V11889
BOTHAM
ROBERT JOHN

113 B 2314

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 ... (b) Reg'l. No. ...
2. (a) Arm of service ... (b) Unit ... (c) Rank ...
3. (a) Date of birth ... (b) Have you any dependents? ... (c) Place of residence at time of enlistment ...
4. (a) Place of enlistment ... (b) Date of enlistment ...

Section B—EDUCATION AND TRAINING

5. (a) State age on finally leaving school ... (b) Were you attending school or college up to the time of enlistment? ...
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.) ...
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? ... (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? ... (b) What languages do you read well? ...

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) ... (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 ... 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? ... (b) Do you feel competent to operate a farm? ... (c) If so, in what kind of farming? ...
25. (a) Were you born on a farm? ... (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 ...

O.H.F. RECEIVED

DATE ... 194... SIGNATURE ...

MEMORANDUM FOR

Mr. Robert Botham
Box 20
Plato, Saskatchewan

Any further communication on this subject should be addressed to:—
THE ADMINISTRATOR OF ESTATES,
DEPARTMENT OF NATIONAL DEFENCE,
OTTAWA, ONTARIO.
and the following number quoted:—

H.Q. N.S.113-B-2314 FD.287

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

BOTHAM, Robert John, A.B.

No. V.11889, R.C.N.V.R.

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

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

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

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

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

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

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

HRW/JN

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

ANSWER IN FULL ALL APPLICABLE QUESTIONS

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

Degrees of Relationship	RELATIVES required to be accounted for		INFORMANT'S STATEMENT: NAME IN FULL of any Relative, if any, in each degree specified	Age	ADDRESS IN FULL of each surviving Relative, opposite his or her name, and date of death of each deceased relative
1	Widow of the Deceased.....				
2	Children of the Deceased and dates of their Births.....				
3	Father of the Deceased.....		Robert S Botham	51	Plato Sask
4	Mother of the Deceased.....		Doris L Botham	41	Plato Sask
5	Brothers of the Deceased	Full Blood	Air. F: No. R.61877 William J Botham	22	Toronto Ont
			army " B.107766 Harold K Botham	19	Regina Sask
			" B.105832 Raymond C Botham	19	Overseas
			Donald E Botham	16	Plato Sask
			Gerald T Botham	5	Plato Sask
		Half Blood			
6	Sisters of the Deceased	Full Blood	Pearl M Botham	12	Plato Sask
			Audrey P Botham	10	Plato Sask
			Marjory L Botham	9	Plato Sask
			Joyce L Botham	7	Plato Sask
		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
	X				

ANSWER FULLY EACH QUESTION ON THIS PAGE

PARTICULARS AS TO IDENTITY

8	Full names of the deceased	Robert John Botham
9	Date of his birth	Jan 21st 1921
10	Place and date of his marriage.	
11	Place and date of his parents' marriage.	Melfort, Jan-26.

PARTICULARS OF DOMICILE

12	Place where deceased was born.	Melfort Sask
13	State, in order, the Province, State and/or Country in which he resided before enlistment and the period of time in each.	(a) Plato Sask (b) (c) (d)
14	Nature of employment before enlistment.	Farming
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.	Plato Sask

PARTICULARS OF ESTATE

17	Did he leave a Will?	not to my knowledge
18	If married, and domiciled in the Province of Quebec or in a State in the U.S.A. or in a Country under the laws of which there is community of property between spouses, — was there a marriage contract dealing with property?	
19	Did he have a Bank, Post Office or other deposit account? If so, give name and address of bank, etc. and the amount on deposit.	not to my knowledge
20	Amount of War Savings Certificates held by deceased.	none
21	Amount of Victory Loan Bonds held by deceased.	two, to my knowledge
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.	Confederation life Back Pay amount $1,250.00
23	Is application for Probate or Letters of Administration necessary (see page 1)?	No

OTHER PARTICULARS

24	Did the deceased after enlistment incur any debts for:— (a) His own separate board and lodging while on service. (b) Service clothing and equipment. An itemized account for each such debt should be attached hereto, and if same is correct you should mark the bill "approved" and sign same. If believed incorrect, give particulars.	not to my knowledge
25	Have you or any other relative paid the funeral expenses or any part thereof? If so, attach itemized accounts showing amount paid, and by whom.	no

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

(PLEASE TURN OVER)

DECLARATION

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

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

*Father of the deceased.

