V27050
MORRISON
HARRY

113-M-2105

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

PLEASE LEAVE BLANK

12

Section A—GENERAL INFORMATION

1. (a) Print name in full MORRISON HARRY (b) Reg'l. No. W 270 550
2. (a) Arm of service Navy (b) Unit R C N V R (c) Rank Stoker 1
3. (a) Date of birth May 19 1903 (b) Have you any dependents? yes (c) Place of residence at time of enlistment Toronto
4. (a) Place of enlistment Toronto (b) Date of enlistment Apr 2/41

Section B—EDUCATION AND TRAINING

5. (a) State age on finally leaving school 14 (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.) Complete public school
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 Willard Storage Battery Address Toronto
19. Nature of employer's business (for instance, "farmer", or "building contractor", or "boot factory", or "iron foundry", or "retail store", etc.) Manufacturing batteries
20. (a) Your specific occupation stationary engineer (b) Number of years' experience at this occupation with any employer 3 years
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? yes

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? none (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? no
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 to become a 2nd Class engineer

DATE Apr 15 1941 SIGNATURE Harry Morrison

Ont

O.H.F. RECEIVED

Copy to:
V.W.D.
E.S.

19 April, 1941

MEMORANDUM FOR **P. 64**

Mrs. Phyllis Morrison,
435 Leslie Street,
Toronto, 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. 113-M-2105 FD.68

DEPARTMENT OF NATIONAL DEFENCE
OTTAWA, ONT.

October 27 1942

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

MORRISON, Harry, Sto.1

No. V.27050, H.M.C.S. "Ottawa".

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

(H.R. Wade) Lt.-Cdr. RCNVR.
FOR (L.M. FIRTH) LT.COLONEL
Administrator of Estates.

ESTATES BRANCH OCT 31 19[illegible] H.Q. OTTAWA. NATIONAL DEFENCE

M.F.W. 77
5M—9-41 (1669)
H.Q. 1772-39-972

ANSWER IN FULL ALL APPLICABLE QUESTIONS

STATEMENT of the Names, Ages and Addresses or Dates of Death, of all the relatives that the deceas 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		Phyllis Morrison	34	435 Leslie Street.
2	Children of the Deceased and dates of their Births		Marion Morrison Born 28/9/32	10	435 Leslie Street.
3	Father of the Deceased		William Morrison	66	226 Blantyre Ave.
4	Mother of the Deceased		Ann Matilda Morrison	66	226 Blantyre
5	Brothers of the Deceased	Full Blood	George Morrison	42	81 Boon Ave.
		Half Blood			
6	Sisters of the Deceased	Full Blood	Elsie Hodkinson	45	71 Madeline Ave.
			Annie Paterson	32	226 Blantyre Ave.
		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
	John William Morrison Feb 17TH 1918. Killed in Action		

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

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

FULL PARTICULARS AS TO IDENTITY

10	What is the full name of the deceased?	Harry Morrison
11	Give the month and year of his birth.	May 19th 1903.
12	Where and when were his parents married?	July 25th 1895 Hull Eng'.
13	If deceased was married, state place and date of marriage.	July 1st 1931 Toronto. Ont
14	Did he leave a Will? If so, a copy should be attached hereto.	Yes: filed at Ottawa.
15	Did he leave a bank account? If so, give full particulars.	Not to my knowledge. (Letter attached)
16	Is there any other estate which will necessitate application being made for Probate of the Will or Letters of Administration of the estate?	no
17	State *your own* postal address in full.	435 Leslie Street Toronto Ontario

PARTICULARS OF DOMICILE

18	Where was deceased born?	Hull Eng'.
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.	Hull Eng: 4 years. Toronto Ontario.
20	What was the nature of his employment?	Stationery Engineer
21	Did he own the premises in which he lived? If so, where?	Yes: 33 Pharmacy Ave.
22	Did he ever state verbally, or in writing, where he intended to make his permanent home?	33 Pharmacy Ave.

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.	None.

(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.)

(PLEASE TURN OVER)

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

*Wife of the deceased.

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

Phyllis Morrison — {Signature of Informant}

CERTIFICATE

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

*See above

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

Dated at Toronto this 29th day of October 1942

Signature of Clergyman, Priest, Magistrate, Commissioner or Notary Public: M. S. Kenny Qualification: Commissioner for Oaths

Address 299 Main St. Toronto.

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

I believe there is an existing Bank Account at the Ships Base I am endeavouring to find out I am writing the Chaplain at Newfoundland to see if enquiries can be made there

Phyllis Morrison

N. V. 5

25M—9-40 (6793)
N.S. 815-11-5

CANADA

ATTESTATION FORM

P 36324

(HOSTILITIES FORM)

FOR MEN OF THE ROYAL CANADIAN NAVAL VOLUNTEER RESERVE

5

SURNAME MORRISON OFFICIAL NO. V 22050

CHRISTIAN NAMES HARRY MARRIED, SINGLE OR WIDOWER MARRIED (1)

PERMANENT ADDRESS	RELIGION
33 Pharmacy Ave., Toronto, Ontario.	C. of E.

DATE OF BIRTH	*PLACE OF BIRTH	NAME AND ADDRESS OF NEXT OF KIN
19 May '03	Town Hull,	Wife: Phyllis: Same address.
*Original Nationality of: Father English Mother English	County Yorkshire, Province England.	

*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 5 Inches 7	Inflated 36 Deflated 33 Mean 34½	Brown	Blue	Fair	Appendectomy Crushed second finger right hand.

DATE OF ENROLMENT	RATING ENROLLING FOR	TRADE OR CALLING AND IN WHOSE EMPLOY
2 Apl. '41	Stoker I	Fireman: Willard Storage Battery Co., 269 St. Clarence, Toronto, Ontario.
R.C.N.V.R. Division (or other establishment) at which enrolled TORONTO, ONT.		

