

V25279

LAYTON

PAUL

CHISH

5C

OCCUPATIONAL HISTORY FORM

113-2-42314

THIS FORM IS TO BE COMPLETED FOR EACH MEMBER OF THE ARMED FORCES. THE INFORMATION SOUGHT IS FOR THE USE OF GENERAL ADVISORY COMMITTEE ON DEMOBILIZATION AND REHABILITATION, A COMMITTEE SET UP BY THE GOVERNMENT OF CANADA TO STUDY PLANS FOR ESTABLISHING IN INDUSTRIAL LIFE THE MEMBERS OF THE ARMED FORCES, AFTER DISCHARGE. ACCURACY AND COMPLETENESS IN ANSWERING WILL BE OF MUCH HELP TO THE COMMITTEE.

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

Section A—GENERAL INFORMATION

PLEASE LEAVE BLANK

- 1. (a) Print name in full Layton, Paul Chisholm (b) Reg'l. No. V-25279
- 2. (a) Arm of service Navy (b) Unit R.C.N.V.R. (c) Rank Writer
- 3. (a) Date of birth 17 May 1919 (b) Have you any dependents? No (c) Place of residence at time of enlistment Great Village, NS
- 4. (a) Place of enlistment Halifax, N.S. (b) Date of enlistment 13 Feb. 1940

Section B—EDUCATION AND TRAINING

- 5. (a) State age on finally leaving school 18 Years (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.) Senior Matriculation
- 7. If you attended a university, give name of university and standing or degree secured None
- 8. (a) Did you ever enter upon a trade apprenticeship? No (b) If so, for what occupation? None (c) Did you finish it? None (d) If you did not finish it, how long did you serve at it? None
- 9. (a) What languages do you speak fluently? English (b) What languages do you read well? English, French

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? 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 None (b) State how long you had worked at this trade or occupation None
- 13. If answer to 11 be "No", state exact trade or occupation for which you feel qualified None
- 14. If you had been employed after leaving school, state when you last worked fairly regularly before enlistment None
- 15. Give details of last employer, if any: Name None Address None
- 16. Nature of employer's business (for instance, "farmer", or "building contractor", or "boot factory", or "iron foundry", or "retail store", etc.) None
- 17. (a) If your last employment was in a business of your own, state nature and address of business None (b) Date of discontinuing it None

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 Royal Bank of Canada Address Great Village, N.S.
- 19. Nature of employer's business (for instance, "farmer", or "building contractor", or "boot factory", or "iron foundry", or "retail store", etc.) Banking
- 20. (a) Your specific occupation Teller & Ledgerkeeper (b) Number of years' experience at this occupation with any employer 2 1/2 Years
- 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? No

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

- 22. (a) State nature of business, or professional practice None (b) Where was it located? None
- 23. (a) Number of years engaged in this business None (b) Have you made, or will you make plans to return to the same or a similar business on discharge? None

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? None
- 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? None

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.) None
- 28. State any employment preference or ambition you may have, other than indicated elsewhere in this form None

DATE 16th April

194 1

SIGNATURE [Signature]



COPY TO
VW
ES
5-5-41

TFH/MHM

REGISTERED

AIR MAIL

N.S. V-25279 PERS.(N)

11th May, 1944.

24

Dear Mrs. Layton:

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

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

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

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

Yours sincerely,

LETTER dispatched
PERSONNEL NAVAL
MAY 12 1944
SECRETARY, NAVAL BOARD.

Mrs. Florence C. Layton,
GREAT VILLAGE, N.S.

Edwin

REGISTERED

AN

FILE NO. N.S. V.25279 PERS(N

~~NPR~~ DNPA

30th August, 1944.

37

Dear Mrs. Layton:

Further to my letter of the 11th of May, 1944, in view of the length of time that has elapsed since your son, Paul Chisholm Layton, Leading Writer, Official Number V.25279, Royal Canadian Naval Volunteer Reserve, was reported "missing" after the sinking of H.M.C.S. "VALLEYFIELD", and as no information has since been received of his having survived, the Canadian Naval Authorities have now presumed his death to have occurred on the 7th of May, 1944.

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

Yours sincerely,

Deputy SECRETARY, NAVAL BOARD.

2 mo

Noted on Estate Card.
G.P.
6-9-44

Mrs. Florence C. Layton,
Great Village, N.S.

Royal ✓ Canadian ✓
Message Condolence
Date Sent 30/8/44 NPR 5

30/9/44
NPR 5
AM

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

P.A.'S CHECKED IN

132847

Sir: C.R. BY

AUG 30 1944
(Date)

35

The following casualty has been reported -

NAME	RANK OR RATING	NAVAL NO.
LAYTON, Paul Chisholm	Leading Writer	V-25279, R.C.N.V.R.

DATE OF ENLISTMENT - 13 March, 1940

DATE OF DISCHARGE - 7 May, 1944

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

SERVICE - CANADA & HIGH SEAS
(Indicate whether in Canada only; or in Canada and the high seas or elsewhere.)

Reason for discharge and - Missing, presumed dead, when H.M.C.S. "VALLEYFIELD" was
when and where any disability
was incurred, or where death torpedoed and sunk by enemy action in the Atlantic.
occurred.

(Show clearly whether death or disability due to enemy action, accident or disease, and whether it occurred in Canada, or on the high seas or elsewhere outside Canada.)

NEXT OF KIN & RELATIONSHIP -

RELATIONSHIP - Mother NAME - Mrs. Florence C. Layton,

ADDRESS - GREAT VILLAGE, N. S.

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, DEPENDENT'S ALLOWANCE, etc.

C. R.
P. A.
NAVAL TREASURY
DATE <u>9/9/44</u>
INITIAL <u>K</u>

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>
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	<u>D. A.</u>	<u>A. P.</u>	<u>TOTAL</u>
Monthly rate:	<i>Nil</i>	<i>10.00</i>	<i>10.00</i>
To Whom Paid:	<i>Mr. Max Layton</i>		<i>Address</i>
Date of Enlistment:	<i>see the other side</i>		
Date of Discharge:	<i>see the other side</i>		
Inclusive date to which D.A. and/or A.P. was Paid:	<i>May 31st. 1944</i>		
The final deduction of Assigned Pay for	<i>10.00</i> has been made for the period		
from 1st to	<i>31st.</i>	of	<i>May</i> 1944
Remarks:			

Computed by.....*H.W.*.....
 Checked by.....*[Signature]*.....

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

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

N.S. V-25279, F.D.32, (PERS.N)

22nd September, 1944.

42

Dear Mr. Layton:

With reference to your letter of the 8th of September, 1944, in accordance with your wishes a certificate respecting the death of your son, Paul Chisholm Layton, Leading Writer, Official Number V-25279, Royal Canadian Naval Volunteer Reserve, is today being forwarded to the Standard Life Assurance Co., 391 St. James Street, Montreal, P.Q.

There is no record of a will for your son having been received at Naval Service Headquarters.

Yours sincerely,

[Handwritten signature]

Deputy SECRETARY, NAVAL BOARD.

Mr. Max M. Layton,
Great Village, N.S.

[Handwritten initials]

[Handwritten initials]

Despatched by
Sec. N. B.

Date
Time



Department of National Defence
Naval Service

Ottawa, Canada.

IN REPLY PLEASE QUOTE

No.

MEMORANDUM:

.....
(Name) (Rating) (O.N.)

It is approved for the above named rating to count the undermentioned service towards the award of Good Conduct Badges.