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

Robert S. Bathum — Signature of Informant

Plato - Sask. — Address

CERTIFICATE

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

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

Dated at Plato this 12th day of January 1943

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

Qualification A Justice of the Peace in and for the Province of Saskatchewan

Address Plato Sask

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

My Son had two Bonds to my Knowledge and some back pay I dont Know how much your office should be able to tell you that

No Bonds! Not Our records

V-11889.

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)

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 Botham Robert John

‡candidate for entry as Ord. Sea R.C.N.V.R. (Temp)

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)
	lbs.	ft. ins.		inches										
20 years 9 mos	172½ lbs.	5' 11"	Good	(a) maximum 37" (b) minimum 33½" (c) mean 34¼"	right eye 6/6 left eye 6/9 *colour vision N	Yes childhood.	B.P. not taken Normal	Normal	Normal	Normal	Drums not visualized Normal C.V. 20/20 20/20	Normal	1 deficient 1 defective Art – N	Normal

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

Urine not examined

X-ray { Not taken. Approved. Positive. Doubtful. — Approved.

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.

R Botham

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 ....

*{which renders him medically unfit for service,
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 [ ]

Dated at Saskatoon the 21st of October 1941

Z. D. Jacks

Examining Medical Officer

(*Rank*) Surg. Lt. R.C.N.V.R.

14/4/42 urine – N
fit
Z.D.J.

12	0
8	0
6	0
29	0
57	26
5	42
3	35
15	96
74	Follows
2	"
6	"
97	"
45	Unable
5	"
7	OK
16	
73	

N. V. 5

25M—9-40 (6793)
N.S. 815-11-5

8

CANADA

ATTESTATION FORM

(HOSTILITIES FORM)

FOR MEN OF THE ROYAL CANADIAN NAVAL VOLUNTEER RESERVE

SURNAME Botham OFFICIAL NO. V 11889

CHRISTIAN NAMES Robert John MARRIED, SINGLE OR WIDOWER Single

PERMANENT ADDRESS	RELIGION
Plato, Sask..	United

DATE OF BIRTH	*PLACE OF BIRTH	NAME AND ADDRESS OF NEXT OF KIN
21st Jan 1921	Town Melfort	ma. Robert Botham (father)
*Original Nationality of: Father Canadian Mother American	County Province Sask..	Plato, Sask.

*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 11	Inflated 37 Deflated 33½ Mean 34½	Brown	Blue	Fair	Malformation of nail middle right under finger Scar on chin

DATE OF ENROLMENT	RATING ENROLLING FOR	TRADE OR CALLING AND IN WHOSE EMPLOY
OCT 21 1941	Ord Sea. (temp)	Farmer D. J. McCormick Plato, Sask.
R.C.N.V.R. Division (or other establishment) at which enrolled SASKATOON DIVISION R.C.N.V.R.		

(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 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.

Personnel Records Division.
1. Noted in Records
2. Index Card
3. Non-Sub. Card
4. Statistical Card
5. Roll Slip
6. Pension Card
8.

(3) On being enrolled as a member of the SASKATOON DIVISION R.C.N.V.R. 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 21st day of October 1941

Signature of applicant R Botham

(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 21st day of October 1941

R W Gleeckler Sub Lt. R.C.N.V.R.

Signature of and rank of Attesting Officer.

