

V3220

SMITH

GORDON

ELSWO

MEMORANDUM FOR

P 83448

DEPT. NATIONAL DEFENCE

JUL -7 1941

P. 64

Mrs. Ludger Cemeau,
50 1/2 de la Ronde St.,
St. Pascal de Baylon,
Quebec City, P.Q.

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

THE SECRETARY,
DEPARTMENT OF NATIONAL DEFENCE,
OTTAWA, ONTARIO

ATTENTION: ADMINISTRATOR OF ESTATES

and the following number quoted:-

H.Q.N.S. 113-S-233 FD 197

DEPARTMENT OF NATIONAL DEFENCE
OTTAWA, ONT.

July 3, 1941

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

Gordon Elsworth SMITH, A.B.

No. 3220, R.C.N.V.R.

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

(L.M. Firth) Major,
Administrator of Estates.



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

Degrees of Relationship	RELATIVES required to be accounted for	INFORMANT'S STATEMENT		
		NAME IN FULL of any Relative, if any, in each degree inquired for	Age	ADDRESS IN FULL of each surviving Relative, opposite his or her name, and date of death of each deceased relative
1	Widow of the Deceased.....	No widow. Unmarried.	-	-
2	Children of the Deceased and dates of their Births.....	Does not apply		-
3	Father of the Deceased.....	Late George L. Smith	61	Deceased Sept 12 - 1929
4	Mother of the Deceased.....	Late Esther Smith	51	Deceased June 28 - 1935
5	Brothers of the Deceased	Full Blood	39	38-12 th St. Suisun, P. Cal.
		Half Blood	30	(Deceased - May 13 - 1938)
6	Sisters of the Deceased	Full Blood	41	R.F.D #1 - Alps Road Paterson, N.J. U.S.A.
		Full Blood	35	50 1/2 - de la Pointe St Suisun
		Full Blood	31	Morometal - P. Cal.
		Half Blood	23	50 1/2 - de la Pointe St Suisun, P. Cal.
	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	
7	Audley Smith	George Albert Smith - 3 yrs. old		Blue River - Co. T. Minnesota P. Cal.

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?	Gordon Elsworth Smith
11	Give the month and year of his birth.	June 16 th 90
12	Where and when were his parents married?	Campbellton N.B. Oct. 1899.
13	Was he ever married? If so, state exact place and date of marriage.	Never married.
14	Did he leave a (later) Will? If so, it should be forwarded.	No will.
15	Is there any other estate which will necessitate application being made for Probate or Letters of Administration?	None.

PARTICULARS OF DOMICILE

16	Where was deceased born?	Hedgwick, N.B.
17	In what Province, Country or State did he reside, and in which last?	N.B. 13 yrs. Quebec 14?
18	How long in each?	N.B. - 13 yrs. Quebec - 14 "
19	What was the nature of his employment?	Anglo-Canadian Pulp and Paper Mills Ltd. Quebec P.2
20	Did he own the house or homestead in which he lived? If so, where?	No.
21	Did he ever state verbally, or in writing, where he intended to make his permanent home?	No.
22	State <u>your</u> postal address in full.	50 1/2 de la Ronde Street Quebec. P. Que.

PARTICULARS AS TO CLAIMS

23	Have the funeral expenses been paid? If so, by whom?	Drowned at sea. No funeral expenses.
24	Are there any outstanding claims against the estate? If so, furnish full name and address of each Creditor in this space and enclose his Bill of Account. (See Note Below).	Not that I know.

NOTE.—Paragraph 24 refers to debts incurred for board and lodging, medical and funeral expenses, money borrowed, goods purchased, etc.; the following information to be embodied in all accounts submitted:—

1. Name and address of Creditor.
2. Detailed statement of particulars of claim with date or dates incurred.
3. At the end of his statement the creditor should certify that the account is just and reasonable, that no payments save as shown, have been made thereon and that he holds no security therefor; the creditor should then sign same, and if you admit that the claim is correct, then you "O.K." the bill and sign same.

DECLARATION

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

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

* Sister of the deceased.

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

Leola Smith Comeau {Signature of Informant

CERTIFICATE

I hereby certify that, to the best of my knowledge and belief Leola Smith

*See above Comeau - {Name of Informant} is the * Sister 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 Quebec this fifth day of July 1941.

Signature of Clergyman, Priest or Magistrate (Rev.) P. R. Roy Qualification Rector of St. Peter's Church

Address "St. Peter's Rectory" 38-12th St. Quebec - P.Q.

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





CANADA

N. V. 5
2M-2-32
N.S. 815-11-5

32
MAR 21 1934
113 223
E3126

ATTESTATION FORM

FOR MEN OF THE ROYAL CANADIAN NAVAL VOLUNTEER RESERVE

SURNAME Smith OFFICIAL No. 3220

CHRISTIAN NAMES Gordon Ellsworth MARRIED, SINGLE or WIDOWER Single

PERMANENT ADDRESS	RELIGION
28. Cove Field Quebec City	C of E

DATE OF BIRTH	PLACE OF BIRTH	NAME AND ADDRESS OF NEXT OF KIN
16th June, 1912	Town Musquodobait County Halifax Province Nova Scotia	Mrs George Smith 28. Cove Field Quebec City

PERSONAL DESCRIPTION ON ENROLMENT

HEIGHT	CHEST MEASUREMENT	HAIR	EYES	COM- PLEXION	WOUNDS, SCARS, MARKS
Feet <u>5</u>	Inflated <u>36</u>	Light Brown	Blue	Fair	Scar on first finger on left hand
Inches <u>10</u>	Deflated <u>33</u>				
	Mean <u>34½</u>				

DATE OF ENROLMENT	RATING ENROLLING FOR	TRADE OR CALLING AND IN WHOSE EMPLOY
20th March, 1934	Ord Seaman	Painter

Entered on Attestation Card by *[Signature]*

(B) DECLARATION TO BE MADE BY APPLICANT

I hereby declare as follows:—

- (1) That I am a British Subject domiciled in Canada.
- (2) That I am desirous of being enrolled as a member of the Royal Canadian Naval Volunteer Reserve Force, and that I accept and agree to abide by the rules of the said Force.
- (3) That ¶ (a) I have never served, and am not serving in any Naval, Military, Reserve, or Territorial Force.

