

THOMAS, JAMES EDWARD

O72640

St John NB  
Division



N.V. 4  
10M-4-40 (4718)  
N.S. 815-11-4

## ATTESTATION FORM

FOR OFFICERS OF THE ROYAL CANADIAN NAVAL VOLUNTEER RESERVE

(A) DESCRIPTION OF APPLICANT

SURNAME..... Thomas	PERMANENT ADDRESS
CHRISTIAN NAME James Edward	9 Gooderich Street,
RELIGION Church of England	Saint John, N.B.

DATE OF BIRTH	PLACE OF BIRTH	NAME AND ADDRESS OF NEXT OF KIN
June 7th, 1922	Town Saint John County Saint John Province New Brunswick Country Canada	Mother- Katie W. Thomas 9 Gooderich Street, Saint John, N.B.

### PERSONAL DESCRIPTION

HEIGHT	CHEST MEASUREMENT	HAIR	EYES	COM- PLEXION	WOUNDS, SCARS, MARKS
Feet..... 5	Inflated..... 39	Light Brown	Brown	Fair	Birth mark on back centre above waist line.
Inches..... 9	Deflated..... 37				
	Mean..... 38				

DATE OF ENROLMENT	RANK IN WHICH ENROLLED	MARRIED, SINGLE, OR WIDOWER	TRADE OR CALLING AND IN WHOSE EMPLOY
25th June, 1941	Probationary Sub-Lieutenant	Single	Banker Royal Bank of Canada

(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 an Officer of the Royal Canadian Naval Volunteer Reserve Force, and that I accept and will 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 Canadian Army Reserve for the period shown, and attach my record of service.

\* Cross out Clause not applicable.

SERVED IN	RANK	FROM	TO
2nd Bn. St. John Fusiliers (MG) C.A. (RF)	Lance Corporal	16 July, 1940	28 February, 1941

- (c) I have never been rejected for any of His Majesty's Forces on account of unfitness.
- (4) That the particulars contained above are correct, and true according to the best of my knowledge and belief.

(OVER)

(5) On being enrolled as an Officer of the Royal Canadian Naval Volunteer Reserve, I undertake and bind myself:—

(a) To serve from the date thereof for as long as my services may be required, being subject to the provisions of the Naval Service Act, and of the regulations made in pursuance thereof for the governing of the Royal Canadian Naval Volunteer Reserve, and to the customs and usages of His Majesty's Canadian Naval Service.

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

(c) To provide myself with the necessary uniform as laid down in R.C.N.V.R. Regulations.

Dated this 25th day of June 1941

J. E. Thomas

*Signature of Applicant.*

The above declaration was made and signed in my presence this 25th

day of June 1941

Ralph D. Munro, Lieut; RCNVR (Temp)

*Signature of Enrolling Officer.*

(C)

#### OATH OF ALLEGIANCE

I James Edward Thomas 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 J. E. Thomas

Signature of Witness Ralph D. Munro

Date 25th June, 1941

Rank Lieut; RCNVR (Temp)

The Oath of Allegiance may be administered by any commissioned officer of the Naval Service.

NOTE.—This form when completed is to be forwarded to Naval Service Headquarters, Ottawa, together with Certificate of medical examination B-207, and record of any previous service.

The record of previous service will be returned after examination at Naval Service Headquarters.



CANADA

Can. B. 207

60M-4-40 (4636)  
N.S. 815-2-207

# Certificate of Medical Examination of Officers, Men and Boys

## NAVAL SERVICE OF CANADA

(R.C.N. OR RESERVE FORCES)

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

I, the undersigned, have examined James Edward Thomas

candidate for entry as Prob Sub-Lieutenant

and I believe him to be \* ~~unfit for His Majesty's Service for the reason stated below.~~ <sup>in all respects fit for His Majesty's Service.</sup> 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 (Years / Months)	(b) Weight without Clothes	(c) Height with Bare Feet	(d) General Development	(e) Chest Girth	(f) Vision by— (i) Snellen's Types (ii) Colour Vision	Vaccinated or re-vaccinated for Small Pox (Date)	(h) Lungs, Heart, etc.	(i) Abdomen, Hernia, etc.	(k) Limbs and Joints	(l) Skin	(m) Ears and Hearing	(n) Testes, Varicocele, etc.	(o) Teeth (No. defective, if any), Nose, Tonsils, etc.	(p) Anus, Hemorrhoids, etc.
19. 0.	158.0 lbs.	5. 9. ft. ins.	Good	inches (a) maximum 39 (b) minimum 37 (c) mean 38	right eye 6/6 left eye 6/6 colour vision N.	1928 1 mark upper left	Normal *X-Ray App.	Normal	Normal	Normal	Normal	Normal	Healthy 29 good teeth Normal	Normal

\*Insert either:—NT (not taken) App. (approved) Pos. (positive) or Doubt. (doubtful)

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

### CERTIFICATE TO BE SIGNED BY CANDIDATE

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

J. E. Thomas

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 Nil

\* <sup>which renders him medically unfit for service,</sup> ~~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 Saint John the 24th of June 1941

