

V25864
BRUCE
WILLIAM

OCCUPATIONAL HISTORY FORM

THIS FORM IS TO BE COMPLETED FOR EACH MEMBER OF THE ARMED FORCES. THE INFORMATION SOUGHT IS FOR THE USE OF GENERAL ADVISORY COMMITTEE ON DEMOBILIZATION AND REHABILITATION, A COMMITTEE SET UP BY THE GOVERNMENT OF CANADA TO STUDY PLANS FOR ESTABLISHING IN INDUSTRIAL LIFE THE MEMBERS OF THE ARMED FORCES, AFTER DISCHARGE. ACCURACY AND COMPLETENESS IN ANSWERING WILL BE OF MUCH HELP TO THE COMMITTEE.

PLEASE READ CAREFULLY THE INSTRUCTIONS GIVEN ON THE INSIDE OF COVER BEFORE COMPLETING FORM

Section A—GENERAL INFORMATION

1. (a) Print name in full William Bruce (b) Reg'l. No. V25864
2. (a) Arm of service NAVY (b) Unit R.C.N.V.R. (c) Rank A-4
3. (a) Date of birth 28 OCT 1919 (b) Have you any dependents? NO (c) Place of residence DUNDRE SCOTLAND
4. (a) Place of enlistment HALIFAX NS (b) Date of enlistment 1-12-41

PLEASE
LEAVE
BLANK

Section B—EDUCATION AND TRAINING

5. (a) State age on finally leaving school 18 (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.) GRADE 8
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? NO (c) Did you finish it? NO (d) If you did not finish it, how long did you serve at it? NO
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? NO

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 CHRYSLER Address DUNDRE
16. Nature of employer's business (for instance, "farmer", or "building contractor", or "boot factory", or "iron foundry", or "retail store", etc.) CHRYSLER
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 CHRYSLER Address DUNDRE
19. Nature of employer's business (for instance, "farmer", or "building contractor", or "boot factory", or "iron foundry", or "retail store", etc.) CHRYSLER
20. (a) Your specific occupation CUTTER (b) Number of years' experience at this occupation with any employer 6 MOS
21. (a) Did your employer promise definitely to give you employment on discharge? NO (b) Did your employer refuse to promise you employment on discharge? NO (c) Do you wish to return to your former employment? NO

IF YOU WERE WORKING ON YOUR OWN UP TO THE TIME OF ENLISTMENT, THAT IS TO SAY, OPERATING A FARM, A STORE, AN AGENCY, OR IN PROFESSIONAL PRACTICE, OR AS A PARTNER IN ANY SUCH LINE, PLEASE ANSWER QUESTIONS 22 AND 23

22. (a) State nature of business, or professional practice. (b) Where was it located?
23. (a) Number of years engaged in this business. (b) Have you made, or will you make plans to return to the same or a similar business on discharge?

Section F—PARTICULARS OF FARMING EXPERIENCE

24. (a) Do you wish to engage in farming after the war? YES (b) Do you feel competent to operate a farm? YES (c) If so, in what kind of farming? MIXED
25. (a) Were you born on a farm? NO (b) How many years' actual farming experience have you had? 12 YRS (c) In what provinces did you have experience? MANITOBA

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. MERCHANT MARINE

DATE DEC 1 1941 1941 SIGNATURE W. B.

THE FOLLOWING IS A SUMMARY OF THE INFORMATION RECEIVED FROM THE ABOVE NAMED SOURCES:

1. The above named sources have been advised that the information received from them is being used for the purpose of the investigation.

2. The above named sources have been advised that the information received from them is being used for the purpose of the investigation.

DEC 26 1941

Copy To
VWD
ES

MEMORANDUM FOR

P. 64

Mr. John Bruce

~~8 McGill Street~~ 13 Penny Court Lane

Dundee, Scotland

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-1400 FD. 228

DEPARTMENT OF NATIONAL DEFENCE

ESTATES BRANCH

OTTAWA, ONT.

January 4, 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

BRUCE, William, Ldg. Smn.

No. V. 25864, 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) Cdr. RCNVR,
for (L.M. Firth) Lt.-Col.
Administrator of Estates.

HRW/JN

M.F.W. 77
2M-11-43 (2842)
H.Q. 1772-39-972
K.P. 95075

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.....	<i>None</i>		
2	Children of the Deceased and dates of their Births.....	<i>None</i>		
3	Father of the Deceased.....	<i>John Bruce</i>		<i>13 Pennycroft Lane Cundry, Leith</i>
4	Mother of the Deceased.....	<i>Deceased</i>		
5	Brothers of the Deceased	Full Blood	<i>See other form, please</i>	
		Half Blood	<i>—</i>	
6	Sisters of the Deceased	Full Blood	<i>See other form, please</i>	
		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	
	<i>Lady J. H. Bruce R. H. J. Miller in action March 1941</i>	<i>—</i>		

8	Full
9	Date
10	Place
11	Place

12	Place
13	State residence
14	Nationality
15	State so, v
16	Name permanence

17	Did
18	If m in th com cont
19	Did give
20	Amount
21	Amount
22	If d paya there
23	Is ap neces

24	Did
	An he "a pa
25	Have pa an
	and zone auth the

ANSWER FULLY EACH QUESTION ON THIS PAGE

PARTICULARS AS TO IDENTITY

8	Full names of the deceased	William Bruce
9	Date of his birth	29th Oct. 1919
10	Place and date of his marriage.	—
11	Place and date of his parents' marriage.	Wander, 28th December 1899

