

V2703  
GARLAND

JOHN

CHARLI

MEDALS AND MEMORIALS—DECEASED PERSONNEL

RCNVR May 43 "CHARLOTTETOWN"

REGISTRATION No. DATE OF DESPATCH

(1) MEDALS

PERSON

ENTITLED TO Mr. Warwick C. Garland - Father

(1)

ADDRESS: ~~GALLAGHER RIDGE, West Co., N.B.~~ R. R. #3  
SALISBURY, N.B.

(2) MEMORIAL CROSS

WIDOW

(2)

ADDRESS:

(3) MEMORIAL CROSS Original to Gallagher Bidge, West Co., N.B.

MOTHER

Mrs. Annie K. Garland,

(29-3-50) (25.11.42)

*Repl. of Max*  
DESP. DEC 6 1951

REGN No. 2089

WSR47

R.R. #3,  
Salisbury, N.B.

*(replacement)*

ADDRESS:

MEMORIAL BAR

DATE DESP.....

REGN. NO. 542



DEPARTMENT OF VETERANS AFFAIRS

11-29-42 DECEASED

## AWARDS NAVY

WAR SERVICE RECORDS

D.D.

GARLAND	John Charlie	O/Smn.	V-2703	FILE No.
SURNAME (IN BLOCK LETTERS)	CHRISTIAN NAMES	REG. No.	RANK ON DISCHARGE	C.A.S.F. UNIT

WAR SERVICE

BADGE

CLASS)

No. Nil

DATE DESPATCHED:

ADDRESS:

CAMPAIGN MEDALS	REGISTRATION NUMBER AND DATE DESPATCHED
1939-45 Star	
Atlantic Star	
C.V.S.M. & Clasp	
War Medal	
	9943

(THE REVERSE TO BE USED FOR ESTATE PURPOSES)



V2703

OFFICIAL NUMBER

FILE NUMBER

113-G-808

OFFICIAL NUMBER V2703

NAME GARLAND John Charlie DATE OF BIRTH 22 August 1917  
(Surname) (Given Names)PLACE OF BIRTH Beaver Brook N.B. OCCUPATION LabourerRELIGION Baptist EDUCATIONRESIDENCE AT TIME OF ENLISTMENT: Street and No. 55 Thorne Avenue Town Saint John Province, etc. N.B.

Date (in figures)			Period	DESCRIPTION					PREVIOUS SERVICE		
Day	Month	Year		Height	Hair	Eyes	Complexion	Marks or Scars	Served in	Rank or Rating	Dates
										From	To
4	3	41	H.O.	5'6 1/2"	Brown	Grey	Ruddy	Nil			

NEXT OF KIN RELATIONSHIP (in pencil) Wife NAME (in pencil) Mrs Annie X Garland  
ADDRESS (in pencil): Street and No. Hallagher Ridge Town Saint John Province, etc. N.B.

Date (in figures)			Particulars	EXAMINATIONS, CERTIFICATES, ETC.				
Day	Month	Year		Date (in figures)	Particulars			Particulars
			Day	Month	Year			
			2	8	41	Marked 'TR'	S249A603	

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		
					HMCS STADACONA	526	13	11	41	Disobedience	14 days' cells

Date (in figures)			DAYS FORFEITED						O.H.F. Received
Day	Month	Year	Prison	Det'n	Cells	C. Power	W. Trial	In diff. Char.	
13	11	41			14				

SECOND CLASS FOR CONDUCT  
From To

FILM  
NO. 5164-3  
DATE



V2703

OFFICIAL NUMBER

NAME GARLAND  
(Surname)

John Charlie  
(Given Names)

OFFICIAL NUMBER V2703

Ship or Establishment	Rating	From			Remarks	Character	Efficiency	Date			Non-Sub. Rating	Qualified			Re-Qualified		
		Day	Month	Year				Day	Month	Year		Day	Month	Year	Day	Month	Year
Div. Str. St. John	Ord. Smn.	4	3	41		Good.	Sat.	31	12	41							
Duty Div. Hdqtrs. Stadacona	" "	30	4	41		V.G.	Sat.	10	9	42							
Hochelaga 11	" "	19	6	41													
Charlottetown.	" "	3	12	41													
<u>DISCHARGED</u>	" "	12	12	41													
		10	9	42	"Missing, believed killed in action".												

GENERAL REMARKS

X-ray App.  
 AWARDED Memorial Cross:  
 MOTHER: Mrs Annie K. Garland,  
 Gallagher Ridge,  
 West County, N.B.

22	8	17	15	900	0	60	5	11	0	1	0	02	0	08	95		
04	0	3	41	30	04	41								1740	0	08	95
30	04	41	19	00	00	20				10-09-42				SANB			



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

NAME IN FULL ... G.P. BLAND, John Charles ... RANK/RATING ... Ord. Surgeon ... OFF. NO. ... V 2703 ... ADDRESS .....

SHIP	SERVICE			AREA	QUALIFYING PERIODS IN DAYS					STARS MEDALS	✓ 1 2	ELIGIBLE FOR AWARDS OF		
	FROM	TO	DAYS		FROM	TO	1939-45	ATLANTIC	DEFENCE				CLASP C.V.S.M.	1915 MEDAL
<u>Saint John Mission</u>	<u>30/4/41</u>	<u>17/6/41</u>	<u>49</u>									<u>1939-45</u>	<u>1</u>	<u>Star</u>
<u>Co. Harlestone</u>	<u>13/12/41</u>	<u>10/9/42</u>	<u>272</u>	<u>atlantic</u>								<u>ATLANTIC</u>	<u>1</u>	<u>Star</u>
<u>Discharged "Head"</u>												<u>FRANCE G.</u>		
<u>to date 10/9/42</u>												<u>AFRICA</u>		
												<u>PACIFIC</u>		
												<u>BURMA</u>		
												<u>ITALY</u>		
												<u>DEFENCE</u>		
												<u>C.V.S.M.</u>	<u>2</u>	<u>@ clasp</u>
												<u>" CLASP</u>		
												<u>WAR 1945</u>	<u>1</u>	<u>Medal</u>
												<u>WAR 1915</u>		

VERIFIED BY J. Robert...

