A1271
MURPHY
JOHN WILLIA

Mrs. Alice Murphy,
Box 216,
Collingwood, Ontario.

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. A-1271 FD. 514

# DEPARTMENT OF NATIONAL DEFENCE
## ESTATES BRANCH
### OTTAWA, ONT.

September 12 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

MURPHY, John William Engineroom Artificer Second Class,

Official Number A-1271, R.C.N.R.

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



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

GC/

Commander R.C.N.(R)
Director of Estates.

M.F.W. 77
6-44 (4878)
H.Q. 1772-39-972

ANSWER IN FULL ALL APPLICABLE QUESTIONS

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

| Degrees of Relationship | RELATIVES required to be accounted for | | INFORMANT'S STATEMENT: NAME IN FULL of any Relative, if any, in each degree specified | Age | ADDRESS IN FULL of each surviving Relative, opposite his or her name, and date of death of each deceased relative |
|---|---|---|---|---|---|
| 1 | Widow of the Deceased | | No. | | |
| 2 | Children of the Deceased and dates of their Births | | No. | | |
| 3 | Father of the Deceased | | Dead. John. William | | ~~Dec~~ Nov. 23 1918. |
| 4 | Mother of the Deceased | | Mrs. Alice Murphy. | | |
| 5 | Brothers of the Deceased | Full Blood | one Brother. A.B. Fred. Murphy. A 4889. H.M.C.S. B.D.V. 8 c/o F.M.O. Esquimalt-BC. | 27 | |
| | | Half Blood | | | |
| 6 | Sisters of the Deceased | Full Blood | one sister Mrs. Allan. Morrison Sundridge cent. R R No. 2. | 30 | |
| | | Half Blood | | | |
| 7 | Names of brothers or sisters (whether of the full or the half blood) of the Deceased, *who are dead*, and date of death of each. | | Names and ages of their children (if any) | | Address of their children |
| | | | | | |

ANSWER FULLY EACH QUESTION ON THIS PAGE

PARTICULARS AS TO IDENTITY

| | | |
|---|---|---|
| 8 | Full names of the deceased. | John. William Murphy. |
| 9 | Date of his birth. | 12 of December. 1911 |
| 10 | Place and date of his marriage. | Nil |
| 11 | Place and date of his parents' marriage. | Meaford Ont 27 December 1910 |

PARTICULARS OF DOMICILE

| | | |
|---|---|---|
| 12 | Place where deceased was born. | Collingwood. |
| 13 | State, in order, the Province, State and/or County in which he resided before enlistment and the period of time in each. | (a) Ontario<br>(b) Simcoe Life time<br>(c)<br>(d) |
| 14 | Nature of employment before enlistment. | Second. Engeer. |
| 15 | State whether he owned the premises in which he lived, and, if so, where situated. | No the home was mine but he helped. to keep the home up. |
| 16 | Name place where deceased stated he intended to make his permanent home. | I have never heard him say. |

PARTICULARS OF ESTATE

| | | |
|---|---|---|
| 17 | Did he leave a Will? If in your custody, please forward. | no. |
| 18 | If married, and domiciled in the Province of Quebec or in a State in the U.S.A. or in a Country under the laws of which there is community of property between spouses,—was there a marriage contract dealing with property? | ~~Not~~ no. |
| 19 | Did he have a Bank, Post Office or other deposit account? If so, give name and address of bank, etc., and the amount on deposit. Do you wish it administered with the pay account? | he had a Bank account here which is in his name and mine ~~Bank Montreal Collingwood Ont.~~ no 10306. yes. amount. 415.55 |
| 20 | Amount of War Savings Certificates held by deceased. Indicate where located. | no. |
| 21 | Amount of Victory Loan Bonds held by deceased. Indicate whether registered or bearer and where located. | warbond one he had made out in my name and another he told me he bought on the Valley field |
| 22 | If deceased had life insurance, name companies and amount payable under each policy and the person named as beneficiary therein. | one Insurance made out to me. one thousand. the Domenion of Canada General Insurance Company. 26-28 Adelaide st west. Toronto Ont. |
| 23 | Describe other assets, if any, and estimated value thereof. Use space on page 4 if necessary. | no more that I know of. |

OTHER PARTICULARS

| | | |
|---|---|---|
| 24 | Did the deceased after enlistment incur any debts for:—<br>(a) His own separate board and lodging while on service.<br>(b) Service clothing and equipment.<br>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 |
| 25 | Have you or any other relative paid the funeral expenses or any part thereof? If so, attach itemized accounts showing amount paid, and by whom. | no. |

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

(PLEASE TURN OVER)

## DECLARATION

*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.

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. Alice Murphy — Signature of Informant

Box 216. Collingwood. Ont. — Address

## CERTIFICATE

I hereby certify that to the best of my knowledge and belief Mrs. Alice Murphy {Name of informant} is the* Mother of the Deceased above described. The above Declaration was made by the Informant and signed in my presence.

*See above.

Dated at Collingwood this 27nd day of September 19 24

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

Address Collingwood. 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

N. R. 5
5M—1-39
N.S. 815-12-5

CANADA

# ATTESTATION FORM

## FOR MEN OF THE ROYAL CANADIAN NAVAL RESERVE

SURNAME MURPHY OFFICIAL NO.

CHRISTIAN NAMES John William MARRIED, SINGLE OR WIDOWER Single

| PERMANENT ADDRESS | RELIGION |
|---|---|
| Simcoe St. Collingwood, Ontario. Canada. | C.of E. |

| DATE OF BIRTH | PLACE OF BIRTH | NAME AND ADDRESS OF NEXT OF KIN |
|---|---|---|
| 11 December 1911 | Town Collingw ood<br>County Simcoe<br>Province Ontario | Mrs Alice MURPHY (Mother)<br>Simcoe Street,<br>Collingwood,<br>Ontario. |

### PERSONAL DESCRIPTION ON ENROLMENT

| HEIGHT | CHEST MEASUREMENT | HAIR | EYES | COM-PLEXION | WOUNDS, SCARS, MARKS |
|---|---|---|---|---|---|
| Feet 5<br>Inches 9 | Inflated<br>Deflated 36<br>Mean | Drk Brn | Brown | Fair | Tattoo rt.arm: Anchor<br>Do lt. do: Sailing Vessel. |

| DATE OF ENROLMENT | RATING ENROLLING FOR | TRADE OR CALLING AND IN WHOSE EMPLOY |
|---|---|---|
| 14 February 1940 | Engineman (T) | Seaman. |

### (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 Reserve, and that I accept and agree to abide by the rules of the said Force.

(3) (a) ~~That it is my intention to follow the sea for a period of at least five years from this date.~~

(b) ~~That it is my intention to follow the calling of a Fireman, either at sea or on shore, for a period of five years from this date.~~

(c) That it is my intention to follow the sea in an Engine-room capacity for a period of five years from this date.

NOTE.—Candidates for enrolment as *Seaman* are to cross out clauses (b) and (c) above.

Candidates for enrolment as *Stoker* are to cross out clauses (a) and (c) above.

Candidates for enrolment as *E.R.A.* are to cross out clauses (a), (b) and (c) above.

Candidates for enrolment as *Engineman* are to cross out clauses (a) and (b) above.

(4) That I have never been rejected from any of His Majesty's Forces on account of unfitness.

*Cross out clause not applicable

(5) That (a)* I have never served, and am not serving in any Naval, Military, Reserve or Territorial Force.

NO.

(b)* I served in.....for the period shown.

| Served in | Rank | From | To |
|---|---|---|---|
| ..... | NIL | ..... | |

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

(7) On being enrolled as a member of the Royal Canadian Naval Reserve, I undertake and bind myself:— AND/OR DURATION OF HOSTILITIES

(a) To serve from the date thereof for five consecutive years, being subject to the provisions of the Naval Service Act, and of the Regulations made in pursuance thereof for the government of the Royal Canadian Naval Reserve, and to the customs and usages of His Majesty's Canadian Naval Service.

