

NAVAL GENERAL SERVICE

SERVICE
A: B

VERIFIED BY



113-8-5477

ATTESTATION FORM (HOSTILITIES FORM)

FOR MEN OF THE ROYAL CANADIAN NAVAL VOLUNTEER RESERVE

SURNAME SMITH OFFICIAL No. 1169625
CHRISTIAN NAMES William Roy MARRIED, SINGLE OR WIDOWER Single

PERMANENT ADDRESS RELIGION
6 14th Ave., East,
Vancouver, B. C. FA 0217 Y Church of England

DATE OF BIRTH	*PLACE OF BIRTH	NAME AND ADDRESS OF NEXT OF KIN
<u>30th July 1925.</u>	Town <u>Nelson,</u> County Province <u>B.C.</u>	Mother: <u>Mrs. Louise SMITH,</u> <u>6 14th Ave. East,</u> <u>Vancouver, B.C.</u>
*Original Nationality of: Father <u>Irish</u> Mother <u>English</u>		

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

(A) PERSONAL DESCRIPTION ON ENROLMENT

HEIGHT	CHEST MEASUREMENT	HAIR	EYES	COMPLEXION	WOUNDS, SCARS, MARKS
Feet <u>5</u> Inches <u>8 1/4</u> <u>126 1/2 lbs</u>	Inflated <u>37</u> Deflated <u>32</u> Mean <u>35</u>	<u>Dark Brown</u>	<u>Hazel</u>	<u>Fair</u>	<u>Nil</u>

EDUCATIONAL STANDING	TRADE OR CALLING AND IN WHOSE EMPLOY
<u>One Year High School</u>	<u>Butcher,</u> <u>James Inglis Reed,</u> <u>Vancouver, B.C.</u>

DATE OF ENROLMENT	RATING FOR WHICH ENROLLED	H.M.C.S. ESTABLISHMENT IN WHICH ENROLLED
<u>18th Aug. 1943.</u>	<u>Ord. Seaman</u>	<u>HMCS "DISCOVERY"</u>

(B) DECLARATION TO BE MADE BY APPLICANT

I hereby declare as follows:—

- (1) That I am a British Subject domiciled in Canada.
- (2) That I am desirous of being enrolled as a member of the Royal Canadian Naval Volunteer Reserve Force, and that I accept and agree to abide by the rules of the said Force.
- (3) That * (a) I have never served, and am not serving in any Naval, Military, Reserve, or Territorial Force.

* (b) I served in for the period shown, and attach my record of service, in corroboration of this statement.

*Cross out Clause not applicable.

SERVED IN	RANK	FROM
-	-	-

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

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

IN POSSESSION OF U.I.B BOOK?

Personnel Records Division.

1. Noted in Records Guaranteed

2. Index Card Guaranteed

3. Non-Sub. Card Guaranteed

4. His Majesty's Forces on Guaranteed

5. R. and S. Guaranteed

6. Guaranteed

7. Guaranteed

8. Guaranteed

DATES 11.9.43

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

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

(b) To report for active service when called and 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 naval establishment 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, until called into active service, not to wear such uniform or outfit (which is and remains the property of the Crown) except when on naval duty.

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

(e) I have not been induced to enter as Ordinary Seaman by the prospect of being transferred at some future date to any other branch or rating.

Dated this 18th day of August, 1943.

Signature of applicant Roy Smith

(C) CERTIFICATE OF ATTESTING OFFICER

I hereby certify that all the foregoing statements were made by the volunteer above named and that he has made and signed the above declaration in my presence on this 18th day of August, 1943.

My authority for attestation is NS 114-1-46 of 3rd Nov. 1942.

[Signature]
Signature of and rank of Attesting Officer.

(D) OATH OF ALLEGIANCE

I, William Roy SMITH do sincerely promise and swear (or solemnly declare) that I will be faithful and bear true allegiance to His Britannic Majesty, His heirs and successors according to law.

Signature of Applicant Roy Smith

Witness [Signature]

Date 18th Aug. 1943.

Rank Lieutenant, RCNVR

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

NOTE.—Attestation Form in duplicate, Certificate of Medical Examination (B-207) in duplicate, Occupational History Form in triplicate and certificates of previous service are to be forwarded to Naval Service Headquarters **immediately** after attestation.

Certificates of previous service will be returned after examination.

