WHITING
BASIL EVANS
N4037

APPROVAL: N.S. 62-21-4 "W".
FD 214.- 30th September, 1940.

P095344

H. M. C. S. NADEN.

OFFICIAL No. IF KNOWN
Space to be left vacant if not known } 4037

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	NEXT OF KIN	PRESENT RATING
Basil Evans WHITING,	Name: Mrs. Muriel (Mother). Address: Whaletown, B.C.	Boy Seaman.

DATE OF BIRTH*	PLACE OF BIRTH†		NAME, RANK AND STATION OF RECRUITING OFFICER
23rd March, 1923.	Town	Vancouver,	W.B. Holms. Commander, R.C.N. Barracks, Esquimalt, B.C.
	County		
	Province	British Columbia.	

Personal Description at the Date of this Document

Height	Chest	Hair	Eyes	Complexion	WOUNDS, SCARS OR MARKS	Religious Denomination	TRADE OR OCCUPATION
6'1¼ "	39 37 38	Brown	Brown	Med.	Scars right foot and right knee.	C. of Eng.	Logging.

Commencing date of Engagement or Re-engagement	23rd March, 1941.	Period of Engagement or Re-engagement	Seven Years.
Date of *actually* volunteering to engage or re-engage	18th November, 1940.	Date of entering present ship	18th NOvember, 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. — First Entry.

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:—

1. Are the particulars given above of your name and date and place of birth correct? — Yes.
2. Are you a British subject? — Yes.
3. Nationality of Parents—Father Irish Mother English.
4. 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?‡ — No.
5. 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? — No.
6. 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.
7. Have you ever been discharged from the Navy, Marines, Army or R. C. Mounted Police on account of misconduct? — No.
8. Are you willing to be vaccinated or re-vaccinated and inoculated? — Yes.
9. Can you swim? — No.

Personnel Records Division.
1. Noted in Records
2. Index Card EMM
3. Nominal Card
4. Status Card EMM
5. Roll Strip
6. Pension Card EMM
7. Estimate Card EMM
8.
DATE 26-12-40

* When evidence of age is obtained on First Entry, it should be attached to this Form.
† Foreigners 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
3M—9-39 (2152)
N.S. 815—9—55

Noted MVC Recruits 19/12/40.

NOTED ON ESTIMATE CARD
Date 11-1-41
Initial J

Ledgus

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, ..., 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*.....from†.....19....., 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.....day of.....19.....

.....Man's Signature in full

Witness to Signature.....

Attested before me this.....day of.....19.....

.....{ Signature of a Commissioned Officer of the Naval Service

Date.....19.....

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 malformation, active and intelligent; and we consider him in all respects fit for His Majesty's Service.

.....Commanding Officer

.....Medical Officer

II.—Certificate and Declaration for Boys

Date 21st November, 19 40.

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

The consent of his parents or guardian has been obtained in writing, and they are willing and desirous that the boy should be entered for term of seven years' continuous and general service from the age of 18, in addition to whatever period may be necessary till he attains that age

..... Commander. .....Commanding Officer

R. Brooke Lieut. Commander. Lieutenant

..... Surg. Commander. Medical Officer

I declare that to the best of my knowledge or belief the answers to the questions on the other side of this form are true and that I am not indentured as an apprentice.

I am willing to enter and serve in the Naval Service of Canada for term of seven years' continuous and general service from the age of 18, provided my service should be so long required, in addition to whatever period may be necessary till I attain that age. And I do sincerely promise and swear (or solemnly declare) that I will be faithful and bear true allegiance to His Majesty.

X ..... Basil Evans Whiting .....Boy's Signature in full

Witness to Signature.....Paul Lord.....Writer.....

Attested before me this 21st day of November, 19 40.

..... R. Brooke .....{ Signature of a Commissioned Officer of the Naval Service

Lieut. Commander. R.C.N.V.R.

III.—Re-engagement for Continuous Service

To be executed by men who have not been out of the Service since the expiration of their first engagement

The particulars indicated on the other side are also required when this Form is used.

I,....., now serving as a.....

on board H. M. C. S....., who on the .....of.....19.....

engaged to serve in the Naval Service of Canada for a period of §.....years, do hereby engage to serve for a further period**.....from††.....19.....

provided my services should be so long required.

.....Man's Signature in full

.....19.....

Witness.....Commanding Officer

* Insert "*for the term of (number in words) years,*" or "*to complete (number) years for pension*" or "*until I attain the age o, years.*"
† Insert the date from which the engagement actually commences.
‡ The document conveying the consent to be attached to this paper. (N.B.—Not required in the case of youths over 17 years of age.)
§ To be written in words.
** Insert as follows:—"*Of (number) years,*" or "*to complete time for pension,*" or "*until I attain the age of years,*" as the case may be.
†† Insert the date of commencement of the re-engagement, which must either be coincident with, or (when the re-engagement is ante-dated) earlier than the date of execution.

S. 55

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

62-21-4W
FP 214
24
M 53190

CANADA

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

(R.C.N. OR RESERVE FORCES)

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 Whiting - Basil Evans

‡candidate for entry as Boy (Seaman Class)

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.

