V9785
PALMER
RALPH BARRY

LA:RK

N.S. 113-P-405

- NAVAL SERVICE -

September 24th, 1942.

29

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
PALMER, Ralph Barry Nelson A/Able Seaman, O.N. V-9785, R.C.N.V.R.	**Missing, believed killed in action to date the 13th of September, 1942. He was on board H.M.C.S. "OTTAWA".**	**Wife: Mrs. Iva Mabel Palmer, 191 Furby Street, WINNIPEG, Man.**

ALLOTMENTS IN FORCE

In favour of:		**Amount.**	**Initials.**
Mrs. Iva M. Palmer,	191 Furby St., Winnipeg Man.	$76.00	LDM
Great West Life Assurance Co.,	Lombard Ave., Winnipeg, Man.	5.00	

WILL: **Attached.**

Yours truly,

R. C. Bonnington

SECRETARY, NAVAL BOARD.

per LA

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

LA:RK

File: N.S. 113-P-405

- 3 -

DEPARTMENT OF NATIONAL DEFENCE
- Naval Service -

Ottawa, Canada,

September 24th, 1942.
(Date)

Sir:

28

The following casualty has been reported -

NAME	RANK or RATING	NAVAL NO.
PALMER, Ralph Barry Nelson	Acting Able Seaman,	V-9785, R.C.N.V.R.

DATE OF ENLISTMENT - March 13th, 1940.(Active Service 14th May, 1940.)

DATE OF DISCHARGE - 13th 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. Iva Mabel Palmer,

ADDRESS 191 Furby Street, WINNIPEG, Manitoba.

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

$ 76.00 PAID TO Still in force

MARRIAGE ALLOWANCE AT $ 1.15 PER DIEM PAID TO - Still in force

DEPENDENTS ALLOWANCE AT $ Nil PAID TO Nil

TOTAL MONTHLY PAYMENT TO - WIFE $ 76.00

Computed by DM 24/9/42 DEPENDENTS $ Nil
Checked by 24/9/42

R. Livingston
SECRETARY,
NAVAL BOARD.
per DM

The Secretary,
The Canadian Pension Commission.

Copy to the Sec. D.P. & N.H.

(See reverse side for further instructions.)

REMARKS:

NOTES: This form to be accompanied by documents only in cases of (a) discharge medically unfit (b) Death in Canada (c) Death anywhere if question of misconduct arises. Report of Board of Inquiry to be forwarded if disability or death is due to accidental injury in Canada or possible misconduct -- If Documents are not readily available this form should be sent at once with advice that documents will follow as soon as possible.

No. A. 829
"K" ORIGINAL

P 22580

MAR -3 1941
N 113-P-405

H.Q. File No.

DECLARATION OF ALLOTMENT

List and Number in Ledger	ALLOTTOR	Rank or Rating	Official No.	Daily Rate of Pay
"Stadacona" 5-2-1444	346010			
	Surname PALMER	O/Sea	V 9785	$ 1.50
	Christian Names Ralph Barry N	RCNVR		.75

Section A ALLOTMENT NOW DECLARED

FULL NAME OF ALLOTTEE	Relationship	ADDRESS	Rate per Month to be charged on ledger	Month to commence. Payable on last working day
Surname PALMER	WIFE	191 Furby St, WINNIPEG, Man	$ 46.00	MARCH
Christian Names Mrs. Iva Mabel				

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):—
$ 45.00	Mrs. Iva Mabel PALMER	WINNIPEG, Man	INCREASED. As in Sec "A"
$ 5.00	Great West Life Assce	WINNIPEG, Man	TO BE CONTINUED
		NIL	

Allotment Declarations	Initials	Date
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 Ralph Barry N. Palmer
O/Sea 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 No.	
Assigned Pay to Wives	111	$ 22.50
Assigned Pay to other Dependents	113	
Marriage Allowance	116	23.25
Dependents Allowance	119	.25
Other Allotments	122	
Total		$ 46.00

Paymaster Sub-Lieutenant RCNVR
for Accountant Officer

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

H.M.C.S. "Stadacona"

Forwarded 8/3/41

S. 63
40M—4-40 (4787)
N.S. 815-9-63

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

FOR USE AT HEADQUARTERS ONLY

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

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 Palmer, Ralph *Rating* A.B.

Official No. V-9785 *H.M.C.S.* OTTAWA *List* 5II-550

*Who** D.D. *on the* 13 Sep 42 *19*

			$	cts.
Net sum due on ledger on account of Wages			45	65
Proceeds of sale of Effects charged against Wages, brought from the other side				
CASH—	$	cts.		
Proceeds of sale of Effects, paid for in Cash, brought from the other side				
Found amongst Effects				
Debts collected §				
Refund $10.00 Aug. + Sept. allot. from Great West Life Ass. Co. Ch. 60-11621			10	00
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) Seventy-six and Five dollars charged to 30 Sep				
Name of ship from which transferred HMCS "Ottawa"			55	65
Total† Creditor			~~45~~	~~65~~

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 Forty-five ~~dollars~~ - - - - dollars - - -Sixty-five - - cents.

