

MILLER
EARL GLAWSON
21692

MEMORANDUM FOR

P. 64

MRS. BESSIE MILLER
c/o MRS. HAROLD WARD
CITY MARKET BUILDING
BRUNSWICK STREET
HALIFAX N.S.

Any further communication on this subject should be addressed to:—

THE ADMINISTRATOR OF ESTATES,
DEPARTMENT OF NATIONAL DEFENCE,
OTTAWA, ONTARIO.

and the following number quoted:—

H.Q.N.S. 62-M-561 fd 138

DEPARTMENT OF NATIONAL DEFENCE
OTTAWA, ONT.

OCTOBER 14th, 1942. 194

For the purpose of record and in the event of there being any balance of pay, medals or memorials available for distribution (according to law) on account of the late

MILLER, EARL GLAWSON, Stkr. 1st Cl.

O.N. 21692, R. C. N.

it is necessary that the requisite information regarding the deceased and his relatives should be furnished on the inside of this form in strict accordance with the printed instructions. The particulars required are to be carefully filled in and the Declaration on the back should then be signed in the presence of a Clergyman, Priest, Local Magistrate, Commissioner for Oaths or Notary Public, who should be asked to complete and sign the Certificate. This form should then be returned to the above address.

(H.R. WADE) LT. COMMANDER
FOR (L.M. FIRTH) LT. COLONEL
Administrator of Estates.



ANSWER IN FULL ALL APPLICABLE QUESTIONS

STATEMENT of the Names, Ages and Addresses or Dates of Death, of all the relatives that the deceased ever had in each of the degrees specified below.

Degrees of Relationship	RELATIVES required to be accounted for	INFORMANT'S STATEMENT		
		NAME IN FULL of any Relative, if any, in each degree inquired for	Age	ADDRESS IN FULL of each surviving Relative, opposite his or her name, and date of death of each deceased relative
1	Widow of the Deceased.....	<i>Not married</i>		
2	Children of the Deceased and dates of their Births.....	<i>no children</i>		
3	Father of the Deceased.....	<i>Frederick C.P. Miller Fosterfather</i>	<i>Died</i>	<i>Sept 29/1936</i>
4	Mother of the Deceased.....	<i>Mrs Bessie M Miller Fostermother</i>		<i>24 June at Halifax, N.S.</i>
5	Brothers of the Deceased	Full Blood	<i>Benjamin Miller</i>	<i>24 R.C.N. 24 June at Halifax N.S.</i>
		Half Blood	<i>none</i>	
6	Sisters of the Deceased	Full Blood	<i>none</i>	
		Half Blood	<i>none</i>	
7	Names of brothers or sisters (whether of the full or the half blood) of the Deceased, who are dead, and date of death of each.	Names and ages of their children (if any)	Address of their children	
	<i>None</i>	<i>none</i>		

ONLY IF NO RELATIVES IN THE DEGREES ABOVE ARE NOW LIVING, THE FOLLOWING PARTICULARS SHOULD BE GIVEN

		NAMES OF THOSE LIVING	Age	ADDRESS IN FULL
8	Grand-Parents of the Deceased...			
9	Uncles and Aunts by blood of the Deceased (not Uncles and Aunts by marriage).....		Age	

FULL PARTICULARS AS TO IDENTITY

10	What is the full name of the deceased?	Earl Gleason Miller
11	Give the month and year of his birth.	March 11 th / 1919
12	Where and when were his parents married?	Moncton, N.B.
13	If deceased was married, state place and date of marriage.	no
14	Did he leave a Will? If so, a copy should be attached hereto.	no
15	Did he leave a bank account? If so, give full particulars.	not to my knowledge
16	Is there any other estate which will necessitate application being made for Probate of the Will or Letters of Administration of the estate?	none
17	State <i>your own</i> postal address in full.	24 June St Halifax, N.S.

PARTICULARS OF DOMICILE

18	Where was deceased born?	Halifax, N.S.
19	State, in order, the Province (or State) and country in which the deceased resided and the period of time in each, and in which last.	Spent all but two yrs in Halifax, N.S. The two yrs were spent in Moncton when about 13 yrs old
20	What was the nature of his employment?	Clerk
21	Did he own the premises in which he lived? If so, where?	no
22	Did he ever state verbally, or in writing, where he intended to make his permanent home?	no

OTHER PARTICULARS

23	Did the deceased after enlistment incur any debts for:— (a) His own separate board and lodging while on service. (b) Service clothing and equipment. An itemized account for each such debt should be attached hereto, and if same is correct you should mark the bill "approved" and sign same. If believed incorrect, give particulars.	no no
24	Have you or any other relative paid the funeral expenses or any part thereof? If so, attach itemized accounts showing amount paid, and by whom. (NOTE:—The Government pays funeral expenses within the amounts authorized in the Regulations, where death occurs and burial is made Overseas as well as where death occurs and burial is made in Canada, and if a relative has already paid those expenses the Government will reimburse such relative to the extent of the amount authorized in the Regulations. Any amount of such expenses in excess of those authorized in the Regulations is not payable by the Government nor is it chargeable against the service estate of the deceased.)	Lost at sea

(PLEASE TURN OVER)

DECLARATION

*Insert degree of relationship for example, "Widow," "Father," "Brother," etc

I hereby declare that the foregoing particulars are correct, and a true and complete statement of all the relatives that the deceased ever had in the degrees inquired for ; and that I am the

* Foster motherof the deceased.

N.B. To be signed in full in the presence of a Clergyman, Priest, Local Magistrate, Commissioner or Notary Public.

Mrs. Bessie M. Miller.

{Signature of Informant

CERTIFICATE

I hereby certify that, to the best of my knowledge and belief Mrs Bessie M.

*See above Miller { Name of Informant } is the * Foster mother of the Deceased above described, and I believe the above Declaration and the Statement of Relatives made by the Informant and signed in my presence to be complete and correct.

Dated at Halifax this 20th day of October 1942

Signature of Clergyman, Priest, Magistrate, Commissioner or Notary Public

W. R. Seeley

Qualification Clergyman

Address 550 Robie St. Halifax, N.S.

NOTE.—Before granting the above Certificate, care should be taken to see that the Informant gives particulars concerning the death of any Relative stated by him or her to have died, and that the full name and address and age of each surviving Relative enquired after is stated in its proper place in the Statement opposite.

USE SPACE BELOW FOR ANY ADDITIONAL REMARKS YOU MAY WISH TO MAKE

14 NR # 290
SS
[Signature]

QH

N. R. 5
500-11.39
N. S. 8 15-12 5



ATTESTATION FORM

FOR MEN OF THE ROYAL CANADIAN NAVAL RESERVE

Surname **MILLER** Official No.

Christian Names **Earl Clawson** Married, Single or Widower **Single**

Permanent Address	Religion
36 Compton Ave, Halifax, N.S.	Presbyterian.

Date of Birth	Place of Birth	Name and Address of Next of Kin
11 March, 1919.	Town Halifax. County Province N.S.	Mr Benjamin Miller, (Brother) 36 Compton Ave. Halifax.

PERSONAL DESCRIPTION ON ENROLMENT

Height	Chest Measurement	Hair	Eyes	Complexion	Wounds, Scars, Marks
Feet 5	Inflated	Blonde	Blue	Fair	Scar above left eye.
Inches 8½	Deflated 36				
.....	Mean.....				

Date of Enrolment	Rating Enrolled for	Trade or Calling and in whose Employ
4th December, 1939.	Stoker (T)	Fireman "Victorialite"

(B) DECLARATION TO BE MADE BY APPLICANT

I hereby declare as follows:—

- (1) That I am a British Subject domiciled in Canada.
- (2) That I am desirous of being enrolled as member of the Royal Canadian Naval Reserve, and that I accept and agree to abide by the rules of the said Force.
- (3) ~~(a) That it is my intention to follow the sea for a period of at least five years from this date.~~
 - (b) That it is my intention to follow the calling of a Fireman, either at sea or on shore, for a period of five years from this date.
 - ~~(c) That it is my intention to follow the sea in an Engine-room capacity for a period of five years from this date.~~

NOTE.—Candidates for enrolment as *Seaman* are to cross out clauses (b) and (c) above.
Candidates for enrolment as *Stoker* are to cross out clauses (a) and (c) above.
Candidates for enrolment as *E. R. A.* are to cross out clauses (a), (b) and (c) above.
Candidates for enrolment as *Engineman* are to cross out clauses (a) and (b) above.

(4) That I have never been rejected from any of His Majesty's Forces on account of unfitness.

*Cross out clause not applicable

(5) That (a)* I have never served, and am not serving in any Naval, Military, Reserve or Territorial Force.

(b)* I served in NIL for the period shown.

Served in	Rank	From	To
	NIL		

(6) That the particulars contained above are correct and true according to the best of my knowledge and belief.

