

V5911
WARD
VICTOR

ALBER

LA/CM




N.S. V-5911. F.D. 25.PERS.(N)

20th September, 1944.

42

THIS IS TO CERTIFY that according to official information Victor Albert Ward, Signaman, Official Number V-5911, Royal Canadian Naval Volunteer Reserve, is missing, presumed dead to date the 7th of May, 1944. He was serving in H.M.C.S. "VALLEYFIELD" which was torpedoed and sunk by enemy action whilst on Convoy duty in the North Atlantic.


~~Deputy~~ SECRETARY, NAVAL BOARD.

LA/GFM

N.S. V-5911. F.D. 25. PERS. (N)

Policy: DC 369421 A3.

22nd September, 1944.

43

Sir:

With reference to your letter of the 13th of September, 1944, attached hereto for your information is a certificate respecting the death of Victor Albert Ward, Signalman, Official Number V-5911, Royal Canadian Naval Volunteer Reserve.

This rating left the "home areas", for the first time more than thirty-one days prior to the date of death. He died within thirty-one days of leaving "the home areas", the last time however.

N.S. 32-2-1
See 1588
F.D.

Signalman Ward enlisted in the Royal Canadian Naval Volunteer Reserve on the 19th of July, 1940.

His date of birth as recorded in Naval Service Headquarters' records is the 13th of June, 1918.

Yours truly,

[Signature]

Deputy SECRETARY, NAVAL BOARD.

Encl.

Manager,
Claim Division,
Metropolitan Life Insurance Co.,
OTTAWA, Ontario.

[Handwritten initials]

[Handwritten initials]

Despatched by
Sec. N. B.

Date 22/9/44
Time 16 00
- enc

HS

REGISTERED

File No: N.S. V-5911 PERS. (N)

30th August, 1944. 33

Dear Mr. Ward:

Further to my letter of the 11th of May, 1944, in view of the length of time that has elapsed since your son, Victor Albert Ward, Signalman, Official Number V-5911, Royal Canadian Naval Volunteer Reserve, was reported "missing" after the sinking of H.M.C.S. "VALLEYFIELD", and as no information has since been received of his having survived, the Canadian Naval Authorities have now presumed his death to have occurred on the 7th of May, 1944.

May I again express the sincere sympathy of the Department in your bereavement.

Yours sincerely,

RA

Deputy SECRETARY, NAVAL BOARD.

*Noted on Estate
5-9-44*

*Card.
G. P.*

Mr. Albert Ward,
62 Columbia Avenue,
WESTMOUNT, Que.

Royal Canadian
Message ✓ Condolence ✓
Date Sent *30/8/44* NPR 5

BF
30/9/44
N.P.R. 1/5
2/8

a

TFH/GP

REGISTERED
AIR MAIL
NS V5911 PERS (N)

11th May, 1944

21

Dear Mr. Ward:

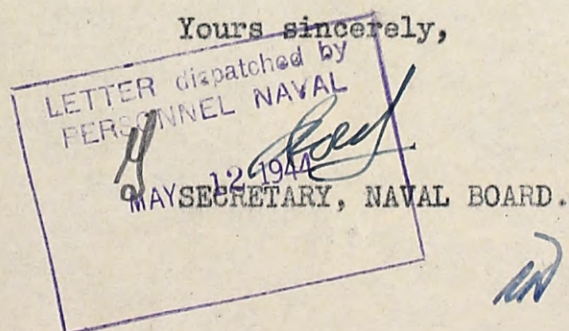
Further to my letter of the 8th of May, 1944, particulars respecting the loss of H.M.C.S. "Valleyfield", from which your son has been reported "missing" are being released to the press, and I am accordingly passing them on for your information.

H.M.C.S. "Valleyfield" was torpedoed and sunk by enemy action while on Convoy Escort duty in the North Atlantic. Details of the action are not being released beyond the fact that the ship sank almost immediately after being hit.

Thirty-eight members of her complement are listed as survivors; five were killed in action; the remaining one hundred and twenty-one, including the Commanding Officer, Lieutenant Commander D. T. English, of Halifax, Nova Scotia, are missing.

May I again express the sincere sympathy of the Department in your sad loss.

Yours sincerely,



Mr. Albert Ward,
62 Columbia Avenue,
WESTMOUNT, QUEBEC.

Elm

REPORT OF THE DEATH OF AN OFFICER, MAN OR BOY

H.M.C.S. VALLEYFIELD at SEA

Name Victor Albert HAND
(Christian names in full)

Rank of Rating SIC. MALMAN Official No. 70911 R.C.M.V.R.
(If unknown, date of first entry)

Place of Birth MONTREAL, QUEBEC Date of Birth 13 JUNE, 1910

Occupation in Civil Life BOOK CLERK Religion PROTESTANT

Number of years service in the Navy (Long Service R.C.N., or mobilized service in case of R.C.N.
(Temporary) or Reserve ratings) 3 YEARS 9 MONTHS

Date of Death 7 MAY, 1944 Place of Death AT SEA

Cause of Death ENEMY ACTION--SUBMERSION OF H.M.C.S. "VALLEYFIELD"
(If due to accident, violence, or enemy action, particulars to be stated briefly)

Nearest known relative or friend { Name Mrs. Alice HAND Relationship Mother
Address 68 Columbia Ave.,
Westmount, Quebec.

Date on which the above was informed by Ship INFORMED BY H.M.C.S. "VALLEYFIELD"

Date on which death was registered with local Officials NOT REGISTERED

In the case of Imperial Service men, whether Active Service, Pensioner or Reserve, date on which the prescribed return was rendered to the Registrar General in London, Edinburgh or Dublin, according to Nationality

Place of Burial AT Date of Burial AT
(if known) (if known)

Location, Number, etc., of grave AT
(if known)

Undertaker employed AT
(if any)

If borne for discipline only, date D.S.Q. or invalided

S. J. D. O'NEILL
Commanding Officer,

17th MAY, 1944

194

The NAVAL SECRETARY,
Department of National Defence,
Ottawa, Canada.

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

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

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

Sir:

13th May, 1944.

(Date)

The following casualty has been reported -

| NAME | RANK or RATING | NAVAL NO. |
|---------------------|----------------|-------------------|
| WARD, Victor Albert | Signalman | V5911, R.C.N.V.R. |

DATE OF ENLISTMENT - 19th July, 1940 Active Service 4th August, 1940

DATE OF DISCHARGE - Will be reported later

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" at sea when the ship in which he was serving was lost by enemy action. While this casualty occurred, 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 -

RELATIONSHIP - Father: NAME - Mr. Albert Ward

ADDRESS - 62 Columbia Avenue, WESTMOUNT, Quebec

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.

H.B. Money

for
SECRETARY, NAVAL BOARD.

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

*B 8
12/18/44
NPR/5
e*

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)

ML.

