

LORNE

MEMORANDUM FOR

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he

Mrs. Florence Bullock,

73 High Street,

St. John, N.B.

.....

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

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

and the following number quoted:-

H.Q. N.S. 113-B-569 FD 33

P. 64

DEPARTMENT OF NATIONAL DEFENCE OTTAWA, ONT.

May 14, 197 2

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

BULLOCK, Harold Lorne, Ldg. Sig.

.....

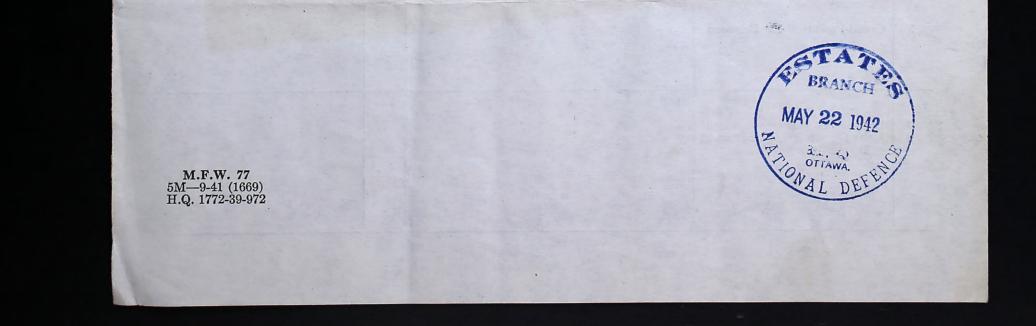
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No. V.2314, R.C.N.V.R.

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, Local Magistrate, Commissioner for Oaths or Notary Public, who should be asked to complete and sign the Certificate. This form should then be returned to the above address.

Wach.

(H.R. Wade) Lieut.Cdr. or (L.M. Firth) Major, Administrator of Estates.



ANSWER IN FULL ALL APPLICABLE QUESTIONS

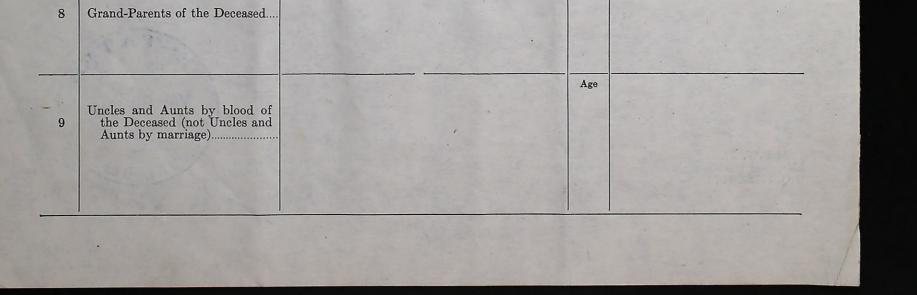
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STATEMENT of the Names, Ages and Addresses or Dates of Death, of all the relatives that the deceased ever had in each of the degrees specified below.

of iship	RELATIVES		INFORMANT'S	STATEMEN	NT				
Degrees of Relationship	RELA' required to be		NAME IN FULL of any Relative, if any, in each degree inquired for	Åge	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 Children of the Deceased and dates of their Births Father of the Deceased		Florence Camic Bullock	21	73 High St. Sant John;				
2			mont						
3			much John Bullock	45'	113 Levelon St. Sant John & A				
4	Mother of the D	eceased	Annie Bulloch	42	113 Leween St Sant John R.B. 113 Leween St. Saint John R.B.				
5	Brothers of the Deceased	Full Blood	Donald Bullock, marte Bullock, Jr.	21 14	} 113 Reucen St. Samt John & B				
		Half Blood	none						
6	Sisters of the Deceased	Full Blood	none						
		Half Blood	none		The state of the s				
7	Names of brothers or sisters (whether of the full or the half blood) of the De- ceased, who are dead, and date of death of each.		Names and ages of their children (if any)	•	Address of their children				
			none						

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
	a second and a second s		



FULL PARTICULARS AS TO IDENTITY

What is the full name of the deceased?	Harslor hearne Bulloch
Give the month and year of his birth.	soll of april 1920
Where and when were his parents married?	Saint John, about 1929
If deceased was married, state place and date of marriage.	Samt John January 21/42
Did he leave a Will? If so, a copy should be attached hereto.	none known of by widow or faunt
Did he leave a bank account? If so, give full particulars.	yes - Scent film # Sortings " Mis - Scent film # Sortings " #1557 Sound account and Mis annie Bullock #636
Is there any other estate which will necessitate application being made for Probate of the Will or Letters of Administration of the estate?	MO - Inconsion Arts Releases required for the at
State your own postal address in full.	73 High St., fant John & B.

PARTICULARS OF DOMICILE

18	Where was deceased born?	Sent John R B
19	State, in order, the Province (or State) and country in which the deceased resided and the period of time in each, and in which last.	life time in bant John & B centel collecting in havy
20	What was the nature of his employment?	Angan hermely Sent John & B. as a supervise of boundering mailing
21	Did he own the premises in which he lived? If so, where?	hr
22	Did he ever state verbally, or in writing, where he intended to make his permanent home?	Samt John R.B.

OTHER PARTICULARS

23	Did the deceased after enlistment incur any debts for:-
	(a) His own concrete board and ladering while an acmui

(a) His own separate board and lodging while on service.
(b) Service clothing and equipment.
An itemized account for each such debt should be attached hereto, and if same is correct you should mark the bill "approved" and sign same. If believed incorrect, give particulars.

