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1939-45 Star, Atlantic Star,	793 - 3	5/10/1/9		

(THE REVERSE TO BE USED FOR ESTATE PURPOSES)

DVA 806

R.C.N.V.R. Oct.45 "LOUISBURG" (From Correction Sheet).

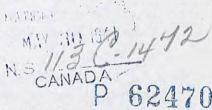
ME	DALS AND	MEMORIALS-DECEASED PERSONNEL	REG	ISTRATION No. DATE OF DESPATCH
(1)	MEDALS PERSON ENTITLED TO	Mrs. Lilian Charel - Sister		MEMORIAL BAR
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•	ADDRESS:	Montreal, Que.		EGN NO 881
1(2)	MEMORIAL CI	ROSS		A special state of the state of
	WIDOW			(2)
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N. V. 5 50M—1-41 (8973) N.S. 815-11-5

## ATTESTATION FORM

(HOSTILITIES FORM)



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203 Beaubien St, . I	E. Mont	real,P;Q			R.C.
DATE OF BIRTH		*PLACE OF BIR	тн	NAME AND	ADDRESS OF NEXT OF KIN
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DATE

(c) O time and the Contien
(5) On being enrolled as a member of the Cartier Division of Royal Canadian Naval Volunteer Reserve, I undertake to bind myself:—
(a) To serve from the date thereof for the duration of hostilities, being subject to the provisions of the Naval Service Act, and of the Regulations made in pursuance thereof for the government of the Royal Canadian Naval Volunteer Reserve, and to the customs and usages of His Majesty's Canadian Naval Service.
(b) To report for active service if called upon in time of war or emergency, and, if called into active service, to serve ashore or afloat as may be directed, according to where my services are required.
(c) To keep in good repair and condition the articles of uniform and any articles of outfit which may be issued to me and to return them to the nearest Divisional Commanding Officer or to Training Head-quarters 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.
(d) To undergo vaccination or re-vaccination, or inoculation, as considered necessary by the appropriate authorities.
Dated this 27th day of May 1941.
Dated this 27th day of May 1941.  Signature of applicant X Planef County
(C) CERTIFICATE OF ATTESTING 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 27 th
day of May 1941.
day of May 1941.  Lieutenant, RCNVR  Signature of and rank of Attesting Officer.
(D) OATH OF ALLEGIANCE
I,
according to law.  Signature of Applicant X Robert Curry
Witness Julieur 7 North
Date 27th May 1941 Rank Lieutenant, R.C.N.V.R.
The Oath of Allegiance may be administered by a Commissioned Officer of the Naval Service.
(E) CERTIFICATE OF ATTESTING OFFICER
Roland COURNOYER. 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 Cartier Division of the R.C.N.V.R

Lieutenant, RCNVR Attesting Officer.

R.C.N.V.R. Division 27th May 1941 (or other establishment). Cartier

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

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

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

### RECRUITING CENTRES

Applicants should apply to the nearest centre.

Nova Scotia—	humanin	
(a) Royal Canadian Naval Barrack	Shipping Master's Office or P.O. Box 992	
PRINCE EDWARD ISLAND-	Combact 1113	81
(a) Naval Barracks(b) The Registrar, R.C.N.R	Simms Buildingc/o N.S. Life Insurance Co., or P.O. Box 271	
NEW BRUNSWICK-	410	
Naval Barracks	222 Prince William St	Saint John, N.B.
Quebec-	acted to the	
(b) Naval Barracks(c) The Registrar, R.C.N.R	322 St. John St	Montreal, P.Q. Quebec, P.Q.
Ontario—		
<ul> <li>(b) Naval Barracks</li></ul>	72 Queen St	Kingston, OntToronto, OntHamilton, OntLondon, OntWindsor, Ont.
Manitoba—		
Naval Barracks	583 Ellice Ave	Winnipeg, Man.
Saskatchewan—		
	1st Ave. and 25th St	
Alberta—		
	9722-102nd Avenue	
British Columbia—		
(b) Royal Canadian Naval Barrack	408 Marine Bldgss	Esquimalt, B.C.

## NAVAL SERVICE

N. V. 3a

#### OFFER OF SERVICE (HOSTILITIES ONLY)

35m-3-41 (9824) N.S. 815-11-3a

To be completed in applicant's own handwriting and forwarded to nearest recruiting centre (see back). No papers, testimonials, etc., are to be attached. Completion of this form is in no way binding upon either the applicant or the Naval Service.