(b) To report for active service if called upon in time of war or emergency, and, if called into active service, to serve ashore or afloat as may be directed according to where my services are required.

(c) To keep in good repair and condition the articles of uniform and any articles of outfit which may be issued to me and to return them to the nearest Registrar 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.

(8) I am willing to be vaccinated or re-vaccinated and inoculated as considered necessary by the appropriate authorities.

Dated this 14TH day of February 1940

John W. Murphy
(Signature of Applicant)

(C) **OATH OF ALLEGIANCE**

I, John William MURPHY do sincerely promise and swear (or solemnly declare) that I will be faithful and bear true allegiance to His Britannic Majesty.

Signature of Applicant John W. Murphy

Witness G A S Lyon

Date 14 February 1940 Rank Paymaster Lieut. RCNR

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

(D) **CERTIFICATE OF ATTESTING OFFICIAL**

I hereby certify that all the foregoing statements were made by the man above named, in my presence, and that he has made and signed the above declaration and has taken the oath of allegiance in my presence this 14th day of February 1940

Payr.Lieut. RCNR (Signature of Officer and rank)

NOTE.—When this form has been completed it is to be forwarded to Naval Service Headquarters, Ottawa, for custody.

Medically fit.
A. R. Anderson
Surgeon Commdr RCN

APPROVED:-
J Edwards
Commander R. C. N.

Can. B. 207
20M—8-38
N.S. 815-2-207

CANADA

# CERTIFICATE OF MEDICAL EXAMINATION FOR THE ENTRY OF OFFICERS, MEN AND BOYS FOR THE NAVAL SERVICE OF CANADA

(R.C.N. OR RESERVE FORCES)

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

I, the undersigned, have examined MURPHY. John William

candidate for entry as Engineman R.C.N.R.

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

Dated at Halifax N.S. the 14th of February 1940

Albert Laroche
*Examining Medical Officer*

(*Rank*) Lt SURGEON COMMANDER

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

| Age { Years Months (a) | Weight without Clothes (b) | Height with Bare Feet (c) | General Development (d) | Chest Girth (e) | Vision by— (i) Snellen's Types (ii) Colour Vision (f) | Vaccinated or re-vaccinated for Small Pox (Date) (g) | Lungs, Heart, etc. (h) | Abdomen, Hernia, etc. (i) | Limbs and Joints (k) | Skin (l) | Ears and Hearing (m) | Testes, Varicocele, etc. (n) | Mouth, Teeth (No. deficient and No. defective, if any), Nose, Tonsils, etc. (o) | Anus, Hæmorrhoids, etc. (p) |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| | lbs. | ft. ins. | | inches (a) maximum | right eye | | | | | | | | | |
| 29 2/12 | 180 | 5·7¾ | Good. | 41 | 6/9 | Vac 1930 | N. | N. | N. | N. | N. | N. | deficient 6 defective 6 | N. |
| | | | | (b) minimum 39 | left eye 6/6 | | | | | | | | | |
| | | | | (c) mean 40 | colour vision N.B.H. | | | | | | | | | |

## CERTIFICATE TO BE SIGNED BY THE CANDIDATE

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

John W. Murphy
(*Signature of Candidate*)

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

This Candidate is the subject of .....

.....

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

.....
*Examining Medical Officer*

(*Rank*) .....

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

A 1271 OFFICIAL NUMBER | FILE NUMBER 123-M-200 | OFFICIAL NUMBER A 1271

NAME MURPHY (Surname) John William (Given Names) DATE OF BIRTH 11th December, 1911

PLACE OF BIRTH Collingwood, Simcoe Co., Ont. OCCUPATION Seaman

RELIGION Church of England. EDUCATION

RESIDENCE AT TIME OF ENLISTMENT: Street and No. Simcoe Street, Town Collingwood Province, etc Ont.

| Engagements | | | | Description | | | | | Previous Service | | | |
|---|---|---|---|---|---|---|---|---|---|---|---|---|
| Date (in figures) Day | Month | Year | Period | Height | Hair | Eyes | Complexion | Marks or Scars | Served in | Rank or Rating | Dates From | To |
| 14 | 2 | 40 | Hostilities Only | 5'9" | D.Brown | Brown | Fair | Tattoo rt. arm anchor " Lt. arm.sailing vessel. | | | | |

NEXT OF KIN RELATIONSHIP (in pencil) Mother NAME (in pencil) Mrs Alice Murphy

ADDRESS (in pencil): Street and No. Box 216 Town Collingwood Province, etc. Ont

| Medals, Clasps, Hurt Certificates, Prize Money | | | | Examinations, Certificates, etc. | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|---|---|
| Date (in figures) Day | Month | Year | Particulars | Date (in figures) Day | Month | Year | Particulars | Date (in figures) Day | Month | Year | Particulars |
| 26 | 2 | 44 | Prov. awarded C.V.S.M. ribbon & Clasp | 17 | 3 | 43 | Granted E.R.W/K Cert. | | | | |
| | | | | 21 | 5 | 43 | Granted Charge Cert. | | | | |
| 26 | 2 | 44 | Prov. awarded 1939-43 Star (249) | 28 | 10 | 43 | Qual. A/G (2nd Issue) | | | | |

| Badges, G.C. or G.S. | | | | |
|---|---|---|---|---|
| Date (in figures) Day | Month | Year | 1st, 2nd or 3rd G.C. or G.S. | Granted Deprived Restored |
| 14 | 2 | 43 | 1st GCB | Granted |

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

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

Second Class For Conduct

| From | To |
|---|---|
| | |

FILM NO. WSR 4491-8
DATE

W.S.G. APPLICATION 1090 RECEIVED

H.Q. 35—30M—4-42 (4260)
N.S. 815—7-35

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

A 1271 OFFICIAL NUMBER

NAME MURPHY (Surname) John William (Given Names) PIB

OFFICIAL NUMBER A [redacted]

| Ship or Establishment | Rating | From Day | From Month | From Year | Remarks | Character | Efficiency | Date Day | Date Month | Date Year | Non-Sub. Rating | Qualified Day | Qualified Month | Qualified Year | Re-Qualified Day | Re-Qualified Month | Re-Qualified Year |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| Stadacona | Engmn. | 14 | 2 | 40 | | | | | | | | | | | | | |
| HMS Oivera | " | 18 | 5 | 40 | | | | | | | | | | | | | |
| Stadacona | " | 9 | 6 | 40 | NOT SHOWN ON S.C. | | | | | | | | | | | | |
| HMS Voltaire | " | 13 | 6 | 40 | | | | | | | | | | | | | |
| Stadacona | " | 3 | 9 | 40 | | | | | | | | | | | | | |
| Arrowhead | " | 16 | 10 | 40 | | | | | | | | | | | | | |
| " | E.R.A. 4/C | 31 | 12 | 40 | | V.G. | Sat. | 31 | 12 | 40 | | | | | | | |
| Stadacona | " | 25 | 2 | 42 | (194141) | V.G. | Sat. | 31 | 12 | 41 | | | | | | | |
| Snowberry | " | 2 | 7 | 42 | (DRD) | V.G. | Sat. | 31 | 12 | 42 | | | | | | | |
| " | E.R.A. 3/c (ty) | 17 | 3 | 43 | Advanced(249A #29816) | V.G. | Sat. | 31 | 12 | 43 | | | | | | | |
| Avalon | " | 13 | 7 | 43 | (DRD No.633) | V.G. | Sat. | 7 | 5 | 44 | | | | | | | |
| Stadacona | " | 2 | 10 | 43 | (DRD #844) | | | | | | | | | | | | |
| Hochelaga 11 | " | 29 | 10 | 43 | (DRD H-3029) | | | | | | | | | | | | |
| ~~Chaleur-11~~ | " | ~~1~~ | ~~11~~ | ~~43~~ | ~~(WRD No. Q-64)~~ | | | | | | | | | | | | |
| HMCS "VALLEYFIELD" | " | 8 | 12 | 43 | (WRD Q 69) | | | | | | | | | | | | |
| " | E.R.A. 2/c | 31 | 12 | 43 | Advanced (249A # A 13914) | | | | | | | | | | | | |
| DISCHARGED | | 7 | 5 | 44 | "Missing" after sinking of HMCS "Valleyfield" (Casualty List) S.C. Presumed Dead 7-5-44 (Correction Sheet Pg. # 49) | | | | | | | | | | | | |

GENERAL REMARKS

To be paid difference in pay as from 18-6-43 to 13-7-43 while performing the duties of C.E.R.A.

