

6'

6'

5'9"

5'9"

5'6"

5'6"

5'3"

5'3"

5'

5'

4'9"

4'9"

8

6

3

1

7

9

7

5

1858

MIDWAY (SC)

A A M O D T
(Surname)

Carroll Ordell
(Christian name)

863 17 97 U S
(Service number) (Citizenship)

U.S. USN-I 22 Sept. 1944
(Enlisted as) (Date) (Class)

U. S. N. R. S., Minneapolis, Minn.
(Place of enlistment, assignment, or transfer)

Years Months Days
(Previous Naval Service)

REGULAR NAVY
AND
NAVAL RESERVE
SERVICE RECORD

C. S. C. No.

(Discharged as)

(Date discharged)

(Character of discharge)

(Place of discharge)

Honorable Discharge Certificate

No. Issued (Date)

(Permanent address after discharge)

117268-0000 Personal

863 17 97 AAMODT, Carroll Ordell
(SERVICE NUMBER) (SURNAME) (FIRST NAME) (MIDDLE NAME)

A.S. USN ☐ RET ☐ USNR ☒ SV-6 USN(1) ☐
(RATING) (CLASS) (CSC NO.)

USNTC GREAT LAKES, ILL.

(SHIP OR STATION)

☒ First Enlisted } 9-22-44 { ☒ for 2 years
☐ Reenlisted } (DATE) { ☐ for duration
☐ Inducted } ☐ during minority

Accepted for enlistment or induction at SSB#1 Northwood, Iowa
No St. Add. (PLACE)

Reported for active duty 9-22-44 (DATE) (Fill in this section in connection with cases of naval reservists and retired enlisted men only.)
Place from which ordered to active duty Northwood, Iowa

Last previously enlisted on _____ (DATE) for _____ years,

or during minority until _____ (DATE) and was discharged on _____

_____ (DATE) with _____ (CHARACTER OF AND REASON FOR DISCHARGE)

as _____ Completed _____ years service on _____
(RATING) (NUMBER) (DATE)

If last enlistment NOT extended, or extended only 1 year, net time served in enlistment and extension if any. (YEARS) (MONTHS) (DAYS)

If last enlistment extended 2 or more years, net time served in extension only. (YEARS) (MONTHS) (DAYS)

Time (was ☐) (was NOT ☐) lost during above enlistment or extension because of AWOL, AOL or NPDL.
Permission (was ☐) (was NOT ☐) granted to make up time lost.

Other Service (Act 6-16-42) (YEARS) (MONTHS) (DAYS)

Net Service completed on date of last discharge. (YEARS) (MONTHS) (DAYS)

Naval Service to include date of last discharge. (YEARS) (MONTHS) (DAYS)

Medals awarded:

Deserter or Straggler from _____ (SHIP OR STATION)

on or about _____ (DATE), Take up the account as of _____ (DATE)

date following date of return to Naval Jurisdiction.

(ALL SECTIONS WHICH DO NOT APPLY TO THIS ORDER SHALL BE LINED OUT BEFORE SIGNATURE IS AFFIXED).

PART 1-FOR SERVICE RECORD

Citizenship U.S.
 Place of birth Joice, Iowa
 Date of birth 5 March 1926
 Home address Joice, Iowa

Next of kin Carl Oscar Aamodt
 Relationship Father
 Address Same
 Education 12th

Reason for enlistment _____

Branch of service for which best suited _____

Do you expect to make the Navy a career? _____

Trade schools attended _____

Special duties for which qualified _____

Language qualifications _____

Credited to Congressional District 3rd











State of Iowa

I certify that no promise of any kind concerning assignment to duty or promotion during this enlistment has been made.

(SIGNATURE AND RANK OF RECRUITING OFFICER)

L. L. WOLLETT, Lt. (jg), USN (Ret.)
 (STATION)
 Asst. CMC, NRS, Minneapolis, Minn.

NAVPERS-601 (9-43)

| RIGHT HAND | | | LEFT HAND | | |
|--|--|---|---|---|--|
| 1. Thumb | 2. Index | 3. Middle | 1. Thumb | 2. Index | 3. Middle |
|  |  |  |  |  |  |
| 4. Ring | 5. Little | | 4. Ring | 5. Little | |
|  |  | |  |  | |

IDENTIFICATION RECORD

16-31880-2

DATE AND NATURE OF ANY WAIVER

✓ Carroll Orrell Jamoet
(Signature of recruit, in his own handwriting)

(Signature and rank of Medical Officer, etc.)
L. J. MONTSON
Lieut. MC-Y(S) USNR

AUTHORIZED LEAVE

NAVFERS-601 (9-43,

Nonperformance of duty because imprisoned; both while in arrest resulting in court-martial sentence and while serving said sentence.

On account of sickness due to own misconduct.
Unauthorized leave.

[illegible]

MODT. Carroll Ordell

Service No. 863 17 97

(Place) 22 Sept. 1944 (Date)

None

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

(Address of wife)

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

(Date of birth)

(Address of child)

(Full name of child)

(Date of birth)

(Address of child)

(Full name of child)

(Date of birth)

(Address of child)

In the event that payment cannot be made to the above-named relative, I then designate as my beneficiary under the said act the following relative, my

father

(Relationship)

Carl Oscar Aamodt

(Name in full)

Joice, Iowa

(Address)

If the beneficiary named above is your father, mother, brother, or sister, you need not fill in these three lines. If the beneficiary is a more distant relative, such as a grandparent, state briefly wherein dependency exists, such as "allotments registered," "monthly contributions Government check," indicating amounts and regularity thereof.

[OVER]

16-22321-3

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

mother

(Relationship)

Clara Marie Aamodt

(Name in full)

Joice, Iowa

(Address)

* In case of relatives more distant than your parent or brother or sister, state briefly wherein dependency exists, indicating amounts and regularity thereof.

I CERTIFY that I will inform my Commanding Officer immediately of any changes in marital status, or conditions of dependency, or of voluntary occupancy of public quarters by my dependents.

I CERTIFY that there has been no change in condition of dependency between _____ and _____

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

Carroll Ordell Aamodt
(Name)

A.S. USN-I
(Rank or rating)

U.S. Navy,
Marine Corps.

Subscribed and sworn to before me this 22nd day of September, 1944, I having 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 must be stated carefully. If a married woman, her own given name should be stated; thus "Mrs. Anna May Smith," not "Mrs. John Smith."

This slip shall be made out and handled as follows:

Enlisted men, Navy: In duplicate; one copy to Bureau of Naval Personnel, one copy secured inside service record. In cases of men entitled to money allowances for quarters for enlisted men with dependents, to additional copies, bearing the required certificate, to the Disbursing Officer.

Enlisted men, Marine Corps: In duplicate; one copy to Commanding Officer, one copy secured inside service record.

New beneficiary slips shall be executed and forwarded as above in cases of change in status of the grantor or in that of his or her beneficiaries.

In any event, payment will be made to the widow or children, if any, whether designated or not.

16-22321-2

Name AAMODT, Carroll Ordell

(Name in Full, Surname to the Left)

863 17 97

Rate A.S., USN-I

(Service No.)

22 Sept. 1944

Date Reported Aboard:

USNRS, Minneapolis, Minnesota

(Present Ship or Station)

Inducted

(Ship or Station Received From)

22 Sept. 1944

Inducted into the U.S. Navy as A.S., USN-I, this date, in accordance with Selective Training and Service Act of 1940, as amended.

Indicated willingness to serve in the United States Navy and was actually inducted therein in accordance with the established Navy induction procedure.

22 Sept. 1944 Voluntarily enlisted as A.S., Class V-6, U.S. Naval Reserve, SV, this date to serve for a period of two (2) years. BNP form 603 (Shipping Articles) executed. Placed on active duty with pay and transferred for recruit training.

DID NOT apply for Family Allowance.

FAILED EDDY TEST

Date Transferred 22 Sept. 1944

To NavTraCen. Great Lakes, Ill.

L.E. Wollett

L.E. WOLLETT Lt(jg) USN(Ret).

Date Received Aboard:

23 SEP 1944

USNTC GREAT LAKES ILLINOIS

(New Ship or Station)

USNRS MINNEAPOLIS MINN.

(Last Ship or Station)

L.E.M. EMMET, Captain, USN

Signature and Rank of Commanding Officer.

ORIGINAL
FOR SERVICE RECORD

AAMODT, Carroll Ordell

Signature and Rank of Commanding Officer

Executive Officer.

PROFESSIONAL QUALIFICATIONS, CONDUCT, AND MARKS

PROFESSIONAL QUALIFICATIONS, CONDUCT, AND MARKS

| Date | Rate | Proficiency in rating | Seamanship | Mechanical ability | Ability as leader of men | Special Qualifications or Special Detail | Conduct | Initials of Executive Officer |
|----------|------|-----------------------|------------|--------------------|--------------------------|--|---------|-------------------------------|
| 12-21-44 | S2c | | | | | TRANSFERRED | 4.0 | WDH |

C. O. Order No. _____

MISCONDUCT REPORT

3-17-97 AAMODT, Carroll Ordell

(FOR SERVICE NUMBER) (SURNAME) (FIRST NAME) (MIDDLE NAME)

USN ☐ RET ☐ USNR ☒ V-6 USN(I) ☐

(CLASS)

S SABLE, Chicago, Illinois

(SHIP OR STATION TO WHICH PATIENT IS ATTACHED)

The above named individual has been found incapacitated for duty

12-24-44 to 12-24-44 as a

(DATE OF ADMISSION) (DATE OF DISCHARGE)

At of his own: Intemperate use of drugs

Intemperate use of alcoholic liquors

Other misconduct

☒

Case of venereal disease, initial symptom or lesion covered by report appeared 12-23-44 (See G. O. 20 Par. 4)

(DATE)

Original (duplicate) C. W. STERTZBACH, Lt (MC) USNR

(NAME AND SIGNATURE OF MEDICAL OFFICER)

USS SABLE, Chicago, Illinois

(SHIP OR STATION OF MEDICAL OFFICER)

The Disbursing Officer is directed to adjust the pay account of above named individual, unless, in case of venereal disease, initial symptom or lesion appeared more than one year prior to date of admission for treatment.

Original (duplicate) H. H. CROW, Commander, USNR

(NAME AND SIGNATURE)

Executive Officer (See Art. 2025(2) N. R.)

PART 1 - FOR SERVICE RECORD

Name AAMODT, Carroll O.
(Name in Full, Surname to the Left)

863 17 97 Rate S2c SV6 USNR
(Service No.)

Date Reported Aboard: 21 December 1944

U.S.S. SABLE
(Present Ship or Station)

USNTC, Great Lakes, Illinois
(Ship or Station Received From)

19 January 1945

Completed four (4) weeks temporary duty under instruction in arresting gear and flight Deck procedure.

Transferred this date to the Receiving Station, Norfolk, Virginia, for further transfer to the U.S.S. CHARGER (CVE-30) for duty.

Art. D-7008 BuPers Manual Complied with.

Date Transferred 19 January 1945

To RS NORVA FFT U.S.S. CHARGER (CVE30)

H.H. CROW, USNR
Signature and Rank of Officer Authorized to Sign

Date Received Aboard: 20 Jan. 1945

USS CHARGER (CVE30)
(New Ship or Station)

USS SABLE VIA RS, NOB, NORVA.

By direction of Commanding Officer
(Last Ship or Station)

G. L. FOSTER, Ship's Clerk, USN.
Signature and Rank of Officer Authorized to Sign

ORIGINAL
FOR SERVICE RECORD

[illegible]

Name AAMODT, Carroll Ordell
(Name in Full, Surname to the Left)

863 17 97 Rate S2c SVV6
(Service No.)

Date Reported Aboard: 20 January 1945

U.S.S. CHARGER (CVE 30)
(Present Ship or Station)

RS, NOB, NORVA.
(Ship or Station Received From)

Received instructions and qualified as a member of an arresting gear crew.

19 March 1945: Transferred this date to the R/S, Norfolk, Va. FFT to the U.S.S. ANTIETAM (CV36) for temp. duty under instr. for approx. five (5) weeks. Upon completion of temp. duty under instr. transfer to CASU 21, NAS, Norfolk, Va. for temp. duty under instr. and for further transfer to the U.S.S. MIDWAY (CVB41) for duty when comm.

AUTH: ComAirLant Serial 2989-AFA
of 7 March 1945.

REC. STA., N.O.B., NORFOLK, VA.

REPORTED 19 MAR 1945

TRANSFERRED MAR 20 1945

Date Transferred 19 March 1945

To R/S, Norfolk, Va. FFT
By direction of Commanding Off.

