

V3411  
**SIMARD**

JOSEPH

HIDOLA

H.Q. 1772-39-1377

250M-6-45 (7596

M. F. W. 2589

113-5-513 18

# 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 JOSEPH HIGOLA MICHEL SIMARD (b) Reg'l. No. V 3411
- 2. (a) Arm of service NAVY (b) Unit R.C.N.V.R. (c) Rank ORD. SEA.
- 3. (a) Date of birth SEPT 12, 1916 (b) Have you any dependents? NO (c) Place of residence at time of enlistment QUEBEC, P.Q.
- 4. (a) Place of enlistment QUEBEC, P.Q. (b) Date of enlistment SEPT 22, 1939

## Section B—EDUCATION AND TRAINING

- 5. (a) State age on finally leaving school 22 (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.) 9th yr. Commercial College
- 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? FRENCH, ENGLISH (b) What languages do you read well? FRENCH, 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) NOT WORKING (b) At time of enlistment of what trade union or professional society were you a member? NONE

## 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? NO
- 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 BOOKKEEPING
- 14. If you had been employed after leaving school, state when you last worked fairly regularly before enlistment APRIL 1939
- 15. Give details of last employer, if any: Name SAMSON & KNIGHT LTD. Address 71 ST. PETER ST. QUEBEC
- 16. Nature of employer's business (for instance, "farmer", or "building contractor", or "boot factory", or "iron foundry", or "retail store", etc.) CHARITABLE ACCOUNTANTS
- 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? NO (b) Do you feel competent to operate a farm? NO (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? NONE (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 AS PARAF.

DATE April 16 1941 SIGNATURE \_\_\_\_\_



## MEMORANDUM FOR

P. 64

Mrs. Stella Simard

24 Mont Carmel

Quebec, P.Q.



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

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

and the following number quoted:—

H.Q. N.S. 113-S-513 FD. 267

## DEPARTMENT OF NATIONAL DEFENCE

ESTATES BRANCH

OTTAWA, ONT.

January 4, 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

SIMARD, Joseph H.M., A.B.

No. V.3411, R.C.N.V.R.

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

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

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

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

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

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

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

HRW/JN

## ANSWER IN FULL ALL APPLICABLE QUESTIONS

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

Degrees of Relationship	RELATIVES required to be accounted for	INFORMANT'S STATEMENT		
		NAME IN FULL of any Relative, if any, in each degree specified	Age	ADDRESS IN FULL of each surviving Relative, opposite his or her name, and date of death of each deceased relative
1	Widow of the Deceased.....	STELLA SIMARD	27	5850 CHRISTOPHER COLUMBUS MONTREAL P.Q.
2	Children of the Deceased and dates of their Births.....			
3	Father of the Deceased.....	RAOUL SIMARD	46	DEATH 5 OF NOVEMBER 1933 AT BAIE ST-PAUL
4	Mother of the Deceased.....	LUCILLE SIMARD LAF	54	34 MONT CARMEL QUEBEC
5	Brothers of the Deceased	Full Blood		
		None		
6	Sisters of the Deceased	Full Blood		
		None		
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	MICHEL SIMARD
9	Date of his birth	12 SEPTEMBER 1916
10	Place and date of his marriage.	HALIFAX N.S. 28 MAY 1941
11	Place and date of his parents' marriage.	5 OCTOBER 1914 MURREY BAY Co. CHARLEVOIX

## PARTICULARS OF DOMICILE

12	Place where deceased was born.	MURREY BAY
13	State, in order, the Province, State and/or Country in which he resided before enlistment and the period of time in each.	(a) BAIE ST-PAUL (b) AND (c) QUEBEC (d)
14	Nature of employment before enlistment.	NO SITUATION
15	State whether he owned the premises in which he lived and, if so, where situated.	_____
16	Name place where deceased stated he intended to make his permanent home.	QUEBEC

## PARTICULARS OF ESTATE

17	Did he leave a Will?	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?	NO
19	Did he have a Bank, Post Office or other deposit account? If so, give name and address of bank, etc. and the amount on deposit.	NONE
20	Amount of War Savings Certificates held by deceased.	I DON'T NO
21	Amount of Victory Loan Bonds held by deceased.	I DON'T NO
22	If deceased had life insurance, name companies and amount payable under each policy and the person named as beneficiary there. Describe other assets, if any, and estimated value thereof.	NONE
23	Is application for Probate or Letters of Administration necessary (see page 1)?	_____

## OTHER PARTICULARS

24	Did the deceased after enlistment incur any debts for:— (a) His own separate board and lodging while on service. (b) Service clothing and equipment. An itemized account for each such debt should be attached hereto, and if same is correct you should mark the bill "approved" and sign same. If believed incorrect, give particulars.	NONE THAT I 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.	MISS BERTHE SIMARD 39 <sup>1</sup> / <sub>2</sub> ST-PATRICE QUEBEC

(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.)

DECLARATION

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

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

\* Widow of the deceased.

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

MRS STELLA SIMARD

Signature of Informant

5850 CHRISTOPHE COLOMB. MONTREAL

Address

CERTIFICATE

I hereby certify that, to the best of my knowledge and belief Mrs Stella Simard

\*See above.

Simard is the \* widow 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 Quebec this 19th day of January 1944

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

[Signature]

Qualification

Notary Public

Address

18 Buede - Quebec

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

I send you a receipt for the funeral of \$100.00 who was paid by his aunt: Miss Berthe Simard 39 1/2 St. Patrice Quebec P. Q.

Personnel Records  
Division.

