



Rfn Capraru, Vasil Regina Rif
 Pte Capstick, Elmer RCAMC
 Pte Carbery, John Ir RC
 Sgt Card, Marshall William RCAF
 Pte Card, William Frank RCASC
 AB Carder, Wilfred Walter RCNVR
 Lt Cardin, Armand Edgar R22°R
 O/P Cardinal, Joseph Jacques Bruno RCAF
 Cpl Cardinal, Roma Fus MR
 Pte Cardinal, Solomon L EdmnR
 Sgt Careau, Louis Maurice R22°R
 Pte Carefoote, Sheldon Fredrick N Shore R
 Pte Carey, Charles Anthony Perth R
 Pte Carey, Clarence Allen - Essex Scot
 F/L Carey, Douglas Mintie, DFC RCAF
 Cpl Carey, Orren Willard RCAF
 AB Carey, Percival George RCNVR
 P/O Carey, Robert William Burdell RCAF
 Sgt Carkner, Duncan McVey RCAF
 Sig Carl, Charles Gordon RCNVR
 Sgt Carle, Robert, MM 48 Highrs
 Pte Carleton, Ernest John - Essex Scot
 F/O Carleton, Reginald Harvey RCAF
 Pte Carl, Ora Sylvester Carl & York R
 P/O Carlson, Alfred RCAF
 Pte Carlson, Carl Wilfred Alg R
 Pte Carlson, Clifford Emil RCASC
 Pte Carlson, Douglas Frederick RCIC
 F/S Carlson, Elmer Kenneth RCAF
 P/O Carlson, Ernest William Bernard RCAF
 Rfn Carlson, Gordon Lennard R Wpg Rif
 Pte Carlson, John Oscar Clifford R Regt C
 Cpl Carlstrom, Roy Sigmund A & SH of C
 Pte Carlton, Joseph A & SH of C
 Pte Carmichael, Bruce - Seaforth of C
 Rfn Carmichael, Charles Elmer Kenneth QOR of C
 Pte Carmody, William Warren RHC
 Maj Carnegie, James Lindsay RHC
 F/O Carnegie, Thomas RCAF
 Pte Carney, Harry RCAMC

LAC Carney, William Charles RCAF
 WO II Carnie, Charles Tate, MM RCAF
 P/O Carol, Roy Frank RCAF
 O/P Caron, Antoine Alexandre RCAF
 Gerald Arthur RCAF
 Sgt Caron, François Noël R22°R
 Pte Caron, Gustave Joseph S Sask R
 O/P Caron, Joseph Aurèle Roland RCAF
 Pte Caron, Louis Alfred Ir RC
 Pte Caron, Lucien Fus MR
 Art Caron, Paul - Emile RCA
 Spr Caron, Paul Joseph RCE
 Pte Caron, Pierre - Paul R22°R
 Pte Caron, Raymond RCASC
 Pte Carpenter, Edward A. Oxf Bucks
 F/L Carpenter, Eric Charles RCAF
 Sgt Carpenter, Ernest RCA
 Sgt Carpentier, Gabriel Gen List
 Rfn Carr, Joseph Edward QOR of C
 Sgt Carr, Leo Augustave RCAF
 Pte Carr, Leonard Charles S Sask R
 Pte Carr, Leslie Edward Perth R
 Pte Carr, Samuel James West NSR
 Pte Carr, Stanford William Perth R
 Sgt Carr, Stuart Allan RCAF
 Tpr Carragher, James Charlie S Alta R
 Cpl Carrie, Robert RCASC
 Pte Carrie, Robert RCR
 Pte Carrier, Alyre Fus MR
 Sgt Carrier, Joseph Louis Philippe Denis RCAF
 Tpr Carrière, Florio BCD
 Pte Carrière, Frédéric Essex Scot
 Pte Carrière, Gabriel E. R Regt C
 O/P Carrière, Joseph Charles Lionel RCAF
 Pte Carrière, Laurent RCASC
 Pte Carrière, Victor Vermon - R Regt C
 Pte Carrière, Wilfred Albert - R de Mais
 Rfn Carrière, William Joseph - R Wpg Rif
 L/Cpl Carrigan, Daniel Maxwell West NSR
 Pte Carrigan, Orville Kenneth RHC
 Pte Carroll, John Reginald Ir RC
 Pte Carroll, Bernard Clarence SD & G Highrs
 Pte Carroll, Harry Dent - Linc & Well R

V62462
CARDER
WILFRED

WALTE

RCNVR ~~March 46~~ "ALBERNI"
MEDALS AND MEMORIALS—DECEASED PERSONNEL

REGISTRATION No. DATE OF DISPATCH

(1) MEDALS

PERSON

ENTITLED TO Mrs. Emily Carder - Mother

ADDRESS: 212½ Queen Street,
Chatham, Ontario.

(2) MEMORIAL CROSS

WIDOW

ADDRESS:

(3) MEMORIAL CROSS

MOTHER

Mrs. Emily Carder

ADDRESS: 212½ Queen Street,
Chatham, Ont.

MEMORIAL B R

(1)

DATE DESP.....

REGN. NO. 283

(2)

(3)

17-1-45

D OF D 21-8-44

NAVY

D.D.

DEPARTMENT OF VETERANS AFFAIRS

AWARDS

WAR SERVICE RECORDS

CARDER

Wilfred Walter

V-62462

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:

CAMPAIGN MEDALS

REGISTRATION NUMBER AND DATE DESPATCHED

1939-45 Star

France Ger. Star

C.V.S.M. & Clasp

War Medal

6857

(THE REVERSE TO BE USED FOR ESTATE PURPOSES)

D.V.A. FILES

MEDALS AND MEMORIALS—DECEASED PERSONNEL

REGISTRATION No. DATE OF DESPATCH

(1) MEDALS

PERSON

ENTITLED TO Mrs. Emily Garder - Mother

212 $\frac{1}{2}$ Queen St.,

ADDRESS: Chatham, Ontario.

