

V33743
DALY
JOHN

PATRIC

MEDALS AND MEMORIALS—DECEASED PERSONNEL

RCNVR Oct. 43

REGISTRATION No. DATE OF DESPATCH

(1) MEDALS
PERSON

ENTITLED TO: Mrs. Annie Daly - Mother

ADDRESS: 130 Clinton St.,
TORONTO, Ont.

(2) MEMORIAL CROSS

WIDOW

ADDRESS:

(3) MEMORIAL CROSS

MOTHER Mrs. A. Daly

ADDRESS: 130 Clinton St., Toronto, Ont.

MEMORIAL BAR

DATE DESP.....

REGN. NO. 2257

(2)

(3)

18-8-43

D OF D 14-4-43

AWARDS NAVY

D.D.

DALY	John Patrick	V-33743	O/S.	FILE No.
SURNAME (IN BLOCK LETTERS)	CHRISTIAN NAMES	REG. No.	RANK ON DISCHARGE	C.A.S.F. UNIT

WAR SERVICEBADGE

(CLASS)

No.

DATE DESPATCHED:

ADDRESS:

CAMPAIGN MEDALS	REGISTRATION NUMBER AND DATE DESPATCHED
C.V.S.M. War Medal	4759-18.10.49

(THE REVERSE TO BE USED FOR ESTATE PURPOSES)



ATTESTATION FORM
(HOSTILITIES FORM)

FOR MEN OF THE ROYAL CANADIAN NAVAL VOLUNTEER RESERVE

SURNAME DALY OFFICIAL NO. V-33743
CHRISTIAN NAMES John Patrick MARRIED, SINGLE OR WIDOWER Single

PERMANENT ADDRESS	RELIGION
<u>130 Clinton Street, Toronto, Ontario.</u>	<u>C. of E.</u>

DATE OF BIRTH	*PLACE OF BIRTH	NAME AND ADDRESS OF NEXT OF KIN
<u>17 July, 1924.</u>	Town <u>Toronto</u> County <u>York</u> Province <u>Ontario</u>	<u>Mother: Annie,</u> <u>Same address.</u>
*Original Nationality of:		
Father <u>Scotch</u>		
Mother <u>Scotch</u>		

*If not the son of natural born British parents, particulars to be given at foot of next page

(A) PERSONAL DESCRIPTION ON ENROLMENT

HEIGHT	CHEST MEASUREMENT	HAIR	EYES	COMPLEXION	WOUNDS, SCARS, MARKS
Feet <u>5</u>	Inflated <u>36</u>	<u>Brown</u>	<u>Hazel</u>	<u>Fair</u>	<u>Scar on right thigh.</u>
Inches <u>11</u>	Deflated <u>34</u>				
<u>149 1/2</u>	Mean <u>35</u>				

EDUCATIONAL STANDING	TRADE OR CALLING AND IN WHOSE EMPLOY.
<u>High School Entrance.</u>	<u>Packer:</u> <u>Toronto Launderers & Dry Cleaners,</u> <u>Ossington Avenue,</u> <u>Toronto, Ontario.</u>

DATE OF ENROLMENT	RATING FOR WHICH ENROLLED	R.C.N.V.R. DIVISION, OR OTHER ESTABLISHMENT, AT WHICH ENROLLED
<u>Divisional Strength</u> <u>11th Apl., '42.</u>	<u>Ord. Smn.</u> <u>RCNVR (TEMP.)</u>	<u>H.M.C.S. "YORK", Toronto.</u>

(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 a member of the Royal Canadian Naval Volunteer Reserve Force, and that I accept and agree to abide by the rules of the said Force.
- (3) That * (a) I have never served, and am not serving in any Naval, Military, Reserve, or Territorial Force.

* (b) I served in.....for the period shown, and attach my record of service, in corroboration of this statement.

*Cross out Clause not applicable.

SERVED IN	RANK	FROM	TO

(c) I have never been rejected for or discharged from any of His Majesty's Forces on account of unfitness.

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

(5) On being enrolled as a member of the.....Toronto.....Division of the Royal Canadian Naval Volunteer Reserve, I undertake to bind myself:—

(a) To serve from the date thereof for the duration of hostilities, 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 Volunteer 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 Divisional Commanding Officer 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.

(d) To undergo vaccination or re-vaccination, or inoculation, as considered necessary by the appropriate authorities.

Dated this.....11th.....day of.....April, 1942......

Signature of applicant.....John P. Daly.....

(C) CERTIFICATE OF ATTESTING OFFICER

I hereby certify that all the foregoing statements were made by the volunteer above named, in my presence, and that he has made and signed the above declaration in my presence on this.....11th.....day of.....April, 1942......

.....A. Kanner.....
Signature of and rank of Attesting Officer.
Lieutenant, R.C.N.V.R.

(D) OATH OF ALLEGIANCE

I,.....John Patrick Daly.....do sincerely promise and swear (or solemnly declare) that I will be faithful and bear true allegiance to His Britannic Majesty, His heirs and successors according to law.

Signature of Applicant.....John P. Daly.....

Witness.....A. Kanner.....

Date.....11th April, 1942...... Rank.....Lieutenant, R.C.N.V.R......

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

(E) CERTIFICATE OF ATTESTING OFFICER

.....John Patrick Daly.....having been duly enrolled to serve in the Royal Canadian Naval Volunteer Reserve Force, I have caused his name and every prescribed particular to be recorded in the Record Book of the.....Toronto.....Division of the R.C.N.V.R. or in the appropriate official documents.

.....A. Kanner.....
Lieutenant, RCNVR. Attesting Officer.

.....11th April, 1942......R.C.N.V.R. Division
.....2. (or other establishment).....Toronto......

NOTE.—This form when completed and when the particulars on it have been noted in the Divisional Commanding Officer's Record Book, is to be forwarded to Headquarters, Ottawa, for custody.

The Certificate of medical examination, B-207, and certificates of previous service are to be sent to Headquarters, Ottawa, with this form.

Certificates of previous service will be returned after they have been examined at Headquarters, Ottawa.

This is to acknowledge that I have not been induced to enter the.....SEAMAN.....Branch of the Naval Service by the prospect of being transferred at some future date to another Branch.

.....John P. Daly.....
Signature

CERTIFICATE of the SERVICE of

John Patrick Daly

in the Royal Canadian Naval Volunteer Reserve

Training Headquarters	R.C.N.V.R. Division <i>N.M.O.S. York Toronto</i>	Official Number <i>V-33743</i>
		"
		"

Date of Birth *17 July 1924*

Place of Birth *Toronto, Ontario*

Place of Residence *130 Claxton Street, Toronto*

Trade brought up to *Painter*

Religion *C of E*

Can Swim:—P.P.T. Date *19* Signature _____ Rank _____

P.S.T. Date *19* Signature _____ Rank _____

Name and Address of Nearest Relative or Friend (in pencil)

*Mother:
Annie,
Same Address*



PARTICULARS OF SERVICE				MEDALS, DECORATIONS, etc.		
Date of Actual Volunteering	Date of Enrolment or re-enrolment	Period Volunteered for	Rating on Enrolment or Re-enrolment	Date of		Nature of Decoration
				Award	Presentation	
	<i>11 Apr 42</i>	<i>Sur. West</i>	<i>Sub-Lieut.</i>			

	Height		Chest (mean)	Weight	Hair	Eyes	Complexion	MARKS, WOUNDS, SCARS
	Feet	Inches						
On Entry	<i>5</i>	<i>11</i>	<i>35</i>	<i>149 1/2</i>	<i>Brown Hazel</i>	<i>Hair</i>		<i>scar on right thigh</i>
On re-enrolment—6 years' Service								
On re-enrolment—12 years' Service								
Further Description if necessary								

TRANSFER BETWEEN DIVISIONS			TRANSFER—LISTS A AND B		
From	To	Date	List	Date	Authority

VERIFICATION FORM

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

..RANK/RATING ..*O/SMN*.....OFF.NO. *V-33743*.....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		
							ATLANTIC		
							FRANCE G.		
							AFRICA		
							PACIFIC		
							BURMA		
							ITALY		
							DEFENCE		
							C.V.S.M.	/	<i>Medal</i>
							" CLASP		
							WAR 1945	/	<i>Medal</i>
							WAR 1915		

VERIFIED BY *L. L. Chubb*.....



