



N. V. 5 50M-1-41 (8973) N.S. 815-11-5

NATIONAL DEST

# ATTESTATION FORM

(HOSTILITIES FORM)

HRISTIAN NA	AMES Edward	l Eloi		M/	RRIED, SINGLE	OR WIDOWER Single
	PERMANI	ENT ADDRE	SS			RELIGION
	654 Sandhu		nue, Manitoba			United
DATE (	OF BIRTH	* *1	PLACE OF BIRT	Н	NAME AND	ADDRESS OF NEXT OF KIN
*Original Nationalit Father SC Mother SC	ottish ottish	County Province	innipeg Manitoba		654 W	en STRACHAN (Moth Sandhurst Avenue, INNIPEG, Manitoba
*If not the sor	of natural born British PERSO				N ENROLME	ENT
HEIGHT	CHEST MEASUR	EMENT	HAIR	EYES	COMPLEXION	WOUNDS, SCARS, MARKS
Feet 5	Inflated $35\frac{1}{2}$ Deflated $33\frac{1}{2}$		Brown	Grej	Fair	Scar on right foremrm
	EDUCATIONAL	STANDING		1	TRADE OR CALLIN	G AND IN WHOSE EMPLOY
DATE OF	Grade X	RATING F	or which enr	OLLED	Winni	n Rand Limited, peg, Man.  N, OR OTHER ESTABLISHMENT.
	L STRENGTH ber, 1941.	Ord	d. S'mn	1 10	a sugar for	DIVISION
(B)	DECI	ARATI	ON TO BE	E MAI	DE BY APPL	ICANT
(1) That (2) That Force, and th	at I accept and a t * (a) I have never Force	being enro gree to abi	lled as a mem ide by the rul and am not se	ber of the	e said Force. any Naval, Mil	an Naval Volunteer Reserve itary, Reserve, or Territoria
*Cross out Cl	ause not applicable.	NOT NOT THE	XXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXX	Octobio	XXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXX	
-	(ED IN	R	ANK	Marine 1	FROM	то
a property						Personnel Records Division.
-	(a) I have no	ver been r	rejected for o	or discha	arged from any	Non-Sub. Card

- (5) On being enrolled as a member of the WINNIPEG, MAN. 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 27th day of October, 1941.

Signature of applicant 6.6. Strachen

#### CERTIFICATE OF ATTESTING OFFICER (C)

I hereby certify that all the foregoing statements were made by the volunteer above named, in my day of October, 1941.

> Signature of and rank of Attesting Officer. LIEUTENANT R. C. N. V. K.

#### (D) OATH OF ALLEGIANCE

I Edward Eloi STRACHAN 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.....

27th October, 1941.

Rank LIEUTENANT R. C. N. V. R.

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

#### CERTIFICATE OF ATTESTING OFFICER (E)

Canadian Naval Volunteer Reserve Force, I have caused his name and every prescribed particular to be recorded in the Record Book of the WINNIPEG, MAN. Division of the R.C.N.V.R. or in the appropriate official documents.

LIEUTENANT R. C. N. V. R. Attesting Officer.

27th October

R.C.N.V.R. Division (or other establishment) WINNIPEG, MAN.

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.



P153416 Can. B. 207
100 M-11-40 (7881)
N.S. 815-2-207

# Certificate of Medical Examination of Officers, Men and Boys

NAVAL SERVICE OF CANADA

(R.C.N. OR RESERVE FORCES)