Peace time Naval Training,
over 18 years of age to 31st
August, 1939

Mobilized Service since 1st
September, 1939

Total Service towards Good Conduct
Badges

2. Service Certificate (s), (R.C.N., R.C.N.V.R.),
returned herewith.

BY ORDER,

J. O. Cossetto
(J. O. Cossetto),
Naval Secretary.

The Commanding Officer,
R.C.N. Barracks,

LA/HS

N.S. V-25279, F.D. 32, PERS. (N)

22nd September, 1944.

44

Sirs:

Upon the request of the parents of the
late Paul Chisholm Layton, Leading Writer,
Official Number V-25279, Royal Canadian Naval
Volunteer Reserve, attached hereto is a
certificate respecting the death of this
rating.

Yours truly,

Deputy SECRETARY, NAVAL BOARD.

The Standard Life Assurance Co.,
391 St. James Street,
Montreal, P.Q.

Despatched by
Sec. N. B.

Date 25/9/44
Time 1600

enc

V-4427	V-19206
V-51452	V-3417
V-19206	V-51108
V-43309	V-27849
V-56590	V-2299
V-10506	V-34242
V-11244	V-44790
V-53512	V-18039
V-61903	V-399
V-49761	A-4506
V-16586	V-64486
V-23508	N-4649
V-39924	V-57455
V-59892	N-4122
A-5954	N-4323
O-22420	V-5995
O-23950	O-62255
V-30201	V-13701
V-22262	O-65010
V-38722	V-48962
V-31768	V-17305
V-55196	V-41902
V-905	V-63143
V-65619	O-70570
V-55803	V-50046
N-4472	V-35344
V-50475	V-5794
V-23128	O-71320
V-65496	V-17781
V-17703	V-14540
O-35660	V-516
V-54304	V-25850
V-3538	V-3386
V-43818	V-688
V-52497	V-50598
V-64138	O-76380
V-25279	V-5911
V-50961	V-37893
V-57850	N-21989
V-51441	V-56565
V-65120	V-599
V-62261	N-21498
V-49646	V-8662
V-35602	V-50658
O-47000	V-51989
V-44690	V-6388
V-67335	
V-54554	

H.B. Monnet

Encls. for
SECRETARY, NAVAL BOARD.

The Secretary,
Canadian Pension Commission,
228 Daly Building,
Ottawa, Ont.

The Dominion Statistician,
Bureau of Statistics,
Ottawa, Ont.

The Secretary,
Imperial War Graves Commission,
312 Transportation Bldg.,
Ottawa, Ont.

The Director of Records,
Daly Building,
Ottawa, Ont.

WRITER'S HISTORY SHEET

Port Division HALIFAX

Full Name LAYTON Paul C.

Official No. V-25279

NOTE:—To be kept with the Service Certificate. To be filled up on termination of service in a particular ship or establishment, or when the Accountant Officer is superseded, unless the period is less than three months, when the Accountant Officer will use his discretion.

To be handed to the rating on final discharge from the Service.

SHIP 1	Rating 2	DATE		Capacity in which employed* 5	Remarks as to ability, special qualifications (including Shorthand). Any special knowledge and characteristics 6	(For Writer ratings entered before the 5th October, 1925, only) Whether recommended for promotion. If so, to what rating or rank 7	Signature of Accountant Officer if of Paymaster-Lieutenant's rank or above; otherwise Captain 8
		From 3	To 4				
	<u>ON ACTIVE SERVICE</u>						
<u>Stadacona</u>	<u>Writer (T)</u>	<u>13 Mar 40</u>	<u>31 Dec 40</u>				
<u>" "</u>	<u>" "</u>	<u>1 Jan 41</u>	<u>31 July 41</u>				
<u>" "</u>	<u>Ldg Wts (T)</u>	<u>1 Aug 41</u>	<u>1 Dec 42</u>	<u>Leave and</u>			
<u>York</u>	<u>" "</u>	<u>2 Dec 42</u>		<u>Transportation</u>	<u>Very satisfactory. Conscientious and hardworking</u>		<u>R. C. Buchanan</u>
<u>York</u>	<u>Ldg Wts (T)</u>	<u>3 Oct 42</u>	<u>15 Sep 43</u>	<u>Officers Records</u>	<u>Very loyal, dependable rating. Capable, conscientious, rating whose advancement has been retarded due to specialized nature of duties. Recommended for position of responsibility and promotion to Petty Officer.</u>		<u>Paymaster Lieutenant, R. C. N. V. B.</u>
<u>York.</u>	<u>Ldg. Wts (T)</u>	<u>16 Sep 43</u>	<u>9 Oct 43</u>	<u>Officers Records.</u>	<u>Remarks of previous A.O. concurred in</u>		<u>J. M. [Signature]</u>
<u>Stadacona</u>	<u>" "</u>	<u>10 Oct 43</u>	<u>25 Nov 43</u>	<u>Leave & Transportation</u>	<u>Under 3 months</u>		<u>P. W. Knox-Keef</u> <u>Pay Lieut. R. C. N. V. B.</u>

*Specific notations should be made—"Pay Office," "Captain's Writer," "Drafting Office," "Admiral's Office," "Engineer Rear-Admiral's Office," etc.

J.E.M.
#270
14/4/41

REPORT OF PROFESSIONAL EXAMINATION FOR
RATING OF **..LEADING WRITER**

H.M.C.S. **"STADAGONA"**
Name of Candidate (In full) **LAYTON, Paul, C.**
Present Rating **Writer** Official Number **V.25279**

We consider the Candidate ^(to be qualified) ~~(to have failed)~~ professionally for
the Rating of **..Leading Writer**

in accordance with Naval General Order 1316.

Subject.	Poss.	Obt.
Captain's Office	200	137
Ship's Office	200	110
Typing	50	25
Total -	450	272

Dated on board H.M.C.S. **..STADAGONA**
at **Halifax, N.S.** on the **19 May, 1941**

[Signature] Warrant Writer, R.C.N. } Signatures and Ranks of
[Signature] Paymaster Lieutenant, R.C.N. } Examining Officers.

Naval Secretary - 1 copy.
Commanding Officer, H.M.C.S. **"STADAGONA I"** - 1 copy.
For S.C. action and enclosure).
File - 1 copy.

Forwarded.

[Signature]
.....
Acting Captain, R.C.N.,
COMMANDING OFFICER.

REPORT OF PROFESSIONAL EXAMINATION FOR
 RATING OF PETTY OFFICER WRITER (TY)

H.M.C.S. "STADACONA"
 Name of Candidate (In full) LAYTON, P.C.
 Present Rating Leading Writer Official Number V-25279.

(XXXXXXXXXXXXXX)
 We consider the Candidate (to have failed) professionally
 for the Rating of Petty Officer Writer (Ty)
 in accordance with Naval General Order 1316.

<u>Subject.</u>	<u>Poss.</u>	<u>Obt.</u>
Ship's Office	200	71
Captain's Office	150	77
Typing	50	15
Arithmetic	100	-
Optional Marks	-	-
Total -	500	148

Dated on board H.M.C.S. "STADACONA"
 at Halifax on the 18th Nov. 1941.

W. Hutchins
Pay. Sub-Lieutenant, RCNVR) Signatures and Ranks of
J. G. Dan) Examining Officers.
A/Paymaster Lieut.-Commander, RCN

Naval Secretary - 1 copy.
 ✓ Commanding Officer H.M.C.S. "STADACONA" " - 1 copy.
 for S.C. action and enclosure).
 File - 1 copy.

