



F/S Lieveuse, Simon RCAF
 F/O Liggett, Gerald Campbell RCAF
 Pte Light, James Marshall Essex Scot
 Pte Lightfoot, George Joseph S.Sask R
 CPO Lighthall, Augustus Eastman RCNR
 Cpl Lilge, Elmer Adolf 14 H
 Sgt Lilley, Roy Graham BEM 1 H
 F/O Lillico, Allan Gainford RCAF
 P/O Lillico, Gordon William RCAF
 P/O Lillico, William Davidson RCAF
 Pte Limoges, René R de Mais
 Gnr Lincoln, Percy Charles RCA
 A/Ch Lincourt, Joseph Henri Bruno RCAF
 Sto PO Lind, Mekkel George RCNVR
 Lt Lindal, Harold Earl Essex Scot
 F/O Linde, James Alexander RCAF
 Pte Lindell, Earl Gordon RCIC
 Pte Lindenbach, Philip Jacob Camerons of C
 F/O Lindenfield, Alvin Edward RCAF
 P/O Lindensmith, Gordon Leroy RCAF
 Cpl Linder, John Wilfred Regina Rif
 Tpr Lindhorst, Ronald Frederick 12 H
 S/L Lindo, Harold Lester, DFC RCAF
 Gnr Lindoff, Elmer Raymond RCA
 F/O Lindsay, Alexander RCAF
 WO2 Lindsay, Donald Melcod RCAF
 Sgt Lindsay, George Frederick
 Pte Lindsay, George Frederick 1 Cdn Spec Ser Bn
 Charlton S.Sask R
 F/O Lindsay, James RCAF
 P/O Lindsay, John RCAF
 Pte Lindstrom, Ivan Eskil Westmr R
 Tpr Lindstrom, Lloyd Lewis CGG
 Pte Linfield, Frederick Alexander Line & Well R
 Pte Linforth, Charles Thomas RWpg Rif
 LAC Ling, Stanley Harold RCAF
 WO II Lingen, Kenneth Charles RHLI
 Pte Link, Garfield William CFC
 P/O Link, Rudolph Walter RCAF
 F/O Linklater, Jack Allan RCAF
 F/O Linklater, Raymond Edwin RCAF
 F/O Linn, Hubert Joseph RCAF

S/L Linnell, Lloyd Martin RCAF
 F/O Linning, William Edward RCAF
 F/O Linscott, Harold Willis RCAF
 WO II Linsey, Frederick John SD & G Highrs
 Tpr Linstead, Kenneth Gordon 1 H
 Sgt Lintick, Robert George Borden Alg R
 Pte Lintick, Stanley Camerons of C
 P/O Linton, Frank Malcolm RCAF
 P/O Linton, Leonard Thomas RCAF
 P/O Linton, Oswald Adam RCAF
 F/O Lippert, John William RCAF
 Tpr Lismore, Hugh Hjalmar Michael 1 H
 Cpl Lisowicky, Jacob RCR
 P/O Lister, Gerald Lawrence RCAF
 Cpl Lister, William George RHLI
 Gnr Listmayer, Andrew RCA
 Sto 1/c Litattien, Joseph Rosaire RCNVR
 Pte L'Italien, Ronald CB Highrs
 F/O Litchfield, Ralph Frank RCAF
 Pte Litfin, Henry Francis RCR
 Pte Litowski, Nick RCIC
 Pte Litster, George Nth NS Highrs
 Gnr Little, Charles Matthew RCA
 L/Cpl Little, Donald Walter RCE
 Sigm Little, Douglas Merle RC Sigs
 Rfn Little, Earl Kennick Regina Rif
 Cpl Little, Francis Earl Essex Scot
 Pte Little, Gordon Woodford Calg Highrs
 F/O Little, Martin Stewart RCAF
 Pte Little, Peter Calg Highrs
 Pte Little, Raymond RHC
 Pte Little, Ross Roxford CH of O
 F/L Little, Stuart Walter, DFC RCAF
 Gnr Little, Walter Carlyle RCA
 F/S Little, Wilfred Robert RCAF
 Spr Littlecrow, Harold Charles RCE
 Maj Littleford, Edward Leonard RCR
 L/Cpl Littlejohn, Thomas Henry Perth R
 Cpl Litvinchuk, Mytody Essex Scot
 Cpl Litwack, Mike Myer RCASC
 Pte Lively, Burdett James Chalmer S.Sask R
 F/O Lively, Harry Havey RCAF
 L/Sgt Livesey, William Richard RCA

