

**V7757**  
**MACKENZIE**

CHARLES

ALEXA

113-M-942

12

# 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 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

PLEASE LEAVE BLANK

- 1. (a) Print name in full MCKENZIE CHRIS H. (b) Reg'l. No. 47757
- 2. (a) Arm of service RCNVR (b) Unit T-10 (c) Rank PL
- 3. (a) Date of birth 20/12/1915 (b) Have you any dependents? NO (c) Place of residence at time of enlistment Branch Out 102 1145
- 4. (a) Place of enlistment T-10 (b) Date of enlistment 10/2/1945

## Section B—EDUCATION AND TRAINING

- 5. (a) State age on finally leaving school 20 (b) Were you attending school or college up to the time of enlistment? —
- 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.) 5 years high school
- 7. If you attended a university, give name of university and standing or degree secured —
- 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? English (b) What languages do you read well? 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) YES (b) At time of enlistment of what trade union or professional society were you a member? NO

## 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 Goodwin Tire & Rubber Co Address NEW BRUNSWICK
- 19. Nature of employer's business (for instance, "farmer", or "building contractor", or "boot factory", or "iron foundry", or "retail store", etc.) Manufacturer
- 20. (a) Your specific occupation Asst. paymaster (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? NO (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? — (b) Do you feel competent to operate a farm? — (c) If so, in what kind of farming? —
- 25. (a) Were you born on a farm? — (b) How many years' actual farming experience have you had? — (c) In what provinces did you have experience? —

## Section G—MISCELLANEOUS

- 26. Have you made any arrangements other than indicated above, for re-establishment in civil life after discharge? No
- 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.) —
- 28. State any employment preference or ambition you may have, other than indicated elsewhere in this form —

DATE April 15 1945

SIGNATURE Chris H. McKenzie



Copy to  
DWD  
VMS  
ES

MAY 30 1941

MEMORANDUM FOR

P. 64

Mrs. Jessie G. MacKenzie,  
19 - 24th Street,  
Long Branch, Ontario.

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. 113-M-942 ED. 70

DEPARTMENT OF NATIONAL DEFENCE  
OTTAWA, ONT.

October 27th 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

MackENZIE, Charles Alexander, Ldg. Smn.

No. V. 7757, H.M.C.S. "Ottawa", 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) Lt.-Cdr. RCNVR.  
FOR (L.M. FIRTH) LT. COLONEL  
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.....	Charles A. Mackenzie.	49.	19-24 <sup>th</sup> Street. Long Branch. Ontario.
4	Mother of the Deceased.....	Jessie G. Mackenzie.	49.	19-24 <sup>th</sup> Street. Long Branch. Ontario.
5	Brothers of the Deceased	Full Blood		
		Half Blood	Radleigh A. Mackenzie.	15.
6	Sisters of the Deceased	Full Blood		
		Half Blood	Mrs. E. Gould. (Mrs. Mackenzie)	22
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?	Charles, Alexander, Leonard MacKenzie.
11	Give the month and year of his birth.	24 <sup>th</sup> September. 1915.
12	Where and when were his parents married?	St Mary's Anglican Church Salford. Essex. England. 26 <sup>th</sup> November. 1917.
13	If deceased was married, state place and date of marriage.	
14	Did he leave a Will? If so, a copy should be attached hereto.	No.
15	Did he leave a bank account? If so, give full particulars.	Yes. 7 dollars. 90. cents. ✓ Dominion Bank. New Toronto.
16	Is there any other estate which will necessitate application being made for Probate of the Will or Letters of Administration of the estate?	
17	State your own postal address in full.	19-24 <sup>th</sup> Street. Long Branch. Ontario.

PARTICULARS OF DOMICILE

18	Where was deceased born?	at Shortbridge near Wakefield Sussex. England.
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.	6 months in Sussex. England. Resided in Long Branch. Ont. until his enlistment in 1940.
20	What was the nature of his employment?	clerk, in the Goodyear Tyre & Rubber Co. New Toronto. Ont.
21	Did he own the premises in which he lived? If so, where?	
22	Did he ever state verbally, or in writing, where he intended to make his permanent home?	Canada.

