

A974  
HILLIER  
GEORGE

ABRAH

20 Sep 43 Died in service

DEPARTMENT OF VETERANS AFFAIRS

# AWARDS

**NAVY**

D.D.  
WAR SERVICE RECORDS

HILLIER	George Abraham	A-974	A.B.	FILE No.
SURNAME (IN BLOCK LETTERS)	CHRISTIAN NAMES	REG. No.	RANK ON DISCHARGE	C.A.S.F. UNIT

WAR SERVICE

BADGE

(CLASS) No. DATE DESPATCHED

ADDRESS:

02-97625 M  
  
 P

CAMPAIGN MEDALS	REGISTRATION NUMBER AN DATE DESPATCHED
1939-45 Star	<p>176</p> <p>sent to wrong widow            letter sent to her then            not a. 23/10/51</p> <p><b>CANCELLED</b> 354223/10/51            MEDALS RETD UNDELIVERED RETD TO STOCK            10-11-51</p>
Atlantic Star	
Africa Star	
C.V.S.M. & Clasp	
War Medal	
	(THE REVERSE TO BE USED FOR ESTATE PURPOSES)

RCNR Jul. 41 "ST. CROIX"

MEDALS AND MEMORIALS—DECEASED PERSONNEL

REGISTRATION No. DATE OF DESPATCH

(1) MEDALS  
PERSON  
ENTITLED TO Mrs. Florence Hillier-----Widow

ADDRESS: 20 Gray St.,  
HALIFAX, N.S.

**MEMORIAL BAR**  
DATE DESP. *Cancelled*  
REGN. NO. *1838*  
*never sent out*

Medals to:

(2) ~~MEMORIAL CROSS~~ Mrs. Bernadette Hillier (Widow)  
~~WIDOW~~ 44 Buckingham St.,  
Halifax, N.S. (Separated)

ADDRESS: *Hold until affid for.*  
*SEP. 11 '51*

(3) MEMORIAL CROSS  
MOTHER

ADDRESS:

*Medals returned  
present address unknown*  
(3) *Hold pending further  
information*

# OCCUPATIONAL HISTORY FORM

P 35893  
123-H-82

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

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

## Section A—GENERAL INFORMATION

1. (a) Print name in full..... **George Abram HILLIER**..... (b) Reg'l. No. **A.974**
2. (a) Arm of service..... **NAVY**..... (b) Unit..... **R.C.N.R. (Temp.)**..... (c) Rank..... **A.B.**
3. (a) Date of birth..... **20 Nov. 1905**..... (b) Have you any dependents?..... **YES**..... (c) Place of residence at time of enlistment..... **Halifax, N.S.**
4. (a) Place of enlistment..... **Halifax, N.S.**..... (b) Date of enlistment..... **28 Oct. 1939**

PLEASE LEAVE BLANK

## Section B—EDUCATION AND TRAINING

5. (a) State age on finally leaving school..... **13**..... (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.)..... **6 years Public School.**
7. If you attended a university, give name of university and standing or degree secured.....
8. (a) Did you ever enter upon a trade apprenticeship?..... **NO**..... (b) If so, for what occupation?..... (c) Did you finish it?..... (d) If you did not finish it, how long did you serve at it?.....
9. (a) What languages do you speak fluently?..... **ENGLISH**..... (b) What languages do you read well?..... **ENGLISH**

## Section C—EMPLOYMENT CONDITION AT TIME OF ENLISTMENT

10. (a) State whether you were WORKING or NOT WORKING at time of enlistment. (Enter here only "Working" or "Not Working", as case may be; particulars are asked for below)..... **WORKING.**..... (b) At time of enlistment of what trade union or professional society were you a member?..... **NO**

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

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

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

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

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

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

18. Name of employer..... **Commercial Cable Co. S.S. John McKay**..... Address..... **Halifax, N.S. 937 1/2 Barrington St.**
19. Nature of employer's business (for instance, "farmer", or "building contractor", or "boot factory", or "iron foundry", or "retail store", etc.)..... **Laying ocean cables.**
20. (a) Your specific occupation..... **SEAMAN.**..... (b) Number of years' experience at this occupation with any employer..... **12 yrs.**
21. (a) Did your employer promise definitely to give you employment on discharge?..... **NO**..... (b) Did your employer refuse to promise you employment on discharge?..... **NO**..... (c) Do you wish to return to your former employment?..... **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?..... (c) If so, in what kind of farming?.....
25. (a) Were you born on a farm?..... **NO**..... (b) How many years' actual farming experience have you had?..... (c) In what provinces did you have experience?.....

## 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..... **|||||**

DATE..... **1st. April,**..... 194**1.**

SIGNATURE..... *George Hillier*



Copies to:  
V. W. D. } 7 April,  
E. S. } 1941



VERIFICATION FORM

ARS, DEFENCE MEDAL, WAR MEDAL, C.V.S.M. and CLASP.  
 NAVAL GENERAL SERVICE MEDAL (1915).

RANK/RATING *A.B.* ..... OFF. NO. *7-974* ..... ADDRESS .....

AREA	QUALIFYING PERIODS IN DAYS						STARS MEDALS	✓ 1 2	ELIGIBLE FOR AWARDS OF
	FROM	TO	1939-45	ATLANTIC	DEFENCE	CLASP C.V.S.M.			
							1939-45	1	<i>star</i>
<i>at.</i>							ATLANTIC	1	<i>star</i>
<i>t</i>							FRANCE G.		
<i>t Africa at.</i>							AFRICA	1	<i>star</i>
							PACIFIC		
							BURMA		
							ITALY		
							DEFENCE		
							C.V.S.M.	2	<i>x clasp</i>
							" CLASP		
							WAR 1945	1	<i>medal</i>
							WAR 1915		

VERIFIED BY *[Signature]* .....

VERIFIED BY ..... DIR. OF PERSONNEL RECORDS.

