted Personnel				
Rate	Pay Grade	District	Foreign Domestic	Duty
II	XIV	XVII	XX	XXI

Officer Personnel			
District	Sea Shore	Foreign Domestic	Duty
XI	XIV	XV	XVIII

Records	
Posting	Coding

Machine Accounting
Punched _____
Verified _____

U. S. GOVERNMENT PRINTING OFFICE 16—40355-1

NAV. S. and A. Form 510
Form prescribed by Comptroller General, U. S.
November 3, 1943

3-13 file E&L

Commanding Officer's

PAY RECORD ORDER

CG GROUP PORTSMOUTH

Boon Island Light Station (01-300/25)
(Name and type and number of activity (or unit))

C. O. Order No. 15-51

To DISBURSING OFFICER:

You are hereby authorized and directed to open, adjust or close, as indicated, the pay records of the individuals listed below:

FILE OR SERVICE No.	SURNAME	FIRST NAME	INITIAL	REASON FOR CHANGE *	(YEAR) From—	(YEAR) To—
209-630	WATTS,	Alan	B.			

Completed a period of twelve (12) years net service and will be credited with an increase of pay on the followinf statement of service:

Orig. ENL USCG	2-15-38
AWOL; AOL; NPDI; MISC	None
Discharged (HD)	5-4-44
REENL USCG	5-5-44
AOL; AWOL; NPDI; MISC	None
Discharged (HD)	5-4-48
REENL USCG	5-5-48
AOL; AWOL; NPDI; MISC	None
Completed twelve (12) years net service	2-14-50
Now serving	

Career Compensation Act of 1949
PC 25-50

INCL:
Statement of Creditable Service

(D. O. Symbol number)

A. E. HURTLEY, CROSH
(Name and signature)

Commanding OFFICER (See Art. 2025 (2) N. R.)

*Enter descriptive data of reason for commencement or stoppage of credit in the individual's pay record, date of qualification and monthly or daily rate of credit whenever necessary, i. e., "Subs. @ $1.80 per day, Qtrs. @ $1.25 per day, GRFO—Pract 7/2/43, MstrDvr Qual 3/2/39, Messman, Com. Rats."

16—40145-1

REPORT OF CHANGE IN PERSONNEL

UNITED STATES COAST GUARD

NAVCG-2599 (REV. 6-44)

1-10

SURNAME, FIRST NAME, INITIAL	SERVICE No.	PRESENT RANK OR RATING
WATTS, Alan B.	209-630	BM1(L)(AN)

MAJOR UNIT NAME	MINOR UNIT NAME	LOCATION
CG GROUP, Moose Peak, Me.	Moose Peak L/B Station	West Jonesport, Maine

UNIT ITEM No. OR VESSEL'S ASSIGNED DISTRICT: 01-023

DATE: 29 January, 1949

TIME 1730
DATE 1/29/49

REPORTED FROM: Office Comdr. 1CGD via CG GROUP, South West Harbor, Me.
FOR assignment to duty

DUTY CODE NO. 29-D

AUTH: Comdr 1CGD/L 28 January, 1949 (pmp-73-531) Auth No. 011879

TIME
DATE

TRANSFERRED TO:
FOR

AUTH:

CHANGED IN {RANK / RATING} FROM _____ TO _____ EFFECTIVE _____

DUTY CODE NO. AUTH:

OTHER CHANGES (SPECIFY)

DUTY CODE NO. AUTH:

Donald C. Coffin, BM1(L)
By direction (Commanding)

SPACE BELOW IS FOR HEADQUARTERS' USE ONLY

Enlisted Personnel				
Rate	Pay Grade	District	Foreign Domestic	Duty
102		01	2	
II	XIV	XVII	XX	XXI

Officer Personnel			
District	Sea Shore	Foreign Domestic	Duty
23	0	02	3
XI	XIV	XV	XVIII

Records	
Posting: PEA-E 44	Coding: CODED NO. 19

Machine Accounting
Punched _____
Verified _____

U. S. GOVERNMENT PRINTING OFFICE 16—40355-1

REPORT OF CHANGE IN PERSONNEL

UNITED STATES COAST GUARD

NAVCG-2599 (REV. 6-44)

1-309

SURNAME, FIRST NAME, INITIAL	SERVICE NO.	PRESENT RANK OR RATING
WATTS, Alan B.	209-630	BM1 (L) (AN)

MAJOR UNIT NAME	MINOR UNIT NAME	LOCATION
C1CGD	Administrative	Boston, Mass.

UNIT ITEM NO. OR VESSEL'S ASSIGNED DISTRICT	DATE
01-001	1-28-49

TIME 0837
DATE 1-28-49

REPORTED FROM: CGTS Groton, Conn.
FOR resdu Gr 10 das lv(5 Acc Reg & 5 Adv Reg) 1 da tt enr.

DUTY CODE NO. 18-D AUTH: CGTS/L 1-17-49

TIME 1040
DATE 1-28-49

TRANSFERRED TO: CG Group Southwest Harbor,
FOR fur asdu to CG Group Moose Peak, Maine.

AUTH: C1CGD/L 1-28-49

CHANGED IN {RANK / RATING} FROM _____ TO _____ EFFECTIVE _____

DUTY CODE NO. AUTH:

OTHER CHANGES (SPECIFY)

File.

DUTY CODE NO. AUTH: R. A. TAYLOR, LCDR (Commanding)
By direction

SPACE BELOW IS FOR HEADQUARTERS' USE ONLY

Enlisted Personnel				
Rate	Pay Grade	District	Foreign Domestic	Duty
II	XIV	XVII	XX	XXI

Officer Personnel			
District	Sea Shore	Foreign Domestic	Duty
XI	XIV	XV	XVIII

Records	
Posting	Coding
PEA-E 44	NOTED

Machine Accounting
Punched _____
Verified _____

U. S. GOVERNMENT PRINTING OFFICE 16—40355-1

REPORT OF CHANGE IN PERSONNEL

UNITED STATES COAST GUARD

NAVCG-2599 (REV. 6-45)

No. 284

SURNAME, FIRST NAME, INITIAL	SERVICE No.	PRESENT RANK OR RATING
WATTS, Alan B.	209-630	BM1(L)
MAJOR UNIT NAME	**MINOR UNIT NAME**	**LOCATION**
CG TRAINING STATION	AIDS TO NAVIGATION SCHOOL	GROTON, CT.
MAJOR UNIT ITEM No. OR VESSEL'S ASSIGNED DISTRICT	**MINOR UNIT ITEM No.**	**DATE**
03-083	- - - -	17 August, 1948

TIME 0945
DATE 17 August, 1948

REPORTED FROM: CO, CG GROUP, Moose Peak, Me.
FOR training. Used 1 tt.

DUTY CODE NO. D AUTH: ComlstCGD/D 021529Z (Aug. 48) Auth.No. 516094

TIME
DATE

TRANSFERRED TO:
FOR

AUTH:

CHANGED IN {RANK / RATING} FROM _____ TO _____ EFFECTIVE _____

DUTY CODE NO. AUTH:

OTHER CHANGES (SPECIFY)

PEA-E
62

DUTY CODE NO. AUTH:

A. S. ALEXANDER, SCLK, USCG BY DIRECTION
(Commanding)
B

SPACE BELOW IS FOR HEADQUARTERS' USE ONLY

Enlisted Personnel				
Rate	Pay Grade	District	Foreign Domestic	Duty

Officer Personnel			
District	Sea Shore	Foreign Domestic	Duty

Records	
Posting	Coding

Machine Accounting

REPORT OF CHANGE IN PERSONNEL

UNITED STATES COAST GUARD

NAVCG-2599 (REV. 6-45)

No. 271

SURNAME, FIRST NAME, INITIAL	SERVICE No.	PRESENT RANK OR RATING
WATTS, Alan B.	209-630	BM1(L)(AN)
MAJOR UNIT NAME	**MINOR UNIT NAME**	**LOCATION**
CG TRAINING STATION	A-N SCHOOL	GROTON, CONN.
MAJOR UNIT ITEM No. OR VESSEL'S ASSIGNED DISTRICT	**MINOR UNIT ITEM No.**	**DATE**
50-011		17 January, 1949

TIME
DATE

REPORTED FROM:
FOR

DUTY CODE NO.

AUTH:

TIME 1300
DATE 1-17-49

TRANSFERRED TO: Commander, 1st CG District
FOR Assignment to duty.
Granted 10 lv. 0 pt. 1 tt, enroute

AUTH: C1CGD/D 021529Z (August, 1948) Auth No. 516094

CHANGED IN {RANK / RATING} FROM BM1(L) TO BM1(L)(AN) EFFECTIVE 17 January, 1949

DUTY CODE NO. D AUTH: PC76-44

OTHER CHANGES (SPECIFY)

17 January, 1949: Satisfactorily completed a course of instruction in Aids to Navigation School Training.

DUTY CODE NO.

AUTH:

A. S. ALEXANDER, SCLK, USCG, BY DIRECTION
(Commanding) dal

SPACE BELOW IS FOR HEADQUARTERS' USE ONLY

ENLISTED PERSONNEL				
Rate	Pay Grade	District	Foreign * Domestic	Duty

OFFICER PERSONNEL			
District	Sea Shore	Foreign Domestic	Duty

RECORDS	
Posting	Coding
	NOTED

MACHINE ACCOUNTING
Punched
Verified

☆ U. S. GOVERNMENT PRINTING OFFICE 16—40355-2

WATTS, Alan B. 209-630 BM1(L)(AN)

CG TRAINING STATION A_N SCHOOL GROTON, CONN.

50-011 17 January, 1949

1300 Commander, 1st CG District
1-17-49 Assignment to duty.
Granted 10 lv. 0 pt. 1 tt, enroute

CICCD/D 021529Z (August, 1948) Auth No. 516094

BM1(L) BM1(L)(AN) 17 Janumyy, 1949

D PC76-44

17 January, 1949: Satisfactorily completed a course of instruction in Aids to Navigation School Training.

A. S. ALEXANDER, SCLK, USCG, BY DIRECTION
dal

SERVICE RECORD COPY

WATTS, Alan B.

209-630

BM1(L)(AN)

CICGD

Administrative

Boston, Mass.

1-28-49

01-001

0837
1-28-49

CGTS Groton, Conn.
resdu Gr 10 das lv(5 Acc Reg & 5 Adv Reg) 1 da tt enr.

18-D

CGTS/L 1-17-49

1040
1-28-49

CG Group Southwest Harbor
fur asdu to CG Group Moose Peak, Maine.

CICGD/L 1-28-49

R. A. TAYLOR LCDR
By direction

WATTS, Alan B. 209-630 BM1(L)

CG TRAINING STATION AIDS TO NAVIGATION SCHOOL GROTON, CT.

03-083 - - - - 17 August, 1948

0945
17 August, 1948 CO, CG GROUP, Moose Peak, Me.
training. Used 1 tt.

D ComlstCGB/D 021529Z (Aug. 48) Auth.No. 516094

A. S. ALEXANDER, SCLK,USCG BY DIRECTION
B

SERVICE RECORD COPY

Standard Form No. 1012a (Revised)
Form prescribed by
Comptroller General, U. S.
October 20, 1944
General Regulations No. 88—Revised
ATTACH SUBVOUCHERS HERE

Pmt'd - File 407

VOUCHER FOR PER DIEM AND/OR REIMBURSEMENT OF EXPENSES INCIDENT TO OFFICIAL TRAVEL

D. O. Vou. No. 406-
Bu. Vou. No.

PAID BY

(For use of paying office)

U. S. TREASURY DEPARTMENT - COAST GUARD
(Department, bureau, or establishment)

THE UNITED STATES, DR.,

To ALAN B. WATTS

Address USCG TRAINING STATION
GROTON, CONNECTICUT (7)

(Official duty station) (Residence (For use of Postal Service only))

FOR PER DIEM in lieu of subsistence, mileage for privately owned motor vehicle, and/or REIMBURSEMENT of travel and other expenses paid by me in the discharge of official duty from 16 AUGUST 19 48, to 17 AUGUST 19 48, as per itemized statement within, under authority No. 516094 dated 21 JULY 19 48, copy of which is attached,* or has been previously furnished with Voucher No. ....., paid ....., 19....., by .....
(Name of disbursing officer)

AMOUNT CLAIMED		
FOR—	DOLLARS	CENTS
Subsistence	1	00
Other		
Travel	9	99
TOTAL	10	99

(Payee must not use this space)

Differences		
Amount verified; correct for	10	99
(Signature or initials)		

Alan B. Watts
27 AUGUST, 1948 BM1 (L) USCG

MEMORANDUM

10.99 D. D. MURPHY
27 AUGUST 48 Lieutenant, USCG

The next previous voucher paid under the same travel authority was: D. O. Vou. No. ....., paid .....
(Date)

ACCOUNTING CLASSIFICATION (for completion by Administrative Office)

APPROPRIATION, LIMITATION, OR PROJECT SYMBOL	APPROPRIATION TITLE	LIMIT'N OR PROJ'T (Amount)	APPROPRIATION (Amount)
2091203.001	PAY & ALLOWANCES, COAST GUARD, 1949	10.99	10.99

ALLOTMENT SYMBOL	AMOUNT	OBLIGATIONS LIQUIDATED	COST ACCOUNT		OBJECTIVE CLASSIFICATION	
			SYMBOL	AMOUNT	SYMBOL	AMOUNT
051-20	T.A.516094		152		0232	10.99

Paid by Check 10.99, dated AUG 31 1948, 19....., for $..... on Treasurer of the United States in favor of payee named above.

MEMORANDUM

*If there was no prior authority, state circumstances which rendered securing prior authority impracticable. If the ability to certify and authority to approve are combined in one person, one signature only is necessary; otherwise, the approving officer will sign in the blank space below "Approved for $..... and give his official title.

16—42015-1

SCHEDULE OF EXPENDITURES AND ITINERARY OF TRAVELER*

USE SINGLE SPACE ITEMS ARE NUMERO

1. Date and hour of departure from official headquarters ..... (Date) (Hour)
2. Give duty status on first day of voucher period:
   Arrived at ..... on ....., 19....., for temporary duty for approximate period .....
   Approximate date of return to official headquarters ....., 19.....

DATE 1948	CHARACTER OF EXPENDITURE (To be itemized by the day and fully explained)	SUB-** VOU. No.	AMOUNT CLAIMED — SUBSISTENCE†		AMOUNT CLAIMED — OTHER	
3/16	DEPARTED CG GROUP, MOOSE PEAK, MAINE AT 1300					
3/17	REPORTED CGTS, GROTON, CONN. AT 0945					
	REIMBURSEMENT FOR TRAVEL PERFORMED AT OWN EXPENSE FROM MOOSE PEAK, MAINE, TO GROTON, CONN. ENTITLED TO $0.03 PER MILE FOR TIME INVOLVED IN TRAVEL FROM MOOSE PEAK, MAINE, TO GROTON, CONN. OFFICIAL MILEAGE 333 MI. @ $0.03 PER MILE				9	33
	ENTITLED TO SUBSISTENCE AT $1.00 PER MEAL FOR TIME INVOLVED OVER USUALLY TRAVELED ROUTE FROM MOOSE PEAK, MAINE, TO GROTON, CONN. ONE (1) MEAL @ $1.00 PER MEAL			1 00		
	TOTAL TO BE PAID				9	33
	NO GOVERNMENT TRANSPORTATION OR SUBSISTENCE FURNISHED OR USEDIN CONNECTION WITH TRAVEL HEREIN PERFORMED.					
	TOTALS (to be carried forward to continuation sheet, if necessary)					

*If authority provides for travel to more than one point, time of arrival and departure from each should be stated in the body of the account in chronological order.
**When subvouchers required by regulations were not obtained, state fully the circumstances showing reasons for omission.
†If more than one rate of allowance is authorized, full statement of application of each rate must be given in some convenient place on this voucher.

STATEMENT OF TRAVEL

TRANSPORTATION REQUEST NO.	AGENT'S VALUATION OF TICKET OBTAINED BY T/R NOT TO BE CLAIMED	MODE OF TRAVEL* (If by public carrier show abbreviated name thereof and class of service used)	DATE OF TRAVEL	POINTS OF TRAVEL — FROM— (Also show meter readings when travel was by automobile)	POINTS OF TRAVEL — TO— (Also show meter readings when travel was by automobile)	FOR REIMBURSABLE ITEMS ONLY — MILES TRAVELED BY AUTO.	RATE PER MILE (Cents)	AMOUNT CLAIMED (Include cash paid public carrier)	
	TOTAL MILEAGE COMPUTATIONS (to be carried forward to continuation sheet, if necessary)								

*Railroad, steamship, airplane, bus, motor vehicle, etc. Abbreviate class of service or accommodations used—Rail: A, first class; I, intermediate; M, mixed; C, coach; P, pullman accommodations: DR, drawing room; CP, compartment; BR, bedroom; SOS, single occupancy section; SEC, section; LB, lower berth; UP upper berth; S, seat.
Motor vehicle: GA, Government automobile or motorcycle; PO, privately owned automobile or motorcycle.

GPO 16—42615-1

No. 8-176

WATTS, Alan B. (209-630 BM1(L)

Commander, 1st CG District. ADMINISTRATIVE. Boston, Mass.

01-001 20 August, 1948

16 August, 1948 Picked up from Coast Guard Group, Moose Peak, Maine for administrative purposes while absent temporary duty at Coast Guard Training Station, Aids to Navigation School, Groton, Connecticut.

CO/CGGroup,/L

18-D 16 August, 1948. R. A. TAYLOR, LCDR, USCG
By direction

SERVICE RECORD

WATTS, Alan B. 209-630 BM1(L)

Group, Southwest Harbor, Maine Moose Peak Lt & LBS West Jonesport, Maine

01-023

1030
5 May. 1948

Rptd fm Depot, SW Hbr., Maine
for duty

29-30-D VO, CO, Group

J. M. JOSEPH, Lieut., USCG

SERVICE RECORD COPY

WATTS, Alan B. 209-630 BM1(L)

Group, Southwest Harbor, Maine Depot Southwest Harbor, Maine

01-031 5 May, 1948

0800
this date

Tr to Moose Peak Light and L/B Station
For assignment to duty

VO, CO, Group

5 May, 1948 - Reenlisted the REGULARESTABLISHMENT for a period of (4) years
Reenlisted as BM1(L), the rating held at time of discharge
Entitled to $200.00 reenlistment allowance in accordance with
F&S Cir. 172-45

17-D Art. 556 Regs.

J. M. JOSEPH, Lieut., USCG

SERVICE RECORD COPY

WATTS, Alan B. 209-630 BM2(L)

Group, SWHbr., Me. Depot Southwest Harbor, Maine

01-031 4 May, 1948

1000
this date

Rptd fm Moose Peak Lt. & LBS
for discharge and reenlistment

17-D VO, CO, Group

4 May, 1948 - Issued Honorable Discharge by reason expiration full term of enlistment
Issued Honorable Discharge certificate this date.
Entitled to MOP
Entitled to TA Address subsequent to discharge
PAFE: Port Clyde, Maine Machias, Maine
POD: Southwest Harbor, Maine
Total CG Service (this enlistment): 4 yrs, 0 mos., 0 dys

J. M. JOSEPH, Lieut., USCG

17-D Art. 589(1) Regs.
Art. 141 P&SI

SERVICE RECORD COPY

WATTS, Alan B. 209-630 Bm1(L)

Group, Southwest Harbor, Maine Moose Peak Lt. & LBS West Jonesport, Maine

4 May, 1948 01-023

0800
4 May, 1948

Tr to Depot, SW Hbr., Maine
for discharge and reenlistment

VO, CO, Group, SW Hbr., Maine

J. M. JOSEPH, Lieut., USCG

SERVICE RECORD COPY

N. C. G.-2511 A
Form approved by
Comptroller General, U. S.
January 31, 1941

UNITED STATES COAST GUARD

STATEMENT OF CREDITABLE SERVICE

(For Enlistment Allowance)

CG ST GUARD DEPOT, SOUTHWEST HARBOR, MAINE
(Unit)

WATTS, Alan Brennen
(Name in full—surname to the left)

4 May, 1948
(Date)

209-650
(Service number)

Boatswain's Mate, first class (1)
(Rating on discharge)

	Year	Month	Day
Date of last enlistment (for 4 years)	1944	5	5
Enlistment extended (for ____ years from)			
Date of discharge (Honorable Discharge) (Character of discharge)	1948	5	5
Total time of last enlistment period			

NUMBER OF—		
Years	Months	Days
4	0	0

ABSENT TIME DURING PERIOD (Inclusive dates to be shown)

Absent Without Leave			Absent Due to Own Misconduct			Absent Due to Confinement		
From—	To—	Days	From—	To—	Days	From—	To—	Days
NONE			NONE			NONE		

Total Absence (0 days)

Creditable time served during last enlistment period	4	0	0

I CERTIFY that the above is a full, true, and correct statement of creditable service of the above-mentioned man during the period of his last enlistment.

J. M. JOSEPH

Date 4 May, 1948 (Rank) LIEUTENANT, U. S. C. G.
Commanding officer.

REENLISTMENT OR EXTENSION OF ENLISTMENT

Date 5 May, 1948 CG Depot, Southwest Harbor, Maine
(Unit and place)

I CERTIFY that the above-named man Reenlisted for
(Reenlisted or voluntarily extended his enlistment)

a period of four (4) years from this date.

J. M. JOSEPH

(Rank) LIEUTENANT, U. S. C. G.
Commanding officer.

16—20908-1

N. C. G.-2529
(Rev. 9-2-41)

UNITED STATES COAST GUARD

DESIGNATION OF BENEFICIARIES FOR DEATH GRATUITY

Coast Guard Depot (Unit) Southwest Harbor, Maine (Place)

5 May, 1948 (Date)

FROM: WATTS, Alan Brennen (209-630) BM1(L),USCG

To: COMMANDANT (via _____)

1. In the event of my death I hereby designate beneficiary or beneficiaries for payment of six months' pay, as provided in the Act of June 4, 1920, as amended by the Act of May 22, 1928, as follows:

Louise Watts (Full name of wife; if not married, so state)	Machias, Maine (Address of wife)
Wayne Alan Watts (Full name of child; if none, so state)	Machias, Maine (Address of child)
(Full name of child; if none, so state)	(Address of child)
(Full name of child; if none, so state)	(Address of child)

2. In the event of my leaving no widow or child, or of their decease before payment is made, I then designate as my beneficiary under the said act the following dependent relative:

Florence L. Watts (Full name of relative) Mother (Relationship) Jonesboro, Maine (Address of relative)

Potential (State briefly wherein dependency exists)

3. In the event of the death of the above-named dependent relative before payment is made, I then designate as my beneficiary under said act the following dependent relative:

Fred N. Watts (Full name of relative) Father (Relationship) Jonesboro, Maine (Address of relative)

Potential (State briefly wherein dependency exists)

I hereby swear (or affirm) that the statements made herein regarding dependency and relationship of the persons named above are true.

Subscribed and sworn to before me this

5th day of May, 19 48

J. M. JOSEPH (Signature)

Lieutenant, USCG (Rank or title)

Alan Brennen Watts (Signature)

Boatswain's Mate, first class (L) (Rank or rating)

16—25753-1

REPORT OF CHANGE IN PERSONNEL
UNITED STATES COAST GUARD
NAVCG-2599 (REV. 6-45)

Dummy
No.

SURNAME, FIRST NAME, INITIAL	SERVICE NO.	PRESENT RANK OR RATING
Watts, Alan B.	209-630	BM 1 (L)

MAJOR UNIT NAME	MINOR UNIT NAME	LOCATION
Groton Trasta	Aids to Navigation	

MAJOR UNIT ITEM No. OR VESSEL'S ASSIGNED DISTRICT	MINOR UNIT ITEM No.	DATE

TIME 0945
DATE 8-17-48
REPORTED FROM: 6th Group, Moose Peak, Me.
FOR Used ltr.

DUTY CODE NO.
AUTH: Ns 516904.

TIME
DATE
TRANSFERRED TO:
FOR

AUTH: Transcribed from Muster roll.

CHANGED IN {RANK / RATING} FROM _____ TO _____ EFFECTIVE _____

DUTY CODE NO.
AUTH:

OTHER CHANGES (SPECIFY)

DUTY CODE NO.
AUTH:

(Commanding)

SPACE BELOW IS FOR HEADQUARTERS' USE ONLY

Enlisted Personnel				
Rate	Pay Grade	District	Foreign Domestic	Duty
102		21	2	

Officer Personnel			
District	Sea Shore	Foreign Domestic	Duty
266		999	

Records	
Posting	Coding
	CODED NO. 10

SEP 1 '48

Machine Accounting
Punched _____
Verified _____

☆ U. S. GOVERNMENT PRINTING OFFICE 16—40355-2

NCG 2500
(Rev. June 1942)

PEA-E
32

ENLISTMENT CONTRACT

6/4/48
CODE NO. 10

UNITED STATES { COAST GUARD / ~~COAST GUARD RESERVE~~ }

ENLISTMENT OF WATTS, Alan Brennen (Full name, surname to left); 209-630 (Service number); $155.25 (Pay per month)

Accepted for enlistment at Southwest Harbor, Maine; BM1(L) (Rating in which enlisted)

Enlisted at CG Depot, Southwest Harbor, Maine; 5 May, 1948 (Date of enlistment)

Transferred to Moose Peak Light and Lifeboat Station, West Jonesport, Maine

Occupation Coast Guardsman Citizenship * NB If naturalized, place and date of naturalization ____ Certificate No. ____

Date of birth 1 January, 1917 Place of birth Jonesboro, Maine

Home address O'Brien Ave. (Street and number) Machias (Town) Washington (County) Maine (State)

Married or single Married Name and address of next of kin or legal guardian ____

Louise Watts (Relationship) O'Brien Ave., Machias, Maine (Address)

Continuous Service Certificate ____ (Number) Previous service { Coast Guard / Reserve } 10 (Years) 2 (Months)* 20 (Days)

First enlisted 15 February, 1938 (Date) at Burnt Island Lifeboat Station, Port Clyde, Maine (Place) and was last discharged 4 May, 1948 (Date) from CG Depot, Southwest Harbor, Maine (Unit)

with Honorable (Character) discharge as BM1(L) (Rate) No. - - - - - -

Previous Navy service None (Years) (Months) (Days) Previous Marine Corps service None (Years) (Months) (Days)

Previous Army service None (Years) (Months) (Days) Age 31 years 4 months.

Height 5 feet 11 inches. Weight 185 pounds.

Eyes Blue Sex Male Hair Lt. Brown Complexion Light Color White

Personal characteristics None marks, etc. ____

For and in consideration of the pay or wages due to the ratings which may from time to time be assigned me during the continuance of my service, I agree to and with Lt. J.M. Joseph of the United States Coast Guard, as follows:

First: To enter the Coast Guard of the United States and to report to such station or vessel as I may be ordered to join, and to the utmost of my power and ability discharge my several services or duties and be in everything conformable and obedient to the several requirements and lawful commands of the officers who may be placed over me.

Second: I oblige and subject myself to serve { Four years from 5 May, 1948 / during minority until ____ } unless sooner discharged by proper authority.

* Citizenship—Use expressions "NB" for native born; "NZ" for naturalized; "NPI" for native of Philippine Islands; "NPR" for ... Rico.

In the event of war or National emergency declared by the President to exist during my term of service, I oblige and subject myself to serve until 6 months after the end of the war or National emergency if so required by the Secretary of the Navy unless I voluntarily reenlist or extend my enlistment. I understand that when so detained, I am not entitled to enlistment allowance and that in time of war the addition of one-quarter pay as specified in the Act of July 11, 1941, is not applicable.

I also oblige myself, during such service, to comply with and be subject to such laws, regulations, and discipline for the government of the Coast Guard as are or shall be established by the Congress of the United States or other competent authority, and to submit to treatment for the prevention of smallpox, typhoid (typhoid prophylaxis), and to such other preventive measures as may be considered necessary by proper authorities.

Third: I am of the legal age to enlist; I have never deserted from the United States Coast Guard, Navy, Army, or Marine Corps; I have never been discharged from the United States Service or other service on account of disability or through sentence of either civilian or military court; and I have never been discharged from any service, civil or military, except with good character and for the reasons given by me to the recruiting officer prior to enlistment. I am not a member of the Coast Guard Reserve, Naval Reserve, Naval Militia, Marine Corps Reserve, National Guard, or Army Reserve.

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

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

Oath of Allegiance: I, Alan Brennen Watts, do solemnly swear (or affirm) that I will bear true faith and allegiance to the United States of America, and that I will serve them honestly and faithfully against all their enemies whomsoever, and that I will obey the orders of the President of the United States and the orders of the officers appointed over me, according to the laws of the United States and the regulations governing the Coast Guard.

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

Alan Brennen Watts

Alan Brennen Watts
(Signature in own handwriting, surname to right)

Subscribed and sworn to before me this 5th day of May, A. D. 1948

J. M. JOSEPH, Lieutenant, U. S. Coast Guard
(Commanding officer, notary public, or other officer qualified to administer oaths)

Commanding Officer
(Title)

Citizenship substantiated and contract perfected.

J. M. JOSEPH, L

Lieutenant, *U. S. C. G., Enlisting Officer.*

EXTENSION OF ENLISTMENT CONTRACT

(Date)

(Place)

(Unit) by reason of

Enlistment extended until

under authority of

(Signature of man)

16—8420-2

ding officer)

0900
12 Dec.,

roup, Southeast

209-630 BMle(L)

uthwest Harbor, Maine Moose Peak Lt. & L/B Station West Jonesport, Me

01-023

0900 17 Dec., 1947
12 Dec., 1947 Rptd fm thirty (30) days annual leave
for resumption of regular duties

29-30-D Comdt. Cir. 31-47

W. M. JOSEPH, Lieut., USCG

SERVICE RECORD COPY

UNITED STATES COAST GUARD

STATEMENT OF CREDITABLE SERVICE

(For Enlistment Allowance)

36

209-630 EM1c(L)

Southwest Harbor, Me. Moose Peak Lt. & L/B Station W. Jonesport, Me.

(Name in full—surname to the left) 01-023 4 May, 1943 18 Nov., 1947

(Service number) Honorable, First class (L)

	Year	Month	Day	NUMBER OF— Years	Months	Days
Date of last enlistment (for 4 years)	1943	5	5			
Enlistment extended (for ____ years from)						
Date of discharge (Honorable Discharge)	1947	5	5			
Total time of last enlistment period				4	0	0

(Character of discharge)

ABSENT TIME DURING PERIOD (Inclusive dates to be shown)

Absent Without Leave			Absent Due to Own Misconduct			Absent Due to Confinement		
From—	To—	Days	From—	To—	Days	From—	To—	Days
None			None			None		

1200, 11 November, 1947 - departed on thirty (30) days annual leave

J. M. JOSEPH, Lieut., USCG

29-30(D) Comdt. Cir. 3-47

Date 5 May, 1943

REENLISTMENT OR EXTENSION OF ENLISTMENT

Date 5 May, 1943

I certify that the above-named man Reenlisted

a period of Four (4) years from this date.

J. M. JOSEPH

(Rank) LIEUTENANT, U.S.C.G.

UNITED STATES COAST GUARD

EMENT OF CREDITABLE SERVICE

(For Enlistment Allowance)

COAST GUARD DEPOT, SOUTHWEST HARBOR, MAINE
(Unit)

Brannen
(Name in full—surname to the left)

4 May, 1948
(Date)

(Service number)

Boatswain's Mate, First class (1)
(Rating on discharge)

	Year	Month	Day
e of last enlistment (for 4 years)	1944	5	5
Enlistment extended (for ____ years from)			
Date of discharge (Honorable Discharge) (Character of discharge)	1948	5	5
Total time of last enlistment period			

NUMBER OF—		
Years	Months	Days
4	0	0

ABSENT TIME DURING PERIOD (Inclusive dates to be shown)

Absent Without Leave			Absent Due to Own Misconduct			Absent Due to Confinement		
From—	To—	Days	From—	To—	Days	From—	To—	Days
NONE			NONE			NONE		

Total Absence (0 days)

Creditable time served during last enlistment period	4	0	0

I CERTIFY that the above is a full, true, and correct statement of creditable service of the above-mentioned man during the period of his last enlistment.

J. M. JOSEPH

Date 4 May, 1948

(Rank) LIEUTENANT, U. S. C. G.
Commanding officer.

REENLISTMENT OR EXTENSION OF ENLISTMENT

Date 5 May, 1948

CG Depot, Southwest Harbor, Maine
(Unit and place)

I CERTIFY that the above-named man Reenlisted for
(Reenlisted or voluntarily extended his enlistment)

a period of four (4) years from this date.

J. M. JOSEPH

(Rank) LIEUTENANT, U. S. C. G.
Commanding officer.

16—20908-1

209-630 BM1(L)

Moose Peak Lt & LB Sta. West Jonesport, Me.

01-023 2 April, 1948

xxxx BM1c(L) BM1(L) 2 April, 1948

29-30 D ALCOAST # 19

J. M. JOSEPH, Lieut.

SERVICE RECORD COPY

UNITED STATES COAST GUARD

OF BENEFICIARIES FOR DEATH GRATUITY

epot (Unit) — Southwest Harbor, Maine (Place)

5 May, 1948 (Date)

. WATTS, Alan Brennen (209-630) BM1(L),USCG

To: COMMANDANT (via _____)

1. In the event of my death I hereby designate beneficiary or beneficiaries for payment of six months' pay, as provided in the Act of June 4, 1920, as amended by the Act of May 22, 1928, as follows:

Louise Watts (Full name of wife; if not married, so state)	Machias, Maine (Address of wife)
Wayne Alan Watts (Full name of child; if none, so state)	Machias, Maine (Address of child)
(Full name of child: if none, so state)	(Address of child)
(Full name of child; if none, so state)	(Address of child)

CO NO. 10

2. In the event of my leaving no widow or child, or of their decease before payment is made, I then designate as my beneficiary under the said act the following dependent relative:

Florence L. Watts (Full name of relative)	Mother (Relationship)	Jonesboro, Maine (Address of relative)

Potential (State briefly wherein dependency exists)

3. In the event of the death of the above-named dependent relative before payment is made, I then designate as my beneficiary under said act the following dependent relative:

Fred N. Watts (Full name of relative)	Father (Relationship)	Jonesboro, Maine (Address of relative)

Potential (State briefly wherein dependency exists)

I hereby swear (or affirm) that the statements made herein regarding dependency and relationship of the persons named above are true.

Subscribed and sworn to before me this

5th day of May, 19 48

J. M. JOSEPH (Signature)

Lieutenant, USCG (Rank or title)

Alan Brennen Watts (Signature)

Boatswain's Mate, first class (L) (Rank or rating)

16—25753-1

UNITED STATES COAST GUARD

...TION OF BENEFICIARIES FOR DEATH GRATUITY

...t Guard Depot (Unit) Southwest Harbor, Maine (Place)

5 May, 1948 (Date)

FROM: WATTS, Alan Brennen (209-630) BM1(L), USCG

TO: COMMANDANT (via _____)

1. In the event of my death I hereby designate beneficiary or beneficiaries for payment of six months' pay, as provided in the Act of June 4, 1920, as amended by the Act of May 22, 1928, as follows:

Louise Watts (Full name of wife; if not married, so state)	Machias, Maine (Address of wife)
Wayne Alan Watts (Full name of child; if none, so state)	Machias, Maine (Address of child)
(Full name of child: if none, so state)	(Address of child)
(Full name of child; if none, so state)	(Address of child)

COPIED NO. 10

2. In the event of my leaving no widow or child, or of their decease before payment is made, I then designate as my beneficiary under the said act the following dependent relative:

Florence L. Watts (Full name of relative) — Mother (Relationship) — Jonesboro, Maine (Address of relative)

Potential (State briefly wherein dependency exists)

3. In the event of the death of the above-named dependent relative before payment is made, I then designate as my beneficiary under said act the following dependent relative:

Fred N. Watts (Full name of relative) — Father (Relationship) — Jonesboro, Maine (Address of relative)

Potential (State briefly wherein dependency exists)

I hereby swear (or affirm) that the statements made herein regarding dependency and relationship of the persons named above are true.

Subscribed and sworn to before me this

5th day of May, 1948

Alan B. Watts (Signature)

Alan Brennen Watts

J. M. JOSEPH (Signature)

Boatswain's Mate, first class (L) (Rank or rating)

Lieutenant, USCG (Rank or title)

16—25753-1

REPORT OF CHANGE IN PERSONNEL
UNITED STATES COAST GUARD
NAVCG-2599 (REV. 6-44)

No. 8-176

SURNAME, FIRST NAME, INITIAL	SERVICE No.	PRESENT RANK OR RATING
WATTS, Alan B.	(209-630	BM1(L)

MAJOR UNIT NAME	MINOR UNIT NAME	LOCATION
Commander, 1st CG District.	ADMINISTRATIVE.	Boston, Mass.

UNIT ITEM No. OR VESSEL'S ASSIGNED DISTRICT	DATE
01-001	20 August, 1948

TIME
DATE
REPORTED FROM:
FOR

DUTY CODE NO.
AUTH:

TIME
DATE
TRANSFERRED TO:
FOR

AUTH:

CHANGED IN {RANK / RATING} FROM _____ TO _____ EFFECTIVE _____

DUTY CODE NO.
AUTH:

OTHER CHANGES (SPECIFY)

(01)

16 August, 1948 Picked up from Coast Guard Group, Moose Peak, Maine for administrative purposes while absent temporary duty at Coast Guard Training Station, Aids to Navigation School, Groton, Connecticut.

DUTY CODE NO. 18-D

CO/CGGroup,/L
AUTH: 16 August, 1948.

R. A. TAYLOR, LCDR, USCG
By direction (Commanding)

SPACE BELOW IS FOR HEADQUARTERS' USE ONLY

ENLISTED PERSONNEL				
Rate	Pay Grade	District	Foreign Domestic	Duty
102		01	2	
II	XIV	XVII	XX	XXI

OFFICER PERSONNEL			
District	Sea Shore	Foreign Domestic	Duty
258		001	
XI	XIV	XV	XVIII

RECORDS	
Posting	Coding
	CODED NO. 10

PC's 44

MACHINE ACCOUNTING
Punched _____
Verified _____

U. S. GOVERNMENT PRINTING OFFICE 16—40355-1

(PE-PR-32)

28 June, 1948
CG-73

From: Commandant (pap)
To: Commanding Officer, CG Group, South West Harbor, Maine

Via: Commander, 1st CG District

Subj: WATTS, Alan B. (209-630) BM1(L): completion of records

1. The service record of subject named man, who was discharged and re-enlisted at your unit 5 May, 1948, is returned herewith for completion. Examination of the service record shows that article 12 has not been filled out, and that his leave record in accordance with Commandant's Circular 31-47 paragraph 32 is incomplete.

2. It is requested that the service record be completed and on completion returned to the Commandant (PE-PR-32)

B. A. SHAW
By direction

Incl: Watts' service record

U.S. COAST GUARD
(1)

MAILED JUN 2 8 1948

EPB: epb Buchan Return 3-13

NCG 2500
(Rev. June, 1942)

ENLISTMENT CONTRACT

UNITED STATES { COAST GUARD / ~~COAST GUARD RESERVE~~ }

ENLISTMENT OF WATTS, Alan Brennen (Full name, surname to left); 209-630 (Service number); $155.25 (Pay per month)

Accepted for enlistment at Southwest Harbor, Maine; BM1(L) (Rating in which enlisted)

Enlisted at CG Depot, Southwest Harbor, Maine; 5 May, 1948 (Date of enlistment)

Transferred to Moose Peak Light and Lifeboat Station, West Jonesport, Maine

Occupation Coast Guardsman Citizenship* NB If naturalized, place and date of naturalization ____ Certificate No. ____

Date of birth 1 January, 1917 Place of birth Jonesboro, Maine

Home address O'Brien Ave. (Street and number) Machias (Town) Washington (County) Maine (State)

Married or single Married Name and address of next of kin or legal guardian ____

Louise Watts (Relationship) O'Brien Ave., Machias, Maine (Address)

Continuous Service Certificate ____ (Number) Previous service { Coast Guard / Reserve } 10 (Years) 2 (Months) 20 (Days)

First enlisted 15 February, 1938 (Date) at Burnt Island Lifeboat Station, Port Clyde, Maine (Place) and was last discharged 4 May, 1948 (Date) from CG Depot, Southwest Harbor, Maine (Unit)

with Honorable (Character) discharge as BM1(L) (Rate) No. - - - - - -

Previous Navy service None (Years) (Months) (Days) Previous Marine Corps service None (Years) (Months) (Days)

Previous Army service None (Years) (Months) (Days) Age 31 years 4 months.

Height 5 feet 11 inches. Weight 185 pounds.

Eyes Blue Sex Male Hair Lt. Brown Complexion Light Color White

Personal characteristics None marks, etc. ____

For and in consideration of the pay or wages due to the ratings which may from time to time be assigned me during the continuance of my service, I agree to and with Lt. J.M.Joseph of the United States Coast Guard, as follows:

First: To enter the Coast Guard of the United States and to report to such station or vessel as I may be ordered to join, and to the utmost of my power and ability discharge my several services or duties and be in everything conformable and obedient to the several requirements and lawful commands of the officers who may be placed over me.

Second: I oblige and subject myself to serve { Four years from 5 May, 1948 / during minority until 1 } unless sooner discharged by proper authority.

* Citizenship—Use expressions "NB" for native born; "NZ" for naturalized; "NPI" for native of Philippine Islands; "NPR" for native of Puerto Rico.

16—8420-2

In the event of war or National emergency declared by the President to exist during my term of service, I oblige and subject myself to serve until 6 months after the end of the war or National emergency if so required by the Secretary of the Navy unless I voluntarily reenlist or extend my enlistment. I understand that when so detained, I am not entitled to enlistment allowance and that in time of war the addition of one-quarter pay as specified in the Act of July 11, 1941, is not applicable.

I also oblige myself, during such service, to comply with and be subject to such laws, regulations, and discipline for the government of the Coast Guard as are or shall be established by the Congress of the United States or other competent authority, and to submit to treatment for the prevention of smallpox, typhoid (typhoid prophylaxis), and to such other preventive measures as may be considered necessary by proper authorities.

Third: I am of the legal age to enlist; I have never deserted from the United States Coast Guard, Navy, Army, or Marine Corps; I have never been discharged from the United States Service or other service on account of disability or through sentence of either civilian or military court; and I have never been discharged from any service, civil or military, except with good character and for the reasons given by me to the recruiting officer prior to enlistment. I am not a member of the Coast Guard Reserve, Naval Reserve, Naval Militia, Marine Corps Reserve, National Guard, or Army Reserve.

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

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

Oath of Allegiance: I, Alan Brennen Watts, do solemnly swear (or affirm) that I will bear true faith and allegiance to the United States of America, and that I will serve them honestly and faithfully against all their enemies whomsoever, and that I will obey the orders of the President of the United States and the orders of the officers appointed over me, according to the laws of the United States and the regulations governing the Coast Guard.

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

Alan Brennen Watts

Alan Brennen Watts
(Signature in own handwriting, surname to right)

Subscribed and sworn to before me this 5th day of May, A. D. 1948.

J. M. Joseph

J. M. JOSEPH, Lieutenant, U. S. Coast Guard
(Commanding officer, notary public, or other officer qualified to administer oaths)

Commanding Officer
(Title)

Citizenship substantiated and contract perfected.

J. M. Joseph

J. M. JOSEPH, Jr.

Lieutenant, *U. S. C. G., Enlisting Officer.*

EXTENSION OF ENLISTMENT CONTRACT

(Unit) (Place) (Date)

Enlistment extended until _____ by reason of

_____

under authority of _____

_____

_____
(Signature of man)

_____
(Signature of commanding officer)

16—8420-2

REPORT OF CHANGE IN PERSONNEL

UNITED STATES COAST GUARD

NAVCG-2599 (REV. 6-44)

SURNAME, FIRST NAME, INITIAL	SERVICE NO.	PRESENT RANK OR RATING
WATTS, Alan B.	209-630	BM1(L)

MAJOR UNIT NAME	MINOR UNIT NAME	LOCATION
Group, Southwest Harbor, Maine	Depot	Southwest Harbor, Maine

UNIT ITEM NO. OR VESSEL'S ASSIGNED	DATE
01-031	5 May, 1948

TIME
DATE

REPORTED FROM:
FOR

DUTY CODE NO.

AUTH:

TIME 0800
DATE this date

TRANSFERRED TO: Tr to Moose Peak Light and L/B Station
FOR For assignment to duty

AUTH: VO, CO, Group

CHANGED IN {RANK / RATING} FROM _____ TO _____ EFFECTIVE _____

DUTY CODE NO.

AUTH:

OTHER CHANGES (SPECIFY)

5 May, 1948 - Reenlisted the REGULARESTABLISHMENT for a period of (4) years
Reenlisted as BM1(L), the rating held at time of discharge
Entitled to $200.00 reenlistment allowance in accordance with
F&S Cir. 172-45

DUTY CODE NO. 17-D

AUTH: Art. 556 Regs.

J. M. JOSEPH, Lieut., USCG
(Commanding)

SPACE BELOW IS FOR HEADQUARTERS' USE ONLY

Enlisted Personnel				
Rate	Pay Grade	District	Foreign Domestic	Duty
102		058	052	
II	XIV	XVII	XX	XXI

Officer Personnel			
District	Sea Shore	Foreign Domestic	Duty
5/5/48			
XI	XIV	XV	XVIII

Records	
Posting	Coding
	CODED NO. 10

Machine Accounting
Punched
Verified

U. S. GOVERNMENT PRINTING OFFICE 16—40355-1

REPORT OF CHANGE IN PERSONNEL

UNITED STATES COAST GUARD

NAVCG-2599 (REV. 6-44)

SURNAME, FIRST NAME, INITIAL	SERVICE NO.	PRESENT RANK OR RATING
WATTS, Alan B.	209-630	BM1(L)

MAJOR UNIT NAME	MINOR UNIT NAME	LOCATION
Group, Southwest Harbor, Maine	Moose Peak Lt & LBS	West Jonesport, Maine

UNIT ITEM NO. OR VESSEL'S ASSIGNED D T — 01-023 — DATE

TIME 1030
DATE 5 May, 1948

REPORTED FROM: Rptd fm Depot, SW Hbr., Maine
FOR for duty

DUTY CODE NO. 29-30-D AUTH: VO, CO, Group

TIME
DATE

TRANSFERRED TO:
FOR

AUTH:

CHANGED IN {RANK / RATING} FROM _____ TO _____ EFFECTIVE _____

DUTY CODE NO. AUTH:

OTHER CHANGES (SPECIFY)

PEA-E 32

DUTY CODE NO. AUTH:

J. M. JOSEPH, Lieut., USCG
(Commanding)

SPACE BELOW IS FOR HEADQUARTERS' USE ONLY

Enlisted Personnel				
Rate	Pay Grade	District	Foreign Domestic	Duty
II	XIV	XVII	XX	XXI

Officer Personnel			
District	Sea Shore	Foreign Domestic	Duty
XI	XIV	XV	XVIII

Records	
Posting	Coding

Machine Accounting
Punched
Verified

U. S. GOVERNMENT PRINTING OFFICE 16—40355-1

UNITED STATES COAST GUARD
SOUTHWEST HARBOR, MAINE

ADDRESS REPLY TO
Commanding Officer
Coast Guard Group
AND REFER TO
File: 73

15 July, 1948

From: Commanding Officer, CG Group, Southwest Harbor, Maine, Maine
To: COMMANDANT (PE-PR-32)

Via: Commander (pmp), First Coast Guard District

Subj: WATTS, Alan B. (209-630) BM1(L); completion of records

The service record of subject named man which was received from Headquarters to be complete, has been completed and is returned herewith.

J. M. JOSEPH

PE-E
32

SOUTHWEST HARBOR, MAINE

Commanding Officer
Coast Guard Group

File: 73

15 July, 1948

From: Commanding Officer, CG Group, Southwest Harbor, Maine, Maine
To: COMMANDANT (PE-PR-32)

Via: Commander (pmp), First Coast Guard District

Subj: WATTS, Alan B. (209-630) BM1(L); completion of records

The service record of subject named man which was received from Headquarters to be complete, has been completed and is returned herewith.

J. M. JOSEPH

N. C. G.-2500C
Revised 1938

1

ME-PR-30

Service Record

WATTS
(Surname)

Alan Brennen (Christian names) 209-630 (Service No.) N.B. (Citizenship)

Boatswain's Mate, first Class(L) (Enlisted as) 5 May, 1918 (Date) Four (Term of years)

CG Depot (Ship or station) Southwest Harbor, Maine (Place)

16—9577-1

D & P

REPORT OF CHANGE IN PERSONNEL

UNITED STATES COAST GUARD

NAVCG-2599 (REV. 6-44)

SURNAME, FIRST NAME, INITIAL	SERVICE NO.	PRESENT RANK OR RATING
WATTS, Alan B.	209-630	BM1(L)

MAJOR UNIT NAME	MINOR UNIT NAME	LOCATION
Group, SWHbr., Me.	Depot	Southwest Harbor, Maine

UNIT ITEM NO. OR VESSEL'S ASSIGNED	DATE
01-031	4 May, 1948

TIME 1000
DATE this date

REPORTED FROM: Rptd fm Moose Peak Lt. & LBS
FOR for discharge and reenlistment

DUTY CODE NO. 17-D AUTH: VO, CO, Group

TIME
DATE

TRANSFERRED TO:
FOR

AUTH:

CHANGED IN {RANK / RATING} FROM _____ TO _____ EFFECTIVE _____

DUTY CODE NO. AUTH:

OTHER CHANGES (SPECIFY)

4 May, 1948 - Issued Honorable Discharge by reason expiration full term of enlistment
Issued Honorable Discharge certificate this date.
Entitled to MOP
Entitled to TA — Address subsequent to discharge
PAFE: Port Clyde, Maine — Machias, Maine
POD: Southwest Harbor, Maine
Total CG Service (this enlistment): 4 yrs, 0 mos., 0 dys

DUTY CODE NO. AUTH:

17-D Art. 589(1) Regs.
Art. 141 P&SI

J. M. JOSEPH, Lieut., USCG
(Commanding)

SPACE BELOW IS FOR HEADQUARTERS' USE ONLY

Enlisted Personnel				
Rate	Pay Grade	District	Foreign Domestic	Duty
II	XIV	XVII	XX	XXI

Officer Personnel			
District	Sea Shore	Foreign Domestic	Duty
XI	XIV	XV	XVIII

Records	
Posting	Coding
	CODED NO. 10

Machine Accounting
Punched _____
Verified _____

U. S. GOVERNMENT PRINTING OFFICE 16—40355-1

REPORT OF CHANGE IN PERSONNEL

UNITED STATES COAST GUARD

NAVCG-2599 (REV. 6-44)

SURNAME, FIRST NAME, INITIAL	SERVICE NO.	PRESENT RANK OR RATING
WATTS, Alan B.	209-630	Bm1(L)

MAJOR UNIT NAME	MINOR UNIT NAME	LOCATION
Group, Southwest Harbor, Maine	Moose Peak Lt. & LBS	West Jonesport, Maine
UNIT ITEM NO. OR VESSEL'S ASSIGNED DISTRICT		DATE
	4 May, 1948	01-023

TIME
DATE

REPORTED FROM:
FOR

DUTY CODE NO.

AUTH:

TIME 0800
DATE 4 May, 1948

TRANSFERRED TO:
FOR Tr to Depot, SW Hbr., Maine
for discharge and reenlistment

AUTH: VO, CO, Group, SW Hbr., Maine

CHANGED IN {RANK / RATING} FROM _____ TO _____ EFFECTIVE _____

DUTY CODE NO.

AUTH:

OTHER CHANGES (SPECIFY).

PEA-F
32

DUTY CODE NO.

AUTH:

J. M. JOSEPH, Lieut., USCG
(Commanding)

SPACE BELOW IS FOR HEADQUARTERS' USE ONLY

Enlisted Personnel				
Rate	Pay Grade	District	Foreign Domestic	Duty
II	XIV	XVII	XX	XXI

Officer Personnel			
District	Sea Shore	Foreign Domestic	Duty
XI	XIV	XV	XVIII

Records	
Posting	Coding

Machine Accounting
Punched _____
Verified _____

U. S. GOVERNMENT PRINTING OFFICE 16—40355-1

REPORT OF CHANGE IN PERSONNEL

UNITED STATES COAST GUARD

NAVCG-2599 (REV. 6-44)

110

SURNAME, FIRST NAME, INITIAL	SERVICE NO.	PRESENT RANK OR RATING
WATTS, Alan B.	209-630	BM1(L)

MAJOR UNIT NAME	MINOR UNIT NAME	LOCATION
Group, SW Hbr, Me.	Moose Peak Lt & LB Sta.	West Jonesport, Me.

UNIT ITEM NO. OR VESSEL'S ASSIGNED DISTRICT	DATE
01-023	2 April, 1948

TIME
DATE

REPORTED FROM:
FOR

DUTY CODE NO.

AUTH:

TIME
DATE

TRANSFERRED TO:
FOR

AUTH:

CHANGED IN {~~RANK~~ / RATING} FROM BM1c(L) TO BM1(L) EFFECTIVE 2 April, 1948

DUTY CODE NO. 29-30 D AUTH: ALCOAST # 19

OTHER CHANGES (SPECIFY)

DUTY CODE NO.

AUTH:

J. M. JOSEPH, Lieut.
(Commanding)

SPACE BELOW IS FOR HEADQUARTERS' USE ONLY

Enlisted Personnel				
Rate	Pay Grade	District	Foreign Domestic	Duty
II	XIV	XVII	XX	XXI

Officer Personnel			
District	Sea Shore	Foreign Domestic	Duty
XI	XIV	XV	XVIII

Records	
Posting	Coding
	NOTED

Machine Accounting
Punched
Verified

U. S. GOVERNMENT PRINTING OFFICE 16—40355-1

REPORT OF CHANGE IN PERSONNEL

UNITED STATES COAST GUARD

NAVCG-2599 (REV. 6-45)

No. 22

SURNAME, FIRST NAME, INITIAL	SERVICE No.	PRESENT RANK OR RATING
WATTS, Alan B.	209-630	BM1c(L)
MAJOR UNIT NAME	**MINOR UNIT NAME**	**LOCATION**
CG Group, Southwest Harbor, Maine	Moose Peak Lt. & L/B Station	West Jonesport, Me
MAJOR UNIT ITEM No. OR VESSEL'S ASSIGNED DISTRICT	**MINOR UNIT ITEM No.**	**DATE**
	01-023	17 Dec., 1947

TIME 0900
DATE 12 Dec., 1947

REPORTED FROM: Rptd fm thirty (30) days annual leave
FOR for resumption of regular duties

DUTY CODE NO. 29-30-D AUTH: Comdt. Cir. 31-47

TIME
DATE

TRANSFERRED TO:
FOR

AUTH:

CHANGED IN {RANK / RATING} FROM _____ TO _____ EFFECTIVE _____

DUTY CODE NO.

AUTH:

OTHER CHANGES (SPECIFY)

RE-L 61

DUTY CODE NO.

AUTH:

J. M. JOSEPH, Lieut., USCG
(Commanding)

SPACE BELOW IS FOR HEADQUARTERS' USE ONLY

Enlisted Personnel				
Rate	Pay Grade	District	Foreign Domestic	Duty

Officer Personnel			
District	Sea Shore	Foreign Domestic	Duty

Records	
Posting	Coding

Machine Accounting
Punched _____
Verified _____

☆ U. S. GOVERNMENT PRINTING OFFICE 16—40355-2

REPORT OF CHANGE IN PERSONNEL

UNITED STATES COAST GUARD

NAVCG-2599 (REV. 6-45)

No. 36

SURNAME, FIRST NAME, INITIAL	SERVICE No.	PRESENT RANK OR RATING
WATTS, Alan B.	209-630	BM1c(L)

MAJOR UNIT NAME	MINOR UNIT NAME	LOCATION
CG Group, Southwest Harbor, Me.	Moose Peak Lt. & L/B Station	W. Jonesport, Me.
MAJOR UNIT ITEM No. OR VESSEL'S ASSIGNED DISTRICT	**MINOR UNIT ITEM No.**	**DATE**
	01-023	18 Nov., 1947

TIME
DATE
REPORTED FROM:
FOR

DUTY CODE NO.
AUTH:

TIME
DATE
TRANSFERRED TO:
FOR

AUTH:

CHANGED IN {RANK / RATING} FROM _____ TO _____ EFFECTIVE _____

DUTY CODE NO.
AUTH:

OTHER CHANGES (SPECIFY)

PEA-E
93

1200, 11 November, 1947 - departed on thirty (30) days annual leave

DUTY CODE NO.
29-30(D)

AUTH: Comdt. Cir. 3-47

J. M. JOSEPH, Lieut., USCG
(Commanding)

SPACE BELOW IS FOR HEADQUARTERS' USE ONLY

Enlisted Personnel				
Rate	Pay Grade	District	Foreign Domestic	Duty

Officer Personnel			
District	Sea Shore	Foreign Domestic	Duty

Records	
Posting	Coding

Machine Accounting
Punched _____
Verified _____

☆ U. S. GOVERNMENT PRINTING OFFICE 16—40355-2

STATEMENT AND RECEIPT FOR MEDALS
TREASURY DEPARTMENT
U.S. COAST GUARD
CG-2927 (6-47)

AMERICAN DEFENSE SERVICE MEDAL AND CLASPS AND/OR WORLD WAR II VICTORY MEDAL

INSTRUCTIONS

Return this form to Commandant (PMM), U. S. Coast Guard, Washington 25, D.C. Typewrite or print in ink. Give home address in Section A only if separated from the Service.

A. GENERAL DATA

NAME (Last)	(First)	(Middle)
WATTS	ALAN	BRENNEN

SERVICE NUMBER	RANK OR RATING	UNIT (If on active duty)
209-630	BM1/c (L) USCG	Moose Peak Lt. & L/B Station

HOME ADDRESS *(Give Number, Street, City, Zone No., and State)*

INDICATE STATUS BY CHECK MARK

- [X] Active duty USCG, USCGR, or USPHS
- [ ] Officer – (Inactive) USCGR or USPHS
- [ ] Retired from USCG or USCGR
- [ ] Discharged from USCG, USCGR, or USPHS
- [ ] Disenrolled from USCGR (T)

B. STATEMENT OF ELIGIBILITY

Do not fill in this statement unless you have no proof of eligibility for awards claimed.

I hereby certify that I am eligible for the awards checked below. I have not previously received these awards from any other source.

- [X] American Defense Service Medal
  - [ ] Fleet Clasp
  - [ ] Sea Clasp
  - [ ] Base Clasp

  EACH PERSON IS ENTITLED TO ONLY ONE TYPE OF CLASP.
- [X] World War II Victory Medal (No Clasp)

Alan B. Watts
Alan B. Watts, BM1/c (L)
(Signature)

A WILLFULLY FALSE CERTIFICATION IS A CRIMINAL OFFENSE. U.S. CODE, TITLE 18, SEC. 80

C. RECEIPT FOR AWARDS

I hereby acknowledge receipt of the awards checked below. I certify that I have not previously received these awards from any other source.

- [X] American Defense Service Medal
  - [ ] Fleet Clasp
  - [ ] Sea Clasp
  - [ ] Base Clasp

  EACH PERSON IS ENTITLED TO ONLY ONE TYPE OF CLASP.
- [X] World War II Victory Medal (No Clasp)

Alan B. Watts
(Recipient sign here)

(Do not sign unless awards are actually received)

A-1164

3-285

STATEMENT AND RECEIPT FOR MEDALS
TREASURY DEPARTMENT
U. S. COAST GUARD
CG-2927 (Rev. 4-48)

AMERICAN DEFENSE SERVICE MEDAL AND CLASPS
WORLD WAR II VICTORY MEDAL
AND
AREA CAMPAIGN MEDALS

DISTRIBUTION UNIT
Name: DEPOT
Address: SW Harbor
Maine

INSTRUCTIONS
Return this form to Commandant (PMM), U.S.Coast Guard, Washington 25, D. C. Typewrite or print in ink.

A. GENERAL DATA

NAME (Last)	(First)	(Middle)
WATTS	Alan	Brennen

SERVICE NUMBER	RANK OR RATING	UNIT (If on active duty)
209-630	BM1(L)	Moose Peak L/B Station

HOME ADDRESS (Give Number, Street, City, Zone No., and State only if separated from the service)

INDICATE STATUS BY CHECK MARK AND UNDERSCORE ABBREVIATION APPLICABLE

- [X] Active duty USCG, USCGR, or USPHS
- [ ] Officer - (Inactive) USCGR or USPHS
- [ ] Retired from USCG or USCGR
- [ ] Discharged from USCG, USCGR, or USPHS
- [ ] Disenrolled from USCGR (T)
- [ ] Deceased - Ex-USCG, USCGR, USCGR(T) or USPHS

B. STATEMENT OF ELIGIBILITY

Fill in this statement if you have no proof of eligibility for awards claimed.

I hereby certify that I am eligible for the awards checked below. I have not previously received these awards from any other source.

- [ ] American Defense Service Medal
  - [ ] Fleet Clasp
  - [ ] Sea Clasp
  - [ ] Base Clasp

  EACH PERSON IS ENTITLED TO ONLY ONE TYPE OF CLASP.
- [ ] World War II Victory Medal (No Clasp)
- [X] American Campaign Medal
- [ ] European-African-Middle Eastern Campaign Medal
- [ ] Asiatic-Pacific Campaign Medal

Alan B. Watts, BM1(L)
(Signature)

A WILLFULLY FALSE CERTIFICATION IS A CRIMINAL OFFENSE. U.S.CODE, TITLE 18, SEC. 80

C. RECEIPT FOR AWARDS

I hereby acknowledge receipt of the awards checked below. I certify that I have not previously received these awards from any other source.

- [ ] American Defense Service Medal
  - [ ] Fleet Clasp
  - [ ] Sea Clasp
  - [ ] Base Clasp

  EACH PERSON IS ENTITLED TO ONLY ONE TYPE OF CLASP.
- [ ] World War II Victory Medal (No Clasp)
- [X] American Campaign Medal
- [ ] European-African-Middle Eastern Campaign Medal
- [ ] Asiatic-Pacific Campaign Medal

Alan B. Watts, (L) (AN)
(Recipient sign here)
(Do not sign unless awards are actually received)

A 2555

REPORT OF CHANGE IN PERSONNEL

UNITED STATES COAST GUARD

NAVCG-2599 (REV. 6-45)

No. 68

SURNAME, FIRST NAME, INITIAL	SERVICE NO.	PRESENT RANK OR RATING
WATTS, Alan B.	209-630	BM1c (L)

MAJOR UNIT NAME	MINOR UNIT NAME	LOCATION
CG Group, Rockland, Maine	Moose Peak Light & LB Station	West Jonesport, Me.

MAJOR UNIT ITEM NO. OR VESSEL'S ASSIGNED DISTRICT	MINOR UNIT ITEM NO.	DATE
01-049	01-023	24 June, 1947

TIME 0900
DATE 18 June, 1947

REPORTED FROM: Rptd fm five (5) days annual leave
FOR for resumption of regular duties

DUTY CODE NO. 29-30-D AUTH: Comdt. Cir. 3-47

TIME
DATE

TRANSFERRED TO:
FOR

AUTH:

CHANGED IN {RANK / RATING} FROM _____ TO _____ EFFECTIVE _____

DUTY CODE NO. AUTH:

OTHER CHANGES (SPECIFY)

DUTY CODE NO. AUTH:

J. M. JOSEPH, Lieut., USCG
(Commanding)

SPACE BELOW IS FOR HEADQUARTERS' USE ONLY

Enlisted Personnel				
Rate	Pay Grade	District	Foreign Domestic	Duty

Officer Personnel			
District	Sea Shore	Foreign Domestic	Duty

Records	
Posting	Coding

HEA-E 15

Machine Accounting
Punched _____
Verified _____

☆ U. S. GOVERNMENT PRINTING OFFICE 16—40355-2

WATTS, Alan B. 209-630 BMle(L)

Group, Rockland, Maine Moose Peak Lt & LB Sta. West Jonesport, Maine

01-049 01-023 17 June, 1947

1100, 12 June, 1947, departed on five(5) days annual leave of absence.

29-30(D) Comdt. Cir. 3-47

A. L. TRUCKER, Ch. Carp., USCG
By direction

COPY

No. 17

WATTS, Alan B. 209-630 BMlc (L)

CG GROUP 01-049 Rockland, Maine 7 March, 1947

Moose Peak Light and Lifeboat Station 01-023

Changed rating from BMlc to BMlc (L), effective this date.

H/L 2/27/47 (PE-C) (CG-73)

G. A. TARDIF, Lt. (jg) USCG
By direction

WATTS, Alan B. 209-630 Bkle (L)

CG Group, Rockland, Maine Moose Peak Light & LB Station West Jonesport, Me.

01-049 01-023 24 June, 1947

0900
18 June, 1947 Rptd fm five (5) days annual leave for resumption of regular duties

29-30-D Comdt. Cir. 3-47

J. M. JOSEPH, Lieut., USCG

REPORT OF CHANGE IN PERSONNEL
UNITED STATES COAST GUARD
NAVCG-2599 (REV. 6-45)

No. 49

SURNAME, FIRST NAME, INITIAL	SERVICE No.	PRESENT RANK OR RATING
WATTS, Alan B.	209-630	BM1c(L)
MAJOR UNIT NAME	**MINOR UNIT NAME**	**LOCATION**
Group, Rockland, Maine	Moose Peak Lt & LB Sta.	West Jonesport, Maine
MAJOR UNIT ITEM No. OR VESSEL'S ASSIGNED DISTRICT	**MINOR UNIT ITEM No.**	**DATE**
01-049	01-023	17 June, 1947

TIME
DATE
REPORTED FROM:
FOR

DUTY CODE NO.
AUTH:

TIME
DATE
TRANSFERRED TO:
FOR

AUTH:

CHANGED IN {RANK / RATING} FROM _____ TO _____ EFFECTIVE _____

DUTY CODE NO.
AUTH:

OTHER CHANGES (SPECIFY)

1100, 12 June, 1947, departed on five(5) days annual leave of absence.

DUTY CODE NO.
29-30(D)

AUTH:
Comdt. Cir. 3-47

A. L. Trucker
A. L. TRUCKER, Ch. Carp., USCG
By direction (Commanding)

SPACE BELOW IS FOR HEADQUARTERS' USE ONLY

Enlisted Personnel				
Rate	Pay Grade	District	Foreign Domestic	Duty

Officer Personnel			
District	Sea Shore	Foreign Domestic	Duty

Records	
Posting	Coding

RECEIVED 15

Machine Accounting
Punched _____
Verified _____

☆ U. S. GOVERNMENT PRINTING OFFICE 16—40355-2

NAVCG 2599
U. S. COAST GUARD
(Rev. June 1943)

C O P Y

File 3-14

REPORT OF CHANGE IN PERSONNEL

No. 17

WATTS,	Alan	B.	209-630	BM1c (L)
(Surname)	(First name)	(Middle initial)	(Service No.)	(Rank or rating)

CG GROUP 01-049	Rockland, Maine		7 March, 1947
(Major unit)	(Unit Item No. or vessel's assigned district)	(Place)	(Date)

Moose Peak Light and Lifeboat Station 01-023
(Minor unit)

posted

Changed rating from BM1c to BM1c (L), effective this date.

Letter 3-6

DUTY CODE No.:
AUTHORITY:

H/L 2/27/47 (PE-C) (CG-73)

G. A. TARDIF, Lt. (jg) USCG
By direction (Commanding)

(Title)

SPACE BELOW IS FOR HEADQUARTERS' USE ONLY

Enlisted Personnel					
Rate	R T	Pay Grade	District	Foreign Domestic	Duty
II	III	XIV	XVII	XX	XXI

Officer Personnel			
District	Sea Shore	Foreign Domestic	Duty
XI	XIV	XV	XVIII

Records	
Posting	Coding

Machine Accounting
Punched
Verified

U. S. GOVERNMENT PRINTING OFFICE 16—29594-2

REPORT OF CHANGE IN PERSONNEL

UNITED STATES COAST GUARD

NAVCG-2599 (REV. 6-45)

No._____

SURNAME, FIRST NAME, INITIAL	SERVICE No.	PRESENT RANK OR RATING
Watts, Alan B.	209-630	BMic (L)
MAJOR UNIT NAME	**MINOR UNIT NAME**	**LOCATION**
Rockland Grp	Moose Peak Light & F/B's to.	
MAJOR UNIT ITEM No. OR VESSEL'S ASSIGNED DISTRICT	**MINOR UNIT ITEM No.**	**DATE**
(01)		

TIME
DATE

REPORTED FROM:
FOR

DUTY CODE NO.

AUTH:

TIME
DATE

TRANSFERRED TO:
FOR

AUTH:

CHANGED IN {RANK / RATING} FROM BMic TO BMic (L) EFFECTIVE 3-7-47

DUTY CODE NO.

AUTH: H/L 2-27-47

OTHER CHANGES (SPECIFY)

DUTY CODE NO.

AUTH:

_____
(Commanding)

SPACE BELOW IS FOR HEADQUARTERS' USE ONLY

Enlisted Personnel				
Rate	Pay Grade	District	Foreign Domestic	Duty
102		01	7	

Officer Personnel			
District	Sea Shore	Foreign Domestic	Duty
	212	057	101

Records	
Posting	Coding
PEA-E 44	...UED NO. 14

Machine Accounting
Punched _____
Verified _____

☆ U. S. GOVERNMENT PRINTING OFFICE 16—40355-2

No. 17

WATTS, Alan B. C. 209-630 BMlc(L)

CG GROUP, 01-049 Rockland, Maine 7 March, 1947

Moose Peak Light and Lifeboat Station 01-023

Changed rating from BMlc to BMlc (L), effective this date.

/s/ W. C. CARTER
By direction

H/L 2/27/47 (PE-C) (CG-73)

G. A. TARDIF, Lt. (jg) USCG
By direction

reply to
MMANDANT (PE-C)
r to file: CG-73

UNITED STATES COAST GUARD

Washington 25, D. C.

27 February, 1947

From: Commandant
To: Commander, 1st CG District (pmp)

Subj: Personnel; designator (L)

1. In accordance with the requests contained in letters from the below-named men of various dates with your indorsements thereon, you are authorized to affix the designator (L) to their ratings.

Coffin, Donald C. (209-536) BM1c
Rich, William J. (209-603) BM1c
Santos, Manuel J. (210-638) BM2c
Thompson, Harry E. (209-607) MoMM1c
Watts, Alan B. (209-630) BM1c
Watts, Eugene S. (209-636) BM1c

2. Report action on Form 2599.

/s/ W. C. CAPRON
By direction

CERTIFIED TO BE A TRUE COPY:

R. K. TAYLOR, Lt.Comdr., USCG
Chief, Military Personnel Section, 1CGD

NCG 2599
U. S. Coast Guard
(Jan. 1943)

REPORT OF CHANGE IN PERSONNEL

No. 17

WATTS, Alan B. [illegible] 209-630 BM1c(L)
(Surname) (First name) (Middle initial) (Service No.) (Rank or rating)

CG GROUP, 01-049 Rockland, Maine 7 March, 1947
(Unit) (Place) (Date)

Moose Peak Light and Lifeboat Station 01-023

Changed rating from BM1c to BM1c (L), effective this date.

AUTHORITY:

H/L 2/27/47 (PE-C) (CG-73)

G. A. TARDIF, Lt. (jg) USCG
(Commanding)
By direction

(Title)

RATE		EXP FAIL	PAY GRADE	NEXT PAY PER	DUTY	FOR DUTY	DUTY
102				01	2		
	X	X	XV	XV		XX	XXI

272-057 101

SPACE BELOW IS FOR HEADQUARTERS' USE ONLY

LAW	PERSONNEL RECORDS		
	STATISTICS	CORRESPONDENCE	RECORDS
			A-E 43

☆ U. S. GOVERNMENT PRINTING OFFICE : 1943 16—29594-1

CG-73 (PE-C)

27 February, 1947

From: Commandant
To: Commander, 1st CG District (pap)

Subj: Personnel; designator (L)

1. In accordance with the requests contained in letters from the below-named men of various dates with your indorsements thereon, you are authorized to affix the designator (L) to their ratings.

Coffin, Donald C. (209-536) BMlc
Rich, William J. (209-603) BMlc
Santos, Manuel J. (210-638) MM2c
Thompson, Harry E. (209-607) MoMMlc
Watts, Alan B. (209-630) BMlc
Watts, Eugene S. (209-636) BMlc

2. Report action on Form 2599.

W. C. CAPRON
By direction

UNITED STATES COAST GUARD

BOSTON DISTRICT RECEIVED 21 FEB 1947 U.S. COAST GUARD



ADDRESS REPLY TO
Moose Peak Lt. & L/B Station
West Jonesport, Maine
AND REFER TO
File No. 73

17 February, 1947

From: WATTS, Alan B. (209-630) BM1/c
To: The Commandant

Via: 1. Officer in Charge, Moose Peak Lt. & L/B Station
2. Commanding Officer, CG GROUP, Rockland, Maine
3. Commander, 1st. Coast Guard District

Subj: Designator (L) rating; request for

In accordance with ALCOAST 16, dated 1 February, 1947, it is requested that my rating status be chaged to include the designator (L). I enlisted in tha U. S. Coast Guard as Surfman on 15 February, 1938.

Alan B. Watts

Alan B. Watts, BM1/c

Ind-1
Moose Peak Lt. & L/B Station
West Jonesport, Maine
File 73
17 February, 1947

FORWARDED, approved.

Donald C. Coffin

Ind 2
CG Group, Rockland, Ma ine.
20 February, 1947.

Forwarded approved. Watts formerly held a Surfman rating.

J. M. JOSEPH

Ind-3
COMDR.,1CGD(pmp)
24 February, 1947

From: Commander, 1st CG District
To: Commandant (PE)

Forwarded for Headquarters' consideration.

R. A. TAYLOR
By direction

O.K. R.A.T.

No. 56

WATTS, Alan B. 209-630 BM1c

CG DEPOT 01-049 Rockland, Maine 24 December, 1946.

1200/19 - Rptd back fm twenty (20) days of annual authorized leave of absence.

06-D

Art 1936(3) Regs.

J. M. JOSEPH Lt., USCG

Commanding Officer

REPORT OF CHANGE IN PERSONNEL

UNITED STATES COAST GUARD

NAVCG-2599 (REV. 6-45)

No._____

SURNAME, FIRST NAME, INITIAL	SERVICE No.	PRESENT RANK OR RATING
WATTS, Alan B.	209-630	BM1/c

MAJOR UNIT NAME	MINOR UNIT NAME	LOCATION
CG GROUP, Rockland, Maine	Moose Peak Lt. & L/B Station	West Jonesport, Me.

MAJOR UNIT ITEM No. OR VESSEL'S ASSIGNED DISTRICT	MINOR UNIT ITEM No.	DATE
	01-023	19 December, 1946

TIME 1200
DATE 12/19/46

REPORTED FROM: 20 days annual leave of absence
FOR

DUTY CODE NO. 29 - 30 AUTH: Art. 1938(1) Reg. USCG

TIME
DATE

TRANSFERRED TO:
FOR

AUTH:

CHANGED IN {RANK / RATING} FROM_____ TO_____ EFFECTIVE_____

DUTY CODE NO. AUTH:

OTHER CHANGES (SPECIFY)

DUTY CODE NO. AUTH:

Donald C. Coffin, BM1/c
(Commanding)

SPACE BELOW IS FOR HEADQUARTERS' USE ONLY

Enlisted Personnel				
Rate	Pay Grade	District	Foreign Domestic	Duty

Officer Personnel			
District	Sea Shore	Foreign Domestic	Duty

Records	
Posting	Coding

Machine Accounting
Punched_____
Verified_____

☆ U. S. GOVERNMENT PRINTING OFFICE 16—40355-2

REPORT OF CHANGE IN PERSONNEL

UNITED STATES COAST GUARD

NAVQS-2599 (REV. 6-45)

No._____

SURNAME, FIRST NAME, INITIAL	SERVICE No.	PRESENT RANK OR RATING
WATTS, Alan B.	209-630	BM1/c
MAJOR UNIT NAME	**MINOR UNIT NAME**	**LOCATION**
CG GROUP, Rockland, Maine	Moose Peak Lt. & L/B Station	West Jonesport, Me.
MAJOR UNIT ITEM No. OR VESSEL'S ASSIGNED DISTRICT	**MINOR UNIT ITEM No.**	**DATE**
	01-023	28 November, 1946

TIME

DATE

REPORTED FROM:

FOR

DUTY CODE NO. AUTH:

TIME

DATE

TRANSFERRED TO:

FOR

AUTH:

CHANGED IN {RANK / RATING} FROM_____ TO_____ EFFECTIVE_____

DUTY CODE NO. AUTH:

OTHER CHANGES (SPECIFY)

1200, this date, departed this unit on 20 days annual leave of absence.

DUTY CODE NO. AUTH: Art. 1988(1) Reg. USCG

Donald C. Coffin, BM1/c

By direction (*Commanding*)

SPACE BELOW IS FOR HEADQUARTERS' USE ONLY

Enlisted Personnel				
Rate	Pay Grade	District	Foreign Domestic	Duty

Officer Personnel			
District	Sea Shore	Foreign Domestic	Duty

Records	
Posting	Coding

Machine Accounting
Punched_____
Verified_____

☆ U. S. GOVERNMENT PRINTING OFFICE 16—40355-2

No. 81

WATTS, Alan B. 209-630 BM1c

CG DEPOT 01-049 Rockland, Me. 27 November, 1946

1200/27 - Departed on twenty (20) days annual authorized leave of absence.

06-D

Art. 1936(3) Regs.

J. M. JOSEPH Lt., USCG

Commanding Officer

ORT OF CHANGE IN PERSONNE

UNITED STATES COAST GUARD
NAVCG-2599 (REV. 6-45)

No.

SURNAME, FIRST NAME, INITIAL	SERVICE No.	PRESENT RANK OR RATING
WATTS, Alan B.	209-630	BM1/c

MAJOR UNIT NAME	MINOR UNIT NAME	LOCATION
CG GROUP, Rockland, Maine	Petit Manan Light Station	Milbridge, Maine
MAJOR UNIT ITEM No. OR VESSEL'S ASSIGNED DISTRICT	MINOR UNIT ITEM No. Moose Peak L & L/B Station	West Jonesport, Main
	01-037 01-034	22 July, 1946

TIME
DATE — REPORTED FROM:
FOR

DUTY CODE NO. — AUTH:

TIME
DATE — TRANSFERRED TO:
FOR

AUTH:

CHANGED IN {RANK / RATING} FROM _____ TO _____ EFFECTIVE _____

DUTY CODE NO. — AUTH:

OTHER CHANGES (SPECIFY)

1130, this date, departed Petit Manan Light Station for Moose Peak Light and Lifeboat Station, temporary duty completed.

1300, this date, reported Moose Peak Light and Lifeboat Station from temporary duty at Petit Manan Light Station.

DUTY CODE NO. — AUTH:

29 & 30 — V/O, Group C/O — By direction

Donald C. Coffin, BM1/c
(Commanding)

SPACE BELOW IS FOR HEADQUARTERS' USE ONLY

Enlisted Personnel				
Rate	Pay Grade	District	Foreign Domestic	Duty

Officer Personnel			
District	Sea Shore	Foreign Domestic	Duty

Records	
Posting	Coding

Machine Accounting
Punched
Verified

☆ U. S. GOVERNMENT PRINTING OFFICE 16—40355-2

REPORT OF CHANGE IN PERSONNEL

UNITED STATES COAST GUARD

NAVCG-2599 (REV. 6-45)

No._____

SURNAME, FIRST NAME, INITIAL	SERVICE No.	PRESENT RANK OR RATING
WATTS, Alan B.	209-650	BM1/c

MAJOR UNIT NAME	MINOR UNIT NAME	LOCATION
CG GROUP, Rockland, Maine	Petit Manan Light Station	Milbridge, Maine

MAJOR UNIT ITEM No. OR VESSEL'S ASSIGNED DISTRICT	MINOR UNIT ITEM No.	DATE
	01-037	2 July, 1946

TIME
DATE
REPORTED FROM:
FOR

DUTY CODE NO.
AUTH:

TIME
DATE
TRANSFERRED TO:
FOR

AUTH:

CHANGED IN {RANK / RATING} FROM_____ TO_____ EFFECTIVE_____

DUTY CODE NO.
AUTH:

OTHER CHANGES (SPECIFY)

Change status of above named man to read "on temporary duty at Petit Manan Light Station from Moose Peak Light Station" in lieu of "on temporary duty at Petit Manan Light Station from Great Wass Island L/B Station".

Detached from Great Wass Island L/B Station and attached to Moose Peak Light Station effective 1000, above date.

DUTY CODE NO.
30

AUTH:
Comdr. 1CGD/L 18 June, 1946(can-691)

Donald C. Coffin, BM1/c
(Commanding)

SPACE BELOW IS FOR HEADQUARTERS' USE ONLY

Enlisted Personnel				
Rate	Pay Grade	District	Foreign Domestic	Duty

Officer Personnel			
District	Sea Shore	Foreign Domestic	Duty

Records	
Posting	Coding

Machine Accounting
Punched_____
Verified_____

☆ U. S. GOVERNMENT PRINTING OFFICE 16—40355-2

REPORT OF CHANGE IN PERSONNEL
UNITED STATES COAST GUARD
NAVCG-2599 (REV. 6-45)

No.

SURNAME, FIRST NAME, INITIAL	SERVICE No.	PRESENT RANK OR RATING
WATTS, Alan B.	209-630	BM1/c

MAJOR UNIT NAME, ITEM NO. OR VESSEL'S ASSIGNED DISTRICT	MINOR UNIT NAME	LOCATION
CG GROUP, West Jonesport, Maine	Great Wass Island L/B Station Petit Manan Light Station	West Jonesport, Me. Milbridge, Maine

TIME
DATE

REPORTED FROM:
FOR

DUTY CODE NO. AUTH:

TIME
DATE

TRANSFERRED TO:
FOR

AUTH:

CHANGED IN {RANK / RATING} FROM _____ TO _____ EFFECTIVE _____

DUTY CODE NO. AUTH:

OTHER CHANGES (SPECIFY)

1200, this date, departed Great Wass Island L/B Station for temporary duty at Petit Manan Light Station

1400, this date, reported at Petit Manan Light Station for temporary duty from Great Wass Island L/B Station

DUTY CODE NO. AUTH:

Donald C. Coffin, CBM
(Commanding)

29 & 30 V/O, Group C/O

SPACE BELOW IS FOR HEADQUARTERS' USE ONLY

Enlisted Personnel				
Rate	Pay Grade	District	Foreign Domestic	Duty

Officer Personnel			
District	Sea Shore	Foreign Domestic	Duty

Records	
Posting	Coding

Machine Accounting
Punched _____
Verified _____

☆ U. S. GOVERNMENT PRINTING OFFICE 16—40355-2

REPORT OF CHANGE IN PERSONNEL
UNITED STATES COAST GUARD
NAVCG-2599 (REV. 6-45)

No._____

SURNAME, FIRST NAME, INITIAL	SERVICE No.	PRESENT RANK OR RATING
Watts, Alan H.	(209-630)	BM 1c.
MAJOR UNIT NAME	**MINOR UNIT NAME**	**LOCATION**
CG Group West Jonesport, Maine	Great Wass Island L/S Station	W. Jonesport, Me.
MAJOR UNIT ITEM No. OR VESSEL'S ASSIGNED DISTRICT	**MINOR UNIT ITEM No.**	**DATE**
	67-033	

TIME
DATE — REPORTED FROM:
FOR

DUTY CODE NO. — AUTH:

TIME
DATE — TRANSFERRED TO:
FOR

AUTH:

CHANGED IN {RANK / RATING} FROM_____ TO_____ EFFECTIVE_____

DUTY CODE NO. — AUTH:

OTHER CHANGES (SPECIFY)

1130. This Date, reported this date from 10 days leave of absence

DUTY CODE NO. — AUTH: Art. 1935 Reg. Donald C. Coffin CBM
(Commanding)

SPACE BELOW IS FOR HEADQUARTERS' USE ONLY

Enlisted Personnel				
Rate	Pay Grade	District	Foreign Domestic	Duty

Officer Personnel			
District	Sea Shore	Foreign Domestic	Duty

Records	
Posting	Coding

Machine Accounting
Punched_____
Verified_____

☆ U. S. GOVERNMENT PRINTING OFFICE 16—40355-2

REPORT OF CHANGE IN PERSONNEL

UNITED STATES COAST GUARD

NAVCG-2599 (REV. 6-45)

No._____

SURNAME, FIRST NAME, INITIAL	SERVICE No.	PRESENT RANK OR RATING
WATTS, Alan B.	209-630	BM1/c
MAJOR UNIT NAME	**MINOR UNIT NAME**	**LOCATION**
CG GROUP, West Jonesport, Maine	Great Wass Island L/B Station	West Jonesport, Me.
MAJOR UNIT ITEM No. OR VESSEL'S ASSIGNED DISTRICT	**MINOR UNIT ITEM No.**	**DATE**
	01-031	14 May, 1946

TIME

DATE

REPORTED FROM:

FOR

DUTY CODE NO.

AUTH:

TIME

DATE

TRANSFERRED TO:

FOR

AUTH:

CHANGED IN {RANK / RATING} FROM_____ TO_____ EFFECTIVE_____

DUTY CODE NO.

AUTH:

OTHER CHANGES (SPECIFY)

1130, this date, departed on 10 days leave of absence

DUTY CODE NO.

29

AUTH:

Art. 1938 Reg. USCG

Donald C. Coffin, CBM

(Commanding)

SPACE BELOW IS FOR HEADQUARTERS' USE ONLY

Enlisted Personnel				
Rate	Pay Grade	District	Foreign Domestic	Duty

Officer Personnel			
District	Sea Shore	Foreign Domestic	Duty

Records	
Posting	Coding

Machine Accounting
Punched_____
Verified_____

☆ U. S. GOVERNMENT PRINTING OFFICE 16—40355-2

REPORT OF CHANGE IN PERSONNEL
UNITED STATES COAST GUARD
NAVCG-2599 (REV. 6-45)

No._____

SURNAME, FIRST NAME, INITIAL	SERVICE NO.	PRESENT RANK OR RATING
WATTS, Alan B.	209-630	BM1c

MAJOR UNIT NAME	UNIT	LOCATION
CG GROUP, West Jonesport, Maine	Nash Island Light Station Great Wass Island L/B Sta	Sec, Addison, Me. West Jonesport, Me.

MAJOR UNIT ITEM No. OR VESSEL'S ASSIGNED DISTRICT	MINOR UNIT ITEM No.	DATE
	01-034 01-031	13 April, 1946

TIME
DATE
REPORTED FROM:
FOR

DUTY CODE NO.
AUTH:

TIME
DATE
TRANSFERRED TO:
FOR

AUTH:

CHANGED IN {RANK / RATING} FROM_____ TO_____ EFFECTIVE_____

DUTY CODE NO.
AUTH:

OTHER CHANGES (SPECIFY)

1100, this date, departed Nash Island Light Station for Great Wass Island L/B Station temporary duty completed.

1130, this date, reported Great Wass Island L/B Station from temporary duty at Nash Island Light Station.

DUTY CODE NO.
30- 29

AUTH:
V/P, Group C/O

Donald C. Coffin, CBM
(Commanding)

SPACE BELOW IS FOR HEADQUARTERS' USE ONLY

Enlisted Personnel				
Rate	Pay Grade	District	Foreign Domestic	Duty

Officer Personnel			
District	Sea Shore	Foreign Domestic	Duty

Records	
Posting	Coding

Machine Accounting
Punched_____
Verified_____

☆ U. S. GOVERNMENT PRINTING OFFICE 16—40355-2

REPORT OF CHANGE IN PERSONNEL

UNITED STATES COAST GUARD

NAVCG-2599 (REV. 6-44)

SURNAME, FIRST NAME, INITIAL	SERVICE No.	PRESENT RANK OR RATING
WATTS, Alan B.	209-650	BM1c

MAJOR UNIT NAME	MINOR UNIT NAME	LOCATION
CG GROUP, West Jonesport, Maine	Great Wass Island L/B Station Nash Island Light Station	West Jonesport, Maine South Addison, Maine
UNIT ITEM NO. OR VESSEL'S ASSIGNED DISTRICT		
01-031 01-034		8 April, 1946

TIME
DATE
REPORTED FROM:
FOR

DUTY CODE NO.
AUTH:

TIME
DATE
TRANSFERRED TO:
FOR

AUTH:

CHANGED IN {RANK / RATING} FROM _____ TO _____ EFFECTIVE _____

DUTY CODE NO.
AUTH:

OTHER CHANGES (SPECIFY)

1000, this date, departed Great Wass Island L/B Station for temporary duty at Nash Island Light Station as relief keeper.

