

BARK, WILFRED

O4450

P009388

DEPT.
NATIONAL DEFENCE

JAN 15 1942

WS 10313293

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

1. (a) Print name in full WILFRED BARK (b) Reg'l. No. _____
2. (a) Arm of service NAVAL (b) Unit R.C.N.V.R. (c) Rank SUB-LIUT.
3. (a) Date of birth MARCH 1, 1922 (b) Have you any dependents? NO. (c) Place of residence at time of enlistment MONTREAL.
4. (a) Place of enlistment MONTREAL. (b) Date of enlistment JAN. 13, 1942

Section B—EDUCATION AND TRAINING

5. (a) State age on finally leaving school 17 (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.) JUNIOR MATRICULATION
7. If you attended a university, give name of university and standing or degree secured SIR GEO. WILLIAMS COLLEGE - 3 COURSES - B.Sc.
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? FRENCH (b) What languages do you read well? FRENCH, 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 CANADIAN INDUSTRIES LIMITED. Address MONTREAL.
19. Nature of employer's business (for instance, "farmer", or "building contractor", or "boot factory", or "iron foundry", or "retail store", etc.) INDUSTRIAL CHEMICALS.
20. (a) Your specific occupation STOCK CLERK. (b) Number of years' experience at this occupation with any employer 2 YEARS.
21. (a) Did your employer promise definitely to give you employment on discharge? YES. (b) Did your employer refuse to promise you employment on discharge? _____ (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? Yes. (c) If so, in what kind of farming? MIXED GENERAL.
25. (a) Were you born on a farm? No. (b) How many years' actual farming experience have you had? 5 YRS. (c) In what provinces did you have experience? Quebec.

Section G—MISCELLANEOUS

26. Have you made any arrangements other than indicated above, for re-establishment in civil life after discharge? Yes.
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.) Time On Active Service 15 Years
28. State any employment preference or ambition you may have, other than indicated elsewhere in this form GO TO UNIVERSITY FOR AN EVENTUAL B.Sc. IN CHEMISTRY
ABSENCE FROM C-1-L.

DATE JAN. 15. 194 2SIGNATURE Wilfred Bark

COPY TO
VWD
ES

FEB 6 1942

MEMORANDUM FOR

P. 64

Mr. Cyril W. Bark.
35 Brock Ave. South.
Montreal West, P.Q.

Any further communication on this subject should be addressed to:—

THE ADMINISTRATOR OF ESTATES,
DEPARTMENT OF NATIONAL DEFENCE,
OTTAWA, ONTARIO.

and the following number quoted:—

H.Q. N.S. 103-B-293 FD. 86

DEPARTMENT OF NATIONAL DEFENCE OTTAWA, ONT.

March 11, 1943.

For the purpose of record and in the event of there being any balance of pay, medals or memorials available for distribution (according to law) on account of the late

BARK, Wilfred, Sub.-Lieut., (deceased)

R.C.N.V.R.

it is necessary that the requisite information regarding the deceased and his relatives should be furnished on the inside of this form in strict accordance with the printed instructions. The particulars required are to be carefully filled in and the Declaration on the back should then be signed in the presence of a Clergyman, Priest, Local Magistrate, Commissioner for Oaths or Notary Public, who should be asked to complete and sign the Certificate. This form should then be returned to the above address.

H.R. Wade
(H.R. Wade) Lieut.-Cdr., RCNVR,
for (L.M. Firth) Lt.-Col.,
Administrator 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 inquired for	Age	ADDRESS IN FULL of each surviving Relative, opposite his or her name, and date of death of each deceased relative
1	Widow of the Deceased.....			
2	Children of the Deceased and dates of their Births.....			
3	Father of the Deceased.....	CYRIL W. BARK	58	35 BROCK AVE SOUTH MONTREAL WEST. QUE
4	Mother of the Deceased.....	EDITH BARK	58	as above
5	Brothers of the Deceased	Full Blood	ROBERT EDWARD BARK	18 as above
		Half Blood		
6	Sisters of the Deceased	Full Blood		
		Half Blood		
7	Names of brothers or sisters (whether of the full or the half blood) of the Deceased, who are dead, and date of death of each.	Names and ages of their children (if any)	Address of their children	

ONLY IF NO RELATIVES IN THE DEGREES ABOVE ARE NOW LIVING, THE FOLLOWING PARTICULARS SHOULD BE GIVEN

		NAMES OF THOSE LIVING	Age	ADDRESS IN FULL
8	Grand-Parents of the Deceased....			
9	Uncles and Aunts by blood of the Deceased (not Uncles and Aunts by marriage).....		Age	

FULL PARTICULARS AS TO IDENTITY

10	What is the full name of the deceased?	WILFRED BARK
11	Give the month and year of his birth.	MAR 1 - 1922
12	Where and when were his parents married?	TORONTO. APR 23 - 1920
13	If deceased was married, state place and date of marriage. Was there a marriage contract? (Quebec)	—
14	Did he leave a Will? If so, a copy should be attached hereto.	Not to my knowledge.
15	Did he leave a bank account? If so, give full particulars.	YES - ROYAL BANK. BEAVER HALL HILL MONTREAL A/C - 945 - \$615.20
16	Is there any other estate which will necessitate application being made for Probate of the Will or Letters of Administration of the estate?	WAR SAVINGS CERTIFICATES \$260.00 MUTUAL LIFE INSURANCE CO - RETURN OF PREMIUMS APPROX \$225.00 - Mother (Mrs. Bark) Beneficiary
17	State your own postal address in full.	35 BROCK AVE STH. MONTREAL WEST QUE

