

V12442
BOTTOMLEY

STANLEY

RHODE

OCCUPATIONAL HISTORY FORM

113-B-1134

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

Section A—GENERAL INFORMATION

1. (a) Print name in full.....**BOTTOMLEY, Stanley R.**..... (b) Reg'l. No. **V.12442**
2. (a) Arm of service.....**Naval**..... (b) Unit.....**R.C.N.V.R. "NADEN"**..... (c) Rank.....**Ord. Sea.**
3. (a) Date of birth.....**24 Sep. '17**..... (b) Have you any dependents?.....**Yes**..... (c) Place of residence at time of enlistment.....**Edmonton, Alta.**
4. (a) Place of enlistment.....**Edmonton**..... (b) Date of enlistment.....**23 Sept. 40**

PLEASE
LEAVE
BLANK

Section B—EDUCATION AND TRAINING

5. (a) State age on finally leaving school.....**15**..... (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.).....**Grade 10 - Public School**
7. If you attended a university, give name of university and standing or degree secured.....**No**
8. (a) Did you ever enter upon a trade apprenticeship?.....**Yes**..... (b) If so, for what occupation?.....**Printing**..... (c) Did you finish it?.....**No**..... (d) If you did not finish it, how long did you serve at it?.....**2 years**
9. (a) What languages do you speak fluently?.....**English Only**..... (b) What languages do you read well?.....**English Only**

Section C—EMPLOYMENT CONDITION AT TIME OF ENLISTMENT

10. (a) State whether you were WORKING or NOT WORKING at time of enlistment. (Enter here only "Working" or "Not Working", as case may be; particulars are asked for below).....**Working**..... (b) At time of enlistment of what trade union or professional society were you a member?.....**No**

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.....**Edmonton City Dairy**..... Address.....**Edmonton**
19. Nature of employer's business (for instance, "farmer", or "building contractor", or "boot factory", or "iron foundry", or "retail store", etc.).....**Dairy Business**
20. (a) Your specific occupation.....**Milkman**..... (b) Number of years' experience at this occupation with any employer.....**1 year**
21. (a) Did your employer promise definitely to give you employment on discharge?.....**Yes**..... (b) Did your employer refuse to promise you employment on discharge?.....**--**..... (c) Do you wish to return to your former employment?.....**No**

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?.....**No**..... (c) In what provinces did you have experience?.....**--**

Section G—MISCELLANEOUS

26. Have you made any arrangements other than indicated above, for re-establishment in civil life after discharge?.....**No**
27. If so, state nature of your plans (for example, do you plan to return to school, or have you been assured of a job, etc.).....**--**
28. State any employment preference or ambition you may have, other than indicated elsewhere in this form.....**None**



DATE

2nd May, 1942.

194

SIGNATURE

S. R. Bottomley

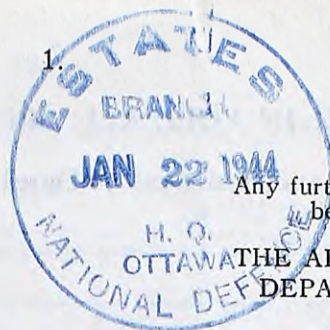
COPY TO
VWD
ES

JUL 4 1941

MEMORANDUM FOR

P. 64

Mrs. Bernadette Bottomley
11525 - 129th Avenue
Edmonton, Alberta



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-1134 FD. 288

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

BOTTOMLEY, Stanley R., A.B.

No. V. 12442, 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

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.....	Bernadeth Agnes Bottomley	21	11525-129 Ave., Edmonton, Alberta
2	Children of the Deceased and dates of their Births.....			
3	Father of the Deceased.....	Frank Bottomley (deceased Oct. 22/39 aged 54)		
4	Mother of the Deceased.....	Bertha Bottomley	57	11315-93 St. Edmonton, Alberta
5	Brothers of the Deceased	Full Blood		
		Half Blood		
		Dorothy Hayden	33	11315-93 St., Edmonton, Alberta
6	Sisters of the Deceased	Full Blood		
		Half Blood		
		Dorothy Hayden	33	11315-93 St. Edmonton Alberta
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	