1130, this date, reported at Nash Island Light Station for temporary duty from Great Wass Island L/B Station

DUTY CODE NO.
29 30

AUTH:
V/O, Group C/O

Donald C. Coffin, CBM
(*Commanding*)

SPACE BELOW IS FOR HEADQUARTERS' USE ONLY

Enlisted Personnel				
Rate	Pay Grade	District	Foreign Domestic	Duty
II	XIV	XVII	XX	XXI

Officer Personnel			
District	Sea Shore	Foreign Domestic	Duty
XI	XIV	XV	XVIII

Records	
Posting	Coding

Machine Accounting
Punched _____
Verified _____

U. S. GOVERNMENT PRINTING OFFICE 16—40355-1

REPORT OF CHANGE IN PERSONNEL

UNITED STATES COAST GUARD

NAVCG-2599 (REV. 6-44)

SURNAME, FIRST NAME, INITIAL	SERVICE No.	PRESENT RANK OR RATING
WATTS, Alan B.	209-630	BM1/c

MAJOR UNIT NAME	MINOR UNIT NAME	LOCATION
CG GROUP, West Jonesport, Maine	Great Wass Island L/B Station	West Jonesport, Maine

UNIT ITEM No. OR VESSEL'S ASSIGNED DISTRICT	DATE
01-031	14 November, 1945

TIME
DATE
REPORTED FROM:
FOR

DUTY CODE NO. AUTH:

TIME
DATE
TRANSFERRED TO:
FOR

AUTH:

CHANGED IN {RANK / RATING} FROM _____ TO _____ EFFECTIVE _____

DUTY CODE NO. AUTH:

OTHER CHANGES (SPECIFY)

1130, this date, reported from 7 days annual and 3 days reenlistment leave of absence.

DUTY CODE NO. 30 AUTH: Art. 1938(1) Reg. Art. 1938(3) Reg.

Donald C. Coffin, CBM
(Commanding)

SPACE BELOW IS FOR HEADQUARTERS' USE ONLY

Enlisted Personnel				
Rate	Pay Grade	District	Foreign Domestic	Duty
II	XIV	XVII	XX	XXI

Officer Personnel			
District	Sea Shore	Foreign Domestic	Duty
XI	XIV	XV	XVIII

Records	
Posting	Coding

Machine Accounting
Punched
Verified

U. S. GOVERNMENT PRINTING OFFICE 16—40355-1

REPORT OF CHANGE IN PERSONNEL

UNITED STATES COAST GUARD

NAVCG-2599 (REV. 6-44)

SURNAME, FIRST NAME, INITIAL	SERVICE No.	PRESENT RANK OR RATING
WATTS, Alan B.	209-630	B.M.1c

MAJOR UNIT NAME	MINOR UNIT NAME	LOCATION
CG GROUP, West Jonesport, Maine	Great Wass Island L/B Sta.	West Jonesport, Maine

UNIT ITEM No. OR VESSEL'S ASSIGNED DISTRICT: 01-031

DATE: 8 November, 1945

TIME

DATE

REPORTED FROM:

FOR

DUTY CODE NO.

AUTH:

TIME

DATE

TRANSFERRED TO:

FOR

AUTH:

CHANGED IN {RANK / RATING} FROM B.M.1/c(Pro.) TO B.M.1/c Permanent EFFECTIVE 3 November, 1945

DUTY CODE NO. 29

AUTH: ALCOAST 031400/143 November, 1945

OTHER CHANGES (SPECIFY)

Above named man is considered morally, phisically and proffessionally qualified for advancement to Boatswains' Mate First Class (Permanent)

Above named man has served as B. M. 1/c (Pro.) since 27 January, 1943.

DUTY CODE NO.

AUTH: DONALD C. COFFIN, CDR
(Commanding)

SPACE BELOW IS FOR HEADQUARTERS' USE ONLY

Enlisted Personnel				
Rate	Pay Grade	District	Foreign Domestic	Duty
II	XIV	XVII	XX	XXI

Officer Personnel			
District	Sea Shore	Foreign Domestic	Duty
XI	XIV	XV	XVIII

Records	
Posting	Coding

Machine Accounting
Punched
Verified

U. S. GOVERNMENT PRINTING OFFICE 16—40355-1

WATTS Alan B. (209-630) BM1/c

CG GROUP West Jonesport, Me. 3 November, 1945

Great Wass Island L/B Station (01-031)

1130, this date, departed on ten (10) days leave of absence,(7 days annual and 3 days reenlistment)

29
Art. 1938(1) 42) Reg., USCG

Donald C. Coffin, CBM

Commanding Officer

WATTS, Alan B. 209-630 Bm 1c.

CG GROUP, W. Jonesport, Maine Great Wass Island L/B Sta. W. Jonesport, Maine
17 October, 1945

xxxxxxx

1100, this date, reported from five (5) days annual leave.

29
Art. 1938 (1) Reg.

Donald C. Coffin, CBM

WATTS Alan B. 209-630 B.M.1c

GROUP, PORT CLYDE, ME.
Burnt Island LB. Station PORT CLYDE, MAINE 2 April, 1945

(01-074)

GROUP, PORT CLYDE, MAINE
FIRST NAVAL DISTRICT

0830 this date: Tr. to SCGO, Rockland, Me. for fur. tr. to Great Wass Island Lifeboat Station

29

Verb.Orders, SCGO, Rockland, Me.
31 March, 1945

WILSON B. CARTER, C.B.M.

COMMANDING OFFICER.

NCG 2500
(Rev. June, 1942)

ENLISTMENT CONTRACT

UNITED STATES { COAST GUARD / CO[redacted]

RE-ENLISTMENT OF WATTS, Alan Brennen (Full name, surname to left); (209-630) (Service number); $125.40 (Pay per month)

Accepted for enlistment at PORT CLYDE STATION, PORT CLYDE, MAINE; B.M.1c (Rating in which enlisted)

Enlisted at PORT CLYDE STATION, PORT CLYDE, MAINE; 5 May, 1944 (Date of enlistment)

Transferred to

Occupation B.M.1c Citizenship * NB If naturalized, place and date of naturalization Certificate No.

Date of birth 1 January, 1917 Place of birth Jonesboro, Maine.

Home address Tenants Harbor (Street and number) (Town) (County) Maine (State)

Married or single Married Name and address of next of kin or legal guardian Louise Watts.

Wife (Relationship) Tenants Harbor, Maine. (Address)

Continuous Service Certificate (Number) Previous service { Coast Guard / ~~Reserve~~ } 6 (Years) 2 (Months) 20 (Days)

First enlisted 15 February, 1938 (Date) at Burnt Island LB. Station. (Place) and was last discharged 4 May, 1944 (Date) from CG-38668 ATTACHED TO PORT CLYDE STATION (Unit)

with HONORABLE (Character) discharge as B.M.1c (Rate) No. A68652

Previous Navy service None (Years) (Months) (Days) Previous Marine Corps service None (Years) (Months) (Days)

Previous Army service None (Years) (Months) (Days) Age 27 years 4 months.

Height 5 feet 11 inches. Weight 165 pounds.

Eyes Blue Sex male Hair Lt. Brown Complexion Light Color White

Personal characteristics None marks, etc.

For and in consideration of the pay or wages due to the ratings which may from time to time be assigned me during the continuance of my service, I agree to and with J. R. Holmes of the United States Coast Guard, as follows:

First: To enter the Coast Guard of the United States and to report to such station or vessel as I may be ordered to join, and to the utmost of my power and ability discharge my several services or duties and be in everything conformable and obedient to the several requirements and lawful commands of the officers who may be placed over me.

Second: I oblige and subject myself to serve { FOUR years from 5 May, 1944 / during minority until , 1 } unless sooner discharged by proper authority.

* Citizenship—Use expressions "NB" for native born; "NZ" for naturalized; "NPI" for native of Philippine Islands; "NPR" for native of Puerto Rico.

16—8420-2

In the event of war or National emergency declared by the President to exist during my term of service, I oblige and subject myself to serve until 6 months after the end of the war or National emergency if so required by the Secretary of the Navy unless I voluntarily reenlist or extend my enlistment. I understand that when so detained, I am not entitled to enlistment allowance and that in time of war the addition of one-quarter pay as specified in the Act of July 11, 1941, is not applicable.

I also oblige myself, during such service, to comply with and be subject to such laws, regulations, and discipline for the government of the Coast Guard as are or shall be established by the Congress of the United States or other competent authority, and to submit to treatment for the prevention of smallpox, typhoid (typhoid prophylaxis), and to such other preventive measures as may be considered necessary by proper authorities.

Third: I am of the legal age to enlist; I have never deserted from the United States Coast Guard, Navy, Army, or Marine Corps; I have never been discharged from the United States Service or other service on account of disability or through sentence of either civilian or military court; and I have never been discharged from any service, civil or military, except with good character and for the reasons given by me to the recruiting officer prior to enlistment. I am not a member of the Coast Guard Reserve, Naval Reserve, Naval Militia, Marine Corps Reserve, National Guard, or Army Reserve.

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

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

Oath of Allegiance: I, Alan Brennen Watts do solemnly swear (or affirm) that I will bear true faith and allegiance to the United States of America, and that I will serve them honestly and faithfully against all their enemies whomsoever, and that I will obey the orders of the President of the United States and the orders of the officers appointed over me, according to the laws of the United States and the regulations governing the Coast Guard.

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

Alan Brennen Watts

Alan Brennen Watts

(Signature in own handwriting, surname to right)

Subscribed and sworn to before me this 5th day of May, A. D. 1944

J. R. Holmes

J. R. Holmes, Lieut. (jg)

(Commanding officer, notary public, or other officer qualified to administer oaths)

Commanding Officer.

(Title)

Citizenship substantiated and contract perfected.

J. R. Holmes

J. R. Holmes.

Lieut. (jg), *U. S. C. G., Enlisting Officer.*

EXTENSION OF ENLISTMENT CONTRACT

(Unit) (Place) (Date)

Enlistment extended until ..... by reason of

.....

under authority of .....

.....

.....

(Signature of man)

.....

(Signature of commanding officer)

16—8420-2 U. S. GOVERNMENT PRINTING OFFICE

Form 2500-C
TREASURY DEPARTMENT
U. S. COAST GUARD
Revised July 1935

SERVICE RECORD

RECORD OF WATTS, Alan B. (209-630)
(Full name, surname to the left) (Service No.)

1. TRANSFERS

Departed from—			Reported to—		
Unit	Date	Signature	Unit	Date	Signature
CG-38668	9-22-44	Lawson B. Carter	BURNT ISL.LB.ST	9-22-44	Lawson B. Carter
BURNT ISL.LB.STA.	4-2-45		CG GROUP, JNSPT	4-3-45	
CG GROUP, JNSPT	6-30-46		CG GROUP, Rockland	6-30-46	
Group, SW Hbr., Me.	4 May, 1948	Honorable Discharge, by reason expiration full term of enlistment.			J. M. JOSEPH, Lieut., USCG

2. CHANGES IN RATING

Unit	Rated or disrated to—	Date	Signature
CG GROUP, W.JONESPORT	B.M.1/c(Permanent)	11-3-45	
Group, Rockland, Me.	CR fm BM1c to BM1c(L) H/L 2/27/47 (PE-C)(73)		XO, By direction
CG Group, SW Hbr., Me.	CR fm BM1c(L) to BM1(L) Alc. 19-48	5-2-48	Lieutenant, USCG

2—13678

RECORD OF WATTS, Alan B. (209-630)

(Full name, surname to the left) (Service No.)

3. EFFICIENCY MARKS

SCALE OF MARKS: 4.0, Perfect; 3.5 to 3.9, Excellent; 3.0 to 3.4, Good; 2.5 to 2.9, Satisfactory; 2.0 to 2.4, Indifferent; 1.0 to 1.9, Poor; 0.0 to 0.9, Bad

Date	Proficiency in rating	Conduct	Seaman ~~Sobriety~~ ship	Ability as leader of men	Mech. ~~Health~~ Ability	Adaptability for warrant grade	Vessel or station	Signature
6-30-44	3.5	4.0	3.5	3.5	3.3		CG-38668	[illegible]
9-30-44	3.5	4.0	3.5	3.5	3.3		Burnt Isl.LB.Sta	Lyons B. Carter
12-31-44	3.5	4.0	3.6	3.5	3.4		Burnt Isl.LB.Sta.	Lyons B Carter
3-31-45	3.4	4.0	3.4	3.2	3.2		Burnt Isl.LB.Sta	Lyons B Carter, CBM
4-2-45	3.4	4.0	3.4	3.2	3.2		Burnt Isl.LB.STA	Lyons B Carter, CBM.
6-30-45	3.5	4.0	3.5	3.5	3.3		CG.GROUP. JNSPT	[illegible]
9-30-45	3.6	4.0	3.6	3.6	3.3		CG GROUP, JNSPT	[illegible]
12-31-45	3.6	4.0	3.6	3.6	3.3		CG Group. JNSPT	[illegible]
3-31-46	3.6	4.0	3.6	3.6	3.4		CG GROUP,JNSPT	[illegible]
6-30-46	3.6	4.0	3.6	3.6	3.4		CG GROUP,JNSPT	[illegible]
9-30-46	3.6	4.0	3.6	3.6	3.4		Group, Rockland.	[illegible] XO,ByDir
12/31/46	3.6	4.0	3.6	3.6	3.4		Group,Rockland,Me	[illegible] XO,Bydir
3/31/47	3.6	4.0	3.6	3.6	3.4		Group,Rockland,	[illegible] XO, Bydir
6/30/47	3.6	4.0	3.6	3.6	3.4		Group,Rockland,Me	[illegible] Lt,CO
9/30/47	3.6	4.0	3.6	3.6	3.4		Group,Rockland,Me	[illegible] ChBosn
12/31/47	3.6	4.0	3.6	3.6	3.4		Group, SW Hrbr Me.	[illegible] By dir It.CO
3/31/48	3.6	4.0	3.6	3.6	3.4		Group, SW Hbr., Me.	[illegible] Lieut.
5-4-48	3.6	4.0	3.6	3.6	3.4		Group, SW Hbr., Me	[illegible] Lieut
Average	3.572	4.0					Group, SW Hbr., Me	[illegible] Lieut.

Upon receipt of enlistment record it shall be checked to see that previous marks have been entered. The last unit at which service is rendered will be held responsible for the completeness of the marks.

4. SWIMMING QUALIFICATIONS

Unit	Date of qualification	Signature

U. S. GOVERNMENT PRINTING OFFICE 2—13678

Form 2500-C
TREASURY DEPARTMENT
U. S. COAST GUARD
Revised July 1935

RECORD OF WATTS, Alan B. (209-630)
(Full name, surname to the left) (Service No.)

5. TRIALS BY COAST GUARD COURTS AND RESULT

Unit	Date	REMARKS: Kind of court, charge, sentence of court, and action of reviewing authority to be shown in this column	Signature

6. MERITORIOUS CONDUCT

(Award of medals, citations, Headquarters commendation, honorable discharge button, etc.)

Unit	Date	Remarks	Signature
CG GROUP, INSPT.	10-28-45	"ENTITLED TO WEAR AMERICAN CAMPAIGN RIBBON AUTH. ALNAV 200101/351 October, 1945	
Group, SW Hbr., Me.	5-4-48	Entitled to Wear World War II Victory Ribbon	J. M. Joseph Lieut.

2—13678

RECORD OF WATTS, Alan B. (209-630)

(Full name, surname to the left) (Service No.)

7. SPECIAL QUALIFICATIONS

Unit	Date	Proficient in—	Signature

8. DETAILS

(Will include inter-unit transfers)

Unit	Date From—	Date To—	Duty	Signature
Great Wass Isl.L?B Sta.	4-3-45	4-8-46	~~Gen~~ Gen Duty	A.C. Coffin, Com C/S
Nash Island Light Station	4-8-46	4-13-46	Light Keeper	A.C. Coffin, Com C/S
Great Wass Island LB Sta	4-13-46	6-28-46	Gen Duty	A.C. Coffin, Com C/S
Petit Manan Light Sta	6-28-46	7-22-46	Light Keeper	A.C. Coffin, Bos 1st By dir
Moose Peak L & L/B Sta	7-22-46		Gen Duty	A.C. Coffin, Bos 1st By dir

U. S. GOVERNMENT PRINTING OFFICE 2—13078

RECORD OF WATTS, Alan B.
(Full name, surname to left)

209-630
(Service Number)

LEAVE RECORD

ACCRUED CREDITS			LEAVE TAKEN					BAL. DUE	PERIODS FOR WHICH LEAVE DOES NOT ACCRUE				CO'S SIGNATURE
REASON	DATE	NO DAYS	FROM	TO	REASON	NO DAYS	ADV. LV.	NO. DAYS	FROM	TO	REASON	NO DAYS	
~~I.C.~~	~~9/1/46~~	~~28~~						28					XO by dir
		20	Nov 27	Dec19	an lv	20	--	8					
			1288	1288									
I.C.	9/1/46	60	Nov 27	Dec19	An Lv	20	--	40					XO, By
~~I.C.~~	~~1/1/47~~	~~50~~	1100	0900				50					XO,By d
			6/12/47	6/18/47	REG	5							Lt.,C
ANCR	6/30/47	25						60					Lt
BBF	7/1/47	60	1200	0900									Lt
			11/11/47	12/12/47	REG	30							Lie
Hon Dis.	5-4-48	26						56					Lieut
Elects cash compensation for 56 days leave 00 days carried over to new leave records													Lt.

Form 2500-C
TREASURY DEPARTMENT
U. S. Coast Guard
Revised July 1935

RECORD OF WATTS, Alan B. (209-630)
(Full name, surname to the left) (Service No.)

9. LEAVE ACCOUNT
WITH PAY

Unit	Date Departed	Date Returned	Number of days	Balance Annual	Balance Reenlist	Signature
CG-38668	5 May, 1944 CREDIT			30	30	
CG-38668	5-19-44	5-30-44	10	20	30	
Burnt Isl.LB. Sta.	11-6-44	11-14-44	7	18	25	
Wass Isl.LB Sta.	CREDIT 5/5/45		30	30	25	
Wass Isl.LB Sta	10-11-45	10-17-45	5	25	25	
CG GROUP, JNSPT	11-3-45	11-14-45	10	18	22	
CG GROUP, JONESPORT	CREDIT 5/5/46		30	30	22	
CG GR.,W.JONESPORT	5-14-46	5-25-46	10	20	22	

2—13678

RECORD OF WATTS, Alan B. (209-630)

(Full name, surname to the left) (Service No.)

10. ABSENT FROM DUTY

(On account of sickness or injury due to own misconduct. Without leave (including overleave, desertion, imprisonment under civil arrest resulting in conviction), and absence from duty (confinement) while awaiting trial by a Coast Guard court resulting in a conviction, or while serving a sentence.) (Absences less than 24 hours not to be entered.) (Show inclusive dates.)

Unit	Months	Days	From—	To—	Remarks	Signature
PORT CLYDE STATION	NO UNAUTHORIZED ABSENCES WHILE ATTACHED TO THIS UNIT					Fiske B Carter BM
CG GR., W. JONESPORT	NO DEDUCTIBLE TIME WHILE ATTACHED THIS UNIT					[illegible] BM 2c
Group, SW Hbr., Me.	NO DEDUCTIBLE TIME WHILE ATTACHED THIS UNIT					J. M. Joseph Lieut.

11. EXTENSION OF ENLISTMENT

Unit	Period	Reason	Signature

PEA-E 32

12. ON DISCHARGE

COMPARED NO. 10

Date 4 May, 1948 Place Southwest Harbor, Maine Serial No.

Kind of discharge Honorable Discharge Authority for Art. 589(1) Regs.

Discharged on account of expiration of enlistment

Is ..... recommended for reenlistment.

(If "not," so state, and show reason)

SIGNATURE J. M. JOSEPH

13. ON DESERTION

Unit	Date	Remarks	Signature

U. S. GOVERNMENT PRINTING OFFICE 2—13678

Form 2500-C
TREASURY DEPARTMENT
U. S. COAST GUARD
Revised July 1935

RECORD OF WATTS, Alan B. (209-630)
(Full name, surname to the left) (Service No.)

14. ON RETIREMENT

Unit	Date	Cause	Authority	Signature

15. ON DEATH

Unit	Date	Cause	Place of burial	Disposition of effects	Was death in line of duty	Signature

NAV. S. AND A. FORM 550

MUSTERING OUT PAYMENT

209-630 (File or service No.) WATTS (Surname) Alan (First name) B. (Initial) BM1(L), USCG (Rank or rating and branch of service)

4 May 1948 (Date discharged or released from active duty) Depot, Southwest Harbor, Maine (Activity from which discharged) 60 days or more (Length of service—Enter (less than 60 days) or (60 days or more))

Does service record show service outside of continental limits of United States or in Alaska? Enter Yes or No No

COMMANDING OFFICER'S CERTIFICATE:

I certify that the above-named person is being discharged or released from active duty, that such person is entitled to payment under the MUSTERING OUT PAYMENT ACT OF 1944, and that the above information is correct.

(Sign original only)

J. M. JOSEPH, Lieut., USCG
(Name and signature of officer authorized to sign in accordance with article 2025(3) NR)

VETERAN'S CERTIFICATE:

I hereby certify that I have not made previous application for mustering-out payment under the MOP Act of 1944. I am aware of the fact that making application more than once is a criminal offense under the United States Criminal Code.

Have you served outside the continental limits of United States or in Alaska? No. (Enter Yes or No)

Alan B. Watts
(Signature of applicant)

ADDRESS TO WHICH CHECK(S) ARE TO BE SENT:
(Omit address if service is LESS than 60 days)

Moose Peak Lt & Lifeboat Sation (Number) (Street)

West Jones (City) (Zone) Maine (State)

DISBURSING OFFICER'S PAYMENT DATA

$200.00 Lump Sum Paid $100.00 on 400-16651 (Public voucher) 115,986 (Check number) 5/13/48 (Date)

M S OIE ADO 16-467
(Type name and symbol No. of disbursing officer making initial payment)

16—39039-1

MUSTERING OUT PAYMENT DIVISION DATA

TRIPLICATE

HAS SIGNIFIED INTENTION {To / ~~Not to~~} REENLIST NEXT DAY.

Certified to be correct upon termination of service 4 May, 19 48

J. M. JOSEPH, Lieut., USCG
Commanding Officer—Officer in Charge.

U. S. GOVERNMENT PRINTING OFFICE 2—13678

RECORD OF WATTS, Alan B. (209-630)
(Full name, surname to the left) (Service No.)

14. ON RETIREMENT

Unit	Date	Cause	Authority	Signature

15. ON DEATH

Unit	Date	Cause	Place of burial	Disposition of effects	Was death in line of duty	Signature

16. RECORD OF SERVICE

Creditable Coast Guard service during this enlistment:

4 (Years) 0 (Months) 0 (Days)

(Notations under article 10 to be considered when executing this article.)

17. CERTIFICATE UPON TERMINATION OF SERVICE

Monthly rate of pay when discharged, $ 155.25

The within-named man has been furnished travel allowance amounting to $ 5.15

at the rate of ..... cents per mile from Port Clyde, Maine to Southwest Harbor, Maine and paid $ 604. in full to date of discharge. Name of pay officer M. J. SNOWDEN, CHIEF PAY CLERK, ACO 1CGD ~~M. S. OLE, CHIEF PAY CLERK, USCG, ADO 18,467~~

Address subsequent to discharge will be:

O'Brien Ave Street,

Machias City, Maine State.

HAS SIGNIFIED INTENTION {To / ~~Not to~~} REENLIST NEXT DAY.

Certified to be correct upon termination of service 4 May, 19 48

J. M. JOSEPH, Lieut., USCG
Commanding Officer—Officer in Charge.

U. S. GOVERNMENT PRINTING OFFICE 2—13678

UNITED STATES COAST GUARD
Washington 25, D. C.

BOSTON DISTRICT
RECEIVED
JAN 27 1947
U.S. COAST GUARD

Address reply to
THE COMMANDANT (PE-E)
Refer to file: CG-73-783

23 January, 1947

From: Commandant (PE-PR)

To: CG Group, Rockland, Maine

Subj: Alan B. Watts (209-630)

The following information is furnished in accordance with your request for the purpose of helping you complete your "Claim for Settlement for Unused Leave":

Date enlisted	Prior to 8 Sept. 1939
Date assigned active duty	Prior to 8 Sept. 1939
Date discharged	4 May, 1944
Place discharged	Port Clyde Station.

Records show that during the above period of service you were:

Absent without leave for	0 days
Absent over leave for	0 days
Confined as result of Court-Martial for	0 days
On authorized leave for a total of	132 days

(If you had more than 48 months active service, the additional information needed to complete your claim is given on the reverse of this letter)

By direction of the Commandant.

Very truly yours,

M. W. HUTCHINSON
Chief Pay Clerk, USCG
Enlisted Personnel Division

A5068
3-13

CG–2888 (9–46)

TREASURY DEPARTMENT
U. S. COAST GUARD

CLAIM FOR SETTLEMENT—UNUSED LEAVE

(Armed Forces Leave Act of 1946)

Print or Type—
Do Not Use Pencil

MEMBERS ON ACTIVE DUTY ON 1 SEPTEMBER, 1946

WATTS, Alan B. (Name—Surname to left) | BMlc (Rank or rating 31 Aug. 1946) | 209-630 (Signal or Service Number)

1(a). (Following to be completed by all members on active duty on 1 September, 1946:)

On 31 August, 1946, I had accrued leave under the Armed Forces Leave Act of 1946 in the amount of 78 days. I hereby make claim for compensation for the excess of such amount over 60 days.

(b). (Following to be answered only by those classified in the first three enlisted pay grades on 31 August, 1946:)

On 31 August, 1946, I had the following dependent:

(If none, so state) | LOUISE WATTS (Name of dependent) | Wife (Relationship)

2(a). (Following to be completed only by those officers who make claim herein for unused leave accrued during periods of enlisted service subsequent to 7 September, 1939:)

I was last separated under honorable conditions from enlisted status on _____ (Date of discharge or promotion to officer rank), then holding the rating of _____ in the following service _____ (Army, Navy, Marine Corps, or U. S. C. G.). On such date of separation I had accrued, during periods of enlisted service subsequent to 7 September, 1939, _____ days unused leave, computed in accordance with the provisions of the Armed Forces Leave Act of 1946, for which unused leave I hereby make claim for compensation.

(b). (Following to be completed only by those officers who make claim herein for compensation for unused leave accrued during periods of enlisted service subsequent to 7 September, 1939, who were serving in the first three enlisted ratings on date of last separation under honorable conditions from enlisted status:)

On date of last separation under honorable conditions from enlisted status I had the following dependent:

(If none, so state) | (Name of dependent) | (Relationship)

3. (Following to be completed by all claimants:)

I do solemnly swear (or affirm) that the foregoing statements are true and correct to the best of my knowledge and belief, and that I have not previously submitted a claim for compensation under the Armed Forces Leave Act of 1946.

Alan B. Watts
(Signature of claimant)

ALAN BRENNEN WATTS (DO NOT PRINT OR TYPE)

Subscribed and sworn to (or affirmed) before me at CG Depot, Rockland, Maine this 17th day of February, 1947.

(SEAL)

C. M. JOSEPH Lt., USCG
(Signature of Notary Public or other officer authorized to administer oaths for general purposes)

(OVER)

16—49451-1

4. (*Following to be completed by the Commanding Officer of the unit at which claimant is serving on date of claim:*)

The foregoing statements have been verified by the official records of this unit, in accordance with paragraph 4 of Commandant's Circular No. 33–46.

J. M. JOSEPH Lt., USCG — (*Signature of Commanding Officer*)

Depot, Rockland, Maine — (*Unit*)

5. (*Following to be completed by the authorized certifying officer having custody of claimant's pay records:*)

I certify that on 31 August, 1946, the person making claim herein was entitled, under applicable instructions, to credit of pay and, if an officer, allowances, at the following rates:

(*Monthly pay (base and longevity)*) | (*Officer monthly rental allowance*) | (*Officer daily subsistence allowance*)

(*Signature of authorized certifying officer*)

This form is to be completed in accordance with Commandant's Circular No. 33–46, inserting one copy in the individual's service record.

If entry in item 1 is for more than 60 days, or if any entry is made in item 2, forward original and one copy to Terminal Leave Unit, U. S. Coast Guard Headquarters, Washington 25, D. C.

Where no compensation is indicated forward original only to Commandant (PO) or (PE) as applicable.

Completion of item 5 is not required if no compensation is indicated in item 1, or if compensation is indicated only in item 2.

U. S. GOVERNMENT PRINTING OFFICE 16—49451-1

N. C. G. No. 2668
Form approved by Comptroller General, U. S.
April 13, 1934
(Revised 1937)

S. V. No. _____
PAY No. _____

REPORT OF CHANGE IN PAY STATUS

WATTS,	Alan	B.	209-630	BMlc
(Surname)	(First name)	(Middle initial)	(Service No.)	(Rank or rating)

CG GROUP	Rockland, Maine	20 February, 1947
(Unit)	(Place)	(Date)

From: COMMANDING OFFICER.
To: PAY OFFICER.

You are hereby authorized to adjust the pay accounts of the above named for the following reason:

Entitled to increase in pay for the following period of creditable service:

Completed 6 years creditable service	14 Feb., 1944
NDPI	None
Sick, Misc.	None
AWL	None
Discharged (HEE)	5/4/44
Reenlistment (4 year)	5/5/44
Completed nine (9) years of creditable service	14 Feb., 1947.

AUTHORITY: Art 111, P&SI

G. A. TARDIF
By direction (Commanding)

(Title)

---

1. Receipt of this authorization is hereby acknowledged. The accounts of the above named have been adjusted.

(Date) (Pay officer)

U. S. GOVERNMENT PRINTING OFFICE 16—32065-1

(Revised)
Comptroller General, U. S.
February 25, 1938

ADDRESS THE COMMANDANT, U. S. COAST GUARD
AND REFER TO No. (PE-PR-6)
CG-73

STATEMENT OF CREDITABLE SERVICE

UNITED STATES COAST GUARD HEADQUARTERS

WASHINGTON 13 February, 1947

From: Commandant.

To: Commanding Officer, CG Depot, Rockland, Maine

SUBJECT: WATTS, Alan Brennen (209-630) BMlc

Statement of service of.

1. The following is a statement of the service of the above-named man for the purpose of computing pay:

Entered Service	Service Terminated	Absent Without Leave (Inclusive dates)		Sickness Due to Own Misconduct (Inclusive dates)		Nonperformance of Duty Because of (Inclusive dates)	
		From—	To—	From—	To—	From—	To—
2-15-38	2-14-41 HD	None		None		None	
2-15-41	5-4-44 HD	None		None		None	
5-5-44							
Now serving							

M. K. HUTCHINSON
By direction

U. S. GOVERNMENT PRINTING OFFICE 16—32658-2

CG—2888 (9-46)

TREASURY DEPARTMENT
U. S. COAST GUARD

CLAIM FOR SETTLEMENT—UNUSED LEAVE

(Armed Forces Leave Act of 1946)

MEMBERS ON ACTIVE DUTY ON 1 SEPTEMBER, 1946

Print or Type—
Do Not Use Pencil

3-13

WATTS, Alan B. (Name—Surname to left) | BM1c (Rank or rating 31 Aug. 1946) | 209-630 (Signal or Service Number)

1(a). (Following to be completed by all members on active duty on 1 September, 1946:)

On 31 August, 1946, I had accrued leave under the Armed Forces Leave Act of 1946 in the amount of 76 days. I hereby make claim for compensation for the excess of such amount over 60 days.

(b). (Following to be answered only by those classified in the first three enlisted pay grades on 31 August, 1946:)

On 31 August, 1946, I had the following dependent:

(If none, so state) | LOUISE WATTS (Name of dependent) | Wife (Relationship)

2(a). (Following to be completed only by those officers who make claim herein for unused leave accrued during periods of enlisted service subsequent to 7 September, 1939:)

I was last separated under honorable conditions from enlisted status on _____ (Date of discharge or promotion to officer rank), then holding the rating of _____ in the following service _____ (Army, Navy, Marine Corps, or U. S. C. G.). On such date of separation I had accrued, during periods of enlisted service subsequent to 7 September, 1939, _____ days unused leave, computed in accordance with the provisions of the Armed Forces Leave Act of 1946, for which unused leave I hereby make claim for compensation.

(b). (Following to be completed only by those officers who make claim herein for compensation for unused leave accrued during periods of enlisted service subsequent to 7 September, 1939, who were serving in the first three enlisted ratings on date of last separation under honorable conditions from enlisted status:)

On date of last separation under honorable conditions from enlisted status I had the following dependent:

(If none, so state) | (Name of dependent) | (Relationship)

3. (Following to be completed by all claimants:)

I do solemnly swear (or affirm) that the foregoing statements are true and correct to the best of my knowledge and belief, and that I have not previously submitted a claim for compensation under the Armed Forces Leave Act of 1946.

Alan Brenner Watts
ALAN BRENNER WATTS
(Signature of claimant) (DO NOT PRINT OR TYPE)

Subscribed and sworn to (or affirmed) before me at CG Dep't, Rockland, Maine this 17th day of February, 1947.

(SEAL)

F. M. JOSEPH Lt., USCG
(Signature of Notary Public or other officer authorized to administer oaths for general purposes)

(OVER)

16—49451-1

4. (*Following to be completed by the Commanding Officer of the unit at which claimant is serving on date of claim:*)

The foregoing statements have been verified by the official records of this unit, in accordance with paragraph 4 of Commandant's Circular No. 33–46.

J. M. JOSEPH Lt., USCG — (*Signature of Commanding Officer*)

Depot, Rockland, Maine — (*Unit*)

5. (*Following to be completed by the authorized certifying officer having custody of claimant's pay records:*)

I certify that on 31 August, 1946, the person making claim herein was entitled, under applicable instructions, to credit of pay and, if an officer, allowances, at the following rates:

(*Monthly pay (base and longevity)*) | (*Officer monthly rental allowance*) | (*Officer daily subsistence allowance*)

(*Signature of authorized certifying officer*)

This form is to be completed in accordance with Commandant's Circular No. 33–46, inserting one copy in the individual's service record.

If entry in item 1 is for more than 60 days, or if any entry is made in item 2, forward original and one copy to Terminal Leave Unit, U. S. Coast Guard Headquarters, Washington 25, D. C.

Where no compensation is indicated forward original only to Commandant (PO) or (PE) as applicable.

Completion of item 5 is not required if no compensation is indicated in item 1, or if compensation is indicated only in item 2.

U. S. GOVERNMENT PRINTING OFFICE 16—49451-1

UNITED STATES COAST GUARD
Washington 25, D. C.

Address reply to
THE COMMANDANT (PE-E)
Refer to file: CG-73-783

23 January, 1947

From: Commandant (PE-PR)

To: CG Group, Rockland, Maine

Subj: Alan B. Watts (209-630)

The following information is furnished in accordance with your request for the purpose of helping you complete your "Claim for Settlement for Unused Leave":

Date enlisted ~~Prior to 8 Sept. 1939~~

Date assigned active duty ~~Prior to 8 Sept. 1939~~

Date discharged ~~4 May, 1944~~

Place discharged ~~Port Clyde Station.~~

Records show that during the above period of service you were:

Absent without leave for ~~0~~ days

Absent over leave for ~~0~~ days

Confined as result of Court-Martial for ~~0~~ days

On authorized leave for a total of ~~132~~ days

(If you had more than 48 months active service, the additional information needed to complete your claim is given on the reverse of this letter)

By direction of the Commandant.

Very truly yours,

U. S. COAST GUARD
MAIL SECTION
MAILED JAN 23 1947

M. K. HUTCHINSON
Chief Pay Clerk, USCG
Enlisted Personnel Division

A5068

3-13

RK

UNITED STATES COAST GUARD
Washington 25, D. C.

Address reply to
THE COMMANDANT (PE-E)
Refer to file: CG-73-783

CO, CG group, Rockland, Maine

Subj: Alan B. Watts (209-630)

The following information is furnished in accordance with your request for the purpose of helping you complete your "Clair for Settlement for Unused Leave":

Date enlisted — Prior to 8 Sept, 1939

Date assigned active duty — " "

Date discharged — 4 May, 194X

Place discharged — Port Clyde Me.

Records show that during the above period of service you were:

Absent without leave for — 0 days

Absent over leave for — 0 days

Confined as result of Court-Martial for — 0 days

On authorized leave for a total of — 132 days

(If you had more than 48 months active service, the additional information needed to complete your claim is given on the reverse of this letter)

By direction of the Commandant.

Very truly yours,

M. K. HUTCHINSON
Chief Pay Clerk, USCG
Enlisted Personnel Division

A5068

REPORT OF CHANGE IN PERSONNEL

UNITED STATES COAST GUARD

NAVCG-2599 (REV. 6-44)

SURNAME, FIRST NAME, INITIAL	SERVICE NO.	PRESENT RANK OR RATING
WATTS, Alan B.	209-630	B.M.1c

MAJOR UNIT NAME	MINOR UNIT NAME	LOCATION
CG GROUP, West Johesport, Maine	Great Wass Island L/B Sta.	West Jonesport, Maine

UNIT ITEM NO. OR VESSEL'S ASSIGNED DISTRICT: 01-031

DATE: 8 November, 1945

TIME

DATE

REPORTED FROM:

FOR

DUTY CODE NO.

AUTH:

TIME

DATE

TRANSFERRED TO:

FOR

EXAMINED PEA-E-33

AUTH:

CHANGED IN ~~RATING~~ (RATING) FROM B.M.1/c(Pro.) TO B.M.1/c Permanent EFFECTIVE 3 November, 1945

DUTY CODE NO. 29

AUTH: ALCOAST 031400/143 November, 1945

OTHER CHANGES (SPECIFY)

Above named man is considered morally, phisically and proffessionally qualified for advancement to Boatswains' Mate First Class (Permanent)

Above named man has served as B. M. 1/c (Pro.) since 27 January, 1943.

DUTY CODE NO.

AUTH:

DONALD C. COFFIN, CBM
(*Commanding*)

SPACE BELOW IS FOR HEADQUARTERS' USE ONLY

Enlisted Personnel				
Rate	Pay Grade	District	Foreign Domestic	Duty
II	XIV	XVII	XX	XXI

Officer Personnel			
District	Sea Shore	Foreign Domestic	Duty
XI	XIV	XV	XVIII

Records	
Posting	Coding

PEA-E 88

Machine Accounting
Punched
Verified

U. S. GOVERNMENT PRINTING OFFICE 16—40355-1

NAVCG 2599
U. S. COAST GUARD
(Rev. June 1943)

REPORT OF CHANGE IN PERSONNEL

WATTS	Alan	B.	209-630	B.M.1c.
(Surname)	(First name)	(Middle initial)	(Service No.)	(Rank or rating)

GREAT WASS ISLAND LIFEBOAT STATION

GROUP (01-031)	West Jonesport, Maine	3 April, 1945
(Major unit)	(Unit Item No. or vessel's assigned district) (Place)	(Date)

(Minor unit)

1200, 3 April, 1945, reported for duty Great Wass Island Lifeboat Station, tr. from Burnt Island LB Station.

(Port Clyde 1a)

DUTY CODE No.: 29
AUTHORITY: CO, CG Group, Port Clyde, Me, Ltr. 4-3-45, 73-531

James N. Alley
James N. Alley
(Commanding)

EXAMINED PEA-E-3

CBM
(Title)

SPACE BELOW IS FOR HEADQUARTERS' USE ONLY

Enlisted Personnel					
Rate	R T	Pay Grade	District	Foreign Domestic	Duty
201		2	01	2	29
II	III	XIV	XVII	XX	XXI

Officer Personnel			
District	Sea Shore	Foreign Domestic	Duty
XI	XIV	XV	XVIII

Records	
Posting	Coding

PEA-E 16

Machine Accounting
OPERATOR No. 40
Punched
Verified

U. S. GOVERNMENT PRINTING OFFICE 16—29594-2

NAVCG 2599
U. S. COAST GUARD
(Rev. June 1943)

Postal 4/3

REPORT OF CHANGE IN PERSONNEL

WATTS	Alan	B.	209-630	B.M.1c.
(Surname)	(First name)	(Middle initial)	(Service No.)	(Rank or rating)

GREAT WASS ISLAND LIFEBOAT STATION

GROUP (01-031)	West Jonesport, Maine	3 April, 1945
(Major unit)	(Unit Item No. or vessel's assigned district) (Place)	(Date)

(Minor unit)

1200, 3 April, 1945, reported for duty Great Wass Island Lifeboat Station, tr. from Burnt Island LB Station.

Port Clyde

DUTY CODE No.: 29
AUTHORITY: CO, CG Group, Port Clyde, Me, Ltr. 4-3-45, 73-531

James N. Alley
(Commanding)

EXAMINED PEA-E-33

CBM
(Title)

SPACE BELOW IS FOR HEADQUARTERS' USE ONLY

Enlisted Personnel					
Rate	R T	Pay Grade	District	Foreign Domestic	Duty
201		2	01	2	29
II	III	XIV	XVII	XX	XXI

Officer Personnel			
District	Sea Shore	Foreign Domestic	Duty
XI	XIV	XV	XVIII

Records	
Posting	Coding
PEA-E 32	

Machine Accounting
Punched
Verified

U. S. GOVERNMENT PRINTING OFFICE 16—29594-2

NAVCG 2599
U. S. COAST GUARD
(Rev. June 1943)

REPORT OF CHANGE IN PERSONNEL

WATTS	Alan	B.	209-630	B.M.1c
(Surname)	(First name)	(Middle initial)	(Service No.)	(Rank or rating)

GROUP, PORT CLYDE, ME.	(01-074)	PORT CLYDE, MAINE	2 April, 1945
(Major unit)	(Unit Item No. or vessel's assigned district)	(Place)	(Date)

Burnt Island LB. Station
(Minor unit)

0830 this date: Tr. to SCGO, Rockland, Me. for fur. tr. to Great Wass Island Lifeboat Station

DUTY CODE No.: 29
AUTHORITY: Verb.Orders, SCGO, Rockland, Me. 31 March, 1945

Wilson B. Carter
WILSON B. CARTER, C.B.M.
(Commanding)

COMMANDING OFFICER
(Title)

SPACE BELOW IS FOR HEADQUARTERS' USE ONLY

Enlisted Personnel					
Rate	R T	Pay Grade	District	Foreign Domestic	Duty
II	III	XIV	XVII	XX	XXI

Officer Personnel			
District	Sea Shore	Foreign Domestic	Duty
XI	XIV	XV	XVIII

Records	
Posting	Coding
NO POSTING REQUIRED PEA E 39	

Machine Accounting
Punched
Verified

U. S. GOVERNMENT PRINTING OFFICE 16—29594-2

N. C. G. 2511 (Revised)
Form approved by Comptroller General, U. S.
February 25, 1938

ADDRESS THE COMMANDANT, U. S. COAST GUARD
AND REFER TO NO. PR-73.

STATEMENT OF CREDITABLE SERVICE

UNITED STATES COAST GUARD HEADQUARTERS

WASHINGTON 10 March, 1942.

BOSTON DISTRICT
RECEIVED
MAR 12 1942
U.S. COAST GUARD

From: Commandant.
To: Senior Coast Guard Officer, First Naval District.

Subject: Statement of service for longevity pay.

Inclosure:

1. The following is a statement of service, to and including 10 March, 1942, of WATTS, Alan Brennen (209-630) Surfman, (Port Clyde Sta.)

Entered Service	Service Terminated	Absent Without Leave (Inclusive dates)		Absent Due to Own Misconduct (Inclusive dates)		Nonperformance of Duty Because of (Inclusive dates)	
		From—	To—	From—	To—	From—	To—
2-15-38	2-14-41 H D	None		None		None	
2-15-41 Now serving		None		None		None	

	Yr.	Mo.	Days
Coast Guard service	4	0	26
Navy service			
Total	4	0	26

Completed 4 years 14 February, 1942.

F. E. ALLISON,
By direction.

U. S. GOVERNMENT PRINTING OFFICE 16—23559-2

N. C. G. 2511 (Revised)
Form approved by Comptroller General, U. S.
February 25, 1938

ADDRESS THE COMMANDANT, U. S. COAST GUARD
AND REFER TO NO.

STATEMENT OF CREDITABLE SERVICE

UNITED STATES COAST GUARD HEADQUARTERS
~~WASHINGTON~~
PORT CLYDE STATION
PORT CLYDE, ME.

From: ~~Commandant~~. Commanding Officer, Port Clyde Station
To: DCGO, 1st Naval District.

Subject: Statement of service for longevity pay.

Inclosure:

1. The following is a statement of service, to and including 4th, of May, 1944.

Entered Service	Service Terminated	Absent Without Leave (Inclusive dates)		Absent Due to Own Misconduct (Inclusive dates)		Nonperformance of Duty Because of (Inclusive dates)	
		From—	To—	From—	To—	From—	To—
2-15-38	2-14-41 HD	None		None		None	
2-15-41	5-4-44 HD	None		None		None	
5-5-44							

	Yr.	Mo.	Days
Coast Guard service	6	2	20
Navy service	0	0	0
Total	6	2	20

Completed 6 years 14 February, 1944.

J. R. Holmes.
J. R. Holmes, Lieut. (jg)
Commanding Officer.

U. S. GOVERNMENT PRINTING OFFICE 16—23559-2

N. C. G.-2511 A
Form approved by
Comptroller General, U. S.
January 31, 1941

UNITED STATES COAST GUARD

STATEMENT OF CREDITABLE SERVICE

(For Enlistment Allowance)

PORT CLYDE STATION
CG-38668
(Unit)

WATTS, Alan Brennan (Name in full—surname to the left) — 5 May, 1944 (Date)

(209-630) (Service number) — B.M.1c (Rating on discharge)

	Year	Month	Day
Date of last enlistment (for 3 years)	1941	Feb.	15
Enlistment extended (for ..... years from)			
Date of discharge (HONORABLE (Character of discharge))	1944	May	4
Total time of last enlistment period			

NUMBER OF—		
Years	Months	Days
3	2	20

ABSENT TIME DURING PERIOD (Inclusive dates to be shown)

Absent Without Leave			Absent Due to Own Misconduct			Absent Due to Confinement		
From—	To—	Days	From—	To—	Days	From—	To—	Days
	None			None			None	

Total Absence (..... days)

Creditable time served during last enlistment period	3	2	20

I CERTIFY that the above is a full, true, and correct statement of creditable service of the above-mentioned man during the period of his last enlistment.

J. R. Holmes
J. R. Holmes

Date 4 May, 1944 (Rank) Lieut. (jg), U. S. C. G.
Commanding officer.

REENLISTMENT OR EXTENSION OF ENLISTMENT

Date 5 May, 1944 — PORT CLYDE STATION, CG-38668 (Unit and place)

I CERTIFY that the above-named man re-enlisted for
(Reenlisted or voluntarily extended his enlistment)

a period of four years from this date.

J. R. Holmes

(Rank) J. R. Holmes, Lieut. (jg), U. S. C. G.
Commanding officer.

U. S. GOVERNMENT PRINTING OFFICE 16—20008-1

Form 2529
Treasury Department
U.S.Coast Guard.
Revised September 2,1941 UNITED STATES COAST GUARD

DESIGNATION OF BENEFICIARIES FOR DEATH GRATUITY.

PORT CLYDE STATION — PORT CLYDE, MAINE
CG 35666 (Unit) (Place)

5 May, 1944 (Date)

From: WATTS, Alan Brennan (209-630) B.M.1c
To: Commandant (via 2660, 1st Naval District.)

1. In the event of my death I hereby designate beneficiary or beneficiaries for payment of six month's pay, as provided in the Act of June 4, 1920, as amended by the Act of May 22, 1928, as follows:

LOUISE WATTS — STEUBEN HARBOR, MAINE
(Full name of wife, if not married, so state) (Address of Wife)

WAYNE ALAN WATTS — STEUBEN HARBOR, MAINE
(Full name of child, if none, so state) (Address of child)

(Full name of child, if none, so state) (Address of child)

(Full name of child, if none, so state) (Address of child)

2. In the event of my leaving no widow or child, or of their decease before payment is made, I then designate as my beneficiary under the said act the following dependent relative:

FLORENCE L. WATTS — MOTHER — JONESBORO, MAINE
(Full name of relative) (Relationship) (Address of relative)

POTENTIAL
(State briefly wherein dependency exists)

3. In the event of the death of the above-named dependent relative before payment is made, I then designate as my beneficiary under said act the following dependent relative:

FRED M. WATTS — FATHER — JONESBORO, MAINE
(Full name of relative) (Relationship) (Address of relative)

POTENTIAL
(State briefly wherein dependency exists)

I hereby swear (or affirm) that the statements made herein regarding dependency and relationship of the persons named above are true.

Subscribed and sworn to before me this 5th day of May, 1944

J. R. Holmes, Lieut. (jg)
(Signature)

Alan B. Watts
Alan B. Watts
(Signature)

B.M.1c
(Rank or rating)

Commanding Officer.
(Rank or title)



INSTRUCTIONS

ks to be assigned upon discharge, even though the period is less than one

ddition to recording the award of a good-conduct medal, honorable discharge l or decoration, record should be made of special commendations by Headquarce of duty of an exceptionally excellent character.

ARTICLE 7.—Record should especially be made of special qualifications of an enlisted man not required in his rating, which will serve as a guide for advancement and the utilization of the man on special duty to best advantage.

ARTICLE 8.—Record details to duty drawing extra compensation, such as messmen, mail clerk, etc., and to special duty not ordinarily assigned to rating, such as recruiting, intelligence duty, instruction in radio, etc. (Will include inter-unit transfers.)

ARTICLE 10.—It is most important that an accurate record be kept of all periods during which a man is not in a pay status, in order that Article 16 may be executed correctly. An accurate record shall be kept of all absences on account of:

(1) Absence without leave (including overleave and desertion).

(2) Sickness, disease, or injury resulting from own intemperate use of drugs or alcoholic liquors, or other misconduct.

(3) Nonperformance of duty because of confinement awaiting trial by a Coast Guard court resulting in conviction. (See Article 4602(4), Personnel Instructions.)

Abbreviations may be used in the "Remarks" column to indicate nature of absence, as follows:

A. W. O. L.—Absence without leave (including overleave and desertion).

A. O. M. (absent, own misconduct).—Sickness, disease, or injury resulting from own intemperate use of drugs or alcoholic liquors, or other misconduct.

Conf.—Nonperformance of duty because of confinement awaiting trial by a Coast Guard court resulting in conviction. (See Article 4602(4), Personnel Instructions.)

ARTICLE 13.—On desertion this certificate will be executed, but Article 17 will *not* be executed.

ARTICLE 14.—On retirement this certificate will be executed, but Article 17 will *not* be executed.

ARTICLE 16.—The entries under Article 10 will be considered when compiling Article 16.

ARTICLE 17.—This certificate will be executed on discharge or death.

No interlineations, erasures, alterations, or use of ditto marks are permitted. Should an error be made, a light red-ink line shall be drawn through it, the commanding or enlisting officer entering his initials alongside in ink.

As far as possible, all entries on Service Record should be made on the typewriter.

U. S. GOVERNMENT PRINTING OFFICE 16—9677

NCG 2500
(Rev. June, 1942)

PEA-E 17

MAY 12 1944

CODED NO. 6

ENLISTMENT CONTRACT

UNITED STATES { COAST GUARD / ~~COAST GUARD RESERVE~~

RE- ENLISTMENT OF WATTS, Alan Brennen (Full name, surname to left); (209-630) (Service number); $125.40 (Pay per month)

Accepted for enlistment at PORT CLYDE STATION, PORT CLYDE, MAINE; B.M.1c (Rating in which enlisted)

Enlisted at PORT CLYDE STATION, PORT CLYDE, MAINE; 5 May, 1944 (Date of enlistment)

Transferred to

Occupation B.M.1c Citizenship* NB If naturalized, place and date of naturalization Certificate No.

Date of birth 1 January, 1917 Place of birth Jonesboro, Maine.

Home address (Street and number) Tenants Harbor (Town) (County) Maine (State)

Married or single Married Name and address of next of kin or legal guardian Louise Watts

Wife (Relationship) Tenants Harbor, Maine: (Address)

Continuous Service Certificate (Number) Previous service { Coast Guard / ~~Reserve~~ } 6 (Years) 2 (Months) 20 (Days)

First enlisted 15 February, 1938 (Date) at Burnt Island LB. Station. (Place) and was

last discharged 4 May, 1944 (Date) from CG-38668 ATTACHED TO PORT CLYDE STATION (Unit)

with HONORABLE (Character) discharge as B.M.1c (Rate) No. A68652

Previous Navy service None (Years) (Months) (Days) Previous Marine Corps service None (Years) (Months) (Days)

Previous Army service None (Years) (Months) (Days) Age 27 years 4 months.

Height 5 feet 11 inches. Weight 165 pounds.

Eyes Blue Sex male Hair Lt. Brown Complexion Light Color White

Personal characteristics None marks, etc.

For and in consideration of the pay or wages due to the ratings which may from time to time be assigned me during the continuance of my service, I agree to and with J. R. Holmes of the United States Coast Guard, as follows:

First: To enter the Coast Guard of the United States and to report to such station or vessel as I may be ordered to join, and to the utmost of my power and ability discharge my several services or duties and be in everything conformable and obedient to the several requirements and lawful commands of the officers who may be placed over me.

Second: I oblige and subject myself to serve { FOUR years from 5 May, 1944 / during minority until , 1 } unless sooner discharged by proper authority.

* Citizenship—Use expressions "NB" for native born; "NZ" for naturalized; "NPI" for native of Philippine Islands; "NPR" for native of Puerto Rico.

16—8420-2

In the event of war or National emergency declared by the President to exist during my term of service, I oblige and subject myself to serve until 6 months after the end of the war or National emergency if so required by the Secretary of the Navy unless I voluntarily reenlist or extend my enlistment. I understand that when so detained, I am not entitled to enlistment allowance and that in time of war the addition of one-quarter pay as specified in the Act of July 11, 1941, is not applicable.

I also oblige myself, during such service, to comply with and be subject to such laws, regulations, and discipline for the government of the Coast Guard as are or shall be established by the Congress of the United States or other competent authority, and to submit to treatment for the prevention of smallpox, typhoid (typhoid prophylaxis), and to such other preventive measures as may be considered necessary by proper authorities.

Third: I am of the legal age to enlist; I have never deserted from the United States Coast Guard, Navy, Army, or Marine Corps; I have never been discharged from the United States Service or other service on account of disability or through sentence of either civilian or military court; and I have never been discharged from any service, civil or military, except with good character and for the reasons given by me to the recruiting officer prior to enlistment. I am not a member of the Coast Guard Reserve, Naval Reserve, Naval Militia, Marine Corps Reserve, National Guard, or Army Reserve.

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

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

Oath of Allegiance: I, Alan Brennen Watts, do solemnly swear (or affirm) that I will bear true faith and allegiance to the United States of America, and that I will serve them honestly and faithfully against all their enemies whomsoever, and that I will obey the orders of the President of the United States and the orders of the officers appointed over me, according to the laws of the United States and the regulations governing the Coast Guard.

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

Alan Brennen Watts

Alan Brennen Watts
(Signature in own handwriting, surname to right)

Subscribed and sworn to before me this 5th day of May, A. D. 1944

J. R. Holmes

J. R. Holmes, Lieut. (jg)
(Commanding officer, notary public, or other officer qualified to administer oaths)

Commanding Officer.
(Title)

Citizenship substantiated and contract perfected.

J. R. Holmes.

J. R. Holmes.

Lieut. (jg), U. S. C. G., Enlisting Officer.

EXTENSION OF ENLISTMENT CONTRACT

(Unit) (Place) (Date)

Enlistment extended until ..... by reason of

under authority of .....

PEA-E 17

C. G. HEADQUARTERS

TATES COAST GUARD

CLYDE STATION
CLYDE, MAINE.

CERTIFICATE

I } certify that { I } have personally made this physical examination and find that WATTS, Alan B.

He is physically qualified for Sea duty
(Enlistment, appointment, promotion)

He is physically qualified to perform the duties of R.M.1c.
(Use in case of promotion of commissioned officer or annual examination) (Rank)

He is not physically qualified for

on account of

E.J. SMITH
P.A. *Surgeon, U.S. Public Health Service.*

1st INDORSEMENT

(Date)

Place

From:

To: Commandant.

1. Forwarded for action. Present status:

Commanding—Dist. Comdr.-Off. in Chg.

2d INDORSEMENT

HEADQUARTERS MEDICAL OFFICE.
U.S. COAST GUARD, Washington.

4-29-44
(Date)

The findings of the certificate are not approved

By direction of the Surgeon General:

Medical Director, U.S. Public Health Service.

3d INDORSEMENT

HEADQUARTERS, WASHINGTON.
1 May, 1944
(Date)

From: Commandant.
To: Commanding Officer, CG Station, Port Clyde, Maine

1. REENLISTMENT AUTHORIZED; REGULAR ESTAB.

Insert this copy in health record.

By direction,

E. ZOOLE
Chief, Enlisted Assignments Div.

U. S. GOVERNMENT PRINTING OFFICE 16—27070-1

Copy mailed 5-1-44

.M.1c USCG, re-enlistment of;
.

rity be granted to enlist the sub-
blishment as he has completed six
listment.

d herewith.

J. R. HOLMES

F. N. MARTIN
By direction

Cont. pers.

Request.



In the event of war or National emergency declared by the President to exist during my term of service, I oblige and subject myself to serve until 6 months after the end of the war or National emergency if so required by the Secretary of the Navy unless I voluntarily reenlist or extend my enlistment. I understand that when so detained, I am not entitled to enlistment allowance and that I am not entitled to one-quarter pay as specified in the Act of July 11, 1941, is not

th and be subject to such laws, regulations, and discipline for the
ished by the Congress of the United States or other competent
smallpox, typhoid (typhoid prophylaxis), and to such other pre-
authorities.

deserted from the United States Coast Guard, Navy, Army, or
ited States Service or other service on account of disability or
have never been discharged from any service, civil or military,
me to the recruiting officer prior to enlistment. I am not a mem-
ia, Marine Corps Reserve, National Guard, or Army Reserve.

t Guard Reserve, I may be ordered to active duty in time of war,
ncy exists, and that I may be required to perform active duty
to exist and for 6 months thereafter.

I understand it, and certify that no promise of any kind has been
during my enlistment.

nd allegiance to the United States of America, and that I will
whomsoever, and that I will obey the orders of the President of
er me, according to the laws of the United States and the regula-

made by me as now given in this record are correct.

Alan Brennan Watts

Alan Brennan Watts
(Signature in own handwriting, surname to right)

day of May, A. D. 1944

J. R. Holmes

J. R. Holmes, Lieut. (jg)
(Commanding officer, notary public, or other officer qualified to administer oaths)

Commanding Officer:
(Title)

J. R. Holmes.

J. R. Holmes.

Lieut. (jg), U. S. C. G., *Enlisting Officer.*

ENLISTMENT CONTRACT

(Place) (Date)

by reason of

(Signature of man)

16—8420-2 U. S. GOVERNMENT PRINTING OFFICE

NCG—2525 B

PHYSICAL EXAMINATION RECORD

(To be completely made up by medical officer, in duplicate)

Name WATTS, Alan B. (Surname first) Service Number 209-630

Age: Years 27 Months 3 Color White

For: Fitness for sea duty
(Special temporary or regular enlistment, appointment or promotion)

Rank or Rating B.M.1c.

Place Rockland, Me Date 24 April, 1944

Personal Medical History Usual childhood diseases

Vision: R.E. 20/ 20 L.E. 20/ 20 Corrected: R.E. 20/ L.E. 20/

Color blind? No Test used Plates

Hearing: Conversational speech R.E. 30/ 30 L.E. 30/ 30

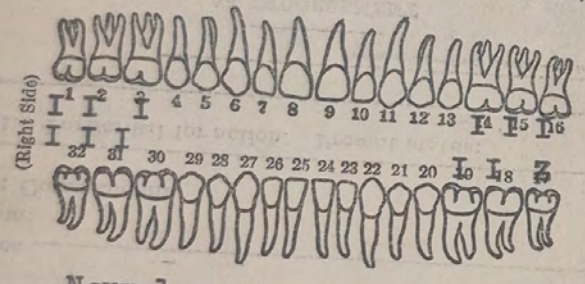
Eyes, eyelids, and reflexes Normal

Ears: Right Normal Left Normal
(Condition of drum, discharge, etc.)

Head, face, and neck Normal

Mouth, nose, and throat Normal

Teeth (indicate on diagram: Missing, "z"; replaced, "x"; carious, "I".)



Gums Normal Temperature 97.6

Height 71 inches. Weight (stripped) 160 Lbs. Obesity No

Skin Normal

Lymph. glands Normal

Chest: Inspiration 39½ Expiration 36

Heart and blood vessels Normal

Blood pressure: Systolic 120 Diastolic 80

Pulse before exercise 76, after exercise 80 after 2 min. 80

Lungs Normal

Abdomen and pelvis Normal

Genito-urinary organs Normal

Spine and extremities Normal

Nervous and mental conditions Normal

Urine: Albumin Neg. Sugar Neg Shreds No

Microscopical exam. (if indicated) epithelia Sp. Gr. 1018

Blood cells Pus cells Casts

Blood (if indicated) Hb %. Reds Whites

Wassermann or Kahn test

BOSTON MASS. REC'D APR 26 U.S. COAST GUARD

C.G. HEADQUARTERS 17

UNITED STATES COAST GUARD

PORT CLYDE STATION
PORT CLYDE, MAINE.

Refer to file no: 702

25 April, 1944.

To: The Commandant.

Via: DCGO, 1st Naval District.

Subj: WATTS, Alan B. (209-630) B.M.1c USCG, re-enlistment of; authority for; request for.

1. It is requested that authority be granted to enlist the subject named man in the regular establishment as he has completed six (6) years in Special Temporary Enlistment.

2. Neg Form 2525B is forwarded herewith.

J. R. HOLMES

Incl. (1)
Subject 2525B

Ind-1
DCGO, 1ND
26 April, 1944

To: The Commandant

Forwarded.

F. N. MARTIN
By direction



PORT CLYDE STATION
PORT CLYDE, MAINE.

Refer to file no: 702

25 April, 1944.

To: The Commandant.

Via: DCGO, 1st Naval District.

Subj: WATTS, Alan B. (209-630) B.M.1c USCG, re-enlistment of; authority for; request for.

1. It is requested that authority be granted to enlist the subject named man in the regular establishment as he has completed six (6) years in Special Temporary Enlistment.

2. Neg Form 2525B is forwarded herewith.

J. R. HOLMES

Incl. (1)
Subject 2525B

Ind-1
DCGO, 1ND
26 April, 1944

To: The Commandant

Forwarded.

F. N. MARTIN
By direction

DESIGNATION OF BENEFICIARIES FOR DEATH GRATUITY.

PORT CLYDE STATION
CG 38668
(Unit)

PORT CLYDE, MAINE
(Place)

5 May, 1944
(Date)

From: WATTS, Alan Brennen (209-630) B.M.1c
To: Commandant (via DCGO, 1st Naval District.)

1. In the event of my death I hereby designate beneficiary or beneficiaries for payment of six month's pay, as provided in the Act of June 4, 1920, as amended by the Act of May 22, 1928, as follows:

LOUISE WATTS (Full name of wife, if not married, so state)	TENANTS HARBOR, MAINE (Address of Wife)
WAYNE ALAN WATTS (Full name of child, if none, so state)	TENANTS HARBOR, MAINE (Address of child)
(Full name of child, if none, so state)	(Address of child)
(Full name of child, if none, so state)	(Address of child)

2. In the event of my leaving no widow or child, or of their decease before payment is made, I then designate as my beneficiary under the said act the following dependent relative:

FLORENCE L. WATTS (Full name of relative)	MOTHER (Relationship)	JONESBORO, MAINE (Address of relative)

POTENTIAL
(State briefly wherein dependency exists)

3. In the event of the death of the above-named dependent relative before payment is made, I then designate as my beneficiary under said act the following dependent relative:

FRED N. WATTS (Full name of relative)	FATHER (Relationship)	JONESBORO, MAINE (Address of relative)

POTENTIAL
(State briefly wherein dependency exists)

I hereby swear (or affirm) that the statements made herein regarding dependency and relationship of the persons named above are true.

Subscribed and sworn to before me this 5th day of May, 1944

J. R. Holmes, Lieut. (jg)
(Signature)

Commanding Officer.
(Rank or title)

Alan B. Watts
Alan B. Watts
(Signature)

B.M.1c
(Rank or rating)

PEA-E 1

DESIGNATION OF BENEFICIARIES FOR DEATH GRATUITY.

PORT CLYDE STATION — PORT CLYDE, MAINE
00_38668
(Unit) (Place)

5 May, 1944
(Date)

From: WATTS, Alan Brennen (209-630) B.M.1c
To: Commandant (via DCGO, 1st Naval District.)

1. In the event of my death I hereby designate beneficiary or beneficiaries for payment of six month's pay, as provided in the Act of June 4, 1920, as amended by the Act of May 22, 1928, as follows:

LOUISE WATTS — TENANTS HARBOR, MAINE
(Full name of wife, if not married, so state) (Address of Wife)

WAYNE ALAN WATTS — TENANTS HARBOR, MAINE
(Full name of child, if none, so state) (Address of child)

(Full name of child, if none, so state) (Address of child)

(Full name of child, if none, so state) (Address of child)

2. In the event of my leaving no widow or child, or of their decease before payment is made, I then designate as my beneficiary under the said act the following dependent relative:

FLORENCE L. WATTS — MOTHER — JONESBORO, MAINE
(Full name of relative) (Relationship) (Address of relative)

POTENTIAL
(State briefly wherein dependency exists)

3. In the event of the death of the above-named dependent relative before payment is made, I then designate as my beneficiary under said act the following dependent relative:

FRED N. WATTS — FATHER — JONESBORO, MAINE
(Full name of relative) (Relationship) (Address of relative)

POTENTIAL
(State briefly wherein dependency exists)

I hereby swear (or affirm) that the statements made herein regarding dependency and relationship of the persons named above are true.

Subscribed and sworn to before me this 5th day of May, 19 44

J. R. Holmes, Lieut. (jg)
(Signature)

Commanding Officer.
(Rank or title)

Alan B. Watts
Alan B. Watts
(Signature)

B.M.1c
(Rank or rating)

PEA-2
17

UNITED STATES COAST GUARD HEADQUARTERS
PORT CLYDE STATION
WASHINGTON
PORT CLYDE, ME.

From: Commanding Officer, Port Clyde Station
To: DCGO, 1st Naval District.

Subject: Statement of service for longevity pay.

Inclosure:

1. The following is a statement of service, to and including 4th, of May, 1944.

Entered Service	Service Terminated	Absent Without Leave (Inclusive dates) From—	Absent Without Leave (Inclusive dates) To—	Absent Due to Own Misconduct (Inclusive dates) From—	Absent Due to Own Misconduct (Inclusive dates) To—	Nonperformance of Duty Because of (Inclusive dates) From—	Nonperformance of Duty Because of (Inclusive dates) To—
2-15-38	2-14-41 ED	None		None		None	
2-15-41	5-4-44 ED	None		None		None	
5-5-44							

	Yr.	Mo.	Days
Coast Guard service	6	2	20
Navy service	0	0	0
Total	6	2	20

Completed 6 years 14 February, 1944.

J. R. Holmes.
J. R. Holmes, Lieut. (jg)
Commanding Officer.

U. S. GOVERNMENT PRINTING OFFICE 16—23559-2

STATEMENT OF CREDITABLE SERVICE

(For Enlistment Allowance)

PORT CLYDE STATION
CG-38668
(Unit)

WATTS, Alan Brannen
(Name in full—surname to the left)

5 May. 1944
(Date)

(209-630)
(Service number)

B.M.1c
(Rating on discharge)

	Year	Month	Day	NUMBER OF— Years	Months	Days
Date of last enlistment (for 3 years)	1941	Feb.	15			
Enlistment extended (for ____ years from)						
Date of discharge (HONORABLE) (Character of discharge)	1944	May	4			
Total time of last enlistment period				3	2	20

ABSENT TIME DURING PERIOD (Inclusive dates to be shown)

Absent Without Leave			Absent Due to Own Misconduct			Absent Due to Confinement		
From—	To—	Days	From—	To—	Days	From—	To—	Days
	None			None			None	

Total Absence (____ days)

Creditable time served during last enlistment period	3	2	20

I CERTIFY that the above is a full, true, and correct statement of creditable service of the above-mentioned man during the period of his last enlistment.

J. R. Holmes

J. R. Holmes

Date 4 May, 1944 (Rank) Lieut. (jg), U. S. C. G.
Commanding officer.

REENLISTMENT OR EXTENSION OF ENLISTMENT

Date 5 May, 1944

PORT CLYDE STATION
CG-38668
(Unit and place)

I CERTIFY that the above-named man re-enlisted for
(Reenlisted or voluntarily extended his enlistment)

a period of four years from this date.

J. R. Holmes

(Rank) J. R. Holmes, Lieut. (jg) U. S. C. G.
Commanding officer.

U. S. GOVERNMENT PRINTING OFFICE 16—20008-1

PEA-E 17

REPORT OF CHANGE IN PERSONNEL

WATTS	Alan	B.	(209-630)	B.M.1c
(Surname)	(First name)	(Middle initial)	(Service No.)	(Rank or rating)

PORT CLYDE STATION
CG - 38668
(Unit)

PORT CLYDE, MAINE
(Place)

5 May, 1944
(Date)

(01-135)

Effective this date: Reenlisted for a term of four years in the Regular Establishment as B.M.1c.

Issued Honorable Discharge No. A68652

Entitled to reenlistment allowance as per Form 2511-A attached.

69
AUTHORITY: Hqs. Third Indorsement 1 May, 1944 on Form 2525B

J. R. Holmes
J. R. Holmes
(Commanding)

Lieut. (jg)
(Title)

SPACE BELOW IS FOR HEADQUARTERS' USE ONLY

LAW	PERSONNEL RECORDS		
	STATISTICS	CORRESPONDENCE	RECORDS

☆ U. S. GOVERNMENT PRINTING OFFICE 1 1943 10—29504-1

NCG 2599
U. S. Coast Guard
(Jan. 1943)

CODED
NO. 6

REPORT OF CHANGE IN PERSONNEL

WATTS	Alan	B.	(209-630)	B.M.1c
(Surname)	(First name)	(Middle initial)	(Service No.)	(Rank or rating)

PORT CLYDE STATION
CG-38668
(Unit)
(01-135)

PORT CLYDE, MAINE.
(Place)

4 May, 1944
(Date)

Effective this date: Discharged by reason of expiration of full term Special Temporary Enlistment as B.M.1c

Issued Honorable Discharge Certificate No. A68652

POD - Port Clyde Station
PAFE - Port Clyde Station

69
AUTHORITY: Art. 461 P.I.

J. R. Holmes
(Commanding)

Lieut. (jg)
(Title)

SPACE BELOW IS FOR HEADQUARTERS' USE ONLY

LAW	PERSONNEL RECORDS		
	STATISTICS	CORRESPONDENCE	RECORDS

☆ U. S. GOVERNMENT PRINTING OFFICE : 1943 16—29594-1

UNITED STATES COAST GUARD

PERSONNEL RECORDS RECEIPT

transferred from your unit, complete necessary entries in the records and forward the records to the unit to which transferred without delay.

WATTS, Alan 209-630 BM1c

Name Service No. Rating

Transferred from DCGO, 1ND to THE COMMANDANT

Authority _____

The following marked (X) are transmitted herewith:

XXX SR Service Record

_____ Health Record

_____

_____

_____

F. N. MARTIN
By direction

5-8-44

Ind-1

To: District Coast Guard Officer, First Naval District

Receipt of inclosures is hereby acknowledged.

_____
(Signature of CO of unit to which transferred)

UNITED STATES COAST GUARD

PERSONNEL RECORDS RECEIPT

transferred from your unit, complete necessary entries in the records and forward the records to the unit to which transferred without delay.

WATTS, Alan 209-630 BM1c

Name Service No. Rating

Transferred from DCGO, 1ND to THE COMMANDANT

Authority _____

The following marked (X) are transmitted herewith:

XXX SR Service Record

_____ Health Record

_____

_____

_____

F. N. MARTIN
By direction

5-8-44

Ind-1

To: District Coast Guard Officer, First Naval District

Receipt of inclosures is hereby acknowledged.

_____
(Signature of CO of unit to which transferred)

NCG 2599
U. S. Coast Guard
(Jan. 1943)

REPORT OF CHANGE IN PERSONNEL

WATTS	Alan	B.	(209-630)	B.M.1c
(Surname)	(First name)	(Middle initial)	(Service No.)	(Rank or rating)

PORT CLYDE STATION
CG-38668
(Unit)
(01-135)

PORT CLYDE, MAINE.
(Place)

15 February, 1944.
(Date)

Effective this date: Enlistment extended until such time that Form No. 2525-B, is received with Headquarters 3rd Indorsement authorizing his re-enlistment in the regular establishment. His enlistment expired 14 February, 1944.

69
AUTHORITY: Alcoast 83, Alnav 155, Comdt.

J. R. Holmes
(Commanding)

Ensign
(Title)

SPACE BELOW IS FOR HEADQUARTERS' USE ONLY

LAW	PERSONNEL RECORDS		
	Statistics	Correspondence	Records

☆ U. S. GOVERNMENT PRINTING OFFICE : 1943 16—29594-1

PE 73-783-701

UNITED STATES COAST GUARD

BOSTON, MASSACHUSETTS.

OFFICE, DISTRICT COAST
GUARD OFFICER, FIRST
NAVAL DISTRICT.

22 January, 1943

From: District Coast Guard Officer, First Naval District.
To: SECTION COAST GUARD OFFICER, ROCKLAND, MAINE.

Subject: Provisional advancement in rating.

Reference: (a) Article 561 (2), Regulations.

1. Under authority of reference (a), upon receipt hereof you are authorized to advance the following named men to the provisional rates indicated opposite their respective names, provided their conduct and performance of duty subsequent to date of examination has been satisfactory.

WATTS, Alan B. (209-630) B.M.2c(Pro) to B.M.1c(Pro)

2. The requirements of Article 4435, Personnel Instructions, have been complied with by this office.

3. Report advancement on Forms Nos. 2599 and 2668.

L. M. MC CLUSKEY,
By direction.

Copy to:
HEADQUARTERS.

DISTRICT
RECEIVED
JAN 22 1943
U.S. COAST GUARD

REPORT OF EXAMINATION
(ENLISTED PERSONNEL)

Burnt Is. Stat
Port Clyde, Maine

SHIP OR STATION Section Coast Guard Office

PLACE Rockland, Maine

DATE 20 January 1943

Watts, Alan B. (209-630)
(Name)

B.M 2c (Pro.)
(Rating)

was examined this day for the rating of B.M. 1c. (Pro.) and was found qualified. The following marks were given: (Scale of marks 4.0 excellent; 3.5 very good; 3.0 good; 2.5 passing; 1.5 fair; 1.0 indifferent; .0 bad. In order to be recommended for advancement in rating, a candidate must have a minimum mark of 2.5 in each subject. The candidate will be examined in the prescribed subjects together with such other subjects as may be deemed necessary). If examined for rating of Yeoman, First Class, or Chief Yeoman, state whether stenographer or not, and number of words taken accurately from dictation. Stenographic notes, transcription of same, and text used in dictation in cases where stenography is required should be forwarded with report of examination.

SUBJECT	MARKS	SUBJECT	MARKS
Article 6001 (a) to (m) Personnel Instructions	3.4	Article 6007 (2) (a) to (g) Personnel Instructions	3.2

Average marks 3.3

Alvin E. Newcomb
Alvin E. Newcomb, Ensign U.S.C.G.
(Signature and rank of member)

Approved 22 January, 1943
(Date)

Thomas R. Flanagan
Thomas R. Flanagan, Ensign USCG (R)
(Signature and rank of member)

L. M. Mc Cluskey
L. M. MC CLUSKEY, Lieut. Commander.
By direction.
(Signature and rank of commanding officer)

16—14373 U. S. GOVERNMENT PRINTING OFFICE

Form 2529
TREASURY DEPARTMENT
U. S. COAST GUARD
~~April 1938~~
REVISED 2 Sept, 1942

UNITED STATES COAST GUARD

DESIGNATION OF BENEFICIARIES FOR DEATH GRATUITY

PORT CLYDE STATION. (Unit) PORT CLYDE, MAINE. (Place)
BURNT ISLAND LIFEBOAT STATION.

1 October, 1942. (Date)

FROM: WATTS, ALAN B, (209-630) B.M. 2c (Pro)

TO: COMMANDANT (via DISTRICT COAST GUARD OFFICER, FIRST NAVAL DISTRICT.C. G.

1. In the event of my death I hereby designate beneficiary or beneficiaries for payment of six months' pay, as provided in the Act of June 4, 1920, as amended by the Act of May 22, 1928, as follows:

LOUISE WATTS. (Full name of wife; if not married, so state)	TENANTS HARBOR, MAINE. (Address of wife)
WAYNE ALAN WATTS, (Full name of child; if none, so state)	TENANTS HARBOR, MAINE. (Address of child)
(Full name of child; if none, so state)	(Address of child)
(Full name of child; if none, so state)	(Address of child)

2. In the event of my leaving no widow or child, or of their decease before payment is made, I then designate as my beneficiary under the said act the following dependent relative:

FLORENCE L. WATTS (Full name of relative)	MOTHER (Relationship)	JONESBORO, MAINE. (Address of relative)

NONE
(State briefly wherein dependency exists)

3. In the event of the death of the above-named dependent relative before payment is made, I then designate as my beneficiary under said act the following dependent relative:

FRED N. WATTS (Full name of relative)	FATHER (Relationship)	JONESBORO, MAINE. (Address of relative)

NONE.
(State briefly wherein dependency exists)

WITNESSED BY:
I hereby swear (or affirm) that the statements made herein regarding dependency and relationship of the persons named above are true.
Subscribed and sworn to before me this date 1 October, 1942

I. L. Hammond
Rank Lieutenant.

SIGNED:
Alan B. Watts
ALAN B. WATTS (209-630)
Rank or Rating B.M. 2c (Pro).

2—10348 U. S. GOVERNMENT PRINTING OFFICE

Form 2522
U.S. Coast Guard

File E

WATTS Alan B. (209-630) B.M.2c(Pro) Burnt Island LB. Station.
(Name, surname first) (Service number) (Rank or rating) (Unit)

*Regular
~~*Special~~
~~Temporary~~
(Enlistment status)

FINAL MEDICAL CERTIFICATE

Place Rockland, Maine, Date August 12, 19

To: Burnt Island Lifeboat Station
(Coast Guard unit)
Port Clyde, Maine
(Address)

The above-named patient was discharged from (~~*inpatient~~ / *outpatient) treatment as shown below:

DIAGNOSIS (By nomenclature name and number)	DIAGNOSIS NUMBER	Period of Treatment for each Condition	
		From	To
Anti-inoculation for smallpox	0119	August 5	August 12

He (*is / *~~is not~~) fit for duty. REMARKS(Recommendations as to sick leave, further treatment, etc)

CONDUCT REPORT:

Did the patient cooperate in his treatment? (*Yes. / *No.) Absent without permission? (*~~Yes.~~ / *No.)

Guilty of insubordination? (*~~Yes.~~ / *No.)

C. [illegible]

A.A. Surg. U.S. Public Health Service

NOTICE OF MEDICAL TRANSFER

....., who has been under (*inpatient / *outpatient)
(Patient's name, service number, rank or rating and unit)
treatment at .....(*Office / *Hospital) at ..... for
..... (Diagnosis) since ..... 19 , has been
transferred this date ..... 19 , to the U. S. Marine Hospital at .....
for further treatment.

.....

.....U.S. Public Health Service

* Strike out words not applicable.

Form 2522
U. S. Coast Guard

..WATTS...Alan.B..... .....(209-630)..... ...B.M. 2c(Pro)..... Burnt Island LB. Station...
(Name, surname first) (Service number) (Rank or rating) (Unit)

RECEIVED AUG 19 1942 U.S. COAST GUARD

APPLICATION TO THE U. S. PUBLIC HEALTH SERVICE FOR RELIEF FOR THE PERSONNEL OF THE U. S. COAST GUARD

*Regular
*~~Special~~
~~Temporary~~
(Enlistment status) Place ...PORT CLYDE, MAINE....., Date ..5 August.....1942

To: ..Dr. Harold C. Jameson, U.S.P.H.S.....

....Rockland, Maine.....

Sir: You are requested to examine the above-named (*~~officer~~ / *enlisted man) of the U. S. Coast Guard attached to the above-named unit, and furnish him such treatment as may be required. It is requested that the RETURN MEDICAL CERTIFICATE be returned to Burnt Island LB. Station, Port Clyde, Maine.

....Alan B. Watts.....
(Signature of patient)

John R. Holmes, C.B.M.(a)(Pro). U.S. Coast Guard
Commanding Officer

RETURN MEDICAL CERTIFICATE

Place .....Rockland, Maine....., Date ...August 5.....1942

I certify that I have examined the above-named person and find him suffering from .(0119). Anti-inoculation for smallpox.....
(Give diagnosis by number and name according to official nomenclature)

My professional opinion in the case is expressed below for the information of the Coast Guard administrative officers. Incident of service? (*Yes. / *~~No.~~) Fit for duty? (*Yes. / *~~No.~~)

Absent from duty on account of the effects of a disease, as distinguished from injury, directly attributable to and immediately following his own intemperate use of alcoholic liquor or habit-forming drug? (*~~Yes~~ / *No.) Absent from duty on account of the direct effects of a venereal disease due to his own misconduct? (*Yes. / *~~No~~) If "yes," did the initial symptoms appear less or more than one year ago? (*Less / *More) Treatment will require approximately ..... days absence from duty. He was admitted to (*~~hospital~~ / *outpatient) treatment at 463 Main Street, Rockland, Maine ...(*~~hospital~~ / *office) on ....August 5....., 1942.

..C. Harold Jameson.....

A..A..Sung U.S. Public Health Service

---

*Having been informed that I am suffering from .....
(Diagnosis)
and that in the opinion of the medical officer, this disease is the result of my own misconduct, I (*do not) desire to submit a statement. (Attach statement if made.)

.....
(Patient's signature)

WITNESS:

.....
(Signature of medical officer)

..... U. S. Public Health Service.

* Strike out words not applicable

N.C.G. No. 2599
U. S. Coast Guard
(Revised 1937)

REPORT OF CHANGE IN PERSONNEL

WATTS, (Surname) Alan (First name) B. (Middle initial) (209-630) (Service No.) Surfman. (Rank or rating)

BURNT ISLAND LIFEBOAT STATION. (Unit) Port Clyde, Maine. (Place) 10 June, 1942. (Date)

Advanced in rating from Surfman to Boatswain's Mate Second Class (Provisional) this date.

AUTHORITY: District Coast Guard Officer's letter dated 9 June, 1942 73-701).
Art. 561 (2) Regulations.

John R. Holmes

John R. Holmes, C.B.M.(a)(Pro) (Commanding)

Commanding Officer. (Title)

SPACE BELOW IS FOR HEADQUARTERS' USE ONLY

LAW	PERSONNEL RECORDS		
	Statistics	Correspondence	Records
			NOTED PR-6

U. S. GOVERNMENT PRINTING OFFICE

73-701.

73

UNITED STATES COAST GUARD

BOSTON, MASSACHUSETTS

U. S. COAST GUARD (29)
REC'D JUN 11 1942

OFFICE OF
DISTRICT COAST GUARD OFFICER
FIRST NAVAL DISTRICT

9 June, 1942.

From: District Coast Guard Officer, First Naval District.
To : **Commanding Officer, PORT CLYDE LIFEBOAT STATION.**

Subject: Provisional advancement in rating.

Reference: (a) Article 561 (2), Regulations.

1. Under authority of reference (a), upon receipt hereof you are authorized to advance the following named men to the provisional rates indicated opposite their respective names, provided their conduct and performance of duty subsequent to date of examination has been satisfactory.

WATTS, Alan B., (209-630) Surf. to B.M.2c.(Pro).

2. The requirements of Article 4435, Personnel Instructions, have been complied with by this office.

3. Report advancement on Forms Nos. 2599 and 2668.

GEO. M. WALKER,
By direction.

Copy to:
HEADQUARTERS.

f/

Form 2509
TREASURY DEPARTMENT
U. S. Coast Guard
September 1939

REPORT OF EXAMINATION
(ENLISTED PERSONNEL)

U. S. COAST GUARD (23)
RECD JUN 11 1942

RECEIVED JUN 6 1942 U.S. COAST GUARD DISTRICT

OK

SHIP OR STATION Port Clyde Lifeboat Station

PLACE Burnt Island, Maine.

DATE 29 May, 1942.

WATTS, Alan B. (209-630)
(Name)

Surfman
(Rating)

was examined this day for the rating of Boatswain's Mate Second Class(Pro) and was found qualified. The following marks were given: (Scale of marks 4.0 excellent; 3.5 very good; 3.0 good; 2.5 passing; 1.5 fair; 1.0 indifferent; .0 bad. In order to be recommended for advancement in rating, a candidate must have a minimum mark of 2.5 in each subject. The candidate will be examined in the prescribed subjects together with such other subjects as may be deemed necessary). If examined for rating of Yeoman, First Class, or Chief Yeoman, state whether stenographer or not, and number of words taken accurately from dictation. Stenographic notes, transcription of same, and text used in dictation in cases where stenography is required should be forwarded with report of examination.

SUBJECT		MARKS	SUBJECT		MARKS
Personnel Instructions, Article 6001	(a)	2.5	Article 6001	(l)	3.5
	(b)	2.7		(m)	3.0
	(c)	2.7	Personnel Instructions, Article 6007	(a)	3.0
	(d)	2.8		(b)	3.0
	(e)	3.0		(c)	2.9
	(f)	3.0		(d)	3.0
	(g)	3.0		(e)	3.0
	(h)	3.3		(f)	3.1
	(i)	3.3		(g)	3.1
	(j)	3.2			
	(k)	3.0			

Average marks 3.0

A. J. Brown
A. J. BROWN, Lieutenant (jg)
(Signature and rank of member)

Nullard E. Mahar.
NULLARD E. MAHAR, C.B.M. (Pro)
(Signature and rank of member)

Approved 1 June, 1942
(Date)

A. J. Brown
A. J. BROWN, Lieut. (jg)
(Signature and rank of ~~commanding~~ officer)

16—14373 U. S. GOVERNMENT PRINTING OFFICE

Form 2522
TREASURY DEPARTMENT
U. S. Coast Guard
Revised Oct., 1932

U. S. COAST GUARD
RECD MAR 20 1942

FILE
C.M.

FOLLOW INSTRUCTIONS ON BACK

WATTS, Alan B. (209-630) Surfman, Burnt Island LB. Station.
(Name, surname first) (Service number) (Rank or rating) (Unit)

XREGULAR
*SPECIAL
TEMPORARY
(Enlistment status)

FINAL MEDICAL CERTIFICATE

Place Rockland, Maine, Date March 10, 1942

To: BURNT ISLAND LIFEBOAT STATION
(Coast Guard unit)

PORT CLYDE, MAINE
(Address)

The above-named patient was discharged from {*~~inpatient~~ / *outpatient} treatment as shown below:

DIAGNOSIS (By nomenclature name and number)	DIAGNOSIS NUMBER	PERIOD OF TREATMENT FOR EACH CONDITION	
		FROM	TO
Anti-inoculation for tetanus	0119	Feb. 5	March 10

He {*is / *~~is not~~} fit for duty. REMARKS (Recommendations as to sick leave, further treatment, etc.):

CONDUCT REPORT:

Did the patient cooperate in his treatment? {*Yes. / *~~No.~~} Absent without permission? {*~~Yes~~ / *No.} Guilty of insubordination? {*~~Yes~~ / *No.}

C. Hanes Johnson
A. A. Surg. U. S. Public Health Service.

NOTICE OF MEDICAL TRANSFER

_____, who has been under {*inpatient / *outpatient}
(Patient's name, service number, rank or rating, and unit)
treatment at _____ {*office / *hospital} at _____ for
(Diagnosis)
_____ since _____, 193 , has been
transferred this date _____, 193 , to the U. S. Marine Hospital at _____
for further treatment.

_____
U. S. Public Health Service.

*Strike out words not applicable.

2—663

FOLLOW INSTRUCTIONS ON BACK

U. S. COAST GUARD RECD FEB 17 1942

FILE C.M.

Alan B. (209-630) Surfman. Burnt Island LB. Station.
(Name, surname first) (Service number) (Rank or rating) (Unit)

APPLICATION TO THE U. S. PUBLIC HEALTH SERVICE FOR RELIEF FOR THE PERSONNEL OF THE U. S. COAST GUARD

~~REGULAR~~
*SPECIAL
TEMPORARY
(Enlistment status)

Place Port Clyde, Maine., Date 5 February, 1942.

To: Dr. Harold C. Jameson U.S.P.H.S.

Rockland, Maine.

SIR: You are requested to examine the above-named {~~*officer~~ / *enlisted man} of the U. S. Coast Guard, attached to the above-named unit, and furnish him such treatment as may be required. It is requested that the RETURN MEDICAL CERTIFICATE be returned to Burnt Island LB. Station, Port Clyde, Maine.

Alan B. Watts
Alan B. Watts.
(Signature of patient)

John E. Holmes, C.B.M.(a)(Pro).
Commanding Officer. U. S. Coast Guard.

RETURN MEDICAL CERTIFICATE

Place Rockland, Maine, Date February 5, 1942

I CERTIFY that I have examined the above-named person and find him suffering from

(0119) Anti-inoculation for tetanus.
(Give diagnosis by number and name according to official nomenclature)

My professional opinion in the case is expressed below for the information of the Coast Guard administrative officers. Incident of service? {*Yes. / *~~No.~~} Fit for duty? {*Yes. / *~~No.~~} Absent from duty on account of the effects of a disease, as distinguished from injury, directly attributable to and immediately following his own intemperate use of alcoholic liquor or habit-forming drug? {*~~Yes.~~ / *No.} Absent from duty on account of the direct effects of a venereal disease due to his own misconduct? {*~~Yes.~~ / *No.} If "yes," did the initial symptoms appear less or more than one year ago? {*Less. / *More.} Treatment will require approximately .....days absence from duty. He was admitted to {*~~inpatient~~ / *outpatient} treatment at 463 Main Street, Rockland, Maine {*~~hospital~~ / *office} on February 5, 1942.

