

**V14672**  
**WITNEY**

ALFRED

EDWAR



RCNVR April 42 "WINDFLOWER"

MEDALS AND MEMORIALS—DECEASED PERSONNEL

REGISTRATION NO. DATE OF DESPATCH

(1) MEDALS

PERSON

ENTITLED TO

Mrs. Florence Witney - Mother

Decceased 11-9-49

Held pending  
Appealation 7-7-50.

ADDRESS:

4852 Inverness Street,  
Vancouver, B.C.

(2) MEMORIAL CROSS

WIDOW

ADDRESS:

(3) MEMORIAL CROSS

MOTHER

Mrs. Florence Witney

ADDRESS:

4852 Inverness St., Vancouver, B.C.

(2)

(3)

2-1-42

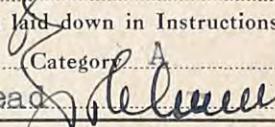
17

W-350

## ATTESTATION

NON-PERMANENT ACTIVE MILITIA OF CANADA  
 2nd Bn. Ir. Fus. (Van. R.) N.P.A.M. K449775  
 UNIT REGTL. No. 73297

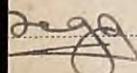
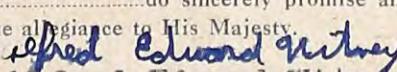
Surname? (Block letters) WITNEY  
 Christian names? ALFRED EDWARD  
 Present address? 4852 Inverness, Vancouver, B.C.  
 Phone No. \_\_\_\_\_  
 Date of Birth \*Aug. 8, 1921 5. British subject? Yes  
 Occupation? Butcher 7. Religion? United  
 Next of Kin Mrs. Florence Witney 9. Relationship? Mother  
 Address Same  
 Previous Naval, Military or Air Force Service  
 (Give particulars, qualifications, etc.)  
 No 383329

20 CERTIFICATE OF MEDICAL EXAMINATION  
 Height 5' 8 $\frac{1}{2}$ " Weight 145 Chest max 35 $\frac{1}{2}$  min 33  
 Descriptive marks   
 I have examined the above named man in accordance with instructions laid down in Instructions  
 the R.C.A.M.C. and C.D.C. 1937 Appendix V and find him  Category A  
 e. Aug. 29/40 Signature John Whitbread 

## DECLARATION TO BE MADE ON ATTESTATION

I, the undersigned Alfred Edward Witney do sincerely and solemnly declare  
 to the best of my knowledge and belief, the above answers (made by me) to the foregoing questions  
 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 equip-  
 ment issued to me and will return same when required, and that I will report any change in address of  
 self, or my next of kin to my Commanding Officer.

## OATH TO BE TAKEN

I, Alfred Edward Witney do sincerely promise and swear  
 solemnly declare) that I will be faithful and bear true allegiance to His Majesty  
 J. S. Begg, Capt.  Alfred Edward Witney  
 Signature of Witness Signature of Man  
 ed this 29th day of Aug. 1940 at Vancouver, B. C.

## CERTIFICATE OF ATTESTING OFFICER

The recruit above-named was cautioned by me that if he made any false answers to any of the  
 questions he would be liable to be punished by law. The above questions were then read to

## Statement of Services

Promotions, Reductions, Transfers, Casualties, Annual Training, Qualification Certificates, etc.	Effective Date	Authority for Entry	Signatures of Officers Certify Correctness of entries
Accepted for Service with effect from <u>FUS. WITNEY A.E.</u>	<u>29/8/40</u>	<u>Rn. Q#10</u> <u>31/8/40</u>	<u>H. Gallant Me</u> Officer Command <u>D. Co.</u> Unit
Camp	<u>8/9/40</u> <u>10</u> <u>22/9/40</u>	<u>Rn Q#11</u> <u>6/9/40</u>	<u>H. Gray, Lt</u> Capt Adj
Sos. To Join RCNVR	<u>10/1/41</u>	<u>Rn Q#3</u> <u>17/1/41</u>	<u>H. Gray, Lt</u> Capt Adj
Medals and Decorations			

# QUESTIONNAIRE FOR CANDIDATES P 10701

FOR ENTRY IN THE

ROYAL CANADIAN NAVAL VOLUNTEER RESERVE JAN 28 1941

NS 113 W-900  
CANADA

Name (in full) *Alfred Edward Whitney*

Date and place of birth *Aug 8 1921 Vancouver B.C.*  
(Birth certificate, declaration by parents or affidavit as to date of birth must be attached)

Permanent place of residence *4852 Inverness St*

Nearest town to residence (if living in country).....

