V43309 BURNS EDWARD

RICHAR

### OCCUPATIONAL HISTORY FORM

184929

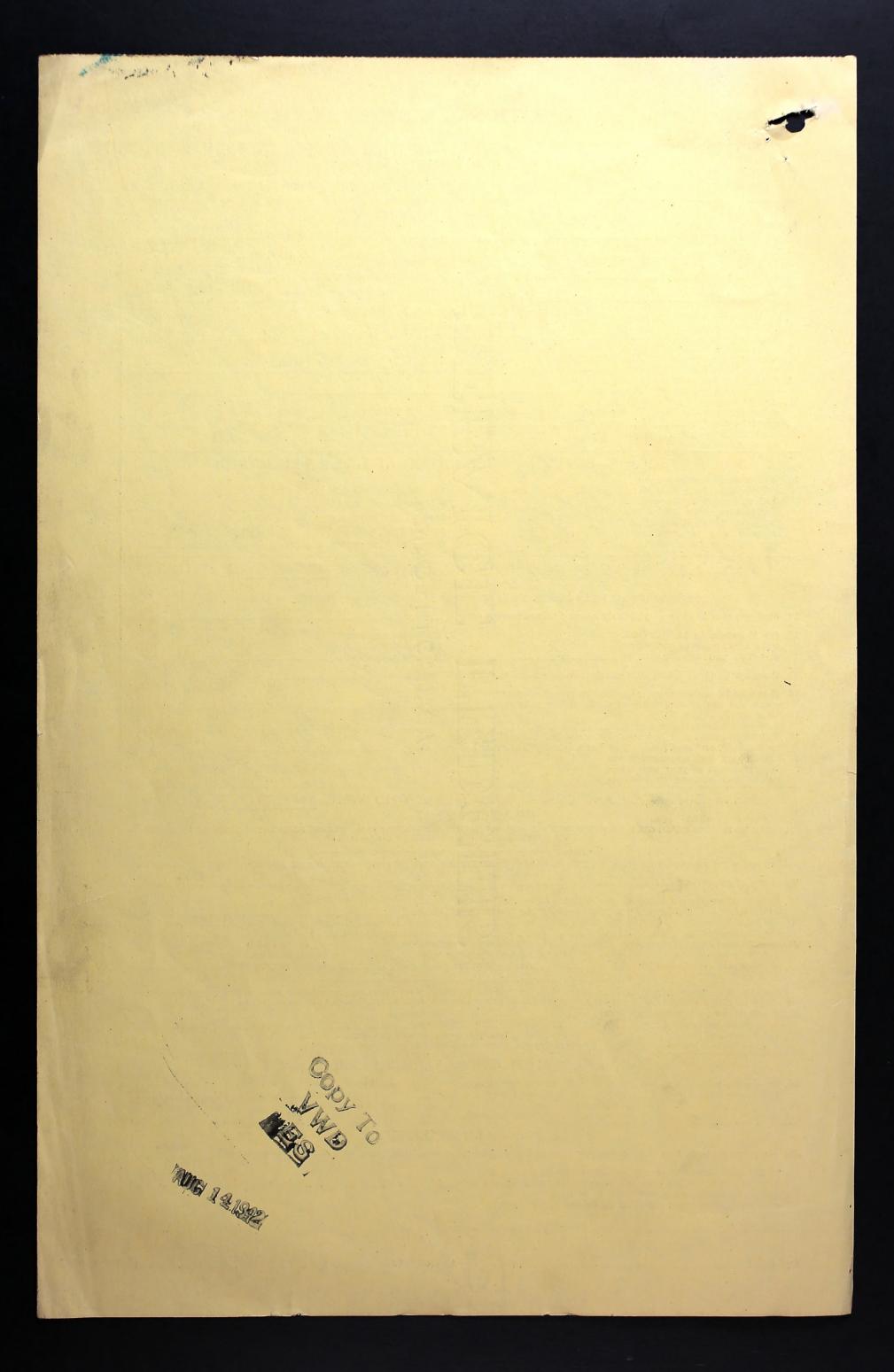
THIS FORM IS TO BE COMPLETED FOR EACH MEMBER OF THE ARMED FORCES. THE INFORMATION SOUGHT IS FOR THE USE OF GENERAL ADVISORY COMMITTEE ON DEMOBILIZATION AND REHABILITATION, A COMMITTEE SET UP BY THE GOVERNMENT OF CANADA TO STUDY PLANS FOR ESTABLISHING IN INDUSTRIAL LIFE THE MEMBERS OF THE ARMED FORCES, 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	PLEAS LEAVE BLANK
7.	(a) Print name in full	BLANK
2.	(a) Date of birth	
٥.	(a) Place of enlistment	
7.	Section B—EDUCATION AND TRAINING	
5.	(a) State age on (b) Were you attending school finally leaving school or college up to the time of enlistment?	
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.)	
7.	If you attended a university, give name of university and standing or degree secured	
8.	(a) Did you ever (b) If so. (d) If you did not	
9	enter upon a trade for what apprenticeship? (c) Did you finish it, how long finish it? did you serve at it?	
<u> </u>	(a) What languages do you speak fluently?	
	Section C—EMPLOYMENT CONDITION AT TIME OF ENLISTMENT	
10.	(a) State whether you were WORKINGorNOTWORK-  (b) At time of en-	
	ING at time of enlistment.  (Enter here only "Works"  Iistment of what	
	ing" or "Not Working", as case may be; particu- professional society	
	lars are asked for below) were you a member?	
	Section D—PARTICULARS CONCERNING THOSE WHO WERE UNEMPLOYED AT TIME	
	OF ENLISTMENT	
11	QUESTIONS 11 TO 17 REFER ONLY TO THOSE WHO ANSWER "NOT WORKING" IN QUESTION 10 (a)  Had you ever been employed fairly regularly since leaving school?	
	(a) If answer to 11 be "Yes", (b) State how long you	
12.	state exact trade or occupation had worked at this at which you actually worked	
3	If answer to 11 be "No", state exact trade or occupation for which you feel qualified	
	If you had been employed after leaving school, state	
	when you last worked fairly regularly before enlistment	
	employer, if any: Name	
111	contractor", or "boot factory", or "iron foundry", or "retail store", etc.)	
	(a) If your last employment was in a business of your own, state nature and address of business	
41	Section E—PARTICULARS CONCERNING THOSE WHO WERE EMPLOYED AT TIME	
	OF ENLISTMENT	
Ç	DUESTIONS 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	
10	Name of employer	
	Nature of employer's business (for instance "farmer" or "building	
	contractor", or "boot factory", or "iron foundry", or "retail store", etc.)	
	specific occupation this occupation with any employer	y.
21.	(a) Did your employer promise (b) Did your employer (c) Do you wish definitely to give you refuse to promise you to return to your employment on discharge? former employment?	
	employment on discharge?employment on discharge?former employment?	
	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	
	(a) State nature of business, (b) Where was or professional practice	
23.	or professional practice	
	Section F—PARTICULARS OF FARMING EXPERIENCE	
0.4	(a) De vou wish to angage (b) De vou feel competent (c) If so in what	
	in farming after the warrto operate a farmrkind of farmingrkind	4
25.	(a) Were you (b) How many years' actual (c) In what provinces born on a farm? farming experience have you had? did you have experience?	
	Section G—MISCELLANEOUS	
	Have you made any arrangements other than indicated above, for re-establishment in civil life after discharge?	
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	
	may have, other than indicated elsewhere in this form	
-	02 7-3 840	
	23 July 142	