(D) OATH OF ALLEGIANCE

I, Robert John Botham 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 R Botham

Witness R W Gleeckler

Date OCT 21 1941 Rank Sub-Lt. 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

Robert John Botham 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 SASKATOON DIVISION R.C.N.V.R. Division of the R.C.N.V.R. or in the appropriate official documents.

R W Gleeckler Sub Lt. R.C.N.V.R.

Attesting Officer.

OCT 21 1941 194 R.C.N.V.R. Division (or other establishment) SASKATOON DIVISION R.C.N.V.R.

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.

DEPARTMENT OF VETERANS AFFAIRS

WAR SERVICE RECORDS

D OF D 20-9-43

AWARDS NAVY

D.D.

BOTHAM	Robert John	V-11889	A.B.	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	11 3/10/49
Atlantic Star	
Africa Star	
C.V.S.M. & Clasp	
War Medal	

(THE REVERSE TO BE USED FOR ESTATE PURPOSES)

DVA 806

MEDALS AND MEMORIALS—DECEASED PERSONNEL

REGISTRATION No. DATE OF DESPATCH

RCNVR May 44 "ST. CROIX"

(1) MEDALS
PERSON
ENTITLED TO Mr. Robert Botham - Father

ADDRESS: Box 20,
PLATO, Sask.

(2) MEMORIAL CROSS
WIDOW

ADDRESS:

(3) MEMORIAL CROSS
MOTHER Mrs. Doris Botham

ADDRESS: Plato, Sask.

MEMORIAL B R
(1)
DATE DESP
REGN. NO 128

(2)

(3) 13-1-44

28

V. 17
60M—11-40 (7836)
N.S. 815-11-17

CERTIFICATE of the SERVICE of

Robert John BOTHAM

in the Royal Canadian Naval Volunteer Reserve

I.C.N.S. ~~18536~~ X

Training Headquarters	R.C.N.V.R. Division	Official Number V-11889
Esquimalt	Unicorn	"
		"

Date of Birth 21st Jan. 1921

Place of Birth Melfort, Sask.

Place of Residence Plato, Sask.

Trade brought up to Farmer

Religion United

O.H.F.

Name and Address of Nearest Relative or Friend (in pencil)

Father Robert [illegible] Botham

2-3-43

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
9 Oct '41	21 Oct '41	Dur.	Ord. Sea.

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	11	34½	174	Brown	Blue	Fair	Malformation of nail right index finger. Scar on chin.
On re-enrolment—6 years' Service								
On re-enrolment—12 years' Service								
Further Description if necessary								

TRANSFER BETWEEN DIVISIONS

From	To	Date

TRANSFER—LISTS A AND B

List	Date	Authority

NAVAL TRAINING and ACTIVE SERVICE

Year	SHIP OR ESTABLISHMENT	LEDGER List	LEDGER No.	RATING	FROM	TO	CAUSE OF DISCHARGE
1941	Unicorn			Ord. Sea	21 Oct '41	28 Dec '41	
	Active Service						
	Unicorn			Ord. Sea	29 Dec '41	20 Apl '42	
	Naden N.S.H.Q.			—"—	21 Apl '42	22 Apl '42	
	Naden			—"—	23 Apl '42	26 Aug 42	
	Cornwallis			—"—	27 Aug 42	3 Sep 42	
	~~Stadacona~~			—"—	4 Sep. 42	13 Sep 42	
	Manatoulin			—"—	14 Sep 42	20 Oct 42	
	Stadacona			—"—	21 Oct 42	28 Oct 42	
	HMCS "Annapolis"			—"—	29 Oct 42	5 Nov '42	
	Stadacona			—"—	6 Nov '42	8 Nov '42	
	Avalon HMCS ("ST CROIX")			—"—	9 Nov 42	28 Dec 42 ~~30 Jan. 43~~	
	~~ditto~~ ("—"—)	4Y8	71	A.B. —"—	29 Dec, 42 ~~31 Jan. 43~~	30 Apl '43	
	Avalon (St Croix)			—"—	1 May '43	20 Sep '43	"D.D."