LIGHTHALL
AUGUSTUS EASTMAN
A2404



N. V. 5
5M-10-30 (2385)
N.S. 815-11-5

n. p. R 20/8
AUG 11 1940
N.S. 123-2146
CANADA

4

ATTESTATION FORM

FOR MEN OF THE ROYAL CANADIAN NAVAL VOLUNTEER RESERVE

SURNAME Lighthall OFFICIAL NO. A2404 **P051726**

CHRISTIAN NAMES Augustus Eastman MARRIED, SINGLE or WIDOWER Single

PERMANENT ADDRESS	RELIGION
<u>Picton, Ontario, R.R. 5</u>	<u>Protestant</u>

DATE OF BIRTH	PLACE OF BIRTH	NAME AND ADDRESS OF NEXT OF KIN
<u>May 4th, 1905.</u>	Town <u>Picton,</u> County <u>Ontario.</u> Province	<u>Mother. Mrs. M. Lighthall,</u> <u>same address as above.</u>

PERSONAL DESCRIPTION ON ENROLMENT

HEIGHT	CHEST MEASUREMENT	HAIR	EYES	COM- PLEXION	WOUNDS, SCARS, MARKS
Feet..... <u>5</u>	Inflated..... <u>41 1/4</u>	<u>Grey</u>	<u>Blue</u>	<u>FAIR.</u>	<u>Burn scar on right leg.</u> <u>Tattoo on left shoulder.</u>
Inches..... <u>10 1/2</u>	Deflated..... <u>38</u>				
	Mean..... <u>39 1/4</u>				
DATE OF ENROLMENT	RATING ENROLLING FOR	TRADE OR CALLING AND IN WHOSE EMPLOY			
<u>July 6 1940</u>	<u>Able Seaman,</u> <u>(R. C. N. R.)</u> <u>(Temporary)</u>	<u>Seaman,</u>			

(B) DECLARATION TO BE MADE BY APPLICANT

I hereby declare as follows:—

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

* (b) ~~I served in XXXXXXXXXXXXXXXXXXXXXXXXXXXX of the British Army, and attach my record of service in confirmation of this statement.~~

* Cross out Clause not applicable.

SERVED IN	RANK	FROM

Personnel Records Division.

1. Noted in Records *J.W.*

2. Index Card *J.W.*

3. Non-Sup. Card *J.W.*

4. Service Card *J.W.*

5. Pension Card *J.W.*

6. Pension Card

7.

8.

9.

DATE

- (c) I have never been rejected 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.

Yote

(5) On being enrolled as a member of the R.C.N.R. (Temp) Division of the Royal Canadian Naval Volunteer Reserve, I undertake and bind myself:—

(a) To serve from the date thereof for three consecutive years, ^{and/or the duration} 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 if called upon in time of war or emergency, and, if called into active service, to serve ashore or afloat as may be directed, according to where my services are required.

(c) To keep in good repair and condition the articles of uniform and any articles of outfit which may be issued to me and to return them to the nearest Divisional Commanding Officer or to Training Headquarters prior to my discharge or when required so to do by any authorized person, or to pay compensation for any loss or damage thereto other than fair wear and tear; and also not to wear such uniform or outfit (which is and remains the property of the Crown) except when on naval duty.

Dated this sixth day of July 1940.

Signature of applicant A. E. Lighthall

(C) CERTIFICATE OF DIVISIONAL COMMANDING OFFICER

I hereby certify that all the foregoing statements were made by the volunteer above named, in my presence, and that he has made and signed the above declaration in my presence on this sixth day of July 1940.