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.)	

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, Local Magistrate, Commissioner or Notary Public.

Jessie G. Mackenzie .....

{Signature of Informant

CERTIFICATE

I hereby certify that, to the best of my knowledge and belief Jessie G. Mackenzie

\*See above ..... { 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 Toronto this 9th day of November 19 42

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

A.P. Carter .....

Qualification Clergyman .....

Address 33 Wells St., Toronto, Ontario .....

NOTE.—Before granting the above Certificate, care should be taken to see that the Informant gives particulars concerning the death of any Relative stated by him or her to have died, and that the full name and address and age of each surviving Relative enquired after is stated in its proper place in the Statement opposite.

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

Personnel Rec. Co. Division.

1. Noted in Records *L.K.*  
 2. Index Card *L.K.*  
 3. Non-Su. Card *L.K.*  
 4. Statistical Card *L.K.*  
 5. Record Strip *L.K.*  
 6. Pension Card  
 7.  
 8.  
 DATE



N. V. 5  
 5M-10-39 (2305)  
 N.S. 815-11-5

REFERENCE  
 FEB - 9 1940  
 113-70948

**ATTESTATION FORM**

FOR MEN OF THE ROYAL CANADIAN NAVAL VOLUNTEER RESERVE

SURNAME *MacKENZIE* OFFICIAL NO. *2757*

CHRISTIAN NAMES *CHARLES Alexander* MARRIED, SINGLE or WIDOWER *SINGLE*

PERMANENT ADDRESS *19 - 24<sup>th</sup> St. Long Branch* RELIGION *Anglican*

DATE OF BIRTH *SEP 27, 1918* PLACE OF BIRTH *SHORTBRIDGE SUSSEX ENGLAND* NAME AND ADDRESS OF NEXT OF KIN *Charles A MacKenzie 19 - 24<sup>th</sup> St Long Branch Ont*

**PERSONAL DESCRIPTION ON ENROLMENT**

HEIGHT	CHEST MEASUREMENT	HAIR	EYES	COM- PLEXION	WOUNDS, SCARS, MARKS
Feet..... <i>5</i>	Inflated..... <i>36</i>	<i>BROWN</i>	<i>GREEN</i>	<i>FAIR</i>	<i>NONE</i>
Inches..... <i>7</i>	Deflated..... <i>32</i>				
Mean.....	<i>33</i>				

DATE OF ENROLMENT	RATING ENROLLING FOR	TRADE OR CALLING AND IN WHOSE EMPLOY
<i>FEB 8, 1940</i>	<i>ORDINARY SEAMAN</i>	<i>TIMEKEEPER GOODYEAR TIRE &amp; RUBBER Co</i>

**(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
<i>✓</i>	<i>✓</i>	<i>✓</i>	<i>✓</i>

- (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.



*Toronto*

(5) On being enrolled as a member of the.....*Toronto*.....Division  
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 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.

Dated this *8<sup>th</sup>* day of *February* 19*40*

Signature of applicant..... *CA MacKenzie*.....

(C) CERTIFICATE OF DIVISIONAL 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 *8<sup>th</sup>* day of *February* 19*40*

.....*J. B. Gensley*.....  
Signature of Commanding Officer.

(D) OATH OF ALLEGIANCE

I, *CHARLES MacKENZIE*.....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..... *CA MacKenzie*.....

Witness..... *J. B. Gensley*.....

Date..... *Feb 8, 1940*..... Rank..... *Sub-lieutenant*.....

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

(E) CERTIFICATE OF DIVISIONAL COMMANDING OFFICER

*CHARLES MacKENZIE*.....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 *Toronto*.....Division of the R.C.N.V.R.

.....*W. D. Wheeler*.....  
Commanding Officer.

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.