76958

Can. B. 207
100 M-11-40 (7881)
N.S. 815-2-207

APR 15 1942
NO. 11301530

Certificate of Medical Examination of Officers, Men and Boys

NAVAL SERVICE OF CANADA

(R.C.N. OR RESERVE FORCES)

2

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 J. P. Daly
candidate for entry as 1st Ord Sea
and I believe him to be ^{*}in all respects fit for His Majesty's Service.
~~unfit for His Majesty's Service for the reason stated below.~~ He has signed
the Certificate given below in my presence.

† Strike out if inapplicable. * 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.	(j) Limbs and Joints	(k) Skin	(l) Ears and Hearing	(m) Testes, Varicocele, etc.	(n) Mouth, Teeth (No. deficient and No. defective, if any), Nose, Tonsils, etc.	(o) Anus, Hemorrhoids, etc.
	lbs.	ft. ins.		inches (a) maximum	right eye 20 30									
18-9	149½	5'11"	Fair	36	left eye 20 30		NORMAL	NORMAL	NORMAL	NORMAL	NORMAL	NORMAL	defective deficient	NORMAL
				(b) minimum 34	*colour vision NORMAL									
				(c) mean 35										

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

Albumen neg

X-ray Not taken
 Approved.
 Positive.
 Doubtful.

R.A.

Write in the appropriate notation, and any remarks necessary.

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, vaccination, or inoculations as may be authorized.

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

J. P. Daly
Signature of Candidate

When a Candidate is subject to a defect or disability, the following information is to be inserted:

This Candidate is the subject of.....

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

IF REJECTED
insert here
UNFIT
in block letters

Dated at Toronto the 7 of April 1942

Edmund W. Campbell
Examining Medical Officer

(Rank) SURGEON LIEUT. R. C. N. V. R.

No off

76957

N. V. 5
50M-10-41 (1994)
N.S. 815-11-5



CANADA

ATTESTATION FORM
(HOSTILITIES FORM)

NAVY OFFICE
RPR 15/542
MSH/310 7230 3

FOR MEN OF THE ROYAL CANADIAN NAVAL VOLUNTEER RESERVE

SURNAME DALY OFFICIAL NO. 138743
CHRISTIAN NAMES John Patrick MARRIED, SINGLE OR WIDOWER Single

PERMANENT ADDRESS	RELIGION
130 Clinton Street, Toronto, Ontario.	C. of E.

DATE OF BIRTH	*PLACE OF BIRTH	NAME AND ADDRESS OF NEXT OF KIN
17 July, 1924.	Town Toronto	Mother: Annie,
Original Nationality of:	County York	Same address.
Father Scotch	Province Ontario	
Mother Scotch		

*If not the son of natural born British parents, particulars to be given at foot of next page

(A) **PERSONAL DESCRIPTION ON ENROLMENT**

HEIGHT	CHEST MEASUREMENT	HAIR	EYES	COMPLEXION	WOUNDS, SCARS, MARKS
Feet.....5	Inflated.....36	Brown	Hazel	Fair	Scar on right thigh.
Inches.....11	Deflated.....34				
Mean.....	35				

EDUCATIONAL STANDING	TRADE OR CALLING AND IN WHOSE EMPLOY
High School Entrance.	Packer: Toronto Launderers & Dry Cleaners, Ossington Avenue, Toronto, Ontario.

DATE OF ENROLMENT	RATING FOR WHICH ENROLLED	R.C.N.V.R. DIVISION, OR OTHER ESTABLISHMENT, AT WHICH ENROLLED
Divisional Strength 11th Apl., '42.	Ord. Smn. RCNVR (TEMP.)	H.M.C.S. "YORK", Toronto.

(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 a member of the Royal Canadian Naval Volunteer Reserve Force, and that I accept and agree to abide by the rules of the said Force.
- (3) That * (a) I have never served, and am not serving in any Naval, Military, Reserve, or Territorial Force.

* (b) I served in.....for the period shown, and attach my record of service, in corroboration of this statement.

*Cross out Clause not applicable.

SERVED IN	RANK	FROM	Personnel Records Division.
			1. Noted in Records <i>M.B.</i>
			2. Index Card <i>M.B.</i>
			3. Non-Sub. Card.....
			4. Statistical Card.....
			5. Photo Strip <i>M.B.</i>
			6. Pension Card.....
			7. His Majesty's Forces on.....
			8.

(c) I have never been rejected for or discharged from any of His Majesty's Forces on account of unfitness.

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

DATE

(5) On being enrolled as a member of the.....Toronto.....Division.....of the
Royal Canadian Naval Volunteer Reserve, I undertake to bind myself:—

(a) To serve from the date thereof for the duration of hostilities, 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 Volunteer 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 Divisional Commanding Officer 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.

(d) To undergo vaccination or re-vaccination, or inoculation, as considered necessary by the appropriate authorities.

Dated this.....11th.....day of.....April, 1942.....

Signature of applicant.....John Patrick Daly.....

(C) CERTIFICATE OF ATTESTING OFFICER

I hereby certify that all the foregoing statements were made by the volunteer above named, in my presence, and that he has made and signed the above declaration in my presence on this.....11th.....day of.....April, 1942.....

.....A. Haney.....
Signature of and rank of Attesting Officer.
Lieutenant, R.C.N.V.R.

(D) OATH OF ALLEGIANCE

I,.....John Patrick Daly.....do sincerely promise and swear (or solemnly declare) that I will be faithful and bear true allegiance to His Britannic Majesty, His heirs and successors according to law.

Signature of Applicant.....John P. Daly.....
Witness.....A. Haney.....

Date.....11th April, 1942..... Rank.....Lieutenant, R.C.N.V.R......

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

(E) CERTIFICATE OF ATTESTING OFFICER

.....John Patrick Daly.....having been duly enrolled to serve in the Royal Canadian Naval Volunteer Reserve Force, I have caused his name and every prescribed particular to be recorded in the Record Book of the.....Toronto.....Division of the R.C.N.V.R. or in the appropriate official documents.

.....A. Haney.....
Lieutenant, RCNVR. Attesting Officer.
R.C.N.V.R. Division
.....11th April, 1942..... (or other establishment).....Toronto.....

NOTE.—This form when completed and when the particulars on it have been noted in the Divisional Commanding Officer's Record Book, is to be forwarded to Headquarters, Ottawa, for custody.

The Certificate of medical examination, B-207, and certificates of previous service are to be sent to Headquarters, Ottawa, with this form.

Certificates of previous service will be returned after they have been examined at Headquarters, Ottawa.

This is to acknowledge that I have not been induced to enter the.....SEAMAN.....Branch of the Naval Service by the prospect of being transferred at some future date to another Branch.

.....John P. Daly.....
Signature

CONDUCT SHEET

NAME John Patrick Daly RATING Ord. Seaman PORT DIVISION AND OFFICIAL NUMBER V-33743 "York" H.M.C.S.