Are you a British subject? *Yes*

Are you single, married or a widower? *Single*

In what capacity do you wish to enrol?.....

(See standards of qualifications in attached pamphlet)

Present occupation or trade *Apprentice Butcher*  
(Attach any testimonials or recommendations)

Do you belong to any Naval, Military, Reserve or Territorial Force? *Yes Receiving discharge*

Have you ever served with such forces? Give dates and details *Aug 17 1940*

*Irish Fusiliers N.B.C. till Jan 10/41*

Have you ever been discharged from any of H. M. Forces as medically unfit? *No*

Have you ever offered to serve in any of H. M. Forces and been rejected? *No*

What is your weight? *142* What is your height? *5 ft 9*

What is your chest measurement (not inflated)? *35*

Are you free from all physical defects or malformation, and not subject to fits? *Yes*

Are you willing to be vaccinated or re-vaccinated and inoculated as considered necessary by the appropriate  
authorities? *Yes*

I hereby declare that the above answers are true in every respect.

*Alfred Edward Whitney* Signature

*Jan 3 1941* Date

*4852 Inverness St* Address

(Witness to Signature)

This is to certify that I have personally seen the birth certificate of this applicant, or a sworn  
declaration as to his date of birth.

I certify his date of birth, according to legal documentary evidence, to be *Aug 8 1921*

Signed *W. L. C. R. C. M.*

Commanding Officer

N.V. 3

5M-9-39 (1815)  
N.S. 815-11-3



N. V. 5

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

## ATTESTATION FORM

(HOSTILITIES FORM)

FOR MEN OF THE ROYAL CANADIAN NAVAL VOLUNTEER RESERVE

SURNAME Witney OFFICIAL NO. V-14672  
CHRISTIAN NAMES Alfred  
CHRISTIAN NAMES Edward MARRIED, SINGLE OR WIDOWER Single

PERMANENT ADDRESS <u>4852 Inverness St., Vancouver, B. C.</u>		RELIGION <u>United Church</u>
DATE OF BIRTH <u>Aug. 8, 1921</u>	*PLACE OF BIRTH <u>Town Vancouver</u>	NAME AND ADDRESS OF NEXT OF KIN <u>Mrs. Florence Witney (mother)</u>
*Original Nationality of: Father <u>English</u> Mother <u>English</u>	County <u>Province B. C.</u>	(same address)

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

## PERSONAL DESCRIPTION ON ENROLMENT

HEIGHT	CHEST MEASUREMENT	HAIR	EYES	COMPLEXION	WOUNDS, SCARS, MARKS
Feet <u>5'</u>	Inflated <u>36</u>	brown	brown	fair	nil
Inches <u>9"</u>	Deflated <u>34</u>				
	Mean <u>35</u>				

DATE OF ENROLMENT <u>Jan. 11, 1941</u>	RATING ENROLLING FOR <u>Ord. Sea.</u>	TRADE OR CALLING AND IN WHOSE EMPLOY <u>Butcher apprentice</u>
R.C.N.V.R. Division (or other establishment) at which enrolled <u>Vancouver</u>		<u>David Spencers</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 Irish Fusilier's N.P.A.M. for the period shown, and attach my record of service, in corroboration of this statement.

\*Cross out Clause not applicable.

SERVED IN <u>Irish Fusilier's N.P.A.M.</u>	RANK <u>Private</u>	FROM <u>Aug. 17, 1940</u>	TO <u>Jan. 10, 1941</u>
---	------------------------	------------------------------	----------------------------

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

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

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

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

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

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

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

Dated this..... **3rd** / / **1941**.....

