

V26057
COVE
GILBERT

LLOYD

V26057

OFFICIAL NUMBER

FILE NUMBER.

113-C-1437

OFFICIAL NUMBER.....V26057

NAME.....	COVE (Surname)	Gilbert Lloyd (Given Names)	DATE OF BIRTH.....	14th January, 1920
-----------	-------------------	--------------------------------	--------------------	--------------------

PLACE OF BIRTH.....Moneton, N.B.....OCCUPATION.....Machinist's Apprentice.....

RELIGION.....United.....EDUCATION.....

RESIDENCE AT TIME OF ENLISTMENT: Street and No. 53 York St. Town Moncton Province, etc N.B.

ENGAGEMENTS

DESCRIPTION

PREVIOUS SERVICE

[illegible]

NEXT OF KIN RELATIONSHIP (in pencil).....Mother.....NAME (in pencil).....Mrs. Michael Cowell.....

ADDRESS (in pencil): Street and No. 5-3 Clark St. Town Montclair Province, etc. N. J.

MEDALS, CLASPS, HURT CERTIFICATES, PRIZE MONEY

EXAMINATIONS, CERTIFICATES, ETC.

[illegible]

BADGES, G.C. OR G.S.

BRIEF PARTICULARS OF WARRANT OR C.M. PUNISHMENTS AND C.P. CHARGES

[illegible]

O.H.F. Received

[illegible]

SECOND CLASS FOR CONDUCT

From	To
------	----

W. S. G.
APPLICATION
9030
RECEIVED

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

V26057

OFFICIAL NUMBER

NAME COVE
(Surname)

Gilbert Lloyd
(Given Names)

OFFICIAL NUMBER V26057

Ship or Establishment	Rating	From			Remarks	Character	Efficiency	Date			Non-Sub. Rating	Qualified			Re-Qualified		
		Day	Month	Year				Day	Month	Year		Day	Month	Year	Day	Month	Year
Stadacona	E.R.A. 5/c	13	5	41		V.G.	Sat.	31	12	41							
Spikenard	" "	5	8	41		V.G.		10	2	42							
"	A/E.R.A. 4/c	21	10	41													
DISCHARGED	A/E.R.A. 4/c	10	2	42	Spikenard Casualty												
GENERAL REMARKS																	
Memorial Cross to Mother (See next of Kin)																	

DATE OF BIRTH	PLACE BIRTH	CIVIL	OCCU.	RECEIVED	PERM RESIDENCE	PAID	ENL	RANK OR RATE ON ENLISTMENT				
14	120	15	270	0	40	5	14	0	19	0	35	96
ENLIST DATE	ACT. SERV. DATE	STR.	ACT. SERV. DATE	SHIP OR ESTAB.	A	BR	RANK	RANK OR RATE				
13	05	4	13	05	4	1	35	95				
21	10	4	09	20	10	02	42	37	57	00		

RCNVR Oct. 45 "SPIKENARD"

MEDALS AND MEMORIALS—DECEASED PERSONNEL

REGISTRATION NO. DATE OF DESPATCH

(1) MEDALS
PERSON

ENTITLED TO Mr. Lloyd Cove - Father

ADDRESS: 53 York St,
MONCTON, N.B.

MEMORIAL BAR

DATE DESP

(1)

REGN. NO

515

(2) MEMORIAL CROSS
WIDOW

ADDRESS:

(2)

(3) MEMORIAL CROSS
MOTHER

Mrs. Muriel Cove

ADDRESS: 53 York St., Moncton, N.B.

(3)

1-4-42

D OF D 10-2-42

D.D.

DEPARTMENT OF VETERANS AFFAIRS

AWARDS NAVY

WAR SERVICE RECORDS

COVE	Gilbert Lloyd	V-26057	ERA.4	FILE No.
SURNAME (IN BLOCK LETTERS)	CHRISTIAN NAMES	REG. No.	RANK ON DISCHARGE	C.A.S.F. UNIT

WAR SERVICEBADGE

(CLASS)

No.

DATE DESPATCHED:

ADDRESS:

CAMPAIGN MEDALS	REGISTRATION NUMBER AN DATE DESPATCHED
1939-45 Star	
Atlantic Star	
C.V.S.M. & Clasp	1272
War Medal	

(THE REVERSE TO BE USED FOR ESTATE PURPOSES)

(5) On being enrolled as a member of the Special Service. 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 Head-
quarters prior to my discharge or when required so to do by any authorized person, or to pay compensation
for any loss or damage thereto other than fair wear and tear; and also not to wear such uniform or outfit
(which is and remains the property of the Crown) except when on naval duty.

Dated this 13th day of May, 1941

Signature of applicant Gilbert Lloyd Cove

(C) CERTIFICATE OF DIVISIONAL COMMANDING OFFICER

I hereby certify that all the foregoing statements were made by the volunteer above named, in my
presence, and that he has made and signed the above declaration in my presence on this 13th
day of May, 1941

H.P. Connor
Signature of Commanding Officer.
Lieutenant, R.C.N.V.R.

(D) OATH OF ALLEGIANCE

I, Gilbert Lloyd COVE. 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 Gilbert Lloyd Cove

Witness H.P. Connor

Date 13th May, 1941 Rank Lieutenant, R.C.N.V.R.

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

(E) CERTIFICATE OF DIVISIONAL COMMANDING OFFICER

Gilbert Lloyd Cove. 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 Special Service. Division of the R.C.N.V.R.