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		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
				If in 2nd class, insert (1) Date of reduction. (2) Date of proposed restoration.	If in 2nd class, insert date from which entitled to restoration to 1st class (Art. 573, cl. 2)	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)				
<u>N.M.S. York</u>	<u>13 Apr 42</u>	<u>Nil</u>	<u>13 Apr 42</u>	<u>1st</u>	<u>1st</u>	<u>13 Apr 42</u>	<u>15 Apr 42</u>	<u>V.G.</u>	<u>Sat.</u>	<u>NY (N2)</u>	<u>-</u>	<u>H.M.C.S. Queen Charlotte</u>			<u>W. J. ...</u>
<u>N.M.S. Queen Charlotte</u>	<u>16 Apr 42</u>	<u>Nil</u>	<u>16 Apr 42</u>	<u>1st</u>	<u>1st</u>	<u>16 Apr 42</u>	<u>15 Jun 42</u>	<u>V.G.</u>	<u>Sat.</u>	<u>NY (N2)</u>	<u>-</u>	<u>N.M.S. Cornwallis</u>			<u>M. J. ...</u>
<u>Cornwallis</u>	<u>16 Jun 42</u>	<u>-</u>	<u>11 Apr 42</u>	<u>-</u>	<u>-</u>	<u>16 Jun 42</u>	<u>17 Aug 42</u>	<u>J.G.</u>	<u>Sat.</u>	<u>NY (N2)</u>	<u>-</u>	<u>Stadacona</u>			<u>A. ...</u>
<u>Stadacona</u>	<u>18 Aug 42</u>	<u>-</u>	<u>17 Jul 42</u>	<u>-</u>	<u>-</u>	<u>18 Aug 42</u>	<u>18 Aug 42</u>	<u>V.G.</u>	<u>Sat.</u>	<u>NY (N2)</u>	<u>-</u>	<u>Capston II</u>			<u>A. ...</u>

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.As, E.As, O.As, C.P.Os, P.Os 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".

CONSENT PAPER

(This paper is required in all cases where the Candidate is under the age of 18 years, in addition to the Certificate of Birth or Declaration.)

*Strike out "son" or "ward" as the case may be.

I hereby certify that my ~~son,*~~ J. P. Daly has my full consent (being himself willing) to enter the Naval Service of Canada for a period of seven years' continuous and general service, from the age of 18, in addition to whatever period may be necessary until he attains that age, agreeably to the King's Regulations.

He has not been in a Reformatory, nor has he been sentenced to imprisonment. No

I declare that he has never had fits. No

† No alteration or erasure is to be made in the date of birth given.

The date of the boy's birth is † 17 July 1924

His Religious persuasion is Anglican

Witness my hand at 130 Clinton St. Toronto Ont
10 day of April 1942

†† Strike out "Parent's" or "Guardian's" as the case may be.

Parent's ~~Guardian's~~ Signature in full John Daly

‡ Must be signed by the Father, if alive, or satisfactory explanation made.

Parent's ~~Guardian's~~ Address 130 Clinton St Toronto Ont

In the case of a Guardian see other side.

I, the above named J. P. Daly do consent to enter the Naval Service of Canada.

§ The Boy and Parent or Guardian must sign in the presence of the witness to their signatures.

§ Boy's signature in full John Patrick Daly

Signed by the said [Here write boy's name] John Patrick Daly

And [Here write Parent's or Guardian's name] John Daly

In the presence of { J. Edward Witness to signature of Boy, and Parent or Guardian
St Stephen's Rectory Address. Toronto [OVER]

C.N.S. 2418
6 M-11-40 (8065)
H.Q. 815-9-2418

Rector of St Stephen's Church
Hon Major Aylmer R.C.E.

CERTIFICATE

Strike out "Parent" or "Guardian" as the case may be.

** Strike out "he" or "she" according to sex of Parent or Guardian.

† The assertion of the boy himself should not be taken as sufficient warrant for this statement.

I certify that I am personally acquainted with this Boy's § ~~Guardian~~ Parent, and am † aware** ~~she~~ he has consented to the Boy's entry as above, and I believe the particulars stated herein to be true.

J. Edward Clergyman of the Parish

or Resident Householder

Rector St Stephen's Church Occupation

Toronto Address

April 10th 19*42*

Particulars to be stated, if possible, in the case of a Boy whose Father is dead

Date of Father's death.....

Place of death.....

Signed..... Mother

Particulars to be stated, if possible, in the case of a Boy whose Parents are both dead

Date of Father's death.....

Place of death.....

Date of Mother's death.....

Place of Mother's death.....

Signed..... Guardian

76959

NATIONAL DEFENCE

APR 15 1942

NS 1132015-30

OCCUPATIONAL HISTORY FORM

THIS FORM IS TO BE COMPLETED FOR EACH MEMBER OF THE ARMED FORCES. THE INFORMATION SOUGHT IS FOR THE USE OF GENERAL ADVISORY COMMITTEE ON DEMOBILIZATION AND REHABILITATION, A COMMITTEE SET UP BY THE GOVERNMENT OF CANADA TO STUDY PLANS FOR ESTABLISHING IN INDUSTRIAL LIFE THE MEMBERS OF THE ARMED FORCES, AFTER DISCHARGE. ACCURACY AND COMPLETENESS IN ANSWERING WILL BE OF MUCH HELP TO THE COMMITTEE.

PLEASE READ CAREFULLY THE INSTRUCTIONS GIVEN ON THE INSIDE OF COVER BEFORE COMPLETING FORM

Section A—GENERAL INFORMATION

- 1. (a) Print name in full..... John Patrick Daly..... (b) Reg'l. No. V 33743
- 2. (a) Arm of service..... RCNVR..... (b) Unit..... HMCS "YORK", Toronto..... (c) Rank..... Ord. Smn.
- 3. (a) Date of birth..... 17 July, '24..... (b) Have you any dependents?..... No...... (c) Place of residence at time of enlistment..... Toronto.....
- 4. (a) Place of enlistment..... Toronto..... (b) Date of enlistment..... 11 Apl, '42.....

PLEASE LEAVE BLANK

Section B—EDUCATION AND TRAINING

- 5. (a) State age on finally leaving school..... 16..... (b) Were you attending school or college up to the time of enlistment?..... No.
- 6. State definitely highest standing reached at public, technical or high school (for instance—"4 years, Public School", "two years, High School", "Junior Matriculation", or "4 years technical course in printing", etc.)..... High School Entrance.....
- 7. If you attended a university, give name of university and standing or degree secured..... -----
- 8. (a) Did you ever enter upon a trade apprenticeship?..... No...... (b) If so, for what occupation?..... -----..... (c) Did you finish it?..... -----..... (d) If you did not finish it, how long did you serve at it?..... -----
- 9. (a) What languages do you speak fluently?..... English..... (b) What languages do you read well?..... English

Section C—EMPLOYMENT CONDITION AT TIME OF ENLISTMENT

- 10. (a) State whether you were WORKING or NOT WORKING at time of enlistment. (Enter here only "Working" or "Not Working", as case may be; particulars are asked for below)..... Working..... (b) At time of enlistment of what trade union or professional society were you a member?..... -----

Section D—PARTICULARS CONCERNING THOSE WHO WERE UNEMPLOYED AT TIME OF ENLISTMENT

QUESTIONS 11 TO 17 REFER ONLY TO THOSE WHO ANSWER "NOT WORKING" IN QUESTION 10 (a)

- 11. Had you ever been employed fairly regularly since leaving school?.....
- 12. (a) If answer to 11 be "Yes", state exact trade or occupation at which you actually worked..... (b) State how long you had worked at this trade or occupation.....
- 13. If answer to 11 be "No", state exact trade or occupation for which you feel qualified.....
- 14. If you had been employed after leaving school, state when you last worked fairly regularly before enlistment.....
- 15. Give details of last employer, if any: Name..... Address.....
- 16. Nature of employer's business (for instance, "farmer", or "building contractor", or "boot factory", or "iron foundry", or "retail store", etc.).....
- 17. (a) If your last employment was in a business of your own, state nature and address of business..... (b) Date of discontinuing it.....

