

USE  
LETTERS



1-1334JAS

NV08171002

MAGRUDER HOWELL  
JOSHUA

001412566

RG 024

JONUS

## NAVAL RESERVE

141 25 00

CLASS 4

MAGRUDER

HOWELL JOSHUA

C. S. Certificate No.

USE LETTERS	DATE	RATE	U.S. VESSEL	STATION
			U.S. Rec't & Sta	
Ans	8-1-18	Asst	Cincinnati	Ohio
			9-1-18	West Point
Ans	8-17-18	Asst	U.S. Steamer	Ill.
Ans	8-26-18	First Lt.	U.S. Steamer	Ill.
Ans	9-11-18	First Lt.	U.S. Steamer	Ill.
Ans	9-14-18	First Lt.	U.S. Steamer	Ill.
Ans	11-38-18	First Lt.	U.S. Steamer	Ill.
Ans	12-1-18	First Lt.	U.S. Steamer	Ill.
Ans	12-14-18	First Lt.	U.S. Steamer	Ill.
Ans	3-24-19	First Lt.	U.S. Steamer	Ill.
Ans	9-25-19	First Lt.	U.S. Steamer	Ill.
Inactive				
Duty	9-26-19	First Lt.	Pittsburgh	Penn
Inactive				
Dec	9-30-21	First Lt.	U.S. Steamer	Ill.

NAME (Last) *MAGRUDER* (First) *Howell* (Middle) *Joska*  
 SERVICE NUMBER *141-2566* RATE

NOTE

Service records shall not be taken from the Personnel Office without receipting for them. On return of RECORD, the Record Yeoman in the Personnel Office will receipt in last column.

DATE REMOVED	OFFICE AND SIGNATURE	DATE RETURNED
<i>8/2/56</i>	<i>BRT 7 cr 2</i>	<i>---</i>
<i>8-20-56</i>	<i>BNT</i>	<i>and</i>
	<i>cur 13</i>	

TO: The Quartermaster General of the Army, Department Of The Army, Washington, D. C. **Pers-E374-1h**  
 DATE: **20 Aug 1956**

NAME		(Last)	(First)	(Middle)	SERIAL NO.
		<b>MAGRUDER</b>	<b>Howell</b>	<b>Joshua</b>	<b>141 25 66</b>
DATE OF BIRTH	PLACE OF BIRTH				RACE
<b>31 Jan 1900</b>	<b>Washington, Ohio</b>				<b>Caucasian</b>

SERVICE DATA

DATE OF ENLISTMENT	STATE OF RESIDENCE AT TIME OF ENLISTMENT	DATE OF DISCHARGE OR RELEASE	USN USNR OR USNRF	HIGHEST RANK OR RATE HELD	CHARACTER OF DISCHARGE OR RELEASE
<b>1 Aug 1918</b>	<b>Ohio</b>	<b>30 Sep 1921</b>	<b>USNRF</b>	<b>F1</b>	<b>Honorable</b>
<b>MAGRUDER, Howell Joshua, name served under</b>					

DECORATIONS

**NONE**

RESERVE SERVICE (Give dates of active duty other than training)

**17 Aug 1918 to 26 Sep 1919**

Encls: (HW)

**(1) OCMG Form 623 of 28 Jun 1956**

**F. L. BOWMAN**  
 By direction.

UNITED STATES NAVAL RESERVE FORCE

Enrollments, I \_\_\_\_\_ U. S. S. Navy Recruiting Station, Cincinnati, Ohio.

Serial No. 646  
(New series each fiscal year.)  
Credited to 7th Cong. Dist., State of Ohio Transferred to None at \_\_\_\_\_

ENROLLMENT OF Magruder, Howell Joshua  
(Full name, surname to the left.)  
on the 1st day of August, 1918 as AS CLY  
(Rating.)

I, Howell Joshua Magruder, applicant for enrollment in the rating of AS in the United States Naval Reserve Force, and being of good habits and character in all respects, do affirm that I am mentally and physically qualified to perform the duties of the rating in which I am about to enroll. I am not at this date an officer or an enlisted man in any branch of the Military Service of the United States or any State thereof, nor will I accept such employment while enrolled in the United States Naval Reserve Force.

My occupation is machine hand Citizenship U. S. Evidence Satisfactory

Place of birth Washington C.H. O. (Street, Town, County, and State.)

Date of birth Jan 31 1900 Name and address of beneficiary or next of kin John G. Magruder  
father 1248 Warder St. Springfield, O. (Name.)

I have not served in the Navy; I hold Continuous Service Certificate No. \_\_\_\_\_ I first enlisted in the Navy \_\_\_\_\_  
(Strike out "not" if necessary.) (Date.)

at \_\_\_\_\_, and was last discharged \_\_\_\_\_ from the U. S. S. \_\_\_\_\_  
(Place.) (Date.)

with \_\_\_\_\_ discharge as \_\_\_\_\_ I first enrolled in the Naval Reserve Force \_\_\_\_\_ I agree to and \_\_\_\_\_  
(Rate.) (Date.)

with Lieutenant Leroy Brooks, of the United States Navy in manner and form following, that is to say:  
(Name of enrolling officer.)

In the First Place, I agree, for and in consideration of the authorized retainer and active duty pay, to enroll in the United States Naval Reserve Force, under the provisions of the Act of Congress making appropriations for the Naval Service for the fiscal year ending June 30, 1917, and for other purposes, approved August 29, 1916, to serve four years from August 1, 1918

Secondly, I also oblige myself, during such time as I may be on active duty, to comply with, and be subject to, such laws, regulations, and discipline of the Navy as are or shall be established by the Congress of the United States or other competent authority, and to submit to treatment for the prevention of Smallpox, Typhoid (Typhoid Prophylaxis), and to such other preventive measures as may be considered necessary by the Naval Authorities. If discharged by sentence of General Court Martial, I agree to surrender uniform for civilian clothing, or if discharged by reason of bad conduct, undesirability, or for inaptitude, I agree to surrender uniform.

Thirdly, I have had the Enrollment Articles fully explained to me, understand them, and certify that no promise has been made to me concerning assignment to duty or promotion during my enrollment.

In order that she may receive, in the event of my death while on active duty, any benefits which may be authorized by law, I give below the name and address of my wife (and children).

\_\_\_\_\_  
(Full name of wife: if not married, so state.) (Address of wife.)

\_\_\_\_\_  
(Full name of child: if none, so state.) (Address of child.)

In the event of my leaving no wife or child, or their decease before payment is made, I then designate as my beneficiary, the following dependent relative, my \_\_\_\_\_  
(Relationship.) (Name in full.) (Address.)

State briefly wherein dependency consists \_\_\_\_\_

(The full names and addresses should be given. If a married woman, her Christian name should be given, not that of her husband, thus: Mrs. Anna May Smith, not Mrs. John Smith.)

Age 18 years 6 months Height 5 feet 7 inches. Weight 123 lbs.

Eyes gr blu Hair bro Complexion sallow Personal characteristics, marks, etc. no vac, sc bk 1  
index, sc f 1 fa, pm 1 upper abdomen, tattoo initials "HM" flfa, psc bet sca

I certify that I have carefully examined, agreeably to the Regulations of the Navy, the above-named recruit, and find that in my opinion he is free from all bodily defects and mental infirmity which would, in any way, disqualify him from performing the duties of the rating in which enrolled, and that he has stated to me that he has no disease concealed or likely to be inherited.

\_\_\_\_\_  
(Examining Surgeon.)  
Actg. Asst. Surg.

I, Howell Joshua Magruder, do solemnly swear (or affirm) that I will bear true faith and allegiance to the UNITED STATES OF AMERICA, and that I will serve them honestly and faithfully against all their enemies whomsoever, and that I will obey the orders of the President of the United States and the orders of officers appointed over me, according to the Rules and Articles for the Government of the Navy.

And I do further swear (or affirm) that all statements made herein are correct.

\_\_\_\_\_  
(Signature of applicant in own handwriting.)  
Howell Joshua Magruder

Subscribed and sworn to before me this 1st day of August, A. D. 1918, and contract perfected.

