

V6408
STARK

HORACE

GARNE

MEMORANDUM FOR

P. 64

Sluik, House 5.

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

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

36

and the following number quoted:—

H.Q.

DEPARTMENT OF NATIONAL DEFENCE
OTTAWA, ONT.

.....194.....

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

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.

Administrator of Estates.

*Remerciement
Restitué*

1/3 to father

1/3 " mother

*1/3 to father for mother age 20
upon undertaking.*

ANSWER IN FULL ALL APPLICABLE QUESTIONS

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

Degrees of Relationship	RELATIVES required to be accounted for	INFORMANT'S STATEMENT		
		NAME IN FULL of any Relative, if any, in each degree inquired for	Age	ADDRESS IN FULL of each surviving Relative, opposite his or her name, and date of death of each deceased relative
1	Widow of the Deceased.....	<i>None</i>		
2	Children of the Deceased and dates of their Births.....	<i>None</i>		
3	Father of the Deceased.....	<i>James S. Starks</i>		<i>Carleton Place Ont</i>
4	Mother of the Deceased.....	<i>Laura B. Starks</i>		<i>"</i>
5	Brothers of the Deceased	Full Blood 1		<i>Beveris Starks 20 in Sept 1941</i>
		Half Blood		<i>None</i>
6	Sisters of the Deceased	Full Blood		<i>None</i>
		Half Blood		<i>None</i>
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>None</i>		

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....	<i>None</i>		
9	Uncles and Aunts by blood of the Deceased (not Uncles and Aunts by marriage).....		Age	

FULL PARTICULARS AS TO IDENTITY

35

10	What is the full name of the deceased?	Horace Sarnes Starks.
11	Give the month and year of his birth.	19 March 1920
12	Where and when were his parents married?	French. Ont. Sept 26/1917
13	If deceased was married, state place and date of marriage.	N.A.
14	Did he leave a Will? If so, a copy should be attached hereto.	No.
15	Did he leave a bank account? If so, give full particulars.	P.O. Acct in Halifax.
16	Is there any other estate which will necessitate application being made for Probate of the Will or Letters of Administration of the estate?	None
17	State your own postal address in full.	As per 3.

PARTICULARS OF DOMICILE

18	Where was deceased born?	French Ont
19	State, in order, the Province (or State) and country in which the deceased resided and the period of time in each, and in which last.	Ontario.
20	What was the nature of his employment?	Student.
21	Did he own the premises in which he lived? If so, where?	No
22	Did he ever state verbally, or in writing, where he intended to make his permanent home?	Ontario.

OTHER PARTICULARS

23	Did the deceased after enlistment incur any debts for:— (a) His own separate board and lodging while on service. (b) Service clothing and equipment. An itemized account for each such debt should be attached hereto, and if same is correct you should mark the bill "approved" and sign same. If believed incorrect, give particulars.	None
24	Have you or any other relative paid the funeral expenses or any part thereof? If so, attach itemized accounts showing amount paid, and by whom. (NOTE:—The Government pays funeral expenses within the amounts authorized in the Regulations, where death occurs and burial is made Overseas as well as where death occurs and burial is made in Canada, and if a relative has already paid those expenses the Government will reimburse such relative to the extent of the amount authorized in the Regulations. Any amount of such expenses in excess of those authorized in the Regulations is not payable by the Government nor is it chargeable against the service estate of the deceased.)	None

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

* fatherof the deceased.

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

..... J. S. Stark; {Signature of Informant

CERTIFICATE

I hereby certify that, to the best of my knowledge and belief..... James S Stark

*See above { Name of Informant } is the * fatherof 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 Ottawa this 1st day of November 19 41

Signature of Clergyman, Priest, Magistrate, Commissioner or Notary Public } [Signature] Qualification Admn of Estates Address Ottawa

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

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

Personnel Records
Division.

