

V2809
MATTHEWS
GEORGE

HERBE

OCCUPATIONAL HISTORY FORM 99313

JUL 30 1941

NS 113-M2682

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..... (b) Reg'l. No. 12809
2. (a) Arm of service..... (b) Unit..... (c) Rank.....
3. (a) Date of birth..... (b) Have you any dependents?..... (c) Place of residence.....
4. (a) Place of enlistment..... (b) Date of enlistment.....

PLEASE
LEAVE
BLANK

Section B—EDUCATION AND TRAINING

5. (a) State age on finally leaving school..... (b) Were you attending school or college up to the time of enlistment?.....
6. State definitely highest standing reached at public, technical or high school (for instance—"4 years, Public School", "two years, High School", "Junior Matriculation", or "4 years technical course in printing", etc.).....
7. If you attended a university, give name of university and standing or degree secured.....
8. (a) Did you ever enter upon a trade apprenticeship?..... (b) If so, for what occupation?..... (c) Did you finish it?..... (d) If you did not finish it, how long did you serve at it?.....
9. (a) What languages do you speak fluently?..... (b) What languages do you read well?.....

Section C—EMPLOYMENT CONDITION AT TIME OF ENLISTMENT

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

Section D—PARTICULARS CONCERNING THOSE WHO WERE UNEMPLOYED AT TIME OF ENLISTMENT

QUESTIONS 11 TO 17 REFER ONLY TO THOSE WHO ANSWER "NOT WORKING" IN QUESTION 10 (a)

11. Had you ever been employed fairly regularly since leaving school?.....
12. (a) If answer to 11 be "Yes", state exact trade or occupation at which you actually worked..... (b) State how long you had worked at this trade or occupation.....
13. If answer to 11 be "No", state exact trade or occupation for which you feel qualified.....
14. If you had been employed after leaving school, state when you last worked fairly regularly before enlistment.....
15. Give details of last employer, if any: Name..... Address.....
16. Nature of employer's business (for instance, "farmer", or "building contractor", or "boot factory", or "iron foundry", or "retail store", etc.).....
17. (a) If your last employment was in a business of your own, state nature and address of business..... (b) Date of discontinuing it.....

Section E—PARTICULARS CONCERNING THOSE WHO WERE EMPLOYED AT TIME OF ENLISTMENT

QUESTIONS 18 TO 23 REFER ONLY TO THOSE WHO ANSWER "WORKING" IN QUESTION 10 (a). PLEASE READ THESE QUESTIONS AND REPLY TO THOSE APPLYING TO YOU AT TIME OF ENLISTMENT

IF YOU WERE AN EMPLOYEE WORKING FOR AN EMPLOYER UP TO THE TIME OF ENLISTMENT, PLEASE ANSWER QUESTIONS 18 TO 21

18. Name of employer..... Address.....
19. Nature of employer's business (for instance, "farmer", or "building contractor", or "boot factory", or "iron foundry", or "retail store", etc.).....
20. (a) Your specific occupation..... (b) Number of years' experience at this occupation with any employer.....
21. (a) Did your employer promise definitely to give you employment on discharge?..... (b) Did your employer refuse to promise you employment on discharge?..... (c) Do you wish to return to your former employment?.....

IF YOU WERE WORKING ON YOUR OWN UP TO THE TIME OF ENLISTMENT, THAT IS TO SAY, OPERATING A FARM, A STORE, AN AGENCY, OR IN PROFESSIONAL PRACTICE, OR AS A PARTNER IN ANY SUCH LINE, PLEASE ANSWER QUESTIONS 22 AND 23

22. (a) State nature of business, or professional practice..... (b) Where was it located?.....
23. (a) Number of years engaged in this business..... (b) Have you made, or will you make plans to return to the same or a similar business on discharge?.....

Section F—PARTICULARS OF FARMING EXPERIENCE

24. (a) Do you wish to engage in farming after the war?..... (b) Do you feel competent to operate a farm?..... (c) If so, in what kind of farming?.....
25. (a) Were you born on a farm?..... (b) How many years' actual farming experience have you had?..... (c) In what provinces did you have experience?.....

Section G—MISCELLANEOUS

26. Have you made any arrangements other than indicated above, for re-establishment in civil life after discharge?.....
27. If so, state nature of your plans (for example, do you plan to return to school, or have you been assured of a job, etc.).....
28. State any employment preference or ambition you may have, other than indicated elsewhere in this form.....

DATE 23 JUNE 41 194SIGNATURE TEELWOOD KERR

Copy To
VWD
ES

AUG 12 1941

Mrs. Mary Matthews,

Red Head,

Saint John Co., N.B.

Any further communication on this subject should be addressed to:—

THE DIRECTOR OF ESTATES,
DEPARTMENT OF NATIONAL DEFENCE,
OTTAWA, ONTARIO.

and the following number quoted:—

H.Q. N.S. V. 2809 ED. 876

DEPARTMENT OF NATIONAL DEFENCE
ESTATES BRANCH
OTTAWA, ONT.

January 23rd. 1945.

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

MATTHEWS, George Herbert, A.B.

V. 2809 R.C.N.V.R.



it is necessary that certain information regarding the deceased and his relatives should be furnished the Estates Branch. You are asked therefore to read the enclosed memorandum before completing pages 2 and 3 of this form. The particulars required are to be carefully filled in and the Declaration on page 4 should then be signed in the presence of a Clergyman, Priest, Local Magistrate, Commissioner for Oaths, Notary Public or a Commissioned Officer of any of His Majesty's Forces who should be asked to complete and sign the Certificate. This form should then be returned to the above address.

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.