PARTICULARS OF DOMICILE

12	Place where deceased was born.	Wander, Scotland
13	State, in order, the Province, State and/or Country in which he resided before enlistment and the period of time in each.	(a) Wander, 6 months (b) Winnipeg, 18 months (c) (d)
14	Nature of employment before enlistment.	mechanic
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.	Canada

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?	—
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.	none
21	Amount of Victory Loan Bonds held by deceased.	none
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.	Royal Life, £30
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
25	Have you or any other relative paid the funeral expenses or any part thereof? If so, attach itemized accounts showing amount paid, and by whom.	no
(NOTE:—The Government pays funeral expenses within the amounts authorized in the Regulations, where death occurs and burial is made Overseas as well as where death occurs and burial is made in Canada or elsewhere in the North American zone, and if a relative has already paid those expenses the Government will reimburse such relative to the extent of the amount authorized in the Regulations. Any amount of such expenses in excess of those authorized in the Regulations is not payable by the Government nor is it chargeable against the service estate of the deceased.)		

(PLEASE TURN OVER)

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.

John Bruce

{ Signature of Informant

13 Pennycook Lane Dundee Address

CERTIFICATE

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

*See above.

Bruce { 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 Dundee Scotland this 22nd day of February 1944

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

J. G. Fraser

Qualification

Justice of the Peace

Address

7 Church Lane Dundee

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

his my new address is 13 Pennycook Lane
Dundee
Scotland

(3) On being enrolled as a member of the Special Service. 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 5th day of December, 1941.

Signature of applicant X William Bruce

(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 5th day of December, 1941.

G. McTavish
Signature of and rank of Attesting Officer.

Lieutenant R.C.N.V.R.

pay Sub

(D) **OATH OF ALLEGIANCE**

I, William BRUCE. 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 X William Bruce

Witness G. McTavish

Date 5th December, 1941

Rank pay Sub Lieutenant 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**

William BRUCE 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 Special Service. Division of the R.C.N.V.R. or in the appropriate official documents.

G. McTavish
pay Sub Lieutenant, R.C.N.V.R. Attesting Officer.

5th December,

1.

R.C.N.V.R. Division
(or other establishment)

R.C.N. Barracks,
Halifax, N.S.

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.

QH



N. V. 5
25M-9-40 (6793)
N.S. 815-11-5

ATTESTATION FORM

(HOSTILITIES FORM)

FOR MEN OF THE ROYAL CANADIAN NAVAL VOLUNTEER RESERVE

SURNAME BRUCE OFFICIAL NO. V 25864
CHRISTIAN NAMES William MARRIED, SINGLE OR WIDOWER Single

PERMANENT ADDRESS		RELIGION
8 McGill St., Dundee, Scotland.		Presbyterian.
DATE OF BIRTH	*PLACE OF BIRTH	NAME AND ADDRESS OF NEXT OF KIN
28th October, 1919	Town Dundee	Mr. John Bruce, (father)
	County Angus	8 McGill St.,
*Original Nationality of:	Province Scotland.	Dundee, Scotland.
Father British		
Mother British		

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

PERSONAL DESCRIPTION ON ENROLMENT

HEIGHT	CHEST MEASUREMENT	HAIR	EYES	COMPLEXION	WOUNDS, SCARS, MARKS
Feet <u>5</u>	Inflated	D. Brown	Blue	Dark	Scar by r. eye Scar on nose.
Inches <u>5</u>	Deflated				
Mean <u>34</u>					
DATE OF ENROLMENT	RATING ENROLLING FOR	TRADE OR CALLING AND IN WHOSE EMPLOY			
12th February, 1941	Able Seaman (temp)	Calender Worker.			
R.C.N.V.R. Division (or other establishment) at which enrolled		R.C.N. Barracks, Halifax, N.S.			

(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 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
R.N.V.R. E.S.D/X 1860.	MOBILISED 22 Oct '39. Ord. Smn A.B.	4 Apr '39 11 Apr '40	11 Apr '40 11 Feb '41

(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.

Royal Naval Volunteer Reserve.

Certificate of the Service of

William BRUCE

NOTE.—The corner of this Certificate is to be cut off where indicated if the man is discharged with a "Bad" character or with disgrace, or if specially directed by the Admiralty. If the Corner is cut off, the fact is to be noted in Divisional records; if borne on ship's books in the Ledger also.

Division *East Scottish*

Sub-Division *II*

Official Number *ESD/X 1860*

Date of Birth *28 October 1919*

Where born { Parish *Dundee*
Town or County *Angus*

Civil Employment *Calender Worker*
(Give Trade or Profession, if any)

Religious Denomination *Presbyterian*

Man's usual place of residence
(To be noted in pencil)

*8, Mc Gill Street,
Dundee*

Nearest known Relative or Friend
(To be noted in pencil)

Name: *John*

Relationship: *Father*

Address: *As above*

Swimming Qualifications

Date	Qualification	Signature
1.		
2.		
3.		
4.		

