V38568
HOFFMAN
MARTIN JOHN

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

P.I.R.

V38568. OFFICIAL NUMBER | NAME HOFFMAN. (Surname) Martin John. (Given Names) | OFFICIAL NUMBER V38568.

Ship or Establishment	Rating	From Day	From Month	From Year	Remarks	Character	Efficiency	Date Day	Date Month	Date Year	Non-Sub. Rating	Qualified Day	Qualified Month	Qualified Year	Re-Qualified Day	Re-Qualified Month	Re-Qualified Year
H.M.C.S. "HUNTER"	Ordnance																
	Artificer.	3	6	42.	Div. Str. Windsor.												
" "	O.A. 5th cl.	3	6	42	Active Service	V.G.	Sat.	7	5	44							
" Cornwallis	" "	8	6	42	D.L. 9/9/42												
" "	A/O.A. 4th cl.	24	6	42	(249A/2440)												
" Stadacona	" "	13	2	43	D.R.D. H-668												
	O.A. 4/cl.	24	6	43	Confirmed. 249A/10663												
Valleyfield	"	26	2	44	DRD #84 p-4												
DISCHARGED	"	7	5	44	"Killed in Action. Casualty List.												

GENERAL REMARKS

Canadian Memorial Cross awarded to
wife: Mrs. Jane Katy Hoffman,
1491 Aubin Road, Windsor, Ont.
Mother: Mrs. Alex Hoffman,
R.R. #1, ROSELAND, Ont.
to date June 14th, 1944.

DATE OF BIRTH DY.	MO.	YR.	PLACE OF BIRTH	CIVIL OCCU. MAIN	SUB	RELIGION	ED	PERM. RESIDENCE P.	CTY.	TOWN	PREV. SERV.	ENL. DIV.	RANK OR RATE ON ENLISTMENT A	BR	RANK
24	6	21	70	333	0	10	5	11	12	12	0	11	0	36	96

ENLIST. DATE DY.	MO.	YR.	ACT. SERV. DATE DY.	MO.	YR.	STR. CAT.		ACT. SERV. DATE DY.	MO.	YR.	SHIP OR ESTAB.	RANK OR RATE A	BR.	RANK
03	06	42	03	06	42						1220	0	36	95

SENIORITY DY	MO.	YR.	STR. CAT.	NON-SUB A	B	M DY.		CODED	CHECKED
24	6	43	13	00	00	20	02-05		

V38568. OFFICIAL NUMBER | FILE NUMBER N.S. 113-H-235. | OFFICIAL NUMBER V38568.

NAME HOFFMAN. (Surname) Martin John. (Given Names) DATE OF BIRTH 24th June, 1921.

PLACE OF BIRTH Tes, Hungary. OCCUPATION Tool and Die Maker.

RELIGION Roman Catholic. EDUCATION Four years Vocational School in Machine Shop Practice.

RESIDENCE AT TIME OF ENLISTMENT: Street and No. 1512 Westcott Road, Town Sandwich East, Province, etc. Ontario.

Engagements				Description					Previous Service			
Date (in figures) Day	Month	Year	Period	Height	Hair	Eyes	Complexion	Marks or Scars	Served in	Rank or Rating	Dates From	To
3	6	42.	H.O.	5' 3½"	Brown	Blue	Fair	Scar on right thumb.				

NEXT OF KIN RELATIONSHIP (in pencil) Wife NAME (in pencil) Mrs Jane Katy. Hoffman

ADDRESS (in pencil): Street and No. 1491 Aubin Road, Town Windsor Province, etc. Ontario

28-12-43

Medals, Clasps, Hurt Certificates, Prize Money				Examinations, Certificates, etc.							
Date (in figures) Day	Month	Year	Particulars	Date (in figures) Day	Month	Year	Particulars	Date (in figures) Day	Month	Year	Particulars
17	5	44	Eligible for award of C.V.S.M.&C.	27	10	42	Passed professionally for OA4/c				

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

Second Class For Conduct	
From	To

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

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

O.H.F. received.

FILM NO. WSR-5574-1
DATE

W.C.R. APPLICATION 1513 RECEIVED

H.Q. 35—30M—4-42 (4260)
N.S. 815—7-35

DEPARTMENT OF VETERANS AFFAIRS

WAR SERVICE RECORDS

AWARDS NAVY (298170)

DECEASED 7 May 1944

D.D.

SURNAME (IN BLOCK LETTERS)	CHRISTIAN NAMES	REG. No.	RANK ON DISCHARGE	C.A.S.F. UNIT	FILE No.
HOFFMAN	Martin John	V-38568	O.A.4		

WAR SERVICE BADGE (CLASS) No. Nil

DATE DESPATCHED:

ADDRESS:

Repl.

CAMPAIGN MEDALS	REGISTRATION NUMBER AND DATE DESPATCHED
1939-45 Star	2357 29/11/49
C.V.S.M. & Clasp	Mrs. Jane Lupton
War Medal	887 Tos. Janosel
	Windsor, Ontario
	N8Y 3A7
Mem Cross only.	19/1/83

(THE REVERSE TO BE USED FOR ESTATE PURPOSES)

DVA 806 P.T.O.

MEDALS AND MEMORIALS—DECEASED PERSONNEL

RCNVR Ot.44 "VALLEYFIELD"

REGISTRATION No. DATE OF DESPATCH

(1) MEDALS

PERSON ENTITLED TO: Mrs. Jane K. ~~Hoffman~~ Lupton - Widow re-married

ADDRESS: ~~1491 Aubin Rd.~~, ~~WINDSOR, Ont.~~ R.R1 Roseland, Ont. (8-12-51)

MEMORIAL BAR 9-1-52

(1) DATE DESP 5297

REGN No. 8103

CANCELLED

(2) MEMORIAL CROSS

WIDOW: Mrs. J. K. Hoffman

ADDRESS: ~~1491 Aubin Road WINDSOR, Ontario~~

Mem. Cross sent to Mrs. Jane Lupton 887 Gs. Janosse Windsor Ont. N8Y 3A7

(2) 26 May 1944

(3) MEMORIAL CROSS

MOTHER: Mrs. A. Hoffman

ADDRESS: R.R. #1 ROSELAND, Ontario

(3) 14 June 1944

TL

DISTRIBUTION OF SERVICE ESTATES

Estates Form "P. 4"

NAVY

Name: HOFFMAN, (Surname) Martin J., (Christian Names) No.: V.38568

O/A 4 Cl. (Rank) R.C.N.V.R. (Unit) 7-5-44 (Date of Death)

AMOUNT

L.P.C. $ 67.19

Date: 19-10-44

Other Credits

Total 67.19

SHARE	RELATIONSHIP	NAME AND ADDRESS	AMOUNT
All	Widow	Mrs. Jane K. Hoffman, 1491 Aubin Road, WINDSOR, Ont., (As next of kin entitled)	67.19

TO BE FORWARDED BY REG. MAIL DIRECT.