¶ (b) I served in Quebec R.C.N.V.R. 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
Quebec Company, R.C.N.V.R.	Ord Seaman	3rd July, 1931	24th January, 1933

- (c) I have never been rejected 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 Quebec Company of the Royal Canadian Naval Volunteer Reserve, I undertake and bind myself:—

(a) To serve from the date thereof for three consecutive years, being subject to the provisions of the Naval Service Act, and of the Regulations made in pursuance thereof for the government of the Royal Canadian Naval Volunteer Reserve, and to the customs and usages of His Majesty's Canadian Naval Service.

(b) To report for active service if called upon in time of war or emergency, and, if called into active service, to serve ashore or afloat as may be directed, according to where my services are required.

(c) To keep in good repair and condition the articles of uniform and any articles of outfit which may be issued to me and to return them to the nearest Company Commanding Officer or to Training Headquarters prior to my discharge or when required so to do by any authorized person, or to pay compensation for any loss or damage thereto other than fair wear and tear; and also not to wear such uniform or outfit (which is and remains the property of the Crown) except when on naval duty.

Dated this 20th day of March 1934

Signature of applicant Gordon E. Smith

(C) CERTIFICATE OF COMPANY COMMANDING OFFICER

I hereby certify that all the foregoing statements were made by the volunteer above named, in my presence, and that he has made and signed the above declaration in my presence on this 20th day of March 1934

Beaudin Lemieux Lt
for Signature of C. C. O.

(D) OATH OF ALLEGIANCE

I, Gordon Ellsworth Smith do sincerely promise and swear (or solemnly declare) that I will be faithful and bear true allegiance to His Britannic Majesty.

Signature of Applicant Gordon E. Smith

Witness Beaudin Lemieux

Date 20/3/34 Rank Lieut R.C.N.V.R.

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

(E) CERTIFICATE OF COMPANY COMMANDING OFFICER

Gordon Ellsworth Smith having been duly enrolled to serve in the Royal Canadian Naval Volunteer Reserve Force, I have caused his name and every prescribed particular to be recorded in the Record Book of the Quebec Company of the R.C.N.V.R.

Beaudin Lemieux Lt
for Company Commanding Officer.

NOTE—This form when completed and when the particulars on it have been noted in the Company Commanding Officer's Record Book, is to be forwarded to Headquarters, Ottawa, for custody.

The Certificate of medical examination B-207, and certificates of previous service are to be sent to Headquarters, Ottawa, with this form.

Certificates of previous service will be returned after they have been examined at Headquarters, Ottawa.

(copy) original at Naval Head *Quebec* V-3220



Can. B. 207
2,500-1-31
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)

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 Gordon E. Smith ord Sea R.C.N.V.R.
candidate for entry as ANNUAL Naval Training, at Halifax
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 Quebec the 30th of August 1932.

Leut Tremblay R. R.C.M.C.
Examining Medical Officer

(Rank).....

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

(a) Age { Years Months	(b) Weight without Clothes lbs.	(c) Height with Bare Feet ft. ins.	(d) General Development	(e) Chest Girth inches (a) maximum (b) minimum (c) mean	(f) Vision by— (i) Snellen's Types (ii) Colour Vision right eye left eye colour vision	(g) Vaccinated or re- vaccinated for Small Pox (Date)	(h) Lungs, Heart, etc.	(i) Abdomen, Hernia, etc.	(j) Limbs and Joints	(k) Skin	(l) Ears and Hearing	(m) Testes, Variocele, etc. Testes enlarged into atrophic cysts presence of tumour dealing inflammation	(n) Mouth, Teeth (No. def- icient and No. defective, if any), Nose, Tonsils, etc.	(o) Anus, Haemorrhoids, etc.
19 7/12	136	5 9 1/2	Good	36 33 34		NO	Normal Normal	Normal NIL	Normal Normal	Normal	Normal good 20 FT			Normal NIL

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.

.....
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 impairment for training & duty due to enlargement of the scrotum, enlargement of testes, slight and probably due to presence of a tumour
enlargement
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.

V3220 OFFICIAL NUMBER

NAME SMITH
(Surname)

Gordon Elsworth
(Given Names)

OFFICIAL NUMBER V3220

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. Quebec	Ord. Smm.	3	7	31		V.G.	Mod.	15	8	31	Q.R. III	19	8	40			
Stadacona	"	2	8	31	--15-8-31	V.G.	Sat.	28	6	36							
Saguenay	"	24	5	32	--30-5-32	V.G.	Sat.	18	12	38							
DISCHARGED	"	24	1	33	MEDICALLY UNFIT (Memo 2-1-33)	V.G.	Supr.	16	1	40							
Div. Str. Quebec	"	20	3	34													
Stadacona	"	31	5	36	--28-6-36												
Valcartier Camp	"	4	9	37	--6-9-37												
Stadacona	"	20	11	38	--8-12-38												
Stadacona	A.B.	9	12	38	--18-12-38												
Stadacona	"	4	9	39													
Saguenay	"	6	9	39													
Stadacona	"	17	1	40													
Fraser	"	9	3	40													
Margaree	"	14	8	40													
DISCHARGED	"	22	10	40	Dead, Killed in Action (HMCS "Margaree" Casualty List)												