(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 30th Field Battery/R.C.A. 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
30th Field Battery R.C.A.	Gunner	(Approx.) 10 May '24	(Approx.) 10 Nov. '26

(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.

TORONTO, ONT.

(3) On being enrolled as a member of the.....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 2nd day of Apl. '41

Signature of applicant Harry Morrison

(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 2nd day of Apl. '41

Signature of and rank of Attesting Officer.

LIEUTENANT R. C. N. V. R.

(D) OATH OF ALLEGIANCE

I, HARRY MORRISON 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 Harry Morrison

Witness

Date 2 Apl. '41 Rank 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

HARRY MORRISON 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 TORONTO, ONT. Division of the R.C.N.V.R. or in the appropriate official documents.

Attesting Officer.

LIEUTENANT R. C. N. V. R.

2 Apl. '41 194.....

R.C.N.V.R. Division (or other establishment) TORONTO, ONT.

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.

Can. B. 207

100 M—11-40 (7881)
N.S. 815-2-207

CANADA

Certificate of Medical Examination of Officers, Men and Boys

NAVAL SERVICE OF CANADA

(R.C.N. OR RESERVE FORCES)

P 36325

4

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 H. Morrison

‡candidate for entry as Stoker 1c RCNVR

and I believe him to be *{in all respects fit for His Majesty's Service. / ~~unfit for His Majesty's Service for the reason stated below.~~} 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.

Age {Years / Months (a)	Weight without Clothes (b)	Height with Bare Feet (c)	General Development (d)	Chest Girth (e)	Vision by— (i) Snellen's Types (ii) Colour Vision (f)	Vaccinated or revaccinated for Small Pox (Date) (g)	Lungs, Heart, etc. (h)	Abdomen, Hernia, etc. (i)	Limbs and Joints (k)	Skin (l)	Ears and Hearing (m)	Testes, Varicocele, etc. (n)	Mouth, Teeth (*No. deficient and No. defective, if any*), Nose, Tonsils, etc. (o)	Anus, Hæmorrhoids, etc. (p)
37-10	lbs. 138	ft. ins. 5'7.	Good	inches (a) maximum 36 (b) minimum 33 (c) mean 34½	right eye 20/15 left eye 20/15 *colour vision	1933	NORMAL	NORMAL	NORMAL	appendectomy 1928	NORMAL	NORMAL	15 Deficient	NORMAL

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

X-ray [redacted] Approved. [redacted]

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.

Harry Morrison
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 deficient teeth but with some dental treatment ~~need~~ the remaining ~~teeth~~ *which renders him medically unfit for service*, *would be satisfactory* *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

TORONTO, ONT.

Dated at ..... the ..... of ..... 19 .....

MAR 5 1941

John A McLachlin
Examining Medical Officer

(Rank) SURGEON LIEUT. R.C.N.V.R.

DEPARTMENT OF VETERANS AFFAIRS

DECEASED 13 September 1942

AWARDS NAVY

WAR SERVICE RECORDS

D.D.

SURNAME (IN BLOCK LETTERS)	CHRISTIAN NAMES	REG. No.	RANK ON DISCHARGE	C.A.S.F. UNIT
MORRISON	Harry	V-27050	Sto.1	FILE No.

WAR SERVICE BADGE (CLASS) No.

DATE DESPATCHED:

ADDRESS:

CAMPAIGN MEDALS	REGISTRATION NUMBER AND DATE DESPATCHED
1939-45 Star	9321
Atlantic Star	
C.V.S.M. & Clasp	
War Medal	

(THE REVERSE TO BE USED FOR ESTATE PURPOSES)

DVA 8.6

MEDALS AND MEMORIALS—DECEASED PERSONNEL

HMCS "OTTAWA" Apr./43. R.C.N.V.R.

REGISTRATION No. DATE OF DESPATCH

(1) MEDALS

PERSON ENTITLED TO Mrs. Phyllis Morrison - Widow

ADDRESS: APT. 1. 425 CARLTON ST. ~~435 Leslie St.~~, ~~89 Ravina Crescent~~ Toronto, Ont. 19/53 ~~30-8-48~~

MEMORIAL BAR

(1) DATE DESP.

REGN. NO. 2209

(2) MEMORIAL CROSS

WIDOW Mrs. P. Morrison

ADDRESS: 435 Leslie Street TORONTO, Ontario

(2) 5 January 1943

(3) MEMORIAL CROSS

MOTHER Mrs. A. Morrison

ADDRESS: 226 Blantyre Avenue TORONTO, Ontario

(3) 5 January 1943

Can. S. 545
10M—2-40 (4019)
N.S. 816-9-545

P 47648

MAY – 2 1941

113 M-2185-V 27050

IN THE NAME OF GOD, AMEN

I, Harry Morrison Stoker I of His Majesty's Ship Toronto Division R.C.N.V.R (now a Patient* in), being sound of mind, do hereby make this my last Will and Testament: I give and bequeath unto my wife

Phyllis Morrison
33 Pharmacy ave
Toronto (13)
Ont.

16

*If in Hospital or in Hospital

Insert the degree of relationship (if of any) and place of residence of the Legatee or Legatees.

See instructions on the back hereof.

all such Wages, Prize Money, Allowances, and other Sum or Sums of Money, as now are, or hereafter may be due to me for my service on board the said Ship, or any other Ship or Vessel, of the Royal Navy, together with all other my Estate and Effects whatsoever and wheresoever.

Insert the degree of relationship (if of any) and place of residence of the Executor or Executors.

And I do hereby appoint my Wife
Phyllis Morrison
33 Pharmacy ave Toronto
Executors of this my last Will and Testament; and hereby revoking all former Wills by me made, I declare this to be my last Will and Testament.

In witness whereof I have at Toronto hereunto set my hand, this Seventh day of April, in the Year of Our Lord One Thousand Nine Hundred forty one

Harry Morrison

Signed by the said Testator, as his last Will and Testament, in the presence of us present at the same time, who in his presence at his request and in the presence of each other have subscribed our names as Witnesses.

