

V36182
BURTON

WILLIAM

CLARE

OCCUPATIONAL HISTORY FORM

1 30891 SEP 16 113-B2222

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...

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

Section A—GENERAL INFORMATION

- 1. (a) Print name in full... (b) Reg'l. No... 136182
2. (a) Arm of service... (b) Unit... (c) Rank...
3. (a) Date of birth... (b) Have you any dependents?... (c) Place of residence...
4. (a) Place of enlistment... (b) Date of enlistment...

PLEASE LEAVE BLANK

Section B—EDUCATION AND TRAINING

- 5. (a) State age on finally leaving school... (b) Were you attending school or college up to the time of enlistment?
6. State definitely highest standing reached at public, technical or high 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? (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? (b) What languages do you read well?

Section C—EMPLOYMENT CONDITION AT TIME OF ENLISTMENT

- 10. (a) State whether you were WORKING or NOT WORKING at time of enlistment. (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. Address.
19. Nature of employer's business (for instance, "farmer", or "building contractor", or "boot factory", or "iron foundry", or "retail store", etc.)
20. (a) Your specific occupation. (b) Number of years' experience at this occupation with any employer.
21. (a) Did your employer promise definitely to give you employment on discharge? (b) Did your employer refuse to promise you employment on discharge? (c) Do you wish to return to your 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

- 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? (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? (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?
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.



DATE 19 Sept 1941 SIGNATURE

COPY TO
VWD
ES

SEP 29 1941

W
 Mrs. Claudia McKenzie,

177 Gibbon St.

Oshawa, Ont.

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. NS V-36182 FD 423

DEPARTMENT OF NATIONAL DEFENCE
 ESTATES BRANCH
 OTTAWA, ONT.

May 24th 1944

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

BURTON, William Clarence Supply Assistant V-36182

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.

HRW/NM

H.R. Wade

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



ANSWER IN FULL ALL APPLICABLE QUESTIONS

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

Degrees of Relationship	RELATIVES required to be accounted for	INFORMANT'S STATEMENT			
		NAME IN FULL of any Relative, if any, in each degree 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.....	_____ <i>single</i>		_____	
2	Children of the Deceased and dates of their Births.....	_____		_____	
3	Father of the Deceased.....	<i>Tom. Clarence Burton</i>		<i>Died Nov 1919</i>	
4	Mother of the Deceased.....	<i>Claudia McKeenye</i>	<i>68</i>	<i>177 Lubbock St. Oshawa, Ont.</i>	
5	Brothers of the Deceased	Full Blood	<i>Eric Burton</i> <i>Ernest Burton</i> <i>Herbert Burton</i> <i>Cherley Burton</i>	<i>50</i> <i>47</i> <i>46</i> <i>32</i>	<i>Park Rd. N. Oshawa, Ont.</i> <i>Ajox, Ont.</i> <i>New Richmond, Que.</i> <i>290 Arthur St., Oshawa, Ont.</i>
		Half Blood	_____		
6	Sisters of the Deceased	Full Blood	<i>Mrs Tom. Henderson</i> <i>Mrs Sest McColm</i> <i>Mrs Geo. McCallum</i>	<i>49</i> <i>44</i> <i>42</i>	<i>59 E. Main St. Mystic, Conn. U.S.A.</i> <i>177 Lubbock St. Oshawa, Ont.</i> <i>30 Enmore St. Andover, Mass.</i>
		Half Blood	<i>Mrs R. McWhites</i> <i>Miss Vida Burton</i> <i>Mrs R. Wiley</i>	<i>40</i> <i>36</i> <i>34</i>	<i>Wants, Conn. U.S.A.</i> <i>177 Lubbock St. Oshawa, Ont.</i> <i>1905 Edinburgh St. New Weston, D. C.</i>
7	Names of brothers or sisters (whether of the full or the half blood) of the Deceased, who are dead, and date of death of each.	Names and ages of their children (if any)	Address of their children		

ANSWER FULLY EACH QUESTION ON THIS PAGE
PARTICULARS AS TO IDENTITY

8	Full names of the deceased.	William Clarence Burton
9	Date of his birth.	Aug 11, 1917
10	Place and date of his marriage.	— (unmarried)
11	Place and date of his parents' marriage.	New Richmond, Que.

PARTICULARS OF DOMICILE

12	Place where deceased was born.	New Richmond, Que.
13	State, in order, the Province, State and/or County in which he resided before enlistment and the period of time in each.	(a) New Westminster B.C. — 10 yrs. (b) Steneston B.C. — 6 " (c) New Richmond, P.I. — 8 "
14	Nature of employment before enlistment.	On staff of Safeway Stores
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.	Oshawa, Ont.

PARTICULARS OF ESTATE

17	Did he leave a Will? If in your custody, please forward.	No
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?	Not married
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?	No.
20	Amount of War Savings Certificates held by deceased. Indicate where located.	None
21	Amount of Victory Loan Bonds held by deceased. Indicate whether registered or bearer and where located.	None to my knowledge
22	If deceased had life insurance, name companies and amount payable under each policy and the person named as beneficiary therein.	London Life Insurance Co., London, Ont. Taken in 1941. War clause only permits refunding of premiums paid.
23	Describe other assets, if any, and estimated value thereof. Use space on page 4 if necessary.	None.