HRW/NM

W. H. Weir
Commander
for
Director 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:

Degree of Relationship	RELATIVES required to be accounted for	INFORMANT'S STATEMENT		
		NAME IN FULL of any Relative, if any, in each degree specified	Age	ADDRESS IN FULL of each surviving Relative, opposite his or her name, and date of death of each deceased relative
1	Widow of the Deceased.....			
2	Children of the Deceased and dates of their Births.....			
3	Father of the Deceased.....	Charles Matthews	87	Red Head St. John. N.B.
4	Mother of the Deceased.....	Mary Matthews	71	Red Head St. John. N.B.
5	A. B. ^{no} A2100	William Matthews R.C.N.R.	35	H.M.C.S. Stratenburg.
	Full Blood	John A.L. Matthews	33	Red Head St. John. N.B.
	L.D.N. of the Deceased	Charles J. Matthews	27	Harbor Craft St. John. N.B.
	S.M.N. V2883 Exempted. Heart condition.	Claude S. Matthews	25	Red Head St. John.
6	Sisters of the Deceased	Matilda Wedge.	44	23 King St. St. John.
		Eva Sewell	41	East St. John. N.B.
6	Sisters of the Deceased	Greta Bowers	39	Blonholme. N.B.
		Pauline Pelky	37	Red Head St. John.
		Nancy Foster	34	East St. John. N.B.
		Margaret Matthews	29	King St East St. John.
		Irene Lally		Watertown. N.B.
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.	Annie Slater		Worcester B.
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.	George Herbert Matthews
9	Date of his birth.	May 8th. 1921.
10	Place and date of his marriage.	- - -
11	Place and date of his parents' marriage.	Fredericton N.B.

PARTICULARS OF DOMICILE

12	Place where deceased was born.	Red Head St John. N.B.
13	State, in order, the Province, State and/or County in which he resided before enlistment and the period of time in each.	(a) New Brunswick (b) St John. Co. (c) resided here all his life. (d)
14	Nature of employment before enlistment.	St John. Dry Dock.
15	State whether he owned the premises in which he lived, and, if so, where situated.	- - -
16	Name place where deceased stated he intended to make his permanent home.	Red Head.

PARTICULARS OF ESTATE

17	Did he leave a Will? If in your custody, please forward.	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?	- - -
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. Do you wish it administered with the pay account?	No.
20	Amount of War Savings Certificates held by deceased. Indicate where located.	No.
21	Amount of Victory Loan Bonds held by deceased. Indicate whether registered or bearer and where located.	No.
22	If deceased had life insurance, name companies and amount payable under each policy and the person named as beneficiary therein.	No.
23	Describe other assets, if any, and estimated value thereof. Use space on page 4 if necessary.	nothing

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.	Lived with his sister Matilda Widge at 23 King St. John. N.B.
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.	Not having funeral Service bill May 1945.
<p>(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.)</p>		

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

* Mother of the deceased.

N.B.—To be signed in full in the presence of a Clergyman, Priest, Local Magistrate, Commissioner or Notary Public or Commissioned Officer of any of His Majesty's Forces.

Mary Matthews

{Signature of Informant

Red Head St. John N.B. Address

CERTIFICATE

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

*See above.

Matthews

{ Name of Informant }

is the * Mother of the Deceased

above described. The above Declaration was made by the Informant and signed in my presence. *

Dated at

St. John

this

2nd

day of

March

19 45

Signature of Clergyman, Priest, Magistrate, Commissioner or Notary Public or Commissioned Officer of any of His Majesty's Forces.

W. P. Bevenley

Qualification

Wentworth

R.C.N.V.R.

Address

H.M.C.S. Brunswick, St. John

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

Have just received word that brother of the late George H. Matthews R.C.N.V.R. A.B. A2100 William H Matthews has just arrived overseas on H.M.C.S. Strathadaw.

2.3.45

* Mrs. Mary Matthews lives in the country and not being well was unable to be present to sign her name in my presence. However her daughter Mrs. Martha Wedge brought in the form and I am perfectly satisfied with the statement of Chief Petty Officer Thompson who knows both above mentioned ladies that the above signature of Mrs. Mary Matthews is true. W. P. Bevenley, Lt., V.R.

(3) On being enrolled as a member of the..... Saint John Division of the Royal Canadian Naval Volunteer Reserve, I undertake to bind myself:—

(a) To serve from the date thereof for the duration of hostilities, being subject to the provisions of the Naval Service Act, and of the Regulations made in pursuance thereof for the government of the Royal Canadian Naval Volunteer Reserve, and to the customs and usages of His Majesty's Canadian Naval Service.

(b) To report for active service if called upon in time of war or emergency, and, if called into active service, to serve ashore or afloat as may be directed, according to where my services are required.

(c) To keep in good repair and condition the articles of uniform and any articles of outfit which may be issued to me and to return them to the nearest Divisional Commanding Officer or to Training Headquarters prior to my discharge or when required so to do by any authorized person, or to pay compensation for any loss or damage thereto other than fair wear and tear; and also not to wear such uniform or outfit (which is and remains the property of the Crown) except when on naval duty.

(d) To undergo vaccination or re-vaccination, or inoculation, as considered necessary by the appropriate authorities.

Dated this..... 23rd day of..... June, 1941

Signature of applicant..... George H. Matthews

(C) CERTIFICATE OF ATTESTING OFFICER

I hereby certify that all the foregoing statements were made by the volunteer above named, in my presence, and that he has made and signed the above declaration in my presence on this..... 23rd day of..... June, 1941

..... R. D. Munro, Lieut (Temp)
Signature of and rank of Attesting Officer.

(D) OATH OF ALLEGIANCE

I, George H. Matthews 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..... George H. Matthews

Witness..... Ralph D. Munro

Date..... 23 June, 1941 Rank..... Lieut: RCNVR (Temp)

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

(E) CERTIFICATE OF ATTESTING OFFICER

..... George H. Matthews 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..... Saint John Division of the R.C.N.V.R. or in the appropriate official documents.

..... R. D. Munro,
Attesting Officer.

..... 23 rd July 194 1
R.C.N.V.R. Division
(or other establishment)..... Saint John

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.



N. V. 5
25M-9-40 (6793)
N.S. 815-11-5

ATTESTATION FORM

(HOSTILITIES FORM)

FOR MEN OF THE ROYAL CANADIAN NAVAL VOLUNTEER RESERVE

SURNAME Matthews OFFICIAL NO. V2809

CHRISTIAN NAMES George Herbert MARRIED, SINGLE OR WIDOWER Single

PERMANENT ADDRESS	RELIGION
<u>Red Head, Saint John Co., N.B.</u>	<u>Methodist</u>

DATE OF BIRTH	*PLACE OF BIRTH	NAME AND ADDRESS OF NEXT OF KIN
<u>May 8th, 1921</u>	Town <u>Red Head</u> County <u>Saint John</u> Province <u>New Brunswick</u>	<u>Mother</u> <u>Mary Matthews</u> <u>Red Head,</u> <u>Saint John Co., N.B.</u>
*Original Nationality of: Father <u>English</u> Mother <u>English</u>		

*If not the son of natural born British parents, particulars to be given at foot of next page.