- 1. Noted in Records *L.K.*
- 2. Index Card
- 3. Non-Su. Card
- 4. Statistical Card *L.K.*
- 5. Rongeo Strip *L.K.*
- 6. Pension Card
- 7. *8 lev* *AB*
- 8. DATE *6.10.39*



N. V. 5  
2M-10-37  
N.S. 815-11-5

DEPT  
NATIONAL DEFENCE  
SEP 28 1939  
N.S. 113 / 513  
CANADA

ATTESTATION FORM

FOR MEN OF THE ROYAL CANADIAN NAVAL VOLUNTEER RESERVE

SURNAME *Simard* OFFICIAL NO. *3411*

CHRISTIAN NAMES *Joseph Hidola Michel* MARRIED, SINGLE or WIDOWER *Single*

PERMANENT ADDRESS	RELIGION
<i>112 Grande Allee, Quebec City.</i>	<i>R.C.</i>

DATE OF BIRTH	PLACE OF BIRTH	NAME AND ADDRESS OF NEXT OF KIN
<i>September 12th, 1916.</i>	<i>Town Murray Bay, County Charlesvoix, Province Quebec.</i>	<i>Mother: Mrs L. Simard, Same Address.</i>

PERSONAL DESCRIPTION ON ENROLMENT

HEIGHT	CHEST MEASUREMENT	HAIR	EYES	COM- PLEXION	WOUNDS, SCARS, MARKS
Fect. <i>5</i>	Inflated <i>41</i>	<i>Fair</i>	<i>Blue</i>	<i>Fair</i>	<i>Scar on right knee</i>
Inches <i>7</i>	Deflated <i>35</i>				
	Mean <i>36</i>				

DATE OF ENROLMENT	RATING ENROLLING FOR	TRADE OR CALLING AND IN WHOSE EMPLOY
<i>September 22nd, 1939.</i>	<i>Ord. Sea.</i>	<i>Student</i>

(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.

\* ~~Or I served in~~ ~~of the period shown, and attach my~~  
~~record of service, if not from a period of this statement.~~

\* Cross out Clause not applicable.

SERVED IN	RANK	FROM	TO
<i>Not Applicable</i>			

- (c) I have never been rejected from any of His Majesty's Forces on account of unfitness.
- (4) That the particulars contained above are correct and true according to the best of my knowledge and belief.

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

(a) To serve from the date thereof for three consecutive years <sup>duration of hostilities</sup> 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.

Dated this 22nd day of September, 1939.

Signature of applicant Michel Simard

**(C) CERTIFICATE OF DIVISIONAL COMMANDING 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 22nd day of September, 1939.

F.A. Price  
Signature of Commanding Officer.  
F.A. Price, Lieut-Cmdr., R.C.N.V.R.

**(D) OATH OF ALLEGIANCE**

I, Joseph Hidola Michel Simard 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 Michel Simard  
Witness H.A. Price Lt R.C.N.V.R.

Date September 22nd, 1939. Rank A/Lt. ~~LTJG~~, R.C.N.V.R.

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

**(E) CERTIFICATE OF DIVISIONAL COMMANDING OFFICER**

Joseph Hidola Michel Simard 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 Quebec Division of the R.C.N.V.R.

F.A. Price  
Commanding Officer.  
F.A. Price, Lt-Cdr., R.C.N.V.R.

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.



V-3411



CANADA

Can. B. 207  
20M-8-38  
N.S. 815-2-207

# CERTIFICATE OF MEDICAL EXAMINATION FOR THE ENTRY OF OFFICERS, MEN AND BOYS FOR THE 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 Michel Simard

candidate for entry as.....  
and I believe him to be in all respects fit for His Majesty's Service. He has signed the Certificate given below in my presence.

Dated at Quebec the 15<sup>th</sup> of January 1940

W. H. Brown M.D.  
Examining Medical Officer  
(Rank) Sup. Lieut. R.C.N.R.

This examination has been made in accordance with the Instructions for Recruiting.

a	b	c	d	e	f	g	h	i	j	k	l	m	n	o
Age { Years Months	Weight without Clothes	Height with Bare Feet	General Development	Chest Girth	Vision by Snellen's Types (i) Colour Vision (ii)	Vaccinated or re- vaccinated for Small Pox (Date)	Lungs, Heart, etc.	Abdomen, Hernia, etc.	Limbs and Joints	Skin	Ears and Hearing	Testes, Varicocele, etc.	Mouth, Teeth (No. def- icient and No. defective, if any), Nose, Tonsils, etc.	Anus, Hemorrhoids, etc.
	lbs.	ft. ins.		inches (a) maximum (b) minimum (c) mean	right eye (i) left eye (ii) colour vision									
23.	145	5.6	Good	41 1/2 35 1/2 36	6/6 6/6 C.N. 154-105	Normal	Normal	Normal	Normal	Normal	Normal	Normal	No defect	Normal

## CERTIFICATE TO BE SIGNED BY THE 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.

Michel Simard  
Signature of Candidate

When a Candidate is passed, notwithstanding a slight defect or disability, the following Certificate is to be filled up

This Candidate is the subject of fit

~~not considered of sufficient importance to cause his rejection, he being desirable in other respects.~~

W. H. Brown M.D.  
Examining Medical Officer  
(Rank) Sup. Lieut. R.C.N.R.

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

D OF D 20-9-43

D.D.

SIMARD Joseph-Hidola Michel		A.B.	V-3411	FILE No.
SURNAME (IN BLOCK LETTERS)	CHRISTIAN NAMES	REG. No.	RANK ON DISCHARGE	C.A.S.F. UNIT

WAR SERVICEBADGE

CLASS)

No. Nil

DATE DESPATCHED:

ADDRESS:

CAMPAIGN MEDALS	REGISTRATION NUMBER AND DATE DESPATCHED
1939-45 Star	
Atlantic Star	
C.V.S.M. & Clasp	
War Medal	
	5422.

(THE REVERSE TO BE USED FOR ESTATE PURPOSES)

MEDALS AND MEMORIALS—DECEASED PERSONNEL

RCNVR March 44 "ST.CROIX"

REGISTRATION No. DATE OF DESPATCH

(1) MEDALS  
PERSON

ENTITLED TO Mrs. Stella Simard - Widow

ADDRESS: ~~24 Mont Carmel, Quebec, Que.~~ 5850 Christophe Colombe St.,  
MONTREAL, Que.

(1)

(2) MEMORIAL CROSS

WIDOW Mrs. Stella Simard

ADDRESS: 24 Mont Carmel, Quebec, Que.  
(Issued 12-1-44)

MEMORIAL BAR

(2) DATE DESP

REGN. NO

478

(3) MEMORIAL CROSS

MOTHER Mrs. Raoul Simard

ADDRESS: 24 Mont Carmel  
Quebec, P.Q.