GENERAL REMARKS

DATE OF BIRTH			PLACE OF BIRTH		CIVIL OCCU.		REL. ED.		PERM. RESIDENCE		PREV. ENL.		RANK OR RATE ON ENLISTMENT		
DY.	MO.	YR.	BIRTH	MAIN	SUS.	GION			CITY	TOWN	SCRV.	DIV.	A	BR	RANK
16	6	12	14	450	0	30	X	2	54	09	0	12	0	0895	
ENLIST. DATE			ACT. SERV. DATE		STR.		NON-SUB.		M.		SHIP		DATE OF RATE		
DY.	MO.	YR.	DY.	MO.	YR.	CAT.							A	BR	RANK
20	03	34	04	09	38								0315	0	0894
SENIO. TV			STR.		NON-SUB.		M.		CODED		CHECKED				
DY.	MO.	YR.	CAT.	A	B	ST									
09	12	38	09	12	00	20	22-10	40							m m

V3220

OFFICIAL NUMBER

FILE NUMBER

113-S-233

OFFICIAL NUMBER V3220

NAME SMITH Gordon Elsworth DATE OF BIRTH 16 June, 1912
(Surname) (Given Names)PLACE OF BIRTH N.S. OCCUPATION PainterRELIGION C. of E. EDUCATIONRESIDENCE AT TIME OF ENLISTMENT: Street and No. 188 - 11th St. Town Limoilou, Quebec City. Province, etc.

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
3	7	31	3 years	5' 8 $\frac{3}{4}$ "	blond	blue	fair	Scar 1st finger left hand.				
20	3	34	3 years									
20	3	37	3 years									

NEXT OF KIN RELATIONSHIP (in pencil) Friend NAME (in pencil) Miss Esthew C. TaylorADDRESS (in pencil): Street and No. 211 Champs Elysees Town Quebec Province, etc. P. Q.

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	
				3	37	Passed Prov. S. Test Fair swimmer					
				9	12	Qual. A.B.					

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		

Date (in figures)			DAYS FORFEITED					
Day	Month	Year	Prison	Det'n	Cells	C. Power	W. Trial	In diff. Char.

SECOND CLASS FOR CONDUCT

From

To



MEDALS AND MEMORIALS—DECEASED PERSONNEL

RCNVR Nov. 41 "MARGAREE"

REGISTRATION No. DATE OF DESPATCH

(1) MEDALS
PERSON

ENTITLED TO

Mr. Osborne Smith - Brother

ADDRESS:

~~50¹ de la Ronde Street,~~ 105-6th St.,
Limouilou,
~~St. Pascal de Baylon, Quebec,~~ Corres. on file.

(2) MEMORIAL CROSS

WIDOW

ADDRESS:

(3) MEMORIAL CROSS

MOTHER

no record

ADDRESS:

MEMORIAL B R

DATE DESP

REGN. NO

772

(2)

(3)

DEPARTMENT OF VETERANS AFFAIRS
D OF D 22-10-40

AWARDS **NAVY**

WAR SERVICE RECORDS

D.D.

SMITH	Gordon Elsworth	A.B.	V-3220	FILE No.
SURNAME (IN BLOCK LETTERS)	CHRISTIAN NAMES	REG. No.	RANK ON DISCHARGE	C.A.S.F. UNIT

WAR SERVICE

BADGE

CLASS)

Nil

DATE DESPATCHED:

ADDRESS:

CAMPAIGN MEDALS	REGISTRATION NUMBER AND DATE DESPATCHED
1939-45 Star	<i>MEDALS RETD. UNDELIVERED</i> 5600
Atlantic Star	CANCELLED <i>16-1-50</i> 5-7-50
C.V.S.M. & Clasp	
War Medal	

(THE REVERSE TO BE USED FOR ESTATE PURPOSES)

Imp. S. 1243. (Established 1917.)

Can. S. 1243
 Imp. S. 1243
 Late Can. S. 524

RCNVR

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.

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True Copy of the
CERTIFICATE of the Service of

Gordon Elsworth SMITH

in the Naval Service of Canada. R.C.N.V.R.

PORT DIVISION	Quebec	OFFICIAL NUMBER... 3220
---------------	--------	-------------------------

Date of Birth..... 16th June 1912

Where born } Town..... Musquodoboit,
 } County and Province..... Halifax, Nova Scotia

Usual place of residence..... 211 Champ Fleurie, Quebec, PQ.

Trade brought up to..... Painter

Religious denomination..... Church of England

Next of kin..... *Sister - Mrs Romeo Thiboutot, 140 Artillerie St. Quebec*

Can swim.....

Man's signature on discharge to pension.....

CONTINUOUS SERVICE ENGAGEMENTS.			MEDALS, CLASPS, Etc.	
Date of actual volunteering.	Commencement of time.	Period volunteered for	Date Received.	Nature of Decoration
	3 July '31	3 years		
Re-entered	20 Mch '34	3 years		
	20 Mch '37	3 years		

DESCRIPTION OF PERSON.	STATURE		COLOUR OF			MARKS, WOUNDS AND SCARS.
	Feet.	In.	Complexion.	Hair.	Eyes.	
On entry as a boy.....						
On advancement to man's rating, or on entry under 28 years.....	5	8 $\frac{3}{4}$	Fair	Blond	Blue	Scar on first finger on left hand.
On re-entry for C. S. or for Non-C.S. after attaining 28 years...						
Further description if necessary....						

Name..... Gordon Elsworth SMITH.....

SHIP'S NAME.	LIST AND No.	RATING.	FROM	TO	CAUSE OF DISCHARGE.
STADACONA		Ord. Sea.	3 Aug '31	15 Aug '31	
			DISCHARGED "MEDICALLY UNFIT" 24 Jan. 1933.		
STADACONA		Ord. Sea.	1 June '36	28 June '36	
QUEBEC DIVISION		"	1 Jan '36	31 Dec '36	
STADACONA		"	20 Nov '38	17 Dec '38	
STADACONA		Able Sea.	4 Sep '39	5 Sep '39	
SAGUENAY		"	6 Sep '39	16 Jan '40	
<i>"Stadacona"</i>	<i>- -</i>	<i>- - -</i>	<i>17 Jan '40</i>	<i>8 Mch '40</i>	
<i>Fraser</i>	<i>- -</i>	<i>- " -</i>	<i>9 Mch '40</i>	<i>5 Sep '40</i>	
<i>Margaree</i>	<i>- -</i>	<i>- " -</i>	<i>6 Sep '40</i>	<i>22 Oct '40.</i>	<i>"D.S."</i>