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Note-T	his Certif	licate is to be	completed by the Ex	amining Medica	al Officer and	i forwarded to	the Naval	Secretary, I	Departmen	t of Nat	ional De	fence, O	ttawa.	
	I, t	he und	ersigned, hav	e examir	nedJ	Edward	Stra	chan						
and I	belie	eve him	try asto be *{in a	ll respect	ts fit fo	Seaman or His M	ajesty'	s Servic	ee.	tated	xbol*	<b>5.</b> ]H	le has si	gned
the C	ertifi	cate giv	ven below in  * Delete one.	my pres	ence.									
Stand			ination has l	oeen mad	de in a	ccordanc	e with	the cu	rrent	Instr	uctio	ns as	to Me	dical
a Age (Years	® Weight without	© Height with Bare	General Development  Fair  (4)	Chest Girth	S (i) Saelien's Types	Vaccinated or revac- cinated for Small Pox (Date)	E Lungs, Heart, etc.	Abdomen, Hernia, etc.	E Limbs and Joints	(5) Skin	3 Ears and Hearing	a Testes, Varicocele, etc.	Mouth, Teeth (No. deficient and No. defective, if any), Nose, Tonsils, etc.	(c) Anus, Homorrhoids, etc.
18	138£1	tt. ins.	Fair	inches maximum 255 mean 75 mea	left eye 20/20 coloure visign	O. W	Normal	Normal	Normal	Normal	Normal	Left Hydrocele	7 Defectent 0 Deffective	Normal
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# III. BOYS EXAMINATIONS

#### (I) ON PASSING OUT OF TRAINING ESTABLISHMENT

						Re	zzer	Passed		Initials of	
Date		Paper	Oral	School	Procedure Practical		Receiving	or	Training Establishment	Examining Officer	
	% Required	75	65	40	75	80	85	-		_	
	% Obtained										

### (II) FOR ACCELERATED ADVANCEMENT TO ORDINARY TELEGRAPHIST

			Cashaisal	Procedure	Coding	Buz	zer	Passed	Ship or Establishment	Initials of
Date		i	Practical	Practical	Practical	Trans- mitting	Receiving	Failed Failed	Ship or Establishment where examined	Examining Officer
	% Required		Good Ability	65	70	85	95	_	_	-
	% Obtained									
 	/0									

# IV. EXAMINATION FOR ORDINARY TELEGRAPHIST (S.S.)

		Techni-		Proce	dure		TT /G	771 . 1	G	Buz	zer	Passed	Initials of
I	Date	cal Practical	School	*Paper	Pract.	Coding Practical	V/S Paper	Flash- ing	Sema- phore	Trans.	Recg.	or Failed	Examining Officer
	% Required	65	50	65	65	.85	75	85	86	85	90	0	tol
18.4.	+2 % Obtained	83			10	71				85	95	1.	DBM
	% Obtained												

## V. TRAINING CLASS CERTIFICATE

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

Ordinary Telegraphists (S.S.) are not required to undergo the Training Class in V/S or Electricity and Mag. unless they have failed to obtain the requisite percentages in the V/S Paper and School in Section IV.

Date of Completion	Subject	% Required	% Obtained	Passed or Failed	Ship or Establishment where examined	Initials of Examining Officer
	Seamanship	75				No.
	Field Training	70				
	V/S	75				No. of London
	Electricity & Mag.	50		Control of the		
				1 1 1 1 1 1 1		

# VI. EXAMINATION FOR TELEGRAPHIST

Date		Tech. Prac.	Proc	edure Prac.	Cod- ing Prac.	Flash- ing	phore	Bu	zzer Recng.	Passed or Failed	Ship or Establishment	Initials of Examinin Officer
N 1 3 1942	% Required % Obtained	65 85	75 85	75 80	75 85	85	88	80	95 98	P.	H.M.Cs Sr. Hyacinthe	5/
	% Obtained % Obtained											/

295\*/672

<sup>\*</sup> Includes questions on organization

### VII. EXAMINATION FOR WARRANT TELEGRAPHIST

Date	Rating		Tech	nical	200	y School	and	edure Org- ation	Cod	ling	V/S	Flach.	Sama.		zzer	Elec- tricity		Passed	Initials of Examining
2.000	Rating		Paper	Pract.	,		Paper	Pract.	Paper	Pract.	Paper	Flash- ing paper	phore	Trans- mit- ting	Receir- ing	Vernon Course		Failed	Officer
		% Required	75	85	70	70	80	85	80	80	80	85	86	90	95	75		_	_
		% Obtained																	