Canadian Memorial Cross issued to Mother; Mrs. Alice Murphy, Box 216 Collingwood, Ont. 10.10.44

| DATE OF BIRTH DY. | MO. | YR. | PLACE OF BIRTH | CIVIL OCCU. MAIN | SUB | RELIGION | ED | PERM. RESIDENCE P. | CTY. | TOWN | PREV. SERV. | ENL. DIV. | RANK OR RATE ON ENLISTMENT A | BR | RANK |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| 11 | 12 | 11 | 11 | 540 | 0 | 30 | X | 1 | 4606 | 0 | | 19 | 0 | 15 | P2 |

| ENLIST. DATE DY. | MO. | YR. | ACT. SERV. DATE DY. | MO. | YR. | STR. CAT. | ACT. SERV. DATE DY. | MO. | YR. | SHIP OR ESTAB. | RANK OR RATE A | BR. | RANK |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| 14 | 02 | 40 | 14 | 02 | 40 | | | | | 122 | 00 | 35 | 94 |

| SP. DY. | | | B. CAT. | NON-SUB A | B | M DT. | | CODED | CHECKED |
|---|---|---|---|---|---|---|---|---|---|
| 17 | 03 | 43 | 09 | 00 | 00 | 20 | 40 05 43 | | |

DECEASED 7 May 1944

DEPARTMENT OF VETERANS AFFAIRS

# AWARDS

NAVY D.D.

WAR SERVICE RECORDS

| SURNAME (IN BLOCK LETTERS) | CHRISTIAN NAMES | REG. No. | RANK ON DISCHARGE | C.A.S.F. UNIT | FILE No. |
|---|---|---|---|---|---|
| MURPHY | John William | A-1271 | E.R.A. | | 2/c |

WAR SERVICE BADGE (CLASS) No.

DATE DESPATCHED:

ADDRESS:

| CAMPAIGN MEDALS | REGISTRATION NUMBER AN DATE DESPATCHED |
|---|---|
| ~~1939-45 Star~~ | |
| Atlantic Star | 7842 |
| C.V.S.M. & Clasp | |
| WAR MEDAL | |
| | |
| | |
| | |

(THE REVERSE TO BE USED FOR ESTATE PURPOSES)

DVA 806

HMCS "VALLEYFIELD" Mar./45 R.C.N.R.

MEDALS AND MEMORIALS—DECEASED PERSONNEL

REGISTRATION No. DATE OF DESPATCH

(1) MEDALS

PERSON ENTITLED TO: Mrs. Alice Murphy - Mother

ADDRESS: 248 Simcoe Street
Box 216,
Collingwood, Ont.

(2) MEMORIAL CROSS

WIDOW

ADDRESS:

(3) MEMORIAL CROSS

MOTHER: Mrs. A. Murphy

ADDRESS: Box 216
COLLINGWOOD, Ontario

MEMORIAL BAR

(1) DATE DESP.

REGN. NO 2204

(2)

(3) 10 October 1944

R. C. N. R.

X

DURATION OF HOSTILITIES

The corner of this Certificate is to be cut off whenever it is considered that the man's antecedents and character are such as to render his re-entry at any future time undesirable. Whenever the corner is cut off the fact is to be noted in the Ledger.

# ~~True Copy of the~~ CERTIFICATE of the Service of

John William M U R P H Y

## in the Naval Service of Canada

PORT DIVISION: HALIFAX. OFFICIAL NUMBER: A 1271

Date of birth: 11th December, 1911.

Where born: Town: Collingwood. County and province: Ontario, Canada.

Usual place of residence: Simcoe St., Collingwood, Ontario

Trade brought up to: Seaman

Religious denomination: Church of England.

Next of kin: (Mother) Mrs. Alice Murphy, same address

Can swim: 4/4/40 P.P.I. (Good) J.P. Edwards Lt.

Man's signature on discharge to pension:

| CONTINUOUS SERVICE ENGAGEMENTS | | | MEDALS, CLASPS, Etc. | |
|---|---|---|---|---|
| Date of actual volunteering | Commencement of time | Period volunteered for | Date Received | Nature of Decoration |
| 14th February, | 1940. | Duration of Hostilities | 26 Feb 44 | Canadian Volunteer Service Medal & Clasp. Prov. award |
| | | | 26 Feb '44 | 1939-45 Star. Prov. award. |

| DESCRIPTION OF PERSON | STATURE Feet | STATURE In. | COLOUR OF Complexion | COLOUR OF Hair | COLOUR OF Eyes | MARKS, WOUNDS AND SCARS |
|---|---|---|---|---|---|---|
| On entry as a boy | | | | | | |
| On advancement to man's rating, or on entry under 28 years | | | | | | |
| On re-entry for C. S. or for Non-C.S. after attaining 28 years | 5 | 9 | Fair | Dark Brown | Brown | Tattoo--right arm--ancho Tattoo--left arm-- Sailing Vessel. |
| Further description if necessary | | | | | | |

C.N.S. 1243
1M—10-39 (2328)
N.S. 815-9-1243

Name.....

| SHIP'S NAME | LIST AND No. | RATING | FROM | TO | CAUSE OF DISCHARGE |
|---|---|---|---|---|---|
| "Stadacona" | — - | Eng. (T) | 14 Feb '40 | 15 Oct '40 | |
| Stadacona (Arrowhead) | - - | — " — | 16 Oct '40 | 21 Nov 40 | |
| Arrowhead | | — " — | 22 Nov 40 | 30 Dec 40 | |
| — " — | — - | E.R.A. 4/c | 31 Dec 40 | 15 Mch '42 | |
| Sanbro (Arrowhead) | | — " — | 16 Mch '42 | 24 Feb '42 | |
| Stadacona | | — " — | 25 Feb '42 | 1 July 42 | |
| Stad (Strawberry) | | — " — | 2 July 42 | 16 Mch 43 | |
| — " — | | E.R.A. 3/c (TY) | 17 Mch 43 | 22 June '43 | |
| Avalon (— " —) | | — " — | 23 June '43 | 12 July '43 | |
| Avalon | | — " — | 13 July '43 | 2 Oct 43 | |
| Stadacona | | — " — | 3 Oct 43 | 28 Oct '43 | |
| Hochelaga " | | — " — | 29 Oct 43 | 7 Dec 43 | |
| Stadacona (Valleyfield) | | — " — | 8 Dec 43 | 30 Dec 43 29 Feb '44 | |
| Avalon (— " —) | | E.R.A. 3/c (TY) — " — | 31 Dec 43 1 Mch '44 | 7 May 44 | D.D. |

| DATE | Wounds received in Action and Hurt Certificate; also any Meritorious Service, Special Recommendations, Prize or other Grants | CAPTAIN'S SIGNATURE |
|---|---|---|
| | | |

.....Service.

