

NATIONAL PERSONNEL RECORDS CENTER

1 ARCHIVES DRIVE ST LOUIS, MO 63138-1002

[www.archives.gov](http://www.archives.gov)



December 12, 2012

RICHARD BURSCH  
13525 SE GLENWOOD ST  
PORTLAND, OR 97236-4983

**RE:           Veteran's Name: BURSCH, Charles Frederick**  
**SSN/SN:**  
**Request Number: 2-11209580122**

Dear Sir or Madam:

Thank you for contacting the National Personnel Records Center. We have received your payment for copy material for the veteran named above. Your photocopy(ies) is/are enclosed.

If you have questions or comments regarding this response, you may contact us at 314-801-0800 or by mail at the address shown in the letterhead above. If you contact us, please reference the Request Number listed above. If you are a veteran, or a deceased veteran's next of kin, please consider submitting your future requests online by visiting us at <http://vetrecs.archives.gov>.

Sincerely,

LILLIAN J. MCKINNEY  
Expert Archives Technician (1C)



**We Value Our  
Veterans' Privacy**

*Let us know if we have  
failed to protect it.*

Enclosure(s)



1-MRE456

NV01779008

BURSCH CHARLES F

001143373

RG 024

N. Nav. 153.

BONUS

114 33 73

114 33 73

BURSCH

CHARLES F

C. S. Certificate No.

USE LETTERS.	DATE.	RATE.	VESSEL
G	10-8-17	asea	Reddy Sta
T	10-13-17	asea	Seattle
T	11-15-17	asea	San Francisco
T	12-3-17	asea	Ro Norfolk
CR	1-1-18	F3	NTS Norfolk
T	1-25-18	F3	USS Illinois
T	3-6-18	F3	Ro Phila
T	3-13-18	F3	USS Henderson
CR	4-1-18	F2	USS Henderson
CR	10-1-18	F1	USS Henderson
T	7-16-19	F1	Ro Puget Sound

Special Order

Disc 7-23-19 F1 Ro Puget Sound

Navy Department

Bureau of Navigation

Washington, D. C.

APR 7 1921

Re-issued

as an

HONORABLE DISCHARGE in accordance

with the Act of Congress, approved

July 11, 1919

By Direction

Bursch (Last name) Charles (Christian name) Fredrick (Middle name) 149311 (Application number)

10 (Rank or rate) USM (Branch of service) 114-33-73 (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		OVERSEAS SERVICE		EXCEPTIONS	
FROM	TO	FROM	TO	FROM	TO
10-8-17	1-24-18	1-25-18	3-6-18		
3-7-18	3-12-18	3-13-18	6-30-19	DEC 1	3 1924

DATE OF APPLICATION 16 July 1924

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 Bursch Mrs Viola (Christian name) 10th Ave (Street) Seattle (City) Wash. (State) wife (Relationship)

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 Aug 29 1897 at Montreal Canada; that his address is 1418 1/2 10th Ave Seattle Wash.; and that the facts hereinbefore stated are the facts of record upon which Service Credit due veteran is based.

GOVERNMENT PRINTING OFFICE 2-18139

642RE

1.4		
		C
		C
30.3	.30	
8	.25	
8.9	.89	
7	.13	
6.0		
3.0	.89	
2.5	.7	
8.9	1.81	
1.3	.31	
36.5	3.65	
5.5	5.16	⊕
		T

OK ✓

2-13134

# APPLICATION FOR ADJUSTED COMPENSATION FOR SERVICE IN

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

Applicant  
will make no  
entries in  
this column

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:

Bursch Charles Friedrich  
(Last) (First) (Middle)

Service or  
Serial No. 58576  
114-33-73

2. Present address of veteran or dependent.

1418 1/2 10 Ave  
Seattle King Washington  
(City) (County) (State)

3. Date of birth of veteran

August 29 1897 at Montreal Canada  
(Month) (Day) (Year) (City) (State)

4. Original entry into World War service in the Army, Navy, Coast Guard, or Marine Corps

was as a Apprentice Seaman on Oct 8 1917  
(Rank or grade) (Month) (Day) (Year)  
at Gate Island San Francisco Cal

5. Date of separation

July 23 1919 at Bremerton Wash  
(Month) (Day) (Year)