Card OK

121NR/11

157

*[Handwritten signature]*

N. R. 5  
1M-9-39  
N.S. 815-12-5

QH



CANADA

DEFENCE

DEC 15 1939

N.S. 123-A-82  
CANADA

# ATTESTATION FORM

FOR MEN OF THE ROYAL CANADIAN NAVAL RESERVE

31220

Surname HILLIER <sup>no</sup> Official No. 1974

Christian Names George Abraham Married, Single or Widower Married

Permanent Address	Religion
937 1/2 Barrington St., Halifax, N.S.	C. of E.

Date of Birth	Place of Birth	Name and Address of Next of Kin
20th November, 1905	Town <u>Liminine</u> County Province <u>Nfld.</u>	Mr. Llewellyn Hillier, (Father) Liminine, Nfld. <u>Liminine</u>

## PERSONAL DESCRIPTION ON ENROLMENT

Height	Chest Measurement	Hair	Eyes	Complexion	Wounds, Scars, Marks
Feet <u>5</u>	Inflated .....				
Inches <u>6</u>	Deflated <u>34</u>	<u>Brown</u>	<u>Hazel</u>	<u>Medium</u>	<u>NIL</u>
	Mean .....				

Date of Enrolment	Rating Enrolled for	Trade or Calling and in whose Employ
28th October, 1939	<u>A.B. (T)</u>	<u>Seaman "John W. MacKay"</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 member of the Royal Canadian Naval Reserve, and that I accept and agree to abide by the rules of the said Force.
- (3) (a) That it is my intention to follow the sea for a period of at least five years from this date.
- (b) ~~That it is my intention to follow the calling of a Fireman, either at sea or on shore, for a period of five years from this date.~~
- (c) ~~That it is my intention to follow the sea in an Engine room capacity for a period of five years from this date.~~

Note.—Candidates for enrolment as *Seaman* are to cross out clauses (b) and (c) above.  
 Candidates for enrolment as *Stoker* are to cross out clauses (a) and (c) above.  
 Candidates for enrolment as *E.R.A.* are to cross out clauses (a), (b) and (c) above.  
 Candidates for enrolment as *Engineman* are to cross out clauses (a) and (b) above.

Personal Records  
Division  
DATE 18-12-39 C.M.

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

\*Cross out clause not applicable

(5) That (a)\* I have never served, and am not serving in any Naval, Military, Reserve or Territorial Force.

(b)\* I served in NIL for the period shown.

Served in	Rank	From	To
	NIL		

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

(7) On being enrolled as a member of the Royal Canadian Naval Reserve, I undertake and bind myself:—

AND/OR DURATION OF HOSTILITIES.

- (a) To serve from the date thereof for five 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 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 Registrar 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.

(8) I am willing to be vaccinated or re-vaccinated and inoculated as considered necessary by the appropriate authorities.

Dated this 28th day of October, 1939.

Geo Hillier  
(Signature of Applicant)

(C)

OATH OF ALLEGIANCE

I, George Abraham HILLIER do sincerely promise and swear (or solemnly declare) that I will be faithful and bear true allegiance to His Britannic Majesty.

Signature of Applicant Geo Hillier

Witness J. A. H. Duggan

Date 28th October, 1939 Rank Payr. Lieutenant R.C.N.R.

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

(D)

CERTIFICATE OF ATTESTING OFFICIAL

I hereby certify that all the foregoing statements were made by the man above named, in my presence, and that he has made and signed the above declaration and has taken the oath of allegiance in my presence this 28th day of October, 1939.

J. A. H. Duggan  
(Signature of Officer and rank)

Payr. Lieutenant R.C.N.R.

NOTE.—When this form has been completed it is to be forwarded to Naval Service Headquarters, Ottawa, for custody.

medically fit  
Surgeon Medical

APPROVED:—

[Signature]  
Commander R. C. N.



Maplewood Drive,  
Arundale P.O.

Halifax, NS.

Jan 26th 1945

Director of Estates,  
Dept of Nat Defence,

Dear Sir,

In reply



letter of 4th inst, regret delay in replying to same, however, the said delay was caused by illness and other circumstances over which I had no control.

I am sorry I cannot give you all the information you desire, not having it myself; however, I can tell you that the Christian name of the deceased naval rating Geo. A. Hillier is - Bernadette. I am not able to state definitely that she has re-married, would suggest that enquiries at Springfield, Halifax Co, may result in your gaining information.

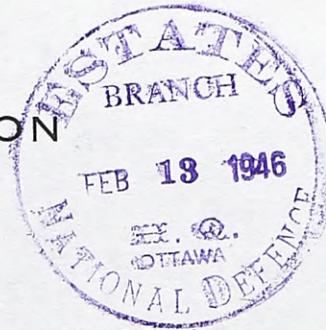
Sincerely, Mrs Anne B Webster

DEPARTMENT OF  
LABOUR



CANADA

NATIONAL REGISTRATION



No. 8 Temporary Building,  
Ottawa, February 9, 1946.

Director of Estates,  
Estates Branch,  
Department of National Defence,  
Naval Centre,  
Ottawa, Ontario.

Re: HILLIER George Abraham, A.S. (Deceased)  
No. A-974 R.C.N.R.  
Your File H.Q.N.S.123-H-82  
FD.286

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With the further information supplied in your letter of February 5th we have been able to locate a registration in the name of "Mrs. Bernadette Darlene Hillier", born July 29th, 1911, who when she registered on August 19th, 1940 lived at 208 Agricola Street, Halifax, N.S. She stated at that time that she was married but separated. Her employer then was W.A. Hart, Green Lantern Restaurant, Bloomfield Terrace, presumably in Halifax. She has never reported a change of address to this office.

J. K. Houston,  
Chief Registrar for Canada.



Department of National Defence  
Naval Service

Ottawa, Canada.

IN REPLY PLEASE QUOTE  
No. N.S. 123-H-82.....  
PERS. (N)

DEC 29 1943

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 NO.</u>	<u>PLACE, DATE &amp; CAUSE of DEATH</u>	<u>NEXT OF KIN</u>
HILLIER, George Abraham Able Seaman, O.N. A-974, R. C. N. R.	Missing, presumed dead to date 20 September, 1943. He was serving in H.M.C.S. "ST.CROIX", which was lost while serving on convoy duty in the Atlantic, due to enemy action.	Father: Mr. Llewellyn Hillier, LAMALIN, Nfld.