ANSWER FULLY EACH QUESTION ON THIS PAGE

PARTICULARS AS TO IDENTITY

8	Full names of the deceased	Stanley Rhodes Bottomley
9	Date of his birth	Sept. 24, 1917
10	Place and date of his marriage.	Edmonton. Nov. 20, 1942
11	Place and date of his parents' marriage.	Lees, Wv. Heighley, Yorks., England. Nov. 27, 1909

PARTICULARS OF DOMICILE

12	Place where deceased was born.	75 Selbourne Grove, Heighley, Yorks. England.
13	State, in order, the Province, State and/or Country in which he resided before enlistment and the period of time in each.	(a) Alberta (b) Canada (c) (d)
14	Nature of employment before enlistment.	Retail Milk Salesman
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.	Edmonton

PARTICULARS OF ESTATE

17	Did he leave a Will?	No
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?	No
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.	None
20	Amount of War Savings Certificates held by deceased.	None
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.	Manufacturers Life, \$2,000 Ben. Bertha Bottomley (mother)
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.	a - No b - 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.)

(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

* widow of the deceased.

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

Bernadette Agnes Bottomley { Signature of Informant
11525-129 Ave. Edmonton Address

CERTIFICATE

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

See above. { Name of Informant } is the wife 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 Edmonton this 4th day of January 1944
 Signature of Clergyman, Priest, Magistrate, Commissioner or Notary Public { Leslie O. Hopkins Qualification a commissioner for oaths for Alberta
 Address 10728-106 Ave Edmonton

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



N. V. 5
5M-10-39 (2365)
N.S. 815-11-5

P068671

DEPT. OF
NATIONAL DEFENCE

SEP 30 1940

N.S. 113-161134
CANADA

ATTESTATION FORM

FOR MEN OF THE ROYAL CANADIAN NAVAL VOLUNTEER RESERVE

SURNAME Bottonley OFFICIAL NO. V 12 442

CHRISTIAN NAMES Stanley Rhodes MARRIED, SINGLE or WIDOWER Single

PERMANENT ADDRESS

RELIGION

11315-93 St, Edmonton Alta

L. of C.

DATE OF BIRTH

PLACE OF BIRTH

NAME AND ADDRESS OF NEXT OF KIN

Sept 24, 1917

Town Keighley
County Yorkshire
Province England

Mrs. Bertha
Bottonley
11315-93 St, Edmonton

PERSONAL DESCRIPTION ON ENROLMENT

HEIGHT	CHEST MEASUREMENT	HAIR	EYES	COM- PLEXION	WOUNDS, SCARS, MARKS
Feet..... <u>6</u>	Inflated..... <u>39</u>	<u>brown</u>	<u>blue</u>	<u>fair</u>	<u>appendix</u> <u>operation</u>
Inches..... <u>0</u>	Deflated..... <u>37</u>				
	Mean..... <u>38</u>				

DATE OF ENROLMENT

RATING ENROLLING FOR

TRADE OR CALLING AND IN WHOSE EMPLOY

Sept 23, 1940

Ordinary
Seaman

Wagon Driver
Edmonton City Dairies

(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

Personnel Records
Division.

1. Noted in Records I. J.
2. Index Card I. J.
3. Non-Sup. Card I. J.
4. Statistical Card I. J.
5. Roneo Strip I. J.
6. Pension Card I. J.
7. I. J.
8. I. J.
DATE 3 Oct. 1940

(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.

W. B. R. M.

(5) On being enrolled as a member of the Edmonton 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 23rd day of September 1940

Signature of applicant S. Bottomley

(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 1940

D. L. L. L.
Signature of Commanding Officer.

(D) OATH OF ALLEGIANCE

I, Stanley M. Bottomley 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 S. Bottomley

Witness D. L. L. L.

Date September 23, 1940 Rank Lieutenant Commander, R.C.N.V.M.

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

(E) CERTIFICATE OF DIVISIONAL COMMANDING OFFICER

Stanley M. Bottomley 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 Edmonton Div Division of the R.C.N.V.R.

D. L. L. L.
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.



P068672

SEP 30 1940

NS 113-11342
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 S. Battonley
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.
*Delete one.

This examination has been made in accordance with the current Instructions as to Medical Standards.

