U. S. COAST GUARD
WASHINGTON, D. C. 20590

REPORT OF CASUALTY	REPORT NUMBER AND TYPE: FINAL	DATE PREPARED: 20 MAR 73

1. SERVICE IDENTIFICATION (Name, Service Number, Grade or Rate, Component, Branch and Organization)

WOODRUFF, Lyman Alexandre 221 341 BM1, USCG, Retired

2. CASUALTY STATUS ☐ BATTLE ☒ NON-BATTLE

Died: 10 January 1973
Place: USPHS Hosp. San Francisco, California
Cause: Cardiac and respiratory arrest

3. DATE AND PLACE OF BIRTH, RACE, RELIGIOUS PREFERENCE

15 January 1901 - Curry County, Oregon

4. DATE AND PLACE OF LAST ENTRY ON ACTIVE DUTY IN CURRENT STATUS AND HOME OF RECORD AT TIME

NOT APPLICABLE

5. SOCIAL SECURITY NUMBER, PAY GRADE, LENGTH OF SERVICE FOR PAY, BASIC PAY, INCENTIVE PAY — CHECK IF APPLICABLE ☐ CREW ☐ NON-CREW

553 44 4914 E-6 over 22 years service $657.00 per mo. PL92-210

6. DUTY STATUS

RETIRED 1 June 1949 — 20 Year Service

7. INTERESTED PERSONS (Name, Address, Relationship)

Mrs. Muriel Woodruff, widow, 2087 46th Avenue, San Francisco, California 94116 (1)(3)

8. REPORT FOR VA TO FOLLOW ☐ YES ☒ NO

9. REPORTING COMMAND AND DATE REPORT RECEIVED IN DEPARTMENT

CCGD TWELVE San Francisco, California - 15 January 1973

10. SELECTIVE SERVICE NUMBER, LOCAL BOARD, AND LOCATION (If unknown, enter date and place of first entry in Armed Services)

NOT REGISTERED 19 June 1941 - San Francisco, California - USCG

11. PRIOR SERVICE DATA ☒ YES ☐ NO

FLHS now USCG

12. REMARKS

RETIRED PAY DISCONTINUED ON DATE OF DEATH

NO ALLOTMENTS IN EFFECT FOR DEPENDENTS

FOOTNOTES:
[1] Adult next of kin.
[2] Beneficiary for gratuity pay in event there is no surviving wife or child - as designated on record of emergency data.
[3] Beneficiary for unpaid pay and allowances - as designated on record of emergency data.

13. DISTRIBUTION

VA
SELECTIVE SERVICE

14. SIGNATURE (By direction of the Commandant)

AARON O. MARTIN
Chief, Decedent Affairs & Claims Branch

DD FORM 1 MAR 60 1300

NW

OCG 54490

Approved Exception to SF 180

VETERANS ADMINISTRATION

REQUEST FOR INFORMATION

1A. ADDRESS CODE: 13

1B. TYPE OF CLAIM: Original Death burial

2. SEPARATION FORMS ON FILE: ☐ YES ☒ NO

3. DATA REQUESTED: ☒ SERVICE ☐ MEDICAL ☐ DENTAL ☐ OTHER

4. BRANCH OF SERVICE: ☐ ARMY ☐ NAVY ☐ AIR FORCE ☐ MARINE CORPS ☒ COAST GUARD ☐ NATIONAL GUARD (Army) ☐ NATIONAL GUARD (Air) ☐ OTHER (Specify)

FROM

5A. NAME AND ADDRESS OF VA REQUESTING OFFICE: Varo-49-4 Bn Street San Francisco, Ca 94103

5B. ORIGINATING UNIT: adj Dist 11th

6. CLAIM NO.: X29008108

7. INSURANCE NO.:

8. LAST NAME - FIRST NAME - MIDDLE INITIAL (Under which served): Woodruff, Lyman Alexandre

9A. ALL SERVICE NOS.: 221341

9B. SOCIAL SECURITY NO.: 553-44-4914

10. DATE OF BIRTH: 1-15-01

11. PLACE OF BIRTH: Oregon

12. DATE OF DEATH: 1-10-73

	13. DATE ENTERED ACTIVE DUTY	14. DATE SEPARATED FROM ACTIVE DUTY	15. CHARACTER OF SEPARATION OR DISCHARGE	16. LAST GRADE, RATE OR RANK, AND ORGANIZATION
A.	6-19-41	6-18-47		Boat Mate 1/C U.S Coast Guard
B.				
C.				

	17. ALLEGED DISEASE OR INJURY	18. DATES OF TREATMENT	19. PLACE OF TREATMENT	20. TYPE (Check) HOSPITAL	OP
A.					
B.					
C.		after			

21. ADDITIONAL INFORMATION REQUESTED: Please verify service and character of discharge

22A. SUBSEQUENT RESERVE OR RETIRED STATUS: ☐ NONE ☐ RESERVE OBLIGATION (Complete Item 22B) ☐ RETIRED (Complete Item 22C) ☐ UNKNOWN

22B. OBLIGATION TERMINAL DATE:

22C. RETIRED STATUS: ☐ IN PAY STATUS ☐ NONPAY STATUS ☐ TEMPORARY DISABILITY RETIRED LIST ☐ RETIRED—STATUS UNKNOWN

23. DATE: 2-6-73

24. SIGNATURE AND TITLE OF VA OFFICIAL: D. A Loftis adj Officer

ENDORSEMENT — VERIFICATION BY SERVICE DEPARTMENT (Check applicable box(es))

☐ AVAILABLE REQUESTED RECORDS FORWARDED ☐ ITEMS 8 & 9, AND 13 THROUGH 15 VERIFIED CORRECT ☒ ITEMS 8 & 9, AND 13 THROUGH 15 VERIFIED CORRECT, EXCEPT:

ITEM 14: 5-31-49
" 15: HON REL

Records indicate 17 years, 5 months + 16 days prior Lighthouse service

NO. OF ENCLOSURES	ORIG.	COPY	NO. ENCLS. (Cont.)	ORIG.	COPY		DATE	SIGNATURE AND TITLE
HEALTH RECORDS			CLINICAL RECORDS			SERVICE INFORMATION	2-23-73	NWD M. Gatton
PHYSICAL EXAMINATIONS AT ENTRANCE			X-RAYS					
			DENTAL RECORDS			MEDICAL RECORDS	DATE	SIGNATURE AND TITLE
PHYSICAL EXAMINATIONS AT SEPARATION			MEDICAL RECORDS					
			OTHER RECORDS					

VA FORM AUG 1971 **07-3101**

EXISTING STOCKS OF VA FORM 07-3101, JUL 1970, WILL BE USED.

MILE ROCK LIGHT STATION
TWELFTH COAST GUARD DISTRICT
SAN FRANCISCO, CALIF.

16 March, 1949

I hereby certify that to the best of my knowledge and belief I served in the former U.S. Lighthouse Service a period of seventeen (17) years, five (5) months, and sixteen (16) days.

Lyman A. Woodruff

Lyman A. Woodruff
(221-341) BM1

Subscribed and sworn to before me this 16th day of March, 1949

A. O'D. WISE, CSCLK, USCG
By direction

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
WOODRUFF, Lyman Alexandre	
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: 19 June 1941

2. DATE(S) OF SEPARATION FROM ACTIVE SERVICE: 31 May 1949

3. CHARACTER OF SEPARATION(S) * *(If Bad Conduct, INDICATE IF GIVEN AS A RESULT OF A General COURT MARTIAL)*: Retired-Honorable (Retirement effective 1 June 1949)

*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?

☐ INDUCTED ☐ CALLED FROM INACTIVE SERVICE ☐ ENLISTED

☐ RE-ENLISTED ☐ COMMISSIONED

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

RETIRED: 1 June 1949 - 20 years service
AUTH: Section 2 of the Act of 24 May 1939 (53 Stat. 755)
Retired pay is based on years of service
Gross retired pay per month - $243.11 (PL 89-132)

NAME OF CERTIFYING ORGANIZATION	SIGNATURE	
U. S. COAST GUARD	JAMES W. KINCAID, CAPT, USCG Chief, Personnel Services Division	
	RANK OR TITLE	DATE
	By direction of the Commandant	6/21/66

File 3-13

54490 Ltr 3/30/67

REQUEST FOR INFORMATION FROM UNIFORMED SERVICES

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

LAST NAME–FIRST NAME–MIDDLE NAME	DATE OF BIRTH	DATE OF DEATH	SOCIAL SECURITY NUMBER
WOODRUFF, Lyman	1/15/01		553-44-4914

SERVICE NUMBER	BRANCH OF SERVICE	RATE OR RANK
221-341	U. S. Coast Guard	BM 1st Class

DATE(S) OF ENTRY INTO SERVICE	DATE(S) OF SEPARATION	PLACE(S) OF SEPARATION
5/31/49	Unk.	San Francisco, Calif.

FEB 82

SOCIAL SECURITY ADMINISTRATION
303 Golden Gate Av.
San Francisco, Calif. 94102
Unit 21

The information requested in item 2 below is needed by the Social Security Administration to adjudicate a claim based on the account of the above veteran.

SIGNATURE OF SSA OFFICIAL: C. E. Dawson by K. Burg

TITLE: District Manager

DATE: June 9, 1966

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

- [X] Certification about active service after September 7, 1939 *(Part A on reverse)*
- [X] Certification about retired or retainer pay *(Part B on reverse)*
- [ ] Certification of 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."

PF-74

VETERANS ADMINISTRATION

WASHINGTON 25, D. C.

FILE 3-13

YOUR FILE REFERENCE:

IN REPLY REFER TO: 9FBAF

Commanding Officer of

WOODRUFF, LYMAN A. (221-341) BM1
USCG

File Number FN-534 580
Insurance Number N-534 580
Amount of Insurance $3,000
Date of Expiration 6/30/49
Monthly Renewal Premium $3.42
Current Monthly Premium $2.55

The current term period for the National Service life insurance described above which was previously issued to the above named insured will expire and protection thereunder will cease on the date shown above. Under existing law he is permitted, before expiration, to apply for conversion to a permanent plan of insurance or for renewal of this term insurance for a period of five years at the premium rate for his then attained age. Renewed insurance will become effective on the day immediately following the date of expiration of the present insurance.

To renew this insurance for the five year period, it is necessary that he complete and sign the enclosed VA Form 9-1658, Application for Renewal, and before the expiration date of his current insurance, which is shown above, place it in military or naval channels through the officer responsible for insurance activities within his unit of organization for direct transmittal to the Veterans Administration, Washington 25, D. C. He should authorize a new allotment in the amount of the monthly renewal premium shown above. It is also necessary that the premiums due for the remainder of the current term period be paid; therefore, his present allotment should continue in force for the period required to accomplish this purpose.

Should he desire to convert his present term insurance, rather than renew it for five years, full information on the permanent plans of insurance available and premium rates may be obtained from military or naval sources, or from any Veterans Administration office.

Very truly yours,

E. C. Petty

E. C. PETTY
Chief, National Service
Life Accounts Division

Encl:
VA Form 9-1658

FL 9-355
Dec 1948

An inquiry by or concerning an ex-service man or woman should, if possible, give veteran's name and file number, whether C, XC, K, N, or V. If such file number is unknown, service or serial number should be given.

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			
WOODRUFF, Lyman A.	☐ 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)*	
BM1	USCG	221-341		

II. DEPENDENTS FOR WHOM AUTHORIZATION IS REQUESTED

7. NAME	8. RELATIONSHIP	9. DATE OF BIRTH	10. ADDRESS
NOT APPLICABLE			

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)*

☐ LAWFUL MARRIAGE TO THE SPOUSE NAMED TOOK PLACE AT *(Place)*_____

ON *(Date)*_____.

☐ 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

Pt-74

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

DESIGNATION OF BENEFICIARY FOR UNPAID RETIRED PAY

(See instructions on reverse side)

I hereby cancel any and all previous designations of beneficiaries to receive any amount of unpaid 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
WOODRUFF, Lyman Alexandre	221-341	BM1

DESIGNATION OF BENEFICIARY

SHARE	NAME	ADDRESS	RELATIONSHIP
% All	Muriel L. Woodruff	2087 46th Ave. San Francisco 16, California	Wiff
%			
%			

SIGNATURE AND ADDRESS OF WITNESS

Muriel L. Woodruff
2087 46th Ave. San Francisco Calif.

SIGNATURE AND ADDRESS OF RETIRED MEMBER

Lyman A. Woodruff
2087 46th Ave. San Francisco Calif.

DATE SIGNED

1/12/56

PE-75

N. C. G.-2525 E
March 1938

TERMINATION OF HEALTH RECORD

Name WOODRUFF, Lyman Alexandre

Rating BM1 Service Number 221-341

Place USMH ANNEX S.F. CALIF Date 5/31/49

I certify that I have today examined the above-named person, and find that he has the following disease or physical condition likely to result in physical disability or death:

None

Other defects noted none

In my opinion those numbered _____ are incident of service.

In my opinion those numbered _____ are not incident of service.

To Be Filled in Only When Physical Examination Prior to Discharge Necessary.

Malcolm Jones

MALCOLM JONES

A. A Surgeon, U.S.P.H. Service.

I certify to the best of my knowledge and belief:

That I have no physical defect(s) _____

That I have the following defect(s) None

To Be Filled in Only When Physical Examination Prior to Discharge Necessary.

Lyman A. Woodruff

Lyman A Woodruff

BM 1 USCG

Rank or Rating, U.S. Coast Guard.

Service terminated 31 May, 1949 (Date)

At Office, CCGD12, San Francisco, Calif. (Place)

By reason of Retirement (Expiration enlistment; physical disability; undesirability; desertion, etc.)

A. O. D. WISE, CSCLK, USCG

16—25760-1 (Rank), Custodial Officer.

File Eds

2087 46th Ave.
San Francisco 16,
California
20 April, 1953

From: Lyman A. Woodruff (221-341) BM1 USCG (Retired)
To: The Commandant, US Coast Guard (FA-PA)

Subj: Change of address

Please send my retired pay to, 2087 46th Ave.
San Francisco 16, California.

Lyman a. Woodruff

Lyman A. Woodruff

PAYCHECK MAILING SLIP
UNITED STATES COAST GUARD
CGHQ-9768

April 1953

Lyman A. Woodruff (221-341)USCG, Retired
2087 - 46th Ave.,
San Francisco 16, Calif.

add changed
4/30/53

Com – 3-13

FILE

Form approved.
Budget Bureau No. 76-R070.2.

VETERANS ADMINISTRATION

APPLICATION FOR CONVERSION

NATIONAL SERVICE LIFE INSURANCE

DO NOT WRITE IN THIS SPACE
POLICY NUMBER ASSIGNED

Please read Instructions on reverse before filling out form. Complete every item. TYPE OR USE INK. Use a separate form for EACH POLICY on which conversion is requested and RETURN THE POLICY WITH THIS APPLICATION.

2. LIST ALL POLICY NOS.
FN-
N -
FV-
V - 96 63 15
FH-
H -

PE-PR-17

1. FIRST NAME—MIDDLE NAME—LAST NAME OF INSURED (*Type or print*)
LYMAN A. WOODRUFF

3. MAILING ADDRESS FOR INSURANCE PURPOSES (*Number and street or rural route, city or P. O., zone number and State*)
2087 - 46th Ave., San Francisco, Calif.

4. DATE OF BIRTH (*Month, day and year*)	5. BRANCH OF SERVICE	6. SERVICE NO.
1-15-01	Coast Guard	221341

Policy No. V 96 63 15, in the amount of $ 3,000, is hereby returned for the purpose of converting from Five-Year Level Premium Term plan to the plan(s) listed below. Indicate in item 8 the amount of this policy to be continued as term insurance. (See paragraphs 1, 2, and 3 of Instructions)

7. NEW PLAN OF INSURANCE			8. TERM INSURANCE CONTINUED	
PLAN NOW DESIRED	AMOUNT OF INSURANCE	EFFECTIVE DATE	AMOUNT RETAINED	
Ord. Life	$3,000	6-1-53	$ none	If change of beneficiary and/or optional settlement is desired in the amount of Five-Year Level Premium Term Insurance continued in force, a separate request therefor must be made.

IF TOTAL DISABILITY INCOME PROVISION AT EXTRA PREMIUM IS TO BE ADDED OR CONTINUED CHECK ONE (*See par. 5 of Instructions*)
☐ ADDED ☐ CONTINUED

N O T E.—If the application is not approved, amounts tendered as premiums for the permanent plan will be applied to continue in force as term insurance that particular portion of the insurance requested to be converted.

9. ARE YOU NOW DISABLED?
☐ YES ☒ NO
(*If "yes", give nature of disability*)

10. AMOUNT REMITTED WITH THIS APPLICATION (*See paragraphs 4 and 5 of Instructions*)	
AMOUNT OF FIRST INSURANCE PREMIUM	$ 10.26
T. D. I. PROVISION PREMIUM (*If any*)	
RESERVE (*If any*)	
TOTAL	$ 10.26

11. METHOD AND MODE OF PAYMENT OF FIRST PREMIUM (*Complete one*)

A.	MONTH EFFECTIVE	AMOUNT
☒ ALLOTMENT FROM ACTIVE SERVICE PAY	5-1-53	$
B. ☐ DIRECT REMITTANCE TO VETERANS ADMINISTRATION	MODE (*Monthly, quarterly, semiannually, or annually*)	

NOTE.—MAKE ALL REMITTANCES PAYABLE TO THE TREASURER OF THE UNITED STATES. If premiums are to be paid by allotment or deduction, applicant must authorize separately (a) registration of allotment with service department or (b) deduction from Veterans Administration benefits (compensation, pension, or retirement pay) on VA Form 9-887, "Authorization for Deductions from Veterans Administration Benefit Payments;" PREMIUMS MAY BE PAID BY MONTHLY DEDUCTION FROM COMPENSATION, PENSION, OR RETIREMENT PAY ONLY WHEN INSURANCE IS IN FORCE.

12. METHOD AND MODE OF PAYMENT OF FUTURE PREMIUMS (*Complete one*)

METHOD			MODE (*Monthly, quarterly, semi-annually, or annually*)
☒ ALLOTMENT FROM ACTIVE SERVICE PAY OR SERVICE DEPT. RETIREMENT PAY	☐ MONTHLY DEDUCTION FROM VA COMPENSATION, PENSION, OR RETIREMENT PAY	☒ DIRECT REMITTANCE TO VETERANS ADMINISTRATION (*Specify Mode*)	

13. BENEFICIARY DESIGNATION (*Indicate whether principal or contingent*) AND SELECTION OF OPTIONAL SETTLEMENT (*See paragraphs 6 and 7 of Instructions*)

COMPLETE NAME AND ADDRESS OF EACH BENEFICIARY (*If married woman, her own first and middle names and husband's last name must be given*)	RELATIONSHIP	AMOUNT (*Fractions preferred*)	OPTION
PRINCIPAL BENEFICIARY Muriel L. Woodruff Address - same as Item 3	Wife	100%	#1
CONTINGENT BENEFICIARY Catherine Jane Buck 584 Colby St., Oakland, Calif.	Sister	100%	#1

The beneficiary and/or optional settlement under the new policy will remain the same as under the old policy, unless otherwise specified in writing over the signature of the insured.

14. WITNESSED BY (*See paragraph 8 of Instructions*)	15. SIGNED AT
	San Francisco, Calif.
16. DATE OF APPLICATION	17. SIGNATURE OF APPLICANT (*Application must be signed and dated*)
April 20, 1953	

PENALTY.—The law provides that whoever makes any statement of a material fact knowing it to be false shall be punished by a fine of not more than $1,000 or by imprisonment for not more than 1 year or both.

PS
4 May 1953
L-13

FILE

From: Commandant
To: WOODRUFF, Lyman A.(221-341)BM1, USCG, Retired
2037 46th Avenue, San Francisco, California

Subj: National Service Life Insurance, authorization of allotment for $3,000 OL, V 96 63 15

Ref: (a) Your letter, 27 April 1953

1. In reply to reference (a) there are herewith enclosed the necessary forms to authorize deductions from your retired pay inasmuch as you have converted your $3,000 National Service Life Insurance from the five-year level premium term plan to the Ordinary Life Plan.

2. It is requested therefore, that the enclosed Form 2528-A, Allotment Stoppage in the amount of $3.42 with month of last payment April 1953 and Form 2528, Application for Allotment in the amount of $10.26 with month of first payment May 1953 be signed where indicated and returned to Commandant (PS) in the enclosed pre-addressed envelope.

3. It is further requested that a copy of VA Form 9-358, Application for Conversion be submitted to this office with the allotment adjustments.

5/5/53
B. V. HALL
By direction

PE-PR-17

Encl:
1. Form 2528-A
2. Form 2528
3. VA Form 9-358
4. Envelope

MJM:aom rm 2111 2-4

MJM.

FILE
B.A.S.

MAR 29 1951

UNITED STATES COAST GUARD
Washington 25, D. C.

From: Commandant
To: BM1 Lyman A. Woodruff, USCG, Ret. 2190 Grove St., San Francisco 17, Calif.

Subj: Retired Identification Card; completion of

1. There is inclosed herewith Armed Forces Identification Card No. 05428 that will be issued to you.

2. Place your signature in the space provided on the face of the card and the fingerprints of both index fingers in the spaces provided on the back of the card. (NOTE: If an index finger is missing, use the next finger on the same hand and indicate on the card the finger actually used.) PUT NO OTHER DATA ON THE CARD ITSELF.

B. A. Shaw
B. A. SHAW
By direction

Inclosures: (1) Identification Card
(2) Franked envelope

IND-1

From: Lyman A. Woodruff
To: Commandant

Card returned for validating and completion.

Lyman A. Woodruff
Signature

IND-2

APR 23 1951

From: Commandant
To: BM1 Lyman A. Woodruff, USCG, Retired.

Your completed Identification Card bearing the number indicated in Paragraph 1 of basic letter is inclosed. 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.)

B. A. Shaw
B. A. SHAW,
By direction

Inclosures: (1) Identification Card
(2) Franked envelope

IND-3

From: BM1 Lyman A. Woodruff, USCG, Retired.
To: Commandant

Receipt is acknowledged of the Armed Forces Identification Card referred to in basic correspondence. My old Retired Identification Card is returned herewith /or/ See explanation attached. (STRIKE ONE).

Lyman A. Woodruff
Signature

GPO DSO 3-258

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
WOODRUFF, Lyman Alexandre	221-341	BM1	

5. FIRST NAME-MIDDLE NAME-LAST NAME OF PERSON TO BE NOTIFIED IN CASE OF EMERGENCY *(Person with permanent address is advisable)* Muriel Louise Woodruff — RELATIONSHIP *(If friend, so state)* Wife

ADDRESS *(Number, Street, City and State)*
2190 Grove St. Ssn Francisco 17, California

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)*
Muriel Louise Woodruff	2190 Grove St. San Francisco 17, California

7. CHILDREN — FIRST NAME-MIDDLE NAME-LAST NAME	ADDRESS *(Number, Street, City and State)*	MARRIED OR SINGLE	SEX	AGE
None				

(Continue on reverse side)

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

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

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: Catherine Jane Buck — RELATIONSHIP: Sister

ADDRESS *(Number, Street, City and State)*
5854 Colby St. Oakland , California

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: None — RELATIONSHIP:

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

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.
None		

(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: None — RELATIONSHIP:

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

MILITARY ADDRESS	DATE SIGNED	SIGNATURE OF DESIGNATOR
Retired	4/23/51	Lyman A. Woodruff / Lyman A. Woodruff

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.

~~But~~ File in jacket
3-13

LAW OFFICES
MELBERT B. ADAMS
MONADNOCK BUILDING
681 MARKET STREET
SAN FRANCISCO 5
EXBROOK 2-4533

ASSOCIATE
BRUCE E. CLARK

January 8, 1951

Commandant, U. S. Coast Guard Headquarters
1300 - E Street, N. W.
Washington, 25, D. C.

