

WATSON, JOHN CRITTENDEN

O76380

OFFICIAL NUMBER		FILE NUMBER		0-76380		OFFICIAL NUMBER						
NAME		WATSON		John Crittenden		DATE OF BIRTH						
		(Surname)		(Given Names)		28 July, 1918.						
PLACE OF BIRTH		Yarmouth, Nova Scotia.		OCCUPATION		Service Engineer						
RELIGION		Presbyterian		EDUCATION								
RESIDENCE AT TIME OF ENLISTMENT: Street and No.		1514 Crescent Street		Town		Montreal						
						Province, etc. Quebec						
ENGAGEMENTS				DESCRIPTION				PREVIOUS SERVICE				
Date (in figures)			Period	Height	Hair	Eyes	Complexion	Marks or Scars	Served in	Rank or Rating	Dates	
Day	Month	Year									From	To
26	11	42	H.O.	5'9 1/2	Light Brown	Blue	Fair	Small scar under left eye.				
NEXT OF KIN RELATIONSHIP (in pencil)												
ADDRESS (in pencil): Street and No.												
MEDALS, CLASPS, HURT CERTIFICATES, PRIZE MONEY												
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.												
Date (in figures)			1st, 2nd or 3rd G.C. or G.S.	Granted Deprived Restored	BRIEF PARTICULARS OF WARRANT OR C.M. PUNISHMENTS AND C.P. CHARGES							
Day	Month	Year			SHIP OR ESTABLISHMENT		Wt. No.	Date (in figures)			BRIEF PARTICULARS OF OFFENCE	
			Day	Month	Year	Day		Month	Year			
FILM NO. 4462-4- DATE					O.H.F. Received Last Will & Testament dated 10-12-43 #16605 rec							
SECOND CLASS FOR CONDUCT												
From To												

V.R.

OFFICIAL NUMBER

NAME WATSON
(Surname)

John Crittenden
(Given Names)

OFFICIAL NUMBER

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. Montreal	P/Sub-Lieut.(E)	26	11	42	per Appt. 5-1-43.												
H.M.C.S. Montreal	P/Sub-Lt.(E) T	28	12	42	(Est.)												
H.M.C.S. Cornwallis	P/Sub-Lt.(E) T	6	1	43	addl. for trng. and disposal												
H.M.C.S. Stadacona	P/Sub-Lt.(E) T	6	3	43	addl. for disposal per Appt. 10-3-43												
H.M.C.S. Guysborough	Sub-Lieut.(E) T	14	5	43	addl. for Engine Room Training per Appt. 29-5-43												
H.M.C.S. Stadacona	Sub-Lieut.(E) T	15	7	43	addl. for Fuel Combustion Department Per Appt. 24.7.43												
H.M.C.S. Stadacona	A/Lieut.(E) T	28	12	43	addl. for Fuel Combustion Department Per Appt. 27.12.43												
H.M.C.S. Grou	A/Lieut.(E) T	6	1	44	addl. for Engine Room Trng. Appt. 14.1.44												
H.M.C.S. Stadacona	A/Lieut.(E) T				addl. for disposal Appt. 21.1.44												
DISCHARGED	" " "				"Missing" After sinking of H.M.C.S. Valleyfield Per Casualty List												
		7	5	44	Presumed "Dead" per Casualty Correction Sheet page 19												

GENERAL REMARKS

14th annual leave from 2/1/43
addition 1443-1444 Montreal

Memorial Cross sent to:

(Mother) Mrs. John Jordon Crittenden Watson,
3800-14th N.W.

Washington, D.C., U.S.A. 28-10-44

(Wife) Mrs. Mary Watson,

29 1/2 Cameron St., Dartmouth, N.S. 13-10-44

DATE OF BIRTH			PLACE		CIVIL	OCCU.	RELI.	ED	PERM. RESIDENCE	PREV. ENL.	RANK OR RATE			
DY.	MO.	YR.	BIRTH	MAIN	SUB	GION	P	CTY.	TOWN	SERV.	DIV.	A	BR.	RANK
28	7	18	14	712	0	50	X	2	23	02	0	09	2	02/12
ENLIST. DATE			ACT. SERV. DATE			STR.	ACT. SERV. DATE			SHIP OR	RANK OR RATE			
DY.	MO.	YR.	DY.	MO.	YR.	CAT.	DY.	MO.	YR.	ESTAB.	A	BR.	RANK	
26	11	42	28	12	42					0680	1	02	09	
SENIORITY			STR.	NON-SUB		M	CODED			CHECKED				
DY.	MO.	YR.	CAT.	A	B	ST.								
28	12	43	13				62	07	05	44				

78
Six Copies to be rendered to Naval Service Headquarters

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

H.M.C.S. VALLEYFIELD..... at sea.....
(for passage)

Name (Christian names in full) John Crittenden Watson.....

Rank or Rating Lieutenant (R) ^{RCNVR} Official No. O-75320.....
(If unknown date of first entry)

Place of Birth Dartmouth, N.S. Date of birth 28-7-44

Occupation in Civil Life not known Religion not known Presbyterian
ENGINEERING

Number of Years Service in the Navy (Long Service R.C.N. or
mobilized service in the case of R.C.N. (Temp.) Reserve ratings)

not known 1 year 4 months.....

Date of Death 7-5-44 Place of Death at sea.....

Cause of Death enemy action - Torpedoing of HMCS VALLEYFIELD.....

Nearest known) Name Mrs Mary Watson Relationship Wife.....
relative or) Address 29 1/2 Cameron St.....
friend) Dartmouth, N.S......

Date on which the above was informed by ship Informed by ship.....

