

I have had the Shipping Articles fully explained to me, understand them, and certify that no promise of any kind has been made to me concerning assignment to duty or promotion during my enlistment.

I agree to submit to the treatment for the prevention of Typhoid (*Typhoid Prophylaxis*).

John Andrew Baker
(Signature of Recruit.)

Fact of citizenship
investigated and
found satisfactory.

E. Bisset

Certificate of Enlistment

Card No. *41704* furnished

Nelson Thomas
Lieutenant, U.S.N.R.

Letters to be used in the columns where required:

- T.—for transfer.
- Dis.—for discharge.
- R.—for desertion.
- F.—for furlough.
- D. D.—for dead.
- E. E.—for extension of enlistment.
- C. R.—for change of rating.
- T. N. R.—for transfer to Fleet Naval Reserve.

4—2548

Credited to *11* Cong. Dist., State of *Mo*
Enlistments, *1917* U. S. NAVY RECRUITING STATION
Serial No. *761* at *ST. LOUIS, MO.*

SERVICE RECORD

Name, *Becker John Andrew*
(Full name, surname to the left.)
Rate, *Private* Enlisted *May 7, 1917*
at *NAVY RECRUITING STATION, ST. LOUIS, MO.* to serve
four years from date,
during minority, until *May 6, 1921*
Previous naval service, about _____ years.
First enlisted _____, 1____
as _____ Trade _____
Last discharged _____, 1____, at _____
from the U. S. S. _____, as _____
with _____
(Character of discharge.)
Served apprenticeship _____ C. S. C. No. _____
(Yes or no.)
Holds G. C. medals, _____
(Dated, year only.)
Citizenship, *U. S.* Certified _____
(Yes or no.)
Place of birth, *St. Louis, Mo*
Date of birth, *Aug 25, 1895*
Home address, *241 Patton St*
(Street and number)
City, *St. Louis, Mo* State, _____
Name and address of next of kin, *Father, Frank Becker*
4013 West 1st St St Louis, Mo

Pay at date of enlistment:
Pay per month, pay table, _____ \$ *16.00*
Additional for continuous service, _____
Additional for G. C. medals, _____
Dated, _____
(Year only.)
Additional for certificate of graduation, _____
Additional for qualified C. P. O., _____
Additional for U. S. citizen reenlisting, _____
Additional ten per cent, _____ *1.60*
Total pay per month, _____ *17.60*

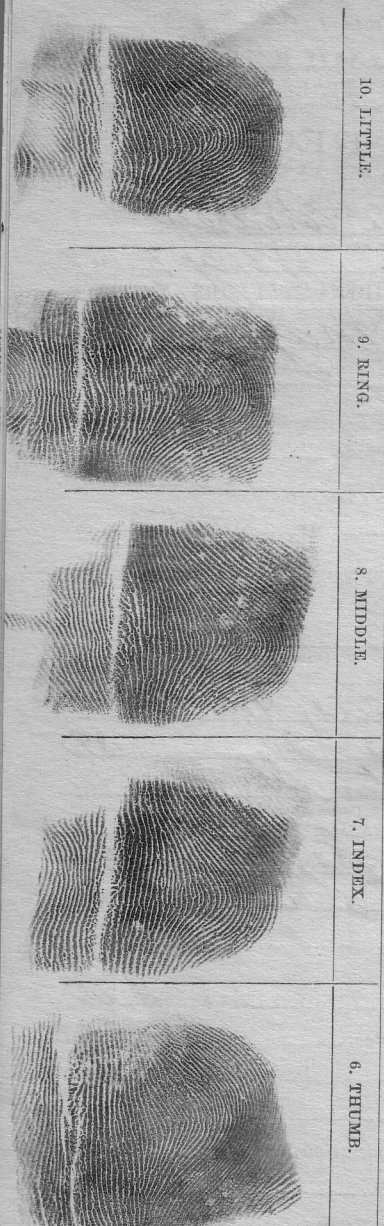
E. Bisset
Commander U. S. N. (Retd.) U. S. N.,
Recruiting Officer.

Approved: *E. Bisset*
Commander U. S. N. (Retd.) U. S. N.,
Commanding U. S. NAVY RECRUITING STATION.

(The above to be executed and signed at the rendezvous or on board the vessel where the man is enlisted.)

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To be completed when



LEFT HAND.