John R. Nugent

Examining Medical Officer

(Rank) Surgeon Civilian

# ATTESTATION

## NON-PERMANENT ACTIVE MILITIA OF CANADA

UNIT ST. JOHN FUSILIERS (INF) W. P. A. M. REGTL. No. 6431447

1. Surname? (Block letters) THOMAS

2. Christian names? JAMES EDWARD

3. Present address? 9 GOODERICH ST  
 Phone No. 3-7169

4. Date of Birth?\* JUNE 7, 1922 5. British subject? YES

6. Occupation? Gov. Employee 7. Religion? C. of E.

8. Next of Kin MOTHER 9. Relationship? MOTHER  
 Address .....

10. Previous Naval, Military or Air Force Service.....  
 (Give particulars, qualifications, etc.)  
none

RECEIVED  
28-7-40

### CERTIFICATE OF MEDICAL EXAMINATION

Height 5' 8" Weight 162 Chest max 39 min 37

Descriptive marks made right axilla

I have examined the above named man in accordance with instructions laid down in Instructions for the R.C.A.M.C. and C.D.C. 1937 Appendix V and find him Fit Category 1

Date July 15/40 Signature [Signature]

### DECLARATION TO BE MADE ON ATTESTATION

I, the undersigned J. E. Thomas do sincerely and solemnly declare that to the best of my knowledge and belief, the above answers (made by me) to the foregoing questions are true; that I am willing to be attested for the term of three years or until legally discharged, and do understand the nature and terms of this engagement, that I will safeguard all clothing, arms and equipment issued to me and will return same when required, and that I will report any change in address of myself, or my next of kin to my Commanding Officer.

### OATH TO BE TAKEN

I, J. E. Thomas do sincerely promise and swear (or solemnly declare) that I will be faithful and bear true allegiance to His Majesty.

Signature of Witness [Signature] Signature of Man James E. Thomas

Dated this 15th day of July 1940 at .....


### CERTIFICATE OF ATTESTING OFFICER

The recruit above-named was cautioned by me that if he made any false answers to any of the above questions he would be liable to be punished by law. The above questions were then read to the recruit in my presence. I have taken care that he understands each question and that his answer to each question has been duly entered and replied to, and the said recruit has made and signed the declaration and taken the oath.

Signature of Magistrate, Justice of Peace, or Attesting Officer  
[Signature]  
 Major

\*To be shown day, month, year—Example:—25-8-39.

## Statement of Services

Promotions, Reductions, Transfers, Casualties, Annual Training, Qualification Certificates, etc.	Effective Date	Authority for Entry	Signatures of Officers Certifying Correctness of entries
Accepted for Service with effect from.....			 Officer Commanding
SOS-(enlisted with RCNVR)	28/2/41	Part II No 10 a/10-3-41	2nd BN. ST. JOHN'S BATTALIONS (M.C.) Unit
Medals and Decorations			

NOTE.—These entries are to be made from time to time as they occur and certified by the Officer making the entry.

Attestations to be made out in duplicate, the original being forwarded to be filed in Regimental Orderly Room, the duplicate to be kept in the Battery, Squadron, Company, etc

D OF D 7-9-42

D.D.

DEPARTMENT OF VETERANS AFFAIRS

AWARDS (NAVY)

WAR SERVICE RECORDS

THOMAS James Edward		0-72640	Sub Lt.	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 AN DATE DESPATCHED
1939-45 Star,	
C.V.S.M. & Clasp	
War Medal.	

2181

(THE REVERSE TO BE USED FOR ESTATE PURPOSES)

RCNVR Jan. 46 "RACCOON"

MEDALS AND MEMORIALS—DECEASED PERSONNEL

REGISTRATION NO. DATE OF DESPATCH

(1) MEDALS  
PERSON  
ENTITLED TO Mrs. Katie W. Thomas - Mother  
  
ADDRESS: 9 Gooderich Street,  
St. John, N.B.

MEMORIAL BAR

DATE DESP  
(1)

REGN. NO. 532

(2) MEMORIAL CROSS  
WIDOW

ADDRESS:

(2)

(3) MEMORIAL CROSS  
MOTHER

Mrs. Katie W. Thomas

ADDRESS: 9 Goodrich St., Saint John, N.B.

(3)

9-11-42



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

V.R.

OFFICIAL NUMBER

NAME THOMAS  
(Surname)

James Edward  
(Given Names)

OFFICIAL NUMBER

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
Div. Str. St. John	Prob Sub-Lt T	25	6	41													
Duty Div. Hdqtrs.	Prob Sub-Lt T	18	8	41													
H.M.C.S. Stadacona	Prob Sub-Lt T	27	8	41													
N.O.I.C. St. John	Sub-Lieut. T	4	1	42													
Fort Ramsay (Raccoon)	Sub-Lieut. T	7	8	42	per Appt. 31-8-42.												
<del>DISCHARGED</del>	<del>Sub-Lieut. T</del>	<del>7</del>	<del>9</del>	<del>42</del>	<del>Lost in H.M.C.S. Raccoon</del>	<del>Per Casualty List</del>											

GENERAL REMARKS

Hosp. Naso-Pharyngitis 1-9-41 -  
5-9-41

War Memorial Cross sent 9-11-42. to  
Mother: Mrs. Katie W. Thomas,  
9 Gooderich Street,  
St. John, N.B.