PARTICULARS OF DOMICILE

18	Where was deceased born?	TORONTO. ONT
19	State, in order, the Province (or State) and country in which the deceased resided and the period of time in each, and in which last.	ONTARIO - 3 years Quebec - 18
20	What was the nature of his employment?	STOCK CLERK.
21	Did he own the premises in which he lived? If so, where?	No
22	Did he ever state verbally, or in writing, where he intended to make his permanent home?	MONTREAL

OTHER PARTICULARS

23	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
24	Have you or any other relative paid the funeral expenses or any part thereof? If so, attach itemized accounts showing amount paid, and by whom. (NOTE:—The Government pays funeral expenses within the amounts authorized in the Regulations, where death occurs and burial is made Overseas as well as where death occurs and burial is made in Canada, 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.)	— No —

DECLARATION

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

I hereby declare that the foregoing particulars are correct, and a true and complete statement of all the relatives that the deceased ever had in the degrees inquired for; and that I am the

*

Father

of the deceased.

N.B. To be signed in full in the presence of a Clergyman, Priest, Local Magistrate, Commissioner or Notary Public.

C. W. Bark

{ Signature of Informant

CERTIFICATE

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

C. W. Bark

*See above

..... { Name of Informant } is the* *Father* of the Deceased above described, and I believe the above Declaration and the Statement of Relatives made by the Informant and signed in my presence to be complete and correct.

Dated at

Montreal West

this

19th

day of

March

19*43*

Signature of Clergyman, Priest, Magistrate, Commissioner or Notary Public

F. Charles Ireland

Qualification

Rector St. Philip's Church

Address

58 Avenue Road, Montreal West. Que

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 enquired after is stated in its proper place in the Statement opposite.

USE SPACE BELOW FOR ANY ADDITIONAL REMARKS YOU MAY WISH TO MAKE



0.4450

L

(A)

SURNAME BARK		PERMANENT ADDRESS
CHRISTIAN NAME Wilfred		35 Brock Ave., South
RELIGION United Church		Montreal, Quebec.
DATE OF BIRTH	PLACE OF BIRTH	NAME AND ADDRESS OF NEXT OF KIN
1st. March 1922	Town Toronto County York Province Ontario. Country	Mother: Mrs. Edith Bark, 35 Brock Ave. South, Montreal, Que.

PERSONAL DESCRIPTION

HEIGHT	CHEST MEASUREMENT	HAIR	EYES	COM- PLEXION	WOUNDS, SCARS, MARKS
Feet.....5	Inflated.....38	Brown	Blue	Fair	Nil
Inches.....10½	Deflated.....35				
143½	Mean.....36½				
DATE OF ENROLMENT	RANK IN WHICH ENROLLED	MARRIED, SINGLE, OR WIDOWER	TRADE OR CALLING AND IN WHOSE EMPLOY		
13th January 1942	Prob. Sub-Lieut. (Temp)	Single	Stock Clerk. Canadian Industries Ltd., Montreal, Quebec.		

(B)

I hereby declare as follows:—

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

* (b) I served in _____ for the period shown, and attach my
record of service.

* Cross out Clause not applicable.

SERVED IN	RANK	FROM	TO

- (c) I have never been rejected for any of His Majesty's Forces on account of unfitness.
- (4) That the particulars contained above are correct, and true according to the best of my knowledge and belief.

(OVER)

(5) On being enrolled as an Officer of the Royal Canadian Naval Volunteer Reserve, I understand and bind myself:—

(a) To serve from the date thereof for as long as my services may be required, being subject to the provisions of the Naval Service Act, and of the regulations made in pursuance thereof for the governing of the Royal Canadian Naval Volunteer Reserve, and to the customs and usages of His Majesty's Canadian Naval Service.

(b) To report for active service if called upon in time of war or emergency, and, if called into active service, to serve ashore or afloat as may be directed, according to where my services are required.

(c) To provide myself with the necessary uniform as laid down in R.C.N.V.R. Regulations.

Dated this 13th day of January 19 42

W. Bark.
Signature of Applicant.

The above declaration was made and signed in my presence this 13th
day of January 19 42

Yvon Dupuis
Signature of Enrolling Officer.
Sub-Lieut. R.C.N.V.R.

(C) OATH OF ALLEGIANCE

I Wilfred Bark 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 W. Bark.

Signature of Witness Yvon Dupuis

Date 13th January, 1942

Rank Sub-Lieut. R.C.N.V.R.

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

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

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



Certificate of Medical Examination of Officers, Men and Boys
NAVAL SERVICE OF CANADA
(R.C.N. OR RESERVE FORCES)

Note—This Certificate is to be completed by the Examining Medical Officer and forwarded to the Naval Secretary, Department of National Defence, Ottawa.

I, the undersigned, have examined BARK, Wilfred,
† candidate for entry as Prob S/Lt.
and I believe him to be * in all respects fit for His Majesty's Service.
the Certificate given below in my presence. He has signed
the Certificate given below in my presence.
† Strike out if inapplicable. * Delete one.

This examination has been made in accordance with the current Instructions as to Medical Standards.