LEFT HAND.

Plain imprint of four fingers taken simultaneously.

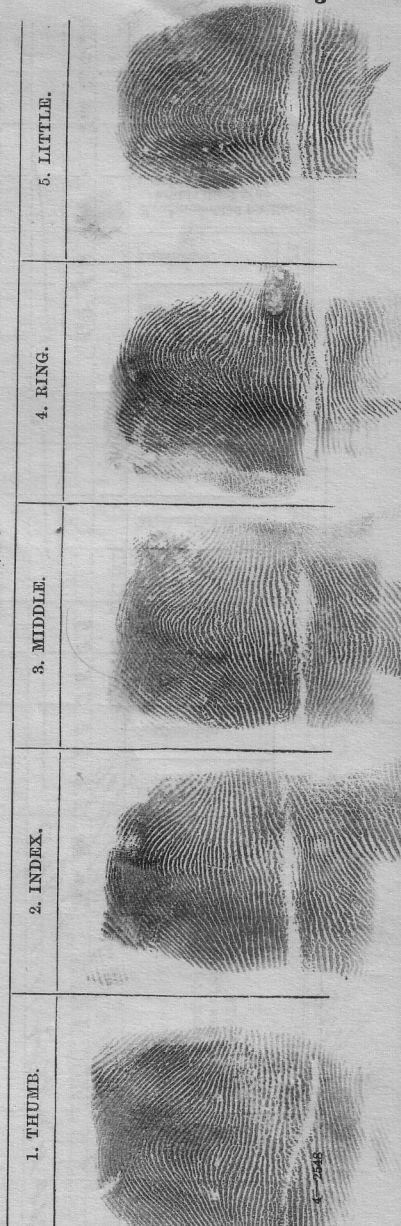
DESCRIPTIVE LIST.

Age, 21 years 8 months. Height, 5 feet 7 1/2 inches.
 Weight, 157 lbs. Eyes, Bl. G Hair, B. Br
 Complexion, Ruddy Personal characteristics, marks, etc.,
Scar arm; A lower lip; 2 l palm;

a 2 is taken.

John Andrew Baker (Signature of recruit, in his own handwriting, surname to the right.)
John Andrew Baker (Signature of Medical Officer taking information at date of enlistment.)

RIGHT HAND.



RIGHT HAND.

Plain imprint of four fingers taken simultaneously.

Name

Becker

(Surname first.)

John Andrew

(Christian name.)

U. S. NAVY RECRUITING STATION

ST. LOUIS, MO.

(Place.)

May 7/1917

(Date.)

Under the provisions of the act approved August 22, 1912, relating to the payment of six months' pay (less deductions to defray expenses of interment) to the widow or children or dependent relative of an officer or enlisted man on the active list of the U. S. Navy or Marine Corps who died 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:

NO WIFE

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

(Address of wife.)

NO CHILD

(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.)

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, my

Father

(Relationship.)

Frank Becker

(Name in full.)

4012 West Ave St Louis Mo

(Address.)

NOT DEPENDENT

(On lines above state briefly wherein dependency consists, such as "allotments registered," "monthly contributions by Government check," etc.)

(SEE REVERSE SIDE.)

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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, my

Brother
(Relationship.)
Harry Becker
(Name in full)
412 West Ave St Louis, Mo
(Address.)

NOT DEPENDENT

*State briefly wherein dependency consists.

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

John Andrew Becker
(Name.)
APPRENTICE SEAMAN, U. S. Navy.
(Rating.)

Subscribed and sworn to before me, this

7 day of *May*, 191*7*

[SEAL.]

Ed Bisset
Commander U. S. N. (Retd.)

Acting Recruiting Officer
(It must affirmatively appear hereon that the officer before whom the above oath was made had authority to administer oaths.)

INSTRUCTIONS.

This form must be sworn to before an officer of the United States Navy or 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, not that of her husband; thus: "Mrs. Anna May Smith," not "Mrs. John Smith."

New beneficiary slips should be filled out and forwarded to the Bureau of Navigation or the Commandant of the Marine Corps in all cases in which such action becomes necessary, by reason of a change in the status of the officer or enlisted man, or of his beneficiaries, due, for example, to marriage, death, birth of children, or the fact that a designated beneficiary should cease to be dependent. In any event payment will be made to the widow or children, if any, of the officer or enlisted man whether designated or not.