P4. TO TREAS. 3/11/44 EN

AUTHORITY

H.Q. F.E. No.	VOTE	PRI	H.Q. SUB.	OBJ.	AMOUNT
9999	831	00	50	000	$67.19

CLASSIFIED BY

Original Signed by
K. L. McCUAIG

EXAMINED BY

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

For Chief Treasury Officer

50M—8-44 (5426)
H.Q. 1772-80-2

Six copies to be rendered to Naval Service Headquarters

REPORT OF THE DEATH OF AN OFFICER, MAN OR BOY

51

H.M.C.S. [illegible] at [illegible]

Name [illegible] (Christian names in full)

Rank or Rating. Ordinance Artificer 4/Cl. Official No. [illegible] (If unknown, date of first entry)

Place of Birth [illegible] Date of Birth 24 June, 1921

Occupation in Civil Life. Tool & Die Maker Religion. Roman Catholic

Number of years in the Navy (Long Service R.C.N., or mobilized service in case of R.C.N. (Temporary) or Reserve ratings) 1 year 11mos

Date of Death [illegible] Place of Death [illegible]

Cause of Death. Enemy action - Explosion of H.M.S. WHITFIELD
(If due to accident, violence, or enemy action, particulars to be stated briefly)

Nearest known relative or friend

Name. Mrs. Jane E. Hoffman Relationship [illegible]

Address. 1491 Ambler Road, Windsor, Ontario.

Date on which the above was informed by Ship. Informed by R.C.N.

Date on which death was registered with local Officials [illegible]

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. Joint Services Cemetery, Newfoundland (If known) Date of Burial. [illegible] (If known)

Location, Number, etc., of grave. [illegible] (If known)

Undertaker employed. Carnell's Funeral Home (If any)

If borne for discipline only, date D.S. Q or invalided

A/Captain, R.C.N.
Commanding Officer
H.M.C.S. "AVALON"

20th May, 1944.

The Naval Secretary,
Department of National Defence,
Ottawa, Canada.

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

For Completion and Return by

Form P. 64

Mrs. Jane K. Hoffman
1491 Aubin Road,
Windsor, 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-38568 FD 428

DEPARTMENT OF NATIONAL DEFENCE

ESTATES BRANCH

OTTAWA, ONT.

May 24 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

HOFFMAN, Martin John, Ord.Art. V-38568

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.

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

HRW/NM

ESTATES BRANCH
JUN 5 1944
H.Q. OTTAWA
NATIONAL DEFENCE

M.F.W. 77
5M—1-44 (3371)
H.Q. 1772-39-972

ANSWER IN FULL ALL APPLICABLE QUESTIONS

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

Degrees 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		Mrs. Jane Katy Hoffman	19	1491 Aubin Rd, Windsor, Ont.
2	Children of the Deceased and dates of their Births		Robert James Hoffman	2 mos.	1491 Aubin Rd, Windsor, Ont.
3	Father of the Deceased		Mr. Alex Hoffman	52	1512 Westcott Rd. Windsor.
4	Mother of the Deceased		Mrs. Margaret Hoffman	52	1512 Westcott Rd, Windsor.
5	Brothers of the Deceased	Full Blood	James & Alex (twins) Hoffman	8	1512 Westcott Rd. Windsor, Ont.
		Half Blood			
6	Sisters of the Deceased	Full Blood			
		Half Blood			
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.	Martin John Hoffman
9	Date of his birth.	June 24, 1921
10	Place and date of his marriage.	Dec. 14, 1942, Windsor, Ont.
11	Place and date of his parents' marriage.	February, 1914, Hungary

PARTICULARS OF DOMICILE

12	Place where deceased was born.	Tes, Hungary
13	State, in order, the Province, State and/or County in which he resided before enlistment and the period of time in each.	(a) Essex County (b) (c) Ontario Canada (d)
14	Nature of employment before enlistment.	Toolmaker
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.	Windsor, Ontario

PARTICULARS OF ESTATE

17	Did he leave a Will? If in your custody, please forward.	No. (only service will on file @ N.S.H.Q.
18	If married, and domiciled in the Province of Quebec or in a State in the U.S.A. or in a Country under the laws of which there is community of property between spouses,—was there a marriage contract dealing with property?	
19	Did he have a Bank, Post Office or other deposit account? If so, give name and address of bank, etc., and the amount on deposit. Do you wish it administered with the pay account?	No.
20	Amount of War Savings Certificates held by deceased. Indicate where located.	
21	Amount of Victory Loan Bonds held by deceased. Indicate whether registered or bearer and where located.	
22	If deceased had life insurance, name companies and amount payable under each policy and the person named as beneficiary therein.	Metropolitan Life #1160. Mrs Jane Kate Hoffman.
23	Describe other assets, if any, and estimated value thereof. Use space on page 4 if necessary.	

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.	
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.	

(NOTE:—The Government pays funeral expenses within the amounts authorized in the Regulations, where death occurs and burial is made Overseas as well as where death occurs and burial is made in Canada or elsewhere in the North American zone, and if a relative has already paid those expenses the Government will reimburse such relative to the extent of the amount authorized in the Regulations. Any amount of such expenses in excess of those authorized in the Regulations is not payable by the Government nor is it chargeable against the service estate of the deceased.)

(PLEASE TURN OVER)

DECLARATION

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

I hereby declare that all the particulars shown on this form are correct, and a true and complete statement of all the relatives that the deceased ever had in the degrees specified; and that I am the *Widow 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 Jane Katy Hoffman — Signature of Informant

1491 Aubin Rd. Windsor, Ont. — Address

CERTIFICATE

I hereby certify that to the best of my knowlege and belief Jane Kate Hoffman (Name of informant) 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.

*See above.

Dated at 30 Windsor, this 30 day of May, 1924

Signature of Clergyman, Priest, Magistrate, Commissioner or Notary Public or Commissioned Officer of any of His Majesty's Forces. [illegible] Qualification of Cmdr RCN(R)

Address 960 Ouellette St Windsor Ont.

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

IN REPLY PLEASE QUOTE

No. N.S. V-38568 PERS. (N)

CANADA

Department of National Defence
Naval Service

Ottawa, Canada.

058635

10 May, 1944.

Sir:

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

NAME, RANK/RATING NO.	PLACE, DATE & CAUSE of DEATH	NEXT OF KIN
HOFFMAN, Martin John Ordnanace Artificer 4th Class, V38568, 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.	Wife: Mrs. Jane Katy Hoffman, 1491 Aubin Road, Windsor, Ont.

IN FAVOUR OF:	ALLOTMENTS IN FORCE	AMOUNT	INITIALS
Mrs. Jane K. ~~X~~ Hoffman	1491 Aubin Rd., Windsor, Ont.	D.A. $37.20 A.P. $50.00	
Rec. Gen. of Canada,	5th Victory Loan, Ottawa, Ontario.	$8.40	Bhee 13/5/44

WILL: No Record.

ESTATES BRANCH MAY 19 1944 H.Q. OTTAWA NATIONAL DEFENCE

Yours truly,

H.B. Money

for
SECRETARY, NAVAL BOARD.

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

H.Q. 1010A
250M—5-41 (335)
N.S. 815-7-1010

MEDICAL QUESTIONNAIRE.