Initials of Examining Officer

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#### VIII. RECORD OF EXPERIENCE

To be filled in on discharge from a Ship or Establishment

DATE	Description of Transmitting Apparatus  (Note:—Name and Type Numbers	Description of Receiving Apparatus of Service Apparatus not required.)	NATURE OF DUTIES PERFORMED	INITIALS OF CAPTAIN
June, 1929 to August, 1930	Leading Telegraphist in a Battleship.  [High and low power low frequency Valve.]  [High and low power high frequency Valve.]  [Low power Radio Telephony.]	Multi Valve amplifiers and superheterodyne receivers. High speed (automatic) reception. D/F.	General working and operating. Care of motors, batteries, etc. In charge of Watch—consisting of four receiving lines and three transmitters. Handling and disposing of all traffic.	
				Cinage.

#### IX. RECOMMENDATIONS FOR NON-SUBSTANTIVE RATES

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

Date	Ship	Present Substantive and	For what Non-substantive rate	Initials of			
240	Ship	and Non-substantive Rate	For what Non-substantive rate recommended If highly recommended add "H"	Signal Officer	Captain		

# X. SPECIAL QUALIFICATIONS

Only to be filled up when a rating is discharged from a Ship or Establishment or on completion of any special course, and it is desired to report on him for special knowledge or ability, not otherwise recorded, e.g., D/F Operator; Mechanical and Instructional ability, Fire Control or laboratory experience; care and maintenance of W/T installations, Alternators, Dynamos, Secondary Batteries; ability to take charge of W/T department; knowledge of a foreign language; typewriting. Efficiency as T.A.G., including Air Gunner or Bomb Aimer, where applicable, is to be included in this Section on each occasion of returning to General Service from the F.A.A.

Date	Qualifications	Ship or Establishment	Initials of Captain
		th party	
		Landard D. S.	
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For Directions for completing this part of the Form, see Article 610, K.R. & A.I.

	XI. VOCATIONAL TRAINING CERTIFICATE	
(To be filled up on co	mpletion of a Vocational Training Course, other than a Corr	respondence Course)
Vocation		
We certify that (name)		
(residence)		
has satisfied us that he possess	ses a*	knowledge of the vocation
mentioned, and we consider the	at †	
	Examiners	
	Business and Business Address	
Date of Examination	(Signed)	President
19		Vocational Training
*Here insert qualification. †Special	notation as applicable. ‡Vocational Training is optional.	Committee‡
	and, intelligence, initiative, energy, and any qualification i	
	. TO BE FILLED IN ONLY ON FINAL DISCHARO	
	ce was*	
His general efficiency in ca	arrying out his duties was*	
His efficiency on discharge	e was assessed as*	
*See Art. 610, K.R. & A.I., clauses 3	to 7	Captain
For Record of Experience see Sect		Date

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# HOSTOLOTOES W/ T. WEEKLY TEST AND FINAL RESULTS

VEEK ENDING	SBX	P&0	COD- ING	THE- ORY	TECH	AV'G	REMARKS
MAR 28 1942	94.4			188	31.3.	(42)	
PR 4 1942	96.4				,		11.3.42 10 1 Mays 1 cells.
APR 11 1942			-		85	13442)	11.3.42 10 phays cells.
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1PR 25 1942	96.2	52					
1AY 2 1912					-		The state of the s
MAY 9 1942	96.2	64	2	-			
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S.-1246H 2M-8-41 (1435) N.S. 815-9-1246H T.S.-93

To be kept attached to the Service Certificate until final discharge from the Service

# WIRELESS HISTORY SHEET OFIGINAL

(Revised-May, 1938.)

STRACHAN, Edward E.

I. EXAMINATION RECORD

V-50046. Official No ...