(1)

(2) MEMORIAL CROSS

WIDOW

ADDRESS:

(2)

(3) MEMORIAL CROSS

MOTHER

ADDRESS:

(3)

G-636

G-636

DEPARTMENT OF VETERANS AFFAIRS

AWARDS NAVY ?

WAR SERVICE RECORDS
D.D.

P.

CARDER

~~CARDER~~ Wilfred Walter

V-62462

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:

267746

CAMPAIGN MEDALS

REGISTRATION NUMBER AN DATE DESPATCHED

1939-45 Star, ATL.
Fr. Ger. Star & Clasp,
C.V.S.M. & Clasp,
War Medal.

7729

(THE REVERSE TO BE USED FOR ESTATE PURPOSES)

V62462

OFFICIAL NUMBER

FILE NUMBER

113-C-4655

OFFICIAL NUMBER V62462

NAME CARDER, Wilfred Walter (Surname) (Given Names) DATE OF BIRTH 1 May 1925PLACE OF BIRTH Chatham, Ont. OCCUPATION LabourerRELIGION Church of England EDUCATION 1 Year Vocational SchoolRESIDENCE AT TIME OF ENLISTMENT: Street and No. 285 Queen St. Town Chatham Province, etc. Ont.

ENGAGEMENTS				DESCRIPTION					PREVIOUS SERVICE			
Date (in figures)			Period	Height	Hair	Eyes	Complexion	Marks or Scars	Served in	Rank or Rating	Dates	
Day	Month	Year									From	To
27	5	43	H.O.	5'9"	Brown	Brown	Fair	Nil.				

NEXT OF KIN RELATIONSHIP (in pencil) Mother (29-10-43-CH) NAME (in pencil) Emily CarderADDRESS (in pencil): Street and No. 212 1/2 Queen St Town Chatham Province, etc. Ont.

MEDALS, CLASPS, HURT CERTIFICATES, PRIZE MONEY				EXAMINATIONS, CERTIFICATES, ETC.								
Date (in figures)			Particulars	Date (in figures)			Particulars	Date (in figures)			PARTICULARS	
Day	Month	Year		Day	Month	Year		Day	Month	Year		
				16	9	43	Qual. Anti-Gas 1 day					
				5	11	43	Marked "TR" 249A A17658					

BADGES, G.C. OR G.S.				BRIEF PARTICULARS OF WARRANT OR C.M. PUNISHMENTS AND C.P. CHARGES							
Date (in figures)			1st, 2nd or 3rd G.C. or G.S.	Granted Deprived Restored	SHIP OR ESTABLISHMENT	Wt. No.	Date (in figures)			BRIEF PARTICULARS OF OFFENCE	PUNISHMENT
Day	Month	Year					Day	Month	Year		

Date (in figures)			DAYS FORFEITED						O.H.F. Received.
Day	Month	Year	Prison	Det'n	Cells	C. Power	W. Trial	In diff. Char.	

SECOND CLASS FOR CONDUCT

From To



FILM
NO. 4111-1007-2
DATE

1 2 3 4 5 6 7 8 9 10 11 12 13 14 15 16 17 18 19 20 21 22 23 24 25 26 27 28 29 30 31 32 33 34 35 36 37

V62462

OFFICIAL NUMBER

NAME

CARDER,

Wilfred Walter

(Surname)

(Given Names)

OFFICIAL NUMBER

V62462

PIB

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 Hunter	Ord. Smn.	27	5	43	Div. Str. Windsor	V.G.	Sat.	31	12	43							
"	"	8	6	43	Act. Svce. D.L. 8-6-43.	V.G.	SAT.	21	8	44							
Queen Charlotte	"	9	6	43	D.L. 8-6-43.												
Cornwallis D.B.	"	10	8	43	D.L. 10/8/43. (Husky 9/10/43 to 15/10/43)												
Stadacona	"	27	11	43	DRD H-3350												
Alberni	"	30	11	43	DRD H-3381												
"	Able Smn.,	8	7	44	Rated. Service Certificate.												
DISCHARGED	"	21	8	44	"Missing" Casualty List. "Presumed Dead" Sub. 19/2/45.												

GENERAL REMARKS

CANADIAN MEMORIAL CROSS SENT TO:-
 Mother, Mrs. Emily Carder,
 212 $\frac{1}{2}$ Queen Street,
 CHATHAM, Ontario. (17-1-45).

DATE OF BIRTH			PLACE OF BIRTH		CIVIL OCCU.		RELI.	ED.	PERM. RESIDENCE			PREV. ENLI.	RANK OR RATE ON ENLISTMENT			
DY.	MO.	YR.	BIRTH	MAIN	SUB	SION			P.	CTY.	TOWN	SERV.	DIV.	A	BR.	RANK
01	5	25	"	900	0	302	1	23	03	0	11	0	08	90		
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			
27	05	43	08	06	43					1520	0	08	95			
SENIORITY			STR.	NON-SUB		M				CODED	CHECKED					
DY.	MO.	YR.	CAT.	A	B	ST.										
08	06	43	13	00	00											

(Information extracted from Naval Service Headquarters' Records.)

Four copies to be rendered to Naval Service Headquarters

33

REPORT OF THE DEATH OF AN OFFICER, MAN OR BOY

H.M.C.S. NAVAL SERVICE HEADQUARTERS at OTTAWA, Ont.