(a) Age (Years / Months)	(b) Weight without Clothes (lbs.)	(c) Height with Bare Feet (ft. ins.)	(d) General Development	(e) Chest Girth (inches)	(f) Vision by— (i) Snellen's Types (ii) Colour Vision	(g) Vaccinated or re-vaccinated for Small Pox (Date)	(h) Lungs, Heart, etc.	(i) Abdomen, Hernia, etc.	(j) Limbs and Joints	(k) Skin	(l) Ears and Hearing	(m) Testes, Varicocele, etc.	(n) Mouth, Teeth (No. deficient and No. defective, if any), Nose, Tonsils, etc.	(o) Anus, Hemorrhoids, etc.
19 10/12	143½	5' 10¼"	GOOD	(a) maximum 38 (b) minimum 35 (c) mean 36½	right eye 6/6 left eye 6/6 *colour vision N	1.S.L.A./G.	normal	normal	normal	normal	normal	normal	O DEFICIENT O DEFECTIVE Cryptic Tonsils	CLEAR

*If colour vision is not normal by Ishihara test degree of colour blindness to be indicated.

X-ray { Not taken.
Approved.
Positive.
Doubtful.

Write in the appropriate notation, and any remarks necessary.

104520 approved

CERTIFICATE TO BE SIGNED BY CANDIDATE

I hereby certify that to the best of my belief I have never suffered from Fits, †Incontinence of Urine, Discharge from the Ears, or any other disease likely to render me unfit for His Majesty's Service. †I am willing to undergo, after entry, such dental treatment, vaccination, or inoculations as may be authorized.

† The exact meaning of this is to be clearly explained to the Candidate by the Examining Medical Officer.
† Strike out if inapplicable.

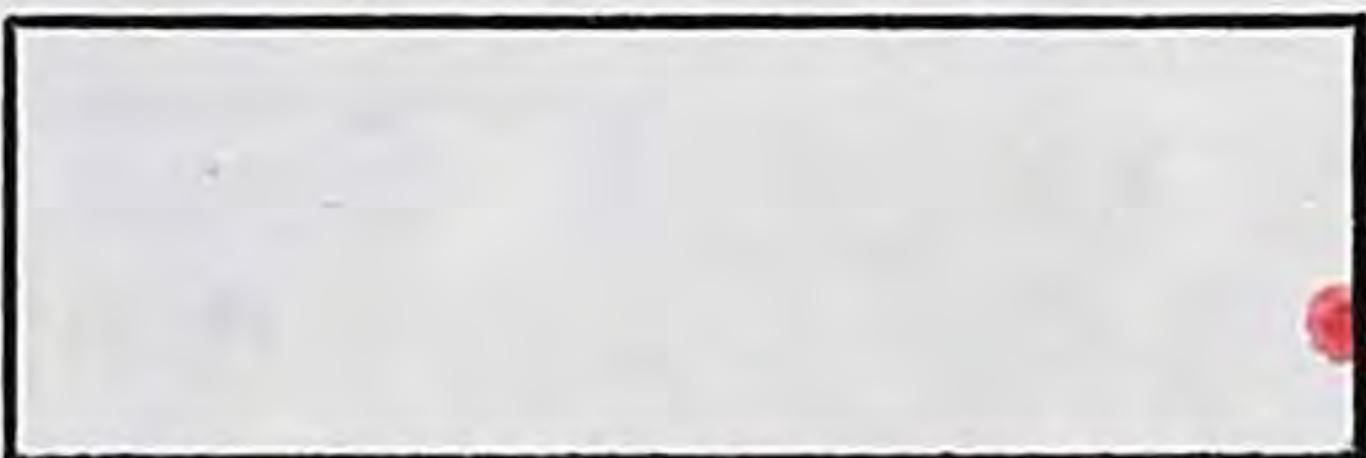
Signature of Candidate

When a Candidate is subject to a defect or disability, the following information is to be inserted:

This Candidate is the subject of.....

* {which renders him medically unfit for service,
not considered of sufficient importance to cause his rejection, he being desirable in other respects.
* Delete one.

IF REJECTED
insert here
UNFIT
in block letters



Dated at MONTREAL the 9th of JAN. 1942
Richard March 10/42
Eyes: Rt. 6/9 Lt. 6/6 W. Fields
Ears: normal Surg. Lt.
No evidence of herniae REUR
Chas. C. Macdonald
Examining Medical Officer
(Rank) SURG. LIEUT. R.C.N.V.R.

Det. E 6/6
Lt. E 6/6 B.P. 125/75
C.U.M. FIT

Medical Recruiting
DEPARTMENT
MAR 27 1942
R.C.N. BARRACKS
HALIFAX, N. S.

V. L. King
SURGEON LIEUT.

DEPARTMENT OF VETERANS AFFAIRS

D OF D 22-2-43

AWARDSNAVY

WAR SERVICE RECORDS

D.D.

BARK

Wilfred

0-4450

Sub. Lt.

FILE No.

SURNAME (IN BLOCK LETTERS)

CHRISTIAN NAMES

REG. No.

RANK ON
DISCHARGE

C.A.S.F. UNIT

WAR SERVICEBADGE

CLASS)

No.