PERSONAL DESCRIPTION ON ENROLMENT

HEIGHT	CHEST MEASUREMENT	HAIR	EYES	COMPLEXION	WOUNDS, SCARS, MARKS
Feet <u>5</u>	Inflated <u>36.5</u>	<u>Blonde</u>	<u>Hazel</u>	<u>Fair</u>	<u>Nil</u>
Inches <u>10.25</u>	Deflated <u>34</u>				
	Mean <u>35.5</u>				

DATE OF ENROLMENT	RATING ENROLLING FOR	TRADE OR CALLING AND IN WHOSE EMPLOY
<u>23-6-41</u>	<u>Ordinary Seaman</u>	<u>Steelworker</u> <u>Saint John Dry Dock & S.B. Co.</u>
R.C.N.V.R. Division (or other establishment) at which enrolled <u>Saint John</u>		

(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 Reserve Army 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>Army Reserve</u>	<u>Private</u>	<u>July, 1940</u>	<u>June, 1941</u>

(c) I have never been rejected for or discharged from any of His Majesty's Forces on account of unfitness.

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



P 99314

DEPT. Can. B. 207
NATIONAL DEFENCE 100 M-11-40 (7881)
N.S. 815-2-207
JUL 30 1941
N.S. 112-M2682
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 George Matthews
candidate for entry as O.D.
and I believe him to be in all respects fit for His Majesty's Service.
unfit for His Majesty's Service for the reason stated below. He has signed
the Certificate given below in my presence.
† Strike out if inapplicable. * Delete one.

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

Age (Years/Months)	Weight without Clothes	Height with Bare Feet	General Development	Chest Girth	Vision by— (i) Snellen's Types (ii) Colour Vision	Vaccinated or re-vaccinated 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)	(j)	(k)	(l)	(m)	(n)	(o)
20. 1.	133.	5. 10. 25.	Good	36.5 (a) maximum 34 (b) minimum 35.5 (c) mean	right eye 6/45 left eye 6/45 *colour vision B.	1427. 11/20/1941 up to 1/1.	Normal	Normal	Normal	Normal	Normal	Normal	Healthy 27 teeth 2 congenitally 2 congenitally	Normal

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

Incomplete Red Green Colour. Blotter test normal

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

App

Write in the appropriate notation, and any remarks necessary.

CERTIFICATE TO BE SIGNED BY CANDIDATE

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

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

George Matthews
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 Incomplete Red Green
Blind. Blotter test normal.

* (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 Sarnia p. L. the 20 of June 19 41

John R. Duggan
Examining Medical Officer
(Rank) Surgeon Civilian

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

Sir:

JAN 15 1945

(Date)

The following casualty has been reported -

<u>NAME</u>	<u>RANK or RATING</u>	<u>NAVAL NO.</u>
MATTHEWS, George Herbert	Able Seaman	V-2809, R.C.N.V.R.
DATE OF ENLISTMENT - 23 June, 1941 Active Service 7th August, 1941		
DATE OF DISCHARGE - 29th April, 1944		
HOSPITAL - (If discharged in hospital under jurisdiction of D.P. & N.H.)		
SERVICE - Canada & High Seas (Indicate whether in Canada only; or in Canada and the high seas or elsewhere)		
Reason for discharge and - Missing, presumed dead, when H.M.C.S. "ATHABASKAN" when and where any disability was incurred, or where death occurred. was torpedoed and sunk by enemy action in the English Channel.		
(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. Mary Matthews,		
ADDRESS - RED HEAD, Saint John Co., 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.

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

C. R.
P. A.
NAVAL TREASURY
DATE 16/1/45
INITIAL K

REMARKS:.....

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

<u>Names of Dependents</u>	<u>Relationship</u>	<u>Maiden name of wife</u>	<u>Date of marriage and/or date of birth of children</u>
----------------------------	---------------------	----------------------------	--

Nil

	<u>D. A.</u>	<u>A.P.</u>	<u>TOTAL</u>
Monthly rate:	Nil	30.00	30.00
TO Whom Paid:	Nil	Nil	Nil
Date of Enlistment:	See front	Address	Nil
Date of Discharge:	See Front	Red Head, St. Johns County, St. John, N.B.	
Inclusive date to which D.A. and/or A.P. was Paid:	Nil	April 1945	
The final deduction of Assigned Pay for	Nil	has been made for the	
period from 1st to	Nil	of	Nil 194

Remarks:

Computed by L.M.

Checked by *REP*

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

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



Department of National Defence

Naval Service

IN REPLY PLEASE QUOTE

No. N.S. V-2809 PERS(N)

OTTAWA, Ont., JAN 12 1945 194

408114



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:

<u>NAME, RANK/RATING NO.</u>	<u>PLACE, DATE & CAUSE of DEATH</u>	<u>NEXT OF KIN</u>
George Herbert MATTHEWS, Able Seaman, Official Number V-2809, R.C.NV.R.	Missing, presumed dead, to date 29th April, 1944, when H.M.C.S. "ATHABASKAN" was torpedoed and sunk by enemy action in the English Channel.	Mother: Mrs. Mary Matthews, Red Head, Saint John Co., N.B.

ALLOTMENTS IN FORCE

<u>In Favor Of</u>	<u>Amount</u>	<u>Initials</u>
Mrs. Mary Matthews Red Head, St. John County, St. John, N.B.	\$30.00	L.M.

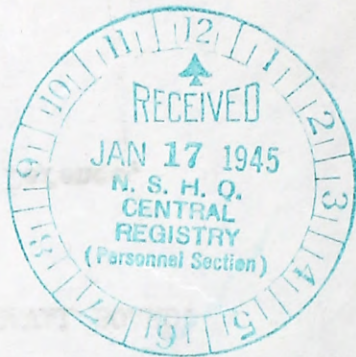
Stopped end of April, memo from D.N.P.A.

WILL: No record.

Yours truly,

H. B. M. S. C.
for
SECRETARY, NAVAL BOARD.

Administrator of Estates,
Estates Branch,
Department of National Defence,
O T T A W A.