Dear Sir:

Upon advice from the local Coast Guard office I am writing you to inquire as to the amount of withholding tax paid in 1950 by my husband, Lyman A. Woodruff, retired, Serial No. 221-341, 2190 Grove Street, San Francisco.

Mr. Woodruff is ill in bed and is unable to tell me the amount of his base pay and he has no information regarding his withholding tax.

As our return must be made before January 15th, would you please inform me by return mail the amount of his withholding - together with the amount of his base pay for the year 1950.

Thanking you for your courtesy,

Very truly yours,

Muriel Woodruff

Mrs. Lyman A. Woodruff
2190 Grove Street
San Francisco 17, California

mailed
1/12/51

Budget Bureau No. 76-R157
Approval expires 10-31-49

APPLICATION FOR RENEWAL OF INSURANCE ON THE FIVE-YEAR LEVEL PREMIUM TERM PLAN

NATIONAL SERVICE LIFE INSURANCE

DO NOT WRITE IN THIS SPACE
INSURANCE NUMBER ASSIGNED

NOTE: Please read Instructions on reverse before filling out form. Complete every item. Type or use ink. Use separate form for EACH POLICY on which renewal is requested.

1. FIRST NAME - MIDDLE NAME - LAST NAME OF INSURED *(Print or type)*
LYMAN ALEXANDRE WOODRUFF

2. INSURANCE FILE NO.
FN - 534 580
FH -

3. MAILING ADDRESS FOR INSURANCE PURPOSES *(Number and street or rural route, City or P.O., zone number and State)*
2190 Grove Street, San Francisco, Calif.

4. BRANCH OF SERVICE
☐ ARMY ☐ NAVY ☐ AIR FORCE ☐ MARINE CORPS ☒ COAST GUARD

5. SERVICE SERIAL NO.
(221-341)

6. Application is hereby made for renewal of National Service Life Insurance on the Five-year Level Premium Term plan, granted under Certificate No. 534 580 in the amount of $ 3,000, for an additional period of five years at the premium rate for my attained age on the effective date of the renewed insurance. It is understood that the renewed insurance, if granted, will become effective on the day immediately following the expiration of the current term period. *(See Instr. 2)*

7. AMOUNT OF INSURANCE TO BE RENEWED *(See Instr. 1)*
$ 3,000

8. AMOUNT REMITTED WITH THIS APPLICATION

INSURANCE PREMIUM	$ 3.42
TOTAL DISABILITY INCOME PROVISION PREMIUM *(If any)*	$
TOTAL	$

9. *IF TOTAL DISABILITY IS TO BE ADDED OR CONTINUED, CHECK ONE (See Instr. 3)*
☐ ADDED ☐ CONTINUED

10. METHOD OF PAYMENT OF PREMIUMS *(Complete one) (See Instr. 4)*

A. ☐ DIRECT REMITTANCE TO VETERANS ADMINISTRATION	REMITTANCE BY *(Check, draft, money order, postal note, etc., PAYABLE TO THE TREASURER OF THE UNITED STATES)*		PERIOD *(Monthly, quarterly, semiannually or annually)*
B. *Check one* ☐ ALLOTMENT FROM ACTIVE SERVICE PAY, OR ☒ ALLOTMENT FROM RETIREMENT PAY ADMINISTERED BY THE SERVICE DEPARTMENT	MONTH ALLOTMENT EFFECTIVE JUNE, 1949	AMOUNT OF ALLOTMENT $3.42 $	*ALLOTMENT MUST BE REGISTERED SEPARATELY WITH SERVICE DEPARTMENT*
C. MONTHLY DEDUCTION FROM VA COMPENSATION, PENSION, OR RETIREMENT PAY	*VA FORM 9-887, "AUTHORIZATION FOR DEDUCTION FROM BENEFIT PAYMENTS," SHOULD BE ATTACHED HERETO.*		

11. BENEFICIARY DESIGNATION (INDICATE WHETHER PRINCIPAL OR CONTINGENT) AND SELECTION OF OPTIONAL SETTLEMENT *(See Instrs. 5 and 6)*

COMPLETE NAME AND ADDRESS OF EACH BENEFICIARY *(If married woman, her own first and middle names and husband's last name must be given.)*	RELATIONSHIP	AMOUNT	OPTION
MURIEL LOUISE WOODRUFF	Wife	3,000	
2190 Grove Street, San Francisco, Calif.			

12. MAIL POLICY TO *(Name and address)*
LYMAN ALEXANDRE WOODRUFF, 2190 Grove St., San Francisco, Calif.

13. WITNESSED BY *(See Instr. 7)*
A. O'D. WISE, CSCLK, USCG

14. SIGNED AT *(Address)*
Office, Comdr. 12th CG Dist.

15. DATE
5/2/49

16. ADDRESS OF WITNESS
Comdr. 12th Coast Guard District, SF, Calif.

17. SIGNATURE OF APPLICANT *(Do not print)*
Lyman Alexandre Woodruff

PENALTY.—The law provides that whoever makes any statement of a material fact, knowing it to be false, shall be punished by a fine of not more than $1,000 or by imprisonment for not more than one year or both.

V A FORM OCT 1948 **9-1658** EXISTING STOCKS OF VA FORM 9-1658, AUG 1948, WILL BE USED.

Treasury Department
CG-10003 (Rev. 8-48)

UNITED STATES COAST GUARD

Washington 25, D. C.

Address reply to
THE COMMANDANT

18 April 1949
File: FA-PR -73

From: Commandant
To: Commander, 12th Coast Guard District (fp)
Via:

Subj: WOODRUFF, Lyman A. (221-341) BM1, USCG
credits and/or charges on previous pay record(s)

Ref: (a) Pay Record(s) of subject named man closed to 31 December 1948
(b) Your letter, 8 April 1949 (fp-521)

The following credits and/or charges have been abstracted from ref. (a). Necessary adjustment in the pay record of subject named man for periods covered by this advisory notice is authorized to be based upon the information furnished herein, provided vouchers required by applicable instructions are furnished. No charges and no credits which affect those listed below were entered on ref. (a).

Incl

By direction

Credits: Description of item	1948 From	1948 To	Period Mos.	Period Days	Monthly or daily rate	Credits	Start Symbol	Stop Symbol
BM1(6) 6/18/47	7/1	12/31	6	- x	148.50	891.00	G.E.Bohannon	←

Charges: Description of item	Charges & Checkages	Start Symbol	Stop Symbol
Data ENL: 6/9/41			
None pertinent			

Other pertinent information or remarks:

Pay record closed to 31 December 1948 by G. E. Bohannon.

ESPhillips
4-18-49 6-6
B 907

UNITED STATES COAST GUARD

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

14 April 1949
FILE: PE-PR-4, CG-73

MEMORANDUM FOR CHIEF, PAY & AUDIT SECTION

Subj: WOODRUFF, Lyman Alexandre (221-341) BM1; USCG
Statement of creditable service

On the effective date of retirement, 1 June, 1949, the above named man had the following creditable service:

	Years	Months	Days
Coast Guard Service (active)	7	11	12
Coast Guard Service (inactive)			
Navy Service (active)			
Navy Service (inactive)			
Army Service (active)			
Army Service (inactive)			
Marine Corps Service (active)			
Marine Corps Service (inactive)			
Lighthouse Service creditable for retirement	17	5	16
Lighthouse Service creditable for longevity	17	5	16
National Guard			
Other Service (specify)			

Entitled to 10% for good conduct Yes

B. A. SHAW
Chief, Processing & Records Section
Enlisted Personnel Division

Return to 3-13
TJT: ig
B 131

NAME WOODRUFF, Lyman A. SERVICE NO. 221-341 RATE BM1c

Conduct Marks

Enlisted	Discharged	Mark	Period	Computation
6-19-1941	6-18-1947	4.0	72	288
6-19-1947	5-31-49	4.0	24	96
	TOTALS		96	384

Final average conduct mark 4.0

Entitled to 10% for good conduct yes (yes or no)

Computed by Bessie Simmons Verified by Alicia J. Olive

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-PR-4)
CG-73

STATEMENT OF CREDITABLE SERVICE

UNITED STATES COAST GUARD HEADQUARTERS

WASHINGTON

10 March, 1949.

From: Commandant.

To: Commanding Officer, Presido Group
Via: Commander, 12th CG District
SUBJECT: WOODRUFF, Lyman Alexandre (221-341) BM1; USCG

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—
17 Years 5 Months 16 days Lighthouse Service Creditable for Longevity.							
USCG 6-19-41 Enl. Ext. 3 Yrs. from 6-19-44	6-18-47 HD	None		None		None	
6-19-47 Now Serving.							

B.A. SHAW
By direction

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

Return to 3-13
jam

3-10-49

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-PR-4)
CG-73

STATEMENT OF CREDITABLE SERVICE

UNITED STATES COAST GUARD HEADQUARTERS

WASHINGTON

10 March, 1949.

From: Commandant.

To: Commanding Officer, Presido Group
Via: Commander, 12th CG District
SUBJECT: WOODRUFF, Lyman Alexandre (221-341) BM1; USCG

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—
17 Years 5 Months 16 days Lighthouse Service Creditable for Longevity.							
USCG 6-19-41							
Enl. Ext. 3 Yrs. from 6-19-44	6-18-47 HD	None		None		None	
6-19-47 Now Serving.							

B. A. SHAW
By direction

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

UNITED STATES COAST GUARD

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

APR 13 1949

13 April, 1949
FILE: PMM -73

File 3-13 D&C

From: Commandant
To: Lyman A. Woodruff (221-341) BM1 USCG

Via: Commander, 12th Coast Guard District, 913 Appraisers Bldg., 630 Sansome St. San Francisco, Calif.

Subj: National Service Life Insurance, Policy No. N- 534 580
Expiration of Term Insurance

1. There is herewith forwarded a notification from the Veterans Administration that the level term insurance issued to you will expire on 30 June, 1949 . In order that you may continue to have the protection of this insurance, it must be renewed or converted to one of the six permanent plans, i.e., Ordinary Life, 30-Payment Life, 20-Payment Life, 20-Year Endowment, Endowment at Age 60 or Endowment at Age 65.

2. In view of the fact that the application for renewal of insurance on the five-year level premium term plan or application for converted insurance must reach the Veterans Administration before the expiration of the current term period, you are urged to take immediate steps toward completing the application and making the necessary allotment adjustment. If insurance is renewed, the application for renewal on the reverse side of the Veterans Administration letter must be completed and the authorized certifying officer should complete the certification that the allotment has been registered. (Reference Article 260 P&SI).

3. The completed application, together with the necessary allotment adjustment (forms CG-2528 and 2528-A) should be forwarded to Commandant (PMM) for transmittal to the Veterans Administration.

4. Advise headquarters of action taken.

R. M. WEST
By direction

Incls.
1. VA letter
2. VA Form 9-336
3. VA Form 9-1615 9-1658
4. VA Form 9-358

current premium $ 2.55
renewal premium 3.42
present allotment 2.55

B 1527
MJM:dec return to room 2116 sta 2-4

MJM.

UNITED STATES COAST GUARD

Presidio Cyf (12)

Address Reply to
Commander
12th Coast Guard District
630 Sansome Street
San Francisco 26, Calif.

30 December 1948

File: 73

From: Commander 12th CG District
To: Commandant

Subj: WOODRUFF, Lyman A. (221 341) BM1

It is requested that a statement of creditable service for subject man be forwarded to this office for purposes of computing longevity pay. WOODRUFF states he served in the former U.S. Lighthouse service approximately seventeen (17) years, five (5) months, and sixteen (16) days, from 3 January 1924 to 18 June 1941. He enlisted in the U.S. Coast Guard 19 June 1941.

A. O'D. WISE
By direction

EMA - COPY NB

No. _____

WOODRUFF	LYMAN	ALEXANDRE
(SURNAME)	(FIRST NAME)	(SECOND NAME)

DATE OF BIRTH		
MONTH	DAY	YEAR
Jan.	15	1901

SEX M RACE W

RETIREMENT AGE 70

LEGAL VOTING RESIDENCE		
STATE AND CONG. DISTRICT	COUNTY	CITY OR TOWN
Calif. ~~Sixth~~ 4th	San Francisco ~~Alameda~~	San Francisco ~~Oakland~~

MILITARY SERVICE _____ YES _____ NO _____

MILITARY PENSION OR WAR RISK COMPENSATION _____ YES _____ NO _____

REFERENCE	NATURE OF ACTION	POSITION AND GRADE	SALARY		EFFECTIVE DATE	DEPARTMENT OR ESTABLISHMENT OFFICIAL STATION	TOTAL SER	
			PAY LESS ALLOWANCES	BASIC PAY			MOS.	DAYS
	Prob.Appt.	Keeper At Large	$ 720 A.		1--3-24	COMMERCE, USLHS, FARALLON LS, 18th District CALIF.		
	Bonus disctd	& salary increased to	960 "		7--1-24	do do		
	Prom.	Keeper 3rd Asst.	960 "		10-17-24	do do		
	Retroactive	pay rec'd 7-1-24 to 1-31-25 $43.84						
	Incr.Comp.	Keeper 3rd Asst.	1260 A.		2--1-25	do do		
	Prom.	do 2nd "	1320 "		5--1-25	do do		
	Incr.Comp.	do do	1380 "		7--1-25	do do		
	Tr.	do do	1500 "		11-17-26	do MILE ROCKS	LS, CALI	
	Welch Act	do do	1620 "		7--1-28	do do		
	Chg.Desig.	do 1st "	1620 "	$1680 A**	12-16-32	do do		
	Incr.	do do	1680 "	1740 "	6-16-39	do do		
739	Tr.E02,5-9-39	do do (1620-1980)	1680 "	1740 "	7--1-39	TREAS, USCG, SF DIST. do		
	Enlisted	**Boatswain's Mate, 1c.**	"	"	6-19-41	" "		

EDUCATION: (INDICATE NUMBER OF YEARS)

COMMON SCHOOL	HIGH SCHOOL	COLLEGE
1 2 3 4 5 6 X 8	1 2 3 4	1 2 3 4

DEGREES, IF ANY _____

SPECIAL QUALIFICATIONS _____

** $60 A. - 9-30-33.

16-

EMA - COPY NB

No. _____

WOODRUFF	LYMAN	ALEXANDRE
(SURNAME)	(FIRST NAME)	(SECOND NAME)

DATE OF BIRTH		
MONTH	DAY	YEAR
Jan.	15	1901

SEX M RACE W

RETIREMENT AGE 70

LEGAL VOTING RESIDENCE

STATE AND CONG. DISTRICT	COUNTY	CITY OR TOWN
Calif. ~~Sixth~~ 4th	San Francisco ~~Alameda~~	San Francisco ~~Oakland~~

MILITARY SERVICE _____ YES _____ NO X

MILITARY PENSION OR WAR RISK COMPENSATION _____ YES _____ NO _____

REFERENCE	NATURE OF ACTION	POSITION AND GRADE	SALARY: PAY LESS ALLOWANCES	SALARY: BASIC PAY	EFFECTIVE DATE	DEPARTMENT OR ESTABLISHMENT OFFICIAL STATION	TOTAL SERVICE: MOS.	DAYS	YRS.
	Prob.Appt.	Keeper At Large	$ 720 A.		1--3-24	COMMERCE, USLHS / FARALLON LS, CALIF.			
	Bonus disctd	& salary increased to	960 "		7--1-24	do do			
	Prom.	Keeper 3rd Asst.	960 "		10-17-24	do do			
	Retroactive	pay rec'd 7-1-24 to 1-31-25 $43.84							
	Incr.Comp.	Keeper 3rd Asst.	1260 A.		2--1-25	do do			
	Prom.	do 2nd "	1320 "		5--1-25	do do			
	Incr.Comp.	do do	1380 "		7--1-25	do do			
	Tr.	do do	1500 "		11-17-26	do MILE ROCKS LS, CALIF.			
	Welch Act	do do	1620 "		7--1-28	do do			
	Chg.Desig.	do 1st "	1620 "	$1680 A**	12-16-32	do do			
	Incr.	do do	1680 "	1740 "	6-16-39	do do			
739	Tr.E02,5-9-39	do do (1620-1980)	1680 "	1740 "	7--1-39	TREAS,USCG,SF DIST. do			
	Enlisted	**Boatswain's Mate, 1c.**	"	"	6-19-41	" "			

EDUCATION: (INDICATE NUMBER OF YEARS)

COMMON SCHOOL	HIGH SCHOOL	COLLEGE
1 2 3 4 5 6 X 8	1 2 3 4	1 2 3 4

DEGREES, IF ANY _____

SPECIAL QUALIFICATIONS _____

** $60 A. - 9-30-33.

16—183

No. _____

DATE OF BIRTH		
MONTH	DAY	YEAR
Jan.	15	1901
SEX M	RACE W	
RETIREMENT AGE 70		

DATE	DESIGNATION	OFFICE

WOODRUFF (SURNAME) LYMAN (FIRST NAME) ALEXANDRE (SECOND NAME)

DATE	FISCAL YEAR DEDUCTIONS AND SERVICE CREDIT CONTRIBUTIONS	TONTINE DEDUCTIONS	NET FISCAL YEAR DEDUCTIONS AND SERVICE CREDIT CONTRIBUTIONS	DEPARTMENTS ESTABLISHMENTS WILL NOT USE THIS COLUMN	BALANCE FORWARD	TOTAL CREDITED TO EMPLOYEE	DATE OF ORIGINAL APPOINTMENT / REMARKS
NO DEDUCTIONS, UNDER LIGHTHOUSE RETIREMENT ACT.				SERVICE HISTORY CERTIFIED CORRECT.			
	O. L. Jenkins			ACTING SUPERINTENDENT OF LIGHTHOUSES (COAST GUARD) 11-8-39			

RETIREMENT RECORD CARD—CIVIL SERVICE COMMISSION FORM 2806—FEB. 1931

U. S. GOVERNMENT PRINTING OFFICE 16—183

LYMAN A. WOODRUFF

Other folder cannot be located.

Inventoried 6-19-41

LYMAN A. WOODRUFF

Form 73a

EMA

REPORT OF TRANSFER OF APPOINTEE

DEPARTMENT OF COMMERCE
LIGHTHOUSE SERVICE

OFFICE OF SUPERINTENDENT OF LIGHTHOUSES, 18th DISTRICT,

San Francisco, California, December 16th, 1932, 19~~32~~x

COMMISSIONER OF LIGHTHOUSES:

The following-named employee has been transferred as indicated, and entered upon duty at his new station on December 16, 1932.

Name, Lyman A. Woodruff Position, Keeper (First Assistant)

From Keeper (2nd Asst.) Mile Rocks Light Station To Mile Rocks Light Station

Salary and range, $1620. A. $1560-1920 Salary and range, $1620. A. $1620-1980

Previous incumbent and pay, W.S.Williams $1740.00 Annum (LT#739)

Services terminated, November 30, 1932 Reason, Retirement

H. W. RHODES

SUPERINTENDENT OF LIGHTHOUSES

, 19

The above-referred-to transfer became effective beginning with 12-16-32

BUREAU OF LIGHTHOUSES
WASHINGTON

JAN -5 1933

Submitted to the Secretary of Commerce for his information.

For the Commissioner:

Chief of Personnel Division.

11—4598 U. S. GOVERNMENT PRINTING OFFICE: 1931

December 21, 1932

Superintendent of Lighthouses, San Francisco, Calif.

Your nomination Form 73 of December 9 for the transfer of Lyman A. Woodruff from 2nd assistant keeper at Mile Rocks Lightstation at $1620 per annum to 1st assistant without change in pay is herewith returned. Since this transfer is to be without change in pay, designation or nature of duties, it can be effected and reported on Form 73a upon completion. Justification is not required in this case.

For the Commissioner:

W. P. HARMAN

Administrative Assistant

Incl
H-M

Form A-38

DEPARTMENT OF COMMERCE
DIVISION OF PERSONNEL
WASHINGTON

June 16, 1939.

Mr. Lyman A. Woodruff

Through the Commissioner of Lighthouses.

Sir:

You are advised that your compensation has been changed as indicated below, effective June 16, 1939.

A new appointment will not be issued to you as a result of this change, and an oath of office is not required.

By direction of the Secretary:

Respectfully,

OLIVER C. SHORT
Director of Personnel.

From: $1620

To: $1680

Service and grade:

Appropriation (unit): Field

18
C

JUL 15 1939

STANDARD FORM NO. 6
(Approved by the President 3/28/24)
Revised Dec. 5, [illegible]9

PERSONAL HISTORY STATEMENT

(To be prepared by appointee in own handwriting)

Department or Establishment Lighthouse Service **Date** October 4, 1929

1. Name in full (Mr., Miss, or Mrs.) Mr. Hauptli Sorensen Alexander
(Surname) (Given name) (Middle name)

2. Present address 2190 Grove San Francisco California
(Number) (Street) (City) (State)

3. Legal (voting) residence Fifth San Francisco California
(State and Congressional District) (County) (City or town)

4. Where born Oregon When born January 15, 1901
(State or foreign country) (City or town) (Month Day Year)

5. If foreign-born, state whether naturalized or alien

6. Indicate sex, marital condition, and race by check, thus: √ If Mrs., state other names under which previously employed.

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

7. Number and ages of dependents domiciled with you Wife, 40 years, (Residing in Oregon Mother 68, Stepfather 72)

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

BRANCH OF SERVICE	PLACE OF EMPLOYMENT	POSITION	SALARY	DATE APPOINTED			DATE SEPARATED		
				Month	Day	Year	Month	Day	Year
18th Lighthouse District	Farallon Light Station California	Keeper at Large to 2nd Asst Keeper	$1,122 to $1,380	Jan	3	1924	Nov	12	1926
Now employed at									
18th Lighthouse District	Mile Rocks Light Station California	2nd Asst Keeper to 1st Asst Keeper	$1,500 to $1,680	Nov	17	1926			

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

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

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

(Title) (Location) (Date appointment expires)

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

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

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

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

Enlisted ____ Discharged ____ | Enlisted ____ Discharged ____

Rank ____ Rank ____ | Rank ____ Rank ____

Organization ____ Organization ____ | Organization ____ Organization ____

[OVER]

10—1930

13. State any special qualifications not involved in your present position (for instance, lawyer, physician, civil engineer, knowledge of foreign languages, etc.) "None"

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

NAME AND ADDRESS OF EMPLOYER	POSITION AND CHARACTER OF WORK	LENGTH OF SERVICE
Independent	Fishermen	5 Seasons
Balfour Guthrie & Co. San Francisco Calif	Seamen	Have no record
Irvine Wells & Co. Watson Bldg. San Francisco Calif	Seamen	Have no record
Mc Cormick S.S. Co. 461 Market St. San Francisco Calif	Seamen	Have no record
U.S. Shipping Board San Francisco Calif.	Seamen	Have no record

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

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

16. In case of emergency, notify Mrs. L. A. Washburn

Relationship Wife Post office address 2190 Grove St. San Francisco Calif.

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

Lyman A. Washburn
(Name as usually written and which will be used as official signature)

U. S. GOVERNMENT PRINTING OFFICE: 10—1930

copy of this form has not been sent to the Department.

Form 78

16

REPORT OF DAMAGE TO PROPERTY OR INJURY TO PERSONS

DEPARTMENT OF ~~COMMERCE~~ THE TREASURY

LIGHTHOUSE ~~SERVICE~~

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

OFFICE OF SUPERINTENDENT OF LIGHTHOUSES, DISTRICT,

San Francisco, Calif., 12 September, 1940 ,~~1938~~

Name of vessel, station, or other aid to navigation involved: MILE ROCKS LIGHT STATION

Date of accident: August 21, 1940.

