HOLLAND
JAMES ROBERT
N2882

DEPARTMENT OF NATIONAL DEFENCE
(Naval Service)

C.N.S. 2417
3M—2-36
N.S. 815-9-2417

4

APPLICATION FOR ENTRY IN THE ROYAL CANADIAN NAVY

DEPT OF NATIONAL DEFENCE
DEC 12 1936
M 17183

62-671-4

Declaration signed Mother 15/12

ALB

.... (Place)

The Naval Secretary,
Department of National Defence,
OTTAWA.

.... (Date)

SIR:—

I hereby make formal application for entry in the Royal Canadian Navy, under a seven years' continuous service engagement as a Boy Seaman. (Insert rating chosen)

I certify that the following particulars are in my own handwriting and are true in every respect:

1. Name (to be given in full in Block Letters) JAMES. ROBERT. HOLLAND.
2. Date of Birth (Birth Certificate or sworn declaration by parent or guardian *must* be attached) APRIL, 25, 1920
3. Place of Birth. Town HALIFAX., Province NOVA. SCOTIA.
4. Permanent Place of Residence. No. 203 Street LOWER. WATER.
   Town HALIFAX, Province NOVA. SCOTIA.
5. Are you a British Subject? Yes.
6. How long have you resided in Canada? 16 years, 8 months.
7. What is your Mother Tongue? English.
8. What other language do you speak? None.
9. Are you of the White Race? Yes.
10. Are you Single, Married or a Widower? single
11. How far advanced educationally are you? (Certificates of School Authorities *must* be attached) Passed Junior High School and entered High School.
12. What practical experience have you had? (Details and certificates from employers, trade credentials, etc., *must* be attached to substantiate employment reported.)
    clerk in a grocery store.
13. Do you belong to any Naval, Military, Air or Police Force? no.
14. If so, give details.
15. Have you ever served in such forces? yes
16. If so, give dates and details 66th Battalion Princess Louise Fusiliers
17. Have you ever been discharged from His Majesty's Forces as medically unfit? no.
18. Have you ever offered to serve in His Majesty's Forces and been rejected? no
    Why?
19. Have you ever been convicted of a criminal offence? no. (Enclose two character references, one of which must confirm your answer to Question 19)
20. What is your weight? 120 lbs Height 5 ft. 7 in Chest Measurement (Not inflated) 33 inches
21. Have you ever had fits? no.
22. Do you suffer from any deformity? no.
23. Have you suffered the loss of any fingers, toes, etc? no.
24. Do you suffer from any disease? no.
25. Do you wear glasses? no.
26. Are you subject to *any* disability which might cause your rejection?
    no.
27. Give details.
28. Are you willing to be vaccinated and inoculated as considered necessary by the appropriate authorities?

Earl George — Signature of Witness

James Holland. — Signature of Applicant

CERTIFICATE TO BE SIGNED BY THE PARENT OR GUARDIAN OF CANDIDATES UNDER 21 YEARS OLD

I agree to refund to the Department of National Defence the expenses incurred by that Department for transportation to a Naval Base of the above applicant, should he, on arrival at such Base, fail to enrol for seven years' continuous Naval service for reasons which in the opinion of the Department are within his own control. Signed and Sealed at Halifax, this 9th day of December, 1936, in the presence of

Frank Dodson — Signature of Witness

Wm Holland — Signature of Parent or Guardian

CERTIFICATE TO BE SIGNED BY CANDIDATES OVER 21 YEARS OF AGE

I agree to refund to the Department of National Defence the expenses incurred by that Department for my transportation to a Naval Base, should I, on arrival at such Base, fail to enrol for seven years' continuous Naval service for reasons which in the opinion of the Department are within my own control.

Signed and Sealed at ...., this .... day of ...., 19...... in the presence of ....

Signature of Witness

Signature of Candidate

62-2-44

2

CONSENT PAPER

(This paper is required in all cases where the Candidate is under the age of 18 years, in addition to the Certificate of Birth or Declaration.)

M17484

*Strike out "son" or "ward" as the case may be.

I hereby certify that my ~~son~~,* ~~ward~~ James Robert Holland has my full consent (being himself willing) to enter the Naval Service of Canada for a period of seven years' continuous and general service, from the age of 18, in addition to whatever period may be necessary until he attains that age, agreeably to the King's Regulations.

He has not been in a Reformatory, nor has he been sentenced to imprisonment.

I declare that he has never had fits.

† No alteration or erasure is to be made in the date of birth given.

The date of the boy's birth is† April 25th 1920

His Religious persuasion is Church of England

Witness my hand at Halifax N. S.

30 day of November 1936.

††Strike out "Parent's" or "Guardian's" as the case may be.

†† ~~Guardian's~~ Parent's Signature in full Mr William Holland

‡ Must be signed by the Father, if alive or satisfactory explanation made.

‡ ~~Guardian's~~ Parent's Address 203 Lower Water Street

In the case of a Guardian see other side.

I, the above named James Robert Holland do consent to enter the Naval Service of Canada.

