B37277
JONES
CHARLES SEYMO

Received.....Checked.....Card.....Observations.....

~~ORIGINAL~~
DUPLICATE
~~TRIPLICATE~~

M.F.M. 2
A.F.B. 271
H.Q. 1772-45-18
Davis-Lisson
Hamilton, Ontario

(To be completed in triplicate. Copy designation to be shown by striking out terms not applicable.)

Unit R.H.L.I. (W.R.) Regimental Number B-37277 .01

CANADIAN ACTIVE SERVICE FORCE
ATTESTATION PAPER

1. Surname JONES
2. Christian Names CHARLES SEYMOUR
3. Present address 51 Sincoe St., S., Oshawa, Ontario
4. Date of birth February 3, 1911
5. Place of birth Canada (Country) Quebec (County or Province) Montreal (Town or Township)
6. Religion (state denomination) Presbyterian
7. Trade or Calling Store Clerk
8. Married, Widower or Single ~~Single~~ Married
9. Name of next of kin ~~Mary Jones~~ Ella Medarus Jones
10. Relationship ~~Mother~~ Wife D.O.80
11. Address of next of kin ~~1982 Dundas St., W., Toronto, Ontario~~ 267 Jarvis St Oshawa Ont. OSHAWA
12. Have you served in any Naval, Military or Air Force? No
13. If previous war service, state arm, force and regimental particulars None
14. Do you now belong to or have you served in the Active Militia of Canada? No

(Give unit and date of attestation)

DECLARATION TO BE MADE BY MAN ON ATTESTATION

I, CHARLES SEYMOUR JONES do solemnly declare that the above particulars are true and I hereby engage to serve in the Canadian Active Service Force ~~Militia~~ so long as an emergency, i.e. war, invasion, riot or insurrection real or apprehended, exists, and for the period of demobilization after said emergency ceases to exist and in any event for a period of not less than one year provided His Majesty should so require my services. ~~Father~~ at home or abroad

Date Sept. 29, 1939 C. Charles S. Jones
(Signature of recruit)

E. McCullough
(Witness)

OATH TO BE TAKEN BY MAN ON ATTESTATION

I, CHARLES SEYMOUR JONES do sincerely promise and swear (or solemnly declare) that I will be faithful and bear true allegiance to His Majesty.

C. Charles S. Jones (Signature of Recruit)

CERTIFICATE OF MAGISTRATE, JUSTICE OF PEACE OR ATTESTING OFFICER.

The Recruit above-named was cautioned by me that if he made any false answers to any of the above questions he would be liable to be punished as provided by law.

The above questions and answers were then read to the recruit in my presence.

I have taken care that he understands each question, and that his answer to each question has been duly entered as replied to, and the said recruit has made and signed the declaration and taken the oath

before me, at Hamilton this 29th day of September 19 39

John T. Bell — {Signature of ~~Magistrate, Justice~~ Attesting Officer.

Lieut R.H.L.I. — {Office or Rank and Unit or appointment.

N.B.—ATTENTION IS DRAWN TO THE FACT THAT ANY PERSON MAKING A FALSE ANSWER TO ANY OF THE ABOVE QUESTIONS IS LIABLE TO A PENALTY OF SIX MONTHS' IMPRISONMENT

F
m.a.f.

Record of Service of JONES (Surname) CHARLES SEYMOUR (Christian Names) Regimental Number B-37277

QUALIFICATIONS

Military: Nil
Business or Professional: Nil
Trade or Civil: Store Clerk
Technical: Nil
Languages: English

EDUCATIONAL QUALIFICATIONS

High School or Collegiate: Nil (years completed) — Graduation or Matriculation: Nil (specify)
*College: Nil
*University: Nil

*(Name of institution, courses or years completed, and degrees obtained to be shown).

All enlisted personnel will be taken on as Private soldiers, appointments and promotions to higher rank to be shown as provided in the space below.

Report Date	Report From whom received	Record of Promotions, Reductions, Transfers, Casualties, Reports, etc., from date taken on Strength of Field Force	Rank Shown	Effective Date	Unit	Place	Authority Part II D.O. No. Cas. List, etc.	Authority Dated
5403 29-9-39		Joined on appointment T.O.S.	PTE	29-9-39	R-H-L-I (WR)	HAMILTON	No 21	30-9-39
14-2-40		Granted permission to marry	"	9-3-40	"	"	40	14-2-40
9-3-40		Married	"	9-3-40	"	"	80	26-3-40
13-6-40		Forfeits 5 days' pay for A.W.L.	"	13-6-40	"	"	153	14-6-40
1-								
38- 20/8/42								
23-7-40		S.O.S. CASF(Canada)on embarkation at Halifax, N.S.	"	23-7-40	RHLI		Do 196	12 Aug 40
2-8-40		T.O.S. CASF(Overseas)on transfer on 24-7-40 and disembarked at Gourock, Scotland on 2-8-40.	"	2-8-40	RHLI		Do 196	12 Aug 40
		Landing leave	"	21/26.8.40	"	Field	5	6-9-40
		Admitted to Can Inf Con	"	21.10.40	"	"	23	23.10.40

For additional entries use M.F.M. 1 and 2 (a)

CERTIFICATE OF MEDICAL EXAMINATION

Name in full..... Charles Seymour Jones ..... Date Sept. 29, 1939

Part 1. Information obtained from the recruit.

1. Age 28 2. Have you ever suffered from any of the following diseases?

a. Rheumatism	No	j. Nasal trouble	No
b. Tuberculosis	No	k. Ear disease	No
c. Bronchitis or asthma	No	l. Eye disease	No
d. Heart disease	No	m. Epilepsy	No
e. Kidney or bladder disease	No	n. Nervous or mental disease	No
f. Gastro-intestinal	No	o. Syphilis	No
g. Rupture	No	p. Gonorrhoea	No
h. Varicose veins	No	q. Have you ever worn glasses?	No
i. Flat or deformed feet	No		

Charles S Jones
(Signature of Recruit)

Examiner's remarks *re* above.....
Have you ever or are you now in receipt of any pension? NO

Part 2. Information obtained by medical examination. The recruit must be stripped.