Dated at Campbell River BC the 12 of August 1940

W A Richardson
Examining Medical Officer

*Delete one

(*Rank*) Ex Major CAMC

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

Age { Years Months (a)	Weight without Clothes (b)	Height with Bare Feet (c)	General Development (d)	Chest Girth (e)	Vision by— (i) Snellen's Types (ii) Colour Vision (f)	Vaccinated or revaccinated for Small Pox (Date) (g)	Lungs, Heart, etc. (h)	Abdomen, Hernia, etc. (i)	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, Hæmorrhoids, etc. (p)
	lbs.	ft. ins.		inches (a) maximum	right eye									
17 4/12	145	6. 1/2	Good	36 1/2	6/6	No	Lungs normal Heart normal	Abdomen normal No Hernia	Limbs & Joints no defects	Skin normal	Ears normal Hearing W.V.-20 ft.	Normal.	Mouth normal one deficient Serrated fillings 20 teeth. Nose & Tonsils normal	Anus normal No hemorrhoids.
				(b) minimum 32 1/2	left eye 6/6									
				(c) mean 35	colour vision Normal.									

If colour vision is not normal by Ishihara test, degree of colour blindness to be indicated. Candidate states he is of White race.

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.

Basil Evans Whiting
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.

C.O. Recruits 5/5/39.

1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20	21	22	23	24	25	26	27	28	29	30	31	32	33	34	35	36	37

4037 OFFICIAL NUMBER

NAME WHITING (Surname) Basil Evans (Given Names)

OFFICIAL NUMBER 4037

Ship or Establishment	Rating	From Day	From Month	From Year	Remarks	Character	Efficiency	Date Day	Date Month	Date Year	Non-Sub. Rating	Qualified Day	Qualified Month	Qualified Year	Re-Qualified Day	Re-Qualified Month	Re-Qualified Year
Naden	Boy.	18	11	40		V.G.	Sat	22	3	41	Bugler	1	4	41			
"	Ord.Smn.	23	3	41		V.G.	Sat	31	12	41							
Stadacona	"	1	9	41		V.G.		13	9	42							
Ottawa	"	3	9	41													
"	A.B.	2	1	42													
Discharged	"	13	9	42	DEAD-Missing-Believed Killed in Action.												

GENERAL REMARKS

9/11/42 - Canadian Memorial Cross issued to Mother:
Mrs.Muriel Whiting,
WHALETOWN, B.C.

DATE OF BIRTH DY.	MO.	YR.	PLACE OF BIRTH	CIVIL OCCU. PAIN	SUB	RELI-GION	ED	PERM. RESIDENCE P.	CTY.	TOWN	PROV. SERV.	ENL. DIV.	RANK OR RATE A	BR	RANK
23	3	23	18	150	0	30	1	905	00	0	13	0	0896		
ENLIST. DATE DY.	MO.	YR.	PAC. SERV. DY.	MO.	YR.	STR. CAT.		PAC. SERV. DATE DY.		YR.	SHIP OR ESTAB.		RANK OR RATE A	BR	RANK
18	11	40	18	11	40						0350		0896		
SERVICE TO DY.	MO.	YR.	STR. CAT.	NO. SUB A	0	CT.					CLOSED		CHECKED		
02	01	42	09		91	20	1	3	0	9	42				

4037 OFFICIAL NUMBER | FILE NUMBER 62-W.395 | OFFICIAL NUMBER 4037

NAME WHITING (Surname) Basil Evans (Given Names) DATE OF BIRTH 23rd March, 1923.

PLACE OF BIRTH Vancouver, B.C. OCCUPATION Logger.

RELIGION Church of England. EDUCATION Grade 8.

RESIDENCE AT TIME OF ENLISTMENT: Street and No. Town Whaletown Province, etc. B.C.

Engagements				Description					Previous Service			
Date (in figures) Day	Month	Year	Period	Height	Hair	Eyes	Complexion	Marks or Scars	Served in	Rank or Rating	Dates From	To
18	11	40	As Boy.									
23	3	41	Seven Years.	6' 1¼"	Brown	Brown	Medium	Scars right foot and right knee.				

NEXT OF KIN RELATIONSHIP (in pencil) Mother NAME (in pencil) Mrs. Muriel Whiting

ADDRESS (in pencil): Street and No. Town Whaletown Province, etc. B.C.

Medals, Clasps, Hurt Certificates, Prize Money			
Date (in figures) Day	Month	Year	Particulars

Examinations, Certificates, etc.							
Date (in figures) Day	Month	Year	Particulars	Date (in figures) Day	Month	Year	Particulars
6	5	41	Passed P.P.T. (Good).				
10	7	41	Qual. A/G.- 2 days.				
6	8	41	Passed P.S.T. (Good).				
12	12	41	"Tr".				

Badges, G.C. or G.S.				
Date (in figures) Day	Month	Year	1st, 2nd or 3rd G.C. or G.S.	Granted Deprived Restored

Brief Particulars of Warrant or C.M. Punishments and C.P. Charges						
Ship or Establishment	Wt. No.	Date (in figures) Day	Month	Year	Brief Particulars of Offence	Punishment

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

O.H.F. Received.

