A746
DESCHAMP
WINSLOW ALFON

N.S.H./5-2

P. A.
TREASURY OFFICE
Date 22/12/43
Initial

FORM B.

FILE: N.S. 123-D-43. PERS.(N)

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

DEC 29 1943
(Date.)

COPIED Archives CORPS

Sir:

The following casualty has been reported:-

NAME	RANK or RATING	NAVAL NO.
DESCHAMP, Winslow Alfonzo	Able Seaman	A-746, R.C.N.R.

DATE OF ENLISTMENT - 12th September, 1939.

DATE OF DISCHARGE - 20th September, 1943.

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

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

Reason for discharge and - when and where any disability was incurred, or where death occurred.

Missing, presumed dead. 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.

(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 Wife NAME Mrs. Mary Deschamp

ADDRESS Box 233, SHELBURNE, N.S.

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.

FORM "A" RESPECTING THE ABOVE NAMED HAS BEEN PREVIOUSLY FORWARDED. PLEASE SEE REVERSE SIDE FOR DETAILS OF MARRIAGE ALLOWANCE, DEPENDENTS ALLOWANCE, etc.

REMARKS: .....

THIS PORTION OF FORM COMPLETED BY CHIEF TREASURY OFFICER, DEPARTMENT OF NATIONAL DEFENCE, NAVAL SERVICE.

Names of Dependents	Relationship	Maiden name of wife	Date of marriage and/or date of birth of children
Mrs. Mary Deschamp	(wife)		

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	D. A.	A. P.	TOTAL
Monthly Rate:	$35.00	$37.00	$72.00

To whom Paid: Mrs. Mary Deschamp ADDRESS Box 233, Shelburne, N.S.

Date of Enlistment: See other side

Date of Discharge: See other side

Inclusive date to which D.A. and/or A.P. was Paid: Sept. 30, 1943.

The final deduction of Assigned Pay for Nil has been made for the period from 1st to Nil of Nil 194

Remarks:

Computed by NP 29/12/43

Checked by MK

Alec L. Boswell

for (R.C.Playfair)
Chief Treasury Officer,
DEPARTMENT OF NATIONAL DEFENCE,
(Naval Service.)

The Secretary, The Canadian Pension Commission,
Room 228, Daly Building, OTTAWA, Ontario.

The Secretary, Dept. Pensions & National Health,
Daly Building, Ottawa.

33

Six Copies to be rendered to Naval Service Headquarters

REPORT OF THE DEATH OF AN OFFICER, MAN, OR BOY

H.M.C.S. ..AVALON (ST.CROIX) at .ST. JOHN'S, NEWFOUNDLAND.

COPIED Archives COPIES

Name (Christian names in full) Winslow Alfonzo DESCHAMP

Rank or Rating..A.B..... Official No....A-746 R.C.N.R.

If unknown date of first entry)

Place of Birth..Shelburne Co. N.S.. Date of birth..25th April 1907.

Occupation in Civil Life..ABLE SEAMAN.....Religion..ROMAN CATHOLIC

Number of Years Service in the Navy (Long Service R.C.N. or mobolized service in the case of R.C.N. (Temp.) Reserve ratings)

.....4 years 9 days.....

Date of Death...20th Sept.1943... Place of Death...WHK. AT SEA...

Cause of Death...LOSS OF H.M.C. SHIP.....

.....

Nearest known relative or friend) Name..Mrs. Mary DESCHAMP...Relationship..WIFE.....
Address..P.O. Box 233.....
.....Shelburne, N.S.....

Date on which the above was informed by ship..SEP 27 1943.....
Date on which death was registered with local officials...N.K.....
In the case of Imperial Service men whether Active Service Pensioner or Reserve, date on which the prescribed return was rendered to the Registrar General in London, Edinburgh or Dublin according to Nationality.
.....

Place of Burial..No burial.....Date of Burial..Not applicable
(If known) (If known)

Location, Number etc, of Grave....Not applicable.....
(If known)

Undertaker employed ....Not applicable.....
(If any)

If borne for discipline only, date D.S.Q. or invalided..Not applicable

(S.W. Davis),

Commander, R.C.N.,
COMMANDING OFFICER

The Secretary, Naval Board,
Ottawa, Canada.

.....14th October 194 3.

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

EMC/L

N.P.R./5-1

FORM A.