VERIFIED BY Georgette Senard...

VERIFIED BY .....

DIR. OF PERSONNEL RECORDS.



# TRUE COPY

OF THE

## CERTIFICATE of the Service of

The corner of this Certificate is to be cut off if the man is discharged with a "Bad" character or with disgrace, or if specially directed by the Department of National Defence (Naval Service). If the corner is cut off, the fact is to be noted in the Ledger.

*John Charles GARLAND*

IN THE ROYAL CANADIAN ~~NAVY~~ NAVAL VOLUNTEER RESERVE

Official Number *V-2703*

Date of birth <i>22nd August 1917</i>	Nearest known Relative or Friend (To be noted in pencil)
Where born { Province <i>New Brunswick</i>	Name: <i>Mrs Annie K. Garland</i>
{ Town or county <i>Beaver Brook, Albert Co.</i>	Relationship: <i>Mother</i>
Trade brought up to <i>Labourer</i>	Address: <i>Gallagher Ridge,</i>
Religious denomination <i>Baptist</i>	<i>Dist. Co. N.B.</i>
Date passed swimming test	
Man's signature on discharge to pension }	

**All Engagements, including N.C.S., to be noted in these Columns**

Date of actually volunteering	Commencement of time	Period volunteered for	Date of actually volunteering	Commencement of time	Period volunteered for
<i>18th Feb. '41</i>	<i>4th Mch. '41</i>	<i>Duration of Hostilities</i>	5.		
2.			6.		
3.			7.		
4.			8.		

**Medals, Clasps, Etc.**

Date received or forfeited	Nature of decoration	Date received or forfeited	Nature of decoration

Description of Person	Stature		Chest, In.	Colour of			Marks, Wounds and Scars
	Feet	In.		Hair	Eyes	Complexion	
On entry as a boy.....							
On advancement to man's rating or on entry under 28 years.....	<i>5</i>	<i>6 3/4</i>	<i>36 1/2</i>	<i>Brown</i>	<i>Grey</i>	<i>Ruddy</i>	<i>Nil.</i>
On re-entry for C.S. or for Non-C.S. after attaining 28 years.....							
Further description if necessary.....							















H.M.G.S. ".....

STADACONA

113-5-808, 23  
1942  
CANADA

Warrant No. 526, dated 13<sup>th</sup> November 1941

[The Warrants are to be numbered consecutively from the Date of the Ship being commissioned.]

For ..... CELLS .....

(a) WHEREAS it has been represented to me by  
ACTING COMMANDER ERNEST PATRICK TISDALL, ROYAL CANADIAN NAVY

that on the 10th day of November 1941,

Name..... John Charlie GARLAND

Date of Birth..... 22nd August, 1917

Rating..... Ordinary Seaman, Royal Canadian Naval Volunteer Reserve

Official Number..... V.2703

Good Conduct Medal..... Nil

Good Conduct Badges..... Nil

Date of Entry in Ship..... 18th June, 1941

List and Number on Ship's Book..... 5II/23625

Date of First Entry in H.M. Service..... 4th March, 1941

Class for Conduct..... First

Character assessed to date, from the last annual assessment, but not including this offence  
..... Very Good

Class for Leave..... First

Did [Insert full particulars of Offence.] Did wilfully disobey the lawful command of Sub Lieutenant Edward Ross O'KELLY, Royal Canadian Naval Volunteer Reserve, his superior officer, when ordered to muster his kit.

I do hereby adjudge him the said John Charlie GARLAND

Insert below in the proper columns the particulars of the punishment.

†To be imprisoned in			†To be kept in detention in		Confined in Cells on Board		Disrated to	Deprived of Medal	Deprived of Badges, No.	Whether reduced to 2nd Class for Conduct	Days				Whether Reduced to Lower Class for Leave	Grog stopped Days	Other Punishments
Name of Gaol*	For Days	With Days H.L.	Name of Place of detention*	For Days	No. of Days	Diet					10	15	Leave stopped	Pay forfeited			
-----	-----	-----	-----	-----	14	First three low	-----	-----	-----	No	-----	-----	-----	No	-----	-----	

\*The name of the place of confinement is not to be filled in when the Officer ordering the imprisonment or detention is in the presence of a Commander-in-Chief or Senior Officer (see Article 770, Clause 2).  
†See page 4 for proposal to award imprisonment, detention or disrating.

C.N.S. 271  
10M-7-40 (5921)  
N.S. 815-9-271

Noted in Service  
Records by.....



Before awarding the foregoing punishment, (b) I did, on the 12th day of November, 1941 personally and publicly, in the presence of the Accuser and Accused, investigate the matter, and having heard the evidence of

**ACTING COMMANDER ERNEST PATRICK TISDALL, ROYAL CANADIAN NAVY**  
**SUB LIEUTENANT EDWARD ROSS O'KELLY, ROYAL CANADIAN NAVAL VOLUNTEER RESERVE**  
and  
**SUB LIEUTENANT JACK BENTLEY, ROYAL CANADIAN NAVAL VOLUNTEER RESERVE**

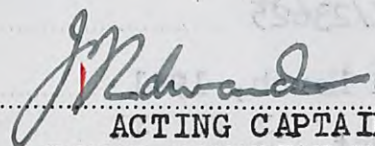
in support of the charge as well as what the Accused had to offer in his defence, ~~and the evidence of xxx~~

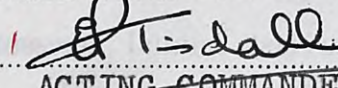
he calling no one

~~who has been~~ on his behalf, I consider the charge to be substantiated against him, and [taking into consideration that this is the Third Offence registered against him in the Conduct Book or Conduct Sheet], I adjudge him to be punished as aforesaid (d).

