

V18474
BEDFORD

ANDREW

LAWRE

OCCUPATIONAL HISTORY FORM

113-B-1916

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 BERNARD ANDREW LAWRENCE (b) Reg'l. No. V18474
2. (a) Arm of service R.C.N.V.R. (b) Unit KINGSTON (c) Rank and down
3. (a) Date of birth 18/11/21 (b) Have you any dependents? no (c) Place of residence at time of enlistment St. Boniface
4. (a) Place of enlistment Kingston (b) Date of enlistment 17/12/41

PLEASE LEAVE BLANK

Section B—EDUCATION AND TRAINING

5. (a) State age on finally leaving school 17 (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.) Junior Matriculation
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 Richard T. Porter Address Kingston
19. Nature of employer's business (for instance, "farmer", or "building contractor", or "boot factory", or "iron foundry", or "retail store", etc.) Contractor
20. (a) Your specific occupation Contractor (b) Number of years' experience at this occupation with any employer.....
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? no (b) Do you feel competent to operate a farm? no (c) If so, in what kind of farming?.....
25. (a) Were you born on a farm? no (b) How many years' actual farming experience have you had?..... (c) In what provinces did you have experience?.....

Section G—MISCELLANEOUS

26. Have you made any arrangements other than indicated above, for re-establishment in civil life after discharge?.....
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 no



DATE 18 August 1941

SIGNATURE Bernard Andrew Lawrence

MEMORANDUM FOR

Mr. Edmund Bedford
155 Dome Avenue
South Porcupine, 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. N.S. 113-B-1916 FD. 309

W

DEPARTMENT OF NATIONAL DEFENCE
ESTATES BRANCH
OTTAWA, ONT.

January 7, 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

BEDFORD, Andrew Lawrence, A.B.

No. V. 18474, 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, 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.

A deceased's Service estate, the administration of which is the responsibility of the Estates Branch, consists of any balance of pay and allowances at credit, cash on hand and the personal effects which are under the control of the Service authorities. To obtain such assets, it is not necessary for the person(s) legally entitled thereto to obtain through the Courts Probate of the Will, or if none, Letters of Administration of his estate.

In addition to the administration of those Service assets, the Administrator of Estates is authorized to withdraw into Government account any funds (within a defined amount) on deposit to the deceased's credit in Banks, Post Offices or other financial institutions in Canada and Overseas, without expense or trouble to the person(s) legally entitled to the estate, and to distribute such funds at the same time as any balance of pay is distributed. Also, War Savings Certificates and Victory Loan Bonds owned by the deceased may be redeemed and similarly distributed, or transmitted into the name(s) of the person(s) legally entitled. Such Certificates and Bonds should not be forwarded to the Administrator of Estates until they are requested.

If there are other assets which necessitate an application for Probate or Letters of Administration, the Administrator of Estates may transfer and hand over the Service assets to the executor or administrator appointed by the Court so that all the estate, Service and otherwise, may be dealt with as a whole.

The information given by you on Pages 2 and 3 of this form is therefore of importance in determining whether or not the deceased's assets are such that they may all be administered by the Administrator of Estates to the person(s) legally entitled, that is, without the need for Probate or Administration.

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.

H.R. Wade
(H.R. Wade) Cdr. RCNVR
for (L.M. Firth) Lt.-Colonel
Administrator of Estates.

HRW/JN

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.....	NONE		
2	Children of the Deceased and dates of their Births.....	NONE		
3	Father of the Deceased.....	EDMUND LAWRENCE BEDFORD	57	155 DOME AVE SOUTH PORCUPINE ONT
4	Mother of the Deceased.....	MARGARET-EMILY BEDFORD	DIED	DEC. 1 - 1931 AGE 47 AT TIME OF DEATH
5	Brothers of the Deceased	Full Blood	NONE	
		Half Blood	NONE	
6	Sisters of the Deceased	Full Blood	EDNA - NOW - MRS ARVI MAKI 30 NELLIE - NOW - MRS A. D. ROBINSON 26 MARGORIE NOW - MRS. WM. MAKI 24	155 DOME AVE SOUTH PORCUPINE ONT 126 GOLDEN AVE SOUTH PORCUPINE ONT 106 - COMMERCIAL AVE SOUTH PORCUPINE ONT
		Half Blood	NONE	
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.	NONE	Names and ages of their children (if any)	Address of their children

