

NORRIS
CYRIL ANTHONY
N2686

2686

OFFICIAL NUMBER

FILE NUMBER

62-N.33

OFFICIAL NUMBER 2686

NAME

NORRIS

(Surname)

Cyril Anthony.

(Given Names)

DATE OF BIRTH

9th February, 1917.

PLACE OF BIRTH

HALIFAX, N.S.

OCCUPATION

Scholar.

RELIGION

Roman Catholic.

EDUCATION

Grade IX

RESIDENCE AT TIME OF ENLISTMENT: Street and No.

89 1/2 Gottingen St.

Town

Halifax

Province, etc.

N.S.

ENGAGEMENTS			Period	DESCRIPTION					PREVIOUS SERVICE			
Date (in figures)				Height	Hair	Eyes	Complexion	Marks or Scars	Served in	Rank or Rating	Dates	
Day	Month	Year									From	To
5	1	35	As Boy.	5' 4 1/2"	Lt. Brn.	Grey	Fresh	Scar on right elbow.				
9	2	35	Seven Years' C.S.									

NEXT OF KIN RELATIONSHIP (in pencil)

mother

NAME (in pencil)

Mrs. Emma Norris

ADDRESS (in pencil): Street and No.

89 1/2 Gottingen St.

Town

Halifax

Province, etc.

N.S.

MEDALS, CLASPS, HURT CERTIFICATES, PRIZE MONEY			EXAMINATIONS, CERTIFICATES, ETC.								
Date (in figures)			Particulars	Date (in figures)			Particulars	Date (in figures)			PARTICULARS
Day	Month	Year		Day	Month	Year		Day	Month	Year	
				7		35	Passed E.T.Pt.I.				
				23	2	37	Passed for Telegraphist.				

BADGES, G.C. OR G.S.					BRIEF PARTICULARS OF WARRANT OR C.M. PUNISHMENTS AND C.P. CHARGES							
Date (in figures)			1st, 2nd or 3rd G.C. or G.S.	Granted Deprived Restored	SHIP OR ESTABLISHMENT	Wt. No.	Date (in figures)			BRIEF PARTICULARS OF OFFENCE	PUNISHMENT	
Day	Month	Year					Day	Month	Year			
10	2	40	1st	Granted.	St. Laurent	6	10	1	38	Drunk.	14 days' cells.	
					St. Laurent	7	21	1	38	Disobey.	20 days' detention.	

FILM
NO. WAR 4569-8-
D. TE

Date (in figures)			DAYS FORFEITED					
Day	Month	Year	Prison	Det'n	Cells	C. Power	W. Trial	In diff. Char.
10	1	38			14			
21	1	38		20				

SECOND CLASS FOR CONDUCT

From

To



2686 OFFICIAL NUMBER

NAME NORRIS
(Surname) Cyril Anthony.
(Given Names)

OFFICIAL NUMBER 2686

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
Stadacona	Boy	5	1	35		V.G.	Sat	31	12	35	T.O.W/T.	6	1	39			
"	Ord.Smn.	9	2	35		V.G.	Sat	31	12	36	W/T 3	1	7	40			
"	Ord.Tel.	1	10	35		V.G.	Sat	31	12	37							
HMS.Victory	"	19	1	36		Fair	Sat	31	12	38							
" Nelson	"	4	9	36		V.G.	Supr.	31	12	39							
" Neptune	"	20	11	36	Lent Pembroke 16/1-18/2/37	V.G.	Supr.	22	10	40							
St.Laurent	"	16	1	37													
"	Tel.	22	1	37													
Stadacona	"	15	2	38													
HMS.Victory	"	24	5	40	W/T 3 Course.												
" Diana	"	30	7	40													
Margaree	"	6	9	40													
<u>Discharged</u>		<u>22</u>	<u>10</u>	<u>40</u>	<u>Dead-Missing-Presumed Dead.</u>												

GENERAL REMARKS

14/5/41 - Canadian Memorial Cross issued to Mother:
Mrs. Emma Norris
89 1/2 Gottingen St.
HALIFAX, N.S.

1371C-27/1/41.- Canadian Pension Commission - Father not entitled to Pension - employed steadily.