A. Personal History—		100	1 7-10-200
Name Z January	er 9.	Toland	16 ( 16 ( 16 ) W
Address203 Surname (in Block Letters)	which fit m	Christian Names	113
Number	Street Town or	City County	Province
	Place of birth		
Nationality Canadian Are you British by	birth?	or by Naturalizatio	ng. o. 4.19.4
Birth place of (a) Father			0.6411
Are you (a) Single(b) Married	(c) Widower	(d) No. of Childre	n?
Any physical defects (especially eyesight)?			
Height 5 - 8 Weight 165	Can you swim?	yes	
D D1		1	
Highest school grade passed successfully?	4 grade	Any Matricula	tion?
University: (a) Name(b) Year		A STATE OF THE PARTY OF THE PAR	
Technical courses taken			
Special studies			
Spoolar svacios			***************************************
Languages spoken	l Englis	1	***************************************
			·····
C. Sea Experience— Have you ever been employed at sea?	ive number of years an	d how employed?	
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Name and number of Mercantile Marine Certific	entos hold		•••••
Name and number of Mercanthe Marine Certific	ates nerd		
State last position held at sea (with dates)	~		
State employment since leaving sea			•••••
D. Occupation: What is your profession, trade or	occupation in civil life?.	Borker 3	yaken
Are you (a) Actively pursuing your profession	or trade on your own a	ccount?	
(b) Employed; if so, in what capacity	and under what employ	yer? Golen	Maken
Warden King Co			
General experience (with dates)	outh of		
Strates the 29th	November	<u> </u>	
			,
Have you ever served in any of His Majesty's F	orces? If so, which?	How long?	<i></i>
			-1
No. and Class of any Stationary Engineer's cert	ificates or other certific	ates of competency	70
How long would you need to settle up your priv	ate affairs?		
E. Any other Qualifications that might be of use	to the Naval Service (	yachting, cadet corps	, hobbies, etc.)
F. Branch Applying for: (a) As Officer	(b) As Rating (i.	e., in the ranks)	Caling
If you cannot be accepted as an Officer are you			
In what capacity do you wish to enrol?			************************
	nature Polang	0 P	0-0-1
Date of Application 27 may 1141 Sig	nature	Commence	

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EFENCE MEDAL, WAR MEDAL, C.V.S.M. and CLASP.
GENERAL SERVICE MEDAL (1915). QUALIFYING PERIODS IN DAYS ELIGIBLE 1939-45 ATLANTIC DEFENCE C.V.S.M. MEDAL STARS FROM TO FOR AWARDS OF MEDALS 1939-45 ATLANTIC FRANCE G. AFRICA PACIFIC BURMA ITALY DEFENCE C.V.S.M. " CLASP WAR 1945 WAR 1915 DIR. OF PERSONNEL RECORDS.

COURNOYER Roland. V.12- V4 453 FEB 1 1 1942 Opinion it lar. History Hischarge first noticed 6 months ago Exam c. S. O. M. according to history of linkouge advise treat before acceptance 12. Sulfathingole f.i.d. FEB 1 6.1942 Rt ear dry, FIT.



P 62473

# Certificate of Medical Examination of Officers, Men and Boys

NAVAL SERVICE OF CANADA

(R.C.N. OR RESERVE FORCES)

				(F	C.C.N. OF	RESERV	E FORC	ies)				M	AL INI	1041
Note—Tl	his Certifi	cate is to be	completed by the Exa	amining Medica	l Officer and	forwarded to	the Naval	Secretary, L	Departmen	t of Nati	onal Def	ence, O	CANAE	
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and I	belie	ve him	to be *{in a	t for His	Majes	ty's Ser	vice for	r the re	ason s	tated	belo	w.}H	le has si	gned
	ertific out if inapp		en below in * Delete one.	my pres	ence.									
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	ıt	Sare	General Development	Chest	ypes	revac- šmall	etc.	тліа,	ints		ring	etc.	(No. No. my),	, etc.
© Age (Years Months	Weight withour Clothes	Height with Bare Feet	Бетегориюн	G. V.	sion by— Snellen's T Colour Vis	ccinated or inated for S Pox Date)	ngs, Heart,	Abdomen, Hernia, etc.	Limbs and Joints	Ą	Ears and Hearing	Testes, Varicocele, etc.	outh, Teeth leficient and lefective, if of Nose, Tonsi	Anus, Hæmorrhoids,
(a)	(p)	(c)	(d)	(e)	(A)	р (g)	(v) Lungs,	(i)	i引 (k)	(1) Skin	(m)	(n)	(o)	(p)
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Six copies to be rendered to Naval Service Headquarters

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

H.M.C.S.
Name (Christian names in full)
Rank of Rating. Official No.
Place of Birth Date of Birth
Occupation in Civil Life Religion 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 Place of Death
Cause of Death
Nearest known Name Relationship
relative or friend.  Address
Date on which the above was informed by Ship was a law and the same an
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, accord-
ing to Nationality
Place of Burial 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 invalided
11 borne for discipline only, date D.S.G. of invanded
* Commanding Officer.
1844 Handa 1943
194
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 5M—6-41 (831) S. 815-9-1121

DATE

THE

File No. 113-C-1472 (NAVAL)

> REFER. CNP

> > DCNP DMNA DTNA PDG

> > > C&W

NPR.

SNPA

ixi February, 1943.

Dear Madam:

MDG I deeply regret that I must confirm theows telegram of the 11th of February, 1943, from DNE the Minister of National Defence for Naval Services informing you that your brother, Roland Cournoyer, Stoker First Class, Royal Canadian Naval Volunteer Reserve, Official Number V-4453, is missing, presumed killed in PIB action.

I regret that I have no further informat tion at present other than a report from Overseas that your brother 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 brother'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 brother has helped to maintain.

