

310

Wpg Gren RCNVR RCAF Sto PO Friesen, John Unger Wpg Gr Sto PO Friesen, Louis RCN F/L Friker, Walter Louis RCN Lt Frisby, John Henry Western Gnr Fritch, Howard Gordon R F/S Frith, Stanley Robert RCN Ldg Smn Frith, William Alexander Westmr R RCNVR

Fritz, Howard Edward 1 Cdn Para Bn

Frizell, Raymond John Essex Scot Pte Frizzell, Frank Edward

West NSR ard RCA L/Sgt Frizzell, Harley Edward P/O Frizzell, Harvey Albert F/O Frizzell, Lloyd William Froats, George Gordon Frontin, Joseph Foom, George Edward Maj GGFG Fort Garry's

Sgt Pte Frost, Garfield Eugene RHC
Pte Frost, Henry Joseph NthNS Highrs
Pte Fruno, Nickolo Westmr R
Pte Fry, Charles Edward Calghighrs
Gnr Fry, James Ernest
Cpl Fry, Kenneth Walter CB Highrs
Pte Frye, Douglas Paul CB Highrs
L/Cpl Fryer, Frederick Charles
Metons 1 Cdn Spec Ser Bn

Cpl Fryers, John Calg Highrs Rfn Fuchs, Frank Leo Regina Rif D/P Fugere, Claude Mercier RCAF EO Fuhr, Harold Arthur RCAF L/Cpl Fuller, Austin Ralph RWpgRif F/O Fuller, Douglas RCAF Gnr Fuller, Douglas Harold RCA AB Fuller, Eugene RCNVR L/Cpl Fuller, John Elton HIJ of C L/Cpl Fuller, Joseph Traies Lan&RenScot R Westmrk

Fullum, Walter Joseph RCAF Fulton, Daniel Fulton, Ervin Blair West NSR Fulton, Hugh Cameron RCNVR Spr Pte

riu Fulton, Roderick RCAF S/L Fulton, Stanley Joseph RCAF F/L Fulton, Warren Thompson, RCAF LAC Funger, Harry RCAF L/Cpl Funk, Allison Jack Alq R Pte Funk, David RCASC Pte Funnell, John Richard CB Highrs Pte Furey, Joseph Wpg Gren Gdsm Furlong, James Andrew CGG L/Cpl Furlong, Walter N Shore R

Pte Furey, Joseph Wpg Gren Gdsm Furlong, James Andrew CGG L/Cpl Furlong, Walter N Shore R Pte Furlong, William Isaac CB Highrs

Pte Furlotte, Joseph Norman Carl & York K Pte

Furman, Stanley Antony SSask R Pte

Furrow, Gerald Cliftord

Carl & York R Furry, Leonard Keith R Wpg Rif Furulie, Trygve SSask R Futoranski, Joe RCAF Fyall James St Cpl Fyall, James Stewart RR F/L Fyfe, Allan Blake R Spr Fyfe, Allan Clifford Gnr Fyfe, Dugald L/Cpl Fyfe, William Alexander

Calg Highrs Fysh, Harry Oswald Asst Ck'S) Fyson, Gordon Richard RCNVR

al, Joseph Stephen RCNVR abel, Albert Lloyd RCAF Gabor, Joseph Mitchel ReginaRif Gabourel, Lloyd Austin RCNVR P/O Rfn A 4 4

FULTON, HUGH CAMERON O25640

OCCUPATIONAL HISTORY FORM FIATINA-1152

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

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

	Section A—GENERAL INFORMATION	
1.	(a) Print name in full Hugh Cameron FULTON (b) Reg'l. No.	
2.	(a) Arm of serviceNavy	
3.	(a) Date of birth 23 Sept 1922any dependents? No at time of enlistment Montreal West	
4.	(a) Place of enlistment	2
	Section B—EDUCATION AND TRAINING	1
5.	(a) State age on finally leaving school or college up to the time of enlistment? State definitely highest standing reached at public, technical or high school (for instance—"4 years Public School" "two years High School" "Union	
6.	(for instance—"4 years, Public School", "two years, High School", "Junior	
7.		1
8.	If you attended a university, give name of university and standing or degree secured. MCC111 University and standing or degree secured. (a) Did you ever (b) If so, (c) Did you for what (c) Did you finish it how long.	-
	(a) Did you ever (b) If so, (d) If you did not enter upon a trade for what (c) Did you finish it, how long apprenticeship? occupation? finish it?	1
9.	(a) What languages do you speak fluently? English (b) What languages do you read well? English	1
-	Section C—EMPLOYMENT CONDITION AT TIME OF ENLISTMENT	1
10.	(a) State whether you were	
	WORKINGorNOTWORK- (b) At time of en- ING at time of enlistment. listment of what	1
	(Enter here only "Work- ing" or "Not Working", trade union or	1
	as case may be; particulars are asked for below)	1
_		
	Section D—PARTICULARS CONCERNING THOSE WHO WERE UNEMPLOYED AT TIME OF ENLISTMENT	1
	QUESTIONS 11 TO 17 REFER ONLY TO THOSE WHO ANSWER "NOT WORKING" IN QUESTION 10 (a)	1
11.	Had you ever been employed fairly regularly since leaving school?	
12.	(a) If answer to 11 be "Yes", (b) State how long you	
	(a) If answer to 11 be "Yes", (b) State how long you state exact trade or occupation had worked at this at which you actually worked	
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.	Cine details of look	
16.	employer, if any: Name	1
17.	(a) If your last employment was	
	in a business of your own, state nature and address of business	
	Section E-PARTICULARS CONCERNING THOSE WHO WERE EMPLOYED AT TIME	
	OF ENLISTMENT	1
Q	DUESTIONS 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 Bell Telephone Company Address Montreal, Que	
19.	Nature of employer's business (for instance, "farmer", or "building contractor", or "boot factory", or "iron foundry", or "retail store", etc.)	
20.		1
	specific occupation with any employer Une	
	(a) Did your employer promise (b) Did your employer (c) Do you wish definitely to give you employment on discharge? (c) Do you wish to return to your employment on discharge? former employment?	
	employment on discharger	
	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	
	(a) State nature of business, (b) Where was	
23.	(a) Number of years (b) Have you made, or will you make plans to engaged in this business return to the same or a similar business on discharge?	
=	Section F—PARTICULARS OF FARMING EXPERIENCE	
24		
25	(a) Do you wish to engage No (b) Do you feel competent (c) If so, in what in farming after the war? kind of farming? kind of farming kind of fa	
	(a) Were you (b) How many years' actual (c) In what provinces born on a farm?	
	Section G—MISCELLANEOUS	
	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.	to return to school, or have you been assured of a job, etc.) State any employment preference or ambition you may have, other than indicated elsewhere in this form.	
	may have, other than indicated discurrer in this form	
_	2761 200	