I certify to the foregoing signature; that I have inspected the above-named man; that he is not intoxicated; that, to the best of my judgment and belief, he is of lawful age, or, being a minor under eighteen years of age, has lawful consent of parents, and that, in accepting him, I have strictly observed the Regulations which govern enrollment in the United States Naval Reserve Force.

Home address. 1248 Warder St. Springfield, O.  
\_\_\_\_\_  
Lieut. U. S. N. E. F. Navy Recruiting Station, Cincinnati, Ohio, Commanding, U. S. S.

F. N. R.  
N. R.  
N. A. R. (Strike out ones not wanted.)  
N. C. D. R.  
N. R. F. C.

IN THE ENROLLMENT OF A MINOR UNDER EIGHTEEN YEARS OF AGE

CONSENT, DEFEERATION AND OATH OF PARENT OR GUARDIAN

I, <sup>1</sup> \_\_\_\_\_, residing in the \_\_\_\_\_ of \_\_\_\_\_, County of \_\_\_\_\_, and State of \_\_\_\_\_, do hereby consent to the enrollment of \_\_\_\_\_ in the Naval Reserve Force of the United States as <sup>2</sup> \_\_\_\_\_, to serve until <sup>3</sup> \_\_\_\_\_, unless sooner discharged, subject to all the requirements and lawful commands of the officers who may, from time to time, be placed over him; and I do hereby relinquish all claim to his service, and to any wages or compensation for the same, and I do hereby certify that he was born in \_\_\_\_\_ on the \_\_\_\_\_ day of \_\_\_\_\_, 19\_\_\_\_\_

And I, the said <sup>1</sup> \_\_\_\_\_, do solemnly swear—or affirm—that I am the <sup>4</sup> \_\_\_\_\_ of the said <sup>5</sup> \_\_\_\_\_ to be enlisted by my consent as <sup>2</sup> \_\_\_\_\_, and that he has no other legal guardian but myself: So help me God.

(Signature of Parent or Guardian.)

Address (street and number, if possible) \_\_\_\_\_

Personally appeared before me \_\_\_\_\_, a resident of \_\_\_\_\_, in the County of \_\_\_\_\_, and State of \_\_\_\_\_, who is well known to me as a credible person, and made oath that the foregoing statement is correct and true, and signed the same in my presence this \_\_\_\_\_ day of \_\_\_\_\_, 19\_\_\_\_\_

(Signature of Officer administering Oath.)

NOTES TO WHICH THE SMALL FIGURES REFER IN THE OATH OF THE PARENT OR GUARDIAN.

- (1) Fill with the name of Parent or Guardian.
(2) Fill with rating for which enlisted.
(3) Fill in, if under eighteen years, the date of majority.
(4) Fill with the word "Father," "Mother," or "Guardian," as the case may be.
(5) Fill with the name of the applicant.

NOTE.—To be executed in duplicate; the original, if not executed on the above form, to be affixed thereto and forwarded to the Bureau of Navigation, Navy Department; the duplicate to be retained on board the vessel for reference.

Magruder

(Last name)

Howell

(Christian name)

Joshua

(Middle name)

538733

(Application number)

P. Ic.

(Rank or rate)

NRF

(Branch of service)

1412566

(Service number)

The service or other official records of the above-named veteran that are now on file in this Department show the following facts of active service after April 5, 1917, and before July 1, 1919:

HOME SERVICE

FROM—

TO—

OVERSEAS SERVICE

FROM—

TO—

EXCEPTIONS

FROM—

TO—

DATE OF APPLICATION

17 December 1927, 19

There are no exceptions under World War Adjusted Compensation Act, in the case of this veteran, other than those set forth in this certificate.

BENEFICIARY

Magruder, Mrs Mayme

(Last name)

(Christian name)

(Middle name)

Wife

(Relationship)

ADDRESS

336

(House number)

Dell St.,

(Street)

Dayton,

(City)

Ohio.

(State)

I certify that the person first named above is the applicant and is a veteran; that he was discharged under honorable conditions; that he was born January 31, 1900 at Washington C.H. Ohio that his address is 336 Dell St., Dayton, Ohio; that the Adjusted Service Credit due veteran is \$ 298.50; and that the facts hereinbefore stated are the facts of record upon which the conclusions hereinbefore reached are based.

1 1

.4

4

2 4 2	✓	2.7 3	✓
1 7	✓	.2 7	✓
3 7 4	✓	.8 9	✓
2 9	✓	.2 4	✓
6 0	✓		
2 7 3	✓	3 3 4	✓
2 7	✓	.2 9	✓
8 9	✓	1.8 1	✓
2 4	✓	.3 1	✓
3 6. 5	✓		

⊕

9, 6 1.6 2

T

.4

1.6 2

1.6 2

1.6 2

1.6 2

1.6 2

1 6.2 0

1 6.2 0

1 6.2 0 0

9 6.0 0

2 9 8.5 0

T



APR 28 1928

538733 17 Dec 1927

Magruder

Howell

Joshua

(Application number)

(Surname)

(Christian name)

(Middle name)

(Rate)

(Service number)

(Date of birth)

(Place of birth)

141-25-66 ✓

1-31-1900 ✓

71e NRT ✓  
Washington, C.H., O. ✓

HOME SERVICE

OVERSEAS SERVICE

FROM-

TO-

NO. DAYS

FROM-

TO-

NO. DAYS

8-17-18 9-26-18  
11-29-18 ✓ 3-23-19 ✓

9-27-18 11-28-18  
3-24-19 ✓ 3079 ✓

Total

Total

EXCEPTIONS

FROM-

TO-

NO. DAYS

FROM-

TO-

NO. DAYS

Total exceptions

Total exceptions

SERVICE { Home \_\_\_\_\_ days } 60 { at \$1.00 = \$ \_\_\_\_\_  
Overseas \_\_\_\_\_ days } at \$1.25 = \$ \_\_\_\_\_

TOTAL ADJUSTED SERVICE CREDIT

\$

298.50

Computed by \_\_\_\_\_

Verified by *A.S.P.*

Date *5/28*

JUN 2 1928

APPLICATION FOR ADJUSTED COMPENSATION FOR SERVICE IN

Navy  
(Army, Navy, Coast Guard, or Marine Corps)

Applicant will make no entries in this column

38733

Application number

DE 2227

This application must be sent to the War Department, Navy Department, or Marine Corps, as indicated in instructions, depending on whether your last service was in the Army, Navy, Coast Guard, or Marine Corps. Use the envelope provided for this purpose, with the proper address printed on it.

READ INSTRUCTIONS OVER CAREFULLY

To the Secretary of War or Secretary of the Navy.

The following statements are made by me in support of my claim for Adjusted Compensation under the provisions of the World War Adjusted Compensation Act:

Item No.

1. Name of veteran:

Magruder Howell Joshua  
(Last) (First) (Middle)

Service or Serial No.

1412566

Identified

J. H. Taylor

2. Present address of veteran or dependent

335 Dell Street  
(House number and street)

Dayton Montgomery Ohio  
(City) (County) (State)

3. Date of birth of veteran

Jan. 31 1900  
(Month) (Day) (Year)

at Washington, C.H. Ohio  
(City) (State)

4. Original entry into World War service in the

~~Army, Navy, Coast Guard, or Marine Corps~~

was as a Apprentice Seaman  
(Rank or grade)

August 1 1918  
(Month) (Day) (Year)

at Cincinnati Ohio

5. Date of separation

September 26 1919  
(Month) (Day) (Year)

at Pittsburg, Pa.

6. I ~~did~~ (did not) have oversea service.

7. Service in organizations, at stations or on vessels in the order named as follows:

Great Lakes Ill.	from	Aug 1-1918	to	Aug 25-1918
Norfolk Va.	from		to	
U.S.S. Massachusetts	from		to	
Hampton Roads Va.	from		to	
Patbridge New York	from		to	
U.S.S. Harrisburg	from	May 1-1919	to	Sept. 25-1919
	from		to	
	from		to	
	from		to	
	from		to	

8. Character given on discharge certificate

Honorable

Item 9 will be filled in only by men whose service or part of whose service was in the Marine Corps

9. Embarked for oversea service on

(Name of vessel)

(Date)

at

(Name of port)

and disembarked from

(Name of vessel)

(Date)

at

(Name of port)

on return to United

States from oversea service.

