

V5586
MARMON
THOMAS

MEMORANDUM FOR

P. 64

Mrs. Lydia Marmon
 24 St. Charles Road
 Greenfield Park, Quebec

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

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

and the following number quoted:—

H.Q.N.S. 113-M-772 FD. 355

DEPARTMENT OF NATIONAL DEFENCE
 ESTATES BRANCH
 OTTAWA, ONT.



January 7, 1944

For the purpose of record and in the event of there being any Service estate available for distribution (according to law) on account of the late

MARMON, Thomas, Idg. Smn.

No. V. 5586, R.C.N.V.R.

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

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

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

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

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

If there is insufficient space for complete particulars to be given opposite any question on Pages 2 and 3 of this form, the space under "additional remarks" on page 4 should be used.

HRW/JN

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

ANSWER IN FULL ALL APPLICABLE QUESTIONS

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

Degrees of Relationship	RELATIVES required to be accounted for	INFORMANT'S STATEMENT			
		NAME IN FULL of any Relative, if any, in each degree specified	Age	ADDRESS IN FULL of each surviving Relative, opposite his or her name, and date of death of each deceased relative	
1	Widow of the Deceased.....	Lydia Marie Marmor	25	24 St. Charles Road Greenfield Park, Que.	
2	Children of the Deceased and dates of their Births.....	none			
3	Father of the Deceased.....	Herbert John Marmor	63	651 Woodland Ave. Verdun, Que.	
4	Mother of the Deceased.....	Mary Elizabeth O'Brien deceased 1917			
5	Brothers of the Deceased	Full Blood	William Henry Marmor	44	388 Argyle Ave. Verdun, Que.
		Half Blood			
6	Sisters of the Deceased	Full Blood	Ethel Marmor	40	93 Church Ave. Verdun, Que.
		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				

ANSWER FULLY EACH QUESTION ON THIS PAGE

PARTICULARS AS TO IDENTITY

8	Full names of the deceased	Thomas Marmont
9	Date of his birth	January 10th, 1916
10	Place and date of his marriage.	Greenfield Park, Quebec July 10th, 1943
11	Place and date of his parents' marriage.	Manchester, England 1899

PARTICULARS OF DOMICILE

12	Place where deceased was born.	Cote St. Paul, Montreal, Que.
13	State, in order, the Province, State and/or Country in which he resided before enlistment and the period of time in each.	(a) Quebec, Canada. (b) (c) (d)
14	Nature of employment before enlistment.	Clerk
15	State whether he owned the premises in which he lived and, if so, where situated.	No
16	Name place where deceased stated he intended to make his permanent home.	Canada

PARTICULARS OF ESTATE

17	Did he leave a Will?	Do not know
18	If married, and domiciled in the Province of Quebec or in a State in the U.S.A. or in a Country under the laws of which there is community of property between spouses, — was there a marriage contract dealing with property?	Yes
19	Did he have a Bank, Post Office or other deposit account? If so, give name and address of bank, etc. and the amount on deposit.	No
20	Amount of War Savings Certificates held by deceased.	\$60.00
21	Amount of Victory Loan Bonds held by deceased.	None
22	If deceased had life insurance, name companies and amount payable under each policy and the person named as beneficiary there. Describe other assets, if any, and estimated value thereof.	The Mutual Life Assurance Co. of Canada Lydia Marmont
23	Is application for Probate or Letters of Administration necessary (see page 1)?	Yes

OTHER PARTICULARS

24	Did the deceased after enlistment incur any debts for:— (a) His own separate board and lodging while on service. (b) Service clothing and equipment. An itemized account for each such debt should be attached hereto, and if same is correct you should mark the bill "approved" and sign same. If believed incorrect, give particulars.	No
25	Have you or any other relative paid the funeral expenses or any part thereof? If so, attach itemized accounts showing amount paid, and by whom.	No

(NOTE:—The Government pays funeral expenses within the amounts authorized in the Regulations, where death occurs and burial is made Overseas as well as where death occurs and burial is made in Canada or elsewhere in the North American zone, and if a relative has already paid those expenses the Government will reimburse such relative to the extent of the amount authorized in the Regulations. Any amount of such expenses in excess of those authorized in the Regulations is not payable by the Government nor is it chargeable against the service estate of the deceased.)

DECLARATION

*Insert degree of relationship for example, "Widow", "Father", "Brother", etc.

I hereby declare that all the particulars shown on this form are correct, and a true and complete statement of all the relatives that the deceased ever had in the degrees specified; and that I am the

* widow of the deceased.

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

Lydia Marmor {Signature of Informant
24 St. Charles Pl. Greenfield Park, Que. Address

CERTIFICATE

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

See above. Lydia Marmor { Name of Informant } is the widow of the Deceased above described, and I believe the above Declaration and the Statement of Relatives and of particulars made by the Informant and signed in my presence to be complete and correct.