Witnesses John A. Baldwin

PAY LIEUT. R.C.N.V.R.

NOTE.—As Wills of Petty Officers, Seamen, and Marines must be executed with the formalities required by the Law of England in the case of other persons, every such Will must be executed in the presence of, and be attested by, *two disinterested* Witnesses.

Where the Will is made on board one of His Majesty's Ships, one of the two requisite attesting Witnesses shall be a Commissioned Officer, Chaplain, or Warrant or Subordinate Officer belonging to His Majesty's Naval or Marine or Military Force.

Where the Will is made elsewhere than on board one of His Majesty's Ships, one of the two requisite attesting Witnesses shall be a Commissioned Officer, or Chaplain, or Warrant or Subordinate Officer, or the Governor, Agent, Physician, Surgeon, Assistant-Surgeon, or Chaplain of a Naval Hospital at home or abroad, or a Justice of the Peace, or the Incumbent, Curate, or Minister of a Church or Place of Worship in the Parish where the Will is executed, or a British Consular Officer, or an Officer of Customs, or a Notary Public, or a Solicitor, or in Scotland a Law Agent.

A Will made by any person while serving as a Seaman or Marine will not be valid for any purpose if it is written or contained on or in the same Paper, Parchment, or Instrument with a Power of Attorney.

The Certificate on the back hereof, is to be signed by the person by whom the Will is prepared.

Noted in Service Records by

Instructions for filling up the Form.

If a special legacy is to be given, the name, residence (and relationship if any) of the person interested is to be inserted in the space after the words "I give and bequeath," or if more than one person, the respective names, &c., also the particulars of the property bequeathed.

Then the words "And I give and bequeath unto" should be inserted together with the names, &c., of the person or persons to whom the residue of the Testator's property is to be given, and the words printed in italics commencing "all such wages," should be struck out.

If, however, the *whole* of the Testator's property is to be given to one person, or between several, all that is necessary is to insert in the space, the names, &c., of the person or persons to be benefited.

CERTIFICATE.

I hereby certify that the Will on the other side hereof was previously to its execution read over to the Testator who appeared perfectly to understand the same.

Harry Morrison ..... { Signature of the person by whom the Will was prepared.

N.V. 17
60M—11-40 (7836)
N.S. 815-11-17

CERTIFICATE of the SERVICE of

Harry MORRISON

in the Royal Canadian Naval Volunteer Reserve

Training Headquarters	R.C.N.V.R. Division	Official Number V-11050
Halifax	Toronto	"
		"

Date of Birth 19 May '03

Place of Birth Hull, Yorkshire, England

Place of Residence 33 Pharmacy Ave., Toronto

Trade brought up to OHF Fireman, Willard Storage Battery Co. O.H.F.

Religion C of E.

31-10-41
Name and Address of Nearest Relative or Friend
(in pencil)

Wife:
Phyllis,
33 Pharmacy Ave.,
Toronto, Ontario

Can Swim:—P.P.T. Date ..... 19..... Signature ..... Rank .....

P.S.T. Date ..... 19..... Signature ..... Rank .....

PARTICULARS OF SERVICE

Date of Actual Volunteering	Date of Enrolment or re-enrolment	Period Volunteered for	Rating on Enrolment or Re-enrolment
	2 Apl. '41	Dur. Host.	Stoker I

MEDALS, DECORATIONS, etc.

Date of Award	Date of Presentation	Nature of Decoration

PERSONAL DESCRIPTION

—	Height Feet	Height Inches	Chest (mean)	Weight	Hair	Eyes	Complexion	MARKS, WOUNDS, SCARS
On Entry	5	7	34½	138	Brown	Blue	Fair	Appendectomy; Crushed second finger r. hand.
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

NAVAL TRAINING and ACTIVE SERVICE

Year	SHIP OR ESTABLISHMENT	LEDGER List	LEDGER No.	RATING	FROM	TO	CAUSE OF DISCHARGE
1941	Tor. Div. RCNVR			STOKER I	2 Apl. '41	22 Apl '41	
	Stadacona			—"—	23 apl '41	9 Aug '41	
	"Brandon"			—"—	10 Aug '41	25 Aug '41	
	Stadacona			—"—	26 Aug '41	27 Aug '41	
	Ottawa			—"—	28 Aug '41	13 Sept 42	D. D.

Wounds Received in Action, Hurt Certificates, Meritorious Service, Special Recommendations, Prizes or other Grants

Date	Details	Captain's Signature
25-4-43	Issued D.S.C.W. 20093	

NAVAL TRAINING and ACTIVE SERVICE

Year	SHIP OR ESTABLISHMENT	LEDGER		RATING	FROM	TO	CAUSE OF DISCHARGE
		List	No.				

EXAMINATIONS, NOTATIONS, QUALIFICATIONS			RECORD OF RATING		
Date	Particulars	Captain's Signature	Rated	Date	Authority for Advancement or Reason for Disrating to be stated
2 Apl. '41	Identity card N.S. 28924 issued	W. C. Timmes			

Name Harry MORRISON **Conduct**

SECOND CLASS FOR CONDUCT (Inclusive Dates) From	To

Previous time to count towards G.S. Badge — 2 years 185 days. N.S. 113-M-2105 9 Apl. '41

R.C.N.V.R. GOOD CONDUCT AND GOOD SERVICE BADGES

Date	G.S.B. or G.C.B.	1st, 2nd, 3rd	Granted, Deprived, Restored

TIME FORFEITED

Date	P., D.C., C.P., or W.T.	No. of Days Awarded	No. of Days Served

CHARACTER, ABILITY IN RATING ON COMPLETION OF TRAINING, DISCHARGE FROM THE SERVICE, AND ANNUALLY, 31st DECEMBER, WHILE MOBILIZED

Character	Efficiency in Rating Noting Substantive Rating in Brackets	Date	Captain's Signature
V.G.	Sat (Sto 1)	31 Dec '41	[signature]
VG	— (— " —)	Sep 13-42	[signature] Davis

VERIFICATION FORM

CAMPAIGN STARS, DEFENCE MEDAL, WAR MEDAL, C.V.S.M. and CLASP.