1. Identification marks or scars. (If operative obtain history.)
Small pigmented mole beneath rt. clavicle.

2. Height 5 feet 8¼ inches. 3. Weight 142½ pounds.

4. Complexion Fair Eyes Blue Hair Brown 5. Development Good (Good / Fair / Poor)

6. Chest measurement—Girth on full expansion 34 inches
Range of expansion 2½ inches

7. Vision, right 20/20 left 20/20 8. Hearing, right normal left normal

9. Condition of mouth and teeth Upper denture . Lowers good.

10. The abnormalities (congenital and pathological) found on examination are as follows.....

Part 3. We, the examiners find no evidence of the diseases mentioned in Question 2, Part 1, except as reported in the remarks. We have examined the Recruit in accordance with the pamphlet "Physical standards and Instructions for the medical examination of recruits" and he is found fit for Category A

Special remarks when category lower than A.....

Gordon A Sinclair (President) C. H. Clayton (Member) F Basil Bowman (Member) Mgr

VACCINATIONS, INNOCULATIONS, BOARDS, RECLASSIFICATION OF MEDICAL CATEGORY

Date	Brief detals and signature	Date	Brief details and signature
Oct 10	1/4 cc. Typh. & Paratyph. Vacc.	Nov 30/40	RE-EXAMINED; NORMAL URINE, EARS, REFLEXES, CATEGORY "A"
Oct 17	1/2 cc. Typh. & Paratyph. Vacc.		
Oct 24	1 cc. Typh. & Paratyph. Vacc.	12.10.40	T.A.B
	1 Smallpox Vacc.	28 Dec 40	TET-TOX 1 cc.
		25-10-41	TABT ½ cc.
15-2-40	1 CC. A.T.S. Tet Tox		
26/4/40	1 cc T ad T & T		
	X-RAY CHEST—NEGATIVE		

Regtl. No. B-37277 Rank Private Surname JONES Christian Name CHARLES SEYMOUR

STATION	Date of Arrival at the Station.	Dates of Admission into Hospital: Day	Month	Year	Dates of Discharge from Hospital: Day	Month	Year	DISEASE	Number of days in Hospital	Remarks on nature of the disease; how induced; if mild or severe; if completely recovered from; whether any particular treatment was adopted. In venereal cases state nature of primary disease, and whether mercury has been given. If an accident, state whether it occurred on duty and whether a Court of inquiry was held. Date of issue and particulars of artificial teeth or surgical appliances supplied.	Signature of Medical Officer.
15th Gen. Hosp.	26-12-39	26	12	1939	31	12	1939	ac. Tracheitis Laryngitis	5	Sent in Collection - recovered	

For additional entries use M.F.M. 1 and 2 (b)

C

NAME JONES CHARLES SEYMOUR

REGIMENTAL NO. B-37277 RANK

ENLISTED AT Hamilton Ont. PROMOTIONS, ETC. AND DATE

DATE Sept. 29, 1939 - Do 20.

IF SERVED PREVIOUSLY, STATE UNIT, ETC. Nil

MARRIED, WIDOWER, OR SINGLE Married

NEXT OF KIN Ella Madora Jones RELATIONSHIP Wife.

ADDRESS OF 267 French Street, Oshawa, Ontario.

ASSIGNMENT OF PAY, $ 20.00 1-4-40.

ADDRESS 267 French Street, Oshawa, Ontario.

DEPENDENT'S ALLOWANCE, ENTITLED OR NOT Yes.

DATE APPLICATION FORWARDED TO DISTRICT PAYMASTER 26/3/40

IN WHOSE FAVOUR Ella Madora Jones

M. F. M. 14

60M—8-39 (1685)
H.Q. 1772-45-18

CASUALTIES, ETC.

NATURE E. G. ABSENCE, PROMOTION, ETC.	PART 11, D. O. No.	PART 11, D. O. DATE	REMARKS IF IN HOSPITAL, NOTE NAME, ETC.
Admitted Hospital	9	30-12-39	15th General 26-12-30
Discharged Hospital	2	3-1-40	with Effect 31-12-39
Permission To marry	40	14-2-40	
To Ella Medora Preston	80	26-3-40	March 9-40 Married
10 DAYS C.B. 5 DAYS PAY	153	14-6-40	0200 hrs 9-6-40 To 1630 hrs 17-6-40
SOS RHLI-missing	CR d/29-8-42		w.e. 20-8-42

Statement of the Service of No. ..... Rank B37277 ..... Sheet No. .....

Name ..... Jones Charles Seymour

M.F.M. 1 & 2 (a)
790 M—8-39 (1697)
H.Q. 1772-45-18

REPORT Date	REPORT From whom received	Record of Promotions, Reductions, Transfers, Casualties, Reports, etc. (Continuation of Folio 2, M.F.M. 1 or M.F.M. 2)	Rank Shown	Effective Date	Unit	Place	Authority Part II D.O. No. Cas. List, etc.	Authority Dated
		✓ Discharged from Cdn Inf Bde Cmd	Pte	29.10.40	CAHLI	Ed	DO 26	1.11.40
		✓ Xmas leave	"	20/23 Dec 40	"	"	43	24 Dec 40
		✓ Privilege leave	"	6/15 Feb 41	RAHLI	"	11	4 Feb 41
		✓ Leave 9 days Priv 2 with Warrant	Pte	31 July 41	R2H49	U.K.	53	8 Aug 41.
		✓ P/Leave (4) to 21 July 42	Pte	14 July 42	R2H49	U.K.	47	24 July 42
		✓ Embarked UK for France (Jnr Offr)	Pte	18 Aug 42	RHLI	UK	54	3 Sep 42
		✓ SOS to X List (Jnr Offr) Missing	Pte	19 Aug 42	RHLI	UK	53	31 Aug 42
		✓ TOS from RHLI.	Pte	20 Aug 42	X List RHLI	UK	1	5 Feb 42.
M33		✓ AWARDED THE CANADIAN VOLUNTEER SERVICE MEDAL AND CLASP						
		✓ Presumed Killed	Pte	19 Aug 42	RHLI	UK	CIS 450	9 June 44

File No 405-J-3408

VERIFICATION FORM

WAR SERVICE MEDALS 1939-45

No. B-37279 Name Jones. Charles. Seymour

Rank on Discharge Pte Date of Discharge 19-8-42.

Authority for Discharge or Retirement Deceased

Served in:

			Non-qualifying service
Canada	from 24-9-34	to 23-7-40	
	from	to	
United Kingdom	from 24-7-40	to 18-8-42.	
	from	to	
Italy	from	to	
Northwest ~~Europe~~ Dieppe	from 28-8-42.	to 14-8-42. P. K/A.	
---------	from	to	
---------	from	to	

Eligible for award of:

1939 - 45 Star	OK ✓

~~Italy Star~~	
~~France-Germany Star~~	
Defence Medal	OK ✓
War Medal	OK ✓
Canadian Volunteer Service Medal	OK ✓
with clasp	OK ✓

M

NO RIBBON DESPATCH

Verified by N. Menard

Date 25-7-46.