Forwarded.

J. J. [Signature]

 Acting Captain, R.C.N.,
 COMMANDING OFFICER.

RESULT OF PROFESSIONAL EXAMINATION

FOR RATING OF..... **Petty Officer Writer (ty)**.....

NAVAL BARRACKS

YR 1-1 L
AUG 3 1943

Name of Candidate, (In full).... **P. C. LAYTON**..... **TORONTO**

Present rating... **Leading Writer (ty)**... Official Number.... **V.25279**.....

The above named rating has (~~Passed~~) (Failed) for the rating of
 ... **Petty Officer Writer (ty)** ... to date..... **17th May, 1943**
 in accordance with Naval Order..... **2219**.....

<u>Subject</u>	<u>Maximum Marks</u>	<u>Marks Obtained</u>
Captain's Office	150	58
Ship's Office	200	70
Arithmetic	100	--
Typewriting	50	21
	<u>500</u>	<u>128</u>

[Signature]
 Act. Pay. Lieut. Cdr. R.C.N.....
 Accountant Training Officer,
 H.M.C.S. "Cornwallis."

II.

The Commanding Officer,
 H.M.C.S. "..... **YORK**..... "
 (Copy to: The R.C.N. Drafting Depot, Halifax, N.S.)

Forwarded for information and necessary action, in
 accordance with K.R. & A.I. Article 606, paragraph 17.

H.M.C.S. "Cornwallis"
 Cornwallis, N.S.

..... *[Signature]*
 Captain, R.C.N.

..... **30th July, 1943**

NON QUALIFYING SERVICE

Overseas

(#) Date	Reason	No. of Days		
_____	_____	_____	_____	_____
"	"	"	_____	_____
"	"	"	_____	_____
"	"	"	_____	_____
"	"	"	_____	_____
"	"	"	_____	_____
"	"	"	_____	_____
			Total Days	=====

(%)
OVERSEAS SERVICE:

Where Serving From To. No. of Days

Valleyfield^y 8 Dec '43 - 7 May '44^y 152^y

24
31
29
31
30
7

152

Naval Personnel Records
Officer-in-Charge
R.O.L.R.
(for H.B. Henry)

Checked by _____
Checked by _____
DATE: _____

1106

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

Name of Deceased Member Paul Chisholm LAYTON Rank or Rating LDG. WTR O. No. V25279

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

D.A.	-	<u>Mr Marc LAYTON (FATHER)</u>
A.P.	<u>10.00</u>	<u>Great Village</u>
		<u>N.S.</u>
D.A.	-	_____
A.P.	-	_____

2. Pension awarded or being awarded to: no record

3. War Service Gratuity Application(s) received from: Parents Mr + Mrs Marc LAYTON
Great Village, N.S.

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: _____ In the proportion of: /

- and -

to: _____ In the proportion of: /

(X) 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:

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

Date 3 Apr' 45

[Signature]
for D.N.P.A. (G) [Signature]

MS

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

4
 NAVY

DECEASED MEMBER'S NAME **Paul Chisholm** (CHRISTIAN NAMES) **LAYTON** (SURNAME) REGISTER NO. **1106**
 PAYEE **Director of Estates,) for Service Estate of** FILE NO. **NSV-25279**
 ADDRESS **308 Sparks St.) Paul C. LAYTON** DATE **5 Oct. 45**
Ottawa, Ont.) N.S.V-25279 SERVICE NO. **V-25279**
 DATE OF TERMINATION OF OVERSEAS SERVICE **7 May 44** FINAL RANK OR RATING **Ldg. Wtr.**
 DATE OF DISCHARGE **7 May 44**

A. TOTAL QUALIFYING SERVICE		
NO. OF DAYS	<u>1517</u> EQUAL TO <u>50</u> COMPLETE PERIODS AT \$7.50	\$ 375.00
B. QUALIFYING OVERSEAS SERVICE		
NO. OF DAYS	<u>152</u> LESS <u>17</u> INELIGIBLE DAYS, EQUAL TO <u>135</u> DAYS @ 25C. PER DAY	\$ 33.75
C. SUPPLEMENT FOR OVERSEAS SERVICE		
DAILY RATES AT DISCHARGE		
PAY	\$ 2.25	
SUBSISTENCE OR LODGING AND PROVISION ALLOWANCE	\$ 1.45	
ADDITIONAL PAY 1 B.	\$.05	
HLM	\$.13	
	\$	
DEPENDENTS' ALLOWANCE 1/30 OF \$ N11	\$	
TOTAL	\$ 3.88 X7 = \$ 27.16	
NO. OF DAYS <u>152</u>	X \$ 27.16	\$ 22.56
D. WAR SERVICE GRATUITY		\$ 431.31
E. DEDUCTIONS	OVERPAYMENT OF PAY AND ALLOWANCES \$	
	DEPENDENTS' ALLOWANCE AND ASSIGNED PAY \$	
OTHER DEDUCTIONS	\$ N11	
F. TOTAL AMOUNT PAYABLE		\$ 431.31

G. YOUR PORTION OF GRATUITY IS—

DEPENDENTS' ALLOWANCE IN ISSUE TO YOU \$ _____ OF \$ _____ = \$ **431.31**
 TOTAL DEPENDENTS' ALLOWANCE IN ISSUE \$ _____

Voucher 2888 - Oct. 17/45

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

PREPARED BY DHJ		CHECKED BY <i>[Signature]</i>	
DATE <i>[Signature]</i>		DATE <i>[Signature]</i>	
TREASURY			
SERVICE REPRESENTATIVE			
for Dir. Naval Pay Accting.			

STATEMENT OF WAR SERVICE GRATUITY - NAVY

Deceased Member's Name **Paul Chisholm LAYTON**
 (Christian Names) (Surname)

Payee **Director of Estates for service estate of Paul C. LAYTON**
 Address **308 Sparks St. Ottawa, Ont. N.S. V2S2T9**

Register No. **1106**
 File No. **V25279**
 Date **1 Oct 45**
 Service No. **V25279**
 Final Rank or Rating **LOG. WTR.**
 Date of Discharge **7 May 44**

Date of termination of overseas service **7 May 44**

A. TOTAL QUALIFYING SERVICE
 No. of days **1517** equal to **50** complete periods at \$7.50
30

\$ **375-00**

B. QUALIFYING OVERSEAS SERVICE
 No. of days **152** less **17** ineligible days equal to **135** days @ 25¢ per day

\$ **33-75**

C. SUPPLEMENT FOR OVERSEAS SERVICE
 DAILY RATES AT DISCHARGE

Pay	\$	2.25	-
Subsistence or Lodging and Provision Allowance	\$	1.45	-
Additional Pay	\$	05	-
	\$	13	-
	\$		-
	\$		-
	\$		-
Dependents' Allowance 1/30 of \$	\$		-
Total	\$	3.88	x 7 = \$ 27.16
No. of days		152	x \$ 27.16 = 22.56
		183	

D. WAR SERVICE GRATUITY **431.31**

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

F. TOTAL AMOUNT PAYABLE **431.31**

G. YOUR PORTION OF GRATUITY IS
 Dependents' Allowance in issue to you \$ _____ of \$ _____ = \$ **431.31**
 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> </u>	6	<u> </u>
2	<u> </u>	7	<u> </u>
3	<u> </u>	8	<u> </u>
4	<u> </u>	9	<u> </u>
5	<u> </u>	10	<u> </u>