FILE: N.S. 123-D-43 Pers.

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

10

Sir: 29 September, 1943
(Date)

The following casualty has been reported -

NAME	RANK or RATING	NAVAL NO.
DESCHAMP, Winslow Alfonzo	Able Seaman	A-746 R.C.N.R.

COPIED Archives COPIE

DATE OF ENLISTMENT - 12 September, 1939

DATE OF DISCHARGE -

HOSPITAL -
(If discharged in hospital under jurisdiction of D. P. & N. H.

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

Reason for discharge and - 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 Wife NAME Mrs. Mary Deschamp

ADDRESS Box 233, SHELBURNE, N.S.

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.

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)

A 746 OFFICIAL NUMBER | FILE NUMBER 123-D-43 | OFFICIAL NUMBER A 746

NAME DESCHAMP, (Surname) Winslow Alfonzo (Given Names) DATE OF BIRTH 25 April, 1907

PLACE OF BIRTH Shelbourne, N.S. OCCUPATION A. B. "Arras"

RELIGION Roman Catholic EDUCATION

RESIDENCE AT TIME OF ENLISTMENT: Street and No. P.O. Box 233, Town Shelbourne, Province, etc N.S.

Engagements: Date (in figures) Day	Month	Year	Period	Description: Height	Hair	Eyes	Complexion	Marks or Scars	Previous Service: Served in	Rank or Rating	Dates From	To
12	9	39	Hostilities only	5'6"	Brown	Grey	Fair	Tattoo right arm Maple leaf with rose & flower. Tattoo left arm--Rose for mother and two hearts.				

NEXT OF KIN RELATIONSHIP (in pencil) Wife NAME (in pencil) Mrs. Mary Deschamp

ADDRESS (in pencil): Street and No. Box 233 Town Shelbourne Province, etc. N.S.

27-12-41

Medals, Clasps, Hurt Certificates, Prize Money: Date (in figures) Day	Month	Year	Particulars	Examinations, Certificates, etc.: Date (in figures) Day	Month	Year	Particulars	Date (in figures) Day	Month	Year	Particulars

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Badges, G.C. or G.S.: Date (in figures) Day	Month	Year	1st, 2nd or 3rd G.C. or G.S.	Granted Deprived Restored	Brief Particulars of Warrant or C.M. Punishments and C.P. Charges: Ship or Establishment	Wt. No.	Date (in figures) Day	Month	Year	Brief Particulars of Offence	Punishment
12	9	42	1st G.C.B.	Granted.							

FILM NO. WSP-4410-1 DATE

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

Second Class For Conduct

From	To

W.S.G. APPLICATION 10416 RECEIVED 7/6/45

H.Q. 35—30M—5-41 (337)
N.S. 815—7-35

VB

A 746 OFFICIAL NUMBER

NAME (Surname) DESCHAMP, Winslow Alfonzo (Given Names)

OFFICIAL NUMBER A 746

Ship or Establishment	Rating	From Day	From Month	From Year	Remarks	Character	Efficiency	Date Day	Date Month	Date Year	Non-Sub. Rating	Qualified Day	Qualified Month	Qualified Year	Re-Qualified Day	Re-Qualified Month	Re-Qualified Year
HMCS "Stadacona"	A. B.	12	9	39		V.G.	Sat.	31	12	39							
" "Arras"	" "	1	10	39		V.G.	Supr.	31	12	40							
" "Stadacona"	" "	28	1	41		V.G.	Supr.	31	12	41							
" "St. Croix"	" "	8	2	41		V.G.	Supr.	31	12	42							
" "Avalon"	"	22	7	42	(128221)												
" "St. Croix"	"	28	7	42	(DRD)												
DISCHARGED	" "	20	9	43	("Missing" On War Service) (Casualty List) "Dead" (249A # 43651)	V.G.	Sat.	20	9	43							

GENERAL REMARKS

RCN Hosp. 28-6-42 to 22-7-42
Canadian Memorial Cross mailed to Wife: Mrs. Mary Deschamp, Box 233, Shelburne, N.S. -- 4-1-44
Canadian Memorial Cross mailed to Mother: Mrs. Mary E Deschamp, Box 233, Shelburne, N.S. -- 15-1-44

COPLEY Archives COPY

DATE OF BIRTH DY	MO	YR	PLACE OF BIRTH	CIVIL OCCU. MAIN											
25	4	07	14	754	0	10	X	416	03	0	19	0	08	94	
12	09	39	12	09	39						0315	0	08	94	
12	09	39	09			20	20	09	43						

CODED mer CHECKED EP

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

17

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

R.C.N.R.