Dated on board H.M.C.S. Avalon at St. John's Nfld. this thirteenth day of November 19 42

Approved A/Pay Lieutenant Commander, RCNVR Accountant Officer

H. Wright Pay Lieut, RCNVR. { Initials of the Assistant Accountant Officer

Commanding Officer.

Lieutenant, Commander, RCN

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.

RR/RM

H. Q. No. 61

N.S. 113-P-405
F.D.1768

Can. S. 2041
25M-7-41 (1164)
N.S. 815-9-2041

DUPLICATE

Number.....

APPLICATION FOR PAYMENT OF MARRIAGE ALLOWANCE

33

List and Number in Ledger	NAME	Rank or Rating	Official No.	Daily Rate of Pay
H.M.C.S. "OTTAWA"	Surname PALMER Christian Names Ralph Barry N. (deceased)	A.B.	V-9785	$1.85

NAME OF WIFE OR GUARDIAN	ADDRESS
Surname Palmer Christian Names Iva Mabel	191 Furby Street, Winnipeg, Manitoba.

CHILD OR CHILDREN

Name	Sex	Date of Birth	Attains majority
(1) John Barry	Male	29 August 1942	29 August 1958
(2)			
(3)			
(4)			

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

Signed in the presence of:

..... Signature NOT AVAILABLE

Rank or Rating.....

Marriage Allowance in force per diem $1.15

Marriage Allowance claimed per diem 1.55

Claim has been supported with the necessary documentary evidence and the above amount has been approved for payment Birth Certificate produced, examined and found correct.

L. Lemieux
J. S. N. P. A. *Commanding Officer.*

This amount per day has been credited from 29 August 42

at List.....No.....Ledger ending.....19.....

Allotment of $.....in force from the month of.....19.....in accordance with regulations One special payment of $13.20 to cover Marriage Allowance arrears for child from 29 August 1942 to 30 September 1942 - paid by Headquarters.

S. N. P. A. for *Accountant Officer.*

Marriage Allowance Enc. No.....with ledger of H. M. "AVALON"

ended.....19.....

Original forwarded September 28, 1942

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

181628

DEPARTMENT OF NATIONAL DEFENCE

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

NAVAL PERSONNEL RECORDS
NOV 1 1944 862
WAR SERVICE GRATUITY SECTION

Application for War Service Gratuity

(Canadian Armed Forces)

113-P-

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 PALMER (Print)

2. Christian Names RALPH BARRY NELSON (Print)

3. Service No. ~~V 9785~~ 4. Paid rank or rating at date of termination of Service

5. Address, in full, to which payments of gratuity are to be forwarded
Mabel Ira Palmer
Ste D St Regis Apts
561 McDermot Ave, Winnipeg, Man

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 9785	A.B. Seaman	N.A.	Sept 13/42

Send 39

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

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

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

Oct. 26/44 (Date)

Mabel Ira Palmer (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.

widow

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.

MEMORANDUM FOR **P. 64**

Mrs. Iva Mabel Palmer,
191 Furby Street,
Winnipeg, Man.

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-P-405 FD.275

DEPARTMENT OF NATIONAL DEFENCE
OTTAWA, ONT.

September 29, 1942. 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

PALMER, Ralph Barry Nelson, A/Able Seaman.

No. V.9785, 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.

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

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 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		Iva Mabel Palmer	29	191 Furby St Winnipeg
2	Children of the Deceased and dates of their Births		John Barry Palmer	1/12	as above
3	Father of the Deceased		John Charles Nelson Palmer.	53	191 Furby St Winnipeg
4	Mother of the Deceased		Iva Marjorie Palmer	51	Same
5	Brothers of the Deceased	Full Blood	Frank Jeffrey Palmer	31	C.A (A.)
			Charles Harry "	29	C.A.(A.)
			Ronald George "	27	Truro St. St James, Man
		Half Blood			
6	Sisters of the Deceased	Full Blood	Blanche Valyie Palmer	20	191 Furby St Winnipeg
		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
			None		

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?	Ralph Barry Nelson PALMER.
11	Give the month and year of his birth.	21st January 1917
12	Where and when were his parents married?	England 1910
13	If deceased was married, state place and date of marriage.	St James, Man. 6th July 1940
14	Did he leave a Will? If so, a copy should be attached hereto.	Yes.
15	Did he leave a bank account? If so, give full particulars.	No.
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.	191 Furby St. Winnipeg. Man

PARTICULARS OF DOMICILE

18	Where was deceased born?	London, England
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.	England - one year. The Manitoba Since
20	What was the nature of his employment?	Postal Clerk Temporary
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?	City of Winnipeg as far as ~~as~~ known

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.	No.
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.	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, 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 *widow of the deceased.

