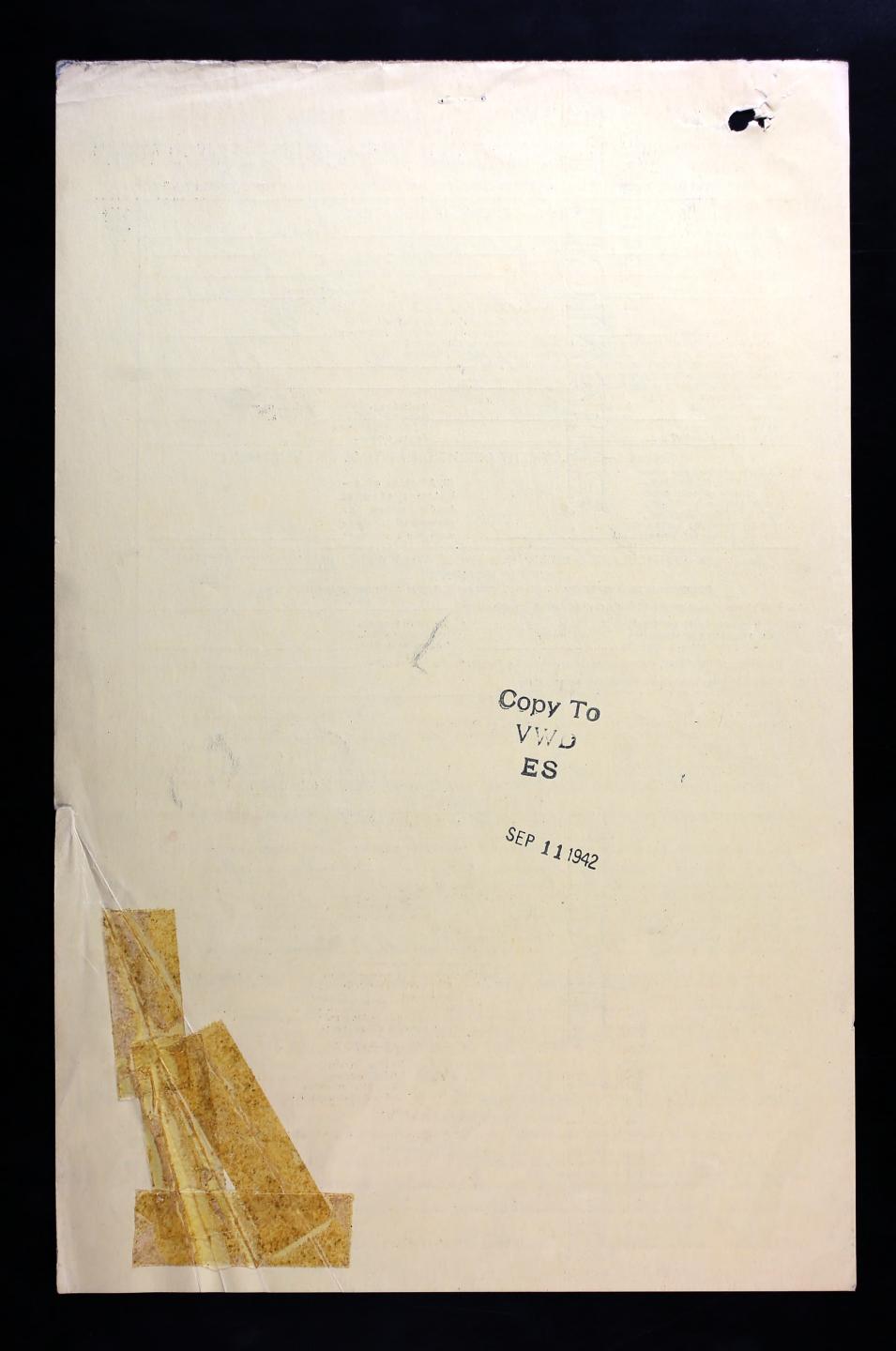




ALEXA

	ONAL HISTORY FORM 21164
	AMED FORCES. THE INFORMATION SOUGHT IS FOR THE USE OF GENERAL ADVISOR IMITTEE SET UP BY THE GOVERNMENT OF CANADA TO STUDY PLANS FOR ESTABLISH AFTER DISCHARGE. ACCURACY AND COMPLETENESS IN ANSWERING WILL BE OF
	IS GIVEN ON THE INSIDE OF COVER BEFORE COMPLETING FORM
(a) Print name in full (b) Unit (c) Arm of service (c) Arm of service (c) Bate of birth (c) Date of birth (c) Place of enlistment Section B (c) State age on (c) State definitely highest standing reached at public, tec (for instance—"4 years, Public School", "two years, H Matriculation", or "4 years technical course in printing If you attended a university, give name of university and standing or degree secured	(c) Place of residence (c) Place of residence (c) Place of residence (c) Place of enlistment (b) Date of enlistment (b) Date of enlistment (c) Place of residence (c) Place of residenc
 (a) Did you ever (b) If so, enter upon a trade for what apprenticeship? (a) What languages (b) do you ever (c) What languages 	(c) Did you finish it, how long finish it? (b) What languages do you read well?
	T CONDITION AT TIME OF ENLISTMENT
b. (a) State whether you were WORKING or NOTWORK- ING at time of enlistment. (Enter here only "Work- ing" or "Not Working", as case may be; particu- lars are asked for below)	(b) At time of en- listment of what trade union or professional society were you a member?
OF EN	NG THOSE WHO WERE UNEMPLOYED AT TIME
QUESTIONS 11 TO 17 REFER ONLY TO THOS Had you ever been employed fairly regularly since leav	E WHO ANSWER "NOT WORKING" IN QUESTION 10 (a)
a. (a) If answer to 11 be "Yes",	(b) State how long you had worked at this trade or occupation
	n for which you feel qualified
. If you had been employed after leaving school, state when you last worked, fairly regularly before enlistme	ent
 Give details of last f. employer, if any: Name	", or "building
contractor", or "boot factory", or "iron foundry", or " (a) If your last employment was	retail store", etc.)
in a business of your own state	(b) Date of dis- continuing it
OF E	NG THOSE WHO WERE EMPLOYED AT TIME INLISTMENT "WORKING" IN QUESTION 10 (a), PLEASE READ THESE QUESTIONS AND REPLY G TO YOU AT TIME OF ENLISTMENT
IF YOU WERE AN EMPLOYEE WORKING FOR AN EMPLOYE	R UP TO THE TIME OF ENLISTMENT, PLEASE ANSWER QUESTIONS 18 TO 21
 Nature of employer's business (for instance, "farmer contractor", or "boot factory", or "iron foundry", or "respecific occupation (a) Did your employer promise (b) Did your employer promise 	Address ", or "building etail store", etc.) (b) Number of years' experience at this occupation with any employer
 (a) State nature of business, or professional practice	ARS OF FARMING EXPERIENCE
 (a) Do you wish to engage (b) Do you feel in farming after the war? (a) Were you (b) How many years' actual born on a farm? 	competent (c) If so, in what m? kind of farming? al (c) In what provinces ou had? did you have experience? G MISCELLANEOUS
 Have you made any arrangements other than indicated If so, state nature of your plans (for example, do you to return to school, or have you been assured of a job, State any employment preference or ambition you 	above, for re-establishment in civil life after discharge?