Given under my hand on board His Majesty's Canadian Ship "STADACONA" at

Halifax, Nova Scotia, the 13<sup>th</sup> day of November 1941

  
..... Captain.....  
**ACTING CAPTAIN,**  
**ROYAL CANADIAN NAVY.**

  
..... {Signature and Rank  
of Complainant  
**ACTING COMMANDER,**  
**ROYAL CANADIAN NAVY.**

NOTE.—No avoidable delay should take place in the investigation of the complaint, or in the prompt infliction of the punishment after the investigation is completed. If any substantial delay has taken place the reason thereof is to be stated in the space below.

(a) When the Offence has been committed under the immediate observation of the Captain, the Warrant should run—"Whereas I did observe—"

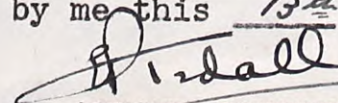
(b) If the Offence has been committed under the immediate observation of the Captain, the Warrant should run thus:—  
"I did, on the \_\_\_\_\_ day of \_\_\_\_\_, in presence of (*insert name of Executive Officer, or of the Watch, as the case may be*), and having heard what the Accused had, etc.—"

(c) If the Accused does not call any witnesses the fact should be stated.

(d) If the man is sentenced to imprisonment or detention, and there is not a proper place of confinement to which he can be sent at once, and if it is not intended to keep him in close custody on board until a proper place of confinement is available, the following words are to be added:—  
"The said imprisonment (*or* detention) to take effect from the date on which he is received into a proper place of confinement, subject to the provisions of Section 74, Clause 2, of the Naval Discipline Act."

NOTE.—When under the sanction of the Regulations of the Service, two or more of the foregoing punishments are awarded to the same individual for the same Offence or Offences, one Warrant will suffice; but the greatest care is to be taken in all cases to specify distinctly the nature, duration, or extent of the Punishment ordered.

Warrant number 526 dated and read by me this 13<sup>th</sup> day of November, 1941.

  
.....  
**ACTING COMMANDER,**  
**ROYAL CANADIAN NAVY.**



FORMER OFFENCES

[Enter in 1st Warrant for any Man in each quarter, all Offences during the last 6 months (if he has been in Ship); for any previous time only Offences punished by Warrant. If a Man is punished by Warrant more than once in any quarter, only Offences committed after date of 1st Warrant need appear, a reference being given to date of 1st Warrant.]

No. of Punishment.....	3	4	6	7	8	9	10	11	12	13	14	15	16	17	18	19	
Nature of Offence	Date of Punishment 19	No. of Days Imprisoned, specifying whether with or without Hard Labour	No. of Days detention	Disrated to	Deprived of Medal or Badges—No.	Whether Reduced to 2nd Class for conduct	No. of Days confined in Cell on Board, specifying Diet	Extra Work—14 days	Leave stopped	Reduction to a Lower Class for Leave	Pay forfeited for improper Absence	Grog stopped	Extra Work or Drill—7 days	Reprimand by Captain	Extra Guard (Marines only)	Birching (Boys only)	Cuts with a cane
								Days	Days	Days	Days	Days	Days	Days	Days	Days	Days
8th October, 1941																	
I. Was drunk on shore at 2325 being apprehended by the Naval Shore Patrol in Camilles Lunch on Barrington Street, Halifax, Nova Scotia.																	
II. Was improperly dressed whilst on short leave, namely, by wearing no jumper collar and silk.																	
	14							3			1						
	October																
	1941																

Examined and found medically fit to undergo the punishment awarded.

13 November, 1941. *Sr. Reford Surgeon*



H.M.C.S. ....

.....19.....

I beg to submit that the offence disclosed on page 1 hereof may be dealt with summarily.

If you approve, the following sentence is considered suitable:—

King's Regulations.  
Art. 707 (1).

\* ..... { days { Imprisonment with hard labour } in  
\* ..... { calendar months { Detention }

addition to the other punishments indicated.

Art. 776 (2).

To be disgraced to ..... in

addition to the other punishments indicated.

Art. 752 (2).

\*As indicated on page 1.

2. The Accused's Service Certificate and Conduct Sheet are enclosed.

I am,

SIR,

Your Obedient Servant,

\*To be struck out when not applicable.

Remarks as to any excess, undue leniency, or irregularity in the above proposals:—

Approved.

Signature .....

The Officer Commanding

Rank

H.M.C.S. ....

When the necessary approval has been obtained, the particulars should be entered on page 1 of the Warrant, which should then be dated and read to the offender (see Arts. 754 (1) and 755 of the King's Regulations) without any unnecessary delay.





CANADA

P 28220

N. V. 5

25M-9-40 (6793)  
N.S. 815-11-5

DEPT.  
NATIONAL DEFENCE

MAR 10 1941

N.S. 113-8-808  
CANADA

# ATTESTATION FORM (HOSTILITIES FORM)

FOR MEN OF THE ROYAL CANADIAN NAVAL VOLUNTEER RESERVE

SURNAME Garland OFFICIAL NO. V2703

CHRISTIAN NAMES John Charles (S.D.) MARRIED, SINGLE OR WIDOWER S  
CHARLIE RBE.