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

34 35
MAR 21 1934
113-1223

QUESTIONNAIRE FOR CANDIDATES

FOR ENTRY IN THE ROYAL CANADIAN NAVAL VOLUNTEER RESERVE

P3121

Name (in full)..... Gordon Ellsworth Smith

Date and Place of Birth..... 16th June, 1912, Musquodobait, Nova Scotia
(Birth certificate, declaration by parents or affidavit as to date of birth must be attached)

Permanent Place of Residence..... 28. Cove Field Quebec City

Nearest Town to Residence (if living in country)..... Quebec City

Are you a British Subject?..... Yes

Are you single, married or a widower?..... Single

In what capacity do you wish to enrol?..... Seaman
(See standards of qualifications in attached pamphlet)

Present occupation or trade.....
(Attach any testimonials or recommendations)

Do you belong to any Naval, Military, Reserve or Territorial Force?..... No

Have you ever served with such forces? Give dates and details..... Quebec Company, R.C.N.V.R.

From 3rd July, 1931 To 24th January, 1933.

Have you ever been discharged from any of H. M. Forces as medically unfit? Yes, due to R. Testicule enlarged. Operation performed at Hotel Dieu Hospital Quebec, 1932.

Have you ever offered to serve in any of H. M. Forces and been rejected? No

presented himself for Medical Examination for the R.C.N.V.R. 19th Mar, 1934 passed What is your weight? 136 Lbs What is your height? 5.10

What is your chest measurement (not inflated)?..... 34

Are you free from all physical defects or malformation, and not subject to fits?..... Yes

Are you willing to be vaccinated or re-vaccinated and inoculated as considered necessary by the appropriate authorities?..... Yes

I hereby declare that the above answers are true in every respect.

Gordon E. Smith..... Signature

March 19th 1934..... Date

28 Cove Field Quebec..... Address

Beaudoin Lemieux Lt
(Witness to Signature) R.C.N.V.R.

This is to certify that I have personally seen the birth certificate of this applicant, or a sworn declaration as to his date of birth.

I certify his date of birth, according to legal documentary evidence, to be.....

Signed.....
Company Commanding Officer

RE-ENROLMENT FORM FOR MEN
OF THE
ROYAL CANADIAN NAVAL VOLUNTEER RESERVE

DEPT.
MILITIA & DEFENCE
MAR 24 1937
N.S. 113/233

P3856

47

SURNAME Smith OFFICIAL No. 3220

CHRISTIAN NAMES Gordon Ellsworth MARRIED, SINGLE OR WIDOWER Single

DATE OF RE-ENROLMENT	RATING IN WHICH RE-ENROLLING	FORMER PERIODS OF ENROLMENT
		1st period, from <u>20th Mar 1934</u> , to <u>20th Mar 1937</u>
	<u>Ord. Sea</u>	2nd " " <u>20th Mar 1937</u> , to <u>20th Mar 1940</u>
		3rd " "19....., to.....19.....
		4th " "19....., to.....19.....
		5th " "19....., to.....19.....

(B) DECLARATION TO BE MADE BY APPLICANT

(1) I hereby declare that I am desirous of being re-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.

(2) On being re-enrolled as a member of the Royal Canadian Naval Volunteer Reserve, I undertake and bind myself:—

- (a) To serve from the date hereof for three consecutive years, being subject to the provisions of the Naval Service Act, and of the Regulations made in pursuance thereof for the government of the Royal Canadian Naval Volunteer Reserve, and to the Customs and usages of His Majesty's Canadian Naval Service.
- (b) To report for active service if called upon in time of war or emergency, and, if called into active service, to serve ashore or afloat as may be directed, according to where my services are required.
- (c) To keep in good repair the kit and any articles of outfit which may be issued to me, and, when required to do so by the Commanding Officer of my Company, or any other authorized person, or in the event of my leaving the Reserve Force before completing three years' service, to return them to Company Headquarters and to pay compensation for any loss or damage thereto other than due to fair wear and tear.

Dated this 22nd day of March 1937.

Approved
[Signature]

Signature of Applicant G.E. Smith

(C) CERTIFICATE OF COMPANY COMMANDING OFFICER

I hereby certify that all the foregoing statements were made by the volunteer above named, in my presence, and that he has made and signed the above declaration in my presence on this 22nd

day of March 1937.

John P. Stairs Lt. RCNVR
Signature of C.C.O.

(D)

OATH OF ALLEGIANCE

I, Gordon Ellsworth Smith....., do sincerely promise and swear (or solemnly declare that I will be faithful and bear true allegiance to His Britannic Majesty.

Signature of Applicant..... G. E. Smith.....

Witness..... John F. Stairs Lt. RCNVR.....

Date..... March 22nd, 1937.....

Rank.....

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

(E)

CERTIFICATE OF COMPANY COMMANDING OFFICER

Gordon Ellsworth Smith.....having been duly re-enrolled to serve in the Royal Canadian Naval Volunteer Force, I have caused his name and every prescribed particular to be recorded in the Record Book of this Unit.

John F. Stairs Lt. RCNVR
for Company Commanding Officer

NOTE—When this form has been completed and the particulars in it have been noted in the Company Commanding Officer's Record Book, the form is to be forwarded to Headquarters, Ottawa, for custody.

The certificate of medical examination B-207 is to be sent to Headquarters, Ottawa, with this form.

R. C. N. V. R.
TRAINING REPORTS, 1938.

RECEIVED
DEC 21 1938
113-8-233
52

Name SMITH, Gordon E. Rate Ord. Seaman. O.N. 3220
 Division QUEBEC. Training Headquarters Halifax. Period No. Special.
ANNUAL TRAINING No. of days
 Entered for N.T. 21-11-38. Completed N.T. 4-12-38.
 Entered for V.S. 5-12-38. Completed V.S. 17-12-38. 17828
 Final Discharge 17-12-38. Total No. of Days 27.