G. L. FOSTER, SHIP'S CLK., USN.

Date Received Aboard: 20 March 1945

U.S.S. ANTIETAM (CV-36)
(New Ship or Station)

U.S.S. CHARGER (CVE-30)
(Last Ship or Station)

J. R. TAGUE, CAPT., USN (ELR)
Signature and Rank of Commanding Officer.

ORIGINAL
FOR SERVICE RECORD

PROFESSIONAL QUALIFICATIONS, CONDUCT, AND MARKS

| | | | | | | | | | | | | | | | |
|-------------------------------|--------|-----|---------|---|-------------|-------------------|-------------------|--------------------|------------|-----------------------|------|-----|------|---------|---|
| Initials of Executive Officer | G.L.F. | 4.0 | CONDUCT | Special Qualification or Special Detail | TRANSFERRED | UNDER INSTRUCTION | Ability as leader | Mechanical ability | Seamanship | Proficiency in rating | Rate | S2c | Date | 3/19/45 | Final average on Disch., Death, Desertion, Ret., Trans. F. R. |
| | | | | | | | | | | | | | | | |

Name AAMODT, Carroll Ordell
(Name in Full, Surname to the Left)

863 17 97 Rate S2c V6S
(Service No.)

Date Reported Aboard: 20 March 1945

U.S.S. ANTIETAM (CV-36)

(Present Ship or Station)

U.S.S. CHARGER (CVE-30)

(Ship or Station Received From)

Temporary duty, under instr., completed this date. Trans. to CASU 21 NAS, NORFOLK, VA., FFT U.S.S. MIDWAY (CVB-41) and on board when commissioned.

AUTH: ComAirLant Serial 2989-AFA of 7 March 1945.

Authorized to wear American Theatre Campaign Ribbon.

E. L. Ruffin
E. L. RUFFIN
Lieut., USMR
By direction.

Date Transferred 25 APR 1945

To CASU 21, NAS, NORFOLK, VIRGINIA FFT

J.R. TAGUE, CAPT., USN (ELR)

Signature and Rank of Officer Authorized to Sign

Date Received Aboard: 26 April 1945

CASU 21 FFT USS MIDWAY (CVB-41)

(New Ship or Station)

USS ANTIETAM (CV-36)

(Last Ship or Station)

T. D. GUINN, CAPT., USN

Signature and Rank of Officer Authorized to Sign

ORIGINAL
FOR SERVICE RECORD

MISCONDUCT REPORT

863-17-97
(FILE OR SERVICE NUMBER) AAMODT (SURNAME) Carroll (FIRST NAME) Ordell (MIDDLE NAME)
Sea. 2c

Sea.2c USN ☐ RET ☐ USNR ☒ (CLASS) USN(I) ☐

USS CHARGER (CVE#30) % FPO, New York, N.Y.
(SHIP OR STATION TO WHICH PATIENT IS ATTACHED)

The above named individual has been found incapacitated for duty

from 3-17-45 (DATE OF ADMISSION) to 3-18-45 (DATE OF DISCHARGE) as a result of his _____

result of his own: Intemperate use of drugs
Intemperate use of alcoholic liquors
Other misconduct

In case of venereal disease, initial symptom or lesion covered by
this report appeared 3-15-45 (DATE) (See G. O. 20 Par. 4)

(Sign original and duplicate) A. A. Schiller
(NAME AND SIGNATURE OF MEDICAL OFFICER)

SS CHARGER(CVE#30)% FPO, New York, N.Y.
(SHIP OR STATION OF MEDICAL OFFICER)

The Disbursing Officer is directed to adjust the pay account of above named individual, unless, in case of venereal disease, initial symptom or lesion appeared more than one year prior to date of admission for treatment.

Sign original
(duplicate) J. E. VIRGIN
(NAME AND SIGNATURE)

~~Executive~~ Officer (See Art. 2025(2) N. R.)

RT 1 - FOR SERVICE RECORD

Final average on Disch., Death,
Desertion, Ret. Trans. F R.

Name AAMODT, Carroll Ordell
(Name in Full, Surname to the Left)

863 17 97
(Service No.)

Rate S2c V6 USNR

Date Reported Aboard: 27 April 1945

RecSta., Newport News, Virginia.
(Present Ship or Station)

CASU #21

(Ship or Station Received From)

21 May 1945

CAPTAIN'S MAST

OFFENSE AOL $3\frac{1}{2}$ hours.

PUNISHMENT Warned

Jean A. Lambert
Jean A. Lambert, Lieut. Comdr., USNR
Commanding Officer.

Date Transferred _____

To _____

Signature and Rank of Commanding Officer.

Date Received Aboard: _____

(New Ship or Station)

(Last Ship or Station)

Signature and Rank of Commanding Officer.

ORIGINAL
FOR SERVICE RECORD

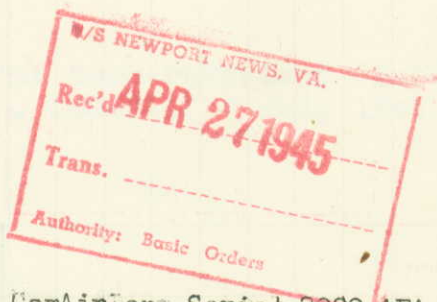
PROFESSIONAL QUALIFICATIONS, CONDUCT, AND MARKS

| Final average on Disch., Death, Desertion, Ret., Trans. F. R. | Date | Rate | Proficiency in rating | Seamanship | Mechanical ability | Ability as leader of men | Special Qualification or Special Detail | Conduct | Initials of Executive Officer |
|---|------|------|-----------------------|------------|--------------------|--------------------------|--|---------|-------------------------------|
| | | | | | | | <p>Commanding Officer, <i>Jean A. Lambert, Lieut. Comdr.</i></p> <p><u>FURNISHMENT</u> <u>Warranted</u></p> <p><u>EXPERIENCE</u> <u>NOT RECORDED</u></p> <p><u>CAPTAIN'S MATE</u></p> <p><u>21 May 1915</u></p> | | |

Final average on Disch., Death,
Desertion, Ret. Trans. F. R.

863 17 97 Rate S2c Class V6 S
(Service No.)

CASU #21, FFT USS MIDWAY (CVB-41)
(Present Ship or Station)

USS ANTIETAM (CV-36)
(Ship or Station Received From)

Date Transferred 27 April 1945.

R/S Newport News, Va. for duty in the
To USS MIDWAY (CVB-41) detail and on board
when commissioned.

T. D. GUINN, Capt. USN (NSR)

Date Received Aboard: _____

(New Ship or Station)

(Last Ship or Station)

Signature and Rank of Officer Authorized to Sign

ORIGINAL
FOR SERVICE RECORD

Initials of Executive Officer

Conduct

Special Qualification or Special Detail

Ability as leader of men

Mechanical ability

Seamanship

Proficiency in rating

Rate

Date _____

Final average on Disch., Death,
Desertion, Ret.. Tr  ns, F. R.

Name AAMODT, Carroll Ordell
(Name in Full, Surname to the Left)

863 17 97 Rate S2c V6
(Service No.)

Date Reported Aboard: 9 July 1945

USN BAKS., NEWPORT NEWS, VA.
(Present Ship or Station)

CASU # 21
(Ship or Station Received From)

AUTH: ComServForLant SubOrdCom
ser. 35247 of 7 July 1945

Date Transferred 9 July 1945

To OTIS FIELD, CAMP EDWARD, MASS.

A.E. BARTLETT, Comdr. USN, Comdg. ⁶⁻⁷
Signature and Rank of Officer Authorized to Sign (CTS)

Date Received Aboard: 10 May 1945

0 ASU - 26 Temdu FFP USS MIDWAY
(New Ship or Station)

USN BARRACKS, NEWPORT NEWS, VA.

R. T. LORD, Lt. Comdr., USNR (SLC)

ORIGINAL
FOR SERVICE RECORD

[illegible]

ORIGINAL
FOR SERVICE RECORD

PROFESSIONAL QUALIFICATIONS, CONDUCT, AND MARKS

| | | | | | | | | | | |
|---|--|--|--|--|--|--|--|--|--|--|
| Initials of Executive Officer | | | | | | | | | | |
| | | | | | | | | | | |
| Conduct | | | | | | | | | | |
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| Special Qualification or Special Detail | | | | | | | | | | |
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| Proficiency in | | | | | | | | | | |
| | | | | | | | | | | |
| Seamanship | | | | | | | | | | |
| | | | | | | | | | | |
| Mechanical ability | | | | | | | | | | |
| | | | | | | | | | | |
| Ability as leader of men | | | | | | | | | | |
| | | | | | | | | | | |
| Rate | | | | | | | | | | |
| | | | | | | | | | | |
| Date | | | | | | | | | | |
| | | | | | | | | | | |

Final average on Disch., Death, Desertion, Ret., Trans. F. R.

Name AAMODT, Carroll Ordell
(Name in Full, Surname to the Left)

863 17 97 Rate S2c V6
(Service No.)

Date Reported Aboard: 8 Aug. 1945

CASU 26
(Present Ship or Station)

NAAF, Otis Field, Camp Edwards, Mass.
(Ship or Station Received From)

Sept. 1945: Trans. Temp. completed this late. To the PCO USS MIDWAY Newport News, Va. CFO USS MIDWAY & Onbd when commencing UTH: NTS, Npt. R.I. Desp. 051720 of Sept

7 Sept 45: Trans. to R/S, Newport News, Va., CFO USS MIDWAY ON BOARD WHEN COMMISSIONED via M/S, Newport, R.I. to arrive 7 Sept 45 for trans. via ship to Newport News, Va.

AUTH: NTS, Desp. 352009 of August 1945.

Date Transferred 8 September 1945

To R/S, Newport News, Va., CFO MIDWAY

R. T. LORR, Lt. Comdr. USNR. (SLC)
Signature and Rank of Commanding Officer.

Date Received Aboard: 10 September 1945

U.S.S. MIDWAY (CVB41)
(New Ship or Station)

RecBks Newport News, Va.
(Last Ship or Station)

R.C. BAUER, Commander, USN (RJP)
Signature and Rank of Officer Authorized to Sign

ORIGINAL
FOR SERVICE RECORD

PROFESSIONAL QUALIFICATIONS, CONDUCT, AND MARKS

| Initials of Executive Officer | | Conduct | | Special Qualification or Special Detail | | Ability as leader of men | | Mechanical ability | | Seamanship | | Proficiency in rating | | Rate | | Date | | Final average on Disch., Death, Desertion, Ret., Trans. F. R. | |
|-------------------------------|--|---------|--|---|--|--------------------------|--|--------------------|--|------------|--|-----------------------|--|------|--|------|--|---|--|
| ELL (SIC) <i>MC</i> | | 4.0 | | TRANSFERRED | | | | | | | | | | | | | | | |

Name AAMODT, Carroll Ordell
 (Last) (First) (Middle)
 863 17 97 Rate S2c Class V-6
 (Service No.)
 Date Reported Aboard: 10 September 1945
U.S.S. MIDWAY (CVB-41)
 (Present Ship or Station)
RecBks, Newport News, Va.
 (Ship or Station Received From)

1-16-46: Successfully completed Navy Training Course and Practical Factors for advancement in Rating to S1c with a Mark of 3.1.

D. S. Harris

D. S. HARRIS, Ens., USN,
 Personnel Officer,
 By direction.

Date Transferred _____
 To _____

Signature and Rank of Officer Authorized to Sign

Date Received Aboard: _____

(New Ship or Station)

(Last Ship or Station)

Signature and Rank of Officer Authorized to Sign

ORIGINAL
 FOR SERVICE RECORD

Final average on Disch., Death,
Desertion, Ret., Trans. F. R.

| (Service No.) | (Name in Full, Surname to the Left) |
|---------------|-------------------------------------|
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| 99 | 99 |
| 100 | 100 |

USN(I) (Class)

U. S. S. MIDWAY (CVB 41)

(Present Ship or Station)

| | | |
|-------|----------------------------|---------------------|
| TO: | S1C (Rate Abbreviation) | SV6 (USNR Class) |
| FROM: | S2C (Rate Abbreviation) | SV6 (USNR Class) |

Authority and Remarks: NAVACT #14-46

☒ Qualified in all respects as required by current BuPers instructions.

☐ Advancement to fill vacancy ☐ In excess.

☐ Examination Report (Form Nav. Pers 624) submitted (if required).

☐ For Petty Officers, Article 1275NR read and appointment accepted.

~~ZXZXZXEZXZEXZXZXZXZXZXZXZXZXZXZX~~

X

 ~~X~~ Other Service*
(Years) (Mos.) (Days)

| (Years) | (Mos.) | (Days) | Naval Service |
|---------|--------|--------|---------------|
| | | | |

 Net Service completed on X
(Years) (Mos.) (Days) (Date)

*Act 6-16-42 & BuPers Statement of service filed in service record.

C. O.
Record 1751-46

A. H. WILSON, COMMANDER, U.S. NAVY,
(Name and Signature)

EXECUTIVE

(See art. 2025(2), N. R.)