AUG 30 1944

V-5911 Pers.(N)

32

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, Official No., UNIT</u> | <u>PARTICULARS RE DEATH</u> | <u>NEXT OF KIN</u> |
|--|---|---|
| WARD, Victor Albert, Signalman, Official Number V-5911, RCNVR. | Missing, presumed dead to date 7 May, 1944. He was serving in H.M.C.S. "VALLEYFIELD", which was torpedoed and sunk by enemy action while on Convoy escort duty in the Atlantic. | Father: Mr. Albert Ward, 62 Columbia Ave., Montreal, Que. |

| <u>In favor of</u> | <u>ALLOTMENTS IN FORCE</u> | <u>Amount</u> | <u>Initials</u> |
|--------------------|--|------------------|-----------------|
| Mother | Mrs. Elsie Ward, 62 Columbia Ave., Westmount, Que. | \$10.00 A. P. | AMP. |
| W. S. C. | Rec. Gen. of Canada, War Savings Certificates, Ottawa, Ontario | \$4.00 A. P. | AMP. |

Note

Allots. stopped July 31/44. Overpaid for months of May, June and July

Will: Will retained by father. See address above.

Yours truly,

H.B. Money
for SECRETARY, NAVAL BOARD.

Administrator of Estates,
Estates Branch,
Department of National Defence,
Ottawa, Ont.

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

V5911

OFFICIAL NUMBER

NAME

WARD

Victor, Albert

P.I.B.

V5911

OFFICIAL NUMBER

| Ship or Establishment | Rating | From | | | Remarks | Character | Efficiency | Date | | | Non-Sub. Rating | Qualified | | | Qualified | | |
|-----------------------|-----------|------|-------|------|-------------------------|-----------|------------|------|-------|------|-----------------|-----------|-------|------|-----------|-------|------|
| | | Day | Month | Year | | | | Day | Month | Year | | Day | Month | Year | Day | Month | Year |
| Div. Str. Montreal | Ord. Smn. | 19 | 7 | 40 | | | | | | | T.O.V/S | 26 | 3 | 42 | 2490 | 10 | 23 |
| Duty Div. Hdqrs. | " | 4 | 8 | 40 | | | | | | | V/S.111. | 6 | 11 | 43 | (2125-3) | 30 | 30 |
| Stadacona | " | 6 | 8 | 40 | | | | | | | | | | | | | |
| " | Ord. Sig. | 13 | 9 | 40 | | V.G. | Sat. | 31 | 12 | 43 | | | | | | | |
| St. Clair | " | 12 | 11 | 40 | | V.G. | Sat. | 7 | 5 | 44 | | | | | | | |
| Stadacona | " | 20 | 11 | 40 | | | | | | | | | | | | | |
| Venture (Caribou) | " | 21 | 11 | 40 | | | | | | | | | | | | | |
| Venture (Nootka) | " | 5 | 2 | 41 | | | | | | | | | | | | | |
| Stadacona | " | 3 | 5 | 41 | | | | | | | | | | | | | |
| " | Sig. | 5 | 5 | 41 | Leave- 16/5/41-30/5/41. | | | | | | | | | | | | |
| Lethbridge | " | 11 | 6 | 41 | | | | | | | | | | | | | |
| Hochelaga | " | 11 | 6 | 41 | | | | | | | | | | | | | |
| Venture (Lethbridge) | " | 25 | 6 | 41 | | | | | | | | | | | | | |
| Avalon | " | 6 | 3 | 42 | | | | | | | | | | | | | |
| Stad. Lethbridge | " | 31 | 5 | 42 | 177578 | | | | | | | | | | | | |
| Stadacona | " | 8 | 9 | 42 | HDO B8683 | | | | | | | | | | | | |
| St Hyacinthe | " | 9 | 9 | 42 | HDO - 8752 | | | | | | | | | | | | |
| Naden | " | 19 | 11 | 42 | DRD #-186 | | | | | | | | | | | | |
| William Head | " | 8 | 12 | 42 | DRD #-215 | | | | | | | | | | | | |
| Givenchy | " | 27 | 5 | 43 | DRD #-1126 | | | | | | | | | | | | |
| Stadacona | " | 4 | 6 | 43 | DRD #-1713 | | | | | | | | | | | | |
| Transcona | " | 8 | 6 | 43 | DRD #-1750 | | | | | | | | | | | | |
| Stadacona | " | 21 | 7 | 43 | DRD H-2129 | | | | | | | | | | | | |
| St Hyacinthe | " | 26 | 8 | 43 | DRD H-2428 | | | | | | | | | | | | |
| Stadacona | " | 17 | 11 | 43 | DRD H-3227 | | | | | | | | | | | | |
| Hochelaga 11 | " | 26 | 11 | 43 | DRD H-3343 | | | | | | | | | | | | |
| W. Head | " | 7 | 5 | 44 | Presumpt. Dead (per) | | | | | | | | | | | | |

GENERAL REMARKS

Awarded Canadian Memorial Cross:
MOTHER: Mrs. Elsie WARD,
62 Columbia Ave.,
Westmount, Que.

| | | | | | | | | | | | | | | | |
|---------------|-----|-----|---------------|---------|-------|-------|-----|---------------|-----------|-------|---------|--------------|--------|-----|--|
| DATE OF BIRTH | | | PLACE | CIVIL | OCCU. | RELI. | ED. | PERM. | RESIDENCE | PREV. | ENL. | RANK OR RATE | | | |
| DY. | MO. | YR. | BIRTH | MAIN | SUB. | SION | | P. | CTY. | TOWN | SERV. | DIV. | A. | BR. | |
| 13 | 6 | 18 | 12 | 8 | 30 | 0 | 30 | X | 2 | 23 | 10 | 0 | 09 | 0 | |
| ENLIST DATE | | | ACT SERV DATE | STR. | | | | ACT SERV DATE | | | SHIP OR | RANK OR RATE | | | |
| DY. | MO. | YR. | DY. | MO. | YR. | CAT. | | | | DY. | MO. | YR. | ESTAB. | A. | |
| 19 | 07 | 40 | 04 | 08 | 40 | | | | | | | | 96901 | 11 | |
| SENIORITY | | | STR. | NON SUB | M | | | | CODED | | | CHECKED | | | |
| DY. | MO. | YR. | CAT. | A. | B. | ST. | | | | | | | | | |
| 05 | 05 | 41 | 13 | 42 | 00 | | | | | | | | | | |

SW

OFFICIAL NUMBER V5911

NAME

WARD

.....
(Surname)

Victor, Albert.

(Given Names)

.....DATE OF BIRTH

13 June 1918

PLACE OF BIRTH

Montreal, Que.

...OCCUPATION

.....
Stock Clerk.

RELIGION

Protestant.

...EDUCATION

RESIDENCE AT TIME OF ENLISTMENT: Street and No.

350 Greenwood Ave.

Town of Westmount.

.....Province, etc

Que.

[illegible]

NEXT OF KIN RELATIONSHIP (in pencil).

Father

NAME (in pencil)

Mr. Arthur Ward

ADDRESS (in pencil): Street and No.

62 Columbia Avenue

Town

Westman

.....Province, etc.

.....
Bob

[illegible][illegible][illegible]

|| Last Will & Testament = -384.00

FILM

10. WR-5227-4

DATE

SECOND CLASS FOR CONDUCT

From

To

| | | | | |
|----------------------------|-----------------|----------|-------------------|---------------|
| WARD | Victor Albert | V-5911 | Sig. | FILE No. |
| SURNAME (IN BLOCK LETTERS) | CHRISTIAN NAMES | REG. No. | RANK ON DISCHARGE | C.A.S.F. UNIT |

WAR SERVICE

BADGE

CLASS

No. Nil

DATE DESPATCHED:

ADDRESS:

| CAMPAIGN MEDALS | REGISTRATION NUMBER AND DATE DESPATCHED |
|------------------|---|
| 1939-45 Star | |
| Atlantic Star | |
| C.V.S.M. & Clasp | |
| War Medal | |
| | 7784 16 - 1 - 50 |
| | |
| | |

(THE REVERSE TO BE USED FOR ESTATE PURPOSES)

MEDALS AND MEMORIALS—DECEASED PERSONNEL

RCNVR Aug. 45 "VALLEYFIELD"

REGISTRATION No. DATE OF DESPATCH

- (1) MEDALS
PERSON

ENTITLED TO Mr. Albert Ward-Father

ADDRESS: 62 Columbia Avenue,
Westmount, Que.