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

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

U.S.N.T. San Francisco Cal	from Oct 17-1917	to Nov 15-1917
U.S.N.T. Norfolk Va	from Nov 21-1917	to Dec 1-1917
U.S.N.T. Johnston Va	from Dec 1-1917	to Jan 2-1918
U.S.S. Illinois	from Jan 2-1918	to Feb 1918
Receiving Ship Phila Pa	from Feb 1918	to March 13-1918
U.S.S. Henderson	from March 13-1918	to July 13-1919
	from	to
	from	to
	from	to
	from	to
	from	to

8. Character given on discharge certificate

Honorable Discharge

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)

DOES NOT APPLY

at

(Date)

(Name of port)

on return to United

States from oversea service.

NO 149317 JUL 29 24

None

14. I was commissioned or warrant officer performing home service not with troops and receiving commutation of quarters or of subsistence from None 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 None 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 July 16-1924 Signature of applicant Charles Fredrick Bursch  
(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 (~~her~~) for 15 years and 6 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)

John Thomas Whittig  
(First name) (Middle name) (Last name)

612-7th Ave Seattle Wn  
(Address)

(2)

Ralph Jay  
(First name) (Middle name) (Last name)

2029 Charles St, Seattle Wn.  
(Address)

Nav. Slip No. 2.  
(August, 1917.)

### CHANGE OF RATING

All enlisted men other than to rating of  
Chief Petty Officer.

U. S. S. *U. S. Naval Training Station*  
*Naval Operating Base, Norfolk, Va.*

.....  
Jan. 1, 1918.

Name.. Bursch, Chas. F. .....

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

C. S. C. No. ~~National Naval Volunteers.~~

When { Enlisted Oct. 8, 1917.  
          ~~Enrolled~~

Where { Enlisted Seattle, Wash.  
          ~~Enrolled~~

Rating changed to F3c.

Authority B70.

Remarks

J. H. DAYTON

*[Signature]*  
.....  
Captain, U. S. Navy,  
Commanding Officer.

Reports to be typewritten.  
See Instructions on back.

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. ....

*U. S. NAVAL TRAINING STATION  
SAN FRANCISCO, CALIF.*  
NOV 15 1917

Name. Bursch, Chas. F. .....

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

C. S. C. No. ~~National Naval Volunteers.~~

When { Enlisted Oct. 8, 1917  
          ~~Enrolled~~

Where { Enlisted  
          ~~Enrolled~~ Seattle

Transferred to U. S. NAVAL TRAINING STATION  
NORFOLK, VA.

Authority BuNav Tel 15101 Nov

Remarks

*[Signature]*  
.....  
LIEUTENANT COMMANDER, U. S. N.  
CAPTAIN OF THE YARD. *Commanding Officer.*

Reports to be typewritten.  
See Instructions on back.

### Instructions

This form shall be forwarded to Bureau of Navigation immediately when any change of rating is made other than to the rating of Chief Petty Officer (in which case a full transcript of current record should be forwarded on Form 1-B).

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.

Special recommendations for changes in rating should be accompanied by complete transcript of current record on Navigation Form 1-B.

Reports to be typewritten.

### 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. 2.  
(August, 1917.)

### CHANGE OF RATING

All enlisted men other than to rating of  
Chief Petty Officer.

U. S. S. HENDERSON.....

.....OCT. - 1. 1918......

Name. Bursch, Charles Frederick

Rate. F2c { U. S. Navy.  
Naval Reserve Force, Class X.  
National Naval Volunteers.

C. S. C. No.

When { Enlisted October 8, 1917  
Enrolled

Where { Enlisted Seattle, Wash.  
Enrolled

Rating changed to F. 1c

Authority Qual. by Exam. G. O. #63

Remarks

*TRB*

*W. R. Taylor*

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

Reports to be typewritten.  
See Instructions on back.

Nav. Slip No. 1  
(August, 1917)

### TRANSFER OF

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

U. S. S. Illinois

Base Two

6 March 1918

Name Bursch, Charles F.

Rate. F3c { U. S. Navy.  
Naval Reserve Force, Class C.  
National Naval Volunteers.

C. S. C. No.

When { Enlisted Oct. 8, 1917.  
Enrolled

Where { Enlisted Seattle, Wash.  
Enrolled

Transferred to: R.S. at Phila. (Gen. Det.)