H.P. Connor
Commanding Officer.
Lieutenant, 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.

QH



N. V. 5
5M-10-39 (2305)
N.S. 815-11-5
DEPT.
NATIONAL DEFENCE
MAY 22 1941
N.S. 113C1437
CANADA

P 58710

ATTESTATION FORM

FOR MEN OF THE ROYAL CANADIAN NAVAL VOLUNTEER RESERVE

SURNAME COVE OFFICIAL NO. V26057

CHRISTIAN NAMES Gilbert Lloyd MARRIED, SINGLE or WIDOWER Single

PERMANENT ADDRESS		RELIGION
53 York St., Moncton, N.B.		United C.
DATE OF BIRTH	PLACE OF BIRTH	NAME AND ADDRESS OF NEXT OF KIN
14th January, 1920	Town <u>Moncton</u> County <u>Westmorland</u> Province <u>N.B.</u>	Mrs. Muriel Cove, (mother) 53 York St., Moncton, N.B.

PERSONAL DESCRIPTION ON ENROLMENT

HEIGHT	CHEST MEASUREMENT	HAIR	EYES	COM- PLEXION	WOUNDS, SCARS, MARKS
Feet <u>5</u>	Inflated <u>36</u>	<u>Brown</u>	<u>Hazel</u>	<u>Medium</u>	<u>Nil.</u>
Inches <u>7</u>	Deflated <u>32</u>				
<u>140</u>	Mean <u>34</u>				
DATE OF ENROLMENT	RATING ENROLLING FOR	TRADE OR CALLING AND IN WHOSE EMPLOY			
13th May, 1941	E.R.A. 5/c (temp)	Machinist's apprentice, C.N.R. Workshops, Moncton, N.B.			

(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 Nil. 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
	<u>Nil.</u>		

- (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.

Personnel Records Division.	
1. Noted in Records	<u>S.M.</u>
2. Fitness Card	<u>S.M.</u>
3. Non-Sup. Card	<u>S.M.</u>
4. Medical Card	<u>S.M.</u>
5. Roneo Strip	<u>S.M.</u>
6. Pension Card	
7.	
8.	
DATE <u>29.5.41</u>	



P 58711

Can. B. 207

60M-4-40 (4636)
N.S. 815-2-207

ORIGINAL

Certificate of Medical Examination of Officers, Men and Boys
NAVAL SERVICE OF CANADA
(R.C.N. OR RESERVE FORCES)

DEPT. OF NATIONAL DEFENCE
MAY 22 1941
N.S. 113-C1437
CANADA

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 COVE, Gilbert Lloyd 2
candidate for entry as FRAN RCNVR
and I believe him to be * in all respects fit for His Majesty's Service. He has signed
unfit for His Majesty's Service for the reason stated below. 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	Weight without Clothes	Height with Bare Feet	General Development	Chest Girth	Vision by— (i) Snellen's Types (ii) Colour Vision	Vaccinated or revac- cinated for Small Pox (Date)	Lungs, Heart, etc.	Abdomen, Hernia, etc.	Limbs and Joints	Skin	Ears and Hearing	Testes, Varicocele, etc.	Mouth, Teeth (No. deficient and No. defective, if any), Nose, Tonsils, etc.	Anus, Hemorrhoids, etc.
(a)	(b)	(c)	(d)	(e)	(f)	(g)	(h)	(i)	(k)	(l)	(m)	(n)	(o)	(p)
	lbs.	ft. ins.		inches (a) maximum 36 (b) minimum 32 (c) mean 34	right eye 6/9 left eye 6/6 colour vision N									
21 yrs 4 mts	140	5.7	Good											

*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 11.5 the 7 of May 19 41

Examining Medical Officer

(Rank)

SURGEON LIEUT.

DEFENCE MEDAL,
NAVAL GENERAL SERVICE

NAME IN FULL COVE, GILBERT L. LOYD RANK/RATING A/E

[illegible]

VERIFIED BY L. Sweet

VERIFIED BY

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

RATING .. *B/ERA* .. *4/C* OFF. NO. *V-26057* ADDRESS

[illegible]

BY DIR. OF PERSONNEL RECORDS.

CERTIFICATE of the SERVICE of

Gilbert Lloyd COVE.

in the Royal Canadian Naval Volunteer Reserve

Training Headquarters	R.C.N.V.R. Division	Official Number..... <i>U-26057</i>
Halifax	Halifax	"
		"

Date of Birth.....14th. January 1920.....	Name and Address of Nearest Relative or Friend (in pencil) Mother Muriel Corne 53 York St Moncton, N.B.
Place of Birth.....Moncton, Westmorland N.B.	
Place of Residence.....53 York St. Moncton N.B.	
Trade brought up to.....Machinists apprentice.	
Religion.....United Church.	

Can Swim :—P.P.T. Date.....19..... Signature..... Rank.....

P.S.T. Date.....19..... Signature..... Rank.....

[illegible]

PERSONAL DESCRIPTION								
—	Height		Chest (mean)	Weight	Hair	Eyes	Complexion	MARKS, WOUNDS, SCARS
	Feet	Inches						
On Entry.....	5	7	34	140	Brown	Hazel	Medium	Nil
On re-enrolment—6 years' Service.....								
On re-enrolment—12 years' Service.....								
Further Description if necessary.....								