Age (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 revac- inated 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, Hemorrhoids, etc. (p)
22 yrs 11 mos.	166 lbs.	6 ft. ins.	Good	39 inches (a) maximum 37 (b) minimum 38 (c) mean	right eye 20/20 left eye 20/20 colour vision N.	3 vac. marks Childhood	*X-Ray Normal	Normal	Mild valley neuropathy 14 foot	Clear	Normal	Chlophy left testicle	Healthy	Normal

*Insert either:—NT (not taken) App. (approved) Pos. (positive) or Doubt. (doubtful)

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

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.

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

Signature of Candidate

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 Edmonton the 16th of Sept 1940

W. H. McKenney
Examining Medical Officer
(Rank) Surgeon-Lieut. R.C.N.

R.C.G.

ORIGINAL

No. 490 DEC - 8 1941

P177332

NS 113-B-1134
H.Q. File No.

DECLARATION OF ALLOTMENT

21

List and Number in Ledger	ALLOTOR	Rank or Rating	Official No.	Daily Rate of Pay
Venture for Minas 12-2-15	031017 Surname... BOTTOMLEY Christian Names } Stanley R.	O/Smn	V12442	\$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... BECKETT Christian Names } Miss B		11525 129th Ave., Edmonton, Alta.	\$20.00	New Jan.

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):—
\$20.00	Mrs. Bertha Bottomley	Edmonton, Alta.	To be continued.

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.

Allotter's Signature authorizing charges

O/Smn

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:—

Al Chapman
PAYMASTER SUB. LIEUTENANT, R.C.N.V.R.
for Accountant Officer

H.M.C.S. VENTURE

Forwarded

DEC 6 1941

THE NAVAL SECRETARY,

Department of National Defence,
(Naval Service)

Ottawa, Ont.

S. 63

100M-2-41 (9291)
H.Q. 815-9-63

NOT MORE THAN ONE MONTHLY ALLOTMENT SHOULD BE DEALT WITH ON THIS SHEET
FOR USE AT HEADQUARTERS ONLY

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

NAVAL SERVICE DIVISION OF						
F.E.	EST.	VOTE	PRI.	SUB.	OBJ.	AMOUNT
9999	400	02	31			20.00
CERTIFIED BY			AUTHORITY			
EXAMINED BY			FOR TREASURY OFFICER			

1 JAN 14 1942

ms
2/5/42

EDMONTON, ALTA.
11525-129TH AVE.,
MISS B. BECKETT,

BOTTOMLEY, STANLEY R.
V-12442

62

OF

ROYAL CANADIAN NAVAL VOLUNTEER RESERVE

I.C.N.S. 26973

Official Number V. 12442

Place of Birth Keighley, Yorkshire, England.

11315-9344, 6/10/75

O.H.F.

Wife (Bernadette) 11525# 129th Ave Edmonton
5/5/43 alt

Can Swim PT Good 17 Apr 2001

Identification Card No. 9006

[illegible]

	HEIGHT		COMPLEXION	HAIR	EYES	MARKS, WOUNDS, SCARS
	FEET	INCHES				
On Entry	6		fair	brown	blue	Appendix Opp.
On attaining 28 years						
Further Description if necessary						

NAVAL TRAINING AND

[illegible]

EXAMINATIONS AND NOTATIONS OTHER THAN THOSE ENTIRELY

DATE	WOUNDS AND HURT CERTIFICATE. MERITORIOUS SERVICE. SPECIAL RECOMMENDATIONS	CAPTAIN'S SIGNATURE	DATE
			30 May '41
			12 Mch '41
			28 May '43
			8 July '41

[illegible]

DATE	PARTICULARS	CAPTAIN'S SIGNATURE	DATE	PARTICULARS	CAPTAIN'S SIGNATURE
30 May '41	"L.S."	<i>[Signature]</i>	5 June '43	Re-issue T.C.N.S.	No. N.K.
12 Mch '41	E.T.I.	<i>[Signature]</i>			
28 May '43	41879. Re-issue I.C.N.S.	<i>[Signature]</i>			
8 July '41	G. & R. L. R III	<i>[Signature]</i>			