ANSWER FULLY EACH QUESTION ON THIS PAGE

PARTICULARS AS TO IDENTITY

8	Full names of the deceased	BEDFORD ANDREW LAWRENCE
9	Date of his birth	JULY-18-1923
10	Place and date of his marriage.	SINGLE
11	Place and date of his parents' marriage.	SAULT STE MARIE ONT

PARTICULARS OF DOMICILE

12	Place where deceased was born.	SAULT STE MARIE ONT
13	State, in order, the Province, State and/or Country in which he resided before enlistment and the period of time in each.	(a) 8 years in Ontario Sault Ste Marie (b) 9 years in Ontario South Porcupine (c) (d) BALANCE. IN. R.C.N.V.R.
14	Nature of employment before enlistment.	HAD ONLY FINISHED SECONDARY EDUCATION. WORKED. SHORT PERIOD AT. DOME MINES
15	State whether he owned the premises in which he lived and, if so, where situated.	NO
16	Name place where deceased stated he intended to make his permanent home.	SOUTH PORCUPINE ONT

PARTICULARS OF ESTATE

17	Did he leave a Will?	NO
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?	NO
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.	NO
20	Amount of War Savings Certificates held by deceased.	HAD PURCHASED. BONDS BUT IN MY NAME. E.L. BEDFORD HIS FATHER
21	Amount of Victory Loan Bonds held by deceased.	AS ABOVE
22	If deceased had life insurance, name companies and amount payable under each policy and the person named as beneficiary there. Describe other assets, if any, and estimated value thereof.	NO INSURANCE NO ASSETS
23	Is application for Probate or Letters of Administration necessary (see page 1)?	NO

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.	NO NO
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. WAS LOST AT SEA

(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 of the deceased.

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

E. h. Bedford

{Signature of Informant

155 DOME SOUTH PORCUPINE ONT Address

CERTIFICATE

I hereby certify that, to the best of my knowledge and belief E. h. Bedford

*See above.

{ Name of Informant } is the* Father 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 at Timmins, Ont this 11th day of January 1944

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

Geo Sicken

Qualification

Minister

Wachbay Presbyterian Church

Address

108 Maple St S. Timmins, Ont.

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

Andrew Lawrence Bedford's mother died when he was 8 years of age and I as his father have taken care of him up to the time of his enlistment in The R.C.N.V.R. Some time in July 1941 when he was only 17 years of age. I might add that as I am now 57 years of age that my working days are almost over and Andrew would certainly have helped me had he lived.

Yours very truly

Edmund. B. Bedford



CANADA

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

P 86886

DEPT. NATIONAL DEFENCE

JUL - 9 1941
113-181916

ATTESTATION FORM (HOSTILITIES FORM)

FOR MEN OF THE ROYAL CANADIAN NAVAL VOLUNTEER RESERVE

SURNAME Bedford OFFICIAL NO. 118474
CHRISTIAN NAMES Andrew Lawrence MARRIED, SINGLE OR WIDOWER Single

PERMANENT ADDRESS 155 Dome Ave., South Porcupine, Ontario. RELIGION United

DATE OF BIRTH 18th July 1923 PLACE OF BIRTH Sault Ste. Marie NAME AND ADDRESS OF NEXT OF KIN Mr. Edmund Bedford (Father)
Town Sault Ste. Marie County Elgoma Dist. Same Address.
Province Ontario
*Original Nationality of:
Father British
Mother #

*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>37</u>	<u>Brown</u>	<u>Blue</u>	<u>Clear</u>	<u>Vacc. Scar Upper Left Arm.</u>
Inches <u>7</u>	Deflated <u>34</u>				
	Mean <u>36</u>				

EDUCATIONAL STANDING 3rd Form Tech. TRADE OR CALLING AND IN WHOSE EMPLOY Northern Ont. Power Co. Repairman. Timmins, Ontario.

DATE OF ENROLMENT 4th July 1941 RATING FOR WHICH ENROLLED Div. Str. R.C.N.V.R. DIVISION, OR OTHER ESTABLISHMENT, AT WHICH ENROLLED Ord. Smn. Kingston, Ontario.

(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 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.

Personnel Records Division.

1. Noted in Records ✓

2. Index Card ✓

3. Non Sub. Card ✓

4. Statistical Card ✓

5. Homeo Strip ✓

6. Pension Card ✓

7. ✓

8. ✓

DATE 19/7/41

(5) On being enrolled as a member of the Kingston Division of the Royal Canadian Naval Volunteer Reserve, I undertake to bind myself:—

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

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

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

(d) To undergo vaccination or re-vaccination, or inoculation, as considered necessary by the appropriate authorities.