[illegible]

NAVAL TRAINING and ACTIVE SERVICE

Year	SHIP OR ESTABLISHMENT	LEDGER		RATING	FROM	TO	CAUSE OF DISCHARGE
		List	No.				
	<i>Stadacma</i>			<i>ERA 5/2</i>	<i>13 May 41</i>	<i>4 Aug 41</i>	
<i>1941</i>	<i>Spikenard</i>			<i>— —</i>	<i>5 Aug 41</i>	<i>20 Oct 41</i>	
	<i>— " —</i>			<i>Act ERA 4</i>	<i>21 Oct 41</i>	<i>10 Feb 42</i>	<i>"D.D."</i>

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

[illegible]

NAVAL TRAINING and ACTIVE SERVICE

[illegible][illegible]

Conduct

[illegible]

3-7-89 V26057

TRUE COPY
OF THE
CERTIFICATE of the Service of

The corner of this Certificate is to be cut off if the man is discharged with a "Bad" character or with disgrace, or if specially directed by the Department of National Defence (Naval Service). If the corner is cut off, the fact is to be noted in the Ledger.

Gilbert Lloyd COVE

IN THE ROYAL CANADIAN ~~NAVY~~ NAVAL VOLUNTEER RESERVE

Halifax N.S.

Official Number... *V26057*

Date of birth *14 January 1920*

Nearest known Relative or Friend
(To be noted in pencil)

Where born { Province *New Brunswick*
Town or county *Moncton*

Name: *Muriel*

Relationship: *Mother*

Trade brought up to *Machinist's apprentice*

Address:

Religious denomination *United Church*

53 York St.

Date passed swimming test

Moncton N.B.

Man's signature on discharge to pension }

All Engagements, including N.C.S., to be noted in these Columns

Date of actually volunteering	Commencement of time	Period volunteered for	Date of actually volunteering	Commencement of time	Period volunteered for
1.	<i>13 May '41</i>	<i>Duration of Hostilities</i>	5.		
2.			6.		
3.			7.		
4.			8.		

Medals, Clasps, Etc.

Date received or forfeited	Nature of decoration	Date received or forfeited	Nature of decoration

Description of Person	Stature		Chest, In.	Colour of			Marks, Wounds and Scars
	Feet	In.		Hair	Eyes	Complexion	
On entry as a boy.....							
On advancement to man's rating or on entry under 28 years.....	<i>5</i>	<i>7</i>	<i>34</i>	<i>Brown</i>	<i>Hazel</i>	<i>Med</i>	<i>Nil</i>
On re-entry for C.S. or for Non-C.S. after attaining 28 years.....							
Further description if necessary.....							

Name Gilbert Lloyd Cove

[illegible]

Examinations passed and Notations or Qualifications other than those entered on History Sheets[illegible]

Name Gilbert Lloyd COVE

conduct

Efficiency in Rating—ARTICLE 607—K.R.

3. Definition of Terms—As a guide to Commanding Officers when making their award the following definitions are given of the terms to be used:—

Superior.....A man who performs his duties with more than average
to be written Supr. efficiency.

Satisfactory.....A man who performs his duties with average efficiency.

“ Sat.

Moderate.....A man who performs his duties in an efficient manner
“ Mod. but with less than average efficiency.

Inferior.....A man who performs his duties in an inefficient manner.

“ Inferior.

NOTE.—In these definitions “duties” means the general duties of the substantive rating held, and “average efficiency” means the average efficiency of all men in the Service holding the same substantive rating.

The substantive rating held by the man at the time is to be noted in brackets after each assessment thus: Supr. (A.B.).

Good Conduct Badges

Efficiency in Rating,
noting substantive rating
in brackets

Whether
R.M.G.
or not

Date _____

Captain's Signature

Date _____

1st, 2nd,
3rd

Granted, Deprived, Restored

V.G.T.

Sat (A/ER.A4/c)

31 Dec '41

V.G.

(A/ERA.4)

10 Feb 45

Time forfeited

Date _____

P., D.,
C.,
C.P.,
W.T.

Number of
days

Award
ed

Served

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

4
NAVY

DECEASED
MEMBER'S
NAME

Gilbert Lloyd

(CHRISTIAN NAMES)

PAYEE

Director of Estates,
308 Sparks St.,
Ottawa, Ont.

ADDRESS

COVE

for Service Estate of
Gilbert L. COVE
NS V-26057

REGISTER NO.

9030

FILE NO.

NS V-26057

DATE

7 Aug. 1945

SERVICE NO.