10

Mrs. Janet McDonald, 318 Belmont Ave., West Kildonan, Man. Any further communication on this subject should be addressed to:---

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

and the following number quoted:-

H.Q. V-46463 FD. 543

DEPARTMENT OF NATIONAL DEFENCE

1

ESTATES BRANCH OTTAWA, ONT.

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

McDONALD, Richard Alexander Angus Able Seaman,

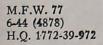
V-46463, R.C.N.V.R.

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.

ander Æ Director of Estates.

GC/



6

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:

	NW NEW YORK	11 11 10 10 10 10 10 10 10 10 10 10 10 1	INFORMANT'S STATEMENT									
Degrees of Rela- tion- ship	required to b	TIVES e accounted for	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 I	Deceased	NIL									
		3.976		1								
2	Children of the dates of their	Deceased and Births	NiL		add and and a second seco							
3	Father of the I	Deceased	M. P. P. USA 11									
4	Mother of the 1	Deceased	Malcolm the Donald Janet the bonald		318 Belmont here WK 318 Belmont the Wildonan Wimip							
5	Brothers of the Deceased	Full Blood	NIL									
	*	Half Blood	NIL									
6	Sisters of the Deceased	Full Blood	NIL									
		Half Blood	NIL									
7	of the full or t	s or sisters (whether he half blood) of the are dead, and date of	Names and ages of their children (if any)		Address of their children							
			NIL									

•

ANSWER FULLY EACH QUESTION ON THIS PAGE PARTICULARS AS TO IDENTITY

3.

13

te of his birth. ce and date of his marriage. ce and date of his parents' marriage. PARTICULARS OF D ce where deceased was born. te, in order, the Province, State and/or County in which he ded before enlistment and the period of time in each. cure of employment before enlistment. te whether he owned the premises in which he lived, and, if where situated. ne place where deceased stated he intended to make his	Aichard Herander Angus hi Donald 24 January 1424 N/A West Hildonan June 16 1922 OMICILE (a) (b) Manitoba (c) (d)
ce and date of his parents' marriage. PARTICULARS OF D ce where deceased was born. te, in order, the Province, State and/or County in which he ded before enlistment and the period of time in each. cure of employment before enlistment. te whether he owned the premises in which he lived, and, if where situated.	N/A West Hildonan June 16 1922 OMICILE Ulest Hildonan Winnifrey Inam (a) (b) Thanitoba (c) (d)
PARTICULARS OF D ce where deceased was born. te, in order, the Province, State and/or County in which he ded before enlistment and the period of time in each. cure of employment before enlistment. te whether he owned the premises in which he lived, and, if where situated.	OMICILE <u>Hest Hildonan Minnifrey Inam</u> (a) (b) Incinitolia (c) (d)
ce where deceased was born. te, in order, the Province, State and/or County in which he ded before enlistment and the period of time in each. cure of employment before enlistment. te whether he owned the premises in which he lived, and, if where situated.	OMICILE <u>Hest Hildonan Minnifrey Inam</u> (a) (b) Incinitolia (c) (d)
te, in order, the Province, State and/or County in which he ded before enlistment and the period of time in each. cure of employment before enlistment. te whether he owned the premises in which he lived, and, if where situated.	(c) (d)
ded before enlistment and the period of time in each. Eure of employment before enlistment. The whether he owned the premises in which he lived, and, if where situated.	(c) (d)
te whether he owned the premises in which he lived, and, if where situated.	Office blenk
where situated.	00
ne place where deceased stated he intended to make his	
manent home.	318 Belmont Are best Hildon
PARTICULARS OF	FESTATE
he leave a Will? If in your custody, please forward.	ho
arried, and domiciled in the Province of Quebec or in a State he U.S.A. or in a Country under the laws of which there is imunity of property between spouses,—was there a marriage tract dealing with property?	N/A
he have a Bank, Post Office or other deposit account? If so, e name and address of bank, etc., and the amount on deposit. you wish it administered with the pay account?	The Royal Bank of Canad #189.78 West Hildonan YES
ount of War Savings Certificates held by deceased. Indicate ere located.	4 at 318 Belmont Sal
ount of Victory Loan Bonds held by deceased. Indicate sther registered or bearer and where located.	1-100 Bictory Bond L.T. 41353817 At 318 Belmont Ave Vest Hildonan
deceased had life insurance, name companies and amount able under each policy and the person named as beneficiary rein.	At 318 Belmont Ave, Hist Hildonan The Brudential Imunance to of America Policy 1000.00 War clause 7000 hing cerany ment In Donald
scribe other assets, if any, and estimated value thereof. Use ce on page 4 if necessary.	NiL
OTHER PARTICU	JLARS
the deceased after enlistment incur any debts for:— (a) His own separate board and lodging while on service. (b) Service clothing and equipment. 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.	do
ve you or any other relative paid the funeral expenses or any	ho
	the deceased after enlistment incur any debts for:

4. 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 * MothER of the deceased. Mr ganet the Dona Signature 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. of Informant 318 Belmont Ane West Hildonan MinniperAddress CERTIFICATE I hereby certify that to the best of my knowledge and belief. added donal 00 *See above. above described. The above Declaration was made by the Informant and signed in my presence. Dated at UN underlan this 19th day of Le DV Signature of Clergyman, Priest, Magistrate, Commissioner or Notary Public or Com-missioned Officer of any of His Majesty's Forces. Cath Lua Qualification Commun NY COMMISSION KAPIRKS ier Nest 7 unapol O Address??. il 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

Unemployment Insurance Book With Employer.