Officer

PART 1—This Copy For Service Record

PATENTED

Name: AAMODT, Carroll Ordell
(Last) (First) (Middle)

Ser.No. 863 17 97 Rate S2c Class V6

Date Reported Aboard: 10 September 194

U. S. S. MIDWAY (CVB-41)
Present Ship or Station

RecBks, Newport News, Va.
Ship of Station Received From

You are authorized to wear Medals and/or Campaign Ribbons with Stars thereon, as indicated below:

| Ribbons - Medals | Stars |
|---|-------|
| Purple Heart Medal | |
| World War II Victory Medal | None |
| Good Conduct Medal | |
| American Defense Medal | |
| Presidential Unit Citation | |
| American Theatre Ribbon | None |
| European Theatre Ribbon | |
| Asiatic Theatre Ribbon | |
| Philippine Defense Ribbon | |
| Philippine Liberation Ribbon | |

A. H. Wilson
Executive Officer

(NAME AND SIGNATURE)

Officer (See Art. 2025 (2) N.)

(All sections which do not apply to this order shall be lined out before si

To be entered by the Disbursing Officer:

Travel Allowance \$

PART 1 - FOR SERVICE RECORD

C. O. Order No. _____

(SERVICE NUMBER) (SURNAME) (FIRST NAME) (MIDDLE NAME)
 USN ☐ RET ☐ USNR ☐ USN (I) ☐
 (RATING) (CLASS)

(SHIP OR STATION)

Enlisted on _____ and is this date, _____
 (DATE) (DATE)

1. Discharged with _____
 (CHARACTER OF AND REASON FOR DISCHARGE)

2. Transferred to Fleet Reserve _____
 (CLASS) (at expiration of enlistment ☐

(at other than expiration of enlistment ☐ and (is ☐ (is NOT ☐ immediate released from active duty.

3. Released from active duty ☐

Completed _____ years service on _____
 (NUMBER) (DATE)

If enlistment NOT extended, or extended only 1 year,
 net time served in enlistment and extension if any. (YRS.) (MOS.)

If enlistment extended 2 or more years,
 net time served in extension only. (YRS.) (MOS.)

Time (was ☐ (was NOT ☐ lost during this
 enlistment or extension because of AWOL, AOL, or NPDI.

Permission (was ☐ (was NOT ☐ granted to make up time lost.

Other Service (Act 6-16-42) (YRS.) (MOS.)

Net Service completed on date of last discharge. (YRS.) (MOS.)

Naval Service to include date of last discharge. (YRS.) (MOS.)

Medals Awarded:

Accepted for enlistment at ☐ Inducted at ☐

Ordered to Active duty from ☐ (PLACE)

Discharged or transferred
 to Fleet Reserve at _____ (PLACE)

The above named individual { is ☐ (is NOT ☐ recommended for reenlistment
 The above named individual { is ☐ (is NOT ☐ recommended for Good Conduct

Payment of Discharge Gratuity

(is ☐ (is NOT ☐ directed.

Due at Discharge \$ _____

Personal Funds \$ _____

Gratuity Credited \$ _____

(NAME AND SIGNATURE)

Officer (See Art. 2025 (2) N.

(All sections which do not apply to this order shall be lined out before signature)

To be entered by the Disbursing Officer:

Travel Allowance \$ _____

PART 1 - FOR SERVICE RECORD

Final average on Disch., Death,
Desertion, Ret., Trans. F. R.

(Name in full, surname to the left)

(Service number)

18 June 1946

(Present ship or station)

(Ship or station received from)

NavPers 554 issued.

Em. Shouley

Signature and rank of officer authorized to sign

(New ship or station)

(Last ship or station)

Signature and rank of officer authorized to sign

GPO 16—22321-3

NAVPER-601 (7-45) dat 676-2999

863 17 97 AAMODT, Carroll O.

(SERVICE NUMBER) (LAST NAME) (FIRST NAME) (MIDDLE INITIAL)
 S1/c USN ☐ USN-I ☐ USN-SV ☐ USNR ☐ USNR-SV ☒ 6
 (RATING) (CLASS)

ACCEPTED FOR
 1. ENLISTMENT AT

(PLACE) (DATE)

2. INDUCTED AT Northwood, Iowa 9/22/44

(PLACE) (DATE)

ORDERED TO AC-
 3. TIVE DUTY FROM

(PLACE) (DATE)

HOME SHOWN IN
 4. SERVICE RECORD Joice, Iowa

(CITY AND STATE)

NOTE: USN and USNR enlisted for immediate active duty—Use 1 above.

USN-I, USN-SV, USNR-SV—Use 2 and enter location of local draft board to which individual first reported for delivery to induction station.

USNR ordered from inactive duty—Use 3 and enter address to which orders to active duty were addressed.

ALL CLASSES—Use 4 in addition to others required, only when individual is entitled to transportation in kind to home of record.

5. COMPLETED YEARS SERVICE FOR PAY PURPOSES ON
 (NO.) (DATE)

6. THE ABOVE NAMED INDIVIDUAL IS THIS DATE 6/21/46
 HONORABLY DISCHARGED: (DATE)

FORM NAVPERS-660 SERIAL ISSUED
 (SERIAL NO.)

7. REASON AND AUTHORITY

HON(COG)AUTH: ALNAV 131-46

NORTHWOOD, IOWA TA CREDITED
 520036 137 Miles \$6.85

Upon being honorably discharged from the Naval Service, I acknowledge receipt of the following:

HONORABLE SERVICE LAPEL BUTTON
 HONORABLE DISCHARGE BUTTON
 HONORABLE DISCHARGE EMBLEMS

I have received the following instructions:

- (1) To report to my Selective Service Board within 10 days.
- (2) Concerning rights and benefits as a Veteran.
- (3) That in order to continue Government Insurance, Premiums must be paid direct to Veterans Administration.
- (4) If I desire to reenlist at some subsequent date, I should apply to the nearest Navy Recruiting Station and present my discharge certificate, and Notice of Separation (NAVPERS FORM 553.)
- (5) That I am permitted to wear my uniform only until such time as I reach my home (not to exceed 3 months enroute). I understand that the manner in which I conduct myself while wearing my uniform will reflect upon the naval service.

Carroll Ordell AAMODT (SIGNATURE OF DISCHARGE)

(NAME AND SIGNATURE)

R. M. THOMLEY, CSC, USN OFFICER (SEE ART. 2025(2) N. R.)

USN PERSEPCEN MINNEAPOLIS, MINN.
 (NAME AND LOCATION OF ACTIVITY FROM WHICH SEPARATED)

PART I - FOR SERVICE RECORD

NOTICE OF SEPARATION FROM U. S. NAVAL SERVICE

NAVPERS-553 (REV. 8-45)

| | | | | | | | |
|---|--|---|--|---|--|--|--|
| 1. SERIAL OR FILE NO. 863 17 97 | | 2. NAME (LAST) (FIRST) (MIDDLE) AAMODT, Carroll Ordell | | 3. RATE AND CLASS/OR Seaman first class SV-6 | | 5. PLACE OF SEPARATION USN PER SEP CEN Mpls, Minn. | |
| RANK AND CLASSIFICATION | | 4. PERMANENT ADDRESS FOR MAILING PURPOSES Joice, Iowa Worth Co. Co. 2999 | | | | 6. CHARACTER OF SEPARATION *HONORABLE | |
| 7. ADDRESS FROM WHICH EMPLOYMENT WILL BE SOUGHT Same as #4 | | 8. RACE W | | 9. SEX M | | 10. MARITAL STATUS Single | |
| 11. U.S. CITIZEN (YES OR NO) Yes | | 12. DATE AND PLACE OF BIRTH 3-5-26 Joice, Iowa | | 13. REGISTERED <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO | | 14. SELECTIVE SERVICE BOARD OF REGISTRATION #1, Northwood, Iowa (Worth) | |
| 15. HOME ADDRESS AT TIME OF ENTRY INTO SERVICE Same as #4 | | 16. MEANS OF ENTRY (INDICATE BY CHECK IN APPROPRIATE BOX) <input type="checkbox"/> ENLISTED <input checked="" type="checkbox"/> INDUCTED <input type="checkbox"/> COMMISSIONED | | 17. DATE OF ENTRY INTO ACTIVE SERVICE 9-22-44 | | 18. NET SERVICE (FOR PAY PURPOSES) (YRS., MOS., DAYS) 1-9-0 | |
| 19. PLACE OF ENTRY INTO ACTIVE SERVICE SSB #1, Northwood, Iowa | | 20. QUALIFICATIONS, CERTIFICATES HELD, ETC. See rating description booklet "Seaman first class." | | 21. RATINGS HELD AS S2c Slc | | 22. FOREIGN AND/OR SEA SERVICE WORLD WAR II <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO | |
| 23. SERVICE SCHOOLS COMPLETED None | | 24. SERVICE (VESSELS AND STATIONS SERVED ON) NTC Great Lakes, Ill. USS CHARGER CVE 307 30 USS MIDWAY CVB 41 | | 25. WEEKS | | | |

| | | | | | | | |
|---|--|---|--|--|--|--|--|
| IMPORTANT: IF PREMIUM IS NOT PAID WHEN DUE OR WITHIN THIRTY-ONE DAYS THEREAFTER, INSURANCE WILL LAPSE. MAKE CHECKS OR MONEY ORDERS PAYABLE TO THE TREASURER OF THE U. S. AND FORWARD TO COLLECTOR'S SUBDIVISION, VETERAN'S ADMINISTRATION, WASHINGTON 25, D. C. | | | | | | | |
| 25. KIND OF INSURANCE N | | 26. EFFECTIVE MONTH OF ALLOTMENT DISCONTINUANCE June | | 27. MO. NEXT PREMIUM DUE July | | 28. AMOUNT OF PREMIUM DUE EACH MONTH \$6.50 | |
| 29. INTENTION OF VETERAN TO CONTINUE INS. Continue | | 30. TOTAL PAYMENT UPON DISCHARGE \$ 65.45 | | 31. TRAVEL OR MILEAGE ALLOWANCE INCLUDED IN TOTAL PAYMENT \$ 6.85 | | 32. INITIAL MUSTERING OUT PAY \$100 | |
| 33. NAME OF DISBURSING OFFICER F.A. DASH JR. LT. SC USN | | 34. REMARKS *Auth AlNav 131-46 | | 35. SIGNATURE (BY DIRECTION OF COMMANDING OFFICER) O.B. MOAN LIEUT. USNR | | | |

| | | | | | |
|---|--|---|--|---|--|
| 36. NAME AND ADDRESS OF LAST EMPLOYER Carl Aamodt Joice, Iowa | | 37. DATES OF LAST EMPL'MT. FROM June 44 TO Sept. 44 | | 38. MAIN CIVILIAN OCCUPATION AND D. O. T. NO. Farming and Student | |
| 39. JOB PREFERENCE (LIST TYPE, LOCALITY, AND GENERAL AREA) Undecided | | 40. PREFERENCE FOR ADDITIONAL TRAINING (TYPE OF TRAINING) Yes, College. Course Undecided | | 41. VOCATIONAL OR TRADE COURSES (NATURE AND LENGTH OF COURSE) None | |
| 42. DEGREES None | | 43. MAJOR COURSE OR FIELD None | | 44. OFF DUTY EDUCATIONAL COURSES COMPLETED None | |
| 45. RIGHT INDEX FINGERPRINT | | 46. DATE OF SEPARATION 6-21-46 | | 47. SIGNATURE OF PERSON BEING SEPARATED Carroll Ordell Aamodt | |

TO: BUREAU OF NAVAL PERSONNEL

Midway

✓
96-4

THE U.S.S. CHARGER (CVE30)
c/o Fleet Post Office
New York, New York.

CVE30/P20-2/MM

20 March 1945.

From: The Commanding Officer.
To : The Commanding Officer, U.S.S. ANTIETAM (CV 36).
Subject: AAMODT, Carroll Ordell, 863 17 97, S2c SV V6, USNR.

Enclosure: (A) Misconduct Report on subject named man.

1. Forwarded.
2. The records of this station indicate that the subject named man was transferred to your command on 3/19/45.

G.L. Foster
G.L. FOSTER,
Ship's Clerk, USN.
By direction of the
Commanding Officer.

863 17 97 NAME AAMODT, Carroll Ordell A.S. V-6 SV \$50.00
(SERVICE NO.) (RATE) (PAY PER MONTH)

DATE 22 September 1944 FIRST ENLISTMENT ☒ REENLISTMENT ☐ IN THE UNITED STATES NAVY
(DAY) (MONTH) (YEAR) AS REGULAR ☐ RESERVE ☒ CLASS V-6 FOR 2 YEARS; MINORITY ☐
ACCEPTED AT Northwood, Iowa, ENLISTED AT NRS, Minneapolis, Minn.
TRANSFERRED TO ACTIVE DUTY ☒ OR INACTIVE DUTY ☐ NavTraCen. Great Lakes, Ill.
OCCUPATION Farming (STATION) U.S.
PLACE OF BIRTH Joice, Iowa DATE OF BIRTH 5 March 1926 AGE 18 YRS. 6 MOS.
HOME ADDRESS Joice Worth Iowa
NAME OF NEXT KIN OR LEGAL GUARDIAN Carl Oscar Aamodt Father (TOWN) (COUNTY) (STATE)
ADDRESS Joice, Iowa (RELATIONSHIP) MARRIED ☐ SINGLE ☒
CREDITED TO 3rd CONGRESSIONAL DISTRICT, STATE OF Iowa
EDUCATION: GRADE SCHOOL 8 YRS.: HIGH SCHOOL 4 YRS.: COLLEGE YRS.: POST GRAD. YRS.