NAVAL GENERAL SERVICE MEDAL (1915).

NAME IN FULL MORRISON HARRY ..... RANK/RATING Sto. IIc ..... OFF.NO. V27050 ..... ADDRESS .....

SHIP	SERVICE FROM	SERVICE TO	SERVICE DAYS	AREA	QUALIFYING PERIODS IN DAYS FROM	QUALIFYING PERIODS IN DAYS TO	1939-45	ATLANTIC	DEFENCE	CLASP C.V.S.M.	1915 MEDAL
	2.4.41										
Brandaw	10.F.41	23.8.41	16	Atl.							
Ottawa	24.8.41	13.9.42	~~382~~ 388	Atl. (Lost)							
			388								
Dsid "Dead" to date		13.9.42									

STARS MEDALS	✓ 1	✓ 2	ELIGIBLE FOR AWARDS OF
1939-45	/		Star
ATLANTIC	/		Star
FRANCE G.			
AFRICA			
PACIFIC			
BURMA			
ITALY			
DEFENCE			
C.V.S.M.			3rd clasp
" CLASP			
WAR 1945	/		medal
WAR 1915			

VERIFIED BY ..... Dsd.

VERIFIED BY ..... VERIFIED BY .....

DIR. OF PERSONNEL RECORDS.

LMF COPY C.T. 2006

CANADIAN DEFENCE FORCES

FORM FOR VERIFICATION OF MARRIAGE AND BIRTH PARTICULARS

Investigator will make any necessary corrections in red ink as to registrations belonging to his area, and will underline those not checked because of registration not belonging to area. Any supplementary notes will be made in the space provided hereunder.

Name Morrison, Harry Official No. R.C.N.V.R.

States that he married Broady, Phyllis

on July 1, 1931 at Toronto

and claims dependents' allowance for wife and following children:

Name	Month and Year of Birth	
Morrison, Marion P.	Sept. 28, 1932	Toronto

The above child was legally adopted by Harry Morrison and his wife, Phyllis Morrison. Adopt. F.#8016.

REPORT

Marriage recorded at Toronto

Births initialed are registered.

Parents of above children as registered

Father's Name

Mother's Maiden Name

Jno. W. Gowans
for (F.J. Cameron)
District Treasury Officer,
Military District No. 2.

Can. 2041
10M—10-39 (2378)
N.S. 815-9-2041

ORIGINAL

Number 10

APPLICATION FOR PAYMENT OF MARRIAGE ALLOWANCE

List and Number in Ledger	NAME	Rank or Rating	Official No.	Daily Rate of Pay
	Surname MORRISON Christian Names Harry	Stoker I	RCNVR V-27050	2.00

NAME OF WIFE OR GUARDIAN	ADDRESS
Surname MORRISON (wife) Christian Names Phyllis	Noted in Service Records by H.G. 33 Pharmacy Avenue, Toronto, Ontario.

CHILD OR CHILDREN

Marriage Date: July - 1 - 1931

	Name	Sex	Date of Birth	Attains majority
(1)	Marion Phyllis	F	28 Sept. '32 ✓	1949
(2)				
(3)				
(4)				

I do hereby solemnly declare that the above particulars are correct.

Signed in the presence of:

J. Kirk

Signature Harry Morrison

Rank or Rating Stoker I, R.C.N.V.R.

Marriage Allowance in force per diem —

Marriage Allowance claimed per diem 1.00

Claim has been supported with the necessary documentary evidence and the above amount has been approved for payment.

Marr & Birth Certs produced.
Child legally adopted by Adopt. F. #8016
GK 12.4.41

O C Timmes
Commanding Officer.

This amount per day has been credited from 2nd April 1941

at List No. Ledger ending Toronto Div Ledger 1941

Allotment of $ 61-00 in force from the month of April 1941 in accordance with regulations.

G. Lemaire
DNA
Accountant Officer.

H. M. C. S. Headquarters

Forwarded 6-5-41

THE NAVAL SECRETARY,
Department of National Defence,
Ottawa.

NOTE

(1) All applications for Marriage Allowance must be supported by Certificate of Marriage, Birth Certificates in the case of children, or other unimpeachable evidences as to marriage, birth or guardianship.

(2) The Allotment should be equivalent to the nearest dollar of 15 days' pay of rank or rating, and the Marriage Allowance based on a thirty day month.

FOR USE AT HEADQUARTERS ONLY	INITIALS	DATE
Application received		
Entered in Birth Record Ledger		
Entered on M/A Card		
Entered in Allotment Ledger		

A.1067. NAVAL SERVICE DEPT. OF NATIONAL DEFENCE DEC 12 1942 NS 113-M-2105. 18

ORIGINAL

H.Q. File No. P005766

DECLARATION OF ALLOTMENT

List and Number in Ledger	ALLOTTOR	Rank or Rating	Official No.	Daily Rate of Pay
H.M.C.S. "OTTAWA"				
5A2/111	Surname MORRISON	Sto.1.	V27050	$2.00 1.00 M.A.
	Christian Names Harry.			

Section A — **ALLOTMENT NOW DECLARED** 3/9 05d

FULL NAME OF ALLOTTEE	Relationship	ADDRESS	Rate per Month to be charged on ledger	Month to commence. Payable on last working day
Surname MORRISON.	Wife	33 Pharmacy Ave. Toronto, Ont.	~~$61.00~~ $64.00	INC. Jan.1942
Christian Names Phyllis.				