Mrs. Mary Fulton,

149 Bedbrooke Ave.,

Montreal West, P. Q.

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 0.25640 FD 804

DEPARTMENT OF NATIONAL DEFENCE ESTATES BRANCH OTTAWA, ONT.

FEB 2 1945

12th January 194.5 AL DE

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

FULTON Hugh C., Lieut.

.... Royal Canadian Naval Voluntary Reserve

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.

Director of Estates.

HRW/BGS

M.F.W. 77 16M-10-44 (5854) H.Q. 1772-39-972

ANSWER IN FULL ALL APPLICABLE QUESTIONS

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

rees f	RELATIVES		INFORMANT'S STATEMENT NAME IN FULL ADDRESS IN FULL					
ip	required to be accounted for Widow of the Deceased		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					*			
			granas adsi					
2	datas of their Riethe		Nel	1.17				
			ed greateries forms andbenes for					
3	Father of the Dec	ceased	John Fulton		2 nd November			
4	Mother of the De	eceased	1 1 1 1 1 1		Age 5%			
		igno savig		ini el	149 Bedbrooks			
3	Brethers of the Deceased	Blood			month w			
		Half Blood		-				
		Full Blood						
6	Sictors							
		Half Blood						
7	Names of brothers of the full or the Deceased, who are death of each.	or sisters (whether half blood) of the e dead, and date of	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.	Hugh barneron Fulton
9	Date of his birth.	23 Sept 19 22
10	Place and date of his marriage.	
11	Place and date of his parents' marriage.	Glasgow Scotland
	PARTICULARS OF D	OMICILE NAT 10 1/ 1920
12	Place where deceased was born.	Lethbridge Alta
13	State, in order, the Province, State and/or County in which he resided before enlistment and the period of time in each.	(a) alberta 5 Months (b) Quebec. 21 effars (d) 2
14	Nature of employment before enlistment.	blerk
15	State whether he owned the premises in which he lived, and, if so, where situated.	No
16	Name place where deceased stated he intended to make his permanent home.	Montreal.
	PARTICULARS OF	ESTATE
17	Did to leave a Will? If in your custody, please forward.	Hot to my knowledge
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?	Unless week dang.
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?	Royal Bank of Canada
20	Amount of War Savings Certificates held by deceased. Indicate where located.	149 Bedbroke pre- Montella
21	Amount of Victory Loan Bonds held by deceased. Indicate whether registered or bearer and where located.	100. Bearer Wary Partly Paid for
22	If deceased had life insurance, name companies and amount payable under each policy and the person named as beneficiary therein.	\$5000. Not collectable on account of War blause
23	Describe other assets, if any, and estimated value thereof. Use space on page 4 if necessary.	Hone.
	OTHER PARTICU	LARS
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.	None
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.	None.
	(Note:—The government pays funeral expenses within the and burial is made Overseas as well as where death occurs and zone, and if a relative has already paid those expenses the Gover authorized in the Regulations. Any amount of such expenses in by the Government nor is it chargeable against the service estated.	nment will reimburse such relative to the extent of the amount n excess of those authorized in the Regulations is not payable

DECLARATION

*Insert degree
of relationship for example. I hereby declare that all the particulars shown on this form are correct, and a true and complete "Widow", statement of all the relatives that the deceased ever had in the degrees specified; and that I am the "Brother", etc.
* 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. 149 Bellbroothe Ave Montreal Westers
CERTIFICATE I hereby certify that to the best of my knowledge and belief. Many M. Hullou
See above. {Name of informant} is the with of the Deceased
above described. The above Declaration was made by the Informant and signed in my presence.
Dated at 394 MONTREAL WEST, Quest this 32 th dance of Clerowners 1945
Signature of Clergyman, Priest, Magistrate, Commissioner or Notary Public or Commissioned Officer of any of His Majesty's Forces. MONTREAL WEST Qualification Manager.
Address
NOTE -Refere dranting the shove Certificate, care should be taken to see that the informant gives particulars concerning the death of any

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



N. V. 4 N.S. 815-11-4 LGE

ATTESTATION FORM

FOR OFFICERS O (A)		OF APPLICANT
	Cameron	PERMANENT ADDRESS 149 Bedbrooke Avenue, Montreal West, Montreal, Que.
DATE OF BIRTH	PLACE OF BIR	TH NAME AND ADDRESS OF NEXT OF KIN
23rd September, 1922	Town Lethbri County Province Alberta Country Canada	Mother: Mrs. Mary Fulton, 149 Bedbrooke Avenue, Montreal, West, Que.