PERMANENT ADDRESS 55 Thome Avenue Saint John N.B. RELIGION Baptist

DATE OF BIRTH	*PLACE OF BIRTH	NAME AND ADDRESS OF NEXT OF KIN
<u>22 August, 1917</u>	Town <u>Beaver Brook</u> County <u>Albert</u> Province <u>N.B.</u>	<u>Annie K. Garland</u> <u>Petitcodiac N.B.</u> <u>"Mother"</u>
*Original Nationality of: Father <u>Canadian</u> Mother <u>"</u>		

Correct  
AK

\*If not the son of natural born British parents, particulars to be given at foot of next page.

## PERSONAL DESCRIPTION ON ENROLMENT

HEIGHT	CHEST MEASUREMENT	HAIR	EYES	COMPLEXION	WOUNDS, SCARS, MARKS
Feet..... <u>5</u>	Inflated..... <u>38</u>	<u>Brown.</u>	<u>Grey</u>	<u>Ruddy</u>	<u>Nil</u>
Inches..... <u>6.75</u>	Deflated..... <u>35</u>				
Mean..... <u>36.5</u>					

DATE OF ENROLMENT	RATING ENROLLING FOR	TRADE OR CALLING AND IN WHOSE EMPLOY
<u>4th March 1941</u>	<u>Ordinary Seaman</u>	<u>labourer,</u>
R.C.N.V.R. Division (or other establishment) at which enrolled..... <u>Saint John</u>		

## (B) DECLARATION TO BE MADE BY APPLICANT

I hereby declare as follows:—

- (1) That I am a British Subject domiciled in Canada.
- (2) That I am desirous of being enrolled as a member of the Royal Canadian Naval 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.

\* (b) I served in ..... for the period shown, and attach my record of service, in corroboration of this statement.

\*Cross out Clause not applicable.

SERVED IN	RANK	FROM
/	/	/

Personal Records Division.	
1. Noted in Records.....	<u>LL</u>
2. Index Card.....	<u>LL</u>
3. Non-Sub. Card.....	<u>LL</u>
4. Statistical Card.....	<u>LL</u>
5. Roneo Strip.....	
6. Pension Card.....	
7. ....	
8. ....	
DATE	<u>15-3-41.</u>

(c) I have never been rejected for or discharged 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.



(3) On being enrolled as a member of the Saint John Division of the Royal Canadian Naval Volunteer Reserve, I undertake to bind myself:—

(a) To serve from the date thereof for the duration of hostilities, 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 Divisional 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.

(d) To undergo vaccination or re-vaccination, or inoculation, as considered necessary by the appropriate authorities.

Dated this 4th day of March 1941

Signature of applicant John Charlie Garland

(C) CERTIFICATE OF ATTESTING 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 4th day of March 1941

Paul B. Cross  
Signature of and rank of Attesting Officer.  
Cdr VR (Temp)

(D) OATH OF ALLEGIANCE

I, John C. Garland do sincerely promise and swear (or solemnly declare) that I will be faithful and bear true allegiance to His Britannic Majesty, His heirs and successors according to law.

Signature of Applicant John Charlie Garland

Witness Paul B. Cross

Date 4th March 1941 Rank Cdr VR (Temp)

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

(E) CERTIFICATE OF ATTESTING OFFICER

John C. Garland having been duly enrolled to serve in the Royal Canadian Naval Volunteer Reserve Force, I have caused his name and every prescribed particular to be recorded in the Record Book of the Saint John Division of the R.C.N.V.R. or in the appropriate official documents.

Paul B. Cross  
Attesting Officer Cdr VR (T)

4th March 1941 R.C.N.V.R. Division (or other establishment) Saint John

NOTE.—This form when completed and when the particulars on it have been noted in the Divisional 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.



36

# 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... GARLAND, JOHN C. Rating... O/SMN  
Official No. V2703 H.M.C.S. Charlottetown List 12/2/8  
Who\* Discharged Dead on the 30th Sep. p.m. 19 42

Net sum due on ledger on account of Wages.....	\$ 16	cts. 37	Dr.
Proceeds of sale of Effects charged against Wages, brought from the other side <i>Less Allotments recovered for September by H. 6075211</i>			<i>26.21</i> Dr.
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) <i>Nineteen dollars</i> charged to <i>31. Aug.</i>			
Name of ship from which transferred <i>Seven dollars twenty one cents</i>			
Total†.....			<i>Creditor Debiton</i> <del>16 37</del> <i>9 24</i> Dr.

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... ~~Sixteen~~... dollars... ~~thirty seven~~... 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  
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. 815-9-45

*Relys etc.* *[Signature]* *[Signature]*











MEMORANDUM FOR

P. 64

Mrs. Annie K. Garland,  
Gallagher Ridge,  
West County, N.B.

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

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

and the following number quoted:—

H.Q. N.S. 113-G-808 FD.281.

DEPARTMENT OF NATIONAL DEFENCE  
OTTAWA, ONT.

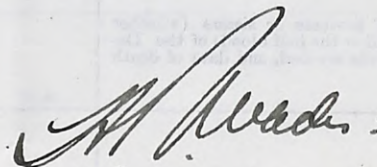
September 29, 1942.

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

GARLAND, John Charlie, Ord. Seaman.

No. V-2703 R.C.N.V.R.

