

BOARD OF EDUCATION RETIREMENT SYSTEM

500 PARK AVENUE, NEW YORK, N. Y.

TO THE BOARD OF RETIREMENT:

Complying with the rules and regulations governing the Board of Education Retirement System, I submit herewith certain statistical data including a statement of my services as a paid employee of the City of New York in a position paid for out of funds derived from fees prior to entrance into my present position with the Board of Education of The City of New York, N. Y., and as a paid civil service employee of the United States government.

(IMPORTANT!—Please print your answers.) **Bureau of Attendance,**

1. Name	Shields Frank J.			2. Present Bureau or School and Borough		
Family Name	First Name (in Full)			Month	Day	Year
3. Present Title	Attendance Officer			5. Date of Present Appointment		
	4. Date of Birth			Month	Day	Year
	Dec. 6th 1886			Jan. 5th 1920		

6. Statement of Service

(Use a separate line for each change of title or in rate of compensation, if any.)

Name of Office or Bureau where service was rendered	TITLE	From			To			Rate of Compensation	Total Compensation actually received
		Month	Day	Year	Month	Day	Year		
U.S. Post Office	Sub. carrier	April	13	1909	July	31	1910	35cents hr.	\$190.
"	" clerk	Aug.	1	1910	"	25	1911	"	160.
"	Reg'lr "	July	26	1911	Jan.	31	1912	\$600. per annum	\$343.42
"	" carrier	Feb.	1	1912	Sept.	30	1912	"	450.
"	" "	Oct.	1	1912	Sept.	30	1913	800. "	800.
"	" "	Oct.	1	1913	Sept.	30	1914	900. "	900.
"	" "	Oct.	1	1914	Sept.	30	1915	1000. "	1000.
"	" "	Oct.	1	1915	Sept.	30	1916	1100. "	1100.
"	" "	Oct.	1	1916	June	30	1918	1200. "	2100.
"	" "	July	1	1918	June	30	1919	1400. "	1400.
"	" "	July	1	1919	April	15	1920	1500. "	766.12
									\$9209.54

File written verification by head of department where services were rendered.

I hereby certify that all of the answers to the questions were given by me; I further certify that I am not receiving a pension or a retirement allowance from any source on account of the service enumerated above; and I further certify that the answers are true and correct to the best of my information, knowledge and belief.

Signature

Date

Residence Address **9612 3rd Ave, Brooklyn,**
N. Y.

State of New York, The City of New York, County of.....

On this..... day of..... 193 appeared before me the said.....
to me personally known and known to me to be the individual who executed the foregoing instrument, and who acknowledged to me that he (or she) executed the same, and that the statements made thereon are complete and true to the best of his (or her) information, knowledge and belief.

(Signature of officer)

(COMPLETE OFFICIAL TITLE)

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If you have an official seal, affix it.

Schedule:

1921-\$1690
1922- 1820
1923- 1950
1924- 2080
1925- 2210
1926- 2340
1927- 2340
1928- 2340
1929- 3000

RATE %
.047

CHICAGO

DEDUCTIONS###

RATE
780.

Schedule:

1921	-	1291
1922	-	1820
1923	-	1850
1924	-	1920
1925	-	2000
1926	-	2070
1927	-	2140
1928	-	2210
1929	-	2280
1930	-	2350