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.	Not to my knowledge.
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.	Naval Funeral.

(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 name of relative 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 or Commissioned Officer of any of His Majesty's Forces.

Mrs Claudia McKenzie

{ Signature of Informant

174 Gibbons Street

Address

Oshawa, Ont.

CERTIFICATE

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

McKenzie { Name of informant } is the* Mother 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.

Dated at Oshawa this 7th day of June 19 44

Signature of Clergyman, Priest, Magistrate, Commissioner or Notary Public or Commissioned Officer of any of His Majesty's Forces.

W. S. Sinclair

Qualification

Notary Public & Commissioner

Address Oshawa, Ontario

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



CANADA

ATTESTATION FORM (HOSTILITIES FORM)

N. V. 5
50M-1-41 (8973)
N.S. 815-11-5

130688 DEPT
NATIONAL DEFENCE
SEP 10 1941
N.S. 12-2222
CANADA

13

FOR MEN OF THE ROYAL CANADIAN NAVAL VOLUNTEER RESERVE

SURNAME **BURTON** OFFICIAL NO. **V361F2**
CHRISTIAN NAMES **William Clarence** MARRIED, SINGLE OR WIDOWER **Single**

PERMANENT ADDRESS **1905 - Edenburgh Street, N.W. 3079-R
New Westminster, B.C.** RELIGION **Church of England**

DATE OF BIRTH **11th August, 1917** PLACE OF BIRTH **New Richmond** NAME AND ADDRESS OF NEXT OF KIN **Mother: Mrs. Claudie Burton
Steveston, B.C.**
*Original Nationality of:
Father **English** County
Mother **Scottish** Province **QUEBEC**

*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..... 37	Brown	Blue	Fair	NIL
Inches..... 9	Deflated..... 34				
Mean..... 35½					

EDUCATIONAL STANDING **Completed Grade 9 (High School)** TRADE OR CALLING AND IN WHOSE EMPLOY **Clerk
Safeway Stores Limited
New Westminster, B.C.**

DATE OF ENROLMENT **8th September, 1941** RATING FOR WHICH ENROLLED **Prob. V. A.
R. C. N. V. R.** R.C.N.V.R. DIVISION, OR OTHER ESTABLISHMENT, AT WHICH ENROLLED **VANCOUVER**
ACTIVE SERVICE

(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 **Westminster Regiment N.P.A.M.** for the period shown; and attach my record of service, in corroboration of this statement.

*Cross out Clause not applicable.

Personnel Records Division.	
1. Noted in Records	<i>[Signature]</i>
2. Index Card	<i>[Signature]</i>
3. Non-Sub. Card	<i>[Signature]</i>
4. Statistical Card	<i>[Signature]</i>
5. Pension Card	<i>[Signature]</i>
6. Pension Card	<i>[Signature]</i>
7. Pension Card	<i>[Signature]</i>
8. Pension Card	<i>[Signature]</i>
DATE	26/9/41

SERVED IN	RANK	FROM	TO
Westminster Regiment N. P. A. M.	Private	22nd Nov., 1940	6th Sept., 1941

ENTERED IN PAY LEDGER

H. M. C. S. "EXTOWN"

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

and belief.

Plenched
30/9/41

L.R. Lyon

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

(5) On being enrolled as a member of the **VANCOUVER** 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 8th day of September, 1941

Signature of applicant W. C. Burton

(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 8th day of September, 1941

E. J. Fox Lieut. RCNVR
Signature of and rank of Attesting Officer.

(D) OATH OF ALLEGIANCE

I, William Clarence Burton 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 W. C. Burton

Witness E. J. Fox

Date 8th September, 1941 Rank Lieut. RCNVR

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

(E) CERTIFICATE OF ATTESTING OFFICER

William Clarence Burton 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 **VANCOUVER** Division of the R.C.N.V.R. or in the appropriate official documents.

E. J. Fox
Attesting Officer.

9th September, 194 1 R.C.N.V.R. Division VANCOUVER, D.H.Q.
(or other establishment)

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.

306



CANADA

Can. B. 207

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

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 BURTON - William Clarence
† candidate for entry as Prob. V. S. RCNVR
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 lbs.	(c) Height with Bare Feet ft. ins.	(d) General Development	(e) Chest Girth inches (a) maximum (b) minimum (c) mean	(f) Vision by— (i) Snellen's Types (ii) Colour Vision right eye left eye *colour vision	(g) Vaccinated or revac- cinated for Small Pox (Date)	(h) Lungs, Heart, etc.	(i) Abdomen, Hernia, etc.	(k) Limbs and Joints	(l) Skin	(m) Ears and Hearing	(n) Testes, Varicocele, etc.	(o) Mouth, Teeth (No. deficient and No. defective, if any), Nose, Tonsils, etc.	(p) Anus, Hemorrhoids, etc.
24 yrs 0 mo	145	5' 9"	Good	37 34 35 1/2	6/5 6/2 N	1927	N. B.P. 126/77	N	N	N	N	N	N	N

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

X-ray { Not taken.
Approved.
Positive.
Doubtful.