See sheet below

STATEMENT OF WAR SERVICE GRATUITY - NAVY

Decedent's Name **Paul Chisholm LAYTON**
 (Christian Names) (Surname)

Payee **Director of Estates for Service Estate of**
 Address **308 Sparks St. Paul C. LAYTON**
Ottawa, Ont. N.S.V-25279
 Register No. **1106**
 File No. **V 25279**
 Date **3 Apr 45**
 Service No. **V 25279**
 Final Rank or Rating **LDC. WTR**
 Date of termination of overseas service **7 May 44**
 Date of Discharge **7 May 44**

A. TOTAL QUALIFYING SERVICE
 No. of days **1517** equal to **50** complete periods at \$7.50
30

\$ **375.00**

B. QUALIFYING OVERSEAS SERVICE
 No. of days **152** less **17** ineligible days equal to **135** days @ 25¢ per day

\$ **33.75**

C. SUPPLEMENT FOR OVERSEAS SERVICE
 DAILY RATES AT DISCHARGE

Pay	\$	2.25	-
Subsistence or Lodging and Provision Allowance	\$	1.45	-
Additional Pay	\$.05	-
	\$	13	190
Dependents' Allowance 1/30 of \$	\$	-	-
Total	\$	3.75	x 7 = \$ 26.25
No. of days		152	x \$ 26.25
		183	

~~21.80~~
~~19.36~~

D. WAR SERVICE GRATUITY

~~428.11~~

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

430.55

F. TOTAL AMOUNT PAYABLE

430.55

G. YOUR PORTION OF GRATUITY IS
 Dependents' Allowance in issue to you \$ _____ of \$ = \$ **430.55**
 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.

		Treasury	
Prepared by	Checked by	Checked by	Date

Service Representative

- D.N.P.A. CHECK
- 1 MM
 - 2 MM
 - 3 MM
 - 4 MM
 - 5 MM
 - 6 MM
 - 7 MM
 - 8 MM
 - 9 MM
 - 10 MM

This is the Last Will and Testament of me, Paul Chisholm Layton of the Village of Great Village, in the County of Colchester in the Province of Nova Scotia, presently on duty with the Royal Canadian Naval Volunteer Reserve in the City of Toronto, in the Province of Ontario, hereby revoking all former wills or testamentary dispositions at any time heretofore made, and declaring this only to be and to contain my Last Will and Testament.

I give, devise and bequeath all my estate, both real and personal, of which I die possessed or entitled to, including the proceeds of all policies of insurance on my life, unto my Executor and Trustee, hereinafter named, upon the following trusts:

1. To sell, call in, convert all my said estate, ^{into money,} including all policies of insurance at such time or times as my said Executor and Trustee deems in the best interests of my Estate.
2. To pay my just debts, funeral and testamentary expenses so soon as conveniently may be, after my decease.
3. To pay one-third of the full balance of my estate then remaining to my fiancée, Edith Myrna Smith, of the Village of South Athol in the County of Cumberland in the Province of Nova Scotia, for her sole use absolutely.
4. To pay the remaining two-thirds of the proceeds of my said estate to my Mother, Mrs. Florence Chisholm Layton of the Village of Great Village, in the County of Colchester, in the Province of Nova Scotia, for her sole use absolutely.

And I do hereby appoint my father, Max MacDonald Layton of the said Village of Great Village, to be sole Executor and Trustee of this, my Last Will and Testament.

IN WITNESS WHEREOF I have hereunto set my hand in the said City of Toronto, this 24th day of July, 1943.

Paul Chisholm Layton

Signed, published and declared by the Testator, Paul Chisholm Layton, as and for his Last Will and Testament, in the presence of us both present together at the same time who in his presence and at his request and in the presence of each other have hereunto subscribed our hands as witnesses.

Helen R. Galbraith
James C. Brown

DISTRIBUTION OF SERVICE ESTATES

TL

Estates Form "P. 4"

NAVY

Name: LAYTON, Paul C. No.: V. 25279
 Surname Christian Names
 Rank L/Wtr. Unit H.M.C.S. "VALLEYFIELD" Date of Death 7-5-44

AMOUNT

Date: 27-2-45
 L.P.C.....\$ **108.18**
 Other Credits.....
 Total..... **108.18**

SHARE	RELATIONSHIP	NAME AND ADDRESS	AMOUNT
All	Father	Max M. Layton, Executor of will of Paul C. Layton, deceased. GREAT VILLAGE, N.S.	108.18
TO BE FORWARDED BY REG. MAIL DIRECT			
		P4. TO TREAS. <i>19/3/45</i>	

AUTHORITY					
H.Q. F.E. No.	VOTE	PRI	H.Q. SUB.	OBJ.	AMOUNT
9999	831	00	50	000	\$108.18
CLASSIFIED BY <i>Original Signed by K. L. McCUAIG</i>			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

Great Village N.S.
Mar 8 1945

Department of National Defence
Naval Service
Ottawa Can.



File NQ N.S. V-25279. F
Estate Branch

Dear Sirs :- on Oct 20/44 you
wrote with regard to back pay and
allowances re Ltdy Wbr Paul C. Layton
(deceased) # V25279, RC N.V.P.
When can we expect to hear from
you with regard to same?

Also please send us "Gratuity Claim
form" we understood the post
office was supposed to have these
forms but our post office has had

any.
Kindly advise with regard to
same.

Yours truly
Max M. Layton Executor
and father
of Paul C. Layton

MS

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

612
 2
 NAVY

DECEASED
MEMBER'S
NAME

Paul Chisholm
 (CHRISTIAN NAMES)

LAYTON
 (SURNAME)

REGISTER NO.

1106

FILE NO.

NSV-25279

DATE

5 Oct. 45

PAYEE

Director of Estates,) for Service Estate of

SERVICE NO.

V-25279

ADDRESS

308 Sparks St.) Paul C. LAYTON

FINAL RANK OR RATING

Ldg. Wtr.

Ottawa, Ont.)

N.S.V-25279

DATE OF DISCHARGE

7 May 44

DATE OF TERMINATION OF OVERSEAS SERVICE

7 May 44

A. TOTAL QUALIFYING SERVICE

NO. OF DAYS 1517 EQUAL TO 50 COMPLETE PERIODS AT \$7.50

\$ 375.00

B. QUALIFYING OVERSEAS SERVICE

NO. OF DAYS 152 LESS 17 INELIGIBLE DAYS, EQUAL TO 135 DAYS @ 25c. PER DAY

\$ 33.75

C. SUPPLEMENT FOR OVERSEAS SERVICE

DAILY RATES AT DISCHARGE

PAY \$ 2.25
 SUBSISTENCE OR LODGING
 AND PROVISION ALLOWANCE \$ 1.45
 ADDITIONAL PAY 1 B. \$.05
 HLM \$.13

DEPENDENTS' ALLOWANCE 1/30 OF \$ Nil

TOTAL \$ 3.88 x 7 = \$ 27.16

NO. OF DAYS 152 x \$ 27.16

\$ 22.56

D. WAR SERVICE GRATUITY

\$ 431.31

E. DEDUCTIONS

OVERPAYMENT OF

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

OTHER DEDUCTIONS

\$ Nil

F. TOTAL AMOUNT PAYABLE

\$ 431.31

G. YOUR PORTION OF GRATUITY IS—

DEPENDENTS' ALLOWANCE IN ISSUE TO YOU \$ _____ OF \$

=\$ 431.31

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

DHJ

CHECKED BY

TREASURY

CHECKED BY

DATE

SERVICE REPRESENTATIVE

for Dir. Naval Pay Accting.



