

MORLAIX RIVAR .

· moronno ·

0

GRASHLA CAMPS

LAC Wilcox, Oliver James
Sgt Wild, Allen Rey
Sgt Wilde, Alan Raymond
Rfn Wilder, Roy Elwood RI
Cpl Wildey, Norman Ross Re
WO2 Wildfong, Gordon Walten
Capt Wildgoose, Richard
Pto Wilding Gordon Wesley R RCAF Regina Rif RCAF RWpg Rif Regina Rif 1 H Wilding, Gordon Wesley · R. Regel Wilding, John Archibald, DFC RCAF Ton Wilding, Maurice Pte Wildman, Harold Richard Ont R Frederick · SD&G Highrs Pte Wildsmith, William Ralph Pte Wildsmich,

L/Cpl Wile, Frank Marcus
Nth NS Highrs
Pte Wiles, Douglas
Pte Wiles, Ancel Grant
RCASC
RUSTON Reith
RCAF
RCAF Pte Wiles, Douglas RCOC
Pte Wiley, Ancel Grant RCASC
F/L Wiley, Burton Keith RCAF
F/L Wiley, George William RCAF
Bdr Wiley, John Walter RCA
Pte Wiley, Wilson Glenn 48 Highrs
F/O Wilhelm, Edward Linus RCAF
CQMS Wilhelm, John Charles
Linc & Welld R L/Col Wilkes, Albert Nth NSHighrs Sgt Wilkes, Frederick Francis Tor Scot R Pte Wilkes, George Bernard Tor Scot R Pte Wilkes, William Roy F/O Wilkie, William Pte Wilkins, Edward Wilson F/O Wilkins, Robert Archie Pte Wilkins, Walter George Carl & York Gnr Wilkins, Willis James Pte Wilkinson, Arthur NthNS Highrs Pte Wilkinson, Arthur Campbel Pte Wilkinson, Donald Ir P Pte Wilkinson, Frederick William IrRC Alq R Rfn Wilkinson, Fredrick James

Gnr Wilkinson, George Wesley

Bdr Wilkinson Harry Ldg Sto Wilkinson, Horace Edward RCN Gnr Wilkinson, John Gerald L/Cpl Wilkinson, John Warren Camerons of C Tor Wilkinson, Norman Earl s RCAF Hast&PER F/O Wilkinson, Roy Thomas Pte Wilkinson, Russell 1 Pte Pte Wilkinson, Thomas Donald Camerons of C P/O Wilkinson, Thomas Edward RCAF Sigmn Wilks, Lawrence Edward Wilks, William Charles Hill of C Willett, Arthur Donald RCAF Willett, Frank Harvey GGHG F/O Willett, Arthur Donald RCAF Tor Willett, Frank Harvey GGHG Rfn Willett, Fred Rfn Willett, Gerald Leslie QOR of C Spr Willett, Gerald Leslie QOR of C 1 July 12 Jul Spr. Willett, Gladwyn Benjami L'Cpl Willette, Adam Adolphus, Carl&York R Pte Williams, Alexander Filmore West NSR Pte Williams, Arnold Eugene Nth NS Highrs Rfn Williams, Arthur Orville F/S Williams, Arthur Raymond Pte Williams, Brian George Arden Lt Williams, Cameron Collin Regina Rif Pte Williams, Charles Edward 4 PLDG Pte Williams, Charles James SD&G Highrs Pte Williams, Clifford Lorne CScot R G/C Williams, David Gabb RCAF Pte Williams, Earl John Ir RC Spr Williams, Edmund John RCE WO2 Williams, Elmer Frasken RCAF F/O Williams, Erle Keith Lt Williams, Fred SD&G Highrs WO2 Williams, Gandon Joan WO2 Williams, Gordon Ivan Cpl Williams, Hartley Edwards

Value.

(OVER)

# CONTINUOUS SERVICE ENGAGEMENT, OR RE-ENGAGEMENT To be forwarded to the Naval Secretary, Department of National Defence, with Form S. 59

Horace	Edward	WILKIN	ISON		NameAddress	and the same of th	th August 1 th August 1 than Stoker
10	DATE OF BIR	гн*	ě	PLAC	E OF BIRTH		ANK AND STATION OF
17th	Septemb	er, 191	Town County. Province	Per	ralford rth ario	R.C.N	in, .V.R., .S. "NIOBE"
1		Pe	rsonal Desc	cription at th	e Date of this Documer	nt	
Height	Chest	Hair	Eyes	Complexion	Wounds, Scars or Marks	Religious Denomination	TRADS OR OCCUPATION
6'1"	39	Brown	Blue	Pair	Small scar just above right knee	Presby- terian	Truck Dri
Enga	ng date of gement or ngagement	16t	h Augus		Period of Engage- ment or Re- engagement	Seven	Years
unteerin	tually vol- ng to en- re-engage	25t	h March	, 1944 I	Date of entering present ship	16th	S. "ALBERN August 194
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C.N.S. 55 10M-6-42 (4777) N.S. 815-9-55

I.—Declaration and Certificate for Men newly entered and Men who have been out of the Service since the
Horace expiration of the previous C. S. Engagement
I,
Service of Canada*
faithful and bear true allegiance to His Majesty. As witness my hand this 16 thday of August
Man's Signature in full
Witness to Signature James Hauss
Attested before me this 16th day of 19.44.
Fay-Lieutenant, R.C.N.V.R. Signature of a Commissioned Officer of the Naval Service
Date 16th August 1944
This is to certify that we have examined the person named on the other side hereof as to his fitness for the Naval Service of Canada, and we find as follows:—He is of perfectly sound and healthy constitution, free from all physical malformation, active and intelligent; and we consider him in all respects fit for His Majesty's Service.
Commanding Officer
Lu. Medical Officer
II.—Certificate and Declaration for Boys
Date
This is to certify that we have examined the boy named on the other side hereof as to his fitness for the Naval Service of Canada, and we find as follows:—He is a well grown, stout, intelligent lad, of perfectly sound and healthy constitution, and free from all physical malformation, and we consider him in all respects fit for
His Majesty's Service.  The consent of his parents or guardian has been obtained in writing, and they are willing and desirous that
the boy should be entered for
Commanding Officer
Lieutenant
I declare that to the best of my knowledge or belief the answers to the questions on the other side of this form are true and that I am not indentured as an apprentice.  I am willing to enter and serve in the Naval Service of Canada for
I will be faithful and bear true allegiance to His Majesty.
Boy's Signature in full
Witness to Signature
Attested before me this day of Signature of a Commissioned
Signature of a Commissioned Officer of the Naval Service
III.—Re-engagement for Continuous Service  To be executed by men who have not been out of the Service since the expiration of their first engagement
The particulars indicated on the other side are also I,, now serving as a
Form is used.
on board H.M.C.S,who on the
engaged to serve in the Naval Service of Canada for a period of §
engage to serve for a further period**
Witness Commanding Officer
Witness
* Insert "for the term of (number in words) years," or "to complete (number) years for pension" or until I attain the age of years." † Insert the date from which the engagement commences. † The document conveying the consent to be attached to this paper. (N.B.—Not required in the case of youths over 17 years of age.)
* Insert "for the term of (number in words) years," or "to complete (number) years for pension" or until I attain the age of years."  † Insert the date from which the engagement commences.