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. 24

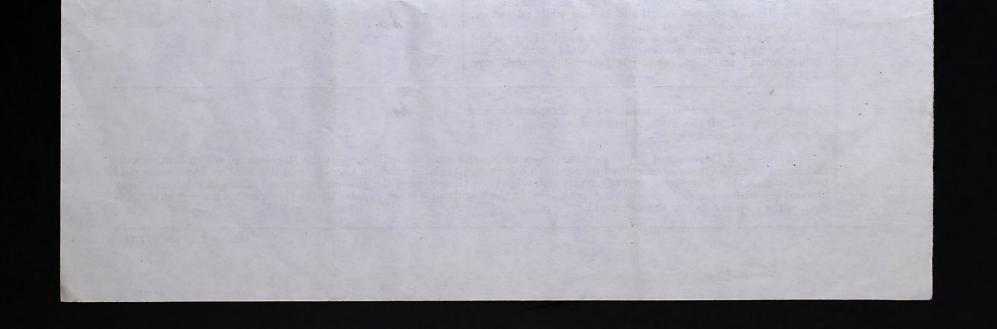
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to.

(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, 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 I hereby declare that the foregoing particulars are correct, and a true and complete state of all the relatives that the deceased ever had in the degrees inquired for ; and that I am t for example, "Widow," "Father," "Brother," etc N.B. To be signed in full in the presence of a Clergyman, Priest, Local Magistrate, Commissioner or Notary Public. Flance E. Bullock. Signature of Informant CERTIFICATE I hereby certify that, to the best of my knowledge and belief my House 6 1 { Name of Informant } is the *..... wielow of the Deceased *See above 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. ohn this 19th day of may 1942 Dated at faint Signature of Clergyman, Priest, Magistrate, Commissioner or Notary Public Withund Qualification Commissioner for taking affadants Address 7. The Exclain heife Insurance bo, Saint John, & B. 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 enquired after is stated in its proper place in the Statement opposite. USE SPACE BELOW FOR ANY ADDITIONAL REMARKS YOU MAY WISH TO MAKE



		CANA			N. V. 2M-2.3 N.S. 815-1
	ATT	ESTAT	ON F	ORM	GANADA
FOR	MEN OF THE ROY.	AL CANADI	AN NAV	AL VOLUN	TEER RESERVE
SURNAME	Bullo	ch		OFFICIAL	No. 231534
CHRISTIAN NA	AMES JAar	old	MARR		or WIDOWER
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	113 Que	en x	tree	t	United
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	PERSONAL 1	DESCRIPT	ION ON	ENROLM	IENT
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	COLMENT RATING EN	ROLLING FOR	TRAI	DE OR CALLING	AND IN WHOSE EMPLOY
DATE OF ENH					O lata trad

I hereby declare as follows:----

(1) That I am a British Subject domiciled in Canada.

(2) That I am desirous of being enrolled as a member of the Royal Canadian Naval Volunteer Reserve Force, and that I accept and agree to abide by the rules of the said Force.

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

¶ Cross out Clause not applicable.

SERVED IN	RANK	FROM	то

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

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

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(a) To serve from the date thereof for three 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 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 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 Company Commanding Officer or to Training Headquarters prior to my discharge or when required so to do by any authorized person, or to pay compensation for any loss or damage thereto other than fair wear and tear; and also not to wear such uniform or outfit (which is and remains the property of the Crown) except when on naval duty.

Dated this 4th day of Serptenberr 1939
Signature of applicant Avarald Bullock
(C) CERTIFICATE OF COMPANY COMMANDING OFFICER
I hereby certify that all the foregoing statements were made by the volunteer above named, in my
presence, and that he has made and signed the above declaration in my presence on this
(D) OATH OF ALLEGIANCE I, Harold Bullock do sincerely promise and swear (or solemnly declare) that I will be faithful and bear true allegiance to His Britannic Majesty.
Signature of Applicant Sarold Bullock
Witness Petu Pi, 8 Coch
Date Safat-4 1987 Rank Sull & CNVR.
The Oath of Allegiance may be administered by a Commissioned Officer of the Naval Service.
(E) CERTIFICATE OF COMPANY COMMANDING OFFICER
Canadian Naval Volunteer Reserve Force, I have caused his name and every prescribed particular to be
recorded in the Record Book of the South Company of the R.C.N.V.R.
121. Fuduck Brock VR.
Company Commanding Officer.

NOTE—This form when completed and when the particulars on it have been noted in the Company Commanding Officer's Record Book, is to be forwarded to Headquarters, Ottawa, for custody.

The Certificate of medical examination B-207, and certificates of previous service are to be sent to Headquarters, Ottawa, with this form.

Certificates of previous service will be returned after they have been examined at Headquarters, Ottawa.



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.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.

0 I, the undersigned, have examined X/ Car candidate for entry as..... 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 the O ...19Examining Medical Officer (Rank

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

© Age { Years Months	© Weight without Clothes	© Height with Bare	General Development (d)	Chest Girth	S (i) Snellen's Types (ii) Colour Vision	Small Pox (Date)	⊛ Lungs, Heart, etc.	© Abdomen, Hernia, etc.	© Limbs and Joints	© Skin	3 Ears and Hearing	 Testes, Varicocele, etc. 	Mouth, Teeth (No. def- cient and No. defective, if any), Nose, Tonsils, etc.	3 Anus, Hæmorrhoids, etc.
14-8-	1bs.	ft. ins.	god	inches (a) maximum 3615 (b) minimum 34. (c) mean 35	right eye 6.6 left eye 6.6 colour vision N	1426 Two maks	gomet	formet	punct	Honnef	pullett	formett	Health,	formal

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.