(7) On being enrolled as a member of the Royal Canadian Naval Reserve, I undertake and bind myself:— **AND/OR DURATION OF HOSTILITIES.**

(a) To serve from the date thereof for five consecutive years, being subject to the provisions of the Naval Service Act, and of the Regulations made in pursuance thereof for the government of the Royal Canadian Naval Reserve, and to the customs and usages of His Majesty's Canadian Naval Service.

(b) To report for active service if called upon in time of war or emergency, and, if called into active service, to serve ashore or afloat as may be directed according to where my services are required.

(c) To keep in good repair and condition the articles of uniform and any articles of outfit which may be issued to me and to return them to the nearest Registrar or to Training Headquarters prior to my discharge or when required so to do by any authorized person, or to pay compensation for any loss or damage thereto other than fair wear and tear; and also not to wear such uniform or outfit (which is and remains the property of the Crown) except when on Naval duty.

(8) I am willing to be vaccinated or re-vaccinated and inoculated as considered necessary by the appropriate authorities.

Dated this 4th day of December, 1939.

Earl G. Miller
(Signature of Applicant)

(C) **OATH OF ALLEGIANCE**

I, Earl Clawson MILLER do sincerely promise and swear (or solemnly declare) that I will be faithful and bear true allegiance to His Britannic Majesty.

Signature of Applicant Earl G. Miller

Witness [Signature]

Date 4th December, 1939. Rank Payr. Lieutenant R.C.N.R.

The Oath of Allegiance may be administered by a Commissioned Officer of the Naval Service.

(D) **CERTIFICATE OF ATTESTING OFFICIAL**

I hereby certify that all the foregoing statements were made by the man above named, in my presence, and that he has made and signed the above declaration and has taken the oath of allegiance in my presence this 4th day of December, 1939.

[Signature]
(Signature of Officer and rank)

Payr. Lieutenant R.C.N.R.

NOTE.—When this form has been completed it is to be forwarded to Naval Service Headquarters, Ottawa, for custody.

APPROVED
[Signature]
Commander R. C. N.

MEDICALLY fit.
[Signature]
SURGEON COMMANDER

ORIGINAL



P022621

Can. B. 207

20M-11-39 (3063)
N.S. 815-2-207

MAY 10 1940
1163-221-5661
CANADA

CERTIFICATE OF MEDICAL EXAMINATION OF OFFICERS, MEN AND BOYS,
Final Examination NAVAL SERVICE OF CANADA

(R.C.N. OR RESERVE FORCES)

19

NOTE—This Certificate is to be completed by the Examining Medical Officer and forwarded to the Naval Secretary, Department of National Defence, Ottawa.

I, the undersigned, have examined Miller Earl Gleason
candidate for entry as STO II R.C.N.
and I believe him to be *in all respects fit for His Majesty's Service. Pending entry.
unfit for His Majesty's Service, for the reason stated below. He has signed
the Certificate given below in my presence.

Dated at Sahajal, C.M.S. the 10 of April 1940

X ray.

[Signature]
Examining Medical Officer
SURGEON COMMANDER
(Rank)

*Delete one

This examination has been made in accordance with the current Instructions as to Medical Standards.

(a) Age { Years Months	(b) Weight without Clothes	(c) Height with Bare Feet	(d) General Development	(e) Chest Girth	(f) Vision by— (i) Snellen's Types (ii) Colour Vision	(g) Vaccinated or revac- cinated for Small Pox (Date)	(h) Lungs, Heart, etc.	(i) Abdomen, Hernia, etc.	(k) Limbs and Joints	(l) Skin	(m) Ears and Hearing	(n) Testes, Ventricles, etc.	(o) Mouth, Teeth (No. deficient and No. defective, if any), Nose, Tonsils, etc.	(p) Anus, Hemorrhoids, etc.
<u>21 1/2</u>	<u>133</u>	<u>5</u> <u>6 3/4</u>	<u>good</u>	inches (a) maximum <u>37</u> (b) minimum <u>33</u> (c) mean <u>35</u>	right eye <u>6/9</u> left eye <u>6/6</u> colour vision <u>N (C)</u>	<u>1936</u>	<u>N</u>	<u>N</u>	<u>N</u>	<u>right arm shoulder scar L. eyelid w.v. 20/20. Both Tympanum N</u>	<u>N</u>	<u>N</u>	<u>Deficient 0 partial upper 75. Dependent 5 Throat N</u>	<u>N</u>

If colour vision is not normal by Ishihara test, degree of colour blindness to be indicated.

CERTIFICATE TO BE SIGNED BY CANDIDATE

I hereby certify that to the best of my belief I have never suffered from Fits, †Incontinence of Urine, Discharge from the Ears, or any other disease likely to render me unfit for His Majesty's Service. ‡I am willing to undergo, after entry, such dental treatment as may be authorized.

Earl G. Miller

Signature of Candidate

When a Candidate is subject to a defect or disability, the following Certificate is to be filled up

This Candidate is the subject of.....

*{which renders him medically unfit for entry,
{not considered of sufficient importance to cause his rejection, he being desirable in other respects.

*Delete one

Examining Medical Officer

(Rank).....

† The exact meaning of this is to be clearly explained to the Candidate by the Examining Medical Officer.
‡ Strike out if inapplicable.

VICTUALLING ASSISTANT

78. 123-M-174

No. Name MILLER, Earl G. Nationality Br. (Can.) File ~~F.D. 34.~~

Date of Birth 11th March, 1919 Married Single Religion;

Date of Application 28th September 1937. Medically Examined

Address 19 Davison Street, Halifax, N.S.

Education Promoted to Grade 10.

Previous Experience Nelson Sea Cadets - 12 years old - Recruit for 3 months.

Joined RCAF

Remarks 4-10-37 N.S. Place on Roster.

Directions Re Entry 4-10-37 Letter to Applicant.

2M 7-35 (M130)

HMCS "OTTAWA" May /43. R.C.N.
 MEDALS AND MEMORIALS—DECEASED PERSONNEL

REGISTRATION No. DATE OF DESPATCH

(1) MEDALS
PERSON
 ENTITLED TO Mrs. Bessie M. Miller - Mother

ADDRESS: % Mrs. Harold Ward, City Market Bldg.,
 Brunswick St., Halifax, N.S.

(2) MEMORIAL CROSS
 WIDOW

ADDRESS:

(3) MEMORIAL CROSS Foster-Mother
 MOTHER Mrs. B. Miller
 c/o Mrs. Harold Ward

ADDRESS: City Marks Bldg., Brunswick Street
 HALIFAX, N.S.

*When Cross forwarded to her, relationship
 listed as Mother.*

MEMORIAL BAR
 (1) DATE DESP
 REGN. NO. 942

(2)

(3) 25 November 1942

DECEASED 13 September 1942

DEPARTMENT OF VETERANS AFFAIRS

AWARDS (NAVY)

D.D.
WAR SERVICE RECORDS

MILLER	Earl Clawson	N-21692	Sto. 1/c	FILE No.
SURNAME (IN BLOCK LETTERS)	CHRISTIAN NAMES	REG. No.	RANK ON DISCHARGE	C.A.S.F. UNIT

WAR SERVICE

BADGE

(CLASS)

No.

DATE DESPATCHED:

ADDRESS:

CAMPAIGN MEDALS	REGISTRATION NUMBER AN DATE DESPATCHED
1939-45 Star	4116
Atlantic Star	
C.V.S.M. & Clasp	
War Medal	

(THE REVERSE TO BE USED FOR ESTATE PURPOSES)

VERIFICATION FORM
 CAMPAIGN STARS, DEFENCE MEDAL, WAR MEDAL, C.V.S.
 NAVAL GENERAL SERVICE MEDAL (1915).

NAME IN FULL *Mittler, Carl Lawson* RANK/RATING *LTJG* OF *USN*

SHIP	SERVICE			AREA	QUALIFYING PER		
	FROM	TO	DAYS		FROM	TO	1939-45 ATLA
	4-12-39						
<i>USS Kady</i>	<i>2-5-40</i>	<i>4-11-40</i>	<i>41</i>	<i>all</i>			
<i>USS Rogers</i>	<i>5-11-40</i>	<i>11-7-41</i>	<i>249</i>	<i>all</i>			
<i>USS Dewar</i>	<i>5-1-42</i>	<i>13-9-42</i>	<i>252</i>	<i>all</i>			
<i>USS</i>	<i>Dec 41</i>	<i>Dec 41</i>					
<i>USS</i>	<i>13-9-42</i>						

VERIFIED BY *[Signature]* VERIFIED BY

VERIFICATION FORM

STARS, DEFENCE MEDAL, WAR MEDAL, C.V.S.M. and CLASP.
 NAVAL GENERAL SERVICE MEDAL (1915).

RANK/RATING OFF.NO. *N. 2/692* ADDRESS

AREA	QUALIFYING PERIODS IN DAYS						STARS MEDALS	✓ 1 2	ELIGIBLE FOR AWARDS OF
	FROM	TO	1939-45	ATLANTIC	DEFENCE	CLASP C.V.S.M.			
							1939-45	✓	<i>Star</i>
							ATLANTIC	✓	<i>Star</i>
							FRANCE G.		
							AFRICA		
							PACIFIC		
							BURMA		
							ITALY		
							DEFENCE		
							C.V.S.M.		<i>2 Clasp</i>
							" CLASP		
							WAR 1945		<i>Medal</i>
							WAR 1915		

VERIFIED BY
[Signature]
 S.S.I.