Mar 11

31



I.C.N.S. 69690

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

ATTESTATION FORM (HOSTILITIES FORM)

PERMAN	IENT ADDRESS			RELIGION					
318 Belmont Ave., N	Vest Kildonan	, Man.		Presbyterian					
DATE OF BIRTH	*PLACE OF	BIRTH	NAME AND	NAME AND ADDRESS OF NEXT OF KIN					
24th January, 1924 Original Nationality of: Father Scottish Mother Scottish	Town West Kild County Province Manitoba	1. 10	318 Bel	Janet S. McDONALD, (Moth 318 Belmont Ave., West Kildonan, Man.					
*If not the son of natural born British (A) PERSC	parents, particulars to be gi			ENT					
HEIGHT CHEST MEASUR	EMENT HAIR	EYES	COMPLEXION	WOUNDS, SCARS, MARKS					
Feet Inflated	5 <u>2</u> 32 Dark 82 42	Blue	e Fair	Nil.					
EDUCATIONAL	STANDING		TRADE OR CALLIN	G AND IN WHOSE EMPLOY					
Grade X1	· · · · · · · · · · · · · · · · · · ·	H	f fice Clerk udson Paper innipeg, Ma	Co.,					
DATE OF ENROLMENT	RATING FOR WHICH	ENROLLED	R.C.N.V.R. DIVISION	N, OR OTHER ESTABLISHMENT, HICH ENROLLED					
Divisional Strength 18th August, 1942	Ordinary S	eaman	H.M.C.S.	Chippawa					
(B) DECI	ARATION TO	BE MA	DE BY APPL	JICANT					
The same south the second that									
I hereby declare as follows:		Canada.							
I hereby declare as follows: (1) That I am a British Su (2) That I am desirous of I	ubject domiciled in (being enrolled as a m	nember of t		an Naval Volunteer Reserve					
I hereby declare as follows:- (1) That I am a British So (2) That I am desirous of Force, and that I accept and a	ubject domiciled in (being enrolled as a m gree to abide by the er served, and am no	nember of t rules of th	ne said Force.						
I hereby declare as follows:- (1) That I am a British So (2) That I am desirous of I Force, and that I accept and a (3) That * (a) I have never Force.	ubject domiciled in (being enrolled as a m gree to abide by the er served, and am no	nember of t rules of th t serving in	ne said Force. n any Naval, Mili	an Naval Volunteer Reserve tary, Reserve, or Territorial iod shown, and attach my					
I hereby declare as follows:- (1) That I am a British So (2) That I am desirous of Force, and that I accept and a (3) That * (a) I have never Force. * (b) IXSERVED TO	ubject domiciled in (being enrolled as a m gree to abide by the er served, and am no	nember of t rules of th t serving in	ne said Force. n any Naval, Mili XXXX for the per	tary, Reserve, or Territorial					

(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.....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 t 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.

H.M.C.S. CHIPPAWA

(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.

August, 1942 18th Dated this.....day of..... Signature of applicant (C) CERTIFICATE OF ATTESTING OFFICER I hereby certify that all the foregoing statements were made by the volunteer above named, in my 18thpresence, and that he has made and signed the above declaration in my presence on this..... August, 1942 day of..... Signature of and rank of Attesting Officer. LIEUTENANT R. C. N. Y. A. (D) OATH OF ALLEGIANCE Richard Alexander Angus McDONALDdo 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 18th Augus 1942 Date. Rank The Oath of Allegiance may be administered by a Commissioned Officer of the Naval Service. (E) CERTIFICATE OF ATTESTING OFFICER Richard Alexander Angus McDONALD having been duly enrolled to serve in the Royal Canadian Naval Volunteer Reserve Force, I have caused his name and every prescribed particular to beDivision of the R.C.N.Y.R. or in the appropriate official documents. Attesting Officer. LIEUTENANT R. R.C.N.V.R. Division

18th August

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.

(or other establishment).

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 t enter the Alaman Branch of the Nava Service by the prospect of being transferred at some futur date to another Branch.

H.M.C.S. CHIPPAWA

x Ritchie M Donald



113-M-5473

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

Certificate of Medical Examination of Officers, Men and Boys

NAVAL SERVICE OF CANADA

(R.C.N. OR RESERVE FORCES)

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

I, the undersigned, have examined Richard Alexander Angus McDONALD

 ‡candidate for entry as
 Ordinary Seaman (W.T.)

 and I believe him to be *{in all respects fit for His Majesty's Service
 He has signed the Certificate

 given below in my presence.
 Istrike out if inapplicable
 *Delete one.

 Eyes react o L.& A. Reflexes normal

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

Age	Yrs. Mos. 18 6	(j) Date of last Vaccina- tion for Smallpox	Never
Height with bare feet	$\begin{array}{c c} Feet & In. \\ 5 & 6\frac{1}{4} \end{array}$	(k) General Development	Fairly good
Weight without clothes	123 ¹ / ₂ Pounds	(l) Nose, Throat and Tonsils	Normal
Ears and Hearing	Normal	(m) Heart and Lungs	B.P.130/80 Normal
Chest Girth	$\begin{array}{cccccccccccccccccccccccccccccccccccc$	(n) Abdomen Hernia, etc.	Normal
Teeth	Deficient Defective Dentures	(o) Limbs and Joints	Normal
Vision by Snellens	without Rt. Lt. glasses 6/5 6/5	(p) Skin	Normal .
Types	with glasses Rt. Lt. where worn	(q) Anus Haemorrhoids	Normal
Colour Vision	Ishihara Normal R.C.N. Lantern	(r) Testes Varicocele	Normal
Chest x-ray approved positive doubtful	APPROVED Que 20 - 194	(s) Urine Sugar & Alb.	Negative

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 the Ears, or any other disease likely to render me unfit for His Majesty's Service. *‡I am willing to undergo*, entry, such dental treatment, vaccination, or inoculations as may be authorized.

