

A2985
LUNDRIGAN
JOHN



ORIGINAL

DEC - 1 1940
N.S. 123-216

Certificate of Medical Examination of Officers, Men and Boys

NAVAL SERVICE OF CANADA

(R.C.N. OR RESERVE FORCES)

90066

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 LUNDRIGAN John
candidate for entry as Sub¹
and I believe him to be * in all respects fit for His Majesty's Service.
unfit for His Majesty's Service for the reason stated below. He has signed
the Certificate given below in my presence.

†Strike out if inapplicable. * Delete one.

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

(a) Age 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	(g) 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, Ventricles, etc.	(o) Mouth, Teeth (No. deficient and No. defective, if any), Nose, Throat, etc.	(p) Anus, Hemorrhoids, etc.
19-10	lbs. 134	ft. ins. 5-11 1/4	fair	inches (a) maximum 34 (b) minimum 32 (c) mean 33	right eye 6/15 left eye 6/15 colour vision N	Never	Healthy 2. Body *X-Ray	Normal	Normal	Clear	Normal	Normal	Deficient 0 All perfect 4 Throat. No. obstructive - throat plates, etc.	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.

John Lundrigan
Signature of Candidate

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

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

This Candidate is the subject of.....

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

IF REJECTED
insert here
UNFIT
in block letters

Dated at Halifax N.S. the 20 of Nov 19 40

Andrya Lippin
Examining Medical Officer

(Rank) SURGEON LIEUT.

R.C.N.R.

DURATION OF HOSTILITIES

True Copy of the
CERTIFICATE of the Service of

John LUNDRIAN

in the Naval Service of Canada

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

PORT DIVISION	HALIFAX, N. S.	OFFICIAL NUMBER	A 2985
---------------	----------------	-----------------	--------

Date of birth.....26th...January,1921.....

Where born { Town.....Lord's Cove,
 County and province...Newfoundland.

Usual place of residence...Lord's Cove, Nfld.

Trade brought up to...Trimmer.

Religious denomination...Roman Catholic

Next of kin...Mother: Catherine Lundrigan, same address

Can swim.....

Man's signature on discharge to pension.....

CONTINUOUS SERVICE ENGAGEMENTS			MEDALS, CLASPS, Etc.	
Date of actual volunteering	Commencement of time	Period volunteered for	Date Received	Nature of Decoration
21st.. November,	1940	Duration of Hostilities		

DESCRIPTION OF PERSON	STATURE		COLOUR OF			MARKS, WOUNDS AND SCARS
	Feet	In.	Complexion	Hair	Eyes	
On entry as a boy.....						
On advancement to man's rating, or on entry under 28 years.....	5	11 1/2	Fair	Brown	Blue	Nil.
On re-entry for C.S. or for Non-C.S. after attaining 28 years.....						
Further description if necessary.....						

Name

SHIP'S NAME	LIST AND No.	RATING	FROM	TO	CAUSE OF DISCHARGE
Stadecora Stad (Charlotte Harbor)		Sto. (temp.) " "	21 Nov. 40	12 June 42	"D.D."
			13 June 42 (NS. 30-17-1 of 18 th Sep 42)	10 Sep 42	

DATE	Wounds received in Action and Hurt Certificate; also any Meritorious Service, Special Recommendations, Prize or other Grants	CAPTAIN'S SIGNATURE
21 May 42	SC T-W # 21032	2033

SHIP'S	
Examined	
DATE	
9 JAN 41	Qual

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

*Cross out clause not applicable.

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

(b) ~~performed in~~ **Nil.** ~~performed in~~ for the ~~period~~

Served in	Rank	From	To
 Nil		

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

(7) On being enrolled as a member of the Royal Canadian Naval Reserve, I undertake and bind myself:—

AND/OR DURATION OF HOSTILITIES.

- (a) To serve from the date thereof for five consecutive years, being subject to the provisions of the Naval Service Act, and of the Regulations made in pursuance thereof for the government of the Royal Canadian Naval Reserve, and to the customs and usages of His Majesty's Canadian Naval Service.
- (b) To report for active service if called upon in time of war or emergency, and, if called into active service, to serve ashore or afloat as may be directed according to where my services are required.
- (c) To keep in good repair and condition the articles of uniform and any articles of outfit which may be issued to me and to return them to the nearest Registrar or to Training Headquarters prior to my discharge or when required so to do by any authorized person, or to pay compensation for any loss or damage thereto other than fair wear and tear; and also not to wear such uniform or outfit (which is and remains the property of the Crown) except when on Naval duty.