NOTE: ALL QUESTIONS TO BE ANSWERED SIMPLY YES OR NO

1. Have you ever been discharged or rejected from the NAVY, ARMY or AIR FORCE. no.

2. Have you ever had any of the following ilness' or defects at any time?

(a) Rheumatism, Rheumatic fever	no	(n) Gonorrhea	no
(b) Tuberculosis or pleurisy	no	(o) Syphilis	no
(c) Bronchitis or Pneumonia	no	(p) Broken or diseased bones	no
(d) Asthma or Hay fever	no		
(e) Kidrey or bladder trouble	no	(q) Rupture or Hernia	no
(f) Bed wetting at night	no	(r) Flat or deformed feet.	no
(g) Heart trouble	no	(s) Varicose veins	no
(h) Indigestion of any kind	no	(t) Dizzyness, fainting, fits o convulsions	no
(i) Stomach or Bowel trouble	no		
(j) Nose trouble	no	(u) Haemorrhoids or piles.	no
(k) Ear trouble	no	(v) Epilepsy	no
(l) Any operations.	no	(w) Swollen, red or sore joints	no
(m) Eye trouble	no		

3. Have you ever been sick longer than a week, including infectious diseases? no

4. Have you lost weight? no

5. Have you ever been in hospital or sanatorium? yes

6. Have you or any one in your family ever had
   (a) Tuberculosis no (c) Epilepsy no
   (b) Diabetes no (d) Mental or nervous breakdown no

7. Are there any diseases which run in your family? no

Measles.

W H Burnett
Surgeon Lieutenant RCNVR.

I certify that I have revealed my full medical history and not withheld any revelant information.

Religion R.C.

Next of kin Mrs. Margarit Hoffman

Relationship mother

Address 1512 Westcott Rd. Sand. Ont

Signature of Candidate.

Martin Hoffman

X-RAY NO. 3225

Can. B. 207
100M—3-42 (3733)
N.S. 815-2-207

CANADA

Certificate of Medical Examination of Officers, Men and Boys

NAVAL SERVICE OF CANADA

(R.C.N. OR RESERVE FORCES)

NOTE—This Certificate is to be completed by the Examining Medical Officer and forwarded to the Naval Secretary, Department of National Defence, Ottawa.

I, the undersigned, have examined HOFFMAN, Martin John

‡candidate for entry as ~~Acting~~ Ordnance Artificer 5th Class

and I believe him to be *{in all respects fit for His Majesty's Service / unfit for His Majesty's Service for the reason stated below} He has signed the Certificate given below in my presence.

‡Strike out if inapplicable *Delete one.

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

(a) Age	20 Yrs. 11 Mos.			(j) Date of last Vaccination for Smallpox	1939
(b) Height with bare feet	Feet 5'	In. 3½		(k) General Development	Good
(c) Weight without clothes	133			(l) Nose, Throat and Tonsils	neg.
(d) Ears and Hearing	neg.			(m) Heart and Lungs	neg. BP. 142/68
(e) Chest Girth	Max. 37½"	Min. 35"	Mean 36"	(n) Abdomen Hernia, etc.	neg.
(f) Teeth	Deficient —	Defective —	Dentures —	(o) Limbs and Joints	neg.
(g) Vision by Snellens Types	without glasses	Rt. 20/20	Lt. 20/20	(p) Skin	Pityriasis versicolor
	with glasses where worn	Rt.	Lt.	(q) Anus Haemorrhoids	neg.
(h) Colour Vision	Ishihara R.C.N. Lantern	Nils		(r) Testes Varicocele	neg.
(i) Chest x-ray {not taken / approved / positive / doubtful}	Negative Approved.			(s) Urine	

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.

Martin Hoffman
Signature of Candidate

†The exact meaning of this is to be clearly explained to the Candidate by the Examining Medical Officer.
‡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 Windsor, Ontario the 27th of May 19 42.

S. R. Cole
Examining Medical Officer

(Rank) Surgeon Lieutenant, R.C.N.V.R.

R. 6/6
L. 6/6
Sch N

B.P. 126/78

W H Burnett
FIT SURGEON LIEUT.

Medical Recruiting
DEPARTMENT
JUN 11 1940
R.C.N. BARRACKS
HALIFAX, N. S.

NAVAL TRAINING and ACTIVE SERVICE

Year	SHIP OR ESTABLISHMENT	NON-SUB. RATE	RATING	FROM	TO	CAUSE OF DISCHARGE
1942	H.M.C.S. "Hunter"		O.A.S. 4	3 June 42	8 June 42	
1942	H.M.C.S. "Cornwallis"			9 June 42	23 June 42	
	— " —		A/O.A. 4.	24 June 42	12 Feb 43	
	Stadacona		— " —	13 Feb 43	23 June 43	(10663)
	— " —		O.A. 4 cl (Ty)	24 June 43	26 Feb 44	
	— " — (Valleyfield)		— " —	27 Feb 44	29 Feb 44	
	Avalon (Valleyfield)		— " —	1 Mch 44	7 May 44	"D.D."

Wounds Received in Action, Hurt Certificates, Meritorious Service, Special Recommendations, Prizes or other Grants

Date	Details	Captain's Signature
7 Dec '42	Granted Sp Con Rear Adm 4/6 3/42	

NAVAL TRAINING and ACTIVE SERVICE

Year	SHIP OR ESTABLISHMENT	NON-SUB. RATE	RATING	FROM	TO	CAUSE OF DISCHARGE

EXAMINATIONS, NOTATIONS, QUALIFICATIONS			RECORD OF RATING		
Date	Particulars	Captain's Signature	Rated	Date	Authority for Advancement or Reason for Disrating to be stated
	IDENT CARD ISSUED				
3 JUNE 1942	NS 54723	[illegible]			
27 Oct '42	G Confirmed	[illegible]			

Name Martin John Hoffman Conduct

SECOND CLASS FOR CONDUCT (Inclusive Dates)		CHARACTER, ABILITY IN RATING ON COMPLETION OF TRAINING, DISCHARGE FROM THE SERVICE, AND ANNUALLY, 31st DECEMBER, WHILE MOBILIZED			
From	To	Character	Efficiency in Rating Noting Substantive Rating in Brackets	Date	Captain's Signature
		V.G.	Sat. (O.A. 4/c)	31 Dec 42	[illegible]
		V.G.	Sat. (O.A. 4/c)	31 Dec 43	[illegible]
		V.G.	Sat. (O.A. 4/c)	7 May 44	[illegible]

R.C.N.V.R.
GOOD CONDUCT AND GOOD SERVICE BADGES

Date	G.S.B. or G.C.B.	1st, 2nd, 3rd	Granted, Deprived, Restored

TIME FORFEITED

Date	P., D.C., C.P., or W.T.	No. of Days	
		Awarded	Served

SHIP RECORD

TO BE FILLED UP WHEN A MAN IS DISCHARGED, OR WHEN HE IS RECOMMENDED FOR ADVANCEMENT

DATE		Ship	*(a) ABILITY AND (b) PERIOD OF EXPERIENCE IN					Initiative	Ability to take Charge	Ability in Mechanical Drawing	Remarks	INITIALS OF	
From 1	To 2	3	General Gunnery 4	Hydraulic Machinery 5	Director 6	Fire Control and Rangefinders 7	Workmanship 8	9	10	11	12	Gunnery Officer 13	Captain 14
									Under		(a) (b)		
10/6/42	12/2/43	Cornwallis	Fair	Fair	Good	Good	Good	Sat.	training	Sat.	yes. 1.4.	[illegible]	
13/2/43	25/2/44	Stadacona	Employed on staffs of capt. "D" 4th General ability "Good"				Good	Good	Fair	Sat	Good Good	[illegible]	

DUPLICATE.

Can. S. 1246C.
1,500—10-40 (7507)
N.S. 815-9-1246C.

ORDNANCE ARTIFICER'S HISTORY SHEET

Name HOFFMAN J. M. Official No. V-38568

Port Division Halifax C.N.S.