Name GARDER, Wilfred Walter
(Christian names in full)

Rank of Rating Ordinary Seaman Official No. V-62462 R.C.N.V.R.
(If unknown, date of first entry)

Place of Birth Chatham, Ontario. Date of Birth 1st May 1925

Occupation in Civil Life Labourer 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) 1 year and 3/4 months.

Date of Death 21st August, 1944 Place of Death AT SEA

Cause of Death Missing, presumed killed on the 21st of August, 1944, when the ship in which he was serving, H.M.C.S. "ALBERNI", was lost in the English Channel due to enemy action.
(If due to accident, violence, or enemy action, particulars to be stated briefly)

Nearest known relative or friend { Name Mrs. Emily Garder Relationship Mother
Address 212 1/2 Queen St., CHATHAM, Ont.

Date on which the above was informed by Ship's Naval Service Headquarters, Ottawa 23 Aug. 1944.

Date on which death was registered with local Officials.....

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.....
(if known) (if known)

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

Undertaker employed.....
(if any)

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

Noted D. J. D.
mms
15/3/45
Commanding Officer,
OTTAWA, Ont. 28 February 1945.

The NAVAL SECRETARY, Naval Board,
Department of National Defence,
Ottawa, Canada.

H.B. Money
SECRETARY, NAVAL BOARD.

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.



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..... **CARDER, Wilfred** Rating..... **A.B.**
 Official No. **V62462** H.M.C.S. **NIOBE** for **ALBERNI** List **12.II/33**
 Who* **Discharged Dead** on the **21st August** 19 **44**

Net sum due on ledger on account of Wages.....	\$	cts.	
	120	09	
Proceeds of sale of Effects charged against Wages, brought from the other side			
CASH—	\$	cts.	
Proceeds of sale of Effects, brought from the other side.....			
Found amongst Effects.....			
Debts collected \$.....			
Cash deposited by official Receipt No.....			
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) Fifteen dollars; Eight dollars and forty cents charged to 31 Aug.			
Name of ship from which transferred.....			
Total†..... Creditor	120	09	Note;

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 **Niobe** for **Alberni** amounting to a net balance†..... **creditor** of **One Hundred and Twenty** dollars..... **Nine** cents.

Dated on board H.M.C.S. **Niobe** at **Greenock** **Scotland** this **seventeenth** day of **May** 19 **45**.

Approved *DP Dawson* Accountant Officer
A/Commander (S) RCNVR
} Initials of the Assistant Accountant Officer
Lieutenant (S) RCNVR
 _____ Commanding Officer.
D. A. Lang
for A/CAPTAIN RCNVR

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.

C.N.S. 46 Note: The above sum has been recovered by Niobe March cash acc't. receipt voucher N-R-1549.
 10M-3-43 (8719)
 H.Q. N.S. 815-9-45

ORIGINAL

DOMINION OF CANADA

REVISED FEB. 1944
REVISÉE EN FEV. 1944

T. 7 IND.

INCOME TAX - IMPÔT SUR LE REVENU
NOTICE OF ASSESSMENT - AVIS DE COTISATION

BE 55660

#113/DL

BASED ON INCOME OF
BASÉ SUR LE REVENU DE 1943FILE
DOSSIER

199

ACCOUNT
COMPTE

The Receiver Gen. for acc't of the late
Wilfred CARDER, Chatham, Ont.
% Administrator of Estates,
Dept. of National Defence,
OTTAWA, Ont.

1. DISTRICT OFFICE
BUREAU DE DISTRICT

LONDON

DATE MAILED
POSTÉ LE

May. 3

194

5

2. YOUR TAXABLE INCOME HAS BEEN DETERMINED IN THE SUM OF:
VOTRE REVENU IMPOSABLE, TEL QUE DÉTERMINÉ, S'ÉLÈVE À:

\$ 544.36

3. YOU ARE HEREBY ASSESSED AS FOLLOWS:-
VOUS ÊTES PAR LES PRÉSENTES COTISÉ COMME SUIT:-(1) AMOUNT OF TAX LEVIED (INCLUDING REFUNDABLE PORTION, IF ANY)
MONTANT D'IMPÔT PRÉLEVÉ (Y COMPRIS LA PORTION REMBOURSABLE S'IL EN EST)TAX - IMPÔT
\$ Nil

INTEREST - INTÉRÊTS

(2) PENALTY FOR LATE FILING
AMENDE POUR RETARD À PRODUIRE

\$ Nil

(3) TOTAL

\$ Nil

(4) PAID BY DEDUCTION AT SOURCE
MONTANT DÉDUIT À LA SOURCE

\$ 80.04

(5) BALANCE OF ASSESSMENT
SOLDE DE LA COTISATION

Cr. \$ 80.04

(6) OTHER PAYMENTS APPLIED ON THIS ASSESSMENT
AUTRES PAIEMENTS AFFECTÉS À CETTE COTISATION

\$

(7) BALANCE PAYABLE
SOLDE EXIGIBLE

REFUND CHEQUE HEREWITH

\$ 80.04

(SEE ITEM 6) A (VOIR L'ITEM 6)

4. AMOUNT PAYABLE AS AT (SEE ITEMS 6 TO 8, REVERSE SIDE)
MONTANT PAYABLE AU (VOIR ITEM 6 À 8 AU VERSO)

194

C. Fraser Elliott,
DEPUTY MINISTER OF NATIONAL REVENUE
SOUS-MINISTRE DU REVENU NATIONAL

NOTICE OF REFUND

The attached Departmental cheque is issued in payment of the amount overpaid by you as shown on the attached assessment notice Form T 7.