SHIP'S NAME	LIST AND NO.	RATING	FROM	TO	CHARACTER	ABILITY	CAPTAIN'S SIGNATURE
RENVR Edmonton		Ord. Sea.	16 Dec/40	31 Dec/40	V.G.	Sat.	<i>[Signature]</i>
RENVR Edmonton		Ord. Sea.	1 Jan/41	9 Apr/41	V.G.	Sat.	<i>[Signature]</i>
Naden		Ord. Sea.	10 Apr./41	9 July'41			
Givenschy		" "	10 July'41	31 July'41			
Naden		" "	1 Aug'41	1 Aug'41			
Givenschy (Minas)	✓	" "	2 Aug'41	30 Sep'41			
Lenture (Minas)	✓	" "	1 Oct'41	30 Nov. 41			
Protector (Minas)	✓	A.B.	1 Dec. 41	9 Dec'41			
Minas	✓	" "	10 Dec'41	31 Dec'41	V.G.	Sat.	<i>J.L. Barbour</i>
Avalon	✓	" "	1 Jan'42	9 Apr'42			
St. Croix	✓	" "	20 Apr'42	10 Aug. '42			
St. Croix	✓	" "	11 Aug.'42	31 Dec'42	V.G.	Sat.	<i>[Signature]</i>
Niobe (St. Croix)	✓	" "	1 Jan'43	30 Jan'43			
Avalon (St. Croix)	✓	" "	31 Jan'43	30 Apr'43			
	✓	" "	1 May'43	20 Sep'43	V.G.	—	<i>"D.D." [Signature]</i>

[illegible]

VERIFICATION

CAMPAIGN STARS, DEFENCE MEDAL, WAR M

NAVAL GENERAL SERVICE ME

NAME IN FULL

BOTTOMLEY.

Stacy. P.

NAVAL GENE
RANK/RATING

.....A.B.

SHIP

SERVICE

AREA

Q.

FROM

TO

DAY S

FROM

TO

Edmonton

16/12/40

31/12/40

15

Trinas

3/8/41

19/4/42

261

M. L. Ad

St Croix

11/5/42

20/9/43

406

Ute & Africa

Discharged "Head"

date 20/9/43

VERIFIED BY

BY *Georgette Jenaux*

VERIFIED BY

WAR MEDAL, C.V.S.M. and CLASP.
SERVICE MEDAL (1915).

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

VERIFIED BY

DIR. OF PERSONNEL RECORDS.

MEDALS AND MEMORIALS—DECEASED PERSONNEL

RCNVR Feb. 44 "ST. CROIX"

REGISTRATION No. DATE OF DESPATCH

(1) MEDALS
PERSON

ENTITLED TO Mrs. Berndette S. Bottomley - Widow

(Bernadette)

ADDRESS: ~~11525 - 129th Ave.~~, 11838 - 81st St.,
EDMONTON, Alta.

(2) MEMORIAL CROSS

WIDOW Mrs. B. Bottomley

ADDRESS: 11525 - 129th Avenue, Edmonton, Alta.

(3) MEMORIAL CROSS

MOTHER Mrs. B. Bottomley

ADDRESS: 11315 - 93rd St., Edmonton, Alta.

MEMORIAL B R

(1)

DATE DESP

REGN. NO. 261

(2)

13-1-44

(3)

13-1-44

DEPARTMENT OF VETERANS AFFAIRS

WAR SERVICE RECORDS

D OF D 20-9-43

AWARDS NAVY

D.D.

BOTTOMLEY	Stanley Rhodes	V-12442	A.B.	FILE No.
SURNAME (IN BLOCK LETTERS)	CHRISTIAN NAMES	REG. No.	RANK ON DISCHARGE	C.A.S.F. UNIT

WAR SERVICEBADGE

(CLASS)

No. Nil

DATE DESPATCHED:

ADDRESS:

CAMPAIGN MEDALS	REGISTRATION NUMBER AND DATE DESPATCHED
1939-45 Star	
Atlantic Star	
Africa Star	
C.V.S.M. & Clasp	18-4/10/49
War Medal	

(THE REVERSE TO BE USED FOR ESTATE PURPOSES)



Department of National Defence

Naval Service

Ottawa, Canada.

IN REPLY PLEASE QUOTE

No. N.S. 113-B-1134.
PERS.(N)

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
BOTTOMLEY, Stanley Rhodes, Able Seaman, O.N. V-12442, 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 enemy action.	Wife: Mrs. Berndette Bottomley, 11525-129th Ave., EDMONTON, Alta.