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

Dated this **21st** day of **November, 1940.**

John Lundrigan
(Signature of Applicant)

(C) **OATH OF ALLEGIANCE**

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

Signature of Applicant *John Lundrigan*

Witness *M. J. Macdonald*

Date **21st November, 1940.** Rank **Mate, R.C.N.R.**

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

(D) **CERTIFICATE OF ATTESTING OFFICIAL**

I hereby certify that all the foregoing statements were made by the man above named, in my presence, and that he has made and signed the above declaration and has taken the oath of

allegiance in my presence this **21st** day of **November, 1940.**

M. J. Macdonald
Mate, R.C.N.R. (Signature of Officer and rank)

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

A 2985

OFFICIAL NUMBER

NAME LUNDRIGAN,
(Surname)

John
(Given Names)

OFFICIAL NUMBER A 2985

Ship or Establishment	Rating	From			Remarks	Character	Efficiency	Date			Non-Sub. Rating	Qualified			Re-Qualified		
		Day	Month	Year				Day	Month	Year		Day	Month	Year	Day	Month	Year
HMCS "Stadacona"	Stoker I	21	11	40		V.G.	Sat.	31	12	40							
" "Charlottetown"	"	13	6	42	(DRD)	V.G.	Sat.	31	12	41							
DISCHARGED	"	10	9	42	Missing, believed killed in action, Charlottetown Casualty List	V.G.	Sat.	10	9	42							

GENERAL REMARKS

Canadian Memorial Cross forwarded to Mother: Mrs. Catherine Lundrigan, Lord's Cove, Nfld. 24-11-42

DATE OF BIRTH	PLACE	CIVIL	SCALE	RESIDENCE	PREV. ENL.	RANK OR RATE ON ENLISTMENT
26 1 21	24	5-40-0	10	K 004 00 0	19 0	1594
ENLIST. DATE	AGE	SEC. DATE	ESTAB.	SHIP	RANK OR RATE	
21 11 40	21 11 40		1940	01594		
GENIORITY	ST. A	B	ST.	CODED	CHECKED	
21 11 40 09			20	10-09-42		

A 2985

OFFICIAL NUMBER

FILE NUMBER

123-L-216

OFFICIAL NUMBER A 2985

NAME LUNDRIGAN, John DATE OF BIRTH 26 January, 1921
 (Surname) (Given Names)

PLACE OF BIRTH Lord's Cove, Nfld. OCCUPATION Trimmer, S.S. "Cambria", Liverpool, England

RELIGION Roman Catholic EDUCATION _____

RESIDENCE AT TIME OF ENLISTMENT: Street and No. _____ Town Lords Cove, Province, etc. Newfoundland

ENGAGEMENTS			Period	DESCRIPTION					PREVIOUS SERVICE		
Date (in figures)				Height	Hair	Eyes	Complexion	Marks or Scars	Served in	Rank or Rating	Dates
Day	Month	Year								From	To
21	11	40	Hostilities Only	5' 11 $\frac{1}{2}$ "	Brown	Blue	Fair	Nil			

NEXT OF KIN RELATIONSHIP (in pencil) Mother NAME (in pencil) Mrs. Kathleen J. Duggan
 ADDRESS (in pencil): Street and No. _____ Town Lords Cove, Province, etc. Newfoundland

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	

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. 4596-1
DATE

W. S. G.
 APPLICATION
 12504
 RECEIVED
 1945

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

NAME St. J. OFF. NO. 92985 ADDRESS

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

50 Clasp

1 Medal

VERIFIED BY *[Signature]*

[Signature]

S. 1246A. (Revised—July, 1938.)

5M—7-40 (5842)
N.S. 815-9-1246a

P. C. Charlottetown 13-6-42 A
21-11-40

HISTORY SHEET FOR STOKER RATINGS

This form is to be kept by the Engineer Officer, and is to be completed:—

- (a) When a man leaves a ship after a period of not less than three months' service in her.
- (b) Annually on 31st December, unless completed within the previous three months.
- (c) As directed under special headings.