U. S. DEPARTMENT OF JUSTICE
FEDERAL BUREAU OF INVESTIGATION
WASHINGTON, D. C.

MEMORANDUM FOR THE DIRECTOR

SUBJECT: [Illegible]

DATE: [Illegible]

TO: [Illegible]

FROM: [Illegible]

REFERENCE: [Illegible]

DATE: [Illegible]

TO: [Illegible]

[Illegible body text]

NOTE: [Illegible]

DATE: [Illegible]

TO: [Illegible]

[Illegible body text]

[Illegible]

[Illegible]

[Illegible]

[Illegible]

HMCS "ATHABASKAN" Sept. /45. R.C.N.V.R.
 MEDALS AND MEMORIALS—DECEASED PERSONNEL

REGISTRATION NO. DATE OF DESPATCH

<p>(1) <u>MEDALS</u> <u>PERSON</u> ENTITLED TO Mr. Charles Matthews - Father</p> <p>ADDRESS: Red Head, St. John County, N.B.</p>	<p>(1)</p>
<p>(2) <u>MEMORIAL CROSS</u> <u>WIDOW</u></p> <p>ADDRESS:</p>	<p>(2)</p>
<p>(3) <u>MEMORIAL CROSS</u> <u>MOTHER</u> Mrs. M. Matthews</p> <p>ADDRESS: RED HEAD St. John Co., N.B.</p>	<p>(3) 19 February 1945</p> <div style="border: 2px solid red; padding: 5px; margin-top: 10px;"> <p>MEMORIAL BAR</p> <p>DATE DESP.....</p> <p>REGN. NO. <u>521</u></p> </div>

DECEASED 29 April 1944

DEPARTMENT OF VETERANS AFFAIRS

AWARDS

NAVY

D.D.

WAR SERVICE RECORDS

MATTHEWS	George Herbert	V-2809	A.B.	FILE No.
SURNAME (IN BLOCK LETTERS)	CHRISTIAN NAMES	REG. No.	RANK ON DISCHARGE	C.A.S.F. UNIT

WAR SERVICE

BADGE

(CLASS)

No.

DATE DESPATCHED:

ADDRESS:

CAMPAIGN MEDALS	REGISTRATION NUMBER AND DATE DESPATCHED
1939-45 Star	9985
Atlantic Star	
C.V.S.M. & Clasp	
War Medal	

(THE REVERSE TO BE USED FOR ESTATE PURPOSES)

NAME IN FULL ^{TT} MATTHEWS, George Herbert RANK/RATING ~~AB~~ / AB 01

[illegible]

VERIFIED BY Y/Kae :

VERIFIED BY

TING 4/AB OFF. NO. V2809 ADDRESS

[illegible]

FORM C-3

PROVINCE OF NEW BRUNSWICK—CERTIFICATE OF REGISTRATION OF DEATH

REG.
No.

1. PLACE OF DEATH { Sub-Health District AT SEA Area (City, Town or Civil Parish) _____
If in City, Town or Village _____ Street _____ House No. _____
(Name) (If death occurred in a hospital or institution, give the name instead of street and number)

2. LENGTH OF STAY (in years, months and days)
(a) In City, Town or Civil Parish where death occurred _____ (b) In Province _____ (c) In Canada (if immigrant) _____

3. NAME OF DECEASED Matthews George Herbert
(Surname) (Given name or names)

RESIDENCE No. _____ Street _____ City, Town, Village or Civil Parish Red Head Province N.B.
(Residence means usual place of abode. Post Office Address for residents in rural parts not sufficient)

4. Sex <u>Male</u>	5. Nationality (Citizenship) <u>Canadian</u>	6. Racial Origin <u>English</u>	7. Single, Married, Widowed or Divorced (write the word) <u>Single</u>
-----------------------	---	------------------------------------	---

8. BIRTHPLACE New Brunswick
(Province or Country)

9. DATE OF BIRTH May 8 1921
(Month) (Day) (Year)

10. AGE in	Years	Months	Days	If less than one day old
	<u>23</u>			hrs. or min.

11. Trade, profession or kind of work as spinner, teamster, office clerk, etc. Steelworker

12. Kind of industry or business, as cotton mill, lumbering, bank, etc. Saint John Dry Dock

13. Date deceased last worked at this occupation _____ 14. Total yrs. spent in this occupation _____

15. If married give name of wife or husband of deceased _____

16. NAME _____

17. BIRTHPLACE _____
(Province or Country)

18. MAIDEN NAME _____

19. BIRTHPLACE _____
(Province or Country)

20. Name of informant Paymaster Commander, R.C.N.R.
Address NAVAL SERVICE HEADQUARTERS, Ottawa, Ont.
Relationship to deceased Director of Personnel Records.

21. Place of Burial, Cremation or Removal No burial
Date of burial or removal _____

22. UNDERTAKER _____
(Name and address)

MEDICAL CERTIFICATE OF DEATH

23. DATE OF DEATH April 29 19
(Month) (Day) (Year)

24. I HEREBY CERTIFY that I attended deceased from: _____
_____ 19 to _____ 19
and last saw h. _____ alive on _____ 19

CAUSE OF DEATH

I
Immediate cause (a) Missing, presumed dead, when H.M.C.S. "ATHABASKAN" was torped and sunk by enemy action in t English Channel.
Give disease, injury or complication which caused death, not the mode of dying, such as heart failure, asphyxia, asthenia, etc.

Morbid conditions, if any, giving rise to immediate cause (stated in order proceeding backwards from immediate cause).
(b) _____
(c) _____

II
Other morbid conditions (if important) contributing to death but not causally related to immediate cause. _____

25. If a woman, was the death associated with pregnancy? _____

26. Was there a surgical operation? _____ Date of operation _____ 19
State findings _____ Was there an autopsy? _____

27. If death was due to external causes (violence) fill in also the following:—
Accident, suicide or homicide? _____ Date of injury _____ 19
(State which)

Manner of injury _____
(How sustained)

Nature of injury _____

Specify whether injury occurred in industry, in home, or in public place _____

Signed by _____ M.D.
Address _____ Date _____ 19

28. S.D.R. No. _____

29. Filed _____ 19
(Sub-Deputy Registrar)

VITAL STATISTICS, REGULATION 210,

MAKES IT THE DUTY OF THE UNDERTAKER OR PERSON ACTING AS UNDERTAKER TO OBTAIN ALL THE PARTICULARS REQUIRED IN THE "CERTIFICATE OF REGISTRATION OF DEATH" AND TO FILE THE SAME WITH THE SUB-DEPUTY REGISTRAR WHO SHALL ISSUE THE BURIAL PERMIT.