Dated at Montreal, P.Q. this 14th day of January 1944
Signature of Clergyman, Priest, Magistrate, Commissioner or Notary Public } Stanley Sheet Qualification Notary Public
Address 1410 Stanley Street, Montreal, P.Q.

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

(If the deceased has no living relatives of the degrees shown on page 2, the names and addresses and relationship of other relatives should be set out below.)

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

(5) On being enrolled as a member of the.....**Montreal**.....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.....**Twenty-third**.....day of.....**September, 1939**.....

Signature of applicant.....

(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.....**23rd**.....day of.....**September, 1939**.....

Signature of Commanding Officer.

(D) OATH OF ALLEGIANCE

I,.....**Thomas Marmon**.....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.....

Witness.....

Date.....**Sept. 23rd, 1939**..... Rank.....

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

(E) CERTIFICATE OF DIVISIONAL COMMANDING OFFICER

.....**Thomas Marmon**.....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.....**Montreal**.....Division of the R.C.N.V.R.

Commanding Officer.

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

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

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

~~Rejected~~ 30

DEPT. NATIONAL DEFENCE
 14 SEP 27 1939
 113-7M-772

Can. B. 207



CERTIFICATE OF MEDICAL EXAMINATION FOR THE ENTRY OF OFFICERS, MEN AND BOYS FOR THE NAVAL SERVICE OF CANADA
 (R.C.N. OR RESERVE FORCES)

18988

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 Thomas Marmon
 candidate for entry as Ordinary Seaman
 and I believe him to be in all respects fit for His Majesty's Service. He has signed the Certificate given below in my presence.

Dated at Montreal the 14 of Sept. 1939

Lowry Howells
 Examining Medical Officer
 (Rank) Sydney R. M. R.

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

Age	Weight without Clothes	Height with Bare Feet	General Development	Chest Girth	Vision by Snellen's Types	Vaccinated or re-vaccinated for Small Pox	Lungs, Heart, etc.	Abdomen, Hernia, etc.	Limbs and Joints	Skin	Ears and Hearing	Testes, Varicocele, etc.	Mouth, Teeth, etc.	Anus, Hemorrhoids, etc.
(a)	(b)	(c)	(d)	(e)	(f)	(g)	(h)	(i)	(j)	(k)	(l)	(m)	(n)	(o)
Years Months	lbs.	ft. ins.		inches	right eye	(Date)								
23 8/12	131	5'4 1/2"	Good	(a) maximum 35 3/4 (b) minimum 33 3/4 (c) mean 34 3/8	right eye 6/9 left eye 6/9 colour vision N	1 year left one right	N	N	N	N	N	N	N	N

CERTIFICATE TO BE SIGNED BY THE CANDIDATE

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

Thomas Marmon
 Signature of Candidate

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

This Candidate is the subject of.....

 not considered of sufficient importance to cause his rejection, he being desirable in other respects.

Examining Medical Officer

(Rank).....

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

DEPARTMENT OF VETERANS AFFAIRS
DECEASED 20 September 1943

AWARDS NAVY

WAR SERVICE RECORDS
D.D.

MARMON	Thomas	V-5586	L/Smn.	FILE No.
SURNAME (IN BLOCK LETTERS)	CHRISTIAN NAMES	REG. No.	RANK ON DISCHARGE	C.A.S.F. UNIT

WAR SERVICE

BADGE

(CLASS)

No. Nil

DATE DESPATCHED:

ADDRESS:

CAMPAIGN MEDALS	REGISTRATION NUMBER AND DATE DESPATCHED
1939-45 Star	
Atlantic Star	2527 15.10.49
Africa Star	
C.V.S.M. & Clasp	
War Medal	

(THE REVERSE TO BE USED FOR ESTATE PURPOSES)

MEDALS AND MEMORIALS—DECEASED PERSONNEL
HMCS "ST. CROIX" May /44. R.C.N.V.R.

REGISTRATION No. DATE OF DESPATCH

1) MEDALS
PERSON

ENTITLED TO Mrs. Lydia Marmon - Widow

ADDRESS: 24 St. Charles Road,
Greenfield Park, Quebec.

(1)

(2) MEMORIAL CROSS

WIDOW Mrs. L. Marmon

ADDRESS: 24 St. Charles Road
GREENFIELD PARK, Que.