Biellock Signature of Candidate

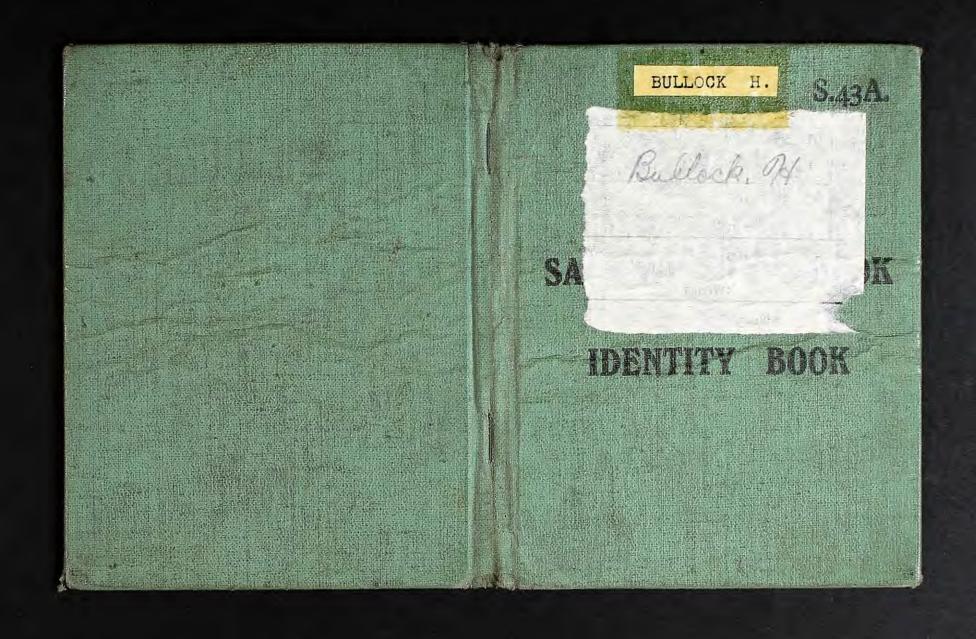
When a Candidate is passed, notwithstanding a slight defect or disability, the following Certificate is to be filled up

This Candidate is the subject of Mal except stight

Pterm 12 right 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.

DEPARTMENT OF VETERANS AFFAIR		WARDS NAVY		WAR SERVICE RECORDS
BULLOCK Harold	Lorne	L/L/Sig.	V-2314	FILE No.
SURNAME (IN BLOCK LETTERS)	HRISTIAN NAMES	REG. No.	RANK ON DISCHARGE	C.A.S.F. UNIT
No. Nil	DATE DES	SPATCHED:		
6				
ADDRESS:				
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MEDALS AND	MEMORIALS-DECEASED PERSONNEL	
RCNVR Se	pt. 42	REGISTRATION No. DATE OF DESPATCH
(1) MEDALS PERSON	Chase (Re-married) ^{ro} Mrs. Florence Bullock - Widow	DATE DESP
ADDRESS:	73 High St., 137 Leinster St., ST. JOHN, N.B. 11-12-48	$\frac{1}{\text{REGN}} = \frac{1}{1000} + \frac{1}{1000} + \frac{1}{1000} + \frac{1}{1000} + \frac{1}{10000} + \frac{1}{10000000000000000000000000000000000$
(2) MEMORIAL	CROSS	and the second se
WIDOW	Mrs. F. Bullock	
ADDRESS:	73 High St., Saint John, N.B.	(2) 18-5-42
(3) MEMORIAL	CROSS	
MOTHER	Mrs. A. Bullock	
ADDRESS:	113 Queen Street, Saint John, N.B.	(3) 18-5-42



TEMPORARY. Name Wardd. R. Bullock Sug. T.O. Rating Date of Birth 30 apr 1920 Official No. V. 23114 Ship's Book No. Pay Book Issued by Ship Date Signature of Seaman : Sarold Bullock

Sook to banadian Convey Rating

SAILOR'S PAY AND IDENTITY BOOK.

Instructions.

1. This book must be carefully preserved. You must not lose it or allow it to be stolen. If it is stolen or lost, the facts should be reported to the Commanding Officer as soon as possible. A new book will be obtained, if possible, from the Paymaster, but it must be understood that no pay can be issued in respect of the period before the date on which you report your loss, until you are finally settled with.

2. You will produce this book whenever you require an advance of cash on account, or when instructed to do so by any person authorized by law to ask you to produce it.

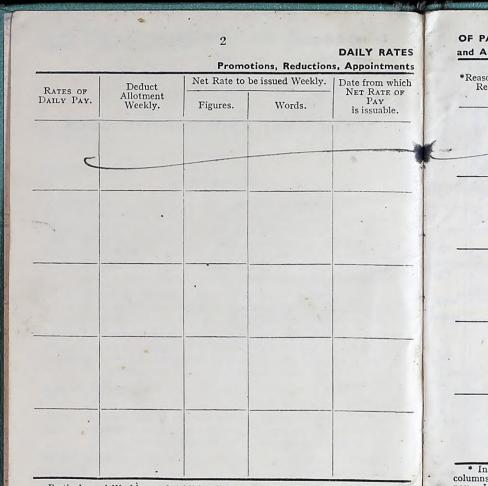
3. You will give a receipt, on the acquittance roll of the Officer paying you, for all cash advances made to you. The Officer making the payment will sign the corresponding entry in his book on the page for Cash payments.

4. You will make no entries in this book, except to sign your name on page opposite.

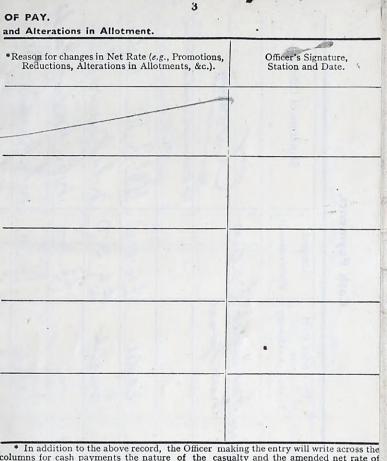
5. This book should not be allowed to fall into the hands of the enemy or unauthorized persons or strangers. You are personally responsible for its safe keeping.

6. The book is to be surrendered when the bearer leaves the naval service.

7. Anyone finding this book should hand it in at a Police Station or to the Issuing Office.



Particulars of Working and Additional Pay should be shown on page 3, not on pages 4 and 5.