C. Harold Jameson
K. A. Burg. U. S. Public Health Service.

*Having been informed that I am suffering from .....
(Diagnosis)
and that in the opinion of the medical officer, this disease is the result of my own misconduct, I (*do not) desire to submit a statement. (Attach statement if made.)

.....
(Patient's signature)

WITNESS:

.....
(Signature of medical officer)

..... U. S. Public Health Service.

*Strike out words not applicable.

U. S. COAST GUARD RECD FEB 21 1942 BY MEDICAL SECTION

2—663

Form 2522
TREASURY DEPARTMENT
U. S. COAST GUARD
Revised Oct., 1932

FOLLOW INSTRUCTIONS ON BACK

FILE C.M.

WATTS, Alan B. (209-630) Surfman Burnt Island LB. Station.
(Name, surname first) (Service number) (Rank or rating) (Unit)

*REGULAR
*SPECIAL
TEMPORARY
(Enlistment status)

FINAL MEDICAL CERTIFICATE

Place Rockland, Maine, Date March 3y, 1942

To: BURNT ISLAND LIFEBOAT STATION
(Coast Guard unit)

PORT CLYDE, MAINE
(Address)

U. S. COAST GUARD (M)
MAR 6 1942

The above-named patient was discharged from {*inpatient / *outpatient} treatment as shown below:

DIAGNOSIS (By nomenclature name and number)	DIAGNOSIS NUMBER	PERIOD OF TREATMENT FOR EACH CONDITION	
		FROM	TO
Antityphoid inoculation	0122	February17	March 3

OFFICE
APR 3 - 1942
INSPECTOR IN CHIEF

He {*is / *is not} fit for duty. REMARKS (Recommendations as to sick leave, further treatment, etc.):

CONDUCT REPORT:

Did the patient cooperate in his treatment? {*Yes. / *No.} Absent without permission? {*Yes / *No.} Guilty of insubordination? {*Yes / *No.}

A. A. Surg. *U. S. Public Health Service.*

NOTICE OF MEDICAL TRANSFER

(Patient's name, service number, rank or rating, and unit), who has been under {*inpatient / *outpatient} treatment at {*office / *hospital} at for
(Diagnosis)
since , 193 , has been transferred this date , 193 , to the U. S. Marine Hospital at for further treatment.

U. S. Public Health Service.

*Strike out words not applicable.

2—663

FOLLOW INSTRUCTIONS ON BACK

FILE C.M.

(surname first) (209-630) (Service number) Surfman Burnt Island LB. Station. (Rank or rating) (Unit)

...ON TO THE U. S. PUBLIC HEALTH SERVICE FOR RELIEF FOR THE PERSONNEL OF THE U. S. COAST GUARD

RECEIVED MAR 5 1942 BOSTON DISTRICT U.S. COAST GUARD

~~REGULAR~~ SPECIAL TEMPORARY (Enlistment status)

Place Port Clyde, Maine, Date 17 February, 1942

To: Dr. Harold C. Jameson U.S.P.H.S.

Rockland, Maine.

U.S. COAST GUARD RECD MAR 6 1942

SIR: You are requested to examine the above-named {~~*officer~~ / *enlisted man} of the U.S. Coast Guard, attached to the above-named unit, and furnish him such treatment as may be required. It is requested that the RETURN MEDICAL CERTIFICATE be returned to Burnt Island LB. Station, Port Clyde, Maine.

Alan B. Watts
Alan B. Watts
(Signature of patient)

John R. Holmes
John R. Holmes Commanding Officer.
C.B.M. (a) (Pro). U. S. Coast Guard.

RETURN MEDICAL CERTIFICATE

Place Rockland, Maine, Date February 17, 1942

I CERTIFY that I have examined the above-named person and find him suffering from

(0122) Antityphoid inoculation
(Give diagnosis by number and name according to official nomenclature)

My professional opinion in the case is expressed below for the information of the Coast Guard administrative officers. Incident of service? {*Yes. / *~~No.~~} Fit for duty? {*Yes. / *~~No~~} Absent from duty on account of the effects of a disease, as distinguished from injury, directly attributable to and immediately following his own intemperate use of alcoholic liquor or habit-forming drug? {*~~Yes~~ / *No.} Absent from duty on account of the direct effects of a venereal disease due to his own misconduct? {*~~Yes~~ / *No.} If "yes," did the initial symptoms appear less or more than one year ago? {*Less. / *More.} Treatment will require approximately ..... days absence from duty. He was admitted to {*~~hospital~~ / *outpatient} treatment at 463 Main Street, Rockland, Maine {*~~hospital~~ / *office} on February 17, 1942.

C. Harold Jameson.
A. A. Surg. U. S. Public Health Service.

*Having been informed that I am suffering from .....
(Diagnosis)
and that in the opinion of the medical officer, this disease is the result of my own misconduct, I (*do not) desire to submit a statement. (Attach statement if made.)

OFFICE APR 3 - 1942 INSPECTOR IN CHIEF

U. S. COAST GUARD REC'D MAR 4 1942 MEDICAL SECTION

.....
(Patient's signature)

WITNESS:

.....
(Signature of medical officer)

..... U. S. Public Health Service.

*Strike out words not applicable.

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U. S. COAST GUARD (2)

JAN 5 - 1942

ADDRESS THE COMMANDANT, U. S. COAST GUARD AND REFER TO No. P-73.

File EGH

HEADQUARTERS

TREASURY DEPARTMENT

UNITED STATES COAST GUARD

WASHINGTON

Burnt Island OCT 11 1941

OCT 7 1941

BOSTON DISTRICT RECEIVED JAN 3 1942 U. S. COAST GUARD

From: Commandant.
To: Commander, Boston District.

Subject: WATTS, Alan B. (209-630), Surf.; good conduct medal.

Reference: (a) Your letter, 17 February, 1941 (73).

Inclosure: (A) X Good conduct medal.
Good conduct medal and bar.
Good conduct bar.

1. In compliance with the recommendation contained in reference (a), inclosure (A) is forwarded for delivery to the subject-named man.

2. This award should be noted in the man's current service record and, if practicable, should be delivered at general muster.

3. Upon receipt hereof, acknowledge receipt of this inclosure by indorsement hereon.

J. R. HINNANT,
By direction.

-73 First Indorsement

BOSTON DISTRICT,
Boston, Massachusetts,
9 October, 1941.

From: Commander, Boston District.
To: Commanding Officer, PORT CLYDE STATION.

1. Forwarded for delivery to subject man. Acknowledge receipt of inclosure by indorsement hereon.

O. A. LITTLEFIELD,
By direction.

U. S. COAST GUARD (CG)
RECEIVED JAN 5 - 1942

73

OFFICE,SCGO,1ND
73.

3rd Indorsement

Boston, Mass.
3 January, 1942.

Form: Senior Coast Guard Officer,First Naval District.
To : Commandant.

Subject: WATTS, Alan B. (209-630) Surf.; good conduct medal.

1. Forwarded.

C. A. LITTLEFIELD,
By direction.

P-73.

TREASURY DEPARTMENT

UNITED STATES COAST GUARD

OFFICE OF COMMANDER
BOSTON DISTRICT

Boston, Massachusetts, 16 December, 1941.

From: Commandant.
To: Senior Coast Guard Officer, First Naval District.

Subject: Good conduct medals and bars.

References:
(a) Headquarters' letter, 18 September, 1941 (P-73), transmitting two bars for BATT, Stanley (210-006), B.M.2c.(Pro.)
(b) Headquarters' letter, 18 September, 1941 (P-73), transmitting one bar for BRANDANGER, Lawrence R. (101-248), C.B.M.(a), Small Craft.
(c) Headquarters' letter, 18 September, 1941 (P-73), transmitting one bar for CHAPLIK, Leonard J. (101-940), C. Y.
(d) Headquarters' letter, 10 October, 1941 (P-73), transmitting one medal for FRANKEN, Joseph E. (215-645), Surf.
(e) Headquarters' letter, 6 October, 1941 (P-73), transmitting one bar for PHINNEY, Luther C. (108-391), Surf.
(f) Headquarters' letter, 7 October, 1941 (P-73), transmitting one medal for RONGNER, George E. (210-620), Surf.
(g) Headquarters' letter, 7 October, 1941 (P-73), transmitting one medal for WATTS, Alan B. (209-630), Surf.

1. References (a) to (g) transmitted good conduct medals and bars to be awarded to the above-named men. Receipt of these medals and bars has not been acknowledged as requested in paragraph 3 of these references. It is requested that Headquarters be advised regarding this matter.

C. M. JONES,
By direction.

73

TREASURY DEPARTMENT

UNITED STATES COAST GUARD

OFFICE OF COMMANDER
BOSTON DISTRICT

Boston, Massachusetts,
17 February, 1941.

U. S. COAST GUARD
FEB 18 1941

From: Commander, Boston District.
To : Commandant.

Subject: WATTS, Alan B. (209-630) Surfman; recommendation for good conduct medal.

Reference: (a) Articles 5161-5166, inclusive, Personnel Instructions.

1. The above-named man is hereby recommended for a good conduct medal for his three years service terminated by honorable discharge on 14 February, 1941. His marks in conduct were 4.0 throughout his enlistment.

O. A. LITTLEFIELD,
By direction.

no card record
medal due
2-14-41
Burnt Island L.B. Sta.

P-73.

OCT 7 1941

From: Commandant.
To: **Commander, Boston District.**

Subject: **WATTS, Alan B. (209-630), Surf.; good conduct medal.**

Reference: (a) **Your letter, 17 February, 1941 (73).**

Inclosure: (A) **X** Good conduct medal.
Good conduct medal and bar.
Good conduct bar.

1. In compliance with the recommendation contained in reference (a), inclosure (A) is forwarded for delivery to the subject-named man.

2. This award should be noted in the man's current service record and, if practicable, should be delivered at general muster.

3. Upon receipt hereof, acknowledge receipt of this inclosure by indorsement hereon.

J. R. HINNANT,
By direction.

IN REPLYING REFER
TO NO. COX-14118-E

U. S. COAST GUARD (13)
REC'D AUG 29 1941

ADDRESS ALL COMMUNICATIONS TO:
DIRECTOR,
U. S. COAST GUARD INSTITUTE,
NEW LONDON, CONNECTICUT

UNITED STATES COAST GUARD INSTITUTE
NEW LONDON, CONNECTICUT

20 August, 1941

From: Director.
To: Commander, Boston District.

Subject: Completion of rating course for Cox., (97% - 3.88),
dated 20 August, 1941,
case of WATTS, Alan B. (209-630), Surf.

Reference: (a) Par. 7 (e) Circular 112, Regulations.
(b) " 7 (f) " " "

Inclosure: 1. Certificate of graduation.

1. The Institute takes pleasure in transmitting herewith inclosure (1) in accordance with reference (a).

2. A copy of this letter should be placed in subject named man's file and proper notations made on the Service Record and Continuous Service Certificate in accordance with reference (b).

J. S. ROSENTHAL,
By direction

Copy to:
HEADQUARTERS

Form No. 2599
TREASURY DEPARTMENT
U. S. COAST GUARD
(Revised 1937)

U. S. COAST GUARD (10)

REC'D JUL 8 1941

REPORT OF CHANGE IN PERSONNEL

WATTS. (Surname) Alan (First name) B. (Middle initial) (209-630) (Service No.) Surfman. (Rank or rating)

BURNT ISLAND LIFEBOAT STATION. (Unit) Port Clyde, Maine. (Place) 4 July, 1941. (Date)

Reported at 2:00 a.m. this date, from temporary duty at Sandwich Station.

AUTHORITY: Boston District, Dispatch 310245

John R. Holmes.
John R. Holmes. (Commanding)

Officer in Charge. (Title)

SPACE BELOW IS FOR HEADQUARTERS' USE ONLY

LAW	PERSONNEL RECORDS		
	STATISTICS	CORRESPONDENCE	RECORDS

U. S. GOVERNMENT PRINTING OFFICE 10935

Form No. 2599
TREASURY DEPARTMENT
U. S. COAST GUARD
(Revised 1937)

U. S. COAST GUARD
REC'D JUN 9 1941

REPORT OF CHANGE IN PERSONNEL

WATTS,	Alan	B	2099-630	SURFMAN
(Surname)	(First name)	(Middle initial)	(Service No.)	(Rank or rating)

SANDWICH STATION	SANDWICH, MASS.	1 June, 1941.
(Unit)	(Place)	(Date)

BOSTON DISTRICT
RECEIVED
JUN 6 1941
U.S. COAST GUARD

REPORTED FOR TEMPORARY DUTY THIS DATE AT 5:30 a.m.

AUTHORITY: BOSTON DISTRICT DISPATCH 31st.

F. C. POLLARD
(Commanding)

LIEUT.COMDR. USCG
(Title)

SPACE BELOW IS FOR HEADQUARTERS' USE ONLY

LAW	PERSONNEL RECORDS		
	STATISTICS	CORRESPONDENCE	RECORDS

U. S. GOVERNMENT PRINTING OFFICE

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

U. S. COAST GUARD
RECD JUN 6 1941

REPORT OF CHANGE IN PERSONNEL

WATTS, (Surname) Alan (First name) B. (Middle initial) (209-630) (Service No.) Surfman. (Rank or rating)

Burnt Island Lifeboat Station. (Unit) Port Clyde, Maine. (Place) 31 May, 1941. (Date)

Departed Station at 2:00 p.m., this date, enroute Sandwich Lifeboat Station, for assignment to temporary duty.

BOSTON DISTRICT RECEIVED JUN 3 1941 U.S. COAST GUARD

AUTHORITY: Boston District Dispatch 310245.

John R. Holmes.
(Commanding)

Officer in Charge.
(Title)

SPACE BELOW IS FOR HEADQUARTERS' USE ONLY

LAW	PERSONNEL RECORDS		
	Statistics	Correspondence	Records

U. S. GOVERNMENT PRINTING OFFICE 0 10935

Form 2500 B
TREASURY DEPARTMENT
U. S. Coast Guard
Revised Nov., 1929

SPECIAL TEMPORARY ENLISTMENT CONTRACT

The Act approved April 21, 1924, provides:

"Under such regulations as he may prescribe, the Secretary of the Treasury is authorized to appoint temporary warrant officers, and to make special temporary enlistments, in the Coast Guard. No person shall be entitled to retirement because of his temporary appointment or enlistment under this section."

~~RE~~ ENLISTMENT [a] of WATTS, Alan Brennen (Full name, surname to left) as Surfman. (Rating)

U. S. Coast Guard ~~Cutter~~ Station Burnt Island Lifeboat Boston District, Port Clyde, Maine. (Location of vessel, or P. O. address of station)

(Draw line through designation not applying)

Accepted for enlistment at Burnt Island LB. Station. (Place)

1. I, Alan Brennen Watts. (Full name), this 15 day of February, 1941, desiring to enlist in the United States Coast Guard, do declare that I am of legal age (or have legal consent) to enlist; that I am of good habits and character; that I have never deserted nor received a dishonorable discharge from the United States Coast Guard, Army, Navy, Marine Corps, Revenue-Cutter Service, or Life-Saving Service; that I have never been discharged from the United States service, nor any other service, through sentence of either a civil or a military court; and that I have never been discharged from any service, civil or military, except with good character, and for the reasons given by me to the enlisting officer prior to enlistment.

2. I was born in Jonesboro, Maine., on 1 January, 1917 Citizenship [b] NB.

If naturalized, place and date of naturalization ..... Certificate number .....

If intentions declared, place and date of declaration .....

Occupation or trade Surfman. Home address Jonesboro, Maine.

Full name and address of the following: Louise Watts, Tenants Harbor, Maine. (Wife, if any)

Wayne Alan Watts. Tenants, Harbor, Maine. (Children under 16 years of age. Specify ages of children)

.....

Florence L. Watts. Jonesboro, Maine. (Mother, if living) Widowed? No.

..... (Next of kin, or person interested, if there are none of the above)

3. I certify that I am prepared to support my dependents on pay received for service under this enlistment and that there do not now exist, nor can I foresee, any circumstances connected with the support of my dependents nor any conditions in my domestic affairs which would cause me to seek a discharge on account of dependency or the need for my presence at home, prior to the expiration of this enlistment.

4. I certify that the contract of enlistment has been read by me and fully explained by the enlisting officer and that no promises of any kind have been made to me concerning assignment to duty or promotion during my enlistment.

5. I further certify that I have never been arrested by civil authorities and have never been in a reform school, jail, or penitentiary, and have never been convicted or confined other than indicated herein - (State fully nature of offense, if any, and nature of institution in which incarcerated)

6. I have ..... (If "not," so state) had previous service under the United States in the Coast Guard, ~~Army, Navy, Marine Corps, Revenue-Cutter Service, or Life-Saving Service,~~ and I certify that the discharge or discharges therefrom which I have produced to the enlisting officer is or are the latest received by me.

7. I do not now belong to any branch, either active or reserve, of the military or naval service of the United States, or of any of the several States.

8. I was last discharged from the U. S. Coast Guard on 14 February, 1941, from ~~Cutter~~ Station Burnt Island LB. (Strike out one) with HONORABLE (Kind of discharge) discharge, herewith submitted, serial No. .....

9. I agree to and with the United States of America, represented by John R. Holmes., (Name of enlisting officer) United States Coast Guard, in manner and form following, that is to say:

In the first place, I agree for the considerations hereinafter mentioned to enter the service of the United States Coast Guard, and [illegible] and seasonable time to repair to such vessel or station as I may be ordered to join, and to the utmost of my power and ability [illegible]charge my several services or duties, and be in everything conformable and obedient to the lawful commands of the officers who [illegible] from time to time be placed over me.

Secondly, I oblige and subject myself, and for that purpose covenant and agree, to serve during the term of Three YEARS from the date first above written, unless sooner discharged by proper authority; and also to the condition that said period may be temporarily extended by reason of duty away from my usual station, or during an emergency, to subserve the interests of the Government; and to the further condition that the said period shall be extended to make good any time in excess of one day lost by absence on account of disease resulting from my own intemperate use of drugs or alcoholic liquors or other misconduct, so that such extension with the time served by me prior thereto will amount to a full term of Three YEARS, and I also oblige myself during such service to comply with and be subject to such laws, regulations, and discipline as are, or may be, established for the government of the United States Coast Guard, and to submit to treatment for the prevention of smallpox, typhoid (typhoid prophylaxis), and such other preventive measures as may be considered necessary by Coast Guard authorities. If discharged by sentence of a Coast Guard court, or by reason of bad conduct, undesirability or inaptitude, I agree to surrender my uniforms for a suit of civilian clothes.

Thirdly, the United States of America, represented by John R. Holmes. (Name of enlisting officer), United States Coast Guard, does hereby covenant and agree to and with the Said Alan Brennen Watts. (Name of person enlisting) who has hereunto signed his

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[a] In cases of reenlistment prefix "Re."

[b] Citizenship: Use expressions "NB" for native born; "NZ" for naturalized; "AD" for alien, intentions declared; "A" for alien; "NPI" for native of Philippine Islands; "NPR" for native of Porto Rico.

2—7976

name, that he shall be paid in consideration of such services, the amount now established, or that may be established, by authority of law, as the pay of the ratings which may, from time to time, be assigned him, subject to such forfeitures, deductions, and retentions as may be ordered by competent authority in accordance with the laws of the United States and the Regulations governing the Coast Guard, BUT HE SHALL NOT BE ENTITLED TO RETIREMENT BECAUSE OF THIS SPECIAL TEMPORARY ENLISTMENT.

Alan Brennen Watts
Alan Brennen Watts, (209-630) Surfman.
(Signature of enlisted person)

UNITED STATES OF AMERICA,

By John R. Holmes.
John R. Holmes, Officer in Charge.
(Signature and rank of enlisting officer)

10. I CERTIFY to the signature of the above person enlisted, and that I have strictly complied in his case with the Regulations of the United States Coast Guard governing enlistments, and that no promise of any kind concerning assignment to duty or promotion during this enlistment has been made.

John R. Holmes.
John R. Holmes, Officer in Charge, U. S. C. G., *Enlisting Officer.*

---

11. OATH OF ALLEGIANCE

Alan Brennen Watts.

I, Alan Brennen Watts., do solemnly swear (or affirm) that I will bear true faith and
(Full name)
allegiance to the UNITED STATES OF AMERICA, and that I will serve them honestly against all their enemies whomsoever; and that I will obey the orders of the President of the United States, and the orders of the officers appointed over me, according to the laws and Regulations for the government of the United States Coast Guard.

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

Alan Brennen Watts
Alan Brennen Watts, (209-630) Surfman.
(Signature of enlisted person)

Subscribed and sworn to before me this 15 day of February, A. D. 19 41.

Ralph L. Linnemeier

(Comdg. officer, officer in charge or notary public)

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12. DESCRIPTIVE LIST

Age 24 years 1 months. Height 5 feet 10 inches. Weight 151 pounds. Eyes Blue

Hair light brown Complexion light Color White Married Yes.

Distinguishing marks None.

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13. CERTIFICATE AS TO PARENT OR GUARDIAN

(To be used only in the enlistment of a minor who states that he has no parent or guardian residing in the United States or in the insular possessions of the United States)

I CERTIFY that I have neither a parent nor guardian
(Within the United States, in the territory or islands of the United States)

where this enlistment is made.

2—7976 U. S. GOVERNMENT PRINTING OFFICE 1940

Form 2500-C
TREASURY DEPARTMENT
U. S. COAST GUARD
Revised July 1935

SERVICE RECORD

RECORD OF WATTS, Alan Brennen (209-630)
(Full name, surname to the left) (Service No.)

1. TRANSFERS

Departed from—			Reported to—		
Unit	Date	Signature	Unit	Date	Signature

2. CHANGES IN RATING

Unit	Rated or disrated to—	Date	Signature
Burnt Island LB.	Advanced fr. Surf to B.M.2c.	6/10/42	John R. Holmes
Port Clyde Sta.	Adv. fr. B.M.2c(Pro) to B.M.1c (Pro)	1-27-43	John R. Holmes

2—13678

RECORD OF WATTS, Alan Brennen (209-630)
(Full name, surname to the left) (Service No.)

3. EFFICIENCY MARKS

SCALE OF MARKS: 4.0, Perfect; 3.5 to 3.9, Excellent; 3.0 to 3.4, Good; 2.5 to 2.9, Satisfactory; 2.0 to 2.4, Indifferent; 1.0 to 1.9, Poor; 0.0 to 0.9, Bad

Date	Proficiency in rating	Conduct	Sobriety	Ability as leader of men	Health	Adaptability for warrant grade	Vessel or station	Signature
3-31-41	Less than one Month.						Burnt Island LB.	John R. C. Holmes
Average								

Upon receipt of enlistment record it shall be checked to see that previous marks have been entered. The last unit at which service is rendered will be held responsible for the completeness of the marks.

4. SWIMMING QUALIFICATIONS

Unit	Date of qualification	Signature
Burnt Island LB.	Sta. 8 August, 1938.	

U. S. GOVERNMENT PRINTING OFFICE 2—13678

Record of WATTS, Alen B. (209-630)
(Full name, surname to the left) (Service No.)

3. EFFICIENCY MARKS

Date	Rate	Proficiency in rating	Seamanship	Mechanical ability	Ability as leader of men	Special Qualification or Special Detail	Conduct	Signature
3-31-41	Surfman.	Less Than one Month.					4.0	John R. Holmes
6-30-41	Surfman.	3.3	3.4	2.9	2.9		4.0	John R. Holmes
9-30-41	Surfman.	3.3	3.4	2.9	2.9		4.0	John R. Holmes
12-31-41	Surfman.	3.3	3.4	2.9	3.0		4.0	John R. Holmes
3-31-41	Surfman.	3.3	3.4	2.9	3.2		4.0	John R. Holmes.
6-30-42	B.M.2C(P)	3.3	3.5	2.9	3.4		4.0	John R. Holmes.
9-30-42	B.M.2c(P)	3.3	3.5	2.9	3.4		4.0	John R. Holmes CGSMC
12-31-42	B.M.2c(P)	3.3	3.5	2.9	3.4		4.0	John R. Holmes CGSMC
3-31-43	B.M.1c(P)	3.3	3.5	2.9	3.4	CG-38668	4.0	J R Holmes Ens
6-30-43	B.M.1c	3.5	3.5	3.0	3.5	CG-38668	4.0	J R Holmes Ensign
9-30-43	B.M.1c	3.5	3.5	3.0	3.5	CG-38668	4.0	J R Holmes Ensign CG
12-31-43	B.M.1c	3.5	3.5	3.2	3.5	CG-38668	4.0	J R Holmes, Ensign
3-31-44	B.M.1c	3.6	3.5	3.2	3.5	CG-38668	4.0	J R Holmes
5-4-44	B.M.1c	3.6	3.5	3.2	3.5	CG-38668	4.0	J R Holmes CO
Average		3.5	3.5	3.0	3.4		4.0	J R Holmes

Upon receipt of Enlistment Record it shall be checked to see that previous marks have been entered. The last unit at which service is rendered will be held responsible for the completeness of the marks.

4. SWIMMING QUALIFICATIONS

UNIT	DATE OF QUALIFICATION	SIGNATURE

Form 2500-C
TREASURY DEPARTMENT
U. S. Coast Guard
Revised July 1935

RECORD OF WATTS, Alan BRENNEN Surfman. (209-630(
(Full name, surname to the left) (Service No.)

5. TRIALS BY COAST GUARD COURTS AND RESULT

Unit	Date	Remarks: Kind of court, charge, sentence of court, and action of reviewing authority to be shown in this column	Signature

6. MERITORIOUS CONDUCT

(Award of medals, citations, Headquarters commendation, honorable discharge button, etc.)

Unit	Date	Remarks	Signature
Burnt Island	10-11-41	Issued Good Conduct Medal.	John R. Holmes
Burnt Is.LB.Sta.	11-2-41	Issued 1 Expert Rifleman's Medal.	John R. Holmes

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RECORD OF WATTS, Alan Brennen (209-630)
(Full name, surname to the left) (Service No.)

7. SPECIAL QUALIFICATIONS

Unit	Date	Proficient in—	Signature
Burnt Island LB. Sta.	8/20/41	Completed rated Course for Cox. (97% 3.88	John R. Holmes

8. DETAILS

(Will include inter-unit transfers)

Unit	Date From—	Date To—	Duty	Signature
BURNT ISLAND LB. STA.	6-30-41	7-4-41	Temp. Duty at Sandwich Sta.	John R. Holmes
BURNT ISLAND LB. STA.	1-26-43	5-4-44	CG-38668	John R. Holmes

U. S. GOVERNMENT PRINTING OFFICE 2—13678

Form 2500-C
TREASURY DEPARTMENT
U. S. Coast Guard
Revised July 1935

RECORD OF WATTS, Alan Brennen (209-630)
(Full name, surname to the left) (Service No.)

9. LEAVE ACCOUNT
WITH PAY

Unit	Date Departed	Date Returned	Number of days	Balance Annual	Balance Reenlist	Signature
Burnt Island LB.	2-15-41			30	10	John R. Holmes
Burnt Island LB.	6-21-41	6-24-41	3	27	10	John R. Holmes
Burnt Island LB.	11-1-41	11-12-41	10	17	10	John R. Holmes
Burnt Island LB.	12-4-41	12-8-41	3	14	10	John R. Holmes
Burnt Is. LB. Sta	12-16-41	12-24-41	7	7	10	John R. Holmes
Burnt Isl.LB. Sta.	1-15-42	1-23-42	7	0	10	John R. Holmes
Burnt Island LB.	2-15-42			30	10	John R. Holmes
Burnt Island LB.	5-14-42	5-25-42	10	20	10	John R. Holmes
Burnt Island LB.	11-7-42	11-18-42	10	10	10	John R. Holmes
Picket Boat 38668	2-3-43	2-14-43	10	0	10	John R. Holmes
Picket Boat 38668	2-15-43			30	10	John R. Holmes
Picket Boat 38668	6-1-43	6-12-43	10	20	10	John R. Holmes
Picket Boat 38668	11-6-43	11-17-43	10	10	10	John R. Holmes
Picket Boat 38668	12-31-43	1-11-44	10	0	10	John R. Holmes
Picket Boat 38668	2-15-44			30	10	John R. Holmes

2—13678

RECORD OF WATTS, Alan Brennen (209-630)
(Full name, surname to the left) (Service No.)

10. ABSENT FROM DUTY

(On account of sickness or injury due to own misconduct. Without leave (including overleave, desertion, imprisonment under civil arrest resulting in conviction), and absence from duty (confinement) while awaiting trial by a Coast Guard court resulting in a conviction, or while serving a sentence.) (Absences less than 24 hours not to be entered.) (Show inclusive dates.)

Unit	Months	Days	From—	To—	Remarks	Signature
PORT CLYDE STA.	NO DEDUCTIBLE TIME WHILE ATTACHED				TO THIS UNIT	J. R. Holmes C.S.

11. EXTENSION OF ENLISTMENT

Unit	Period	Reason	Signature
CG-38668	From 15 Feb. 1944) to 4 May. 1944.)	Awaiting receipt of Hdqts. 3rd Indorsement authorizing re-enlistment in regular establishment.	J. R. Holmes C.S.

MAY 12 1944
CODED
NO. 6 H.W.

12. ON DISCHARGE

Date 4 May., 1944 Place Port Clyde Station Serial No. A68652
Kind of discharge Honorable Authority for Hqs. 3d Indorsement 1 May. 1944.
Discharged on account of Expiration of enlistment
Is recommended for reenlistment.
(If "not," so state, and show reason)
SIGNATURE J. R. Holmes. J. R. Holmes, Lieut. (jg)

13. ON DESERTION

Unit	Date	Remarks	Signature

U. S. GOVERNMENT PRINTING OFFICE 2—13678

RECORD OF WATTS, Alan Brennen (209-630)
(Full name, surname to the left) (Service No.)

14. ON RETIREMENT

Unit	Date	Cause	Authority	Signature

15. ON DEATH

Unit	Date	Cause	Place of burial	Disposition of effects	Was death in line of duty	Signature

16. RECORD OF SERVICE

Creditable Coast Guard service during this enlistment:

3 (Years) 2 (Months) 20 (Days)

(Notations under article 10 to be considered when executing this article.)

17. CERTIFICATE UPON TERMINATION OF SERVICE

Monthly rate of pay when discharged, $ 125.40

The within-named man has been furnished travel allowance amounting to $ ——

at the rate of —— cents per mile from —— to ——

—— and paid $ —— in full to date of discharge. Name of

pay officer ——

Address subsequent to discharge will be:

—— Street,

Tenants Harbor City, Maine State.

HAS SIGNIFIED INTENTION { To / Not to } REENLIST NEXT DAY.

Certified to be correct upon termination of service 4 May, 19 44

J. R. Holmes

J. R. Holmes, Lieut. (jg)

Commanding Officer ~~*Officer in Charge.*~~

U. S. GOVERNMENT PRINTING OFFICE 2—13678

Form 2529
Treasury Department
U.S.Coast Guard
Revised September 2,1941

UNITED STATES COAST GUARD

DESIGNATION OF BENEFICIARIES FOR DEATH GRATUITY

PORT CLYDE STATION.
Burnt Island LB. Station (Unit)

Port Clyde, Maine. (Place)

1st. April 1942. (Date)

From: WATTS, Alan Brennen . (209-630) Surfman
To : Commandant (via Senior Coast Guard Officer), First Naval District.

1. In the event of my death I hereby designate beneficiary or beneficiaries for payment of six month's pay, as provided in the Act of June 4, 1920, as amended by the Act of May 22, 1928, as follows:

Louise Watts. (Full name of wife, if not married, so state) — Tenants Harbor, Maine. (Address of wife)

Wayne Alan Watts. (Full name of child; if none, so state) — Tenants Harbor, Maine. (Address of child)

(Full name of child; if none, so state) — (Address of child)

(Full name of child; if none, so state) — (Address of child)

2. In the event of my leaving no widow or child, or of their decease before payment is made, I then designate as my beneficiary under the said act the following dependent relative:

Florence L. Watts. (Full name of relative) — Mother (Relationship) — Jonesboro, Maine. (Address of relative)

None. (State briefly wherein dependency exists)

3. In the event of the death of the above-named dependent relative before payment is made, I then designate as my beneficiary under said act the following dependent relative:

Fred H. Watts. (Full name of relative) — Father (Relationship) — Jonesboro, Maine. (Address of relative)

None exists. (State briefly wherein dependency exists)

I hereby swear (or affirm) that the statements made herein regarding dependency and relationship of the persons named above are true.

Subscribed and sworn to before me this 1st day of April, 19 42.

Ralph L. Simmons (Signature)

Notary Public (Rank or title)

Alan Brennen Watts (209-630) (Signature)

(Rank or rating)

Form 2500 B
TREASURY DEPARTMENT
U. S. Coast Guard
Revised Nov., 1929

SPECIAL TEMPORARY ENLISTMENT CONTRACT

The Act approved April 21, 1924, provides:

"Under such regulations as he may prescribe, the Secretary of the Treasury is authorized to appoint temporary warrant officers, and to make special temporary enlistments, in the Coast Guard. No person shall be entitled to retirement because of his temporary appointment or enlistment under this section."

~~RE~~ ENLISTMENT [a] of WATTS, Alan Brennon (Full name, surname to left) as Surfman. (Rating)

U. S. Coast Guard ~~Cutter~~ Station Burnt Island Lifeboat Boston District, Port Clyde, Maine. (Location of vessel, or P. O. address of station)

(Draw line through designation not applying)

Accepted for enlistment at Burnt Island LB. Station. (Place)

1. I, Alan Brennen Watts. (Full name), this 15 day of February, 1941, desiring to enlist in the United States Coast Guard, do declare that I am of legal age (or have legal consent) to enlist; that I am of good habits and character; that I have never deserted nor received a dishonorable discharge from the United States Coast Guard, Army, Navy, Marine Corps, Revenue-Cutter Service, or Life-Saving Service; that I have never been discharged from the United States service, nor any other service, through sentence of either a civil or a military court; and that I have never been discharged from any service, civil or military, except with good character, and for the reasons given by me to the enlisting officer prior to enlistment.

2. I was born in Jonesboro, Maine., on 1 January, 1917 Citizenship [b] NB.

If naturalized, place and date of naturalization ..... Certificate number .....

If intentions declared, place and date of declaration .....

Occupation or trade Surfman. Home address Jonesboro, Maine.

Full name and address of the following: Louise Watts, Tenants Harbor, Maine. (Wife, if any)

Wayne Alan Watts. Tenants, Harbor, Maine. (Children under 16 years of age. Specify ages of children)

.....

Florence L. Watts. Jonesboro, Maine. (Mother, if living) Widowed? No.

..... (Next of kin, or person interested, if there are none of the above)

3. I certify that I am prepared to support my dependents on pay received for service under this enlistment and that there do not now exist, nor can I foresee, any circumstances connected with the support of my dependents nor any conditions in my domestic affairs which would cause me to seek a discharge on account of dependency or the need for my presence at home, prior to the expiration of this enlistment.

4. I certify that the contract of enlistment has been read by me and fully explained by the enlisting officer and that no promises of any kind have been made to me concerning assignment to duty or promotion during my enlistment.

5. I further certify that I have never been arrested by civil authorities and have never been in a reform school, jail, or penitentiary, and have never been convicted or confined other than indicated herein - (State fully nature of offense, if any, and nature of institution in which incarcerated)

6. I have ..... (If "not," so state) had previous service under the United States in the Coast Guard, ~~Army, Navy, Marine Corps, Revenue-Cutter Service, or Life-Saving Service,~~ and I certify that the discharge or discharges therefrom which I have produced to the enlisting officer is or are the latest received by me.

7. I do not now belong to any branch, either active or reserve, of the military or naval service of the United States, or of any of the several States.

8. I was last discharged from the U. S. Coast Guard on 14 February, 1941, from ~~Cutter~~ Station Burnt Island LB. (Strike out one) with HONORABLE (Kind of discharge) discharge, herewith submitted, serial No. .....

9. I agree to and with the United States of America, represented by John R. Holmes, (Name of enlisting officer), United States Coast Guard, in manner and form following, that is to say:

In the first place, I agree for the considerations hereinafter mentioned to enter the service of the United States Coast Guard, and [illegible] and seasonable time to repair to such vessel or station as I may be ordered to join, and to the utmost of my power and ability [illegible]arge my several services or duties, and be in everything conformable and obedient to the lawful commands of the officers who [illegible] from time to time be placed over me.

Secondly, I oblige and subject myself, and for that purpose covenant and agree, to serve during the term of Three YEARS from the date first above written, unless sooner discharged by proper authority; and also to the condition that said period may be temporarily extended by reason of duty away from my usual station, or during an emergency, to subserve the interests of the Government; and to the further condition that the said period shall be extended to make good any time in excess of one day lost by absence on account of disease resulting from my own intemperate use of drugs or alcoholic liquors or other misconduct, so that such extension with the time served by me prior thereto will amount to a full term of Three YEARS, and I also oblige myself during such service to comply with and be subject to such laws, regulations, and discipline as are, or may be, established for the government of the United States Coast Guard, and to submit to treatment for the prevention of smallpox, typhoid (typhoid prophylaxis), and such other preventive measures as may be considered necessary by Coast Guard authorities. If discharged by sentence of a Coast Guard court, or by reason of bad conduct, undesirability or inaptitude, I agree to surrender my uniforms for a suit of civilian clothes.

Thirdly, the United States of America, represented by John R. Holmes. (Name of enlisting officer), United States Coast Guard, does hereby covenant and agree to and with the Said Alan Brennen Watts. (Name of person enlisting) who has hereunto signed his

---

[a] In cases of reenlistment prefix "Re."

[b] Citizenship: Use expressions "NB" for native born; "NZ" for naturalized; "AD" for alien, intentions declared; "A" for alien; "NPI" for native of Philippine Islands; "NPR" for native of Porto Rico.

2—7976

name, that he shall be paid in consideration of such services, the amount now established, or that may be established, by authority of law, as the pay of the ratings which may, from time to time, be assigned him, subject to such forfeitures, deductions, and retentions as may be ordered by competent authority in accordance with the laws of the United States and the Regulations governing the Coast Guard, BUT HE SHALL NOT BE ENTITLED TO RETIREMENT BECAUSE OF THIS SPECIAL TEMPORARY ENLISTMENT.

Alan Brennen Watts
Alan Brennen Watts, (209-630) Surfman.
(Signature of enlisted person)

UNITED STATES OF AMERICA,

By John R. Holmes.
John R. Holmes, Officer in Charge.
(Signature and rank of enlisting officer)

10. I CERTIFY to the signature of the above person enlisted, and that I have strictly complied in his case with the Regulations of the United States Coast Guard governing enlistments, and that no promise of any kind concerning assignment to duty or promotion during this enlistment has been made.

John R. Holmes.
John R. Holmes, Officer in Charge, U. S. C. G., *Enlisting Officer.*

---

11. OATH OF ALLEGIANCE

Alan Brennen Watts.

I, Alan Brennen Watts., do solemnly swear (or affirm) that I will bear true faith and
(Full name)
allegiance to the UNITED STATES OF AMERICA, and that I will serve them honestly against all their enemies whomsoever; and that I will obey the orders of the President of the United States, and the orders of the officers appointed over me, according to the laws and Regulations for the government of the United States Coast Guard.

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

Alan Brennen Watts
Alan Brennen Watts, (209-630) Surfman.
(Signature of enlisted person)

Subscribed and sworn to before me this 15 day of February, A. D. 19 41.

Ralph L. Simmons

(Commdg. officer, officer in charge or recruiting or notary public)

---

12. DESCRIPTIVE LIST

Age 24 years 1 months. Height 5 feet 10 inches. Weight 151 pounds. Eyes Blue

Hair light brown Complexion Light Color White Married Yes.

Distinguishing marks None.

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13. CERTIFICATE AS TO PARENT OR GUARDIAN

(To be used only in the enlistment of a minor who states that he has no parent or guardian residing in the United States or in the insular possessions of the United States)

I CERTIFY that I have neither a parent nor guardian
(Within the United States, in the territory or islands of the United States)

where this enlistment is made.

2—7976 U. S. GOVERNMENT PRINTING OFFICE 1940

Form 2500-C
TREASURY DEPARTMENT
U. S. COAST GUARD
Revised July 1935

SERVICE RECORD

RECORD OF WATTS, Alan Brennen (209-630)
(Full name, surname to the left) (Service No.)

1. TRANSFERS

Departed from—			Reported to—		
Unit	Date	Signature	Unit	Date	Signature

2. CHANGES IN RATING

Unit	Rated or disrated to—	Date	Signature
Burnt Island LB.	Advanced fr. Surf to B.M.2c.	6/10/42	John R. Holmes
Port Clyde Sta.	Adv. fr. B.M.2c(Pro) to B.M.1c (Pro)	1-27-43	John R. Holmes

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Record of WATTS, Alen B. (209-630)
(Full name, surname to the left) (Service No.)

3. EFFICIENCY MARKS

Date	Rate	Proficiency in rating	Seamanship	Mechanical ability	Ability as leader of men	Special Qualification or Special Detail	Conduct	Signature
3-31-41	Surfman.	Less Than one Month.					4.0	John R. Holmes
6-30-41	Surfman.	3.3	3.4	2.9	2.9		4.0	John R. Holmes
9-30-41	Surfman.	3.3	3.4	2.9	2.9		4.0	John R. Holmes
12-31-41	Surfman.	3.3	3.4	2.9	3.0		4.0	John R. Holmes
3-31-41	Surfman.	3.3	3.4	2.9	3.2		4.0	John R. Holmes.
6-30-42	B.M.2C(P)	3.3	3.5	2.9	3.4		4.0	John R. Holmes.
9-30-42	B.M.2c(P)	3.3	3.5	2.9	3.4		4.0	John R. Holmes CO
12-31-42	B.M.2c(P)	3.3	3.5	2.9	3.4		4.0	John R. Holmes CO
3-31-43	B.M.1c(P)	3.3	3.5	2.9	3.4	CG-38668	4.0	John R. Holmes CO
6-30-43	B.M.1c	3.5	3.5	3.0	3.5	CG-38668	4.0	John R. Holmes Ensign
9-30-43	B.M.1c	3.5	3.5	3.0	3.5	CG-38668	4.0	John R. Holmes Ensign CO
12-31-43	B.M.1c	3.5	3.5	3.2	3.5	CG-38668	4.0	John R. Holmes, Ensign
3-31-44	B.M.1c	3.6	3.5	3.2	3.5	CG-38668	4.0	John R. Holmes CO
5-4-44	B.M.1c	3.6	3.5	3.2	3.5	CG-38668	4.0	John R. Holmes CO
Average		3.5	3.5	3.0	3.4		4.0	John R. Holmes

Upon receipt of Enlistment Record it shall be checked to see that previous marks have been entered. The last unit at which service is rendered will be held responsible for the completeness of the marks.

4. SWIMMING QUALIFICATIONS

UNIT	DATE OF QUALIFICATION	SIGNATURE

Form 2500-C
TREASURY DEPARTMENT
U. S. COAST GUARD
Revised July 1935

RECORD OF WATTS, Alan BRENNEN Surfman. (209-630(
(Full name, surname to the left) (Service No.)

5. TRIALS BY COAST GUARD COURTS AND RESULT

Unit	Date	REMARKS: Kind of court, charge, sentence of court, and action of reviewing authority to be shown in this column	Signature

6. MERITORIOUS CONDUCT

(Award of medals, citations, Headquarters commendation, honorable discharge button, etc.)

Unit	Date	Remarks	Signature
Burnt Island	10-11-41	Issued Good Conduct Medal.	John R. Holmes
Burnt Is.LB.Sta.	11-2-41	Issued 1 Expert Rifleman's Medal.	John R. Holmes

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Form 2500-C
TREASURY DEPARTMENT
U. S. Coast Guard
Revised July 1935

RECORD OF WATTS, Alan Brennen (209-630)
(Full name, surname to the left) (Service No.)

9. LEAVE ACCOUNT
WITH PAY

Unit	Date Departed	Date Returned	Number of days	Balance Annual	Balance Reenlist	Signature
Burnt Island LB.	2-15-41			30	10	John R. Holmes
Burnt Island LB.	6-21-41	6-24-41	3	27	10	John R. Holmes
Burnt Island LB.	11-1-41	11-12-41	10	17	10	John R. Holmes
Burnt Island LB.	12-4-41	12-8-41	3	14	10	John R. Holmes
Burnt Is. LB. Sta	12-16-41	12-24-41	7	7	10	John R. Holmes
Burnt Isl. LB. Sta.	1-15-42	1-23-42	7	0	10	John R. Holmes
Burnt Island LB.	2-15-42			30	10	John R. Holmes
Burnt Island LB.	5-14-42	5-25-42	10	20	10	John R. Holmes
Burnt Island LB.	11-7-42	11-18-42	10	10	10	John R. Holmes
Picket Boat 38668	2-3-43	2-14-43	10	0	10	John R. Holmes
Picket Boat 38668	2-15-43			30	10	John R. Holmes
Picket Boat 38668	6-1-43	6-12-43	10	20	10	John R. Holmes
Picket Boat 38668	11-6-43	11-17-43	10	10	10	[illegible]
Picket Boat 38668	12-31-43	1-11-44	10	0	10	[illegible]
Picket Boat 38668	2-15-44			30	10	[illegible]

RECORD OF WATTS, Alan Brennen (209-630)
(Full name, surname to the left) (Service No.)

10. ABSENT FROM DUTY

(On account of sickness or injury due to own misconduct. Without leave (including overleave, desertion, imprisonment under civil arrest resulting in conviction), and absence from duty (confinement) while awaiting trial by a Coast Guard court resulting in a conviction, or while serving a sentence.) (Absences less than 24 hours not to be entered.) (Show inclusive dates.)

Unit	Months	Days	From—	To—	Remarks	Signature
PORT CLYDE STA.	NO DEDUCTIBLE TIME WHILE ATTACHED TO THIS UNIT					J. R. Holmes C.O.

11. EXTENSION OF ENLISTMENT

Unit	Period	Reason	Signature
CG-38668	From 15 Feb. 1944 to 4 May. 1944.	Awaiting receipt of Hdqts. 3rd Indorsement authorizing re-enlistment in regular establishment.	J. R. Holmes C.O.

MAY 12 1944
CODED
NO. 6 H.W.

12. ON DISCHARGE

Date 4 May., 1944 Place Port Clyde Station Serial No. A68652

Kind of discharge Honorable Authority for Hqs. 3d Indorsement 1 May. 1944.

Discharged on account of Expiration of enlistment

Is ____ recommended for reenlistment.
(If "not," so state, and show reason)

SIGNATURE J. R. Holmes. J. R. Holmes, Lieut. (jg)

13. ON DESERTION

Unit	Date	Remarks	Signature

U. S. GOVERNMENT PRINTING OFFICE 2—13678

RECORD OF WATTS, Alan Brennen (209-630)
(Full name, surname to the left) (Service No.)

14. ON RETIREMENT

Unit	Date	Cause	Authority	Signature

15. ON DEATH

Unit	Date	Cause	Place of burial	Disposition of effects	Was death in line of duty	Signature

16. RECORD OF SERVICE

Creditable Coast Guard service during this enlistment:

3 (Years) 2 (Months) 20 (Days)

(Notations under article 10 to be considered when executing this article.)

17. CERTIFICATE UPON TERMINATION OF SERVICE

Monthly rate of pay when discharged, $ 125.40

The within-named man has been furnished travel allowance amounting to $ —

at the rate of — cents per mile from — to —

— and paid $ — in full to date of discharge. Name of

pay officer —

Address subsequent to discharge will be:

— Street,

Tenants Harbor City, Maine State.

HAS SIGNIFIED INTENTION {To / ~~NOT TO~~} REENLIST NEXT DAY.

Certified to be correct upon termination of service 4 May, 19 44

J. R. Holmes, Lieut. (jg)

Commanding Officer ~~Officer in Charge~~.

U. S. GOVERNMENT PRINTING OFFICE 2—13678

Form 2529
Treasury Department
U.S.Coast Guard
Revised September 2,1941

UNITED STATES COAST GUARD

DESIGNATION OF BENEFICIARIES FOR DEATH GRATUITY

PORT CLYDE STATION.
Burnt Island LH. Station
(Unit)

Port Clyde, Maine.
(Place)

1st. April 1942.
(Date)

From: WATTS, Alan Brennen . (209-630) Surfman
To : Commandant (via Senior Coast Guard Officer, First Naval District.

1. In the event of my death I hereby designate beneficiary or beneficiaries for payment of six month's pay, as provided in the Act of June 4, 1920, as amended by the Act of May 22, 1928, as follows:

Louise Watts. (Full name of wife, if not married, so state)
Tenants Harbor, Maine. (Address of wife)

Wayne Alan Watts. (Full name of child; if none, so state)
Tenants Harbor, Maine. (Address of child)

(Full name of child; if none, so state)
(Address of child)

(Full name of child; if none, so state)
(Address of child)

2. In the event of my leaving no widow or child, or of their decease before payment is made, I then designate as my beneficiary under the said act the following dependent relative:

Florence I. Watts. (Full name of relative)
Mother (Relationship)
Jonesboro, Maine. (Address of relative)

None. (State briefly wherein dependency exists)

3. In the event of the death of the above-named dependent relative before payment is made, I then designate as my beneficiary under said act the following dependent relative:

Fred N. Watts. (Full name of relative)
Father (Relationship)
Jonesboro, Maine. (Address of relative)

None exists. (State briefly wherein dependency exists)

I hereby swear (or affirm) that the statements made herein regarding dependency and relationship of the persons named above are true.

Subscribed and sworn to before me this 1st day of April, 19 42.

Ralph L. Simmons
(Signature)

Notary Public
(Rank or title)

Alan Brennen Watts
Alan Brennen Watts. (209-630)
(Signature)

(Rank or rating)

REMARKS: .....

CERTIFICATE

~~We~~ / I } certify that { ~~we~~ / I } have personally made this physical examination and find that.....

He is physically qualified for Spec. Temp. Enlist.
(Enlistment, appointment, promotion)

He is physically qualified to perform the duties of Surfman
(Use in case of promotion of commissioned officer or annual examination) (Rank)

He is not physically qualified for .....

on account of.....

Clarence B Appleton
A. A. *Surgeon, U.S. Public Health Service.*

1st INDORSEMENT

29 January, 1941.
(Date)

Place Boston, Massachusetts.

From: Commander, Boston District.

To: Commandant.

~~Annual~~ Physical Examination for Reenlistment.

1. Forwarded for action. Present status: Surfman, STE.

O. A. WHITFIELD,
~~Commanding Dist. Comdr. Of in Chg~~
By direction.

2d INDORSEMENT

HEADQUARTERS MEDICAL OFFICE.
U.S. COAST GUARD, Washington.

FEB 1 1941
(Date)

The findings of the certificate are ~~not~~ approved

By direction of the Surgeon General:

Carl Michel
Medical Director, U.S. Public Health Service.

3d INDORSEMENT

HEADQUARTERS, WASHINGTON.

FEB 3 1941
(Date)

From: Commandant.

To: Commander, Boston District.

1. REENLISTMENT AUTHORIZED: STE ONLY

Insert this copy in health record.

By direction,

Faulkner
Chief, Personnel Section.
ASSISTANT CHIEF, DETAIL SECTION

U.S. GOVERNMENT PRINTING OFFICE 2—10141

2-3-41

WHITE Blank 19.

U. S. COAST GUA

REC'D JAN 30 1941

Form No. 2525 B
TREASURY DEPARTMENT
U.S. COAST GUARD

PHYSICAL EXAMINATION RECORD

(To be completely made up by medical officer, in duplicate)

Name Watts, Alan B. (Surname first) Service Number 209-630

Age: Years 21 Months 1 Color White

For: Special Temporary Enlistment (Special temporary or regular enlistment, appointment or promotion)

Rank or Rating Surfman

Place Port Clyde Date Jan. 18, 1941

Personal Medical History Usual Childhood diseases. Appendectomy 1934.

Vision: R.E. 20/ 20 L.E. 20/ 20 Corrected: R.E. 20/ ____ L.E. 20/ ____

Color blind? No Test used Holmgren's

Hearing: Conversational speech R.E. 30/ 30 L.E. 30/ 30

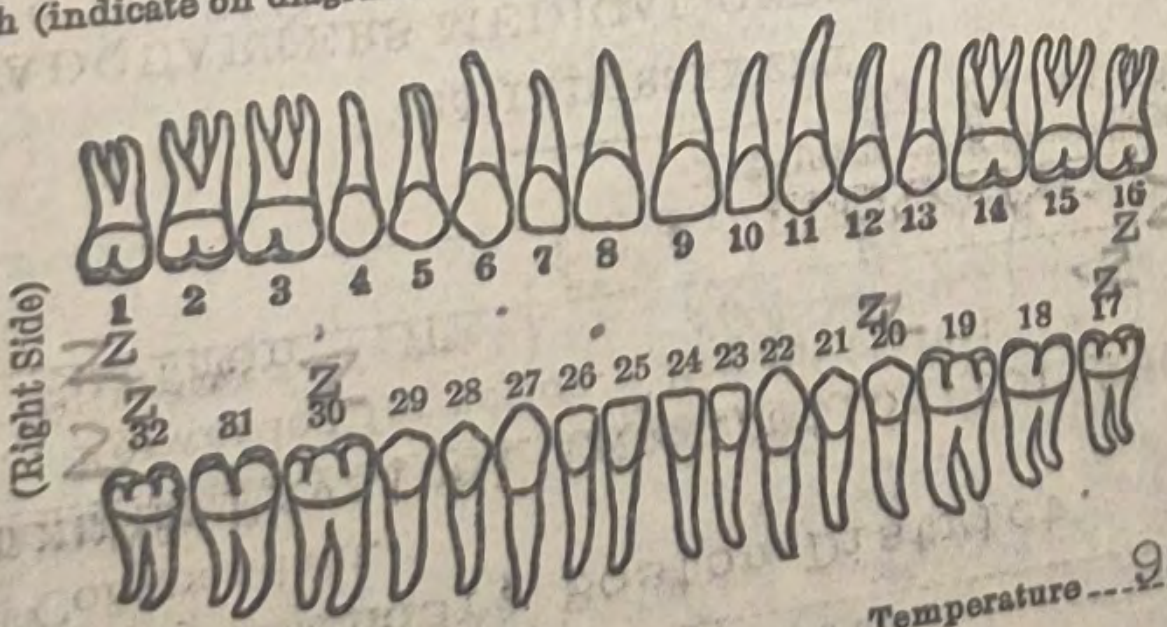
Eyes, eyelids, and reflexes Normal

Ears: Right Normal Left Normal (Condition of drum, discharge, etc.)

Head, face, and neck Normal

Mouth, nose, and throat Normal

Teeth (indicate on diagram: Missing, "z"; replaced, "x"; carious, "T".)



Gums Normal Temperature 98.6

Height 70 inches. Weight (stripped) 153 Lbs. Obesity No

Skin Normal

Lymph. glands Normal

Chest: Inspiration 38 Expiration 34

Heart and blood vessels Normal

Blood pressure: Systolic 132 Diastolic 80

Pulse before exercise 84, after exercise 104, after 2 min. 88

Normal

Normal

Normal

Form 2500 B
TREASURY DEPARTMENT
U. S. COAST GUARD
Revised Nov., 1929

2-28-41

SPECIAL TEMPORARY ENLISTMENT CONTRACT

The Act approved April 21, 1924, provides:

"Under such regulations as he may prescribe, the Secretary of the Treasury is authorized to appoint temporary warrant officers, and to make special temporary enlistments, in the Coast Guard. No person shall be entitled to retirement because of his temporary appointment or enlistment under this section."

REENLISTMENT [a] of WATTS, Alan Brennen 209-630 as Surfman.
(Full name, surname to left) (Rating)

U. S. Coast Guard ~~Cutter~~ Station Burnt Island Lifeboat Boston District, Port Clyde, Maine.
(Draw line through designation not applying) (Location of vessel, or P. O. address of station)

Accepted for enlistment at Burnt Island LB. Station.
(Place)

1. I, Alan Brennen Watts. (Full name), this 15 day of February, 1941, desiring to enlist in the United States Coast Guard, do declare that I am of legal age (or have legal consent) to enlist; that I am of good habits and character; that I have never deserted nor received a dishonorable discharge from the United States Coast Guard, Army, Navy, Marine Corps, Revenue-Cutter Service, or Life-Saving Service; that I have never been discharged from the United States service, nor any other service, through sentence of either a civil or a military court; and that I have never been discharged from any service, civil or military, except with good character, and for the reasons given by me to the enlisting officer prior to enlistment.

2. I was born in Jonesboro, Maine., on 1 January, 1917 Citizenship [b] NB.

If naturalized, place and date of naturalization .... Certificate number ....

If intentions declared, place and date of declaration ....

Occupation or trade Surfman. Home address Jonesboro, Maine.

Full name and address of the following: Louise Watts, Tenants Harbor, Maine. (Wife, if any)

Wayne Alan Watts. Tenants, Harbor, Maine.
(Children under 16 years of age. Specify ages of children)

Florence L. Watts. Jonesboro, Maine. (Mother, if living) Widowed? No.

(Next of kin, or person interested, if there are none of the above)

3. I certify that I am prepared to support my dependents on pay received for service under this enlistment and that there do now exist, nor can I foresee, any circumstances connected with the support of my dependents nor any conditions in my domestic affairs which would cause me to seek a discharge on account of dependency or the need for my presence at home, prior to the expiration of this enlistment.

4. I certify that the contract of enlistment has been read by me and fully explained by the enlisting officer and that no promise of any kind have been made to me concerning assignment to duty or promotion during my enlistment.

5. I further certify that I have never been arrested by civil authorities and have never been in a reform school, jail, or penitentiary, and have never been convicted or confined other than indicated herein - - - - - - - - - - - - - - - (State fully nature of offense, if any, and nature of institution in which incarcerated)

6. I have .... (If "not," so state) had previous service under the United States in the Coast Guard, ~~Army, Navy, Marine Corps, Revenue-Cutter Service, or Life-Saving Service~~ and I certify that the discharge or discharges therefrom which I have produced to the enlisting officer is or are the latest received by me.

7. I do not now belong to any branch, either active or reserve, of the military or naval service of the United States, or of any of the several States.

8. I was last discharged from the U. S. Coast Guard on 14 February, 1941. from ~~Cutter~~ Station Burnt Island LB. (Strike out one) with HONORABLE (Kind of discharge) discharge, herewith submitted, serial No. A64280

9. I agree to and with the United States of America, represented by John R. Holmes, (Name of enlisting officer), United States Coast Guard, in manner and form following, that is to say:

In the first place, I agree for the considerations hereinafter-mentioned to enter the service of the United States Coast Guard, and in due and seasonable time to repair to such vessel or station as I may be ordered to join, and to the utmost of my power and ability discharge my several services or duties, and be in everything conformable and obedient to the lawful commands of the officers who may from time to time be placed over me.

Secondly, I oblige and subject myself, and for that purpose covenant and agree, to serve during the term of Three YEARS, from the date first above written, unless sooner discharged by proper authority; and also to the condition that said period may be temporarily extended by reason of duty away from my usual station, or during an emergency, to subserve the interests of the Government; and to the further condition that the said period shall be extended to make good any time in excess of one day lost by absence on account of disease resulting from my own intemperate use of drugs or alcoholic liquors or other misconduct, so that such extension with the time served by me prior thereto will amount to a full term of Three YEARS, and I also oblige myself during such service to comply with and be subject to such laws, regulations, and discipline as are, or may be, established for the government of the United States Coast Guard, and to submit to treatment for the prevention of smallpox, typhoid (typhoid prophylaxis), and such other preventive measures as may be considered necessary by Coast Guard authorities. If discharged by sentence of a Coast Guard court, or by reason of bad conduct, undesirability or inaptitude, I agree to surrender my uniforms for a suit of civilian clothes.

Thirdly, the United States of America, represented by John R. Holmes. (Name of enlisting officer), United States Coast Guard, does hereby covenant and agree to and with the Said Alan Brennen Watts. (Name of person enlisting) who has hereunto signed his

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[a] In cases of reenlistment prefix "Re."
[b] Citizenship: Use expressions "NB" for native born; "NZ" for naturalized; "AD" for alien, intentions declared; "A" for alien; "NPI" for native of Philippine Islands; "NPR" for native of Porto Rico.

2—7976

name, that he shall be paid in consideration of such services, the amount now established, or that may be established, by authority of law, as the pay of the ratings which may, from time to time, be assigned him, subject to such forfeitures, deductions, and retentions as may be ordered by competent authority in accordance with the laws of the United States and the Regulations governing the Coast Guard, BUT HE SHALL NOT BE ENTITLED TO RETIREMENT BECAUSE OF THIS SPECIAL TEMPORARY ENLISTMENT.

Alan Brennen Watts

Alan Brennen Watts, (209-630) Surfman.
(Signature of enlisted person)

UNITED STATES OF AMERICA,

By John R. Holmes.

John R. Holmes, Officer in Charge.
(Signature and rank of enlisting officer)

10. I CERTIFY to the signature of the above person enlisted, and that I have strictly complied in his case with the Regulations of the United States Coast Guard governing enlistments, and that no promise of any kind concerning assignment to duty or promotion during this enlistment has been made.

John R. Holmes.

John R. Holmes, Officer in Charge U. S. C. G., *Enlisting Officer.*

11. OATH OF ALLEGIANCE

I, Alan Brennen Watts. (Full name), do solemnly swear (or affirm) that I will bear true faith and allegiance to the UNITED STATES OF AMERICA, and that I will serve them honestly against all their enemies whomsoever; and that I will obey the orders of the President of the United States, and the orders of the officers appointed over me, according to the laws and Regulations for the government of the United States Coast Guard.

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

Alan Brennen Watts

Alan Brennen Watts, (209-630) Surfman.
(Signature of enlisted person)

Subscribed and sworn to before me this 15 day of February, A. D. 19 41.

Ralph L. Simmons

(Comdg. officer, officer in charge of a unit, or notary public)

12. DESCRIPTIVE LIST

Age 24 years 1 months. Height 5 feet 10 inches. Weight 151 pounds. Eyes Blue

Hair light brown Complexion Light Color White Married Yes.

Distinguishing marks None.

13. CERTIFICATE AS TO PARENT OR GUARDIAN

(To be used only in the enlistment of a minor who states that he has no parent or guardian residing in the United States or in the insular possessions of the United States)

I CERTIFY that I have neither a parent nor guardian (Within the United States, in the territory or islands of the United States) where this enlistment is made.

2—7976 U. S. GOVERNMENT PRINTING OFFICE 1939

Form 2529
TREASURY DEPARTMENT
U. S. COAST GUARD
April 1937

UNITED STATES COAST GUARD

DESIGNATION OF BENEFICIARIES FOR DEATH GRATUITY

BURNT ISLAND LIFEBOAT STATION. (Unit) PORT CLYDE, MAINE. (Place)

15 February, 1941. (Date)

FROM: Alan Brennen Watts, (209-630) Surfman.

TO: COMMANDANT (via Commander, Boston District.)

1. In the event of my death I hereby designate beneficiary or beneficiaries for payment of six months' pay, as provided in the Act of June 4, 1920, as amended by the Act of May 22, 1928, as follows:

Louise Watts. (Full name of wife; if not married, so state)	Tenants Harbor, Maine. (Address of wife)
Wayne Alan Watts. (Full name of child; if none, so state)	Tenants Harbor, Maine. (Address of child)
- - - - - - - - - - - (Full name of child; if none, so state)	- - - - - - - - - - - (Address of child)
- - - - - - - - - - - (Full name of child; if none, so state)	- - - - - - - - - - - (Address of child)

2. In the event of my leaving no widow or child, or of their decease before payment is made, I then designate as my beneficiary under the said act the following dependent relative:

Florence L. Watts. (Full name of relative)	Mother (Relationship)	Jonesboro, Maine. (Address of relative)

None exists. (State briefly wherein dependency exists)

3. In the event of the death of the above-named dependent relative before payment is made, I then designate as my beneficiary under said act the following dependent relative:

Fred N. Watts. (Full name of relative)	Father (Relationship)	Jonesboro, Maine. (Address of relative)

None. exists. (State briefly wherein dependency exists)

WITNESSED BY: John R. Holmes. John R. Holmes, B.M.1c.

SIGNED: Alan Brennen Watts. Alan Brennen Watts. (209-630)

Rank Officer in Charge. *Rank or Rating* Surfman.

2—10348 U S GOVERNMENT PRINTING OFFICE

Form 2511-A
TREASURY DEPARTMENT
UNITED STATES COAST GUARD
Form approved by
Comptroller General, U. S.
September 13, 1933

STATEMENT OF CREDITABLE SERVICE

BURNT ISLAND LIFEBOAT STATION, PORT CLYDE, MAINE.
(Unit)

WATTS, Alan R.
(Name in full—surname to the left)

14 February, 1941.
(Date)

(209-630)
(Service number)

Surfman.
(Rating on discharge)

				Years	Months	Days
Date of last enlistment (for 3 years)	1938 (Year)	2 (Month)	15 (Day)			
Date of discharge (Honorable No. A5l260) (Character of discharge)	1941 (Year)	2 (Month)	14 (Day)			
Total time of last enlistment period				3	0	0

ABSENT TIME DURING PERIOD (inclusive dates to be shown)

Absent Without Leave			Absent Due to Own Misconduct			Absent Due to Confinement		
From—	To—	Days	From—	To—	Days	From—	To—	Days
None.			None.			None.		
Total 0			Total 0			Total 0		

Total absence (0 days)

Creditable time served during last enlistment period 3 0 0

PORT CLYDE STATION

Port Clyde, Maine,
15 February, 1941.

This date, reenlisted as surfman, special temporary enlistment, for a period of three years.

O. C. LITTLEFIELD, Lieut. Comdr., USCG,
By direction.

I CERTIFY that the above is a full, true, and correct statement of creditable service of the above-mentioned man during the period of his last enlistment.

John R. Holmes.
John R. Holmes,

(Rank) Officer in Charge., U. S. C. G.
Commanding officer.

U. S. GOVERNMENT PRINTING OFFICE 2—17962

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

U. S. COAST GUARD
REC'D AUG 21 1940

REPORT OF CHANGE IN PERSONNEL

WATTS. (Surname) Alan (First name) B. (Middle initial) (209-630) (Service No.) Surfman. (Rank or rating)

BURNT ISLAND LIFEBOAT STATION. (Unit) Port Clyde, Maine. (Place) 19 August, 1940. (Date)

Reported at 12:30 p.m. this date from temporary dutyn at Camp Curtis Guild Rifle Range, Wakefield, Mass.

AUTHORITY: Boston District Circular No. 16-40 , 15 April, 1940.

John R. Holmes.
John R. Holmes. (Commanding)

Officer in Charge. (Title)

SPACE BELOW IS FOR HEADQUARTERS' USE ONLY

LAW	PERSONNEL RECORDS		
	STATISTICS	CORRESPONDENCE	RECORDS

U. S. GOVERNMENT PRINTING OFFICE 0 10935

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

U. S. COAST GUARD
REC'D AUG 22 1940

REPORT OF CHANGE IN PERSONNEL

WATTS,	Alan	B	209-630	Surfman
(Surname)	(First name)	(Middle initial)	(Service No.)	(Rank or rating)

Fletchers Neck Lifeboat Station	Biddeford Pool, Maine	19 August, 1940
(Unit)	(Place)	(Date)

Arrived this unit at 2:30 p.m. 18 August, 1940 from rifle range.
Departed at 8:00 a.m. this date enroute to Burnt Island Lifeboat Station.

AUTHORITY: Boston District Order No. 16(A)-40

Hugh F. Snow
Hugh F. Snow (Commanding)

Officer in Charge
(Title)

SPACE BELOW IS FOR HEADQUARTERS' USE ONLY

LAW	PERSONNEL RECORDS		
	Statistics	Correspondence	Records

U. S. GOVERNMENT PRINTING OFFICE 0 10935

Form 2599

U. S. COAST GUARD
REC'D AUG 21 1940

WATTS	Alan	B.	209-630	Surf.
Surname	First Name	Mid. Int.	Service #	rank or rate

Camp Curtis Guild Wakefield, Mass. 11 August, 1940

Reported at 1500 this date for assignment to temporary duty (small arms practice) from BURNT ISLAND LIFEBOAT STATION.

Departed at 1200 AUG 18 1940 for BURNT ISLAND LIFEBOAT STATION temporary duty having been completed.

Boston Dist. Circular 16A-40

D D Hesler
D. D. HESLER, Lieutenant

Range Officer

Space below is for Headquarters Use only.

Law Personnel records

Stastistics Correspondence Records

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

U. S. COAST GUARD
REC'D AUG 14 1940

REPORT OF CHANGE IN PERSONNEL

WATTS, (Surname) Alan (First name) B. (Middle initial) 209-630 (Service No.) Surfman (Rank or rating)

Fletchers Neck Lifeboat Station (Unit) Biddeford Pool, Maine (Place) 11 August, 1940 (Date)

Arrived station at 5:00 p.m. 10 August, 1940. Departed at 8:00 a.m. this date, enroute to rifle range. Attached to Burnt Island Lifeboat Station.

AUTHORITY: Boston District Circular No. 16(a)-40

Hugh F. Snow (Commanding)

Officer in Charge
(Title)

SPACE BELOW IS FOR HEADQUARTERS' USE ONLY

LAW	PERSONNEL RECORDS		
	STATISTICS	CORRESPONDENCE	RECORDS

U. S. GOVERNMENT PRINTING OFFICE 0 10935

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TREASURY DEPARTMENT
U. S. Coast Guard
(Revised 1937)

U. S. COAST GUARD
REC'D AUG 14 1940

REPORT OF CHANGE IN PERSONNEL

WATTS, Alan B. (209-630) Surfman.
(Surname) (First name) (Middle initial) (Service No.) (Rank or rating)

BURNT ISLAND LIFEBOAT STATION. Port Clyde, Maine. 10 August, 1940.
(Unit) (Place) (Date)

Departed at 10:00 a.m. this date, for temporary duty at Camp Curtis Guild, Wakefield, Massachusetts.

AUTHORITY: Boston District Circular No. 16 - 40 , 15 April, 1940.

John R. Holmes.
(Commanding)

Officer in Charge.
(Title)

SPACE BELOW IS FOR HEADQUARTERS' USE ONLY

LAW	PERSONNEL RECORDS		
	Statistics	Correspondence	Records

U. S. GOVERNMENT PRINTING OFFICE 0 10935

Form 2529
TREASURY DEPARTMENT
U. S. COAST GUARD

U. S. COAST GUARD
RECD FEB 24 1940

UNITED STATES COAST GUARD

DESIGNATION OF BENEFICIARIES FOR DEATH GRATUITY

BURNT ISLAND STATION. (Unit) Port Clyde, Maine. (Place)

19 February, 1940. (Date)

FROM: Alan Brennen Watts. (209-630) Surfman.

TO: COMMANDANT (via Commander Boston District.)

1. In the event of my death I hereby designate beneficiary or beneficiaries for payment of six months' pay, as provided in the Act of June 4, 1920, as amended by the Act of May 22, 1928, as follows:

Louise Watts. (Full name of wife; if not married, so state)	Machias, Maine. (Address of wife)
None. (Full name of child; if none, so state)	None. (Address of child)
None. (Full name of child; if none, so state)	None. (Address of child)
None. (Full name of child; if none, so state)	None. (Address of child)

2. In the event of my leaving no widow or child, or of their decease before payment is made, I then designate as my beneficiary under the said act the following dependent relative:

Florence L. Watts. (Full name of relative)	Mother (Relationship)	Jonesboro, Maine. (Address of relative)

None exists.
(State briefly wherein dependency exists)

3. In the event of the death of the above-named dependent relative before payment is made, I then designate as my beneficiary under said act the following dependent relative:

Fred N. Watts. (Full name of relative)	Father (Relationship)	Jonesboro, Maine. (Address of relative)

None exists.
(State briefly wherein dependency exists)

WITNESSED BY:
John R. Holmes
John R. Holmes

SIGNED:
Alan Brennen Watts
Alan Brennen Watts. (209-630)

Rank Officer in Charge. *Rank or Rating* Surfman.

2—10348 U. S. GOVERNMENT PRINTING OFFICE: 1933

Form 2529
TREASURY DEPARTMENT
U. S. COAST GUARD

U. S. COAST GUARD
RECD FEB 28 1940

UNITED STATES COAST GUARD

DESIGNATION OF BENEFICIARIES FOR DEATH GRATUITY

BURNT ISLAND STATION. (Unit) Port Clyde, Maine. (Place)

19 February, 1940. (Date)

FROM: Alan Brennen Watts. (209-630) Surfman.

TO: COMMANDANT (via Commander Boston District.)

1. In the event of my death I hereby designate beneficiary or beneficiaries for payment of six months' pay, as provided in the Act of June 4, 1920, as amended by the Act of May 22, 1928, as follows:

Louise Watts. (Full name of wife; if not married, so state)	Machias, Maine. (Address of wife)
None. (Full name of child; if none, so state)	None. (Address of child)
None. (Full name of child; if none, so state)	None. (Address of child)
None. (Full name of child; if none, so state)	None. (Address of child)

2. In the event of my leaving no widow or child, or of their decease before payment is made, I then designate as my beneficiary under the said act the following dependent relative:

Florence L. Watts. (Full name of relative)	Mother (Relationship)	Jonesboro, Maine. (Address of relative)

None exists. (State briefly wherein dependency exists)

3. In the event of the death of the above-named dependent relative before payment is made, I then designate as my beneficiary under said act the following dependent relative:

Fred N. Watts. (Full name of relative)	Father (Relationship)	Jonesboro, Maine. (Address of relative)

None exists. (State briefly wherein dependency exists)

WITNESSED BY: John R. Holmes
John R. Holmes

SIGNED: Alan Brennen Watts
Alan Brennen Watts. (209-630)

Rank Officer in Charge. *Rank or Rating* Surfman.

2—10348 U. S. GOVERNMENT PRINTING OFFICE: 1932

Form No. 2599
TREASURY DEPARTMENT
U. S. COAST GUARD
(Revised 1937)

U.S. COAST GUARD (6)
REC'D SEP 29 1939 By
ANS'D

REPORT OF CHANGE IN PERSONNEL

WATTS.	Alan	B.	(209-630)	Surfman.
(Surname)	(First name)	(Middle initial)	(Service No.)	(Rank or rating)

Burnt Island Station.	Port Clyde, Maine.	25 September, 1939.
(Unit)	(Place)	(Date)

Reported at 12:00 M. this date from temporary duty at Camp Curtis Guild, Wakefield, Mass.

AUTHORITY: Boston District Circular No. 13-39, 20 February, 1939 (671)

John R. Holmes.
John R. Holmes, B.M.1c.
(Commanding)

Officer in Charge.
(Title)

SPACE BELOW IS FOR HEADQUARTERS' USE ONLY

LAW	PERSONNEL RECORDS		
	STATISTICS	CORRESPONDENCE	RECORDS

U. S. GOVERNMENT PRINTING OFFICE 0 10935

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

COAST GUARD (3)
REC'D SEP 29 1939 By
ANSD

REPORT OF CHANGE IN PERSONNEL

WATTS	Alan	B.	209-630	Surfman
(Surname)	(First name)	(Middle initial)	(Service No.)	(Rank or rating)

Fletchers Neck Station	Biddeford Pool, Maine.	25 September, 1939.
(Unit)	(Place)	(Date)

Arrived station at 2.00 p.m. 24th, departed station at 8.00 a.m. this date, en route from rifle range, Furnished two meals, attached to Burnt Island Station.

AUTHORITY: Boston District Circular No.13-39.

Hugh F. Snow
(Commanding)

Officer in Charge
(Title)

SPACE BELOW IS FOR HEADQUARTERS' USE ONLY

LAW	PERSONNEL RECORDS		
	Statistics	Correspondence	Records

U. S. GOVERNMENT PRINTING OFFICE 0 10935

U. S. COAST GUARD (12)
REC'D SEP 2 7 1939 By
ANS.

REPORT OF CHANGE IN PERSONNEL

WATTS	Allan	B.	209-630	Surf
(Surname)	(First name)		(Service Number)	(Rank or rating)

Camp Curtis Guild	Wakefield, Mass.	17 Sept.1939
(Unit)	Place	Date

Reported at 1500 this date for assignment to temporary duty (small arms practice) from Burnt Island Station.

Departed 1200 24 Sept., 1939 for Burnt IslandSta. temporary duty having been completed.

AUTHORITY; Boston District Circular No. 13-39

H.U. SCHOLL, Lieut.
Commanding

Range Officer
(Title)

SPACE BELOW IS FOR HEADQUARTERS' USE ONLY

LAW PERSONNEL RECORDS

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U.S. COAST GUARD (C)
RECD SEP 21 1939 By
ANS'D

REPORT OF CHANGE IN PERSONNEL

WATTS.	Alan	B.	209-630	Surfman.
(Surname)	(First name)	(Middle initial)	(Service No.)	(Rank or rating)

Fletchers Neck Station.	Biddeford Pool, Maine.	17 September, 1939.
(Unit)	(Place)	(Date)

The above named man arrived station 4:45 p.m. the 16th. departed station 8:00 a.m. this date en route to Rifle Range, Camp Curtis Guild, Wakefield, Mass. furnished two meals. Attached to Burnt Island Station.

AUTHORITY: Boston District Circular No.13-39.

Hugh F. Snow.
(Commanding)

Officer in Charge.
(Title)

SPACE BELOW IS FOR HEADQUARTERS' USE ONLY

LAW	PERSONNEL RECORDS		
	Statistics	Correspondence	Records

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U. S. Coast Guard
(Revised 1937)

U. S. COAST GUARD (5)
RECD. SEP 21 19 By

REPORT OF CHANGE IN PERSONNEL

WATTS,	Alan	B.	209-630	Surfman.
(Surname)	(First name)	(Middle initial)	(Service No.)	(Rank or rating)

Burnt Island Station.	Port Clyde, Maine.	16 September, 1939.
(Unit)	(Place)	(Date)

Departed this unit at 10:00 a.m., this date, for assignment to temporary duty at Camp Curtis Guild, Wakefield, Mass..

AUTHORITY: Boston District Circular No. 13-39, 20 February, 1939 (671).

Merrill C. Minzy

Merrill C. Minzy, (107-409) B.M.2c.
(Commanding)

Officer in Charge, Acting.
(Title)

SPACE BELOW IS FOR HEADQUARTERS' USE ONLY

LAW	PERSONNEL RECORDS		
	Statistics	Correspondence	Records

U. S. GOVERNMENT PRINTING OFFICE 0 10935

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U. S. COAST GUARD
REC'D SEP 29 1938 By

REPORT OF CHANGE IN PERSONNEL

WATTS.	Alan	B.	(209-630)	Surfman
(Surname)	(First name)	(Middle initial)	(Service No.)	(Rank or rating)

Burnt Island Station	Port Clyde, Maine.	26 September, 1938.
(Unit)	(Place)	(Date)

Reported for duty at 12:30 p.m. this date, having been absent on temporary duty at Camp Curtis Guild, Wakefield, Mass.

AUTHORITY: Boston Division Circular No. 16-38, 10 March, 1938. (671).

Alton C. Thompson, (110-261) BM1c(L).
(Commanding)

Officer in Charge
(Title)

SPACE BELOW IS FOR HEADQUARTERS' USE ONLY

LAW	PERSONNEL RECORDS		
	Statistics	Correspondence	Records
		X	E.P.

U. S. COAST GUARD (11)
REC'D. SEP 28 1938 By.
ANS.

Form 2599

REPORT OF CHANGE IN PERSONNEL

WATTS	Alan B.	209-630	Surfman
(Surname)	(First name)	(Service No.)	(Rank or ~~rating~~)
Camp Curtis Guild	Wakefield, Mass.		26 September, 1938
(Unit)	(Place)		(Date)

Reported at ~~1:00 p.m.~~ 11:00 a.m. 18 September, 1938 for assignment to temporary duty (small arms practice) from BURNT ISLAND STATION

Departed ~~2:00~~ 12:30 p.m. SEP 25 1938 for BURNT ISLAND STATION temporary duty having been completed.

AUTHORITY: Boston Division Circular No. 16-38

R M Ross

(Commanding)

Range Officer

(Title)

Form 2599

REPORT OF CHANGE IN PERSONNEL

(Surname) (First name) (Service No.) (Rank or ~~rating~~)

Camp Curtis Guild Wakefield, Mass.

(Unit) (Date)

SPACE BELOW IS FOR HEADQUARTERS' USE ONLY

LAW PERSONNEL RECORDS

INDEX UNIT RATING

X E.P.

Reported at ~~1:00 p.m.~~ 11:00 a.m. 18 September, 1938 for assignment to temporary duty (small arms practice) from BURNT ISLAND STATION

Departed ~~2:00~~ 12:30 p.m. SEP 25 1938 for BURNT ISLAND STATION temporary duty having been completed.

AUTHORITY: Boston Division Circular No. 16-38

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

U. S. COAST GUARD 5
REC'D SEP 29 1938 By

REPORT OF CHANGE IN PERSONNEL

WATTS,	Alton	B.	209-638	Surfman.
(Surname)	(First name)	(Middle initial)	(Service No.)	(Rank or rating)

Fletchers Neck Station.	Biddeford Pool, Maine.	26 September, 1938.
(Unit)	(Place)	(Date)

The above named man arrived at station 3:30 p.m. 25th. departed station 8:00 a.m. this date, en route to duty from Camp Curtis Guild, Wakefield, Mass. range duty, furnished two meals. Attached to Burnt Island Station.

AUTHORITY: Boston Division Circular 16-38.

Hugh B. Snow,
(Commanding)

Officer in Charge.
(Title)

SPACE BELOW IS FOR HEADQUARTERS' USE ONLY

LAW	PERSONNEL RECORDS		
	Statistics	Correspondence	Records
		X	EP

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

U. S. COAST GUARD
REC'D SEP 26 1938 By

REPORT OF CHANGE IN PERSONNEL

ANS.

WATTS	Alton	B.	209-638	Surfman
(Surname)	(First name)	(Middle initial)	(Service No.)	(Rank or rating)

Fletchers Neck Station	Biddeford Pool, Maine.	18 September, 1938.
(Unit)	(Place)	(Date)

The above named man arrived at station at 5.30 p.m. 17th, departed station at 8.00 a.m. this date, en route to Camp Curtis Guild, Wakefield, Mass. range duty. Furnished two meals. Attached to Burnt Island Station.

AUTHORITY: Boston Division Circular 16-38.

Hugh F. Snow
(Commanding)

Officer in Charge
(Title)

SPACE BELOW IS FOR HEADQUARTERS' USE ONLY

LAW	PERSONNEL RECORDS		
	Statistics	Correspondence	Records
		X	EP

U. S. GOVERNMENT PRINTING OFFICE 0 10935

Form No. 2599
TREASURY DEPARTMENT
U. S. COAST GUARD
(Revised 1937)

U. S. COAST GUARD (11)
REC'D. SEP 20 1938 By
ANS

REPORT OF CHANGE IN PERSONNEL

WATTS,	Alan	B.	(209-630)	Surfman
(Surname)	(First name)	(Middle initial)	(Service No.)	(Rank or rating)

Burnt Island Station	Port Clyde, Maine.	17 September, 1938.
(Unit)	(Place)	(Date)

Departed station at 12:00 M., this date, enroute to Camp Curtis Guild, Wakefield, Mass., for temporary duty.

AUTHORITY: Boston Division Circular No. 16-38, 10 March, 1938. (671).

Alton C. Thompson

Alton C. Thompson, (110-261) BMlc(L).
(Commanding)

Officer in Charge
(Title)

SPACE BELOW IS FOR HEADQUARTERS' USE ONLY

LAW	PERSONNEL RECORDS		
	STATISTICS	CORRESPONDENCE	RECORDS
		X	E.P.

FWB.

PR5-73

3 March, 1938.

From: Commander, First District.
To:

Subject: WATTS, Alan Brennon (209-630) Surfman

vaccination and inoculation.

References: (a) Article 2161, Regulations.
(b) Article 2162, Regulations.

1. You are directed to have the above-named man immediately vaccinated against smallpox and inoculated against typhoid fever and to forward a suitable report on Form 2522, to Headquarters upon completion thereof.

By direction,

E. J. Osborn.
E. T. OSBORN,
Chief, Enlisted Personnel Section.

MAILED
MAR 3 - 1938
MAIL DESK

Form 2522
TREASURY DEPARTMENT
U. S. Coast Guard
Revised Oct., 1932

FOLLOW INSTRUCTIONS ON BACK

U. S. COAST GUARD
RECD APR 4 1938
ANSD

Watts, Alan B. Brennen (209-630) Surfman Burnt Is. Sta.
(Name, surname first) (Service number) (Rank or rating) (Unit)

*REGULAR
*SPECIAL
TEMPORARY
(Enlistment status)

FINAL MEDICAL CERTIFICATE

Place Rockland, Maine, Date February 16, 1938

To: Officer in Charge, Burnt Island Sta.
(Coast Guard unit)
Port Clyde, Maine
(Address)

FIRST DISTRICT RECEIVED APR 1 1938 U.S. COAST GUARD

The above-named patient was discharged from {*inpatient / *outpatient} treatment as shown below:

DIAGNOSIS (By nomenclature name and number)	DIAGNOSIS NUMBER	PERIOD OF TREATMENT FOR EACH CONDITION	
		From	To
Antityphoid Inoculation	(0122)	Feb. 16	Mar. 3
Anti-inoculation for Small pox	(0119)	March 18	March 18

U. S. COAST GUARD
REC'D APR 4 1938
MEDICAL

He {*is / *is not} fit for duty. REMARKS (Recommendations as to sick leave, further treatment, etc.):

CONDUCT REPORT:

Did the patient cooperate in his treatment? {*Yes. / *No.} Absent without permission? {*Yes. / *No.} Guilty of insubordination? {*Yes. / *No.}

Charles B. Appleston
A. A. Surg. *U. S. Public Health Service.*

APR -2 1938

NOTICE OF MEDICAL TRANSFER

..... (Patient's name, service number, rank or rating, and unit), who has been under {*inpatient / *outpatient} treatment at ..... {*office / *hospital} at ..... for ..... (Diagnosis) since ....., 193 , has been transferred this date ....., 193 , to the U. S. Marine Hospital at ..... for further treatment.

.....
U. S. Public Health Service.

*Strike out words not applicable.

2—663

...LLOW INSTRUCTIONS ON BACK

U. S. COAST GUARD FILED
REC'D APR 4 1938
ANS'D

(209-630) Surfman. Burnt Island Sta.
(Service number) (Rank or rating) (Unit)

...HE U. S. PUBLIC HEALTH SERVICE FOR RELIEF FOR THE PERSONNEL OF THE U. S. COAST GUARD

...ORARY
...stment status)

FIRST DISTRICT RECEIVED APR 1 1938 U.S. COAST GUARD

Place Port Clyde, Maine., Date 16 February, 193 8

To: Dr. Charles B. Popplestone U.S.PH.S.

Rockland, Maine.

SIR: You are requested to examine the above-named {*officer / *enlisted man} of the U. S. Coast Guard, attached to the above-named unit, and furnish him such treatment as may be required. It is requested that the RETURN MEDICAL CERTIFICATE be returned to Officer in charge, Burnt Island Sta. Port Clyde, Maine.

Alan Brennen Watts (Signature of patient)
Watts, Alan B. (209-630)

Niles F. ameron (101-693) C.B.M(L).
U. S. Coast Guard.

RETURN MEDICAL CERTIFICATE

Place Rockland, Maine, Date February 16, 1938

I CERTIFY that I have examined the above-named person and find him suffering from

Anti-inoculation for Smallpox(0119) Antityphoid inoculation (0122)
(Give diagnosis by number and name according to official nomenclature)

My professional opinion in the case is expressed below for the information of the Coast Guard administrative officers. Incident of service? {*Yes. *No.} Fit for duty? {*Yes. *No.} Absent from duty on account of the effects of a disease, as distinguished from injury, directly attributable to and immediately following his own intemperate use of alcoholic liquor or habit-forming drug? {*Yes. *No.} Absent from duty on account of the direct effects of a venereal disease due to his own misconduct? {*Yes. *No.} If "yes," did the initial symptoms appear less or more than one year ago? {*Less. *More.} Treatment will require approximately .....days absence from duty. He was admitted to {*inpatient *outpatient} treatment at .....

..... {*hospital *office} on ....., 193

U.S. COAST GUARD REC'D APR 4 1938 MEDICAL SECTION

APR -2 1938

Charles B. Popplestone
A. A. Surg. U. S. Public Health Service.

*Having been informed that I am suffering from .....
(Diagnosis)
and that in the opinion of the medical officer, this disease is the result of my own misconduct, I (*do not) desire to submit a statement. (Attach statement if made.)

.....
(Patient's signature)

WITNESS:

.....
(Signature of medical officer)

..... U. S. Public Health Service.

*Strike out words not applicable.

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REMARKS:

CERTIFICATE

We / I certify that I have personally made this physical examination and find that

He is physically qualified for Spec. temp. enlistment
(Enlistment, appointment, promotion)

He is physically qualified to perform the duties of Surfman
(Use in case of promotion of commissioned officer or annual examination) (Rank)

He is not physically qualified for

on account of

J. M. McElligott, A.A. Surgeon, U.S. Public Health Service.

1st INDORSEMENT

4 February, 1938.
(Date)

Place Custom House, Boston, Mass.

From: Commander, First District.

To: Commandant.

1. Forwarded for action. Present status:

Recommended for enlistment.

F. B. Lincoln
F.B. LINCOLN Dist. Comdr.

2d INDORSEMENT

HEADQUARTERS MEDICAL OFFICE.
U.S. COAST GUARD, Washington.