13. Commissioned service: GRADES FROM— TO—  
None.

14. I was a commissioned or warrant officer performing home service not with troops and receiving commutation of quarters or of subsistence from \_\_\_\_\_  
to \_\_\_\_\_, and during this period I was on duty at the following stations:  
STATION FROM— TO—  
None

15. I was granted a farm or industrial furlough from \_\_\_\_\_  
to \_\_\_\_\_

16. I ~~was~~ (was not) a conscientious objector who performed no military or naval duties whatever, and ~~did~~ (did not) refuse to wear the prescribed uniform of the branch of service in which I was serving.

17. I ~~was~~ (was not) discharged for alienage.

18. Remarks:  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

19. I certify that I am the Person named in this application;  
(See instructions for this item)

that the statements made herein are made by me of my own free act and deed for the purpose of applying for Adjusted Compensation under the provisions of the World War Adjusted Compensation Act; and that the same are true and correct to the best of my knowledge and belief.

Date Dec. 17-1997 Signature of applicant Howell Joshua Magruder  
(First) (Middle) (Last)

*Item 20 will not be filled in when dependent makes application*

20. We, the undersigned, certify that we know the person signing the application to be identical with the veteran whose service is set forth in the above application; that we have known him ~~(him)~~ for 6 years years and 6 years years, respectively;  
(To be filled in by first witness) (To be filled in by second witness)  
and that he (she) understands the statements made by him (her) and the penalty provided by law for making false statements.

Signature of witnesses: (1) Sybil Mariana Kohr  
(First name) (Middle name) (Last name)

606 Valley st  
(Address)

(2) Myrtle Raina Kohr  
(First name) (Middle name) (Last name)

606 Valley st  
(Address)

N-2 REQUEST FOR INFORMATION FROM NAVY <input checked="" type="checkbox"/> MARINE <input type="checkbox"/> COAST GUARD <input type="checkbox"/>			FORMS ON RECORD		DATA REQUESTED		1. C-NO.
			553 <input type="checkbox"/>	78 <input type="checkbox"/>	MEDICAL <input checked="" type="checkbox"/>	SERVICE <input checked="" type="checkbox"/>	10-19 967 426
2. ORIGINATING UNIT Adjudication Division			3. LOCATION OF REQUESTING OFFICE VARO, 209 E. 6th St., Cinti. 2, Ohio			4. TYPE OF CLAIM Death	
5. LAST NAME—FIRST NAME—MIDDLE INITIAL (UNDER WHICH SERVED) MAC GRUDER, Howell J.				6. SERIAL OR FILE No. 1 412 566		7. DATE 7/5/56	
8. HOME ADDRESS (STREET, CITY, STATE) Deceased						9. DATE OF BIRTH 1/31/00	
10. PLACE OF BIRTH Washington C.H., Ohio		11. CONVERTED INSURANCE No. K-		12. NAT'L SERV. LIFE INSURANCE No. N-		13. DATE OF DEATH 6/21/56	
14. DATE(S) OF ENROLLMENT(S) OR ENLISTMENT(S)			15. DATE(S) AND PLACE(S) OF ENTRY INTO ACTIVE SERVICE 8/1/18, Grt. Lakes, Ill.			16. DATE(S) AND STATION(S) OF ACTUAL DISCHARGE FROM SERVICE 9/26/19, Grt. Lakes, Ill.	
17. IF NOT DISCHARGED, INDICATE DATE(S) AND STATION(S) FROM WHICH RELEASED FROM ACTIVE DUTY			18. CHARACTER OF DISCHARGE Honorable			19. LAST RANK OR RATING P1C	
ALLEGED DISEASE OR INJURY, DATE OF INCURRENCE, DATE(S) AND STATION(S) OF TREATMENT			ADDITIONAL				
DO NOT WRITE OR TYPE IN MARGIN			BY <u>R. E. COX, Adjudication Officer,</u> (NAME AND TITLE) <u>REB/mch</u>				
			FROM (CHECK WHICH): <input checked="" type="checkbox"/> CHIEF, BUREAU OF NAVAL PERSONNEL. <input type="checkbox"/> COMMANDANT, U. S. MARINE CORPS. <input type="checkbox"/> COMMANDANT, U. S. COAST GUARD. <u>Pers-E374-jo</u> (CHECK ONE) <input type="checkbox"/> ALL ITEMS CORRECT. <input checked="" type="checkbox"/> ALL ITEMS CORRECT EXCEPT: 14. 1 Aug 1918 15. 17 Aug 1918 16. 26 Sep 1919 released 30 Sep 1921 discharged 5. <u>MACGRUDER, Howell Joshua</u> Marital Status: (single) Next of Kin: (father) <u>John G. Macruder</u> <u>1248 Warder Street</u> <u>Springfield, Ohio</u>				
Via: BuMed 13 Aug 1956 (DATE FORWARDED)			E. K. MESSERSMITH BY <u>direction K</u> (NAME AND TITLE)				
FROM (CHECK WHICH): <input type="checkbox"/> CHIEF OF BUREAU OF MEDICINE AND SURGERY. <input type="checkbox"/> CHIEF MEDICAL OFFICER OF THE U. S. COAST GUARD.							
1. PHOTOSTATIC COPY OF MEDICAL RECORD IS ENCLOSED. 2.							
(DATE RETURNED TO VETERANS)				BY _____ (NAME AND TITLE)			

① efd 7-30-56-4  
② efd 7-30-56-4  
③ efd 7-30-56-4  
Check Number

50695

RECEIVED

JUL 17 1956

BRANCH THREE

Cor-2



REC'D. BRANCH - 7

JUL 26 1956

58424

CASE NUMBER

In reply address not the object of  
this letter, but Bureau of Navigation,  
Navy Department, Washington, D. C.

Refer to No. A2-3/MM(19)  
Nav-0-MAR

NAVY DEPARTMENT  
BUREAU OF NAVIGATION  
WASHINGTON, D. C.

December 16, 1926.

Bureau of Navigation CIRCULAR LETTER No. 76-26.

To: All Ships and Stations.

Subject: Changes in Uniform Regulations.

References: Bunav Circ. let.No. 44-26 of Aug. 6, 1926.  
Bunav Circ. let.No. 62-26 of Oct. 29, 1926.

1. The following changes in Uniform Regulations 1922  
will be incorporated in the next printed changes to be issued:

Paragraph 266, immediately following last paragraph,  
add:-

"Non-rated men who have successfully completed the full course of instruction at a regularly established service school on shore, and other non-rated men who have successfully passed the required examinations for advancement to petty officer third class, in the following specialties, shall wear, until they are rated a third class petty officer, the distinguishing marks as indicated: for the Machinist's Mates school the specialty mark of Machinist's Mate; for the Artificer's school, the specialty mark of blacksmith, coppersmith or boiler-maker as appropriate; for the Electrical school, the specialty mark of electrician's mate; for the Musician's school the specialty mark of musician; for the Aviation Metalsmith's school the aviation metalsmith specialty mark; for the Aviation Carpenter's mate school; the specialty mark for aviation carpenter's mate for the Aerographer's school the specialty mark for aerographer; and the graduates of aviation general utility courses will wear specialty mark consisting of aviation wings without other device between the wings."

W. R. SHOEMAKER.

Department Distribution:

I, II, III, IV, V, VI, VII, VIII, IX, X, (a, b, c).

From: \_\_\_\_\_

To: MUSTER ROLL SECTION OR LOG ROOM.

Please furnish the information checked.

NAME	NUMBER	RATE
QUESTION	ANSWER	
1   Reported or Received	Date of transfer to USS	
2   Trans.	Massachusetts - Levy 6 is buried	
3   Recalled	Transferred 9-27-1918	
4   Released	to Mass.	
5   Disc.	Smith	
6   Deserted Surr. Deliv.		
7   Died		
8   Furlough		
9   Detail		

Clerk \_\_\_\_\_

BUREAU OF NAVIGATION,  
NAVY DEPARTMENT,  
....., 1917.

1. The data required on this form should be neatly and accurately copied from the "Service Record" of each enlisted man on board of a vessel or attached to a station and filed alphabetically in the loose-leaf binder; subsequent entries in the service record should be noted on the corresponding leaf in the binder.

