

V14721  
SMITH  
KENNETH

GORDO

# OCCUPATIONAL HISTORY FORM

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..... SMITH Kenneth Gordon..... (b) Reg'l. No. 114721
2. (a) Arm of service..... Navy..... (b) Unit..... R.O.N.V.R...... (c) Rank..... Asst. Cook
3. (a) Date of birth..... Nov. 6 1922..... (b) Have you any dependents?..... No..... (c) Place of residence at time of enlistment..... New Westminster
4. (a) Place of enlistment..... Vancouver, B.C...... (b) Date of enlistment..... April 7th 1941

PLEASE  
LEAVE  
BLANK

## 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 12 Highschool
7. If you attended a university, give name of university and standing or degree secured..... No
8. (a) Did you ever enter upon a trade apprenticeship?..... No..... (b) If so, for what occupation?..... Nil..... (c) Did you finish it?..... Nil..... (d) If you did not finish it, how long did you serve at it?..... Nil
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?..... No

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

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

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

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

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

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

18. Name of employer..... Model Groceries..... Address..... New Westminster B.C.
19. Nature of employer's business (for instance, "farmer", or "building contractor", or "boot factory", or "iron foundry", or "retail store", etc.)..... Retail Grocery
20. (a) Your specific occupation..... Delivery..... (b) Number of years' experience at this occupation with any employer..... 8 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?..... No

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

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

## Section F—PARTICULARS OF FARMING EXPERIENCE

24. (a) Do you wish to engage in farming after the war?..... No..... (b) Do you feel competent to operate a farm?..... No..... (c) If so, in what kind of farming?..... Nil
25. (a) Were you born on a farm?..... No..... (b) How many years' actual farming experience have you had?..... None..... (c) In what provinces did you have experience?..... Nil

## 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.)..... Nil
28. State any employment preference or ambition you may have, other than indicated elsewhere in this form..... Accountancy

DATE..... 8th May..... 194..... 1 SIGNATURE.....



Copy To  
VWD  
ES

JUL 4 1941

MEMORANDUM FOR

P. 64

Mr. Leslie James Smith,

c/a J. Miln.

R.R. #2 *Cariboo* Austin Road,

New Westminster, B.C.

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

THE SECRETARY,  
DEPARTMENT OF NATIONAL DEFENCE,  
OTTAWA, ONTARIO  
ATTENTION: ADMINISTRATOR OF ESTATES

and the following number quoted:—

H.Q. NS. 113-S-1354 FD 246

DEPARTMENT OF NATIONAL DEFENCE  
OTTAWA, ONT.

October 6 1942

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

SMITH Kenneth Gordon Cook, (S)

O.N. V-14721, 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 or Local Magistrate, 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) Lt.-CDR. R.C.N.V.R.,

for (L.M. Firth) Lt.-Col.,  
Administrator of Estates.



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.....	Deceased		—
4	Mother of the Deceased.....	Deceased.		—
5	Brothers of the Deceased	Full Blood	Leslie James Smith	✓ % Mrs. J. Milne. P.R. 2 Cariboo Rd. New Westminster B. C.
		Half Blood	—	
6	Sisters of the Deceased	Full Blood	—	—
		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?	Kenneth Gordon Smith
11	Give the month and year of his birth.	November 6, 1922
12	Where and when were his parents married?	not known.
13	Was he ever married? If so, state exact place and date of marriage.	no.
14	Did he leave a (later) Will? If so, it should be forwarded.	no.
15	Is there any other estate which will necessitate application being made for Probate or Letters of Administration?	no.

## PARTICULARS OF DOMICILE

16	Where was deceased born?	Calgary, Alta.
17	In what Province, Country or State did he reside, and in which last?	<del>Alberga</del> British Columbia. Alberga. (B.C. Port)
18	How long in each?	12 years Alberga 7 years British Columbia.
19	What was the nature of his employment?	Coverly Clerk.
20	Did he own the house or homestead in which he lived? If so, where?	no.
21	Did he ever state verbally, or in writing, where he intended to make his permanent home?	no.
22	State <u>your</u> postal address in full.	C/o Mrs. J. Milne P.R. 2 Cariboo Rd. New Westminster B.C.