Dated this 4th day of July 1941

Signature of applicant Andrew Bedford

(C) CERTIFICATE OF ATTESTING 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 4th day of July 1941

A. K. Haver
Signature of and rank of Attesting Officer.
LIEUT. R.C.N.V.R.

(D) OATH OF ALLEGIANCE

I, Andrew Lawrence Bedford 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 Andrew Bedford

Witness A. K. Haver

Date 4th July 1941 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 ATTESTING OFFICER

Andrew Lawrence Bedford 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 Kingston Division of the R.C.N.V.R. or in the appropriate official documents.

A. K. Haver
LIEUT. R.C.N.V.R. Attesting Officer.

4th July 1941 R.C.N.V.R. Division Kingston
(or other establishment)

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

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

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



Certificate of Medical Examination of Officers, Men and Boys

NAVAL SERVICE OF CANADA

(R.C.N. OR RESERVE FORCES)

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

I, the undersigned, have examined Andrew Lawrence Bedford

‡ candidate for entry as Ord. Smn.

and I believe him to be * $\left\{ \begin{array}{l} \text{in all respects fit for His Majesty's Service.} \\ \text{unfit for His Majesty's Service for the reason stated below.} \end{array} \right\}$ He has signed the Certificate given below in my presence.

‡ Strike out if inapplicable. * Delete one.

This examination has been made in accordance with the current Instructions as to Medical Standards.

(a) Age (Years / Months)	(b) Weight without Clothes (lbs.)	(c) Height with Bare Feet (ft. / ins.)	(d) General Development	(e) Chest Girth (inches)	(f) Vision by— (i) Snellen's Types (ii) Colour Vision	(g) Vaccinated or re-vaccinated for Small Pox (Date)	(h) Lungs, Heart, etc.	(i) Abdomen, Hernia, etc.	(k) Limbs and Joints	(l) Skin	(m) Ears and Hearing	(n) Testes, Variocele, etc.	(o) Mouth, Teeth (No. deficient and No. defective, if any), Nose, Tonsils, etc.	(p) Anus, Hemorrhoids, etc.
18	149	5 7	Good	36 (a) maximum 37 (b) minimum 34 (c) mean 36	right eye 6/6 left eye 6/6 *colour vision	Childhood	Normal	Normal	Normal	Clear	Normal	Normal	M.M. Normal 2 deficient	Normal

*If colour vision is not normal by Ishihara test, degree of colour blindness to be indicated.

X-ray { Not taken.
Approved.
Positive.
Doubtful.

Negative # 1638

Write in the appropriate notation, and any remarks necessary.

CERTIFICATE TO BE SIGNED BY CANDIDATE

I hereby certify that to the best of my belief I have never suffered from Fits, †Incontinence of Urine, Discharge from the Ears, or any other disease likely to render me unfit for His Majesty's Service. ‡I am willing to undergo, after entry, such dental treatment, vaccination, or inoculations as may be authorized.

Andrew Bedford

Signature of Candidate

† The exact meaning of this is to be clearly explained to the Candidate by the Examining Medical Officer.
‡ Strike out if inapplicable.

When a Candidate is subject to a defect or disability, the following information is to be inserted:

This Candidate is the subject of.....

* which renders him medically unfit for service, not considered of sufficient importance to cause his rejection, he being desirable in other respects.

* Delete one.

IF REJECTED
insert here
UNFIT
in block letters

Dated at Kingston the 4th of July 19 41.

[Signature]
Examining Medical Officer
(Rank) [Signature]

Rechecked Aug 1941

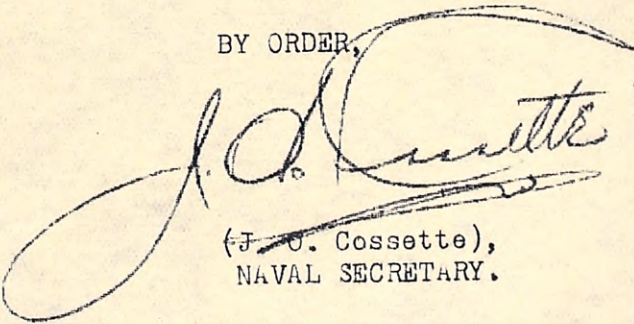
21st July, 1941

MEMORANDUM:

The enrolment of the undermentioned ratings in the Kingston Division, R.C.N.V.R., is approved,

<u>NAME</u>	<u>RATING</u>	<u>O.N.</u>	<u>DATE</u>
ADAMSON, Robt. James	Ord. Snn.	V.18472	4 July/41
ALEXANDER, Louis L.R.	Ord. Snn.	V.18473	2 July "
BEDFORD, Andrew L.	Ord. Snn.	V.18474	4 July "
COURSEY, Patrick H.	Ord. Snn.	V.18475	12 June "
HOWE, Ernest Frank	Stoker II	V.18476	4 July "
HAYWARD, Jas. S.	Ord. Snn.	V.18477	4 July "

BY ORDER,



(J. O. Cossette),
NAVAL SECRETARY.

The Commanding Officer,
Kingston Division, R.C.N.V.R.,
Richardson Building,
Princess St.,
KINGSTON, Ont.

EW

REGISTERED

LA

N.S. 113-B-1916 Pers N.

37

DEC 29 1943

Dear Mr. Bedford:

Further to my letter of the 27th of September, 1943, in view of the length of time that has elapsed since your son, Andrew Lawrence Bedford, Able Seaman, Official Number V.18474, Royal Canadian Naval Volunteer Reserve, was reported "missing" after the sinking of H.M.C.S. "St. Croix", and as no information has since been received of his having survived, the Canadian Naval Authorities have now presumed his death to have occurred on the 20th of September, 1943.

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

Yours sincerely,

LETTER dispatched by
PERSONNEL NAVAL

DEC 28 1943

[Signature]
SECRETARY, NAVAL BOARD.

Mr. Edmund Bedford,
155 Dome Ave.,
SOUTH PORCUPINE, Ont.

[Signature]
NAVAL PERSONNEL RECORDS

C. R. P. A.
TREASURY OFFICE
 Date: 11/1/44
 Initial: gms

DEPARTMENT OF NATIONAL DEFENCE
 - Naval Service -
 Ottawa, Canada.

..... DEC. 29. 1943.
 (Date.)

Sir: The following casualty has been reported -

NAME RAISE or RATING NAVAL NO.
BEDFORD, Andrew Lawrence Able Seaman V-18474, R.C.N.V.R.

DATE OF ENLISTMENT - 4th July, 1941. Active Service: 18th August, 1941.

DATE OF DISCHARGE - 20th September, 1943.

HOSPITAL -
 (If discharged in hospital under jurisdiction of D.F. & M.H.)

SERVICE - Canada & High Seas
 (Indicate whether in Canada only; or in Canada and the high seas or elsewhere.)

Reason for discharge and when and where any disability was incurred, or where death occurred. Missing, presumed dead. He was serving in H.M.C.S. "ST. CROIX", which was lost while serving on convoy duty in the Atlantic, due to enemy action.

(Show clearly whether death or disability due to enemy action, accident or disease, and whether it occurred in Canada, or on the high seas or elsewhere outside Canada.)

NEXT OF KIN & RELATIONSHIP -

RELATIONSHIP Father NAME Mr. Edmund Bedford,

ADDRESS 155 Dome Avenue, SOUTH PORCUPINE, Ontario.

NOTE: If records indicate that rating was separated from his wife, legally or otherwise, details to be furnished and copy of any Court Order, the Separation Agreement, etc., to be furnished.

gms

FORM "A" RESPECTING THE ABOVE NAMED HAS BEEN PREVIOUSLY FORWARDED. PLEASE SEE REVERSE SIDE FOR DETAILS OF MARRIAGE ALLOWANCE, DEPENDENTS ALLOWANCE, etc.

REMARKS:

THIS PORTION OF FORM COMPLETED BY CHIEF TREASURY OFFICER, DEPARTMENT OF NATIONAL DEFENCE, NAVAL SERVICE.

<u>Names of Dependents</u>	<u>Relationship</u>	<u>Maiden name of wife</u>	<u>Date of marriage and/or date of birth of children</u>
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American Clothing House,
9 Charlotte St.,
St. John's, N.B.

\$10.00 Stopped Sept. 30/43.