SIGNATURE

mo H.F



Mrs. Gertrude Burns,	
76 Dovercourt Road,	
Toronto, Ont.	

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

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

and the following number quoted:-

H.Q. V- 43309 FD. 571

### DEPARTMENT OF NATIONAL DEFENCE ESTATES BRANCH

OTTAWA, ONT.

September 12 194.4...

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

BURNS, Edward Richard Cook (S)

V-43309, R.C.N.V.R.

it is necessary that certain information regarding the deceased and his relatives should be furnished the Estates Branch. You are asked therefore to read the enclosed memorandum before completing pages 2 and 3 of this form. The particulars required are to be carefully filled in and the Declaration on page 4 should then be signed in the presence of a Clergyman, Priest, Local Magistrate, Commissioner for Oaths, Notary Public or a Commissioned Officer of any of His Majesty's Forces who should be asked to complete and sign the Certificate. This form should then be returned to the above address.

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.

GC/

Director of Estates.

M.F.W. 77 6-44 (4878) H.Q. 1772-39-972

### 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	77.4414	(32)(4)(4)	INFORMANT'S STATEMENT								
of Rela- tion- ship	required to be		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 D	eceased									
	2 Children of the De dates of their I		DUSMANO POLATIVA	10							
2			Morl								
3	RELATIVES required to be accounted for the deceased deceased  Children of the Deceased  Children of the Deceased  Father of the Deceased  Mother of the Deceased  Fu Block Brothers of the Deceased	eceased	Frederick William Burns	54	76 Dovercourt Rol.						
4	Mother of the D	Deceased	and the same of th								
5	of the	Full Blood	Ferfude 24. Burns Frederich 24. Burns Robert J. Burns Gerdun G. Burns Ross J. Burns	35 28 24 16	76 Doversouth Rd. 920 Broodview ave 76 Doversouth Rd 76 Doversouth Rd 76 Doversouth Rd Toronto.						
		Half Blood									
6	of the	Full Blood	Florence the Salter Ody the M. Fox Marquerite O. Burns Cleanor G. Burns	34 32 21 19	75 Beaconsfield ave 920 Broadview Avl. 76 Dovercourt Rd 76 Dovercourt Rd Toronto						
		Half Blood									
7	Deceased, who as death of each.	are dead, and date of	(if any)		Address of their children						
	Gertura	Le Evelyn Co. B	Burns - 2nd of Marc urns - 19th of Lept.	L -	1919						