Engagements

Date	Date of Enrolment or Re-Enrolment	Date of Termination of Engagement
1st	<i>4 Apr '39</i>	
2nd		
3rd		
4th		
5th		

Medals, Clasps, &c.

Date Received or Forfeited	Nature of Decoration

Description of Person

Stature

Ft.

In.

Chest, In.

Colour of

Hair

Eyes

Complexion

Marks, Wounds, and Scars

On Entry for 1st Period

On Re-Entry for 2nd Period

Do. do. 3rd do.

Do. do. 4th do.

Do. do. 5th do.

Previous service in H.M. Forces; Sea experience other than Naval Service; Special knowledge or acquirements; Technical or scholastic civil examinations.

Inclusive Dates of
Service,
Examinations, etc.

Unit and Official Number; Nature of Experience; Examination Passed, etc.

Signature of
Commanding Officer

CAUTION.—This is an Official document. Any alteration made to it without proper authority will render the offender liable to severe penalties.

Name in full William B R U C E

DIVISIONAL RECORD

To be completed on 31st October in every year.

NOTE.—The following notations are to be made :—

When called into service insert "Mobilised" and date. When discharged from the R.N.V.R. insert "Discharged," reason and date immediately after the last entry, to be signed by the Commanding Officer of the R.N.V.R. Division.

Sub- stantive Rating	From	To	Number of Drills performed during drill year ended 31 October	Whether Qualified, Re-Qualified or not Qualified— "Q," "R.Q." or "N.Q." (See Art. 68 R.N.V.R. Regs.)	Character (see Art. 407 R.N.V.R. Regs.)	Efficiency (See footnote*)	Signature of Commanding Officer of Division
Ord Smn	4 Apr '39	21 Oct '39	66		V 9	N/A.	
	Mobilised	22 Oct 1939					

* Note as to method

Superior—above average efficiency,
Satisfactory—average efficiency,
Moderate—less than average efficiency,
Inferior—inefficient.

in substantive rating,
without regard
to fitness for
advancement.

SHIP
(Tenders to be
in brack

Victory 11
Patroclus

Victory

Note (i) Ab
Note (ii) Cha

Variations in
been promoted
a higher award

Record of Naval Training and Active Service.

SHIP (Tenders to be inserted in brackets)	Ship's Books		Rating	Period of Service		Cause of Discharge (See Note (i))	Character (See Note (ii))	Efficiency (See Note (ii))	Captain's Signature
	List	No.		From	To				
<i>Victory 1 (AMCAI)</i>			<i>Ord Lmn</i>	<i>22 Oct '39</i>	<i>11 Dec '39</i>				
<i>Patroclus</i>			<i>— " —</i>	<i>12 Dec '39</i>	<i>31 Dec '39</i>		<i>V.G.</i>	<i>N/A.</i>	
<i>— " —</i>			<i>— " —</i>	<i>1 Jan '40</i>	<i>11 Apr '40</i>				
<i>— " —</i>			<i>A B.</i>	<i>12 Apr '40</i>	<i>21 Nov. 40</i>				
<i>Victory 1</i>			<i>— " —</i>	<i>22 Nov. 40</i>	<i>11 FEB. 1941</i>	<i>Transf. to R.C.N.V.R. AS. A.B. A.L.N. 17695/40 DATED 10 FEB. 1941.</i>	<i>V.G. SAT.</i>		<i>Richard. Thompson.</i>
			<i>(Q A 3. 18 January 1941 S. 161 Excellent.)</i>						

Note (i) Abbreviations: C.T.—Completion of Training. D.D.—Discharged Dead. D.S.Q.—Discharged Sick Quarters.
 Note (ii) Character and efficiency to be assessed (i) on completion of each period of Naval Training (ii) During service in the R.N.—on 31 December yearly, on discharge, and on other occasions prescribed by the Regulations.

of assessing Efficiency.

Variations in efficiency are often explained by the fact that the man had recently been promoted and had not gained sufficient experience in his new position to justify a higher award than that actually assessed.

Date	Naval examinations passed and notations of qualifications other than those entered on history sheets. Recommendations for higher rating.	Signature of Commanding Officer

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

V25861

OFFICIAL NUMBER

NAME BRUCE

(Surname)

William

(Given Names)

OFFICIAL NUMBER

V25861

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	A.B.	12	2	41		V.G.	Sat.	31	12	41	A.A. III						
Dominion (Drake)	"	12	2	41		V.G.	Sat.	31	12	42	A.A. II	17	11	42			
St. Clair	"	21	2	41		V.G.		20	9	43							
Stadacona	"	14	9	41													
St. Francis	"	19	9	41													
Stadacona	"	5	10	41													
Niobe	A/Ldg. Smn.	15	11	41													
Excellent	"	9	12	41	Via Agamemnon												
	"	19	9	42	(Niobe draft Order #75)												
	Ldg. Smn.	15	11	42	Confirmed (2492-18933)												
Niobe	"	20	11	42	SRD # 95												
St. Croix	"	1	5	43	Service Cert.												
DISCHARGED	"	20	9	43	Missing on Active Service. Per Casualty List.												