* In addition to the above record, the Officer making the entry will write across the columns for cash payments the nature of the casualty and the amended net rate of pay. He will also record in the same places all sentences of imprisonment and special stoppages attesting such entries by his signature.

Cash Payments. By whom Paid Amount. Signature of Officer. Date. or Paying Authority. (State currency) 20 apl 4, Frms Eaglet 10 0. 15king harpool word timetes 60mmes Eagles-Lupe 4-0 la heart-0 4.9 Joapl aglit 0 he 3 Shah h 6 0 Puryiht W 1.51 225H alik 3 0 0. Juni A 19pm une J. X (H Kip ierel Total Cash Payments to date When a sailor is granted leave to England, an entry stating period of furlough is to be made in second column (i.e., "By whom Paid" column).

Photograph of Bearer partly overstamped with Official Stamp

(If Bearer's photograph has not yet been issued, this space should be stamped with the Ship's stamp)

[6/40] (399/2000)Q 26512-5685 100M 9/40 H & S Ltd. Gp. 399 1896

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	the second										••••••	
RESIDENCE AT	TIME OF ENLISTMENT: Street and I	vo. 113 Qu	ieen Str	eet,		Towr	St John		Province, etc]	N.B.		
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S.—239a. (Revised—A 10M—2-40 (3953) N.S. 815-9-239Å Page 1	pril, 1937)				C	(Author	ity—Art. 60.	3, King's Re CT	egulations, 11 SHE	936). EET		
NAME BU	LLO	СК	Haro	ld Lo	me	RA	TING	Li	<i>A</i> .			ORT DIVISION A
NAME OF SHIP	Date of Entry	No. of G.C. Badges held	Date of Commencement of "very good" conduct. (Art, 527, cl. 4 and 5) If conduct is not "very good" insert "Nil"	Class for Conduct If in 2nd class, insert (1) Date of reduction. (2) Date of proposed restoration.	Class for Leave If in 2nd class, insert date from which entitled to restoration to 1st class (Art. 573, cl.2)	on Ser (Art. From	r since last a rvice Certific Conduct She 605, cl. 5 ar To	cate or et	Efficiency (Art. 607)	For Art. 413 (See Notes Whether recommended for advancement (Must be fit for immediate advancement and fully qualified)	ratings only. 5, 6 and 7.) Whether recommended with a view to accelerated advancement (Must also be fit for immediate advancement but not necessarily fully qualified)	Ship Discharged to (giving date, if it differs from date of assessment of character, and, in the case of an N.C.S. Steward or Cook discharged to Shore, the cause of discharge)
Menture (g. 1.)	1940 9apl 7440	N.IL	8 Jan 40	i di)	19 9 apl 70-tap	40 6 Oct 13 Dec 40	VG	SAT C+	yes Arg) NO.	Stadaeona H / Cal
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Bittersweet	19/um'ru			1	1	19 June 41	liffuly H	V 9.	Hat.	Wy(NQ)	NO	Betterwet

- 1. Destruction of Conduct Sheet .- Attention is directed to Art. 603, cl. 3, K.R., which provides for the destruction, after the next assessment of character, of a Conduct Sheet shewing the record of offences in a previous ship. But the Conduct Sheet of a man joining a shore or harbour establishment may (and for Leading Seamen, Leading Signalmen, Able Seamen and Signalmen must) be kept in use and accompany him to his next sea-going ship. 2. Date of Commencement of "very good" Conduct.—When the date of commencement of "very good" conduct differs from that which would normally appear from the Service Certificate, the date is to be inserted in red.
- 3. Class for Conduct.-The date of proposed restoration may be any date not less than 3 months and not more than 6 calendar months from date of reduction. See Art. 567, K.R.
- 4. Good Conduct Medal and Gratuity.-Recommendations are to be made according to the instructions in Arts. 534, cl. 3, and 606, cl. 4, K.R. If the recommendation is intentionally withheld, a statement to that effect should be inserted. (See Art. 534, cl. 15.)
- 5. Whether Recommended for Advancement.—To be completed in respect of all Art. 413 ratings by inserting "Yes," "Not Yet" or "No" (but see notes (1), (2) and (3) below): (1) "Yes"—Recommended for advancement. To be followed by (N.Q.) if not fully qualified; this, if awarded in a sea-going ship, will count as a sea-going recommendation for men who require this qualification, although such men are not qualified for recommendation on Form S. 507.

 - "Not Yet"—To be used for ratings not yet recommended for advancement owing to their inexperience. To be followed by (N.Q.) if not fully qualified. "No"—Not recommended, whether qualified or not.
 - (3)
 - For Leading Seamen, Leading Signalmen, Able Seamen and Signalmen insert also "S.G.R." or "H.R." according as the ship is or is not a "sea-going" ship (Appendix XVII, Part 1, para. 10) in relation to the individual rating concerned.
- 6. Whether Recommended for Confirmation .- Notations, in red ink, are to be made across both the "Recommendation for Advancement," columns, after completion of a minimum period of three months' acting time, as to whether or not a rating is recommended for confirmation in the ordinary course. The abbreviations to be used are "R.C.O.C." or "N.R.C.O.C."
- 7. Accelerated Advancement.—Recommendations are not to be made in this column unless the rating was likely to have been recommended for accelerated advancement on the next return S. 507 had he remained in the ship. This column is intended merely to assist the Captain of the ship to which the rating is discharged in rendering S. 507 at the end of the half-year, by bringing to his notice ratings of more than ordinary merit, who should be specially considered when making the special recommendations on S. 507 for the accelerated advancement of a limited proportion of the ship's company. When recommending Leading Seamen, Leading Signalmen, Able Seamen and
- Signalmen add "S.G.R." or "H.R." as directed for previous column.
 - 8. Offences and Punishments .- To be recorded on page 2.
 - 9. Training Service.-This column is always to be completed for E.R.A.s, E.A.s, O.A.s, C.P.O.s, P.O.s and Leading Ratings of the Seamen, Signal W/T and Stoker branches, irrespective of whether or not the rating is a volunteer for the Training Service. If recommended, the word "Yes" should be inserted; if not recommended, the word "No."