To be filled up according to the result obtained after examination

-														1				
Date	Nature of Examination Qualifying or		Tecl	hnical	Theory	School		ure and isation	Coo	ding	V/S Paper	Flashing	Sema- phore	Bu Trans-	zzer Po-	Passed or Failed	Ship or Establishment where examined	Initials of Examining Officer
	Requalifying		Paper	Practical			Paper	Practical	Paper	Practical	raper		photo	mitting	Re- ceiving	Failed	where examined	Officer
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	FOR W/T 3	(% Required	75	80			80	80	80	80	75	85	86	85	95	_		-
	State whether after a qualifying course	% Obtained																
	FOR W/T 2	(% Required	75	80	70	70	80	80	80	80	75	85	86	85	95	_		-
		% Obtained																
	FOR W/T 1	% Required % Obtained % Obtained	75	85	70	70	80	85	80	80	80	85	86	90	95	-	-	-

<sup>\*</sup> Insert either (a) the examination marks obtained during the qualifying course, or (b) the marks obtained after a separate School course, these being initialled by the Schoolmaster.

#### II. DATE OF GRANTING OF NON-SUBSTANTIVE RATE

					ALC: CHARLES MADE AND A						
Rate	Date	Initials of Captain	Rate	Date	Initials of Captain	Rate	Date	Initials of Captain	Rate	Date	Initials of Captain
T.O. (W/T)			W/T 3	1 18 13	88	W/T 2			W/T 1		

# Time in Signal School Only

Ames. St Hyacenthe 29" June, 1942.

That Thates Divisional Officer SIGNAL BOATSWAIN, H.M.C., SIGNAL SCHOOL

Is a very good operator providing he pays allertion to

J. a. 1 Jogan Lt.

Attanble maker with little, if any, interest in his work. No initiative, inclined to be slovenly in appearance and suller in attitude. Not recommended HMCS Halifay

17 april 44.

J. Vo McClennan Lieut RCNVR.

CLASS OF SETTICE

FULL RA

#### TELEGRAM

RECEIVER'S NO.
TIME FILED
CHECK

TO: MRS. HELEN M. STRACHAN, 654 SANDHURST AVENUE, WINNIPEG. MANITOBA. FROM: NAVAL SERVICE HEADQUARTERS, OTTAWA, Ont.

RH

THE MINISTER OF NATIONAL DEFENCE FOR NAVAL SERVICES DEEPLY REGRETS TO REPORT THAT YOUR

SON EDWARD ELOI STRACHAN,
(FULL NAME)

TELEGRAPHIST,

(RATING)

OFFICIAL NO. V-50046

IS MISSING. LETTER FOLLOWS.

PERS.(N)

DRAFTED BY NPR per TFH

CHECKED BY

OATE 8 May, 1944.

CHARGE NAVAL

S. 2575 5M SETS 11-42 (6949) N.S.815-9-2575 NAVAL

8th May, 1944.

Dear Mrs. Strachan:

I deeply regret that I must confirm the telegram of the 8th of May, 1944, from the Minister of National Defence for Naval Services, informing you that your son, Edward Eloi Strachan, Telegraphist, Official Number V-50046, Royal Canadian Naval Volunteer Reserve, is missing at sea.

According to the report received, your son is listed as missing when the ship in which he was serving was lost by enemy action, but it is not known as yet whether any hope can be held out for his survival. You may rest assured, however, that as soon as further information is available, you will be notified.

For reasons of security it may be some time before details of this incident of war may be released.

It is requested that you will regard as confidential anything beyond the fact of your son's loss on war service, until such time as an official announcement is made, as this information might prove useful to the enemy.

Please allow me to express the sincere sympathy of the Minister of National Defence for Naval Services, the Chief of the Naval Staff, and the 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. Helen M. Strachan, 654 Sandhurst Avenue, WINNIPEG, Manitoba.