Section E—PARTICULARS CONCERNING THOSE WHO WERE EMPLOYED AT TIME OF ENLISTMENT

QUESTIONS 18 TO 23 REFER ONLY TO THOSE WHO ANSWER "WORKING" IN QUESTION 10 (a). PLEASE READ THESE QUESTIONS AND REPLY TO THOSE APPLYING TO YOU AT TIME OF ENLISTMENT

IF YOU WERE AN EMPLOYEE WORKING FOR AN EMPLOYER UP TO THE TIME OF ENLISTMENT, PLEASE ANSWER QUESTIONS 18 TO 21

- 18. Name of employer..... Toronto Launderers & Dry Cleaners..... Address..... Toronto, Ont.
- 19. Nature of employer's business (for instance, "farmer", or "building contractor", or "boot factory", or "iron foundry", or "retail store", etc.)..... Laundry, dry cleaning.....
- 20. (a) Your specific occupation..... Packer..... (b) Number of years' experience at this occupation with any employer..... 1 yr.
- 21. (a) Did your employer promise definitely to give you employment on discharge?..... No...... (b) Did your employer refuse to promise you employment on discharge?..... No...... (c) Do you wish to return to your former employment?..... Yes.

IF YOU WERE WORKING ON YOUR OWN UP TO THE TIME OF ENLISTMENT, THAT IS TO SAY, OPERATING A FARM, A STORE, AN AGENCY, OR IN PROFESSIONAL PRACTICE, OR AS A PARTNER IN ANY SUCH LINE, PLEASE ANSWER QUESTIONS 22 AND 23

- 22. (a) State nature of business, or professional practice..... (b) Where was it located?.....
- 23. (a) Number of years engaged in this business..... (b) Have you made, or will you make plans to return to the same or a similar business on discharge?.....

Section F—PARTICULARS OF FARMING EXPERIENCE

- 24. (a) Do you wish to engage in farming after the war?..... No...... (b) Do you feel competent to operate a farm?..... (c) If so, in what kind of farming?.....
- 25. (a) Were you born on a farm?..... No...... (b) How many years' actual farming experience have you had?..... (c) In what provinces did you have experience?.....

Section G—MISCELLANEOUS

- 26. Have you made any arrangements other than indicated above, for re-establishment in civil life after discharge?..... No.
- 27. If so, state nature of your plans (for example, do you plan to return to school, or have you been assured of a job, etc.).....
- 28. State any employment preference or ambition you may have, other than indicated elsewhere in this form..... Sheet-metal work.



DATE..... 11th April, 1942..... SIGNATURE..... John P. Daly

COPY TO
VWD
ES

APR 28 1942
1111 - 1942

TAG/MR

113-D-1530

113-D-1530

April 27, 1942.

45

MEMORANDUM:

The enrolment of the undermentioned ratings in the TORONTO Division, R.C.N.V.R., is approved:

<u>NAME</u>	<u>RATING</u>	<u>O.N.</u>	<u>DATE</u>
DALY, John P.	Ord. Smn.	V. 33743	11 April 42
HARRIS, Robert G.	Ord. Smn.	V. 33745	11 April 42
MCMULLEN, Albert	Ord. Smn.	V. 33746	11 April 42
WHITTEN, Norman	Ord. Smn.	V. 33748	11 April 42
MACDOUGALL, Angus	Ord. Smn.	V. 33749	11 April 42
ROBINSON, David	Ord. Smn.	V. 33750	11 April 42
COATES, John David	Ord. Smn.	V. 33751	11 April 42
BOWLES, Henry	A/ERA 4/C	V. 33753	13 April 42

BY ORDER,

for *A.S. Money*
SECRETARY, NAVAL BOARD.

2/2

The Commanding Officer,
H.M.C.S. "YORK"
Automotive Bldg.,
Exhibition Park,
TORONTO, Ont.

- Naval Service -

17

15 April, 1943.

113-D-1530.

Memorandum:

With reference to Naval Service
Headquarters Memorandum N.S. 30-17-1 of the 5th
November, 1941, you are informed with regret
(casualty has)
that the following (~~casualties have~~) been reported
to the Next-of-kin in your area:

<u>NAME</u>	<u>RATING & OFFICIAL NUMBER.</u>	<u>ADDRESS OF NEXT OF KIN</u>
DALY, John Patrick	Ordinary Seaman, V-33743, Royal Canadian Naval Volunteer Reserve.	Mother: Mrs. Annie Daly, 130 Clinton St., TORONTO, Ont.

"Missing" when the ship in which
he was serving capsized in the main channel at
the entrance to Saint John Harbour, N.B., on
the 14th April, 1943. While this rating is
missing, it is impossible to make an estimate as
to his chances of survival. When date of presump-
tion of death is received you will be notified.

By Order,

R. A. ...
SECRETARY, NAVAL BOARD.

The Commanding Officer,
H.M.C.S. "YORK".

LA/R-K.

N.S. 113-D-1530
N.S. 123-E-77
N.S. 113-J-116
N.S. 113-H-397
N.S. 113-R-355
N.S. 123-W-75

16

- Naval Service -

Naval Information

Naval Allotment Section (Treasury)

S.N.P.A.

S.N.P.A. Re: Dependent's Allowance.

It is notified for your information that the following are "Missing", when the ship in which they were serving capsized at the entrance to Saint John Harbour, New Brunswick on the 14th of April, 1943.

<u>NAME</u>	<u>RANK/RATING, O.N.</u>	<u>NAME & ADDRESS OF NEXT OF KIN.</u>
DALY, John Patrick	Ord. Seaman, V-33743, ✓ R.C.N.V.R.	Mother: Mrs. Annie Daly, 130 Clifton Street, TORONTO, Ont.
ELLIOTT, Odin Arthur	Able Seaman, A-4441, R.C.N.V.R.	Wife: Mrs. Beulah R. Elliott, 14 McCully Street, HALIFAX, N.S.
JASPER, Lawrence Cyril	Ord. Signaller, V-7574, R.C.N.V.R.	Wife: Mrs. Mary K. Jasper, 7 Germain Street, West SAINT JOHN, N.B.
HODWELL, Joseph Winslow	Ord. Seaman, V-686, R.C.N.V.R.	Mother: Mrs. Margaret Hodwell, 39 Thorne Avenue, SAINT JOHN, N.B.
ROURKE, Thomas James	Motor Mechanic, V-11392, R.C.N.V.R. ✓	Wife: Mrs. Wilma E. Rourke, 2 St. Anne Street, LEVIS, Quebec.
WAMBACK, Harding Robertson	Skipper V., R.C.N.V.R.	Wife: Mrs. Lillian Wamback, East LaHave, LUNenburg COUNTY, N.S.

The following notation was placed on the copy for Naval Information: Next-of-kin are being informed by the Naval Officer-in-Charge, Saint John, N.B. Before action is taken on the above information, may it be confirmed that next-of-kin have received notification of casualty.

YB

(T.L. Brandon,
Paym. Lieutenant, R.C.N.V.R.,
for Officer i/c, Naval Personnel Records.

per LA

BZ

15/5

LA NPR/5

OTTAWA, 15th April, 1943.

P.A.
 TREASURY OFFICE
 DATE 15/4/43
 INITIAL AD

DEPARTMENT OF NATIONAL DEFENCE
- Naval Service -

Ottawa, Canada.

.....15 April, 1943.....
(Date)

Sir:

The following casualty has been reported -

NAME	RANK or RATING	NAVAL NO.
DALY, John Patrick	Ordinary Seaman	V-33743, R.C.N.V.R.

DATE OF ENLISTMENT - 11 April, 1942. Active Service: 13 April, 1942.

DATE OF DISCHARGE - _____

HOSPITAL - _____

(If discharged in hospital under jurisdiction of
D.P. & N.H.)

SERVICE - _____

Will be reported at a later date.

(Indicate whether in Canada only; or in Canada and the
high seas or elsewhere.)

Reason for discharge and - "MISSING" when the ship in which he was
when and where any disability was incurred, or where death
was incurred, or where death occurred.
the entrance to Saint John Harbour, N.B., on the 14th of April, 1943.

While this rating is missing it is impossible to make an estimate as to
his chances of survival. When date of presumption of death is received you
will be notified. (Show clearly whether death or disability due to enemy
action, accident or disease, and whether it occurred in Canada, or on
the high seas or elsewhere outside Canada.)