Nature and cause of accident: Sprained right wrist, Unusual strain on hand in crawling out of reservoir due to lack of hand holds in cramped quarters.

Estimated cost of damage { to property of the Department: $ --- ; to private property: $---

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

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

NAME	OFFICIAL TITLE, IF GOVERNMENT EMPLOYEE	NATURE OF INJURY	HAS WORK TIME BEEN LOST BY EMPLOYEE
LYMAN A. WOODRUFF	KEEPER (1st Asst.)	Sprained wrist - iodine poisoning of injured wrist.	Yes, but covered by sick leave.

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

Remarks or recommendations:

O L Jenkins

Acting *Superintendent of Lighthouses.*

Date ----------

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

For the Commissioner.

11—11418

THE TREASURY

Form 73
DEPARTMENT OF ~~COMMERCE~~
~~LIGHTHOUSE SERVICE~~ U.S. COAST GUARD
Approved Sept. , 1938

NOMINATION

SAN FRANCISCO DISTRICT
~~LIGHTHOUSE DISTRICT~~ San Francisco, California, 19 June, 1941.
(City) (Date)

TO: THE COMMANDANT.
~~COMMISSIONER OF LIGHTHOUSES.~~

Action recommended Change in Status - Civilian to Military

Name WOODRUFF, Lyman A. Date of birth 1-15-1901 Legal residence California

	From—	To—
Position,	Keeper (First Assistant)	Boatswain's Mate, 1st cl.
Pay and grade	$1680. A. (1620-1980) Plus $60. A. Qtrs.	
Station	Mile Rocks Light Station	Mile Rocks Light Station
Appropriation	Civilian Employees, C.G.	2011203.001, Pay & Allowances, C.G.

Effective 19 June, 1941 [1] the actual date of entrance on duty, ~~or as soon thereafter as he enters on duty~~

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

Vice new position Pay Services terminated

Reason

REMARKS: [2]

Selection regular, , 19

Manager, Civil Service District.

R. S. Patch
R.S.PATCH
Chief of Staff
COMMANDER, USCG
~~Superintendent of Lighthouses~~

BUREAU OF LIGHTHOUSES, WASHINGTON, , 19

Submitted to the Secretary of Commerce, approved.

Acting Commissioner of Lighthouses.

[1] Strike out the clause which does not apply.
[2] In case of vessel officer, state license held.

11—2314

DEPT. STOCK FORM 2249
REV. 1-41

UNITED STATES TREASURY DEPARTMENT
WASHINGTON, D. C.

TO:

Date Prepared June 19, 1941.

Name: Woodruff, Lyman A.

From: U. S. Coast Guard

Bureau No.:

Change in status - civilian to military.

	FROM	TO
Position Grade Salary	Keeper Field (Range $1620-1980) $1680 p.a. plus $60 p.a. Qtrs.	Boatswain's Mate, 1c. No change in pay and allowances, Sec. 7, Act of August 5, 1939, applies.
Bureau or Div. Organizational Subdivisions	U. S. Coast Guard	U. S. Coast Guard
Headquarters Post of Duty Appropriation Allotment	San Francisco, Calif. Mile Rocks Lt. Sta., Calif. Civilian Employees, C. G.	San Francisco, Calif. Mile Rocks Lt. Sta., Calif. Pay and allowances, C. G.

FIELD ☐ DEPRTMTL. ☐ FIELD ☒ DEPRTMTL. ☐

EFFECTIVE *Remarks:* June 19, 1941.

The change indicated is pursuant to the Act of August 5, 1939.

Justification:

CIVIL SERVICE OR OTHER LEGAL AUTHORITY

APPROPRIATION: Regular

DATE OF BIRTH: 1-15-1901

LEGAL RESIDENCE: Calif.

SEX: M RACE: W

NATURE OF POSITION

NEW | ADDTL. IDENT.

VICE VACANCY | VICE

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

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

DATE OF OATH

DATE APPROVED BY THE SECRETARY 6/23/41

BUREAU OR DIVISION PERSONNEL FILES

JUL 23

U. S. COAST GUARD (12)

REC'D JUN 27 1941

Form 93

NOTICE OF RESIGNATION ~~OR DEATH~~

THE TREASURY

DEPARTMENT OF ~~COMMERCE~~

~~LIGHTHOUSE SERVICE~~ U. S. COAST GUARD

OFFICE OF COMMANDER, SAN FRANCISCO DISTRICT

~~OFFICE SUPERINTENDENT OF LIGHTHOUSES~~ ~~DISTRICT~~

TO: THE COMMANDANT. San Francisco, Calif., 21 June, 1941. , 19

~~COMMISSIONER OF LIGHTHOUSES~~

Herewith is transmitted the resignation, in duplicate, of the following-named employee:

Name, WOODRUFF, Lyman A. Position, Keeper (1st Asst.)

Legal residence, California Station, Mile Rocks Light Station

Salary, $1680.00 per annum
Plus quarters valued at $60.00 Annum

The acceptance of this resignation { ~~with~~ without } prejudice is recommended effective at the close of 18 June, 1941

This employee has **not** taken leave in excess of the accrued rate.

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

Mr. Woodruff's services as a civilian terminated at the close of 18 June, 1941. He was inducted as a boatswain's mate, 1st class, on 19 June, 1941. Oath administered 19 June, 1941.

Nomination for change in status, civilian to military, mailed. Forwarded 19 June, 1941.

R. S. Patch COMMANDER, USCG

R. S. PATCH ~~SUPERINTENDENT OF LIGHTHOUSES~~

11—4623

BUREAU OF LIGHTHOUSES
WASHINGTON

Submitted to the Secretary of Commerce,

Form 93

NOTICE OF RESIGNATION ~~OR DEATH~~

~~DEPARTMENT OF COMMERCE~~ THE TREASURY

~~LIGHTHOUSE SERVICE~~ U.S.COAST GUARD

OFFICE OF COMMANDER, SAN FRANCISCO DISTRICT

~~OFFICE SUPERINTENDENT OF LIGHTHOUSES.~~ ~~DISTRICT.~~

TO: THE COMMANDANT, San Francisco, Calif., 21 June, 1941. , 19

~~COMMISSIONER OF LIGHTHOUSES.~~

Herewith is transmitted the resignation, in duplicate, of the following-named employee:

Name, WOODRUFF, Lyman A. Position, Keeper (1st Asst.)

Legal residence, California Station, Mile Rocks Light Station

Salary, $1680.00 per annum
Plus quarters valued at $60.00 Annum

The acceptance of this resignation { ~~with~~ / without } prejudice is recommended effective at the close of 18 June, 1941

This employee has not taken leave in excess of the accrued rate.

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

Mr. Woodruff's services as a civilian terminated at the close of 18 June, 1941. He was inducted as a boatswain's mate, 1st class, on 19 June, 1941. Oath administered 19 June, 1941.

Nomination for change in status, civilian to military, mailed. Forwarded 19 June, 1941.

COMMANDER, USCG

R.S.PATCH ~~XXXXXXXXXXXXXXXXXXXXXXXX~~

11—4623

BUREAU OF LIGHTHOUSES
WASHINGTON

Submitted to the Secretary of Commerce,

TREASURY DEPARTMENT

UNITED STATES COAST GUARD

SAN FRANCISCO, CALIF.

OFFICE OF COMMANDER
SAN FRANCISCO DISTRICT

18 June, 1941.

From: Lyman A. Woodruff, 1st Assistant Keeper, Mile Rocks Light Station.
To : Commandant.

Subject: Resignation for purpose of enlistment in Coast Guard.

Reference: (a) Headquarters 3rd endorsement dated 12 June, 1941, on Medical Examination Form 2525 B.

I herewith tender my resignation as First Assistant Keeper, Mile Rocks Light Station, $1680.00 per annum plus quarters $60.00 per annum, for the purpose of enlisting as a boatswain's mate, 1st class, in the regular establishment of the Coast Guard, in accordance with Reference (a). My resignation to be effective at the close of this date, 18 June, 1941.

Lyman A. Woodruff
LYMAN A. WOODRUFF

18 June, 1941.

From: Lyman A. Woodruff, 1st Assistant Keeper, Mile Rocks Light Station.
To : Commandant.

Subject: Resignation for purpose of enlistment in Coast Guard.

Reference: (a) Headquarters 3rd endorsement dated 12 June, 1941, on Medical Examination Form 2525 B.

I herewith tender my resignation as First Assistant Keeper, Mile Rocks Light Station, $1680.00 per annum plus quarters $60.00 per annum, for the purpose of enlisting as a boatswain's mate, 1st class, in the regular establishment of the Coast Guard, in accordance with Reference (a). My resignation to be effective at the close of this date, 18 June, 1941.

Lyman A. Woodruff
LYMAN A. WOODRUFF

UNITED STATES COAST GUARD

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

AIR MAIL

4 April, 1949
FILE: PE- C 78
AUTH: 519266

From: Commandant
To: Boatswain's Mate, first class, Lyman Alexandre Woodruff (221-341), USCG
Via: (1) Commander, Twelfth Coast Guard District
(2) Commanding Officer, CG Group, Presidio, California

Subj: Retirement; travel

1. Your application for retirement has been approved by the Commandant pursuant to the provisions of Section 2 of the Act of May 24, 1939 (53 Stat. 755), and he has fixed 31 May, 1949, as the effective date of your retirement. Therefore, effective 31 May, 1949, you are detached from all duties previously assigned you. On 1 June, 1949, you will be placed on the inactive retired list of the Coast Guard.

2. Prior to actual detachment, you will be informed of your rights and benefits as a veteran and, upon detachment, issued Form NAVCG-553, Notice of Separation from the U.S. Naval Service - Coast Guard, in accordance with current directives.

3. Travel expenses incident to the execution of this order are chargeable to Headquarters' travel allotment, No. 051-20, under the authorization number indicated above.

4. Travel allowance payable upon retirement is governed by Articles 138 (6) (g) and 142, P&SI. Transportation of dependents and household effects will be governed by Articles 456 (12) and 467 (2), respectively, P&SI. Transportation of dependents and shipment of household effects to your home of selection will be provided at Government expense only if accomplished within one year from the date of your detachment. Once you notify the Commandant of your arrival at your permanent home, action is final and no further designation may be made.

5. The officer having custody of your pay record is hereby directed to forward it unclosed to the Commandant (FA-P) immediately after your detachment. If final credit entries, such as leave rations, unused leave to be settled for on retirement, etc., have not been posted, a Commanding Officer's Pay Record Order, Form NAVCG-510, covering such credits, will be obtained and forwarded. Upon detachment, you will immediately notify the Commandant (FA-P) of your mailing address and you will thereafter notify the Commandant (FA-P) of any change in that address. Your service and health records will be completed and mailed to the Commandant (PE-PR) on the effective date of your retirement.

6. Your commanding officer will indorse this order to indicate place, time, and date of delivery and time and date of your detachment and departure. You will indorse this order to show place, time, and date of receipt, place selected by you as your permanent home after retirement, and the time and date of arrival at your permanent home.

W. C. CAPRON
By direction

B 3105
Encls (2)
CORRES:me Ret 3-13

4/4/49

UNITED STATES COAST GUARD

ADDRESS REPLY TO
THE COMMANDANT (PE-C) WASHINGTON 25, D. C.
REFER TO FILE: 03-

11 February, 1948

From: Commandant
To: Commander, Twelfth Coast Guard District (pmp)

U. S. COAST GUARD
MAIL SECTION
MAILED FEB 12 1948

Via:

Subj: WOODRUFF, Lyman A. (221-341) BM1c ; request for retirement; acknowledgement (Mile Rocks Light Station)

Ref: (a) Woodruff's letter dated 30 January, 1948, bearing your indorsement

Advise the above-named man that his request for retirement by reason of completion of twenty or more years of service has been received at HQ and that his application will be considered in any future selection of men for retirement under the 20 year enlisted retirement law.

F. V. HELMER
By direction

24 Yrs.

CORRESPONDENCE:me Return to 3-11
ROOM 3134

NPRA-6288

73

3-11

UNITED STATES COAST GUARD

ADDRESS REPLY TO COMMANDER
Mile Rocks Light Station
Box 2 Presidio
San Francisco, California

REFER TO FILE

FEB 3 1948
12th Coast Guard District

30 January, 1948

From: WOODRUFF, Lyman Alexandre (221-341) BM1c-USCG

To: The Commandant, United States Coast Guard (pmp)

Via: Commander, Twelfth Coast Guard District (pmp)

Subj: Retirement under the 20 year law

1. I request retirement under the 20 year retirement law.

2. I entered the Lighthouse Service 3 January, 1924, I was inducted into the Coast Guard 19 June, 1941, This is all continuous service, Which gives me 24 years of service.

Lyman A. Woodruff

Lyman A. Woodruff

1948 FEB 10 15 21

PEA-A

Ind-1
OComdr12CG Dist.(p)
CG-73

6 February, 1948

To: Commandant (PE)

Forwarded for Headquarters' consideration.

C. G. BOWMAN
By direction

00989

Mile Rocks Light Station
Box 2 Presidio
San Francisco, California

30 January, 1948

From: WOODRUFF, Lyman Alexandre (221-341) BM1c-USCG

To: The Commandant, United States Coast Guard (pmp)

Via: Commander, Twelfth Coast Guard District (pmp)

Subj: Retirement under the 20 year law

1. I request retirement under the 20 year retirement law.

2. I entered the Lighthouse Service 3 January, 1924, I was inducted into the Coast Guard 19 June, 1941, This is all continuous service, Which gives me 24 years of service.

Lyman A. Woodruff

Ind-1
OComdr12CG Dist.(p)
CG-73

6 February, 1948

To: Commandant (PE)

Forwarded for Headquarters' consideration.

C. G. BOWMAN
By direction

00989

3-17

APR 26 '46 PM

Ind-2
Commander, 12th CG Dist.(pra)
CG-706
22 April, 1946

To: The Commandant, Coast Guard (PEA)

Subj: WOODRUFF, Lyman A. (221-341) BM1c; retirement; request for

Forwarded, approved.

E. H. Fritzsche

E. H. FRITZSCHE
By direction

22

District Coast Guard Officer
APR 22 1946
12th Naval District

UNITED STATES COAST GUARD

FOR VICTORY
BUY UNITED STATES WAR BONDS AND STAMPS

ADDRESS REPLY TO
OinC, Fort Point Lifeboat Station
Box 2, Presidio, San Francisco, Calif.
AND REFER TO CG-706

APR 22 1946
RECORDS & ASSIGNMENTS

12 April, 1946

To: The Commandant (P)

Via: DCGO, 12th Coast Guard District

Subj: WOODRUFF, Lyman A. (221-341) BM1c; retirement; request for

1. It is requested that I be considered for retirement.

2. I have completed twenty-two years service as of 3 January, 1946.

Lyman A. Woodruff
LYMAN A. WOODRUFF BM1c USCG

Ind-1
OinC, Fort Point Lifeboat Station
San Francisco, California

Forwarded, recommended.

William J. Yeoman
WILLIAM J. YEOMAN
Officer in Charge

12595

3-13
File

UNITED STATES COAST GUARD

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

AIR MAIL

28 March, 1949
FILE PE-C 73

From: Commandant
To: Commanding Officer, Coast Guard Group, Precidio, California
Via: Commander, Twelfth Coast Guard District

Subj: WOODRUFF, Lyman Alexandrea (221-341) BM1 ; retirement of

1. The request of the subject-named man for retirement under the provisions of Section 2 of the Act of May 24, 1939 (53 Stat. 755) has been approved by the Commandant, such retirement to be effective 31 May, 1949. Retirement and travel orders will be forwarded in the near future.

2. If the effective date of retirement falls within a period of authorized leave, the man need not be required to return to his station. In this case, the retirement and travel orders addressed to him will be indorsed and forwarded to the man at his leave address.

3. Forward to the Commandant (PE-PR) without delay a transcript of subject-named man's quarterly "conduct" marks for his current enlistment.

W. C. CAPRON
By direction

CORRESPONDENCE:me Return to 3-11

3/29/49

am B 3101

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)
WOODRUFF	Lyman	Alexandre

SERVICE NUMBER	RANK OR RATING	UNIT (If on active duty)
(221-341)	BM1c	Mile Rocks Lt. Station

HOME ADDRESS (Give Number, Street, City, Zone No., and State)
2190 Grove St. San Francisco, 17, California

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)

Lyman a. Woodruff
Lyman A. Woodruff
(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)

Lyman a. Woodruff
Lyman A. Woodruff
(Recipient sign here)

(Do not sign unless awards are actually received)

A-1164

3-285

REPORT OF CHANGE IN PERSONN
UNITED STATES COAST GUARD
NAVCG-2599 (REV. 6-45)

Specific Grp

No. 267

SURNAME, FIRST NAME, INITIAL	SERVICE No.	PRESENT RANK OR RATING
WOODRUFF, Lyman A.	221-341	BM1c
MAJOR UNIT NAME	**MINOR UNIT NAME**	**LOCATION**
Office, Comdr. 12th CG District	Mile Rock Light Station	S. F. Calif.
MAJOR UNIT ITEM No. OR VESSEL'S ASSIGNED DISTRICT	**MINOR UNIT ITEM No.**	**DATE**
12-001	12-059	2 April, 1948

TIME
DATE
REPORTED FROM:
FOR

DUTY CODE NO.
AUTH:

TIME
DATE
TRANSFERRED TO:
FOR

AUTH:

CHANGED IN {RANK / RATING} FROM BM1c TO BM1 EFFECTIVE 2 April, 1948

DUTY CODE NO.
AUTH: PERSONNEL CIRCULAR NO. 36-47

OTHER CHANGES (SPECIFY)

DUTY CODE NO.
AUTH:

A. O'D. WISE, Chief Ship's Clerk, 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
PEA-5 62	NOTED

Machine Accounting
Punched
Verified

☆ U. S. GOVERNMENT PRINTING OFFICE 16—40355-2

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

WOODRUFF, (Surname)	Lyman (First name)	A. (Middle initial)	221-341 (Service No.)	BMlc (Rank or rating)

Mile Rock Light Station (Unit)	San Francisco, California (Place)	24 October, 1947 (Date)

From: COMMANDING OFFICER.
To: PAY OFFICER.

You are hereby authorized to adjust the pay accounts of the above named for the following reason:

Completed a three year period of net service and will be credited with increased pay on the following statement of service:

Completed 3 years - - - - - - - - - - - - - - - 6-18-44
AWL - Sick, Misc. - NPDI - - - - - - - - - - None
Enlistment Estended - - - - - - - - - - - - - -6-19-44
AWL - Sick, Misc. - NPDI - - - - - - - - - - None
Completed 6 years - - - - - - - - - - - - - - - 6-18-47

NOW SERVING

AUTHORITY:

Art 111(1) P&SI

A. O'D. WISE, (Commanding)

Chief Ship's Clerk, USCG (Title)
By direction

CC: HQ

---

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 1942 — O - 426485

Mile Rock

REPORT OF CHANGE IN PERSONNEL

UNITED STATES COAST GUARD

NAVCG-2599 (REV. 6-45)

No. 93

File

SURNAME, FIRST NAME, INITIAL	SERVICE NO.	PRESENT RANK OR RATING
WOODRUFF, Lyman A.	221-341	BM1c

MAJOR UNIT NAME	MINOR UNIT NAME	LOCATION
~~COmdr12th CG District~~	Mile Rock L/S	S.F.,Calif.

MAJOR UNIT ITEM NO. OR VESSEL'S ASSIGNED DISTRICT	MINOR UNIT ITEM NO.	DATE
12-001	12-074	6/23/47

TIME 1330
DATE 6/19/47

REPORTED FROM: CG Cruit Sta.,S.F.,Calif.
FOR asdu.

DUTY CODE NO. 29-D

AUTH: Com12CG,,Ord.#.123546-47(pmp)(73-531) 6/17/47.

TIME
DATE

TRANSFERRED TO:
FOR

AUTH:

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

DUTY CODE NO.

AUTH:

OTHER CHANGES (SPECIFY)

DUTY CODE NO.

AUTH:

A. O'D. WISE, CSC,USCG,
By direction wj (*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

Mile Rock

REPORT OF CHANGE IN PERSONNEL

UNITED STATES COAST GUARD

NAVCG-2599 (REV. 6-45)

No. 93

File

SURNAME, FIRST NAME, INITIAL	SERVICE No.	PRESENT RANK OR RATING
WOODRUFF, Lyman A.	221-341	BM1c

MAJOR UNIT NAME	MINOR UNIT NAME	LOCATION
~~Comdr12th CG District~~	Mile Rock L/S	S.F.,Calif.

MAJOR UNIT ITEM No. OR VESSEL'S ASSIGNED DISTRICT	MINOR UNIT ITEM No.	DATE
12-001	12-074	6/23/47

TIME 1330
DATE 6/19/47

REPORTED FROM: CG Cruit Sta.,S.F.,Calif.
FOR asdu.

DUTY CODE NO. 29-D AUTH: Com12CG,,Ord.#.123546-47(pmp)(73-531) 6/17/47.

TIME
DATE

TRANSFERRED TO:
FOR

AUTH:

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

DUTY CODE NO. AUTH:

OTHER CHANGES (SPECIFY)

DUTY CODE NO. AUTH:

A. O'D. WISE, CSC,USCG,
By direction wj (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

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

WOODRUFF, Lyman A.	BM1c	221-341
(Name—Surname to left)	(Rank or rating 31 Aug. 1946)	(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 120 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:

	Muriel Louise Woodruff	Wife
(If none, so state)	(Name of dependent)	(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.

Lyman A. Woodruff
(Signature of claimant) (DO NOT PRINT OR TYPE)

Subscribed and sworn to (or affirmed) before me at San Francisco, California this 17th day of JUNE, 1947

(SEAL)

A. O'D. WISE, Chief Ship's Clerk, USCG
(Signature of Notary Public or other officer authorized to administer oaths for general purposes)

(OVER)

16—49451-1

NCG-2522

FOLLOW INSTRUCTIONS ON BACK

Mile Rock Light Station (Unit)

WOODRUFF, Lyman A. (Name, surname first) | 221-541 (Service number) | BMlc (Rank or rating)

FINAL MEDICAL CERTIFICATE

*REGULAR *SPECIAL ~~TEMPORARY~~ *~~RESERVE~~ (Enlistment status)

Place USMH San Francisco California, Date 3 MAR 47, 19

FILE T, LeB

To: Officer in Charge, USCG LB Sta "FORT POINT", Box #2, Presidio, (Coast Guard unit) San Francisco, California. (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
Burn, Right Flank	050-441	1-17-47	3-3-47
Seborrheic Dermatitis Right Flank, Sternum, Right shoulder, Left Lower Abdomen and Back	110-190	1-17-47	3-3-47

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.}

E. JAWETZ
P.A.Surgeon
U. S. Public Health Service.

16—27156-1

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 _____ since _____, 19 , has been
(Diagnosis)

transferred this date _____, 19 , to the U. S. Marine Hospital at _____ for further treatment.

_____
U. S. Public Health Service.

*Strike out words not applicable.

16—27156-1

NCG-2522

FOLLOW INSTRUCTIONS ON BACK

WOODRUFF, Lyman A.	221-341	BM1c	Fort Point LB Station
(Name, surname first)	(Service number)	(Rank or rating)	(Unit)

*REGULAR
*SPECIAL
~~*TEMPORARY~~
*RESERVE
(Enlistment status)

FINAL MEDICAL CERTIFICATE

U.S. Marine Hospital

Place San Francisco, Calif., Date 6 NOV 46, 19

FILED
T. Lee

To: Officer-in-Charge, Fort Point LB Station
(Coast Guard unit)

Box 2 Presidio, San Francisco, Calif.
(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
Pyorderma of scalp	1..-100.1	10-28-46	10-28-46

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.