Authority: CBF-1 let. 2771-760 of 12-7-17

Remarks: Engineering training.

*W. R. Taylor*

.....Captain, U. S. Navy,  
Commanding Officer. *W. R. Taylor*

Bursch, Charles Fredrick

Enlisted Oct 8, 1917

At Seattle, Wash

Classification No. 28 MO M  
32 MI I

N. Nav. Sp.

3-1334

Nav. Slip No. 2.

### Instructions

This form shall be forwarded to Bureau of Navigation immediately when any change of rating is made other than to the rating of Chief Petty Officer (in which case a full transcript of current record should be forwarded on Form 1-B).

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.

Special recommendations for changes in rating should be accompanied by complete transcript of current record on Navigation Form 1-B.

Reports to be typewritten.

Nav. Slip No. 1.  
August, 1917.

TRANSFER OF

All nonrated 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. ~~RECEIVING SHIP AT PHILADELPHIA~~

MAR 13 1918

Name Bursch, Charles F.

Rate F3C { U. S. Navy.  
~~Naval Reserve Force, Class~~  
~~National Naval Volunteers.~~

C. S. C. No.

When --- { Enlisted Oct. 6, 1917.  
~~Enrolled~~

Where --- { Enlisted Seattle, Wash.  
~~Enrolled~~

Transferred to U. S. S. HENDERSON.

Authority Bunav.

Remarks

A. F. LEIPER

COMMANDER, U. S. N. RETIRED

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 nonrated 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.

4-3777

Name \_\_\_\_\_

Rate \_\_\_\_\_  
     U. S. Navy  
     Naval Reserve Force  
     National Naval Volunteers

C. S. C. No. \_\_\_\_\_

When Enlisted \_\_\_\_\_  
     Enlisted \_\_\_\_\_  
     Discharged \_\_\_\_\_

Where Enlisted \_\_\_\_\_  
     Enlisted \_\_\_\_\_  
     Discharged \_\_\_\_\_

Transferred to \_\_\_\_\_  
     U. S. Navy  
     Naval Reserve Force  
     National Naval Volunteers

Authority \_\_\_\_\_

Remarks \_\_\_\_\_

U. S. Navy  
     Commanding Officer

Reports to be typewritten.  
 See instructions on back.

File with Jacket

N-640-RPS-ES-25

February 8, 1919

From: Bureau of Navigation  
To: Commanding Officer, U.S.S. Henderson.

Subject: Address of dependents of BURSCH, Charles Frederick  
F. lc, USN

Allotment Number 470796

1. Checks addressed to the Mother of above man  
(relation) BURSCH, Jennie

(name) 809 Marion Street, Seattle, Washn.  
(address) city state

have been returned to Bureau of War Risk Insurance on account of incorrect address.

2. If any other address can be furnished by the man, please communicate same to War Risk Insurance Bureau at once, sending copy of your letter to this Bureau. Refer to allotment number in reply. If above man has been transferred, forward this letter to his new ship or station.

3. If no other address can be furnished by the man, advise this Bureau to that effect.

By direction.

USN

EURSCH, Charles F.

U.S.S. HENDERSON

F10 1917 10 8 REC 3/13/18

Rec. Ship at Phila.

(A-7)

**BURSCH, Charles Frederick**  
Name in full—Surname to left

**F.2c**  
Rate

**October 8, 1917**  
Date of enlistment

**410.**

**COMPULSORY ALLOTMENT** Pay per month **\$41.00**

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	Month	Day	Year		
Wife	NONE								
Child	NONE								
Child									
Child									
Child									
Divorced Wife	NONE							Remarried? "Yes" or "No"	
								Amount payable monthly by order of 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		
Mother	Jennie Bursch,	809 Marion St.,			\$35.00	\$15.00
		Seattle, Wash.				

### RECORD OF FAMILY ALLOWANCES

Relation-ship	NAME	POST OFFICE ADDRESS			AMOUNT
		No. and Street or Rural Route	City, Town or Post Office	State	
Mother	Jennie Bursch,	809 Marion St.,			
		Seattle, Wash.			

### RECORD OF INSURANCE

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

In case of emergency notify Mrs. Jennie Bursch, Mother, 809 Marion St.,  
Name Relationship Address  
Seattle, Wash.