CERTIFICATE of the Service of

Winslow Alfonzo DESCHAMP

IN THE ROYAL CANADIAN NAVY

DEPT. OF NAT. DEF. Archives OTTAWA

Official Number A.746

Date of birth 25th April, 1907

Where born { Province Shelbourne. / Town or county Shelburne Co, N.S.

Trade brought up to Able Seaman

Religious denomination Roman Catholic

Date passed swimming test

Man's signature on discharge to pension

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

2-4-40

Name: Mrs Mary

Relationship: wife

Address: P.O. Box 233

Shelburne

Nova Scotia

27/11/41

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

Date of actually volunteering	Commencement of time	Period volunteered for	Date of actually volunteering	Commencement of time	Period volunteered for
1. 12th September 1939		Duration of Hostilities	5.		
2.			6.		
3.			7.		
4.			8.		

Medals, Clasps, Etc.

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

Description of Person	Stature Feet	Stature In.	Chest, In.	Colour of Hair	Colour of Eyes	Colour of Complexion	Marks, Wounds and Scars
On entry as a boy							
On advancement to man's rating or on entry under 28 years	5	6		Brown	Grey	Fair	Tattoos (Right arm Maple leaf with Rose and flowers Left arm Rose for Mother and two hearts.
On re-entry for C.S. or for Non-C.S. after attaining 28 years							
Further description if necessary							

C.N.S. 459
1M—3-39
N.S. 815-9-459

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

Name Winslow Alfonzo DESCHAMP

Ship's Name (Tenders to be inserted in brackets)	List and No.		Rating	From	To	Cause of Discharge
"Stadacona" (Arras)		—	A.B.	12-9-39	27 Jan '41	
Stadacona	—	—	— " —	28 Jan '41	7 Feb 41	
St Croix	—	—	— " —	8 Feb '41	21 July '42	
Avalon	—	—	— " —	22 July '42	27 July '42	
St Croix	—	—	— " —	28 July '42	30 Jan '43	
Niobe (St Croix)			— " —	31 Jan '43	30 Apl '43	
Avalon (— " —)			— " —	1 May '43	20 Sep '43	"D.D."

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Date	Wounds received in Action and Hurt Certificate; also any Meritorious Service, Special Recommendations, Prize or other Grants	Captain's Signature
6 Aug '41	Special S.C. Lt. No. B 3608	
10		

Service

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

Name Winslow Alfonzo DESCHAMP

Conduct

Second Class for Conduct (inclusive dates)	
From	To

Efficiency in Rating—ARTICLE 607—K. R.

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

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

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

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

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

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

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

Good Conduct Badges		
Date	1st, 2nd, 3rd	Granted, Deprived, Restored
12 Sep. '41	1st	Granted

N. R. 5
1M —9-39
N.S. 815-12-5

26766

NOV 11 1939
123 D43
CANADA

CANADA

ATTESTATION FORM

FOR MEN OF THE ROYAL CANADIAN NAVAL RESERVE

Surname DESCHAMP, Official No. A-746

Christian Names Winslow Alfonzo, Married, Single or Widower Married

3

Permanent Address	Religion
P. O. Box 233, Shelbourne, Nova Scotia.	R. C.

Date of Birth	Place of Birth	Name and Address of Next of Kin
April 25th, 1907	Town Shelbourne, County Shelbourne Co., Province Nova Scotia.	Mrs. Mary Deschamp (wife) same as above.

PERSONAL DESCRIPTION ON ENROLMENT

Height	Chest Measurement	Hair	Eyes	Complexion	Wounds, Scars, Marks
Feet 5 Inches 6	Inflated Deflated Mean 34 inches	Brn.	Grey	Fair	Tatoo s (Right arm Maple Leaf with rose and flower) Left arm Rose for Mother and two hearts.

Date of Enrolment	Rating Enrolled for	Trade or Calling and in whose Employ
12th Sept. 1939	AB- RCNR	AB "ARRAS"

(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.~~

Personnel Records Division
1. Medical Card ✓
2. Index Card ✓
3. Non-Sup. Card
4. Statistical Card ✓
5. Roneo Strip
6. Pension Card
7. Noted 20.11.39
8.
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 accou unfitness.

