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N.S. 815-11-5

113-L-2049



CANADA

ATTESTATION FORM (HOSTILITIES FORM)

FOR MEN OF THE ROYAL CANADIAN NAVAL VOLUNTEER RESERVE

SURNAME LaBARRE OFFICIAL NO. VH3738
CHRISTIAN NAMES Joseph Adrien MARRIED, SINGLE OR WIDOWER Married.

PERMANENT ADDRESS Smooth Rock Falls, Ontario. RELIGION Roman Catholic.

DATE OF BIRTH 30th June, 1917. *PLACE OF BIRTH
Town Montmorency Village NAME AND ADDRESS OF NEXT OF KIN
County Quebec. Wife:
Province Quebec. Mrs. J.A. LaBarre,
Smooth Rock Falls,
Ontario.

*If not the son of natural born British parents, particulars to be given at foot of next page

(A) PERSONAL DESCRIPTION ON ENROLMENT

| HEIGHT | CHEST MEASUREMENT | HAIR | EYES | COMPLEXION | WOUNDS, SCARS, MARKS |
|---------------------|--------------------|--------------|--------------|---------------|----------------------------|
| Feet <u>5</u> | Inflated <u>35</u> | <u>Brown</u> | <u>Brown</u> | <u>Medium</u> | <u>Scar on Right Side.</u> |
| Inches <u>5 1/2</u> | Deflated <u>31</u> | | | | |
| | Mean <u>32</u> | | | | |

EDUCATIONAL STANDING Third Year High School. TRADE OR CALLING AND IN WHOSE EMPLOY
Time Keeper:
Abitibi Power & Paper Co.,
Smooth Rock Falls, Ontario.

DATE OF ENROLMENT 25th July, 1942. RATING FOR WHICH ENROLLED Stoker 11 R.C.N.V.R. DIVISION, OR OTHER ESTABLISHMENT, AT WHICH ENROLLED H.M.C.S. "BYTOWN".

(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 Not Applicable. 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 for or discharged 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.

| Personnel Records Division | |
|----------------------------|-------------------------------------|
| 1. Noted in Records . . . | <input checked="" type="checkbox"/> |
| 2. Index Card . . . | <input checked="" type="checkbox"/> |
| 3. Non-Sub. Card . . . | <input checked="" type="checkbox"/> |
| 4. Statistical Card . . . | <input checked="" type="checkbox"/> |
| 5. Roneo Strip . . . | <input checked="" type="checkbox"/> |
| 6. Pension Card . . . | <input type="checkbox"/> |
| 7. | <input type="checkbox"/> |
| 8. | <input type="checkbox"/> |
| DATE | <u>11.8.42</u> |

(5) On being enrolled as a member of the.....O T T A W A.....Division of the 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 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.

(d) To undergo vaccination or re-vaccination, or inoculation, as considered necessary by the appropriate authorities.

Dated this.....25th.....day of.....July.....

Signature of applicant.....Adrien J. LaBarre..... X

(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.....25th.....day of.....July.....

.....W. W. Wainman - Wood.....
Signature of and rank of Attesting Officer.

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

(D) OATH OF ALLEGIANCE

I, Joseph Adrien LaBarre.....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.....Adrien J. LaBarre..... X

Witness.....W. W. Wainman - Wood.....

Date.....25th July, 1942..... Rank.....Sub-Lieut., 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

.....Joseph Adrien LaBarre.....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.....OTTAWA.....Division of the R.C.N.V.R. or in the appropriate official documents.

.....W. W. Wainman - Wood.....
Attesting Officer.

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

R.C.N.V.R. Division.....H.M.C.S. "BYTOWN".....
(or other establishment)

.....25th July.....1942.....

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.

This is to acknowledge that I have not been induced to enter the.....engine room.....Branch of the Naval Service by the prospect of being transferred at some future date to another Branch.

.....Adrien J. LaBarre..... X
Signature

CERTIFICATE of the SERVICE of

Joseph Adrien LaBarre

in the Royal Canadian Naval Volunteer Reserve

| | | |
|-----------------------|---------------------|-----------------------------------|
| Training Headquarters | R.C.N.V.R. Division | Official Number... <i>V-43738</i> |
| <i>Halifax N.S.</i> | <i>Ottawa Ont.</i> | " |
| | | " |

Date of Birth... *30 June 1917*

Place of Birth... *Montmorency Village, Que.*

Place of Residence... *Smith Rock Falls, Ont.*

Trade brought up to... *Time Keeper*

Religion... *Roman Catholic*

Can Swim:—P.P.T. Date..... 19..... Signature..... Rank.....