DATE OF BIRTH			PLACE BIRTH			CIVIL OCCUPATION			RESIDENCE			RANK OR RATE		
DY	MO	YR	BIRTH	MAIN					TOWN	RD	DIV.	A	BR	RANK
07	6	22	15	680	0	30	X	5	11	01	9	02	2	01/12
ENLIST. DATE			ACT. SERV. DATE			STR.			SHIP OR RATE			RANK OR RATE		
DY	MO	YR	DY	MO	YR	CAT.						A	BR	RANK
25	06	41	18	08	41							4980	0	01/12
SENIORITY			STR.			NON-SUB			CODED			CHECKED		
DY	MO	YR	CAT.	A	B	ST.								
04	01	42	09			62	07	09	42					

OFFICIAL NUMBER \_\_\_\_\_ FILE NUMBER 103-T-81 0-72640 OFFICIAL NUMBER \_\_\_\_\_

NAME THOMAS James Edward DATE OF BIRTH 7 June, 1922  
(Surname) (Given Names)

PLACE OF BIRTH Saint John N.B. OCCUPATION Banker

RELIGION Church of England EDUCATION \_\_\_\_\_

RESIDENCE AT TIME OF ENLISTMENT: Street and No. 9 Gooderich St. Town Saint John Province, etc. N.B.

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
25	6	41	H.O.	5'9"	Light Brown	Brown	Fair	Birth mark on bk. centre above waist line	2 Bn St. John Fus.	L/Crp.	16-7-40	28-2-41

NEXT OF KIN RELATIONSHIP (in pencil) Mother NAME (in pencil) Mrs Patricia M. Thomas  
 ADDRESS (in pencil): Street and No. 9 Gooderich St. Town Saint John Province, etc. N.B.

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	
				29	11	41	Result of New Entry Off. Crse 71				

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					
Day	Month	Year	Prison	Det'n	Cells	C. Power	W. Trial	In diff. Char.

SECOND CLASS FOR CONDUCT  
 From \_\_\_\_\_ To \_\_\_\_\_

**FILM**  
 NO. WAA 4515-2  
**DATE**

**W.S.G.**  
 APPLICATION  
 RECEIVED  
 10410  
 5/6/45

SI COPIES

REPORT OF THE DEATH OF AN OFFICER, MAN OR BOY

49

H.M.C.S. ~~.....~~ at ~~.....~~

Name (in full) ~~.....~~ **THOMAS, James Edward** ~~.....~~

Rank or Rating ~~.....~~ **Sub-Lieutenant** ~~.....~~ Official No. ~~.....~~ **R.C.N.V.** ~~.....~~

Place of Birth ~~.....~~ **St. John, N.B.** ~~.....~~ Date ~~.....~~ **7th June, 1922** ~~.....~~

Civil Occupation ~~.....~~ **Banker** ~~.....~~ Religion ~~.....~~ **C of S.** ~~.....~~

No. years service in the Navy (Long Service R.C.N., or mobilized service in case of R.C.N. (Temp) or Reserve Ratings) ~~.....~~ **1 year 2 months** ~~.....~~

Date of Death ~~.....~~ **SEP 7 1942** ~~.....~~ Place of Death ~~.....~~ **At sea** ~~.....~~

Cause of Death ~~.....~~ **Presumed lost on board H.M.C.S. "Haccoon" at sea.** ~~.....~~

Nearest known relative or friend. Name ~~.....~~ **Katie W. Thomas** ~~.....~~ Relationship ~~.....~~ **mother** ~~.....~~  
Address ~~.....~~ **9 Gooderich St., St. John, N.B.** ~~.....~~

Date on which the above was informed by Ship ~~.....~~

Date on which death was reg'd with local Officials ~~.....~~

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 ~~.....~~ Date of Burial ~~.....~~

Location, Number, etc, of grave ~~.....~~

Undertaker employed ~~.....~~

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

*J. S. Maccauley*  
Commanding Officer,  
17 Sept. 1942

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.

Army Reserve  
**CANADIAN FIELD FORCE**

M.F.M. 7  
400 M-8-39 (1704)  
H.Q. 1777-45-18

## DISCHARGE CERTIFICATE

This is to Certify that No. **G 431447** (Rank) **L/Cpl.**

Name (in full) **James Edward Thomas** enlisted in

the **2nd BN. ST. JOHN FUSILIERS (M G) C. A. (R F)**

**Army Reserve**

**CANADIAN FIELD FORCE** at **Saint John, N. B.** on the **16th**

day of **July** 19**40**

He served in **2nd BN. ST. JOHN FUSILIERS (M G) C. A. (R F)**

and is now discharged from the service by reason of **enlisting in the R.C.N. VVR.**

THE DESCRIPTION OF THIS SOLDIER on the DATE below is as follows:—

Age **19** Marks or Scars

Height **5' 8"**

Complexion

Eyes

Hair

*J. E. Thomas*  
Signature of Soldier

**2nd BN. ST. JOHN FUSILIERS (M G) C. A. (R F)**

*J. Martin*  
Issuing Officer

*Mr. Adyff*  
Rank

Date of Discharge

**28/2/41**

Date **June 26** 19**41**

N.B.—As no duplicate of this Certificate will be issued, any person finding same is requested to forward it in an unstamped envelope to the Record Office, Department of National Defence, Ottawa, Canada.

(P.T.O.)

ST John  
Div

Fill in & Return

8th Sea Lord.  
12640 P

OFFICERS' RECORDS

O. R. O. AUG 28 1941

Office

Date:

37

Surname: Thomas Christian Names: James Edward

Rank: Prob S/LT Rcvr (Temp)

Home Address: 9 Gooderich St Saint John, N.B.

Date of Birth: June 7/22 Place of Birth: Saint John, N.B.

Education: Matriculation: Senior High School  
Junior

University Degrees:

Mercantile Marine Certificates: No.

Precis Mercantile or Yachting Experience: Can sail reasonably well.

Precis of Business Experience: Business course and 1 year's banking experience

Sports: Football, Hockey, track, golf.

Other Hobbies or Interests: Good Music

Previous Naval or Military Training: 1 year in N.P.A.M.