<u>D. A.</u>	<u>A. P.</u>	<u>TOTAL</u>
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Monthly Rate:

To whom Paid: ADDRESS

Date of Enlistment:

Date of Discharge:

Inclusive date to which D.A. and/or A.P. was Paid:

The final deduction of Assigned Pay for _____ has been made for the period from 1st to _____ of _____ 194

Remarks:

Computed by *M W.*

Checked by *R. Labochelle*

Alec. Boswell
for
Chief Treasury Officer,
DEPARTMENT OF NATIONAL DEFENCE,
(Naval Service.)

The Secretary, The Canadian Pension Commission,
Room 228, Daly Building, OTTAWA, Ontario.

South Porcupine Ont. Jan 10/44

File.

N.S. 113-B-1916 PERS. N.

002413

40

Gentlemen

In reply To your letter
Dec. 29/43.

I regret To have To inform you That
my wife. Mrs. Bedford and mother
of Andrew Lawrence Bedford, Able Seaman
official No. V-18474 R.C.N.V.R. died on
Dec. 1st. 1931 when Andrew was 8 years
of age. → noted on Casualty Card
13/1/44. E. N.P.R./5

I also note That had Mrs Bedford
been living That arrangements
would be made To forward a
memorial cross.

If I am in order To make a
suggestion. I would certainly be
pleased To receive This memorial
cross. because I have been both
father and mother To Andrew since
he was 8 years of age

Sincerely

Edmund Lawrence Bedford



14 January, 1944.

Dear Mr. Bedford:

I wish to thank you for your letter of the 10th of January, 1944, in reply to my inquiry of recent date. According to regulations, a Memorial Cross will be issued to the widow or the mother in respect of every sailor who laid down his life for his country during the present war, who is survived by either. If both survive him, two Crosses will be issued, one to each. It is regretted, however, that a Cross cannot be issued to you as there is no provision for the issue of same to any relative except the wife or the mother.

Yours very truly,

H.B. Money

for SECRETARY, NAVAL BOARD.

Mr. Edmund Lawrence Bedford,
South Porcupine, Ont.

Passing Certificate

This is to Certify

that Andrew Lawrence BEDFORD

Rating..... Ordinary Seaman, R.C.N.V.R. Official Number..... V.18474

has passed

THE EDUCATIONAL TEST, I, R.C.N.

held on..... 17th March, 1942.

For advancement to Petty Officer

C. K. M. Caslin
.....
~~Naval Secretary~~
A/Commander, R.C.N.V.R.,
Director of Education.

Department of National Defence,

Ottawa, this..... 1st..... day of..... April,..... 19 42.

EMC

DEC 23 1943

V-18474

✓
113-B-1916 PERS.(N)



Dear Sir:

It will be appreciated if you will be good enough to inform me whether Mrs. Bedford, mother of the late Andrew Lawrence Bedford, Able Seaman, Official No. V-18474, Royal Canadian Naval Volunteer Reserve, is living. If so, arrangements will be made to forward to her a Memorial Cross as a memento of her personal loss and sacrifice.

Yours very truly,

H.B. Money

for SECRETARY, NAVAL BOARD.

Mr. Edmund Bedford,
155 Dome Ave.,
SOUTH PORCUPINE, Ont.

per *CA*
a.g.f.

THE GEORGE TAYLOR HARDWARE LIMITED

JOBBERS IN
SHELF AND HEAVY HARDWARE

IN REPLY PLEASE REFER TO

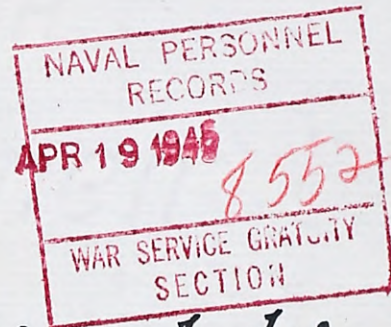


E. h. Bedford
To The George Taylor Hardware Ltd
Toronto Ont.

April 16/45

Dept. of National Defence
Paymaster General in Charge
of Gratuities
Ottawa Ont.

909570



Please advise what proceedings I have to take to receive Gratuity earned by my son V18474 REXVR. who was pronounced dead by the Canadian Naval authorities on the 20th of September 1943 after the sinking of H. M. S. St. Louis.

I am not certain that I am addressing this letter to the proper authority and ^{for} any information that I receive from you I will be grateful

Yours Truly

Edmund h. Bedford.



2

BF

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

4
 NAVY

BASED
 MEMBER'S
 NAME

PAYEE
 ADDRESS

Andrew Lawrence
 Director of Estates,
 308 Sparks Street,
 Ottawa, Ontario.