RV23In red ink-Whether R.M.G. recomor Commanding nended for R.R. (a) Boys' Officer's Training Service. (where applicable) Signature (b) Other Instructiona Duties. (See Note 9)

CONDUCT SHEET

NAME	RATI	NG. fig '	PORT DIVISION	AN
Date of Offence	OFFENCE	PUNISHMENT AWARDED	By whom awarded, Ship and date	
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Page 2

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REMARKS	
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· R.C.1	N. U. R.	DAVE	Tion of	nostilities
True Co CERTIFICATE BULLOCK,		ne Service d	of $\sqrt{2}$	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
in the Naval S		/		time undesirable. Whenever the corner is cut off the fact is to be noted in the Ledger.
PORT DIVISION	ALIF	HX		FFICIAL NUMBER U2314
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Where born { County and pr	rovince	Mew 1	Srunda	nck
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Can swim				
Man's signature on discharge t	to pension			
CONTINUOUS SERV	ICE ENGAGEMEN	TS	1	MEDALS, CLASPS, Ero.
Date of actual volunteering	Commencement of time	Period voluntcered for	Date Received	Nature of Decoration
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Description of Person On entry as the provided of the person On advancement to man's rate or on entry under 28 years	5 10	1+	Hair Eyes	MARKS, WOUNDS AND SCARS

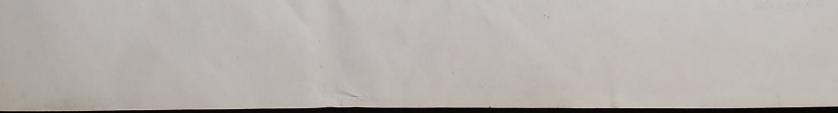
C.N.S. 1243 15M—7-40 (6003) N.S. 815-9-1243

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Further description if necessary.....

2 Name BULLOCK HAROLD LANTAR LIST SHIP'S NAME RATING FROM то CAUSE OF DISCHARGE AND No. R ladaeong 5 Fet 40 XM 40 -0 Venture (Yate Vers --. . . 60 40 -. 3 See 40 es Ta -. 4 See adaesha (C 31 Dec 40 -40 011 --Feb ise le 2. . . . 8 apr MI 3 9. apr. 1.4.1. 11.1 Rollins 14 acona Tune 141. 4 41 1 42 00 lessurer. 29 mch 12 on 2041 42 arrie DD Wounds received in Action and Hurt Certificate; also any Meritorious Service, Special Recommendations, Prize or other Grants CAPTAIN'S SIGNATURE DATE



SHIP'S NAME

LIST

SHIP'S NAME	AND No.	RATING	FROM	то	CAUSE OF DISCHARGE
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DATE PARTICULARS		CAPTAIN'S	DATE PART	ICULARS	CAPTAIN'S SIGNATURE
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F	rom	То	Character	Efficiency in Rating, noting Substantive Rating	R.M.G.	Date	Captain's Signature
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Department of National Defence

Naval Service

Ottawa, Canada.

27 April, 1942.

TIDE APR 29 1942 NS 113.13.56 CANDA 3.5

IN REPLY PLEASE QUOTE

No. N.S. 113-B-569.

187022

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 NO.	PLACE, DATE & CAUSE of DEATH	· <u>NEXT</u>	OF KIN
BULLOCK, Harold Lorne Leading Signalman, V-2314, R.C.N.V.R.	Missing, believed lest due to drowning at Moville, Ireland, when he fell between two ships while returning to H.M.C.S. "BARRIE" in which he was serving. Backy received June 15 1942 ALLOTMENTS IN FORCE		Mrs. Florence Bullock, 73 High Street, SAINT JOHN, N.B.
In favour of:		Amount	Initials.
Mrs. Florence Bullock, 73 High Street, Saint John, N.B.		\$70.00	\sim
Redeiver General War Sa			nt.
Ottawa, Ontario.		4.00	
			ERANCH ON
	WILL: No record.		APR 29 1942
-	Yours truly,		DITAWA DEF

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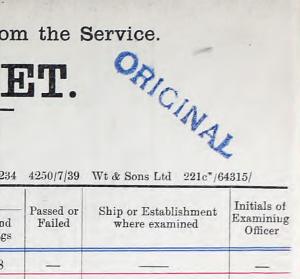
SECRETARY, NAVAL BOARD.

Administrator of Estates, Estates Branch, Department of National Defence, OTTAWA.

H.Q. 1010A 250M—5-41 (335) N.S. 815-7-1010

(Establi (Revise	- 97. shed—July, 1901 d—May, 1938.) Suecock, No. 2314		oed	ر	-	SI		-	I.	EXA	MIN	ATIO	N R		RD.		EF	CT.	ORIGINA	U
Official Date	No. 2314 Nature of Examination Qualifying or Requalifying	<i></i>	Pleet Paper) Miscell Paper	aneous Oral		o be fille		ding Practical	y to the W/T Paper		obtaine zzer R	ed after e	Morse Flag			4250/7/39 Passed or Failed	Wt & Sons Ltd 221e*, Ship or Establishment where examined	/64315/
	For T.O. (V/S) (Provisional)	/ % Required % Obtained	80 (oral)	-	-	80	-	80	-	80	-	80	90	97	96	98	98	-		-
8/2/	For T.O. (V/S)	% Required % Obtained	80 (oral)	-	-	80 \$5-		80 82	_	80 87		80	90	97 99	96 100	98 100	98 100	- °P	2 m Sig School	t.
14/3/41	FOR V/S 3 State whether after a qualifying course	% Required	80 78		89	80	80 76.5	~	80 75	80 90	•75	80	90 99	97 98.5	96 100	98 /00	98 100		Ame Sig School Hype	tt.
	For V/S 2	(% Required	80	80	80	80	80	80	80	80	75	80	90	97	96	98	98			-
	For V/S 1	% Obtained	80	85	80	80	80	85	80	80	80	85	90	97	96	98	98			
) % Obtained																		

Initials of Captain Rate Date Initials of Captain Rate Date Rate Date Initials of Captain Rate **T.O.** (**V**/**S**) **J.** 2. 41 N. 2424/33. N. 1584/38. RA V/S 1 V/S 2 V/S 3



S.-1246. T.S.-97,

For Directions for completing this part of the Form, see Article 610, K.R. & A.I.