FILM
No. 4611-6
ATE

Second Class For Conduct	
From	To

H.Q. 35—30M—4-42 (4260)
N.S. 815—7-35

W.S.C. APPLICATION 11441 RECEIVED 6/6/45

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

Basil Evans WHITING

IN THE ROYAL CANADIAN NAVY I.C.N.S. 26270

Esquimalt

Official Number 4037

Date of birth 23rd March, 1923

Where born { Province British Columbia
Town or county Vancouver

Trade brought up to Logger

Religious denomination Church of England

Date passed swimming test P.S.T. (Good) 6 Aug '41 Lieut. Commander Gs.
P.P.T (Good) 6 May '41 Lieut. Commander Ft. Co.

Man's signature on discharge to pension

O.H.F.

Nearest known Relative or Friend
(To be noted in pencil)

Name: Muriel

Relationship: Mother

Address: Shaleton, B.C.

30/10/41

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
1. 18 Nov. 40	23 Mch 41.	Seven years	5.		
2.			6.		
3.			7.		
4.			8.		

Medals, Clasps, Etc.

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

Description of Person	Stature Feet	Stature In.	Chest, In.	Colour of Hair	Colour of Eyes	Colour of Complexion	Marks, Wounds and Scars
On entry as a boy	6	1¼	38	brown	brown	med	Scars, right foot and right knee.
On advancement to man's rating or on entry under 28 years							
On re-entry for C.S. or for Non-C.S. after attaining 28 years							
Further description if necessary							

C.N.S. 459
5M—10-39 (2423)
N.S. 815-9-459

CAUTION.—This is an Official document. Any alteration made to it without proper authority will render the offender liable to severe penalties.

Name Basil Evans WHITING

Ship's Name (Tenders to be inserted in brackets)	List and No.		Rating	From	To	Cause of Discharge
Naden			Boy Smn.	18 Nov. 40	22 Mch '41	
—"—			Ord Smn.	23 Mch '41	10 Aug '41	
Stadacona			—"—	11 Aug '41	2 Sep '41.	
"Ottawa"			—"—	3 Sep '41.	1 Jan. '42	
—"—			ABLE SEA.	2 Jan. '42	13 Sep 42	D. D.

Date	Wounds received in Action and Hurt Certificate; also any Meritorious Service, Special Recommendations, Prize or other Grants	Captain's Signature

Ship's Name (Tenders to be inserted in brackets)	List an

Examinations passed an

Date	Particulars
10 July '41	Qs A/G. 2dys.
25 July '41	Issued A/G App
12 Dec '41	"TR"

o	Cause of Discharge
l'41	
g'41	
2'41.	
'42	
ng'42	D. D.

rants	Captain's Signature

Service

Ship's Name (Tenders to be inserted in brackets)	List and No.		Rating	From	To	Cause of Discharge

Examinations passed and Notations or Qualifications other than those entered on History Sheets

Date	Particulars	Captain's Signature	Date	Particulars	Captain's Signature
10 July '41	Q. A/G. 2 dys.	[illegible]			
25 July '41	Issued A/G App	[illegible]			
12 Dec '41	"TR"	[illegible]			

Name Basil Evans WHITING

Conduct

Second Class for Conduct (inclusive dates)	
From	To

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.
to be written Supr.

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.).

Character	Efficiency in Rating, noting substantive rating in brackets	Whether R.M.G. or not	Date	Captain's Signature
VG.	Sat. (Boy 1/c)		22 Mch '41	[illegible]
VG.	Sat (O Seaman)		31 Dec 41	[illegible]
VG	— (Able Sea)		13 Sep 42.	[illegible]

Good Conduct Badges		
Date	1st, 2nd, 3rd	Granted, Deprived, Restored

Time forfeited			
Date	P., D., C., C.P., W.T.	Number of days	
		Awarded	Served

D OF D 13-9-42

DEPARTMENT OF VETERANS AFFAIRS

AWARDS

NAVY

D.D.
WAR SERVICE RECORDS

SURNAME (IN BLOCK LETTERS)	CHRISTIAN NAMES	REG. No.	RANK ON DISCHARGE	C.A.S.F. UNIT	FILE No.
WHITING	Basil Evans	N-4037	A.B.		

WAR SERVICE BADGE (CLASS) No. DATE DESPATCHED:

ADDRESS:

CAMPAIGN MEDALS	REGISTRATION NUMBER AN DATE DESPATCHED
1939-45 Star	
Atlantic Star	
C.V.S.M. & Clasp	
War Medal	
	9924 16-1-50

(THE REVERSE TO BE USED FOR ESTATE PURPOSES)

DVA 806

RCN April 43 "OTTAWA"

MEDALS AND MEMORIALS—DECEASED PERSONNEL

REGISTRATION No. DATE OF DESPATCH

(1) MEDALS

PERSON ENTITLED TO Mrs. Muriel A. Whiting - Mother

ADDRESS: Whaletown, B.C.

(2) MEMORIAL CROSS

WIDOW

ADDRESS:

(3) MEMORIAL CROSS

MOTHER Mrs. Muriel Whiting

ADDRESS: Whaletown, B.C.

MEMORIAL BAR

(1) DATE DESP.

REGN. NO. 222

(2)

(3) 9-11-42

Whaletown B.C.

Dec: 26th 1942

H. R. Dade,
Ad: of Estates.

On wrong file

H.Q. 62-W-395. FD. 78.