2. When an enlisted man is to be transferred, his service record and his leaf in the binder should be completed to the date of such transfer, the service record forwarded to the vessel or station to which he is transferred, and his leaf in the binder detached at the perforations and immediately forwarded to the Bureau. The commanding officer receiving the man will at once have a leaf inserted in the binder of that vessel or station, noting thereon all the information regarding enlistment, for purposes of identification, but the entries for professional qualifications, conduct, offenses, and punishments will include only the period of service on board of the particular vessel or at the station.

3. When a man is recommended for first advancement to the rating of petty officer, a copy of Form 1-B, on file in the "binder," completed to the date of such recommendation, should be forwarded to the Bureau, but subsequent recommendations for advancement, except to the rating of chief petty officer, need only report the record of the man from one advancement to another. When the recommendation is for permanent appointment as chief petty officer, a complete record of current enlistment, to date of recommendation, showing names of vessels on which service has been performed, and all other information required by Form 1-B, together with the report of the Board, signed by all the members, should be forwarded to the Bureau.

4. Upon the expiration of the original four years of a man who extends his enlistment, his entire service of four years shall be transcribed on a Form 1-B, which should be forwarded to the Bureau with red ink notation on the indorsement fold "Enlistment extended, transcript of original four-year enlistment." The original Form 1-B or ledger leaf will be retained in the ledger.

5. Under "Authority" on the indorsement fold the reason for the advancement or reduction of the man should be given in full, making reference to correspondence, Navy Regulations, or the Bureau's circular, as the case may be. If appointment is issued to fill a vacancy, this should also be shown.

6. This form is to be filled out on the typewriter whenever practicable. If written by hand, care should be used in writing names and dates correctly and making every letter and figure legible.

7. This form must, in every case when sent to the Bureau of Navigation, be folded twice, with the indorsement fold outside.

L. C. PALMER,  
Chief of Bureau.

THE FOLLOWING TO BE COMPLETED ONLY IN CASE OF DISCHARGE, DESERTION, OR DEATH.

Pay per month (pay table) ----- \$  
Additional for continuous service ----- \$  
Additional for G. C. Medals ----- \$  
Additional for Cert's of Grad'n ----- \$  
Additional for detail as\* ----- \$  
Bonus for citizenship ----- \$  
Total pay per month ----- \$

State of account at date of -----

\* Gun pointer, gun captain, coxswain commander in chief, coxswain steam fannoh, signalmen (first, second, or third class), tailor, fitter's helper, captain of hold, jack of the dust, lamplighter, messman, submarine boat duty, mail clerk, assistant mail clerk, Discharge, desertion, or death.

U. S. S. M. P. S. Pittsburgh Pa.

Name Magnus Howell J.

Enlisted Aug. 1, 1915,  
C. S. C. No. -----

Discharged, Furloughed, Deserted, Died.

Transferred to Inactive duty  
Date Sept. 26, 1917

AUTHORITY Bureau. O. 225-18

Recommended for ----- appoint-  
ment as -----

Certified to be a true copy.

-----, U. S. Navy.  
(Executive Officer.)

Forwarded approved:

-----, U. S. Navy.  
(Commanding Officer.)

From: BUREAU OF NAVIGATION.

To:

Approved:

By direction.

U. S. S. -----  
Given an ----- appointment  
as -----  
From -----

AUTHORITY -----  
-----, U. S. Navy.  
(Executive Officer.)

-----, U. S. Navy.  
(Commanding Officer.)

**By Direction**  
Discharged at M. P. S. Pittsburgh on account  
of Bureau O. 225-18  
this 30th day of Sept., 1917  
(Exp. of enl., disability, etc.) (Char. of dis.)  
Furnished { Travel allowance }  
{ Trans'p'n and sub. }  
Total cost, \$ ----- (Name of place.)  
Gun captain ----- Gunnery record, Yes or No.  
(Class of gun.) (Erase one.)  
Gun pointer ----- physically qualified for reenlistment.  
(Insert H. I., or S., with date of latest quart'n.)  
Is ----- recommended for reenlistment.  
Is -----  
P. O. address after discharge Wilmington  
Del.

DEC 19 1917





Citizenship U. S.

Reported 8-17-18 On board U. S. U.S. Lhs. From U. S. S. Home Record of H. J. Magruder  
 (Date.) (Name of ship.) (Full name, surname to right.)

NOTE.—To be used as per instructions; for reporting all transfers, for making recommendations for advancement to rating of petty officer only, and for permanent appointment as chief petty officer; also to accompany recommendations for the discharge of all enlisted men, when considered necessary.

No erasures, alterations, or ditto marks permitted. If an error, draw red-ink line and initial.

In the preparation of this form instructions on reverse side of blank should be carefully followed.			PROFESSIONAL QUALIFICATIONS.									CONDUCT.		Recommended for honorable discharge.	Recommended for Good Conduct Medal.	Rating best qualified to fill.	MERITORIOUS CONDUCT WORTHY OF SPECIAL MENTION. (Enter date.)	OFFENSES OR CAUSE OF DISRATING. (Enter dates of all offenses.)	PUNISHMENTS. (Note the date of issue of appointments and change in rating, and dates between which duties are performed which require special compensation.)
T. Dis. R. D.D.	DATE.	RATE.	(a) Proficiency in rating.	(b) Seamanship.	(c) Ordnance.	(d) Signaling.	(e) Marksman-ship Small Arms.	(f) Mechanical ability.	(g) Knowledge of marine machinery.	(h) Knowledge of electrical machinery and appliances.	(i) Ability as leader of men.	Sobriety.	Obedience.						
E.	8/1/18	U.S.																	
R.	8/17/18	"																	
R.	8/29/18	F. 3. C.																	
T.	9/14/18	"																	
T.	9/17/18	"																	
T.	9/28/18	"																	
R.	12-1-18	F. 1. C.																	
T.	12/4/18	"																	
T.	3/24/19	"																	
T.	9/27/19	"																	
R. & P.	9/29/19	F. 1. C.																	
FINAL AVERAGE,																			

Magruder, Howell J.

None.

F3c.18

Aug.

1

CR

12/1/18.

File.

Naval Operating Base  
Hampton Roads, Va.

Record of  
Allotments, Family Allowances  
and  
Insurance of Enlisted Men

INSTRUCTIONS

This form will be made out in duplicate. The original will be retained in the service record and the copy forwarded to the Bureau of Navigation. When any changes occur which affect the information called for on this form, new forms will be made out for the service record and for the Bureau.

Magruder, Howell Joshua .....  
Full name—(Surname to left.)  
Rate..... AS { ~~U. S. Navy~~  
Naval Reserve Force Class... 4  
National Naval Volunteers  
Aug 17 1918 .....  
Date of Enlistment.

BOND  
RECEIVED

U. S. Navy Recruiting Station, Cincinnati, Ohio  
.....  
..... Aug. 1. 1918 .....  
Date

To: Bureau of Navigation.  
1. This information is correct as shown  
by the records of... Aug. 1. 1918.....

*Henry Brooks*  
..... U. S. ....  
Lieut. U. S. N. E. F. Commanding.

Magruder, Howell Joshua

AS USNRF

Name in full--Surname to left

Rate

Date of enlistment

## COMPULSORY ALLOTMENT

Relation-ship	NAME	POST OFFICE ADDRESS			DATE OF BIRTH			Married? Enter "Yes" or "No"	REMARKS (Follow Instructions)
		No. and Street or Rural Route	City, Town or Post Office	State	M'th	D'y	Year		
Wife	none								
Child	none								
Child									
Child									
Child									
Divorced Wife	none						Remar'd? "Yes" or "No"	Amount Payable monthly by order court	

## VOLUNTARY ALLOTMENT

Relation-ship	NAME	POST OFFICE ADDRESS			Amount of my average monthly habitual contribution because of dependency	AMOUNT OF ALLOTMENT
		No. and Street or Rural Route	City, Town or Post Office	State		
	none				\$	

## RECORD OF FAMILY ALLOWANCES

Relation-ship	NAME	POST OFFICE ADDRESS			AMOUNT
		No. and Street or Rural Route	City, Town or Post Office	State	
	none				

## RECORD OF INSURANCE

Relation-ship	NAME	POST OFFICE ADDRESS			AMOUNT
		No. and Street or Rural Route	City, Town or Post Office	State	
MO.	Hannah Lewis Magruder	1248 Warder	St Springfield	Ohio	\$10,000.00

In case of emergency notify Hannah Lewis Magruder, Mother, 1248 Warder St, Springfield Ohio

Name

Relationship

Address

If no insurance, state whether eligible for insurance or not { Yes  
No

Is mother living? { Yes No } If living, is she a widow? { Yes No

Is wife's mother living? { Yes No } If living, is she a widow? { Yes No

See Instructions on back

MAGRUDER, Howell Jushia

NRF Fle 1918 Aug 1 T 3/24/19 USS HARRISBURG

THE RECEIVING SHIP AT N.Y.