PERSONAL DESCRIPTION

HEIGHT	CHES	T MEASUREMENT	HAIR		EYES	COM- PLEXIO	WOUNDS, SCARS, MARKS
Feet	Deflated	36 34 35	Blom	nde	Brown	Fair	Scar on right ankle Birthmark on right thi
DATE OF ENRO	LMENT	RANK IN WHIC	н	MA	RRIED, SING WIDOWER	LE, OR	TRADE OR CALLING AND IN WHOSE EMPLOY
.7th June,	1942	Probationar Sub-Lieuten R.C.N.V.R. (Temp)		Single Bell Telephone Co Beaver Hall Hill,		Outside Representative: Bell Telephone Company, Beaver Hall Hill, Montreal, Quebec.	

DECLARATION TO BE MADE BY APPLICANT

I hereby declare as follows:-

(B)

- (1) That I am a British Subject, domiciled in Canada.
- (2) That I am desirous of being enrolled as an Officer of the Royal Canadian Naval Volunteer Reserve Force, and that I accept and will 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) Inserved in an analysis of the period shown, and attach may XXECORKOISEDVICE.

* Cross out Clause not applicable.

SERVED IN	RANK	FROM	то
		Not Applicable	

(c) I have never been rejected for 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.

OVER

- (5) On being enrolled as an Officer of the Royal Canadian Naval Volunteer Reserve, I undertake and bind myself:—
- (a) To serve from the date thereof for as long as my services may be required, being subject to the provisions of the Naval Service Act, and of the regulations made in pursuance thereof for the governing of the Royal Canadian Naval Volunteer Reserve, and to the customs and usages of His Majesty's Canadian Naval Service.
- (b) To report for active service if called upon in time of war or emergency, and, if called into active service, to serve ashore or afloat as may be directed, according to where my services are required.
 - (c) To provide myself with the necessary uniform as laid down in R.C.N.V.R. Regulations.

Dated this 17th	day of June	1942
• • •	the state of the s	6. Fuelow. Signature of Applicant.
		Jack ve
The above declaration was n	nade and signed in my presence th	nis17.th
day of June	1942	
		Signature of Enrolling Officer. nt, R.C.N.V.R.
	5/Lieutena	nt, R.C.N.V.R.
(C)	OATH OF ALLEGIANCE	
I Hugh C. Fulton	do sincerely promise and	swear (or solemnly declare) that I will
be faithful and bear true allegian	nce to His Britannic Majesty, His	s heirs and successors according to law.
	Signature of Applicar	A.b. Fullon
Signature of Officer administering	g the Oath/Keenor	
(
Rank/Lieutenant, RCN	VR	1 200 20 2
TO A DISTRICT	Date17.th	June, 1942

The Oath of Allegiance may be administered by any commissioned officer of the Naval Service.

NOTE.—This form when completed is to be forwarded to Naval Service Headquarters, Ottawa, together with Certificate of medical examination B-207, and record of any previous service.

The record of previous service will be returned after examination at Naval Service Headquarters.

(Rank)....SURG. LT. R.G.N.V.R.

Certificate of Medical Examination of Officers, Men and Boys

			RESERVE I	FORCES)	0)
Note—This Certificate is to be completed b	y the Examining Medical Of	ficer and fe	orwarded to the	Naval Secretary, Department of Nationa	I Defence, Ottawa.
I, the undersigned, has teandidate for entry as	ve examinedall respects fit for lateral fit for His Majesty	PROB	S/LT.		
This examination has	been made in accor	rdance	with the cu	rrent Instructions as to Med	lical Standards.
(a) Age	Yrs.	Mos.		(j) Date of last Vaccination for Smallpox	1938
(b) Height with bare feet	Feet 5	In.) <u>1</u>	(k) General Development	GOOD
(c) Weight without clothes	130	6		(l) Nose, Throat and Tonsils	NORMAL.
(d) Ears and Hearing	N	ormal		(m) Heart and Lungs	NORMAL. B.P.125-65
(e) Chest Girth	Max. M 36	in. 35	Mean 34	(n) Abdomen Hernia, etc.	NORMAL.
(f) Teeth	Deficient Defe	ective	Dentures 0	(o) Limbs and Joints	NORMAL.
(g) Vision by Snellens	without Rt. glasses 6/6		Lt. 6/6	(p) Skin	NORMAL.
Types	with glasses Rt. where worn		Lt.	(q) Anus Haemorrhoids	CLEAR
(h) Colour Vision	Ishihara R.C.N. Lantern	NORM	AL.	(r) Testes Varicocele	NORMAL.
(i) Chest Snot taken approved positive doubtful	127441	appe	roued.	(s) Urine	NOT DONE
I hereby certify that to from the Ears, or any other after entry, such dental treat The exact meaning of this is to be clearly existrike out if inapplicable.	o the best of my be disease likely to re ment, vaccination,	elief I h ender n or inoc	ave never some unfit for culations as	May be authorized.	nce of Urine, Discharg am willing to undergo Signature of Candidate
		0.00		following information is to be insert	
*{which renders him medical not considered of sufficient Delete one.	ly unfit for service, importance to cau IF REJECTI insert here UNFIT in block lette	se his 1		e being desirable in other res	
Dated atMONTREAL	L.	th	e1	6 of JUNE/42	19

DECEASED 21 August		AWARDS NAT	TY	WAR SERVICE RECORDS
FULTON	Hugh Cameron	0-25640	Lieut	FILE No.
SURNAME (IN BLOCK LETTERS)	CHRISTIAN NAMES	REG. No.	RANK ON DISCHARGE	C.A.S.F. UNIT
WAR SERVICE				

DATE DESPATCHED:

ADDRESS:

No.