# ANSWER FULLY EACH QUESTION ON THIS PAGE PARTICULARS AS TO IDENTITY

\*

8	Full names of the deceased.	Edward Richard Burns
9	Date of his birth.	Oule 11th - 1921.
10	Place and date of his marriage.	
11	Place and date of his parents' marriage.	guly 25 1908 Torondo
X	PARTICULARS OF D	OMICILE
12	Place where deceased was born.	Toronto, Ont
13	State, in order, the Province, State and/or County in which he resided before enlistment and the period of time in each.	(a) Ontario (b) (c) (d)
14	Nature of employment before enlistment.	Rogers Lilverwase
15	State whether he owned the premises in which he lived, and, if so, where situated.	Refer to additional remarks on back of this page.
16	Name place where deceased stated he intended to make his permanent home.	76 Dovercourt Rd. Toronto Ont
l	PARTICULARS OF	
17	Did he leave a Will? If in your custody, please forward.	Hilling custody of naval
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?	
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. Do you wish it administered with the pay account?	not statedom aware of
20	Amount of War Savings Certificates held by deceased. Indicate where located.	30.00 at 76 Doversour Rd. To.
21	Amount of Victory Loan Bonds held by deceased. Indicate whether registered or bearer and where located.	Repento udditional resarps on back of this rage Canada hife assurance company
22	If deceased had life insurance, name companies and amount payable under each policy and the person named as beneficiary therein.	Mr. Gertrude Burns
23	Describe other assets, if any, and estimated value thereof. Use space on page 4 if necessary.	Service gratuity allowance
	OTHER PARTICU	
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 and burial is made Overseas as well as where death occurs and zone, and if a relative has already paid those expenses the Governuthorized in the Regulations. Any amount of such expenses by the Government nor is it chargeable against the service estate.	in excess of those authorized in the Regulations is not payable

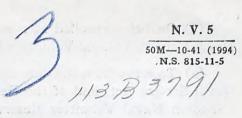
	4.	
*Insert degree of relationship for example, "Widow", "Father", statement of all t "Brother", etc.	DECLARATION  are that all the particulars shown on this form are correct, and the relatives that the deceased ever had in the degrees specified to the deceased.	d a true and complete ed; and that I am the
N.B.—To be signed in full in the presence of a Clergyman, Priest, Local Magistrate, Commissioner or Notary Public or Commissioned Officer of any of His Majesty's Forces.	Mrs. Gertrude Burns 16 Dovercourt Rd. Toronto.	Signature of Informant Address
*See above. 76 Swestout Re	CERTIFICATE  ify that to the best of my knowledge and belief  [Name of informant] is the*  The above Declaration was made by the Informant and of the control of the informant and of the information and of the	of the Deceased
	The above Declaration was made by the Informant and since this day of function this Qualification Clares Parkslele Prospletion Chance, 252	eggenan 19 45
Relative stated by him or her to he proper place in the Statement opposition.  (If the deceased has n	ve Certificate, care should be taken to see that the informant gives particulars ave died, and that the full name and address and age of each surviving Rela-	concerning the death of any tive specified is stated in its

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

Question no 21 The deceased was paying on bonds out of his naval wages but the amount paid is not known. He also had finished paying for a bond, but the whereabouts of the bond is unknown. Will you please check on his records for this

Question no15 to his Mother to help pay off the lone.





### ATTESTATION FORM

(HOSTILITIES FORM)