Signature of applicant **Alfred Edward Witney**

(C)

CERTIFICATE OF ATTESTING OFFICER

I hereby certify that all the foregoing statements were made by the volunteer above named, in my presence, and that he has made and signed the above declaration in my presence on this..... **3rd** / / **1941**

day of.....

Signature of and rank of Attesting Officer.

(D)

OATH OF ALLEGIANCE

**Alfred Edward Witney**

I..... 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

**Alfred Edward Witney**

Witness

**Alfred Edward Witney**

Date

**Jan. 3, 1941**

Rank

**20. Art. Corp.**

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

(E)

CERTIFICATE OF ATTESTING OFFICER

**Alfred Edward Witney**..... having been duly enrolled to serve in the Royal Canadian Naval Volunteer Reserve Force, I have caused his name and every prescribed particular to be recorded in the Record Book of the..... **Vancouver**..... Division of the R.C.N.V.R. or in the appropriate official documents.

Attesting Officer.

**AEW**

R.C.N.V.R. Division

194.....

Vancouver

NOTE.—This form when completed and when the particulars on it have been noted in the Divisional Commanding Officer's Record Book, is to be forwarded to Headquarters, Ottawa, for custody.

The Certificate of medical examination, B-207, and certificates of previous service are to be sent to Headquarters, Ottawa, with this form.

Certificates of previous service will be returned after they have been examined at Headquarters, Ottawa.



V14672

.....OFFICIAL NUMBER

NAME..... WITNEY  
(Surname)

Alfred Edward  
(Given Names)

OFFICIAL NUMBER..... V14672

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## GENERAL REMARKS

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Memorial cross issued to mother  
2-1-42

N.V. 17  
15M-4-40 (471)  
N.S. 815-11

True Copy

~~3-10-75~~

V-14672

**CERTIFICATE of the SERVICE of**

Alfred Edward WITNEY

in the Royal Canadian Naval Volunteer Reserve

RECEIVED  
T.C.N.S. No. 9694

Training Headquarters	R.C.N.V.R. Division	Official Number.....
ESQUIMALT	VANCOUVER	V-14672 " " "

Date of Birth.....	8th August 1921	Name and Address of Nearest Relative or Friend Mother - (in pencil)			
Place of Birth.....	Vancouver, B. C.	Mrs. Florence Whitney			
Place of Residence	4852 Inverness St. Vancouver, B.C.	4852 Inverness St.			
Trade brought up to.....	Butcher Apprentice	O.H.F.			
Religion.....	United Church	Vancouver, B.C.			
Can Swim:—P.P.T.	Date.....	2nd June	1941	Signature.....	Rank.....
P.P.T. (Good) 24 June 41			(Good)	Jew Gorder	S. 11
P.S.T.	Date.....		19.....	Signature.....	Rank.....

**PERSONAL DESCRIPTION**

#### TRANSFER BETWEEN DIVISIONS

TRANSFER—LISTS A AND B

From	To	Date	List	Date	Authority

# NAVAL TRAINING and ACTIVE SERVICE

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

# NAVAL TRAINING and ACTIVE SERVICE

Name Alfred Edward WITNEY

## Conduct

SHIP	SERVICE			AREA	QUALIFYING PERIODS IN DAYS						STARS MEDALS	✓ 1 2	ELIGIBLE FOR AWARDS OF
	FROM	TO	DAYS		FROM	TO	1939-45 ATLANTIC	DEFENCE	CLASP C.V.S.M.	1915 MEDAL			
✓ Anchored Dur.	1-5-41	18-6-41								1939-45	1	Star	
Avalon	15-11-41	5-12-41								ATLANTIC			
Windflower	6-12-41	7-12-41	2							FRANCE G.			
Dischg'd "Dead" to date										AFRICA			
	7-12-41									PACIFIC			
										BURMA			
										ITALY			
										DEFENCE			
										C.V.S.M.	2	@ class	
										" CLASP			
										WAR 1945	1	Medal	
										WAR 1915			
										VERIFIED BY		Robert...	
VERIFIED BY				VERIFIED BY						DIR. OF PERSONNEL RECORDS			