INSTRUCTION

	Training Establishment " <u>Stadacona.</u> "			Service Afloat H.M.C.S.		
	From <u>21-11-38</u> To <u>17-12-38.</u>			From _____ To _____		
Subject	No. of Hours	Efficiency	Remarks	No. of Hours	Efficiency	Remarks
1. Seamanship		Sat.				
2. Boatwork		Sat.	Theory only.			
3. Signals		Sat.				
4. W/T						
5. Gunnery		Supr.				
6. Torpedo						
7. Minesweeping						
8. P. & R.T.		Sat.				
9. Swimming						
10. Kit and Medical		Sat.				
11.						
12. General Duties.		Sat.				

Approved
To rate A-B & rate
9-12-38
C. M. Taylor
10/12/38

Character V.G. Efficiency SAT. Character _____ Efficiency _____
 Qualified as Efficient Yes.
 E.T. Part I. Passed } Date _____
 Failed }
 Passed professionally for A.B. Date 9-12-38 Date _____
 Recommended for Advancement _____
 Recommended for Confirmation _____

Qualified for Advancement to _____
 Recommended for Special Branch Gunnery.
 General Remarks Rated Able Seaman 9-12-38.

A good loyal interested worker. Has got over his earlier difficulties, and has all the makings of an efficient R.C.N.V.R. rating.

Entered on History
Card by... R.M....

Signature E. G. Cord
Lieut. Commander, RCNVR.

RESERVE TRAINING OFFICER

30-12-38

NO. 495 9/4

Original

APR 13 1940
11.2 1/3 2-293
CANADA
H.Q. File No.

57

DECLARATION OF ALLOTMENT

List and Number in Ledger	ALLOTOR	Rank or Rating	Official No.	Daily Rate of Pay
"FRASER". 5 II / 204	Surname XXXXXXXX SMITH, 327008 Christian Names } Gordon E.	AB.RCNVR. P017043	3220	1.85 .10

Section A. ALLOTMENT NOW DECLARED

FULL NAME OF ALLOTTEE	Relationship	ADDRESS	Rate per Month to be charged on ledger	Month to commence. Payable on last working day
Surname NAPIER, Christian Names } (Miss). Esther C.	Friend.	211 Champ Fleulier, Quebec, PQ.	\$25.	APRIL.

Section B. DISPOSAL OF EXISTING ALLOTMENTS (See Note 1 below)

The following allotments are in force:—

Rate	NAME OF ALLOTTEE	ADDRESS	These allotments are to be disposed of as indicated below (see Note 2):—
\$5.00	H. Star & Son.	Halifax, NS.	NEW APRIL. See Decl # Ent'd. on Index Card Ent'd. on Allotment Ledgers

NOTE 1:—If there be no existing Allotment, the word "NIL" should be written across Section B.
NOTE 2:—Write "Increased or Reduced as Section A"; "To be stopped (charged to.....)"; "To be continued," etc.

Allottor's Signature authorizing charges..... Gordon E. Smith
AB.VR. Rank or Rating

ENTERED IN FAIR LEDGER	ENTERED IN ROUGH LEDGER
<i>A. Stanley</i>	<i>[Signature]</i>

The allotment now declared has been duly entered in the Fair and Rough Ledgers with effect from the appropriate date. The reduction or transfer has been duly approved by the Commanding Officer and the reasons for the alteration are:—

Approved

THE FINANCIAL SUPERINTENDENT,
Department of National Defence,
(Naval Service)

Ottawa, Ont.

PAYMASTER LIEUTENANT R.C.N.R.
FOR Accountant Officer
STADACONA.

H.M.C.S.

C. R.
P. A.
FIN. SUPT. BRANCH
DATE
INITIAL

Forwarded.....

10-4-40.

S. 63

2M-138
N.S. 815-9-63

NOT MORE THAN ONE MONTHLY ALLOTMENT SHOULD BE DEALT WITH ON THIS SHEET

For use at Headquarters only.

	INITIALS	DATE
Declaration received at Headquarters.....		
Declaration examined.....		
Approved.....		
Index card made.....		
Allotment ledger sheet made.....		
Allotment ledger sheet checked.....		
Type plate made.....		

MAIN FILE
CHARGED TO
SINCE
REC'D. CENTRAL REGISTRY
APR 13 1940
REFERRED TO
<i>[Signature]</i>

OFFICIAL COPY
NAVAL MESSAGE

S. 1320D
10 Mil.-5-40 (5005)
N.S. 815-9-1320D

To:

MISS ESTHER G. VAPIER
211 CHAMP FLENIER
QUEBEC QUE

From:

113 S 233

62

THE MINISTER OF NATIONAL DEFENCE DEEPLY REGRETS TO
INFORM YOU THAT YOUR FRIEND GORDON E. SMITH ABLE SEAMAN
R C N V R O.N. V 3220 IS MISSING, BELIEVED KILLED.

-/26

L/T P/L

REC'D SDO
1710/26

AB

27-10-40

5560

113-8.233.

63

1st November, 1940.

Dear Madam,


It is with deep regret that I must confirm the telegram sent out by the Minister of National Defence, reporting that Gordon E. Smith, A.B., V.3220, R.C.N.V.R., 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 bereavement.

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

Yours very truly,



(J.O. Cossette)
NAVAL SECRETARY.

Miss Esther C. Napier,
211 Champ Flouier,
QUEBEC, P.Q.



Department of National Defence

Naval Service

Ottawa, Canada.