PREVIOUS SERVICE IF NONE, CHECK HERE ☒
**CONTINUOUS SERVICE CERTIFICATE NO. FIRST ENLISTED IN REGULAR NAVY ☐ NAVAL RESERVE ☐
DATE PLACE LAST ENLISTMENT OR EXTENSION: REGULAR NAVY ☐ NAVAL RESERVE ☐
DATE TERM WAS LAST DISCHARGED (DATE) FROM
WITH DISCHARGED AS (RATE) SERVICE IN REGULAR NAVY (YEARS) (MONTHS) (DAYS)
NAVAL RESERVE (YEARS) (MONTHS) (DAYS) MARINE CORPS (YEARS) (MONTHS) (DAYS) COAST GUARD (YEARS) (MONTHS) (DAYS) ARMY (YEARS) (MONTHS) (DAYS)
PHYSICAL CHARACTERISTICS
HEIGHT 5 FEET 8 1/2 INCHES; WEIGHT 158; EYES blue SEX male; HAIR blond; COMPLEXION ruddy COLOR white (COLOR)

Marks ANT: S 1/2" fhd; BM 1 cheek; 2PS 1 shldr; 3S 1/2" r knee; S 1/2" l knee.

POST: VS ula; S 1/2" r shldr.

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 his rating, and that he has stated to me that he has no disease concealed or likely to be inherited.

For and in consideration of the pay or wages due to the ratings which may from time to time be assigned me during the continuance of my service, I agree to and with L. E. WOLLETT, Lt. (jg), USN (Ret.) of the United States Navy, as follows:

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

Second: I oblige and subject myself to serve { 2 years from 22 September 1944 }
during minority until _____
unless sooner discharged by proper authority, and on the conditions provided by the act of Congress of March 3, 1875, as follows:

SEC. 1422. That it shall be the duty of the commanding officer of any fleet, squadron, or vessel acting singly, when on service, to send to an Atlantic or to a Pacific port of the United States as their enlistment may have occurred on either the Atlantic or Pacific Coast of the United States, in some public or other vessel, all petty officers and persons of inferior ratings desiring to go there at the expiration of their terms of enlistment, or as soon thereafter as may be, unless, in his opinion, the detention of such persons for a longer period should be essential to the public interests, in which case he may detain them, or any of them until the vessel to which they belong shall return to such Atlantic or Pacific port. All persons enlisted without the limits of the United States may be discharged, on the expiration of their enlistment, either in a foreign port or in a port of the United States, or they may be detained as above provided beyond the term of their enlistment; and that all persons sent home, or detained by a commanding officer, according to the provisions of this act, shall be subject in all respects to the laws and regulations for the government of the Navy until their return to an Atlantic or Pacific port and their regular discharge; and all persons so detained by such officer, or reentering to serve until the return to an Atlantic or Pacific port of the vessel to which they belong shall in no case be held in the service more than thirty days after their arrival in said port; and that all persons who shall be so detained beyond their terms of enlistment, or who shall after the termination of their enlistment, voluntarily reenter to serve until the return to an Atlantic or Pacific port of the vessel to which they belong and their regular discharge therefrom, shall receive for the time during which they are so detained or shall so serve beyond their original terms of enlistment, an addition of one-fourth of their former pay: Provided, that the shipping articles shall hereafter contain the substance of this section.

In the event of war or National emergency declared by the President to exist during my term of service, I oblige and subject myself to serve until six months after the end of the war or National emergency if so required by the Secretary of the Navy unless I voluntarily reenlist or extend my enlistment. I understand that when so detained the addition of one-quarter pay as specified in Section 1422, Revised Statutes, is not applicable.

I also oblige myself, during such service, to comply with and be subject to such laws, regulations, and articles for the government 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 naval authorities.

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

Fourth: I understand that upon enlistment in the Naval Reserve, or upon transfer or assignment thereto, I may be ordered to active duty in time of war or when in the opinion of the President a National emergency exists, and that I may be required to perform active duty throughout the war or until the National emergency ceases to exist.

Fifth: I understand that if I become a candidate for the Naval Academy and fail to pass the entrance examination, I will be returned to general service.

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

Oath of Allegiance: I, Carroll Ordell AAMODT do solemnly swear (or affirm) that I will bear true faith and allegiance to the United States of America, and that I will serve them honestly and faithfully against all their enemies whomsoever, and that I will obey the orders of the President of the United States and the orders of the officers appointed over me, according to the rules and articles for the government of the Navy.
And I do further swear (or affirm) that all statements made by me as now given in this record are correct.

Carroll Ordell Aamodt
(SIGNATURE IN OWN HANDWRITING, SURNAME TO RIGHT)

Subscribed and sworn to before me this 22nd day of September, A. D. 1944
and contract perfected.
United States citizenship substantiated.

L. E. WOLLETT, Lt. (jg), USN (Ret.)
Commanding, U. S. S. USNRS MINNEAPOLIS, MINN.

*CITIZENSHIP.—Native born, use initials U. S.; Naturalized, N. U. S.; Alien, intention declared, A. D. I.; Alien, A; Guam, Guam; Philippine Islands, P. I.; Samoa, Samoa; and Virgin Islands, V. I.
**For reenlistments with continuous service note Art. D-1002, Bureau of Naval Personnel Manual.

NAVPER 603 (REV. 9-43)
SHIPPING ARTICLES
PART 1 FOR BuPers ENLISTED MAN'S JACKET

REDIFORM-PATD.—AMERICAN SALES BOOK CO., INC., NIAGARA FALLS, N. Y.

863 17 97 NAME AAMODT, Carroll Ordell

A.S.USN-I

\$50.00

(SERVICE NO.)

(RATE)

(PAY PER MONTH)

DATE 22 Sept. 1944 INDUCTED INTO THE UNITED STATES NAVY.

ACCEPTED FOR INDUCTION AT SSB#1 Northwood, Iowa

PLACE OF INDUCTION NRS, Minneapolis, Minn. (ADDRESS OF LOCAL BOARD FROM WHICH ORIGINALLY RECEIVED)

TRANSFERRED TO NavTraCen, Great Lakes, Ill. ACTIVE DUTY USN-I ☐ ENLISTED: USN-SV ☐ USNR-SV ☒

OCCUPATION Farming (STATION) *CITIZENSHIP U.S.

PLACE OF BIRTH Joice, Iowa DATE OF BIRTH 5 March 1926 AGE: YEARS 18 MOS. 6

HOME ADDRESS Joice Worth Iowa (STREET AND NUMBER) (TOWN) (COUNTY) (STATE)

NEXT OF KIN OR LEGAL GUARDIAN Carl Oscar Aamodt Father (NAME) (RELATIONSHIP)

ADDRESS Joice, Iowa MARRIED ☐ SINGLE ☒

CREDITED TO 3rd CONGRESSIONAL DISTRICT, STATE OF Iowa

EDUCATION: GRADE SCHOOL 8 YRS; HIGH SCHOOL 4 YRS; COLLEGE YRS; POST GRAD. YRS.

PREVIOUS SERVICE IF NONE, CHECK HERE ☒**CONTINUOUS SERVICE CERTIFICATE NO. FIRST ENLISTED IN Regular Navy ☐ Naval Reserve ☐DATE PLACE LAST ENLISTMENT OR EXTENSION: Regular Navy ☐ Naval Reserve ☐

DATE TERM WAS LAST DISCHARGED FROM

WITH DISCHARGE AS SERVICE IN REGULAR NAVY (DATE)

NAVAL RESERVE (YEARS) (MONTHS) (DAYS) MARINE CORPS (YEARS) (MONTHS) (DAYS) COAST GUARD (YEARS) (MONTHS) (DAYS) ARMY (YEARS) (MONTHS) (DAYS)

PHYSICAL CHARACTERISTICS

HEIGHT 5 FEET 8 1/2 INCHES; WEIGHT 158; EYES blue; SEX male; HAIR blond; COMPLEXION ruddy; COLOR white

MARKS ANT: S 1/2" fhd; BM 1 cheek; 2PS 1 shldr; 3S 1/2" r knee; S 1/2" l knee.

POST: VS ula; S 1/2" r shldr.

THIS IS TO CERTIFY that the above-named inductee has been examined, agreeably to the Regulations of the Navy, and 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 his rating, and that he has stated that he has no disease concealed or likely to be inherited.

L. J. Monson
L. J. MONSON, LT. MC-V(S) USNR
(SIGNATURE OF NAVAL MEDICAL OFFICER)

OATH OF ALLEGIANCE: I, Carroll Ordell AAMODT

do solemnly swear (or affirm) that I will bear true faith and allegiance to the United States of America, and that I will serve them honestly and faithfully against all their enemies whomsoever, and that I will obey the orders of the President of the United States and the orders of the officers appointed over me, according to the rules and articles for the government of the Navy.

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

Term of Service: In accordance with Selective Service Act of 1940, as amended.

Carroll Ordell Aamodt
(SIGNATURE IN OWN HANDWRITING, SURNAME TO RIGHT)

Subscribed and sworn to before me this 22nd day of September, A. D. 1944
and contract perfected.

United States citizenship substantiated.

L. E. Vollett
L. E. VOLLETT, LT. (JG), USN (C)
(NAME AND RANK OF RECRUITING OFFICER)

Place of Induction USNRS, MINNEAPOLIS, MINN.

*CITIZENSHIP.—Native born, use initials U. S.; Naturalized, N. U. S.; Alien, intention declared, A. D. I.; Alien, A.; Guam, Guam; Phillippine Islands, P. I.; Samoa, Samoa; and Virgin Islands, V. I.

**For reenlistments with continuous service note Art. D-1002, Bureau of Naval Personnel Manual.

NAVPERS 603B (REV. 4-43)

INDUCTION ARTICLES

PART 1 FOR BuPers JACKET

NOTE: FOR USE OF NAVY INDUCTEES ONLY

REPORT OF
PHYSICAL EXAMINATION AND INDUCTIONLocal Board No. 1 72
Worth County 195

SEP 19 1944 001

Court House
Northwood, Iowa

(Local Board of Origin Date Stamp with Code)

SECTION I.—GENERAL (Local board will prepare from latest information available).

| | | | | Do Not Use |
|---|-------------------------|----------------------------|----------------------|------------------|
| | | | | RESIDENCE |
| | | | | State |
| | | | | County |
| | | | | Place inducted |
| | | | | DATE INDUCTED |
| | | | | Day |
| | | | | Month |
| | | | | Year |
| | | | | Source |
| | | | | Nativity |
| | | | | Year of birth |
| | | | | Race/citizenship |
| | | | | Education |
| | | | | Occupation |
| | | | | Marital status |
| 1. Name | Aamodt | Carroll | Ordell | |
| | (Last—in capitals) | (First) | (Middle) | |
| 2. Present address | R. F. D. 1 | Joice | Worth Iowa | |
| | (Street or rural route) | (Town or city) | (County) (State) | |
| 3. Registrant's order No. | 11160 | 4. Social Security No. | None | |
| 5. Marital status: Single <input checked="" type="checkbox"/> Married <input type="checkbox"/> Widower <input type="checkbox"/> Divorced <input type="checkbox"/> Separated <input type="checkbox"/> | | | | |
| 6. Number of Group 4 children | 0 | 7. Birthdate of registrant | March 5 1926 | |
| | | | (Month) (Day) (Year) | |
| 8. Birthplace of registrant | Joice | Iowa | U. S. A. | |
| | (Town or city) | (State) | (Country) | |
| 9. Race: White <input checked="" type="checkbox"/> Negro <input type="checkbox"/> Other (specify) _____ | | | | |
| 10. Citizenship: (a) United States citizen: Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> (b) First papers: Yes <input type="checkbox"/> No <input type="checkbox"/> (c) If not citizen of United States, citizen or subject of (specify country) _____ | | | | |
| 11. Court record: (a) Convicted of a crime other than minor traffic violation: Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> (b) If "yes," specify crime, date, location of court, and sentence _____ | | | | |
| (c) Now on parole, conditional release, probation, or suspended sentence: Yes <input type="checkbox"/> No <input type="checkbox"/> (d) If answer to (c) is "yes," has necessary release or waiver been secured: Yes <input type="checkbox"/> No <input type="checkbox"/> | | | | |
| 12. United States military service: (a) Previous service: None <input checked="" type="checkbox"/> Army <input type="checkbox"/> National Guard <input type="checkbox"/> Navy <input type="checkbox"/> Marine Corps <input type="checkbox"/> Coast Guard <input type="checkbox"/> (b) Date of discharge _____ (c) Type of discharge _____ | | | | |
| 13. Education: (Number of years completed) Elementary school 8 High school 4 Trade, night, or business school 0 College or university 0 | | | | |
| 14. Occupation and industry: (a) Title and duties of present job Farm laborer, Caring for farm livestock and general agricultural duties. (b) Length of experience: Years 8 Months - (c) Business of present employer Farming. | | | | |
| 15. Employment class (present job): Employee <input type="checkbox"/> Independent worker <input type="checkbox"/> Employer <input type="checkbox"/> Unpaid family worker <input checked="" type="checkbox"/> Student <input type="checkbox"/> Unemployed <input type="checkbox"/> | | | | |
| 16. (a) Number of times previously sent to Induction Station Once (b) Date last sent May 12, 1944 (c) Was this a preinduction physical examination: Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> | | | | |
| 17. If transferred for induction, or referred for Class IV-E final-type physical examination, local board of transfer is Local Board No. - County or city of - State of - | | | | |