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

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

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

(See Instructions on Back.)

## 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.

Record of  
Allotments, Family Allowances  
and  
Insurance of Enlisted Men

BURSCH, Charles Frederick

Full name—(Surname to left.)

Rate F.2c ☒ U. S. Navy  
☒ Naval Reserve Force Class  
☒ National Naval Volunteers

October 8, 1917

Date of Enlistment.

U. S.S. HENDERSON

June 20, 1918.

Date

To: Bureau of Navigation.

I: This information is correct as shown by  
the records of Charles F. Bursch.

G. W. STEELE Commander,  
U. S. NAVY.

Commanding.

roll # 410 <sup>1.</sup> Chas. F. <sup>F. 2c</sup> <sup>Oct. 8, 1917.</sup> <sup>Rate</sup> <sup>Pay per month \$11.00</sup>

## 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	Month	Day	Year		
Wife	None								
Child	None								
Child									
Child									
Child									
Divorced Wife	None							Remarried? "Yes" or "No"	Amount payable monthly by order of NO amt

## 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		
Mother	None					\$

## RECORD OF FAMILY ALLOWANCES

Relation-ship	NAME	POST OFFICE ADDRESS			AMOUNT
		No. and Street or Rural Route	City, Town or Post Office	State	

## RECORD OF INSURANCE

Relation-ship	NAME	POST OFFICE ADDRESS			AMOUNT
		No. and Street or Rural Route	City, Town or Post Office	State	
Mother	Jennie Bursch,	808 Marion St.	Seattle, Wash.		\$5,000

In case of emergency notify Jennie Bursch, Mother, 809 Marion St.,  
Name Relationship Address  
Seattle, Wash.

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.)

## 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.

Record of  
Allotments, Family Allowances  
and  
Insurance of Enlisted Men

Bürsch, Chas. F.

Full name—(Surname to left.)

Rate F.2c

U. S. Navy

~~Navy Reserve Force~~  
~~National Naval Volunteers~~

October 8, 1917.

Date of Enlistment.

U. S. S. Henderson,

April 10, 1918.

Date

To: Bureau of Navigation.

i. This information is correct as shown by  
the records of Chas. F. Bürsch,

G. W. STEELE

Comdr. U. S. Navy

Commanding.

March 31, 1919

To: Bureau of War Risk Insurance, Change of  
Address Section, Old Emergency Hospital,  
Washington, D.C.

Subject; BURSCH, Charles Frederick (1143373) F. 1 c, USN.  
Regarding address of dependents.

Enclosure: (a) Bureau's letter of February 8, 1919.  
Forwarded, inviting attention to the above  
enclosure.

By direction.

-----n-----

Correct address: Jennie Bursch,  
809 Marion St.,  
Seattle, Washn.

USN  
BURSON, Charles F.  
USN HENDERSON

114-32-73 F10 1917 10 8 TRAN 7/16/19

JUL 22 1919

(2-1)

Rec. Ship at  
Pugget Sound, Wash  
for Sect. Ord.  
Disc. Accord-  
ance AMNAV  
178.

(Full name, surname to right.)

1035

### PROFESSIONAL QUALIFICATIONS.

CONDUCT.

WORTHY OF SPECIAL MENTION.

## PUNISHMENTS.

OFFENSES OR CAUSE OF  
DISRAILING.

(Note the date of appointments and change in rating, and dates between which duties are performed which require special compensation.)

04-2726

# BUREAU OF NAVIGATION.

NAVY DEPARTMENT.

191

U. S. S. *Albatross*  
Service No. 114-33-73

Name *BURSCH Charles F.*

Enlisted *8 Oct. 1917.*

C. S. C. No. *1*

*Discharge, desertion, or death.*

Transferred to *Rec. Ship at*

Date *Jul 16 1919*

Authority *Rec. Station, Oct 11, 1919.*

Recommended for *1* appointment as *1*

Certified to be a true copy.

*W. H. H. H.*  
(Executive Officer.) U. S. *Albatross*

Forwarded approved:

*W. H. H. H.*  
(Commanding Officer.) U. S. *Albatross*

From: BUREAU OF NAVIGATION.

To:

Approved:

By direction.

U. S. S.

Given an appointment

From

Authority

(Executive Officer.)