MAR 8 " 19A8" 11 MArch 42 Combined al & S. Crerions Date of Discharge Date of Active Carries Branch of Service Redord of Service in other Forces (per Mayal Fedorda) SELATOR. w Less non gualifying "HAlifAK" 2 July 42 17 Apl. 44 "Valley field 18 Apl. 44 7 May 44 -731 Botal Ho. of Days Date of Dischard Late of Active Service TOTAL SERVICE CAUSE OF DISCHARGE: FILL AND OF A PROPERTY OF A PROPERTY OF CO DISCOMMON MARKE IN ROPT BONDONS CERTATIVE THAT COMMANDE OF SERVICE MANE SCHALOR CHARACTER FILE WO. 518, - A - 5 - 5 - 5 TOU D'RIE'T' LOU'S W.S.C. Applinetion Mo.

Mrs. Helen Strachan,
654 Sandhurst Avenue,
Winnipeg, Manitoba.

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

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

and the following number quoted:-

H.Q. V - 50046 FD. 526

# DEPARTMENT OF NATIONAL DEFENCE ESTATES BRANCH OTTAWA, ONT.

September 12 194.4.

For the purpose of record and in the event of there being any Service estate available for distribution (according to law) on account of the late

STRACHAN, Edward Eloi, Telegraphist,

...Official Number V-50046, Royal Canadian Naval Volunteer Reserve.

it is necessary that certain information regarding the deceased and his relatives should be furnished the Estates Branch. You are asked therefore to read the enclosed memorandum before completing pages 2 and 3 of this form. The particulars required are to be carefully filled in and the Declaration on page 4 should then be signed in the presence of a Clergyman, Priest, Local Magistrate, Commissioner for Oaths, Notary Public or a Commissioned Officer of any of His Majesty's Forces who should be asked to complete and sign the Certificate. This form should then be returned to the above address.

If there is insufficient space for complete particulars to be given opposite any question on pages 2 and 3 of this form, the space under "additional remarks" on page 4 should be used.

GC/

Director of Estates.

BRANCH

M.F.W. 77 6-44 (4878) H.Q. 1772-39-972

# 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:

grees	ESTATION OF	NO SUM ONLY	INFORMANT'S ST	ATEME	ENT
of Rela- tion- ship	required to be a	ecounted for	NAME IN FULL  of any Relative, if any, in each degree specified	Age	ADDRESS IN FULL of each surviving Relative, opposite his or her name, and date of death of each deceased relative
1	Widow of the De	ceased			
2	Children of the I dates of their I	Deceased and Births			
3	Father of the De		alexander Strachan	55	654 Sandhure
4	Mother of the De	eceased	Helen Mackie Strachen	52	11 11 "
	Name of		alexander Strachen	18	11 11
5	Brothers of the Deceased	Full Blood	Charles Stracken		
		Half Blood			
6	Sisters of the Deceased	Full Blood	m" Ernst Rudolph (Helen)	23	,, ,,
		Half Blood			
7	of the full or the	or sisters (whether half blood) of the dead, and date of	Names and ages of their children (if any)		Address of their children
	-				10.00 Aut

# ANSWER FULLY EACH QUESTION ON THIS PAGE PARTICULARS AS TO IDENTITY

3		Edward Eloi Stracha
9	Date of his birth.	August 6 1923
0	Place and date of his marriage.	
11	Place and date of his parents' marriage.	Winnipey 22 Nov 1919
	PARTICULARS OF D	OMICILE
12	Place where deceased was born.	Grace Hospital Manitoba
13	State, in order, the Province, State and/or County in which he resided before enlistment and the period of time in each.	(a) Manitoba only. (b) Manitoba only. (c) (d)
14	Nature of employment before enlistment.	Repairing Typewritters
15	State whether he owned the premises in which he lived, and, if so, where situated.	No
16	Name place where deceased stated he intended to make his permanent home.	Didn't say.
	PARTICULARS OF	F ESTATE
17	Did he leave a Will? If in your custody, please forward.	Not to my knowledge
18	If married, and domiciled in the Province of Quebec or in a State in the U.S.A. or in a Country under the laws of which there is community of property between spouses,—was there a marriage contract dealing with property?	The State of the S
19	Did he have a Bank, Post Office or other deposit account? If so, give name and address of bank, etc., and the amount on deposit. Do you wish it administered with the pay account?	Royal Bank of Ganada main + William Win yes - # 7818 - \$ 79.82
20	Amount of War Savings Certificates held by deceased. Indicate where located.	
21	Amount of Victory Loan Bonds held by deceased. Indicate whether registered or bearer and where located.	A 020034- Reg- 654 Sandhur London Life - \$1,500
22	If deceased had life insurance, name companies and amount payable under each policy and the person named as beneficiary therein.	
23	Describe other assets, if any, and estimated value thereof. Use space on page 4 if necessary.	
	OTHER PARTIC	ULARS
24	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.	100
25	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.	
25	part thereof? If so, attach itemized accounts showing	he amounts authorized in the Regulations, where death burial is made in Canada or elsewhere in the North A rnment will reimburse such relative to the extent of the in excess of those authorized in the Regulations is not