INSTRUCTIONS—ORIGINAL

1. To Local Boards.—The Original DSS Form 221 will be prepared and distributed as set forth in Instruction No. 1 for Form 221.
2. To the Armed Forces.—The induction station will make the following disposition of this Original Copy of DSS Form 221:
 - (a) For registrants inducted: (1) By the Army, this Original will be forwarded from the induction station to the reception center for extraction of data, then to the Service Command Headquarters for machine record purposes, and then to The Adjutant General, War Department, Washington, D. C. (2) By the Navy or Coast Guard, this Original will be forwarded from the induction station through the Main Recruiting Station to the Bureau of Personnel, Washington, D. C. (3) By the Marine Corps, this original will be sent from the induction station direct to the Commandant, Headquarters, U. S. Marine Corps, Washington, D. C.
 - (b) For registrants rejected: This Original of DSS Form 221 will be marked at the top of Page 1 "Rejected by the Armed Forces" and will be sent together with the Second Copy of DSS Form 221 and Form 151 to State Director of Selective Service.
 - (c) For registrants sent for preinduction physical examination: This Original of DSS Form 221 will be sent together with the Second Copy of DSS Form 221 to State Director of Selective Service.
 - (d) For Class IV-E registrants sent for final-type physical examination: This Original along with First Copy and Second Copy of DSS Form 221 will be returned to the local board.

SECTION IV.—PHYSICAL AND MENTAL EXAMINATION—Continued.

66. Other defects, diseases, and/or remarks none67. Summary of defects: (a) Principal defect none

(b) Other defects in order of significance

68. (a) I CERTIFY that the above-named registrant was carefully examined, physically and mentally, that the results of the examination have been carefully recorded on this form, and that, to the best of my knowledge and belief, he is—

(1) Qualified for general military service ☒(2) Qualified for limited service ☐ because of(3) Disqualified for any military service ☐ because of(b) Signature of medical examiner H. Shapiro

(c) Name typed or stamped

H. SHAPIRO

(d) Title

MAJOR, M. C.

Ft. Snelling, Minn.

SECTION V.—DISPOSITION OF REGISTRANT BY ARMED FORCES.

69. Type of examination: Regular induction ☐; preinduction ☒70. Registrant's service preference: None ☐ Army ☐ Navy ☐ Marine Corps ☐ Coast Guard ☐

71. (a) I CERTIFY that the qualifications of the above-named registrant have been considered in accordance with the most recent regulations governing the acceptance of Selective Service registrants and that he was this date:

(1) Inducted into the armed forces ☐(a) Service: Army ☐ Navy ☒ Marine Corps ☐ Coast Guard ☐(b) Was ordered to report to NavTraCen Great Lakes, Ill. 22 Sept. 1944(c) Qualified for: General military service ☐ Limited service ☐(2) Found acceptable for limited service but not inducted ☐(3) Rejected for service in the armed forces ☐ because of: Medical ☐ Moral ☐ Alien ☐Other ☐ If other, specify(b) Signature of Commanding Officer of the Induction Station H. F. Hoffmann

(c) Name typed or stamped

H. F. HOFFMANN, CAPT., QMC

(d) Place

FIS—FORT SNELLING, MINNESOTA

(e) Date 22 Sept. 1944

SECTION VI.—TRANSFER FROM RECEPTION CENTER.

72. Above-named man was transferred from Reception Center to:

(Place and organization, if known)

on

(Date)

SECTION VII.—FINGERPRINTS—RIGHT HAND (for only those registrants who are inducted).

1. THUMB

2. INDEX

3. MIDDLE

4. RING

5. LITTLE



or business school 0 College or university 0 **Farm laborer.**
14. Occupation and industry: (a) Title and duties of present job **Caring for farm livestock and general agricultural duties.** Marital status

(b) Length of experience: Years 8 Months -

Do Not Use

SECTION IV. PHYSICAL AND MENTAL EXAMINATION

25. (a) High school graduate: Yes ☒ No ☐ (b) English speaking: Yes ☒ No ☐
(c) Qualification test (Form used _____) Score _____
(d) Visual classification test score _____ (e) Block counting test score _____
(f) Concrete directions test score _____ (g) Illiterate: Yes ☐ No ☒
(h) Does registrant meet minimum intelligence standards: Yes ☒ No ☐
26. Limited classification: (a) 590: Yes ☐ No ☐ (b) Useful occupation: Yes ☐ No ☐
(c) Trade test: Name _____ W. S. L.
(d) R. I. test score _____
(e) If physically qualified for limited service, does registrant meet limited classification standards: Yes ☐ No ☐

27. Psychiatric diagnosis: normal

28. Neurological diagnosis: normal

29. Psychiatric or neurological symptoms: normal

30. Eye abnormalities: normal

31. Ear, nose, throat abnormalities: none

32. Mouth and gum abnormalities: none

33. TEETH: (a) Indicate restorable carious teeth by circling; nonrestorable carious teeth by /; missing natural teeth by X; teeth replaced by denture by horizontal line over X X; teeth replaced by fixed bridge by oval to include abutments (X).

| Right | | | | | | | | | | EXAMINEE'S | | Left | | | | | | | | | |
|---------------|----|----|---------------|----|----|----|---|---|----|------------|----|---------------|---------------|----|---------------|--|--|--|--|--|--|
| 8 | 7 | 6 | 5 | 4 | 3 | 2 | 1 | 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 | | | | | | |
| 16 | 15 | 14 | 13 | 12 | 11 | 10 | 9 | 9 | 10 | 11 | 12 | 13 | 14 | 15 | 16 | | | | | | |

(b) Remarks, including other defects: C-4

(c) Prosthetic dental appliances: none

34. Skin: normal

35. Varicose veins: none

36. Hernia: none

37. Hemorrhoids: none

38. Genito-urinary (nonvenereal): normal

39. Venereal diseases: none

40. Feet: normal

41. Musculoskeletal defects: none

42. Abdominal viscera: normal

43. Cardiovascular system: normal

44. Lungs: normal

45. Chest X-ray: PA of chest neg. 9-20-44

46. Endocrine system: normal

47. Vision, without correction:

(a) Right eye 20/ 30

(b) Left eye 20/ 30

(c) Both eyes 20/ _____

48. Vision, with correction:

(a) Right eye 20/ _____

(b) Left eye 20/ _____

(c) Both eyes 20/ _____

49. Color perception*: normal

50. Hearing:

(a) Right ear: 15/15

(b) Left ear: 15/15

51. Height: 68 1/2 inches

52. Weight: 158 pounds

53. Girth at nipples:

(a) Inspiration: 41 inches

(b) Expiration: 38 inches

54. Girth, at umbilicus: 34 inches

55. Posture:

Good ☒ Fair ☐ Poor ☐

56. Frame:

Heavy ☐ Med. ☒ Light ☐

57. Color of eyes: blue

58. Color of hair: blond

59. Complexion: ruddy

60. Pulse, sitting: 72

61. Pulse, after exercise*

62. Pulse, 2 minutes after exercise*

63. Blood pressure:

(a) Systolic: 138

(b) Diastolic: 70

64. Urinalysis:

(a) Specific gravity: 1.015

(b) Albumin: neg.

(c) Sugar: neg.

(d) Microscopic*

65. OTHER DATA:

serg. neg.

* When indicated.

ORIGINAL COPY

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SECTION II.—LOCAL BOARD EXAMINATION AND CLASSIFICATION.

18. MEDICAL HISTORY: (a) Has registrant had spells of unconsciousness, convulsions, fits, encephalitis, nervous trouble of any sort, tuberculosis, asthma, hay fever, diabetes, enuresis, stomach ulcer, rheumatic fever, heart trouble; been treated at hospital, asylum, or sanitarium; is or has been addicted to alcohol, narcotics, or habit-forming drugs: Yes ☐ No ☐ If yes, specify _____

(b) Specify other defects or diseases claimed by registrant None claimed.

(c) I CERTIFY that the answers to Items 18 (a) and 18 (b) are correct.

(d) Signature of registrant _____ (e) Date _____

19. (a) Does examining physician have documentary evidence confirming statements in Item 18: Yes ☐ No ☐ (b) If not, does examining physician have any evidence which would substantiate statements in Item 18: Yes ☐ No ☐ (c) If yes, specify _____

(d) Serological test (syphilis): First specimen: Date SEP 20 1944 Result SEROLOGY NEGATIVE
Second specimen: Date _____ Result _____

(e) Does above-named registrant have any defects set forth in List of Defects (Form 220). (If in doubt, answer "No" and give details): Yes ☐ No ☐ If answer is "Yes," describe the defects in the order of their significance _____

(f) REMARKS _____

(g) Signature of examining physician _____

(h) Place _____ (i) Date _____

20. (a) Was local board physical examination waived: Yes ☐ No ☐ (b) If yes, under what Section of Regulations _____

(c) This local board has classified the above-named registrant in Class I-A

(d) Signature of member of local board _____

(e) Place _____ (f) Date _____

SECTION III.—MISCELLANEOUS (To be filled out at induction station for only those registrants accepted for military service).

21. (a) Organization and serial number of previous U. S. military service (if known) None

(b) Reason for discharge _____

(c) Religious preference (voluntary for Army) Prot.

22. (a) Nearest relative (other than wife or minor child) (Name in full) Carl Oscar Aamodt

(b) Relationship father Address Joice, Iowa
(Number and street or rural route; if none, so state) (City, town, or post office) (State or country)

(d) Person to be notified in case of emergency (Name in full) Same as above

(e) Relationship _____ (f) Address _____
(If friend, so state) (Number and street or rural route; if none, so state) (City, town, or post office) (State or country)

23. (a) The persons eligible to be my beneficiary are: None

(Full name of wife; if no wife, or if she is deceased or divorced, so state) (Wife's full address)

(Full name and address of each minor child and each dependent child over 21 years of age)

(If there are no children, so state. If the address is the same as the wife's, so state. Do not repeat address)

(b) In the event of my leaving no widow or child, I then designate as my beneficiary to receive the six months' death gratuity the dependent relative whose name, relationship and address are shown below:

Carl Oscar Aamodt (father) Same

(If designation of beneficiary is declined, man must state in own handwriting: "I decline to designate any person as my beneficiary")

(c) In the event of the death or disqualification of the last-named dependent relative, I then designate as my beneficiary to receive the six months' death gratuity, the dependent relative whose name, relationship, and address are shown below:

Clara Marie Aamodt (mother) Same

(If beneficiary is named in line 23b but naming of alternate is declined, man must state in own handwriting: "I decline to designate an alternate beneficiary")

24. (a) Signature of registrant Canall Ordell Aamodt
(First name) (Middle name) (Last name)

(b) Witnessed at NRS, Minneapolis, Minn. on 22 Sept. 1944, 19

E. J. Casperson E. J. Casperson Y2c
(Signature of witness attesting) (Name of witness typed) (Grade and organization)

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APPLICATION FOR NATIONAL SERVICE LIFE INSURANCE

UNDER SECTION 602 (a) NATIONAL SERVICE LIFE INSURANCE ACT OF 1940 AS AMENDED AND REGULATIONS OF THE VETERANS ADMINISTRATION
WITHOUT REPORT OF PHYSICAL EXAMINATION

For use by persons in the active service in the land or naval forces of the United States within 120 days after the date of entrance into the active service. NOTE.—Persons in the active service more than 120 days and persons who reenter the active service (including persons discharged to accept commissions), where such reentrance is a continuation of previous active service without interruption, must make application on Insurance Form 350a, which requires a complete report of physical examination. USE INK OR TYPE.

| | | | | |
|--|--|-------------------------|---|--------------------------------------|
| 1. NAME IN FULL: (Please print or type) | First CARROLL | Middle ORDELL | Last name AAMODT | JJ |
| 2. HOME ADDRESS: Number | Street or rural route Joice, | | County, city, town, or post office Iowa | State Iowa |
| 3. I WAS BORN AT | City, town, or post office Joice, | State Iowa | Day of month 5 | Month March |
| 4. DATE OF ENTRY INTO PRESENT TOUR OF ACTIVE DUTY | 5. PRESENT ORGANIZATION Rank, grade, or rating. AS USNR | | Organization, Regiment, Squad, ship, etc. USMTC Great Lakes, Ill. | 6. SERIAL NUMBER 863 17 97 |
| 7. DATE OF SEPARATION FROM LAST TOUR OF ACTIVE DUTY. (If no previous active duty, state "none.") | Sept. 23, 1944 | | None | |
| 8. ARE YOU NOW DISABLED ON ACCOUNT OF INJURY OR DISEASE? IF SO, STATE DETAILS | | | No | |
| 9. I HEREBY APPLY FOR INSURANCE ON THE FIVE-YEAR LEVEL PREMIUM TERM PLAN IN THE AMOUNT OF \$ | | | 10,000 | |

10. ARE YOU NOW CARRYING GOVERNMENT LIFE INSURANCE? (ANSWER "YES" or "NO")—**No** IF "YES" GIVE AMOUNT OF INSURANCE AND POLICY NUMBER IF AVAILABLE. AMOUNT, \$ POLICY No. (No person may carry a combined amount of National Service Life Insurance and U. S. Government Life Insurance in excess of \$10,000 at any one time)

| 11. COMPLETE NAME OF EACH BENEFICIARY (If married woman, her own first and middle name and husband's last name must be stated) | Relationship | Amount of insurance to be paid to each beneficiary | Post-office address (Number and street, city, town, or post office and State) |
|---|---------------|--|--|
| PRINCIPAL Carl Oscar Aamodt | father | Equally | Joice, Iowa |
| Clara Marie Aamodt | mother | or to the Survivor | Same |
| CONTINGENT | | | |

Permitted class of beneficiaries: Husband or wife, child, parent, brother, or sister of the insured. (For further information see reverse side, paragraph 2.)

