

V50413
MILLS
ARCHIE WILLIA

OCCUPATIONAL HISTORY FORM

13-72-5937
P272113

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

1. (a) Print name in full MILLS, ARCHIE W.M. (b) Reg'l. No. V50413
2. (a) Arm of service 1007 (b) Unit 1007 (c) Rank Private
3. (a) Date of birth 11/2/17 (b) Have you any dependents? ONE (c) Place of residence at time of enlistment GUTTAM, ONT
4. (a) Place of enlistment WINDSOR, ONT (b) Date of enlistment 11/1/42

PLEASE LEAVE BLANK

Section B—EDUCATION AND TRAINING

5. (a) State age on finally leaving school 19 (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.) JUNIOR MATRICULATION
7. If you attended a university, give name of university and standing or degree secured.....
8. (a) Did you ever enter upon a trade apprenticeship? NO (b) If so, for what occupation?..... (c) Did you finish it?..... (d) If you did not finish it, how long did you serve at it?.....
9. (a) What languages do you speak fluently? ENGLISH. (b) What languages do you read well? ENGLISH.

Section C—EMPLOYMENT CONDITION AT TIME OF ENLISTMENT

10. (a) State whether you were WORKING or NOT WORKING at time of enlistment. (Enter here only "Working" or "Not Working", as case may be; particulars are asked for below) WORKING (b) At time of enlistment of what trade union or professional society were you a member? WESTERN ONTARIO BUS EMPLOYEES ASSOCIATION

Section D—PARTICULARS CONCERNING THOSE WHO WERE UNEMPLOYED AT TIME OF ENLISTMENT

QUESTIONS 11 TO 17 REFER ONLY TO THOSE WHO ANSWER "NOT WORKING" IN QUESTION 10 (a)

11. Had you ever been employed fairly regularly since leaving school?.....
12. (a) If answer to 11 be "Yes", state exact trade or occupation at which you actually worked..... (b) State how long you had worked at this trade or occupation.....
13. If answer to 11 be "No", state exact trade or occupation for which you feel qualified.....
14. If you had been employed after leaving school, state when you last worked fairly regularly before enlistment.....
15. Give details of last employer, if any: Name..... Address.....
16. Nature of employer's business (for instance, "farmer", or "building contractor", or "boot factory", or "iron foundry", or "retail store", etc.).....
17. (a) If your last employment was in a business of your own, state nature and address of business..... (b) Date of discontinuing it.....

Section E—PARTICULARS CONCERNING THOSE WHO WERE EMPLOYED AT TIME OF ENLISTMENT

QUESTIONS 18 TO 23 REFER ONLY TO THOSE WHO ANSWER "WORKING" IN QUESTION 10 (a). PLEASE READ THESE QUESTIONS AND REPLY TO THOSE APPLYING TO YOU AT TIME OF ENLISTMENT

IF YOU WERE AN EMPLOYEE WORKING FOR AN EMPLOYER UP TO THE TIME OF ENLISTMENT, PLEASE ANSWER QUESTIONS 18 TO 21

18. Name of employer CANADIAN GREYHOUND LINES Address 44 LONDON ST. E. WINDSOR
19. Nature of employer's business (for instance, "farmer", or "building contractor", or "boot factory", or "iron foundry", or "retail store", etc.) BUS TRANSPORTATION
20. (a) Your specific occupation DRIVER (b) Number of years' experience at this occupation with any employer THREE
21. (a) Did your employer promise definitely to give you employment on discharge? YES (b) Did your employer refuse to promise you employment on discharge? NO (c) Do you wish to return to your former employment? YES

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

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

Section F—PARTICULARS OF FARMING EXPERIENCE

24. (a) Do you wish to engage in farming after the war? NO (b) Do you feel competent to operate a farm? YES (c) If so, in what kind of farming? MIXED
25. (a) Were you born on a farm? YES (b) How many years' actual farming experience have you had? 5 YRS (c) In what provinces did you have experience? ONT

Section G—MISCELLANEOUS

26. Have you made any arrangements other than indicated above, for re-establishment in civil life after discharge? NO
27. If so, state nature of your plans (for example, do you plan to return to school, or have you been assured of a job, etc.).....
28. State any employment preference or ambition you may have, other than indicated elsewhere in this form.....

DATE 1/11

194 2

SIGNATURE Archie Mills



NOV 30 1942

[Copy FR
VI
ES

Copy To
VWD
A. ES

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

Mrs. Helen Marie Mills,
Box 2,
Cottam, Ontario.

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

and the following number quoted:—

H.Q. NS. V.50413 FD.424

DEPARTMENT OF NATIONAL DEFENCE
ESTATES BRANCH
OTTAWA, ONT.

May 23, 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

MILLS, Archie William, Ord. Coder

No. V.50413, R.C.N.V.R.

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

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

HRW/JN

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



ANSWER IN FULL ALL APPLICABLE QUESTIONS

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

Degrees of Relationship	RELATIVES required to be accounted for	INFORMANT'S STATEMENT		
		NAME IN FULL of any Relative, if any, in each degree specified	Age	ADDRESS IN FULL of each surviving Relative, opposite his or her name, and date of death of each deceased relative
1	Widow of the Deceased.....	Helen Marie Mills	33	Cottam Ont
2	Children of the Deceased and dates of their Births.....	None		
3	Father of the Deceased.....	William S Mills	62	Essex Ont.
4	Mother of the Deceased.....	Alice A Mills	63	Essex Ont.
5	Brothers of the Deceased	Full Blood	Everett Mills 41	2133 Parent Blvd. Windsor Ont.
		Full Blood	Carman Mills 39	1005 Lawrence Rd. Windsor Ont.
6	Sisters of the Deceased	Half Blood	None	
		Full Blood	None	
7	Names of brothers or sisters (whether of the full or the half blood) of the Deceased, who are dead, and date of death of each.	Names and ages of their children (if any)	Address of their children	
		Allan Mills Died August 14, 1941	One Son Marshall 4 years of Age 17th June 1941 1027 WELLINGTON BVD WINDSOR ONT	

ANSWER FULLY EACH QUESTION ON THIS PAGE
PARTICULARS AS TO IDENTITY

8	Full names of the deceased.	Archie William Mills
9	Date of his birth.	February 11th 1907
10	Place and date of his marriage.	SEPTEMBER 27 th 1941 Windsor Ont.
11	Place and date of his parents' marriage.	South Woodlee Ont February 5th. 1902

PARTICULARS OF DOMICILE

12	Place where deceased was born.	South Woodlee Ont.
13	State, in order, the Province, State and/or County in which he resided before enlistment and the period of time in each.	(a) Always Resided in Essex (b) County Ont. (c) (d)
14	Nature of employment before enlistment.	Bus. Driver, for Greyhound Bus Co.
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.	Cottam Ont