7 January 1944

(2)

(3) MEMORIAL CROSS

MOTHER DECEASED

ADDRESS:

(3)

MEMORIAL BAR

DATE DESP

REGN. NO

90.5

VERIFICATION FORM

1914 STARS, DEFENCE MEDAL, WAR MEDAL, C.V.S.M. and CLASP.
 NAVAL GENERAL SERVICE MEDAL (1915).

NAME: *mas...* RANK/RATING: *A. Lt. dg. S.M.M.* OFF. NO.: *U. 5586* ADDRESS:

DAYS	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
<i>11</i>									1939-45	1	<i>Star</i>
<i>89</i>	<i>atlantic</i>								ATLANTIC	1	<i>Star</i>
<i>40</i>	<i>afria</i>	<i>8-3-43</i>	<i>8-3-43</i>						FRANCE G.		
<i>Dr</i>									AFRICA	1	<i>Star</i>
<i>43</i>									PACIFIC		
									BURMA		
									ITALY		
									DEFENCE		
									C.V.S.M.	2	<i>@ clasp</i>
									" CLASP		
									WAR 1945	1	<i>Medal</i>
									WAR 1915		

VERIFIED BY *Leahert*

VERIFIED BY DIR. OF PERSONNEL RECORDS.

ORIGINAL

P060765

H.Q. File No. DEPT. NATIONAL DEFENCE

DECLARATION OF ALLOTMENT

SEP - 9 1940
113-71772

List and Number in Ledger	ALLOTOR	Rank or Rating	Official No.	Daily Rate of Pay
STADACONA Sec 3 5-2/485	427 001 Surname..... Marmon, Christian Names } Thomas.	O/Sea RCNVR	V5586	\$1.50

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..... H. Star & Son Christian Names }	Naval Outfitters	127 Hollis St. Halifax, N.S.	\$5.00	September.

Section B DISPOSAL OF EXISTING ALLOTMENTS

(See Note 1 below)

The following allotments are in force:—

Rate	NAME OF ALLOTTEE	ADDRESS	Initials	Date
\$21.00	H. D. Marmon	Verdun, Que.	[Handwritten]	May 1940

Allotment Declarations
 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..... Thomas. Marmon.
 O. Sea Rank or Rating

ENTERED IN FAIR LEDGER

ENTERED IN ROUGH LEDGER

[Handwritten Signature]

[Handwritten Signature]

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:—

Assigned Pay to Wives	Object No. 111 \$.....
Assigned Pay to other Dependents	" " 113.....
Marriage Allowance	" " 116.....
Dependents Allowance	" " 119.....
Other Allotments	" " 122 ... 5.00
Total	\$ 5.00

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

[Handwritten Signature]
 Paymaster Sub. Lieutenant R.C.N.V.R.
 for Accountant Officer

H.M.C.S. STADACONA.

Forwarded..... 6/9/40

DECLARATION OF ALLOTMENT

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.....		

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

26

Sir:

.....6 October, 1943.....
(Date)

The following casualty has been reported -

NAME MARMON, Thomas RANK or RATING Leading Seaman NAVAL NO. V-5586 R.C.N.V.R.

DATE OF ENLISTMENT - 23 September, 1939. Active Service: 29 May, 1940.

DATE OF DISCHARGE - _____

HOSPITAL - _____
(If discharged in hospital under jurisdiction of D. P. & N. H.)

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

Reason for discharge and - "Missing" on war service. This rating is listed as
when and where any disability missing, due to enemy action, while serving on Convoy
was incurred, or where death duty in the Atlantic. When official presumption of death has been made, you will be
occurred. notified further.

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

NEXT OF KIN & RELATIONSHIP -

RELATIONSHIP Father NAME Mr. H. J. Marmon,

ADDRESS 651 Woodland Ave., VERDUN, Que.

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.

H.B. Money

for
SECRETARY, NAVAL BOARD.

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

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

(See reverse side for further instructions)

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.

DISTRIBUTION OF SERVICE ESTATES

TL

Estates Form "P. 4"

NAVY

Name: **MARMON** **Thomas** No.: **V. 5586**
Surname Christian Names

Rank **Edg. Smn.** **H.M.C.S. "ST. CROIX"** **20-9-43.**
Unit Date of Death

AMOUNT

Date: **April 14th, 1944.**
 L.P.C.....\$ **119.02**
 Other Credits.....
 Total..... **119.02**

SHARE	RELATIONSHIP	NAME AND ADDRESS	AMOUNT
all	Widow	<p>113126</p> <p>Mrs. Lydia Marmon, 24 St. Charles Road, GREENFIELD PARK, Quebec.</p> <p align="center">(Under marriage contract)</p>	119.02

AUTHORITY					
H.Q. F.E. No.	VOTE	PRI	H.Q. SUB.	OBJ.	AMOUNT
9999	831	00	50	000	119.02
CLASSIFIED BY Original Signed by E. W. QUINNEY			EXAMINED BY ORIGINAL SIGNED BY E. G. COLLYER For Chief Treasury Officer		

DISTRIBUTION APPROVED AND AUTHORIZED

Original signed by
L. M. FIRTH

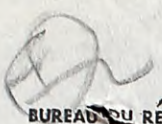
.....
 (L. M. FIRTH) Lt.-Colonel
 Administrator of Estates

AUDITED FOR PAYMENT

ORIGINAL SIGNED BY
E. G. COLLYER

.....
 For Chief Treasury Officer

WAR SAVINGS CERTIFICATES
CERTIFICATS D'ÉPARGNE DE GUERRE


BUREAU DU RÉGISTRAR
350, AVENUE KING-EDWARD
OTTAWA

OFFICE OF THE REGISTRAR
350 KING EDWARD AVENUE
OTTAWA

J. P. W. Thuot, Esq.,
Notary,
1410 Stanley Street,
Montreal, P. Q.

"Copy for the information of
the Administrator of Estates,
Department of National Defence."



