JONES, FRANCIS LLEWELYN LLOYD

O37323



DEPARTMENT OF NATIONAL DEFENCE (NAVAL SERVICE)

APPLICATION FOR CADETSHIPS

IN THE ROYAL CANADIAN NAVY

I	ROYAL CANADIAN NAVY	U
f	Kingston, Ontario. (Place) January 7th, 1940. (Date)	
	January 7th, 1940	
THE NAVAL SECRETARY, DEPARTMENT OF NATIONAL DEFENCE, OTTAWA. SIR:—	(Date)	
Market Spirit and Control of the Con	the Royal Canadian Navy as a Naval Cadet. I understand that I am	required to make
	Engineering Branch. My first choice is the Executive	Branch.
in Canada for the past two years. I unde	(Insert branch chosen) and the son of a natural born or naturalized British subject, and that the erstand that the transport pass the Cadetship entrance examinations, and also mination by Departmental Medical Authorities before final acceptance interests by the Departmental Medical Authorities before final acceptance.	T will be
I wish to write the examination in th	the {*English language, and I choose the following subjects for examinated with the subject of	ation:
Part I—		The state of the state of
To be taken by all candidates (a) English; (b) General Knowled	s: dge; (c) One of the following subjects:—	
Modern Language (*or General History, or Everyday Science.),	esta - Pinner
Note.—Cross out subjects not chosen.		
	*Insert language chosen.	
(a) Latin or Greek; (b) French of Physics (state whether School School (Cross out subjects not chosen.)		
II hay not offer a Modern language in Part	fer similar subjects in Parts I and II, i.e., a candidate taking a Modern I; a candidate taking Physics, Chemistry, or Biology, may not offer Eve	language in Part ryday Science; a
The following questions are to be answ Name in full FRANCIS Address in full Royal Milit	vered by the applicant in his own handwriting, in ink:— LLEWELYN LLOYD JONES (Block letters) City or town, Province) Department should be immediately notified. 1920: (Certificate of birth, or sworn declaration to be attached) B.C.	
	(Certificate from School Authorities to be attached) ractor from persons well known, and of standing in locality.	
Ability to swim:—Attach certificate of abil	lity to swim 50 yards, signed by a responsible person.	
	(Normal)	
BO.10		
Complexion Jan		

Note.—This medical certificate is provisional only, and applicant will be required to pass a medical examination before a Medical Officer of the Department, before final acceptance.

C.N.S. 2419 500—4-38 N.S. 815-9-2419

Wounds, scars or distinguishing marks.

Are you in all respects physically fit for naval service?...