## FOR MEN OF THE ROYAL CANADIAN NAVAL VOLUNTEER RESERVE

	PERMAN	ENT ADDRI	ESS			RELIGION
76 Dover	court Road	, Toron	ito, Onta	rio.		United.
DATE (	OF BIRTH	4	PLACE OF BIR	TH	NAME AND	ADDRESS OF NEXT OF KI
11 July *Original Nationality	y of:	County Y	oronto	i to a	Mother Ger	trude e address.
	nadian nadian	Province O	ntario.		F. H. E. C. L.	in Soliton White I
*If not the son	of natural born British PERSC				ENROLME	INT
HEIGHT	CHEST MEASUR	EMENT	HAIR	EYES	COMPLEXION	WOUNDS, SCARS, MARKS
Feet. 5	Inflated	3	Dark			
Inches 10	Deflated	6	Brown	Brown	Med	none.
150늴	Mean3	7			1000 1000 - 1010 - 1010 1000 - 1010 - 1010	1 2 min and day
	EDUCATIONAL	STANDING	·		eade or calling	G AND IN WHOSE EMPLOY
	High School	1-	OR WHICH ENR	Tor	C.N.V.R. DIVISION	
sional St 23 July	rength	Asst		s)	AT WI	"YORK"
(B)	DECL	ARATIC	ON TO BE	E MADE	E BY APPL	ICANT
I hereby dec	lare as follows:	-				
(1) That	I am a British Su	ibject dom	iciled in Can	ada.		
(2) That Force, and that	I am desirous of l t I accept and ag	peing enrol gree to abid	led as a mem de by the rul	ber of the	Royal Canadia aid Force.	n Naval Volunteer Rese
(3) That	* (a) I have neve Force.	r served, a	nd am not se	rving in a	ny Naval, Milit	ary, Reserve, or Territo
1						od shown, and attach
*Cross out Clau	record se not applicable.	of service,	in corrobora	tion of th	is statement.	
Cross out Clud	D IN	RA	NK	1 - 1 11-	FROM	то
SERVE			hat how		ila er yes a	Personnel Recor
	-	-	great (see)			Ser I Visite I Class 450
		er been re		discharg	ed from any o	1. Noted in Records. This Noted in Records. The His Note of Strong Stron

- (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.

quarters prior to my di for any loss or damage	od repair and condition the articles of uniform and any articles of outfit which may be return them to the nearest Divisional Commanding Officer or to Training Headscharge or when required so to do by any authorized person, or to pay compensation thereto other than fair wear and tear; and also not to wear such uniform or outfit the property of the Crown) except when on naval duty.
priate authorities.	accination or re-vaccination, or inoculation, as considered necessary by the appro-
Dated this2	3rd day of July 142
Section and	Signature of applicant & durand R. Burns
(C)	CERTIFICATE OF ATTESTING OFFICER
I hereby certify th	at all the foregoing statements were made by the volunteer above named, in my
	as made and signed the above declaration in my presence on this 23rd
day of Jul	
· ·	ARRIVAL
•	Signature of and rank of Attesting Officer.
	Sub-Lieut. R.C.N.V.R.
(D)	OATH OF ALLEGIANCE
EDWARD R	ICHARD BURNS  do sincerely promise and swear (or solemnly
_,	aithful and bear true allegiance to His Britannic Majesty, His heirs and successors
according to law.	
	: Signature of Applicant & Golward R. Burns
£ * .	Witness College
Date 23 July	
	Nank

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

#### (E) CERTIFICATE OF ATTESTING OFFICER

EDWARD RICHARD BURNS ......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 Toron to Division of the R.C.N.V.R. recorded in the Record Book of the..... or in the appropriate official documents.

> Attesting Officer. Sub-Lieut, R.C.N.

23 July '42

R.C.N.V.R. Division .....194...... (or other establishment).....

H.M.C.S. "YORK"

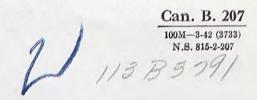
NOTE.—This form when completed and when the particulars on it have been noted in the Divisional Commanding Officer's Record Book, is to be forwarded to Headquarters, Ottawa, for custody.

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 Cooking Branch of the Naval Service by the prospect of being transferred at some future date to another Branch, V & dward R. Burns





## Certificate of Medical Examination of Officers, Men and Boys

NAVAL SERVICE OF CANADA

d by the Examining Medical Officer and forwarded to the	Warel Constant Day American & District	
	e Navai Secretary, Department of National	Defence, Ottawa.
n all respects fit for His Majesty's Ser infit for His Majesty's Service for the e.	vice reason stated below. He has	signed the Certificate
s been made in accordance with the co	urrent Instructions as to Medi	cal Standards.
2/ Yrs. Mos.	(j) Date of last Vaccination for Smallpox	1939
5 Feet /OIn.	(k) General	
150/2	(l) Nose, Throat	good NORMAL
NORMAL	(m) Heart and	NORMAL
Max. Min. Mean	(n) Abdomen	NORMAL
Deficient Defective Dentures	(o) Limbs and	NORMAL
without Rt.25 Lt.263	(p) Skin	NORMAL
with glasses Rt. Lt.	(q) Anus	NORMAL
- W 1 4		NORMAL
ed A	(s) Urine	Neg.
to the best of my belief I have never are disease likely to render me unfit for atment, vaccination, or inoculations are explained to the Candidate by the Examining Medical O	suffered from Fits, †Incontinent His Majesty's Service. ‡I as may be authorized.  ward R Barns  fficer.	om willing to undergo,
		d:
e subject of		
ally unfit for service, nt importance to cause his rejection, h	e being desirable in other resp	ects.
IF REJECTED		
	s been made in accordance with the companies been made in accordance with accordance without Rt.26 Lt.26 Max. Min. Mean 37 Jen 19 J	n all respects fit for His Majesty's Service for the reason stated below. He has one.    Some cone