C. FRASER ELLIOTT,
Deputy Minister (Taxation).

T 7R—Req. 7721—600M—9-43

REFUNDABLE SAVINGS PORTION 1943

THE GOVERNMENT OF THE DOMINION OF CANADA
IN RESPECT OF THE ASSESSMENT IMPOSED UPON THE
TAXPAYER HEREIN, AS SHOWN IN ITEM 3, ACKNOWLEDGES,
AFTER THE TAXPAYER HAS PAID THE SAID ASSESSMENT,
THE REFUNDABLE PORTION OF THE SAID TAX IN

THE SUM OF
LE MONTANT DE

TO BE REPAYABLE TOGETHER WITH 2% INTEREST THEREON
AS REQUIRED BY STATUTE—SECTION 93 OF THE INCOME
WAR TAX ACT—AND SUBJECT TO THE CONDITIONS SET
FORTH IN ITEM 9 ON THE REVERSE SIDE HEREOF.

Colin Pitt
MINISTER OF NATIONAL REVENUE
MINISTRE DU REVENU NATIONAL

PORTION D'ÉPARGNE REMBOURSABLE

LE GOUVERNEMENT DU DOMINION DU CANADA
EN CE QUI CONCERNE LA COTISATION IMPOSÉE AU CONTRI-
BUIBLE, PARAISSANT À L'ITEM 3 DES PRÉSENTES, RE-
CONNAÎT, APRÈS ACQUITTEMENT DE LADITE COTISATION
PAR LE CONTRI BUIBLE, QUE LA PORTION REMBOURSABLE
DUDIT IMPÔT POUR

\$ Nil

DOIT ÊTRE REMISE EN PLUS D'UN INTÉRÊT DE 2% SUR
LEDIT MONTANT, TEL QUE PRÉVU DANS LA LOI DE L'IMPÔT
DE GUERRE SUR LE REVENU, ARTICLE 93, SOUS RÉSERVE
DES CONDITIONS ÉNONCÉES À L'ITEM 9 AU VERSO.

C. Fraser Elliott
DEPUTY MINISTER OF NATIONAL REVENUE FOR TAXATION
SOUS-MINISTRE DU REVENU NATIONAL POUR L'IMPÔT

DO NOT DETACH

NE PAS DÉTACHER

ESTATES BRANCH

HQ NS V.62462 FD768

March 1, 1945.

Mrs. Emily Carder,
212¹/₂ Queen Street,
Chatham, Ontario.

CARDER, Wilfred W., O/D (Deceased)
No. V.62462 R.C.N.V.R.

Dear Mrs. Carder:

Receipt is gratefully acknowledged of completed form P.64 herein which appears to be quite in order and I have to advise you that according to the Casualty Notice received at this Directorate, there is no record of any Service Will on file at Naval Service Headquarters and you apparently know of none.

We do not anticipate receiving any personal effects from any of the casualties of H.M.C.S. "Alberni" so no Will may be expected from that source and it is probable that the Service estate herein will be distributed as an intestacy for the province of your late son's domicile which is understood to be Ontario. The intestacy law of Ontario provides that the amount be paid to yourself and your minor daughter in equal shares, but the full amount will be paid to you in due course with half of same for the use and benefit of the minor sister, Betty Jane.

The finalized statement of pay and allowances herein, to admit of distribution of any available Service estate has not yet been received but as soon as particulars of same come to hand, a further communication will be sent to you with instructions as to the procedure for dealing with the War Savings Certificates in your possession.

Dependents of deceased personnel are apparently entitled to War Service Gratuity and application forms for same may be obtained at your local Post Office. These should be completed and forwarded

direct to the Secretary of the Naval Board, Naval Service Headquarters,
Ottawa, Ontario for the attention of the Director of Naval Pay Accounting.

Yours faithfully,

A handwritten signature in dark ink, appearing to be 'M. L. C.', written in a cursive style.

Director of Estates.

HRW/MK

Mrs. Emily Carder
 212½ Queen Street
 Chatham, Ontario

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-62462 FD.768

DEPARTMENT OF NATIONAL DEFENCE
 ESTATES BRANCH
 OTTAWA, ONT.

February 19, 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

CARDER, Wilfred Walter, O/D (Deceased)

No. V.62462, 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/JN

A. W. Warden
 Commissioner for Oaths
 Director of Estates.

ANSWER IN FULL ALL APPLICABLE QUESTIONS

STATEMENT of the Names, Ages and Addresses or Dates of Death, of all the relatives that the deceased ever had in each of the degrees specified below:

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.....			
2	Children of the Deceased and dates of their Births.....			
3	Father of the Deceased.....	<i>died. December 3rd 1903 he was with the RCAF at Vancouver Island</i>		
4	Mother of the Deceased.....	<i>yes Mrs Emily Corder</i>	<i>39</i>	<i>212 1/2 Queen St Chatham Ontario</i>
5	Brothers of the Deceased	Full Blood		
		Half Blood		
6	Sisters of the Deceased	Full Blood	<i>16</i>	<i>Betty Jane Corder 212 1/2 Queen St Chatham Ontario</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.	Wilfred Walter Border
9	Date of his birth.	May 1st 1925
10	Place and date of his marriage.	
11	Place and date of his parents' marriage.	Statham Ontario Jan 28. 1925

PARTICULARS OF DOMICILE

12	Place where deceased was born.	Statham Ontario
13	State, in order, the Province, State and/or County in which he resided before enlistment and the period of time in each.	(a) Statham Ontario all his (b) life (c) life (d)
14	Nature of employment before enlistment.	Shopless as a picker
15	State whether he owned the premises in which he lived, and, if so, where situated.	
16	Name place where deceased stated he intended to make his permanent home.	