To be handed to the man, together with Service Certificate, on discharge to shore. See Art. 609, K.R. & A.I.

Surname	NAME Christian	Official Number	Port Division
LUNDRIGAN	JOHN A.	<i>A 2985</i>	HALIFAX

REPORT OF PROGRESS AS STOKER 2ND CLASS UNDER TRAINING

(To be filled in on completion of courses in Depot)

Course	Date of		Class of Certificate awarded on completion*	Remarks	Signature and Rank of Examining Officer
	Commencing	Completing			
New Entry Course	26-II-40	13.1.41		<i>Good Rating</i>	<i>J. B. Keelson</i> Training Commander. <i>A/E.</i>
Technical Training at Stokers' Training Establishment:— (1) Marine Engineering (2) Electrical					Engineer Officer.

* Insert:—"Superior," "Satisfactory" or "Moderate." (Failure to be noted in RED INK).

Issued with Stoker's Manual:—Date 29-II-40 Signature and Rank: *J. B. Keelson A/E*

Entered H.M. Service as Stoker 2nd Class _____	Completed 2 years' training for Mechanician _____
Advanced to Stoker 1st Class <i>On Entry 21-11-40</i>	Rated Mechanician 2nd Class _____
Advanced to Leading Stoker _____	" " 1st Class _____
Advanced to Stoker Petty Officer _____	Advanced to Chief Mechanician _____
Advanced to Chief Stoker _____	

RECORD OF EXAMINATIONS, QUALIFICATIONS, COURSES, ETC. (see Footnote)

Examinations, etc.	Date	Signature of Engineer Officer	Captain's Initials

Award of Auxiliary Watchkeeping Certificate, and RESULTS of all professional and school examinations, courses and qualifications for promotion are to be inserted in this space.



CANADA

Department of National Defence
Naval Service

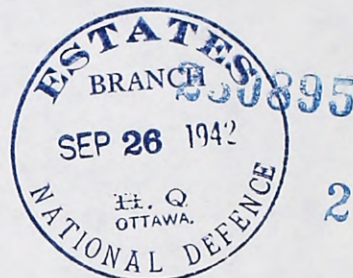
Ottawa, Canada.

23 September, 1942.

IN REPLY PLEASE QUOTE
No. N.S. 123-L-216.

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:



23089

<u>NAME, RANK/RATING NO.</u>	<u>PLACE, DATE & CAUSE of DEATH</u>	<u>NEXT OF KIN</u>
LUNDRIGAN, John Stoker I, A-2985, R.C.N.R.	Missing, believed lost at sea, on the 10th of September, 1942. He was serving in H.M.C.S. "CHARLOTTETOWN" which has been sunk as a result of enemy action.	Mother: Mrs. Catherine Lundrigan, LORD'S COVE, Newfoundland.

ALLOTMENTS IN FORCE

<u>In favour of:</u>	<u>Amount</u>	<u>Initials.</u>
NIL	NIL	L.D

Y.M.B.
24/9/42

WILL: No record.

Yours truly,

R. A. ...
SECRETARY, NAVAL BOARD.
per LA

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

N.C.R.

23 September, 1942.

Sir:

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

<u>NAME, RANK/RATING NO.</u>	<u>PLACE, DATE & CAUSE of DEATH</u>	<u>NEXT OF KIN</u>
LUNDRIGAN, John Stoker I, A-2985, R.C.N.R.	Missing, believed lost at sea, on the 10th of September, 1942. He was serving in H.M.C.S. "CHARLOTTETOWN" which has been sunk as a result of enemy action.	Mother: Mrs. Catherine Lundrigan, LORD'S COVE, Newfoundland.

ALLOTMENTS IN FORCE

<u>In favour of:</u>	<u>Amount</u>	<u>Initials.</u>
Nil	Nil	L.D.

[Handwritten signature]

WILL: No record.

Yours truly,

R. A. [Handwritten signature]
SECRETARY, NAVAL BOARD.

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

ESTATES BRANCH

March 26, 1943

Mr. Patrick Lundrigan,
Lord's Cove,
Newfoundland.

LUNDRIGAN, John, Sto. 1 (deceased)
No. A. 2985, R.C.N.R.