Religious denomination Chur

I Francis Llewelyn Lloyd Jones do her	Ter
declare that I have carefully considered the regulations for the entry of Cadets in the Royal Canadian Navy, and that I consent abide by the same in every particular, as well as to observe and follow all such orders and directions as I shall from time to ti receive from the naval authorities, and to conform in every respect to His Majesty's regulations, and to the rules and discipline the entry of Cadets in the Royal Canadian Navy, and that I consent abide by the same in every particular, as well as to observe and follow all such orders and directions as I shall from time to ti receive from the naval authorities, and to conform in every respect to His Majesty's regulations, and to the rules and discipline the entry of Cadets in the Royal Canadian Navy, and that I consent abide by the same in every particular, as well as to observe and follow all such orders and directions as I shall from time to ti receive from the naval authorities, and to conform in every respect to His Majesty's regulations, and to the rules and discipline the entry of Cadets in the Royal Canadian Navy, and that I consent abide by the same in every particular, as well as to observe and follow all such orders and directions as I shall from time to ti	to me of
Dated at Kingston, Ontario F. L. L. Jones Signature of Candidate.	
Signature of Candidate.	
this Seventh day of January 1940	
STILLSTEIGHD STOR MOTHERS	
Information required to be supplied by Parent or Guardian: Name, in full, of Father Athur Llewelyn Jones.	
Address of Father Revelstoke, B.C.	
Occupation and Profession of Father Physician and surgeon.	
Nationality of Father Welch	
How long domiciled in Canada 33 years	
Is Domicile Permanent or Temporary Remanent.	
Nationality of Paternal Grandfather.	
Nationality of Paternal Grandmother Scotch	
Name of Mother Thaire anna-Rita Hught (Maiden name to be given)	
Nationality of Mother Canadian.	
Nationality of Maternal Grandfather English	
Nationality of Maternal Grandmother French - Canadian	
Name and address of Guardian*	
Occupation and Profession*	
*To be given only if both parents are deceased. Do you know of any disability from whatever cause which would bebar the applicant from entry as a Cadet in the Royal Canad	ion
Navy?	1011
	-
DECLARATION BY PARENT OR GUARDIAN	
I hereby declare that I consent to the admission of Francis Llewelyn Lloyd Jone	1
my the above-signed Candidate for admission to the Ro	wal
Canadian Navy, and that it is my intention that he should adopt the Royal Canadian Navy as his profession in life.	
I consent to withdraw him upon receipt of an official request to do so in accordance with the regulations prescribed, and to for abide by the conditions as contained in the regulations (outlined in "Conditions of Entry, Service, etc., of Officers of the Ro Canadian Navy").	oyal
Note.—The usual causes requiring withdrawal are misconduct, lack of application to study, unsuitability for commission as Na Officer, and physical disability.	ıval
I agree to accept the decision of the Department in case of non-compliance with the regulations for entry and discipline by candidate.	the
I undertake, on behalf of mythat he is prepared to serve in any branch of the Royal Canadian Navy for which he may be selected.	
I understand that Naval Officers are appointed during pleasure and that the Governor in Council has authority to reli	eve
I am propared to pay \$20 when called on, for the expenses of the educational examination.	
	-
a, L, ones Signature of Parent or Guardian.	
Dated Revelotoke, B. C. this third day of January, 19.40.	
this through day of yannang, 19.70.	

Declaration to be signed by Candidate—



Can. B. 207 20M-8-38 N.S. 815-2-207

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

				(R	i.G.N. OI	R RESERV	VE FOR	GES)					111	
Note-	This Co Defend	ertificate i e, Ottawa	s to be completed	by the Exa	mining M	edical Offic	er and fo	rwarded to	the Na	val Sec	retary,	Departn	ent of N	ational
and I	date : belie	for ent eve him w in m	lersigned, have as to be in all represence. R.M.C. K.	Cadet espects	fit for	·N· His Maj	esty's	Service	. Не	has	signe	d the	Certif	ficate
							••••	,	11/1	liv			al Office	
							(Ran	k)L.t	R.	C.A.	M.C	•		
-	Thi	s exam	ination has b	een mad	le in ac	cordanc	e with	the Ins	tructi	ons fo	or Re	cruitii	ng.	
a Age Years Months	© Weight without Clothes	© Height with Bare Feet	$egin{aligned} & ext{General} \ & ext{Development} \end{aligned}$	Chest Girth	Vision by— S (i) Snellen's Types (ii) Colour Vision	Vaccinated or re- g vaccinated for Small Pox (Date)	© Lungs, Heart, etc.	Abdomen, Hernia, etc.	ELimbs and Joints	(r) Skin	g Ears and Hearing	(a) Testes, Varicocele, etc.	Mouth, Teeth (No. deficient and No. defective, if any), Nose, Tonsils, etc.	Anus, Hæmorrhoids, etc.
19 7/12 © Age	1bs.	ft. ins.	Good	inches (a) maximum 40 (b) minimum 36½ (c) mean	left eye 6/6 left eye 6/6 colour vision norma	1938	Normal	normal	normal	clear	normal	normal	3 deficient	normal
<i>Urin</i> Servi	e, Dis	scharge	CERTI ertify that to from the E illing to unde	the bes	t of my any oth	er diseas	l have se likel dental	never s y to rei treatme	uffered nder n ent as	d from me ur may	ofit f be a	or His	Maje	esty'
			Candidate is pa-		is	to be fille	d up							
not c	onsid	ered of	sufficient imp	portance	e to cau	ise his r	ejectio	n, he be	eing de	esirat	ole in	other	respec	ets.
						(Rank).	••••••					20000000	cal Offic	e1