GENERAL REMARKS									
R.N.V.R. Service									
Ord. Smn. 4-4-39 -- 21-10-39									
(Mobilized 22-10-39)									
Victory: Ord. Smn. 22-10-39--11-12-39.									
Patrachus: " " 12-12-39--11-4-40.									
" A.B. 12-4-40--21-11-40.									
Victory: A.B. 22-11-40--11-2-41.									
(Transferred to RCNVR. (Extract from									
RNVR Service Cert. Transferred from									
RNVR O.N. ESD/X1860.									

DATE OF BIRTH		PLACE OF BIRTH		CIVIL RES.		RESIDENCE PREV. ENL.		RANK OR RATE ON PRESENT	
BY	MO. YR.	BY	MO. YR.	BY	MO. YR.	BY	MO. YR.	A	BR. RANK
28	0	19	22	396	0	50	0	02	00
12	02	41	12	02	41			0	380
ENLIST. DATE		ACT. S. DATE		DATE BIRTH		SHIP OR ESTAB.		RANK OR RATE	
BY	MO. YR.	BY	MO. YR.	BY	MO. YR.	BY	MO. YR.	A	BR. RANK
12	02	41	12	02	41			0	380
SENIORITY		STR.		NON-SUB		M		CODED	
BY	MO. YR.	BY	MO. YR.	BY	MO. YR.	BY	MO. YR.	CHECKED	
15	11	42	09	15	00	20	09	43	

V25861

OFFICIAL NUMBER

FILE NUMBER

113-B-1400

OFFICIAL NUMBER V25861

NAME BRUCE William DATE OF BIRTH 28 Oct. 1919
(Surname) (Given Names)PLACE OF BIRTH Dundee, Scotland OCCUPATION Calendar WorkerRELIGION Presbyterian EDUCATIONRESIDENCE AT TIME OF ENLISTMENT: Street and No. 8 McGill St. Town Dundee Province, etc. Scotland

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
12	2	41	H.O.	5' 5"	D. brown	blue	dark	Nil	R.N.V.R.	Ord. Smn.	4-4	11-4
											30	40
											11-4	11-2
											40	41

NEXT OF KIN RELATIONSHIP (in pencil) Father NAME (in pencil) Mr John Bruce
ADDRESS (in pencil): Street and No. 73 Pennington Lane Town Dundee Province, etc. Scotland

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	11	41	Passed Prof. Idg. Smn.				

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			
22	10	42	1st GCB	Granted								

FILM
NO. 444A-5487-1
DATE

SECOND CLASS FOR CONDUCT	
From	To

H.Q. 35-30M-4-42 (4260)
N.S. 815-7-35

W.S.G.
APPLICATION
13046
RECEIVED
7/6/45

NAME IN FULL

RANK/RATING

NAVAL GENERAL SERVICE

VERIFIED BY

Lucius Perkins

VERIFIED BY

NK/RATING *High* OFF.NO. *125864* ADDRESS

FILED BY DIR. OF PERSONNEL RECORDS.

DUPLICATE ONLY
FORWARDED IN CASE
ORIGINAL IS LOST IN
TRANSIT.

No. 518
DUPLICATE

P 31302

MAR 24 1941
113-B1400

H.Q. File No.

DECLARATION OF ALLOTMENT

List and Number in Ledger	ALLOTOR	Rank or Rating	Official No.	Daily Rate of Pay
511/83 DOMINION	Surname..... BRUCE Christian Names } William	A.B. RCNVR	N.K. ✓25864	1.85

Section A

ALLOTMENT NOW DECLARED

Noted in Service
Records by.....

FULL NAME OF ALLOTTEE	Relationship	ADDRESS	Rate per Month to be charged on ledger	Month to commence. Payable on last working day
Surname..... BRUCE Christian Names } John	Father	8 McGill Street, Dundee, Angus, Scotland.	15.00	April, 1941.

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):—
			Initials Date
			123 3/4

Previous by noted S.H.

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.

Allotter's Signature authorizing charges.....

A.B. Rank or Rating

ENTERED IN FAIR LEDGER

ENTERED IN ROUGH LEDGER

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:—

Object	111	\$
	113	\$
	116	\$
	119	\$
	122	\$
Total	120.00	\$

THE NAVAL SECRETARY,

Department of National Defence,
(Naval Service)
Ottawa, Ont.

Paymaster Sub. Lieut., RCNVR.
for Paymaster Lieut., Cmdr.
Accountant Officer

H.M.C.S. "DOMINION"

Forwarded.....

MAR 1941

S. 63

40M-4-40 (4787)
N.S. 815-9-63

SEAMAN BRANCH

Application for, and report of result of PROFESSIONAL EXAMINATION

for the rating of LEADING SEAMAN.

I.—APPLICATION FOR EXAMINATION

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

Name of Candidate (in full) BRUCE, William.

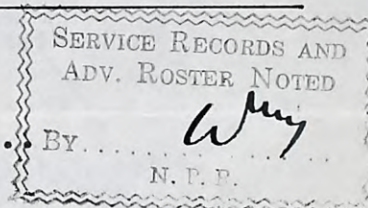
Present Rating Able Seaman. R.C.N.V.R. O.N. V-25864

Port Division Halifax, N.S.