WITNEY

Alfred Edward

V14672

113-W-900

SERVICE

PRESENT RANK/RATING: Ord. Seaman

DATE TAKEN ON ACTIVE SERVICE: May 1, 1941

SERVICE

SHIP OR ESTABLISHMENT

	<u>From</u>	<u>To</u>
Duty Div. Hdqtrs. (Vancouver)	1-5-41	17-6-41
Naden	18-6-41	7-10-41
Royal Roads	8-10-41	11-11-41
Stadacona	12-11-41	
Windflower		

Duty Div. Hdqtrs. (Vancouver)  
Naden  
Royal Roads  
Stadacona  
Windflower

WILL: None

NAME & ADDRESS OF Mother- Florence Witney  
NEXT-OF-KIN: 4852 Inverness Street  
Vancouver, B.C.

Initialled by: 

Date: Dec. 10, 1941 Section: R.C.N.V.R.

Naval Personnel  
Records,

(TO BE COMPLETED IN INK)

113-21900

## OCCUPATIONAL HISTORY FORM

113-21780

13

THIS FORM IS TO BE COMPLETED FOR EACH MEMBER OF THE ARMED FORCES. THE INFORMATION SOUGHT IS FOR THE USE OF GENERAL ADVISORY COMMITTEE ON DEMOBILIZATION AND REHABILITATION, A COMMITTEE SET UP BY THE GOVERNMENT OF CANADA TO STUDY PLANS FOR ESTABLISHING IN INDUSTRIAL LIFE THE MEMBERS OF THE ARMED FORCES, AFTER DISCHARGE. ACCURACY AND COMPLETENESS IN ANSWERING WILL BE OF MUCH HELP TO THE COMMITTEE.

PLEASE READ CAREFULLY THE INSTRUCTIONS GIVEN ON THE INSIDE OF COVER BEFORE COMPLETING FORM

## Section A—GENERAL INFORMATION

PLEASE  
LEAVE  
BLANK

1. (a) Print name in full *WHITNEY ALFRED EDWARD* (b) Reg'l. No. *N 14627*  
 2. (a) Arm of service *NAVY* (b) Unit *RCNVR* (c) Rank *ORD SGTMAN*  
 3. (a) Date of birth *3 AUG 1921* (b) Have you any dependents? *NO* (c) Place of residence *VANCOUVER BC*  
 at time of enlistment  
 4. (a) Place of enlistment *VANCOUVER* (b) Date of enlistment *11 JUN 1941*

## Section B—EDUCATION AND TRAINING

5. (a) State age on finally leaving school *15 yrs* (b) Were you attending school or college up to the time of enlistment? *NO*  
 6. State definitely highest standing reached at public, technical or high school (for instance—"4 years, Public School", "two years, High School", "Junior Matriculation", or "4 years technical course in printing", etc.). *COMPLETE Public School*  
 7. If you attended a university, give name of university and standing or degree secured. *NO*  
 8. (a) Did you ever enter upon a trade apprenticeship? *YES* (b) If so, what occupation? *BUTCHER* (c) Did you finish it, how long did you serve at it? *YES*  
 9. (a) What languages do you speak fluently? *ENGLISH* (b) What languages do you read well? *ENGLISH*

## Section C—EMPLOYMENT CONDITION AT TIME OF ENLISTMENT

10. (a) State whether you were WORKING or NOT WORKING at time of enlistment. (Enter here only "Working" or "Not Working", as case may be; particulars are asked for below). *WORKING* (b) At time of enlistment of what trade union or professional society were you a member? *NONE*

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

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

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

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

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

IF YOU WERE AN EMPLOYEE WORKING FOR AN EMPLOYER UP TO THE TIME OF ENLISTMENT, PLEASE ANSWER QUESTIONS 18 TO 21.  
 18. Name of employer *DAVID SPENCER LTD* Address *VANCOUVER BC*  
 19. Nature of employer's business (for instance, "farmer", or "building contractor", or "boot factory", or "iron foundry", or "retail store", etc.) *PETIT STORE*  
 20. (a) Your specific occupation *BUTCHER* (b) Number of years' experience at this occupation with any employer *4 1/2 yrs.*  
 21. (a) Did your employer promise definitely to give you employment on discharge? *YES* (b) Did your employer refuse to promise you employment on discharge? *NO* (c) Do you wish to return to your former employment? *YES*