H. S. Maxwell
A/M R.C.N.V.R.
Signature of Commanding Officer.

(D) OATH OF ALLEGIANCE

I, Augustus Eastman Lighthall 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 A. E. Lighthall

Witness H. S. Maxwell

Date July 6 1940 Rank A/M R.C.N.V.R.

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

(E) CERTIFICATE OF DIVISIONAL COMMANDING OFFICER

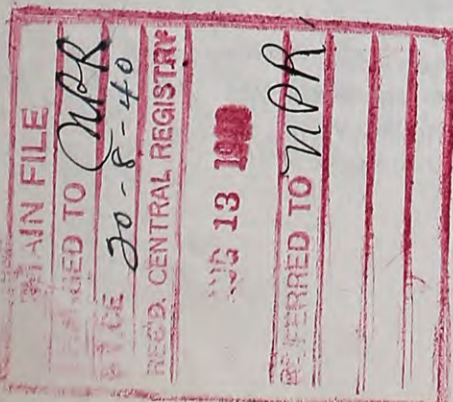
A. E. Lighthall having been duly enrolled to serve in the Royal Canadian Naval Volunteer Reserve Force, I have caused his name and every prescribed particular to be recorded in the Record Book of the..... Division of the R.C.N.V.R.

Norman J. McGuinness
Commanding Officer.

NOTE.—This form when completed and when the particulars on it have been noted in the Divisional Commanding Officer's Record Book, is to be forwarded to Headquarters, Ottawa, for custody.

The Certificate of medical examination, B-207, and certificates of previous service are to be sent to Headquarters, Ottawa, with this form.

Certificates of previous service will be returned after they have been examined at Headquarters, Ottawa.



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

Augustus Estman **LIGHTHALL**

IN THE ROYAL CANADIAN NAVY NAVAL RESERVE

<p style="text-align: center;"><i>Halifax, Nova Scotia</i></p>	<p style="text-align: right;">Official Number... <i>A. 2404</i></p>
<p>Date of birth <i>4 May, 1905</i></p>	<p>Nearest known Relative or Friend (To be noted in pencil)</p>
<p>Where born { Province <i>Ontario</i> Town or county <i>Pictou, Prince Edward Co.</i></p>	<p>Name: <i>Mary</i> Relationship: <i>wife</i> Address: <i>Hotel Hotel Pictou N.S.</i></p>
<p>Trade brought up to <i>Seaman</i></p>	
<p>Religious denomination <i>Church of England</i></p>	
<p>Date passed swimming test</p>	
<p>Man's signature on discharge to pension</p>	

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

Date of actually volunteering	Commencement of time	Period volunteered for	Date of actually volunteering	Commencement of time	Period volunteered for
1.	<i>6 July '40</i>	<i>Duration Hostilities</i>	5.		
2.			6.		
3.			7.		
4.			8.		

Medals, Clasps, Etc.

Date received or forfeited	Nature of decoration	Date received or forfeited	Nature of decoration
<i>Received 3 Feb 44</i>	<i>Canadian Volunteer Service Medal & clasp Provisional Award</i>		
<i>Received 3 Feb 44</i>	<i>1939-43 Star Provisional Award</i>		

Description of Person	Stature		Chest, In.	Colour of			Marks, Wounds and Scars
	Feet	In.		Hair	Eyes	Complexion	
On entry as a boy.....							
On advancement to man's rating or on entry under 28 years.....	<i>5</i>	<i>10 1/4</i>	<i>39 7/8</i>	<i>Grey</i>	<i>Blue</i>	<i>Fair</i>	<i>Burn scar on right leg. Tattoos on left shoulder.</i>
On re-entry for C.S. or for Non-C.S. after attaining 28 years.....							
Further description if necessary.....							

A 2404

OFFICIAL NUMBER

FILE NUMBER

123-I-146

OFFICIAL NUMBER

A 2404

NAME LIGHTHALL (Surname) Augustus Eastman (Given Names) DATE OF BIRTH 4 May, 1905PLACE OF BIRTH Picton, Prince Edward Co., Ontario. OCCUPATION Seaman S.S. "Waterton"RELIGION Church of England EDUCATIONRESIDENCE AT TIME OF ENLISTMENT: Street and No. R.R. 5, Town Picton, Province, etc. Ontario.