Date on which death was registered with local officials.....

In the case of Imperial Service men whether Active Service not registered
sioner 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 invalided.....

The Secretary, Naval Board,
Ottawa, Canada.

S. J. Davis
A/Captain, R.C.N.,
COMANDING OFFICER
HMCS AVALON

.....194
22 May
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.

C.N.S. 1121

HUGH TAYLOR
 CO. OF WINDING OBELISK
 WASHINGTON D.C.

7-2-1950

DISPOSABLE INCOME

[illegible][illegible]

COOPERATION TO CLAMP DOWN ON "RECRUITING" AND "EXCITATION" OF "BLACK PANTHER PARTY" MEMBERS

Place of Birth: ~~San Francisco~~ San Francisco Date of Birth: 5-2-1900

U.S. DEPARTMENT OF JUSTICE
BUREAU OF PRISONS
WASHINGTON, D. C. 20535

Name (print name in full) _____

D OF D 7-5-44

DEPARTMENT OF VETERANS AFFAIRS

AWARDS

(NAVY)

D.D.

WAR SERVICE RECORDS

WATSON John Crittender		0-76380	/Lt (E)	FILE No.
SURNAME (IN BLOCK LETTERS)	CHRISTIAN NAMES	REG. No.	RANK ON DISCHARGE	C.A.S.F. UNIT

WAR SERVICEBADGE

(CLASS)

No.

DATE DESPATCHED:

ADDRESS:

CAMPAIGN MEDALS	REGISTRATION NUMBER AND DATE DESPATCHED
1939-45 Star,	<i>Medals Ret'd. Undelivered</i> <i>8062 RET'D TO STOCK.</i> CANCELLED
Atlantic Star,	
C.V.S.M. & Clasp,	
War Medal.	

03-79498 M



P

(THE REVERS

RCNVR Nov. 45 "VALLEYFIELD"

MEDALS AND MEMORIALS—DECEASED PERSONNEL

REGISTRATION NO. DATE OF DESPATCH

(1) MEDALS

PERSON

ENTITLED TO

Mrs. Mary Yvonne D. ~~Watson~~ McCaskill (Re-married) - Widow

ADDRESS:

~~291 Cameron Street,~~ c/o 281 O'Connor St.,
~~Dartmouth, N.S.~~ OTTAWA, Ont. D.V.A.

(1)

(2) MEMORIAL CROSS

WIDOW

Mrs. Mary Watson

ADDRESS:

26 Sweetland Ave., Ottawa, Ont.

(2)

13-10-44

(3) MEMORIAL CROSS

MOTHER

Mrs. John J.C. Watson

ADDRESS:

3800 - 14th St., N.W., Washington 11,
D.C., USA.

(3)

28-10-44

*Hold pending
Application 16-650*

EVER DISCHARGED FROM ANY OF THE A
ARMED FORCES
YES...
NO....



103.W-290
Can. B. 207

100M-2-42 (3733)
N.S. 815-2-207

P283483

8

Certificate of Medical Examination of Officers, Men and Boys
NAVAL SERVICE OF CANADA
(R.C.N. OR RESERVE FORCES)

NOTE—This Certificate is to be completed by the Examining Medical Officer and forwarded to the Naval Secretary, Department of National Defence, Ottawa.

I, the undersigned, have examined..... **WATSON JOHN CRITTENDEN**
..... **S/LT (E)**
candidate for entry as.....
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	Yrs. 24	Mos. 4	(j) Date of last Vaccina- tion for Smallpox	1928
(b) Height with bare feet	Feet 5	In. 9½	(k) General Development	very good
(c) Weight without clothes	166¾		(l) Nose, Throat and Tonsils	nose normal tonsils absent
(d) Ears and Hearing	handle of malleus injected I.T.M.		(m) Heart and Lungs	BP 120-70 Normal
(e) Chest Girth	Max. 41½	Min. 39	(n) Abdomen Hernia, etc.	Normal
(f) Teeth	Deficient 4	Defective 1	(o) Limbs and Joints	Normal
(g) Vision by Snellens Types	without glasses 6-5	Rt. Lt. 6-5	(p) Skin	slight psoriasis ant chest
(h) Colour Vision	Ishihara R.C.N. Lantern	Normal	(q) Anus Haemorrhoids	Normal
(i) Chest x-ray	{not taken approved positive doubtful	156305 Approved D.P.& N.H. Montreal	(r) Testes Varicocele	Normal
			(s) Urine	Not taken

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 Crittenden Watson*
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..... **Montreal** the..... **20th** of..... **November** 19..... **42**

W D Featle

Examining Medical Officer

(Rank)..... **Surg-Lieut RCNVR**

(5) On being enrolled as an Officer of the Royal Canadian Naval Volunteer Reserve, I undertake and bind myself:—

(a) To serve from the date thereof for as long as my services may be required, being subject to the provisions of the Naval Service Act, and of the regulations made in pursuance thereof for the governing 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 provide myself with the necessary uniform as laid down in R.C.N.V.R. Regulations.

Dated this 26 th day of NOVEMBER, 1942.

John Crittenden Watson
Signature of Applicant.

The above declaration was made and signed in my presence this 26th day of NOVEMBER, 1942.

S. J. [Signature]
Signature of Enrolling Officer.

(C) OATH OF ALLEGIANCE

I John Crittenden / WATSON 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.
Obedient

Signature of Applicant

Signature of Officer administering the Oath

Rank / LIEUTENANT, R.C.N.V.R.

Date 26th November, 1942.

The Oath of Allegiance may be administered by any commissioned officer of the Naval Service.