U. S. *Albatross*

(Commanding Officer.)

U. S. *Albatross*

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 launch, signman (first, second, or third class), tailor, tailor's helper, captain of hold, jack of the dust, lamp lighter, messman, submarine boat duty, mail clerk, assistant mail clerk.

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

Discharged	at	on account
Deserted		
Died		
of		
this	day of	(Char. of dis.)
Turnished {	Travel allowance	to
Total cost, \$	Gunnery record, Yes or No	(Name of place.)
Gun captain		(Erase one.)
Gun pointer		(Caliber of gun.)
Class		(Insert H, I, L, or S, with date of latest qual'n.)
Is	physically qualified for reenlistment.	
Is	recommended for reenlistment.	
P. O. address after discharge		

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 I-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 I-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 I-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 I-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.

NAVY DEPARTMENT  
BUREAU OF NAVIGATION  
WASHINGTON, D. C.

26 March, 1921  
To: Charles F. Bursch  
537 First Ave. S.  
Seattle, Wash.  
For:

The Bureau forwards attached honorable discharge button.  
Please acknowledge receipt below and return to this Bureau.

THOMAS WASHINGTON  
Chief of Bureau.

Seattle, Wash.  
March 31, 1921  
TO THE BUREAU OF NAVIGATION,  
Navy Department,  
Washington, D. C.

I have this day received honorable discharge button above mentioned.

Charles F. Bursch

1000 87 115

BURSCH, Charles Frederick 1143373. Flc 1917 Ocgt. 8 Spec. 7-23-19 809 Marian St.  
R.S. AT N.Y.P.S. WASH. Ord. Disc. Seattle, Wn.  
AUG 15 1919 (2-11)

BURSCH, Charles Frederick 1143373 Flc 1917 Oct. 8 Rec. 7-21-19 USS Henders  
R.S. AT N.Y.P.S. WASH. USN

AUG 15 1919

April 3, 1919

To: Bureau of War Risk Insurance, Change of  
Address Section, Old Emergency Hospital,  
Washington, D.C.

Subject: BURSCH, Charles Frederick (1143373) F.1c, USN.  
~~regarding address of dependents.~~

Enclosure: (a) Bureau's letter of February 8, 1919.  
Forwarded, inviting attention to the above  
enclosure.

By direction,

-----

Nav. Slip No. 2.  
(August, 1917.)

### CHANGE OF RATING

All enlisted men other than to rating of Chief Petty Officer.

U. S. S. HENDERSON

U. S. S. ....

APR 1 - 1918

Name. BURSCH, Charles F.

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

C. S. C. No. \_\_\_\_\_

When } Enlisted October 8, 1917  
      } ~~Enrolled~~

Where } Enlisted Seattle, Wash.  
          } ~~Enrolled~~

Rating changed to Fireman 2c

Authority Qual.by Exam.G.O.#63

Remarks

K.B.

Geo Steele Jr.

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

Reports to be typewritten.  
See Instructions on back.

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. . . . . 1 2 3 4 5 6 7 8 9 10 11 12 13 14 15 16 17 18 19 20 21 22 23 24 25 26 27 28 29 30 31 32 33 34 35 36 37 38 39 40 41 42 43 44 45 46 47 48 49 50 51 52 53 54 55 56 57 58 59 60 61 62 63 64 65 66 67 68 69 70 71 72 73 74 75 76 77 78 79 80 81 82 83 84 85 86 87 88 89 90 91 92 93 94 95 96 97 98 99 100 101 102 103 104 105 106 107 108 109 110 111 112 113 114 115 116 117 118 119 120 121 122 123 124 125 126 127 128 129 130 131 132 133 134 135 136 137 138 139 140 141 142 143 144 145 146 147 148 149 150 151 152 153 154 155 156 157 158 159 160 161 162 163 164 165 166 167 168 169 170 171 172 173 174 175 176 177 178 179 180 181 182 183 184 185 186 187 188 189 190 191 192 193 194 195 196 197 198 199 200 201 202 203 204 205 206 207 208 209 210 211 212 213 214 215 216 217 218 219 220 221 222 223 224 225 226 227 228 229 230 231 232 233 234 235 236 237 238 239 240 241 242 243 244 245 246 247 248 249 250 251 252 253 254 255 256 257 258 259 260 261 262 263 264 265 266 267 268 269 270 271 272 273 274 275 276 277 278 279 280 281 282 283 284 285 286 287 288 289 290 291 292 293 294 295 296 297 298 299 300 301 302 303 304 305 306 307 308 309 310 311 312 313 314 315 316 317 318 319 320 321 322 323 324 325 326 327 328 329 330 331 332 333 334 335 336 337 338 339 340 341 342 343 344 345 346 347 348 349 350 351 352 353 354 355 356 357 358 359 360 361 362 363 364 365 366 367 368 369 370 371 372 373 374 375 376 377 378 379 380 381 382 383 384 385 386 387 388 389 390 391 392 393 394 395 396 397 398 399 400 401 402 403 404 405 406 407 408 409 410 411 412 413 414 415 416 417 418 419 420 421 422 423 424 425 426 427 428 429 430 431 432 433 434 435 436 437 438 439 440 441 442 443 444 445 446 447 448 449 450 451 452 453 454 455 456 457 458 459 460 461 462 463 464 465 466</