DISTRIBUTION

SERVICE

NAVY ✓
 ARMY
 AIR FORCE
 C. E. F.

NAME Layton, Paul Chisholm

NO: NSV-25279 RANK Ldg. Wtr

REGT: HMCS Valleyfield DATE OF DEATH 7-5-44

PAY TO: Executor - Father

W. S. G. 431.31 ✓

L. F. C. 108.18 ✓

OTHER CREDITS.

Max M. Layton
Executor of the will of
Paul C. Layton deceased
Great Village, Nova Scotia Prov Dist

TOTAL. 539.49 ✓

108.18 ✓

Prov Dist 431.31 ✓

DISTRIBUTION OF SERVICE ESTATES

DME

Estates Form "P. 4"

NAVY

Name **LAYTON** **Paul C.** No. **V 25279**
Surname Christian Names

LDG. WTR. **HMCS Valleyfield** **7-5-44**
Rank Unit Date of Death

AMOUNT **W.S.G.** **431.31**
 L.P.C.....\$ **108.18**

Date **3-12-45**

Other Credits.....

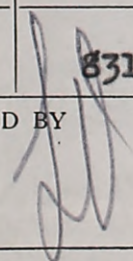
Total..... **539.49**
 Prev.dist. **108.18**
 This dist. **431.31**

SHARE	RELATIONSHIP	NAME AND ADDRESS	AMOUNT
All	Father	Max M. Layton, (Executor of the will of Paul C. Layton, deceased) GREAT VILLAGE, N.S.	431.31

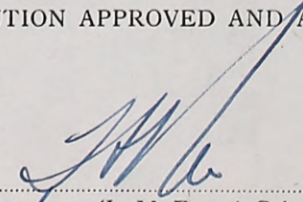
P4. TO TREAS.

DEC 6 1945

8-12
WSG

AUTHORITY					
H.Q. F.E. No.	VOTE	PRI	H.Q. SUB.	OBJ.	AMOUNT
9999	831	00	50	000	\$431.31
CLASSIFIED BY 			EXAMINED BY		
			For Chief Treasury Officer		

DISTRIBUTION APPROVED AND AUTHORIZED



(L. M. FIRTH) Colonel
 Director of Estates

AUDITED FOR PAYMENT

.....
 For Chief Treasury Officer



Department of National Defence

Naval Service

126731

OTTAWA, Ont., 30 August, 1944.

IN REPLY PLEASE QUOTE

N.S. V-25279, PERS. (N)



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, Official No., UNIT	PARTICULARS RE DEATH	NEXT OF KIN
LAYTON, Paul Chisholm, Leading Writer V-25279, R.C.N.V.R.	Missing, presumed dead to date 7 May, 1944. He was serv- ing in H.M.C.S. "VALLEYFIELD", which was torpedoed and sunk by enemy action while on Convoy es- cort duty in the Atlantic.	Mother: Mrs. Florence C. Layton, Great Village, N. S.

<u>In favor of</u>	<u>ALLOTMENTS IN FORCE</u>	<u>Amount</u>	<u>Initials</u>
Max-Layton	Nil		
Great-Village--N.S.	Nil	Nil	H.D.

Will: No record.

Yours truly,

A.B. Money

for SECRETARY, NAVAL BOARD.

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



SEP 6 1944

FOR ENCLAVEMENT WITH BUNDLE

DATE

4411: O 220074

A-32540 (2)

RESULT OF PROFESSIONAL EXAMINATION

FOR RATING OF.....**Petty Officer Writer (ty)**.....

Name of Candidate, (In full)....**P. C. LAYTON**.....

Present rating.. **Leading Writer (ty)**. Official Number....**V. 25279**.....

The above named rating has (~~Failed~~) (Passed) for the rating of
Petty Officer Writer (ty).... to date.....**17th May, 19.43**
in accordance with Naval Order.....**2219**.....

<u>Subject</u>	<u>Maximum Marks</u>	<u>Marks Obtained</u>
Captain's Office	150	58
Ship's Office	200	70
Arithmetic	100	--
Typewriting	50	21
	<u>500</u>	<u>128</u>

[Signature]
Act. Pay. Lieut. Cdr. R.C.N.....
Accountant Training Officer,
H.M.C.S. "Cornwallis."

II.

The Commanding Officer,
H.M.C.S. ".....**YORK**....."
(Copy to: The R.C.N. Drafting Depot, Halifax, N.S.)

Forwarded for information and necessary action, in
accordance with K.R. & A.I. Article 606, paragraph 17.

H.M.C.S. "Cornwallis"
Cornwallis, N.S.

.....**30th July, 19.43**

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

H. 55-2-526

V-25279

Personnel Records Division

1. Noted in Records

2. Index Card

3. Non-Sum. Card

4. Statistical Card

5. Rango Strip (2)

6. Pension Card

7.

8.

DATE 2/4/40 L.H.

QH



N. V. 5
200-9-39
N. S. 8 15-12-5

SS/362

P/10

ROYAL CANADIAN NAVAL VOLUNTEER FORCE

P012629 1940 423

113-2423

CANADA

ATTESTATION FORM

FOR MEN OF THE ROYAL CANADIAN NAVAL VOLUNTEER RESERVE

Surname LAYTON? Official No. 25279

Christian Names Paul Chisholm Married, Single or Widower Single

Permanent Address	Religion
<u>Great Village, Col. Co., N.S.</u>	<u>United C.</u>

Date of Birth	Place of Birth	Name and Address of Next of Kin
<u>17th May, 1919</u>	Town <u>Great Village,</u> County <u>Colchester</u> Province <u>N.S.</u>	<u>Mrs. Florence C. Layton,</u> (Mother) <u>Great Village, N.S.</u>

PERSONAL DESCRIPTION ON ENROLMENT

Height	Chest Measurement	Hair	Eyes	Complexion	Wounds, Scars, Marks
Feet <u>5</u>	Inflated	<u>Dark Brown</u>	<u>Brown</u>	<u>Medium</u>	<u>Scar on left knee.</u>
Inches <u>9</u>	Deflated <u>38</u>				
Mean					

Date of Enrolment	Rating Enrolling for	Trade or Calling and in whose Employ
<u>13th March, 1940.</u>	<u>Writer (T)</u>	<u>Teller Royal Bank of Canada.</u>

(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 have never served, and am not serving in any Naval, Military, Reserve, or Territorial Force.~~ Nil for the period shown on my record of service in connection of this document.

*Cross out clause not applicable.

Served In	Rank	From	To
<u>.....Nil.....</u>			

- (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.

(Over)

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

(a) To serve from the date thereof for three consecutive years, being AND/OR DURATION OF HOSTILITIES 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 13th day of March, 1940.

Signature of applicant P. Chisholm Layton

(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 13th day of March, 1940.

A. G. Giffin
Signature of Commanding Officer.
Lieutenant R.C.N.V.R.

(D) **OATH OF ALLEGIANCE**

I, Paul Chisholm LAYTON 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 P. Chisholm Layton

Witness A. G. Giffin

Date 13th March, 1940. Rank Lieutenant 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**

Paul Chisholm LAYTON 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 Special Service Division of the R.C.N.V.R.

MEDICALLY FIT

J. P. Anderson
Commanding Officer.
Commander R.C.N.

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.