----- * C NADEN neg. no. 29430 Sig. No. 0012/10

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.

W. C. Burton

† The exact meaning of this is to be clearly explained to the Candidate by the Examining Medical Officer.

Signature of Candidate

‡ Strike out if inapplicable.

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 Vancouver B.C. the 4th of September 1941

W. C. Burton
Examining Medical Officer

(Rank) Surg. Lieut RCNVR

D OF D 7-5-44

AWARDS NAVY

D.D.

BURTON	William Clarence	V-36182	Sy. Asst.	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
1939-45 Star	205 3/10/49
Atlantic Star	
Africa Star	
C.V.S.M. & Clasp	
War Medal	

(THE REVERSE TO BE USED FOR ESTATE PURPOSES)

MEDALS AND MEMORIALS—DECEASED PERSONNEL

RCNVR Dec. 44 "VALLEYFIELD"

REGISTRATION No. DATE OF DESPATCH

(1) MEDALS
PERSON

ENTITLED TO Mrs. Claudia McKenzie - Mother

ADDRESS: ~~177 Gibbon St.~~, 92 Elgin St. West,
OSHAWA, Ont.

(1)

(2) MEMORIAL CROSS

WIDOW

ADDRESS:

(2)

(3) MEMORIAL CROSS

MOTHER Mrs. C. McKenzie

177 Gibbon St., Oshawa, Ontario.

ADDRESS:

(3)

26-5-44

MEMORIAL BAR

DATE DESP

REGN. NO. 2293

K 5636

MILITIA ACT

M.F.M. 82
480M-8-40 (6652)
H.Q. 1772-39-1773

National Resources Mobilization Act, 1940

ENROLMENT

NON-PERMANENT ACTIVE MILITIA OF CANADA

REGIMENTAL No. K548411

757

Militia Unit taken On Strength 2nd. Bn. Westmn. Regt. (M.G.)

1. Surname (Block Letters) BURTON

2. Christian Names (In Full) William Clarence

702/1

3. Present Address 1121 Hamilton N.W.

03

4. Place of Birth New Richmond Date of Birth Aug. 11/17

5. Religion Presbyterian 6. Occupation Store Clerk

8-17

7. Next-of-Kin Mother: Mrs. Claudet McKenzie,
(NAME AND ADDRESS)
Steveston, B.C.

3

8. Physical Description: Height 5'10 1/2 Weight 150

057

Color of Eyes Blue Color of Hair Fair

9. Preference, if any, for Naval, Military or Air Force Service. (Give particulars, qualifications, etc.)

3

Air Force

22-11-0

Dated this 22nd day of November 19 40

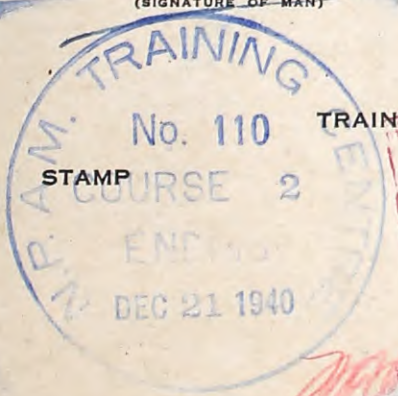
110

Training Centre No. 110

21.12.0

W. Burton
(SIGNATURE OF MAN)

J. J. Hower
(SIGNATURE AND RANK OF OFFICER EFFECTING ENROLMENT)
Major



TRAINING CERTIFICATE STAMP



Charles H.
(SIGNATURE OF OFFICER AFFIXING THE STAMP)

Officer Commanding C.M.T.C. 110 Vernon, B.C.

1
01
99

V36182

OFFICIAL NUMBER

FILE NUMBER

113-B-2222

OFFICIAL NUMBER V36182

NAME BURTON William Clarence DATE OF BIRTH 11th August, 1917
(Surname) (Given Names)PLACE OF BIRTH New Richmond, Quebec. OCCUPATION ClerkRELIGION Church of England EDUCATION Grade 9.RESIDENCE AT TIME OF ENLISTMENT: Street and No. 1905 Edinburgh Street Town New Westminster Province, etc. B.C.

Date (in figures)			Period	DESCRIPTION					PREVIOUS SERVICE		
Day	Month	Year		Height	Hair	Eyes	Complexion	Marks or Scars	Served in	Rank or Rating	Dates
										From	To
8	9	41	H.O.	5'9"	Brown	Blue	Fair	Nil	Westminster Regt. N.P.A.M.	Pte.	22.11.40 6.9.41

NEXT OF KIN RELATIONSHIP (in pencil) Mother NAME (in pencil) Charles McKeown
ADDRESS (in pencil): Street and No. 177 Bloor St Town Toronto Province, etc. Ontario

Date (in figures)			Particulars	Date (in figures)			Particulars	Date (in figures)			PARTICULARS
Day	Month	Year		Day	Month	Year		Day	Month	Year	
5	3	44	C.V.S.M. (R&C) & 1939-1943 Star	27	8	43	Qual. anti-gas 2nd issue 249A2866				
				16	11	43	Qual. for Idg. S.A. 21-13-8				

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		
					HMCS Kenogami	2	26	7	43	(1) Did mail a letter ashore. (2) Did communicate information which might be useful to the enemy.	28 days detention.