ALLOTMENTS IN FORCE

IN FAVOUR OF	AMOUNT	INITIALS
Mrs. Bernadette Bottomley, 11525-129th Ave., Edmonton, Alta.	D.A. \$35.00 A.P. 30.00 Bonus 1.40 <u>66.40</u> Stopped. Sept. 30/43	
Mrs. Bertha Bottomley, 11315-93rd St., Edmonton, Alta. (Mother).	D.A. \$25.00 A.P. 10.00 <u>\$35.00</u> Stopped Sept. 30/43	

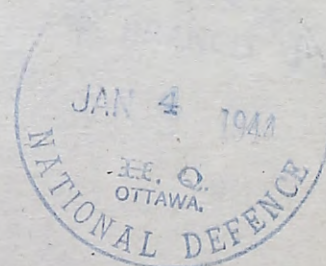
WILL: No Record

Yours truly,

H.B. Money

for
SECRETARY, NAVAL BOARD.

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



TO: D.N.P.A.

FILE No. N.S. V-12442

"WAR SERVICE GRATUITY"

COMPUTATION OF SERVICE

BOTTOMLEY Stanley Rhodes V-12442 A.B.
SURNAME CHRISTIAN NAMES OFFICIAL RANK OR RATING
IN FULL NUMBER ON DISCHARGE

CAUSE OF DISCHARGE: Missing on Active Service "D.D."

Application made by Mother - Next of Kin - Wife

16 Dec '40 - 15 Dec '42 - 730
16 Dec '42 - 16 Dec '42 - 16
Jan 31
Feb 28
Mar 31
Apr 30
May 31
June 30
July 31
Aug 31
Sep 20
1009

TOTAL SERVICE

Date of Active Service 16 Dec '40
Date of Discharge 20 Sep '43
Total No. of Days 1009
Less non qualifying service nil

Total Days 1009

OVERSEAS SERVICE

% Total No. of Days 667
Less non qualifying service nil

Total Days 667

Record of Service in other Forces (per Naval Records)

Branch of Service _____
Date of Active Service. CEINL
Date of Discharge _____

& % Overleaf

Computed By [Signature]
Checked By [Signature]

DATE: OCT 28 1944

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

NON QUALIFYING SERVICE

Overseas

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

(%) OVERSEAS SERVICE:

Where Serving	From	To.	No. of Days
Minas	2 Aug '41	19 Apr '42	261
St. Croix	11 Aug '42	20 Sep '43	406
			<u>667</u>

Minas	St. Croix
30	21
30	20
31	41
30	365
31	406
31	
28	
31	
19	
<u>261</u>	

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

V12442

OFFICIAL NUMBER

NAME BOTTOMLEY
(Surname)

Stanley Rhodes
(Given Names)

OFFICIAL NUMBER

V12442

Ship or Establishment	Rating	From			Remarks	Character	Efficiency	Date			Non-Sub. Rating	Qualified			Re-Op		
		Day	Month	Year				Day	Month	Year		Day	Month	Year	Day	Month	Year
Edmonton Div. Str.	Ord. Smn.	23	9	40		V.G.	Sat.	31	12	40	A/L.R. 3	8	7	41			
Duty Div. Hdqtrs.	" "	16	12	40		V.G.	Sat.	31	12	41							
Naden	" "	9	4	41		V.G.	Sat.	31	12	42							
Givenchy	" "	9	7	41		V.G.	Sat.	20	9	43							
Naden	" "	1	8	41													
Minas	" "	2	8	41													
"	Able Smn.	30	11	41													
Avalon	" "	20	4	42													
St. Croix	" "	10	8	42	DRD #53.												
DISCHARGED	" "	20	9	43	"Missing on Active Service" (Per Casualty list)												

GENERAL REMARKS

CANADIAN MEMORIAL CROSS sent to:
Mother: Mrs. Bertha Bottomley,
11315- 93rd St.,
EDMONTON, Alberta.
to date 13-1-44.
CANADIAN MEMORIAL CROSS sent to:
Wife: Mrs. Berndette Bottomley,
11525 - 129th Ave.,
EDMONTON, Alberta.
To date 13-1-44.