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



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





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

Degrees of Relationship	RELATIVES required to be accounted for	INFORMANT'S STATEMENT		
		NAME IN FULL of any Relative, if any, in each degree inquired for	Age	ADDRESS IN FULL of each surviving Relative, opposite his or her name, and date of death of each deceased relative
1	Widow of the Deceased.....			
2	Children of the Deceased and dates of their Births.....			
3	Father of the Deceased.....	Warrick C. Garland	52	Gallagher Ridge Westmorland Co. N.B.
4	Mother of the Deceased.....	Annie K. Garland	50	Gallagher Ridge, West. Co. N.B.
5	Brothers of the Deceased	Full Blood G. William L. Garland, G50886 Neil Atzel Garland Henry Edmund Garland	20 16 13	Petewawa, military Camp, Moncton, N.B. Gallagher Ridge West. Co. N.B.
		Half Blood		
6	Sisters of the Deceased	Full Blood Elena J. Garland Ferne A. Garland	23 22	Moncton N.B. Moncton N.B.
		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 Charlie Garland.
11	Give the month and year of his birth:	August 22, 1917
12	Where and when were his parents married?	Moncton, Sept 3, 1916.
13	Was he ever married? If so, state exact place and date of marriage.	no
14	Did he leave a (later) Will? If so, it should be forwarded.	no
15	Is there any other estate which will necessitate application being made for Probate or Letters of Administration?	no

PARTICULARS OF DOMICILE

16	Where was deceased born?	Albert Co, N.B.
17	In what Province, Country or State did he reside, and in which last?	New Brunswick
18	How long in each?	
19	What was the nature of his employment?	Farming, Lumbering.
20	Did he own the house or homestead in which he lived? If so, where?	no
21	Did he ever state verbally, or in writing, where he intended to make his permanent home?	no
22	State <u>your</u> postal address in full.	L Gallagher Ridge Westmorland Co, N.B.

PARTICULARS AS TO CLAIMS

23	Have the funeral expenses been paid? If so, by whom?	
24	Are there any outstanding claims against the estate? If so, furnish full name and address of each Creditor in this space and enclose his Bill of Account. (See Note Below).	

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 of relationship, for example "Widow," "Father," "Brother," etc.

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

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

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

Annie Katherine Garland

{Signature of Informant

CERTIFICATE

I hereby certify that, to the best of my knowledge and belief Annie Katherine Garland

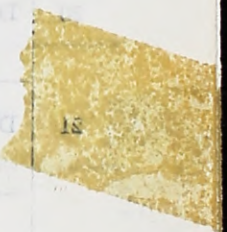
\*See above ..... {Name of Informant} is the \* Mother .....of the Deceased above described, and I believe the above Declaration and the Statement of Relatives made by the Informant and signed in my presence to be complete and correct.

Dated at Moncton this 9th day of October 1942

Signature of Clergyman, Priest or Magistrate } [Signature] Qualification J. P.

Address 58 Avenue St Moncton N.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 of each surviving Relative enquired after is stated in its proper place in the Statement opposite.







Department of National Defence  
Naval Service

IN REPLY PLEASE QUOTE  
No. N.S. 113-G-808.

Ottawa, Canada.

230898

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 &amp; CAUSE of DEATH</u>	<u>NEXT OF KIN</u>
GARLAND, John Charlie Ordinary Seaman, V-2703, R.C.N.V.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. Annie K. Garland, Gallagher Ridge, West County, N.B.

ALLOTMENTS IN FORCE

<u>In favour of:</u>	<u>Amount</u>	<u>Initials.</u>
Mrs. Annie K. Garland, Gallagher Ridge, West County, N. B.	\$19.00	L.D.
Receiver General of Canada, Second Victory Loan, Ottawa, Ontario.	\$7.21	L.D.

WILL: No record.

Yours truly,

*Handwritten signature*  
24/9/42

*Handwritten signature*  
SECRETARY, NAVAL BOARD.

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



4  
NAVY

DEPARTMENT OF NATIONAL DEFENCE  
ID NAVY                      ARMY                      AIR FORCE  
STATEMENT OF WAR SERVICE GRATUITY

DECEASED  
MEMBER'S  
NAME

John Charlie  
(CHRISTIAN NAMES)

GARLAND  
(SURNAME)

REGISTER NO. 9804

FILE NO. NSV-2703

DATE 13 June/45

PAYEE Mrs. Annie K. Garland,  
ADDRESS R.R. #3, Salisbury, N.B.

SERVICE NO. V-2703

FINAL RANK OR RATING Ord. Smn.

DATE OF TERMINATION OF OVERSEAS SERVICE 10 Sep/42

DATE OF DISCHARGE 10 Sep/42

A. TOTAL QUALIFYING SERVICE

NO. OF DAYS 485 EQUAL TO 16 COMPLETE PERIODS AT \$7.50

\$ 120.00

B. QUALIFYING OVERSEAS SERVICE

NO. OF DAYS 272 LESS 5 INELIGIBLE DAYS, EQUAL TO 267 DAYS @ 25c. PER DAY

66.75

C. SUPPLEMENT FOR OVERSEAS SERVICE

DAILY RATES AT DISCHARGE

PAY \$ 1.50  
SUBSISTENCE OR LODGING AND PROVISION ALLOWANCE \$ 1.45  
ADDITIONAL PAY H.L.M. \$ .10

DEPENDENTS' ALLOWANCE 1/30 OF \$

TOTAL \$ 3.05 x 7 = \$ 21.35  
NO. OF DAYS 267 x \$ 21.35

31.15

D. WAR SERVICE GRATUITY

217.90

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

OTHER DEDUCTIONS \$

NIL

F. TOTAL AMOUNT PAYABLE

217.90

G. YOUR PORTION OF GRATUITY IS—

DEPENDENTS' ALLOWANCE IN ISSUE TO YOU \$ \_\_\_\_\_ OF \$ \_\_\_\_\_  
TOTAL DEPENDENTS' ALLOWANCE IN ISSUE \$ \_\_\_\_\_

= \$ 217.90

*Cheque 28854 - 25/6-45*

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 EP R.J. [Signature]	CHECKED BY Ray. [Signature]	TREASURY
		DATE 19-6-45

SERVICE REPRESENTATIVE

for Dir. Naval Pay. Accting.