V-26057

FINAL RANK OR RATING

A/ERA 4/C

DATE OF TERMINATION OF OVERSEAS SERVICE

10 Feb. 1942

DATE OF DISCHARGE

10 Feb. 1942

A. TOTAL QUALIFYING SERVICE

NO. OF DAYS 274 EQUAL TO 9 COMPLETE PERIODS AT \$7.50

\$ 67.50

B. QUALIFYING OVERSEAS SERVICE

NO. OF DAYS 190 LESS 4 INELIGIBLE DAYS, EQUAL TO 186 DAYS @ 25C. PER DAY

\$ 46.50

C. SUPPLEMENT FOR OVERSEAS SERVICE

DAILY RATES AT DISCHARGE

PAY \$ 3.05
SUBSISTENCE OR LODGING \$ 1.45
AND PROVISION ALLOWANCE
ADDITIONAL PAY H.L.M. \$.30

DEPENDENTS' ALLOWANCE 1/30 OF \$ NIL \$ NIL
TOTAL \$ 4.80 X7 = \$ 33.60
NO. OF DAYS 190 X \$ 33.60
183

\$ 34.88

D. WAR SERVICE GRATUITY

\$ 148.88

E. DEDUCTIONS

OVERPAYMENT OF

PAY AND ALLOWANCES \$
DEPENDENTS' ALLOWANCE \$
AND ASSIGNED PAY \$

NIL

OTHER DEDUCTIONS

\$

F. TOTAL AMOUNT PAYABLE

\$ 148.88

G. YOUR PORTION OF GRATUITY IS—

DEPENDENTS' ALLOWANCE IN ISSUE TO YOU \$ _____ OF \$ _____
TOTAL DEPENDENTS' ALLOWANCE IN ISSUE \$ _____

= \$ 148.88

Voucher 1925- Aug. 22/45-

CERTIFICATE

I CERTIFY THAT THE AMOUNT HAS BEEN CORRECTLY COMPUTED AND IS PAYABLE IN ACCORDANCE WITH THE TERMS OF THE WAR SERVICE GRANTS ACT, 1944 AND THE REGULATIONS ISSUED THEREUNDER.

PREPARED BY

GW

CHECKED BY

AW

TREASURY

CHECKED BY

DATE

J. S. Brice 11/1/45

for Dir Naval Pay Act

P065352

NATIONAL DEFENCE

DPW 1942

113-C-1437

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 COVE, Gilbert L. Rating a/ERA 4/c
Official No. V-26057 H.M.C.S. "SPIKENARD" List 12-1-16
Who* Was Discharged Dead on the 10 th February P.M. 19 42

Net sum due on ledger on account of Wages.....	\$	cts.
	72.	58
Proceeds of sale of Effects charged against Wages, brought from the other side	---	---
CASH—	\$	cts.
Proceeds of sale of Effects, paid for in Cash, brought from the other side.....	---	---
Found amongst Effects.....	---	---
Debts collected \$.....	---	---
Cash debited in the Accountant Officer's Cash Acct.....	---	---
If in debt in ledger, amount to be stated (in red ink).....	---	---
(1) <u>Twenty Dollars.</u> 28 th		
Rate of allotment (in words) (2) <u>Five Dollars.</u> charged to Feb 42.		
Name of ship from which transferred. <u>HMCS "SPIKENARD"</u>		
Total†..... <u>Dreditor</u>	610 72.	58 x

We hereby certify that we have every reason to believe that the above account contains a true statement of all wages, Effects, and other Credits or Debts on the Ledger of.....
HMCS "SPIKENARD" amounting to a net balance†..... Creditor
of Seventy- Two ----- dollars Fifty- Eight ----- cents.

Dated on board H.M.C.S. SAVALON at St. John's,
Newfoundland this 23 rd. day of March 19 42

Approved

R. Schwede
CAPTAIN, R.C.N.

A/Pay. Lieut- Cdr. RCNVR

Pay. Lieut. RCNVR
Commanding Officer.

Accountant Officer

Initials of the Assistant Accountant Officer

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

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

Signature.....

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

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

C.N.S. 46

10M-10-40 (7450)
H.Q. N.S. 815-9-45

Deposited to Naval Estates by Official Receipt
No. 60-12234 dated April 15th, 1942.

G.B.B.
16-4-42.

ACCOUNT OF SALE OF THE EFFECTS

SOLD before the Mast, the.....day of.....19.....

[illegible]

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.

MEMORANDUM FOR

P. 64

Mrs. Muriel Cove,

53 York St.,

Moncton, N. B.

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-C-1437 FD. 369.

DEPARTMENT OF NATIONAL DEFENCE
OTTAWA, ONT.

March 10th, 2.
194

For the purpose of record and in the event of there being any balance of pay, medals or memorials available for distribution (according to law) on account of the late

A/E.R.A. 4/c Gilbert Lloyd COVE, No. V26057.

H.M.C.S "Spikenard", R. C. N. V. R.

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

H.R. Wade

(H.R. Wade) Lieut. Cdr., RCNVR,
for (L.M. Firth) Major,
Administrator of Estates.



ANSWER IN FULL ALL APPLICABLE QUESTIONS

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

Degrees of Relationship	RELATIVES required to be accounted for	INFORMANT'S STATEMENT		
		NAME IN FULL of any Relative, if any, in each degree inquired for	Age	ADDRESS IN FULL of each surviving Relative, opposite his or her name, and date of death of each deceased relative
1	Widow of the Deceased.....	-----		
2	Children of the Deceased and dates of their Births.....	-----		
3	Father of the Deceased.....	LLOYD COVE	49	53 York St., Moncton N.B.
4	Mother of the Deceased.....	MURIEL MABEL COVE	45	53 York St., Moncton N.B.
5	Brothers of the Deceased	Full Blood	-----	
		Half Blood	-----	
6	Sisters of the Deceased	Full Blood	Audrey Edith Cove 23 Florence Phyllis Cove 20	53 York St. Moncton N.B. 53 York St. Moncton N.B.
		Half Blood	-----	
7	Names of brothers or sisters (whether of the full or the half blood) of the De- ceased, who are dead, and date of death of each.	Names and ages of their children (if any)	Address of their children	

ONLY IF NO RELATIVES IN THE DEGREES ABOVE ARE NOW LIVING, THE FOLLOWING PARTICULARS SHOULD BE GIVEN

		NAMES OF THOSE LIVING	Age	ADDRESS IN FULL
8	Grand-Parents of the Deceased....			
9	Uncles and Aunts by blood of the Deceased (not Uncles and Aunts by marriage).....		Age	