*Cross out clause not applicable

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

(b)* ~~I served in~~ Nil ~~for the period shown~~

Served in	Rank	From	To
	Nil		

COPIED Archives COPY

(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 12th day of September, 1939.

Winslow Alfonzo Deschamp
(Signature of Applicant)

(C) OATH OF ALLEGIANCE

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

Signature of Applicant Winslow Alfonzo Deschamp

Witness Edwin Stubbs

Date 12th Sept. 1939 Rank Paymaster Lieutenant Commander, RCNVR

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 12th day of September, 1939.

Pay Lt. Cdr. RCNVR Edwin Stubbs
(Signature of Officer and rank)

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

Medically fit.
A. MacCallum
M. O. R. C. N. B.

APPROVED:
K. P. Brees
Commander R. C. N.

D OF D 20-9-43

DEPARTMENT OF VETERANS AFFAIRS

AWARDS (NAVY)

WAR SERVICE RECORDS
D.D.

H

SURNAME (IN BLOCK LETTERS)	CHRISTIAN NAMES	REG. No.	RANK ON DISCHARGE	C.A.S.F. UNIT
DESC[redacted]P	Winslow Alfonzo	A-746	A.B.	FILE No.

WAR SERVICE BADGE (CLASS) No.

DATE DESPATCHED:

ADDRESS:

CAMPAIGN MEDALS	REGISTRATION NUMBER AN DATE DESPATCHED
1939-45 Star	136 – 5/10/49
Atlantic Star	
Africa Star	
C.V.S.M. & Clasp	
War Medal	
	(THE REVERSE TO BE USED FOR ESTATE PURPOSES)

DVA 806

RCNR Feb.44 "ST.CROIX"

MEDALS AND MEMORIALS—DECEASED PERSONNEL

REGISTRATION No. DATE OF DESPATCH

(1) MEDALS
PERSON ENTITLED TO: Mrs. Mary Deschamp - Widow
ADDRESS: Box 233
SHELBURNE, N.S.

MEMORIAL BAR
(1)
DATE DESP
REGN. NO 1064

(2) MEMORIAL CROSS
WIDOW: Mrs. Mary DesChamp
ADDRESS: Box 233, Shelburne, N.S.

(2) 4-1-44

(3) MEMORIAL CROSS
MOTHER: Mrs. M.E. DesChamp,
ADDRESS: Box 233, Shelburne, N.S.

(3) 15-1-44

VERIFICATION FORM

CAMPAIGN STARS, DEFENCE MEDAL, WAR MEDAL, C.V.S.M. and CLASP.

NAVAL GENERAL SERVICE MEDAL (1915).

NAME IN FULL Deschamp Winslow Alfonso RANK/RATING H.B. OFF.NO. H-746 ADDRESS

SHIP	SERVICE FROM	SERVICE TO	SERVICE DAYS	AREA	QUALIFYING PERIODS IN DAYS FROM	TO	1939-45	ATLANTIC	DEFENCE	CLASP C.V.S.M.	1915 MEDAL	STARS MEDALS	✓ 1 2	ELIGIBLE FOR AWARDS OF
	12.9.39											1939-45	1	Star
Arras	12.9.39	27.1.41	504	Atl.								ATLANTIC	1	Star
St Croix	8.2.41	21.7.42	529	Atl.								FRANCE G.		
Avalon	22.7.42	27.7.42	6	NF								AFRICA	1	Star
St Croix	28.7.42	20.9.43	420	Med. Africa C. Atl								PACIFIC		
												BURMA		
Dutch "Lead"				Sodale								ITALY		
	20-9-43											DEFENCE		
												C.V.S.M.	2	& Clasp
												" CLASP		
												WAR 1945	1	Medal
												WAR 1915		

VERIFIED BY L. Filion
NH

VERIFIED BY L. Filion

VERIFIED BY

DIR. OF PERSONNEL RECORDS.