	Ritchie McDonald
ning of this is to be clearly explained to the Candidate by the applicable.	Examining Medical Officer. Signature of Candidate
When a Candidate is subject to a defe	ct or disability, the following information is to be inserted:
s Candidate is the subject of	
nders him medically unfit for service, dered of sufficient importance to cause h IF REJECTED insert here UNFIT in block letters H. M. C. S. "CHIPPAWA"	his rejection, he being desirable in other respects.
	(Rank) (Rank) (Rank)
· · · ·	"

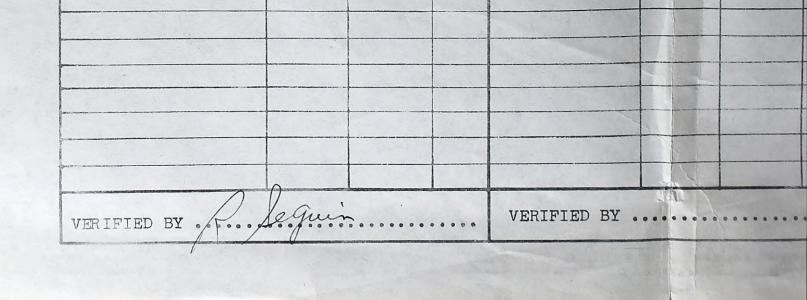
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-	R.C.N.V.R.	"VALLEYFIELD" Feb.45	
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(1)	MEDALS		Hold feeling:
	ENTITLED TO	Mr. Malcolm McDonald - Father	aptitudes St-6-50
		318 Belmont Ave.,	Vo.
	ADDRESS:	West Kildonan, Man. No Later add.	
(2)	MEMORIAL CRO	DS5	
	WIDOW		
			(2)
	ADDRESS:		
(3)	MEMORIAL CRO	055	
•	MOTHER	Mrs. J. S. McDonald	
		318 Belmot Avenue	⁽³⁾ 10 October 1944
	ADDRESS:	WEST KILDONAN, Manitoba	
	7		

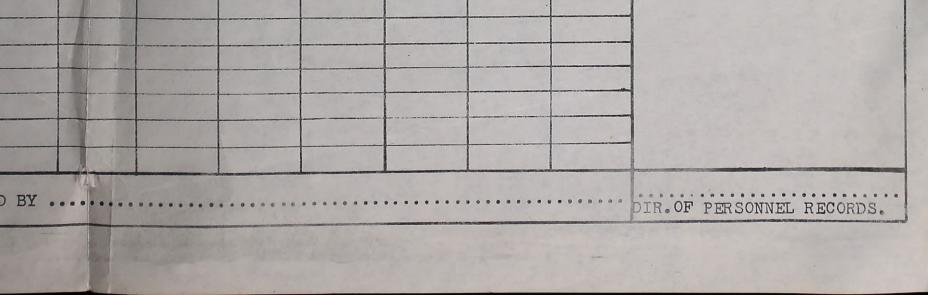
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N.V. 17 25,000-2-42 (3665) N.S. 815-11-17

CERTIFICATE of the SERVICE of

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NAVAL TRAINING and ACTIVE SERVICE

NAVAL TRAINING and ACTIVE SERVICE

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	EXA	MINATIONS, NOTATIONS,	QUALIFICATIO	ONS		RECORD OF	
I	Date	Particulars	c	aptain's Signature	Rated	Date	Authority for Advancemen or Reason for Disrating to b stated
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	CLASS FO		DUCT				CHARACTER, ABILITY IN RATING ON COMPLETION OF TRAINING, DISCHARGE FROM THE SERVICE, AND ANNUALLY, 31st DECEMBER, WHILE MOBILIZED						
From	(Inclusive D		То	Character	Efficiency in Rating Noting Substantive Rating in Brackets	Date	Captain's Signature						
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GOOD CONDU	R.C.N.V.		BADGES										
Date	G.S.B. or G.C.B.	1st, 2nd, 3rd	Granted, Deprived, Restored										
1-4-	G.C.B.	3rd	Restored										
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Date	P., D.C., C.P., or W.T.		of Days										
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N.P.R./5-2.	FORL "B"	
	FILE: N.S. V-46463 PE	RS. (
	DEPARTMENT OF NATIONAL DEFENCE - Naval Service -	
	Ottawa, Canada. AUG 30 1944	
Sir:		
	The following casualty has been reported - 14627	'9
NAME	RANK or RAFING NAVAL NO.	
McDONALD, Rich	ard Alexander Angus Able Seaman V-46463 R.C.	N.V.I
DATE OF ENLIST	MENT - 18 August, 1942 Active Service: 25 February.	1943,
DATE OF DISCHA	RGE - 7 May, 1944.	
SERVICE -	discharged in hospital under jurisdiction of D.P. & .N.H.) CANADA & HIGH SEAS dicate whether in Canada only; or in Canada and the high seas	or
	sewhere.)	
	charge and - Missing, presumed dead, when H.M.C.S. "VALLEYFT any disability or where death torpedoed and sunk by enemy action in the Atlan	
RELATIONSHIP -	Mother NAME - Mrs. Janet S. McDonal	
ADDRESS -	318 Belmont Avenue, West Kildonan, Manitoba.	-6
or	records indicate that rating was separated from his wife, lega otherwise, details to be furnished and copy of any Court Order Separation Agreement, etc., to be furnished.	
FOR	A "A" RESPECTING THE ABOVE NAMED HAS BEEN PREVIOUSLY WARDED. PLEASE SEE REVERSE SILE FOR DETAILS OF MAR- WE ALLOWANCE, DEPENDENTS ALLOWANCE, etc.	
	C. R. P. NAVAL TRE	. A
		a 7

EMARKS:

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

- 2 -

· Carlo Karlo and a second	and the second second	Maiden name	1	Date	of	marria	age	and/or
Names of Dependents	Relationship	of wife		date	of	birth	of	children
	and the second second	and the second second second		and in		15 2 2		
NIL	NIL ·	NIL.			NI	L	1	
							. *	

D. A. A. P.

\$20,00

Address 318 Belmont Ave., West Kildonan, Man.

TOTAL

\$20.00

Date of Enlistment: See other side.

NIL

To Whom Paid: Mrs. Jessie McDonald

Date of Discharge: See other side.

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

The final deduction of Assigned Pay for ______ has been made for the period from 1st to ______ 194).

Remarks:

Monthly rate:

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

The Secretary, The Canadian Pension Commission, Room 228, Daly Building, OTTAWA, Ontario. N.S. 536d. Revised—Nov., 1936 50M-42 (5181) N.S. 815-9-536D.