Magruder, Howell J. RF

Fle <sup>18</sup>~~1918~~ Aug 1 T 3-6-19 R.S. New York  
Dft-815

Great Lakes, Ill.

MAGRUDER Howell Joshua NRF

Fic 18 8 1 REC 3/9/19 CRT LAKES ILL

RS AT NY

Magruder, Howell J. NRF

?

Fic 18 Aug 1 RAD 9-26-19

NAVY DEMOBILIZATION STATION  
PITTSBURGH, PA.

OCT 3 1919

NAVY DEMOBILIZATION STATION  
PITTSBURGH, PA.

MAGRUDER, Howell J.

File 1918 8 1 Rec. 3/25/19 R.S. AT N.Y.

U.S.S. HARRISBURG

MAGRUDER, Howell J

1412566 File 18 Aug 1

NINTH NAVAL DISTRICT

DISC. 9-30-21

DISCHARGED FROM  
U.S.N.R.F.

DISCHARGED FORM  
ISSUED.

INACTIVE U S N R F

Magruder, Howell Joshua NRF

F3c 1918 8 1 Rec. 11/28/18 USS. Mass.

N. O. B. Hampton Rds. Va;

Magruder, Howell, J.

NRF

F1c 18 Aug 1 Rec 9/26/19 USS HARRISBURG

NAVY DEMOBILIZATION STATION  
PITTSBURGH, PA.

OCT 3 1919





No. 646

9th, 10th and 11th Naval Districts  
GREAT LAKES, ILLINOIS

Magruder Howell J.  
.....  
Name

.....  
Rate

U. S. N. R. F. Class. 4  
.....

(a) .....  
Date called to Active Service

(b) .....  
Present Station

(c) Changes in rating.....  
.....  
.....

FOR GENERAL SERVICE  
(d) Volunteered for class.....

(e) Qualified for class.....

(f) Residence 1248 Warden  
Springfield St  
Ohio  
.....  
.....

Called to Active Duty

8-17-18

9-30-19

# ENROLLMENT RECORD.

Released From

SCALE OF MARKS: 0, Bad; 1, Indifferent; 1.5, Fair; 2.5, Passing; 3.0, Good; 3.5, Very Good; 4.0, Excellent.

Name, Magruder, Howell J ; Rate, Flc ;

Enrolled, 8-1-18 , 1918 , at Cincinnati for 4 years;

Previous naval service, 0 years; Previous Naval Reserve Service, 0 years;

Served apprenticeship, 0 ; Gun Captain

certificate, 0 ; Certificate graduation P. O. School, 0 ;

Seaman Gunner, 0 ; Trade, 0 ; Citizenship, US ;

Ratings held during enrollment, AS F3c Flc ;

Proficiency in rating, 3.8 ; Sobriety, 4.0 ; Obedience, 4.0 ;

Average standing for term of enrollment, 3.6 ; Special qualifications, 0 .

## DESCRIPTIVE LIST.

(To be made after careful examination at date of discharge.)

Where born, Washington C.H., Ohio , Date, Jan 31 , 18900 .

Age, 2 years, 8 months; Height, 5 feet, 7 inches; Weight, 123 lbs.;

Eyes, blue ; Hair, brn ; Complexion, sw ;

Personal characteristics, marks, etc., 0 ;

pm bel r breast; tat fr fa; sc fl fa; sc k sc  
l ind

Percentage of time on sick list during enrollment, None ;

Is 0 physically qualified for reenrollment.

**NOT PRESENT FOR EXAM.**

H. A. DeMaun ; P. M. U. S. N.  
(Signature Medical Officer.)

I hereby certify that the above-named 0 ;

has been paid 0 dollars 0 cents

(\$ 0 ), in full to date.

0 , 1918 ;

0 , U. S. N.  
(Signature Paymaster.)



UNITED STATES NAVAL RESERVE FORCE

**DISCHARGE**

This is to certify That MAGRUDER, Howell Joshua

(Name in full)

a Fireman 1c 1412566

(Rating)

(Provisional or ~~temporary~~)

(Service number)

, this date has been discharged from the

U. S. S. NINTH NAVAL DISTRICT and the U. S. Naval Reserve Force, Class 4, by reason of

HONORABLY DISCHARGED FROM THE U. S. NAVAL RESERVE FORCE

(Enter expiration of enrollment; special order of Navy Department (under age); physical disability; order Bureau of Navigation (date); or other reason, giving same in detail)

30 SEPTEMBER 1921, IN ACCORDANCE WITH ALNAV 67

Is \_\_\_\_\_ recommended for reenrollment. Rating best qualified to fill,

Flc

(Provisional or ~~temporary~~ rating)

Dated this 30th day of September, 1921, at Great Lakes, Ill.

Character of discharge

Honorable  
(Enter in red ink, "honorable," "good," "inaptitude," "undesirable")

E. J. B. Smith, c  
E. J. Wilson

{ U. S. N. R. F.

{ U. S. N. R. F.

Lieutenant

By direction.

## CHANGE OF RATING

ALL ENLISTED MEN OTHER THAN TO RATING  
OF CHIEF PETTY OFFICER.

U. S. NAVAL TRAINING STATION  
GREAT LAKES, ILLINOIS

... August 26, 1918 .....

Name Magruder, Howell, J. ....

Rate A. S. { U. S. Navy.  
Naval Reserve Force, Class....  
National Naval Volunteers.

C. S. C. No.

When { Enlisted  
Enrolled Aug. 1, 1918

Where { Enlisted  
Enrolled Cincinnati Ohio

Rating changed to: F3c

Authority: Bureau of Navigation.

Remarks: Auth. Comd.

*W. A. Maffett*

....., U. S. Navy,  
Commanding Officer.

Reports to be typewritten.

Nav. Slip No. 1.  
(August, 1917.)

SEP 13 1918

### TRANSFER OF

All non-rated men and all petty officers on board less than 3 months. Petty officers on board 3 months and longer forward Nav. form 1-B.

U. S. Naval Training Station,  
Great Lakes, Ill.

Name ~~Magruder~~, ~~Howell~~ Joshua...

Rate, F. 3c { U. S. Navy.  
Naval Reserve Force, Class. 4  
National Naval Volunteers.

C. S. C. No.

When { Enlisted  
Enrolled August 1 1918

Where { Enlisted  
Enrolled Cincinnati, Ohio.

Transferred to **Tr Sta Na Base**

Authority, Bureau of Navigation  
**Norfolk**

Remarks

*W. A. Maffett*

....., U. S. Navy,  
Commanding Officer.

Reports to be typewritten.  
See Instructions on back.

## Instructions

This form shall be forwarded to Bureau of Navigation immediately upon the transfer of any non-rated man and upon transfer of any petty officer who has been attached to a vessel or station less than three months.

Special care should be taken to indicate that particular branch of the service to which the man belongs, i. e., U. S. Navy, Naval Reserve Force, Class. . . . ., or National Naval Volunteers.

When this form is forwarded in accordance with instructions hereon Navigation Form 1-B need not be forwarded and may either be retained on board or destroyed.

Reports should be typewritten.

Nav. Slip No. 1.  
(August, 1917.)

## TRANSFER OF

All non-rated men and all petty officers on board less than 3 months. Petty officers on board 3 months and longer forward Nav. form 1-B.

U. S. S. MASSACHUSETTS.....

.....  
.....NOV 28 1918.....

Name.....Magruder, Howell J.....

Rate..F. 3. { U. S. Navy.  
                  { Naval Reserve Force, Class....  
                  { National Naval Volunteers.

