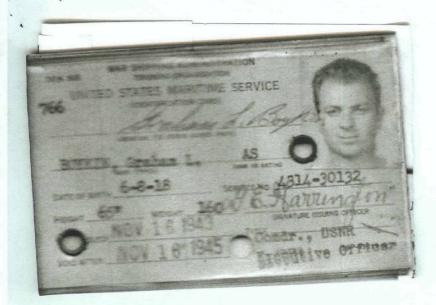
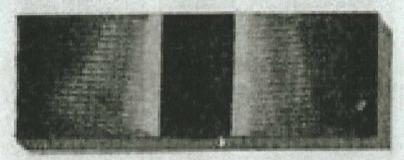
(attached)

- 3. Boykin, Graham L. (No Photo) Jan Boykin Arthur's Bro. {Merchant Marines} Notes:
 - According to Jan & Family members her brother was in the Merchant Marines during WWII
 - According to Wilson County Reg. of Deed, his Military Discharge or records wasn't located there.
 - No Photo was located in the WWII Veteran Photo Binder located in the Wilson County Library Genealogy Room.
 - In the Wilson County Cemetery Book for Evergreen Cemetery list the following: Graham L. Boykin b. 09 Oct 1917 - d. 11 Jun 1990
 - According to Graham's Son E. L. Boykin, and his Sisters there are several documents and pictures to support his WWII Service that will be provided later. ATTACHED ARE THOSE DOCUMENTS PROVIDED.



WAR SHIPPING ADMINISTRATION



This is to certify that Graham L. Boykin

Atlantic War Zone Bar

confirming active service with THE UNITED STATES MERCHANT MARINE in that war area.

AS LAWN ADMINISTRATOR Form MS-73 (December 1942)

United States

PAUL H PAULSEN, Lt. Comdr.

~(Training Officer)



Maritime Service

JOHN L. BEEBE, Captain, USNR

(Superintendent)

SIN

CERTIFICATE OF GRADUATION

FROM

U. S. MARITIME SERVICE TRAINING STATION

| | SHEEPSHEAD BAI, NEW IURA | | |
|------------------------------|-------------------------------|------------------------------|--|
| m | BOYKIN, Graham Le | ee 4314-30132 | |
| This is to certify that | (Name) | (Service number) | |
| | the course of training for ap | prentice seaman in the | |
| branch at the MARITIME SI | ERVICE TRAINING STATION, | SHEEPSHEAD BAY, NEW YORK | |
| and is this date graduated | and regularly enrolled in the | grade of Seaman 2/c | |
| His training at this station | included 30 | hours of Elementary Gunnery. | |
| Dated this | y of APR 8 1911/194 | Home S. 12 . h | |
| John of Bur | in | | |

(FRONT)

| | | | - |
|--|--------------------------|----------------------|--------|
| P | 6 | 1 | |
| Name 250 X | /[[.ecf] | (First) / = (Midd | ile) |
| Residence / | 5/1 5. (xoldsbo= | O WI/SOZT (State | N.C. |
| Place of birth | (Street and number) N. C | Date of birth 6-8 | 3-1918 |
| Citizenship—N | ative born N | aturalized(Place, da | te) |
| | DESCRIPTION | OF ENROLLEE | |
| | | 11 | |
| Race WEIT | Height 3 | 15 Din, Weight / | 160 |
| Eyes 3/22 | ze/ / | Hair Brown | |
| The state of the s | marks | | |
| | | | |
| | | | |
| | THUMI | BPRINT | |
| | LEFT THUMB | RIGHT THUMB | |
| | | | |
| | | | |

(BACK)

United States (



Maritime Service

Release from Active Duty

| as been released from active duty as StM2c 4-11-44, at Phil | a., Penn'a. (Grade) |
|---|---|
| nd placed in an inactive status in the United St | (Place) TATES MARITIME SERVICE. |
| riginal enrollment at Norfolk, Va. | on 9-20-43 |
| legular enrollment at USMSGS, Phila. Pa. (Place) (Place) (Place) | 0n(Date) 0n |
| ransportation furnished from none (Place) | (Date) |
| tion release from active duty. | E O vong |
| GRAHAM L (Signa BO Yverpalice) | E. O. LONG, Lt. (jg) USMS, Officer-in-Charles. |

