

Name **CHRISTOFFERSON - HAROLD**  
Enlisted ~~XXX~~ at **USS SALT STE MARIE MICHIGAN**

Service Number **190-38-00**

Enrolled  
Age at Entrance **21 YRS. 8 MOS.**

Date **8-7-18**  
Rate **HOSPITAL APPRENTICE 2ND CLASS**

~~XXX~~  
U. S. N. R. F.

Home Address **----**

Town **MUNISING**  
State **MICH.**  
Served as

**D**

Served at  
County **---**

From To

No. Days

**NAVAL TRAINING STATION  
GREAT LAKES ILL.**

**8-9-18**

**11-11-18**

**HOSPITAL  
APPRENTICE 2ND  
CLASS**

**96**

Remarks:

Date Discharge  
Place Inactive Duty

**10-8-19  
NAVAL TRAINING STATION GREAT LAKES ILL.**

**HOSPITAL APPRENTICE  
Rating at Discharge 1ST CLASS.**

of  
R.

AUG 10 1921

Date	_____
<del>Disapproved</del>	_____
Approved	_____
70312	_____
Claim No.	_____