PARTICULARS OF ESTATE

17	Did he leave a Will? If in your custody, please forward.	Don't know of Any ^{Understand he} did + is with Navy Headquarters
18	If married, and domiciled in the Province of Quebec or in a State in the U.S.A. or in a Country under the laws of which there is community of property between spouses,—was there a marriage contract dealing with property?	
19	Did he have a Bank, Post Office or other deposit account? If so, give name and address of bank, etc., and the amount on deposit. Do you wish it administered with the pay account?	Joint accounts with Widow. BANK ACCOUNTS AT IMPERIAL BANK COTTAM AMOUNTS 786.05 and 464.15
20	Amount of War Savings Certificates held by deceased. Indicate where located.	SAFETY DEPOSIT BOX 214.00 IMPERIAL BANK COTTAM ONT
21	Amount of Victory Loan Bonds held by deceased. Indicate whether registered or bearer and where located.	SAFETY DEPOSIT BOX COTTAM ONT \$100. BEARER IMPERIAL BANK
22	If deceased had life insurance, name companies and amount payable under each policy and the person named as beneficiary therein.	NORTH AMERICAN LIFE \$3000 METROPOLITAN LIFE \$1000 / 1.500 HELEN MARIE MILLS BENEFICIARY
23	Describe other assets, if any, and estimated value thereof. Use space on page 4 if necessary.	

OTHER PARTICULARS

24	Did the deceased after enlistment incur any debts for:— (a) His own separate board and lodging while on service. (b) Service clothing and equipment. An itemized account for each such debt should be attached hereto, and if same is correct you should mark the bill "approved" and sign same. If believed incorrect, give particulars.	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.	Was burried by Navy in Newfoundland

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

DECLARATION

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

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

* Widow of the deceased.

N.B.—To be signed in full in the presence of a Clergyman, Priest, Local Magistrate, Commissioner or Notary Public or Commissioned Officer of any of His Majesty's Forces.

Mrs Helen Marie Mills

{ Signature of Informant

Cottam Ont

Address

CERTIFICATE

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

*See above.

Mills { Name of informant } is the* Widow of the Deceased

above described, and I believe the above Declaration and the Statement of Relatives and of Particulars made by the Informant and signed in my presence to be complete and correct.

Dated at Cottam this 6th day of June 1944

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

J. W. Chubb

Qualification Commissioner

Address Cottam Ont

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

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

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

BANK ACCOUNT IN MAIN BRANCH OF IMPERIAL BANK AT WINDSOR, ONT. JOINT ACCOUNT WITH WIDOW AMOUNT \$442.35

Does not contribute to Unemployment Insurance

N. V. 5
50M-8-42 (5715)
N.S. 815-11-5



CANADA

ATTESTATION FORM
(HOSTILITIES FORM)

normal

3

FOR MEN OF THE ROYAL CANADIAN NAVAL VOLUNTEER RESERVE

SURNAME MILLS OFFICIAL No. V50413
CHRISTIAN NAMES Archie William MARRIED, SINGLE OR WIDOWER Married

PERMANENT ADDRESS	RELIGION
Box 2, Cottam, Ontario.	United Church

DATE OF BIRTH	*PLACE OF BIRTH	NAME AND ADDRESS OF NEXT OF KIN
11th February 1907	Town South Woodslee County Essex Province Ontario.	Mrs. Helen Marie Mills, --wife-- same address
*Original Nationality of:		
Father British		
Mother British		

*If not the son of natural born British parents, particulars to be given at foot of next page.

(A) PERSONAL DESCRIPTION ON ENROLMENT

HEIGHT	CHEST MEASUREMENT	HAIR	EYES	COMPLEXION	WOUNDS, SCARS, MARKS
Feet <u>5</u>	Inflated <u>42</u>	Black	Brown	Dark	None.
Inches <u>8</u>	Deflated <u>40</u>				
	Mean <u>41</u>				

EDUCATIONAL STANDING	TRADE OR CALLING AND IN WHOSE EMPLOY
Junior Matriculation.	Driver - Greyhound Bus Lines. Detroit, Michigan.

DATE OF ENROLMENT	RATING FOR WHICH ENROLLED	H.M.C.S. ESTABLISHMENT IN WHICH ENROLLED
Divisional Strength 6th November, 1942.	Ordinary Coder	Windsor, Ontario.

(B) DECLARATION TO BE MADE BY APPLICANT

I hereby declare as follows:—

- (1) That I am a British Subject domiciled in Canada.
- (2) That I am desirous of being enrolled as a member of the Royal Canadian Naval Volunteer Reserve Force, and that I accept and agree to abide by the rules of the said Force.
- (3) That * (a) ~~I have never served, and am not serving in any Naval, Military, Reserve, or Territorial Force.~~
* (b) I served in Essex Scottish Militia for the period shown, and attach my record of service, in corroboration of this statement.

*Cross out Clause not applicable.

Personnel Records Division.	
1. Noted in Records . . .	<input checked="" type="checkbox"/>
2. Naval Volunteer Reserve . . .	<input checked="" type="checkbox"/>
3. Non-Sub. Card . . .	<input checked="" type="checkbox"/>
4. Statistical Card . . .	<input checked="" type="checkbox"/>
5. Roneo Strip . . .	<input checked="" type="checkbox"/>
6. Pension Card . . .	<input checked="" type="checkbox"/>
8.	<input type="checkbox"/>
DATE	27.11.42.

SERVED IN	RANK	FROM	TO
Essex Scottish Militia	Pte. Discharged as Unit demobilized.	1938	1939

(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 Royal Canadian Naval Volunteer Reserve, I undertake and bind myself:—

(a) To serve from the date thereof for the duration of hostilities, being subject to the provisions of 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 when called and 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 naval establishment 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, until called into active service, 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.

(e) I have not been induced to enter as.....Ordinary Coder.....by the prospect of being transferred at some future date to any other branch or rating.

Dated this.....6th.....day of.....November, 1942.....

Signature of applicant.....AW Mills.....

(C) **CERTIFICATE OF ATTESTING OFFICER**

I hereby certify that all the foregoing statements were made by the volunteer above named and that he has made and signed the above declaration in my presence on this.....6th.....day of.....November, 1942.....

My authority for attestation is.....

J. S. Stept S/L, R.C.N.V.R.
Signature of and rank of Attesting Officer.

(D) **OATH OF ALLEGIANCE**

I.....Archie William MILLS.....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.....AW Mills.....

Witness.....J. S. Stept.....

Date.....6th November, 1942..... Rank.....S/L, R.C.N.V.R......

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

NOTE.—Attestation Form in duplicate, Certificate of Medical Examination (B-207) in duplicate, Occupational History Form in triplicate and certificates of previous service are to be forwarded to Naval Service Headquarters **immediately** after attestation.

Certificates of previous service will be returned after examination.