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):—
$61.00	Mrs. P.Morrison	33 Pharmacy Ave Toronto,Ont.	To be increased as in A
			14/1/42

Allotment Declared Ent'd. on Index Card Ent'd. on Allotment Ledgers

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

Allottor's Signature authorizing charges Harry Morrison Sto I
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:—

COMMANDING OFFICER No..... DEC 29 1941 Init. H.M.C.S. "OTTAWA"

D McClure
PAY. SUB. LIEUT., R.C.N.V.R.
Accountant Officer
H.M.C.S. "AVALON"

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

ACCOUNTANT OFFICER HMCS "AVALON" DEC 31 1941 ST. JOHNS, Newfoundland FILE..... Log.....

Forwarded JAN 8 1942

Assigned Pay to Wives	Object No. 111	$ 30.00
Assigned Pay to other Dependents	" 113	
Marriage Allowance	" 116	31.00
Dependents Allowance	" 119	
Other Allotments	" 128	3.00
Total		$ 64.00

S. 63
100M—2-41 (9291)
H.Q. 815-9-63

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

FOR USE AT HEADQUARTERS ONLY

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

DJM/DG

N.S.113-M-2105

AIR MAIL

25

19th September, 1942.

Dear Madam:

It is with deep regret that I must confirm the telegram of the 18th September from the Minister of National Defence for Naval Services informing you that your husband, Harry Morrison, Stoker I, O.N. V.27050, R.C.N.V.R., is missing believed killed in action.

It is in the public interest that the name of his ship and the fact that she has been in action should not find its way to the enemy until such time as it is decided to publish the fact in a Naval Casualty List. It is therefore requested that this news, other than the fact that your husband is missing, may be treated as confidential.

Please allow me to express sincere sympathy with you in your bereavement on behalf of the Minister of National Defence for Naval Services, Chief of the Naval Staff, and the Officers and men of the Royal Canadian Navy, the high traditions of which your son has helped to maintain.

Yours sincerely,

Deputy Secretary, Naval Board.

Mrs. Phyllis Morrison,
435 Leslie Street,
TORONTO, Ont.

LA/IF

File: N.S.115-M-2105

DEPARTMENT OF NATIONAL DEFENCE
- Naval Service -

Ottawa, Canada,
5 October, 1942.
(Date)

30

Sir:

The following casualty has been reported -

NAME	RANK or RATING	NAVAL NO.
MORRISON, Harry	Stoker I,	V.27050, R.C.N.V.R.

DATE OF ENLISTMENT - 2 April, 1941.

DATE OF DISCHARGE - 15 September, 1942.

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 on high seas or elsewhere).

Reason for discharge and - when and where any disability was incurred, or where death occurred. "DEAD" - Missing, believed killed in action. He was on board H.M.C.S. "OTTAWA".

(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 Wife NAME Mrs. Phyllis Morrison

ADDRESS 435 Leslie Street, TORONTO, 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.

OFFICER'S OR RATING'S MONTHLY PAY ALLOTTED TO WIFE AND/ OR DEPENDENT -

$ 80.00 PAID TO Stall in force.

MARRIAGE ALLOWANCE AT $ 1.55 PER DIEM PAID TO Stall in force

DEPENDENTS ALLOWANCE AT $ Nil PAID TO Nil

TOTAL MONTHLY PAYMENT TO - WIFE $ 80.00

Computed by EG 6/10/42 DEPENDENTS $ Nil
Checked by [illegible] 6/10/42

R. Armstrong
SECRETARY,
NAVAL BOARD.
per sa

The Secretary,
The Canadian Pension Commission.

(See reverse side for further instructions.)

Copy to: The Sec., D.P. & N.H.

THE CANADIAN
PENSION COMMISSION

IN REPLY REFER TO
P & N. H.
NO 1313-H

35/1

Copy for information: The Naval Secretary, Department of National Defence, Ottawa.

OTTAWA, October 21, 1942

113-M-2105

P256929

The Chairman,
Dependents' Allowance Board,
Department of National Defence,
O t t a w a.

Mrs. Harry Morrison,
435 Leslie Street,
Toronto, Ontario, widow of
V-27050 Morrison, Harry.
R. C. N. V. R.

The above noted widow has been awarded pension in respect of her husband's death, with effect from the 14th of September, 1942, with additional allowances for her child

noted on ledger
22.10.42

B. Simpson,
for Canadian Pension Commission.

Noted N.P.R.
4/11/42

C.P.C. 65 2M-9-42 Req. 886

File No. N.S. 113-M-2105

DEPARTMENT OF NATIONAL DEFENCE
- Naval Service -

WAR MEMORIAL CROSS

61

Issued to:-

Wife;-

Mother:-

Mrs, A. Morrison,
226 Blantyre Ave.,
TORONTO, Ont.

Date forwarded:- JAN 5 1943

Registered Mail No:- 5849.

File No. 113-M-2105 021470

DEPARTMENT OF NATIONAL DEFENCE
- Naval Service -

WAR MEMORIAL CROSS

6 2

Issued to:-

Wife:- Mother:-

Mrs. Phyllis Morrison
435 Leslie Street,
TORONTO, Ont.

Date forwarded:- JAN 5 1943

Registered Mail No:- 5852.

IN REPLY PLEASE QUOTE

No. N.S.113-M-2105

CANADA

Department of National Defence

Naval Service

Ottawa, Canada.

5 October, 1942.

Sir:

In accordance with Naval Order No. 839, it is notified for your information that the following casualty in the Naval Forces of Canada has been reported:

NAME, RANK/RATING NO.	PLACE, DATE & CAUSE of DEATH	NEXT OF KIN
MORRISON, Harry Stoker I, V.27050, R.C.N.V.R.	Missing, believed killed in action on the 13th of Sept.,1942. He was on board H.M.C.S. "OTTAWA".	Wife: Mrs. Phyllis Morrison, 435 Leslie St., TORONTO, Ontario.