(3) 15-1-44

V3411 OFFICIAL NUMBER NAME **SIMARD** Joseph Hidola Michel (Surname) (Given Names) **P.L.B.** OFFICIAL NUMBER V3411

Ship or Establishment	Rating	From			Remarks	Character	Efficiency	Date		
		Day	Month	Year				Day	Month	Year
Quebec Div. Str.	Ord. Snn.	22	9	39						
Duty Div. Hdqtrs.	"	15	1	40						
Stadacona	"	24	12	40		V.G.	Sat.	31	12	41
"	A/Able Snn.	15	1	41		V.G.	Sat.	31	12	42
Beaver	"	13	3	41		V.G.		20	9	43
Stadacona	"	12	3	41	from S.C.					
Suderoy VI	"	19	3	41						
Stadacona	"	8	5	41						
Skeena	"	2	6	41						
"	Able Snn.	12	8	41						
Stadacona	"	29	1	43						
Cornwallis	"	1	2	43	DRD H-575					
Stadacona	"	27	4	43	DRD H-1300					
St Croix	"	24	5	43	DRD H-1539					
DISCHARGED	"	20	9	43	Missing on Active Service Per Casualty List.					

Non-Sub. Rating	Qualified			Re-Qualified		
	Day	Month	Year	Day	Month	Year
S.T.	26	4	43	(24284)		

GENERAL REMARKS  
 Canadian Memorial Cross:  
 WIFE: Mrs Stella Simard,  
 24 Mont Carmel,  
 Quebec, Que.  
 MOTHER: Mrs Raoul SIMARD,  
 24 Mont Carmel,  
 Quebec, Que.

DATE OF BIRTH			PLACE	CIVIL	OCCU.	REL.	ED.	PERM.	RESIDENCE	PREV.	ENL.	RANK OR RATE ON ENLISTMENT				
DAY	MO.	YR.	BIRTH	MAIN	SUB	GRD.		R	CTY	TOWN	SER.	DIV.	A	BR	RANK	
12	9	16	12	XXX	0	10	X	2	54	09	0	12	0	08	95	
ENLIST DATE			ACT. SERV. DATE	STR.	ESTAS.	RANK OR RATE										
DAY	MO.	YR.	DE	NR.	YR.	ESTAS.	A	BR	RANK							
23	09	39	15	01	40				0380	0	08	94				
SERV. NON-SUB											ER		CODED		CHECKED	
BY																
12	08	41	09	26	00	20	20-09-43									

V3411

OFFICIAL NUMBER

FILE NUMBER

113-S-513

OFFICIAL NUMBER

V3411

NAME **SIMARD** (Surname) **Joseph Hidola Michel** (Given Names) DATE OF BIRTH **12th September, 1916.**

PLACE OF BIRTH **Murray Bay, Quebec.** OCCUPATION **Student.**

RELIGION **Roman Catholic.** EDUCATION

RESIDENCE AT TIME OF ENLISTMENT: Street and No. **112 Grande Allee** Town **Quebec** Province, etc. **Que.**

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	
22	9	39	H.O.	5' 7	Fair	Blue	Fair	Scar on right knee.				

NEXT OF KIN RELATIONSHIP (in pencil) **Wife** NAME (in pencil) **Mrs Stella Simard**

ADDRESS (in pencil): Street and No. **24 Mont Carmel** Town **Quebec** Province, etc. **Quebec**

MEDALS, CLASPS, HURT CERTIFICATES, PRIZE MONEY				EXAMINATIONS, CERTIFICATES, ETC.							
Date (in figures)			Particulars	Date (in figures)			Particulars	Date (in figures)			Particulars
Day	Month	Year		Day	Month	Year		Day	Month	Year	
				7	3	41	Marked "Tr".				

BADGES, G.C. OR G.S.				
Date (in figures)			1st, 2nd or 3rd G.C. or G.S.	Granted Deprived Restored
Day	Month	Year		
15	1	43	1st. GCB.	Awarded.

BRIEF PARTICULARS OF WARRANT OR C.M. PUNISHMENTS AND C.P. CHARGES									
SHIP OR ESTABLISHMENT	Wt. No.	Date (in figures)			BRIEF PARTICULARS OF OFFENCE	PUNISHMENT			
		Day	Month	Year					

**FILM NO. 49B-5720-2**

**DATE**

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

O.H.F. Received.

**W.S.G. APPLICATION 10255**

SECOND CLASS FOR CONDUCT

From To

# SERVICE CERTIFICATE

N. V. No. 17  
3M-937  
N.S. 815-11-17

56

OF

Name in full Joseph Hidola Michel SIMARD Company QUEBEC.

## ROYAL CANADIAN NAVAL VOLUNTEER RESERVE

Training Headquarters HALIFAX Official Number V3411.

Date of Birth 12th September, 1916.

Place of Birth MURRAY BAY, Charlesvoix, Que.

Usual Place of Residence 112 Grande Allée, Quebec, Que

Trade brought up to Student.

Name and Address of next of Kin (Wife) Stella, 24 Mont Carmel St, Quebec City

Religious Denomination R.C.

Can Swim \_\_\_\_\_

**O.H.F.**

18/11/41

### PARTICULARS OF SERVICE

DATE OF ACTUAL VOLUNTEERING	DATE OF ENROLMENT	PERIOD VOLUNTEERED FOR	RATING ON ENROLMENT	MEDALS, DECORATIONS, ETC.	
				DATE RECEIVED	NATURE OF DECORATION
19 Sep/39.	22 Sep/39.	3 yrs.	Ord. Smn.		

### PERSONAL DESCRIPTION

	HEIGHT		COMPLEXION	HAIR	EYES	MARKS, WOUNDS, SCARS
	FEET	INCHES				
On Entry	5	7	Fair	Fair	Blue.	Scar* on right knee.
On attaining 28 years						
Further Description if necessary						











APPLICATION FORM  
 WAR MEDAL, C.V.S.M. and CLASP.  
 SERVICE MEDAL (1915).

OFF. NO. *V. 3411* ADDRESS .....