- (2) MEMORIAL CROSS

WIDOW

ADDRESS:

- (3) MEMORIAL CROSS

MOTHER Mrs. Elsie Ward

62 Columbia Ave., Westmount, Que.

ADDRESS:

MEMORIAL BAR

(1)

DATE DESP

REGN NO

(2)

(3)

13-10-44

THE CANADIAN PENSION COMMISSION

MEMORANDUM

To.....Pension Medical Examiner, MONTREAL

.....Ottawa, Sept. 9th, 1944.

From.....Head Office.....

V-5911 SGMN. WARD, Victor A.

P. & N. H.

1879-V

The Department of National Defence, Naval Service,

officially reports that the marginally named was reported -

Missing, presumed dead, 7th May, 1944 when H.M.C.S.
"VALLEYFIELD" was torpedoed and sunk by enemy action
in the Atlantic Ocean,

~~now the~~

on service

CANADA & HIGH SEAS.

His next of kin is reported as -

Father -

Mr. Albert Ward,
62 Columbia Ave.,
Westmount, Que.

The Addressograph Stencil shows payment of Assigned Pay of

\$ 10.00

a month to -

Mrs. Elsie Ward,
62 Columbia Ave.,
Westmount, P.Q.
(RELATIONSHIP NOT STATED.)

As no D.A. was payable the Commission will not take
any action unless a claim is filed.

/AS

E. Clewes,

for

Canadian Pension Commission.

W.S.G. Application No. 10595'

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

FILE NO. N.S. 1-5911'

"WAR SERVICE GRATUITY"

COMPUTATION OF SERVICE

WARD
SURNAME
Victor Albert
CHRISTIAN NAMES
IN FULL
1-5911'
OFFICIAL
NUMBER
Sic
RANK OR RATING
ON DISCHARGE

CAUSE OF DISCHARGE: Dead (Dall's Island)

Applicant: father (A.P. & A.D. in favor Mrs. Elsie Ward mother)

6 Aug '40 - 5 Aug '44 - 1461

Less 8 May '44 - 24

June 30

July 31

Aug 5

1371

TOTAL SERVICE

Date of Active Service 6 Aug '40

Date of Discharge 1 May '44

Total No. of Days ~~1736~~ 1371

Less non qualifying service nil

Total Days 1371

OVERSEAS SERVICE

% Total No. of Days ~~1105~~ 1143

Less non qualifying service nil

Total Days 1143

Record of Service in other Forces (per Naval Records)

Branch of Service N

Date of Active Service :

Date of Discharge L

& % Overleaf

Computed By M. V. Kneble

Checked By [Signature]

[Signature]
for (H.B. Money)

Payr. Cmdr. R.C.N.R.

Director of Personnel Records

DATE: JUN 26 1945

008
dd

N.D.A.

NON QUALIFYING SERVICE

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

(%)
OVERSEAS SERVICE:

| Where Serving | From | To | No. of Days |
|---------------|-------------|-------------|-----------------------|
| St. Clair | 11 Nov. '40 | 19 Nov. '41 | 374 404 |
| Canibou | 21 Nov. '40 | 4 Feb. '41 | 76 |
| Nookla | 14 Feb. '41 | 2 May '41 | 78 |
| Lethbridge | 25 June '41 | 5 March '42 | 254 |
| Lethbridge | 18 Apr. '42 | 1 Oct. '42 | 167 |
| Transcona | 9 June '43 | 20 July '43 | 42 |
| Vallentyne | 8 Dec. '43 | 29 Feb. '44 | 152 84 |
| | | 7 May '44 | 1105 |
| | | | <u>1143</u> |

OVERSEAS SERVICE:

| St. Clair | Canibou | Nookla | Leth. | Leth. | Trans. | Vallentyne |
|-----------|---------|--------|-------|-------|--------|------------|
| 365 | 10 | 15 | 365 | 13 | 22 | 24 |
| 9 | 31 | 31 | 26 | 31 | 20 | 31 |
| | 31 | 30 | 30 | 31 | 42 | 29 |
| 374 | 4 | 2 | 31 | 31 | | 31 |
| | 76 | 78 | 24 | 30 | | 30 |
| | | | 254 | 1 | | 7 |
| | | | | 167 | | 152 |

10373

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

Name of Deceased Member Victor Albert WARD Rank or Rating Sig O.No. V5911

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

D.A. NIL

A.P. 10.00

D.A. -

A.P. -

Mrs. Elsie WARD - Mother
62 Columbia Ave.,
Westmount, P.Q.

2. Pension awarded or being awarded to:

no record

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

Mr. Albert WARD - Father
62 Columbia Ave.
Westmount, P.Q.

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:

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

In the proportion of: /

to:

In the proportion of: /

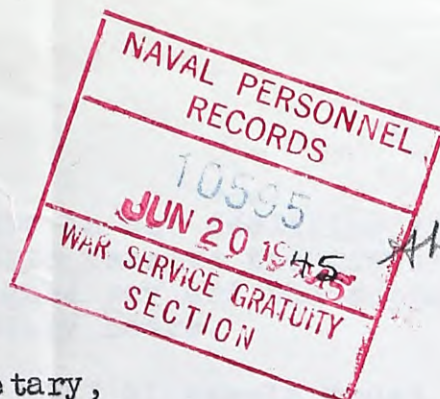
() To be referred to the Dependents' Allowance Board for decision as to dependency within the spirit and intent of the War Service Grants Act, 1944, observing this application(s) is classed under:

Group "B" (ii)

Group "C" of the above mentioned Directive.

Date 30 June 1945

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



62 Columbia Avenue,
Westmount,
MONTREAL 6, P.Q.

June 15, 1945.

The Secretary,
Naval Board,
Department of National Defence,
Naval Service,
Ottawa, Ont.

921065

Attention Mr. H.B. Money

Dear Sir:-

Re: VICTOR ALBERT WARD, SIGNALMAN
Your Ref. No. V.5911 Pers.(N)(N-15)

I have your letter of June 7, with regard to the possible payment of a War Service Gratuity, in view of the death of my son Victor Albert Ward in the service of his country.

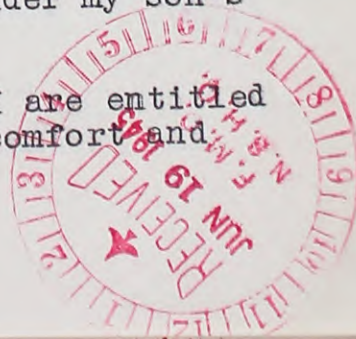
My son's assigned pay was at first assigned to his mother and later to me, roughly between August 1940 and the time of his death.

My son was unmarried and lived at home with my wife and myself. Before he joined up he had been in business, and for several years he regularly and necessarily contributed to the household expenses out of his pay, to assist us. The assignment of his naval pay was only a continuance of the help and support which he had generously contributed while at work before joining up.