A 1083 N-21692 OFFICIAL NUMBER

NAME MILLER (Surname)

EARL CLAWSON (Given Names)

OFFICIAL NUMBER A 1083

Ship or Establishment	Rating	From			Remarks	Character	Efficiency	Date			Non-Sub. Rating	Qualified			Re-Qualified		
		Day	Month	Year				Day	Month	Year		Day	Month	Year	Day	Month	Year
Stadacona DISCHARGED	Sto.I. "	4	12	39	Transferred to R.C.N. (CNS. 55 & "Stad" H-3-5 of 17/5/40 on file).	V.G.	Sat.	31	12	39							
		16	4	40													

GENERAL REMARKS

DATE OF BIRTH	PLACE OF BIRTH	CIVIL	OCCU.	RELI.	ED.	PERM. RESIDENCE	PREV. ENL.	RANK OR RATE ON ENLISTMENT	
DY. MO. YR.	BIRTH	MAIN	SUB	GION	P.	CTV. TOWN	SERV. DIV.	A	BR. RANK
11	3	19	14	525	0	50	X408	02	019
04	12	39	04	12	39				
SEN. DATE								RANK OR RATE	
9830								01594	
CODED								CHECKED	
31/16-04-40								mm sm	

A 1083

OFFICIAL NUMBER

FILE NUMBER

123-M-174

OFFICIAL NUMBER A 1083

NAME MILLER Earl Clawson DATE OF BIRTH 11th March, 1919.
(Surname) (Given Names)PLACE OF BIRTH HALIFAX, N.S. OCCUPATION Fireman "Victorialite"RELIGION Presbyterian EDUCATIONRESIDENCE AT TIME OF ENLISTMENT: Street and No. 36 Compton Avenue Town Halifax Province, etc. N.S.

ENGAGEMENTS			DESCRIPTION					PREVIOUS SERVICE				
Date (in figures)			Period	Height	Hair	Eyes	Complexion	Marks or Scars	Served in	Rank or Rating	Dates	
Day	Month	Year									From	To
4	12	39	Hostilities Only.	5' 8 1/2"	Blonde	Blue	Fair	Scar above left eye.				

NEXT OF KIN RELATIONSHIP (in pencil) mother NAME (in pencil) Mrs. Bessie MillerADDRESS (in pencil): Street and No. 36 Compton Ave Town Halifax Province, etc. N.S.

MEDALS, CLASPS, HURT CERTIFICATES, PRIZE MONEY				EXAMINATIONS, CERTIFICATES, ETC.							
Date (in figures)			Particulars	Date (in figures)			Particulars	Date (in figures)			PARTICULARS
Day	Month	Year		Day	Month	Year		Day	Month	Year	

BADGES, G.C. OR G.S.					BRIEF PARTICULARS OF WARRANT OR C.M. PUNISHMENTS AND C.P. CHARGES						
Date (in figures)			1st, 2nd or 3rd G.C. or G.S.	Granted Deprived Restored	SHIP OR ESTABLISHMENT	Wt. No.	Date (in figures)			BRIEF PARTICULARS OF OFFENCE	PUNISHMENT
Day	Month	Year					Day	Month	Year		

Date (in figures)			DAYS FORFEITED					
Day	Month	Year	Prison	Det'n	Cells	C. Power	W. Trial	In diff. Char.

SECOND CLASS FOR CONDUCT

From _____ To _____



21692

OFFICIAL NUMBER

NAME MILLER
(Surname)

Earl Glowson
(Given Names)

OFFICIAL NUMBER 21692

Ship or Establishment	Rating	From			Remarks	Character	Efficiency	Date			Non-Sub. Rating	Qualified			Re-Qualified		
		Day	Month	Year				Day	Month	Year		Day	Month	Year	Day	Month	Year
Stadacona	Sto.2.	16	4	40		V.G.	Sat.	31	12	40							
San Katy	"	25	9	40		V.G.		13	9	42							
Niagara	"	5	11	40													
"	Sto.I.	8	11	40													
Avalon	"	12	7	41													
Ottawa	"	5	1	42													
<u>Discharged</u>	"	<u>13</u>	<u>9</u>	<u>42</u>	<u>DEAD-Missing-Believed Killed in Action.</u>												

GENERAL REMARKS

24/11/42 - Canadian Memorial Cross issued to Mother:
 Mrs. Bessie Miller,
 C/O Mrs. Harold Ward,
 City Market Bldg.,
 Brunswick Street,
 HALIFAX, N.S.

DATE OF BIRTH	11	3	19	14	243	X	5034	08102	3	990	1595
ENL. ST. DATE	16	04	40	16	04	40					
SEN. OR. DATE	08	11	40	09							
RESIDENCE	20 13-09-42										
CHECKED	12										

21692

OFFICIAL NUMBER

FILE NUMBER

62-M.561

OFFICIAL NUMBER 21692

NAME

MILLER

(Surname)

Earl Glowson

(Given Names)

DATE OF BIRTH

11th March, 1919.

PLACE OF BIRTH

Halifax, N.S.

OCCUPATION

Fireman

RELIGION

Presbyterian

EDUCATION

Grade X.

RESIDENCE AT TIME OF ENLISTMENT: Street and No.

19 Davison Street

Town

Halifax

Province, etc.

N.S.

ENGAGEMENTS				DESCRIPTION					PREVIOUS SERVICE			
Date (in figures)			Period	Height	Hair	Eyes	Complexion	Marks or Scars	Served in	Rank or Rating	Dates	
Day	Month	Year									From	To
16	4	40	Seven Years.	5' 7 1/2"	Blonde	Blue	Fair	Scar above left eye.	RCNR. A-1083 -	4/12/39-	15/4/40.	

NEXT OF KIN RELATIONSHIP (in pencil)

Mother

NAME (in pencil)

Miss Bessie Miller

ADDRESS (in pencil): Street and No.

40 Mrs. Harold Ford City Market Bldg

Town

Halifax

Province, etc.

N.S.

MEDALS, CLASPS, HURT CERTIFICATES, PRIZE MONEY				EXAMINATIONS, CERTIFICATES, ETC.									
Date (in figures)			Particulars	Date (in figures)			Particulars	Date (in figures)			PARTICULARS		
Day	Month	Year		Day	Month	Year		Day	Month	Year			

BADGES, G.C. OR G.S.				BRIEF PARTICULARS OF WARRANT OR C.M. PUNISHMENTS AND C.P. CHARGES									
Date (in figures)			1st, 2nd or 3rd G.C. or G.S.	Granted Deprived Restored	SHIP OR ESTABLISHMENT	Wt. No.	Date (in figures)			BRIEF PARTICULARS OF OFFENCE			PUNISHMENT
Day	Month	Year					Day	Month	Year				
					"Avalon"	9	2	10	41	Improper Leave			10 days' detention.

FILM
NO. WSR-4793-3
DATE

Allowed to count 134 days' RCNR.
Mob. time towards L.S. Pension & G.C.B.

DAYS FORFEITED										
Date (in figures)			Prison	Det'n	Cells	C. Power	W. Trial	In diff. Char.	SECOND CLASS FOR CONDUCT	
Day	Month	Year							From	To
2	10	41		10						

W.S.G.
APPLICATION
1418
RECEIVED

AIR MAIL

19th September, 1942. 41

Dear Madam:

It is with deep regret that I must confirm the telegram of the 18th September from the Minister of National Defence for Naval Services informing you that your son, Earl Clawson Miller, Stoker 1st Class, O.N. 21692, R.C.N., is missing believed killed in action.

It is in the public interest that the name of his ship and the fact that she has been in action should not find its way to the enemy until such time as it is decided to publish the fact in a Naval Casualty List. It is therefore requested that this news, other than the fact that your son is missing, may be treated as confidential.

Please allow me to express sincere sympathy with you in your bereavement on behalf of the Minister of National Defence for Naval Services, Chief of the Naval Staff, and the officers and men of the Royal Canadian Navy, the high traditions of which your son has helped to maintain.

Yours sincerely,

Deputy Secretary, Naval Board.

Mrs. Bessie Miller,
c/o Mrs. Harold Ward,
City Market Bldg.,
Brunswick St.,
HALIFAX, N.S.



Department of National Defence
Naval Service

IN REPLY PLEASE QUOTE
No. N.F. 3-MI-10

29th. October, 1941. 194

FROM : - The Commanding Officer,
H.M.C.S. "AVALON",
St. John's, Newfoundland,

TO : - The Commanding Officer,
H.M.C.S. "STADACONA",
Halifax, N.S.

Earl Clawson MILLER, Stoker 1cl. O.N. 21692.