#### DECLARATION

"I sert degree of relationship for example.

I hereby declare that all the particulars shown on this form are correct, and a true and complete "Widow".

"Father", statement of all the relatives that the deceased ever had in the degrees specified; and that I am the "Brother", etc.

mother of the deceased.

N.B.—To be signed in full in the presence of a Clergyman, Priest, Local Magistrate, Commissioner or Notary Public or Commissioned Officer of any of His Majesty's Forces.

Mrs Helen M Strachan Signature of Informant

#### CERTIFICATE

I hereby certify that to the	best of my	knowledge and	belief	
I hereby certify that to the	Dest of my	Knowledge dild	Detroit	

\*See above Mos Weller M Strucker Name of his the\* Mosther of the Deceased above described. The above Declaration was made by the Informant and signed in my presence.

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 specified is stated in its proper place in the Statement opposite.

(If the deceased has no living relatives of the degrees shown on page 2, the names and addresses and relationship of other relatives should be set out below.)

USE SPACE BELOW FOR ANY ADDITIONAL REMARKS YOU MAY WISH TO MAKE

We do not know if our boy bought Victory Bonds on the H M G & Halifax or not but he spoke of the crew doing so. As for the Valley field he was transferred to her just before that trip when she was lost so we didn't know he was on her.

C.N.S. 264 (S. 536D.) 50M-11-40 (7813) N.S. 815-9-264

Name STRACHAN, Edward E101 27/10/41									
Sub-Rating and Seniority Ord. Simm Non-Sub.									
O.N. V-50046 S.B. No. W.B. No.									
Joined Ship . 29	Dec' 41.	fromDivis	ional Strength						
	od Hostilities								
Date of Birth	6th August, 1923	Religion .	. United						
	Efficiency	,							
Badges	Class for Conduct	Ist Class fo	r Leave /at						
Date due for:	Next Badge								
	Progressive Pay								
	L.S. & G.C. Recom	mended							
Advancement.	Wishes to Pass?	. /	And the second s						
Educ. Test Pt. 1		Failed	Mar 6 - 41.						
Higher Educ. Test. Professonal for higher Sud-rating									
do Non-Sub.		VOOLSYM							
A Later									
Any Non-Service	Attainments Ty fac	witer mees	lance						
	01								
Swimming Qualific	cation Passed	P.P.T.Jus.	tyle 15 mc						
Athletic capabilitie	es Hockey, B	aschall, R.	ugly.						
General Remarks mand). are good inite should ing	(including intelligen	ce, energy, initiation	ve, powers of com-						

H.M.C.S. " Chippawa " / Show. I Lint:
Officer of Division.

Notes:—(1) This form is to be kept for each rating by the Officer of his Division.

(2) The form is to be completed to date, and signed by the Officer of the Division before the rating changes his Division or Ship.

(3) On a rating changing his Ship or Establishment, Form S.264 is to be transferred with his other papers for the information of the next Officer of Division.