GUNNERY SCHOOL RECORD

To be filled up on discharge from Gunnery School

DATE	SHIP	RATING	SCHOOL	ABILITY IN					ABILITY TO TAKE CHARGE	CAPTAIN'S INITIALS
				General Gunnery	I.ND. ~~Woolwich Course~~ Gun Wharf	Hydraulic Machinery	Fire Control and Rangefinders	Workshop		
28/10/42	"Cornwallis"	A/OA 4th Class	Passed.	Fair.	Sup.	Fair.	Sat.	Sat	Under Training.	[illegible]

*Exceptional, Superior, Satisfactory or Fair.

Unemployment Book deposited with Employment & Claims Office Windsor R.T.B.

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

CANADA

ATTESTATION FORM

(HOSTILITIES FORM)

FOR MEN OF THE ROYAL CANADIAN NAVAL VOLUNTEER RESERVE

SURNAME HOFFMAN OFFICIAL NO.

CHRISTIAN NAMES Martin John MARRIED, SINGLE OR WIDOWER Single

PERMANENT ADDRESS	RELIGION
1512 Wescott Road, Sandwich East, Ontario.	R. C.

DATE OF BIRTH	*PLACE OF BIRTH	NAME AND ADDRESS OF NEXT OF KIN
24th June 1921 *Original Nationality of: Father Hungarian Mother Hungarian	Town Tes County Province Hungary	Mrs. Margaret Hoffman --mother-- same address.

*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 Inches 3½	Inflated 37¼ Deflated 35 Mean 36	Brown	Blue	Fair	Scar on right thumb.

EDUCATIONAL STANDING	TRADE OR CALLING AND IN WHOSE EMPLOY
Four years Vocational School in Machine Shop Practice.	Ford Motor Co. - Windsor, Ont. Tool and Die Maker.

DATE OF ENROLMENT	RATING FOR WHICH ENROLLED	R.C.N.V.R. DIVISION, OR OTHER ESTABLISHMENT, AT WHICH ENROLLED
Active Service 3rd June 1942.	Ordnance Artificer 5th Class.	Windsor, Ontario.

(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 xxxxxxxx~~ for the period shown, and attach my record of service, in corroboration of this statement.

*Cross out Clause not applicable.

SERVED IN	RANK	FROM	TO

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

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

(5) On being enrolled as a member of the WINDSOR 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 3rd day of June 1942.

Signature of applicant X Martin John Hoffman

(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 3rd day of June 1942.

R.A. Baker S/L VR
Signature of and rank of Attesting Officer.

(D) OATH OF ALLEGIANCE

I, Martin John HOFFMAN 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 X Martin John Hoffman

Witness R.A. Baker

Date 3rd June 1942. Rank S/L R.C.N.V.R.

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

(E) CERTIFICATE OF ATTESTING OFFICER

Martin John HOFFMAN 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 Windsor, Ontario. Division of the R.C.N.V.R. or in the appropriate official documents.

R.A. Baker S/L VR
Attesting Officer.

3rd June 1942. R.C.N.V.R. Division (or other establishment) Windsor, Ontario.

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

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

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

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

X Martin J. Hoffman
Signature

VERIFICATION FORM

CAMPAIGN STARS, DEFENCE MEDAL, WAR MEDAL, C.V.S.M. an

NAVAL GENERAL SERVICE MEDAL (1915).

NAME IN FULL HOFFMAN Martin John RANK/RATING O.A. 4/C OFF.NO.

SHIP	SERVICE			AREA	QUALIFYING PERIODS			
	FROM	TO	DAYS		FROM	TO	1939-45	ATLANTIC
	3-6-42							
Valleyfield	27-2-44	7-5-44	71					
	Disch. Dead (Valleyfield)			7-5-44				

VERIFIED BY R. Seguin

VERIFIED BY

VERIFICATION FORM

N STARS, DEFENCE MEDAL, WAR MEDAL, C.V.S.M. and CLASP.

NAVAL GENERAL SERVICE MEDAL (1915).

John .....RANK/RATING ...A.B.....4/C.....OFF.NO. ..V-38568.....ADDRESS .....

AREA	QUALIFYING PERIODS IN DAYS							STARS MEDALS	✓ 1 2	ELIGIBLE FOR AWARDS OF
	FROM	TO	1939-45	ATLANTIC	DEFENCE	CLASP C.V.S.M.	1915 MEDAL			
								1939-45	/	Star
								ATLANTIC		
								FRANCE G.		
								AFRICA		
7-5-44								PACIFIC		
								BURMA		
								ITALY		
								DEFENCE		
								C.V.S.M.	2	+ clasp
								" CLASP		
								WAR 1945	/	medal
								WAR 1915		

VERIFIED BY ..... Lieut

VERIFIED BY ..... DIR.OF PERSONNEL RECORDS.

DEPARTMENT OF VETERANS AFFAIRS

WAR VETERANS' ALLOWANCE DISTRICT AUTHORITY

Address 201 King Street,

LONDON, Ontario,

MARK YOUR REPLY:

For attention of: W.V.A. DIST. AUTHORITY,

Director,
War Service Records,
Department of Veterans Affairs,
Ottawa, Ontario.

Re: HOFFMAN MARTIN Regt. No. V-38568
(Surname) (Christian Names)

Veteran is stated to have served in the following units in:

W.W. I

W.W. II H.M.C.S. VALLEYFIELD
(REPORTED KILLED 7 MAY 1944)

S.A. WAR

Dear Sir:

To enable this War Veterans' Allowance District Authority to determine the eligibility [redacted] named, will you kindly furnish the following particulars concerning his service. 15 November, 1950.

DVA. V-38568, (R3(a))

1. Theatre of Service in W.W. I

W.W. II Canada and High Seas,

S.A. WAR

2. If service in S.A. WAR: (a) Port of disembarkation.....

(b) Date of disembarkation.....
Day Month Year

3. Date and place of all enlistments. 3 June, 1942, HMCS Hunter,
Date of Death Died: 7 May, 1944,
4. Date of all discharges and reason.

5. Rank on discharge. Ord. Art. 4/c,

6. Date and place of birth as per attestation paper. 24 June, 1921, Tes, Hungary,

7. Marital status: If married, name in full of wife. Mrs. Jane Katy, Hoffman,

8. Any prior military service. Nil,

9. Decorations, if any. Nil,

/GW

for H.M. Jackson,
Director of War Service Records.

W.V.A. 18 Rev.

397

PH[illegible]3-7408

ADDRESS ALL MAIL TO
P. O. BOX 112

The Canadian Legion of the British Empire Service League

Nova Scotia Command
HALIFAX
NOVA SCOTIA

January 17, 1949.

The Director,
War Service Records,
Department of Veterans Affairs,
OTTAWA, Ont.

Dear Sir:

Reference your letter DVA V-38568 (R. 3 (a)), dated October 20, 1948 regarding the late Martin John Hoffman.

As efforts to locate the widow of Mr. Hoffman have failed and as Hoffman's photo is the only one required to complete the previously mentioned Church memorial book, it is respectfully asked that a print of any photo of Hoffman which is on file may be forwarded for inclusion in the book.

The Church officers advise they are willing to meet any expense in this regard.

Your further aid in the matter is earnestly solicited.

Yours very truly,

A. MacKinnon
Provincial Secretary.

AMacK-mtm.

Thro' oversight Naval Reg pic'd File & Enquiry instead of passing, as directed, to CAFIB. J

II
C.A.F.I.B.

For you please.

H.M. Jackson,
Director,
War Service Records.