PARTICULARS OF ESTATE

17	Did he leave a Will? If in your custody, please forward.	
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?	
20	Amount of War Savings Certificates held by deceased. Indicate where located.	10 five dollar War saving certificates 212 1/2 Queen St Statham Ont ✓✓
21	Amount of Victory Loan Bonds held by deceased. Indicate whether registered or bearer and where located.	
22	If deceased had life insurance, name companies and amount payable under each policy and the person named as beneficiary therein.	Prudential insurance company Three hundred and seventy one dollars Mrs E. M. Border
23	Describe other assets, if any, and estimated value thereof. Use space on page 4 if necessary.	

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.	
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.	

(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 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 Emily Carder {Signature of Informant
212 1/2 Queen St. Chatham Ontario Address

CERTIFICATE

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

See above. Emily Carder { 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 Feb. 21st Chatham Ont. this 21st day of Feb. 1945

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

Rev. D. Mass Qualification Clergyman, Rev. Christ Ch Chatham Ont.
Address 43 William St. Chatham Ontario

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

TO:
DEC 16 1944

N.C.R.

PLEASE MAKE OUT FALSE
DOCKET AND FORWARD WITH
ATTACHED LETTER TO ADMIN-
ISTRATOR OF ESTATES.



Department of National Defence

Naval Service

IN REPLY PLEASE QUOTE

No. N.S. V-62462. PERS. (N)

26
DEC 16 1944 194

39352



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 & CAUSE of DEATH</u>	<u>NEXT OF KIN</u>
CARDER, Wilfred Walter Ordinary Seaman, V-62462. R.C.N.V.R.	Missing, presumed dead on 21 August, 1944, from H.M.C.S. "ALBERNI".	Mother: Mrs. Emily Carder, 212 $\frac{1}{2}$ Queen Street, CHATHAM, Ontario.

ALLOTMENTS IN FORCE

<u>IN FAVOUR OF</u>	<u>AMOUNT</u>	<u>INITIALS</u>
Mrs. Emily Carder, 212 $\frac{1}{2}$ Queen Street, Chatham, Ont.	\$15.00 Stopped Aug. 31/44	<i>bat</i>

WILL: No record.

Yours truly,

G. G. Neard

for
SECRETARY, NAVAL BOARD.

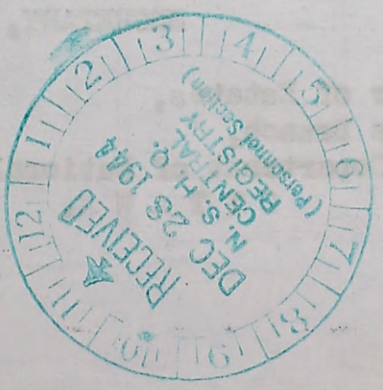
Administrator of Estates,
Estates Branch,
Department of National Defence,
O T T A W A.

In accordance with Naval Order
No. 897, it is authorized that
information and the following details
in the Naval Forces of Canada be
reported:

NAME, GRADE, TITLE,
LOCATION, ADDRESS, PHONE
NUMBER, SERVICE NUMBER,
DATE OF BIRTH, DATE OF
ENTRY INTO SERVICE, DATE
OF LAST PROMOTION, DATE
OF LAST ASSIGNMENT, DATE
OF LAST DEPLOYMENT, DATE
OF LAST AWARD, DATE OF
LAST PROMOTION, DATE OF
LAST ASSIGNMENT, DATE OF
LAST DEPLOYMENT, DATE OF
LAST AWARD.

NAME, GRADE, TITLE,
LOCATION, ADDRESS, PHONE
NUMBER, SERVICE NUMBER,
DATE OF BIRTH, DATE OF
ENTRY INTO SERVICE, DATE
OF LAST PROMOTION, DATE
OF LAST ASSIGNMENT, DATE
OF LAST DEPLOYMENT, DATE
OF LAST AWARD, DATE OF
LAST PROMOTION, DATE OF
LAST ASSIGNMENT, DATE OF
LAST DEPLOYMENT, DATE OF
LAST AWARD.

NAME, GRADE, TITLE,
LOCATION, ADDRESS, PHONE
NUMBER, SERVICE NUMBER,
DATE OF BIRTH, DATE OF
ENTRY INTO SERVICE, DATE
OF LAST PROMOTION, DATE
OF LAST ASSIGNMENT, DATE
OF LAST DEPLOYMENT, DATE
OF LAST AWARD, DATE OF
LAST PROMOTION, DATE OF
LAST ASSIGNMENT, DATE OF
LAST DEPLOYMENT, DATE OF
LAST AWARD.



JR/fb

45

27th. March, 1945
N.S. V-62462 (PERS. (N) (18))

Dear Madam:

I am directed to inform you that your application for the War Service Gratuity in respect of your late son has been referred to the Dependents' Allowance Board for decision concerning whether you may be classed as dependent as provided under the War Service Grants Act, 1944.

This procedure is required in all cases where records at Headquarters disclose the fact that you were not in receipt of Dependents' Allowance as at the death of your late son.

Immediately upon receipt of a decision from the Dependents' Allowance Board, steps will be taken to place your claim in line for payment, if eligible.

In the meantime, would you kindly inform this department of any change of address.

LETTER dispatched by
PERSONNEL NAVAL
APR 2 1945
SECRETARY, NAVAL BOARD

P.A.'S CHECKED IN
C.R. BY... P

Mrs. Emily Carder,
212½ Queen Street,
Chatham, Ontario.

↓
b.h.
for
D.A.

YB

31

N.S. V-62462, PERS.(N)

Policy No. 111377290, etc.

29th January, 1945.