Six copies to be rendered to Naval Service Headquarters

# REPORT OF THE DEATH OF AN OFFICER, MAN OR BOY

42

~~HMCSK~~ Naval Service Headquarters at Ottawa

Name GARLAND, John Charlie  
(Christian names in full)

Rank of Rating Ordinary Seaman Official No. V-2703, R.C.N.V.R.  
(If unknown, date of first entry)

Place of Birth Beaver Brook, Albert, N.S. Date of Birth 22 August, 1917.

Occupation in Civil Life Labourer Religion Baptist

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 30th April, 1941 to 10th September, 1942.

Date of Death 10th 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.  
(If due to accident, violence, or enemy action, particulars to be stated briefly)

Nearest known relative or friend { Name Mrs. Annie K. Garland Relationship Mother  
Address Gallagher Ridge, West County, N.S.

Date on which the above was informed by Ship HMCSK Naval Service Headquarters, 13th Sept. 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..... Date of Burial.....  
(if known) (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,~~  
18th November, 1942  
*H.B. Money*  
for  
~~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.



DEPARTMENT OF NATIONAL DEFENCE  
- Naval Service -

Ottawa, Canada,

... 23 September, 1943 ...  
(Date)

Sir:

The following casualty has been reported -

<u>NAME</u>	<u>RANK or RATING</u>	<u>NAVAL NO.</u>
<u>GARLAND, John Charlie</u>	<u>Ordinary Seaman</u>	<u>V-2703, R.C.N.V.R.</u>
<u>DATE OF ENLISTMENT</u> -	<u>4 March, 1941. Active Service - 30 April, 1941.</u>	
<u>DATE OF DISCHARGE</u> -	<u>10 September, 1943</u>	
<u>HOSPITAL</u> -	<u>(If discharged in hospital under jurisdiction of D.P. &amp; 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. Annie K. Garland,  
ADDRESS Gallagher Ridge, West County, N.B.

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 -  
\$ 19.00 PAID TO Mother (stop Sept 30/43)  
MARRIAGE ALLOWANCE AT \$ Nil PER DIEM PAID TO - Nil  
DEPENDENTS ALLOWANCE AT \$ Nil PAID TO Nil  
TOTAL MONTHLY PAYMENT TO - WIFE \$ Nil

Computed by SD DEPENDENTS \$ 19.00  
Checked by AM

R. A. ...  
SECRETARY,  
NAVAL BOARD.

The Secretary,  
The Canadian Pension Commission.

(See reverse side for further  
instructions.)

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



30

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 &amp; CAUSE of DEATH</u>	<u>NEXT OF KIN</u>
GARLAND, John Charlie Ordinary Seaman, V-2703, R.C.N.V.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. Annie K. Garland, Gallagher Ridge, West County, N.B.

ALLOTMENTS IN FORCE

<u>In favour of:</u>	<u>Amount</u>	<u>Initials.</u>
Mrs. Annie K. Garland, Gallagher Ridge, West County, N. B.	\$19.00	L.D.
Receiver General of Canada, Second Victory Loan, Ottawa, Ontario.	\$7.21	L.D.

WILL: No record.

Yours truly,

*R. A. Robertson*  
SECRETARY, NAVAL BOARD.

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



27

13th September, 1942.

Dear Madam:

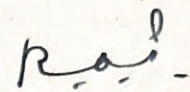
It is with deep regret that I must confirm the telegram of the 12th September from the Minister of National Defence for Naval Services, informing you that your son, John Charlie Garland, Ordinary Seaman, R.C.N.V.R., O.N. V. 2703 is missing believed lost at sea.

The ship in which your son was serving has been sunk as a result of enemy action and your son is missing and must be presumed killed.

It is for the public interest that the name of his ship and the fact that she has been sunk should not find its way to the enemy until such time as it is decided to publish the fact in a Naval Casualty List. It is therefore requested that this news, other than the fact that your son is missing, may be treated as confidential.

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

Yours sincerely,



Secretary, Naval Board.

Mrs. Annie K. Garland,  
Gallagher Ridge,  
West County, N.B.



# OCCUPATIONAL HISTORY FORM

113-4-808

THIS FORM IS TO BE COMPLETED FOR EACH MEMBER OF THE ARMED FORCES. THE INFORMATION SOUGHT IS FOR THE USE OF GENERAL ADVISORY COMMITTEE ON DEMOBILIZATION AND REHABILITATION, A COMMITTEE SET UP BY THE GOVERNMENT OF CANADA TO STUDY PLANS FOR ESTABLISHING IN INDUSTRIAL LIFE THE MEMBERS OF THE ARMED FORCES, AFTER DISCHARGE. ACCURACY AND COMPLETENESS IN ANSWERING WILL BE OF MUCH HELP TO THE COMMITTEE.