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

VERIFIED BY *J. Lebert...*

# TORPEDO HISTORY SHEET

(See K.R. & A.I., Article 609)

To be attached to the rating's Service Certificate until final discharge from the Service, when this History Sheet is to be given to the man, together with his Service Certificate.

Surname Jimard Christian Names M. Port Division } Official Number } V-3411

## Record of Torpedo Examinations:

Information is to be inserted when a rating qualifies in torpedo for A.B. and as regards examinations for acting as well as confirmed torpedo ratings.  
 Marks obtained in each subject are to be shown as a fraction of the possible total, thus  $\frac{115}{150}$

Date	Ship or School	Rating held	Torpedo Rating examined for	Q., R., or F.	Examination Marks												REMARKS	Captain's Initials	
					School	Whitehead	Mining and P.V.s	High Power	Low Power	Gyro Compass	Torpedo Control	Seaman's Electrical	Stores and Accounts			Total Percentage			
1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	
26-4-43	Cornewallis	A.B.	S.T.	Q		65/100	33/50					97/150					65.0%		W.M.J.

4  
NAVY

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

DECEASED MEMBER'S NAME

**Joseph Hidola Michel SIMARD**  
(CHRISTIAN NAMES) (SURNAME)

REGISTER NO. 10255  
 FILE NO. NSV-3411  
 DATE 27 June/45  
 SERVICE NO. V-3411  
 FINAL RANK OR RATING A.B.  
 DATE OF DISCHARGE 20 Sep/43

PAYEE **Mrs. Stella Simard,**  
 ADDRESS **5850 Christophe Colomb,  
 Montreal, Que.**

DATE OF TERMINATION OF OVERSEAS SERVICE **20 Sep/43**

**A. TOTAL QUALIFYING SERVICE**

NO. OF DAYS **1345** EQUAL TO **44** COMPLETE PERIODS AT \$7.50 **\$ 330.00**

**B. QUALIFYING OVERSEAS SERVICE**

NO. OF DAYS **776** LESS **25** INELIGIBLE DAYS, EQUAL TO **751** DAYS @ 25c. PER DAY **\$ 187.75**

**C. SUPPLEMENT FOR OVERSEAS SERVICE**

DAILY RATES AT DISCHARGE

PAY	\$ 1.85		
SUBSISTENCE OR LODGING AND PROVISION ALLOWANCE	\$ 1.45		
ADDITIONAL PAY			
O.C.B.	\$ .05		
S.T.	\$ .10		
H.L.M.	\$ .25		
DEPENDENTS' ALLOWANCE 1/30 OF \$ <b>35.00</b>	\$ 1.17		
TOTAL	\$ 4.87	X 7 = \$	<b>34.09</b>
NO. OF DAYS <b>776</b>		X \$	<b>34.09</b>
			<b>144.56</b>

**D. WAR SERVICE GRATUITY**

**662.31**

**E. DEDUCTIONS**

OVERPAYMENT OF PAY AND ALLOWANCES \$  
 DEPENDENTS' ALLOWANCE AND ASSIGNED PAY \$  
 OTHER DEDUCTIONS \$ **NIL**

**F. TOTAL AMOUNT PAYABLE**

**662.31**

**G. YOUR PORTION OF GRATUITY IS—**

DEPENDENTS' ALLOWANCE IN ISSUE TO YOU \$ \_\_\_\_\_ OF \$ \_\_\_\_\_ - \$ **662.31**  
 TOTAL DEPENDENTS' ALLOWANCE IN ISSUE \$ \_\_\_\_\_

*Cheque 36013 - July 10/45*

**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.

TREASURY	
PREPARED BY <b>EP</b>	CHECKED BY <i>[Signature]</i>
	DATE <b>27-45</b>

**For Dir. Naval Pay. Accting.**

STATEMENT OF WAR SERVICE GRATUITY - NAVY

*Sup*

Released  
 Member's Name Joseph Vidola Michel SIMARD  
 (Christian Names) (Surname)

Pay to Mrs Stella SIMARD  
 Address 5850. Christopher Colomb  
Montreal. P.Q.

Register No. 10255  
 File No. V-3411  
 Date 18-6-45  
 Service No. V-3411  
 Final Rank or Rating A. B.

Date of termination of overseas service 20 Sep 43 Date of Discharge 20 Sep 43

A. TOTAL QUALIFYING SERVICE  
 No. of days 1345 equal to 44 complete periods at \$7.50 330.00

B. QUALIFYING OVERSEAS SERVICE  
 No. of days 776 less 25 ineligible days equal to 751 days @ 25¢ per day 187.75

C. SUPPLEMENT FOR OVERSEAS SERVICE  
 DAILY RATES AT DISCHARGE

Pay	\$	1.85	
Subsistence or Lodging and Provision Allowance	\$	1.45	
Additional Pay			
G.C.B.	\$	0.5	
S.T.	\$	1.0	
H.L.M.	\$	2.5	
Dependents' Allowance 1/30 of \$	35.00		
		<u>1.17</u>	<u>34.09</u>
Total		<u>4.85</u>	<u>33.95</u>
		<u>4.87</u>	
No. of days	<u>776</u>	x \$	<u>33.95</u>
	<u>183</u>		<u>34.09</u>

144.56  
143.96

D. WAR SERVICE GRATUITY 662.31

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

F. TOTAL AMOUNT PAYABLE 662.31

G. YOUR PORTION OF GRATUITY IS  
 Dependents' Allowance in issue to you \$ \_\_\_\_\_ of \$ = \$ 662.31  
 Total Dependents' Allowance in issue \$ \_\_\_\_\_

CERTIFICATE: I certify that the amount has been correctly computed and is payable in accordance with the terms of the War Service Grants Act, 1944 and the regulations issued thereunder.