3 DEC 1947

Name. Bursch, Charles F......

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

C. S. C. No.

When } Enlisted 10-8-17.  
           } ~~Enrolled~~

Where } Enlisted Seattle, Wash.  
 } ~~Enrolled~~

Transferred to Naval Operating Base  
Hampton Roads, Va.

Authority BO.

Remarks

**RECEIVED**

CAPTAIN

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

Reports to be typewritten.  
See Instructions on back.

**Instructions**

This form shall be forwarded to Bureau of Navigation immediately when any change of rating is made other than to the rating of Chief Petty Officer (in which case a full transcript of current record should be forwarded on Form 1-B).

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.

Special recommendations for changes in rating should be accompanied by complete transcript of current record on Navigation Form 1-B.

Reports to be typewritten.

**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.



# BUREAU OF NAVIGATION, NAVY DEPARTMENT,

Washington, 26 March 1921.

The Chief of Bureau directs me to state the Records of this Bureau show that Charles F. Burson, 1143373 enlisted October 8, 1917 and was discharged from the U. S. Naval Service July 25, 1919, from Receiving Ship at Puget Sound, as Fireman, first class, with honorable discharge, termination of hostilities.

## DESCRIPTIVE LIST.

PLACE OF BIRTH.	DATE OF BIRTH.	TRADE.	EYES.	HAIR.	COMPLEXION.	HEIGHT.		WEIGHT.
						Feet.	Inches.	
Montreal, Cana.	Aug. 29, 1897	Auto driver	Blue	Brown	Ruddy	5	9	143

Personal characteristics, marks, etc., M. 1 neck; s 1" front r mid finger; p inner r petella; s base. 1 thumb; m upper dorsal spine; m r scapula.

This information is given upon the statement that the original discharge has been lost or destroyed, and upon the condition that it shall not be accepted as a voucher for the payment of any claim against the United States for pay, bounty, or other allowance.

Rating best qualified to fill:

F. 1c

O. B. HATCH, JR.,  
Lt. Commander, USNRF.

VETERANS' WELFARE COMMISSION  
OF THE  
STATE OF WASHINGTON

JOHN H. POWELL, CHAIRMAN  
MILLER FREEMAN, SECRETARY  
FREDERIC W. KEATOR  
GEORGE E. TUTTLE  
W. L. LEMON  
BERNARD R. HODGE, DIRECTOR  
DAVID F. TILLEY, ASSOCIATE DIRECTOR



FORWARDED  
First  
1921

STATE HEADQUARTERS  
5110 THE ARCADE BUILDING  
MAIN 2286  
SEATTLE, WASHINGTON

Bureau of Navigation,  
Navy Department,  
Washington, D. C.,

Re:- Charles Frederick Bursch,  
Fireman 1st class, USN  
c/o Albee Transfer Co.,  
537 First Avenue South,  
Seattle, Washington,

Gentlemen:-

We are enclosing herewith for the above  
named man, his application for a certificate in lieu  
of discharge, and we would ask that you kindly issue  
this certificate, and forward to the man in question  
at the above address.

Yours very truly,

VETERANS' WELFARE COMMISSION,

By *Frederick J. Jaff*  
Local Department

FT:RB