Can. B. 207

# CERTIFICATE OF MEDICAL EXAMINATION FOR THE ENTRY OF OFFICERS, MEN AND BOYS FOR THE NAVAL SERVICE OF CANADA

(R.C.N. OR RESERVE FORCES)

Note-	—This Ce Defence	ertificate e, Ottaw	is to be completed a.	by the Ex	amining M	ledical Offic	cer and fo	rwarded to	o the Na	wal Sec	retary,	Departr	nent of N	ationa
and	idate I belie n belov	for en eve hin w in n	dersigned, have try as	./L/ST respect	COR s fit for	·C·N·	ajesty's	Servic	е. Н	le has	s sign	ed the	e Certi	
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	Urin		Sugar- Neg				/	· ·	M	Exa	minin	g Medic	al Office	r.
			Alb Neg	•			(Rank)		Sec	5	-/	KY	· U.	R.
	This	s exan	nination has be	en ma	de in ac	cordanc	e with	the Ins	tructi	ons fo	or Re	cruitii	ng.	
a Age (Years Months	© Weight without Clothes	© Height with Bare Feet	General Development	Chest Girth	Vision by— S (i) Snellen's Types (ii) Colour Vision	Vaccinated or revaccinated for Small Pox (Date)	ELungs, Heart, etc.	Abdomen, Hernia, etc.	FLimbs and Joints	© Skin	Ears and Hearing	Testes, Varicocele, etc.	Mouth, Teeth (No. defi- cientand No. defective, if any), Nose, Tonsils, etc.	Anus, E Haemorrhoids, etc.
32yrs. Ilmth & Age	lbs.	ft. ins.	Good	maximum  (b) minimum  (b) mean  (c) mean  (d)	right eye 20 20 left eye 20 20 N colour	25.	Normal	Negative	Negative	Clear	Normal	Negative	Negative	Normal
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	This		a Candidate is pa		is	to be filled	d up.							
not o	conside	ered of	f sufficient imp			ıse his r						other	respec	ts.
					1					Exa	mining	Medic	al Office	r.
						(Rank)								

<sup>\*</sup> The exact meaning of this is to be clearly explained to the Candidate by the Examining Medical Officer.

(1)	MEDALS PERSON ENTITLED TO	Mrs. Audrey Wilkinson - Widow	MEMORIAL BAR
	ADDRESS:	141 Duke Street, 26 Shelby Ave., Hamilton, Ont.	DATE DESP
(2)	MEMORIAL CROSS WIDOW	Mrs. Audrey Wilkinson	(2)
	ADDRESS:	10757 Plaza Blvd., MONTREAL NORTH, Que.	31-1-45
(3)	MEMORIAL CROSS MOTHER	Mrs. Maude Wilkinson	(3)
	ADDRESS:	108 Belview Ave., Hamilton, Ont.	31-1-45

D	OF	D	21	-8-44
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F DEPARTMENT OF VETERANS AFFAIRS

No.

AWARDS	N	A	V	Y	1
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D.D.

WAR SERVICE RECORDS

WILKINSON	Horace	Edward	N-88189	L/Sto.	FILE No.
SURNAME (IN BLOCK	(LETTERS)	CHRISTIAN NAMES	REG. No.	RANK ON DISCHARGE	C.A.S.F. UNIT

WAR SERVICE

BADGE

(CLASS)

DATE DESPATCHED:

ADDRESS:

CAMPAIGN MEDALS	REGISTRATION NUMBER AN DATE DESPATCHED
1939-45 Star Atlantic Star & Clasp	7349 14/3/50
C.V.S.M. & Clasp War Medal	
371	
	(THE REVERSE TO BE USED FOR ESTATE PURPOSES)

22129	y	OFFICIAL NUMB		FILE NUMB	ER	N-2212	.9			-	-	OF	FICIAL NUMBER	22129
NAME WII	KINSON (Surname)	Horace	Edward	iven Names)						DATE OF	BIRTH	17th S	September,	1911
DI ACE OF BIDMY	Stratford, Ontario			iven Names)				Truck D	mirron					
RELIGION	Presbyterian	<i>J.</i> s	EDUCA		Grade	occupat	ION	Truck D	TIVEL					
	TIME OF ENLISTMENT: Street	and No.	EDUCA	TION,		YV.±	Town	Greenock	ς		D		Scotlar	d
	ENGAGEMENTS					DESCRIPTI					Pro	vince, etc Prev	ious Service	<b></b>
Date (in figures)  Day   Month   Year	Period		Height	Hair	Eyes	Com	plexion	Mar	rks or Sc	ars		Served in	Rank or Rating	Dates
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Bar	DGES, G.C. OR G.S.													
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22129 OFFICIAL NUMBER	NAME (Surn	TLKII	NSON Horace Edward.						official number 22129
Ship or Establishment Rating	Day Mont		Remarks	Character	Efficiency		Date Month	Year	Non-Sub. Rating    Qualified   Re-Qualified
Niobe (Alberni) Sto.l/c (Ty A/ldg.Sto.(Ty	16 8 7) 17 8	44		V.G.	Supr.	21	8	44	
DISCHARGED	21 8		Missing Programal Deed						
	ZI C	44	Missing, Presumed Dead						
								•••••	
									GENERAL REMARKS Extract from RN Service.
						-			Sto.1/c 8.9.36. A/Ldg.Sto.28/4/4/4115/8/44 Transferred to R.C.N.
									Canadian Memorial Crosses issued to Wife: Mrs. Audrey Wilkinson,
									1/1 Duke St., Hamilton, Ont. and to Mother: Mrs. Maude Wilkinson, 108 Belview Ave., Hamilton, Ontario.
									31-1-45. S.C. checked on discharge
			-						
			<u> </u>					••••••	<u> </u>