Prepared by	Checked by	Treasury	
		Checked by	Date

\_\_\_\_\_  
Service Representative

D.N.P.A. CHECK

1	<u>[Signature]</u>
2	<u>[Signature]</u>
3	<u>[Signature]</u>
4	<u>[Signature]</u>
5	<u>[Signature]</u>

PARTICULARS OF DEAD OR MISSING PERSONNEL  
WITH REGARD TO PAYMENT OF WAR SERVICE GRATUITY

Name of Deceased Member Joseph Adola M. SIMARD Rank or Rating A-13 O. No. V3411

1. Dependents' Allowance and Assigned Pay in force at date of death:  
D.A. \$ 35.00 ✓ M<sup>rs</sup> Stella SIMARD wife  
A.P. \$ 30.00 ✓ 24 Mont Carmel  
Quebec P.Q.  
D.A. -  
A.P. -

2. Pension awarded or being awarded to: wife as above

3. War Service Gratuity Application(s) received from: M<sup>rs</sup> Stella SIMARD wife  
5850. Christophe Colomb  
Montreal P.Q.

In accordance with the War Service Grants Act, 1944 (Part I, Clause 4) and Directive dated 16th December, 1944 issued under authority of the Minister of Veterans Affairs, application(s) for War Service Gratuity in respect of the service of the above named deceased member may be dealt with as follows:

(X) To be paid to: M<sup>rs</sup> Stella Simard wife  
- and -  
In the full proportion of: 1

to: In the proportion of: 1

( ) To be referred to the Dependents' Allowance Board for decision as to dependency within the spirit and intent of the War Service Grants Act, 1944, observing this application(s) is classed under:

Group "B" (ii)  
Group "C" of the above mentioned Directive.

Date 22 June '45

Speades  
for D.N.P.A. (G) DNJ

Montreal, Que.  
June 13, 1945

047504

Secretary, Naval Board.  
Naval Service Headquarters,  
Ottawa, Ont.

Dear sir:

In answer to your letter received the 13th. of  
this month inviting an application for the war service  
gratuity.

It is my desire that the payments of the  
gratuity on behalf of my late husband Joseph Hidole  
Michele Simard Able Smn. Official Number V-3411 be made  
to me as I was his dependent at the time of his death.

I wish to advise you that my present address  
is 5850 Christophe Colomb, Montreal.

Yours truly,

*Mrs Stella Simard*

NAVAL PERSONNEL RECORDS
10255
JUN 15 1945
WAR SERVICE GRATUITY SECTION



W.S.G. Application No. 102554

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

FILE NO. N.S. V-3411

"WAR SERVICE GRATUITY"

COMPUTATION OF SERVICE

<u>SIMARD</u> <sup>^</sup>	<u>Joseph Hidala Michel</u> <sup>^</sup>	<u>V-3411</u> <sup>^</sup>	<u>A.B.</u> <sup>^</sup>
SURNAME	CHRISTIAN NAMES IN FULL	OFFICIAL NUMBER	RANK OR RATING ON DISCHARGE

CAUSE OF DISCHARGE: Dead (St. Croix)

Applicant's widow in Receipt of Pension

15 Jan '40 - 14 Jan '44	1461
Less 20 Sep '43 -	10
Oct	31
Nov	30
Dec	31
Jan	14
	<u>1345</u>

TOTAL SERVICE

Date of Active Service 15 Jan '40<sup>^</sup>  
 Date of Discharge 20 Sep '43<sup>^</sup>  
 Total No. of Days 1345<sup>^</sup>

# Less non qualifying service NIL

Total Days 1345<sup>^</sup>

OVERSEAS SERVICE

% Total No. of Days 776<sup>^</sup>

# Less non qualifying service NIL

Total Days 776<sup>^</sup>

Record of Service in other Forces (per Naval Records)

Branch of Service \_\_\_\_\_

Date of Active Service \_\_\_\_\_

Date of Discharge \_\_\_\_\_

# & % Overleaf \_\_\_\_\_

Computed By [Signature]

Checked By [Signature]

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

JUN 16 1945

DATE: \_\_\_\_\_

FOR CIVILIAN SERVICE

Reveron

NON QUALIFYING SERVICE

(*) Date	Reason	No. of Days
"	"	"
"	"	"
"	"	"
"	"	"
"	"	"
"	"	"
"	"	"
		<u>Total days</u>

(%)  
OVERSEAS SERVICE:

<u>Where Serving</u>	<u>From</u>	<u>To</u>	<u>No. of Days</u>
<i>Bassett</i>			
<i>Suderoy VI</i>	<i>19 mch '41</i>	<i>7 may '41</i>	<i>504</i>
<i>Skema</i>	<i>2 June '41</i>	<i>28 Jan '43</i>	<i>6064</i>
<i>St. Croix</i>	<i>24 May '43</i>	<i>20 Sep '43</i>	<i>1201</i>
			<u><i>7764</i></u>

<i>Suderoy VI</i>	<i>Skema</i>	<i>St. Croix</i>
<i>13</i>	<i>730</i>	<i>8</i>
<i>30</i>	<i>3 Less 28 Jan</i>	<i>30</i>
<i>7</i>	<i>28</i>	<i>31</i>
<hr/>	<i>31</i>	<i>31</i>
<i>50</i>	<i>30</i>	<i>20</i>
	<i>31</i>	<hr/>
	<i>1</i>	<i>120</i>
	<hr/>	
	<i>606</i>	

**DISTRIBUTION OF SERVICE ESTATES**

**F L**

Estates Form "P. 4"

R.C.N.V.R.

Name: SIMARD Surname Joseph H.M. Christian Names No.: 1-3411

Rank A.B. Unit H.M.C.S. 1st BATT Date of Death 20-9-15

AMOUNT

L. P.C. .... \$50.63

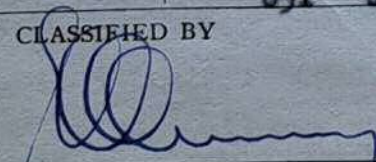
Other Credits.....