My wife and I are getting on in years, we have raised and educated four children, I have never had a large income, and in about four years will be pensioned on a small pension. The support given us by our deceased son whether before or since the war, but particularly during the war, owing to the high cost of living, has been not only helpful and gratefully received, but actually a relief.

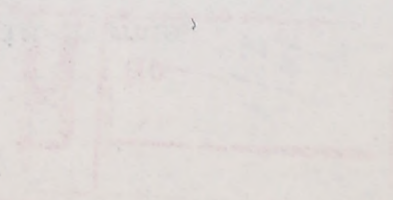
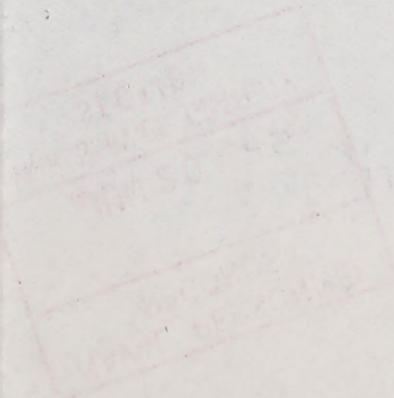
My son left a Will, the administration of which and the distribution of the estate thereunder was retained by the Director of Estates, as you will see from a letter to my friend, Mr. Walter S. Johnson, K.C., Montreal, dated December 21, 1944, on the files of the Director of Estates. Through the assistance of the Director of Estates, a small amount in bonds, any balance of pay and a small credit balance in the bank were made available to my wife and myself, as the universal legatees under my son's Will.

I presume, therefore, that my wife and I are entitled to apply for the gratuity, which will be of great comfort and





Wend



assistance in our declining years, and that we are the persons entitled to receive the gratuity as being those who received the assigned pay and the support of our son, and as being his testamentary heirs.

I sincerely trust that you will recognize our claim.

With kindest regards, I am,

Yours very truly,

Alber David

NS. V-5911
(Pers.(N))(P-18)

3rd July, 1945.

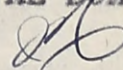
Dear Sir:

Further to your application for War Service Gratuity in respect of the service of your late son, Victor Albert WARD, I am directed to inform you that payment will be made to the Director of Estates for distribution as part of the Service Estate of your late son.

To allow for necessary legal procedure a short delay may be expected but you may rest assured that the Estates Branch will make every effort to hasten final disposal of the amount.

Yours truly,

SECRETARY, NAVAL BOARD.



Mr. Albert WARD,
62 Columbia Avenue,
Westmount, P.Q.

DEPARTMENT OF NATIONAL DEFENCE

MRR NAVY ARMY AIR FORCE

STATEMENT OF WAR SERVICE GRATUITY

4
NAVY

| | | | | | | |
|---|---|--|--|------|----------------------|-----------|
| DECEASED MEMBER'S NAME | Victor Albert (CHRISTIAN NAMES) | | WARD (SURNAME) | (25) | REGISTER NO. | 10595 |
| PAYEE | Director of Estates, 308 Sparks St., Ottawa, Ont. | | for Service Estate of Victor Albert Ward, NS. V-5911 | | FILE NO. | NS. V5911 |
| ADDRESS | | | | | DATE | 6 July/45 |
| | | | | | SERVICE NO. | V5911 |
| | | | | | FINAL RANK OR RATING | Sig. |
| DATE OF TERMINATION OF OVERSEAS SERVICE | 7 May/44 | | DATE OF DISCHARGE | | 7 May/44 | |
| A. TOTAL QUALIFYING SERVICE | | | | | | \$ 337.50 |
| NO. OF DAYS 1371 EQUAL TO 45 COMPLETE PERIODS AT \$7.50 | | | | | | |
| B. QUALIFYING OVERSEAS SERVICE | | | | | | |
| NO. OF DAYS 1143 LESS 21 INELIGIBLE DAYS, EQUAL TO 1122 DAYS @ 25C. PER DAY | | | | | | \$ 280.50 |
| C. SUPPLEMENT FOR OVERSEAS SERVICE | | | | | | |
| DAILY RATES AT DISCHARGE | | | | | | |
| PAY \$2.00 | | | | | | |
| SUBSISTENCE OR LODGING AND PROVISION ALLOWANCE \$1.45 | | | | | | |
| ADDITIONAL PAY H.L.M. \$.13 | | | | | | |
| T.O.V/S \$.05 | | | | | | |
| G.C.B. \$.05 | | | | | | |
| DEPENDENTS' ALLOWANCE 1/30 OF \$ | | | | | | |
| TOTAL \$3.68 X7 = \$ 25.76 | | | | | | |
| NO. OF DAYS 1143 X\$ 25.76 | | | | | | \$ 160.89 |
| D. WAR SERVICE GRATUITY | | | | | | \$ 778.89 |
| E. DEDUCTIONS OVERPAYMENT OF PAY AND ALLOWANCES \$ | | | | | | |
| DEPENDENTS' ALLOWANCE AND ASSIGNED PAY \$ | | | | | | \$ Nil |
| OTHER DEDUCTIONS \$ | | | | | | |
| F. TOTAL AMOUNT PAYABLE | | | | | | \$ 778.89 |
| G. YOUR PORTION OF GRATUITY IS— | | | | | | |

DEPENDENTS' ALLOWANCE IN ISSUE TO YOU \$ OF \$ = \$ 778.89

TOTAL DEPENDENTS' ALLOWANCE IN ISSUE \$

Voucher
Cheque 1124 13/7/45

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 | CHECKED BY | TREASURY | DATE |
| YN | | | |

SERVICE REPRESENTATIVE
for Dir. Naval Pay Accting.

DISTRIBUTION OF SERVICE ESTATES

Estates Form "P. 4"

NAVY

Name: WARD Surname Victor A. Christian Names No.: V-5911

SIG. Rank HMCS VALLEYFIELD Unit Date of Death 7-5-45

AMOUNT

W.S.G. 778.89
L.P.C. 42.95

Date: 10-8-45

Other Credits 172.80

Total 994.64

Prev. dist. 215.75
This dist. 778.89

| SHARE | RELATIONSHIP | NAME AND ADDRESS | AMOUNT |
|---------------|--------------|---|--------|
| $\frac{1}{2}$ | Father | Albert Ward, 2 Columbia Ave., WESTMOUNT, Que. | 389.45 |
| $\frac{1}{2}$ | Mother | Mrs. Elsie Ward, (As above) | 389.44 |
| | | (Co- beneficiaries per will) | |
| | | P4. TO TREAS. | |
| | | 14/8/45 | |
| | | WSG | |

| AUTHORITY | | | | | |
|------------------|------|-----|----------------------------|------|----------|
| H.Q. F.E. No. | VOTE | PRI | H.Q. SUB. | OBJ. | AMOUNT |
| 9999 | 831 | 00 | 50 | 000 | \$778.89 |
| CLASSIFIED BY | | | EXAMINED BY | | |
| | | | For Chief Treasury Officer | | |

DISTRIBUTION APPROVED AND AUTHORIZED

(L. M. FIRTH) Colonel
Director of Estates

AUDITED FOR PAYMENT

For Chief Treasury Officer

J 5911

IN THE NAME OF GOD, AMEN

I, **ALBERT VICTOR WARD, SIGNALMAN** of His
Majesty's ~~SHIP~~ **CANADIAN SHIP "LETHBRIDGE"**
(~~now a Patient~~ ~~in~~),

*If in Hospital or
in Hospital Ship.