ALLOTMENTS IN FORCE

<u>IN FAVOUR OF</u>	<u>INITIALS</u>	<u>AMOUNT</u>
Mrs. Annie Webster (guardian) Maplewood Dr. Armdale, P.O. Halifax, N.S.		D.A. \$42.60 A.P. \$30.
This allot. stopped Sept. 30, 1943	J.M.	
WILL: No Record		JmJ 19/11/43

Yours truly,

*H. J. Munnell*  
for  
SECRETARY, NAVAL BOARD.



Administrator of Estates,  
Estates Branch,  
Department of National Defence,  
O T T A W A.

198734

#1145

123-7-82

allotted 19-11-43

40

# 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 HILLIER? George. A. Rating A.B.

Official No. A-974 H.M.C.S. ST. CROIX List 5/2-24

Who\* D. D. on the 20th September 43

Net sum due on ledger on account of Wages.....	\$	cts.
Proceeds of sale of Effects charged against Wages, brought from the other side		
CASH—	\$	cts.
Proceeds of sale of Effects, paid for in Cash, brought from the other side.....		
Found amongst Effects.....		
Debts collected \$.....		
Cash debited in the Accountant Officer's Cash Acct.....		
If in debt in ledger, amount to be stated (in red ink).....		
Rate of allotment (in words) <u>(AP) Thirty dollars</u> charged to <u>30 Sep '43</u>		
Name of ship from which transferred <u>St. Croix</u>		
Total†.....	<u>60.</u>	<u>85</u>
		<u>Creditor.</u>

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 HMCS "AVALON" for St. Croix amounting to a net balance†..... Creditor. of Sixty dollars Eighty five cents.

Dated on board H.M.C.S. AVALON at St. John's, Newfoundland, this 26th day of October 1943

Approved [Signature] Accountant Officer  
A/Pay. Lieut. Cmdr. R.C.N.V.R.  
[Signature] Initials of the Assistant Accountant Officer  
[Signature] Commanding Officer.  
COMMANDER, R.C.N. (Temp)

For Use at Headquarters. \$.....cts.....credited on Inspector's certificate

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

Signature.....

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

\*State whether discharged on shore, D.D. or Run. †State whether "debtor" or "creditor".  
‡Subscription for Charitable or other purposes should not be shown hereon, but on a Remittance List, and dealt with as laid down in the King's Regulations.



LA/HS

N.S. A-974, PERS. (N)

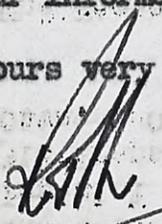
2nd October, 1944.

Dear Mrs. Hillier:

Your letter of the 26th of September, 1944, addressed to the Honourable, the Minister of National Defence for Naval Services, has been referred to me for attention.

A Certificate of Death respecting the late George Abraham Hillier, Able Seaman, Official Number A-974, Royal Canadian Naval Reserve, which it is presumed you require, is attached for your information.

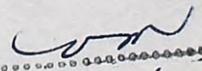
Yours very truly,

  
SECRETARY, NAVAL BOARD.

Mrs. Bernadette Hillier,  
140 Shirley Street,  
Halifax, N.S.

Despatched by  
Sec. N. B.

Date 3/10/44  
Time 1800

  
Enc

*AMH  
this (W)  
note*

V-4427	V-15285
V-51452	V-3417
V-19206	V-51108
V-43309	V-27849
V-56590	V-2299
V-10506	V-34242
V-11244	V-44790
V-53512	V-18039
V-61903	V-399
V-49761	A-4506
V-16586	V-64486
V-23508	N-4649
V-39924	V-57455
V-59892	N-4122
A-5954	N-4323
O-22420	V-5995
O-23950	O-62255
V-30201	V-13701
V-22262	O-65010
V-38722	V-48962
V-31768	V-17305
V-55196	V-41902
V-905	V-63143
V-65619	O-70570
V-55803	V-50046
N-4472	V-35344
V-50475	V-5794
V-23128	O-71320
V-65496	V-17781
V-17703	V-14540
O-35660	V-516
V-54304	V-25850
V-3538	V-3386
V-43818	V-688
V-52497	V-50598
V-64138	O-76380
V-25279	V-5911
V-50961	V-37893
V-57850	N-21989
V-51441	V-56565
V-65120	V-599
V-62261	N-21498
V-49646	V-8662
V-35602	V-50658
O-47000	V-51989
V-44690	V-6388
V-67335	
V-54554	

*H.B. McNeil*

Encls. for  
SECRETARY, NAVAL BOARD.

The Secretary,  
Canadian Pension Commission,  
228 Daly Building,  
Ottawa, Ont.

The Dominion Statistician,  
Bureau of Statistics,  
Ottawa, Ont.

The Secretary,  
Imperial War Graves Commission,  
312 Transportation Bldg.,  
Ottawa, Ont.

The Director of Records,  
Daly Building,  
Ottawa, Ont.

140 Shirley St  
Halifax, N. S.  
September 26<sup>th</sup> 1944

The Minister of Naval Affairs,  
Ottawa, Ont.

155935 A-974

Dear Sir:-

On seeking information from the Public Relation Office of this City, concerning the official clearance papers re the late George A. Hillier, A.B. who lost his life on the H.M.C.S. St. Croix, I was told to write to you as they were unable to give me any information here whatsoever concerning same.

My husband and I have been separated for the past seven years and during that time I have been supporting myself alone, having received no help from him whatever. I am given to understand that upon joining the Services he gave his father as next of kin.

I am planning on being married again, and as I am unable to do so until official clearance papers have been sent through, I am wondering if such papers have gone through and to whom were they sent. Were they by any chance sent to his father?

Would you be so kind to kindly look into this matter for me, advising me of same, and if such papers have yet to be finalized, would appreciate you notifying me when they are done. If they have been finalized, would you kindly send me a copy of same.