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WAR SERVICE CADGE (CLASS) No.	DATE DESP	PATCHED:		
ADDRESS:				
MPAIGN MEDALS	RE	EGISTRATION NUM	IBER AND DATE DE	ESPATCHED
1939-45 Star C.V.S.M. & Clasp	APR	6 1994		
War Medal				
only: ERIT - July 20/44	9103	22/.//	- G	SHE 20 1994
DVA 806		(THE REVERSE TO E	BE USED FOR ESTATE PU	S-6,94 173.94

MEDALS AND MEMORIALS—DECEASED PERSONNEL  RCNVR July 45 "VALLEYFIELD"	REGISTRATION No. DATE OF DESPATCH
(1) MEDALS PERSON	MEMORIAL BAR
ENTITLED TOMRS. Gertrude Burns / Mother	DATE DESP
76 Dovercourt Road, TORONTO, Ont;	REGN. NO. 2291
(2) MEMORIAL CROSS WIDOW	(2)
ADDRESS:	
MEMORIAL CROSS  MOTHER Mrs. Gertrude Burns	(3) 22-9-44
76 Dovercourt Road, ADDRESS: Toronto, Ontario.	

				9 official num		LE NUMBE	ER	1:	13-B-3791		OFFICE	AL NUMBER	V43309	
NA	ME	••••••	BURNS (Surname)			Edward Given Name:	Richard			DATE OF BIRTH	11th July, 192			
			Toronto, Y		EDUC	ATION	1 year H	occupation	Stock	Chaser		······		
			T TIME OF ENLISTMENT:						n Toro	nto	Province, etc	Ontario	······································	
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V43309	OFFICIAL NUMBER	NAME	(Surna	BUI	RNS Edwa	rd Rich	ard				OFFICIAL N	UMBEF	. V4	3309	Ρ,	I.B.
Ship or Establishment	Rating		From Month		Remarks	Character	Efficiency	Day	Date	-	Non-Sub. Rating		Qualified  Month		-Qu Day  Mo	alified
HMCS "YORK"	Asst. Cook(S)	23 15	7 8	42 42	Div. Str. Toronto Active Service.Ledger.	V.G.	Sat.	31 31	12	42 43						
Cornwallis. Stadacona.	# # # # # # # # # # # # # # # # # # #	12 16 1	10	42	D.L.	V.G.	Sat.	7.	5							
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DISCHARGED.	11 11	7.	5	44		(DEAD)										
	-										Canadian M		eral Re		grant	ed to
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CAMPAIGN STARS, DEFENCE MEDAL,
NAVAL GENERAL SERV

NAME IN FULL BURNS - EDWARD. RICHARD. RANK/RATING Cook

SERVICE SHIP AREA FROM TO DAYS FROM 15-8-42 8-17-43 7.5-44 atl. VERIFIED BY . Illlans.....

VERIFIED BY .....

VERIFICATION FORM
FENCE MEDAL, WAR MEDAL, C.V.S.M. and CLASP.
GENERAL SERVICE MEDAL (1915). ATING Cook: (5).....OFF.NO. U-43309......ADDRESS.... QUALIFYING PERIODS IN DAYS ELIGIBLE FOR AWARDS OF 1939-45 ATLANTIC DEFENCE CLASP 1915 C.V.S.M. MEDAL STARS FROM TO MEDALS 1939-45 ATLANTIC FRANCE G. AFRICA PACIFIC BURMA TTALY DEFENCE 2 a clarp C.V.S.M. " CLASP medal WAR 1945 WAR 1915 VERIFIED BY

BY ....

DIR OF PERSONNEL RECORDS.

## CERTIFICATE of the SERVICE of

Edward Richard Burns

iı	n the	Royal	Car	nadi	lan	Nava	1 V	7olunt	teer	Reserve		
Training Headquarters					R.C.N.V.R. Division O				fficial Number			
Date of Birth			lg.,.	192						e and Address of Neares Relative or Friend (tn pencil)		
Place of Birth						d Z	-20	ects.	R	other:		
Trade brough	t up to	lock.	cho	esex	<u>/</u>							
Religion Can Swim:—										Rank		
	P.S.T.	)ate				19	Sign	ature		Rank		
	PARTICULA	ARS OF SERV	ICE				Date		DECORA	TIONS, etc.		
Date of Actual Voluntcering Date of Enrolment or re-enrolment		Perio Volunte for	ered	Ratin Enrolm Re-enro	ng on nent or olment	Award	1	Presentation	n	Nature of Decoration		
	23 fuly:	+3 dlus:	Vost.	lest	look.							
		He	ight	PI	ERSONAL	DESCRIPT	ION		-			
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## NAVAL TRAINING and ACTIVE SERVICE

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## NAVAL TRAINING and ACTIVE SERVICE

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REGISTERED AIR - MAIL NS V-43309 PERS (N)

11th May, 1944.