§ The Boy and Parent or Guardian must sign in the presence of the witness to their signatures.

§ Boy's signature in full James Robert Holland

Signed by the said [Here write boy's name] James

And [Here write Parent's or ~~Guardian~~'s name] William Holland

In the presence of { Walter Franklin
Witness to signature of Boy, and Parent or Guardian
203 Lower Water St. Add

[OVER]

C.N.S. 2418
1M—5-35
H.Q. 815-9-2418

CERTIFICATE

§ Strike out "Parent" or "Guardian" as the case may be.

** Strike out "he" or "she" according to sex of Parent or Guardian.

† The assertion of the boy himself should not be taken as sufficient warrant for this statement.

I certify that I am personally acquainted with this Boy's § ~~Guardian~~ Parent, and am † aware** he ~~she~~ has consented to the Boy's entry as above, and I believe the particulars stated herein to be true.

.....Clergyman of the Parish.

or H. M. Dauphinee .....Resident Householder

Grocer .....Occupation

201 Lower Water St Halifax .....Address.

Dec 9th 193 6

Particulars to be stated, if possible, in the case of a Boy whose Father is dead

Date of Father's death.....

Place of death.....

Signed .....Mother.

Particulars to be stated, if possible, in the case of a Boy whose Parents are both dead

Date of Father's death.....

Place of death.....

Date of Mother's death.....

Place of Mother's death.....

Signed .....Guardian.

Entered from Halifax, N.S.

H. M. C. S. "STADACONA". P4186 Official No. if known Space to be left vacant if not known } 2882 62H224

5447

CONTINUOUS SERVICE ENGAGEMENT, OR RE-ENGAGEMENT

To be forwarded to the Naval Secretary, Department of National Defence, with Form S. 59

Christian and Surname in Full	Next of Kin	Present Rating
James Robert HOLLAND.	Father Name William Holland Address 203 Lr. Water St., Halifax, N.S.	Boy Seaman 13

Date of Birth*	Place of Birth†		Name, Rank and Station of Recruiting Officer
25th ~~March~~ April, 1920.	Town	Halifax	Commander W.B. Creery, R.C.N. Commanding Officer HMCS "STADACONA".
	County	Halifax	
	Province	Nova Scotia.	

Personal Description at the Date of this Document

Height	Chest	Hair	Eyes	Complexion	Wounds, Scars or Marks	Religious Denomination	Trade or Occupation
5.6½	32. 29. 31.	Black	Brown	Medium	— Nil —	C of E	Scholar

Commencing date of Engagement or Re-engagement	~~4th March, 1937.~~ 28 April, 1938.	Period of Engagement or Re-engagement	Seven Years.
Date of *actually* volunteering to engage or re-engage	November, 1936.	Date of entering present ship	4th March, 1937.

Particulars of former Continuous Service Engagements, if any; but, if none, and the person engaging has had previous Service, the date of his First Entry should be given. If the person has not previously served, write the words "First Entry" here.

If an Engagement is ante-dated for any period, the man's services for such period should be forwarded in to office, with the Engagement, on Form S.—1243.

FIRST ENTRY.

Declaration of Entry or Re-Entry from Shore for Continuous Service

The following questions are to be put by the Commanding Officer to the person about to engage for Continuous Service, whose answers are to be recorded hereon:—

1. Are the particulars given above of your name and date and place of birth correct? — Yes.
2. Are you a British subject? † — Yes.
3. Nationality of parents—Father Canadian Mother Canadian.
4. Have you ever served in the Navy, Royal Fleet Reserve, Royal Naval Reserve, Army, Army Reserve, Marines, Militia, Volunteers (Naval or Military), Territorial Force, or in His Majesty's Indian or Colonial Military Forces, or in the R.C. Mounted Police? ‡ — Yes. — As Signaller in Princess Louise Fusiliers, Halifax. For about 1 yr.
5. Do you now belong to the Militia, Volunteers (Naval or Military), Territorial Force or any Regiment or Corps in His Majesty's Army, or to any established Naval or Army Reserve Force, or to the R.C. Mounted Police? ‡ — Yes. — As above.
6. Have you ever been rejected as unfit for His Majesty's service, or discharged from it on that account? If so, state reason of rejection or discharge, and date — No. — Noted on Records 15/4/37
7. Have you ever been discharged from the Navy, Marines, Army or R.C. Mounted Police on account of misconduct? — No.
8. Are you willing to be vaccinated or re-vaccinated and inoculated? — Yes.
9. Can you swim? — Yes.

NOTED.

* When evidence of age is obtained on First Entry, it should be attached to this Form.
† Foreigners are not to be entered. On the entry of a person born out of the British Empire, it should be ascertained that he is (and in the case of a boy, that his father is) a British Subject, and evidence of the fact should be attached to the "Entry Papers."
‡ Particulars of service in the Army, Army Reserve, Naval Reserve, Marines, Militia, or H. M. Indian or Colonial Military Forces, or in the Merchant Service should be forwarded in to office with this Engagement. If a member of the Royal Fleet Reserve, the man's Registrar is to be immediately informed of his entry (Royal Fleet Reserve Instructions). If an R.N.R. man, state number of R.V. 2.