THIS IS TO CERTIFY THAT according to official information Wilfred Walter Carder, Ordinary Seaman, Official Number V-62462, Royal Canadian Naval Volunteer Reserve, is missing, presumed killed on the 21st of August, 1944, when the ship in which he was serving, H.M.C.S. "ALBERNI", was lost in the English Channel due to enemy action.


SECRETARY, NAVAL BOARD.

LA

MD

BB

W.M.

23rd August, 1944.

Dear Mrs. Carder:

It is with deepest regret that I must confirm the telegram of the 23rd of August, 1944, from the Minister of National Defence for Naval Services, informing you that your son, Wilfred Walter Carder, Ordinary Seaman, Official Number V-62462, Royal Canadian Naval Volunteer Reserve, is missing at sea.

The only information that can be given at this time is that your son is missing at sea when the ship in which he was serving was lost by enemy action in the English Channel. As soon as further particulars can be released, you will be informed.

Should you know the name of the ship in which he was serving, it is requested that, for security reasons, you will regard this information as confidential until such time as an official announcement is made.

Please accept the sincere sympathy of the Department in your anxiety.

Yours sincerely,


SECRETARY, NAVAL BOARD.

Mrs. Emily Carder,
212½ Queen Street,
Chatham, Ontario.

OCCUPATIONAL HISTORY FORM

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 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 CARDER, Wilfred Walter (b) Reg'l. No. V. 62462
 2. (a) Arm of service Navy (b) Unit R.C.N.V.R. (c) Rank Ord. Seaman
 3. (a) Date of birth 1 May, 1925 (b) Have you any dependents? no (c) Place of residence at time of enlistment Chatham, Ontario.
 4. (a) Place of enlistment Windsor, Ontario. (b) Date of enlistment 27 May, 1943.

PLEASE LEAVE BLANK

Section B—EDUCATION AND TRAINING

5. (a) State age on finally leaving school 17 years (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.) 1 year vocational 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 Chrysler Corp of Canada Ltd., Address Chatham, Ont.
 19. Nature of employer's business (for instance, "farmer", or "building contractor", or "boot factory", or "iron foundry", or "retail store", etc.) service parts plant only.
 20. (a) Your specific occupation labourer (b) Number of years' experience at this occupation with any employer 10 months
 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?.....
 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. no



DATE 27 May, 1943. 194..... SIGNATURE Wilfred Carder

JUN 12 1943

Copy To
VWD
ES

N.V. 17
60M-9-42 (5943)
N.S. 815-11-17

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.

CERTIFICATE of the SERVICE of

O.H.F. *Wilfred Walter CARDE*

I.C. NS 109294

in the Royal Canadian Naval Volunteer Reserve

Training Headquarters	R.C.N.V.R. Division	Official Number <i>V. 62462</i>
	<i>Windsor, Ont.</i>	"
		"

Date of Birth..... <i>1 May 1925</i>	Name and Address of Nearest Relative or Friend (in pencil) <i>1-11-43</i>
Place of Birth..... <i>Chatham, Ont.</i>	
Place of Residence..... <i>285 Queen St. Chatham, Ont.</i>	
Trade brought up to..... <i>Labaurer</i>	
Religion..... <i>Church of England</i>	<i>2127 Queen St. Chatham, Ont.</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>21 May '43</i>	<i>duration of Hostilities Ord. Sec.</i>				

	Height		Chest (mean)	Weight	Hair	Eyes	Complexion	MARKS, WOUNDS, SCARS
	Feet	Inches						
On Entry.....	<i>5</i>	<i>9</i>	<i>32</i>	<i>118</i>	<i>Brown</i>	<i>Brown</i>	<i>Fair</i>	<i>None</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

VERIFICATION FORM

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

ter. RANK/RATING .. *A/B* OFF. NO. *V62462* 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.	1915 MEDAL			
								1939-45	1	<i>Star</i>
								ATLANTIC		
<i>Ut6 Fr. G.</i>								FRANCE G.	1	<i>Star</i>
								AFRICA		
								PACIFIC		
								BURMA		
								ITALY		
								DEFENCE		
								C.V.S.M.	2	<i>Clasp</i>
								" CLASP		
								WAR 1945	1	<i>Medal</i>
								WAR 1915		

VERIFIED BY *C. M. Wright*

VERIFIED BY DIR. OF PERSONNEL RECORDS.

IG

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

DECEASED
 MEMBER'S
 NAME

Wilfred Walter

CARDER

(CHRISTIAN NAMES)

(SURNAME)

REGISTER NO. 7342

FILE NO. N8.V-624

DATE 22nd June

SERVICE NO. V-62462

PAYEE

ADDRESS

Mrs. Emily Carder,
 212 1/2 Queen St.,
 Chatham, Ont.

21st Aug '44

FINAL RANK OR RATING A. B.

DATE OF DISCHARGE 21 Aug '44

DATE OF TERMINATION OF OVERSEAS SERVICE

A. TOTAL QUALIFYING SERVICE

NO. OF DAYS 441 EQUAL TO 14 COMPLETE PERIODS AT \$7.50

B. QUALIFYING OVERSEAS SERVICE

NO. OF DAYS 266 LESS 21 INELIGIBLE DAYS, EQUAL TO 245 DAYS @ 25C. PER DAY

C. SUPPLEMENT FOR OVERSEAS SERVICE

DAILY RATES AT DISCHARGE

PAY \$ 1.85
 SUBSISTENCE OR LODGING
 AND PROVISION ALLOWANCE \$ 1.25
 ADDITIONAL PAY H.L.M. \$.25

DEPENDENTS' ALLOWANCE 1/30 OF \$

TOTAL \$ 3.35 X 7 = \$ 23.45
 NO. OF DAYS 245 X \$ 23.45

183

D. WAR SERVICE GRATUITY

E. DEDUCTIONS OVERPAYMENT OF PAY AND ALLOWANCES \$ N11
 DEPENDENTS' ALLOWANCE
 AND ASSIGNED PAY \$
 OTHER DEDUCTIONS \$

F. TOTAL AMOUNT PAYABLE

G. YOUR PORTION OF GRATUITY IS—

DEPENDENTS' ALLOWANCE IN ISSUE TO YOU \$ _____ OF \$ _____
 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		DATE	
KN		Ray L. [Signature]		25-6-44	

