V5407
BROWN
DAVID ROBER

MEMORANDUM FOR

Mrs. Clara Brown,
123 Selby Street,
Westmount, P.Q.

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

THE SECRETARY,
DEPARTMENT OF NATIONAL DEFENCE,
OTTAWA, ONTARIO

ATTENTION: ADMINISTRATOR OF ESTATES

and the following number quoted:—

H.Q. NS. 113-B-441 FD 248

DEPARTMENT OF NATIONAL DEFENCE
OTTAWA, ONT.

October 5, 1942

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

BROWN Robert David Act. Ldg. Smn,

No. V.5407. 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 or Local Magistrate, who should be asked to complete and sign the Certificate. This form should then be returned to the above address.

(H.R. Wade) Lt.-Cdr. R.C.N.V.R.,
for (L.M. Firth) Lt.-Col.,
Administrator of Estates.

ESTATES BRANCH
OCT 12 1942
H.Q.
OTTAWA
NATIONAL DEFENCE

M.F.W. 77
3M-5-40 (4995)
H.Q. 1772-39-972

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.....		BROWN., ROBERT Christopher	50	123 Selby St Westmount
4	Mother of the Deceased.....		Brown, Clara Lily	48	123 Selby St.
5	Brothers of the Deceased	Full Blood	Brown, Gordon James	20	R.C.N.V.R
		Half Blood			
6	Sisters of the Deceased	Full Blood	Brown Maria Annie	28	123 Selby St
		Half Blood			
	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
7					

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?	BROWN, Robert David
11	Give the month and year of his birth.	January 5- 1918
12	Where and when were his parents married?	Vancouver. July 27/1914
13	Was he ever married? If so, state exact place and date of marriage.	No
14	Did he leave a (later) Will? If so, it should be forwarded.	Not at home Possibly in the R.C.N.V.R.
15	Is there any other estate which will necessitate application being made for Probate or Letters of Administration?	No

PARTICULARS OF DOMICILE

16	Where was deceased born?	1809. 3rd Ave Vancouver
17	In what Province, Country or State did he reside, and in which last?	B.C. and later in Quebec
18	How long in each?	8 years in B.C. 14 years in Quebec
19	What was the nature of his employment?	Goods reciever in General Stad. Was until he entered in the RCNVR
20	Did he own the house or homestead in which he lived? If so, where?	No
21	Did he ever state verbally, or in writing, where he intended to make his permanent home?	Only in general terms — intending to remain in Montreal
22	State your postal address in full.	123 Selby St Westmount P.Q.

PARTICULARS AS TO CLAIMS

23	Have the funeral expenses been paid? If so, by whom?	Deceased Lost at Sea
24	Are there any outstanding claims against the estate? If so, furnish full name and address of each Creditor in this space and enclose his Bill of Account. (See Note Below).	No

NOTE.—Paragraph 24 refers to debts incurred for board and lodging, medical and funeral expenses, money borrowed, goods purchased, etc.; the following information to be embodied in all accounts submitted:—

1. Name and address of Creditor.
2. Detailed statement of particulars of claim with date or dates incurred.
3. At the end of his statement the creditor should certify that the account is just and reasonable, that no payments save as shown, have been made thereon and that he holds no security therefor; the creditor should then sign same, and if you admit that the claim is correct, then you "O.K." the bill and sign same.

(PLEASE TURN OVER)

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

* Mother of the deceased.

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

Mrs Clara Brown — Signature of Informant

CERTIFICATE

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

*See above Mrs Clara Lily Brown {Name of Informant} is the * Mother 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 123 Selby St Westmount this 9th day of October 1942

Signature of Clergyman, Priest or Magistrate } Rev. T. W. Jones Hon/Capt Qualification Minister of Calvary United Church Chaplain of 21 Agmnt

Address 4210 Dorchester St. Westmount P.Q.

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 of each surviving Relative enquired after is stated in its proper place in the Statement opposite.

12743

N. V. 5
2M—2-32
N.S. 815-11-5

DEPT. MILITIA AND DEFENCE OCT 1 1937 ... CANADA

113-B441

3

CANADA

ATTESTATION FORM

FOR MEN OF THE ROYAL CANADIAN NAVAL VOLUNTEER RESERVE

SURNAME Brown OFFICIAL No. 5407

CHRISTIAN NAMES Robert David MARRIED, SINGLE or WIDOWER Single.

PERMANENT ADDRESS	RELIGION
3403 Albert St, Montreal, P.Q.	United Church

DATE OF BIRTH	PLACE OF BIRTH	NAME AND ADDRESS OF NEXT OF KIN
Jan 5/1918.	Town Vancouver, County Province B.C.	Clara Brown. Same Address.

PERSONAL DESCRIPTION ON ENROLMENT

HEIGHT	CHEST MEASUREMENT	HAIR	EYES	COM-PLEXION	WOUNDS, SCARS, MARKS
Feet 5 Inches 5	Inflated 36 Deflated 34 Mean 35	Fair	Hazel	Flesh	Nil

DATE OF ENROLMENT	RATING ENROLLING FOR	TRADE OR CALLING AND IN WHOSE EMPLOY
Sept 29, 1937	Ord: Sea:	Receiver, General Steel Wares Ltd.

(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 .... for the period shown, and attach my record of service, in corroboration of this statement.~~

¶ Cross out Clause not applicable.

SERVED IN	RANK	FROM	TO

(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.

Approved
N.S.

(5) On being enrolled as a member of the Montreal Division ~~Company~~ of the Royal Canadian Naval Volunteer Reserve, I undertake and bind myself:—

(a) To serve from the date thereof for three consecutive years, 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 ~~Company~~ 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 29th, day of Sept, 1937

Signature of applicant Robert David Brown

(C) CERTIFICATE OF ~~COMPANY~~ 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 29th day of Sept, 1937

A R Coleman Lt Cdr RCNVR

for Signature of ~~C.~~ C. O.

(D) OATH OF ALLEGIANCE

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

Signature of Applicant Robert David Brown

Witness A R Coleman

Date Sept 29th, 1937 Rank Lt Cdr RCNVR

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

(E) CERTIFICATE OF ~~COMPANY~~ COMMANDING OFFICER

..... 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 Montreal Division ~~Company~~ of the R.C.N.V.R.

A R Coleman Lt Cdr RCNVR

~~Company~~ Commanding Officer.

NOTE—This form when completed and when the particulars on it have been noted in the ~~Company~~ 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.

Can. B. 207
20M—8-38
N.S. 815-2-207

CANADA

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

(R.C.N. OR RESERVE FORCES)

NOTE—This 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 R. D. Brown 5407

candidate for ~~entry as~~ Naval Training

and I believe him to be in all respects fit for His Majesty's Service. He has signed the Certificate given below in my presence.

Dated at Montreal the 5th of June 1939

H. [illegible]
Examining Medical Officer

(Rank) Surg.-Lieut. R.C.N.V.R.

This examination has been made in accordance with the Instructions for Recruiting.