DATE OF BIRTH	PLACE	CIVIL	OCCU	RELI	ED	PERM	RESIDENCE	PREV	ENL	RANK OR RATE ON ENLISTMENT		
DY. MO. YR.	BIRTH	MAIN	SUB	GION	P	CTV	TOWN	SERV	DIV.	A	DR	RANK
09	2	17	14	XXX	0	10	2408	02	0	19	0	0896
ENLIST. DATE	ACT. SERV.	SHIP OR RATE		STAR		A		SR		RANK		
DY. MO. YR.	DY. MO. YR.	0315		0		12		94				
05	01	35	01	35								
SENIORITY	STR	NON		SERV		CHECKED		CHECKED				
DY. MO. YR.	CAT.	A		B								
22	01	37	09	52	20		22-10-40		Ch		James	

3

62-7733 ENCE
JAN 11 1933
62-21470
CANADA
645

QUESTIONNAIRE FOR CANDIDATES FOR ENTRY ROYAL CANADIAN NAVY

(NOTE.—Reply to question 1 to be in Block Letters. Replies to other questions to be in the handwriting of the Candidate)

1. Name (in full) Cyril Anthony Norris *Cent record 12/11/33 m.m.*
2. Date and Place of Birth February 9, 1917 - Halifax NS
*Birth Certificate, declaration by parents or affidavit as to date of birth must be attached.
3. Permanent place of residence 89 1/2 Göttingen St Halifax NS
(Address in full)
4. How long resident in Canada? All Life
5. Are you a British subject? yes
6. Are you single, married or a widower? Single
7. In what capacity do you wish to engage? Boy Seaman
8. How far advanced educationally are you? Grade Nine
*Attach certificate, diploma, etc., if any.
9. Statement of present and previous employment. (Details of all previous employment should be given)
Still at School.
* Attach any testimonials or recommendations from employers.
10. Do you belong to any Naval, Military Reserve or Territorial Force? Sea Cadets
11. Have you ever served in such forces? Give dates and details Yes. joined in October 1928. Have had two stripes for service and conduct.
12. Have you ever been discharged from any of His Majesty's Forces as medically unfit? No
13. Have you ever offered to serve in any of His Majesty's Forces and been rejected? No
14. What is your weight? 110 pounds
15. What is your height? 5 foot 3 inches
16. What is your chest measurement? (Not inflated) 32 inches
17. Are you free from all physical defects and malformation, and not subject to fits? yes
18. Are you willing to be vaccinated and inoculated as considered necessary by the appropriate authorities? yes
19. If accepted and sent at Government expense to a Naval Base, do you agree to join the Royal Canadian Navy for seven years' continuous and general service? Should you fail to do so for any reason within your own control, do you agree to refund to the Department of National Defence the expenses incurred by that Department for your transportation to the Naval Base? yes

I HEREBY DECLARE that the above answers are true in every respect.

Signature Cyril A. Norris
Address 89 1/2 Göttingen St
Date January 7, 1933

Mrs. E. R. Knox
Witness to Signature

*NOTE.—The Certificates, Recommendations, etc., called for in questions 2, 8 and 9 must be attached, otherwise your application can not be considered.

G.N.S. 2418
B-204.—(Established—1910.)

2
M 646
FENCE
JAN 11 1933
CANADA
62-7733

CONSENT PAPER.

(This Paper is required in all cases where the Candidate is under the age of 17 years, in addition to the Certificate of Birth or Declaration.)

Strike out "son" or "ward" as the case may be.

I hereby certify that my ~~ward~~ ^{son,*} April Morris has my full consent (being himself willing) to enter the Naval Service of Canada for a period of seven years' continuous and general service, from the age of 18, in addition to whatever period may be necessary until he attains that age, agreeably to the King's Regulations.

He has not been in a Reformatory, nor has he been sentenced to imprisonment.

I declare that he has never had fits.

† No alteration or erasure is to be made in the date of birth given.

The date of the boy's birth is, † February 9, 1917.

His Religious persuasion is, Roman Catholic.

Witness my hand at 89 1/2 Gottingen St Halifax

7th day of January 1933.

† ~~Guardian's~~ Parent's Signature in full John Francis Morris

† ~~Guardian's~~ Parent's Address 89 1/2 Gottingen St. Halifax

‡ Must be signed by the Father, if alive, or satisfactory explanation made.

Strike out "Parent's" or "Guardian's" as the case may be.

In the case of a Guardian see other side.

I, the above named April Morris do consent to enter the Naval Service of Canada.

§ Boy's signature in full April Anthony Morris.

§ The Boy and Parent or Guardian must sign in the presence of the witness to their signatures.

Signed by the said [Here write boy's name] April Morris

And [Here write Parent or Guardian's name] John Francis Morris

In the presence of Mrs Eldon R. Knox.
Witness to signatures of Boy, and Parent or Guardian.

In the presence of { 89 1/2 Gottingen St. Address.

[OVER]

CERTIFICATE.

|| Strike out "Parent" or "Guardian" as the case may be.

