

NATIONAL DETERMINENTAL DETERMI

ATTESTATION FORM

N.S TIAL TARA

(HOSTILITIES FORM)

P 38346

OFFICIAL NO. V27055

FOR MEN OF THE ROYAL CANADIAN NAVAL VOLUNTEER RESERVE

DAVENPORT

SURNAME.

CHRISTIAN N	AMES LO	RNE EDWAR	D	MAR	RIED, SINGLE	OR WIDOWER SINGLE
	PER	MANENT ADDRE	ess			RELIGION
34 Co:	rk St., G	uelph, Or	ntario.		Pr	esbyterian
DATE O	F BIRTH	- *P	LACE OF BIRTH	ı	NAME AND	ADDRESS OF NEXT OF KIN
23 May	15	Town Pa	lmerston	,	Mother:	Charlotte: Same address.
	y of: nglish nglish	Province On	llington tario.	,		1
*If not the so		RSONAL D			ENROLME	ENT
HEIGHT	CHEST ME.	ASUREMENT	HAIR	EYES	COMPLEXION	WOUNDS, SCARS, MARKS
Feet 5	Inflated	34 31	Brown :	Blue	Fair	None .
	Mean	32 <u>1</u>		<u> </u>		
DATE OF E	NROLMENT	RATING ENR		TRAI	DE OR CALLING	AND IN WHOSE EMPLOY
7 Apl.		E.R.A. 5t A/E.R.A. (Tem TORONIC	4th Clas	g Gil Yor	hinist: son Manufa k Rd., lph, Ont.	acturing Co.,
(1) Tha (2) Tha Force, and th	eclare as follow at I am a Briti at I am desirou at I accept an * (a) I have n Fo * (b) I serve	vs:— ish Subject dor is of being enro d agree to abid never served, an	niciled in Car lled as a mem le by the rule ad am not serv	nada. ber of the s of the sa ving in an	y Naval, Milit	n Naval Volunteer Reserve ary, Reserve, or Territorial iod shown, and attach my
*Cross out Claus	e not applicable.			1		ACTION OF THE PROPERTY OF THE SECOND OF THE PROPERTY OF THE PR
SERV	ED IN	RA	NK		FROM	Personn I TO -c. as
			·		1. 2.	Noted in 1210
	(c) I have	never been re count of unfitn	jected for or ess.	discharge		His Majesty's Foros on

(4) That the particulars contained above are correct and true according to the best of my knowledge and belief.

(3) On being enrolled as a member of the TORONTO, ON I. 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 (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. 141 Apl. Dated this 7th day of CERTIFICATE OF ATTESTING OFFICER (C) I hereby certify that all the foregoing statements were made by the volunteer above named, in my day of Apd. Signature of and rank of Attesting Officer. LIEUTENANT R. C. N. V. R. OATH OF ALLEGIANCE (D) I. LORNE EDWARD DAVENPORT 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. JENANT. R. C. N. V. R. 141 7 Apl. Rank Date The Oath of Allegiance may be administered by a Commissioned Officer of the Naval Service. CERTIFICATE OF ATTESTING OFFICER (E)

LORNE EDWARD DAVENPORThaving been duly enrolled to serve in the Royal Canadian Naval Volunteer Reserve Force, I have caused his name and every prescribed particular to be TORONTO, ONT. ... Division of the R.C.N.V.R. recorded in the Record Book of the...... or in the appropriate official documents.

Attesting Officer.