(a) Age { Years Months	(b) Weight without Clothes	(c) Height with Bare Feet	(d) General Development	(e) Chest Girth	(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.	(k) Limbs and Joints	(l) Skin	(m) Ears and Hearing	(n) Testes, Varicocele, etc.	(o) Mouth, Teeth (*No. deficient and No. defective, if any*), Nose, Tonsils, etc.	(p) Anus, Hæmorrhoids, etc.
21 5/12	lbs. 136	ft. 5 ins. 4	Good	inches (a) maximum 36 (b) minimum 34 (c) mean 35	right eye 6/6 left eye 6/6 colour vision N	1 Left Child	N	N	N	N	N	N	3 Bad Teeth	N

CERTIFICATE TO BE SIGNED BY THE 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 as may be authorized.

R. D. Brown
Signature of Candidate

When a Candidate is passed, notwithstanding a slight defect or disability, the following Certificate is to be filled up

This Candidate is the subject of ....

....

not considered of sufficient importance to cause his rejection, he being desirable in other respects.

SICK BAY
Royal Canadian Naval Barracks
[initials]
JUN 12 1939
HALIFAX, N.S.

....
Examining Medical Officer

(Rank) ....

* The exact meaning of this is to be clearly explained to the Candidate by the Examining Medical Officer.

DEPARTMENT OF VETERANS AFFAIRS

D OF D 13-9-42

AWARDS NAVY

WAR SERVICE RECORDS

D.D.

SURNAME (IN BLOCK LETTERS)	CHRISTIAN NAMES	REG. No.	RANK ON DISCHARGE	C.A.S.F. UNIT	FILE No.
BROWN	Robert David	Ldg.Smn.	V- 5407		

WAR SERVICE BADGE (CLASS) No.

DATE DESPATCHED:

ADDRESS:

CAMPAIGN MEDALS	REGISTRATION NUMBER AND DATE DESPATCHED
1939-45 Star	1661
Atlantic Star	
C.V.SM & Clasp	
War Medal 1939-45	

(THE REVERSE TO BE USED FOR ESTATE PURPOSES)

DVA 806

MEDALS AND MEMORIALS—DECEASED PERSONNEL

RCNVR Aug. 45 "OTTAWA"

(1) MEDALS

PERSON

ENTITLED TO Mr. Robert C. Brown - Father

ADDRESS: 123 Selby St.,
WESTMOUNT, Que.

(2) MEMORIAL CROSS

WIDOW

ADDRESS:

(3) MEMORIAL CROSS

MOTHER Mrs. Clara Brown

ADDRESS: 123 Selby St., Westmount, Que.

REGISTRATION No. DATE OF DESPATCH

MEMORIAL BAR

DATE DESP.....

REGN. NO. 452

(2)

(3) 25-11-42

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

V5407 OFFICIAL NUMBER NAME BROWN (Surname) Robert David (Given Names) OFFICIAL NUMBER V5407

Ship or Establishment	Rating	From			Remarks	Character	Efficiency	Date		
		Day	Month	Year				Day	Month	Year
Montreal Div. Str.	Ord. Smn.	29	9	37	--Tr.	V.G.	Sat.			
Stadacona	" "	29	5	38	--11-6-38	"	"	31	12	39
"	" "	11	6	39	--25-6-39	"	"	31	12	40
"	A.B.	26	6	39	--9-7-39	"	"	31	12	41
Duty Div. Hdqs.	"	4	9	39		"	"	13	9	42.
Stadacona	"	21	11	39						
Restigouche	"	9	12	39						
Stadacona	"	1	4	40						
Restigouche	"	21	5	40						
R.N.Bks. Devonport	"	29	8	40						
Ottawa	"	27	11	40						
"	A/Ldg. Smn. ty	1	12	41	Memo 11-4-42					
DISCHARGED	" "	13	9	42	Missing. Believed killed in action. C.L.					

Non-Sub. Rating	Qualified			Re-Qualified		
	Day	Month	Year	Day	Month	Year
Q.R.111	30	4	40			
A.A.111	8	10	40			
A.A. II	16	5	42			

GENERAL REMARKS

Memorial send to his Mother:
Mrs. Clara Brown,
123 Selby Street,
Westmount, Quebec. 24-11-42

DATE OF BIRTH DY.	MO.	YR.	PLACE OF BIRTH	CIVIL OCCU. MAIN	SUB	RELIGION	ED	PERM. RESIDENCE P.	CTY.	TOWN	PREV. SERV.	ENL. DIV.	RANK OR RATE ON ENL. A	BR.	R.
05	1	18	18	RRR	D	40	X	2	23	02	0	09	0	08	95

ENLIST. DATE DY.	MO.	YR.	ACT. SERV. DATE DY.	MO.	YR.	STR. CAT.	DATE DY.	MO.	YR.	SHIP OR ESTAB.	A	BR.	RANK
29	09	37	04	09	39					0350	1	08	93

				NON-SUB A	B			CODED	CHECKED
01	12	41	09	15	00	20	13-09-42	JL Smn	

V5407 OFFICIAL NUMBER | FILE NUMBER 113-B-441 | OFFICIAL NUMBER V5407

NAME BROWN (Surname) Robert David (Given Names) DATE OF BIRTH 5 January, 1918

PLACE OF BIRTH Vancouver, B.C.. OCCUPATION General Steed Wares Ltd..

RELIGION United Church EDUCATION —

RESIDENCE AT TIME OF ENLISTMENT: Street and No. 3403 Albert Street Town Montreal, Province, etc Quebec.

Engagements: Day	Month	Year	Period	Description: Height	Hair	Eyes	Complexion	Marks or Scars	Previous Service: Served in	Rank or Rating	Dates: From	To
29	9	37	3 yrs. and Duration of Host.	5' 5"	Fair	Hazel	Fresh					

NEXT OF KIN RELATIONSHIP (in pencil) mother NAME (in pencil) Clara Brown

ADDRESS (in pencil): Street and No. 123 Selby Street Town Westmount Province, etc. Quebec

Medals, Clasps, Hurt Certificates, Prize Money

Day	Month	Year	Particulars

Examinations, Certificates, etc.

Day	Month	Year	Particulars
12	11	41	Passed Prof. for Ldg. Smn.

Badges, G.C. or G.S.

Day	Month	Year	1st, 2nd or 3rd G.C. or G.S.	Granted Deprived Restored
4	9	42	1st G.C.B.	Granted

Brief Particulars of Warrant or C.M. Punishments and C.P. Charges

Ship or Establishment	Wt. No.	Day	Month	Year	Brief Particulars of Offence	Punishment

Day	Month	Year	Prison	Det'n	Cells	C. Power	W. Trial	In diff. Char.

Second Class For Conduct

From	To

FILM NO. WSR 5261 – 6 DATE

W.S.G. APPLICATION 4287 RECEIVED

H.Q. 35—30M—5-41 (337)
N.S. 815—7-35

12744

DEPT MILITIA AND DEFENCE OCT -1 1937 CANADA

113-B441

QUESTIONNAIRE FOR CANDIDATES
FOR ENTRY IN THE ROYAL CANADIAN NAVAL VOLUNTEER RESERVE

2

Name (in full)........ Robert David Brown

Date and Place of Birth.... Jan 5/18 Vancouver
(Birth certificate, declaration by parents or affidavit as to date of birth must be attached)

Permanent Place of Residence........ 3403 Albert St Montreal

Nearest Town to Residence (if living in country)........