DATE DESPATCHED:

ADDRESS:

CAMPAIGN MEDALS

REGISTRATION NUMBER AND DATE DESPATCHED

1939-45 Star

Atlantic Star

Africa Star and Clasp

C.V.S.M., and Clasp

War Medal

MID

164

3-10-49

(THE REVERSE TO BE USED FOR ESTATE PURPOSES)

RCNVR Mar. 46 "WEYBURN"

MEDALS AND MEMORIALS—DECEASED PERSONNEL

REGISTRATION No. DATE OF DESPATCH

(1) MEDALS
PERSON

ENTITLED TO

Mr. Cyril W. Bark - Father

ADDRESS:

35 Brock Ave., S,
MONTREAL, W, Que.

(2) MEMORIAL CROSS

WIDOW

ADDRESS:

(3) MEMORIAL CROSS

MOTHER

Mrs. C. Bark

ADDRESS:

35 Brock Avenue, South,
Montreal W., P.Q.

MEMORIAL BAR

(1)

DATE DESP.....

REGN. NO.....

542

(2)

(3)

5-4-43

118-B-194

OFFICERS RECORDS

Date: MAR. 27, 1942.

Surname: *Bark* Christian Names: *WILFRED*
Rank: *Prob. Sub. Lieutenant, RCNVR (Temp.)*
Home Address: *35 Brock Ave. South, Montreal West, Que.*
Date of Birth *MAR. 1, 1922.* Place of Birth: *TORONTO*
Education: Matriculation: ~~Senior~~
Junior

University Degrees: *NONE.*

Mercantile Marine Certificates: *NONE.* No.

Precis Mercantile or Yachting Experience:

5 years Sea Scouts sailing Naval Whalers & Schooner.

Precis of Business Experience:

clerk - Canadian Industries Limited.

Sports: *Skiing, hockey, tennis, sailing, football, riding.*

Other Hobbies or Interests: *Reading.*

Previous Naval or Military Training: *High School cadet corps.*

Languages spoken fluently: *Working knowledge of French.*

Languages understood: *French.*

Place of Birth of Father:

Sheffield, England

Place of Birth of Mother:

London, England.

Fathers Occupation:

Manager - Sam'l Osborn (Canada) Ltd.

Next-of-Kin: *Father*

Surname: *Bark.*

Christian Names: *Cyril William*

Full Address: *35 Brock Ave. South - Montreal West, Quebec.*

Have you been rejected by any other of the Armed Forces? *No.*

If so give details:

Religion: *Protestant (UNITED)*

Naval Identity Card No.

Married or Single *Single*

Dependents: *None.*

Height: *5' 10"*

Weight: *150[#]*

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

0-4450

OFFICIAL NUMBER

NAME BARK
(Surname)

Wilfred
(Given Names)

OFFICIAL NUMBER

0-4450

Ship or Establishment	Rating	From			Remarks	Character	Efficiency	Date			Non-Sub. Rating	Qualified			Re-Qualified		
		Day	Month	Year				Day	Month	Year		Day	Month	Year	Day	Month	Year
Div. Str. Montreal	Prob Sub-Lt T	13	1	42	Per Appt. 28-1-42												
Duty HMCS Montreal	Prob Sub-Lt T	16	3	42	Per Appt. 25-3-42												
H.M.C.S. Kings	Prob Sub-Lt T	26	3	42	trng. and disposal)												
H.M.C.S. Weyburn	Sub-Lieut. T.	20	7	42	Per Appt. 22-7-42												
DISCHARGED	" " "	22	2	43	"Missing. Presumed killed in action" per Casualty List Pg. 54												

GENERAL REMARKS

Chest X-Ray #104520 Approved
Memorial Cross sent to Mother:
Mrs. C.W. Bark,
35 Brock Ave., South,
Montreal West, Que. --5-4-43

The King has approved
"Mention in Despatches"
(Posthumous) publication
1.6.43 (Adm. Serv. 126435-15/43)
see also 41 " 122235 4/6/43

DATE OF BIRTH		PLACE OF BIRTH		CIVIL OCCU.		RELIED		PERM. RESIDENCE		PREV. ENL.		RANK OR RATE ON ENLISTMENT	
DAY	MO. YR.	BIRTH	MAIN	SUB	GION	P.	CTV	TOWNSHIP	SER.	DIV.	A	BR	RANK
01	3	22	11	8	30	0	40	X	2	23	02	0	01/12
ENLIST. DATE		ACT. SERV. DATE		SHIP OR		RANK OR RATE		ESTAB.		A		BR RANK	
DAY	MO. YR.	DAY	MO. YR.	CAT.	YR.	YR.	YR.	YR.	YR.	YR.	YR.	YR.	YR.
13	01	42	16	03	42							2780	0 01/12
SENIORITY		STR.		NON-SUB		M		CODED		CHECKED		ER	
DAY	MO. YR.	CAT.	A	B	ST.								
20	07	42	09			61	22-02-43	HR					

NAME IN FULL BARK, Wlfred RANK/RATING Sub

[illegible]

VERIFICATION FORM

WAR MEDAL

C.V.S.M. and CLASP.

L GENERAL SERVICE MEDAL (1915).

Sub-LK.

OFF. NO. 0-4450

ADDRESS

QUALIFYING PERIODS IN DAYS

FROM

TO

1939-45

ATLANTIC

DEFENCE

CLASP
C.V.S.M.

1915
MEDAL

STARS
MEDALS

10

ELIGIBLE
FOR AWARDS OF

1939-45

Ston

23.12.42

ATLANTIC

1

Star

FRANCE G.

AFRICA

2

9 Class

PACIFIC

BURMA

ITALY

DEFENCE

C.V.S.M.