PIT. O

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

W.S.G. Application No. 7/10 / FILE NO. N.S. - V - 50046

# "WAR SERVICE GRATUITY"

COMPUTATION OF SERVICE

STRACHAM Edward Eloi	V-50046 Tel
SURNAME CHRISTIAN NAMES IN FULL	OFFICIAL RANK OR RATING NUMBER ON DISCHARGE
CAUSE OF DISCHARGE: Missing - pre	esumed Dead (Valley field)
Applicant Mother API.3	5
	9
TOTAL SERVICE	31 29 31 30
Date of Active Service 29 Dec. 41	
Date of Discharge 7 May 44	86'
Total No. of Days 861	
# Less non qualifying , 7	Total Days 854
OVERSEAS SERVICE	
% Total No. of Days 676	
# Less non qualifying	Total Days 676
	2 December
Record of Service in other Forces (per N	avai necords)
Branch of Service	
Date of Active Service	
Date of Discharge	
& % Overleaf	
Computed By MA	JB mc Gregor
	for (H.B. Money) Payr. Cmdr. R.C.N.R.
DATE: #48 8 1945	Director of Personnel Records

10.7°

REGISTERED

AIR MAIL

N.S. V50046 PERS.(N)

11th May, 1944.

Dear Mrs. Strachan:

Further to my letter of the 8th of May, 1944, particulars respecting the loss of H.M.C.S. "Valleyfield", from which your son has been reported "missing" are being released to the press, and I am accordingly passing them on for your information.

H.M.C.S. "Valleyfield" was torpedoed and sunk by enemy action while on Convoy Escort duty in the North Atlantic. Details of the action are not being released beyond the fact that the ship sank almost immediately after being hit.

Thirty-eight members of her complement are listed as survivors; five were killed in action; the remaining one hundred and twenty-one, including the Commanding Officer, Lieutenant Commander D.T. English, of Halifax, Nova Scotia, are missing.

May I again express the sincere sympathy of the Department in your sad loss.

Yours sincerely,

SECRETARY, NAVAL BOARD

Mrs. Helen M. Strachan, 654 Sandhurst Avenue, WINNIPEG, Manitoba

1

File NO: N.S. V-50046

30th August, 1944.

Dear Mrs. Strachan:

Further to my letter of the 11th of May, 1944, in view of the length of time that has elapsed since your son, Edward Eloi Strachan, Telegraphist, Official Number V-50046, Royal Canadian Naval Volunteer Reserve, was reported "missing" after the sinking of H.M.C.S. "VALLEYFIELD", and as no information has since been received of his having survived, the Canadian Naval Authorities have now presumed his death to have occurred on the 7th of May, 1944.

May I again express the sincere sympathy of the Department in your bereavement.

Yours sincerely,

O' SECRETARY, NAVAL BOARD.

5.9. Wrs. Helen M. Strachan, 654 Sandhurst Avenue,

WINNIPEG, Man.

Nessece ordolence

Date Sent 30 8 44 NPR 5

hoted on Estates G. P.

ESTATES BRANCH HQ. NS. V-60046 FD. 526 March 27, 1945. Mr. and Mrs. A. Strachan, 654 Sandhurst Avenue, Winnipeg, Manitoba. STRACHAN, Edward E., Tel. (Deceased) No. V. 50046, R. C. N. V. R. Dear Mr. and Mrs. Strachan: Distribution can now be made of the amount of money here at credit of your late son. The total amount available for distribution is made up as follows: Balance of pay and allowances..... \$ 54.38 Royal Bank of Canada, Winnipeg..... 80.74 Refund from Fit-Rite Tailors, Halifax.... Sale of \$100 Victory Loan Bond ..... 100.73 Total..... \$238.55 Your son died without having made a Will and his Service estate is, therefore, distributable equally between yourselves as the next of kin entitled under the Intestacy Laws of his province of domicile. Treasury has been requested to send you direct cheques for \$119.28 and \$119.27. representing your respective shares of the estate, and on receipt of same will you kindly sign the enclosed forms of acknowledgment and return them to the Director of Estates, Department of National Defence, 308 Sparks Street, Ottaka. (L.M. Firth) Colonel, HRW/JN Encls.