Total..... 50.63

Date: February 17, 1916

SHARE	RELATIONSHIP	NAME AND ADDRESS	AMOUNT
part	Creditor	99125 Bond Clothes Shop, 430-434 Barrington St., Halifax, N.S.	12.20
part	Widow	99126 Mrs. Stella Simard, 5850 Christopher Columbus St., Montreal, P.Q.  (in community of Property)	19.22
part	Mother	99127 Mrs. Lucille Simard, 24 Mont Carmel, Quebec, P.Q.  (As next of kin entitled)	19.21

*BW*

AUTHORITY					
H.Q. F.E. No.	VOTE	PRI	H.Q. SUB.	OBJ.	AMOUNT
9999	631	00	50	000	50.63
CLASSIFIED BY 			EXAMINED BY ORIGINAL SIGNED BY <b>E. G. COLLYER</b> For Chief Treasury Officer		

DISTRIBUTION APPROVED AND AUTHORIZED

Original signed by  
**L. M. FIRTH**

(L. M. FIRTH) Lt.-Colonel  
Administrator of Estates

AUDITED FOR PAYMENT

ORIGINAL SIGNED BY  
**E. G. COLLYER**

For Chief Treasury Officer

62

Six Copies to be rendered to Naval Service Headquarters

REPORT OF THE DEATH OF AN OFFICER, MAN, OR BOY

H.M.C.S. AVALON (ST. CROIX) at St. John's, Nfld.

Name (Christian names in full) Joseph Hidola Michel SIMARD

Rank or Rating Able Seaman Official No. V-3411 P.C.M.R.  
If unknown date of first entry)

Place of Birth Murray Bay, Que. Date of birth 12th. Sep. 1916

Occupation in Civil Life Student Religion R.C.

Number of Years Service in the Navy (Long Service R.C.N. or mobilized service in the case of R.C.N. (Temp.) Reserve ratings)  
3 YEARS 249 DAYS

Date of Death 20th. Sep. 1943 Place of Death at sea

Cause of Death Loss of H.M.C. SHIP

Nearest known) Name Mrs. Stella SIMARD Relationship wife  
relative or ) Address 24 Mont Carmel St., Quebec, Que.  
friend )

Date on which the above was informed by ship SEP 27 1943

Date on which death was registered with local officials N.E.  
In the case of Imperial Service men whether Active Service Pensioner or Reserve, date on which the prescribed return was rendered to the Registrar General in London, Edinburgh or Dublin according to Nationality.

Place of Burial No burial Date of Burial Not applicable  
(If known) (If known)

Location, Number etc, of Grave Not applicable  
(If known)

Undertaker employed Not applicable  
(If any)

If borne for discipline only, date D.S.Q. or invalidated Not applicable

*S.W. Davis*

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

The Secretary, Naval Board,  
Ottawa, Canada.

.. 14th. October.....1943 .

In all cases this form is to be sent in addition to the Report by Telegraph required by the Regulations

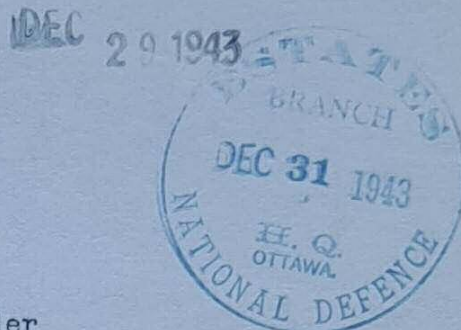
Distribution: File, Imp, W.G.Com, Dom, Stat, Register.

C.N.S. 1121



Department of National Defence  
Naval Service

Ottawa, Canada.



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 &amp; CAUSE of DEATH</u>	<u>NEXT OF KIN</u>
SIMARD, Joseph Hidola Michel Able Seaman, V-3411, R.C.N.V.R.	Missing, presumed dead to date 20 September, 1943. He was serving in H.M.C.S. "St. Croix", which was lost while on Convoy duty in the Atlantic, due to enemy action.	Wife: Mrs. Stella Simard, 24 Mont Carmel, QUEBEC, Que.

ALLOTMENTS IN FORCE

<u>In favor of:</u>	<u>Amount</u>	<u>Initials</u>
Wife. (1) Mrs. Stella Simard 25 Mont Carmel Que.	D.A. A.P. 35. 30. - 65.00	<i>Mal</i>
(2) Manufactures Life Insurance Co. 126 St. Peter St. Halifax N.S.	- 3.00	
(3) Bond Clothes Shop Harrington St. Halifax N.S.	- 4.00	

Allotments Stopped last Payment 30th. September 1943

WILL: No Record

Yours truly,

for  
SECRETARY, NAVAL BOARD.

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

# DEPENDENTS ALLOWANCE BOARD

## DECISION OF THE BOARD IN RESPECT OF THE APPLICATION FOR DEPENDENTS ALLOWANCE SUBMITTED BY—

1/19-5-5/13  
C-1

Official No. V-3411 <sup>PA</sup> Rank or Rating Able Seaman

SIMARD  
(Surname)

Joseph Hidola Michel  
(Christian names)

Military Unit.....  
Air Force Establishment or Station.....  
Naval Ship or Establishment.....

### DECISION OF THE BOARD

~~xxxxx xxxxxx~~ ~~xxxxxxxxxxxx~~ ~~xxxxxxxxxxxx~~

Casualty Missing Date September 20/43 Authority Off. i/c Naval Personnel Records folio 2

Monthly payments to be made for a period of six months from Oct. 1/43 to Mar. 31/44

A sum equal to Dependents' Allowance in issue at date of casualty ... \$ 35.P.C.L.B.

Plus Assigned Pay of ..... 15 days pay ..... \$ 30.P.C.L.B.

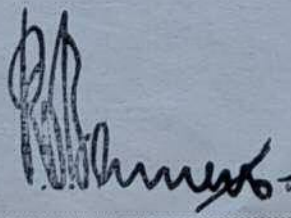
Total ... (including Cost of Living Bonus) ..... \$ 65. P.C.L.B.

or

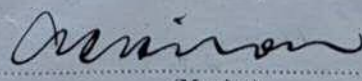
Award made to conform with Pension Rates which in this case are higher vide Article 113 (a) (3) .....

If at the end of six months there is no change in status, continue payments at the Pension rate of \$ 60.00 per month and ~~refer~~ <sup>refer</sup> ~~return file~~ to the Board when there is a change in status.

Full name principal Dependent Mrs. Stella Simard,  
Street Address 24 Mont Carmel,  
Town or City Quebec, Quebec.

  
.....  
(Chairman)

Reviewer K. Bearsdley

  
.....  
(Member)

Date January 6th, 1944.

