HOPPER JACK HERBERT N21763

21763		OFFICIAL NUMBER	FILE NUMÉ	3BX*	62 - H.3	379			L NUMBER 21763
NAME	HOPPER (Surname)	Jack H.	(Given Nam	ies)	·		DATE OF BIRTH	17th January,	1919
PLACE OF BIR					OCCUPATION	v Plumbers Ma	te		
	Church of England T TIME OF ENLISTMENT: Street	end No. 131 Bleinhei	m Road		т	own Deal	Kent	Province, etc.	gland
KESTEENCE A	ENGAGEMENTS	and No.			DESCRIPTION	own			ous Service
Date (in figures) Day Month Ye	— Period	Height	Hair	Eyes	Complex	tion Marks	or Scars	Served in	Rank Dates Or Rating From To
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Ship or Establishment	Rating	Day	From Month	Year	Remarks	Character	Efficiency	Day	Month	Year	Non-Sub. Rating	,	Qualified		Re-	ified Ionth Year
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If a copy of this Form is required, Form S. 1243 is to be used.

S.-459 (Revised-January, 1934).

SURNAME.
(IN BLOCK LETTERS)

CERTIFICATE of the Service of

CHRISTIAN NAME OR NAMES.

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All Engagements, including Non-C.S., to be noted in these Columns.								Swin	nming Qualifica	tions.	
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ing 28 years Further description	ription if						- (

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

N.P. II 2892/1927. Sta. 1/34. 2. Name HOPPER. Jack Nerbert.

Name of Ship. (Tenders to be inserted in brackets)	List and No.	Rating	From	То	Cause of Discharge and other notations authorised by Article 606, Clause 9, K.R. and A.I.
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Sussey	1		29 me 37	17 gan 38	
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Date Particulars	5	Captain	's Signature I	Date	Particul	ars	Captain's Signature	
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	Second Class for Conduct (inclusive dates)		Character and Efficiency on 31st December yearly, on final discharge, and other occasions prescribed by regulation. If qualified by service and recommended for Reengagement or for Medal and Gratuity, "R.R." or "R.M.G." to be awarded on 31st December and final discharge, if not, a line to be drawn across column.										
	F	rom		To		Note as to method of assessing Efficiency.							
						Superior—above average efficiency. Satisfactory—average efficiency. Moderate—less than average efficiency. Inferior—inefficient. in substantive rating, without regard to fitness for advancement.							
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DECEASED 22 October 1940 .

Manual William			
DEPARTMENT	OF	VETERANS	AFFAIRS

No.

AWARDS



D.D. WAR SERVICE RECORDS

HOPPER Jack H	lerbert .	N-21763	Sto. 1	FILE No.
SURNAME (IN BLOCK LETTERS)	CHRISTIAN NAMES	REG. No.	RANK ON DISCHARGE	C,A.S.F. UNIT

WAR SERVICE

BADGE

(CLASS)

DATE DESPATCHED:

ADDRESS:

CAMPAIGN MEDALS	REGISTRATION NUMBER AN DATE DESPATCHED	
1939-45 Star C.V.S.M. & Clasp	1040 25 1149	
War Medal		
	02-98901 M	
,	(THE REVERSE TO BE USED FOR ESTATE PURPOSES)	

MEDALS		
PERSON ENTITLED TO	Mr. James E. Hopper Father	MEMORIAL BAR
ADDRESS:	5 St. Peter's Rd., BRACKLEY, North Hants, ENGLAND.	REGN. NO GOLED,
2) MEMORIAL CR WIDOW	<u>OSS</u>	
ADDRESS:		(2)
MEMORIAL CR MOTHER	<u>DECEASED</u>	(3)
ADDRESS:		

*	Mr. J. E. Hopper,
	5 St. Peters Road.
***************************************	Brackley,
	Northants,
	ENGLAND.

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

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

and the following number quoted:-

H.O. NS. 62-H-379

DEPARTMENT OF NATIONAL DEFENCE OTTAWA, ONT.

	November 3rd, 194 1
For the purpose nedals or memorials ate	of record and in the event of there being any balance of pay, available for distribution (according to law) on account of the
	Sto.1. HOPPER, Jack H., No. 21763,
	H.M.C.S. "Margaree". R.C.N.