X-RAY NO. 6770



CANADA

113-77-5937

Can. B. 207

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

P272112 2

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 MILLS, Archie William

candidate for entry as ORDINARY CODER
and I believe him to be ^{{in all respects fit for His Majesty's Service} ~~{unfit for His Majesty's Service for the reason stated below}~~ He has signed the Certificate given below in my presence.

†Strike out if inapplicable. *Delete one.

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

(a) Age	25 Yrs.	8 Mos.	(j) Date of last Vaccination for Smallpox	1927
(b) Height with bare feet	Feet	In.	(k) General Development	Good
	5	8	(l) Nose, Throat and Tonsils	neg.
(c) Weight without clothes	172		(m) Heart and Lungs	neg. B.P. 116/72
(d) Ears and Hearing	neg.		(n) Abdomen Hernia, etc.	neg.
(e) Chest Girth	Max.	Min.	Mean	(o) Limbs and Joints
	42	40	41	neg.
(f) Teeth	Deficient	Defective	Dentures	(p) Skin
	4	?	—	neg.
(g) Vision by Snellens Types	without glasses	Rt.	Lt.	(q) Anus Haemorrhoids
		20/20	20/20	neg.
	with glasses where worn	Rt.	Lt.	(r) Testes Varicocele
(h) Colour Vision	Ishihara	R.C.N. Lantern		neg.
(i) Chest x-ray	(not taken approved positive doubtful)		NEGATIVE APPROVED	(s) Urine

CERTIFICATE TO BE SIGNED BY CANDIDATE

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

Archie Mills
Signature of Candidate

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

When a Candidate is subject to a defect or disability, the following information is to be inserted:

This Candidate is the subject of.....

*{which renders him medically unfit for service,
not considered of sufficient importance to cause his rejection, he being desirable in other respects.

*Delete one

IF REJECTED
insert here
UNFIT
in block letters

Dated at Windsor, Ontario, the 20th of October, 1942.

[Signature]
Examining Medical Officer

(Rank) SURGEON LIEUTENANT, R.C.N.V.R.

DEPARTMENT OF VETERANS AFFAIRS
DECEASED 7 May 1944

AWARDS NAVY

WAR SERVICE RECORDS
D.D.

MILLS	Archie William	V-50413	Coder	FILE No.
SURNAME (IN BLOCK LETTERS)	CHRISTIAN NAMES	REG. No.	RANK ON DISCHARGE	C.A.S.F. UNIT

WAR SERVICE

BADGE

(CLASS)

No.

DATE DESPATCHED:

ADDRESS:

CAMPAIGN MEDALS	REGISTRATION NUMBER AND DATE DESPATCHED
1939-45 Star	103. 24. 11. 49
C.V.S.M. & Clasp	
War Medal	

(THE REVERSE TO BE USED FOR ESTATE PURPOSES)

MEDALS AND MEMORIALS—DECEASED PERSONNEL

HMCS " VALLEYFIELD" Nov./44. R.C.N.V.R.

REGISTRATION No. DATE OF DESPATCH

1) MEDALS
PERSON

ENTITLED TO Mrs. Helen M. Mills. - Widow

ADDRESS: Box 2, Cottam, Ont.

(2) MEMORIAL CROSS

WIDOW Mrs. H. M. Mills

ADDRESS: Box 2
COTTAM, Ontario

(3) MEMORIAL CROSS

MOTHER Mrs. W. S. Mills

ADDRESS: Talbot Street
ESSEX, Ontario

MEMORIAL BAR

(1) DATE DESP. _____

REGN. NO. 873

(2) 5 June 1944

22 June 1944

(3)

N.V. 17
 COM-9-42 (13)
 N.S. 815

The corner of this Certificate is to be cut off if the man is discharged with a "Bad" character or with disgrace, or if specially directed by the Department of National Defence (Naval Service). If the corner is cut off, the fact is to be noted in the Ledger.

CERTIFICATE of the SERVICE of

O.H.F.

Archie William MILLS

ICNS. 85092

in the Royal Canadian Naval Volunteer Reserve

Training Headquarters	R.C.N.V.R. Division	Official Number <i>V50413</i>
	<i>HMCS "Hunter"</i>	"
		"

Date of Birth *11 Feb 1907*

Place of Birth *South Woodlee, Ontario*

Place of Residence *Box 2, Cottam, Ontario*

Trade brought up to *Bus. Driver*

Religion *United Church*

Name and Address of Nearest Relative or Friend (in pencil)
Mrs Helen M. Mills (Wife) Same address

Can Swim:—P.P.T. Date.....19..... Signature..... Rank.....

P.S.T. Date.....19..... Signature..... Rank.....

PARTICULARS OF SERVICE				MEDALS, DECORATIONS, etc.		
Date of Actual Volunteering	Date of Enrolment or re-enrolment	Period Volunteered for	Rating on Enrolment or Re-enrolment	Date of		Nature of Decoration
				Award	Presentation	
	<i>6 Nov '42</i>	<i>Duration of Hostilities</i>	<i>Ord Cook</i>			

	Height		Chest (mean)	Weight	Hair	Eyes	Complexion	MARKS, WOUNDS, SCARS
	Feet	Inches						
On Entry.....	<i>5</i>	<i>8</i>	<i>41</i>	<i>172</i>	<i>Black</i>	<i>Brown</i>	<i>Dark</i>	<i>None</i>
On re-enrolment—6 years' Service.....								
On re-enrolment—12 years' Service.....								
Further Description if necessary.....								

TRANSFER BETWEEN DIVISIONS			TRANSFER—LISTS A AND B		
From	To	Date	List	Date	Authority

Passing Certificate

This is to Certify

that Archie William MILLS

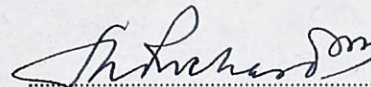
Rating..... Ordinary Coder, RCNVR. Official Number..... V. 50413

has passed

THE EDUCATIONAL TEST, I, R.C.N.

held on..... 4th May, 1943.

For advancement to Petty Officer



..... Instr. Cdr., RCN.
Director of Naval Education

Naval Service Headquarters

Ottawa, this..... 1st day of..... June, 19 43.

C.N.S. 2431

10M-5-42 (4453)

N.S. 815-9-2431

VERIFICATION

CAMPAIGN STARS, DEFENCE MEDAL, WAR NAVAL GENERAL SERVICE

NAME IN FULL

Mills Archie William

RANK/RATING

Code

SHIP	SERVICE			AREA	FROM	TO
	FROM	TO	DAYS			
	<i>1934</i>					
<i>Valleyfield</i>	<i>8.12.43</i>	<i>7.5.44</i>	<i>152</i>	<i>A. Atl.</i>		
<i>"Sitch" Head</i>	<i>7.5.44</i>					

VERIFIED BY

James P. [Signature]

VERIFIED BY

.....