#### (Information extracted from Naval Service Headquarters' Records.)

Six copies to be rendered to Naval Service Headquarters

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

EMICISK NAVAL SERVICE HEADQUARTERS at OTTAWA, Ont.	
Jame	
$\begin{array}{cccccccccccccccccccccccccccccccccccc$	
Place of Birth Date of Birth 17th September, 1911	
Occupation in Civil Life. Truck Driver Religion. Prosbyterian	
(Temporary) or Reserve ratings).  Place of Death	1944
Cause of DeathMicristapromused_killed_when_the_ship_in_which_he_was_serving (If due to accident, violence, or enemy action, particulars to be stated briefly)	
i.E.C.S. "ALBERNI" was lost in the English Channel due to enemy action.	
Vearest known Name Name Relationship Name	
relative or friend.  Address	
Date on which the above was informed by Ship. Haval Service Reedquarters: 23rd Aug. 1	944
Date on which death was registered with local Officials	
n 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 Date of Burial	
Location, Number, etc., of grave	
Undertaker employed	
noted m.O. Secretary Officer DOARD	
The Secretary, Naval Board Department of National Defence, Ottawa, Canada.  OTTAWA, Ont. February 2 8	194

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

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

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

WILKINSON Horace

IN THE ROYAL CANADIAN NAVY

Date of birth  Where Province Contains  Where Province Contains  Town or county Stratford Lath  Relationship: Address: H. Suke Stree  Religious denomination  Date passed swimming test  Man's signature on discharge to pension  All Engagements, including N.C.S., to be noted in these Columns  Date of actually volunteering  Date of actually volunteering  Of time  Period volunteered Date of actually volunteering  Table 1 to the Columns  Date of actually volunteering  Table 1 to the Columns  Date of actually volunteering  Table 2 to the Columns  Date of actually volunteering  Table 3 to the Columns  Date of actually volunteering  Table 4 to the Columns  Table 5 to the Columns  Date received or forfeited  Nature of decoration  Date received or forfeited  Date received or forfeited  Nature of decoration  Date received or forfeited  Nature of decoration  On entry as a boy.  On entry as a boy.  On entry as a boy.  On advancement to man's rating or on entry under 28 years.  On re-entry for C.S. or for Non-C.S. after attaining 28 years.  On re-entry for C.S. or for Non-C.S. after attaining 28 years.		~	ifi	Da	٩		8			C	Official Nu	mber 22/29
Where born Town or county Stratford Lerth Relationship: Make: Address: Helationship: Make Streen Religious denomination Stratford Religious denomination Stratford Religious denomination Strategy to Date passed swimming test.  Man's signature on discharge to pension  All Engagements, including N.C.S., to be noted in these Columns  Date of actually Commencement for time for volunteering of time of time for	Date of birth	17 dep	ter	nb	er	191	11			Nea	To be noted	elative or Friend d in pencil)
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Second Class for Conduct (inclusive dates)			et .	3 Doffei	tion of To-	Efficiency in			
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			7	The substations: Supr. (A	antive rating A.B.).	held by the man	at the time is	to be noted in b	orackets after each assessment
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# If a copy of this Form is required, Form S. 1243 is to be used.

S.-459 (Revised-January, 1934).

CERTIFICATE of the Service of

SURNAME.
(IN BLOCK LETTERS)

CHRISTIAN NAME OR NAMES.

MILKINSON

Horace Edward

in the Royal Navy.

NOTE.—The corner	of this Certificate is to be cut off where	indicated if the man is	discharged with - 447 To -
or with disgrace,	or if specially directed by the Admiralty.	If the corner is cut off.	the fact is to be noted in the Tark

or with disgrace,	of it specially di	ected p?	the Ac	amiralty	. If the	corner is cut of	off, the fact is to be note	ed in the Ledger
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CAUTION: This is an Official document. Any alteration made to it without proper authority will render the offender liable to severe penalties.

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# Name Horace Edward Wilkinson

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#### OCCUPATIONAL HISTORY FORM

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

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

	O. C. A OFNEDAL INFORMATION	DIFACE
	Section A—GENERAL INFORMATION	PLEASE LEAVE BLANK
1.	(a) Print name in full Horace Edward Wilkinson (b) Reg'l. No.	1
2.	(a) Arm of service. No. (b) Unit. R.C.N. (c) Rank. A/L/Sto. (Ty.)	
3.	(a) Date of birth 17 Sept 11 any dependents? Yes at time of enlistment H. M. C. S. "ALBERNI"	
4.	(a) Place of enlistment Greenock, Scotland (b) Date of enlistment 16th Aug. 44	
	Section B—EDUCATION AND TRAINING	\
	(a) State age on (b) Were you attending school finally leaving school or college up to the time of enlistment?	1
6.	State definitely highest standing reached at hiblic, technical or high school	
-20	(for instance—"4 years, Public School", "two years, High School", "Junior Matriculation", or "4 years technical course in printing", etc.)	
7.	If you attended a university, give name of university and standing or degree secured	
8.		
	(a) Did you ever (b) It so, (d) If you did not enter upon a trade for what (c) Did you finish it, how long apprenticeship? did you serve at it?	
9.	(a) What languages do you speak fluently?  (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 WORK- (b) At time of en-	
	(Enter here only "Work-	
	ing or Not working, on Active Dervice professional society	
	lars are asked for below). with Royal Reyy were you a member?	
	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?	
	(a) If answer to 11 be "Yes", (b) State how long you	
	state exact trade or occupation had worked at this trade or occupation	
	If answer to 11 be "No", state exact trade or occupation for which you feel qualified	
	If you had been employed after leaving school, state	Ï
	when you last worked fairly regularly before enlistment	
15.	Give details of last employer, if any: Name	
16.	employer, if any: Name	
17.	(a) If your last employment was	
	in a business of your own, state  nature and address of business continuing it continu	
_	Section E—PARTICULARS CONCERNING THOSE WHO WERE EMPLOYED AT TIME	
	OF ENLISTMENT	
Q	JESTIONS 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	
	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	
19.	Nature of employer's business (for instance, "farmer", or "building	
00	contractor", or "boot factory", or "iron foundry", or "retail store", etc.)	
20.	specific occupation this occupation with any employer	
21.	specific occupation	
	employment on discharge?employment on discharge?former employment?	
	E YOU WERE WORKING ON YOUR OWN UP TO THE TIME OF FULISTMENT THAT IS TO SAY OPERATING A FARM. A STORE, AN AGENCY.	
-	F 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.	or professional practice	
23.	(a) State nature of business, may Business (b) Where was Hamilton Ontario or professional practice	
	Section F—PARTICULARS OF FARMING EXPERIENCE	
24.	(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?	
25.	(a) Were you No (b) How many years' actual None (c) In what provinces born on a farm? did you have experience? did you have experience?	
-	Section G—MISCELLANEOUS  Have you made any arrangements other than indicated above, for re-establishment in civil life after discharge?	
		241
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 None may have, other than indicated elsewhere in this form.	
*****		-
	TE 16th August 194 SIGNATURE H.E. Willinson	
DA	TE SIGNATURE H.C. WALLOWS ON	