WRITE PLAINLY WITH UNFADING INK. THIS IS A PERMANENT RECORD.

Every item of information should be carefully supplied.

(See reverse side for instructions.)

CERTIFICATE of the SERVICE of

George Herbert MATTHEWS

in the Royal Canadian Naval Volunteer Reserve

Training Headquarters	R.C.N.V.R. Division	Official Number
Halifax, N.S.	Saint John, N.B.	12809

Date of Birth 8th May, 1921

Place of Birth Red Head, Saint John, Co., N.B.

Place of Residence Red Head, Saint John, N.B.

Trade brought up to Steelworker

Religion Methodist

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

mother
Mary Matthews
same address.

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

P.S.T. Date 19 Signature Rank

PARTICULARS OF SERVICE				MEDALS, DECORATIONS, etc.		
Date of Actual Volunteering	Date of Enrolment or re-enrolment	Period Volunteered for	Rating on Enrolment or Re-enrolment	Date of		Nature of Decoration
				Award	Presentation	
10-6-41	23-6-41	Hostilities	Ord. Smn.	21 Nov 43		Awarded Ribbon for 1939-43 Star

PERSONAL DESCRIPTION								
Identification Card # 869	Height		Chest (mean)	Weight	Hair	Eyes	Complexion	MARKS, WOUNDS, SCARS
	Feet	Inches						
On Entry.....	5	10	25 3/4	55 1/2	Blond	Hazel	Fair	Nil
On re-enrolment—6 years' Service.....								
On re-enrolment—12 years' Service.....								
Further Description if necessary.....								

TRANSFER BETWEEN DIVISIONS			TRANSFER—LISTS A AND B		
From	To	Date	List	Date	Authority

NAVAL TRAINING and ACTIVE SERVICE

Year	SHIP OR ESTABLISHMENT	LEDGER		RATING	FROM	TO	CAUSE OF DISCHARGE
		List	No.				
1941	Saint John Division.	V2809		Ord. Smn	23/6/41	6/8/41	Active Service
1941	Saint John Division.	V2809		Ord. Smn	7/8/41	3/1/42	Dec.
1942	H.M.S. Brunswick	V2809		Ord. Smn	15 Jan	7 July	
1942	Cornwallis			at sea	8 July	29 Aug 42	
	— (Rambo)			—	30 Aug 42	5 Sep 42	1/0
	Cornwallis			—	6 Sep 42	7 Sep 42	
	Sanasara			—	8 Sep 42	27 Oct 42	
	Niobe			—	28 Oct 42	10 Dec 42	
	H.M.S. "St Vincent"			—	11 Dec 42	5 Feb 43	
	Niobe			—	6 Feb 43	9 Feb 43	
	— (Athabasca)			—	16 Feb 43	29 April 43	Repassed Ministry Presumed Dead (21059)

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

[illegible]

Aug
22nd
Zang
5 Feb
12 m.c.

OF DISCHARGE

Signature _____[illegible]

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

V2809 OFFICIAL NUMBER

NAME MATTHEWS
(Surname)

George Herbert
(Given Names)

P.I.B.

V2809

OFFICIAL NUMBER

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
St. John Div. Str.	Ord. Smn.	23	6	41		V.G.	Sat.	31	12	41	S.T.	5	2	43	1927	1	
Duty Div. Hdqrs.	"	7	8	41		V.G.	Sat.	31	12	42							
Cornwallis	"	7	7	42	Nv 10Aof 7-7-42	Fair	Sat.	31	12	43							
Stadacona	"	9	9	42	DRD Cornwallis 6.9.42	V.G.	Sat.	29	4	44							
Tribal 11	"	28	10	42	DRD												
Vincent	"	10	12	42	D.R.#98												
"	A/Able Smn.	7	8	42	249A #20256												
Niobe	"	7	2	43	D.R.#108												
Athabaskan	"	9	2	43	D.R.#108												
DISCHARGED	"	29	4	44	"Missing" per casualty List. Presumed Dead, per Casualty List, page 67.												

GENERAL REMARKS

X-Ray approved

CANADIAN MEMORIAL CROSS:

MOTHER: Mrs. Mary MATTHEWS,

Red Head,

Saint John, N.B.

08 5 21 15 3800 43 2 5 11 00 9 02 0 08 95

23 06 41 07 08 41

07 08 42 13 25 00 21 20 01 44

0230 1 08 94

CB
W.P.

V2809

OFFICIAL NUMBER

FILE NUMBER 113-M-2682

OFFICIAL NUMBER V2809

NAME MATTHEWS

(Surname)

George Herbert

(Given Names)

DATE OF BIRTH 8 May, 1921.

PLACE OF BIRTH Red Head, Saint John, New Brunswick

OCCUPATION Steelworker

RELIGION Methodist

EDUCATION Grade 9

RESIDENCE AT TIME OF ENLISTMENT: Street and No.

Town Red Head

Province, etc St. John Co., New Bruns.

ENGAGEMENTS				DESCRIPTION					PREVIOUS SERVICE			
Date (in figures)			Period	Height	Hair	Eyes	Complexion	Marks or Scars	Served in	Rank or Rating	Dates	
Day	Month	Year									From	To
23	6	41	H.O.	5'10 $\frac{1}{4}$ "	Blonde	Hazel	Fair	None	Army Reserve	Private	7/40	6/41

NEXT OF KIN RELATIONSHIP (in pencil) mother

NAME (in pencil) Mrs. Mary Matthews

ADDRESS (in pencil): Street and No.

Town

Province, etc

MEDALS, CLASPS, HURT CERTIFICATES, PRIZE MONEY				EXAMINATIONS, CERTIFICATES, ETC.			
Date (in figures)			Particulars	Date (in figures)			Particulars
Day	Month	Year		Day	Month	Year	
21	11	43	1939/43 Star. (20071).	3	8	42	Marked "Tr".
				13	3	44	Qual. Preliminary Fire Fighting 1 day. (249A #-40564).