P.S.T. Date..... 19..... Signature..... Rank.....

Name and Address of Nearest Relative or Friend (in pencil)
Wife: Mrs. J. A. LaBarre, 478 McIntyre St East, North Bay Ont.



| PARTICULARS OF SERVICE | | | | MEDALS, DECORATIONS, etc. | | |
|-----------------------------|-----------------------------------|------------------------|-------------------------------------|---------------------------|--------------|----------------------|
| Date of Actual Volunteering | Date of Enrolment or re-enrolment | Period Volunteered for | Rating on Enrolment or Re-enrolment | Date of | | Nature of Decoration |
| | | | | Award | Presentation | |
| | <i>25 July 1942</i> | <i>Duration</i> | <i>Stoker IV</i> | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |

| PERSONAL DESCRIPTION | | | | | | | | |
|-----------------------------------|----------|--------------|--------------|------------|--------------|--------------|---------------|---------------------------------------|
| | Height | | Chest (mean) | Weight | Hair | Eyes | Complexion | MARKS, WOUNDS, SCARS |
| | Feet | Inches | | | | | | |
| On Entry | <i>5</i> | <i>5 1/2</i> | <i>32</i> | <i>133</i> | <i>Brown</i> | <i>Brown</i> | <i>Medium</i> | <i>Scar on right side of abdomen.</i> |
| On re-enrolment—6 years' Service | | | | | | | | |
| On re-enrolment—12 years' Service | | | | | | | | |
| Further Description if necessary | | | | | | | | |

| TRANSFER BETWEEN DIVISIONS | | | TRANSFER—LISTS A AND B | | |
|----------------------------|----|------|------------------------|------|-----------|
| From | To | Date | List | Date | Authority |
| | | | | | |
| | | | | | |
| | | | | | |

V43738

OFFICIAL NUMBER

FILE NUMBER

113-L-2049

OFFICIAL NUMBER V43738

NAME LaBARRE (Surname) Joseph Adrian (Given Names) DATE OF BIRTH 30th June, 1917
 PLACE OF BIRTH Montmorency Village, Quebec OCCUPATION Time Keeper
 RELIGION Roman Catholic EDUCATION 3rd yr. High School
 RESIDENCE AT TIME OF ENLISTMENT: Street and No. _____ Town Smooth Rock Falls Province, etc. Ontario

| ENGAGEMENTS | | | | DESCRIPTION | | | | | PREVIOUS SERVICE | | | |
|-------------------|-------|------|--------|-------------|-------|-------|------------|--------------------|------------------|----------------|-------|----|
| Date (in figures) | | | Period | Height | Hair | Eyes | Complexion | Marks or Scars | Served in | Rank or Rating | Dates | |
| Day | Month | Year | | | | | | | | | From | To |
| 25 | 7 | 42 | H.O. | 5' 5 1/2" | Brown | Brown | Medium | Scar on right side | | | | |

NEXT OF KIN RELATIONSHIP (in pencil) Wife NAME (in pencil) Mrs. Carmene LaBarre
 ADDRESS (in pencil): Street and No. 478 E. St. E. Town North Bay Province, etc. Ontario

| MEDALS, CLASPS, HURT CERTIFICATES, PRIZE MONEY | | | | EXAMINATIONS, CERTIFICATES, ETC. | | | | | | | |
|--|-------|------|-------------|----------------------------------|-------|------|--------------------------------|-------------------|-------|------|-------------|
| Date (in figures) | | | Particulars | Date (in figures) | | | Particulars | Date (in figures) | | | PARTICULARS |
| Day | Month | Year | | Day | Month | Year | | Day | Month | Year | |
| | | | | 4 | 5 | 43 | Passed E.T.I. R.C.N. | | | | |
| | | | | 17 | 5 | 43 | Qual. Anti-Gas 1 dy 219A#42023 | | | | |

| BADGES, G.C. OR G.S. | | | | BRIEF PARTICULARS OF WARRANT OR C.M. PUNISHMENTS AND C.P. CHARGES | | | | | | | |
|----------------------|-------|------|------------------------------|---|-----------------------|---------|-------------------|-------|------|------------------------------|------------|
| Date (in figures) | | | 1st, 2nd or 3rd G.C. or G.S. | Granted Deprived Restored | SHIP OR ESTABLISHMENT | Wt. No. | Date (in figures) | | | BRIEF PARTICULARS OF OFFENCE | PUNISHMENT |
| Day | Month | Year | | | | | Day | Month | Year | | |

| Date (in figures) | | | DAYS FORFEITED | | | | | | O.H.F. Received. |
|-------------------|-------|------|----------------|-------|-------|----------|----------|----------------|------------------|
| Day | Month | Year | Prison | Det'n | Cells | C. Power | W. Trial | In diff. Char. | |