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, Local Magistrate, Commissioner for Oaths or Notary Public, 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.



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.

nship	RELATIVES required to be accounted for		INFORMANT'S STATEMENT				
Relationship			NAME IN FULL of any Relative, if any, in each degree inquired for		ADDRESS IN FULL of each surviving Relative, opposite his or her name, and date of death of each deceased relative		
1	Widow of the De	eceased					
2	Children of the I dates of their I	Deceased and Births					
3	Father of the Deceased		Jessie Kate - Hoffet. Described and 1929	53	3. St Rters Pd Brackley north		
4 Mother of the Deceased		eceased	Gestated any 1929				
5	Brothers of the Deceased	Full Blood					
		Half Blood					
6	Sisters of the Deceased	Full Blood	magnet Ralla Nopper	15-	3-St-Pelas Pa Brackley north anto		
		Half Blood					
7	Names of brothers or sisters (whether of the full or the half blood) of the Deceased, who are dead, and date of death of each.		Names and ages of their children (if any)		Address of their children		
		1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1					
				1			

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

66

.0	What is the full name of the deceased?	Jack Herbat. Hoppor
1	Give the month and year of his birth.	January 17 1919
2	Where and when were his parents married?	Winnepeg Manilote. Banada
3	If deceased was married, state place and date of marriage.	
1	Did he leave a Will? If so, a copy should be attached hereto.	no
	Did he leave a bank account? If so, give full particulars.	no
	Is there any other estate which will necessitate application being made for Probate of the Will or Letters of Administration of the estate?	ns
7	State your own postal address in full.	5. St felers Pod Brackbey north ants

PARTICULARS OF DOMICILE

18	Where was deceased born?	Grace Hospital
19	State, in order, the Province (or State) and country in which the deceased resided and the period of time in each, and in which last.	Render Marlitotal Maritota 14 years Kent England 4 years When in and He Billich Navy
20	What was the nature of his employment?	pump Henry Hen Sohr
21	Did he own the premises in which he lived? If so, where?	no
22	Did he ever state verbally, or in writing, where he intended to make his permanent home?	with me in England

OTHER PARTICULARS

23	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.	ns					
24	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, 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.)

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

Hather of the deceased.

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

James Grust Hoppe

Signature of Informant

CERTIFICATE

	I hereby certify that, to the best of my knowledge and belief James Grucht Hopper
*See above	{ Name of Informant} is the *
	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.
Date	ed at Mackley this 10 th day of December 19 th
Notary Pu	Address 36 Market Place Breekley yor thanks

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 enquired after is stated in its proper place in the Statement opposite.

USE SPACE BELOW FOR ANY ADDITIONAL REMARKS YOU MAY WISH TO MAKE

no H.G. NS. 62-H-379

PG96912 62-W- 379
mice Headquarters 27

Six copies to be rendered to Naval Service Headquarters

REPORT OF THE DEATH OF AN OFFICER, MAN OR BOY

H.M.C.S	STADAÇUNA	at nauth	A. N. S.
Name			
		names in full)	
	Stoker First Class		(If unknown, date of first entry)
Place of Birth		Date of Birth	*
Occupation in Civ	vil Life	ReligionChur	ch of England
	s service in the Navy (Long Ser) or Reserve ratings)		lized service in case of R.C.N
Date of Death	20-1 - 1 - 101-		
Cause of Death.	To 44 day 224 1	of H.M.C.S. MAR	GAREE
Nearest known (Name Mr. Hopper	Rela	tionship Father
friend.	Address 131 Blendeim R		, mglomi.
Date on which th	ne above was informed by Ship	Infor	med by N.S.H.Q.
Date on which d	eath was registered with local C	Officials	NK
prescribed re	aperial Service men, whether Acti turn was rendered to the Registra nality	ar General in London	, Edinburgh or Dublin, accord-
Place of Burial	(if known)	Date of Burial	(if known)
Location, Numbe	er, etc., of grave	(if known)	
Undertaker emplo	oyed	(if any)	
If borne for disci	pline only, date D.S.Q. or invalid	ded	mial
			Commanding Officer,
		St	h 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