(7	X. Vocational Training Certification be filled up on completion of a Vocational Traini	
Vocation		
We certify the	at (name)	
(residence)		
has satisfied us that l	he possesses a *	knowledge of the vocation
mentioned, and we co	onsider that †	
deve in a serie to a series	a deserver alle the second of selling second and	and the second
	Examiners	
	Business and Business Address	
		P. I.
	Date of Examination	
	(Signed)	President.
		Vocational Training
	 * Here insert qualification. † Special notation as applicable. ‡ Vocational Training is optional. 	Committee.‡

To be filled up by Ship or Establishment from which rating is sent to Depot for final discharge.

XI. Special Remarks.

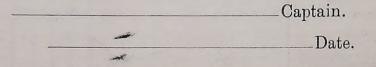
(Include power of command, intelligence, initiative, energy, and any qualification not otherwise recorded.)

XII. To be filled in 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 *_____

* See Art. 610, K.R. & A.I., clauses 3 to 7.



221/672

III. Boys Examinations.

(I.) ON PASSING OUT OF TRAINING ESTABLISHMENT.

	140				Pro-	Bu	zzer		Morse	Sema	phore	Passed	Training	Initials of
Date		Paper	Oral	School	cedure Pract.	т	R	Flashing	Flag	Mech.	H.F.	or Failed	Training Establishment	Initials of Examining Officer
	% Required	75	65	40	75	75	85	90	88	90	90		_	
	% nequirea	10	00	40	10	10	00	00						
	% Obtained	-				-								

(II.) FOR ACCELERATED ADVANCEMENT TO ORDINARY SIGNALMAN.

		AND INCOMPANYABLE IN IN		Gulin	Bu	zzer	Flash-	Morse	Sema	phore	Passed	Shin or Establishment	Initials of
Date		Paper	Oral	Coding Pract.	т	R	ing	Flag	Mech.	H.F.	or Failed	Ship or Establishment where examined	Examining Officer
		-											100 m
	% Required	75	75	70	75	85	95	92	96	96		-	-
	% Obtained												and and
	% Obtained							-					()·

IV. Examination for Ordinary Signalman (S.S).

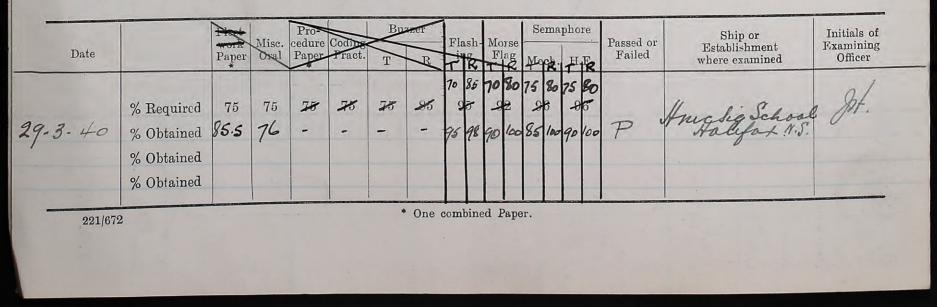
Date		Fleet	Work	FLAGS Oral	Proc	edure	Co- ding	W/T Paper	Ba	zzer	Flash- ing	Morse Flag	V	phore	Passed or	Initials of Examining
		Paper	Mast	Prs	Paper	Pract.	Pract.	rapor	T	R	mg	Ting	Mede	H.F.	Failed	Officer
	% Required	50	20	75	65	80	65-	28	25	25	75 90	75 88	20	75	_	07
16.2.40	% Obtained	-	-	85	-	-	-	-	-	-	84	92	-	98	P	St.

V. Training Class Certificate.

No Ordinary Signalman is eligible for advancement to the rating of Signalman until this Certificate has been obtained.

Date of Completion	Subject	% Required	% Obtained	Passed or Failed	Ship or Establishment where examined	Initials of Examining Officer
	Seamanship	75				
	Field Training	70				
	W/T	75				
		-				
						CANANTING AND

VI. Examination for Signalman.



Della	Dette		Fle		Mis lane	cel- eous	Proc	edure	Cod	ling	W/T	Bu	zzer			Sema	phore		Initials of
Date	Rating		Paper	Mast and M.M.	Paper	Oral	Paper	Pract.	Paper	Pract.	Paper	т	R	Flash- ing	3	Mech.	H.F.	Passed or Failed	Examining Officer
		% Required	80	85	80	80	80	85	80	80	80	90	95	97	96	98	98		· · · ·
		% Obtained																	

VII. Examination for Signal Boatswain.

VIII. Recommendations for Non-Substantive Rates.

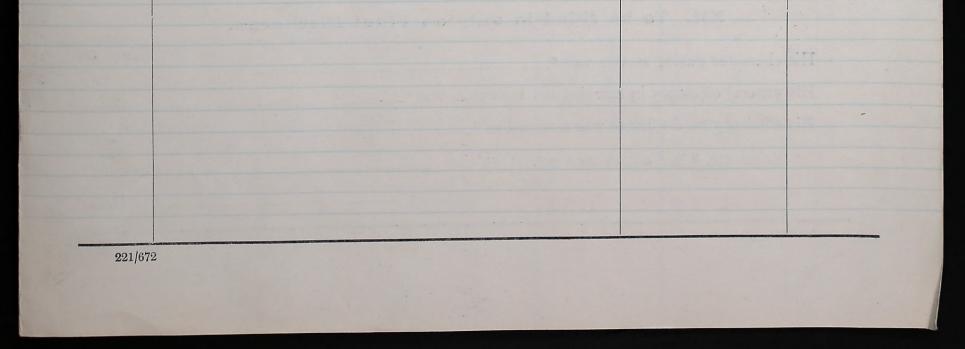
To be filled in as soon as the rating is eligible; considered deserving of a recommendation, and Form S. 1303 A has been forwarded.