IN REPLY PLEASE QUOTE

No. 113-S-233

NOV 8 1940

66

STATEMENT OF SERVICE OF

GORDON ELSWORTH SMITH

Able Seaman R.C.N.V.R. V3220

Entered as Ordinary Seaman 3 July 1931

H.M.C.S. "STADACONA"	}	Ord. Smn.	Performed Naval Training in 1931, 2, 6, 7, and 8.
H.M.C.S. "SAGUENAY"			
VALCARTIER CAMP			

Active Service

<u>Ship or Establishment.</u>	<u>Rating</u>	<u>From</u>	<u>To</u>
H.M.C.S. "STADACONA"	Able Smn.	4 Sept. 1939	- 30 Sept. 1939
H.M.C.S. "SAGUENAY"	" "	1 Oct. 1939	- 16 Jan. 1940
H.M.C.S. "STADACONA"	" "	17 Jan. 1940	- 8 Mar. 1940
H.M.C.S. "FRASER"	" "	9 Mar. 1940	-
H.M.C.S. "MARGAREE"	" "		- 22 Oct. 1940

Character Assessment for whole of time - "Very Good".

DISCHARGED "DEAD" - 22nd October, 1940.

J. O. Cossette

(J. O. Cossette),
Naval Secretary.

STATEMENT OF ACCOUNT

True extract from the ledger of H.M.C.S. "MARGAREE" ending 31st October 1940.

List 5-2 No. 55 (Name) SMITH, Gordon E. Rank Rating A.B. No. V-3220

When entered 1st October Date of appearance 6th Sep. Whither discharged "DD"

	\$	c.
CREDIT from former account.....	13	30
Pay as <u>A.B.</u> from <u>1st Oct.</u> to <u>31st Oct.</u> (<u>31</u> days at \$ <u>1.85</u> a day)	60	45
“ <u>Q.R.-3</u> “ “ “ “ “ “ (“ “ <u>.10</u> “)		
“ “ “ “ “ “ (“ “ “)		
“ “ “ “ “ “ (“ “ “)		
“ “ “ “ “ “ (“ “ “)		
Kit Upkeep Allowance.....	3	33
OTHER CREDITS: <u>G.M.</u>	1	32
<u>H.L.M.</u>	2	86
<u>L.U.C.</u>	3	46
<u>L.A.</u>	3	50
Total credits.....	87	22

DEBT from former account..... NIL

PAYMENTS:—	1st 2nd 3rd 4th 5th					
	\$ c.	\$ c.	\$ c.	\$ c.	\$ c.	
1st month.....	8.94					Total..... 8.94
2nd month.....						Total.....
3rd month.....						Total.....

Allotment..... OCTOBER..... 30.00

Pension deduction (Officers) charged to..... NIL of.....

Hospital stoppages..... NIL

Mulcts..... NIL

OTHER CHARGES:..... NIL

Total debits 38 94

Balance Cr. ~~or~~ Dr. 48 28

(Balance Dr. to be shown in red)

Number of days actually victualled during period mentioned above 15

NOT VICTUALLED

LENT, SICK OR LEAVE	INCLUSIVE DATE		No. OF DAYS	SHIP, HOSPITAL, etc., IN WHICH BORNE
	FROM	TO		
LENT	6th Sep.	7th Oct.	32	DRAKE

Date 1st April, 1941.

B. Macfield
for ACCOUNTANT OFFICER

PAYMASTER SUB. LIEUTENANT, RÖNVR.

41751

APR 16 1941
1138-233

87

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 GORDON E. SMITH Rating A.B.
Official No. V.3220 H.M.C.S. "MARGAREE" List 5-2/55
Who* was "DD" on the 22nd October 1940.

Net sum due on ledger on account of Wages.....	\$	48	cts.	28
Proceeds of sale of Effects charged against Wages, brought from the other side		N	I	L
CASH—				
Proceeds of sale of Effects, paid for in Cash, brought from the other side.....	\$	N	I	L
Found amongst Effects.....		N	I	L
Debts collected \$.....		N	I	L
<u>OK # 60-23226</u>			12	00
Cash debited in the Accountant Officer's Cash Acct.....		N	I	L
If in debt in ledger, amount to be stated (in red ink).....		N	I	L
Rate of allotment (in words) <u>TWENTY-FIVE & FIVE</u> charged to <u>31st</u> October, 1940.				
Name of ship from which transferred <u>H.M.C.S. "MARGAREE"</u>				
Total† <u>BALANCE CREDITOR</u>		<u>48</u>	<u>28</u>	
<u>OK 60-20340.</u>			<u>15</u>	<u>10</u>
			<u>00</u>	<u>28</u>
				<u>75.78</u>

*Notes on ledger
OK 60-20340*

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. "MARGAREE" amounting to a net balance† CREDITOR of -FORTY-EIGHT- dollars TWENTY-EIGHT cents.

Dated on board H.M.C.S. "STADACONA" at HALIFAX NOVA SCOTIA this 25th day of MARCH 19 41.

Approved Bm Watfield FOR Accountant Officer
Paymaster Sub-Lieutenant, RCNVR
{ Initials of the Assistant Accountant Officer
J E Leigh Commanding Officer.
ACTING CAPTAIN, R.C.N.

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.

Ledger / Fair / Rough

P096966

113 B-233
July 20-12

Six copies to be rendered to Naval Service Headquarters

REPORT OF THE DEATH OF AN OFFICER, MAN OR BOY

86

H.M.C.S. STADACONA at HALIFAX NOVA SCOTIA

Name Gordon Elsworth SMITH
(Christian names in full)

Rank of Rating Able Seaman Official No. 3220
(If unknown, date of first entry)

Place of Birth Musquodoboit, Halifax, Nova Scotia. Date of Birth 16th June 1912

Occupation in Civil Life Painter Religion Church of England

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) 9 years and 3 months

Date of Death 22nd October Place of Death At Sea

Cause of Death Lost 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 Mrs. Romeo Thiboutot Relationship Sister
Address 140 Artillerie Street, Quebec

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

J. Edwards
COMMANDER, R.C.N.
Commanding Officer,

8th November 1912

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

MAIN FILE
 CHARGED TO *Tracy*
 SINCE *20-12-40*
 REC'D. CENTRAL REGISTRY
 DEC 22 1940
 REFERRED TO
N.P.R.

O 10
 (COMMUNICATIONS OFFICE)
 1000
 1000

The following information is being furnished to you for your information and for the use of your office. It is requested that you advise this Bureau of any changes in the information furnished hereon.

