

USE FOR ENLISTMENTS AS FOLLOWS:-

**FOR 3 YRS. IN** 1936 | **FOR 1 YR. IN** 1940 | 1938 | 1942

Hassell, Courtney <sup>E.</sup>

Guide No.

(1) NAME (Print full name, LAST NAME FIRST)

215 West 148th St. N.Y.

(2) ADDRESS (House Number & Street)

(City)

(State)

(3) Re-Enlisted 22 May

19 46 for  (A)  (B) Yrs. In Company G

By Capt. Philip Reed

(Name of Officer)

| (4) OCCUPATION | AGE | WHERE BORN     |       | HEIGHT |        | COLOR OF |      |            |
|----------------|-----|----------------|-------|--------|--------|----------|------|------------|
|                |     | City or County | State | Feet   | Inches | Eyes     | Hair | Complexion |
| Student        | 17  | N.Y.C.         | N.Y.  | 5      | 11     | Brn.     | Blk. | Brn.       |

(5) Prior Service  
(See instructions for form)

None

(6) Prior N.C.O. Grades , R.S.O. dated 19 . , R.S.O. dated 19 . W.C.F.?

Prior N.C.O. Grades , R.S.O. dated 19 . , R.S.O. dated 19 . W.C.F.?

|             |             |      |      |        |        |
|-------------|-------------|------|------|--------|--------|
| (7)         | Appointed   | } To | Date | P.P.   | R.S.O. |
|             | Reduced     |      |      |        |        |
|             | Transferred | } To | Date | P.P.   | R.S.O. |
|             | Appointed   |      |      |        |        |
|             | Reduced     | } To | Date | P.P.   | R.S.O. |
|             | Transferred |      |      |        |        |
|             | Appointed   | } To | Date | P.P.   | R.S.O. |
|             | Reduced     |      |      |        |        |
| Transferred | } To        | Date | P.P. | R.S.O. |        |
| Appointed   |             |      |      |        |        |
| Reduced     | } To        | Date | P.P. | R.S.O. |        |
| Transferred |             |      |      |        |        |
| Appointed   | } To        | Date | P.P. | R.S.O. |        |
| Reduced     |             |      |      |        |        |
| Transferred | } To        | Date | P.P. | R.S.O. |        |
| Appointed   |             |      |      |        |        |
| Reduced     | } To        | Date | P.P. | R.S.O. |        |
| Transferred |             |      |      |        |        |

(8) Commissioned Rank Date P.P. S.O. A.G.O., N.Y.

(9) Discharge Date Authority