The above named rating at present serving in H.M.C.S. "AVALON" has requested that his seniority as stoker 1st. class may be adjusted consequent upon his transfer to the Royal Canadian Navy, in April, 1940.

2. Miller was a stoker 1st. class in the R.C.N.R. and consequently should have been transferred in the rating he held at the time, e.g., stoker 1st. class. in accordance with Naval Monthly Order 918 which has now been superceeded by N.M.O. 1372.

3. This rating also claims that he was told by the Engineer Officer, R.C.N. Barracks, that an error had been made and would be corrected in due course.

4. It is requested that authority may be obtained to adjust seniority and pay of this rating from the date of his transfer to R.C.N.

5. R.C.N. and R.C.N.R. Service Certificates enclosed herewith.

Commanding Officer

NOV 6 1941

H.M.C.S. "AVALON"
St. John's, Newfoundland.


Captain, R.N.

Encls. 2.

SERVICE CERTIFICATE

Duration OF Hostilities

Name in full Earl Clawson MILLER Company.....

ROYAL CANADIAN NAVAL ~~VOLUNTEER~~ RESERVE

Training Headquarters

Official Number A 1083

Date of Birth 11th March, 1919.

Place of Birth Halifax, Nova Scotia.

Usual Place of Residence 36 Compton Ave., Halifax, N.S.

Trade brought up to Fireman--"VICTORIALITE"

Name and Address of next of Kin (Brother) Mr. Benjamin Miller, Same address

Religious Denomination Presbyterian.

Can Swim

PARTICULARS OF SERVICE

DATE OF ACTUAL VOLUNTEERING	DATE OF ENROLMENT	PERIOD VOLUNTEERED FOR	RATING ON ENROLMENT	MEDALS, DECORATIONS, ETC.	
				DATE RECEIVED	NATURE OF DECORATION
<u>4th December, 1939.</u>		<u>Duration of Hostilities</u>	<u>Sto. (T)</u>		

PERSONAL DESCRIPTION

	HEIGHT		COMPLEXION	HAIR	EYES	MARKS, WOUNDS, SCARS
	FEET	INCHES				
On Entry	<u>5</u>	<u>8½</u>	<u>Fair</u>	<u>Blonde</u>	<u>Blue</u>	<u>Scar above left eye.</u>
On attaining 28 years						
Further Description if necessary						

2 yrs. 151 days.

If a copy of this Form is required, Form C.N.S. 1243 is to be used

The corner of this Certificate is to be cut off if the man is discharged with a "Bad" character or with disgrace, or if specially directed by the Department of National Defence (Naval Service). If the corner is cut off, the fact is to be noted in the Ledger.

CERTIFICATE of the Service of

Earl Clawson Miller

IN THE ROYAL CANADIAN NAVY

Halifax

Official Number *21692*

Date of birth <i>11th March, 1919.</i>	Nearest known Relative or Friend (To be noted in pencil)
Where born { Province <i>Nova Scotia</i>	Name: <i>Mrs. Beanie Miller</i>
{ Town or county <i>Halifax, Halifax Co.</i>	Relationship: <i>Mother</i>
Trade brought up to <i>Fireman</i>	Address: <i>36 Compton Ave., Halifax</i>
Religious denomination <i>Presbyterian</i>	
Date passed swimming test	
Man's signature on discharge to pension }	

All Engagements, including N.C.S., to be noted in these Columns

Date of actually volunteering	Commencement of time	Period volunteered for	Date of actually volunteering	Commencement of time	Period volunteered for
<i>15 Mch '40</i>	<i>16 Apr. '40</i>	<i>Seven yrs</i>	<i>Previous Service</i>	<i>15 Apr, 1940</i>	
2.			<i>R.C.N.R. -</i>		
3.					
4.					

Medals, Clasps, Etc.

Date received or forfeited	Nature of decoration	Date received or forfeited	Nature of decoration

Description of Person	Stature		Chest, In.	Colour of			Marks, Wounds and Scars
	Feet	In.		Hair	Eyes	Complexion	
On entry as a boy.....							
On advancement to man's rating or on entry under 28 years.....	<i>5</i>	<i>7 1/2</i>	<i>36</i>	<i>Blonde</i>	<i>Blue</i>	<i>Scar above left eye</i>	
On re-entry for C.S. or for Non-C.S. after attaining 28 years.....							
Further description if necessary							

Name Carl G. Lawson Miller

Conduct

Section Class for Conduct (inclusive dates)

Efficiency in Rating—ARTICLE 607—K. R.

3. Definition of Terms—As a guide to Commanding Officers when making their award the following definitions are given of the terms to be used:—

- Superior.....A man who performs his duties with more than average efficiency.
- Satisfactory.....A man who performs his duties with average efficiency.
- “ Sat.
- Moderate.....A man who performs his duties in an efficient manner but with less than average efficiency.
- “ Mod.
- Inferior.....A man who performs his duties in an inefficient manner.
- “ Inferior.

Note.—In these definitions “duties” means the general duties of the substantive rating held, and “average efficiency” means the average efficiency of all men in the Service holding the same substantive rating.

The substantive rating held by the man at the time is to be noted in brackets after each assessment thus: Supr. (A.B.).

App'd to count 134 Days towards Long Service Pension & A.C. Badges: No. 62-M-561 on 28 May '40.

Good Conduct Badges

Date	1st, 2nd, 3rd	Granted, Deprived, Restored	Character	Efficiency in Rating, noting substantive rating in brackets	Whether R.M.G. or not	Date	Captain's Signature
			V.G.	Sat. (Stg. 2)		31 Dec 40	[Signature]
			V.G.	— (Stg. 1)		13 Sep 42	[Signature]

Time forfeited

Date	P., D., C., C.P., W.T.	Number of days	
		Awarded	Served
2 Oct '41	D	10	

DEPARTMENT OF NATIONAL DEFENCE
(Naval Service)

C.N.S. 2417
3M-4-37
N.S. 815-0-2417

DEPT OF
NATIONAL DEFENCE
SEP - 1 1937
62-21-4M

APPLICATION FOR ENTRY IN THE ROYAL CANADIAN NAVY

Halifax, Nova Scotia
September 28th 1937

220133

The Naval Secretary,
Department of National Defence,
OTTAWA.

SIR:-

I hereby make formal application for entry in the Royal Canadian Navy, under a seven years' continuous service engagement as a Rating Assistant (I am a Butcher by trade)
(Insert rating chosen)

I certify that the following particulars are in my own handwriting and are true in every respect:

- Name (to be given in full in Block Letters) EARL GILSON Miller
- Date of Birth (Birth Certificate or sworn declaration by parent or guardian must be attached) March 11th 1919
- Place of Birth. Town Halifax Province Nova Scotia
- Permanent Place of Residence. No. 19 Street W. Avison
Town Halifax Province Nova Scotia
- Are you a British Subject? Yes
- How long have you resided in Canada? eighteen years
- What is your Mother Tongue? English
- What other language do you speak? none
- Are you of the White Race? Yes
- Are you Single, Married or a Widower? single
- How far advanced educationally are you? one half year in the tenth grade but due to schools in N.B. being closed for health reasons I have not a certificate to that effect but am sending you office boy, butcher and grocery clerk and also worked at transport truck work.
(Certificates of School Authorities must be attached)
- What practical experience have you had?
(Details and certificates from employers, trade credentials, etc., must be attached to substantiate employment reported.)
- Do you belong to any Naval, Military, Air or Police Force? no
- If so, give details.....
- Have you ever served in such forces? Nelson Sea Cadets
- If so, give dates and details. at the age of twelve as a recruit for about 3 months
- Have you ever been discharged from His Majesty's Forces as medically unfit? no
- Have you ever offered to serve in His Majesty's Forces and been rejected? no
Why?.....
- Have you ever been convicted of a criminal offence? no
(Enclose two character references, one of which must confirm your answer to Question 19)
- What is your weight? 134 lbs. Height 5ft. 7in. Chest Measurement (Not inflated) 34"
- Have you ever had fits? no
- Do you suffer from any deformity? no
- Have you suffered the loss of any fingers, toes, etc? no
- Do you suffer from any disease? no
- Do you wear glasses? no
- Are you subject to any disability which might cause your rejection?
no
- Give details..... none
- Are you willing to be vaccinated and inoculated as considered necessary by the appropriate authorities? yes

Harold J. Ward
Signature of Witness

Earl G. Miller
Signature of Applicant

CERTIFICATE TO BE SIGNED BY THE PARENT OR GUARDIAN OF CANDIDATES UNDER 21 YEARS OLD

I agree to refund to the Department of National Defence the expenses incurred by that Department for transportation to a Naval Base of the above applicant, should he, on arrival at such Base, fail to enrol for seven years' continuous Naval Service for reasons which in the opinion of the Department are within his own control. Signed and

Sealed at Halifax, this 28th day of September, 1937, in the presence of
Harold J. Ward Mrs. Bessie M. Miller
Signature of Witness Signature of Parent or Guardian

CERTIFICATE TO BE SIGNED BY CANDIDATES OVER 21 YEARS OF AGE

I agree to refund to the Department of National Defence the expenses incurred by that Department for my transportation to a naval Base, should I, on arrival at such Base, fail to enrol for seven years' continuous Naval service for reasons which in the opinion of the Department are within my own control.