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On leaving:-

CERTIFICATE OF PROGRESS OF ORDINARY SEAMEN (To be used in conjunction with Form S. 399 Divisional Training Progress Book.) Richard alexander Engues MEDONALD OFFICIAL No. V-46463 NAME Date of Birth 24 Jan ON LEAVING HARBOUR TRAINING SERVICE Initials of REMARKS Subject Ability Instructing Officer (percentages obtained, etc.) aths. *School..... Seamanship-Boat work: Mod. (a) Pulling..... (b) Sailing..... Gunnery and Disciplinary Training...... Shooting..... Swimming-P. P. T..... Date qualified Physical and Recreational Training Special qualifications Call Boy..... Bugler (Sea Service).... Special Remarks e.g., C. W. Candidate Weight 123 12 Height 5 67 Date 18 Cfc On joining:-

* State in remarks column whether Normal, Advanced Class or V/S or W/T.

hifspawn Date 29/5/43 how Captain. H.M.C.S."

Weight 1233 Height 5 64" Date MAY

MAY 29 1943

			The states	RUGR	(ESS	UNDI	ER II	KAIN.	ING F	OR	ABLE	SEAMA		· ·
		Educat	ional Ex	xaminatio	ons	•		Dat	e		S	hip	Signatu Divi	are and Rank of sional Officer
Ed	assed luca- nally	For A	Able S ationa	eaman 1 Test 1 nary S	I									
SEAMANSHIP	Subject	Boat Work	Anchors and Cables	Compassand Wheel Rule of the Road	Rigging Sheers and Derricks	Sounding Machine, Lead and Line	Bends and Hitches, Blocks and Tackles	Part of Ship Evolutions	Signals	TOTAL	* Date of Passing		nature and onal Office	Rank of or, and Ship
SEAN	Hours % %	70	70	al	65		20	20	Nr.	1.69.1	31/7/43.	S Co Co	ren S	allis
GUNNERY	Subject	Field Training	Gun Drill	Stripping	Fire Control	Ammunition	Director and Sighting	Machine Gun	A.A.	TOTAL	Date of Passing		nature and	Rank of er, and Ship
GU	Hours % %									74.3%	mela 2/43	- A	m	mbut 1/5. alle
TORPEDO	Subject	Whitehead	Low Power	High Power	Instruments	Explosives	Paravanes	Depth charges		TOTAL	Date of Passing		nature and ional Office	l Rank of er, and Ship
Tol	Hours % %									80%	Puly 1 43	SC SC	far S	nhur . 125 mllis
* In † T	the even he letters by the l mended	t of failur Q.R. III Divisiona , the word	e to pass and t , L.R. II l Officer l "NO"	any exam the word II, C.R. I in the ca is to be en	"FAILE "FAILE II, A.A. 3 se of men itered.	the percen D'' noted 3, S.T., S n so reco	ntage is to l. .D., etc., mmended	be noted are to be 1. If not	entered recom-	I	Divisiona	l Officer's Rei	narks	Recommenda- tion for non-sub. ratet
£	Ship		ience as	l of Pract Ord. Sea of Ship			Recomme cement to on (D	o Able S		. U,	The ze	17/4	el 13. c	Officer Candidas
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on		ified fo	or adv	Seama rancem Date	ent to		Seam	Con	nmodore .e.	ti н.м.	ons ins c.s	serted on	History	Date

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C.N.S. 1246W 2M-2-42 (3574) N.S. 815-9-1246W

Name.

R. D. F. HISTORY SHEET

To be kept attached to the Service Certificate until final discharge from the Service ONALD

Official No.

I. EXAMINATION RECORD

Date of commencement Active Service.

To be filled up according to the result obtained after examination

Date	NATURE OF EXAMINATION Qualifying or Requalifying	Theory	Technical	Practical	Passed or Failed	Ship or Establishment where examined	Initials of Examining Officer
19-11-43	For R.D.F.2 3	% Required			Chosed	Statoen	oed
	For R.D.F. # 2	% Required % Obtained					
	For R.D.F. Instructor	% Required					

II. DATE OF GRANTING OF (a) Substantive Rate (b) Non-Substantive Rate

Rate	Date	Initials of Captain	Rate	Date	Initials of Captain	Rate	Date	Initials of Captain
ble Seaman			Leading Seaman			Petty Officer		
.D.F. 2			R.D.F. 1			R.D.F. Instructor		

N.B. 1. An Able Seaman may be granted non-substantive rate of R.D.F. 1 upon qualifying as such.

V-46463

2. No rate below Leading Seaman passed for Petty Officer may qualify as R.D.F. Instructor.

		PR	ROVINC	E OF MA				," and prope	
	OF	FICIAL	REGI	STRATIC	ON C	F DE	ATH		
1. PLACE	f If in Rural Mu	micipality		.At	Se	o	Twp	Rge	Jain -
DEATH	If in City, Tow	vn or Village	(Nama)	(Name)	Street.	tion give n		House No	numbe
	H OF STAY			and the second sec		ovince		nada (if im	
	nths and days)								
3. PRINT	FULL NAME O	OF DECEASE	D(Surr	MCDONALD		Given name o	names in usu	al order)	5U.A
RESIDE	NCE ALS (Usual place of ab	Halmont	AVG. No	nd number and n	ame of cit	y, town or v	illage. If ru	ral, sec., tp.	and rge
4. SEX	5. NATIONALI (Citizenship)			Single, Married Widowed or Divorce	l, 8. BI	RTHPLAC Canada, prov	CE (If in Mani vince, city, tow	toba, give exact n, village or new y and post office	t location arest pos
				(Write the word)					
9. DATE OF	Ganadia Month	Day	Year		Years	Months	1	If less tha	
BIRTH	January (Write the word)	84	1924	10. AGE IN				hrs. or	n
Z 11. Tra	de, profession or	Service and	as						
OIT/ SI	pinner, teamster,	office clerk,	etc		llark				
NOIL VAID CONTRACT OF CONTRACT.	nd of industry or otton-mill, lumbo	ering, bank, et	t e	Hudson R	ajaerC	a	ni.peg.		
00 13. Dat	te deceased last v t this occupation	worked			14. To	otal years s this occupa	pent in		
15. If married	d, widowed or division or maiden	vorced give na	me						
16. Nat	me of father		a contractor					1	11
02	thplace of father.								
18. Ma	iden name of mo	other							
²⁴ 19. Birt	thplace of mothe	er		(88	me as item	No. 8)			
	The about the of informant								
20. Signature	of informant	MOI	Soli	* TR	21. R	elationship	to deceased	Office	r 1/
Addr	ress	or removal	M.doun M	offey-Ottas		aval Pe	maonnel	Record	Sa
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	rmit was issued b						,		
Los Durial re.	of Undertaker on acting as Und	lertaker			Address				
Of Classedance			EDICAL C	ERTIFICATE	OF DEA				
24. Signature or perse									19. (Y
24. Signature or perse	F DEATH	(Hour)		(Day)			May Month)		
24. Signature or perso 25. DATE O	F DEATH								19.
 24. Signature or personal or personal sector (Sector 1998) 25. DATE O 26. F HEREI 		that I attende	d deceased	from					
24. Signature or perso 25. DATE O 26. F HEREI to	BY CERTIFY t	that I attende	d deceased :	from	nal				
24. Signature or perso 25. DATE O 26. F HEREI to	BY CERTIFY t	that I attende	d deceased : 	from , and last saw l USE OF DEAT MING	1a) H	ive on	ion H.M.	0.5.	19.
24. Signature or perso 25. DATE O 26. F HEREI to Immediate cause Give disease, in death, not the failure, asphyric	BY CERTIFY t i jury or complication w a mode of dying, su a, asthenia, etc. b, if any, giving risu	that I attende	d deceased : 	from , and last saw l USE OF DEAT	1al H 1.11044	ive on ead.,wh torped	ion H.N.	0.5. sunk b	19. Y
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DEPARTMENT OF MATIONAL DEFENCE - Naval Service -