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

Date	Details	Captain's Signature

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
28 Apl '42	Q. A/G. 2 days	[illegible] C.O.			
4 July '42	" Tr "	[illegible] for C.O.			
22 Aug '42	Rated A/S.D.	[illegible] C.O.			

Name Robert John BOTHAM Conduct

SECOND CLASS FOR CONDUCT (Inclusive Dates)		CHARACTER, ABILITY IN RATING ON COMPLETION OF TRAINING, DISCHARGE FROM THE SERVICE, AND ANNUALLY, 31ST DECEMBER, WHILE MOBILIZED			
From	To	Character	Efficiency in Rating Noting Substantive Rating in Brackets	Date	Captain's Signature
		V. G.	Sat. (Ord. Sea.)	31 Dec. '41	
		V.G.	Sat. (OD)	31 Dec '42	
		V.G.	— (A.B.)	20 Sep '43	

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	Served

Six Copies to be rendered to Naval Service Headquarters

40

REPORT OF THE DEATH OF AN OFFICER, MAN, OR BOY

H.M.C.S. AVALON(ST.CROIX) at ST. JOHN'S, NEWFOUNDLAND,

Name (Christian names in full) Robert John BOTHAM

Rank or Rating A.B. Official No. V-11889 R.C.N.V.R.
(If unknown date of first entry)

Place of Birth Melfort, Sask. Date of birth 21st Jan.1921.

Occupation in Civil Life Farmer Religion United Church

Number of Years Service in the Navy (Long Service R.C.N. or mobolized service in the case of R.C.N. (Temp.) Reserve ratings)

1 year 266 days

Date of Death 20th Sept.1943. Place of Death AT SEA

Cause of Death LOSS OF H.M.C. SHIP

Nearest known relative or friend) Name Robert BOTHAM Relationship FATHER
Address Box 20, Plato, Sask.

Date on which the above was informed by ship SEP 27 1943 N.K.
Date on which death was registered with local officials
In the case of Imperial Service men whether Active Service Pensioner or Reserve, date on which the prescribed return was rendered to the Registrar General in London, Edinburgh or Dublin according to Nationality.

Not applicable

Place of Burial (If known) No burial Date of Burial (If known) Not applicable

Location, Number etc, of Grave (If known) Not applicable

Undertaker employed (If any) Not applicable

If borne for discipline only, date D.S.Q. or invalided, Not applicable

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(S.W. Davis),
Commander, R.C.N.,
COMMANDING OFFICER

The Secretary, Naval Board,
Ottawa, Canada.

14th October 1943

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.Con, Dom, Stat, Register.

C.N.S. 1121

LA/C

REGISTERED

AIR MAIL

N.S. 113-B-2314 PERS.(N)

43.

DEC 29 1943

Dear Mr. Botham:

Further to my letter of the 27th of September, 1943, in view of the length of time that has elapsed since your son, Robert John Botham, Able Seaman, Official Number V-11889, Royal Canadian Naval Volunteer Reserve, was reported "missing" after the sinking of H.M.C.S. "St. Croix", and as no information has since been received of his having survived, the Canadian Naval Authorities have now presumed his death to have occurred on the 20th of September, 1943.

May I again express the sincere sympathy of the Department in your bereavement.

Yours sincerely,

LETTER dispatched by PERSONNEL NAVAL
DEC 28 1943

SECRETARY, NAVAL BOARD.

Mr. Robert Botham,
Box 20,
Plato, Sask.

H. B. MONEY
PAY LIEUT. CDR. R.C.N.R.
OFFICER IN-CHARGE
NAVAL PERSONNEL RECORDS

MEMORANDUM:

The enrolment of the undermentioned ratings in the Division, R.C.N.V.R., is approved:

NAME	RATING	O.N.	DATE

BY ORDER,

SECRETARY, NAVAL BOARD.