FEB 8 1938
(Date)

The findings of the certificate are not approved

By direction of the Surgeon General:

Medical Director, U.S. Public Health Service.

3d INDORSEMENT

HEADQUARTERS, WASHINGTON.

9 February, 1938
(Date)

From: Commandant.

To: Commander, First District.

1.

ENLISTMENT AUTHORIZED STE. ONLY.

Insert this copy in health record.

By direction,

E. T. Osborn,

Chief, Enlisted Pers. Section.

U.S. GOVERNMENT PRINTING OFFICE: 1934 2—16141

Ltr mailed 2-10-38

WATTS, Alan H.

RECD FEB 8 1938 By
MEDICAL SECTION.

Form No. 2525 B
TREASURY DEPARTMENT
U.S. COAST GUARD

PHYSICAL EXAMINATION RECORD

(To be completely made up by medical officer, in duplicate)

Name WATTS, Alan B. Service Number
(Surname first)

Age: Years 21 Months 1 Color White

For: Special temporary enlistment.
(Special temporary or regular enlistment, appointment or promotion)

Rank or Rating Surfman

Place Boston, Mass. Date February 1, 1938

Personal Medical History
Usual childhood diseases. Appendectomy 4 years ago.

Vision: R.E. 20/ 20 L.E. 20/ 20 Corrected: R.E. 20/ L.E. 20/

Color blind? No Test used Iso-plates

Hearing: Conversational speech R.E. 30/ 30 L.E. 30/ 30

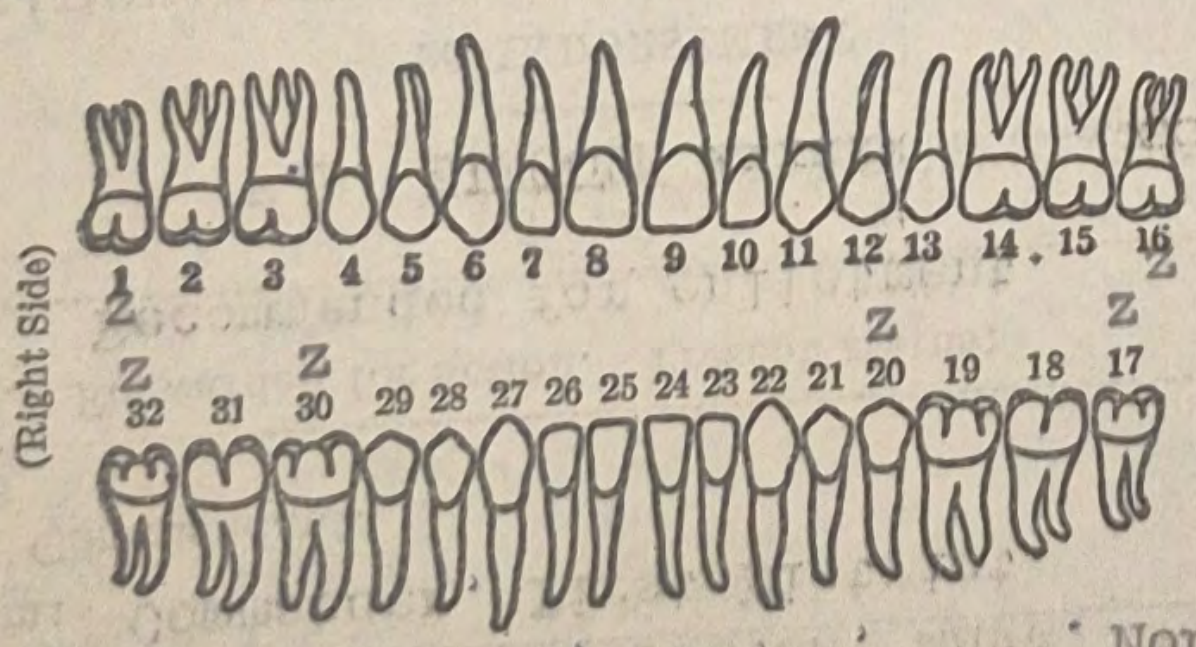
Eyes, eyelids, and reflexes Normal

Ears: Right Normal Left Normal
(Condition of drum, discharge, etc.)

Head, face, and neck Normal

Mouth, nose, and throat Normal

Teeth (indicate on diagram: Missing, "z"; replaced, "x"; carious, "I".)



Gums Normal Temperature Normal

Height 70 inches. Weight (stripped) 151 lbs. Obesity Normal

Skin Normal

Lymph. glands Normal

Chest: Inspiration 38 Expiration 34

Heart and blood vessels Normal

Blood pressure: Systolic 132 Diastolic 80

Pulse before exercise 84, after exercise 104, after 2 min. 92

Lungs Normal

Abdomen and pelvis Normal

Genito-urinary organs Normal

Spine and extremities Normal

Nervous and mental conditions Normal

Urine: Albumin Neg. Sugar Neg. Shreds None

Microscopical exam. (if indicated) epithelia Sp. Gr.

Pus cells Casts

Form 2500 B
TREASURY DEPARTMENT
U. S. Coast Guard
Revised Nov., 1929

SPECIAL TEMPORARY ENLISTMENT CONTRACT

The Act approved April 21, 1924, provides:

"Under such regulations as he may prescribe, the Secretary of the Treasury is authorized to appoint temporary warrant officers, and to make special temporary enlistments, in the Coast Guard. No person shall be entitled to retirement because of his temporary appointment or enlistment under this section."

ENLISTMENT [a] of Watts, Alan Brennen (Full name, surname to left) as Surfman (Rating)

U. S. Coast Guard ~~Cutter~~ Station Burnt Island, 1st District, Port Clyde, Maine (Location, name, or address of station)
(Draw line through designation not applying)

Accepted for enlistment at Burnt Island Station. (Place)

1. I, Alan Brennen Watts (Full name), this 15 day of February, 19 38 desiring to enlist in the United States Coast Guard, do declare that I am of legal age (or have legal consent) to enlist; that I am of good habits and character; that I have never deserted nor received a dishonorable discharge from the United States Coast Guard, Army, Navy, Marine Corps, Revenue-Cutter Service, or Life-Saving Service; that I have never been discharged from the United States service, nor any other service, through sentence of either a civil or a military court; and that I have never been discharged from any service, civil or military, except with good character, and for the reasons given by me to the enlisting officer prior to enlistment.

2. I was born in Jonesboro, Maine, on 1 January, 1917 Citizenship [b] NB.

If naturalized, place and date of naturalization ____ Certificate number ____

If intentions declared, place and date of declaration ____

Occupation or trade Laborer Home address Jonesboro, Maine.

Full name and address of the following: ____ (Wife, if any)

____ (Children under 16 years of age. Specify ages of children)

Florence L. Watts Jonesboro, Maine. (Mother, if living) Widowed? No.

____ (Next of kin, or person interested, if there are none of the above)

3. I certify that I am prepared to support my dependents on pay received for service under this enlistment and that there do not now exist, nor can I foresee, any circumstances connected with the support of my dependents nor any conditions in my domestic affairs which would cause me to seek a discharge on account of dependency or the need for my presence at home, prior to the expiration of this enlistment.

4. I certify that the contract of enlistment has been read by me and fully explained by the enlisting officer and that no promises of any kind have been made to me concerning assignment to duty or promotion during my enlistment.

5. I further certify that I have never been arrested by civil authorities and have never been in a reform school, jail, or penitentiary, and have never been convicted or confined other than indicated herein ____ (State fully nature of offense, if any, and nature of institution in which incarcerated)

6. I have Not (If "have" so state) had previous service under the United States in the Coast Guard, Army, Navy, Marine Corps, Revenue-Cutter Service, or Life-Saving Service, and I certify that the discharge or discharges therefrom which I have produced to the enlisting officer is or are the latest received by me.

7. I do not now belong to any branch, either active or reserve, of the military or naval service of the United States, or of any of the several States.

8. I was last discharged from the U. S. Coast Guard on ____, 19____, from ~~Cutter~~ Station ____ (Strike out one) with ____ (Kind of discharge) discharge, herewith submitted, serial No. ____

9. I agree to and with the United States of America, represented by Niles F. Cameron (Name of enlisting officer), United States Coast Guard, in manner and form following, that is to say:

In the first place, I agree for the considerations hereinafter mentioned to enter the service of the United States Coast Guard, and in due and seasonable time to repair to such vessel or station as I may be ordered to join, and to the utmost of my power and ability discharge my several services or duties, and be in everything conformable and obedient to the lawful commands of the officers who may from time to time be placed over me.

Secondly, I oblige and subject myself, and for that purpose covenant and agree, to serve during the term of Four YEAR from the date first above written, unless sooner discharged by proper authority; and also to the condition that said period may be temporarily extended by reason of duty away from my usual station, or during an emergency, to subserve the interests of the Government; and to the further condition that the said period shall be extended to make good any time in excess of one day lost by absence on account of disease resulting from my own intemperate use of drugs or alcoholic liquors or other misconduct, so that such extension with the time served by me prior thereto will amount to a full term of Four YEARS and I also oblige myself during such service to comply with and be subject to such laws, regulations, and discipline as are, or may be, established for the government of the United States Coast Guard, and to submit to treatment for the prevention of smallpox, typhoid (typhoid prophylaxis), and such other preventive measures as may be considered necessary by Coast Guard authorities. If discharged by sentence of a Coast Guard court, or by reason of bad conduct, undesirability or inaptitude, I agree to surrender my uniforms for a suit of civilian clothes.

Thirdly, the United States of America, represented by Niles F. Cameron (Name of enlisting officer), United States Coast Guard, does hereby covenant and agree to and with the Alan Brennen Watts (Name of person enlisting) who has hereunto signed his

[a] In cases of reenlistment prefix "Re."
[b] Citizenship: Use expressions "NB" for native born; "NZ" for naturalized; "AD" for alien, intentions declared; "A" for alien; "NPI" for native of Philippine Islands; "NPR" for native of Porto Rico.

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name, that he shall be paid in consideration of such services, the amount now established, or that may be established, by authority of law, as the pay of the ratings which may, from time to time, be assigned him, subject to such forfeitures, deductions, and retentions as may be ordered by competent authority in accordance with the laws of the United States and the Regulations governing the Coast Guard, BUT HE SHALL NOT BE ENTITLED TO RETIREMENT BECAUSE OF THIS SPECIAL TEMPORARY ENLISTMENT.

Alan Brennen Watts
(Signature of enlisted person)

Alan Brennen Watts (209-530) Surfman.
UNITED STATES OF AMERICA,

By Niles F. Cameron
(Signature and rank of enlisting officer)

Niles F. Cameron (101-693) C.B.M(E),

10. I CERTIFY to the signature of the above person enlisted, and that I have strictly complied in his case with the Regulations of the United States Coast Guard governing enlistments, and that no promise of any kind concerning assignment to duty or promotion during this enlistment has been made.

Niles F. Cameron
Niles F. Cameron (101-693) C.B.M(E),
....., U. S. C. G., *Enlisting Officer.*

11. OATH OF ALLEGIANCE

I, Alan Brennen Watts, do solemnly swear (or affirm) that I will bear true faith and
(Full name)
allegiance to the UNITED STATES OF AMERICA, and that I will serve them honestly against all their enemies whomsoever; and that I will obey the orders of the President of the United States, and the orders of the officers appointed over me, according to the laws and Regulations for the government of the United States Coast Guard.

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

Alan Brennen Watts
(Signature of enlisted person)

Alan Brennen Watts (209-530) Surfman.

Subscribed and sworn to before me this 15 day of February, A. D. 19 38

William E. Shearer Notary
(Commissioned officer in charge, or notary public)

12. DESCRIPTIVE LIST

Age 21 years 1 months. Height 5 feet 10 inches. Weight 151 pounds. Eyes Blue

Hair light brown Complexion Light Color White Married No.

Distinguishing marks None.

13. CERTIFICATE AS TO PARENT OR GUARDIAN

(To be used only in the enlistment of a minor who states that he has no parent or guardian residing in the United States or in the insular possessions of the United States)

I CERTIFY that I have neither a parent nor guardian .....
(Within the United States, in the territory or islands of the United States)

.....where this enlistment is made.

2—3476 U. S. GOVERNMENT PRINTING OFFICE 1936

Form 2500-C
TREASURY DEPARTMENT
U. S. COAST GUARD
Revised July 1935

RECORD OF Watts, Alan Brennen (Full name, surname to the left) 209-630 (Service No.)

1. TRANSFERS

Departed from—		Reported to—	
Vessel or station	Date	Vessel or station	Date

2. CHANGES IN RATING

Vessel or station	Rated or disrated to—	Date

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RECORD OF Watts, Alan Brennen (Full name, surname to the left) 209-630 (Service No.)

3. EFFICIENCY MARKS

SCALE OF MARKS: 4.0, Perfect; 3.5 to 3.9, Excellent; 3.0 to 3.4, Good; 2.5 to 2.9, Satisfactory; 2.0 to 2.4, Indifferent; 1.0 to 1.9, Poor; 0.0 to 0.9, Bad

Date	Proficiency in rating	Conduct	Sobriety	Ability as leader of men	Health	Vessel or station	Signature of commanding officer or officer in charge of a unit
3-31-38	2.0	4.0	4.0	2.0	4.0	Burnt Island Station	Alton G. Thompson
6-30-38	2.5	4.0	4.0	2.6	4.0	Burnt Island Station	Alton G. Thompson
9-30-38	3.0	4.0	4.0	3.0	4.0	Burnt Island Station	Alton G. Thompson
12-31-38	3.0	4.0	4.0	3.0	4.0	Burnt Island Station	Alton G. Thompson
3-31-39	3.0	4.0	4.0	3.0	4.0	Burnt Island Station.	John R. Holmes
6-30-39	3.0	4.0	4.0	3.0	4.0	Burnt Island Station.	John R. Holmes
9-30-39	3.0	4.0	4.0	3.0	4.0	Burnt Island Station.	John R. Holmes
12-31-39	3.1	4.0	4.0	2.6	4.0	Burnt Island Station	John R. Holmes
3-31-40	3.2	4.0	4.0	2.7	4.0	Burnt Island Station.	John R. Holmes
6-30-40	3.2	4.0	4.0	2.7	4.0	Burnt Island Station.	John R. Holmes
9-30-40	3.2	4.0	4.0	2.9	4.0	Burnt Island LB. Sta.	John R. Holmes
12-31-40	3.2	4.0	4.0	2.9	4.0	Burnt Island LB Sta.	John R. Holmes
2-14-41	3.2	4.0	4.0	2.9	4.0	Burnt Island LB. Sta.	John R. Holmes
AVERAGES	2.96	4.0	4.0	2.79	4.0	Burnt Island LB. Sta.	John R. Holmes

ADAPTABILITY FOR WARRANT GRADE
(Chief petty officers only)

Mark	Remarks	Signature

On receipt of an enlistment contract by transfer it shall be the duty of the receiving unit to see that all previous marks have been duly inserted, and the last unit on or at which service is rendered prior to discharge will be held responsible for the completeness of the marks.

4. QUALIFIED AS GOOD SWIMMER

Qualified as a good swimmer At Burnt Island Station, 8 August, 1938.
(Date and place)

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RECORD OF Watts, Alan Brennan. (209-630).
(Full name, surname to the left) (Service No.)

5. TRIALS BY COAST GUARD COURTS AND RESULT

Ship or station	Date	REMARKS: Kind of court, charge, sentence of court, and action of reviewing authority to be shown in this column

6. MERITORIOUS CONDUCT

(Award of medals, citations, Headquarters commendation, honorable discharge button, etc.)

Ship or station	Date	Remarks
Burnt Island Lifeboat Sta.	9-23-39	Issued one Expert Pistol Shot Medal.
Burnt Island Station	2/14/41	Honorable Discharge Button issued.

RECORD OF Watts, Alan Brennen. (209-630)

(Full name, surname to the left) (Service No.)

7. SPECIAL QUALIFICATIONS

Ship or station	Date	Proficient in—	Signature of executive officer or District Commander
Burnt Island Station.	9/24/38.	Sharpshooter- (Rifle)	[signature]
Burnt Island Station.	9/24/38.	Sharpshooter- (Pistol)	[signature]
Burnt Island Station.	9/24/39	SS-RIFLE & E-Pistol)	John R Holmes
Burnt Island Station.	8/19/40.	Expert - (Rifle)	John R Holmes.
Burnt Island Station.	8/19/40.	Expert - (Pistol)	John R Holmes

8. DETAILS

Ship or station	Date		Duty	Signature of executive officer or District Commander
	From—	To—		

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Form 2500-C
TREASURY DEPARTMENT
U. S. Coast Guard
Revised July 1935

RECORD OF Watts, Alan Brennen. (209-630)
(Full name, surname to the left) (Service No.)

9. LEAVE ACCOUNT
WITH PAY

Ship or station	Date Departed	Date Returned	Number of days	Balance Annual	Balance Reenlist	Signature of executive officer or officer in charge
Burnt Island Sta		2-15-38		30	0	Miles F Cameron
Burnt Island Sta	5-16-38	5-27-38	10	20	0	Allen G Thompson
Burnt Island Sta	12-1-38	12-12-38	10	10	0	Allen G Thompson
Burnt Island Sta	1-20-39	1-31-39	10	10	0	Allen G Thompson
Burnt Island Sta		2-15-39		30	0	Allen G Thompson
Burnt Island Sta.	5-24-39	6-4-39	10	20	0	John R Holmes
Burnt Island Sta.	8-30-39	9-10-39	10	10	0	John R. Holmes
Burnt Island Sta.	1-11-40	1-22-40	10	0	0	John R. Holmes
Burnt Island Sta.		2/15/40		30	0	John R Holmes
Burnt Island Sta.	3-6-40	3-17-40	10	20	0	John R Holmes
Burnt Island LB. STA.	10-4-40	10-10-40	5	15	0	John R Holmes
Burnt Island LB.	11-22-40	11-28-40	5	10	0	John R Holmes
Burnt Island LB.	1-26-41	2-6-41	10	0	0	John R. Holmes

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RECORD OF Watts, Alan Brennen. (209-630).
(Full name, surname to the left) (Service No.)

10. ABSENT FROM DUTY

(On account of sickness or injury due to own misconduct. Without leave (including overleave, desertion, imprisonment under civil arrest resulting in conviction), and absence from duty (confinement) while awaiting trial by a Coast Guard court resulting in a sentence of imprisonment, and while serving said sentence.)

~~Ship~~ or station	Number of days	From—	To—	Remarks	Signature of executive officer or District Commander
Burnt Island LB.	No un	authorized	absence while	attached to this unit	John R Holmes.

11. EXTENSION OF ENLISTMENT AND REASON THEREFOR

12. ON DISCHARGE

Date 14 February., 1941 Place Burnt Island Lifeboat Sta. Serial No. A64280

Kind of discharge HONORABLE Authority for Article 461 Personnel Instructions.

Discharged on account of Expiration of Enlistment.

Is _____ recommended for reenlistment. Rating best qualified to fill Surfman.
(If "not", so state)

13. ON DESERTION

_____, 193 _____ _____
(Date) (Unit) (Place)

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RECORD OF Watts, Alan Brennen. (209-630)
(Full name, surname to the left) (Service No.)

14. ON RETIREMENT

....., 193 .....
(Date) (Cause) (Authority)

15. ON DEATH

....., 193 ....
(Date) (Place) (Cause) (Place of burial

....
or disposition of remains) (Disposition of effects)

Was death incident to service? .....

16. RECORD OF SERVICE

Creditable Coast Guard service during this enlistment:

3 0 0
(Yrs.) (Mos.) (Days)

(Notations under article 10 to be considered when executing this article. *Days* under article 10 to be reduced to *months* and *days* for longevity purposes, as set forth in Pay and Supply Instructions.)

17. CERTIFICATE ON DESERTION

Certified to be correct date of desertion ....., 193

.....
Commanding Officer—District Commander.

RECORD OF Watts, Alan Brennen. (209-630)
(Full name, surname to the left) (Service No.)

18. CERTIFICATE UPON TERMINATION OF SERVICE

Monthly rate of pay when discharged, $ 60.00

The within-named man has been furnished travel allowance amounting to $ None.

at the rate of None cents per mile from - - - - - - - - - - - - to - - - - - - - -

- - - - - - - - and paid $ 38.79 in full to date of discharge. Name of

pay officer James Black, Chief Pay Clerk.

Address subsequent to discharge will be:

TENANTS HARBOR, Street,

City, Maine. State.

Certified to be correct upon termination of service 14 February, 19xx 41.

John R. Holmes.

xCommanding Officer—Officer in Charge.

U.S. GOVERNMENT PRINTING OFFICE 2—13678

Form 2529
TREASURY DEPARTMENT
U. S. Coast Guard
April 1938

UNITED STATES COAST GUARD

DESIGNATION OF BENEFICIARIES FOR DEATH GRATUITY

BURNT ISLAND LIFEBOAT STATION. (Unit) — PORT CLYDE, MAINE. (Place)

22 October, 1940. (Date)

FROM: Alan Brennen Watts. (209-630). Surfman.

TO: COMMANDANT (via Commander, Boston District.)

1. In the event of my death I hereby designate beneficiary or beneficiaries for payment of six months' pay, as provided in the Act of June 4, 1920, as amended by the Act of May 22, 1928, as follows:

(Full name of wife; if not married, so state)	(Address of wife)
Louise Watts.	Tenants Harbor, Maine.
Wayne Alan Watts. (Full name of child; if none, so state)	Tenants Harbor, Maine. (Address of child)
None. (Full name of child; if none, so state)	None. (Address of child)
None. (Full name of child; if none, so state)	None. (Address of child)

2. In the event of my leaving no widow or child, or of their decease before payment is made, I then designate as my beneficiary under the said act the following dependent relative:

(Full name of relative)	(Relationship)	(Address of relative)
Florence L. Watts.	Mother	Jonesport, Maine.

None exists.
(State briefly wherein dependency exists)

3. In the event of the death of the above-named dependent relative before payment is made, I then designate as my beneficiary under said act the following dependent relative:

(Full name of relative)	(Relationship)	(Address of relative)
Fred H. Watts.	Father	Jonesport, Maine.

None exists.
(State briefly wherein dependency exists)

WITNESSED BY: John R Holmes.
John R. Holmes. B.M.1.c

SIGNED: Alan B. Watts.
Alan B. Watts. (209-630)

Rank Officer in Charge.

Rank or Rating Surfman.

2—10348 U. S. GOVERNMENT PRINTING OFFICE

Form 2500 B
TREASURY DEPARTMENT
U. S. COAST GUARD
Revised Nov., 1929

COAST GUARD FEB 24 1938

SPECIAL TEMPORARY ENLISTMENT CONTRACT

The Act approved April 21, 1924, provides:

"Under such regulations as he may prescribe, the Secretary of the Treasury is authorized to appoint temporary warrant officers, and to make special temporary enlistments, in the Coast Guard. No person shall be entitled to retirement because of his temporary appointment or enlistment under this section."

ENLISTMENT [a] of Watts, Alan Brennen (209-630) (Full name, surname to left) as Surfman. (Rating)

U. S. Coast Guard ~~Cutter~~ Station (Draw line through designation not applying) Burnt Island, 1st District, Port Clyde, Maine. (Location of vessel, or P. O. address of station)

Accepted for enlistment at Burnt Island Station. (Place)

1. I, Alan Brennen Watts (Full name), this 15 day of February, 1938, desiring to enlist in the United States Coast Guard, do declare that I am of legal age (or have legal consent) to enlist; that I am of good habits and character; that I have never deserted nor received a dishonorable discharge from the United States Coast Guard, Army, Navy, Marine Corps, Revenue-Cutter Service, or Life-Saving Service; that I have never been discharged from the United States service, nor any other service, through sentence of either a civil or a military court; and that I have never been discharged from any service, civil or military, except with good character, and for the reasons given by me to the enlisting officer prior to enlistment.

2. I was born in Jonesboro, Maine, on 1 January, 1917. Citizenship [b] NB.

If naturalized, place and date of naturalization ________ Certificate number ________

If intentions declared, place and date of declaration ________

Occupation or trade Laborer Home address Jonesboro, Maine.

Full name and address of the following: - - - - - - - - - - - - - - - - - - -

- - - - - - - - - - - - - - - - (Wife, if any) - - - - - - - - - - - -

(Children under 16 years of age. Specify ages of children)

Florence L. Watts Jonesboro, Maine. (Mother, if living) Widowed? No.

(Next of kin, or person interested, if there are none of the above)

3. I certify that I am prepared to support my dependents on pay received for service under this enlistment and that there do not now exist, nor can I foresee, any circumstances connected with the support of my dependents nor any conditions in my domestic affairs which would cause me to seek a discharge on account of dependency or the need for my presence at home, prior to the expiration of this enlistment.

4. I certify that the contract of enlistment has been read by me and fully explained by the enlisting officer and that no promises of any kind have been made to me concerning assignment to duty or promotion during my enlistment.

5. I further certify that I have never been arrested by civil authorities and have never been in a reform school, jail, or penitentiary, and have never been convicted or confined other than indicated herein - - - - - - - - - - - - - - (State fully nature of offense, if any, and nature of institution in which incarcerated)

6. I have Not (If "not," so state) had previous service under the United States in the Coast Guard, Army, Navy, Marine Corps, Revenue-Cutter Service, or Life-Saving Service, and I certify that the discharge or discharges therefrom which I have produced to the enlisting officer is or are the latest received by me.

7. I do not now belong to any branch, either active or reserve, of the military or naval service of the United States, or of any of the several States.

8. I was last discharged from the U. S. Coast Guard on - - - - - - -, 19...., from Cutter/Station (Strike out one) - - - - - - - with - - - - - - (Kind of discharge) discharge, herewith submitted, serial No. - - - - -

9. I agree to and with the United States of America, represented by Niles F. Cameron (Name of enlisting officer), United States Coast Guard, in manner and form following, that is to say:

In the first place, I agree for the considerations hereinafter mentioned to enter the service of the United States Coast Guard, and in due and seasonable time to repair to such vessel or station as I may be ordered to join, and to the utmost of my power and ability discharge my several services or duties, and be in everything conformable and obedient to the lawful commands of the officers who may from time to time be placed over me.

Secondly, I oblige and subject myself, and for that purpose covenant and agree, to serve during the term of Three YEARS from the date first above written, unless sooner discharged by proper authority; and also to the condition that said period may be temporarily extended by reason of duty away from my usual station, or during an emergency, to subserve the interests of the Government; and to the further condition that the said period shall be extended to make good any time in excess of one day lost by absence on account of disease resulting from my own intemperate use of drugs or alcoholic liquors or other misconduct, so that such extension with the time served by me prior thereto will amount to a full term of Three YEARS, and I also oblige myself during such service to comply with and be subject to such laws, regulations, and discipline as are, or may be, established for the government of the United States Coast Guard, and to submit to treatment for the prevention of smallpox, typhoid (typhoid prophylaxis), and such other preventive measures as may be considered necessary by Coast Guard authorities. If discharged by sentence of a Coast Guard court, or by reason of bad conduct, undesirability or inaptitude, I agree to surrender my uniforms for a suit of civilian clothes.

Thirdly, the United States of America, represented by Niles F. Cameron (Name of enlisting officer), United States Coast Guard, does hereby covenant and agree to and with the Alan Brennen Watts (Name of person enlisting) who has hereunto signed his

[a] In cases of reenlistment prefix "Re."
[b] Citizenship: Use expressions "NB" for native born; "NZ" for naturalized; "AD" for alien, intentions declared; "A" for alien; "NPI" for native of Philippine Islands; "NPR" for native of Porto Rico.

2—3476

name, that he shall be paid in consideration of such services, the amount now established, or that may be established, by authority of law, as the pay of the ratings which may, from time to time, be assigned him, subject to such forfeitures, deductions, and retentions as may be ordered by competent authority in accordance with the laws of the United States and the Regulations governing the Coast Guard, BUT HE SHALL NOT BE ENTITLED TO RETIREMENT BECAUSE OF THIS SPECIAL TEMPORARY ENLISTMENT.

Alan Brennen Watts
Alan Brennen Watts (Signature of enlisted person) (207-830) Surfman.
UNITED STATES OF AMERICA,

By Niles F. Cameron
Niles F. Cameron (Signature and rank of officer)

10. I CERTIFY to the signature of the above person enlisted, and that I have strictly complied in his case with the Regulations of the United States Coast Guard governing enlistments, and that no promise of any kind concerning assignment to duty or promotion during this enlistment has been made.

Niles F. Cameron
Niles F. Cameron (101-693) C.B.M(L).
....., U. S. C. G., *Enlisting Officer.*

11. OATH OF ALLEGIANCE

I, Alan Brennen Watts (Full name), do solemnly swear (or affirm) that I will bear true faith and allegiance to the UNITED STATES OF AMERICA, and that I will serve them honestly against all their enemies whomsoever; and that I will obey the orders of the President of the United States, and the orders of the officers appointed over me, according to the laws and Regulations for the government of the United States Coast Guard.
And I do further swear (or affirm) that all statements made by me as now given in this record are correct.

Alan Brennen Watts
Alan Brennen Watts (Signature of enlisted person) (207-830) Surfman.

Subscribed and sworn to before me this 15 day of February, A. D. 19 38

William E. Sheeran Notary
(Commanding officer, officer in charge of a unit, or notary public)

12. DESCRIPTIVE LIST

Age 21 years 1 months. Height 5 feet 10 inches. Weight 151 pounds. Eyes Blue
Hair light brown Complexion Light Color White Married No.
Distinguishing marks None.

13. CERTIFICATE AS TO PARENT OR GUARDIAN

(To be used only in the enlistment of a minor who states that he has no parent or guardian residing in the United States or in the insular possessions of the United States)

I CERTIFY that I have neither a parent nor guardian .....
(Within the United States, in the territory or islands of the United States)

.....where this enlistment is made.

2—3476 U. S. GOVERNMENT PRINTING OFFICE 1939



ENT

CERTIFICATION OF APPLICANT

Recruiting Office at Custom House, Boston, Mass.

Date 11 February, 1938.

From: Alan Brennen Watts (209-630) Surfman.

To: Commandant, U. S. Coast Guard.

1. I hereby certify that I have this day had the enlistment contract fully explained to me, understand it fully and certify that no promises of any kind have been made to me concerning assignment to duty, discharge prior to expiration of enlistment, or advancement during the period for which I am enlisting in the Coast Guard.

2. I further certify that I am fully aware that I am enlisting for GENERAL SERVICE ONLY and will accept without reservation such station or assignment commensurate with my rating as I may receive from time to time during enlistment.

3. I hereby agree to vaccination against smallpox and prophylactic innoculation against typhoid.

4. I further certify that the matter of desertion has been fully explained to me and I am aware of the consequences of such act.

5. I am fully aware of the penalties resulting from FRAUDULENT ENLISTMENT and the meaning thereof.

6. I am fully aware of the fact that I am enlisting for a period of three years in the rating of Surfman and that the pay of the rating in which I am enlisting is $60.00 per month.

7. I further am aware that my dependents are not entitled to transportation at Government expense from place of enlistment, my home, or any other place to the place where the first unit to which I am permanently assigned or located.

ATTEST:

Alan Brennen Watts
Signature of applicant.

C. R. PEELE Chief Boatswain (L)
Name of Recruiting Officer Rank

U. S. COAST GUARD RECRUITING STATION

2678

Custom House, Boston, Mass.
(Place)

11 February, 193 8.
(Date)

I am personally acquainted with the applicant, but he did not go to school to me. I shall supply the information you ask from the school records.

FROM: U. S. COAST GUARD RECRUITING OFFICER AT First District Office.

TO: (NAME) Albert L. Skidds (ADDRESS) Jonesboro, Maine.

THE MAN WHOSE NAME APPEARS BELOW ~~ATTENDED SCHOOL WITH ME WAS~~ (~~EMPLOYED~~) BY YOU AT (~~SCHOOL~~)
(TAUGHT) (SCHOOL)

Attended the High School (PLACE) Jonesboro, Maine
(AS)
(IN GRADES) IX and X

IT IS OF GREAT IMPORTANCE THAT THIS OFFICE HAVE ON RECORD YOUR ESTIMATE OF HIS ABILITY. IF NOT PERSONALLY ACQUAINTED WITH HIS WORK, KINDLY HAVE THE QUESTIONS ANSWERED BY AN OFFICIAL OF THE COMPANY OR SCHOOL BEST ABLE TO SUPPLY THIS INFORMATION ACCURATELY.

THE GOVERNMENT ASSUMES THAT YOU WILL ANSWER FULLY, CAREFULLY AND WITH FRANKNESS. YOUR REPLY WILL BE CONSIDERED STRICTLY CONFIDENTIAL. A FRANKED ENVELOPE IS ENCLOSED FOR YOUR REPLY SO THAT YOU MAY GIVE THE MATTER IMMEDIATE ATTENTION.

O. R. ~~PEELE~~
(Recruiting Officer)

(NAME OF APPLICANT) Alan Brennen Watts
(Filled in by Recruiting Officer)

ARE YOU RELATED TO THE APPLICANT? No.

WAS THE APPLICANT EVER IN YOUR (EMPLOY) (CHARGE) He attended High School 1933-34; 1934-35.		WHEN	FROM 1933 TO 1935
		WHERE	AS Freshman and Sophomore

WHAT WAS HIS (WEEKLY WAGE) (SCHOLASTIC RECORD) Passing.

WHY DID HE (LEAVE) (QUIT) He had to go to work.

HOW DO YOU RATE HIS:

	CHECK ONE		
	GOOD	AVERAGE	POOR
TRUSTWORTHINESS	Good		
GENERAL INTELLIGENCE		X	
ABILITY		X	
HIS SKILL AS A			

TO YOUR KNOWLEDGE IS THE APPLICANT ADDICTED TO THE USE OF INTOXICATING LIQUORS OR HARMFUL DRUGS, OR HAS HE ANY CHRONIC AILMENTS? IF SO STATE PARTICULARS No.

WHAT WAS HIS REPUTATION AND STANDING WHEN IN YOUR (EMPLOY)
(CHARGE) His reputation is good here

HAS THE APPLICANT TO YOUR KNOWLEDGE EVER BEEN DISCHARGED FOR INEFFICIENCY, NEGLECT OF DUTY, OR MORAL UNFITNESS? IF SO, STATE PARTICULARS No.

THE ABOVE STATEMENT AND ANSWERS ~~ARE IN MY OWN HANDWRITING~~. (HAVE BEEN DICTATED AND CAREFULLY READ BY ME).

NOTE:-IF THE STATEMENT AND ANSWERS ARE DICTATED, STRIKE OUT THE STATEMENT ABOVE THAT THEY ARE IN THE HANDWRITING OF THE SIGNER.

Albert L. Skidds
(Signature of reference)

Feb. 14, 1938, 193
(Date)

Jonesboro, Maine
(POST OFFICE ADDRESS)

RECORD OF A BIRTH

Place of Birth Jonesboro, Maine

Street ..... No. .....

Child's Name Alan Brennen Watts

Date of Birth Jan., 1st, 1917

Sex Male Color W

Living or Stillborn Living

No. of Child, 1st, 2nd, etc. 5th

No. of children of this mother now living 5

Legitimate or Illegitimate Legitimate

Father's Name Fred Watts

" Color or Race W Age .....

" Birthplace Roque Bluffs, Me.

" Residence Jonesboro

Street ..... No. .....

Father's Occupation Laborer

Mother's Maiden Name Florence Look

" Color or Race W Age .....

" Residence Jonesboro

" Birthplace Jonesboro

" Occupation Housewife

Name and address of Physician (or other person) reporting said birth.

A. L. Smith, M. D., Machias, Me.

Date when received by Town Clerk 1/1/17

State of Maine

I hereby certify that the above birth record is correct to the best of my knowledge and belief.

Geo. F. Wurston

Clerk of Jonesboro

OLICE RECORD

Custom House, Boston, Mass.
(Place)

11 February, 1938.
(Date)

...pear on the reverse side of this form, has made formal ...d it is requested that you fill in the following from the

...applicant)

151 lbs. (Weight) White (Color)

...our office, been in: (1) Reform school? No. ...

... (4) Convicted of crime? No. (5) Arrested

...owledge is he married or single? Single.

C. R. PEELE Chief Boatswain (L)
Recruiting Officer.

(Date)

...om House, Boston, Mass.

...rds of this office.

Harry E. Spear.
Chief of Police.

enlistment.

...1938

...declare

...lified to ...er in all ...r Naval

...tates

...None

...or those

...nployed as—

Two years ago I am now unemployed.					School

Do you drink intoxicating liquors? No If so, to what extent? None

Have you ever been arrested? No If so, for what? None

Have you ever been in a reform school, jail, or penitentiary, or have you ever been convicted of any crime? No.

2—13412

(OVER)

Form 9979 (Revised)
TREASURY DEPARTMENT
U. S. COAST GUARD

REPORT OF POLICE RECORD

Coast Guard Recruiting Station, Custom House, Boston, Mass.
(Place)

11 February, 1938.
(Date)

To Chief of Police, Jonesboro, Maine

DEAR SIR:

The following-named man, whose fingerprints appear on the reverse side of this form, has made formal application for enlistment in the U. S. Coast Guard, and it is requested that you fill in the following from the records of your office:

Alan B. Watts
(Name of applicant)

21 yrs, 1 mos.	70"	151 lbs.	White
(Age)	(Height)	(Weight)	(Color)

Has the above-named man, from the records of your office, been in: (1) Reform school? No. (2) Jail? No. (3) Penitentiary? No. (4) Convicted of crime? No. (5) Arrested for any offense? No To your knowledge is he married or single? Single.

C. R. PEELE Chief Boatswain (L)
Recruiting Officer.

(Date)

To Recruiting Officer, First District, Custom House, Boston, Mass.

The above information is submitted from the records of this office:

Harry E. Spear.
Chief of Police.

U.S. GOVERNMENT PRINTING OFFICE: 1934 2—15747

enlistment.

RD M.

39 By

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, 1935

declare

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er in all
r Naval

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None

mployed as—

School

Two years ago I was		now unemployed.			

Do you drink intoxicating liquors? No If so, to what extent? None

Have you ever been arrested? No If so, for what? None

Have you ever been in a reform school, jail, or penitentiary, or have you ever been convicted of any crime? No.

2—13412

(OVER)

		X	E.P.

U. S. GOVERNMENT PRINTING OFFICE 10935

DO NOT FOLD THIS FORM

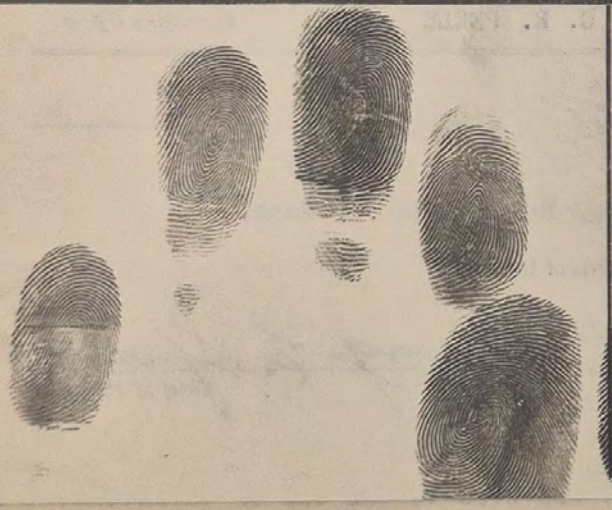
Classification No. .....

RIGHT HAND

1. Thumb	2. Index	3. Middle	4. Ring	
				

LEFT HAND

6. Thumb	7. Index	8. Middle	9. Ring	10. Little
				

LEFT HAND Plain impression of the four fingers taken simultaneously and of the thumb	RIGHT HAND Plain impression of the four fingers taken simultaneously and of the thumb
	

Form 2520
TREASURY DEPARTMENT
U. S. Coast Guard
Revised Mar., 1930

This application blank will be forwarded with enlistment contract in cases of men accepted for enlistment.

APPLICATION FOR ENLISTMENT

U. S. COAST GUARD
REC'D FEB 24 1939
ANEX

Position desired Surfman

WARNING

If you have ever been in the Coast Guard, Army, Navy, or Marine Corps and deny such service, your fingerprints will establish your identity and summary punishment will be forthcoming for fraudulent enlistment.

If statements made herein are found to be false disciplinary action will result.

Jonesboro, Maine
(Place)

Feb. 7, 1939
(Date)

I respectfully request permission to enlist in the United States Coast Guard, and to that end do declare that I am 21 years 1 months old, and believe myself to be physically qualified to perform the duties of the rating in which I may be enlisted; that I am of good habits and character in all respects; that I have never deserted from the U. S. Coast Guard, Navy, Marine Corps, Army, or Naval Reserve; and I certify that the following statements are correct:

Name in full Alan B. Watts

Date of birth Jan. 1, 1917

Place of birth Jonesboro Citizenship United States

Home address Jonesboro, Maine

Are you married? No Number and relationship of persons dependent on you for support? None

Are you prepared to support your dependents on service pay? Haven't any

Are your parents living? Yes Are your parents dependent on you for support? No

Name and address of next of kin Miss Freda H. Watts

The following must be filled out to cover the last year for those under 21 and the last 2 years for those over 21. In case of nonemployment, substitute school history.

Employer's Name	His Address	His Business	Length of Employment From—	Length of Employment To—	You were Employed as—
Left the third year of high school two years ago. I am now unemployed.					

Do you drink intoxicating liquors? No If so, to what extent? None

Have you ever been arrested? No If so, for what? None

Have you ever been in a reform school, jail, or penitentiary, or have you ever been convicted of any crime? No.

2—13412

(OVER)

I have had the following education (state grammar schools, high schools, business colleges, or schools and colleges attended, stating whether or not you graduated and the number of years you attended each):

I have graduated from Grammer School, and have had three years of high.

Have you ever served in the U. S. Coast Guard, Navy, Marine Corps, Army, or Naval Reserve? No

If so, state which None

Are you now or have you been a member of the National Guard? No.

Produce your discharges from the U. S. Coast Guard, Navy, Marine Corps, Army, Naval Reserve, or National Guard.

Have you ever applied for enlistment in the Coast Guard? Yes

When did you apply? Aug. 13, 1936 Where? Boston

Were you accepted or rejected? Rejected If rejected, state why Carious teeth. Had my teeth corrected

I further certify that there do not exist any circumstances connected with the support of my dependents nor any conditions in my domestic affairs which, in the event I am accepted for enlistment, would cause me to seek a discharge prior to the expiration of my period of enlistment on account of dependency or the need for my presence at home.

(Sign your full name here) Alan Brunner Watts

Accepted or rejected Accepted Cause of rejection

Date 15 February, 1938.

I certify that the statements of the applicant, contained herein have been verified and that the same are true to the best of my knowledge and belief.

C. R. Peele Chief Boatswain (L)
U. S. C. G.

C. R. PEELE

U. S. GOVERNMENT PRINTING OFFICE 2—13412

Form 2529
TREASURY DEPARTMENT
U. S. COAST GUARD
April 1937

U.S. COAST GUARD
REC'D FEB 24 1938 By
ANS'D

UNITED STATES COAST GUARD

DESIGNATION OF BENEFICIARIES FOR DEATH GRATUITY

Burnt Island Station. (Unit) — Port Clyde, Maine. (Place)

15 February, 1938. (Date)

FROM: Alan Brennen Watts (209-630) Surfman.

TO: COMMANDANT (via Commander, First District.)

1. In the event of my death I hereby designate beneficiary or beneficiaries for payment of six months' pay, as provided in the Act of June 4, 1920, as amended by the Act of May 22, 1928, as follows:

None. (Full name of wife; if not married, so state) — (Address of wife)

None. (Full name of child; if none, so state) — (Address of child)

None. (Full name of child; if none, so state) — (Address of child)

None. (Full name of child; if none, so state) — (Address of child)

2. In the event of my leaving no widow or child, or of their decease before payment is made, I then designate as my beneficiary under the said act the following dependent relative:

Florence L. Watts (Full name of relative) — Mother (Relationship) — Jonesboro, Maine (Address of relative)

None exists. (State briefly wherein dependency exists)

3. In the event of the death of the above-named dependent relative before payment is made, I then designate as my beneficiary under said act the following dependent relative:

Fred N. Watts (Full name of relative) — Father (Relationship) — Jonesboro, Maine. (Address of relative)

None exists (State briefly wherein dependency exists)

WITNESSED BY:

Niles F Cameron
Niles F. Cameron (101-693)
Rank C.B.M(L)

SIGNED:

Alan Brennen Watts
Alan Brennen Watts (209-630)
Rank or Rating Surfman.

2—10348 U S GOVERNMENT PRINTING OFFICE

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

U. S. COAST GUARD
REC'D FEB 24 1938 By
ANS'D

REPORT OF CHANGE IN PERSONNEL

Watts,	Alan	B.	(209-630)	Surfman.
(Surname)	(First name)	(Middle initial)	(Service No.)	(Rank or rating)

Burnt Island Station.	Port Clyde, Maine.	15 February, 1938.
(Unit)	(Place)	(Date)

Enlisted for a period of three years Special Temporary enlistment this date.

FILE
\M.B./

AUTHORITY: Headquarters 3rd Indorsement to Form 2525-B, Dated 2/9/38.

Niles F. Cameron
(Commanding)
Niles F. Cameron (101-693) C.B.M(L)

Officer in charge.
(Title)

SPACE BELOW IS FOR HEADQUARTERS' USE ONLY

LAW	PERSONNEL RECORDS		
	Statistics	Correspondence	Records
		X	E.P.

U. S. GOVERNMENT PRINTING OFFICE 0 10035

5/R

LEGEND: Insert N/A to the items below which are not applicable

PERSONAL DATA

1. NAME (Last, First, Middle)	2. SERVICE NUMBER	3a. GRADE, RATE OR RANK	b. DATE OF RANK (Day, Month, Year)
[illegible] ALAN BRENNAN	209-630	BMC	10-16-55

4. DEPARTMENT, COMPONENT AND BRANCH OR CLASS	5. PLACE OF BIRTH (City and State or Country)	6. DATE OF BIRTH	DAY	MONTH	YEAR
TREASURY - USCG	JONESBORO, MAINE		1	Jan	17

7a. RACE	b. SEX	c. COLOR HAIR	d. COLOR EYES	e. HEIGHT	f. WEIGHT	8. U.S. CITIZEN	9. MARITAL STATUS
CAUCASIAN	MALE	BROWN	BLUE	5'11"	190	[X] YES [ ] NO	MARRIED

10a. HIGHEST CIVILIAN EDUCATION LEVEL ATTAINED	b. MAJOR COURSE OR FIELD
HS2	ACADEMIC

TRANSFER OR DISCHARGE DATA

11a. TYPE OF TRANSFER OR DISCHARGE	b. STATION OR INSTALLATION AT WHICH EFFECTED
RETIREMENT	DEPOT SOUTHWEST HARBOR, MAINE

c. REASON AND AUTHORITY: COMDT(PE-1) ltr dtd 2/19/58 Title 14, UNITED STATES CODE, SECTION 355

d. EFFECTIVE DATE	DAY	MONTH	YEAR
	1	APRIL	58

12. LAST DUTY ASSIGNMENT AND MAJOR COMMAND	13a. CHARACTER OF SERVICE	b. TYPE OF CERTIFICATE ISSUED
USCG DEPOT SOUTHWEST HARBOR, MAINE	HONORABLE	DD Form 217-CG

SELECTIVE SERVICE DATA

14. SELECTIVE SERVICE NUMBER	15. SELECTIVE SERVICE LOCAL BOARD NUMBER, CITY, COUNTY AND STATE	16. DATE INDUCTED	DAY	MONTH	YEAR
* * * *	Not Available		N/A		

17. DISTRICT OR AREA COMMAND TO WHICH RESERVIST TRANSFERRED: N/A

SERVICE DATA

18. TERMINAL DATE OF RESERVE OBLIGATION	DAY	MONTH	YEAR
	N/A		

19. CURRENT ACTIVE SERVICE OTHER THAN BY INDUCTION
a. SOURCE OF ENTRY: [ ] ENLISTED (First Enlistment) [ ] ENLISTED (Prior Service) [X] REENLISTED [ ] OTHER:
b. TERM OF SERVICE (Years): 6 yrs
c. DATE OF ENTRY: DAY 13 MONTH May YEAR 52

20. PRIOR REGULAR ENLISTMENTS	21. GRADE, RATE OR RANK AT TIME OF ENTRY INTO CURRENT ACTIVE SERVICE	22. PLACE OF ENTRY INTO CURRENT ACTIVE SERVICE (City and State)
FOUR	BM1	BOSTON, MASS.

23. HOME OF RECORD AT TIME OF ENTRY INTO ACTIVE SERVICE (Street, RFD, City, County and State): HIGH STREET, MACHIAS, MAINE

25a. SPECIALTY NUMBER AND TITLE	b. RELATED CIVILIAN OCCUPATION AND D. O. T. NUMBER
- - - - - - -	- - - - - - - - - - -

24. STATEMENT OF SERVICE

		YEARS	MONTHS	DAYS
a. CREDITABLE FOR BASIC PAY PURPOSES	(1) NET SERVICE THIS PERIOD	20	01	16
	(2) OTHER SERVICE	00	00	00
	(3) TOTAL (Line (1) + line (2))	20	01	16
b. TOTAL ACTIVE SERVICE		20	01	16
c. FOREIGN AND/OR SEA SERVICE		00	00	00

26. DECORATIONS, MEDALS, BADGES, COMMENDATIONS, CITATIONS AND CAMPAIGN RIBBONS AWARDED OR AUTHORIZED: AUTHORIZED GOOD CONDUCT MEDAL WITH FIVE STARS

27. WOUNDS RECEIVED AS A RESULT OF ACTION WITH ENEMY FORCES (Place and date, if known): NONE

28. SERVICE SCHOOLS OR COLLEGES, COLLEGE TRAINING COURSES AND/OR POST-GRADUATE COURSES SUCCESSFULLY COMPLETED

SCHOOL OR COURSE a	DATES (From - To) b	MAJOR COURSES c
NONE		

29. OTHER SERVICE TRAINING COURSES SUCCESSFULLY COMPLETED: BMC-1

VA DATA

30a. GOVERNMENT LIFE INSURANCE IN FORCE	b. AMOUNT OF ALLOTMENT	c. MONTH ALLOTMENT DISCONTINUED
[ ] YES [X] NO	- - - - - - - - - - -	- - - - - - - -

31a. VA BENEFITS PREVIOUSLY APPLIED FOR (Specify type)	b. VA CLAIM NUMBER
NONE	C- NONE

AUTHENTICATION

32. REMARKS: NOT ENTITLED TO MOP

33. PERMANENT ADDRESS FOR MAILING PURPOSES AFTER TRANSFER OR DISCHARGE (Street, RFD, City, County and State)	34. SIGNATURE OF PERSON BEING TRANSFERRED OR DISCHARGED
HIGH STREET, MACHIAS, MAINE	ALAN B. WATTS Alan B Watts
35a. TYPED NAME, GRADE AND TITLE OF AUTHORIZING OFFICER	b. SIGNATURE OF OFFICER AUTHORIZED TO SIGN
G. W. HUPPER, CHBOSN W-2, USCG GRUCOM	G. W. Hupper

DD FORM 1 NOV 55 214 REPLACES EDITION OF 1 JUL 52, WHICH IS OBSOLETE.

ARMED FORCES OF THE UNITED STATES REPORT OF TRANSFER OR DISCHARGE

REPORT SYMBOL (N) AB-1

CHARACTER OF SEPARATION: HONORABLE

REPORT OF SEPARATION FROM THE ARMED FORCES OF THE UNITED STATES

. COAST GUARD

SEPARATION DATA

1. LAST NAME - FIRST NAME - MIDDLE NAME	2. SERVICE NUMBER	3. GRADE, RATE OR RANK AND DATE OF APPOINTMENT	4. COMPONENT AND BRANCH OR CLASS
WATTS, ALAN BRENNEN	209-630	BM1	USCG

5. QUALIFICATIONS: SPECIALTY NUMBER OR SYMBOL	RELATED CIVILIAN OCCUPATION AND D. O. T. NUMBER	6. EFFECTIVE DATE OF SEPARATION: DAY	MONTH	YEAR	7. TYPE OF SEPARATION
**	**	12	MAY	52	Discharge

8. REASON AND AUTHORITY FOR SEPARATION	9. PLACE OF SEPARATION
ART 12-3-42A(1) CG Regs.	Boston, Mass.

10. DATE OF BIRTH: DAY	MONTH	YEAR	11. PLACE OF BIRTH (City and State)	12. DESCRIPTION: SEX	RACE	COLOR HAIR	COLOR EYES	HEIGHT	WEIGHT
1	JAN	17	Jonesboro, Maine	Male	Caucasian	Brn	Blue	71	180

SELECTIVE SERVICE DATA

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

16. ENLISTED IN OR TRANSFERRED TO A RESERVE COMPONENT: YES	NO	COMPONENT AND BRANCH OR CLASS	COGNIZANT DISTRICT OR AREA COMMAND
	X	***	**

SERVICE DATA

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

18. GRADE - RATE OR RANK AT TIME OF ENTRY INTO ACTIVE SERVICE: BM1

19. DATE AND PLACE OF ENTRY INTO ACTIVE SERVICE: DAY	MONTH	YEAR	PLACE (City and State)	20. HOME ADDRESS AT TIME OF ENTRY INTO ACTIVE SERVICE (St., R.F.D., County, City and State)
5	MAY	48	Southwest Harbor	O'Brien Ave., Machias, Maine

STATEMENT OF SERVICE FOR PAY PURPOSES	A. YEARS	B. MONTHS	C. DAYS
21. NET (USCG) SERVICE COMPLETED FOR PAY PURPOSES EXCLUDING THIS PERIOD	10	02	20
22. NET SERVICE COMPLETED FOR PAY PURPOSES THIS PERIOD	04	00	08
23. OTHER SERVICE (Act of 16 June 1942 as amended) COMPLETED FOR PAY PURPOSES			
24. TOTAL NET SERVICE COMPLETED FOR PAY PURPOSES	14	02	28

25. ENLISTMENT ALLOWANCE PAID ON EXTENSION OF ENLISTMENT, IF ANY: DAY * | MONTH * | YEAR * | AMOUNT *

26. FOREIGN AND/OR SEA SERVICE: YEARS ( ) | MONTHS ( ) | DAYS ( )

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

Authorized Good Conduct Medal

28. MOST SIGNIFICANT DUTY ASSIGNMENT

LightHouse station
Libby Island

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

****

30. SERVICE SCHOOLS OR COLLEGES, COLLEGE TRAINING COURSES AND/OR POST. GRAD. COURSES SUCCESSFULLY COMPLETED	DATES (From—To)	MAJOR COURSE	31. SERVICE TRAINING COURSES SUCCESSFULLY COMPLETED
****	***	***	****

INSURANCE AND PAY DATA

GOVERNMENT INSURANCE INFORMATION: IF PREMIUM IS NOT PAID WHEN DUE OR WITHIN THIRTY-ONE DAYS THEREAFTER, INSURANCE WILL LAPSE. MAKE CHECKS OR MONEY ORDERS PAYABLE TO THE TREASURER OF THE UNITED STATES, FORWARD PAYMENTS FOR N.S.L.I. TO THE COLLECTIONS UNIT, VA BRANCH OFFICE HAVING JURISDICTION OF AREA IN WHICH YOU MAINTAIN PERMANENT RESIDENCE. FORWARD PAYMENTS FOR U.S.G.L.I. TO COLLECTIONS DIVISION, VETERANS ADMINISTRATION, WASHINGTON 25, D. C. WHEN MAKING INSURANCE PAYMENTS BE SURE TO GIVE FULL NAME AND PERMANENT ADDRESS FOR MAILING PURPOSES, SERVICE SERIAL NUMBER AND POLICY NUMBER(S) IF KNOWN.

32. KIND OF INSURANCE (amount and premium due each month): N. S. L. I.	U. S. G. L. I.	33. MONTH ALLOTMENT DISCONTINUED	34. MONTH NEXT PREMIUM DUE
***	***	***	****

35. TOTAL PAYMENT UPON SEPARATION	36. TRAVEL OR MILEAGE ALLOWANCE INCLUDED IN TOTAL PAYMENT	37. DISBURSING OFFICER'S NAME AND SYMBOL NUMBER
562.92	19.62	(2373) T.M.KROTKY, CPCLK, ACO.

AUTHENTICATION

38. REMARKS (Continue on reverse)

Recommended for reenlistment

39. SIGNATURE OF OFFICER AUTHORIZED TO SIGN

NAME, GRADE AND TITLE (Typed)

S. PISICCHIO, LT. USCG
By direction

PERSONAL DATA

40. V. A. BENEFITS PREVIOUSLY APPLIED FOR (Specify type)
COMPENSATION, PENSION, INSURANCE, BENEFITS, ETC. ****

CLAIM NUMBER ****

41. DATES OF LAST CIVILIAN EMPLOYMENT: FROM	TO	42. MAIN CIVILIAN OCCUPATION	43. NAME AND ADDRESS OF LAST CIVILIAN EMPLOYER
		Fisherman	Self employed

44. UNITED STATES CITIZEN: YES	NO	45. MARITAL STATUS	46. NON-SERVICE EDUCATION (Years successfully completed): GRAMMAR	HIGH SCHOOL	COLLEGE	DEGREE(S)	MAJOR COURSE OR FIELD
X		Married	8	2	)	0	0

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

HIGH STREET, MICHIAS, MAINE

48. SIGNATURE OF PERSON BEING SEPARATED

Alan B. Watts

ALL ENTRIES APPLY TO CURRENT PERIOD OF SERVICE (unless otherwise indicated)

D FORM-214

G.P.O.: 1950-917007

RECORD COPY Army and Air Force: Attach To MR For Day On Which Separation Actually Occurs
Navy: To District Civil Readjustment Office
Marine Corps: To Veteran Contact Service of Reserve District Indicated In Item 47
Coast Guard: To District Personnel Officer Of Unit Effecting Separation

INSTRUCTIONS

This side of the service record is for all official and unofficial correspondence concerning the individual, such as: Transfer Orders, official requests, personal documents, i. e., Discharge Certificates, Training Course Certificates, original of Citations or Commendations, etc.

Upon separation from the Coast Guard, all personal documents should be removed and returned to the individual concerned. Obtain a receipt for papers so delivered and file with the remaining correspondence in the service record.

Eliminate correspondence which has served its purpose and arrange remaining papers in chronological order, latest dated papers on top. Forward with closed-out service record to Commandant (PE).

Identification Card No. 79102 "A" Blood Type

CONTENTS CHECKED FOR ACCURACY

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

DATE	STATION	BY (NAME AND GRADE)	INITIALS
10-1-52	GRP ROCKLAND Me	M.O. WRIGHT, CHBOSN	MOW
~~1-25-57~~	~~GAP ROCKLAND, ME~~	~~M.O. WRIGHT, CHBOSN~~	
1-25-57	CPP ROCKLAD, MAINE	H. N. LITCHFIELD, CHBOSN	HNL
1-29-57	CG DEPOT, 30WEST HOR, ME.	G. W. HUPPER, CHBOSN (W-2), USCG	GWH
4-1-58	USCG Depot SW Hbr, Me.	G. W. HUPPER, CHBOSN (W-2), USCG	GWH

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

UNITED STATES COAST GUARD

ADDRESS REPLY TO:
Commander,
U. S. Coast Guard Group
Southwest Harbor, Maine

1 April 1958

FILE:

From: Commander, CG Group Southwest Harbor, Maine
To: Authorized Certifying Officer

Subj: Reenlistment bonus; recoupment of

1. The records indicate that WATTS, Alan B. (209-630)BMC reenlisted in the U. S. Coast Guard on 13 May 1952 for six years and was paid a reenlistment bonus in the amount of $360.00 and is to be separated by reason of Voluntary Retirement on 1 April 1958.

G. W. HUPPER, CHBOSN W-2, USCG
GROUP COMMANDER

THAT PORTION OF THE ABOVE MENTIONED BONUS REQUIRED TO BE REFUNDED HAS BEEN RECOVERED ON THE MEMBER'S MILITARY PAY RECORD (DD-FORM 113), IN THE AMOUNT OF $7.17 .

J. E. GILES
Authorized Certifying Officer
First Coast Guard District
Boston, Massachusetts

UNITED STATES COAST GUARD

ADDRESS REPLY TO:
COMMANDER
USCG GROUP
SOUTHWEST HARBOR, MAINE

19 November 1957
A2-9

From: Commander, CG Group, Southwest Harbor, Maine
To: WATTS, Alan B. (209-630) BMC, USCG

Subj: Authorization for handling classified matter

Ref: (a) Article 1506, U.S. Navy Security Manual for Classified Matter

1. Having been cleared pursuant to reference (a), you are granted access on a "need-to-know" basis to classified matter up to and including Confidential in connection with your assignment as Executive Officer.

2. In carrying out your duties in connection with classified matter, you will safeguard such material entrusted to you and be governed in all respects by the provisions of U.S. Coast Guard Regulations, the U.S. Navy Security Manual for Classified Matter as amended for Coast Guard use, as well as other pertinent instructions as may be issued relating to the handling of classified information.

3. You are authorized to receipt for matter classified up to and including Confidential.

4. The authority granted herein continues in force until revoked or until you are released from duty assigned.

G. W. HUPPER, CHIEF W-2, USCG
GROUP COMMANDER

Copy to:
File
CCGD1(o)

CG-3517 (SH) (8-55)

UNITED STATES COAST GUARD

ADDRESS REPLY TO:
COMMANDER
USCG GROUP
SOUTHWEST HARBOR, MAINE

7 March 1957
A8-6

From: Commander, CG Group, Southwest Harbor, Maine
To: WATTS, Alan B. (209-630) BMC, USCG

Subj: Authorization to handle classified material CONFIDENTIAL

Ref: (a) OPNAV Instruction 5510.1A, with CG amendments thereto

1. In accordance with reference (a), you are hereby authorized access to classified material, CONFIDENTIAL, in connection with your duties while attached to USCG GROUP, SOUTHWEST HARBOR, MAINE.

2. Familiarize yourself and be governed by Chapter 6 of reference (a) and safeguard all matter accordingly.

3. This clearance continues in force until modified, revoked, or your transfer from the above indicated unit.

4. A copy of this letter will be filed in your service record.

G. W. HUPPER

Copy to:
Commandant (PE)
COMONECGD (int)
Service Record

S/R

UNITED STATES COAST GUARD

ADDRESS REPLY TO:
COMMANDER
USCG GROUP
SOUTHWEST HARBOR, MAINE

6 March 1957
P16-3

From: Commanding Officer, CG Depot, Southwest Harbor, Maine
To: WATTS, Alan B. (209-630) BMC, USCG

Subj: Duty Assignment

Ref: (a) Article 8-10-8, CG Regs
(b) Commandant's Instruction No. 6-57

1. In accordance with references you are hereby designated as Photographic Officer.

2. The foregoing assignment is in addition to your regularly assigned primary duties.

3. You are directed to acquaint yourself with the contents of references.

G. W. Hupper.
G. W. HUPPER

5-1-57

COMMANDER
USCG GROUP
SOUTHWEST HARBOR, MAINE

27 February 1957
P19-2

From: WATTS, Alan B. (209-630) BMC, USCG
To: Commandant (PE)
Via: (1) Commander, CG Group, Southwest Harbor, Maine
(2) Commander, First Coast Guard District (p)

Subj: Retirement; request for

Ref: (a) Personnel Instruction No. 8-57

1. I request retirement on the first day of March, 1958, or as soon thereafter as possible.

2. I understand that I will enter into my next pay period on 15 February 1960.

ALAN B. WATTS

---

27 February 1957
P19-2

FIRST ENDORSEMENT

From: Commander, CG Group, Southwest Harbor, Maine
To: Commandant (PE)
Via: Commander, First Coast Guard District (p)

1. Forwarded for consideration.

G. W. HUPPER

---

p
28 February 1957

SECOND ENDORSEMENT

From: Commander, First Coast Guard District
To: Commandant (PE)

1. Forwarded, approved.

GEORGE R. LESLIE
By direction

Receipt of request for retirement acknowledged.
Service as of 31 March 56 is
18 yrs, 1 mo. 16 days.

S/P Copy

COMMANDER
USCG GROUP
SOUTHWEST HARBOR, MAINE

27 February 1957
P19-2

From: WATTS, Alan D. (209-630) BMC, USCG
To: Commandant (PE)
Via: (1) Commander, CG Group, Southwest Harbor, Maine
(2) Commander, First Coast Guard District (p)

Subj: Retirement; request for

Ref: (a) Personnel Instruction No. 8-57

1. I request retirement on the first day of March, 1958, or as soon thereafter as possible.

2. I understand that I will enter into my next pay period on 15 February 1960.

ALAN D. WATTS

---

27 February 1957
P19-2

FIRST ENDORSEMENT

From: Commander, CG Group, Southwest Harbor, Maine
To: Commandant (PE)
Via: Commander, First Coast Guard District (p)

1. Forwarded for consideration.

G. W. HUPPER

S/R

UNITED STATES COAST GUARD

ADDRESS REPLY TO:
Commanding Officer
U. S. Coast Guard Depot
Southwest Harbor, Maine

12 February 1957
P22

From: Commanding Officer, DEPOT, Southwest Harbor, Maine
To: WATTS, Alan B. (209-630) EMC, USCG

Subj: Safety Board; promulgation and function of

Ref: (a) DISTRICT SAFETY INSTRUCTION NO. 2-56

1. You are directed to convene a Safety Board, consisting of yourself as President, and of ROBINSON, Richard G. (223-128) EMC(P), USCG as a member, and of KILCOYNE, Robert (305-893) YN2, USCG, as a member and recorder, for the purpose of inaugurating and maintaining an aggresive and comprehensive accident prevention program.

2. In connection with the above, you will conduct regular monthly safety inspections of this unit and report your findings and recommendations for evaluation and approval.

3. Acknowledge receipt by endorsement hereon.

G. W. HUPPER

Copy to:
District Safety Administrator

- -

12 February 1957
P22

FIRST ENDORSEMENT

1. Receipt of the above is hereby acknowledged.

Alan B. Watts

YN acting
S/R copy attach
to Watts orders

Comdr.,1st CG District
1400 Custom House
Boston 9, Mass.

P
29 January 1957
MM/P16-3

TONO 5265/01201X

From: Commander, First Coast Guard District
To: Commander, Rockland Group

Subj: WATTS, Alan B. (209-630) HMC, USCG; orders, transfer, travel, amendment of

Ref: (a) CCGDONE (p) Message 24211.2Z January 1957

1. Amend reference (a), in that WATTS will report 29 January 1957 to Depot Southwest Harbor, Maine for assignment to duty, in lieu of for assignment to duty as Officer-In-Charge.

D. M. CHAPMAN
By direction

Copy to:
Depot Southwest Harbor
Burnt Island LRS

RECEIVED
FEB 2 1957
U. S. COAST GUARD DEPOT
SOUTHWEST HARBOR, MAINE

UNITED STATES COAST GUARD

Address Reply To:
Commander, 1st CG District
1400 Custom House
Boston 9, Mass.

P
24 October 1955
MM/P17-2

From: Commander, First Coast Guard District
To: Commander, CG Group Rockland

Subj: Personnel; permanent appointment

Ref: (a) COMDT (PE-1) ltr dtd 14 October 1955, MM

1. Under the authority of reference (a), the provisional rates of the below listed personnel are hereby made permanent, effective 16 October 1955, with seniority in rate from the dates indicated, provided their conduct and performance of duty since date of recommendation has been satisfactory. Order of seniority in rate of personnel advanced on the same day is indicated after their names. Certificates of Appointment are enclosed for delivery to the below listed personnel. If permanent appointment is not justified, the enclosed certificates will be returned to the Commandant (PE) for cancellation.

WATTS, Alan B. (209-630) BMC(P)(AN) 10-1-54 No. 32

2. Make necessary entries in service records and on daily diary showing permanent appointment, citing this letter and reference (a) as the authority therefor.

E. B. HALL
By direction

Encl: (1) Certificates of Appointment

Copy to:
Accounting
File

Commander, CG Group
Rockland, Maine.

3 October 1955
GV/MM/P17-2

SR

From: Commander, Coast Guard Group Rockland, Maine.
To: Commandant (PE)
Via: Commander, First Coast Guard District (p)

Subj: WATTS, Alan B. (209-630) BMC(P)(AN); recommendation for issuance of permanent appointment for Boatswain's Mate Chief

Ref: (a) CG-207 Personnel Manual (5-C-30)

1. WATTS was advanced to the rating of Boatswains Mate Chief (Provisional) effective 1 October 1954, to rank as such from that date.

2. Data concerning WATTS as required referance (a) is respectfully submitted as follows.

3. WATTS is a leading person of strong character.

4. WATTS is capable of directing the work of a force under him and planning details for its best employment.

5. WATTS is capable of maintaining discipline.

6. WATTS has had no mark below 3.8 in proficiency in rate or below 4.0 in conduct during the year immediately preceding.

7. WATTS is strongly recommended for permanent appointment.

8. This officer's recommendation is based on personal knowledge of WATTS'S ability and character over a period of years. Subject man's appearance is exemplary and serves as a strong influence upon others. WATTS is in all respects an outstanding small boatman.

M. O. WRIGHT

SR

Comdr., 1st CG District
1400 Custom House
Boston 9, Mass.

P
24 June 1955
GW1/A3

From: Commander, First Coast Guard District
To: WATTS, Alan B. (209-301) BMC(P)(AW), USCG
Via: Commander, Rockland Group, Rockland, Maine

Subj: Designation as Officer-in-Charge, Burnt Island Lifeboat Station

Ref: (a) Comdr., Rockland Group, Rockland, Maine, ltr 9 June 1955, GW/A3
(b) Commandant's Circular 25-51 as amended by Commandant's Circular 4-52.

1. On the basis of information contained in reference (a), you are hereby designated as Officer-in-Charge, Burnt Island Lifeboat Station, Port Clyde, Maine.

2. In accordance with reference (a) and under authority of reference (b), you are issued the following administrative authority in connection with your duties as Officer-in-Charge, Burnts Island Lifeboat Station, Port Clyde, Maine.

a. To impose non-judicial punishment, as listed in paragraph 5 (c) of reference b), and in accordance with Section 0103a, Coast Guard Supplement to Manual for Courts-Martial and with the procedure set forth in the Courts-Martial Manual.

3. The authority hereby issued is effective only during your assignment as Officer-in-Charge, Burnt Island Lifeboat Station, Port Clyde, Maine.

R. L. RANEY

Copy to:
Commandant (PE)
Chief, Operations Division, 1st CGD
Chief, Personnel Division, 1st CGD
District Legal Office, 1st CGD

IND-1

29 June 1955

From: Commander, Coast Guard Group Rockland Maine.
To: WATTS, Alan B. (209-301) BMC(P) USCG

1. Forwarded

M. O. WRIGHT

Service Record

WATTS, Alan B.
Burnt Is. LBS
Port Clyde, Me.

7 October 1954
MM/P17-2

From: WATTS, Alan B. (209-630) BMC(P)
To: COMMANDANT (PE-1)
Via: (1) Commander, Coast Guard Group Rockland, Maine.
(2) Commander, First Coast Guard District (p)

Subj: Statement of BML rating at any future date for my own convenience.

Ref: (a) COMONECGD (p) ltr dtd 1 October 1954, File MM/P17-2
(b) COMDT (PE-1) ltr dtd 28 September 1954, File MM
(c) Section 12-3-23A Coast Guard Regulations.

1. Upon advancement becoming effective in accordance with referances (a) (b) and (c) I respectfully submit a statement to the effect that I fully realize and understand that once my rating is changed, I will not be assigned a BML rating at any future date for my own convenience.

Alan B. Watts

- -

7 October 1954

FIRST ENDORSEMENT on WATTS, Alan B. ltr dtd 10-7-54, File MM/P17-2

From: Commander, Coast Guard Group Rockland, Maine.
To: Commander, First Coast Guard District (p)

1. Forwarded:

M. O. WRIGHT

Commander, 1st CG District
1400 Custom House
Boston 9, Massachusetts

P
1 October 1954
MM/P17-2

From: Commander, First Coast Guard District
To: Commander, CG Group, Rockland, Maine

Subj: Personnel; advancement in rating

Ref: (a) COMDT (PE-1) ltr dtd 28 September 1954, file MM

1. Under authority of reference (a) and Section 12-3-23A, Coast Guard Regulations, the below-named men are advanced to the rating indicated, effective 1 October 1954, provided their conduct and performance of duty since date of examination have been satisfactory. If advancement is not justified, the Commandant (PE) and Commander, First Coast Guard District will be immediately advised.

MERCHANT, Robert C. (209-614) BML1 to BMC(P)
(Attached to Whitehead LBS)
WATTS, Alan B. (209-630) BML1 to BMC(P)
(Attached to Burnt Island LBS)

2. The advancement of MERCHANT and WATTS will only be effected provided that they submit a statement that they understand that once their rating is changed, they will not be assigned a BML rating at any future date for their own convenience.

3. Make necessary entry in service record and on personnel reports showing advancement, citing this letter, reference (a) and Section 12-3-23A, Coast Guard Regulations as the authority therefor.

E. B. HALL
By direction

Commander, CG Group
Rockland, Maine

16 February, 1954
B16-4

From: Commander, Coast Guard Group Rockland, Maine
To: Commander, First Coast Guard District (f)

Subj: W-2 Form, Withholding Tax Statement; request for

1. It is respectfully requested that a W-2 form be forwarded to WATTS, Alan B. (209-630) BM1l, attached to Burnt Island Lifeboat Station. WATTS has not received subject form to date, and it is desireous that it be forwarded as soon as possible.

M. O. WRIGHT

Comdr., 1st CG District
Boston 9, Mass.

P
18 January 1954
MM/P16-3

From: Commander, First Coast Guard District
To: Commander, Coast Guard Group Rockland, Maine

Subj: WATTS, Alan B. (209-630) BML1, USCG; temporary duty, termination of

Ref: (a) Group Rockland ltr dtd 6 January 1954, P16-3

1. In accordance with the request contained in reference (a), terminate the temporary duty of subject named man at the Burnt Island Lifeboat Station and retain him on board that unit for assignment to duty.

2. No travel is deemed necessary in the execution of this order and none is authorized.

3. Proceed time is not authorized.

F. N. MARTIN
By direction

Commander, CG Group
Rockland, Maine

12 January, 1954
GV/P16-3/MM

From: Commander, Coast Guard Group Rockland, Maine
To: Commander, First Coast Guard District (p)

Subj: WATTS, Alan B. (209-630) BML1(AN); reassignment of; information on

Ref: (a) COMONECGD(p)/L of 8 January, 1954, File GD1/P16-3/MM
(b) GRUCOM Rockland/L of 6 January, 1954, File P16-3

1. In regards to the transfer of WATTS from Officer-in-Charge of Goose Rocks Light Station to Burnt Island Lifeboat Station. This TAD transfer was made to fill the vacancy created by the recent discharge of JACOB, Herman (n) Jr. (285-884) BM2(P), and in view of WATTS' past experiance, service and ability, his being second in charge of Burnt Island Lifeboat Station will enable this station to fullfill its mission as a Lifeboat Station in the absence of the Officer-in-Charge, who must be granted liberty and leave from time to time. In the opinion of this officer, a first hitch, third class provisional petty officer, with a short time at this particular station, is not capable of running such a station in a satisfactory manner, even though in this case the third class boatswains mate in question is outstanding. This transfer in the case of WATTS was further deemed expedient due to the fact that WATTS has spent the past four or more years on isolated light stations, such as Boone Island, and Goose Rocks. The presently assigned BM3(P) is due for discharge on 25 January, 1954.

2. Goose Rocks Light Station has had three men attached for the past ten years, or since the civilian Keepers retired. It is necessary to have three men attached due to the fact that the personnel attached to this station are authorized eight (8) days compensatory liberty for twenty-two (22) days, and leave must be granted from time to time. At present STRUNK, Charles E. (301-087) EN3(P) and TESONE, Frank (n) (303-835) SN are attached. This officer contemplates the transferring of BALKE, Shannon B. (300-347) EN2(P), Matinicus Rock Light Station to Goose Rocks Light Station as Officer-in-Charge and replacing the vacancy on the Rock with a Fireman or Seaman.

3. The authorized complement of Burnt Island Lifeboat Station is a Boatswain as Officer-in-Charge, it is recommended that a Boatswain be so assigned or the complement authorization be amended.

4. It has been pointed out by higher authority and current instructions that transfers within a Group are within the scope of authority given a Group Commander, when such is deemed beneficial to the Group and the Coast Guard in general.

5. In the future a more detailed informative letter will be written.

...r. Grp Rockland
...o COMONECGD (p)

12 January, 1954
GV/P16-3/MM

6. In accordance with reference (b), it is respectfully requested that the District sanction this transfer of WATTS to the extent of making same permanent.

M. O. WRIGHT

Comdr., 1st CG District
1400 Custom House
Boston 9, Mass.

p
8 January 1954
GD1/P16-3/MM

From: Commander, First Coast Guard District
To: Commander, CG Group, Rockland, Maine

Subj: WATTS, Alan B. (209-630) BML1; reassignment of; information concerning

Ref: (a) Comdr., CG Group Rockland/ltr dtd 1/6/54, file P16-3

1. In regard to your request in reference (a), you are advised that insufficient information is furnished to make a proper evaluation of this case.

2. The records of this office indicate that the authorized complement for Goose Rocks Light Station calls for (1) BM1 and (1) EN2; presently assigned at this station - (1) BML1 as officer-in-charge and (1) EN3. The authorized complement for Boatswain's Mates at Burnt Island Lifeboat Station is (1) BMC and (1) BM1, while presently assigned are (1) BMC and (1) BM3.

3. It is requested that this office be advised as to provisions made for replacement of WATTS as officer-in-charge of Goose Rocks Light Station, as well as the reasons for requesting that the temporary duty of subject man be made permanent at Burnt Island Lifeboat Station. It is further requested that you insure that similar requests of this nature include more detailed information which will help to clarify each situation.

F. N. MARTIN
By direction

Commander, CG Group
Rockland, Maine

6 January, 1954
P16-3

From: Commander, Coast Guard Group Rockland, Maine
To: Commander, First Coast Guard District (p)

Subj: WATTS, Alan D. (209-630) BM1; reassignment of

1. You are advised that subject named man was transferred from Goose Rocks Light Station to Burnt Island Lifeboat Station for assignment to Temporary Duty.

2. It is requested that this temporary duty be made permanent.

M. O. WRIGHT

Commander, CG Group
Rockland, Maine

7 November, 1953
P17

From: WATTS, Alan B. (209-640) BML1(AN), USCG
To: Commandant (PE)
Via: (1) Commander, Coast Guard Group Rockland, Maine
(2) Commander, First Coast Guard District (p)

Subj: Examination for Chief Boatswain's Mate; request for

Ref: (a) Personnel Circular 23-53

1. In accordance with reference (a), it is requested that I be allowed to participate in the forthcoming examination for Boatswain's Mate Chief, to be held during the first week of April, 1954.

2. If it is the desire of Headquarters, I shall change my rate from BML1(AN) to BM1(AN).

Alan B. Watts

- -

7 November, 1953

FIRST ENDORSEMENT on WATTS ltr dtd 7 November, 1953, file P17

From: Commander, Coast Guard Group Rockland, Maine
To: Commandant (PE)
Via: (1) Commander, First Coast Guard District (p)

1. It is strongly recommended that WATTS be allowed to take subject examination.

2. WATTS is a petty officer of outstanding ability and fully capable of performing the duties of his specialty ashore or afloat.

3. Particular attention to duty and outstanding performance of same is a trait of WATTS.

M. O. WRIGHT

UNITED STATES COAST GUARD

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

RECEIVED
PERSONNEL DIV.

OCT 29 1 54 PM 1953

PE-1
27 October 1953
MM

From: Commandant
To: Commander, CG GROUP, Rockland, Maine
Via: Commander, First CG District (p)

CGGD
BOSTON 9, MASS.

Subj: WATTS, Alan B. (209-630) BML1 (AN); forthcoming examination for chief boatswain's mate

1. In view of the recommendation submitted and in view of subject man's qualifications, he will be permitted to take the forthcoming examination for chief boatswain's mate which will be held during the month of April 1954. However, WATTS should be advised that if he successfully passes the examination and becomes eligible for advancement to BMC, it will be necessary to change rating to BM1. At that time he will be required to submit a statement that he is aware that the BML rating will not be reassigned at any future date and that he desires assignment to a general duty billet.

K. O. A. ZITTEL
By direction

---

p
30 October 1953
MM/P17-2

FIRST ENDORSEMENT on H/L PE-1/MM of 27 October 1953

From: Commander, First Coast Guard District
To: Commander, CG Group, Rockland, Maine

1. Forwarded for information of subject named man.

E. B. HALL
By direction

UNITED STATES COAST GUARD

ADDRESS REPLY TO:
Comdr., 1st CG District
1400 Custom House
Boston 9, Mass.

p
20 October 1953
MM/P17-2

From: Commander, First Coast Guard District
To: Commander, CG Group, Rockland, Maine

Subj: WATTS, Alan B. (209-630) BML1 (AN); lateral change in rating; request for; information concerning

Ref: (a) WATTS'/L dated 13 October 1953, file P17-2 with enclosure

1. Reference (a) is returned without action.

2. Advise WATTS that he should submit to the Commandant (PE), a request that he be permitted to participate in the forthcoming CPO examination, in his specialty, and also add that if Headquarters so desires that he change his rate from BML1 (AN) to BM1 (AN), he will comply.

E. B. HALL
By direction

Encl: (1) Reference (a)

UNITED STATES COAST GUARD

Comdr., 1st CG District
1400 Custom House
Boston 9, Mass.

RECEIVED
PERSONNEL DIVISION
OCT 16 1 49 PM 1953

p
20 October 1953
MM/P17-2

From: Commander, First Coast Guard District
To: Commander, CG Group, Rockland, Maine

Subj: WATTS, Alan B. (209-630) BML1 (AN); lateral change in rating; request for; information concerning

Ref: (a) WATTS' L/L dated 13 October 1953, file P17-2 with enclosure

1. Reference (a) is returned without action.

2. Advise WATTS that he should submit to the Commandant (PE), a request that he be permitted to participate in the forthcoming CPO examination, in his specialty, and also add that if Headquarters so desires that he change his rate from BML1 (AN) to BM1 (AN), he will comply.

E. B. HALL
By direction

Encl: (1) Reference (a)

UNITED STATES COAST GUARD

ADDRESS REPLY TO:
Commander, Group Rockland
Rockland, Maine

RECEIVED
PERSONNEL DIVISION
OCT 16 1 48 PM 1953

13 October, 1953
FILE: P17-2

From: WATTS, Alan B. (209-630) BM1l (AN), USCG
To: COMMANDANT (PE)
Via: (1) Commander, First Coast Guard District (p)
(2) Commander, Coast Guard Group Rockland, Maine

CCGD
BOSTON 9, MASS.

Subj: Lateral change in rating; request for

Ref: (a) Article 5-C-57, Personnel Manual

1. In accordance with reference (a), it is respectfully requested that my rating of Boatswain's Mate L 1st Class (AN), be changed to Boatswain's Mate 1st Class (AN). I desire this change so that I may take the examination, scheduled for the first week in April, for advancement to Boatswain's Mate Chief (AN).

2. I have been First Class since 27 January, 1943 and feel that this change would enable me to better serve the Coast Guard and would also prove beneficial to myself by way of advancement. My average marks for the past year are PIR - 3.8; ALOM - 3.72; Conduct - 4.0.

Alan B. Watts
Alan B. Watts

- -

FIRST ENDORSEMENT on WATTS' ltr dtd 13 October, 1953, file P17-2

From: Commander, CG Group Rockland, Maine 15 October, 1953
To: COMMANDANT (PE)
Via: (1) Commander, First CG District (p)

Subj: Lateral change in rating; request for

Ref: (a) Article 5-C-57, Personnel Manual

1. It is strongly recommended that WATTS' request be granted.

2. WATTS' is a petty officer of outstanding ability and fully capable of performing the duties of his specialty ashore or afloat.

3. Particular attention to duty and outstanding performance of same is a trait of WATTS.

M. O. WRIGHT

Encl: (1) Report of Examination of Enlisted Personnel
Form CG-2779 in case of WATTS

Commander, Group Rockland
Rockland, Maine

13 October, 1953
P17-2

From: WATTS, Alan B. (209-630) BML1 (AN), USCG
To: COMMANDANT (PE)
Via: (1) Commander, First Coast Guard District (p)
(2) Commander, Coast Guard Group Rockland, Maine

Subj: Lateral change in rating; request for

Ref: (a) Article 5-C-57, Personnel Manual

1. In accordance with reference (a), it is respectfully requested that my rating of Boatswain's Mate L 1st Class (AN), be changed to Boatswain's Mate 1st Class (AN). I desire this change so that I may take the examination, scheduled for the first week in April, for advancement to Boatswain's Mate Chief (AN).

2. I have been First Class since 27 January, 1943 and feel that this change would enable me to better serve the Coast Guard and would also prove beneficial to myself by way of advancement. My average marks for the past year are PIR - 3.8; ALOM - 3.72; Conduct - 4.0.

Alan B. Watts

FIRST ENDORSEMENT on WATTS' ltr dtd 13 October, 1953, file P17-2

From: Commander, CG Group Rockland, Maine
To: COMMANDANT (PE)
Via: (1) Commander, First CG District (p)

15 October, 1953

Subj: Lateral change in rating; request for

Ref: (a) Article 5-C-57, Personnel Manual

1. It is strongly recommended that WATTS' request be granted.

2. WATTS' is a petty officer of outstanding ability and fully capable of performing the duties of his specialty ashore or afloat.

3. Particular attention to duty and outstanding performance of same is a trait of WATTS.

M. O. WRIGHT

Encl: (1) Report of Examination of Enlisted Personnel
Form CG-2779 in case of WATTS

Commander, Group Rockland
Rockland, Maine

13 October, 1953
P17-2

From: WATTS, Alan B. (209-630) BML1 (AN), USCG
To: COMMANDANT (PE)
Via: (1) Commander, First Coast Guard District (p)
(2) Commander, Coast Guard Group Rockland, Maine

Subj: Lateral change in rating; request for

Ref: (a) Article 5-C-57, Personnel Manual

1. In accordance with reference (a), it is respectfully requested that my rating of Boatswain's Mate L 1st Class (AN), be changed to Boatswain's Mate 1st Class (AN). I desire this change so that I may take the examination, scheduled for the first week in April, for advancement to Boatswain's Mate Chief (AN).

2. I have been First Class since 27 January, 1943 and feel that this change would enable me to better serve the Coast Guard and would also prove beneficial to myself by way of advancement. My average marks for the past year are PIR - 3.8; ALCM - 3.72; Conduct - 4.0.

Alan B. Watts

FIRST ENDORSEMENT on WATTS' ltr dtd 13 October, 1953, file P17-2

From: Commander, CG Group Rockland, Maine 15 October, 1953
To: COMMANDANT (PE)
Via: (1) Commander, First CG District (p)

Subj: Lateral change in rating; request for

Ref: (a) Article 5-C-57, Personnel Manual

1. It is strongly recommended that WATTS' request be granted.

2. WATTS' is a petty officer of outstanding ability and fully capable of performing the duties of his specialty ashore or afloat.

3. Particular attention to duty and outstanding performance of same is a trait of WATTS.

M. O. WRIGHT

Encl: (1) Report of Examination of Enlisted Personnel
Form CG-2779 in case of WATTS

REPORT OF EXAMINATION OF ENLISTED PERSONNEL

Commander, Group Rockland
Rockland, Maine

13 October, 1953
P17-2

From: WATTS, Alan B. (209-630) BM1l (AN), USCG
To: COMMANDANT (PE)
Via: (1) Commander, First Coast Guard District (p)
(2) Commander, Coast Guard Group Rockland, Maine

Subj: Lateral change in rating; request for

Ref: (a) Article 5-C-57, Personnel Manual

1. In accordance with reference (a), it is respectfully requested that my rating of Boatswain's Mate L 1st Class (AN), be changed to Boatswain's Mate 1st Class (AN). I desire this change so that I may take the examination, scheduled for the first week in April, for advancement to Boatswain's Mate Chief (AN).

2. I have been First Class since 27 January, 1943 and feel that this change would enable me to better serve the Coast Guard and would also prove beneficial to myself by way of advancement. My average marks for the past year are PIR - 3.8; ALOM - 3.72; Conduct - 4.0.

Alan B. Watts

FIRST ENDORSEMENT on WATTS' ltr dtd 13 October, 1953, file P17-2

From: Commander, CG Group Rockland, Maine 15 October, 1953
To: COMMANDANT (PE)
Via: (1) Commander, First CG District (p)

Subj: Lateral change in rating; request for

Ref: (a) Article 5-C-57, Personnel Manual

1. It is strongly recommended that WATTS' request be granted.

2. WATTS' is a petty officer of outstanding ability and fully capable of performing the duties of his specialty ashore or afloat.

3. Particular attention to duty and outstanding performance of same is a trait of WATTS.

M. O. WRIGHT

Encl: (1) Report of Examination of Enlisted Personnel
Form CG-2779 in case of WATTS

REPORT OF EXAMINATION OF ENLISTED PERSONNEL

Commander, Group Rockland
Rockland, Maine

13 October, 1953
P17-2

From: WATTS, Alan B. (209-630) BML1 (AN), USCG
To: COMMANDANT (PE)
Via: (1) Commander, First Coast Guard District (p)
(2) Commander, Coast Guard Group Rockland, Maine

Subj: Lateral change in rating; request for

Ref: (a) Article 5-C-57, Personnel Manual

1. In accordance with reference (a), it is respectfully requested that my rating of Boatswain's Mate L 1st Class (AN), be changed to Boatswain's Mate 1st Class (AN). I desire this change so that I may take the examination, scheduled for the first week in April, for advancement to Boatswain's Mate Chief (AN).