for Mr. Naval Pay Acct

SERVICE REPRESENTATIVE



105.00

61.25

31.40

197.65

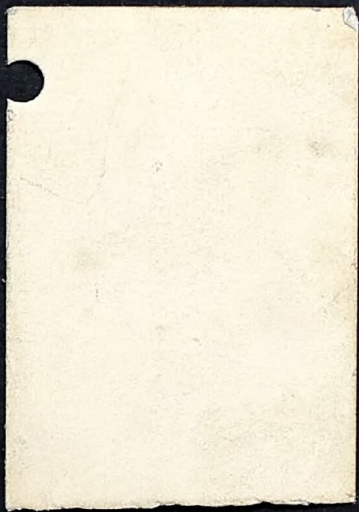
197.65

-\$ 197.65

Deque 33412 - 4/7-45

AT





ROYAL CANADIAN NAVY



Name..... CARDER, Wilfred Walter Official No. V-62462

Rank or Rating } Ordinary Seaman R.C.N. }
 R.C.N.R. } R.C.N.V.R.
 R.C.N.V.R. }

Age..... 21 Height..... 5' 10" Weight..... 130

Hair Dark Brown Eyes..... Hazel Hair on face Fair

Marks, scars, etc..... None Visible

Right Index

Blood Group



W W Carder

(Signature)

Place..... DEEP BROOK, Nova Scotia Date..... 12th,

Card Serial No..... (To be entered at N.S.H.Q.)..... *W.W.*

~~SECRET~~
42
IF YOU FIND THIS CARD

MAIL IN CLOSED ENVELOPE TO

THE NAVAL SECRETARY

Department of National Defence, Ottawa, Ont.

~~SECRET~~

NO POSTAGE NECESSARY

Every item of information should be carefully supplied. (See reverse side for instructions)
 THIS FORM MUST BE FILED FORTHWITH WITH THE DIVISION REGISTRAR OF THE DIVISION IN WHICH THE DEATH OCCURRED BEFORE A BURIAL PERMIT CAN BE ISSUED
 WRITE PLAINLY WITH UNFADING INK THIS IS A PERMANENT RECORD

FORM 6

This form if placed in an envelope, marked "Dominion Statistics—Free, penalty for improper use \$300," and properly addressed will pass through the mail "Free."

PROVINCE OF ONTARIO—CERTIFICATE OF REGISTRATION OF DEATH

1. PLACE OF DEATH { County or District of AT SEA Township of _____
 { If in City, Town or Village _____ Street _____ House No. _____
 (Name) (If death occurred in a hospital or institution, give the name instead of street and house number)

2. LENGTH OF STAY (in years, months and days)
 (a) In City, Town or Township where death occurred _____ (b) In Province _____ (c) In Canada (if immigrant) _____

3. PRINT FULL NAME OF DECEASED GARDNER Wilfred Walter
 (Family name) (Given name or names in usual order)

RESIDENCE No. 285 Street Queen Street City, Town, Village or Township CHATHAM Province Ontario.
 (Residence means usual place of abode. Post Office Address for residents in rural parts not sufficient)

4. Sex <u>Male</u>	5. Nationality (Citizenship) <u>Canadian</u>	6. Racial Origin <u>English</u>	7. Single, Married, Widowed or Divorced (Write the word) <u>Single</u>
-----------------------	---	------------------------------------	---

8. BIRTHPLACE Chatham, Kent, Ontario.
 (Province or Country)

9. DATE OF BIRTH May 1st 1925
 (Month) (Day) (Year)

10. AGE in { Years 19 Months 3 Days _____ If less than one day old _____
 hrs. or _____ min.

11. Trade, profession or kind of work as spinner, teamster, office clerk, etc. Labourer

12. Kind of industry or business, as cotton-mill, lumbering, bank, etc. Chrysler Corp of Can. Ltd.

13. Date deceased last worked at this occupation _____

14. Total years spent in this occupation _____

15. If married give name of wife or husband of deceased _____

16. NAME _____

17. BIRTHPLACE _____
 (Province or Country)

18. MAIDEN NAME _____

19. BIRTHPLACE _____
 (Province or Country)

20. Person giving information sign here. H.B. [Signature]
Paymaster Commander, R.C.N.R.,
 Address Naval Service Headquarters, Ottawa, Ont.
 Relationship to deceased Director of Personnel Records.

21. Place of Burial, Cremation or Removal _____
 Date of burial or removal _____

22. Burial Permit was issued by _____
 Address _____

23. UNDERTAKER _____
 (Name and address)

MEDICAL CERTIFICATE OF DEATH

24. DATE OF DEATH August 21st 1944
 (Month) (Day) (Year)

25. I HEREBY CERTIFY that I attended deceased from: _____ 19____ to _____ 19____
 and last saw him _____ alive on _____ 19____

CAUSE OF DEATH	PHYSICIAN
I. Immediate cause Give disease, injury or complication which caused death, not the mode of dying, such as heart failure, asphyxia, asthenia, etc.	Underline the cause to which death should be charged statistically
(a) <u>Missing, presumed dead.</u>	
due to (b) <u>He was serving in H.M.C.S.</u>	
Morbid conditions, if any, giving rise to immediate cause (stated in order proceeding backwards from immediate cause).	should be charged statistically
(c) <u>"ALBERTINI" which was sunk in the English Channel.</u>	
II. Other morbid conditions (if important) contributing to death but not causally related to immediate cause.	