DISTRIBUTION OF SERVICE ESTATES

CF

Estates Form "P. 4"

NAVY

Name: DESCHAMP$, Winslow, A. No.: A.746
Surname Christian Names

A.B. H.M.C.S. St. Croix, 20-9-43
Rank Unit Date of Death

AMOUNT

L.P.C. $ 44.35

Date: Feb. 4/44

Other Credits

Total 44.35

SHARE	RELATIONSHIP	NAME AND ADDRESS	AMOUNT
1/2	Widow 94368	Mrs. Mary Deschamp, Box 233, Shelburne, Nova Scotia.	22.17
1/4	Father 94369	Joseph A. Deschamp, (As above)	11.09
1/4	Mother 94370	Mrs. Mary E. Deschamp, (As above)	11.09
		(As next of kin entitled)	

AUTHORITY

H.Q. F.E. No.	VOTE	PRI	H.Q. SUB.	OBJ.	AMOUNT
9999	831	00	50	000	44.35

CLASSIFIED BY

EXAMINED BY
ORIGINAL SIGNED BY
E. G. COLLYER
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

M—9-43 (1913)
Q. 1773-80-2

Lt. Colonel L. M. Firth
Administrator of Estates
Dept. of National Service
Naval Service
Estates Branch
Ottawa

Jan 24

ESTATES BRANCH
JAN 27 1944
H. Q.
OTTAWA
NATIONAL DEFENCE

Re: Des Champs. Winslow Alfonys. A.B. (Deceased)

No. A 746 R.C.N.R.

Dear Sir:—

I have received your letter of the 19th instant for which I thank you, I have no intention of desposing of my interest in the dwelling house.

I am not intending to apply for letters of Adminstration.

Thanking you,

I am,

Yours Very Truly,

Mrs Mary Des Champs

MEMORANDUM FOR

P. 64

Mrs. Mary Deschamp
Box 233
Shelburne, N.S.

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-D-43 FD.293

DEPARTMENT OF NATIONAL DEFENCE
ESTATES BRANCH
OTTAWA, ONT.

ESTATES BRANCH JAN 15 1944 H.Q. OTTAWA NATIONAL DEFENCE

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

DESCHAMP, Winslow Alfonzo, A.B.

No. A.746, 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 complete 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 importance 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.-Col.
Administrator of Estates.

HRW/JN

M.F.W. 77
2M-11-43 (2842)
H.Q. 1772-39-972
K.P. 95075

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		Mary Des Champ	34	Box 233 Shelburne Nova Scotia
2	Children of the Deceased and dates of their Births		None.		
3	Father of the Deceased		Joseph Alexander Des Champ	63	Box 233 Shelburne Nova Scotia
4	Mother of the Deceased		Mary Elizabeth Des Champ	65	Box 233 Shelburne Nova Scotia
5	Brothers of the Deceased	Full Blood			
			Francis Joseph Des Champ	38	Box 233 Shelburne Nova Scotia
		Half Blood			
6	Sisters of the Deceased	Full Blood			
			Edna May Forchner	40	Box 233 Shelburne Nova Scotia
		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	Winslow Alfonzo. Wes Champ
9	Date of his birth	April 25th 1907
10	Place and date of his marriage.	June 3rd 1938 St Johns Newfoundland
11	Place and date of his parents' marriage.	May 13th 1903 Shelburne Nova Scotia

PARTICULARS OF DOMICILE

12	Place where deceased was born.	Shelburne
13	State, in order, the Province, State and/or Country in which he resided before enlistment and the period of time in each.	(a) in Nova Scotia only (b) (c) (d) for his lifetime
14	Nature of employment before enlistment.	Canadian Government Fisheries Service
15	State whether he owned the premises in which he lived and, if so, where situated.	his own home Shelburne Nova Scotia
16	Name place where deceased stated he intended to make his permanent home.	Shelburne Nova Scotia

PARTICULARS OF ESTATE

17	Did he leave a Will?	no
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.	no
20	Amount of War Savings Certificates held by deceased.	none.
21	Amount of Victory Loan Bonds held by deceased.	none
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 insurance. dwelling house and lot in connection with ~~none~~ Value $900
23	Is application for Probate or Letters of Administration necessary (see page 1)?	

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.	no
25	Have you or any other relative paid the funeral expenses or any part thereof? If so, attach itemized accounts showing amount paid, and by whom.	no

(NOTE:—The Government pays funeral expenses within the amounts authorized in the Regulations, where death occurs and burial is made Overseas as well as where death occurs and burial is made in Canada or elsewhere in the North American zone, and if a relative has already paid those expenses the Government will reimburse such relative to the extent of the amount authorized in the Regulations. Any amount of such expenses in excess of those authorized in the Regulations is not payable by the Government nor is it chargeable against the service estate of the deceased.)