VERIFICATION FORM

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

RANK/RATING *Coder* OFF.NO. *150413* ADDRESS

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

VERIFIED BY *A. P. [Signature]*

10

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

4
NAVYDECEASED
MEMBER'S
NAMEArchie William
(CHRISTIAN NAMES)MILLS
(SURNAME)

REGISTER NO.

8060

FILE NO.

NS. V-501

DATE

30 Apr/44

PAYEE
ADDRESSMrs. Helen M. Mills,
Box 2,
Cottam, Ont.

SERVICE NO.

V-50413

FINAL RANK OR RATING

Coder

DATE OF TERMINATION OF OVERSEAS SERVICE

7 May/44

DATE OF DISCHARGE

7 May/44

A. TOTAL QUALIFYING SERVICE

NO. OF DAYS 418 EQUAL TO 13 COMPLETE PERIODS AT \$7.50
30

\$ 97.50

B. QUALIFYING OVERSEAS SERVICE

NO. OF DAYS 152 LESS 28 INELIGIBLE DAYS, EQUAL TO 124 DAYS @ 25C. PER DAY

\$ 31.00

C. SUPPLEMENT FOR OVERSEAS SERVICE

DAILY RATES AT DISCHARGE

PAY	\$	2.00
SUBSISTENCE OR LODGING AND PROVISION ALLOWANCE	\$	1.25
ADDITIONAL PAY H.L.M.	\$.13

DEPENDENTS' ALLOWANCE 1/30 OF \$ 37.20 \$ 1.24TOTAL \$ 4.62 X7 = \$ 32.34NO. OF DAYS 124 X \$ 32.34
183

\$ 21.91

D. WAR SERVICE GRATUITY

\$ 150.41

E. DEDUCTIONS

OVERPAYMENT OF

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

N11

OTHER DEDUCTIONS \$

F. TOTAL AMOUNT PAYABLE

\$ 150.41

G. YOUR PORTION OF GRATUITY IS—

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

=\$ 150.41

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	
SJD		H. P. Brien		DATE	
				1/5/45	

for Dir. Naval Pay Accounting. *Chapman*
SERVICE REPRESENTATIVE

AT

Cheque # 11260 - 21/5/44

W.S.G. Application No. 8060-

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

FILE NO. N.S. V-50413-

"WAR SERVICE GRATUITY"

COMPUTATION OF SERVICE

<u>Mills</u>	<u>Archie William</u>	<u>V-50413</u>	<u>Coder</u>
SURNAME	CHRISTIAN NAMES IN FULL	OFFICIAL NUMBER	RANK OR RATING ON DISCHARGE

CAUSE OF DISCHARGE: "Killed in action" "Hmcs Valleyfield"
Application made by widow ~~(Pension)~~ in Receipt of Pension

	<u>TOTAL SERVICE</u>	
Date of Active Service	<u>17 Feb '43</u>	366 1#5 30 7 <u>418</u>
Date of Discharge	<u>7 May '44</u>	
Total No. of Days	<u>418</u>	
# Less non qualifying service	<u>—</u>	Total Days <u>418</u>

	<u>OVERSEAS SERVICE</u>	
% Total No. of Days	<u>152</u>	
# Less non qualifying service	<u>—</u>	Total Days <u>152</u>

Record of Service in other Forces (per Naval Records)

Branch of Service N
Date of Active Service i
Date of Discharge L

& % Overleaf

Computed By [Signature]
Checked By [Signature]

J. B. McGregor
for (H.B. Money)
Payr. Cmdr. R.C.N.R.
Director of Personnel Records

DATE: APR 3 1944

00F
Pencil

NON QUALIFYING SERVICE

(#)	Date	Reason	No. of Days
"	_____	"	"
"	_____	"	"
"	_____	"	"
"	_____	"	"
"	_____	"	"
"	_____	"	"
"	_____	"	"
			<u>Total Days</u> _____

(%)
OVERSEAS SERVICE:

Where Serving	From	To	No. of Days
Valleyfield	8 Dec '43	7 May '44	152 -

~~24~~
 31
 29
 31
 30
 7
152

APR 8 1944

8060

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

Name of Deceased Member Archie Wm MILLS Rank or Rating CODER O.No. V50413

1. Dependents' Allowance and Assigned Pay in force at date of death:
D.A. \$ 37.20 Mrs Helen M. MILLS (wife)
A.P. \$ 23.00 Box 2,
Cottam, Ont
D.A. -
A.P. -

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

3. War Service Gratuity Application(s) received from: Mrs Helen M. MILLS,
Box 2,
Cottam, Ont

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

(X) To be paid to: Mrs Helen M. MILLS - wife In the full proportion of: 1

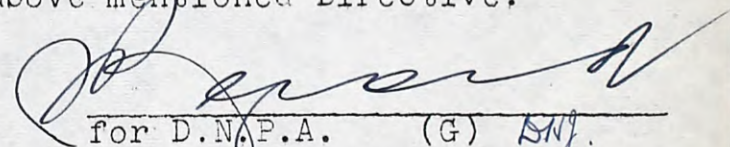
- and -

to: In the proportion of: 1

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

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

Date 6 Apr. 45


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

DISTRIBUTION OF SERVICE ESTATES

Estates Form "P. 4"

NAVY

Name: HILLS, Surname Archie W., Christian Names No.: V.50413
 Rank Editor Unit R.C.N.T.R. O/S Date of Death 7-5-44

AMOUNT

Date: 16-11-44 L.P.C.....\$ 77.87
 Other Credits.....
 Total..... 77.87

SHARE	RELATIONSHIP	NAME AND ADDRESS	AMOUNT
All	Widow	<p align="center">Mrs. Helen M. Mills, Box 2, COTTAM, Ontario.</p> <p align="center">(Sole beneficiary under will)</p> <p align="center">TO BE FORWARDED BY REG. MAIL DIRECT.</p> <p align="center">P4. TO TREAS. 27/11/44 94</p>	77.87

AUTHORITY					
H.Q. F.E. No.	VOTE	PRI	H.Q. SUB.	OBJ.	AMOUNT
9999	531	00	50	000	877.87
CLASSIFIED BY K. L. McCUAIG			EXAMINED BY For Chief Treasury Officer		

DISTRIBUTION APPROVED AND AUTHORIZED

Original signed by
L. M. FIRTH

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

AUDITED FOR PAYMENT

For Chief Treasury Officer

47

ACCOUNTS OF MEN DISCHARGED

Account of the Balance of Wages, the Sale of Clothes and Effects and the other Credits of Men Discharged to the Shore, D. D. or Run

Name MILLS, Archie Rating Coder

Official No. V. 50413 H.M.C.S. AVALON "VALLEYFIELD" List 12²/68

Who* DISCHARGED DEAD on the 7 May 19 44

	\$	cts.
Net sum due on ledger on account of Wages.....	N	I L
Proceeds of sale of Effects charged against Wages, brought from the other side		
CASH—	\$	cts.
Proceeds of sale of Effects, brought from the other side.....		
Found amongst Effects.....		
Debts collected \$.....		
Cash deposited by official Receipt No. <u>25181 Adm. Naval Estates (Present War)</u>	<u>77</u>	<u>87</u>
Cash debited in the Accountant Officer's Cash Acct.....	77	87
If in debt in ledger, amount to be stated (in red ink).....		
Rate of allotment (in words) <u>AP TWENTY-THREE DOLLARS</u> charged to <u>31 May 1944</u>		
Name of ship from which transferred <u>HMCS "VALLEYFIELD"</u>		
Total†.....	<u>77</u>	<u>87</u>
	77	87

We hereby certify that we have every reason to believe that the above account contains a true statement of all wages, Effects, and other Credits or Debts on the Ledger of AVALON for "VALLEYFIELD" amounting to a net balance† CREDITOR of SEVENTY-SEVEN ----- dollars ---EIGHTY-SEVEN cents.