1. Noted in Records *L.K.*
 2. Index Card.....
 3. Non-Sup. Card.....
 4. Statistical Card *L.K.*
 5. Roneo Strip *L.K.*
 6. Pension Card.....
 7. *S. best*
 8. *6.10.39*



N. V. 5
3M-8-39 (1761)
N.S. 815-11-5

SEP 30 1939
113-25416
3

ATTESTATION FORM

FOR MEN OF THE ROYAL CANADIAN NAVAL VOLUNTEER RESERVE

19738

SURNAME.....**STARK**.....OFFICIAL NO.....*6408*.....

CHRISTIAN NAMES.....**Horace Garner**.....MARRIED, SINGLE or WIDOWER.....**Single**.....

PERMANENT ADDRESS		RELIGION
Carleton Place, Ont.		Presbyterian
DATE OF BIRTH	PLACE OF BIRTH	NAME AND ADDRESS OF NEXT OF KIN
March 19, 1920	Town Finch County Storont Province Ontario	Father - James S. Stark same address

PERSONAL DESCRIPTION ON ENROLMENT

HEIGHT	CHEST MEASUREMENT	HAIR	EYES	COM- PLEXION	WOUNDS, SCARS, MARKS
Feet..... 5	Inflated..... 35	Dk. Brown	Gray	Clear	None
Inches..... 10½	Deflated..... 31½				
Mean..... 33					

DATE OF ENROLMENT	RATING ENROLLING FOR	TRADE OR CALLING AND IN WHOSE EMPLOY
Sept. 30th, 1939	Ord. Telegraphist	None

(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.....**Not applicable**.....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 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 Ottawa Division 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 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.

Dated this 30th day of September, 1939

Signature of applicant Horace Stark

(C) CERTIFICATE OF DIVISIONAL 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 30th day of September, 1939

[Signature]
Lieut. R.C.N.V. Signature of Commanding Officer.

(D) OATH OF ALLEGIANCE

I, Horace Garner Stark 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 Horace Stark

Witness [Signature]

Date Sept. 30th, 1939 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 DIVISIONAL COMMANDING OFFICER

Horace Garner Stark 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 Ottawa Division of the R.C.N.V.R.

[Signature]
Lieut. R.C.N.V.R. Commanding Officer.

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 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 Horace Garner Stark
candidate for entry as Ord. Telegraphist R.C.N.V.R.
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 Ottawa the 15th of September 1939

Geoffrey W.B. York
Examining Medical Officer

(Rank) Act. Surg. Lieut. RCNVR

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

Age { Years Months	Weight without Clothes	Height with Bare Feet	General Development	Chest Girth	Vision by— (i) Snellen's Types (ii) Colour Vision	Vaccinated or re- vaccinated for Small Pox (Date)	Lungs, Heart, etc.	Abdomen, Hernia, etc.	Limbs and Joints	Skin	Ears and Hearing	Testes, Varicocele, etc.	Mouth, Teeth (No. def- icient and No. defective, if any), Nose, Tonsils, etc.	Anus, Hæmorrhoids, etc.
(a)	(b)	(c)	(d)	(e)	(f)	(g)	(h)	(i)	(j)	(k)	(l)	(m)	(n)	(o)
19 years 6 months	lbs. 137	ft. ins. 5 - 10½	Fair	inches (a) maximum 35 (b) minimum 31½ (c) mean 33	right eye 6/30 left eye 6/20 colour vision Normal	6/10 with Glasses 6/10 with Glasses 928	Neg	Neg	Neg	Mild acne on back. Clear	Neg	Neg	30 teeth 0 defective N & T Neg	Neg

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.

Horace Stark
Signature of Candidate

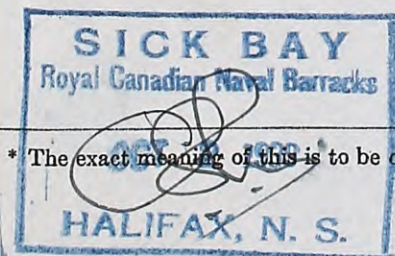
When a Candidate is passed, notwithstanding a slight defect or disability, the following Certificate is to be filled up

This Candidate is the subject of Eyesight rt. 6/30. Lt. 6/20 With Glasses
6/10 each eye. Wears glasses. Within requirements for Telegraphist
not considered of sufficient importance to cause his rejection, he being desirable in other respects.