PLEASE READ CAREFULLY THE INSTRUCTIONS GIVEN ON THE INSIDE OF COVER BEFORE COMPLETING FORM

## Section A—GENERAL INFORMATION

1. (a) Print name in full GARLAND, JOHN CHARLES (b) Reg'l. No. V-2703  
2. (a) Arm of service NAVY (b) Unit SAINT JOHN DIVISION (c) Rank CRD: SMN  
3. (a) Date of birth 22 Aug 1917 (b) Have you any dependents? No (c) Place of residence at time of enlistment PELITADIA NB.  
4. (a) Place of enlistment SAINT JOHN NB. (b) Date of enlistment 30 Apr 1941

PLEASE LEAVE BLANK

15

## Section B—EDUCATION AND TRAINING

5. (a) State age on finally leaving school 17 yrs (b) Were you attending school or college up to the time of enlistment? No  
6. State definitely highest standing reached at public, technical or high school (for instance—"4 years, Public School", "two years, High School", "Junior Matriculation", or "4 years technical course in printing", etc.) Grade IX High  
7. If you attended a university, give name of university and standing or degree secured No  
8. (a) Did you ever enter upon a trade apprenticeship? No (b) If so, for what occupation? No (c) Did you finish it? No (d) If you did not finish it, how long did you serve at it? No  
9. (a) What languages do you speak fluently? English (b) What languages do you read well? English

## Section C—EMPLOYMENT CONDITION AT TIME OF ENLISTMENT

10. (a) State whether you were WORKING or NOT WORKING at time of enlistment. (Enter here only "Working" or "Not Working", as case may be; particulars are asked for below) Working (b) At time of enlistment of what trade union or professional society were you a member? No

## Section D—PARTICULARS CONCERNING THOSE WHO WERE UNEMPLOYED AT TIME OF ENLISTMENT

QUESTIONS 11 TO 17 REFER ONLY TO THOSE WHO ANSWER "NOT WORKING" IN QUESTION 10 (a)

11. Had you ever been employed fairly regularly since leaving school? No  
12. (a) If answer to 11 be "Yes", state exact trade or occupation at which you actually worked. No (b) State how long you had worked at this trade or occupation. No  
13. If answer to 11 be "No", state exact trade or occupation for which you feel qualified. No  
14. If you had been employed after leaving school, state when you last worked fairly regularly before enlistment. No  
15. Give details of last employer, if any: Name No Address No  
16. Nature of employer's business (for instance, "farmer", or "building contractor", or "boot factory", or "iron foundry", or "retail store", etc.) No  
17. (a) If your last employment was in a business of your own, state nature and address of business. No (b) Date of discontinuing it. No

## Section E—PARTICULARS CONCERNING THOSE WHO WERE EMPLOYED AT TIME OF ENLISTMENT

QUESTIONS 18 TO 23 REFER ONLY TO THOSE WHO ANSWER "WORKING" IN QUESTION 10 (a). PLEASE READ THESE QUESTIONS AND REPLY TO THOSE APPLYING TO YOU AT TIME OF ENLISTMENT

IF YOU WERE AN EMPLOYEE WORKING FOR AN EMPLOYER UP TO THE TIME OF ENLISTMENT, PLEASE ANSWER QUESTIONS 18 TO 21

18. Name of employer SAINT JOHN DRY DOCK Address SAINT JOHN NB.  
19. Nature of employer's business (for instance, "farmer", or "building contractor", or "boot factory", or "iron foundry", or "retail store", etc.) SHIPBUILDING  
20. (a) Your specific occupation CILER (b) Number of years' experience at this occupation with any employer 1 month  
21. (a) Did your employer promise definitely to give you employment on discharge? No (b) Did your employer refuse to promise you employment on discharge? No (c) Do you wish to return to your former employment? Yes

IF YOU WERE WORKING ON YOUR OWN UP TO THE TIME OF ENLISTMENT, THAT IS TO SAY, OPERATING A FARM, A STORE, AN AGENCY, OR IN PROFESSIONAL PRACTICE, OR AS A PARTNER IN ANY SUCH LINE, PLEASE ANSWER QUESTIONS 22 AND 23

22. (a) State nature of business, or professional practice. No (b) Where was it located? No  
23. (a) Number of years engaged in this business. No (b) Have you made, or will you make plans to return to the same or a similar business on discharge? No

## Section F—PARTICULARS OF FARMING EXPERIENCE

24. (a) Do you wish to engage in farming after the war? No (b) Do you feel competent to operate a farm? No (c) If so, in what kind of farming? Domestic  
25. (a) Were you born on a farm? No (b) How many years' actual farming experience have you had? 10 (c) In what provinces did you have experience? N.B. N.S.

## Section G—MISCELLANEOUS

26. Have you made any arrangements other than indicated above, for re-establishment in civil life after discharge? No  
27. If so, state nature of your plans (for example, do you plan to return to school, or have you been assured of a job, etc.) No  
28. State any employment preference or ambition you may have, other than indicated elsewhere in this form. None



DATE 27 May 1941 SIGNATURE John C. Garland



NO. A. 105 1<sup>st</sup> K<sup>th</sup>

M.F.M. 16A  
100M-6-40 (5692)  
H.Q. 1772-39-1665 NCF

P 87810

JUL 14 1941  
N.S. 113 g-843  
CANADA

### CANADIAN ACTIVE SERVICE FORCE

SERVICE: MILITARY OR AIR

( NAVAL )

APPLICATION FOR DEPENDENT'S ALLOWANCE—FOR DEPENDENTS OTHER THAN THOSE PROVIDED FOR ON FORM M. 16

The names required by Questions 1, 2 & 3 must be shown in black capitals.

- 1. Surname of applicant ..... **GARLAND**
- 2. Full Christian name or names ..... **John Charles**      3. Age ..... **23**
- 4. Official Number ..... **V - 2703**      5. Rank ..... **O/Smm - RCNVR**
- 6. Unit, Station, or Establishment ..... **HMCS "STADACONA"**
- 7. Date appointment or enlistment ..... **MARCH 1941 DIVISIONAL STRENGTH**
- 8. Date reported for duty ..... **30th APRIL ACTIVE SERVICE**

**Question 9:**

In the case of officers, the date of reporting for duty is the date pay commences and dependents allowance cannot commence prior to such date.

- 9. Are you a member of the permanent forces, military or air? ..... **NO**
- If so (a) State permanent establishment, unit or station.....
- ..... (b) Are you receiving permanent force rates of pay and allowances? ..... **YES**

**Questions 10 & 11:** Are to determine the degree of eligibility to an allowance where salary or wages continue in whole or in part.