March 17, 1944.
Refer to A4/324815

Dear Sir, Re: Estate of Thomas Marmon - R.C.N.V.R.

We have your letter of March 10, with enclosures as stated with respect to the above estate. We note that the late Thomas Marmon was a member of the R.C.N.V.R. and was deceased on or about September 20, 1943.

We have communicated with the Administrator of Estates, Department of National Defence, Ottawa, in this connection, as it will be necessary for us to obtain authorization from him before we may deal with these War Savings Certificates. However, we shall communicate with you again as soon as possible.

Yours truly,



For Registrar.

/JMD

4 encl.

KEEP YOUR CERTIFICATES IN A SAFE PLACE, AND A LIST OF THEIR NUMBERS SAFELY ELSEWHERE

GARDEZ VOS CERTIFICATS DANS UN ENDROIT SÛR ET CONSERVEZ AILLEURS UNE LISTE DE LEURS NUMÉROS

QUESTIONNAIRE FOR CANDIDATES
FOR ENTRY IN THE ROYAL CANADIAN NAVAL VOLUNTEER RESERVE

NAVY REFERENCE
SEP 27 1939

113-772

Name (in full) THOMAS MARMON

Date and place of birth MONTREAL, QUE JAN 10, 1916
(Birth certificate, declaration by parents or affidavit as to date of birth must be attached) 1898

Permanent place of residence 651 WOODLAND AVE VERDUN

Nearest town to residence (if living in country)

Are you a British subject? YES

Are you single, married or a widower? SINGLE

In what capacity do you wish to enrol? ORDINARY SEAMAN
(See standards of qualifications in attached pamphlet)

Present occupation or trade SHIPPER
(Attach any testimonials or recommendations)

Do you belong to any Naval, Military, Reserve or Territorial Force? No

Have you ever served with such forces? Give dates and details -

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

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

What is your weight? 136 What is your height? 5' 5"

What is your chest measurement (not inflated)? 35"

Are you free from all physical defects or malformation, and not subject to fits? yes

Are you willing to be vaccinated or re-vaccinated and inoculated as considered necessary by the appropriate authorities? yes

I hereby declare that the above answers are true in every respect.

Thomas Marmon Signature

Sept 7, 1939 Date

651 Woodland Ave Address

R. W. Gellman
(Witness to Signature) R.C.N.V.R. (SR)

Verdun, J. Q. 4042

This is to certify that I have personally seen the birth certificate of this applicant, or a sworn declaration as to his date of birth.

I certify his date of birth, according to legal documentary evidence, to be

Signed Norman Magnusson
For Commanding Officer

N.V.3

12th
8 pm

Chase

SFC/FB.



Department of National Defence
Naval Service

IN REPLY PLEASE QUOTE

NO. ~~113 - S. 515.~~
113 - M. 772.

Ottawa, Canada.

10 October, 1939.

From: The Director of Naval ~~Reserves.~~ ^{Personnel.}
Naval Service Headquarters.

To: The Commanding Officer,
Montreal Division, R.C.N.V.R.,
1464 Mountain St.,
MONTREAL, P.Q.

The enrolment of the undermentioned
rating ^s in the R.C.N.V.R., for duty with the
Montreal Division, is approved:

<u>NAME</u>	<u>RATING</u>	<u>O.N.</u>	<u>DATE</u>
FREW, Herbert R.R.	S.B.A.	5579	25 Sept./39.
RICHARDSON, Julius B.	Ord. Sea.	5580	30 Sept./39.
CHEYNE, Milton A.	Ord. Sea.	5581	25 Sept./39.
KORNING, Ib	Ord. Tel.	5582	26 Sept./39.
SARRAZIN, Gabriel	" "	5583	27 Sept./39.
MOESER, John Fredk.	" "	5584	25 Sept./39.
WILSON, Cyril Robt.	" "	5585	23 Sept./39.
MARMON, Thomas	Ord. Sea.	5586	" " "
KEATH, Harry	" "	5587	" " "

(S. F. Conquer),
Pay. Lieut.- Commander R.C.N.V.R.,
for Director of Naval Reserves.
Personnel.