DATE OF BIRTH			PLACE		CIVIL OCCU.		REL. ED.		PERM. RESIDENCE		PREV. ENL.		RANK OR RATE ON ENLISTMENT		
DY.	MO.	YR.	BIRTH	MAIN	SUB	SIGN.	P.	CTV.	TOWN	SERV.	DIV.	A	BR.	RANK	
24	9	17	22	563	0	30X	8	11	03	0	15	0	08	95	
ENLIST. DATE			ACT. SERV. DATE		S. R.		DATE		CAMP		EX		RANK OR RATE		
DY.	MO.	YR.	DY.	MO.	YR.	CAT.									
23	09	40	16	12	40										
SENIORITY			STR.		NON-SUB		M.		CAMP		CHECKED				
DY.	MO.	YR.	CAT.	A	B	ST.									
30	11	41	09	08	00	20	20-09-43								

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

DEPARTMENT OF NATIONAL DEFENCE

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

173170

518

Application for War Service Gratuity

(Canadian Armed Forces)

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

1. Surname on termination of service..... BOTTOMLEY
(Print)
2. Christian Names STANLEY RHODES
(Print)
3. Service No. V12442 4. Paid rank or rating at date of termination of Service Able Seaman
5. Address, in full, to which payments of gratuity are to be forwarded.....
11315-93rd ST.
EDMONTON
ALTA.

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
<u>NAVY</u>	<u>V12442</u>	<u>AB</u>	<u>JULY? 1940</u>	<u>SEPT. 20/43</u> (DECEASED AT THIS DATE)
.....				
.....				

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

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

October 16, 1944
(Date)

(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.

(Mrs) Bertha Bottomley

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.

TO: [illegible]
FROM: [illegible]
SUBJECT: [illegible]

[illegible text]



[illegible text]

[illegible text]

Department of National Defence
Ministry of National Defence

DRAFTED BY HPR PER TFW
NS. 113-B-1134

S. 1320 D
20000M-4-43 (9240-1-2-3)
N. S. 815-9-1320-D.

NAVAL MESSAGE

To: MRS. BERNETTE BOTTOMLEY
11525 - 129TH AVENUE
EDMONTON ALBERTA.

From:

NSHQ

113-B-1134

CNP

THE MINISTER OF NATIONAL DEFENCE FOR NAVAL SERVICES DEEPLY
REGRETS TO REPORT THAT YOUR HUSBAND STANLEY RHODES
BOTTOMLEY ABLE SEAMAN, ROYAL CANADIAN NAVAL VOLUNTEER
RESERVE OFFICIAL NO V-12442 IS MISSING ON WAR SERVICE.
LETTER FOLLOWS.

27

DELIVERY CONFIRMED.

PASSED TO ADDRESSEE AT 271907Z

L/T

P/L

27-9-43

RV

5898

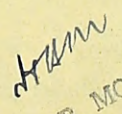
79

DEC 29 1943

113-B-1134 PERS. (N)

THIS IS TO CERTIFY that according to official information Stanley Rhodes Bottomley, Able Seaman, Official Number V-12442, 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.


SECRETARY, NAVAL BOARD.


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

SERVICE

File Number. 113-B-1134

NAME: *Battomley, Stanley Rhodes*O.N. *V12442.*PRESENT RANK/RATING: *Able Seaman.*DATE TAKEN ON ACTIVE SERVICE: *16. 12. 40.**47*SERVICESHIP OR ESTABLISHMENTFromTo*Haden**9. 4. 41.**Givenchy**9. 7. 41.**Minas**1. 8. 41.**Avalon L & Co.**St. Croix**10. 8. 42.*

WILL:

No.

NAME & ADDRESS OF

NEXT OF KIN: *Wife.**Bernadette Battomley
11525 - 129th Ave.,
Edmonton, Alberta.*

DISCHARGED PREVIOUSLY?

No.

REASON:

DATE:

Initialled by:

*M. S. Ferguson*Date: *28/9/43*

Section:

III R.C.N.V.R.

Naval Personnel Records.

(TO BE COMPLETED IN INK.)

27 September, 1943.

Dear Mrs. Bottomley:

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 husband, Stanley Rhodes Bottomley, Able Seaman, Royal Canadian Naval Volunteer Reserve, Official Number V-12442, is missing on war service.

According to the report received, your husband 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 husband'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 husband 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 husband has helped to maintain.

Yours sincerely,

SECRETARY, NAVAL BOARD.

Mrs. Berndette Bottomley,
11525 - 129th Ave.,
Edmonton, Alta.