Dear Mrs. Burns:

Further to my letter of the 8th of May, 1944, particulars respecting the loss of H.M.C.S. "Valleyfield", from which your son has been reported "missing" are being released to the press, and I am accordingly passing them on for your information.

H.M.C.S. "Valleyfield" was torpedoed and sunk by enemy action while on Convoy Escort duty in the North Atlantic. Details of the action are not being released beyond the fact that the ship sank almost immediately after being hit.

Thirty-eight members of her complement are listed as survivors; five were killed in action; the remaining one hundred and twenty-one, including the Commanding Officer, Lieutenant Commander D. T. English, of Halifax, Nova Scotia, are missing.

May I again express the sincere sympathy of the Department in your sad loss.

> Yours sincerely LETTER dispatched

PERSONNEL NAVAL

SECRETARY, NAVAL BOARD.

Mrs. Gertrude Burns. 76 Dovercourt Road, TORONTO, Ontario.

FILE NO. N.S. V-43309 PERS. (N)

30th August, 1944.

Dear Mrs. Burns:

Further to my letter of the 11th of May, 1944, in view of the length of time that has elapsed since your son, Edward Richard Burns, Cook (S), Official Number V-43309, Royal Canadian Naval Volunteer Reserve, was reported "missing" after the sinking of H.M.C.S. "VALLEYFIELD", and as no information has since been received of his having survived, the Canadian Naval Authorities have now presumed his death to have occurred on the 7th of May, 1944.

May I again express the sincere sympathy of the Department in your bereavement.

Yours sincerely,

, SECRETARY, NAVAL BOARD.

G.P.
Mrs. Gertrue

Mrs. Gertrude Burns, 76 Dovercourt Road, Toronto, Ont.

Royal

Canadian

Message

ondolence

Date Sent 308 44NPR 5

FORM "B" 128772

FILE: N.S. V-43309 P

Pers. (N)

MY Sir: DEPARTMENT OF NATIONAL DEFENCE
- Naval Service Ottawa, Canada.

AUG 3 0 1944 (Date)

The following casualty has been reported -

NAVAL NO. RANK or RATING NAME BURNS, Edward Richard Cook (S) DATE OF ENLISTMENT -Active Service: 15 August, 1942 DATE OF DISCHARGE -(If discharged in hospital under jurisdiction of D.P. & .N.H.) SERVICE - CANADA & HICH STAS (Indicate whether in Canada only; or in Canada and the high seas or elsewhere.) Reason for discharge and - Missing, presumed dead, when H.M.C.S. "VALLEYFIELD" when and where any disability was incurred, or where death was torpodeed and sunk by enemy action in the occurred. Atlantic. (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 76 Dovercourt Rd., 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.

C.A. BY CANADO TO COMPANY



REMARKS:		Control of		
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THIS PORTION OF	FORM COMPLETED BY (	CHIEF TREASURY ENCE, NAVAL SER	OFFICER, DEPARTMENT VICE.	OF NATIONAL
Names of Depend	ents Relationship	Maiden name of wife	Date of marriage a	nd/or hildren
Mrs.Gertrude Bu 76 Dovercourt R	oad,			
Toronto, Ontario		A Maria Committee of the Committee of th		
				Auto not here.
		And the regularies		e . Countries : on
				West 22,200
	<u>D. A.</u>	A. P.	TOTAL	
Monthly rate:	NIL.	\$20.00	\$20.00	
To Whom Paid:	Mrs.Gertrude Burns	Address	Lo poset court o money	
Date of Enlistme	ent:		Toronto, Ontario.	
Date of Dischare	ge:			
Inclusive date t	to which D.A. and/or	A.P. was Paid	Mare 21 10ld.	
	tion of Assigned Pay		has been made	for the period
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(Naval Service).

The Secretary, The Canadian Pension Commission, Room 228, Daly Building, OTTAWA, Ontario.

THE CANADA LIFE ASSURANCE COMPANY A TA TORONTO I, CANADA June 19th, 1945. Estates Branch. Department of National Defence, Naval Service, Ottawa, Canada. Dear Sirs: Re Edward Richard Burns, Cook (S), No. V-43309 - R.C.N.V.R. Born 11th July, 1921 We have a death certificate for this assured stating that he is presumed dead as at the 7th May, 1944 while serving on the H.M.C.S. Valleyfield. In order to asist us in the payment of this insurance, we should appreciate if you would let us have a copy of any will he may have filed at your office. Yours very truly, ESM/T E. S. MacPherson, Claims Department.



### Department of National Defence

Naval Service

124100

AUG 3 0 1944

IN REPLY PLEASE QUOTE

N.s. V-43309 (Pers.N)

Sir:

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

NAME, RANK/RATING, Official No., UNIT

PARTICULARS RE DEATH

BURNS, Edward Richard Cook (S) V-43309, R.C.N.V.R.