IF YOU WERE WORKING ON YOUR OWN UP TO THE TIME OF ENLISTMENT, THAT IS TO SAY, OPERATING A FARM, A STORE, AN AGENCY, OR IN PROFESSIONAL PRACTICE, OR AS A PARTNER IN ANY SUCH LINE, PLEASE ANSWER QUESTIONS 22 AND 23  
 22. (a) State nature of business, or professional practice..... (b) Where was it located?.....  
 23. (a) Number of years engaged in this business..... (b) Have you made, or will you make plans to return to the same or a similar business on discharge?.....

## Section F—PARTICULARS OF FARMING EXPERIENCE

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

## Section G—MISCELLANEOUS

26. Have you made any arrangements other than indicated above, for re-establishment in civil life after discharge? *NO*  
 27. If so, state nature of your plans (for example, do you plan to return to school, or have you been assured of a job, etc.)  
 28. State any employment preference or ambition you may have, other than indicated elsewhere in this form. *WISH TO JOIN PERMANENT NAVAL SERVICE*

DATE *4 JUNE* .1941SIGNATURE *Alfred Edward Whitney*

Copy To  
VWD  
ES

JUN 30 1941

## **GUNNERY HISTORY SHEET**

To be attached to the rating's Service Certificate until final discharge from the Service, when this History Sheet is to be given to the man, together with his Service Certificate.

Name..... WHITNEY F.H.E......  
(Surname in BLOCK LETTERS)

Official No. VI-14672

Port Division.....

RECORD OF GUNNERY STATIONS IN SHIPS AT SEA

To be filled in, in H. M. Ships at sea, when duties are performed for not less than six months.

Where a rating is found unsuited for any particular Gunnery duty, a notation to that effect is to be made in RED. Should any man be subject to severe seasickness, and therefore unsuitable for employment in ships smaller than cruisers, this fact is to be reported to the Commodore of the man's Depot, and a notation made on Page 1.

## RECORD OF EXAMINATIONS IN GUNNERY

To be filled up on qualification in Gunnery for Able Seaman and on completion of every qualifying or re-qualifying course, for confirmed or acting Gunnery rating carried out in a Gunnery School or in H. M. Ships at sea.

**Failures to be filled in, in RED.**

## RECORD OF TEST FIRINGS

To be filled in for Test Firings *only* carried out in Gunnery Schools and H. M. Ships at sea with any gun 3-inch and above.

## LEWIS GUN, RIFLE AND PISTOL PRACTICES

To be filled in immediately on completion of Course.

## RECORD OF VISION TESTS

To be filled in by Medical Officer after each Test.

**NOTE:**—Date of issue of astigmatic lens is to be noted in this space.

**RECOMMENDATIONS FOR GUNNERY RATING AND SPECIAL QUALIFICATIONS NOT PROVIDED FOR  
ON OTHER PAGES**

To be filled in as soon as a man is recommended. Recommendations for qualified men are to be forwarded subsequently on Form S1303 in accordance with the instructions on that form. Column 1 is to show the same date of recommendation as that on Form S1303. Column 4 is to state the rating for which recommended, using the suffix (N.Q.) to distinguish a man not yet qualified by rating or experience, and suffix (H) for a man highly recommended (whether qualified or not).

**VOCATIONAL TRAINING CERTIFICATE**

To be filled in on completion of a Vocational Training Course, other than a Correspondence Course.  
(Vocational Training is Optional.)

VOCATION.....

WE CERTIFY THAT (NAME).....

RESIDENCE.....

has satisfied us that he possesses a†.....

knowledge of the vocation mentioned, and we consider that §.....

Examiners:—.....

Business and Business Address:.....

Date of Examination:.....

Signed:..... President:.....