The Commanding Officer,
H.M.C.S. " ",

REGISTERED

TFH/JLB

16

AIR MAIL

N.S. 113-B-2314 (Pers N)
27 September, 1943.

Dear Mr. Botham,

I deeply regret that I must confirm the telegram of the 27th of September, 1943, from the Minister of National Defence for Naval Services informing you that your son, Robert John Botham, Able Seaman, Official Number V-11889, Royal Canadian Naval Volunteer Reserve, is missing on war service.

According to the report received, your son is listed as missing, due to enemy action, while serving on Convoy duty in the Atlantic. For reasons of security further details of this incident of war cannot be released at this time.

It is requested that you will regard as confidential anything beyond the fact of your son's loss on war service until such time as an official announcement is made, as this information might prove useful to the enemy.

While your son is listed as missing and virtually no hope can be held out for his having survived, Canadian Naval Authorities are unable to make an official presumption of death until a period of not less than three months has elapsed. 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 informed 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 son has helped to maintain.

Yours sincerely,

LETTER dispatched by
PERSONNEL NAVAL
SEP. 27 1943.

SECRETARY, NAVAL BOARD.

Mr. Robert Botham,
Box 20,
PLATO, Saskatchewan.

H.D. Money

NAVAL PERSONNEL RECORDS

EMC

N.S. V-11889. F.D. 361
PERS. (N)

6 June, 1944.

THIS IS TO CERTIFY that according to official information Robert John Botham, Able Seaman, Official Number V-11889, 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 torpedoed and sunk by enemy action whilst on Convoy duty in the Atlantic.

SECRETARY, NAVAL BOARD.

V11889 OFFICIAL NUMBER | FILE NUMBER 113-B-2314 | OFFICIAL NUMBER V11889

NAME BOTHAM (Surname) Robert John (Given Names) DATE OF BIRTH 21 Jan.1921.

PLACE OF BIRTH Melfort, SAsk. OCCUPATION Farmer.

RELIGION United Church EDUCATION Grade 9.

RESIDENCE AT TIME OF ENLISTMENT: Street and No. Town Plato Province, etc Sask.

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
21	10	41	H.O.	5'11"	Brown	Blue	Fa ir	Malformation of nail onrt, index finger. Scar on chin.				

NEXT OF KIN RELATIONSHIP (in pencil) father NAME (in pencil) Mr Robert Botham

ADDRESS (in pencil): Street and No. Box 20 Town Plato Province, etc. Sask

Medals, Clasps, Hurt Certificates, Prize Money

Date (in figures)			Particulars
Day	Month	Year	

Examinations, Certificates, etc.

3143

Date (in figures)			Particulars	Date (in figures)			Particulars
Day	Month	Year		Day	Month	Year	
4	7	42	Qual "TR".				
9	7	43	Qual. Anti-Gas (1 day)				

Badges, G.C. or G.S.

Date (in figures)			1st, 2nd or 3rd G.C. or G.S.	Granted Deprived Restored
Day	Month	Year		

FILM NO. WSR-5301-5 DATE

Brief Particulars of Warrant or C.M. Punishments and C.P. Charges

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

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

W.S.G. APPLICATION 2363 RECEIVED

H.Q. 35—30M—5-41 (337)
N.S. 815—7-35

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

V11889 OFFICIAL NUMBER NAME BOTHAM (Surname) Robert John (Given Names)

P.I.B.

OFFICIAL NUMBER V11889.