Dear Mr. Lundrigan,

Enclosed is Dominion of Canada cheque No. A. 57082
dated March 19, 1943, payable to your order in the amount of
\$89.91. ✓

This was the total of your son's Service estate
available to this Branch for distribution and was made up of
the balance of wages at his credit.

Your son died without having made a Will and his
Service estate is, therefore, distributable in accordance with
the Intestacy Laws of his province of domicile. Accordingly,
the whole estate is paid to you as next of kin entitled.

There were no personal effects received at this
Branch for distribution.

Will you please complete the enclosed form of
receipt and forward it to this Branch by return mail. ✓

Yours faithfully

R	OTTAWA, CANADA.
	ORIGINAL NO. 267

Encl. 2
HRW/JN

HRW

(L.M. Firth) Lt.-Colonel,
Administrator of Estates.



DEPARTMENT OF NATIONAL DEFENCE
- Naval Service -

Ottawa, Canada,

23 September, 1942.
.....
(Date)

P.A.

Sir:

The following casualty has been reported -

<u>NAME</u>	<u>RANK or RATING</u>	<u>NAVAL NO.</u>
<u>LUNDRIGAN, John</u>	<u>Stoker I</u>	<u>A-2985, R.C.N.R.</u>
<u>DATE OF ENLISTMENT</u> -	<u>21 November, 1940</u>	
<u>DATE OF DISCHARGE</u> -	<u>10 September, 1942</u>	
<u>HOSPITAL</u> -	<u>(If discharged in hospital under jurisdiction of D.P. & N.H.)</u>	
<u>SERVICE</u> -	<u>Canada and High Seas</u>	
	<u>(Indicate whether in Canada only; or in Canada and on high seas or elsewhere).</u>	

Reason for discharge and -
when and where any disability
was incurred; or where death
occurred.

"DEAD". Missing, believed lost at sea. He
was serving in H.M.C.S. "CHARLOTTETOWN" which
has been sunk as a result of enemy action.

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

NEXT OF KIN & RELATIONSHIP -

RELATIONSHIP Mother NAME Mrs. Catherine Lundrigan.
ADDRESS LORD'S COVE, Newfoundland.

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

OFFICER'S OR RATING'S MONTHLY PAY ALLOTTED TO WIFE AND/ OR DEPENDENT -

\$ N/L PAID TO N/L
MARRIAGE ALLOWANCE AT \$ N/L PER DIEM PAID TO - N/L
DEPENDENTS ALLOWANCE AT \$ N/L PAID TO N/L
TOTAL MONTHLY PAYMENT TO - WIFE \$ N/L

Computed by [Signature]
Checked by [Signature]

DEPENDENTS \$ N/L

[Signature]
SECRETARY,
NAVAL BOARD.

The Secretary,
The Canadian Pension Commission.

(See reverse side for further
instructions.)

Copy to: D.P. & N.H.

ACCOUNTS OF MEN DISCHARGED

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

Name Lundrigan, John Rating Sto I
 Official No. A2985 H.M.C.S. "Charlottetown" List 12/2/86
 Who* Discharged Dead on the 10th Sep p.m. 19 42

Net sum due on ledger on account of Wages.....	\$	89	cts. 91
Proceeds of sale of Effects charged against Wages, brought from the other side			
CASH—			
Proceeds of sale of Effects, paid for in Cash, brought from the other side.....	\$		cts.
Found amongst Effects.....			
Debts collected \$.....			
Cash debited in the Accountant Officer's Cash Acct.....			
If in debt in ledger, amount to be stated (in red ink).....			
Rate of allotment (in words) <u>Nil</u> charged to.....			
Name of ship from which transferred <u>"Charlottetown"</u>			
Total† <u>Creditor</u>		89	91

8

We hereby certify that we have every reason to believe that the above account contains a true statement of all wages, Effects, and other Credits or Debts on the Ledger of H.M.C.S. "Charlottetown" amounting to a net balance† Creditor of Eighty nine dollars Ninety one cents.

Dated on board H.M.C.S. "Stadacona" Div. II at Halifax,
Nova Scotia this Fifth day of October 19 42

Approved [Signature] Accountant Officer
 Pay/Sub/Lieutenant RCNVR for [Signature] { Initials of the Assistant Accountant Officer
 Commanding Officer.

For Use at Headquarters. \$.....cts..... credited on Inspector's certificate
 No..... to.....
 Signature.....
 Date..... 19.....