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

Iva Mabel Palmer {Signature of Informant}

CERTIFICATE

I hereby certify that, to the best of my knowledge and belief Mrs. Iva Mabel Palmer {Name of Informant} is the *widow 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.

*See above

Dated at Winnipeg this 2nd day of October 1942

Signature of Clergyman, Priest, Magistrate, Commissioner or Notary Public } C. V. Whitehead Qualification Comm. for Oaths C.P.C.

Address Deer Lodge Hospital, St James, Man.

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

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	FILE No.
PALMER	Ralph Barry Nelson	V-9785	A.B.		

WAR SERVICE BADGE CLASS) No. Nil

DATE DESPATCHED:

ADDRESS:

CAMPAIGN MEDALS	REGISTRATION NUMBER AND DATE DESPATCHED
1939-45 Star	5517 24/11/49
~~C.V.S.M. & Clasp~~	
War Medal	

(THE REVERSE TO BE USED FOR ESTATE PURPOSES)

DVA 056

MEDALS AND MEMORIALS—DECEASED PERSONNEL

RCNVR "OTTAWA" Apr./43.

REGISTRATION No. DATE OF DESPATCH

MEMORIAL BAR

(1) DATE DESP

REGN. NO 273

(1) MEDALS

PERSON ENTITLED TO Mrs. I.M. Palmer - Widow

ADDRESS: ~~191 Furby St.~~, Ste "D" - The Regis Apts McDermot Avenue Winnipeg, Man. 1949

(2) MEMORIAL CROSS

WIDOW Mrs. I. M. Palmer

ADDRESS: 191 Furby Street WINNIPEG, Manitoba

(2) 5 January 1943

(3) MEMORIAL CROSS

MOTHER Mrs. Nora Palmer

ADDRESS: 191 Furby Street WINNIPEG, Manitoba

(3) 5 January 1943

1	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

V 9785 OFFICIAL NUMBER

NAME PALMER (Surname) Ralph Barry Nelson (Given Names)

OFFICIAL NUMBER V9785

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
Winnipeg Div. Str.	Ord. Smn.	13	3	40		V.G.	Sat.	31	12	41							
Duty Div. Hdqs.	" "	14	5	40		V.G.	Sat.	31	12	40							
Stadacona	" "	3	8	40		V.G.		13	9	42							
Venture	" "	15	3	41													
Stad	" "	2	5	42													
	A/A.B.	14	5	41	3040-11247												
Ottawa	"	16	5	42	208007												
DISCHARGED	"	13	9	42	Missing, believed Killed in Action. (Casualty List.)												

GENERAL REMARKS

CANADIAN MEMORIAL CROSS:
Wife: Mrs. Iva Mabel Palmer,
191 Furby St.,
WINNIPEG, Manitoba.

CANADIAN MEMORIAL CROSS: 5-1-43.
Mother: Mrs. Nora Palmer,
191 Furby St.,
WINNIPEG, Manitoba.
CANADIAN MEMORIAL CROSS: 6/3/43.
Wife: Mrs. Iva Mabel Palmer,
191 Gurby St.,
WINNIPEG, Manitoba.

DATE OF BIRTH DY.	MO.	YR.	PLACE BIRTH	CIVIL OCCU. MAIN	SUB	WEIGHED	PERM. RESIDENCE PROV.	COUN.	POST. SERIAL	STR. DIV.	RANK OR RATE A	BR.	RANK
21	1	17	22	RRR	0	30	X 6	06	06	0	06	0	08 75

ENLIST. DATE DY.	MO.	YR.	ACT. SERV. DATE DY.	MO.	YR.	STR. CAT.	ACT. SERV. DATE DY.	MO.	YR.	SHIP OR ESTAB.	RANK OR RATE A	BR.	RANK
13	03	40	14	05	40					0350	1	08	94

SENIORITY DY.	MO.	YR.	STR. CAT.	NON-SUB A	B	M. ST.		CODED	CHECKED
14	05	41	04	00	00	20	13 09 42		

V 9785 OFFICIAL NUMBER | FILE NUMBER 113-P-405 | OFFICIAL NUMBER V 9785

NAME PALMER (Surname) Ralph Barry Nelson (Given Names) DATE OF BIRTH 21 Jan. 1917

PLACE OF BIRTH London, Eng. OCCUPATION Unemployed

RELIGION Anglican EDUCATION

RESIDENCE AT TIME OF ENLISTMENT: Street and No. 191 Furby St. Town Winnipeg Province, etc Man.