FILM
NO. WAR 5619-7-
DATE

Date (in figures)			DAYS FORFEITED						O.H.F. received.
Day	Month	Year	Prison	Det'n	Cells	C. Power	W. Trial	In diff. Char.	
26	7	43		28					

SECOND CLASS FOR CONDUCT

From

To

W.S.G.
APPLICATION
340
RECEIVED

P.I.B.

V36182 OFFICIAL NUMBER

NAME BURTON William Clarence
(Surname) (Given Names)

OFFICIAL NUMBER V36182

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
Vancouver Div. Str.	Prob. V.A.	8	9	41													
Duty Div. Hdqtrs.	" "	8	9	41	D.I.												
HMCS "Naden"	" "	15	10	41													
" "	V.A.	16	10	41	Rated. 2/9A/4799	V.G.	Sat.	7	5	44							
HMCS "Stadacona"	" "	15	12	41	S161												
" "	S.A.	1	3	42													
HMCS "Venture"	" "	7	3	42	S161-204891												
HMCS "Stadacona"	" "	21	3	42	S161-184910												
Hoch. (Woodstock)	" "	1	4	42	S161-101175												
" (Manning Pool)	" "	28	4	42	S161												
HMCS "Stadacona"	" "	11	8	42	EDO B6609												
HMCS "Kenogami"	" "	21	8	42	HDO B7449												
HMCS "Stadacona"	" "	19	8	43	DRD H-2368.												
HMCS "Protector 11"	" "	28	8	43	DRD H-2447.												
Stadacona	" "	16	2	44	DRD #68 P.2												
Valleyfield	" "	25	2	44	DRD # S83 P.2												
DISCHARGED	" "	7	5	44	Killed in Action Casualty List.												

GENERAL REMARKS
 Awarded Canadian Memorial Cross to Mother:
 Mrs. Claudia McKenzie,
 177 Gibbon Street,
 Oshawa, Ontario 26.5.44

DATE OF BIRTH			PLACE		CIVIL OCCU.		RELI.	ED	PERM. RESIDENCE			PREV. ENL.	RANK OR RATE		
DY.	MO.	YR.	BIRTH	MAIN	SUB	GION	P.	CTY.	TOWN	SERV.	DIV.	A	BR.	RANK	
11	8	12	12	830	0	302	9	04	06	9	08	0	33	93	
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		
05	09	41	08	04	41					12200	22	94			
SENIORITY			STR.	NON-SUB		M				CODED	CHECKED				
DY.	MO.	YR.	CAT.	A	B	ST.									
01	03	42	13	00	00	20				all					

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

NAME IN FULL BURTON William Charles RANK/RATING S.P. OFF. NO. V36182 ADDRESS

SHIP	SERVICE			AREA	QUALIFYING PERIODS IN DAYS					STARS MEDALS	✓ 1 2	ELIGIBLE FOR AWARDS OF		
	FROM	TO	DAYS		FROM	TO	1939-45	ATLANTIC	DEFENCE				CLASP C.V.S.M.	1915 MEDAL
		9.9.41											1939-45	1 Star
Woodstock	2.4.42	9.4.42	8	Atl.									ATLANTIC	1 Star
Penogami	21.8.42	18.8.43	363	A. Cl. P. In.									FRANCE G.	
Valley field	25.2.44	7.5.44	73	Atl.									AFRICA	1 Star
Miss "Head"	No date	7.5.44											PACIFIC	
													BURMA	
													ITALY	
													DEFENCE	
													C.V.S.M.	2 Clasp

CERTIFICATE of the SERVICE of

William Clarence **BURTON**

in the Royal Canadian Naval Volunteer Reserve

Identification Card No. 36697 Issued

Training Headquarters	R.C.N.V.R. Division	Official Number <u>1-36182</u>
ESQUIMALT	VANCOUVER	"

Date of Birth 11th August, 1917

Place of Birth New Richmond, Quebec

Place of Residence 1205 Elmbridge St., New Westminster, B.C.

Trade brought up to Clerk - Grocery

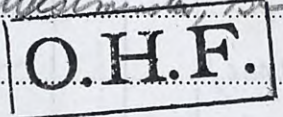
Religion Church of England

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: Mrs. Claude McKernie
Steveston, B.C.*



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	
	<u>8 Sept. 41</u>	<u>Hostilities.</u>	<u>Prob. V. A.</u>	<u>5 Feb 44</u>	<u>39-44</u>	<u>Canadian Volunteer Service Medal with Clas. Pro-band.</u>
				<u>5 Feb 44</u>	<u>39-44</u>	<u>Star. Pro-band.</u>

PERSONAL DESCRIPTION								
	Height		Chest (mean)	Weight	Hair	Eyes	Complexion	MARKS, WOUNDS, SCARS
	Feet	Inches						
On Entry	<u>5</u>	<u>9</u>	<u>35½</u>	<u>145</u>	<u>Brown</u>	<u>Blue</u>	<u>Fair</u>	<u>NIL</u>
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

H.M.C.S. ".....