Are you a British Subject?........ Yes

Are you single, married or a widower?........ Single

In what capacity do you wish to enrol?........ Seaman
(See standards of qualifications in attached pamphlet)

Present occupation or trade........ Receiver
(Attach any testimonials or recommendations)

Do you belong to any Naval, Military, Reserve or Territorial Force?........ No

Have you ever served with such forces? Give dates and details........ Sea Cadets
.... 2½ Years.

Have you ever been discharged from any of H. M. Forces as medically unfit?........ No.

Have you ever offered to serve in any of H. M. Forces and been rejected?........ No.

What is your weight?........ 130 lbs........ What is your height?........ 5 ft. 5"

What is your chest measurement (not inflated)?........ 35 in

Are you free from all physical defects or malformation, and not subject to fits?........ Yes

Are you willing to be vaccinated or re-vaccinated and inoculated as considered necessary by the appropriate authorities? .... Yes

I hereby declare that the above answers are true in every respect.

.... Robert David Brown........ Signature

.... Sept 29/37........ Date

.... 3403 Albert St........ Address

.... A. [signature]........
(Witness to Signature)

This is to certify that I have personally seen the birth certificate of this applicant, or a sworn declaration as to his date of birth.

I certify his date of birth, according to legal documentary evidence, to be........ Jan 5th 1918

Signed........ [signature]........
for Company Commanding Officer

N. V. 3
1M—2-34
N.S. 815—11-3

ORIGINAL

DEPT. OF NATIONAL DEFENCE
OCT 24 1939
CANADA

H.Q. File No. 112-B441

DECLARATION OF ALLOTMENT

List and Number in Ledger	ALLOTTOR	Rank or Rating	Official No.	Daily Rate of Pay
	Surname Brown Christian Names Robert David	Able Sea.	5407	$1.85

060014

10

24500

Section A — ALLOTMENT NOW DECLARED

FULL NAME OF ALLOTTEE	Relationship	ADDRESS	Rate per Month to be charged on ledger	Month to commence. Payable on last working day
Surname Brown Christian Names Clara	Mother	3403 Albert St., Montreal	$35.00	Oct.1/39

Section B — DISPOSAL OF EXISTING ALLOTMENTS (See Note 1 below)

The following allotments are in force:—

Rate	NAME OF ALLOTTEE	ADDRESS	These allotments are to be disposed of as indicated below. (See Note 2):—	
	Nil	Nil	Initials	Date
				26/10/39

Allotment Declarations.
Ent'd. on Index Card
Ent'd. on Allotment Ledgers

NOTE 1:—If there be no existing Allotment, the word "NIL" should be written across Section B.
NOTE 2:—Write "Increased or reduced as Section A"; "To be stopped (charged to.....)"; "To be continued," etc.

Allottor's Signature authorizing charges Robert David Brown A.B.
Rank or Rating

ENTERED IN FAIR LEDGER	ENTERED IN ROUGH LEDGER

The allotment now declared has been duly entered in the Fair and Rough Ledgers with effect from the appropriate date. The reduction or transfer has been duly approved by the Commanding Officer and the reasons for the alteration are:—

THE NAVAL SECRETARY,

Department of National Defence,
(Naval Service)
Ottawa, Ont.

H Barnes
D.N.A. Accountant Officer

H.M.C.S. H Qrs

Forwarded 24/10/39.

N.P.R.
L.K.

S. 63

4M—3-39
N.S. 815-9-63

NOT MORE THAN ONE MONTHLY ALLOTMENT SHOULD BE DEALT WITH ON THIS SHEET

FOR USE AT HEADQUARTERS ONLY

	INITIALS	DATE
Declaration received at Headquarters		
Declaration examined		
Approved		
Index card made		
Allotment ledger sheet made		
Allotment ledger sheet checked		
Type plate made		

MAIN FILE
CHARGED TO
SINCE
REC'D. CENTRAL REGISTRY
OCT 24 1939
REFERRED TO

SERVICE CERTIFICATE

N. V. No. 17
1M—5-35
N.S. 815-11-17

OF

Name in full Robert David BROWN ~~Company~~ Montreal Division

ROYAL CANADIAN NAVAL VOLUNTEER RESERVE

Training Headquarters	H A L I F A X, N. S.	Official Number 5407

Date of Birth 5th January 1918

Place of Birth Vancouver, B. C.

Usual Place of Residence 123 Selby St. Montreal, Que.

Trade brought up to Receiver

Name and Address of next of Kin Clara Brown (mother), same address

Religious Denomination United Church

Can Swim P. P. T. (Good) 20th June, 1939.

PARTICULARS OF SERVICE

Date of Actual Volunteering	Date of Enrolment	Period Volunteered for	Rating on Enrolment	Medals, Decorations, Etc.	
				Date Received	Nature of Decoration
29 Sep/37	29 Sep/37	3 years	Ord. Smn.		

PERSONAL DESCRIPTION

	Height		Complexion	Hair	Eyes	Marks, Wounds, Scars
	Feet	Inches				
On Entry	5	5	Fresh	Fair	Hazel	Nil
On attaining 28 years						
Further Description if necessary						

NAVAL TRAINING AND DRILLS

Year	Ship's Name	List and No.		Rating	From	To	Character	Ability	Total No. of Drills	Bounties Date	Bounties Am[ount]
1938.	"Stadacona"			Ord. Smn	29 May	11 June.	V.G.	Sat			
1939	"Stadacona"			O. Sea.	12 June	6 July	VG-	Sat-			

EXAMINATIONS AND NOTATIONS OTHER THAN THOSE ENTERED ON G. AN[D]

Date	Wounds and Hurt Certificate. Meritorious Service. Special Recommendations	Captain's Signature
2-5-42	Joined A.C. T.W.H B.20337	

Date	Particulars
23 June '39	Passed for A
30 Apl '40	Qual. & Rated Q.
12 Nov. '41	Passed prof. for L
16 May '44	Qual. and Rated A.

NAVAL TRAINING AND DRILLS

To	Character	Ability	Total No. of Drills	Bounties		Efficient	Cause of Discharge—Remarks	Captain's Signature
				Date	Amount			
11 June.	V.G.	Sat				1st Year yes	Completed N.T.	[illegible]
6 July	v.g.	Sat				yes.	Completion of N.T. & S.	[illegible]

AND NOTATIONS OTHER THAN THOSE ENTERED ON G. AND T. HISTORY SHEET

ns	Captain's Signature	Date	Particulars	Captain's Signature	Date	Particulars	Captain's Signature
		23 June '39	Passed for A.B.	[illegible]			
		30 Apl '40	Qual. & Rated Q.R. III	[illegible]			
		12 Nov. '41	Passed Prof. for L/Sea	[illegible]			
		16 May '42	Qual. and Rated as A.A. 2	[illegible]			

ACTIVE SERVICE

Ship's Name	List and No.		Rating	From	To	Character	Ability	Captain's Signature
"Stad" D.H.Q. Montreal			A. B.	4 Sep. '39	21 Nov. '39			
Stadacona	-	-	A. B	22 Nov '39	8 Dec '39			
Restigouche	—	—	— " —	9 Dec '39	31 Dec '39.	V.G.	Sat	H.H. Lay
			(ANNUAL ASSESSMENT)					
"Restigouche".			A.B.	1 Jan. 40.	29 Mch '40			
Stadacona			— " —	30 Mch '40	17 May 40			
Restigouche			— " —	18 May 40	21 Nov '40			
Ottawa				22 Nov '40	30 Nov '41 / 31 Dec 41	V G	Sat	[illegible]
— " —			attdg. Seam (T) / — " —	1 Dec '41 / 1 Jan	28 May '42			
Avalon.			— " —	29 May '42	29 May/42			
Ottawa			— " —	30 May/42	13 Sep 42 D.D.			
						VG	—	[illegible]

Good Conduct Badges			Service Badges		Second Class for Conduct		Time Forfeited			
Date	1st, 2nd, 3rd	Granted, Deprived, Restored	Date	Number	From	To	From	P.D.G. C.P. W.T.	Days	To
4 Sep. '42	1st.	Granted 29 Sep 40								

R.C.N.V.R.