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
13	3	40	H.O.	5'5½"	Brown	Hazel	Fair	Scar on Lt. Arm. and Lt. leg.				

NEXT OF KIN RELATIONSHIP (in pencil) Wife NAME (in pencil) Mrs. Ora Mabel Palmer

ADDRESS (in pencil): Street and No. 121 Morris Street Town Winnipeg Province, etc. Man.

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	
				23	7	40	Passed E$. one R.C.N.V.R.				
				15	3	41	Marked "TR"				

Badges, G.C. or G.S.					Brief Particulars of Warrant or C.M. Punishments and C.P. Charges						
Date (in figures)			1st, 2nd or 3rd G.C. or G.S.	Granted Deprived Restored	Ship or Establishment	Wt. No.	Date (in figures)			Brief Particulars of Offence	Punishment
Day	Month	Year					Day	Month	Year		

FILM NO. WSR 5194-6
DATE

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

O.H.F. Received

Last Will. & Test. 2-8-40.

Second Class For Conduct	
From	To

W.S.G. APPLICATION 862 RECEIVED

H.Q. 35—30M—5-41 (337)
N.S. 815—7-35

14-5-40 Chest x-raying Mo Bowering Capt RCAMC

Can. B. 207

20M—11-39 (3063)
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)

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 Ralph Barry Nelson PALMER O.N. V9785 white rose

‡candidate for entry as Ord. Sea. --Active Service

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.

Dated at Winnipeg, Manitoba the 14th of May 1940

Examining Medical Officer

*Delete one

(Rank) Lt Col

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)
23 years 4 months	lbs. 133	ft. ins. 5' 5 1/2"	good	inches (a) maximum 36 (b) minimum 33 (c) mean 34	right eye 20/25 left eye 20/20 colour vision normal	vac. 1918	normal	normal	normal	normal	normal	normal	1 deficient 1 defective normal	normal

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

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 as may be authorized.

Ralph B. N. Palmer

Signature of Candidate

When a Candidate is subject to a defect or disability, the following Certificate is to be filled up

This Candidate is the subject of .....

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

*Delete one

Examining Medical Officer

(Rank) .....

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

Personnel Records Division.
1. Noted in Records ✓
2. Index Card. ✓
3. Non-Sub. Card
4. Statistical Card ✓
5. Ronco Strip ✓
6. Pension Card
7.
8.
DATE 20/3/40 L.K.

20/K.

CANADA

N. V. 5
3M—8-39 (1761)
N.S. 815-11-5

NATIONAL DEFENCE
MAR 16 1940
H.Q. 115-P 405
CANADA
11121

ATTESTATION FORM

FOR MEN OF THE ROYAL CANADIAN NAVAL VOLUNTEER RESERVE

SURNAME PALMER OFFICIAL NO. 9785 3

CHRISTIAN NAMES Ralph Barry Nelson MARRIED, SINGLE or WIDOWER Single

PERMANENT ADDRESS	RELIGION
191 Furby Street, Winnipeg, Manitoba.	Anglican.

DATE OF BIRTH	PLACE OF BIRTH	NAME AND ADDRESS OF NEXT OF KIN
21 Jan., 1917.	Town London, County, Province England	Charles Nelson Palmer (father) (same)

PERSONAL DESCRIPTION ON ENROLMENT

HEIGHT	CHEST MEASUREMENT	HAIR	EYES	COM-PLEXION	WOUNDS, SCARS, MARKS
Feet 5 Inches 5 1/8	Inflated 36 Deflated 33 Mean 34 1/8	Brown	Hazel	Fair	Scar on left arm and left leg.

DATE OF ENROLMENT	RATING ENROLLING FOR	TRADE OR CALLING AND IN WHOSE EMPLOY
13 March, 1940	Ord.Sea.	Unemployed.

(B) DECLARATION TO BE MADE BY APPLICANT

I hereby declare as follows:—

(1) That I am a British Subject domiciled in Canada.

(2) That I am desirous of being enrolled as a member of the Royal Canadian Naval Volunteer Reserve Force, and that I accept and agree to abide by the rules of the said Force.

(3) That * (a) I have never served, and am not serving in any Naval, Military, Reserve, or Territorial Force.

* (b) I served in ~~for the period shown, and attach my record of service, in corroboration of this statement.~~

* Cross out Clause not applicable.

SERVED IN	RANK	FROM	TO

(c) I have never been rejected 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 WINNIPEG 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 13th day of March, 1940.

Signature of applicant Ralph B. N. Palmer

(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 13th, day of March, 1940.