C. S. C. No.

When { Enlisted  
          { Enrolled 8-1-18

Where { Enlisted  
          { Enrolled Cincinnati O

Transferred to R S Phila Pa

Authority CBF One let 3697 6/2/18

Remarks

JOHN D. WAINWRIGHT.

.....Captain....., U. S. Navy,  
Commanding Officer.

Reports to be typewritten.  
See Instructions on back.

WAR SERVICE CERTIFICATE  
UNITED STATES NAVY.

No 196832

NAVY DEMOBILIZATION STATION  
PITTSBURGH PA  
U. S. -----  
(Name of vessel or station)

Magruder Howell J.  
-----  
(Name of enlisted man)  
A1C

-----  
(Rating at date of discharge)

9/26/19  
-----  
(Date of discharge)

NAVY DEMOBILIZATION STATION  
PITTSBURGH PA  
-----  
(Place of discharge)

A1C  
-----  
(Rating best qualified to fill)

C. S. C. No. -----, { H. D. Button }  
delivered } (Yes or no) <sup>no</sup>

1248  
Garden St. Springfield  
-----  
(Home address)

Pay per month at discharge, \$ 41.00

Paid in full at discharge, \$ 976.00

*[Signature]*  
-----  
Commanding Officer.

NOTE.—Stubs to be forwarded, as bound, to the Bureau  
of Navigation when the certificates in the book  
have been issued.



Credited to

2<sup>nd</sup>  
Professional District

CR

Form 352, Bu. Nav.

# ENROLLMENT RECORD FOR GENERAL SERVICE

## NAVAL RESERVE FORCE

141-25-66

CLASS

GENERAL DUTY

# MAGRUDER

SURNAME

# HOWELL J

CHRISTIAN NAME

ENROLLED AS

HOMER WAITING ORDERS TO BE CALLED TO ACTIVE DUTY WHEN TRANSFERS RESUMED.



CHECKED BY SUNAV  
48-3-8-20

NAVY RECRUITING STATION  
CINCINNATI, OHIO.

ENROLLED AT

# AUG 1 1918

DATE OF ENROLLMENT

NINTH NAVAL DISTRICT

DISCHARGED AT

DATE DISCHARGED

7-12

DIS. SEPT. 30, 1911  
29111

DISCHARGED AS

21-18-P

# INTENSIVE TRAINING-ENGINEERS (C-in-C letter No. 1885 of 4-24-17)

TRAINED ON BOARD U. S. S. MASSACHUSETTS.

NAME Magruder H J

Actual Rate F 3

On transfer from U. S. S. Massachusetts.

Instructed as ENG. 2 CL

General Proficiency 3.0

Qualified as F 1 cl

Type of Boiler, Babcox and Wilcox.

Type of Engine, Triple expansion 3 Cylinder.

Lubrication of Engines, Gravity Feed

Fuel, Coal.

Naval Training Station  
Hampton Roads, Va

Received from U. S. S. \_\_\_\_\_

Date received SEP 27 1918

Transferred to Receiving Ship, Phila., Pa.

Date transferred NOV 28 1918

Issued Enlistment Certificate Card No. 256250

AUG 1 1918

(Date.)

I have this date examined Howard J. Magruder and find him to be qualified for the  
provisional rating of A.S. in class 4 Gen Duty, United States Naval Reserve Force,  
and recommend him for said rating. Henry Brooks

(Name)

(Class of Naval Reserve.)

Lieut. U.S.N.R., U.S.N.

(Date.)

I have this date examined the above-named man and find him qualified for confirmation in the rating of 4 Gen Duty, United States Naval Reserve Force.  
Lieut. U.S.N.R., U.S.N.

(Class of Naval Reserve.)

U.S.N. Enrollment, 919 U.S. Navy Recruiting Station  
Cincinnati, Ohio  
Serial No. \_\_\_\_\_ at \_\_\_\_\_

### ENROLLMENT RECORD

OF

Name Howard J. Magruder

Rate A.S. Enrolled AUG 1 1918, 19\_\_\_\_

Navy Recruiting Station  
Cincinnati, Ohio to serve 4

Years from AUG 1 1918, 19\_\_\_\_, in the

4 Gen Duty, United States Naval  
(Class of reserve)

U.S. Evidence Satisfactory.  
Reserve Force. Citizenship \_\_\_\_\_

(U.S. or N. U.S.)

Place of birth Washington, D.C.

Date of birth Jan 31<sup>st</sup> 1880, Home

Address Howard St. Springfield, O.

(Street No., city and state)

Name and address of next of kin \_\_\_\_\_

(Relation)

John Magruder

(Name and address)

(Same)

Henry Brooks

Lieut. U.S.N.R., U.S.N.  
Enrolling Officer

The above to be executed and signed at the rendezvous or on board the vessel where man is enrolled. The abbreviations for citizenship will be as follows: U.S., Native-born citizen of the U.S.; N. U.S., Naturalized citizen of the U.S.; C. I. P., citizen of Insular Possessions of U.S. Citizens of Insular Possessions may be enrolled in the Naval Auxiliary Reserve, if in no other class.)

AUG 1 1918

Account Cards prepared and mailed \_\_\_\_\_ Date

## DESCRIPTIVE LIST.

Age, 18 years 6 months

Height, 5 feet 7 inches

Weight, 123 lbs.

Eyes, Blue Hair, Brown

Complexion, Fair

Personal characteristics, marks, scars, etc.,

M below R must

Tattoo of R arm "N" must discharged, 1

R of L of arm from the U. S.

Sc back with discharge.

Sc of L of arm

## PREVIOUS NAVAL SERVICE.

Total naval service years.

First enlisted, 1

Last discharged, 1

From the U. S.

With discharge.

## PREVIOUS SERVICE IN NAVAL RESERVE FORCE.

First enrolled in Naval Reserve Force, Class

; total Reserve service

years; classes

Last discharged, 19

From the Naval District

, U. S. N.,  
Enrolling Officer

Record of Bornell J Maguire

SHIP OR STATION.	T. DIS., R., D. D.	DATE (Enter dates of change in rating)	RATE	Proficiency in rating	SPECIAL QUALIFICATIONS	CONDUCT		Recommended for reenrol- ment	Rating best qual- ified to fill
						Sobriety	Obedience		
1 NAVY RECRUITING STATION CINCINNATI, OHIO	E	8-1-18	2.5						
2 NAVAL TRAINING STATION GREAT LAKES, ILL.	C.R.	AUG 26 1918	3.0						
3 NAVAL TRAINING STATION GREAT LAKES, ILL.	T	SEP 11 1918	3.0						
4 U. S. S. MASSACHUSETTS	F	SEP 27 1918	2.0		UNDER INSTRUCTION				
5 U. S. S. MASSACHUSETTS	F	NOV 28 1918	3.0			4	4	Y	File
6 U. S. S. MASSACHUSETTS	F	DEC 1 1918	3.0						
7 U. S. S. MASSACHUSETTS	T	DEC 14 1918	3.0		Less than one month.				
8 U. S. S. MASSACHUSETTS	T	MAR 6 1919	3.0						
9 U. S. S. MASSACHUSETTS	T	MAR 6 1919	3.0						
10 U. S. S. MASSACHUSETTS	T	MAR 6 1919	3.0						
13 U. S. S. MASSACHUSETTS		6-30-19	2.5			4	4	Y	File
14 U. S. S. MASSACHUSETTS	F	SEP 25 1919	2.5			4	4	Y	File
15 U. S. S. MASSACHUSETTS	F	SEP 25 1919	2.5						
16 U. S. S. MASSACHUSETTS	F	SEP 25 1919	2.5						
17 U. S. S. MASSACHUSETTS	DIS.	SEPT. 30, 1921							
18 U. S. S. MASSACHUSETTS	DIS.	SEPT. 30, 1921							
19 U. S. S. MASSACHUSETTS	DIS.	SEPT. 30, 1921							
20 U. S. S. MASSACHUSETTS	DIS.	SEPT. 30, 1921							
21 U. S. S. MASSACHUSETTS	DIS.	SEPT. 30, 1921							
22 U. S. S. MASSACHUSETTS	DIS.	SEPT. 30, 1921							
23 U. S. S. MASSACHUSETTS	DIS.	SEPT. 30, 1921							
24 U. S. S. MASSACHUSETTS	DIS.	SEPT. 30, 1921							
25 U. S. S. MASSACHUSETTS	DIS.	SEPT. 30, 1921							
26 U. S. S. MASSACHUSETTS	DIS.	SEPT. 30, 1921							
27 U. S. S. MASSACHUSETTS	DIS.	SEPT. 30, 1921							
28 U. S. S. MASSACHUSETTS	DIS.	SEPT. 30, 1921							
29 U. S. S. MASSACHUSETTS	DIS.	SEPT. 30, 1921							
30 U. S. S. MASSACHUSETTS	DIS.	SEPT. 30, 1921							
31 U. S. S. MASSACHUSETTS	DIS.	SEPT. 30, 1921							

