

V61371
ARMSTRONG
FREDERICK

THOMA



ATTESTATION FORM (HOSTILITIES FORM)

NS 92311

FOR MEN OF THE ROYAL CANADIAN NAVAL VOLUNTEER RESERVE

SURNAME ARMSTRONG OFFICIAL No. V-61371
 CHRISTIAN NAMES FREDERIC THOMAS MARRIED, SINGLE OR WIDOWER SINGLE

PERMANENT ADDRESS	RELIGION
<u>Utterson, Ontario.</u>	<u>United Church</u>

DATE OF BIRTH	*PLACE OF BIRTH	NAME AND ADDRESS OF NEXT OF KIN
<u>30 August 1923</u>	Town <u>Ashworth</u>	Mother <u>Sarah</u>
*Original Nationality of:	County <u>Muskoka Dist.</u>	<u>Same Address.</u>
Father <u>Canadian</u>	Province <u>Ontario.</u>	
Mother <u>Canadian</u>		

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

(A) **PERSONAL DESCRIPTION ON ENROLMENT**

HEIGHT	CHEST MEASUREMENT	HAIR	EYES	COMPLEXION	WOUNDS, SCARS, MARKS
Feet <u>5</u>	Inflated <u>36</u>	<u>Brown</u>	<u>Blue</u>	<u>Med</u>	<u>None.</u>
Inches <u>10½</u>	Deflated <u>34</u>				
<u>146½</u>	Mean <u>35</u>				

EDUCATIONAL STANDING	TRADE OR CALLING AND IN WHOSE EMPLOY
<u>5 years of High School</u>	<u>Lumber Sealer,</u> <u>Haynes Lumber Company Limited,</u> <u>Bayville, Ontario.</u>

DATE OF ENROLMENT	RATING FOR WHICH ENROLLED	H.M.C.S. ESTABLISHMENT IN WHICH ENROLLED
<u>DIV. STRENGTH</u> <u>18th May, 1943.</u>	<u>ORDINARY SEAMAN</u> <u>R.C.N.V.R. (TEMP)</u>	<u>H.M.C.S. "YORK"</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, Air Force, 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	TO

(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.

(5) On being enrolled as a member of the Royal Canadian Naval Volunteer Reserve, I undertake and 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 when called and 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 naval establishment 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, until called into active service, 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.

(e) I have not been induced to enter as ORD. SMN. by the prospect of being transferred at some future date to any other branch or rating.

Dated this 18th day of May, 1943.

Signature of applicant Fred Armstrong

(C) CERTIFICATE OF ATTESTING OFFICER

I hereby certify that all the foregoing statements were made by the volunteer above named and that he has made and signed the above declaration in my presence on this 18th day of May, 1943.

My authority for attestation is.....

[Signature]
Signature and rank of Attesting Officer.
Lieutenant R.C.N.V.R.

(D) OATH OF ALLEGIANCE

I, Frederic Thomas Armstrong. 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 Fred Armstrong

Witness [Signature]

Date 18th May, 1943. Rank Lieutenant R.C.N.V.R.

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

NOTE.—Attestation Form in duplicate, Certificate of Medical Examination (B-207) in duplicate, Occupational History Form in triplicate and certificates of previous service are to be forwarded to Naval Service Headquarters **immediately** after attestation.

Certificates of previous service will be returned after examination.

ANSWER FULLY EACH QUESTION ON THIS PAGE
PARTICULARS AS TO IDENTITY

8	Full names of the deceased.	Frederick Thomas Armstrong
9	Date of his birth.	Aug. 30 th . 1924.
10	Place and date of his marriage.	—
11	Place and date of his parents' marriage.	Toronto March 17 th 1920.

PARTICULARS OF DOMICILE

12	Place where deceased was born.	Ashworth P.O. Muskoka, Ont.
13	State, in order, the Province, State and/or County in which he resided before enlistment and the period of time in each.	(a) Muskoka. Ont. (b) (c) (d)
14	Nature of employment before enlistment.	Farming & Lumber Mill
15	State whether he owned the premises in which he lived, and, if so, where situated.	at home at Etterson. Ont.
16	Name place where deceased stated he intended to make his permanent home.	—

PARTICULARS OF ESTATE

17	Did he leave a Will? If in your custody, please forward.	Not at home
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?	—
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?	I think he had account in P.O. bank at Halifax. please investigate
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.	1. at home.
22	If deceased had life insurance, name companies and amount payable under each policy and the person named as beneficiary therein.	no
23	Describe other assets, if any, and estimated value thereof. Use space on page 4 if necessary.	—

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.	none
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.	no

(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.)

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
* Father and Mother of the deceased.

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

(Father) Frederic James Armstrong
(Mother) Sarah Armstrong {Signature of Informant
Utterson Muskoka Ontario Address

CERTIFICATE

I hereby certify that to the best of my knowledge and belief Mrs Sarah Armstrong {Name of informant} is the* Mother of the Deceased above described, and I believe the above Declaration and the Statement of Relatives and of Particulars made by the Informant and signed in my presence to be complete and correct.

Dated Township of Stephenson this 8th day of July 1914
Signature of Clergyman, Priest, Magistrate, Commissioner or Notary Public or Commissioned Officer of any of His Majesty's Forces. Wm Litchfield Qualification Commissioner
Address Utterson Ontario

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

Mrs. Sarah Armstrong,

Utterson, Ontario.

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

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

and the following number quoted:—

H.Q. NS. V.61371 FD.480

DEPARTMENT OF NATIONAL DEFENCE
ESTATES BRANCH
OTTAWA, ONT.