** Strike out "he" or "she" according to sex of Parent or Guardian.

† The assertion of the boy himself should not be taken as sufficient warrant for this statement.

I certify that I am personally acquainted with this Boy's || Parent, and Guardian,

am † aware** ~~she~~ ^{he} has consented to the Boy's entry as above, and I believe the particulars stated herein to be true.

James Rowley

Clergyman of the Parish.

or Resident Householder

Clergyman Occupation.

311 Brunswick St Address.

January 9 19 *33*

Particulars to be stated, if possible, in the case of a Boy whose Father is dead.

Date of the Father's death.....

Place of death.....

Signed Mother.

Particulars to be stated, if possible, in the case of a Boy whose Parents are both dead.

Date of Father's death.....

Place of death.....

Date of Mother's death.....

Place of Mother's death.....

Signed Guardian.

(Entered from Halifax, NS.)

H. M. C. S. "STADACONA".

P1579

OFFICIAL No. IF KNOWN
Space to be left vacant
if not known

DEPT OF NATIONAL DEFENCE

FEB - 2 1935

CONTINUOUS SERVICE ENGAGEMENT, OR RE-ENGAGEMENT

To be forwarded to the Naval Secretary, Department of National Defence, with Form S. 59

CHRISTIAN AND SURNAME IN FULL		NEXT OF KIN	PRESENT RATING
Cyril Anthony NORRIS.		Mother, Emma. Name..... 89 1/2, Gottingen St., Address..... HALIFAX, NS.	Boy Seaman.
DATE OF BIRTH*	PLACE OF BIRTH†		NAME, RANK AND STATION OF RECRUITING OFFICER
9th. February, 1917.	Town..... HALIFAX.	County.....	Commander CRH Taylor, RCN.
	Province..... NOVA SCOTIA.		Commanding Officer HMCS "STADACONA".

Personal Description at the Date of this Document

Height	Chest	Hair	Eyes	Complexion	WOUNDS, SCARS OR MARKS	Religious Denomination	TRADE OR OCCUPATION
5'4 1/2"	30 1/2"	Light Brown	Grey	Fresh	Scars on right elbow	Roman Catholic	Scholar.

Commencing date of Engagement or Re-engagement	9th. February, 1935.	Period of Engagement or Re-engagement	Seven Years CS.
Date of actually volunteering to engage or re-engage	5th. January, 1935.	Date of entering present ship	5th. January, 1935.

Particulars of former Continuous Service Engagements, if any; but, if none, and the person engaging has had previous Service, the date of his First Entry should be given. If the person has not previously served, write the words "First Entry" here.

First Entry.

If an Engagement is ante-dated for any period, the man's services for such period should be forwarded in to office, with the Engagement, on Form S.—1243.

Declaration of Entry or Re-Entry from Shore for Continuous Service

The following questions are to be put by the Commanding Officer to the person about to engage for Continuous Service, whose answers are to be recorded hereon:—

- Are the particulars given above of your name and date and place of birth correct?..... Yes.
- Are you a British subject? †..... Yes.
- Nationality of parents—Father..... Canadian. Mother..... Canadian.
- Have you ever served in the Navy, Royal Fleet Reserve, Royal Naval Reserve, Army, Army Reserve, Marines, Militia, Volunteers (Naval or Military), Territorial Force, or in His Majesty's Indian or Colonial Military Forces, or in the R.C. Mounted Police? ‡..... No.
- Do you now belong to the Militia, Volunteers (Naval or Military), Territorial Force or any Regiment or Corps in His Majesty's Army, or to any established Naval or Army Reserve Force, or to the R.C. Mounted Police? ‡..... No.
- Have you ever been rejected as unfit for His Majesty's service, or discharged from it on that account? If so, state reason of rejection or discharge, and date..... No.
- Have you ever been discharged from the Navy, Marines, Army or R.C. Mounted Police on account of misconduct?..... No.
- Are you willing to be vaccinated or re-vaccinated and inoculated?..... Yes.
- Can you swim?..... Yes.

NOTED.
23 [Signature]

* When evidence of age is obtained on First Entry, it should be attached to this Form.
† Foreigners are not to be entered. On the entry of a person born out of the British Empire, it should be ascertained that he is (and in the case of a boy, that his father is) a British Subject, and evidence of the fact should be attached to the "Entry Papers."
‡ Particulars of service in the Army, Army Reserve, Naval Reserve, Marines, Militia, or H. M. Indian or Colonial Military Forces, or in the Merchant Service should be forwarded in to office with this Engagement. If a member of the Royal Fleet Reserve, the man's Registrar is to be immediately informed of his entry (Royal Fleet Reserve Instructions). If an R.N.R. man, state number of R.V. 2.