20

a black

CLASP

WAR 1945

--	--

1 Medal

WAR 1915

VERIFIED BY Goyce Rose

BY

DIR. OF PERSONNEL RECORDS.

MG

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

4
NAVYDECEASED
MEMBER'S
NAMEWilfred
(CHRISTIAN NAMES)BARK
(SURNAME)

REGISTER NO.

64862

FILE NO.

NSO-4450

DATE

2 Nov/45

SERVICE NO.

R.C.N.V.R.

FINAL RANK OR RATING

Sub.Lieut.

DATE OF DISCHARGE

22 Feb/43

PAYEE Director of Estates,
ADDRESS 308 Sparks St.,
Ottawa, Ont.

for Service Estate of
Wilfred Bark
NSO-4450
22 Feb/43

DATE OF TERMINATION OF OVERSEAS SERVICE

A. TOTAL QUALIFYING SERVICE

NO. OF DAYS 344 EQUAL TO 11 COMPLETE PERIODS AT \$7.50

\$ 82.50

B. QUALIFYING OVERSEAS SERVICE

NO. OF DAYS 218 LESS 14 INELIGIBLE DAYS, EQUAL TO 204 DAYS @ 25c. PER DAY

\$ 51.00

C. SUPPLEMENT FOR OVERSEAS SERVICE

DAILY RATES AT DISCHARGE

PAY \$ 5.00
SUBSISTENCE OR LODGING \$ 2.10
AND PROVISION ALLOWANCE \$.25
ADDITIONAL PAY H.L.M. \$

DEPENDENTS' ALLOWANCE 1/30 OF \$ N11 \$ 7.35
TOTAL \$ 218 X 7 = \$ 51.45
NO. OF DAYS 183 X \$ 51.45

\$ 61.29

D. WAR SERVICE GRATUITY

\$ 194.79

E. DEDUCTIONS

OVERPAYMENT OF

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

OTHER DEDUCTIONS

N11

F. TOTAL AMOUNT PAYABLE

\$ 194.79

G. YOUR PORTION OF GRATUITY IS—

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

\$ 194.79

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

TREASURY

CHECKED BY

DATE

for Dir. Naval Pay Acctng.

SERVICE REPRESENTATIVE

CASH APPLICATION FIFTH VICTORY LOAN

To, Bank of Canada, fiscal agent of the Government of Canada:

I/WE hereby agree to purchase bonds of the Fifth Victory Loan, as designated below, and to make payment therefor in accordance with the terms of the official prospectus of the loan.

SUBSCRIBER'S
NAME AND
COMPLETE
POSTAL
ADDRESS

Mr. Robert Edward Bark

(Print full name and state whether Mr., Mrs. or Miss)

(Telephone number)

35 Brock Ave South, Montreal West, Quebec.

(Complete and correct postal address)

3% Bonds due 1959

1 3/4% Bonds due 1947

AMOUNT
(PAR VALUE)
OF BONDS
DESIRED

CASH SUBSCRIPTION	\$550.00	\$
CONVERSION SUBSCRIPTION	\$	\$

Separate copies of this form should be used for cash and conversion subscriptions by the same subscriber.

TRANSACTION
TO BE
COMPLETED
AT

The Bank of Canada.

(Name of Bank, Trust or Loan Company)

Ottawa Agency, Ottawa, Ontario.

(Branch and Address)

METHOD
OF
PAYMENT
AND
DELIVERY

Payment

Cheque attached in favour of the Receiver General of Canada in full payment.	<input checked="" type="checkbox"/>
Will arrange with the above named Bank, Trust or Loan Company.	
Will deliver for conversion 5% Bonds due 1943 and/or 4% Bonds due 1945 called for redemption.	

Delivery

Will call at the above named Bank, Trust or Loan Company.	<input checked="" type="checkbox"/>
To be held in safekeeping at my/our expense by the above named Bank, Trust or Loan Company.	
Will instruct the above named Bank, Trust or Loan Company regarding delivery to be made at its office.	

Subscriber must indicate the method desired by **INITIALLING** in the appropriate rectangle.

Mark prominently with a cross in the appropriate rectangle indicating the method desired.

3% Bonds due 1959

1 3/4% Bonds due 1947

BEARER BONDS WITH COUPONS ATTACHED	x \$50	x \$100	x \$500	x \$1,000	x \$5,000
	x \$1,000	x \$5,000	x \$25,000	x \$25,000	x \$100,000
* REGISTERED ONLY AS TO PRINCIPAL	1 x \$50	x \$100	1 x \$500	x \$1,000	x \$5,000
	x \$1,000	x \$5,000	x \$25,000	x \$25,000	x \$100,000
* REGISTERED AS TO BOTH PRINCIPAL AND INTEREST	x \$500		x \$1,000	x \$1,000	x \$5,000
	x \$5,000	x \$10,000	x \$100,000	x \$10,000	x \$100,000

★ Important—If registered bonds desired complete the registration instructions on reverse hereof.

This subscription may be reported to the National War Finance Committee.

(Subscriber initial)

Date **October 29** 1943.

(L.M.Firth) Lt.-Col., Administrator of Estates.

(Signature of subscriber)

Victory Loan Salesmen are not authorized to accept cash or securities in payment of subscriptions for bonds of the Fifth Victory Loan.