L.A.SAPIRSTEIN
MD
U. S. Public Health Service.

16—27156-1

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

_____ since _____, 19 , has been
(Diagnosis)

transferred this date _____, 19 , to the U. S. Marine Hospital at _____ for further treatment.

_____
U. S. Public Health Service.

* Strike out words not applicable.

16—27156-1

REPORT OF CHANGE IN PERSONNEL

UNITED STATES COAST GUARD

NAVCG-2599 (REV. 6-45)

No. 368

SURNAME, FIRST NAME, INITIAL	SERVICE No.	PRESENT RANK OR RATING
WOODRUFF, Lyman A.	221-341	B.M.1c.
MAJOR UNIT NAME	**MINOR UNIT NAME**	**LOCATION**
	Mile Rock Light Station	San Fran., Calif.
MAJOR UNIT ITEM No. OR VESSEL'S ASSIGNED DISTRICT	**MINOR UNIT ITEM No.**	**DATE**
	12-074	29 October, 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)

Effective 26 October, 1945, CG Group, San Francisco, California, discontinued as a major unit and records picked up by DCGO, 12ND (pra), for administrative purposes.

Man still serving at minor unit.

DUTY CODE NO. 30 D AUTH: SHORE OP PLAN. DCGO, 12ND/L 10-18-45 (73-783).

JEAN L. RICHARDS (Commanding) By direction DCGO, 12ND(pra)

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

PEA-E 49

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. 31

SURNAME, FIRST NAME, INITIAL	SERVICE No.	PRESENT RANK OR RATING
WOODRUFF, Lyman A.	221-341	BM1c

MAJOR UNIT NAME	MINOR UNIT NAME	LOCATION
CG GROUP, Presidio	Mile Rocks Light Station	San Francisco, Cal.
MAJOR UNIT ITEM No. OR VESSEL'S ASSIGNED DISTRICT	MINOR UNIT ITEM No.	DATE
12-075	12-074	10-17-45

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: No Fee Needed.

OTHER CHANGES (SPECIFY)

Due to the dis-establishment of the CG GROUP, Presidio, San Francisco, California, the minor units under this command are released as of this date and the above-named man is transferred to the jurisdiction of the OinC, Mile Rocks Light Station, San Francisco, California.

DCG012ND(o)/L,701, 10-12-45

DUTY CODE NO.
AUTH:

(29 D)

C. M. THOMAS, 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

PEA-E 71

Machine Accounting
Punched _____
Verified _____

☆ U. S. GOVERNMENT PRINTING OFFICE 16—40355-2

UNITED STATES COAST GUARD

SAN FRANCISCO 26, CALIF.



ADDRESS REPLY TO
DISTRICT COAST GUARD OFFICER
TWELFTH NAVAL DISTRICT
REFER TO FILE:

(o)

73
701

8 October, 1945

To: Woodruff, Lyman A. (221-341) BMlc

Subj: Designation as Officer in Charge, Mile Rock Light Station, Presidio of San Francisco, San Francisco, Calif.

1. In accordance with paragraph 10 of Commandant's Circular No. 12-45 you are hereby designated as Officer in Charge, Mile Rock Light Station, Presidio of San Francisco, San Francisco, Calif., and will be directly responsible to the Officer in Charge, Fort Point Lifeboat Station, Presidio of San Francisco, San Francisco, Calif. You shall have all the authority and responsibility of a Commanding Officer as set forth in the inclosure attached to Commandant's Circular No. 12-45, except that you shall not:

(a) Hold mast, convene courts and make recommendations for general courts martial;
(b) Convene boards of investigation;
(c) Grant leaves of absence or leaves on account of sickness;
(d) Enlist, extend enlistments, reenlist, advance in rating, disrate, discharge or take any other such personnel action in connection with enlisted personnel;
(e) Administer oaths.

2. You will keep the Officer in Charge of the Fort Point Lifeboat Station, Presidio of San Francisco, San Francisco, Calif., advised of any irregularities occurring at your station and any change of personnel deviating from that authorized by this office.

3. Acknowledge receipt of this letter.

S. B. JOHNSON
By direction

CC: Commandant, Coast Guard
Personnel
OIC, Fort Point Lifeboat Station

Date	Rate	Proficiency in rating	Seamanship	Mechanical ability	Ability as leader of men	Special Qualification or Special Detail	Conduct
6-30-41	BM1c	LESS THAN ONE MONTH					
9-30-41	BM1c	3.5	3.5	- -	3.5		4.0
12-31-41	BM1c	3.5	3.5	- -	3.5		4.0
3-31-42	BM1c	3.5	3.5	3.4	3.5		4.0
6-30-42	BM1c	3.5	3.5	3.4	3.5		4.0
8-10-42	BM1c	3.5	3.5	3.4	3.5		4.0
9-30-42	BM1c	3.5	3.5	3.4	3.5		4.0
12-31-42	BM1c	3.6	3.5	3.5	3.6	Qualified Light Keeper	4.0
3-31-43	BM1c	3.7	3.5	3.5	3.7	O-C Light House	4.0
6-30-43	BM1c	3.7	3.5	3.5	3.7	O-C Light House	4.0
9-30-43	BM1c	3.7	3.5	3.0	3.6	O-C Light House	4.0
12-31-43	BM1c	3.7	3.5	3.5	3.7	O-C Light House	4.0
3-31-44	BM1c	3.7	3.5	3.5	3.7	O-C Light House	4.0

Enlistment voluntarily extended for three years effective 18 June, 1944

Transcript of Efficiency Marks for the Three (3) year period of enlistment (REG) from 19 June, 1941 to 18 June, 1944 for WOODRUFF, Lyman Alexandre (221-341) BM1c., U. S. Coast Guard.

C. M. THOMAS, Lieut., USCG.
Commanding Officer

JUL 20 1943

169

UNITED STATES COAST GUARD

8191D

Address reply to:
COAST GUARD STATION,
SAN FRANCISCO, CALIFORNIA
Refer to file: 73-701

19 July, 1943

To: Commandant, U. S. Coast Guard.

Via: DCGO, 12th Naval District.

Subj: Lyman A. Woodruff (221-341), B.M.1c; recommendation for advancement to C.B.M.(a)(Pro).

Refs: (a) Personnel Bulletin No. 10-42.
(b) Personnel Bulletin No. 64-42.

1. Subject man is hereby recommended for advancement to C.B.M.(a)(Pro). He is qualified in all respects, as outlined in references (a) and (b). Woodruff has proven himself to be an outstanding petty officer, and is considered a leading man of strong charactor. He is capable of directing a force under him and planning details for its employment.

2. Woodruff first enlisted in the Coast Guard on 19 June, 1941 as B.M.1c, having served in the U. S. Lighthouse Service since 1924, making the total of his service to the Government over 19 years. Woodruff was born in Curry County, Oregon, 15 January, 1901 and is married with no children.

3. He has had no mark below 3.5 in Proficiency in Rating or below 4.0 in Conduct during the year preceding the date of this recommendation. Woodruff is deemed professionally, physically and morally qualified for advancement to the Chief Petty Officer grade. His average marks during this period are as follows:

Proficiency in rating	- 3.6
Ability as a leader of men	- 3.6
Conduct	- 4.0

C. M. Thomas
C. M. THOMAS



JUL 28 1943

U. S. COAST GUARD
Rcvd AUG 11 1943

Ind-1
ECGO, 12th ND (p)
26 July, 1943
File: 73-701

To: Commanding Officer, COAST GUARD STATION, San Francisco, Calif.

Subj: WOODRUFF, Lyman A. (221-341) B.M.1c.; recommendation for advancement to chief petty officer

Returned; indicate by indorsement hereon if, in your opinion, subject-named man fulfils the requirements for chief boatswain's mate for general service - i.e., duty afloat or ashore.

D. H. DEXTER
By direction

- -

Ind-2
CGSta., San Francisco
10 August, 1943.
73-701

To: Personnel Officer.

Woodruff is deemed qualified to perform general duty both at sea and ashore as a CBM(a).

C. M. THOMAS
Commanding Officer

1943 SEP 4 AM 8 46

3-11

3-1

Ind-3
BCGO, 12th ND (p)
73-701
27 August, 1943

To: The Commandant

Subj: WOODRUFF, Lyman A. (221-341) B.M.1c.; recommendation for advancement to chief boatswain's mate (acting)

Forwarded; approved. WOODRUFF is professionally and morally qualified to perform the duties of a chief boatswain's mate. The DCGO recommends that he be given an appointment as chief boatswain's mate (acting).

Philip F. Roach

PHILIP F. ROACH

Woodruff, Lyman A. (221-341) B.M.1c 9-8-43

(Name) (Number) (Grade or rate) (Date)

Health Height Weight

Enlisted (6-19-41) Rate (B.M.1c) Born (1-15-01) Army, Navy, Lighthouse No

Changed Rate to	Date	Commendations
		Grammar School ( ) High School (
		Courses, Special qualifications, etc.
		Censure, Investigations, Debts, etc.
		Courts.

Reports of Fitness. (Favorable)

Reports of Fitness. (Unfavorable)

Yrs.	Ships and Stations	Prof.	Con.	Sob.	Ld. Ship.

Eligible list - (Yes) - (No) - (Because) -

Eligibility list canceled by aboard 138-45.

Remarks

IN REPLYING REFER
TO NO. COX-21078-E

ADDRESS ALL COMMUNICATIONS TO:
DIRECTOR
U. S. COAST GUARD INSTITUTE
GROTON, CONNECTICUT

UNITED STATES COAST GUARD INSTITUTE
GROTON, CONNECTICUT

12 February, 1945

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

Subject: WOODRUFF, Lyman (221-341) B.M.1c.;
completion of rating course for Coxswain - (83% - 3.32).

Reference: (a) Par. 7(e), Circular No. 112, Regulations.
(b) Par. 7(f), Circular No. 112, Regulations.

Inclosure: (A) Certificate of graduation.

1. The Institute takes pleasure in transmitting herewith inclosure (A) in accordance with reference (a).

2. A copy of this letter should be placed in subject named man's file, and proper notation made in his Service Record and Continuous Service Certificate in accordance with reference (b).

C. T. SOLT.

LR
Copy to:
Headquarters
File

Form 2522
TREASURY DEPARTMENT
U. S. COAST GUARD
Revised March 1938

FOLLOW INSTRUCTIONS ON BACK

U.S. COAST GUARD (7)
APR 10 1942

FILE

WOODRUFF, Alexandre L. (Name, surname first) | 221-341 (Service number) | B.M.1c. (Rank or rating) | Mile Rock Light Station. (Unit) C.M.

*REGULAR ~~SPECIAL~~ ~~TEMPORARY~~ (Enlistment status)

FINAL MEDICAL CERTIFICATE

U.S. MARINE HOSPITAL

Place San Francisco, California., Date 1 April, 1942, 19

To: Command Officer, San Francisco Station, (Coast Guard unit)
Presidio, San Francisco, California. (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
Antitetanic Inouclation	0121	2-20-42	3-27-42
Anti-inoculation for Yellow Fever	0119	4-1-42	4-1-42
Anti-inoculation for Smallpox	0119	3-5-42	3-5-42
Antityphoid Inoculation	0122	2-20-42	3-5-42

He {*is / *~~is not~~} fit for duty. REMARKS (Recommendations as to sick leave, further treatment, etc.):

U.S. COAST GUARD
REC'D APR 11 1942 BY
MEDICAL SECTION

CONDUCT REPORT:

Did the patient cooperate in his treatment? {*Yes. / *~~No.~~} Absent without permission? {*~~Yes.~~ / *No.} Guilty of insubordination? {*~~Yes~~ / *No.}

H H Darling
H.H. Darling
Asst. Surgeon(R) 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.

2—663

U. S. COAST GUARD (15)

REC'D DEC 1 1941

ADDRESS THE COMMANDANT, U. S. COAST GUARD
AND REFER TO NO. PR-73

HEADQUARTERS

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

[redacted]

UNITED STATES COAST GUARD

WASHINGTON 12 November, 1941

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

Subject: WOODRUFF, Lyman Alexandre (221-341), B.M.1c.; identification records of.

1. It is requested that the fingerprints of Woodruff be taken again on Form 2515 and forwarded to this office at the earliest practicable date.

F. E. ALLISON,
By direction.

---

73 First Indorsement San Francisco, California
SAN FRANCISCO DISTRICT 24 November, 1941

From: Senior Coast Guard Officer, Twelfth Naval District.
To : Commandant, Coast Guard.

Inclosure: (A) Form 2515, case of subject man.

1. The inclosure is forwarded in compliance with basic letter.

R. S. PATCH,
By direction.



Form 2529
TREASURY DEPARTMENT
U. S. Coast Guard
Revised September 2, 1941.

UNITED STATES COAST GUARD

U. S. COAST GUARD (15)

DESIGNATION OF BENEFICIARIES FOR DEATH GRATUITY

MILE ROCK LIGHT STATION — (Unit)

San Francisco, California — (Place)

1 October, 1941 — (Date)

FROM: WOODRUFF, Lyman A. (221-341) B.M.1c.

TO: COMMANDANT (via Commander, San Francisco 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:

Muriel Louise Woodruff (Full name of wife; if not married, so state)	2190 Grove Street, San Francisco, California (Address of wife)
-None- (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:

Mrs. Harriet Cabin (Full name of relative)	mother (Relationship)	Gold Beach, Oregon (Address of relative)

Widowed, full dependency
(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)

(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.

Lyman A. Woodruff
Lyman A. Woodruff
(Signature)

Boatswain's Mate, first class
(Rank or rating)

Subscribed and sworn to before me this 1st day of October, 1941.

R. S. Patch
R. S. PATCH, Commander, USCG
(Signature)
Chief-of-Staff, San Francisco District
(Rank or title)

FILED PE-8

Ret. 1969

OCG 54490

TREASURY DEPARTMENT
U. S. COAST GUARD
CG-4011 (6-60)

APPLICATION FOR ARMED FORCES IDENTIFICATION CARD, DD2CG

PART I - TO BE COMPLETED BY APPLICANT (Print or type)

NAME (Last, first, middle initial): WOODRUFF, LYMAN A.

GRADE OR RATE: ~~BM1~~ PO1(E-6)

USCG / USCGR: X

SERVICE NUMBER: 221-341

DUTY ASSIGNMENT (Ship, Station, etc.): Retired -USCG (Lighthouse Station)

MAILING ADDRESS (If not on active duty): 2087-46th Avenue, San Francisco, California 94116

35 MM PHOTO ATTACHED:

PHOTO BEING MADE BY ISSUING ACTIVITY:

REASON FOR REQUESTING CARD (Check appropriate box)

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

DATE OF BIRTH	WEIGHT	HEIGHT	COLOR HAIR	COLOR EYES	BLOOD TYPE
1-15-1901	157	5'8"	Blond	Blue	A

DATE OF APPLICATION: 10-28-1967

SIGNATURE OF APPLICANT: L. A. Woodruff

PART II - TO BE COMPLETED BY VERIFYING OFFICER

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

TYPE OF DD2CG TO BE ISSUED
- ☐ ACTIVE ☐ RESERVE
- ☒ RETIRED

RETIRED CARD ONLY
- ☒ MEDICARE AUTHORIZED
- ☐ MEDICARE NOT AUTHORIZED

EXPIRATION DATE: INDEFINITE

SIGNATURE, TITLE, AND MAILING ADDRESS OF VERIFYING OFFICER: L. H. THORNHILL L. H. Thornhill
Acting Chief, Records Branch
~~Enlisted Personnel Division~~
U. S. Coast Guard, Washington, D. C

PART III - TO BE COMPLETED BY ISSUING OFFICER

CARD NO. ISSUED	DATE OF ISSUE	SIGNATURE, TITLE AND MAILING ADDRESS OF ISSUING OFFICER
0016713	11-17-67	F. M. ALONZO, CHSCLK, USCG CCGD12(p) SFRAN F M Alonzo

REPLACES CGHQ-3505, CGHQ-9958, AND VARIOUS APPLICATION FORMS USED IN FIELD, ALL OF WHICH ARE OBSOLETE

GPO 948-780

pef

PR5-73
701

8 September, 1941.

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

Subject: Completion of records.

Reference: (a) Headquarters' letter to All District Commanders, 16 March, 1940 (PR5-701-702).

1. The enlistment contracts of the following-named men were received with insufficient supporting papers:

ATKINSON, Thomas A.	(221-346)	B.M.1c.
MILLER, Harry R.	(221-347)	B.M.2c.
WILLIAMS, Elmer R.	(221-349)	B.M.1c.
MOOREFIELD, John R.	(221-350)	B.M.1c.
FRANCIS, Norman L.	(221-351)	B.M.1c.
FIELDING, Paul F.	(221-352)	B.M.2c.
HUNTER, Perry S.	(221-353)	B.M.1c.
DAY , Harmon A.	(221-354)	B.M.1c.
Mc NAB, Niels F.	(221-345)	B.M.2c.
PFLEGHAAR, Herman J.	(221-342)	B.M.1c.
WOODRUFF, Lyman A.	(221-341)	B.M.1c.
CROCKETT, Roy M.	(221-342)	B.M.1c.
RITCHIE, Frank W.	(221-340)	B.M.1c.

Reference (a) applies to Light Keepers the same as the crews of tenders inducted into the Coast Guard. All additional forms will be obtained and forwarded to Headquarters at the earliest possible date.

N. R. STILES,
By direction.

Veterans Administration
Insurance Form 343

FILE
M.B.

REQUEST FOR SERVICE INFORMATION IN CONNECTION WITH INSURANCE

August 1, 1941

To: Coast Guard
(War) (Navy) (Marine Corps) (Coast Guard)

Name Woodruff, Lyman Alexander

Rank BMlc Mile Rock Light Sta. Serial No.

C No.
K No.
N No. 534 580
T No.

Please furnish below complete information in reply to questions checked and return this sheet to the Veterans Administration.

(X) Date of separation from last tour of active duty (Federal Service).

(X) Date of entry upon present tour of active duty (Federal Service).

( ) Dates of World War Service.

( ) Complete transcript of service between April 5, 1917 and July 2, 1921.

( ) Copy of application or any information of record regarding Yearly Renewable (War Time) Insurance.

( )

H. L. McCOY,
Director of Insurance. WCL Gr.24 Sec.D

es

PR-73 10 September 1941

From: U. S. Coast Guard
To: Veterans Administration.

FILE
M.B.

WOODRUFF, Lyman Alexandre, boatswain's mate, first class, (221-341)
Enlisted 19 June, 1941, at San Francisco, Calif., for three years.
Now serving at U. S. Coast Guard Mile Rock Light Station, San Francisco, Calif.
Born 15 January, 1901, in Curry County, Oregon.

mB

By B. A. SHAW, By direction

UNITED STATES VETERANS BUREAU
INSURANCE DIVISION
Form 739a—Rev. Sept., 1929

NATIONAL SERVICE LIFE INSURANCE

APPLICATION FOR UNITED STATES GOVERNMENT LIFE INSURANCE

IN ACCORDANCE WITH THE PROVISIONS OF THE WORLD WAR VETERANS' ACT, 1924, AS AMENDED, AND BUREAU REGULATIONS

(For use of persons in the active military or naval service under the War Department, Navy Department, or Coast Guard Service. Use ink and make separate application for each plan of insurance selected.)

1. NAME IN FULL: (Please print or type)	First	Middle	Last name
	LYMAN	ALEXANDRE	WOODRUFF

2. HOME ADDRESS: Number	Street or rural route	County, city, town, or post office	State
	2190 Grove St.,	San Francisco	California

MAILING ADDRESS: 2190 Grove St., San Francisco California

3. I WAS BORN AT	City, town, or post office	State	Day of month	Month	Year	Age nearest birthday
	(near) Gold Beach,	Oregon	15	January	1901	40

4. Did you serve in the military or naval forces of the United States in the course of the World War (April 6, 1917, to July 2, 1921)? (Answer "Yes" or "No") NO

5. PREVIOUS ENLISTMENT DATES	6. DISCHARGE DATES	7. ARE YOU NOW DISABLED ON ACCOUNT OF INJURY OR DISEASE? IF SO, STATE DETAILS
		NO

8. SERIAL NUMBER	9. PRESENT ORGANIZATION Rank, grade, or rating	Organization, regiment, station, ship, etc.	10. DATE OF PRESENT ENLISTMENT
221-341	BMlc	Mile Rock Light Station U.S. COAST GUARD	19 June, 1941

11. I hereby apply for insurance in the amount of $ 5,000.00 N.S. Four

12. PLAN OF INSURANCE DESIRED ~~Ordinary Life~~
(Enter plan selected, whether Ordinary Life, 20-payment Life, 30-payment Life, 20-year Endowment, 30-year Endowment, Endowment at age 62, or 5-year Convertible Term. Make separate application for each different plan.)

PREMIUMS AS INDICATED BELOW
(Make cross mark X under method selected)

PAYMENTS TO BE MADE DIRECT TO BUREAU AS FOLLOWS: Mo.	Quart.	Semian.	An.	BY ALLOTMENT MONTHLY	BY DEDUCTION MONTHLY
$ —	$ —	$ —	$ —	$ X	$

14. DO YOU APPLY FOR TOTAL DISABILITY BENEFITS FOR WHICH AN EXTRA PREMIUM IS REQUIRED? Answer "Yes" or "No" No
If "Yes" the report of a medical examination must be submitted on the reverse side of this form. (NOTE.—This benefit is in addition to the total and permanent disability benefit which is automatically included in the policy without extra charge.)

15. Full name of beneficiary (If married woman, her own first and middle name and husband's last name must be stated)	Relationship, if any	Amt. of Ins. for each beneficiary	Post office address (a) Number and street. (b) City, town, or post office.
Muriel Louise Woodruff	WIFE	$3,000.00	2190 Grove St., San Francisco, Calif.

16. I desire the proceeds of this policy paid in the event of my death under the following optional settlement indicated by cross mark X below:

No. 1 (X) one sum.	No. 2 (____) payable in ____ limited installments.	No. 3 (____) continuous installments.

17. I REQUEST THAT THE EFFECTIVE DATE of this policy be made the 1st day of JULY, 19 41, otherwise, it is understood and agreed that the insurance herein applied for shall become effective as follows:
a. If the first premium is paid by direct remittance, the insurance will become effective as of the day on which the application and tender of premiums are made and forwarded to the United States Veterans Bureau, or
b. If the first premium is to be paid by allotment or deduction, the insurance will become effective on the first day of the month following the month in which the allotment or authorization for deduction is executed, provided the amount of the premium is deducted from the applicant's service pay in accordance with the allotment or authorization.
Upon written request of the applicant, the policy of insurance may be issued effective as of the first day of any month prior to the month in which the application and tender of premiums are made, provided such date is not prior to date of entrance into the active service, or more than six months prior to the first day of the month in which application is made, upon payment of the reserve as required by Bureau regulations.

18. (A) I inclose herewith remittance payable to the TREASURER OF THE UNITED STATES by {~~Draft~~ Money order Check} in the amount of $ 5.10
to cover (1) the first 2 (July & August) premium of $ 2.55 XXX on the amount and plan of insurance applied for, plus (2) the
(Write above whether monthly, quarterly, semiannual, or annual)
first ____ premium of $____ for the total disability benefits applied for.
(Write above whether monthly, quarterly, semiannual, or annual)

(B) I WILL AUTHORIZE AN {Allotment of Pay ~~Deduction from Pay~~} effective AUGUST, 1941, to cover (1) the monthly premium of $ 2.55 on the amount and plan of insurance applied for, plus (2) the monthly premium of $____ for total disability benefits.

