

D OF D 10-2-42	AV	VARDS NAVY	7	WAR SERVICE RECORD
SEAMAN Wm. Joh	n	Sto. 1/0	• V-2412	FILE No.
SURNAME (IN BLOCK LETTERS) CHE	RISTIAN NAMES	REG. No.	RANK ON DISCHARGE	C.A.S.F. UNIT
NAR SERVICE BADGE CLASS) No. N11	DATE DESP	ATCHED:	]]	
ADDRESS:				
ADDRESS: CAMPAIGN MEDALS	RE	GISTRATION NUM	BER AND DATE DE	SPATCHED
CAMPAIGN MEDALS	RE	GISTRATION NUM	BER AND DATE DE	SPATCHED
CAMPAIGN MEDALS 1939-45 Star	RE	GISTRATION NUM	BER AND DATE DE	SPATCHED
	 2542.		-16-50	SPATCHED
CAMPAIGN MEDALS 1939-45 Star Atlantic Star C.V.S.M. & Clasp				SPATCHED

	EMORIALS-DECEASED PERSONNEL "SPIKENARD"	REGISTRATION NO. DATE OF DESPATCH
(1) MEDALS PERSON ENTITLED TO ADDRESS:	Mr. William J. Seaman - Father 90 Somerset Street, St.John, N.B.	DATE DESP (1) REGN. NO 526
(2) <u>MEMORIAL CR</u> WIDOW ADDRESS:	OSS	(2)
(3) MEMORIAL CR MOTHER	oss Mrs. Georgia Seaman	
ADDRESS:	90 Somerset St., St. John, N.B.	(3) 1-4-42

## P032641

**QUESTIONNAIRE FOR CANDIDATES** FOR ENTRY IN THE **ROYAL CANADIAN NAVAL VOLUNTEER RESERVE** Name (in full) he does the for the season Permanent place of residence. r. Nearest town to residence (if living in country)..... Contraction of the second seco Are you a British subject?..... Are you single, married or a widower? ć Present occupation or trade..... (Attach any testimonials or recommendations) Do you belong to any Naval, Military, Reserve or Territorial Force?..... ..... Have you ever been discharged from any of H. M. Forces as medically unfit?...... Have you ever offered to serve in any of H. M. Forces and been rejected?...... What is your chest measurement (not inflated)?..... Are you willing to be vaccinated or re-vaccinated and inoculated as considered necessary by the appropriate authorities?..... ces. I hereby declare that the above answers are true in every respect. Signature Signature Address Omeend.

(Witness to Signature)

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

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

Signed ..... Commanding Officer

N.V. 3 —9-39 (1815) I.S. 815-11-3



Can. B. 207 20M-8-38 N.S. 815-2-207

P032640

## CERTIFICATE OF MEDICAL EXAMINATION FOR THE ENTRY OF OFFICERS, MEN AND BOYS FOR THE 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.

Eamon I, the undersigned, have examined candidate for entry as..... ..... and I believe him to be in all respects fit for His Majesty's Service. He has signed the Certificate given below in my presence. Dated at. ......the....... ....of Examining Medical Officer (Rank)

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

3 Age { Years Months	© Weight without Clothes	© Height with Bare Feet	General Development (d)	Chest Girth	S (i) Shellen's Types (ii) Colour Vision	Vaccinated or re- s vaccinated for Small Pox (Date)	⊛ Lungs, Heart, etc.	⊙ Abdomen, Hernia, etc.	? Limbs and Joints	© Skin	<ol> <li>Ears and Hearing</li> </ol>	<ol> <li>Testes,</li> <li>Varicocele, etc.</li> </ol>	Mouth, Teeth (No. defic. cient and No. defoctive, etc.	3 Anus, Hæmorrhoids, etc.
21.	1.28° .	ft. ins.	Jez	inches (a) marimum 38. (b) minimum 35. (c) mean 36.	right eye L: 9 left eye L, 9 colour vision N	1 425- Tuco maks	Gend	Arnel	puetto	Jourett	Honnell	Juck	appin plate	my

#### CERTIFICATE TO BE SIGNED BY THE CANDIDATE

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

lama.a. Signature of Candidate

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

This Candidate is the subject of .....

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

Examining Medical Officer

.....

(Rank).....

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

LA: FMW

N.S. 113-C-657. 113-8-734. 113-R-616.

February 20, 1942.

With reference to Naval Service

Memorandum:

Headquarter's Memorandum N.S. 30-17-1 of the 5th November, 1941, you are informed with regret (casualty nas that the following (casualties have) been reported

to the Next-of-kin in your area:

RANK/RATING & OPPICIAL NO.

NAME

CONNOR, John Walter

SEAMAN, William John

MATL

Stoker I, V-2408, R.C.N.V.R.

Stoker I, V-2412,

R.C.N.V.R.