Kenogami

PA Kenogami

Warrant No.

2

, dated

26 July

113-B-2222

1301791

19 43

(The Warrants are to be numbered consecutively from the Date of the Ship being commissioned.)

19

Detention

For.....

(a) WHEREAS it has been represented to me by Godfrey Harry Hayes, Distinguished Service Cross, Lieutenant, Royal Canadian Naval Reserve.

that on ~~the~~ about 6th day of March, 19 43 ,

Name..... William Clarence BURTON

Date of Birth..... 11 August, 1919

Rating..... Supply Assistant, Royal Canadian Naval Volunteer Reserve

Official Number..... V36182

Good Conduct Medal..... No

Good Conduct Badges..... Nil

Date of Entry in Ship..... 21st August, 1942

List and Number on Ship's Book.....

Date of First Entry in H.M. Service..... 8th September, 1941.

Class for Conduct..... First

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

Class for Leave..... First

- Did [Insert full particulars of Offence]
- Was guilty of an act to the prejudice of Good Order and Naval Discipline in that he did mail a letter ashore in contravention of Naval Order 2431.
 - Did, while in the service of His Majesty, communicate information which might be useful to the enemy, to a person to whom he was not authorized to communicate it.
- I do hereby adjudge him the said William Clarence BURTON

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

†To be imprisoned in			†To be kept in detention in		Confined in Cells on Board		† Disrated to	Deprived of Medal	Deprived of Badges, No.	Whether reduced to 2nd Class for Conduct	Days				Whether Reduced to Lower Class for Leave	Grog stop-ped Days	Other Punish-ments
Name of Gaol*	For Days	With Days H.L.	Name of Place of detention*	For Days	No. of Days	Diet					10	15	Leave stop-ped	Pay forfeited			
			Debert Military Detention Barracks	28						No				No			

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

†See page 4 for proposal to award imprisonment, detention or disrating.

C.N.S. 271
20M-9-42 (6061)
N.S. 815-9-271

NECESSARY ACTION COMPLETED

A/S 43066 PB

Noted in Service Records by *Amor*

Before awarding the foregoing punishment, (b) I did, on the 23rd day of July, 1943, personally and publicly, in the presence of the Accuser and Accused, investigate the matter, and having heard the evidence of Lieutenant Godfrey Harry HAYES, Distinguished Service Cross, Royal Canadian Naval Reserve, and Documentary evidence

as well as what the accused had to offer in his defence, in support of the charge as well as what the Accused had to offer in his defence, and the evidence of (c)

and he calling no one on his behalf

whom he called on his behalf, I consider the charge to be substantiated against him, and [taking into consideration that this is the First Offence registered against him in the Conduct Book or Conduct Sheet], I adjudge him to be punished as aforestated (d).

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

Halifax, the 26th day of July 1943.

[Signature] Captain Lieutenant, R.C.N.V.R.

[Signature] Lieutenant, R.C.N.R. (Signature and Rank of Complainant)

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

Documentary evidence (letter written by the accused) received from Naval Service Headquarters latter part of June. Ship in refit at an outport.

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

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

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

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

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

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

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

Warrant Number: 2 dated and read by me this 26th day of July 1943.

Signature [Signature] Rank Lieutenant R.C.N.V.R.

H.M.C.S. Kenogami

23 July 1943

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

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

King's Regulations Art. 707 (1).

* 28 { days { Imprisonment with hard labour } in
* { calendar months { Detention }

~~addition to the other punishments indicated.~~

Art. 776 (2).

~~To be inserted to/..... in/~~

~~addition to the other punishments indicated.~~

Art. 752 (2).

*As indicated on page 1.

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

I am,

SIR,

Commodore, Halifax,
H.M.C. Dockyard,
.....
Halifax, Nova Scotia.

Your Obedient Servant,

J. A. Gray

Lieutenant, R.C.N.V.R.

CAPTAIN "D"
HALIFAX
JUL 23 1943

*To be struck out when not applicable.

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

Approved.

Signature..... *M. Taylor*

The Officer Commanding

Rank COMMODORE, Second Class

Royal Canadian Navy

H.M.C.S. "KENOGAMI"

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



*R21822
7*

Department of National Defence
(NAVAL SERVICE)

IN REPLY PLEASE QUOTE

NO.

3

M 64814

.....16th July,.....1941.....

DEPT.
NATIONAL DEFENCE

JUL 21 1941

N.S. *62-21513*
CANADA

From: The Commanding Officer,
Vancouver Division, R.C.N.V.R.,
Vancouver, B. C.

To: The Naval Secretary,
Department of National Defense,
Ottawa, Ontario.

ms B.D.

Subject: Mr. W. C. Burton.

Submitted:

I have received an offer of service,
copy of which is attached, from Mr. W. C.
Burton, 1905 Edinburgh Street, New Westminster,
B. C., who wishes to join the RCNVR as a
Vidualling Assistant.