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

(1)	MEDALS PERSON ENTITLED TO	Mrs. Mary A.K. Jones,	Or AL Jones Bry 334 Revelstake 1.
	ADDRESS:	KAYATEKAKA C/O Miss M. K. Dobb, RAVATEKAKA XEXX. Victoria, B.C.	MEMORIAL B'R
(2)	MEMORIAL CROSS WIDOW		DATE DESP
	ADDRESS:		REGN. NO. 648
(3)	MEMORIAL CROSS MOTHER	Mrs. A. L. Jones	20.20
	ADDRESS:	17 - 6th Street East REVELSTOKE, Sask.	(3) 19 August 1941

D.D. NAVY 24 May 1941 DECEASED WAR SERVICE RECORDS DEPARTMENT OF VETERANS AFFAIRS **AWARDS** 5.85.2 FILE No. JONES Francis Llewelyn Lloyd 0-37323 Mid. RANK ON CHRISTIAN NAMES REG. No. C.A.S.F. UNIT SURNAME (IN BLOCK LETTERS) DISCHARGE WAR SERVICE BADGE (CLASS) DATE DESPATCHED: No. AUDRESS: CAMPAIGN MEDALS REGISTRATION NUMBER AN DATE DESPATCHED Medals Rel'd, Undalivad. 1939-45 Star, 346 11/4/50 C.V.S.M. & Clasp, War Medal. (THE REVERSE TO BE USED FOR ESTATE PURPOSES) DVA 806

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NAME		OFFICIAL NUME		E NUMB		vn Tlor	d	J.41. C			, ~ c	,	2/+h T		NUMBER		
NAME	JONES (Surname)		T.12	Given Name	es)	yn Lloy	м							uly 1124			
PLACE OF BIRTH	VICTORIA, B.C.					occu	PATION	4									
RELIGION	Church of England.	20 644	EDUCA	TION				Do	wolat	oke				B.C			
RESIDENCE AT	TIME OF ENLISTMENT: Street and I ENGAGEMENTS	40 T/-00U	ou, Last				RIPTION		VETPO	ORC,		1	Province, et		JS SERVICE		
Date (in figures)	Period		Height	Hair	Ey		Complex		Marks	or Scars		-	Served in		Rank	Dat	es
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(N.)	OFFICIAL NUMBER	NAME	(Surn	JONE ame)	S Francis (Given Na	Llewel;	yn Llo	yd	<i>\{</i>		OFFICIAL NU	JMBEI	R				
Ship or Establishment	Rating	Day	From Month		Remarks	Character	Efficiency	Day	Date Month	Year	Non-Sub. Rating	Day	Qualifie			-Qualif	ied Year
Stadacona HMS.Britannia	Naval Cadet,	23	8	40	For passage to England & t Add'l for training R.N.Col	raining lege D	in R.N	i									
" Hood	Midshipman	1 4 24	1	41		1.5											
Discharged	H .	24	5	41	Dead-Reported missing, beli	eved ki	led.									······································	
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REPORT OF THE DEATH OF AN OFFICER, MAN OR BOY

HMOS Nav	al Service Hdqrs. at OTTAWA, Canada.	
Name Joi	NES, Francis Llewelyn Lloyd. (Christian names in full)	
Rank of Rating	x Midshipman. Official No. R.C.N. (If unknown, date of first entry)	
Place of Birth	Victoria, Bloco. Date of Birth 24th July, 1920.	
Occupation in Ci	vil Life Student. Religion Church of England.	
Number of years	s service in the Navy (Long Service R.C.N., or mobilized service in case of R.C.N.	
	or Reserve ratings) Cadet, R.C.N., 14th August, 1940 - 24th 184th May, 1941. Place of Death Overseas.	May. 1941
Cause of Death	Missing, believed killed in action while serving in (If due to accident, violence, or enemy action, particulars to be stated briefly) 6. "Hood".	
Nearest known relative or friend.	Lieut. Colonel A.L. Jones, O.B.E., Name M.C., R.C.A.M.C., Relationship Father Address C/o The District Medical Officer,	
	Military District No.7, New Armoury, St. John,	N.B.
Date on which t	the above was informed by Ship 27th May, 1941.	
Date on which of	death was registered with local Officials	
In the case of In	nperial Service men, whether Active Service, Pensioner or Reserve, date on which the	
prescribed re	eturn was rendered to the Registrar General in London, Edinburgh or Dublin, accord-	
ing to Natio	onality	
	(if known) Date of Burial (if known)	
Location, Numb	er, etc., of grave(if known)	
	loyed (if any)	
If borne for disc	ipline only, date D.S.Q. or invalided	
	Commanding Officer,	
The Naval Secr	ETARY, NAVAL SECRETARY.	