FULL PARTICULARS AS TO IDENTITY

10	What is the full name of the deceased?	GILBERT LLOYD COVE
11	Give the month and year of his birth.	January 14, 1920
12	Where and when were his parents married?	Parents were married at Moncton, N.B. February 20, 1918
13	If deceased was married, state place and date of marriage.	-----
14	Did he leave a Will? If so, a copy should be attached hereto.	-----
15	Did he leave a bank account? If so, give full particulars.	Bank Account of \$43.07, with possible extra few cents of interest in the Royal Bank of Canada, Moncton Branch Bank Book No. "659"
16	Is there any other estate which will necessitate application being made for Probate of the Will or Letters of Administration of the estate?	
17	State your own postal address in full.	53 York St., Moncton, N.B.

PARTICULARS OF DOMICILE

18	Where was deceased born?	Moncton, N.B.
19	State, in order, the Province (or State) and country in which the deceased resided and the period of time in each, and in which last.	Lived in Moncton all his life prior to enlistment.
20	What was the nature of his employment?	Machinist apprentice in the C.N.R. New Shops in Moncton, N.B.
21	Did he own the premises in which he lived? If so, where?	-----
22	Did he ever state verbally, or in writing, where he intended to make his permanent home?	Canada

OTHER PARTICULARS

23	Did the deceased after enlistment incur any debts for:— (a) His own separate board and lodging while on service. (b) Service clothing and equipment. An itemized account for each such debt should be attached hereto, and if same is correct you should mark the bill "approved" and sign same. If believed incorrect, give particulars.	No
24	Have you or any other relative paid the funeral expenses or any part thereof? If so, attach itemized accounts showing amount paid, and by whom. (NOTE:—The Government pays funeral expenses within the amounts authorized in the Regulations, where death occurs and burial is made Overseas as well as where death occurs and burial is made in Canada, and if a relative has already paid those expenses the Government will reimburse such relative to the extent of the amount authorized in the Regulations. Any amount of such expenses in excess of those authorized in the Regulations is not payable by the Government nor is it chargeable against the service estate of the deceased.)	

(PLEASE TURN OVER)

DECLARATION

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

I hereby declare that the foregoing particulars are correct, and a true and complete statement of all the relatives that the deceased ever had in the degrees inquired for ; and that I am the

* Mother of the deceased.

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

Muriel Nobel Coe

{ Signature of Informant

CERTIFICATE

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

*See above

Meacham N.B. { Name of Informant } is the * Mother of the Deceased above described, and I believe the above Declaration and the Statement of Relatives made by the Informant and signed in my presence to be complete and correct.

Dated at Meacham N.B. this 18 day of March 1942

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

R. C. Hayes

Qualification

Commissioner for taking affidavits to be used in the Supreme Court

Address

45 Lockwood Ave Meacham N.B.

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

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

CANADIAN GOVERNMENT RAILWAYS
EMPLOYEES' RELIEF AND INSURANCE ASSOCIATION
OFFICE OF THE SECRETARY-TREASURER

C. C. MACDONALD
SECRETARY-TREASURER

No. A 27408

C/M.

MONCTON, N.B. March 20, 1942.

Lieut Cdr. H. R. Wade, RCNVR,
Estates Branch,
Naval Service,
Department of National Defence,
Ottawa, Canada.

Your file H.Q. N.S. 113-C-1437 FD 369.

Dear Sir:

I have been advised that one of our members, Gilbert Lloyd Cove, has been reported as lost in the sinking of the H.M.C.S. "Spikenard" on February 10, 1942.

Please let me know if your Department has officially closed this member's record; and if so, would you forward me an official document to this effect, as it is the desire that the Insurance be paid as quickly as possible after it has been definitely established that the employee is presumed dead.

Yours truly,

C. C. MacDonald

Secretary-Treasurer.



ESTATES BRANCH

March 10th, 1942.

Mrs. Muriel Cove,
53 York St.,
Moncton, N. B.

COVE, Gilbert Lloyd, A/E.R.A. 4/c (Deceased).
No. V26057, H.M.C.S. "Spikenard" RCNVR.

Dear Mrs. Cove:

The regretted death of your son, above named, has been reported to this Branch which is responsible for the administration and distribution of his Service estate.

In order that Headquarters' records concerning him may be complete and so that proper distribution may be enabled to be made of his estate, including any balance of pay outstanding, it is necessary to ask you to complete and return to this Branch the enclosed Form P.64. Kindly oblige, therefore, as soon as possible.

When all documents and reports concerning the Service estate are received here (a reasonable time must be allowed for this purpose) a further communication will be sent to you.

Yours faithfully,



(H.R. Wade) Lieut. Cdr., RCNVR,
for (L.M. Firth) Major,
Administrator of Estates.

HRW/SG.
Encl. 1.



Department of National Defence
Naval Service

IN REPLY PLEASE QUOTE
No. N.S. 113-C-1437

36952

Ottawa, Canada.

February 25, 1942.

33

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
COVE, Gilbert Lloyd A/E.R.A. 4/c., V26057, R.C.N.V.R.	High Seas. 10 February 1942. Missing, presumed lost on Active Service. He was serving in H.M.C.S. "Spikenard", which was torpedoed and sunk.	Mother: Mrs. Muriel Cove, 53 York St., MONCTON, N.B.