NOTE.—This form when completed is to be forwarded to Naval Service Headquarters, Ottawa, together with Certificate of medical examination B-207, and record of any previous service.

The record of previous service will be returned after examination at Naval Service Headquarters.

8 Fenwick Ave.
Montreal West, P.Q.

April 30 '42

R 3256

2

62-21-5V

Commander Porteous,
Engineer Officer Personnel
Naval Service Headquarters
Ottawa, Ont.

Dear Sir,

Enclosed herewith is an application for Naval Service, submitted as per your suggestion, made during the writer's interview with you on April 13. At that time^t you advised the writer to continue in his present occupation, but to submit an application, which you would keep until such time as you had work for him wherein he would be of more value than at present, or until such time as he was called up for military service.

Yours sincerely,

J. Watson

NAVAL SERVICE

OFFER OF SERVICE (HOSTILITIES ONLY)

N. V. 3a

30M-7-41 (1262)

N.S. 815-11-3a

To be completed in applicant's own handwriting and forwarded to nearest recruiting centre (see back). No papers, testimonials, etc., are to be attached. Completion of this form is in no way binding upon either the applicant or the Naval Service.

A. Personal History—

Name WATSON John Crittenden La 5266
Surname (in Block Letters) Christian Names Telephone No.
 Address 8 Fenwick Av. Montreal West, P. Que.
Number Street Town or City County Province
 Date of birth July 28 1918 Place of birth Yarmouth N.S.
 Nationality Canadian Are you British by birth? Yes or by Naturalization? —
 Birth place of (a) Father Frankfort, Ky., USA (b) Mother Yarmouth, N.S.
 Are you (a) Single ✓ (b) Married — (c) Widower — (d) No. of Children? —
 Any physical defects (especially eyesight)? No
 Height 5'-10½" Weight 175 lbs. Can you swim? Yes

B. Education—

Highest school grade passed successfully? Graduated from Central High School, Washington, D.C., USA Any Matriculation? —
 University: (a) Name Acadia (b) Years attended 1936-38 (c) Course and Degree B.Sc. (Eng.)
 Technical courses taken also McGill University, 1938-40, B. Eng. (Mech.)
 Special studies —
 Languages spoken English & French

C. Sea Experience—

Have you ever been employed at sea? No Give number of years and how employed? —
 Name and number of Mercantile Marine Certificates held None
 State last position held at sea (with dates) —
 State employment since leaving sea —

D. Occupation: What is your profession, trade or occupation in civil life? Engineering

Are you (a) Actively pursuing your profession or trade on your own account? No
 (b) Employed; if so, in what capacity and under what employer? Service Engineer for Combustion Engineering Corp. Ltd., Montreal
 General experience (with dates) Service & erection of power plant equipment, especially boilers. Marine oil burning service work.
 Have you ever served in any of His Majesty's Forces? If so, which? How long? No
 No. and Class of any Stationary Engineer's certificates or other certificates of competency None
 How long would you need to settle up your private affairs? 1 week

E. Any other Qualifications that might be of use to the Naval Service (yachting, cadet corps, hobbies, etc.)

Considerable yachting & boating & extensive sea travel. Not subject to seasickness. Engineering work on boilers of various types of ships.

F. Branch Applying for: (a) As Officer Engineering (b) As Rating (i.e., in the ranks) —

If you cannot be accepted as an Officer are you willing to serve as a rating? If necessary
 In what capacity do you wish to enrol? As required

Date of Application April 30 '42 Signature John Crittenden Watson

OCCUPATIONAL HISTORY FORM

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..... WATSON, John Crittenden, (b) Reg'l. No.....
 2. (a) Arm of service..... Navy (b) Unit..... H.M.C.S. "MONTREAL" (c) Rank..... Sub-L. prob.
 3. (a) Date of birth..... 28 July 18 (b) Have you any dependents?..... no (c) Place of residence at time of enlistment..... 1514 Crescent St., Montreal, Que.
 4. (a) Place of enlistment..... Montreal, Quebec. (b) Date of enlistment..... 26 Nov. 42.

Section B—EDUCATION AND TRAINING

5. (a) State age on finally leaving school..... 21 22 (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.)..... Gr. Matriculation.
 7. If you attended a university, give name of university and standing or degree secured..... Acadia Univ. (B.S.C.) Wolfville N.S. McGill
 8. (a) Did you ever enter upon a trade apprenticeship?..... no (b) If so, for what occupation?..... (c) Did you finish it?..... (d) If you did not finish it, how long did you serve at it?..... (B of B)
 9. (a) What languages do you speak fluently?..... English, French (b) What languages do you read well?..... English & French.

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?.....

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

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..... Combustion Engineering Corp. Address..... 540 Dominion Sq. Bldg. Montreal, Quebec.
 19. Nature of employer's business (for instance, "farmer", or "building contractor", or "boot factory", or "iron foundry", or "retail store", etc.)..... Power Plant Engineering.
 20. (a) Your specific occupation..... Service Engineer. (b) Number of years' experience at this occupation with any employer..... 2 1/2 yrs.
 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..... (b) Where was it located?.....
 23. (a) Number of years engaged in this business..... (b) Have you made, or will you make plans to return to the same or a similar business on discharge?.....

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?..... no
 25. (a) Were you born on a farm?..... no (b) How many years' actual farming experience have you had?..... (c) In what provinces did you have experience?.....

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.)..... ...
 28. State any employment preference or ambition you may have, other than indicated elsewhere in this form..... none.

DATE..... 26th November, 194 2.

SIGNATURE.....