..Vocational Training  
Committee.

<sup>†</sup> Hero insert qualification. <sup>‡</sup> Consideration of a new.

TO BE FILLED IN ONLY ON FINAL DISCHARGE

His character during service was\*

His general efficiency in carrying out his duties was\*

His efficiency on discharge was assessed as\*

\* See Article 610, clauses 3 to 7, K.R. & A.I.

## Signature and Rank:

**Signature and Rank.....**

CJD/IM

NS. 113-W-900

9th December, 1941.

Dear Madam:

It is with deepest regret that I must confirm the telegram of the 9th December from the Minister of National Defence for Naval Services informing you that your son, Alfred E. Witney, Ordinary Seaman, R.C.N.V.R., O.N.V.14672, had died of injuries received on Active Service.

Your son was serving in H.M.C.S. "Windflower" which was sunk on war service on the 7th December. The exact circumstances of this unfortunate incident of war must be kept secret for reasons of security.

The body of your late son is being buried ashore and in due course the location of the grave will be communicated to you.

I wish to express the sincere sympathy of the Chief of the Naval Staff, Officers and men of the Royal Canadian Navy in your bereavement.

Yours sincerely,

J. O. Cossette,  
Naval Secretary.

Mrs. Florence Witney,  
4852 Inverness Street,  
VANCOUVER, B.C.



# The Prudential

INSURANCE COMPANY OF AMERICA

HOME OFFICE: NEWARK, N.J.

ALBERT F. JAQUES, SECOND VICE PRESIDENT  
WILLIAM A. DENNIS, CHIEF CLAIM ADJUSTER  
RALPH T. HELLER, SUPERVISOR  
ORDINARY CLAIM DEPARTMENT  
WALTER R. DUNN, MANAGER  
ASSISTANT MANAGERS  
CHESTER A. VAN NOSTRAND, MARTIN W. BENNETT  
DANIEL A. McCABE

IN RE Pol. M-6410885,  
Alfred E. Witney,

January 13, 1942. *31*

The Naval Secretary,  
Royal Canadian Navy,  
Ottawa, Canada.

P008663

DEPT. OF  
NATIONAL DEFENCE

JAN 15 1942

NO 113-W-900  
CANADA

Dear Sir:

Will your department furnish this Company with an official transcript from the death records of this insured and also advise us whether or not he made a will when he entered the service. This information is needed so that we may make payment of the above numbered policy to Florence Witney, mother and beneficiary of record of 4852 Inverness Street, Vancouver, B. C.

The evidence of death submitted consists of a newspaper clipping which reads as follows:

"Ottawa--December 10: Hon. Angus Macdonald, Navy Minister, announced today that HMCS Windflower a corvette had been sunk in collision and 23 members of her crew are missing and considered lost at sea. Mr. Macdonald said the vessel was lost while on convoy duty." The Minister issued the following statement: "The Minister for Naval services regrets to announce that HMCS Windflower, a corvette, has been sunk in collision while on convoy duty. Twenty-three members of her crew are missing and must be considered lost at sea. The next of kin have been informed".

Yours truly,

*WR Dunn*  
WR

Manager.  
Ordinary Claim Department.

RH:AGL

LA/RK

N.S. 113-W-900

- NAVAL SERVICE -

32

January 21, 1942.

THIS IS TO CERTIFY that according to official information Alfred Edward Witney, Ordinary Seaman, Official Number V-11672, Royal Canadian Naval Volunteer Reserve, died of injuries received on Active Service. He was serving in H.M.C.S. "WINDFLOWER" which was sunk on war service on the 7th of December, 1941. He was buried at St. John's Nfld., on the 10th of December, 1941.

  
(J.O. Gossette,)  
NAVAL SECRETARY.

pm



Department of National Defence

Naval Service

Ottawa, Canada.

IN REPLY PLEASE QUOTE

NO. N.S. 113-W-900

64

Dec. 12, 1941.