## PARTICULARS AS TO CLAIMS

23	Have the funeral expenses been paid? If so, by whom?	—
24	Are there any outstanding claims against the estate? If so, furnish full name and address of each Creditor in this space and enclose his Bill of Account. (See Note Below).	none.

NOTE.—Paragraph 24 refers to debts incurred for board and lodging, medical and funeral expenses, money borrowed, goods purchased, etc.; the following information to be embodied in all accounts submitted:—

1. Name and address of Creditor.
2. Detailed statement of particulars of claim with date or dates incurred.
3. At the end of his statement the creditor should certify that the account is just and reasonable, that no payments save as shown, have been made thereon and that he holds no security therefor; the creditor should then sign same, and if you admit that the claim is correct, then you "O.K." the bill and sign same.

(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

\* Brother of the deceased.

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

Leslie James Smith

{ Signature of Informant

CERTIFICATE

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

\*See above

Smith { Name of Informant } is the \* Brother 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 New Westminster this 15<sup>th</sup> day of October 1942

Signature of Clergyman, Priest or Magistrate

G. J. Jones

Qualification

Clergyman C. & E.

Address 524 Kelly Street, New Westminster B.C.

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 of each surviving Relative enquired after is stated in its proper place in the Statement opposite.



P 40932

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

DEPT  
NATIONAL DEFENCE

APR 13 1941  
N.S. 112-21354  
CANADA

ATTESTATION FORM  
(HOSTILITIES FORM)

FOR MEN OF THE ROYAL CANADIAN NAVAL VOLUNTEER RESERVE

SURNAME SMITH OFFICIAL NO. V/4721  
CHRISTIAN NAMES Kenneth Gordon MARRIED, SINGLE OR WIDOWER Single

PERMANENT ADDRESS	RELIGION
<u>R.R. 2 Austin Road, New Westminster, B. C.</u>	<u>United Church</u>

DATE OF BIRTH	*PLACE OF BIRTH	NAME AND ADDRESS OF NEXT OF KIN
<u>6th November, 1922</u>	Town <u>Calgary</u> County Province <u>Alberta</u>	<u>Brother:-Mr. Leslie James Smith</u> <u>R.R. 2, Cariboo Road,</u> <u>New Westminster, B. C.</u>

\*Original Nationality of:  
Father Scottish  
Mother English

\*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>30</u>				
Inches <u>6½</u>	Deflated <u>28</u>	<u>Brown</u>	<u>Brown</u>	<u>Fair</u>	<u>NIL</u>
	Mean <u>29</u>				

DATE OF ENROLMENT	RATING ENROLLING FOR	TRADE OR CALLING AND IN WHOSE EMPLOY
<u>7th April, 1941</u>	<u>Assistant Cook (S)</u> <u>R.C.N.V.R.</u>	<u>Delivery Boy</u> <u>Model Groceries.</u>

R.C.N.V.R. Division (or other establishment) at which enrolled.....

(B) DECLARATION TO BE MADE BY APPLICANT

I hereby declare as follows:—

- (1) That I am a British Subject domiciled in Canada.
- (2) That I am desirous of being enrolled as a member of the Royal Canadian Naval Volunteer Reserve Force, and that I accept and agree to abide by the rules of the said Force.
- (3) That \* (a) I have never served, and am not serving in any Naval, Military, Reserve, or Territorial Force.

\* (b) I served in .....for the period shown, and attach my record of service, in corroboration of this statement.

\*Cross out Clause not applicable.

SERVED IN	RANK	FROM
	<u>NIL</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.

Personnel Records  
Division.

1. Noted in Records.....	<u>LL</u>
2. Index Card.....	<u>LL</u>
3. Non-Sub. Card.....	<u>LL</u>
4. His Majesty's Forces on.....	<u>LL</u>
5. Release Strip.....	<u>LL</u>
6. Personnel Card.....	<u>LL</u>
7. ....	
8. ....	
DATE	<u>16-4-41</u>

(3) On being enrolled as a member of the VANCOUVER 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 7th day of April, 1941

Signature of applicant Kenneth Gordon Smith

(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 7th day of April, 1941

S. F. Fox Leut RCVR  
Signature of and rank of Attesting Officer.

(D) OATH OF ALLEGIANCE

I, Kenneth Gordon SMITH 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 Kenneth Gordon Smith

Witness S. F. Fox

Date April 7, 1941

Rank Leutenant RCVR

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

(E) CERTIFICATE OF ATTESTING OFFICER

Kenneth Gordon SMITH 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 Vancouver Division of the R.C.N.V.R. or in the appropriate official documents.