~~3-BR-55~~

TRUE COPY

OF THE

CERTIFICATE of the Service of

Brown, Robt. Lloyd

IN THE ROYAL CANADIAN NAVY V.R.

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.

Halifax, N.S.

Official Number V 5407

Date of birth 5th January 1918

Where born { Province Vancouver, B.C.
Town or county 123 Selby St. Montreal Que.

Trade brought up to Receiver

Religious denomination United Church

Date passed swimming test P.P.T. (Good) 20th June 1939

Man's signature on discharge to pension

Nearest known Relative or Friend (To be noted in pencil)

Name: Clara Brown

Relationship: Mother

Address: Same address

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. 29 Sep '37	29 Sep '37	3 years	5.		
2.	Of Sea		6.		
3.			7.		
4.			8.		

Medals, Clasps, Etc.

Date received or forfeited	Nature of decoration	Date received or forfeited	Nature of decoration

Description of Person	Stature Feet	Stature In.	Chest, In.	Colour of Hair	Colour of Eyes	Colour of Complexion	Marks, Wounds and Scars
On entry as a boy							
On advancement to man's rating or on entry under 28 years	5	5		Fair	Hazel	Fresh	Nil
On re-entry for C.S. or for Non-C.S. after attaining 28 years							
Further description if necessary							

C.N.S. 1243
20M—4-41 (241)
N.S. 815-9-1243

CAUTION.—This is an Official document. Any alteration made to it without proper authority will render the offender liable to severe penalties.

Name Brown, Robt. David

Ship's Name (Tenders to be inserted in brackets)	List and No.	Rating	From	To	Cause of Discharge
1938 "Stadacona"		O/Sea	29 May	11 June	
1939 —.. —		—.. —	12 June	6 July	
Stadacona					
S.A.G. Montreal		A/B	6 Sep. '39	21 Nov. '39	
Stadacona		—.. —	22 Nov '39	8 Dec. '39	
Restigouche		—.. —	9 Dec. '39	31 Dec. '39	
	(ANNUAL ASSESSMENT)				
Restigouche		A/B	1 Jan. '40	29 Mch '40	
Stadacona		—.. —	30 Mch '40	17 May '40	
Restigouche		—.. —	18 May '40	21 Nov. '40	
Ottawa		—.. —	22 Nov. '40	30 Nov. '41	
—.. —		A/L/Sea (TY)	1 Dec. '41	31 Dec. '41	
—.. —		—.. —	1 Jan '42	28 May '42	
Avalon		—.. —	29 May '42	29 May '42	
Ottawa		—.. —	30 May '42	13 Sep. '42	D.D.

Date	Wounds received in Action and Hurt Certificate; also any Meritorious Service, Special Recommendations, Prize or other Grants	Captain's Signature
2-5-42	Issued S.C.T.W. B.20337	

Service

Ship's Name (Tenders to be inserted in brackets)	List and No.		Rating	From	To	Cause of Discharge

Examinations passed and Notations or Qualifications other than those entered on History Sheets

Date	Particulars	Captain's Signature	Date	Particulars	Captain's Signature
23 June '39	Passed for A.B.				
30 Apl. '40	Qual. + Rated Q.R. III				
12 Nov. '41	Passed prof. for L/Sea				
16 May '42	Qual + Rated c/A.A.2				

Name Brown, Robt. David **Conduct**

Second Class for Conduct (inclusive dates)	
From	To

Efficiency in Rating—Article 607—K.R.

3. Definition of Terms—As a guide to Commanding Officers when making their award the following definitions are given of the terms to be used:—

	Superior	A man who performs his duties with more than average efficiency.
to be written	Supr.	
	Satisfactory	A man who performs his duties with average efficiency.
"	Sat.	
	Moderate	A man who performs his duties in an efficient manner but with less than average efficiency.
"	Mod.	
	Inferior	A man who performs his duties in an inefficient manner.
"	Inferior.	

Note.—In these definitions "duties" means the general duties of the substantive rating held, and "average efficiency" means the average efficiency of all men in the Service holding the same substantive rating.

The substantive rating held by the man at the time is to be noted in brackets after each assessment thus: Supr. (A.B.).

Character	Efficiency in Rating, noting substantive rating in brackets	Whether R.M.G. or not	Date	Captain's Signature
V. G.	Sat (O'Sea)		11 June '38	Completed N.T.
V. G.	— (—)		8 July '39	Completion of N.T. + VS

Good Conduct Badges

Date	1st, 2nd, 3rd	Granted, Deprived, Restored

Time forfeited

Date	P., D., C., C.P., W.T.	Number of days	
		Awarded	Served

DEPARTMENT OF NATIONAL DEFENCE
(Naval Service)

C.N.S. 2417
10M—9-39
N.S. 815-9-2417

P9949

APPLICATION FOR ENTRY IN THE ROYAL CANADIAN NAVY

Halifax, N.S.
(Place)

8th March, 1940.
(Date)

113-B441

FORCE ... CANADA

The Naval Secretary,
Department of National Defence,
OTTAWA.

SIR:—

I hereby make formal application for entry in the Royal Canadian Navy, under a seven years' continuous service engagement as a n Ordinary Seaman.
(Insert rating chosen)

12

I certify that the following particulars are in my own handwriting and are true in every respect:

1. Name (to be given in full in Block Letters) ROBERT DAVID BROWN
2. Date of Birth (Birth Certificate or sworn declaration by parent or guardian *must* be attached) Jan 5/18
3. Place of Birth. Town Vancouver, Province B. C.
4. Permanent Place of Residence. No. 3403 Street Albert
   Town Montreal, Province Quebec
5. Are you a British Subject? Yes
6. How long have you resided in Canada? 22 years
7. What is your Mother Tongue? English
8. What other language do you speak? French
9. Are you of the White Race? Yes
10. Are you Single, Married or a Widower? Single
11. How far advanced educationally are you?
   (Certificates of School Authorities *must* be attached)
12. What practical experience have you had?
   (Details and certificates from employers, trade credentials, etc., *must* be attached to substantiate employment reported.)
   Receiver
13. Do you belong to any Naval, Military, Air or Police Force? R.C.N.V.R.
14. If so, give details A.B. 2½ years service
15. Have you ever served in such forces? Yes
16. If so, give dates and details
17. Have you ever been discharged from His Majesty's Forces as medically unfit? No
18. Have you ever offered to serve in His Majesty's Forces and been rejected? No
   Why?
19. Have you ever been convicted of a criminal offence? No
   (Enclose two character references, one of which must confirm your answer to Question 19)
20. What is your weight? 145 lbs Height 5' 5" Chest Measurement (Not inflated)
21. Have you ever had fits? No
22. Do you suffer from any deformity? No
23. Have you suffered the loss of any fingers, toes, etc.? No
24. Do you suffer from any disease? No
25. Do you wear glasses? No
26. Are you subject to *any* disability which might cause your rejection?
   No
27. Give details
28. Are you willing to be vaccinated and inoculated as considered necessary by the appropriate authorities? Yes