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

C.N.S. 46

10x-10-40 (7450)
H.Q. N.S. 816-9-45

Ledgers. P.
 [Signature]
 [Signature]

1055
A-2985 Pers. (N) (N-15)

Lord's Cove Newfoundland
July 3rd 1945

123-L-216 Dormant

051529

Dear Sir:—

I Received your letter referring to War Service Gratuity.

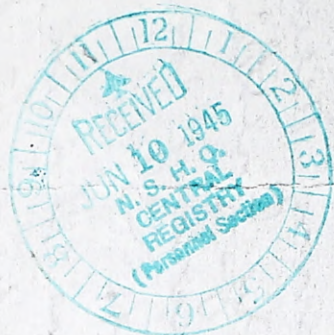
According to the Regulations of the War Service Grants Act. I feel that I am qualified to apply for the gratuity. Being the Mother and (next-of-kin) of the late John Lundrigan, Stoker I, and wholly dependent on him when he entered the Service, and partly dependent at the time of his death, having received an allowance each and every month up to that time, which I found necessary for the support of myself and little ones.

Hoping you'll receive this in due time
I Remain yours. Truly

Catherine Lundrigan

Lord's Cove
Newfoundland

NAVAL PERSONNEL RECORDS 12504
JUL 12 1945 WAR SERVICE GRATUITY SECTION



[Faint, illegible handwritten text, possibly bleed-through from the reverse side of the page.]

STATEMENT OF WAR SERVICE GRATUITY - NAVY

Deceased member's name

John LUNDRIGAN
(Christian Names) (Surname)

Payee *Mrs Catherine LUNDRIGAN*

Address *Lord's Cove, Newfoundland*

Register No. *12504*
File No. *A-2985*
Date *18/7/45*
Service No. *A 2985*
Final Rank or Rating *St 10*
Date of Discharge *10 Sept 42*

Date of termination of overseas service *10 Sept 42*

A. TOTAL QUALIFYING SERVICE
No. of days *659* equal to *21* complete periods at \$7.50
30 \$ 157.50

B. QUALIFYING OVERSEAS SERVICE
No. of days *90* less *29* ineligible days equal to *61* days @ 25¢ per day \$ 15.25

C. SUPPLEMENT FOR OVERSEAS SERVICE
DAILY RATES AT DISCHARGE

Pay	\$	<i>2.00</i>	
Subsistence or Lodging and Provision Allowance	\$	<i>1.45</i>	
Additional Pay <i>4.17</i>	\$	<i>25</i>	
Dependents' Allowance 1/30 of \$ <i>NIL</i>	\$		
Total		<i>3.70</i>	<i>x 7 = \$ 25.90</i>
No. of days		<i>90</i>	<i>x \$ 25.90 =</i>
		<u>183</u>	\$ 12.74

D. WAR SERVICE GRATUITY \$ 185.49

E. DEDUCTIONS

OVERPAYMENT OF PAY AND ALLOWANCES	\$	
DEPENDENTS' ALLOWANCE AND ASSIGNED PAY	\$	
OTHER DEDUCTIONS	\$	<i>NIL</i>

F. TOTAL AMOUNT PAYABLE \$ 185.49

G. YOUR PORTION OF GRATUITY IS

Dependents' Allowance in issue to you \$ _____ of \$ _____ = \$ *185.49*
Total Dependents' Allowance in issue \$ _____

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

Prepared by	Checked by	Treasury	
		Checked by	Date

Service Representative

D.N.P.A. CHECK

1 <i>mp</i>	6 _____
2 <i>mp</i>	7 _____
3 <i>mp</i>	8 _____
4 <i>mp</i>	9 _____
5 <i>mp</i>	10 _____

S/R

STATEMENT OF ACCOUNT

True extract from the ledger of H.M.C.S. " CHARLOTTETOWN " ending 30 Sep. 1942.