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
6	7	40	Hostilities only	5'10 ¹ / ₂ "	grey	blue	fair	burn scar on right leg. Tattoo on left shoulder.				

NEXT OF KIN RELATIONSHIP (in pencil) Wife NAME (in pencil) Mrs Mary LighthallADDRESS (in pencil): Street and No. Globe Hotel Town Picton Province, etc. Ontario

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	
3	2	44	Prov. awarded C.V.S.M. Clasp								
3	2	44	Prov. awarded 1939-1943 Star								
14	6	45	Mention in Despatches (Posthumous)								

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		
6	7	43	1st GCB	Granted							

FILM

NO. WSP-4505-1

DATE

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

O.H.F. Received

SECOND CLASS FOR CONDUCT

From

To



DECEASED 21 August 1944

NAVY

D.D.

DEPARTMENT OF VETERANS AFFAIRS

AWARDS

WAR SERVICE RECORDS

LIGHTHALL Augustus Eastman		A-2404	C.P.O.	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	AN DATE DESPATCHED
1939-45 Star	6427	15-10-49
Atlantic Star & Clasp		
Africa Star & Clasp		
C.V.S.M. & Clasp		
War Medal		
M. IN D. MID		

(THE REVERSE TO BE USED FOR ESTATE PURPOSES)

RCNR
HMCS

"ALBERNI" Nov/45.

MEDALS AND MEMORIALS—DECEASED PERSONNEL

REGISTRATION No. DATE OF DESPATCH

(1) <u>MEDALS</u> <u>PERSON</u> ENTITLED TO	Mrs. Mary Lighthall - Widow
ADDRESS:	Globe Hotel, Pictou, Main Street Prince Edward County, Ont. PICTON
(2) <u>MEMORIAL CROSS</u> <u>WIDOW</u>	Mrs. M. Lighthall
ADDRESS:	Globe Hotel PICTON, Ontario
(3) <u>MEMORIAL CROSS</u> <u>MOTHER</u>	DECEASED
ADDRESS:	

(1)	MEMORIAL BAR
	DESP
	REGN. NO. 21
(2)	17 January 1945
(3)	

Mrs. Mary Lighthall,
 Globe Hotel, Picton,
 Prince Edward County, Ont.

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. A. 2404 FD 776

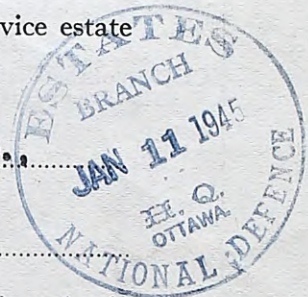
DEPARTMENT OF NATIONAL DEFENCE
 ESTATES BRANCH
 OTTAWA, ONT.

January 3 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

LIGHTHALL, Augustus Eastman, Chief P.O.

A.2404 R.C.N.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/JL

M. Woods
Commander Royal Canadian Mounted Police
 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.....	Mary Lighthall		
2	Children of the Deceased and dates of their Births.....	None		
3	Father of the Deceased.....	Augustus Lighthall		dead.
4	Mother of the Deceased.....	Margaret Lighthall		dead.
5	Brothers of the Deceased	Full Blood	James E. Lighthall 38 Thomas Lighthall 45 Jack Lighthall 49 Angus Lighthall 40	Pictou, Ont. Pictou, Ont. Pictou, Ont. Atterson, N.J.
		Half Blood	None	
6	Sisters of the Deceased	Full Blood	Blanche Lighthall 51	Pictou No 5
		Half Blood	None	
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	
		Don Lighthall,	Killed last year.	

ANSWER FULLY EACH QUESTION ON THIS PAGE
PARTICULARS AS TO IDENTITY

8	Full names of the deceased.	Augustus Eastman Lighthall
9	Date of his birth.	4 May 1905
10	Place and date of his marriage.	Chatsworth, Ontario 2 December 1943.
11	Place and date of his parents' marriage.	unknown.