NEXT OF KIN & RELATIONSHIP - _____

RELATIONSHIP Mother NAME Mrs. Annie Daly,

ADDRESS 130 Clinton St., Toronto, Ont.

NOTE: If records indicate that rating was separated from
his wife, legally or otherwise, details to be furnished and
copy of any Court Order, the separation Agreement, etc.,
to be furnished.

FORM "A" RESPECTING THE ABOVE NAMED HAS BEEN PREVIOUSLY
FORWARDED. PLEASE SEE REVERSE SIDE FOR DETAILS OF
MARRIAGE ALLOWANCE, DEPENDENTS ALLOWANCE, etc.

REMARKS:

NOTES: This form to be accompanied by documents only in cases of (a) discharge medically unfit (b) Death in Canada (c) Death anywhere if question of misconduct arises. Report of Board of Inquiry to be forwarded if disability or death is due to accidental injury in Canada or possible misconduct -- If Documents are not readily available this form should be sent at once with advice that documents will follow as soon as possible.

THIS PORTION OF FORM COMPLETED BY CHIEF TREASURY OFFICER, DEPARTMENT OF NATIONAL DEFENCE, NAVAL SERVICE.

OFFICER'S OR RATING'S MONTHLY PAY ALLOTTED TO WIFE AND/OR DEPENDENT-

\$ Nil ASSIGNED TO Nil

MARRIAGE ALLOWANCE (rate) \$ Nil PER DIEM (date) Nil PAID TO

DEPENDENTS ALLOWANCE (rate) \$ Nil PAID TO (date) Nil

TOTAL MONTHLY PAYMENT TO - WIFE \$ Nil

DEPENDENTS \$ Nil

Computed by R. J.

Checked by A.

for [Signature] Chief Treasury Officer, DEPARTMENT OF NATIONAL DEFENCE, (Naval Service.)

The Secretary, The Canadian Pension Commission, Room 404, Daly Building, OTTAWA, Ont.

The Secretary, The Department Pensions & National Health, Daly Building, OTTAWA, Ont.

38

- NAVAL SERVICE -

N.S.113-D-1530.....

MEMORANDUM TO D.N.I.
&
V.C.N.S.

This is to certify that -

DALY, John Patrick, Ord. Smn., R.C.N.V.R.,
..... O.N. V-33743.....

was serving in H.M.C.S. "CAPTOR II" add'l for... as at 14th.,
April, 1943. H.D.C. 15.

L.R. Fairguy
.....
Chief of Naval Personnel

This rating was aboard H.D.C. 15 when this craft capsized in
the main channel to Saint John Harbour at 141750Z/4/43.

The above mentioned rating is, therefore,

...Missing, presumed dead.....

Concurred:-
C.H. Little
.....
Dir. Naval Intelligence.

Percy W. Phipps
.....
Commander, R.C.N.,
DIRECTOR OF OPERATIONS DIVISION.

M. Beery
.....
Approved for Staff.

O t t a w a, 1943.

L. Lyons Atwood
Acting Officer (Operations)
RCNVR

LA/C

- Naval Service -

44

113-D-1530 PERS. (N)

10 August, 1943.

Dear Sir:

The undermentioned Canadian Naval Casualty is forwarded to you for transmission to the Inspector of Income Tax concerned:

Name ... DALY John Patrick
(Surname) (Christian Names)

Rank/Rating Ordinary Seaman

Official No. V-33743. R.C.N.V.R.

Nature of Casualty "Missing", presumed dead, when the craft in which he was serving capsized in the main channel to Saint John Harbour, N.B.

Date of Casualty Presumed dead to date the 14th April, 1943.

Address at time of Enlistment 130 Clinton St.

..... TORONTO, Ont.

Marital Status at time of Enlistment Single

Occupation ... Packer, Toronto Launderers & Dry Cleaners ..

Name & Address of Next of Kin Mother, Mrs. Annie Daly, ..

130 Clinton St., Toronto, Ont.

Yours truly,

for

SECRETARY, NAVAL BOARD.

Commissioner of Income Tax,
Department of National Revenue,
Ottawa, Ont.

Royal & Canadian messages
fwd. 10-8-43. e,

N.P.R./5

LA/C

- Naval Service -

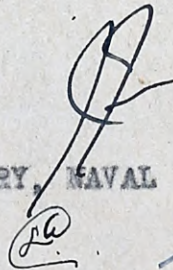
46

113-D-1530 PERS.(N).

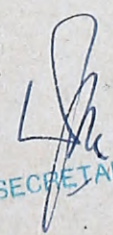
10 August, 1943.

THIS IS TO CERTIFY that according to official information John Patrick Daly, Ordinary Seaman, Official Number V-33743, Royal Canadian Naval Volunteer Reserve, is missing and presumed dead by Naval Authority to date the 14th of April, 1943. This rating was lost when the craft in which he was serving capsized in the main channel to Saint John Harbour, N.B.

SECRETARY, NAVAL BOARD.



DEPUTY SECRETARY PERSONNEL



LA/CM

AIR/MAIL

6TH NOVEMBER? 1943.

113-N-397. 113-D-1530.

113-J-116. PERS. (N).

MEMORANDUM:

With reference to your signal 031833 November,
Service and Medical Documents requested therein for the undermentioned
ratings are enclosed for information and subsequent return to
Headquarters.

<u>NAME</u>	<u>RATING & O.N.</u>	<u>NEXT OF KIN</u>
Lawrence Cyril <u>Jasper</u> ,	Ord. Sig., V-7574, R.C.N.V.R.	Wife: Mrs. Mary K. Jasper, 7 Germain Street, West ST. JOHN, N.B.
Joseph Winslow <u>Nodwell</u>	Ord. Seaman, V-686, R.C.N.V.R.	Mother: Mrs. Margaret Nodwell, 39 Thorne Avenue, SAINT JOHN, N.B.
John Patrick <u>Daly</u> ,	Ord. Seaman, V-33743, R.C.N.V.R.	Mother: Mrs. Annie Daly, 130 Clinton Street, TORONTO, Ontario.

BY ORDER,

Naval Officer-in-Charge,
ST. JOHN, New Brunswick.

H.B. Money
for SECRETARY, NAVAL BOARD.

113-D-1530

1307211

(NAVAL SERVICE)

FROM...THE NAVAL OFFICER IN CHARGE, SAINT JOHN, N. B.

DATE...17TH DECEMBER, 1943.

FILE...S.J.4-2-4:

TO.....THE SECRETARY, NAVAL BOARD, NAVAL SERVICE HEAD-
QUARTERS, OTTAWA, ONTARIO.

REPORT OF BURIAL OF TWO UNIDENTIFIED PERSONNEL

*No Receipt
no record I.R.*

Submitted for the information of the Department with reference to our letter S.J. 4-2-4 dated 3rd September, 1943.

Forwarded herewith information for completion of Form C.N.S. 1121, for two unidentified personnel, which was unobtainable at time report was made.

113-R. 355
113-D. 15-30 ✓
123-E-77
123-W-75
113-J-116
113-N. 397

- (1) Place of Burial - Fernhill Cemetery
- (2) Date of Burial - 17th November, 1943.
- (3) Location, number etc., of grave. - Central Avenue Lot, No. 3893, Graves No. 1-137 - No. 2 - 138.
- (4) Undertaker employed- Brennan's Funeral Service, 11 Paradise Row, Saint John, N. B.

5 copies in pers file

Noted on Casualty Card 29/12/43 e/ N.B.R./5

[Signature]
C. J. STUART,
CAPTAIN, R.C.N.R.,
NAVAL OFFICER IN CHARGE,
SAINT JOHN, N. B.



JR/fb

26th. April, 1945

N.S. V-33743 (PERS. (N) (18))

Dear Madam:✓

I am directed to inform you that your application for the War Service Gratuity in respect of your late son has been referred to the Dependents' Allowance Board for decision concerning whether you may be classed as dependent as provided under the War Service Grants Act, 1944.