2. I have interviewed this man and while
he does not possess two years High School ed-
ucation, I am of the opinion that his business
experience more than makes up the difference.

3. He is considered suitable in all res-
pects. Decision as to his enrolment is
requested.

*ms
B.D.
(Personal file)*

*NREI
✓ Pwr.*

EG/GA

W.A. Richardson
Lieutenant, R.C.N.V.R.,
COMMANDING OFFICER.

SAFEWAY STORES LIMITED



840 Cambie St.,
Vancouver, B. C.

July 15, 1941.

The Officer Commanding,
The Royal Canadian Naval Volunteer Reserve,
Recruiting Depot,
Vancouver, B. C.

Dear Sir:

Mr. William Clarence Burton has been employed
by Safeway Stores Limited and Piggly Wiggly (Canadian)
Ltd. for a period of nine years.

During part of this time Mr. Burton was under
the supervision of the writer and his work was at all
times very satisfactory.

I understand from Mr. Burton that he is desirous
of entering the Naval service in the capacity of a store-
keeper, and we would have no hesitation whatever in recom-
mending him to you for employment in such a capacity.

Yours very truly,
SAFEWAY STORES LIMITED,

A handwritten signature in cursive script, appearing to read "W. J. McCann".

W. J. McCann,
Personnel Manager.

WJM:CM

KENOGAMI

REPORT OF PROFESSIONAL EXAMINATION FOR
RATING OF LEADING SUPPLY ASSISTANT (TY)

H.M.C.S. "AVALON"

Name of Candidate (In full) ... W. C. BURTON

Present Rating Supply Assistant ... Official Number V-36182

We consider the Candidate (~~to be qualified~~)
(to have failed) professionally for
the rating of Leading Supply Assistant (Ty.)

In accordance with Naval Monthly Order 2219/42.

<u>SUBJECT</u>	<u>POSSIBLE</u>	<u>OBTAINED</u>
Victualling	200	62
Naval Stores	200	57
Typing	50	3
	-----	-----
TOTAL:	450	122
	-----	-----

Dated on board H.M.C.S. "AVALON"
at St. John's, Newfoundland, on
the 17th November, 1942.

W. R. Williams
Payr. Lieutenant, R.C.N.V.R.

S. W. Davis
Payr. Lieut.-Commander, RCNVR.

Signatures and Ranks of
Examining Officers.

~~Branding Commander, H.M.C.S. "ST. DAVID" - 1 copy~~

Commanding Officer, H.M.C.S. "KENOGAMI" - 1 copy.

Service Certificate Office - 1 copy
For necessary action.

S. W. Davis
.....
(S. W. Davis)
Lieut.-Commander, R.C.N.,
COMMANDING OFFICER.

TFH:PMB

REGISTERED

AIR MAIL

FILE: V-36182 (Pers.N.)

8th May, 1944

28

Dear Mrs. McKenzie:

It is with deepest regret that I must confirm the telegram of the 8th of May, 1944, from the Minister of National Defence for Naval Services, informing you that your son, William Clarence Burton, Supply Assistant, Royal Canadian Naval Volunteer Reserve, Official Number V-36182, has been killed in action.

According to the report received, your son was killed in action when the ship in which he was serving was lost by enemy action. For reasons of security it may be some time before details of this incident of war may be released.

Your son's body is now in St. John's, Newfoundland, where it is understood funeral and burial will take place, with full Naval honours. It is anticipated that additional details in this regard will be forthcoming in a short time. In this connection I might add that wartime regulations do not permit the return to Canada of the bodies of deceased Naval personnel.

It is requested that you will regard as confidential anything beyond the fact of your son's loss on war service until such time as an official announcement is made, as this information might prove useful to the enemy.

Please allow me to express sincere sympathy with you in your bereavement on behalf of the Minister of National Defence for Naval Services, the 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,

LETTER dispatched
PERSONNEL NAVAL
MAY 8 1944
SECRETARY, NAVAL BOARD

Mrs. Claudia McKenzie,
177 Gibbon Street,
OSHAWA, Ontario

WJ
er
jd

TFH:PMB

REGISTERED
AIR MAIL

FILE: V-36182 (Pers.N.)

29

11th May, 1944.

Dear Mrs. McKenzie:

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 "killed in action" 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,

[Signature]
SECRETARY, NAVAL BOARD

COPIES DESTROYED BY
PARLIAMENTARY COMMISSIONER NAVAL
MAY 12 1944

Mrs. Claudia McKenzie,
177 Gibbon Street,
OSHAWA, Ontario

[Handwritten mark]

10 May,

4

N.S. V-36182 PERS. (N)

30

Dear Sir:

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

Name ..BURTON.....William Clarence.....
 (Surname) (Christian Names)

Rank/Rating ..Supply Assistant.....

Official No. .V36182, R.C.N.V.B.....

Nature of Casualty .Killed in action.....

Date of Casualty ...7 May, 1944.....

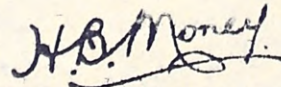
Address at time of Enlistment 1905 Edinburgh St.,
New Westminster, B.C.....