Name of Person: *John Edward ...*
 Address: *100 ...*
 Date of Birth: *...*
 Date of Issue: *...*
 Date of Expiration: *...*
 Name of Issuing Office: *...*
 Name of Receiving Office: *...*

This document is the property of the Bureau of Investigation and is loaned to you for your use only. It is to be returned to the Bureau when no longer needed.

BUREAU OF INVESTIGATION
 DEPARTMENT OF JUSTICE
 WASHINGTON, D. C.

BUREAU OF INVESTIGATION
 DEPARTMENT OF JUSTICE
 WASHINGTON, D. C.

DISTRIBUTION OF SERVICE ESTATES GMW
NAVY

Estates Form "P. 4"

Name..... **SMITH,** **Gordon E.** No. **V3220**
Surname Christian Names

Rank **AB.** **Margaree** **22-10-40**
Unit Date of Death

AMOUNT **W.S.G.** **230.21**
L.P.C.....\$ **75.78**

Date..... **23-2-46**

Other Credits.....
Total..... **305.99**
Prev. Dist. **75.78**
This Dist. **230.21**

SHARE	RELATIONSHIP	NAME AND ADDRESS	AMOUNT
1/9	Brother ✓	Osborne Smith 105 - 6th St. Limoullou Quebec, P.Q.	25.58
1/9	Sister-in-law	Mrs. Audley Smith Blue River Temiscovata Co. P.Q. (For benefit of 1 minor)	25.58
1/9	Sister ✓	Mrs. Leola Comeau 50½ De La Ronde St. Quebec, P.Q.	25.58
1/9	Sister ✓	Mrs. Mary Burke Box 150 Masson, P.Q.	25.58
1/9	Sister ✓	Mrs. Romeo Thiboutot La Sarre, Abitibi, P.Q.	25.58
1/9	Sister ✓	Mrs. Philippe Boule Box 150 Masson, P.Q.	25.58
1/9	Brother ✓	James L. Smith 15 A Bannerman Ave., Timmins, Ont.	25.58
1/9	Brother ✓	Lawrence Smith 421 - 8th Ave. Limoullou, Quebec, P.Q.	25.57

AUTHORITY					
H.Q. F.E. No.	VOTE	PRI	H.Q. SUB.	OBJ.	AMOUNT
9999	831	00	50	000	230.21
CLASSIFIED BY			EXAMINED BY		
<i>[Signature]</i>			For Chief Treasury Officer		

DISTRIBUTION APPROVED AND AUTHORIZED

.....
(L. M. FIRTH) Colonel
Director of Estates

AUDITED FOR PAYMENT

.....
For Chief Treasury Officer

DISTRIBUTION OF SERVICE ESTATES GMW

Estates Form "P. 4"

NAVY

Name..... **SMITH,** **Gordon E.** No. **V3220**
Surname Christian Names

..... **A.B.** **Margaree** **22-10-40**
Rank Unit Date of Death

AMOUNT **W.S.G.** **230.21**
 L.P.C.....\$ **75.78**

Date..... **23-2-46**

Other Credits.....
 Total..... **305.99**
 Prev. Dist. **75.78**
 This Dist. **230.21**

SHARE	RELATIONSHIP	NAME AND ADDRESS	AMOUNT
1/9	Sister ✓	Mrs. Muriel Feeling R.F.D. No. 1 Alps Rd. Preakness New Jersey, U.S.A. (As next of kin entitled) (Cheque to have non-convertible endorsement)	25.58

WSG

AUTHORITY					
H.Q. F.E. No.	VOTE	PRI	H.Q. SUB.	OBJ.	AMOUNT
9999	831	00	50	000	230.21
CLASSIFIED BY <i>[Signature]</i>			EXAMINED BY		
			For Chief Treasury Officer		

DISTRIBUTION APPROVED AND AUTHORIZED

.....
 (L. M. FIRTH) Colonel
 Director of Estates

AUDITED FOR PAYMENT

.....
 For Chief Treasury Officer

- Navy
- Army
- Air Force

(Mark X opposite Force in which you last served.)

924738

M.F.M. 441
1 Mil. 9-44 (5449)
H.Q. 1772-39-2326

DEPARTMENT OF NATIONAL DEFENCE

Application for War Service Gratuity

(Canadian Armed Forces)

113-1-233

A complete reply must be given to every question in this application. If any question is not applicable, "N.A." is to be inserted.

1. Surname on termination of service SMITH (Print)

2. Christian Names Gordon Elsworth (Print)

3. Service No. V-3220 4. Paid rank or rating at date of termination of Service A.B.

5. Address, in full, to which payments of gratuity are to be forwarded
Mrs. Leola Smith Comeau
50 1/2 de la Ronde Street
St. Pascal de Bayou
Que.

6. State below your period or periods of service in the Armed Forces of Canada during the present war.

Service (Navy, Army or Air Force)	Service No.	Final Rank or Rating	Date of Commencement of Service	Date of Termination of Service
NAVY	V-3220	A.B.	10-9-39	22-10-40

Send #4

7. Have you during the present War, while a member of the Canadian Forces, been attached, loaned or seconded to any of the Naval, Military, or Air Forces of His Majesty or of any power allied or associated with His Majesty? N.A. If so, state name of Force or Forces N.A.

8. Have you during the present War, while *not* a member of the Canadian Armed Forces, been appointed to or enlisted in any of the Naval, Military or Air Forces of His Majesty (other than the Canadian Armed Forces)? N.A. If so, state the Force or Forces, with dates of commencement and termination of service. N.A.

NAVAL PERSONNEL
RECORDS
11713
JUL 4 1945
WAR SERVICE GRATUITY
SERIAL 944

Having given correct information in this application, I hereby apply for payment of the War Service Gratuity in respect of the above named

(Date)

Mrs. Ledger Comeau
(Signature of Applicant)
(Mrs. Ledger Comeau)

If name signed in space above represents a change from name given in question 1, insert here the name at termination of service. As cheques will be prepared in the name given in question 1, a specific address in question 5 is particularly essential.