Carded JUL 25 1946

HA 165

Soldiers Qualification Card

B37277 — Regt'l. Number
JONES — Last Name
CHARLES — First Name
SEYMOUR — Middle Names

Unit: 1st. Bn. R.H.L.I.
MISSING
1 Corps: 337

2 Nationality: 08 Cdn. | By Birth: ✓ | By Naturalization: | Country of Birth: Canada

3/ Racial Origin: British
4/ Language spoken in home: French ..... Other ..... English ✓

5 Age: 31 2/12 — 6 Height: 5'10" — 7 Weight: 160 — 8 Silhouette: 1 2 3 4

Eyes: 9/ Colour of: Blue. — 10/ Acuity: 1 2 3 — 10 Glasses: No. — 11 Colour Vision: 1 2 3 4

12 Hearing: Acuity: 1 2 3 — 13 Speech Defects:

14 Handedness: R ✓ L A — 15/ Med Category: A

Cause:

Attitude to own health: normal — To Medical attention:

Health History:

16 Education Level: Illiterate ..... E 7(14) S ..... (Grade completed)
Conduct during school life: Normal.

17/18 University or Professional	Course Taken	Years Completed	Degree

19 Post Graduate	Course	From—To	Degree

Specialized Training:

20 1. ..... (Course)
At ..... From—To ..... Completed.....

21 2 ..... (Course)
At ..... From—To ..... Completed.....

22 3. ..... (Course)
At ..... From—To ..... Completed.....

Other trades papers. Diplomas
Certificates or Qualifications

23 Languages: Spoken fluently: English
02 Written well: English

24 Main occupation: Description: Sales clerk (Tobacco & pool)
7386
Estimate of skill: Ltd.
Duration (from—to): 1934-'39 — Weekly Wage: 22.50
Employer's Name and Address: Carnegie Brothers Oshawa Ont.

50 "M" Test — Score: L — SM

1	10		S. Tot.
2	8		SM
3	8		
4	18		S. Tot.
5	22		SM
6	5		S. Tot.
7	11		SM
8	18		
Tot.	100	SM	Grade D

9

51 OTHER MENTAL
Test ..... Score ..... L. Grade ..... Date .....

52 MECHANICAL
Test ..... Score ..... Grade ..... Date .....

52 CLERICAL APT.
Test ..... Score ..... Grade ..... Date .....

53 TRADE TEST
1. Score .... G. .... Date ....
2. Score .... G. .... Date ....
3. Score .... G. .... Date ....
4. Score .... G. .... Date ....

54 OTHER
Test ..... Score ..... Grade ..... Date .....

25 Second Most Important Occupation: Description:
9418 Silversmith (Electroplate) scratch
3402 polisher - mitre cutting - Lathe
Estimate of skill: Ltd.
Duration (from—to): furniture stripping — Weekly Wage: 20.00
Employer's Name and Address: Various

26 Third Most Important Occupation:
Estimate of skill:
Duration (from—to): Weekly Wage:
Employer's Name and Address:

Trade Union or Professional Society: Nil.

Vehicles: 27 4 Heavy Truck WR — 28 4 Light Truck WR — 29 4 Auto WR — 30 Motorcycle
31 Farm Tractor — 32 Tracked Vehicle — 33 Power Launch — 34 Aeroplane
35 Accident Prone: No

Farming Experience: Wide Nil. — Limited
District — Type

Job promised after discharge: Yes — By whom? Name
Address: Carnegie Brothers Oshawa.
Other provision for post-discharge occupation
Type of work desired: Sales clerk.
Occupational history: Ambitious — Accidental
Stable ✓ — Erratic

36/1 Material Status: M ✓ S W D Sep.
Marital Problems (Remarks)
Age of wife: 24 — Wife's attitude to Service — Wife's Health: Good

37 No. of Children — No. Brothers: 1 — No. Sisters: 3
Position in family: 3 — 38 No. Dependents: 1
Relationship of Dependents: Wife
Status of home in childhood

39 Hobbies: Photography: Nil. M S Radio Engines
Mechanics Other

40 P 1 3 Sports: (1) Swimming (2) (3)
Team Games and Position (1) Hockey - r. wing - semi-lager.
(2) Baseball - field - occas. (3)

41 Ability to Entertain: Music: String Brass
Woodwind Percussion Piano Vocal
Theatrical Other

7 AUG 1942

42 Previous Experience in Armed Forces

ARM or CORPS	Type (C.E.F., N.P., etc.)	Years	Highest Rank	Last Discharge (Yr.)	Special Training Received
Nil.					

43 CURRENT SERVICE: Date Enlisted 29/9/39 Place Enlisted Hamilton,

Date From—to	Country	Corps	Unit and Sub-unit	Rank 44	Principal Duty	Performance
29/9/39	Can.	R.H.L.I.	1st. Bn. "C" Co.	Pte.	Inf. training	
3/8/40	Eng.	"	" " "	"	Section member - L.M.G.	078
15/9/41	"	"	" " "	"	Drvr. - platoon truck.	307
				A		

45 COURSES ATTENDED

COURSES ATTENDED	PLACE	Date: From—to	Qualified as	Rating
Nil.				

46 Crime: Number Courts Martial Convictions ..... Hospitalization ..... Nil .....

Number Civil Convictions ..... Minor Offender ..... Occasional Offender .....

Chronic Major Offender ..... Chronic Minor Offender ..... Occasional Offender .....

49 Psychiatric ☐☐☐☐☐

C.M.H.Q. 1000:115
40/P & S/1246

47 Classification: Military Specialties and Trades

Designation	Degree of Proficiency	Date	Authority
Salesclerk			
Truck driver	170		

55 Type of Service Desired (1) ..... Truck driver ..... (2) .....

Remarks re Outstanding or Limiting Factors Department

App. Phys. App. Disp.
Milit. Map. R. Mech.

Correct dept. clean sheet. active phy. quiet pleasant disp. Milit Sat. map R Sat. Mech Sat.

D/H

Attitude to Interview: Antagonistic ..... Overanxious ..... Co-operative ..✓.. Indifferent .....

Reason for Joining Cdn. Army (if ascertainable) ..... Adventure .....

48 Suggested Possibilities for Employment (1) .....

..... (2) .....

Tests Indicated: 2nd Mental ..... Mech. Apt. ..... Clerical Apt. .....

Other Apt. ..... Pers. ..... Trade Test as .....