| SHIP'S NAME | LIST AND No. | | RATING | FROM | TO | CAUSE OF DISCHARGE |
|---|---|---|---|---|---|---|
| | | | | | | |

**Examinations and Notations other than those entered on Gunnery and Torpedo History Sheet.**

| DATE | PARTICULARS | CAPTAIN'S SIGNATURE | DATE | PARTICULARS | CAPTAIN'S SIGNATURE |
|---|---|---|---|---|---|
| | NS-123-M-200 of 9 Jan '41, | | | DEC 1940 Issued Ident. Card No. 19550 | |
| 31 Dec '40 | Trans. to E.R.A. 4/c | [illegible] | | | |
| 17 Mch '43 | "E.R. Watch Certificate" | L. Davis | | | |
| 21 May '43 | Charge Certificate A-10276 | L. Davis | | | |
| 28 Oct '43 | Qual A/C (2nd Issue) | L. Davis | | | |
| | | | | | |

Name John William M U R P H Y

Conduct.

| SECOND CLASS FOR CONDUCT INCLUSIVE DATES | | CHARACTER, EFFICIENCY IN RATING, RECOMMENDATIONS FOR MEDAL AND GRATUITY (R.M.G.) ON 31st DECEMBER, EACH YEAR AND ON DISCHARGE FROM THE SERVICE | | | | |
|---|---|---|---|---|---|---|
| From | To | Character | Efficiency in Rating, noting Substantive Rating | R.M.G. | Date | Captain's Signature |
| | | V.G. | Sat. (E.R.A.4) | | 31 Dec '40 | J Mdurda |
| | | V.G | Sat (E.R.A.4) | | 31 Dec '41 | [illegible] |
| | | V.G. | Sat (ERA 4/c) | | 31 Dec '42 | [illegible] |
| | | V.G | SAT (ERA 3/c) | | 31 Dec '43 | [illegible] |
| | | V.G. | Sat (E.R.A. 3/c) | | 7 May 44 | [illegible] |

GOOD CONDUCT BADGES

| Date | 1st, 2nd, 3rd | Granted, Deprived, Restored |
|---|---|---|
| 14 Feb '43 | 1st | Granted |

| | Date | P.D.C., C.P., or W.T. | Days | Date | P.D.C., C.P., or W.T. | Days | Date | P.D.C., C.P., or W.T. | Days | Date | P.D.C., C.P., or W.T. | Days |
|---|---|---|---|---|---|---|---|---|---|---|---|---|
| Time Forfeited | | | | | | | | | | | | |

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

NAME IN FULL MURPHY John William RANK/RATING E.R.A. 2/C OFF.NO. A.1271 ADDRESS

| SHIP | SERVICE FROM | SERVICE TO | SERVICE DAYS | AREA | QUALIFYING PERIODS IN DAYS FROM | TO | 1939-45 | ATLANTIC | DEFENCE | CLASP C.V.S.M. | 1915 MEDAL | STARS MEDALS | ✓ 1 2 | ELIGIBLE FOR AWARDS OF |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| | 14-2-40 | | | | | | | | | | | 1939-45 | 1 | Star |
| Arrowhead | 16-10-40 | 24-2-42 | 497 | Atl | | | | | | | | ATLANTIC | 1 | Star |
| Snowberry | 2-7-42 | 12-7-43 | 376 | Atl | | | | | | | | FRANCE G. | | |
| Valleyfield | 8-12-43 | 7-5-44 | 152 | Atl | | | | | | | | AFRICA | | |
| | | | | | | | | | | | | PACIFIC | | |
| | | | | | | | | | | | | BURMA | | |
| Dis. Dead (Valleyfield) | | | | | | | | | | | | ITALY | | |
| & Late | | 7-5-44 | | | | | | | | | | DEFENCE | | |
| | | | | | | | | | | | | C.V.S.M. | 2 | & Clasp |
| | | | | | | | | | | | | " CLASP | | |
| | | | | | | | | | | | | WAR 1945 | 1 | Medal |
| | | | | | | | | | | | | WAR 1915 | | |

VERIFIED BY C. McWright

VERIFIED BY C. McWright

VERIFIED BY

DIR. OF PERSONNEL RECORDS.

Collingwood. Novembe 19/1945-

file H.Q. N.S. A-1271 F.D. 514.



Dear Mr. Madden.

My Son Fred Address is
Fred. Murphy.
1537 Bay. Street-
Victoria. B.C.
Canada.

Murphy, J. W.

this is his address unless they have changed it if so I do not know.

Yours. Sincerly
Mrs. Alice Murphy.

Estates Form "P. 4"

# DISTRIBUTION OF SERVICE ESTATES

NAVY HG

Name: MURPHY (Surname) John W. (Christian Names) No.: A-1271

E.R.A. 2/C (Rank) R.C.N.V.R.O/S (Unit) 7-5-44 (Date of Death)

AMOUNT

Date: 8-8-45

L.P.C. $ 83.14
Other Credits 454.97
Total 538.11
Prev. Dist. 501.81
This Dist. 36.30

| SHARE | RELATIONSHIP | NAME AND ADDRESS | AMOUNT |
|---|---|---|---|
| 1/3 | Mother | Mrs. Alice Murphy, P.O. Box 216, COLLINGWOOD, Ont. | $12.10 |
| 1/3 | Brother | A.4889, A.B. Murphy Fred, H.M.C.S. B.D. V.8 C/O. F.M.O. Esquimalt, B.C. | $12.10 |
| 1/3 | Sister | Mrs. Mae Morrison, R.R. #2, SUNDRIDGE, Ont. (as next of kin entitled) | $12.10 |

Has notified of change. "Sundridge" 6/9/45 MM

PA. TO TREAS. 25-8-45 AW

| AUTHORITY | | | | | |
|---|---|---|---|---|---|
| H.Q. F.E. No. | VOTE | PRI | H.Q. SUB. | OBJ. | AMOUNT |
| 9999 | 831 | 00 | 50 | 000 | 436.30 |

CLASSIFIED BY: D

EXAMINED BY: For Chief Treasury Officer

DISTRIBUTION APPROVED AND AUTHORIZED

(L. M. FIRTH) Colonel
Director of Estates

AUDITED FOR PAYMENT

For Chief Treasury Officer

75M—2-45 (6771)
H.Q. 1772-80-2

TL

Estates Form "P. 4"

# DISTRIBUTION OF SERVICE ESTATES

## NAVY

Name: MURPHY, (Surname) John W. (Christian Names) No.: A.1271

Rank: E.R.A. 2/c. Unit: R.C.N.V.R. O/S Date of Death: 7-5-44

AMOUNT

L.P.C. $ 46.84

Date: 13-3-45

Other Credits 454.97

Total 501.81

| SHARE | RELATIONSHIP | NAME AND ADDRESS | AMOUNT |
|---|---|---|---|
| 1/3 | Mother | Mrs. Alice Murphy,<br>P.O.B. Box 216<br>COLLINGWOOD, Ont., | 167.27 |
| 1/3 | Brother | A.4889,<br>A.B. Murphy, Fred,<br>H.M.C.S. B.D. V.-8,<br>c/o F.M.O. EXQUIMALT, B. C. | 167.27 |
| 1/3 | Sister | Mrs. Mae Morrison,<br>R.R. # 2,<br>SUNDRIDGE, Ontario. | 167.27 |
| | | (As next of kin entitled) | |
| | | TO BE FORWARDED BY REG. MAIL DIRECT. | |
| | | P4. TO TREAS. 9-4-45 | |

AUTHORITY

| H.Q. F.E. No. | VOTE | PRI | H.Q. SUB. | OBJ. | AMOUNT |
|---|---|---|---|---|---|
| 9999 | 831 | 00 | 50 | 000 | $501.81 |

CLASSIFIED BY
Original Signed by
K. L. McCUAIG

EXAMINED BY

For Chief Treasury Officer

DISTRIBUTION APPROVED AND AUTHORIZED

Original signed by

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

AUDITED FOR PAYMENT

For Chief Treasury Officer

50M—8-44 (5420)
H.Q. 1772-80-2

Sundridge Ontario.
Nov. 21/44.