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>nil</i>		
2	Children of the Deceased and dates of their Births.....	<i>nil</i>		
3	Father of the Deceased.....	<i>K93518 Sgt. Stewart M. L. Smith</i>	<i>46</i>	<i>1156 Quill St Medicine Hat</i>
4	Mother of the Deceased.....	<i>Mrs. Louise Smith</i>	<i>42</i>	<i>1156 Quill St Medicine Hat</i>
5	Brothers of the Deceased	<i>K76771. Cpl. S. Gordon Smith</i>	<i>21</i>	<i>England.</i>
		<i>R. Leverage Smith</i>	<i>11</i>	<i>1156 Quill St. Medicine Hat</i>
6	Sisters of the Deceased	<i>Mrs. M. Yoda Scott (nee) Smith</i>	<i>22</i>	<i>313 Hallmines Road Nelson B. C.</i>
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	
	<i>nil.</i>	<i>nil</i>	<i>nil.</i>	

Mrs. Louise SMITH

1156 Yuill STREET

MEDICINE HAT, ALBERTA

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

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

and the following number quoted:—

H.Q. NS V-69525 ED 1043

DEPARTMENT OF NATIONAL DEFENCE
ESTATES BRANCH
OTTAWA, ONT.

26th February 1945

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

SMITH, William Roy Ordinary Seaman

V-69625 R.C.N.V.R.



it is necessary that certain information regarding the deceased and his relatives should be furnished the Estates Branch. You are asked therefore to read the enclosed memorandum before completing pages 2 and 3 of this form. The particulars required are to be carefully filled in and the Declaration on page 4 should then be signed in the presence of a Clergyman, Priest, Local Magistrate, Commissioner for Oaths, Notary Public or a Commissioned Officer of any of His Majesty's Forces who should be asked to complete and sign the Certificate. This form should then be returned to the above address.

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.

HRW/MJ

H. H. Weir
Commander RCHM
Director of Estates.

ANSWER FULLY EACH QUESTION ON THIS PAGE
PARTICULARS AS TO IDENTITY

8	Full names of the deceased.	William Roy Smith
9	Date of his birth.	July 30 th 1925
10	Place and date of his marriage.	nil
11	Place and date of his parents' marriage.	21 st Oct. 1921. Carstairs Alta

PARTICULARS OF DOMICILE

12	Place where deceased was born.	Nelson B.C.
13	State, in order, the Province, State and/or County in which he resided before enlistment and the period of time in each.	(a) British Columbia (b) <input checked="" type="checkbox"/> (c) <input type="checkbox"/> (d) <input type="checkbox"/>
14	Nature of employment before enlistment.	Butcher, Learning Trade
15	State whether he owned the premises in which he lived, and, if so, where situated.	nil
16	Name place where deceased stated he intended to make his permanent home.	Vancouver B.C.

PARTICULARS OF ESTATE

17	Did he leave a Will? If in your custody, please forward.	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. Do you wish it administered with the pay account?	No —
20	Amount of War Savings Certificates held by deceased. Indicate where located.	No —
21	Amount of Victory Loan Bonds held by deceased. Indicate whether registered or bearer and where located.	One Hundred dollar bond. not reg. held by mother Louise Smith
22	If deceased had life insurance, name companies and amount payable under each policy and the person named as beneficiary therein.	No —
23	Describe other assets, if any, and estimated value thereof. Use space on page 4 if necessary.	No —

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.	(a) no — (b) not known. 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.)

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

* Mother of the deceased.

N.B.—To be signed in full in the presence of a Clergyman, Priest, Local Magistrate, Commissioner or Notary Public or Commissioned Officer of any of His Majesty's Forces.

Mrs. Louise Smith

{ Signature
of
Informant

1156 Quill St. Medicine Hat Address

CERTIFICATE

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

*See above.

..... { Name of informant } is the* Mother of the Deceased above described. The above Declaration was made by the Informant and signed in my presence.

Dated at Medicine Hat this 3rd day of May 19 45

Signature of Clergyman,
Priest, Magistrate,
Commissioner or
Notary Public or Com-
missioned Officer of any
of His Majesty's Forces.

Qualification Commissioned Officer

Address Capt. R. E. Bradford
Camp 132. M. H.