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113-M-772 PERS.(N)

15 October, 1943.

Dear Sir:

The undermentioned Canadian Naval Casualty is forwarded to you for transmission to the Inspector of Income Tax concerned:

NameMARMON,.....Thomas.....
(Surname) (Christian Names)

Rank/Rating **Leading Seaman**.....

Official No. **V-5586**.. R. C. N. V. R.....

Nature of Casualty **"MISSING" on war service after sinking of H. M. C. S. "St. Croix"...** Official presumption of death with date will, in all probability, Date of Casualty **be made 3 months from date of sinking of this ship.**

Address at time of Enlistment **651 Woodland Ave.,**.....

.....**VERDUN, Que.**.....

Marital Status, at time of Enlistment **Single**.....

Occupation**Shipper**.....

Name & Address of Next of Kin **Father: Mr. H. J. Marmon,**

651 Woodland Ave., VERDUN, Que......

Yours truly,

for

SECRETARY, NAVAL BOARD.

EMC

The Deputy Minister (Taxation),
Department of National Revenue,
Ottawa, Ont.

31

25 October, 1943.

Dear Mrs. Marmon:

I deeply regret that I must confirm that your husband, Thomas Marmon, Leading Seaman, Official Number V-5586, Royal Canadian Naval Volunteer Reserve, is missing on war service.

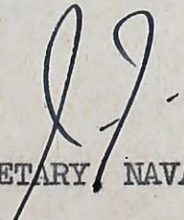

As you are aware, your husband was serving in H.M.C.S. "ST.CROIX" on convoy duty in the Atlantic when this ship was sunk by enemy action. On the 27th of September, a telegram and letter were despatched to your father-in-law, Mr. H. J. Marmon, 651 Woodland Avenue, Verdun, Quebec, reporting your husband missing. It is regretted that records at Naval Service Headquarters were not amended to show you as official next of kin and consequently you were not previously informed.

As reported in the original notification to Mr. Marmon, virtually no hope can be held out for your husband having survived, as ships in the vicinity at the time have reported picking up only one survivor.

Canadian Naval authorities are unable to make an official presumption of death until a period of not less than three months has elapsed from the date of the disaster. If further information has not been received at that time, it is probable that official certification of death will then be made, and you will be notified accordingly.

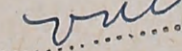
Please allow me to express sincere sympathy with you on behalf of the Minister of National Defence for Naval Services, the Chief of the Naval Staff, and the Officers and men of the Royal Canadian Navy, the high traditions of which your husband has helped to maintain.

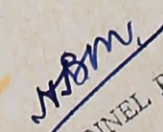
Yours sincerely,


SECRETARY, NAVAL BOARD. 

Mrs. Lydia Marmon,
24 St. Charles Road,
GREENFIELD PARK, Que.

Despatched by
Sec. N. B.


Date 27.10.43
Time 1820


NAVAL PERSONNEL RECORDS

LA/CM

N.S. 113-M-772.

PERS.(N)

DEC 29 1943

52

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:

<u>NAME, RANK/RATING NO.</u>	<u>PLACE, DATE & CAUSE of DEATH</u>	<u>NEXT OF KIN</u>
MARMON, Thomas, Leading Seaman, O.N. V-5586, R. C. N. V. R.	Missing, presumed dead to date 20 September, 1943. He was serving in H.M.C.S. "ST.CROIX", which was lost while serving on convoy duty in the Atlantic due to enemy action.	Wife: Mrs. Lydia Marmon, 24 St. Charles Road, Greenfield Park, Que.

ALLOTMENTS IN FORCE

<u>IN FAVOUR OF</u>		<u>AMOUNT</u>	<u>INITIALS</u>
Mrs. Lydia M. Marmon, 24 St. Charles Road, Greenfield Park. P.Q.	Wife.	\$65.00 plus \$1.40 C. of L.B.	L.D.

Allotment stopped with last payment made September 30, 1943.

WILL: No Record

YLM
10/12/43

Yours truly,

H.B. Money

for
SECRETARY, NAVAL BOARD.

Administrator of Estates,
Estates Branch,
Department of National Defence,
O T T A W A.

SL *MD*

EMC

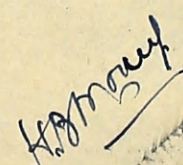
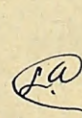
N.S. 113-M-772,
F.D. 5390 & 5449 PERS(N)

17 February, 1944.

THIS IS TO CERTIFY that according to official information Thomas Marmon, Leading Seaman, Official Number V-5586, Royal Canadian Naval Volunteer Reserve, is missing, presumed dead to date the 20th of September, 1943. He was serving in H.M.C.S. "St. Croix" which was sunk by enemy action whilst on Convoy duty in the Atlantic.



Deputy SECRETARY, NAVAL BOARD.