(PLEASE TURN OVER)

DECLARATION

*Insert degree of relationship for example, "Widow", "Father", "Brother", etc.

I hereby declare that all the particulars shown on this form are correct, and a true and complete statement of all the relatives that the deceased ever had in the degrees specified; and that I am the *Widow of the deceased.

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

Mrs Mary Des Champ {Signature of Informant

Box 233 Shelburne Nova Scotia Address

CERTIFICATE

I hereby certify that, to the best of my knowledge and belief Mrs Mary Des Champs {Name of Informant} is the* widow 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.

*See above.

Dated at Shelburne N.S. this 12th day of January 1944.

Signature of Clergyman, Priest, Magistrate, Commissioner or Notary Public } Willard P. Purney Qualification Stipendiary Magistrate for Town of Shelburne N.S.

Address Shelburne N.S.

NOTE.—Before granting the above Certificate, care should be taken to see that the Informant gives particulars concerning the death of any Relative stated by him or her to have died, and that the full name and address 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

DEPARTMENT OF NATIONAL DEFENCE

MRR NAVY ═══ ARMY ═══ AIR FORCE

4
NAVY

STATEMENT OF WAR SERVICE GRATUITY

DECEASED MEMBER'S NAME Winslow Alfonzo (CHRISTIAN NAMES) DESCHAMP (SURNAME)

REGISTER NO. 10416
FILE NO. NS.A746
DATE 5 July/45
SERVICE NO. A746
FINAL RANK OR RATING A.B.
DATE OF DISCHARGE 20 Sep/43

PAYEE Mrs. Mary Deschamps
ADDRESS Box 233, Shelburne, N.S.

DATE OF TERMINATION OF OVERSEAS SERVICE 20 Sep/43

		$ ¢
A. TOTAL QUALIFYING SERVICE		
NO. OF DAYS 1470/30 EQUAL TO 49 COMPLETE PERIODS AT $7.50		367.50
B. QUALIFYING OVERSEAS SERVICE		
NO. OF DAYS 1453 LESS N11 INELIGIBLE DAYS, EQUAL TO 1453 DAYS @ 25c. PER DAY		363.25
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	
	$	
DEPENDENTS' ALLOWANCE 1/30 OF $ 35.00	$1.15	
TOTAL	$4.75 ×7 = $ 33.25	
NO. OF DAYS 1453/183	×$ 33.25	264.00
D. WAR SERVICE GRATUITY		994.75
E. DEDUCTIONS — OVERPAYMENT OF PAY AND ALLOWANCES $		N11
DEPENDENTS' ALLOWANCE AND ASSIGNED PAY $		
OTHER DEDUCTIONS $		
F. TOTAL AMOUNT PAYABLE		994.75

G. YOUR PORTION OF GRATUITY IS—

DEPENDENTS' ALLOWANCE IN ISSUE TO YOU $_____ OF $_____ TOTAL DEPENDENTS' ALLOWANCE IN ISSUE $ =$ 994.75

Cheque 38160 - 14/7-45

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

PREPARED BY	CHECKED BY
EP	

TREASURY

CHECKED BY	DATE
H Lapierre	7/7/45

SERVICE REPRESENTATIVE
for Dir. Naval Pay Acctng.

STATEMENT OF WAR SERVICE GRATUITY - NAVY

[redacted] Member's Name Winslow Alfonzo DESCHAMP
(Christian Names) (Surname)

Payee Mrs. Mary DESCHAMP

Address Box 233, Shelburne, N.S.

Register No. 10416
File No. A-746
Date 26-6-45
Service No. A-746
Final Rank or Rating AB.