21 Jan 49
AWD/4700

PHONE 3-7408

8128

ADDRESS ALL MAIL TO
P. O. BOX 112

The Canadian Legion of the British Empire Service League

Nova Scotia Command
HALIFAX
NOVA SCOTIA

September 27, 1948.

V 38569

The Secretary,
Department of Veterans' Affairs,
OTTAWA, Ont.

Dear Sir:

One of the Churches in this City is having prepared a Tablet in memory of those of its congregation who met death during Service in World War 11, and is also preparing an illuminated Book containing the names of all those in its congregation who served in that War. In the congregational list is one, Martin Hoffman, who served with Canadian Naval Services, but his present whereabouts are not known.

May we request that this man's present address, or advice that he was a casualty of World War 11, be made known to us. It is realized that difficulty may be experienced in tracing the man without his Official Number, but this would be offset by the fact that his surname is not a common one.

Your kind assistance in the matter will be greatly appreciated.

Yours very truly,

A. MacKinnon
Provincial Secretary.

AMacK-mtm.

Acknowledge
Reply
previous
file
1/10/48

H.Q. 1000
15M (ENGLISH)-9-44
N.S. 7570-H.Q. 100

DEPARTMENT OF NATIONAL DEFENCE

NAVY ═══ ARMY ═══ AIR FORCE

4
NAVY

RR

STATEMENT OF WAR SERVICE GRATUITY

Deceased member's
NAME Martin John (CHRISTIAN NAMES) HOFFMAN (SURNAME)

Payee:
ADDRESS Mrs. Jane K. Hoffman,
1491 Aubin Rd.
Windsor, Ont.

(2)

REGISTER NO. 1513
FILE NO. NS.V38568
DATE 24 Feb/45
SERVICE NO. V38568
FINAL RANK OR RATING O.A. 4/C
DATE OF DISCHARGE 7 May/44

DATE OF TERMINATION OF OVERSEAS SERVICE 7 May/44

	$ ¢
A. TOTAL QUALIFYING SERVICE NO. OF DAYS 705/30 EQUAL TO 23 COMPLETE PERIODS AT $7.50	172.50
B. QUALIFYING OVERSEAS SERVICE No. OF DAYS 71 LESS 15 INELIGIBLE DAYS, EQUAL TO 56 DAYS @ 25c. PER DAY (SEE PAR. 2 OVERLEAF FOR EXPLANATION)	14.00
SUB TOTAL	
C. SUPPLEMENT FOR OVERSEAS SERVICE	
DAILY RATES AT DISCHARGE: PAY $3.05; SUBSISTENCE OR LODGING AND PROVISION ALLOWANCE $1.25; ADDITIONAL PAY $ $ $	
DEPENDENTS' ALLOWANCE 1/30 OF $ 37.20 $1.25; TOTAL $5.55 X7 = $38.85; NO. OF DAYS 56/183 X$ 38.85	11.89
D. WAR SERVICE GRATUITY	198.39
E. DEDUCTIONS OVERPAYMENT OF PAY AND ALLOWANCES $; DEPENDENTS' ALLOWANCE AND ASSIGNED PAY $; OTHER DEDUCTIONS $	Nil
F. AMOUNT PAYABLE (~~THIS AMOUNT IS PAYABLE IN ____ MONTHLY INSTALMENTS OF $ ____ EACH~~)	198.39

~~THE WAR SERVICE GRANTS ACT, 1944, PROVIDES FOR YOUR RE-ESTABLISHMENT CREDIT IN THE AMOUNT SHOWN IN SUB TOTAL OF A. & B. THIS CREDIT IS AVAILABLE TO YOU IN CERTAIN CIRCUMSTANCES. INQUIRY IN THIS CONNECTION SHOULD BE DIRECTED TO THE DEPARTMENT OF VETERANS' AFFAIRS.~~

SEE REVERSE SIDE FOR EXPLANATION OF ITEMS A, B & C

G. MONTHLY INSTALMENT NOT TO EXCEED DAILY RATE OF PAY AND ALLOWANCES $ X30 $

INSTALM. PAYABLE	1	2	3	4	5	6	7	8	9
AMOUNT	198.39								
CHEQUE No.	111814								
DATE	10/3-45								

INSTALM. PAYABLE	10	11	12	13	14	15	16	17	18
AMOUNT									
CHEQUE No.									
DATE									

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

PREPARED BY	CHECKED BY	TREASURY CHECKED BY	TREASURY DATE
SJD	[illegible]	PRBeiper	2/3/45

[illegible]
SERVICE REPRESENTATIVE
for Dir. Naval Pay Acctng.

STATEMENT OF WAR SERVICE GRATUITY - NAVY

Deceased Member's Name Marlen John HOFFMAN
(Christian Names) (Surname)

Payee Mrs Jane K. HOFFMAN

Address 1491. Aubin Road. Windsor. Ont.

Register No. 1513
File No. V38568
Date 15.12.44
Service No. V38568
Final Rank or Rating O.A.4/c.
Date of Discharge 7 May 44

Date of termination of overseas service 7 May 44

	$ ¢
A. TOTAL QUALIFYING SERVICE No. of days 405/30 equal to 23 complete periods at $7.50	172.50
B. QUALIFYING OVERSEAS SERVICE No. of days 41 less 15 ineligible days equal to 56 days @ 25¢ per day	14.00
C. SUPPLEMENT FOR OVERSEAS SERVICE	~~186.60~~

DAILY RATES AT DISCHARGE

Pay	$ 3.05	
Subsistence or Lodging and Provision Allowance	$ 1.25	
Additional Pay	$	
Dependents' Allowance 1/30 of $ 37.20	$ 1.25	
Total	5.55	x 7 = $ 38.85
No. of days 56/183		x $ 38.85 = 11.89

D. WAR SERVICE GRATUITY	198.39
E. DEDUCTIONS OVERPAYMENT OF PAY AND ALLOWANCES $ DEPENDENTS' ALLOWANCE AND ASSIGNED PAY $ OTHER DEDUCTIONS $	Nil
F. TOTAL AMOUNT PAYABLE	198.39

G. YOUR PORTION OF GRATUITY IS

~~Dependents' Allowance in issue to you $ _____ of $~~ = $198.39
~~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	Treasury Date

Service Representative

D.N.P.A. CHECK

1		6	
2		7	
3		8	
4		9	
5		10	

1513

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

Name of Deceased Member Martin John HOFFMAN Rank or Rating O.A. 4/c O.No. V38568

1. Dependents' Allowance and Assigned Pay in force at date of death:

D.A. 37.20 — Mrs Jane K. HOFFMAN. (wife) 1491, Aubin Road. Windsor. Ont.

A.P. 50.00

D.A. -

A.P. -

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

3. War Service Gratuity Application(s) received from: Mrs. Jane K. HOFFMAN. 1491. Aubin Road. Windsor. Ont

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:

(✓) To be paid to: Mrs Jane. K. Aubin (wife) — In ~~the~~ full ~~proportion of~~: /

- and -

to: — In the proportion of: /

( ) 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 Feb 16/45.

for D.N.P.A. (G) DWJ.