H.B. Money
NAVAL PERSONNEL RECORDS

B-77 24

M.F.M. 16A
100M-6-40 (5692)
H.Q. 1772-39-1665

DEPT. NATIONAL DEFENCE

JAN 18 1943

H.Q. 113-B-1134
JW-1088
013026

CANADIAN ACTIVE SERVICE FORCE

SERVICE: MILITARY OR AIR

(NAVAL)

APPLICATION FOR DEPENDENT'S ALLOWANCE—FOR DEPENDENTS OTHER THAN THOSE PROVIDED FOR ON FORM M. 16

504504

The names required by Questions 1, 2 & 3 must be shown in black capitals.

1. Surname of applicant B.O.T.T.O.M.L.E.Y
2. Full Christian name or names Stanley
3. Age 23
4. Official Number V-12442
5. Rank A.B.
6. Unit, Station, or Establishment H.M.C.S. "ST. CROIX"
7. Date appointment or enlistment 19th June, 1940.
8. Date reported for duty 19th June, 1940.
9. Are you a member of the permanent forces, military or air? NAVAL
If so (a) State permanent establishment, unit or station NAVAL
(b) Are you receiving permanent force rates of pay and allowances?

PERS (NAVAL)		
REF	INIT	DATE
CNP		
DCNP		
DMNA		
DTNA		
PDG		
MDG		
DWS		
DNE		
C&W		
NPR		
SNFA	☒	<u>Seen</u>
PFB		
DEP		
ENO		

Question 8:
In the case of officers, the date of reporting for duty is the date pay commences and dependents allowance cannot commence prior to such date.

Questions 10 & 11:
Are to determine the degree of eligibility to an allowance where salary or wages continue in whole or in part.

10. If you are an employee of a Dominion or Provincial Government, Municipality, Board, Commission or other Public Authority, give particulars of such employment
11. If your salary or wages or any part thereof are being continued by such public authority during service, state amount per month
12. Give particulars of your civilian occupation together with total earnings and period of time employed in the six months preceding enlistment Milkman,
Edmonton City Dairy, about \$540.00

13. Name of dependent BOTTOMLEY Bertha Mrs
Surname Christian Name Mr. Mrs. or Miss
14. Address 11315, 93rd St., Edmonton, Alberta.

Question 14:
Give street name and number or post office box number, R.R. No. city, town or village and province.

N.F.A.
maximum D.A.
being paid to Mrs
Bottomley as per
JAT
for S.N.P.A.
22/2/43

15. Age of dependent.....56..... 16. Relationship.....mother.....

Questions 17 to 30
Have a bearing on
the eligibility for
allowance and the
amount payable.

17. With whom did the dependent reside in the 6 months' period preceding your enlistment?

Married Sister. Mrs Hayden, same address.
State name, address and relationship to dependent

18. With whom will the dependent make his or her home hereafter? Mrs Hayden,...
(State relationship) Sister

19. Is dependent being maintained in a Public Institution at the public's expense? no
Yes or no

.....
If yes, give name and location of institution

20. Why is dependent unable to provide for his or her own support? If by reason of mental or physical infirmity, give nature and duration of same together with name and address of family doctor, if any.....
.....
.....

21. From what date have you been contributing to the support of this dependent?.....
.....OCTOBER 1939.....

22. Are you the sole or partial support?.....PARTIAL
State whether sole support or partial support

23. (a) Give nature and amount of financial assistance (this may include board and room) given by you to this dependent in each of the 6 months prior to enlistment and total of same for the 6 months.....\$67.00 a month......
.....
.....

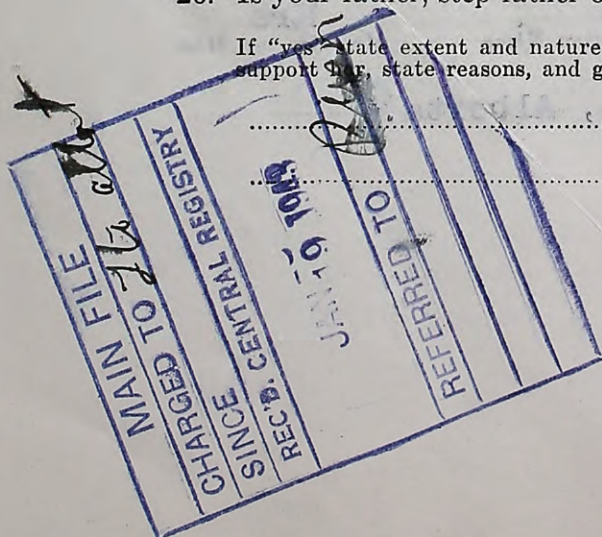
(b) Did your contributions entitle you to board and lodgings in return or did you provide your own board and lodgings?.....yes.....
.....