*Name WILKINSON Sorace Edward.
Sub-Rating and Seniority. Add Add 28-4-41 Non-Sub.
*O.N.KX . 89543 S.B. No. W.B. No.
Joined Ship 27-12-40 from Dake
Engagement: Period Laveline Mars. Expires 7. September 1948
*Date of Birth 19 September 1911 *Religion Presbyter you
Character Date Date
Badges
Date due for: — Next Badge 8/9/44
Progressive Pay. 8/9/42
L.S. & G.C. Recommend.
Advancement. Wishes to Pass? Recommended? Date Qualified.
Educ. Test Pt. 1
Higher Educ. Test
Professional for
higher Sub-Rating
Do. Non-Sub. (For Ordinary Seamen Form T.S. 34 must be used in addition).
V/T. Noted for
Any Non-Service Attainments
Swimming Qualification P. P. T. 19/11/36 FAIR
Athletic Capabilities Frotale.
*General Remarks (including powers of command, influence, intelligence, energy, and
initiative).
Power of command Fair
Seeks information and keen to get on.
. 20
H.M.S. " Drake " Why to colv.
Date. 19.11.36 Officer of Division.
19.1.37
2. Keen, and has ability above to a verge.
A .
Does not, at to moment, promise well for
leading rate.
* (30 Apr 1937
H.M.S. " ECLIPSE "
Date 10-10-37

Strongly recommended for Ldg Stoker.
A.M.S. "Decoy w. J. Spendlow C Engline Officer of Division.
. Aboue average intelligence works well. blean and smart in his appearance
H.M.S. " Hecla " I tamow We Eng. Date 3 Alph 41 Officer of Division.
Flyooof type: Keen I energetie. 17 bove average intelligence.
A.M.S. "Celandine " F. D. Thela . S/25. RNF. Oate 2 Jan. 42. Officer of Division.
El bore average intelligence.

General Remarks (continued).

Notes:—(1) This form is to be kept for each rating by the Officer of his Division.

(2) The form is to be completed to date before the rating changes his Division or Ship. "General Remarks" are to be filled in in ink and signed by the officer of the Division; the other headings being filled in in pencil.

Officer of Division.

- (3) Remarks on the suitability of Acting Ratings for confirmation are to be made under "General Remarks."
- (4) On a rating changing his Ship or Establishment, Form S.264 is to be transferred with his other papers for the information of the next Officer of Division.

**S. 1246A.** (Revised--August, 1934.) Sta. 1/34.

#### HISTORY SHEET FOR STOKER RATINGS.

This form is to be kept by the Engineer Officer, and is to be completed:—

- (a) When a man leaves a ship after a period of not less than four months' service in her.
- (b) Annually on 31st December, unless completed within the previous four months.
- (c) As directed under special headings.

\*Award of Auxiliary Watchkeeping Certificate and results of all professional and school examinations, courses and qualifications for promotion are to be inserted in this space.

17491/8415 3m/10/34 28399/8771 3m/2/35 Wt & Sons Ltd 1770a/15947/603

Na Surname		Christia			Official Number		Port Division	
11LKINSON	Hora	ce Ed	ward	K	x 89543	De	romport.	
	TECH	D CLASS	RAININ	G NEW I	GINEERING.	L EFFI RSE AN	CIENCY	
Course	-	Date Commencing	c of Completing	Class of Certifi awarded o completion	n Rema		Signature and Rank of Examining Officer	
w Entry Course • Technical Training a		~1 - 9 -36	13-11-36	Salinfact	alresse area	42	us?	
Training Establish (1) Marine Engi	ment :—	93 11.36	20 1 31	Satisfactory	Keen osho	uld Well A	Modelle.	
(2) Electrical	. }	20.11.00	7.77	July	ap to Ale	aded NE	ER CAPT	
Intered H.M. Service	as Stokar In	Signature	and Rank	x:	-Date /4 /9	Wy	Str. Colv.	
Advanced to Stoker 1s Advanced to Leading S Advanced to Stoker Pe	st Class Stoker etty Officer_	Signature	e and Rank	36 37 F	Completed 2 years'	training for 2nd Class— 1st Class		
Entered H.M. Service a Advanced to Stoker 1s Advanced to Leading S Advanced to Stoker Pe Advanced to Chief Stol	st Class Stoker etty Officer_ ker	Signature d Class J	Sefet.  July 14	36 37 F	Completed 2 years' Rated Mechanician y dvanced to Chief M	training for training for the class fechanician Footnote	e.)	
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# Employment and Ability Record.