(OVER)

C.N.S. 55

2M—3-32
N.S. 815—9-55

I—Declaration and Certificate for Men newly entered and Men who have been out of the Service since the expiration of their previous C. S. Engagement

I,....., do solemnly declare that to the best of my knowledge and belief the answers to the questions overleaf are true, and I do hereby agree to serve honestly and faithfully in the Naval Service of Canada*.....from†.....193....., provided my service should be so long required. And I do sincerely promise and swear (or solemnly declare) that I will be faithful and bear true allegiance to His Majesty. As witness my hand this.....day of.....193.....

.....Man's Signature in full

Witness to Signature.....

Attested before me this.....day of.....193.....

.....} Signature of a Commissioned Officer of the Naval Service

Date.....193.....

This is to certify that we have examined the person named on the other side hereof as to his fitness for the Naval Service of Canada, and we find as follows:—He is of perfectly sound and healthy constitution, free from all physical malformation, active and intelligent; and we consider him in all respects fit for His Majesty's Service.

.....Commanding Officer

.....Medical Officer

II—Certificate and Declaration for Boys

Date.....4th March,.....193 7.

This is to certify that we have examined the boy named on the other side hereof as to his fitness for the Naval Service of Canada, and we find as follows:—He is a well grown, stout, intelligent lad, of perfectly sound and healthy constitution, and free from all physical malformation, and we consider him in all respects fit for His Majesty's Service.

The consent of his parents or guardian has been obtained in writing, and they are willing and desirous that the boy should be entered for.....Seven Years.....years' continuous and general service from the age of 18, in addition to whatever period may be necessary till he attains that age.

.....Commanding Officer
COMMANDER, RCN.

.....Lieutenant ~~C.N.~~.RCN.

.....Medical Officer
Lieutenant, R.C.A.M.C.

I declare that to the best of my knowledge or belief the answers to the questions on the other side of this form are true and that I am not indentured as an apprentice.

I am willing to enter and serve in the Naval Service of Canada for.....Seven.....years' continuous and general service from the age of 18, provided my service should be so long required, in addition to whatever period may be necessary till I attain that age. And I do sincerely promise and swear (or solemnly declare) that I will be faithful and bear true allegiance to His Majesty.

.....James Robert Holland.....Boy's Signature in full

Witness to Signature.....
Chief Petty Officer.

Attested before me this.....4th.....day of.....March.....1937.....

.....Lieutenant, R.C.N.....} Signature of a Commissioned Officer of the Naval Service

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III—Re-engagement for Continuous Service

To be executed by men who have not been out of the Service since the expiration of their first engagement

The particulars indicated on the other side are also required when this Form is used.

I,....., now serving as a.....

on board H.M.C.S....., who on the .....of.....193.....

engaged to serve in the Naval Service of Canada for a period of §.....years, do hereby engage to serve for a further period ‖ .....from ¶.....193..... provided my services should be so long required.

.....Man's Signature in full

.....193.....

Witness,.....Commanding Officer

* Insert "*for the term of (number in words) years,*" or "*to complete (number) years for pension,*" or "*until I attain the age of years.*"
† Insert the date from which the engagement actually commences.
‡ The document conveying the consent to be attached to this paper. (N.B.—Not required in the case of youths over 17 years of age.)
§ To be written in words.
‖ Insert as follows:—"*Of (number) years,*" or "*to complete time for pension,*" or "*until I attain the age of years,*" as the case may be.
¶ Insert the date of commencement of the re-engagement, which must either be coincident with, or (when the re-engagement is ante-dated) earlier than the date of execution.

2882 OFFICIAL NUMBER | FILE NUMBER 62-H.229 | OFFICIAL NUMBER 2882

NAME HOLLAND (Surname) James Robert (Given Names) DATE OF BIRTH 25 April, 1920.

PLACE OF BIRTH Halifax, N.S. OCCUPATION Scholar.

RELIGION EDUCATION Grade IX

RESIDENCE AT TIME OF ENLISTMENT: Street and No. 203 Lower Water St. Town Halifax Province, etc. N.S.

ENGAGEMENTS

Date (in figures) Day	Month	Year	Period
4	3	37	As Boy
25	4	38	Seven years.

DESCRIPTION

Height	Hair	Eyes	Complexion	Marks or Scars
5' 6½"	Black	Brown	Medium	Nil

PREVIOUS SERVICE

Served in	Rank or Rating	Dates From	To

NEXT OF KIN RELATIONSHIP (in pencil) Father NAME (in pencil) Mrs. [illegible] Holland

ADDRESS (in pencil): Street and No. 4 Nicholson Road Town Halifax Province, etc. N.S.

MEDALS, CLASPS, HURT CERTIFICATES, PRIZE MONEY

Date (in figures) Day	Month	Year	Particulars

EXAMINATIONS, CERTIFICATES, ETC.