Dear Sir,

In reply to your letter Basil was my only child had lived here all his life until he joined the navy There are I believe 2 halfbrothers & 2 halfsisters of which he knew nothing about & had never seen except one halfsister who he saw for a few hrs: before leaving for Halifax. He was always very fond of his home & had no wish for me to sell the place & go & live elsewhere. I am pretty sure that he left no will as he had nothing to leave except perhaps his wages or a few personal belonging at Halifax, he was only 19½ yrs: old & I had never suggested to him that he should make a will.

Yours truly
M. A. Whiting.

62-W-395
41

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

PLEASE LEAVE BLANK

Section A—GENERAL INFORMATION

1. (a) Print name in full WHITING, Basil Evans (b) Reg'l. No. O.N. 4037
2. (a) Arm of service NAVY (b) Unit R.C.N. (c) Rank Ord. Sea.
3. (a) Date of birth 23/3/23 (b) Have you any dependents? Yes (c) Place of residence at time of enlistment Cortez Island, B.C.
4. (a) Place of enlistment Esquimalt, B.C. (b) Date of enlistment Nov. 18, 1940

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.) 8 years, Public School
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 James Munroe Logging Co. Address Whaletown, B.C.
19. Nature of employer's business (for instance, "farmer", or "building contractor", or "boot factory", or "iron foundry", or "retail store", etc.) Logging
20. (a) Your specific occupation Faller (b) Number of years' experience at this occupation with any employer 6 mos.
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? (c) Do you wish to return to your former employment? No

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 None

Basil E. Whiting

DATE 15th May 1 194 SIGNATURE

NATIONAL DEFENCE 16 1938 62-214 W

DEPARTMENT OF NATIONAL DEFENCE
(Naval Service)

C.N.S. 2417
3M—1-38
N.S. 815-9-2417

2

APPLICATION FOR ENTRY IN THE ROYAL CANADIAN NAVY

Whaletown B.C.
(Place)

The Naval Secretary,
Department of National Defence,
OTTAWA.

July 11 1938
(Date)

M17088

SIR:—

I hereby make formal application for entry in the Royal Canadian Navy, under a seven years' continuous service engagement as a Boy Seaman
(Insert rating chosen)

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

1. Name (to be given in full in Block Letters) BASIL EVANS WHITING
2. Date of Birth (Birth Certificate or sworn declaration by parent or guardian *must* be attached) March 23 1923
3. Place of Birth. Town Vancouver, Province British Columbia
4. Permanent Place of Residence. No. ..... Street .....
   Town Whaletown, Province British Columbia
5. Are you a British Subject? British Canadian
6. How long have you resided in Canada? all my life
7. What is your Mother Tongue? English
8. What other language do you speak? none other
9. Are you of the White Race? Yes
10. Are you Single, Married or a Widower? single
11. How far advanced educationally are you? in Eight grade
    (Certificates of School Authorities *must* be attached)
12. What practical experience have you had?
    (Details and certificates from employers, trade credentials, etc., *must* be attached to substantiate employment reported.)
    I live by water and am used to small boats
13. Do you belong to any Naval, Military, Air or Police Force? no
14. If so, give details .....
15. Have you ever served in such forces? no
16. If so, give dates and details .....
17. Have you ever been discharged from His Majesty's Forces as medically unfit? no
18. Have you ever offered to serve in His Majesty's Forces and been rejected? no
    Why? .....
19. Have you ever been convicted of a criminal offence? no
    (Enclose two character references, one of which must confirm your answer to Question 19)
20. What is your weight? 130 lbs. Height 6 feet Chest Measurement (Not inflated) 36 inches
21. Have you ever had fits? no
22. Do you suffer from any deformity? no
23. Have you suffered the loss of any fingers, toes, etc.? no
24. Do you suffer from any disease? no
25. Do you wear glasses? no
26. Are you subject to *any* disability which might cause your rejection?
    no
27. Give details .....
28. Are you willing to be vaccinated and inoculated as considered necessary by the appropriate authorities? yes

Geo. P. Lyle — Signature of Witness
Basil E. Whiting — 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 Whaletown, this 12th day of July, 1938, in the presence of

Geo. P. Lyle — Signature of Witness
Muriel A. Whiting — 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

Whaletown Bc.
april 29, 1939.

Canadian Navy Dept.
ottawa ~~Bc.~~

62 2 U W

Dear Sir

Last year I wrote about joining the navy and was told I was too young you sent me some papers but I returned them and cannot remember exactly the information that I want I want to ~~join~~ be in the Gunnery. I believe I am not far enough advanced in school to be that (I hope to be ~~am~~ through 8 the grade) Could you please let me know if that is so and send me full particulars

yours Truly
Basil E Whiting

no [illegible] S 62,-21-4 "W"
[illegible] D. 2 14

62-214 W
70 214

Whaletown B.C.
July 22nd 1939

14

Dear Sir

Enclose please find my report card which states that I am promoted to Grade nine as requested

Yours Truly
Basil E. Whiting

Naval Secretary
Dept. of National Defence
Ottawa

MAIN FILE
CHARGED TO Lee
SINCE
REC'D. CENTRAL REGISTRY
JUN 28 1939
REFERRED TO Records

5/8/39

0928

62-21-4 W
FD 214
9

House of Commons
Canada

Ottawa, April 11, 1939.