Insert the degree
of relationship (if of
any) and place of resi-
dence of the Legatee
or Legatees.

See instructions on
the back hereof.

being sound of mind, do hereby make this my last Will and Testament: I
give and bequeath unto my *Father and Mother (Albert and
Elsie Ward), residing at present (February 28, 1942)
at 62 COLUMBIA AVENUE, CITY OF WESTMOUNT,
PROVINCE OF QUEBEC, CANADA,*

38400

all such Wages, Prize Money, Allowances, and other Sum or Sums of Money,
as now are, or hereafter may be due to me for my service on board the said
Ship, or any other Ship or Vessel, of the Royal Navy, together with all other
my Estate and Effects whatsoever and wheresoever.

Insert the degree
of relationship (if of
any) and place of resi-
dence of the Executor
or Executors.

And I do hereby appoint *Mr. ALBERT WARD (FATHER), and/or
Mr. CLIFFORD WARD (BROTHER), residing at 62
Columbia Avenue, Westmount, Quebec, Canada.*

Executors of this my last Will and Testament; and hereby revoking all former
Wills by me made, I declare this to be my last Will and Testament.

In Witness whereof I have at _____ hereunto set my hand,
this *TWENTY-EIGHTH* day of *FEBRUARY*, in the Year of Our Lord
One Thousand Nine Hundred *FOURTY-TWO.*

Albert Victor Ward

Signed by the said Testator, as his last Will
and Testament, in the presence of us present
at the same time, who in his presence at his
request and in the presence of each other
have subscribed our names as Witnesses.

Witnesses

*Bunce S Wright Sub Lt R.N.V.R.
D. Robertson E.A.A. R.C.N.V.R.*

NOTE.—As Wills of Petty Officers, Seamen, and Marines must be executed with the formalities required by the
Law of England in the case of other persons, every such Will must be executed in the presence of, and be
attested by, *two disinterested* Witnesses.

Where the Will is made on board one of His Majesty's Ships, one of the two requisite attesting Witnesses shall
be a Commissioned Officer, Chaplain, or Warrant or Subordinate Officer belonging to His Majesty's Naval or
Marine or Military Force.

Where the Will is made elsewhere than on Board one of His Majesty's Ships, one of the two requisite attesting
Witnesses shall be a Commissioned Officer, or Chaplain, or Warrant or Subordinate Officer, or the Governor,
Agent, Physician, Surgeon, Assistant-Surgeon, or Chaplain of a Naval Hospital at home or abroad, or a Justice
of the Peace, or the Incumbent, Curate, or Minister of a Church or Place of Worship in the Parish where the
Will is executed, or a British Consular Officer, or an Officer of Customs, or a Notary Public, or a Solicitor, or
in Scotland a Law Agent.

A Will made by any person while serving as a Seaman or Marine will not be valid for any purpose if it is written
or contained on or in the same Paper, Parchment, or Instrument with a Power of Attorney.

The Certificate on the back hereof, is to be signed by the person by whom the Will is prepared.

Noted in Service
Records by *12.10.42*

Instructions for filling up the Form

If a special legacy is to be given, the name, residence (and relationship if any) of the person interested is to be inserted in the space after the words "I give and bequeath," or if more than one person, the respective names, &c., also the particulars of the property bequeathed.

Then the words "And I give and bequeath unto" should be inserted together with the names, &c., of the person or persons to whom the residue of the Testator's property is to be given, and the words printed in italics commencing "all such wages," should be struck out.

If, however, the *whole* of the Testator's property is to be given to one person, or between several, all that is necessary is to insert in the space, the names, &c., of the person or persons to be benefited.

CERTIFICATE

I hereby certify that the Will on the other side hereof was previously to its execution read over to the Testator who appeared perfectly to understand the same.

.....*C. M. Ward*.....

{ Signature of the person
by whom the Will was prepared.

ESTATES BRANCH

HQ.NS. V-5911 FD.596

April 30, 1945.

Mr. and Mrs. Albert Ward,
62 Columbia Avenue,
Westmount, P.Q.

WARD, Victor A., Sgmn. (Deceased)
No. V.5911, R.C.N.V.R.

Dear Mr. and Mrs. Ward:

Distribution can now be made of the amount of money
here at credit of your late son.

The total amount to the credit of your son's Service
estate is made up as follows:

| | |
|--|----------------|
| Balance of pay and allowances | \$ 42.95 |
| Bank of Montreal, Westmount | 8.13 |
| Redemption of War Savings Certificates | <u>.164.67</u> |
| Total | \$215.75 |

This amount is payable to you in equal one-half shares
as co-beneficiaries named in your son's Will on file in this Branch.

Treasury has been requested to send you direct cheques
for \$107.88 and \$107.87, representing your respective shares of the
estate, and on receipt of same will you kindly sign the enclosed
forms of acknowledgment and return them to the Director of Estates,
308 Sparks Street, Ottawa.

Yours faithfully,

L.M. Firth
(L.M. Firth) Colonel,
Director of Estates.

HRW/JN
Encls.

Rev (v) 12/9/

142609

#51

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 WARD, Victor A. Rating..... Sig.....
Official No V. 5911 H.M.C.S. AVALON " VALLEYFIELD List 12²/67
Who* DISCHARGED DEAD on the 7 May 1944

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. 25182 Adm. Naval Estates
(Present War).....

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) TEN DOLLARS
FOUR DOLLARS charged to 31 May
1944

Name of ship from which transferred HMCS "VALLEYFIELD"

Total CREDITOR

\$ cts.

N I L

70 95

70 95

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 AVALON for
"VALLEYFIELD" amounting to a net balance†..... CREDITOR
of -- SEVENTY -- dollars. -- NINETY-FIVE -- cents.

Dated on board H.M.C.S. AVALON at S.T. JOHN'S
NFLD. this FIFTH day of JUNE 1944

Approved

PAY LIEUT. CDR., R.C.N.V.R.

Accountant Officer

{ Initials of the Assistant
Accountant Officer

A/CAPTAIN. RCN.

Commanding Officer.

For Use at Headquarters.

\$..... cts..... credited on Inspector's certificate

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

Signature.....

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

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

5M-2-42 (3801)
H.Q. N.S. 815-9-45

AUTHORITY: AVALON'S CNS 249A #A13927 dated 19 May, 1944

LEDGER: Set

AUDIT: Set

ACCOUNT OF SALE OF THE EFFECTS

SOLD before the Mast, the..... day of..... 18..

[illegible]

of the Effects which were
 the other side thereof *

{ Lieutenant or Officer who
attended at the sale
of the Effects.

The whole of the Effects which were left by the person named on the other side, are enumerated in the above Account and on the other side thereof.*

.....Signature

.....Signature

.....Rank

Rank

When the effects are those of an Officer, this statement is to be signed by two of his messmates; when they are those of a Petty Officer, Seaman or Boy, it is to be signed by the Executive Officer and by the Master at Arms or a Ship's Corporal.