FILM
NO. WAR 5736-5
DATE

SECOND CLASS FOR CONDUCT

From

To



V43738

OFFICIAL NUMBER

NAME LaBARRE
(Surname)

Joseph Adrian
(Given Names)

OFFICIAL NUMBER

V43738

P.I.B. 1

| 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 |
| H.M.C.S. Bytown | Stoker 11 | 25 | 7 | 42 | Ottawa Div. Str. | V.G. | Sat. | 31 | 12 | 42 | | | | | | | |
| " | " | 5 | 2 | 43 | Active Service D.L. 5.2.43. | V.G. | Sat. | 31 | 12 | 43 | | | | | | | |
| " York | " | 16 | 2 | 43 | DL 16.2.43 (York) | V.G. | Sat. | 24 | 11 | 44 | | | | | | | |
| " Hunter | " | 29 | 3 | 43 | DL.293-43. | | | | | | | | | | | | |
| " Cornwallis | " | 13 | 4 | 43 | D.L. 12-4-43 | | | | | | | | | | | | |
| " Stadacona | " | 28 | 5 | 43 | DRD H-1597 | | | | | | | | | | | | |
| " Shawinigan | " | 24 | 7 | 43 | D.R.D, H 2150 | | | | | | | | | | | | |
| " | Sto. 1 | 22 | 11 | 43 | Rated 249A #A5946 | | | | | | | | | | | | |
| Avalon | " | 21 | 12 | 43 | D.R.D. #2237 | | | | | | | | | | | | |
| Stadacona | " | 22 | 12 | 43 | D.R.D. #2240 | | | | | | | | | | | | |
| Shawinigan | " | 11 | 2 | 44 | D.R.D. S/69 P/6 | | | | | | | | | | | | |
| DISCHARGED | " | 24 | 11 | 44 | "Missing" per Casualty List (Presumed Dead) | | | | | | | | | | | | |

GENERAL REMARKS

Canadian Memorial Cross granted to:
WIFE: Mrs. Carmen E. La Barre,
478 McIntyre St., E.,
NORTH BAY, Ont., to date
6th April, '45.

| DATE OF BIRTH | | | PLACE | CIVIL OCCU. | | RELI-ED | PERM. RESIDENCE | | | PREV. ENL. | RANK OR RATE ON ENLISTMENT | | | |
|---------------|----|-----|-----------------|-------------|-----|---------|-----------------|------|------|------------|----------------------------|----|------|-------------|
| DY | MO | YR. | BIRTH | MAIN | SUB | GION | P. | CTV. | TOWN | SERV. | DIV. | A | BR | RANK |
| 30 | 6 | 17 | 12 | 830 | 0 | 10 | 4 | 00 | 00 | 0 | 03 | 0 | | 1594 |
| ENLIST. DATE | | | ACT. SERV. DATE | | | STR. | ACT. SERV. DATE | | | SHIP CN | RANK OR RATE | | | |
| DY | MO | YR. | DY | MO | YR. | CAT. | DY | MO | YR. | ESTAB. | A | BR | RANK | |
| 25 | 07 | 42 | 07 | 02 | 43 | | | | | | | | | 2550 015 94 |
| SENIORITY | | | STR. | NON-SUB | | M | | | | CODED | CHECKED | | | |
| DY | MO | YR. | CAT. | A | B | ST. | | | | | | | | |
| 22 | 11 | 43 | B | 00 | 00 | | | | | S.A.P. | | | | |

VERIFICATION FORM

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

RANK/RATING *Sto 1/c* OFF.NO. *V-43738* ADDRESS

| AREA | QUALIFYING PERIODS IN DAYS | | | | | | STARS MEDALS | ✓ 1 2 | ELIGIBLE FOR AWARDS OF |
|------------|----------------------------|----|---------|----------|---------|----------------|--------------|-------------|------------------------|
| | FROM | TO | 1939-45 | ATLANTIC | DEFENCE | CLASP C.V.S.M. | | | |
| | | | | | | | 1939-45 | 1 | <i>Star</i> |
| <i>Sto</i> | | | | | | | ATLANTIC | 1 | <i>Star</i> |
| <i>Sto</i> | | | | | | | FRANCE G. | | |
| | | | | | | | AFRICA | | |
| | | | | | | | PACIFIC | | |
| | | | | | | | BURMA | | |
| | | | | | | | ITALY | | |
| | | | | | | | DEFENCE | | |
| | | | | | | | C.V.S.M. | 2 | <i>+ clasp</i> |
| | | | | | | | " CLASP | | |
| | | | | | | | WAR 1945 | 1 | <i>Medal</i> |
| | | | | | | | WAR 1915 | | |

VERIFIED BY *JAA*
VR

VERIFIED BY DIR. OF PERSONNEL RECORDS.