A. P. Anderson
SURGEON COMMANDER



**CERTIFICATE OF MEDICAL EXAMINATION OF OFFICERS, MEN AND BOYS,
NAVAL SERVICE OF CANADA**
(R.C.N. OR RESERVE FORCES)

25 1940
1132423
P012630 CANADA

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 LAYTON Paul Cheshalm
candidate for entry as Writer R.C.N. V.R.(T)
and I believe him to be *in all respects fit for His Majesty's Service.
unfit for His Majesty's Service, for the reason stated below. He has signed
the Certificate given below in my presence.

Dated at Halifax N.S. the 13 of March 19 40

Albert Karoche
Examining Medical Officer
SURGEON COMMANDER
(Rank)

*Delete one

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

Age { Years Months	Weight without Clothes	Height with Bare Feet	General Development	Chest Girth	Vision by— (i) Snellen's Types (ii) Colour Vision	Vaccinated or re- vaccinated for Small Pox (Date)	Lungs, Heart, etc.	Abdomen, Hernia, etc.	Limbs and Joints	Skin	Ears and Hearing	Testes, Ventricles, etc.	Mouth, Teeth (No. deficient and No. defective, if any), Nose, Tonsils, etc.	Anus, Hemorrhoids, etc.
(a)	(b)	(c)	(d)	(e)	(f)	(g)	(h)	(i)	(k)	(l)	(m)	(n)	(o)	(p)
20 ⁹ / ₁₂	178 lbs.	5' 8 1/2 ins.	Good.	inches (a) maximum 41 (b) minimum 38 (c) mean 39	right eye 6/9 left eye 6/9 colour vision N (D.H.)	vac- cined	N.	N.	N.	N.	N.	N.	Deficient 1 Subacute 3 Heart	N.

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

CERTIFICATE TO BE SIGNED BY CANDIDATE

I hereby certify that to the best of my belief I have never suffered from Fits, †Incontinence of Urine, Discharge from the Ears, or any other disease likely to render me unfit for His Majesty's Service. ‡I am willing to undergo, after entry, such dental treatment as may be authorized.

Paul C. Layton
Signature of Candidate

When a Candidate is subject to a defect or disability, the following Certificate is to be filled up

This Candidate is the subject of.....
* {which renders him medically unfit for entry,
not considered of sufficient importance to cause his rejection, he being desirable in other respects.

*Delete one

.....
Examining Medical Officer
(Rank).....

† The exact meaning of this is to be clearly explained to the Candidate by the Examining Medical Officer.
‡ Strike out if inapplicable.

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

NAME IN FULL LAYTON Paul Chisholm RANK/RATING Ldg. W.tra. OFF. NO. V25279 ADDRESS

SHIP	SERVICE			AREA	QUALIFYING PERIODS IN DAYS					STARS MEDALS	✓ 1 2	ELIGIBLE FOR AWARDS OF	
	FROM	TO	DAYS		FROM	TO	1939-45	ATLANTIC	DEFENCE				CLASP C.V.S.M.
	13 Feb 40											1939-45	1 Star
<i>Halbyfield</i>	8 Dec 43	7 May 44	152	<i>Atln.</i>								ATLANTIC	1 Star
<i>Discharged "Dead" to date 7 May 44</i>												FRANCE G.	
												AFRICA	
												PACIFIC	
												BURMA	
												ITALY	
												DEFENCE	
												C.V.S.M.	2 + Clasp
												" CLASP	
												WAR 1945	1 Medal
												WAR 1915	

VERIFIED BY *J.A.H.*
6/44

VERIFIED BY *J.A.H.* VERIFIED BY DIR. OF PERSONNEL RECORDS.

THE CANADIAN PENSION COMMISSION

MEMORANDUM

To.....Pension Medical Examiner,.....HALIFAX.....

.....Ottawa,.....Sept. 21st, 1944......

From.....Head Office.....

V-25279 Ldg. Writer LAYTON, Paul C.

P. & N. H. 1077-P

The Department of National Defence, **Naval Service**,
officially reports that the marginally named was reported -

Missing, presumed dead, when H.M.C.S. "Valleyfield"
was torpedoed and sunk by enemy action in the Atlantic,
on the **7th May, 1944** ~~on~~service **Canada & High Seas.**

His next of kin is reported as - **Mother -**
Mrs. Florence C. Layton,
Great Village, N.S.

The Addressograph Stencil shows payment of Assigned Pay of

\$ 10.00 a month to - **Max M. Layton,**
Great Village,
N.S.
(relationship not stated)

As no D.A. was payable the Commission will not take
any action unless a claim is filed.

/LR

E. Clewes,
for
Canadian Pension Commission.

SERVICE CERTIFICATE

N. V. No. 17
3M-9-37
N.S. 815-11-17

DURATION OF HOSTILITIES

Name in full Paul Chisholm LAYTON Company Special Service

ROYAL CANADIAN NAVAL VOLUNTEER RESERVE

Training Headquarters HALIFAX. Official Number V. 25279

Date of Birth 17th May, 1919.

Place of Birth Great Village, Colchester Co., Nova Scotia.

Usual Place of Residence Great Village, Col. Co. N.S.

Trade brought up to Teller--Royal Bank of Canada.

Name and Address of next of Kin (father) Max **O.H.F.** same address

Religious Denomination United Church.

Can Swim _____

PARTICULARS OF SERVICE

DATE OF ACTUAL VOLUNTEERING	DATE OF ENROLMENT	PERIOD VOLUNTEERED FOR	RATING ON ENROLMENT	MEDALS, DECORATIONS, ETC.	
				DATE RECEIVED	NATURE OF DECORATION
<u>13th March, 1940.</u>		<u>Duration of Hostilities</u>	<u>Writer (T)</u>	<u>28 Feb 44</u>	<u>Can Volunteer Service Medal and Clasp - Provisional Award</u>

PERSONAL DESCRIPTION

	HEIGHT		COMPLEXION	HAIR	EYES	MARKS, WOUNDS, SCARS
	FEET	INCHES				
On Entry	<u>5</u>	<u>9</u>	<u>Medium</u>	<u>Dark Brown</u>	<u>Brown</u>	<u>Scar on left knee.</u>
On attaining 28 years						
Further Description if necessary						

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

PROVINCE OF NOVA SCOTIA—CERTIFICATE OF REGISTRATION OF DEATH

1. PLACE OF DEATH { County of At Sea Municipality of _____ Registered No. _____
 (For use of Registrar General only)
 If in City or Town _____ Street _____ House No. _____
 (Name) (If death occurred in a hospital or institution, give the name instead of street and number)

2. LENGTH OF STAY (in years, months and days)
 (a) In City, Town or Rural Division where death occurred _____ (b) In Province _____ (c) In Canada (if immigrant) _____

3. NAME OF DECEASED LAYTON Paul Chisholm
 (Surname) (Given name or names)

RESIDENCE No. _____ Street _____ City, Town or Rural Division Great Village Province N.S.
 (Residence means usual place of abode. Post Office Address for residents in rural parts not sufficient)

4. Sex <u>Male</u>	5. Nationality (Citizenship) <u>Canadian</u>	6. Racial Origin	7. Single, Married, Widowed or Divorced (write the word) <u>Single.</u>
-----------------------	----------------------------------------------------	------------------	----------------------------------------------------------------------------------

8. BIRTHPLACE Nova Scotia.
 (Province or Country)

9. DATE OF BIRTH May 17th 1919
 (Month) (Day) (Year)

10. AGE in	Years <u>25</u>	Months	Days	If less than one day old hrs. or min.
------------	--------------------	--------	------	------------------------------------------