Yours sincerely,

DEPUTY SECRETARY, NAVAL BOARD.

Miss Lilianne Charel, 203 Beaubien St. East, Montreal, P.Q.

Darpatched by Sec. N. B. Date Time

(SGD) J. W. C. BARCLAY DEPUTY SECRETARY PERSONNEL

DRAFTED BY NPR PER: T.L.P N.S. 113-C-1472

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

# **NAVAL MESSAGE**

LILIAMME CHAREL. 203 BEAUBIEN ST. . M. . MONTREAL, P.Q.

From:

113-C-1472

CNS VCNS DOD DSD DATE DOFP CNP

THE MINISTER OF NATIONAL DEFENCE FOR NAVAL SERVICES DEEPLY REGRETS TO INFORM YOU THAT YOUR BROTHER, ROLAND COURNOYER, STOKER IST CLASS, ROYAL CANADIAN NAVAL VOLUNTEERR RESERVE, OFFICIAL NO. 9-4453, IS MISSING, PRESUMED KILLED IN ACTION. LETTER FOLLOWS.

111

(DELIVERY CONFIRMED)

OCCUPATIONAL HISTORY FORM

ORM IS TO BE COMPLETED FOR FACH MEMBER OF THE ARMED FORCES. THE INFORMATION SOUGHT IS FOR THE USE OF GENERAL ADVISORY COMMITTEE ON THE USE OF GENERAL ADVISORY COMMITTEE SET UP BY THE GOVERNMENT OF CANADA TO STUDY PLANS FOR ESTABLISHING IN HELP TO THE COMMITTEE. PLEASE READ CAREFULLY THE INSTRUCTIONS GIVEN ON THE INSIDE OF COVER BEFORE COMPLETING FORM Section A—GENERAL INFORMATION PLEASE LEAVE BLANK

- 1	1. (a) Print name in fullCOULDO	KER Roland	(b) F	Reg'l. No.	4453 BEA
2	2. (a) Arm of service(b) (3. (a) Date of birth	UnitCartior D	Lyasion (c) Place of regidence	(c) Rank <b>S.co</b> l	or 11
3	3. (a) Date of birth 1any	dependents?	at time of enlistment	Montreal	
	i. (a) I lace of emistment	ainac, sontpai	La(b) Date of enlis	tment 27th	May 1941.
5	D. (a) State and on	b) Were you attend			
6	finally leaving school	or college up to the	time of enlistment?	XXXXXX	
	(for instance—"4 years, Public School", "ty Matriculation", or "4 years technical course 7. If you attended a university, give name of	vo years, High School", "J in printing", etc.)	unior 7th Grad	e Commere	el School
	Illiversity and standing or dogge account				
	enter upon a trade for what	MATERIAL NAME AND ADDRESS OF THE PARTY OF TH	(c) Did you fi	nish it, how long	
9	do you speak fluently?	molfah	(b) What languages	id you serve at it?	XXXX
1	Section C—FMPI	OYMENT CONDITION	ON AT TIME OF	TONCI 6	English
10	). (a) State whether you were WORKING or NOT WORK-			ENLISTMENT	
	ING at time of enlistment. (Enter here only "Work-	(b) A	nt time of en-		14
	ing" or "Not Working",	trad		4 - 45	
	lars are asked for below)		you a member?	XXXXXX	
- inter	Section D—PARTICULARS CON				TIME
		OF ENLISTMENT			TIVIL
11.	QUESTIONS 11 TO 17 REFER ONL  Had you ever been employed fairly regularly	since leaving school?	"NOT WORKING" IN QUES	ΓΙΟΝ 10 (a)	*
12.	(a) If answer to 11 be "Yes",	(b) State	how long you		4
	state exact trade or occupation at which you actually worked	had trade	worked at this or occupation	XXXX	
13.	. If answer to 11 be "No", state exact trade or	occupation for which you	feel qualified	EXXX	
14.	<ul> <li>If you had been employed after leaving scho when you last worked fairly regularly before</li> </ul>	24 29 36 3			
	employer, if any: Name	IN MINIST	Address		**
16.	Nature of employer's business (for instance	"farmer" or "huilding	Audross	······································	##
	Contractor or boot factory or "iron foun	dry", or "retail store", etc	30300000		
	(a) If your last employment was in a business of your own state	dry", or "retail store", etc		(h) Date of die	
	(a) If your last employment was in a business of your own, state nature and address of business	dry", or "retail store", etc		(b) Date of dis- continuing it	EXXX
	(a) If your last employment was in a business of your own state	NCERNING THOSE	WHO WERE EM	(b) Date of dis- continuing it	EXEX
17.	(a) If your last employment was in a business of your own, state nature and address of business	NCERNING THOSE OF ENLISTMENT	WHO WERE EM	(b) Date of discontinuing it PLOYED AT	TIME
17.	Section E—PARTICULARS COI	NCERNING THOSE OF ENLISTMENT ANSWER "WORKING" IN OU	WHO WERE EM	(b) Date of discontinuing it  PLOYED AT  AD THESE QUESTIO	TIME  NS AND REPLY
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