Cert. 18/3/40 [illegible]

[signature] Ldg. Writer
Signature of Witness

R. D. Brown
Signature of Applicant

CERTIFICATE TO BE SIGNED BY THE PARENT OR GUARDIAN OF CANDIDATES UNDER 21 YEARS OLD

I agree to refund to the Department of National Defence the expenses incurred by that Department for transportation to a Naval Base of the above applicant, should he, on arrival at such Base, fail to enrol for seven years' continuous Naval Service for reasons which in the opinion of the Department are within his own control. Signed and Sealed at ...., this .... day of ...., 19......, in the presence of

Signature of Witness

Signature of Parent or Guardian

CERTIFICATE TO BE SIGNED BY CANDIDATES OVER 21 YEARS OF AGE

I agree to refund to the Department of National Defence the expenses incurred by that Department for my transportation to a Naval Base, should I, on arrival at such Base, fail to enrol for seven years' continuous Naval Service for reasons which in the opinion of the Department are within my own control.

Signed and Sealed at Halifax, N.S., this 4th day of March, 1940, in the presence of [signature] Ldg. Writer

Signature of Witness

R. D. Brown
Signature of Candidate

C. N. S. 45
40M—6-40 (5282
N.S. 815-9-45

DEPT. NATIONAL DEFENCE
OCT -5 1940
N.S. 113-B441
CANADA

R070219

TRANSFER LIST

For 1 Persons Discharged from H. M. C. S. "RESTIGOUCHE" to H. M. C. S. "DRAKE"

20

NOTE—No erasures are to be made on this List. Corrections are to be verified by the initials of the Accounting Officer.

LIST	NUMBER	NAME — OFFICIAL NUMBER — WHETHER "G" "T" OR "U"	Rank — Rating — Non-Sub Rating — Badges	RATE OF PAY AND ALLOWANCES: Canadian	Sterling £	s.	d.	TRANSFERRED TO NEW SHIP: Balance Creditor $	c.	Balance Debtor (in red ink) $	c.	Allotment — Rate and what date charged	REMARKS — Date Kit Upkeep Allowance Due and Rate	ENTERED IN NEW SHIP AT: List	Number
5-2	290	BROWN, ROBERT. D.	A.B.	1.85	-	7	5	45	08	-	-	$35.00	1 OCT		
		T	Q.R.3	.10	-	-	5	or				or	1940		
		V.5407						£9.5.3				£7.3.10	$10.00		
		R.C.N.V.R.										30 SEPT (30)	or		
												[initials]	£2.0.0		

DISTRIBUTION :- ORIGINAL - Accountant Officer, H.M.S.DRAKE
DUPLICATE - Paymaster Lieutenant. W.Marshall
H.M.S.DRAKE IV.DEVONPORT
TRIPLICATE - N.S.H.Q. OTTAWA
QUADRUPLICATE - List 18 men serving overseas.
QUINTUPLICATE - FILE.

Noted in Deferred Pay Ledger 9-10-40 [initials]

LEDGERS :- F.....G..
R.....6..

Noted in Service Records by [initials]

(1) The above named persons were discharged from H. M. C. S. "RESTIGOUCHE" to H. M. C. S. DRAKE
on the 30 September 19 40 ~~a.m.~~ p.m.

(2) Victualling adjusted to 29th August 19 40 inclusive } Art. 397, C. N. R's.
(3) Pay adjusted to 30th September 19 40 inclusive }
(4) Pension deduction (Officers) charged to ---------------- 19 --
(5) Grog money credited to 30th September 19 40

H. Douglas Seely Accountant Officer

Date 24th September 1940 Paymaster-Sub.Lieut. R.C.N.V.R. (Tx) Rank

Enclosure No. .... with ledger of H. M. C. S. .... ended .... 19 ....

Robert David BROWN, A.B., O.N.-V-5407

Ship or Establishment	Rating	FROM Day	Month	Year	Remarks
Montreal Div. Str.	Ord. Smn.	29	9	37	---------Tr.
Stadacona	" "	29	5-	38	---------11-6-38
"	" "	11	6	39	---------25-6-39
"	A.B.	26	6	39	---------9-7-39
Duty Div. Hdqs.	"	4	9	39	
Stadacona	"	21	11	39	
Restigouche	"	9	12	39	
Stadacona	"	1	4	40	
Restigouche	"	21	5	40	
R.N. Bks. Devonport	"	29	8	40	
Ottawa	"	27	11	40	

30

Non-Sub. Rating	QUALIFIED Day	Month	Year	~~RE-QUALIFIED Day~~	~~Month~~	~~Year~~
Q.R.-111	30	4	40			
A.A.-111	8	10	40			

PARTICULARS	Day	Month	Year
Passed Prof. For Ldg. Smn.	12	Nov	41.

DEPARTMENT OF NATIONAL DEFENCE N.S. 113-B-441

- NAVAL SERVICE -

OTTAWA.....11th April.....1942.

113-B-441

MEMORANDUM:

The undermentioned rating is, according to Headquarters' records, eligible in all respects for advancement.

In accordance with N.M.O. 1482, it is approved to advance this rating, if, in your opinion, he is fit to perform the duties of the higher rating and subject to your verification that he is qualified according to regulations, particularly as regards "V.G." conduct and time.

Name and Official Number	Present Rating	Rating to which to be advanced	Remarks
BROWN, Robert David O.N. V-5407	Able Smn.	Acting Leading Seaman (Ty) To Date 1 Dec., 1941.	33

To: The Commanding Officer, H.M.C.S. "OTTAWA"

Copies to: The Commanding Officer, H.M.C.S. "AVALON", - for information. St. John's, Nfld.
The Commanding Officer, H.M.C.S. "STADACONA", Halifax, N.S.

BY ORDER,

H.B. Monk

for SECRETARY, NAVAL BOARD.

Noted in H.M.C.S. "..Ottawa....". It has been verified that this man is qualified under the regulations for advancement, and I consider him to be fit to perform the duties of the higher rating.

He has been advanced to Act/Ldg. Smn. (Ty)..... to date..1st. December.1941.

.....
Commanding Officer

.....
Date

This form is to be returned to the "Secretary, Naval Board, Department of National Defence". If the Commanding Officer does not consider the man fit for advancement, a report stating the circumstances is to be attached.

Advancement may only be made on the precise terms shown. If any amendment is required (e.g., in the date), prior concurrence of Naval Service Headquarters is to be obtained.