Record of -----

SHIP OR STATION.	T. DIS.. R.. D. D.	DATE (Enter dates of change in rating)	RATE	Proficiency in rating	SPECIAL QUALIFICATIONS	CONDUCT		Recommended for reenroll- ment	Rating best qual- ified to fill
						Sobriety	Obedience		
NAVY RECRUITING STATION CINCINNATI, OHIO.									
32									
33									
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51									
52									
53									
54									
55									
56									
57									
FINAL AVERAGE,									

DATE	MERITORIOUS CONDUCT WORTHY OF SPECIAL MENTION; OFFENSES AND PUNISHMENTS; ISSUE AND REVOCATION OF APPOINTMENTS; ADVANCEMENT OR REDUCTION IN RATING.	SIGNATURE OF COMMANDING OFFICER.
1 <i>Aug 17 1918</i>	<b>REPORTED FOR ACTIVE DUTY</b>	<b>W. A. MOFFETT</b>
2 <b>AUG 26 1918</b>	<i>Rated F3 e such comdt.</i>	<b>W. A. MOFFETT</b>
3	<b>Record Clear</b>	<b>W. A. MOFFETT</b>
4	<i>Record clear.</i>	<b>W. M. GROSE</b>
5	<b>RECORD CLEAR</b>	<b>JOHN D. WAINWRIGHT,</b>
6 <b>DEC 1 1918</b>	<i>431B-719 In accordance with C. G. letter No. 177 of 4-2-19</i>	<i>W. M. Grose</i>
7	<b>Record clear.</b>	<b>W. M. GROSE</b>
8	<b>RECORD CLEAR</b>	<b>F. B. BASSETT, JR.</b>
9	<b>Record clear.</b>	<b>HARRY A. CADDY</b>
10	<i>Law for R. D. Du Ross Co. Lt. 305-18 35-19 etc.</i>	<i>Stauder</i>
11	<i>Army Recruiting Station, Pittsburgh, Pa.</i>	<i>Stauder</i>
12	<i>Army Recruiting Station, Pittsburgh, Pa.</i>	<i>Stauder</i>
13	<i>with Army Corp, 225 18.</i>	<i>Stauder</i>
14	<b>RECORD CLEAR</b>	<i>Stauder</i>
15	<b>DISENROLLED - AUTH. AL. NAV. 67</b>	<i>Stauder</i>
16	<b>SEPT. 30, 1921</b>	<i>Stauder</i>

**BOND**

## NAVY DEPARTMENT

N-HH

WASHINGTON

96563-21

29 September 1921

RGS:CIF

Nov. 10, 1921.

From: Navy Department.

To:

Howell J. Magruder, Flo., #1412566,  
1248 Harder St.,  
Springfield, Ohio.

SUBJECT: Disenrollment from Naval Reserve Force.

Enclosure: (A) Blank request for transfer to Volunteer Naval Reserve.  
(B) Blank acknowledgment.

1. Owing to the Congress having greatly reduced appropriations for the present fiscal year, the Department finds it necessary to materially reduce the expenditures for the pay of the Naval Reserve Force. The Department made a conservative estimate of about \$12,000,000 as necessary for the Reserve Force for this purpose. Congress appropriated only \$7,000,000. Notwithstanding the various economies already instituted, a considerable part of the \$7,000,000 appropriated has been already disbursed or obligated.

2. To keep within the appropriation for this purpose the Department finds it necessary to institute immediately a drastic reduction of the Naval Reserve Force.

3. The Department regrets being forced to adopt this course of action, and particularly to have to inform you that you are hereby disenrolled from the U. S. Naval Reserve Force from 30 September 1921.

4. The Department values greatly the services and cooperation of the patriotic men who form the Naval Reserve. It depends on them not only for service in a national emergency but also in large measure for disseminating a correct idea of the Navy and its activities through the country. The Department appreciates, furthermore, that the large majority of those in the Reserve Force serve not for money but for love of the country and the Service; therefore, it desires and would be greatly pleased if the members of the Reserve Force, realizing the unfortunate condition brought about by lack of funds, would transfer to or enroll in Class VI, the Volunteer Naval Reserve—and continue to serve with the Navy.

5. If you desire to transfer to Class VI (Volunteer Naval Reserve), it will be sufficient for you to signify your intention on the enclosed blank form. The Department will complete the transfer.

6. The Department avails itself of this opportunity to again express its commendation of the services rendered by you to the Navy and to your Country, which tended so greatly to the victory gained during the World War.

7. An honorable discharge will be mailed to you as soon as it can be prepared.

8. Please acknowledge receipt of this letter on attached form.

(Signed) EDWIN DENBY.

Countersigned:

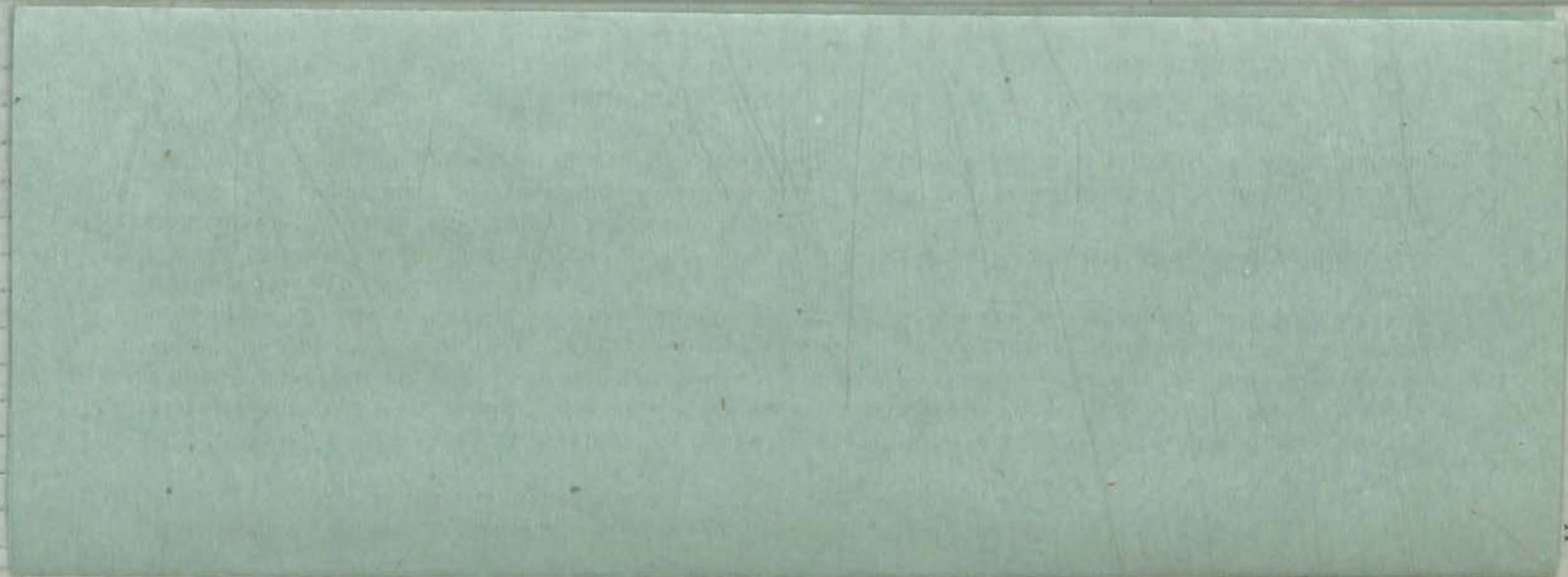
A.G. Berry, Jr., by direction.