BADGE (CLASS)

CAMPAIGN MEDALS	REGISTRATION NUMBER AND DATE DESPATCHED
1939-45 Star	
Fr. Ger. Star and Clasp	
C.V.S.M. and Clasp	M // - 2
War Medal	9452
· ·	(THE REVERSE TO BE USED FOR ESTATE PURPOSES)

DVA 806

CNVR Oct 45	"ALBERNI"	REGISTRATION NO. DATE OF DESPATO
MEDALS PERSON ENTITLED TO	Mrs. Mary N. Fulton - Mother	DAT'E DESP
ADDRESS:	149 Bedbrooke Ave., MONTREAL, W, Que.	REGN. NO. 891
WIDOW ADDRESS:	oss_	(2)
MEMORIAL CRO	oss Mrs M. Fulton	
ADDRESS:	149 Bedbrooke Avenue MONTREAL WEST, Que	(3) 17 January 1945

SECOND CLASS FOR CONDUCT

1 2 3 5 6	7 8 9 10	11	12	13	14 15	5 16	6 17	18	19	20	21	22 2	3 24		25	26	27	28	29	30 3	31 3	32 3	3 3	35	36	37
0-25640	OFFICIAL NUMBER	NAME	(8,	FUL	TON					(Given Na	mes	Hug	h Car	ne	ron		········		OFFICI	AL NU	IMBEF	0	-2	56	40	2
Ship or Establishment	Rating		From				Rem	arks		GIVEN 14E		aracter	Efficien	ıcy	Day	Date	Year	- 1	Non-Sub. 1	Rating	-	Qualification Month			Qualifie	
Div. Str. Montreal H.M.C.S. Montreal	P/Sub. Lt. T. P/Sub. Lt. T.		6		Appt	. 4-	7-42	9-4-7	3	("Est	")															
H.M.C.S. Kings	P/Sub. Lt. T. Sub. Lieut. T.	25	3.	.43	addl	fo	or t	rng.	8	dispos	3a.l		per .	Ap	pt.	19-	4-43									
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Six copies to be rendered to Naval Service Headquarters

REPORT OF THE DEATH OF AN OFFICER, MAN OR BOY

Name	FULTON Hugh Cameron (Christian names in full)
Rank or Rating.	Licutement Official No. Unit REAL R.C.N.V.R.
Place of Birth	Lethbridge, Alberta Date of Birth 23rd September, 1922.
Occupation in C	ivil Life outside representa-Religion United Church
Number of year	s service in the Navy (Long Service R.C.N., or mobilized service in case of R.C.N.
(Temporary	r) or Reserve ratings) from 17 June, 1942 to 21 August, 1944.
Date of Death	21st August, 1944. Place of Death At sea
Cause of Death.	Missing, presumed killed, when the ship in which he was (If due to accident, violence, or enemy action, particulars to be stated briefly)
serving, H.	#.C.S. "ALBERNI", was lost in the English Channel due to enemy
action.	
	Name Mrs. Mary Fulton, Relationship Mother
Nearest known relative or	Address 149 Bedbrooke Avenue,
friend.	Montreal West, Quebec.
Date on which t	he above was informed by Skipt Naval Service Headquarters: 23 Aug. 1944.
Date on which o	leath was registered with local Officials
	mperial Service men, whether Active Service, Pensioner or Reserve, date on which
the prescrib	ed return was rendered to the Registrar General in London, Edinburgh or Dublin,
according to	o Nationality
Place of Bu	rialDate of Burial
eldesidade	
Location, N	Tumber, etc., of grave
8	
94	employed
94	
94	
⊞ Undertaker 	ENTERED IN BOOK ENTERED IN BOOK 1045 ABMOREA
⊞ Undertaker 	ENTERED IN BOOK ENTERED IN BOOK JAB MOREST
⊞ Undertaker	BN 45 7 1945 for 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, Sec. C.P.C., Dir. of Records.

C.N.S. 1121 10M—6-44 (774) N.S. 7570-S-1121

Dro-VR-7-148

Surname: Tullor

25/3/43 DATE

Christian Name: Hugh CAMERON

7/5/65 Rank:

MONTREAL WEST Home Address: 149 BEDBROOKE AVE

Date of Birth 5. pt. 23.1922

Place of Birth Lethbridge, Alberta

Education: Matriculation:

Junior

University Degrees:

Mercantile Marine Certificates:

No:

Precis Mercantile or Yachting Experience: Four years pea peouls

30 ft. pchronel

Precis of Business Experience: 2 years Bell Telephone bo. - collecto?

sports: Lumming . foodball, basketball. Frank, pking

Previous Naval or Military Training: Mo fiel Reserve Training Bat. Languages spoken fluently: English O.P. C. High School

Languages understood: Luglish . French

Place of Birth of Father Scotland

Place of Birth of Mother:

Fathers Occupation: Deceased

Next-of-kin: Mother

Surname: FW / Tor Christian Names: Mary

Full Address: 149 BEDBROOKE AVE MONTREAL WEST Have you been rejected by any other of the Armed Forces? No

If so give details:

Married or Single: Single

5 ft. 9 3/4 in

Naval Identity Card No: NS 76715

Dependents Wother

Weight:

140 165

NAVAL SERVICE 62-21-5

OFFER OF SERVICE (HOSTILITIES ONLY)

N. V. 3a 30m—7-41 (1262) N.S. 815-11-3a

To be completed in applicant's own handwriting and forwarded to nearest recruiting centre (see back). No papers, testimonials, etc., are to be attached. Completion of this form is in no way binding upon either the applicant or the Naval Service.

	ersonal History—
1	Name FHLTON Augh Cameton DE 7558 Surname (in Block Letters) Christian Names Telephone No.
	Address 149 Beelletooke Are Mondreal West County Province
	Date of birth Sept 23 1922 Place of birth Lethbridge Alberta
	Nationality Canadian Are you British by birth? or by Naturalization?
	Birth place of (a) Father Scotland (b) Mother Scotland
	Are you (a) Single(b) Married(c) Widower(d) No. of Children?
	Any physical defects (especially eyesight)?
1	Height 5 9 Weight 140 165 Can you swim? 725
E	ducation—
	Highest school grade passed successfully? Junua Malriculation Matriculation? Jes.
	University: (a) Name Mc Gill (b) Years attended 1/2 (c) Course and Degree Science - n
- 1	Technical courses taken degree as I left college on acc
	Special studies I udying mathematics and physics for secion matricula.
	special studies o magning managements and purple co got secure majoricula,
,	Languages spoken English
	ea Experience— Have you ever been employed at sea?Give number of years and how employed?
•	
1	Name and number of Mercantile Marine Certificates held
•	
10	
	State last position held at sea (with dates)
5	State employment since leaving sea
0	
4	
C	Occupation: What is your profession, trade or occupation in civil life? balle Sed Bell Jelephone
	Are you (a) Actively pursuing your profession or trade on your own account?
	(b) Employed; if so, in what capacity and under what employer? bollected . Bell Telephone
(General experience (with dates) January 19#1
	Have you ever served in any of His Majesty's Forces? If so, which? How long?
	No. and Class of any Stationary Engineer's certificates or other certificates of competency
]	How long would you need to settle up your private affairs? Appared one mouth
A	ny other Qualifications that might be of use to the Naval Service (yachting, cadet corps, hobbies, etc.
	See Sents - 3 years - Bon Montreal West of soil - soil 31 ft schoon
,	leaded book - sargeant and officed High School
	That og taphy 0
В	ranch Applying for: (a) As Officer
	If you cannot be accepted as an Officer are you willing to serve as a rating?
	In what capacity do you wish to enrol? Lecufive officed
te	of Application Leb 2 1942 Signature 19 6 Fulton
100	

RECRUITING CENTRES

Applicants should apply to the ${\bf nearest}$ centre.

(a) Royal Canadian Naval Barracks (b) The Registrar, R.C.N.R. Shipping Master's Office or P.O. Box 992, Halifax, N.S. PRINCE EDWARD ISLAND— (a) Naval Barracks Simms Building CHARLOTTETOWN, P.E.I. (b) The Registrar, R.C.N.R. (c) N.A. Life Insurance Co., or P.O. Box 271 CHARLOTTETOWN, P.E.I. New Brunswick— Naval Barracks Naval Barrac	Nova Sc	COTIA—		1,
(a) Naval Barracks				
(b) The Registrar, R.C.N.R. c/o N.A. Life Insurance Co., or P.O. Box 271. CHARLOTTETOWN, P.E.I. New Brunswick— Naval Barracks 221-223 Prince William St. Mail Address, P.O. Box 1077 SAINT JOHN, N.B. Quebec— (a) Naval Barracks 322 St. John St. Quebec, P.Q. (b) Naval Barracks 1464 Mountain St. Montreal, P.Q. (c) The Registrar, R.C.N.R. Marine Department or P.O. Box 265 Quebec, P.Q. (d) The Registrar, R.C.N.R. 167 Common St. Montreal, P.Q. Ontario— (a) Naval Barracks 72 Queen St. Ottawa, Ont. (b) Naval Barracks Richardson Bldg., Princess St. Kinoston, Ont. (d) Naval Barracks Richardson Bldg., Princess St. Kinoston, Ont. (d) Naval Barracks Cor. Stuart & MeNab Sts. Hamilton, Ont. (e) Naval Barracks (Carling Block, Richmond St.), 433 Richmond London, Ont. (f) Naval Barracks 2462 Howard Ave. Windson, Ont. (g) Naval Barracks 232 Cooke St. Port Arthur, Ont. Manitoba— Naval Barracks 583 Ellice Ave. Winnipeg, Man. Saskatchewan— (a) Naval Barracks 9722-102nd Avenue Edmonton, Alta. (b) Naval Barracks 337-7th Ave. West Calgary, Alta. British Columbia— (a) Naval Barracks Old Yacht Club, Stanley Park	PRINCE	EDWARD ISLAND—		
Or P.O. Box 271. CHARLOTTETOWN, P.E.I. New Brunswick—				Charlottetown, P.E.I.
Naval Barracks	(b)	The Registrar, R.C.N.R	or P.O. Box 271	Charlottetown, P.E.I.
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(b) Naval Barracks	(a)	Naval Barracks	.9722-102nd Avenue	Edmonton, Alta.
(a) Naval BarracksOld Yacht Club, Stanley Park				
(a) Naval Barracks	British	COLUMBIA—		
Mail Addresse MV Marine Dida Viscorrito Di	(a)	Naval Barracks	Old Yacht Club, Stanley Park	
Mail Address: 408 Marine BldgVANCOUVER, B.C.		Design Nevel Democks		
(b) Royal Canadian Naval Barracks				
(d) The Registrar, R.C.N.R. 964-11th Ave. East Prince Rupert, B.C.				
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Father's Name		Father's Name		
Age		Age		
Occupation		Occupation	A STATE OF THE STA	

1st Board 1942

0-25

By command of the Honourable the Minister of National Defence for Naval Services of the Dominion of Canada

033986

To Sub-Lieutenant Hugh C. Fulton, R.C.N.V.R., (Temporary), --

Dou are hereby appointed promoted and re-appointed

Acting Lieutenant, R.C.N.V.R., (Temporary),

of His Majesty's Canadian Ship ALBERNI.