2. I have been First Class since 27 January, 1943 and feel that this change would enable me to better serve the Coast Guard and would also prove beneficial to myself by way of advancement. My average marks for the past year are PIR - 3.8; ALOM - 3.72; Conduct - 4.0.

Alan B. Watts

FIRST ENDORSEMENT on WATTS' ltr dtd 13 October, 1953, file P17-2

From: Commander, CG Group Rockland, Maine
To: COMMANDANT (PE)
Via: (1) Commander, First CG District (p)

15 October, 1953

Subj: Lateral change in rating; request for

Ref: (a) Article 5-C-57, Personnel Manual

1. It is strongly recommended that WATTS' request be granted.

2. WATTS' is a petty officer of outstanding ability and fully capable of performing the duties of his specialty ashore or afloat.

3. Particular attention to duty and outstanding performance of same is a trait of WATTS.

M. O. WRIGHT

Encl: (1) Report of Examination of Enlisted Personnel
Form CG-2779 in case of WATTS

DEPARTMENT
S COAST GUARD
-50)

REPORT OF EXAMINATION OF ENLISTED PERSONNEL

	LOCATION	DATE
SE ROCKS L/S	North Haven, Maine	10/22/53
NAME, FIRST NAME, INITIAL	SERVICE NO.	PRESENT RATING
ATTS, Alan B.	209-630	BML1

RESULTS OF EXAMINATION

ARTICLE 6-~~A~~-2, ~~B~~ PERSONNEL MANUAL

SUBARTICLE NO.	MARK
b.(1)	3.8
b.(2)	3.8
b.(3)	3.8
b.(4)	3.8
b.(5)	3.8
b.(6)	3.8
b.(7)	3.8
b.(8)	3.7
b.(9)	3.7
b.(10)	3.7
b.(11)	3.6
AVERAGE	3.75

ARTICLE 6-~~A~~-5-b, PERSONNEL MANUAL

SUBARTICLE NO.	MARK
b.(1)	3.7
b.(2)	3.8
b.(3)	3.8
b.(4)	3.8
b.(5)	3.7
b.(6)	3.7
b.(7)	3.6
b.(8)	3.8
b.(9)	3.8
b.(10)	3.8
b.(11)	3.7
b.(12)	3.7
b.(13)	3.8
b.(14)	3.8
b.(15)	3.8
~~b.(16)~~	
~~b.(17)~~	
~~b.(18)~~	
~~b.(19)~~	
~~b.(20)~~	
~~b.(21)~~	
~~b.(22)~~	
~~b.(23)~~	
~~b.(24)~~	
~~b.(25)~~	
~~b.(26)~~	
~~b.(27)~~	
AVERAGE	3.78

AVERAGE MARK (Practical Factors—Examination) 3.75; 3.78; 3.75; 3.75

WE THE UNDERSIGNED, HEREBY CERTIFY THAT THE ABOVE-NAMED PERSON WAS THIS DATE EXAMINED FOR ADVANCEMENT OR CHANGE TO THE RATING OF Boatswains Mate 1st Class AND (WAS ~~WAS NOT~~) FOUND QUALIFIED AS INDICATED ABOVE

Alton F. Brown, BMLC
(Signature and rank of member)

M. D. WRIGHT, CHBOSN, USCG
(Signature and rank of member)

TOTAL ACTIVE SERVICE 187 MONTHS
SERVICE SINCE LAST ADVANCEMENT OR REDUCTION IN RATING 95 MONTHS
SEA SERVICE (FOR PO1 AND CPO) MONTHS
INSTITUTE, RESIDENT COURSES, ETC., COMPLETED (IF WAIVED, STATE REASON)

MARKS DURING REQUIRED PERIOD (PREVIOUS 12 MONTHS)

	PROF. IN RATING	CONDUCT	ALM
MINIMUM	3.7	4.0	3.6
AVERAGE	3.74	4.0	3.72

(APPROVED) (~~NOT APPROVED~~) ADVANCEMENT OR CHANGE (IS) (~~IS NOT~~) AUTHORIZED, OR Not required and is believed to be of benefit to both the Service and to WATTS.

TO: Commander, First Coast Guard District (p)
FORWARDED APPROVED, RECOMMENDING AUTHORIZATION

M. D. WRIGHT, CHBOSN, USCG
(Signature of commanding officer)

IND-1

Date

From:
To:
1. (Approved) (not approved) advancement or change (is) (is not) authorized, or—
2. Forwarded approved, recommending authorization

(Signature and title)

IND-2

Date

From:
To:
Returned (authorized) (not authorized in view of _____) Advancement effective _____

(Signature and title)

16—40400-3

RECORD OF COMPLETION OF PRACTICAL FACTORS

MILITARY SUBJECTS			PROFESSIONAL SUBJECTS		
ARTICLE 6-A-2-PERSONNEL MANUAL			ARTICLE 6-A-5-a, PERSONNEL MAN.		
SUBARTICLE NO.	MARK	SIGNATURE OF OFFICER ASSIGNING MARK	SUBARTICLE NO.	MARK	SIGNATURE OF OFFICER ASSIGNING MARK
a.(1)	3.8	M. C. WRIGHT, GMGC	a.(1)	3.8	Alton F. Brown, BMLC
a.(2)	3.8	" "	a.(2)	3.8	" "
a.(3)	3.8	" "	a.(3)	3.8	" "
a.(4)	3.6	" "	a.(4)	3.6	" "
a.(5)	3.7	" "	a.(5)	3.7	" "
a.(6)	3.6	" "	a.(6)	3.7	" "
a.(7)	3.7	" "	a.(7)	3.6	" "
a.(8)	3.6	" "	a.(8)	3.8	" "
~~a.(9)~~			a.(9)	3.7	" "
~~a.(10)~~			a.(10)	3.8	" "
a.(11)	3.8	" "	a.(11)	3.6	" "
~~a.(12)~~			a.(12)	3.8	" "
a.(13)	3.8	" "	~~a.(13)~~		
a.(14)	3.8	" "	~~a.(14)~~		
a.(15)	3.8	" "	a.(15)	3.7	" "
a.(16)	3.8	" "	a.(16)	3.8	" "
			a.(17)	3.8	" "
			a.(18)	3.8	" "
			~~a.(19)~~		
			~~a.(20)~~		
			~~a.(21)~~		
			~~a.(22)~~		
			~~a.(23)~~		
			~~a.(24)~~		

U. S. GOVERNMENT PRINTING OFFICE 16—40409-3

ARTMENT
AST GUARD

REPORT OF EXAMINATION OF ENLISTED PERSONNEL

	LOCATION	DATE
ROCKS L/S	North Haven, Maine	10/22/53
E, FIRST NAME, INITIAL	SERVICE NO.	PRESENT RATING
TS, Alan B.	209-630	BM1

RESULTS OF EXAMINATION

ARTICLE 6-A-2, PERSONNEL MANUAL

SUBARTICLE NO.	MARK
b.(1)	3.8
b.(2)	3.8
b.(3)	3.8
b.(4)	3.8
b.(5)	3.8
b.(6)	3.8
b.(7)	3.8
b.(8)	3.7
b.(9)	3.7
b.(10)	3.7
b.(11)	3.6
AVERAGE	3.75

ARTICLE 6-B- 5-b, PERSONNEL MANUAL

SUBARTICLE NO.	MARK	SUBARTICLE NO.	MARK
b.(1)	3.7	b.(15)	3.8
b.(2)	3.8	~~b.(16)~~	
b.(3)	3.8	~~b.(17)~~	
b.(4)	3.8	~~b.(18)~~	
b.(5)	3.7	~~b.(19)~~	
b.(6)	3.7	~~b.(20)~~	
b.(7)	3.6	~~b.(21)~~	
b.(8)	3.8	~~b.(22)~~	
b.(9)	3.8	~~b.(23)~~	
b.(10)	3.8	~~b.(24)~~	
b.(11)	3.7	~~b.(25)~~	
b.(12)	3.7	~~b.(26)~~	
b.(13)	3.8	~~b.(27)~~	
b.(14)	3.8		
		AVERAGE	3.78

AVERAGE MARK (Practical Factors—Examination) 3.75; 3.78; 3.75; 3.75

WE THE UNDERSIGNED, HEREBY CERTIFY THAT THE ABOVE-NAMED PERSON WAS THIS DATE EXAMINED FOR ADVANCEMENT OR CHANGE TO THE RATING OF Boatswains Mate 1st Class AND {WAS / ~~WAS NOT~~} FOUND QUALIFIED AS INDICATED ABOVE

Alton F. Brown, BMLC
(Signature and rank of member)

M. O. WRIGHT, CHBOSN, USCG
(Signature and rank of member)

TOTAL ACTIVE SERVICE 187 MONTHS
SERVICE SINCE LAST ADVANCEMENT OR REDUCTION IN RATING 95 MONTHS
SEA SERVICE (FOR PO1 AND CPO) MONTHS
INSTITUTE, RESIDENT COURSES, ETC., COMPLETED (IF WAIVED, STATE REASON) Not required

MARKS DURING REQUIRED PERIOD (PREVIOUS 12 MONTHS)

	PROF. IN RATING	CONDUCT	ALM
MINIMUM	3.7	4.0	3.6
AVERAGE	3.74	4.0	3.72

(APPROVED) (~~NOT APPROVED~~) ADVANCEMENT OR CHANGE (IS) (~~IS NOT~~) AUTHORIZED, OR—and is believed to be of benefit to both the Service and to WATTS.

TO: Commander, First Coast Guard District (p)
FORWARDED APPROVED, RECOMMENDING AUTHORIZATION

M. O. WRIGHT, CHBOSN, USCG
(Signature of commanding officer)

IND-1

Date

From:
To:
1. (Approved) (not approved) advancement or change (is) (is not) authorized, or—
2. Forwarded approved, recommending authorization

(Signature and title)

IND-2

Date

From:
To:
Returned (authorized) (not authorized in view of) Advancement effective

(Signature and title)

16—40400-3

Commander, Group Rockland
Rockland, Maine

13 October, 1953
P17-2

From: WATTS, Alan B. (209-630) BM1l (AN), USCG
To: COMMANDANT (PE)
Via: (1) Commander, First Coast Guard District (p)
(2) Commander, Coast Guard Group, Rockland, Maine

Subj: Examination for Chief Boatswain's Mate; request for

Ref: (a) Personnel Circular 23-53

1. In accordance with reference (a), it is requested that I be allowed to participate in the forthcoming examinations for Boatswain's Mate Chief, to be held during the first week of April, 1954.

Alan B. Watts

- -

FIRST ENDORSEMENT on WATTS' ltr dtd 13 October, 1953, file P17-2

From: Commander, Coast Guard Group Rockland, Maine 15 October, 1953
To: Commandant (PE)
Via: (1) Commander, First Coast Guard District (p)

1. WATTS has applied for a lateral change in rate from BM1l (AN) to BM1(AN).

2. If and when such a change is made in WATTS' rate, it is strongly recommended that he be allowed to take the examination for Boatswain's Mate Chief in accordance with Personnel Circular 23-53.

3. WATTS is an outstanding petty officer in all respects.

M. O. WRIGHT

Commander, Group Rockland
Rockland, Maine

13 October, 1953
P17-2

From: WATTS, Alan B. (209-630) BM1l (AN), USCG
To: COMMANDANT (PE)
Via: (1) Commander, First Coast Guard District (p)
(2) Commander, Coast Guard Group Rockland, Maine

Subj: Lateral change in rating; request for

Ref: (a) Article 5-C-57, Personnel Manual

1. In accordance with reference (a), it is respectfully requested that my rating of Boatswain's Mate I 1st Class (AN), be changed to Boatswain's Mate 1st Class (AN). I desire this change so that I may take the examination, scheduled for the first week in April, for advancement to Boatswain's Mate Chief (AN).

2. I have been First Class since 27 January, 1943 and feel that this change would enable me to better serve the Coast Guard and would also prove beneficial to myself by way of advancement. My average marks for the past year are PIR - 3.8; AIOM - 3.72; Conduct - 4.0.

Alan B. Watts

FIRST ENDORSEMENT on WATTS' ltr dtd 13 October, 1953, file P17-2

From: Commander, CG Group Rockland, Maine 15 October, 1953
To: COMMANDANT (PE)
Via: (1) Commander, First CG District (p)

Subj: Lateral change in rating; request for

Ref: (a) Article 5-C-57, Personnel Manual

1. It is strongly recommended that WATTS' request be granted.

2. WATTS' is a petty officer of outstanding ability and fully capable of performing the duties of his specialty ashore or afloat.

3. Particular attention to duty and outstanding performance of same is a trait of WATTS.

M. O. WRIGHT

Encl: (1) Report of Examination of Enlisted Personnel
Form CG-2779 in case of WATTS

TREASURY DEPARTMENT
UNITED STATES COAST GUARD
CG-2779 (REV. 11-50)

REPORT OF EXAMINATION OF ENLISTED PERSONNEL

UNIT	LOCATION	DATE
GOOSE ROCKS L/S	North Haven, Maine	10/22/53

SURNAME, FIRST NAME, INITIAL	SERVICE NO.	PRESENT RATING
WATTS, Alan B.	209-630	BML1

RESULTS OF EXAMINATION

ARTICLE 6-~~A~~-2, PERSONNEL MANUAL		ARTICLE 6-~~B~~- 5-b, PERSONNEL MANUAL			
SUBARTICLE NO.	MARK	SUBARTICLE NO.	MARK	SUBARTICLE NO.	MARK
b.(1)	3.8	b.(1)	3.7	b.(15)	3.8
b.(2)	3.8	b.(2)	3.8	~~b.(16)~~	
b.(3)	3.8	b.(3)	3.8	~~b.(17)~~	
b.(4)	3.8	b.(4)	3.8	~~b.(18)~~	
b.(5)	3.8	b.(5)	3.7	~~b.(19)~~	
b.(6)	3.8	b.(6)	3.7	~~b.(20)~~	
b.(7)	3.8	b.(7)	3.6	~~b.(21)~~	
b.(8)	3.7	b.(8)	3.8	~~b.(22)~~	
b.(9)	3.7	b.(9)	3.8	~~b.(23)~~	
b.(10)	3.7	b.(10)	3.8	~~b.(24)~~	
b.(11)	3.6	b.(11)	3.7	~~b.(25)~~	
		b.(12)	3.7	~~b.(26)~~	
		b.(13)	3.8	~~b.(27)~~	
		b.(14)	3.8		
AVERAGE	3.75			AVERAGE	3.78

AVERAGE MARK (Practical Factors—Examination) 3.75; 3.78; 3.75; 3.75

WE THE UNDERSIGNED, HEREBY CERTIFY THAT THE ABOVE-NAMED PERSON WAS THIS DATE EXAMINED FOR ADVANCEMENT OR CHANGE TO THE RATING OF Boatswains Mate 1st Class AND (WAS / ~~WAS NOT~~) FOUND QUALIFIED AS INDICATED ABOVE

Alton T. Brown, BMLC
(Signature and rank of member)

M. C. WRIGHT, CHBOSN, USCG
(Signature and rank of member)

TOTAL ACTIVE SERVICE 187 MONTHS
SERVICE SINCE LAST ADVANCEMENT OR REDUCTION IN RATING 95 MONTHS
SEA SERVICE (FOR PO1 AND CPO) MONTHS
INSTITUTE, RESIDENT COURSES, ETC., COMPLETED (IF WAIVED, STATE REASON) Not required

MARKS DURING REQUIRED PERIOD (PREVIOUS 12 MONTHS)

	PROF. IN RATING	CONDUCT	ALM
MINIMUM	3.7	4.0	3.6
AVERAGE	3.74	4.0	3.72

(APPROVED) (~~NOT APPROVED~~) ADVANCEMENT OR CHANGE (IS) (~~IS NOT~~) AUTHORIZED, OR—and is believed to be of benefit to both the Service and to WATTS.

TO: Commander, First Coast Guard District (p)
FORWARDED APPROVED, RECOMMENDING AUTHORIZATION

M. C. WRIGHT, CHBOSN, USCG
(Signature of commanding officer)

IND-1

Date

From:
To:
1. (Approved) (not approved) advancement or change (is) (is not) authorized, or—
2. Forwarded approved, recommending authorization

(Signature and title)

IND-2

Date

From:
To:
Returned (authorized) (not authorized in view of _____) Advancement effective _____

(Signature and title)

16—40409-3

CG-2511 (Revised)
Form approved by Comptroller General, U. S.
February 25, 1938

Boards

ADDRESS THE COMMANDANT, U. S. COAST GUARD
AND REFER TO NO. (PE-~~PRA~~ 3)
CG-73

STATEMENT OF CREDITABLE SERVICE

UNITED STATES COAST GUARD HEADQUARTERS

WASHINGTON 16 August, 1950

Mail to: CG Group, Gloucester

BOSTON DISTRICT RECEIVED AUG 17 1950 U.S. COAST GUARD

PERSONNEL DIVISION RECEIVED AUG 17 1950

1st C. G. DISTRICT 9

From: Commandant.

To: Commanding Officer, CG Group, Portsmouth, N. H.
VIA: Commander, 1st CG District (pmp)
SUBJECT: WATTS, Alan Brennen (209-630) BM1(L)(AN), USCG.

Statement of service of.

REF: Ltr dtd 2-28-50 fm CO., Southwest Harbor, Me.

1. The following is a statement of the service of the above-named man for the purpose of computing pay:

Entered Service	Service Terminated	Absent Without Leave (Inclusive dates)		Sickness Due to Own Misconduct (Inclusive dates)		Nonperformance of Duty Because of (Inclusive dates)	
		FROM—	TO—	FROM—	TO—	FROM—	TO—
U.S.C.G.							
2-15-38	5-4-44 HD	NONE		NONE		NONE	
5-5-44	5-4-48 HD	NONE		NONE		NONE	
5-5-48							
Now serving							

B. A. Shaw
B. A. SHAW
By direction

U. S. GOVERNMENT PRINTING OFFICE 16—32658-3

Commander, Group Rockland
Rockland, Maine

7 August, 1953
L16-4

From: Commander, Group Rockland, Maine
To: Commander, 1st CG District (f)

Subj: WATTS, Alan B. (209-630) BML1(AN) pay account check; request for

1. It is respectfully requested that a check of WATTS' pay account be made, in view of the fact that subject man claims that his check was less than the usual amount.

2. Upon examination of the Military Pay Order (DD 114) File it was found that Order No. 10-54-85, a copy of which is enclosed, was sent, crediting LV RATS for 5 days leave from 6-22-53 to 6-28-53 (not inclusive dates). It was also discovered that WATTS' was SUBS @ 2.57 was not terminated for the period of time on leave. It is evident that the SUBS was terminated and, as yet has not been credited. A new Military Pay Order (No. 49-54-85) is enclosed, terminating SUBS @ 2.57 from 22 June to 28 June, 1953, and Crediting SUBS from 28 June, 1953.

M. O. WRIGHT, CHBOSN

Encl: (1) Military Pay Order No. 10-54-85 (Copy)
(2) Military Pay Order No. 49-54-85

UNITED STATES COAST GUARD

Address reply to:
Comdr., 1st CG Dist.
1400 Custom House
Boston 9, Mass.

p27 January 1953
P15

From: WATTS, Allen B.
To: Commander, Rockland Group
Via:

Subj: Good Conduct Award

1. It is a pleasure to award you the inclosed Good Conduct Bars for your three year period of meritorious enlisted service in the United States Coast Guard ending 2-14-44, 2-14-47, 2-14-50 while attached to the CG 38668, Group Rockland & Moose Peak LBS.

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

3. It is requested that reciept for the subject Good Conduct Award be acknowledged by indoresemtn hereon.

E. H. LEAVITT

By direction

CC: Service Record
File Jacket
HQ's

Incl: (3) Good Conduct Bars

FIRST ENDORSEMENT to COMONECGD/L dtd 27 January 1953, file P15

29 January 1953

From: WATTS, Allen B.
To: Commander, FIRST Coast Guard District (p)

Receipt of the above awards is hereby acknowledged.

Allen B. Watts, BM1L, USCG

Cdr. CG Group
Rockland, Maine

2 October 1952
File: CGl/P16-4/OW

From: WATTS, Alan B. (209-630)BML1(AN)
To: Commander, CG Group, Gloucester, Mass.

Subj: Transfer of command; report of; submission of

Ref: (a) CG Regs. Art. 7-1-25 (c)
(b) Cdr. CG Grp. Gloucester/ltr dtd 19 Sept. 1952, MM/P16-3

1. According to instructions contained in reference (a) I was relieved as Officer-in-Charge of Boone Island Light Station by GORDON, Kenny B. BM1(P), on 26 September 1952.

ALAN B. WATTS

CC: O-in-C Boon Island L/S
Service Record of WATTS
GRUCOM, Rockland, Me.

GLOUCESTER, MASSACHUSETTS

Commander
CG Group Gloucester

19 September, 1952
RR/P16-3

AUTHORIZATION No. 01-0587

From: Commander, CG Group Gloucester
To: [illegible]
Via: Officer in Charge, [illegible]

Subj: Orders; transfer; travel

Ref: CGGD1/1 dated 29 July, 1952, File P16-3/MA

1. In accordance with instructions contained in reference (a), you are directed to proceed to Rockland, Maine, and report to the Group Commander, Rockland Group prior to 2400, 1 October, 1952 for assignment to duty as Officer in Charge, Goose Rocks Light Station, North Haven, Maine.

2. This order constitutes a permanent change of station from [illegible], New Castle, N.H., to Goose Rocks Light Station, North Haven, Maine.

3. Travel necessary for the execution of this order is required by the Public Interests and is authorized, Chargeable against District Travel Allotment symbol 01-20. Allowances as prescribed by Joint Travel Regulations are applicable.

4. Travel may be performed via privately owned conveyance, railroad, bus, water and/or air.

5. You are authorized four (4) days proceed time and one day travel time.

6. You will carry your health record with you for safe delivery at destination. Your service record will be forwarded from this unit by mail.

7. The responsible unit for accounting purposes upon your detachment from [illegible] will be the Group Commander, Rockland Group.

Copy to:
CGGD1(p)
CGGD1(f)
CGGD1(o)
CGC Rockland

D.M. CLIFT

GLOUCESTER, MASSACHUSETTS

Commander
CG Group Gloucester

4 September, 1952
P1

From: Commander, CG Group Gloucester
To: Commander, First Coast Guard District(dli)

Subj: Identification card; expiration of

1. Your office is advised that the below listed enlisted man's identification card expired on the 4 March, 1952. It is requested that a new identification card be furnished.

WATTS, Alan B. (209-630)BML1(AN) - BOON ISLAND LIGHT STATION

2. Information concerning is as follows: reenlisted for six (6) years on 13 May, 1952; weight and height same; hair, eyes; blood type same.

Incl:
ID Card, Subject Man
ID Negatives

D.W. CLUFF

UNITED STATES COAST GUARD

ADDRESS REPLY TO:
Commander, 1st CG District
1400 Custom House
Boston 9, Massachusetts

p
29 July 1952
FILE: P16-3/MM

ORDER NO. 01-0587

From: Commander, First Coast Guard District
To: Commander, CG Group Gloucester

Subj: WATTS, Alan B. (209-630) BML1(AN), USCG; orders, transfer, travel

1. Effective upon arrival of relief, transfer subject man, presently attached to the Boon Island Light Station, to report to the Commander, Group Rockland, Maine, for assignment to duty as Officer in Charge, Goose Rocks Light Station, North Haven, Maine.

2. Travel necessary to the execution of this order is chargeable against District travel allotment symbol 01-20.

3. This order constitutes a permanent change of station for WATTS, from New Castle, New Hampshire, to North Haven, Maine.

4. Proceed time is authorized.

H. T. DIEHL
By direction

Copy to:
COMONECGD(o)
GRUCOM Rockland, Me.

Boon Island Light Station
New Castle N.H.

18 June, 1952
P13-4/A2/A17

From: Officer-in-Charge, Boon Island Light Station
To: Commander, 1st Coast Guard District

Subj: Non judicial punishment; familiarity and reading of regulations concerning.

Ref: (a) CGCD1/L, dated 4 June, 1952, P13-4/A2/A17

1. You are advised that the instructions contained in your letter dated 4 June, 1952 has been complied with.

2. I have read the below listed articles of the uniform code of military justice on the date indicated.

3. Articles, 2,3,7, through 15,25,27,31,37,38,55,77, through 134, and 137, through 139.

6/18/52
Date

Alan B. Watts
Alan B. Watts, BM1(L)(AN)
Signature

Alan B. Watts
Alan B. Watts, BM1(L)(AN)
OinC

Boon Island Light Station
New Castle N.H.

16 June, 1952
P13-4/A2/A17

From: Officer-in-Charge, Boon Island Light Station
To: Commander, 1st Coast Guard District

Subj: Non judicial punishment; familiarity and reading of regulations concerning.

Ref: (a) CCGD1/L, dated 4 June, 1952, P13-4/A2/A17

1. You are advised that the instructions contained in your letter dated 4 June, 1952 has been complied with.

2. I have read the below listed articles of the uniform code of military justice on the date indicated.

3. Articles, 2,3,7, through 15,25,27,31,37,38,55,77, through 134, and 137, through 139.

6/18/52
Date

Alan B. Watts
Alan B. Watts, BM1(L)(AN)
Signature

Alan B. Watts
Alan B. Watts, BM1(L)(AN)
OinC

PROVISIONS AS TO MEMBERSHIP IN OR ASSOCIATION WITH CERTAIN ORGANIZATIONS

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

Given under my hand this 13 day of MAY 19 52

Signature of Witnessing Officer: S. Pisciotto

S. PISCIOTTO LT, USCG
By direction

Signature of Person Making Certification: Alan B. Watts

Alan B. Watts

U. S. GOVERNMENT PRINTING OFFICE : 1950—O-919201

LOYALTY CERTIFICATE FOR PERSONNEL OF THE ARMED FORCES

INSTRUCTIONS ON THE USE OF THIS FORM

The Department of Defense has the authority to establish and promulgate detailed procedures to implement the national policy relating to loyalty of persons entering on duty with the Armed Forces. This has been determined by appropriate authority to include restrictions as to membership in or association with certain organizations and of certain standards of conduct. If Federal Constitutional Privilege against self-crimination; i. e., the making of a statement which will expose you to criminal trial, is claimed about all or any part of any conduct, membership, or association in question you may so claim by stating in the space indicated "Federal Constitutional Privilege is Claimed" or "Federal Constitutional Privilege is Claimed as to .....," describing the specific part of any conduct, membership, or association about which claim is made.

Concealment of, misrepresentation as to, or failure to divulge in full, conduct or associations of the character set forth in the provisions, at the time of execution of these certificates in any component of the Department of Defense may constitute grounds for discharge, separation, or other disposition of personnel, and action shall be taken by the Armed Forces for causing trial before a general court martial, or the facts will be made known to appropriate civil authorities, as the law may provide in such cases. Upon indication that any person has misrepresented, concealed, or failed to divulge in full previous conduct or associations of the character set forth, the Service having responsibility thereof shall take appropriate action.

Consequently, you must read the following provisions as to membership in or association with certain organizations and as to standards of conduct very carefully and be sure you understand them. If there is anything which you do not understand in either of these sets of provisions or in the certifications to be made, ask a commissioned officer to explain them to you. When you are certain that you understand both the provisions and the certificates, complete the certificates and sign them in the presence of a witnessing officer. Penalties for making a false statement may be very severe.

PROVISIONS AS TO STANDARDS OF CONDUCT

1. Conduct which may be considered as establishing reasonable grounds for invoking appropriate penalties shall include, but is not limited to, one or more of the following:

(*a*) Sabotage, espionage, or attempts or preparations therefor, or intimate and sympathetic associations with or voluntary assistance to persons who the subject of investigation has reasonable cause to believe may be spies or saboteurs.

(*b*) Treason, sedition, or writings and acts which can reasonably be considered as intended to encourage seditious or treasonable opinions or actions.

(*c*) Advocacy of revolution or of force or violence to alter the existing constitutional form of government of the United States; advocacy of revolution or of force or violence to bring about economic, political, or social change.

(*d*) Intentional unauthorized disclosure to any person under circumstances which may indicate disloyalty to the United States, of documents or information of a classified or nonpublic character.

(*e*) Acting, attempting to act, or knowingly failing to act when such conduct is calculated to serve the interests of another government in preference to the interests of the United States of America.

I certify, as regards the standards of conduct, that:

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

2. I have read the provisions applying to the standards of conduct and I understand them.

3. If I have engaged in any such conduct, I have so indicated by describing in the statement below the nature thereof.

4. If I have not engaged in any such conduct, I have so indicated by writing "None" or "None to my knowledge" in the statement below.

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

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

Statement as to certification of conduct (*Attach additional sheets if necessary for a full, detailed statement*):

Typed Full Name of Person Making Certification	Service No. (*If any*)	Status for Which Being Considered (*e. g., Com O, WO, Enl, ROTC affiliation, etc.*)
WATTS, Alan B.	209-630	Reenlisting
Station to Which Certification Submitted	Typed Name and Grade of Witnessing Officer	
mander, 1st CG District	S. PISICCHIO LT, USCG By direction	

DD FORM 1 APR 50 98 Replaces N[illegible] Form 98, 1 Oct 48, which is obsolete.

Consolidated List of Organizations Designated by the Attorney General on October 30, 1950, Pursuant to Executive Order No. 9835

Totalitarian:

Black Dragon Society
Central Japanese Association (*Beikoku Chuo Nipponjin Kai*)
Central Japanese Association of Southern California
Dai Nippon Butoku Kai (*Military Virtue Society of Japan or Military Art Society of Japan*)
Heimuska Kai, also known as Nokubei Heieki Gimusha Kai, Zaibei Nihonjin, Heiyaku Gimusha Kai, and Zaibei Hemusha Kai (*Japanese residing in America Military Conscripts Association*)
Hinode Kai (*Imperial Japanese Reservists*)
Hinomaru Kai (*Rising Sun Flag Society—a group of Japanese war veterans*)
Hokubei Zaigo Shoke Dan (*North American Reserve Officers Association*)
Japanese Association of America
Japanese Overseas Central Society (*Kaigai Dobo Chuo Kai*)
Japanese Overseas Convention, Tokyo, Japan, 1940
Japanese Protective Association (*Recruiting Organization*)
Jikyoku Iin Kai (*Current Affairs Association*)
Kibei Seinen Kai (*Association of U. S. citizens of Japanese ancestry who have returned to America after studying in Japan*)
Nanka Teikoku Gunyudan (*Imperial Military Friends Group or Southern California War Veterans*)
Nichibei Kogyo Kaisha (*The Great Fujii Theatre*)
Northwest Japanese Association
Peace Movement of Ethiopia
Sakura Kai (*Patriotic Society, or Cherry Association—composed of veterans of Russo-Japanese War*)
Shinto Temples
Sokoku Kai (*Fatherland Society*)
Suiko Sha (*Reserve Officers Association of Los Angeles*)

Fascist:

American Nationalist Party
American National Labor Party
American National Socialist League
American National Socialist Party
American Patriots, Inc.
Ausland-Organization der NSDAP, Overseas Branch of Nazi Party
Association of German Nationals (*Reichsdeutsche Vereinigung*)
Central Organization of the German-American National Alliance (*Deutsche-Amerikanische Einheitsfront*)
Citizens Protective League
Committee for Nationalist Action
Dante Alighieri Society
Federation of Italian War Veterans in the U. S. A., Inc. (*Associazione Nazionale Conbattenti Italiani, Federazione degli Stati Uniti d'America*)
Friends of the New Germany (*Freunde des Neuen Deutschlands*)
German-American Bund (*Amerika-deutscher Volksbund*)
German-American Republican League
German-American Vocational League (*Deutsche-Amerikanische Berufsige-meinschaft*)
Kyffhaeuser, also known as Kyffhaeuser League (*Kyffhaeuser Bund*), Kyffhaeuser Fellowship (*Kyffhaeuser Kameradschaft*)
Kyffhaeuser War Relief (*Kyffhaeuser Kriegshilfswerk*)
Lictor Society (*Italian Black Shirts*)
Mario Morgantini Circle
National Blue Star Mothers of America
Nationalist Action League

Communist:

Abraham Lincoln Brigade
Abraham Lincoln School, Chicago, Ill.
Action Committee to Free Spain Now
American Association for Reconstruction in Yugoslavia, Inc.
American Branch of the Federation of Greek Maritime Unions
American Committee for European Workers' Relief
American Committee for Protection of Foreign Born
American Committee for Spanish Freedom
American Committee for Yugoslav Relief, Inc.
American Council for a Democratic Greece, formerly known as the Greek American Council; Greek American Committee for National Unity
American Council on Soviet Relations
American Croatian Congress
American Jewish Labor Council
American League Against War and Fascism
American League for Peace and Democracy
American Peace Mobilization
American Polish Labor Council
American Rescue Ship Mission (*a project of the United American Spanish Aid Committee*)
American Russian Institute, New York
American Russian Institute, Philadelphia
American Russian Institute (*of San Francisco*)
American Russian Institute of Southern California, Los Angeles
American Slav Congress
American Youth Congress
American Youth for Democracy
Armenian Progressive League of America
Boston School for Marxist Studies, Boston, Mass.
California Labor School, Inc., 216 Market Street, San Francisco, Calif.
Central Council of American Women of Croatian Descent, also known as Central Council of American Croatian Women, National Council of Croatian Women
Citizens Committee to Free Earl Browder
Citizens Committee for Harry Bridges
Civil Rights Congress and its affiliated organizations, including:
  Civil Rights Congress for Texas
  Veterans Against Discrimination of Civil Rights Congress of New York
Comite Coordinador Pro Republica Espanola
Committee for a Democratic Far Eastern Policy
Commonwealth College, Mena, Ark.
Communist Party, U. S. A., its subdivisions, subsidiaries, and affiliates, including:
  Citizens Committee of the Upper West Side (*New York City*)
  Committee to Aid the Fighting South
  Daily Worker Press Club
  Dennis Defense Committee
  Labor Research Association, Inc.
  Southern Negro Youth Congress
  United May Day Committee
  United Negro and Allied Veterans of America
  Yiddisher Kultur Farband
Communist Political Association, its subdivisions, subsidiaries, and affiliates, including:
  Florida Press and Educational League
  Peoples Educational and Press Association of Texas
  Virginia League for Peoples Education
Connecticut State Youth Conference
Congress of American Revolutionary Writers
Congress of American Women
Council on African Affairs
Council for Pan-American Democracy
Detroit Youth Assembly
Emergency Conference to Save Spanish Refugees (*founding body of the North American Spanish Aid Committee*)
Friends of the Soviet Union
George Washington Carver School, New York City
Hawaii Civil Liberties Committee
Hollywood Writers Mobilization for Defense
Hungarian-American Council for Democracy
Independent Socialist League
International Labor Defense
International Workers Order, its subdivisions, subsidiaries, and affiliates, including:
  American-Russian Fraternal Society
  Carpatho-Russian Peoples Society
  Cervantes Fraternal Society
  Croatian Benevolent Fraternity
  Finnish-American Mutual Aid Society
  Garibaldi American Fraternal Society
  Hellenic-American Brotherhood
  Hungarian Brotherhood
  Jewish Peoples Fraternal Order
  People's Radio Foundation, Inc.
  Polonia Society of the IWO
  Romanian-American Fraternal Society
  Serbian-American Fraternal Society
  Slovak Workers Society
  Ukranian-American Fraternal Union
Jefferson School of Social Science, New York City
Jewish Peoples Committee
Joint Anti-Fascist Refugee Committee
Joseph Weydemeyer School of Social Science, St. Louis, Mo.
Labor Youth League
League of American Writers
Macedonian-American People's League
Michigan Civil Rights Federation
Michigan School of Social Science
National Committee for the Defense of Political Prisoners
National Committee to Win the Peace
National Conference on American Policy in China and the Far East (*A Conference called by the Committee for a Democratic Far Eastern Policy*)
National Council of Americans of Croatian Descent
National Council of American-Soviet Friendship
National Federation for Constitutional Liberties
National Negro Congress
Nature Friends of America (*since 1935*)
Negro Labor Victory Committee
[redacted] Committee for Publications
[redacted] American Committee to Aid Spanish Democracy
[redacted] American Spanish Aid Committee
[redacted] School of Social Sciences
Oklahoma Committee to Defend Political Prisoners
Pacific Northwest Labor School, Seattle, Washington
Partido del Pueblo of Panama (*operating in the Canal Zone*)
Peoples Educational Association (*Incorporated under name Los Angeles Educational Association, Inc.*) also known as Peoples Educational Center, Peoples University, People's School
People's Institute of Applied Religion
Philadelphia School of Social Science and Art
Photo League (*New York City*)
Progressive German-Americans, also known as Progressive German-Americans of Chicago
Proletarian Party of America
Revolutionary Workers League
Samuel Adams School, Boston, Mass.
Schappes Defense Committee
Schneiderman-Darcy Defense Committee
School of Jewish Studies, New York City
Seattle Labor School, Seattle, Wash.
Serbian Vidovdan Council
Slovenian-American National Council
Socialist Workers Party, including American Committee for European Workers' Relief
Socialist Youth League
Tom Paine School of Social Science, Philadelphia, Pa.
Tom Paine School of Westchester, N. Y.
Union of American Croatians
United American Spanish Aid Committee
United Committee of South Slavic Americans
United Harlem Tenants and Consumers Organization
Veterans of the Abraham Lincoln Brigade
Walt Whitman School of Social Science, Newark, N. J.
Washington Bookshop Association
Washington Committee for Democratic Action
Washington Commonwealth Federation
Wisconsin Conference on Social Legislation
Workers Alliance
Workers Party, including Socialist Youth League
Young Communist League

Subversive:

Communist Party, U. S. A., its subdivisions, subsidiaries, and affiliates
Communist Political Association, its subdivisions, subsidiaries, and affiliates, including:
  Florida Press and Educational League
  Peoples Educational and Press Association of Texas
  Virginia League for Peoples Education
German-American Bund
Independent Socialist League
Partido del Pueblo of Panama (*operating in the Canal Zone*)
Socialist Workers Party
Workers Party
Young Communist League

Organizations which have "adopted a policy of advocating or approving the commission of acts of force and violence to deny others their rights under the Constitution of the United States":

American Christian Nationalist Party
Associated Klans of America
Association of Georgia Klans
Columbians
Knights of the White Camellia
Ku Klux Klan
Original Southern Klans, Incorporated
Protestant War Veterans of the United States, Inc.
Silver Shirt Legion of America

Organizations which "seek to alter the form of government of the United States by unconstitutional means":

Communist Party, U. S. A., its subdivisions, subsidiaries, and affiliates
Communist Political Association, its subdivisions, subsidiaries, and affiliates, including:
  Florida Press and Educational League
  Peoples Educational and Press Association of Texas
  Virginia League for Peoples Education
Independent Socialist League
Industrial Workers of the World
Nationalist Party of Puerto Rico
Partido del Pueblo of Panama (*operating in the Canal Zone*)
Socialist Workers Party
Workers Party
Young Communist League

THE FOLLOWING ADDITIONS TO AND DELETIONS FROM THE ABOVE LIST HAVE BEEN MADE BY SUBSEQUENT EXECUTIVE ORDERS AND LETTERS:

I HAVE READ THE LIST ABOVE INCLUDING ALL ADDITIONS AND DELETIONS.

SIGNATURE OF PERSON MAKING CERTIFICATE

Alan B. Watts

Alan B. Watts

SIGNATURE OF WITNESSING OFFICER

S. PISICCHIO LT, USCG

By direction

DD FORM 1 DEC 50 98a Edition of 1 Feb 50 is obsolete.

U. S. GOVERNMENT PRINTING OFFICE : 1951—O-925558

CERTIFICATE OF PHYSICAL QUALIFICATION FOR DISCHARGE

12 May, 1952
(Date)

This is to certify that I have been given a physical examination and have been found physically qualified for discharge: that I have been informed of the findings and (do or do not) _____ agree with the findings.

Objections: _____

_____

_____

_____

Alan B. Watts

Alan B. Watts

Signed: _____
(Name)

_____ _____
(Serv. No.) (Rate)

S. Pisicchio

S. PISICCHIO LT, USCG
By direction

Witnessed by
Discharge Officer: _____

N. C. G.-2511 A
Form approved by
Comptroller General, U. S.
January 31, 1941

UNITED STATES COAST GUARD

STATEMENT OF CREDITABLE SERVICE

(For Enlistment Allowance)

Office, Commander, 1st CG District, Boston, Mass.
(Unit)

WATTS, ALAN BRENNEN
(Name in full—surname to the left)

12 MAY 52
(Date)

209-630
(Service number)

BM1
(Rating on discharge)

	Year	Month	Day
Date of last enlistment (for 4 years)	48	05	05
Enlistment extended (for ..... years from)			08
Date of discharge (HONORABLE) (Character of discharge)	52	05	12
Total time of last enlistment period			

NUMBER OF—		
Years	Months	Days
4	0	8

ABSENT TIME DURING PERIOD (Inclusive dates to be shown)

Absent Without Leave			Absent Due to Own Misconduct			Absent Due to Confinement		
From—	To—	Days	From—	To—	Days	From—	To—	Days
	NONE			NONE			NONE	

Total Absence (0 days)

Creditable time served during last enlistment period	4	0	8

I CERTIFY that the above is a full, true, and correct statement of creditable service of the above-mentioned man during the period of his last enlistment.

S. PESICCHIO

Date 12 May, 19 52

(Rank) Lieutenant, U. S. C. G.
By direction
Commanding officer.

REENLISTMENT OR EXTENSION OF ENLISTMENT

Date 13 MAY, 19 52 Office, Comdr., 1st CG District, Boston, Mass.
(Unit and place)

I CERTIFY that the above-named man Reenlisted for
(Reenlisted or voluntarily extended his enlistment)

a period of Six years from this date.

S. PESICCHIO

(Rank) Lieutenant, U. S. C. G.
By direction
Commanding officer.

16—20903-1

GLOUCESTER, MASSACHUSETTS

Officer in Charge
CG Group Gloucester

12 May, 1952
MB/P16-3

AUTHORIZATION NO. 01-4584

From: Officer in Charge, CG Group Gloucester
To: WATTS, Alan B. (209-630)BM1(AN)-BOON ISLAND

Subj: Orders; transfer; temporary duty; travel

1. Upon receipt hereof you are directed proceed to Boston, Mass. and report to the Commander, First Coast Guard District that place prior to 1600, 12 May, 1952 for assignment to temporary duty in connection with discharge and reenlistment. Upon completion of this temporary duty and when so directed by proper authority you will return to your regular station and resume your regular duties.

2. Travel necessary to the execution of this order is required by the public interests and is authroized, chargeable against District Travel Allotment symbol 01-20. Allowances as prescribed by Joint Travel Regulations are applicable.

3. Travel may be performed via privately owned conveyance, railroad, bus, water and/or air.

4. No proceed time authorized.

5. Delivered and departed at_____this date.

CC: CGDD1(p)
CGDD1(f)
BOON ISLAND L/S
Service Record
File

R.C. HALE, BMC
(acting)

Ind-1
01CGD
Boston, Mass.

13 May, 1952

1. Reported to this office at 1434, 12 May, 1952.

2. Upon receipt hereof, you are directed to comply with the remainder of your basic orders.

3. Government subs and quarters were available.

4. One (1) day travel time is authorized.

5. Delivered and departed at 1615, this date. EDA. 2400, 5-14-52.

S. PISICCHIO
By direction

CC: Comdr. CG Group Gloucester

MAY 13 3 53 PM '52
COGD
BOSTON 9, MASS.

RECEIVED
PERSONNEL DIVISION

GLOUCESTER, MASSACHUSETTS

Officer in Charge
CG Group Gloucester

12 May, 1952
MS/F16-3

AUTHORIZATION NO. 01-4564

From: Officer in Charge, CG Group Gloucester
To: [redacted], Alan B. (307-630)EM1(AM)-[redacted] ISLAND

Subj: Orders; transfer; temporary duty; travel

1. Upon receipt hereof you are directed proceed to Boston, Mass., and report to the Commander, First Coast Guard District that place prior to 1600, 12 May, 1952 for assignment to temporary duty in connection with discharge and reenlistment. Upon completion of this temporary duty and when so directed by proper authority you will return to your regular station and resume your regular duties.

2. Travel necessary to the execution of this order is required by the public interests and is authorized, chargeable against District Travel Allotment symbol 01-20. Allowances as prescribed by Joint Travel Regulations are applicable.

3. Travel may be performed via privately owned conveyance, railroad, bus, water and/or air.

4. No proceed time authorized.

5. Delivered and departed at_____this date.

CC: CGHQ1(p)
CGD1(f)
[redacted] ISLAND L/S
Service Record
File

[redacted], R.C. USCG
(acting)

TREASURY DEPARTMENT
U. S. COAST GUARD
CG-2500C (Sheet 3) (8-49)

TERMINATION OF SERVICE

NAME	SERVICE NO.	RATING
WATTS, Alan B.	209-630	BM1(L)(AN
UNIT	**LOCATION**	**DATE REPORTED**
Commander, 1st CG District	Boston, Mass.	28 April, 1952
FINAL AVERAGE EFFICIENCY MARKS →	**PROFICIENCY IN RATING**	**CONDUCT**
	3.7	4.0

DEDUCTIBLE TIME WHILE ATTACHED — [XXX] NONE — [ ] ENTERED IN DEDUCTIBLE TIME ARTICLE OF RECORD

DISPOSITION OF IDENTIFICATION CREDENTIALS — [ ] SURRENDERED — [ ] NOT SURRENDERED *(Explanation below)*

STATEMENTS OF DISCHARGEE

EXPLANATION OF NON-SURRENDER OF IDENTIFICATION CREDENTIALS

Machias, Maine
PLACE TO WHICH TRAVEL ALLOWANCE IS ELECTED

DISPOSITION OF UNUSED LEAVE

- [ ] NOT ELIGIBLE FOR CASH COMPENSATION
- [XX] ELECTS TO RECEIVE CASH COMPENSATION
- [ ] ELECTS OR REQUIRED TO CARRY OVER UNUSED LEAVE TO NEW ENLISTMENT

RECEIPT OF THE FOLLOWING IS ACKNOWLEDGED

- [ ] HONORABLE DISCHARGE BUTTON
- [XXX] SATISFACTORY SERVICE CARD NO.
- [ ] INFORMATION RELATIVE TO RIGHTS AND BENEFITS AS A VETERAN
- [XXX] HONORABLE DISCHARGE CERTIFICATE

ADDRESS SUBSEQUENT TO DISCHARGE *(If to be reenlisted on day following discharge, so state)*

Reenlisting

SIGNATURE OF DISCHARGEE
Alan B. Watts
Alan B. Watts

REMARKS

DISCHARGE

DATE	TYPE OF DISCHARGE
5-12-52	HONORABLE

REASON
Expiration of Enlistment

AUTHORITY
12-3-42A(1) CG Regs.

MUSTERING OUT PAY

[ ] ENTITLED — [XX] NOT ENTITLED

AMOUNT PAID	VOUCHER NO.	CHECK NO.

TRAVEL ALLOWANCE AND PAY

PAID TA FROM	TO
Boston, Mass	Michias, Maine

TOTAL TA	TOTAL TA & PAY *(In full to date of discharge)*
19.62	$62.92

CHECK NO.	NAME OF PAY OFFICER
	T.M.KROTKY, CPCLK, ACO.

CREDITABLE SERVICE THIS ENLISTMENT

YEARS	MONTHS	DAYS
4	0	8

REENLISTMENT RECOMMENDATION

[XXX] RECOMMENDED — [ ] NOT RECOMMENDED

Certified to be correct upon termination of service

S. PISICCHIO LT, USCG
By direction
COMMANDING OFFICER

B 4530

UNITED STATES COAST GUARD

ADDRESS REPLY TO
Commander
1st CG District
REFER TO FILE
1400 Custom House
Boston 9, Massachusetts

3 January, 1952
P15/A23

From: Commander, First Coast Guard District
To: WATTS, Alen B., (209-630) BM1(AN)

Subj: Excellent condition of Boon Island Light Station, appreciation of

1. A recent inspection report indicates that your performance of duty as Officer-in-Charge of Boon Island Light Station has been superior in that the quarters, light, and machinery have been maintained in an excellent state of cleanliness and effective operation. The appearance of the station, both the exterior and interior of all buildings, reflects credit on you and the men assigned during your term of duty as Officer-in-Charge.

2. A copy of this letter will be filed in your personnel jacket.

W. G. BRADBURY

Commander
1st CG District

1400 Custom House
Boston 9, Massachusetts

3 January, 1952
715/A23

From: Commander, First Coast Guard District
To: WATTS, Alen B., (209-630) BM1(AN)

Subj: Excellent condition of Boon Island Light Station, appreciation of

1. A recent inspection report indicates that your performance of duty as Officer-in-Charge of Boon Island Light Station has been superior in that the quarters, light, and machinery have been maintained in an excellent state of cleanliness and effective operation. The appearance of the station, both the exterior and interior of all buildings, reflects credit on you and the men assigned during your term of duty as Officer-in-Charge.

2. A copy of this letter will be filed in your personnel jacket.

W. C. BRADBURY

WBC/1

MILITARY PAY ORDER

MILITARY PAY ORDER NO. 246-58

ACG

ORGANIZATION AND STATION: USCG GROUP SOUTHWEST HARBOR, MAINE

DATE: 1 APRIL 1958

TO DISBURSING OFFICER:

YOU ARE HEREBY AUTHORIZED TO OPEN, ADJUST OR CLOSE, AS INDICATED, THE PAY RECORDS OF THE INDIVIDUALS LISTED BELOW.

SERVICE NO.	LAST NAME—FIRST NAME—MIDDLE INITIAL	REASON FOR CHANGE	YEAR 1958 FROM—	YEAR 1958 TO—
209-630	WATTS, ALAN B.	2400, 3/31/58 Voluntarily Retired from USCG. Auth: COMDT(PE-1)ltr dtd 2/19/58 USCG TONO 53063/99201X Elects MA fm Boston, Mass. to Machias, Maine	3/31	F.O.
		NO FURTHER ENTRIES BELOW THIS LINE		

R.a.C.

SYMBOL NO. (Entered by D. O.)	TYPED NAME AND GRADE OF CERTIFYING OFFICER	SIGNATURE OF CERTIFYING OFFICER
	G. W. HUPPER, CHBOSN W-2, USCG GROUP COMMANDER	G. W. Hupper

DD FORM 1 NOV 49 114

Replaces NME Form 114, 1 Dec 48, which may be used.

☆ U.S. GOVERNMENT PRINTING OFFICE 16—57771-2

FORM PRESCRIBED BY COMPTROLLER GENERAL, U. S. FEBRUARY 8, 1949

COMMANDER, CG GROUP ROCKLAND, MAINE. 3 December 1956

1956

209-302	WATTS, Alan B. (Burnt Is. LBS)	CREDIT LV RATS: LV fm 0900 21 Nov 1956 to 0800; 2 DEC 1956 NOT AOL: 10 days charged to lv account	11/22	12/1

(137)

H. N. LITCHFIELD CHPOSN W-2

Commander CG Group Rockland Maine. 27 June 1956

1956

209-630 WATTS, Alan B.
(Burnt Is. LBS)

CREDIT LV RATS: LV fm 1300 11 June 1956 to 0845; 27 June 1956; NOT AOL: 15 days charged to leave account. 6/12 6/26

(292)

M. O. WRIGHT, CHBOSN W-3 USCG

186-56-85

Commander CG Group Rockland, Maine. 27 NE FEBRUARY 1956

1956

209-630	WATTS, Alan B. (Burnt Island LBS)	CREDIT LV RATS: LV fm 0900; 2-20-56 to 0845; 2-27-56 NOT ACL: 6 dyas charged to lv account.	2/21 2/26

(186)

M. O. WRIGHT, CHBOSN W-3 USCG.

177-56-85

Commander CG Group Rockland, Maine. 9 February 1956

1956

209-630 WATTS, Alan B.
(Burnt Island LPS)

ORIG ENL USCG 2-15-38
AOL AWOL: NPDI: NONE
Completed 18 yrs creditable service on 2-14-56
NOW SERVING: 2/14 XX

(177)

M. O. WRIGHT, CHBOSN W-3 USCG.

52-56-85

Commander, CG Group Rockland, Maine. 29 August 1955

1955

209-630	WATTS, Alan B. (Burnt Island LBS)	CREDIT LV RATS: LV fm 0900; 8-21-55 to 0805; 8-29-55 NOT AOL: 7 days charged to leave account.	8/22 8/28

(52)

M. O. WRIGHT, CHOSN, USCG, CO.

COMMANDER, CG GROUP ROCKLAND, MAINE.

25 April 1955

1955

209-630 WATTS, Alan B.
(Burnt Island LBS)

CREDIT LV RATS: LV fm 1000; 4-18-55 to 0900; 4-24-55
NOT AOL: 5 days charged to leave account.

4/19 4/23

(279)

M. O. WRIGHT, CHBOSN, USCG, CO.

~~137~~-55-85

Commander, CG Group Rockland, Maine. 8 November 1954

1954

209-630	WATTS, Alan B. (Burnt Island LBS)	Tran to CG-64300 at1000 10-31-54, for TD.	10/31	XX
		Arrived CG-64300 1015, 10-31-54.	10/31	XX
		Tran to Burnt Is. LBS 1300 11-6-54.	11/6	XXX
		Arrived Burnt Is. LBS 1320 11-6-54.	11/6	XX
		CREDIT SUBS: @ 2.57 fm 1000 10-31-54 to 11-6-54, 1300	10/31	11/6

(135)

M.O. WRIGHT, CHBOSN, USCG, CO.

[redacted] [redacted] 131-55-85

Commander, CG Group Rockland, Maine. 3 November 1954

1954

209-630 WATTS, Alan B.
(Burnt Is. LBS)

TRAN fm Burnt Is. LBS to CG-64300 for TD apporx 10 days. tr 1000, 10-31-54. 10/31 XXX

START SUBS: @ 2.57 fm 1000 31 October 1954. 10/31 XXX

(131)

M .O. WRIGHT, CHBOSN, USCG, CO.

105-55-85

Commander, CG Group Rockland, Maine. 6 October 1954

1954

209-630	WATTS, Alan B. (Burnt Is. LBS)	CR fm BML1 to BMC(P) Auth: COMDT (PE-1) ltr dtd 9-28-54 Sec. 12-3-23A CG Regs. Effective. 1 October 1954.	10/1	XXX
		Entitled to cash clothing monetary allowances as prescribed for in Article 7C03002 Comptroller Manual.	10/1	XXX

(105)

M. O. WRIGHT, CHBOSN, USCG, CO.

65-55-85

Commander, CG Group Rockland, Maine. 27 August 1954

1954

209-630 WATTS, Alan B.

CREDIT LV RATS: LV fm 0900
16 August 1954 to 0900
27 August 1954 . NOT AOL:
10 days charged to leave
account. 8/17 8/26

(65)

M.O. WRIGHT, CHBOSN, USCG CO.

236-64-85

Commander, CG Group Rockland, Maine

5 April, 1954

1954

209-630	WATTS, Alan B. (Burnt Island LBS)	Tr to CG Moorings for TAD for period of two (2) days in connection with taking of CPO examinations, fm 0800, 4/5/54 to 1200, 4/6/54.	4/5	4/6
		CREDIT SUBS @ 2.57 fm 0800, 4/5/54 to 1200, 4/6/54.	4/5	4/6

(236)

M. O. WRIGHT, CHBOSN, USCG, CO

188-54-85

Commander, CG Group Rockland, Maine 15 February, 1954

1954

300-651	FULTON, Frank W. (Burnt Island LBS)	Enlisted in CG on 2-15-52 AWL, NPDI, ACM, NONE Completed 2 yrs cred. service on 2-14-54.	2-15 xxx
270-228	KUSMIERCZAK, John J. (Whitehead L/S)	Enlisted in CG on 4-5-51 AWL, NPDI, ACM NONE Completed 34 yrs cred service on 12-22-53. (Statement of Creditable Service attached)	12-23 xxx
209-630	WATTS, Alan B. (Burnt Island LBS)	Enlisted in CG on 2-15-38. AWL, NPDI, ACM NONE Completed 16 yrs cred service on 2-14-54.	2-15 xxx

(188)

M. O. WRIGHT, CHBOSN, USCG, CO

167-54-85

Commander, CG Group Rockland, Maine — 6 January, 1954

1954

278-053	BENTLEY, Bobbie L.	Rptd 1205, 1/2/54 fm CO, CGC LAUREL (WAGL-291). AUTH: CO LAUREL ltr dtd 2 January, 1954, file F16-3	1/2	xxx
278-053	BENTLEY, Bobbie L.	Tr fm CG Moorings, Rockland to Whitehead Lifeboat Sta. fasdu	1/4	xxxx
285-971	COUTTS, Aleck M. (Saddleback Ledge L/S)	CREDIT LV RATS. AL fm 0800, 12/28/53 to 0830, 1/3/54. NOT AOL. 5 days charged to leave account	12/29	1/2
285-971	COUTTS, Aleck M.	TERMINATE SUBS @ 2.57 fm 0800, 12/28/53 to 0830, 1/3/54	12/28	1/3
209-630	WATTS, Alan B. (Goose Rocks L/S)	CREDIT LV RATS. AL fm 0800 12/17/53 to 0900, 12/24/53. NOT AOL. 6 days charged to leave account.	12/18	12/23
209-630	WATTS, Alan B.	Tr 0800, 1/4/54 fm Goose Rocks L/S to Burnt Island Lifeboat Station fasdu.	1/4	
209-630	WATTS, Alan B. (Burnt Island LBS)	TERMINATE SUBS @ 2.57 fm 0800, 12/17/53	12/17	xxx

M. O. WRIGHT, CHDOSN, USCG, CO

167-54-85

Commander, CG Group Rockland, Maine

4 January, 1954

1954

278-053	BENTLEY, Bobbie L.	Rptd 1205, 1/2/54 fm CO, CGC LAUREL (WAGL-291). AUTH: CO LAUREL ltr dtd 2 January, 1954, file P16-3	1/2	xxx
278-053	BENTLEY, Bobbie L.	Tr fm CG Moorings, Rockland to Whitehead Lifeboat Sta. fasdu	1/4	xxx
285-971	COUTTS, Aleck M. (Saddleback Ledge L/S)	CREDIT LV RATS. AL fm 0800, 12/28/53 to 0830, 1/3/54. NOT AOL. 5 days charged to leave account	12/29	1/2
285-971	COUTTS, Aleck M. (Saddleback Ledge L/S)	TERMINATE SUBS @ 2.57 fm 0800, 12/28/53 to 0830, 1/3/54.	12/28	1/3
209-630	WATTS, Alan B. (Goose Rocks L/S)	CREDIT LV RATS. AL fm 0800, 12/17/53 to 0815, 1/4/54. NOT AOL. 17 days charged to leave account	12/18	1/3
209-630	WATTS, Alan B.	Tr 0800, 1/4/54 fm Goose Rocks L/S to Burnt Island Lifeboat Station fasdu.	1/4	
209-640	WATTS, Alan B. (Burnt Island LBS)	TERMINATE SUBS @ 2.57 fm 0800, 12/17/53	12/17	xxx

(167)

M. O. WRIGHT, CHBOSN, USCG, CO

49-54-85

Commander, Group Rockland

7 August, 1953

1953

209-630	WATTS, Alan B.	TERMINATE SUBS @ 2.57. AL fm 1400, 6-22-53 to 0730, 6-28-53. NOT AOL.	6-22	6-28
209-630	WATTS, Alan B.	CREDIT SUBS @ 2.57 fm 0730, 6-28-53	6-28	xxx

M. O. WRIGHT, CHBOSN, USCG, CO

5-448

WATTS, Alan B.	209-630	BM1(AN)
OC1CGD	Boston, Mass.	20 May, 1952
ADMIN	Boston, Mass.	01-510000-41

1434
5-12 CG Group Gloucester
TR in connection with disch. & reenl.

CO/L 5-12-52 M[illegible]/P16-3

1615
5-13 CG Group Gloucester
RESDU TD completed

C1CGD/Ind-1 5-13-52

S. PISICCHIO, LT, USCG
By direction

SERVICE RECORD

5-398

WATTS, Alan B.	209-630	BM1(AN)
OC1CGD	Boston, Mass.	19 May, 1952
ADMIN	Boston, Mass.	01-5100000-41

1434
5-12

CG Group Gloucester
TD in connection with discharge and reenl.

CO/L 5-12-52 MM/P16-3

S. PISICCHIO, LT, USCG
By direction

SERVICE RECORD

5-52

WATTS, Alan B. 209-630 BM1(L)(AN)

Boon Island Light Station New Castle N.H. 5/14/52

Boon Island Light Station New Castle N.H. 01-300425

1100 OCICGD
5/14/52 Resumption of regular duty.

C/O/L dated 12 May, 1952 NM/P16-3

Alan B. Watts, BM1(L)(AN)

5-252

WATTS, ALAN BRENNEN	209-630	EML HM1
OC1CGD	Boston, Mass.	13 MAY 52
ADMIN		01-510000-41

13 MAY 52-Reenlisted this date in a Regular Enlistment for a period of Six(6) yrs.
Elects reenlistment Bonus in amount of $360.00

AUTH: Art 12-3-19 CG Regulations

S. PISICCHIO, LT. USCG
By direction

WATTS, Alan B. 209-630 BM1(L)(AN)

Commander, 1st CG District Boston, Mass. 5-12-52

ADMIN Boston, Mass. 01-510000-41

12 MAY 52 - Issued HONORABLE DISCHARGE, this date, by reason of expiration of enlistment.

Not entitled to MOP

Entitled to MA fm POD: Boston, Mass., to HA Machias, Maine.

Leave balance on discharge certified to be 60 days.

Creditable CG service, this enlistment, 4 yrs., 0 mos., 8 days.

Has declared intentions to reenlist on day following discharge.

AUTHD: 12-3-42A(1) CG Regs.

S. PISICCHIO LT, USCG
By direction

4-52

WATTS, Alan B. 209-630 BM1(L)(AN)

Moon Island Light Station New Castle, N.H. 01-300425

0930
5/12/52 OCLCGD
Assignment to temporary duty in connection with discharge and reenlistment.

C/C/L dated 12 May, 1952 MM/P16-3

Alan B. Watts, BM1(L)(AN)

NAV. S. and A. Form 510
Form prescribed by Comptroller General, U. S.
November 3, 1943

Commanding Officer's

PAY RECORD ORDER

CG GROUP PORTSMOUTH

~~Boon Island Light Station (CL-20025)~~
(Name and type and number of activity (or unit))

C. O. Order No. 15-51

To DISBURSING OFFICER:

You are hereby authorized and directed to open, adjust or close, as indicated, the pay records of the individuals listed below:

FILE OR SERVICE No.	SURNAME FIRST NAME INITIAL	REASON FOR CHANGE *	(YEAR) From—	(YEAR) To—
209-630	WATTS, Alan B.			

Completed a period of twelve (12) years net service and will be credited with an increase of pay on the followinf statement of service:

Orig. ENL USCG	2-15-38
AWOL; AOL; NPDI; MISC	None
Discharged (HD)	8-4-44
REENL USCG	5-5-44
AOL; AWOL; NPDI; MISC	None
Discharged (HD)	5-4-48
REENL USCG	5-5-48
AOL; AWOL; NPDI; MISC	None
Completed twelve (12) years net service	2-14-50

Now serving

Career Compensation Act of 1949
PC 25-50

INCLs
Statement of Creditable Service

(D. O. Symbol number)

A. E. HURLEY, CDR USN
(Name and signature)

~~Commanding~~ OFFICER (See Art. 2025 (2) N. R.)

*Enter descriptive data of reason for commencement or stoppage of credit in the individual's pay record, date of qualification and monthly or daily rate of credit whenever necessary, i. e., "Subs. @ $1.80 per day, Qtrs. @ $1.25 per day, GRFO—Pract 7/2/43, MstrDvr Qual 3/2/39, Messman, Com. Rats."

16—40145-1

TREASURY DEPARTMENT
U.S. COAST GUARD
CG-2519 (REV. 11-53)

APPLICATION FOR LEAVE OF ABSENCE

UNIT	ADDRESS	DATE
USCG GROUP	SOUTHWEST HARBOR, MAINE	17 March, 1958

FROM (REQUESTER):	TO	VIA:
WATTS, Alan B. (209-630) BMC	COMMANDING OFFICER	

THE FOLLOWING LEAVE IS REQUESTED:

NUMBER OF DAYS	TO DEPART	REASON:
-12-	19 March 1958	☒ REGULAR ☐ REENLISTMENT ☐ EMERGENCY ☐ RECRUIT

ADDRESS ON LEAVE WILL BE 15 High Street Machias, Maine

To Be Checked By Officers Only

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

Alan B. Watts

Alan B. Watts, BMC
SIGNATURE OF APPLICANT

End.-1 Unit: Date

Date current leave accounting period began 7/1/57

Balance brought forward beginning of present accounting period 60

Number days' leave used during current accounting period 10

Date of expiration of current enlistment 12 May, 1958

☐ FORWARDED, APPROVED ☐ FORWARDED, DISAPPROVED, BECAUSE

(Signature, grade, and title)

End.-2 Unit: Date

☐ FORWARDED, APPROVED ☐ FORWARDED, DISAPPROVED BECAUSE

(Signature, grade, and title)

End.-3 Unit: CG GROUP SW HARBOR Date 17 March, 1958

☒ Returned, GRANTED -12- days.

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

☐ Returned, NOT GRANTED, because

G.W. HUPPER, CHBOSN W-2 USCG
(Signature, grade, and title)

End.-4 Unit: USCG GROUP SW HARBOR, MAINE Date 19 March, 1958

Departed at 0700, this date. This leave expires before 0900, 1 April, 1958

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

Richard G. Robinson ENC OOD
(Signature, grade, and title)

End.-5 Unit: CG GROUP SOUTHWEST HARBOR, ME. Date 31 March 1958

Reported at 0800 2350, this date, having used -12- days' leave.

G. W. Hupper

G. W. HUPPER, CHBOSN W-2, USCG GRUCOM
(Signature, grade, and title)

(Over)

16—40220-4

APPLICATION FOR LEAVE OF ABSENCE

	ADDRESS	DATE
G GROUP	SOUTHWEST HARBOR, MAINE	19 Febuary 1958

(REQUESTER):	TO	VIA:
TTS, ALAN B. (209-630)BMC	Commanding Officer	Executive Officer

THE FOLLOWING LEAVE IS REQUESTED:

NUMBER OF DAYS	TO DEPART	REASON:
-06-	24 Febuary 1958	☒ REGULAR ☐ EMERGENCY ☐ REENLISTMENT ☐ RECRUIT

ADDRESS ON LEAVE WILL BE 15 High St. Machias, Maine

To Be Checked By Officers Only

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

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

DRIVE SAFELY

SIGNATURE OF APPLICANT Alan B. Watts
ALAN B. WATTS

End.-1 Unit: USCG DEPOT SOUTHWEST HARBOR, MAINE Date 19 Febuary 1958

Date current leave accounting period began 7/1/58

Balance brought forward beginning of present accounting period 60

Number days' leave used during current accounting period -05-

Date of expiration of current enlistment 12 May 1958

☒ FORWARDED, APPROVED ☐ FORWARDED, DISAPPROVED, BECAUSE

G. W. Hupper.
G. W. HUPPER, CHBOSN W-2, USCG GRUCOM
(Signature, grade, and title)

End.-2 Unit: Date

☐ FORWARDED, APPROVED ☐ FORWARDED, DISAPPROVED BECAUSE

(Signature, grade, and title)

End.-3 Unit: USCG DEPOT SOUTHWEST HARBOR, MAINE Date 19 Febuary 1958

☒ Returned, GRANTED -06- days.

☐ ADVANCE REGULAR (Reason for leave) Leave.

☐ Returned, NOT GRANTED, because ☒ ACCRUED

G. W. Hupper.
G. W. HUPPER, CHBOSN W-2, USCG GRUCOM
(Signature, grade, and title)

End.-4 Unit: USCG DEPOT SOUTHWEST HARBOR, MAINE Date 24 Febuary 1958

Departed at 0001, this date. This leave expires before 0900, 3 March 1958

at this station and is subject to the instructions on the reverse hereof.

Edward J. R. McCarthy LT(jg) USCG OOD
(Signature, grade, and title)

End.-5 Unit: USCG GROUP SOUTHWEST HARBOR, ME. Date 1 March 1958

Reported at 0400 0400, this date, having used -05- days' leave.

G W Hupper
G. W. HUPPER, CHBOSN W-2, USCG GRUCOM
(Signature, grade, and title)

(Over)

APPLICATION FOR LEAVE OF ABSENCE

12 B

	ADDRESS	DATE
OUP	SOUTHWEST HARBOR, MAINE	2 October 1957
ESTER):	TO	VIA:
, Alan B. (209-630) BMC	Commanding Officer	

FOLLOWING LEAVE IS REQUESTED:

NUMBER OF DAYS	TO DEPART	REASON: ☒ REGULAR	☐ REENLISTMENT
-5-	2 October 1957	☐ EMERGENCY	☐ RECRUIT

ADDRESS ON LEAVE WILL BE Machias, Maine

To Be Checked By Officers Only

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

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

Alan B. Watts

SIGNATURE OF APPLICANT

End.-1 Unit: USCG GROUP, SOWEST HARBOR, MAINE Date 2 October 1957

Date current leave accounting period began 7/1/57	Balance brought forward beginning of present accounting period 60
Number days' leave used during current accounting period 00	Date of expiration of current enlistment 5-12-58

☐ FORWARDED, APPROVED ☐ FORWARDED, DISAPPROVED, BECAUSE

(Signature, grade, and title)

End.-2 Unit: Date

☐ FORWARDED, APPROVED ☐ FORWARDED, DISAPPROVED BECAUSE

(Signature, grade, and title)

End.-3 Unit: USCG GROUP, SOWEST HARBOR, MAINE Date 2 October 1957

☒ Returned, GRANTED -5- days.

☐ ADVANCE REGUDAR Leave.
(Reason for leave)

☐ Returned, NOT GRANTED, because ☒ ACCRUED

G. W. Hupper

G. W. HUPPER, CHBOSN W-2, USCG - GRUCOM
(Signature, grade, and title)

End.-4 Unit: USCG GROUP, SOWEST HARBOR, MAINE Date 2 October 1957

Departed at 0905, this date. This leave expires before 0900, 8 October 1957

at this date and is subject to the instructions on the reverse hereof.

Robert L. Ruhilles BM O. O. D.
(Signature, grade, and title)

End.-5 Unit: USCG GROUP, SOWEST HARBOR, MAINE Date 10/8 8 October 1957

Reported at 0745, this date, having used -5- days' leave.

G. W. HUPPER, CHBOSN W-2, USCG - GRUCOM
(Signature, grade, and title)

16—40220-4

(Over)

APPLICATION FOR LEAVE OF ABSENCE

	ADDRESS	DATE
UP	SOUTHWEST HARBOR, MAINE	11 March 1957

(STER):	TO	VIA:
, Alan B. (209-630) BMC	Commanding Officer	

THE FOLLOWING LEAVE IS REQUESTED:

NUMBER OF DAYS	TO DEPART	REASON:
-20-	14 March 1957	☒ REGULAR ☐ EMERGENCY ☐ REENLISTMENT ☐ RECRUIT

ADDRESS ON LEAVE WILL BE 15 High Street, Machias, Maine

To Be Checked By Officers Only

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

Alan B. Watts
ALAN B. WATTS
SIGNATURE OF APPLICANT

End.-1 Unit: USCG GROUP, SOWEST HBR, MAINE Date 11 March 1957

Date current leave accounting period began 7/1/56	Balance brought forward beginning of present accounting period 60
Number days' leave used during current accounting period 10	Date of expiration of current enlistment 5/12/58

☐ FORWARDED, APPROVED ☐ FORWARDED, DISAPPROVED, BECAUSE

(Signature, grade, and title)

End.-2 Unit: Date

☐ FORWARDED, APPROVED ☐ FORWARDED, DISAPPROVED BECAUSE

(Signature, grade, and title)

End.-3 Unit: USCG GROUP, SOWEST HARBOR, MAINE Date 11 March 1957

☒ Returned, GRANTED -20- days. ☐ ADVANCE ☒ ACCRUED REGULAR (Reason for leave) Leave.

☐ Returned, NOT GRANTED, because

G. W. Hupper
G. W. HUPPER, CHBOSN W-2, USCG - GRUCOM
(Signature, grade, and title)

End.-4 Unit: USCG GROUP, SOWEST HARBOR, MAINE Date 14 March 1957

Departed at 0030, this date. This leave expires before 0900, 4 April 1957

at this station and is subject to the instructions on the reverse hereof.

Robert L. Archiller O. O. D.
(Signature, grade, and title)

End.-5 Unit: USCG GROUP, SOWEST HARBOR, MAINE Date 4 April 1957

Reported at 0745, this date, having used 20 days' leave.

G. W. Hupper
G. W. HUPPER, CHBOSN W-2, USCG - GRUCOM
(Signature, grade, and title)

16—40220-4

(Over)

APPLICATION FOR LEAVE OF ABSENCE

	ADDRESS	DATE
ISLAND LBS	PORT CLYDE, MAINE.	21 NOVEMBER 1956

(REQUESTER):	TO	VIA:
, Alan B. (209-301) BMC	Commander, CG Group Rockland	Maine.

THE FOLLOWING LEAVE IS REQUESTED:

NUMBER OF DAYS	TO DEPART	REASON:
10 ALREG	21 NOVEMBER 1956	☒ REGULAR ☐ REENLISTMENT ☐ EMERGENCY ☐ RECRUIT

ADDRESS ON LEAVE WILL BE MACHIAS, MAINE.

To Be Checked By Officers Only

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

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

Alan B. Watts

ALAND B. WATTS

SIGNATURE OF APPLICANT

End.-1 Unit: COMMANDER, CG GROUP ROCKLAND ME. Date "21 NOVEMBER 1956

Date current leave accounting period began 1 July 1956	Balance brought forward beginning of present accounting period 60
Number days' leave used during current accounting period 00	Date of expiration of current enlistment

☐ FORWARDED, APPROVED ☐ FORWARDED, DISAPPROVED, BECAUSE

(Signature, grade, and title)

End.-2 Unit: Date

☐ FORWARDED, APPROVED ☐ FORWARDED, DISAPPROVED BECAUSE

(Signature, grade, and title)

End.-3 Unit: COMMANDER, CG GROUP ROCKLANDME. Date 21 NOVEMBER 1956

☒ Returned, GRANTED 10 AL days.

☐ ADVANCE REGULAR Leave.

☐ Returned, NOT GRANTED, because ☒ ACCRUED (Reason for leave)

H. N. Litchfield

H. N. LITCHFIELD CHBOSN W-2 USCG CO.

(Signature, grade, and title)

End.-4 Unit: COMMANDER, CG GROUP ROCKLAND ME. Date 21 NOVEMBER 1956

Departed at 0900, this date. This leave expires before 0900, 2 DECEMBER 1956

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

H. N. Litchfield

H. N. LITCHFIELD CHBOSN W-2 USCG

(Signature, grade, and title)

End.-5 Unit: Commander, CG Group Rockland Maine Date 2 December 1956

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

H. N. Litchfield

H. N. LITCHFIELD CHBOSN W-2 USCG

(Signature, grade, and title)

16—40220-4

(Over)

APPLICATION FOR LEAVE OF ABSENCE

	ADDRESS	DATE
.SLAND LIFEBOAT	PORT CLYDE, MAINE	11 June 1956

(UESTER):	TO	VIA:
ALAN B. (209-630) BMC	COMMANDER CG GROUP ROCKLAND	MAINE

E FOLLOWING LEAVE IS REQUESTED:

NUMBER OF DAYS	TO DEPART	REASON:
15 AL	11 June 1956	☒ REGULAR ☐ EMERGENCY ☐ REENLISTMENT ☐ RECRUIT

ADDRESS ON LEAVE WILL BE Machias, Maine.

To Be Checked By Officers Only

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

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

Alan B. Watts

SIGNATURE OF APPLICANT

End.-1 Unit: Commander CG Group Rockland Maine Date 11 June 1956

Date current leave accounting period began 1 July 1956	Balance brought forward beginning of present accounting period 45
Number days' leave used during current accounting period 13	Date of expiration of current enlistment

☐ FORWARDED, APPROVED ☐ FORWARDED, DISAPPROVED, BECAUSE

(Signature, grade, and title)

End.-2 Unit: Date

☐ FORWARDED, APPROVED ☐ FORWARDED, DISAPPROVED BECAUSE

(Signature, grade, and title)

End.-3 Unit: Commander CG Group Rockland Maine Date 11 June 1956

☒ Returned, GRANTED 15 days. ☐ ADVANCE ☒ ACCRUED REGULAR (Reason for leave) Leave.

☐ Returned, NOT GRANTED, because

M. O. WRIGHT, CHBOSN W-3 USCG CO.

(Signature, grade, and title)

End.-4 Unit: COMMANDER CG GROUP ROCKLAND MAINE Date 11 June 1956

Departed at 1300, this date. This leave expires before 0900, 27 June 1956

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

M. O. WRIGHT, CHBOSN W-3 USCG CO.

(Signature, grade, and title)

End.-5 Unit: Commander CG Group Rockland Me. Date 27 June 1956

Reported at 0845, this date, having used 15 days' leave.

M. O. WRIGHT, CHBOSN W-3 USCG CO.

(Signature, grade, and title)

16—40220-4

(Over)

APPLICATION FOR LEAVE OF ABSENCE

	ADDRESS	DATE
land LBS	PORT CLYDE, MAINE.	20 February 1956

(ER):	TO	VIA:
, Alan B. (209-630) RMC	Commander CG Group Rockland Maine.	

LLOWING LEAVE IS REQUESTED:

NUMBER OF DAYS	TO DEPART	REASON:
6 ALREG	20 February 1956	☒ REGULAR ☐ REENLISTMENT ☐ EMERGENCY ☐ RECRUIT

ADDRESS ON LEAVE WILL BE Machias, Maine.

To Be Checked By Officers Only

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

Alan B. Watts

SIGNATURE OF APPLICANT Alan B. Watts

End.-1 Unit: Commander CG Group Rockland Maine Date 20 February 1956

Date current leave accounting period began 1 July 1955	Balance brought forward beginning of present accounting period 51
Number days' leave used during current accounting period ~~20~~ 07	Date of expiration of current enlistment

☐ FORWARDED, APPROVED ☐ FORWARDED, DISAPPROVED, BECAUSE

(Signature, grade, and title)

End.-2 Unit: Date

☐ FORWARDED, APPROVED ☐ FORWARDED, DISAPPROVED BECAUSE

(Signature, grade, and title)

End.-3 Unit: Commander CG Group Rockland Me Date 20 February 1956

☒ Returned, GRANTED 6 days. ☐ ADVANCE Regular Leave.
(Reason for leave)

☐ Returned, NOT GRANTED, because ☒ ACCRUED

M. O. WRIGHT, CHBOSN W-3 USCG CO.
(Signature, grade, and title)

End.-4 Unit: Commander CG Group Rockland, Me Date 20 February 1956

Departed at 0900, this date. This leave expires before 0900, 27 February 1956

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

M. O. WRIGHT, CHBOSN W-3 USCG, CO.
(Signature, grade, and title)

End.-5 Unit: Commander CG Group Rockland Maine Date 27 FEBRURRY 1956

Reported at 0845, this date, having used 6 AL days' leave.

M. O. WRIGHT, CHBOSN W-3 USCT CO.
(Signature, grade, and title)

16—40220-4

(Over)

APPLICATION FOR LEAVE OF ABSENCE

	ADDRESS	DATE
LAND LBS	PORT CLYDE, MAINE	21 August 1955

(ER):	TO	VIA:
, ALAN B. (209-630) BMC(P)	Commander, CG Group Rockland,	Maine.

FOLLOWING LEAVE IS REQUESTED:

NUMBER OF DAYS	TO DEPART	REASON:
7 AL	21 August 1955	☒ REGULAR ☐ REENLISTMENT ☐ EMERGENCY ☐ RECRUIT

ADDRESS ON LEAVE WILL BE MACHIAS, MAINE

To Be Checked By Officers Only

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

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

Aland B. Watts

SIGNATURE OF APPLICANT

End.-1 Unit: Date

Date current leave accounting period began 1 July 1956	Balance brought forward beginning of present accounting period 58
Number days' leave used during current accounting period 00	Date of expiration of current enlistment 1958

☐ FORWARDED, APPROVED ☐ FORWARDED, DISAPPROVED, BECAUSE

(Signature, grade, and title)

End.-2 Unit: Date

☐ FORWARDED, APPROVED ☐ FORWARDED, DISAPPROVED BECAUSE

(Signature, grade, and title)

End.-3 Unit: Commander, CG Group Rockland, Me Date 21 August 1955

☒ Returned, GRANTED 7 days.

☐ ADVANCE ☒ ACCRUED Regular Leave.

(Reason for leave)

☐ Returned, NOT GRANTED, because

M. O. WRIGHT, CHBOSN, USCG, CO.

(Signature, grade, and title)

End.-4 Unit: COMMANDER, CG GROUP ROCKLAND ME Date 21 August 1955

Departed at 0900, this date. This leave expires before 0900, 29 August 1955

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

M. O. WRIGHT, CHBOSN, USCG, CO.

(Signature, grade, and title)

End.-5 Unit: Commander, CG Group Rockland, Maine Date 29 August 1955

Reported at 0805, this date, having used 7 AL days' leave.

M. O. WRIGHT, CHBOSN, USCG, CO.

(Signature, grade, and title)

16—40220-4

(Over)

APPLICATION FOR LEAVE OF ABSENCE

	ADDRESS	DATE
nt Island LBS	Port Clyde, Maine.	18 April 1955

(REQUESTER):	TO	VIA:
ATTS, Alan B. (209-630) BMC(P)	Commander, CG Group Rockland	Me

THE FOLLOWING LEAVE IS REQUESTED:

NUMBER OF DAYS	TO DEPART	REASON:
5 AL	18 April 1955	☒ REGULAR ☐ REENLISTMENT ☐ EMERGENCY ☐ RECRUIT

ADDRESS ON LEAVE WILL BE MACHIAS, MAINE

To Be Checked By Officers Only

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

Alan B. Watts
SIGNATURE OF APPLICANT

End.-1 Unit: Commander, CG Group Rockland, Me Date 18 April 1955

Date current leave accounting period began 1 July 1954	Balance brought forward beginning of present accounting period 43
Number days' leave used during current accounting period 00	Date of expiration of current enlistment

☐ FORWARDED, APPROVED ☐ FORWARDED, DISAPPROVED, BECAUSE

(Signature, grade, and title)

End.-2 Unit: Date

☐ FORWARDED, APPROVED ☐ FORWARDED, DISAPPROVED BECAUSE

(Signature, grade, and title)

End.-3 Unit: Commander, CG Group Rockland, Me Date 18 April 1955

☒ Returned, GRANTED 5 AL days. ☐ ADVANCE ☒ ACCRUED Regular (Reason for leave) Leave.

☐ Returned, NOT GRANTED, because

M. O. WRIGHT, CHBOSN, USCG, CO
(Signature, grade, and title)

End.-4 Unit: Commander, CG Group Rockland, Me Date 18 April 1955

Departed at ____, this date. This leave expires before 0900, 24 April 1955

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

M. O. WRIGHT, CHBOSN, USCG, CO
(Signature, grade, and title)

End.-5 Unit: Commander, CG Group Rockland, Me Date 24 April 1955

Reported at 0900, this date, having used A 5 AL days' leave.

M. O. WRIGHT, CHBOSN, USCG, CO.
(Signature, grade, and title)

16—40220-4

(Over)

APPLICATION FOR LEAVE OF ABSENCE

	ADDRESS	DATE
LAND LBS	PORT CLYDE, MAINE	16 August 1954

(ESTER):	TO	VIA:
, Alan B.(209-630) BM1	Commander, CG Group Rockland	Me

HE FOLLOWING LEAVE IS REQUESTED:

NUMBER OF DAYS	TO DEPART	REASON:
10 AL	16 August 1954	☒ REGULAR ☐ REENLISTMENT ☐ EMERGENCY ☐ RECRUIT

ADDRESS ON LEAVE WILL BE Hight St. MACHIAS, ME.

To Be Checked By Officers Only

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

Alan B. Watts
SIGNATURE OF APPLICANT

End.-1 Unit: Commander, CG Group ~~Rockaldn~~ ROCKLAND Me. Date 16 August 1954

Date current leave accounting period began xxxxxx 1 July 1954	Balance brought forward beginning of present accounting period 45
Number days' leave used during current accounting period 00	Date of expiration of current enlistment

☒ FORWARDED, APPROVED ☐ FORWARDED, DISAPPROVED, BECAUSE

M.O. WRIGHT CHBOSN USCG CO.
(Signature, grade, and title)

End.-2 Unit: Date

☐ FORWARDED, APPROVED ☐ FORWARDED, DISAPPROVED BECAUSE

(Signature, grade, and title)

End.-3 Unit: Commander, CG Group Rockland Me Date 16 August 1954

☒ Returned, GRANTED 10 AL days.

☐ ADVANCE ~~Regular~~ REGULAR Leave.
(Reason for leave)

☐ Returned, NOT GRANTED, because ☒ ACCRUED

M.O. WRIGHT CHBOSN USCG CO.
(Signature, grade, and title)

End.-4 Unit: Commander, CG Group Rockland Me Date 16 August 1954

Departed at 0900, this date. This leave expires before 0900, 27 August 1954

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

M.O. WRIGHT CHBOSN USCG CO.
(Signature, grade, and title)

End.-5 Unit: Commander, CG Group Rockland Me Date 27 August 1954

Reported at 0900, this date, having used 10 AL days' leave.

M.O. WRIGHT, CHBOSN, USCG CO.
(Signature, grade, and title)

16—40220-4

(Over)

APPLICATION FOR LEAVE OF ABSENCE

	ADDRESS	DATE
cks Light Station	Northaven, Maine.	17 December, 1953
(QUESTER):	TO	VIA:
, Alan B. (209-630) BM1(L)AN	CO CG Group, Rockland, Me.	

THE FOLLOWING LEAVE IS REQUESTED:

NUMBER OF DAYS	TO DEPART	REASON: ☐ REGULAR ☐ REENLISTMENT 6 ALREG ☐ EMERGENCY ☐ RECRUIT 11 CL
17	0800-17 Dec, 1953	

ADDRESS ON LEAVE WILL BE High St, Machias, Maine. Tel No. 292-2

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

Alan B. Watts

Alan B. Watts, BM1
SIGNATURE OF APPLICANT — Date

Ind.-1 Unit:

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

☐ FORWARDED, APPROVED ☐ FORWARDED, DISAPPROVED, BECAUSE

(Signature, rank, and title)

Ind.-2 Unit: Date

☐ FORWARDED, APPROVED ☐ FORWARDED, DISAPPROVED BECAUSE

(Signature, rank, and title)

Ind.-3 Unit: Group, Rockland, Maine. Date 17 December, 1953

☒ Returned, GRANTED 17 days. ☐ ADVANCE ☐ ACCRUED Leave.
(Reason for leave)

☐ Returned, NOT GRANTED, because

Alton F. Brown, BMC(L)
By Direction
(Signature, rank, and title)

Ind.-4 Unit: Group, Rockland, Maine. Date 17 December, 1953

Departed at 0800, this date. This leave expires before 0900-4 January, 1953 at

at Office Group, Rockland, Maine. and is subject to the instructions on the reverse hereof.

Alton F. Brown, BMC(L)
By Direction
(Signature, rank, and title)

Ind.-5 Unit: Commander, CG Group Rockland, Me. Date 4 January, 1954

Reported at 0815, this date, having used 6 days' leave.

M. O. WRIGHT, CHBOSN, USCG
(Signature, rank, and title)

16—40220-3

(Over)

APPLICATION FOR LEAVE OF ABSENCE

	ADDRESS	DATE
ROCKS LIGHT STATION	North Haven, Maine	22 June 1953

(REQUESTER):	TO	VIA:
TTS, Alan B. (209-630) BML1(AN)	Commander, Rockland Group	- - - - - - - - - -

THE FOLLOWING LEAVE IS REQUESTED:

NUMBER OF DAYS	TO DEPART	REASON: ☐ REGULAR ☐ REENLISTMENT ☐ EMERGENCY ☐ RECRUIT	
15	22 June 1953		10 days CL 5 days AL

ADDRESS ON LEAVE WILL BE High Street, Machias, Maine

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

SIGNATURE OF APPLICANT Alan B. Watts
Alan B. Watts

Ind.-1 Unit: Commander, Rockland Group Date 22 June 1953

Date current leave accounting period began 7-1-52	Balance brought forward beginning of present accounting period 4
Number days' leave used during current accounting period 10	Date of expiration of current enlistment 12 May 1958

☐ FORWARDED, APPROVED ☐ FORWARDED, DISAPPROVED, BECAUSE

(Signature, rank, and title)

Ind.-2 Unit: Date

☐ FORWARDED, APPROVED ☐ FORWARDED, DISAPPROVED BECAUSE

(Signature, rank, and title)

Ind.-3 Unit: Commander, Rockland Group Date 22 June 1953

☒ Returned, GRANTED 15 days. ☒ ADVANCE ☒ ACCRUED REGULAR & COMPENSATORY Leave.
(Reason for leave)

☐ Returned, NOT GRANTED, because

M. O. WRIGHT, CHBOSN., USCG - CO
(Signature, rank, and title)

Ind.-4 Unit: Commander, Rockland Group Date 22 June 1953

Departed at 1400, this date. This leave expires before 0900, 8 July 1953

at this unit and is subject to the instructions on the reverse hereof.