Date		Present Substantive and	For what Non-Substantive rate	Init	ials of	
Linte	Ship	Non-Substantive Rate	recommended If highly recommended add ''H''	Signal Officer	Captain	
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			Innau Bat			
	1		and the second second			

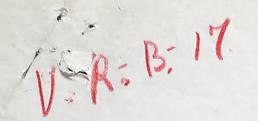
IX. Special Qualifications.

Only to be filled up when a rating is being discharged from a ship or establishment and it is desired to report on him for special ability not otherwise recorded, *e.g.*, knowledge of a foreign language, typewriting, shorthand, instructional ability, charge of signal department, or for any special knowledge.

Date	Qualifications	Ship or Establishment	Initials of Captain



NS:113-B:569.



R.C.N.V.R Passing Certificate

This is to Certify

that Harold L. BULLOCK,

Rating Ord. Signalman, RCNVR., Official Number 2314

has passed

THE EDUCATIONAL TEST, I

held on Sth November, 1939.

For advancement to Petty Officer

(J.O.Cossette). Naval Secretary

Department of National Defence,

Ottawa, this 22nd day of December, 19.39.

C.N.S. 2431 1M-3-39 N.S. 815-9-2431



Subject:- Finding of body of H.L.Bullock, No. V 2134 R.C.N. on 16.6.42.

> R.U.C. Barracks, Limavady, Co.Londonderry.

17th June, 1942.

Sir,

The body of the above named was found on the shore of Lough Foyle on the morning of the 16th inst. The body was in an advanced state of decomposition, bore very little clothing. A Gold filled identification disc with the name H.L. Bullock V.2134 and the letters R.C.N. was found on the left wrist. On the right hand there was a ring bearing a Naval Crest and letters R.C.N. These two articles are enclosed herewith, please.

> I am Sir, Your obedient Servant,

> > S. DONALDSON

Sgt.

To Secretary Captain, Naval Base, Londonderry.



FILE COPY

Department of National Defence Naval Service IN REPLY PLEASE QUOTE

No. N.S. 113-B-569.

Ottawa, Canada.

27 April, 1942.

AIR MAIL.

Memorandum:

With reference to Naval Service Headquarter's Memorandum N.S. 30-17-1 of the 5th November, 1941, you are informed with regret (casualty has) that the following (

to the Next-of-kin in your area:

NAME

BUILOCK, Harold Lorne

Leading Signalman, V-2314, R.C.N.V.R.

RANK/RATING & OFFICIAL NUMBER

Wife: Mrs. Florence Bullock, 73 High Street, SAINT JOHN, N.B.

ADDRESS OF NEXT OF KIN.

Missing, believed lost at sea. He was serving in H.M.C.S. "BARRIE".

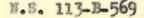
By Order,

0 or ler

SECRETARY, NAVAL BOARD.

The Commanding Officer, H.M.C.S. "BRUNSWICKER", McPartland Building, 221/23 Prince William Street, SAINT JOHN, N.B.

H.Q. 1010 500M-1-41 (9038) N.S. 815-7-1010



60

- NAVAL SERVICE -

June 27th, 1942.

Sir:

With reference to N.S. 113-B-569 of the 17th of June, 1942, it is notified for your information that the body of the late Harold Lorne Bullock, Leading Signalman, O.M. V-2314, Royal Canadian Naval Volunteer Reserve, of H.M.C.S. "BARRIS", was recovered on the 15th of June, 1942 and buried at Londonderry, Ireland.

Yours truly,

fei

SECRETARY, NAVAL BOARD.

(Aa.

The Secretary, The Canadian Pension Commission, Daly buidling, OTTAWA, Ont.

The Dominion Statistician, Bureau of Statistics, OTTAVA, Ont.

The Secretary, Imperial War Graves Commission, Room 312, Transportation Building, OTTAWA, Ont.

The Director of Records, Daly Building, OTTAWA, Ont.

Sec. 3 To note.

Noted in Service Records by .

LA: RK

LA: FMW

N.S. 113-B-569.

ch

16 July, 1942.

THIS IS TO CERTIFY that according to official information Harold Lorne Bullock, Leading Signalman, Official Number V-2314, Royal Canadian Naval Volunteer Reserve, was drowned at Moville, Ireland, on the 20th of April, 1942. Body was recovered on the 15th of June, 1942 and buried at Londonderry, Ireland, on the 21st of June, 1942.

Rai SECRETARY, NAVAL BOARD. HRIN La

Information extracted from Naval Service Headquarters' Records.

N.S. 113-B-569.

Six copies to be rendered to Naval Service Headquarters

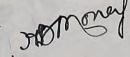
REPORT OF THE DEATH OF AN OFFICER, MAN OR BOY

HXMMENS Naval Service Headquarters at OTTAWA, Ont.
Name
Rank of Rating Leading Signalman Official No. V-2314, R.C.N.V.R. (If unknown, date of first entry)
Place of Birth Saint John, N.B. Date of Birth 50 April, 1920
Occupation in Civil Life
Number of years service in the Navy (Long Service R.C.N., or mobilized service in case of R.C.N.
(Temporary) or Reserve ratings) Active Service 7 January, 1940 to 20 April, 1942.
Date of Death 20 April, 1942 Place of Death At sea
Cause of Death Missing, presumed drowned at Moville, Ireland, when he fell (If due to accident, violence, or enemy action, particulars to be stated briefly)
between two ships while returning to the ship in which he was serving.
Nearest known relative or friend. Name Mrs. Florence Bullock. Relationship Wife Address .73 High Street. SAINT JOHN, N.B.
Date on which the above was informed by Ship N.S.H.Q 21 April, 1942.
Date on which death was registered 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, accord-
ing to Nationality
Place of Burial
Location, Number, etc., of grave
Undertaker employed
If borne for discipline only, date D.S.Q. or invalided

Commanding Officer,

17 June, 194 2.

SECRETARY, NAVAL BOARD, 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 rulations. Regulations.