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.

Ottawa, Canada.

C.N.S. 1121 15M—7-40 (5849) N.S. 815-9-1121 To de

COPY

PRESS NOTICE

The Secretary of the Admiralty announces the following results o the passing out examination of Special and Direct Entry Cadets and Cadets of the Royal Canadian Navy and Royal Indian Navy held at the R.N. College, Dartmouth in December, 1940.

Order of	Executive		m.
Merit	Name	Class	Time gaine (Months)
10	Jones, F.L.L. (R.C.N.)	I	4
15	Leir, R.H. (T.C.N.)		
20	Benoit, C.J. (R.C.N.)		
21	Norman, C.J.B. (R.C.N.).		
22	Wall, T. W. (R.C.N.)		
26	Rutherford, D.C. (R.C.N.)		
28	Cogdon, N. (R.C.N.)		
30	Lesslie, W.V.A. (R.C.N.)		
31	McDenald, A.H. (R.C.N.)		
34	Howe, W.H. (R.C.N.)	III	
35	Kilgour, W.G. (R.C.N.)		
36	Chance, P.G. (R.C.N.)		
	Engineering		
19	Johnson, J.H. (R.C.N.)	III	
20	Lewis, K.E. (R.C.N.)		



THE GOVERNMENT OF THE PROVINCE OF BRITISH COLUMBIA

VITAL STATISTICS ACT

27. J. 362.

Certificate of Birth

This is to Certify that the following particulars of Birth are on record in the Office of the Registrar of Births, Deaths, and Marriages:-

Name of Child	FRANCIS LLEWELYN LLOYD JONES
Date of Birth	24TH JULY, 1920 Sex MALE
Place of Birth	ST. JOSEPH'S HOSPITAL, VIGTORIA, B.C.
Name of Father	ARTHUR LLEWELYN JOHES
Birthplace of Father	LONDON, ENGLAND
Maiden Name of Mother	MARIE ANNA RITA KNIGHT
Birthplace of Mother	QUEBEC, QUEBEC, CANADA
Occupation of Father	PHYSICIAH & SURGEON
Residence of Parents	254 MOSS STREET, VICTORIA, B.C.
Doctor or Nurse in attenda	nce at Birth DR. N. E. RIDEWOOD
Signature of Informant	A. LLEWELYH JOHES
Registered at	VICTORIA , B.C., this 3RD day of
AUGUST	, 1920.

Marginal notations:-



The fee for this certificate is 50 cents.

Given under my hand at Victoria, B. C., this 12TH day of MARCH,

48715





Revelstoke Railroad Young Men's Christian Association

"The Community Centre"

TELEPHONE No. 58

REVELSTOKE, B. C., Jan. 3rd. - 1930

To whom it may concern,

This is to certify that -

Francis Llewelyn Lloyd Jones has successfully passed the y. M. C. If swiming and life saving tests, and is able to swim fifty yards.

Thoward & Sveeman

Chysical Director.

RAILBOAD V. M. C. A.



may 21 st, 1940.

ROYAL MILITARY COLLEGE, KINGSTON,

ONTARIO.

P027607 # 2460

naval Secretary;
naval Service, NATIONALDE

noval Service, n.D. H. Q., Ottawa.

1.103-

Dear Sir:

In reference to my application for entry from the Royal mulitary College into the Royal Canadian navy as a naval cadet this fall, my home address has changed from "Dr. a.d. Jones

17-6 th Street East Revelstoke

B.C.

telo " It - Col. a. L. Jones

District medical Officer

m. D. X1.

Victoria B.C.

no hold with

Thanking you kindly, I am Yours truly. Gentlemun badet J. L. L. Jones

UNDERTAKING TO BE SIGNED BY TEMPORARY NAVAL CADETS (SPECIAL SERVICE)

(To be signed before proceeding to Naval Training Headquarters for second year training).