26. If a communicable disease is mentioned on this certificate, give { (a) Date of appearance _____ 19____
 (b) Duration of disease _____ days

27. If a woman, was the death associated with pregnancy? _____

28. Was there a surgical operation? _____ Date of operation _____ 19____
 State findings _____ Was there an autopsy? _____

29. If death was due to external causes (violence) fill in also the following:—
 Accident, suicide or homicide? _____ Date of injury _____ 19____
 (State which)
 Manner of injury _____ (How sustained)
 Nature of injury _____
 Specify whether injury occurred in **industry, in home, or in public place** _____

Signed by _____ M.D.
 Address _____ Date _____ 19____

30. Division Registrar's Record No. _____

31. Filed _____ 19____ (Division Registrar)

COPIED
 Archives

144

(5) On being enrolled as a member of the Royal Canadian Naval Volunteer Reserve, I undertake and 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 Twenty-seventh day of May, 1943.

Signature of applicant Wilfred Carder

(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 Twenty-seventh day of May, 1943.

My authority for attestation is.....

[Signature]
Signature and rank of Attesting Officer.
Lieutenant, R.C.N.V.R.

(D) OATH OF ALLEGIANCE

I, Wilfred Walter Carder 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 Wilfred Carder

Witness [Signature]

Date 27th March, 1943 Rank Lieutenant, R.C.N.V.R.

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.



CANADA

N. V. 5
100M-12-42 (7804)
N.S. 815-11-5

ATTESTATION FORM (HOSTILITIES FORM)

FOR MEN OF THE ROYAL CANADIAN NAVAL VOLUNTEER RESERVE

SURNAME..... CARDER OFFICIAL No. V. 62462
CHRISTIAN NAMES..... Wilfred Walter MARRIED, SINGLE OR WIDOWER..... Single

PERMANENT ADDRESS	RELIGION
<u>285 Queen St., Chatham, Ontario.</u>	<u>Church of England.</u>

DATE OF BIRTH	*PLACE OF BIRTH	NAME AND ADDRESS OF NEXT OF KIN
<u>1 May, 1925.</u>	Town <u>Chatham,</u> County <u>Kent</u> Province <u>Ontario.</u>	<u>Emily Carder (mother)</u> <u>Same Address.</u>
*Original Nationality of:		
Father <u>English</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>	Inflated..... <u>33</u>	<u>Brown</u>	<u>Brown</u>	<u>Fair</u>	<u>None.</u>
Inches..... <u>9</u>	Deflated..... <u>31</u>				
<u>W 118</u>	Mean..... <u>32</u>				

EDUCATIONAL STANDING	TRADE OR CALLING AND IN WHOSE EMPLOY
<u>1 year vocational school</u>	<u>Labourer,</u> <u>Chrysler Corp of Can Ltd.,</u> <u>Service parts plant,</u> <u>Chatham, Ontario.</u>

DATE OF ENROLMENT	RATING FOR WHICH ENROLLED	H.M.C.S. ESTABLISHMENT IN WHICH ENROLLED
<u>Divisional Strength</u> <u>27th May, 1943.</u>	<u>Ordinary Seaman</u>	<u>"HUNTER", Windsor, Ontario.</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, Air Force, 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	TO

(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.

22

N.S. V-62462. PERS.(N)

DEC 26 1944

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> CARDER, Wilfred Walter Ordinary Seaman, V-62462. R.I.C.M.V.R.	<u>PLACE, DATE & CAUSE of DEATH</u> Missing, presumed dead on 21 August, 1944, from H.M.C.S. "ALBERNI".	<u>NEXT OF KIN</u> Mother: Mrs. Emily Carder, 212½ Queen Street, CHATHAM, Ontario.
--	---	--

ALLOTMENTS IN FORCE

IN FAVOUR OF

AMOUNT

INITIALS

Mrs. Emily Carder,
212½ Queen Street,
Chatham, Ont.

\$15.00
Stopped Aug. 31/44

eb

WILL: No record.

Yours truly,

[Signature]
for *[Signature]*
SECRETARY, NAVAL BOARD. *e*

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

*Noted D.M.P. a
29-12-44
D.P.*

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.

Handwritten notes:
1-09
1-10
1-11
1-12
1-13
1-14
1-15
1-16
1-17
1-18
1-19
1-20
1-21
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DEPARTMENT OF NATIONAL DEFENCE
- Naval Service -
Ottawa, Canada.

25 August, 1944

(Date)

Sir:

The following casualty has been reported -

<u>NAME</u>	<u>RANK or RATING</u>	<u>NAVAL NO.</u>
CARDER, Wilfred Walter	Ordinary Seaman	V-62462 R.C.N.V.R.

DATE OF ENLISTMENT - 27 May, 1943 Active Service: 8 June, 1943

DATE OF DISCHARGE - Will be reported later.

HOSPITAL - (If discharged in hospital under jurisdiction of D.P. & 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" at sea when the ship in which he was serving was lost by enemy action in the English Channel. While this casualty is listed as missing, it is impossible to make an estimate as to his chances of survival. Should no information be received to the contrary, you will be notified when official presumption of death with date has been set.
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 - Mother NAME - Mrs. Emily Carder,

ADDRESS - 212 1/2 Queen Street, Chatham, Ontario.

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.

Copies Form "B" fwd. to Allots. (N) on

..... N.P.R/5

H.B. Money
for
SECRETARY, NAVAL BOARD. c

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

Noted D.M.P.A. 29-12-44

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)