H. B. Mackay
PAY LIEUT.
OF
NAVAL BOARD
R. C. N. R.
RECORDS

24 St. Charles Road,
Greenfield Park,
Montreal 23, Quebec.
November 17/44.

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

6023

Dear Sir: V-5586^{Dormant}

I am enclosing herewith Application
for War Service Gratuity due my husband
Leading Seaman Thomas Marmor, number
V5586, lost at sea while serving on
H. M. C. S. St. Croix.

Yours truly,
Mrs. Lydia Marmor

Service Certificate
not enclosed.

ENCLOSURES CHECKED IN N.C.R.		
SECTION	NO.	INIT.
Mail		K19
Index		100
Routed	1974	
Re		

Comp forms completed
and retained in Dufal (S)
23/11/44
AA





Department of National Defence
Naval Service

IN REPLY PLEASE QUOTE
No. N.S. 113-M-772...
PERS. (N)

Ottawa, Canada.

DEC 29 1943

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:

<u>NAME, RANK/RATING NO.</u>	<u>PLACE, DATE & CAUSE of DEATH</u>	<u>NEXT OF KIN</u>
MARMON, Thomas, Leading Seaman, O.N. V-5586, R. C. N. V. R.	Missing, presumed dead to date 20 September, 1943. He was serving in H.M.C.S. "ST.CROIX", which was lost while serving on convoy duty in the Atlantic due to enemy action.	Wife: Mrs. Lydia Marmon, 24 St. Charles Road, Greenfield Park, Que.

ALLOTMENTS IN FORCE

<u>IN FAVOUR OF</u>	<u>AMOUNT</u>	<u>INITIALS</u>
Mrs. Lydia M. Marmon, 24 St. Charles Road, Greenfield Park. P.Q.	Wife. \$65.00 plus \$1.40 C. of L.B.	L.D.

Allotment stopped with last payment made September 30, 1943.

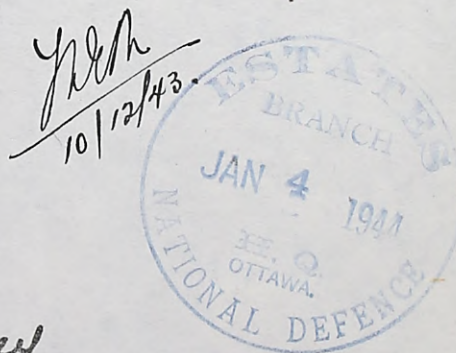
WILL: No Record

Yours truly,

H.B. Money

for
SECRETARY, NAVAL BOARD.

Administrator of Estates,
Estates Branch,
Department of National Defence,
O T T A W A.



46

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 MARMON, Thomas Rating A. B.
 Official No. V-5586 H.M.C.S. St. Croix List 5/2 - 31
 Who* D. D. on the 20 Sep' 19 43

Net sum due on ledger on account of Wages.....	\$	cts.
Proceeds of sale of Effects charged against Wages, brought from the other side		
CASH—	\$	cts.
Proceeds of sale of Effects, paid for in Cash, brought from the other side.....		
Found amongst Effects.....		
Debts collected \$.....		
Cash debited in the Accountant Officer's Cash Acct.....		
If in debt in ledger, amount to be stated (in red ink).....		
Rate of allotment (in words) <u>(AP) Fifty dollars (New Oct - Not Charged.)</u> charged to.....		
Name of ship from which transferred <u>St. Croix</u>		
Total†.....	Creditor.	
		119. 02

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 "AVALON" for St. Croix. amounting to a net balance†..... CREDITOR. of One hundred and nineteen dollars two cents.

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

Approved [Signature] Accountant Officer
A/Paymaster Lieut. Cmdr. R.C.N.V.R.
 { Initials of the Assistant Accountant Officer }
[Signature]

 Commander, R.C.N. (Temp)..... 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.

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

NAVY

Deceased member's NAME **Thomas MARMON**
(CHRISTIAN NAMES) (SURNAME)
Payee: Mrs. Lydia MARMON
ADDRESS 24 St. Charles Rd.,
Greenfield Park,
Montreal, Que.

REGISTER NO. 1658
FILE NO. NBV-5586
DATE 24 Feb/45
SERVICE NO. V-5586
FINAL RANK OR RATING A/Ldg. 8mn.
DATE OF DISCHARGE 20 Sep/43

DATE OF TERMINATION OF OVERSEAS SERVICE 20 Sep/43

A. TOTAL QUALIFYING SERVICE \$ 300.00
NO. OF DAYS 1209 EQUAL TO 40 COMPLETE PERIODS AT \$7.50

B. QUALIFYING OVERSEAS SERVICE \$ 255.00
NO. OF DAYS 1029 LESS 9 INELIGIBLE DAYS, EQUAL TO 1020 DAYS @ 25c. PER DAY
SEE PAR. 2 OVERLEAF FOR EXPLANATION