D

SDRWS 214145 ID 425109

45

* 5134

Four copies to be rendered to Naval Service Headquarters

REPORT OF THE DEATH OF AN OFFICER, MAN OR BOY

H.M.C.S. "SHAWINIGAN" at Sea

Name LA BARRE, Joseph Andrien
(Christian names in full)

Rank of Rating Stoker 1st Class Official No. V43738 R.C.N.V.R.
(If unknown, date of first entry)

Place of Birth Montmorency Village, Quebec Date of Birth 30th June, 1917

Occupation in Civil Life Timekeeper Religion Roman Catholic

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) 5th February, 1943 - 24th November, 1944

Date of Death 24th November, 1944 Place of Death At sea

Cause of Death Enemy action -- lost at sea
(If due to accident, violence, or enemy action, particulars to be stated briefly)

Nearest known relative or friend { Name Mrs. Carman La Barre Relationship Wife
Address 478 McIntyre St., E., North Bay, Ontario

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 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

Noted
D. N. P. A.
13.4.45
E. J.

[Signature]
Commanding Officer,

11th April 1945

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.

29 November, 1944.

Dear Mrs. LaBarre:

It is with deepest regret that I must confirm the telegram of the 29th of November, 1944, from the Minister of National Defence for Naval Services, informing you that your husband Joseph Adrian LaBarre, Stoker First Class, Official Number V.43738, Royal Canadian Naval Volunteer Reserve, is missing at sea.




The only information that can be given at this time is that your husband is missing at sea when the ship in which he was serving was lost. Please be assured, however, that as soon as further particulars can be released, you will be informed.

It is regretted that slight hope is held for your husband's survival. When it is considered, beyond all reasonable doubt, that no further hope exists and should no information be received to the contrary, an official presumption of death will be made by the Canadian Naval Authorities.

It is requested that, for security reasons, you regard the name of the ship in which your husband was serving, as confidential until such time as an official announcement is made.

Please accept the sincere sympathy of the Department in your anxiety.

Yours sincerely,


SECRETARY, NAVAL BOARD.



Mrs. Carmen E. LaBarre,
478 McIntyre St., East,
North Bay, Ontario.

R.C.N.V.R. "SHAWINIGAN" Nov.45

MEDALS AND MEMORIALS—DECEASED PERSONNEL

REGISTRATION No. DATE OF DESPATCH

MEMORIAL B K

(1) MEDALS

PERSON

ENTITLED TO Mrs. Carmen E. LaBarre - Widow

ADDRESS: ~~196 Parliament St.,~~ 722 Laurier Ave.
Toronto, Ontario. NORTH BAY,

DATE DESP

(1)

REGN. NO. 2008

15-11-48

(2) MEMORIAL CROSS

WIDOW

Mrs. C. LaBarre

ADDRESS: 478 McIntyre Street East
NORTH BAY, Ontario

(2) 6 April 1944

(3) MEMORIAL CROSS

MOTHER

DECEASED

ADDRESS:

(3)

P. DECEASED 22 October 1940

DEPARTMENT OF VETERANS AFFAIRS

AWARDS NAVY

WAR SERVICE RECORDS
D.D.

| | | | | |
|----------------------------|-----------------|----------|-------------------|---------------|
| LABARRE Joseph Adrian | | V-43738 | Sto.1/C. | FILE No. |
| SURNAME (IN BLOCK LETTERS) | CHRISTIAN NAMES | REG. No. | RANK ON DISCHARGE | C.A.S.F. UNIT |

WAR SERVICE

BADGE

(CLASS)

No.

DATE DESPATCHED:

ADDRESS:

| CAMPAIGN MEDALS | REGISTRATION NUMBER AND DATE DESPATCHED |
|-------------------|---|
| 1939-45 Star, | 616 6/1/50 |
| Atlantic Star, | |
| C.V.S.M. & Clasp, | |
| War Medal. | |
| | |
| | |
| | |

(THE REVERSE TO BE USED FOR ESTATE PURPOSES)