(OVER)

1935
203

I—Declaration and Certificate for Men newly entered and Men who have been out of the Service since the expiration of their previous C. S. Engagement

I,, do solemnly declare that to the best of my knowledge and belief the answers to the questions overleaf are true, and I do hereby agree to serve honestly and faithfully in the Naval Service of Canada* from † 193....., provided my service should be so long required. And I do sincerely promise and swear (or solemnly declare) that I will be faithful and bear true allegiance to His Majesty. As witness my hand this day of 193.....

Man's Signature in full

Witness to Signature.....

Attested before me this day of 193.....

} Signature of a Commissioned Officer of the Naval Service

Date 193.....

This is to certify that we have examined the person named on the other side hereof as to his fitness for the Naval Service of Canada, and we find as follows:—He is of perfectly sound and healthy constitution, free from all physical malformation, active and intelligent; and we consider him in all respects fit for His Majesty's Service.

Commanding Officer

Medical Officer

II—Certificate and Declaration for Boys

Date 5th. January, 1935. 193.....

This is to certify that we have examined the boy named on the other side hereof as to his fitness for the Naval Service of Canada, and we find as follows:—He is a well grown, stout, intelligent lad, of perfectly sound and healthy constitution, and free from all physical malformation, and we consider him in all respects fit for His Majesty's Service.

The consent of his parents or guardian has been obtained in writing, and they are willing and desirous that the boy should be entered for Seven years' continuous and general service from the age of 18, in addition to whatever period may be necessary till he attains that age.

COMMANDER Commanding Officer

Lieutenant-Commander

Captain, R.C.A.M. Medical Officer

I declare that to the best of my knowledge or belief the answers to the questions on the other side of this form are true and that I am not indentured as an apprentice.

I am willing to enter and serve in the Naval Service of Canada for Seven years' continuous and general service from the age of 18, provided my service should be so long required, in addition to whatever period may be necessary till I attain that age. And I do sincerely promise and swear (or solemnly declare) that I will be faithful and bear true allegiance to His Majesty.

Boy's Signature in full

Witness to Signature Leading Writer.

Attested before me this 8th. day of January, 1935. 193.....

Lieutenant-Commander.

} Signature of a Commissioned Officer of the Naval Service

III—Re-engagement for Continuous Service

To be executed by men who have not been out of the Service since the expiration of their first engagement

The particulars indicated on the other side are also required when this Form is used.

I,, now serving as a on board H.M.C.S., who on the of 193.....

engaged to serve in the Naval Service of Canada for a period of § years, do hereby engage to serve for a further period || from ¶ 193..... provided my services should be so long required.

Man's Signature in full

193.....

Witness Commanding Officer

* Insert "for the term of (number in words) years," or "to complete (number) years for pension," or "until I attain the age of years."
† Insert the date from which the engagement actually commences.
‡ The document conveying the consent to be attached to this paper. (N.B.—Not required in the case of youths over 17 years of age.)
§ To be written in words.
|| Insert as follows:—"Of (number) years," or "to complete time for pension," or "until I attain the age of years," as the case may be.
¶ Insert the date of commencement of the re-engagement, which must either be coincident with, or (when the re-engagement is ante-dated) earlier than the date of execution.

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

CERTIFICATE of the Service of

Cyril Anthony **NORRIS.**
 in the Naval Service of Canada.

151

PORT DIVISION *Halifax, N.S.* OFFICIAL NUMBER *2686*

Date of Birth *9th February, 1917.*

Where born { Town *Halifax*
 County and Province *Novo Scotia*

Usual place of residence *89 1/2 Göttingen St., Halifax, N.S. 22/2/27*

Trade brought up to *Scholar*

Religious denomination *Roman Catholic*

Next of kin *Mother, Emma, at home.*

Can swim

Man's signature on discharge to pension

CONTINUOUS SERVICE ENGAGEMENTS.			MEDALS, CLASPS, &c.	
Date of actually volunteering.	Commencement of time.	Period volunteering for.	Date Received.	Nature of Decoration.
<i>5th January, 1935.</i>	<i>9 Feb. 1935.</i>	<i>Seven years.</i>		

DESCRIPTION OF PERSON.	STATURE		COLOUR OF			MARKS, WOUNDS AND SCARS.
	Feet.	In.	Complexion.	Hair.	Eyes.	
On entry as a boy.....	<i>5</i>	<i>4 1/2</i>	<i>Fresh</i>	<i>light Brown.</i>	<i>Grey.</i>	<i>Scar on right elbow.</i>
On advancement to man's rating, or on entry under 28 years...	<i>5</i>	<i>4 1/2</i>	<i>Fresh</i>	<i>Light Brown</i>	<i>Grey.</i>	<i>- " -</i>
On re-entry for C.S. or for Non-C.S. after attaining 28 years..						
Further description if necessary..						