WAR MEMORIAL CROSS

Issued to:-

Wife:-

Mother: -

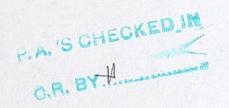
FILE NO.......

Mrs. Janet S. McDonald, 318 Belmont Avenue, West Kildonan, Manitoba.

A SHELLER

165054

Date forwarded:-OCT 10 1944 Registered Mail No.- 2024



N.S. V-46463 PERS. (N)

attanted.

22 November, 1944.

THIS IS TO CERTIFY that according to official information Richard Alexander Angus McDonald, Able Seaman, Official Number V-46463. Royal Canadian Naval Volunteer Reserve, is missing, presumed dead to date the 7th of Nay, 1944; He mrow was serving in H.M.C.S. "VALLETFIELD" which was torpedoed and sunk by enemynemic action whilst on Convey duty in the North Atlantic.

SECRETARY, NAVAL BOARD.

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DEPENDENT, MANAL POARD.

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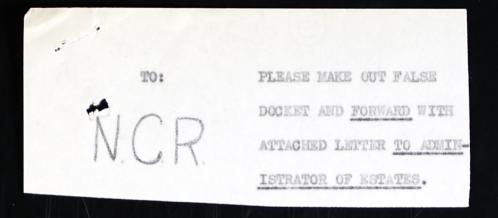
EMC

With Reference to

Form M.F.B. 227, Medical Board Proceedings () respecting

attached, approved Category " ",.

For SECRETARY, NAVAL BOARD.





Department of National Defence

Rabal Service

OTTAWA, Ont., 30th August, 194 4.

IN REPLY PLEASE QUOTE V-46463 (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

McDONALD, Richard Alexander Angus Able Seaman, V-46463,R.C.N.V.R Missing, presumed dead to date 7 May, 1944. He was serving in H.M.C.S. "VALLEYFIELD", which was torpedoed and sunk by enemy action while on Convoy escort duty in the Atlantic.

NEXT OF KIN Mother: Mrs. Janet McDonald,

other: Mrs. Janet McDonald, 318 Belmont Ave., West Kildonan, Man.

Initials

ALLOTMENTS IN FORCE

In favor of

Mrs. Jessie McDonald, 318 Belmont Ave., Winnipeg, Man.

NIL

Nil

Amount

(\$20.00 allotment stopped May 31, 1944)

Hon.Rec.Gen. for 5th Victory Loan, Ottawa, Ontario.

Nil Nil (\$16.80 stopped with last payment April 30, 1944).

Will: No Will.

MEM

Yours truly,

for SECRETARY, NAVAL BOARD.

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

D 2258 A 1000m-4-42 (4259) N.S. 815-5-2258



Six copies to be rendered to Naval Service Headquarters

REPORT OF THE DEATH OF AN OFFICER, MAN OR BOY

Traine	(Christian names in full)
Rank of Rating	Official No
Place of Birth	den den Date of Birth.
Occupation in Civ	vil Life Carlana Carla Religion Religion
Number of years	service in the Navy (Long Service R.C.N., or mobilized service in case of R.C.N.
(Temporary) or Reserve ratings)
Date of Death?.	Place of Death
Cause of Death.	(If due to accident, violence, or enemy action, particulars to be stated briefly)
N	Name Not And And And Relationship
Nearest known relative or friend.	Address
Date on which t	he above was informed by Ship
	leath was registered with local Officials
	aperial Service men, whether Active Service, Pensioner or Reserve, date on which the
	turn was rendered to the Registrar General in London, Edinburgh or Dublin, accord-
	nality
-	
Location, Numbe	er, etc., of grave
	oyed(if any)
If horne for disc	ipline only, date D.S.Q. or invalided

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 15M—6-41 (831) N.S. 815-9-1121

318 Belmont due I Hildonan Minnifreg man 16 . 11 . L L Dear Sir Re- your letter dated hournher 13.1944 requisting me to send on the lictory long bond, and War savings certificates belonging to my Son Richard A A m'Donald A. B. V. 46463. I have done so as requisted Yours Sincerly WS. 4x5' Mon Janet In Donald R-V=#3312 RV-# 3513 1×100 x.L.3

DISTRIBUTION	OF	SERVICE	ESTATES	
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TL Estates Form "P. 4"

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	263	22/	22.	S.C

	MCDONALD,	Richard A.A.	No.:	46463
	Surname	Christian Names		
	A.B.	R.C.N.V.R. 0)5	7-	5-44
Rank		Unit	Date of D	eath
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			L. P. C\$	3.71
Date	Date:	10-2-45	Other Credits	.0.35
			Total	4.06

SHARE	RELAT	FIONSH	1P		NAME AN	D ADDRESS	AMOUNT
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3	Mother	,		Mre (Ae	, Janet McDe above)	onald,	187.03
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AUTHOR	ITY					DISTRIBUTION APPROV	VED AND AUTHORIZED
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C.N.S. 264 (S. 264) 75M-5-42 (4758)	VICE	- T	
N.S. 815-9-264			incre :
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D.N. V-46463		W.B.	No
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Advancement.	Wishes to Pass?	Recommended?	Date Qualified?
Educ. Test Pt.1			
Higher Educ. Test.			
Professional or			
higher Sub-rating			

Swimming Qualification work Athletic capabilities W Hockey & sports generally. - Some General Remarks (including intelligence, energy, initiative, powers of command). Rating missed a great deal of classwork

here. Can show more energy and initiative, and mmand-average. will need su

H.M.C.S. Officer of Division. int R.C.N.V.R. Date.