This procedure is required in all cases where records at Headquarters disclose the fact that you were not in receipt of Dependents' Allowance as at the death of your late son.✓

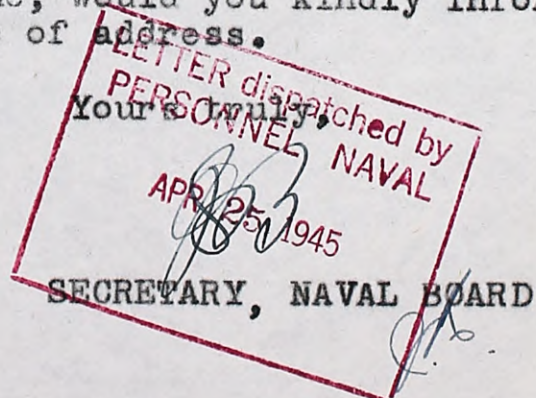
Immediately upon receipt of a decision from the Dependents' Allowance Board, if eligible, payment will be made in a lump sum directly to you.

On the other hand, should the Board find you cannot be classed as a dependent, the Gratuity or unpaid balance thereof will be transferred to the Administrator of Estates for distribution as part of your son's Service Estate.

In the meantime, would you kindly inform this department of any change of address.

P.A.'S CHECKED IN

C.R. BY...*[Signature]*



Mrs. Annie Daly,
130 Clinton Street,
Toronto, Ontario.

130 blinton St
sront. ont.

June 6th 1943



Dear Sir

My son a seaman

John Patrick Dohy,
V, 33743. was lost in
the Harbour Craft that turned
over. in St John N. B.

Harbour. on April 14th 1943
since receiving a telegram
telling me of his loss I have
had no other news.

2

I have been requested to write to this Address for any queries, I have had no news, if his body has been found, and if it should be, could I have it brought to Toronto for burial, and of his belongings, I believe they have been sent to Ottawa, I hope I am not asking too much if you could enlighten me in any way.

Yours sincerely

M^{rs} Annie Daly



The Prudential

INSURANCE COMPANY OF AMERICA

HOME OFFICE: NEWARK, N. J.

ALBERT F. JAQUES, SECOND VICE PRESIDENT
RALPH T. HELLER, ASSISTANT SECRETARY
WALTER R. DUNN, ASSISTANT SUPERVISOR

ORDINARY CLAIM DEPARTMENT
DANIEL A. MCCABE, MANAGER
ASSISTANT MANAGERS
MARTIN W. BENNETT HENRY PICKEL

IN RE

Death Claim,
Policy D-10968816,
John Patrick Daly.

August 18, 1943.

Administrator of Estates,
Department of National Defence,
Ottawa, Ontario, Canada.

Dear Sir:

We have been presented with a death claim on the life of John Patrick Daly, ordinary seaman, official number V-33743, Royal Canadian Naval Volunteer Reserve who is presumed dead by Naval Authority as of April 14, 1943. This man's date of birth is July 17, 1924.

We would appreciate your furnishing us with a copy of any will made by our insured while in the service. If you do not have a record of any will being executed, please let us have a statement to that effect.

Yours truly,

eff

GD:AGL

J O'Connor

Senior Approver.
Ordinary Claim Department.



ACCOUNT OF SALE OF THE EFFECTS

SOLD before the Mast, the day of 19.....

TO WHOM SOLD		PARTICULARS	Charged in Ledger	Paid for in Cash
No. Ship's Book in consecutive order	NAME <small>(If any are not sold, state how they are to be disposed of)</small>			
1	Pen and Pencil Set			
1	Manual of Seamanship			
1	Razor			
4	Razor Blades			
1	Tube Shave Cream			
4	Tubes Tooth Paste	Personal Kit of John P. Daley		
1	Tin Talcum Powder			
1	Housemaid			
1	pkg Papers and Pictures			
1	Shaving Brush			
2	Bottles of Linament			
1	Jar Noxzema			
2	Tooth Brushes	1 8/2		
1	New Testament	4/5/43		
1	Bible	W.A.B.		
5	Brushes, Various			
1	Scarf			
1	Attache Case			
1	Lock Complete	Total proceeds of sale carried to account on the other side		

3/5/43

{ Lieutenant or Officer who
attended at the sale of
the Effects.

The whole of the Effects which were left by the person named on the other side, are enumerated in the above Account and on the other side thereof.*

..... Signature Signature
..... Rank Rank

When the effects are those of an Officer, this statement is to be signed by two of his messmates; when they are those of a Petty Officer, Seaman or Boy, it is to be signed by the Executive Officer and by the Master at Arms or a Ship's Corporal.

ACCOUNTS OF MEN DISCHARGED

Account of the Balance of Wages, the Sale of Clothes and Effects
and the other Credits of Men Discharged to the
Shore, D. D. or Run

Name.....Rating.....
 Official No.....H.M.C.S.....List.....
 Who*.....on the.....19.....

	\$	cts.
Net sum due on ledger on account of Wages.....		
Proceeds of sale of Effects charged against Wages, brought from the other side.....		
CASH—		
Proceeds of sale of Effects, paid for in Cash, brought from the other side.....	\$	cts.
Found amongst Effects.....		
Debts collected \$.....		
Cash debited in the Accountant Officer's Cash Acct.....		
If in debt in ledger, amount to be stated (in red ink).....		
Rate of allotment (in words).....charged to.....		
Name of ship from which transferred.....		
Total†.....		

We hereby certify that we have every reason to believe that the above account contains a true statement of all wages, Effects, and other Credits or Debts on the Ledger of.....
amounting to a net balance†.....
 of.....dollars.....cents.

Dated on board H.M.C.S.....at.....
this.....day of.....19.....

Approved.....Accountant Officer

Commanding Officer.

For Use at Headquarters. \$.....cts.....credited on Inspector's certificate
 No.....to.....

Signature.....
 Date.....19.....

*State whether discharged on shore, D.D. or Run. †State whether "debtor" or "creditor".
 §Subscriptions for Charitable or other purposes should not be shown hereon, but on a Remittance List, and dealt with as laid down in the King's Regulations.

DISTRIBUTION OF SERVICE ESTATES

JMS

Estates Form "P. 4"

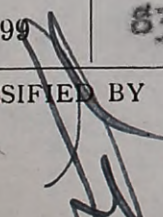
NAVY

Name: DALY John P. No.: V33743
 Surname Christian Names
O/Sman H.M.C.S. Captor 11 14-4-43
 Rank Unit Date of Death

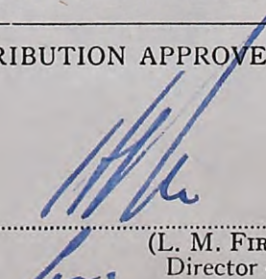
AMOUNT
 W.S.G. \$ 69.77
 L.P.C. \$ 52.84
 Date: August 14/45
 Other Credits.....
 Total..... \$122.61
 Prev. Dist. \$ 52.84
 This Dist. \$69.77

SHARE	RELATIONSHIP	NAME AND ADDRESS	AMOUNT
All	Mother	Mrs. Annie Daly 130 Clinton Street Toronto Ontario (Sole Beneficiary per will)	\$69.77

WSG

AUTHORITY					
H.Q. F.E. No.	VOTE	PRI	H.Q. SUB.	OBJ.	AMOUNT
9999	831	00	50	000	\$69.77
CLASSIFIED BY 			EXAMINED BY		
			For Chief Treasury Officer		

DISTRIBUTION APPROVED AND AUTHORIZED


 (L. M. FIRTH) Colonel
 Director of Estates

AUDITED FOR PAYMENT

For Chief Treasury Officer

MRR

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

4
 NAVY

DECEASED MEMBER NAME

John Patrick
 (CHRISTIAN NAMES)

DALY
 (SURNAME)

REGISTER NO. 8551
 FILE NO. NS. V33743
 DATE 11 Jul/45
 SERVICE NO. V33743
 FINAL RANK OR RATING O. Snn.
 DATE OF DISCHARGE 14 Aug/43