24. If this dependent became dependent upon you within the six months preceding enlistment, what change in the dependent's financial circumstances has made him or her so dependent upon you?.....no change.....
.....

25. Is the dependent your mother, step mother or foster mother?.....MOTHER
state which

26. Is your father, step father or foster father living?.....NO
Yes or No

If "yes" state extent and nature of his contribution to your mother's support and if he does not fully support her, state reasons, and give his age.
.....
.....



27. If dependent is father or mother, sister or brother, give particulars of your other brothers and sisters.

Name	Address	Age	Occupation	Married or Single
Mrs Hayden		30	wife	married

11315--93rd St., Edmonton, Alberta.

28. (a) If any of the above relatives contributed to such dependent's support, state name and nature and amount of contribution in the 6 months preceding your enlistment.

N I L

- (b) In any such instance did the relative contributing receive board and lodgings in exchange for such contributions. If "yes" explain:

- (c) Did any of the above relatives serve during the South African War 1899-1902 or during the First Great War? NO

Yes or No

If "yes" give name and unit or regimental number

29. Give full particulars of the dependent's average monthly income from all sources other than your own contributions, to the best of your knowledge, information and belief under the following headings.

		REMARKS
Insurance Annuity	\$ 35.00	
Dividends or Interest on Bonds and Shares	\$ nil	
Interest on Mortgages or Loans	\$ nil	
Rentals	\$ nil	
Workmen's Compensation*	\$ nil	
Old Age Pension*	\$ nil	
Mother's Allowance	\$ nil	
War Pension No.*	\$ nil	
War Veterans Allowance No.*	\$ nil	
Applicant's Assigned Pay	\$ 10.00	
Other Assigned Pay	\$ nil	
Other Family Contributions	\$ nil	
Other Income	\$ nil	
Total	\$ 45.00	

*Give Pension No. if in receipt of Pension.

30. Fifteen days' pay per month must be assigned to dependent to obtain allowance. If 15 days' pay per month has been assigned to dependent wife and children, an additional 5 days' pay per month must be assigned to this dependent.
30. What amount of pay have you assigned per month on behalf of this dependent? 5 days' pay. Rating married.

[OVER]

Prior to rating being Married
Allotment \$20.00 to mother
reduce to \$10.00 January 1943

4

31. Date assigned pay effective June 1939.

32. Have you made a prior assignment of pay. If so state number of days and to whom
see above

33. Have you made a previous claim for dependent's allowance? NO

If so give particulars of previous unit and official number under which applied for and
date of application

Certified that authorization for assigned
pay as stated has been received.

I certify that the above is a true state-
ment.

for L. Wright Pay Lt. RCNVR
A/ Paymaster Commander, RCNVR Rank

J. R. Bottomley
Signature of Applicant

Date ## 31st December 1942

Establishment, unit or station

6. m. es. "St. Louis"

Place H.M.C.S. "AVALON"

NOTE.—Dependents' allowances may not be awarded to more than three dependents of any officer or man.

113 - Q. 25.

113 - B. 1134.

- NAVAL SERVICE -

7 October, 1940.

From: The Director of Naval Personnel,
Naval Service Headquarters.

To: The Commanding Officer,
Edmonton Division, R.C.N.V.R.,
9722 - 102nd Street,
EDMONTON, Alberta.

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

<u>NAME</u>	<u>RATING</u>	<u>O.N.</u>	<u>DATE</u>
QUIRING, Frank	Ord. Sea.	V.12440	23 Sept./40.
REAL, John Blake	" "	V.12441	" " "
BOTTOMLEY, Stanley R.	" "	V.12442	" " "
GRIGGS, Harvey William	" "	V.12443	" " "
HARVEY, Mervyn Emerson	" "	V.12444	" " "
HELM, Robert William	" "	V.12445	" " "
HUMFORD, Lawrence Bert	" "	V.12446	" " "
MARTIN, Harry Archibald	" "	V.12447	" " "
KOWALCHUK, Thomas	" "	V.12448	" " "

(H.T.W. Grant),
Captain, R.C.N.,
Director of Naval Personnel.

Amv

K