J. O. Cossette, Esq.,
Naval Secretary,
Department of National Defence,
Ottawa, Ont.

Dear Mr. Cossette:

With reference to your letter of the 27th of September last, File No. N.S. 62-21-4 "W F.D. 214, re B. E. Whiting of Whaletown, B.C.

This boy was 16 in March last. Has his name been placed on the list of applications for admission to the navy? and what are his prospects of getting on?

Yours faithfully,

A. W. NEILL.

House of Commons
Canada

Alberni, B.C.
September 20th, 1938.

Commander J.O. Cossette,
Naval Secretary,
Department of National Defence,
Ottawa, Ont.

Dear Mr. Cossette:-

I have before me your letter of the 19th July, File NS. 62-21-4 "W" F.D. 214, addressed to B.E. Whiting of Whaletown. What these people wanted was to have his name put down on the lists now so that he would have more chance of getting in by the time he reached seventeen. Some Departments do that in the same way as some people in the Old Country put down their sons names for admission into Eton in the same week that they are born. Possibly you do not enter any name until the age of seventeen is reached. Please advise me as to this. I am told the Department's literature speaks of cabin boys being taken on at fifteen. Would he not be eligible for that? The mother is a widow and in hard circumstances.

Yours faithfully,

A.W. Neill.

awneill

M.F.M. 16A
100M—6-40 (5692)
H.Q. 1772—39-1665

P090643

NATIONAL DEFENCE
DEC - 3 1940
CANADA

N.S. 62-20-295
31

CANADIAN ACTIVE SERVICE FORCE

SERVICE: MILITARY OR AIR

(.....)

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

The names required by Questions 1, 2 & 3 must be shown in black capitals.

1. Surname of applicant WHITING

2. Full Christian name or names BASIL EVANS 3. Age 17

4. Official Number N.K. 5. Rank BOY SEAMAN

6. Unit, Station, or Establishment HMCS Naden

7. Date appointment or enlistment 18th Nov 1940

Question 8: 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.

8. Date reported for duty 18th Nov 1940

9. Are you a member of the permanent forces, military or air? yes
If so (*a*) State permanent establishment, unit or station RCN Barracks Esq. BC. (*b*) Are you receiving permanent force rates of pay and allowances? yes

Questions 10 & 11: Are to determine the degree of eligibility to an allowance where salary or wages continue in whole or in part.

10. If you are an employee of a Dominion or Provincial Government, Municipality, Board, Commission or other Public Authority, give particulars of such employment NO

11. If your salary or wages or any part thereof are being continued by such public authority during service, state amount per month NIL

12. Give particulars of your civilian occupation together with total earnings and period of time employed in the six months preceding enlistment Employed in logging camps part time only. Earnings for 6 months approx. $300

13. Name of dependent WHITING MURIEL ALICE MRS.
Surname Christian Name Mr. Mrs. or Miss

Question 14: Give street name and number or post office box number, R.R. No. city, town or village and province.

14. Address WHALETOWN, B.C

15. Age of dependent 57 16. Relationship MOTHER

Questions 17 to 30 Have a bearing on the eligibility for the allowance and the amount payable.

17. With whom did the dependent reside in the 6 months' period preceding your enlistment?
myself - Whaletown. B.C. - son
State name, address and relationship to dependent

18. With whom will the dependent make his or her home hereafter? alone
(State relationship)

19. 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

20. 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 Due to not being physicaly strong enough no doctor

21. From what date have you been contributing to the support of this dependent?
23rd MARCH 1939

22. Are you the sole or partial support? SOLE
State whether sole support or partial support

23. (*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 approx $25 monthly - total $150.00

(*b*) Did your contributions entitle you to board and lodgings in return or did you provide your own board and lodgings? entitled me to board and lodging

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

25. Is the dependent your mother, step mother or foster mother? MOTHER
state which

26. Is your father, step father or foster 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, and give his age.

27. If dependent is
brothers and sist
Name

28. (*a*) If any of th
and nature and a

(*b*) In any such
exchange for suc

(*c*) Did any of
during the First

29. Give full particu
than your own
under the followi

Insurance Annu
Dividends or In
Shares
Interest on Mort
Rentals
Workmen's Com
Old Age Pension
Mother's Allowa
War Pension No
War Veterans A
Applicant's Assi
Other Assigned
Other Family
Other Income

*Give Pension No.

30. 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.

30. What amount o
TWE

THER

your enlistment?

son

alone

xpense? NO
Yes or no

reason of mental
name and address
ng physicaly
tor

pendent?

r partial support

e board and room)
tment and total of
hly - total $150.00

rn or did you pro-
e to board

s preceding enlist-
ade him or her so

MOTHER
te which

o
d if he does not fully

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

Name	Address	Age	Occupation	Married or Single
	NIL			

28. (*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 preceding your enlistment.

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

(*c*) Did any of the above relatives serve during the South African War 1899-1902 or during the First Great War?
Yes or No
If "yes" give name and unit or regimental number

29. 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.

		Remarks
Insurance Annuity	$	
Dividends or Interest on Bonds and Shares	$	
Interest on Mortgages or Loans	$	
Rentals	$	
Workmen's Compensation*	$	
Old Age Pension*	$	
Mother's Allowance	$	
War Pension No.*	$	
War Veterans Allowance No.*	$	
Applicant's Assigned Pay	$ 10.00	
Other Assigned Pay	$	
Other Family Contributions	$	
Other Income	$	
Total	$ 10.00	

*Give Pension No. if in receipt of Pension.