ALLOTMENTS IN FORCE

In favour of		Amount	Initials
Mrs. Phyllis Morrison	435 Leslie Street, Toronto, Ontario.	$ 80.00	E.G. 6/10/42

ESTATES BRANCH OCT 8 1942 E.E. Q OTTAWA. NATIONAL DEFENCE

WILL: Attached.

Yours truly,

R a [illegible]

SECRETARY, NAVAL BOARD.

per ca

Administrator of Estates,
Estates Branch,
Department of National Defence,
OTTAWA.

H.Q. 1010A
500M-1-42 (2970)
N.S. 815-7-1010

113-M-2108

Six copies to be rendered to Naval Service Headquarters

REPORT OF THE DEATH OF AN OFFICER, MAN OR BOY

H.M.C.S. "AVALON" at ST.JOHN'S, Newfoundland

Name(Cristian names in full) Harry MORISON,

Rank or Rating Stoker 1st.Class Official Number V-27050
(If unknown, date of first entry)

Place of birth HULL, England Date of birth 19th.May 1903

Occupation in Civil Life Fireman Religion Church of England

Number of years service in the Navy(Long Service R.C.N. or mobilized service in the aase of R.C.N. (Temp) Reserve ratings)
One year and one hundred and sixty-five days

Date of Death 13th.September 1942. Place of Death At sea

Cause of Death Enemy action/Loss of H.M.C.S."OTTAWA"

Nearest known relative or friend — Name Phyllis, Relationship Wife
Address ~~33 Blakeley Ave.,~~ 435 Leslie Street,
Toronto, Ont.

Date on which the above was informed by ship Not known

Date on which death was registered with local Officials Not known

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

Place of Burial (If known) No burial Date of Burial (If known)

Location, Number etc. of Grave (If known)

Underraker employed (If any)

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

Lieutenant Commander R.C.N.
COMMANDING OFFICER

12th.October 42

The Secretary
Naval Board, 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

STATEMENT OF ACCOUNT

51

True extract from the ledger of H.M.C.S. "OTTAWA" ending 30 Sep 19 42

List 5A2 No. 111 (Name) MORRISON, Harry Rank Rating Sto.1 No. V-27050

When entered F.B. Date of appearance Whither discharged D.D. 13 Sep '42

	$	c.
CREDIT from former account		.52
Pay as Sto.1 (Rank Rating) from 1 July to 30 Sep (92 days at $ 2.00 a day)	184	.00
" M.A. " " " " 13 Sep (92 " 1.55 ")	142	.60
" H.L.M. " " " " 13 Sep (75 " .13 ")	9	.75
" " " " " (" " ")		
" " " " " (" " ")		
Kit Upkeep Allowance July Aug Sep	10	.00
OTHER CREDITS:		
Total credits	346	.87
DEBT from former account		

PAYMENTS:—

	1st	2nd	3rd	4th	5th			
	$ c.	$ c.	$ c.	$ c.	$ c.			
1st month		29.00				Total	29	.00
2nd month						Total		
3rd month						Total		
Allotment 80.00 Charged July Aug Sep							240	.00
Pension deduction (Officers) charged to of								
Hospital stoppages								
Mulcts								
OTHER CHARGES:								
						Total debits	269	.00
LEDGERS R F						Balance Cr. or ~~Dr~~	77	.87
						(Balance Dr. to be shown in red)		

Number of days actually victualled during period mentioned above 75

NOT VICTUALLED

LENT, SICK OR LEAVE	INCLUSIVE DATE FROM	INCLUSIVE DATE TO	No. OF DAYS	SHIP, HOSPITAL, etc., IN WHICH BORNE

Date 13 Nov 19 42

D. Wright

PAY LIEUT RCNVR for ACCOUNTANT OFFICER

C.N.S. 2426
25M—10-40 (7514)
N.S. 815-9-2426

113.M-2105

ACCOUNTS OF MEN DISCHARGED

65-90529

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 MORRISON, Harry *Rating* Stoker I

Official No. V-27050 *H.M.C.S.* "OTTAWA" *List* 5A2/111

*Who** D.D. *on the* 13th September *19* 42

	$	cts.
Net sum due on ledger on account of Wages	77.	87
Proceeds of sale of Effects charged against Wages, brought from the other side		
CASH—		
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)		
Rate of allotment (in words) Eighty Dollars charged to 30th September, 1942.		
Name of ship from which transferred		
Total†	77.	87

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 HMCS "OTTAWA" amounting to a net balance† Creditor of Seventy-Seven dollars Eighty Seven cents.

Dated on board H.M.C.S. AVALON at St. John's, Newfoundland this 13th day of November 19 42

Approved A/Pay.Lieutenant Commander, RCNVR Accountant Officer

D. Wright Pay.Lieutenant, RCNVR { Initials of the Assistant Accountant Officer

Lieutenant Commander, RCN Commanding Officer.

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

ACCOUNT OF SALE OF THE EFFECTS

SOLD before the Mast, the.....day of.....19.....

TO WHOM SOLD		PARTICULARS	Charged in Ledger		Paid for in Cash	
No. Ship's Book in consecutive order	NAME (If any are not sold, state how they are to be disposed of)					
		Total proceeds of sale carried to account on the other side				

.....{Lieutenant or Officer who attended at the sale of the Effects.

The whole of the Effects which were left by the person named on the other side, are enumerated in the above Account and on the other side thereof.*

.....Signature | .....Signature

.....Rank | .....Rank

When the effects are those of an Officer, this statement is to be signed by two of his messmates; when they are those of a Petty Officer, Seaman or Boy, it is to be signed by the Executive Officer and by the Master at Arms or a Ship's Corporal.

DISTRIBUTION OF SERVICE ESTATES

Naval - ~~Military~~ - ~~Air Force~~

Name MORRISON, Harry No: V.27050
Surname Christian Names

Sto.1 : H.M.C.S. "Ottawa" : 13-9-42
~~Rank~~ Unit Date of Death

AMOUNT
L. P. C. $ 77.87

Date March 22, 1943.