11. Trade, profession or kind of work as spinner, teamster, office clerk, etc. Teller

12. Kind of industry or business, as cotton-mill, lumbering, bank, etc. Royal Bank of Canada.

13. Date deceased last worked at this occupation _____

14. Total yrs. spent in this occupation _____

15. If married give name of wife or husband of deceased _____

FATHER

16. NAME _____

17. BIRTHPLACE _____
 (Province or Country)

MOTHER

18. MAIDEN NAME _____

19. BIRTHPLACE N.S. Money
 (Province or Country)

20. Signature of informant W.A. Money
 Address Naval Service Headquarters, Ottawa, Ont.
 Relationship to deceased Officer i/c, Naval Personnel Records

21. Place of burial, cremation or removal Body not recovered.
 Date of burial or removal _____

22. UNDERTAKER _____
 (Name and address)

MEDICAL CERTIFICATE OF DEATH

23. DATE OF DEATH May 7th 1914
 (Month) (Day) (Year)

24. I HEREBY CERTIFY that I attended deceased from: _____
 _____ 19 _____ to _____ 19 _____
 and last saw h. _____ alive on _____ 19 _____

CAUSE OF DEATH

I
 Immediate cause (a) Missing, presumed dead, when H.M.C.S. "VALLEYFIELD" was torpedoed & sunk by enemy action in the Atlantic.
 Give disease, injury or complication which caused death, not the mode of dying, such as heart failure, asphyxia, asthenia, etc. due to _____

Morbid conditions, if any, giving rise to immediate cause (stated in order proceeding backwards from immediate cause). (b) _____ due to (c) _____

II
 Other morbid conditions (if important) contributing to death but not causally related to immediate cause. _____

25. If a woman, was the death associated with pregnancy? _____

26. Was there a surgical operation? _____ Date of operation _____ 19 _____
 State findings _____ Was there an autopsy? _____

27. If death was due to external causes (violence) fill in also the following:—
 Accident, suicide or homicide? _____ Date of injury _____ 19 _____
 (State which) (How sustained)
 Manner of injury _____
 Nature of injury _____
 Specify whether injury occurred in industry, in home, or in public place _____

Signed by _____ M.D.
 Address _____ Date _____ 19 _____

28. Registrar's Record Number _____

29. Filed _____ 19 _____
 (Division Registrar)

SEC. 46—VITAL STATISTICS ACT MAKES IT THE DUTY OF THE UNDERTAKER OR PERSON ACTING AS UNDERTAKER TO OBTAIN ALL THE PARTICULARS REQUIRED IN THE "CERTIFICATE OF REGISTRATION OF DEATH" AND TO FILE THE SAME WITH THE DIVISION REGISTRAR WHO SHALL ISSUE THE BURIAL PERMIT. WRITE PLAINLY WITH UNFADING INK. THIS IS A PERMANENT RECORD. (See reverse side for instructions.)

Every item of information should be carefully supplied.

MEDALS AND MEMORIALS—DECEASED PERSONNEL

RCNVR "VALLEYFIELD" Mar./45

REGISTRATION NO. DATE OF DESPATCH

(1) MEDALS
PERSON

ENTITLED TO Mr. Max M. Layton - Father

ADDRESS: Great Village, Nova Scotia.

(2) MEMORIAL CROSS

WIDOW

ADDRESS:

(3) MEMORIAL CROSS

MOTHER Mrs. F. C. Layton

ADDRESS: GREAT VILLAGE, N.S.

MEMORIAL BAR

DATE DESP

REGN. NO

691

(2)

(3) 10 October 1944

DECEASED 7 May 1944

AWARDS NAVY

D.D.

LAYTON	Paul Chisholm	V-25279	L/Wtr.	FILE No.
SURNAME (IN BLOCK LETTERS)	CHRISTIAN NAMES	REG. No.	RANK ON DISCHARGE	C.A.S.F. UNIT
<u>WAR SERVICE</u>				
<u>BADGE</u>				
(CLASS)	Nil	DATE DESPATCHED:		

ADDRESS:

CAMPAIGN MEDALS	REGISTRATION NUMBER AND DATE DESPATCHED
1939-45 Star	
C.V.S.M. & Clasp	
War Medal	
	9419

(THE REVERSE TO BE USED FOR ESTATE PURPOSES)

V25279

OFFICIAL NUMBER

FILE NUMBER

113-L-423

OFFICIAL NUMBER

V25279

NAME LAYTON Paul Chisholm DATE OF BIRTH 17th May, 1919
(Surname) (Given Names)PLACE OF BIRTH Great Village, N.S. OCCUPATION Teller (Royal Bank of Canada.)RELIGION United EDUCATIONRESIDENCE AT TIME OF ENLISTMENT: Street and No. Town Great Village Province, etc. N.S.

ENGAGEMENTS				DESCRIPTION					PREVIOUS SERVICE			
Date (in figures)			Period	Height	Hair	Eyes	Complexion	Marks or Scars	Served in	Rank or Rating	Dates	
Day	Month	Year									From	To
13	3	40	H. O.	5'9"	D. Brown	Brown	Med.	Scar on left knee.				

NEXT OF KIN RELATIONSHIP (in pencil) Mother (Layton) NAME (in pencil) Paul ChisholmADDRESS (in pencil): Street and No. Town Great Village Province, etc. N.S.

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	
28	2	44	C.V.S.M. (R&C) (NS 1012-8-5.FD 69)	19	5	41	Passed Prof. for Idg. Wtr.				
				17	5	43	Failed P.O. Wtr. (See file)				

BADGES, G.C. OR G.S.					BRIEF PARTICULARS OF WARRANT OR C.M. PUNISHMENTS AND C.P. CHARGES						
Date (in figures)			1st, 2nd or 3rd G.C. or G.S.	Granted Deprived Restored	SHIP OR ESTABLISHMENT	Wt. No.	Date (in figures)			BRIEF PARTICULARS OF OFFENCE	PUNISHMENT
Day	Month	Year					Day	Month	Year		
13	3	43	1st GCB	Granted							

FILM NO. 113-L-5427-8
DATE

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

SECOND CLASS FOR CONDUCT

From To



V25279

OFFICIAL NUMBER

NAME LAYTON

(Surname)

Paul Chisholm

(Given Names)

OFFICIAL NUMBER

V25279

P.I.B.

Ship or Establishment	Rating	From			Remarks	Character	Efficiency	Date			Non-Sub. Rating	Qualified			Re-Qualified		
		Day	Month	Year				Day	Month	Year		Day	Month	Year	Day	Month	Year
Stadacona	Writer	13	3	40		V.G.	Sat.	31	12	40							
Stad.	Ldg. Wtr.	1	8	41		V.G.	Supr.	31	12	41							
York	"	2	12	42	DRD H-483	V.G.	Sat.	31	12	42							
Stadacona	"	12	10	43	DRD H-2862.	V.G.	Sat.	31	12	43							
Chaleur 11	"	26	11	43	DRD H-3341.	V.G.	Sat.	7	5	44							
Valleyfield	"	8	12	43	Chaleur 11 WRD 69.												
DISCHARGED	"	7	5	44	Missing Casualty List. (249A, A13926)												
					"Presumed Dead" (Per Correction Sheet P#99)												

GENERAL REMARKS

AWARDED CANADIAN MEMORIAL CROSS to:
 Mother: Mrs. Florence C Layton,
 Great Village, N.S.
 10 October, 1944.