J. R. Bingham Lieut
for Signature of Commanding Officer.

(D) OATH OF ALLEGIANCE

I, Ralph Barry Nelson Palmer 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 Ralph B. N. Palmer

Witness J. R. Bingham ~~Lieut~~

Date 13 March, 19401 Rank Lieutenant

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

(E) CERTIFICATE OF DIVISIONAL COMMANDING OFFICER

Ralph Barry Nelson Palmer 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 WINNIPEG Division of the R.C.N.V.R.

J. R. Bingham Lieut
for 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.

H.Q. 1000
15M (ENGLISH)-9-44
N.S. 7870-H.Q. 100

ID

DEPARTMENT OF NATIONAL DEFENCE

NAVY ═══ ARMY ═══ AIR FORCE

4
NAVY

STATEMENT OF WAR SERVICE GRATUITY

Deceased member's
NAME Ralph Barry N. (CHRISTIAN NAMES) PALMER (SURNAME)
Payee: Mrs. Mabel Iva PALMER
ADDRESS Ste. D., St. Regis Apts., 561 McDermot Ave., Winnipeg, Man.

REGISTER NO. 862
FILE NO. NSV-9785
DATE 28 Feb/45
SERVICE NO. V-9785
FINAL RANK OR RATING A.B.
DATE OF DISCHARGE 13 Sep/42

DATE OF TERMINATION OF OVERSEAS SERVICE 13 Sep/42

	$ ¢
A. TOTAL QUALIFYING SERVICE NO. OF DAYS 853 / 30 EQUAL TO 28 COMPLETE PERIODS AT $7.50	210.00
B. QUALIFYING OVERSEAS SERVICE NO. OF DAYS 121 LESS 13 INELIGIBLE DAYS, EQUAL TO 108 DAYS @ 25c. PER DAY (SEE PAR. 2 OVERLEAF FOR EXPLANATION)	27.00
SUB TOTAL	
C. SUPPLEMENT FOR OVERSEAS SERVICE	
DAILY RATES AT DISCHARGE: PAY $1.85; SUBSISTENCE OR LODGING AND PROVISION ALLOWANCE $1.45; ADDITIONAL PAY H.L.M. $ .13; $; $; DEPENDENTS' ALLOWANCE 1/30 OF $ $1.15; TOTAL $4.58 X7 = $32.06; NO. OF DAYS 108 / 183 X$ 32.06	18.92
D. WAR SERVICE GRATUITY	255.92
E. DEDUCTIONS OVERPAYMENT OF PAY AND ALLOWANCES $; DEPENDENTS' ALLOWANCE AND ASSIGNED PAY $; OTHER DEDUCTIONS $ NIL	
F. AMOUNT PAYABLE (THIS AMOUNT IS PAYABLE IN MONTHLY INSTALMENTS OF $ EACH)	255.92

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	255.92								
CHEQUE No.	111835								
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]	PK Bryce	2/3/45

SERVICE REPRESENTATIVE

for Dir. Naval Pay. Acting.

VERIFICATIO

CAMPAIGN STARS, DEFENCE MEDAL, WAR

NAVAL GENERAL SERVICE

NAME IN FULL PALMER, Ralph Barry Nelson RANK/RATING .....

SHIP	SERVICE			AREA		
	FROM	TO	DAYS		FROM	TO
Winnipeg Div	14-5-40	2-8-40	—			
Ottawa	16-5-42	13-9-42	121	Atlantic		
Discharged "	Dead "					
to date	13-9-42					

VERIFIED BY E. Parker .....

VERIFIED BY .....

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

y: Nelson.....RANK/RATING ..........A.B..........OFF.NO. ......V-9785..........ADDRESS ....

S	AREA	QUALIFYING PERIODS IN DAYS							STARS MEDALS	✓ 1 2	ELIGIBLE FOR AWARDS OF
		FROM	TO	1939-45	ATLANTIC	DEFENCE	CLASP C.V.S.M.	1915 MEDAL			
									1939-45	1	Star
									ATLANTIC		
	Atlantic.										
									FRANCE G.		
									AFRICA		
									PACIFIC		
									BURMA		
									ITALY		
									DEFENCE		
									C.V.S.M.	2	@ Clasp
									" CLASP		
									WAR 1945	1	Medal
									WAR 1915		

VERIFIED BY ....

. VERIFIED BY ....

....
DIR. OF PERSONNEL RECORDS.

IN REPLY PLEASE QUOTE

No. N.S. 113-P-405

CANADA

Department of National Defence

Naval Service

Ottawa, Canada.

230904

September 24th, 1942.