Other Credits

Total 77.87

SHARE	RELATIONSHIP	NAME AND ADDRESS	AMOUNT
All	Wife	Mrs. Phyllis Morrison, 435 Leslie Street, Toronto, Ontario.	77.87

AUTHORITY

F.	H.Q. E.No.	DIV.	EST.	VOTE	PRI.	DA OR HQ SUB	OBJ.	AMOUNT	
	9999			81	00	00	001	77	87
	CLASSIFIED BY		EXAMINED BY Bertrand FOR TREASURY OFFICER					77	87
								TOTAL	

Distribution approved and authorized

AUDITED FOR PAYMENT

E. Collyer per WB
for Chief Treasury Officer

L M Firth
(L.M. Firth) Lt.-Col.,
Administrator of Estates.

☐ Navy
■ Army
☐ Air Force
(Mark X opposite Force in which you last served.)

DEPARTMENT OF NATIONAL DEFENCE

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

Application for War Service Gratuity

(Canadian Armed Forces)

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

1. Surname on termination of service MORRISON (Print)

2. Christian Names HARRY (Print)

3. Service No. V.27050 4. Paid rank or rating at date of termination of Service Stoker 1st Class

5. Address, in full, to which payments of gratuity are to be forwarded

Mrs. Phyllis Morrison
435 Leslie Street,
Toronto, Ontario

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

Service (Navy, Army or Air Force)	Service No.	Final Rank or Rating	Date of Commencement of Service	Date of Termination of Service
Navy	V.27050	Stoker 1st Class	April 1st, 1941	Sept. 13th, 1942 (killed)

7. Have you during the present War, while a member of the Canadian Forces, been attached, loaned or seconded to any of the Naval, Military, or Air Forces of His Majesty or of any power allied or associated with His Majesty? No If so, state name of Force or Forces N.A.

8. Have you during the present War, while *not* a member of the Canadian Armed Forces, been appointed to or enlisted in any of the Naval, Military or Air Forces of His Majesty (other than the Canadian Armed Forces)? No If so, state the Force or Forces, with dates of commencement and termination of service. No

NAVAL PERSONNEL RECORDS
JAN 23 1945
4334
WAR SERVICE GRATUITY SECTION

Having now ceased to serve on Active Service, I hereby apply for payment of the War Service Gratuity.

January 11th, 1945 (Date)

Phyllis Morrison (Signature of Applicant)

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

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

H.Q. 1000
15M (ENGLISH)-9-44
N.S. 7570-H.Q. 100

DEPARTMENT OF NATIONAL DEF

BJ NAVY ═══ ARMY ═══ AIR F

STATEMENT OF WAR SERVICE GRATUI

Deceased Member's NAME Harry (CHRISTIAN NAMES) MORRISON (SURNAME) REG

Payee ADDRESS Mrs. Phyllis Morrison
435, Leslie Street
Toronto, Ontario

SERVICE

FINAL RANK OR RATIN

DATE OF TERMINATION OF OVERSEAS SERVICE 13 Sep 42 DATE OF DISCHARGE 13

A. TOTAL QUALIFYING SERVICE		
NO. OF DAYS 530 / 30 EQUAL TO 17 COMPLETE PERIODS AT $7.50		$ 127.5
B. QUALIFYING OVERSEAS SERVICE		
No. OF DAYS 398 LESS 20 INELIGIBLE DAYS, EQUAL TO 378 DAYS @ 25c. PER DAY		94.50
SEE PAR. 2 OVERLEAF FOR EXPLANATION		
SUB TOTAL		XXXXXXXX
C. SUPPLEMENT FOR OVERSEAS SERVICE		
DAILY RATES AT DISCHARGE		
PAY	$ 2.00	
SUBSISTENCE OR LODGING AND PROVISION ALLOWANCE	$ 1.45	
ADDITIONAL PAY H.L.M.	$ .13	
	$	
	$	
DEPENDENTS' ALLOWANCE 1/30 OF $	$ 1.55	35.91
TOTAL	$ 5.13 X7 = $	35.91
NO. OF DAYS 378 / 183	X$	74.18
D. WAR SERVICE GRATUITY		296.18
E. DEDUCTIONS OVERPAYMENT OF PAY AND ALLOWANCES	$	N11
DEPENDENTS' ALLOWANCE AND ASSIGNED PAY	$	
OTHER DEDUCTIONS	$	
F. AMOUNT PAYABLE		296.18
(THIS AMOUNT IS PAYABLE IN MONTHLY INSTALMENTS OF $ EACH)		

THE WAR SERVICE GRANTS ACT, 1944, PROVIDES FOR YOUR RE-ESTABLISHMENT CREDIT IN THE AMOUNT SHOWN IN SUB TOTAL OF 'A.' & 'B.' THIS CREDIT IS AVAILABLE TO YOU IN CERTAIN CIRCUMSTANCES. INQUIRY IN THIS CONNECTION SHOULD BE DIRECTED TO THE DEPARTMENT OF VETERANS' AFFAIRS.

SEE REVERSE SIDE FOR EXPLANATION OF ITEMS A, B & C

G. MONTHLY INSTALMENT NOT TO EXCEED DAILY RATE OF PAY AND ALLOWANCES $ X30 $

INSTALM. PAYABLE	1	2	3	4	5	6	7	8	9
AMOUNT	296.18								
CHEQUE No.	111884								
DATE	10/3/45.								

INSTALM. PAYABLE	10	11	12	13	14	15	16	17	18
AMOUNT									
CHEQUE No.									
DATE									

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	TREASURY DATE
SJD		[illegible]	5/3/45

Dir. of Naval Pay Acctng
SERVICE REPRESENTATIVE

STATEMENT OF WAR SERVICE GRATUITY - NAVY

Deceased Member's Name Harry (Christian Names) MORRISON (Surname)

Payee Mrs Phyllis MORRISON

Address 435, Leslie Street. Toronto. Ont.