Thanking you for a word at your earliest convenience.

Yours very truly,  
(Mrs) Bernadette Hillier





47

DEC 29 1943

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 NO.</u>	<u>PLACE, DATE &amp; CAUSE of DEATH</u>	<u>NEXT OF KIN</u>
HILLIER, George Abraham Able Seaman, O.N. A-974, R. C. N. R.	Missing, presumed dead to date 20 September, 1943. He was serving in H.M.C.S. "ST. CROIX", which was lost while serving on convoy duty in the Atlantic, due to enemy action.	Father: Mr. Llewellyn Hillier, LAMBTON, Ont.

ALLOTMENTS IN FORCE

<u>IN FAVOUR OF</u>	<u>INITIALS</u>	<u>AMOUNT</u>
Mrs. Annie Stebster (guardian) Maplewood Dr. Arundale, P.O. Halifax, N.S.		D.A. \$42.60 A.P. \$30.
This allot. stopped Sept 30, 1943	JM	

JM  
14/12/43

WILL: No Record

Yours truly,

*H. H. Money*for  
SECRETARY, NAVAL BOARD.*(Signature)*

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

42

- NAVAL SERVICE -

N.S.12.3-H-82.(PERS.(N))

MEMORANDUM TO D.N.I.  
&  
V.C.N.S.

This is to certify that -

HILLIER, George Abraham, A.B., A-974, R.C.N.R.

was serving in H.M.C.S. "ST. CROIX"..... as at 20th.  
September, 1943.

.....  
Chief of Naval Personnel

This rating was reported missing when H.M.C.S. "ST. CROIX" and/or  
H.M.S. "ITCHEN" was lost on the high seas due to enemy action.

The above mentioned rating is, therefore,

Missing, Presumed Dead.  
.....

Concurred:-

*D. Jackson*  
.....  
Dir. Naval Intelligence.

*[Signature]*  
.....  
Commander, R.C.N.,  
Director of Operations Division.

*[Signature]*  
.....  
Approved for Staff,

O t t a w a, 24 December, 1943.

N.C.R. ✓  
P.A.

LA/CM

27

123-H-82. PERS.(N)

15 October, 1943.

Dear Sir:

The undermentioned Canadian Naval Casualty is forwarded to you for transmission to the Inspector of Income Tax concerned:

HILLIER

George Abraham

Name .....  
(Surname) Able Seaman (Christian Names)

Rank/Rating A-974: Royal Canadian Naval Reserve

Official No. ....  
HMCS "ST. CROIX" "Missing" on war service after sinking of  
Nature of Casualty Official presumption of death with date  
will in all probability be made 3 months

Date of Casualty from date of sinking of this ship, .....  
937 1/2 Barrington Street,

Address at time of Enlistment .....  
HALIFAX, N.S.

.....  
Single

Marital Status at time of Enlistment .....  
Seaman

Occupation .....  
Father: Mr. Llewellyn Hillier

Name & Address of Next of Kin .....  
LAMALIN, Newfoundland.

Yours truly,

for H.B. Money  
SECRETARY, NAVAL BOARD.

E.M.C.

The Deputy Minister (Taxation),  
Department of National Revenue,  
Ottawa, Ont.

Pa

QH



# ATTESTATION FORM

FOR MEN OF THE ROYAL CANADIAN NAVAL RESERVE

Surname HILLIER Official No. \_\_\_\_\_

Christian Names George Abraham Married, Single or Widower Married

Permanent Address	Religion
<u>937½ Barrington St., Halifax, N.S.</u>	<u>C. of E.</u>

Date of Birth	Place of Birth	Name and Address of Next of Kin
<u>20th November, 1905</u>	Town <u>Liminine</u> County _____ Province <u>Nfld.</u>	<u>Mr. Llewellyn Hillier, (Father)</u> <u>Liminine, Nfld.</u>

## PERSONAL DESCRIPTION ON ENROLMENT

Height	Chest Measurement	Hair	Eyes	Complexion	Wounds, Scars, Marks
Feet <u>5</u>	Inflated _____	<u>Brown</u>	<u>Hazel</u>	<u>Medium</u>	<u>NIL</u>
Inches <u>6</u>	Deflated <u>34</u>				
Mean _____	Mean _____				

Date of Enrolment	Rating Enrolled for	Trade or Calling and in whose Employ
<u>28th October, 1939</u>	<u>A.B. (T)</u>	<u>Seaman "John W. MacKay "</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 member of the Royal Canadian Naval Reserve, and that I accept and agree to abide by the rules of the said Force.
- (3) (a) That it is my intention to follow the sea for a period of at least five years from this date.
- (b) That it is my intention to follow the calling of a Fireman, either at sea or on shore, for a period of five years from this date.
- (c) That it is my intention to follow the sea in an Engine-room capacity for a period of five years from this date.

**Note.**—Candidates for enrolment as *Seaman* are to cross out clauses (b) and (c) above.

Candidates for enrolment as *Stoker* are to cross out clauses (a) and (c) above.

Candidates for enrolment as *E.R.A.* are to cross out clauses (a), (b) and (c) above.

Candidates for enrolment as *Engineman* are to cross out clauses (a) and (b) above.

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

\*Cross out clause not applicable

(5) That (a)\* I have never served, and am not serving in any Naval, Military, Reserve or Territorial Force.

(b)\* I served in NIL for the ~~period shown.~~

Served in	Rank	From	To
	NIL		

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

(7) On being enrolled as a member of the Royal Canadian Naval Reserve, I undertake and bind myself:—

**AND/OR DURATION OF HOSTILITIES.**

- (a) To serve from the date thereof for five 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 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 Registrar 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.

(8) I am willing to be vaccinated or re-vaccinated and inoculated as considered necessary by the appropriate authorities.

Dated this 28th day of October, 1939.

*Geo Hillier*

(Signature of Applicant)

(C)

**OATH OF ALLEGIANCE**

I, George Abraham HILLIER do sincerely promise and swear (or solemnly declare) that I will be faithful and bear true allegiance to His Britannic Majesty.