Date (in figures) Day	Month	Year	Particulars
20	4	37	P.P.T.(Fair)
13	7	37	" (Fair)
19	8	37	P.S.T.(Fair)
6	7	37	Passed E.T."One".
3	11	38	Passed for Sig.
16	9	38	Passed for Ord.Sig.

Date (in figures) Day	Month	Year	Particulars

PARTICULARS

BADGES, G.C. OR G.S.

Date (in figures) Day	Month	Year	1st, 2nd or 3rd G.C. or G.S.	Granted Deprived Restored

SECOND CLASS FOR CONDUCT

From	To

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

Ship or Establishment	Wt. No.	Date (in figures) Day	Month	Year	Brief Particulars of Offence	Punishment

Date (in figures) Day	Month	Year	Days Forfeited Prison	Det'n	Cells	C. Power	W. Trial	In diff. Char.

H.Q. 35—30M—4-42 (4260)
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

2882 OFFICIAL NUMBER | NAME HOLLAND (Surname) James Robert (Given Names) | OFFICIAL NUMBER 2882

Ship or Establishment	Rating	From Day	From Month	From Year	Remarks	Character	Efficiency	Date Day	Date Month	Date Year	Non-Sub. Rating	Qualified Day	Qualified Month	Qualified Year	Re-Qualified Day	Re-Qualified Month	Re-Qualified Year
HMCS.Stadacona	Boy Smn.	4	3	37							T.O.V/S	7	6	40			
" Saguenay	"	28	8	37		V.G.	Sat.	31	12	38	V/S 3	7	8	40			
" Stadacona	"	26	10	37		V.G.	Sat.	31	12	39							
	Boy Sig.	3	12	37													
HMS. Victory	"	1	1	38													
	Ord.Sig.	25	4	38													
" Danae	"	28	9	38													
" Victory	"	29	10	38													
HMCS.Stadacona	"	3	12	38													
" Skeena	"	10	1	39													
	Sig.	17	3	39													
" Fraser	"	17	6	40													
HMS. Drake	"	7	8	40													
HMCS.Margaree	"																
DISCHARGED	"	22	10	40	DEAD- Missing presumed dead.												

GENERAL REMARKS

28.4.41. Memorial Cross Issued to Mother;Mrs.Beatrice Holland ,
46 Dresden Row,
Halifax,N.S.

DATE OF BIRTH DY	MO.	YR.	PLACE OF BIRTH	CIVIL OCCU. MAIN	SUB	RELIGION	ED	PERM. RESIDENCE P.	CTY.	TOWN	PREV. SERV.	ENL. DIV.	RANK OR RATE ON ENLISTMENT A	BR.	RANK
25	4	20	14	X X X	0	0	2	4	0	2	0	19	0	08	76

ENLIST. DATE DY.	MO.	YR.	ACT. SERV. DATE DY.	MO.	YR.	DISCHARGE	RANK OR RATE A	BR.	RANK
04	03	37	04	03	37	13/5	0	11	24

SENIORITY DY.	MO.	YR.	STR. CAT.	NON SUB A	B			CODED	CHECKED
17	03	39	09	42	00	20	22-10-40		HR

If a copy of this Form is required, Form C.N.S. 1243 is to be used

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

CERTIFICATE of the Service of

James Robert HOLLAND.

IN THE ROYAL CANADIAN NAVY

HALIFAX, N.S. | Official Number 2882

Date of birth 25th April, 1920.

Where born { Province Nova Scotia. / Town or county Halifax.

Trade brought up to Scholar.

Religious denomination C. of England

Date passed swimming test 12 July '37 - P.P.T. (Hfx) Houghton / 19 Aug 37. P.P.T. (Hfx) Houghton

Man's signature on discharge to pension

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

Name: Beatrice

Relationship: Mother

Address: 46 Dresden Row

12/1/39

Halifax. N.S.

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

Date of actually volunteering	Commencement of time	Period volunteered for	Date of actually volunteering	Commencement of time	Period volunteered for
1. 4 Mch 37	25 Apl. 38	Seven yrs	5.		
2.			6.		
3.			7.		
4.			8.		

Medals, Clasps, Etc.

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

Description of Person	Stature Feet	Stature In.	Chest, In.	Colour of Hair	Colour of Eyes	Colour of Complexion	Marks, Wounds and Scars
On entry as a boy	5	6½	31	Blk	Brown	Medium	
On advancement to man's rating or on entry under 28 years	5'	8½"	35½"	Black.	Brown.	Medium	Scar Top of Rt. Buttock.
On re-entry for C.S. or for Non-C.S. after attaining 28 years							
Further description if necessary							

C.N.S. 459
1,500—10-31
N.S. 815-9-459

CAUTION.—This is an Official document. Any alteration made to it without proper authority will render the offender liable to severe penalties.

Name James Robert HOLLAND.