STATEMENT OF ACCOUNT

True extract from the ledger of H.M.C.S. "AVALON "VALLEYFIELD." ending 30 June 19 44

List. 12² No. 67 (Name) WARD, Victor A. Rank Rating Sig. No. V.5911

When entered F.B. Date of appearance F.B. Whither discharged DEAD

| | | |
|---------------------------------|----|----|
| | \$ | c. |
| CREDIT from former account..... | 37 | 19 |

| | | | | | |
|-------------|------|------------|-----------|----------------------------|--------|
| Pay as..... | Sig. | from 1 Apr | to 31 May | (61 days at \$ 2.00 a day) | 122 00 |
|-------------|------|------------|-----------|----------------------------|--------|

" T.O. V/S " 1 Apr " 31 May (61 " .05 ") 3 05

" 1 GCB " 1 Apr " 31 May (61 " .05") 3 05

“ ” “ ” (.....) “ ” 50

“ ” (.....) ”

| Adjustment March, 1944. | | | 33 |
|---------------------------|---------------|---|----|
| Kit Upkeep Allowance..... | 1 Apr - 7 May | 4 | 47 |

OTHER CREDITS:

| | | |
|--------------------|-----|----|
| Total credits..... | 170 | 09 |
|--------------------|-----|----|

| | |
|-------------------------------|-------|
| DEBT from former account..... | N I L |
|-------------------------------|-------|

PAYMENTS:—

| 1st | 2nd | 3rd | 4th | 5th |
|-------|-------|-------|-------|-------|
| \$ c. | \$ c. | \$ c. | \$ c. | \$ c. |
| 37.00 | 8.94 | | | |
| | | | | |
| | | | | |
| | | | | |

| | | | | | | | | |
|----------------|-------|------|--|--|--|------------|----|----|
| 1st month..... | 37.00 | 8.94 | | | | Total..... | 45 | 94 |
|----------------|-------|------|--|--|--|------------|----|----|

| | | | | | | | | |
|----------------|-------|-------|-------|-------|-------|------------|-------|-------|
| 2nd month..... | | | | | | Total..... | | |
|----------------|-------|-------|-------|-------|-------|------------|-------|-------|

| | | | | | | | | |
|----------------|--|--|--|--|--|-------|--|--|
| | | | | | | Total | | |
| 3rd month..... | | | | | | | | |

Allotment.....~~25.00~~ 25.20, 10.00, 4.00 chged Apl; 10.00, 4.00 chged 53 20.

Pension deduction (Officers) charged to.....of.....May

| | | |
|-------------------------|--|--|
| Hospital stoppages..... | | |
|-------------------------|--|--|

| | | |
|-------------|--|--|
| Mulcts..... | | |
|-------------|--|--|

| | | |
|---|----|----|
| OTHER CHARGES O.R. 25182 payable Adm. Naval Estates (Present war) | 70 | 95 |
|---|----|----|

| | | |
|--------------|-----|----|
| Total debits | 170 | 09 |
|--------------|-----|----|

LEDGER: *Yest*

Balance Cr. or Dr.

AUDIT: *4*

(Balance Dr. to be shown in red)

Number of days actually victualled during period mentioned above 37

NOT
VICTUALLED

| LENT, SICK OR LEAVE | INCLUSIVE DATE | | No. OF DAYS | SHIP, HOSPITAL, etc., IN WHICH BORNE |
|------------------------|----------------|----|----------------|---|
| | FROM | TO | | |
| | | | | |
| | | | | |
| | | | | |

Date..... 5 June 19 44

PAY LIEUT. CDR., R.C.N.V.R.
ACCOUNTANT OFFICER

Mr. Albert Ward,
62 Columbia Ave.,
Montreal, Que.

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. V-5911 FD. 596

DEPARTMENT OF NATIONAL DEFENCE
ESTATES BRANCH
OTTAWA, ONT.

September 11 1944

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

WARD, Victor Albert, Signalman, Official

Number V-5911, 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.



GC/

H. J. Wade
Commanding Officer
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:

| Degrees 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..... | Albert Ward. | 55 | 62 Columbia Ave., Westmount, P.Q. |
| 4 | Mother of the Deceased..... | Elsie Ward | 57 | 62 Columbia Ave., Westmount, P.Q. |
| 5 | Brothers of the Deceased | Full Blood | | Home address as above. |
| | | Yes Clifford Ward | 32 | Service Address: Cpl. C. Ward, R-224318 R.C.A.F. Y Depot, Lachine, P.Q. |
| 6 | 2 Sisters of the Deceased | Full Blood | | |
| | | Yes Mrs. D. Fisher Mrs. N. Dixon | 31 28 | 62 Columbia Ave., Westmount, P.Q. 171 - 4th Ave., Ville St. Pierre, P.Q. |
| 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. | Half Blood | | |
| | | | | |
| | | 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. | Albert Victor Ward. |
| 9 | Date of his birth. | June 13th, 1918. |
| 10 | Place and date of his marriage. | |
| 11 | Place and date of his parents' marriage. | Montreal, P.Q. August 15th, 1911. |

PARTICULARS OF DOMICILE

| | | |
|----|--|--|
| 12 | Place where deceased was born. | Montreal, Quebec. |
| 13 | State, in order, the Province, State and/or County in which he resided before enlistment and the period of time in each. | (a) Montreal, 22 Years. (b) (c) (d) |
| 14 | Nature of employment before enlistment. | Clerk, City of Westmount. |
| 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. | Westmount, P.Q. |

PARTICULARS OF ESTATE

| | | |
|----|--|--|
| 17 | Did he leave a Will? If in your custody, please forward. | Yes |
| 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? | Yes. Bank of Montreal. Green Ave. Branch, Westmount, P.Q. \$3.83. |
| 20 | Amount of War Savings Certificates held by deceased. Indicate where located. | \$185.00. Bank of Montreal, Green Ave. Branch, Westmount. |
| 21 | Amount of Victory Loan Bonds held by deceased. Indicate whether registered or bearer and where located. | One \$100.00 Bond Bearer. At the One \$150.00 Bond Bearer. above Bank |
| 22 | If deceased had life insurance, name companies and amount payable under each policy and the person named as beneficiary therein. | Metropolitan Life Insurance Co. \$1,000.00 Albert Ward. Father. |
| 23 | Describe other assets, if any, and estimated value thereof. Use space on page 4 if necessary. | None. |

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. | |
| 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. | No. |
| (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.) | | |

(PLEASE TURN OVER)

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

* Father 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.

Albert Ward {Signature of Informant
62 Columbia Ave, Westmount Que. Address

CERTIFICATE

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

See above. { Name of informant } is the Father of the Deceased above described. The above Declaration was made by the Informant and signed in my presence.

Dated at Montreal this 27th day of September 19 44

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

W. H. Munroe

Qualification A/KICOT. R.C.N.V.R.

Address H.M.C.S. "DONACONA" 1475 Drummond St. Montreal P.Q.