Interviewed by H.H.M. - Robertson Lieut Date 4 May 42

Reviewed by ..... Date .....

Change of Particulars - "Next-of-Kin"

or Family

The undermentioned change of particulars is passed to you for information and necessary action in the records of :-

No. B.37277 Rank Private JONES, Charles Seymour.

(Surname) (Christian Name)

Unit The Royal Hamilton Light Infantry

1. (Old)Next-of-Kin Mrs. Ella Jones,

Relationship Wife

Old Address 267 French Street, Oshawa, Ontario.

2. Particulars of Family

(New)Next-of-Kin Same

Relationship Same

(New) Address 168 Stacey Ave., Oshawa, Ontario.

3. New name of Soldier

Authority Letter H.Q. 405-J-3406 (

Our records have been changed accordingly

2-6-44

Colonel,
Director of Records
for Adjutant-General.

To be made out in duplicate.

M.F.M. 5
400M—8-39 (1702)
H.Q. 1772-45-18

CANADIAN ACTIVE SERVICE FORCE

PARTICULARS OF FAMILY OF AN OFFICER OR SOLDIER OF THE CANADIAN FIELD FORCE

INSTRUCTIONS.

(*a*) This form is to be completed immediately an officer or soldier is appointed to, or enlisted in, the C.F.F.

(*b*) All questions, etc., must be completed.

(*c*) Both copies of the form are to be forwarded by the Officer Commanding the unit for each officer and soldier, to the Paymaster, or Officer acting as such. The latter will transmit one copy, through the District or Camp Paymaster, to the Chief Paymaster, N.D.H.Q., Ottawa. The other copy will be retained by the Paymaster until the unit arrives Overseas, when it will be forwarded to the Chief Paymaster, Canadian Overseas Intermediate Base.

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(1) Name of Officer or Soldier JONES CHARLES SEYMOUR
(Surname first—Christian names in full—Block capitals)

(2) Regimental Number B-37277

(3) Unit R. H. L. I. (W.R.)

(4) Are you married? No

(5) If married, state,

(*a*) Full name of your wife Nil Ella Medora Jones.

(*b*) Present postal address of wife Nil 267 French St. Oshawa. Ont.

(6) If married, have you been regularly supporting your wife? If not—state reasons Nil

(7) Are you a widower? No

(8) Have you any children? No

If so, give number of boys and girls Nil

Also their names and ages Nil

(9) If Separation Allowance is claimed in respect of children—state whether you have been regularly supporting them Nil

Give particulars of Guardian to whom Separation Allowance should be paid—if authorized—

Name Nil

Postal Address Nil

(SEE OTHER SIDE).

(10) Have you a common-law wife—whom you have been regularly supporting and publicly representing as your wife? No

If so, state her full name and Postal Address Nil

(11) Is your father alive? Yes

If so, state name and address MR. ARTHUR JONES

1982 Dundas St., W., Toronto, Ontario

(12) If your father is a widower and is totally incapacitated from earning a living—are you his sole support?

Nil

(13) If sole support of father who is a widower—state what amount per month you have given him prior to joining C.F.F. Nil

Also state reason he has no other means of support Nil

(14) Is your mother alive? Yes

If so, state name and address MRS. MARY JONES

1982 Dundas St., W., Toronto, Ontario

(15) If your mother is a widow, are you her sole support? Nil

(16) If sole support of widowed mother—state what amount per month you have given her prior to joining C.F.F. Nil

Also state reason why she has no other means of support Nil

(17) Are you insured? No

If so, in what Company? Nil

Have you made arrangements for payment of your Insurance Premium? Nil

If not, and it is a monthly premium, you may assign the amount in addition to any other assignment you wish to make, provided the total assignment is not in excess of the maximum monthly amount which may be assigned.

I hereby certify that the information given by me on this form is correct in each and every particular.

Charles S Jones
(Signature of officer or man)

Date October 10, 1939

Lt. Col.
Officer Commanding
R.H.L.I. (W R) C.A.S.F.

Date October 10, 1939

No B.37277 Rank Private Name JONES, Charles Seymour

Unit R.H.L.I. Date of death 19th Aug., 1942.

Died at France.

Cause For official purposes presumed
Killed in action.

Death occurred on strength of Forces. HQ 405-J-3406 d 17-6-44

N/K Mrs. Ella M. Jones Relationship Widow

Address 168 Stacey Avenue, Oshawa, Ontario.

Remains buried in Cemetery

Grave location

CHK

BROOKWOOD MEMORIAL

DEATH CERT. TO N.K.

BURIAL REPORT TO N.K.

RETURN TO BUR. OF STAT. JAN 17 1945

ROYAL MESSAGE DESP'D. JUN 30 1944

CAN. MESSAGE DESP'D. 26/6/44

CFA 187
40/P & S/2180 (4066)

CANADIAN MILITARY HEADQUARTERS

ESTATES BRANCH
INVENTORY

of personal effects received by
Casualty Section, No. 1 CKSD

No., RANK and NAME ..... B-37277 Pte. Jones, C.S. (Dec'd) .....

RECEIVED FROM ..... Royal Hamilton Light Infantry .....

CHECKED BY A-58124 Pte. Pyman, J.P. H-37449 Sgt. Cathcart, M.O. ..... DATE ...25 Aug 44.....

1	Pr. Shoes		
1	Shirt (Khaki)		
1	Pr. Leather Gloves		
3	Handkerchiefs		
1	Flashlight		
	Snapshots		
1	Pr. Woolen Mitts		

ORIGINAL } To Officer i/c Estates with
DUPLICATE } original inventory, if any.

TRIPLICATE — with effects.

M. Cathcart Sgt.
for OC 1 Cdn KSD

FOR COMPLETION AND RETURN BY

Form P. 64

Mrs. Ella M. Jones,
168 Stacey Avenue,
Oshawa, 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. 405-J-3406 FD 31

DEPARTMENT OF NATIONAL DEFENCE

ESTATES BRANCH

OTTAWA, ONT.

July 18, 1944.

RECEIVED AUG 9 1944 H.Q. OTTAWA. NATIONAL DEFENCE

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

JONES, Charles S., Pte.

B37277 -Canadian Army

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.