June 28, 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

ARMSTRONG, Frederick Thomas, O.D.

No. V.61371, 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.

HRW/JN

M. P. Wade
Commander Royal Canadian Mounted Police
Administrator of Estates.
for Director

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.....	✓		
2	Children of the Deceased and dates of their Births.....	✓		
3	Father of the Deceased.....	Frederic James Armstrong	56	Utterson. Ont.
4	Mother of the Deceased.....	Sarah J. Armstrong	54	Utterson. Ont.
5	Brothers of the Deceased	Full Blood	Gordon William Armstrong	23. V. 49241.
		of R.C.N. V.R.	—	H.M.C.S. Restigouche.
		Edward Ray Armstrong	18	G.P.O. London.
6	Sisters of the Deceased	Full Blood		
		Half Blood	—	
6	Sisters of the Deceased	Full Blood	Evelyn Louise Armstrong	15
		Half Blood	—	Utterson. Ont.
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	
		✓		

N.V. 17A
75M-4-43 (9523)
N.S. 815-11-17

TRUE COPY
OF THE
CERTIFICATE of the SERVICE of

Herbert Thomas ARMSTRONG

in the Royal Canadian Naval Volunteer Reserve

Training Headquarters	R.C.N.V.R. Division	ICNS 92311
	<i>Toronto</i>	Official Number <i>V-61371</i>
		"
		"

Date of Birth..... *30 August 1923* Name and Address of Nearest Relative or Friend (in pencil)

Place of Birth..... *Asheville, Muskoka Dist; Ont*

Place of Residence..... *Utterson, Ontario* Mother: *Sarah*

Trade brought up to..... *Lumber scaler* same address

Religion..... *United Church*

Can Swim:—P.P.T. () Date..... 19..... Signature.....

P.S.T. () Date..... 19..... Signature.....

PARTICULARS OF SERVICE				MEDALS, DECORATIONS, etc.		
Date of Actual Volunteering	Date of Enrolment or Re-enrolment	Period Volunteered for	Rating on Enrolment or Re-enrolment	Date of		Nature of Decoration
				Award	Presentation	
	<i>18 May 43</i>	<i>Duration 3 months</i>	<i>Ord. Smn.</i>			

PERSONAL DESCRIPTION								
—	Height		Chest (mean)	Weight	Hair	Eyes	Complexion	MARKS, WOUNDS, SCARS
	Feet	Inches						
On Entry.....	5	10 1/4	33	146 1/2	Brown	Blue	Medium	Spil
On re-enrolment—6 years' Service.....								
On re-enrolment—12 years' Service.....								
Further Description if necessary.....								

TRANSFER BETWEEN DIVISIONS			TRANSFER—LISTS A AND B		
From	To	Date	List	Date	Authority

NAVAL TRAINING and ACTIVE SERVICE

Year	
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Wounds Received in Action, Hurt Certificates, Meritorious Service, Special Recommendations, Prizes or other Grants

Date _____
25 Aug
1 Oct

NAVAL TRAINING and ACTIVE SERVICE

[illegible][illegible]

Name Armin Rong Conduct

Name Armin Rong Conduct

[illegible]

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..... FREDERICK THOMAS ARMSTRONG..... (b) Reg'l. No. V61371
2. (a) Arm of service..... NAVY..... (b) Unit..... H.O.N. 1st..... (c) Rank..... ORD. SNA.
3. (a) Date of birth..... 30 Aug. '23..... (b) Have you any dependents?..... No...... (c) Place of residence at time of enlistment..... Utterson, Ontario.
4. (a) Place of enlistment..... Toronto, Ont...... (b) Date of enlistment..... 18 May '43.

PLEASE
LEAVE
BLANK

Section B—EDUCATION AND TRAINING

5. (a) State age on finally leaving school..... 17 years..... (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.)..... 5 years of High School
7. If you attended a university, give name of university and standing or degree secured.....
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?.....
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?.....

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..... Hanes Lumber Co. Limited..... Address..... Bayville, Ontario
19. Nature of employer's business (for instance, "farmer", or "building contractor", or "boot factory", or "iron foundry", or "retail store", etc.)..... Lumber Mill
20. (a) Your specific occupation..... Lumber scaler..... (b) Number of years' experience at this occupation with any employer..... 1 months.
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?..... no

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?..... yes..... (b) Do you feel competent to operate a farm?..... yes..... (c) If so, in what kind of farming?..... Mixed
25. (a) Were you born on a farm?..... yes..... (b) How many years' actual farming experience have you had?..... 6 years..... (c) In what provinces did you have experience?..... Ontario.

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..... ELECTRICAL WORK? RADIO.

DATE..... 18th May..... 1943

SIGNATURE..... Fred Armstrong



Copy To
VWD
ES

MAY 29 1943

Department
only

9

Originators Instructions:
(Indication of Priority,
Intercept Group, etc.)

RESTRICTED

No. of
Groups:

TO: NSHQ
(R) HIGH COMMISSIONER FOR CANADA
HMCS NIOBE
RCN DEPOT HALIFAX

FROM:
CNMO

Write
Across

CASUALTY FIVE A 1 FREDERICK T. ARMSTRONG ORD. SMN. V-61371 ✓ 5

MOTHER MRS. S. ARMSTRONG, UTTASON, ONTARIO. KILLED IN ACTION 9TH. B O C.O. 10

D. 1 ALBERT B.A. ZELEY, A.B. V-37024, MOTHER MRS. AUNIS BAZELEY, 460 MAIN 1

STREET, TORONTO SERIOUSLY WOUNDED (TH. E 1 J. C. BEVERIDGE LIEUT. RCNVR,

FATHER A. F. BEVERIDGE, C RE BANK OF MONTREAL GAGE BARTON BRANCH, HAMILTON

ONTARIO WOUNDED

100955B

I/T CODE

101930Z/6/44

HMJ

9607

System

P/L Code or Cypher

Time of

Operator

Receipt

Despatch

INSTRUCTIONS

(See also Confidential History Sheet.)