Geoffrey W.B. York
Examining Medical Officer

(Rank) Act. Surg. Lieut. RCNVR

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



BM/MM

N.S. 113-S-516.

Handwritten initials

28th April, 1941.

THIS IS TO CERTIFY that according to official information Horace G. Stark, Telegraphist, Official Number V.6408, Royal Canadian Naval Volunteer Reserve, was serving in H.M.C.S. MARGAREE when that ship was lost in the North Atlantic on the 22nd of October, 1940, and that he is missing and presumed dead by Naval Authorities.

Handwritten signature

(J. O. Cossette),
NAVAL SECRETARY.

Handwritten initials

W.S.G. Application No. 10272-

TO: D.N.P.A. "C"

FILE NO. N.S.V-6408 -

"WAR SERVICE GRATUITY"

COMPUTATION OF SERVICE

<u>STARK, Horace Garner</u>	<u>V-6408</u>	<u>A</u>
SURNAME	OFFICIAL	RANK OR RATING
CHRISTIAN JAMES	NUMBER	ON DISCHARGE
IN FULL		

CAUSE OF DISCHARGE: Dead - Margaret
Applicant - Father No R.P.

366
21
387

TOTAL SERVICE

Date of Active Service 2 Oct '1939

Date of Discharge 22 Oct '1940

Total No. of Days 387

Less non qualifying service

Total Days 387

OVERSEAS SERVICE

% Total No. of Days 330

Less non qualifying service

Total Days 330

Record of Service in other Forces (per Naval Records)

Branch of Service

Date of Active Service

Date of Discharge

& % Overleaf

Computed By B. Hamilton

Checked By John Swain

J. M. Clayton
for (H.B. Money)
Payr. Cmdr. R.C.N.R.
Director of Personnel Records

DATE: JUN 16 1945

00F

N.D.A.

NON QUALIFYING SERVICE

(#) Date	Reason	No. of Days
"	"	"
"	"	"
"	"	"
"	"	"
"	"	"
"	"	"
		Total days

DATE OF DISCHARGE _____
 DATE OF NEXT RELATCO _____
 PERCENT OF RELATCO _____

OVERSEAS SERVICE:

Where Serving	From	To	No. of Days
Fraser } Margaret }	28 Nov '39	22 Oct '40	330

RELATCO	366	9
& TIME NOT JUSTIFIED	36	27
	<u>330</u>	<u>36</u>

CHARACTER OF DISCHARGE _____

CONTINUED	IN LIST	REMOVED	ON DISCHARGE
_____	_____	_____	_____

COMPLETION OF SERVICE _____
 DATE SERVICE COMPLETED _____
 SERVICE NO. _____
 GRADE NO. _____

10272

PARTICULARS OF DEAD OR MISSING PERSONNEL
WITH REGARD TO PAYMENT OF WAR SERVICE GRATUITY

Name of Deceased Member Horace Garner STARK Rank or Rating A/TEL O.No. V6408

1. Dependents' Allowance and Assigned Pay in force at date of death:
D.A. —
A.P. —
D.A. —
A.P. —

2. Pension awarded or being awarded to: no record

3. War Service Gratuity Application(s) received from: Mr J. S. STARK (father)
283 Somerset St. W.
Ottawa, Ont

In accordance with the War Service Grants Act, 1944 (Part I, Clause 4) and Directive dated 16th December, 1944 issued under authority of the Minister of Veterans Affairs, application(s) for War Service Gratuity in respect of the service of the above named deceased member may be dealt with as follows:

() To be paid to: _____ In the proportion of: /

- and -

to: _____ In the proportion of: /

() To be referred to the Dependents' Allowance Board for decision as to dependency within the spirit and intent of the War Service Grants Act, 1944, observing this application(s) is classed under:

Group "B" (ii)
Group "C" of the above mentioned Directive.