Signed and Sealed at....., this.....day of....., 19.... in the presence of.....
Signature of Witness Signature of Candidate

No. 87.....

M.F.M. 16A
50M-11-39 (3048)
H.Q. 1772-39-1665

DEPT
MILITIA & DEFENCE
APR 29 1940
123-7-124
CANADA

CANADIAN ACTIVE SERVICE FORCE

SERVICE: MILITARY OR AIR

NAVAL.

APPLICATION FOR DEPENDENT'S ALLOWANCE—FOR DEPENDENTS OTHER THAN THOSE PROVIDED FOR ON FORM M. 16

15

The names required by Questions 1, 2 & 12 must be shown in block capitals.

- 1. Surname of applicant..... **MILLER,**
- 2. Full Christian name or names..... **Earl Clawson.**
- 3. Official Number..... **N. K.** 4. Rank..... **Stoker 2.**
- 5. Unit, Station, or Establishment..... **H. M. C. S. STADACONA.**
- 6. Date appointment or enlistment..... **4th December 1939. 18th April as R. C. N.**

Question 7:
In the case of officers, the date of reporting for duty is the date pay commences and dependents allowance cannot commence prior to such date.

- 7. Date reported for duty..... **4th December 1940.**
- 8. Are you a member of the permanent forces, military or air?..... **Yes, R. C. N.**
If so (a) State permanent establishment, unit or station.....
..... (b) Are you receiving permanent force rates of pay and allowances? **Yes.**

Questions 9 & 10:
Are to determine the degree of eligibility to an allowance where salary or wages continue in whole or in part.

- 9. If you are an employee of a Dominion or Provincial Government, Municipality, Board, Commission or other Public Authority, give particulars of such employment.....
- 10. If your salary or wages or any part thereof are being continued by such public authority during service, state amount per month.....
- 11. Give particulars of your civilian occupation together with total earnings and period of time employed in the six months preceding enlistment..... **Fireman in Merchant Marine at \$65.00 per month**
War money \$81.25 month

12. Name of dependent..... **Miller,** **Bessie** **Mrs.**
Surname Christian Name Mr. Mrs. or Miss

Question 13:
Give street name and number or post office box number, R.R. No. city, town or village and province.

13. Address **36 Compton Ave. Halifax, N.S.**

14. Age of dependent.....70..... 15. Relationship.....Grandmother by birth.
Mother by Law.

Questions 16 to 28
Have a bearing on
the eligibility for the
allowance and the
amount payable.

16. With whom did the dependent reside in the 6 months' period preceding your enlistment?
Resided with me at 36 Compton Ave. Halifax, N.S.
State name, address and relationship to dependent

17. With whom will the dependent make his or her home hereafter?.....Continue keeping house
for brother and I.
(State relationship)Mother.

18. Is dependent being maintained in a Public Institution at the public's expense?.....No.....
Yes or no
If yes, give name and location of institution

19. Why is dependent unable to provide for his or her own support? If by reason of mental
or physical infirmity, give nature and duration of same together with name and address
of family doctor, if any.....Reason of Infirmities.

20. From what date have you been contributing to the support of this dependent?.....
since death of ~~father~~ Grandfather (Foster Father) 4 years

21. Are you the sole or partial support?.....sole.....
State whether sole support or partial support

22. (a) Give nature and amount of financial assistance (this may include board and room)
given by you to this dependent in each of the 6 months prior to enlistment and total of
same for the 6 months.....\$50. monthly average.

(b) Did your contributions entitle you to board and lodgings in return or did you pro-
vide your own board and lodgings?.....Entitled to board and lodging but
was at sea for last year.

23. If this dependent became dependent upon you within the six months preceding enlist-
ment, what change in the dependent's financial circumstances has made him or her so
dependent upon you?.....

24. If dependent is your mother, is your father living?.....No..... Yes or No
If "yes" state extent and nature of his contribution to your mother's support and if he does not fully
support her, state reasons.

25. If dependent is father or mother, sister or brother, give particulars of your other brothers and sisters.

Name	Address	Age	Occupation	Married or Single
Bennie Miller	36 Compton Ave, Hfx.	22	Unemployed	Single

26. (a) If any of the above relatives contributed to such dependent's support, state name and nature and amount of contribution in the 6 months precedings your enlistment.

(b) In any such instance did the relative contributing receive board and lodgings in exchange for such contributions. If "yes" explain:

27. Give full particulars of the dependent's average monthly income from all sources other than your own contributions, to the best of your knowledge, information and belief under the following headings.

<i>Dependent's Average Monthly Income from:</i>	<i>Dependent's Average Monthly Allowances from:</i>
Personal earnings.....\$.....	Workmen's Compensation
Contributions and allowances from other members of family. \$.....	Award.....\$.....
Insurance.....\$.....	Widow's Pension.....\$.....
Dividends from shares, bonds, etc.....\$.....	Other Government or Municipal Allowances. (State nature of allowance and name of Public Authority).....\$.....
Interest on loans or mortgages.....\$.....\$.....
Rentals.....\$.....\$.....
Other.....\$.....\$.....
Total.....\$.....	Total.....\$.....

28. Fifteen days' pay per month must be assigned to dependent to obtain allowance. If 15 days' pay per month has been assigned to dependent wife and children, an additional 5 days pay per month must be assigned to this dependent.

28. What amount of pay have you assigned per month on behalf of this dependent?

\$40. or 20 days' pay.

29. Date assigned pay effective immediately after enlisting.

30. Have you made a prior assignment of pay. If so state number of days and to whom

Yes. Mrs Bessie Miller. 36 Compton Ave Halifax, N.S.

31. Have you made a previous claim for dependent's allowance?.....No.....

If so give particulars of previous unit and official number under which applied for and date of application.....

Certified that authorization for assigned pay as stated has been received.

I certify that the above is a true statement.

B. M. Ratfield
PAY S. LIEUTENANT RCNVR.
Paymaster Rank

Earle G. Miller
Signature of Applicant

Date *25* April 1940

Enclosed; Affidvit signed by W.R. Seeley. Minister.
" " " Kenneth P. Hayes. M. D.
Birth certificate Earle G. Whitehead. (Earle G. Miller)
Adoption Papers Earle G. Whitehead. (" ")
Establishment, unit or station

H. M. C. S. TADAGONA.

Place HALIFAX N. S.

NOTE.—Dependents' allowances may not be awarded to more than three dependents of any officer or man.

Insurance	\$
Dividends from shares, bonds, etc.	\$
Interest on loans or mortgages	\$
Rentals	\$
Other	\$
Total	\$

28. What amount of pay have you assigned per month on behalf of this dependent?

29. Date assigned for this dependent's allowance?

30. Have you made a prior assignment of pay. If so state number of days and to whom?

Yes, No



69971



Swift Canadian Co.
LIMITED

MONCTON, N. B., CANADA.

N-21692D

September 1, 1944.

The Minister of Defence,
Ottawa,
Canada.

130102

Dear Sir:-

Earl Clawson Miller

Mr. Miller was employed by us from November 5, 1938 to July 22, 1939. It is our understanding that he was lost at the sinking of H.M.C.S. OTTAWA.

Will you kindly advise us your records as to the date of enlistment in the Royal Canadian Navy, any information you have about his services and rank at time of his death, and time and manner of death, and oblige.

Yours respectfully,

SWIFT CANADIAN CO. Limited

J. A. Ford

Maritime Manager
JAF:G

Dep Sec (Pers)
Sweet reply.
WHS
8.9.44



1944
SEP 8 1944

SEP 8 1944
CENTRAL REGISTRY

SEP 8 1944
CENTRAL REGISTRY

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H. M. C. S. "STADACONA"

OFFICIAL NO. IF KNOWN }
Space to be left vacant }
if not known }

CONTINUOUS SERVICE ENGAGEMENT, OR RE-ENGAGEMENT

To be forwarded to the Naval Secretary, Department of National Defence, with Form S. 59

Christian and Surname in Full Earl Clawson MILLER.		Next of Kin (Grand Mother) Mrs. Bessie Miller Name 36 Compton Ave., Address Halifax, N.S.	Present Rating Stoker 2nd Cl.
Date of Birth* 11th March, 1919	Place of Birth† Town..... Halifax County..... Halifax Province..... Nova Scotia		Name, Rank and Station of Recruiting Officer A.E. GIFFIN, LieutenantRCNVR Recruiting Officer Halifax, N.S.

Personal Description at the Date of this Document

Height	Chest	Hair	Eyes	Complexion	Wounds, Scars or Marks	Religious Denomination	Trade or Occupation
5 7½	36	Blonde	Blue	Fair	Scar above left eye.	Presbyterian	Fireman.
Commencing date of Engagement or Re-engagement		16th April, 1940.		Period of Engagement or Re-engagement		Seven Years.	
Date of actually volunteering to engage or re-engage		15th March, 1940.		Date of entering present ship		16th April, 1940.	