BADGES, G.C. OR G.S.				BRIEF PARTICULARS OF WARRANT OR C.M. PUNISHMENTS AND C.P. CHARGES							
Date (in figures)			1st, 2nd or 3rd G.C. or G.S.	Granted Deprived Restored	SHIP OR ESTABLISHMENT	Wt. No.	Date (in figures)			BRIEF PARTICULARS OF OFFENCE	PUNISHMENT
Day	Month	Year					Day	Month	Year		
					Athabaskan.	12	29	5	43	Absent over leave. (249A #19518).	Reduced to 2nd Class for Conduct.

DATE				DAYS FORFEITED							O.H.F. received
Day	Month	Year		Prison	Det'n	Cells	C. Power	W. Trial	Indiff. Char.		
29	5	43	(19518).								
28	8	43	(19791).								

Approved to count 332 days Army Reserve Service towards the award of G.S.B.

SECOND CLASS FOR CONDUCT

From

To

29-5-43. (19518).

28-8-43. (19791).



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 MATTEWS, George Rating A/ A.B.
Official No. V-2809 H.M.C.S. ATHABASKAN List 5/2-81
Who* Discharged missing in action on the A.M. 29th April 19 44

	\$	cts.
Net sum due on ledger on account of Wages.....	-	-
Proceeds of sale of Effects charged against Wages, brought from the other side	-	-
CASH—		
Proceeds of sale of Effects, brought from the other side.....	-	-
Found amongst Effects.....	-	-
Debts collected \$.....	-	-
Cash deposited by official Receipt No.....	-	-
Cash debited in the Accountant Officer's Cash Acct.....	-	-
If in debt in ledger, amount to be stated (in red ink).....	22	05
Rate of allotment (in words)..... <u>Thirty Dollars</u> charged to <u>30 Apl.</u>		
Name of ship from which transferred..... <u>H.M.C.S. ATHABASKAN</u>		
Total†..... <u>Debtor</u>	22	05

We hereby certify that we have every reason to believe that the above account contains a
true statement of all wages, Effects, and other Credits or Debts on the Ledger of..... H.M.C.S.
Niobe Div. III amounting to a net balance†..... Debtor
of..... Twenty-two dollars Five cents.

Dated on board H.M.C.S. Niobe Pay Div. III at Greenock
Scotland this Seventh day of June 19 44

Approved [Signature] Accountant Officer
Pay Lieut. R.C.N.V.R.
[Signature] { Initials of the Assistant
Commander, RCNVR, C.N.A.A. (P) Commanding Officer.
Accountant Officer

For Use at Headquarters. \$.....cts.....credited on Inspector's certificate
No.....to.....

Signature.....

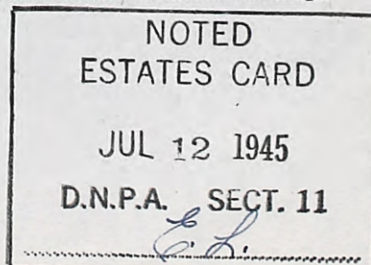
Date.....19.....

*State whether discharged on shore, D.D. or Run.
‡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.

†State whether "debtor" or "creditor".

C.N.S. 46

10M-3-43 (8719)
H.Q. N.S. 815-9-45



DISTRIBUTION OF SERVICE ESTATES

Estates Form "P. 4"

NAVY

HG

Name: MATTHEWS Surname
George, H. Christian Names
No.: V.2809
Rank
R.C.N.V.R.O/S Unit
29-4-44 Date of Death

AMOUNT

Date: 17-8-45
L.P.C. \$ 90.16
Other Credits
Total 90.16

SHARE	RELATIONSHIP	NAME AND ADDRESS	AMOUNT
1/2	Father	Charles Matthews, Red Head, St. John Co., N.B.	\$45.08
1/2	Mother	Mrs. Mary Matthews, (as above)	\$45.08
(as next of kin entitled)			
P4. TO TREAS. 10-9-45, qm			

AUTHORITY					
H.Q. F.E. No.	VOTE	PRI	H.Q. SUB.	OBJ.	AMOUNT
9999	831	00	50	000	\$90.16
CLASSIFIED BY			EXAMINED BY		
D			For Chief Treasury Officer		

DISTRIBUTION APPROVED AND AUTHORIZED

(L. M. FIRTH) Colonel
Director of Estates

AUDITED FOR PAYMENT

For Chief Treasury Officer

DC

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

4
NAVYDECEASED
MEMBER'S
NAMEGeorge Herbert
(CHRISTIAN NAMES)MATTHEWS
(SURNAME)

REGISTER NO.

8770

FILE NO.

NSV-2809

DATE

27 June '45

SERVICE NO.

V-2809

FINAL RANK OR RATING

A/A.B.

DATE OF DISCHARGE

29 Apr '44

PAYEE Mrs. Mary Matthews,
ADDRESS Red Head,
St. John Co., N.B.

DATE OF TERMINATION OF OVERSEAS SERVICE 29 Apr/44

A. TOTAL QUALIFYING SERVICE

NO. OF DAYS 997 EQUAL TO 33 COMPLETE PERIODS AT \$7.50

\$ 247.50

B. QUALIFYING OVERSEAS SERVICE

NO. OF DAYS 557 LESS 7 INELIGIBLE DAYS, EQUAL TO 550 DAYS @ 25c. PER DAY

\$ 137.50

C. SUPPLEMENT FOR OVERSEAS SERVICE

DAILY RATES AT DISCHARGE

PAY	\$ 1.85
SUBSISTENCE OR LODGING	\$ 1.45
AND PROVISION ALLOWANCE	\$.10
ADDITIONAL PAY A/S.T.	\$.10

DEPENDENTS' ALLOWANCE 1/30 OF \$

TOTAL	\$ 3.40	X 7 = \$ 23.80
NO. OF DAYS	557	X \$ 23.80
	183	

\$ 72.44

D. WAR SERVICE GRATUITY

E. DEDUCTIONS

OVERPAYMENT OF

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

OTHER DEDUCTIONS

\$

F. TOTAL AMOUNT PAYABLE

\$ 457.44

G. YOUR PORTION OF GRATUITY IS—

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

TOTAL DEPENDENTS' ALLOWANCE IN ISSUE \$

\$ 457.44

Cheque 36029- July 10/45

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

LJM

CHECKED BY

6

TREASURY

CHECKED BY

DATE

4/1/45

SERVICE REPRESENTATIVE

for Dir. Naval Pay Accting.