PARTICULARS OF DOMICILE

12	Place where deceased was born.	Prince Edward County
13	State, in order, the Province, State and/or County in which he resided before enlistment and the period of time in each.	(a) (b) (c) (d) North Maryburg Co. Ontario.
14	Nature of employment before enlistment.	Scaled the hares.
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.	No decision

PARTICULARS OF ESTATE

17	Did he leave a Will? If in your custody, please forward.	No
18	If married, and domiciled in the Province of Quebec or in a State in the U.S.A. or in a Country under the laws of which there is community of property between spouses,—was there a marriage contract dealing with property?	Not applicable
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?	Joint C. Bank of Montreal, Piton with wife. 16280, \$485.29 No.
20	Amount of War Savings Certificates held by deceased. Indicate where located.	43 certificates \$5.00 each. Turned over to wife.
21	Amount of Victory Loan Bonds held by deceased. Indicate whether registered or bearer and where located.	100.00 in bonds, Gov. of Canada \$70 due 1954. N. 80. 468482.
22	If deceased had life insurance, name companies and amount payable under each policy and the person named as beneficiary therein.	North American life Policy No 249092. 1000.00 " " 201613. 934.80
23	Describe other assets, if any, and estimated value thereof. Use space on page 4 if necessary.	Mary Lighthall, beneficiary. Ostra Hall, build. Sydney, N.S. 74.00 on deposit.

OTHER PARTICULARS

24	Did the deceased after enlistment incur any debts for:— (a) His own separate board and lodging while on service. (b) Service clothing and equipment. An itemized account for each such debt should be attached hereto, and if same is correct you should mark the bill "approved" and sign same. If believed incorrect, give particulars.	No.
25	Have you or any other relative paid the funeral expenses or any part thereof? If so, attach itemized accounts showing amount paid, and by whom.	There were none.

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

DECLARATION

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

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

* widow 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.

Mary Lighthall

{ Signature of Informant

Pictou Ontario

Address

CERTIFICATE

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

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

Dated at Pictou Ontario this 9th day of January ~~December~~ 1945

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

Gordon W. Cusley

Qualification @ Comm. etc.

Address Pictou 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

(Information extracted from Naval Service Headquarters' Records.)

Four copies to be rendered to Naval Service Headquarters

90

REPORT OF THE DEATH OF AN OFFICER, MAN OR BOY

~~XXXX~~ NAVAL SERVICE HEADQUARTERS at OTTAWA, Ont.

Name LIGHTHALL Augustus Eastman
(Christian names in full)

Rank of Rating Chief Petty Officer Official No. A-2404 R.C.N.R.
(If unknown, date of first entry)

Place of Birth Pictou, Ontario. Date of Birth May 4th, 1905

Occupation in Civil Life Seaman Religion Protestant

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) 4 years and 1 month

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

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

Nearest known relative or friend { Name Mrs. Mary Lighthall Relationship Wife
Address Globe Hotel, PICTON, Ontario.

Date on which the above was informed by Ship xxxx Naval Service Headquarters: 23rd 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 invalidated.....

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

OTTAWA, Ont. 28 February 1945.
H.B. Money
for.....
SECRETARY, NAVAL BOARD. e.

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

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

C.N.S. 1121
2M-5-40 (4893)
N.S. 815-9-1121

ENTERED IN
D.N.P.A.'s LOG BOOK
MAR 7 1945
CLERK No. 1

123-2-146

19

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 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

PLEASE LEAVE BLANK

- 1. (a) Print name in full Augustus Eastman Lighthall (b) Reg'l. No. A-2404
- 2. (a) Arm of service Naval (b) Unit H.M.C.S. "Protector" (c) Rank Ldg. Snn.
- 3. (a) Date of birth 4 May '05. (b) Have you any dependents? Yes. (c) Place of residence at time of enlistment Pieton, Ont.
- 4. (a) Place of enlistment Montreal, Quebec. (b) Date of enlistment 6 July '40.