Notes:-(1) This form is to be kept for each rating by the Officer of his Division.

- (2) The form is to be completed to date, and signed by the Officer of the Division before the rating changes his Division or Ship.
- (3) On a rating changing his Ship or Establishment, Form S.264 is to be transferred with his other papers for the information of the next Officer of Division.

P.T.O.

Minare, ambitions, responsible athlin 1 Winn ipe cellent satin 6 kun 5 star Kochen at withou onfidence sela Sicon ____. . . . H.M.C.S. Cormallis Officer of Division. Date July x 6 /43 Parlining 1943 m Dourd 7 assed officers H.M.C.S. Ornevallio ch Officer of Division. Date This mating husgood power of command, but is Seamon; the complains a great deal. only a fair mas he abean not In my openion few, sound a upo H.M.C.S. Blaver" SILT R ch vAOfficer of Division. Date 18/1/1 43 H.M.C.S. Officer of Division. Date..... H.M.C.S.

Date.....

Officer of Division.

.30th August, 1944.

Dear Mrs. McDonald:

Further to my letter of the 11th of May, 1944, in view of the length of time that has elapsed since your son, Richard Alexander Angus McDonald, Able Seaman, Official Number V-46463, 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.

Despetched by Sec. N. B.

sincerely. Yours

Date 1/9/44

Ked my Gotofe Car. 1 Mrs. Janet S. McDonald, 318 Belmont Ave., West Kildonan, Manitoba,

1 intorna

(anadian

lessage (ondolence Date Sent NPR 5 Deputy SECREPARY, NAVAL BOARD.

Time

Sir;

報告

FORM	A

FILE: 1.8. V-40402

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

12 May, 1944. (Date) The following casualty has been reported -RANK or RATING NAVAL NO. NAME V46463 R.C.N.V.R. McDONALD, Richard Alexander Angus Able Seaman DATE OF ENLISTMENT _ 18 August, 1942 Active Service: 25 February, 1943.

Will be reported later. DATE OF DISCHARGE -

HOSPITAL .

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

Canada & High Seas.

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

"Missing" at sea shen the ship in which he was serv-Reason for discharge and when and where any disability was incurred, or where death ing, was lost by enery action. While this casualty occurred. is listed as missing, it is impossible to make an estimate as to his chances

of survival. Should no information be received to the contrary, you will be noti-

fied when official presumption of death with data has been set.

(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 -

NAME- Mrs. Jenet S. McDonald, Mother RELATIONSHIP-

318 Belmont Ave., MEST KILDONAN, Manitoba. ADDRESS-

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

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

..... N.P.R./5.

for

SECRETARY, NAVAL BOARD.

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

NOTE:

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

(See reverse side for further instructions)

OTTAWA, Ont., 12 May, N.S. V-46463 PERS, (7)

Dear Sir:

The undermentioned Canadian Naval Casualty is forwarded to you for transmission to the Inspector of Income Tax concerned: MeDONALD Richard Alexander Angus Name (Surname) Able Seaman (Christian Names) Official No. "Missing" at sea from ship in which he was Date of Casualty 318 Belmont Ave., Address at time of Enlistment West Kildonan, Manitoba. Singlo Marital Status at time of Enlistment Occupation Nother: Mrs. Jenet S. McDonald, Name & Adding as of Next of Kinor anoran, Maharoba.

Yours truly,

for

SECRETARY, NAVAL BOARD. pl Journaled

The Deputy Ninister (Taxation), Department of National Revenue, Ottawa, Ont. 4



REGISTERED AIR-MAIL NS: V46463 Pers "N").

11th May, 1944.

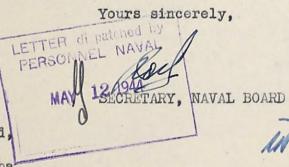
Dear Mrs McDonald,

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.



Mrs. Janet S. McDonald, 318 Belmont Ave., WEST KILDONAN, Manitoba. TFH/AT

REGISTERED AIR MAIL N.S.V-46463 PERS (N)

everner

8 May, 1944.

Dear Mrs. McDonald:

I deeply regret that I must confirm the telegram of the 8th of May, 1944, from the Minister of National Defence for Naval Services, informing you that your son, Richard Alexander Angus McDonald, Able Seaman, Official Number V-46463, Royal Canadian Naval Volunteer Reserve, is missing at sea.

According to the report received, your son is listed as missing when the ship in which he was serving was lost by enemy action, but it is not known as yet whether any hope can be held out for his survival. You may rest assured, however, that as soon as further information is available, you will be notified.

For reasons of security it may be some time before details of this incident of war may be released.

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

Please allow me to express the sincere sympathy of the Minister of National Defence for Naval Services, the Chief of the Naval Staff, and the Officers and men of the Royal Canadian Navy, the high traditions of which your son has helped to maintain. ETTER dispaten NAVAL

PERSONNEL NAVAL

SECRETARY, NAVAL BOARD

Mrs. Janet S. McDonald, 318 Belmont Ave., WEST KILDONAN, Manitoba.

