

Name **MC MILLAN-DONALD**Service Number **133-51-90**

Enlisted

at **U.S.S. DON JUAN DE AUSTRIA**

Enrolled

Date **5-2-17**Age at Entrance **20 YRS. 3 MOS.**

Rate

HOSPITAL APPRENTICE 1 CLASSHome Address **1488 FOREST AVE. E.**Town **DETROIT**

State

MICH.~~U.S.N.~~

U. S. N. R. F.

0

Served at

From

To

Served as

No. Days

**U.S.S. DON JUAN DE
AUSTRIA
NAVAL HOSPITAL NEWPORT
R.I.
PATROL SECTION NEW
LONDON CONN.**

5-2-17**12-11-17****HOSPITAL APPREN-
TICE 1 CLASS****275****12-11-17****2-11-18****PHARMACISTS MATE
3 CLASS****81****2-11-18****11-11-18****PHARMACISTS MATE
2 CLASS****99****PHARMACISTS MATE
1 CLASS****103**

Remarks:

Date ~~Discharge~~

Place

Inactive Duty

3-9-19 U.S.S. DON JUAN DE AUSTRIA

Rating at Discharge

**CHIEF PHARMACISTS
MATE**

Date JUL 25 1921	
Disapproved	
Approved	
Claim No.	49839