.....  
(Member)

*D. Pender*

*Noted - EJ*

File No. N.S. 113-S-513 PERS. (N)

DEPARTMENT OF NATIONAL DEFENCE  
- Naval Service -

WAR MEMORIAL CROSS

P.A.  
N.C.R.

Issued to:-

Wife:-

Mother:-

Mrs. Raoul Simard,  
24 Mont Carmel,  
Quebec City, Que.

Date forwarded: JAN 15 1944

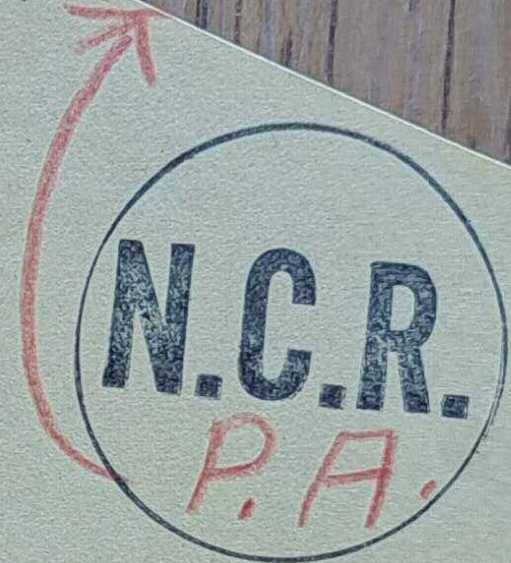
Registered Mail No:-

03315'

File No. N.S. ....

DEPARTMENT OF NATIONAL DEFENCE  
- Naval Service -

WAR MEMORIAL CROSS



Issued to:-

Wife:-

Mrs. Stella Simard,  
24 Mont Carmel,  
QUEBEC, Que.

Mother:-

Date forwarded:- JAN 12 1944

Registered Mail No.- 02735





5-2  
P. A.  
TREASURY OFFICE  
Date 3-1-44  
Initial msa

FORM B.

FILE: N.S. 113-S-513 PERS. (N)

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

DEC 29 1943  
(Date.)

Sir: The following casualty has been reported -

NAME RAISE or RATING NAVAL NO.  
SIMARD, Joseph Hidola Michel Able Seaman V-3411, R.C.N.V.R.  
DATE OF ENLISTMENT - 22 September, 1939. Active Service 15 January, 1940.  
DATE OF DISCHARGE - 20 September, 1943.

HOSPITAL -  
(If discharged in hospital under jurisdiction of D.P. & M.E.)

SERVICE - Canada & 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. Missing, presumed dead. He was serving in HMCS "St. Croix", which was lost while on Convoy duty in the Atlantic, due to 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 Wife NAME Mrs. Stella Simard,  
ADDRESS 24 Mont Carmel, QUEBEC, Que.

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

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

REMARKS: .....

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

<u>Names of Dependents</u>	<u>Relationship</u>	<u>Maiden name of wife</u>	<u>Date of marriage and/or date of birth of children</u>
----------------------------	---------------------	----------------------------	--

Mrs. Stella Simard, wife.

	<u>D. A.</u>	<u>A. P.</u>	<u>TOTAL</u>
<u>Monthly Rate:</u>	35.00	30.00	65.00

To whom Paid: Mrs. Stella Simard ADDRESS 24 Mont Carmel, Quebec, P.Q.

Date of Enlistment: see other side

Date of Discharge: see other side

Inclusive date to which D.A. and/or A.P. was Paid:

The final deduction of Assigned Pay for 65.00 has been made for the period from 1st to 30th of Sept. 1943

Remarks:

Computed by Ma.....

Checked by Her.....

for Alec. Boswell  
Chief Treasury Officer,  
DEPARTMENT OF NATIONAL DEFENCE,  
(Naval Service.)

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

REGISTERED

65

LA/CM

AIR MAIL

N.S.113-S-513. PERS.(N)

DEC 29 1943

Dear Mrs. Simard:

Further to my letter of the 27th of September, 1943, in view of the length of time that has elapsed since your husband, Joseph Hidola Michel Simard, Able Seaman, Official Number V-3411, Royal Canadian Naval Volunteer Reserve, was reported "missing" after the sinking of H.M.C.S. "ST.CROIX", 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 20th of September, 1943.

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

Yours sincerely,



SECRETARY, NAVAL BOARD.

LETTER dispatched by  
PERSONNEL NAVAL

DEC 29 1943

Mrs. Stella Simard,  
24 Mont Carmel,  
QUEBEC, Quebec.

*H.B.M.*  
H. B. MONEY  
PAY LIEN. CDR.  
OFFICER IN CHARGE  
NAVAL PERSONNEL RECORDS

61  
DEC 29 1943

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 &amp; CAUSE of DEATH</u>	<u>NEXT OF KIN</u>
SIMARD, Joseph Hidola Michel Able Seaman, V-3411, R.C.N.V.R.	Missing, presumed dead to date 20 September, 1943. He was serving in H.M.C.S. "St. Croix", which was lost while on Convoy duty in the Atlantic, due to enemy action.	Wife: Mrs. Stella Simard, 24 Mont Carmel, QUEBEC, Que.

ALLOTMENTS IN FORCE

<u>In favor of:</u>	<u>Amount</u>	<u>Initials</u>
Wife. (1) Mrs. Stella Simard 25 Mont Carmel Que.	D.A. A.P. 35. 30. - 65.00	<i>Mac</i>
(2) Manufacturers Life Insurance Co. 126 St. Peter St. Halifax N.S.	- 3.00	
(3) Bond Clothes Shop Barrington St. Halifax N.S.	- 4.00	

Allotments Stopped last Payment 30th. September 1943

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.



LA/CM

48

113-S-513, PERS.(N)

16 October, 1943.

Dear Sir:

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

Name ... **SIMARD** ..... **Joseph Hisola Michel** .....  
(Surname) (Christian Names)

Rank/Rating ..... **Able Seaman** .....

Official No. .... **V-3411** . RCNVR .....

Nature of Casualty **"Missing" on war service after sinking of HMCS "ST. CROIX". Official presumption of death with date**

**Date of Casualty will in all probability be made 3 months from date of sinking of this ship.**

Address at time of Enlistment .. **112 Grande Allee** .....