P182174

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</u>	<u>RANK/ RATING</u>	<u>PLACE &amp; DATE OF DEATH</u>	<u>NO.</u>	<u>NEXT OF KIN</u>
WITNEY, Alfred Edward	Ord. Snn. V 14672 R.C.N.V.R.	Died of injuries received Mother: Mrs. Florence on Active Service. He was Serving in H.M.C.S. "Windflower" which was sink on war service on the 7th December, 1941.		Witney, 4852 Inverness Street, Vancouver, B.C.

WILL: No record



Yours truly,  
*J. O. Gossette*  
(J. O. Gossette)  
NAVAL SECRETARY.

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

pm

**MEMORANDUM FOR**

P. 64

Mrs. Florence Witney,  
4852 Inverness Street,  
Vancouver, B.C.

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.Q. N. S. 113-W-900 FD. 420.

DEPARTMENT OF NATIONAL DEFENCE  
OTTAWA, ONT.

December 24, 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

WITNEY, Alfred Edward, Ord. Smn., No. V.14672,

R.C.N.V.R., H.M.A.C.S. "Windflower".....

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.

(H.R. Wade) Lieut.Cdr. RCNVR,  
for (L.M. Firth) Major,  
Administrator of Estates.

M.F.W. 77  
5M-9-41 (1669)  
H.Q. 1772-39-972



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 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.....	none		
3	Father of the Deceased.....	Alfred Edward Witney Died Aug 15 1937		
4	Mother of the Deceased.....	Florence Witney 64 4852 Emerson Cancer		
5	Brothers of the Deceased	Full Blood	none	
		Half Blood	none	
6	Sisters of the Deceased	Full Blood	none	
		Half Blood	none	
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	
	none	none		

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?	alfred Edward Whitney
11	Give the month and year of his birth.	Aug 8. 1912
12	Where and when were his parents married?	Feb 26. 1912. Paignton
13	If deceased was married, state place and date of marriage.	Devonshire England
14	Did he leave a Will? If so, a copy should be attached hereto.	none
15	Did he leave a bank account? If so, give full particulars.	24 Dollars Royal Bank ✓ Twenty four Released by Pk to mother.
16	Is there any other estate which will necessitate application being made for Probate of the Will or Letters of Administration of the estate?	
17	State your own postal address in full.	4852 Inverness Street 6K Vancouver B.C.

PARTICULARS OF DOMICILE

18	Where was deceased born?	Vancouver B.C.
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.	Twenty years
20	What was the nature of his employment?	Butcher
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?	no

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.	no
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

\* Mother of the deceased.

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

Mrs Florence Whitney

{Signature of Informant}

4852 Inverness Street

## CERTIFICATE

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

\*See above Florence Whitney { 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.

Dated at Vancouver this 29 day of December 1941

Signature of Clergyman, Priest, Magistrate, Commissioner or Notary Public } George Gilbert Haché Qualification. Minister United Church  
Address 1071 E 33 ave Vancouver BC of Canada

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

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

4  
NAVY

Deceased member's  
NAME **Alfred Edward** WITHEY  
(CHRISTIAN NAMES) (SURNAME)  
Payee: **Mrs. Florence WITHEY**,  
ADDRESS **4852 Innes St.,**  
**Vancouver, B.C.**

REGISTER NO.

FILE NO.

DATE

SERVICE NO.

FINAL RANK OR RATING

DATE OF DISCHARGE

1127  
NS.V-14672  
24 Feb 45.  
V-14672  
Ord. Snn.  
7 Dec/41

DATE OF TERMINATION OF OVERSEAS SERVICE

7 Dec/41

A. TOTAL QUALIFYING SERVICE

NO. OF DAYS **221** EQUAL TO **7** COMPLETE PERIODS AT \$7.50  
30

\$ **52.50**

B. QUALIFYING OVERSEAS SERVICE

NO. OF DAYS **2** LESS **11** INELIGIBLE DAYS, EQUAL TO **Nil** DAYS @ 25c. PER DAY  
SEE PAR. 2 OVERLEAF FOR EXPLANATION