Date 25 June 45

R. P. Peadar
for D.N.P.A. (G) D.N.J.

STATEMENT OF WAR SERVICE GRATUITY

DECEASED
MEMBER'S
NAME

Horace Garner
(CHRISTIAN NAMES)

STARK
(SURNAME)

REGISTER NO. **10272**

FILE NO. **NSV-6408**

OFFICE
ADDRESS

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

**for Service Estate of
Horace G. STARK,
N.S.V-6408
22 Oct '40**

DATE **12 Sep '45**
SERVICE NO. **V-6408**
FINAL RANK OR RATING **A/Tel.**
DATE OF DISCHARGE **22 Oct '40**

DATE OF TERMINATION OF OVERSEAS SERVICE

DATE OF DISCHARGE

A. TOTAL QUALIFYING SERVICE

NO. OF DAYS **387** EQUAL TO **12** COMPLETE PERIODS AT \$7.50

90.00

B. QUALIFYING OVERSEAS SERVICE

NO. OF DAYS **330** LESS **27** INELIGIBLE DAYS, EQUAL TO **303** DAYS @ 25C. PER DAY

75.75

C. SUPPLEMENT FOR OVERSEAS SERVICE

DAILY RATES AT DISCHARGE

PAY \$ **2.00**
SUBSISTENCE OR LODGING
AND PROVISION ALLOWANCE \$ **1.45**
ADDITIONAL PAY **T.O.W/T** \$ **.05**
H.L.M. \$ **.13**

nPA132
OCT 9 1945

DEPENDENTS' ALLOWANCE 1/30 OF \$

TOTAL \$ **3.63** X7 = \$ **25.41**
NO. OF DAYS **330** X \$ **25.41**

45.83

D. WAR SERVICE GRATUITY

211.58

E. DEDUCTIONS

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

NPLE 54

F. TOTAL AMOUNT PAYABLE

211.58

G. YOUR PORTION OF GRATUITY IS—

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

=\$211.58

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
LJM

CHECKED BY
[Signature]

TREASURY
CHECKED BY
[Signature] DATE
Sept 17/45

SERVICE REPRESENTATIVE
for Dir. Naval Pay Accting.

ESTATES BRANCH

H.Q. NS V-6408

10th November, 1945.

Mr. Bevis Stark,
885 Somerset St. West,
Ottawa, Ontario.

STARK Horace G. A.Tel. (Deceased)
No. V6408 R.C.N.V.R.

Dear Mr. Stark:

In accordance with the provisions of the War Service Grants Act, the War Service Gratuity due to your brother is now available for distribution as part of his Service Estate. This amount has been computed as outlined in the enclosed award form.

As your brother died without having made a Will, this amount is distributable in accordance with the intestacy laws of his province of domicile, which provide that you share equally with your parents.

A cheque has been requisitioned from Treasury payable to your order for your one-third share as next-of-kin entitled, and on receipt of same will you kindly sign and return the enclosed form of acknowledgment.

Yours faithfully,

(L.M. Firth) Colonel,
Director of Estates

Encl:
HV/EC

DISTRIBUTION OF SERVICE ESTATES

DME

Estates Form "P. 4"

NAVY

Name..... **STARK** **Horace G.** No..... **V6408**
 Surname Christian Names

A/ TEL **HMCS Margaree** **22-10-40**
 Rank Unit Date of Death

	<u>AMOUNT</u>	W.S.G.	211.58
		L.P.C.....\$	99.17
Date..... 6-11-45		Other Credits.....	110.85
		Total.....	421.60
		Prev. dist.	210.02
		This dist.	211.58

SHARE	RELATIONSHIP	NAME AND ADDRESS	AMOUNT
1/3	father	James S. Stark, 283 Somerset St. W., OTTAWA, Ont.	70.54
1/3	mother	Mrs. Laura B. Stark, (As above)	70.52
1/3	brother	Bevis Stark, c/o James S. Stark, 283 Somerset St. W., OTTAWA, Ont.	70.52
		(As next of kin entitled)	
		P4. TO TREAS.	
		NOV 9 1945	
			WSG