S. F. Fox Leut RCVR  
Attesting Officer.

April 7, 194 1

R.C.N.V.R. Division  
(or other establishment) Vancouver.

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.

admitted out  
2. search  
3. sealed from



Can. B. 207  
100 M-11-40 (7881)  
N.S. 815-2-207

Recheche Nodent  
= 18-4-41  
EYES - RT. 6/6  
LT. 6/6  
Weight - 110  
different  
SP 120/63  
Fit logs

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 SMITH Kenneth Gordon  
‡ candidate for entry as A/C (S) REVR  
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. White urine: neg.

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

(a) Age (Years Months)	(b) Weight without Clothes lbs.	(c) Height with Bare Feet ft. ins.	(d) General Development	(e) Chest Girth inches (a) maximum (b) minimum (c) mean	(f) Vision by— (i) Snellen's Types (ii) Colour Vision right eye left eye *colour vision	(g) Vaccinated or revac- inated for Small Pox (Date)	(h) Lungs, Heart, etc.	(i) Abdomen, Hernia, etc.	(k) Limbs and Joints	(l) Skin	(m) Ears and Hearing	(n) Testes, Varicocele, etc.	(o) Mouth, Teeth (No. deficient and No. defective, if any), Nose, Tonsils, etc.	(p) Anus, Hemorrhoids, etc.
18 yrs 5 mos.	110	5' 1" 6 1/2"	poor average - thin	30 28 29	6/5- 6/5- N	1935	BP 115/65 N	N	N	N	N	N	3 defic	N

Near vision - out glasses 50D

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

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

approved

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.

W. S. Smith

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

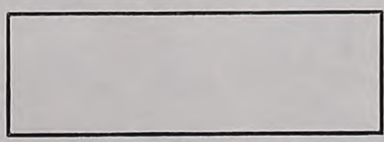
Signature of Candidate

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 Vancouver, B.C. the 4th of April 1941.

[Signature]  
Examining Medical Officer  
(Rank) Surg. Lieut. REVR

MEDALS AND MEMORIALS—DECEASED PERSONNEL

RCNVR May 43 "OTTAWA"

REGISTRATION No. DATE OF DESPATCH

(1) MEDALS  
PERSON

ENTITLED TO Mr. Leslie J. Smith - Brother

ADDRESS: c/o J. Miln,  
R.R. #2, Austin Road,  
New Westminster, B.C.

MEMORIAL BAR

(1)

DATE DESP

REGN. NO

332

(2) MEMORIAL CROSS

WIDOW

ADDRESS:

(2)

(3) MEMORIAL CROSS

MOTHER deceased

ADDRESS:

(3)

## DEPARTMENT OF VETERANS AFFAIRS

D OF D 13-9-42

## AWARDS NAVY

WAR SERVICE RECORDS

D.D.

SMITH	Kenneth Gordon	V-14721	Ck.(S)	FILE No.
SURNAME (IN BLOCK LETTERS)	CHRISTIAN NAMES	REG. No.	RANK ON DISCHARGE	C.A.S.F. UNIT

WAR SERVICEBADGE

CLASS)

No Nil

DATE DESPATCHED:

ADDRESS:

CAMPAIGN MEDALS	REGISTRATION NUMBER AND DATE DESPATCHED
1939-45 Star	
C.V.S.M. & Clasp	
War Medal	
	8335-

(THE REVERSE TO BE USED FOR ESTATE PURPOSES)

V1 4721

RESIDENCE AT TIME OF ENLISTMENT: Street and No. R.R. 2 Austin Rd. Town New Westminster Province, etc. B.C.

ADDRESS (in pencil): Street and No. 4 J. M. Rd. 803 Austin Rd. Town New Market Province, etc. N.C.