Date of Application for Examination 7-11-41.

Date and Particulars of Previous Failures:—

..... NIL



- (i) The Candidate has served the requisite period of time, he is fully eligible for examination, and has the necessary recommendations required by the Regulations.
- (ii) He has carried out the duties of helmsman satisfactorily.
- (iii) I am satisfied that he possesses the necessary qualities which with further experience will fit him to make an efficient ~~Petty Officer~~/Leading Seaman, and I consider that he has a reasonable chance of passing.

To PRESIDENT EXAMINATION BOARD.

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

[Signature]

Captain

NOTES—

(a) This application is to be submitted (in duplicate) to the Administrative Authority, together with the Service Certificate, history sheet and Form S. 264 written up specially for the examination and signed by the Commanding Officer.

(b) On completion of the examination, Form S. 441, in duplicate, is to be forwarded to the candidate's ship, the Commanding Officer of which is to insert the basic date of passing the examination. One copy of the Form is then to be forwarded to the Administrative Authority, the other being forwarded to the Depot. In the case of failure, one copy is to be forwarded to the Administrative Authority, the other being retained with the candidate's papers for future reference. Failures are to be noted on Form S. 264 (Divisional Record Sheet).

C.N.S. 441

15M-3-41 (9381)
N.S. 815-9-441

II.—RESULT OF EXAMINATION

SECTION I

Whether "Passed" or "Failed" Passed Fair

(If passed state whether "V.G." (85% and above), "Good" (70% to 85%), or "Fair" (below 70%))

(See A.F.O. 9/39)

SECTION II

Subject	Maximum Marks		Marks Required to Pass		Marks obtained	
	P.O.	L. Sea.	P.O.	L. Sea.	On Examination	On re-examination
Rigging.....	60	80	30	40	45	
Anchor Work.....	50	60	25	30	48	
Rule of the Road.....	30	30	15	15	18	
Boat Work.....	80	80	48	48	55	
General Duties.....	60	40	30	20	10 F	29
Organization.....	40		20			
Signals.....	30	30	15	15	13 F	20
Watertight Fittings.....	10	10	5	5	9	
Duties in Part of Ship and Mess.....		30		15	13	

REMARKS—

The Candidate has:—

(i) ~~Passed a V.G./Good/Fair Examination.~~

(V.G.—85% and above, Good—70% to 85%, Fair—below 70%)

(ii) Failed as indicated above.

He is recommended for re-examination by his own Ship's Officers in the subjects indicated above in accordance with K.R. Appendix XII, Part 22A, Clause 8 (b).

Date 21st November 1941

K.W. Brock
President of Board

Candidate's Signature (in full) William Bruce

Basic date of passing professionally for Leading Seaman

(K.R. and A.I. Appendix XII, Part 22A, Clauses 7 and 8)

is 21st November, 1941.

Re-examined by Officers of Board in relevant subjects of Section II on board

H.M.S. "Frobisher" on April 10th 1942.

Date 16th April, 1942.

Forwarded, the necessary notation has been made on the Service Certificate.

The Commanding Officer,
R.C.N. Barracks,
Halifax, N.S.

K. Gowland
Cdr.
President of Board

Mcrawford II
Captain

H.M.C.S. "NIOBE"

Date 16th April, 1942.

DEPARTMENT OF NATIONAL DEFENCE

Naval Service

Ottawa, Canada.

1 October, 1943

Sir:

(Date)

The following casualty has been reported -

NAME	RANK or RATING	NAVAL NO.
BRUCE, William	Leading Seaman	V-25864 R.C.N.V.R.

DATE OF ENLISTMENT - 12 February, 1941

DATE OF DISCHARGE -

HOSPITAL -

(If discharged in hospital under jurisdiction of D. P. & N. 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" on war service. This rating is
listed as missing due to enemy action,
while serving on Convoy duty in the Atlantic. When official presumption
of death has been made, you will be notified further.

(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. John Bruce

ADDRESS

8 McGill Street,

DUNDEE, Scotland.

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.

for

SECRETARY, NAVAL BOARD.

Secretary, Canadian Pension Commission,
Room 228, Daly Building, OTTAWA, Ont.

NOTE:

Duplicate copies of this form (Form "B") have been forwarded to the
Chief Treasury Officer (Allotment Section), Department of National
Defence, Naval Service, for completion respecting the details of
Marriage Allowance, Dependents Allowance, etc., and subsequent
transmission to you.

(See reverse side for further instructions)

DUNDEE AND DISTRICT ASSOCIATION OF WIVES,
WIDOWS, AND DEPENDANTS OF SAILORS AND SOLDIERS

J. G. FRASER, J.P.
ORGANISING SECRETARY
PHONE 85426

7 CHURCH LANE,

1164138

DUNDEE, 4th July, 1945.

Dear Sir,

Re late No.V.25864 Leading Seaman William Bruce, R.C.N.V.R.,
Your Ref.No. V-25864 Pers (N) (N-15).

With reference to yours of 6th June, 1945, I have to inform you that deceased's father (John Bruce, 13 Pennycook Lane, Dundee, Angus), was his sole dependant, and next-of-kin.