..... **Quebec, Que.** .....

Marital Status at time of Enlistment .....

Occupation ..... **Student** .....

Name & Address of Next of Kin **Wife: Mrs. Stella J. Simard** .

..... **24 Mont. Carmel, Quebec, Que.** .....

Yours truly,

*H.B. Money*

for

SECRETARY, NAVAL BOARD.

*W.D.* *E.M.C.*

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

AIR MAIL

N.S. 113-S-513 (Pers N)

42

27 September, 1943.

Dear Mrs. Simard,

I deeply regret that I must confirm the telegram of the 27th of September, 1943, from the Minister of National Defence for Naval Services informing you that your husband, Joseph Hidola Michel Simard, Able Seaman, Royal Canadian Naval Volunteer Reserve, Official Number V-3411, is missing on war service.

According to the report received, your husband is listed as missing, due to enemy action, while serving on Convoy duty in the Atlantic. For reasons of security further details of this incident of war cannot be released at this time.

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

While your husband is listed as missing and virtually no hope can be held out for his having survived, Canadian Naval Authorities are unable to make an official presumption of death until a period of not less than three months has elapsed. If further information has not been received at that time, it is probable that official certification of death will then be made and you will be informed accordingly.

Please allow me to express sincere sympathy with you 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 husband has helped to maintain.

Yours sincerely,  
LETTER PERSONNEL NAVAL  
27 1943  
SECRETARY, NAVAL BOARD.

Mrs. Stella Simard,  
24 Mont Carmel,  
QUEBEC, Quebec.

J.H. Money  
NAVAL PERSONNEL RECORDS

A. 479  
"K"  
ORIGINAL

P 68789

NATIONAL DEFENCE  
JUN - 6 1941  
N.S.H.Q. File No. 1134051  
CANADA

# DECLARATION OF ALLOTMENT

13

List and Number in Ledger	ALLOTOR	Rank or Rating	Official No.	Daily Rate of Pay
"Stadacona" 5-2-2299 Div 1 Sbc 3	Surname SIMARD Christian Names Michel	O/Smn RCNVR	V 3411	\$ 1.50 .75

## Section A ALLOTMENT NOW DECLARED

FULL NAME OF ALLOTTEE	Relationship	ADDRESS	Rate per Month to be charged on ledger	Month to commence. Payable on last working day
Surname SIMARD Christian Names Mrs. Stella	WIFE	21 Jennings St, Halifax, NS	\$ 46.00	NEW JUNE

## Section B DISPOSAL OF EXISTING ALLOTMENTS

(See Note 1 below)

The following allotments are in force:—

Rate	NAME OF ALLOTTEE	ADDRESS	These allotments are to be disposed of as indicated below. (See Note 2):—
\$ 4.00	Bond Clothes Shop	434 Barrington Sts Halifax, NS	TO BE CONTINUED
\$ 3.00	Manufacturer's Life Ins	Quebec City, Que	TO BE CONTINUED
\$ 5.00	Mrs. A. H. Simard	Baie St. Paul, Que	NEW JUNE ALLOTMENT

NOTE 1:—If there be no existing Allotment, the word "NIL" should be written across Section B.  
NOTE 2:—Write "Increased or reduced as Section A"; "To be stopped (charged to.....)"; "To be continued," etc.

Allotter's Signature authorizing charges..... *Michel Simard*  
O/Smn Rank or Rating

ENTERED IN FAIR LEDGER  
*[Signature]*

ENTERED IN ROUGH LEDGER  
*[Signature]*

The allotment now declared has been duly entered in the Fair and Rough Ledgers with effect from the appropriate date. The reduction or transfer has been duly approved by the Commanding Officer and the reasons for the alteration are:—

Assigned Pay to Wives	Object No. 111 \$	22.50
Assigned Pay to other Dependents	113	
Marriage Allowance	116	
Dependents Allowance	119	23.25
Other Allotments	122	.25
Total		\$ 46.00

Paymaster Sub-Lieutenant-RCNVR for Officer *[Signature]*

H.M.C.S. "Stadacona"  
Forwarded..... *3rd June '41*

THE NAVAL SECRETARY,  
Department of National Defence,  
(Naval Service)  
Ottawa, Ont.

QUESTIONNAIRE FOR CANDIDATES  
FOR ENTRY IN THE ROYAL CANADIAN NAVAL VOLUNTEER RESERVE

DEPT  
NATIONAL DEFENCE  
SEP 25 1939  
N.S. 113-10813  
CANADA

Name (in full) Joseph Hidola Michel Simard  
Date and Place of Birth 12 September 1916 Murray Bay  
(Birth certificate, declaration by parents or affidavit as to date of birth must be attached)  
Permanent Place of Residence 112 Grande Allée 19468  
Nearest Town to Residence (if living in country) \_\_\_\_\_  
Are you a British Subject? Yes  
Are you single, married or a widower? single  
In what capacity do you wish to enrol? Ordinary Seaman  
(See standards of qualifications in attached pamphlet)

Present occupation or trade student  
(Attach any testimonials or recommendations)

Do you belong to any Naval, Military, Reserve or Territorial Force?  
No

Have you ever served with such forces? Give dates and details  
No

Have you ever been discharged from any of H.M. Forces as medically unfit?  
No

Have you ever offered to serve in any of H.M. Forces and been rejected?  
No

What is your weight? 152 What is your height? 5' 7"

What is your chest measurement (not inflated)? 39

Are you free from all physical defects or malformation, and not subject to fits?  
Yes

Are you willing to be vaccinated or re-vaccinated and inoculated as considered necessary by the appropriate authorities?  
Yes

I hereby declare that the above answers are true in every respect.

Michel Simard Signature  
19 September 1939 Date  
112 Grande Allée Address

[Signature]  
(Witness to Signature)

This is to certify that I have personally seen the birth certificate of this applicant, or a sworn declaration as to his date of birth.

I certify his date of birth, according to legal documentary evidence, to be Sept 12<sup>th</sup> 1916

Signed \_\_\_\_\_  
Company Commanding Officer