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

FILM  
NO. MSR 5362-8  
DATE \_\_\_\_\_

H.Q. 35—30M—5-41 (337)  
N.S. 815—7-35



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

V14721

OFFICIAL NUMBER

NAME SMITH  
(Surname)

Kenneth Gordon  
(Given Names)

OFFICIAL NUMBER V14721

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
Vancouver Div. Str.	Asst. Cook S	7	4	41	(249A/2232)	V.G.		13	9	42							
Duty Div. Hdqtrs.	" "	7	4	41		V.G.	Sat.	31	12	41							
Naden	" "	16	4	41													
Avalon	Cook (S)	4	1	42	Rated (249A/4878) Delete 249A/5028												
Ottawa	"	11	6	42	Via Stadacona												
DISCHARGED	"	13	9	42	"Missing believed killed in action" (Casualty List)												
GENERAL REMARKS																	
St. Joseph Hosp. (Comox) Bronchial Pneumonia.-17-30/10/41																	

DATE OF BIRTH		PLACE		CIVIL		SCOUT		RECEIVED		PREV. ENL.		RANK OR RATE ON ENLISTMENT		
DY	MO	YR	DY	MO	YR	DY	MO	YR	DY	MO	YR	DY	MO	YR
06	1	22	17	5	33	0	4	0	06	0	08	0	18	95
ENLIST. DATE		ACT. SER. DATE		RANK OR RATE		RANK OR RATE		RANK OR RATE		RANK OR RATE		RANK OR RATE		
DY	MO	YR	DY	MO	YR	DY	MO	YR	DY	MO	YR	DY	MO	YR
07	04	41	07	04	41				03	50	0	18	94	
SENIORITY		STR.		NON-A		CHECKED		CHECKED		CHECKED		CHECKED		
DY	MO	YR	DY	MO	YR	DY	MO	YR	DY	MO	YR	DY	MO	YR
04	01	42	09	00	00	20	13	09	42					

CERTIFICATE of the SERVICE of

Kenneth Gordon SMITH

in the Royal Canadian Naval Volunteer Reserve

ICNS. 9795

Training Headquarters	R.C.N.V.R. Division	Official Number
<i>Esquimaux</i>	<i>Vancouver</i>	V-14731

Date of Birth..... 6 November, 1922.		Name and Address of Nearest Relative or Friend (in pencil)	
Place of Birth..... Calgary, Alberta.		Brother	
Place of Residence..... R.R.#2 Austin Rd. New Westminster B.C.		Leslie Smith	
Trade brought up to..... Delivery Boy		R.R.#2 Cariboo Rd.	
Religion..... United Church.		New Westminster B.C.	
Can Swim:—P.P.T. (Good) Date..... 24 May 1941		Signature..... The First Rank..... fa CO	
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	6½	29	110	Brown	Brown	Fair	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.				
				On Active Service			
	Vancouver			assist bk (s)	7 Apr '41	16 Apr '41	
	Naden			— " —	17 Apr '41	3 Jan '42	
	— " —			bk (s)	4 Jan '42	10 Jan '42	
	Avalon			— " —	11 June '42	11 Aug '42	
	Ottawa			— " —	12 Aug '42	13 Sep '42	DD

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

[illegible]

## NAVAL TRAINING and ACTIVE SERVICE

[illegible][illegible]

Name

SMITH

## Conduct

[illegible]

[illegible]

...Gerrit... Person

VERIFIED BY .....

TING ..... CB(s) ..... OFF. NO. .... V14721 ..... ADDRESS .....

VERIFIED BY *R. Howard*.....

ORIGINAL P 53161

5934

H.Q. File No.

DECLARATION OF ALLOTMENT

N.S. CANADA

List and Number in Ledger	ALLOTOR	Rank or Rating	Official No.	Daily Rate of Pay
"NADEN"				
5D <sup>2</sup> /682	Surname..... SMITH Christian Names } Kenneth G.	A/Cook(S) R.C.N.V.R.	N.K. V/4721	\$1.35

Section A

ALLOTMENT NOW DECLARED

FULL NAME OF ALLOTTEE	Relationship	ADDRESS	Rate per Month to be charged on ledger	Month to commence. Payable on last working day
Surname The Canadian Bank of Commerce Christian Names Specimen Signatures	Attached	Douglas & Cormorant Ste., Victoria, B.C.	\$10.00 New	May 1941.