### STOKER RATING.

Efficiency:--To be indicated as "Superior," "Satisfactory," "Moderate," or

									EFFICIE		10 00 11	laicatea	•	iperior,	Saul	stactory	, 1120	ierate,	or
	4		W	atchkee	per —		<b>→</b>			<del>\</del>		, ,		arge of —			<b>&gt;</b>	18	
	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17		
Date	Ceal Fireman or Burning Oil Fuel, including Boats	Electric Light Bugire	Distilling Plant	Refrigerating Machinery	Air Compressing Machinery, including E. A. Plant	Internal Combustion Machinery	Hydraulic Pumping Machinery	Boiler Furnace Bricklaying	Electrical Duties (H. P. E.)	Steamboat Machinery	Motor Boat Machinery	Boiler Water Tender	Boiler Cleaning Party	Engineroom Watch Keeping at Sea	General Charge of Firing in a Boiler Room	Double Bottom Party	Regulating Duties	Engineer's Writer	OL of The standown
30/9/37	Pat	_	-	1-						_	-					-		1	-
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Jan 2./42	Supr.	Sat.	Sat.	-	-	_		-1		-	-		-		Scet.	-	_	-	-
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Special Remarks.

Has a knowledge of the trade of

## Employment and Ability Record.

tenance"

NAME WILKINSON Horace Edward
Official Number KX 89543 Devomport.

-- To be indicated as "Superior," "Satisfactory," "Moderate," or "Inferior."

10 be in	dicated		uperior,		Stactory	, 1.20	derate,	01 11	merior,				
		— In Che	arge of —				18	19	20	: 21	22	23	24
11	12	13	14	15	16	17							
Motor Boat Machinery	Boiler Water Tender	Boiler Cleaning Party	Engineroom Watch Keeping at Sea	General Charge of Firing in a Boiler Room	Double Bottom Party	Regulating Duties	Engineer's Writer	Charge of Engineers' Stores and Tools	Power of Command	Present Rating	REMARKS	SHIP	Signature of Engineer Officer, if of Lieutenant's Rank or above, otherwise Captain of Ship
Sup	1 , 1	1 1 1 1		. Scit.	1 1 1 1		1 1	Sal Supl.	Mod Sal- Sup!		Recommended for La Stoker.	Echps. "DECOY." "DECOY." "Hecla" "Celandia	Stimbold Superoni Lungo Colombia
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#### RIFLE PRACTICES.

(To be filled in immediately on completing Course).

Date	Ship	Practice carried out	Signature		
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lo o a light.					
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all light to					
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has sa	Residencetisfied us that he possesses a ‡edge of the vocation mentioned, and Examine	we consider that \( \) ers :—			
	Date of Examination:—				
		${f Voc}$ § Special notations as applicable.	President. ational Training Committee.		
	‡ Here insert qualification.				
*	TO BE FILLED UP O	NLY ON FINAL DISCHAR	GE.		
His ch	aracter during service was *		-		
His ge	eneral efficiency in carrying out his d	uties was *			
	ficiency on discharge was assessed as 610, clauses 3 to 7 K.R. & A.I.	S *			
		Signature and Rank			

A pamphlet entitled "His Majesty's Naval Service: A Brief Description of the Qualifications and Abilities of Men of the Naval Service," is distributed to the Employment Exchanges under the Ministry of Labour, in order to assist the Employment Exchanges in dealing with the cases of discharged Naval ratings.

1770/603

Form No. S. 443.—(Established—October, 1932).

### AUXILIARY MACHINERY COURSE FOR STOKER RATINGS.

#### CERTIFICATE OF QUALIFICATION.

H.M.S. S. DECOY.

This is to certify that Horace Edward Wilkinson .

First Class Stoker, Official Number X89543 serving in H.M.S.

has successfully passed through the Auxiliary Machinery Watchkeeping Course, as laid down in K.R. and A.I. Appendix XVII., Part I, No. 39 (F), and notations have been made on his History Sheet accordingly.

\* 28 MAR 1939 \*

\*\* M.S. "DECOY"

Engineer Officer.

Commanding Officer.

Date 28th harel 1939

13 March.

2.

FROM: The Commanding Officer, H.M.C.S. "AVALON",

St. John's, Newfoundland.

TO: The Commanding Officer, H.MC.S. "STADACONA", Halifax, N.S.

Horace Edward WILKINSON, Ldg. Sto., O.N. P/KX89543, R.N.

The above named rating has requested to transfer from the Royal Navy to the Royal Canadian Navy under seven years' continuous Service engagement on compassionate grounds.

- 2. Wilkinson's mother, who is at present living at 108 Bellevue Avenue, Hamilton, Ontario, has been legally separated from her husband and is striving to keep herself and two children on \$10.00 a week.
- 3. Wilkinson joined the Royal Navy on 8 September, 1936 for a period of twelve years due to the fact that at that time the Royal Canadian Navy was not increasing its personnel.
- 4. Wilkinson is at the present time single and has an allotment made out in favour of his mother amounting to five (5s.) shillings per week.

This request is recommended.

5. Service Certificate is not available.

SGD: Commander, R.C.N. for CAPTAIN, R.C.N. II.

62503

H-3-20-W.
Secretary, Naval Board,
Department of National Defence,
Ottawa, Ontario.

MAR 30 1942 T NAS 42-10-14

Submitted for the consideration of the Department.

COMMANDER, R.C.N.

R.C.N. Barracks, Halifax, N.S., 26th March, 1942. AD



MAJOR W. D. WILSON

VICE-PRESIDENT

2ND VICE-PRESIDENT MR. P. CROUCHER

HONORARY SECRETARY MRS. A. D. STARKE

HONORARY TREASURER MR. J. C. BROWN

HONORARY SOLICITOR

### Family Service Bureau

MEMBER OF HAMILTON COMMUNITY FUND

HAMILTON, ONT.



1078 Barton E., Feb. 17, 1941. MISS JEAN MCTAGGART
MAIN OFFICE: 46 MAIN ST. W.

EAST OFFICE OTTAWA AND BARTON STS PHONE 4-0332

> MOUNTAIN OFFICE 374 CONCESSION ST. PHONE 7-3073

P 18150

Department of National Defence, Ottawa, Ont.

Dear Sirs :-

RE STOKER H. E. WILKINS ON O/K89543 9 Mess, H.M.S. Hecla, C/o G.P.O., London, England

The family of the above-named sailor has been well known to this Agency for some years. His mother is separated from her husband and is dependent for support for herself and her two young children on her half-time weekly char-work and the earnings of a daughter, who has recently started to work on a small wage.