Section B—EDUCATION AND TRAINING

- 5. (a) State age on finally leaving school Fourteen. (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.) Eight years public 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? None.

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 McKellar Steamships Limited. Address Port Colborne, Ont.
- 19. Nature of employer's business (for instance, "farmer", or "building contractor", or "boot factory", or "iron foundry", or "retail store", etc.) Steamship Line.
- 20. (a) Your specific occupation Second Mate. (b) Number of years' experience at this occupation with any employer Twelve.
- 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? No. (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? None. (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? No.
- 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.

DATE 22 April 1941 SIGNATURE A.E. Lighthall



COPY TO
VWD
ES
5-5-41

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 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 LIGHTHALL Augustus Eastman
 (Family name) (Given name or names in usual order)

RESIDENCE No. _____ Street R.R.5, City, Town, Village or Township PICTON, Province Ontario.
 (Residence means usual place of abode. Post Office Address for residents in rural parts not sufficient)

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

8. BIRTHPLACE Picton, Ontario.
 (Province or Country)

9. DATE OF BIRTH May 4 1905
 (Month) (Day) (Year)

10. AGE in { Years 39 Months 3 Days _____ If less than one day old _____
 hrs. or _____ min.

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

12. Kind of industry or business, as cotton-mill, lumbering, bank, etc.

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 Mary Lighthall

16. NAME _____

17. BIRTHPLACE _____
 (Province or Country)

18. MAIDEN NAME _____

19. BIRTHPLACE _____
 (Province or Country)

20. Person giving information sign here J.P. Money
Paym. Offr. R.C.N.R.
 Address Naval Service Headquarters, Ottawa, Ont.
Director of Personnel Records.
 Relationship to deceased _____

21. Place of Burial, Cremation or Removal NO BURIAL.
 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 21 1944.
 (Month) (Day) (Year)

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

CAUSE OF DEATH	PHYSICIAN
<p>I. Immediate cause Give disease, injury or complication which caused death, not the mode of dying, such as heart failure, asphyxia, asthenia, etc.</p> <p>Morbid conditions, if any, giving rise to immediate cause (stated in order proceeding backwards from immediate cause).</p> <p>II. Other morbid conditions (if important) contributing to death but not causally related to immediate cause.</p>	<p><u>Missing, presumed dead.</u></p> <p>due to <u>He was serving in H.M.C.S. "ALBERTI", which was sunk in the English Channel.</u></p>
<p>26. If a communicable disease is mentioned on this certificate, give</p> <p>(a) Date of appearance _____ 19____</p> <p>(b) Duration of disease _____ days</p>	<p>Underline the cause to which death should be charged statistically</p>

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)

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

DISTRIBUTION OF SERVICE ESTATES

Estates Form "P. 4"

NAVY

LL

Name..... **LIGHTHALL,**..... **Augustus, E.**..... No. **A.2404**
Surname Christian Names

C.P.O...... **R.C.N.R. O/S**..... **21-8-44**
Rank Unit Date of Death

AMOUNT

Date..... **29 Oct. 45**.....

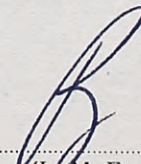
L.P.C.....\$	193.78
Other Credits.....	74.00
Total.....	267.78
Prev. dist.	166.98
This dist.	100.80

SHARE	RELATIONSHIP	NAME AND ADDRESS	AMOUNT
All	Widow	<p>Mrs. Mary Lighthall, c/o Gordon Walmsley Esq., Barristers etc., Pictou, Ont.</p> <p align="center">(As next of kin entitled)</p>	100.80

P4. TO TREAS. **6-11-45, qm**

AUTHORITY					
H.Q. F.E. No.	VOTE	PRI	H.Q. SUB.	OBJ.	AMOUNT
9999	831	00	50	1 000	100.80
CLASSIFIED BY			EXAMINED BY		
<i>J.H.S. 7/pt</i>			For Chief Treasury Officer		

DISTRIBUTION APPROVED AND AUTHORIZED



(L.M. FIRTH) Colonel
 Director of Estates

AUDITED FOR PAYMENT

.....
 For Chief Treasury Officer

MG

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

NAV

DECEASED
MEMBER'S
NAMEAugustus Eastman
(CHRISTIAN NAMES)LIGHTHALL
(SURNAME)

REGISTER NO.