Sections II and III (c) to (k).

1. Comparative qualities fall naturally into five main categories :—Exceptional, Above the Average, Average, Below the Average, and Poor.

2. The term "Average" refers to the average of all men holding a similar rating in the Service, and not only to other men holding Confidential History Sheets.

3. To facilitate selection, distinctions finer than those indicated in Paragraph 1 must be employed. Consequently assessment in Sections II and III is to be made by numerical notation on the following lines:—

9 corresponding to Exceptional.

8, 7 or 6 corresponding to Above the Average rating.

5 corresponding to the Average rating.

4, 3 or 2 corresponding to Below the Average rating.

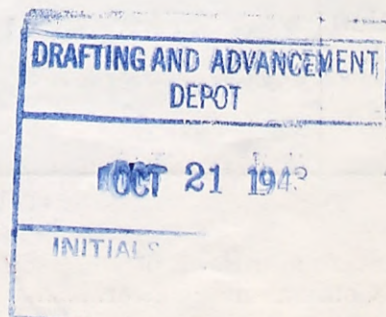
1 corresponding to Poor.

Section VI.

Here insert any amplifying remarks which may facilitate comparison of potential officer-like qualities with other men holding Confidential History Sheets.

† *Note.*

If the report under Section I, (a) or (b) is unsatisfactory, a separate sheet is to be attached stating in what respect it is so, and what action, if any, has been taken in consequence.



CONFIDENTIAL

REPORT on a CANDIDATE for Commissioned Rank

(ON NO ACCOUNT TO BE SENT THROUGH THE SHIP'S OFFICE)

(For instructions see over and Confidential History Sheet.)

187749

Name in full (Surname in block letters)

Date of Birth

Frederic Thomas ARMSTRONG

30th August 1923

Rating and Official Number

Ordinary Seaman

161371

Occasion for Report

Institution of Conf History Sheet in accordance with d.m.o. 3040

Ship or Establishment

HMCS "Cornwallis"

Station

Cornwallis N.S.

Section I.

(a) General Conduct.†

V.G.

(b) Of Temperate habit. Yes or No*

YES.

Section II.

Character.

(c) Power of Command or leadership

(e) Judgment

5

(f) Reliability

7

(d) Zeal and Energy

(g) Initiative

7

Section III.

Social Qualities.

(h) Speech

(j) Manners

7

(i) General appearance

(k) Facility in games and sports

6

Section IV.

Physical Qualities (General remarks on physique generally, health and bearing, sight and hearing).

Good average physique, health very good - good hearing - sight & hearing normal.

Section V.

Educational and Professional qualifications (or H.E.T. in three subjects).

(l) If passed E.T. II

Date

(m) If passed professionally for Leading Seaman

Date

(n) If appeared before Fleet Selection Board

Date

Result

(o) Other Educational attainments

Section VI.

General opinion of rating:

This rating is very keen & intelligent - always neat. Though he appears immature at times - he has good qualities of leadership and is a good influence on those serving with him.

*Delete as requisite.

†See note overleaf.

Signature and Rank of
Commanding OfficerJ. Edwards
Captain, R.C.F.

Noted in Service

Date 1st October 1943
Records by B.E.

LA/HS

REGISTERED
AIR MAIL

File No: N.S. V-61371 PERS. (N)

12 June, 1944.

Dear Mrs. Armstrong:

It is with deepest regret that I must confirm the telegram of the 10th of June, 1944, from the Minister of National Defence for Naval Services, informing you that your son, Frederic Thomas Armstrong, Ordinary Seaman, Official Number V-61371, Royal Canadian Naval Volunteer Reserve, has been killed in action.

According to the report received from overseas your son was killed in action during recent operations on the 9th of June, 1944. It is regretted that no further particulars are available at this time. You may rest assured, however, that as soon as additional information has been received you will be informed immediately.

Please allow me to express sincere sympathy with you in your bereavement on behalf 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. Sarah Armstrong,
UTTERSON, Ont.

Despatched by
Sec. N. B.

Date 13/6/44
Time 1230

NAVY DEPARTMENT
RECEIVED
JUN 12 1944

File Number. V61371

SERVICE

NAME: ARMSTRONG Frederic Thomas

O.N. V-61371 PERS.(N)

PRESENT RANK/RATING: Ord.Smn.

DATE TAKEN ON ACTIVE SERVICE: 28-5-43

SERVICE

SHIP OR ESTABLISHMENT

From

To

HMCS York(Div.Str.Toronto)

18-5-43

" " (Act.Serv. ")

28-5-43

" Protector II

2-6-43

" Cornwallis

21-7-43

" Stadacona

30-10-43

" Niobe

15-12-43

HMS Mantis

16-1-44

12

WILL: #1831

NAME & ADDRESS OF

NEXT OF KIN: Mother: Mrs. Sarah Armstrong,
Utterson, Ont.

Canada High Seas
J.F.L.
14-6-44

DISCHARGED PREVIOUSLY?

REASON:

DATE:

Initialed by: M.A.D.

Date: 14-6-44

Section: 3 R.C.N.V.R.

Naval Personnel Records.

(TO BE COMPLETED IN INK.)

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.