RGP/RD

R. G. Pelaw capt.
Director of Estates.

M.F.W. 77
6-44 (4878)
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:

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	INFORMANT'S STATEMENT: 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.....		Ella Madora Jones,	26	207 Simcoe St. S., Oshawa, Ont.
2	Children of the Deceased and dates of their Births.....		none		
3	Father of the Deceased.....		Arthur Jones, exact age not known -over 60		19 Whiting Ave. Oshawa, Ont.
4	Mother of the Deceased.....		Mary Jones,		same address
5	Brothers of the Deceased	Full Blood	Bud Jones, Edith Bowler, exact age not known, probably Frances Edwards - ditto- Lillian Birch - "	38 30 21 34	Toronto, street address unknown. 88 Montrave Ave. Oshawa, Ont. address unknown but in U.S.A. street address unknown- Toronto, Ont.
		Half Blood	none.....		
6	Sisters of the Deceased	Full Blood	(see above)		
		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
			none as far as aware		

ANSWER FULLY EACH QUESTION ON THIS PAGE

PARTICULARS AS TO IDENTITY

8	Full names of the deceased.	Charles Seymour Jones,
9	Date of his birth.	February 3/10
10	Place and date of his marriage.	Hamilton, March 9/40,
11	Place and date of his parents' marriage.	unknown

PARTICULARS OF DOMICILE

12	Place where deceased was born.	Montreal, P.Q.
13	State, in order, the Province, State and/or County in which he resided before enlistment and the period of time in each.	(a) Quebec, probably 10 years (b) Ontario, " 22 " (c) (d) exact periods unknown
14	Nature of employment before enlistment.	clerk in store
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.	Oshawa, Ontario,

PARTICULARS OF ESTATE

17	Did he leave a Will? If in your custody, please forward.	none except if with Department of National Defence
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?	no
20	Amount of War Savings Certificates held by deceased. Indicate where located.	none
21	Amount of Victory Loan Bonds held by deceased. Indicate whether registered or bearer and where located.	none
22	If deceased had life insurance, name companies and amount payable under each policy and the person named as beneficiary therein.	do not know of any
23	Describe other assets, if any, and estimated value thereof. Use space on page 4 if necessary.	do not know of any

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.	do not know of any
25	Have you or any other relative paid the funeral expenses or any part thereof? If so, attach itemized accounts showing amount paid, and by whom.	no
	(NOTE:—The government pays funeral expenses within the amounts authorized in the Regulations, where death occurs and burial is made Overseas as well as where death occurs and burial is made in Canada or elsewhere in the North American zone, and if a relative has already paid those expenses the Government will reimburse such relative to the extent of the amount authorized in the Regulations. Any amount of such expenses in excess of those authorized in the Regulations is not payable by the Government nor is it chargeable against the service estate of the deceased.)	

(PLEASE TURN OVER)

DECLARATION

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

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

*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.

Ella M. Jones (Signature of Informant)

207 Simcoe St. S., Oshawa, Ont. Address

CERTIFICATE

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

See above. Ella Madora Jones {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 Oshawa, Ont. this 3rd. day of August, 19 44.

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

W. Cruickshank

Qualification A Commissioner and Notary Public.

Address 7 Simcoe St. N., Oshawa, 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

OFFICIAL CANADIAN ARMY OVERSEAS CASUALTY NOTIFICATION

NUMBER B.37277 RANK Private SERVICE UNIT The Royal Hamilton Light Infantry (C.A)

NAME JONES, Charles Seymour

DATE OF BIRTH DAY 3rd MONTH February YEAR 1911 Date Enlisted: 29-9-39

MARITAL STATUS Married Religion: Presbyterian

NEXT OF KIN AS SHOWN ON M.F.M. 1, 2 & 5 RELATIONSHIP Wife NAME Mrs. Ella M. Jones,

ADDRESS 166 Stacey Avenue, Oshawa, Ontario. ADDRESS D.A.B.

ADDITIONAL PERSON TO BE NOTIFIED ADDRESS

PARENTS NAME

ADDRESS (IF SOLDIER MARRIED OVERSEAS)

AUTHORITY CAS. SIG. NO. Canrecords 6538 H.Q.405-J-3406

CASUALTY DETAILS Previously reported missing in action now for official purposes presumed killed in action. DATE 19-8-42

LAST WILL ATTACHED TO NOTIFICATION TO A. OF E.? YES/NO

M.F.M.5. ATTACHED TO NOTIFICATION TO A. OF E.? YES/NO

DATE 17-6-44

MA

OFFICER I/C RECORDS

6

COPY FOR DOCUMENT FILE

SERVICE AND CASUALTY FORM

PART I (For all ranks)

M.F.M. 4 (Part I)
A.F.B. 103 (Part I)
500M—8-39 (1700)
H.Q. 1772-45-18

Unit ROYAL HAMILTON LIGHT INFANTRY C.A.S.F. Regimental Number B-37277

1. Surname JONES	(17) Regiment or Corps R.H.L.I. C.A.S.F.	Unit (Battn., etc)
2. Christian Names CHARLES SEYMOUR		
3. *Substantive Rank and Appointment Pte		
*Acting Temporary or Local Rank		
giving date		
*To be entered in pencil to facilitate alteration.		
4. Place of birth Montreal, Que., Can.	(18) Medical	
5. Date of birth as declared on attestation Feb 3, 1911		
(A)	Category	Date / Authority
6. Date of enlistment Sept. 29, 1939	"A"	29-9-39 / Med Bd
7. Place of enlistment Hamilton, Ont.	A	20-1-40 / " "
8. Residence at time of enlistment 51 Simcoe St.S.,Oshawa		
9. (B) Special conditions (if any) of enlistment or rate of pay		
10. (C) Any subsequent variations of conditions of service		
11. Religion Pres		
12. If married, state date 9-3-40	(19) Next of kin (entries to be made in pencil) Wife:	
13. Trade on enlistment Store clerk	Ella Medora Jones	
14. Corps, trade and grade	267 Fremont St Oshawa, Ont.	
15. (D) Qualifications		
16. (E) Miscellaneous entries		
	(20) E	
	(21) E	
	(22) E	

NOTES—

(A) Here enter particulars of any subsequent claim as to actual age after verification of birth certificate.
(B) Whether for home service only, enlisted at special rates of pay, etc.
(C) If to be retained on home service, period if specified to be stated; also authority and on what grounds: see (A) above.
(D) Signaller, Farrier, etc.
(E) Instructions regarding allotment of these sub-heads will be made as may be necessary after mobilization.