Previously noted
21-7-42 NPR

DRAFTING and ADVANCEMENT DEPOT
1 History Card ✓ MB
2 Index Card
3 Roneo Card ✓
4 Advancement ✓ HL
5 A. A. Card ✓
6 Training
7 Statistical
8
DATE

STATEMENT OF ACCOUNT

True extract from the ledger of H.M.C.S. "OTTAWA" ending 30th Sept. 1942

List 5/2 No. 346 (Name) BROWN, Robert D. Rank Rating A/L/Smn. (ty) No. V-5407 D.D.

When entered F.B. Date of appearance - - - Whither discharged 13th Sept. '42

							$	c.
CREDIT from former account								.11
Pay as A/L/Smn. (ty) (Rank Rating)	from 1st July	to 30th Sept	(92	days at $	2.10	a day)	193	.20
" A/A.A.II	" 16th May	" 30th June	(46	"	.10	diff	4	.60
" A/A.A.II	" 1st July	" 30th Sept	(92	"	.20	")	18	.40
" 1 Badge	" 4th Sept.	" " "	(27	"	.05	")	1	.35
" H.L.M.	" 1st July	" 13th Sept.	75	"	.13	")	9	.75
" G.M.	" " "	" " "	(75	"	.06		4	.50
Kit Upkeep Allowance 10.00 July Aug., & Sept.							10	.00
OTHER CREDITS:								
						Total credits	241	.91

49

DEBT from former account

PAYMENTS:—	1st $ c.	2nd $ c.	3rd $ c.	4th $ c.	5th $ c.		$	c.
1st month		34.00				Total	34	.00
2nd month						Total		
3rd month						Total		
Allotment 35.00 July Aug. & Sept.							105	.00
Pension deduction (Officers) charged to ..... of								
Hospital stoppages								
Mulcts								
OTHER CHARGES:								
						Total debits	139	.00
LEDGERS: R. F.						Balance Cr. or Dr. (Balance Dr. to be shown in red)	102	.91

Number of days actually victualled during period mentioned above 75

NOT VICTUALLED

LENT, SICK OR LEAVE	INCLUSIVE DATE FROM	TO	No. OF DAYS	SHIP, HOSPITAL, etc., IN WHICH BORNE

Date 9th November 1942

L. Wright

ACCOUNTANT OFFICER

C.N.S. 2426
25M—10-40 (7514)
N.S. 815-9-2426

ACCOUNTS OF MEN DISCHARGED

Account of the Balance of Wages, the Sale of Clothes and Effects and the other Credits of Men Discharged to the Shore, D. D. or Run

Name Brown, Robert D. *Rating* A/L/Smn.

Official No. V-5407 *H.M.C.S.* "OTTAWA" *List* 5/2/346

*Who** Discharged Dead *on the* 13th September *19* 42

	$	cts.
Net sum due on ledger on account of Wages	102	.91
Proceeds of sale of Effects charged against Wages, brought from the other side		
CASH—		
Proceeds of sale of Effects, paid for in Cash, brought from the other side		
Found amongst Effects		
Debts collected §		
Cash debited in the Accountant Officer's Cash Acct.		
If in debt in ledger, amount to be stated (in red ink)		
Rate of allotment (in words) Thirty five dollars charged to 30 Sep.		
Name of ship from which transferred OTTAWA		
Total† Creditor	102	.91

We hereby certify that we have every reason to believe that the above account contains a true statement of all wages, Effects, and other Credits or Debts on the Ledger of H.M.C.S. "OTTAWA" amounting to a net balance† Creditor of One hundred and two dollars dollars ninety one cents.

Dated on board H.M.C.S. "AVALON" at St. John's Newfoundland this Thirteenth day of November 19 42

Approved ..... Accountant Officer
A/Pay. Lieutenant, R.C.N.V.R.

..... Initials of the Assistant Accountant Officer
PAY. LIEUTENANT R.C.N.V.R.

..... Commanding Officer.
Liut. Commander, R.C.N.

For Use at Headquarters. $.....cts.....credited on Inspector's certificate

No.....to.....

Signature.....

Date.....19.....

*State whether discharged on shore, D.D. or Run. †State whether "debtor" or "creditor".
§Subscription for Charitable or other purposes should not be shown hereon, but on a Remittance List, and dealt with as laid down in the King's Regulations.

C.N.S. 46

10M—10-40 (7450)
H.Q. N.S. 815-9-45

☒ Navy
☐ Army
☐ Air Force
(Mark X opposite Force in which you last served.)

DEPARTMENT OF NATIONAL DEFENCE

M.F.M. 441
1 Mil. 9-44 (5449)
H.Q. 1772-39-2326

Application for War Service Gratuity

(Canadian Armed Forces)

A complete reply must be given to every question in this application. If any question is not applicable, "N.A." is to be inserted.

1. Surname on termination of service BROWN (Print)

2. Christian Names ROBERT DAVID (Print)

3. Service No. V-5407 4. Paid rank or rating at date of termination of Service Ldg. Seaman.

5. Address, in full, to which payments of gratuity are to be forwarded
123 SELBY ST., WESTMOUNT, MONTREAL 6.

6. State below your period or periods of service in the Armed Forces of Canada during the present war.

NAVAL PERSONNEL RECORDS
JAN 23 1945
4287
WAR SERVICE GRATUITY SECTION

Service (Navy, Army or Air Force)	Service No.	Final Rank or Rating	Date of Commencement of Service	Date of Termination of Service
NAVAL	V-5407	LDG. SEAMAN	SEPT/1939	SEPT. 13/1942.

KILLED BY ENEMY ACTION ON BOARD H. M. C. S. OTTAWA, SEPT. 13/1942.

7. Have you during the present War, while a member of the Canadian Forces, been attached, loaned or seconded to any of the Naval, Military, or Air Forces of His Majesty or of any power allied or associated with His Majesty? no If so, state name of Force or Forces

8. Have you during the present War, while *not* a member of the Canadian Armed Forces, been appointed to or enlisted in any of the Naval, Military or Air Forces of His Majesty (other than the Canadian Armed Forces)? no If so, state the Force or Forces, with dates of commencement and termination of service.

Having now ceased to serve on Active Service, I hereby apply for payment of the War Service Gratuity.

JANUARY 12th. 1945.
(Date)

Mrs Clara E. Brown
(Signature of Applicant)
Signature of Mother, next of kin.

If name signed in space above represents a change from name given in question 1, insert here the name at termination of service. As cheques will be prepared in the name given in question 1, a specific address in question 5 is particularly essential.

NOTE: When completed this form is to be mailed to the Headquarters of the Service in which you last served. Viz:
Navy—The Secretary, Naval Board, Naval Service Headquarters, Ottawa. (To be accompanied by Certificate of Service in the case of ratings.)
Army—The Secretary, Department of National Defence (Army), Ottawa. Attention: Paymaster-General.
Air Force—The Secretary, Department of National Defence for Air, Ottawa. Attention: Records Officer.

THE CANADIAN PENSION COMMISSION

MEMORANDUM

To.....Pension Medical Examiner,....MONTREAL.....

From.....Head Office.....

.....Ottawa,.....October 3, 1942.....

V-5407 A/Ldg. Smn. (Ty), BROWN, R. D. P. & N. H. 225-R

The Department of National Defence, Naval Service officially reports that the marginally named was reported -

"Missing, believed killed in action. (He was on board H.M.C.S. "OTTAWA",) on the 13th September, 1942 ~~on~~ service Canada & High Seas."