Signature of Applicant

*Geo Hillier*  
*Paul H. [unclear]*

Witness

Date 28th October, 1939 Rank Payr. Lieutenant R.C.N.R.

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

(D)

**CERTIFICATE OF ATTESTING OFFICIAL**

I hereby certify that all the foregoing statements were made by the man above named, in my presence, and that he has made and signed the above declaration and has taken the oath of allegiance in my presence this 28th day of October, 1939.

(Signature of Officer and rank)

*Paul H. [unclear]*  
Payr. Lieutenant R.C.N.R.

NOTE.—When this form has been completed it is to be forwarded to Naval Service Headquarters, Ottawa, for custody.

*medically fit.*  
*[Signature]*  
*Surgeon Lt Col VR*

**APPROVED:**  
*[Signature]*  
Commander R. C. N.

of La. led. ~~30206~~  
37889

R. C. N. R.

# SERVICE CERTIFICATE

N. V. No. 17  
3M-9-37  
N.S. 815-11-17

Duration OF Hostilities

29

Name in full George Abraham HILLIER Company

## ROYAL CANADIAN NAVAL ~~VOLUNTEER~~ RESERVE

Training Headquarters

Official Number A-974

Date of Birth 20th November 1905

Place of Birth Luminine, Newfoundland

Usual Place of Residence Pointe Claire Guards, Luminine, Nfld.

Trade brought up to Saman "John H. MacKay" O.H.F.

Name and Address of next of Kin Father, Lewellyn Luminine, Nfld.

Religious Denomination Church of England 30/11/42

Can Swim

### PARTICULARS OF SERVICE

DATE OF ACTUAL VOLUNTEERING	DATE OF ENROLMENT	PERIOD VOLUNTEERED FOR	RATING ON ENROLMENT	MEDALS, DECORATIONS, ETC.	
				DATE RECEIVED	NATURE OF DECORATION
<u>25th October 1939</u>		<u>Duration of Hostilities</u>	<u>A.B (1)</u>		

### PERSONAL DESCRIPTION

	HEIGHT		COMPLEXION	HAIR	EYES	MARKS, WOUNDS, SCARS
	FEET	INCHES				
On Entry						
On attaining 28 years	<u>5</u>	<u>6</u>	<u>Medium</u>	<u>Brown</u>	<u>Hazel</u>	<u>Nil</u>
Further Description if necessary						







20

27th September, 1943

Dear Mr. Hillier:

I deeply regret that I must confirm the telegram of the 27th of September, 1943, from the Minister of National Defence for Naval Services, informing you that your son, George Abraham Hillier, Able Seaman, Royal Canadian Naval Reserve, Official Number A-974, is missing on war service.

According to the report received, your son is listed as missing, due to enemy action, while serving on Convoy duty in the Atlantic. For reasons of security further details of this incident of war cannot be released at this time.

It is requested that you will regard as confidential anything beyond the fact of your son's loss on war service until such time as an official announcement is made, as this information might prove useful to the enemy.

While your son is listed as missing and virtually no hope can be held out for his having survived, Canadian Naval Authorities are unable to make an official presumption of death until a period of not less than three months has elapsed. If further information has not been received at that time, it is probable that official certification of death will then be made and you will be informed accordingly.

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

Yours sincerely,

SECRETARY, NAVAL BOARD

LETTER dispatched by  
PERSONNEL NAVAL

SEP 27 1943

Mr. Llewellyn Hillier,  
LAMALIN, Newfoundland.

*J.S. Money*  
NAVAL PERSONNEL RECORDS

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

22

29th September, 1943 .....  
(Date.)

Sir:

The following casualty has been reported -

NAME HILLIER, George Abraham RANK or RATING Able Seaman NAVAL NO. A-974, R.C.N.R.

DATE OF ENLISTMENT - 28 October, 1939

DATE OF DISCHARGE - \_\_\_\_\_

HOSPITAL - \_\_\_\_\_  
(If discharged in hospital under jurisdiction of D.F. & N.H.)

SERVICE - Canada and High Seas  
(Indicate whether in Canada only; or in Canada and the high seas or elsewhere.)

Reason for discharge and when and where any disability was incurred, or where death occurred. "Missing" on war service. This rating is listed as missing due to enemy action, while serving on Convoy duty in the Atlantic. When official presumption of death has been made, you will be notified.

(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. Llewellyn Hillier,

ADDRESS LAMALIN, Newfoundland.

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.

*H.B. Money*

for SECRETARY, NAVAL BOARD. <sup>c</sup>

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

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.)

REMARKS:

NOTES:

This form to be accompanied by documents only in cases of (a) discharge "medically unfit" (b) Death in Canada (c) Death anywhere if question of misconduct arises. Report of Board of Inquiry to be forwarded if disability or death is due to accidental injury in Canada or possible misconduct -- If Documents are not readily available this form should be sent at once with advice that documents will follow as soon as possible.

REPORT OF PARTICULARS OF PERSONNEL REPORTED  
DEAD, MISSING, PRISONER OF WAR OR INTERNEE.

23

CASUALTY NO. 34

FILE NO. NS.123-B-22 (Pers.N.)

NAVAL INFORMATION

D. N. P. A.

C.T.O. (N), (N. ALLOTS.)

C.T.O. (N) Re: Dependents' Allowance

It is notified for your information that George Abraham Hillier, Able Seaman, Official Number A-374, Royal Canadian Naval Reserve, is "missing", due to enemy action, while serving on Convoy duty in the Atlantic.

When official presumption of death with date has been given, you will be notified further.

Next of kin as recorded in this office is:

Father:

Mr. Llewellyn Hillier,  
LAWALIN, Newfoundland.

*H. B. Money*

(H. B. Money),  
Paymr. Lieut. Cdr., R.C.N.R.,  
Officer i/c, Naval Personnel Records.

Ottawa, Ont.,  
Date - 29 September, 1943.