Marital Status at time of Enlistment .Single.....

OccupationClerk.....

Name & Address of Next of Kin Mother: Mrs. Claudia McKenzie,
 177 Gibbon St., Oshawa, Ont.....

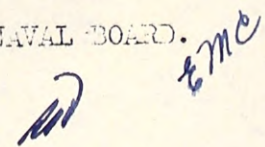
Yours truly,



for

SECRETARY, NAVAL BOARD.

The Deputy Minister (Taxation),
 Department of National Revenue,
 Ottawa, Ont.



DEPARTMENT OF NATIONAL DEFENCE
 - Naval Service -
 Ottawa, Canada.

Sir: 10 May, 1944
 (Date)

The following casualty has been reported -

32

NAME RANK or RATING NAVAL NO.
BURTON, William Clarence Supply Assistant V36182, R.C.N.V.R.

DATE OF ENLISTMENT - 8 September, 1941.

DATE OF DISCHARGE - 7 May, 1944.

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

SERVICE - Canada and High Seas.
 (Indicate whether in Canada only; or in Canada and the high seas or elsewhere.)

Reason for discharge and when and where any disability was incurred, or where death occurred. "DEAD". Killed in action when the ship in which he was serving was lost by enemy action.

(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. Claudia McKenzie,
ADDRESS- 177 Gibbon St., Oshawa, 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.

Copies Form "B" fwd. to Allots. (N) on

10/5/44. N.P.R./5.

H.B. Money

for SECRETARY, NAVAL BOARD.

Secretary, Canadian Pension Commission,
 Room 228, Daly Building, OTTAWA, Ont.

Royal Canadian message of Cond. & MC fwd 13/5/44 e

NOTE: Duplicate copies of this form (Form "B") have been forwarded to the Chief Treasury Officer (Allotment Section), Department of National Defence, Naval Service, for completion respecting the details of Marriage Allowance, Dependents Allowance, etc., and subsequent transmission to you.

(See reverse side for further instructions)

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.

[Faint handwritten notes in blue ink, possibly including a signature and date]

35

N.S. V-36182 Pers.(N)

15th May, 1944.

Dear Mrs. McKenzie:

Further to my letter of the 11th of May, 1944, it has now been learned from the Naval authorities in Newfoundland that your son was buried in the Joint Services Cemetery, St. John's, Newfoundland, on Wednesday, the 10th of May, with full Naval honours. As soon as the exact location of the grave within the cemetery is known this information will be passed on to you.

Your son's grave is being cared for and will be temporarily marked with a specially designed wooden cross bearing his official particulars. While the Imperial War Graves Commission is the authority responsible for permanently marking, by the use of a uniform type of headstone, the graves of all members of His Majesties Forces who die on Active Service, it is understood that due to war conditions these headstones cannot be erected at the present time.

Yours sincerely,

Deputy SECRETARY, NAVAL BOARD.

Mrs. Claudia McKenzie,
177 Gibbon Street,
OSHAWA, Ontario.

Despatched by
Sec. N. B.

you
Date 18-5-44
Time 12 30

PAY LIEUT. CDR. B. B. MONEY R. C. N. B.
 OFFICER-IN-CHARGE
 NAVAL PERSONNEL RECORDS

5-5

18th July, 1944.

From: ... The Flag Officer Newfoundland,
ST. JOHN'S, Newfoundland.

To: ... The Secretary, Naval Board,
Naval Service Headquarters,
OTTAWA, Canada.

H.M.C.S. "VALLEYFIELD" CASUALTIES

It is submitted for the consideration of the Department with reference to Naval Service Headquarter's N.S. V-38568 F.D. 1176 Pers. (N) of 4th July and N.S. V-49265 F.D. 278 Pers. (N) of 7th July, 1944 that it is confirmed that the deaths of the under listed naval personnel occurred beyond three miles of the coast of Newfoundland.

2. H.M.C.S. "GIFFARD's" signal timed 070511z 5/44 and my signals timed 080133z May and 080134z/5/44 refer.

REYNOLDS, Frank Clarin
Lieutenant, R.C.N.V.R.

HOFFMAN, Martin John
Ordnance Artificer 4th Class,
V-38568, R.C.N.V.R.

MILLS, Archie William
Coder,
V-50413, R.C.N.V.R.

BURTON, William Clarence
Supply Assistant,
V-36182, R.C.N.V.R.

(C.R.H. Taylor)
Commodore, R.C.N.
FLAG OFFICER NEWFOUNDLAND.



Department of National Defence
Naval Service

IN REPLY PLEASE QUOTE
No. N.S.V-36182 PERS. (N)

058632

Ottawa, Canada.

10 May, 1944.

2-36182

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:

<u>NAME, RANK/RATING NO.</u>	<u>PLACE, DATE & CAUSE of DEATH</u>	<u>NEXT OF KIN</u>
BURTON, William Clarence Supply Assistant, V36182, R.C.N.V.R.	Killed in action on 7 May, 1944, when the ship in which he was serving was lost by enemy action.	Mother: Mrs. Claudia McKenzie, 177 Gibbon St., Oshawa, Ont.