DATE OF BIRTH			PLACE OF BIRTH		CIVIL OCCU.		REL.	ED.	PERM. RESIDENCE			PREV. ENL.	RANK OR RATE ON ENLISTMENT		
DY.	MO.	YR.	BIRTH	MAIN	SUB	GION	P	CTY.	TOWN	SERV.	DIV.	A	BR	RANK	
17	5	19	14	830	0	40	X	104	00	0	19	0	13	90	
ENLIST. DATE			ACT. SERV. DATE			STR.	ACT. SERV. DATE			SHIP OR	RANK OR RATE				
DY.	MO.	YR.	DY.	MO.	YR.	CAT.	DY.	MO.	YR.	ESTAB.	A	OR	RANK		
13	03	40	13	03	40					12200			2393		
GENIORITY			STR.	NON-SUB		M				CODED	CHECKED				
DY.	MO.	YR.	CAT.	A	B	ST.									
01	08	41	13	00	00										

Mrs. Florence C. Layton,
Great Village, N.S.

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

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

and the following number quoted:—

H.Q. NS. V-25279 FD. 621

DEPARTMENT OF NATIONAL DEFENCE
ESTATES BRANCH
OTTAWA, ONT.

September 13 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

LAYTON, Paul Chisholm, Leading Writer

V-25279, R.C.N.V.R.

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

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

GC/

J. A. Roach
Commdr. RCNVR
Director of Estates.

ANSWER IN FULL ALL APPLICABLE QUESTIONS

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

Degrees of Relationship	RELATIVES required to be accounted for	INFORMANT'S STATEMENT			
		NAME IN FULL of any Relative, if any, in each degree specified	Age	ADDRESS IN FULL, of each surviving Relative, opposite his or her name, and date of death of each deceased relative	
1	Widow of the Deceased.....	_____			
2	Children of the Deceased and dates of their Births.....	_____			
3	Father of the Deceased.....	Max Macdonald Layton	53	Great Village ns.	
4	Mother of the Deceased.....	Florence Chisholm Layton	51	Great Village N.S.	
5	Brothers of the Deceased	Full Blood	Truman Max Layton	12	Great Village N.S.
		Half Blood	_____		
6	Sisters of the Deceased	Full Blood	Ethel Jean Layton	22	Great Village N.S.
		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.	Paul Gisholm Layton.
9	Date of his birth.	May 17, 1919
10	Place and date of his marriage.	—
11	Place and date of his parents' marriage.	Five Islands N.S. Feb. 20. 1918

PARTICULARS OF DOMICILE

12	Place where deceased was born.	Great Village, Nova Scotia
13	State, in order, the Province, State and/or County in which he resided before enlistment and the period of time in each.	(a) Nova Scotia Colchester County (b) (c) 20 years. (d)
14	Nature of employment before enlistment.	The Royal Bank of Canada
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.	Undecided.

PARTICULARS OF ESTATE

17	Did he leave a Will? If in your custody, please forward.	Yes.
18	If married, and domiciled in the Province of Quebec or in a State in the U.S.A. or in a Country under the laws of which there is community of property between spouses,—was there a marriage contract dealing with property?	Not married.
19	Did he have a Bank, Post Office or other deposit account? If so, give name and address of bank, etc., and the amount on deposit. Do you wish it administered with the pay account?	No.
20	Amount of War Savings Certificates held by deceased. Indicate where located.	None.
21	Amount of Victory Loan Bonds held by deceased. Indicate whether registered or bearer and where located.	None.
22	If deceased had life insurance, name companies and amount payable under each policy and the person named as beneficiary therein.	Standard Life Assurance Co. Mutual Life Assurance Co. of Canada \$1000 + 98.22 = Florence C. Layton.
23	Describe other assets, if any, and estimated value thereof. Use space on page 4 if necessary.	None except earnings.

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.	No. No. —
25	Have you or any other relative paid the funeral expenses or any part thereof? If so, attach itemized accounts showing amount paid, and by whom.	No.

(NOTE:—The government pays funeral expenses within the 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

ert 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

* *Father and Executor* 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.

Max M. Layton

Signature of Informant

Great Village N.S.

Address

CERTIFICATE

I hereby certify that to the best of my knowledge and belief *Max M. Layton*

*See above.

{ Name of informant } is the * *Father & Executor* of the Deceased above described. The above Declaration was made by the Informant and signed in my presence.

Dated at *Great Village* this *28* day of *September* 19 *44*

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

M M Layton

Qualification

J.P.

Address *Great Village Nova Scotia*

NOTE.—Before granting the above Certificate, care should be taken to see that the informant gives particulars concerning the death of any Relative stated by him or her to have died, and that the full name and address and age of each surviving Relative specified is stated in its proper place in the Statement opposite.

(If the deceased has no living relatives of the degrees shown on page 2, the names and addresses and relationship of other relatives should be set out below.)

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



CANADA

ATTESTATION FORM

FOR MEN OF THE ROYAL CANADIAN NAVAL VOLUNTEER RESERVE

Surname LAYTON? Official No.Christian Names Paul Chisholm Married, Single or Widower Single

Permanent Address	Religion
<u>Great Village, Col. Co., N.S.</u>	<u>United C.</u>

Date of Birth	Place of Birth	Name and Address of Next of Kin
<u>17th May, 1919</u>	Town <u>Great Village,</u> County <u>Colchester</u> Province <u>N.S.</u>	<u>Mrs. Florence C. Layton,</u> (Mother) <u>Great Village, N.S.</u>

PERSONAL DESCRIPTION ON ENROLMENT

Height	Chest Measurement	Hair	Eyes	Complexion	Wounds, Scars, Marks
Feet <u>5</u>	Inflated	<u>Dark Brown</u>	<u>Brown</u>	<u>Medium</u>	<u>Scar on left knee.</u>
Inches <u>9</u>	Deflated <u>38</u>				
Mean.....					

Date of Enrolment	Rating Enrolling for	Trade or Calling and in whose Employ
<u>13th March.</u> <u>1940.</u>	<u>Writer (T)</u>	<u>Teller Royal Bank of Canada.</u>

(B) DECLARATION TO BE MADE BY APPLICANT

I hereby declare as follows:—

- (1) That I am a British Subject, domiciled in Canada.
- (2) That I am desirous of being enrolled as a Member of the Royal Canadian Naval Volunteer Reserve Force, and that I accept and agree to abide by the rules of the said Force.
- (3) That * (a) I have never served, and am not serving in any Naval, Military, Reserve, or Territorial Force.

* ~~(b) I served in~~ Nil ~~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
	<u>.....Nil.....</u>		

- (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.

(Over)

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

(a) To serve from the date thereof for three consecutive years, being **AND/OR DURATION OF HOSTILITIES** 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 **13th** day of **March, 1940.**

Signature of applicant **P. Chisholm Layton**

(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 **13th** day of **March, 1940.**

Charles E. Giffin
Signature of Commanding Officer.
Lieutenant R.C.N.V.R.

(D) **OATH OF ALLEGIANCE**

I, **Paul Chisholm LAYTON** 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 **P. Chisholm Layton**

Witness **Charles E. Giffin**

Date **13th March, 1940.** Rank **Lieutenant 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**

Paul Chisholm LAYTON 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 **Special Service** Division of the R.C.N.V.R.

MEDICALLY FIT

J. P. Anderson
Commanding Officer.
Commander R.C.N.

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.

A. P. Anderson
SURGEON COMMANDER