> promotion Pour appointment is to take effect from

15th March, 1944.

Secretary, Mabal Board

	2.	/*	
Department	of	Rational	Defenci
Ra	ba	Service	

Ottawa,

15M-2-43 (8622) N.S. 815-7-36

18th March, 194 4.

	Personnel Records Division.
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CONFIDENTIAL.

H.M.C.S. "KINGS"

OFFICERS TRAINING RECORD.

147.1.1.	FULTON	EXCLUSION CONTRACT	HUGH CAM	ERON
	SURNAME)		(CHRISTIA	AN NAMES)
RANK F	PROB. SUB. LIEUTENANT	, R. C. N. V. R.	(TEMP)	a lating was a service as
DATE OF BIRT	H Sept.23, 1922	PLACE OF	BIRTH Letl	nbridge, Alberta
HOME ADDRESS	149 Bedbrooke	Avenue, Mon	treal, West, 1	P. Q.
EDUCATION (S	chools, Colleges, U		, Degrees, et	co).
KNOWLEDGE OF	FOREIGH LANGUAGES	understand	ds French.	
MARRIED OR S	INGLE Singl	.e	DEPENDENTS	Mother
CIVILIAN OCC	UPATION OR PROFESSI	ON (FULL_NAT	TURE OF WORK)	
	2 years Bell Teleph	one Company	- Collector	
SPECIAL QUAL	IFICATIONS_AND/OR E	XPERIENCE (Y	echting, Sea	, Leadership).
	Four years Sea S	couts - 30 1	foot Schooner	
			17-20-	
APPOINTED FRO	OM HMCS "KINGS" TO	HMCS " ALBE	RNI"	
	TO 1	DATE 26th	July, 1943.	,
Distribution:	TANK AND			

Secretary, Naval Board, Commander in Chief, Canadian Northwest Atlantic, Staff Officer Appointments and Records.

FULTON, Hugh Cameron

NAME

PROB. SUB. LIEUTENANT, R. C. N. V.R. (TEMP)

-0-25640

RANK

EXAMINATION RESULTS

SUBJECT WEEKS MARKS REMARKS Passed. P. of C. good. Keen and attentive in class. Good Officer material. GUNNERY 29 Meh. 43 TO: 24 Apl. 43 75.4 PILOTAGE AND NAVIGATION FROM: 26 Apl. 43 TO: 22 May 43 95 STGNALS Subject % equired %Obtained 24 May 43 TO: 12 June 43 3 88 100 80 FROM: Sem. 84 80 Flash. 88 75 Paper TORPEDO June 43 25 June 43 2 65 FROM: TO: ANTI-SUBMARINE 12 July 43 TO: 24 July43 78 FROM: SEAMANSHIP 28th June TO: 10 July43 75.5 FROM: 476.9 Total Marks: Final % OFFICER-LIKE QUALITIES (As for Sect. I and II, Form S.206) Sat. 6 (d) PERSONAL QUALITIES (a) GENERAL CONDUCT 6 Yes (b) OF TEMPERATE HABITS (e) LEADERSHIP Dietr (c) PROFESSIONAL ABILITIES (f) INTELLECTUAL ABILITY Secre Comme REMARKS (Including recommend for Sea or Shore Appointment):-Eterre A leader in a quiet way. Able and a good mess mate.

To sea.

COMMANDER, R.C. N.V.R.
COMMANDING OFFICER,
H.M.C.S. "KINGS".

I.P. Placeon Conf. ple phases

At 15 1 2 2 2

CONFIDENTIAL.

H.M.C.S. "KINGS"

OFFICERS TRAINING RECORD.

25640

NAME	FULTON	HUGH CAMERON	105572
	(SURNAME)	(CHRISTIAN NA	MES)
RANK	PROB. SUB. LIEUTENA	NT, R.C. N.V.R. (TEMP)	
DATE	OF BIRTH Sept.23, 1922	PLACE OF BIRTH Lethbrid	ge, Alberta
HOME	ADDRESS 149 Bedbrook	ke Avenue, Montreal, West, P.Q.	
EDUCA	TION (Schools, Colleges,	, Universities, Degrees, etc).	26 Ap.
	Junior Matri	iculation.	
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KNOWL	EDGE OF FOREIGH LANGUAGE	ES understands French.	
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CIVIL		SSION (FULL NATURE OF WORK)	
	2 years Bell Tele	ephone Company - Collector	mut Ar
SPECI	AL QUALIFICATIONS AND/OF	R EXPERIENCE (Yachting, Sea, Le	adership).
	Four years Sea	Scouts - 30 foot Schooner.	
		m: 25.27 2 .54vint 01 12.51 .	T 63°15
	3.67	176.	
APPOI	NTED FROM HMCS "KINGS" T	O HMCS " ALBERNI"	

Distribution: -

Secretary, Naval Board, Commander in Chief, Canadian Northwest Atlantic, Staff Officer Appointments and Records.