Wife: Mrs. Alice Helena Connor. 83 Ludlow Street. ST. JOHN, West, N.B.

NAME & ADDRESS OF NEXT-OF-KIN.

Father: Mr. William J. Seaman, 90 Somerset Street. ST. JOHN, N.B.

RICHARDS, Donald P.

V.A., V-2589. R.C.N.V.R. Wife: Mrs. Doris J. Richards, R.R. No. I. ROTHESAY, N.B.

Cause of Death: Loss of H.H.C.S. "SPIKENARD" on 10 February, 1942.

By Order,

0 Raier SECRETARY, NAVAL BOARD.

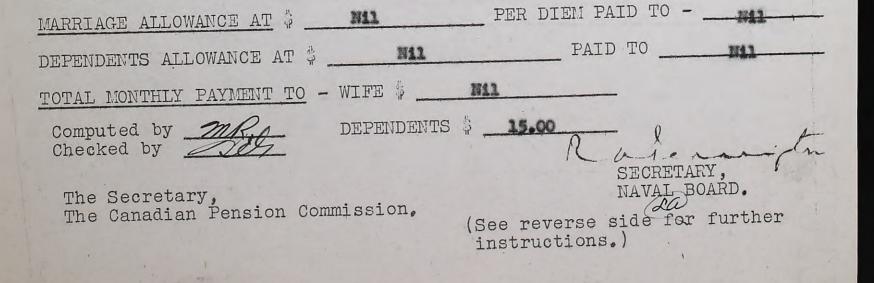
(La

The Commanding Officer. H.M.C.S. "BRUNSWICKER", McPartland Building, File-2's 221 Prince William Street, ST. JOHN, N.B.

		File:
DEPAR	TMENT OF NATIONAL DEFEN	ICE
	- Naval Service -	Conada
	Ottawa,	bruary 23. 1942.
4	0 9 0 0 0 0 0 0	(Date)
		(Date)
Sir:		1
The followi	ng casualty has been rep	ported -
NAME	RANK or RATING	NAVAL NO.
SRAMAN, William John		V-2412, R.O. N.V.R.
620/07/029 ************************************	and was a present to do a dependence material and an and an and a state of the stat	
ATE OF ENLISTMENT -		rvice 18th Septembér, 1940)
ATE OF DISCHARGE -	10th February, 1	942.
IOSPITAL -	*	
	If discharged in hospita	al under jurisdiction
	of D.P. & N.H.)	
ERVICE -	Canada & the High	/
Reason for discharge when and where any d	isability	esumed lost on Active Service.
occurrea.	Fall in a support the second	
which was torpedoed and	sunk by enemy action on the	10th February, 1942.
	and demonstrate of the state of	
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(Show clearly wheth accident or disease, high seas or elsewhe	er death or disability and whether it occurre ere outside Canada).	due to enemy action, d in Canada, or on the
NEXT OF KIN & RELATI	ONSHIP -	
Father	. TATATA	. William J. Seaman.
ADDRESS	serset Street, ST.JOHN, N.B.	
legally or of any Court Ord furnished,	ler, the Separation Agre	emento, 000,, 00
OFFICER'S OR RATING	S MONTHLY PAY ALLOTTED	TO WIFE AND/ OR DEPENDENT
	PAID TO	
	FALD IV	and the second

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of Board of Inquiry due to accidental i If Documents are no	if question of misconduct ari y to be forwarded if disabilit injury in Canada or possible m ot readily available this form e that documents will follow a	ty or death is hisconduct h should be sent
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IN REPLY PLEASE QUOTE

## Department of National Defence Naval Service

#### Ottawa, Canada.

23rd February, 1942.

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:

NO. SEAMAN, William John Stoker I, V 2412

ALLOTMENTS IN FORCE IN FAVOUR OF

NAME, RANK/RATING

PLACE, DATE & CAUSE of DEATH

· NEXT OF KIN

- High Seas, 10th February,1942. Missing presumed lost on Active Service. He was serving on H.M.C.S. "Spikenard" which was torpedoed and sunk.
- Father: Mr. William J. Seaman, 90 Somerset Street, ST. JOHN, N.B.

AMOUNT

\$15.00

\$10.00

Mrs. Georgia Seaman 90 Somerset St, St. John, N.B. (Mother)

H. Star & Son 126 Hollis St, Halifax, N.S.

WILL: None

.Yours truly,

Ra

SECRETARY, NAVAL BOARD.