7 Aph.194......

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

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

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

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

OCCUPATIONAL HISTORY FORM

SENS TAU PER 13 NY CO

THIS FC IN IS TO BE COMPLETED FOR FACH 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	PLEASE
	LOUE FOLIED ALLENS OF - WITASE	LEAVE BLANK
	Arm of service R (N V R (b) Unit T) R N T (c) Place of residence 2 (c) Rank F R A 5	
	Date of birth MAY 23 1113 any dependents? YES at time of enlistment 34 CORK of 6 uslue	, M
4. (a)	Place of enlistment. TORUNTO	
	Section B—EDUCATION AND TRAINING	
5. (a)	State age on (b) Were you attending school Ily leaving school or college up to the time of enlistment?	
o. Stat	te definitely highest standing reached at public, technical of high school	
(for	instance—"4 years, Public School", "two years, High School", "Junior / V E A R H 16 H 5 (Hayd	
/. II y	ou attended a university, give name of	
8 (2)	versity and standing or degree secured	
ente	er upon a trade / 5 for what / A (H / N / 5 finish it?	
do)	vou speak fluently? ENGLISH do you read well? ENGLISH	
torum national	Section C—EMPLOYMENT CONDITION AT TIME OF ENLISTMENT	
10. (a)	State whether you were PKKINGorNOTWORK- (b) At time of en-	4
ING	at time of enlistment.	Í
ina'	ter here only "Work- or "Not Working", trade union or	
as	case may be; particu- work KING professional society are asked for below) work KING were you a member? A NE	
	<u></u>	*
¥7	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)	1
S TORROS TANLEN	d you ever been employed fairly regularly since leaving school?	:
100000000000000000000000000000000000000	e exact trade or occupation of a result of the state how long you	
at v	which you actually worked. MACHINIST had worked at this trade or occupation. YEARS	
13. If a	nswer to 11 be "No", state exact trade or occupation for which you feel qualified	
14. If y	ou had been employed after leaving school, state on you last worked fairly regularly before enlistment	
15. Give	e details of last	
	dayor if any Name 12 1 1 DON' 11 1 1 DO Address DO CONT	
conf	ure of employer's business (for instance, "farmer", or "building tractor", or "boot factory", or "iron foundry", or "retail store", etc.)	
17. (a)	If your last employment was (b) Date of dis-	•
natu	re and address of businesscontinuing it	
	Section E-PARTICULARS CONCERNING THOSE WHO WERE EMPLOYED AT TIME	
	OF ENLISTMENT	,
QUEST	TIONS 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 THE OF EMPLOYEE AND A C A G A G A G A G A G A G A G A G A G	
18. Nar	ne or employer	a ta
19. Nat	tractor", or "boot factory", or "iron foundry", or "retail store", etc.)	•
00 (-)	(b) Number of years' experience at	
21 (a)	cific occupation A A A A A A A A A A A A A A A A A A A	ď
dof	initely to give you / F sefuse to promise you to return to your ployment on discharge? former employment?	
em	proyment on discharger	
IF Y	OU 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	
00 (0)	Ctate nature of hydrogen (h) Where was	
or	professional practiceit located?t located?	(*) 40
23. (a)	Number of years (b) Have you made, or will you make plans to paged in this businessreturn to the same or a similar business on discharge?	
	Section F—PARTICULARS OF FARMING EXPERIENCE	
24. (a)	Do you wish to engage (b) Do you feel competent (c) If so, in what	2
- in f	farming after the war?to operate a farm?kind of farming?	
25. (a) bor	Were you (b) How many years' actual (c) In what provinces on a farm?farming experience have you had?did you have experience?	9
-	Section G—MISCELLANEOUS	i
26. Ha	we you made any arrangements other than indicated above, for re-establishment in civil life after discharge?	4
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to	enture to echeci or have you been required of a job etc.) I A VE DREN ASSURE	. 1 11
	telum to solitor, or lave you been assured or a job, etc.,	1. 800 1. 1
20. 016	so, state nature of your plans (for example, do you plant the school, or have you been assured of a job, etc.) A VE BRENASSURED ate any employment preference or ambition you by have, other than indicated elsewhere in this form:	40
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ma	to any employment preference or amount your	HF.

N.V. 17 15M-4-40 (4717) N.S. 815-11-17



CERTIFICATE of the SERVICE of

Jorne Edward DAVENPORT

in the Royal Canadian Naval Volunteer Reserve

Tr	aining Hea	dquarte	rs			R.C.N	I.V.R. Divis	ion		Officia	al Number 1-37055
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On re-enrolment—1	12 years' Serv	ice	ļ							**************	
Further Description	if necessary.	······································		,						•••••••	-
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NAVAL TRAINING and ACTIVE SERVICE

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NAVAL TRAINING and ACTIVE SERVICE

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Name Joine Edward DAVEN PORT Conduct

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AWARDS NAVY

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DAVENPORT	Lorne Edward	l .	V-27055	E.R.A.4	FILE No.
SURNAME (IN BLOCK	(LETTERS) CHRIST	IAN NAMES	, REG. No.	RANK ON DISCHARGE	C.A.S.F. U.NIT
WAR SERVICE BADGE (CLASS)	No. 205405	DATE DES	SPATCHED:		

ADDRESS:

CAMPAIGN MEDALS	REGISTERIOA IN MEDANG SIST PENTICHED
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(د	IF DISCHARGEE IS REPATRIATED PRISONER OF WAR MARK "POW"	IN HOSPITAL		CONFID	ENTIAL		ATTENTION Employmen	t
1. <u>/</u>	SURNAME	FIRST L.		INITIALS	E.R.A. 3/	d v	-27055	Male Male
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3. SERVI	CE OUTSIDE CANADA	- Yes	NO	IN WHAT SERVICE ?	Aa	vy		
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10. EDUCATIONAL COURSES WHILE IN SERVICE:-

NONE

11. MEDICAL OFFICER'S STATEMENT OF PHYSICAL LIMITATIONS (IF ANY):-

FIT

13. DISCHARGEE'S OWN STATEMENT OF FUTURE PLANS (IF ANY):-

New employment - machinist.

14. POST-DISCHARGE MAILING ADDRESS:-

34 Cork Street, GUELPH, Ontario.

15. BASIS FOR COUNSELLOR'S RECOMMENDATIONS:-

Davenport is a mature, friendly individual who speaks in a pleasant, calm and thoughtful manner. Has had considerable experience in civilian life as a machinist, operating lather, planer, shaper, radial drill, grinder and milling machines. Had considerable experience in the service in maintenace of boiler room and engine room equipment, which should be of value to him in fitting. Should be qualified for machining or fitting, but may require a little time to become used to machines with which he is not familiar. Is interested in obtaining small holding in a few years.

16. ACTION RECOMMENDED:-

New employment - machinist.

OTHER POSSIBILITIES 17. SUGGESTED BY COUNSELLOR:-

New employment - fitter for temporary period, followed by employment as machinist.

Ve erans Placement Officer, Employment and Selective Service Office, GUELPH, Ontario.

LACE DAT

I.M.C.S. STAR 10 August 1945.

SIGNATURE OF COUNSELLOR LT. (S.B.) J. R. MCRAE,
RANK OR APPOINTMENT RCNVR. Personnel Select

RANK OR APPOINTMENT RCNVR. Personnel Selection of E:-counsellor will check to see that this form has been completed as required. Ion officer