Section B

DISPOSAL OF EXISTING ALLOTMENTS

(See Note 1 below)

The following allotments are in force:—

Rate	NAME OF ALLOTTEE	ADDRESS	These allotments are to be disposed of as indicated below. (See Note 2):—
	NIL	NIL	

NOTE 1:—If there be no existing Allotment, the word "NIL" should be written across Section B.  
NOTE 2:—Write "Increased or reduced as Section A"; "To be stopped (charged to.....)"; "To be continued," etc.

Allottor's Signature authorizing charges

Kenneth G. Smith  
A/Cook (S) Rank or Rating

ENTERED IN FAIR LEDGER

ENTERED IN ROUGH LEDGER

The allotment now declared has been duly entered in the Fair and Rough Ledgers with effect from the appropriate date. The reduction or transfer has been duly approved by the Commanding Officer and the reasons for the alteration are:—

Assigned Pay to Wives	Object No. 111 \$.....
Assigned Pay to other Dependents	, , 113.....
Marriage Allowance	, , 116.....
Dependents Allowance	, , 119.....
Other Allotments	, , 122.....
Total	\$ 10 - 00

THE NAVAL SECRETARY,

Department of National Defence,  
(Naval Service)  
Ottawa, Ont.

A/Pay. Lieut. Commander, R.C.N.R.  
for COMMAND Accountant Officer

H.M.C.S. "NADEN"

Forwarded 8 May, 1941.

S. 63

40M-4-40 (4787)  
N.S. 815-9-33

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

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

AIR MAIL

19th September, 1942. 14

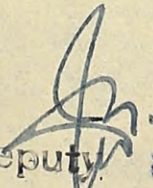
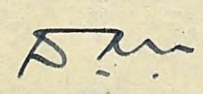
Dear Sir:

It is with deep regret that I must confirm the telegram of the 18th September from the Minister of National Defence for Naval Services informing you that your brother, Kenneth Gordon Smith, Cook (S), R.C.N.V.R., O.N.V.14721, is missing believed killed in action.

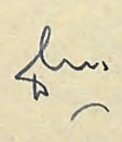
It is in the public interest that the name of his ship and the fact that she has been in action should not find its way to the enemy until such time as it is decided to publish the fact in a Naval Casualty List. It is therefore requested that this news, other than the fact that your brother is missing, may be treated as confidential.

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

Yours sincerely,

   
Deputy SECRETARY, NAVAL BOARD.

Mr. Leslie James Smith,  
c/o J. Miln,  
R.R. 2, Austin Road,  
NEW WESTMINSTER, B.C.



DRAFTED BY NPR PER H.B.  
FILE 113-S-1354

## NAVAL MESSAGE

S. 1320D  
10 Mil. 12-41 (2799-2800)  
N.S. 815-9-1320D

To:

MR. LESLIE JAMES SMITH  
C/O J. MILN R.R. #2  
AUSTIN ROAD  
NEW WESTMINSTER B.C.

From:

NSHQ OTTAWA ONT

CNF  
NPR  
PDG  
MINISTER

THE MINISTER OF NATIONAL DEFENCE FOR NAVAL  
SERVICES DEEPLY REGRETS TO INFORM YOU THAT  
YOUR BROTHER KENNETH GORDON SMITH COOK (S)  
ROYAL CANADIAN NAVAL VOLUNTEER RESERVE  
OFFICIAL NO V-14721 IS MISSING BLEIEVED  
KILLED IN ACTION

/17

(DELIVERY CONFIRMED)

L/T

P/L

19/9/42

AS

DEPARTMENT OF NATIONAL DEFENCE  
- Naval Service -

Ottawa, Canada,

..... September 28th, 1942, .....  
(Date)

Sir:

The following casualty has been reported -

<u>NAME</u>	<u>RANK or RATING</u>	<u>NAVAL NO.</u>
<u>SMITH, Kenneth Gordon</u>	<u>Cook (S).</u>	<u>V-14721, R.C.N.V.R.</u>
<u>DATE OF ENLISTMENT</u> -	<u>April 7th, 1941.</u>	
<u>DATE OF DISCHARGE</u> -	<u>September 13th, 1942.</u>	
<u>HOSPITAL</u> -	(If discharged in hospital under jurisdiction of D.P. & N.H.)	
<u>SERVICE</u> -	<u>"Canada &amp; 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>"DEAD" - Missing, believed killed in action. He was on board H.M.C.S. "OTTAWA".</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 Brother, NAME Mr. Leslie James Smith,  
ADDRESS c/o J. Wiln, R.R. #2, Austin Road, NEW WESTMINSTER, B.C.

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 Nil  
MARRIAGE ALLOWANCE AT \$ Nil PER DIEM PAID TO - Nil  
DEPENDENTS ALLOWANCE AT \$ Nil PAID TO Nil  
TOTAL MONTHLY PAYMENT TO - WIFE \$ Nil

Computed by O.R.  
Checked by [Signature]

DEPENDENTS \$ Nil

The Secretary,  
The Canadian Pension Commission.

Copy to the Sec. D.P. &amp; N.H.

[Signature]  
SECRETARY,  
NAVAL BOARD.

(See reverse side for further  
instructions.)

STATEMENT OF ACCOUNT

True extract from the ledger of H.M.C.S. " OTTAWA " ending 30 Sep 19 42  
List 502 No. 66 (Name) SMITH, Kenneth Rank Rating Cook(s) No. V-14721  
Avalon  
When entered A.M. 12 Aug Date of appearance Whither discharged D.D. 13 Sep 42

							\$	c.	
CREDIT from former account.....							43	10	
Pay as	Cook(s)	from	12 Aug	to	30 Sep	( 50 days at \$ 1.95 a day )	97	50	
"	(Rank Rating) H.L.M.	"	12 Aug	"	13 Sep	( 33 " " )	4	29	
"	"	"	"	"	"	"			
"	"	"	"	"	"	"			
"	"	"	"	"	"	"			
Kit Upkeep Allowance..... 1/10/42									
OTHER CREDITS: .....									
.....									
Total credits.....							144	89	
DEBT from former account.....									
PAYMENTS:—		1st	2nd	3rd	4th	5th			
		\$ c.	\$ c.	\$ c.	\$ c.	\$ c.			
1st month.....							Total.....		
2nd month.....							Total.....		
3rd month.....							Total.....		
Allotment..... 15.00 3.00 Charged Aug.....							18	00	
Pension deduction (Officers) charged to..... of.....									
Hospital stoppages.....									
Mulcts.....									
OTHER CHARGES: .....									
.....									
.....									
Total debits.....							18	00	
LEDGERS							Balance Cr. or <del>Dr.</del>	126	89
F							(Balance Dr. to be shown in red)		

Number of days actually victualled during period mentioned above 33

NOT VICTUALLED	LENT, SICK OR LEAVE	INCLUSIVE DATE		No. OF DAYS	SHIP, HOSPITAL, etc., IN WHICH BORNE
		FROM	TO		

Date 13 Nov 19 42  
PAY LIEUT RCNVR for ACCOUNTANT OFFICER

# DISTRIBUTION OF SERVICE ESTATES

MH  
Estates Form "P. 4"

ARMY

Name: SMITH, Surname Kenneth G. Christian Names No.: V-14721

COOK (S) Rank SNOR OTTAWA Unit 13-9-42 Date of Death

## AMOUNT

W.S.G. 136.46  
L.P.C. \$126.69

Date: 16-8-45

Other Credits..... 61.36

Total..... 324.71

Prev. dist. 188.25  
This dist. 136.46

SHARE	RELATIONSHIP	NAME AND ADDRESS	AMOUNT
All	Brother	Leslie J. Smith, 337. Knox St., New Westminster, B.C.  (As next of kin entitled)	136.46

WBC

AUTHORITY					
H.Q. F.E. No.	VOTE	PRI	H.Q. SUB.	OBJ.	AMOUNT
9999	831	00	50	000	136.46
CLASSIFIED BY <u>T.9K9</u>			EXAMINED BY  For Chief Treasury Officer		