AB. S.T. George H. Matthews V2809.
H.M.C.S. Athabaskan. Overseas

☒ 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

910923

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 Matthews
(Print)
2. Christian Names George Herbert
(Print)
3. Service No. V2809 4. Paid rank or rating at date of termination of Service rating
5. Address, in full, to which payments of gratuity are to be forwarded

Mother Mary Matthews Red Head, St. John, N.B.
Father Charles Matthews Red Head, St. John, N.B.

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>V2809</u>	<u>AB. S.T.</u>	<u>July 7/41</u>	<u>April 29/44</u>

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)? Army If so, state the Force or Forces, with dates of commencement and termination of service. Fusillers at Sussex N.B.
Just took basic Training

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

April 23/45
(Date)

Mary Matthews
(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.

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.



PARTICULARS OF DEAD OR MISSING PERSONNEL
WITH REGARD TO PAYMENT OF WAR SERVICE GRATUITY

Name ~~of~~ Deceased Member GEORGE HERBERT MATTHEWS Rank or Rating A/A.B. O. No. V. 2809

1. Dependents' Allowance and Assigned Pay in force at date of death:

D.A.	<u> </u>	<u>Mrs. Mary Matthews</u>
A.P.	<u>30 00</u>	<u>Red Head</u>
D.A.	<u> </u>	<u>Saint John N.B.</u>
A.P.	<u> </u>	<u>(Mother)</u>

2. Pension awarded or being awarded to: No Record.

3. War Service Gratuity Application(s) received from: Mother as above.

In accordance with the War Service Grants Act, 1944 (Part I, Clause 4) and Directive dated 16th December, 1944 issued under authority of the Minister of Veterans Affairs, application(s) for War Service Gratuity in respect of the service of the above named deceased member may be dealt with as follows:

(X) To be paid to: Mrs. Mary Matthews (Mother) In the proportion of: 1

- and -

to: In the proportion of: 1

(X) To be referred to the Dependents' Allowance Board for decision as to dependency within the spirit and intent of the War Service Grants Act, 1944, observing this application(s) is classed under:

V Group "B" (ii)

Group ~~"C"~~ of the above mentioned Directive.

Date May 10th 1945

[Signature]
for D.N.P.A. (G) ES.

TO: D.N.P.A. "G"

W.S.G. Application No. 8770

FILE NO. N.S. - V-2809

"WAR SERVICE GRATUITY"

COMPUTATION OF SERVICE

MATTHEWS, George Herbert V-2809 A/Able Smn.
SURNAME CHRISTIAN NAMES OFFICIAL RANK OR RATING
IN FULL NUMBER ON DISCHARGE

CAUSE OF DISCHARGE: "Missing - presumed dead (ATHABASCAN)"

Applicant - Mother - AP-300

3 yrs — 1096
less 1
31
30
31
6 99
997

TOTAL SERVICE

Date of Active Service 7 Aug. 41

Date of Discharge 29 Apr. 44

Total No. of Days 997

Less non qualifying service —

Total Days 997

OVERSEAS SERVICE

% Total No. of Days 557

Less non qualifying service —

Total Days 557

Record of Service in other Forces (per Naval Records)

Branch of Service —

Date of Active Service —

Date of Discharge —

& % Overleaf

Computed By J. B. Money

Checked By R. H. B.

J. B. Money
for (H.B. Money)
Payr. Cmdr. R.C.N.R.
Director of Personnel Records

DATE: MAY 4 1945

C.F.H.C. & Ledgers. N.D.A.

NON QUALIFYING SERVICE

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

DATE OF DISCHARGE

DATE OF VOLUNTARY RELATIVES

(%)

OVERSEAS SERVICE:

Where Serving

From

To

No. of Days

"Kamloops"

30 Aug. 42 ✓

5 Sep. 42 ✓

- 7 ✓

"Niobe"

"Tribal II"

"Vincent"

"Athabasca"

28 Oct. 42 ✓

29 Apr. 44 ✓

- 550 ✓

557 ✓

365 ✓

4 ✓

30 ✓

31 ✓

31 ✓

29 ✓

31 ✓

29 ✓

550 ✓

LA/DL

REGISTERED

A I R M A I L

N.S. V-2809 (Pers. N)

/s/ January, 1945.


50

Dear Mrs. Matthews:

Further to my letter of the 10th of October, 1944, I regret to inform you that in view of the length of time which has elapsed since your son, George Herbert Matthews, Able Seaman, Official Number V.2809, Royal Canadian Naval Volunteer Reserve, was reported missing from H.M.C.S. "ATHABASKAN", and as no news has since been received to the contrary, the Canadian Naval Authorities have now presumed his death to have occurred on the 29th of April, 1944.

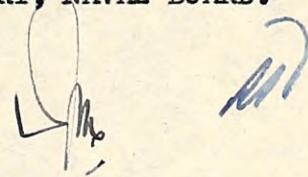
May I again express sincere sympathy with you in your bereavement on behalf of the Minister of National Defence for Naval Services, the Chief of the Naval Staff, and the Officers and men of the Royal Canadian Navy.

Yours sincerely,



Deputy SECRETARY, NAVAL BOARD.

Mrs. Mary Matthews,
Red Head,
SAINT JOHN CO., N.B.



Despatched by
Sec. N. B.

.....
Date 15/1/45
Time 800

29

10th October, 1944.

Dear Mrs. Matthews:

I must regretfully inform you that since your son was reported missing no further information has been received of his survival or that he is a prisoner of war.

I wish to assure you, however, that the Department makes every endeavour to discover the fate of missing men and draws upon all likely sources of information about them.

In the case of men who are believed to be prisoners of war continuous efforts are made to speed up the machinery whereby their names and camp addresses can reach this country. The official means is by lists of names prepared by the enemy government. These lists take some time to compile, especially if there is a long journey from the place of capture to a prisoners of war camp. Consequently "capture cards", filled in by the prisoners themselves soon after capture and sent home to their relatives, are often the first news received in this country that a man is a prisoner of war.