STATEMENT OF WAR SERVICE GRATUITY - NAVY

Name Martin John HOFFMAN
(Christian Names) (Surname)

Address Mrs. Jane K. Hoffman
1491 Aubin Rd
Windsor, Ontario

Register No. 15-13
File No. V38568
Date 15.12.44
Service No. V38568
Final Rank or Rating O.A 4/c
Date of termination of overseas service 7 May 44
Date of Discharge 7 May 44

	$ ¢
A. TOTAL QUALIFYING SERVICE No. of days 705 / 30 equal to 23 complete periods at $7.50	172.50
B. QUALIFYING OVERSEAS SERVICE No. of days 71 less 15 ineligible days, equal to 56 days @ 25¢ per day	14.00
C. SUPPLEMENT FOR OVERSEAS SERVICE — SUB TOTAL	186.50
DAILY RATES AT DISCHARGE Pay $ 3.05 Subsistence or Lodging and Provision Allowance $ 1.25 Additional Pay $ Dependents' Allowance 1/30 of $ 37.20 $ 1.25 Total $ 5.55 x 7 = $ 38.85 No. of days 56 / 183 x $ 38.85	11.89
D. WAR SERVICE GRATUITY	~~186.50~~ ~~198.39~~ 198.39
E. DEDUCTIONS OVERPAYMENT OF PAY AND ALLOWANCES $ DEPENDENTS' ALLOWANCE AND ASSIGNED PAY $ OTHER DEDUCTIONS $	
F. AMOUNT PAYABLE (This amount is payable in monthly instalments of $ each)	
G. MONTHLY INSTALMENT NOT TO EXCEED Daily rate of pay and allowances $ 5.55 x 30	$ 166.50

Instalm. Payable	1	2	3	4	5	6	7	8	9
AMOUNT									
Cheque No.									
DATE									

Instalm. Payable	10	11	12	13	14	15	16	17	18
AMOUNT									
Cheque No.									
DATE									

D.N.P.A. CHECK

1 ~~[illegible]~~ 6
2 ~~[illegible]~~ 7
3 ~~[illegible]~~ 8
4 ~~[illegible]~~ 9
5 10

Estate form completed.

NON QUALIFYING SERVICE

(#) Date	Reason	No. of Days	Overseas
"	"	"	
"	"	"	
"	"	"	
"	"	"	
"	"	"	
"	"	"	
		Total Days	

(%)
OVERSEAS SERVICE:

Where Serving	From	To.	No. of Days
Valleyfield	27 Feb'44	7 May'44 ✓	71 ✓

3
31
30
7
71

1513

TO: D.N.P.A.

FILE No. NS: V38568

"WAR SERVICE GRATUITY"

COMPUTATION OF SERVICE

SURNAME	CHRISTIAN NAMES IN FULL	OFFICIAL NUMBER	RANK OR RATING ON DISCHARGE
HOFFMAN	Martin John	V-38568	O.A. 4/c

CAUSE OF DISCHARGE: Dead

Applicant - Widow of deceased - in receipt of pension.

731
-26
705

TOTAL SERVICE

Date of Active Service 3 June 1942.

Date of Discharge 7 May 1944.

Total No. of Days 705

Less non qualifying service nil

Total Days 705

OVERSEAS SERVICE

% Total No. of Days 71

Less non qualifying service —

Total Days 71

Record of Service in other Forces (per Naval Records)

Branch of Service nil

Date of Active Service

Date of Discharge

& % Overleaf

Computed By
Checked By

DATE: DEC 14 1944

for (H.B. Money)
Payr. Cmdr. R.C.N.R.
Officer-in-Charge
Naval Personnel Records

Original on file.

453

☐ Navy
☐ Army
☐ Air Force
(Mark X opposite Force in which you last served.)

1652

DEPARTMENT OF NATIONAL DEFENCE

M.F.M. 441
1 Mil. 9-44 (5449)
H.Q. 1772-39-2326

8-11-44

D.NPA
4 lb

Application for War Service Gratuity

(Canadian Armed Forces)

A complete reply must be given to every question in this application. If any question is not applicable, "N.A." is to be inserted.

1. Surname on termination of service HOFFMAN (Print)

2. Christian Names MARTIN JOHN (Print)

3. Service No. V-38568 4. Paid rank or rating at date of termination of Service O.A. 4th class.

5. Address, in full, to which payments of gratuity are to be forwarded
Mrs. Jane K. Hoffman
1491 Chelsea Rd.,
Windsor, Ontario.

6. State below your period or periods of service in the Armed Forces of Canada during the present war.

Service (Navy, Army or Air Force)	Service No.	Final Rank or Rating	Date of Commencement of Service	Date of Termination of Service
				MAY 7-1944
R.C.N.V.R.	V-38568	O.A. 4th cl.	June, 1942	MAY 7-1944

7. Have you during the present War, while a member of the Canadian Forces, been attached, loaned or seconded to any of the Naval, Military, or Air Forces of His Majesty or of any power allied or associated with His Majesty? N.A. If so, state name of Force or Forces N.A.

8. Have you during the present War, while *not* a member of the Canadian Armed Forces, been appointed to or enlisted in any of the Naval, Military or Air Forces of His Majesty (other than the Canadian Armed Forces)? N.A. If so, state the Force or Forces, with dates of commencement and termination of service. N.A.

NAVAL PERSONNEL RECORDS
NOV 16 1944
DEC 11 1944 1513

Having now ceased to serve on Active Service, I hereby apply for payment of the War Service Gratuity.

November 11, 1944 (Date)

Mrs. Jane K. Hoffman (Signature of Applicant) (widow of deceased)

WAR SERVICE GRATUITY SECTION

If name signed in space above represents a change from name given in question 1, insert here the name at termination of service. As cheques will be prepared in the name given in question 1, a specific address in question 5 is particularly essential.

NOTE: When completed this form is to be mailed to the Headquarters of the Service in which you last served. Viz:
Navy—The Secretary, Naval Board, Naval Service Headquarters, Ottawa. (To be accompanied by Certificate of Service in the case of ratings.)
Army—The Secretary, Department of National Defence (Army), Ottawa. Attention: Paymaster-General.
Air Force—The Secretary, Department of National Defence for Air, Ottawa. Attention: Records Officer.

1111

250 ~~xx~~ —

250 ~~xx~~ —

DEPENDENTS' ALLOWANCE BOARD

DECISION OF THE BOARD IN RESPECT OF THE APPLICATION
FOR DEPENDENTS' ALLOWANCES SUBMITTED—

000459

Official No. V-38568 Rank or Rating O.A. 4/C

HOFFMAN (Surname) Martin John (Christian names)

Unit

Branch of Service NAVY

DECISION OF THE BOARD

ALLOWANCES AWARDED AS UNDER:

		RELATIONSHIP TO APPLICANT	DATE OF BIRTH	MONTHLY AWARD AMOUNT
101(a) 101(b) Name	Mrs. Jane Hoffman	Wife		$37.20
Name	Robert James Hoffman	Son	Mar. 28/44	$13.92
Name				$
Name				$
Name				$
Name				$
Name				$

Pay allowance to Wife

Address 1491 Aubin Road, Windsor, Ontario.

Total - - $ 51.12

Proof of marriage folio 13

Proof of birth folio 11

Payable from Mar. 28, 1944

DA payable at rate of $35.00 PCLB from August 1, 1943 and increased to $37.20 from December 9, 1943 to and including March 27, 1944.

Paymants on behalf of child to be confirmed under Art. 61(d).

Award forwarded on DAB 20A dated July 20, 1944 is hereby vacated.

Casualty award forwarded November 7, 1944.

P.A. 'S CHECKED IN

1 CPPA.
Please
MBW - 19.12.44
8 NPG.

(Chairman)

Reviewer

(Board Member)

Date December 8, 1944.