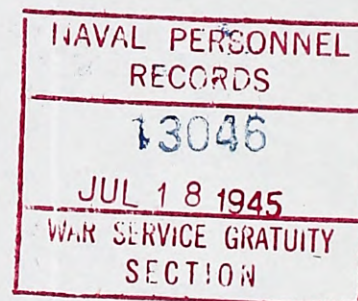
Mr. Bruce was in receipt monthly of 15 Dollars paid in cheque by Department of National Defence - Naval Service, Canadian Treasury Office, Lancaster, Lancs, and this sum was paid regularly up to the date of death.

We desire you to forward to above named (which is underlined) any gratuity or estate due to him direct.

Yours faithfully,

(M^{rs}) B. B. 404,
Assistant Secretary.

The Secretary,
Naval Board,
Naval Service Headquarters,
Ottawa.



UNION AND DISTRICT ASSOCIATION OF WIVES
AND DEPENDANTS OF SAILORS AND SOLDIERS

THE UNION AND DISTRICT ASSOCIATION OF WIVES
AND DEPENDANTS OF SAILORS AND SOLDIERS

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THE UNION AND DISTRICT ASSOCIATION OF WIVES
AND DEPENDANTS OF SAILORS AND SOLDIERS



STATEMENT OF WAR SERVICE GRATUITY - NAVY

Decedent

Member's Name

William Bruce
(Christian Names) (Surname)

Payee

Address

*Director of Estates, } for service estate of
308 Sparks Street. } William Bruce
Ottawa, Ont. } N.S. V25864.*

Register No.

File No.

Date

Service No.

Final Rank or Rating

Date of Discharge

Date of termination of overseas service *20 Sept '43*

A. TOTAL QUALIFYING SERVICE

No. of days *1430* equal to *47* complete periods at \$7.50
30

B. QUALIFYING OVERSEAS SERVICE

No. of days *1334* less *20* ineligible days equal to *1314* days @ 25¢ per day

C. SUPPLEMENT FOR OVERSEAS SERVICE

DAILY RATES AT DISCHARGE

Pay	\$	<i>2.10</i>
Subsistence or Lodging	\$	<i>1.45</i>
and Provision Allowance		
Additional Pay		
	<i>H.M.</i>	<i>25</i>
	<i>A.A.II</i>	<i>20</i>
	<i>G.C.B.</i>	<i>05</i>

Dependents' Allowance 1/30 of \$ *NIL*Total *4.05* x 7 = \$ *28.35*

No. of days *1334* x \$ *28.35*
183

D. WAR SERVICE GRATUITY

E. DEDUCTIONS

OVERPAYMENT OF PAY AND ALLOWANCES \$ *0.06*
DEPENDENTS' ALLOWANCE
AND ASSIGNED PAY \$

OTHER DEDUCTIONS

F. TOTAL AMOUNT PAYABLE

G. YOUR PORTION OF GRATUITY IS

Dependents' Allowance in issue to you \$ _____ of \$ = \$ *895.70*
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 *✓*
2 *✓*
3 *✓*
4 *✓*
5 *✓*
6 *✓*
7 *✓*
8 *✓*
9 *✓*
10 *✓*

Bal Dr.
Treas Sect # 861
S.W.A.
gfm. O/pd.

MG

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

4
NAVY

DECEASED
MEMBER'S
NAME

William

BRUCE

(CHRISTIAN NAMES)

(SURNAME)

PAYEE

ADDRESS

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

for Service Estate of
William BRUCE
NSV-25864
20 Sep/43

REGISTER NO.

13046

FILE NO.

NSV-25864

DATE

31 July/45

SERVICE NO.

V-25864

FINAL RANK OR RATING

LTG/SMN

DATE OF DISCHARGE

20 Sep/43

DATE OF TERMINATION OF OVERSEAS SERVICE

A. TOTAL QUALIFYING SERVICE

NO. OF DAYS 1430 EQUAL TO 47 COMPLETE PERIODS AT \$7.50

\$ 332.50

B. QUALIFYING OVERSEAS SERVICE

NO. OF DAYS 1354 LESS 20 INELIGIBLE DAYS, EQUAL TO 1334 DAYS @ 25C. PER DAY

333.50

C. SUPPLEMENT FOR OVERSEAS SERVICE

DAILY RATES AT DISCHARGE

PAY \$ 2.10
SUBSISTENCE OR LODGING
AND PROVISION ALLOWANCE \$ 1.45

ADDITIONAL PAY

H L M \$.25
A.A.II \$.20
G C B \$.05

DEPENDENTS' ALLOWANCE 1/30 OF \$

NIL

TOTAL \$ 4.05 X7 = \$ 28.35
NO. OF DAYS 1354 X\$ 28.35

209.76

D. WAR SERVICE GRATUITY

895.76

E. DEDUCTIONS

OVERPAYMENT OF

PAY AND ALLOWANCES \$.06
DEPENDENTS' ALLOWANCE
AND ASSIGNED PAY \$

OTHER DEDUCTIONS

\$

.06

F. TOTAL AMOUNT PAYABLE

895.70

G. YOUR PORTION OF GRATUITY IS—

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

= \$ 895.70

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

YN

CHECKED BY

TREASURY

CHECKED BY

DATE

1-8-45

SERVICE REPRESENTATIVE

for Dir. Naval Pay Acctng.