His next of kin is reported as - Mother -
Mrs. Clara Brown,
123 Selby St.,
Westmount, P. Q.

The Addressograph Stencil shows payment of Assigned Pay of

$35.00 a month to -
Mrs. Clara Brown,
123 Selby St.,
Westmount, P. Q.

As no D.A. was payable the Commission will not take any action unless a claim is filed.

E. Clewes,
for
Canadian Pension Commission.

/LR

C.P.C. - C.N. 2 10M-1-42 Req 108

SEAMAN BRANCH

Application for, and report of result of,

PROFESSIONAL EXAMINATION

for the rating of LEADING SEAMAN

I.—APPLICATION FOR EXAMINATION

H.M.C.S. "OTTAWA"

Name of Candidate (in full) BROWN, Robert David

Present Rating Able Seaman, R.C.N.V.R. O.N. V5407

Port Division Halifax N.S.

Date of Application for Examination 12th November, 1941

Date and Particulars of Previous Failures:—

..... NIL .....

(i) The Candidate has served the requisite period of time, he is fully eligible for examination, and has the necessary recommendations required by the Regulations.

(ii) He has carried out the duties of helmsman satisfactorily.

(iii) I am satisfied that he possesses the necessary qualities which with further experience will fit him to make an efficient ~~Petty Officer~~/Leading Seaman, and I consider that he has a reasonable chance of passing.

To President Examination Board

H.M.C.S. "STADACONA"

for - Captain

NOTES—

(a) This application is to be submitted (in duplicate) to the Administrative Authority, together with the Service Certificate, history sheet and Form S. 264 written up specially for the examination and signed by the Commanding Officer.

(b) On completion of the examination, Form S. 441, in duplicate, is to be forwarded to the candidate's ship, the Commanding Officer of which is to insert the basic date of passing the examination. One copy of the Form is then to be forwarded to the Administrative Authority, the other being forwarded to the Depot. In the case of failure, one copy is to be forwarded to the Administrative Authority, the other being retained with the candidate's papers for future reference. Failures are to be noted on Form S. 264 (Divisional Record Sheet).

C.N.S. 441

15M—3-41 (9881)
N.S. 815-9-441

II.—RESULT OF EXAMINATION

SECTION I

Whether "Passed" or "~~Failed~~"...... Passed Fair

(If passed state whether "V.G." (85% and above), "Good" (70% to 85%), or "Fair" (below 70%))

(See A.F.O. 9/39)

SECTION II

Subject	Maximum Marks		Marks Required to Pass		Marks obtained	
	P.O.	L. Sea.	P.O.	L. Sea.	On Examination	On re-examination
Rigging	60	80	30	40	44	
Anchor Work	50	60	25	30	44	
Rule of the Road	30	30	15	15	28	
Boat Work	80	80	48	48	49	
General Duties	60	40	30	20	20	
Organization	40		20			
Signals	30	30	15	15	22	
Watertight Fittings	10	10	5	5	8	
Duties in Part of Ship and Mess		30		15	16	

REMARKS—
The Candidate has:—

(i) Passed a ~~V.G./Good~~/Fair Examination.
(V.G.—85% and above, Good—70% to 85%, Fair—below 70%)

~~(ii) Failed as indicated above.~~

~~He is recommended for re-examination by his own Ship's Officers in the subjects indicated above in accordance with K.R. Appendix XII, Part 22A, Clause 8 (b).~~

Date 13th November 1941

H W Groos[?]
President of Board

Candidate's Signature (in full) Robert David Brown

Basic date of passing professionally for Leading Seaman
(K.R. and A.I. Appendix XII, Part 22A, Clauses 7 and 8)

is 12th November 1941

Re-examined by Ship's Officers in relevant subjects of Section II on board

H.M.C.S. "..............................." on ....194......

Date..............................

Forwarded, the necessary notation has been made on the Service Certificate.

The Commanding Officer,
R.C.N. Barracks,

....

....
Captain

H.M.C.S..............................

Date..............................

LA/IF

File: N.S.113-B-441

DEPARTMENT OF NATIONAL DEFENCE
- Naval Service -

Ottawa, Canada,

28 September, 1942.
....
(Date)

Sir:

The following casualty has been reported -

NAME	RANK or RATING	NAVAL NO.
BROWN, Robert David	Acting Leading Seaman (Ty),	V.5407, R.C.N.V.R.

DATE OF ENLISTMENT - 29th September, 1937. Active Service: 4th Sept., 1939.

DATE OF DISCHARGE - 13th September, 1942.

HOSPITAL - ______________________
(If discharged in hospital under jurisdiction of D.P. & N.H.)

39

SERVICE - Canada & High Seas.
(Indicate whether in Canada only; or in Canada and on high seas or elsewhere).

Reason for discharge and - when and where any disability was incurred, or where death occurred. "DEAD" - Missing, believed Killed in action. He was on board H.M.C.S. "OTTAWA".

(Show clearly whether death or disability due to enemy action, accident or disease, and whether it occurred in Canada, or on the high seas or elsewhere outside Canada).

NEXT OF KIN & RELATIONSHIP -

RELATIONSHIP Mother NAME Mrs. Clara Brown,

ADDRESS 123 Selby St., WESTMOUNT, P.Q.

NOTE: If records indicate that rating was separated from his wife, legally or otherwise, details to be furnished and copy of any Court Order, the Separation Agreement, etc., to be furnished.

OFFICER'S OR RATING'S MONTHLY PAY ALLOTTED TO WIFE AND/ OR DEPENDENT

$ 35.00 PAID TO Still in force

MARRIAGE ALLOWANCE AT $ Nil PER DIEM PAID TO - Nil

DEPENDENTS ALLOWANCE AT $ Nil PAID TO Nil

TOTAL MONTHLY PAYMENT TO - WIFE $ Nil

DEPENDENTS $ 35.00

Computed by RL
Checked by [signature]

[signature]
SECRETARY,
NAVAL BOARD.
per LA

The Secretary,
The Canadian Pension Commission.

(See reverse side for further instructions.)

Copy to: The Sec., D.P. & N.H.

VERIFICATION FORM
CAMPAIGN STARS, DEFENCE MEDAL, WAR MEDAL, C.V.S.M. &
NAVAL GENERAL SERVICE MEDAL (1915).

NAME IN FULL .BROWN..Robert David.......RANK/RATING ...A. Ldg Smn T.Y.....OFF.NO

SHIP	SERVICE			AREA	QUALIFYING PERIODS			
	FROM	TO	DAYS		FROM	TO	1939-45	ATLANTIC
Duty Div. Hdqtrs	10.9.39	20.11.39	72					
Restigouche	9.12.39	29.3.40	112	atlantic				
Restigouche	18.5.40	21.11.40	188	atlantic				
Ottawa	22-11-40	28.5.42	553	atlantic				
Ottawa	30.5.42	13.9.42	107	atlantic				
Discharged Dead								
To Date 13 Sept 42								

VERIFIED BY ......Blanchet............ VERIFIED BY ....

VERIFICATION FORM

CAMPAIGN STARS, DEFENCE MEDAL, WAR MEDAL, C.V.S.M. and CLASP.
NAVAL GENERAL SERVICE MEDAL (1915).