CURRENT	
D.A.	\$ 40.00
A.P.	\$ 30.00
TOTAL	\$ 70.00
CHECKED	<i>[Signature]</i>
LEDGER	<i>[Signature]</i>

Certified that Ledger Action has been taken

*[Signature]*  
for C. T. O. (N)  
of allots (N)

44 Buckingham

Wash  
13-3-46



Dear Sir: -

I received a letter from you people two week ago. In wick I answer. But I received no reply as yet.

I am writing in case you did not get my first letter.

The letter in wick I received was about my late Hubbard. Service Estate George Adam Hillier.

No 474. R.C.N.R.

Will close hoping to have a reply at your early convenience

Mrs Bernadette Hillier  
44 Buckingham St.  
Halifax, C.O.



No 10886

# Certificate of Marriage

Date of Marriage..... *May 23, 1931*  
 Place..... *Halifax*  
 County..... *Halifax*  
 By License or Banns..... *License*

Full name of GROOM *George Abram Hillier*  
 Age..... *25 yrs*  
 Bachelor or Widower..... *Bachelor*  
 Religious Denomination..... *Church of England*  
 Occupation..... *Seaman*  
 Residence *357 Clifton St. Halifax, N.S.*  
 Where Born..... *New Brunswick*  
 Parents' Names *Llewellyn Hillier & Lucy Ann*

Full name of BRIDE *Dernadette Darline Dodsworth*  
 Age..... *19 yrs*  
 Spinster or Widow..... *Spinster*  
 Religious Denomination..... *United Church of Canada*  
 Place of Residence *45 Union St. Halifax*  
 Where Born..... *Cumberland Co., N.S.*  
 Parents' Names *William Dodsworth & Sarah Chappell*

Names of Witnesses..... *Levi C. Pike*  
*M. Martha A. Hillier*  
 Officiating Clergyman..... *J. Donaldson*  
 Denomination of Clergyman... *Church of England*

HALIFAX, N. S. *March 2, 1946*

**I Certify** that the above is a true and correct extract respecting the Marriage therein referred to, taken from the Official Record Books of Marriages for the County of *Halifax*, Province of Nova Scotia, in the custody of the Office of the Registrar-General, and registered under Provisions of the Vital Statistics Act.

*J. Donaldson*  
 Deputy Registrar-General.

*M. J.*  
 Clerk.

**DISTRIBUTION OF SERVICE ESTATES**

Estates Form "P. 4"

Name: WILLIERS George A. No.: A.974  
 Surname Christian Names

A.D. H.M.C.S. St. Croix 20/9/43  
 Rank Unit Date of Death

AMOUNT

Date: April 15, 1944

L.P.C.....\$ 60.85  
 Other Credits.....  
 Total..... 60.85  
 Share retained 20.29  
 This Dist. 40.56

SHARE	RELATIONSHIP	NAME AND ADDRESS	AMOUNT
<u>2/3</u>	<u>Guardian</u>	<u>113121</u> Mrs. Annie Webster Maplewood Drive, Arndale P.O. Halifax, N.S. (for benefit of two minors)	<u>40.56</u>
		<u>Share retained</u> 1/3 Widow (address unknown)	<u>20.29</u>

AUTHORITY					
H.Q. F.E. No.	VOTE	PRI	H.Q. SUB.	OBJ.	AMOUNT
9999	<u>831</u>	<u>00</u>	<u>50</u>	<u>000</u>	<u>40.56</u>
CLASSIFIED BY <u>Original Signed by</u> <b>E. W. QUINNEY</b>			EXAMINED BY <u>ORIGINAL SIGNED BY</u> <b>E. G. COLLYER</b> For Chief Treasury Officer		

DISTRIBUTION APPROVED AND AUTHORIZED

Original signed by  
**L. M. FIRTH**

.....  
(L. M. FIRTH) Lt.-Colonel  
Administrator of Estates

AUDITED FOR PAYMENT

ORIGINAL SIGNED BY  
**E. G. COLLYER**

.....  
For Chief Treasury Officer

## MEMORANDUM FOR

P. 6

Mr. Llewellyn Hillier  
 Lamalin, Newfoundland

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. 123-H-82 FD. 286

DEPARTMENT OF NATIONAL DEFENCE  
 ESTATES BRANCH  
 OTTAWA, ONT.

January 7, 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

HILLIER, George Abraham, A.B.

No. A.974, R.C.N.R.



it is necessary that the requisite information regarding the deceased and his relatives  
 should be furnished on the inside of this form in strict accordance with the printed  
 instructions. The particulars required are to be carefully filled in and the Declaration  
 on the back should then be signed in the presence of a Clergyman, Priest, Local  
 Magistrate, Commissioner for Oaths or Notary Public, who should be asked to com-  
 plete and sign the Certificate. This form should then be returned to the above address.

A deceased's Service estate, the administration of which is the responsibility of  
 the Estates Branch, consists of any balance of pay and allowances at credit, cash on  
 hand and the personal effects which are under the control of the Service authorities.  
 To obtain such assets, it is not necessary for the person(s) legally entitled thereto to  
 obtain through the Courts Probate of the Will, or if none, Letters of Administration  
 of his estate.

In addition to the administration of those Service assets, the Administrator of  
 Estates is authorized to withdraw into Government account any funds (within a  
 defined amount) on deposit to the deceased's credit in Banks, Post Offices or other  
 financial institutions in Canada and Overseas, without expense or trouble to the  
 person(s) legally entitled to the estate, and to distribute such funds at the same time  
 as any balance of pay is distributed. Also, War Savings Certificates and Victory  
 Loan Bonds owned by the deceased may be redeemed and similarly distributed, or  
 transmitted into the name(s) of the person(s) legally entitled. Such Certificates and  
 Bonds should not be forwarded to the Administrator of Estates until they are requested.

If there are other assets which necessitate an application for Probate or Letters  
 of Administration, the Administrator of Estates may transfer and hand over the  
 Service assets to the executor or administrator appointed by the Court so that all  
 the estate, Service and otherwise, may be dealt with as a whole.

The information given by you on Pages 2 and 3 of this form is therefore of import-  
 ance in determining whether or not the deceased's assets are such that they may all  
 be administered by the Administrator of Estates to the person(s) legally entitled,  
 that is, without the need for Probate or Administration.