1.0 -

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



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H.Q. 1010A 250M-5-41 (335) N.S. 815-7-1010

113-5-734. A. Martin belance and and A'T ST. JOHN'S SPIKENARD MEWFOUR DLAND P069269 SEAMAN ( ChWilliam John in full) 1 2010 ..... Place of Mirth. SAINT JOHN ..... Date of Mirth .... 28th April 1919 ... Occupation in Civil Life THEATRE USHER .... Religion .... Roman CATHOLIC .... Number of years service in the Navy (Long Service R.C.I., or Mobilized service in case of N.C.T. ("supprary) or Reserve ratings) One year, 146 days Active Service R.C.N.V.R. Date of Death 10th February 1942 ... Place of Death ... At Sea Cause of Death .... Loss of H.M.C SHIP Hearest mown ( Fame Mrs. Georgie SEAMAN relative or friend SAINT JOHN NEW BRUNSWICK Date on which the above was informed by Ship ..... Date on which death was registered with local Officials ..... In the case of Imperial Service Men, thether Active Service, Pensioner or Reserve, date on which the proceeded return was rendered to the Registrat General London, Edinburgh or Dublin, according to the nationality (mown) Location, Number, etc., of grave. (1. known) Undertaker amployed ... (if any) If borne for discipline only, date D.S.Q. or invalided ...... m CAPTAININE Officer 27th February 194.2 The Naval Secretary

Department of Pational Defence

Ottawa, Canada.

In all cases this form is to be sent in addition to the report by Telegraph required by the Regulations.

Distribution: File, Imp. T.G. Com., Dom. Stat., Register

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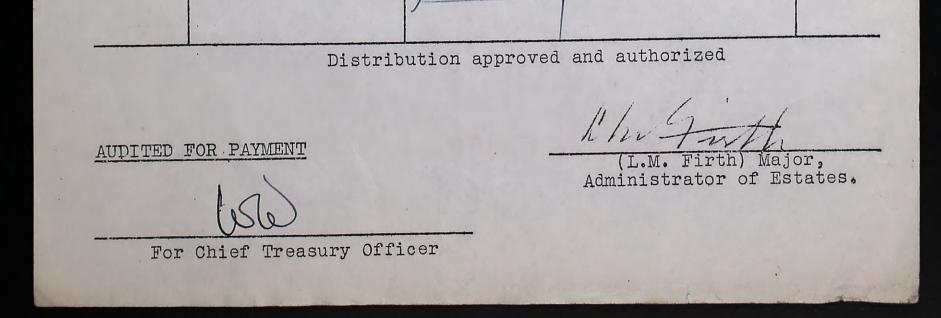
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DISTRIBUTION OF SERVICE ESTATES

Naval - Military - Air Force

Name	SEAHAN	William d	John	No	r.2412
	Surnam	10	Christian Names		
	850.1	H.N.C.S.	AP IKEMARD	:	10/2/42
	Rank		Unit		Date of Death
			AMOUNT L. P. C.	\$ 47.55	
			Other Crea	dits 10.35	
Dete	Nay 9, 1948	2.	Total	57-90	
Date_			Share's Re-	tained	
			NET TOTAL	57-90	

SHARE	RELATIONSHIP		NAME	AND	ADDRE	SS		Ť		AMOU	NT
-	father	William J. Menman. 90 Momeraet St., St. John, N.H.			9		28.	95			
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#### ESTATES BRANCH

May 20th, 1942.

REGISTERED.

1. Balla

Mrs. Georgiana Seaman, 90 Somerset Street, St. John, N.B.

SEAMAN, William John, Sto.l. (Deceased) No. V.2412, H.N.C.S. "Spikenard" RCNVR.

Dear Mrs. Seaman:

Enclosed herewith please find Dominion of Canada cheque No. A.02858, dated May 15, 1942, payable to your order in the amount of \$28.95.

The total of your son's Service estate available to this Branch for distribution was \$57.90 and was made up of the sum of \$47.55 balance of wages, and the sum of \$10.95 credit balance recovered from Messrs. H. Star & Son of Halifax, N.S.

Your son died without having made a Will and his Service estate is, therefore, distributable in accordance with the Intestacy Laws of the province of his domicile. Accordingly it is distributed in the proportion of one-half to yourself his mother, and the remaining one-half to his father. The enclosed cheque covers your share in this estate as one of the next-of-kin entitled.

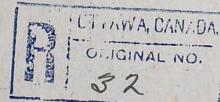
There were no personal effects received at this Branch for distribution.

Will you please complete the enclosed form of receipt // and forward it to this Branch by return mail.

Yours faithfully.