CERTIFICATE of the SERVICE of

Frederic Thomas ARMSTRONG

in the Royal Canadian Naval Volunteer Reserve

Training Headquarters	R.C.N.V.R. Division	Official Number
	<i>H.M.C.S. "Yank"</i>	<i>✓-61371</i>
		"
		"

Date of Birth	<i>30 August 1923</i>	Name and Address of Nearest Relative or Friend (in pencil)
Place of Birth	<i>Ashworth, Muskoka Dist, Ontario</i>	<i>Mother</i>
Place of Residence	<i>Utterson, Ontario</i>	<i>Frank</i>
Trade brought up to	<i>Lumber scaler</i>	<i>Same address</i>
Religion	<i>United Church</i>	

Can Swim:—P.P.T.	Date	19	Signature	Rank
P.S.T.	Date	19	Signature	Rank

PARTICULARS OF SERVICE				MEDALS, DECORATIONS, etc.		
Date of Actual Volunteering	Date of Enrolment or re-enrolment	Period Volunteered for	Rating on Enrolment or Re-enrolment	Date of		Nature of Decoration
				Award	Presentation	
	<i>18 May '43</i>	<i>Duration of Hostilities</i>	<i>Chd. hon.</i>			

PERSONAL DESCRIPTION								
—	Height		Chest (mean)	Weight	Hair	Eyes	Complexion	MARKS, WOUNDS, SCARS
	Feet	Inches						
On Entry.....	5	10 ¹ / ₄	35	146 ¹ / ₂	Brown	Blue	Medium	Fil.
On re-enrolment—6 years' Service.....								
On re-enrolment—12 years' Service.....								
Further Description if necessary.....								

TRANSFER BETWEEN DIVISIONS			TRANSFER—LISTS A AND B		
From	To	Date	List	Date	Authority

NAVAL TRAINING and ACTIVE SERVICE

Year	SHIP OR ESTABLISHMENT	NON-SUB. RATE	RATING	FROM	TO	CAUSE OF DISCHARGE
			Divisional Strength			
	"Yak"		Ord.	18 May '43	27 May '43	
	York		On Active Service	28 May '43		
	Protector II		Ord. Jun	28 May '43	2 June '43	
	Cornwallis		Ord. Jun	3 June '43	20 July '43	
	Stadacona		—	31 July '43	29 Oct '43	
	Niobe		—	30 Oct '43	14 Dec '43	
	Niobe		—	15 Dec '43	15 Jan '44	
	Mantis		—	16 Jan '44	26 Feb '44	
	— (M.L. 593)		—	27 Feb '44	28 Mar '44	
	Niobe		—	29 Mar '44	11 May '44	
	Niobe (M.T.B. 464)		—	12 May '44	27 May '44	
	Niobe (MTB 464)		A/A.B.	28 May '44	9 June '44	DD 20437

Wounds Received in Action, Hurt Certificates, Meritorious Service, Special Recommendations, Prizes or other Grants

Date	Details	Captain's Signature
15 Nov '43	S.C. 22/96476 16-0 Emb. leave	

GE

7[illegible]

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.

CERTIFICATE of the SERVICE of

Frederic Thomas **ARMSTRONG**

in the Royal Canadian Naval Volunteer Reserve

1.C.N.S. 92311

Training Headquarters	R.C.N.V.R. Division	Official Number <i>✓-61371</i>
	<i>H.M.C.S. "York"</i>	"
		"

Date of Birth	<i>30 August 1923</i>	Name and Address of Nearest Relative or Friend (in pencil) <i>Mother</i> <i>Sarah</i> <i>Same Address</i>
Place of Birth	<i>Ashworth, Muskoka Dist, Ontario</i>	
Place of Residence	<i>Tatamou, Ontario</i>	
Trade brought up to	<i>Lumber scaler</i>	
Religion	<i>United Church</i>	

Can Swim:—P.P.T.	Date	19	Signature	Rank
P.S.T.	Date	19	Signature	Rank

PARTICULARS OF SERVICE				MEDALS, DECORATIONS, etc.		
Date of Actual Volunteering	Date of Enrolment or re-enrolment	Period Volunteered for	Rating on Enrolment or Re-enrolment	Date of		Nature of Decoration
				Award	Presentation	
	<i>18 May '43</i>	<i>Duration Ind. Hostilities</i>	<i>Ind. Award</i>			

PERSONAL DESCRIPTION								
—	Height		Chest (mean)	Weight	Hair	Eyes	Complexion	MARKS, WOUNDS. SCARS
	Feet	Inches						
On Entry.....	5	10 ¹ / ₄	35	146 ¹ / ₂	Brown	Blue	Medium	Fil.
On re-enrolment—6 years' Service.....								
On re-enrolment—12 years' Service.....								
Further Description if necessary.....								

TRANSFER BETWEEN DIVISIONS			TRANSFER—LISTS A AND B		
From	To	Date	List	Date	Authority

NAME IN FULL HK MST RONG: Gundersen, Thomas RANK/RATING P/P/P OFF. NO. 161371 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			
	28.5.43											1939-45	1	Star
Niobe	15.12.43	15.1.44	32	U.K.								ATLANTIC	2	
M. S. Mandis	16.1.44	26.2.44	42	U.K.								FRANCE G.	1	Star
M. L. 593	17.2.44	28.3.44	31	U.K.								AFRICA		
Niobe	29.3.44	11.5.44	44	U.K.								PACIFIC		
M.T.B. 464	12.5.44	9.6.44	29	U.K.								BURMA		
Head 9.6.44												ITALY		
												DEFENCE		
												C.V.S.M.	2 & Clasp	
												" CLASP		
												WAR 1945	1	Medal
												WAR 1915		
												VERIFIED BY <i>[Signature]</i>		
VERIFIED BY <i>[Signature]</i>				VERIFIED BY								DIR. OF PERSONNEL RECORDS.		