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.

*H.R. Wade*  
 (H.R. Wade) Cdr. RCNVR  
 for (L.M. Firth) Lt.-Colonel,  
 Administrator of Estates.

HRW/JN

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.....	<i>No wife depending upon deceased because of separation by mutual agreement about 5 years ago date 1939</i>		
2	Children of the Deceased and dates of their Births.....	<i>Betty Hillier born Nov 8/1932 1 Grace Hillier . Nov 6/1933 10</i>		<i>Applied to Mrs Bruce Farley 65 West Street Halifax for childrens address.</i>
3	Father of the Deceased.....	<i>Llewellyn Hillier</i>	<i>68</i>	<i>Lamaline Nfld</i>
4	Mother of the Deceased.....	<i>Lucy Elizabeth Hillier deceased at</i>	<i>63</i>	
5	Brothers of the Deceased	Full Blood	<i>Horatio Hillier born Sept 17/1900 43 Allan Augustus Hillier deceased Chester Francis Hillier deceased Ernest Wilfred Hillier deceased Gnr. Albert Hillier born March 24/1910 33</i>	<i>Some where in Montreal 464 Sicard Street July 23/1932 Oct 7/1917 July 20/1906 971501 59th Nfld. Heavy Regiment RA Care Nfld Trade Com, 58 Victoria St London SW 1 England</i>
		Half Blood		
6	Sisters of the Deceased	Full Blood	<i>Mrs Allen Swagers born April 6/1913 30 Kina Catherine Hillier born Aug 28/1915 Dora Elizabeth Hillier deceased Hera Amelia Hillier born Jan 11/1922 Martha Ann Hillier deceased</i>	<i>Grand Falls Newfoundland 1 Thurston Road Hampstead Monbragat Quebec Feb 1st 1934 70 E M C St. St John's Nfld Aug 9th 1933</i>
		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	

## ANSWER FULLY EACH QUESTION ON THIS PAGE

## PARTICULARS AS TO IDENTITY

8	Full names of the deceased	George Abram Hillier
9	Date of his birth	Nov 20th 1906
10	Place and date of his marriage.	1931 at Halifax
11	Place and date of his parents' marriage.	Lamaline Dec 28/1899

## PARTICULARS OF DOMICILE

12	Place where deceased was born.	Lamaline
13	State, in order, the Province, State and/or Country in which he resided before enlistment and the period of time in each.	(a) Canada (b) (c) (d)
14	Nature of employment before enlistment.	At Sea
15	State whether he owned the premises in which he lived and, if so, where situated.	Not known
16	Name place where deceased stated he intended to make his permanent home.	Somewhere in Canada

## PARTICULARS OF ESTATE

17	Did he leave a Will?	Have no knowledge of such
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 not know
20	Amount of War Savings Certificates held by deceased.	Have no knowledge of such
21	Amount of Victory Loan Bonds held by deceased.	Don't know of any
22	If deceased had life insurance, name companies and amount payable under each policy and the person named as beneficiary there. Describe other assets, if any, and estimated value thereof.	No knowledge in this connection
23	Is application for Probate or Letters of Administration necessary (see page 1)?	Beyond my knowledge

## 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.	Know nothing in this connection
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.)

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.

Llewellyn Hillier

Signature of Informant

Lamaline

Address

CERTIFICATE

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

\*See above. Llewellyn Hillier { Name of Informant } is the\* Father of the Deceased

above described, and I believe the above Declaration and the Statement of Relatives and of particulars made by the Informant and signed in my presence to be complete and correct.

Dated at Lamaline this 26th day of February 1944

Signature of Clergyman, Priest, Magistrate, Commissioner or Notary Public

D Hillier

Qualification

Justice of the Peace

Address

Lamaline

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

Deceased left home about 15 years ago, and since then I have had no knowledge of his business in any connection. I was informed by deceased about six years ago that by mutual agreement deceased and his wife had taken out separation papers. I have no knowledge of parties having lived together since taking out papers. I am of opinion that deceased and his wife never lived together after taking out papers.

Further particulars, <sup>re children</sup> might be had from John Bruce Farley 65 West Street Halifax

Llewellyn Hillier

Father of the deceased

IG

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

4  
 NAVY

DECEASED  
 MEMBER'S  
 NAME

George Abraham

HILLIER

(CHRISTIAN NAMES)

(SURNAME)

REGISTER NO.

3869

FILE NO.

NS.A-974

DATE

12 Nov/45.

SERVICE NO.

A-974

FINAL RANK OR RATING

A.B.

PAYEE  
 ADDRESS

Mrs. Annie C. Webster,  
 Maplewood Drive,  
 Armdale P.O., Halifax, N.S.

DATE OF TERMINATION OF OVERSEAS SERVICE

20 Sep/43

DATE OF DISCHARGE

20 Sep/43.

## A. TOTAL QUALIFYING SERVICE

NO. OF DAYS

1424

EQUAL TO

47

COMPLETE PERIODS AT \$7.50

\$ 352.50

## B. QUALIFYING OVERSEAS SERVICE

NO. OF DAYS

669

LESS

14

INELIGIBLE DAYS, EQUAL TO

655

DAYS @ 25c. PER DAY

163.75

## C. SUPPLEMENT FOR OVERSEAS SERVICE

## DAILY RATES AT DISCHARGE

PAY \$ 1.85  
 SUBSISTENCE OR LODGING  
 AND PROVISION ALLOWANCE \$ 1.45

ADDITIONAL PAY

G.C.B. \$ .05  
 H.L.M. \$ .25  
 Lamp Tr. \$ .05  
 40.00

DEPENDENTS' ALLOWANCE 1/30 OF \$

TOTAL \$

5.00

X7 = \$

35.00

NO. OF DAYS

655

X\$

35.00

125.27

## D. WAR SERVICE GRATUITY

641.52

## E. DEDUCTIONS

OVERPAYMENT OF

PAY AND ALLOWANCES \$

DEPENDENTS' ALLOWANCE \$

AND ASSIGNED PAY \$

NIL

OTHER DEDUCTIONS \$

## F. TOTAL AMOUNT PAYABLE

641.52

## G. YOUR PORTION OF GRATUITY IS—

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

= \$

641.52

TOTAL DEPENDENTS' ALLOWANCE IN ISSUE \$

Check # 116518 20/3/45

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

SJD

CHECKED BY

TREASURY

CHECKED BY

DATE

V. Liberman

14/3/45

SERVICE REPRESENTATIVE

for Dir. Naval Pay. Accting.