(a) Report		(b)	(c)	(d)	(e)		(g)
Date	From whom received	Unit	Record of all casualties regarding promotions (acting, temporary, local or substantive), appointments, transfers, postings, attachments, &c., forfeiture of pay, wounds, accidents, admission to and discharge from Hospital, Casualty Clearing Stations, &c. Date of disembarkation and embarkation from a theatre of war (including furlough, &c.) in accordance with para. 2 of Note to Table I of Appendix III of Field Service Regulations, Volume I	Place of Casualty	Date of Casualty	Army rank as at (e)	Army Form or other authority for entry to be shown
23-7-40		RHLI	Embarked on E55	Halifax N.S.	23-7-40	Pte	MFM 33
2-8-40		"	**Disembarked**	**Gourock Scot.**	**2-8-40**	"	
			HALIFAX SOS CASF (CANADA) ON EMBARKATION AT ON 23-7-40				
			24-7-40 TOS CASF (OVERSEAS) ON TRANSFER ON AND DISEMBARKED AT GOUROCK ON 2-8-40				
22-8-40	RHLI	RHLI	Landing leave 21-8-40 to 26-8-40	Aldershot England	21-8-40	Pte	PF II No 5
23-10-40	OC	"	Admitted, Cdn. Med. Cen. Hosp.	"	21-10-40	"	" " 23
1-11-40	"	"	Discharged, Cdn. Med. Cen. Hosp.	"	29-10-40	"	" " 26
7 Feb 41	"	"	Privilegeleave 6-2-41 To 15-2-41	"	6 Feb 41	"	" " 11-1941
1 Aug 41	"	"	Privilege leave 31-7-41 To 9-7-41	Field	31 Jul 41	"	53 - 8 Aug 41
12 Jul 42	"	"	P.B. 14 Jul 42 To 21 Jul 42.	Field.	12 Jul 42	"	47 - 24 Jul 42.
	"	"	Embarked for France, Jubilee Oper	"	18Aug42	"	54 Sep 42
	"	"	SOS to X List	"	19 Aug 42	"	53 - Aug 42.
	X List	"	TOS X List	"	20 Aug 42	"	1 - Oct 42
	"	"	Awarded Canadian Volunteer Service Medal and Clasp	"	15 Jan 44	"	1 - 29 Jan 44

Every item of information should be carefully supplied. (See reverse side for instructions)

THIS FORM MUST BE FILED FORTHWITH WITH THE DIVISION REGISTRAR OF THE DIVISION IN WHICH THE DEATH OCCURRED BEFORE A BURIAL PERMIT CAN BE ISSUED

WRITE PLAINLY WITH UNFADING INK THIS IS A PERMANENT RECORD

FORM 6

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

PROVINCE OF ONTARIO—CERTIFICATE OF REGISTRATION OF DEATH

1. PLACE OF DEATH County or District of IN THE FIELD (FRANCE) Township of .....

If in City, Town or Village ..... (Name) Street ..... House No. .....

(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 JONES (Family name) Charles Seymour (Given name or names in usual order)

RESIDENCE No. 51 Street Simcoe S. City, Town, Village or Township Oshawa 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)
M			Married

8. BIRTHPLACE Quebec (Province or Country)

9. DATE OF BIRTH February (Month) 3 (Day) 1911 (Year)

10. AGE in

Years	Months	Days	If less than one day old
31			hrs. or min.

OCCUPATION

11. Trade, profession or kind of work as **spinner, teamster, office clerk,** etc. Store Clerk

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 .....

FATHER

16. NAME .....

17. BIRTHPLACE ..... (Province or Country)

MOTHER

18. MAIDEN NAME .....

19. BIRTHPLACE ..... (Province or Country)

20. Person giving information sign here E. Seymour CS

Address Director of Records,

Relationship to deceased Dept. of National Defence.

21. Place of Burial, Cremation or Removal .....

Date of burial or removal .....

22. Burial Permit was issued by .....

Address .....

23. UNDERTAKER ..... (Name and address)

MEDICAL CERTIFICATE OF DEATH

24. DATE OF DEATH August (Month) 19 (Day) 19 42 (Year)

25. I HEREBY CERTIFY that I attended deceased from:

..... 19.... to ..... 19....

and last saw h..... alive on ..... 19....

CAUSE OF DEATH

I.
Immediate cause — Give disease, injury or complication which caused death, **not** the mode of dying, such as heart failure, asphyxia, asthenia, etc.
(a) For Official purposes presumed killed in action

due to

Morbid conditions, if any, giving rise to immediate cause (stated in order proceeding backwards from immediate cause).
(b) .....
due to
(c) .....

II.
Other morbid conditions (if important) contributing to death but **not causally related to immediate cause.** .....

PHYSICIAN — Underline the cause to which death should be charged statistically

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

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

28. Was there a surgical operation? ..... Date of operation ..... 19....

State findings ..... Was there an autopsy? .....

29. If death was due to external causes (violence) fill in also the following:—

Accident, suicide or homicide? ..... (State which) Date of injury ..... 19....

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)

OVERSEAS CASUALTY CANADIAN army

JAN 17 1945

RECORDS OFFICE OVERSEAS.

CANADIAN MILITARY HEADQUARTERS.

GRAVES REGISTRATION CARD.

NAME JONES, Charles Seymour

RANK Private

UNIT ROYAL HAMILTON LIGHT INFANTRY
Jubilee

PLACE & DATE OF BIRTH Montreal, Quebec, Canada 3 FEB 1911

REGIMENTAL NO B-37277

NEXT OF KIN & ADDRESS WIFE:
Mrs Ella Medora JONES,
1982 Dundas Street West, TORONTO,
Ontario, Canada

PARTICULARS OF HOSPITALISATION

DATE OF ADMISSION

NAME & LOCATION OF HOSPITAL

DIAGNOSIS

PARTICULARS OF DEATH

DATE OF DEATH 19 AUG 42

PLACE OF DEATH

HRS

CAUSE OF DEATH Prev. reported MISSING now PRESUMED KILLED

PARTICULARS OF BURIAL

DATE OF BURIAL

CEMETERY NO INFORMATION.

PLOT NO. ROW NO. GRAVE NO.

DEATH CERTIFICATE NO

DATE OF REG'N OF DEATH CERT

RELIGION Presbyterian

DATE 11 Dec. 44.

(B.E.WILLAN) Capt.
for Officer i/c Records,
CANADIAN MILITARY HEADQUARTERS,

Extracted from Burial Records,
RECORDS OFFICE OVERSEAS,
ACTON, LONDON W.3.

VERIFIED
13/11/42
DATE ..... BY H1

JAN 1 - 194

MILITIA BOOK M. 1
Part II
40/P & S/279

CANADIAN MILITIA

Soldier's Pay Book

(For use on Active Service)

Number ..... B 37277 .....

Surname (Capitals) ..... JONES .....

Christian Names in full ..... Charles .....

..... Raymond .....

Unit .....