Victory Loan Salesman (if any) securing subscription—

Address

Name

FORM AND
DENOMIN-
ATIONS
OF BONDS
DESIRED

Division
Unit
District

CHEQUE

AFFIX
STAMP

ACCOUNT No. 1943.

PAY to the credit of the RECEIVER GENERAL OF CANADA the sum of

DOLLARS \$

To (Name of Bank, Trust or Loan Company)

(Branch and Address)

(Signature)

REGISTRATION INSTRUCTIONS

If registered bonds desired state in whose name to be registered and furnish at least one Christian or given name. When bonds are to be registered in the name of a married woman, her own Christian or given name *must* be stated, not that of her husband.

Robert Edward Bark,

(Print full name. Omit titles and prefixes, e.g., Mr., Mrs. or Miss)

35 Brock Ave., South,

Montreal West, Quebec.

(Give complete and correct postal address above)

Registration instructions approved.....

To be signed by subscriber, only if bonds are to be registered in a name other than that of the subscriber

(L.M. Firth) Lt.-Col., Administrator of Estates.

RECEIPT FOR BONDS

I/We hereby acknowledge receipt of the within described bonds of the Fifth Victory Loan.

Serial numbers of bonds.....

(Date)

(Signature)

REMITTED TO THE BANK OF CANADA
FOR CREDIT OF
RECEIVER GENERAL OF CANADA

By Command of the Honourable the Minister
of National Defence of the Dominion of Canada

To Mr. Wilfred Bark,--

The Minister of National Defence hereby appoints you

Probationary Sub-Lieutenant, (Temporary),--

of the Royal Canadian Naval Volunteer Reserve for duty with the
.....MONTREAL.....Division.

Your appointment is to take effect from 13th January, 1942.

This appointment is for formal entry in the R.C.N.V.R., as from the date shown. It does NOT put the appointee on duty with pay. For that, an appointment to a ship or R.C.N. Establishment is necessary, and will be issued when required.

(Registered Number 04804,
for identification purposes).

Vice-Admiral,
Chief of the Naval Staff

Department of National Defence,

Ottawa, 28th January, 1942.

Personnel Records Division	
1. Noted in Records	LB
2. Index Card	LB
3. Non-Sub. Card	LB
4. Statistical Card	LB
5. Roneo Strip	LB
6. Pension Card	
7.	
8.	
DATE	5/2/42

59605

NATIONAL

MAY 27 1942

N.S.

By Command of the Honourable the Minister
of National Defence of the Dominion of Canada

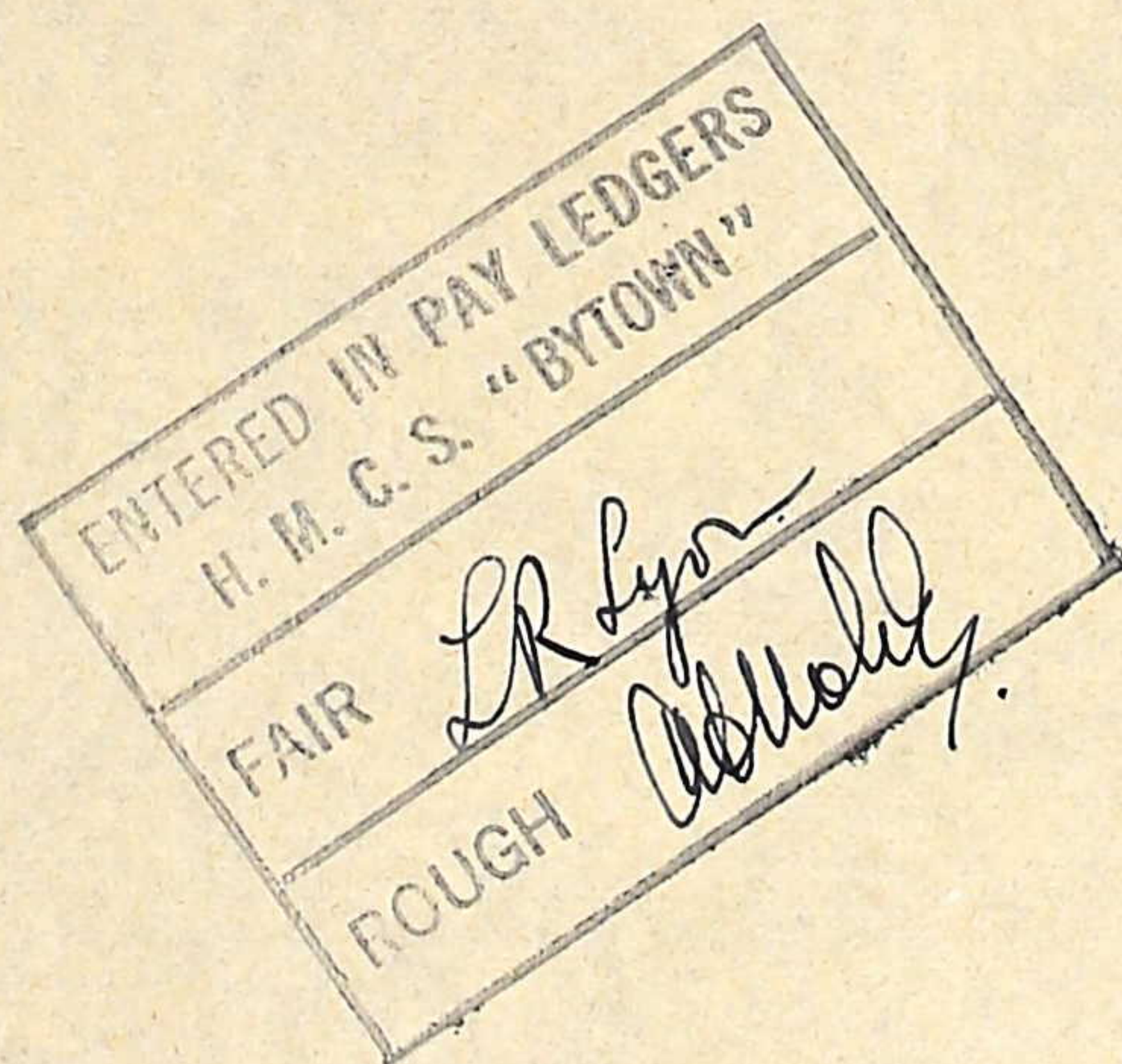
To Probationary Sub-Lieutenant Wilfred Bark, R.C.N.V.R.,
(Temporary),--