V61 371

30 Aug. 1923

Lumber Scaler

5 years High School

Uttersen

.....Province, etc

Ont.

Town

EXAMINATIONS, CERTIFICATES, ETC.

BRIEF PARTICULARS OF WARRANT OR C.M. PUNISHMENTS AND C.P. CHARGESDATE _____

SECOND CLASS FOR CONDUCT

From

To

H.Q. 35-35M-2-43 (8309)
N.S. 815-7-35

O.H.F. Received

.....
Last Will & Testament No.1831 Received

W. S. G.
APPLICATION
4976
RECEIVED

13/6/45

1 2 3 4 5 6 7 8 9 10 11 12 13 14 15 16 17 18 19 20 21 22 23 24 25 26 27 28 29 30 31 32 33 34 35 36 37

V61371

OFFICIAL NUMBER

NAME ARMSTRONG
(Surname)

Frederic Thomas
(Given Names)

P.L.B.
OFFICIAL NUMBER

V61371

Ship or Establishment	Rating	From			Remarks	Character	Efficiency	Date			Non-Sub. Rating	Qualified			Qualified	Month	Year
		Day	Month	Year				Day	Month	Year		Day	Month	Year			
HMCS "York"	Ord. Smn.	18	5	43	Div. Str. Toronto	V.G.	Sat.	31	12	43							
"	"	28	5	43	Active Service D.L. 28-5-43	V.G.	Sat.	9	6	44							
Protector II	"	2	6	43	D.L. 2-6-43.												
Cornwallis	"	21	7	43	WRD #21.												
Stadacona	"	30	10	43	DRD H-3040												
Niobe	"	15	12	43	DRD S. 12. P.-31												
HMS Mantis	"	16	1	44	DRD #385 P.111												
" (ML593)	"	27	2	44	Serv. Cert.												
Niobe	"	29	3	44	" "												
" (M.T.B.464)	"	12	5	44	" "												
" "	A/A.B.	28	5	44	" "												
DISCHARGED	"	9	6	44	"Killed in Action" W/T 10-6-44												

GENERAL REMARKS

C.W. Form 1a received 1-10-43

MEMORIAL CROSS SENT TO: Mother,
Mrs. Sarah Armstrong,
UTTERSON, Ontario. (27-6-44).

DATE OF BIRTH		PLACE	CIVIL	OCCU.	REL.	ED	PERM.	RESIDENCE	PREV.	ENL.	RANK OR RATE ON ENLISTMENT			
BY	MO	YR.	BIRTH	MAIN	SUB	GRON	P.	CTV.	TOWN	SERV.	DIV.	A	BR	RA
30	8	23	11	223	0	40	51	31	00	0	23	0	08	95
ENLIST. DATE		ACT. SERV. DATE		STR.	ACT. SERV. DATE		SHIP OR		RANK OR RATE					
BY	MO	YR.	BY	MO	YR.	CAT.	BY	MO	YR.	ESTAB.	A	BR	RANK	
18	05	43	28	05	43					9740	0	08	95	
SENIORITY		STR.	NON-SUB		M	CODED		CHECKED						
BY	MO	YR.	CAT.	A	B	ST.								
28	05	43	13	00	00									

DUPLICATE

Six copies to be rendered to Naval Service Headquarters

REPORT OF THE DEATH OF AN OFFICER, MAN OR BOY

H.M.C.S. ~~XXXXXXXXXX~~ at Portsmouth

Name ARMSTRONG, Frederick Thomas
(Christian names in full)

Rank of Rating Ordinary Seaman Official No. V. 61371 R.C.N.V.R.
(If unknown, date of first entry)

Place of Birth Ashworth, Ontario Date of Birth 30 August, 1923.

Occupation in Civil Life Lumber scaler Religion United Church

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 18 May, 1943 to 9 June, 1944.

Date of Death 9th June, 1944 Place of Death At Sea

Cause of Death Killed in action with the enemy
(If due to accident, violence, or enemy action, particulars to be stated briefly)

Nearest known relative or friend. { Name Mrs. F. J. Armstrong Relationship Mother
Address Utterson, Ontario, CANADA

Date on which the above was informed by Ship (To CHMO) See S.O. 29th Flotilla's Signal 091900B/6/44 (June)

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 At Sea Date of Burial 9th June, 1944
(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

(SGD) J. Adam, Lieut. RCNVR
for Commanding Officer,

June 16th 1944

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

In all cases this Form is to be sent in addition to the Report by Telegraph required by the Regulations.

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

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

NS. V-61371

~~Copy for retention by Allots. (N) re record purposes~~
Copy to remain on file

MEMORANDUM

23

TO: Allotments (N)

Re Frederick T. Armstrong, Ord. Smm. V-61371
Discharged Dead 9th June 1944

1. It is requested that all allotments for the above named, if not already stopped, be stopped with last payment made 30th June 1944
2. Please acknowledge and list all allotments stopped together with rate of Marriage and/or Dependents' Allowance if any in force.

C. F. G. Hill

(C.F.G. Hill)
A/Pay. Captain, R.C.N.V.R.
Director of Naval Pay Accounting.

DATE 12-6-44

II

D.N.P.A.

1. Undernoted allotment(s) plus bonus in force has (have) been stopped with last payment made June 30, 1944. 31 July/44

Mrs. Sarah Armstrong,
Utterson, Ont.