ROYAL HAMILTON LIGHT INFANTRY.

PARTICULARS OF SOLDIER

Regimental Number..... B37277 .....

Name in full (surname first)..... James .....

..... Charles Seymour .....

Date of Attestation..... Sept-29/1939 .....

Original unit in which enlisted :

..... R.H.C.I. .....

Regimental Depot :.....

Unit in field :..... R.H.C.I. .....

State whether married, widower or single..... Married

If married after enlistment, state date of marriage :

.....

If married, give full postal address of wife, or if widower, name and address of guardian of children, if any, or if single, name and address of next-of-kin, stating relationship to the soldier (see page 20)

..... Ella mi James (wife) .....

267 French St. Oshawa Ont

PARTICULARS OF ASSIGNED PAY, ETC.

Assignment of pay : Effective date :

(a) $..... 20.00 ..... 1-4-40 .....

(b) $..... .....

(c) $..... .....

(d) $..... .....

Name and address of assignee :

(a) ..... Ella mi James .....

267 French St. Oshawa Ont.

(b) .....

.....

(c) .....

.....

(d) .....

.....

Dependents allowance, payable to : (state relationship)

..... Ella mi James .....

..... (wife) .....

CASUALTIES AFFECTING DAILY RATE OF PAY AND ALLOWANCES

Date effective	Particulars	Part II Order	Unit	Signature of Officer

DAILY RATE OF PAY

Rate of Pay in Issue		Date Effective	Signature of Paymaster
$	c		
1	30	29.9.39	[illegible] Lamb

Soldier's Signature L. S. Jones

Book opens on 1 - JAN 1942 Balance Cr. or Dr. $ as billed

H E Shumaker Capt. Paymaster.

Date	Particulars	Credits	Cash Payments and Other Charges: Local Currency	Cash Payments and Other Charges: Canad'n Currency	Assigned Pay	Deferred Pay	BALANCE: Debit	BALANCE: Credit	Signature of Paymaster or Officer making Award
1 - JAN 1942	Fwd	94						94	H E Shumaker Capt.
1/1/42	Jan. Pay	40 30			20 00			21 24	H E Shumaker Capt.
15/1/42	AR70		2-0-0	8 94				12 30	H E Shumaker Capt.
31-1-42	MFM513			76				11 54	H E Shumaker Capt.
31-1-42	AR75		2-10-0	11 18				36	H E Shumaker Capt.
1. 2. 42	Feb Pay	36 40			20 00			16 76	H E Shumaker Capt.
15. 2. 42	AR 81		2-0-0	8 94				7 82	H E Shumaker Capt.
1-3-42	Mar. Pay	40 30			20 00			28 12	H E Shumaker Capt.
15-3-42	AR 92		2-0-0	8 94				19 18	H E Shumaker Capt.
	Totals Carr'd Forward	107 94		38 76	60 00				

Date	Particulars	Credits	Cash Payments and Other Charges — Local Currency	Cash Payments and Other Charges — Canad'n Currency	Assigned Pay	Deferred Pay	BALANCE — Debit	BALANCE — Credit	Signature of Paymaster or Officer making Award
	Totals Br't Forward	19 18						19 18	
25/3/42	M.F.M.S. 13			54				18 64	
25/3/42	M.F.M.S.13			02				18 62	
30/3/42	A.R. 96		3-0-0	13 41				5 21	
1-4-42	Apr. Pay	39 00			20 00			24 21	
15/4/42	A.R.3		3-0-0	13 41				10 80	
30-4-42	AR 8		2-0-0	8 94				1 86	
1-5-42	May Pay	40 30			20 00			22 16	
15-5-42	AR 14		3-10-0	15 65				6 51	
14-5-42	M.F.M.S.13			09				6 42	
June	Pay	39 -			20 -			25 42	
15	AR 19		1 -	4 41				20 95	
	Totals Carr'd Forward	137 48		56 53	60 00				

Date	Particulars	Credits	Cash Payments and Other Charges — Local Currency	Cash Payments and Other Charges — Canad'n Currency	Assigned Pay	Deferred Pay	BALANCE — Debit	BALANCE — Credit	Signature of Paymaster or Officer making Award
	Totals Br't Forward	20 95						20 95	[illegible]
30	AR 20		1 —	44 7				16 48	[illegible]
July	Pay	40 30			20 00			36 78	[illegible]
13-7	AR 23 JULY		6 —	26 82				9 96	[illegible]
27-7-42	MFM513			21				9 75	[illegible]
31-7-42	AR 29		2 —	8 94				81	[illegible]
Aug 42	P & A	40 30 ✓			20 00			21 11 ✓	Adjusted after Treasury Audit
A R 33	Aug 42			8 94 ✓				12 17 ✓	
I & I	Aug 42			37 ✓				11 80 ✓	Adjusted after Treasury Audit
								Lacc 2/12/44	
	Totals Carr'd Forward	61 25		40 44	20 00				

25M-12-44 (6215)
H.Q. 1064-81-3

DEPARTMENT OF NATIONAL DEFENCE

NAVY ═══ ARMY ═══ AIR FORCE

4
ARMY

STATEMENT OF WAR SERVICE GRATUITY

DECEASED MEMBER'S NAME: Charles Seymour JONES
(CHRISTIAN NAMES) (SURNAME)

REGISTER NO. D-7684
FILE NO. 405-J-3406
DATE 11-4-45

PAYEE Mrs. Ella M. JONES,
ADDRESS 207 Simcoe St. S.,
Oshawa, Ont.

SERVICE NO. B-37277
FINAL RANK OR RATING Pte.
DATE OF DISCHARGE 19-8-42

DATE OF TERMINATION OF OVERSEAS SERVICE 19-8-42

		$	¢
A. TOTAL QUALIFYING SERVICE			
1050	NO. OF DAYS 1051/30 EQUAL TO 35 COMPLETE PERIODS AT $7.50	262.50	
B. QUALIFYING OVERSEAS SERVICE			
No. of Days 757 LESS 1 INELIGIBLE DAYS, EQUAL TO 756 DAYS @ 25c. PER DAY		189.00	
SEE PAR. 2 OVERLEAF FOR EXPLANATION			
		451.50	
C. SUPPLEMENT FOR OVERSEAS SERVICE			
DAILY RATES AT DISCHARGE			
	PAY $ 1.30		
	SUBSISTENCE OR LODGING AND PROVISION ALLOWANCE $ 1.00		
	ADDITIONAL PAY $		
	$		
	$		
DEPENDENTS' ALLOWANCE 1/30 OF $ 35.00	$ 1.17		
	TOTAL $ 3.47 X7 = $ 24.29		
	NO. OF DAYS 757/183 X$ 24.29	100.48	
D. WAR SERVICE GRATUITY		551.98	
E. DEDUCTIONS OVERPAYMENT OF	PAY AND ALLOWANCES $		
	DEPENDENTS' ALLOWANCE AND ASSIGNED PAY $		
OTHER DEDUCTIONS	$		
F. TOTAL AMOUNT PAYABLE		551.98	