Dated on board H.M.C.S. AVALON at ST. JOHN'S Nfld. this FIFTH day of JUNE 19 44

Approved PAY LIEUT. CDR., R.C.N.V.R. Accountant Officer

Out Davis
A/CAPTAIN. RCN

Jush
Initials of the Assistant Accountant Officer
Commanding Officer.

For Use at Headquarters. \$.....cts.....credited on Inspector's certificate

No.....to.....

Signature.....

Date.....19.....

*State whether discharged on shore, D.D. or Run. †State whether "debtor" or "creditor".
Subscription for Charitable or other purposes should not be shown hereon, but on a Remittance List, and dealt with as laid down in the King's Regulations.

LEDGER: *WCH*
AUDIT: *[Signature]*

STATEMENT OF ACCOUNT

46

True extract from the ledger of H.M.C.S. "AVALON" "VALLEYFIELD" ending 30 June 19 44

List 12² No. 68 (Name) MILLS, Archie Rank Rating Coder No. V.50413

When entered F.B. Date of appearance F.B. Whither discharged DEAD

		\$	c.																									
CREDIT from former account.....		36	01																									
Pay as..... Coder..... from 1 Apl..... to 31 May..... (.61 days at \$ 2.00 a day).....		122	00																									
Adjust. Coder..... " 17 Mch..... " 31 Mch..... (.15 " .40 ").....		6	00																									
"																												
"																												
"																												
Kit Upkeep Allowance..... Adjustment March, 1944 1 Apl - 7 May		4	33 47																									
OTHER CREDITS:																												
Total credits.....		168	81																									
DEBT from former account.....		N I L																										
PAYMENTS:—	<table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th>1st</th> <th>2nd</th> <th>3rd</th> <th>4th</th> <th>5th</th> </tr> <tr> <th>\$ c.</th> <th>\$ c.</th> <th>\$ c.</th> <th>\$ c.</th> <th>\$ c.</th> </tr> </thead> <tbody> <tr> <td>1st month..... 36.00</td> <td>8.94</td> <td></td> <td></td> <td></td> </tr> <tr> <td>2nd month.....</td> <td></td> <td></td> <td></td> <td></td> </tr> <tr> <td>3rd month.....</td> <td></td> <td></td> <td></td> <td></td> </tr> </tbody> </table>	1st	2nd	3rd	4th	5th	\$ c.	\$ c.	\$ c.	\$ c.	\$ c.	1st month..... 36.00	8.94				2nd month.....					3rd month.....					Total.....	44 94
1st	2nd	3rd	4th	5th																								
\$ c.	\$ c.	\$ c.	\$ c.	\$ c.																								
1st month..... 36.00	8.94																											
2nd month.....																												
3rd month.....																												
		Total.....																										
		Total.....																										
Allotment AP 23.00 chged Apl & May		46	00																									
Pension deduction (Officers) charged to..... of.....																												
Hospital stoppages.....																												
Mulcts.....																												
OTHER CHARGES: O.R. 25181 payable Adm. Naval Estates (Present War)		77	87																									
Total debits		168	81																									
Balance Cr. or Dr.		N I L																										

LEDGER: *led*
AUDIT: *PO*

(Balance Dr. to be shown in red)

Number of days actually victualled during period mentioned above 37

NOT VICTUALLED	LENT, SICK OR LEAVE	INCLUSIVE DATE		No. OF DAYS	SHIP, HOSPITAL, etc., IN WHICH BORNE
		FROM	TO		

Date 5 June 19 44

[Signature]
PAY LIEUT. CDR., R.C.N.V.R.
ACCOUNTANT OFFICER

Six copies to be rendered to Naval Service Headquarters
REPORT OF THE DEATH OF AN OFFICER, MAN OR BOY

40

H.M.C.S. "VALLEYFIELD" at SEA

Name Archie William HILLS (Christian names in full)

Rank or Rating CODER Official No. V-50413 (If unknown, date of first entry)

Place of Birth South Woodlee, Ontario Date of Birth 11 FEB. 1907

Occupation in Civil Life BUS DRIVER Religion UNITED CHURCH

Number of years in the Navy (Long Service R.C.N., or mobilized service in case of R.C.N. (Temporary) or Reserve ratings) 1 YEAR 2 MONTHS

Date of Death 7th. MAY, 1944 Place of Death AT SEA

Cause of Death ENEMY ACTION--TORPEDOING OF H.M.C.S. "VALLEYFIELD" (If due to accident, violence, or enemy action, particulars to be stated briefly)

Nearest known relative or friend Name Mrs. Helen M. HILLS Relationship WIFE

Address BOX 2 COTTAM ONTARIO

Date on which the above was informed by Ship INFORMED BY MSEQ

Date on which death was registered with local Officials NOT REGISTERED

In the case of Imperial Service men, whether Active Service, Pensioner or Reserve, date on which the prescribed return was rendered to the Registrar General in London, Edinburgh, or Dublin according to

Place of Burial ST. JOHN'S, NEWFOUNDLAND. JOINT SERVICES CEMETARY Date of Burial 10 MAY 1944 (If known) (If known)

Location, Number, etc., of grave SECT. "A" PLOT 1 GRAVE 1 (If known)

Undertaker employed GARNELL'S FUNERAL HOME (If any)

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

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

17th. MAY, 1944

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

In all cases this Form is to be sent in addition to the Report by Telegraph required by the Regulation.

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

V50413

IN THE NAME OF GOD, AMEN

I, Archie William MILLS, Ordinary Coder of His Majesty's Ship "HUNTER" (now a Patient XXXX),

*If in Hospital or in Hospital Ship.
Insert the degree of relationship (if of any) and place of residence of the Legatee or Legatees.
See instructions on the back hereof.

being sound of mind, do hereby make this my last Will and Testament: I give and bequeath unto my wife, Helen Marie MILLS, of Cottam, in the County of Essex, Province of Ontario.