12. I REQUEST THE POLICY BE MAILED TO—(Please print or type)
Beneficiary
(Full name) (Address)

13. EFFECTIVE DATE OF INSURANCE (see reverse side, paragraph 1). I REQUEST THAT THE EFFECTIVE DATE of this policy be made the **9** day of **October**, 19 **44** and

- A. I enclose herewith remittance payable to the TREASURER OF THE UNITED STATES by (Check, draft, or money order) in the amount of \$ in payment of the first premium on the insurance, or (Write above whether monthly, quarterly, semiannual, or annual)
- B. I will register an allotment of pay involving advance of active service pay under the provisions of Public Law 451, 77th Congress, in payment of the first monthly premium of \$ on the insurance, or
- C. I will register an allotment of pay effective in the month in which application for insurance is signed, in payment of the first monthly premium of \$ on the insurance.
- If an effective date is not specified by the applicant, the insurance herein applied for shall become effective as follows:
- (a) If the first premium is paid by direct remittance or by advance of active service pay under the provisions of Public Law 451, 77th Congress, the insurance shall become effective as of the date on which valid application is signed and such premium is tendered.
- (b) If the first premium is paid by regular allotment of pay effective in the month in which application for insurance is signed, the insurance shall become effective as of the first day of the month following the month in which valid application and such allotment are executed, provided the applicant is then in the active service and the amount of the premium is deducted from the applicant's service pay in accordance with the allotment.

THE UNITED STATES IS NOT LIABLE IF DEATH OCCURS PRIOR TO THE EFFECTIVE DATE OF THE POLICY

14. I WILL PAY SUBSEQUENT PREMIUMS IN THE MANNER AND AMOUNT INDICATED BELOW:

| A. BY ALLOTMENT OF PAY MONTHLY | B. BY DIRECT REMITTANCE TO THE VETERANS ADMINISTRATION | | | |
|--------------------------------|--|-----------|--------------|----------|
| 6.50 | Monthly | Quarterly | Semiannually | Annually |
| \$ | \$ | \$ | \$ | \$ |

SIGNED AT **USMTC, Great Lakes, Ill.** ON THE **9** DAY OF **October**, 19 **44**

WITNESSED BY: **and**
INFORMATION AS TO SERVICE CERTIFIED BY:
W. L. BEAMON
Lt. D-V(S) USNR
(Rank and organization. See reverse side, paragraph 4.)

NOTE.—Penalties for fraud in securing for self or another the issue or payment of insurance: \$1,000 to \$5,000 fine and imprisonment. Insurance will be forfeited for mutiny, treason, spying or other specified offenses. (Sections 613, 615, and 612, National Service Life Insurance Act of 1940.)

DO NOT USE THIS SPACE

Effective Date _____ Age _____ Amt. \$ _____ Premium: Mo. \$ _____ Qr. \$ _____ S. A. \$ _____ A. \$ _____

Beneficiary _____

Action taken _____

Examiner _____

Certificate issued _____

Reviewer _____

Policy issued _____

| | |
|-------|------|
| Dept. | Div. |
|-------|------|

~~DATE OF FIRST ENLISTMENT~~

- | | | | | | | | |
|----|--------------------------|------------|--------------------------|----|-----------|--------------------------|--|
| 02 | <input type="checkbox"/> | CAC | <input type="checkbox"/> | 08 | Bombsight | | (Others) |
| 04 | <input type="checkbox"/> | Air Gunner | <input type="checkbox"/> | 10 | Catapult | <input type="checkbox"/> | |
| 06 | <input type="checkbox"/> | Air Bomber | <input type="checkbox"/> | 12 | SBAE | 16 | <input type="checkbox"/> AIRBORNE RADAR OPR. |

N. EXPERIENCE. There are below different types of aviation experience in which we are interested. Place an "X" in the box to the left of the degree of experience which you have had. Pay no attention to the numbers shown.

| | | | |
|--|--|---|---|
| (0) ADV. BASE | (1) ASMY. & REPAIR | (2) VF (FGHTR. SQDN.) | (3) VTB (TORP. BOMB. SQDN.) |
| 1. <input type="checkbox"/> Less than 1 year | 1. <input type="checkbox"/> Less than 1 year | 1. <input type="checkbox"/> Less than 1 year | 1. <input type="checkbox"/> Less than 1 year |
| 2. <input type="checkbox"/> 1 to 3 years | 2. <input type="checkbox"/> 1 to 3 years | 2. <input type="checkbox"/> 1 to 3 years | 2. <input type="checkbox"/> 1 to 3 years |
| 3. <input type="checkbox"/> Over 3 years | 3. <input type="checkbox"/> Over 3 years | 3. <input type="checkbox"/> Over 3 years | 3. <input type="checkbox"/> Over 3 years |
| (4) VSB SQDN. | (5) VR (TRANS. SQDN.) | (5) VJ SQDN. | (5) VP SQDN. |
| 1. <input type="checkbox"/> Less than 1 year | 1. <input type="checkbox"/> Less than 1 year | 4. <input type="checkbox"/> Less than 1 year | 7. <input type="checkbox"/> Less than 1 year |
| 2. <input type="checkbox"/> 1 to 3 years | 2. <input type="checkbox"/> 1 to 3 years | 5. <input type="checkbox"/> 1 to 3 years | 8. <input type="checkbox"/> 1 to 3 years |
| 3. <input type="checkbox"/> Over 3 years | 3. <input type="checkbox"/> Over 3 years | 6. <input type="checkbox"/> Over 3 years | 9. <input type="checkbox"/> Over 3 years |
| (6) VO/VS SQDN. | (7) NAVAL AIR STA. | (8) Carrier-SHIP'S CO. | (9) OTHER VESSELS |
| 1. <input type="checkbox"/> Less than 1 year | 1. <input type="checkbox"/> Less than 1 year | 1. <input checked="" type="checkbox"/> Less than 1 year | 1. <input checked="" type="checkbox"/> Less than 1 year |
| 2. <input type="checkbox"/> 1 to 3 years | 2. <input type="checkbox"/> 1 to 3 years | 2. <input type="checkbox"/> 1 to 3 years | 2. <input type="checkbox"/> 1 to 3 years |
| 3. <input type="checkbox"/> Over 3 years | 3. <input type="checkbox"/> Over 3 years | 3. <input type="checkbox"/> Over 3 years | 3. <input type="checkbox"/> Over 3 years |

O. PLANE EXPERIENCE—Most of the Navy's plane types are given below. Place "X" in the box to the left of the plane or planes with which you are familiar:

| | | | |
|--|--|--|--------------------------------------|
| (0) OBSERVATION | (1) FIGHTER | (2) TORP. BOMBER | (3) SCOUT BOMBER |
| 1. <input type="checkbox"/> Navy | 1. <input type="checkbox"/> Grumman | 1. <input type="checkbox"/> Grumman | 1. <input type="checkbox"/> Brewster |
| 2. <input type="checkbox"/> Vought | 2. <input type="checkbox"/> Brewster | 2. <input type="checkbox"/> General Motors | 2. <input type="checkbox"/> Curtiss |
| 3. <input type="checkbox"/> Curtiss | 3. <input type="checkbox"/> Vought | 3. <input type="checkbox"/> Douglas | 3. <input type="checkbox"/> Douglas |
| 4. <input type="checkbox"/> _____ | 4. <input type="checkbox"/> _____ | 4. <input type="checkbox"/> _____ | 4. <input type="checkbox"/> _____ |
| (4) SCOUT | (5) PATROL | (6) PATROL BOMBER | (7) TRANSPORT |
| 1. <input type="checkbox"/> Curtiss | 1. <input type="checkbox"/> Vega | 1. <input type="checkbox"/> PBY Consol. | 1. <input type="checkbox"/> Douglas |
| 2. <input type="checkbox"/> _____ | 2. <input type="checkbox"/> _____ | 2. <input type="checkbox"/> PB2Y Consol. | 2. <input type="checkbox"/> _____ |
| 3. <input type="checkbox"/> _____ | 3. <input type="checkbox"/> _____ | 3. <input type="checkbox"/> PB4Y Consol. | 3. <input type="checkbox"/> _____ |
| 4. <input type="checkbox"/> _____ | 4. <input type="checkbox"/> _____ | 4. <input type="checkbox"/> PBM Martin | 4. <input type="checkbox"/> _____ |
| 5. <input type="checkbox"/> _____ | 5. <input type="checkbox"/> _____ | 5. <input type="checkbox"/> PBJ No. Amer. | 5. <input type="checkbox"/> _____ |
| (8) UTILITY | (9) TRAINING | (9) CIVILIAN | WRITE IN OTHER EXPERIENCE |
| 1. <input type="checkbox"/> Sikorsky | 1. <input type="checkbox"/> Navy | 7. <input type="checkbox"/> C.A.A. PILOT | NOT COVERED ABOVE. |
| 2. <input type="checkbox"/> Grumman | 2. <input type="checkbox"/> Beechcraft | 8. <input type="checkbox"/> C.A.A. MECH. LIGHT | _____ |
| 3. <input type="checkbox"/> Beechcraft | 3. <input type="checkbox"/> Ryan | 9. <input type="checkbox"/> C.A.A. MECH. HEAVY | _____ |
| 4. <input type="checkbox"/> Piper | 4. <input type="checkbox"/> Lockheed | | _____ |
| 5. <input type="checkbox"/> Martin | 5. <input type="checkbox"/> No. Amer. | | _____ |
| 6. <input type="checkbox"/> _____ | 6. <input type="checkbox"/> Stearman | | _____ |

P. Below are a number of skills or hobbies in which we are from time to time interested. If you consider yourself qualified (for instance, able to demonstrate hand-to-hand combat, play musical instrument in organized orchestra, or ball on a regular team, place "X" in the proper box.

| | | |
|---|---|---|
| (76) 1. <input type="checkbox"/> Boxing | 8. <input type="checkbox"/> Tailor | 5. <input type="checkbox"/> Sign Painter |
| 2. <input checked="" type="checkbox"/> Baseball | 9. <input type="checkbox"/> Rifle Pistol Exp. | 6. <input type="checkbox"/> Radio Ham |
| 3. <input checked="" type="checkbox"/> Basketball | 0. <input type="checkbox"/> Barber | 7. <input type="checkbox"/> Artist-Cartoonist |
| 4. <input type="checkbox"/> Hand-to-hand combat | (77) 1. <input type="checkbox"/> Typing | 8. <input type="checkbox"/> Writer |
| 5. <input type="checkbox"/> Swimming | 2. <input type="checkbox"/> Photography | 9. <input type="checkbox"/> Motion Picture Opr. |
| 6. <input type="checkbox"/> Musician (Inst.) | 3. <input type="checkbox"/> Pigeon Raiser | 0. <input type="checkbox"/> Off. Mach Repair |
| 7. <input type="checkbox"/> Dramatics | 4. <input type="checkbox"/> Drafting | |