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

REPORT OF THE DEATH OF AN OFFICER, MAN OR BOY

H.M.C.S. "SHAWINIGAN" at Sea

Name SMITH, William Roy
(Christian names in full)Rank of Rating Ordinary Seaman Official No. V69625 RCN.V.R.
(If unknown, date of first entry)

Place of Birth Nelson, B.C. Date of Birth 30th July, 1925

Occupation in Civil Life Butcher Religion Church of England

Number of years service in the Navy (Long Service R.C.N., or mobilized service in case of R.C.N.
(Temporary) or Reserve ratings) 8th Sept., 1943 - 24th November, 1944

Date of Death 24th November, 1944 Place of Death At Sea

Cause of Death Enemy action - lost at sea
(If due to accident, violence, or enemy action, particulars to be stated briefly)Nearest known relative or friend { Name Mrs. Louise Smith Relationship Mother
Address 1156 Yuill St., Medicine Hat, Alta

Date on which the above was informed by Ship Not known

Date on which death was registered with local Officials Not known

In the case of Imperial Service men, whether Active Service, Pensioner or Reserve, date on which the prescribed return was rendered to the Registrar General in London, Edinburgh or Dublin, according to Nationality

Place of Burial (if known) Date of Burial (if known)

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

Undertaker employed (if any)

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

H. S. R. S.
Commanding Officer,
11/5 1945The NAVAL SECRETARY,
Department of National Defence,
Ottawa, Canada.

In all cases this Form is to be sent in addition to the Report by Telegraph required by the Regulations.

Distribution: File, Imp. W. G. Com., Dom. Stat., Register.

Noted D. N. Pa
M. M. Q.
16/4/45

37

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

CERTIFICATE of the SERVICE of

William Roy SMITH

in the Royal Canadian Naval Volunteer Reserve

N.S. 52283

Training Headquarters	R.C.N.V.R. Division	Official Number
	<i>H.M.C.S. Discovery</i>	<i>V-69625</i>

Date of Birth	<i>30 July, 1925</i>	Name and Address of Nearest Relative or Friend (in pencil)
Place of Birth	<i>Nelson, B.C.</i>	<i>Mother:</i>
Place of Residence	<i>614 Ave E. Vancouver, B.C.</i>	<i>Louise Smith</i>
Trade brought up to	<i>Butcher</i>	<i>same.</i>
Religion	<i>Church of England</i>	
Can Swim:—P.P.T.	Date.....19.....	Signature.....Rank.....
P.S.T.	Date.....19.....	Signature.....Rank.....

PARTICULARS OF SERVICE				MEDALS, DECORATIONS, etc.		
Date of Actual Volunteering	Date of Enrolment or re-enrolment	Period Volunteered for	Rating on Enrolment or Re-enrolment	Date of		Nature of Decoration
				Award	Presentation	
	<i>18 Aug '43</i>	<i>Hostilities End Sm.</i>				

PERSONAL DESCRIPTION							
	Height		Chest (mean)	Weight	Hair	Eyes	Complexion
	Feet	Inches					
On Entry	<i>5</i>	<i>8 1/4</i>	<i>35</i>	<i>126 1/2</i>	<i>Dark Brown Wavy</i>	<i>Fair</i>	<i>Nil.</i>
On re-enrolment—6 years' Service							
On re-enrolment—12 years' Service							
Further Description if necessary							

TRANSFER BETWEEN DIVISIONS			TRANSFER—LISTS A AND B		
From	To	Date	List	Date	Authority

NAVAL TRAINING and ACTIVE SERVICE

Year	SHIP OR ESTABLISHMENT	NON-SUB. RATE	RATING	FROM	TO	CAUSE OF DISCHARGE
	Discovery		Ord. Serv.	18 Aug. '43	7 Sep. '43	
	Discovery		Ord. Active Service			
	Cornwallis		Ord. Serv.	3 Sep. '43	31 Dec. '43	
			— " —	1 Jan. '44	13 May '44	
	Stadacona		— " —	13 May '44	9 June '44	
	Stadacona (Shumigan)		— " —	10 June '44	7 Sep. '44	A-9923
			A.B.	8 Sep. '44	24 Nov. '44	D.D.

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

[illegible]

V69625

OFFICIAL NUMBER

FILE NUMBER

113-S-5477

OFFICIAL NUMBER

V69625

NAME

SMITH

(Surname)

William Roy

(Given Names)

DATE OF BIRTH

30 July 1925

PLACE OF BIRTH

Nelson, B.C.

OCCUPATION

Butcher

RELIGION

Church of England

EDUCATION

One Year High School

RESIDENCE AT TIME OF ENLISTMENT: Street and No.

6 14th Avenue East

Town

Vancouver

Province, etc

B.C.

ENGAGEMENTS

Date (in figures)			Period
Day	Month	Year	
18	8	43	H.O.

DESCRIPTION

Height	Hair	Eyes	Complexion	Marks or Scars
5' 8 1/2"	D. Brn.	Hazel	Fair	

PREVIOUS SERVICE

Served in	Rank or Rating	Dates	
		From	To

NEXT OF KIN RELATIONSHIP (in pencil)

Mother

NAME (in pencil)

William Roy

ADDRESS (in pencil): Street and No.