Name Cyril Anthony NORRIS

SHIP'S NAME	LIST AND No.	RATING	FROM	TO	CAUSE OF DISCHARGE.
"Stadacona"	53 180	Boy Seaman	5 Jan '35	8 Feb '35	
"Stadacona"	" "	Ord. Smm.	9 Feb '35	30 Sep '35	
" - " -	" "	Ord. Tel.	1 Oct '35	18 Jan '36	
Victory		" - "	19 Jan '36	3 Sep '36	
Nelson		" - "	4 Sep '36	19 Nov '36	
Neptune		" - "	20 Nov '36	15 Jan '37	
St. LAURENT		" - "	16 Jan '37	21 Jan '37	
" - " -		Telegraphist	22 Jan '37	14 Feb '38	
"Stadacona"		" - "	15 Feb '38	23 May '40	
Victory		" - "	24 May '40	29 July '40	
"Diana"		" - "	30 July '40		
"Margaree"		" - "		22 Oct '40	D. D. (HQ. Wt. 1130 of 27 Oct '40.)

DATE	Wounds received in Action and Hurt Certificate; also any meritorious Service, Special recommendations, Prize or other grants	CAPTAIN'S SIGNATURE

DATE
9 July 35
31 Jan '36

DECEASED 22 October 1940

DEPARTMENT OF VETERANS AFFAIRS

AWARDS

NAVY

D.D.

WAR SERVICE RECORDS

NORRIS	Cyril Anthony	N-2686	Tel.	FILE No. 1
SURNAME (IN BLOCK LETTERS)	CHRISTIAN NAMES	REG. No.	RANK ON DISCHARGE	C.A.S.F. UNIT

WAR SERVICE

BADGE

(CLASS) No. DATE DESPATCHED:

ADDRESS:

CAMPAIGN MEDALS	REGISTRATION NUMBER AN DATE DESPATCHED
1939-45 Star	22 83 24/11/49
C.V.S.M. & Clasp	
War Medal	

(THE REVERSE TO BE USED FOR ESTATE PURPOSES)

HMCS "MARGAREE" RCN May /42

MEDALS AND MEMORIALS—DECEASED PERSONNEL

REGISTRATION No. DATE OF DESPATCH

(1) MEDALS
PERSON

ENTITLED TO Mr. John F. Norris - Father

ADDRESS: ~~89½ Gottigen St.;~~ 301 Gottingen Street
Halifax, N.S. Sept. 1949

(1)

(2) MEMORIAL CROSS
WIDOW

ADDRESS:

(2)

(3) MEMORIAL CROSS
MOTHER

Mrs. Emma Norris

ADDRESS: 89½ Gottingen Street
HALIFAX, N.S.

(3) 14 May 1941

MEMORIAL BAR

DATE DESP.....

REGN. NO. 961

MEMORANDUM FOR

P. 64

Mrs. Emma Norris,
89 1/2 Gottigen St.,
Halifax,
N.S.

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. 62-N-33 FD.25

DEPARTMENT OF NATIONAL DEFENCE
OTTAWA, ONT.

April 15 1942

For the purpose of record and in the event of there being any balance of pay, medals or memorials available for distribution (according to law) on account of the late

NORRIS Cyril Anthony, Tel.,

No. 2686, R.C.N.

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

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



ANSWER IN FULL ALL APPLICABLE QUESTIONS

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

Degrees of Relationship	RELATIVES required to be accounted for	INFORMANT'S STATEMENT			
		NAME IN FULL of any Relative, if any, in each degree inquired for	Age	ADDRESS IN FULL of each surviving Relative, opposite his or her name, and date of death of each deceased relative	
1	Widow of the Deceased.....				
2	Children of the Deceased and dates of their Births.....				
3	Father of the Deceased.....	John Francis Harris	62	89 1/2 Sattungen St Halifax N.S.	
4	Mother of the Deceased.....	Emma Louise Harris	57	89 1/2 Sattungen St Halifax N.S.	
5	Brothers of the Deceased	Full Blood	Laurence John Harris Robert Edward Harris	30 28	Purcells Cove H.H. Co. 89 1/2 Sattungen St. Halifax N.S.
		Half Blood			
6	Sisters of the Deceased	Full Blood	Mrs. E. A. Knox Anna M. Harris	32 22	97 Maitland St Halifax N.S. 89 1/2 Sattungen St. Halifax N.S.
		Half Blood			
7	Names of brothers or sisters (whether of the full or the half blood) of the Deceased, who are dead, and date of death of each.	Names and ages of their children (if any)	Address of their children		