I Francis Llewelyn Lloyd Jones ... Temporary Naval Cadet, Special Entry, in consideration of my being accepted for Naval Training during my period of pupilage as a Gentleman Cadet at the Royal Military College of Canada, agree on my honour, on leaving the College with a diploma of graduation or a certificate of military qualification, to accept a commission in the Royal Canadian Naval Volunteer Reserve, and to serve therein for a period of not less than five years, provided a Unit thereof exists or is established in the place where I reside after leaving the said College, provided always that the above agreement shall in no way impair or affect the obligations imposed by Paragraph 51 of the Regulations for the Royal Military College of Canada to accept a combatant commission in the Non-Permanent Active Militia or the Non-Permanent Air Force or the Reserve of Officers, Royal Canadian Air Force, in the event of my not being granted a commission in the Royal Canadian Naval Volunteer Reserve.

The above agreement is to become null and void should I be appointed to any of His Majesty's Permanent or Regular Naval, Land or Air Forces.

J.L.L. Jones

DATE 20th april, 1939.

Gentleman Cadet Francis L. Jones,
c/o Lieutenant-Colonel A.L. Jones,
District Medical Officer,
M.D. XI,
Victoria, B.C.

They are required to report at the Royal Naval College, Dartmouth, England as soon after the 22nd August as possible.

Arrangements are to be made locally for these Cadets to proceed to England by the first available transportation either commercially or Service after the 14th August.

They are to be directed to report to the Office of the High Commissioner for Canada upon arrival in England who will arrange for completion of their Uniforms by Messrs. Gieves.

The High Commissioner for Canada will arrange their transportation to Dartmouth.

BY ORDER.

(J.O. Cossette) NAVAL SECRETARY. By Command of the Honourable the Minister of National Defence of the Dominion of Canada.

32

On Mr. Francis Llewelyn Lloyd Jones, --

The Minister of National Defence hereby appoints you

Cadet, R.C.N.,

of His Majesty's Canadian Ship STADACONA additional for passage to England and training in the Royal Navy.

Your appointment is to take effect from 14th August, 1940.

NOTED ON ESTIMATE CARD

Date /3/8/40

Initial Jack

Department of National Defence,

Share Ottama, 5th August, 194 0

15773

Rear-Admiral, Chief of Naval Staff.

Personnel Records Division.	
1. Noted in Records 2. Index Card 3. Non-Sub Card 4. Statistical Card 5. Roneo Strip 6. Pension Card 7. 8. DATE 12.8-42	

nev

Name: SONES	Francis L.L.		No.:	
Surname	Christian Names			
Midahipman	H.M.S. *HOOD			24-5-41
Rank	Unit	•••••••••••••••••••••••••••••••••••••••	Dat	e of Death
	<u>A</u>	MOUNT	W.S.G. L.P.C\$	179.54 65.81
	Date: 12-9-45		Other Credits	62.28
			Total	307.63
			Prev.dist. This dist.	128.09

SHARE	RELATIONSHIP	NAME AND ADDRESS	AMOUNT
1/2	father	Br.A.L. Jones, Box 334, Revelstoke, B.C.	89.77
1 2	mother	Mrs. Marie A. Jones, (As above)	89.77
		(As next of kin entitled)	
		40 15	
		SEP 25 1940	
		PA. TO TREAS.	
			WSG

H.Q. F.E. No.	VOTE	PRI	H.Q. SUB.	овј.	AMOUNT
9999	831	00	50	000	\$179.54
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DISTRIBUTION APPROVED AND AUTHORIZED