\$15.00

2. Rate of Marriage Allowance in force: NIL.
3. Rate of Dependents' Allowance in force: NIL.

hall

Allots. (N)

4/6/44

DATE

Noted 15-6-44 DP
D.N.P.A.

STATEMENT OF ACCOUNT

True extract from the ledger of H.M.C.S. "NIOBE Section 6B" ending 30 September 1944

List 229 P. No. 122/29 (Name) ARMSTRONG, Frederick Rank Rating A/A.B. No V-61371

When entered Date of appearance Whither discharged D.D.

	\$	c.
CREDIT from former account	25	72
Difference of,		
Pay as Ord. Sum over 6 mos from 26 Nov to 27 May (184 days at \$ 25 a day)	46	00
(Rank Rating)		
Diff. as A/A.B. " 28 May " 30 June (34 " 60 ")	20	40
" " " " " " " " " " " "		
" " " " " " " " " " " "		
" " " " " " " " " " " "		
Kit Upkeep Allowance		
OTHER CREDITS:		
Total credits	92	12
DEBT from former account		
PAYMENTS:—		
	1st	2nd
	3rd	4th
	5th	
	\$ c.	\$ c.
1st month		
2nd month		
3rd month		
Total		
Total		
Total		
Allotment	Stopped Paid 30 June 15.00	
Pension deduction (Officers) charged to	of	
Hospital stoppages		
Mulcts		
OTHER CHARGES: H.M.C.S. "NIOBE" Official Receipt R-545		92.12
Total debits	92	12
Balance Cr. or Dr.		N I L

Number of days actually victualled during period mentioned above NIL

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

Date 21st August, 1944 19

Payr-Lieut R.C.N.V.R. ACCOUNTANT OFFICER

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 ARMSTRONG, Frederick Rating A/A.B.
Official No. V-61371 H.M.C.S. "NIOBE" Sec 6B 229 Pool List 12²/29
Who* D.D. on the 9th June 19 44

	\$	cts.
Net sum due on ledger on account of Wages.....		
Proceeds of sale of Effects charged against Wages, brought from the other side		
CASH—	\$	cts.
Proceeds of sale of Effects, brought from the other side.....		
Found amongst Effects.....	NIL	
Debts collected \$.....		
Cash deposited by official Receipt No. <u>R-545</u>		92.12
Cash debited in the Accountant Officer's Cash Acct.....		
If in debt in ledger, amount to be stated (in red ink).....		
Rate of allotment (in words) <u>Fifteen Dollars</u> charged to <u>30¹ June</u>		
Name of ship from which transferred <u>H.M.C.S. "NIOBE"</u>		
Total†..... Creditor.....		92.12

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. "NIOBE" amounting to a net balance†..... Creditor
of..... Ninety-two dollars..... twelve cents.

Dated on board H.M.C.S. "NIOBE" at GREENOCK
Scotland this 21st day of August, 19 44

Approved Accountant Officer
Payr-Lieut Cdr R.C.N.V.R.
Payr-Lieut R.C.N.V.R. { Initials of the Assistant
Commanding Officer. Accountant Officer
Captain, R.C.N.V.R.

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

10M-8-43 (1464)
H.Q. N.S. 815-9-45

ACCOUNT OF SALE OF THE EFFECTS

SOLD before the Mast, the..... day of..... 19.....

[illegible]

..... { Lieutenant or Officer who
attended at the sale
of the Effects.

The whole of the Effects which were left by the person named on the other side, are enumerated in the above Account and on the other side thereof.*

Signature _____ Rank _____	Signature _____ Rank _____
-------------------------------	-------------------------------

When the effects are those of an Officer, this statement is to be signed by two of his messmates; when they are those of a Petty Officer, Seaman or Boy, it is to be signed by the Executive Officer and by the Master at Arms or a Ship's Corporal.

DISTRIBUTION OF SERVICE ESTATES
NAVY

TL

Estates Form "P. 4"

Name: **ARMSTRONG,** **Frederick. T.** No.: **V61371**
Surname Christian Names

Ord/Smn. **R.C.N.V.R.** **9-6-44**
Rank Unit Date of Death

AMOUNT

Date: **17-4-45**
L.P.C. \$ **121.41**
Other Credits **6.07**
Total **127.48**

SHARE	RELATIONSHIP	NAME AND ADDRESS	AMOUNT
All	Mother	Mrs. Sarah Armstrong, UTTERSON, Ontario. (sole beneficiary under will)	127.48

TO BE FORWARDED BY REG. MAIL DIRECT
P4. TO TREAS. 7-5-45 PW

AUTHORITY					
H.Q. F.E. No.	VOTE	PRI	H.Q. SUB.	OBJ.	AMOUNT
9999	831	00	50	000	\$127.48
CLASSIFIED BY Original Signed by K. L. McCUAIG			EXAMINED BY For Chief Treasury Officer		

DISTRIBUTION APPROVED AND AUTHORIZED

Original signed by

(L. M. FIRTH) Colonel
Director of Estates

AUDITED FOR PAYMENT

For Chief Treasury Officer

DISTRIBUTION OF SERVICE ESTATES

MH
Estates Form "P. 4"

NAVY

Name: ARMSTRONG, Frederick T. No.: V-61371
Surname Christian Names

A/ A. B. RCNVR O/S 8-6-44
Rank Unit Date of Death

AMOUNT

Date: 10-8-45

W.S.G. \$ 152.56
L.P.C. 121.41

Other Credits.....

Total.....