SIGNED AT San Francisco, California ON THE 9th DAY OF JULY, 19 41

WITNESSED BY
C. L. Brinkley
C.L. BRINKLEY, CHIEF PAY CLERK, USCG
(Rank and organization)

Lyman A. Woodruff
(Applicant sign here. Do not print signature)
LYMAN A. WOODRUFF, BMlc

NOTE.—Penalty for making false statement or writing for the purpose of defrauding the United States, $1,000 fine or imprisonment. (Section 29—Federal Criminal Code.)

2—11203

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

U. S. COAST GUARD
RC'D JUN 23 1941

REPORT OF CHANGE IN PERSONNEL

WOODRUFF,	Lyman	A.	221-341	B. M. 1c.
(Surname)	(First name)	(Middle initial)	(Service No.)	(Rank or rating)

MILE ROCK LIGHT STATION	San Francisco, California	19 June, 1941
(Unit)	(Place)	(Date)

19 June, 1941 - Enlisted in Coast Guard as Boatswain's Mate, first class, for a period of three (3) years in the Regular Establishment.

Formerly - First Asst. Keeper, MILE ROCK LIGHT STATION.

Lighthouse Service - - 17 years, 5 months, 16 days.

AUTHORITY:

Hdqts 3rd indorsement Form 2525-B.

R. S. Patch
R. S. Patch, Commander, USCG
Commander, San Francisco District
(Acting) (Title)

SPACE BELOW IS FOR HEADQUARTERS' USE ONLY

LAW	PERSONNEL RECORDS		
	Statistics	Correspondence	Records

U. S. GOVERNMENT PRINTING OFFICE 0 10935

Form 2500
TREASURY DEPARTMENT
U. S. COAST GUARD
Revised August 1938

ENLISTMENT CONTRACT

U. S. COAST GUARD (16)
REC'D JUL 5 1941

~~RE~~ENLISTMENT of WOODRUFF, Lyman Alexandre (Full name, surname to left) 221 - 341 (Service number) as B. M. 1c. (Rating)

U. S. Coast Guard ~~Cutter~~ Station MILE ROCK LIGHT STATION SF, District, San Francisco, California (Location of vessel, or P. O. address of station)

(Draw line through designation not applying)

Accepted for enlistment at San Francisco, California (Place)

1. I, Lyman Alexandre Woodruff (Full name), this 19th day of June, 1941, desiring to enlist in the United States Coast Guard do declare 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, or Marine Corps; that I have never been discharged from any service through sentence of either a civil or military court; nor have I been discharged from any civil or military service under other than honorable conditions, except as follows: x x x

2. I was born in Curry County, Oregon, on 15 January, 1901 Citizenship[a] N.B.

If naturalized, place and date of naturalization x x Certificate No.

If intentions declared, place and date of declaration x x

Home address 2190 Grove Street, San Francisco, California

Full name and address of the following: Muriel Louise Woodruff, 2190 Grove, San Francisco, Calif. (Wife, if any)

-None- (Children under 21 years of age. Specify ages of children)

Mrs. Harriet Cabin, Gold Beach, Oregon (Mother, if living) Widowed? Yes

(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 for any crime by civil authorities; that I have never been convicted of any crime by civil authority, and that I have never been confined in any reform school, jail, or penitentiary, except as follows:

No arrests, convictions or confinements (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 R. S. PATCH, Commander (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 through unauthorized absence or by absence on account of injury, sickness, or disease, resulting from my own intemperate use of drugs or alcoholic liquors, or other misconduct, or while in confinement under sentence, or while awaiting trial and disposition of my case if the trial results in conviction, 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 or undesirability, I agree to surrender my uniforms for a suit of civilian clothes.

Thirdly, the United States of America, represented by R. S. PATCH, Commander (Name of enlisting officer), United States Coast Guard, does hereby covenant and agree to and with the said Lyman Alexandre Woodruff (Name of person enlisting) who has hereunto signed his

[a] 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 Puerto Rico.

U. S. GOVERNMENT PRINTING OFFICE 16—6420

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.

Lyman Alexandre Woodruff

Lyman Alexandre Woodruff
(Signature of enlisted person)

UNITED STATES OF AMERICA,

By R. S. PATCH, Commander, U.S.C.G.
(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.

R. S. PATCH
Commander, *U. S. C. G., Enlisting Officer.*

11. OATH OF ALLEGIANCE

I, Lyman Alexandre Woodruff, 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.

Lyman Alexandre Woodruff

Lyman Alexandre Woodruff
(Signature of enlisted person)

Subscribed and sworn to before me this 19th day of June, A. D. 1941

STANLEY V. PARKER, Captain, U.S.C.G.
Commander, San Francisco District
(Comdg. officer, officer in charge of a unit, or notary public)

12. DESCRIPTIVE LIST

Age 40 years 5 months. Height 5 feet 8 inches. Weight 163 pounds. Eyes grey

Hair lt brown Complexion ruddy Color White Married Yes

Distinguishing marks TATTOOS: Full rigged ship, anchor, heart with dagger; left forearm: Shield with furled flag and eagle; rt forearm; VSULA

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.

ENLISTMENT EFFECTED PURSUANT TO THE ACT OF AUGUST 5, 1939.

R. S. PATCH, Commander, U.S.C.G.
Enlisting Officer

16—8420

Form 2500
TREASURY DEPARTMENT
U. S. COAST GUARD
Revised August 1938

ENLISTMENT CONTRACT

U. S. COAST GUARD (16)
REC'D JUL 5 1941

~~RE~~ENLISTMENT of WOODRUFF, Lyman Alexandre (Full name, surname to left) 221 - 341 (Service number) as B. M. 1c. (Rating)

U. S. Coast Guard ~~Cutter~~ Station MILE ROCK LIGHT STATION SF, District, San Francisco, California (Location of vessel, or P. O. address of station)

(Draw line through designation not applying)



at San Francisco, California (Place)

1. I, Lyman Alexandre Woo[druff] (Full name) ...th day of June, 19 41, desiring to enlist in the United States Coast Guard do [solemnly declare that I am] ...abits and character; that I have never deserted nor received a dishonorable discharge from the Unit[ed States Army], ...my, Navy, or Marine Corps; that I have never been discharged from any service through sentence ... court; nor have I been discharged from any civil or military service under other than honorable c... : x x x

2. I was born in Curry County, ... 5 January, 1901 Citizenship[a] N.B.

If naturalized, place and date of naturalizat... Certificate No. ...

If intentions declared, place and date of decl...

Home address 2190 Grove Stree..., California

Full name and address of the following: Muriel Louise Woodruff, 2190 Grove, San Francisco, Calif. (Wife, if any)

-None- (Children under 21 years of age. Specify ages of children)

Mrs. Harriet Cabin, Gold Beach, Oregon Widowed? Yes (Mother, if living)

(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 for any crime by civil authorities; that I have never been convicted of any crime by civil authority, and that I have never been confined in any reform school, jail, or penitentiary, except as follows:

No arrests, convictions or confinements (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 R. S. PATCH, Commander (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 through unauthorized absence or by absence on account of injury, sickness, or disease, resulting from my own intemperate use of drugs or alcoholic liquors, or other misconduct, or while in confinement under sentence, or while awaiting trial and disposition of my case if the trial results in conviction, 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 or undesirability, I agree to surrender my uniforms for a suit of civilian clothes.

Thirdly, the United States of America, represented by R. S. PATCH, Commander (Name of enlisting officer), United States Coast Guard, does hereby covenant and agree to and with the said Lyman Alexandre Woodruff (Name of person enlisting) who has hereunto signed his

[a] 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 Puerto Rico.

U. S. GOVERNMENT PRINTING OFFICE 16—8420

Form 2529
TREASURY DEPARTMENT
U. S. COAST GUARD

UNITED STATES COAST GUARD

DESIGNATION OF BENEFICIARIES FOR DEATH GRATUITY

MILE ROCK LIGHT STATION (Unit) — San Francisco, California (Place)

19 June, 1941 (Date)

FROM: WOODRUFF, Lyman A. (221-341) B.M.1c.

TO: COMMANDANT (via Commander, San Francisco 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)
Muriel Louise Woodruff	2190 Grove Street, San Francisco, California
-None-	
(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:

(Full name of relative)	(Relationship)	(Address of relative)
Mrs. Harriet Cabin	mother	Gold Beach, Oregon

Widowed, full dependency
(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)

(State briefly wherein dependency exists)

WITNESSED BY:

R. S. PATCH
Commander
Rank

SIGNED:

Lyman A. Woodruff
Rank or Rating B. M. 1c.

2—10348 U. S. GOVERNMENT PRINTING OFFICE: 1932

Form 2520
TREASURY DEPARTMENT
U. S. COAST GUARD
Revised Dec. 1938

This application blank will be forwarded with enlistment contract in cases of men accepted for enlistment.

APPLICATION FOR ENLISTMENT

Position desired Boatswain's Mate, first class

WARNING

If you have been in the Coast Guard, Army, Navy, or Marine Corps, or have ever been arrested by civil authorities, and fail to reveal the facts, 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.

San Francisco, California
(Place)

19 June, 19 41
(Date)

I respectfully request permission to enlist in the United States Coast Guard, and to that end do declare that I am 40 years 5 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 WOODRUFF, Lyman Alexandre

Date of birth 15 January, 1901

Place of birth Curry County, Oregon Citizenship N.B.

Home address 2190 Grove Stree, San Francisco, California

Are you married? Yes Number and relationship of persons dependent on you for support? 2

Wife and widowed mother

Are you prepared to support your dependents on service pay? Yes

Are your parents living? Mother Are your parents dependent on you for support? Yes

Name and address of next of kin Mrs. Harriet Cabin, Gold Beach, Oregon

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—
U.S. LIGHTHOUSE SERVICE			1924	Present	

Do you drink intoxicating liquors? If so, to what extent? Never to excess

Have you ever been arrested? If so, for what? Never arrested

Have you ever been in a reform school, jail, or penitentiary, or have you ever been convicted of any crime?

2—13412

(OVER)

Form 2500-A
TREASURY DEPARTMENT
U. S. Coast Guard

VOLUNTARY AGREEMENT TO EXTEND ENLISTMENT

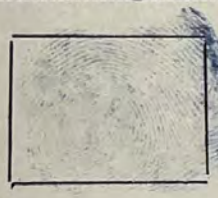
CODED
NO. 1

Mile Rocks Light Station
U.S.C.G. (SAN FRANCISCO STATION)
(Unit)
San Francisco, California.
(Place)
18 June, 1944
(Date)

Pursuant to the Act of July 30, 1937 (50 Stat. 547) and the regulations prescribed thereunder, I, Lyman Alexandre Woodruff (Name of Applicant) 221-341 (Service No.) BMlc (Rating), having, on 19 June, 1941 (Date), enlisted in the U. S. Coast Guard under a contract of enlistment for a term of 3 years, do hereby voluntarily agree for the consideration mentioned therein to extend said term of enlistment for a period of 3 years from the date of expiration thereof, subject to all the provisions of said contract of enlistment, of which this agreement shall form a part. My reason for making this agreement is ALCOAST NR 2 (January, 1942)

I also agree to any further extension as maybe necessary due to war.

Lyman A. Woodruff
(Signature of Applicant)



Tip of right forefinger

Voluntarily agreed and subscribed to before me this 18th day of June, A.D., 1944

C. M. THOMAS, Lt(jg), U.S.C.G.
(Signature of Commanding Officer)

U.S.C.G. CG Station, San Francisco, California, 18 June, 1944
(Unit) (Place) (Date)

APPROVED C. M. THOMAS, Lt(jg), U.S.C.G.
(Signature of Commanding Officer)

U.S.C.G. HEADQUARTERS, Washington, D. C.

Physically qualified for extension.

(Chief Medical Officer)

U.S.C.G. HEADQUARTERS, Washington, D.C.

18 June, 1944
(Date)

This agreement is hereby accepted for and on behalf of the United States. Service hereunder shall begin on and from the day immediately following the date of expiration of said term of enlistment.

C.M. THOMAS, Lt(jg), USCG.
Commanding (Chief, Enlisted Personnel Section)

Returned. The application for extension is disapproved.

(Chief, Enlisted Personnel Section)

(Duplicate will become first page of service record. See Art. 4261 P. I.)

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)

Mile Rocks Light Station
(SAN FRANCISCO STATION)
(Unit)

WOODRUFF, Lyman Alexandre — 19 June, 1944
(Name in full—surname to the left) (Date)

221-341 — Boatswain's Mate, First Class
(Service number) (Rating on discharge)

	Year	Month	Day
Date of last enlistment (for 3 years)	1941	6	19
Enlistment extended (for 3 years from)	1944	6	18
Date of discharge (_____) (Character of discharge)			
Total time of last enlistment period			

NUMBER OF—		
Years	Months	Days
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		

Ind-1
CG Sta., San Francisco
19 June, 1944

Began serving this date on voluntary extension of enlistment and any further extension due to war, in accordance with ALCOAST NR 2 (January, 1942).

C. M. THOMAS, Lt(jg) U. S. C. G.
Commanding Officer.

Total Absence (_____ days)

Creditable time served during last enlistment period: 3 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.

Date 19 June, 1944

C. M. THOMAS
(Rank) Lt(jg), U. S. C. G.
Commanding officer.

REENLISTMENT OR EXTENSION OF ENLISTMENT

Date 19 June, 1944

Mile Rocks Light Station
(SAN FRANCISCO STATION)
(Unit and place)

I CERTIFY that the above-named man voluntarily extended his enlistment for
(Reenlisted or voluntarily extended his enlistment)

a period of three (3) years from this date.

C. M. THOMAS,
(Rank) Lt(jg). , U. S. C. G.
Commanding officer.

U. S. GOVERNMENT PRINTING OFFICE 16—20908-1

, 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 19 June, 1944

From: Commandant.
To:

Subject: Statement of service for longevity pay.

Inclosure:

1. The following is a statement of service, to and including 18 June, 1944, of WOODRUFF, Lyman A. (225-398) BMlc - CG Station, SF, Calif.

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—
6-19-44	6-18-44	None		None		None	
Ext Enl 6-18-44 3 yrs							
Now serving							

	Yr.	Mo.	Days
Coast Guard service	3	0	0
Navy service			
Total	3	0	0

Completed 3 years 18 June, 1944

C. M. THOMAS, Lt(jg), USCG,
Commanding Officer

U. S. GOVERNMENT PRINTING OFFICE 16—23559-2

NAVCG 2599
U. S. COAST GUARD
(Rev. June 1943)

REPORT OF CHANGE IN PERSONNEL

WOODRUFF,	Lyman	A.	221-341	BM1c
(Surname)	(First name)	(Middle initial)	(Service No.)	(Rank or rating)

SAN FRANCISCO STATION	5-12-06	SF, Calif.	19 June, 1944
(Major unit)	(Unit Item No. or vessel's assigned district)	(Place)	(Date)

Mile Rocks Light Station
(Minor unit)

18 June, 1944 - Three (3) years enlistment (REGULAR ENLISTMENT) expired this date

19 June, 1944 - Began serving this date on voluntary extension of enlistment (REGULAR ENLISTMENT) for a period of three (3) years and to any necessary extension thereof due to war.

DUTY CODE No.:
AUTHORITY:
ALCOAST NR 2,
(Jan., 1942)

C. M. Thomas
(Commanding)

C. M. THOMAS, Lt(jg), USCG,
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

Machine Accounting
Punched
Verified

U. S. GOVERNMENT PRINTING OFFICE 16—29594-2

NCG 2500
(Rev. June, 1942)

RE-ENLISTMENT

ENLISTMENT CONTRACT (REGULAR ESTABLISHMENT)

Auth: Art. 553 CG Regs

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

CODED NO. 19

RE-ENLISTMENT OF WOODRUFF, Lyman Alexandre (Full name, surname to left); (221-341) (Service number); $135.00 (BP) (Pay per month)

Accepted for enlistment at San Francisco, California; BM1c (Rating in which enlisted)

Re-Enlisted at CG Recruiting Station; 19 June, 1947 (Date of enlistment)

Transferred to Mile Rock Light Station, San Francisco, California for resdu

Occupation U. S. Coast Guard Citizenship* "NB" If naturalized, place and date of naturalization - - - Certificate No. - -

Date of birth 15 January, 1901 Place of birth Curry County, Oregon

Home address 2190 Grove Street, San Francisco, California (Street and number) (Town) (County) (State)

Married or single Married Name and address of next of kin or legal guardian Muriel Louise Woodruff, Wife, 2190 Grove Street, San Francisco, California (Relationship) (Address)

Continuous Service Certificate - - - - (Number) Previous service { Coast Guard / ~~Reserve~~ } 6 (Years) 0 (Months) 0 (Days)

First enlisted 19 June, 1941 (Date) at Mile Rock LS, San Francisco, California (Place) and was last discharged 18 June, 1947 (Date) from CG Recruiting Station, San Francisco, Calif. (Unit) with Honorable (Character) discharge as BM1c (Rate) No. B133853

Previous Navy service - (Years) - (Months) - (Days) Previous Marine Corps service - (Years) - (Months) - (Days)

Previous Light House Service: 17 Yrs. 0 mos. 0 dys.

Previous Army service 0 (Years) 0 (Months) 0 (Days) Age 46 years 5 months.

Height 5 feet 8 inches. Weight 163 pounds.

Eyes Grey Sex Male Hair Lt. Brown Complexion Ruddy Color White

Personal characteristics ____ marks, etc. Tattoos: Full rigged ship, anchor, heart with dagger; left forearm: Shielf with furled flag and eagle; right forearm; VSULA

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 Bos'n.Norman T. Sode 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 { Three (3) years from 19 June, 1947 / 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

N. C. G.-2529
(Rev. 9-2-41)

UNITED STATES COAST GUARD

DESIGNATION OF BENEFICIARIES FOR DEATH GRATUITY

Coast Guard Recruiting Station, (Unit) San Francisco, California (Place)

19 June, 1947 (Date)

FROM: WOODRUFF, Lyman Alexandre (221-341) BM1c, USCG

TO: COMMANDANT (via Officer-in-Charge)

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:

Muriel Louise Woodruff (Full name of wife; if not married, so state)	2190 Grove Street San Francisco, California (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)

ADDED NO. 18

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:

None (Full name of relative)	(Relationship)	(Address of relative)

(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:

None (Full name of relative)	(Relationship)	(Address of relative)

(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 19th day of June 1947

NORMAN T. SODE, Bos'n., USCG (Signature)

Officer-in-Charge (Rank or title)

Lyman Alexandre Woodruff (Signature)
LYMAN ALEXANDRE WOODRUFF

Boatswain Mate First Class (Rank or rating)

16—25753-1

REPORT OF CHANGE IN PERSONNEL
UNITED STATES COAST GUARD
NAVCG-2599 (REV. 6-45)

No. 12

SURNAME, FIRST NAME, INITIAL	SERVICE No.	PRESENT RANK OR RATING
WOODRUFF, Lyman A.	(221-341)	BM1c
MAJOR UNIT NAME	**MINOR UNIT NAME**	**LOCATION**
CG Recruiting Station,		San Francisco, Calif.
MAJOR UNIT ITEM No. OR VESSEL'S ASSIGNED DISTRICT	**MINOR UNIT ITEM No.**	**DATE**
12-009		18 June, 1947

TIME 1330
DATE 6-18-47

REPORTED FROM: Mile Rock LS, San Francisco, Calif.
FOR discharge and reenlistment

DUTY CODE NO. 39D AUTH: CCGD12(p) Order No. 123546-47 (6-17-47)(CG-73-531)

TIME
DATE

TRANSFERRED TO:
FOR

AUTH:

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

DUTY CODE NO. AUTH:

OTHER CHANGES (SPECIFY)

18 June, 1947: Hd on accnt of exp of enl and ext thereof.

PAFE: San Francisco, California

DUTY CODE NO. 39D AUTH: 589(1) CG Regs

NORMAN T. SODE, Bos'n., USCG
Officer-in-Charge (Commanding)

CC: CCGD12(p)
SR
File

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
PE-E 64	CODED NO. 18

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. 83

SURNAME, FIRST NAME, INITIAL	SERVICE NO.	PRESENT RANK OR RATING
WOODRUFF, Lyman A.	221-341	BM1c

MAJOR UNIT NAME	MINOR UNIT NAME	LOCATION
COmdr12th CG District	Mile Rock Light Sta.,	S.F.,Calif.

MAJOR UNIT ITEM No. OR VESSEL'S ASSIGNED DISTRICT	MINOR UNIT ITEM No.	DATE
12-001	12-074	6/18/47

TIME
DATE
REPORTED FROM:
FOR

DUTY CODE NO.
AUTH:

TIME 1015
DATE 6/18/47
TRANSFERRED TO: CGRO, San Francisco, Calif. for disch and reen.
FOR

AUTH: Com12CGD,Ord.# 123546-47(pmp)(73-531) 6/17/47

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

DUTY CODE NO.
AUTH:

OTHER CHANGES (SPECIFY)

DUTY CODE NO.
AUTH:

A. O'D. WISE, CSC,USCG,
By direction wj (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
PE-E 64	CODED NO.18

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. 13

SURNAME, FIRST NAME, INITIAL	SERVICE No.	PRESENT RANK OR RATING
WOODRUFF, Lyman A.	(221-341)	BM1c

MAJOR UNIT NAME	MINOR UNIT NAME	LOCATION
CG Recruiting Station		San Francisco, Calif.

MAJOR UNIT ITEM No. OR VESSEL'S ASSIGNED DISTRICT	MINOR UNIT ITEM No.	DATE
12-009		19 June, 1947

TIME
DATE

REPORTED FROM:
FOR

DUTY CODE NO.

AUTH:

TIME 1300
DATE 6/19/47

TRANSFERRED TO: Mile Rock Light Station, San Francisco, Calif.
FOR resdu

AUTH: CCGD12(p) Order No. 123546 (6-17-47)(CG-73-531)

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

DUTY CODE NO.

AUTH:

OTHER CHANGES (SPECIFY)

19 June, 1947: Re in REG ESTAB for 3 yrs. as BM1c

PAFE: San Francisco, California

DUTY CODE NO. 39D

AUTH: Art. 553 CG Regs

NORMAN T. SODE, Bos'n., USCG
Officer- in-Charge

CC: CCGD12(p)
SR
File

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
RE -E 64	CODED NO. 18

Machine Accounting
Punched
Verified

☆ U. S. GOVERNMENT PRINTING OFFICE 16—40355-2

Form 2500-C
TREASURY DEPARTMENT
U. S. COAST GUARD
Revised June 1938

Sheet 1

SERVICE RECORD

RECORD OF WOODRUFF, Lyman Alexandre (Full name, surname to the left) 221 - 341 (Service No.)

1. TRANSFERS

Departed from—			Reported to—		
Unit	Date	Signature	Unit	Date	Signature
CGGrp, SF, Cal.	10-17-45	[signature]	[illegible]		
CGGrp, SF, Cal.	10-17-45	[signature] Lt.	Ft.Pt.LBS, SF	10-17-45	[signature] CBM.
Ft.Pt. LBSta,SF	10-26-45	Lt(jg)	ODCGO, 12ND	10-26-45	[signature] Lt.(jg)
OCom 12CGD,S.F.,Cal.	6/18/47	[signature] USSC, USCG, By Dir.			
			RO, SanFran, Cal.	6/18/47	[signature] Bos'n.
			Hon Discharge	6/18/47	[signature] Bos'n.

2. CHANGES IN RATING

Unit	Rated or disrated to—	Date	Signature
S. F. STATION	Last permanent rating held: BM1c (PR 82-43),		[signature] Lt(jg).