Languages spoken fluently:

Languages understood:

Place of Birth of Father: Rumor Place of Birth of Mother: St John, N.B.  
Wales.

Fathers Occupation: Civil Engineer

Next of Kin: Mother

Surname Thomas Christian Names: Katie Woods.

Full Address: 9 Gooderich St Saint John, N.B.

Have you been rejected by any other of the Armed Forces? no.

If so give details:

Religion: Anglican Naval Identity Card No. 1479

Married or Single single Dependents: none

Height: 5' 10" Weight: 158

# QUESTIONNAIRE FOR CANDIDATES

FOR ENTRY IN THE  
ROYAL CANADIAN NAVAL VOLUNTEER RESERVE

M 84528

REPT.  
NATIONAL DEFENCE

DEC 13 1940  
N.S. 62-21-5  
CANADA

Name (in full) James Edward Thomas

Date and place of birth June 7, 1922, Saint John, N.B.  
(Birth certificate, declaration by parents or affidavit as to date of birth must be attached)

Permanent place of residence 9 Goodrich St. Saint John, N.B.

Nearest town to residence (if living in country).....

Are you a British subject? Yes

Are you single, married or a widower? Single

In what capacity do you wish to enrol? Commissioned Officer.  
(See standards of qualifications in attached pamphlet)

Present occupation or trade Student Business College.  
(Attach any testimonials or recommendations)

Do you belong to any Naval, Military, Reserve or Territorial Force? No.

Have you ever served with such forces? Give dates and details No.

Have you ever been discharged from any of H. M. Forces as medically unfit? No.

Have you ever offered to serve in any of H. M. Forces and been rejected? No.

What is your weight? 170 What is your height? 5 ft. 10 inches.

What is your chest measurement (not inflated)? 37 inches.

Are you free from all physical defects or malformation, and not subject to fits? Yes.

Are you willing to be vaccinated or re-vaccinated and inoculated as considered necessary by the appropriate authorities? Yes.

I hereby declare that the above answers are true in every respect.

James E. Thomas Signature

27th May, 1940. Date

9 Goodrich Street, St. John N.B. Address

H.H. Scovill  
(Witness to Signature)

This is to certify that I have personally seen the birth certificate of this applicant, or a sworn declaration as to his date of birth.

I certify his date of birth, according to legal documentary evidence, to be.....

Recommended as Prob/Sub/Lt. Signed.....  
when 20 years of age. [Signature] Commanding Officer

N.V. 3  
5M-9-39 (1815)  
N.S. 815-11-3

CDR. R.C.N.V.R. (TEMP)

R.A. 14-1

DEPARTMENT OF NATIONAL DEFENCE  
Saint John Division R.C.N.V.R.,

1st August 1940 M 49708

From: The Commanding Officer,  
Saint John Division.

To : The Naval Secretary,  
Ottawa, Ontario.

Submitted:

NATIONAL DEFENCE  
AUG 7 1940  
N.S. 6224 ST  
CANADA

Applications for Midshipman, R.C.N.V.R.

Reference Headquarters' 1046/29 and my 1215/1 names, full particulars and my opinions are submitted herewith, reference four volunteers who have been interviewed by me.

All of these gentlemen have been passed medically and are highly recommended by me for acceptance. They have been placed in order of desirability although there is extremely little difference in the comparative qualifications and officer qualities of each. Names of others not considered suitable have not been submitted. All have been highly recommended to me as a result of local investigation.

- (1) 1. Frank Johnston  
2. Date of Birth 4th March 1922, Age 18½  
3. High School Graduation (Junior Matrics.)  
4. Has had 3-4 years yachting experience.  
5. Had seven years Boy Scout Experience & N.P.A.M.  
6. Present Employment, Clerk - Steamship Co. Drills  
7. Sports - Keen and addept in athletics.  
8. Character - Excellent  
9. Personality - Above average.  
10. Smartness - above average  
11. Should make a reliable, efficient & energetic officer.
- (2) 1. James E. Thomas.  
2. Date of Birth, 7th June 1922 Age 18¼  
3. Education - Junior Matrics and completed business college course.  
4. Has had some yachting & boating experience.  
5. Several years boy scout & N.P.A.M. Drills.  
6. Present Employment - Clerk - St. John Dry Dock Co.  
7. Exceptionally keen & addept in Sports & Athletics.  
8. Character - Excellent  
9. Personality - Average  
10. Smartness - Average  
11. Should make a reliable, efficient & energetic officer.

1st August 1940.

"Page - 2 - "

3

- (3)
1. Daniel L. Hanington.
  2. Date of Birth - 10th July, 1921, Age 19
  3. Education - Senior Matriculation including Trigonometry.
  4. Some yachting Experience
  5. Three Years school cadets, at present attending N.P.A.M. drills.
  6. Not employed - just finished school.
  7. Takes part in sports & athletics.
  8. Character - Excellent.
  9. Personality - Above average.
  10. Smartness - Average.
  11. Should make a reliable, efficient & energetic officer.
- (4)
1. George W. Scovil.
  2. Date of Birth - 10th August 1921 Age 19
  3. Education - Junior Matrics.
  4. Some yachting & boating experience.
  5. School cadet work & N.P.A.M. Drills.
  6. Present employment - Clerk department store.
  7. Takes energetic part in sports.
  8. Character - Excellent
  9. Personality - Average
  10. Smartness - Average
  11. Should make a reliable, efficient and energetic officer.