<u>IN FAVOUR OF:</u>	<u>ALLOTMENTS IN FORCE</u>	<u>AMOUNT</u>	<u>INITIALS</u>
Mrs. Claudia McKenzie, 177 Gibbon St., Oshawa, Ontario. (Mother)	D.A.	\$25.00	<i>hck</i>
	A.P.	30.00	
		\$55.00	
London Life Insurance Co., London, Ontario.		\$ 2.00	
Bond Clothes Shop, 434 Barrington Street, Halifax, Nova Scotia.		\$ 5.00	

WILL: No Record.

Yours truly,

H.B. Money

for
SECRETARY, NAVAL BOARD.



Administrator of Estates,
Estates Branch,
Department of National Defence,
O T T A W A.

STATEMENT

430-434 BARRINGTON STREET

HALIFAX, N. S.,

August 14, 19 44.

William Clarence, Burton,

S/Asst. V36182,

IN ACCOUNT WITH:

BOND CLOTHES SHOP

NAVAL, MILITARY and AIR FORCE
OUTFITTERS

TELEPHONE: B-8548

DATE	ITEM	DEBIT.	CREDIT	BALANCE
Aug. 13/42	Uniform	30.70		30.70
Sept 10	Deposit		5.00	25.70
Sept	Allotment		5.00	20.70
Oct. 2	"		5.00	15.70
Nov. 2	"		5.00	10.70
Dec. 2	"		5.00	5.70
Jan. 2/43	"		5.00	.70
Feb. 2	"		5.00cr	4.30
Mar. 2	"		5.00cr	9.30
Apr. 2	"		5.00cr	14.30
May 26	Uniform	32.50		18.20
" 26	Cap	4.25		22.45
May	Allotment		5.00	17.45
June 22	Express chgs.	.55		18.00
June 5	Allotment		5.00	13.00
July 3	"		5.00	8.00
Aug. 1	"		5.00	3.00
Sept. 2	"		5.00cr	2.00
Oct. 1	"		5.00cr	7.00
Nov. 1	"		5.00cr	12.00
Dec. 1	"		5.00cr	17.00
Jan. 15/44	Shoes & Slippers	9.25		cr 7.75
" 31	Allotment		5.00cr	12.75
" 31	O'Coat	22.50		9.75
Feb. 2	Express chgs.	.30		10.05
Feb. 2	Allotment		5.00	5.05

(forward)

August 14, 1944.

William Clarence Burton,
S/Asst. V36182.

DATE	ITEM	DEBIT	CREDIT	BALANCE
Feb. 2	Brought forward			5.05
Mar. 1	Allotment	5.00		.05
Apr. 1	"	5.00	cr 4.95	
May 1	"	5.00	cr 9.95	
Aug 14	Refund on allotment \$9.95 mailed to Rec. General of Canada, Ottawa.			

10

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

4
 NAVY

DECEASED
 MEMBER'S
 NAME

William Clarence

BURTON

(CHRISTIAN NAMES)

(SURNAME)

REGISTER NO.

340

FILE NO.

NB.V-36182

DATE

13 Mch/45.

SERVICE NO.

V-36182

FINAL RANK OR RATING

S.A.

DATE OF DISCHARGE

7 May/44

PAYEE
 ADDRESS

Mrs. Claudia McKenzie,
 92 Elgin St. W.,
 Oshawa, Ont.

DATE OF TERMINATION OF OVERSEAS SERVICE

7 May/44

A. TOTAL QUALIFYING SERVICE

NO. OF DAYS

945

EQUAL TO

31

COMPLETE PERIODS AT \$7.50

\$ 232.50

B. QUALIFYING OVERSEAS SERVICE

NO. OF DAYS

420

LESS

15

INELIGIBLE DAYS, EQUAL TO

405

DAYS @ 25C. PER DAY

101.25

C. SUPPLEMENT FOR OVERSEAS SERVICE

DAILY RATES AT DISCHARGE

PAY	\$	1.95	
SUBSISTENCE OR LODGING AND PROVISION ALLOWANCE	\$	1.45	
ADDITIONAL PAY	\$		
	\$		
DEPENDENTS' ALLOWANCE 1/30 OF \$	\$	25.00	.85
TOTAL	\$	4.25	29.75
NO. OF DAYS		405	29.75
		183	

29.75
 29.75

65.84

D. WAR SERVICE GRATUITY

399.59

E. DEDUCTIONS

OVERPAYMENT OF

PAY AND ALLOWANCES \$
 DEPENDENTS' ALLOWANCE
 AND ASSIGNED PAY \$

NIL

OTHER DEDUCTIONS

\$

F. TOTAL AMOUNT PAYABLE

399.59

G. YOUR PORTION OF GRATUITY IS—

DEPENDENTS' ALLOWANCE IN ISSUE TO YOU \$ _____ OF \$ _____ = \$ 399.59
 TOTAL DEPENDENTS' ALLOWANCE IN ISSUE \$ _____

Check # 116556 - 20/3/45

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	
SJD		[Signature]		DATE	
		[Signature]		15/3/45	

for Dir. Naval Pay. Acting.