AUTHORITY					
H.Q. F.E. No.	VOTE	PRI	H.Q. SUB.	OBJ.	AMOUNT
9999	831	00	50	000	\$211.58
CLASSIFIED BY			EXAMINED BY		
			For Chief Treasury Officer		

DISTRIBUTION APPROVED AND AUTHORIZED

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

AUDITED FOR PAYMENT

.....
 For Chief Treasury Officer

D OF D 22-10-40

AWARDS NAVY

D.D.

STARK	Horace Garner	V-6408	Tel.	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	8631
Atlantic Star	
C.V.S.M. & Clasp	
War Medal	

(THE REVERSE TO BE USED FOR ESTATE PURPOSES)

MEDALS AND MEMORIALS—DECEASED PERSONNEL

RCNVR May 42 "MARGAREE"

REGISTRATION No. DATE OF DESPATCH

MEMORIAL BAR

- (1) MEDALS
PERSON

ENTITLED TO Mr. James S. Stark - Father

Carleton Place, Ont.

ADDRESS:

DATE DESP

(1)

REGN. NO

447

- (2) MEMORIAL CROSS

WIDOW

ADDRESS:

(2)

- (3) MEMORIAL CROSS

MOTHER Mrs. J.S. Stark

Carleton Place, Ont.

ADDRESS:

(3)

14-5-41

V6408.

OFFICIAL NUMBER

NAME STARK,
(Surname)

Horace Garner.
(Given Names)

OFFICIAL NUMBER

V6408.

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. Ottawa.	Ord. Tel.	30	9	39							T.O.	3	9	40.			
STADACONA	" "	1	10	39													
H.M.C.S. "FRASER"	" "	1	12	39													
H.M.C.S. "MARGAREE"	" "	6	9	40													
DISCHARGED	" "	22	10	40	"Killed in Action" (H.M.C.S. "MARGAREE" Casualty List).												

GENERAL REMARKS

MEMORIAL CROSS sent to:-
Mother: Mrs. J.S. Stark,
Carleton Place,
Ontario. 14/5/41.

DATE OF BIRTH			PLACE		CIVIL OCCU.		RELIGION		PERM RESIDENCE		PREV ENL.		RANK OR RATE ON ENLISTMENT			
DY	MO	YR	BIRTH	MAIN	SUB	CAT			CITY	TOWN	SER	DIV.	A	BR	RANK	
19	3	20	11	RRR	0	50	X	1	25	02	0	03	0	12	95	
ENLIST DATE			ACT SERV DATE		STR.		ACT SERV DATE		SHIP		RANK OR RATE					
DY	MO	YR	DY	MO	YR	CAT			DY	MO	YR	CAT	A	BR	RANK	
30	09	39	01	10	39							03	15	0	12	95
SENIORITY			STR.		NON-SUB		M		CODED		CHECKED					
DY	MO	YR	CAT	A	B	ST.										
01	10	39	09	53	10	00			22.10.40							

V6408.

OFFICIAL NUMBER

FILE NUMBER

N.S. 113-S-516.

OFFICIAL NUMBER

V6408.

NAME

STARK,
(Surname)Horace Garner,
(Given Names)

DATE OF BIRTH

19th March, 1920.

PLACE OF BIRTH

Finch, Ontario.

OCCUPATION

None.

RELIGION

Presbyterian.

EDUCATION

RESIDENCE AT TIME OF ENLISTMENT: Street and No.

Town

Carleton Place,

Province, etc.

Ontario.

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
30	9	39	H.O.	5' 10½"	Dark Brown	Grey	Clear	None.				

NEXT OF KIN RELATIONSHIP (in pencil)

Father

NAME (in pencil)

Mr. James S. Stark

ADDRESS (in pencil): Street and No.

Town

Carleton Place

Province, etc.

Ontario.

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	
				12	39	Qualified Telegraphist.					