30. 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.

30. What amount of pay have you assigned per month on behalf of this dependent?
TWENTY days' pay.

[OVER]

31. Date assigned pay effective 1st December 1940

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

NO

33. 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.

Paymaster Lieut RCNR for Rank

Station Accountant Officer

10% allotment New Dec

Ledgers R 7

Signature of Applicant Basil Evans Whiting

Date 26th Nov 40

Establishment, unit or station

HMCS NADEN

Place at ESQ B.C.

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

DISTRIBUTION OF SERVICE ESTATES

Naval - Military - Air Force

Name _____ No: _____

Surname	Christian Names	
WHITING	Basil E.	4037

Rank	Unit	Date of Death
A.B.	H.M.C.S. OTTAWA	13/9/42

AMOUNT

L. P. C. $

Date _____

Other Credits 71.71

March 22, 1943

Total .....

71.71

SHARE	RELATIONSHIP	NAME AND ADDRESS	AMOUNT
all	mother	Mrs. Muriel A. Whiting, Whaletown, B.C. (next of kin entitled)	$71.71

AUTHORITY

H.Q. F.E. No.	DIV.	EST	VOTE	PRI	D.A. OR H.Q. SUB	OBJ.	AMOUNT
9999			83/00	50	000		71 71

CLASSIFIED BY [signature] EXAMINED BY [signature] FOR TREASURY OFFICER TOTAL 71 71

Distribution approved and authorized

AUDITED FOR PAYMENT

[signature]
(L.M. Firth) Lt.-Col.,
Administrator of Estates.

E.C. per [signature]
for Chief Treasury Officer

DC

N4037 (D) 4

NAVY

DEPARTMENT OF NATIONAL DEFENCE

NAVY ARMY AIR FORCE

STATEMENT OF WAR SERVICE GRATUITY

DECEASED MEMBER'S NAME Basil Evans (CHRISTIAN NAMES) WHITING (SURNAME)

REGISTER NO. 11441

FILE NO. NSN-4037

DATE 14 July '45

PAYEE Mrs. Muriel A. WHITING,

ADDRESS Whaletown, B.C.

SERVICE NO. 4037

FINAL RANK OR RATING A.B.

DATE OF TERMINATION OF OVERSEAS SERVICE 13 Sep'42

DATE OF DISCHARGE 13 Sep'42

	$ ¢
A. TOTAL QUALIFYING SERVICE NO. OF DAYS 665 / 30 EQUAL TO 22 COMPLETE PERIODS AT $7.50	165.00
B. QUALIFYING OVERSEAS SERVICE NO. OF DAYS 376 LESS 5 INELIGIBLE DAYS, EQUAL TO 371 DAYS @ 25C. PER DAY	92.75
C. SUPPLEMENT FOR OVERSEAS SERVICE DAILY RATES AT DISCHARGE PAY $ 1.85 SUBSISTENCE OR LODGING AND PROVISION ALLOWANCE $ 1.45 ADDITIONAL PAY H.L.M. $ .13 $ $ DEPENDENTS' ALLOWANCE 1/30 OF $ $ .65 TOTAL $ 4.08 ×7 = $ 28.56 NO. OF DAYS 376 / 183 ×$ 28.56	58.68
D. WAR SERVICE GRATUITY	316.43
E. DEDUCTIONS OVERPAYMENT OF PAY AND ALLOWANCES $ DEPENDENTS' ALLOWANCE AND ASSIGNED PAY $ NIL OTHER DEDUCTIONS $	
F. TOTAL AMOUNT PAYABLE	316.43

G. YOUR PORTION OF GRATUITY IS—

DEPENDENTS' ALLOWANCE IN ISSUE TO YOU $ _____ OF $ _____ = $316.43

TOTAL DEPENDENTS' ALLOWANCE IN ISSUE $

Cheque 43673 – July 24/45

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	TREASURY DATE
DM	[illegible]	J. Stock	18/7/45

SERVICE REPRESENTATIVE

for Dir. Naval Pay Acting.

IN REPLY PLEASE QUOTE

No. N.S. 62-W-395

CANADA

Department of National Defence

Naval Service

Ottawa, Canada.

5th October, 1942.

Sir:

In accordance with Naval Order No. 839, it is notified for your information that the following casualty in the Naval Forces of Canada has been reported:

NAME, RANK/RATING NO.	PLACE, DATE & CAUSE of DEATH	NEXT OF KIN
WHITING, Basil Evans, Able Seaman, O.N. 4037, R.C.N.	Missing, believed killed in action on the 13th of September, 1942. He was on board H.M.C.S. "OTTAWA".	Mother: Mrs. Muriel Whiting, WHALETOWN, B.C.

ALLOTMENTS IN FORCE.

In favour of:		Amount.	Initials.
Mrs. Muriel Whiting,	Whaletown, B. C.	$48.00	M.S

ESTATES BRANCH OCT 8 1942 H. Q. OTTAWA. NATIONAL DEFENCE

WILL: No record.

Yours truly,

R. A. Bonnington

SECRETARY, NAVAL BOARD.

per ca

Administrator of Estates,
Estates Branch,
Department of National Defence,
OTTAWA.