M. O. WRIGHT, CHBOSN., USCG - CO
(Signature, rank, and title)

Ind.-5 Unit: Commander, Rockland Group Date 8 July 1953

Reported at 0730, this date, having used 5 days' leave & 10 days CL.

M. O. WRIGHT, CHBOSN., USCG - CO
(Signature, rank, and title)

16—40220-3

(Over)

APPLICATION FOR LEAVE OF ABSENCE

	ADDRESS	DATE
Goose Rocks L/S	North Haven, Maine	29 October 1952

FROM (REQUESTER):	TO	VIA:
WATTS, Alan B. (209-630) BM1(AN)	Goose Rocks L/S	CG Group, Rockland, Maine

THE FOLLOWING LEAVE IS REQUESTED:

NUMBER OF DAYS	TO DEPART	REASON:
12	0930 29 October 1952	☒ REGULAR ☐ REENLISTMENT 7 ACL ☐ EMERGENCY ☐ RECRUIT 5 AL ACC

ADDRESS ON LEAVE WILL BE High St. Machias, Maine Ph 292-2

To Be Checked By Officers Only

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

SIGNATURE OF APPLICANT Alan B. Watts
Alan B. Watts

Ind.-1 Unit: CG Group, Rockland, Maine Date 29 October 1952

Date current leave accounting period began 7-1-52	Balance brought forward beginning of present accounting period -4-
Number days' leave used during current accounting period -5-	Date of expiration of current enlistment 12 May 1958

☐ FORWARDED, APPROVED ☐ FORWARDED, DISAPPROVED, BECAUSE

(Signature, rank, and title)

Date

Ind.-2 Unit:

☐ FORWARDED, APPROVED ☐ FORWARDED, DISAPPROVED BECAUSE

(Signature, rank, and title)

Ind.-3 Unit: CG Group, Rockland, Maine Date 29 October 1952

☒ Returned, GRANTED 12 days. ☒ ADVANCE ☐ ACCRUED Regular (Reason for leave) Leave.

☐ Returned, NOT GRANTED, because

M. O. WRIGHT, CHBOSN, USCG
(Signature, rank, and title)

Ind.-4 Unit: CG Group, Rockland, Maine Date 29 October 1952

Departed at 0930, this date. This leave expires before 0900 11 November 1952

at CG Group, Rockland, Maine and is subject to the instructions on the reverse hereof.

M. O. WRIGHT, CHBOSN, USCG
(Signature, rank, and title)

Ind.-5 Unit: CG Group, Rockland, Maine Date 11 November 1952

Reported at 0900, this date, having used 7 ACL 5 AL ACC days' leave.

M. O. WRIGHT, CHBOSN, USCG
(Signature, rank, and title)

(Over)

16—40220-3

...OR LEAVE OF ABSENCE
COAST GUARD
...5-45)

WARNING: YOU ARE WARNED NOT TO DISCUSS ANY ACTIVITIES OR THE MOVEMENTS OR LOCATIONS OF VESSELS; NOR TO PARTICIPATE IN A PRESS CONFERENCE OR TALK TO REPORTERS OR OVER THE RADIO EXCEPT AFTER CONSULTATION WITH AND CLEARANCE OF SUBJECT MATTER BY A PUBLIC RELATIONS OFFICER OF THE NAVY OR COAST GUARD.

	ADDRESS	DATE
Goon Island Light Sta.	New Castle N.H.	10 September, 1952

FROM (REQUESTER):	TO	VIA:
WATTS, Alan B. (209-630) BM1	(L) CG Group, Gloucesterm, Mass.	OinC, Port's. Hbr. L/B Sta. New Castle N.H.

THE FOLLOWING LEAVE IS REQUESTED:

NO. OF DAYS LEAVE	NO. OF DAYS TRAVEL	TO DEPART	No. OF DAYS LEAVE DURING FISCAL YEAR	No. OF DAYS LEAVE CURRENT ENLISTMENT YEAR	DATE OF EXPIRATION CURRENT ENLISTMENT YEAR
5		On or about 20 September, 1952	0	0	15 May, 1953

REASON FOR REQUEST:

Acc. Leave

My address on leave will be: High Street, Machias, Maine

I will immediately inform my commanding officer of any change in address while on leave.

Alan B. Watts

Alan B. Watts, BM1(L)(AN)
(Signature of applicant)

INDORSEMENTS

Ind.-1 Unit: Port's. Hbr. L/B Station, New Castle N.H. Date: 10 September, 1952

Leave record indicates balance of 15 days' annual and _____ days' Reenlistment Leave due.

Forwarded ☐ APPROVED ☐ NOT APPROVED (because)

Returned ☐ GRANTED ☐ NOT GRANTED (because)

Albert R. Mead

Albert R. Mead, BM2 (P)
COMMANDING—EXECUTIVE—PERSONNEL OFFICER.

Ind.-2 Unit: CG Group Gloucester Date: 10 September, 1952

Forwarded ☐ APPROVED ☐ NOT APPROVED (because)

Returned ☑ GRANTED ☐ NOT GRANTED (because)

D.W. Cluff, Cdr. USCG
DCGO—FORCE COMDR.—COMMANDING OFFICER.

Ind.-3 COAST GUARD HEADQUARTERS, Washington, D. C. Date:

Returned ☐ GRANTED ☐ NOT GRANTED.

COMMANDANT.

Ind.-4 Unit: Port's. Hbr. L/B Sta. Date: 20 September, 1952

Departed at 0900, 20 September, 1952 this date. This leave of absence will expire before 0900 26 September, 1952, at Port's. Hbr. L/B Station and is subject to the special instructions indicated on reverse hereof.

Albert R. Mead

Albert R. Mead, BM2
COMMANDING—EXECUTIVE—PERSONNEL OFFICER.

Ind.-5 Unit: Date:

Granted _____ days extension of leave to expire before noon, _____

Authority:

_____ Signature and rank

_____ Title

Ind.-6 Unit: Portsmouth Harbor LB Station Date: 26 September, 1952

Reported at 0830 this date, having taken 5 days' leave and 0 days' TT.

Albert R. Mead

Albert R. Mead BM2 (P) OIC
COMMANDING—EXECUTIVE—PERSONNEL OFFICER.

16—40220-3

[OVER]

FILE IN SERVICE RECORD

STAMP-CLASSIFICATION IF ANY

TREASURY DEPARTMENT
U. S. COAST GUARD
CG-3441 (Rev. 7-55)

U. S. COAST GUARD STANDARD TRAVEL ORDER FOR ENLISTED PERSONNEL

TRAVEL ORDER NO. 52465/CG20LX

AUTHORITY COMDTNOTE (p) MSG 242249-8 (JAN)

DATE 25 JANUARY 1957

INSTRUCTIONS: This form shall be used for individual transfer orders of enlisted personnel. It is not to be used for group orders. LINE UP copies so that data is transferred to appropriate spaces and is LEGIBLE. FORWARD ONE COPY TO DESTINATION UNIT. If insufficient space is provided for any entry, make note in that space and continue entry under "Supplemental Instruction" or on attached sheet. Identify continued items and attach additional sheets securely.

UNIT	LOCATION	
BURNT ISLAND LIFEBOAT STATION	PORT CLYDE, MAINE.	
TO (Name) WATTS, Alan R.	SERVICE NO. 209-630	RATE BMC

PROCEED AND REPORT TO

DESTINATION	STATION	NATURE OF DUTY (Temporary, Permanent, Training, etc.)	APPROX. No. of Days
a. Intermediate	----------		
b. Intermediate	----------		
c. Ultimate	CG DEPOT SW HARBOR, ME 04679	PASDU:	INDEF

	UPON COMPLETION OF THIS TEMPORARY ADDITIONAL DUTY RETURN TO YOUR STATION FOR RESUMPTION OF YOUR REGULAR DUTIES
X	THIS ORDER CONSTITUTES A PERMANENT CHANGE OF STATION FROM Port Clyde, Maine. TO South West Harbor, Maine.

1. a. RECORDS ATTACHED (Check appropriate boxes)

X	SERVICE	X	HEALTH		PAY	X	PERSONNEL DATA CARD

b. DISPOSITION OF RECORDS NOT ATTACHED: PR RETAINED AT CGCGD'S

2. AUTHORIZED TIME EN ROUTE

TOTAL DAYS AUTHORIZED	LEAVE	PROCEED TIME	COMPENSATORY ABSENCE	TRAVEL TIME
-4-	-0-	-3-	-0-	-1-

REPORT NOT LATER THAN		ADDRESS ON LEAVE
TIME	DATE	
2400	29 JANUARY 1957	

3. TRAVEL NECESSARY TO THE EXECUTION HEREOF IS REQUIRED IN THE PUBLIC INTERESTS AND IS AUTHORIZED. CHARGEABLE AGAINST TRAVEL ALLOTMENT: DISTRICT SYMBOL:

4. TRAVEL IS AUTHORIZED OR DIRECTED AS INDICATED BELOW:

X	a. FOR PERMANENT CHANGE OF STATION ONLY (Including temporary duty en route): TRAVEL BY PRIVATELY OWNED CONVEYANCE IS AUTHORIZED. (See para. BO3A06-4C(2), C. G. Travel Manual.)
	b. FOR TEMPORARY ADDITIONAL DUTY ORDERS ONLY: TRAVEL BY PRIVATELY OWNED CONVEYANCE IS AUTHORIZED AND IS MORE ADVANTAGEOUS TO THE GOVERNMENT.
	c. FOR TEMPORARY ADDITIONAL DUTY ORDERS ONLY: TRAVEL BY PRIVATELY OWNED CONVEYANCE IS AUTHORIZED. (Only authorized when sufficient leave to allow safe driving is granted.)
	d. TRAVEL BY GOVERNMENT TRANSPORTATION AS INDICATED BELOW, IF AVAILABLE, IS DIRECTED, OTHERWISE THE USE OF COMMERCIAL CARRIER IS AUTHORIZED: GOVERNMENT VESSEL ☐ GOVERNMENT VEHICLE ☐ GOVERNMENT AIRCRAFT — CLASS PRIORITY CERTIFIED
	e. TRAVEL IS DIRECTED BY COMMERCIAL CARRIER ON TRANSPORTATION REQUESTS, WHEN TRANSPORTATION REQUESTS ARE AVAILABLE, OTHERWISE AT OWN EXPENSE, SUBJECT TO REIMBURSEMENT. MODE OF TRANSPORTATION (Rail, bus, etc.)
	f. TRAVEL AT OWN EXPENSE IS AUTHORIZED, SUBJECT TO REIMBURSEMENT. (This does not authorize travel by privately owned conveyance.)

5. AUTHENTICATING SIGNATURE (Grade and title): H. N. LITCHFIELD CDROSN W-2 USCG CGDCGM.

6. DELIVERED AND DEPARTED

TIME	DATE	SIGNATURE (Grade or rate and title)
1400	25 JAN 1957	H. N. LITCHFIELD CDROSN W-2 USCG CGDCGM.

7. I HAVE READ AND UNDERSTAND THE ABOVE ORDERS AND THE GENERAL AND SUPPLEMENTAL INSTRUCTIONS AND I HAVE RECEIVED THE RECORDS AND ACCOUNTS AS INDICATED. SIGNATURE OF TRAVELER: Alan R. Watts

EDITION OF 5-53 IS OBSOLETE

STAMP CLASSIFICATION IF ANY

8. **INTERMEDIATE REPORTINGS**

(Indicate in columns provided whether [redacted] Government quarters and/or subsistence were available. See subparagraphs 1150-4 and 5, Joint Travel Regulations)

STATION	REPORTED		DEPARTED		AUTHENTICATING SIGNATURE, GRADE AND TITLE	QTRS.	SUBS.
	TIME	DATE	TIME	DATE			
a.							
b.							

9. **REPORTING — ULTIMATE DESTINATION**

(Receiving activity shall return a signed copy of this order to the transferring activity indicating receipt of man and records, or listing discrepancies)

STATION: USCG DEPOT, SOUTHWEST HARBOR, MAINE

HOUR: 2005 DATE REPORTED: 1/29/57

REPORTED ON BOARD THIS DATE WITH/[redacted] THE RECORDS, ACCOUNTS AND EFFECTS INDICATED ON THE REVERSE SIDE HEREOF.

DISCREPANCIES AND REMARKS (List unused T. R.'s and meal tickets)

AUTHENTICATING SIGNATURE (Grade and title)

G. W. HUPPER, CHBOSN W-2, USCG - GRUCOM

10. **GENERAL INSTRUCTIONS**

a. Do NOT discuss or in any manner reveal or communicate the contents of your orders or any other matters of military nature except as may be required and then only to properly identified and responsible officials.
b. Maintain proper conduct and uniform at all times. The INTEMPERATE USE OF ALCOHOLIC BEVERAGES and the conduct usually characteristic of intoxicated men constitute OFFENSES AGAINST COAST GUARD REGULATIONS and will be dealt with accordingly.
c. Cooperate with Shore Patrol and Armed Services Police at all times. Misconduct will be cause for disciplinary action. You are subject to the orders of your superior officers in all branches of the Armed Forces.
d. If the ship to which you are ordered is not in port, report to the nearest receiving station or Coast Guard activity.
e. In case of delay which will prevent reporting at designated time, advise destination officer of facts including estimated time of arrival. If unable to contact destination officer, communicate with the duty officer at the nearest District Office, if practicable, otherwise with nearest Coast Guard Command WITHOUT DELAY. In the event of any delay due to illness, accident, transportation difficulties, etc., notify destination and obtain signed certificate from responsible persons to confirm facts causing delay.

11. **SUPPLEMENTAL INSTRUCTIONS (Authenticating signature must follow each instruction)**

This section will contain all endorsements relating to issuance of Transportation Requests, Meal Tickets, and Travel Allowances advanced.

CERTIFIED TO BE A TRUE COPY

G. W. HUPPER, CHBOSN (W-2), USCG

U. S. COAST GUARD STANDARD TRAVEL ORDER FOR ENLISTED PERSONNEL

TRAVEL ORDER NO. 52465/01201X

DATE 25 JANUARY 1957

...MONTCP (p) MSG 242149-Z (JAN)

...ONS: This form shall be used for individual transfer orders of enlisted personnel. It is not to be used for group orders. LINE UP copies so that data ...red to appropriate spaces and is LEGIBLE. FORWARD ONE COPY TO DESTINATION UNIT. If insufficient space is provided for any entry, make ...that space and continue entry under "Supplemental Instruction" or on attached sheet. Identify continued items and attach additional sheets securely.

...BURPT ISLAND LIFEBOAT STATION | LOCATION PORT CLYDE, MAINE.

TO (Name) WATTS, Alan B. | SERVICE NO. 209-630 | RATE BMC

PROCEED AND REPORT TO

	DESTINATION	STATION	NATURE OF DUTY (Temporary, Permanent, Training, etc.)	APPROX. No. of Days
a.	Intermediate	- - - - - - - - - -		
b.	Intermediate	- - - - - - - - - -		
c.	Ultimate	CG DEPOT SW HARBOR, AS OINC	FASDU:	INDEF

UPON COMPLETION OF THIS TEMPORARY ADDITIONAL DUTY RETURN TO YOUR STATION FOR RESUMPTION OF YOUR REGULAR DUTIES

[X] THIS ORDER CONSTITUTES A PERMANENT CHANGE OF STATION | FROM Port Clyde, Maine.

TO South West Harbor, Maine.

1. a. RECORDS ATTACHED (Check appropriate boxes)

[X] SERVICE [X] HEALTH [ ] PAY [X] PERSONNEL DATA CARD

b. DISPOSITION OF RECORDS NOT ATTACHED: PR RETAINED AT CGGD'5"

2. AUTHORIZED TIME EN ROUTE

TOTAL DAYS AUTHORIZED	LEAVE	PROCEED TIME	COMPENSATORY ABSENCE	TRAVEL TIME
-4-	-0-	-3-	-0-	-1-

REPORT NOT LATER THAN		ADDRESS ON LEAVE
TIME	DATE	
2400	29 JANUARY 1957	

3. TRAVEL NECESSARY TO THE EXECUTION HEREOF IS REQUIRED IN THE PUBLIC INTERESTS AND IS AUTHORIZED. | CHARGEABLE AGAINST TRAVEL ALLOTMENT: DISTRICT | SYMBOL:

4. TRAVEL IS AUTHORIZED OR DIRECTED AS INDICATED BELOW:

[X] a. FOR PERMANENT CHANGE OF STATION ONLY (Including temporary duty en route): TRAVEL BY PRIVATELY OWNED CONVEYANCE IS AUTHORIZED. (See para. BO3A06-4C(2), C. G. Travel Manual.)

[ ] b. FOR TEMPORARY ADDITIONAL DUTY ORDERS ONLY: TRAVEL BY PRIVATELY OWNED CONVEYANCE IS AUTHORIZED AND IS MORE ADVANTAGEOUS TO THE GOVERNMENT.

[ ] c. FOR TEMPORARY ADDITIONAL DUTY ORDERS ONLY: TRAVEL BY PRIVATELY OWNED CONVEYANCE IS AUTHORIZED. (Only authorized when sufficient leave to allow safe driving is granted.)

[ ] d. TRAVEL BY GOVERNMENT TRANSPORTATION AS INDICATED BELOW, IF AVAILABLE, IS DIRECTED, OTHERWISE THE USE OF COMMERCIAL CARRIER IS AUTHORIZED:

[ ] GOVERNMENT VESSEL [ ] GOVERNMENT VEHICLE [ ] GOVERNMENT AIRCRAFT | CLASS PRIORITY CERTIFIED

[ ] e. TRAVEL IS DIRECTED BY COMMERCIAL CARRIER ON TRANSPORTATION REQUESTS, WHEN TRANSPORTATION REQUESTS ARE AVAILABLE, OTHERWISE AT OWN EXPENSE, SUBJECT TO REIMBURSEMENT. | MODE OF TRANSPORTATION (Rail, bus, etc.)

[ ] f. TRAVEL AT OWN EXPENSE IS AUTHORIZED, SUBJECT TO REIMBURSEMENT. (This does not authorize travel by privately owned conveyance.)

5. AUTHENTICATING SIGNATURE (Grade and title): H. N. LITCHFIELD CHBOSN W-2 USCG CGUCOM.

6. DELIVERED AND DEPARTED

TIME	DATE	SIGNATURE (Grade or rate and title)
1400	25 JAN 1957	H. N. LITCHFIELD CHBOSN W-2 USCG CGUCOM.

7. I HAVE READ AND UNDERSTAND THE ABOVE ORDERS AND THE GENERAL AND SUPPLEMENTAL INSTRUCTIONS AND I HAVE RECEIVED THE RECORDS AND ACCOUNTS AS INDICATED. | SIGNATURE OF TRAVELER: Alan B. Watts

STAMP CLASSIFICATION IF ANY

EDITION OF 5-53 IS OBSOLETE

Bond Issued

From compensation of WATTS, Alan B. (209-630) BM1

Monthly allotment in the amount of EIGHTEEN & 75/100 (Words) ($ 18.75 (Figures)) Dollars

PAYABLE TO

Name: Treasurer of the United States

Washington, D. C.

Reason for allotment: (Check one)

Bond a Month [X] Bond a Quarter [ ]

8. **INTERMEDIATE REPORTINGS**

(Indicate in columns provided whether [illegible] Government quarters and/or subsistence were available. See subparagraphs 1150-4 and 5, Joint Travel Regulations)

STATION	REPORTED TIME	REPORTED DATE	DEPARTED TIME	DEPARTED DATE	AUTHENTICATING SIGNATURE, GRADE AND TITLE	QTRS.	SUBS.
a.		RECEIVED F & S DIVISION					
b.		FEB 4 1 02 PM 1957					

9. **REPORTING — ULTIMATE DESTINATION**

(Receiving activity shall return a signed copy of this order to the transferring activity indicating receipt of man and records, or listing discrepancies)

CCGD1 BOSTON 9, MASS.

STATION	HOUR	DATE REPORTED
USCG DEPOT, SOUTHWEST HARBOR, MAINE	2005	1/29/57

REPORTED ON BOARD THIS DATE WITH/~~WITHOUT~~ THE RECORDS, ACCOUNTS AND EFFECTS INDICATED ON THE REVERSE SIDE HEREOF.

DISCREPANCIES AND REMARKS (List unused T. R.'s and meal tickets)

AUTHENTICATING SIGNATURE (Grade and title)

G. W. HUPPER, CHBOSN W-2, USCG - GRUCOM

GENERAL INSTRUCTIONS

10.

a. Do NOT discuss or in any manner reveal or communicate the contents of your orders or any other matters of military nature except as may be required and then only to properly identified and responsible officials.
b. Maintain proper conduct and uniform at all times. The INTEMPERATE USE OF ALCOHOLIC BEVERAGES and the conduct usually characteristic of intoxicated men constitute OFFENSES AGAINST COAST GUARD REGULATIONS and will be dealt with accordingly.
c. Cooperate with Shore Patrol and Armed Services Police at all times. Misconduct will be cause for disciplinary action. You are subject to the orders of your superior officers in all branches of the Armed Forces.
d. If the ship to which you are ordered is not in port, report to the nearest receiving station or Coast Guard activity.
e. In case of delay which will prevent reporting at designated time, advise destination officer of facts including estimated time of arrival. If unable to contact destination officer, communicate with the duty officer at the nearest District Office, if practicable, otherwise with nearest Coast Guard Command WITHOUT DELAY. In the event of any delay due to illness, accident, transportation difficulties, etc., notify destination and obtain signed certificate from responsible persons to confirm facts causing delay.

SUPPLEMENTAL INSTRUCTIONS (Authenticating signature must follow each instruction)

11.

This section will contain all endorsements relating to issuance of Transportation Requests, Meal Tickets, and Travel Allowances advanced.

CERTIFIED TO BE A TRUE COPY

G. W. HUPPER, CHBOSN (W-2), USCG

103

ORIGINAL — TRAVEL SECTION

U. S. COAST GUARD STANDARD TRAVEL ORDER FOR ENLISTED PERSONNEL

TCGD FEB 5 1957

TRAVEL ORDER NO. 52465/01201X

DATE 25 JANUARY 1957

...ONECGD (p) MSG 242149-Z (JAN)

RECEIVED

...S: This form shall be used for individual transfer orders of enlisted personnel. It is not to be used for group orders. LINE UP copies so that data ...ed to appropriate spaces and is LEGIBLE. FORWARD ONE COPY TO DESTINATION UNIT. If insufficient space is provided for any entry, make ...iat space and continue entry under "Supplemental Instruction" or on attached sheet. Identify continued items and attach additional sheets securely.

BURNT ISLAND LIFEBOAT STATION — LOCATION: PORT CLYDE, MAINE.

TO (Name): WATTS, Alan B. — SERVICE NO.: 3 209-630 — RATE: BMC

PROCEED AND REPORT TO

DESTINATION	STATION	NATURE OF DUTY (Temporary, Permanent, Training, etc.)	APPROX. No. of Days
a. Intermediate	- - - - - - - - - -		
b. Intermediate	- - - - - - - - - -		
c. Ultimate	CG DEPOT SW HARBOR, AS OINC	FASDU:	INDEF

UPON COMPLETION OF THIS TEMPORARY ADDITIONAL DUTY RETURN TO YOUR STATION FOR RESUMPTION OF YOUR REGULAR DUTIES

X THIS ORDER CONSTITUTES A PERMANENT CHANGE OF STATION | FROM Port Clyde, Maine. TO South West Harbor, Maine.

1. a. RECORDS ATTACHED (Check appropriate boxes)

X SERVICE	X HEALTH	~~PAY~~	X PERSONNEL DATA CARD

b. DISPOSITION OF RECORDS NOT ATTACHED: PR RETAINED AT C1CGD'f'

2. AUTHORIZED TIME EN ROUTE

TOTAL DAYS AUTHORIZED	LEAVE	PROCEED TIME	COMPENSATORY ABSENCE	TRAVEL TIME
-4-	-0-	-3-	-0-	-1-

REPORT NOT LATER THAN: TIME 2400 — DATE 29 JANUARY 1957

ADDRESS ON LEAVE:

3. TRAVEL NECESSARY TO THE EXECUTION HEREOF IS REQUIRED IN THE PUBLIC INTERESTS AND IS AUTHORIZED. — CHARGEABLE AGAINST TRAVEL ALLOTMENT: DISTRICT — SYMBOL:

4. TRAVEL IS AUTHORIZED OR DIRECTED AS INDICATED BELOW:

X a. FOR PERMANENT CHANGE OF STATION ONLY *(Including temporary duty en route)*: TRAVEL BY PRIVATELY OWNED CONVEYANCE IS AUTHORIZED. *(See para. BO3A06-4C(2), C. G. Travel Manual.)*

~~b. FOR TEMPORARY ADDITIONAL DUTY ORDERS ONLY: TRAVEL BY PRIVATELY OWNED CONVEYANCE IS AUTHORIZED AND~~ IS MORE ADVANTAGEOUS TO THE GOVERNMENT.

~~c. FOR TEMPORARY ADDITIONAL DUTY ORDERS ONLY: TRAVEL BY PRIVATELY OWNED CONVEYANCE IS AUTHORIZED.~~ *(Only authorized when sufficient leave to allow safe driving is granted.)*

~~d. TRAVEL BY GOVERNMENT TRANSPORTATION AS INDICATED BELOW, IF AVAILABLE, IS DIRECTED, OTHERWISE THE USE OF COMMERCIAL CARRIER IS AUTHORIZED.~~

GOVERNMENT VESSEL	GOVERNMENT VEHICLE	GOVERNMENT AIRCRAFT	CLASS PRIORITY CERTIFIED

e. TRAVEL IS DIRECTED BY COMMERCIAL CARRIER ON TRANSPORTATION REQUESTS, WHEN TRANSPORTATION REQUESTS ARE AVAILABLE, OTHERWISE AT OWN EXPENSE, SUBJECT TO REIMBURSEMENT. — MODE OF TRANSPORTATION *(Rail, bus, etc.)*:

~~f. TRAVEL AT OWN EXPENSE IS AUTHORIZED, SUBJECT TO REIMBURSEMENT.~~ *(This does not authorize travel by privately owned conveyance.)*

5. AUTHENTICATING SIGNATURE *(Grade and title)*: H. N. LITCHFIELD CHBOSN W-2 USCG GRUCOM.

6. DELIVERED AND DEPARTED

TIME	DATE	SIGNATURE (Grade or rate and title)
1400	25 JAN 1957	H. N. LITCHFIELD CHBOSN W-2 USCG GRUCOM.

7. I HAVE READ AND UNDERSTAND THE ABOVE ORDERS AND THE GENERAL AND SUPPLEMENTAL INSTRUCTIONS AND I HAVE RECEIVED THE RECORDS AND ACCOUNTS AS INDICATED. — SIGNATURE OF TRAVELER: Alan B. Watts — Alan B. Watts

EDITION OF 5-53 IS OBSOLETE

STAMP CLASSIFICATION IF ANY

8. **INTERMEDIATE REPORTINGS**

(Indicate in columns provided whether Government quarters and/or subsistence were available. See subparagraphs 1150-4 and 5, Joint Travel Regulations)

STATION	REPORTED		DEPARTED		AUTHENTICATING SIGNATURE, GRADE AND TITLE	QTRS.	SUBS.
	TIME	DATE	TIME	DATE			
a.							
b.							

9. **REPORTING — ULTIMATE DESTINATION**

(Receiving activity shall return a signed copy of this order to the transferring activity indicating receipt of man and records, or listing discrepancies)

STATION	HOUR	DATE REPORTED
USCG DEPOT, SOUTHWEST HARBOR, MAINE	2005	1/29/57

REPORTED ON BOARD THIS DATE WITH/WITHOUT THE RECORDS, ACCOUNTS AND EFFECTS INDICATED ON THE REVERSE SIDE HEREOF.

DISCREPANCIES AND REMARKS (List unused T. R.'s and meal tickets)

FILE IN SERVICE RECORD

AUTHENTICATING SIGNATURE (Grade and title) G. W. HUPPER

G. W. HUPPER, CHBOSN W-2, USCG - GRUCOM

10. **GENERAL INSTRUCTIONS**

a. Do NOT discuss or in any manner reveal or communicate the contents of your orders or any other matters of military nature except as may be required and then only to properly identified and responsible officials.
b. Maintain proper conduct and uniform at all times. The INTEMPERATE USE OF ALCOHOLIC BEVERAGES and the conduct usually characteristic of intoxicated men constitute OFFENSES AGAINST COAST GUARD REGULATIONS and will be dealt with accordingly.
c. Cooperate with Shore Patrol and Armed Services Police at all times. Misconduct will be cause for disciplinary action. You are subject to the orders of your superior officers in all branches of the Armed Forces.
d. If the ship to which you are ordered is not in port, report to the nearest receiving station or Coast Guard activity.
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11. **SUPPLEMENTAL INSTRUCTIONS (Authenticating signature must follow each instruction)**

This section will contain all endorsements relating to issuance of Transportation Requests, Meal Tickets, and Travel Allowances advanced.

1st CG District, Boston9, Mass. 2/14/57.

I certify that WATTS, ALAN B. is entitled to mileage allowance in the amountof $6.18 for travel actually performed from Port Clyde, Maine to Southwest Harbor Maine, 103 miles at $.06 per mile and that this allowance has been credited on the Military Pay Record (DD Form 113) of the member indicated herein.

- - - - - - - - - -

A. R. RUTZ, CHSPCK, W-2, USCG
Authorized Certifying Officer

01CGD 3/28/57
Paid comrats for (PRO) used on travel order
52465/01201X 1/26-28/57 (3) days @$1.00
allowance has been credited on (DD Form 113)

A. R. RUTZ, CHSPCK, W-2, USCG, ACO

8. **INTERMEDIATE REPORTINGS**

(Indicate in columns provided whether Mess / Government quarters and/or subsistence were available. See subparagraphs 1150-4 and 5, Joint Travel Regulations)

STATION	REPORTED TIME	REPORTED DATE	DEPARTED TIME	DEPARTED DATE	AUTHENTICATING SIGNATURE, GRADE AND TITLE	QTRS.	SUBS.
a.							
b.							

9. **REPORTING — ULTIMATE DESTINATION**

(Receiving activity shall return a signed copy of this order to the transferring activity indicating receipt of man and records, or listing discrepancies)

STATION: USCG DEPOT, SOUTHWEST HARBOR, MAINE

HOUR: 2005 DATE REPORTED: 1/29/57

REPORTED ON BOARD THIS DATE WITH/~~WITHOUT~~ THE RECORDS, ACCOUNTS AND EFFECTS INDICATED ON THE REVERSE SIDE HEREOF.

DISCREPANCIES AND REMARKS (List unused T. R.'s and meal tickets)

FILE IN SERVICE RECORD

AUTHENTICATING SIGNATURE (Grade and title) G. W. HUPPER, CHBOSN W-2, USCG - GRUCOM

10. **GENERAL INSTRUCTIONS**

a. Do NOT discuss or in any manner reveal or communicate the contents of your orders or any other matters of military nature except as may be required and then only to properly identified and responsible officials.
b. Maintain proper conduct and uniform at all times. The INTEMPERATE USE OF ALCOHOLIC BEVERAGES and the conduct usually characteristic of intoxicated men constitute OFFENSES AGAINST COAST GUARD REGULATIONS and will be dealt with accordingly.
c. Cooperate with Shore Patrol and Armed Services Police at all times. Misconduct will be cause for disciplinary action. You are subject to the orders of your superior officers in all branches of the Armed Forces.
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11. **SUPPLEMENTAL INSTRUCTIONS (Authenticating signature must follow each instruction)**

This section will contain all endorsements relating to issuance of Transportation Requests, Meal Tickets, and Travel Allowances advanced.

1st CG District, Boston9, Mass. 2/14/57.

I certify that WATTS, ALAN B. is entitled to mileage allowance in the amountof $6.18 for travel actually performed from Port Clyde, Maine to Southwest Harbor Maine, 103 miles at $.06 per mile and that this allowance has been credited on the Military Pay Record (DD Form 113) of the member indicated herein.

- - - - - - - - - -

A. R. RUTZ, CHSPCK, W-2, USCG
Authorized Certifying Officer

01CGD 3/28/57

Paid comrats for (PRO) used on travel order
52465/01201X 1/26-28/57 (3) days @$1.00
llowance has been credited on (DD Form 113)

A. R. RUTZ, CHSPCK, W-2, USCG, ACO

RECEIVED

U. S.

U. S. COAST GUARD STANDARD TRAVEL ORDER FOR ENLISTED PERSONNEL

TRAVEL ORDER NO. 52465/012[illegible]

DATE 25 JANUARY 1957

INSTRUCTIONS: This form shall be used for individual transfer orders of enlisted personnel. It is not to be used for group orders. LINE UP copies so that data is transferred to appropriate spaces and is LEGIBLE. FORWARD ONE COPY TO DESTINATION UNIT. If insufficient space is provided for any entry, make note in that space and continue entry under "Supplemental Instruction" or on attached sheet. Identify continued items and attach additional sheets securely.

UNIT: PORTLAND LIFEBOAT STATION

LOCATION: PORT CLYDE, MAINE.

TO (Name): WATTS, Alan B.

SERVICE NO.: 209-630

RATE: BMC

PROCEED AND REPORT TO

DESTINATION	STATION	NATURE OF DUTY (Temporary, Permanent, Training, etc.)	APPROX. No. of Days
a. Intermediate	----------		
b. Intermediate	----------		
c. Ultimate	CG DEPOT SW HARBOR, ME OINC	PASO:	[illegible]

[ ] UPON COMPLETION OF THIS TEMPORARY ADDITIONAL DUTY RETURN TO YOUR STATION FOR RESUMPTION OF YOUR REGULAR DUTIES

[X] THIS ORDER CONSTITUTES A PERMANENT CHANGE OF STATION | FROM Port Clyde, Maine. | TO South West Harbor, Maine.

1. a. RECORDS ATTACHED (Check appropriate boxes)

[X] SERVICE [X] HEALTH [ ] PAY [X] PERSONNEL DATA CARD

b. DISPOSITION OF RECORDS NOT ATTACHED: TO REMAIN AT CGLB #[illegible]

2. AUTHORIZED TIME EN ROUTE

TOTAL DAYS AUTHORIZED	LEAVE	PROCEED TIME	COMPENSATORY ABSENCE	TRAVEL TIME
-1-	-0-	-1-	-0-	-1-

REPORT NOT LATER THAN: TIME 2400 DATE 29 JANUARY 1957

ADDRESS ON LEAVE

3. TRAVEL NECESSARY TO THE EXECUTION HEREOF IS REQUIRED IN THE PUBLIC INTERESTS AND IS AUTHORIZED. CHARGEABLE AGAINST TRAVEL ALLOTMENT: DISTRICT SYMBOL:

4. TRAVEL IS AUTHORIZED OR DIRECTED AS INDICATED BELOW:

[X] a. FOR PERMANENT CHANGE OF STATION ONLY *(Including temporary duty en route)*: TRAVEL BY PRIVATELY OWNED CONVEYANCE IS AUTHORIZED. *(See para. BO3A06-4C(2), C. G. Travel Manual.)*

[ ] b. FOR TEMPORARY ADDITIONAL DUTY ORDERS ONLY: TRAVEL BY PRIVATELY OWNED CONVEYANCE IS AUTHORIZED AND IS MORE ADVANTAGEOUS TO THE GOVERNMENT.

[ ] c. FOR TEMPORARY ADDITIONAL DUTY ORDERS ONLY: TRAVEL BY PRIVATELY OWNED CONVEYANCE IS AUTHORIZED. *(Only authorized when sufficient leave to allow safe driving is granted.)*

[ ] d. TRAVEL BY GOVERNMENT TRANSPORTATION AS INDICATED BELOW, IF AVAILABLE, IS DIRECTED, OTHERWISE THE USE OF COMMERCIAL CARRIER IS AUTHORIZED:

[ ] GOVERNMENT VESSEL [ ] GOVERNMENT VEHICLE [ ] GOVERNMENT AIRCRAFT CLASS PRIORITY CERTIFIED

[ ] e. TRAVEL IS DIRECTED BY COMMERCIAL CARRIER ON TRANSPORTATION REQUESTS, WHEN TRANSPORTATION REQUESTS ARE AVAILABLE, OTHERWISE AT OWN EXPENSE, SUBJECT TO REIMBURSEMENT. MODE OF TRANSPORTATION *(Rail, bus, etc.)*

[ ] f. TRAVEL AT OWN EXPENSE IS AUTHORIZED, SUBJECT TO REIMBURSEMENT. *(This does not authorize travel by privately owned conveyance.)*

5. AUTHENTICATING SIGNATURE *(Grade and title)*: H. H. LITCHFIELD CHOOH USCG CHOOM.

6. DELIVERED AND DEPARTED

TIME	DATE	SIGNATURE *(Grade or rate and title)*
2400	25 JAN 1957	H. H. LITCHFIELD CHOOH USCG CHOOM.

7. I HAVE READ AND UNDERSTAND THE ABOVE ORDERS AND THE GENERAL AND SUPPLEMENTAL INSTRUCTIONS AND I HAVE RECEIVED THE RECORDS AND ACCOUNTS AS INDICATED. SIGNATURE OF TRAVELER: Alan B. Watts

EDITION OF 5-53 IS OBSOLETE

STAMP CLASSIFICATION IF ANY

U. S. COAST GUARD STANDARD TRAVEL ORDER FOR ENLISTED PERSONNEL

TRAVEL ORDER NO. [illegible]

DATE 25 JANUARY 1957

INSTRUCTIONS: This form shall be used for individual transfer orders of enlisted personnel. It is not to be used for group orders. LINE UP copies so that data is transferred to appropriate spaces and is LEGIBLE. FORWARD ONE COPY TO DESTINATION UNIT. If insufficient space is provided for any entry, make note in that space and continue entry under "Supplemental Instruction" or on attached sheet. Identify continued items and attach additional sheets securely.

UNIT	LOCATION
BURNT ISLAND LIFEBOAT STATION	PORT CLYDE, MAINE.
TO (Name) WHITE, Alan P.	**SERVICE NO.** [illegible] **RATE** SN

PROCEED AND REPORT TO

DESTINATION	STATION	NATURE OF DUTY (Temporary, Permanent, Training, etc.)	APPROX. No. of Days
a. Intermediate	----------		
b. Intermediate	----------		
c. Ultimate	CG DEPOT SW HARBOR, ME CINC	PCSU:	[illegible]

☐ UPON COMPLETION OF THIS TEMPORARY ADDITIONAL DUTY RETURN TO YOUR STATION FOR RESUMPTION OF YOUR REGULAR DUTIES

☒ THIS ORDER CONSTITUTES A PERMANENT CHANGE OF STATION | FROM Port Clyde, Maine. TO South West Harbor, Maine.

1. a. RECORDS ATTACHED (Check appropriate boxes)

☒ SERVICE ☒ HEALTH ☐ PAY ☒ PERSONNEL DATA CARD

b. DISPOSITION OF RECORDS NOT ATTACHED: TO BE MAILED AT CLOSE'S

2. AUTHORIZED TIME EN ROUTE

TOTAL DAYS AUTHORIZED	LEAVE	PROCEED TIME	COMPENSATORY ABSENCE	TRAVEL TIME
-0-	-0-	-0-	-0-	-0-

REPORT NOT LATER THAN		ADDRESS ON LEAVE
TIME	DATE	
2400	29 JANUARY 1957	

3. TRAVEL NECESSARY TO THE EXECUTION HEREOF IS REQUIRED IN THE PUBLIC INTERESTS AND IS AUTHORIZED. | CHARGEABLE AGAINST TRAVEL ALLOTMENT: DISTRICT | SYMBOL

4. TRAVEL IS AUTHORIZED OR DIRECTED AS INDICATED BELOW:

☒ a. FOR PERMANENT CHANGE OF STATION ONLY *(Including temporary duty en route)*: TRAVEL BY PRIVATELY OWNED CONVEYANCE IS AUTHORIZED. *(See para. BO3A06-4C(2), C. G. Travel Manual.)*

☐ b. FOR TEMPORARY ADDITIONAL DUTY ORDERS ONLY: TRAVEL BY PRIVATELY OWNED CONVEYANCE IS AUTHORIZED AND IS MORE ADVANTAGEOUS TO THE GOVERNMENT.

☐ c. FOR TEMPORARY ADDITIONAL DUTY ORDERS ONLY: TRAVEL BY PRIVATELY OWNED CONVEYANCE IS AUTHORIZED. *(Only authorized when sufficient leave to allow safe driving is granted.)*

☐ d. TRAVEL BY GOVERNMENT TRANSPORTATION AS INDICATED BELOW, IF AVAILABLE, IS DIRECTED, OTHERWISE THE USE OF COMMERCIAL CARRIER IS AUTHORIZED:

☐ GOVERNMENT VESSEL ☐ GOVERNMENT VEHICLE ☐ GOVERNMENT AIRCRAFT | CLASS PRIORITY CERTIFIED

☐ e. TRAVEL IS DIRECTED BY COMMERCIAL CARRIER ON TRANSPORTATION REQUESTS, WHEN TRANSPORTATION REQUESTS ARE AVAILABLE, OTHERWISE AT OWN EXPENSE, SUBJECT TO REIMBURSEMENT. | MODE OF TRANSPORTATION (Rail, bus, etc.)

☐ f. TRAVEL AT OWN EXPENSE IS AUTHORIZED, SUBJECT TO REIMBURSEMENT. *(This does not authorize travel by privately owned conveyance.)*

5. AUTHENTICATING SIGNATURE *(Grade and title)* [illegible]

6. DELIVERED AND DEPARTED

TIME	DATE	SIGNATURE (Grade or rate and title)
2400	25 JAN 1957	[illegible]

7. I HAVE READ AND UNDERSTAND THE ABOVE ORDERS AND THE GENERAL AND SUPPLEMENTAL INSTRUCTIONS AND I HAVE RECEIVED THE RECORDS AND ACCOUNTS AS INDICATED. | SIGNATURE OF TRAVELER: Alan P. White

EDITION OF 5-53 IS OBSOLETE | STAMP CLASSIFICATION IF ANY

U. S. COAST GUARD STANDARD TRAVEL ORDER FOR ENLISTED PERSONNEL

TRAVEL ORDER NO. [redacted]

DATE [redacted]

INSTRUCTIONS: This form shall be used for individual transfer orders of enlisted personnel. It is not to be used for group orders. LINE UP copies so that data is transferred to appropriate spaces and is LEGIBLE. FORWARD ONE COPY TO DESTINATION UNIT. If insufficient space is provided for any entry, make note in that space and continue entry under "Supplemental Instruction" or on attached sheet. Identify continued items and attach additional sheets securely.

UNIT	LOCATION
[redacted]	[redacted]

TO (Name)	SERVICE NO.	RATE
[redacted]	[redacted]	[redacted]

PROCEED AND REPORT TO

DESTINATION	STATION	NATURE OF DUTY (Temporary, Permanent, Training, etc.)	APPROX. No. of Days
a. Intermediate	----------		
b. Intermediate	----------		
c. Ultimate	[redacted]	[redacted]	[redacted]

[ ] UPON COMPLETION OF THIS TEMPORARY ADDITIONAL DUTY RETURN TO YOUR STATION FOR RESUMPTION OF YOUR REGULAR DUTIES

[X] THIS ORDER CONSTITUTES A PERMANENT CHANGE OF STATION | FROM Fort Clyde, Maine.

TO South East Harbor, Maine.

1. a. RECORDS ATTACHED *(Check appropriate boxes)*

[X] SERVICE [X] HEALTH [ ] PAY [X] PERSONNEL DATA CARD

b. DISPOSITION OF RECORDS NOT ATTACHED

[redacted]

2. AUTHORIZED TIME EN ROUTE

TOTAL DAYS AUTHORIZED	LEAVE	PROCEED TIME	COMPENSATORY ABSENCE	TRAVEL TIME
-0-	-0-	-0-	-0-	-0-

REPORT NOT LATER THAN		ADDRESS ON LEAVE
TIME	DATE	
2400	29 JANUARY 1957	

3. TRAVEL NECESSARY TO THE EXECUTION HEREOF IS REQUIRED IN THE PUBLIC INTERESTS AND IS AUTHORIZED. | CHARGEABLE AGAINST TRAVEL ALLOTMENT [redacted] | SYMBOL

4. TRAVEL IS AUTHORIZED OR DIRECTED AS INDICATED BELOW:

[X] a. FOR PERMANENT CHANGE OF STATION ONLY *(Including temporary duty en route)*: TRAVEL BY PRIVATELY OWNED CONVEYANCE IS AUTHORIZED. *(See para. BO3A06-4C(2), C. G. Travel Manual.)*

[ ] b. FOR TEMPORARY ADDITIONAL DUTY ORDERS ONLY: TRAVEL BY PRIVATELY OWNED CONVEYANCE IS AUTHORIZED AND IS MORE ADVANTAGEOUS TO THE GOVERNMENT.

[ ] c. FOR TEMPORARY ADDITIONAL DUTY ORDERS ONLY: TRAVEL BY PRIVATELY OWNED CONVEYANCE IS AUTHORIZED. *(Only authorized when sufficient leave to allow safe driving is granted.)*

[ ] d. TRAVEL BY GOVERNMENT TRANSPORTATION AS INDICATED BELOW, IF AVAILABLE, IS DIRECTED, OTHERWISE THE USE OF COMMERCIAL CARRIER IS AUTHORIZED:

[ ] GOVERNMENT VESSEL [ ] GOVERNMENT VEHICLE [ ] GOVERNMENT AIRCRAFT | CLASS PRIORITY CERTIFIED

[ ] e. TRAVEL IS DIRECTED BY COMMERCIAL CARRIER ON TRANSPORTATION REQUESTS, WHEN TRANSPORTATION REQUESTS ARE AVAILABLE, OTHERWISE AT OWN EXPENSE, SUBJECT TO REIMBURSEMENT. | MODE OF TRANSPORTATION *(Rail, bus, etc.)*

[ ] f. TRAVEL AT OWN EXPENSE IS AUTHORIZED, SUBJECT TO REIMBURSEMENT. *(This does not authorize travel by privately owned conveyance.)*

5. AUTHENTICATING SIGNATURE *(Grade and title)* [redacted]

6. DELIVERED AND DEPARTED

TIME	DATE	SIGNATURE *(Grade or rate and title)*
2400	29 JAN 1957	[redacted]

7. I HAVE READ AND UNDERSTAND THE ABOVE ORDERS AND THE GENERAL AND SUPPLEMENTAL INSTRUCTIONS AND I HAVE RECEIVED THE RECORDS AND ACCOUNTS AS INDICATED. | SIGNATURE OF TRAVELER [redacted]

EDITION OF 5-53 IS OBSOLETE | STAMP CLASSIFICATION IF ANY

U. S. COAST GUARD STANDARD TRAVEL ORDER FOR ENLISTED PERSONNEL

TRAVEL ORDER NO. [illegible]

DATE 25 JANUARY 1957

[illegible] CONVERTED (p) NTC 242249-6 (JAN)

INSTRUCTIONS: This form shall be used for individual transfer orders of enlisted personnel. It is not to be used for group orders. LINE UP copies so that data is transferred to appropriate spaces and is LEGIBLE. FORWARD ONE COPY TO DESTINATION UNIT. If insufficient space is provided for any entry, make note in that space and continue entry under "Supplemental Instruction" or on attached sheet. Identify continued items and attach additional sheets securely.

UNIT	LOCATION	
[illegible]	[illegible]	
TO (Name) WATTS, Alan B.	SERVICE NO. [illegible] 209-630	RATE [illegible]

PROCEED AND REPORT TO

DESTINATION	STATION	NATURE OF DUTY (Temporary, Permanent, Training, etc.)	APPROX. No. of Days
a. Intermediate	----------		
b. Intermediate	----------		
c. Ultimate	CG DEPOT SU HARBOR, ME CINC	PERM;	[illegible]

	UPON COMPLETION OF THIS TEMPORARY ADDITIONAL DUTY RETURN TO YOUR STATION FOR RESUMPTION OF YOUR REGULAR DUTIES
X	THIS ORDER CONSTITUTES A PERMANENT CHANGE OF STATION FROM Port Clyde, Maine.
	TO South West Harbor, Maine.

1. a. RECORDS ATTACHED (Check appropriate boxes)

X	SERVICE	X	HEALTH		PAY	X	PERSONNEL DATA CARD

b. DISPOSITION OF RECORDS NOT ATTACHED: [illegible] RETAINED AT CGCD'2'

2. AUTHORIZED TIME EN ROUTE

TOTAL DAYS AUTHORIZED	LEAVE	PROCEED TIME	COMPENSATORY ABSENCE	TRAVEL TIME
-0-	-0-	-0-	-0-	-0-

REPORT NOT LATER THAN		ADDRESS ON LEAVE
TIME	DATE	
2400	29 JANUARY 1957	

3. TRAVEL NECESSARY TO THE EXECUTION HEREOF IS REQUIRED IN THE PUBLIC INTERESTS AND IS AUTHORIZED.	CHARGEABLE AGAINST TRAVEL ALLOTMENT	SYMBOL
	[illegible] DISTRICT	

4. TRAVEL IS AUTHORIZED OR DIRECTED AS INDICATED BELOW:

X	a. FOR PERMANENT CHANGE OF STATION ONLY (Including temporary duty en route): TRAVEL BY PRIVATELY OWNED CONVEYANCE IS AUTHORIZED. (See para. BO3A06-4C(2), C. G. Travel Manual.)
	b. FOR TEMPORARY ADDITIONAL DUTY ORDERS ONLY: TRAVEL BY PRIVATELY OWNED CONVEYANCE IS AUTHORIZED AND IS MORE ADVANTAGEOUS TO THE GOVERNMENT.
	c. FOR TEMPORARY ADDITIONAL DUTY ORDERS ONLY: TRAVEL BY PRIVATELY OWNED CONVEYANCE IS AUTHORIZED. (Only authorized when sufficient leave to allow safe driving is granted.)
	d. TRAVEL BY GOVERNMENT TRANSPORTATION AS INDICATED BELOW, IF AVAILABLE, IS DIRECTED, OTHERWISE THE USE OF COMMERCIAL CARRIER IS AUTHORIZED:

	GOVERNMENT VESSEL		GOVERNMENT VEHICLE		GOVERNMENT AIRCRAFT	CLASS PRIORITY CERTIFIED

	e. TRAVEL IS DIRECTED BY COMMERCIAL CARRIER ON TRANSPORTATION REQUESTS, WHEN TRANSPORTATION REQUESTS ARE AVAILABLE, OTHERWISE AT OWN EXPENSE, SUBJECT TO REIMBURSEMENT.	MODE OF TRANSPORTATION (Rail, bus, etc.)
	f. TRAVEL AT OWN EXPENSE IS AUTHORIZED, SUBJECT TO REIMBURSEMENT. (This does not authorize travel by privately owned conveyance.)	

5. AUTHENTICATING SIGNATURE (Grade and title) [illegible] U. S. [illegible] COAST GUARD CGCD'2

6. DELIVERED AND DEPARTED

TIME	DATE	SIGNATURE (Grade or rate and title)
2400	29 JAN 1957	[illegible] U. S. [illegible] COAST GUARD CGCD'2

7. I HAVE READ AND UNDERSTAND THE ABOVE ORDERS AND THE GENERAL AND SUPPLEMENTAL INSTRUCTIONS AND I HAVE RECEIVED THE RECORDS AND ACCOUNTS AS INDICATED.	SIGNATURE OF TRAVELER Alan B. Watts

EDITION OF 5-53 IS OBSOLETE

STAMP CLASSIFICATION IF ANY

2528B

APPLICATION FOR SAVINGS BOND ALLOTMENT

From compensation of
WATTS, Alan B. (209-630) BM1

Monthly allotment in the amount of
EIGHTEEN & 75/100 (Words) ($18.75 (Figures)) Dollars

PAYABLE TO

Name: Treasurer of the United States
Address: Washington, D. C.
First payment: Month October, 19 53

Reason for allotment: (Check one)
Bond a Month X Bond a Quarter ____

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

Alan B. Watts

Rank or rating BM1 U. S. C. G.

30 September, 1 19 53

Approved, allotment granted.

M. O. [illegible], CDR, USCG

Commanding Group Rockland, Maine

Commander ____ District.

Witnessed and registered 6 October, 19 53

ICGD

Authorized Certifying Officer, L.A. SEPPALA, CPCLK, USCG.

INSCRIPTION ON BOND (Leave blank)

ACKNOWLEDGMENT

FOR INFORMATION OF AUTHORIZED CERTIFYING OFFICER

This allotment has been placed in effect.

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

GED

TREASURY DEPARTMENT, U. S. COAST GUARD, CG-2528B (Rev. 7-48) DO NOT FOLD - MAIL FLAT ☆ G. P. O.: 1948 - 798449

be returned to the [illegible]

G. W. Nelson

G. W. NELSON

Encl: (1) Educational Certificate

Copy to:
Commandant (PE)

CGI-300 (Rev. 9-54)

It is requested that, beginning October, 1953, monthly ~~[illegible]~~ CATs of $ 18.75
be made so that United States Savings Bonds of $ 25.00, denomination may be issued in the name of

Alan (First name, in full) B. (Middle name or initial if any) WATTS (Last name)

Address High Street, Machias, Maine

You may name either a co-owner or a beneficiary, but not both.

Co-owner
XMr.
Mrs.
XMiss Louise (Given name, in full) D. (Middle name or initial) WATTS (Last name)

Address High Street, Machias, Maine

Beneficiary
Mr.
Mrs.
Miss (Given name, in full) (Middle name or initial) (Last name)

Address

Do you want your bonds held without charge in safekeeping at Treasury Department?
(See article 260, Pay and Supply Instructions, for places to which bonds may be mailed).

Yes ____ No XX

Mail bonds to Alan B. Watts, High Street, Machias, Maine
(Name and Address--Not to be filled in if bonds are to be held for safekeeping)

Signature of purchaser Alan B. Watts (Name) BM1 (Rank or Rating) Goose Rocks L/S (Unit)

UNITED STATES COAST GUARD

ADDRESS REPLY TO:
DIRECTOR
U. S. COAST GUARD INSTITUTE
GROTON, CONNECTICUT

27 January 1955

FILE: 1L118

From: Director
To: WATTS, Alan B. (209-630)BMC
CG Group - Rockland
% U.S. Coast Guard Moorings
Rockland, Maine

Subj: Educational certificate; forwarding of

1. The CG Institute congratulates you on your satisfactory completion of the Institute BMC-1 course with a grade of 91 %.

2. A copy of this letter should be placed in your file and appropriate notation made in your service record and continuous service certificate.

3. It is requested that all textbooks which were issued with your course be returned to the CG Institute without delay.

G. W. NELSON

Encl: (1) Educational Certificate

Copy to:
Commandant (PE)

CGI-300 (Rev. 9-54)

209-630 TEST MADE IN ACCORDANCE WITH THE PORTO - CLINIC

NAME WATTS, DIAN - AGE 32 SEX M- DATE 7-2-54

WEARS GLASSES YES___ NO L WORE GLASSES FOR TEST YES___ NO L

The car and the road are just as safe or unsafe as the driver makes them. The driver cannot correct faults which he does not know he has. Psychophysical testing will detect - with out risk of penalty a drivers physical limitations.

It should be remembered, however, that even though you have a good or perfect score on these tests, you are not to assume expertness as a driver Proper driver training and experience plus correct driving habits and attitudes are also essential to safe driving.

EXPLAIN FILD OF VISION

VISUAL ACUITY
Left Eye.....20/20
Right Eye.....20/20
Both Eyes.....20/20
Minimum Standard 20/40
Driver should see an eye specialist: YES ☐ NO ☒

TRAFFIC COLOR RECOGNITION
Normal ☒
Green color Blind ☐
Amber color Blind ☐

DEPTH PERCEPTION
First Trial.....4½ inches
Second Trial.....4½ inches
Third Trial.....4½ inches
Total.....inches
Minimum Standard: Three trial total of 3 inches
Driver needs to compensate for his distance judgment.
YES ☐ NO ☒

FIID OF VISION
Left Eye-First Trial 90 Deg.
Left Eye-Second Trial 90 Deg.
Left Eye-Average 90 Deg.
Right Eye First Trial 90 Deg.
Right Eye-Second trial 90 Deg.
Right Eye-Average 90 Deg.
Both Eyes-Total 180 Deg.
Minimum Standard: 75 degrees each eye. One eyed person; Total field of 135 degrees.
Driver needs to compensate for side vision: YES ☐ NO ☐

REACTION TIME
First Trial.....35/100s of second
Second Trial.....34/100s of second
Third Trial.....35/100s of second
Total.....104/100s of second
Average.....34.6/100s of second
Minimum Standard; 36 to 41/100s of a second
Driver Should compensate for slow reaction time. YES ☐ NO ☒

Hearing.....Left 15/15
Right 15/15

James E. Michael HM2

UNITED STATES COAST GUARD

ADDRESS REPLY TO:
DIRECTOR
U. S. COAST GUARD INSTITUTE
GROTON, CONNECTICUT

Date: 10-6-53
FILE: 14118

From: Director
To: Educational Officer, CG GROUP ROCKLAND, MAINE
CG MOORINGS
ROCKLAND, MAINE

Subj: CG Institute correspondence course receipt

1. Enclosed herewith is the course requested by the below named man. It should be clearly understood that this course is only loaned to the student and must be returned in its entirety immediately following graduation or disenrollment and that INSTITUTE TEXTS AND PUBLICATIONS CANNOT BE PURCHASED!

2. Listed on the reverse hereof are the texts charged to the student. It is requested that the list of texts be verified and the original of this letter with properly completed and signed indorsement be returned to the Institute. The second copy of this receipt should be filed in the student's service record for return with his texts following graduation or disenrollment.

3. The prices noted for each of the texts comprising this course are only for the purpose of determining the student's liability to the government for their negligent loss or damage while in his custody. Where loss or damage of such a nature has occurred, the unit's copy of this receipt should be returned to the Institute accompanied by a check or money order payable to the Treasurer of the United States in an amount equal to the indicated value of the texts involved. Where loss or damage has occurred and negligence is not indicated, the completion of the appropriate entry provided on the reverse will serve to clear the student's record.

K. P. Maley
K. P. MALEY

Ind-1

9 November, 1953
(date)

From: WATTS, Alan B. (209-630) 14118 (enrollment no.)
To: Director
Via: Educational Officer

Receipt for the texts listed on the reverse hereof is hereby acknowledged.

Alan B. Watts
Alan B. Watts
(signature of student)

- -

NOTE: Use the indorsement provided on the reverse when returning this student's texts and when forwarding reimbursement or explanation of their loss.

UNITED STATES COAST GUARD

ADDRESS REPLY TO:
DIRECTOR
U. S. COAST GUARD INSTITUTE
GROTON, CONNECTICUT

Date:
FILE: 10-6-53
14118

From: Director
To: Educational Officer, CG GROUP ROCKLAND, MAINE
CG MOORINGS
ROCKLAND, MAINE

Subj: CG Institute correspondence course receipt

1. Enclosed herewith is the course requested by the below named man. It should be clearly understood that this course is only loaned to the student and must be returned in its entirety immediately following graduation or disenrollment and that INSTITUTE TEXTS AND PUBLICATIONS CANNOT BE PURCHASED!

2. Listed on the reverse hereof are the texts charged to the student. It is requested that the list of texts be verified and the original of this letter with properly completed and signed indorsement be returned to the Institute. The second copy of this receipt should be filed in the student's service record for return with his texts following graduation or disenrollment.

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K. P. Maley
K. P. MALEY

Ind-1

9 November, 1953

14118 (enrollment no.)

From: Alan B. (209-680)
To: Director
Via: Educational Officer

Receipt for the texts listed on the reverse hereof is hereby acknowledged.

Alan B. Watts (signature of student)

- -

NOTE: Use the indorsement provided on the reverse when returning this student's texts and when forwarding reimbursement or explanation of their loss.

UNITED STATES COAST GUARD
Washington 25, D. C.

15 April 1958

FILE

FROM: COMMANDANT
TO: WATTS, Alan B. (209-630) BMC, USCG, Retired
15 High Street, Machias, Maine
SUBJ: RETIRED IDENTIFICATION CARD; COMPLETION OF

1. THERE IS ENCLOSED HEREWITH UNIFORMED SERVICES IDENTIFICATION AND PRIVILEGE CARD NO. 078, 949 THAT WILL BE ISSUED TO YOU.

2. PLACE YOUR SIGNATURE IN THE SPACE PROVIDED ON THE EDGE OF THE CARD (ITEM 13). PUT NO OTHER DATA ON THE CARD ITSELF. IT IS ALSO REQUESTED THAT YOU FORWARD TO HEADQUARTERS A PHOTOGRAPH OF YOURSELF 1" x 1 5/16" IN SIZE, FULL FACE, UNCOVERED, PLAIN WHITE BACKGROUND.

A E McLane
A. E. McLANE
BY DIRECTION

ENCLOSURES: (1) IDENTIFICATION CARD
(2) FRANKED ENVELOPE

IND-1

FROM: Alan B. Watts
TO: COMMANDANT

CARD RETURNED FOR VALIDATING AND COMPLETION.

X Alan B. Watts
SIGNATURE

IND-2

10 June 1958

FROM: COMMANDANT
TO: WATTS, Alan B. (209-630) BMC, USCG, Retired

YOUR COMPLETED IDENTIFICATION CARD BEARING THE NUMBER INDICATED IN PARAGRAPH 1 OF BASIC LETTER IS ENCLOSED. - ACKNOWLEDGE RECEIPT THEREOF BY SIGNING IND-3 AND RETURNING THIS LETTER TO THE COMMANDANT TOGETHER WITH THE RETIRED IDENTIFICATION CARD PREVIOUSLY ISSUED YOU. (NOTE: IN THE EVENT THE OLD CARD IS NOT RETURNED A SATISFACTORY WRITTEN EXPLANATION MUST BE FURNISHED AS TO WHY IT CANNOT BE RETURNED.)

A E McLane
A. E. McLANE
BY DIRECTION

ENCLOSURES: (1) IDENTIFICATION CARD
(2) FRANKED ENVELOPE

IND-3

FROM: X Watts, Alan B. (209-630) BMC U.S.C.G. retired
TO: COMMANDANT

RECEIPT IS ACKNOWLEDGED OF THE UNIFORMED SERVICES IDENTIFICATION AND PRIVILEGE CARD REFERRED TO IN BASIC CORRESPONDENCE. MY OLD RETIRED IDENTIFICATION CARD IS RETURNED HEREWITH /OR/ SEE EXPLANATION ATTACHED. (STRIKE ONE)

X Alan B. Watts
SIGNATURE

PC-74

COAST GUARD
CGHQ-3505 (1-54)

APPLICATION FOR RETIRED ARMED [illegible]

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

DATE
1 APRIL 1958

IDENTIFICATION DATA

INSTRUCTIONS

The following identification data must be provided to form the basis for issuance of an Armed Forces Identification Card endorsed "RETIRED." In this connection a suitable photograph (35MM or not larger than 1" x 1-5/16") will be enclosed.

NAME (Last, First, Middle)	SERVICE NO.	GRADE OR RATE
WATTS, ALAN B.	209-630	BMC
DATE OF BIRTH (Month, Day, and Year)	WEIGHT	HEIGHT
1/1/17	190	FEET: 5 / INCHES: 11
COLOR HAIR: BROWN	COLOR EYES: BLUE	BLOOD TYPE: "A"
ADDRESS: 15 High St., Machias, Maine	SIGNATURE: ALAN B. WATTS Alan B Watts	

4947 Treasury CGHQ Wash., D.C.

FIRST ENDORSEMENT on GruCom, Rockland ltr dtd 3 October 1955, GV/MM/P17-2

p
7 October 1955
MM/P17-2

From: Commander, First Coast Guard District
To: Commandant (PE)

Subj: WATTS, Alan B. (209-630) BMC(P)(AN); recommendation for issuance of permanent appointment for BMC

1. Forwarded, recommending approval.

P. B. MAVOR
By direction

1955 OCT 10 13 59
PEA-A

O.K.
perm appt
jm

Rockland, Maine.

OCT 5 10 92 AM 1955

From: Commander, Coast Guard Group Rockland, Maine.
To: Commandant (PE)
Via: Commander, First Coast Guard District (p)

Subj: WATTS, Alan B. (209-630) BMC(P)(AN); recommendation for issuance of permanent appointment for Boatswain's Mate Chief

Ref: (a) CG-207 Personnel Manual (5-C-30)

1. WATTS was advanced to the rating of Boatswains Mate Chief (Provisional) effective 1 October 1954, to rank as such from that date.

2. Data concerning WATTS as required referance (a) is respectfully submitted as follows.

3. WATTS is a leading person of strong character.

4. WATTS is capable of directing the work of a force under him and planning details for its best employment.

5. WATTS is capable of maintaining discipline.

6. WATTS has had no mark below 3.8 in proficiency in rate or below 4.0 in conduct during the year immediately preceding.

7. WATTS is strongly recommended for permanent appointment.

8. This officer's recommendation is based on personal knowledge of WATTS'S ability and character over a period of years. Subject man's appearance is exemplary and serves as a strong influence upon others. WATTS is in all respects an outstanding small boatman.

M. O. WRIGHT

Rockland, Maine.

From: Commander, Coast Guard Group Rockland, Maine.
To: Commandant (PE)
Via: Commander, First Coast Guard District (p)

Subj: WATTS, Alan B. (209-630) BMC(P)(AN); recommendation for issuance of permanent appointment for Boatswain's Mate Chief

Ref: (a) CG-207 Personnel Manual (5-C-30)

1. WATTS was advanced to the rating of Boatswains Mate Chief (Provisional) effective 1 October 1954, to rank as such from that date.

2. Data concerning WATTS as required referance (a) is respectfully submitted as follows.

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4. WATTS is capable of directing the work of a force under him and planning details for its best employment.

5. WATTS is capable of maintaining discipline.

6. WATTS has had no mark below 3.8 in proficiency in rate or below 4.0 in conduct during the year immediately preceding.

7. WATTS is strongly recommended for permanent appointment.

8. This officer's recommendation is based on personal knowledge of WATTS'S ability and character over a period of years. Subject man's appearance is exemplary and serves as a strong influence upon others. WATTS is in all respects an outstanding small boatman.

M. O. WRIGHT

PE-1
14 October 1955
MM

From: Commandant
To: Commander, First CG District (p)

Subj: Personnel; permanent appointment

1. The provisional rates of the below named men are hereby made permanent, effective 16 October, 1955, with seniority in rate from the dates indicated, provided their conduct and performance of duty since date of recommendation have been satisfactory. Order of seniority in rate of men advanced on the same day is indicated after their names. Certificates of Appointment are enclosed for delivery to the below named men. If permanent appointments are not justified, the enclosed certificates will be returned to the Commandant (PE) for cancellation.

BURROUGHS, William T. (271-870) BMC(P) 10-1-54	No. 17
MERCHANT, Robert C. (209-614) BMC(P) 10-1-54	No. 31
POULIN, Maurice C. (239-431) BMC(P) 10-1-54	No. 14
WATTS, Alan B. (209-630) BMC(P)(AN) 10-1-54	No. 32

2. Make necessary entries in service records and on daily diary showing permanent appointments, citing this letter as the authority therefor.

R. E. MORELL
By direction

Encl: Certificates of Appointment (4)

PE-75

H.H.ISTOCK:JHC:mo ret 3-13

15 September, 1954
(Date)

WATTS, Alan B.	209-630	BML1
(Name)	(Service Number)	(Rate)

Record prior to date indicated above has been screened for purposes of advancement to CPO, and he was found to be morally qualified for such advancement.

(Signature)

5117 Treasury CGHQ Wash., D.C.

p
4 November 1953
MM/P17-2

1953 NOV 6 15 05

SECOND ENDORSEMENT on WATTS' ltr P17 of 7 November 1953

From: Commander, First Coast Guard District
To: Commandant (PE)

Subj: Examination for Chief Boatswain's Mate; request for

1. Forwarded.

E. B. HALL
By direction

p
4 November 1953
MM/P17-2

SECOND ENDORSEMENT on WATTS! ltr P17 of 7 November 1953

From: Commander, First Coast Guard District
To: Commandant (PE)

Subj: Examination for Chief Boatswain's Mate; request for

1. Forwarded.

E. B. HALL
By direction

UNITED STATES COAST GUARD

p
4 November 1953
P01/P17-2

SECOND ENDORSEMENT on WATTS' ltr P17 of 7 November 1953

From: Commander, First Coast Guard District
To: Commandant (PE)

Subj: Examination for Chief Boatswain's Mate; request for

1. Forwarded.

E. B. HALL
By direction

UNITED STATES COAST GUARD

RESS REPLY TO:
ommander, CG Group
Rockland, Maine

RECEIVED
PERSONNEL DIVISION
NOV 3 10 52 AM 1953

7 November, 1953
FILE: P17

From: WATTS, Alan B. (209-640) BM1l(AN), USCG
To: Commandant (PE)
Via: (1) Commander, Coast Guard Group Rockland, Maine
(2) Commander, First Coast Guard District (p)

CCGD
BOSTON 9, MASS.

Subj: Examination for Chief Boatswain's Mate; request for

Ref: (a) Personnel Circular 23-53

1. In accordance with reference (a), it is requested that I be allowed to participate in the forthcoming examination for Boatswain's Mate Chief, to be held during the first week of April, 1954.

2. If it is the desire of Headquarters, I shall change my rate from BM1l(AN) to BM1(AN).

Alan B. Watts
Alan B. Watts

- -

7 November, 1953

FIRST ENDORSEMENT on WATTS ltr dtd 7 November, 1953, file P17

From: Commander, Coast Guard Group Rockland, Maine
To: Commandant (PE)
Via: (1) Commander, First Coast Guard District (p)

1. It is strongly recommended that WATTS be allowed to take subject examination.

2. WATTS is a petty officer of outstanding ability and fully capable of performing the duties of his specialty ashore or afloat.

3. Particular attention to duty and outstanding performance of same is a trait of WATTS.

M. O. Wright
M. O. WRIGHT

Commander, CG Group
Rockland, Maine

7 November, 1953
P17

From: WATTS, Alan B. (209-640) BML1(AN), USCG
To: Commandant (PE)
Via: (1) Commander, Coast Guard Group Rockland, Maine
(2) Commander, First Coast Guard District (p)

Subj: Examination for Chief Boatswain's Mate; request for

Ref: (a) Personnel Circular 23-53

1. In accordance with reference (a), it is requested that I be allowed to participate in the forthcoming examination for Boatswain's Mate Chief, to be held during the first week of April, 1954.

2. If it is the desire of Headquarters, I shall change my rate from BML1(AN) to BM1(AN).

Alan B. Watts

---

7 November, 1953

FIRST ENDORSEMENT on WATTS ltr dtd 7 November, 1953, file P17

From: Commander, Coast Guard Group Rockland, Maine
To: Commandant (PE)
Via: (1) Commander, First Coast Guard District (p)

1. It is strongly recommended that WATTS be allowed to take subject examination.

2. WATTS is a petty officer of outstanding ability and fully capable of performing the duties of his specialty ashore or afloat.

3. Particular attention to duty and outstanding performance of same is a trait of WATTS.

M. O. WRIGHT

PE-1
27 October 1953
MM

1953 OCT 27 15 09

From: Commandant
To: Commander, CG GROUP, Rockland, Maine
Via: Commander, First CG District (p)

PEA-A

Subj: WATTS, Alan B. (209-630) BML1 (AN); forthcoming examination for chief boatswain's mate

1. In view of the recommendation submitted and in view of subject man's qualifications, he will be permitted to take the forthcoming examination for chief boatswain's mate which will be held during the month of April 1954. However, WATTS should be advised that if he successfully passes the examination and becomes eligible for advancement to BMC, it will be necessary to change rating to BML. At that time he will be required to submit a statement that he is aware that the BML rating will not be reassigned at any future date and that he desires assignment to a general duty billet.

K. O. A. ZITTEL
By direction

PE-64

CLABORN:JHC:acd - 338
ret to 3-13

2528B

APPLICATION FOR SAVINGS BOND ALLOTMENT

FILE

From compensation of

WATTS, Alan B. (209-630) BM1

Monthly allotment in the amount of

EIGHTEEN & 75/100 ($18.75) Dollars
(Words) (Figures)

PAYABLE TO

Name: Treasurer of the United States
Address: Washington, D. C.

Reason for allotment: (Check one)
Bond a Month X Bond a Quarter

First payment: Month October, 1953

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

Alan B. Watts

Rank or rating BM1 U. S. C. G.

30 September, 1953
Approved, allotment granted.

M. O. WRIGHT, CHBOSN, USCG
Commanding Group Rockland, Maine
Commander District.

Witnessed and registered 6 October, 53

Authorized Certifying Officer, L.A. SEPPALA, CPCLK, USCG.

INSCRIPTION ON BOND (Leave blank)

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

G E D

TREASURY DEPARTMENT, U. S. COAST GUARD, CG-2528B (Rev. 7-48) DO NOT FOLD - MAIL FLAT ☆ G. P. O.: 1948 - 799449

It is requested that, beginning 1 October, 1953, monthly deductions of $ 18.75 be made so that United States Savings Bonds of $ 25.00, denomination may be issued in the name of

Alan (First name, in full) B. (Middle name or initial if any) WATTS (Last name)

Address High Street, Machias, Maine

You may name either a co-owner or a beneficiary, but not both.

Co-owner
Mr X
Mrs.
Miss Louise (Given name, in full) D. (Middle name or initial) WATTS (Last name)

Address High Street, Machias, Maine

Beneficiary
Mr.
Mrs.
Miss (Given name, in full) (Middle name or initial) (Last name)

Address

Do you want your bonds held without charge in safekeeping at Treasury Department? Yes ____ No XX

(See article 260, Pay and Supply Instructions, for places to which bonds may be mailed).

Mail bonds to Alan B. Watts, High Street, Machias, Maine
(Name and Address—Not to be filled in if bonds are to be held for safekeeping)

Signature of purchaser Alan B. Watts (Name) BM1 (Rank or Rating) Goose Rocks L/S (Unit)

3 of 3

UNITED STATES COAST GUARD

Address reply to:
Comdr., 1st CG Dist.
1400 Custom House
Boston 9, Mass.

P
27 January 1953
P15

From: Commander, 1st CG District
To: WATTS, Allen B.
Via: Commander, Rockland Group

Subj: Good Conduct Award

1. It is a pleasure to award you the inclosed Good Conduct Bars for your three year period of meritorious enlisted service in the United States Coast Guard ending 2-14-44,2-14-47,2-14-50 while attached to the CG 38668, Group Rockland & Moose Peak LBS.

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

3. It is requested that reciept for the subject Good Conduct Award be acknowledged by indorsemtn hereon.

E. H. LEAVITT
By direction

CC: Service Record
File Jacket
HQ's

Incl: (3) Good Conduct Bars

FIRST ENDORSEMENT to COMONECGD/L dtd 27 January 1953, file P15

29 January 1953

From: WATTS, Allen B.
To: Commander, FIRST Coast Guard District (p)

Receipt of the above awards is hereby acknowledged.

Allen B. Watts

Allen B. Watts, BM1L, USCG

TREASURY DEPARTMENT
U. S. COAST GUARD
CG-3312 REVISED
FORM APPROVED BY
COMPTROLLER GENERAL, U. S.
NOVEMBER 12, 1953

INDIVIDUAL ORDER TO ADJUST PAY RECORD

Copy NOTED A.D.G.

1. LEAVE RATIONS OR LOSS OF PAY BY REASON OF ABSENCE:

- [X] ON ANNUAL LEAVE, AOL or AWOL period, if any, excused as unavoidable
- [ ] ON SICK LEAVE, AOL or AWOL period, if any, excused as unavoidable
- [ ] ON ANNUAL LEAVE, AOL period, if any, not excused as unavoidable
- [ ] ON SICK LEAVE, AOL period, if any, not excused as unavoidable
- [ ] WITHOUT LEAVE, not excused as unavoidable
- [ ] OVER LIBERTY, not excused as unavoidable

	HOUR	DATE
DEPARTURE	0001	2/24/58
LEAVE OR LIBERTY EXPIRED	0900	3/3/58
RETURNED TO COAST GUARD JURISDICTION	0400	3/2/58

NUMBER DAYS CHARGED TO LEAVE RECORD FIVE(5)

Credit leave rations and/or check pay in accordance with the Comptrollers Manual.

2. CHANGE RATE: TO _____ (*Rate*) FROM _____ (*Rate*)

EFFECTIVE _____ (*Date change effected*) AUTHORITY _____ AUTHORITY RECEIVED _____ (*Date*)

3. CHANGE IN SERVICE FOR PAY PURPOSES:

	YEARS	MONTHS	DAYS
OTHER SERVICE*			
COAST GUARD SERVICE			
NET SERVICE OF			

ON _____ (*Date*) COMPLETED

* *Career Compensation Act of 1949. Statement of service filed in service record.*

4. COMMUTED RATIONS: FROM _____ (*Date*) TO _____ (*Date*)

Permission to mess separately has been granted. Commutation of rations to a mess or subsistence in kind has not and will not be authorized or furnished for this period.

5. SUBSISTENCE ALLOWANCE: FROM _____ (*Hour and date*) TO _____ (*Hour and date*) AT $ _____ per day

Rations in kind not available or furnished for this period.

6. QUARTERS ALLOWANCE: _____ (*Date*) TO _____ (*Date*) AT $ _____ per mo.

No Government quarters available. AND/OR AT $ _____ per day

7. MISCONDUCT: The below-named individual has been incapacitated for duty from _____ (*Date of admission*)

to _____ (*Date of discharge*) as a result of his own: [ ] INTEMPERATE USE OF DRUGS [ ] INTEMPERATE USE OF ALCOHOLIC LIQUORS

8. MISCELLANEOUS PAY ORDERS:

The Authorized Certifying Officer is authorized and directed to adjust pay record of the below-named individual for the reason and period stated above.

NOTE: VOID IF MORE THAN ONE ITEM IS COMPLETED

EFFECTIVE FOR ITEM 1 (*Number*) ONLY	SIGNATURE	GRADE AND TITLE	C. O. ORDER NO.
	G. W. HUPPER	CHBOSN W-2, GRUCOM	232-58

SHIP OR STATION	NAME OF A. C. O.
USCG DEPOT SOUTHWEST HARBOR, ME.	

NAME (*Last*)	(*First*)	(*Middle*)	SERVICE NO.	RATE
WATTS,	ALAN	B.	209-630	BMC

Pt-74

RECORD OF EMERGENCY DATA

SEE INSTRUCTIONS ON REVERSE BEFORE MAKING ENTRIES

1. DESIGNATOR'S LAST NAME—FIRST NAME—MIDDLE NAME	2. PRESENT SERVICE NO.	3. RANK/RATE	4. DATE OF BIRTH	5. RELIGION
WATTS, ALAN BRENNAN	209-630	BMC	1/1/17	Prot.

6. HOME ADDRESS AT TIME OF ENTRY INTO SERVICE	7. PRIOR MIL. SERVICE	8. FORMER SERVICE NO.
Jonesboro, Maine	☐ Yes ☒ No (DATE LAST ENTRY)	None
		9. SOCIAL SECURITY NO. 004-07-5842

FIRST NAME—MIDDLE NAME—LAST NAME (If deceased, so state)	ADDRESS
10. WIFE OR HUSBAND (If none, so state) Louise "D" WATTS	15 High Street, Machias, Maine

11. NAME OF CHILDREN (If none, so state. If step or adopted, so state)	ADDRESS	MARRIED YES	MARRIED NO	SEX	DATE OF BIRTH
Wayne Alan Watts	15 High Street, Machias, Me.		x	M	10/4/41

12. FATHER Fred Noyes Watts (Natural)	ADDRESS Jonesboro, Maine
13. MOTHER Florence Lawrence Watts (Natural)	ADDRESS Jonesboro, Maine
14. ADULT NEXT OF KIN NOT NAMED IN ANY OTHER ITEM None	ADDRESS

14a. ALL PERSONS RECEIVING MORE THAN 50 PERCENT OF THEIR SUPPORT FROM ME (OTHER THAN WIFE OR CHILDREN UNDER 21)	ADDRESS	RELATIONSHIP	DATE OF BIRTH
None			

15. PERSON(S) NAMED ABOVE WHO ARE NOT TO BE NOTIFIED DUE TO ILL HEALTH	ADDRESS
Nos. 11, 12 and 13	Same as above

DESIGNATIONS

		FIRST NAME—MIDDLE NAME—LAST NAME	ADDRESS	RELATIONSHIP
16. BENEFICIARY FOR GRATUITY PAY IN EVENT THERE IS NO SURVIVING SPOUSE OR ELIGIBLE CHILD(REN). NAME PARENTS OR BROTHERS OR SISTERS ONLY (P. L. 881 84th Congress).		Fred Noyes Watts	Jonesboro, Maine	Father
		Florence Lawrence Watts	Jonesboro, Maine	Mother
17. BENEFICIARY OR BENEFICIARIES FOR UNPAID PAY AND ALLOWANCES (P. L. 147, 84th Congress). PERCENT OF SHARES MUST TOTAL 100 PERCENT.	100 %	Louise "D" Watts	15 High Street Machias, Maine	Wife
	%			
18. PERSON TO RECEIVE ALLOTMENT OF PAY IF MISSING OR UNABLE TO TRANSMIT FUNDS.	PERCENT OF PAY EACH MO. 100%	Louise "D" Watts	15 High Street Machias, Maine	Wife

19. INSURANCE POLICIES IN FORCE INCLUDING USGLI AND NSLI (Agencies to be notified in case of death in active service)

FULL NAME AND ADDRESS OF COMPANY	ADDRESS OF OFFICE RECEIVING PAYMENT OR HOME OFFICE	POLICY NO.
None		

20. SERVICE ORGANIZATION AND ADDRESS OF DESIGNATOR	DATE SIGNED
USCG DEPOT, SOUTHWEST HARBOR, MAINE	8 October 1957

21. SIGNATURE OF WITNESS	22. SIGNATURE OF DESIGNATOR
G. W. HUPPER, CHRSN W-2, USCG - GRUCOM	Alan B. Watts

DD FORM 1 Dec 56 93-1 Previous Editions are obsolete.

For Navy, Marine Corps, and Coast Guard use: Will be used in lieu of DD Form 93.

RECORD OF EMERGENCY DATA

SEE INSTRUCTIONS ON REVERSE BEFORE MAKING ENTRIES

1. SAILOR'S LAST NAME—FIRST NAME—MIDDLE NAME	2. PRESENT SERVICE NO.	3. RANK/RATE	4. DATE OF BIRTH	5. RELIGION
WATTS, ALAN BRENNAN	209-630	BMC	1/1/17	Prot.

6. HOME ADDRESS AT TIME OF ENTRY INTO SERVICE	7. PRIOR MIL. SERVICE	8. FORMER SERVICE NO.
Jonesboro, Maine	☐ Yes ☒ No (DATE LAST ENTRY)	None
		9. SOCIAL SECURITY NO. 004-07-5842

FIRST NAME—MIDDLE NAME—LAST NAME (If deceased, so state)	ADDRESS
10. WIFE OR HUSBAND (If none, so state) Louise "D" WATTS	15 High Street, Machias, Maine

11. NAME OF CHILDREN (If none, so state. If step or adopted, so state)	ADDRESS	MARRIED YES	MARRIED NO	SEX	DATE OF BIRTH
Wayne Alan Watts	15 High Street, Machias, Me.		x	M	10/4/41

12. FATHER Fred Noyes Watts (Natural)	ADDRESS Jonesboro, Maine
13. MOTHER Florence Lawrence Watts (Natural)	ADDRESS Jonesboro, Maine
14. ADULT NEXT OF KIN NOT NAMED IN ANY OTHER ITEM None	ADDRESS

14a. ALL PERSONS RECEIVING MORE THAN 50 PERCENT OF THEIR SUPPORT FROM ME (OTHER THAN WIFE OR CHILDREN UNDER 21)	ADDRESS	RELATIONSHIP	DATE OF BIRTH
None			

15. PERSON(S) NAMED ABOVE WHO ARE NOT TO BE NOTIFIED DUE TO ILL HEALTH	ADDRESS
Nos. 11, 12 and 13	Same as above

DESIGNATIONS

		FIRST NAME—MIDDLE NAME—LAST NAME	ADDRESS	RELATIONSHIP
16. BENEFICIARY FOR GRATUITY PAY IN EVENT THERE IS NO SURVIVING SPOUSE OR ELIGIBLE CHILD(REN). NAME PARENTS OR BROTHERS OR SISTERS ONLY (P. L. 881 84th Congress).		Fred Noyes Watts	Jonesboro, Maine	Father
		Florence Lawrence Watts	Jonesboro, Maine	Mother
17. BENEFICIARY OR BENEFICIARIES FOR UNPAID PAY AND ALLOWANCES (P. L. 147, 84th Congress). PERCENT OF SHARES MUST TOTAL 100 PERCENT.	100 %	Louise "D" Watts	15 High Street Machias, Maine	Wife
	%			
18. PERSON TO RECEIVE ALLOTMENT OF PAY IF MISSING OR UNABLE TO TRANSMIT FUNDS.	PERCENT OF PAY EACH MO. 100%	Louise "D" Watts	15 High Street Machias, Maine	Wife

19. INSURANCE POLICIES IN FORCE INCLUDING USGLI AND NSLI (Agencies to be notified in case of death in active service)

FULL NAME AND ADDRESS OF COMPANY	ADDRESS OF OFFICE RECEIVING PAYMENT OR HOME OFFICE	POLICY NO.
None		

20. SERVICE ORGANIZATION AND ADDRESS OF DESIGNATOR	DATE SIGNED
USCG DEPOT, SOUTHWEST HARBOR, MAINE	8 October 1957

21. SIGNATURE OF WITNESS	22. SIGNATURE OF DESIGNATOR
G. W. HUPPER, CHBOSN W-2, USCG - GRUCOM	Alan B. Watts

DD FORM 1 Dec 56 **93-1** Previous Editions are obsolete.

For Navy, Marine Corps, and Coast Guard use: Will be used in lieu of DD Form 93.

TREASURY DEPARTMENT
U. S. COAST GUARD
CG-3312 REVISED
FORM APPROVED BY
COMPTROLLER GENERAL, U. S.
NOVEMBER 12, 1953

INDIVIDUAL ORDER TO ADJUST PAY RECORD

NOTED
L. D. G.

1. LEAVE RATIONS OR LOSS OF PAY BY REASON OF ABSENCE:

- [X] ON ANNUAL LEAVE, AOL or AWOL period, if any, excused as unavoidable
- [ ] ON SICK LEAVE, AOL or AWOL period, if any, excused as unavoidable
- [ ] ON ANNUAL LEAVE, AOL period, if any, not excused as unavoidable
- [ ] ON SICK LEAVE, AOL period, if any, not excused as unavoidable
- [ ] WITHOUT LEAVE, not excused as unavoidable
- [ ] OVER LIBERTY, not excused as unavoidable

	HOUR	DATE
DEPARTURE	0905	10-2-57
LEAVE OR LIBERTY EXPIRED	0900	10-8-57
RETURNED TO COAST GUARD JURISDICTION	0745	10-8-57

NUMBER DAYS CHARGED TO LEAVE RECORD 5 days

Credit leave rations and/or check pay in accordance with the Comptrollers Manual.

2. CHANGE RATE: TO _____ (*Rate*) FROM _____ (*Rate*)

EFFECTIVE _____ (*Date change effected*) AUTHORITY _____ AUTHORITY RECEIVED _____ (*Date*)

3. CHANGE IN SERVICE FOR PAY PURPOSES:

	YEARS	MONTHS	DAYS
OTHER SERVICE*			
COAST GUARD SERVICE			
NET SERVICE OF			

ON _____ (*Date*) COMPLETED

* *Career Compensation Act of 1949. Statement of service filed in service record.*

4. COMMUTED RATIONS: FROM _____ (*Date*) TO _____ (*Date*)

Permission to mess separately has been granted. Commutation of rations to a mess or subsistence in kind has not and will not be authorized or furnished for this period.

5. SUBSISTENCE ALLOWANCE: FROM _____ (*Hour and date*) TO _____ (*Hour and date*) AT $ _____ per day

Rations in kind not available or furnished for this period.

6. QUARTERS ALLOWANCE: _____ (*Date*) TO _____ (*Date*) AT $ _____ per mo.

No Government quarters available. AND/OR AT $ _____ per day

7. MISCONDUCT: The below-named individual has been incapacitated for duty from _____ (*Date of admission*) to _____ (*Date of discharge*) as a result of his own:

- [ ] INTEMPERATE USE OF DRUGS
- [ ] INTEMPERATE USE OF ALCOHOLIC LIQUORS

8. MISCELLANEOUS PAY ORDERS:

The Authorized Certifying Officer is authorized and directed to adjust pay record of the below-named individual for the reason and period stated above.

NOTE: VOID IF MORE THAN ONE ITEM IS COMPLETED

EFFECTIVE FOR ITEM 1 (Number) ONLY	SIGNATURE	GRADE AND TITLE	C. O. ORDER NO.
	G. W. HUPPER	CHBOSN W-2, USCG	99-57

SHIP OR STATION: USCG DEPOT, SOUTHWEST HARBOR, MAINE

NAME OF A. C. O.:

NAME (Last)	(First)	(Middle)	SERVICE NO.	RATE
WATTS,	ALAN	B.	209-630	BMC

TREASURY DEPARTMENT
U. S. COAST GUARD
CG-3312 REVISED
FORM APPROVED BY
COMPTROLLER GENERAL, U. S.
NOVEMBER 12, 1953

NOTED
I. D. C.