(L. M. FIRTH) Colonel Director of Estates

AUDITED FOR PAYMENT

BF 1

DEPARTMENT OF NATIONAL DEFENCE

NAVY ARMY AIR FORCE



NAVY

PAYEE 308 S	cis Llewelyn Lloyd (CHRISTIAN NAMES) Stor of Estates, Sparks St., Wa. Ont.	T EXX. SUPER-M T EXEC 1755 FIRST FARE EXE	NS 0-3
A. TOTAL QUALI	RMINATION OF OVERSEAS SERVICE		Contract to the second
	NO. OF DAY	SSS EQUAL TO S COMPLETE PERIODS AT \$7.50	67.50
B. QUALIFYING	OVERSEAS SERVICE	30	01.00
NO. OF DAYS 284	LESS 14 INELIGIBLE DAYS, EQUAL T	TO 70 DAYS @ 25C. PER DAY	67.50
	A STATE OF THE STA		
C. SUPPLEMENT	FOR OVERSEAS SERVICE		
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	PAY SUBSISTENCE OR LODGING AND PROVISION ALLOWANC ADDITIONAL PAY	g \$2.10	
		\$	
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7000		TOTAL \$4.10 ×7 = \$ 88.70 NO. OF DAYS 284 × \$ 28.70	44.54
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G. YOUR PORTIC	DEPENDENTS' ALLOWANCE IN TOTAL DEPENDENTS' ALLOW	N ISSUE TO YOU \$OF\$ =	179.5

TREASURY

for Dir Naval Pay Acctg.

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PREPARED BY CHECKED BY

W.S.G. Application No. 13545 TO: D.N.P.A. "G" FILE NO, N.S. 0 37323-"WAR SERVICE GRATUITY" COMPUTATION OF SERVICE OFFICIAL NUMBER IN FULL DISCHARGE CAUSE OF DISCHARGE: TOTAL SERVICE Date of Active Service Date of Discharge Total No. of Days # Less non qualifying service Total Days OVERSEAS SERVICE 6 Total No. of Days # Less non Qualifying service Total Days Record of Service in other Forces (per Maval Records) Branch of Service Date of Active Service Date of Discharge # & % Overleaf Computed By Checked By UnderHill) A/Captain (s) R.C.N.V.R. Director of Naval Pay Accounting DATE: JUL 26 1945

DD.

	NON QUALIFYING SERVIC	<u>JE</u>		
		S	TOMAL ERVICE	OVERSEAS SERVICE
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Where Serving	From	<u>To</u>	<u>Mo</u>	o. of Days
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Road.				20.0
ercipse from the spinal spinal so		ing s	Dr. 18	
Total de es tans				

#115 JE . F.E.

•	Lieut.Col. A.L. Jones, O.B.E., M.C.,	Any further communication on this subject should be addressed to:—
	R.C.A.M.C.,	THE SECRETARY, DEPARTMENT OF NATIONAL DEFENCE, OTTAWA, ONTARIO
	C/o The District Medical Officer,	ATTENTION: ADMINISTRATOR OF ESTATES
	Military District No. 7,	and the following number quoted:—
	New Armoury, St. John, N.B.	H.QN.S. 60-J-41 FD 143

DEPARTMENT OF NATIONAL DEFENCE OTTAWA, ONT.

July 14th, 194 1
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 ate
Midshipman Francés L.L. JONES,
R.C.N.
t is necessary that the requisite information regarding the deceased and his relatives

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.

(L.M. Firth) Major, 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.

of ship			INFORMANT'S ST	TATEMEN	T
Degrees of Relationship	RELAT		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 De	eceased	•		-
2	Children of the dates of their	Deceased and Births		-	-
3	Father of the De	ceased	ARTHUR LLEWELYN JONES L'COL REAMC	54	0/0 D.G.M.S D.N.D. OHANA OM
4	Mother of the D	eceased	MARIE ANNA-RITA JONES	54	17 6 Th SIE. Revelstoke Be
5	Brothers of the Deceased	Full Blood		-	
		Half Blood	•	-	
6	Sisters of the Deceased	Full Blood	MARGARET LOUISE JONES LUCILE LLOYD JONES GWENLLIAN MARY JONES	25 4	7427934 AC.WI. Thurissombodge. Corsha Wills. England17655 E Recessor Be.
		Half Blood			
	Names of brothers of the full or the hal ceased, who are dead of each.	or sisters (whether if blood) of the De- , and date of death	Names and ages of their children (if any)		Address of their children
7			- -		

$\underline{\text{ONLY IF}}$ NO RELATIVES IN THE DEGREES ABOVE ARE NOW LIVING, THE FOLLOWING PARTICULARS SHOULD BE GIVEN

	<u> </u>	NAMES OF THOSE LIVING	Age	ADDRESS IN FULL
8	Grand-Parents of the Deceased			
1	- Company of the comp		Age	
9	Uncles and Aunts by blood of the Deceased (not Uncles and Aunts by marriage)			