List 12/2 No. 86 (Name) MR LINDRIGAN, John Rank Rating Sto. I No. A-2985

When entered Former Book Date of appearance Whither discharged DISCHARGED X
DEAD

	\$	c.
CREDIT from former account.....	1111	
Pay as <u>Sto. I</u> from <u>1 July</u> to <u>30 Sep.</u> (<u>92</u> days at \$ <u>2.00</u> a day)	184.00	
" " " " " " " " " " " "		
" " " " " " " " " " " "		
" " " " " " " " " " " "		
Kit Upkeep Allowance <u>for July August and September</u>	10.00	
OTHER CREDITS <u>H.L.M. for period 1 July--10 Sep. 72 days.</u>	18.00	
<u>Grog money for period 1 July--10 Sep. 72 days.</u>	4.32	
Total credits.....	216.32	

DEBT from former account..... 1.41

PAYMENTS:—	INCLUSIVE DATE						
	1st	2nd	3rd	4th	5th		
	\$ c.	\$ c.	\$ c.	\$ c.	\$ c.		
1st month.....	63.00 (Ft. Ramsay #288, Vr #16)					Total.....	63.00
2nd month.....	62.00 (Ft. Ramsay #416)					Total.....	62.00
3rd month.....						Total.....	

Allotment..... N I L.

Pension deduction (Officers) charged to of

Hospital stoppages.....

Mulcts.....

OTHER CHARGES:.....

.....
.....
.....

Total debits 126.41

Balance ~~Cr~~ Dr. 89.91

(Balance Dr. to be shown in red)

Number of days actually victualled during period mentioned above 72 days.

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

Date 30 September 19 42

Wash
Pay Sub. Lieut. RCNVR. ACCOUNTANT OFFICER

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

Ledgers.

Pa.

F. Cuy

STATEMENT OF ACCOUNT

True extract from the ledger of H.M.C.S. " CHARLOTTETOWN " ending 30 Sep. 19 42

List 12/2 No. 86 (Name) ~~FR~~ LUNDRIGAN, John Rank Rating Sto. I No. A-2985

When entered Former Book Date of appearance Whither discharged DISCHARGED DEAD

	\$	c.
CREDIT from former account	////	
Pay as Sto. I from 1 July to 30 Sep. (92 days at \$ 2.00 day)	184.00	
" " " " " " " "		
" " " " " " " "		
" " " " " " " "		
Kit Upkeep Allowance for July August and September	10.00	
OTHER CREDITS: H.L.M. for period 1 July--10 Sep. 72 days.	18.00	
Grog money for period 1 July--10 Sep. 72 days.	4.32	
Total credits	216.32	
DEBT from former account		1.41
PAYMENTS:—		
1st 2nd 3rd 4th 5th		
\$ c. \$ c. \$ c. \$ c. \$ c.		
1st month 63.00 (Ft. Ramsay #288, Vr#16)	63.00	
2nd month 62.00 (Ft. Ramsay #416)	62.00	
3rd month		
Allotment		N I L.
Pension deduction (Officers) charged to _____ of _____		
Hospital stoppages		
Mulcts		
OTHER CHARGES:		
Total debits	126.41	
Balance Cr. XXXX	89.91	

(Balance Dr. to be shown in red)

Number of days actually victualled during period mentioned above 72 days.

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

Date 30 September 19 42

W. A. ...
Pay Sub. Lieut. RCNVR ACCOUNTANT OFFICER

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

Hedgers *R. Amy* *J. Guff*

Six copies to be rendered to Naval Service Headquarters

REPORT OF THE DEATH OF AN OFFICER, MAN OR BOY

H.M.C.S. Naval Service Headquarters at Ottawa

Name LINDRIGAN, John (Christian names in full)

Rank of Rating Stoker I Official No. A.2570 (If unknown, date of first entry)

Place of Birth Lord's Cove, Nfld. Date of Birth 26th January, 1921

Occupation in Civil Life Liverpool, Eng. Religion Roman Catholic

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) From 21st November, 1940 to 10th September, 1942.

Date of Death 10th of September, 1942 Place of Death At sea

Cause of Death Missing believed lost at sea. He was serving in H.M.C.S. "CHARLOTTETOWN" which has been sunk as a result of enemy action.

Nearest known relative or friend: Name Mrs. Catherine Lindrigan Relationship Mother Address Lord's Cove, Newfoundland.

Date on which the above was informed by Ship H.M.C.S. 12th September, 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, according to Nationality

Place of Burial (if known) Date of Burial (if known)

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

Undertaker employed (if any)

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

SECRETARY, NAVAL BOARD. The NAVAL SECRETARY, Department of National Defence, Ottawa, Canada.

Commanding Officer, 17th November, 1942. H.S. Money SECRETARY, NAVAL BOARD.