DISTRIBUTION OF SERVICE ESTATES

DME

Estates Form "P. 4"

NAVY

Name BRUCE William No. V25864
Surname Christian Names

Ldg. Smn. HMCS St. Croix 20-9-43
Rank Unit Date of Death

AMOUNT W.S.G. 895.70
L.P.C. \$ 72.37

Date 10-10-45

Other Credits

Total 968.07
Pref. dist. 72.37
This dist. 895.70

SHARE	RELATIONSHIP	NAME AND ADDRESS	AMOUNT
All	father	John Bruce, 13 Pennycook Lane, Dundee, Angus, Scotland. (as next of kin entitled)	895.70
		P4. TO TREAS. OCT 12 1945 OCT 20 1945	WSG

AUTHORITY					
H.Q. F.E. No.	VOTE	PRI	H.Q. SUB.	OBJ.	AMOUNT
9999	831	00	50	000	\$895.70
CLASSIFIED BY			EXAMINED BY		
			For Chief Treasury Officer		

DISTRIBUTION APPROVED AND AUTHORIZED

(L. M. FIRTH) Colonel
Director of Estates

AUDITED FOR PAYMENT

MG

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

352 2
NAVY

DECEASED
MEMBER'S
NAME

William

BRUCE

(CHRISTIAN NAMES)

(SURNAME)

REGISTER NO.

13046

FILE NO.

NSV-25864

DATE

31 July/45

SERVICE NO.

V-25864

FINAL RANK OR RATING

LIG/SMN

DATE OF DISCHARGE

20 Sep/43

PAYEE
ADDRESS

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

for Service Estate of
William BRUCE
NSV-25864
20 Sep/43

DATE OF TERMINATION OF OVERSEAS SERVICE

A. TOTAL QUALIFYING SERVICE

NO. OF DAYS 1430 EQUAL TO 47 COMPLETE PERIODS AT \$7.50

\$ 352.50

B. QUALIFYING OVERSEAS SERVICE

NO. OF DAYS 1354 LESS 20 INELIGIBLE DAYS, EQUAL TO 1334 DAYS @ 25C. PER DAY

333.50

C. SUPPLEMENT FOR OVERSEAS SERVICE

DAILY RATES AT DISCHARGE

PAY	\$ 2.10	
SUBSISTENCE OR LODGING AND PROVISION ALLOWANCE	\$ 1.45	
ADDITIONAL PAY		
H L M	\$.25	
A.A.II	\$.20	
G C B	\$.05	
DEPENDENTS' ALLOWANCE 1/30 OF \$	NIL	
TOTAL	\$ 4.05	X7 = \$ 28.35
NO. OF DAYS	1354	X\$ 28.35

183

87

209.76

D. WAR SERVICE GRATUITY

895.76

E. DEDUCTIONS

OVERPAYMENT OF

PAY AND ALLOWANCES \$.06
DEPENDENTS' ALLOWANCE
AND ASSIGNED PAY \$

OTHER DEDUCTIONS

\$

.06

F. TOTAL AMOUNT PAYABLE

NPL 44

895.70

G. YOUR PORTION OF GRATUITY IS—

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

= \$ 895.70

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

YN

TREASURY
CHECKED BY

DATE

SERVICE REPRESENTATIVE

for Dir. Naval Pay Acctng.

DISTRIBUTION OF SERVICE ESTATES

TL

Estates Form "P. 4"

R.C.E.V.R.

Name: BRUCE Surname William Christian Names No.: V.25864
Rank Idg./Sqn. Unit H.M.C.S. "ST. CROIX" Date of Death 20/9/43.

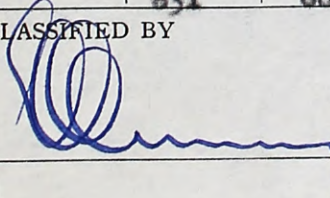
AMOUNT

L.P.C. \$ 72.37Date: February 25, 1944.

Other Credits

Total 72.37

SHARE	RELATIONSHIP	NAME AND ADDRESS	AMOUNT
all	Father	John Bruce, 13 Penny Cook Lane, Dundee, Angus, Scotland. (As next of kin entitled)	East at Par 78-80 216/3/10

AUTHORITY					
H.Q. F.E. No.	VOTE	PRI	H.Q. SUB.	OBJ.	AMOUNT
9999	831	00	50	000	72.37
CLASSIFIED BY 			EXAMINED BY ORIGINAL SIGNED BY E. G. COLLYER 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

STATEMENT OF ACCOUNT

True extract from the ledger of H.M.C.S. " ST. CROIX " ending 30 Sept '43.
19.

List. 5/2 No. 8 (Name) BRUCE, William ... Rank Rating Ldg. Smn No.
V 25684
 When entered... F.R. Date of appearance. 1 July Whither discha
 D.D.