David ......RANK/RATING ...P. Ldg Smn TY......OFF.NO. V-5407...............ADDRESS ....

DAYS	AREA	QUALIFYING PERIODS IN DAYS FROM	TO	1939-45	ATLANTIC	DEFENCE	CLASP C.V.S.M.	1915 MEDAL
72								
112	atlantic							
188	atlantic							
553	atlantic							
107	atlantic							

STARS MEDALS	✓ 1 2	ELIGIBLE FOR AWARDS OF
1939-45	1	Star
ATLANTIC	1	Star
FRANCE G.		
AFRICA		
PACIFIC		
BURMA		
ITALY		
DEFENCE		
C.V.S.M.	2	@ Clasp
" CLASP		
WAR 1945	1	Medal
WAR 1915		

VERIFIED BY L. Calvert..

VERIFIED BY ....

DIR. OF PERSONNEL RECORDS.

CANADA

Department of National Defence

Naval Service

Ottawa, Canada.

IN REPLY PLEASE QUOTE

No. N.S.113-B-441

28 September, 1942.

233759

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:

NAME, RANK/RATING NO.	PLACE, DATE & CAUSE of DEATH	NEXT OF KIN
BROWN, Robert David Acting Leading Seaman (Ty), V.5407, R.C.N.V.R.	Missing, believed killed in action on the 13th of September, 1942. He was on board H.M.C.S. "OTTAWA".	Mother: Mrs. Clara Brown, 123 Selby St., WESTMOUNT, P.Q.

ALLOTMENTS IN FORCE

In favour of		Amount	Initials
Mrs. Clara Brown	123 Selby st. Westmount, P.Q.	$35.00	RL

WILL: No record.

ESTATES BRANCH OCT 1 1942 H.Q. OTTAWA NATIONAL DEFENCE

Yours truly,

R. A. Pennington

SECRETARY, NAVAL BOARD.
per LA

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

Six copies to be rendered to Naval Service Headquarters 113-B-441

53

REPORT OF THE DEATH OF AN OFFICER, MAN OR BOY

H.M.C.S. ....AVALON.................. at ......St. John's, Newfoundland...

Name(Cristian names in full).David..Robert BROWN.........................

Rank or Rating:....Leading Seaman (T) Official Number..V5407............
(If unknown, date of first entry)

Place of birth.Vancouver B.C............. Date of birth..5 January 1918

Occupation in Civil Life..Receiver........ Religion..United Church......

Number of years service in the Navy(Long Service R.C.N. or mobilixed service in the case of R.C.N. (Temp) Reserve ratings)

......3 years and 10 days Active Service..................................

Date of Death...13 September 1942.... Place of Death...At sea..........

Cause of Death......E N E M Y . . A C T I O N..Loss of H.M.C.S. "OTTAWA".

....

Nearest known relative or friend: Name Clara BROWN............. Relationship. Mother.......

Address.....123 Selby Street, Montreal, Westmount, Que...........

....

Date on which the above was informed by ship....Not known................

Date on which death was registered with local Officials...Not known......

In the case of Imperial Service men, whether Active Service, Pensioner or Reserve, date on which the prescribed return was rendered to the Registra 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)

Underraker employed.....- -
(If any)

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

[signature]

...Lieutenant Commander R.C.N.
COMMANDING OFFICER

The Secretary
Naval Board, Ottawa, Canada

........................19.....

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

MW

DISTRIBUTION OF SERVICE ESTATES

Naval - Military - Air Force

Name BROWN Robert D. No: V.5407

Surname Christian Names

A/Ldg/ Sea : H.M.C.S. "Ottawa" 13-9-42

Rank Unit Date of Death

AMOUNT

L. P. C. $ 102.91

Other Credits ________

Total 102.91

Date March 9, 1943.

SHARE	RELATIONSHIP	NAME AND ADDRESS	AMOUNT
¼	Father	Robert Brown, 123 Selby St., Westmount, P.Q. (next of kin entitled)	25.73
¼	Mother	Mrs. Clara L. Brown, (as above)	25.73
¼	Brother	V.5690, Sig. Brown, Gordon J., H.M.C.S. "Stadacona" R.C.N.V.R., Halifax, N.S.	25.73
¼	Sister	Maria A. Brown, 123 Selby St., Westmount, P.Q.	25.72

Distribution approved and authorized

AUDITED FOR PAYMENT

L.M. Firth

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

E.C. per [illegible]

for Chief Treasury Officer

(OVER)

AUTHORITY

H.Q. F.E. No.	DIV	EST	VOTE	PRI	BA OR HQ SUB	OBJ.	AMOUNT
9999			831	00	50	000	1 02 91

[illegible]D BY [signature]

EXAMINED BY Bertrand
FOR TREASURY OFFICER

TOTAL 1 02 91

MRR

DEPARTMENT OF NATIONAL DEFENCE

NAVY ARMY AIR FORCE

STATEMENT OF WAR SERVICE GRATUITY

4 NAVY

DECEASED MEMBER'S NAME Robert David (CHRISTIAN NAMES) BROWN (SURNAME) V-5407

REGISTER NO. 4287
FILE NO. NS.N5407
DATE 27 Jun/45
SERVICE NO. 5407
FINAL RANK OR RATING A/Ldg.Smn
DATE OF DISCHARGE 13 Sep/42

PAYEE Director of Estates for Service Estate of Robert D. Brown, NS.N-5407
ADDRESS 308 Sparks St., Ottawa, Ont.

DATE OF TERMINATION OF OVERSEAS SERVICE 13 Sep/42

	$ ¢
A. TOTAL QUALIFYING SERVICE — NO. OF DAYS 1100 / 30 EQUAL TO 36 COMPLETE PERIODS AT $7.50	270.00
B. QUALIFYING OVERSEAS SERVICE — NO. OF DAYS 960 LESS 20 INELIGIBLE DAYS, EQUAL TO 940 DAYS @ 25C. PER DAY	235.00
C. SUPPLEMENT FOR OVERSEAS SERVICE	

DAILY RATES AT DISCHARGE

PAY		$2.10
SUBSISTENCE OR LODGING AND PROVISION ALLOWANCE		$1.45
ADDITIONAL PAY	H.L.M.	$ .13
	1 B.	$ .05
	A/A.A.II	$ .20
DEPENDENTS' ALLOWANCE 1/30 OF $		$
TOTAL		$3.93 ×7 = $ 27.51
NO. OF DAYS 960 / 183		×$ 27.51

144.32

D. WAR SERVICE GRATUITY	649.32
E. DEDUCTIONS — OVERPAYMENT OF PAY AND ALLOWANCES $; DEPENDENTS' ALLOWANCE AND ASSIGNED PAY $	Nil
OTHER DEDUCTIONS $	
F. TOTAL AMOUNT PAYABLE	649.32

G. YOUR PORTION OF GRATUITY IS—

DEPENDENTS' ALLOWANCE IN ISSUE TO YOU $ _____ OF $ _____ =$ 649.32
TOTAL DEPENDENTS' ALLOWANCE IN ISSUE $

Voucher Cheque 1124 - 13/7-45

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	CHECKED BY	TREASURY CHECKED BY	TREASURY DATE
LJN	[illegible]	[illegible]	10/7/45

SERVICE REPRESENTATIVE
for Dir. Naval Pay Accounting.