<u>In favour of</u>	<u>ALLOTMENTS IN FORCE</u>	<u>Amount</u>	<u>Initials</u>
Mr. Lloyd Cove, 53 York St. Moncton, N.B.		\$20.00	let
Bond Clothes Shop 434 Barrington St. Halifax, N.S.		\$5.00	

Allotment to be stopped Feb.28/42.

WILL: No record

Yours truly,

R. A. Barrington
SECRETARY, NAVAL BOARD.

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



20 June, 1942.

THIS IS TO CERTIFY that according to official information Gilbert Lloyd Cove, Engine Room Artificer 4th Class, Official Number V-26057, Royal Canadian Naval Volunteer Reserve, is missing and presumed dead by Naval Authority. He was serving in H.M.C.S. "SPIKENARD" which was torpedoed and sunk by enemy action on the 10th of February, 1942.

63

Red
SECRETARY, NAVAL BOARD.

(La)

Man

ESTATES BRANCH

June 8, 1942.

61

Mr. Lloyd Cove,
53 York Street,
Moncton, N. B.

COVE, Gilbert L., A/WRA 4 (Deceased)
No. V.26057, H.M.C.S. Spikenard

Dear Mr. Cove:

The Imperial War Graves Commission has forwarded to this Branch your letter to it of the 30th ultimo enquiring as to a grant to bear the cost of placing your son's name on the family headstone in the cemetery at Amherst.

I note one of my Officers wrote you on the 21st ultimo and from my reading of the third paragraph thereof it is thought that you misinterpreted same and this letter is written in explanation. The paragraph referred to dealt only with members of the permanent Naval Force in peace times. The moment war broke out these Regulations ceased to continue in force and all commemoration of graves for all the Forces of Canada on Active Service, Naval, Army and Air Force, came under the jurisdiction of the Imperial War Graves Commission, Canadian Agency. That Commission was authorized to erect headstones of an approved design not only in Government owned plots, but also, with the consent of the relatives, on family plots or single graves. These headstones are available without cost to the next-of-kin. They are suitably marked. It naturally takes some little time to catch up on all graves. There is no authority whatsoever for any money to be granted for marking of an existing headstone.

It is regretted if you misinterpreted the earlier letter of one of my Officers to you.

Yours faithfully.

4

(L.M. Firth) Major,
Administrator of Estates.

LME/JMcF

ACCOUNT OF SALE OF THE EFFECTS

SOLD before the Mast, the..... day of..... 19.....

[illegible]

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.*

<p>.....Signature</p> <p>.....Rank</p>	<p>.....Signature</p> <p>.....Rank</p>
--	--

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.

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 COVE, Gilbert L. Rating A/ERA 4/c
Official No. V-26057 H.M.C.S. "SPIKENARD" List 12-1-16
Who* Was Discharged Dead on the 10 th February P.M. 19 42

Net sum due on ledger on account of Wages.....	\$	cts.
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.....	\$	cts.
Found amongst Effects.....	---	---
Debts collected \$.....	---	---
Cash debited in the Accountant Officer's Cash Acct.....	---	---
If in debt in ledger, amount to be stated (in red ink).....	---	---
Rate of allotment (in words) <u>(1) Twenty Dollars.</u> <u>28 th</u> charged to <u>Feb 42.</u>		
Name of ship from which transferred <u>HMCS "SPIKENARD"</u>		
Total†.....	Creditor	72. 58 ^x

We hereby certify that we have every reason to believe that the above account contains a true statement of all wages, Effects, and other Credits or Debts on the Ledger of.....
HMCS "SPIKENARD" amounting to a net balance†..... **Creditor**
of Seventy- Two dollars Fifty- Eight cents.

Dated on board H.M.C.S. AVALON at St. John's,
Newfoundland this 23 rd. day of March 19 42

Approved R. Schwede Accountant Officer
A/Pay. Lieut- Cdr. RCONVR
Pay. Lieut. RCONVR
CAPTAIN, R.C.N. Commanding Officer.

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

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

Signature.....

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

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

C.N.S. 46 ^x Deposited to Naval Estates by Official Receipt
10M-10-40 (7450) No. 60-12237 dated April 15th, 1942.
H.Q. N.S. 815-9-45

16-4-42.

S. 2053
30M-10-1-1313
N.S. 815-2063

SEW
Action Taken
MAR 19 1942
Cheque Making Section

42859

B.....368

STOP NOTICE

(Navy Allotments)

NATIONAL DEFENCE

MAR 10 1942

NS 113-C-1437

ORIGINAL

LIST NUMBER	ALLOTOR'S SURNAME	CHRISTIAN NAME	RANK OR OFF. No.
AVALON for "SPIKENARD" 12-1-16 COVE	<i>Presumably noted here</i>	Gilbert L.	a/ERA4 V-26057

PARTICULARS OF ALLOTMENT BEING STOPPED

RATE PER MONTH	DATE (Inclusive to which Allotment is to be paid)	NAME OF ALLOTTEE	RELATIONSHIP TO ALLOTOR	ADDRESS
20.00	28 th February 1942.	Not known <i>Mr. Lloyd & Coe</i>	Not known <i>53 York St</i>	not known <i>Moncton NB</i>

Entered in:—

Fair Ledger.....

Rough Ledger.....

Not Available- D.D.