6.04
280.04

Prev.dist. 127.48
This dist. 152.56

SHARE	RELATIONSHIP	NAME AND ADDRESS	AMOUNT
All	Mother	Mrs. Sarah Armstrong UTTERSON, Ont. (Sole beneficiary per will)	152.56

P4. TO TREAS.

14/8/45

WSG

AUTHORITY					
H.Q. F.E. No.	VOTE	PRI	H.Q. SUB.	OBJ.	AMOUNT
9999	831	00	50	000	\$152.56
CLASSIFIED BY			EXAMINED BY		
			For Chief Treasury Officer		

DISTRIBUTION APPROVED AND AUTHORIZED

(L. M. FIRTH) Colonel
Director of Estates

AUDITED FOR PAYMENT

For Chief Treasury Officer

(V. 613. 71. A B.)

J. J. Constrong.

Just file

Utterson

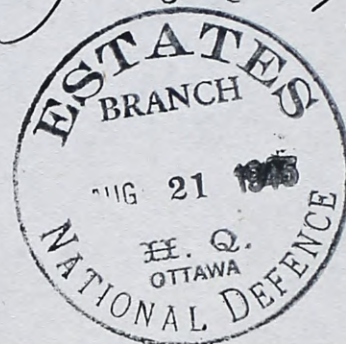
AUG 27 1945

Aug. 18th 1945

HQ-NS-V-61371 **ED 480**
Dept of National Defence

Naval Service

AUG 23 1945



Dear Sirs.

In looking through my late son effects. We found a bond for \$50.00 in his name. As I am Beneficiary in my son's will. Would you please advise me what I must do about it.

Thanking you
Yours,
Barah

Mrs Fred. Constrong.
Utterson

Ont.

STATEMENT OF WAR SERVICE GRATUITY - NAVY

Decedent

Member's Name

Frederick Thomas
(Christian Names)

(Surname)

Armstrong

Payee

Director of Estates

for service estate of

Register No.

11976

Address

308 Sparks Street

Frederick T. ARMSTRONG

File No.

U-61371

Date

12-7-45

Ottawa Ont

N.S. V61371

Service No.

U-61371

Final Rank or Rating

A1A.B.

Date of termination of overseas service

9 June 44

Date of Discharge

9 June 44

A. TOTAL QUALIFYING SERVICE

No. of days 379 equal to 12 complete periods at \$7.50
30

90.00

B. QUALIFYING OVERSEAS SERVICE

No. of days 178 less 19 ineligible days equal to 59 days @ 25¢ per day

39.75

C. SUPPLEMENT FOR OVERSEAS SERVICE

DAILY RATES AT DISCHARGE

Pay
Subsistence or Lodging
and Provision Allowance
Additional Pay

\$

1.85

\$

1.25

\$

.25

H.C.M.

Dependents' Allowance 1/30 of \$

Total

3.35 x 7 = \$ 23.45

No. of days

178

x \$ 23.45

22.81

183

D. WAR SERVICE GRATUITY

152.56

E. DEDUCTIONS

OVERPAYMENT OF PAY AND ALLOWANCES \$

DEPENDENTS' ALLOWANCE

AND ASSIGNED PAY \$

OTHER DEDUCTIONS \$

F. TOTAL AMOUNT PAYABLE

G. YOUR PORTION OF GRATUITY IS

Dependents' Allowance in issue to you \$ of \$ = \$ 152.56
Total Dependents' Allowance in issue \$

CERTIFICATE:

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

Prepared by	Checked by

Treasury	
Checked by	Date

Service Representative

D.N.P.A. CHECK

1 83 6
2 53 7
3 53 8
4 53 9
5 53 10

S/C.

STATEMENT OF ACCOUNT

True extract from the ledger of H.M.C.S. "NIOBE Section 6B" ending 30th September 19⁴⁴

List 229 P. No. 12²/29 (Name) ARMSTRONG, Frederick Rank Rating A/A.B. No. V-61371

When entered Date of appearance Whither discharged D.D.

	\$	c.
CREDIT from former account	25.72	
Difference of, Pay as Ord Smn over 6 mos from 26 th Nov to 27 th May (184 days at \$.25 a day)	46.00	
Diff. as A/A.B. (Rank Rating) " 28 th May " 30 th June (34 " .60 ")	20.40	
" " " " " " " " " " " "		
" " " " " " " " " " " "		
" " " " " " " " " " " "		
Kit Upkeep Allowance		
OTHER CREDITS:		
Total credits	92.12	
DEBT from former account		
PAYMENTS:—		
	1st	2nd
	3rd	4th
	5th	
	\$ c.	\$ c.
1st month		
2nd month		
3rd month		
Allotment	Stopped Paid 30 th June 15.00	
Pension deduction (Officers) charged to of		
Hospital stoppages		
Mulcts		
OTHER CHARGES: H.M.C.S. "NIOBE" Official Receipt R-545		92.12
Total debits	92.12	
Balance Cr. or Dr.	N I L	

(Balance Dr. to be shown in red)

Number of days actually victualled during period mentioned above NIL

NOT VICTUALLED

LENT, SICK OR LEAVE	INCLUSIVE DATE		No. OF DAYS	SHIP, HOSPITAL, etc., IN WHICH BORNE
	FROM	TO		

Date 21st August, 1944 19

Payr-Lieut R.C.N.V.R. ACCOUNTANT OFFICER

STATEMENT OF ACCOUNT

True extract from the ledger of H.M.C.S. " NIOBE Section 6B " ending 30 June, 1944 19.....