CAMOLOUGEDAG (0)

TO DATE 26th July, 1943.

NAME FULTON, Hugh Cameron

RANK PROB. SUB. LIEUTENANT, R. C. N. V.R. (TEMP)

EXAMINATION RESULTS

SUBJECT WEEKS	MARKS		REMARKS	129
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ANTI-SUBMARINE FROM 12 July 43 TO: 24 July 43 2	78			
SEAMANSHIP FROM: 28th June TO: 10 July43 2	75.5			· · · · · · · · · · · · · · · · · · ·
Total Marks: : OFFICER-LIKE QUALITIES (As for Se)
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(c) PROFESSIONAL ABILITIES 5 REMARKS (Including recommend for				
A leader in a quiet way. Ab	le and	a good	mess mate.	

To sea.

COMMAND ING OPETA

DECEMENT 1943

No. 14 06

103-F-52

Dated JUL 24 1943

This is to Certify that Mr. M. G. Jultan

has served as P/Sub. Light. P.C.N.V.R. on board H.M.C.S. KINGS

under my command, from the 25 th day of 1943, during which period he has conducted himself* WHILST UNDER TRAINING

To my entire satisfaction, a keen opeir

America Car RENVR | Commanding Officer, H.M.C.S. KINGS

^{*}Here the Commanding Officer is to insert in his own handwriting the conduct of the Officer. C.N.S. 450

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

W.S.G. Application No. 11817 / FILE NO. N.S. 0-25640

"WAR SERVICE GRATUITY"

COMPUTATION OF SERVICE

FULLTON CA	Luch Ca-	~ 11 1 1	10-2560	ALLIEUT(T)
FULTON CA SURNAME C	HRISTIAN TAMES IN FULL		OFFICIAL NUMBER	RANK OR RATING ON DISCHARGE
CAUSE OF DISCHARGE:	Dead	(HMCS	ALBERI	11)
applicant.	Mother	A.P.	4	
	., ,		366	
	TOTAL SERVICE		17	
Date of Active Service	15 Marc	1430	31	
Date of Discharge	21 dug.	44	21	
Total No. of Days	526	/	526	2
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	OVERSEAS SERVICE			
% Total No. of Days	27-30	93 em		
# Less non qualifying				393 pm
service	nel		Total	al Days
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Record of Service in o	ther Forces (per	Naval Recor	ds)	
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DATE: \$411 61945	Reason	Payr	of Personne	
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NON QUALIFYING SERVICE

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DEPARTMENT OF NATIONAL DEFENCE

NAVY ARMY AIR FORCE

STATEMENT OF WAR SERVICE GRATUITY



ASED MBER'S NAME REGISTER NO. 11817 Hugh (CHRISTIAN PAMES) FILE NO. NSO-25640 PAYEE Mrs. Mary Fulton, 149 Bedbrooke Ave., FINAL RANK OR RATING A/Lieut Montreal, W. Que. DATE OF DISCHARGE 21 Aug/44 DATE OF TERMINATION OF OVERSEAS SERVICE 21 A. TOTAL QUALIFYING SERVICE EQUAL TO 17 COMPLETE PERIODS AT \$7.50 B. QUALIFYING OVERSEAS SERVICE LESS 16 INELIGIBLE DAYS, EQUAL TO 377 C. SUPPLEMENT FOR OVERSEAS SERVICE DAILY RATES AT DISCHARGE SUBSISTENCE OR LODGING AND PROVISION ALLOWANCE ADDITIONAL PAH. L. M. STORES ALLCE. DEPENDENTS' ALLOWANCE 1/30 OF \$ D. WAR SERVICE GRATUITY E. DEDUCTIONS OVERPAYMENT OF PAY AND ALLOWANCES \$ DEPENDENTS' ALLOWANCE AND ASSIGNED PAY \$ N11 OTHER DEDUCTIONS F. TOTAL AMOUNT PAYABLE 347.72 G. YOUR PORTION OF GRATUITY IS-=s 347.72 DEPENDENTS' ALLOWANCE IN ISSUE TO YOU \$_ 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 E

TREASURY CHECKED BY

MAVI

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Name	FULT ON .	Hugh C.		No	
	Surname	Christian Names	-		
Lie	ut.	R.C.N.V.R. 0/S			or_g_hh
Rank		Unit		Da	te of Death
			AMOUNT		
				L.P.C\$	369.67
		Date9. Oct. 45		Other Credits	263.99
				Total	633.66

SHARE	RELATIONSHIP	NAME AND ADDRESS	AMOUNT
All	Mother	Mrs. Mary W. Fulton, 149 Bedbrooke Ave., Montreal, West, Que.	633.66
		(As next of kin entitled)	
		P4. TO TREAS. 17-10-45 Qu	