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

HRW/JN Encl.2



#### MAVY

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### DISTRIBUTION OF SERVICE ESTATES

### Naval - Military - Air Force

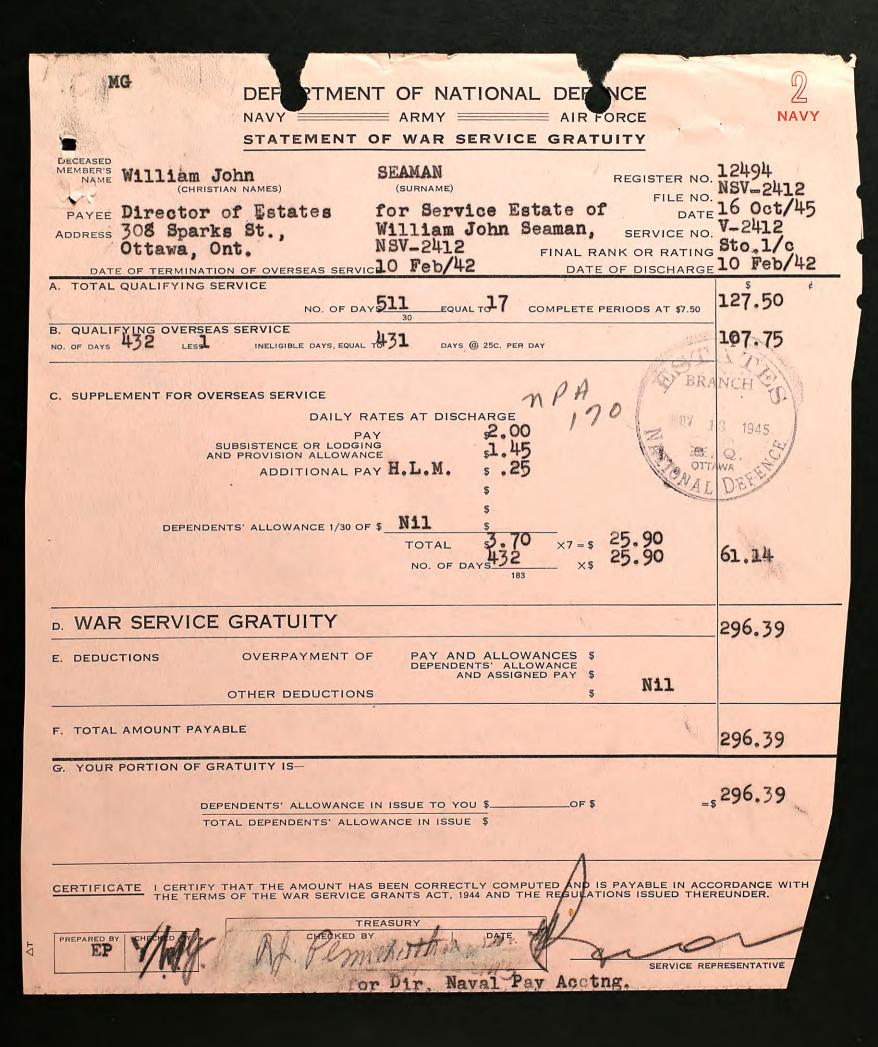
Name	SEAMAR	WILLIAM J. No:	12
	Surname	Christian Names	
	Steker 1	H. H. G. J. "SPIKEBARD" 30/	alua
	Rank		of Death
•			
	-	AMOUNT	
		L. P. C. \$ 47.55	
Date	hug. 7, 1942.	Other Credits	
		Tatal 63.30	
		Prev. Dist. 57.90	
SHARE	RELATIONSHIP	NAME AND ADDRESS	AMOUNT
1	fether	William J. Seaman.	
		90 Somerset Street.	2.70
		St. John. H. B.	
1	mother	Mrs. Georgiana Seman.	
-		(as above)	2.70
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		(next of kin entitled)	a Maria Maria
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Distribution approved and authorized

AUDITED FOR PAYMENT for Chief Treasury Officer

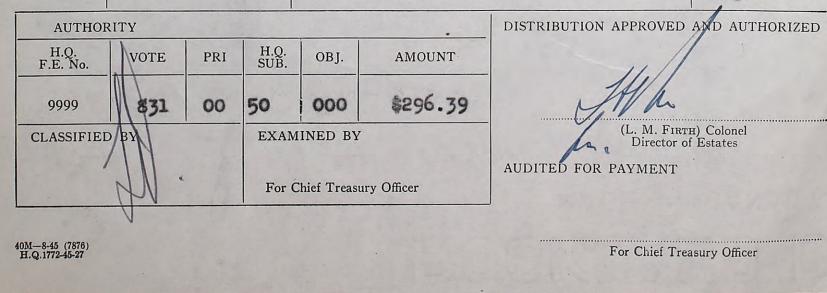
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(L.M. Firth) Lt...Ool., Administrator of Estates.



-	DISTRIBUTION OF SEA	RVICE ESTATES	DME	Estates Form "P. 4"
	YVAN			and the second
-			in the second	- · · ·
Name SEAMAN	William J.		No.	V2412
Surname	Christian Names			
STO. 1/c	0/8		•	10-2-42
Rank	Unit		Dat	te of Death
		AMOUNT W.S.G. L.P.C	\$	296.39 47.55
	Date	Other Cree	dits	15.75
		Total Prev.d This d	list.	359.69 63.30 296.39

SHARE	RELATIONSHIP	NAME AND ADDRESS	AMOUNT
1/2	Father	William J. Seaman, 90 Somerset St., St. John, N.B.	148.20
		St. John, N.B.	
1/2	Mother	Mrs. Georgiana Seaman, (As above)	148.19
	·	(As next of kin entitled)	
		P4. TO TREAS,	
		DEC 6 . 1945	
	•	/ .	