CANADA

Can. B. 207  
20M-11-39 (3063)  
N.S. 815-2-207  
FEB -11 1940  
113-71942

# CERTIFICATE OF MEDICAL EXAMINATION OF OFFICERS, MEN AND BOYS, NAVAL SERVICE OF CANADA

(R.C.N. OR RESERVE FORCES)

P4652

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 MacKenzie, Charles }  
candidate for entry as Ordinary Seaman }  
and I believe him to be \* in all respects fit for His Majesty's Service. } He has signed  
unfit for His Majesty's Service, for the reason stated below. } the Certificate given below in my presence.

Dated at Toronto the 8th of February 1940

A. G. Murray  
Examining Medical Officer  
(Rank) Lieut. Rouse

\*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.	(k) Limbs and Joints	(l) Skin	(m) Ears and Hearing	(n) Testes, Ventricles, etc.	(o) Mouth, Teeth (No. defective and No. defective, if any), Nose, Tonsils, etc.	(p) Anus, Hæmorrhoids, etc.
<u>21 yrs. 5 months</u>	<u>116</u>	<u>5 6 1/4</u>	<u>Good</u>	(a) maximum <u>36</u> (b) minimum <u>32</u> (c) mean <u>33</u>	right eye <u>20/20</u> left eye <u>20/20</u> colour vision <u>Nor.</u>	<u>Infancy</u>	<u>Normal</u>	<u>Normal</u>	<u>Normal</u>	<u>Slight acne</u>	<u>Normal</u>	<u>Normal</u>	<u>Deep normal</u> <u>Teeth normal</u> <u>Nose normal</u>	<u>Normal</u>

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

### 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 as may be authorized.

Ch MacKenzie  
Signature of Candidate

When a Candidate is subject to a defect or disability, the following Certificate is to be filled up

This Candidate is the subject of.....

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

\*Delete one

.....  
Examining Medical Officer  
(Rank).....

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

DECEASED 13 September 1942

## AWARDS NAVY

MAC  LIE

Charles Alexander V-7757

.P.O.

FILE No.

SURNAME (IN BLOCK LETTERS)

CHRISTIAN NAMES

REG. No.

RANK ON  
DISCHARGE

C.A.S.F. UNIT

WAR SERVICEBADGE

(CLASS)

No.

Nil

DATE DESPATCHED:

ADDRESS:

CAMPAIGN MEDALS

REGISTRATION NUMBER AND DATE DESPATCHED

1939-45 Star

Atlantic Star

C.V.S.M. &amp; Clasp

War Medal

7798

(THE REVERSE TO BE USED FOR ESTATE PURPOSES)

MEDALS AND MEMORIALS—DECEASED PERSONNEL  
HMCS "OTTAWA" Apr. /43. R.C.N.V.R.

REGISTRATION No. DATE OF DESPATCH

(1) MEDALS  
PERSON

ENTITLED TO Mr. Charles Z. MacKenzie - Father

ADDRESS: 19 - 24th Street,  
Long Branch, Ontario.

(2) MEMORIAL CROSS

WIDOW

ADDRESS:

(3) MEMORIAL CROSS

MOTHER Mrs. J. G. MacKenzie

ADDRESS: 19 - 24th. Street  
LONG BRANCH, Ontario

MEMORIAL FOR

DATE DESP

REGN. NO. 1842

(2)

(3) 25 November 1942

# QUESTIONNAIRE FOR CANDIDATES

FOR ENTRY IN THE  
ROYAL CANADIAN NAVAL VOLUNTEER RESERVE

REFERENCE  
FEB -9 1940  
113-71942

Name (in full)..... CHARLES MACKENZIE P4653

Date and place of birth..... SEPT 27 1918 2  
(Birth certificate, declaration by parents or affidavit as to date of birth must be attached)

Permanent place of residence..... 19-24TH ST LONG BRANCH

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?..... ORDINARY SEAMAN  
~~VICTUALLING ASSISTANT~~  
(See standards of qualifications in attached pamphlet)

Present occupation or trade..... TIMEKEEPER GOODYEAR TIRE CO  
(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..... NO

.....

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' 8"

What is your chest measurement (not inflated)?..... 33"

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.