8524

all such Wages, Prize Money, Allowances, and other Sum or Sums of Money, as now are, or hereafter may be due to me for my service on board the said Ship, or any other Ship or Vessel, of the Royal Navy, together with all other my Estate and Effects whatsoever and wheresoever.

Insert the degree of relationship (if of any) and place of residence of the Executor or Executors.

And I do hereby appoint my wife - Helen Marie MILLS, of Cottam County of Essex, Province of Ontario.

Executors of this my last Will and Testament; and hereby revoking all former Wills by me made, I declare this to be my last Will and Testament.

In Witness whereof I have at Windsor, Ontario, hereunto set my hand, this 6th day of November, in the Year of Our Lord One Thousand Nine Hundred Forty-two.

+ Archie W. Mills
Witnesses: J. H. [unclear] [unclear]

Signed by the said Testator, as his last Will and Testament, in the presence of us present at the same time, who in his presence at his request and in the presence of each other have subscribed our names as Witnesses.

NOTE.—As Wills of Petty Officers, Seamen, and Marines must be executed with the formalities required by the Law of England in the case of other persons, every such Will must be executed in the presence of, and be attested by, two disinterested Witnesses.
Where the Will is made on board one of His Majesty's Ships, one of the two requisite attesting Witnesses shall be a Commissioned Officer, Chaplain, or Warrant or Subordinate Officer belonging to His Majesty's Naval or Marine or Military Force.
Where the Will is made elsewhere than on Board one of His Majesty's Ships, one of the two requisite attesting Witnesses shall be a Commissioned Officer, or Chaplain, or Warrant or Subordinate Officer, or the Governor, Agent, Physician, Surgeon, Assistant-Surgeon, or Chaplain of a Naval Hospital at home or abroad, or a Justice of the Peace, or the Incumbent, Curate, or Minister of a Church or Place of Worship in the Parish where the Will is executed, or a British Consular Officer, or an Officer of Customs, or a Notary Public, or a Solicitor, or in Scotland a Law Agent.
A Will made by any person while serving as a Seaman or Marine will not be valid for any purpose if it is written or contained on or in the same Paper, Parchment, or Instrument with a Power of Attorney.

The Certificate on the back hereof, is to be signed by the person by whom the Will is prepared.

Noted in Service Records by M.D.

Instructions for filling up the Form

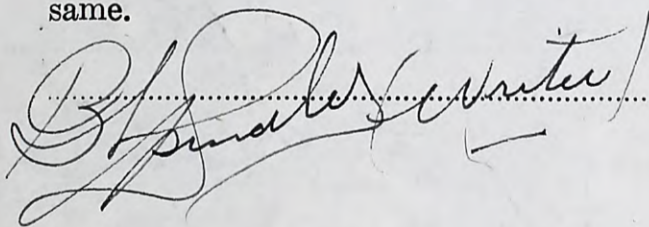
If a special legacy is to be given, the name, residence (and relationship if any) of the person interested is to be inserted in the space after the words "I give and bequeath," or if more than one person, the respective names, &c., also the particulars of the property bequeathed.

Then the words " And I give and bequeath unto " should be inserted together with the names, &c., of the person or persons to whom the residue of the Testator's property is to be given, and the words printed in italics commencing " all such wages," should be struck out.

If, however, the *whole* of the Testator's property is to be given to one person, or between several, all that is necessary is to insert in the space, the names, &c., of the person or persons to be benefited.

CERTIFICATE

I hereby certify that the Will on the other side hereof was previously to its execution read over to the Testator who appeared perfectly to understand the same.



} Signature of the person
by whom the Will was prepared.

Cottam Box 2. Ont

July 26th 1944



Department of National Defence
Estate Branch Naval Service

Dear Sirs:

I received a letter from you stating I could have my late husband Archie William Mills ordinary Coker No V50413 RCNVR War Savings Certificate re-registered in my name, so I am sending same with this letter, and if you would be good enough to take care of this matter I would be very pleased.

Yours truly

Mrs Helen Marie Mills

Cottam Box 2.

Ontario.

RV #1347
28/7/44

1 x 25 -
191 5/10
11 x 5

✓
190
55
245

DEPENDENTS ALLOWANCE BOARD

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

Official No. V-50413 Rank or Rating Coder 183042

MILLS Archie William
(Surname) (Christian Names)

Military Unit

Air Force Establishment or Station

Naval Ship or Establishment

DECISION OF THE BOARD

Reported Missing May 7th, 1944, -Officer i/c N.P. Records.
Presumed Dead for official purposes. Pension has been granted
effective May 8th, 1944. Of Payments while missing (award
dated June 7th, 1944) an amount equal to retroactive pension
to be recovered from the C.P.C.

P.A.'S CHECKED IN
C.R. BY AK

Handwritten signature in red ink, possibly "C.R."

*Mailed 17/10/44
D.M.P.W. C.P.C.*

Reviewer K. Beardsley

Date October 10th, 1944.

.....
(Chairman)
Cameron
(Member)

.....
(Member)
Allen

Name MILLS, Archie William
 Sub-Rating and Seniority Ord. Cook Non-Sub
 O.N. V50413 S.B. No. _____ W.B. No. _____
 Joined Ship 17 Nov '42 from Shore
 Engagement: Period 17 Nov '42 Expires _____
 Date of Birth 11 Feb. 1907 Religion United Church
 Character V.G. Efficiency Sat Date July 24/43
 Badges NIV Class for Conduct 1ST Class for Leave 1ST
 Date due for: Next Badge 17 Nov 46
 Progressive Pay _____
 L.S. & G.C. Recommended _____

Advancement.	Wishes to Pass?	Recommended?	Date Qualified?
Educ. Test Pt.1	_____	_____	_____
Higher Educ. Test.	_____	_____	_____
Professional or higher Sub-rating	_____	_____	_____
do Non-Sub.	_____	_____	_____

(For ordinary Seamen Form T.S.34 (S.536D) must be used in addition).

Any Non-Service Attainments Farming - Truck Driving
 Swimming Qualification Very Good PPT 14/4/43
 Athletic capabilities Baseball, track

General Remarks (including intelligence, energy, initiative, powers of command).

Raw score M test 159
School - Junior matric
This rating has been kept on as our truck Driver. He has proved to be a very efficient and satisfactory rating

H.M.C.S. "Hunter" F Mitchell
 Officer of Division.

Date July 24/43

- 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.

CERTIFICATE OF PROGRESS OF ORDINARY SEAMEN

(To be used in conjunction with Form S. 399 Divisional Training Progress Book.)