ONLY IF NO RELATIVES IN THE DEGREES ABOVE ARE NOW LIVING, THE FOLLOWING PARTICULARS SHOULD BE GIVEN

		NAMES OF THOSE LIVING	Age	ADDRESS IN FULL
8	Grand-Parents of the Deceased....			
9	Uncles and Aunts by blood of the Deceased (not Uncles and Aunts by marriage).....		Age	

FULL PARTICULARS AS TO IDENTITY

10	What is the full name of the deceased?	<i>Cyril Anthony Norris</i>
11	Give the month and year of his birth.	<i>February, 9th, 1917</i>
12	Where and when were his parents married?	<i>St. Patrick's Church Halifax N.S.</i>
13	If deceased was married, state place and date of marriage.	<i>N.A.</i>
14	Did he leave a Will? If so, a copy should be attached hereto.	<i>N.A.</i>
15	Did he leave a bank account? If so, give full particulars.	<i>N.A.</i>
16	Is there any other estate which will necessitate application being made for Probate of the Will or Letters of Administration of the estate?	<i>N.A.</i>
17	State your own postal address in full.	<i>Mrs. E. L. Norris 89 1/2 Gattungler St., Halifax N.S.</i>

PARTICULARS OF DOMICILE

18	Where was deceased born?	<i>Halifax N.S.</i>
19	State, in order, the Province (or State) and country in which the deceased resided and the period of time in each, and in which last.	<i>Nova Scotia, Canada In England five months last in England.</i>
20	What was the nature of his employment?	<i>Royal Canadian Navy Leading Telegraphist</i>
21	Did he own the premises in which he lived? If so, where?	<i>N.A.</i>
22	Did he ever state verbally, or in writing, where he intended to make his permanent home?	<i>N.A.</i>

OTHER PARTICULARS

sent by father → *Cash labled overseas for his personal use amounting to \$55.00*

23	Did the deceased after enlistment incur any debts for:— (a) His own separate board and lodging while on service. (b) Service clothing and equipment. An itemized account for each such debt should be attached hereto, and if same is correct you should mark the bill "approved" and sign same. If believed incorrect, give particulars.	<i>Furniture amounting to - 56.90 - Clothing amounting to - 47.95 - Necessaries amounting to - 73.46 - Requests for headstone if anything happened - 115.00</i>
24	Have you or any other relative paid the funeral expenses or any part thereof? If so, attach itemized accounts showing amount paid, and by whom. (NOTE:—The Government pays funeral expenses within the amounts authorized in the Regulations, where death occurs and burial is made Overseas as well as where death occurs and burial is made in Canada, and if a relative has already paid those expenses the Government will reimburse such relative to the extent of the amount authorized in the Regulations. Any amount of such expenses in excess of those authorized in the Regulations is not payable by the Government nor is it chargeable against the service estate of the deceased.)	<i>Headstone as before mentioned in the above column.</i>

DECLARATION

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

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

* Mother (Mrs E. L. Norris) of the deceased.

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

Mrs E. L. Norris

{Signature of Informant

CERTIFICATE

I hereby certify that, to the best of my knowledge and belief Mrs E L Norris

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

Dated at Halifax this 22 day of April 19 42

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

E. J. P. in and for the County of Halifax

Qualification A. J. P. in and for the County of Halifax

Address 92 Gutterfern Str

NOTE.—Before granting the above Certificate, care should be taken to see that the Informant gives particulars concerning the death of any Relative stated by him or her to have died, and that the full name and address and age of each surviving Relative enquired after is stated in its proper place in the Statement opposite.

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

This paper was filled in by my Daughter because I can't see good enough to write myself as my eyes are very poor. I signed it myself.

Mrs E. L. Norris

F038349

62.21.33

Six copies to be rendered to Naval Service Headquarters

REPORT OF THE DEATH OF AN OFFICER, MAN OR BOY

H.M.C.S. STADACONA at HALIFAX, N. S. 132

Name Cyril Anthony NORRIS
(Christian names in full)Rank of Rating Telegraphist Official No. 2686
(If unknown, date of first entry)

Place of Birth Halifax, N. S. Date of Birth 9th February, 1917

Occupation in Civil Life Scholar Religion Roman Catholic

Number of years service in the Navy (Long Service R.C.N., or mobilized service in case of R.C.N.
(Temporary) or Reserve ratings) 5 Years 8 Months

Date of Death 22nd October, 1940 Place of Death At Sea

Cause of Death Loss in collision of H.M.C.S. MARGAREE
(If due to accident, violence, or enemy action, particulars to be stated briefly)Nearest known relative or friend { Name Emma NORRIS Relationship Mother
Address 89 1/2 Gottingen Street, Halifax, N. S.