Ship's Name (Tenders to be inserted in brackets)	List and No.		Rating	From	To	Cause of Discharge
"Stadacona"	-	-	Boy Smn	4 Mch '37	27 aug '37	
"Saguenay"	-	-	-"-	28 aug '37	25 Oct '37	
"Stadacona"	-	-	-"-	26 Oct '37	2 Dec '37	
-"-	-	-	Boy Sig.	3 Dec '37.	31 Dec '37.	
Victory	-	-	-"-	1 Jan '38	24 apl '38	
-"-	-	-	Ord. Sig.	25 apl '38	24 Sep. '38.	
Dana	-	-	-"-	28 Sep '38	28 Oct '38	
Victory	-	-	-"-	29 Oct '38	23 NV '38	
-"-	-	-	-"-	24 NV '38	2 Dec '38	
"Stadacona"	-	-	-"-	3 Dec '38	9 JAN '39	
"Skeena"	-	-	-"-	10 JAN '39	16 Mch '39	
"Skeena"	-	-	Sig.	17 Mch '39	16 June '40	
Fraser	-	-	-"-	17 June '40	5 Sep '40	
Margaree	-	-	-"-	6 Sep '40	22 Oct '40.	"D. D."

Date	Wounds received in Action and Hurt Certificate; also any Meritorious Service, Special Recommendations, Prize or other Grants	Captain's Signature

Service

Ship's Name (Tenders to be inserted in brackets)	List and No.		Rating	From	To	Cause of Discharge

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

Date	Particulars	Captain's Signature	Date	Particulars	Captain's Signature
6 July '37	Passed E.T.I.	[signature]			

Name James Robert HOLLAND. Conduct

Second Class for Conduct (inclusive dates)

From	To

Good Conduct Badges

Date	1st, 2nd, 3rd	Granted, Deprived, Restored

Time forfeited

Date	P., D., C., C.P., W.T.	Number of days	
		Awarded	Served

Efficiency in Rating—Article 607—K.R.

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

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

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

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

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

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

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

Character	Efficiency in Rating, noting substantive rating in brackets	Whether R.M.G. or not	Date	Captain's Signature
V.G.	V.G. (Boy Sea.)		24 Apl. 1935	W. Young Smith
V.G.	Sat. (O.S.)		31 Dec 38	Lt Bell
V.G.	Sat (A.B.)		31 Dec. 39	Tisdall
V.G.	Supr. (A.B.)		22 Oct '40.	J. Edwards

DECEASED 22 October 1940

DEPARTMENT OF VETERANS AFFAIRS

AWARDS

NAVY

D.D.
WAR SERVICE RECORDS

SURNAME (IN BLOCK LETTERS)	CHRISTIAN NAMES	REG. No.	RANK ON DISCHARGE	C.A.S.F. UNIT	FILE No.
HOLLAND	James Robert	N-2882	Sig.		

WAR SERVICE BADGE (CLASS) No. DATE DESPATCHED:

ADDRESS:

CAMPAIGN MEDALS	REGISTRATION NUMBER AN DATE DESPATCHED
1939-45 Star	
Atlantic Star	
C.V.S.M. & Clasp	
War Medal	
	4065

(THE REVERSE TO BE USED FOR ESTATE PURPOSES)

DVA 806

RCN Jul.41 "MARGAREE"

MEDALS AND MEMORIALS—DECEASED PERSONNEL

REGISTRATION No. DATE OF DESPATCH

MEMORIAL BAR

DATE DESP.....

(1) REGN. NO 970

(1) MEDALS
PERSON ENTITLED TO Mr. William Holland - Father

ADDRESS: 46 Dresden Row,
HALIFAX, N.S.

(2) MEMORIAL CROSS
WIDOW

(2)

ADDRESS:

(3) MEMORIAL CROSS
MOTHER Mrs. B. Holland

(3) 28 April 1941

ADDRESS: 46 Dresden Row
HALIFAX, N.S.

MEMORANDUM FOR

Mrs. Wm. Holland,
46 Dresden Row,
Halifax, N.S.

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. N.S. 62-H-229 FD 164

DEPARTMENT OF NATIONAL DEFENCE
OTTAWA, ONT.

July 2 1941

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

HOLLAND, James Robert, Sig.,
No. 2882, R.C.N. "Margaree"

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.

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

M.F.W. 77
3M-5-40 (4995)
H.Q. 1772-39-972

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.....		none	—	—
2	Children of the Deceased and dates of their Births.....		— —	—	— —
3	Father of the Deceased.....		William C. Holland	53	46 Dresden Row. Halifax N.S.
4	Mother of the Deceased.....		Mrs Wm (Beatrice) Holland	41	46 Dresden Row
5	Brothers of the Deceased	Full Blood	William B. Holland R.A.F.	23	R.C.E. Overseas.
			Ralph E. Holland	15	46 Dresden Row.
			Earl D. Holland	6	46. " "
			Phillip F. Holland	3	46 " "
		Half Blood	none		
6	Sisters of the Deceased	Full Blood	Gertrude Holland	19	46 Dresden Row
			Jean M. Holland	11	" " "
			Nellie E. Holland	9	" " "
		Half Blood	none.		