**Nil**

**SUB TOTAL**

C. SUPPLEMENT FOR OVERSEAS SERVICE

DAILY RATES AT DISCHARGE

PAY	\$
SUBSISTENCE OR LODGING AND PROVISION ALLOWANCE	\$
ADDITIONAL PAY	\$
	\$
	\$
DEPENDENTS' ALLOWANCE 1/30 OF \$	\$
TOTAL	\$
NO. OF DAYS	X\$

183

**Nil**

D. WAR SERVICE GRATUITY

E. DEDUCTIONS      OVERPAYMENT OF      PAY AND ALLOWANCES \$  
DEPENDENTS' ALLOWANCE  
AND ASSIGNED PAY \$  
OTHER DEDUCTIONS      \$ **Nil**

**52.50**

F. AMOUNT PAYABLE

(THIS AMOUNT IS PAYABLE IN      MONTHLY INSTALMENTS OF \$      EACH)

**52.50**

THE WAR SERVICE GRANTS ACT, 1944, PROVIDES FOR YOUR RE-ESTABLISHMENT CREDIT IN THE  
AMOUNT SHOWN IN SUB TOTAL OF A. & B. THIS CREDIT IS AVAILABLE TO YOU IN CERTAIN  
CIRCUMSTANCES. INQUIRIES IN THIS CONNECTION SHOULD BE DIRECTED TO THE  
DEPARTMENT OF VETERANS AFFAIRS.

SEE REVERSE SIDE  
FOR EXPLANATION  
OF ITEMS A, B & C

G. MONTHLY INSTALMENT NOT TO EXCEED      DAILY RATE OF PAY  
AND ALLOWANCES \$

X30      \$

INSTALM. PAYABLE	1	2	3	4	5	6	7	8	9
AMOUNT	<b>52.50</b>								
CHEQUE NO.	<b>111847</b>								
DATE	<b>10/3/45</b>								

INSTALM. PAYABLE	10	11	12	13	14	15	16	17	18
AMOUNT									
CHEQUE NO.									
DATE									

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 **SJD** CHECKED BY **PKB**

TREASURY  
CHECKED BY **PKB** DATE **10/3/45**

FOR DIR. NAVAL PAY. Meeting.

SERVICE REPRESENTATIVE

SEW

# STATEMENT OF ACCOUNT

45

## AVALON for

True extract from the ledger of H.M.C.S. "WINDFLOWER" ending 31 st December 1941.

List 12-2-No. 125 (Name) WITNEY, Alfred E. Rank Rating 3rd Snn No. V-14672

When entered 5 th December Date of appearance 6 Dec. Whither discharged D.D. 7 th December A.M 1941  
from "STADACONA"

CREDIT from former account Paid in "STADACONA" to date 14 November					\$	c.
Pay as Ord Snn	from 15 Nov. to 31 Dec. (47 days at \$1.50 a day)				70	50
(Rank Rating)						
" Dep. Alce. "	15 Nov. " 31 Dec. (47 " .65 " )				30	55
" H.L.M. "	6 Dec. " 6 Dec. (1 " .10 " )					10
"	" " ( " " " )					
"	" " ( " " " )					
Kit Upkeep Allowance						
OTHER CREDITS:						
					Total credits	101.15

DEBT from former account "HMCS "STADACONA"						6.47
PAYMENTS:—	1st	2nd	3rd	4th	5th	
	\$	c.	\$	c.	\$	c.
1st month						Total
2nd month						Total
3rd month						Total
Allotment \$43.00 charged for month of December						43.00
Pension deduction (Officers) charged to						of
Hospital stoppages						
Mulcts						
OTHER CHARGES: HMCS "AVALON" Advance of Pay (Casual Payment						15.00
G.M. overpaid period 7 Dec. 31 Dec. 26 days @ .06						1.56
						Total debits
						66.03
Ledgers	R. ....	P. ....				Balance Cr. <del>XXXXXX</del>
	F. ....					35.12
						(Balance Dr. to be shown in red)

Number of days actually victualled during period mentioned above 1.

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

Date 26 th January 1942

A. Barron

ay Sub Lieut RCNVR for ACCOUNTANT OFFICER

C.N.S. 2426

25M-10-40 (7514)  
N.S. 815-9-2426