Q. If you can speak, read or write a foreign language, indicate what they are: _____

☐ Speak ☐ Read ☐ Write

R. What type of duty would you prefer:
In this unit: _____ Other: _____

S. Are you taking Navy Training Course for advancement in rating? ☐ Yes ☐ No

T. Do you have National Service Life Insurance? ☒ Yes ☐ No AMT. \$ 19000

U. Do you have a family allowance made out for your dependents? ☐ Yes ☒ No

V. Are your dependents all shown in your service record? ☐ Yes ☒ No

W. Do you have a War Bond Allotment registered? ☒ Yes ☐ No If not, why not? _____

Explain

HAVE YOU HAD MESS COOKING No WHEN _____
YES NO DATE

HAVE YOU HAD COMPARTMENT CLEANING No WHEN _____
YES NO DATE

| | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|------------------------------------|--|--|--|--|--|--|--|--|--|---|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|----|--|--|--|--|--|--|--|--|--|
| U.S. NAVY ENLISTED | | | | | | | | | | ANAL QUALIFICATIONS CARD | | | | | | | | | | NAV. PERS. 609 (2-44) | | | | | | | | | | | | | | | | | | | |
| A 8631797 AAMODT CARROLL ORDELL AS | | | | | | | | | | V6S18589 22 44 | | | | | | | | | | 1 | | | | | | | | | | | | | | | | | | | |
| B 61 72 62 69 50 50 69 65 65 | | | | | | | | | | 3 5 26 3-16-10 | | | | | | | | | | 2 | | | | | | | | | | | | | | | | | | | |
| C 0 | | | | | | | | | | I VOLUNTEER FOR QUAL DISO | | | | | | | | | | 3 | | | | | | | | | | | | | | | | | | | |
| D Lake Mills, Ia. | | | | | | | | | | Lake Mills, Ia. | | | | | | | | | | NORWEGIAN - SPEAKS & TRANSLATES. | | | | | | | | | | 63 | | | | | | | | | |
| E HIGH SCHOOL | | | | | | | | | | 4 44 | | | | | | | | | | INTERESTED IN CARPENTRY & MECHANICS. HUNTING & FISHING | | | | | | | | | | 5 | | | | | | | | | |
| F 12 YES H.S. JOICE H.S. | | | | | | | | | | ACADEMIC | | | | | | | | | | BASKETBALL & BOOEBALL | | | | | | | | | | 6 | | | | | | | | | |
| 1 | | | | | | | | | | HIGHEST POSITIONS OF LEADERSHIP (INCLUDING MILITARY) | | | | | | | | | | PRES. 4-H CLUB. CAGS PRES. SOPH. (H.S.) | | | | | | | | | | 7 | | | | | | | | | |
| 2 | | | | | | | | | | WHEN MAN IS DETACHED, INSERT THIS CARD IN HIS SERVICE RECORD. | | | | | | | | | | 3 | | | | | | | | | | 9 | | | | | | | | | |
| 3 FARM HAND, GENERAL | | | | | | | | | | 4 | | | | | | | | | | DROVE TRUCK PART TIME IN CONNECTION WITH FARM WORK. | | | | | | | | | | 11 | | | | | | | | | |
| 4 Q.O. DOMODS | | | | | | | | | | 9-15-44 | | | | | | | | | | WORKED FOR FATHER ON 300 ACRES FARM. RAISED GENERAL CROPS & CATTLE. OPERATED TRACTOR. PLOWED GROUND, PLANTED, CULTIVATED, HARVESTED. | | | | | | | | | | 13 | | | | | | | | | |
| 5 FORMING | | | | | | | | | | 4 \$2500 | | | | | | | | | | GT LAKES 10-2-44 | | | | | | | | | | 14 | | | | | | | | | |
| 6 | | | | | | | | | | INTERVIEWER'S SIGNATURE | | | | | | | | | | INTERVIEWEE'S SIGNATURE | | | | | | | | | | 15 | | | | | | | | | |
| 7 | | | | | | | | | | 1ST RECOM. | | | | | | | | | | 2ND RECOM. | | | | | | | | | | 16 | | | | | | | | | |
| 8 | | | | | | | | | | ASTERISK (*) AFTER TEST NAME INDICATES OLD TYPE NAVY TEST SCORE | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |

MAN'S LAST NAME AGMODY SERVICE RECORD MAN'S SERVICE NO. 8631797

MAN'S LAST NAME ARMSTRONG MAN'S SERVICE NO. 1111

[illegible]

FOLD HERE

| DATE | TRAINING COURSE OR SERVICE SCHOOL (INCLUDING LOCATION) | NO. WKS. TAKEN | MARK | SKILLS OR EQUIPMENT | REMARKS | EXEC. OFF. INITIALS |
|----------|--|----------------|------|---|---------|---------------------|
| 12-21-44 | USS SABLE | 4 | | INSTN. IN ARRESTING GEAR AND FLIGHT DECK PROCEDURE. | | |

Name AAMODT, Carroll Ordell
 (Last) (First) (Middle)
 863 17 97 Rate S2c Class V'6
 (Service No.)
 Date Reported Aboard: 8 10 July 1945
CASU 26 Temdu FFT USS MIDWAY
 (Present Ship or Station)
USN BKS, NEWPORT NEWS, VA.
 (Ship or Station Received From)

AUG 8 1945

TEMPORARY DUTY COMPLETED THIS DATE

P. DEAN
LT. USNR
PERSONNEL OFFICER

24 July 1945: Transferred to
 NAAF, Otis Field, Camp Edwards,
 Mass., for temp. duty as messman.
 AUTH: ComFtR Newport Pt, Spedltr
 12-12, per. 2357 of 26 May 1945.

Date Transferred 24 July 1945
 To NAAF, Otis Field, Camp Edwards, Mass.
 for temp. duty as messman.
R. T. LORD, Lt. Comdr. USNR.
 (SLC)
 Signature and Rank of Officer Authorized to Sign

Date Received Aboard: 8 Aug. 1945
CASU 26 for duty, T.D. completed.
 (New Ship or Station)
NAAF, Otis Field, Camp Edwards, Mass.
 (Last Ship or Station)
R.T. LORD, Lt. Comdr. USNR (SLC)
 Signature and Rank of Officer Authorized to Sign

DUPLICATE
 FOR BuPers ENLISTED MAN'S JACKET

Name AAMODT, Carroll Ordell
 (Name in Full, Surname to the Left)
 863 17 97 Rate S2c V6
 (Service No.)
 Date Reported Aboard: 8 Aug. 1945
CASU 26
 (Present Ship or Station)
NAAF, Otis Field, Camp Edwards, Mass.
 (Ship or Station Received From)

Sept. 1945: Trans. Temdu completed this
 date. To the PCO USS MIDWAY: Newport News
 Va. CPO USS MIDWAY & Onbd when comman-
 AUTH: NTS, Npt.R.I. Desp. 051720 of Sept.

Sept 45: Trans. to R/S, Newport News, Va.,
 USS MIDWAY ON BOARD WHEN COMMISSIONED
 at NIS, Newport, R.I. to arrive 1 Sept 45
 trans. via ship to Newport News, Va.

ALL: NTS, Desp. 312339 of August 1945.

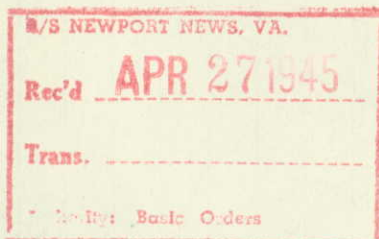
Date Transferred 7 September 1945
 To R/S, Newport News, Va. CPO MIDWAY
R. T. LORD, Lt. Comdr. USNR. (SLC)
 Signature and Rank of Commanding Officer.

Date Received Aboard: 10 September 1945
U.S.S. MIDWAY (CVB41)
 (New Ship or Station)
RecBks Newport News, Va.
 (Last Ship or Station)
R.C. BAUER, Commander, USN (RJP)
 Signature and Rank of Officer Authorized to Sign

DUPLICATE
 FOR BuPers ENLISTED MAN'S JACKET

[illegible][illegible]

Name AAMODT, Carroll Ordell
 (Last) (First) (Middle)
863 17 97 Rate S2c Class V6 S
 (Service No.)
 Date Reported Aboard: 26 April 1945.
CASU #21, FTT USS MIDWAY (CVB-41)
 (Present Ship or Station)
USS ANTIETAM (CV-36)
 (Ship or Station Received From)



AUTH: ComAirLant Serial 2989-AFA of
 7 March 1945.

Date Transferred 27 April 1945.
 By S/S Newport News, Va. for duty in the
USS MIDWAY (CVB-41) detail and on board
 To when commissioned.
T. D. GINN, Capt. USN (NSR)
 Signature and Rank of Officer Authorized to Sign

Date Received Aboard: _____

 (New Ship or Station)

 (Last Ship or Station)

 Signature and Rank of Officer Authorized to Sign

DUPLICATE
 FOR BuPers ENLISTED MAN'S JACKET

Name AAMODT, Carroll Ordell
 (Name in Full, Surname to the Left)
863 17 97 Rate S2c V6
 (Service No.)
 Date Reported Aboard: 9 July 1945
USN BAKS., NEWPORT NEWS, VA.
 (Present Ship or Station)
CASU # 21
 (Ship or Station Received From)

AUTH: ComServForLant SubOrdCom
 ser. 35247 of 7 July 1945

Date Transferred 9 July 1945
 To OTIS FIELD, CAMP EDWARD, MASS.
A.E. BARTLETT, Comdr. USN, Comdg.
 Signature and Rank of Officer Authorized to Sign
13 July 1945 (CTS)

CASU #26 Transferred FTT USS MIDWAY
USN BARRACKS, NEWPORT NEWS, VA.

R. T. LORD, Lt. Comdr. USNR (SLC)

Signature and Rank of Officer Authorized to Sign

DUPLICATE
 FOR BuPers ENLISTED MAN'S JACKET

Name AAMODT, Carroll Ordell
(Name in Full, Surname to the Left)

863 17 97 Rate S2c V6S
(Service No.)

20 March 1945

Date Reported Aboard:

U.S.S. ANTIETAM (CV-36)

U.S.S. CHARGER (CVE-30)
(Present Ship or Station)

Temporary duty, under instr., completed this date. Trans. to CASU 21 NAS, NORFOLK, VA., FFT U.S.S. MIDWAY (CVB-41) and on board when commissioned.

AUTH: ComAirLant Serial 2989-AFA of 7 March 1945.

Authorized to wear American Theatre Campaign Ribbon.

E. L. Ruffin
E. L. RUFFIN,
Lieut., USNR
By direction.

25 APR 1945

Date Transferred

To CASU 21, NAS, NORFOLK, VIRGINIA FFT

J.R. TAGUE, CAPT., USN (ELR)

Signature and Rank of Officer Authorized to Sign

26 April 1945

Date Received Aboard:

CASU 21 FFT USS MIDWAY (CVB-41)

USS ANTIETAM (CV-36)

T. D. GUINN, CAPT., USN (NSR)

Signature and Rank of Officer Authorized to Sign

DUPLICATE

FOR BuPers ENLISTED MAN'S JACKET

Name AAMODT, Carroll Ordell
(Name in Full, Surname to the Left)

863 17 97 Rate S2c V6S
(Service No.)

Date Reported Aboard: 20 March 1945

U.S.S. ANTIETAM (CV-36).

(Present Ship or Station)

U.S.S. CHARGER (CVE-30)

(Ship or Station Received From)

Temporary duty, under instr., completed this date. Trans. to CASU 21 NAS, NORFOLK, VA., FFT U.S.S. MIDWAY (CVB-41) and on board when commissioned.

AUTH: ComAirLant Serial 2989-AFA of 7 March 1945.

Authorized to wear American Theatre Campaign Ribbon.

E. L. Ruffin
E. L. RUFFIN,
Lieut., USNR
By direction.

25 APR 1945

Date Transferred

To CASU 21, NAS, NORFOLK, VIRGINIA FFT

J.R. TAGUE, CAPT., USN (ELR)

Signature and Rank of Officer Authorized to Sign

Date Received Aboard:

(New Ship or Station)

(Last Ship or Station)

Signature and Rank of Officer Authorized to Sign

TRIPPLICATE

FORWARD TO BuPers IMMEDIATELY UPON TRANSFER

Name AAMODT, Carroll Ordell

(Name in Full, Surname to the Left)

863 17 97 Rate S2c SVV6

(Service No.)

Date Reported Aboard: 20 January 1945

U.S.S. CHARGER (CVE-30)

(Present Ship or Station)

RS, NOB, NORVA.

(Ship or Station Received From)

Received instructions and qualified as
a member of an arresting
gear crew.

19 March 1945: Transferred this
date to the R/S, Norfolk, Va. FFT
to the U.S.S. ANTIETAM (CV-36) for
temp. duty under instr. for
approx. five (5) weeks. Upon
completion of temp. duty under
instr. transfer to CASU 21, NAS,
Norfolk, Va. for temp. duty
under instr. and for further
transfer to the U.S.S. MIDWAY
(CVB-41) for duty when comm.