	Names of brothers or sisters (whether of the full or the half blood) of the Deceased, *who are dead*, and date of death of each.	Names and ages of their children (if any)	Address of their children
7		No Brothers nor Sisters Dead.	— — —

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?	James Robert Holland
11	Give the month and year of his birth.	April 25th 1920
12	Where and when were his parents married?	Ct Halifax April 25th 1907 By Rev. E.C. Daley (Baptist Church
13	Was he ever married? If so, state exact place and date of marriage.	Never Married.
14	Did he leave a (later) Will? If so, it should be forwarded.	Left no will of any kind
15	Is there any other estate which will necessitate application being made for Probate or Letters of Administration?	none.

PARTICULARS OF DOMICILE

16	Where was deceased born?	Block 8 Hut. 81A Garrison also Ct Halifax N.S.
17	In what Province, Country or State did he reside, and in which last?	Halifax N.S.
18	How long in each?	Spent some time overseas previous to Death with R.C.N.
19	What was the nature of his employment?	Signalman. R.C.N.
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?	In Canada.
22	State your postal address in full.	Mrs. Wm Holland 46 Dresden Row. Halifax N.S.

PARTICULARS AS TO CLAIMS

23	Have the funeral expenses been paid? If so, by whom?	Died at Sea.
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).	Left no Debts of any kind to be paid

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

*Mother of the deceased.

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

Mrs. Wm. (Beatrice) Holland — Signature of Informant

CERTIFICATE

I hereby certify that, to the best of my knowledge and belief Mrs. William (Beatrice) Holland {Name of Informant} is the *Mother of the Deceased above described, and I believe the above Declaration and the Statement of Relatives made by the Informant and signed in my presence to be complete and correct.

*See above

Dated at Halifax this 6th day of July 1941

Signature of Clergyman, Priest or Magistrate A. B. Leverman — Qualification Priest-

Address St. Mary's Glebe, Halifax, N.S.

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.

P096910 627 229

Six copies to be rendered to Naval Service Headquarters

REPORT OF THE DEATH OF AN OFFICER, MAN OR BOY

H.M.C.S. STADACONA at HALIFAX, N. S.

Name James Robert HOLLAND
(Christian names in full)

Rank of Rating Signaller Official No. 2882
(If unknown, date of first entry)

Place of Birth Halifax, N. S. Date of Birth 25th April, 1920.

Occupation in Civil Life Scholar Religion Church of England

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) 2 Years 7 Months

Date of Death 22nd October, 1940. Place of Death At Sea

Cause of Death Loss in collision of H.M.C.S. MARGAREE
(If due to accident, violence, or enemy action, particulars to be stated briefly)

Nearest known relative or friend.
Name Beatrice HOLLAND Relationship Mother
Address 46 Dresden Row, Halifax, N. S.

Date on which the above was informed by Ship Informed by N.S.H.Q.

Date on which death was registered with local Officials NK

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 (if known) Date of Burial (if known)

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

Undertaker employed (if any)

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

J. Edwards

COMMANDER, R.C.N.
Commanding Officer,

8th November, 1940

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.

C.N.S. 1121
15M—7-40 (5849)
N.S. 815-9-1121

P4187

Can. B. 207
2M—3-34
N.S. 815-2-207

62H229

11

CANADA

CERTIFICATE OF MEDICAL EXAMINATION FOR THE ENTRY OF OFFICERS, MEN AND BOYS FOR THE NAVAL SERVICE OF CANADA

(R.C.N. OR RESERVE FORCES)

NOTE—This Certificate is to be completed by the Examining Medical Officer and forwarded to the Naval Secretary, Department of National Defence, Ottawa.

I, the undersigned, have examined HOLLAND. James Robert.

candidate for entry as Boy Seaman: RCN. New entry.

and I believe him to be in all respects fit for His Majesty's Service. He has signed the Certificate given below in my presence.

Dated at Halifax N.S. the 4th of March 1937

E. E. Lemon
Examining Medical Officer

(*Rank*) Lieut Surg. R.C.N.

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

(a) Age { Years / Months	(b) Weight without Clothes	(c) Height with Bare Feet	(d) General Development	(e) Chest Girth	(f) Vision by— (i) Snellen's Types (ii) Colour Vision	(g) Vaccinated or re-vaccinated 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, Hæmorrhoids, etc.
	lbs.	ft. ins.		inches (a) maximum	right eye	Vacc.								
16 10/12	113	5' 6½"	fair	32 (b) minimum	6/6	Nil.	normal	normal	normal	clear	normal W.D. 20'	normal no varicocele	0 deficient 2 defective	normal
				29 (c) mean	left eye 6/6									
				31½	colour vision N (Ishihara)									

CERTIFICATE TO BE SIGNED BY THE CANDIDATE

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

James R. Holland
Signature of Candidate

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

This Candidate is the subject of .....

.....