John Crittenden Watson



Copy To
VWD
ES

JAN 4 1943

OFFICERS RECORD FORM

W-VIR-ORD-202
DATE: Jan 7/43SURNAME: **WATSON**CHRISTIAN NAMES: **John Crittenden**RANK: **Prob. Sub/Lt. (E) RCNVR (T)**HOME ADDRESS: **540 Dominion Sq. Bldg, Montreal**DATE OF BIRTH: **July 28, 1918**PLACE OF BIRTH: **Yarmouth, N.S.**EDUCATION: Matriculation, Senior: **Central High School** Junior: **Washington D.C.**

University Degrees:

B. Sc. Acadia University
B. Eng. McGill UniversityMERCANTILE MARINE CERTIFICATES: **—**

No:

PRECIS MERCANTILE OR YACHTING EXPERIENCE: **—**

PRECIS OF BUSINESS EXPERIENCE:

3 mos. Student Engineer, Canada Cement Co., Belleville, Ont.
3 yrs. Service Engineer, Combustion Engineering Corp. Ltd., Montreal.SPORTS: **Football, Rugby, Soccer, Basketball, Tennis, Golf, Swimming, Softball**OTHER HOBBIES OR INTERESTS: **Boating, All Social Activities**PREVIOUS NAVAL OR MILITARY TRAINING: **—**

LANGUAGES:

LANGUAGES SPOKEN FLUENTLY: **French**LANGUAGES UNDERSTOOD: **German**BIRTH PLACE OF FATHER: **Louisville, Ky, USA** BIRTH PLACE OF MOTHER: **Yarmouth, N.S.**FATHERS OCCUPATION: **U.S. Consul**NEXT OF KIN: **Mother**Surname: **Watson**Christian Names: **Mary Seeley**Full Address: **Gamma Phi Beta House, College Park, Md.**HAVE YOU BEEN REJECTED BY ANY OTHER OF THE ARMED FORCES?
IF SO GIVE DETAILS: **No.**RELIGION: **Presbyterian**NAVAL IDENTITY CARD NO: **NS 75396**MARRIED OR SINGLE: **Single**DEPENDENTS: **None**HEIGHT: **5'-9 1/2"**WEIGHT: **170 lbs**NOTE: HALIFAX ADDRESS: **H.M.C.S. Cornwallis, Officer's Block**TELEPHONE NUMBER: **—**

By command of the Honourable the Minister of National Defence
for Naval Services of the Dominion of Canada

To Lieutenant (E) John C. Watson, (Acting), R.C.N.V.R., (Temporary), -

You are hereby appointed

Acting Lieutenant (E), R.C.N.V.R.,

of His Majesty's Canadian Ship STADACONA additional for disposal.

Your appointment is to take effect from Date of joining.

Department of National Defence
Naval Service

Ottawa. 21st April, 194 4.

Joseph Jaffery

Personnel Records	
Secretary, Naval Board	
1. Noted in Records.....	<i>JS</i>
2. Index Card.....	
3. Non-Sub. Card.....	
4. Statistical Card.....	
5. Rocco Strip.....	
6. Pension Card.....	
7.	
8.	
DATE <i>17/5/44</i>	

P.A.

TOY D.N.P.A. "G"

W.S.G. Application No. 652201

FILE NO. N.S. 0-76380

"WAR SERVICE GRATUITY"

COMPUTATION OF SERVICE

WATSON, John, Crittenden, 0-76380 Lieut(E) RCMVR
SURNAME CHRISTIAN NAMES OFFICIAL RANK OR RATING
IN FULL NUMBER ON DISCHARGE

CAUSE OF DISCHARGE: D.D. (Times "Valleyfield")

Applicant - Widow - Pension awarded

TOTAL SERVICE

Date of Active Service 28 Dec '42 ✓

Date of Discharge 7 May 44 ✓

Total No. of Days 497 ✓

Less non qualifying service — ✓

1711
1215
496

Total Days 497 ✓

OVERSEAS SERVICE

% Total No. of Days 185 ✓

Less non qualifying service — ✓

Total Days 185 ✓

Record of Service in other Forces (per Naval Records)

Branch of Service N ✓

Date of Active Service — ✓

Date of Discharge L ✓

& % Overleaf

Computed By [Signature]

Checked By [Signature]

[Signature]
for (R.W. Underhill)
A/Captain (S) R.C.N.V.R.
Director of Naval Pay Accounting.

DATE: OCT 16 1945

NON QUALIFYING SERVICE

			TOTAL SERVICE	OVERSEAS SERVICE
(#)	Date	Reason	No. of Days	
"		"	"	
"		"	"	
"		"	"	
"		"	"	
"		"	"	
"		"	"	
"		"	"	
Total days			<u>14</u>	<u>14</u>

(%) OVERSEAS SERVICE:

<u>Where Serving</u>	<u>From</u>	<u>To</u>	<u>No. of Days</u>
Durham	14 May 43	14 July 43	62 ✓
Tram	6 Jan 44		
Valleyfield		7 May 44	123 ✓
			185 ✓

17
30
14
61

25
29
31
30
7
122

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

4
NAVY

DECEASED
MEMBER'S
NAME

John Crittenden
(CHRISTIAN NAMES)

WATSON
(SURNAME)

REGISTER NO. 65220
FILE NO. N80-76380
DATE 9 Nov/45
SERVICE NO. RCNVR
FINAL RANK OR RATING Lt.(E)
DATE OF DISCHARGE 7 May/44

PAYEE Mrs. Mary Y. Watson,
ADDRESS 3800 - 14th St. N.W.,
Washington 11, D.C., U.S.A.