Copy to—  
Navy Allotment Office  
Comptroller General of the United States  
Commandant, ..... Naval District  
File



DATE	MERITORIOUS CONDUCT WORTHY OF SPECIAL MENTION; OFFENSES AND PUNISHMENTS; ISSUE AND REVOCATION OF APPOINTMENTS; ADVANCEMENT OR REDUCTION IN RATING.	SIGNATURE OF COMMANDING OFFICER.
28		
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51  
52  
53





.....  
 (Surname first)

.....  
 (Christian name)

S.....

.....  
 (Place)

.....  
 (Date)

or the provisions of the act approved August 29, 1916, all officers and  
 of the Naval Reserve Force shall, when *actively employed*, be entitled to  
 me pay, allowances gratuities, and other emoluments as officers and  
 ed men of the naval service on active duty of corresponding rank.

er the provisions of the act approved August 22, 1912 and as modified  
 act approved August 29, 1916, relating to the payment of six months'  
 y the widow or children or dependent relative of any officer or enlisted  
 in the active list of the U. S. Navy U. S. Naval Reserve Force, or Ma-  
 orps who dies from wounds or disease not the result of his own mis-  
 act, I give below the name and address of my wife and the name and  
 as of each of my children.

.....  
 (Full name of wife; if not married, so state)

.....  
 (Address of wife)

.....  
 (Full name of child; if none, so state)

.....  
 (Address of child)

.....  
 (Full name of child)

.....  
 (Address of child)

.....  
 (Full name of child)

.....  
 (Address of child)

*in the event of my leaving no widow or child, or  
 their decease before payment is made, I then des-  
 ignate as my beneficiary under the said act the fol-  
 lowing dependent relative, my*

.....  
 (Relationship)

.....  
 (Name in full)

.....  
 (Address)

.....  
 on lines above state briefly wherein dependency consists, such as "allot-  
 ment registered," "monthly contributions by Government check," etc.)

See reverse side

In the event of the death of the above-mentioned dependent relative before payment is made, I designate as my beneficiary under said act the following dependent relative, my

(Relationship)
(Name in full)
(Address)
\*(State briefly wherein dependency consists)

I do solemnly swear (or affirm) that the stated and disclosed in the foregoing beneficiary are true to the best of my knowledge and belief

(Name)
(Rating) U. S. N.

Subscribed and sworn to before me, this day of, 191

[SEAL]

INSTRUCTIONS.

Two of this form are fastened in each record. When a man is... both forms will be executed; one removed from the service record and the other to remain in the record.

This form must be sworn to before an officer of the United States Marine Corps authorized to administer oaths, or before a notary public.

The full names and addresses of the beneficiaries should be carefully stated. If a married woman, her own Christian name should be given, that of her husband: thus, "Mrs. Anna May Smith," not "Mrs. John Smith."

New beneficiary slips should be filled out and forwarded to the Commandant of the Naval District to which the man is attached in all cases in which such action becomes necessary by reason of change in the status of the officer or man, or of his beneficiaries, due, for example, to marriage, birth of children, or the fact that a designated beneficiary should become dependent. In any event the payment will be made to the wife or children, if any, of the officer or enlisted men, whether designated or not.

(Surname first)
(Christian name)

(Place) (Date)

the provisions of the act approved August 29, 1916, all officers and enlisted men of the Naval Reserve Force shall, when actively employed, be entitled to the same pay, allowances, gratuities, and other emoluments as officers and men of the naval service on active duty of corresponding rank.

the provisions of the act approved August 22, 1912, and as modified by the act approved August 29, 1916, relating to the payment of six months' pay to the widow or children or dependent relative of any officer or enlisted man of the active list of the U. S. Navy, U. S. Naval Reserve Force, or Marine who dies from wounds or disease not the result of his own misconduct, I give below the name and address of my wife and the name and address of each of my children.

(Full name of wife; if not married, so state)

(Address of wife)

(Full name of child; if none, so state)

(Address of child)

(Full name of child)

(Address of child)

(Full name of child)

(Address of child)

In the event of my leaving no widow or child, or in the event of my death before payment is made, I then designate as my beneficiary under the said act the following dependent relative, my

(Relationship)

(Name in full)

(Address)

When above state briefly wherein dependency consists, such as "allotment pay," "monthly contributions by Government check," etc.)

See reverse side



Record of  
Allotments, Family Allowances  
and  
Insurance of Enlisted Men

Magruder, Howell Joshua

Full name—(Surname to left.)

Rate..... AS

~~U. S. Navy~~  
Naval Reserve Force Class. ✓  
~~National Naval Volunteers~~

Aug 17 1918  
Date of Enlistment.

UNIFORM GRATUITY

"Members of the Naval Reserve Force shall, upon reporting for active service for training during each period of enrollment, be credited with a uniform gratuity of \$50 for officers and \$30 for men.

"Upon reporting for active service in time of national emergency the uniform gratuity shall be for officers and \$60 for men, or the difference between these amounts and any amounts that may have been credited as a uniform gratuity during the current enlistment: *Provided*, That should any member of the Naval Reserve Force sever connections with the service without compulsion on the part of the Government at the expiration of his term of enrollment, the amount credited shall be deducted from any money that is or may become due him." (Act Aug. 29, 1916.)

U. S. Navy Recruiting Station, Cincinnati, Ohio

Aug 1 1918  
Date

To: Bureau of Navigation.  
1. This information is correct as shown by the records of ... Aug 1 1918

Lercy Brooks, Jr., U. S. ....  
Lieutenant, U. S. N. R. Commanding.

Magruder, Howell Joshua  
 Name in full—Surname to left

USMRP  
 Rate

Date of enlistment

### COMPULSORLOTMENT

Relation-ship	NAME	POST OFFICE ADDRESS			DATE OF BIRTH			Married? Enter "Yes" or "No"	REMARKS (Follow Instructions)
		No. and Street or Rural Route	Town or Village	State	M'th	D'y	Year		
Wife									
Child	none								
Child	none								
Child									
Child									
Divorced Wife							Remar'd? "Yes" or "No"	Amount Payable monthly by order court	
	none								

### VOLUNTARY LOTMENT

Relation-ship	NAME	POST OFFICE ADDRESS			Amount of my average monthly habitual contribution because of dependency	AMOUNT OF ALLOTMENT
		No. and Street or Rural Route	Town or Village	State		
	none				\$	

### RECORD OF FAMILY ALLOWANCES

Relation-ship	NAME	POST OFFICE ADDRESS			AMOUNT
		No. and Street or Rural Route	Town or Village	State	
	none				

### RECORD OF INSURANCE

Relation-ship	NAME	POST OFFICE ADDRESS			AMOUNT
		No. and Street or Rural Route	Town or Village	State	
	Mo. Hannah Lewis Magruder	1248 Warder	Springfield	Ohio	\$10,000.00

In case of emergency notify Hannah Lewis Magruder, 1248 Warder St., Springfield Ohio  
 Name Relationship Address

If no insurance, state whether eligible for insurance or not { Yes / No  
 Is mother living? { Yes / No } If living, is she a widow? { Yes / No  
 Is wife's mother living? { Yes / No } If living, is she a widow? { Yes / No

See Instructions back





N. Nav. 21.

DISPOSITION.

Place or vessel from which received, N. P. S. Pittsburgh Pa. Date, Sept 20, 1919

To what vessel transferred, Home. Where deserted and amount due or overpaid, \_\_\_\_\_

Where discharged and cause (exp. of enl., disability, etc.) } R. A. D.  
Where died, cause of death, where and when buried, } N. P. S. Pittsburgh Pa.

Cause of disrating. (In any case give date.) \_\_\_\_\_

Date of enlistment Aug 1., 1918 Term of enlistment 4 yrs.

Where enlisted Cincinnati Ohio. Citizenship U. S.

Name Magruder Howell J. Rating at date of transfer, ~~Dis., R., or D. D.~~ R. A. P. F. 1 C.

Rating at date of last roll \_\_\_\_\_ Number of C. S. C. \_\_\_\_\_