- 10. If you are an employee of a Dominion or Provincial Government, Municipality, Board, Commission or other Public Authority, give particulars of such employment..... **NIL**
- 11. If your salary or wages or any part thereof are being continued by such public authority during service, state amount per month..... **NIL**

- 12. Give particulars of your civilian occupation together with total earnings and period of time employed in the six months preceding enlistment..... **Labourer.**  
**Worked as lumberman in New Brunswick woods for the first five months of the six month period concerned. In the last month (April) was employed as labourer in St. John Dry Dock. Earned approximately \$ 30.00 monthly--total of \$ 180.00.**

- 13. Name of dependent ..... **GARLAND**      **Annie**      **Mrs.**  
Surname      Christian Name      Mr. Mrs. or Miss

**Question 14:**

Give street name and number or post office box number, R.R. No. city, town or village and province.

- 14. Address ..... **Petitcodiac, New Brunswick**



15. Age of dependent 46 16. Relationship MOTHER

Questions 17 to 30  
Have a bearing on  
the eligibility for  
allowance and the  
amount payable.

17. With whom did the dependent reside in the 6 months' period preceding your enlistment?  
With her husband and family at Petitcodia, NB  
State name, address and relationship to dependent

18. With whom will the dependent make his or her home hereafter? As above  
(State relationship)

19. Is dependent being maintained in a Public Institution at the public's expense? NO  
Yes or no  
If yes, give name and location of institution

20. Why is dependent unable to provide for his or her own support? If by reason of mental or physical infirmity, give nature and duration of same together with name and address of family doctor, if any. Husband is invalid. Has not been working for four years (permanent work). Statement from his physician is attached. Physician is Dr. R. J. Caldwell of Petitcodia, NB

21. From what date have you been contributing to the support of this dependent? Four years (1938)

22. Are you the sole or partial support? SOLE  
State whether sole support or partial support

23. (a) Give nature and amount of financial assistance (this may include board and room) given by you to this dependent in each of the 6 months prior to enlistment and total of same for the 6 months. Contributed approximately \$ 20.00 monthly, total of \$ 120.00 for six month period.

(b) Did your contributions entitle you to board and lodgings in return or did you provide your own board and lodgings? No., was employed at lumber camp most of the time.

24. If this dependent became dependent upon you within the six months preceding enlistment, what change in the dependent's financial circumstances has made him or her so dependent upon you? NIL

25. Is the dependent your mother, step mother or foster mother? Mother  
state which

26. Is your father, step father or foster father living? Father is living.  
Yes or No  
If "yes" state extent and nature of his contribution to your mother's support and if he does not fully support her, state reasons, and give his age.  
Father is invalid. Physicians' statement is attached.



27. If dependent is father or mother, sister or brother, give particulars of your other brothers and sisters.

Name	Address	Age	Occupation	Married or Single
Henry Edmond GARLAND	Petitcodiac, NB	12	Student	Single
Neil Atzel GARLAND	Petitcodiac, NB	15	Student	Single
William Leroy GARLAND	"Unknown"	18	Labourer	Single
Elena Josephine GARLAND	Moncton, NB	22	Domestic	Single
Ferne Alexandra GARLAND	Grand Bay, NB	21	Domestic	Single

28. (a) If any of the above relatives contributed to such dependent's support, state name and nature and amount of contribution in the 6 months preceding your enlistment.

None of the above relatives are able to contribute in any way.

(b) In any such instance did the relative contributing receive board and lodgings in exchange for such contributions. If "yes" explain: The two younger brothers who are students both live at home with their parents.

(c) Did any of the above relatives serve during the South African War 1899-1902 or during the First Great War? NO

Yes or No

If "yes" give name and unit or regimental number

29. Give full particulars of the dependent's average monthly income from all sources other than your own contributions, to the best of your knowledge, information and belief under the following headings.

	REMARKS
Insurance Annuity .....	\$ .....
Dividends or Interest on Bonds and Shares .....	\$ .....
Interest on Mortgages or Loans .....	\$ .....
Rentals .....	\$ .....
Workmen's Compensation* .....	\$ .....
Old Age Pension* .....	\$ .....
Mother's Allowance .....	\$ .....
War Pension No.* .....	\$ .....
War Veterans Allowance No.* .....	\$ .....
Applicant's Assigned Pay .....	\$ 19.00
Other Assigned Pay .....	\$ .....
Other Family Contributions .....	\$ .....
Other Income .....	\$ .....
<b>Total .....</b>	<b>\$ 19.00</b>

\*Give Pension No. if in receipt of Pension.

30. Fifteen days' pay per month must be assigned to dependent to obtain allowance. 30. What amount of pay have you assigned per month on behalf of this dependent? FIFTEEN days' pay, ( \$ 19.00 ).

If 15 days' pay per month has been assigned to dependent wife and children, an additional 5 days' pay per month must be assigned to this dependent.

[OVER]



31. Date assigned pay effective..... 31st JULY 1941

32. Have you made a prior assignment of pay. If so state number of days and to whom  
NO

33. Have you made a previous claim for dependent's allowance?..... NO

If so give particulars of previous unit and official number under which applied for and  
date of application.....

Certified that authorization for assigned pay as stated has been received.

I certify that the above is a true statement.

*A. Wright*

Paymaster Sub/Lieutenant Rank RCNVR

*John C. Garland*  
Signature of Applicant O/Smn - VR

Date ..... 10th JULY 1941

Establishment, unit or station

HMCS. "Stadacona"

Place Halifax, NS

NOTE.—Dependents' allowances may not be awarded to more than three dependents of any officer or man.

12.00

12.00