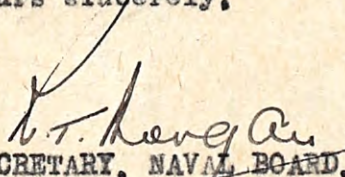
Very slight hope is now held, however, that your son is a prisoner of war as the total number of names of men known to be prisoners from H.M.C.S. "ATHABASKAN" coincides with the number which the Germans claim to have captured from this ship.

Even if no news is received that a missing man is a prisoner of war, endeavours to trace him do not cease. Enquiries are pursued, not only among those who are serving with him, but also through diplomatic channels and the International Red Cross Committee at Geneva. The moment reliable news is obtained from any of these sources it is sent to the Department and is immediately passed on to the next of kin.

Should no information be received to the contrary your son will be presumed dead by the Canadian Naval Authorities at a later date.

May I extend my sincere sympathy in this time of anxiety.

Yours sincerely,


H. T. Hargrave
SECRETARY, NAVAL BOARD.

Mrs. Mary Matthews,
Red Head,
SAINT JOHN Co., N.B.

Despatched by
Sec. N. B.

Date 10/10/44
Time 1.50

SERVICE

NAME: MATTHEWS, George Herbert.

O.N. ✓

PRESENT RANK/RATING: A/A.B.

DATE TAKEN ON ACTIVE SERVICE: 7.8.41.

SERVICE

SHIP OR ESTABLISHMENT

FROM

TO

Duty Div. Hdqtrs.
Cornwallis
Stadacona
Tribal
Vincent
Niobe
Athabaskan

7.8.41
7.7.42
9.9.42
28.10.42
10.12.42
7.2.43
9.2.43

6.7.42
8.9.42
27.10.42
9.12.42
6.2.43
8.2.43

IMPORTANT

(WILL): No.

NAME & ADDRESS MOTHER: Mrs Mary MATTHEWS,
OF NEXT OF KIN: Red Head,
SAINT JOHN, N.B.

HAS DISCHARGE FOR ANY REASON
BEEN PREVIOUSLY APPROVED? No.

REASON:

DATE:

INITIALLED *ja*

DATE 11.12.44

SECTION:

V.R.

(TO BE COMPLETED IN INK)

TFH/VD

REGISTERED

AIRMAIL

NS: V-2809 Pers. "N"

9

1 May, 1944.

Dear Mrs. Matthews:

It is with deepest regret that I must confirm the telegram of the 1st of May, 1944, from the Minister of National Defence for Naval Services, informing you that your son, George Herbert Matthews, Able Seaman, Royal Canadian Naval Volunteer Reserve, Official Number V-2809, is missing from H.M.C.S. "Athabaskan".

According to the report received from overseas, your son's loss occurred when H.M.C.S. "Athabaskan" was torpedoed and sunk by enemy action on the 29th of April, 1944, in the English Channel. Further particulars of this Naval disaster are being published in the newspapers.

While Able Seaman Matthews is reported as "missing", there is a possibility of his survival. It is understood that a number of the crew have been taken prisoners of war by the enemy. The Red Cross have been informed and are attempting to obtain from the German Government a list of those taken. Please be assured that as soon as any further information respecting your son has been received you will be informed.

Please allow me to express the sincere sympathy of the Minister of National Defence for Naval Services, the Chief of the Naval Staff and the Officers and men of the Royal Canadian Navy, the high traditions of which your son has helped to maintain.

Yours sincerely,

SECRETARY, NAVAL BOARD.

Mrs. Mary Matthews,
Red Head,
SAINT JOHN Co., N.B.

267

LETTER PATCHED BY
PERSONNEL NAVAL
MAY 1 1944

NAVAL PERSONNEL RECORDS

Ottawa, Ont. 10 May

N.S. V-2809 PERS.(N)

10

Dear Sir:

The undermentioned Canadian Naval Casualty
is forwarded to you for transmission to the Inspector of
Income Tax concerned:

~~MATTHEWS,~~

George Herbert

Name
(Surname) Able Seaman (Christian Names)
Rank/Rating V-2809 R.C.N.V.R.
Official No. "Missing" from R.M.C.S. "Athabaskan" on
Nature of Casualty 29 April 1944.
..... Will be reported later
Date of Casualty
..... Red Head, Saint John Co., N.B.
Address at time of Enlistment
..... Single
Marital Status at time of Enlistment
..... Steelworker
Occupation
..... Mother: Mrs. Mary Matthews
Name & Address of Next of Kin
..... Red Head, Saint John Co., N.B.
.....

Yours truly,

H.B. Money

for

SECRETARY, NAVAL BOARD.

eme

The Deputy Minister (Taxation),
Department of National Revenue,
Ottawa, Ont.

*a white
head
C*

FILE:

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

10 May, 1944

Sir:

(Date)

The following casualty has been reported -

NAME MATTHEWS George HerbertRANK or RATING
Able SeamanNAVAL NO.
V-2809 R.C.N.V.R.23 June 1941

Active Service: 7 August, 1941

DATE OF ENLISTMENT - Will be reported later

DATE OF DISCHARGE -

HOSPITAL -

(If discharged in hospital under jurisdiction of D. P. & N. H.)
Canada and High Seas

SERVICE -

(Indicate whether in Canada only; or in Canada and the high seas or elsewhere.)

"Missing" from H.M.C.S. "Athabaskan" which was

Reason for discharge and -

when and where any disability

was incurred, or where death

occurred.

torpedoed and sunk by enemy action in the English Channel on the 29th of April, 1944. While this casualty is listed as missing, it is impossible to make an estimate as to his chances of survival. Should no information be received to the contrary, you will be notified when official presumption of death with date has been set.

(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 -

MOTHERMrs. Mary Matthews

RELATIONSHIP -

Red Head, Saint John Co., N.B.

ADDRESS -

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.

Copies Form "B" fwd.
to Allots. (N) on

..... N.P.R./5.

for

SECRETARY, NAVAL BOARD.

Secretary, Canadian Pension Commission,
Room 228, Daly Building, OTTAWA, Ont.

NOTE: Duplicate copies of this form (Form "B") have been forwarded to the Chief Treasury Officer (Allotment Section), Department of National Defence, Naval Service, for completion respecting the details of Marriage Allowance, Dependents Allowance, etc., and subsequent transmission to you.

(See reverse side for further instructions)