BEDFORD
 (SURNAMES) fur service Estate of
 Andrew L. BEDFORD
 N.S. V-18474
 20 Sept./45

REGISTER NO.
 FILE NO.
 DATE
 SERVICE NO.
 FINAL RANK OR RATING
 DATE OF DISCHARGE

8552
 NS V-18474
 24 July/45
 V-18474
 Able Smn.
 20 Sept./45

DATE OF TERMINATION OF OVERSEAS SERVICE

A. TOTAL QUALIFYING SERVICE

NO. OF DAYS 764 EQUAL TO 25 COMPLETE PERIODS AT \$7.50

\$187.50

B. QUALIFYING OVERSEAS SERVICE

NO. OF DAYS 348 LESS 14 INELIGIBLE DAYS, EQUAL TO 331 DAYS @ 25C. PER DAY

\$82.75

C. SUPPLEMENT FOR OVERSEAS SERVICE

DAILY RATES AT DISCHARGE

PAY	\$	1.85	
SUBSISTENCE OR LODGING AND PROVISION ALLOWANCE	\$	1.45	
S.D.	\$.15	
H.L.M.	\$.25	
ADDITIONAL PAY	\$		
DEPENDENTS' ALLOWANCE 1/30 OF \$	\$	3.70	25.90
TOTAL	\$	545 X 7 = \$	25.90
NO. OF DAYS		183	X \$

\$48.83

D. WAR SERVICE GRATUITY

\$319.08

E. DEDUCTIONS

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

N11

F. TOTAL AMOUNT PAYABLE

\$319.08

G. YOUR PORTION OF GRATUITY IS—

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

\$319.08

Voucher 1403 30/7/45

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
 CHECKED BY

TREASURY
 CHECKED BY
 DATE

25/7/45
 Dir Naval Representative

AT

STATEMENT OF WAR SERVICE GRATUITY - NAVY

Decedent Name Andrew Lawrence BEDFORD
 (Christian Names) (Surname)

Payee Director of Islates, } for service Islates of
Andrew L. BEDFORD
 Address 308 Sparks Street, Ottawa, Ont. N.S. V18474
 Register No. 8552
 File No. V-18474
 Date 2/14/45
 Service No. V-18474
 Final Rank or Rating A13

Date of termination of overseas service 20 Sept 43 Date of Discharge 20 Sept 43

A. TOTAL QUALIFYING SERVICE
 No. of days 76 equal to 25 complete periods at \$7.50
 30 187.50

B. QUALIFYING OVERSEAS SERVICE
 No. of days 345 less 17 ineligible days equal to 33 days @ 25¢ per day
82.75

C. SUPPLEMENT FOR OVERSEAS SERVICE
 DAILY RATES AT DISCHARGE

Pay	\$	1.85	
Subsistence or Lodging and Provision Allowance	\$	1.45	
Additional Pay S.D.	\$.15	
H.L.M.	\$.25	
Dependents' Allowance 1/30 of \$	\$	NIL	
Total	\$	3.70	x 7 = \$ 25.90
No. of days		<u>183</u>	x \$ 25.90

46.85
~~52.50~~
48.83

D. WAR SERVICE GRATUITY 222.62

E. DEDUCTIONS
 OVERPAYMENT OF PAY AND ALLOWANCES \$ 317.10
 DEPENDENTS' ALLOWANCE AND ASSIGNED PAY \$ 319.08
 OTHER DEDUCTIONS \$

F. TOTAL AMOUNT PAYABLE 319.68

G. YOUR PORTION OF GRATUITY IS
 Dependents' Allowance in issue to you \$ _____ of \$ _____ = \$ 319.08
 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 <u>Yes</u>	6 <u>Yes</u>
2 <u>Yes</u>	7 <u>Yes</u>
3 <u>Yes</u>	8 <u>Yes</u>
4 <u>Yes</u>	9 <u>Yes</u>
5 <u>Yes</u>	10 <u>Yes</u>

DISTRIBUTION OF SERVICE ESTATES

Estates Form "P. 4"

R. C. N. V. R.

Name: MEYFORD Andrew L. No.: V. 1507h
 Surname Christian Names

A/B. R.N.C.S. "St. Croix" 20/5/43
 Rank Unit Date of Death

AMOUNT

Date: March 10, 1944
 L.P.C.....\$ 62.16
 Other Credits..... 30.00
 Total..... 92.16