AUTH: ComAirLant Serial 2989-AFA
of 7 March 1945.

REC. STA., N.O.B., NORFOLK, VA.

REPORTED 19 MAR 1945

TRANSFERRED MAR 20 1945

19 March 1945

Date Transferred

To R/S, Norfolk, Va. FFT
By direction of Commanding Off.

G. L. FOSTER, Ship's Clerk., USN.

(Signature and Rank of Commanding Officer)

Date Received Aboard: 20 March 1945

U.S.S. ANTIETAM (CV-36)

(New Ship or Station)

U.S.S. CHARGER (CVE-30)

(Last Ship or Station)

J. R. TAGUE, CAPT., USN (ELR)

(Signature and Rank of Commanding Officer)

DUPLICATE

FOR BuPers ENLISTED MAN'S JACKET

Name AAMODT, Carroll Ordell

(Last)

(First)

(Middle)

863 17 97

(Service No.)

Rate

S2c

Class

V6 S

Date Reported Aboard: 26 April 1945.

CASU #21, FFT USS MIDWAY (CVB-41)

(Present Ship or Station)

USS ANTIETAM (CV-36)

(Ship or Station Received From)

AUTH: ComAirLant Serial 2989-AFA of
7 March 1945.

27 April 1945.

Date Transferred

R/S Newport News, Va. for duty in the
USS MIDWAY (CVB-41) detail and on board
when commissioned.

T. D. GUINN, Capt. USN (NSR)

(Signature and Rank of Officer Authorized to Sign)

Date Received Aboard:

(New Ship or Station)

(Last Ship or Station)

(Signature and Rank of Officer Authorized to Sign)

TRIPLICATE

FORWARD TO BuPers IMMEDIATELY UPON TRANSFER

[illegible]

Name AAMODT, Carroll Ordell
(Name in Full, Surname to the Left)
863 17 97 Rate AS V-6 SV
(Service No.)
Date Reported Aboard: 23 SEP 1944
USNTC GREAT LAKES, ILL.
USNRS (Present Ship or Station) MINN.
(Ship or Station Received From)

Substance of contents of Soldier's and Sailor's Civil Relief Act of 1940 and of Public Resolution No. 96, 76th Congress, has been explained to this man.

REC'D GAS MASK DRILL AND CHAMBER INSTRUCTION
RECEIVED RIFLE RANGE INSTRUCTION.
NIGHT LOOKOUT TRAINER.

Qualified Swimmer, "third class."

9 OCT 1944 Application for N.S.D.
Ins. submitted by this man and forwarded with letter of transmittal.

ADVANCED TO S2C

Authority credit rate five

5 DEC 1944 Completed recruit training

D. E. WEICHMAN

D. E. WEICHMAN, Lieut. (jg), W-V (S), USNR

TRAN: FOR A 4 WEEKS COURSE IN FLIGHT
DECK & ARRESTING GEAR PROCEDURE.

AUTH: BuPers ltr. Pers-6363-CC-1

Date Transferred 15 February 1944

21 DECEMBER 1944

To CO, USS SABLE, CHICAGO, ILLINIOS.

R.R.M. EMMET, Commodore, USN.

Date Received Aboard: 21 Dec. 1944

U.S.S. SABLE (IX81)
(New Ship or Station)

USNTC, Great Lakes, Ill.
(Last Ship or Station)

H.H. CROW, Comdr., USNR.
Signature and Rank of Commanding Officer
Executive Officer.

Name AAMODT, Carroll O.
(Name in Full, Surname to the Left)
863 17 97 Rate S2c SV6 USNR
(Service No.)
Date Reported Aboard: 21 December 1944
U.S.S. SABLE
(Present Ship or Station)
USNTC, Great Lakes, Illinois
(Ship or Station Received From)

19 January 1945

Completed four (4) weeks temporary duty under instruction in arresting gear and flight Deck procedure.

Transferred this date to the Receiving Station, Norfolk, Virginia, for further transfer to the U.S.S. CHARGER (CVE-30) for duty.

Art. D-7008 BuPers Manual Complied with.

Date Transferred 19 January 1945

To RS NORVA FFT U.S.S. CHARGER (CVE30)

H.H. CROW, Comdr., USNR
Signature and Rank of Officer Authorized to Sign

Date Received Aboard: 20 Jan. 1945

USS CHARGER (CVE30)
(New Ship or Station)

USS SABLE VIA RS, NOB, NORVA.
By direction of Commanding Officer
(Last Ship or Station)

G. L. FOSTER, Ship's Clerk, US
Signature and Rank of Officer Authorized to Sign
DUPLICATE

FOR BuPers ENLISTED MAN'S JACKET

PROFESSIONAL QUALIFICATIONS, CONDUCT, AND MARKS

[illegible]

(Rev. Sept., 1939)

NTCGL-4-24-44-210M-B-4

PROFESSIONAL QUALIFICATIONS, CONDUCT, AND MARKS

[illegible]

Final average on Disch., Death,
Desertion, Ret., Trans. F. R.

863 17 97 AAMODT, CARROLL ORDELL
(Service No.) (Name in Full, Surname to the Left)

Rate S2C USN ☐ RET. ☐ USNR ☒ SV6
USN(I) ☐ (Class)

Date Reported Aboard: 10 SEPTEMBER 1945

U. S. S. MIDWAY (CVB 41)
(Present Ship or Station)

CHANGE IN RATE OR RESERVE CLASS

TO: S1C SV6
(Rate Abbreviation) (USNR Class)

FROM: S2C SV6
(Rate Abbreviation) (USNR Class)

Date Change Effected: 1 MARCH 1946

Authority and Remarks: NAVACT #14-46

Date Authority Received: 28 JANUARY 1946

☒ Qualified in all respects as required by current BuPers instructions.

☐ Advancement to fill vacancy ☐ In excess.

☐ Examination Report (Form Nav. Pers 624) submitted (if required).

☐ For Petty Officers, Article 1275NR read and appointment accepted.

CHANGE IN LONGEVITY FOR PAY PURPOSES

X
(Years) (Mos.) (Days) Other Service*
X
(Years) (Mos.) (Days) Naval Service
X
(Years) (Mos.) (Days) Net Service completed on X (Date)
*Act 6-16-42 & BuPers Statement of service filed in service record. X

1751-46

A. H. WILSON, COMMANDER, U.S. NAVY,
(Name and Signature)

EXECUTIVE

(See art. 2025(2), N. R.)

Officer

PART 3—Forward to BuPers Immediately
For Enlisted Man's Jacket

Name AAMODT, Carroll Ordell
(Name in Full, Surname to the Left)

863 17 97 Rate A.S., USN-I
(Service No.)

Date Reported Aboard: 22 Sept. 1944

USNRS, Minneapolis, Minnesota
(Present Ship or Station)

Inducted
(Ship or Station Received From)

22 Sept. 1944 Inducted into the

U.S. Navy as A.S., USN-I, this date,
in accordance with Selective Training
& Service Act of 1940, as amended.

Indicated willingness to serve in
the United States Navy and was act-
ually inducted therein in accordance
with the established Navy induction
procedure.

22 Sept. 1944 Voluntarily enlisted
as A.S., Class V-6, U.S. Naval
Reserve, SV, this date to serve for
a period of two (2) years. BNP form
603 (Shipping Articles) executed.
Placed on active duty with pay and
transferred for recruit training.

FAILED EDDY TEST

Date Transferred: 22 Sept. 1944

To: NavTraCen. Great Lakes, Ill.

L.E. Wollett

Signature and Rank of Commanding Officer
L.E. WOLLETT Lt(jg) USN(Ret).

Date Received Aboard:

23 SEP 1944

USNRC GREAT LAKES ILLINOIS

(New Ship or Station)

USNRS MINNEAPOLIS MINN.

(Last Ship or Station)

R.R.M. EMMET, Captain, USN

Signature and Rank of Commanding Officer.

DUPLICATE
FOR BuPers ENLISTED MAN'S JACKET

Name AAMODT Carroll Ordell

(Name in full, surname to the left)

863 17 97 rate S 1/c SV V-6

(Service number)

Date reported aboard 18 June 1946

USN PSC, Minneapolis, Minn.

(Present ship or station)

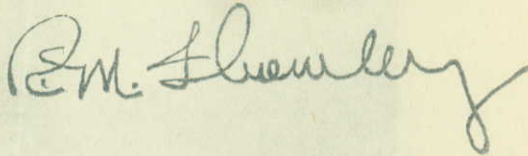
USS MIDWAY

(Ship or station received from)

21 June 1946

Discharged this date at USN PSC,
Minneapolis, Minn. with an Honor-
able Discharge by reason of Con-
venience of the Government.
Honorable Discharge Certificate
No. C. 356 5066 issued.

NavPers 554 issued.



R. M. THOMLEY, CSC, USN

Date transferred

To

Signature and rank of officer authorized to sign

Date received aboard

(New ship or station)

(Last ship or station)

Signature and rank of officer authorized to sign

DUPLICATE

FOR BuPers ENLISTED MAN'S JACKET

GPO

Name AAMODT, Carroll Ordell

(Last)

(First)

(Middle)

863 17 97 Rate S1c Class V6

(Service No.)

Rate

Class

V6

Date Reported Aboard: 9/10/45

U.S.S. MIDWAY (CVB 41)

(Present Ship or Station)

RecBks, Newport, News, Va.

(Ship or Station Received From)

HAS SERVED OUTSIDE CONTINENTAL
LIMITS OF UNITED STATES.

MAN INTERVIEWED, DOES NOT DESIRE
TO REENLIST.

Auth: ALNAV 395-45 as amended

6/14/46

DR/E, NOB, Norfolk, Va. FFT to PSC,
For Discharge

To Minneapolis, Minn.

F. MASSEY, Commander, USN

Signature and Rank of Officer Authorized to Sign

Date Received Aboard:

18 JUN 1946

USN PERSEPCEE

Minneapolis

(New Ship or Station)

(Last Ship or Station)

Signature and Rank of Officer Authorized to Sign

DUPLICATE

FOR BuPers ENLISTED MAN'S JACKET

PROFESSIONAL QUALIFICATIONS, CONDUCT, AND MARKS

| Date | Rate | Proficiency in rating | Seamanship | Mechanical ability | Ability as leader of men | Special Qualification or Special Detail | Conduct | Initials of Executive Officer |
|--|------|-----------------------|------------|--------------------|--------------------------|---|---------|-------------------------------|
| 6/14/46 | SLC | 3.5 | 3.5 | 3.5 | 3.5 | Trans. | 4.0 FM | |
| | | | | | | | | |
| | | | | | | | | |
| | | | | | | | | |
| | | | | | | | | |
| | | | | | | | | |
| | | | | | | | | |
| | | | | | | | | |
| | | | | | | | | |
| Final average on L. sch., Death, Desertion, Ret., Trans. F. R. | SLC | 3.3 | 3.3 | | 3.3 | Honorable Discharge | 3.9 | |

Name AAMODT, Carroll Ordell
(Last) (First) (Middle)
863 17 97 Rate S2c Class V-6
(Service No.)
 Date Reported Aboard: 10 September 1945
U.S.S. MIDWAY (CVB-41)
(Present Ship or Station)
RecBks, Newport News, Va.
(Ship or Station Received From)

1-16-46: Successfully completed Navy Training Course and Practical Factors for advancement in Rating to S1c with a Mark of 3.1.

D. S. Harris
 D. S. HARRIS, Ens., USN,
 Personnel Officer,
 By direction.

Date Transferred _____

To _____

 Signature and Rank of Officer Authorized to Sign

Date Received Aboard: _____

(New Ship or Station)

(Last Ship or Station)

 Signature and Rank of Officer Authorized to Sign

DUPLICATE
 FOR BuPers ENLISTED MAN'S JACKET

Name AAMODT, Carroll Ordell
(Name in Full, Surname to the Left)
863 17 97 Rate S2c V6 USNR
(Service No.)
 Date Reported Aboard: 27 April 1945
RecSta., Newport News, Virginia.
(Present Ship or Station)
CASU #21
(Ship or Station Received From)

21 May 1945

CAPTAIN'S MAST

OFFENSE AOL 3 1/2 hours.

PUNISHMENT Warned

J. A. Lambert
 Jean A. Lambert, Lieut. Comdr., USN
 Commanding Officer.

Date Transferred _____

To _____

 Signature and Rank of Commanding Officer.

Date Received Aboard: _____

(New Ship or Station)

(Last Ship or Station)

 Signature and Rank of Commanding Officer.

DUPLICATE
 FOR BuPers ENLISTED MAN'S JACKET

Final average on Disch., Death,
Desertion, Ret. Trans. F. R.

PROFESSIONAL QUALIFICATIONS, CONDUCT, AND MARKS

[illegible]

Final average on Disch., Death,
Desertion, Ret., Trans. F. R.

NAVPERS 807-(4-44)

No. 863-17-97

V 6

A A M O D T

CARROLL ORDELL

(Previous Service)

(C. S. C. Number)