DATE OF TERMINATION OF OVERSEAS SERVICE

7 May/44

A. TOTAL QUALIFYING SERVICE

NO. OF DAYS 497 EQUAL TO 16 COMPLETE PERIODS AT \$7.50

\$ 120.00

B. QUALIFYING OVERSEAS SERVICE

NO. OF DAYS 185 LESS 17 INELIGIBLE DAYS, EQUAL TO 168 DAYS @ 25C. PER DAY

\$ 42.00

C. SUPPLEMENT FOR OVERSEAS SERVICE

DAILY RATES AT DISCHARGE

PAY \$ 6.00
SUBSISTENCE OR LODGING
AND PROVISION ALLOWANCE \$ 1.70
ADDITIONAL PAY \$

DEPENDENTS' ALLOWANCE 1/30 OF \$ 52.20 \$ 1.74
TOTAL \$ 9.44 X 7 = \$ 66.08
NO. OF DAYS 185 X \$ 66.08

\$ 66.80

D. WAR SERVICE GRATUITY

\$ 228.80

E. DEDUCTIONS OVERPAYMENT OF
Cleared by F.E.C.B.
OTHER DEDUCTIONS

PAY AND ALLOWANCES \$
DEPENDENTS' ALLOWANCE \$
AND ASSIGNED PAY \$ NIL

F. TOTAL AMOUNT PAYABLE

\$ 228.80

G. YOUR PORTION OF GRATUITY IS—

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

= \$ 228.80

Cheque 115-388- 100-17/45

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.

AT

PREPARED BY EP
CHECKED BY

TREASURY
CHECKED BY
DATE 11/11/45
For Dir. Naval Pay. Accting

SERVICE REPRESENTATIVE

DISTRIBUTION OF SERVICE ESTATES

NAVY

Estates Form "P. 4"

HG

Name.....**WATSON**.....**John C.**.....No.....
Surname Christian Names

Lieut. (E).....**R.C.N.V.R.O/S**.....**7-5-44**.....
Rank Unit Date of Death

AMOUNT

L.P.C.....\$ **21.76**

Date.....**2-11-45**.....

Other Credits.....

Total.....**21.76**

SHARE	RELATIONSHIP	NAME AND ADDRESS	AMOUNT
All	Executrix	Mrs. Mary Yvonne Davy Watson, Executrix of the will of John C. Watson (dec'd) c/o Bernard Devlin K.C., 66 St. Peter St., QUEBEC, P.Q.	\$21.76
P4. TO TREAS. 12-11-45 AW			

AUTHORITY					
H.Q. F.E. No.	VOTE	PRI	H.Q. SUB.	OBJ.	AMOUNT
9999	831	00	50	000	\$21.76
CLASSIFIED BY <i>[Signature]</i>			EXAMINED BY <i>[Signature]</i> For Chief Treasury Officer		

DISTRIBUTION APPROVED AND AUTHORIZED

[Signature]
(L. M. FIRTH) Colonel
Director of Estates

AUDITED FOR PAYMENT

For Chief Treasury Officer

Watson J.C. O-76280

In the Superior Court

BE IT REMEMBERED that on this

"A"

IN THE NAME OF GOD, Amen

I, John Crittenden WATSON, Sub Lieut. (E) R.C.N.V.R. of His Majesty's Ship H.M.C.S. STADACONA (NEWBRUNSWICK) being sound of mind, do hereby make this my last Will and Testament: I give and bequeath unto my mother, Mary Seeley Watson, Washington D.C., U.S.A., the benefits of my insurance policy of \$3000 with Confederation Life Association.

2. In the event that the said policy with Confederation Life Association is not payable to the beneficiary, who is my mother, due to the war clause, then I give and bequeath unto my mother the sum of \$1000. from my estate.

3. I give and bequeath unto my wife, Mary Yvonne Davy Watson, 29 1/2 Cameron Street, Dartmouth, N.S. all such Wages, Prize Money, Allowances, and other Sums or Sums of Money, as now are, or hereafter may be due to me for my service on board the said Ship, or any other Ship or Vessel, of the Royal Navy, together with all other my Estate and Effects whatsoever and wheresoever.

And I do hereby appoint my wife, Mary Yvonne Davy Watson Executrix of this my last Will and Testament; and hereby revoking all former Wills by me made, I declare this to be my last Will and Testament.

In Witness whereof I have at Halifax, N.S. hereunto set my hand, this 10th day of December, in the Year of Our Lord One Thousand Nine Hundred Forty Three.

(signed) J. CRITTENDEN WATSON

Signed by the said Testator, as his last Will and Testament, in the presence of us present WITNESSES (sgd) MARY GICLE at the same time, who in the presence at his request and in the (sgd) R.A. MACKENZIE Lt. V. the presence of each other have subscribed our names as Witnesses.

328A19-00130 19-45

P.6

In the Superior Court

Province of Quebec }
District of Montreal }

BE IT REMEMBERED that on this **fourteenth** -----
day of **May** ----- One thousand nine hundred and **forty-five**.

Before me, undersigned, Deputy-Prothonotary of the Superior Court,
for the province of Quebec, in the District of Montreal.

CAME AND APPEARED:

MARY YVONNE DAVY, widow of the late J. Crittenden Watson in his lifetime of the city of Montreal. (By Bernard Devlin, advocate, her attorney).

Who, by virtue of my Fiat upon **her**----- petition presented to me
this day produced the ----- Last Will and Testament

**made in the form derived from the laws of England
in the presence of two witnesses** -----

of the **said**----- late **Sub Lieutenant JOHN CRITTENDEN
WATSON lost at sea on May 7th. 1944**-----

and prayed to be permitted to make Proof of the said Will, and that Probate
thereof be granted; and due Proof of the said Will having been made, before
me, this day, as appears, by the deposition hereunto annexed, I declare the
said Will hereunto also annexed, dated the **10th December 1943**-----

marked with letter "A" to be Well and Duly Proved, and I DO hereby OR-
DER that the said Will be deposited in the Archives of the said Superior Court,
at Montreal, and be registered in the register of Probates of the said Court,
and that authentic copies of the said Will be given according to law.