The Bank of Montreal.
Collingwood, Ont.

Dear Sir:

I wish to inform you that I am signing off my share of the money, left by the late John W. Murphy, to Mrs. Alice Murphy.

Yours truly.
Mrs. Allan Morrison
(Mae Murphy).

Victoria B.C.
Dec 16 /44

C/o Manager of the Bank of Montreal
Collingwood Ont.

Dear Sir.
Owing to my brothers death I understand his will to be split between my mother sister and myself. but I wish my share to be given to my mother

Yours Sincerly
Fred Murphy
A.B. A4889

Original

Collingwood. Oct 31 1944

Department of National Defence.
Estates Branch
308 Sparks St.
Ottawa Ont.



Dear Sir —
I have been told by a boy in the Navy that they have to make out a little slip and its supposed to go to Ottawa that must of been what he ment when he said he wanted to keep every thing in order. he told a great friend of ours that mother would be all right as he had left every thing to me. I am a widow and he was a very little boy when his father was lost bringing a hawler down on Lake superior I am not very strong and this last trouble seems almost to much for me.
my ~~Son~~ John W. Murphy A 1271
was lost on the ~~Valley Field~~ Valleyfield

The Insurance Company wants
me to send them the message I
got saying my Son was Lost I sent
it out to my other son Fred at Victoria
B. C. never think I would need it would
you be able to get me another
message to send them. I had a Letter
from them Saturday they dont want
me to have to make any more payments
I hope you dont think I am
Interfering but I would not like to
have that slip turn up in the
future. Yours Truly
Mrs. Alice Murphy
Box 216
Collingwood
Ont.

Six copies to be rendered to Naval Service Headquarters

REPORT OF THE DEATH OF AN OFFICER, MAN OR BOY

H.M.C.S. VALLEYFIELD at SEA

Name John William MURPHY
(Christian names in full)

Rank or Rating E.R.A. 2nd Class Official No. A-1271 RCNR.
(If unknown, date of first entry)

Place of Birth Collingwood, Ontario Date of Birth 11th Dec. 1911

Occupation in Civil Life SEAMAN Religion C. of E. 30

Number of years in the Navy (Long Service R.C.N., or mobilized service in case of R.C.N. (Temporary) or Reserve ratings) 4 yrs 3 mos

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. Alice MURPHY Relationship Mother

Address 51 Coe Street, Collingwood, Ontario
B of 216

Date on which the above was informed by Ship Informed by N.S.H.Q.

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 Nationality

Place of Burial (If known) Date of Burial (If known)

Location, Number, etc., of grave (If known)

Undertaker employed (If any)

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

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

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 Regulations.

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

C.N.S. 1121

Collingwood Oct-9
1944



Dear Sir —
I am very sorry I for got to fill in my Son and Daughter ages in the form for my Son John W. Murphy E.R.A. (Deceased
No. A 1271, R.C.N.R.
My Daughter 30 next Friday
My Son 27 next Friday

The Manager of the Bank of Montreal would like you to send a letter so it can be kept on file then they will transfer the Credit Balance to my account.

My Son John told me he bought a war bond in St. Johns. I would like to claim it when I get his Bank account changed over to me if you would please see to it.

Yours Faithfully
Mrs. Alice Murphy.

[illegible] OUT FALSE

DOCKET AND FORWARD WITH

ATTACHED LETTER TO ADMIN-

ISTRATOR OF ESTATES.

N.C.R.

1138413

CANADA

# Department of National Defence

## Naval Service

OTTAWA, Ont., 30 August, 1944.

IN REPLY PLEASE QUOTE

N.S. A-1271 PERS. (N.)

Sir:

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



| NAME, RANK/RATING, Official No., UNIT | PARTICULARS RE DEATH | NEXT OF KIN |
|---|---|---|
| MURPHY, John William Engineroom Artificer Second Class, Official Number A-1271, R.C.N.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. | Mother: Mrs. Alice Murphy, Box 216, Collingwood, Ontario. |

ALLOTMENTS IN FORCE

| In favor of | | Amount | Initials |
|---|---|---|---|
| Mrs. Alice Murphy, Collingwood, Ont. | Nil | Nil | $25.00 (Allot. stopped 31/5/44). |
| Bond Clothes Shop, Halifax, N.S. | Nil | Nil | $5.00 (Allot. stopped 31/5/44). |
| Bank of Montreal, Collingwood, Ont. A/c#10306 | Nil | Nil | $50.00 (Allot. stopped 31/5/44). |
| Rec.Gen. for 5th Victory Loan | Nil | Nil | $16.80 (Allot. stopped 30/4/44). |

Will: No Will.

Yours truly,

H.B. Money

for SECRETARY, NAVAL BOARD.

30/6/44

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

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

STATEMENT OF WAR SERVICE GRATUITY - NAVY

Deceased Member's Name John William (Christian Names) MURPHY. (Surname)

Payee Mrs. Alice MURPHY.

Address Box 216, Collingwood, Ont.

Register No. 1090
File No. A1271.
Date 14 June 45
Service No. A1271
Final Rank or Rating E.R.A. II
Date of Discharge 7 May '44

Date of termination of overseas service 7 May 44

| | $ ¢ |
|---|---|
| A. TOTAL QUALIFYING SERVICE<br>No. of days 1545/30 equal to 51 complete periods at $7.50 | 382.50 |
| B. QUALIFYING OVERSEAS SERVICE<br>No. of days 1025 less 15 ineligible days equal to 1010 days @ 25¢ per day | 252.50 |
| C. SUPPLEMENT FOR OVERSEAS SERVICE<br>DAILY RATES AT DISCHARGE<br>Pay $ 3.25<br>Subsistence or Lodging and Provision Allowance $ 1.45<br>Additional Pay 1. B $ .05<br>1 Cert. $ .25<br>H.L.M $ — ~~.15~~ (W.P.G.)<br>Dependents' Allowance 1/30 of $ Total 5.15 x 7 = $ ~~35.71~~ 36.05<br>No. of days 1010/183 x $ ~~35.71~~ 36.05 | 198.96 |
| D. WAR SERVICE GRATUITY | ~~833.96~~ 833.96 (W.P.G.) |
| E. DEDUCTIONS OVERPAYMENT OF PAY AND ALLOWANCES $<br>DEPENDENTS' ALLOWANCE AND ASSIGNED PAY $ nil<br>OTHER DEDUCTIONS $ | |
| F. TOTAL AMOUNT PAYABLE | 833.96 |

G. YOUR PORTION OF GRATUITY IS

~~Dependents' Allowance in issue to you $_____ of $~~ = $833.96
~~Total Dependents' Allowance in issue $~~

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

| Prepared by | Checked by | Treasury Checked by | Treasury Date |
|---|---|---|---|
| | | | |

Service Representative

D.N.P.A. CHECK

1 DNP 6
2 DNP 7
3 DNP 8
4 Typed. 9
5 10

1090

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

Name of Deceased Member John Wm. MURPHY Rank or Rating ERA II O.No. 1271

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

D.A. — (mother) Mrs. Alice Murphy

A.P. 25.00

D.A. —

A.P. —

2. Pension awarded or being awarded to: No record of pension

3. War Service Gratuity Application(s) received from: Mrs. Alice Murphy (mother) Box 216, Collingwood, Ont.

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

( ) To be paid to: In the proportion of: /

- and -

to: In the proportion of: /

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

Group "B" (ii)

~~Group "C"~~ of the above mentioned Directive.

Date 20/2/45

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

B.J. 8/3/45 for D.N.P.A.(G) EPP

(1090)

TO: [redacted].P.A.