The above-named is the eldest son and Mrs. Wilkinson is not in receipt of any allowance from him, except Five Shillings a week. Four years ago he went to England on a cattle boat and joined up with the Navy for 12 years, along with a younger brother.

Mrs. Wilkinson recently received a letter from her son asking her to get in touch with Ottawa, and see what could be done to have him transferred to the Canadian Navy. He stated that in that event she would be granted a larger allowance to help her.

We would be glad to hear from you as to what steps should be taken to have this change made. He might say that Mrs. Wilkinson and the family are badly in need of some/help from this son.

If there is any further information you require, do not hesitate to get in touch with us.

Yours sincerely,

FAMILY SERVICE BUREAU

(Miss) Muriel H. Milligan

District Secretary

MHM:P

#### HMC DEPARTMENT OF NATIONAL DEFENCE

#### STATEMENT OF WAR SERVICE GRATUITY



Horace Edward 3804 WILKINSON REGISTER NO. (CHRISTIAN NAMES) (SURNAME) NS22129 FILE NO. Mrs. Audrey "arian Wilkinson 28-2-46 PAYEE DATE Apt. 8, 141 Duke St., 22129 ADDRESS SERVICE NO. A/L/Sto Hamilton Ontario FINAL RANK OR RATING 15 Aug DATE OF TERMINATION OF OVERSEAS SERVICE 15 Aug 44 DATE OF DISCHARGE TOTAL QUALIFYING SERVICE NO. OF DAYS 1808 EQUAL TO 60 COMPLETE PERIODS AT \$7.50 450.00 R.N. 1802 B. QUALIFYING OVERSEAS SERVICE 381.00 LESS 8 INCLIGIBLE DAYS, EQUAL TO 1524 DAYS @ 25C, PER DAY NO. OF DAYS 1532 C. SUPPLEMENT FOR OVERSEAS SERVICE DAILY RATES AT DISCHARGE PAY SUBSISTENCE OR LODGING AND PROVISION ALLOWANCE HLM ADDITIONAL PAY 1 GCB 37.20 . 1.24 DEPENDENTS' ALLOWANCE 1/30 OF \$ \$ 5.04 ×7=\$ 35.28 TOTAL 1.16 305.87 R.N. OVERSHAS SUPPLIEMENT D. WAR SERVICE GRATUITY 1138.03 PAY AND ALLOWANCES \$
DEPENDENTS' ALLOWANCE
AND ASSIGNED PAY \$ E. DEDUCTIONS OVERPAYMENT OF OTHER DEDUCTIONS R.N. GRATUITY PD. 157.53 157.53 F. TOTAL AMOUNT PAYABLE 980.50

G. YOUR PORTION OF GRATUITY IS-

DEPENDENTS' ALLOWANCE IN ISSUE TO YOU \$\_

-s 980.50

TOTAL DEPENDENTS' ALLOWANCE IN ISSUE \$

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.

TREASURY PREPARED BY CHECKED BY CHECKED BY DATE J.

SERVICE REPRESENTATIVE

HATY

LL

Name	WILKINSON	Horace, R.		No 25	2120
	Surname	Christian Names		110.	256-3
ldg.,	/Sto.	Unit R.J.N. 0/S		21_8_14	
Rank		Unit		Dat	e of Death
,			AMOUNT		
				L.P.C\$	268.28
	Da	te21 Nov. 45		Other Credits	137.31
				Total	405.49

SHARE	RELATIONSHIP	NAME AND ADDRESS	AMOUNT
All	Wid ow	Mrs. Aulrey Wilkinson, 141 Duke St., Hamilton, Ont.	405.49
		(Sole beneficiary under will)	
		P4. TO TREAS. 28-11-45 Q.M.	

AUTHORITY H.Q. SUB. H.O. OBJ. VOTE PRI AMOUNT F.E. No. 405.49 831 50 00 000 9999 CLASSIFIED BY EXAMINED BY For Chief Treasury Officer

DISTRIBUTION APPROVED AND AUTHORIZED

(L. M. Firth) Colonel Director of Estates

AUDITED FOR PAYMENT

Mrs. Audrey Wilkinson
141 Duke Street
HAMILTON, 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 22129 F.D. 777

#### DEPARTMENT OF NATIONAL DEFENCE ESTATES BRANCH OTTAWA, ONT.

3 January 194.5

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

WILKINSON HORACE EDWARD L/STO

22129 R.C.N.

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/DW

Molada.

Centimandes parien

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:

egrees	D TAT A	TIVES	INFORMANT'S STATEMENT							
of Rela- tion- ship	RELA'	accounted for	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		eceased	andry Marien Wilkinson	22	141 Duke St. Hamillon Ond					
2	Children of the dates of their	hildren of the Deceased and dates of their Births								
3	Father of the D	eceased	Honsee E. Wilkinson	58	134 Calherine Si Hamillan Ont 108 Belliew and Hamillan On					
4	Mother of the Deceased		Mande Wilhinson	28	108 Beliew an					
5	Brothers of the Deceased	Full Blood	5.P.O. Douglas. Q. Wilkinson R.y. Donald L. Wilkinson	.29 13						
		Half Blood	hi							
6	Sisters of the Deceased	Full Blood	Echilh M. Barker Hilda M. Lundy Grene L. Keane Dovis Wilkinson	34 31 22 13	31 Cameson SI: S 1037 King SI: W. Manheal 108 Belsiew S. Ha					
		Half Blood	vi							
7	Names of brothers of the full or the Deceased, who a death of each.	s or sisters (whether ne half blood) of the are dead, and date of	Names and ages of their children (if any)		Address of their children					
			wie							