H.Q. 1010A
500M-1-42 (2970)
N.S. 815-7-1010

W.S.G. Application No. 11444

TO: D.N.P.A. "G"

FILE NO. N.S. N-4037

"WAR SERVICE GRATUITY"

COMPUTATION OF SERVICE

SURNAME	CHRISTIAN NAMES IN FULL	OFFICIAL NUMBER	RANK OR RATING ON DISCHARGE
WHITING	BASIL EVANS	4037	A.B.

CAUSE OF DISCHARGE: DEAD (HMCS OTTAWA)

APPLICANT MOTHER - IN RECEIPT OF PENSION

TOTAL SERVICE

Date of Active Service 18 NOV 1940

Date of Discharge 13 SEPT 42

Total No. of Days ~~666~~ 665

Less non qualifying service N/A

41 - 365
42 - 365
730
68
665

17
31
17
65

Total Days ~~666~~ 665

OVERSEAS SERVICE

% Total No. of Days 376

Less non qualifying service N/A

Total Days 376

Record of Service in other Forces (per Naval Records)

Branch of Service

Date of Active Service

Date of Discharge

& % Overleaf

Computed By G. Dewar

Checked By J. Boucher

for (H.B. Money)
Payr. Cmdr. R.C.N.R.
Director of Personnel Records

DATE: JUL 3 1945

11) OOF

NON QUALIFYING SERVICE

(#)

Date	Reason	No. of Days	
"	"	"	
"	"	"	
"	"	"	
"	"	"	
"	"	"	
"	"	"	
		Total days	

(%)

OVERSEAS SERVICE:

Where Serving	From	To	No. of Days
Ottawa	3 Sept 41	13 Sept 42	376

365
11
376

STATEMENT OF ACCOUNT

True extract from the ledger of H.M.C.S. "OTTAWA" ending 30 Sep 19 42

List 5-2 No. 484 (Name) WHITING, Basil E. Rank Rating A.B. No. 4037

When entered F.B. Date of appearance Whither discharged D.D. 13 Sep 42

									$	c.
CREDIT from former account										
Pay as	A.B. (Rank Rating)	from	1 July	to	30 Sep	(92	days at $	1.85 a day)	170	.20
"	D.A.	"	1 July	"	30 Sep	(92	"	.65 ")	59	.80
"	H.L.M.	"	1 July	"	13 Sep	(75	"	.13 ")	9	.75
"		"		"		(	"	")		
"		"		"		(	"	")		
Kit Upkeep Allowance	10.00 July Aug Sep								10	.00
OTHER CREDITS:										
								Total credits	249	.75
DEBT from former account									2	.34
1st month								Total	28	.00
2nd month								Total		
3rd month								Total		
Allotment	48.00 Charged July Aug Sep								144	.00
Pension deduction (Officers) charged to						of				
Hospital stoppages										
Mulcts									3	.70
OTHER CHARGES:										
								Total debits	178	.04
								Balance Cr. or ~~Dr~~	71	.71
								(Balance Dr. to be shown in red)		

PAYMENTS:—

	1st	2nd	3rd	4th	5th
	$ c.	$ c.	$ c.	$ c.	$ c.
1st month		28.00			
2nd month					
3rd month					

LEDGERS R F

Number of days actually victualled during period mentioned above 75

NOT VICTUALLED

LENT, SICK OR LEAVE	INCLUSIVE DATE FROM	INCLUSIVE DATE TO	No. OF DAYS	SHIP, HOSPITAL, etc., IN WHICH BORNE

Date 13 Nov 19

PAY LIEUT RCNVR

ACCOUNTANT OFFICER

C.N.S. 2426
25M—10-40 (7514)
N.S. 815-9-2426

MEMORANDUM FOR

Mrs. Muriel Whiting.

Whaletown, B.C.

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

THE SECRETARY,
DEPARTMENT OF NATIONAL DEFENCE,
OTTAWA, ONTARIO

ATTENTION: ADMINISTRATOR OF ESTATES

and the following number quoted:—

H.Q. 62-W-395 FD.78

DEPARTMENT OF NATIONAL DEFENCE
OTTAWA, ONT.

October 13, 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

WHITING, Basil E. A/Smn.

No. 4037, 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 or Local Magistrate, who should be asked to complete and sign the Certificate. This form should then be returned to the above address.

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

M.F.W. 77
3M-5-40 (4995)
H.Q. 1772-39-972

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.....		None		
2	Children of the Deceased and dates of their Births.....		None		
3	Father of the Deceased.....		William Henry Evans Whiting		July 5th 1927
4	Mother of the Deceased.....		Muriel Alice Whiting.	59	Whaletown B.C.
5	Brothers of the Deceased	Full Blood	None		
		Half Blood	apply to Mrs de Groot		
6	Sisters of the Deceased	Full Blood	None		
		Half Blood	Jean de Groot		2165 Howard Ave: Windsor Ontario.
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

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	

10	What is the full name of th
11	Give the month and year o
12	Where and when were his p
13	Was he ever married? If marriage.
14	Did he leave a (later) Will?
15	Is there any other estate being made for Probat
16	Where was deceased born?
17	In what Province, Country last?
18	How long in each?
19	What was the nature of his
20	Did he own the house or h where?
21	Did he ever state verbally, make his permanent h
22	State your postal address i
23	Have the funeral expenses
24	Are there any outstandin furnish full name and and enclose his Bill o (See