C. SUPPLEMENT FOR OVERSEAS SERVICE

DAILY RATES AT DISCHARGE

PAY	\$ 2.10
SUBSISTENCE OR LODGING AND PROVISION ALLOWANCE	\$ 1.45
ADDITIONAL PAY Q.R. II	\$.20
G.C.B.	\$.05
H.L.M.	\$.25
DEPENDENTS' ALLOWANCE 1/30 OF \$	\$ 1.15
TOTAL	\$ 5.20

X7 = \$ 36.40
X\$ 36.40
NO. OF DAYS 1020
183

D. WAR SERVICE GRATUITY \$ 757.89

E. DEDUCTIONS

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

F. AMOUNT PAYABLE \$ 757.89
(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	757.89								
CHEQUE No.	111058								
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 **EJD** CHECKED BY **[Signature]** TREASURY DATE **6/3/45**
for Dir. Naval Pay. Acting. SERVICE REPRESENTATIVE

STATEMENT OF WAR SERVICE GRATUITY - NAVY

Deceased Member's Name **Thomas** **MARMON**
 (Christian Names) (Surname)

Payee **Mr Lydia MARMON**

Register No. **1658**
 File No. **V5586**
 Date **22 Nov 44**
 Service No. **V5586**

Address **24, St Charles Road,
 Greenfield Park, Montreal, P. Q.**

Final Rank or Rating **A/LDC. SMN**
 Date of Discharge **20 SEP 43**

Date of termination of overseas service **20 Sep 43.**

A. TOTAL QUALIFYING SERVICE
 No. of days $\frac{1209}{30}$ equal to **40** complete periods at \$7.50 \$ 300.00

B. QUALIFYING OVERSEAS SERVICE
 No. of days **1029** less **9** ineligible days equal to **1020** days @ 25¢ per day \$ 255.00

C. SUPPLEMENT FOR OVERSEAS SERVICE ~~555.00~~

DAILY RATES AT DISCHARGE

Pay	\$	2.10	
Subsistence or Lodging	\$	1.45	
and Provision Allowance		Q.R. II	.20
Additional Pay	\$	C.C.B.	.05
	\$	H.L.M	.25
Dependents' Allowance 1/30 of \$	\$	1.15	
Total		5.20	x 7 = \$ 36.40
No. of days	$\frac{1020}{183}$		x \$ 36.40
			202.89

D. WAR SERVICE GRATUITY \$ 457.89

E. DEDUCTIONS
 OVERPAYMENT OF PAY AND ALLOWANCES \$
 DEPENDENTS' ALLOWANCE AND ASSIGNED PAY \$ *Paul*
 OTHER DEDUCTIONS \$

F. TOTAL AMOUNT PAYABLE \$ 757.89

G. YOUR PORTION OF GRATUITY IS

Dependents' Allowance in issue to you \$ ~~_____~~ of \$ = \$ **757.89**
 Total Dependents' Allowance in issue \$ ~~_____~~

CERTIFICATE: I certify that the amount has been correctly computed and is payable in accordance with the terms of the War Service Grants Act, 1944 and the regulations issued thereunder.

Prepared by	Checked by	Treasury	
		Checked by	Date

Service Representative

D.N.P.A. CHECK

1 <i>[Signature]</i>	6 <i>[Signature]</i>
2 <i>[Signature]</i>	7 <i>[Signature]</i>
3 <i>[Signature]</i>	8 <i>[Signature]</i>
4 <i>[Signature]</i>	9 <i>[Signature]</i>
5 <i>[Signature]</i>	10 <i>[Signature]</i>

STATEMENT OF WAR SERVICE GRATUITY - NAVY

Name **THOMAS** (Christian Names) **MARMON** (Surname) Register No. **1658**
 Address **MRS LYDIA MARMON** File No. **V5586**
24 ST CHARLES ROAD Date **22 Nov '44**
GREENFIELD PARK Service No. **V5586**
MONTREAL 23 P.Q. Final Rank or Rating **A/1dg. SMN.**
 Date of termination of overseas service **20 SEP '43** Date of Discharge **20 SEP '43**

A. TOTAL QUALIFYING SERVICE
 No. of days **1209** equal to **40** complete periods at \$7.50 \$ **300.00**

B. QUALIFYING OVERSEAS SERVICE
 No. of days **1029** less **9** ineligible days, equal to **1020** days @ 25¢ per day \$ **255.00**

C. SUPPLEMENT FOR OVERSEAS SERVICE SUB TOTAL **555.00**

DAILY RATES AT DISCHARGE

Pay	\$	2.10	
Subsistence or Lodging and Provision Allowance	\$	1.45	
Additional Pay	\$	0.20	
	\$	0.05	
	\$	0.25	
Dependents' Allowance 1/30 of	\$	115.00	
	\$	3.80	
Total	\$	7.95	36.40
No. of days		1020	308.80
		183	447.20