FILE No. N.S. A 1271.

"WAR SERVICE GRATUITY"

COMPUTATION OF SERVICE

| SURNAME | CHRISTIAN NAMES IN FULL | OFFICIAL NUMBER | RANK OR RATING ON DISCHARGE |
|---|---|---|---|
| MURPHY | JOHN WILLIAM | A 1271. | ERA II |

CAUSE OF DISCHARGE: Discharged dead.

Applicant - Mother, no indication that pension has been granted. Was in receipt of A.P. - $25.00 at time of rating's death.

1460
16 Feb.
31 Mch.
30 Apl
7 May
1545

TOTAL SERVICE

Date of Active Service 14 Feb. 40. ✓

Date of Discharge 7 May 44. ✓

Total No. of Days 1545 ✓

# Less non qualifying service NIL ✓

Total Days 1545 ✓

OVERSEAS SERVICE

% Total No. of Days 1025 ✓

# Less non qualifying service NIL ✓

Total Days 1025 ✓

Record of Service in other Forces (per Naval Records)

Branch of Service NIL ✓

Date of Active Service

Date of Discharge

# & % Overleaf

Computed By
Checked By

DATE: NOV 14 1944

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

Original on file.

## NON QUALIFYING SERVICE

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

(%)
OVERSEAS SERVICE:

| Where Serving | From | To. | No. of Days |
|---|---|---|---|
| Arrowhead | 16 Oct 40 | 24 Feb 42 | 497 |
| Strawberry. | 2 July 42 | 12 July 43 | 376 |
| Valleyfield | 8 dec 43. | 7 May 44 | 152 |
| | | | 1025 |

Arrowhead
365
16 Oct.
30 Nov.
30 Dec.
31 Jan.
24 Feb
497

Strawberry
365
11
376

Valleyfield
24 Dec.
31 Jan
29 Feb.
31 March.
30 Apr.
7 May
152

STATEMENT OF WAR SERVICE GRATUITY - NAVY

Name JOHN WILLIAM (Christian Names) MURPHY (Surname)

Register No. 1090
File No. A1271
Date 16 NOV '44
Service No. A1271
Final Rank or Rating ERA II
Date of Discharge 7 MAY '44

Address MRS ALICE MURPHY
BOX 216
COLLINGWOOD ONT.

Date of termination of overseas service 7 MAY '44

| | $ ¢ |
|---|---|
| A. TOTAL QUALIFYING SERVICE<br>No. of days 1545/30 equal to 51 complete periods at $7.50 | 382.50 |
| B. QUALIFYING OVERSEAS SERVICE<br>No. of days 1025 less 15 ineligible days, equal to 1010 days @ 25¢ per day | 252.50 |
| C. SUPPLEMENT FOR OVERSEAS SERVICE — SUB TOTAL | 635.00 |

DAILY RATES AT DISCHARGE

| | | | |
|---|---|---|---|
| Pay | | $ 3.25 | |
| Subsistence or Lodging and Provision Allowance | | $ 1.45 | |
| Additional Pay | 1 B. | $ .05 | |
| | 1 Cert | $ .25 | |
| Dependents' Allowance 1/30 of $ | | $ — | |
| | Total | $ 5.00 | x 7 = $ 35.00 |

No. of days 1010/183 x $ 35.00 — 193.17

~~Not~~ ~~635.00~~ 828.17

D. WAR SERVICE GRATUITY

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

F. AMOUNT PAYABLE
(This amount is payable in monthly instalments of $ each)

G. MONTHLY INSTALMENT NOT TO EXCEED Daily rate of pay and allowances $ 5.00 x 30 $ 150.00

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

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

D.N.P.A. CHECK

1 G. 6
2 Gosa 7
3 8
4 J.E.T. 9
5 10

Laughlin 30/11/44

Estate forms prepared

C.T.O.
31-10-47

Collingwood Oct 31/1944

2016123

#825.

Dear Sir
Would you please send me a application forms for war service Gratuity - My Son John W. Murphy A 1271 was Lost on the Valleyfield

Yours Truly
Mrs Alice Murphy
Box 216.
Collingwood
Ont.

NAVAL PERSONNEL RECORDS
NOV 6 1944
1090
WAR SERVICE GRATUITY SECTION

Collingwood Feb 12 1945.

Mr. H. B. Money.
Secretary, - Naval Board.
(NPR-8-3)

028997 53

N.S. A 1271. pers. (3)

Dear. Sir.

on November 7 1944. receipt of my application for war Service Gratuity as I have not heard from you in January. as my eldest son John that was Lost on the Valley Field always gave every thing he earned home from the time he was 16 untill the youngest Boy that is in the Navy now. was able to work then he gave every thing he could and Jack always gave me my $25.00 a month which you know always came from the Government. I never new how he had it fixed I have been a widow for 27 years. and never got any mother allowance I could not as I had some insurance from my Husband. who was Lost on the Inkerham on Lake Sepior one of the three hawelers they where taking down. he was a sioler on her. I had three Babies at the time and. no mother ever had two Boys. like my two my Health has been bad for 5 years. I am just out of the Hospital now. you know what my youngest son gives me is more than he can afford. and him married. I am only telling you this as if their any thing in this for me it will be a big help. as I dont think I will ever be able to go into hard work again. My Son rating John. William Murphy., Engineroom Artificer Second Class Offical Number A.1271 Royal ~~Navy~~ Canadian Navy. Reserve

hoping to hear from you in the near future

Yours Sincerly

Mrs. Alice Murphy.

Box 216. 248. Simcoe st

Collingwood Ont.

HS

49

N.S.A-1271,F.D.243, PERS.(N)

30 November, 1944.

THIS IS TO CERTIFY that according to official information John William Murphy, Engine Room Artificer Second Class, Official Number A-1271, Royal Canadian Naval Reserve, is missing, presumed dead to date the 7th of May, 1944. He was serving in H.M.C.S. "VALLEYFIELD" which was torpedoed and sunk by enemy action whilst on Convoy duty in the North Atlantic.

SECRETARY, NAVAL BOARD.

A-1271

File No. N. S. A1271 PERS. N.

165055

DEPARTMENT OF NATIONAL DEFENCE
- Naval Service -

N.C.R.

P.A.

43

WAR MEMORIAL CROSS

Issued to:-

Wife:-

Mother:-

Mrs. Alice Murphy,
Box 216,
COLLINGWOOD, Ont.

Date forwarded:- OCT 10 1944

Registered Mail No:- 2025

P.A.'S CHECKED IN

C.R. BY

P.M.

N.P.R./5-2.

FORM "B"

FILE: N.S. A-1271 PERS. (N)

146304

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

AUG 30 1944
(Date)

Sir:

The following casualty has been reported -

| NAME | RANK or RATING | NAVAL NO. |
|---|---|---|
| MURPHY, John William | Engine Room Artificer 2/c | A-1271 R.C.N.R. |

DATE OF ENLISTMENT - 14 Feb., 1940

DATE OF DISCHARGE - 7 May, 1944

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

34

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

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

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

NEXT OF KIN & RELATIONSHIP -

RELATIONSHIP - Mother NAME - Mrs. Alice Murphy,

ADDRESS - Box 216, COLLINGWOOD, Ont.

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

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

P.A. CHECKED IN
C.R. BY

C. R.
P. A.
NAVAL TREASURY
DATE 23/9/44
INITIAL

REMARKS:.....

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

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

| | D. A. | A. P. | TOTAL |
|---|---|---|---|
| Monthly rate: | NIL | $25.00 | $25.00 |

To Whom Paid: Mrs. Alice Murphy Address Collingwood, Ont.

Date of Enlistment: See other side.

Date of Discharge: See other side.

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

The final deduction of Assigned Pay for $25.00 has been made for the period from 1st to 31st of May 1944.

Remarks:

Computed by.....L.D.....