Signed Paul B. Cross,  
Paul B. Cross,  
Commander, R.C N.V.R. (Temp)  
Commanding Officer.



SAINT JOHN HIGH SCHOOL

PRINCE WM. STREET, SAINT JOHN, N. B.  
CANADA

E. J. ALEXANDER, M. A.  
PRINCIPAL

May 30/40

To Whome it May Concern,-

Re - James Thomas

This is to certify that I have worked with James Thomas for the past few years. Our association has been both in the classroom and on the athletic field. His athletic record is as follows,

Hockey - Regular Member Senior Team - 2 years

Football - " " " " - 2 years

Track - Junior High Point Winner, City Schools.

Golf - First class - Shoots consistent 80.

Tennis - Plays good game.

Although I have had to check the boy occasionally he respects authority and is agreeable to work with. His rebounded pep made it possible for him to contribute considerably to our work at S. J. H. S. I do not hesitate to recommend

Jim Thomas to the person seeking a lad with plenty of punch.

Yours truly,

R. J. Hervey, A. B.  
Inst. Math. in Science  
Chairman Athletic Council.

AGENCY MANCHESTER LINERS, LIMITED

AGENTS FOR  
BERMUDA & WEST INDIES S. S. CO., LTD.  
BRITISH EMPIRE S. N. CO., LTD.  
CAIRN LINE OF STEAMSHIPS LTD.  
EMPIRE TRANSPORT CO., LTD.  
FURNESS HOULDER ARGENTINE LINES LTD.  
HOULDER LINE LTD.  
JOHNSTON WARREN LINES, LTD.  
MANCHESTER LINERS LTD.  
NORFOLK & NORTH AMERICAN S. S. CO., LTD.  
PRINCE LINE, LTD.  
RIO CAPE LINE, LTD.  
FRENCH LINE  
LLOYD SABAUDO

Furness, Withy & Company, Ltd.  
Steamship Owners and Agents

22 King Street,  
Saint John, N.B.  
CANADA

OFFICES AT  
LONDON, ENG.  
LIVERPOOL, ENG.  
CARDIFF  
NEWCASTLE-ON-TYNE  
LEITH  
GLASGOW  
MIDDLESBORO  
HALIFAX, N.S.  
MONTREAL, QUE.  
SAINT JOHN, N.B.  
VANCOUVER, B.C.  
ST. JOHN'S, Nfld.  
NEW YORK, N.Y.  
BOSTON, MASS.  
PHILADELPHIA, PA.  
BALTIMORE, MD.  
NEWPORT NEWS, VA.  
NORFOLK, VA.  
CHICAGO, ILL.  
SAN FRANCISCO, CAL.  
LOS ANGELES, CAL.  
BUENOS AIRES  
RIO DE JANEIRO  
SANTOS  
TRINIDAD  
HONG-KONG  
SHANGHAI  
PIRAEUS  
ALEXANDRIA

June 3rd., 1940.

The Commanding Officer,  
R.C.N.V.R.,  
City.

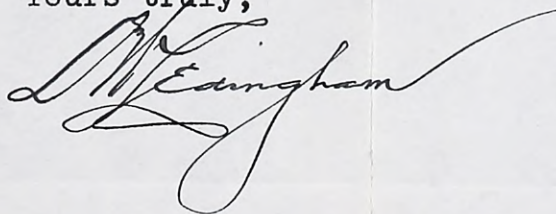
Dear Sir:-

James E. Thomas informs me that he is making application for commission in the Royal Canadian Navy.

This young man has been known to the writer during his entire life, and I have no hesitation in recommending him for a position requiring initiative, strength of character and good physique.

He has a splendid background, is a leader in sports and a good scholar, and, in my opinion, would make an excellent naval officer.

Yours truly,



DWL/J.



By command of the Honourable the Minister of National Defence  
for Naval Services of the Dominion of Canada

To Sub-Lieutenant James E. Thomas, R.C.N.V.R., (Temporary), --

103-T-81

24

You are hereby appointed

Sub-Lieutenant, R.C.N.V.R.,

225760

of His Majesty's Canadian Ship PORT RAMSAY additional for RACCOON,  
(vice Reed).

Your appointment is to take effect from 7th August, 1942.

*R. A. Pennington*

Secretary, Naval Board

*Sm*  
Department of National Defence  
Naval Service

Ottawa, 31st August, 1942.

H.Q. 36a  
10M-4-42 (4052)  
N.S. 815-7-36

*Captain, duty on staff  
No 1/2 St John, N.B.*

Personnel Files	
Division	
1. Noted in Personnel File	<i>at R.</i>
2. Index Card	
3. Non-Sub. Card	
4. Statistical Card	
5. Roneo Strip	<i>at R.</i>
6. Pension Card	
7. ....	
8. ....	
DATE	15.9.42

W.S.G. Application No. 10410

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

FILE NO. N.S. 0-72640

"WAR SERVICE GRATUITY"

COMPUTATION OF SERVICE

Thomas James Edward 0-72640 Sub Lieut  
 SURNAME CHRISTIAN NAMES IN FULL OFFICIAL NUMBER RANK OR RATING ON DISCHARGE

CAUSE OF DISCHARGE: dead (Raccoon)

applicant - malheur - A.P. 39:0

18 Aug '41 - 17 Aug '42 365 -  
 18 Aug '42 - 14 -  
 Sep 7 -  
386 -

TOTAL SERVICE

Date of Active Service 18 Aug '41  
 Date of Discharge 7 Sept '42  
 Total No. of Days 375 386

# Less non qualifying service nil

Total Days 386 Stat.