16—9676

RECORD OF WOODRUFF, Lyman Alexandre (Full name, surname to the left) 221-341 (Service number)

5. SPECIAL QUALIFICATIONS

Ship	Date	Proficient in—	Signature

6. EFFICIENCY MARKS

Date	Rate	Proficiency in rating	Seamanship	Mechanical ability	Ability as leader of men	Conduct	Signature
6-30-46	BM1c.	3.8	3.5	3.7	3.8	4.0	Lt. Comdr. USCG By direction
9-30-46	BM1c	3.8	3.5	3.7	3.8	4.0	CHIEF SHIP'S CLERK, USCG
12/31/46	BM1c	3.8	3.5	3.7	3.8	4.0	CHIEF SHIP'S CLERK, USCG BY DIRECTION
3/31/47	BM1c	3.8	3.5	3.7	3.8	4.0	CHIEF SHIP'S CLERK, USCG BY DIRECTION
6/18/47	BM1c	3.8	3.5	3.7	3.8	4.0	CSC, USCG, By Dir.
6/18/47	BM1c	LESS THAN ONE MONTH				4.0	Bos'n.
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

WOODRUFF, Lyman Alexandre (Full name, surname to the left) 221-341 (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
9-30-41	B.M.1c.	3.5	3.5	- -	3.5		4.0	R.T. Paech Comdr.
12-31-41	B.M.1c.	3.5	3.5	- -	3.5		4.0	R.T. Paech Comdr.
3-31-42	BM1c.	3.5	3.5	3.4	3.5		4.0	J.W. Buckley Lt.(jg)
6-30-42	BM1c.	3.5	3.5	3.4	3.5		4.0	J.W. Buckley Lieut.
8-10-42	BM1c.	3.5	3.5	3.4	3.5		4.0	J.W. Buckley Lt.
9-30-42	BM1c.	3.5	3.5	3.4	3.5		4.0	[illegible] Bosn.
12-31-42	BM1c.	3.6	3.5	3.5	3.6	Qualified Light Keeper	4.0	C.W. Thomas Bos'n
3-31-43	BM1c	3.7	3.5	3.5	3.7	O-C, Light House	4.0	C.W. Thomas Bos'n
6-30-43	Bm1c	3.7	3.5	3.5	3.7	O-C, Light House	4.0	C.W. Thomas Bos'n
SEP 30 1943								
9-30-43	BM1c	3.7	3.5	3.0	3.6	O-C LIGHT HOUSE	4.0	C.W. Thomas LT jg
12-31-43	BM1c	3.7	3.5	3.5	3.7	O-C LIGHT HOUSE	4.0	C.W. Thomas Lt.(jg)
3-31-44	BM1c	3.7	3.5	3.5	3.7	O-C LIGHT HOUSE	4.0	C.W. Thomas Lt(jg)
6-30-44	BM1c.	3.7	3.5	3.5	3.7	O-C LIGHT HOUSE	4.0	C.W. Thomas Lt(jg)
9-30-44	BM1c	3.7	3.5	3.5	3.7	O-C LIGHT HOUSE	4.0	C.W. Thomas Lieut.
12-31-44	BM1c	3.7	3.5	3.5	3.7	OIC LTSta 3.8	4.0	C.W. Thomas Lt.
3-31-45	BM1c	3.7	3.5	3.5	3.7	OIC LtSta - 3.8	4.0	C.W. Thomas Lt.
6-30-45	BM1c	3.8	3.5	3.7	3.8	OIC LtSta. - 3.8	4.0	C.W. Thomas Lieut.
9-30-45	BM1c	3.8	3.5	3.7	3.8	OIC LtSta. - 3.8	4.0	C.W. Thomas Lieut.
~~10-17-45~~	~~BM1c~~	~~3.8~~	~~3.5~~	~~3.7~~	~~3.8~~	~~OIC LtSta., 3.8~~	~~4.0~~	~~C.W. Thomas Lieut.~~
10-17-45	BM1c	3.8	3.5	3.7	3.8	OIC LtSta., 3.8	4.0	C.W. Thomas Lieut.
10-26-45	B.M.1c.	LESS THAN ONE MONTH					4.0	[illegible] Lt(jg).
12/31/45 Average	BM1c	3.8	3.5	3.7	3.8	MileRockLtSta.	4.0	[illegible] Cmdr.
3-31-46	BM1c	3.8	3.5	3.7	3.8	MileRocksLtSta	4.0	[illegible] Lieut. Comdr. USCG By Direction

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

8. DETAILS

(Will include inter-unit transfers)

Unit	Date From—	Date To—	Duty	Signature
ODCGO, 12ND (MileRock)	11-30-45	12-7-45	Al(C) 6 days	Jay L. Richards Lt(jg)
ODCGO, 12ND (Mile Rock)	1-11-46	1-18-46	Al(C) 6 days	Jay L. Richards Lt.(jg) By direction, USCGR(WR)
ODCGO, 12ND(pra)Mile Rock	2/1/46	2/8/46	Al(C) 6 days	Jay L. Richards Lt. (jg), USCG(WR)V
ODCGO, 12ND (Mile Rock LS	2-22-46	3-1-46	Al(C) 6 days	[illegible] Comdr. USCG By direction
OCmdr, 12CG Dist.	3-15-46	3-22-46	Al(C) 6 days	LR Bennewitz Lieut-Comdr. USCG By direction
OCmdr12CG Dist	4-5-46	4-12-46	Al(C) 6 days	LR Bennewitz Lieut-Comdr. USCG By direction
OComdr12CG Dist	4-26-46	5-3-46	Al(C) 6 das	LR Bennewitz Lt. Comdr, USCG
OComdr12CG Dist.	5-10-46	5-17-46	Al(C) 6 das	LR Bennewitz By direction
OComdr12CG Dist.	5-31-46	6-7-46	Al(C) 6 das	LR Bennewitz

U. S. GOVERNMENT PRINTING OFFICE 16—9676

RECORD OF **WOODRUFF, Lyman Alexandre** **221 - 341**

(Full name, surname to the left) (Service No.)

7. SPECIAL QUALIFICATIONS

Unit	Date	Proficient in—	Signature
SAN FRANCISCO STATION	3-12-43	Issued certificate upon completion of Cox course 83% - 3.32	Cmthomas Bos'n.

8. DETAILS

(Will include inter-unit transfers)

Unit	Date From—	Date To—	Duty	Signature	
CGGrp.,SF.,Calif.	6-19-41	OCT 17 1945	Mile Rocks LtSta.	Cmthomas	Lieut.
CGGrp.,SF.,Calif.	11-19-43	11-26-43	A1(C)	Cmthomas	Lieut.
CGGrp.,SF.,Calif.	12-10-43	12-7-43	A1(C)	Cmthomas	Lieut.
CGGrp.,SF.,Calif.	1-1-44	1-8-44	A1(C)	Cmthomas	Lieut.
CGGrp.,SF,Calif.	2-11-44	2-18-44	A1(C)	Cmthomas	Lieut.
CGGrp.,SF,Calif.	3-3-44	3-10-44	A1(C)	Cmthomas	Lieut.
CGGrp.,SF,Calif.	4-14-44	4-21-44	A1(C)	Cmthomas	Lieut.
CGGrp.,SF,Calif.	5-5-44	5-12-44	A1(C)	Cmthomas	Lieut.
CGGrp.,SF,Calif.	6-16-44	6-23-44	A1(C)	Cmthomas	Lieut.
CGGrp.,SF,Calif.	7-7-44	7-14-44	A1(C)	Cmthomas	Lieut.
CGGrp.,SF,Calif.	8-18-44	8-25-44	A1(C)	Cmthomas	Lieut.
CGGrp.,SF,Calif.	9-8-44	9-15-44	A1(C)	Cmthomas	Lieut.
CGGrp.,SF,Calif.	10-20-44	10-27-44	A1(C)	Cmthomas	Lieut.
CGGrp.,SF,Calif.	11-11-44	11-17-44	A1(C)	Cmthomas	Lieut.
CGGrp.,SF,Calif.	12-2-44	12-8-44	A1(C)	Cmthomas	Lieut.
CGGrp.,SF,Calif.	1-13-45	1-19-45	A1(C)	Cmthomas	Lieut.
CGGrp.,SF,Calif.	2-3-45	2-9-45	A1(C)	Cmthomas	Lieut.
CGGrp.,SF,Calif.	3-17-45	3-23-45	A1(C)	Cmthomas	Lieut.
CGGrp.,SF,Calif.	4-7-45	4-13-45	A1(C)	Cmthomas	Lieut.
CGGrp.,SF,Calif.	5-19-45	5-25-45	A1(C)	Cmthomas	Lieut.
CGGrp.,SF,Calif.	6-9-45	6-15-45	A1(C)	Cmthomas	Lieut.
CGGrp.,SF,Calif.	7-1-45	7-7-45	A1(C)	Cmthomas	Lieut.
CGGrp.,SF,Calif.	8-11-45	8-17-45	A1(C)	Cmthomas	Lieut.
Fort Point LBS, SF, Cal.	10-17-45	10-26-45	Mile Rocks LtSta.	Sidney E Jackson	CBM.
ODCGO, 12ND, S.F.,Cal.	10-26-45	6/18/47	Mile Rocks LtSta	Jean L. Richards	Lt.(jg).
Mile Rocks Light Sta.	11-2-45	11-9-45	A1(C)	Jean L. Richards	Lt(jg)
Mile Rock Light Sta.	2-22-46	3-1-46	A1(C)		

Comdr. USCG
By direction

U. S. GOVERNMENT PRINTING OFFICE 16—9676

Form 2500-C
TREASURY DEPARTMENT
U. S. Coast Guard
Revised June 1938

RECORD OF WOODRUFF, Lyman Alexandre 221 - 341
(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 GRP., SF., CALIF.	10-26-44	Entitled to wear the Good Conduct Ribbon having had no mark below 4.0 in 'Conduct' for the period from 6-19-41 to 6-18-44.	A. Thomas Lieut.

16—9676

Form 2500-C
TREASURY DEPARTMENT
U. S. COAST GUARD
Revised June 1938

RECORD OF WOODRUFF, Lyman Alexandre (Full name, surname to the left) 221 - 341 (Service No.)

9. LEAVE ACCOUNT
WITH PAY

Unit	Date Departed	Date Returned	Number of days	Balance Annual	Balance Reenlist	Signature
MILE ROCK LT STA	Credited 1st year 6-19-41			30	-	R.T. Patch Comdr.
MILE ROCK LT STA	8-1-41	8-8-41	6	24	-	R.T. Patch Comdr.
MILE ROCK LT STA	9-12-41	9-19-41	6	18	-	R.T. Patch Comdr.
MILE ROCK LT STA	10-31-41	11-7-41	6	12	-	R.T. Patch Comdr.
MILE ROCK LT STA	5-1-42	5-8-42	6	6	-	Jas Buckley Lt(jg).
MILE ROCK LT STA	6-12-42	6-19-42	6	0	-	Jas Buckley Lt(jg).
MILE ROCK LT STA	Credited 2nd year 6-19-42			30	-	Jas Buckley Lt(jg).
MILE ROCK LT STA	7-10-42	7-17-42	6	24	-	Jas Buckley Lt.
MILE ROCK LT STA	7-31-42	8-7-42	6	18	-	Jas Buckley Lt.
MILE ROCK LT STAT	5-2-43	5-6-43	3	15	-	[illegible] Bos'n.
S. F. STATION	credited 3d year		6-19-43	30	-	[illegible] Bos'n
SF STATION	Ext Enl CREDIT 6-19-44			30	30	[illegible] Lt(jg).
CG GRP,SF.,CALIF.	6-19-45	FIFTH YEAR...CREDIT		30	30	[illegible] Lieut.
ODCGO, 12ND (pra)	12-7-45	12-25-45	7	23	30	[illegible] Comdr.

16—9676

RECORD OF WOODRUFF, Lyman Alexandre 221 - 341

(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
CGGrp, SF, Calif.			NO DEDUCTIBLE TIME WHILE ATTACHED TO THIS UNIT			Lieut.
CGGrp, SF, Cal.			NO DEDUCTIBLE TIME WHILE ATTACHED TO THIS UNIT			Lt.
Ft.Pt LBSta,SF			NO DEDUCTIBLE TIME WHILE ATTACHED TO THIS UNIT.			Lt.(jg).
COom12CGD.S.F.,Cal			NO DEDUCTIBLE TIME WHILE ATTACHED THIS UNIT.			USCG,RyDir.
RO,SanFran, Calif.			NO DEDUCTIBLE TIME WHILE ATTACHED THIS UNIT			Bos'n.

11. EXTENSION OF ENLISTMENT

Unit	Period	Reason	Signature
S.F. STATION	3 yrs.	6-18-44 - Agreed to extension of current enlistment (3 yrs. STE) for a period of (3) years and any further extension that maybe necessary due to war. AUTH; AL NR 2 (January, 1942).	Lt(jg).

12. ON DISCHARGE

Date ____, 19__ Place ____ Serial No. ____

Kind of discharge ____ Authority for ____

Discharged on account of ____

Is ____ recommended for reenlistment.

(If "not," so state, and show reason)

SIGNATURE ____

13. ON DESERTION

Unit	Date	Remarks	Signature

U. S. GOVERNMENT PRINTING OFFICE 16—9676

RECORD OF WOODRUFF, Lyman Alexandre (221-341)
(Full name, surname to the left) (Service Number)

11. DESERTION

NAV. S. AND A. FORM 550

MUSTERING OUT PAYMENT

(221-341) (File or service No.) | WOODRUFF (Surname) | Lyman (First name) | A. (Initial) | BMle, USCG (Rank or rating and branch of service)

18 June, 1947 (Date discharged or released from active duty) | CORO, San Francisco, California (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

(Sign original only)

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.

Norman T. Sode

NORMAN T. SODE, Bos'n., USCG CORO

(Name and signature of officer authorized to sign in accordance with article 2025(2) 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)

Lyman Alexandre Woodruff

LYMAN ALEXANDRE WOODRUFF (Signature of applicant)

ADDRESS TO WHICH CHECK(S) ARE TO BE SENT:

(Omit address if service is LESS than 60 days)

Reenlisting day following discharge (Number) (Street)

(City) (Zone) (State)

DISBURSING OFFICER'S PAYMENT DATA

$200.00 LUMP Sum Payment on Re-enlistment ALNAV 360

Paid $100.00 on 420 2948 (Public voucher) 37093 (Check number) JUN 19 1947 (Date)

J.A.B.HAY, Jr., 18-487

(Type name and symbol No. of disbursing officer making initial payment)

16—39039-1

TRIPLICATE

MUSTERING OUT PAYMENT DIVISION DATA

Address subsequent to discharge will be:

Reenlisting day following discharge

Has signified intention {to / ~~not to~~} reenlist next day.

Creditable Coast Guard service during this enlistment 6 (Years) 0 (Months) 0 (Days)

Completed Twenty Three (23) years' net service for pay purposes on 18 June, 1947

Total time lost and deducted for pay purposes thereafter to date of discharge 0 (Years) 0 (Months) 0 (Days)

18 June, 1947 (Date)

Certified correct upon termination of service.

Norman T. Sode

NORMAN T. SODE, Bos'n., USCG

Officer-in-Charge

(4)

16—9676-2

Form 2500
TREASURY DEPARTMENT
U. S. Coast Guard
Revised August 1938

ENLISTMENT CONTRACT

ENLISTMENT of WOODRUFF, Lyman Alexandre (Full name, surname to left) 221 - 341 (Service number) as B. M. 1c. (Rating)

U. S. Coast Guard ~~Cutter~~ Station MILE ROCK LIGHT STATION SF, ____ District, San Francisco, California
(Draw line through designation not applying) (Location of vessel, or P. O. address of station)

Accepted for enlistment at San Francisco, California (Place)

1. I, Lyman Alexandre Woodruff (Full name), this 19th day of June, 1941, desiring to enlist in the United States Coast Guard do declare 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, or Marine Corps; that I have never been discharged from any service through sentence of either a civil or military court; nor have I been discharged from any civil or military service under other than honorable conditions, except as follows: x x x

2. I was born in Curry County, Oregon, on 15 January, 1901 Citizenship[a] N.B.
If naturalized, place and date of naturalization x x Certificate No. ____
If intentions declared, place and date of declaration x x
Home address 2190 Grove Street, San Francisco, California
Full name and address of the following: Muriel Louise Woodruff, 2190 Grove, San Francisco, Calif. (Wife, if any)
-None- (Children under 21 years of age. Specify ages of children)
Mrs. Harriet Cabin, Gold Beach, Oregon (Mother, if living) Widowed? Yes
(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 for any crime by civil authorities; that I have never been convicted of any crime by civil authority, and that I have never been confined in any reform school, jail, or penitentiary, except as follows:
No arrests, convictions or confinements
(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 R. S. PATCH, Commander (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 through unauthorized absence or by absence on account of injury, sickness, or disease, resulting from my own intemperate use of drugs or alcoholic liquors, or other misconduct, or while in confinement under sentence, or while awaiting trial and disposition of my case if the trial results in conviction, 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 or undesirability, I agree to surrender my uniforms for a suit of civilian clothes.

Thirdly, the United States of America, represented by R. S. PATCH, Commander (Name of enlisting officer), United States Coast Guard, does hereby covenant and agree to and with the said Lyman Alexandre Woodruff (Name of person enlisting) who has hereunto signed his

[a] 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 Puerto Rico.

U. S. GOVERNMENT PRINTING OFFICE 16—8420

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.

Lyman alexandre Woodruff

Lyman Alexandre Woodruff
(Signature of enlisted person)

UNITED STATES OF AMERICA,

By R. S. PATCH, Commander, U.S.C.G.
(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.

R. S. PATCH

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

---

11. OATH OF ALLEGIANCE

I, Lyman Alexandre Woodruff, 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.

Lyman alexandre Woodruff

Lyman Alexandre Woodruff
(Signature of enlisted person)

Subscribed and sworn to before me this 19th day of June, A. D. 1941.

STANLEY V. PARKER, Captain, U.S.C.G.
Commander, San Francisco District
(Comdg. officer, officer in charge of a unit, or notary public)

---

12. DESCRIPTIVE LIST

Age 40 years 5 months. Height 5 feet 8 inches. Weight 163 pounds. Eyes grey

Hair lt brown Complexion ruddy Color White Married Yes

Distinguishing marks TATTOOS: Full rigged ship, anchor, heart with dagger; left forearm: Shield with furled flag and eagle; rt forearm; VSULA

---

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.

ENLISTMENT EFFECTED PURSUANT TO THE ACT OF AUGUST 5, 1939.

R. S. PATCH, Commander, U.S.C.G.
Enlisting Officer

16—8420

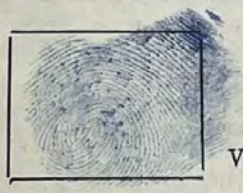
Form 2500-A
TREASURY DEPARTMENT
U. S. Coast Guard

VOLUNTARY AGREEMENT TO EXTEND ENLISTMENT

U.S.C.G. Mile Rocks Light Station (SAN FRANCISCO STATION)
(Unit)
San Francisco, California.
(Place)
18 June, 1944
(Date)

Pursuant to the Act of July 30, 1937 (50 Stat. 547) and the regulations prescribed thereunder, I, Lyman Alexandre Woodruff (Name of Applicant), 221-341 (Service No.), BMlc (Rating), having, on 19 June, 1941 (Date), enlisted in the U. S. Coast Guard under a contract of enlistment for a term of 3 years, do hereby voluntarily agree for the consideration mentioned therein to extend said term of enlistment for a period of 3 years from the date of expiration thereof, subject to all the provisions of said contract of enlistment, of which this agreement shall form a part. My reason for making this agreement is ALCOAST NR 2 (January, 1942)

I also agree to any further extension as maybe necessary due to war.



Tip of right forefinger

Lyman A. Woodruff
(Signature of Applicant)

Voluntarily agreed and subscribed to before me this 18th day of June, A.D., 1944

C. M. THOMAS, Lt(jg), U.S.C.G.
(Signature of Commanding Officer)

U.S.C.G. CG Station, San Francisco, California. 18 June, 1944
(Unit) (Place) (Date)

APPROVED C. M. THOMAS, Lt(jg), U.S.C.G.
(Signature of Commanding Officer)

U.S.C.G. HEADQUARTERS, Washington, D. C.

.....Physically qualified for extension.

(Chief Medical Officer)

U.S.C.G. HEADQUARTERS, Washington, D. C.

18 June, 1944
(Date)

This agreement is hereby accepted for and on behalf of the United States. Service hereunder shall begin on and from the day immediately following the date of expiration of said term of enlistment.

C.M. THOMAS, Lt(jg), USCG.
Commanding (Chief, Enlisted Personnel Section)

Returned. The application for extension is disapproved.

(Chief, Enlisted Personnel Section)

(Duplicate will become first page of service record. See Art. 4261 P. I.)

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)

Mile Rocks Light Station
(SAN FRANCISCO STATION)
(Unit)

WOODRUFF, Lyman Alexandre — 19 June, 1944
(Name in full—surname to the left) (Date)

222-341 — Boatswain's Mate, First Class
(Service number) (Rating on discharge)

	Year	Month	Day
Date of last enlistment (for 3 years)	1941	6	19
Enlistment extended (for 3 years from)	1944	6	18
Date of discharge (_____) (Character of discharge)			
Total time of last enlistment period			

NUMBER OF—		
Years	Months	Days
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		

Ind-1
CG Sta., San Francisco
19 June, 1944

Began serving this date on voluntary extension of enlistment and any further extension due to war, in accordance with ALCOAST NR 2 (January, 1942).

C. M. THOMAS, Lt(jg) U. S. C. G.
Commanding Officer.

Total Absence (_____ days)

Creditable time served during last enlistment period — 3 | 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.

Date 19 June, 1944

C. M. THOMAS
(Rank) Lt(jg), U. S. C. G.
Commanding officer.

REENLISTMENT OR EXTENSION OF ENLISTMENT

Date 19 June, 1944

Mile Rocks Light Station
(SAN FRANCISCO STATION)
(Unit and place)

I CERTIFY that the above-named man voluntarily extended his enlistment for
(Reenlisted or voluntarily extended his enlistment)

a period of three (3) years from this date.

C. M. THOMAS,
(Rank) Lt(jg), U. S. C. G.
Commanding officer.

U. S. GOVERNMENT PRINTING OFFICE 16—20908-1

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 19 June, 1944

From: Commandant.
To:

Subject: Statement of service for longevity pay.

Inclosure:

1. The following is a statement of service, to and including 18 June, 1944, of WOODRUFF, Lyman A. (225-398) BM1c - CG Station, SF, Calif.

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—
6-19-44	6-18-44	None		None		None	
Ext Enl 6-18-44 3 yrs							
Now serving							

	Yr.	Mo.	Days
Coast Guard service	3	0	0
Navy service			
Total	3	0	0

Completed 3 years 18 June, 1944

C. M. THOMAS, Lt(jg), USCG,
Commanding Officer

U. S. GOVERNMENT PRINTING OFFICE 16—23559-2

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):

Completed 8th grade at Gold Beach, Oregon

Have you ever served in the U. S. Coast Guard, Navy, Marine Corps, Army, or Naval Reserve? No

If so, state which

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? No

When did you apply? Where?

Were you accepted or rejected? If rejected, state why

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.

Lyman alexandre Woodruff

(Sign your full name here) Lyman Alexandre Woodruff

Accepted or rejected Accepted Cause of rejection

Date 19 June, 1941

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.

R S Patch

R. S. PATCH, Commander, USCG

U. S. C. G.

U. S. GOVERNMENT PRINTING OFFICE 2—13412

WOODRUFF, Lyman A. 221-341 BMlc

Mile Rocks Light Station
(SAN FRANCISCO STATION) San Francisco, California. 19 June, 1944

Agreed 18 June, 1944 to extension of current enlistment for a period of three (3) years, and any further extension of enlistment as may be necessary due to war, in accordance with ALCOAST NR 2 (January, 1942). Current enlistment, three (3) years (REGULAR ESTABLISHMENT), expired at 2400 on 18 June, 1944.