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

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

STATEMENT OF ACCOUNT

12

List 12-2 No82		Name) Bu	llock, H	larold	Rank I	Rating A/L.Sig.N	IoV	2314
When entered	F.B.	Date	of appeara	nce. F.I	B.	Whither discharged.	D.D. 1	P. M.
						1	pril	C.
CREDIT from form								
						at \$ 225 .a day)		
						•05 ")		
						115. ")		
						")		100000000000000000000000000000000000000
						")		
	H.L.M.	1 4	Apl 2	O Apl.	20 days			
						Total credits	113.	04
DEBT from former	r account				D	F.B.	181	25
DEDI HOM IOIMC	account		••••••	••••••		•- ••		
PAYMENTS:	1st	2nd	3rd	4th	5th	••••		
PAYMENTS:—	1st \$ c.		3rd \$ c.			•- • 2 •		
PAYMENTS:—	1st \$ c.	2nd	\$ c.	4th \$ c.	5th	Total		
	1st \$ c. 8.50	2nd	\$ c.	4th \$ c.	5th \$ c.		8.	.50
PAYMENTS:— 1st month 2nd month 3rd month	1st \$ c. 8.50	2nd \$ c.	\$ c.	4th \$ c.	5th \$ c.	Total Total Total	8.	50
PAYMENTS:— 1st month 2nd month 3rd month Allotment \$70	1st \$ c. 8.50	2nd \$ c. charged	\$ c.	4th \$ c. 11, sto	5th \$ c. ppedpa1	Total Total Total d. 30 April		50
PAYMENTS:— 1st month 2nd month 3rd month Allotment \$70	1st \$ c. 8.50	2nd \$ c. charged	\$ c.	4th \$ c. 11, sto	5th \$ c. ppedpa1	Total Total Total		50
PAYMENTS:— 1st month 2nd month 3rd month Allotment \$70	1st \$ c. 8.50 - \$4.00 (officers) cha	2nd \$ c. c. c.harged	\$ c.	4th \$ c. 11, sto	5th \$ c. ppedpai. of	Total Total Total d. 30 April		50
PAYMENTS: 1st month 2nd month 3rd month Allotment \$70 Pension deduction (Hospital stoppages. Mulcts	1st \$ c. 8.50 	2nd \$ c.	\$ c.	4th \$ c. 11., sto	5th \$ c. ppedpai. 	Total Total Total d. 30 Apri.1		50
PAYMENTS: 1st month 2nd month 3rd month Allotment \$70 Pension deduction (Hospital stoppages. Mulcts.	1st \$ c. 8.50 	2nd \$ c.	\$ c.	4th \$ c. 11., sto	5th \$ c. ppedpai. 	Total Total Total d. 30 Apri.1		50
PAYMENTS: 1st month 2nd month 3rd month Allotment \$70 Pension deduction (Hospital stoppages. Mulcts	1st \$ c. 8.50 	2nd \$ c.	\$ c.	4th \$ c. 11., sto	5th \$ c. pped pai of from "Bi	Total Total Total d. 30 Apri.1		50 00 0.3
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PAYMENTS: 1st month 2nd month 3rd month Allotment \$70 Pension deduction (Hospital stoppages. Mulcts.	1st \$ c. 8.50 8.50 .8.50 .8.50	2nd \$ c. charged rged to 1duet	\$ c. for Apr i.o. Amend	4th \$ c. il, sto edT/L.	5th \$ c. pped pai of. from "Bi	Total Total Total d. 30 April ttersweet"		50 00 0.3

Number of days actually victualled during period mentioned above...20 ...days.....

NOT		INCLUSIVE DATE		
VICTUALLED	LENT SICK OR	INCLUSIVE DATE	No. OF	SHIP, HOSPITAL, etc.,

	LEAVE	FROM	то	DAYS	IN WHICH BORNE
1					

Am

Pay Lieut. RCNVR. OFFICER

Date 12 June 1942

C.N.S. 2426 25M—10-40 (7514) N.S. 815-9-2426

	e: Mrs. 73 High St. Joh	INISTIAN NAME	. E. BI	(sur JLLOOK	BULLO(NAME)	FINAL	F	DATE 2 ICE NO. V RATING /	8V-2314 6 Feb/4 -2314
A. TOTAL	QUALIFYING	G SERVICE	NO. OF DA	×5 834	EQUAL TO	COMPLET	E PERIODS A	2	\$.50
B. QUALI No. of Days	FYING OVER	INEL		30 S, EQUAL TO	307	DAYS @ 25c. F			76.75
C. SUPPL		SUBSISTEN AND PROVIS AD		PAY BING PAY T.(H.] OF \$	DISCHARG \$1 \$1 .V/8 \$.N. \$ \$ AL \$5 OF DAYS	25 .45 .05 .25 .15 .15	s 36.05 (s 36.05		60.48
E. DEDUC	TIONS	OVER OTHE AMOUNT IS GRANTS ACT.	RPAYMENT R DEDUCT PAYABLE IN 1944, PROVIDES OF A: & E. TH THIS CONN (NS" AFFAIR	DE IONS MC 5 FOR YOUR RE 15 CREDIT 15	-ESTABLISHME	ALLOWANCE SIGNED PAY ALMENTS OF NT CREDIT IN T YOU IN CERT	\$ NIL \$ NIL •	EACH)	EXPLANATION
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