..... CA Mackenzie ..... Signature  
..... FEB 5, 1940 ..... Date  
..... 19-24TH ST LONG BRANCH ..... Address

..... [Signature] .....  
(Witness to Signature) Sw - Kent

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..... SEP 27. 1918

Signed..... [Signature] .....  
..... [Signature] ..... Commanding Officer

V7757

OFFICIAL NUMBER

NAME MAC KENZIE  
(Surname)

Charles  
(Given Names)

OFFICIAL NUMBER V7757

Ship 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. Toronto	Ord. Smn.	8	2	40		V.G.	Supr.	31	12	40	L.R. II	26	3	41			
Duty Div. Hdqtrs.	" "	13	5	40		V.G.	Supr.	31	12	41	L.R. I	1	6	42			
Stadacona	" "	1	6	40		V.G.		13	9	42							
Moose	" "	6	9	40	Rated A.B. 10-2-41												
Stadacona	Able Smn.	1	3	41													
Annapolis	A.B.	13	5	41													
Stadacona	" "	17	8	41													
Ottawa	" "	18	8	41													
"	A/Ldg.Smn. (ty)	1	12	41	memo 12-12-41												
Stadacona	" "	28	4	42	(187182)												
Cornwallis	" "	1	5	42	(187182)												
Stadacona	" "	3	6	42	DRD												
Ottawa	" "	2	7	42	DRD Rated A/P.O. 1-9-42												
<b>DISSCHARGED</b>	" "	13	9	42	<b>Missing Believed Killed (Ottawa Casualty List)</b>												

GENERAL REMARKS

Memorial Cross sent to  
Mother: Mrs. Jessie G. MacKenzie  
19-24th St.  
Long Branch, Ont.

DATE OF BIRTH			PLACE		CIVIL OCCU		RELE ED		PERM RESIDENCE			PREV ENL		RANK OR RATE		
DY	MO	YR	BIRTH	MAIN	SUB	GION	P	CTY	TOWN	SERV	DIV	A	BR	RANK		
27	9	18	22	830	0	30	X	1	56	05	0	23	0	1845		
ENLIST. DATE			ACT. SERV. DATE			STR.		ACT SERV. DATE			SHIP OR		RANK OR RATE			
DY	MO	YR	DY	MO	YR	CAT	DY	MO	YR	ESTAB	A	BR	RANK			
08	02	40	13	05	40					03	50	1	0843			
SENIORITY			STR.		NON-SUB		M		CODED			CHECKED				
DY	MO	YR	CAT	A	B	ST	ER			35						
01	12	41	09	06	00	20	13-07-42			41						

V7757

OFFICIAL NUMBER

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113-M-942

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NAME MAC KENZIE Charles DATE OF BIRTH 27 Sept 1918

(Surname)

(Given Names)

PLACE OF BIRTH Shorthridge Sussex England OCCUPATION TimekeeperRELIGION Anglican EDUCATIONRESIDENCE AT TIME OF ENLISTMENT: Street and No. 19-24th St. Town Long Branch Province, etc. Ont.

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
8	2	40	H.O.	5'7"	Brown	Green	Fair	None				

NEXT OF KIN RELATIONSHIP (in pencil) Mother NAME (in pencil) Miss Jessie G. T. MacKenzieADDRESS (in pencil): Street and No. 19 Twenty-Fourth St. Town Long Branch 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	
				31	3	41	Passed prof for Ldg. Smn.				
				7	11	41	Passed E.T. "ONE", R.C.N.				
				29	5	42	Passed prof for Petty Officer				
				6-10	7	42	Passed H.E.T. Gen. Know. 67%				

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		

FILM  
NO. NSP-5243-6  
DATE

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

SECOND CLASS FOR CONDUCT

From

To



N.V. 17  
 3M-12-39  
 N.S. 815-11-17

*Moose* X

# CERTIFICATE of the SERVICE of

.....MACKENZIE, Charles A. ....