PAFE: Mile Rocks Light Station, San Francisco, Californ ia.

Enlistment expired while subject man was attached permanently to the Mile Rocks Light Station (SAN FRANCISCO STATION), San Francisco, California.

Entitled to reenlistment allowance in the amount of $150.00 by reason of agreement to extend. Not entitled to clothing bounty.

Art. 541 to 547, Regs.
ALCOAST NR 2 (Jan, 1942).

C. M. THOMAS, Lt(jg), USCG,
Commanding Officer.

WOODRUFF, Lyman A. 221-341 BM1c

SAN FRANCISCO STATION 5-12-06 SF, Calif. 19 June, 1944

Mile Rocks Light Station

18 June, 1944 - Three (3) years enlistment (REGULAR ENLISTMENT) expired this date

19 June, 1944 - Began serving this date on voluntary extension of enlistment (REGULAR ENLISTMENT) for a period of three (3) years and to any necessary extension thereof due to war.

ALCOAST NR 2,
(Jan., 1942)

C. M. THOMAS, Lt(jg), USCG,
Commanding Officer.

REPORT OF CHANGE IN PERSONNEL
UNITED STATES COAST GUARD
NAVCG-2599 (REV. 6-45)

No. 368

SURNAME, FIRST NAME, INITIAL	SERVICE NO.	PRESENT RANK OR RATING
WOODRUFF, Lyman A.	221-341	B.M.1c.
MAJOR UNIT NAME	**MINOR UNIT NAME**	**LOCATION**
	Mile Rock Light Station	San Fran., Calif.
MAJOR UNIT ITEM NO. OR VESSEL'S ASSIGNED DISTRICT	**MINOR UNIT ITEM NO.**	**DATE**
	12-074	29 October, 1945

TIME
DATE
REPORTED FROM:
FOR

DUTY CODE NO.
AUTH:

TIME
DATE
TRANSFERRED TO:
FOR

COPY FOR SR

AUTH:

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

DUTY CODE NO.
AUTH:

OTHER CHANGES (SPECIFY)

Effective 26 October, 1945, CG Group, San Francisco, California, discontinued as a major unit and records picked up by DCGO, 12ND (pra), for administrative purposes.

Man still serving at minor unit.

DUTY CODE NO. 30 D AUTH: SHORE OP PLAN. DCGO, 12ND/L 10-18-45 (73-783).

Jean L. Richards
JEAN L. RICHARDS (Commanding)
By direction
DCGO, 12ND(pra)

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 PERSON
UNITED STATES COAST GUARD
NAVCG-2599 (REV. 6-45)

No. 83

SURNAME, FIRST NAME, INITIAL	SERVICE No.	PRESENT RANK OR RATING
WOODRUFF, Lyman A.	221-341	BMle

MAJOR UNIT NAME	MINOR UNIT NAME	LOCATION
COomdr12th CG District	Mile Rock Light Sta.,	S.F.,Calif.

MAJOR UNIT ITEM No. OR VESSEL'S ASSIGNED DISTRICT	MINOR UNIT ITEM No.	DATE
12-001	12-074	6/18/47

TIME
DATE
REPORTED FROM:
FOR

DUTY CODE NO.
AUTH:

TIME 1015
DATE 6/18/47
TRANSFERRED TO: CGRO, San Francisco, Calif. for disch and reen.
FOR

AUTH: Com12CG", Ord.# 123546-47(pmp)(73-531) 6/17/47

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

DUTY CODE NO.
AUTH:

OTHER CHANGES (SPECIFY)

COPY FOR SR

DUTY CODE NO.
AUTH: A. O'D. WISE, CSC, USCG,
By direction wj
(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

WOODRUFF, Lyman Alexandre (NAME)

221-341 (SERVICE NUMBER)

MARITAL STATUS M

NUMBER OF DEPENDENTS (1)

Other creditable service—

	YRS.	MOS.	DAYS
LIGHTHOUSE	17	5	16

Birth, date of 15 January, 1901

Birth, place of Curry County, Oregon

Citizenship "NB"

UNIT	DATE	RATE	SERVICE YRS.	SERVICE MOS.	SERVICE DAYS	REMARKS
Mile Rock L/S	6/18/47	BM1c				Tr to CGRO, S.F. for dis & reenl
CGRO, S.F.	6/18/47	BM1c				RPTD
RO, SAN FRANCISCO	6/18/47	BM1c				HD(EE)
RO, SAN FRANCISCO	6/19/47	BM1c				REENL in Reg Est. for (3) yrs.
RO, SAN FRANCISCO	6/19/47	BM1c				TR to Mile Rock L/S for duty
Mile Rock L/S	6/19/47	BM1c				RPTD
Mile Rock L/S	4/2/48	BM1				CR PC 36-47
Mile Rock L/S	5/31/49	BM1				Retired fm USCG

Form 9545
TREASURY DEPARTMENT
COAST GUARD
Revised April 1938

17 yrs 5 mos 16 days Lighthouse Service for Retirement

WOODRUFF, Lyman Alexandre,.... 221-341

SINGLE
X MARRIED XX
WIDOWED
DIVORCED

Other creditable service—

	YRS.	MOS.	DAYS
LIGHTHOUSE.....	17	5	16

Verified 1st

Former Lighthouse employee,
Enlisted pursuant to the Act of
August 5, 1939.

16—11203

Birth, date of January 15, 1901,
Birth, place of Curry County, Oregon,
Citizenship N. 9-26-41

UNIT	DATE	RATE	SERVICE YRS.	SERVICE MOS.	SERVICE DAYS	REMARKS
MILE ROCKS LIGHT)						Orig.Enl.3 Yrs., Regular, Auth.:
S.F. STATION (S F D).	6-19-41	B.M.1c.				Form 2525, B, 6-12-1941. Mile Rocks Light Sta.
S.F. Sta. (12)	6-18-44	BM1C				Enl.ext.-3yrs (Mile Rock Lt Sta)
Mile Rock Lt. Sta (12)	10-23-45	BM1c				Reorg.
R.D. San Fran. (12)	6-18-47	BM1c				Tr.
R.D. San Fran. (12)	6-18-47	BM1c				HD. Art. 5849 (1) CG Regs.
R.D. San Fran. (12)	6-19-47	BM1c				Re-3 yrs. Regular
Mile Rock Lt. Sta (12)	6-19-47	BM1c				Tr.
GROUP, PRESIDO (12)	7-1-47	BM1c				Reorg. Mile Rock Light Sta.
Presidio Grp (12)	4-2-47	BM1				Cl PB 32-47

COAST GUARD RESERVE

CODE SHEET FOR ENLISTED MEN

3-18

CARD #1

Name Burnett, William F. F, 1c

Reserve District ..... Card No. 1 7-12

Service No. 528-938 Rate 218 Date of enl. 03-2
Mo. Yr.

Date of exp. of enl. 03-6 Term of Extension ..... Char. of enl. 0-1
Mo. Yr.

Prior Coast Guard Service ..... Army Service ..... Navy Service .....
Yrs. Mos. Yrs. Mos. Yrs. Mos.

Marine Corps Service ..... Total Service ..... Pay Period 0
Yrs. Mos. Yrs. Mos. Days

Next Pay Period 03-6 Pay Grade 6 Termination of Service .....
Mo. Yr.

Date of Termination .....
Mo. Yr.

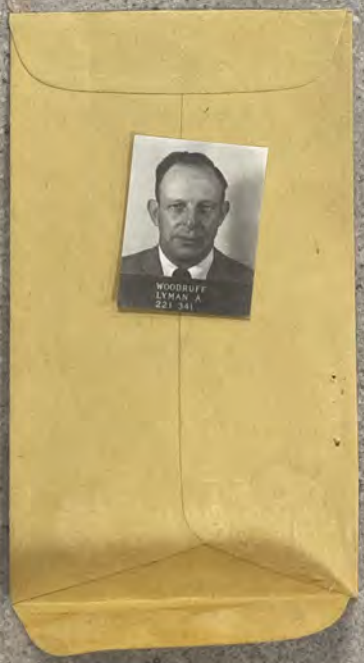
CARD #2

Place of Original Enl. 012 Nativity 021 Citizenship 0 Color 0

Marital Status 0 Education 7 Trade ..... Special Training .....

Date of Birth 01-01-19 Campaign ..... Commissioned Service .....
Mo. Day Yr.

Unit .....


WOODRUFF
LYMAN A
221 341

UNITED STATES COAST GUARD

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

AIR MAIL

4 April, 1949

FILE: PE- C 78
AUTH: 519266

From: Commandant
To: Boatswain's Mate, first class, Lyman Alexandre Woodruff (221-341), USCG
Via: (1) Commander, Twelfth Coast Guard District
(2) Commanding Officer, CG Group, Presidio, California

Subj: Retirement; travel

1. Your application for retirement has been approved by the Commandant pursuant to the provisions of Section 2 of the Act of May 24, 1939 (53 Stat. 755), and he has fixed 31 May, 1949, as the effective date of your retirement. Therefore, effective 31 May, 1949, you are detached from all duties previously assigned you. On 1 June, 1949, you will be placed on the inactive retired list of the Coast Guard.

2. Prior to actual detachment, you will be informed of your rights and benefits as a veteran and, upon detachment, issued Form NAVCG-553, Notice of Separation from the U.S. Naval Service - Coast Guard, in accordance with current directives.

3. Travel expenses incident to the execution of this order are chargeable to Headquarters' travel allotment, No. 051-20, under the authorization number indicated above.

4. Travel allowance payable upon retirement is governed by Articles 138 (6) (g) and 142, P&SI. Transportation of dependents and household effects will be governed by Articles 456 (12) and 467 (2), respectively, P&SI. Transportation of dependents and shipment of household effects to your home of selection will be provided at Government expense only if accomplished within one year from the date of your detachment. Once you notify the Commandant of your arrival at your permanent home, action is final and no further designation may be made.

5. The officer having custody of your pay record is hereby directed to forward it unclosed to the Commandant (FA-P) immediately after your detachment. If final credit entries, such as leave rations, unused leave to be settled for on retirement, etc., have not been posted, a Commanding Officer's Pay Record Order, Form NAVCG-510, covering such credits, will be obtained and forwarded. Upon detachment, you will immediately notify the Commandant (FA-P) of your mailing address and you will thereafter notify the Commandant (FA-P) of any change in that address. Your service and health records will be completed and mailed to the Commandant (PE-PR) on the effective date of your retirement.

6. Your commanding officer will indorse this order to indicate place, time, and date of delivery and time and date of your detachment and departure. You will indorse this order to show place, time, and date of receipt, place selected by you as your permanent home after retirement, and the time and date of arrival at your permanent home.

W. C. CAPRON
By direction

B 3105
Incls (2)
CORRES:me Ret 3-13

-WOODRUFF-

TERMINATION OF SERVICE
UNITED STATES COAST GUARD
NAVCG 2500-C (Supplement) (11-47)

Name	Service No.	Rating
WOODRUFF, Lyman A.	(221-341)	BM1
Unit	**Location**	**Date reported**
MILE ROCK LIGHTSTATION	San Francisco, Calif.	19 June, 1947
FINAL AVERAGE EFFICIENCY MARKS	Proficiency 3.8	Conduct 4.0

Deductible time while attached [X] None [ ] Entered in absence from duty article of record.

Disposition of idontification Credentials [X] [ ] Not Surrendered (Explanation below)

STATEMENTS OF DISCHARGE

Explanation of non-surrender of identification credentials

Date 5/31/49

Reason Retired

Authority H/L 4/4/49 PE-C 73; Auth: 519266

Place to which travel allowance is elected ~~made~~ To be at a later date. ***

MUSTERING OUT PAY

[ ] Entitled [X] Not Entitled

Receipt of the following is acknowledged

[ ] Honorable Discharge Button

[ ] Honorable Service Button ***

[ ] Honorable Service Emblems ***

[ ] Satisfactory Service Card No.

[X] Information relative to rights benefits as a veteran

Amt Paid | Voucher No. | Check No.

TRAVEL ALLOWANCE AND PAY

Paid TA from | To

Total TA | Total TA & pay (in full to date of discharge $537.59

Check No. | Name of pay officer G. E. BOHANNON, CPCLK, USCG.

CREDITABLE SERVICE THIS ENLISTMENT

Years	Months	Days
25	4	27

Address subsequent to discharge

2190 Grove Street, San Francisco, Calif. **

REENLISTMENT RECOMMENDATION

[ ] Recommended [ ] Not Recommended

Signature of dischargee

Lyman A. Woodruff

LYMAN A. WOODRUFF

Certified to be correct upon termination of service

A. O'D. WISE
By direction

COMMANDING OFFICER

Remarks

** Not applicable

*** Previously issued.

REPORT OF CHANGE IN PERSONN

TREASURY DEPARTMENT
United States Coast Guard
CG-2599 (REV. 3-48)

No. 114

SURNAME, FIRST NAME, INITIAL	SERVICE OR SIGNAL NO.	PRESENT RANK OR RATING
WOODRUFF, Lyman A.	(221-341)	BM1

MAJOR UNIT NAME	MINOR UNIT NAME	LOCATION
~~Office, Comdr, 12th CG District~~	MILE ROCK LS	S.F., CALIF
MAJOR UNIT ITEM NO. OR VESSEL'S ASSIGNED DISTRICT	**MINOR UNIT ITEM NO.**	**DATE**
12-001	(12-059)	5/31/49

TIME
DATE — REPORTED FROM:
FOR

AUTH:

TIME
DATE — TRANSFERRED TO:
FOR

AUTH:

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

AUTH:

OTHER CHANGES (SPECIFY) 1330 31 May, 1949 - Retired.

Total creditable service: 25 yrs, 4 mos, 7 days.
ADDRESS SUBSEQUENT TO RETIREMENT: 2190 Grove St., San Francisco, Calif.

H/L 4/4/49 PE-C 73; Auth: 519266 EXTRA COMPENSATION

FAMILY ALLOWANCES		MAQ/D	S & Q	FLIGHT PAY	SEA DUTY	ARMS QUAL.	AWARDS MEDALS	
CLASS A NO. DEP.	CLASS B NO. DEP.							

A. O'D. WISE, CSCLK, USCG
By direction
(Disbursing.)

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

NCG 2500
(Rev. June, 1942)

ENLISTMENT CONTRACT (REGULAR ESTABLISHMENT)

Auth: Art. 553 CG Regs

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

RE-ENLISTMENT OF WOODRUFF, Lyman Alexandre (Full name, surname to left); (221-341) (Service number); $135.00 (BP) (Pay per month)

Accepted for enlistment at San Francisco, California; BM1c (Rating in which enlisted)

Re-Enlisted at CG Recruiting Station; 19 June, 1947 (Date of enlistment)

Transferred to Mile Rock Light Station, San Francisco, California for resdu

Occupation U. S. Coast Guard Citizenship * "NB" If naturalized, place

and date of naturalization - - - Certificate No. - -

Date of birth 15 January, 1901 Place of birth Curry County, Oregon

Home address 2190 Grove Street, San Francisco, California (Street and number) (Town) (County) (State)

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

Woodruff, Wife, 2190 Grove Street, San Francisco, California (Relationship) (Address)

Continuous Service Certificate - - - - (Number) Previous service { Coast Guard / ~~Reserve~~ } 6 (Years) 0 (Months) 0 (Days)

First enlisted 19 June, 1941 (Date) at Mile Rock LS, San Francisco, California (Place) and was

last discharged 18 June, 1947 (Date) from CG Recruiting Station, San Francisco, Calif. (Unit)

with Honorable (Character) discharge as BM1c (Rate) No. B133853

Previous Navy service - (Years) - (Months) - (Days) Previous Marine Corps service - (Years) - (Months) - (Days)

Previous Light House Service: 17 Yrs. 0 mos. 0 dys.

Previous Army service 0 (Years) 0 (Months) 0 (Days) Age 46 years 5 months.

Height 5 feet 8 inches. Weight 163 pounds.

Eyes Grey Sex Male Hair Lt. Brown Complexion Ruddy Color White

Personal characteristics marks, etc. Tattoos: Full rigged ship, anchor, heart with dagger; left forearm: Shield with furled flag and eagle; right forearm: VSULA

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 Bos'n.Norman T. Sode 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 { Three (3) years from 19 June, 1947 / 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

NCG 2500-C
(Rev. June 1942)

SERVICE RECORD

RECORD OF WOODRUFF, Lyman Alexandre (221-341)
(Full name, surname to the left) (Service number)

1. TRANSFERS

Departed from—			Reported to—		
Unit	Date	Signature	Unit	Date	Signature
CGRO, SanFran, Calif.	6/19/47	Bos'n.	Mile Rock L/S	6/19/47	CSC, USCG, ByD.

2. CHANGES IN RATING

Unit	Rated or disrated to—	Date	Signature
Mile Rock LS	BM⅓ to BM1. Pc 36-47	APR 2 1948	CHIEF SHIP'S CLERK, USCG BY DIRECTION

3. DETAILS—RESERVE ACTIVE DUTY

Ship or station	Date From—	Date To—	Duty	Signature

4. SWIMMING QUALIFICATIONS

Unit	Date of qualification	Signature

16—9676-2

RECORD OF WOODRUFF, Lyman Alexandre (221-341)
(Full name, surname to the left) (Service number)

5. SPECIAL QUALIFICATIONS

Ship	Date	Proficient in—	Signature

6. EFFICIENCY MARKS

Date	Rate	Proficiency in rating	Seamanship	Mechanical ability	Ability as leader of men	Conduct	Signature
6/19/47	BM1c	LESS THAN ONE MONTH				4.0	Bos'n.
6-30-47	BM1c.	LESS THAN ONE MONTH.				4.0	MILE ROCK A.O'D.WISE, CSC, USCG
9-30-47	BM1c	3.8	3.6	3.6	3.5	4.0	Mile Rock Lt.Sta. By dir.
12/31/47	BM1c	3.9	3.7	3.6	3.6	4.0	
MAR 31 1948	BM1c	3.9	3.7	3.6	3.6	4.0	
JUN 30 1948	BM1	3.9	3.7	3.6	3.6	4.0	
SEP 30 1948	BM1	3.7	3.7	3.6	3.6	4.0	
THE ABOVE PIR CHANGE TO BRING DISTRICT MARKS IN LINE WITH REGS							
DEC 31 1948	BM1	3.7	3.7	3.6	3.6	4.0	
3/31/49	BM1	3.7	3.4	3.6	3.5	4.0	MILE ROCK LS
5/31/49	BM1	3.7	3.4	3.6	3.5	4.0	MILE ROCK LS
AVERAGE	x x x x	3.8				4.0	MILE ROCK LS

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
Mile Rocks L/S	10-29-47	Issued ADSM and WW II VM. A.O'D.WISE,CSC,USCG,Bydir.

16—9676-2

RECORD OF (WOODRUFF, Lyman A. (221-341) BM1c)
(Full name, last name first(Service No.)

L E A V E R E C O R D

ACCRUED CREDITS			LE VE TAKEN					BAL DUE	CO's Signature And Unit
REASON	DATE	NO DYS	FROM	TO	REASON	NO DYS	ADV LV	NO DYS	
I C	9/1/46	60							CSC,USCG,ByDir.
ANCR	6-30-47	25							CHIEF SHIP'S CLERK, USCG
BBF	7-1-47	60						60	A. O'D. WISE CHIEF SHIP'S CLERK, USCG
			7-25-47	8-25-47	Lv	30		30	A.O'D.WISE,CSC,USCG,By dir
ANCR	6-30-48	30						60	Chief Ship's Clerk, USCG
BBF	7-1-48	60						60	By direction
			7-24-48	8-22-48	REG	30		30	Chief Ship's Clerk, USCG
			9-11-48	9-16-48	Reg	6		24	By direction
RET	5/31/49	~~23~~ 28	- - - - - - - - - - - - - - - - - - - -					~~47~~ 52	CHIEF SHIP'S CLERK, USCG BY DIRECTION

MILE ROCK LS

O,Comdr. 12th CG District - 31 May, 1949.
Paid pay and allowances in the amount of $429.00 for 52 days leave due on retirement this date. Settled in the May 1949 accounts of Paul D. Banning, CDO, symbol 1381.

G. E. BOHANNON, CPCLK, USCG. AUTHORIZED CERTIFYING OFFICER.

PERIODS FOR WHICH LEAVE DOES NOT ACCRUE

FROM	TO	REASON	NO. DAYS	CO's SIGNATURE AND UNIT

RECORD OF WOODRUFF, Lyman Alexandre (221-341)
(Full name, surname to the left) (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
CGRO,SanFran, Calif.				NO DEDUCTIBLE TIME WHILE ATTACHED THIS UNIT	N Woodruff Bos'n.

10. TRIALS BY COURTS MARTIAL

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

16—9676-2

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
WOODRUFF, Lyman A.	221-341	Wlc

MAJOR UNIT NAME	MINOR UNIT NAME	LOCATION
Office, Comdr. 12th CG District	Mile Rock Light Station	S. F. CALIF.

MAJOR UNIT ITEM No. OR VESSEL'S ASSIGNED DISTRICT	MINOR UNIT ITEM No.	DATE
12-001	12-057	2 April, 1948

TIME
DATE
REPORTED FROM:
FOR

DUTY CODE NO.
AUTH:

TIME
DATE
TRANSFERRED TO:
FOR

AUTH:

CHANGED IN {RANK / RATING} FROM Wlc TO BM1 EFFECTIVE 2 April, 1948

DUTY CODE NO.
AUTH: PERSONNEL CIRCULAR NO. 36-47

OTHER CHANGES (SPECIFY)

DUTY CODE NO.
AUTH: A. O'D. WISE, Chief Ship's Clerk, 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

Machine Accounting
Punched_____
Verified_____

☆ U. S. GOVERNMENT PRINTING OFFICE 16—40355-2

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

WOODRUFF, (Surname) Lyman (First name) A. (Middle initial) 221-341 (Service No.) BMlc (Rank or rating)

Mile Rock Light Station (Unit) San Francisco, California (Place) 24 October, 1947 (Date)

From: COMMANDING OFFICER.
To: PAY OFFICER.

You are hereby authorized to adjust the pay accounts of the above named for the following reason:

Completed a three year period of net service and will be credited with increased pay on the following statement of service:

Completed 3 years - - - - - - - - - - - - - - - 6-18-44
AWL - Sick, Misc. - NPDI - - - - - - - - - - None
Enlistment Estended - - - - - - - - - - - - - -6-19-44
AWL - Sick, Misc. - NPDI - - - - - - - - - - None
Completed 6 years - - - - - - - - - - - - - - - 6-18-47

NOW SERVING

AUTHORITY:

Art 111(1) P&SI

A. O'D. WISE, (Commanding)

Chief Ship's Clerk, USCG (Title)
By direction

CC: HQ

---

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 1942 — O - 426485

REPORT OF CHANGE IN PERSONN
UNITED STATES COAST GUARD
NAVCG-2599 (REV. 6-45)

No. 93

SURNAME, FIRST NAME, INITIAL	SERVICE No.	PRESENT RANK OR RATING
WOODRUFF, Lyman A.	221-341	BMlc
MAJOR UNIT NAME	**MINOR UNIT NAME**	**LOCATION**
COomdr12th CG District	Mile Rock L/S	S.F.,Calif.
MAJOR UNIT ITEM No. OR VESSEL'S ASSIGNED DISTRICT	**MINOR UNIT ITEM No.**	**DATE**
12-001	12-074	6/23/47

TIME 1330
DATE 6/19/47

REPORTED FROM: CG Cruit Sta.,S.F.,Calif.
FOR asdu.