The Minister of National Defence hereby appoints you

Probationary Sub-Lieutenant, R.C.N.V.R.,

of His Majesty's Canadian Ship (1) HOCHELAGA II additional for MONTREAL.
(Borne in books of BYTOWN
for pay);
(2) KINGS additional for training and
disposal.

Your appointment is to take effect from (1) 16th March, 1942;
(2) 26th March, 1942.



Vice-Admiral,
Chief of the Naval Staff

Department of National Defence

Ottawa, 25th March, 1942.

H.Q. 36a
N. S. 815-7-36a
10M-7-41 (1117)

M. D. W.

Personnel Records Division	
1. Noted in Records . . .	<i>LB</i>
2. Index Card	
3. Non-Sub. Card	
4. Statistical Card	
5. Roneo Strip	<i>LB</i>
6. Pension Card	
7.	
8.	
DATE	<i>30/3/42</i>

103 B. 93

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

P178810

To Probationary Sub-Lieutenant Wilfred Bark, R.C.N.V.R., (Temporary),

You are hereby appointed

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

of His Majesty's Canadian Ship WEYBURN.

Your appointment is to take effect from 20th July, 1942.

A. A. Lennington

Secretary, Naval Board

B.G.
Department of National Defence
Naval Service

Ottawa, 22nd July, 1942.

H.Q. 36a
10M-4-42 (4052)
N.S. 815-7-36

*Keeps for
L.R.*

Personnel Records Division	
1. Noted in Records . . .	<i>A.B.</i>
2. Index Card	
3. Non-Sub. Card	
4. Statistical Card	
5. Roneo Strip	<i>A.B.</i>
6. Pension Card	
7.	
8.	
DATE	<i>27/7/42</i>

103-B-293
#652

Six copies to be rendered to Naval Service Headquarters

REPORT OF THE DEATH OF AN OFFICER, MAN OR BOY

H.M.C.S. "NIOBE" (WEYBURN) at 94128

Name BARK, Wilfred
(Christian names in full)

Rank of Rating Sub-Lieutenant, R.C.N.V.R. Official No. - -
(If unknown, date of first entry)

Place of Birth Date of Birth

Occupation in Civil Life Religion

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)

Date of Death 22nd February, 1943 Place of Death At Sea

Cause of Death Lost when ship was mined.
(If due to accident, violence, or enemy action, particulars to be stated briefly)

Nearest known relative or friend { Name Relationship
Address

Date on which the above was informed by Ship Informed by N.S.H.Q.

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 (if known) Date of Burial (if known)

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

Undertaker employed (if any)

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

A. H. Hingley
Commander, RCN.,
Commanding Officer,

27th March, 1943.

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

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
15M-7-40 (5849)
N.S. 815-9-1121

Duplicates on file.
NFA @ NPR 15.
12/5.



Department of National Defence

Naval Service

Ottawa, Canada.

1st March, 1943.

IN REPLY PLEASE QUOTE

No. N.S. 103-B-293

DEPT.
NATIONAL DEFENCE

MAR - 4 1943

HO 103-B-293



Sir:

In accordance with Naval Order No. 839, it is notified for your information that the following casualty in the Naval Forces of Canada has been reported:

<u>NAME, RANK/RATING NO.</u>	<u>PLACE, DATE & CAUSE of DEATH</u>	<u>NEXT OF KIN</u>
Sub-Lieutenant Wilfred BARK, Royal Canadian Naval Volunteer Reserve.	Missing presumed killed in action to date the 22nd of February, 1943, when the ship in which he was serving was sunk by enemy action overseas.	Father: Mr. Cyril W. Bark, 35 Brock Ave. South, Montreal West, Que.

ALLOTMENTS IN FORCE

<u>In favour of:</u>	<u>Amount:</u>	<u>Initials:</u>
Royal Bank of Canada, Beaver Hall, Dorchester St. Montreal, P.Q. a/c #945	Stopped paid 28/2/43. \$100.00	<i>SH</i>

WILL: No record.

Yours truly,

R. A. Hamilton
SECRETARY, NAVAL BOARD.

Administrator of Estates,
Estates Branch,
Department of National Defence,
OTTAWA.

(NAVAL SERVICE)

MEMORANDUM

TO: SEC. N.B.

FROM: D. N. INF.