STATEMENT OF WAR SERVICE GRATUITY - NAVY

*Retype please  
Cypd*

Deceased Member Name George Abraham HILLIER  
(Christian Names) (Surname)

Payee Mrs Annie. B. WEBSTER,  
Address Maplewood Drive,  
Armdale, P.O. Halifax Co. N.S.

Register No. 3869  
File No. A974  
Date ~~11/14/45~~ 2/3/45  
Service No. A974  
Final Rank or Rating A-13  
Date of Discharge 20 Sep 43

Date of termination of overseas service 20 Sep 43

A. TOTAL QUALIFYING SERVICE  
No. of days 1424 equal to 47 complete periods at \$7.50 \$ 352.50

B. QUALIFYING OVERSEAS SERVICE  
No. of days 669 less 14 ineligible days equal to 655 days @ 25¢ per day \$ 163.75

C. SUPPLEMENT FOR OVERSEAS SERVICE  
DAILY RATES AT DISCHARGE

Pay	\$	<u>1.85</u>	
Subsistence or Lodging and Provision Allowance	\$	<u>1.45</u>	
Additional Pay	\$	<u>.05</u>	
	\$	<u>.25</u>	
	\$	<u>.05</u>	
Dependents' Allowance 1/30 of	\$	<u>40.00</u>	<u>1.35</u>
Total	\$	<u>4.95</u>	<u>35.00</u>
		<u>5.00</u>	<u>34.65</u>
No. of days		<u>655</u>	<u>183</u>
			<u>34.65</u>
			<u>125.27</u>
			<u>124.02</u>

*DA 40.00 per phase*

D. WAR SERVICE GRATUITY \$ 641.52  
~~\$ 640.27~~

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

F. TOTAL AMOUNT PAYABLE \$ 641.52  
~~\$ 640.27~~

G. YOUR PORTION OF GRATUITY IS  
Dependents' Allowance in issue to you \$ \_\_\_\_\_ of \$ \_\_\_\_\_ = \$ 641.52  
Total Dependents' Allowance in issue \$ ~~\_\_\_\_\_~~

CERTIFICATE: I certify that the amount has been correctly computed and is payable in accordance with the terms of the War Service Grants Act, 1944 and the regulations issued thereunder.

Prepared by	Checked by	Treasury	
		Checked by	Date

Service Representative

D.N.P.A. CHECK

1 <u>OK</u>	6 <u>OK</u>
2 <u>OK</u>	7 <u>OK</u>
3 <u>OK</u>	8 <u>OK</u>
4 <u>OK</u>	9 <u>OK</u>
5 <u>OK</u>	10 <u>OK</u>

A-974  
3869

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

Name of Deceased Member Geo. A. HILLIER Rank or Rating A.B O.No. A-974

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

D.A.	<u>40<sup>00</sup></u> ✓	<u>Guardian</u>
A.P.	<u>30<sup>00</sup></u> ✓	<u>Mrs. Annie Webster</u>
D.A.	_____	_____
A.P.	_____	_____

2. Pension awarded or being awarded to: Guardian as above  
(on behalf of children)

3. War Service Gratuity Application(s) received from: Mrs. Annie C. Webster,  
Maplewood Drive,  
Arundale P.O.  
Halifax Co. N.S.

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: Guardian as above In the proportion of: 1

- and -

to: \_\_\_\_\_ In the proportion of: 1

( ) 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 27/2/45

[Signature]  
for D.W.P.A. (G) [Signature]



A 974

OFFICIAL NUMBER

NAME

HILLIER,

George Abraham

OFFICIAL NUMBER

A 974

(Surname)

(Given Names)

Ship or Establishment	Rating	From			Remarks	Character	Efficiency	Date			Non-Sub. Rating	Qualified			Re-Qualified		
		Day	Month	Year				Day	Month	Year		Day	Month	Year	Day	Month	Year
HMCS "Stadacona"	A. B.	28	10	39		V.G.	Sat.	31	12	39							
" "Fundy"	" "	5	11	39		V.G.	Sat.	31	12	40							
" "Stadacona"	" "	22	3	40		V.G.	Sat.	31	12	41							
N.O.I.C. "Sydney"	" "	1	4	40		V.G.	Sat.	31	12	42							
HMCS "Protector"	" "	4	2	41													
HMCS "Stadacona"	" "	25	3	42	(174390)												
HMCS "St. Croix"	" "	8	4	42	(148079)												
DISCHARGED	" "	20	9	43	("Missing" on war service.) (Casualty List) "Dead" (249A # 43653)	V.G.	Sat.	20	9	43							

GENERAL REMARKS

Mil. Hosp. Influenza 20-1-41 to 26-1-41  
 " " Tonsillitis 28-1-41 to 4-2-41

*Qualification*  
*Mrs. Annie M. Hillier*  
*8 Agincourt Place*  
*Halifax, N.S.*

DATE OF BIRTH	PLACE OF BIRTH	CIVIL STATUS	OCCASION	RELEASED	FORM	RESIDENCE	PREV. ENL.	RANK OR RATE
20	X 05 44	540	0	30	X	H 08 02	0 19	0 08 94
ENLIST. DATE	ACT. SERV. DATE	DEPT.	CAT.	BY	MO.	YR.	ESTAB.	RANK OR RATE
28	10 39	28	10	39			0380	0 08 94
SEN. DATE	STR.	NON-SUB.	M.	CODED				
28	10 39	09		EXP 109				
28	10 39	09		20 20.09.43				