14468

FILE NO.

NSA-2404

DATE

20 Aug/45

SERVICE NO.

A-2404

FINAL RANK OR RATING

C.P.O.

PAYEE
ADDRESSMrs. Mary LIGHTHALL,
Globe Hotel,
Picton, Prince Edward County,
Ont.

DATE OF TERMINATION OF OVERSEAS SERVICE

21 Aug/44

DATE OF DISCHARGE

21 Aug/44

A. TOTAL QUALIFYING SERVICE

NO. OF DAYS 1508 EQUAL TO 50 COMPLETE PERIODS AT \$7.50

375.00

B. QUALIFYING OVERSEAS SERVICE

NO. OF DAYS 612 LESS 8 INELIGIBLE DAYS, EQUAL TO 804 DAYS @ 25C. PER DAY

201.00

C. SUPPLEMENT FOR OVERSEAS SERVICE

DAILY RATES AT DISCHARGE

PAY	\$	2.80	
SUBSISTENCE OR LODGING AND PROVISION ALLOWANCE	\$	1.45	
ADDITIONAL PAY	\$	1 G.C.B. .05	
	\$	H.L.M. .30	
	\$	T.C. .25	
DEPENDENTS' ALLOWANCE 1/30 OF \$	\$	37.20	\$ 1.24
TOTAL	\$	61.09	X7 = \$ 42.63
NO. OF DAYS		<u>812</u>	X\$ 42.63
		183	

189.16

D. WAR SERVICE GRATUITY

765.16

E. DEDUCTIONS

OVERPAYMENT OF

PAY AND ALLOWANCES \$
DEPENDENTS' ALLOWANCE \$
AND ASSIGNED PAY \$

OTHER DEDUCTIONS

\$ Nil

F. TOTAL AMOUNT PAYABLE

765.16

G. YOUR PORTION OF GRATUITY IS—

DEPENDENTS' ALLOWANCE IN ISSUE TO YOU \$ _____ OF \$ _____
TOTAL DEPENDENTS' ALLOWANCE IN ISSUE \$ _____

-\$ 765.16

Coloque 63164 Aug. 28/45

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

PREPARED BY

OV

CHECKED BY

[Signature]

TREASURY

CHECKED BY

L. Mignikin

DATE

24/8/45

SERVICE REPRESENTATIVE

For Dir. Naval Pay Actus

REGISTERED

AIR MAIL

LA/CM

N.S. A-2404.PERS.(N)

23 August, 1944.

Dear Mrs. Lighthall:

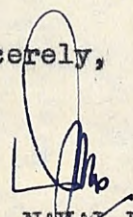
It is with deepest regret that I must confirm the telegram of the 23rd of August, 1944, from the Minister of National Defence for Naval Services, informing you that your husband, Augustus Eastman Lighthall, Chief Petty Officer, Official Number A-2404, Royal Canadian Naval Reserve, is missing at sea.

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. Mary Lighthall,
Globe Hotel,
PICTON, Prince Edward Co., Ont.

AL/GW.

73

LETTER dispatched by
PERSONNEL NAVAL
AUG 30 1944

A-2404 PERS. (N)

123583

29 August, 1944.

Dear Mrs. Lighthall:

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 loss cannot be given, but it is considered unlikely that prisoners of war will be taken.

It is requested that you will keep this information in confidence until an official announcement is made.

P.A.'S CHECKED IN
C.R. BY [Signature]

May I again express sincere sympathy with you in your anxiety.

Yours sincerely,

[Signature]

SECRETARY, NAVAL BOARD.

FILE
ACTION TAKEN

Mrs. Mary Lighthall,
Globe Hotel,
PICTON, Ont.

2 [Signature] a