OVERSEAS SERVICE

% Total No. of Days 32

# Less non qualifying service nil

Total Days 32

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 m. Dr. nebles

Checked By [Signature]

[Signature]  
 for (H.B. Money)  
 Payr. Cmdr. R.C.N.R.  
 Director of Personnel Records

DATE: JUN 20 1945

NOT COMPUTED SERVICE

AA N.D.A.

NON QUALIFYING SERVICE

(#)	Date	Reason	DISCHARGE	No. of Days	RECORDS
"	7/10/42	"	"	"	"
"	"	"	"	"	"
"	"	"	"	"	"
"	"	"	"	"	"
"	"	"	"	"	"
"	"	"	"	"	"
"	"	"	"	"	"
				Total days	=====

DATE OF DISCHARGE: \_\_\_\_\_

DATE OF VETERAN SERVICE: \_\_\_\_\_

(%) OVERSEAS SERVICE:

Where Serving	From	To	No. of Days
Raccoon	7 Aug '42	7 Sept. '42	32

DATE OF DISCHARGE: \_\_\_\_\_

DATE OF VETERAN SERVICE: \_\_\_\_\_

DATE OF DISCHARGE: \_\_\_\_\_

DATE OF VETERAN SERVICE: \_\_\_\_\_

DATE OF DISCHARGE: \_\_\_\_\_

25  
7  
-----  
32

DATE OF DISCHARGE: \_\_\_\_\_

DATE OF DISCHARGE: \_\_\_\_\_

DATE OF DISCHARGE: \_\_\_\_\_

DATE OF DISCHARGE: \_\_\_\_\_

DATE OF DISCHARGE: \_\_\_\_\_

**STATEMENT OF WAR SERVICE GRATUITY**

DECEASED  
MEMBER'S  
NAME

**James Edward THOMAS**  
(CHRISTIAN NAMES) (SURNAME)

REGISTER NO. 10410  
FILE NO. NS.O-72640  
DATE 3rd July '45.  
SERVICE NO. R.C.N.V.R.  
FINAL RANK OR RATING Sub.Lieut.  
DATE OF DISCHARGE 7th Sep '42.

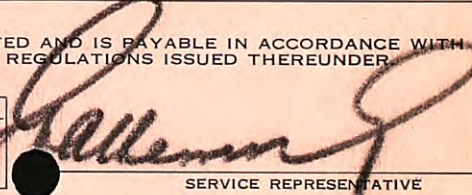
PAYEE  
ADDRESS

Director of Estates, for Service Estate of  
308 Sparks St., James E. Thomas  
Ottawa, Ont. NS.O 72640

DATE OF TERMINATION OF OVERSEAS SERVICE 7th Sep '42.

<b>A. TOTAL QUALIFYING SERVICE</b>		\$
NO. OF DAYS	386 EQUAL TO 12 COMPLETE PERIODS AT \$7.50	90.00
<b>B. QUALIFYING OVERSEAS SERVICE</b>		
NO. OF DAYS	32 LESS 26 INELIGIBLE DAYS, EQUAL TO 6 DAYS @ 25C. PER DAY	1.50
<b>C. SUPPLEMENT FOR OVERSEAS SERVICE</b>		
DAILY RATES AT DISCHARGE		
PAY	\$ 5.00	
SUBSISTENCE OR LODGING AND PROVISION ALLOWANCE	\$ 2.10	
ADDITIONAL PAY	\$	
	H.L.M. \$ .25	
	\$	
DEPENDENTS' ALLOWANCE 1/30 OF \$	\$	
TOTAL	\$ 7.35 X 7 = \$ 51.45	
NO. OF DAYS	32 X \$ 51.45	9.00
<b>D. WAR SERVICE GRATUITY</b>		100.50
<b>E. DEDUCTIONS</b>		
OVERPAYMENT OF PAY AND ALLOWANCES	\$	
DEPENDENTS' ALLOWANCE AND ASSIGNED PAY	\$ Nil	
OTHER DEDUCTIONS	\$	
<b>F. TOTAL AMOUNT PAYABLE</b>		100.50
<b>G. YOUR PORTION OF GRATUITY IS—</b>		
DEPENDENTS' ALLOWANCE IN ISSUE TO YOU	\$ _____ OF \$	= \$ 100.50
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 W 1946	CHECKED BY H. Hoffman	TREASURY	
		CHECKED BY	DATE July 4/45
		 SERVICE REPRESENTATIVE for Dir. Naval Pay Accting	

**DISTRIBUTION OF SERVICE ESTATES**  
NAVY

GMW

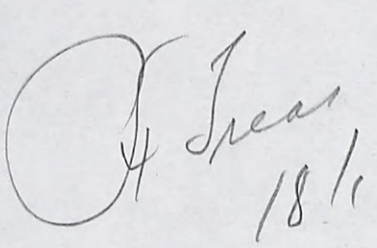
Estates Form "P. 4"

Name: **THOMAS,** Surname  
 Christian Names: **James E.**  
 No.: **NSO 72640**

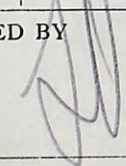
Rank: **SUB. LIEUT.**  
 Unit: **HMCS Raccoon**  
 Date of Death: **7-9-42**

Date: **8-1-46**

<u>AMOUNT</u>	<b>W.S.B.</b>	<b>100.50</b>
	<b>L.P.C.</b>	<b>\$ 153.76</b>
	<b>Other Credits</b>	<b>51.25</b>
	<b>Total</b>	<b>305.51</b>
	<b>Prev. Dist.</b>	<b>205.01</b>
	<b>This Dist.</b>	<b>100.50</b>