BADGES, G.C. OR G.S.				BRIEF PARTICULARS OF WARRANT OR C.M. PUNISHMENTS AND C.P. CHARGES							
Date (in figures)			1st, 2nd or 3rd G.C. or G.S.	Granted Deprived Restored	SHIP OR ESTABLISHMENT	Wt. No.	Date (in figures)			BRIEF PARTICULARS OF OFFENCE	PUNISHMENT
Day	Month	Year					Day	Month	Year		

FILM
NO. W.N.P. 5171-8
DATE

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



20
APR 16 1941
CANADA

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 HORACE G. STARK Rating A/TEL.
Official No. V.6408 H.M.C.S. "MARGAREE" List 5-2/32
Who* was "DD" on the 22nd October 1940.

Net sum due on ledger on account of Wages.....	\$	99	cts.	17
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
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>- NIL -</u> charged to.....				
Name of ship from which transferred..... <u>H.M.C.S. "MARGAREE"</u>				
Total† <u>BALANCE CREDITOR</u>		99		17

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 -NINETY-NINE- dollars -SEVENTEEN- cents.

Dated on board H.M.C.S. "STADACONA" at HALIFAX
NOVA SCOTIA this 25th day of MARCH 1941.

Approved Bm Ratfield 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 / Fals Rough

STATEMENT OF ACCOUNT

P 41752 P 41752 APR 16 1941

N.S. 113-57
CANADA

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

List 5-2 No. 32 (Name) STARK, Horace G. Rank Rating A/Tel. No. V6408

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

	\$	c.
CREDIT from former account	27	62
Pay as A/Tel. (Rank Rating) from 1st Oct. to 31st Oct. 31 days at \$2.00 a day	62	00
" T/O. W/T. " 3rd Sep. " " " " (59 " .05 ")	2	95
" " " " " " " " (" " ")		
" " " " " " " " (" " ")		
" " " " " " " " (" " ")		
Kit Upkeep Allowance	3	33
OTHER CREDITS: H.L.M.	1	95
GROG MONEY	1	32
Total credits	99	17

DEBT from former account NIL

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

Allotment NIL

Pension deduction (Officers) charged to NIL of

Hospital stoppages NIL

Mulcts NIL

OTHER CHARGES: NIL

Handwritten notes: J.P.A. (M) 19.6.40

Handwritten notes: Ledger { Paid Rough } dated D.N.B.A. (9) 19.6.40

Total debits NIL

Balance Cr. of ~~Dr.~~ 99 17

(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

Signature: B. Matfield

ACCOUNTANT OFFICER
PAYMASTER SUB. LIEUTENANT, RCNVR.

STARK, H. G. +

Tel.

O. N. 6408

1	Wrist watch Bulova.	5	33.00
1	wash kit .	8	10.00X
1	Electric razor - Packard.	7	15.00X
1	Kodak camera.		15.00X
1	Burberry.		17.50X
1	Pair shoes.		5.00X
1	Pair glasses.		22.50
1	Pen and pencil set.		10.00X

128.00

The articles described above were all lost by me
whilst on service in H.M.C.S. "FRASER".

H.G. Stark, Tel

*Am't approved \$47.50
see off Rec 60-23226*

P096972

113 S-516

Six copies to be rendered to Naval Service Headquarters

REPORT OF THE DEATH OF AN OFFICER, MAN OR BOY

H.M.C.S. STADACONA at HALIFAX, N. S.Name Horace Garner STARK
(Christian names in full)Rank of Rating Acting Telegraphist Official No. 6408
(If unknown, date of first entry)Place of Birth Finch, Ontario. Date of Birth 19th March, 1920.Occupation in Civil Life None Religion PresbyterianNumber of years service in the Navy (Long Service R.C.N., or mobilized service in case of R.C.N.
(Temporary) or Reserve ratings) 1 Year 1 MonthDate of Death 22nd October, 1940. Place of Death At SeaCause 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 James S. STARK Relationship Father
Address Carleton Place, Ontario.Date on which the above was informed by Ship Informed by N.S.H.Q.Date on which death was registered with local Officials NK

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

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

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

Undertaker employed (if any)

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


 COMMANDER R.C.N.,
 Commanding Officer,

8th November, 1940

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

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

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

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

113-8516

10

1st November, 1940.