## ANSWER FULLY EACH QUESTION ON THIS PAGE PARTICULARS AS TO IDENTITY

8	Full names of the deceased.	4/s/o. Horace Edward Wilkin
9	Date of his birth.	50/4 17 1911
10	Place and date of his marriage. Jan. 12/1943	Christ church Cathedral church
11	Place and date of his parents' marriage. Nov. 19 /1909	stratified 10ml.
	PARTICULARS OF D	OMICILE
2	Place where deceased was born.	strafford Ont.
13	State, in order, the Province, State and/or County in which he resided before enlistment and the period of time in each.	(a) Hamillan Ont. (b) entisted in R. M. 1936 (c) (d)
4	Nature of employment before enlistment.	unemployed
15	State whether he owned the premises in which he lived, and, if so, where situated.	x Rouled
16	Name place where deceased stated he intended to make his permanent home.	Hamillin ont.
	PARTICULARS OF	
17	Did he leave a Will? If in your custody, please forward.	just what in the service
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?	no
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?	Funds in on English Bouk: no other perturbas ku
20	Amount of War Savings Certificates held by deceased. Indicate where located.	not known
21	Amount of Victory Loan Bonds held by deceased. Indicate whether registered or bearer and where located.	vol human
22	If deceased had life insurance, name companies and amount payable under each policy and the person named as beneficiary therein.	
23	Describe other assets, if any, and estimated value thereof. Use space on page 4 if necessary.	Probable oscelo from R.N. former Rouch A/Noher # DKX895
	OTHER PARTIC	JLARS remed R. N. from 1836.
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.	- hil
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.	Quo.
	(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 Government in the Regulations. Any amount of such expenses by the Government nor is it chargeable against the service esta	in excess of those authorized in the Regulations is not payable

\*Insert degree

#### **DECLARATION**

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

# STATEMENT OF ACCOUNT

CREDIT from	16th Aug.	Date		T7 A			TITE	
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Pav as STO.							\$	c.
Pay asSTU.								50
	L. fro k Rating)	om 10 Au	gto L	6. Aug	.( <b>1</b> d	ays at \$.2.00a day)	2	.00
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						" " )		
						"		
16.								
OTHER CREDITS: H.L.M.								93.
THER CRED	orts:			-			1	
				_		Total credits	281	68
DEBT from for	mer_account					····		
PAYMENTS:-	- 1st	2nd	3rd	4th	5th			
	\$ c.	\$ c.	\$ c.	\$ c.	\$ c.			
st-month						Total		
nd month					·····	Total		
rd month						Total	-	
Allotment								
Pension deduction	on (Officers) cha	rged to			.of1o.			
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Number of days	actually victua	lled during	period ment	ioned above	e	6 –		
NOT VICTUALLED	LENT, SICK OR LEAVE	INCLU	SIVE DATE	No. OF		SHIP, HOSPITAL, etc., IN WHICH BORNE		
_	LEAVE	FROM	то	DAYS		IN WHICH BORNE		
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Date 14t]	h MAY		19.45	11	190	- 2000		
C:N.S. 2426		R: {	Lieute	enant (S	) for	Supply xxxxxxx	TXXX OF	FICER

R.N. Service

	w.s.	.G. Application No	3804 -
TO: D.N.P.A. "G"	FILI	e no. n.s. N-22/	129 -
	"WAR SERVICE GRA	TUI TY"	
	COMPUTATION OF SH	ERVICE	
WILKINSON HOTOSURNAME CHRIST IN CAUSE OF DISCHARGE: Tra	race Edward TIAN NAMES I FULL Inspersed to		Stoker OR RATING ISCHARGE
	AL SERVICE	4.	1811
Date of Active Service 10	Sep 39		1801
Date of Discharge	1000	-	802
Total No. of Days	- 802		
Less non qualifying service	Nil	Total Days	1802
OVERSE	AS SERVICE		
Total No. of Days	526		
Less non qualifying service	Nil	Total Days	1526
Record of Service in other	Forces (per Naval	Records)	
Branch of Service	4		
Date of Active Service			
Date of Discharge			
# & % Overleaf			
Sonorth Computed By			
Checked By	awell	SP)	
	for	(R.W. Underhill)	

DATE:

A/Captain (S) R.C.N.V.R. Director of Naval Pay Accounting.

### NON QUALIFYING SERVICE

			TO TAL SERVICE	OVERSEAS SERVICE
( <del>#</del> )			22111102	DERVIOR
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n	N			
		Total days	Nil	N/ · J
		10 tal days		
antipart of the section				
(%) OVERSEAS SERVICE:		Kurder ( ) ji dosna)		
Where Serving	From	To	No.	of Days
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Hedr +				
Eaglet)		2 Jan 42	100	846
Sackville	60ct '42			
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	8 3,0	1811		
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		180		
		6 MARKE	120 183	FUR MOR

	(1) I, Horace Edward Wilkinson , of the city (City, Town, Village, Township)
Address in civil life.	of
	Province of Ontario , Truck Driver
	at present serving in His Majesty's Canadian Ship"NIOBE" ("ALBERNI) do hereby revoke all former wills by me made and declare this to be my LAST WILL.
Relationship, names and addresses of beneficiaries and what	(2) I GIVE, DEVISE AND BEQUEATH unto my wife, Mrs. Audrey, Wilkinson, 141 Duke Street, Hamilton, Ontario, all my estate.
and what each is to receive.	
	(3) KANKKIKI CICKKA KANKA KANCA KANC
Relationship, names and addresses of residuary beneficiaries.	
	(4) I appoint Mrs. Audrey Wilkinson Hamilton, Ontario, (Address)
	Housewife , to be the Executrix of this my Last Will.
	IN WITNESS WHEREOF I have hereunto set my hand this 16th ay of August.
	19.44
	Signed, published and declared by the above- named testator as and for his last will and testament in the presence of us both present at the same time, who at his request and in his presence have here- unto subscribed our names as witnesses.    A/Idg. Sto. (Ty)   R.C.N. (Rank or Rating) (Official No.)
First witness sign here.	(5) Signature fames Flandle.
	Civil Address H.M.C.S. "NIOBE", Greenock, Scotland
	Civil Occupation Pay-Lieutenant, R.C.N.V.R.
Second witness sign here.	Signature
0	Civil Address H.M.C.S. "NIOBE", Greenock, Scotland
V	Civil Occupation Petty Officer Writer, R.C.N.V.R.
	(Beneficiaries are not to be Witnesses.)