~~230848~~

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:

ESTATES BRANCH SEP 26 1942 H.Q. OTTAWA. NATIONAL DEFENCE

NAME, RANK/RATING NO.	PLACE, DATE & CAUSE of DEATH	NEXT OF KIN
PALMER, Ralph Barry Nelson A/Able Seaman, O.N. V-9785, R.C.N.V.R.	Missing, believed killed in action to date the 13th of September, 1942. He was on board H.M.C.S. "OTTAWA".	Wife: Mrs. Iva Mabel Palmer, 191 Furby Street, WINNIPEG, Man.

ALLOTMENTS IN FORCE

In favour of:		Amount.	Initials.
Mrs. Iva M. Palmer,	191 Furby St., Winnipeg Man.	$76.00	HDM.
Great West Life Assurance Co.,	Lombard Ave., Winnipeg, Man.	5.00	

WILL: Attached.

Yours truly,

R. A. Bonnington

SECRETARY, NAVAL BOARD.

per LA

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

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

113-P-405

60

Please cable to be renewed to Naval Service Headquarters

NAME OF DECEASED OR DECEASED, RANK, NO.

S.S. "AVALON" at St. John's Newfoundland

Name (Christian names in full) Ralph Harry Nelson PALMER

Rank or Rating. ABLE SEAMAN ..... Official Number. V-9785
(If unknown, date of first enlistment)

Place of Birth. London, England. .... Date of Birth. 21 January, 1917.

Occupation in civil life. ENGINEER NONE ... Religion. ANGLICAN

Number of years service in the Navy (Long service G.S. or Total service in the case of R.C.N. (Temp) Reserve ratings)

- - - - - - TWO YEARS, 123 DAYS (ACTIVE SERVICE) - - - - - -

Date of Death 13th September, 1942. ... Place of Death AT SEA

Cause of Death ENEMY ACTION - LOSS OF H.M.C.S. "OTTAWA"

(Nearest kin or relative or friend.) Name Iva Babel Palmer ..... Relationship WIFE

Address ~~121 North Street, Halifax, N.S.~~ 191 Furby St., Winnipeg, Man.

Date on which the above was informed by ship NOT KNOWN

Date on which death was registered with local officials - - - - - -
In the case of Imperial Service men, whether Active Service, Regular or Reserve, date on which the prescribed return was rendered to the Registrar General in London, Edinburgh or Dublin according to the nationality

- -

Place of Burial NO BURIAL ..... Date of Burial - - - - - -
(If known) (If known)

Location, Number etc. of Grave -
(If known)

Undertaker employed -
(If any)

If borne for discipline only, state D.I.O. or invalided - - - - - - - - -

Lieutenant Commander R.C.N.
COMMANDING OFFICER

The Secretary
Naval Board, Ottawa, Canada.

9th OCTOBER 42
..... 19.....

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

Distributions: File, Pro. N.S. Con. Dom. Stat., Register.

C.F.S. 1121

SERVICE CERTIFICATE

N. V. No. 17
3M—10-39 (2176)
N.S. 815-11-17

OF

Name in full PALMER, Ralph Barry Nelson Company Winnipeg Division

ROYAL CANADIAN NAVAL VOLUNTEER RESERVE

Training Headquarters | Official Number V.9785

Date of Birth 21st Jan. 1917

Place of Birth London, England

Usual Place of Residence 191 Hardy Street Winnipeg Manitoba

Trade brought up to None

Name and Address of next of kin (Wife) Eva Mabel Palmer, - 221 Morris St Halifax

Religious Denomination Anglican

Can Swim

O.H.F.

PARTICULARS OF SERVICE

Date of Actual Volunteering	Date of Enrolment	Period Volunteered for	Rating on Enrolment	Medals, Decorations, Etc.	
				Date Received	Nature of Decoration
	1940 13th March	Hostilities	Ord. Sea.		

PERSONAL DESCRIPTION

	Height		Complexion	Hair	Eyes	Marks, Wounds, Scars
	Feet	Inches				
On Entry	5	5½	Fair	Brown	Hazel	Scar on left arm and left leg.
On attaining 28 years						
Further Description if necessary						

NAVAL TRAINING AND DRI

Year	Ship's Name	List and No.		Rating	From	To	Character	Ability	Total No. of Drills	Boun Date
1940	Winnipeg Division			Ord. Sea.	13/3/40	13/5/40	V.G.	Sat.	42	

EXAMINATIONS AND NOTATIONS OTHER THAN THOSE ENTERED ON

Date	Wounds and Hurt Certificate. Meritorious Service. Special Recommendations	Captain's Signature	Date	Partic
11 apl '41	Issued SCTW # B 17643.		3 July '40	Passed E.
			15 Mch '41	"T R

NAVAL TRAINING AND DRILLS

To	Character	Ability	Total No. of Drills	Bounties		Efficient	Cause of Discharge—Remarks	Captain's Signature
				Date	Amount			
/5/40	V.G.	Sat.	42			Yes	To Active Service	H.G. Nares.