SERIAL NUMBER
E511881

CONTRIBED

DEPARTMENT OF COMMERCE BUREAU OF MARINE INSPECTION AND NAVIGATION 3 Certificate of Certificate of Discharge 0 Identification No. Z. 3 LO Rating. (Signature of Seaman) 5 Date of Shipment. No. Place of Shipment I HEREBY CERTIFY that the above entries were made by me and are correct and that the signatures hereto were witnessed by me. Date of Discharge Place of Discharge Dated this United States Shipping Commissioner. (or Master of Vessel) NOTE—Whenever a master performs the duties of the shipping commissioner under this act, the master shall sign the certification on the line designated for the shipping commissioner's signature. Nature of Voyage 9 3 UNITED STATES COAST GUARD 00 Certificate of Identification No. Z_ Certificate of Discharge LO Rating Date of Shipment No. Place of Shipment I HEREBY CERTIFY that the above entries were made by me and are correct and that the signatures hereto were witnessed by me. Date of Discharge

Place of Discharg

Nature of Voyage

(Steam, Motor, Sail or Barge)

(Foreign, Intercoastal or Coastwise)

Dated this.

day of

NOTE-Whenever a master performs the duties of the shipping

commissioner under this act, the master shall sign the certification on the line designated for the shipping commissioner's signature.

United States Shipping Commissioner. (or Master of Vessel) LO Graham Lee Boykin UNITED STATES COAST GUARD 4 5 Certificate of Discharge Certificate of Identification No. Z 439943 00 3 Rating in which employed) 6/5/44 Date of Shipment. New York Place of Shipment I HEREBY CERTIFY that the above entries were made by me 8/16/44 and are correct and that the signatures hereto were witnessed by me. Date of Discharge 16th Place of Discharge Name of Ship S/S Richard J. Cleveland Official No. 244324 Steam (Steam, Motor, Sail or Barge) NOTE-Whenever a master performs the duties of the shipping Class of Vessel commissioner under this act, the master shall sign the certification on the line designated for the shipping commissioner's signature. Nature of Voyage (Foreign, Intercoastal or Coastwise) 0 Name of Seaman Graham Lee Boykin UNITED STATES COAST GUARD 5 LO Certificate of Discharge Certificate of Identification No. z 439943 USA 00 3 Rating___ (Capacity in which employed) 5/15/44 Date of Shipment. No. New York Place of Shipment (Master of Vessel) Serial I HEREBY CERTIFY that the above entries were made by me and are correct and that the signatures hereto were witnessed by me. Date of Discharge New York Dated this June Place of Discharge

Name of Ship.

Official No. 244324

Nature of Voyage.

United States Shipping Co (or Master of Ves

NOTE—Whenever a master performs the duties of the shipping commissioner under this act, the master shall sign the certification on the line designated for the shipping commissioner's signature.

718A

S/S Richard J. Cleveland

Class of Vessel_

(Foreign, Intercoastal or Coastwise)

Foreign

Certificate of

Designation or Change of Beneficiary

SECOND SEAMEN'S WAR RISK POLICY

UNITED STATES OF AMERICA WAR SHIPPING ADMINISTRATION

You are asked to name on this form the person or persons you want to receive your War Risk Life Insurance under the Second Seamen's War Risk Policy. Sign your name on this form when your beneficiary's name has been inserted.

You may designate one or more of the following persons, but no one else:

- (a) Your wife
- (b) Your children
- (d) Your brothers and sisters
- (f) Your nephews and nieces
- (g) Your aunts and uncles
- (e) Your grandparents and grandchildren (c) Your parents

I hereby designate the following person or persons whose name or names appear hereon as the beneficiary or beneficiaries of all insurance on my life under the Second Seamen's War Risk Policy:

(One, two or more may be named if division of insurance is desired) PRIM Address Relationship Relationship If none of the above survive to receive payment, then such of the following as may be living: CONTINGENT Relationship_ Age I request that my life insurance be paid in installments Dated at

THIS DESIGNATION WILL REMAIN IN FORCE UNTIL A NEW CERTIFICATE IS MADE OUT BY THE INSURED.

THIS COPY FOR CREW MEMBER

| Name Box My, Graham Lee |
|--|
| Residence 15/15. Goldsbo+0 Wilson, (Middle) |
| Place of birth W/SOT, N. C. Date of birth 6-8-1918 |
| Citizenship—Native born Naturalized (Place, date) |
| DESCRIPTION OF ENROLLEE |
| 7-10 7-1 110 |
| Race White Height 3/1-5 Din, Weight 160 Eyes Hazel Hair Brown |
| Eyes Hair Brown |
| Distinguishing marks |
| |
| THUMBPRINT |
| |
| LEFT THUMB RIGHT THUMB |
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