Date of termination of overseas service 20 Sep. 43 Date of Discharge 20 Sep. 43

	$	¢
A. TOTAL QUALIFYING SERVICE No. of days 1470/30 equal to 49 complete periods at $7.50	367	50
B. QUALIFYING OVERSEAS SERVICE No. of days 453 less — ineligible days equal to 453 days @ 25¢ per day	363	25
C. SUPPLEMENT FOR OVERSEAS SERVICE DAILY RATES AT DISCHARGE		
Pay	$ 1.85	
Subsistence or Lodging and Provision Allowance	$ 1.45	
Additional Pay 1 GCB	$ 05	
H.L.M.	$ .25	
Dependents' Allowance 1/30 of $ 35.00	$ 1.15	
Total 4.75 x 7 = $ 33.25		
No. of days 1453/183 x $ 33.25	264	00
D. WAR SERVICE GRATUITY	994	75
E. DEDUCTIONS OVERPAYMENT OF PAY AND ALLOWANCES $ DEPENDENTS' ALLOWANCE AND ASSIGNED PAY $		
OTHER DEDUCTIONS $ nil		
F. TOTAL AMOUNT PAYABLE	994	75

G. YOUR PORTION OF GRATUITY IS

Dependents' Allowance ~~in issue~~ to you $_____ of $ = $ 994.75
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	Treasury: Date

Service Representative

D.N.P.A. CHECK

1		6	
2		7	
3		8	
4		9	
5		10	

10416

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

Name of Deceased Member Winslow Alfonzo DESCHAMP Rank or Rating as. O.No. A-746

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

D.A. $35.00
~~M. $1.15~~
~~D.A. 35.00~~
ALLOT.
~~A.P.~~ 37.00
D.A.
A.P.

Mrs. Mary DESCHAMP (wife
Box 233
Shelburne, N.S.

2. Pension awarded or being awarded to: wife - above.

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

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: Mrs. Mary DESCHAMP - WIFE In ~~the~~ full ~~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 29 June 1945

Ronald J. Thorne, C.P.O. WTR.
for D.N.P.A. (G)

N.S. A-746 Pers.(N)(N-15)

Shelburne, Nova Scotia,
June 12, 1945.

The Secretary,
Naval Board,
Naval Service Headquarters,
Ottawa.

1159795

NAVAL PERSONNEL RECORDS
10416
JUN 18 1945
WAR SERVICE GRATUITY SECTION

Re: Winslow Alfonzo DesChamp
able seaman
O.N. A-746, R.C.N.R.

Dear Sir,

I thank you for your letter of the 6th of June instant. I am the Widow and next-of-kin of the above-named.

While he was in the Service I was in receipt of dependants' allowance on his behalf as well as assigned pay. I was his sole dependant.

I therefore make application for the war service gratuity authorized on behalf of the above-named.

I am,
Yours respectfully,
(Mrs) Mary DesChamp,
Box 233 Shelburne,
N.S.

RECEIVED
JUN 15 1945
N. S. H. Q.
Central Registry
Mail Opening
5

W.S.G. Application No. 10416

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

FILE NO. N.S. A-746

"WAR SERVICE GRATUITY"

COMPUTATION OF SERVICE

SURNAME	CHRISTIAN NAMES IN FULL	OFFICIAL NUMBER	RANK OR RATING ON DISCHARGE
DESCHAMP	WINSLOW ALFONZO	A-746	AB

CAUSE OF DISCHARGE: DEAD (ST. CROIX)

....APPLICANT...WIDOW...IN...RECIEPT.OF.PENSION.....

12 Sep 39 - 11 Sep 43 - 1461
12 Sep 43 - 20 " - 9
1470

TOTAL SERVICE

Date of Active Service 12 SEPT/39

Date of Discharge 20 SEPT/43

Total No. of Days 1470

Less non qualifying service NIL

Total Days 1470

OVERSEAS SERVICE

% Total No. of Days 1453

Less non qualifying service NIL

Total Days 1453

Record of Service in other Forces (per Naval Records)

Branch of Service M

Date of Active Service 1

Date of Discharge h

& % Overleaf

Computed By M A Wingate

Checked By [signature]

[signature]
for (H.B. Money)
Payr. Cmdr. R.C.N.R.
Director of Personnel Records

DATE: JUN 21 1945

Cost

Pension

NON QUALIFYING SERVICE

(#)

Date	Reason	No. of Days	
N/A			
"	"	"	
"	"	"	
"	"	"	
"	"	"	
"	"	"	
"	"	"	
	Total days		

(%)

OVERSEAS SERVICE:

Where Serving	From	To	No. of Days
Arras "	12 SEPT/39 "	27 JAN/41 "	504 "
St Croix "	8 FEB/41 "	21 July/42 "	529 "
ST Croix "	28 July/42 "	20 SEPT/43 "	420 "
			1453 "