D NOTATIONS OTHER THAN THOSE ENTERED ON G. AND T. HISTORY SHEET

s	Captain's Signature	Date	Particulars	Captain's Signature	Date	Particulars	Captain's Signature
		3 July '40	Passed E.T. One.	W. Evans	DEC	1940 Issued Ident. Card No.	17165
		15 Mch '41	"T R"				

ACTIVE SERVICE

Ship's Name	List and No.		Rating	From	To	Character	Ability	Captain's Signature
WINNIPEG Division			Ord.Sea.	14/5/40	2/8/40	V.G.	Sat	H.G. Nares.
"Stadacona	—	—	—..—	3 Aug 40	31 Dec '40	V.G	Sat.	J. Edwards.
"Stadacona"	—	—	Ord. Smn	1 Jan '41	14 Mch 41.			
Venture			—..—	15 Mch 41	13 May '41			!
—..—			A.B.	14 May '41	31 Dec '41	V.G.	Sat.	[illegible]
—"—			—"—	1 Jan '42	31 Apl '42			
Stadacona			—"—	1 May '42	15 May 42			
Ottawa	✓		—"—	16 May 42	13 Sep '42			
—"—	✓		A.B.	14 Sep. '42	13 Sep 42	D. D.		
						V.G	—	[illegible]

Good Conduct Badges			Service Badges		Second Class for Conduct		Time Forfeited			
Date	1st, 2nd, 3rd	Granted, Deprived, Restored	Date	Number	From	To	From	P.D.G. C.P. W.T.	Date	To

862

TO: D.N.P.A.

FILE No. N.S. V-9785

"WAR SERVICE GRATUITY"

COMPUTATION OF SERVICE

SURNAME	CHRISTIAN NAMES IN FULL	OFFICIAL NUMBER	RANK OR RATING ON DISCHARGE
PALMER	Ralph Barry Nelson	V-9785	A.B.

CAUSE OF DISCHARGE: Dead / HMCS Ottawa

Application made by wife

365
365
18 May
30 June
31 July
31 Aug
13 Sep
853

TOTAL SERVICE

Date of Active Service 14 May '40

Date of Discharge 13 Sep '42

Total No. of Days 853

Less non qualifying service nil

Total Days 853

OVERSEAS SERVICE

% Total No. of Days 121

Less non qualifying service nil

Total Days 121

Record of Service in other Forces (per Naval Records)

Branch of Service —

Date of Active Service —

Date of Discharge —

& % Overleaf

Computed By
Checked By

DATE: NOV 2 1944

for (H.B. Money)
Payr. Cmdr. R.C.N.R.
Officer-in-Charge
Naval Personnel Records

Applicant Widow -

7. Overseas Service

	From	To	Days
Ottawa	16 May '42	13 Sep '42	121

16 May
30 June
31 July
31 Aug
13 Sep
121

862

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

Name of Deceased Member Ralph Barry Nelson PALMER Rank or Rating A/A.B. O.No. V-9785

1. Dependents' Allowance and Assigned Pay in force at date of death:

MA ~~D.A.~~	1.15	Mrs. Iva Mabel Palmer
allott ~~A.P.~~	76.00	191 Furby St., Winnipeg, Man
D.A.	—	
A.P.	—	

2. Pension awarded or being awarded to: wife - as above

3. War Service Gratuity Application(s) received from: Mrs. Iva Mabel Palmer (wife) Ste D. St. Regis Apts. 561 McDermot Ave., Winnipeg, Man.

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: Mrs. Iva Mabel Palmer (wife) address - as above. In the proportion of: 1

- and -

to: In the proportion of: 1

( ) 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 13 Feb 45

for D.N.P.A. (G) EPP

STATEMENT OF WAR SERVICE GRATUITY - NAVY

Deceased Member's Name Ralph Barry N. (Christian Names) PALMER. (Surname)

Payee Mrs Mabel Iva PALMER.

Address STE. "D" St Regis Apts. 561, McDermot Ave, Winnipeg

Register No. 862
File No. V9785
Date 3 Nov. 44
Service No. V9785
Final Rank or Rating A.B.
Date of Discharge 13 Sep 42.