CREDIT from former account.....\$ 16.77....
 Pay as... Ldg. Smn ... from... 1 July to... 30 Sept 92 days @ 2.10
 per day) \$.....
 Pay as... A.A. 11. ... from... 1 July to... 30 Sept 92 days @ .20
 per day) \$.....
 Pay as... 1 GCB ... from... 1 July to... 30 Sept 92 days @ .05
 per day) \$.....
 Pay as... L.A. ... from... 1 July to... 13 July 13 days @ .50
 per day) \$.....
H.L.M. 25 July 20 Sept 58 .25 14.50
 Kit Upkeep Allowance..... 1 July \$ 10.00....
 OTHER CREDITS. G.M. 1 July 20 Sept. 82 \$ 4.92....
 \$
 Total Credits.....\$ 268.89....

DEBT from former account.....\$
 PAYMENTS 1st 2nd 3rd 4th 5th
 1st Month 16.00 Total.....\$
 2nd Month 54.00 Total.....\$
 3rd Month 49.17 Total.....\$ 119.17....
 Allotment. \$15.00 - \$10.00 July Aug. Sept. \$ 75.00....
 Pension deduction (Officers) charged to.....of.....\$
 Hospital stoppages.....\$
 Mulcts... 1 Days Pay \$ 2.35....
 OTHER CHARGES.....\$
 \$
 \$
 Total debits.....\$ 196.52

 Note: Balance Dr. to be shown in RED. Balance Cr. or Dr. \$ 72.37
 #

Number of days actually victualled during period mentioned above 69.....

Not Victualled	Lent, Sick or Leave	Inclusive date		No of days	Ship, Hospital etc, in which borne
		From	To		
	<u>Leave</u>	<u>1 July</u>	<u>13 July</u>	<u>13</u>	

Date: Oct. 26 /43 A/Pay. Lt. Cndr. RCNVR Accountant Officer

ACCOUNTS OF MEN DISCHARGED

Account of the Balance of Wages, the Sale of Clothes and Effects
and the other Credits of Men Discharged to the
Shore, D. D. or Run

Name BRUCE, William. Rating L/Sea.
Official No. V-25864 H.M.C.S. St. Croix. List 5/2 - 8
Who* D. D. on the 20th Sep 19 43

Net sum due on ledger on account of Wages.....	\$	cts.
Proceeds of sale of Effects charged against Wages, brought from the other side		
		72. 37
CASH—	\$	cts.
Proceeds of sale of Effects, paid for in Cash, brought from the other side.....		
Found amongst Effects.....		
Debts collected \$.....		
Cash debited in the Accountant Officer's Cash Acct.....		
If in debt in ledger, amount to be stated (in red ink).....		
Fifteen dollars and Ten dollars.		
Rate of allotment (in words)..... charged to <u>30 Sep</u>		
Name of ship from which transferred..... <u>St. Croix.</u>		
Total†.....		72.37
		Creditor

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. "AVALON" for St. Croix. amounting to a net balance†..... Creditor. of Seventy two dollars..... Thirty seven. cents.

Dated on board H.M.C.S. Avalon at St. John's Newfoundland this 26th day of October 19 43

Approved [Signature] Accountant Officer
A Paymaster Lieut. Commander, R.C.N.V.R.
[Signature] Initials of the Assistant
Accountant Officer
[Signature] Commanding Officer.
Commander. R.C.N. (Temp)

For Use at Headquarters. \$.....cts.....credited on Inspector's certificate
No.....to.....

Signature.....

Date.....19.....

*State whether discharged on shore, D.D. or Run. †State whether "debtor" or "creditor".
‡Subscription for Charitable or other purposes should not be shown hereon, but on a Remittance List, and dealt with as laid down in the King's Regulations.

C.N.S. 46

10M-10-40 (7450)
H.Q. N.S. 815-9-45

H.M.C.S. "AVALON" Alt. Sheet. # 43650 of 16th October, 1943

DEPARTMENT OF VETERANS AFFAIRS

D OF D 20-9-43

AWARDS NAVY

WAR SERVICE RECORDS

D.D.

BRUCE	William	V-25864	L/Smn.	FILE No.
SURNAME (IN BLOCK LETTERS)	CHRISTIAN NAMES	REG. No.	RANK ON DISCHARGE	C.A.S.F. UNIT

WAR SERVICEBADGE

(CLASS)

No.

DATE DESPATCHED:

ADDRESS:

CAMPAIGN MEDALS	REGISTRATION NUMBER AND DATE DESPATCHED
1939-45 Star	
Atlantic Star	44 4/10/44
Africa Star	
Defence Medal	
C.V.S.M. & Clasp	
War Medal	
28-11-51 CBLK	

(THE REVERSE TO BE USED FOR ESTATE PURPOSES)

MEDALS AND MEMORIALS—DECEASED PERSONNEL

RCNVR Mar. 44 "ST. CROIX"

REGISTRATION No. DATE OF DESPATCH

(1) MEDALS

PERSON

ENTITLED TO Mr. John Bruce - Father

ADDRESS:

~~8 McGill St.,~~ 1692 Logan Ave.,
~~DUNDEE, Scotland.~~ WINNIPEG, Man. 9-1-51

(1)

(2) MEMORIAL CROSS

WIDOW

1436 Pacific Ave.
WINNIPEG, Man.

(2)

ADDRESS:

(3) MEMORIAL CROSS

MOTHER deceased

ADDRESS:

(3)

MEMORIAL BAR

DATE DESP 5-12-51

4055
REGN CANCELLED 215