DISTRIBUTION APPROVED AND AUTHORIZED

(L. M. Firth) Colonel  
Director of Estates

AUDITED FOR PAYMENT

For Chief Treasury Officer

P290517/13-5-1354

# 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 Smith, Kenneth Rating Cook(s)  
Official No. V-14721 H.M.C.S. OTTAWA List 5D2/66  
Who\* D.D. on the 13th September 1942

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>Fifteen dollars</u> charged to <u>30. Sep.</u>		
<u>Three dollars</u>		
Name of ship from which transferred.....		
Total†..... <u>Creditor</u>		126.89

35

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. "OTTAWA" amounting to a net balance†..... Creditor of One hundred twenty six dollars eighty nine cents.

Dated on board H.M.C.S. "AVALON" at St. John's Newfoundland this Thirteenth day of November 1942.

Approved [Signature] For..... Accountant Officer  
Pay. Lieutenant, R.C.N.V.R.  
[Signature] Initials of the Assistant Accountant Officer  
PAY. LIEUTENANT R.C.N.V.R.  
[Signature] Commanding Officer.  
Lieut. Commander, R.C.N.

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

DC

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

4  
NAVY

CEASED MEMBER'S NAME **Kenneth Gordon** (CHRISTIAN NAMES)  
SMITH (SURNAME)  
W  
REGISTER NO. 10677  
FILE NO. NSV-14721  
DATE 13 July '45  
SERVICE NO. V-14721  
FINAL RANK OR RATING Cook (8)  
DATE OF DISCHARGE 13 Sep '42  
ADDRESS **Director of Estates,  
308 Sparks St.,  
Ottawa, Ont.**  
DATE OF TERMINATION OF OVERSEAS SERVICE 13 Sep '42

## A. TOTAL QUALIFYING SERVICE

NO. OF DAYS 525 EQUAL TO 17 COMPLETE PERIODS AT \$7.50

\$ 127.50

## B. QUALIFYING OVERSEAS SERVICE

NO. OF DAYS 33 LESS 15 INELIGIBLE DAYS, EQUAL TO 18 DAYS @ 25C. PER DAY

4.50

## C. SUPPLEMENT FOR OVERSEAS SERVICE

## DAILY RATES AT DISCHARGE

PAY \$ 1.95  
SUBSISTENCE OR LODGING \$ 1.45  
AND PROVISION ALLOWANCE  
ADDITIONAL PAY H.L.M. \$ .13

DEPENDENTS' ALLOWANCE 1/30 OF \$

TOTAL \$ 3.53 X 7 = \$ 24.71  
NO. OF DAYS 33 X \$ 24.71  
183

4.46

## D. WAR SERVICE GRATUITY

136.46

## E. DEDUCTIONS

OVERPAYMENT OF

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

NIL

OTHER DEDUCTIONS \$

## F. TOTAL AMOUNT PAYABLE

136.46

## G. YOUR PORTION OF GRATUITY IS—

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

= \$ 136.46

Voucher 1353- July 26/45

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  
IM

CHECKED BY

TREASURY  
CHECKED BY  
J. Stock

DATE

17/7/45

SERVICE REPRESENTATIVE

for Dir. Naval Pay Accting.

## STATEMENT OF WAR SERVICE GRATUITY - NAVY

Deceased  
Member

Name

KENNETH GORDON SMITH

(Christian Names)

(Surname)

Payee

Address

Director of Estates for Service Estate of  
308 Sparks St. Kenneth G. SMITH  
Ottawa, Ont. N.S. V14721

Register No. 10677

File No. V-14721

Date 26/6/45

Service No. V-14721

Final Rank or Rating Cook (S)

Date of Discharge 13 SEP/42

Date of termination of overseas service 13 SEPT/42

## A. TOTAL QUALIFYING SERVICE

No. of days 525 equal to 17 complete periods at \$7.50  
30

\$ 127.50

## B. QUALIFYING OVERSEAS SERVICE

No. of days 33 less 15 ineligible days equal to 18 days @ 25¢ per day

4.50

## C. SUPPLEMENT FOR OVERSEAS SERVICE

## DAILY RATES AT DISCHARGE

Pay	\$ 1.95
Subsistence or Lodging	\$ 1.45
and Provision Allowance	
Additional Pay H.L.M.	\$ .13