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

.....
Examining Medical Officer

(*Rank*) .....

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

NS:62-H.229.

Passing Certificate

This is to Certify

that James R. HOLLAND,

Rating Boy Official Number 2882

has passed

THE EDUCATIONAL TEST, I

held on 6th July, 1937.

For advancement to Petty Officer

J. O. Cossette

(J.O.Cossette).
Naval Secretary

Department of National Defence.

Ottawa, this 7th day of October, 1937.

COPY FROM SIGNAL HISTORY SHEET.

46

Name .. - J. Holland

Rating .. -

Port. Div. and Official No. - R.C.N. 2882.

Examined for - Ord. Signal S.S.

		MARKS RECEIVED.	MARKS REQUIRED.
Fleet Work ..	Paper -	89	65
	Mast and M.M. -	90	90
Miscellaneous	Paper -		
	Oral -	86	80
Procedure ..	Paper -	80	65
	Practical -	84	80
Coding	Paper -		
	Practical -	85	65
W/T Paper	-	88	75
Buzzer	Transmitting -	89	75
	Receiving -	99	85
Flashing	-	99	90
Morse Flag	-	100	88
Semaphore ...	Mech. -	96	90
	H.F. -	96	90

PASSED or FAILED. ..... - PASSED.

H.M.Signal School, Portsmouth.

16th September, 1938.

HQ Coy. #1

S+9

9/5/36

ATTESTATION

NON-PERMANENT ACTIVE MILITIA OF CANADA 1027

UNIT P.L.I. REGT. No. ~~1023~~

1. What is your surname? (Block letters) HOLLAND
2. What are your Christian names? James
3. What is your present address? 203 Lo Wall Phone No. —
4. Employer's name and address? — Phone No. —
5. Date of Birth 9/11/25/06. (a) Country of Birth Can (b) Nationality Ca
7. Are you Single? Yes Married? — Widower? —
8. What is your trade or calling? School 9. Religious persuasion? C. of E
10. Previous Naval, Military or Air Force Service
Give particulars, qualifications, etc.
11. Name, Relationship and Address of Next of Kin Father
Jas Wm Holland same addr

CERTIFICATE OF MEDICAL EXAMINATION

Height 5'4" Weight 115 Chest max. 30 min. 28

Descriptive marks

I have examined the above named man in accordance with instructions laid down in Regulations for the Canadian Medical Services and find him Category

Date Signature

DECLARATION TO BE MADE ON ATTESTATION

I, the undersigned J Holland do sincerely and solemnly declare that to the best of my knowledge and belief, the above answers to the foregoing questions made and signed by me are true; that I am willing to be attested for the term of three years or until legally discharged, and do understand the nature and terms of this engagement, that I will safeguard all clothing, arms and equipment issued to me and will return same when required, and that I will report any change in address of myself, my employer or my next of kin to my Commanding Officer.

OATH TO BE TAKEN

I, J Holland do sincerely promise and swear (or solemnly declare) that I will be faithful and bear true allegiance to His Majesty.

H Callon — Signature of Witness

James Holland — Signature of Man

Dated this 19th day of May 1936 at Hfx N.S.

CERTIFICATE OF ATTESTING OFFICER

The recruit above-named was cautioned by me that if he made any false answers to any of the above questions he would be liable to be punished by law. The above questions were then read to the recruit in my presence. I have taken care that he understands each question and that his answer to each question has been duly entered and replied to, and the said recruit has made and signed the declaration and taken the oath.

Signature of Magistrate, Justice of Peace, or Attesting Officer Lt Col

M.F.B. 235d.
100M—6-30
H.Q. 1772-39-545

Statement of Services

Promotions, Reductions, Transfers, Casualties, Annual Training, Qualification Certificates, etc.	Effective Date	Authority for Entry	Signatures of Officers Certifying Correctness of entries
Accepted for Service with effect from.....	19/4/36	B.O. 16 2/6/36	Capt. Adjt. Officer Commanding Unit P.L.F.
Named local H.Q.	1936	P.L. 1936	Capt
TRANSFERRED TO: THE PRINCESS LOUISE FUSILIERS [M.G.]	30/11/36	B.O. 54/36	"
T.O.S.		Pt. 11 No. 7/37	
THE PRINCESS LOUISE FUSILIERS [M.G.] Posted to H.Q. Coy #1 M.G. Car #7412 V/T-1	1/12/36		Capt.
	4/3/37	Pt. 11 No. 4/37	
S. O. S.	4/3/37	Pt. 11 No. 7/37	
Medals and Decorations			

NOTE:—These entries are to be made from time to time as they occur and certified by the Officer making the entry.

Attestations to be made out in duplicate, the original being forwarded to be filed in Regimental Orderly Room, the duplicate to be kept in the Battery, Squadron, Company, etc.