PAYEE Director of Estates, for Service Estate of
 ADDRESS 308 Sparks St., John P. Daly,
 Ottawa, Ont. NS. V-3373

DATE OF TERMINATION OF OVERSEAS SERVICE 16 Aug/42

A. TOTAL QUALIFYING SERVICE

NO. OF DAYS 367 EQUAL TO 12 COMPLETE PERIODS AT \$7.50

\$ 90.00

B. QUALIFYING OVERSEAS SERVICE

NO. OF DAYS 9 LESS 111 INELIGIBLE DAYS, EQUAL TO 9 DAYS @ 25c. PER DAY

2.25

C. SUPPLEMENT FOR OVERSEAS SERVICE

DAILY RATES AT DISCHARGE

PAY \$1.50
 SUBSISTENCE OR LODGING
 AND PROVISION ALLOWANCE \$1.45
 ADDITIONAL PAY \$

DEPENDENTS' ALLOWANCE 1/30 OF \$

TOTAL \$2.95 X7 = \$ 20.65
 NO. OF DAYS 9 X \$ 20.65
 183

1.02

D. WAR SERVICE GRATUITY

93.27

E. DEDUCTIONS OVERPAYMENT OF PAY AND ALLOWANCES \$ 23.50
 DEPENDENTS' ALLOWANCE AND ASSIGNED PAY \$
 OTHER DEDUCTIONS \$

23.50

F. TOTAL AMOUNT PAYABLE

69.77

G. YOUR PORTION OF GRATUITY IS—

DEPENDENTS' ALLOWANCE IN ISSUE TO YOU \$ _____ OF \$
 TOTAL DEPENDENTS' ALLOWANCE IN ISSUE \$ _____

Voucher 1353- July 26/45 \$ 69.77

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

TREASURY
 PREPARED BY LJM
 CHECKED BY H. Walker
 DATE 7/11/45

STATEMENT OF WAR SERVICE GRATUITY - NAVY

Deceased Member's Name John Patrick DALY
 (Christian Names) (Surname)

Payee Director of Estates for service estate of John P. DALY
 Address 308 Sparks Street, Ottawa, Ont. NS. V33743

Register No. 8551
 File No. V33743
 Date 20-4-4
 Service No. V33743
 Final Rank or Rating O. Sm
 Date of termination of overseas service 16 Aug 42 Date of Discharge 14 Feb 43

A. TOTAL QUALIFYING SERVICE
 No. of days 367 equal to 12 complete periods at \$7.50
30 90.00

B. QUALIFYING OVERSEAS SERVICE
 No. of days 9 less Nil ineligible days equal to 9 days @ 25¢ per day 2.25

C. SUPPLEMENT FOR OVERSEAS SERVICE
 DAILY RATES AT DISCHARGE

Pay	\$	1.50	
Subsistence or Lodging and Provision Allowance	\$	1.45	(16)
Additional Pay	\$		
Dependents' Allowance 1/30 of \$	\$		
Total		<u>2.95</u>	<u>x 7 = \$ 20.65</u>
No. of days		<u>9</u>	<u>x \$ 20.65</u>
		<u>183</u>	<u>1.0</u>

D. WAR SERVICE GRATUITY 93.2

E. DEDUCTIONS
 OVERPAYMENT OF PAY AND ALLOWANCES \$ 23.50
 DEPENDENTS' ALLOWANCE AND ASSIGNED PAY \$
 OTHER DEDUCTIONS \$

23.50

F. TOTAL AMOUNT PAYABLE 69.77

G. YOUR PORTION OF GRATUITY IS
 Dependents' Allowance in issue to you \$ _____ of \$ = \$ 69.77
 Total Dependents' Allowance in issue \$

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.

Prepared by	Checked by	Treasury	
		Checked by	Date

Service Representative

D.N.P.A. CHECK

- 1 6/20
- 2 6/20
- 3 6/20
- 4 6/20
- 5 6/20

Bald
D.N.P.A.
Debt Pass List #27
\$ 23.50 Pay 7/30

4

IN THE NAME OF GOD, AMEN

I, John Patrick Daly, Ord. Smn., R.C.N.V.R., of His Majesty's Ship H.M.C.S. "YORK", Toronto (now a Patient* in),

*If in Hospital or in Hospital Ship. Insert the degree of relationship (if of any) and place of residence of the Legatee or Legatees. See instructions on the back hereof.

being sound of mind, do hereby make this my last Will and Testament: I give and bequeath unto my mother, Mrs. Annie Daly, 130 Clinton St., Toronto, Ontario,

all such Wages, Prize Money, Allowances, and other Sum or Sums of Money, as now are, or hereafter may be due to me for my service on board the said Ship, or any other Ship or Vessel, of the Royal Navy, together with all other my Estate and Effects whatsoever and wheresoever.

Insert the degree of relationship (if of any) and place of residence of the Executor or Executors.

And I do hereby appoint my father, Mr. John Daly, 130 Clinton Street, Toronto, Ontario,

Executors of this my last Will and Testament; and hereby revoking all former Wills by me made, I declare this to be my last Will and Testament.

In Witness whereof I have at Toronto hereunto set my hand, this eleventh day of April, in the Year of Our Lord One Thousand Nine Hundred and forty-two.

John P. Daly

Signed by the said Testator, as his last Will and Testament, in the presence of us present at the same time, who in his presence at his request and in the presence of each other have subscribed our names as Witnesses.

Witnesses

[Signatures of witnesses]

NOTE.—As Wills of Petty Officers, Seamen, and Marines must be executed with the formalities required by the Law of England in the case of other persons, every such Will must be executed in the presence of, and be attested by, two disinterested Witnesses.

Where the Will is made on board one of His Majesty's Ships, one of the two requisite attesting Witnesses shall be a Commissioned Officer, Chaplain, or Warrant or Subordinate Officer belonging to His Majesty's Naval or Marine or Military Force.

Where the Will is made elsewhere than on Board one of His Majesty's Ships, one of the two requisite attesting Witnesses shall be a Commissioned Officer, or Chaplain, or Warrant or Subordinate Officer, or the Governor, Agent, Physician, Surgeon, Assistant-Surgeon, or Chaplain of a Naval Hospital at home or abroad, or a Justice of the Peace, or the Incumbent, Curate, or Minister of a Church or Place of Worship in the Parish where the Will is executed, or a British Consular Officer, or an Officer of Customs, or a Notary Public, or a Solicitor, or in Scotland a Law Agent.

A Will made by any person while serving as a Seaman or Marine will not be valid for any purpose if it is written or contained on or in the same Paper, Parchment, or Instrument with a Power of Attorney.

The Certificate on the back hereof, is to be signed by the person by whom the Will is prepared.

Noted in Service Records by [Signature]

Instructions for filling up the Form

If a special legacy is to be given, the name, residence (and relationship if any) of the person interested is to be inserted in the space after the words "I give and bequeath," or if more than one person, the respective names, &c., also the particulars of the property bequeathed.

Then the words "And I give and bequeath unto" should be inserted together with the names, &c., of the person or persons to whom the residue of the Testator's property is to be given, and the words printed in italics commencing "all such wages," should be struck out.

If, however, the *whole* of the Testator's property is to be given to one person, or between several, all that is necessary is to insert in the space, the names, &c., of the person or persons to be benefited.

CERTIFICATE

I hereby certify that the Will on the other side hereof was previously to its execution read over to the Testator who appeared perfectly to understand the same.

.....*Jack Bees*..... } Signature of the person
by whom the Will was prepared.

MEMORANDUM FOR

P. 64

Mrs. Annie Daly
 130 Clinton Street
 Toronto, Ontario

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. 113-D-1530 FD.190

DEPARTMENT OF NATIONAL DEFENCE
 ESTATES BRANCH
 OTTAWA, ONT.