Dependents' Allowance 1/30 of \$ —

Total 3.53 x 7 = \$ 24.71

No. of days 33 x \$ 24.71 = 4.46  
183

4.46

## D. WAR SERVICE GRATUITY

\$ 136.46

## E. DEDUCTIONS

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

OTHER DEDUCTIONS \$ nil

## F. TOTAL AMOUNT PAYABLE

136.46

## G. YOUR PORTION OF GRATUITY IS

Dependents' Allowance in issue to you \$ — of \$ = \$ 136.46  
Total Dependents' Allowance in issue \$ —

**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	Checked by	Treasury	
		Checked by	Date

Service Representative

D.N.P.A. CHECK

1	2m	6	
2	2m	7	
3	2m	8	
4	2m	9	
5	2m	10	



Department of National Defence  
Naval Service

Ottawa, Canada.

IN REPLY PLEASE QUOTE  
No. N.S. 113-S-1354  
233745

September 28th, 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:

NAME, RANK/RATING NO.	PLACE, DATE & CAUSE of DEATH	NEXT OF KIN
SMITH, Kenneth Gordon, Cook (S), O.N. V-14721, RCNVR	Missing, believed killed in action on the 13th of September, 1942. He was on board H.M.C.S. "OTTAWA".	Brother: Mr. Leslie James Smith, c/o J. Miln., CARIBOO R.R. #2, <del>Austin</del> Road, NEW WESTMINSTER, B.C.

ALLOTMENTS IN FORCE.

<u>In favour of:</u>	<u>Amount.</u>	<u>Initials.</u>
(1) Canadian Bank of Commerce, Douglas & Cormorant Sts., Victoria, B.C.	\$15.00	O.R.
(2) Mutual Life Assurance Co., Waterloo, Ont.	\$ 3.00	<i>Lee</i>

WILL: No record.

Yours truly,

*R. A. ...*  
SECRETARY, NAVAL BOARD.  
*per LA*

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



*Avalon*  
*29 May '42*

The Commandery in Canada  
of  
The Grand Priory in the British Realm  
of the  
Venerable Order of the Hospital of St. John of Jerusalem  
The St. John Ambulance Association

Patron

HIS MAJESTY THE KING  
SOVEREIGN HEAD AND PATRON OF  
THE ORDER



FIELD MARSHAL H.R.H.  
THE DUKE OF CONNAUGHT, K.G.  
GRAND PRIOR OF THE ORDER

AMBULANCE DEPARTMENT

FOUNDED 1895 — INCORPORATED 1914

FOR INSTRUCTION IN FIRST AID, HOME NURSING, HOME HYGIENE AND SANITATION

This Certificate in

**First Aid to the Injured**

is awarded to

JOHN J. DONNELLY

*Stw*  
*V30843*

*who has attended a course of instruction held under the auspices*  
of Department of National Defence Centre, at Esquimalt  
*and having been examined is found proficient in the said subject*

*Peter Sleave*  
1<sup>st</sup> Cd. Ndr., R.C.N.

LECTURER.

*T. B. McLean M.D.*  
Sq. Lt. R.C.N.V.R.

INSTRUCTOR.

SURGEON EXAMINER.

*Issued by authority of  
the Lieutenant and the  
Director of Ambulance.*

DATE:

May 13, 1942

39803



## Passing Certificate

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This is to Certify

that Kenneth Gordon SMITH,

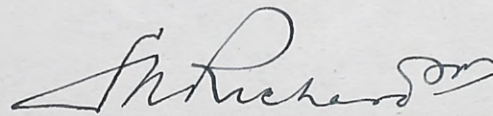
Rating Asst. Cook (S), RCNVR, Official Number V. 14721.

has passed

THE EDUCATIONAL TEST, I, R.C.N.

held on 8th July, 1941.

For advancement to Petty Officer



Naval Secretary  
Director of Education.

Department of National Defence,

Ottawa, this 1st day of September 19 41.

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