DUTY CODE NO. 29-D AUTH: Com12CGd, Ord.#.123546-47(pmp)(73-531) 6/17/47.

TIME
DATE

TRANSFERRED TO:
FOR

AUTH:

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

DUTY CODE NO. AUTH:

OTHER CHANGES (SPECIFY)

COPY FOR SR

DUTY CODE NO. AUTH: A. O'D. WISE, CSC,USCG,
~~By direction~~
wj (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

N. C. G.-2529
(Rev. 9-2-41)

UNITED STATES COAST GUARD

DESIGNATION OF BENEFICIARIES FOR DEATH GRATUITY

Mile Rock Light Station (Unit) — San Francisco, California (Place)

1 January, 1948 (Date)

FROM: WOODRUFF, Lyman A. (221-341) MMlc

To: COMMANDANT (via Commander, 12th CG 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:

Muriel Louise Woodruff (Full name of wife; if not married, so state)	2190 Grove Street, San Francisco, California. (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:

Catherine Buck (Full name of relative)	SISTER (Relationship)	5854 Colby Street, Oakland, California. (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:

NONE (Full name of relative)	(Relationship)	(Address of relative)

(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 JANUARY, 1948

A. O'D. WISE, ChShipsClk, USCG
(Signature)

(Rank or title)

Lyman A. Woodruff
Lyman A. Woodruff
(Signature)

MMlc
(Rank or rating)

U. S. GOVERNMENT PRINTING OFFICE 16—25758-1

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

UNITED STATES COAST GUARD

STATEMENT OF CREDITABLE SERVICE

(For Enlistment Allowance)

CG Recruiting Station, San Francisco, California
(Unit)

WOODRUFF, Lyman Alexandre
(Name in full—surname to the left)

18 June, 1947
(Date)

(221-341)
(Service number)

Boatswain Mate First Class
(Rating on discharge)

	Year	Month	Day
Date of last enlistment (for 3 years)	1941	6	19
Enlistment extended (for 3 years from)	1944	6	19
Date of discharge (Honorable) (Character of discharge)	1947	6	18

NUMBER OF—	Years	Months	Days
Total time of last enlistment period	6	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	

Ind-1
OComdr12CGD(fpd)
CG-73-52
19 June, 1947

Paid enlistment allowance in amount $150.00.

J.A.B. HAY, JR, Lt.(jg), USCG
ADO, SYM NO 18-487

Total Absence (0 days)	0	0	0
Creditable time served during last enlistment period	6	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.

NORMAN T. SODE,

Date 19 June, 19 47

(Rank) Bos'n, U. S. C. G.
Officer-in-Charge

REENLISTMENT OR EXTENSION OF ENLISTMENT

Date 19 June, 19 47

CG Recruiting Station, San Francisco, Calif.
(Unit and place)

I CERTIFY that the above-named man REENLISTED for
(Reenlisted or voluntarily extended his enlistment)

a period of Three (3) years from this date.

NORMAN T. SODE,

(Rank) Bos'n, U. S. C. G.
Officer-in-Charge

16—20908-1

(13) TOP ROW: MAIN OCCUPATION - D. O. T. CODE
(14) BOTTOM ROW: SECONDARY OCCUPATION - D. O. T. CODE

(1)- NAME (PRINT CLEARLY): Woodruff (LAST) Lyman (FIRST) Alexandre (MIDDLE) | 221-341 SERVICE NUMBER | FT. 5 IN. 8 HEIGHT | LBS. 159 WEIGHT | W RACE

(2) HOME ADDRESS: 2190 Grove ST. San Francisco, Calif.

(3) BIRTHPLACE: Gold Beach Oregon (GIVE CITY AND STATE OF U. S. OR NAME OF FOREIGN COUNTRY)

(4)- DATE OF BIRTH: 15 JAN. 1901 HOW LONG IN U. S. YEARS

(5) CITIZEN [X] NON-CITIZEN [ ] TAKEN OUT FIRST PAPERS [ ]

(6)- MARITAL STATUS: Married (7)- NUMBER OF DEPENDENTS: 1

(8) EDUCATION NON-E. [ ] ILLITERATE [ ]

SCHOOL	Number of Years	GRADUATED YES	GRADUATED NO	NAME AND LOCATIONS OF INSTITUTIONS ATTENDED	MAJOR SUBJECT OR SPECIALIZATION	DEGREE AND DATE RECEIVED
GRAMMAR SCHOOL	8	X		Gold Beach, Oregon		
HIGH SCHOOL						
COLLEGE OR UNIVERSITY						
POST GRADUATE						
TRADE, NIGHT OR BUSINESS SCHOOL						
(9)- TOTAL SCHOOL YEARS	8	X X X X X X X X X X X X				

(10)- LANGUAGES (CHECK APPROPRIATE SPACES) S—SPEAKS R—READS W—WRITES

PUNCH ONLY FOR S	SPANISH (L-23) S R W	FRENCH (L-24) S R W	GERMAN (L-25) S R W	OTHER LANGUAGES (L-26) S R W	S R W
FAIRLY WELL		none			
FLUENTLY (L-27)					

(11) DISTRICT OF CURRENT ENLISTMENT OR INDUCTION: 12 Dn. DATE 19 June '44

(12)- BRANCH OF SERVICE: REGULAR X | RESERVE G S T W

(13)- MAIN OCCUPATION: ~~USC~~ Light Keeper | YEARS AT IT: 17 | WKLY. WAGE $
D. O. T. CODE: 5-61.310
JUST WHAT DID YOU DO?

LAST DATE OF EMPLOYMENT
EMPLOYER: US Light House Service (FIRM NAME)
ADDRESS OF EMPLOYER
DEPT., SHOP OR BRANCH | KIND OF BUSINESS

(14)- SECOND BEST OCCUPATION: USCG BM1/c | YEARS AT IT: 6 | WKLY. WAGE $
D. O. T. CODE: 2-68.40
JUST WHAT DID YOU DO?

TEST	SOCIAL STUDIES	ARITHMETIC	MECHANICAL APTITUDE				
GRADE —SCORE	(15)-	(16)-	(17)-				

(18)- SERVICE SCHOOLS QUALIFIED FOR
1.
2.
3.

(19)- SERVICE SCHOOLS DESIRED
1. none
2.
3.

(24) RATING
(4) (9) TOP ROW: YEAR OF BIRTH BOTTOM ROW: NUMBER OF SCHOOL YEARS
NON-ENGLISH SPEAKING 3
ILLITERATE 2

NOTE: DO NOT ATTEMPT TO FILL OUT THIS CARD WITHOUT FIRST READING INSTRUCTIONS VERY CAREFULLY.

U. S. COAST GUARD
ENLISTED PERSONNEL QUALIFICATION CARD

(20) PREVIOUS MILITARY EXPERIENCE

BRANCH OF SERVICE	YEARS IN EACH	HIGHEST GRADE	LAST DISCHARGE (YEAR)	SPECIAL TRAINING RECEIVED: SPECIFIC NATURE	YEARS	MO'S	LAST DATE (YEAR)
		none					

(21) C. G. SERVICE SCHOOLS ATTENDED

	NUMBER OF WEEKS	COURSE	DATE GRADUATED AND SCHOOL RATING
1. none			
2.			
3.			
4.			

(22) REMARKS: Special Qualifications: none

Exp. in Rate: O. in C. of Mile Rk Light Station for past 20 yrs.

Comments: Requested retirement

(23) NEXT OF KIN Wife

NAME Muriel L. Woodruff
ADDRESS 3190 Grove St.
CITY San Francisco STATE Calif.

(24)-® RECORD OF CURRENT SERVICE

DATE	UNIT	RATING	PRINCIPAL DUTY
19 June 44	12 Th Mile Rk L.S.	BM 1/c	A. To N.

(25)
DATE OF INTERVIEW 5 March '47 UNIT 12 Th CG Dist. Off.
SIGNATURES
INTERVIEWER C. J. Jones Ed. 471
ENLISTED PERSON Symbol A. Woodruff

N.C.G. FORM NO. 2719
JANUARY 1943

IMPORTANT — UNDER NO CIRCUMSTANCES WILL THIS CARD BE FOLDED, ROLLED OR CREASED.

MCGEE KEYSORT U.S. PAT. NO. 2,213,607 13554

REPORT OF CHANGE IN PERSONNEL

UNITED STATES COAST GUARD

NAVCG-2599 (REV. 6-45)

No. 12

SURNAME, FIRST NAME, INITIAL	SERVICE No.	PRESENT RANK OR RATING
WOODRUFF, Lyman A.	(221-341)	EM1c
MAJOR UNIT NAME	**MINOR UNIT NAME**	**LOCATION**
CG Recruiting Station,		San Francisco, Calif.
MAJOR UNIT ITEM No. OR VESSEL'S ASSIGNED DISTRICT	**MINOR UNIT ITEM No.**	**DATE**
12-009		18 June, 1947

TIME 1330
DATE 6-18-47

REPORTED FROM: Mile Rock LS, San Francisco, Calif.
FOR discharge and reenlistment

DUTY CODE NO. 39D

AUTH: CCGD12(p) Order No. 123546-47 (6-17-47)(CG-73-531)

TIME
DATE

TRANSFERRED TO:
FOR

AUTH:

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

DUTY CODE NO.

AUTH:

OTHER CHANGES (SPECIFY)

18 June, 1947: Hd on accnt of exp of enl and ext thereof.

PAFE: San Francisco, California

DUTY CODE NO. 39D

AUTH: 589(1) CG Regs

NORMAN T. SODE, Bos'n., USCG
(Commanding)
Officer-in-Charge

CC: CCGD12(p)
SR
File

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. 13

SURNAME, FIRST NAME, INITIAL	SERVICE No.	PRESENT RANK OR RATING
WOODRUFF, Lyman A.	(221-341)	EM1c
MAJOR UNIT NAME	**MINOR UNIT NAME**	**LOCATION**
CG Recruiting Station		San Francisco, Calif.
MAJOR UNIT ITEM No. OR VESSEL'S ASSIGNED DISTRICT	**MINOR UNIT ITEM No.**	**DATE**
12-009		19 June, 1947

TIME
DATE
REPORTED FROM:
FOR

DUTY CODE NO.
AUTH:

TIME 1300
DATE 6/19/47
TRANSFERRED TO: Mile Rock Light Station, San Francisco, Calif.
FOR resdu

AUTH: CCGD12(p) Order No. 123546 (6-17-47)(CG-73-531)

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

DUTY CODE NO.
AUTH:

OTHER CHANGES (SPECIFY)

19 June, 1947: Re in REG ESTAB for 3 yrs. as EM1c

PAFE: San Francisco, California

DUTY CODE NO. 39D
AUTH: Art. 553 CG Regs

NORMAN T. SODE, Bos'n., USCG
Officer-in-Charge (Commanding)

CC: CCGD12(p)
SR
File

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

CG–2838 (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

WOODRUFF, Lyman A.	BMlc	221-341
(Name—Surname to left)	(Rank or rating 31 Aug. 1946)	(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 120 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)	Muriel Louise Woodruff	Wife
	(Name of dependent)	(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.

Lyman A. Woodruff
(Signature of claimant) (DO NOT PRINT OR TYPE)

Subscribed and sworn to (or affirmed) before me at San Francisco, California
this 17th day of JUNE, 1947

(SEAL)

A. O'D. WISE, Chief Ship's Clerk, USCG
(Signature of Notary Public or other officer authorized to administer oaths for general purposes)

COPY FOR

(OVER)

16—49451-1

UNITED STATES COAST GUARD
Washington 25, D. C.

Address Reply To
THE COMMANDANT (INT)
Refer To File: CG-71-72

FILE
B.A.S.

14 June, 1949

From: Commandant
To: BM1 Lyman A. Woodruff, USCG, Retired, 2190 Grove Street, San Francisco, California
Subj: Retired identification card; completion of

1. There is inclosed herewith retired identification card No. 7116 that will be issued to you.

2. Place your signature and right index (or other) fingerprint in the spaces provided on the back of the card. Put no other data on card itself.

3. Fill in the following blanks on this sheet only, not on card:
Color of Hair Blond — Color of Eyes Blue
Height 5' 8" — Weight 57 lb.
Date of Birth 15 January, 1901
Permanent address 2190 Grove St. San Francisco, Calif.
Fill in

4. Sign Ind-1 below and return the card and this letter to the Commandant (INT) in the inclosed envelope for validating and completion.

BE SURE TO PLACE FINGERPRINT AND SIGNATURE ON BACK OF CARD

B. A. Shaw
B. A. SHAW
By direction

Incls
1. Ident. card
2. Franked envelope

Ind-1

From: WOODRUFF, Lyman A. BM1, USCG, Retired
To: Commandant (INT)

Card returned for validating and completion.

Lyman A. Woodruff
Lyman A. Woodruff
Signature

Ind-2
Commandant (INT)

30 JUN 1949

From: Commandant
To: BM1 Lyman A. Woodruff, USCG, Retired.

Please acknowledge receipt of the completed identification card No. 7116 by signing Ind-3 and return to the Commandant (INT).

B. A. Shaw
B. A. SHAW,
By direction

Incls
1. Ident. card
2. Franked envelope

Ind-3

5 July, 1949

Sign here and return this sheet to Headquarters.

From: WOODRUFF, Lyman A. BM1, USCG, Retired.
To: Commandant (INT)

Receipt is acknowledged.

Lyman A. Woodruff
Lyman A. Woodruff
Signature

A-6051

N. C. G. No. 2668
Form approved by Comptroller General, U. S.
April 13, 1934
(Revised 1937)

COMD'T (PE-PR)

3-13

S. V. No. .....
PAY No. .....

File

REPORT OF CHANGE IN PAY STATUS

Retired 6-1-49

WOODRUFF,	Lyman	A.	221-341	PHM
(Surname)	(First name)	(Middle initial)	(Service No.)	(Rank or rating)

Mile Rock Light Station	San Francisco, Calif.	7 April, 1949
(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:

Completed a twenty-four (24) year period of net service for pay purposes and will be credited with an increase in pay on the following statement of service

Lighthouse Service . . . . . 17 years, 5 mos, 16 days

Enlisted in USCG 6/19/41
AWL, SKMC, NPDI. . . . . None
HD(EE AID EXT) 6/18/47
REENL 6/19/47
Completed (24) years to and including 1//3/48
NOW SERVING

AUTHORITY: Art. 111, P&SI

CERTIFIED TO BE A TRUE COPY

Chief Ship's Clerk, USCG

A. O'D WISE (Commanding)

CSCIK (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 1942—O-426485

From compensation of

APPLICATION FOR ALLOTMENT

3-13 File

WOODRUFF, Lyman A. (221-341) EM1

Monthly allotment in the amount of

Three dollars and 42/100 - - - ($ 3.42) Dollars.
(Words) (Figures)

PAYABLE TO

WoodRuff

Name Treasurer of the United States

Street and No.

Post office Washington, *State* D. C.

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

Name WOODRUFF, Lyman A.

Reason for allotment Renewal of 5 year level plan policy (NSLI) FN-534 580

First payment: Month JUNE, 19 49

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

Rank or rating EM1, U. S. C. G.

2 MAY, 19 49

Approved, allotment granted.

A. O'D. WISE, CSCLK, USCG

Commanding By dir.

Commander, 12th CG *District.*

Witnessed and registered 5/5, 1949

G. E. BOHANNON, CPCLK, USCG.

Pay officer, 12TH CG DISTRICT

16—12642—1

N. A. V. C. G. - 2528
(Revised January 1942)
Form approved by Comptroller General, U. S.
(April 14, 1934)

© DO NOT FOLD — MAIL FLAT

RECORD OF PAYMENTS

Mo./Yr.	19	19	19	19	19
Jan.				RENEWAL	
Feb.					
Mar.					
Apr.					
May					
June					
July					
Aug.					
Sept.					
Oct.					
Nov.					
Dec.					

* Allotter or member immediate family

26 MAY 1949

REPORT OF CHANGE IN PERSONNEL

TREASURY DEPARTMENT
United States Coast Guard
CG-2599 (REV. 3-48)

No. 114

SURNAME, FIRST NAME, INITIAL	SERVICE OR SIGNAL NO.	PRESENT RANK OR RATING
WOODRUFF, Lyman A.	(221-341)	BM1

MAJOR UNIT NAME	MINOR UNIT NAME	LOCATION
Office, Comdr, 12th CG District	MILE ROCK LS	S.F., CALIF
MAJOR UNIT ITEM NO. OR VESSEL'S ASSIGNED DISTRICT	**MINOR UNIT ITEM NO.**	**DATE**
12-001	(12-059)	5/31/49

TIME
DATE — REPORTED FROM:
FOR

AUTH:

TIME
DATE — TRANSFERRED TO:
FOR

AUTH:

CHANGED IN (RANK / RATING) FROM _____ TO _____ EFFECTIVE _____

AUTH:

OTHER CHANGES (SPECIFY) 1330 31 May, 1949 - Retired.

Total creditable service: 25 yrs, 4 mos, 7 days.
ADDRESS SUBSEQUENT TO RETIREMENT: 2190 Grove St., San Francisco, Calif.

H/L 4/4/49 PE-C 73; Auth: 519266 EXTRA COMPENSATION

FAMILY ALLOWANCES		MAQ/D	S & Q	FLIGHT PAY	SEA DUTY	ARMS QUAL.	AWARDS MEDALS	
CLASS A NO. DEP.	CLASS B NO. DEP.							

A. O'D. WISE, CSCLK, USCG
By direction
(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

CORRECTION TO NOTICE OF SEPARATION FROM THE U. S. NAVAL SERVICE -- COAST GUARD
Treasury Department
United States Coast Guard
CG-553A (3-46)

1. Serial or file No. 2. Name (Last, First, Middle) 3. Rate & Class/or Rank and classification 4. Permanent address for mailing purposes

1. 221-341
2. WOODRUFF, Lyman Alexandre
3. Boatswain's Mate, first class
4. 2193 Grove St., San Francisco, Calif.

Date 31 May, 1949
U.S. Coast Guard
Place of Separation
San Francisco, California
Date of Separation
31 May, 1949
Date of Birth
15 January, 1901

CORRECTIONS

The following items of information on NAVCG-553, "Notice of Separation from the U. S. Naval Service - Coast Guard," for the above named person are hereby corrected as follows:

Item No. & Subj:-	Corrected to Read:-
6. Character of separation:	Retired.
18. Net service for pay purposes:	25 years, 4 months, 27 days

By direction of the Commandant

C-4846

A. C'D. WISE
By direction

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

UNITED STATES COAST GUARD

STATEMENT OF CREDITABLE SERVICE

(For Enlistment Allowance)

MILE ROCK LIGHT STATION, San Francisco, Calif.
(Unit)

WOODRUFF, Lyman Alexandre
(Name in full—surname to the left)

31 May, 1949
(Date)

(221-341)
(Service number)

Boatswain's Mate, first class
(Rating on discharge)

	Year	Month	Day
Date of last enlistment (for 3 years)	1947	June	19
Enlistment extended (for ____ years from)			
Date of discharge (Honorable) (Character of discharge)			
Total time of last enlistment period			

NUMBER OF—		
Years	Months	Days
1	11	11

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		

CERTIFIED TO BE A TRUE COPY
Chief Ship's Clerk USCG

Total Absence (____ days)

Creditable time served during last enlistment period	1	11	11

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.

A. O'D. WISE

Date 31 May, 1949

(Rank) CSCLK, U. S. C. G.
Commanding officer.

REENLISTMENT OR EXTENSION OF ENLISTMENT

Date ____, 19____

____
(Unit and place)

I CERTIFY that the above-named man ____ for
(Reenlisted or voluntarily extended his enlistment)

a period of ____ years from this date.

____

(Rank) ____, U. S. C. G.
Commanding officer.

16—20908-1

REPORT OF CHANGE IN PERSONNEL

TREASURY DEPARTMENT
United States Coast Guard
CG-2599 (REV. 3-48)

No. 114

SURNAME, FIRST NAME, INITIAL	SERVICE OR SIGNAL NO.	PRESENT RANK OR RATING
WOODRUFF, Lyman A.	(221-341)	BM1

MAJOR UNIT NAME	MINOR UNIT NAME	LOCATION
Office, Comdr. 12th CG District	MILE ROCK LS	S.F., CALIF

MAJOR UNIT ITEM NO. OR VESSEL'S ASSIGNED DISTRICT	MINOR UNIT ITEM NO.	DATE
12-001	(12-059)	5/31/49

TIME
DATE — REPORTED FROM:
FOR

AUTH:

TIME
DATE — TRANSFERRED TO:
FOR

AUTH:



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

AUTH:

OTHER CHANGES (SPECIFY) 1330 31 May, 1949 - Retired.

Total creditable service: 25 yrs, 4 mos, 7 days.
ADDRESS SUBSEQUENT TO RETIREMENT: 2190 Grove St., San Francisco, Calif.

H/L 4/4/49 PE-C 73; Auth: 519266 EXTRA COMPENSATION

FAMILY ALLOWANCES		MAQ/D	S & Q	FLIGHT PAY	SEA DUTY	ARMS QUAL.	AWARDS MEDALS	
CLASS A NO. DEP.	CLASS B NO. DEP.							

A. O'D. WISE, CSCLK, USCG
By direction
(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

REPORT OF CHANGE IN PERSONNEL

TREASURY DEPARTMENT
United States Coast Guard
CG-2599 (REV. 3-48)

No. 114

SURNAME, FIRST NAME, INITIAL	SERVICE OR SIGNAL NO.	PRESENT RANK OR RATING
WOODRUFF, Lyman A.	(221-341)	BM1

MAJOR UNIT NAME	MINOR UNIT NAME	LOCATION
Office, Comdr, 12th CG District	MILE ROCK LS	S.F., CALIF
MAJOR UNIT ITEM NO. OR VESSEL'S ASSIGNED DISTRICT	**MINOR UNIT ITEM NO.**	**DATE**
12-001	(12-059)	5/31/49

TIME
DATE — REPORTED FROM:
FOR

AUTH:

TIME
DATE — TRANSFERRED TO:
FOR

AUTH:



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

AUTH:

OTHER CHANGES (SPECIFY) 1330 31 May, 1949 - Retired.

Total creditable service: 25 yrs, 4 mos, 7 days.
ADDRESS SUBSEQUENT TO RETIREMENT: 2190 Grove St., San Francisco, Calif.

H/L 4/4/49 PE-C 73; Auth: 519266 EXTRA COMPENSATION

FAMILY ALLOWANCES		MAQ/D	S & Q	FLIGHT PAY	SEA DUTY	ARMS QUAL.	AWARDS MEDALS	
CLASS A NO. DEP.	CLASS B NO. DEP.							

A. O'D. WISE, CSCLK, USCG
By direction
(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

DEPARTMENT OF TRANSPORTATION
U. S. COAST GUARD
CGHQ-9964 (Rev. 10-67)

REPORT OF DEATH OTHER THAN THOSE CARRIED AS MISSING

TO: Chief, Payment and Claims Division

DATE: 16 January 19

NAME	SERVICE NUMBER	GRADE OR RATING
WOODRUFF, Lyman A.	221 341	BM1, Retired

DATE OF RECEIPT OF EVIDENCE OF DEATH	ESTABLISHED DATE OF DEATH
15 January 1973	10 January 1973

Information concerning death of the above-listed person has been received reporting established date of death has been set

PAY GRADE	YEARS OF SERVICE	RSFPP OPTION ELECTION	DEDUCTION

ANNUITY AMOUNT	ANNUITY BENEFICIARY (Name)	FINAL PAY DUE (Dat

ALLOTMENTS:

HAVE BENEFICIARY FORM

AARON O. MARTIN

SIGNATURE

Chief, Decedent Affairs & Claims Bra