Particulars of former Continuous Service Engagements, if any; but, if none, and the person engaging has had previous Service, the date of his First Entry should be given. If the person has not previously served, write the words "First Entry" here.

If an Engagement is ante-dated for any period, the man's services for such period should be forwarded in to office, with the Engagement, on Form S.—1243.

R.C.N.R.
Stoker, December, 1939 to date.

Declaration of Entry or Re-Entry from Shore for Continuous Service

The following questions are to be put by the Commanding Officer to the person about to engage for Continuous Service, whose answers are to be recorded hereon:—

- Are the particulars given above of your name and date and place of birth correct? **Yes**
- Are you a British subject?† **British**
- Nationality of parents—Father..... **British** Mother..... **British**
- Have you ever served in the Navy, Royal Fleet Reserve, Royal Naval Reserve, Army, Army Reserve, Marines, Militia, Volunteers (Naval or Military), Territorial Force or in His Majesty's Indian or Colonial Military Forces, or in the R. C. Mounted Police?‡ **R.C.N.R.; R.C.M.P. Marine Section**
- Do you now belong to the Militia, Volunteers (Naval or Military), Territorial Force or any Regiment or Corps in His Majesty's Army, or to any established Naval or Army Reserve Force, or to the R. C. Mounted Police?L..... **R.C.N.R.**
- Have you ever been rejected as unfit for His Majesty's service, or discharged from it on that account? If so, state reason of rejection or discharge, and date..... **No**
- Have you ever been discharged from the Navy, Marines, Army or R. C. Mounted Police on account of misconduct? **No**
- Are you willing to be vaccinated or re-vaccinated and inoculated? **Yes**
- Can you swim? **Yes**

*When evidence of age is obtained on First Entry, it should be attached to this Form.

†Foreigner are not to be entered. On the entry of a person born out of the British Empire, it should be ascertained that he is (and in the case of a boy, that his father is) a British Subject, and evidence of the fact should be attached to the "Entry Papers."

‡Particulars of service in the Army, Army Reserve, Naval Reserve, Marines, Militia, or H. M. Indian or Colonial Military Forces, or in the Merchant Service should be forwarded in to office with this Engagement. If a member of the Royal Fleet Reserve, the man's Registrar is to be immediately informed of his entry (Royal Fleet Reserve Instructions). If an R.N.R. man, state number of R.V.2.

(OVER)

C.N.S. 55

500—9-39
N.S. 815—9—55

I.—Declaration and Certificate for Men newly entered and Men who have been out of the Service since the expiration of their previous C. S. Engagement

I, Earl Glawson MILLER, do solemnly declare that to the best of my knowledge and belief the answers to the questions overleaf are true, and I do hereby agree to serve honestly and faithfully in the Naval

Service of Canada *Seven Years from 16th April, 1934, provided my service should be so long required. And I do sincerely promise and swear (or solemnly declare) that I will be faithful

and bear true allegiance to His Majesty. As witness my hand this 16th day of April, 1934.

Earl Glawson Miller Man's Signature in full

Witness to Signature Earl Giffin

Attested before me this 16th day of April, 1934.

Earl Giffin } Signature of a Commissioned Officer of the Naval Service
Lieutenant R.C.N.V.R.

Date 16th April, 1934

This is to certify that we have examined the person named on the other side hereof as to his fitness for the Naval Service of Canada, and we find as follows:—He is of perfectly sound and healthy constitution, free from all physical malformataion, active and intelligent; and we consider him in all respects fit for His Majesty's Service.

J. J. Howard } Commanding Officer
COMMANDER, R.C.N.

A. P. Anderson } Medical Officer
M.O. R.C.N. Barracks, Halifax.

Name Miller, Carl Glendon
 Sub-Rating and Seniority Sto II Non-Sub.
 O.N. 21692 S.B. No. _____ W.B. No. _____
 Joined Ship "Maaya" from "Sankaty"
 Engagement: Period 7 years Expires March 15/47
 Date of Birth March 11/1919 Religion Presbyterian
 Character 09 Efficiency Sat Date Dec. 9/40
 Badges _____ Class for Conduct 1st Class for Leave 1st

Date due for: Next Badge _____
 Progressive Pay _____
 L.S. & G.C. Recommended _____

Advancement.	Wishes to Pass?	Recommended?	Date Qualified?
Educ. Test Pt. 1	_____	_____	_____
Higher Educ. Test.	_____	_____	_____
Professional for higher Sub-rating	_____	_____	_____
do Non-Sub.	_____	_____	_____

(For Ordinary Seamen Form T.S. 34 must be used in addition)

Any Non-Service Attainments _____

Swimming Qualification _____

Athletic Capabilities _____

General Remarks (including intelligence, energy, initiative, powers of command).

H.M.C.S. "Venture"

S. Hermand
 Lieut. C. R.C.N.R.
 Officer of Division.

Date Dec. 9/40

- Notes:—(1) This form is to be kept for each rating by the Officer of his Division.
 (2) The form is to be completed to date, and signed by the Officer of the Division before the rating changes his Division or Ship.
 (3) On a rating changing his Ship or Establishment, Form S.264 is to be transferred with his other papers for the information of the next Officer of Division.

S. 1246A. (Revised—July, 1938.)

2M—3-40 (4340)
N.S. 815-9-1246a

HISTORY SHEET FOR STOKER RATINGS

This form is to be kept by the Engineer Officer, and is to be completed:—

- (a) When a man leaves a ship after a period of not less than three months' service in her.
- (b) Annually on 31st December, unless completed within the previous three months.
- (c) As directed under special headings.

To be handed to the man, together with Service Certificate, on discharge to shore. See Art. 609, K.R. & A.I.

Surname	NAME Christian	Official Number	Port Division
Miller	Earl Clawson	21692	Halifax

REPORT OF PROGRESS AS STOKER 2ND CLASS UNDER TRAINING

(To be filled in on completion of courses in Depot)

Course	Date of		Class of Certificate awarded on completion*	Remarks	Signature and Rank of Examining Officer
	Commencing	Completing			
New Entry Course					Training Commander.
Technical Training at Stokers' Training Establishment:— (1) Marine Engineering (2) Electrical					Engineer Officer.

* Insert:—"Superior," "Satisfactory" or "Moderate." (Failure to be noted in RED INK).

Issued with Stoker's Manual:—Date _____ Signature and Rank:—_____

Entered H.M. Service as Stoker 2nd Class _____	Completed 2 years' training for Mechanician _____
Advanced to Stoker 1st Class <u>16-4-40</u>	Rated Mechanician 2nd Class _____
Advanced to Leading Stoker _____	“ “ 1st Class _____
Advanced to Stoker Petty Officer _____	Advanced to Chief Mechanician _____
Advanced to Chief Stoker _____	

RECORD OF EXAMINATIONS, QUALIFICATIONS, COURSES, ETC. (see Footnote)

Examinations, etc.	Date	Signature of Engineer Officer	Captain's Initials

Award of Auxiliary Watchkeeping Certificate, and RESULTS of all professional and school examinations, courses and qualifications for promotion are to be inserted in this space.

CONDUCT SHEET

Califax, J. S.

NAME MILLER, Earl Dawson RATING Stoker II PORT DIVISION AND OFFICIAL NUMBER 21692

NAME OF SHIP	Date of Entry	No. of G.C. Badges held	Date of Commencement of "very good" conduct. (Art. 527, cl. 4 and 5) If conduct is not "very good" insert "Nil"	Class for Conduct If in 2nd class, insert (1) Date of reduction. (2) Date of proposed restoration.	Class for Leave If in 2nd class, insert date from which entitled to restoration to 1st class (Art. 573, cl.2)	Character since last assessment on Service Certificate or Conduct Sheet (Art. 605, cl. 5 and 8)			Efficiency (Art. 607)	For Art. 413 ratings only. (See Notes 5, 6 and 7.)		Ship Discharged to (giving date, if it differs from date of assessment of character, and, in the case of an N.C.S. Steward or Cook discharged to Shore, the cause of discharge)	In red ink—Whether recommended for (a) Boys' Training Service. (b) Other Instructional Duties. (See Note 9)	R.M.G. or R.R. (where applicable)	Commanding Officer's Signature
						From	To	Character Assessment		Whether recommended for advancement (Must be fit for immediate advancement and fully qualified)	Whether recommended with a view to accelerated advancement (Must also be fit for immediate advancement but not necessarily fully qualified)				
<i>Stadacona</i>	<i>16 Apl 1940</i>	<i>Nil</i>	<i>16 Apl 40</i>	<i>FIRST</i>	<i>FIRST</i>	<i>16 Apl</i>	<i>24 Sep</i>	<i>VG</i>	<i>Sat.</i>	<i>YES</i>	<i>YES</i>	<i>Venture (San Katy)</i>			<i>J.B. Keenan</i>
<i>Venture (San Katy)</i>	<i>25 Sep</i>	<i>—</i>	<i>—</i>	<i>—</i>	<i>—</i>	<i>25 Sep</i>	<i>7 Nov</i>	<i>VG</i>	<i>Sat</i>	<i>Yes (Actg)</i>	<i>Yes</i>	<i>"Niagara"</i>			<i>W. H. Hysing</i>