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

DOMINION BUREAU OF STATISTICS—QUEBEC DEATH TRANSCRIPT

Do not
write in
this space

| | | | | | | | | | |
|---|--|--------------------------------|--|---|--|---|--|--|--|
| 1. PLACE OF DEATH | | Municipal county | | AT SEA | | Official name of civil municipality or township | | Place an X over the word which applies to this municipality or this territory City Town Village Parish Township | |
| 2. LENGTH OF STAY | | (a) In hospital or institution | | Years Months Days | | (b) In municipality where death occurred | | Years Months Days | |
| 3. NAME OF DECEASED | | Surname | | WARD | | Given names | | Victor Albert | |
| 4. RESIDENCE | | Street | | 350 Grosvenor Avenue, | | Official name of civil municipality or township | | Westmount, Quebec. | |
| 5. SEX | | Male | | 6. NATIONALITY (Citizenship) | | Canadian | | 7. RACIAL ORIGIN | |
| 8. Single, Married, Widowed or Divorced (Write the word) | | Single | | 9. If married give name of wife or husband of deceased | | | | | |
| 10. BIRTHPLACE (Province or Country) | | Montreal, Quebec. | | 11. DATE OF BIRTH | | June 13th 1918 | | | |
| 12. AGE OF DECEASED | | Years Months Days | | 25 11 | | If less than one day old | | hrs. or min. | |
| 13. Trade, profession or kind of work, as spinner, teamster, office clerk, etc. | | Stock Clerk, | | 14. Kind of industry or business, as cotton-mill, lumbering, bank, etc. | | City Hall, Westmount, Que. | | 15. Date deceased last worked at this occupation | |
| 16. Total years spent in this occupation | | | | 17. NAME | | 18. BIRTHPLACE (Province or Country) | | | |
| 19. Place of burial, cremation or removal | | Body not recovered | | 20. Date of burial | | 19 | | | |
| 21. PLACE OF REGISTRATION OF THIS BURIAL | | (a) Name of parish or church | | (b) Civil municipality of | | (c) Municipal county | | (d) Date | |
| | | | | | | | | (Month) (Day) (Year) | |

CONFIDENTIAL MEDICAL CERTIFICATE OF DEATH

22. Date of death: May 7th 1944
(Month) (Day) (Year)

23. I HEREBY CERTIFY that I attended deceased from 19 to 19 and last saw him alive on 19

24. CAUSE OF DEATH

I Immediate cause
Give disease, injury or complication which caused death, not the mode of dying, such as heart failure, asphyxia, asthenia, etc.
(a) "MISSING" presumed dead when "U.S.C.S. VALLEYFIELD"

Morbid conditions, if any, giving rise to immediate cause (stated in order proceeding backwards from immediate cause).
(b) was torpedoed and sunk by
(c) enemy action in the Atlantic.

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

If a communicable disease is mentioned on this certificate, give (a) Date of appearance 19 (b) Duration of disease days

25. If a woman, was there a puerperal condition? 19

26. Was there a surgical operation? Date of 19

State findings. Was there an autopsy? 19

27. If death was due to external causes (violence) fill in also the following:—
Accident, suicide or homicide Date 19 (State which)
Manner of injury (How sustained)
Nature of injury
Specify whether injury occurred in industry, in home, or in public place

Signed M.D.
Address Date 19

28. Signature of person who fills in the form (curate, coroner, hospital authority, etc.)
H.S. Money

29. Name of clergyman in charge of Register of Civil Status in which registration of this burial was made.

This signature authorizes the collector to accept this form as authentic. (Voir l'autre côté pour le français)
Payor: C. H. Money, Officer 1/c Naval Personnel Records, Naval Service Headquarters, Ottawa, Ontario.

No. V.347.
ORIGINAL

DEPT
NATIONAL DEFENCE

MAR 14

N.S. 113 W 586
CANADA

H.Q. File No. 8

Sew.

DECLARATION OF ALLOTMENT

P 29305

| List and Number in Ledger | ALLOTOR | Rank or Rating | Official No. | Daily Rate of Pay |
|---|--|----------------|------------------------|-------------------|
| "VENTURE" Division II for "NOOTKA" 12-2/136 | Surname <u>WARD,</u> Christian Names <u>Albert Victor</u> | Ord Sig. | V-5991 <u>V5911</u> | <u>1.25</u> |

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 |
|--|--------------|-----------------|--|--|
| RECEIVER-GENERAL OF CANADA Surname <u>(For War Savings Certificates)</u> Christian Names | | OTTAWA, Ontario | 4.00 | April, March 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):— |
|------|------------------|---------|--|
| | <u>nil</u> | | |

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.....

Rank or Rating Ord Sig.

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:—

THE NAVAL SECRETARY,

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

Pay Lieutenant Accountant Officer
RCNVR.

H.M.C.S. "VENTURE" DIV. II

Forwarded.....

S. 63

40M-4-40 (4787)
N.S. 815-9-43

Assigned Pay to Wives
Assigned Pay to other Dependents
Marriage Allowance
Dependents Allowance
Other Allotments

Object No. 111 \$.....
113.....
116.....
119.....
122.....
Total \$ 4.00

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..... | | |

| |
|------------------------------|
| MAIN FILE |
| CHARGED TO <i>Tray</i> |
| SINCE <i>10-3-41</i> |
| REC'D. CENTRAL REGISTRY |
| <i>11</i> MAR <i>14 1941</i> |
| REFERRED TO |



CANADA

N. V. 5
15M-2-40 (4047)
N.S. 815-11-5

ATTESTATION FORM

FOR MEN OF THE ROYAL CANADIAN NAVAL VOLUNTEER RESERVE

SURNAME Ward. OFFICIAL NO. V

CHRISTIAN NAMES Victor Albert MARRIED, SINGLE OR WIDOWER Single

| PERMANENT ADDRESS | RELIGION |
|--|--------------------|
| <u>350 Grosvenor Ave., Westmount, Que.</u> | <u>Protestant.</u> |

| DATE OF BIRTH | PLACE OF BIRTH | NAME AND ADDRESS OF NEXT OF KIN |
|-------------------------|--|--|
| <u>June 13th, 1918.</u> | Town <u>Montreal,</u> County <u>Quebec.</u> Province | Mother: <u>Mrs. A. Ward.,</u> <u>Same address as above.</u> |

PERSONAL DESCRIPTION ON ENROLMENT

| HEIGHT | CHEST MEASUREMENT | HAIR | EYES | COM. PLEXION | WOUNDS, SCARS, MARKS |
|-----------------|--------------------|---------------|-------------|--------------|-------------------------------------|
| Feet <u>5</u> | Inflated <u>37</u> | | | | |
| Inches <u>8</u> | Deflated <u>34</u> | <u>Blonde</u> | <u>Blue</u> | <u>Fair</u> | <u>small scar to left of mouth.</u> |
| | Mean <u>35 1/2</u> | | | | |

| DATE OF ENROLMENT | RATING ENROLLING FOR | TRADE OR CALLING AND IN WHOSE EMPLOY |
|-------------------------|----------------------|--|
| <u>July 19th, 1940.</u> | <u>Ord. Sea.</u> | <u>Stock Clerk,</u> <u>City Hall, Westmount, Que.</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 XX for the period shown, and attach my XX record of service, in corroboration of this statement.

* Cross out Clause not applicable.

| SERVED IN | RANK | FROM | TO |
|-----------|------|------|----|
| | | | |

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

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

(5). On being enrolled as a member of the Montreal Division of the Royal Canadian Naval Volunteer Reserve, I undertake and bind myself:—

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

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

(c) To keep in good repair and condition the articles of uniform and any articles of outfit which may be issued to me and to return them to the nearest Divisional Commanding Officer or to Training 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.

Dated this Nineteenth day of July, 1940.

Signature of applicant.....

(C) CERTIFICATE OF DIVISIONAL COMMANDING OFFICER

I hereby certify that all the foregoing statements were made by the volunteer above named, in my presence, and that he has made and signed the above declaration in my presence on this 19th day of July, 1940.