NOTE: When completed this form is to be mailed to the Headquarters of the Service in which you last served. Viz: Navy—The Secretary, Naval Board, Naval Service Headquarters, Ottawa. (The Secretary, Naval Board, Naval Service Headquarters, Ottawa.) Army—The Secretary, Department of National Defence (Army), Ottawa. Attention: Paymaster-General. Air Force—The Secretary, Department of National Defence for Air, Ottawa. Attention: Records Officer.

RECEIVED JUL 1 1945

RECEIVED JUL 1 1945

JUL 1 1945



RECEIVED JUL 1 1945

RECEIVED JUL 1 1945

RECEIVED JUL 1 1945

4
NAVY

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

DECEASED MEMBER'S NAME	Gordon Elworth (CHRISTIAN NAMES)	SMITH (SURNAME)	REGISTER NO. 11713
PAYEE ADDRESS	Director of Estates, 308 Sparks Street, Ottawa, Ont.	for Service Estate of Gordon E. SMITH, N.S. V-3220	FILE NO. NSV 2120 DATE 26 Oct/45 SERVICE NO. V-3220 FINAL RANK OR RATING A.B. DATE OF DISCHARGE 22 Oct/45
DATE OF TERMINATION OF OVERSEAS SERVICE	22 Oct/40		DATE OF DISCHARGE 22 Oct/45

A. TOTAL QUALIFYING SERVICE	\$
NO. OF DAYS 409 EQUAL TO 13 COMPLETE PERIODS AT \$7.50	97.50
B. QUALIFYING OVERSEAS SERVICE	
NO. OF DAYS 357 LESS 19 INELIGIBLE DAYS, EQUAL TO 338 DAYS @ 25C. PER DAY	84.00

C. SUPPLEMENT FOR OVERSEAS SERVICE

DAILY RATES AT DISCHARGE

PAY	\$	1.85	
SUBSISTENCE OR LODGING AND PROVISION ALLOWANCE	\$	1.45	
ADDITIONAL PAY H.L.M.	\$.13	
Q.R. III	\$.10	
	\$		
DEPENDENTS' ALLOWANCE 1/30 OF \$ N11	\$		
TOTAL	\$	3.53	X7 = \$ 24.71
NO. OF DAYS 357			X\$ 24.71
		183	48.21

D. WAR SERVICE GRATUITY 230.21

E. DEDUCTIONS	OVERPAYMENT OF	PAY AND ALLOWANCES \$	
		DEPENDENTS' ALLOWANCE \$	
	OTHER DEDUCTIONS	AND ASSIGNED PAY \$	
			\$ N11

F. TOTAL AMOUNT PAYABLE 230.21

G. YOUR PORTION OF GRATUITY IS—

DEPENDENTS' ALLOWANCE IN ISSUE TO YOU \$ _____ OF \$ _____ = \$ 230.21

TOTAL DEPENDENTS' ALLOWANCE IN ISSUE \$ _____

JO. N. PA. 187 - Nov. 6/45

CERTIFICATE I CERTIFY THAT THE AMOUNT HAS BEEN CORRECTLY COMPUTED AND IS PAYABLE IN ACCORDANCE WITH THE TERMS OF THE WAR SERVICE GRANTS ACT, 1944 AND THE REGULATIONS ISSUED THEREUNDER.

TREASURY	
PREPARED BY <i>YN</i>	CHECKED BY <i>R. H. Hendry</i>
CHECKED BY <i>R. H. Hendry</i>	DATE <i>30/10/45</i>
SERVICE REPRESENTATIVE <i>[Signature]</i> for Dir. Naval Pay Admtg.	

STATEMENT OF WAR SERVICE GRATUITY - NAVY

Typed

Member's Name: *Gordon Edworth SMITH*
 (Christian Names) (Surname)

Payee: *Director of Islates* } for service estate of
 Address: *308 Sparks Street* } *Gordon & Smith*
Ottawa, Ont } *N.S. V3220*

Register No. *11713*
 File No. *V-3220*
 Date *11/7/45*
 Service No. *V-3220*
 Final Rank or Rating *A.B.*

Date of termination of overseas service *22 Oct 40* Date of Discharge *22 Oct 40*

A. TOTAL QUALIFYING SERVICE
 No. of days *409* equal to *13* complete periods at *27.50*
 30 *97.50*

B. QUALIFYING OVERSEAS SERVICE
 No. of days *357* less *19* ineligible days equal to *338* days @ *25¢* per day *84.50*

C. SUPPLEMENT FOR OVERSEAS SERVICE
 DAILY RATES AT DISCHARGE

Pay	\$	<i>1.85</i>	
Subsistence or Lodging and Provision Allowance	\$	<i>1.45</i>	
Additional Pay	\$	<i>.13</i>	
	\$	<i>.10</i>	
Dependents' Allowance 1/30 of \$ <i>Nil</i>	\$	<i>—</i>	
Total		<i>3.53</i>	<i>x 7 = \$ 24.71</i>
No. of days		<i>357</i>	<i>x \$ 24.71 = 48.21</i>
		<i>183</i>	

D. WAR SERVICE GRATUITY *230.21*

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

F. TOTAL AMOUNT PAYABLE *J.V. NPA -187 Nov 6/45* *230.21*

G. YOUR PORTION OF GRATUITY IS
 Dependents' Allowance in issue to you \$ _____ of \$ = \$ *230.21*
 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.

		Treasury	
Prepared by	Checked by	Checked by	Date

Service Representative

D.N.P.A. CHECK

1 <i>dh</i>	6 <i>[Signature]</i>
2 <i>[Signature]</i>	7 <i>[Signature]</i>
3 <i>[Signature]</i>	8 <i>[Signature]</i>
4 <i>[Signature]</i>	9 <i>[Signature]</i>
5 <i>[Signature]</i>	10 <i>[Signature]</i>

S.S.