Missing, presumed dead to date 7 May, 1944. He was serving in H.M.C.S. "VALLEYFIELD", which was torpedoed and sunk by enemy action while on Convoy escort duty in the Atlantic,

Mother: Mrs. Gertrude Burns, 76 Dovercourt Road, Toronto, Ont.

ALLOTMENTS IN FORCE

In favor of

Mrs. Gertrude Burns, 76 Dovercourt Rd., Toronto, Ont.

Canada Life Assurance Co. Toronto, Ont. Amount

NEXT OF

Initials

20.00 Stopped May 31/44

5.00

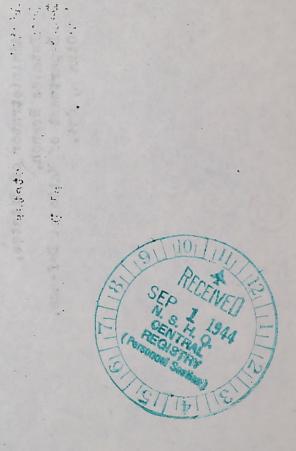
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Will: Attached.

Yours truly,

for SECRETARY, NAVAL BOARD.

Administrator of Estates, Estates Branch, Department of National Defence, Ottawa, Ont.



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	IFICATE OF REGISTRATION OF DEATH	
	Township of	
DEATH If in City, Town or Village	t	
2. LENGTH OF STAY (in years, months and days)	(b) In Province(c) In Canada (if immigrant)	
2 DRINT FILL NAME OF DECEASED BURNS	(c) In Province(c) In Canada (if immigrant)	
(Family name)	(Given name or names in neural order)	
RESIDENCE No. Street Street City, Tow (Residence means usual place of abode.	n, Village or Township	
4. Sex 5. Nationality 6. Racial Origin 7. Single, Married,	MEDICAL CERTIFICATE OF DEATH	
(Citizenship) Widowed or Divorced (Write the word)		
Male Canadian Canadian Single	24. DATE OF DEATH 19.44 (Month) (Day) (Year)	
8. BIRTHPLACE Toronto	25. I HEREBY CERTIFY that I attended deceased from:	
9. DATE OF BIRTH July 11 1921	19to	
(Month) (Day) (Year)	and last saw halive on	
10. AGE in Years Months Days If less than one day old hrs. or min.	CAUSE OF DEATH PHYS	SICIAN
	Immediate cause (a) William pregumed dead when	derline
11. Trade, profession or kind of work as stock chaser spinner, teamster, office clerk, etc	tion which caused death, not the	cause
12. Kind of industry or business, as cotton- Ma. A. Rogers Ltd.		which
mill, lumbering, bank, etc.  13. Date deceased last worked   14. Total years spent in	immediate cause (stated in order   SCTION IN THE ADIENTIC.	eath
2 13. Date deceased last worked at this occupation this occupation this occupation.	mediate cause). (c)show	uld be
15. If married give name of wife	The motion of the portion of the por	arged
or husband of deceased	contributing to death but not causally related to immediate cause.	stically
16. NAME	26. If a communicable disease (a) Date of appearance	
16. NAME	is mentioned on this certificate, give (b) Duration of disease	
17. Birthplace (Province or Country)		
18. Maiden Name.	27. If a woman, was the death associated with pregnancy?	
	28. Was there a surgical operation?Date of operation	
19. BIRTHPLACE	State findingsWas there an autopsy?	
20. Person giving information	29. If death was due to external causes (violence) fill in also the following:—	
	Accident, suicide or homicide?	1
Address Navel Service Headquarters, Ottawa, Ont.	Manner of injury(How sustained)	-
Relationship to deceased	Nature of injury	1
21. Place of Burial, Cremation or Removal Body not recovered.	Specify whether injury occurred in industry, in home, or in public place	1
Date of burial or removal	Signed by	1
22. Burial Permit was issued by	Address Date 19	
Address		
	30. Division Registrar's Record No	
23. Undertakee (Name and address)	31. Filed	

This form if placed in an envelope, marked "Dominion Statistics-Free, penalty for improper use \$300," and properly addressed will pass through the mail "FREE"

113.B-379, IN THE NAME OF GOD, AMEN

J. Edward Richard BURNS, Asst. Cook (S) R.C.N.V.R.

of His

Majesty's Ship

H.M.C.S. "YORK"

(now a Patient\* in

),

"If in Hospital or being sound of mind, do hereby make this my last Will and Testament: I

Insert the degree of relationship (if of give and bequeath unto my any) and place of residence of the Legatee or Legatees.

See instructions on the back hereof.

mother: Mrs. Gertrude Burns, 76 Dovercourt Rd., Toronto, Ont.,

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 mother: Mrs. Gertrude Burns, as above,

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 day of this twenty-third

Toronto July

hereunto set my hand, , in the Year of Our Lord

and forty-two. One Thousand Nine Hundred

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

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.