I am attaching a letter from Mr. C.W. Bark in which he intimates that he has not yet received notification confirming the Press Notice that his son, S/Lt. Wilfred Bark, who was lost in the "WEYBURN", was "Mentioned in Despatches."

H.C. Howard

(H.C. Howard)
Director of Naval Information.

O T T A W A,
July 19, 1943.

N.S. 103-B-293

24th February, 1943.

Dear Mr. Bark:

I deeply regret that I must confirm the telegram of the 24th of February, 1943, from the Minister of National Defence for Naval Services informing you that your son, Sub-Lieutenant Wilfred Bark, Royal Canadian Naval Volunteer Reserve, is missing, presumed killed in action.

I regret that I have no further information at present other than a report from Overseas that your son is missing, presumed killed when the ship in which he was serving was sunk by enemy action. I can assure you, however, that immediately further details are available you will be informed.

It is for the public interest that the name of the ship and the fact that she has been lost should not find its way to the enemy until such time as it is decided to publish this information in a Naval Casualty List. For this reason, it is requested that you will regard as confidential anything beyond the fact of your son's death on war service until such time as an official announcement is made.

Please allow me to express sincere sympathy with you in your bereavement on behalf of the Minister of National Defence for Naval Services, the Chief of the Naval Staff, and the Officers and men of the Royal Canadian Navy, the high traditions of which your son has helped to maintain.

Yours sincerely,

DEPUTY SECRETARY, NAVAL BOARD.

Mr. Cyril W. Bark,
35 Brock Ave. South,
Montreal West, Que.

PERS (NAVAL)		
REFER.	INIT	DATE
CNP		
DCNP		
DMNA		
DTNA		
PDG		
MDG		
DWS		
DNE		
C&W		
NPR.	✓	
SHIP		
PIB		
DEP		
P.A.		
B.F.		

Despatched by
Sec. N. B.
Date 24/2
Time 6.00

DRAFTED BY NPM PER TLB
103-B-293

NAVAL MESSAGE

S. 1320D
10 Mil. 8-42 (5915-6)
N.S. 815-9-1320D

To: MR. CYRIL W. BARK,
35 BROCK AVE., S.,
MONTREAL WEST, QUE.

From: NSHQ, OTTAWA

103-B-293

27

CNS
VCNS
DSD
DNI
D OF P
CNE

THE MINISTER OF NATIONAL DEFENCE FOR NAVAL SERVICES
DEEPLY REGRETS TO INFORM YOU THAT YOUR SON
SUB-LIEUTENANT WILFRED BARK, ROYAL CANADIAN NAVAL
VOLUNTEER RESERVE, IS MISSING, PRESUMED KILLED IN ACTION.
LETTER FOLLOWS:

/25

(DELIVERY CONFIRMED)

L/T

P/L

1845Z/25/2/43

GMA 17171

C O P Y

38'

BASEGRAM

TO: A.I.G. 1 119 A

FROM: ADMIRALTY

TO AVOID SUBSEQUENT SIGNALS IT IS ESSENTIAL WHEN REPORTS OF CASUALTIES IN ACCORDANCE WITH KR 1135 THAT NATURE OF CASUALTY BE CLEARLY INDICATED UNDER ONE OF FOLLOWING 4 HEADINGS - KILLED OR DROWNED.

MISSING PRESUMED KILLED. THIS CATEGORY IS ONLY TO BE USED WHERE PERSONNEL ARE MISSING BUT DEATH IS CERTAIN BEYOND REASONABLE DOUBT.

MISSING.

WOUNDED SPECIFYING GRAVITY OF WOUNDS.

INDEFINITE EXPRESSIONS SUCH AS BELIEVED KILLED OR FEARED DEAD OR CASUALTY ARE INSUFFICIENT TO ENABLE ADMIRALTY TO DECIDE INTO WHICH OF ABOVE 4 CATEGORIES A PARTICULAR CASUALTY SHOULD BE PLACED. DATE ON WHICH DEATH OCCURS IS ALWAYS TO BE REPORTED.

0327/27

L/T CODE TOR

1850Z/27/1/42

FEM 13885

43

Naval Board directed that Board Minute 59-5 be amended to read:-

" Findings as to death or presumption of death of Canadian Naval Personnel will be made by the operating authority and a finding by such operational authority other than R.C.N. shall be considered as sufficient evidence upon which to issue a certificate of death or presumption of death.

In the case of Naval Personnel serving under R.C.N. operational control, all cases of personnel believed lost shall be referred to Naval Staff for decision, as provided in Staff Minute 159-9

47
March 22nd, 1943


Dear Mr. Bark, -

Thank you for your letter of the 26th
February.

As your son was not among the survivors who were picked up, it is with deepest regret that I must confirm that under the circumstances surrounding the loss of H.M.C.S. WEYBURN there is but slender hope of his having survived, and we must presume that Sub-Lieutenant Bark lost his life in the sinking of H.M.C.S. WEYBURN.

May I again extend to you the sincere sympathy of the Department and express the hope that you and Mrs. Bark may be afforded some small measure of consolation in knowing that he died in the performance of his duty and in the service of his country.

Yours sincerely,


DEPUTY SECRETARY, NAVAL BOARD

Mr. Cyril W. Bark,
35 Brock Ave., South,
MONTREAL WEST, P.Q.

Despatched by
Sec. N. B.
Imo
mrc
Date *22/3*
Time *4.00*