SHARE	RELATIONSHIP		NAME AND ADDRESS	AMOUNT
$\frac{1}{4}$	Father	107551	Edward L. Meyford 155 Dana Avenue, South Porcupine, Ontario.	23.04
$\frac{1}{4}$	Sister	107552	Mrs. Winnie Maki (as above)	23.04
$\frac{1}{4}$	Sister	107553	Mrs. Nellie Robinson, 126 Golden Avenue, South Porcupine, Ontario.	23.04
$\frac{1}{4}$	Sister	107554	Mrs. Marjorie Maki, 145 Commercial Avenue, South Porcupine, Ontario. (as next of kin entitled)	23.04

AUTHORITY					
H.Q. F.E. No.	VOTE	PRI	H.Q. SUB.	OBJ.	AMOUNT
9999	831	00	50	000	92.16
CLASSIFIED BY			EXAMINED BY		
			 For Chief Treasury Officer		

DISTRIBUTION APPROVED AND AUTHORIZED

Original signed by
L. M. FIRTH

(L. M. FIRTH) Lt.-Colonel
Administrator of Estates

AUDITED FOR PAYMENT

ORIGINAL SIGNED BY
E. G. COLLYER

For Chief Treasury Officer

ADDRESS ALL COMMUNICATIONS
TO THE REGISTRAR-GENERAL
PARLIAMENT BUILDINGS, TORONTO



ONTARIO

DEPARTMENT OF PROVINCIAL SECRETARY
REGISTRAR-GENERAL'S BRANCH

July-9-1941

This Certificate of Birth is issued for Military,
Naval and Air Force purposes only

THIS IS TO CERTIFY that the
Birth of the person named hereunder
is of record at the office of the
Registrar-General of Ontario as of
the date and place noted.

Andrew Lawrence Bedford

Algoma District

July-18-1923

Name of Father Edmond Lawrence Bedford

Maiden Name of Mother Margret Emily Horten

Reg. August-14-1923
1923-6-383
KC

A handwritten signature in cursive script, appearing to read "J. V. Johns".

Deputy Registrar-General

VERIFICATION FORM
 CAMPAIGN STARS, DEFENCE MEDAL, WAR MEDAL, C.V.S.M. and CLASP.
 NAVAL GENERAL SERVICE MEDAL (1915).

NAME IN FULL *Bedford Andrew Lawrence* RANK/RATING *Able Seaman* OFF. NO. *Y18474* 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.
	<i>18 Aug 41</i>											1939-45	<i>1 Star</i>
<i>Cherry</i>	<i>6 July 42</i>	<i>11 July 42</i>	<i>6</i>	<i>Atla.</i>								ATLANTIC	<i>1 Star</i>
<i>St Croix</i>	<i>17 Oct 42</i>	<i>20 Sept 43</i>	<i>339</i>	<i>Atla - Ind Africa</i>								FRANCE G.	
												AFRICA	<i>1 Star</i>
												PACIFIC	
												BURMA	
												ITALY	
												DEFENCE	
												C.V.S.M.	<i>2 + Clasp</i>
												" CLASP	
												WAR 1945	<i>1 Medal</i>
												WAR 1915	

VERIFIED BY *[Signature]*

[Signature]

VERIFIED BY *[Signature]*

VERIFIED BY

DIR. OF PERSONNEL RECORDS.

CERTIFICATE of the SERVICE of

Red Lord, Andrew Lawrence

in the Royal Canadian Naval Volunteer Reserve

Training Headquarters <i>Halifax</i>	R.C.N.V.R. Division <i>Kingston</i>	Official Number <i>V18474</i>
		"
		"

Date of Birth *18th July 1923*

Place of Birth *St. Catharines, Ontario*

Place of Residence *135 York Ave., St. Catharines, Ont.*

Trade brought up to *Repairman, Motor Boat Power*

Religion *United*

Name and Address of Nearest Relative or Friend (in pencil)
Andrew Lawrence (Father)
Same Address

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>Dec. 1941</i>	<i>4th July</i>	<i>Duration</i>	<i>Ord. Seaman</i>			
<i>Oct. 1949</i>	<i>18 Aug</i>	<i>"</i>	<i>"</i>			

	Height		Chest (mean)	Weight	Hair	Eyes	Complexion	MARKS, WOUNDS, SCARS
	Feet	Inches						
On Entry.....	<i>5</i>	<i>9</i>	<i>36</i>	<i>149</i>	<i>Brown</i>	<i>Blue</i>	<i>Clear</i>	<i>Vacc. Scar. Lt. Left Arm</i>
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

D OF D 20-9-43

AWARDS NAVY

D.D.