Date on which the above was informed by Ship Informed by N.S.H.Q.

Date on which death was registered with local Officials NK

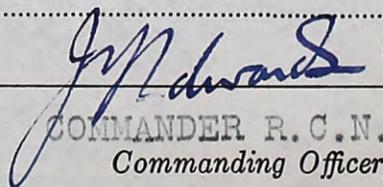
In the case of Imperial Service men, whether Active Service, Pensioner or Reserve, date on which the prescribed return was rendered to the Registrar General in London, Edinburgh or Dublin, according to Nationality

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

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

Undertaker employed (if any)

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


 COMMANDER R.C.N.,
 Commanding Officer,

5th November, 1940

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



162-7203
NOV 22 1934
62-2147
CANADA

Can. B. 207
2M-3-34
N.S. 815-2-207

CERTIFICATE OF MEDICAL EXAMINATION FOR THE ENTRY OF OFFICERS, MEN AND BOYS FOR THE NAVAL SERVICE OF CANADA

(R.C.N. OR RESERVE FORCES)

M15798

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 Cyril Anthony Norris candidate for entry as boy (seaman class) and I believe him to be in all respects fit for His Majesty's Service. He has signed the Certificate given below in my presence.

Dated at Halifax, N.S. the 19th of November 1934.

W.M. Stephen
Examining Medical Officer
(Rank) Lieut. R.C.M.C.

This examination has been made in accordance with the Instructions for Recruiting.

Age	Weight without Clothes	Height with Bare Feet	General Development	Chest Girth	Vision by— (i) Snellen's Types (ii) Colour Vision	Vaccinated or re-vaccinated for Small Pox (Date)	Lungs, Heart, etc.	Abdomen, Hernia, etc.	Limbs and Joints	Skin	Ears and Hearing	Testes, Varicocele, etc.	Mouth, Teeth (No. deficient and No. defective, if any), Nose, Tonsils, etc.	Anus, Haemorrhoids, etc.
(a)	(b)	(c)	(d)	(e)	(f)	(g)	(h)	(i)	(j)	(k)	(l)	(m)	(n)	(o)
17 years, 10 months	112 lbs	5 ft, 4 1/2 inches	Fair	inches (a) maximum 34 (b) minimum 32 (c) mean 33	right eye 20/20 left eye 20/20 colour vision N	Once, on left arm, in 1923	Normal; no abnormality	Healthy; no hernia	Healthy	Healthy	W.V. R 25 ft., L 25 ft.	Normal	1 tooth cavity 1 tooth extracted Nose & throat normal	Normal

CERTIFICATE TO BE SIGNED BY THE 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 as may be authorized.

C.A. Norris

Signature of Candidate

When a Candidate is passed, notwithstanding a slight defect or disability, the following Certificate is to be filled up

This Candidate is the subject of.....

not considered of sufficient importance to cause his rejection, he being desirable in other respects.

Examining Medical Officer

(Rank).....

* The exact meaning of this is to be clearly explained to the Candidate by the Examining Medical Officer.

28

Passing Certificate

This is to Certify

that Cyril A. NORRIS,

Rating Ordinary Seaman Official Number 2686

has passed

THE EDUCATIONAL TEST, PART I

held on 9th July, 1935.

For advancement to Petty Officer.

(J.O. Cossette)

Naval Secretary.

Department of National Defence,

Ottawa, this 24th day of August, 1935.

MC

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

NAVY

62-N-33

DECEASED MEMBER'S NAME

Cyril Anthony
 (CHRISTIAN NAMES)

NORRIS
 (SURNAME)

REGISTER NO. 2993

FILE NO. NSN2686

PAYEE

Director of Estates
 308 Sparks St.,
 Ottawa, Ont

for Service Estate of
 Cyril A. Norris
 NS. N2686

DATE 25 July/45

ADDRESS

SERVICE NO. N-2686

DATE OF TERMINATION OF OVERSEAS SERVICE

22 October/40

FINAL RANK OR RATING TEL.