SHARE	RELATIONSHIP	NAME AND ADDRESS	AMOUNT
All	Mother	Mrs. Katie W. Thomas, 9 Gooderich St., St. John, N.B.  (As next of kin entitled)  	100.50

WSG

AUTHORITY					
H.O. F.E. No.	VOTE	PRI	H.O. SUB.	OBJ.	AMOUNT
0000 <del>0000</del>	531 <del>533</del>	00	50	000	100.50
CLASSIFIED BY 			EXAMINED BY		
			For Chief Treasury Officer		

DISTRIBUTION APPROVED AND AUTHORIZED

  
 (L. M. FIRTH) Colonel  
 Director of Estates

AUDITED FOR PAYMENT



MEMORANDUM FOR

P. 64

Mrs. Katie W. Thomas,  
9 Gooderich Street,  
SAINT JOHN, N.B.

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

THE SECRETARY,  
DEPARTMENT OF NATIONAL DEFENCE,  
OTTAWA, ONTARIO  
ATTENTION: ADMINISTRATOR OF ESTATES

and the following number quoted:—

H.Q. N.S. 103-T-81 ED. 206

DEPARTMENT OF NATIONAL DEFENCE  
OTTAWA, ONT.

September 24, 1942.

For the purpose of record and in the event of there being any balance of pay, medals or memorials available for distribution (according to law) on account of the late

THOMAS, James Edward, Sub-Lieut.

R. C. N. V. R.

it is necessary that the requisite information regarding the deceased and his relatives should be furnished on the inside of this form in strict accordance with the printed instructions. The particulars required are to be carefully filled in and the Declaration on the back should then be signed in the presence of a Clergyman, Priest or Local Magistrate, who should be asked to complete and sign the Certificate. This form should then be returned to the above address.

*H. R. Wade*

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



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 inquired for	Age	ADDRESS IN FULL of each surviving Relative, opposite his or her name, and date of death of each deceased relative	
1	Widow of the Deceased.....				
2	Children of the Deceased and dates of their Births.....				
3	Father of the Deceased.....	<i>Captain Edward Arnold Thomas</i>	<i>43</i>	<i>Deceased Jan. 4. 1930</i>	
4	Mother of the Deceased.....	<i>Katie Woods Thomas (Woods)</i>	<i>53</i>	<i>9 Gooderich Street Saint John. N. B.</i>	
5	Brothers of the Deceased	Full Blood	<i>Frank Woods Thomas</i>	<i>17</i>	<i>9 Gooderich Street Saint John. N. B.</i>
		Half Blood			
6	Sisters of the Deceased	Full Blood			
		Half Blood			
7	Names of brothers or sisters (whether of the full or the half blood) of the Deceased, who are dead, and date of death of each.	Names and ages of their children (if any)	Address of their children		

ONLY IF NO RELATIVES IN THE DEGREES ABOVE ARE NOW LIVING, THE FOLLOWING PARTICULARS SHOULD BE GIVEN

		NAMES OF THOSE LIVING	Age	ADDRESS IN FULL
8	Grand-Parents of the Deceased.....			
9	Uncles and Aunts by blood of the Deceased (not Uncles and Aunts by marriage).....		Age	

FULL PARTICULARS AS TO IDENTITY

10	What is the full name of the deceased?	James Edward Thomas.
11	Give the month and year of his birth.	June 1922.
12	Where and when were his parents married?	Trinity Church, Saint John, N.B. February 15 <sup>th</sup> 1915.
13	Was he ever married? If so, state exact place and date of marriage.	no
14	Did he leave a (later) Will? If so, it should be forwarded.	no.
15	Is there any other estate which will necessitate application being made for Probate or Letters of Administration?	no.

PARTICULARS OF DOMICILE

16	Where was deceased born?	Saint John
17	In what Province, Country or State did he reside, and in which last?	New Brunswick
18	How long in each?	20 yrs.
19	What was the nature of his employment?	Royal Bank of Canada.
20	Did he own the house or homestead in which he lived? If so, where?	no
21	Did he ever state verbally, or in writing, where he intended to make his permanent home?	no
22	State <u>your</u> postal address in full.	9 Gooderich St. Saint John, N.B.

PARTICULARS AS TO CLAIMS

23	Have the funeral expenses been paid? If so, by whom?	
24	Are there any outstanding claims against the estate? If so, furnish full name and address of each Creditor in this space and enclose his Bill of Account. (See Note Below).	no.

NOTE.—Paragraph 24 refers to debts incurred for board and lodging, medical and funeral expenses, money borrowed, goods purchased, etc.; the following information to be embodied in all accounts submitted:—

1. Name and address of Creditor.
2. Detailed statement of particulars of claim with date or dates incurred.
3. At the end of his statement the creditor should certify that the account is just and reasonable, that no payments save as shown, have been made thereon and that he holds no security therefor; the creditor should then sign same, and if you admit that the claim is correct, then you "O.K." the bill and sign same.

(PLEASE TURN OVER)

DECLARATION

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

I hereby declare that the foregoing particulars are correct, and a true and complete statement of all the relatives that the deceased ever had in the degrees inquired for; and that I am the

\*.....Mother.....of the deceased.

N.B. To be signed in full in the presence of a Clergyman, Priest or Local Magistrate

Katie Woods Thomas

{Signature of Informant

CERTIFICATE

I hereby certify that, to the best of my knowledge and belief.....