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.

MEMORANDUM FOR

P. 64

Mrs. Catherine Lundrigan,
Lord's Cove, Newfoundland.

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. 123-L-216 FD 284.

DEPARTMENT OF NATIONAL DEFENCE
OTTAWA, ONT.

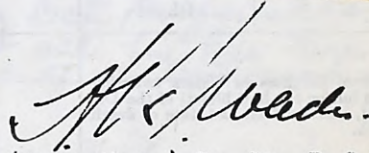
September 29, 1942

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

LUNDRIGAN John Stoker, 1

No. A.2985, R.C.N.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.



(H.R. Wade) Lt. Cdr-R.C.N.V.R.

for (L.M. Firth) Lt.-Col.,
Administrator of Estates.



ANSWER IN FULL ALL APPLICABLE QUESTIONS

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

Degree 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.....	Patrick Lundrigan	54	Lord's Cove Newfoundland	
4	Mother of the Deceased.....	Catherine Lundrigan	46	Lord's Cove Nfld.	
5	Brothers of the Deceased	Full Blood	James Lundrigan Douglas Lundrigan Kevin Lundrigan Gerald Lundrigan Patrick Lundrigan	20 19 5 4 2	" " " " " " " " " " " " " " "
		Half Blood			
6	Sisters of the Deceased	Full Blood	Bernadette Lundrigan	16	Lord's Cove Nfld.
		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?	John Lundrigan
11	Give the month and year of his birth.	January 1922 to 1922
12	Where and when were his parents married?	St. Lawrence Mfld. Nov. 16 ¹⁹²⁰
13	If deceased was married, state place and date of marriage.	
14	Did he leave a Will? If so, a copy should be attached hereto.	I don't know
15	Did he leave a bank account? If so, give full particulars.	I think he did. I have no ^{particulars}
16	Is there any other estate which will necessitate application being made for Probate of the Will or Letters of Administration of the estate?	No
17	State your own postal address in full.	Mrs Catherine Lundrigan Lord's Cove Burin Newfoundland

PARTICULARS OF DOMICILE

18	Where was deceased born?	Lord's Cove Newfoundland
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.	Burin Dist. Newfoundland. he spent all his life here. up to the time of enlistment in Nova Scotia
20	What was the nature of his employment?	Part time fishing & farming
21	Did he own the premises in which he lived? If so, where?	Yes. Lord's Cove
22	Did he ever state verbally, or in writing, where he intended to make his permanent home?	No.

OTHER PARTICULARS

23	Did the deceased after enlistment incur any debts for:— (a) His own separate board and lodging while on service. (b) Service clothing and equipment. An itemized account for each such debt should be attached hereto, and if same is correct you should mark the bill "approved" and sign same. If believed incorrect, give particulars.	I don't know
24	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. (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.)	

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

* Motherof the deceased.

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

Catherine Lundugan } Signature of Informant
Lord's Cove Newfoundland

CERTIFICATE

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

*See above

Lundugan { Name of Informant } is the * Motherof 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 Lord's Cove this 17th day of October 19 42

Signature of Clergyman, Priest, Magistrate, Commissioner or Notary Public

} A. Thorne Qualification Pastor

Address St. Lawrence

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

DECEASED 10 September 1942

DEPARTMENT OF VETERANS AFFAIRS

AWARDS **NAVY**

D.D.

WAR SERVICE RECORDS

LUNDRIGAN	John	A-2985	Sto. 1	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
C.V.S.M. & Clasp	1472		18-10-49
War Medal			

(THE REVERSE TO BE USED FOR ESTATE PURPOSES)

RNCR
HMCS "CHARLOTTETOWN"

MEDALS AND MEMORIALS—DECEASED PERSONNEL

REGISTRATION No. DATE OF DESPATCH

(1) MEDALS
PERSON
ENTITLED TO Mr. Patrick Lundrigan - Father

ADDRESS: Lord's Cove,
Newfoundland.

(2) MEMORIAL CROSS
WIDOW

ADDRESS:

(3) MEMORIAL CROSS
MOTHER Mrs. C. Lundrigan

ADDRESS: Lord's Cove
Nfld

(1)	MEMORIAL BAR
	DATE DESP.....
	REGN. NO 50.....
(2)	

(3) 25 November 1942