Signature of Commanding Officer
Lieut. R.C.N.V.R.

(D) OATH OF ALLEGIANCE

I, Victor Albert Ward 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.....

Witness R. G. Matich

Date July 19th, 1940. Rank Sas Lieut. R.C.N.V.R.

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

(E) CERTIFICATE OF DIVISIONAL COMMANDING OFFICER

Victor Albert Ward 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 Montreal Division of the R.C.N.V.R.

Signature of Commanding Officer
Lieut. RCNVR for Commanding Officer.

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.



DUPLICATE

Can. B. 207

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

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 A. V. Ward
candidate for entry as 1st Lt. Draft
and I believe him to be * in all respects fit for His Majesty's Service. He has signed
the Certificate given below in my presence. unfit for His Majesty's Service for the reason stated below.

†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 revaccinated for Small Pox (Date) | Lungs, Heart, etc. | Abdomen, Hernia, etc. | Limbs and Joints | Skin | Ears and Hearing | Testes, Varicocele, etc. | Mouth, Teeth (No. deficient and No. defective, if any), Nose, Tonsils, etc. | Anus, Hemorrhoids, etc. |
|----------------------|------------------------|-----------------------|---------------------|--|---|---|--------------------|-----------------------|------------------|------|------------------|--------------------------|---|-------------------------|
| (a) | (b) | (c) | (d) | (e) | (f) | (g) | (h) | (i) | (k) | (l) | (m) | (n) | (o) | (p) |
| 32 1/2 | 134 lbs. | 5' 8" ft. ins. | Good | inches (a) maximum 37 (b) minimum 34 (c) mean 35 1/2 | right eye 6/6 left eye 6/6 colour vision N | 1 S.L. R. 45724 app. Negative | X-Ray | Normal | Normal | " | " | " | 2 Deficient 0 Defective | Normal |

*Insert either:—NT (not taken) App. (approved) Pos. (positive) or Doubt. (doubtful)

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

CERTIFICATE TO BE SIGNED BY CANDIDATE

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

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

‡Strike out if inapplicable.

Signature of Candidate

When a Candidate is subject to a defect or disability, the following information is to be inserted:

This Candidate is the subject of.....

*{which renders him medically unfit for service,
not considered of sufficient importance to cause his rejection, he being desirable in other respects.

*Delete one.

AUG 6 1940

SURGEON LIEUT.

Dated at Montreal the 1 of August 1940

R. 6/6

L. 6/6

C.V.N. (2sk)

IF REJECTED
insert here
UNFIT
in block letters

Examining Medical Officer

(Rank) Surg. Lt. R. 622 R

Rash on lower part of abdomen + groins, under both arms and axillae.
To sick bay for treatment del. d.

NAME IN FULL W H R D Nicholas Albert RANK/RATING Chief OFF NO. V-391 ADDRESS

[illegible]

CERTIFICATE of the SERVICE of

Ward, Victor Albert

in the Royal Canadian Naval Volunteer Reserve

| | | |
|-----------------------|---------------------|-------------------------------|
| Training Headquarters | R.C.N.V.R. Division | Official Number <u>V 5911</u> |
| | <u>Montreal</u> | " |
| | | " |

Date of Birth..... June 13th, 1918

Place of Birth..... Montreal, P. Q.

Place of Residence..... 350 Grosvenor Ave., Westmount, P. Q.

Trade brought up to..... Stock Clerk

Religion..... Protestant

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

Mother: Mrs. EASIE
62 COLUMBIA AVE.
Westmount, Que.

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 | |
| <u>19/7/40</u> | <u>19/7/40</u> | <u>Duration 3 years</u> | <u>Ord. Sea.</u> | <u>26 Feb 44</u> | <u>26 Feb 44</u> | <u>Canadian Volunteer Service Medal & Clasp Prov. award.</u> |
| | | | | | | <u>1939-43 Star. Prov. award.</u> |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |

| PERSONAL DESCRIPTION | | | | | | | | |
|--|--------|--------|-----------------|--------|--------|------|------------|--------------------------------|
| — | Height | | Chest (mean) | Weight | Hair | Eyes | Complexion | MARKS, WOUNDS, SCARS |
| | Feet | Inches | | | | | | |
| On Entry..... | 5 | 8 | 35½ | | Blonde | Blue | Fair | mouth Small scar to left of |
| 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. | | | | |
| 1940 | Stadacona | - | - | Ord Sm | 6 Aug '40 | 12 Sep '40 | |
| " | " | - | - | Offic | 13 Sep '40 | 10 Nov '40 | |
| 1940 | Stadacona At Clair | - | - | O/Ng | 11 Nov '40 | 19 Nov '41 | |
| | Stadacona | - | - | " | 20 Nov '41 | 22 Nov '40 | |
| | Venture (Caribou) | - | - | " | 21 Nov '40 | 4 Feb '41 | |
| | Stadacona | - | - | " | 5 Feb '41 | 13 Feb '41 | |
| | Venture (hooka) | - | - | " | 14 Feb '41 | 27 May '41 | |
| | Stadacona | - | - | " | 2 May '41 | 4 May '41 | |
| | " | - | - | Sig | 5 May '41 | 10 June '41 | |
| | Lethbridge | - | - | " | 11 June '41 | 4 July '41 | |
| | Venture (Lethbridge) | - | - | " | 5 July '41 | 27 July '41 | |
| | Sambo (- " -) | - | - | " | 28 July '41 | 13 Sep '41 | |
| | Protecton (Lethbridge) | - | - | " | 4 Sep '41 | 11 Oct '41 | |
| | Avalon (Lethbridge) | - | - | " | 12 Oct '41 | 5 Nov '42 | |
| | Avalon | - | - | " | 6 Nov '42 | 17 Apr '42 | |
| | Avalon (Lethbridge) | - | - | " | 18 Apr '42 | 30 June '42 | |
| | Stadacona (Lethbridge) | - | - | " | 1 July '42 | 1 Oct '42 | |
| | St. Xpcenthe | - | - | " | 2 Oct '42 | 18 Nov | |
| | Laden | - | - | " | 19 Nov '42 | 7 Dec '42 | |
| | Laden (William Head) | - | - | " | 8 Dec '42 | 26 May '43 | |
| | Gwenchy | - | - | " | 27 May '43 | 27 May '43 | |
| | Stadacona | - | - | " | 28 May '43 | 8 June '43 | |
| | Stadacona (Transcona) | - | - | " | 9 June '43 | 20 July '43 | |

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

[illegible]

NAVAL TRAINING and ACTIVE SERVICE

| Year | SHIP OR ESTABLISHMENT | LEDGER | | RATING | FROM | TO | CAUSE OF DISCHARGE |
|------|-------------------------|--------|-----|--------|------------|-----------|--------------------|
| | | List | No. | | | | |
| | Stadacona | | | Sig. | 21 July 43 | 25 Aug 43 | |
| | St. Hyacinthe | | | — " — | 26 Aug 43 | 15 Nov 43 | |
| | Stadacona | | | — " — | 16 Nov 43 | 25 Nov 43 | |
| | Aschelaga II | | | — " — | 26 Nov 43 | 7 Dec 43 | |
| | Stadacona (Valleyfield) | | | — " — | 8 Dec 43 | 29 Feb 44 | |
| | Arvalon (— " —) | | | — " — | 1 March 44 | 7 May 44 | "D. D." |

[illegible]

[illegible]