28 July, 1945.

NS V-2412 PERS(N) (P-18)

Dear Sir:

I am directed to inform you that your application for the War Service Gratuity in respect of your late son, William John SEAMAN, has been referred to the Dependents' Allowance Board for decision concerning whether you may be classed as dependent as provided under the War Service Grants Act, 1944.

This procedure is required in all cases where records at Headquarters disclose the fact that you were not in receipt of Dependents' Allowance as at the death of your late son.

Immediately upon receipt of a decision from the Dependents Allowance Board, if eligible, payment will be made in a lump sum directly to you.

On the other hand, should the Board find you cannot be classed as a dependent, the Gratuity or unpaid balance thereof will be transferred to the Administrator of Estates for distribution as part of your son's Service Estate.

In the meantime, would you kindly inform thi. department of any change of address.

Yours truly,

SECRETARY, NAVAL BOARD.

Mr. William J. SEAMAN, Sr., 90 Somerset St., St. John, N.B.

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F		N.C.C. Amplianting Tr. 10,10,1
•		W.S.G. Application No. 12494 4
TO: D.N.P.A. "G"		FILE NO. N.S. V-2412 1
	"WAR SERVICE O	FRATUITY"
	COMPUTATION OF	
SURNAME,	CHRISTIAN NAMES	hn V-24124 Sto 1/6 7 OFFICIAL RANK OR RATING NUMBER ON DISCHARGE
CAUSE OF DISCHARGE:	DEAD (SPin	KENARI)
applier	and - Frathe	z. CA.P. #15-00 mother)
BRANKS SHARE AND		891 384
	TOTAL SERVICE	
Data and hatting damains	0 1	510
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Date of Discharge	10 Feb 421	
Total No. of Days	511	
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5 Total No. of Days	432 1	
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service	Nik	Total Days 432 y
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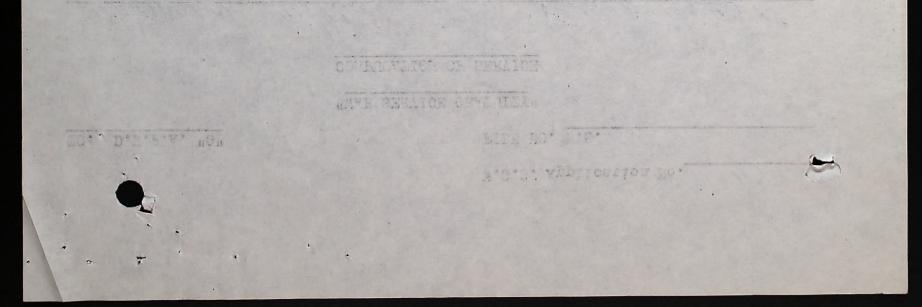
A Dele Checked By for (R.W. Underhill) A/Cantain (s) R.C.N.V.R. Director of Naval Pay Accounting • • • • • • • • -121945 JUL DATE: . . ... ... ..... 3 A. A. A. 14 DUS · "B.