Signature of Allottor

Cause of Stoppage

(When an Allotment in favour of an Allottee, on whose account M.A. is credited has to be stopped, information regarding the stoppage of M.A. should be also inserted here.)

Discharged Dead to Date 11 th February 1942.

THE CHIEF TREASURY OFFICER
DEPARTMENT OF NATIONAL DEFENCE
(Naval Service)
OTTAWA, CANADA

Pay Sub- *A. J. J. J.* Liut RCNVR for Accountant Officer

H.M.C.S. AVALON

Date forwarded..... MAR 5 1942

FOR USE AT HEADQUARTERS ONLY

1. Index Card Destroyed.....
2. Noted in Birth Record Ledger.....
3. M./A. Card Destroyed.....
4. Ledger Account Closed.....

INITIALS	DATE

INSTRUCTIONS FOR ACCOUNTANT OFFICERS

When an Officer or Rating has two or more allotments in force they are not to be combined but treated as two or more allotments, and therefore Stop Notices should be dealt with accordingly.

A Stop Notice form should be filled out immediately an allotment has to be stopped, numbered consecutively and despatched at once to Headquarters.

A night-letter giving the Stop Notice number and other required particulars should be sent when it is impossible to forward this form in time to reach Headquarters by the 16th of the month.

This night-letter should be immediately confirmed by a Stop Notice form.

Canadian Allotments, if any, of R.N. ranks or ratings returning to R. N. should be stopped and debited prior to discharge.

Allotments continue to be paid by Headquarters until a Stop Notice is received. A Stop Notice should, therefore, be sent whenever an allotment has to be discontinued for reasons such as discharge, etc.

N.S. 113-C-842
113-C-637
113-C-1437
113-B-519
113-B-1082
62-D-296
113-D-608
62-C-363

ALB/HR

March 9, 1942.

Mr. H. W. Nichol,
Canadian Pension Commission,
Ottawa, Ontario.

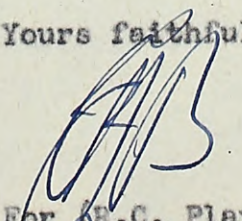
Dear Sir:

With reference to your letter dated the 4th instant relative to the casualty notification you receive from this Office regarding payment of allotments, it is observed that one form submitted to the Administrator of Estates indicates every allotment which might be payable on behalf of any one officer or rating while the form to the Canadian Pension Commission merely gives information regarding cases if and when Marriage Allowance and/or Dependent's Allowance is paid.

It was, of course, the result of agreement that the form addressed to the Canadian Pension Commission omit any allotment which had no reference to Marriage or Dependent's Allowance. On the other hand, in completing the form to be addressed to the Administrator of Estates, it was necessary to include all allotments paid on behalf of personnel in the Navy.

It is now understood that it is the desire of the Canadian Pension Commission that the form completed by this office for them indicate payments made by this Department for assigned pay to fathers, mothers, sisters or brothers. This information will, in future, be given on the form.

Yours faithfully,


For (R.C. Playfair)
Chief Treasury Officer,
Naval Service.

10111

DEPARTMENT OF NATIONAL DEFENCE
Naval Service

OFFICE OF THE CHIEF OF THE NAVAL SERVICE

REMARKS: (cont.)

The following summary has been reported:

ON JUNE

WILLIAM ROYAL

NAME

DATE OF BIRTH

DATE OF DISCHARGE

REMARKS

He was discharged from the service on 11 June 1945.

REMARKS

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

It is requested that the following information be furnished to the Department of National Defence as soon as it is available.

NAME OF THE DEPARTMENT

NAME

DATE OF BIRTH

REMARKS

It is requested that the following information be furnished to the Department of National Defence as soon as it is available.

OFFICER'S OR EMPLOYEE'S NAME AND ADDRESS

PAID TO

PAID TO

REMARKS

REMARKS

REMARKS

REMARKS

Checked by

Checked by

The Secretary
The Canadian Forces Commission

(See reverse side for details)

DEPARTMENT OF NATIONAL DEFENCE
- Naval Service -

Ottawa, Canada,

... February 25, 1942, ...
(Date)

Sir:

The following casualty has been reported -

<u>NAME</u>	<u>RANK or RATING</u>	<u>NAVAL NO.</u>
<u>COVE, Gilbert Lloyd</u>	<u>A/E.R.A. 4/o</u>	<u>V-22057</u>
<u>DATE OF ENLISTMENT</u> -	<u>15 May, 1941.</u>	
<u>DATE OF DISCHARGE</u> -	<u>10 February, 1942.</u>	
<u>HOSPITAL</u> -	(If discharged in hospital under jurisdiction of D.P. & N.H.)	
<u>SERVICE</u> -	<u>Canada and High Seas.</u> (Indicate whether in Canada only; or in Canada and on high seas or elsewhere).	
Reason for discharge and when and where any disability was incurred, or where death occurred.	<u>Missing, presumed lost on Active Service.</u> <u>He was serving in H.M.C.S. "SPIKEHARD" which was torpedoed and sunk by enemy action on the</u> <u>10 February, 1942.</u>	

(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 Mother. NAME Mrs. Muriel Cove,

ADDRESS 53 York Street, MONCTON, N.B.

NOTE: If records indicate that rating was separated from his wife, legally or otherwise, details to be furnished and copy of any Court Order, the Separation Agreement, etc., to be furnished.