INDIVIDUAL ORDER TO ADJUST PAY RECORD

1. LEAVE RATIONS OR LOSS OF PAY BY REASON OF ABSENCE:

- [X] ON ANNUAL LEAVE, AOL or AWOL period, if any, excused as unavoidable
- [ ] ON SICK LEAVE, AOL or AWOL period, if any, excused as unavoidable
- [ ] ON ANNUAL LEAVE, AOL period, if any, not excused as unavoidable
- [ ] ON SICK LEAVE, AOL period, if any, not excused as unavoidable
- [ ] WITHOUT LEAVE, not excused as unavoidable
- [ ] OVER LIBERTY, not excused as unavoidable

	HOUR	DATE
DEPARTURE	0030	3/24/57
LEAVE OR LIBERTY EXPIRED	0900	4/4/57
RETURNED TO COAST GUARD JURISDICTION	0745	4/4/57

NUMBER DAYS CHARGED TO LEAVE RECORD 20 days

Credit leave rations and/or check pay in accordance with the Comptrollers Manual.

2. CHANGE RATE: TO _____ (*Rate*) FROM _____ (*Rate*)

EFFECTIVE _____ (*Date change effected*) AUTHORITY _____ AUTHORITY RECEIVED _____ (*Date*)

3. CHANGE IN SERVICE FOR PAY PURPOSES:

	YEARS	MONTHS	DAYS
OTHER SERVICE*			
COAST GUARD SERVICE			
NET SERVICE OF			

ON _____ (*Date*) COMPLETED

* *Career Compensation Act of 1949. Statement of service filed in service record.*

4. COMMUTED RATIONS: FROM _____ (*Date*) TO _____ (*Date*)

Permission to mess separately has been granted. Commutation of rations to a mess or subsistence in kind has not and will not be authorized or furnished for this period.

5. SUBSISTENCE ALLOWANCE: FROM _____ (*Hour and date*) TO _____ (*Hour and date*) AT $ _____ per day

Rations in kind not available or furnished for this period.

6. QUARTERS ALLOWANCE: _____ (*Date*) TO _____ (*Date*) AT $ _____ per mo.

No Government quarters available. AND/OR AT $ _____ per day

7. MISCONDUCT: The below-named individual has been incapacitated for duty from _____ (*Date of admission*)

to _____ (*Date of discharge*) as a result of his own: [ ] INTEMPERATE USE OF DRUGS [ ] INTEMPERATE USE OF ALCOHOLIC LIQUORS

8. MISCELLANEOUS PAY ORDERS:

The Authorized Certifying Officer is authorized and directed to adjust pay record of the below-named individual for the reason and period stated above.

NOTE: VOID IF MORE THAN ONE ITEM IS COMPLETED

EFFECTIVE FOR ITEM 1 (*Number*) ONLY	SIGNATURE	GRADE AND TITLE	C. O. ORDER NO.
	G. W. HUPPER	CHBOSN W-2, USCG	300-57
SHIP OR STATION		NAME OF A. C. O.	
USCG DEPOT, SOUTHWEST HARBOR, MAINE			

NAME (*Last*) (*First*) (*Middle*)	SERVICE NO.	RATE
WATTS, ALAN BRENDEN	209-630	EMC

INDIVIDUAL ORDER TO ADJUST PAY RECORD 16—09873-1 PAGE 12 1

CG-3517 (SM) (8-55)

UNITED STATES COAST GUARD

ADDRESS REPLY TO:
COMMANDER
USCG GROUP
SOUTHWEST HARBOR, MAINE

7 March 1957
A8-6

From: Commander, CG Group, Southwest Harbor, Maine
To: WATTS, Alan B. (209-630) BMC, USCG

Subj: Authorization to handle classified material CONFIDENTIAL

Ref: (a) OPNAV Instruction 5510.1A, with CG amendments thereto

1. In accordance with reference (a), you are hereby authorized access to classified material, CONFIDENTIAL, in connection with your duties while attached to USCG GROUP, SOUTHWEST HARBOR, MAINE.

2. Familiarize yourself and be governed by Chapter 6 of reference (a) and safeguard all matter accordingly.

3. This clearance continues in force until modified, revoked, or your transfer from the above indicated unit.

4. A copy of this letter will be filed in your service record.

G. W. HUPPER

Copy to:
Commandant (PE)
COMONECGD (int)
Service Record

PEA-A

1957 MAR 11 15 00

PE-71

TREASURY DEPARTMENT
U. S. COAST GUARD
CG-3[illegible] (4-52)

1-29-57

ADMINISTRATIVE REMARKS

SHIP OR STATION

CG GROUP, Rockland, Maine

CG Group
Rockland, Maine

29 January 1953

Received three (3) Good Conduct Bars this date for three year periods of meritorious enlisted service in the United States Coast Guard ending 2-14-44, 2-14-47, and 2-14-50 while attached to the CG-38668, Group Rockland & Moose Peak LBS.

M. O. WRIGHT, CHBOSN, USCG

1-30-56 Article 137 UCMJ has been complied with this date.

1-30-56 Code of Conduct for members of the Armed Forces has been complied with This date.

M. O. WRIGHT

RECORD OF TRANSFER

DATE TRANSFERRED	AUTHORITY		
25 JANUARY 1957	By direction COMONECGD (p) MSG 242149-Z JAN 1957		
RATE	**DATE OF RATE**	**SIGNATURE**	**GRADE AND TITLE**
BMC(AN)	10-16-55	H. N. LITCHFIELD	CHBOSN W-2 USCG

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

RECORD OF RECEIPT

REPORTED AT (Ultimate destination)	DATE REPORTED	SIGNATURE (Grade and title)
DEPOT, SW HBR, MAINE	1/29/57	G. W. HUPPER, CHBOSN W-2, USCG

NAME (Last)	(First)	(Middle)	SERVICE NO.
WATTS,	Allen	D	209-630

ADMINISTRATIVE REMARKS

PE-71

PAGE 7 2

16—66780-1

TREASURY DEPARTMENT
U. S. COAST GUARD
CG-2519 (REV. 11-53)

APPLICATION FOR LEAVE OF ABSENCE

COMDT (PG)

DWTT

UNIT	ADDRESS	DATE
Burnt Island LBS	PORT CLYDE, MAINE.	20 February 1956

FROM (REQUESTER):	TO	VIA:
WATTS, Aland B. (209-630) BMC	Commander CG Group Rockland Maine.	

THE FOLLOWING LEAVE IS REQUESTED:

NUMBER OF DAYS	TO DEPART	REASON:
6 ALREC	20 February 1956	☒ REGULAR ☐ EMERGENCY ☐ REENLISTMENT ☐ RECRUIT

ADDRESS ON LEAVE WILL BE Machias, Maine.

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

SIGNATURE OF APPLICANT Alan B. Watts

End.-1 Unit Commander CG Group Rockland Maine Date 20 Febrary 1956

Date current leave accounting period began 1 July 1955	Balance brought forward beginning of present accounting period 51
Number days' leave used during current accounting period 20x 07	Date of expiration of current enlistment

☐ FORWARDED, APPROVED ☐ FORWARDED, DISAPPROVED, BECAUSE

(Signature, grade, and title)

End.-2 Unit: Date

☐ FORWARDED, APPROVED ☐ FORWARDED, DISAPPROVED BECAUSE

(Signature, grade, and title)

End.-3 Unit: Commander CG Group Rockland Me Date 20 February 1956

☒ Returned, GRANTED 6 days.
☐ ADVANCE Regular Leave.
(Reason for leave)

☐ Returned, NOT GRANTED, because ☒ ACCRUED

M. O. WRIGHT, CHBOSN W-3 USCG.
(Signature, grade, and title)

End.-4 Unit: Commander CG Group Rockland, Me Date 20 February 1956

Departed at 0900, this date. This leave expires before 0900, 27 February 1956

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

M. O. WRIGHT, CHBOSN W-3 USCG, CO.
(Signature, grade, and title)

End.-5 Unit: Commander CG Group Rockland Maine, Date 27 FEBRUARY 1956

Reported at 0845, this date, having used 6 AL days' leave.

M. O. WRIGHT, CHBOSN W-3 USCT CG.
(Signature, grade, and title)

16—40220-4

(Over)

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

ADMINISTRATIVE REMARKS

SHIP OR STATION

Commander, CG Group Rockland Me

6-25-55 - Has served outside the CONLUS aboard the CG-40533

M. O. WRIGHT
GRUCOM ROCKLAND ME

RECORD OF TRANSFER

DATE TRANSFERRED		AUTHORITY	
RATE	DATE OF RATE	SIGNATURE	GRADE AND TITLE

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

RECORD OF RECEIPT

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

NAME (Last)	(First)	(Middle)	SERVICE NO.
WATTS,	Alan	B.	209-307 6 30

ADMINISTRATIVE REMARKS

PE-71

PAGE 7 1

16—66780-1

Comdr., 1st CG District
1400 Custom House
Boston 9, Mass.

209-630

p
24 June 1955
GD1/A3

From: Commander, First Coast Guard District
To: WATTS, Alan B. (209-331) EM2(P)(AN), USCG
Via: Commander, Rockland Group, Rockland, Maine

Subj: Designation as Officer-in-Charge, Burnt Island Lifeboat Station

Ref: (a) Comdr., Rockland Group, Rockland, Maine, ltr 9 June 1955, GV/A3
(b) Commandant's Circular 25-51 as amended by Commandant's Circular 4-52.

1. On the basis of information contained in reference (a), you are hereby designated as Officer-in-Charge, Burnt Island Lifeboat Station, Port Clyde, Maine.

2. In accordance with reference (a) and under authority of reference (b), you are issued the following administrative authority in connection with your duties as Officer-in-Charge, Burnt Island Lifeboat Station, Port Clyde, Maine.

a. To impose non-judicial punishment, as listed in paragraph 5 (c) of reference b), and in accordance with Section C10la, Coast Guard Supplement to Manual for Courts-Martial and with the procedure set forth in the Courts-Martial Manual.

3. The authority hereby issued is effective only during your assignment as Officer-in-Charge, Burnt Island Lifeboat Station, Port Clyde, Maine.

R. L. RANEY

Copy to:
Commandant (PE)
Chief, Operations Division, 1st CGD
Chief, Personnel Division, 1st CGD
District Legal Office, 1st CGD

TREASURY DEPARTMENT
U. S. COAST GUARD
CGHQ-3944 (Rev. 1-51)

CHIEF PETTY OFFICER PROCESSING SHEET

PE-1
SEP 28 1954

NAME	NUMBER	GRADE OR RATE	
WATTS, Alan B.	209-630	BM1 NM	2-1-54
HEALTH		HEIGHT	WEIGHT
ENLISTED 2-15-38	DATE Sor 4.	BORN 1-1-17	ARMY, NAVY, LIGHTHOUSE
CHANGED RATE TO	DATE	COMMENDATIONS	

PE-65

From: Commandant
To: Commander, First CG District (p)

Subj: Personnel; advancement in rating

1. Under authority of Section 12-3-23A, CG Regulations, the below-named men are advanced to the ratings indicated, effective 1 October, 1954, provided their conduct and performance of duty since date of examination have been satisfactory. If advancement is not justified, the Commandant (PE) will be immediately advised.

KLIGIS, Anthony P. (203-793) BM1 to BMC(P)
MARR, Robert H. (210-616) BML1 to BMC(P)
MERCHANT, Robert C. (209-614) BML1 to BMC(P)
REDMAN, Howard J. (205-229) BM1 to BMC(P)
WATTS, Alan B. (209-630) BML1 to BMC(P)

ACKNOWLEDGED
BY HA OCT 2 1953

2. The advancement of MARR, MERCHANT and WATTS, will only be effected provided they submit statements that they understand that once their rating is changed, they will not be assigned a BML rating at any future date for their own convenience.

3. Make necessary entries in service records and on daily diary showing advancements, citing this letter and Section 12-3-23A. CG Regulations as the authority therefor.

R. E. MORELL
By direction

YEARS	SHIPS AND STATIONS	PROF	CON	LD. SHIP
	1-17-49	UT	4.0	
	3.76 3-31-49 to 5-10-50	3.6	4.	
	1.66 6-30-50	3.0	4.	
	9.00 9-3 51	3.7	4.0	
	13.40 6-3 52	3.7	4.0	
		3.73		3.67

ELIGIBLE LIST ☑ YES ☐ NO REASONS

REMARKS

CLABORN:JHC;jhc
ret to 3-13

WATTS Alan B.

HEALTH	NUMBER	GRADE OR RATE	DATE
	209-630	BM1	2-1-54

ENLISTED	RATE	BORN	HEIGHT	WEIGHT
2-15-38	Sor fl.	1-1-17	—	—

CHANGED RATE TO: BM1 — DATE: 1-27-43

ARMY, NAVY, LIGHTHOUSE:

COMMENDATIONS:

GRAMMAR SCHOOL:

HIGH SCHOOL:

COURSES, SPECIAL QUALIFICATIONS, ETC.:

CENSURE, INVESTIGATIONS, DEBTS, ETC.:

COURTS:

REPORTS OF FITNESS (Favorable)

~~2018~~ 196.0

ACKNOWLEDGED BY H/L OCT 27 1953

REPORTS OF FITNESS (Unfavorable)

(01) · 15-11-17 contrary
· 11-0-5 ingrade

(81)

YEARS	SHIPS AND STATIONS	PROF	CON	LD. SHIP
	1-17-49	UT	4.0	
3.76	3-31-49 to 5-10-50	3.6	4.0	
1.66	6-30-50	3.0	4.0	
9.00	9-30-50 to 3-31-51	3.7	4.0	
13.40	6-30-51 to 5-12-52	3.8	4.0	
	Average	3.73		3.69

ELIGIBLE LIST: ☑ YES ☐ NO REASONS: EPB jr

REMARKS:

B-8850-TREASURY-CGHQ-WASH

10/1/52 TO 4/5/54 | 12 May, 1958 | SHIP OR STATION: Burnt Island Lifeboat Station

ABILITY TO UNDERSTAND INSTRUCTIONS ☐ NOT OBSERVED	Cannot seem to follow instructions, no matter how simple.	Understands only simple instructions. Gropes along when in doubt.	Grasps main points of most instructions.	Correctly interprets rather difficult instructions. Asks questions when in doubt.	Understands all instructions regardless of complexity.
ABILITY TO SOLVE PROBLEMS ☐ NOT OBSERVED	Cannot solve problems. Avoids all problems.	Solves simple problems. Stumped by routine problems.	Solves everyday problems rapidly. Solves a few of the more difficult problems.	Solves most problems, and often solves very difficult problems. X	Solves any problem rapidly.
ABILITY TO PLAN AND ORGANIZE WORK ☐ NOT OBSERVED	Work shows no organization or planning.	Can think of only one job at a time.	With occasional help in planning, work is orderly.	Work is generally well-arranged and usually good planning is shown. X	All work is well-planned and organized.
INDUSTRY ☐ NOT OBSERVED	Lazy, hides out, "gold bricker", clock watcher.	Often loafs on the job or wastes time, occasionally ducks out or avoids extra work.	Usually on the job, does his share.	Does more than his share, works hard, a plugger.	Extremely energetic, tireless, efficiently enthusiastic, full of pep. X
RELIABILITY; INCLUDING RESPONSIBILITY ☐ NOT OBSERVED	Utterly unreliable, usually in some trouble.	Needs to be watched, often gets out of line.	Means well, generally reliable.	Steady; dependable; conscientious.	Completely reliable and responsible under all circumstances. X
BASIC TECHNICAL KNOWLEDGE AND BACKGROUND ☐ NOT OBSERVED	Requires continued assistance. Entirely overrated.	Deficiency makes present duties difficult.	Sufficient to perform satisfactorily in his present rate.	More than sufficient for present rate, ready for advancement.	Has more than enough to serve as L. D. O. or W. O. X
ABILITY TO APPLY TECHNICAL KNOWLEDGE ☐ NOT OBSERVED	Never uses what technical knowledge he has.	Often misses a chance to put his technical knowledge into use.	Uses technical knowledge in routine situations.	Makes good use of general principles as well as specific knowledge. X	Makes maximum use of technical knowledge in all situations.
EFFORT TO INCREASE BOTH KNOWLEDGE AND TECHNICAL ABILITY ☐ NOT OBSERVED	Does not care, or try to improve.	Misses many chances to learn.	Accepts opportunities to learn.	Alert to any opportunity to improve.	Eager to improve. Always seeking more knowledge. X
HUMAN UNDERSTANDING ☐ NOT OBSERVED	Just cannot get along with people.	Doesn't understand a lot of his associates, not very well liked.	Gets along with most people.	Understands people, very considerate, and gets along well.	Shows keen understanding of fellow men. Is liked by everyone. X
ABILITY TO PROPERLY DELEGATE RESPONSIBILITY AND AUTHORITY ☐ NOT OBSERVED	Never delegates responsibility or authority properly.	Needs assistance in delegating responsibility and authority.	Delegates responsibility and authority with reasonable effectiveness.	Makes good use of personnel, effectively delegates responsibility and authority. X	Always delegates authority and responsibility most effectively.
INITIATIVE ☐ NOT OBSERVED	Requires detailed orders and supervision. Shortsighted.	Seldom has an idea. Always looks to supervisor for guidance.	Makes occasional suggestions. Works out own details.	Submits numerous ideas for approval. Acts in an emergency without instructions.	Originates well thought out ideas, goes ahead on his own, exhibits foresight. X
TEACHING OR INSTRUCTIONAL ABILITY ☐ NOT OBSERVED	Bores and confuses everyone.	Occasionally confusing, creates little interest, lacks background.	Generally interesting, usually gets the point across.	Interesting, good presentation, well informed. X	Creates high interest; presents material very clearly; has thorough knowledge of material.
ABILITY TO BUILD OR MAINTAIN HIGH MORALE ☐ NOT OBSERVED	Destroys morale, creates confusion and discontent.	Allows spirit to fall off. Men gripe and disregard his instructions.	Generally maintains morale, men follow willingly.	Develops a good "team" feeling, generates enthusiasm.	Inspires highest morale, is an outstanding all-round leader. X
EXEMPLARY CONDUCT ☐ NOT OBSERVED	Leads others into trouble, a continual disciplinary problem.	Often in trouble, a poor example but not a "ring leader".	Seldom in trouble, very few difficulties.	Sets a good example, observes regulations, maintains good record.	Sets an excellent example of conduct for all men. X
PERSEVERANCE ☐ NOT OBSERVED	Readily abandons or evades any but the most simple jobs.	Sticks to a difficult task only under compulsion.	Ordinarily patient and persistent.	Determined, seldom distracted.	Never gives up, regardless of difficulty or complexity of assignment. X
MILITARY APPEARANCE ☐ NOT OBSERVED	Sloppy, unkempt, slouches.	Wears uniform improperly, nonregulation, careless posture.	Presents good appearance on *scheduled* inspections.	Clean cut, neat, good posture. X	Wears uniform with great pride, fine military bearing.

NAME (Last)	(First)	(Middle)	RATE AND RATING	SERVICE NO.
WATTS,	Alan	B.	BM1	209-630

16—0865-4

INSTRUCTIONS: Evaluation should *not* be based upon general impressions; it should be based upon actual, observed performance. The mark given in one trait should not influence the mark given in another trait. Men can be expected to vary in strength from one trait to another. Complete and careful observation should support a mark in each one of the sixteen listed traits.

The following is a step by step procedure for using this form:

1. Consider the first trait listed in the left column.
2. Read the descriptive phrases listed to the right of the trait.
3. Decide which of these descriptive phrases best describes the individual.
4. Mark the individual in one of the boxes under the most fitting descriptive phrase.
   a. These boxes run from the least favorable at the left, to the most favorable at the right.
5. Repeat this same procedure for each of the listed traits, keeping in mind that each trait should be considered separately, and that the mark in one trait should not influence the mark in another trait. Also keep in mind that the majority of personnel can be expected to fit into the middle or average category.
6. Do not hesitate to check "not observed" where the performance of the petty officer being evaluated has not been observed in any trait or when the trait is not applicable with reference to a particular job or rate.
7. Now in the space indicated in the lower half of the back page, make a brief comment describing any general impressions you have of the individual; indicate the degree to which you feel the individual is qualified for officer status; indicate your recommendation regarding reenlistment. If this recommendation is negative, include reasons in comments. If the individual has outstanding ability in some technical specialty so state and identify the specialty.

QUALIFICATIONS FOR CPO

☐ NONE ☐ FAIR ☐ GOOD ☐ EXCELLENT ☒ OUTSTANDING

QUALIFICATIONS FOR OFFICER STATUS

☐ NONE ☐ FAIR ☐ GOOD ☒ EXCELLENT ☐ OUTSTANDING

RECOMMENDED FOR ADVANCEMENT TO

☒ CPO

RECOMMENDED FOR PROMOTION TO

☒ WO ☐ LDO ☐ OTHER (*Specify*)

COMMENTS (*Do not leave blank*)

1. WATTS is a petty officer of outstanding ability and is fully capable of performing the duties of his specialty ashore or afloat.
2. WATTS is a strict morally clean family man. His character is beyond reproach. He does not use alcohol or harmful drugs in any form.
3. Particular attention to duty, and outstanding performance of same is a trait of WATTS!
4. WATTS is definately good Warrant Officer material

RECOMMENDED FOR REENLISTMENT ☒ YES ☐ NO

RELATION OF REPORTING OFFICER

Commanding Officer

SIGNATURE, RANK AND FILE NUMBER OF REPORTING OFFICER

M. O. WRIGHT, CHBOSN (85773), USN

U. S. GOVERNMENT PRINTING OFFICE 16—60865-3

1. Date	2. Reason	3. Rate	4. PER	5. ALOM	6. Conduct	7. Ship or Station	8. Signature
6-30-52	Qrtly	(AN) BML1	3.7	3.6	4.0	Boon Island L/S	/s/ A. E. HUNTLEY CO
8/11-52	Trans	(AN) BML1	3.7	3.6	4.0	Boon Island L/S	/s/ A. E. HUNTLEY CO
9-26-52	Trans	(AN) BML1	3.7	3.6	4.0	Boon Island L/S	/s/ D. W. CLUFF CO
*9-30-52	Qtly	(AN) BML1	3.7	3.6	4.0	Grp. Rockland, Me.	/s/ M. O. WRIGHT, CO
*12-31-52	Qtly	(AN) BML1	3.8	3.7	4.0	GRP ROCKLAND, ME.	/s/ M. O. WRIGHT, CO
*3-31-53	RQM	BML1	3.8	3.7	4.0	GRP ROCKLAND, ME.	/s/ M. O. WRIGHT, CO
*6-30-53	RQM	BML1	3.8	3.8	4.0	GRP ROCKLAND, ME.	/s/ M. O. WRIGHT, CO
*9-30-53	RQM	BML1	3.8	3.8	4.0	GRP ROCKLAND, ME.	/s/ M. O. WRIGHT, CO
*12-31-53	RQM	BML1	3.8	3.8	4.0	GRP ROCKLAND, ME.	/s/ M. O. WRIGHT, CO
*3-31-54	RQM	BML1	3.8	3.8	4.0	GRP ROCKLAND, ME.	/s/ M. O. WRIGHT, CO

4.60

15.0

CERTIFIED TO BE A TRUE COPY OF MARKS

M. O. WRIGHT, CHBOSN, USCG, CO

3.76×6 = 22.56
1.66×0 = 0.00
9.00×7 = 63.00
13.40×8 = 107.20
4.60×7 = 32.20
15.00×8 = 120.00

47.42 344.96

727

47.42 34496
33194
13020
9484
3536
33 74

NAME (Last) WATTS, (First) Allan (Middle) F. SERVICE NO. 209-630

MARKS

PAGE 6

SECOND ENDORSEMENT on WATTS' ltr P17-2 of 13 October 1953

From: Commander, First Coast Guard District
To: Commandant (PE)

Subj: Examination for Chief Boatswain's Mate; request for

1. Forwarded.

E. B. HALL
By direction

1953 OCT 20 15 16
PEA-A

Commander, Group Rockland
Rockland, Maine

RECEIVED
PERSONNEL DIVISION
13 October, 1953
FILE: P17-2
OCT 16 1 48 PM 1953

From: WATTS, Alan B. (209-630) BML1 (AN), USCG
To: COMMANDANT (PE)
Via: (1) Commander, First Coast Guard District (p)
(2) Commander, Coast Guard Group, Rockland, Maine

CCGD
BOSTON 9, MASS.

Subj: Examination for Chief Boatswain's Mate; request for

Ref: (a) Personnel Circular 23-53

1. In accordance with reference (a), it is requested that I be allowed to participate in the forthcoming examinations for Boatswain's Mate Chief, to be held during the first week of April, 1954.

Alan B. Watts
Alan B. Watts

- -

FIRST ENDORSEMENT on WATTS' ltr dtd 13 October, 1953, file P17-2

From: Commander, Coast Guard Group Rockland, Maine 15 October, 1953
To: Commandant (PE)
Via: (1) Commander, First Coast Guard District (p)

1. WATTS has applied for a lateral change in rate from BML1 (AN) to BM1(AN).

2. If and when such a change is made in WATTS' rate, it is strongly recommended that he be allowed to take the examination for Boatswain's Mate Chief in accordance with Personnel Circular 23-53.

3. WATTS is an outstanding petty officer in all respects.

M. O. WRIGHT

TREASURY DEPARTMENT
U. S. COAST GUARD
CG-3312 REVISED
FORM APPROVED BY
COMPTROLLER GENERAL, U. S.
NOVEMBER 12, 1953

INDIVIDUAL ORDER TO ADJUST PAY RECORD

1. LEAVE RATIONS OR LOSS OF PAY BY REASON OF ABSENCE:

- [X] ON ANNUAL LEAVE, AOL or AWOL period, if any, excused as unavoidable
- [ ] ON SICK LEAVE, AOL or AWOL period, if any, excused as unavoidable
- [ ] ON ANNUAL LEAVE, AOL period, if any, not excused as unavoidable
- [ ] ON SICK LEAVE, AOL period, if any, not excused as unavoidable
- [ ] WITHOUT LEAVE, not excused as unavoidable
- [ ] OVER LIBERTY, not excused as unavoidable

	HOUR	DATE
DEPARTURE	0030	3/14/57
LEAVE OR LIBERTY EXPIRED	0900	4/4/57
RETURNED TO COAST GUARD JURISDICTION	0745	4/4/57

NUMBER DAYS CHARGED TO LEAVE RECORD 20 days

Credit leave rations and/or check pay in accordance with the Comptrollers Manual.

2. CHANGE RATE: TO _____ (*Rate*) FROM _____ (*Rate*)

EFFECTIVE _____ (*Date change effected*) AUTHORITY _____ AUTHORITY RECEIVED _____ (*Date*)

3. CHANGE IN SERVICE FOR PAY PURPOSES:

	YEARS	MONTHS	DAYS
OTHER SERVICE*			
COAST GUARD SERVICE			
NET SERVICE OF			

ON _____ (*Date*) COMPLETED

* *Career Compensation Act of 1949. Statement of service filed in service record.*

4. COMMUTED RATIONS: FROM _____ (*Date*) TO _____ (*Date*)

Permission to mess separately has been granted. Commutation of rations to a mess or subsistence in kind has not and will not be authorized or furnished for this period.

5. SUBSISTENCE ALLOWANCE: FROM _____ (*Hour and date*) TO _____ (*Hour and date*) AT $ _____ per day

Rations in kind not available or furnished for this period.

6. QUARTERS ALLOWANCE: _____ (*Date*) TO _____ (*Date*) AT $ _____ per mo.

No Government quarters available. AND/OR AT $ _____ per day

7. MISCONDUCT: The below-named individual has been incapacitated for duty from _____ (*Date of admission*)

to _____ (*Date of discharge*) as a result of his own: [ ] INTEMPERATE USE OF DRUGS [ ] INTEMPERATE USE OF ALCOHOLIC LIQUORS

8. MISCELLANEOUS PAY ORDERS:

The Authorized Certifying Officer is authorized and directed to adjust pay record of the below-named individual for the reason and period stated above.

NOTE: VOID IF MORE THAN ONE ITEM IS COMPLETED

EFFECTIVE FOR ITEM 1 (*Number*) ONLY	SIGNATURE	GRADE AND TITLE	C. O. ORDER NO.
	G. W. HUPPER G. W. Hupper	CHBOSN W-2, USCG	300-57

SHIP OR STATION	NAME OF A. C. O.
USCG DEPOT, SOUTHWEST HARBOR, MAINE	

NAME (*Last*)	(*First*)	(*Middle*)	SERVICE NO.	RATE
WATTS,	ALAN	BRENNEN	209-630	BMC

UNITED STATES COAST GUARD

ADDRESS REPLY TO:
DIRECTOR
U. S. COAST GUARD INSTITUTE
GROTON, CONNECTICUT

27 January 1955

PE-69 FILE: 11118

From: Director
To: WATTS, Alan B. (209-630)BMC
CG Group - Rockland
% U.S. Coast Guard Moorings
Rockland, Maine

Subj: Educational certificate; forwarding of

1. The CG Institute congratulates you on your satisfactory completion of the Institute BMC-1 course with a grade of 91 %.

2. A copy of this letter should be placed in your file and appropriate notation made in your service record and continuous service certificate.

3. It is requested that all textbooks which were issued with your course be returned to the CG Institute without delay.

G. W. NELSON

Encl: (1) Educational Certificate

Copy to:
Commandant (PE)

CGI-300 (Rev. 9-54)

3-13

UNITED STATES COAST GUARD

ADDRESS REPLY TO:

WATTS, Alan B.
Burnt Is. LBS
Port Clyde, Me.

RECEIVED
PERSONNEL DIVISION
OCT 11 1 03 PM 1954

6 October 1954
MM/P17-2

file

From: WATTS, Alan B. (209-630) BMC(P)
To: COMMANDANT (PE-1)
Via: (1) Commander, Coast Guard Group Rockland, Maine.
(2) Commander, First Coast Guard District (p)

CCGD PEA-A
BOSTON 9, MASS.
PE-65

Subj: Reassignment of BML rating at any future date for my own convenience.

Ref: (a) COMONECGD (p) ltr dtd 1 October 1954, File MM/P17-2
(b) COMDT (PE-1) ltr dtd 28 September 1954, File MM
(c) Section 12-3-23A Coast Guard Regulations.

1. Upon advancement becoming effective in accordance with referances (a) (b) and (c) I respectfully submit a statement to the effect that I fully realize and understand that once my rating is changed, I will not be assigned a BML rating at any future date for my own convenience.

Alan B. Watts

Alan B. Watts

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6 October 1954

FIRST ENDORSEMENT on WATTS, Alan B. ltr dtd 10-7-54, File MM/P17-2

From: Commander, Coast Guard Group Rockland, Maine.
To: Commander, First Coast Guard District (p)

1. Forwarded:

M. O. WRIGHT

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p
12 October 1954
MM/P17-2

SECOND ENDORSEMENT ON WATTS's ltr MM/P17-2 of 6 October 1954

From: Commander, First Coast Guard District
To: Commandant (PE)

1. Forwarded.

E. B. HALL
By direction

WATTS, Alan B.
Burnt Is. LBS
Port Clyde, Me.

6 October 1954
MM/P17-2

From: WATTS, Alan B. (209-630) BMC(P)
To: COMMANDANT (PE-1)
Via: (1) Commander, Coast Guard Group Rockland, Maine.
(2) Commander, First Coast Guard District (p)

Subj: Reassignment of BML rating at any future date for my own convenience.

Ref: (a) COMONECGD (p) ltr dtd 1 October 1954, File MM/P17-2
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1. Upon advancement becoming effective in accordance with referances (a) (b) and (c) I respectfully submit a statement to the effect that I fully realize and understand that once my rating is changed, I will not be assigned a BML rating at any future date for my own convenience.

Alan B. Watts

Alan B. Watts

- -

6 October 1954

FIRST ENDORSEMENT on WATTS, Alan B. ltr dtd 10-7-54, File MM/P17-2

From: Commander, Coast Guard Group Rockland, Maine.
To: Commander, First Coast Guard District (p)

1. Forwarded:

- M. O. WRIGHT - - - - - - - - - - - -

p
12 October 1954
MM/P17-2

SECOND ENDORSEMENT ON WATTS's ltr MM/P17-2 of 6 October 1954

From: Commander, First Coast Guard District
To: Commandant (PE)

1. Forwarded.

E. B. HALL
By direction

TREASURY DEPARTMENT
U. S. COAST GUARD
CG-3312 REVISED
FORM APPROVED BY
COMPTROLLER GENERAL, U. S.
NOVEMBER 12, 1953

INDIVIDUAL ORDER TO ADJUST PAY RECORD

1. LEAVE RATIONS OR LOSS OF PAY BY REASON OF ABSENCE:

- [X] ON ANNUAL LEAVE, AOL or AWOL period, if any, excused as unavoidable
- [ ] ON SICK LEAVE, AOL or AWOL period, if any, excused as unavoidable
- [ ] ON ANNUAL LEAVE, AOL period, if any, not excused as unavoidable
- [ ] ON SICK LEAVE, AOL period, if any, not excused as unavoidable
- [ ] WITHOUT LEAVE, not excused as unavoidable
- [ ] OVER LIBERTY, not excused as unavoidable

	HOUR	DATE
DEPARTURE	001	3/19/58
LEAVE OR LIBERTY EXPIRED	0900	4/1/58
RETURNED TO COAST GUARD JURISDICTION	2350	3/31/58

NUMBER DAYS CHARGED TO LEAVE RECORD TWELVE(12)

Credit leave rations and/or check pay in accordance with the Comptrollers Manual.

2. CHANGE RATE: TO _____ (*Rate*) FROM _____ (*Rate*)

EFFECTIVE _____ (*Date change effected*) AUTHORITY _____ AUTHORITY RECEIVED _____ (*Date*)

3. CHANGE IN SERVICE FOR PAY PURPOSES:

	YEARS	MONTHS	DAYS
OTHER SERVICE*			
COAST GUARD SERVICE			
NET SERVICE OF			

ON _____ (*Date*) COMPLETED

*Career Compensation Act of 1949. Statement of service filed in service record.

4. COMMUTED RATIONS: FROM _____ (*Date*) TO _____ (*Date*)

Permission to mess separately has been granted. Commutation of rations to a mess or subsistence in kind has not and will not be authorized or furnished for this period.

5. SUBSISTENCE ALLOWANCE: FROM _____ (*Hour and date*) TO _____ (*Hour and date*) AT $ _____ per day

Rations in kind not available or furnished for this period.

6. QUARTERS ALLOWANCE: _____ (*Date*) TO _____ (*Date*) AT $ _____ per mo.

No Government quarters available. AND/OR AT $ _____ per day

7. MISCONDUCT: The below-named individual has been incapacitated for duty from _____ (*Date of admission*)

to _____ (*Date of discharge*) as a result of his own:

- [ ] INTEMPERATE USE OF DRUGS
- [ ] INTEMPERATE USE OF ALCOHOLIC LIQUORS

8. MISCELLANEOUS PAY ORDERS:

The Authorized Certifying Officer is authorized and directed to adjust pay record of the below-named individual for the reason and period stated above.

NOTE: VOID IF MORE THAN ONE ITEM IS COMPLETED

EFFECTIVE FOR ITEM 1 (*Number*) ONLY	SIGNATURE	GRADE AND TITLE	C. O. ORDER NO.
	G. W. HUPPER G. W. Hupper	CHBOSN W-2, GRUCOM	247-58

SHIP OR STATION	NAME OF A. C. O.
USCG DEPOT SOUTHWEST HARBOR, ME.	

NAME (*Last*)	(*First*)	(*Middle*)	SERVICE NO.	RATE
WATTS,	ALAN	BRENNAN	209-630	BMC

TREASURY DEPARTMENT
U. S. COAST GUARD
CG-3312 REVISED
FORM APPROVED BY
COMPTROLLER GENERAL, U. S.
NOVEMBER 12, 1953

INDIVIDUAL ORDER TO ADJUST PAY RECORD

1. LEAVE RATIONS OR LOSS OF PAY BY REASON OF ABSENCE:

- [X] ON ANNUAL LEAVE, AOL or AWOL period, if any, excused as unavoidable
- [ ] ON SICK LEAVE, AOL or AWOL period, if any, excused as unavoidable
- [ ] ON ANNUAL LEAVE, AOL period, if any, not excused as unavoidable
- [ ] ON SICK LEAVE, AOL period, if any, not excused as unavoidable
- [ ] WITHOUT LEAVE, not excused as unavoidable
- [ ] OVER LIBERTY, not excused as unavoidable

	HOUR	DATE
DEPARTURE	0001	2/24/58
LEAVE OR LIBERTY EXPIRED	0900	3/3/58
RETURNED TO COAST GUARD JURISDICTION	0400	3/2/58

NUMBER DAYS CHARGED TO LEAVE RECORD FIVE(5)

Credit leave rations and/or check pay in accordance with the Comptrollers Manual.

2. CHANGE RATE: TO _____ (*Rate*) FROM _____ (*Rate*)

EFFECTIVE _____ (*Date change effected*) AUTHORITY _____ AUTHORITY RECEIVED _____ (*Date*)

3. CHANGE IN SERVICE FOR PAY PURPOSES:

	YEARS	MONTHS	DAYS
OTHER SERVICE*			
COAST GUARD SERVICE			
NET SERVICE OF			

ON _____ (*Date*) COMPLETED

* *Career Compensation Act of 1949. Statement of service filed in service record.*

4. COMMUTED RATIONS: FROM _____ (*Date*) TO _____ (*Date*)

Permission to mess separately has been granted. Commutation of rations to a mess or subsistence in kind has not and will not be authorized or furnished for this period.

5. SUBSISTENCE ALLOWANCE: FROM _____ (*Hour and date*) TO _____ (*Hour and date*) AT $ _____ per day

Rations in kind not available or furnished for this period.

6. QUARTERS ALLOWANCE: _____ (*Date*) TO _____ (*Date*) AT $ _____ per mo.

No Government quarters available. AND/OR AT $ _____ per day

7. MISCONDUCT: The below-named individual has been incapacitated for duty from _____ (*Date of admission*) to _____ (*Date of discharge*) as a result of his own:

- [ ] INTEMPERATE USE OF DRUGS
- [ ] INTEMPERATE USE OF ALCOHOLIC LIQUORS

8. MISCELLANEOUS PAY ORDERS:

The Authorized Certifying Officer is authorized and directed to adjust pay record of the below-named individual for the reason and period stated above.

NOTE: VOID IF MORE THAN ONE ITEM IS COMPLETED

EFFECTIVE FOR ITEM 1 (*Number*) ONLY	SIGNATURE	GRADE AND TITLE	C. O. ORDER NO.
	G. W. HUPPER	CHBOSN W-2, GRUCOM	232-58

SHIP OR STATION: USCG DEPOT SOUTHWEST HARBOR, ME.

NAME OF A. C. O.:

NAME (*Last*)	(*First*)	(*Middle*)	SERVICE NO.	RATE
WATTS,	ALAN	B.	209-630	BMC

TREASURY DEPARTMENT
U. S. COAST GUARD
CG-3312 REVISED
FORM APPROVED BY
COMPTROLLER GENERAL, U. S.
NOVEMBER 12, 1953

INDIVIDUAL ORDER TO ADJUST PAY RECORD

1. LEAVE RATIONS OR LOSS OF PAY BY REASON OF ABSENCE:

- [x] ON ANNUAL LEAVE, AOL or AWOL period, if any, excused as unavoidable
- [ ] ON SICK LEAVE, AOL or AWOL period, if any, excused as unavoidable
- [ ] ON ANNUAL LEAVE, AOL period, if any, not excused as unavoidable
- [ ] ON SICK LEAVE, AOL period, if any, not excused as unavoidable
- [ ] WITHOUT LEAVE, not excused as unavoidable
- [ ] OVER LIBERTY, not excused as unavoidable

	HOUR	DATE
DEPARTURE	0905	10-2-57
LEAVE OR LIBERTY EXPIRED	0900	10-8-57
RETURNED TO COAST GUARD JURISDICTION	0745	10-8-57

NUMBER DAYS CHARGED TO LEAVE RECORD 5 days

Credit leave rations and/or check pay in accordance with the Comptrollers Manual.

2. CHANGE RATE: TO _____ (*Rate*) FROM _____ (*Rate*)

EFFECTIVE _____ (*Date change effected*) AUTHORITY _____ AUTHORITY RECEIVED _____ (*Date*)

3. CHANGE IN SERVICE FOR PAY PURPOSES:

	YEARS	MONTHS	DAYS
OTHER SERVICE*			
COAST GUARD SERVICE			
NET SERVICE OF			

ON _____ (*Date*) COMPLETED

* *Career Compensation Act of 1949. Statement of service filed in service record.*

4. COMMUTED RATIONS: FROM _____ (*Date*) TO _____ (*Date*)

Permission to mess separately has been granted. Commutation of rations to a mess or subsistence in kind has not and will not be authorized or furnished for this period.

5. SUBSISTENCE ALLOWANCE: FROM _____ (*Hour and date*) TO _____ (*Hour and date*) AT $ _____ per day

Rations in kind not available or furnished for this period.

6. QUARTERS ALLOWANCE: _____ (*Date*) TO _____ (*Date*) AT $ _____ per mo.

No Government quarters available. AND/OR AT $ _____ per day

7. MISCONDUCT: The below-named individual has been incapacitated for duty from _____ (*Date of admission*)

to _____ (*Date of discharge*) as a result of his own:

- [ ] INTEMPERATE USE OF DRUGS
- [ ] INTEMPERATE USE OF ALCOHOLIC LIQUORS

8. MISCELLANEOUS PAY ORDERS:

The Authorized Certifying Officer is authorized and directed to adjust pay record of the below-named individual for the reason and period stated above.

NOTE: VOID IF MORE THAN ONE ITEM IS COMPLETED

EFFECTIVE FOR ITEM 1 (*Number*) ONLY	SIGNATURE	GRADE AND TITLE	C. O. ORDER NO.
	G. W. HUPPER	CHBOSN W-2, USCG	99-57

SHIP OR STATION	NAME OF A. C. O.
USCG DEPOT, SOUTHWEST HARBOR, MAINE	

NAME (*Last*)	(*First*)	(*Middle*)	SERVICE NO.	RATE
WATTS,	ALAN	B.	209-630	BMC

TREASURY DEPARTMENT
U. S. COAST GUARD
CG-3444 (5-53)

SICK CALL TREATMENT RECORD

LAST NAME	FIRST NAME	MIDDLE NAME	SERVICE NO.
WATTS	ALAN	B	209-630

DATE	UNIT	COMPLAINT	TREATMENT	DISPOSITION	INITIAL
3/3/58	So. W. Hbr. Me.	PX for Retirement	Completed	Duty	HW

(Over)

SWH. Depot MAIL TO GROUP 50 WEST HARBOR SR
MOVENT TO QUODDYHEAD GR. Quoddy

COMMANDER CG GROUP QUODDY HEAD DEC 6 - 1957

APPLICATION FOR DEPENDENTS AUTHORIZATION FOR MEDICAL CARE CARD BY ACTIVE DUTY OR RETIRED MEMBER

(This form may also be utilized by dependents of active duty or retired members in making application for medical care authorization cards)

Form Approved Budget Bureau No. 22-R175

I. IDENTIFICATION OF ACTIVE DUTY OR RETIRED MEMBER

1. LAST NAME - FIRST NAME - MIDDLE INITIAL	2. STATUS			
WATTS, Alan B.	[X] ACTIVE DUTY	[ ] RETIRED		
3. GRADE - RATE - RANK	4. BRANCH OF SERVICE	5. SERVICE NUMBER	6. DATE OF EXPIRATION OF CURRENT TERM OF SERVICE *(When member is on active duty)*	
BMC	COAST GUARD	209-630	5/12/58	

II. DEPENDENTS FOR WHOM AUTHORIZATION IS REQUESTED

7. NAME	8. RELATIONSHIP	9. DATE OF BIRTH	10. ADDRESS
Louise D. Watts	Wife	10/25/19	15 High Street Machias, Maine
Wayne A. Watts	Son	10/4/41	15 High Street Machias, Maine

III. CERTIFICATION BY ACTIVE DUTY OR RETIRED MEMBER

I CERTIFY THAT ALL DEPENDENTS FOR WHOM AUTHORIZATION FOR MEDICAL CARE IS REQUESTED ARE RELATED TO ME AS STATED HEREIN, THAT I WILL BE RESPONSIBLE FOR PROPER USE BY MY DEPENDENTS OF THE AUTHORIZATION FOR MEDICAL CARE GRANTED ON THE BASIS OF THIS APPLICATION. THAT I WILL SURRENDER THE AUTHORIZATION IMMEDIATELY WHEN CALLED UPON TO DO SO OR WHEN APPROPRIATE UNDER APPLICABLE REGULATIONS, AND THAT I WILL IMMEDIATELY NOTIFY THE INDIVIDUAL OR AGENCY DESIGNATED TO GRANT AUTHORIZATIONS FOR MEDICAL CARE OF MY DEPENDENTS IN THE EVENT OF ANY CHANGE IN DEPENDENCY STATUS HEREIN OR IN MY STATUS AS A MEMBER OR RETIRED MEMBER OF THE UNIFORMED SERVICE. FURTHER, I AGREE TO REPAY THE GOVERNMENT FOR ANY PAYMENTS MADE BY THE GOVERNMENT FOR MEDICAL CARE IN OTHER THAN UNIFORM SERVICE FACILITIES FOR MY DEPENDENTS IN THE EVENT THAT IT IS LATER DETERMINED THAT MY DEPENDENTS ARE NOT ENTITLED THERETO.

I FURTHER CERTIFY THAT *(Check appropriate box or boxes and complete entries as applicable)*

[X] LAWFUL MARRIAGE TO THE SPOUSE NAMED TOOK PLACE AT *(Place)* Machias, Maine ON *(Date)* 16 February 1940.

[ ] THE LAWFUL HUSBAND NAMED IS IN FACT DEPENDENT UPON ME FOR OVER ONE HALF OF HIS SUPPORT.

[ ] ALL CHILDREN NAMED ARE MY LEGITIMATE, LEGALLY ADOPTED OR STEP CHILDREN; THAT ALL CHILDREN ARE UNMARRIED; THAT ALL CHILDREN NAMED WHO ARE OVER 21 YEARS OF AGE ARE (1) INCAPABLE OF SELF-SUPPORT BECAUSE OF A MENTAL OR PHYSICAL INCAPACITY THAT EXISTED PRIOR TO THEIR REACHING THE AGE OF 21 AND ARE IN FACT DEPENDENT UPON ME FOR OVER ONE-HALF OF THEIR SUPPORT OR (2) HAVE NOT PASSED THEIR TWENTY-THIRD BIRTHDAY AND ARE ENROLLED IN A FULL-TIME COURSE OF STUDY IN AN EDUCATIONAL INSTITUTION ABOVE HIGH SCHOOL LEVEL WHICH NORMALLY MAINTAINS A REGULAR FACULTY AND CURRICULUM AND NORMALLY HAS A REGULARLY ORGANIZED BODY OF STUDENTS IN ATTENDANCE AT THE PLACE WHERE THE EDUCATIONAL ACTIVITIES ARE CARRIED ON AND ARE IN FACT DEPENDENT UPON ME FOR OVER ONE-HALF OF THEIR SUPPORT. *(Part II, Item 9 - In those special circumstances which permit children over 21 entitlement to medical care indicate after date of birth (INC) for incompetency, or (SCH) for attendance at approved school. Enter under **REMARKS** the name of the institution of higher learning.)*

[ ] ALL PARENTS OR PARENTS-IN-LAW NAMED ARE IN FACT DEPENDENT UPON ME FOR OVER ONE-HALF OF THEIR SUPPORT AND ACTUALLY RESIDE IN MY HOUSEHOLD.

[ ] I AM ENTITLED TO RETIRED, RETIREMENT, OR RETAINER PAY OR EQUIVALENT PAY AS A RESULT OF SERVICE IN A UNIFORMED SERVICE, OTHER THAN BY RETIREMENT UNDER TITLE III OF THE ARMY AND AIR FORCE VITALIZATION AND RETIREMENT EQUALIZATION ACT OF 1948.

DD FORM 1 SEP 56 1171

☐ I AM ENTITLED TO RETIRED OR RETIREMENT PAY UNDER TITLE III OF THE ARMY AND AIR FORCE VITALIZATION AND RETIREMENT EQUALIZATION ACT OF 1948 *(62 Stat. 1087, 10 U.S.C. 1036-1036i, 34 U.S.C. 440-440E)* AND I HAVE COMPLETED EIGHT OR MORE YEARS OF ACTIVE DUTY AS DEFINED IN SUBSECTION 101(B) OF THE ARMED FORCES RESERVE ACT OF 1952, 66 STAT. 481, 50 U.S.C. 901, PERIODS OF ACTIVE DUTY WERE AS FOLLOWS:

11. REMARKS

10 July 1957

The status and eligibility for privileges and expiration date of eligibility to privileges of the dependents named in this application (has)(have) been verified.

A U.S. Military activity which can and does issue DD Form 1173 is hereby authorized to issue DD Form 1173 to such dependent(s). The issuing activity is requested to return the original completed application to: _____ (Mailing address of command making verification) by endorsement hereon and indicate the card number issued to each dependent by name.

Name of Dependent	Eligible for following Benefits and Privileges	Expiration Date of Eligibility	Card Number Issued
Louise D. Watts	T:C:EU:MC(C):MC(US)	5-12-58	CG-04,370
Wayne A. Watts	T:C:EU:MC(C):MC(US)	5-12-58	CG-02,371

G. W. HUPPER, CHBOSN W-2, USCG - GRUCOM
(Signature - Name - Rank
Title of Verifying Officer)

12. ORGANIZATION OF APPLICANT US COAST GUARD	13. PERMANENT HOME ADDRESS OF RETIRED MEMBER
14. DATE OF APPLICATION June 6, 1957	15. SIGNATURE OF APPLICANT ALAB B. WATTS, BMC

NOTE: Penalty for presenting false claims or making false statements in connection with claims: Fine of not more than $10,000 or imprisonment for not more than five years, or both. Act 25 June 1948, 18 U.S.C 287, 1001.

IV. AUTHENTICATION BY ISSUING AGENCY

ELIGIBILITY OF DEPENDENTS FOR MEDICAL CARE UNDER THE PROVISIONS OF THE DEPENDENTS MEDICAL CARE ACT OF 1956 HAS BEEN VERIFIED, EXCEPT AS INDICATED IN REMARKS.

16. CARD NUMBER ISSUED	17. DATE ISSUED	18. EXPIRATION DATE OF CARD *(See Instructions of Uniformed Service concerned)*
	AUG 2 1957	

20. ORGANIZATION OF ISSUING OFFICER: 1st CG DISTRICT INTELLIGENCE SECTION

20. NAME AND GRADE OF ISSUING OFFICER *(Typed or printed)*	21. SIGNATURE OF ISSUING OFFICER
E. C. HILL, CHBOSN	

U. S. GOVERNMENT PRINTING OFFICE : 1956 O - 407991

Standard Form 600
Promulgated Nov. 1952
By Bureau of the Budget
Circular A—32

HEALTH RECORD | **CHRONOLOGICAL RECORD OF MEDICAL CARE**

DATE	SYMPTOMS, DIAGNOSIS, TREATMENT, TREATING ORGANIZATION (*Sign each entry*)
3/4/58	"This is to certify that I have been given a physical examination and have been found physically qualified for retirement; that I have been informed of the findings and do agree with the findings. Alan B. Watts ALAN B. WATTS, BMC, USCG Witnessed by: G. W. Hupper G. W. HUPPER, CHBOSN W-2, USCG GROUP COMMANDER

SEX	RACE	GRADE, RATING, OR POSITION	ORGANIZATION UNIT	COMPONENT OR BRANCH	SERVICE, DEPT. OR AGENCY
MALE	CAU	BMC	DEPOT SW HBR, ME.	USCG	TREASURY

PATIENT'S LAST NAME—FIRST NAME—MIDDLE NAME	DATE OF BIRTH (DAY-MONTH-YEAR)	IDENTIFICATION NO.
WATTS, ALAN B.	1-1-17	209-630

Standard Form 88
(Rev. Aug. 1950)
PROMULGATED BY
BUREAU OF THE BUDGET
CIRCULAR A-24

REPORT OF MEDICAL EXAMINATION

1. LAST NAME—FIRST NAME—MIDDLE NAME	2. GRADE AND COMPONENT OR POSITION	3. IDENTIFICATION NO.
WATTS, ALAN B.	BMC	209-630
4. HOME ADDRESS (*Number, street or RFD, city or town, zone and State*)	**5. PURPOSE OF EXAMINATION**	**6. DATE OF EXAMINATION**
15 High Street, Machias, Maine	Retirement	3/4/58

7. SEX	8. RACE	9. TOTAL YRS. GOVT. SERVICE (MILITARY / CIVILIAN)	10. DEPARTMENT, AGENCY, OR SERVICE	11. ORGANIZATION UNIT
MALE	CAUCASIAN	20	USCG TREASURY DEPT.	DEPOT SW HARBOR, ME.

12. DATE OF BIRTH	13. PLACE OF BIRTH	14. NAME, RELATIONSHIP, AND ADDRESS OF NEXT OF KIN
1-1-17	Jonesboro, Maine	Wife: Louise Address same as #4

15. EXAMINING FACILITY OR EXAMINER, AND ADDRESS	16. OTHER INFORMATION
H. T. WILBUR, M.D. SOUTHWEST HARBOR, ME.	RELIGION: PROTESTANT

17. RATING OR SPECIALTY — TIME IN THIS CAPACITY: TOTAL — LAST SIX MONTHS

CLINICAL EVALUATION

NORMAL	ABNORMAL	(*Check each item in appropriate column; enter "N. E." if not evaluated*)
X		18. HEAD, FACE, NECK, AND SCALP
X		19. NOSE
X		20. SINUSES
X		21. MOUTH AND THROAT
X		22. EARS—GENERAL (*Int. & ext. canals*) (*Auditory acuity under items 70 and 71*)
X		23. DRUMS (*Perforation*)
	X	24. EYES—GENERAL (*Visual acuity and refraction under items 59, 60, and 61*)
NE		25. OPHTHALMOSCOPIC
X		26. PUPILS (*Equality and reaction*)
X		27. OCULAR MOTILITY (*Associated parallel movements, nystagmus*)
X		28. LUNGS AND CHEST (*Include breasts*)
X		29. HEART (*Thrust, size, rhythm, sounds*)
X		30. VASCULAR SYSTEM (*Varicosities, etc.*)
X		31. ABDOMEN AND VISCERA (*Include hernia*)
X		32. ANUS AND RECTUM (*Hemorrhoids, fistulae*) (*Prostate if indicated*)
X		33. ENDOCRINE SYSTEM
X		34. G-U SYSTEM
X		35. UPPER EXTREMITIES (*Strength, range of motion*)
X		36. FEET
X		37. LOWER EXTREMITIES (*Except feet*) (*Strength, range of motion*)
X		38. SPINE, OTHER MUSCULOSKELETAL
	X	39. IDENTIFYING BODY MARKS, SCARS, TATTOOS
X		40. SKIN, LYMPHATICS
X		41. NEUROLOGIC (*Equilibrium tests under item 72*)
NE		42. PSYCHIATRIC (*Specify any personality deviation*)
Females only		(*Check how done*)
		43. PELVIC ☐ VAGINAL ☐ RECTAL

NOTES.—Describe every abnormality in detail. (Enter pertinent item number before each comment; continue in item 73 and use additional sheets if necessary.)

#24 - Conjunctivitis - left eye - Mild

#39 - Appendectemy scar.

(*Continue in item 73*)

44. DENTAL (*Place appropriate symbols above or below number of upper and lower teeth, respectively*)

O.—Restorable teeth *I.—Nonrestorable teeth* *X.—Missing teeth* *XXX.—Replaced by dentures* *(6 × 8).—Fixed bridge, brackets to include abutments*

															X	
RIGHT	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	LEFT
	X																
	32	31	30	29	28	27	26	25	24	23	22	21	20	19	18	17	
	X		X											X		X	

REMARKS AND ADDITIONAL DENTAL DEFECTS AND DISEASES: NONE

LABORATORY FINDINGS

45. URINALYSIS: SP. GR. 1.022			46. CHEST X-RAY (*Place, date, film number, result*)	47. SEROLOGY (*Specify test used and result*)
ALBUMIN	SUGAR	MICROSCOPIC		
NEG.	NEG.	Not indicated	NFA	NFA

48. EKG	49. BLOOD TYPE AND RH FACTOR	50. OTHER TESTS
NFA	NFA	NONE

16—62288-1

MEASUREMENTS AND OTHER FINDINGS

51. HEIGHT	52. WEIGHT	53. COLOR HAIR	54. COLOR EYES	55. BUILD: SLENDER ☐ MEDIUM ☒ HEAVY ☐ OBESE ☐	56. TEMP.
71"	190	BROWN	BLUE		98.6°

57. BLOOD PRESSURE (*Arm at heart level*)

SITTING	SYS. 135 / DIAS. 80	RECUMBENT	SYS. 132 / DIAS. 76	STANDING (3 min.)	SYS. 138 / DIAS. 83

58. PULSE (*Arm at heart level*)

SITTING	AFTER EXERCISE	2 MIN. AFTER	RECUMBENT	AFTER STANDING 3 MIN.
72	104	70	68	72

59. DISTANT VISION	60. REFRACTION	61. NEAR VISION
RIGHT 20/ 20 CORR. TO 20/	BY S. CX NFA	CORR. TO NFA BY
LEFT 20/ 20 CORR. TO 20/	BY S. CX NFA	CORR. TO NFA BY

62. HETEROPHORIA: (*Specify distance*)	ES°	EX°	R. H.	L. H.	PRISM DIV.	PRISM CONV.	PC	PD
	NFA							

63. ACCOMMODATION	64. COLOR VISION (*Test used and result*)	65. DEPTH PERCEPTION (*Test used and score*)	
RIGHT Normal LEFT	Normal - yarn	UNCORRECTED	
		CORRECTED NFA	

66. FIELD OF VISION	67. NIGHT VISION (*Test used and score*)	68. RED LENS	69. INTRAOCULAR TENSION
NFA	NFA	NFA	NFA

70. HEARING

RIGHT WV 20 /15 SV 30 /15

LEFT WV 20 /15 SV 30 /15

71. AUDIOMETER

	250 256	500 512	1000 1024	2000 2048	3000 2896	4000 4096	8000 8192	
RIGHT		NFA						
LEFT								

72. PSYCHOLOGICAL AND PSYCHOMOTOR (*Tests used and score*)

NFA

73. NOTES (*Continued*) **AND SIGNIFICANT OR INTERVAL HISTORY**

(*Use additional sheets of plain paper if necessary*)

74. SUMMARY OF DEFECTS AND DIAGNOSES (*List diagnoses with item numbers*)

Mild conjunctivitis - left eye.

75. RECOMMENDATIONS—FURTHER SPECIALIST EXAMINATIONS INDICATED (*Specify*)

NONE

76. PHYSICAL PROFILE

P	U	L	H	E	S

77. EXAMINEE (*Check*)

☒ IS ☐ IS NOT QUALIFIED FOR RETIREMENT

PHYSICAL CATEGORY

A	B	C	E

78. IF NOT QUALIFIED, LIST DISQUALIFYING DEFECTS BY ITEM NUMBER

79. TYPED OR PRINTED NAME OF PHYSICIAN	SIGNATURE
DR. H. T. WILBUR, M.D. DESIGNATED PHYSICIAN	Herbert T. Wilbur, M.D.
80. TYPED OR PRINTED NAME OF PHYSICIAN	SIGNATURE
81. TYPED OR PRINTED NAME OF DENTIST OR PHYSICIAN (*Indicate which*)	SIGNATURE
82. TYPED OR PRINTED NAME OF REVIEWING OFFICER OR APPROVING AUTHORITY	SIGNATURE / NUMBER OF ATTACHED SHEETS

U. S. GOVERNMENT PRINTING OFFICE 16—62288-1

Standard Form 88
(Rev. Aug. 1950)
PROMULGATED BY
BUREAU OF THE BUDGET
CIRCULAR A-24

REPORT OF MEDICAL EXAMINATION

1. LAST NAME—FIRST NAME—MIDDLE NAME	2. GRADE AND COMPONENT OR POSITION	3. IDENTIFICATION NO.
WATTS, ALAN B.	BMC	209-630
4. HOME ADDRESS (*Number, street or RFD, city or town, zone and State*)	**5. PURPOSE OF EXAMINATION**	**6. DATE OF EXAMINATION**
15 High Street, Machias, Maine	Retirement	2/4/58

7. SEX	8. RACE	9. TOTAL YRS. GOVT. SERVICE MILITARY	CIVILIAN	10. DEPARTMENT, AGENCY, OR SERVICE	11. ORGANIZATION UNIT
MALE	CAUCASIAN	20		USCG TREASURY DEPT.	DEPOT SW HARBOR, ME.

12. DATE OF BIRTH	13. PLACE OF BIRTH	14. NAME, RELATIONSHIP, AND ADDRESS OF NEXT OF KIN
1-1-17	Jonesboro, Maine	Wife: Louise Address same as #4

15. EXAMINING FACILITY OR EXAMINER, AND ADDRESS	16. OTHER INFORMATION
H. T. WILBUR, M.D. SOUTHWEST HARBOR, ME.	RELIGION: PROTESTANT

17. RATING OR SPECIALTY — TIME IN THIS CAPACITY: TOTAL — LAST SIX MONTHS

CLINICAL EVALUATION

NORMAL	ABNORMAL	(*Check each item in appropriate column; enter "N. E." if not evaluated*)
X		18. HEAD, FACE, NECK, AND SCALP
X		19. NOSE
X		20. SINUSES
X		21. MOUTH AND THROAT
X		22. EARS—GENERAL (*Int. & ext. canals*) (*Auditory acuity under items 70 and 71*)
X		23. DRUMS (*Perforation*)
	X	24. EYES—GENERAL (*Visual acuity and refraction under items 59, 60, and 61*)
NE		25. OPHTHALMOSCOPIC
X		26. PUPILS (*Equality and reaction*)
X		27. OCULAR MOTILITY (*Associated parallel movements, nystagmus*)
X		28. LUNGS AND CHEST (*Include breasts*)
X		29. HEART (*Thrust, size, rhythm, sounds*)
X		30. VASCULAR SYSTEM (*Varicosities, etc.*)
X		31. ABDOMEN AND VISCERA (*Include hernia*)
X		32. ANUS AND RECTUM (*Hemorrhoids, fistulae*) (*Prostate if indicated*)
X		33. ENDOCRINE SYSTEM
X		34. G-U SYSTEM
X		35. UPPER EXTREMITIES (*Strength, range of motion*)
X		36. FEET
X		37. LOWER EXTREMITIES (*Except feet*) (*Strength, range of motion*)
X		38. SPINE, OTHER MUSCULOSKELETAL
	X	39. IDENTIFYING BODY MARKS, SCARS, TATTOOS
X		40. SKIN, LYMPHATICS
X		41. NEUROLOGIC (*Equilibrium tests under item 72*)
NE		42. PSYCHIATRIC (*Specify any personality deviation*)
Females only		(*Check how done*)
		43. PELVIC ☐ VAGINAL ☐ RECTAL

NOTES.—Describe every abnormality in detail. (Enter pertinent item number before each comment; continue in item 73 and use additional sheets if necessary.)

#24 - Conjunctivitis - left eye - Mild

#39 - Appendectemy scar.

(*Continue in item 73*)

44. DENTAL (*Place appropriate symbols above or below number of upper and lower teeth, respectively*)

O.—*Restorable teeth* /.—*Nonrestorable teeth* X.—*Missing teeth* XXX.—*Replaced by dentures* (6 × 8).—*Fixed bridge, brackets to include abutments*

RIGHT																LEFT
	X														X	
	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16
	32	31	30	29	28	27	26	25	24	23	22	21	20	19	18	17
	X		X											X		X

REMARKS AND ADDITIONAL DENTAL DEFECTS AND DISEASES

NONE

LABORATORY FINDINGS

45. URINALYSIS: SP. GR. 1.022			46. CHEST X-RAY (*Place, date, film number, result*)	47. SEROLOGY (*Specify test used and result*)
ALBUMIN	SUGAR	MICROSCOPIC		
NEG.	NEG.	Not indicated	NFA	NFA

48. EKG	49. BLOOD TYPE AND RH FACTOR	50. OTHER TESTS
NFA	NFA	NONE

MEASUREMENTS AND OTHER FINDINGS

51. HEIGHT	52. WEIGHT	53. COLOR HAIR	54. COLOR EYES	55. BUILD: SLENDER / MEDIUM / HEAVY / OBESE	56. TEMP.
71"	190	BROWN	BLUE	☐ / ☒ / ☐ / ☐	98.6°

57. BLOOD PRESSURE (*Arm at heart level*)

SITTING	SYS. 135 / DIAS. 80	RECUMBENT	SYS. 132 / DIAS. 76	STANDING (3 min.)	SYS. 138 / DIAS. 83

58. PULSE (*Arm at heart level*)

SITTING	AFTER EXERCISE	2 MIN. AFTER	RECUMBENT	AFTER STANDING 3 MIN.
72	104	70	68	72

59. DISTANT VISION		60. REFRACTION			61. NEAR VISION	
RIGHT 20/ 20	CORR. TO 20/	BY	S.	CX	CORR. TO	BY
LEFT 20/ 20	CORR. TO 20/	BY	S. NFA		CORR. TO NFA	BY

62. HETEROPHORIA: (*Specify distance*) ES° NFA EX° | R. H. | L. H. | PRISM DIV. | PRISM CONV. | PC | PD

63. ACCOMMODATION	64. COLOR VISION (*Test used and result*)	65. DEPTH PERCEPTION (*Test used and score*)	
RIGHT Normal LEFT	Normal - yarn		UNCORRECTED / CORRECTED NFA

66. FIELD OF VISION	67. NIGHT VISION (*Test used and score*)	68. RED LENS	69. INTRAOCULAR TENSION
NFA	NFA	NFA	NFA

70. HEARING

RIGHT W/V 20 /15 S/V 30 /15

LEFT W/V 20 /15 S/V 30 /15

71. AUDIOMETER

	250 256	500 512	1000 1024	2000 2048	3000 2896	4000 4096	8000 8192	
RIGHT								
LEFT		NFA						

72. PSYCHOLOGICAL AND PSYCHOMOTOR (*Tests used and score*)

NFA

73. NOTES (*Continued*) AND SIGNIFICANT OR INTERVAL HISTORY

(*Use additional sheets of plain paper if necessary*)

74. SUMMARY OF DEFECTS AND DIAGNOSES (*List diagnoses with item numbers*)

Mild conjunctivitis - left eye.

75. RECOMMENDATIONS—FURTHER SPECIALIST EXAMINATIONS INDICATED (*Specify*)

NONE

77. EXAMINEE (*Check*)

☒ IS ☐ IS NOT QUALIFIED FOR RETIREMENT

78. IF NOT QUALIFIED, LIST DISQUALIFYING DEFECTS BY ITEM NUMBER

76. PHYSICAL PROFILE

P	U	L	H	E	S

PHYSICAL CATEGORY

A	B	C	E

79. TYPED OR PRINTED NAME OF PHYSICIAN

DR. H. T. WILBUR, M.D. DESIGNATED PHYSICIAN

SIGNATURE Herbert T. Wilbur, M.D.

80. TYPED OR PRINTED NAME OF PHYSICIAN — SIGNATURE

81. TYPED OR PRINTED NAME OF DENTIST OR PHYSICIAN (*Indicate which*) — SIGNATURE

82. TYPED OR PRINTED NAME OF REVIEWING OFFICER OR APPROVING AUTHORITY — SIGNATURE — NUMBER OF ATTACHED SHEETS

U. S. GOVERNMENT PRINTING OFFICE 16—62288-1

Standard Form 600
Promulgated Nov. 1952
By Bureau of the Budget
Circular A—32

HEALTH RECORD | **CHRONOLOGICAL RECORD OF MEDICAL CARE**

DATE	SYMPTOMS, DIAGNOSIS, TREATMENT, TREATING ORGANIZATION (Sign each entry)
29 Apr '55	(1) Pains aching left shoulder joint - intermittent. 6 yrs (2) Lipoma left upper arm over biceps. (3) Dermophytosis, left pectoral region. Size of Eisendollar. ℞ Tryderyl oint. GRL
Aug 27 1954	X Ray No. - 00-06721 was Negtive RVH
7-22-57	Health Record inspected and verified this date in accordance with 4-4-1(B) USCG Medical Manual; CG-294. Hicks, R. V DT 2
3/3/58	Phy. Exam. for Retirement Completed. Herbert T. Wilbur, M.D.

SEX	RACE	GRADE, RATING, OR POSITION	ORGANIZATION UNIT	COMPONENT OR BRANCH	SERVICE, DEPT. OR AGENCY
M	cau	BM C	USCG Depot SW.	USCG	TD

PATIENT'S LAST NAME—FIRST NAME—MIDDLE NAME	DATE OF BIRTH (DAY-MONTH-YEAR)	IDENTIFICATION NO.
Watts, Alan B.	1/1/17	208-630

16—67728-1

CHRONOLOGICAL RECORD OF MEDICAL CARE
Standard Form 600

Standard Form 601
Promulgated Nov. 1952
By Bureau of the Budget
Circular A—32

HEALTH RECORD

IMMUNIZATION RECORD

All entries in ink to be made in block letters

VACCINATION AGAINST SMALLPOX (*Number of previous vaccination scars*)

	DATE	ORIGIN	BATCH NUMBER	RESULT* 2–3 DAYS	RESULT* 7–10 DAYS	STATION	PHYSICIAN'S NAME
1	1-19-53	old record			I R		Robbie G. Brown, HM2
X	7-12-57	NATIONAL Dep	3294 A 2			MOU #	Hicks, R. V DT 2
3							
4							
5							
6							

*ENTER RESULTS AS: IMMEDIATE REACTION (*of immunity*); ACCELERATED REACTION (*Vaccinoid*); TYPICAL PRIMARY VACCINA

TRIPLE TYPHOID VACCINE

	DATE	DOSE	UNTOWARD REACTION	PHYSICIAN'S NAME		DATE	DOSE	UNTOWARD REACTION	PHYSICIAN'S NAME
1	1-4-54	0.1 cc	Booster-old record	Robbie G. Brown	7				
2	7-17-57	0.5 cc	Booster	Hicks, R.V. DT 2	8				
3					9				
4					10				
5					11				
6					12				

TETANUS TOXOID

	DATE	DOSE	UNTOWARD REACTION	PHYSICIAN'S NAME		DATE	DOSE	UNTOWARD REACTION	PHYSICIAN'S NAME
1	8-10-54	0.5 cc	booster-old record	Robbie G. Brown	4				
2					5				
3					6				

SCHICK TESTING AND DIPHTHERIA IMMUNIZATION

	DATE	DOSE	REACTION	PHYSICIAN'S NAME		DATE	DOSE	REACTION	PHYSICIAN'S NAME
TEST					TEST				
1					5				
2					6				
3					7				
4					8				

TYPHUS VACCINE

	DATE	DOSE	REACTION	PHYSICIAN'S NAME		DATE	DOSE	REACTION	PHYSICIAN'S NAME
1					4				
2					5				
3					6				

CHOLERA VACCINE

	DATE	ORIGIN	BATCH NO.	PHYSICIAN'S NAME		DATE	ORIGIN	BATCH NO.	PHYSICIAN'S NAME
1					7				
2					8				
3					9				
4					10				
5					11				
6					12				

YELLOW FEVER VACCINE

	DATE	ORIGIN	BATCH NO.	STATION	PHYSICIAN'S NAME
1					
2					
3					

SEX	RACE	GRADE, RATING OR POSITION	ORGANIZATION UNIT	COMPONENT OR BRANCH	SERVICE, DEPT. OR AGENCY
M	cau	BMC	Southwest Harbor	USCG	T.D.

PATIENT'S LAST NAME—FIRST NAME—MIDDLE NAME	DATE OF BIRTH (DAY-MONTH-YEAR)	IDENTIFICATION NO.
Watts, Alan B.	1/1/17	208-630

16—67730-1

IMMUNIZATION RECORD
Standard Form 601

OTHER IMMUNIZATIONS

	DATE	TYPE	DOSE	REACTION	REMARKS	PHYSICIAN'S NAME
1	10/17/57	Asian Flu	1 cc	Lederle # 2022-10024		H. T. Walker
2						
3						
4						
5						
6						
7						
8						
9						
10						
11						
12						
13						
14						
15						

SENSITIVITY TESTS (*Tuberculin, etc.*)

	DATE	TYPE	DOSE	ROUTE	RESULTS	PHYSICIAN'S NAME
1						
2						
3						
4						
5						
6						
7						
8						
9						
10						

REACTIONS (*To transfusions, drugs, sera, foods, allergens, etc.*)

	DATE	AGENT	TYPE OF REACTION	SEVERITY	PHYSICIAN'S NAME
1					
2					
3					
4					
5					

BLOOD TYPING

	DATE	TYPE (*International*)	Rh FACTOR	PHYSICIAN'S NAME
1				
2				
3				

REMARKS AND RECOMMENDATIONS (*Including history of diseases for which any of the above immunizing agents were given with year and place of attack*)

THIS RECORD IS ISSUED IN ACCORDANCE WITH ARTICLE 99, WHO SANITARY REGULATIONS NO. 2.

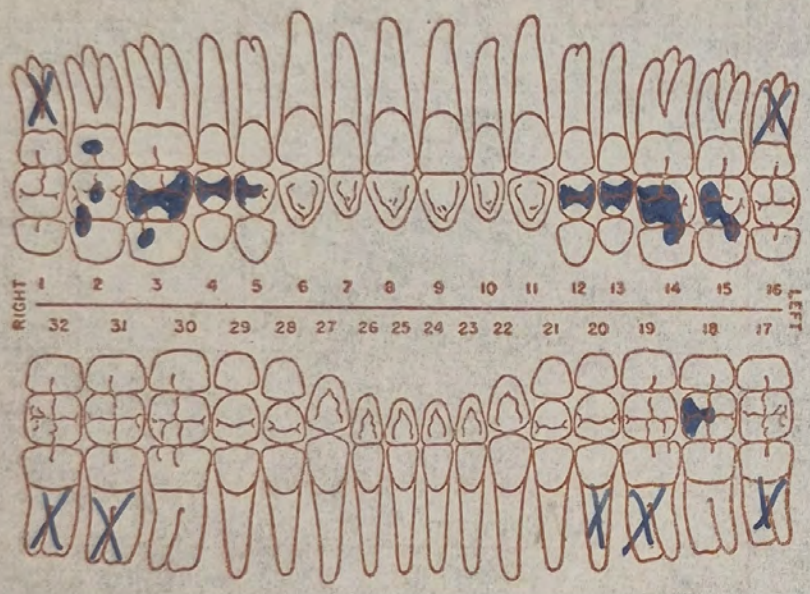
U. S. GOVERNMENT PRINTING OFFICE 16—67730-1

HEALTH RECORD — DENTAL

SECTION I. DENTAL EXAMINATION

1. PURPOSE OF EXAMINATION						2. TYPE OF EXAM.				3. DENTAL CLASSIFICATION					
	INITIAL		SEPARATION		OTHER (*Specify*)	1	2	3	4	1	2	3	4	5	

4. MISSING TEETH AND EXISTING RESTORATIONS

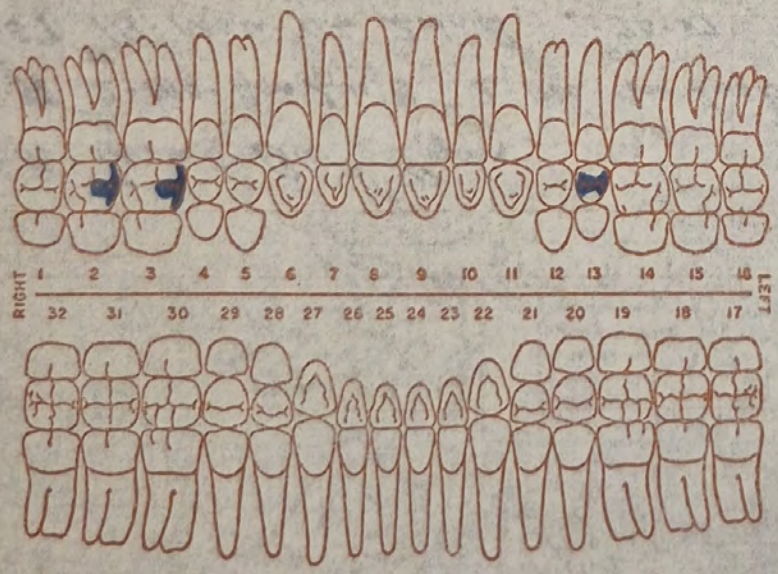


REMARKS

PLACE OF EXAMINATION | DATE

SIGNATURE OF DENTIST COMPLETING THIS SECTION

5. DISEASES, ABNORMALITIES, AND X-RAYS



A. CALCULUS — SLIGHT | MODERATE | HEAVY

B. PERIODONTOCLASIA — LOCAL | GENERAL; INCIPIENT | MODERATE | SEVERE

C. STOMATITIS (*Specify*)

GINGIVITIS | VINCENT'S

D. DENTURES NEEDED
(*Include dentures needed after indicated extractions*)

FULL		PARTIAL	
U	L	U	L

ABNORMALITIES OF OCCLUSION—REMARKS

E. INDICATE X-RAYS USED IN THIS EXAMINATION

FULL MOUTH PERIAPICAL | POSTERIOR BITE-WINGS | OTHER (*Specify*)

DATE: 29 July 57 | PLACE OF EXAMINATION: MDU # 9

SIGNATURE OF DENTIST COMPLETING THIS SECTION: Jack M Morton SADS PHS

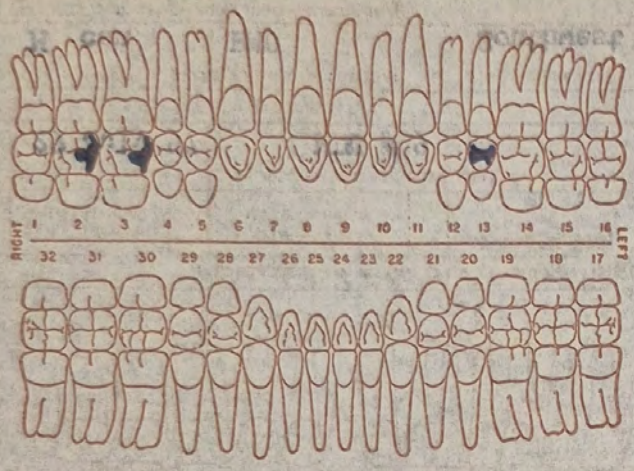
SECTION II. PATIENT DATA

6. SEX	7. RACE	8. GRADE, RATING, OR POSITION	9. ORGANIZATION UNIT	10. COMPONENT OR BRANCH	11. SERVICE, DEPT. OR AGENCY
M	cau	BMC	Southwest Harbor	USCG	T.D.

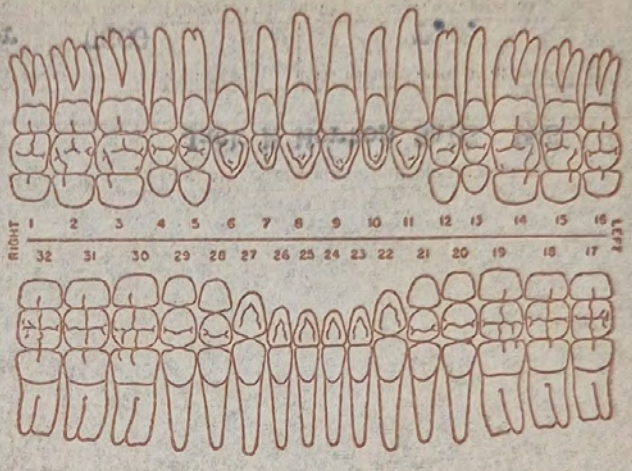
12. PATIENT'S LAST NAME—FIRST NAME—MIDDLE NAME	13. DATE OF BIRTH (DAY–MONTH–YEAR)	14. IDENTIFICATION NO.
Watts, Alan B.	1/1/17	208- 630

SECTION III. ATTENDANCE RECORD

15. RESTORATIONS AND TREATMENTS (*Completed during service*)



16. SUBSEQUENT DISEASES AND ABNORMALITIES



REMARKS

REMARKS

17. SERVICES RENDERED

DATE	DIAGNOSIS—TREATMENT	CLASS	OPERATOR AND DENTAL FACILITY	INITIALS
7-29-57	Exam & BW° Cytology		MD4 # 9 Jack Morton	RUH
7-29-57	# 2-MO-Am 2 no B II 3-MO-Am 2 no B		Jack Morton	RUH
7-30-57	# 13-MOD-Am 2 no B cc 7-30-57		Jack Morton	RUH

PATIENT'S LAST NAME—FIRST NAME—MIDDLE NAME

U. S. GOVERNMENT PRINTING OFFICE 16—67875-1

Standard Form 88
(Rev. Aug. 1950)
PROMULGATED BY
BUREAU OF THE BUDGET
CIRCULAR A-24

REPORT OF MEDICAL EXAMINATION

1. LAST NAME—FIRST NAME—MIDDLE NAME	2. GRADE AND COMPONENT OR POSITION	3. IDENTIFICATION NO.
WATTS, Alan B.	BM1	299-630
4. HOME ADDRESS (*Number, street or R.F.D., city or town, zone and State*)	**5. PURPOSE OF EXAMINATION**	**6. DATE OF EXAMINATION**
High St. Machias, Me.	Re-enlistment	4-29-52

7. SEX	8. RACE	9. TOTAL YRS. GOVT. SERVICE MILITARY	CIVILIAN	10. DEPARTMENT, AGENCY, OR SERVICE	11. ORGANIZATION UNIT
M	W	14		Treasury	USCG

12. DATE OF BIRTH	13. PLACE OF BIRTH	14. NAME, RELATIONSHIP, AND ADDRESS OF NEXT OF KIN
1-1-17	Jonesboro, Me.	Wife: Louise Address same as #4

15. EXAMINING FACILITY OR EXAMINER, AND ADDRESS	16. OTHER INFORMATION
DMO Boston	Glouster Group

17. RATING OR SPECIALTY — TIME IN THIS CAPACITY: TOTAL — LAST SIX MONTHS

CLINICAL EVALUATION

NORMAL	ABNORMAL	(*Check each item in appropriate column; enter "N. E." if not evaluated*)
X		18. HEAD, FACE, NECK, AND SCALP
X		19. NOSE
X		20. SINUSES
X		21. MOUTH AND THROAT
X		22. EARS—GENERAL (*Int. & ext. canals*) (*Auditory acuity under items 70 and 71*)
X		23. DRUMS (*Perforation*)
X		24. EYES—GENERAL (*Visual acuity and refraction under items 59, 60, and 61*)
X		25. OPHTHALMOSCOPIC
X		26. PUPILS (*Equality and reaction*)
X		27. OCULAR MOTILITY (*Associated parallel movements, nystagmus*)
X		28. LUNGS AND CHEST (*Include breasts*)
X		29. HEART (*Thrust, size, rhythm, sounds*)
X		30. VASCULAR SYSTEM (*Varicosities, etc.*)
X		31. ABDOMEN AND VISCERA (*Include hernia*)
X		32. ANUS AND RECTUM (*Hemorrhoids, fistulae*) (*Prostate if indicated*)
X		33. ENDOCRINE SYSTEM
X		34. G-U SYSTEM
X		35. UPPER EXTREMITIES (*Strength, range of motion*)
X		36. FEET
X		37. LOWER EXTREMITIES (*Except feet*) (*Strength, range of motion*)
X		38. SPINE, OTHER MUSCULOSKELETAL
XXXXX		39. IDENTIFYING BODY MARKS, SCARS, TATTOOS
X		40. SKIN, LYMPHATICS
X		41. NEUROLOGIC (*Equilibrium tests under item 72*)
X		42. PSYCHIATRIC (*Specify any personality deviation*)
Females only		(*Check how done*) 43. PELVIC ☐ VAGINAL ☐ RECTAL

NOTES.—*Describe every abnormality in detail. (Enter pertinent item number before each comment; continue in item 73 and use additional sheets if necessary.)*

#39 Appendectomy scar.