\*See above ..... { Name of Informant } is the \*.....of the Deceased above described, and I believe the above Declaration and the Statement of Relatives made by the Informant and signed in my presence to be complete and correct.

Dated at...Sunderland.....this...29th.....day of...September.....1942

Signature of Clergyman, Priest or Magistrate

[Signature]

Qualification.....

Police Magistrate

Address.....

Sunderland, New Brunswick

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 of each surviving Relative enquired after is stated in its proper place in the Statement opposite.

FILE 103/1/01  
DRAFTED BY MR R. H. H. H. H.  
11/9/42

S. 1320H  
15,000M-5-42 (4534)  
N.S. 815-9-1320H

## NAVAL MESSAGE

To: MRS. KATHLEEN THOMAS  
9 GOODRICH STREET  
MONTREAL, QUEBEC

From:

OFFICIAL COPY

103-281

CNP  
NPR  
FDG  
MINISTER

THE MINISTER OF NATIONAL DEFENCE FOR NAVAL SERVICES DEEPLY REGRETS  
TO INFORM YOU THAT YOUR SON SUB/LIEUTENANT JAMES  
EDWARD THOMAS (FULL NAME)  
ROYAL CANADIAN NAVAL VOLUNTEER RESERVE  
IS MISSING BELIEVED LOST AT SEA.

(DELIVERY CONFIRMED/)

L/T P/I. 15/9/42

RR 11642

28

13th September, 1942.

AIR MAIL

Dear Madam:

It is with deep regret that I must confirm the telegram of the 12th September from the Minister of National Defence for Naval Services informing you that your son, Sub-Lieutenant James Edward Thomas, R.C.N.V.R., (Temporary), is missing believed lost at sea.

It is for the public interest that this fact should not find its way to the enemy until such time as it is decided to publish a Naval Casualty List giving the reason for his loss. It is therefore requested that this news, other than the fact that your son is missing, may be treated as confidential.

I wish to express the sincere sympathy of the Chief of the Naval Staff, Officers and men of the Royal Canadian Navy, the high traditions of which your son has helped to maintain.

Yours sincerely,

*Rod*  
SECRETARY, NAVAL BOARD.

Mrs. Katie W. Thomas,  
9 Gooderich Street,  
SAINT JOHN, N.B.

C O P Y

N.S. 30-17-8.

MEMORANDUM TO: DEPUTY SECRETARY, NAVAL BOARD.

1. In reply to your memorandum of October 5th, it is desired to be of all possible assistance to next of kin, but it is at the same time not always possible to satisfy the requests made.

2. In the case of H.M.C.S. "RACCOON", it is not known definitely where or how she sank. It can be stated, however, to the Insurance Companies that H.M.C.S. "RACCOON" was lost somewhere in the Gulf of Saint Lawrence. The exact location will, in all probability, never be known. She was last seen in 049° 22' N, 066° 24' W.

3. The position of H.M.C.S. "CHARLOTTETOWN", at the time she was sunk, is known and I would be prepared, in due course, to divulge this information to a responsible official of an insurance company on condition that he treated it as secret. The position is 049° 10' North, 066° 50' West, i.e. off Cap Chat, P. Q.

4. The term "Territorial Waters" is interpreted differently by different countries and I suggest that it is impossible to make a general definition. However, it would appear that the view taken by any government would be binding on its citizens. It should be possible to ascertain the view of the Canadian Government on what it regards as Canadian territorial waters and whether this interpretation is binding on insurance companies doing business in Canada. It is clearly of great importance to establish the interpretation concerning such waters as the St. Lawrence River and the Gulf of St. Lawrence, to mention only those which affect the vessels under discussion.

5. I suggest that you clear this matter up before any answer involving position is made to the insurance companies. Those companies requiring only a certificate of death or loss can be answered now.

(SGD.) C.H. LITTLE,  
A/Lt. Commander, R.C.N.V.R.,  
Director of Naval Intelligence.

7th October, 1942, OTTAWA.

57

December 10th, 1942.

Re: Sub-Lieutenant James Edward  
Thomas, R.C.N.V.R., H.M.C.S.  
"RACCOON" - Your Policy No.  
185561

Dear Sir:

Receipt of your letter of November  
23rd is acknowledged.

It is not at present possible to say  
whether or not H.M.C.S. "RACCOON" was sunk within  
three miles of any actual land nor is it possible  
to indicate whether the location of the sinking  
was beyond Father Point.

In due course you will be given  
whatever information is available as to the loca-  
tion of the sinking.

Yours truly,

*Sam*

DEPUTY SECRETARY, NAVAL BOARD.

The Secretary-Treasurer,  
The Excelsior Life Insurance Company,  
TORONTO, Canada.

9



62

January 7th, 1943

Dear Sirs:

Re: Policy No. 185561 - James  
Edward Thomas -

Further to our letter of December 10th, 1942, the only information available as to the whereabouts of the sinking of H.M.C.S. "RACCOON" is that the loss occurred somewhere in the Gulf of St. Lawrence. She was last seen in 049° 22' N, 066° 24' W. It is highly unlikely that more specific information as to the location of the sinking will ever be obtained.

It would be appreciated if you would treat this information as strictly confidential.

Yours truly,

SM

  
Deputy SECRETARY, NAVAL BOARD.

The Secretary-Treasurer,  
Excelsior Life Insurance Company,  
TORONTO, Canada.

Dated by  
Sec. N. B.J. M. O.  
m.c.Date  
Time1/1  
12.50