Arras

19
31
30
31
27

138
366

504

St Croix

365
21
31
30
31
30
21

529

St Croix

4
31
20

365

420

REGISTERED

LA/CM

AIR MAIL

N.S. 123- D-43. PERS.(N)

DEC 29 1943 36

Dear Mrs. Deschamp:

Further to my letter of the 27th of September, 1943, in view of the length of time that has elapsed since your husband, Winslow Alfonzo Deschamp, Able Seaman, Official Number A-746, Royal Canadian Naval Reserve, was reported "missing" after the sinking of H.M.C.S. "ST.CROIX", and as no information has since been received of his having survived, the Canadian Naval Authorities have now presumed his death to have occurred on the 20th of September, 1943.

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

Yours sincerely,

LETTER dispatched by PERSONNEL NAVAL

DEC 28 1943

SECRETARY, NAVAL BOARD.

Mrs. Mary Deschamp,
Box 233,
SHELBURNE, N.S.

H. B. MONEY
PAY LIEUT. CDR., R.C.N.R.
OFFICER IN CHARGE
NAVAL PERSONNEL RECORDS

MEMORANDUM:

With reference to your submission of the Headquarters' message, reading as follows, is hereby confirmed:

Medical Board Proceedings ( ) respecting the above named, returned herewith for record purposes.

BY ORDER

for (J. O. Cossette),
Naval Secretary.

TFH)C

REGISTERED

AIR MAIL

N.S. 123-D-43 PERS.(N)

8

27 September, 1943.

Dear Mrs. Deschamp:

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 husband, Winslow Alfonzo Deschamp, Able Seaman, Royal Canadian Naval Reserve, Official Number A-746, is missing on war service.

According to the report received, your husband 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 husband'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 husband 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 husband has helped to maintain.

Yours sincerely,

LETTER dispatched by PERSONNEL NAVAL
SEP 27 1943
SECRETARY, NAVAL BOARD.

Mrs. Mary Deschamp,
Box 233,
SHELBURNE, N.S.

N.B. Money

NAVAL PERSONNEL RECORDS

ORIGINAL No. 16

OCT 13 1939 123 D 43

H.Q. File No.

DECLARATION OF ALLOTMENT

22420

List and Number in Ledger	ALLOTTOR	Rank or Rating	Official No.	Daily Rate of Pay
Arras 12-2/14	Surname DESCHAMPS 113005 Christian Names Winslow A.	A.B.	RCNR (T) A-746	1.85 Ma .50

Section A ALLOTMENT NOW DECLARED

FULL NAME OF ALLOTTEE	Relationship	ADDRESS	Rate per Month to be charged on ledger	Month to commence. Payable on last working day
Surname DESCHAMPS Christian Names (Mrs.) Mary	Wife	Box ~~235~~ 233 Shelburne Nova Scotia.	$60.00	Oct. '39

Section B DISPOSAL OF EXISTING ALLOTMENTS (See Note 1 below)

The following allotments are in force:—

Rate	NAME OF ALLOTTEE	ADDRESS	These allotments are to be disposed of as indicated below. (See Note 2):—
		Nil	

Allotment Declarations. Initials Date
Ent'd. on Index Card
Ent'd. on Allotment Ledgers
17/10/39.

NOTE 1:—If there be no existing Allotment, the word "NIL" should be written across Section B.
NOTE 2:—Write "Increased or reduced as Section A"; "To be stopped (charged to.....)"; "To be continued," etc.

Allottor's Signature authorizing charges Winslow A. Deschamps
A.B. Rank or Rating

ENTERED IN FAIR LEDGER	ENTERED IN ROUGH LEDGER
AB.	AB.

The allotment now declared has been duly entered in the Fair and Rough Ledgers with effect from the appropriate date. The reduction or transfer has been duly approved by the Commanding Officer and the reasons for the alteration are:—

Personnel Records Division.
1. Noted in Records
2. Index Card
3. Non-Sub. Card
4. Statistical Card
5. Roneo Strip
6. Pension Card
7.
8.
DATE 10.39

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

Pay Lieut. Cdr. RCNVR for Owen Stedden
Accountant Officer

H.M.C.S. "STADACONA

Forwarded

S. 63
4M—3-39
N.S. 815-9-63

Next of Kin Noted:
23:10:39. E.M.