Ship or Establishment	Rating	From Day	From Month	From Year	Remarks	Character	Efficiency	Date Day	Date Month	Date Year
Saskatoon Div. Str.	Ord. Smn.	21	10	41		V.G.	Sat.	31	12	41
Duty Div. Hdqts.	" "	29	12	41		V.G.	Sat.	31	12	42
Naden		21	4	42	D	V.G.	Sat.	20	9	43
Cornwallis	" "	27	8	42	EDO 970					
Stad acona	" "	28	8	42	(184257)					
Manitolin(Western Isle Tr.)	"	13	9	42	DRD.					
Stadacona	" "	21	10	42	DRD.					
Annapolis	" "	29	10	42	DRD.					
Stadacona	" "	6	11	42	H.D.O.13038					
St. Croix	" "	9	11	42	DRD.					
"	Able Smn.	29	12	42	Rated (249A/42871)					
DISCHARGED	" "	20	9	43	Missing on Active Service per Casualty List					

Non-Sub. Rating	Qualified Day	Qualified Month	Qualified Year	Re-Qualified Day	Re-Qualified Month	Re-Qualified Year

General Remarks

R.C.N.Hosp.29-7-42--To--3-8-42.
Absence:- 28-9-42 to 2PM-9-42

CANADIAN MEMORIAL CROSS sent to:
Mother: Mrs. Doris Botham,
Box 20. PLATO, Sask.
to date 13-1-44.

Date of Birth Dy.	Mo.	Yr.	Place Birth	Civil Occu. Main	Sub	Relig.	Place Residence		Prev. Enl.	
21	1	21	19	000	0	40	27	08 19	0 22	0 08 95

Enlist. Date Dy.	Mo.	Yr.	Act. Serv. Date Dy.	Mo.	Yr.	Str. Cat.		Ship Estab.	A	Br.	Rank
21	10	41	29	12	41			0380	0	08	94

Seniority Dy.	Mo.	Yr.	Str. Cat.	Non-Sub A	B	M St.		Coded	Checked
29	12	42	09			20	20-09-43	[illegible]	

VERIFICATION

CAMPAIGN STARS, DEFENCE MEDAL, WAR
NAVAL GENERAL SERVICE M

NAME IN FULL Botham Robert John RANK/RATING A.

SHIP	SERVICE			AREA		
	FROM	TO	DAYS		FROM	TO
Unicorn	29-12-41	30-4-42	123			
Monastanlin	1-4-42	20-10-42	37	—		
Annapolis	21-10-42	5-11-42	8	Atlantic		
H.T. Circe	9-11-42	20-9-43	316	Africa		
Discharged "Dead"						
to date	20-9-43					

VERIFIED BY Dorothy Forget

VERIFIED BY .....

ERIFICATION FORM
EDAL, WAR MEDAL, C.V.S.M. and CLASP.
L SERVICE MEDAL (1915).

.....A.B.....OFF.NO. ...V.11889.....ADDRESS .....

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

VERIFIED BY .....

.....

DIR. OF PERSONNEL RECORDS.

36

198687 113-B-2314

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 BOTHam, Robert. J. *Rating* A.B.

Official No. V-11889 *H.M.C.S.* ST. CROIX" *List* 5/2 - 6

*Who** D.D. *on the* 20 Sep' *19* 43

	$	cts.
Net sum due on ledger on account of Wages	22	99
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) Twenty five dollars, Four dollars and Three dollars charged to 30 Sep'43

Name of ship from which transferred St. Croix.

Total† Creditor 22 99

We hereby certify that we have every reason to believe that the above account contains a true statement of all wages, Effects, and other Credits or Debts on the Ledger of H.M.C.S. AVALON for St. Croix. amounting to a net balance† Creditor of Twenty Two dollars Ninety Nine cents.

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

Approved ..... Accountant Officer
A/Paymaster Lieut. Commander. R.C.N.V.R.
..... { Initials of the Assistant Accountant Officer

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

For Use at Headquarters. $.....cts.....credited on Inspector's certificate

No.....to.....

Signature.....

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

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

C.N.S. 46

10M—10-40 (7450)
H.Q. N.S. 815-9-45

HMCS"AVALON" Alt. Sheet. # 43649 of 16th October, 1943.

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.

LA/CM

N.S. 113-B-2314.
PERS.(N)

42

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:

NAME, RANK/RATING NO.	PLACE, DATE & CAUSE of DEATH	NEXT OF KIN
BOTHAM, Robert John, Able Seaman, O.N. V-11889, 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.	Father: Mr. Robert Botham, Box 20, PLATO, Saskatchewan.