6 East 14 Avenue

Town

Province, etc.

B.C.

MEDALS, CLASPS, HURT CERTIFICATES, PRIZE MONEY

Date (in figures)			Particulars
Day	Month	Year	

EXAMINATIONS, CERTIFICATES, ETC.

Date (in figures)			Particulars
Day	Month	Year	
22	3	44	Marked "TR".

BADGES, G.C. OR G.S.

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

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

SHIP OR ESTABLISHMENT	Wt. No.	Date (in figures)			BRIEF PARTICULARS OF OFFENCE	PUNISHMENT
		Day	Month	Year		

Date (in figures)

Day Month Year

DAYS FORFEITED

Prison Det'n Cells C. Power W. Trial In diff. Char.

O.H.F. Received

SECOND CLASS FOR CONDUCT

From

To

W.S.G.
APPLICATION
10800
RECEIVED

V69625

OFFICIAL NUMBER

NAME SMITH
(Surname)

William Roy
(Given Names)

OFFICIAL NUMBER

P.I.B. 7
V69625

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
H.M.C.S. Discovery	Ord. Seaman	18	8	43	Div. Str. Vancouver	V.G.	Sat.	31	12	43	A.A. 111	6	5	44			
"	"	8	9	43	Act. Serv. D.L. #306 8/9/43	V.G.	Supr.	24	11	44							
Cornwallis	"	1	1	44	D.R.D. # 402												
Stadacona	"	13	4	55	Ser. Cert.												
Orillia	"	27	5	44	DRD Sh.170 Pg.10												
Stadacona	"	5	6	44	DRD #177 Pg.2												
Shawinigan	"	11	6	44	DRD Sh.190 Pg.14												
	A.B.	8	9	44	Rated 249A/A 9935												
DISCHARGED	"	24	11	44	"MISSING" Presumed Dead"	Casualty											

GENERAL REMARKS

Canadian Memorial Cross awarded to
Mother: Mrs. Louise Smith,
1156 Yull St.,
Medicine Hat, Alberta
to date 6-4-45

DATE OF BIRTH	PLACE	CIVIL OCCU	REL-ED	PERM. RESIDENCE	PREM ENL.	RANK OR RATE
DY. MO. YR.	BIRTH	MAIN SUB	GION	P. CTY. TOWN	SERN DIV.	A BR RANK
30 7 25	18	247 0	30	29 04 10	0 08	0 08 95
ENLIST. DATE	ACT. SERV. DATE	STR.	ACT. SERV. DATE	SHIP OR	RANK OR RATE	
DY. MO. YR.	DY. MO. YR.	CAT.	DY. MO. YR.	ESTAB.	A BR RANK	
18 08 43	09 43			9625	0 08 95	
SENIORITY	STR.	NON-SUB	M	CODED	CHECKED	
DY. MO. YR.	CAT.	A B	ST.			
09 09 43	13	00 00				

D OF D 24-11-44

DEPARTMENT OF VETERANS AFFAIRS

AWARDS

NAVY

D.D.

WAR SERVICE RECORDS

SMITH	William Roy	V-69625	A.B.	FILE No.
SURNAME (IN BLOCK LETTERS)	CHRISTIAN NAMES	REG. No.	RANK ON DISCHARGE	C.A.S.F. UNIT

WAR SERVICEBADGE

(CLASS)

• No.

DATE DESPATCHED:

ADDRESS:

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

MEDALS RET'D UNDER IN 'RD
RET'D TO STOCK.

CANCELLED 76 TO 16-1-50

8531 16-5-51

(THE REVERSE TO BE USED FOR ESTATE PURPOSES)

RCNVR Oct. 45 "SHAWINIGAN"

MEDALS AND MEMORIALS—DECEASED PERSONNEL

REGISTRATION No. DATE OF DESPATCH

(1) MEDALS

PERSON

ENTITLED TO ~~Mr. Stewart M. L. Smith --- Father.~~

ADDRESS: ~~1156 Yrill Street,~~ Mrs. Louise G. Smith⁽¹⁾ (Mother)
~~Medicine Hat, Alberta.~~ Cosmopolitan Hotel,
Cranbrook, B.C. 15 May 51

(2) MEMORIAL CROSS

WIDOW

ADDRESS:

(3) MEMORIAL CROSS

MOTHER Mrs. Louise Smith

ADDRESS: 1156 Yerill St., Medicine Hat, Alta.

(2) MEMORIAL BAR

DATE DESP.....

REGN. NO. 383

(3)

6-4-45