BEDFORD	Andrew Lawrence	V-18474	A.B.	FILE No.
SURNAME (IN BLOCK LETTERS)	CHRISTIAN NAMES	REG. No.	RANK ON DISCHARGE	C.A.S.F. UNIT

WAR SERVICEBADGE

(CLASS)

No. Nil

DATE DESPATCHED:

ADDRESS:

CAMPAIGN MEDALS	REGISTRATION NUMBER AND DATE DESPATCHED
1939-45 Star	256 3/10/49
Atlantic Star	
Africa Star	
C.V.S.M. & Clasp	
War Medal	
	(THE REVERSE TO BE USED FOR ESTATE PURPOSES)

MEDALS AND MEMORIALS—DECEASED PERSONNEL

RCNVR Apr. 44 "ST. CROIX"

REGISTRATION No. DATE OF DESPATCH

(1) MEDALS
PERSON

ENTITLED TO Mr. Edmund Bedford - Father

ADDRESS: 155 Dome Ave.,
SOUTH PORCUPINE, Ont.

(2) MEMORIAL CROSS

WIDOW

ADDRESS:

(3) MEMORIAL CROSS

deceased

MOTHER

ADDRESS:

MEMORIAL BAR

(1)

DATE DESP.....

REGN. NO. 1935

(2)

(3)

V18474

OFFICIAL NUMBER

NAME **BEDFORD**
(Surname)

Andrew Lawrence
(Given Names)

OFFICIAL NUMBER **V18474**

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. Kingston	Ord. Smn.	4	7	41		V.G.	Sat.	14	1	42	A/S.D.	15	10	42			
Duty Div. Hdqtrs. York	" "	18	8	41		V.G.	Sat.	31	12	42							
Cornwallis	" "	22	6	42	Charny 6-7-42	V.G.		20	9	43							
"	A/Able Smn.	18	8	42	249A/10641 Cornwallis 12-7-42												
Stadacona	" "	17	10	42	203155												
St. Croix	" "	20	10	42	Found in Atlantic 8/5/42												
"	Able Smn.	18	8	42	249A-19490 Confirmed.												
DISCHARGED	"	20	9	43	"Missing on Active Service" Per Casualty List.												

GENERAL REMARKS

DATE OF BIRTH			PLACE	CIVIL OCCU.	RELI-ED	PERM. RESIDENCE	PREV. ENL.	RANK OR RATE					
BY	MO	YR	BIRTH	MAIN	SUB	GRON	P	CTY	TOWNSHIP	SERV. DIV.	A	BR	RANK
15	7	23	11440	0	40	X/100	00	0	05	0	0	0895	
ENLIST. DATE			ACT. SERV. DATE	STR.	ACT. SERV. DATE	SHIP OR	RANK OR RATE						
BY	MO	YR	BY	MO	YR	ESTAB.	A	BR	RANK				
24	07	41	1808	41									
SENIORITY											CODED	CHECKED	
BY	MO	YR	BY	MO	YR								
18	05	42	09	32	00	20	20-09-43						

V18474

OFFICIAL NUMBER

FILE NUMBER 113-B-1916

OFFICIAL NUMBER V18474

NAME BEDFORD
(Surname)

Andrew Lawrence
(Given Names)

DATE OF BIRTH 18th July, 1923

PLACE OF BIRTH Sault Ste Marie

OCCUPATION Repairman, (Northern Ont. Power)

RELIGION United

EDUCATION

RESIDENCE AT TIME OF ENLISTMENT: Street and No. 155 Dome Ave. South

Town Porcupine

Province, etc. Ont.

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
4	7	41	H. O.	5' 7"	Brown	Blue	Clear	Vacc. scar upper l. arm.				

NEXT OF KIN RELATIONSHIP (in pencil)

NAME (in pencil)

ADDRESS (in pencil): Street and No. 155 DOME

Town

Province, etc.

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	
				17	3	42	Passed E.T. 1 R.C.N.				
				14	8	42	Marked Tr.				

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		

FILM NO. WSR-5422-1
 DATE

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

SECOND CLASS FOR CONDUCT

From

To

W.S.G.
 APPLICATION
 8552
 RECEIVED
 LT