NAME <i>MILLS Archie William</i>	OFFICIAL No. <i>V50413</i>	Date of Birth <i>11 Feb. 1907</i>
ON LEAVING HARBOUR TRAINING SERVICE		

Subject	Ability	REMARKS (percentages obtained, etc.)	Initials of Instructing Officer
*School.....	<i>84%</i>	<i>Very good</i>	<i>Fm</i>
Seamanship— Boat work: <i>Theory</i>	<i>87%</i>	<i>Very good</i>	<i>Fm</i>
(a) Pulling..... <i>none</i>			
(b) Sailing..... <i>none</i>			
Gunnery and Disciplinary Training.....	<i>80%</i>	<i>Good</i>	<i>Fm</i>
Shooting.....			
Swimming—P. P. T.	<i>Very good</i>	Date qualified..... <i>14/4/43</i>	
Physical and Recreational Training.....			
Special qualifications.....			
Call Boy.....			
Bugler (Sea Service).....			
Special Remarks			
e.g., C. W. Candidate.....			
.....			
.....			
.....			

On joining:— Weight *172* Height *5' 8"* Date *6 Nov. '42*

On leaving:— Weight..... Height..... Date.....

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

H.M.C.S. "*Hunter*" Date *24 July '43* *[Signature]* Captain.
Rt. Com. V.R.

"It is an offence under the Official Secrets Act for unauthorized persons to retain possession of this booklet, or of parts of it, or to communicate its subject matter by any means to any persons other than those who require to know it in connection with their duty or with action undertaken at the request or with the approval of an Officer or Official of the Department of National Defence, authorized by the Department in that behalf."

DEPARTMENT OF NATIONAL DEFENCE

Revised Examination "M"

No C 10800

Last name MILLS Christian name ARCHIE WILLIAM
 Regimental No. V50413 Rank ORDINARY CODER
 Unit R.C.N.V.R. Date APRIL 1 1943
 Age 36 Previous Occupation GREYHOUND BUS OPERATOR
 Schooling JUNIOR MATRICULATION Language ENGLISH

Instructions

1. Do not open this booklet until you are told.
2. This booklet contains 8 short tests. You will have a limited time to work on each. Do not start work until the Examiner says "Go! Stop as soon as he says "Stop!"
3. You may not have time to do everything in each test, but do as much as you can. Both speed and accuracy are important. If you come to an item which is too hard, skip it and try the next. Each item counts the same. If you have any time left over, you can check what you have done on that page, but you must not turn back to an earlier page.
4. You will be told what to do on each page. Do not turn over any page except as you are told.

	Score	Comments	
Test 1	19		
Test 2	15		
Test 3	7		
Test 4	25		
Test 5	27		
Test 6	13		
Test 7	22		
Test 8	31		
Total	159	110	✓
Rating	C		

S. 98B

100M-7-42 (5438)
N.S. 815-B

KIT LIST—MEN DRESSED AS SEAMEN

(REDUCED KIT FOR DURATION OF HOSTILITIES)

A. W. MILLS
Name

o/coder
Rating

V-50413
Official No.

Name

* State where issue made.

Forms S.1048 on which issues were made

Scale Allowed		Article	No.	Date	* Place				
R.C.N.	R.C.N.V.R.								
		Bags, Kit	1						
		Bags, Soap	1						
		Belts, Life					1		
		Belts, Waist	1						
		Boots, half	2						
		Brushes, Hard	1						
		" Polishing				1			
		" Clothes							
		" Hair						1	
		" Tooth	1						1
		Caps, blue cloth	1						
		Caps, white duck				1			
		Cases, attache	1						
		Combs, horn	1						
		Collars, blue jean	1			2			
		Coats, oilskin						1	
		Drawers	2						
		Jerseys, naval	1						
		Jerseys, sport						2	
		(b) Knives, with spike	1						
		Lanyards, knife	2						
		Overcoats	1						
		Ribbons, Cap	1			1			
		Scarves, black silk	1						
		Shoes, black leather				1			
		Shoes, gymnastic							
		Shorts, recreational, drill	2						
		Shorts, tropical							
		Singlets, tropical							
		Socks, pairs	2						
		Stockings, pairs	2					2	
		(a) Suits, blue overall	1						
		Towels	2						
		Type							
		Vests, flannel	2						1
		Vests, cotton uniform							
		Vests, Singlets for wear under							
		Vests, cotton uniform							
		Jumpers, serge	1			1			
		Jumpers, duck working						2	
		Trousers, serge	1			1			
		Trousers, duck						2	
		Beds				1			
		Blankets				1			
		Bed Covers						2	
		Hammocks				1			1
		Clews and Lanyards, sets				1			
		Lashing				1			
		(b) Manual of Seamanship	1						

Rubbers Winter Issue

Gift Clothing received from Organization

Description	Year Issued				Description	Year Issued			
	19.....	19.....	19.....	19.....		19.....	19.....	19.....	19.....
Caps, Winter					Comforters				
Comforters					Helmets, Balaclava				
Drawers, Woollen					Gloves or Mitts				
Helmets, Balaclava					Socks				
Jerseys, Naval					Stockings				
Mitts, leather					Sweaters				
Rubbers					Wristlets				
Socks					Windbreakers				
Stockings									

(a) Note: Stokers issued with 2 Blue Jean Suits.

(b) For Seamen's Branch only.

29810 issued



Department of National Defence
Naval Service

IN REPLY PLEASE QUOTE
No. N.S. V-50413 PERS. (N)

Ottawa, Canada.
10 May, 1944.

058970

Sir:

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

<u>NAME, RANK/RATING NO.</u>	<u>PLACE, DATE & CAUSE of DEATH</u>	<u>NEXT OF KIN</u>
MILLS, Archie William Ordinary Coder, V50413, R.C.N.V.R.	Killed in action on 7 May, 1944, when the ship in which he was serving was lost by enemy action.	Wife: Mrs. Helen Marie Mills, Box 2, Cottam, Ont.

<u>IN FAVOUR OF:</u>	<u>ALLOTMENTS IN FORCE</u>	<u>AMOUNT</u>	<u>INITIALS</u>
Mrs. Helen M. Mills, Box 2, Cottam, Ontario.		D.A. \$37.20 A.P. \$23.00	L.D.

H.M.
13/5/44

WILL: Attached.

Yours truly,

H.B. Money

for
SECRETARY, NAVAL BOARD



Encl.

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

Christiana
Box 23



Adjustment of advances under Article 367
paragraph 113A of Canadian Naval Regulations.

Archie William Mills, Coder, V-50413
D.D. 7th May, 1944, H.M.C.S., "VALLEYFIELD".

Authorized payments for six months June to November
inclusive.

6 months Assigned Pay-	⊙ \$30.00	\$180.00		
6 months Dependents' Allowance-	⊙ 37.20	<u>223.20</u>		\$403.20
Pensions 6 months-	⊙ 60.00		\$360.00	
Advance for month of June-	⊙ 67.20		67.20	
Recovery at pension rate for June-	⊙ 60.00			60.00
Deposited by Off.R. # 60-11007.				
Adjustment by cheque-			<u>36.00</u>	<u> </u>
			\$463.20	\$463.20

Alld
f (C.F.G. Hill)
A/Pay. Captain, R.C.N.V.R.
Director of Naval Pay Accounting.