Given under My Hand and the Seal of the said Superior Court,
at the said City of Montreal.

(Signed)

W.A. BAKER

Deputy-Prothonotary of the Superior Court.

I, the undersigned, do hereby certify that the foregoing -----

Last Will and Testament of the said

JOHN CRITTENDEN WATSON

and the order touching the Probate of the same are true copies of the originals
remaining deposited in the Archives of the Superior Court at Montreal.

Montreal 18th May--- 19 45.

Paul Cardinal

Deputy-Prothonotary of the Superior Court.

Superior Court

Judicial District of Montreal

No. 328

Last Will and Testament of the late

JOHN CRITTENDEN WATSON

John Crittenden Watson

Probated the 14th May 1945

COPY

IN THE NAME OF GOD, AMEN

I, John Crittenden WATSON, Sub Lieut. (E) R.C.N.V.R. of His Majesty's Ship H.M.C.S. STADACONA
(~~now a Patient in~~),

*If in Hospital or in Hospital Ship.

Insert the degree of relationship (if of any) and place of residence of the Legatee or Legatee.

See instructions on the back hereof.

being sound of mind, do hereby make this my last Will and Testament: I give and bequeath unto my mother, Mary Seeley Watson, Washington D.C., U.S.A., the benefits of my insurance policy of \$3000 with Confederation Life Association.

2. In the event that the said policy with Confederation Life Association is not payable to the beneficiary, who is my mother, due to the war clause, then I give and bequeath unto my mother the sum of \$1000. from my estate.

3. I give and bequeath unto my wife, Mary Yvonne Davy Watson, 29½ Cameron Street, Dartmouth, N. S.

all such Wages, Prize Money, Allowances, and other Sum or Sums of Money, as now are, or hereafter may be due to me for my service on board the said Ship, or any other Ship or Vessel, of the Royal Navy, together with all other my Estate and Effects whatsoever and wheresoever.

Insert the degree of relationship (if of any) and place of residence of the Executor or Executors.

And I do hereby appoint my wife, Mary Yvonne Davy Watson

Executor of this my last Will and Testament; and hereby revoking all former Wills by me made, I declare this to be my last Will and Testament.

In Witness whereof I have at Halifax, N. S. hereunto set my hand, this 10th day of December, in the Year of Our Lord One Thousand Nine Hundred Forty Three.

Signed by the said Testator, as his last Will and Testament, in the presence of us present at the same time, who in his presence at his request and in the presence of each other have subscribed our names as Witnesses.

Witnesses

John Crittenden Watson
Mary Seeley Watson
R. Macklemore

NOTE.—As Wills of Petty Officers, Seamen, and Marines must be executed with the formalities required by the Law of England in the case of other persons, every such Will must be executed in the presence of, and be attested by, two disinterested Witnesses.

Where the Will is made on board one of His Majesty's Ships, one of the two requisite attesting Witnesses shall be a Commissioned Officer, Chaplain, or Warrant or Subordinate Officer belonging to His Majesty's Naval or Marine or Military Force.

Where the Will is made elsewhere than on Board one of His Majesty's Ships, one of the two requisite attesting Witnesses shall be a Commissioned Officer, or Chaplain, or Warrant or Subordinate Officer, or the Governor, Agent, Physician, Surgeon, Assistant-Surgeon, or Chaplain of a Naval Hospital at home or abroad, or a Justice of the Peace, or the Incumbent, Curate, or Minister of a Church or Place of Worship in the Parish where the Will is executed, or a British Consular Officer, or an Officer of Customs, or a Notary Public, or a Solicitor, or in Scotland a Law Agent.

A Will made by any person while serving as a Seaman or Marine will not be valid for any purpose if it is written or contained on or in the same Paper, Parchment, or Instrument with a Power of Attorney.

The Certificate on the back hereof, is to be signed by the person by whom the Will is prepared.

John
15.12.43

DEPARTMENT OF NATIONAL DEFENCE

ESTATES BRANCH

OTTAWA CANADA

The reverse side of this paper is hereby certified to be a true photostatic copy of a Will on file at this Branch of John Crittenden Watson named therein, who died on the 7th day of May 1944, while serving in the Canadian Navy on Active Service.

Dated at Ottawa, this

11th day of April, 1945.



N.O. Seagram
.....
(N.O. Seagram) W/C.
Notary Public in and for
the Province of Ontario.

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

Mrs. Mary Watson,
29 $\frac{1}{2}$ Cameron Street,
Dartmouth, N.S.

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

and the following number quoted:—

H.Q. NS. O-76380 FD. 616.

DEPARTMENT OF NATIONAL DEFENCE
ESTATES BRANCH
OTTAWA, ONT.

September 15, 1944

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

WATSON, John Crittenden, Lieutenant (E)

6-76380, R.C.N.V.R.