Name:	HOPP Surname	ER		Christian N	Jack, H.		No.:	N21763
Sto.	1/c		Un		HMCS Margar	e	*** ** *****************************	22 -10-40 te of Death
		D	13-		AM	IOUNT	WSG L.P.C\$	239.74
		Date:					Other Credits Total Prev.dist. This dist.	359.17 119.43 239.74
SHARE	RELA'	TIONSHIE	P		NAME AN	D ADDRE	CSS	AMOUNT
All	father				James E. Hor 15 The Grove Deal, Kent, (as next-of		ntitled)	239.74
					0'			
								WSG
AUTHOR	ITY					DISTR	IBUTION APPROVED	AND AUTHORIZED
H.Q. F.E. No.	VOTE	PRI	H.Q. SUB.	овј.	AMOUNT	-	MILL	
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CLASSIFIED BY EXAM			EXAM	For C	hief Treasury Officer	AUDIT	ED FOR PAYMENT	

75M—2-45 (6771) H.Q. 1772-80-2 For Chief Treasury Officer

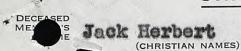
BF

DEPARTMENT OF NATIONAL DEFENCE

NAVY

ARMY AIR FORCE

STATEMENT OF WAR SERVICE GRATUITY



HOPPER

REGISTER NO. 12950

PAYEE Director of Estates 308 Sparks St ..

for service Estate of Jack H. HOPPER, NS N-21763

SERVICE NO

FILE NONS N-21763

Ottawa, Ont. DATE OF TERMINATION OF OVERSEAS SERVICE 22 Oat

FINAL RANK OR RATING DATE OF DISCHARGE

Sto.1/c Be 0000 / 20

A. TOTAL QUALIFYING SERVICE

NO. OF DAYS

_EQUAL TO

COMPLETE PERIODS AT \$7.50

97.50

B. QUALIFYING OVERSEAS SERVICE

NO. OF DAYS 378

ADDRESS

LESS 19

INELIGIBLE DAYS, EQUAL TO

359 DAYS @ 25C. PER DAY

89.75

C. SUPPLEMENT FOR OVERSEAS SERVICE

DAILY RATES AT DISCHARGE

SUBSISTENCE OR LODGING AND PROVISION ALLOWANCE ADDITIONAL PAY GOD

DEPENDENTS' ALLOWANCE 1/30 OF \$ 111

TOTAL

3.63 ×7=\$ 25.41 NO. OF DAYS 378

52.49

D. WAR SERVICE GRATUITY

239.74

E. DEDUCTIONS

OVERPAYMENT OF

PAY AND ALLOWANCES DEPENDENTS' ALLOWANCE AND ASSIGNED PAY \$

OTHER DEDUCTIONS

\$

F. TOTAL AMOUNT PAYABLE

239.74

G. YOUR PORTION OF GRATUITY IS-

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

CERTIFICATE I CERTIFY THAT THE AMOUNT HAS BEEN CORRECTLY COMPUTED AND IS PAYABLE IN ACCORDANCE WITH THE TERMS OF THE WAR SERVICE GRANTS ACT, 1944 AND THE REGULATIONS ISSUED THEREUNDER.

PREPARED BY CHECKED BY EP

TREASURY CHECKED BY

DATE

COPY.

J.H. Hopper STo. C/KX90529 H.M.S. Transea's c/o. G.P.O. London.

143

Dear Sir,

I am writing this letter for advice and hoping that you may be able to help me to your fullest capability. I am a Canadian born in Winnipeg on January 17th, 1918, I am a stoker in the Royal Navy and I wish to transfer to the Royal Canadian Navy as soon as possible. One main reason is that I'm engaged to a Canadian girl also living at Winnipeg, I have tried a number of times to transfer but somehow Lady Luck has been against me. I have been in the Navy four years come January and my conduct sheat is spotless, is all I ask for is to get back home to the girl I love. My Father is in England living in Deal, Kent and as I'm twenty-one I'm considered old enough to know my own mind. So hoping you will be able to advise me and help me to get back home.

Yours respectfully,

(sgd.) Jack. H.

62-H379 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, Jack H. Hopper, Stoker, O.N. 21763, 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. James Hopper, 131 Bleinheim Road, DEAL, Kent, Eng.