(Board Member)

JR

D.A.B. 20A
100M—7-44 (5153)
H.Q. 1772-45-20

1491 Cabana Rd.,
Windsor, Ont.,
Nov. 25 / 44

Dear Sir:

I am enclosing a letter which states that payments of allowances were being arranged.

Since I have had no further information regarding this letter, I wondered if there had been some delay. Could you please let me know if these payments are going forward? Thank you.

Yours truly,
Mrs. Jane R. Huffman.

LA/HS

N.S. V-38568, Pers.(N)

14th October, 1944.

Sirs:

With reference to your letter of the 4th of October, 1944, Martin John Hoffman, Ordnance Artificer Fourth Class, Official Number V-38568, Royal Canadian Naval Volunteer Reserve, was killed in action on the 7th of May, 1944, when H.M.C.S. "VALLEYFIELD", the ship in which he was serving, was lost by enemy action.

Yours sincerely,

H.B. Money
for SECRETARY, NAVAL BOARD.

LA

Personnel Department,
Ford Motor Company,
of Canada Limited,
WINDSOR, Ontario.

Seen 20/10/44
NPR/S
C

N.P.R./5-2.

FORM "B"

FILE: N.S. V-38568 (Pers.N)

138814

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

Sir: 10 May, 1944.
(Date)

The following casualty has been reported -

NAME	RANK or RATING	NAVAL NO.
HOFFMAN, Martin John	Ordnance Artificer 4th Class.	V38568, R.C.N.V.R.

DATE OF ENLISTMENT - 3 June, 1942.

DATE OF DISCHARGE - 7 May, 1944.

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

SERVICE -
(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 - Wife NAME - Mrs. Jane Katy Hoffman,

ADDRESS - 1491 Aubin Road, Windsor, Ont.

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

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

REMARKS:.....

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

Names of Dependents	Relationship	Maiden name of wife	Date of marriage and/or date of birth of children

	D. A.	A. P.	TOTAL
Monthly rate:	$37.20	$50.00	$87.20

To Whom Paid: Mrs. Joan Katy Hoffman Address 1491 Aubin Road, Windsor, Ont.

Date of Enlistment: See other side

Date of Discharge: See other side

Inclusive date to which D.A. and/or A.P. was Paid: May 31st, 1944.

The final deduction of Assigned Pay for $50.00 has been made for the period from 1st to 31st of May 1944.

Remarks:

Computed by BD

Checked by

Alec L. Boswell

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

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

EMC

N.S. V-38568, F.D.320 PERS(N)

698188 A3.

37

9 June, 1944.

Sir:

With reference to your letter of the 5th of June, 1944, as the late Martin John Hoffman, Ordnance Artificer Fourth Class, Official No. V-38568, Royal Canadian Naval Volunteer Reserve, was buried in St. John's Newfoundland, it is suggested that you direct your request for a Certificate of Death to the Registrar General, Department of Public Health and Welfare, St. John's, Newfoundland.

Date of birth for the above named is shown on Naval Service Headquarters' records as the 24th of June, 1921.

Inquiries are being made as to the "date insured first left Canada, United States, Alaska, Newfoundland for service at sea", and as soon as a reply has been received you will be informed.

Yours truly,

H.B. Money

for SECRETARY, NAVAL BOARD.

Encl.

Manager, Claim Division,
Metropolitan Life Insurance Co.,
Ottawa, Ont.

BF
5/7
NPR/5

TFH:PMB

REGISTERED

AIR MAIL

FILE: V-38568 (Pers.N.)

24

11th May, 1944

Dear Mrs. Hoffman:

Further to my letter of the 8th of May, 1944, particulars respecting the loss of H.M.C.S. "Valleyfield", from which your husband 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,

LETTER dispatched by PERSONNEL NAVAL MAY 12 1944

SECRETARY, NAVAL BOARD

Mrs. Jane Katy Hoffman,
1491 Aubin Road,
WINDSOR, Ont:

TFH:PMB

REGISTERED
AIR MAIL

FILE: V-38568 (Pers.N.)

23

8th May, 1944

Dear Mrs. Hoffman:

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 husband, Martin John Hoffman, Ordnance Artificer Fourth Class, Royal Canadian Naval Volunteer Reserve, Official Number V-38568, has been killed in action.

According to the report received, your husband 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 husband'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 husband'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 husband has helped to maintain.

Yours sincerely,

LETTER dispatched by PERSONNEL NAVAL
MAY 8 1944

SECRETARY, NAVAL BOARD

Mrs. Jane Katy Hoffman,
1491 Aubin Road,
WINDSOR, Ontario

DIVISION FILE No ..... F. 237

ROYAL CANADIAN MOUNTED POLICE

14

DIVISION	SUB-DIVISION	DETACHMENT
"O"		WINDSOR

PROVINCE	DATE
Ontario	July 16th., 1942.

FILE REFERENCES

RE: Martin John HOFFMAN, 1512 Wescott St., Windsor, Ont.
Applicant for R.C.N.V.R.

HEADQUARTERS

SUB-DIVISION

DETACHMENT

W-945

P. C. R.

1st
Windsor.

A. R. V. No.

DIARY DATE

SET FOR .....

1. The following communication was received from the Recruiting Officer, H.C.M.S. HUNTER on the 8-6-42:

" I have an offer of Service from Martin John HOFFMAN of 1512 Wescott Road, Sandwich East, Ontario. In his offer of Service, Hoffman states that he was born in Hungary but was naturalized in 1935 by means of his father's papers.

He attended the Windsor-Walkerville Vocational School from September 1935 to May 1940 and since has been employed by the Viking Pump Col of Canada, Windsor, the Canadian Engineering and Tool Company Ltd., and is at present employed by the Ford Motor Co., in the Tool Repair Department.

Will you kindly let me have a report as to his loyalty, particularily with reference to any subversive activities or tendencies, and as to whether or not there is any reason why his offer of service in the Navy should not be accepted"

Sgd: R.K. Baker,
Sub-Lieutenant, R.C.N.V.R.
Recruiting Officer.

2. Enquiries were carried on with regard to the above and this man was found to be highly thought of and reccomended by all persons who were interviewed. The Ford Motor Company records show him to have resigned from the factory on June 2nd, 1942 for the purpose of Joining the Navy. These records also show him to be relaible and a steady worker. Mr. Lowe, the principal of the Windsor-Walkerville Vocational School was interviewed and he was quite willing to reccomend HOFFMAN as loyal and trustworthy. A check was made of the City Police records with negative results. At no time during the enquiry was there anything disclosed to show subversive tendencies that could be connected with the subject.

CONCLUDED
Expences Nil.

R. S. McLeod Cst.
(R. S. McLeod) Reg.No.13096.

The O.C. "O" Division:

FORWARDED: From the foregoing it would appear the captionally noted is a loyal and trustworthy individual and suitabl for service in the Royal Canadian Navy. File considered closed. Could the Department concerned be advised from Divisional Headquar

W. Barratt

W.Barratt, Reg.No. 107
For J. Frewin, Reg.No.6403 S
O.D.S. i/c Windsor Detachme

FILE NUMBERS, HEADING AND MARGINAL REFERENCE ARE TO BE PROPERLY FILLED IN.

(Rating taken on active service)
(from 3rd June, 1942.)