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/

Phew Pub. 3.5924

H. Weiden
Commander
Director 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:

Degrees of Relationship	RELATIVES required to be accounted for	INFORMANT'S STATEMENT		
		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 Deceased.....	Mary Yvonne Vincow Watson	25	26 Sweetland Ave. Ottawa, Ont.
2	Children of the Deceased and dates of their Births.....			
3	Father of the Deceased.....	John Jordan Crittenden Watson	54	Sept. 9 - 1939
4	Mother of the Deceased.....	Mary Sealey Watson	52	3800 14 th St N.W. Washington 11-D.C.
5	Brothers of the Deceased	Full Blood		
		Half Blood		
6	Sisters of the Deceased	Full Blood	22	3800 14 th St. N.W. Washington 11-D.C.
		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	

ANSWER FULLY EACH QUESTION ON THIS PAGE
PARTICULARS AS TO IDENTITY

8	Full names of the deceased.	John Crittenden Watson
9	Date of his birth.	July 28 th 1918
10	Place and date of his marriage.	Ottawa, Ont. August 4, 1943
11	Place and date of his parents' marriage.	Yarmouth, Nova Scotia Oct. 3 - 1917

PARTICULARS OF DOMICILE

12	Place where deceased was born.	Yarmouth, Nova Scotia
13	State, in order, the Province, State and/or County in which he resided before enlistment and the period of time in each.	(a) Nova Scotia 2 years (b) Batavia, B. I. 5 years (c) Nova Scotia 1 year (d) Wales, B. I. 2 years
14	Nature of employment before enlistment.	Construction Engineer
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.	<u>Montreal, P. Que.</u>

PARTICULARS OF ESTATE

17	Did he leave a Will? If in your custody, please forward.	naval will.
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?	yes. <i>dated 2-19-43</i> <i>8-11-44</i> <i>permission for</i> <i>will 1943-1944</i> <i>made by 1943</i>
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?	Bank of Montreal - University and St Catherine sts. Montreal, Que. amount? yes.
20	Amount of War Savings Certificates held by deceased. Indicate where located.	if any? Safety deposit Bank of Montreal - University & St Catherine sts. B. I. each
21	Amount of Victory Loan Bonds held by deceased. Indicate whether registered or bearer and where located.	number? Safety deposit box Bank of Montreal, U. St C. St. Br.
22	If deceased had life insurance, name companies and amount payable under each policy and the person named as beneficiary therein.	Monarch Life Insurance Co. 2 policies - amount?
23	Describe other assets, if any, and estimated value thereof. Use space on page 4 if necessary.	(over)

OTHER PARTICULARS

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.	
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.	

(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 or elsewhere in the North American zone, and if a relative has already paid those expenses the Government will reimburse such relative to the extent of the amount authorized in the Regulations. Any amount of such expenses in excess of those authorized in the Regulations is not payable by the Government nor is it chargeable against the service estate of the deceased.)

(PLEASE TURN OVER)

Demille, Quebec according to records.

DECLARATION

*Insert degree of relationship for example, "Widow", "Father", "Brother", etc.

I hereby declare that all the particulars shown on this form are correct, and a true and complete statement of all the relatives that the deceased ever had in the degrees specified; and that I am the

* Widow 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.

Mary G. Watson { Signature of Informant
26 Sweetland Ave. Ottawa, Ont. Address

CERTIFICATE

I hereby certify that to the best of my knowledge and belief Mrs Nancy

*See above.

G. Watson { Name of informant } is the* Widow of the Deceased above described. The above Declaration was made by the Informant and signed in my presence.

Dated at Ottawa Ont this 24th day of October 19 44.

Signature of Clergyman, Priest, Magistrate, Commissioner or Notary Public or Commissioned Officer of any of His Majesty's Forces.

John A. Aylen Qualification A Commissioner etc.
Address 85 Sparks St. Ottawa

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

- 137 (e) Scotland - 4 years
(f) Washington D.C. - 3 years
(g) Nova Scotia - 2 years
(h) Montreal P.Q. - 5 years

22 - Confederation Life Association
\$3000.00
Mary Seeley Watson

OTHER PARTICULARS

DOMINION BUREAU OF STATISTICS—QUEBEC DEATH TRANSCRIPT

Do not
write in
this space

1. PLACE OF DEATH		Municipal county At Sea		Official name of civil municipality or township		Place an X over the word which applies to this municipality or this territory City Town Village Parish Township	
2. LENGTH OF STAY		(a) In hospital or institution		(b) In municipality where death occurred		(c) In Province	
3. NAME OF DECEASED		Surname WATSON (Block letters)		Given names John Crittenden		Do not write in this space	
4. RESIDENCE		Street 1514 Crescent Street,		No.		Municipal county Quebec	
5. SEX		6. NATIONALITY (Citizenship)		7. RACIAL ORIGIN		8. Single, Married, Widowed or Divorced (Write the word)	
Male		Canadian				Married	
9. If married give name of wife or husband of deceased							
10. BIRTHPLACE (Province or Country) Yarmouth, Nova Scotia.							
11. DATE OF BIRTH July 28 1918 (Month) (Day) (Year)							
12. AGE OF DECEASED Years 25 Months 10 Days 10 If less than one day old							
13. Trade, profession or kind of work, as spinner, teamster, office clerk, etc. Engineering							
14. Kind of industry or business, as cotton-mill, lumbering, bank, etc. Combustion Engineering Corp. Ltd., Montreal.							
15. Date deceased last worked at this occupation							
16. Total years spent in this occupation							
17. NAME							
18. BIRTHPLACE (Province or Country)							
FATHER Frankfort, Ky., U.S.A.							
MOTHER (Maiden Name) Nova Scotia							
19. Place of burial, cremation or removal Body not recovered.							
20. Date of burial 19							
21. PLACE OF REGISTRATION OF THIS BURIAL							
(a) Name of parish or church							
(b) Civil municipality of							
(c) Municipal county							
(d) Date 19 (Month) (Day) (Year)							
22. Date of death May 7th 1944 (Month) (Day) (Year)							
23. I HEREBY CERTIFY that I attended deceased from 19 to 19 and last saw him alive on 19							
24. CAUSE OF DEATH							
I Immediate cause Missing, presumed dead when H.M.C.S. "VALLEYFIELD" was torpedoed and sunk by enemy action in the Atlantic.							
Give disease, injury or complication which caused death, not the mode of dying, such as heart failure, asphyxia, asthenia, etc.							
Morbidity conditions, if any, giving rise to immediate cause (stated in order proceeding backwards from immediate cause)							
II Other morbidity conditions (if important) contributing to death but not causally related to immediate cause							
III If a communicable disease is mentioned on this certificate, give (a) Date of appearance 19 (b) Duration of disease days							
25. If a woman, was there a puerperal condition?							
26. Was there a surgical operation? Date of 19							
State findings Was there an autopsy?							
27. If death was due to external causes (violence) fill in also the following:—							
Accident, suicide or homicide Date 19 (State which)							
Manner of injury (How sustained)							
Nature of injury							
Specify whether injury occurred in industry, in home, or in public place							
Signed M.D.							
Address Date 19							
28. Signature of person who fills in the form (curator, coroner, hospital authority, etc.)							
29. Name of clergyman in charge of Register of Civil Status in which registration of this burial was made.							
Paymr. Car. R.C.N.R. Officer i/c Naval Personnel Records.							
This signature authorizes the collector to accept this form as authentic.							
Naval Service Headquarters, Ottawa. (Voir l'autre côté pour le français)							