H.Q. F.E. No.	VOTE	PRI	H.Q. SUB.	ОВЈ.	AMOUNT
9999	831	00	50	000	633.66
CLASSIFIE	D BY		EXAM	INED BY	

OISTRIBUTION APPROVED AND AUTHORIZED

(L. M. Firth) Colonel
Director of Estates

AUDITED FOR PAYMENT

PLACE	Muni-	Official name of civil municipali-	f	Place an X over the word which applies to this munici, ality or this territory
OF _	county AT SEA	ty or township	•	City Town Village Parish Township Hospital or
DEATH	Street	No.	16 11 1	Institution
DENGTH OF STAY	or institu- palit	In munici- y where n occurred	Months	Days Years Months Days (d) In Canada Years Months Days (fi immigrant)
NAME	Surname PULTON		Do not	CONFIDENTIAL MEDICAL CERTIFICATE OF DEATH
FCEASED	(Block letters)	t1	write in his space	e 22. Date of death
StreetBe Official name civil munici	edbrooks Ave.			(Month) (Day) (Year) 23. I HEREBY CERTIFY that I attended deceased from
Municipal	hip SOUTTERL WEST,		N.	and last saw h
	NATIONALITY 7. RACIAL ORIGIN 8.	Single, Married,	- T	24. CAUSE OF DEATH
If married giv	(Citizenship) W	idowed or Divorced (Write the word)		Immediate cause Give disease, injury or complication which caused death, not the mode of dying, such as heart failure, asphyxia, asthenia, etc. (a)
ne of wife or hus id of deceased	-			Morbid conditions, if any, giving rise to immediate cause (stated in order proceeding backwards from immediate cause). (b) **ALBERII** which was sunk due to enemy action.
BIRTHPLACI				II (6)
DATE OF BIRTH		23 1922.	-	Other morbid conditions (if important) contributing to death but not
AGE OF DECEASED	(Month) (Day) Years Months Days If less	than one day old		causally related to immediate cause.
	21 11	.hrs. ormin.	+	If a communicable disease is { (a) Date of appearance
13. Trad kind of wo teamster,	le, profession or	entative.		give (b) Duration of diseasedays
business, a	of industry or as cotton-mill, Bell Telephone	00.		25. If a woman, was there a puerperal condition?
15. Date worked at	deceased last spent in the this occupation occupation	rs iis		State findings
	17. NAME	18. BIRTHPLACE (Province or Country)		27. If death was due to external causes (violence) fill in also the following:—
FATHER				Accident, suicide or homicide
MOTHER Maiden Name)		,		Manner of injury(How sustained)
Place of burial mation or ren				Nature of injury
Date of burial.		19		Signed M.D.
(a) Na	me of parish			Address Date 19
(b) Civ	vil muni-		28. Sign	mature of person who fills in the form 29. Name of clergyman in charge of Register of
m (c) Mu	ality of inicipal inty		A COM	Civil Status in which registration of this burial was made.
H (d) Do	-		Paymr.	nature authorizes the collector to accept
(d) Da	(Month) (Day)	(Year)		this form as authentic. (Voir l'autre côté pour le français) tor of Personnel Records, Raval Service Headquarters.

Do not write in this space

S. 1320 D 20000M-11-43 (2867-8-9-70) N. S. 815-9-1320-D. K. P. 95440

NAVAL MESSAGE

To:

1.256 40

NSHO

MRS MARY FULTON
149 BEDBROOKE AVENUE.
MONTREAL WESE, QUEBEC

CNP

THE MINISTER OF NATIONAL DEFENCE FOR NAVAL STRVICES DEEPLY REGRETS TO INFORM YOU THAT YOUR SON LIEUTENANT HUGH WAMERON FULLON R C N V R IS MISSING AT SEA.

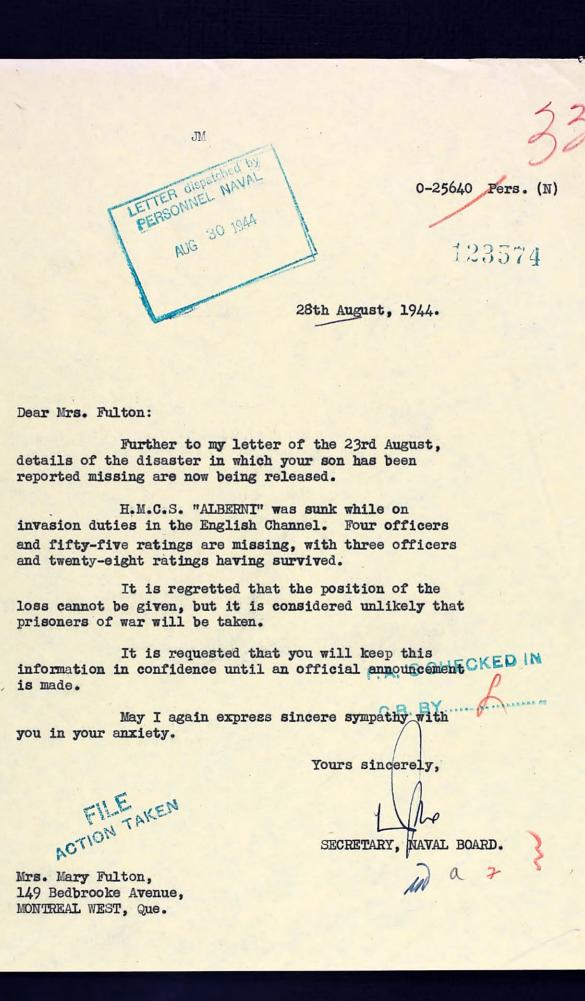
LEETER FOLLOWS.

124

(DELIVERY CONFIRMED)

L/T P/L TOR 2408-44 LD 28464 N.S. O-25650 PERS (N) DRAFTED BY N P R (PAY LIEUT T F HEARD)

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Hugh was a very good Officer and as soon as we got back to Canada I was recommending him for a job as First Lieutenant.

I have told you the facts as I remember them but there is something else I wish you to know. No man thought more of his Mother than did Hugh. We often talked about home and Hugh always had something nice to say about his Mother.

I hope to get back to Canada soon and if I am in Montreal I will call on you.

If there is any way in which I can help, please do not he sitate to call on me.

Yours sincerely,

"Ian Bell"

Mrs. Mary Fulton, 149 Bedbrooke Ave., Montreal West. P.Q.