ALLOTMENTS IN FORCE

IN FAVOUR OF	AMOUNT	INITIALS
Mrs. Doris Botham, Plato, Sask. (Mother).	$25.00 Stopped Sept. 30/43	
Rec. General War Savings Certificates	- $4.00 Stopped Sept. 30/43	
Confederation Life Ass. Toronto, Ont.	- $3.00 Stopped. Sept. 30/43.	

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.

N.P.R./S-2

F O R M B.

FILE: N.S. 113-B-2314. PERS.(N)

4-4

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

DEC 29 1943
(Date.)

Sir,

The following casualty has been reported -

NAME	RANK or RATING	NAVAL NO.
BOTHAM, Robert John	Able Seaman	V-11889, R.C.N.V.R.

DATE OF ENLISTMENT - 21st October, 1941. Active Service: 29th December, 1941.

DATE OF DISCHARGE - 20th September, 1943.

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

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

Reason for discharge and - when and where any disability was incurred, or where death occurred.

Missing, presumed dead. 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.

(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. Robert Botham

ADDRESS Box 20, PLATO, Saskatchewan.

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.

FORM 'A' RESPECTING THE ABOVE NAMED HAS BEEN PREVIOUSLY FORWARDED. PLEASE SEE REVERSE SIDE FOR DETAILS OF MARRIAGE ALLOWANCE, DEPENDENTS ALLOWANCE, etc.

REMARKS: .....

THIS PORTION OF FORM COMPLETED BY CHIEF TREASURY OFFICER, DEPARTMENT OF NATIONAL DEFENCE, NAVAL SERVICE.

Names of Dependents	Relationship	Maiden name of wife	Date of marriage and/or date of birth of children
Mrs. Doris Botham, Plato, Sask.	Mother.		
Rec.Gen. War Savings Certificates, Ottawa, Ont.		$4.00 Stopped Sept. 30/43.	
Confederation Life Ass. Toronto, Ont.		3.00 Stopped Sept. 30/43.	

	D. A.	A. P.	TOTAL
Monthly Rate:		$25.00	$25.00

To whom Paid: Mrs. Doris Botham ADDRESS: Plato, Sask.

Date of Enlistment:

Date of Discharge:

Inclusive date to which D.A. and/or A.P. was Paid: Sept. 30/43.

The final deduction of Assigned Pay for 25.00 has been made for the period from 1st to 30th of September 194 3.

Remarks:

Computed by.....

Checked by.....

Alec L. Boswell

for Chief Treasury Officer,
DEPARTMENT OF NATIONAL DEFENCE,
(Naval Service.)

The Secretary, The Canadian Pension Commission,
Room 228, Daly Building, OTTAWA, Ontario.

BR/VD

113-B-2314

113-B-2314

9

13th November, 1941

MEMORANDUM:

The enrolment of the undermentioned ratings in the Saskatoon Division, R.C.N.V.R., is approved:

NAME	RATING	O.N.	DATE
BOTHAM, Robert John	Ord. Smn.	V.11889	21 Oct./41
WRIGHT, Winston Thos. L.	Stoker I	V.11890	21 " "
FORD, Harvey Lyall	Ord. Coder	V.11896	30 " "
McGRATH, James Isiah	Stwd. Prob.	V.11898	30 " "
ROBERTSON, Victor James	Ord. Smn.	V.11899	28 " "
VADEY, Glen Campbell S.	Ord. Smn.	V.11900	29 " "
SLUSOSKI, Howard C.	Stoker I	V.11901	27 " "

BY ORDER,

(J. O. Cossette),
Naval Secretary.

The Commanding Officer,
Division, R.C.N.V.R.,
H.M.C.S. "UNICORN" (Saskatoon)
1st Avenue & 25th Street,
SASKATOON, Sask.