DATE OF DISCHARGE 22 Oct./40

A. TOTAL QUALIFYING SERVICE

NO. OF DAYS 409 EQUAL TO 13 COMPLETE PERIODS AT \$7.50
30

\$ 97.50

B. QUALIFYING OVERSEAS SERVICE

NO. OF DAYS 152 LESS 19 INELIGIBLE DAYS, EQUAL TO 133 DAYS @ 25c. PER DAY

\$ 33.25

C. SUPPLEMENT FOR OVERSEAS SERVICE

DAILY RATES AT DISCHARGE

PAY	\$	2.00	
SUBSISTENCE OR LODGING AND PROVISION ALLOWANCE	\$	1.45	
ADDITIONAL PAY	\$.10	W T 3
	\$.05	I B
	\$.13	H L M
DEPENDENTS' ALLOWANCE 1/30 OF \$	\$		
TOTAL	\$	3.73	x7 = \$ 26.11
NO. OF DAYS		152	x\$ 26.11
		<small>183</small>	

\$ 21.69

D. WAR SERVICE GRATUITY

\$ 152.44

E. DEDUCTIONS

OVERPAYMENT OF

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

OTHER DEDUCTIONS

\$ NIL

F. TOTAL AMOUNT PAYABLE

\$ 152.44

G. YOUR PORTION OF GRATUITY IS—

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

\$ 152.44

Voucher 1456 Aug 4/45

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
 DHJ

CHECKED BY

TREASURY
 CHECKED BY
 H. Loftus

DATE

27/7/45

SERVICE REPRESENTATIVE

FOR DIR. NAVAL PAY ACCTNG.

ALB:MMO

NS 62-21-4 N

12/2-733

(NAVAL SERVICE)

November 24, 1934.

Sir,-

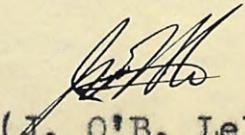
With reference to your application dated 7th January 1933, for entry into the Royal Canadian Navy as a Boy (Seaman Class), I am directed to inform you that the Report of Medical Examination dated 19th November 1934, shows you to be the subject of the following minor defect:- one tooth cavity.

If you wish to have the abovementioned defect remedied, and will forward to this Department a certificate from your dentist that this has been done, you will in all probability be entered in the Royal Canadian Navy in January 1935.

Any expenses involved in connection with dental treatment will be payable by you.

Yours truly,




(J. O'B. LeBlanc),
Assistant Naval Secretary.

Mr. Cyril A. Norris,
89½ Gottingen Street,
HALIFAX, N.S.

89 1/2 Göttingen St
Halifax N.S.

December 1, 1934

416293

REFERENCE

DEC -3 1934

~~65-214-2~~
720 DA 431

Sir:

With reference to
your letter of November 24, 1934,
regarding the remedy of one
tooth cavity, I wish to state
that I have had this defect
remedied by my dentist
Dr. G.M. Dewis, Halifax N.S.
and I am inclosing a certi-
ficate from Dr. Dewis, certifi-
ng this work to be done
by him on November 30, 1934

at his office, in Halifax N.S.

Hoping all defects
are now remedied, and that
my application may be
favorably received.

I remain;

Respectfully Yours.

Cyrill Morris
89 1/2 Gattinger St
Halifax Nova Scotia.

NAME
CHARGE
SINCE
REC'D. CENTRAL BUREAU N.Y.
3
REFERRED TO

Recruits
431

Recruits

OFFICE. ISNOR BUILDING
69 GOTTINGEN ST.

TELEPHONE L 1669

OFFICE HOURS

9 TO 1 P. M.

2 TO 5 P. M.

HALIFAX, N. S. *nov 30*1934

~~Mr~~ *Cyril A. Norris.*

TO DR. G. M. DEWIS
DENTIST

15

To Professional Services

*This is to certify that I have
inserted filling in lower
left molar tooth.*

G M Dewis D.D.S.

62-7733-

November 1, 1940.

124

Dear Madam:

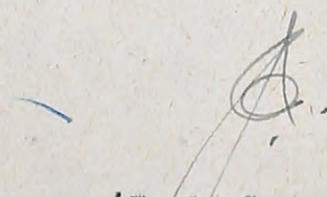
It is with deep regret that I must confirm the telegram sent out by the Minister of National Defence, reporting that your son, Cyril A. Norris, Telegraphist, O.N. 2686, R.C.N., was missing, believed killed.

Few details are available, but it is known that H.M.C.S. "MARGAREE" was sunk in collision in the North Atlantic whilst steaming without lights, on convoy duty, and in the submarine zone. 142 Officers and ratings are missing and must be presumed lost at sea.

I am requested to express to you the sincere sympathy of the Minister of National Defence for Naval Services and the Chief of the Naval Staff in your hereavement.

Any further information, which is received, will be at once communicated to you.

Yours very truly,


(J. O. Cossette)
NAVAL SECRETARY.

Mrs. Emma Norris,
89½ Gottingen Street,
HALIFAX, N.S.