NAVY

DISTRIBUTION OF SERVICE ESTATES

Naval - Military - Air Force

37

Name HOLLAND James Robert No. 2662
Surname Christian Names

Sig. : H.M.C.S. "MARGAREE" : 22-10-40
Rank Unit Date of Death

AMOUNT

L. P. C. $ 55.43

Other Credits _____

Total

Shares Retained 55.43

NET TOTAL 55.43

Date JULY 16, 1941

SHARE	RELATIONSHIP	NAME AND ADDRESS	AMOUNT
1/2	Father	William C. Holland, 46 Dresden Row, Halifax, N.S.	27.72
1/2	Mother	Beatrice Holland, 46 Dresden Row, Halifax, N.S. (next of kin entitled)	27.71
SHARES RETAINED			
None	----		

AUTHORITY

H.Q. F.E. No.	DIV.	EST.	VOTE	PRI	DA OR HQ SUB	OBJ.	AMOUNT	
9999			832	00	00	001	55	43
PREPARED BY			EXAMINED BY					
							55	43
							FOR TREASURY USE ONLY TOTAL	

Distribution approved and authorized

L. M. Firth.

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

AUDITED FOR PAYMENT

WW

For Chief Treasury Officer

DEPARTMENT OF NATIONAL DEFENCE

NAVY ═══ ARMY ═══ AIR FORCE

N2882/21/4 NAVY

ID

STATEMENT OF WAR SERVICE GRATUITY

CASED MEMBER'S NAME	James Robert (CHRISTIAN NAMES)	HOLLAND (SURNAME)	REGISTER NO. 1944
			FILE NO. N S 2882
PAYEE			DATE 19 June/
ADDRESS	Mrs. Wm. C. Holland, 46 Dresden Row, Halifax, N.S.		SERVICE NO. 2882
			FINAL RANK OR RATING Sig.
DATE OF TERMINATION OF OVERSEAS SERVICE	22 Oct/40		DATE OF DISCHARGE 22 Oct/4

	$	¢
A. TOTAL QUALIFYING SERVICE		
NO. OF DAYS 409/30 EQUAL TO 13 COMPLETE PERIODS AT $7.50	97.50	
B. QUALIFYING OVERSEAS SERVICE		
NO. OF DAYS 409 LESS 19 INELIGIBLE DAYS, EQUAL TO 390 DAYS @ 25c. PER DAY	97.50	
C. SUPPLEMENT FOR OVERSEAS SERVICE		
DAILY RATES AT DISCHARGE		
PAY $ 2.00		
SUBSISTENCE OR LODGING AND PROVISION ALLOWANCE $ 1.45		
ADDITIONAL PAY T.O.V/S $ .05		
H.L.M. $ .13		
DEPENDENTS' ALLOWANCE 1/30 OF $ _____ $		
TOTAL $ 3.63 ×7 = $ 25.41		
NO. OF DAYS 390/183 ×$ 25.41	54.15	
D. WAR SERVICE GRATUITY	249.15	
E. DEDUCTIONS — OVERPAYMENT OF — PAY AND ALLOWANCES $		
DEPENDENTS' ALLOWANCE AND ASSIGNED PAY $		
OTHER DEDUCTIONS $ NIL		
F. TOTAL AMOUNT PAYABLE	249.15	

G. YOUR PORTION OF GRATUITY IS—

DEPENDENTS' ALLOWANCE IN ISSUE TO YOU $_____ OF $ _____ =$ 249.15

TOTAL DEPENDENTS' ALLOWANCE IN ISSUE $

Cheque 34625 — July 6/45

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
IM	

TREASURY	
CHECKED BY	DATE
Roy Ferguson	22-6-45

SERVICE REPRESENTATIVE

for Dir. Naval Pay. Acctng.

P.P.

P.P. Acts & C.N.
28/11/36
Sm.

November 26th 1936,
203 Lr. Water St.,
Halifax, N.S.,

Naval Secretary
Dept. of National Defence
Ottawa, Canada.

Dear Sir:—

I am writing you this letter to find out if I am eligable to join the Boys Service of the Royal Canadian Navy. I submit the following for your close consideration.

I was sixteen years of age on Apr. 25th 1936, and I have passed Junior High School and have spent a year in the nineth grade.

I am hoping to hear from you as soon as possible.

Respectively yours,
James Holland

My address is
James Holland
203 Lower Water St. Hfx., N.S.

62 H 229

36

1st November, 1940.

Dear Sir:

It is with deep regret that I must confirm the telegram sent out by the Minister of National Defence, reporting that your son, James Robert Holland, Signalman, O.N. 2882, R.C.N., was missing, believed killed.

Few details are available, but it is known that H.M.C.S. "MARGAREE" was sunk in collision in the North Atlantic whilst steaming without lights, on convoy duty, and in the submarine zone. 142 Officers and ratings are missing and must be presumed lost at sea.

I am requested to express to you the sincere sympathy of the Minister of National Defence for Naval Services and the Chief of the Naval Staff in your bereavement.

Any further information, which is received, will be at once communicated to you.

Yours very truly,

(J. O. Cossette),
Naval Secretary.

Mr. William Holland,
46 Dresden Row,
HALIFAX, N.S.