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THE	TERMS OF T	HE WAR SERVICE G	RANTS ACT, 1944	AND THE REGULA	LIONS ISSUED THE	REUNDER.
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STATEMENT OF WAR SERVICE GRATUITY - NAVY Decea Name Richard alexander angus MCDONALD Member (Surname) (Christian Names) Director of Islates for service Islake of Register No. 1706 308 Sparks St. Richard. a. a. Mc Donald Bate 13 June 48 Ottawa Out N.S. V46463 Service No. V46464 Payee Address Service No. 146463 Ottawa O Final Rank or Rating A-B Date of termination of overseas service Y may 44 Date of Discharge 7 144 ma A. TOTAL QUALIFYING SERVICE No. of days 438 equal to 14 complete periods at 07.50 105.00 B. QUALIFYING OVERSEAS SERVICE 37.00. No. of days 166 less 18 ineligible days equal to 148 days @ 25¢ per day C. SUPPLEMENT FOR OVERSEAS SERVICE DAILY RATES AT DISCHARGE ¢ 1.85 \$ 1.25 Pay Subsistence or Lodging and Provision Allowance Additional Pay H.L.M \$.13 Dependents' Allowance 1/30 of 3.23 7 = \$ 22.61 Total 18.29 x \$ 22. 61 No. of days 148 160.2 GRATUITY SERVICE D. WAR OVERPAYMENT OF PAY AND ALLOWANCES \$ E. DEDUCTIONS DEPENDENTS' ALLOWANCE AND ASSIGNED PAY OTHER DEDUCTIONS F. TOTAL AMOUNT PAYABLE G. YOUR PORTION OF GRATUITY IS = \$ 16029 of § Dependents' Allowance in issue to you \$ Total Dependents' Allowance in issue I certify that the amount has been correctly computed and is payable CERTIFICATE: in accordance with the terms of the War Service Grants Act, 1944 and the regulations issued thereunder. Treasury Date Checked by Checked by Prepared by Service Representative D.N.P.A. CHECK 3

1706 FARTICULARS OF DEAD OR MISSING PERSONNEL WITH REGARD TO PAYMENT OF WAR SERVICE GRATUITY Rank or Neme of Deceased Member Richard Q. a MCOONALDRating HB 0. No. V46463 1. Dependents' Allowance and Assigned Pay in force at date of death: D.A. ____ 2000 A.P. D.A. -A.P. ____ 2. Pension awarded or noreco being awarded to: . War Service Gratuity mrs. Janet mc Sonald Application(s) received 318 Belmont ave., from: West Kildman Winnigez, man. In accordance with the War Service Grants Act, 1944 (Part I, Clause 4) and Directive dated 16th December, 1944 issued under author-ity 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: In the () To be paid to: proportion of:

- and -

In the proportion of;

(G)

.A.

() 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)

to:

Group "C" of the above mentioned Directive.

Date 3/3/45-

1706 FILE No. N. S. V. 46463 -TO: D.N.P.A. 2 "WAR SERVICE GRATUITY" COMPUTATION OF SERVICE 1-46463 flexander Angus MC DONA SURNAME CHRISTIAN NAMES OFFICIAL RANK OR RATING 0 IN FULL NUMBER ON DISCHARGE (alert 20 to mother) CAUSE OF DISCHARGE: Dea Application made Jecard mother of Per no hy 25 Jeb 43 - 24 Jeb 44 - 365 29 Feb. 5 mach 31 app 30 TOTAL SERVICE 7 ma 438 Date of Active Service 25 teh 43 Date of Discharge may 44 Total No. of Days 438 # Less non qualifying nil service Total Days OVERSEAS SERVICE % Total No. of Days 166 # Less non qualifying service mil Total Days 166 Record of Service in other Forces (per Naval Records) Branch of Service Date of Active Service Date of Discharge # & % Overleaf Computed By Checked By for H.B. Money) Payr. ¢mdr. R.C.N.R. 1944 DATE: DEC 6 Officer in Charge Neval Personnel Records

Said

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NON QUALIFYING SERVICE

Overseas

(#) Date No. of Days Reason 17 11 11 11 ** 11 11 Ħ 11 11 11 11 11 11 Total Days (%) OVERSEAS SERVICE: Date of Distance No. of Days To. Where Serving From Tatel To. St. Dater 28 Aug "3" 17 Sep "43" Beauer 2/ Less non deal 4 Valleyfield 8 Dec' 43 3 Jan'44 271 11 Jan'44 7 May'44 1184 166 . 30 .01 10101 A Total Days Record of Service in other Forces (per Nevel Records) Valleyfred Volleyfred Deares Soto of Active Service 21 29 4 31 27 21 30 118 for (H.A. Meney) . Gepte Order M.C.M.B. abroood leanceder Leven

DISTRIBUTION OF SERVICE ESTATES MMB Estates Form "P. 4"

	DI	STRIBUTION OF SERVICE EST.	ATES MMB	Estates Form "P. 4"
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· Law			ξ.	
Name Hc	DONALD Surname	Richard A.	No	v46463
Rank A.	в.	Unit R.C.N.V.R. 0/8	Da	7-5-44 te of Death
		AMOUNT	W.S.G. L.P.C\$	
	Date 10-	11-45	Other Credits	310.35
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				ja:
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1 mother		Mrs. Janet McDonald, (as above)		80.14
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For Chief Treasury Officer

For Chief Treasury Officer

in AUDITED FOR PAYMENT

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Manitoba Intestacy 1/2 Father - Malcolm Midonald Hest Kildonan, Mar. Finnipeg, Man. Mother-Mis Janet Mendonald. 8014 (as n/Kentetled) / 5/60.29 V

	STATEMENT O	ARMY	ATR FORCE	NAVY
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PAYEE Director o: Address 308 Sparks Ottawa, On	St., 1	Richard A.A. NNS. V-46463	FINAL RANK OR R	DATE14 June/45 CE NO. V46463 ATING A.B.
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B. QUALIFYING OVERSEAS		148 DAYS @ 25C. PER L	DAY	37.00
AND		H.L.M. \$.13 s s s		
		NO. OF DAYS 183		18.29
D. WAR SERVICE (OVERPAYMENT OF	PAY AND ALLOW		160.29
	THER DEDUCTIONS	DEPENDENTS' ALLO AND ASSIGN	WANCE	Nil
F. TOTAL AMOUNT PAYABI	.E			160.29
the second s	TUITY IS— IDENTS' ALLOWANCE IN L DEPENDENTS' ALLOWA		OF \$	-s 160.29
CERTIFICATE I CERTIFY THE TERMS C	AT THE AMOUNT HAS BI F THE WAR SERVICE GR	EEN CORRECTLY COMPU	TED AND IS AYABLE E REGULATIONS ISSUE	IN ACCORDANCE WITH
	A			. /