#### NON QUALIFYING SERVICE

			TOTAL SERVICE	OVERSEAS SERVICI
(#) Date	Reason	No. of D	ays	
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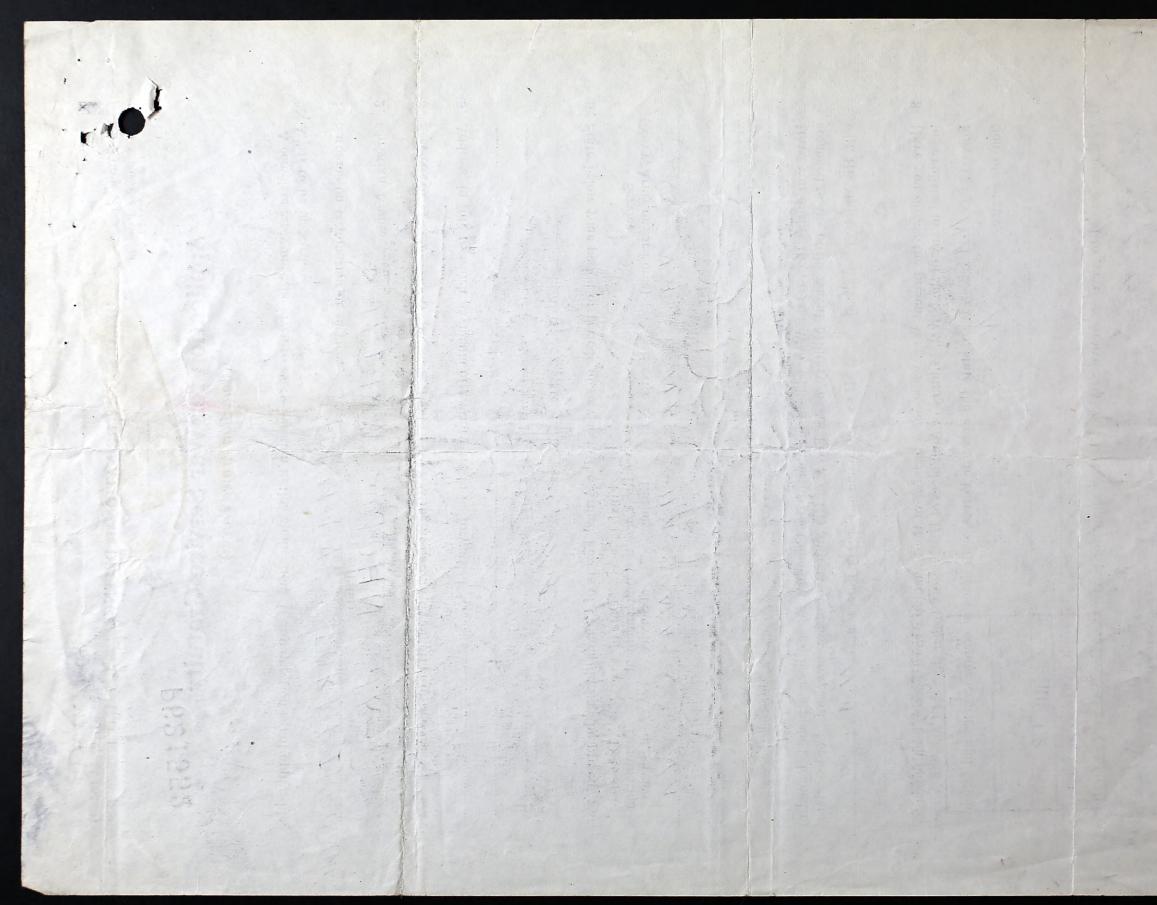
• •	Narry Army DEPARTMENT OF NATIONAL DEFENCE T X opposite Force in W you last served.) M.F.M. 441 1 Mil. 9-44 (5449) H.Q. 1772-39-2326
	Application for War Service Gratuity (Canadian Armed Forces)
->*	113-5-734
	A complete reply must be given to every question in this application. If any question is not applicable, "N.A." is to be inserted. $C \vdash A A A A A C \equiv C \equiv C \equiv C \equiv C = C$
	1. Surname on termination of service. <u>SEAMAN</u> . <u>STOKER, I. R.C.N.V.R.</u> 2. Christian Names <u>W/LL/AM</u> <u>JOHA</u> <u>J.R.</u> (Print)
	3. Service No. V-2412 4. Paid rank or rating at date of termination of Service Stoken I
. x	5. Address, in full, to which payments of gratuity are to be forwarded
	Caint John, NO.
fright for	6. State below your period or periods of service in the Armed Forces of Canada during the present war. Final Date of Date of Service (Navy, Army or Air Force) Service No. Rating of Service of Service of Service (N. A. N. A. N. A. N. A. N. A. N. A. N. A.
	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? N.A. If so, state name of Force or Forces
	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)?
	Having now ceased to serve on Active Service, I hereby apply for payment of the War Service Gratuity. S. R. <i>July</i> 5 <sup>-1</sup> /945 <sup>-</sup> (Date) (Signature of Applicant)

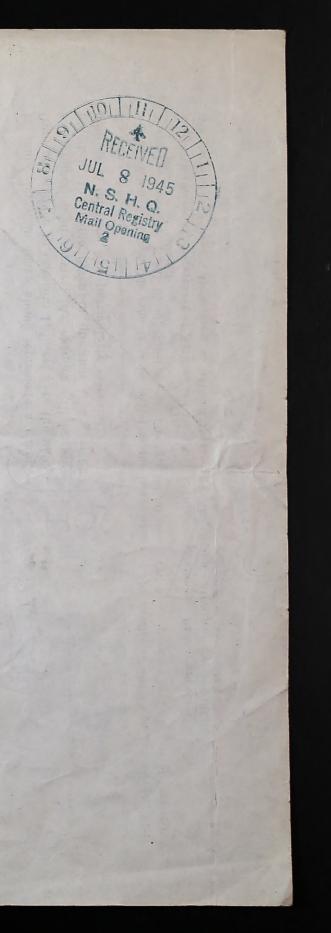
If name signed in space above represents a change from name given in question 1, insert here the name at termination of service. As cheques will be prepared in the name given in question 1, a specific address in question 5 is particularly essential.