NOTES

- Destruction of Conduct Sheet.**—Attention is directed to Art. 603, cl. 3, K.R., which provides for the destruction, after the next assessment of character, of a Conduct Sheet shewing the record of offences in a previous ship. But the Conduct Sheet of a man joining a shore or harbour establishment may (and for Leading Seamen, Leading Signalmen, Able Seamen and Signalmen *must*) be kept in use and accompany him to his next sea-going ship.
- Date of Commencement of "very good" Conduct.**—When the date of commencement of "very good" conduct differs from that which would normally appear from the Service Certificate, the date is to be inserted in red.
- Class for Conduct.**—The date of proposed restoration may be any date not less than 3 months and not more than 6 calendar months from date of reduction. See Art. 567, K.R.
- Good Conduct Medal and Gratuity.**—Recommendations are to be made according to the instructions in Arts. 534, cl. 3, and 606, cl. 4, K.R. If the recommendation is intentionally withheld, a statement to that effect should be inserted. (See Art. 534, cl. 15.)
- Whether Recommended for Advancement.**—To be completed in respect of all Art. 413 ratings by inserting "Yes," "Not Yet" or "No" (but see notes (1), (2) and (3) below):
 - "Yes"—Recommended for advancement. To be followed by (N.Q.) if not fully qualified; this, if awarded in a sea-going ship, will count as a sea-going recommendation for men who require this qualification, although such men are not qualified for recommendation on Form S. 507.
 - "Not Yet"—To be used for ratings not yet recommended for advancement owing to their inexperience. To be followed by (N.Q.) if not fully qualified.
 - "No"—Not recommended, whether qualified or not.
 For Leading Seamen, Leading Signalmen, Able Seamen and Signalmen insert also "S.G.R." or "H.R." according as the ship is or is not a "sea-going" ship (Appendix XVII, Part 1, para. 10) in relation to the individual rating concerned.
- Whether Recommended for Confirmation.**—Notations, in red ink, are to be made across both the "Recommendation for Advancement," columns, after completion of a minimum period of three months' acting time, as to whether or not a rating is recommended for confirmation in the ordinary course. The abbreviations to be used are "R.C.O.C." or "N.R.C.O.C."
- Accelerated Advancement.**—Recommendations are not to be made in this column unless the rating was likely to have been recommended for accelerated advancement on the next return S. 507 had he remained in the ship. This column is intended merely to assist the Captain of the ship to which the rating is discharged in rendering S. 507 at the end of the half-year, by bringing to his notice ratings of more than ordinary merit, who should be specially considered when making the special recommendations on S. 507 for the accelerated advancement of a limited proportion of the ship's company. When recommending Leading Seamen, Leading Signalmen, Able Seamen and Signalmen add "S.G.R." or "H.R." as directed for previous column.
- Offences and Punishments.**—To be recorded on page 2.
- Training Service.**—This column is always to be completed for E.R.A.s, E.A.s, O.A.s, C.P.O.s, P.O.s and Leading Ratings of the Seamen, Signal W/T and Stoker branches, irrespective of whether or not the rating is a volunteer for the Training Service. If recommended, the word "Yes" should be inserted; if not recommended, the word "No."

POST 44

NATIONAL
APR 2 1942
N.S. 62-17-561
CANADA

H.M.C.S. " AVALON II

Warrant No. 9, dated 2nd. October 1941

[The Warrants are to be numbered consecutively from the Date of the Ship being commissioned.]

For Detention

(a) WHEREAS it has been represented to me by
Lieutenant Herbert Gainé, Royal Canadian Naval Reserve.

38

that on the 28th day of September 1941,

Name Earl Glawson Miller

Date of Birth 11th, March, 1941

Rating Stoker

Official Number 21692

Good Conduct Medal Nil.

Good Conduct Badges Nil.

Date of Entry in Ship 17th September, 1941.

List and Number on Ship's Book 5A2 - 100

Date of First Entry in H.M. Service 16th April, 1940.

Class for Conduct 1st.

Character assessed to date, from the last annual assessment, but not including this offence
Very Good

Class for Leave 1st.

Did [Insert full particulars of Offence.] improperly leave His Majesty's Canadian Ship "Avalon II" whilst duty watch at about 0800 on the 28th September, 1941 returning on board at about 1200 on 28th September 1941 thereby being absent without leave four hours.

I do hereby adjudge him the said Earl Glawson Miller.

Insert below in the proper columns the particulars of the punishment.

†To be imprisoned in			†To be kept in detention in		Confined in Cells on Board		Disrated to	Deprived of Medal	Deprived of Badges, No.	Whether reduced to 2nd Class for Conduct	Days				Whether Reduced to Lower Class for Leave	Grog stopped Days	Other Punishments
Name of Gaol*	For Days	With Days H.L.	Name of Place of detention*	For Days	No. of Days	Diet					10	15	Leave stopped	Pay forfeited			
			Military Detention Barracks Lester's Field	10						No			2	2	No		

*The name of the place of confinement is not to be filled in when the Officer ordering the imprisonment or detention is in the presence of a Commander-in-Chief or Senior Officer (see Article 770, Clause 2).
†See page 4 for proposal to award imprisonment, detention or disrating.

C.N.S. 271
10M-7-40 (5921)
N.S. 815-9-271

Noted in Service
Records by

Before awarding the foregoing punishment, (b) I did, on the 1st day of October..... personally and publicly, in the presence of the Accuser and Accused, investigate the matter, and having heard the evidence of

Lieutenant Herbert Gaine, Royal Canadian Naval Reserve.

Chief Stoker James William Ingram, Royal Canadian Navy.
Official Number 21159.

in support of the charge as well as what the Accused had to offer in his defence, and ~~the evidence~~
~~of it~~

~~whereas he called~~ he having called no one on his behalf, I consider the charge to be substantiated against him, and [taking into consideration that this is the 1st Offence registered against him in the Conduct Book or Conduct Sheet], I adjudge him to be punished as aforesaid (d).

Given under my hand on board His Majesty's Canadian Ship "Avalon II" at

....., the 2nd day of October..... 1941.

A. Schwerdt Captain.....
Captain, Royal Canadian Navy.

H. Gaine Canadian {Signature and Rank
Lieutenant, Royal Naval Reserve. of Complainant

NOTE.—No avoidable delay should take place in the investigation of the complaint, or in the prompt infliction of the punishment after the investigation is completed. If any substantial delay has taken place the reason thereof is to be stated in the space below.

(a) When the Offence has been committed under the immediate observation of the Captain, the Warrant should run—"Whereas I did observe—"

(b) If the Offence has been committed under the immediate observation of the Captain, the Warrant should run thus:—

"I did, on the _____ day of _____, in presence of (insert name of Executive Officer, or of the Watch, as the case may be), and having heard what the Accused had, etc.—"

(c) If the Accused does not call any witnesses the fact should be stated.

(d) If the man is sentenced to imprisonment or detention, and there is not a proper place of confinement to which he can be sent at once, and if it is not intended to keep him in close custody on board until a proper place of confinement is available, the following words are to be added:—

"The said imprisonment (or detention) to take effect from the date on which he is received into a proper place of confinement, subject to the provisions of Section 74, Clause 2, of the Naval Discipline Act."

NOTE.—When under the sanction of the Regulations of the Service, two or more of the foregoing punishments are awarded to the same individual for the same Offence or Offences, one Warrant will suffice; but the greatest care is to be taken in all cases to specify distinctly the nature, duration, or extent of the Punishment ordered.

H.M.C.S. Avalon Warrant No. 9, read by me onboard H.M.C.S. Avalon II this 2nd day of October, 1941.

H. Gaine
Lieutenant, R.C.N.R.

H.M.C.S. "Avalon II".....

1st. October..... 19.41..

I beg to submit that the offence disclosed on page 1 hereof may be dealt with summarily.

If you approve, the following sentence is considered suitable:—

King's Regulations Art. 707 (1).

* 10 (days { Imprisonment with hard labour } in
* ~~xxxxxxxxxxxx~~ (calendar months { Detention }

addition to the other punishments indicated.

Art. 776 (2).

~~To be struck out~~.....

~~addition to the other punishments indicated.~~

Art. 752 (2).

*As indicated on page 1.

2. The Accused's Service Certificate and Conduct Sheet are enclosed.

I am,

SIR,

Commodore L. W. Murray, R.C.N.
Commodore Commanding Newfoundland
St. John's, Newfoundland.....

Your Obedient Servant,

R. Schwerdt

*To be struck out when not applicable. Captain, Royal Canadian Navy.