CLASS OF SERVICE

FULL RATE

DAY LETTER

TELEGRAM

RECEIVER'S NO.....

TIME FILED.....

CHECK.....

MRS. MARY WATSON
20 1/2 CAMERON ST.,
DARTMOUTH, N.S.

FROM: NAVAL SERVICE HEADQUARTERS,
OTTAWA, ONTARIO

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

HUSBAND

LIEUTENANT (E) JOHN CRITTENDEN WATSON

RCNVR

(Father, Husband, Son, Etc.)

(Full Name)

OFFICIAL NO.....

(Rating)

IS MISSING AT SEA. LETTER FOLLOWS.

Strike out
parts not
applicable

HAS BEEN KILLED IN ACTION

HAS DIED OF WOUNDS RECEIVED IN ACTION

IS MISSING, BELIEVED ~~KILLED IN ACTION~~
(LOST AT SEA)

= NAVAL

S. 2575

100 pads of 100-12-40 (8548)
N.S. 815-9-2575

0-75380 (Pers.N.)
FILE.....
DRAFTED BY... NPR per TFH
CHECKED BY... *ms* *mb*
DATE... 8 May, 1944

CHARGE NAVAL

TFH:PMB

REGISTERED
AIR MAIL

FILE: N.S. 0-76380
(Pers.N.)

29

8th May, 1944

Dear Mrs. Watson:

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 husband, Lieutenant (E) John Crittenden Watson, Royal Canadian Naval Volunteer Reserve, is missing at sea.

According to the report received, your husband 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.

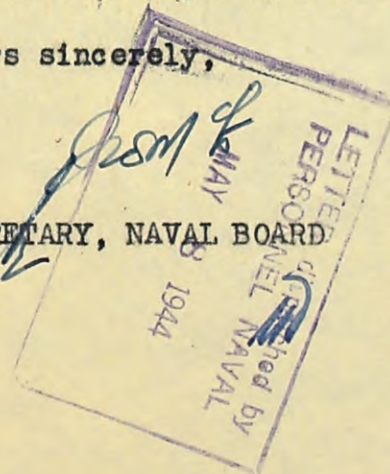
It is requested that you will regard as confidential anything beyond the fact of your husband's loss on war service, until such time as an official announcement is made, as this information might prove useful to the enemy.

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 husband has helped to maintain.

Yours sincerely,

SECRETARY, NAVAL BOARD

Mrs. Mary Watson,
29½ Cameron St.,
DARTMOUTH, N.S.



TFH/IA

REGISTERED
AIR MAIL

N.S. O-76380 (Pers. N)

- NAVAL SERVICE -

34

11th May, 1944.

Dear Mrs. Watson:

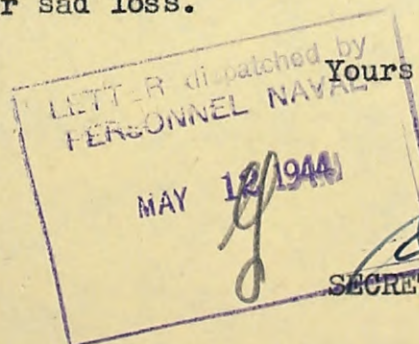
Further to my letter of the 8th of May, 1944, particulars respecting the loss of H.M.C.S. "Valleyfield" from which your husband has been reported "missing", are being released to the press, and I am accordingly passing them on for your information.

H.M.C.S. "Valleyfield", in which your husband was taking passage, 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. Mary Watson,
29½ Cameron St.,
DARTMOUTH, N.S.

P.M.

REGISTERED

FILE NO: N.S. 0-76380 PERS. (N)

48

30th August, 1944.

Dear Mrs. Watson:

Further to my letter of the 11th of May, 1944, in view of the length of time that has elapsed since your husband, Lieutenant (E) John Crittenden Watson, 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,

SECRETARY, NAVAL BOARD.

Deputy

*Noted on Estate Card
6.9.44 G.P.*

Mrs. Mary Watson,
29-1/2 Cameron Street,
Dartmouth, N. S.

Royal ✓ Canadian ✓
Message condolence
Date Sent 30/8/44 NPR 5

*BJ 30/9/44
NORIS
P.M.*