List 229 P No. 5²/53 (Name) ARMSTRONG, Frederick Rank Rating Ord Sum No. V-61371

When entered 1' Apl Date of appearance 1' Apl Whither discharged D.D.

		\$	c.
CREDIT from former account.....		75.	38
Pay as.....	Ord Sum from 1'Apl to 30'June (91 days at \$ 1.25 a day)	113.	75
"	(Rank Rating) " 1'Apl " 9'June (70 " .06 ")	4.	20
"	" " " (" " ")		
"	" " " (" " ")		
"	" " " (" " ")		
Kit Upkeep Allowance.....Adj Mch Qtr 4.47 and 1'Apl-9'June 8.46		12.	93
OTHER CREDITS:.....H.L.M. 30'Mch - 8'June 71 days @ .20		14.	20
Total credits.....		220.	46
DEBT from former account.....			
PAYMENTS:—			
	1st 2nd 3rd 4th 5th		
	\$ c. \$ c. \$ c. \$ c. \$ c.		
1st month.....		Total.....	
2nd month.....	13.41 13.41 17.88 22.35	Total.....	67.05
3rd month.....	4.47	Total.....	4.47
Allotment.....15.00 charged for Apl May and June			45.00
Pension deduction (Officers) charged to.....of.....			
Hospital stoppages.....			
Mulcts.....			
OTHER CHARGES:.....Mantis advance of pay £14-10-0			64.81
.....Hornet advance of pay £3-0-0			13.41
Total debits.....		194.	74
Balance Cr. or Dr. 11111		25.	72
(Balance Dr. to be shown in red)			

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

NOT
VICTUALLED

LENT, SICK OR LEAVE	INCLUSIVE DATE		No. OF DAYS	SHIP, HOSPITAL, etc., IN WHICH BORNE
	FROM	TO		
Lent	1 st Apr	4 th Apr	4	Mantis for MTB 464
Lent	5 th Apr	8 th Apr	4	Hornet for MTB 464
Lent	9 th Apr	23 rd Apr	15	M.T.B. 464
Lent	24 th Apr	3 rd May	10	Bee for MTB 464
Lent	4 th May	8 th June	36	M.T.B. 464
Sick (Wounded)	9 th June	9 th June	1	Hospital

Date.....21st August, 1944.....19.....

C.N.S. 2426
25M-8-43 (1468)
N.S. 815-9-2426

Payr-Lieut R.C.N.V.R. / ACCOUNTANT OFFICER

IG

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

4
NAVYED
MEMBER'S
NAMEPAYEE
ADDRESS

Frederick Thomas

(CHRISTIAN NAMES)

Director of Estates,
308 Sparks St.,
Ottawa, Ont.

ARMSTRONG

(SURNAME)

for Service Estate of
Frederick T. Armstrong
NS. V61371
9th June '44.

REGISTER NO.

FILE NO.

DATE

SERVICE NO.

FINAL RANK OR RATING

DATE OF DISCHARGE

11976

NS.V-61371

20th July '45

V-61371

A/A.B.

9th June '44.

DATE OF TERMINATION OF OVERSEAS SERVICE

A. TOTAL QUALIFYING SERVICE

NO. OF DAYS 379 EQUAL TO 12 COMPLETE PERIODS AT \$7.50
30

\$ 90.00

B. QUALIFYING OVERSEAS SERVICE

NO. OF DAYS 178 LESS 19 INELIGIBLE DAYS, EQUAL TO 159 DAYS @ 25c. PER DAY

\$ 39.75

C. SUPPLEMENT FOR OVERSEAS SERVICE

DAILY RATES AT DISCHARGE

PAY
SUBSISTENCE OR LODGING
AND PROVISION ALLOWANCE

\$ 1.85

\$ 1.25

ADDITIONAL PAY

H.L.M. \$.25

DEPENDENTS' ALLOWANCE 1/30 OF \$

TOTAL \$ 3.35 X 7 = \$ 23.45

NO. OF DAYS 178 X \$ 23.45
183

\$ 22.81

D. WAR SERVICE GRATUITY

\$ 152.56

E. DEDUCTIONS

OVERPAYMENT OF

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

N11

OTHER DEDUCTIONS

\$

F. TOTAL AMOUNT PAYABLE

\$ 152.56

G. YOUR PORTION OF GRATUITY IS—

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

TOTAL DEPENDENTS' ALLOWANCE IN ISSUE \$

=\$ 152.56

Voucher 1353 - July 26/45

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

JSB

CHECKED BY

JSB

TREASURY

CHECKED BY

DATE

JSB

21/7/45

SERVICE REPRESENTATIVE

for Dir. Naval Pay Accting.

DEPARTMENT OF VETERANS AFFAIRS

D of D 9-6-44

AWARDS

WAR SERVICE RECORDS

D.D.

ARMSTRONG	Frederic Thomas	V-61371	A.A.B.	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	6533
Fr. Ger. Star	
C.V.S.M. & Clasp	
War Medal	
M. IN D.	

(THE REVERSE TO BE USED FOR ESTATE PURPOSES)

MEDALS AND MEMORIALS—DECEASED PERSONNEL

RCNVR May 45.

REGISTRATION No. DATE OF DESPATCH

(1) MEDALS
PERSON

ENTITLED TO

Mrs. Sarah Armstrong - Mother

ADDRESS:

UTTERSON, Ont.

(2) MEMORIAL CROSS

WIDOW

ADDRESS:

(3) MEMORIAL CROSS

MOTHER

Mrs. Sarah Armstrong

Utterson, Ontario.

ADDRESS:

MEMORIAL BAR

(1) DATE DESP

REGN. NO

1941

(2)

(3)

27-6-44