Checked by.....DMH.....

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

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

Every item of information should be carefully supplied. (See reverse side for instructions)

THIS FORM MUST BE FILED FORTHWITH WITH THE DIVISION REGISTRAR OF THE DIVISION IN WHICH THE DEATH OCCURRED BEFORE A BURIAL PERMIT CAN BE ISSUED

WRITE PLAINLY WITH UNFADING INK THIS IS A PERMANENT RECORD

FORM 6

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

# PROVINCE OF ONTARIO—CERTIFICATE OF REGISTRATION OF DEATH

**1. PLACE OF DEATH** County or District of At Sea Township of .....
If in City, Town or Village ..... (Name) Street ..... House No. .....
**(If death occurred in a hospital or institution, give the name instead of street and number)**

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

**3. PRINT FULL NAME OF DECEASED** MURPHY (Family name) John William (Given name or names in usual order)

**RESIDENCE** No. ..... Street Box 216 City, Town, Village or Township Collingwood Province Ontario.
**(Residence means usual place of abode. Post Office Address for residents in rural parts not sufficient)**

| 4. Sex | 5. Nationality (Citizenship) | 6. Racial Origin | 7. Single, Married, Widowed or Divorced (Write the word) |
|---|---|---|---|
| Male | Canadian | British | Single |

**8.** BIRTHPLACE Ontario. (Province or Country)

**9.** DATE OF BIRTH December (Month) 11 (Day) 1911 (Year)

**10.** AGE in

| Years | Months | Days | If less than one day old |
|---|---|---|---|
| 32 | 5 | | hrs. or min. |

OCCUPATION

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

**12.** Kind of industry or business, as **cotton-mill, lumbering, bank,** etc. .....

**13.** Date deceased last worked at this occupation ..... **14.** Total years spent in this occupation .....

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

FATHER

**16.** NAME .....

**17.** BIRTHPLACE ..... (Province or Country)

MOTHER

**18.** MAIDEN NAME .....

**19.** BIRTHPLACE ..... (Province or Country)

**20.** Person giving information H.B. Hall
sign here .....
Address Paymr. Cdr., R.C.N.R. Naval Service Headquarters, Ottawa, Ont.
Relationship to deceased Officer i/c, Naval Personnel Records.

**21.** Place of Burial, Cremation or Removal No burial
Date of burial or removal .....

**22.** Burial Permit was issued by .....
Address .....

**23.** UNDERTAKER ..... (Name and address)

## MEDICAL CERTIFICATE OF DEATH

**24.** DATE OF DEATH May (Month) 7th (Day) 1944 (Year)

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

### CAUSE OF DEATH

**I.**
**Immediate cause** Give disease, injury or complication which caused death, **not** the mode of dying, such as heart failure, asphyxia, asthenia, etc.
(a) Missing, presumed dead, when H.M.C.S. "VALLEYFIELD" was
due to torpedoed and sunk by enemy
**Morbid conditions, if any, giving rise to immediate cause** (stated in order proceeding backwards from immediate cause).
(b) action in the Atlantic.
due to
(c) .....

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

**PHYSICIAN** Underline the cause to which death should be charged statistically

**26.** If a communicable disease is mentioned on this certificate, give
(a) Date of appearance ..... 19.....
(b) Duration of disease ..... days

**27.** If a woman, was the death associated with pregnancy? .....

**28.** Was there a surgical operation? ..... Date of operation ..... 19.....
State findings ..... Was there an autopsy? .....

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

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

**30.** Division Registrar's Record No. .....

**31.** Filed ..... 19..... ..... (Division Registrar)

30th August, 1944.

Dear Mrs. Murphy:

Further to my letter of the 11th of May, 1944, in view of the length of time that has elapsed since your son, John William Murphy, Engineroom Artificer second class, Official Number A-1271, Royal Canadian Naval Reserve, was reported "missing" after the sinking of H.M.C.S. "VALLEYFIELD", and as no information has since been received of his having survived, the Canadian Naval Authorities have now presumed his death to have occurred on the 7th of May, 1944.

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

Yours sincerely,

Deputy SECRETARY, NAVAL BOARD.

Mrs. Alice Murphy,
Box 216,
Collingwood, Ont.

Noted on Estate Card.
5-9-44 G.P.

Royal Canadian
Message Condolence

30/8/44

Despatched by
Sec. N. B.

Date 1/9/44
Time 1800

30/9/44

N.P.R./5-1 ERM FORM A.

FILE: N.S. A1271 PERS.(N)

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

Sir: .....13th. May., 1944.....
(Date)

The following casualty has been reported -

| NAME | RANK or RATING | NAVAL NO. |
|---|---|---|
| MURPHY, John William | Engineroom Artificer 3/C. | A1271, R.C.N.R. |

DATE OF ENLISTMENT - 14th February, 1940

DATE OF DISCHARGE - Will be reported later

19

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

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

Reason for discharge and when and where any disability was incurred, or where death occurred. - "Missing" at sea when the ship in which he was serving was lost by enemy action. While this casualty 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 notified when official presumption of death with date 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 -

RELATIONSHIP- Mother NAME- Mrs. Alice Murphy

ADDRESS- Box 216, COLLINGWOOD, Ontario

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

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

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

H.B. Money
for
SECRETARY, NAVAL BOARD.

EMC

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

Br 12/6/44 NPR/5 C

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)

TFH/AE

**REGISTERED**
AIR-MAIL
N.S. A-1271 PERS.(N)

11th May, 1944.

16

Dear Mrs. Murphy:

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

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

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

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

Yours sincerely,

LETTER dispatched by NAVAL PERSONNEL
MAY 12 1944

SECRETARY, NAVAL BOARD

Mrs. Alice Murphy,
Box 216,
COLLINGWOOD, Ontario.

MEMORANDUM:

With reference to your

of the it is approved

to transfer

to

BY ORDER.

R. Rodgers

SECRETARY, NAVAL BOARD.

Ottawa, Ont., 13th May, 4

N.S. A1271 PERS.(N)

Dear Sir:

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

17

Name.....MURPHY.....John.William.....
(Surname) (Christian Names)

Rank/Rating ..Engineroom.Artificer.Third.Class.....

Official No,.....A1271,.R,C,N,R,.....

Nature of Casualty"Wiscigz".at.sea.from.ship.in.which.he. was serving.

Date of Casualty ..Will.be.reported.later.....

Address at time of Enlistment Simcoe.Street.....

.....COLLINGWOOD,.Ontario.....

Marital Status at time of Enlistment...Single.....

Occupation.....Seaman.....

Name & Address of Next of Kin .Mrs.,Alice.Murphy.....

.....Box.216,.COLLINGWOOD,.Ontario.....

Yours truly,

H.B.Money

for

SECRETARY, NAVAL BOARD.

E MC

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

2 white fuel C

TFH/MGF

REGISTERED

AIR - MAIL

NS: A-1271 PERS (N)

8 May, 1944.

15

Dear Mrs. Murphy:

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, John William Murphy, Engineroom Artificer Third Class, Official Number A1271, Royal Canadian Naval 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.

Yours sincerely,

LETTER dispatched
PERSONNEL NAVAL
MAY 8 1944

SECRETARY, NAVAL BOARD.

Mrs. Alice Murphy,
Box 216,
COLLINGWOOD, Ontario.