OFFICER'S OR RATING'S MONTHLY PAY ALLOTTED TO WIFE AND/ OR DEPENDENT -\$ NIL PAID TO NILMARRIAGE ALLOWANCE AT \$ NIL PER DIEM PAID TO - NILDEPENDENTS ALLOWANCE AT \$ NIL PAID TO NILTOTAL MONTHLY PAYMENT TO - WIFE \$ NILComputed by MP
Checked by MADEPENDENTS \$ NILThe Secretary,
The Canadian Pension Commission.R. A. ...
SECRETARY,
NAVAL BOARD.

(See reverse side for further instructions.)

Copy to: D.P. & N.H.

February 25, 1942.

15
11

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
COVE, Gilbert Lloyd A/E.R.A. 4/c., V26057, R.C.N.V.R.	High Seas. 10 February 1942. Missing, presumed lost on Active Service. He was serving in H.M.C.S. "Spikenard", which was torpedoed and sunk.	Mother: Mrs. Muriel Cove, 53 York St., MONCTON, N.B.

<u>In favour of</u>	<u>ALLOTMENTS IN FORCE</u>	<u>Amount</u>	<u>Initials</u>
Mr. Lloyd Cove, 53 York St. Moncton, N.B.		\$20.00	<i>hah</i>
Bond Clothes Shop 434 Barrington St. Halifax, N.S.		\$5.00	

Allotment to be stopped Feb.28/42.

WILL: No record

Yours truly,

R. A. Barrington
SECRETARY, NAVAL BOARD.

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

THIS CERTIFICATE IS TO BE COMPILED IN DUPLICATE, THE SECOND COPY BEING
FORWARDED TO THE MAN'S DEPOT.

P162701

AUXILIARY MACHINERY COURSE FOR STOKER RATINGS

CERTIFICATE OF QUALIFICATION

H.M.C.S. "STADACONA"

DEPT.
NAVY OFFICE
NOV 13 1941
N.S. 113-C-1437
CANADA

This is to certify that COVE, Gilbert L.

E.R.A. 5/c
~~First Class Stoker~~, Official Number V. 26057 serving in H.M.C.S.

"SPIKENARD" has successfully passed through the
Auxiliary Machinery Watchkeeping Course, as laid down in K.R. and
A.I. Appendix XVII, Part I, No. 39 (F), and notations have been made
on his History Sheet accordingly.

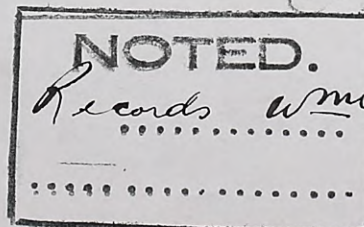
W. B. L. L. L. A/COMMANDER (E) R.C.N.
Engineer Officer

J. P. Edwards A/CAPTAIN R.C.N.
Commanding Officer

Date 20th OCTOBER, 1941

S. 443
1500-6-40 (5685)
N.S. 815-9-443

W. B. L. L. L.
18 NOV 41



NOV 15 1941

H.M.C.S. "STADACONA".....

E.R.A. 5/c

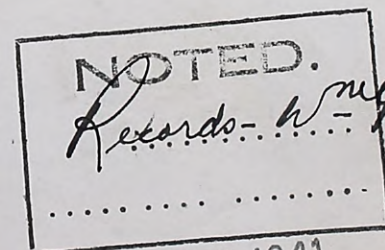
"SPIKENARD".....has successfully passed through the
Auxiliary Machinery Watchkeeping Course, as laid down in K.R. and
A.I. Appendix XVII, Part I, No. 39 (F), and notations have been made
on his History Sheet accordingly.

Comm

A/CAPTAIN R.C.N.
Commanding Officer

Date 20th OCTOBER, 1941.

1500-6-40 (5685)
N.S. 815-9-443



OCT 31 1941

W. Geo. P.
3 Oct. 41.

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 GILBERT LLOYD COVE (b) Reg'l. No. V26057 N.S. 113C1437 CANADA
2. (a) Arm of service navy (b) Unit RCNVR (c) Rank E. RA 5K
3. (a) Date of birth Jan 14, 1920 (b) Have you any dependents? No (c) Place of residence Moncton
4. (a) Place of enlistment Moncton (b) Date of enlistment 13th May 1941

Section B—EDUCATION AND TRAINING

5. (a) State age on finally leaving school 17 (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 11
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? yes (b) If so, for what occupation? machinist (c) Did you finish it? No (d) If you did not finish it, how long did you serve at it? 15 months
9. (a) What languages do you speak fluently? English (b) What languages do you read well? English

Section C—EMPLOYMENT CONDITION AT TIME OF ENLISTMENT

10. (a) State whether you were WORKING or NOT WORKING at time of enlistment. (Enter here only "Working" or "Not Working", as case may be; particulars are asked for below) Working (b) At time of enlistment of what trade union or professional society were you a member? Machinist Union

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 C. M. A. Address Moncton
19. Nature of employer's business (for instance, "farmer", or "building contractor", or "boot factory", or "iron foundry", or "retail store", etc.) Railway
20. (a) Your specific occupation machinist (b) Number of years' experience at this occupation with any employer 15 months
21. (a) Did your employer promise definitely to give you employment on discharge? No (b) Did your employer refuse to promise you employment on discharge? No (c) Do you wish to return to your former employment? yes

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

DATE 13th May 1941

SIGNATURE Gilbert Lloyd Cove



Copy To
VWD
ES

MAY 30 1941