(*Continue in item 73*)

44. DENTAL (*Place appropriate symbols above or below number of upper and lower teeth, respectively*)

O.—*Restorable teeth* X.—*Missing teeth* (6 × 8).—*Fixed bridge, brackets to include abutments*
/.—*Nonrestorable teeth* XXX.—*Replaced by dentures*

RIGHT	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	LEFT
	X															X	
	32	31	30	29	28	27	26	25	24	23	22	21	20	19	18	17	
	X		-X-	O										-X-		X	

REMARKS AND ADDITIONAL DENTAL DEFECTS AND DISEASES

LABORATORY FINDINGS

45. URINALYSIS: SP. GR. 1.022			46. CHEST X-RAY (*Place, date, film number, result*)	47. SEROLOGY (*Specify test used and result*)
ALBUMIN	SUGAR	MICROSCOPIC		
neg	neg		4-29-52 X-RAY NEGATIVE	KAHN NEGATIVE 4-29-52

48. EKG	49. BLOOD TYPE AND RH FACTOR	50. OTHER TESTS

16—62288-1

MEASUREMENTS AND OTHER FINDINGS

51. HEIGHT	52. WEIGHT	53. COLOR HAIR	54. COLOR EYES	55. BUILD: SLENDER / MEDIUM / HEAVY / OBESE	56. TEMP.
71	180	brn	blue	☐ / ☒ / ☐ / ☐	98.6

57. BLOOD PRESSURE (*Arm at heart level*)

SITTING	SYS. 138 / DIAS. 83	RECUMBENT	SYS. 135 / DIAS. 80	STANDING (5 min.)	SYS. 140 / DIAS. 85	

58. PULSE (*Arm at heart level*)

SITTING	AFTER EXERCISE	2 MIN. AFTER	RECUMBENT	AFTER STANDING 3 MIN.
84	94	88	84	86

59. DISTANT VISION	60. REFRACTION	61. NEAR VISION
RIGHT 20/ 20 CORR. TO 20/	BY S. CX	CORR. TO BY
LEFT 20/ 20 CORR. TO 20/	BY S. CX	CORR. TO BY

62. HETEROPHORIA: (*Specify distance*) ES° EX° R. H. L. H. PRISM DIV. PRISM CONV. PC PD

63. ACCOMMODATION	64. COLOR VISION (*Test used and result*)	65. DEPTH PERCEPTION (*Test used and score*)	UNCORRECTED / CORRECTED
RIGHT LEFT	PIP normal		

66. FIELD OF VISION	67. NIGHT VISION (*Test used and score*)	68. RED LENS	69. INTRAOCULAR TENSION

70. HEARING

RIGHT WV 15 /15 SV /15

LEFT WV 15 /15 SV /15

71. AUDIOMETER

	250 *256*	500 *512*	1000 *1024*	2000 *2048*	3000 *2896*	4000 *4096*	8000 *8192*	
RIGHT								
LEFT								

72. PSYCHOLOGICAL AND PSYCHOMOTOR (*Tests used and score*)

73. NOTES (*Continued*) **AND SIGNIFICANT OR INTERVAL HISTORY**

(*Use additional sheets of plain paper if necessary*)

74. SUMMARY OF DEFECTS AND DIAGNOSES (*List diagnoses with item numbers*)

75. RECOMMENDATIONS—FURTHER SPECIALIST EXAMINATIONS INDICATED (*Specify*)

76. PHYSICAL PROFILE

P	U	L	H	E	S

77. EXAMINEE (*Check*)

☒ IS ☐ IS NOT QUALIFIED FOR Re-enlistment

PHYSICAL CATEGORY

A	B	C	E

78. IF NOT QUALIFIED, LIST DISQUALIFYING DEFECTS BY ITEM NUMBER

79. TYPED OR PRINTED NAME OF PHYSICIAN J.E. JACK SA SURG USPHS(R) — SIGNATURE J.E. Jack

80. TYPED OR PRINTED NAME OF PHYSICIAN — SIGNATURE

81. TYPED OR PRINTED NAME OF DENTIST OR PH~~YSICIAN~~ (*Indicate which*) J.R. HODGES SADS USPHS(R) — SIGNATURE J.R. Hodges

82. TYPED OR PRINTED NAME OF REVIEWING OFFICER OR APPROVING AUTHORITY — SIGNATURE — NUMBER OF ATTACHED SHEETS

U. S. GOVERNMENT PRINTING OFFICE 16—62288-1

NAVCG 2525-A (Rev. 6-45)

DENTAL RECORD

(To be filled in by the dental officer)

DO NOT REMOVE FROM HEALTH RECORD

WATTS
(Surname)

Alan B.
(Christian name(s))

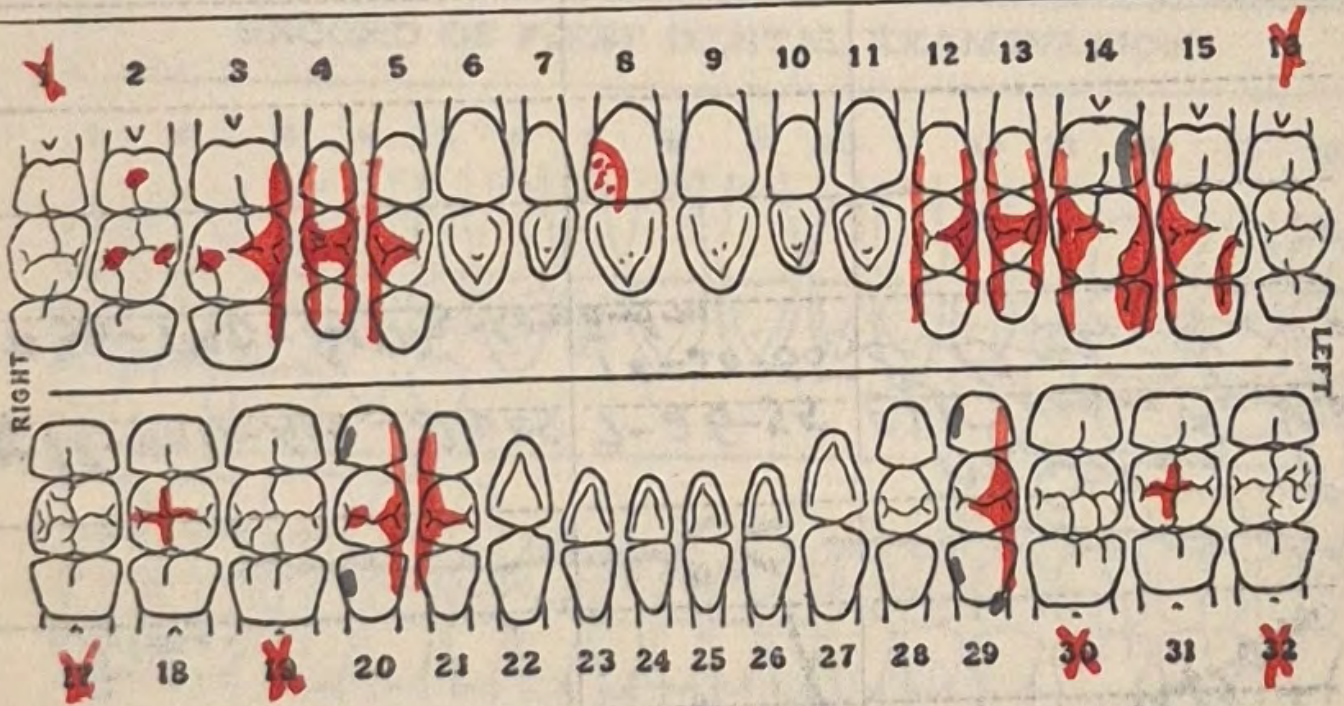
BM1 (L)(AN)
(Rank or rate)

209-630
(Service number)

INSTRUCTIONS

See Instructions for Dental Officers

RECORD OF FIRST DENTAL EXAMINATION



REMARKS:

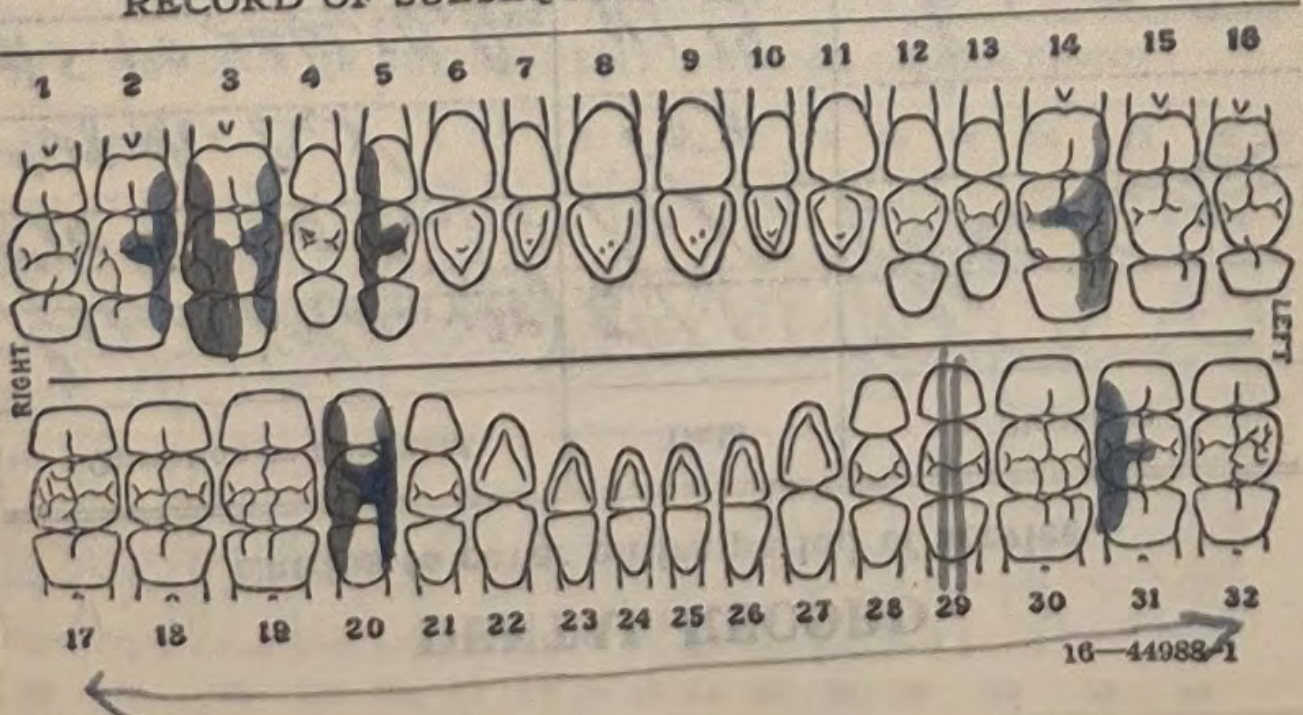
Examined: 8/7/53
Motorized Dental Unit #9

Class II malocclusion
Space closed #31
#18,31 mesial occlusion
##20,21,28,29 distal occlusion

Jack D. Robertson

JACK D. ROBERTSON, SADS, USPHS
(Date and signature of examining dental officer should follow remarks)

RECORD OF SUBSEQUENT DENTAL OPERATIONS



16—44988-1

16—44988-1

DENTAL RECORD

Entries to cover entire period of service

Operation or treatment	Date	Signature
Exam X-R (Bw + 2#)	8/	[illegible]
#4 Dot Co Am	12/ 53	[illegible]
#28 MR Cl X		
#5 DO Sedfil CB, Am	11/19/53	Jack S Shelton
#3-DOL - CB Am.		
#20-00-CB-Am.	CC	
Examination	8/	S/
2 X-Ray (Bw's)	10/ 54	
#20-MO-		
Cem. B. - Am.		
#3-MO-Cem. B.-	8/ 11/ 54	S/
Am. - Amal.		
#2-MO-Cem. B.-		
Am.	CC	
#18-MO-Am.-Amal	7-25-55	MDC #9 S/E Duane Oakes
#30-MO-AgNO3-Cem B-Am	10-20-55	E Oakes

16—44988-1 U. S. GOVERNMENT PRINTING OFFICE

NAVCG 2525-A (Rev. 6-45)

DENTAL RECORD

(To be filled in by the dental officer)

DO NOT REMOVE FROM HEALTH RECORD

WATTS (Surname)

Allan B. (Christian name(s))

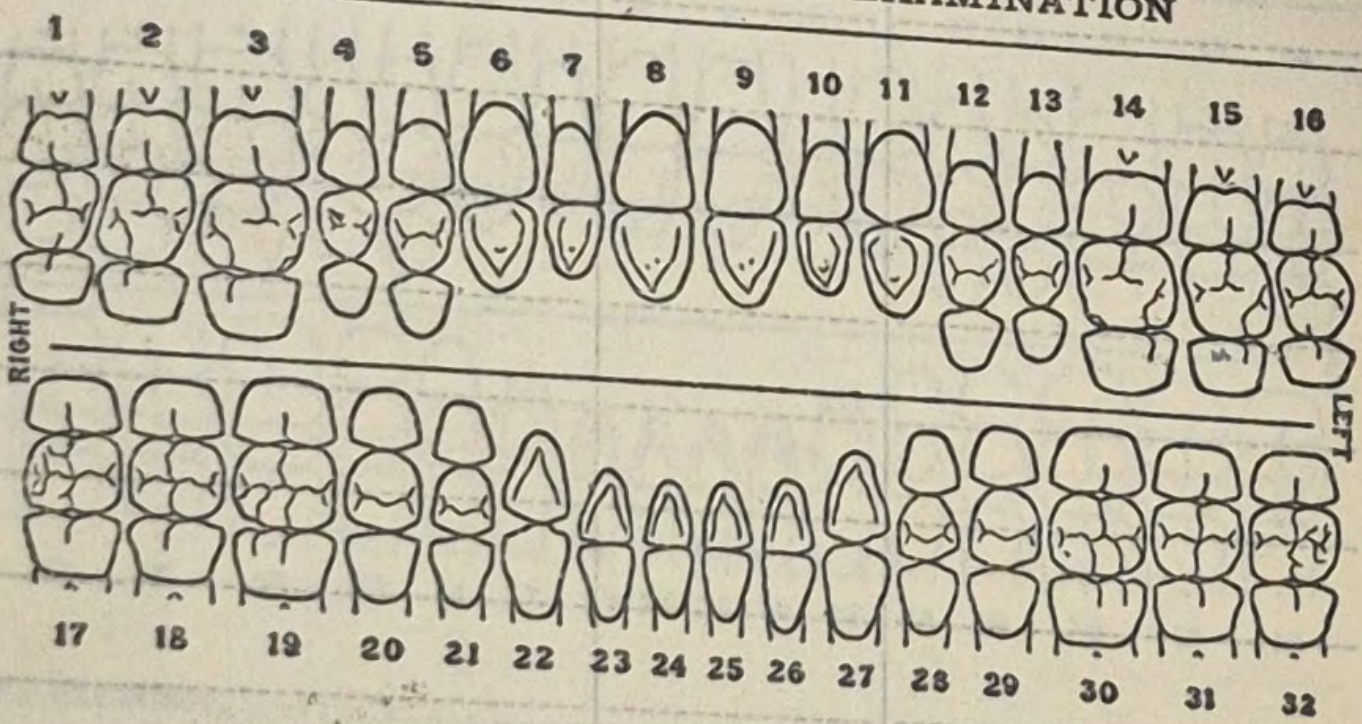
BM1 (Rank or rate)

209-630 (Service number)

INSTRUCTIONS

See Instructions for Dental Officers

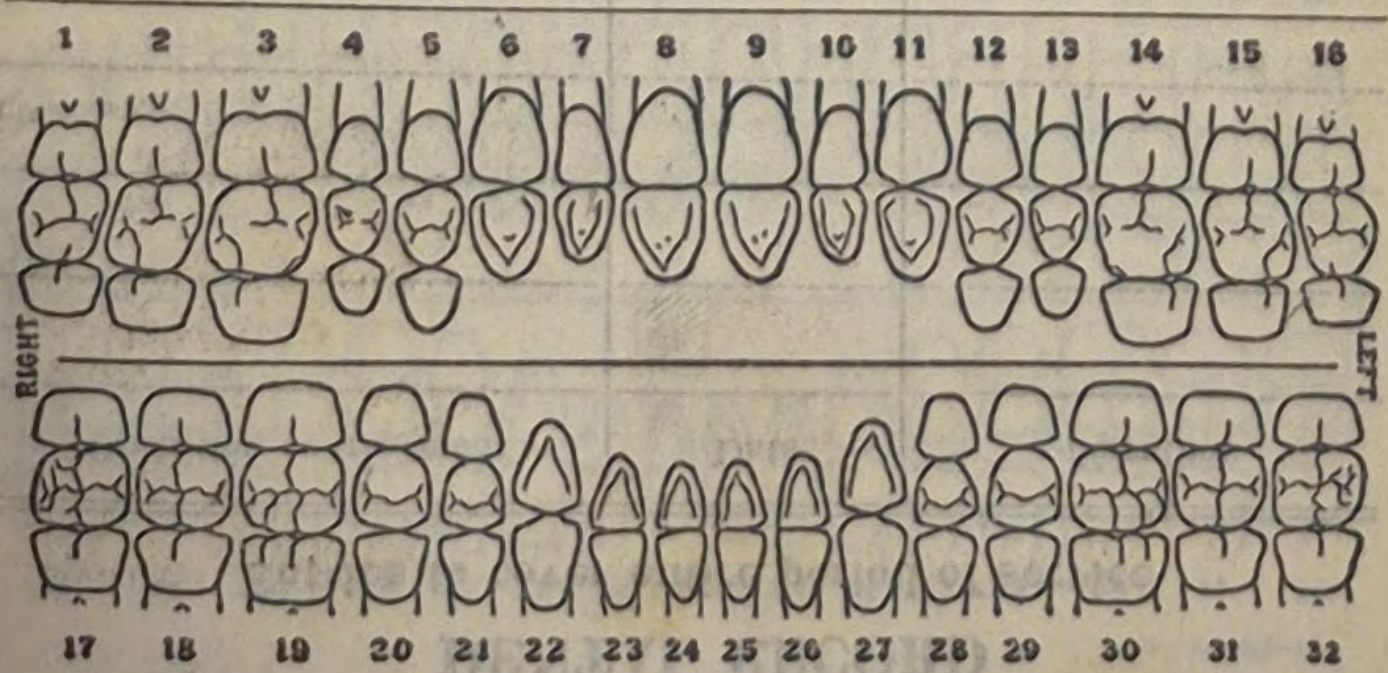
RECORD OF FIRST DENTAL EXAMINATION



REMARKS:

(Date and signature of examining dental officer should follow remarks)

RECORD OF SUBSEQUENT DENTAL OPERATIONS



16—44988-1

CG 2525-A (Rev. 6-45)

DENTAL RECORD

(To be filled in by the dental officer)

DO NOT REMOVE FROM HEALTH RECORD

Watts
(Surname)

Edgar B
(Christian name(s))

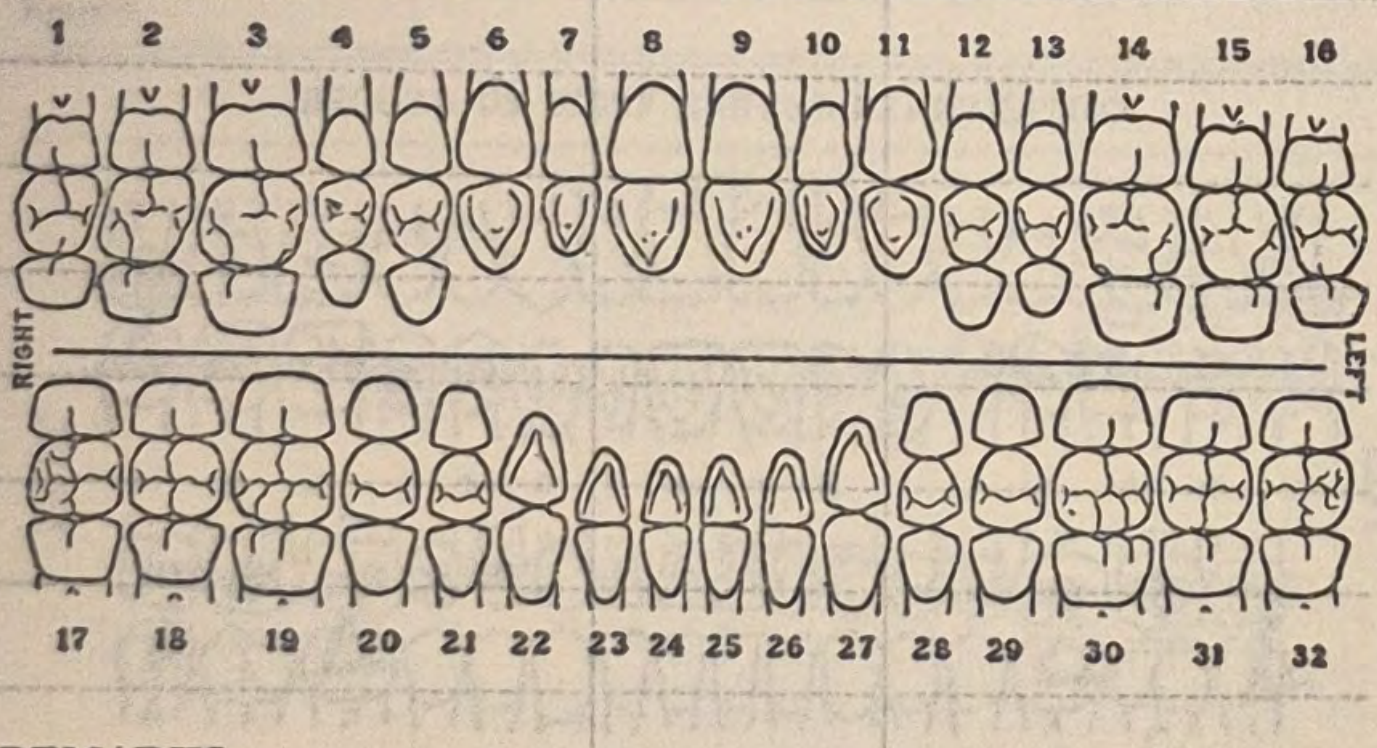
209.630
(Rank or rate)

(Service number)

INSTRUCTIONS

See Instructions for Dental Officers

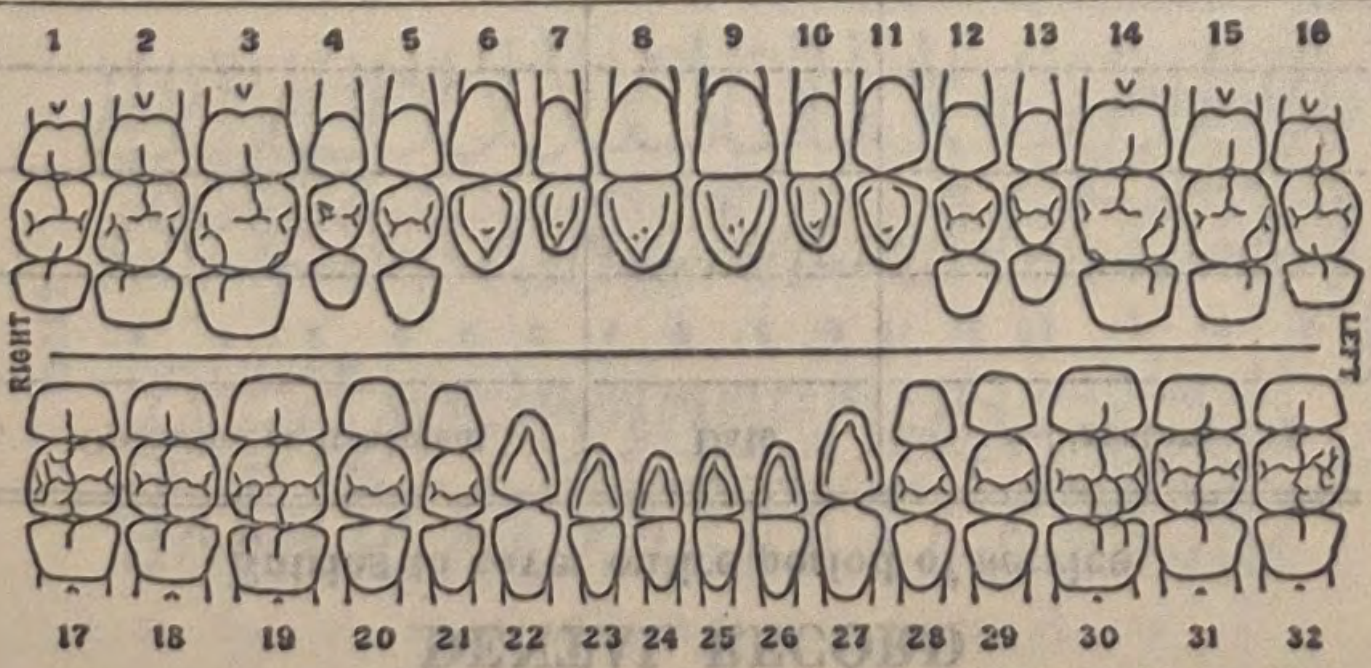
RECORD OF FIRST DENTAL EXAMINATION



REMARKS:

(Date and signature of examining dental officer should follow remarks)

RECORD OF SUBSEQUENT DENTAL OPERATIONS



16—44988-1

Form 2525-A—TREASURY DEPARTMENT—COAST GUARD

DENTAL RECORD

(To be filled in by the Dental Officer)

WATTS
(Surname)

Alan , Brennen
(Given name-s)

Surfman
(Rank or rate)

209-630
(Service number)

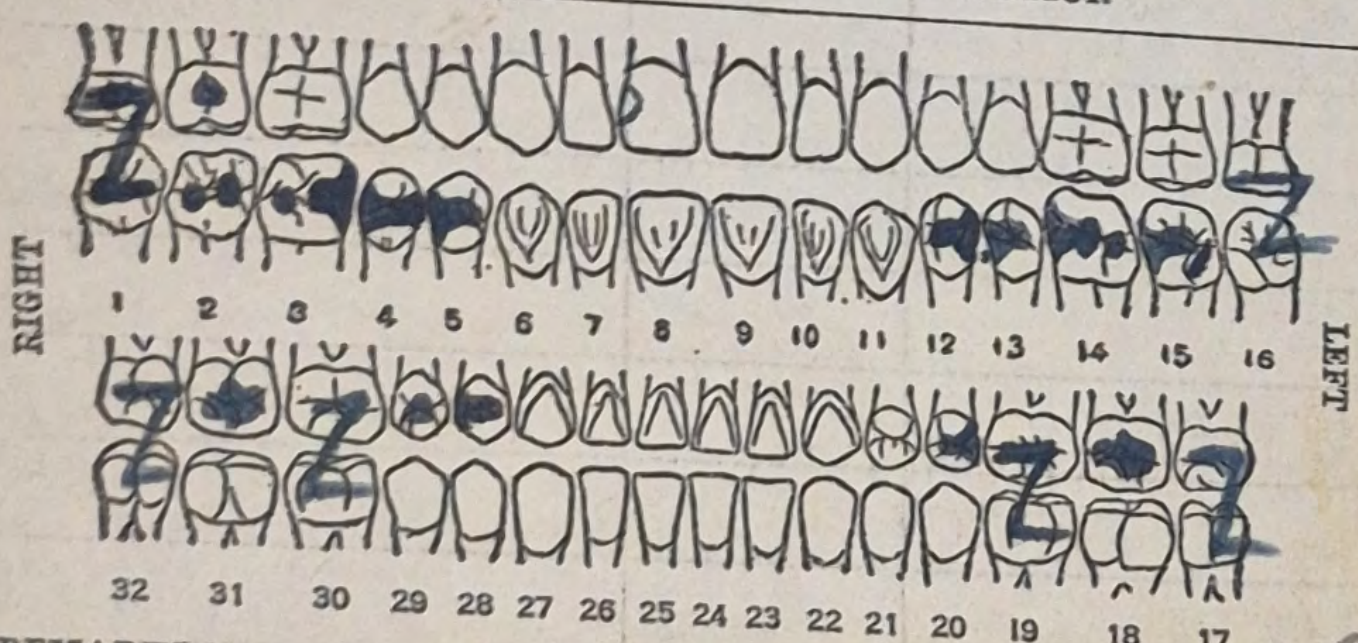
INSTRUCTIONS

The Dental Record will be inserted as the top sheet in the Health Record. This sheet will be prepared when an officer or man is first examined or treated by a dental officer, and subsequent entries will be made according to instructions.

The dental sheet should accompany a patient sent to another ship or station for dental treatment.

Upon the completion of treatment and the necessary entries over the signature of the dental officer, it will be sent to the officer having the custody of the Health Record.

RECORD OF FIRST DENTAL EXAMINATION



REMARKS: 25

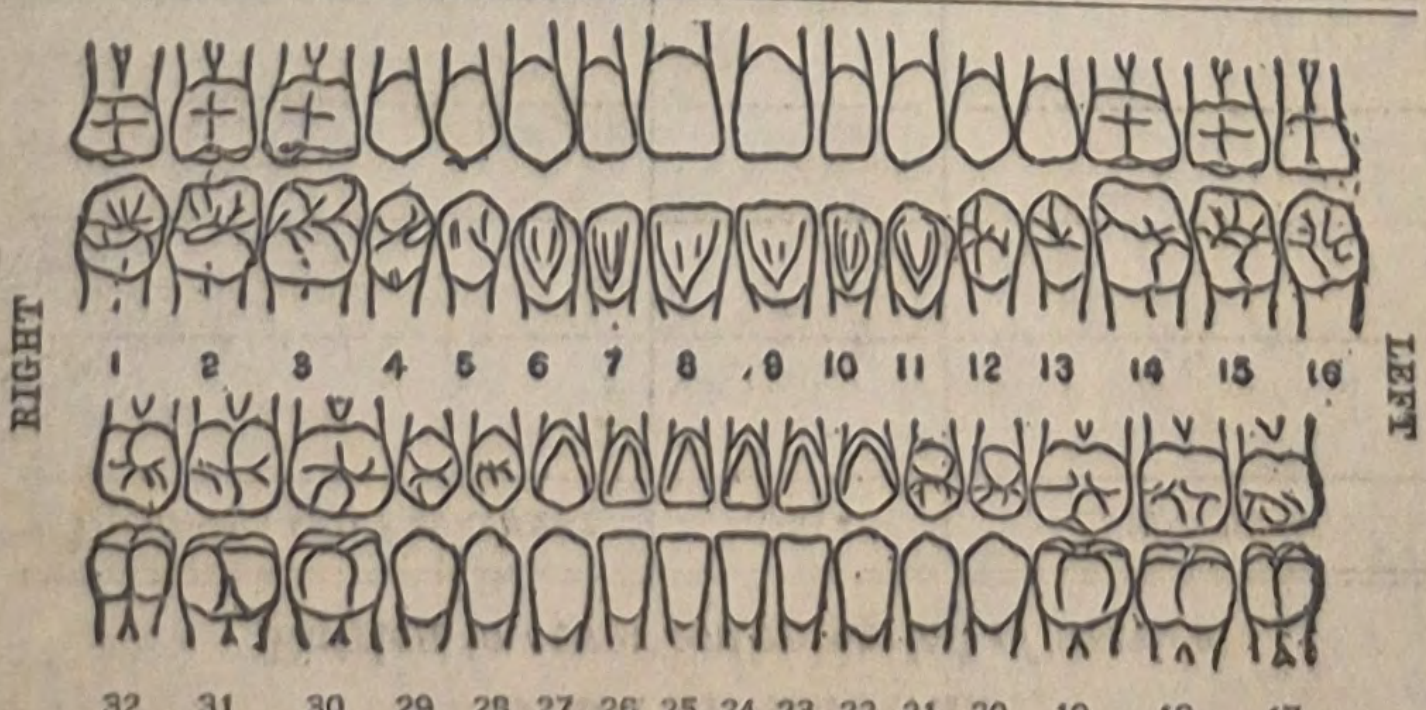
Space closed #19, 30

~~MOBILE DENTAL UNIT No. 7, TND~~ 8-3 1945
~~Examined this date and found dentally qualified for sea or overseas duty.~~
~~Form 2525-A is present in this health Record and properly executed.~~

David Bamet
Lieutenant (D)

(Date and signature of examining dental officer)

RECORD OF SUBSEQUENT DENTAL OPERATIONS



DENTAL RECORD

Entries to cover entire period of service

DIAGNOSIS AND TREATMENT	DATE	SIGNATURE
Examination	8-3-45	J. Parmet
Prophylaxis	"	J. Parmet
Completed	"	J. Parmet

U. S. GOVERNMENT PRINTING OFFICE: 1933 2—16140

CG 2525-C (Rev.
TREASURY DEPARTMENT
U. S. COAST GUARD

IMMUNIZATION RECORD

Watts Alan
(Surname)

B.
(Christian name(s))

209.630
(Rank or rating)

(Date)

COWPOX VACCINATION

Number of prior scars ----------

Date	Reaction	Signature of Medical Officer (in ink)
7-28-48	AR	OBM 2HM1
1/19/53	1 R	A. J. Shalek HM2

Enter result as "Primary," "Accelerated," or "Immune."

TYPHOID PROPHYLAXIS

Date administered			Signature of Medical Officer (in ink)
First	Second	Third	
8-1-48	8-5-48	8-12-48	OBM 2HM1
1/19/53	2/6/53	3/3/53	A. J. Shalek HM2

BOOSTER

Date	Dose	Signature of Medical Officer (in ink)
1-4-54	0.1 cc	J. C. Machael Hm 2

Remarks: ----------

YELLOW FEVER PROPHYLAXIS

Date	Dose	Signature of Medical Officer (in ink)

Remarks: ----------

16—45567-2

IMMUNIZATION RECORD—(Continued)

TETANUS PROPHYLAXIS

Date	Dose	Signature of Medical Officer (in ink)
8-31-48	½ cc	[illegible]
11-23-48	½ c.c.	[illegible]
1/19/53	Booster 0.5 cc.	[illegible]
3/3/53	0.5 cc	[illegible]
8/10/54	0.5cc	[illegible]

Remarks: ---

CHOLERA PROPHYLAXIS

Date	Dose	Signature of Medical Officer (in ink)

Remarks: ---

TYPHUS PROPHYLAXIS

Date Administered			Signature of Medical Officer (in ink)
First	Second	Third	

BOOSTER	Date	Dose	Signature of Medical Officer (in ink)

Remarks: ---

OTHER INOCULATIONS (diphtheria, plague, etc.)

Date	Inoculation	Signature of Medical Officer (in ink)

Remarks: ---

GPO 16—45567-1

NCG—2525 B

PHYSICAL EXAMINATION RECORD

(To be completely made up by medical officer, in duplicate)

Name WATTS, Alen B. (Surname first) Service Number 209-630

Age: Years 27 Months 3 Color White

For: Fitness for sea duty
(Special temporary or regular enlistment, appointment or promotion)

Rank or Rating B.M.1c.

Place Rockland, Me Date 24 April, 1944

Personal Medical History Usual childhood diseases

Vision: R.E. 20/ 20 L.E. 20/ 20 Corrected: R.E. 20/ ____ L.E. 20/ ____

Color blind? No Test used Plates

Hearing: Conversational speech R.E. 30/ 30 L.E. 30/ 30

Eyes, eyelids, and reflexes Normal

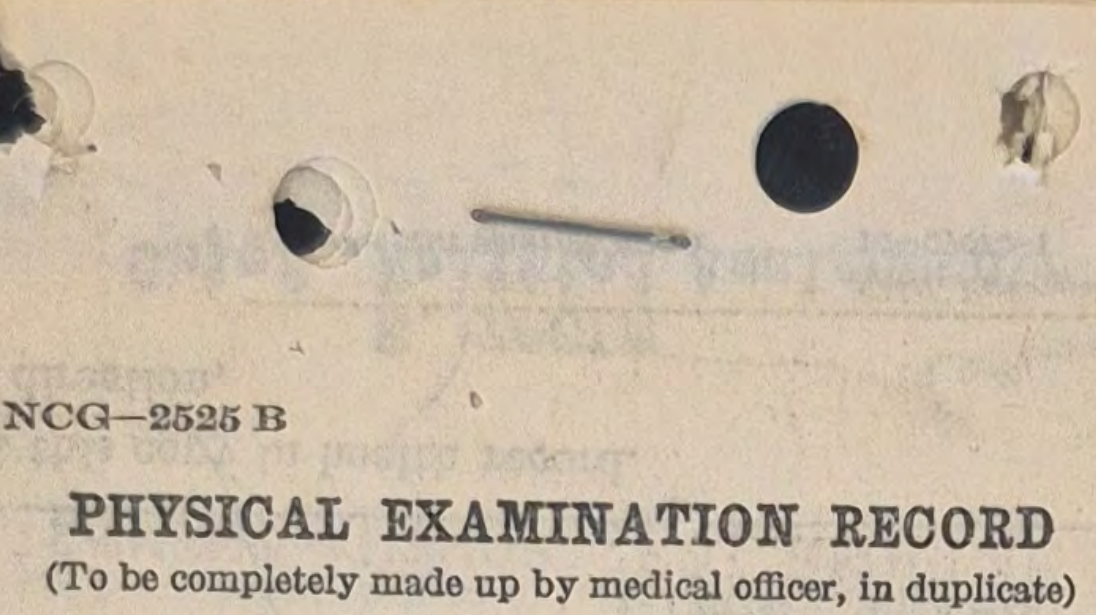
Ears: Right Normal Left Normal
(Condition of drum, discharge, etc.)

Head, face, and neck Normal

Mouth, nose, and throat Normal

Teeth (indicate on diagram: Missing, "z"; replaced, "x"; carious, "I".)

(Right Side)



Gums Normal Temperature 97.6

Height 71 inches. Weight (stripped) 160 lbs. Obesity No

Skin Normal

Lymph. glands Normal

Chest: Inspiration 39½ Expiration 36

Heart and blood vessels Normal

Blood pressure: Systolic 120 Diastolic 80

Pulse before exercise 76, after exercise 80 after 2 min. 80

Lungs Normal

Abdomen and pelvis Normal

Genito-urinary organs Normal

Spine and extremities Normal

Nervous and mental conditions Normal

Urine: Albumin Neg Sugar Neg Shreds No

Microscopical exam. (if indicated) epithelia ____ Sp. Gr. 1.

Blood cells ____ Pus cells ____ Casts ____

Blood (if indicated) Hb ____%. Reds ____ Whites ____

Wassermann or Kahn test: Date 2-14-44 Result Neg

16—27070-1

REMARKS: _____

_____

CERTIFICATE

~~We~~ / I } certify that { ~~we~~ / I } have personally made this physical examination and find that ~~WATTS, Alan B.~~

He is physically qualified for ~~Sea duty~~
(Enlistment, appointment, promotion)

He is physically qualified to perform the duties of ~~P.A.1c.~~
(Use in case of promotion of commissioned officer or annual examination) (Rank)

He is not physically qualified for _____

on account of _____

_____

E. J. SMITH
Surgeon, U.S. Public Health Service.

P.A.

1st INDORSEMENT

_____
(Date)

Place _____

From:

To: Commandant.

_____

1. Forwarded for action. Present status:

_____

_____
Commanding—Dist. Comdr.-Off. in Chg.

2d INDORSEMENT

HEADQUARTERS MEDICAL OFFICE.
U.S. COAST GUARD, Washington.

4-29-44
(Date)

The findings of the certificate are ~~not~~ approved _____

_____

_____

_____

By direction of the Surgeon General.

_____
Medical Director, U.S. Public Health Service.

3d INDORSEMENT

HEADQUARTERS, WASHINGTON.

1 May, 1944
(Date)

From: Commandant.

To: Commanding Officer, CG Station, Port Clyde, Maine

1. REENLISTMENT AUTHORIZED; REGULAR ESTAB.

Insert this copy in health record.
By direction.

NCG—2525 B

PHYSICAL EXAMINATION RECORD

NCG—2525 B

PHYSICAL EXAMINATION RECORD

(To be completely made up by medical officer, in duplicate)

Name WATTS, Alan B. (Surname first) Service Number 209-630

Age: Years 27 Months 3 Color White

For: Fitness for Service (Special, temporary or regular enlistment, appointment or promotion)

Rank or Rating P.M.1c.

Place Rockland, Me Date 24 April, 1944

Personal Medical History Usual childhood diseases

Vision: R.E. 20/ 20 L.E. 20/ 20 Corrected: R.E. 20/ ____ L.E. 20/ ____

Color blind? No Test used Plates

Hearing: Conversational speech R.E. 30/ 30 L.E. 30/ 30

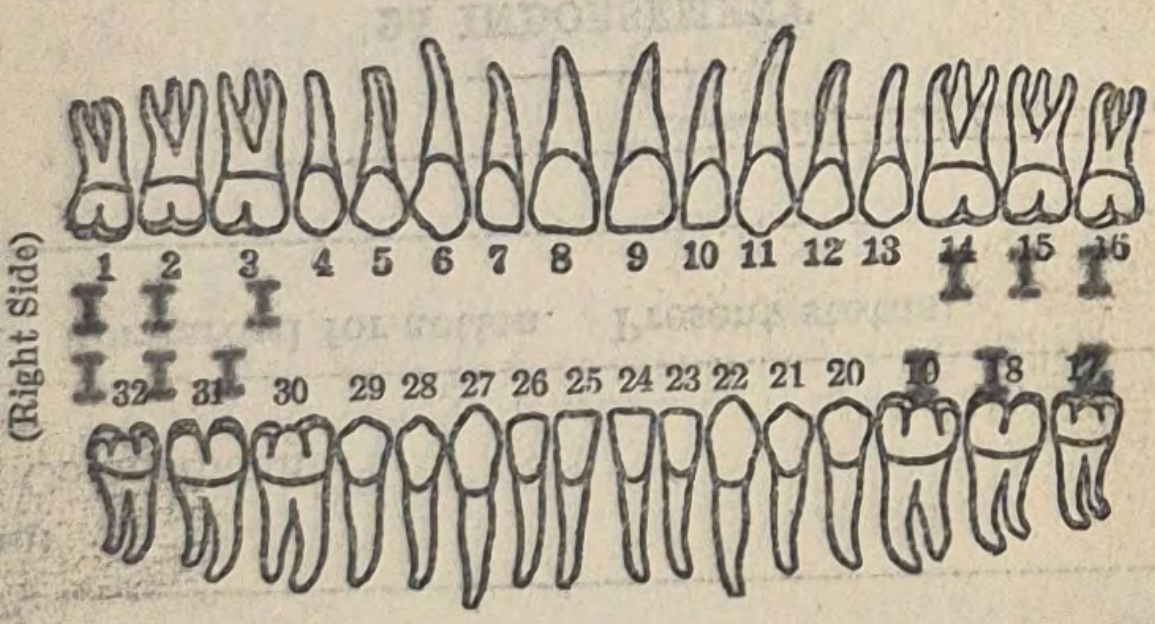
Eyes, eyelids, and reflexes Normal

Ears: Right Normal Left Normal
(Condition of drum, discharge, etc.)

Head, face, and neck Normal

Mouth, nose, and throat Normal

Teeth (indicate on diagram: Missing, "z"; replaced, "x"; carious, "I".)



Gums Normal Temperature 97.6

Height 71 inches. Weight (stripped) 160 Lbs. Obesity No

Skin Normal

Lymph. glands Normal

Chest: Inspiration 39½ Expiration 36

Heart and blood vessels Normal

Blood pressure: Systolic 120 Diastolic 80

Pulse before exercise 76, after exercise 80 after 2 min. 80

Lungs Normal

Abdomen and pelvis Normal

Genito-urinary organs Normal

Spine and extremities Normal

Nervous and mental conditions Normal

Urine: Albumin Neg Sugar Neg Shreds No

Microscopical exam. (if indicated) epithelia ____ Sp. Gr. 1018

Blood cells ____ Pus cells ____ Casts ____

Blood (if indicated) Hb ____%. Reds ____. Whites ____

Wassermann or Kahn test: Date 2-14-44 Result Neg

16—27070-1

REMARKS: .....

.....

CERTIFICATE

I } certify that { I } have personally made this physical examination and find that WATTS, Alan B.

He is physically qualified for Sea duty
(Enlistment, appointment, promotion)

He is physically qualified to perform the duties of R.M.1c.
(Use in case of promotion of commissioned officer or annual examination) (Rank)

He is not physically qualified for .....

on account of .....

E. J. SMITH
P.A. *Surgeon, U.S. Public Health Service.*

1st INDORSEMENT

.....
(Date)

Place .....

From:

To: Commandant.

.....

1. Forwarded for action. Present status:

.....

.....
Commanding—Dist. Comdr.-Off. in Chg.

2d INDORSEMENT

HEADQUARTERS MEDICAL OFFICE.
U.S. COAST GUARD, Washington.

.....
(Date)

The findings of the certificate are not approved .....

.....

.....

.....

By direction of the Surgeon General:

.....
Medical Director, U.S. Public Health Service.

3d INDORSEMENT

HEADQUARTERS, WASHINGTON.

.....
(Date)

From: Commandant.

To:

1.

(Date)

PHYSICAL EXAMINATION RECORD

(To be completely made up by medical officer, in duplicate)

Name WATTS. Alan B. Service Number 209-630
(Surname first)

Age: Years 27 Months 1 Color White

For: Regular enlistment
(Special temporary or regular enlistment, appointment or promotion)

Rank or Rating B.M.1c.

Place Rockland Me. Date 2-14-44

Personal Medical History Usual childhood diseases

Vision: R.E. 20/ 20 L.E. 20/ 20 Corrected: R.E. 20/ ____ L.E. 20/ ____

Color blind? No Test used Plates

Hearing: Conversational speech R.E. 30/ 30 L.E. 30/ 30

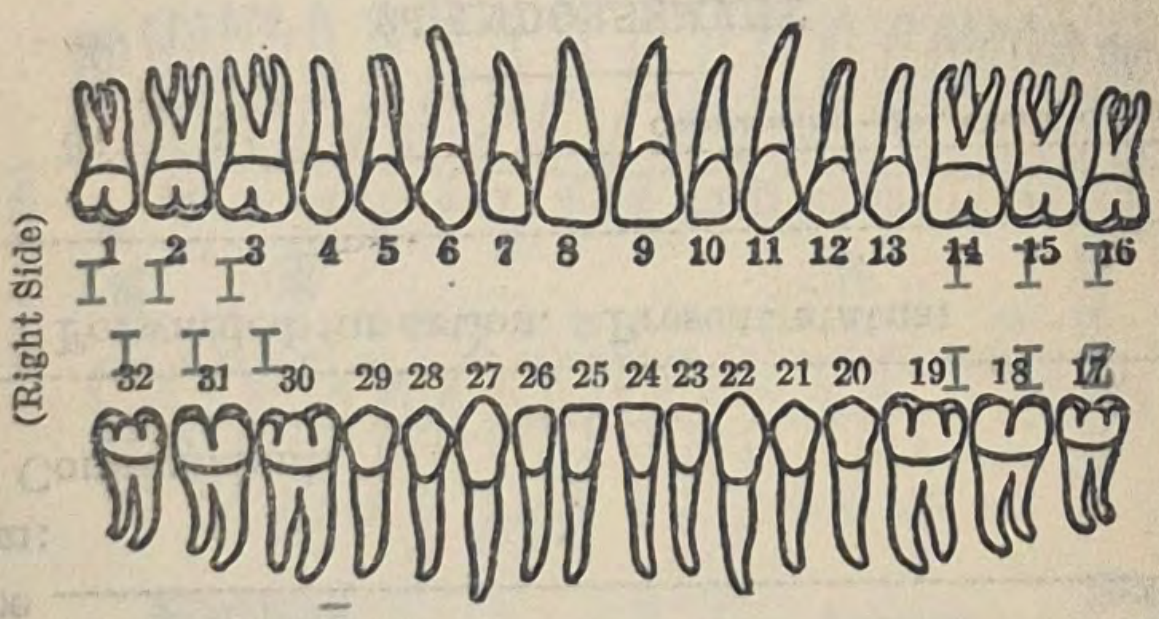
Eyes, eyelids, and reflexes Normal

Ears: Right Normal Left Normal
(Condition of drum, discharge, etc.)

Head, face, and neck Normal

Mouth, nose, and throat Norml

Teeth (indicate on diagram: Missing, "z"; replaced, "x"; carious, "I".)



Gums Normal 160 Temperature 98

Height 71 inches. Weight (stripped) 159 Lbs. Obesity No

Skin Normal

Lymph. glands Norml

Chest: Inspiration 39½ Expiration 36

Heart and blood vessels Normal

Blood pressure: Systolic 118 120 Diastolic 80

Pulse before exercise 80, after exercise 88 80, after 2 min. 76 80

Lungs Normal

Abdomen and pelvis Normal

Genito-urinary organs Normal

Spine and extremities Normal

Nervous and mental conditions Normal

Urine: Albumin Neg. Sugar Neg Shreds No

Microscopical exam. (if indicated) epithelia ____ Sp. Gr. 1022

Blood cells ____ Pus cells ____ Casts ____

Blood (if indicated) Hb ____%. Reds ____ Whites ____

Wassermann or Kahn test: Date 2-14-44 Result ____

16—27070-1

PROTESTANT

REMARKS: _____

_____

CERTIFICATE

I } certify that { I } have personally made this physical examination and find that WATTS, Alan B.

He is physically qualified for Regular enlistment
(Enlistment, appointment, promotion)

He is physically qualified to perform the duties of B.M.1c.,
(Use in case of promotion of commissioned officer or annual examination) (Rank)

He is not physically qualified for _____

on account of _____

_____

E.J. SMITH
Ass't *Surgeon, U.S. Public Health Service.*

1st INDORSEMENT

_____
(Date)

Place _____

From:

To: Commandant.

_____

1. Forwarded for action. Present status:

_____

_____

Commanding—Dist. Comdr.-Off. in Chg.

2d INDORSEMENT

HEADQUARTERS MEDICAL OFFICE.
U.S. COAST GUARD, Washington.

_____
(Date)

The findings of the certificate are not approved _____

_____

_____

By direction of the Surgeon General:

_____
Medical Director, U.S. Public Health Service.

3d INDORSEMENT

HEADQUARTERS, WASHINGTON.

_____
(Date)

From: Commandant.

To:

1.

PHYSICAL EXAMINATION RECORD

(To be completely made up by medical officer, in duplicate)

Name WATTS, Alan B. Service Number 209-630

(Surname first)

Age: Years 21 Months 1 Color White

For: Special temporary enlistment.

(Special temporary or regular enlistment, appointment or promotion)

Rank or Rating Surfman

Place Boston, Mass. Date February 1, 1938

Personal Medical History

Usual childhood diseases. Appendectomy 4 years ago.

Vision: R.E. 20/ 20 L.E. 20/ 20 Corrected: R.E. 20/ _____ L.E. 20/ _____

Color blind? No Test used Iso-plates

Hearing: Conversational speech R.E. 30/ 30 L.E. 30/ 30

Eyes, eyelids, and reflexes Normal

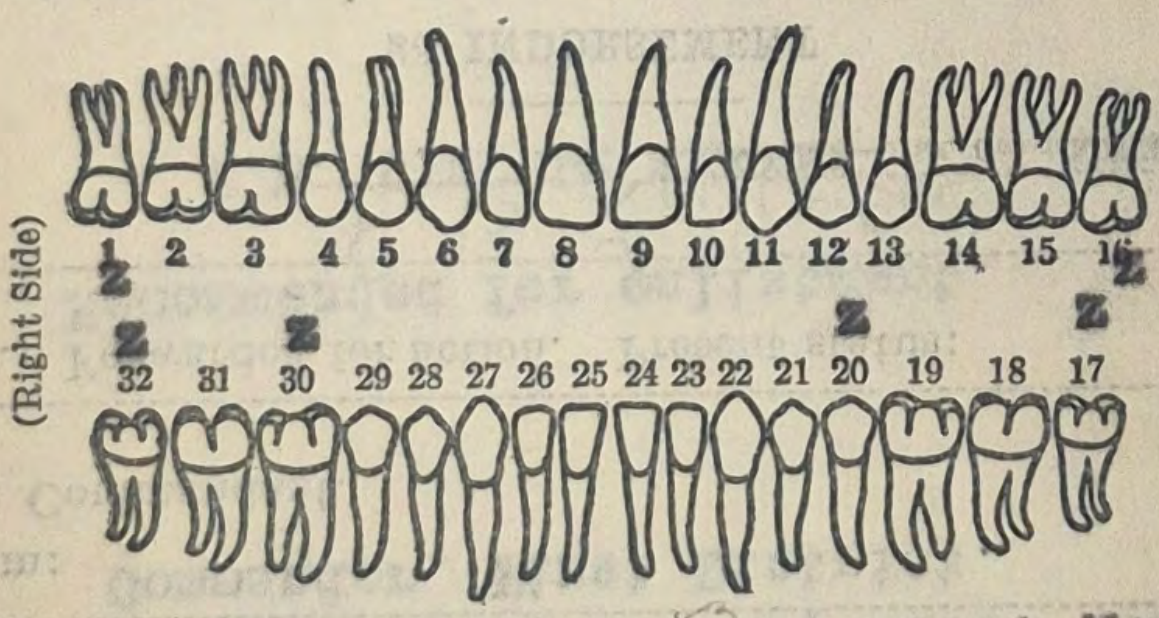
Ears: Right Normal Left Normal

(Condition of drum, discharge, etc.)

Head, face, and neck Normal

Mouth, nose, and throat Normal

Teeth (indicate on diagram: Missing, "z"; replaced, "x"; carious, "I".)



Gums Normal 153 Temperature Normal

Height 70 inches. Weight (stripped) 151 Lbs. Obesity Normal

Skin Normal

Lymph. glands Normal

Chest: Inspiration 38 Expiration 34

Heart and blood vessels Normal

Blood pressure: Systolic 132 Diastolic 80

Pulse before exercise 84, after exercise 104, after 2 min. 92

Lungs Normal

Abdomen and pelvis Normal

Genito-urinary organs Normal

Spine and extremities Normal

Nervous and mental conditions Normal

Urine: Albumin Neg. Sugar Neg. Shreds None

Microscopical exam. (if indicated) epithelia _____ Sp. Gr. _____

Blood cells _____ Pus cells _____ Casts _____

Blood (if indicated) Hb _____%. Reds _____ Whites _____

Wassermann or Kahn test: Date 2/1/38 Result Neg.

2—16141

REMARKS: .....

.....

CERTIFICATE

I } certify that { I } have personally made this physical examination and find that.....

He is physically qualified for Spec. temp. enlistment
(Enlistment, appointment, promotion)

He is physically qualified to perform the duties of Surfman
(Use in case of promotion of commissioned officer or annual examination) (Rank)

~~He is not physically qualified for~~ .....

on account of.....

.....

J. G. McGilliguddy, A.A. *Surgeon, U.S. Public Health Service.*

1st INDORSEMENT:

4 February, 1938.
(Date)

Place Custom House, Boston, Mass.

From: Commander, First District.

To: Commandant.

.....

1. Forwarded for action. Present status:
Recommended for enlistment.

.....

F. B. Lincoln
F.B. LINCOLN ~~Commandant~~ *Dist. Comdr. Officer in Chg.*

2d INDORSEMENT

HEADQUARTERS MEDICAL OFFICE.
U.S. COAST GUARD, Washington.

FEB 8 1938
(Date)

The findings of the certificate are not approved .....

.....

.....

.....

By direction of the Surgeon General:

.....

Medical Director, U.S. Public Health Service.

3d INDORSEMENT

HEADQUARTERS, WASHINGTON.

9 February, 1938
(Date)

From: Commandant.
To: Commander, First District.

1. ENLISTMENT AUTHORIZED STE. ONLY.

.....

PHYSICAL EXAMINATION RECORD

(To be completely made up by medical officer, in duplicate)

Name Watts, Alan B. Service Number 209-650
(Surname first)

Age: Years 21 Months 1 Color White

For: Special Temporary Enlistment
(Special temporary or regular enlistment, appointment or promotion)

Rank or Rating Surfman

Place Port Clyde Date Jan. 18, 1941

Personal Medical History Usual Childhood diseases. Appendectomy 1934.

Vision: R.E. 20/ 20 L.E. 20/ 20 Corrected: R.E. 20/ ____ L.E. 20/ ____

Color blind? No Test used Holmgren's

Hearing: Conversational speech R.E. 30/ 30 L.E. 30/ 30

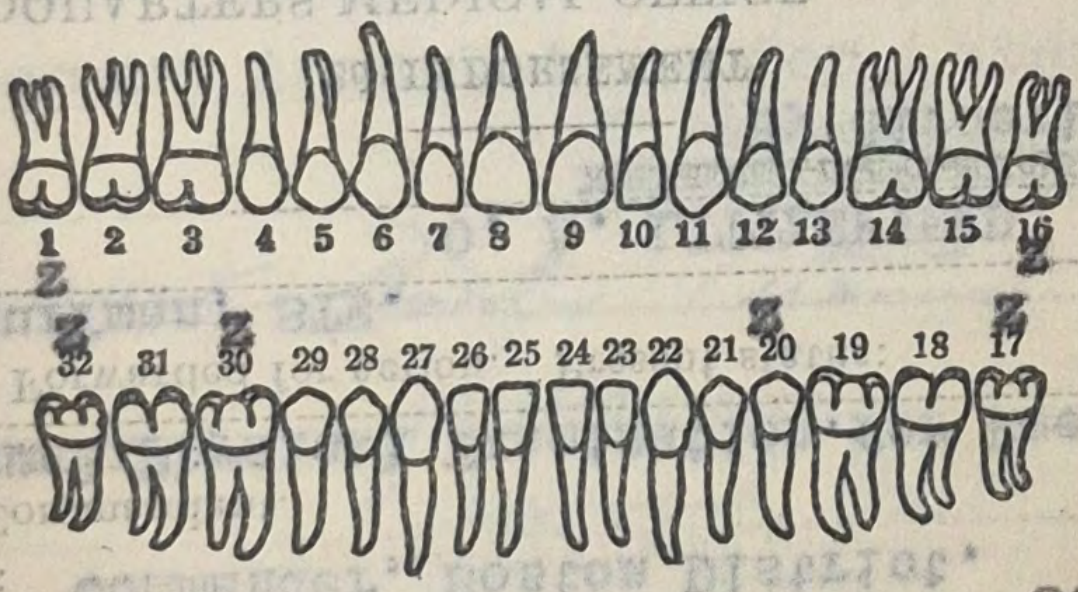
Eyes, eyelids, and reflexes Normal

Ears: Right Normal Left Normal
(Condition of drum, discharge, etc.)

Head, face, and neck Normal

Mouth, nose, and throat Normal

Teeth (indicate on diagram: Missing, "z"; replaced, "x"; carious, "I".)



Gums Normal Temperature 98.6

Height 70 inches. Weight (stripped) 153 Lbs. Obesity No

Skin Normal

Lymph. glands Normal

Chest: Inspiration 38 Expiration 34

Heart and blood vessels Normal

Blood pressure: Systolic 132 Diastolic 80

Pulse before exercise 84, after exercise 104, after 2 min. 88

Lungs Normal

Abdomen and pelvis Normal

Genito-urinary organs Normal

Spine and extremities Normal

Nervous and mental conditions Normal

Urine: Albumin neg. Sugar -- Shreds --

Microscopical exam. (if indicated) epithelia -- Sp. Gr. 10.16

Blood cells -- Pus cells -- Casts --

Blood (if indicated) Hb --%. Reds -- Whites --

Wassermann or Kahn test: Date 1-17-41 Result Negative

REMARKS: ____

CERTIFICATE

I } certify that { I } have personally made this physical examination and find that ____

He is physically qualified for Spec. Temp. Enlist.
(Enlistment, appointment, promotion)

He is physically qualified to perform the duties of Surfman
(Use in case of promotion of commissioned officer or annual examination) (Rank)

He is not physically qualified for ____

on account of ____

Charles B. Pinkerstone

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

1st INDORSEMENT

29 January, 1941.
(Date)

Place Boston, Massachusetts.

From: Commander, Boston District.

To: Commandant.

Physical Examination for Reenlistment.

1. Forwarded for action. Present status: Surfman, STE.

O. A. LITTLEFIELD,

Commandant, Dist. Coast Guard Officer in Charge.

By direction.

2d INDORSEMENT

HEADQUARTERS MEDICAL OFFICE.

U.S. COAST GUARD, Washington.

FEB 1 1941
(Date)

The findings of the certificate are not approved ____

By direction of the Surgeon General:

Carl Thurber

Medical Director, U.S. Public Health Service.

3d INDORSEMENT

HEADQUARTERS, WASHINGTON.

FEB 3 1941
(Date)

From: Commandant.

To: Commander, Boston District.

1. REENLISTMENT AUTHORIZED; STE ONLY

Insert this copy in health record.

By direction,

J. Ellerson

Form 2525-D—Trans. Commandant, WASHINGTON. FEB 3 1942

MEDICAL HISTORY

Page

Surname WATTS Service No. 209-630

Christian name-s Alan Brennen

STATE NAME OF PLACE	DATE EACH NEW ENTRY
Rockland, Maine	February 5, 1942
Anti-inoculation for tetanus. C. Hunt Jameson A. A. Surgeon	
Rockland, Maine	February 5, 1942
Blood typing--type A. C. Hunt Jameson A. A. Surgeon	
Rockland, Maine	March 10, 1942
Second inoculation for tetanus. C. Hunt Jameson A. A. Surgeon	
7/27/48 Booster Tetanus Johnny Young Jonesport, Me.	

MEDICAL HISTORY

Page .....

Surname Watts Service No. 209-630

Christian name–s Alan Brennen

STATE NAME OF PLACE	DATE EACH NEW ENTRY

TREASURY DEPARTMENT
U. S. COAST GUARD
CG-3309 (Rev. 4-55)
FORM APPROVED BY
COMPTROLLER GENERAL, U. S.
APRIL 15, 1952

RECORD OF DISCHARGE, RELEASE FROM ACTIVE DUTY, OR DEATH

DISPOSITION DATA

CG DEPOT SOUTHWEST HARBOR, ME. (Ship or station) (Location) On 1 APRIL 1958 (Date) the below-named individual was

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

This individual was: ☐ Released from active duty ☐ Continued on active duty

Normal date of expiration of enlistment 12 May 1958 (Day) (Month) (Year)

Reason Voluntary retirement

Type discharge certificate NONE

Authority: Title 14, United States Code, Section 355

ENLISTMENT DATA

☒ Enlisted at ☐ Inducted at BOSTON, MASS. (Place) ON 13 May 1952 (Date)

☒ Accepted for enlistment at ☐ Ordered to active duty from BOSTON, MASS. (Place) ON 13 May1952 (Date)

Home address at time of enlistment, induction, or order to active duty HIGH STREET, MACHIAS, MAINE

TRAVEL DATA

I hereby elect travel allowance to MACHIAS, MAINE (Location)

Place of HA on enlistment (See travel instructions)

SIGNATURE Alan B. Watts ALAN B. WATTS

MISCELLANEOUS DATA

☐ Reenlisted on board ☒ Elected cash settlement for SIXTY (Words) 60 (Figures) Days unused leave ☐ Elected to carry over unused leave to new enlistment

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

Completed 20 years service for pay purposes on 14 February 1958 Payment of discharge gratuity ☐ Is directed ☒ Is not directed

REMARKS Certificate of Service DD Form 217 and DD Form 214 issued. I.D. Card No. 79102 destroyed. Final average of marks: PIR 3.79 CONDUCT 4.0 "The records indicate that WATTS, Alan B.(209-630)BMC reenlisted in the U. S. Coast Guard on 13 May 1952 for six yrs. and was paid a reenlistment bonus in the amount of$360.00 and is to be separated by reason of Voluntary Retirement on 1 April 1958.

G. W. Hupper

G. W. HUPPER, CHBOSN W-2, USCG GRUCOM

Elects MA from Boston, Mass. to Machias, Maine.

SIGNATURE DATA

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

SIGNATURE	GRADE AND TITLE	C. O. ORDER NO.
G. W. HUPPER G. W. Hupper	CHBOSN W-2, USCG GRUCOM	244-58

DISBURSING DATA

Travel allowance credited, $ XX.XX Cash settlement for unused accrued leave (60 days) $ 725.10 DUE AT DISCHARGE, $ 626.05

Computation: LSL(60 days) BP&L @ 304.20
LSL(60 days) ALLOW @ 1.95
TAX DEDUCTED 109.51

PERSONAL FUNDS, $ N/A

GRATUITY CREDITED, $ N/A

Ship or station	NAME OF A. C. O.
USCG DEPOT SOUTHWEST HARBOR, MAINE	J. E. GILES, CHSPCK, W-2, USCG

NAME (Last)	(First)	(Middle)	SERVICE NO.	RATE
WATTS,	ALAN	BRENNAN	209-630	BMC

RECORD OF DISCHARGE, RELEASE FROM ACTIVE DUTY, OR DEATH
Edition of 4-52 may be used.

16—66654-3

TREASURY DEPARTMENT
U. S. COAST GUARD
CG-3307 (12-53)

ADMINISTRATIVE REMARKS

SHIP OR STATION

USCG DEPOT, SOUTHWEST HARBOR, MAINE

3-25-57 - Authorized to wear 2 bronze stars on CG Good Conduct Medal for periods ending: 2-14-53 and 2-14-56.

G. W. Hupper.

G. W. HUPPER, CHBOSN W-2, USCG - GRUCOM

---

1 April 1958

Completed 20 years, 01 months and 16 days of active military duty. Deductible time -00- days.

Not entitled to MOP.

1 APRIL 1958, Voluntarily retired. Auth: Title 14, U. S. Code, Section 355. and COMDT(PE-1) ltr dtd 2/19/58 Home address: 15 High Street, Machias, Me.

G. W. HUPPER, CHBOSN W-2, USCG
GROUP COMMANDER

RECORD OF TRANSFER

DATE TRANSFERRED		AUTHORITY	
RATE	DATE OF RATE	SIGNATURE	GRADE AND TITLE

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

RECORD OF RECEIPT

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

NAME (Last)	(First)	(Middle)	SERVICE NO.
WATTS,	ALLEN	BRENNEN	209-630

ADMINISTRATIVE REMARKS

16—66780-2

TREASURY DEPARTMENT
U. S. COAST GUARD
CG-3307 (12-53)

ADMINISTRATIVE REMARKS

SHIP OR STATION

USCG DEPOT, SOUTHWEST HARBOR, MAINE

3-25-57 - Authorized to wear 2 bronze stars on CG Good Conduct Medal for periods ending: 2-14-53 and 2-14-56.

G. W. Hupper.

G. W. HUPPER, CHBOSN W-2, USCG - GRUCOM

---

1 April 1958

Completed 20 years, 01 months and 16 days of active military duty. Deductible time -00- days.

Not entitled to MOP.

1 APRIL 1958, Voluntarily retired. Auth: Title 14, U. S. Code, Section 355. and COMDT(PE-1) ltr dtd 2/19/58 Home address: 15 High Street, Machias, Me.

G. W. HUPPER, CHBOSN W-2, USCG
GROUP COMMANDER

RECORD OF TRANSFER

DATE TRANSFERRED		AUTHORITY	
RATE	DATE OF RATE	SIGNATURE	GRADE AND TITLE

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

RECORD OF RECEIPT

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

NAME (Last)	(First)	(Middle)	SERVICE NO.
WATTS,	ALLEN	BRENNEN	209-630

16—66780-2

TREASURY DEPARTMENT
U. S. COAST GUARD
CG-3307 (1-52)

ADMINISTRATIVE REMARKS

SHIP OR STATION

CG GROUP, Rockland, Maine

CG Group
Rockland, Maine

29 January 1953

Received three (3) Good Conduct Bars this date for three year periods of meritorious enlisted service in the United States Coast Guard ending 2-14-44, 2-14-47, and 2-14-50 while attached to the CG-38668, Group Rockland & Moose Peak LBS.

M. O. WRIGHT, CHBOSN, USCG

1-30-56 Article 137 UCMJ has been complied with this date.

1-30-56 Code of Conduct for members of the Armed Forces has been complied with This date.

M. O. WRIGHT

RECORD OF TRANSFER

DATE TRANSFERRED	AUTHORITY	
25 JANUARY 1957	COMONECGD (p) MSG 242149-Z JAN 1957	
RATE: BMC(AN) / DATE OF RATE: 10-16-55	SIGNATURE: H. N. LITCHFIELD	GRADE AND TITLE: CHBOSN W-2 USCG

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

RECORD OF RECEIPT

REPORTED AT (Ultimate destination)	DATE REPORTED	SIGNATURE (Grade and title)
DEPOT, SW HBR, MAINE	1/29/57	G. W. HUPPER, CHBOSN W-2, USCG - CHBOSN

NAME (Last)	(First)	(Middle)	SERVICE NO.
WATTS,	Allen	B	209-630

ADMINISTRATIVE REMARKS

16—66780-1

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

ADMINISTRATIVE REMARKS

SHIP OR STATION

Commander, CG Group Rockland Me

6-25-55 - Has served outside the CONLUS aboard the CG-40533

M. O. WRIGHT
GRUCOM ROCKLAND ME

RECORD OF TRANSFER

DATE TRANSFERRED		AUTHORITY	
RATE	DATE OF RATE	SIGNATURE	GRADE AND TITLE

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

RECORD OF RECEIPT

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

NAME (Last)	(First)	(Middle)	SERVICE NO.
WATTS,	Alan	B.	209-301

16—66780-1

TREASURY DEPARTMENT
U. S. COAST GUARD
CG-3336 (4-52)

MARKS

1. DATE	2. Reason	3. Rate	4. PIR	5. ALOM	6. Conduct	7. Ship or Station	8. Signature
*6-30-56	EQM	BMC	3.8	3.8	4.0	CG GROUP ROCKLAND ME	CHBOSN W-3 USCG
	ADAPTABILITY FOR WARRANT GRADE 3.8						CHBOSN W-3 USCG
8-23-56	DET CO.	BMC	3.8	3.8	4.0	CG GROUP ROCKLAND ME	CHBOSN W-3 USCG
*9-30-56	EQM	BMC	3.8	3.8	4.0	CG GROUP ROCKLAND ME	CHBOSN W-2 USCG CO.
	ADAPTABILITY FOR WARRANT GRADED 3.8						CHBOSN W-2 USCG CO.
*12-31-56	EQM	BMC	3.8	3.8	4.0	CG GROUP ROCKLAND	CHBOSN W-2 USCG CO.
	ADAPTABILITY FOR WARRANT GRADED 3.8						CHBOSN W-2 USCG CO.
1-25-57	TRAN	BMC	3.8	3.8	4.0	CG GROUP ROCKLAND	CHBOSN W-2 USCG CO.
3-31-57	EQM	BMC	3.8	3.8	4.0	DEPOT, SOWEST HBR, ME. AWG: 3.7	G.W.HUPPER, CHBOSN W-2, CO
3-31-57	RQM	BMC	3.8	3.8	4.0	DEPOT, SOWEST HBR, ME.	G.W.HUPPER, CHBOSN W-2, CO
*6-30-57	EQM	BMC	3.8	3.8	4.0	DEPOT, SOWEST HBR, ME. AWG: 3.7	G.W.HUPPER, CHBOSN W-2, CO
*9-30-57	EQM	BMC	3.8	3.8	4.0	DEPOT, SOWEST HBR, ME.	G.W.HUPPER, CHBOSN W-2, CO
*1-31-58	EQM	BMC	3.8	3.8	4.0	DEPOT, SW HARBOR, ME. AFWG: 3.7	G.W.HUPPER, CHBOSN W-2, CO
4-1-58	RETIR-EMENT	BMC	3.8	3.8	4.0	DEPOT, SW HARBOR, ME.	G.W.HUPPER, CHBOSN W-2, CO
	AVE.		3.79	- -	4.0	DEPOT SW HARBOR, ME.	G.W.HUPPER, CHBOSN W-2, CO

NAME (Last) WATTS, (First) AIAN (Middle) XX. B. SERVICE NO. ~~XXXXXXX~~ 257-630

MARKS

PAGE 6 2

16—66652-1

MARKS

1. DATE	2. Reason	3. Rate	4. PIR	5. ALOM	6. Conduct	7. Ship or Station	8. Signature
6/30/52	Qrtly	(AN) BML1	3.7	3.6	4.0	Boon Island L/S	/s/ A. E. HUNTLEY CO
8/11/52	Trans	(AN) BML1	3.7	3.6	4.0	Boon Island L/S	/s/ A.E.HUNTLEY CO
9/26-52	Trans	(AN) BML1	3.7	3.6	4.0	Boon Island L/S	/s/ D. W. CLUFF CO
*9/30/52	Qrtly	(AN) BML1	3.7	3.6	4.0	Grp. Rockland, Me.	M.O.Wright CHBOSN CO
*12/31/52	Qrtly	(AN) BML1	3.8	3.7	4.0	Grp. Rockland, Maine	M.O.Wright CHBOSN CO
*3/31/53	EQM	(AN) BML1	3.8	3.7	4.0	Grp.Rockland, Maine	M.O.Wright CHBOSN CO
*6-30-53	EQM	BML1	3.8	3.8	4.0	CG GROUP,ROCKLAND, ME.	M.O.Wright CHBOSN, USCG CO
*9-30-53	RQM	BML1	3.8	3.8	4.0	CG GROUP, ROCKLAND, ME.	M.O.Wright CHBOSN, USCG, CO
*12-31-53	RQM	BML1	3.8	3.8	4.0	CG GROUP, ROCKLAND, ME.	M.O.Wright CHBOSN, USCG, CO
*3-31-54	RQM	BML1	3.8	3.8	4.0	CG GROUP, ROCKLAND, ME	M.O.Wright CHBOSN, USCG, CO
*6-30-54	RQM	BML1	3.8	3.8	4.0	CG GROUP, ROCKLAND, ME.	M.O.Wright CHBOSN, USCG, CO.
*9-30-54	RQM	BML1	3.8	3.8	4.0	CG GROUP, ROCKLAND, ME	M.O.Wright CHBOSN, USCG, CO.
*12-31-54	RQM	BMC(P)	3.8	3.8	4.0	CG GROUP, ROCKLAND ME	M.O.Wright CHBOSN, USCG, CO.
		ADAPTABILITY FOR WARRANT GRADE 3.7					M.O.Wright CHBOSN, USCG, CO.
*3-31-55	RQM	BMC(p)	3.8	3.8	4.0	CG GROUP, ROCKLAND ME	M.O.Wright CHBOSN, USCG, CO.
		ADAPTABILITY FOR WARRANT GRADE 3.7					M.O.Wright CHBOSN, USCG, CO.
*6-30-55	EQM	BMC(P)	3.8	3.8	4.0	CG GROUP ROCKLAND	M.O.Wright CHBOSN, USCG, CO.
		ADAPTABILITY FOR WARRANT GRADE 3.7					M.O.Wright CHBOSN, USCG, CO.
*9-30-55	EQM	BMC(P)	3.8	3.8	4.0	CG GROUP ROCKLAND	M.O.Wright CHBOSN, USCG, CO.
		ADAPTABILITY FOR WAARRANT GRADE 3.7					M.O.Wright CHBOSN, USCG, CO.
-*12-31-55	EQM	BMC	3.8	3.8	4.0	CG GROUP ROCKIAND ME	M.O.Wright CHBOSN W-3 USCG CO.
		ADAPTABILITY FOR WARRANT GRADE 3.8					M.O.Wright CHBOSN W-3 USCG CO.
*3-31-56	EQM	BMC	3.8	3.8	4.0	CG GROUP ROCKIAND ME	M.O.Wright CHBOSN W-3 USCG
		ADAPTABILITY FOR WARRANT GRADE 3.8					M.O.Wright CHBOSN W-3 USCG

NAME (Last) WATTS (First) ALAN (Middle) B SERVICE NO. 209-650

MARKS

16—66652-1

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

LEAVE RECORD

DATE: 1 July 1956 — Credit brought forward from previous record 30 DAYS

AUTHENTICATED BY M. O. WRIGHT, CHBOSN W-3 USCG GRUCOM

LEAVE TAKEN (INCLUSIVE DATES) FROM DAY—MO.—YR.	TO DAY—MO.—YR.	NO. DAYS	KIND	CREDITED DATE DAY—MO.—YR.	CREDITED DAYS	Balance DAYS	SHIP OR STATION	SIGNATURE
				ANCR 6-30-56	30	60	GRP ROCKLAND	M. O. WRIGHT, CHBOSN W-3
				BBF 7-1-56		60	GRP ROCKLAND	M. O. WRIGHT, CHBOSN W-3
11/22/56	12/1/56	10	A			50	GRP ROCKLAND	H. N. LITCHFIELD CHBOSN
NO LV TAKEN SINCE DATE OF LAST ENTRY LV RATIONS CREDITED ARE NOT IN EXCESS OF LV TAKEN						50	GRP ROCKLAND	H. N. LITCHFIELD CHBOSN
15 MAR 57	3 APR 57	20	A			30	DEPOT SW HBR	G.W.HUPPER,CHBOSN W-2,CO
				30 JUN 57	30	60	DEPOT SW HBR	G.W.HUPPER,CHBOSN W-2,CO
3 OCT 57	7 OCT 57	5	A			55	DEPOT, SW HBR	G.W.HUPPER,CHBOSN W-2,CO
25 Feb 58	1 March 58	5	A			50	DEPOT, SW HBR	G.W.HUPPER, CHBOSN W-2, CO
3-20-58	3-31-58	12	A			38	DEPOT, SW HBR	G.W.HUPPER,CHBOSN W-2, CO
				1 APRIL 58	22	60	DEPOT SW HBR	G.W.HUPPER,CHBOSN W-2, CO

VOLUNTARILY RETIRED 1 APRIL 58: ELECTS AND IS ENTITLED TO CASH COMPENSATION FOR 60 DAYS UNUSED LEAVE.

G. W. Hupper

G. W. HUPPER, CHBOSN W-2, USCG
GROUP COMMANDER

DEDUCTIBLE TIME (Inclusive Dates)

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

COMONECGD, Boston, Mass. Date 3/31/58
Paid this date and place for 60 days unused leave computed as follows: LSL(BP&L) @ $304.20 per mon.; LSL(ALLOW) @ $1.95 per day; in the total amount of $725.40

J. E. GILES, CHSPCK, W-2, USCG
Authorized Certifying Officer

NAME (Last) WATTS, (First) ALAN (Middle) B.

SERVICE NO. 206-630

LEAVE RECORD 16—66741-1

LEAVE RECORD

AUTHENTICATED BY

Credit brought forward from previous record DAYS

LEAVE TAKEN (INCLUSIVE DATES) FROM DAY—MO.—YR.	TO DAY—MO.—YR.	NO. DAYS	KIND	CREDITED DATE DAY—MO.—YR.	CREDITED DAYS	Balance DAYS	SHIP OR STATION	SIGNATURE
				7-1-52	4	4		/s/ D.W.CLUFF CO
9/21/52	9/25/52	5	A			-1	L/S BOON ISLAND	/s/ D.W. CLUFF CO
10/30/52	11/3/52	5	A			-6	Group Rockland, Me.	CHBOSN CO
				30 JUN 53	30	24	ROCKLAND GRP.	CHBOSN, USCG, CO
23 JUN 53	27nJUN 53	5	BBF A	1 JUL 53		24 19	ROCKLAND GRP ROCKLAND GRP.	CHBOSN., USCG., CO
~~18 DEC 53~~	~~3 JAN 54~~	~~17~~	~~A~~	[illegible]		~~02~~	~~ROCKLAND GRP.~~	~~CHBOSN, USCG, CO~~
18 DEC 53	23 DEC 53	6	A			13	ROCKLAND GRP.	CHBOSN, USCG, CO
				ANCR 30 JUN 54	30	43	ROCKLAND GRP	CHBOSN, USCG, CO
				BBF 1 JUL 54		43	ROCKLAND GRP	CHBOSN, USCG, CO
17 AUG 54	26 AUG 54	10	A			33	ROCKLAND GRP	CHBOSN, USCG, CO
19 APRIL 55	23 APRIL	5	A			28	ROCKLAND GRP	CHBOSN, USCG, CO
				ANCR 6-30-55	30	58	ROCKLAND GRP	CHBOSN, USCG, CO
				BBF 7-1-55		58	ROCKLAND GRP	CHBOSN, USCG, CO
8-22-55	8-28-55	7	A			51	ROCKLAND GRP	CHBOSN, USCG, CO
2-21-56	2-26-56	6	A			45	ROCKLAND, GRP	CHBOSN W-3 USCG CO.
12 JUN 56	26 JUNE 56	15	A			30	ROCKLAND GRP	CHBOSN W-3USCG

DEDUCTIBLE TIME (Inclusive Dates)

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

NAME (Last) WATTS (First) Alan (Middle) B. SERVICE NO. 206-880

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

CLASSIFICATION TRAINING AND RATING SHEET

1. RATING AND JOB CLASSIFICATION RECORD

Date	Rating	Desig-nator	Other Quali-fication	Authority	Signature (Grade and Title)	Unit
10-1-54	BMC(P)		COMDT (PE-1) ltr dtd 10-1-54, 12-3-23A	CG Regs.	M.O. WRIGHT, CHBOSN, USCG, CO.	GRP ROCKLAND
10-16-55	BMC(AN)		CICGD ltr 10-24-55 COMDT (PE-1)	ltr 10-14-55	M. O. WRIGHT, CHBOSN, USCG, CO.	GRP ROCKLAND

2. RECORD OF SERVICE SCHOOLS ATTENDED

NAME AND LOCATION

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

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

SIGNATURE

NAME AND LOCATION

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

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

SIGNATURE

NAME AND LOCATION

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

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

SIGNATURE

3. GENERAL EDUCATIONAL DEVELOPMENT AND TESTING RECORD

Standard Tests Scores UNK

GCT	MK	AR	MA	READ	EK	CA	SP	PI	OTHER

HIGHEST SCHOOL LEVEL ATTAINED

HS2

LANGUAGE QUALIFICATIONS

None

4. RECORD OF COAST GUARD INSTITUTE COURSES COMPLETED

Date Completed	Name of Course	Mark	Signature
1-27-55	BMC-1	91%	M. O. WRIGHT, CHBOSN

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

Date Completed	Name of Course	Mark	Signature

NAME (Last)	(First)	(Middle)	Service Number	RATING
WATTS,	Alan	B.	209-630	BM1(L)(AN)

NAV. S. and A. Form 510
Form prescribed by Comptroller General, U. S.
November 3, 1943

Commanding Officer's

PAY RECORD ORDER

CG GROUP PORTSMOUTH

Boon Island Light Station (WLB-309425)
(Name and type and number of activity (or unit))

C. O. Order No. 22-52

To DISBURSING OFFICER:

You are hereby authorized and directed to open, adjust or close, as indicated, the pay records of the individuals listed below:

FILE OR SERVICE No.	SURNAME	FIRST NAME	INITIAL	REASON FOR CHANGE *	1952 (YEAR) From—	To—
209-630	WATTS,	Alan	B.	Completed 14 years creditable service on 2/14/52. Certified copy Form 2511 attached	2/15	

(D. O. Symbol number)

A. E. HUNTLEY, CBOSN
(Name and signature)

Commanding OFFICER (See Art. 2025 (2) N. R.)

*Enter descriptive data of reason for commencement or stoppage of credit in the individual's pay record, date of qualification and monthly or daily rate of credit whenever necessary, i. e., "Subs. @ $1.80 per day, Qtrs. @ $1.25 per day, GRFO—Pract 7/2/43, MstrDvr Qual 3/2/39, Messman, Com. Rats."

16—40145-1

NCG 2500-C
(Rev. June 1942)

SERVICE RECORD

RECORD OF WATTS, Alan Brennen (Full name, surname to the left) 209-630 (Service number)

1. TRANSFERS

Departed from—			Reported to—		
Unit	Date	Signature	Unit	Date	Signature
OC1CGD	5-13-52	LTB.do CO	C1CGD(REEN)	5-13-52	LTBYdir.
BOON ISLAND LTSTA	9-26-52	CO	BOON ISLAND LtSta	5/14/52	CO
			Grp.Rockland	10/1/52	(acting) BOSN

2. CHANGES IN RATING

Unit	Rated or disrated to—	Date	Signature
OC1CGD	Reenlisted as BM1(L)(AN)		LTBYdir.

3. DETAILS—RESERVE ACTIVE DUTY

Ship or station	Date		Duty	Signature
	From—	To—		

4. SWIMMING QUALIFICATIONS

Unit	Date of qualification	Signature

16—9676-2

RECORD OF _____ _____
(Full name, surname to the left) (Service number)

5. SPECIAL QUALIFICATIONS

Ship	Date	Proficient in—	Signature
OC1CGD	5-13-52	Transcribed from previous S/R Satisfactorily completed course of instructions in Airs to Navigation school with a mark of 88.0 and no. 2 in a class of 4.	/s/ A. S. ALEXANDER S. Clk, USCG, BY Dir.

6. EFFICIENCY MARKS

Date	Rate	Proficiency in rating	Seamanship	Mechanical ability	Ability as leader of men	Conduct	Signature
(adv. mark disch) 5-13-52	BM1(L)	3.7	--	--	--	4.0	OC1CGD LTBYdi
5-13-52	BM1(L)(AN)	LESS THAN ONE MONTH				4.0	OC1CGD LTBYdir
6-30-52	BM1(L)(AN)	3.7	3.7	3.5	3.6	4.0	BOON ISLAND LTSTA CO
TR CO 8-11-52	BM1LAN	3.7	- -	- -	.36	4.0	BOON ISL LTSTA CO
TR 9-26-52	BM1LAN	3.7	- -	- -	3.6	4.0	BOON ISL LTSTA CO
AVERAGE	X X X X						

Upon receipt of Enlistment Record it shall be checked to see that previous marks have been entered. The last unit at which service is rendered will be held responsible for the completeness of the marks.

7. COMMENDATIONS AND AWARDS

(Award of medals, citations, headquarters commendation, honorable discharge button, etc.)

Ship or station	Date	REMARKS

16—9676-2

RECORD OF WATTS, Alan Brennen (Full name, surname to the left) 209-630 (Service number)

8. LEAVE RECORD

ACCRUED LEAVE				LEAVE TAKEN							
Reason and Date	Creditable service for leave purposes		Number of days earned	Departed		Returned		Type and reason	Number of days	Balance due	SIGNATURE AND UNIT
	Months	Days		Hour	Date	Hour	Date				
5-13-52 IC-HEenl: Payd $_____				for 60 days unused leave on discharge.....						-00-	OC1CGD _____ LTBY
ANCR 6-30-52	1	18	4							4	BOON ISLAND LTSTA
BBF 7-1-52			4							4	CO BOON ISALND LTSTA
				0900	9-20-52	0830	9-26-52	ACCADVREG	5	-1	CO BOON ILS LTSTA

9. PERIODS FOR WHICH LEAVE DOES NOT ACCRUE

(Includes AOL, AWOL, Excess Leave, and Sentence of Confinement by a Coast Guard Court)

From— (Inclusive dates)	To— (Inclusive dates)	Reason	Months	Days	Signature and Unit

RECORD OF _____ _____

(Full name, surname to the left) (Service number)

10. TRIALS BY COURTS MARTIAL

Unit	REMARKS.—Date and kind of court, charges and specifications, findings and sentence, date and action of convening and reviewing authorities, and date of publication of sentence.

11. DEDUCTIBLE TIME

(Includes AOL, AWOL, AOM, Confinement awaiting trial by a Coast Guard Court resulting in conviction and Sentence of Confinement by a Coast Guard Court.) (Under TIME LOST show months and days lost for purposes of longevity credit and actual days to be retained in service beyond the normal date of expiration of enlistment to complete enlistment.)

Period From— To— (Inclusive dates)	Reason (AOL, AOM, etc.)	Time Lost: Longevity Months	Time Lost: Longevity Days	Time Lost: Enlistment Days	Signature and Unit
NO DEDUCTIBLE TIME WHILE ATTACHED TO THIS UNIT					OC1CGD LYBYdir.
NO DEDUCTIBLE TIME WHILE ATTACHED TO THIS UNIT					D.W. CLUFF, BOS GRP GLOUCESTER-BOON ILS LTSTA

12. ON DESERTION

Unit	Date	Remarks	Signature

13. DEATH

Unit	Date	Cause	Place of burial	Disposition of effects	Was death in line of duty?	Signature

14. RETIREMENT

Unit	Date	Cause	Authority	Signature

16—9676-3 U. S. GOVERNMENT PRINTING OFFICE

RECORD OF EMERGENCY DATA

SEE INSTRUCTIONS ON REVERSE BEFORE MAKING ENTRIES

1. DESIGNATOR'S LAST NAME—FIRST NAME—MIDDLE NAME	2. PRESENT SERVICE NO.	3. RANK/RATE	4. DATE OF BIRTH	5. RELIGION
WATTS, ALAN BRENNAN	209-630	BMC	1/1/17	Prot.

6. HOME ADDRESS AT TIME OF ENTRY INTO SERVICE	7. PRIOR MIL. SERVICE	8. FORMER SERVICE NO.	9. SOCIAL SECURITY NO.
Jonesboro, Maine	☐ Yes ☒ No (DATE LAST ENTRY)	None	004-07-5842

FIRST NAME—MIDDLE NAME—LAST NAME (If deceased, so state)	ADDRESS
10. WIFE OR HUSBAND (If none, so state) Louise "D" WATTS	15 High Street, Machias, Maine

11. NAME OF CHILDREN (If none, so state. If step or adopted, so state)	ADDRESS	MARRIED YES	MARRIED NO	SEX	DATE OF BIRTH
Wayne Alan Watts	15 High Street, Machias, Me.		x	M	10/4/41

12. FATHER Fred Noyes Watts (Natural)	ADDRESS Jonesboro, Maine
13. MOTHER Florence Lawrence Watts (Natural)	ADDRESS Jonesboro, Maine
14. ADULT NEXT OF KIN NOT NAMED IN ANY OTHER ITEM None	ADDRESS

14a. ALL PERSONS RECEIVING MORE THAN 50 PERCENT OF THEIR SUPPORT FROM ME (OTHER THAN WIFE OR CHILDREN UNDER 21)	ADDRESS	RELATIONSHIP	DATE OF BIRTH
None			

15. PERSON(S) NAMED ABOVE WHO ARE NOT TO BE NOTIFIED DUE TO ILL HEALTH	ADDRESS
Nos. 11, 12 and 13	Same as above

DESIGNATIONS

		FIRST NAME—MIDDLE NAME—LAST NAME	ADDRESS	RELATIONSHIP
16. BENEFICIARY FOR GRATUITY PAY IN EVENT THERE IS NO SURVIVING SPOUSE OR ELIGIBLE CHILD(REN). NAME PARENTS OR BROTHERS OR SISTERS ONLY (P. L. 881 84th Congress).		Fred Noyes Watts	Jonesboro, Maine	Father
		Florence Lawrence Watts	Jonesboro, Maine	Mother
17. BENEFICIARY OR BENEFICIARIES FOR UNPAID PAY AND ALLOWANCES (P. L. 147, 84th Congress). PERCENT OF SHARES MUST TOTAL 100 PERCENT.	100 %	Louise "D" Watts	15 High Street Machias, Maine	Wife
	%			
18. PERSON TO RECEIVE ALLOTMENT OF PAY IF MISSING OR UNABLE TO TRANSMIT FUNDS.	PERCENT OF PAY EACH MO. 100%	Louise "D" Watts	15 High Street Machias, Maine	Wife

19. INSURANCE POLICIES IN FORCE INCLUDING USGLI AND NSLI (Agencies to be notified in case of death in active service)

FULL NAME AND ADDRESS OF COMPANY	ADDRESS OF OFFICE RECEIVING PAYMENT OR HOME OFFICE	POLICY NO.
None		

20. SERVICE ORGANIZATION AND ADDRESS OF DESIGNATOR	DATE SIGNED
USCG DEPOT, SOUTHWEST HARBOR, MAINE	8 October 1957

21. SIGNATURE OF WITNESS	22. SIGNATURE OF DESIGNATOR
C. W. HUPPER, CHBOSN W-2, USCG - CRUCOM	Alan B. Watts (Alan B. Watts)

DD FORM 1 Dec 56 93-1

Previous Editions are obsolete.

For Navy, Marine Corps, and Coast Guard use: Will be used in lieu of DD Form 93.

TREASURY DEPARTMENT
U. S. COAST GUARD
CG 2500 (Rev. 7-50)

ENLISTMENT CONTRACT

UNITED STATES { COAST GUARD / ~~COAST GUARD RESERVE~~ }

ENLISTMENT OF WATTS, ALAN BRENNEN (Full name, surname to left); 209-630 (Service number); $ 213.15 (Pay per month)

Accepted for enlistment at Boston, Mass.; BM1(L)AN (Rating in which enlisted)

Enlisted at Office, Commander, 1st CG District; 13 MAY, 1952 (Date of enlistment)

Transferred to * * * * *

Occupation MARINER Citizenship* N.B. If naturalized, place and date of naturalization * * * * Certificate No. * * *

Date of birth 1 January, 1917 Place of birth Jonesboro, Maine

Legal address High Street, Machias, Maine (Street and number) (Town) (County) (State)

Married or single Married Name and address of next of kin or legal guardian

WIFE: Louise Watts - High Street, Machias, Maine (Relationship) (Address)

Continuous Service Certificate * * (Number) Previous service { Coast Guard / ~~Reserve~~ } 14 (Years) 2 (Months) 28 (Days)

First enlisted 15 February, 1938 (Date) at Burnt Island LBS, Port Clyde (Place) and was last discharged 12 May, 1952 (Date) from Office, Commander, 1st CG District (Unit) with Honorable (Character) discharge as BM1 (Rate) No. * * * *

Previous Navy service NONE (Years) (Months) (Days) Previous Marine Corps service NONE (Years) (Months) (Days)

Previous Army service NONE (Years) (Months) (Days) Previous Air Force service NONE (Years) (Months) (Days)

Age 35 years 4 months. Height 5 feet 11 inches. Weight 180 pounds.

Eyes Blue Sex Male Hair Brown Complexion Ruddy Race Caucasian

Personal characteristics SS# 004-07-5842 marks, etc.
VSULA; Appendectomy scar

For and in consideration of the pay or wages due to the ratings which may from time to time be assigned me during the continuance of my service, I agree to and with LT. S. PISICCHIO of the United States Coast Guard, as follows:

First: To enter the Coast Guard of the United States and to report to such station or vessel as I may be ordered to join, and to the utmost of my power and ability discharge my several services or duties and be in everything conformable and obedient to the several requirements and lawful commands of the officers who may be placed over me.

Second: I oblige and subject myself to serve { Six years from 13 May, 1952 / during minority until ____, 19____ } unless sooner discharged by proper authority.

* Citizenship—Use expressions "NB" for native born; "NZ" for naturalized; "NPI" for native of Philippine Islands; "NPR" for native of Puerto Rico.

16—8420-3