NO. 1350

**ORIGINAL**

H.Q. File No. 123-M-200

# DECLARATION OF ALLOTMENT

P023901

| List and Number in Ledger | ALLOTTOR | Rank or Rating | Official No. | Daily Rate of Pay |
|---|---|---|---|---|
| STADACONA 5A1/52 Sec IV | Surname MURPHY<br>Christian Names JOHN W | ENGMN RCNR | N:K: | $2.65 |

325022

**Section A** — ALLOTMENT NOW DECLARED

| FULL NAME OF ALLOTTEE | Relationship | ADDRESS | Rate per Month to be charged on ledger | Month to commence. Payable on last working day |
|---|---|---|---|---|
| Surname MURPHY<br>Christian Names Mrs Alice | Mother | Collingwood Ontario | $25.00<br>NEW | May<br>1940 |

**Section B** — DISPOSAL OF EXISTING ALLOTMENTS (See Note 1 below)

The following allotments are in force:—

| Rate | NAME OF ALLOTTEE | ADDRESS | These allotments are to be disposed of as indicated below. (See Note 2):— |
|---|---|---|---|
| | NIL | | |

Allotment Declarations — Initials — Date
Ent'd. on Index Card
Ent'd. on Allotment Ledgers

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

Allottor's Signature authorizing charges John W. Murphy
Engmn. Rank or Rating

ENTERED IN FAIR LEDGER

ENTERED IN ROUGH LEDGER

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

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

C. R. P. A. PAY. SUPT. BRANCH DATE ..... INITIAL .....

PAY LIEUTENANT RCNVR T
for Accountant Officer

H.M.C.S. STADACONA

Forwarded 7-5-40

S. 63

15M—10-39 (2286)
N.S. 815-9-63

**NOT MORE THAN ONE MONTHLY ALLOTMENT SHOULD BE DEALT WITH ON THIS SHEET**

**FOR USE AT HEADQUARTERS ONLY**

| | INITIALS | DATE |
|---|---|---|
| Declaration received at Headquarters | | |
| Declaration examined | | |
| Approved | | |
| Index card made | | |
| Allotment ledger sheet made | | |
| Allotment ledger sheet checked | | |
| Type plate made | | |

(ORIGINAL)

ORIGINAL

Form S.—1233g. (Revised—March, 1938)
5M—10-40 (7652) N.S.—815-9-1233g

# Engine Room Artificer's History Sheet

(ENTERED SERVICE AS ENGINEMAN 14/2/40.)

Name MURPHY. John William.

Port Division HALIFAX. N.S. Official Number A.1271.

Served apprenticeship - for - years at the trade of -

E.R.A. V. in H.M.S. "_____" for ____ years

Date rated Acting E.R.A. IV _____
(TRANSFERRED TO E.R.A. 4/Class. 19/1/41. & Rated.)

I. Certified as capable of taking charge of a Watch in the Boiler Room, and, having proved an efficient workman, is recommended for confirmation.

Date 1st August 1941 Engineer Officer [signature] Captain [signature]
Lieut-Commander(E).R.N. Lieut-Commander R.C.N.R

Confirmed E.R.A. IV. 18-1-41.

II. Certified as capable of taking charge of a Watch in the Engine Room, and able to calculate readily the H.P. developed (from Torsiometer/Indicator), and recommended in all respects for the rating of Chief Petty Officer.

Date _____ Engineer Officer _____ Captain _____

Rated E.R.A. III. _____

Rated E.R.A. II. _____

Rated E.R.A. I. _____

III. Certified as being in all respects capable of taking charge of the Machinery of a Small Ship; is considered fit for the rating of C.E.R.A., and is recommended for this advancement.

Date _____ Engineer Officer _____ Captain _____

Rated Acting C.E.R.A. II. _____

Confirmed C.E.R.A. II. _____

Rated C.E.R.A. I. _____

IV. Certified as being in all respects capable of taking charge of the Machinery of a Small Ship; is considered fit in every respect for advancement to Warrant Rank, and is recommended for this advancement.

Date _____ Engineer Officer _____ Captain _____

NOTE.—Certificates I., II., III. and IV., when granted, are to be noted on Service Certificate. The Depot is to be informed as soon as each Certificate is granted.

S.—1233g.

# RECORD OF EMPLOYMENT

**To be completed annually, and always on discharge from a Ship or Establishment**

| SHIP | S.H.P. | From | To | No. of Months Watchkeeping | | Number of Months REFITTING AND MAINTENANCE | | | | | | | | | | | | | | | | Special Machinery | Initials of the Engineer Officer, if of Lieutenant's rank or above; otherwise Captain |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| | | | | | | Main Engines | | | | Dynamos | | | | | | | Boats | | | Welding | | | |
| | | | | Engine Room | Boiler Room | Turbines | Reciprocs. | I.C. | Boilers | Turbines | Reciprocs. | I.C. | Cooling Machinery | Distilling Plant | Air Compressors | Hydraulic Machinery | Steam | Motor | Electrical Work | Oxy Acetylene | Electric | Workshop | | |
| STADACONA | | | 12/6 | | | BARRACKS | | | ROUTINE. | | | | | | | | | | | | | | HGD |
| VOLTAIRE | | 1940 12/6 | 2/9 | | | | | | | | | | | | | | | | | | | | |
| STADACONA | | 2/9 | 16/10 | | | BARRACKS | | | ROUTINE | | | | & EMPLOYED | | | C&M. | | DEPOT | | WORKSHOP. | | | HGD. |
| ARROWHEAD | | 1940-42 16/10 | 25/2 | | | | | | | | | | | | | | | | | | | | |
| STADACONA | | 25/2 | 2/7 | | | BARRACKS | | | ROUTINE | | | | & EMPLOYEYE | | | C&M. | | DEPOT | | WORKSHOP. | | | HGD. |
| SNOWBERRY | | 2/7/42 | 13.7.43 | | | 1/c ENGINE ROOM WATCH FROM 2. JULY '42 TO ~~2. JULY 43~~ 20 MAY 43. 1/c MACHINERY FROM ~~2. JULY~~ 20. MAY 43 TO 13 JULY 43. | | | | | | | | | | | | | | | | | O.J. |
| AVALON | | 13.7.43. | | | | | | | | | | | | | | | | | | | | | |
| STADACONA | | 4-10-43 | | | | BARRACK'S ROUTINE EMPLOYED DEPOT MACH. SHOP. | | | | | | | | | | | | | | | | | |
| HOCHELAGA | | 28-10-43 | | | | | | | | | | | | | | | | | | | | | |
| C.N. 347 | | 1-11-43 | | | | | | | | | | | | | | | | | | | | | |
| VALLEYFIELD | | 6-12-43 | | | | | | | | | | | | | | | | | | | | | |

## COURSES TAKEN AND EXAMINATIONS PASSED

(To be filled up when applicable.)

| Date | Particulars | Initials of Engineer Officer, if of Lieutenant's rank or above, otherwise Captain |
|---|---|---|
| 1-8-41 | GR B.R. wk Cert. | |
| 17-3-43 | GR. E.R. wk Cert (71% (AS 29921) | |
| 21-5-43 | GR. Charge Cert. (72% (AS 25943) | |

## VOCATIONAL TRAINING CERTIFICATE

*To be filled up on completion of a Vocational Training Course, other than a Correspondence Course*

**(Vocational Training is optional)**

Vocation_____

We certify that (name)*_____

_____(residence)_____

_____has satisfied us

that he possesses a†_____knowledge of the vocation mentioned, and we consider that‡____

_____

_____

_____

Examiners_____

Business and Business Address_____

_____

_____

Date of Examination_____

Signed_____President,

_____Vocational Training Committee.

## SPECIAL REMARKS§

TO BE FILLED ONLY ON FINAL DISCHARGE

His character during service was ||_____

His general efficiency in carrying out his duties was ||_____

His efficiency on discharge was assessed as ||

_____

Captain's signature_____

* Name in full. †Here insert qualification. ‡Special notation as applicable. §Include power of command, intelligence, initiative, energy and any qualification not otherwise recorded. May be used at any time during a man's service. ||See article 610, clauses 3 to 7, King's Regulations and Admiralty Instructions. To be filled in by the Captain of the ship from which the man is discharged to shore, or to Depot as a preliminary to discharge to shore.