PROVINCE OF ONTARIO—CERTIFICATE OF REGISTRATION OF DEATH			
1. PLACE (County or District of At Sea	Township of		
OF DEATH (If in City, Town or VillageStreet			
2. LENGTH OF STAY (in years, months and days) (a) In City, Town or Township where death occurred			
3. PRINT FULL NAME OF DECEASED WILKINGON HOPAGE Edward (Family name) (Given name or names in usual order)			
RESIDENCE No. 108 Street Belview Ave. City, Town, Village or Township HAUTITON, Province Ontario.  (Residence means usual place of abode. Post Office Address for residents in rural parts not sufficient)			
4. Sex 5. Nationality (Citizenship) 6. Racial Origin 7. Single, Married, Widowed or Divorced (Write the word)  Racial Origin 7. Single, Married, Widowed or Divorced (Write the word)	MEDICAL CERTIFICATE OF DEATH  24. DATE OF DEATH  (Month) (Day) (Year)		
8. BIRTHPLACE Stratford, Porth, Ontario. (Province or Country)	25. I HEREBY CERTIFY that I attended deceased from:		
9. DATE OF BIRTH 17th September, 1911			
(Month) (Day) (Tear)	and last saw halive on		
10. AGE in Years Months Days If less than one day old hrs. or min.	CAUSE OF DEATH PHYSICIAN		
	Give disease, injury or complication which caused death, not the mode of dving, such as heart		
11. Trade, profession or kind of work as spinner, teamster, office cierk, etc.  12. Kind of industry or business, as cattonmill, lumbering, bank, etc.  13. Date deceased last worked  14. Total years spent in this compation	failure, asphyxia, asthenia, etc.  Morhid cenditions, if any, giving rise to immediate cause (stated in order due to due to due to due to		
13. Date deceased last worked at this occupation	proceeding backwards from im-		
15. If married give name of wife or husband of deceased	Other morbid conditions (if important) contributing to death but not causally related to immediate cause.  English Channel. charged statisticall		
# 16. NAME.			
16. NAME	26. If a communicable disease is mentioned on this certificate, give  (a) Date of appearance		
(Province or Country)	27. If a woman, was the death associated with pregnancy?		
18. MAIDEN NAME	28. Was there a surgical operation?Date of operation		
19. BIRTHPLACE (Province or Country)	State findingsWas there an autopsy?		
20. Person giving information sign here	29. If death was due to external causes (violence) fill in also the following:  Accident, suicide or homicide?Date of injury19		
Address Maval Service Meadquarters, Ottawa, Ont.	(State which)		
Relationship to deceased Director of Personnel Records.	Manner of injury(How sustained)  Nature of injury		
21. Place of Burial, Cremation or Removal	Specify whether injury occurred in Industry, in home, or in public place		
Date of burial or removal	Signed by		
22. Burial Permit was issued by	Address Date 19.		
Address	30. Division Registrar's Record No		
23. Undertaker(Name and address)	31. Filed		

NAVAL MESSAGE

To:

MRS, AUDREY VILKINSON
141 DUKE STREET
HAMILTON ONTARIO

NAVAL SERVICE HEADQUARTERS

N. 22129

84

CIVIP

THE MINISTER OF MATIONAL DEFENCE FOR NAVAL SERVICES
DEEPLY REGRETS TO INFORM YOU THAT YOUR MUSBAND HORACE
EDWARD WILKINSON LEADING STOKER NO -22129 IS MISSING
AT SEA. LETTER FOLLOWS.

/24

DELIVERY CONTINUED

L/T P/L 24-8-44 AMB 23173
DRAFTED BY N.P.R. (PAY LIEUT T F HEARD) N.S. N-22129 PERS. (N)

REGISTERED

AIRMAIL

N.S. 47-W-84 PERS.(N) M.22129)

23 August, 1944

Dear Mrs. Wilkinson:

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 husband, Horace Edward Wilkinson, Leading Stoker, Official Number 22129, Royal Canadian Navy, is missing at sea.

The only information that can be given at this time is that your husband 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. Audrey Wilkinson, 141 Duke Street, HAMILTON, Ontario.

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oa.



N.S. N-22129. PERS.(N)

F.M.O., Halifax, N.S. August 26th, 1944.

P.A. 'S CHECKED IN

My dear Mrs. Wilkinson:

I was the captain of H.M.C.S. "Alberni" and I know there is nothing I can say that will help you in your great loss. I just wanted you to know that you have my sincerest sympathy. Your husband was an excellent stoker doing the job of a Stoker Petty Officer. He was very well liked by all the officers and men and seemed very happy aboard. Before our accident, he had just changed over to the Royal Canadian Navy.

The only minor comfort I can give you is that he was down below at the time the ship was hit and as the ship sank instantly I am sure he did not suffer any pain.

I hope that if I am ever in pass through or wisit Hamilton you will give me the pleasure of allowing me to call on you.

If there is any way in which I can help you, do not hesitate to write me.

Yours sincerely,

"Ian Bell"

Lieutenant Commander, R.C. N. V. R.

Mrs. Audrey Wilkinson, 141 Duke St., HAMILTON, Ont.

Mrs. H.E. Wilkinson 141 Duke SI: Namillan Onl: Queg. 24/44.

Dear Sir.

I wish to thank you for your smhally to wards myself & alkers that may of recieved the same news. But there is some thing I closif undersland in either the litegram or letter that I recieved. Why husbands official no. as I know it is by x. x. 8 9 5 4 3. yet you have it 22192. Can you till me if there is any way finding out if there's heer a mistake made. I will say nathing about the name of his ship i as you probably know he's in the rayal namy on' loan to the R.C. M. I hape this litter will cause you no houble.

siceenly Mrs. Anchey M. Wilkinson

JETTER disperented by PERSONNEL NAVAL TFH/JAG AUS 30 16/14 "AIR MAIL" N- 22129 P 28th August, 1944. Dear Mrs. Wilkinson: -Further to my letter of the 23rd August, details of the disaster in which your husband has been reported missing are now being released. H. M. C.S. "ALBERNI" was sunk while on invasion duties in the English Channel. Four officers and fifty-five ratings are missing, with three officers and twenty-eight ratings having survived. It is regretted that the position of the loss cannot be given, but it is considered unlikely that prisoners of war will be taken. Twee It is requested that you will keep this information in confidence until an official announcement CHECKED IN is made. C.R. BY May I again express sincere sympathy with you in your anxiety. Yours sincerely SECRETARY, NAVAL BOARD. Mrs. Audrey Wilkinson, 141 Duke Street, ACTION TAKEN HAMILTON, Ont.