NOTE.—Paragraph 2 purchased, etc.; the follow

1. Name and addres
2. Detailed stateme
3. At the end of his as shown and if yo

e relatives that the dece[illegible]ed

NT

ADDRESS IN FULL of each surviving Relative, opposite his or her name, and date of death of each deceased relative
July 5th 1924
Whaletown B.C.
2165 Howard Ave; Windsor Ontario.
Address of their children

ING, THE FOLLOWING

ADDRESS IN FULL

FULL PARTICULARS AS TO IDENTITY

10	What is the full name of the deceased?	Basil Evans Whiting
11	Give the month and year of his birth.	March 1923
12	Where and when were his parents married?	—
13	Was he ever married? If so, state exact place and date of marriage.	no
14	Did he leave a (later) Will? If so, it should be forwarded.	no
15	Is there any other estate which will necessitate application being made for Probate or Letters of Administration?	no

PARTICULARS OF DOMICILE

16	Where was deceased born?	Vancouver B.C.
17	In what Province, Country or State did he reside, and in which last?	Whaletown BC
18	How long in each?	All his life.
19	What was the nature of his employment?	Logged for a few months before joining up
20	Did he own the house or homestead in which he lived? If so, where?	no
21	Did he ever state verbally, or in writing, where he intended to make his permanent home?	This was his home & never new that he wished to live anywhere else
22	State your postal address in full.	Whaletown B.C.

PARTICULARS AS TO CLAIMS

23	Have the funeral expenses been paid? If so, by whom?	Died in action at Sea.
24	Are there any outstanding claims against the estate? If so, furnish full name and address of each Creditor in this space and enclose his Bill of Account. (See Note Below).	—

NOTE.—Paragraph 24 refers to debts incurred for board and lodging, medical and funeral expenses, money borrowed, goods purchased, etc.; the following information to be embodied in all accounts submitted:—

1. Name and address of Creditor.
2. Detailed statement of particulars of claim with date or dates incurred.
3. At the end of his statement the creditor should certify that the account is just and reasonable, that no payments save as shown, have been made thereon and that he holds no security therefor; the creditor should then sign same, and if you admit that the claim is correct, then you "O.K." the bill and sign same.

(PLEASE TURN OVER)

DECLARATION

*Insert [illegible] 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

*Mother of the deceased.

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

Muriel A Whiting — Signature of Informant

CERTIFICATE

I hereby certify that, to the best of my knowledge and belief MURIEL WHITING (Name of Informant) is the *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.

*See above

Dated at WHALEWOOD this 2/5/? day of FEBRUARY 1943

Signature of Clergyman, ~~Priest or Magistrate~~ Alan D. Greene Qualification Clergyman

Address Wheatown - British Columbia

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 of each surviving Relative enquired after is stated in its proper place in the Statement opposite.

OFFICIAL COPY

S. 1320D
10 Mil.-5-40 (5005)
N.S. 815-9-1320D

NAVAL MESSAGE

To: N.S.H.Q. OTTAWA 531
(R) C O P C

From: C NADEN

62-W-393 36

BASIL EVANS WHITING BOY SEAMAN R C N O.N.
NOT KNOWN HAS TODAY BEEN PLACED ON THE SERIOUSLY ILL LIST JUBILEE
HOSPITAL DIAGNOSIS PNEUMONIA. NEXT OF KIN INFORMED.

2240/19

PREL. COPY TO D N P AT 0910/21

WT CODE REC'D S.D.O. JM 21.41 21.1.41 5331
0855/21

OFFICIAL COPY

NAVAL MESSAGE

S. 1320D
10 Mil.-5-40 (5005)
N.S. 815-9-1320D

To: N.S.H.Q. 569

(R) C.O.P.C.

From: C. NADEN

62.W.395

37

MY 2240/19. BASIL EVANS WHITING BOY SEAMAN O.N. NOT KNOWN REMOVED FROM SERIOUSLY ILL LIST TO-DAY MONDAY 27TH NEXT OF KIN INFORMED.

0955/27

W/T CODE REC'D S DO MW 27.1.41. 6699
1743/27

62-W-395

S. 1320D
10 Mil. 12-41 (2799-2800)
N.S. 815-9-1320D

NAVAL MESSAGE

OFFICIAL COPY

To: MRS MURIEL WHITING
VHALEIOVM, B.C.

From: N.S.H.Q. OTTAWA

CNP
NPR
PDG
MINISTER

THE MINISTER OF NATIONAL DEFENCE FOR NAVAL SERVICES DEEPLY REGRETS TO INFORM YOU THAT YOUR SON, BASIL EVANS WHITING, ABLE SEAMAN, R.C.N. OFFICIAL NO. 4037 IS MISSING BELIEVED KILLED IN ACTION.

-/22

(CONFIRMATION RECEIVED)

L/T P/L 22/9/42 VW 6625

DJM/RM NS. 62-W-395

46

19th September, 1942.

AIR MAIL

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, Basil Evans Whiting, Able Seaman, R.C.N., O.N.4037, 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. Muriel Whiting,
WHALETOWN, B.C.