## in the Royal Canadian Naval Volunteer Reserve

Training Headquarters	R.C.N.V.R. Division	Official Number <u>V. 775.7</u>
	<u>Toronto Division.</u>	" .....
		" .....

Date of Birth..... <u>Sept. 27, 1918.</u>	Name and Address of Nearest Relative or Friend
Place of Birth..... <u>Shortbridge, Sussex, England.</u>	<u>Father: Chas. A. Mackenzie</u>
Place of Residence..... <u>19 - 24th Street, Long Branch, Ont.</u>	<u>19 - 24th St.</u>
Trade brought up to <span style="border: 1px solid black; padding: 2px;"><b>O.H.F.</b></span> <u>Timekeeper, Goodyear Rubber Co.</u>	<u>Long Branch, Ont.</u>
Religion..... <u>Church of England.</u>	
Can Swim:—P.P.T. ( ) Date..... 19.....	Signature.....
P.S.T. ( ) Date..... 19.....	Signature.....

*30/10/41*

PARTICULARS OF SERVICE				MEDALS, DECORATIONS, etc.		
Date of Actual Volunteering	Date of Enrolment	Period Volunteered for	Rating on Enrolment or Re-enrolment	Date of		Nature of Decoration
				Award	Presentation	
	<u>8:2:40</u>	<u>Duration of Host.</u>	<u>Ord. Sea.</u>			

PERSONAL DESCRIPTION								
	Height		Chest (mean)	Weight	Hair	Eyes	Complexion	MARKS, WOUNDS, SCARS
	Feet	Inches						
On Entry.....	<u>5</u>	<u>7</u>	<u>33</u>		<u>Brown</u>	<u>Green</u>	<u>Fair</u>	<u>Nil.</u>
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
<u>R.C.N.V.R.</u>	<u>H.M.C.S.</u>				
<u>Toronto Div.</u>	<u>"Stadacona"</u>	<u>28:5:40</u>			



# NAVAL TRAINING and ACTIVE SERVICE

Year	SHIP OR ESTABLISHMENT	LEDGER		RATING	FROM	TO	CAUSE OF DISCHARGE
		List	No.				
1940	R.C.N.V.R. Toronto D.	V.	7757	Ord. Sea.	13:5:40	28:5:40	Drafted
1940	H.M.C.S. "STADACONA"	V.	7757	Ord. Sea.	29:5:40	5 Sep '40	
-	Venture (Moose)	-	-	- " -	6 Sep '40	9 Feb '41	
-	"	-	-	A.B.	10 Feb '41	27 Feb '41	
-	Stadacona	-	-	- " -	29 Feb '41	12 May '41	
-	Annapolis	-	-	- " -	13 May '41	15 Aug '41	
-	Ottawa	-	-	- " -	16 Aug '41	30 Nov '41	
-	Stadacona	-	-	A/P. Sec. (G.D.)	1 Dec '41	27 Apr '42	
-	Corunna	-	-	- " -	28 Apr '42	1 May '42	
-	Stadacona	-	-	- " -	2 May '42	2 June '42	
-	Ottawa	-	-	- " -	3 June '42	10 July '42	
-	"	-	-	- " -	11 July '42	31 Aug '42	
-	"	-	-	A.P.O. (G.D.)	13 Sep '42	13 Sep '42	D.D.

**Wounds Received in Action, Hurt Certificates, Meritorious Service, Special Recommendations, Prizes or other Grants**

Date	Details	Captain's Signature
16 June '42	Issued SETW # 31181.	act 2701

# NAVAL TRAINING and ACTIVE SERVICE

Year	SHIP OR ESTABLISHMENT	LEDGER		RATING	FROM	TO	CAUSE OF DISCHARGE
		List	No.				