D. WAR SERVICE GRATUITY ~~555.00~~
863.20

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

F. AMOUNT PAYABLE
 (This amount is payable in monthly instalments of \$ _____ each)

G. MONTHLY INSTALMENT NOT TO EXCEED Daily rate of pay and allowances \$ **5.20** x 30 = **156.00**

Instalm. Payable	1	2	3	4	5	6	7	8	9
AMOUNT									
Cheque No.									
DATE									

Instalm. Payable	10	11	12	13	14	15	16	17	18
AMOUNT									
Cheque No.									
DATE									

D.N.P.A. CHECK

1	<u> </u>	6	<u> </u>
2	<u> </u>	7	<u> </u>
3	<u> </u>	8	<u> </u>
4	<u> </u>	9	<u> </u>
5	<u> </u>	10	<u> </u>

Wife in receipt of pension
Estate form prepared.

V5586

113-M-772

V5586

OFFICIAL NUMBER FILE NUMBER OFFICIAL NUMBER

NAME MARMON Thomas DATE OF BIRTH 10th January, 1916
 (Surname) (Given Names)

PLACE OF BIRTH Montreal, Quebec. OCCUPATION Shipper.

RELIGION Roman Catholic. EDUCATION

RESIDENCE AT TIME OF ENLISTMENT: Street and No. 651 Woodland Ave., Town Verdun Province, etc. Quebec.

Date (in figures)			Period	DESCRIPTION					PREVIOUS SERVICE		
Day	Month	Year		Height	Hair	Eyes	Complexion	Marks or Scars	Served in	Rank or Rating	Dates From To
23	9	39	H.O.	5' 4 $\frac{1}{2}$	D.Brn.	Brown	Fair				

NEXT OF KIN RELATIONSHIP (in pencil) Wife (C. Leat) 1143 NAME (in pencil) Mrs Lydia Marmon
 ADDRESS (in pencil): Street and No. 24 St Charles Road Town Greenfield Park Province, etc. Quebec

MEDALS, CLASPS, HURT CERTIFICATES, PRIZE MONEY				EXAMINATIONS, CERTIFICATES, ETC.							
Date (in figures)			Particulars	Date (in figures)			Particulars	Date (in figures)			Particulars
Day	Month	Year		Day	Month	Year		Day	Month	Year	
				7	6	43	Passed Prof. for Ldg. Snn.				

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		
30	5	43	1st.GCB(43504)	Granted.							

FILM
 NO. W.P.B-5264-2
DATE

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

SECOND CLASS FOR CONDUCT	
From	To

H.Q. 35-60M-5-43 (609)
 N.S. 815-7-35



P.I.B.

V5586 OFFICIAL NUMBER

NAME MARMON Thomas
(Surname) (Given Names)

OFFICIAL NUMBER V5586

Ship or Establishment	Rating	From			Remarks	Character	Efficiency	Date			Non-Sub. Rating	Qualified			Re-Qualified		
		Day	Month	Year				Day	Month	Year		Day	Month	Year	Day	Month	Year
Montreal Div. Str.	Ord. Snn.	23	9	39							Q.R.111.	10	8	40			
HMCS Stadacona	"	30	5	40		V.G.	Sat.	31	12	40	Q.R.11.	29	8	41			
St Clair	"	24	9	40		V.G.	Sat.	31	12	41							
"	Able Snn.	24	1	41		V.G.	Sat.	31	12	42							
Stadacona	"	10	7	41		V.G.		20	9	43							
St. Croix	"	11	9	41													
"	A/I dg. Snn.	15	6	43	Memo of 6-7-43.												
DISCHARGED	"	20	9	43	Missing on Active Service. Casualty List.												

GENERAL REMARKS
Canadian Memorial Cross to:
WIFE: Mrs Lydia MARMON,
24 St. Charles Road,
Greenfield Park, Que.

DATE OF BIRTH			PLACE		CIVIL OCCU.		RELI. ED.	PERM. RESIDENCE			PREV. ENL.	RANK OR RATE ON ENLISTMENT			
DY.	MO.	YR.	BIRTH	MAIN	SUB	GRON.	R.	CTY.	TOWNSHIP	SCR.	DIV.	A	BR	R.	
10	1	16	12	840	0	70	X	2	27	19	0	09	0	08	95
ENLIST. DATE			ACT. SERV. DATE			SYR.	SHIP OR			RANK OR RATE					
DY.	MO.	YR.	DY.	MO.	YR.	CAT.	R.	ESTAB.	A	BR	RANK				
23	09	39	30	05	40				0380	1	08	93			
SENIOR			NON-SUB.			CODED			CHECKED						
DY.	MO.	YR.	DY.	MO.	YR.	CAT.	A	B	C						
15	06	43	09	11	00	20				20-09-43	HK				