Dear Sir,


It is with deep regret that I must confirm the telegram sent out by the Minister of National Defence, reporting that your son, H.G. Stark, Telegraphist, O.N. V.6408, 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.

Mr. James S. Stark,
CARLETON PLACE, Ontario.

Fraser

SERVICE CERTIFICATE

N. V. No. 17

3M-9-37
N.S. 815-11-17

OF

Name in full Horace Garner STARK. Company OTTAWA.

LY

ROYAL CANADIAN NAVAL VOLUNTEER RESERVE

Training Headquarters

H A L I F A X.

Official Number 6408.

Date of Birth 19th March, 1920.

Place of Birth FINCH, Ont.

Usual Place of Residence Carleton Place, Ont.

Trade brought up to None.

Name and Address of next of Kin (Father) James J. Starks (Same)

Religious Denomination Presbyterian.

Can Swim _____

PARTICULARS OF SERVICE

DATE OF ACTUAL VOLUNTEERING	DATE OF ENROLMENT	PERIOD VOLUNTEERED FOR	RATING ON ENROLMENT	MEDALS, DECORATIONS, ETC.	
				DATE RECEIVED	NATURE OF DECORATION
<u>15 Sep/39.</u>	<u>30 Sept/39.</u>	<u>3 yrs.</u>	<u>Ord.Tel.</u>		

PERSONAL DESCRIPTION

	HEIGHT		COMPLEXION	HAIR	EYES	MARKS, WOUNDS, SCARS
	FEET	INCHES				
On Entry	<u>5</u>	<u>10½</u>	<u>Clear</u>	<u>Dk. Brn.</u>	<u>Gray.</u>	<u>Nil.</u>
On attaining 28 years						
Further Description if necessary						

QUESTIONNAIRE FOR CANDIDATES

FOR ENTRY IN THE ROYAL CANADIAN NAVAL VOLUNTEER RESERVE

SEP 20 1938
113-8516

19739 2

Name (in full)..... *Horace Garner Stark*

Date and place of birth..... *March 19, 1920 — Fitch, Ont.*
 (Birth certificate, declaration by parents or affidavit as to date of birth must be attached)

Permanent place of residence..... *Carleton Place, Ont.*

Nearest town to residence (if living in country)..... *✓*

Are you a British subject?..... *Yes*

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

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

Present occupation or trade..... *Unoccupied — Operator of VE30*
 (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
 *No*

Have you ever been discharged from any of H.M. Forces as medically unfit?..... *No*

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

What is your weight? *139*... What is your height?..... *5' 11"*

What is your chest measurement (not inflated)?..... *37*

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.

..... *Horace Stark*.....Signature

..... *Sept. 15/39*.....Date

..... *Carleton Place, Ont.*.....Address

M. Bromley.....
 (Witness to Signature)

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 *March 19, 1920*

Signed..... *[Signature]*.....
 Commanding Officer



Department of National Defence

Naval Service

Ottawa, Canada.

IN REPLY PLEASE QUOTE
No. 113-S-516

13

NOV 8 1940

STATEMENT OF SERVICE OF

HORACE GARNER STARK

Telegraphist R.C.N.V.R. V6408

Entered as Ord. Tel. 30 Sept. 1939

<u>Ship or Establishment.</u>	<u>Rating</u>	<u>From</u>	<u>To</u>
H.M.C.S. "STADACONA"	Ord. Tel.	30 Sept. 1939	- 30 Nov. 1939
H.M.C.S. "FRASER"	Tel.	1 Dec. 1939	-
H.M.C.S. "MARGAREE"	"		- 22 Oct. 1940

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

DISCHARGED "DEAD" - 22nd October, 1940.

(J. O. Cossette),
Naval Secretary.