NATIONAL DEFENCE
JUN 13 1942
NS CANADA

ORIGINAL

H.Q. File No. 113-H-2358

DECLARATION OF ALLOTMENT

131417

List and Number in Ledger	ALLOTTOR	Rank or Rating	Official No.	Daily Rate of Pay
	Surname HOFFMAN Christian Names MARTIN JOHN	O.A. 4th cl.	N.K.	$2.10

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 HOFFMAN Christian Names MARGARET (MRS)	Mother	1512 Westcott Road, Sandwich East, Ont.	$25.00	New June 1942.

Allotment Declaration Entd. on Index Card Entd. on Allotment Ledgers — Date 18/6/42 — Initials imp

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):—
		---Nil---	

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.

WITNESS: L C Assaly
Pay Sub-Lieutenant, R.C.N.V.R.

Allottor's Signature authorizing charges Martin Hoffman
Rank or Rating Ordnance Artificer 4th cl., RCNVR

ENTERED IN FAIR LEDGER

ENTERED IN ROUGH LEDGER — LR Lyon

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:—

Pay. Lieut. Commander - R.C.N.V.R.
Accountant Officer

H.M.C.S. Byron

Forwarded 17.6.42

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

S. 63
100M—2-41 (9291)
H.Q. 815-9-63

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: MARTIN JOHN HOFFMAN (b) Reg'l. No. V38568
2. (a) Arm of service: NAVAL (b) Unit: R.C.N.V.R. (c) Rank: O.R. 2nd class
3. (a) Date of birth: 24 June 1921 (b) Have you any dependents? NO (c) Place of residence at time of enlistment: WINDSOR, ONT.
4. (a) Place of enlistment: WINDSOR ONTARIO (b) Date of enlistment: 3rd June 1942

Section B—EDUCATION AND TRAINING

5. (a) State age on finally leaving school: 17 (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 (for instance—"4 years, Public School", "two years, High School", "Junior Matriculation", or "4 years technical course in printing", etc.): 4 yrs technical course machinist
7. If you attended a university, give name of university and standing or degree secured: —
8. (a) Did you ever enter upon a trade apprenticeship? NO (b) If so, for what occupation? — (c) Did you finish it? — (d) If you did not finish it, how long did you serve at it? —
9. (a) What languages do you speak fluently? ENGLISH, HUNGARIAN (b) What languages do you read well? ENGLISH, HUNGARIAN

Section C—EMPLOYMENT CONDITION AT TIME OF ENLISTMENT

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

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: FORD MOTOR COMPANY Address: WINDSOR, ONT.
19. Nature of employer's business (for instance, "farmer", or "building contractor", or "boot factory", or "iron foundry", or "retail store", etc.): AUTOMOBILE MFG.
20. (a) Your specific occupation: TOOL MAKER (b) Number of years' experience at this occupation with any employer: 3½ yrs.
21. (a) Did your employer promise definitely to give you employment on discharge? YES (b) Did your employer refuse to promise you employment on discharge? NO (c) Do you wish to return to your former employment? YES.

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

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

Section F—PARTICULARS OF FARMING EXPERIENCE

24. (a) Do you wish to engage in farming after the war? NO (b) Do you feel competent to operate a farm? NO (c) If so, in what kind of farming? —
25. (a) Were you born on a farm? YES (b) How many years' actual farming experience have you had? 2 yrs. (c) In what provinces did you have experience? Sask. & Ont.

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: Tool & Die maker

DATE: 3rd June 1942 SIGNATURE: Martin J. Hoffman

CANADA

Department of National Defence

Naval Service

IN REPLY PLEASE QUOTE
No. RO

8th May 1942.

DEPT. NATIONAL DEFENCE
MAY 10 1942
N.S. 62-21-5
CANADA

2

R3963

From: The Commanding Officer,
H.M.C.S. HUNTER,
2462 Howard Avenue,
Windsor, Ontario.

To: The Naval Secretary,
Department of National Defence,
Ottawa, Canada.

Submitted:

We have received an offer of service, copy of which is attached, from Martin John HOFFMAN, of 1512 Wescott Road, Sandwich East, Ontario, who wishes to join the R.C.N.V.R., as an Acting Ordnance Artificer 4th Class.

Hoffman graduated in machine shop practice from the Windsor-Walkerville Vocational School in June 1939, and since that time has been employed in various machine shops. He is at present employed in the Tool Repair Department of the Ford Motor Company.

Supporting letters are attached hereto.

He appears to be suitable in all respects, and your decision as to his enrollment is respectfully requested.

G. Nigel Bruce,
A/Lt.-Commander, R.C.N.V.R.,
Commanding Officer.

RKB/BS

D 2258
1500M—11-40 (7828)
N.S. 815-5-2258

NATIONAL DEFENCE

NAVAL SERVICE

MAY 10 1942

N. V. 3a

30M—7-41 (1262)
N.S. 815-11-3a

OFFER OF SERVICE (HOSTILITIES ONLY)

To be completed in applicant's own handwriting and forwarded to nearest recruiting centre (see back). No papers, testimonials, etc., are to be attached. Completion of this form is in no way binding upon either the applicant or the Naval Service.

5964

A. Personal History—

Name HOFFMAN (Surname (in Block Letters)) Martin John (Christian Names) Telephone No.

Address 1512 (Number) Wescott Road (Street) Sandwich East (Town or City) Essex (County) Ontario. (Province)

Date of birth 24th June 1921 Place of birth Hungary.

Nationality British Are you British by birth? No. or by Naturalization? Yes

Birth place of (a) Father Hungary (b) Mother Hungary

Are you (a) Single Yes (b) Married ..... (c) Widower ..... (d) No. of Children? .....

Any physical defects (especially eyesight)? None

Height 5'5'' Weight 145 Can you swim? Yes

B. Education—

Highest school grade passed successfully? 4th Form Vocational Any Matriculation? .....

University: (a) Name ..... (b) Years attended ..... (c) Course and Degree .....

Technical courses taken Machine Shop at Vocational School

Special studies .....

Languages spoken English and Hungarian

C. Sea Experience—

Have you ever been employed at sea? No. Give number of years and how employed? .....

Name and number of Mercantile Marine Certificates held .....

State last position held at sea (with dates) .....

State employment since leaving sea .....

D. Occupation: What is your profession, trade or occupation in civil life? Machinist and Tool and Die Maker.

Are you (a) Actively pursuing your profession or trade on your own account? No.

(b) Employed; if so, in what capacity and under what employer? Machinist Tool and Die Room - Ford Motor Co.

General experience (with dates) May 1, 1940- Mar. 19, 1941- Machinist at Viking Pump Co:- Mar.24, 1941 - Sept. 30, 1941 - Machinist at Canadian Engineering & Tool Co:- Sept. and Oct. 1941-Machinist at RCA Victor(Montreal):- Nov. and Dec.-1941- Defence Industries Ltd:- Jan. 10, 1942 - April 1942- Tool Repair Dept.- Ford Motor Co.

Have you ever served in any of His Majesty's Forces? If so, which? How long? No,

No. and Class of any Stationary Engineer's certificates or other certificates of competency .....

How long would you need to settle up your private affairs? .....

E. Any other Qualifications that might be of use to the Naval Service (yachting, cadet corps, hobbies, etc.) .....

F. Branch Applying for: (a) As Officer ..... (b) As Rating (i.e., in the ranks) x

If you cannot be accepted as an Officer are you willing to serve as a rating? .....

In what capacity do you wish to enrol? Acting Ordnance Artificer 4th Class

Date of Application 7th May 1942. Signature Martin Hoffman