August 17, 1943

For the purpose of record and in the event of there being any Service estate
 available for distribution (according to law) on account of the late

DALY, John Patrick, Ord. Smn.

No. V. 33743, R.C.N.V.R.



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 com-
 plete and sign the Certificate. This form should then be returned to the above address.

A deceased's Service estate, the administration of which is the responsibility of
 the Estates Branch, consists of any balance of pay and allowances at credit, cash on
 hand and the personal effects which are under the control of the Service authorities.
 To obtain such assets, it is not necessary for the person(s) legally entitled thereto to
 obtain through the Courts Probate of the Will, or if none, Letters of Administration
 of his estate.

In addition to the administration of those Service assets, the Administrator of
 Estates is authorized to withdraw into Government account any funds (within a
 defined amount) on deposit to the deceased's credit in Banks, Post Offices or other
 financial institutions in Canada and Overseas, without expense or trouble to the
 person(s) legally entitled to the estate, and to distribute such funds at the same time
 as any balance of pay is distributed. Also, War Savings Certificates and Victory
 Loan Bonds owned by the deceased may be redeemed and similarly distributed, or
 transmitted into the name(s) of the person(s) legally entitled. Such Certificates and
 Bonds should not be forwarded to the Administrator of Estates until they are requested.

If there are other assets which necessitate an application for Probate or Letters
 of Administration, the Administrator of Estates may transfer and hand over the
 Service assets to the executor or administrator appointed by the Court so that all
 the estate, Service and otherwise, may be dealt with as a whole.

The information given by you on Pages 2 and 3 of this form is therefore of import-
 ance in determining whether or not the deceased's assets are such that they may all
 be administered by the Administrator of Estates to the person(s) legally entitled,
 that is, without the need for Probate or Administration.

If there is insufficient space for complete particulars to be given opposite any
 question on Pages 2 and 3 of this form, the space under "additional remarks" on
 page 4 should be used.

A. Wade
 (H.R. Wade) Lt.-Cdr. RCNVR,
 for (L.M. Firth) Lt.-Colonel,
 Administrator of Estates.

HRW/ JN

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 specified	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.....			
2	Children of the Deceased and dates of their Births.....			
3	Father of the Deceased.....	John Barnileon Daly	48	26-ay. 1 Pct. V.G.C. Brit. Henry Kingston Ont.
4	Mother of the Deceased.....	M ^{rs} Annie Daly	50	130 Clinton St. Toronto
5	Brothers of the Deceased	Full Blood	Ross Arthur McLaren Daly.	13 130 Clinton St Toronto.
		Half Blood	MI	
6	Sisters of the Deceased	Full Blood	M ^{rs} Nan Wallace	27 130 Clinton St. Toronto.
		Full Blood	M ^{rs} Jean Black	26 89 Alberta Ave Toronto.
		Half Blood	MI	
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	

M. J. M.

ANSWER FULLY EACH QUESTION ON THIS PAGE

PARTICULARS AS TO IDENTITY

8	Full names of the deceased	John Patrick Daly
9	Date of his birth	17 th Day of July, 1924.
10	Place and date of his marriage.	MI
11	Place and date of his parents' marriage.	July 28 th , 1916. Dundee Scotland.

PARTICULARS OF DOMICILE

12	Place where deceased was born.	Toronto Ont Canada
13	State, in order, the Province, State and/or Country in which he resided before enlistment and the period of time in each.	(a) (b) Ont. Canada (c) (d) Since Birth
14	Nature of employment before enlistment.	Laundry & Sheet Metal Work
15	State whether he owned the premises in which he lived and, if so, where situated.	No
16	Name place where deceased stated he intended to make his permanent home.	Canada

PARTICULARS OF ESTATE

17	Did he leave a Will?	
18	If married, and domiciled in the Province of Quebec or in a State in the U.S.A. or in a Country under the laws of which there is community of property between spouses, — was there a marriage contract dealing with property?	No
19	Did he have a Bank, Post Office or other deposit account? If so, give name and address of bank, etc. and the amount on deposit.	No
20	Amount of War Savings Certificates held by deceased.	No
21	Amount of Victory Loan Bonds held by deceased.	No
22	If deceased had life insurance, name companies and amount payable under each policy and the person named as beneficiary there. Describe other assets, if any, and estimated value thereof.	Prudential Insurance of America \$1000. \$470. M ^{rs} Annie P. Daly mother
23	Is application for Probate or Letters of Administration necessary (see page 1)?	

OTHER PARTICULARS

24	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
25	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.	No

(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 or elsewhere in the North American zone, 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.)

(PLEASE TURN OVER)

DECLARATION

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

I hereby declare that all the particulars shown on this form are correct, and a true and complete statement of all the relatives that the deceased ever had in the degrees specified; and that I am the Mother of the deceased.

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

Arnie Daly Signature of Informant
130 Clinton St. Address

CERTIFICATE

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

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

Witnessed before me at city of Toronto by said informant to be true in fact.
Dated at..... this 2nd day of August 1943

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

[Signature] Qualification Notary Public
Address 737 Bloorcourt Blvd. Toronto

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 specified is stated in its proper place in the Statement opposite.

(If the deceased has no living relatives of the degrees shown on page 2, the names and addresses and relationship of other relatives should be set out below.)

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

V33743

OFFICIAL NUMBER

FILE NUMBER

N.S. 113-B-1530

OFFICIAL NUMBER

V33743

NAME DALY John Patrick DATE OF BIRTH 17th July, 1924

(Surname)

(Given Names)

PLACE OF BIRTH Toronto, Ontario OCCUPATION PackerRELIGION C. of E. EDUCATION High School EntranceRESIDENCE AT TIME OF ENLISTMENT: Street and No. 130 Clinton Street Town Toronto Province, etc. Ontario

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
11	4	42	H.O.	5' 11"	Brown	Hazel	Fair	Scar on rt. thigh				

NEXT OF KIN RELATIONSHIP (in pencil) Mother NAME (in pencil) Mrs. Annie DalyADDRESS (in pencil): Street and No. Same Town Same Province, etc. Same

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	
				17	8	42	Passed Prof. for A.B. (249A #15642)				

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		

FILM
NO. NDP-5473-5
DATE

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

O.H.F. RECEIVED

U.I.B.

Last Will & Testament dated 11/4/42 received

SECOND CLASS FOR CONDUCT

From

To



V33743

OFFICIAL NUMBER

NAME DALY
(Surname)

John Patrick
(Given Names)

OFFICIAL NUMBER V33743

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
HMCS "YORK"	Ord. Smn.	11	4	42	Toronto Div. Str.	V.G.	Sat.	31	12	42							
" "	"	13	4	42	Active Service	V.G.	Sat.	14	4	43							
"Queen Charlotte"	"	16	4	42	S.C.												
"Cornwallis"	"	16	6	42	S.C.												
"Charny"	"	8	8	42	S.C.												
"Cornwallis"	"	17	8	42	S.C.												
"Stadacona"	"	18	8	42	S.C.												
"Captor II"	"	19	8	42	S.C.												
DISCHARGED	"	14	4	43	"Missing" W/T 2029Z/14/4/43 Presumed Dead												

GENERAL REMARKS

Canadian Memorial Cross awarded to
Mother: Mrs. Annie Daly,
130 Clinton St.,
Toronto, Ont. 18/8/43

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.	CTY.	TOWN	SERV.	DIV.	A	BR	RANK
17	7	24	11	6	46	0	30	1	56	14	0	25	0	08 95
ENLIST. DATE			ACT. SERV. DATE			STR.	ACT. SERV. DATE			SHIP OR	RANK OR RATE			
DY.	MO.	YR.	DY.	MO.	YR.	CAT.	DY.	MO.	YR.	ESTAB.	A	BR	RANK	
11	04	42	13	04	42					95500	08	95		
SENIORITY			STR.	NON-SUB		M	CODED			CHECKED				
DY.	MO.	YR.	CAT.	A	B	ST.	md			AK				
13	04	42	09			20	14.04.43							