Gibb

TFH:PMB

R E G I S T E R E D

AIR MAIL

FILE: V¹/₂50413 (Pers.N.)

10

8th May, 1944

Dear Mrs. Mills:

It is with deepest regret that I must confirm the telegram of the 8th of May, 1944, from the Minister of National Defence for Naval Services, informing you that your husband, Archie William Mills, Ordinary Coder, Royal Canadian Naval Volunteer Reserve, Official Number V-50413, has been killed in action.

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

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

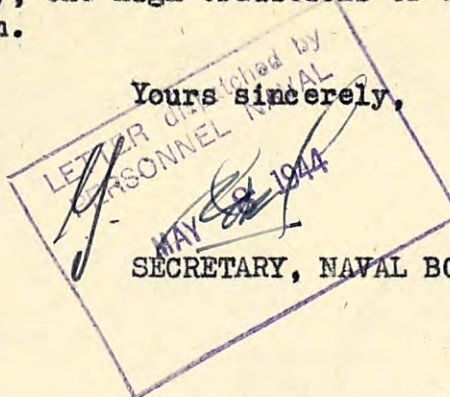
It is requested that you will regard as confidential anything beyond the fact of your husband's loss on war service until such time as an official announcement is made, as this information might prove useful to the enemy.

Please allow me to express sincere sympathy with you in your bereavement on behalf of the Minister of National Defence for Naval Services, the Chief of the Naval Staff, and the Officers and men of the Royal Canadian Navy, the high traditions of which your husband has helped to maintain.

Yours sincerely,

SECRETARY, NAVAL BOARD

Mrs. Helen Marie Mills,
Box 2,
COTTAM, Ontario



bx
ld

TFH:PMB

REGISTERED
AIR MAIL

FILE: V-50413 (Pers.N.)

11

11th May, 1944

Dear Mrs. Mills:

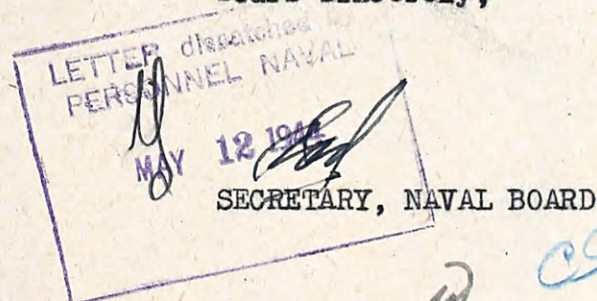
Further to my letter of the 8th of May, 1944, particulars respecting the loss of H.M.C.S. "Valleyfield", from which your husband has been reported "killed in action" are being released to the press, and I am accordingly passing them on for your information.

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

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

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

Yours sincerely,



Mrs. Helen Marie Mills,
Box 2,
COTTAM, Ont.

Passing Certificate

7

This is to Certify

that Archie William MILLS

Rating Ordinary Coder, RCNVR. Official Number V. 50413

has passed

THE EDUCATIONAL TEST, I, R.C.N.

held on 4th May, 1943.

For advancement to Petty Officer

..... Instr. Cdr., RCN.
Director of Naval Education

Naval Service Headquarters

Ottawa, this 1st day of June, 1943.

C.N.S. 2431
10M-5-42 (4453)
N.S. 815-9-2431

Noted in Service
Records by J.P.

44

P.1.3.

V50413 OFFICIAL NUMBER NAME MILLS, Archie William (Surname) (Given Names) OFFICIAL NUMBER V50413

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
HMCS "Hunter"	Ord. Coder	6	11	42	Div. Str. Windsor.												
"	"	17	3	43	Active Service D.L.17-3-43												
St. Hyacinthe.	"	28	7	43	D.L.28.7.43.												
Stadacona	"	10	11	43	DRD H-3161.												
Hochelaga II	"	26	11	43	DRD H-3343												
Valleyfield	"	8	12	43	Service Certificate	V.G.	SAT.	31	12	43.							
DISCHARGED.	Coder	17	3	44	Rated. "												
	"	7	5	44	"Killed in Action per A Casualty List.	V.G.	Sat.	7	5	44							

GENERAL REMARKS

Canadian Memorial Cross awarded to (Wife) Mrs. Helen M. Mills, Box #2, Cottam, Ont. to date 5.6.44.

Canadian Memorial Cross awarded to Mother: Mrs. William S. Mills, Talbot Street, Essex, Ontario. 22-6-44

DATE OF BIRTH			PLACE	CIVIL	OCCU.	REL.	ED.	PERM.	RESIDENCE	PREV.	ENL.	RANK OR RATE ON ENLISTMENT			
DY.	MO.	YR.	BIRTH	MAIN	SUB.	GION.		A.	CTV.	TOWN	SERV.	DIV.	A	BR	RANK
11	2	09	11	580	0	40	X	1	1200	9	11		0	09	92
ENLIST. DATE			ACT. SERV. DATE	STR.	ACT. SERV. DATE		SHIP OR	RANK OR RATE							
DY.	MO.	YR.	DY.	MO.	YR.	CAT.		ESTAB.	A	BR.	RANK				
06	11	42	17	03	43			9690		09	95				
SENIORITY			STR.	NON-SUA	M	CODED		CHECKED							
DY.	MO.	YR.	CAT.	A	B	ST.									
17	03	43	10	00	00	20									

07-05-44

V50413

OFFICIAL NUMBER

FILE NUMBER

113-M-5937

OFFICIAL NUMBER V50413

NAME MILLS, (Surname) Archie William (Given Names) DATE OF BIRTH 11 February, 1907.PLACE OF BIRTH South Woodslee, Ontario. OCCUPATION Driver.RELIGION United Church. EDUCATIONRESIDENCE AT TIME OF ENLISTMENT: Street and No. Box 2, Town Cottam, Province, etc. Ontario.

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
6	11	42	Hostilities only	5'8"	Black	Brn.	Dark	Nil.	Essex Scottish Militia.	Pte.	1938	1939

NEXT OF KIN RELATIONSHIP (in pencil) Wife NAME (in pencil) Miss Helen J. Mills ADDRESS (in pencil): Street and No. Box 2 Town Cottam Province, etc. 7-4-43

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	
			Eligible for award of CVSM & Clasp (249A/A13914)	4	5	43	Passed F.T. I. R.C.N.				
				15	10	43	Passed for Ord. Coder. (21-25-3)				

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		

Date (in figures)				DAYS FORFEITED					O.H.F. Received.	
Day	Month	Year	Prison	Det'n	Cells	C. Power	W. Trial	In diff. Char.	Last Will and Testament #8524 Received	

SECOND CLASS FOR CONDUCT	
From	To