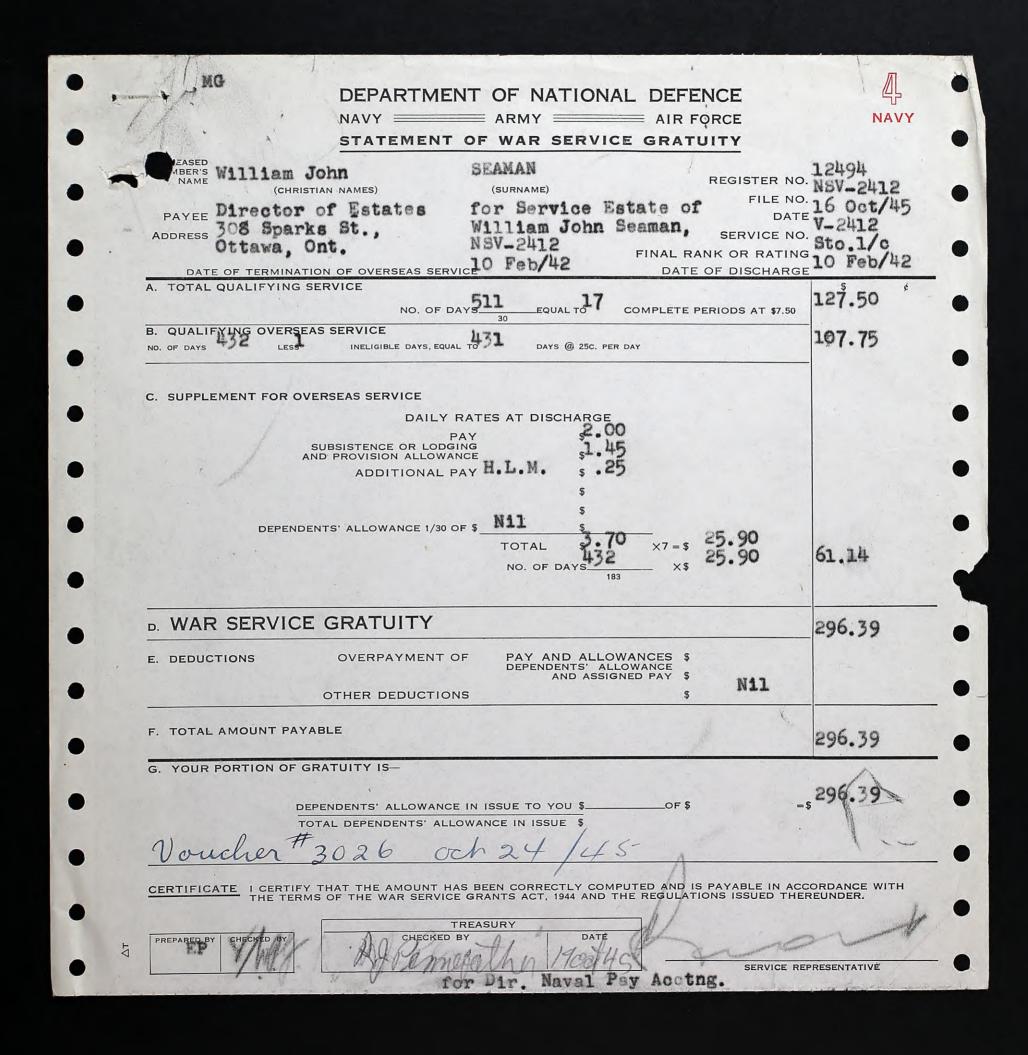
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NOTE: When completed this form is to be mailed to the Headquarters of the Service in which you last served. Viz: Navy—The Secretary, Naval Board, Naval Service Headquarters, Ottawa. (To be accompanied by Certificate of Service in the case of ratings.) 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.