Date of termination of overseas service 13 Sep 42

	$ ¢
A. TOTAL QUALIFYING SERVICE No. of days 853/30 equal to 28 complete periods at $7.50	210.00
B. QUALIFYING OVERSEAS SERVICE No. of days 121 less 13 ineligible days equal to 108 days @ 25¢ per day	27.00
C. SUPPLEMENT FOR OVERSEAS SERVICE	~~[illegible]~~

DAILY RATES AT DISCHARGE

Pay		$ 1.85
Subsistence or Lodging and Provision Allowance		$ 1.45
Additional Pay	H.L.M	$ .13
Dependents' Allowance 1/30 of	$	$ 1.15
Total		4.58 x 7 = $ 32.06

No. of days 108/183 x $ 32.06 — 18.92

D. WAR SERVICE GRATUITY	255.92
E. DEDUCTIONS OVERPAYMENT OF PAY AND ALLOWANCES $ DEPENDENTS' ALLOWANCE AND ASSIGNED PAY $ OTHER DEDUCTIONS $	
F. TOTAL AMOUNT PAYABLE	255.92

G. YOUR PORTION OF GRATUITY IS

~~Dependents' Allowance in issue to you $ _____ of $ _____~~ = $ 255.92

~~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 Dvg
2 Dvg
3 Dvg
4
5
6
7
8
9
10

See NB
Decorations
Dealt
27.3.43

191 Derby St.
Winnipeg Man
Mar. 23rd. 1943.

Mr. M. MacDonald,
Minister of National Defence
for Naval Services,
Ottawa, Ont.

Dear Sir:

I am going to ask a special favor of you and I feel sure you will comply.

I have had the great misfortune to loose the memorial cross in memory of my late husband A. Seaman Ralph B. N. Palmer, who lost his life on H.M.C.S. Ottawa.

I cherished this memorial dearly and trust you will have another engraved for me, that I may keep for my baby son, whose father was never spared to see him.

I will gladly pay any expenses involved.

Yours respectfully,
Mrs Iva Palmer.

MPR.

THE GREAT-WEST LIFE ASSURANCE COMPANY

WINNIPEG, CANADA December 18 1942.

13
53

Naval Secretary
Department of National Defence
Naval Service
Ottawa, Ont.

P299358

Dear Sir:

113-P405

Our Policy P 708 998
Ralph B. N. Palmer
Regimental Number V9785
R.C.N.V.R.
Your File No. N.S.113-P-405.FD.275.

The wife of this policyholder, Mable Iva Palmer, has just interviewed us regarding a claim arising out of her husband's death as a result of the loss of the H.M.C.S. Ottawa. It will be appreciated if you will arrange to forward the usual certificate of death to assist us in disposing of the claim.

As our policy contains a war clause it will be of some importance to us to know where the loss of the Ottawa occurred and particularly whether it was within or outside the territorial limits of the Dominion. Any information you can give us on this point will be appreciated.

Yours very truly

E.E.Springett

E.E.Springett:VD Claims Department.

LA:HH
REDRAFT/AM

N.S. 113-P-405

January 4th, 1942.

56

THIS IS TO CERTIFY that according to official information Ralph Barry Nelson Palmer, Able Seaman, Official Number V-9785, Royal Canadian Naval Volunteer Reserve, is missing, believed killed in action to date the 13th of September, 1942. He was on board H.M.C.S. "OTTAWA" which has been reported lost.

Rel

SECRETARY, NAVAL BOARD.

OCCUPATIONAL HISTORY FORM

113-P-405

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

70

PLEASE LEAVE BLANK

Section A—GENERAL INFORMATION

1. (a) Print name in full: PALMER RALPH BARRY N. (b) Reg'l. No.: V9715
2. (a) Arm of service: NAVY (b) Unit: RCNVR (c) Rank: A. Sea.
3. (a) Date of birth: 21/1/17 (b) Have you any dependents? 1 (c) Place of residence at time of enlistment: WINNIPEG
4. (a) Place of enlistment: WINNIPEG (b) Date of enlistment: 13/12/40

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.): 3 yrs High 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): NOT 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? No
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: SUBWAY GARAGE
15. Give details of last employer, if any: Name: POST OFFICE Address: WINNIPEG
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: Address:
19. Nature of employer's business (for instance, "farmer", or "building contractor", or "boot factory", or "iron foundry", or "retail store", etc.):
20. (a) Your specific occupation: (b) Number of years' experience at this occupation with any employer:
21. (a) Did your employer promise definitely to give you employment on discharge? (b) Did your employer refuse to promise you employment on discharge? (c) Do you wish to return to your former employment?

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

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

Section F—PARTICULARS OF FARMING EXPERIENCE

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

Section G—MISCELLANEOUS

26. Have you made any arrangements other than indicated above, for re-establishment in civil life after discharge?
27. If so, state nature of your plans (for example, do you plan to return to school, or have you been assured of a job, etc.):
28. State any employment preference or ambition you may have, other than indicated elsewhere in this form: PASSED POST OFFICE EXAM FOR MAIL PORTER.

O.K.

O.H.F.

DATE: April 19/44 194 SIGNATURE: R. B. N. Palmer