Records by In Py

## 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.

Signature of the person by whom the Will was prepared.

### DEPARTMENT OF NATIONAL DEFENCE



NAVY ARMY AIR FORCE

#### STATEMENT OF WAR SERVICE GRATUITY

BURNS Edward Richard MHER'S REGISTER NO. NAME (CHRISTIAN NAMES) for service state of FILE NO. DATE 25th June 45 Edward R. BURNS PAYEE 308 Sparks St. . -43309 Ottawa, Ont. NS. V-43309 SERVICE NO. ADDRESS Cook(S) FINAL RANK OR RATING 7th May 144. 7th Hay 44 DATE OF DISCHARGE DATE OF TERMINATION OF OVERSEAS SERVICE A. TOTAL QUALIFYING SERVICE EQUAL TO COMPLETE PERIODS AT \$7.50 NO OF DAYS 30 B. QUALIFYING OVERSEAS SERVICE NO. OF DAYS 152 LESS INELIGIBLE DAYS, EQUAL TO DAYS @ 25C. PER DAY C. SUPPLEMENT FOR OVERSEAS SERVICE DAILY RATES AT DISCHARGE SUBSISTENCE OR LODGING AND PROVISION ALLOWANCE ADDITIONAL PAY HALL DEPENDENTS' ALLOWANCE 1/30 OF \$ TOTAL 19.11 NO. OF DAYS 183 D. WAR SERVICE GRATUITY 214.11 PAY AND ALLOWANCES \$ E. DEDUCTIONS OVERPAYMENT OF DEPENDENTS' ALLOWANCE AND ASSIGNED PAY \$ MAL OTHER DEDUCTIONS 214.11 F. TOTAL AMOUNT PAYABLE

G. YOUR PORTION OF GRATUITY IS-

Uoucher DEPENDENTS' ALLOWANCE IN ISSUE TO YOU \$\_\_\_\_\_OF\$ =\$214.11

Chage 978 - 9/7 - 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 CHECKED BY



### MEMORANDUM

#### TO: DIRECTOR OF ESTATES

Edward R. Burns, Ck(s) Official No. V-43309 D.D.7th May, 1944 - H.M.C.S. "VALLEYFIELD"

The Service Estate of the above named rating is now ready for disposal.

- Report of death at folio 23. 1.
- Balance of wages as per C.N.S.46 at folio 32 \$68.8 2. (Official Receipt #171-25182).
- Service Certificate at folio 21. 3.
- Will in hands of Director of Estates as per folio 18. 4.
- Funeral expenses are not known.
- Allotments stopped last payment 31st May, 1944. 29 5.00 Canada Life Insurance Co., Toronto.
- War Savings Certificates nil Bonds - \$8.40 from May/43 to October/43. In favour of - Mr. Edward R. Burns H.M C.S. "STADACONA" c/o.F.M.O., H.M.C. Dockyard, Halifax, N.S.

A/Pay.Captain, R.C.N.V.R. Director of Naval Pay Accounting.

PREPARED BY: CLCupps
CHECKED BY: Proudx

OTTAWA, Ontario 9th November, 1944

## STATEMENT OF ACCOUNT

2

When entered	•B•	Date	of appearan	nce F.B.		Whither discharged	DEAD	<b>,</b>
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		-		\\		Total cicuits		
DEBT from forme	account				······································		NJ	LL
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st month	46.00	8,94				Total	54	94
nd month						Total		
rd month						Total		
Allotment 20.00	, 5.00 c	hged for	Apl. 8	& May			50	00
Pension deduction (	Officers) char	ged to			.of			
Hospital stoppages.						/		
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THER CHARGE	S. O.R. P	ayable A	dm. Na	val Esta	tes (Pre	esent War)	68	80
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·				*	Balance Cr.		NI	L
AUDIT:						o be shown in red)	2	
				(1	Balance B1. (	o be shown in red)		
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EEF	IT, SICK OR LEAVE	FROM	то	No. OF DAYS	IN	, HOSPITAL, etc., WHICH BORNE		
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C.N.S. 2426 25M-5-42 (4545) N.S. 815-9-2426

76 Dovercourt Rd., Toronto 3, Ontario. November 28, 1945.

Dear Sir:

In regards to a victory bond, my son E.R. Burns. V-43309 bought and payed for. He also was paying on a second one.

My son had the bond on the ship with him, otherwise he would of sent it to me. You must be able to trace the number of the bond, and know it has never been cashed.

The government knows the bond was payed for and my boy payed for it dearly. Why should I be cheated because my boy cannot speak for himself. My only desire in life was the well being of my children. My boy gave his all. Surely I have a right to the money he so nobley earned.

Yours sincerely,

Sgd: Mrs. Gertrude Burns.