FULL PARTICULARS AS TO IDENTITY

10	What is the full name of the deceased?	FRANCIS LLEWELYN LLOYD LISHES
11	Give the month and year of his birth.	July 24 th 1920
2	Where and when were his parents married?	GHawa Ons. Fu 4.1915.
3	Was he ever married? If so, state exact place and date of marriage.	no
4	Did he leave a (later) Will? If so, it should be forwarded.	no
5	Is there any other estate which will necessitate application being made for Probate or Letters of Administration?	? porsing pay deposited in Causai au Bant glommere London

PARTICULARS OF DOMICILE

16	Where was deceased born?	Victoria Bc.
17	In what Province, Country or State did he reside, and in which last?	BC. recept 2 Forms of R.M.C. Or
18	How long in each?	BC. 1920 - 1940 Ont. 1938 - 1940 NS. Summer 1939.
19	What was the nature of his employment?	Studens Cario Caar
20	Did he own the house or homestead in which he lived? If so, where?	ho
21	Did he ever state verbally, or in writing, where he intended to make his permanent home?	ho.
22	State your postal address in full.	Home address 176 51E. Reversor BC.

PARTICULARS AS TO CLAIMS

23	Have the funeral expenses been paid? If so, by whom?	hos application.
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).	ho.

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.

DECLARATION

*Insert degree	DECLARATION
of relationship, for example "Wido	I hereby declare that the foregoing particulars are correct, and a true and complete statement
"Father," etc. of	f all the relatives that the deceased ever had in the degrees inquired for; and that I am the
	Latter Land
*.	father of the deceased.
N.B. To	be signed in
full in the Clergyman, Magistrate	be signed in presence of a Priest or Local Arthur Alwelyn ones Signature of Informent
Magistrate	of Informant
	CERTIFICATE
	014
	I hereby certify that, to the best of my knowledge and belief
*See above	{Name of Informant} is the *
	bove described, and I believe the above Declaration and the Statement of Relatives made by the
11	nformant and signed in my presence to be complete and correct.
Dated a	at aug & this & day of august 19 4
Signature of Clerg Priest or Magist	yman, Pomettules Qualification 3. Judge.
	Species of the Proposition of the Species of the plant of the Artist and Barrier of the Artist and
	Address
NOTE—Befo	ore granting the above Certificate, care should be taken to see that the Informant gives particulars concerning the death of any 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

NAVAL MESSAGE

S. 1320H 5 Mil.-5-40 (4975) N.S. 815-9-1320H

To:

From:

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LIEUT. COL. A.L. JONES, RCAMC C/O D.O.C. M.D. 7 ST. JOHN, N.B.

N.S.H.Q.

THE MINISTER OF NATIONAL DEFENCE FOR NAVAL SERVICES DEFELY
REGRETS TO INFORM YOU THAT YOUR SON MIDSHIPMAN BRANCIS
LLEWELYN LLOYD JONES R.C.N. IS MISSING, BELIEVED KILLED IN
ACTION IN H.M.S. "HOOD".

-/27

L/T P/L REC'D SDO 27.5.41 CL 5517

27th May, 1941.

AIR MAIL

Dear Sir:

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It is with the deepest regret that I must confirm the telegram of the 27th May, 1941, from the Minister of National Defence for Naval Services informing you that your son, Midshipman Francis Llewellyn Lloyd Jones, R.C.N., is reported missing, believed killed in action, whilst serving in H.M.S. "HOOD".

At the present time, there are no details to add to what has been given in the press concerning the action between H.M.S. "HOOD" and the German Battleship "BISMARCK". The Admiralty have stated that there is very little hope of survivors.

May I extend to you on behalf of the Chief of the Naval Staff and the Officers and men of the Royal Canadian Navy sincere sympathy in your bereavement.

Yours sincerely,

(J. O. Cossette), NAVAL SECRETARY,

Lieutenant-Colonel A. L. Jones, O.B.E., M.C., R.C.A.M.C., c/o The District Medical Officer,
Military District No. 7,
New Armoury,
ST. JOHN, N.B.