## EXAMINATIONS, NOTATIONS, QUALIFICATIONS

## RECORD OF RATING

Date	Particulars	Captain's Signature	Rated	Date	Authority for Advancement or Reason for Disrating to be stated
6 July '40	Passed profess orally for Able Seaman 19392	<i>J. Edwards</i>			
19 Dec 40	Naval Ad board				
26 Mch '41	Qual. & Rated "L.R. II"	<i>J. E. Leigh Capt</i> <i>J. P. Capt</i> <i>H. Henderson Lt</i>			
31 Mch '41	Passed Prof. for Ldg. Gun	<i>J. E. Leigh</i>			
7 Nov '41	Passed E. T. 1	<i>R. Schmitt</i>			
28/5/42	Passed Prof for P.O.	<i>G. F. Jewell</i> <i>C.O.</i>			
6-10 July 1942	Passed H.K.T. Gen. know. 67	<i>J. Edwards</i>			
1 June 1942	Quoted rated L.R. I	<i>J. Edwards</i>			



# CONDUCT SHEET

Toronto Division

NAME MACKENZIE, Charles A. RATING A/Dep. Sec. (K) { PORT DIVISION AND OFFICIAL NUMBER V 7757

NAME OF SHIP	Date of Entry	No. of G.C. Badges held	Date of Commencement of "very good" conduct. (Art. 527, cl. 4 and 5) If conduct is not "very good" insert "Nil"	Class for Conduct If in 2nd class, insert (1) Date of reduction. (2) Date of proposed restoration.	Class for Leave If in 2nd class, insert date from which entitled to restoration to 1st class (Art. 573, cl.2)	Character since last assessment on Service Certificate or Conduct Sheet (Art. 605, cl. 5 and 8)			Efficiency (Art. 607)	For Art. 413 ratings only. (See Notes 5, 6 and 7.)		Ship Discharged to (giving date, if it differs from date of assessment of character, and, in the case of an N.C.S. Steward or Cook discharged to Shore, the cause of discharge)	In red ink—Whether recommended for (a) Boys' Training Service. (b) Other Instructional Duties. (See Note 9)	R.M.G. or R.R. (where applicable)	Commanding Officer's Signature
						From	To	Character Assessment		Whether recommended for advancement (Must be fit for immediate advancement and fully qualified)	Whether recommended with a view to accelerated advancement (Must also be fit for immediate advancement but not necessarily fully qualified)				
Stadacona	1940 29 May	NIL	5 Feb '40	FIRST	FIRST	29 May	5 Sep	VG	Sat	-	-	Venture (Moose)			<i>[Signature]</i>
Venture (Moose)	6 Sep 40	NIL	---	---	---	1 Jan 41	27 Feb 41	VG.	Supr.	NY (NQ)	NO	Stadacona			<i>[Signature]</i>
Stadacona	28 Feb 41	NIL	"	"	"	28 Feb 41	12 May 41	V.G.	Supr.	NY (NQ)	NO	Annapolis			<i>[Signature]</i>
"Annapolis"	13 May 41	NIL	"	"	"	13 May 41	15 Aug 41	V.G.	Supr.	YES	see ltr S. 507 of 3/17/41	"Ottawa"			<i>[Signature]</i>
"Ottawa"	16 Aug 41	NIL	"	"	"	16 Aug 41	27 April 42					Stadacona			<i>[Signature]</i>
Stadacona	28 Apr 42	---	---	NC	1st	28 Apr 42	30 Apr 42	V.B.	Supr.	R.C.O.C.	NO	Cornwallis			<i>[Signature]</i>
Cornwallis	1 May 42	---	---	"	"	1 May 42	2 June 42	V.B.	Supr.	Recd.		Stadacona			<i>[Signature]</i>