Remarks as to any excess, undue leniency, or irregularity in the above proposals:—

Approved.

Signature..... *L. W. Murray*

The Officer Commanding

Rank Commodore, R.C.N.

H.M.C.S. "Avalon II".....

When the necessary approval has been obtained, the particulars should be entered on page 1 of the Warrant, which should then be dated and read to the offender (see Arts. 754 (1) and 755 of the King's Regulations) without any unnecessary delay.

CONTINUOUS SERVICE ENGAGEMENT, OR RE-ENGAGEMENT

To be forwarded to the Naval Secretary, Department of National Defence, with Form S. 59

Christian and Surname in Full Earl Clawson MILLER.	Next of Kin (Grand Mother) Mrs. Bessie Miller 36 Compton Ave., Halifax, N.S.	Present Rating Stoker 2nd Cl.
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Date of Birth* 11th March, 1919	Place of Birth† Town: Halifax County: Halifax Province: Nova Scotia	Name, Rank and Station of Recruiting Officer A.E. GIFFIN, Lieutenant RCNVR Recruiting Officer Halifax, N.S.
---	---	---

Personal Description at the Date of this Document

Height	Chest	Hair	Eyes	Complexion	Wounds, Scars or Marks	Religious Denomination	Trade or Occupation
5 7½	36	Blonde	Blue	Fair	Scar above left eye.	Presbyterian	Fireman.

Commencing date of Engagement or Re-engagement	16th April, 1940.	Period of Engagement or Re-engagement	Seven Years.
Date of actually volunteering to engage or re-engage	15th March, 1940.	Date of entering present ship	16th April, 1940.

Particulars of former Continuous Service Engagements, if any; but, if none, and the person engaging has had previous Service, the date of his First Entry should be given. If the person has not previously served, write the words "First Entry" here.

R.C.N.R.
Stoker, December, 1939 to date.

If an Engagement is ante-dated for any period, the man's services for such period should be forwarded in to office, with the Engagement, on Form S.—1243.

Declaration of Entry or Re-Entry from Shore for Continuous Service

The following questions are to be put by the Commanding Officer to the person about to engage for Continuous Service, whose answers are to be recorded hereon:—

- Are the particulars given above of your name and date and place of birth correct? **Yes**
- Are you a British subject?† **British**
- Nationality of parents—Father **British** Mother **British**
- Have you ever served in the Navy, Royal Fleet Reserve, Royal Naval Reserve, Army, Army Reserve, Marines, Militia, Volunteers (Naval or Military), Territorial Force or in His Majesty's Indian or Colonial Military Forces, or in the R. C. Mounted Police?‡ **R.C.N.R.: R.C.M.P. Marine Section**
- Do you now belong to the Militia, Volunteers (Naval or Military), Territorial Force or any Regiment or Corps in His Majesty's Army, or to any established Naval or Army Reserve Force, or to the R. C. Mounted Police? **R.C.N.R.**
- Have you ever been rejected as unfit for His Majesty's service, or discharged from it on that account? If so, state reason of rejection or discharge, and date. **No**
- Have you ever been discharged from the Navy, Marines, Army or R. C. Mounted Police on account of misconduct? **No**
- Are you willing to be vaccinated or re-vaccinated and inoculated? **Yes**
- Can you swim? **Yes**

*When evidence of age is obtained on First Entry, it should be attached to this Form.

†Foreigner are not to be entered. On the entry of a person born out of the British Empire, it should be ascertained that he is (and in the case of a boy, that his father is) a British Subject, and evidence of the fact should be attached to the "Entry Papers."

‡Particulars of service in the Army, Army Reserve, Naval Reserve, Marines, Militia, or H. M. Indian or Colonial Military Forces, or in the Merchant Service should be forwarded in to office with this Engagement. If a member of the Royal Fleet Reserve, the man's Registrar is to be immediately informed of his entry (Royal Fleet Reserve Instructions). If an R.N.R. man, state number of R.V.2.

I.—Declaration and Certificate for Men newly entered and Men who have been out of the Service since the expiration of their previous C. S. Engagement

I, **AWSON MILLER**, do solemnly declare that to the best of my knowledge and belief the answers to the questions overleaf are true, and I do hereby agree to serve honestly and faithfully in the Naval

Service of Canada* **Seven Years** from **16th April, 1934**, provided my service should be so long required. And I do sincerely promise and swear (or solemnly declare) that I will be faithful

and bear true allegiance to His Majesty. As witness my hand this **16th** day of **April, 1934**.

Earl Lawson Miller Man's Signature in full

Witness to Signature *Charles Coffin*

Attested before me this **16th** day of **April, 1934**.

Charles Coffin } Signature of a Commissioned Officer of the Naval Service
Lieutenant R.C.N.V.R.

Date **16th April, 1934**.

This is to certify that we have examined the person named on the other side hereof as to his fitness for the Naval Service of Canada, and we find as follows:—He is of perfectly sound and healthy constitution, free from all physical malformataion, active and intelligent; and we consider him in all respects fit for His Majesty's Service.

..... Commanding Officer
COMMANDER, R.C.N.

..... Medical Officer
M.O. R.C.N. Barracks, Halifax.

AUTHORITY: C.O. H-3-5, NS 123/m-174
NS 113-E-70.

1934

DEPARTMENT OF NATIONAL DEFENCE
 RR NAVY ARMY AIR FORCE
 STATEMENT OF WAR SERVICE GRATUITY

4
 NAVY

Deceased member's
 NAME **Earl Clawson** (CHRISTIAN NAMES) **MILLER** (SURNAME)
 REGISTER NO. **1418**
 FILE NO. **NS. N21692**
 ADDRESS **Mrs. Bessie M. Miller,**
City Market Bldg.
Brunswick St. Halifax, N.S.
 DATE OF TERMINATION OF OVERSEAS SERVICE **13 Sep/42**
 DATE OF DISCHARGE **13 Sep/42**
 SERVICE NO. **21692**
 FINAL RANK OR RATING **Sto. 1/C**

A. TOTAL QUALIFYING SERVICE
 NO. OF DAYS **1005** EQUAL TO **33** COMPLETE PERIODS AT \$7.50 \$ **247.50**

B. QUALIFYING OVERSEAS SERVICE
 NO. OF DAYS **542** LESS **15** INELIGIBLE DAYS, EQUAL TO **527** DAYS @ 25c. PER DAY \$ **131.75**
 SEE PAR. 2 OVERLEAF FOR EXPLANATION

SUB TOTAL

C. SUPPLEMENT FOR OVERSEAS SERVICE
 DAILY RATES AT DISCHARGE
 PAY \$ **2.00**
 SUBSISTENCE OR LODGING AND PROVISION ALLOWANCE \$ **1.45**
 ADDITIONAL PAY **H.L.M.** \$ **.13**
 \$
 \$
 \$
 DEPENDENTS' ALLOWANCE 1/30 OF \$ **.35**
 TOTAL \$ **3.93** X7 = \$ **27.51**
 NO. OF DAYS **527** X \$ **27.51** \$ **79.22**
 183

D. WAR SERVICE GRATUITY \$ **458.47**

E. DEDUCTIONS OVERPAYMENT OF PAY AND ALLOWANCES \$
 DEPENDENTS' ALLOWANCE AND ASSIGNED PAY \$
 OTHER DEDUCTIONS \$
 \$ **Nil**

F. AMOUNT PAYABLE \$ **458.47**
 (THIS AMOUNT IS PAYABLE IN MONTHLY INSTALMENTS OF \$ EACH)

~~THE WAR SERVICE GRANTS ACT, 1944, PROVIDES FOR YOUR RE-ESTABLISHMENT CREDIT IN THE AMOUNT SHOWN IN SUB TOTAL OF A. & B. THIS CREDIT IS AVAILABLE TO YOU IN CERTAIN CIRCUMSTANCES. INQUIRY IN THIS CONNECTION SHOULD BE DIRECTED TO THE DEPARTMENT OF VETERANS' AFFAIRS.~~

SEE REVERSE SIDE FOR EXPLANATION OF ITEMS A, B & C

G. MONTHLY INSTALMENT NOT TO EXCEED DAILY RATE OF PAY AND ALLOWANCES \$ X30 \$

INSTALM. PAYABLE	1	2	3	4	5	6	7	8	9
AMOUNT	458.47								
CHEQUE No.	111 830								
DATE	10/3/45								

INSTALM. PAYABLE	10	11	12	13	14	15	16	17	18
AMOUNT									
CHEQUE No.									
DATE									

CERTIFICATE I CERTIFY THAT THE AMOUNT HAS BEEN CORRECTLY COMPUTED AND IS PAYABLE IN ACCORDANCE WITH THE TERMS OF THE WAR SERVICE GRANTS ACT, 1944 AND THE REGULATIONS ISSUED THEREUNDER.

TREASURY
 PREPARED BY **SJD** CHECKED BY **PK Bryce** DATE **2/3/45**
 SERVICE REPRESENTATIVE
 for Dir. Naval Pay Accounting