Register No. 4334
File No. V27050
Date 23 Jan 45
Service No. V27050
Final Rank or Rating STO. 1/C
Date of Discharge 13 Sep 42

Date of termination of overseas service 13 Sep 42

	$	¢
A. TOTAL QUALIFYING SERVICE No. of days $\frac{530}{30}$ equal to 14 complete periods at $7.50		127 · 50
B. QUALIFYING OVERSEAS SERVICE No. of days 398 less 20 ineligible days equal to 378 days @ 25¢ per day		94 · 50
C. SUPPLEMENT FOR OVERSEAS SERVICE DAILY RATES AT DISCHARGE		
Pay	$ 2.00	
Subsistence or Lodging and Provision Allowance	$ 1.45	
Additional Pay H.L.M	$ .13	
Dependents' Allowance 1/30 of $	$ 1.55	
Total	5 · 13 x 7 = $ 35 · 91	
No. of days $\frac{378}{133}$ x $ 35 · 91		94 · 18
D. WAR SERVICE GRATUITY		296 · 18
E. DEDUCTIONS OVERPAYMENT OF PAY AND ALLOWANCES $ DEPENDENTS' ALLOWANCE AND ASSIGNED PAY $ OTHER DEDUCTIONS $		Nil
F. TOTAL AMOUNT PAYABLE		296 · 18

G. YOUR PORTION OF GRATUITY IS

Dependents' Allowance ~~in issue~~ to you $_____ of $ = $296 · 18
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	Treasury Date

Service Representative

D.N.P.A. CHECK

1	DNJ	6	
2	DNJ	7	
3	[illegible]	8	TBD
4		9	
5		10	

V27050 OFFICIAL NUMBER | FILE NUMBER 113-M-2105 | OFFICIAL NUMBER V27050

NAME MORRISON (Surname) Harry (Given Names) DATE OF BIRTH 19th May, 1903

PLACE OF BIRTH Hull, England OCCUPATION Fireman

RELIGION Church of England EDUCATION

RESIDENCE AT TIME OF ENLISTMENT: Street and No. 33 Pharmacy Avenue Town Toronto Province, etc Onta[illegible]

ENGAGEMENTS

Date (in figures) Day	Month	Year	Period
2	4	41	H.O.

DESCRIPTION

Height	Hair	Eyes	Complexion	Marks or Scars
5' 7"	Brown	Blue	Fair	Appendix scar Crushed two fingers 1st hand

PREVIOUS SERVICE

Served in	Rank or Rating	Dates From	Dates To
30th Field Bat. R.C.A.	Gunner	10-5-24	10-10-26

NEXT OF KIN RELATIONSHIP (in pencil) [illegible] NAME (in pencil) Mrs Phyllis Morrison

ADDRESS (in pencil): Street and No. 435 Kenilworth Ave. Town Toronto Province, etc. Ontario

MEDALS, CLASPS, HURT CERTIFICATES, PRIZE MONEY

Date (in figures) Day	Month	Year	Particulars

EXAMINATIONS, CERTIFICATES, ETC.

Date (in figures) Day	Month	Year	Particulars

Date (in figures) Day	Month	Year	Particulars

BADGES, G.C. OR G.S.

Date (in figures) Day	Month	Year	1st, 2nd or 3rd G.C. or G.S.	Granted Deprived Restored
9.	4	41	Approved to count 2yrs 185 days NPAM towards award of G. S. B.	

FILM NO. WAR 5521-3- DATE

SECOND CLASS FOR CONDUCT

From	To

BRIEF PARTICULARS OF WARRANT OR C.M. PUNISHMENTS AND C.P. CHARGES

Ship or Establishment	Wt. No.	Date (in figures) Day	Month	Year	Brief Particulars of Offence	Punishment

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

O.H.F.Rec. Last Will and Test. 7-4-41

W.S.G. APPLICATION 4334 RECEIVED

H.Q. 35—30M—5-41 (337)
N.S. 815—7-35

V27050 OFFICIAL NUMBER | NAME MORRISON (Surname) Harry (Given Names) | OFFICIAL NUMBER V27050

Ship or Establishment	Rating	From Day	From Month	From Year	Remarks	Character	Efficiency	Date Day	Date Month	Date Year	Non-Sub. Rating	Qualified Day	Qualified Month	Qualified Year	Re-Qualified Day	Re-Qualified Month	Re-Qualified Year
Duty Div. Hdqtrs.	Stoker 1	2	4	41		V.G.	Sat.	31	12	41							
Stadacona	Stoker 1	22	4	41		V.G.	Sat.	13	9	42							
Brandon	Stoker 1	10	8	41													
Stadacona	Stoker 1	26	8	41													
Ottawa	Stoker I	28	8	41													
DISCHARGED	"	13	9	42	"Missing believed killed in action. Casualty List.												

GENERAL REMARKS

Awarded Canadian Memorial Cross to:
Wife-Mrs. Phyllis Morrison,
435 Leslie St., Toronto, Ont.
November 24,1942.
Mother: Mrs. A. Morrison,
226 Blantyre Ave.,Toronto, Ont.
5th January, 1943.

DATE OF BIRTH DY.	MO.	YR.	PLACE BIRTH	CIVIL OCCU. MAIN	SUB	RES. CITY	TOWN	PREV. ENL. DIV.	RANK OR RATE ON ENLISTMENT A	BR.	RANK
19	5	03	22	751	0	30X	56	14 9	10	0	15 04

ENLIST. DATE DY.	MO.	YR.	ACT. SERV. DATE DY.	MO.	YR.	STR. CAT.	ACT. RET. DATE DY.	MO.	YR.	SHIP OR ESTAB.	RANK OR RATE A	BR.	RANK
02	04	41	02	04	41					0330	0	15	04

SENIORITY DY	MO.	YR.	STR. CAT.	NON-SUB A	B	M ST.		CODED	CHECKED
07	04	41	09			20	13-04-72	AD	EP