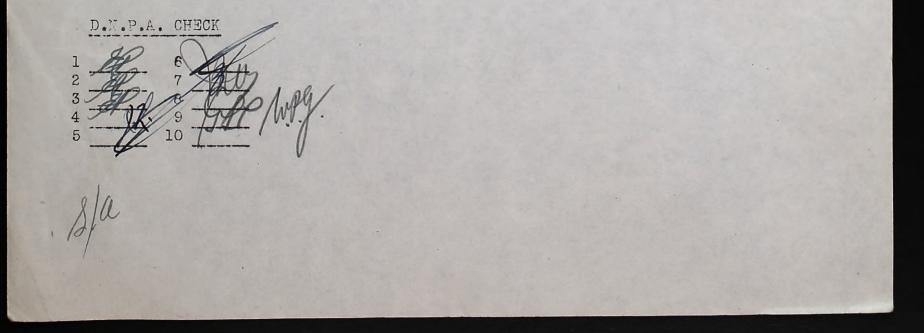




STATEMENT OF WAR SERVICE GRATUITY - NAVY Deceas Namo Willia SEAMAN Membe (Christian Names) (Surname) Payee Director of Solates for service Solake Pregister No. 12494 Alliam. Joh'SEAMANFile No. V-2412 Address 308 Sparks Shiel Date 17 - 7 - 45 NS. Service No.V-2412 Final Rank or Rating Stolle Heb 42 Date of Discharge 10 Heb. 42 Date of termination of overseas service /0 -A. TOTAL QUALIFYING SERVICE ¢ 127.50 No. of days 5//equal to / 7 complete periods at 37.50 30 B. CUALIFYING OVERSEAS SERVICE 107.75-No. of days 43 less / ineligible days equal to 43/days @ 25¢ per day C. SUPPLEMENT FOR OVERSEAS SERVICE DAILY RATES AT DISCHARGE \$ 2.00 Pay Subsistence or Lodging and Provision Allowance Additional Pay HLM \$ Dependents' Allowance 1/30 of No. of days 25.90 GRATUITY D. WAR SERVICE PAY AND ALLOWANCES \$ E. DEDUCTIONS OVERPAYMENT OF DEPENDENTS' ALLOVANCE AND ASSIGNED PAY \$ 3 OTHER DEDUCTIONS 296.39 F. TOTAL AMOUNT PAYABLE G. YOUR PORTION OF GRATUITY IS = \$ 296.39 Dependents' Allowance in issue to you \$ of \$ Total Dependents Allowance in issue 🧋 I certify that the amount has been correctly computed and is payable CERTIFICATE: in accordance with the terms of the War Service Grants Act, 1944 and the regulations issued thereunder.

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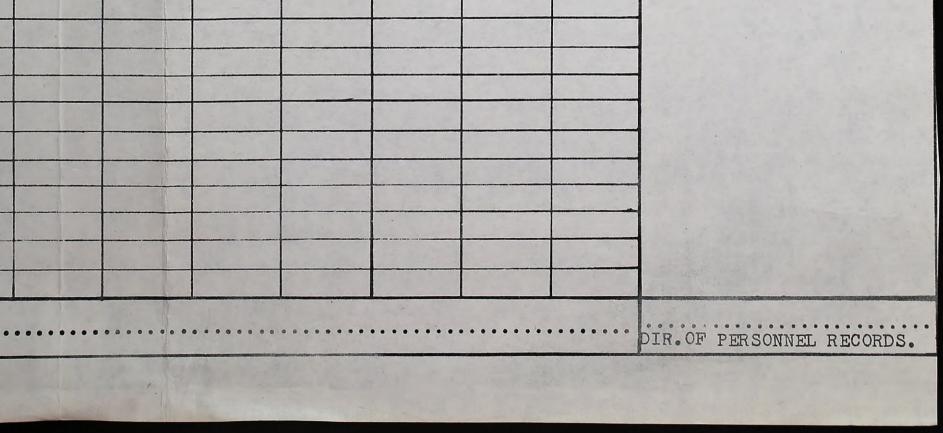
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# SERVICE CERTIFICATE

N. V. No. 17 3м—10-39 (2176) N.S. 815-11-17

OF

Name in full SEAMAN, William John Company/ Saint John Division

# ROYAL CANADIAN NAVAL VOLUNTEER RESERVE

Training Hea	dquarters	HALI HOSTILITI		•	Official Number 2412
Date of Birth	April 28,	1919			
Place of Birth	Saint Joh	n, N. B.		Y	
Usual Place of Re	sidence_20	Lomence	and the first		
Frade brought up	to Usher E	mpire Theat	re, Saint	John, N.	В.
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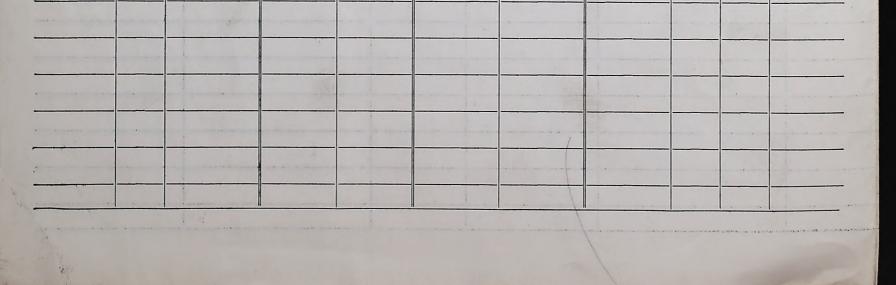
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Ship or Establishment	Rating		From Month	Year		Remarks	11		Character	Efficiency		Date Month		Non-Sub	. Rating	1	Qualifica			Qualifie	
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RESIDENCE AT TIME OF ENLISTMENT: Street and No	merset St	·			st John				
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