G. YOUR PORTION OF GRATUITY IS— 100%

DEPENDENTS' ALLOWANCE IN ISSUE TO YOU $_____ OF $ _____ = $ _____

TOTAL DEPENDENTS' ALLOWANCE IN ISSUE $

RECEIVED
APR 17 1945
WAR SERVICE GRATUITY DIVISION, ARMY TREASURY

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

PREPARED BY	CHECKED BY
KRM	

TREASURY

CHECKED BY	DATE
	18-4-45

Service Representative

MFM 510
40/P & S/254 (3444)

CANADIAN ACTIVE SERVICE FORCE

OVERSEAS

LAST PAY CERTIFICATE

(All Ranks)

District.....

Dispersal Area.....

U.S. STATES BRANCH SEP 19 EX. CT. OTTAWA NATIONAL ARCHIVES

Regtl No. B37277 Rank and Name JONES.C.S. Pte.

of (Unit).....on.....

(~~Transfer~~ or Discharge) X on 19th Aug. 19 42.

Reason Death Authority: C.C.L."A"450 d/9th June. 42.

The following is a statement of the account of the above-named from 1.Aug. to 31st Aug. 19 42 the inclusive date of transfer or discharge.

Dr Particulars	Amount		Cr Particulars	Amount	
Balance Dr from last account			Balance Cr from last account		81
First Monthly Payment			Regimental Pay 31 days at $ 1.30	40	30
Casual Payments AR 33d/15.8.42	8	94	Tradesmen's Pay .....days at .....$		
Payments on Transfer or Discharge			Additional Pay (Give particulars) ....days at .....$		
Assigned Pay	20	00			
Regimental Charges			Allowances (Give particulars) .....days at .....$		
Public Stoppages (Give particulars):					
I AND I d/Aug.42		37			
To Balance Cr Free	11	80			
To Balance Cr Deferred			By Balance Dr		
Total	41	11	Total	41	11

$302

BALANCE GIVEN IS SUBJECT TO ANY CHARGES AND/OR CREDITS ENDORSED ON THE REVERSE HEREOF

Remarks:

Assnd Pay $20.00 (W) stopped eff Sept.42.

Compiled by P.Cooper.

Checked by E.McClark

Date 6th.Sept.44. 19.....

Certified correct E.L.Swentbrook
for Chief Treasury Officer, Overseas

C.D. 2X

CLASS OF SERVICE	
Full Rate	
Day Letter	X
Night Message	
Night Letter	
Evening and Sunday Messages	

Please mark an X opposite the class of service desired.

CANADIAN PACIFIC TELEGRAPHS

World Wide Communications

W. D. NEIL, General Manager of Communications Montreal

CHECK

TIME FILED

Send the following message, subject to the conditions on the back thereof, which are hereby agreed to.

CASUALTY

OTTAWA AUGUST 22 1942

MRS ELLA JONES
267 FRENCH ST
OSHAWA ONTARIO

4482 SINCERELY REGRET INFORM YOU B37277 PRIVATE CHARLES SEYMOUR JONES OFFICIALLY REPORTED MISSING IN ACTION STOP FURTHER INFORMATION FOLLOWS WHEN RECEIVED

Officer i/c Records

PREPAID

(W.E.L. Coleman), Lt.-Col.
(Cas.)

M-132

CANADIAN PACIFIC
TELEGRAPHS

DAY LETTER ☐

NIGHT LETTER ☒

CASUALTY (REPORT DELIVERY)

OTTAWA JUNE 9TH 1944

TO:-MRS ELLA JONES
168 STACEY AVE
OSHAWA ONT

3445 REGRET DEEPLY B37277 PRIVATE CHARLES SEYMOUR JONES PREVIOUSLY REPORTED MISSING IN ACTION NOW FOR OFFICIAL PURPOSES PRESUMED TO HAVE BEEN KILLED IN ACTION NINETEENTH AUGUST 1942

DIRECTOR OF RECORDS

PREPAID

OFFICER I/C RECORDS

M.F.M. 268
50M-11-42 (7150)
H.Q. 1772-39-1990

OTTAWA, 23rd June, 1944

Mrs. Ella M.Jones,
168 Stacey Avenue,
Oshawa, Ontario.

Dear Mrs. Jones:

I deeply regret to inform you that no further news having been received relative to your husband, B37277 Private Charles Seymour Jones, who has been officially listed as missing since the 19th day of August, 1942, the Army Council have been regretfully constrained to conclude that he gave his life in action against the enemy at Dieppe, France, and it is consequently being recorded that B37277 Private Charles Seymour Jones is now for official purposes presumed to have been killed in action on the 19th day of August, 1942.

The Minister of National Defence and the Members of the Army Council have asked me to express to you and your family their sincere sympathy in your bereavement.

We pay tribute to the sacrifice he so bravely made.

Yours sincerely,

H. F. G. LETSON
Major - General
Adjutant - General

JUN 21 1944

CR/PER

(H.F.G.Letson),
Major-General,
Adjutant-General.

Feb 23/43

Dear Ella,

I ought to have answered your letter before this, but I have been expecting to see you down here every week end. I am writing now because mother is in Ottawa staying at Edie's for the rest of this week anyway. So if you get a chance go over and see her, We have not seen Bud or Jil since Christmas although they have phoned every Saturday they would be here Sunday, Last Sunday night Jil phoned that Ogre Green could not wake Bud up. I did hear something concerning Charlie. He had made friends with some people in England. and they went to the R.H.L.I camp after the Dieppe raid, and were told by some of the men in C. Company that after the raid Charlie was swimming out to the barge they were on. the barge was over loaded and pulled away before Charlie reached

it. he turned back and headed for shore. the last they saw of him he was very near shore, and they waved to him. he had been slightly wounded earlier in the day. a bullet grazed his head, but the Sergeant bandaged it and he was then O.K. You may know about this already. but this is just in case you have not heard, So we can just go on hoping. Ella there are one or two here for you since Christmas but I guess (presents). untell you can get down

So Goodbye Dear for-now

Yours
Dad

Best Regards to your Dad & Mother