## NOTES

- Destruction of Conduct Sheet.**—Attention is directed to Art. 603, cl. 3, K.R., which provides for the destruction, after the next assessment of character, of a Conduct Sheet shewing the record of offences in a previous ship. But the Conduct Sheet of a man joining a shore or harbour establishment may (and for Leading Seamen, Leading Signalmen, Able Seamen and Signalmen *must*) be kept in use and accompany him to his next sea-going ship.
- Date of Commencement of "very good" Conduct.**—When the date of commencement of "very good" conduct differs from that which would normally appear from the Service Certificate, the date is to be inserted in red.
- Class for Conduct.**—The date of proposed restoration may be any date not less than 3 months and not more than 6 calendar months from date of reduction. See Art. 567, K.R.
- Good Conduct Medal and Gratuity.**—Recommendations are to be made according to the instructions in Arts. 534, cl. 3, and 606, cl. 4, K.R. If the recommendation is intentionally withheld, a statement to that effect should be inserted. (See Art. 534, cl. 15.)
- Whether Recommended for Advancement.**—To be completed in respect of all Art. 413 ratings by inserting "Yes," "Not Yet" or "No" (but see notes (1), (2) and (3) below):
  - "Yes"—Recommended for advancement. To be followed by (N.Q.) if not fully qualified; this, if awarded in a sea-going ship, will count as a sea-going recommendation for men who require this qualification, although such men are not qualified for recommendation on Form S. 507.
  - "Not Yet"—To be used for ratings not yet recommended for advancement owing to their inexperience. To be followed by (N.Q.) if not fully qualified.
  - "No"—Not recommended, whether qualified or not.
 For Leading Seamen, Leading Signalmen, Able Seamen and Signalmen insert also "S.G.R." or "H.R." according as the ship is or is not a "sea-going" ship (Appendix XVII, Part 1, para. 10) in relation to the individual rating concerned.
- Whether Recommended for Confirmation.**—Notations, in red ink, are to be made across both the "Recommendation for Advancement," columns, after completion of a minimum period of three months' acting time, as to whether or not a rating is recommended for confirmation in the ordinary course. The abbreviations to be used are "R.C.O.C." or "N.R.C.O.C."
- Accelerated Advancement.**—Recommendations are not to be made in this column unless the rating was likely to have been recommended for accelerated advancement on the next return S. 507 had he remained in the ship. This column is intended merely to assist the Captain of the ship to which the rating is discharged in rendering S. 507 at the end of the half-year, by bringing to his notice ratings of more than ordinary merit, who should be specially considered when making the special recommendations on S. 507 for the accelerated advancement of a limited proportion of the ship's company. When recommending Leading Seamen, Leading Signalmen, Able Seamen and Signalmen add "S.G.R." or "H.R." as directed for previous column.
- Offences and Punishments.**—To be recorded on page 2.
- Training Service.**—This column is always to be completed for E.R.A.s, E.A.s, O.A.s, C.P.O.s, P.O.s and Leading Ratings of the Seamen, Signal W/T and Stoker branches, irrespective of whether or not the rating is a volunteer for the Training Service. If recommended, the word "Yes" should be inserted; if not recommended, the word "No."

VERIFICATION FORM

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

NAME IN FULL MACKENZIE, Charles Alexander RANK/RATING A/P.O. OFF. NO. V.77

SHIP	SERVICE			AREA	QUALIFYING PERIODS IN DAYS				
	FROM	TO	DAYS		FROM	TO	1939-45	ATLANTIC	DEFENCE
<u>P.C. N.V. P. Toronto</u>	<u>13/5/40</u>	<u>28/5/40</u>	<u>16</u>						
<u>Onas</u>	<u>6/9/40</u>	<u>27/8/41</u>	<u>175</u>	<u>Atlantic</u>					
<u>Annapolis</u>	<u>13/5/41</u>	<u>15/8/41</u>	<u>95</u>	<u>Atlantic</u>					
<u>Ottawa</u>	<u>16/8/41</u>	<u>27/4/42</u>	<u>255</u>	<u>Atlantic</u>					
<u>Ottawa</u>	<u>11/7/42</u>	<u>13/9/42</u>	<u>65</u>	<u>Atlantic</u>					
<u>Discharged "blind"</u>									
<u>to date: 13/9/42</u>									

VERIFIED BY George H. Linnell VERIFIED BY .....

VERIFICATION FORM

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

*W. J. ...* RANK/RATING ..... *A/P.O.* ..... OFF. NO. .... *V. 7757* ..... 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>Atlantic</i>							ATLANTIC	1	<i>star</i>
<i>Atlantic</i>							FRANCE G.		
<i>Atlantic</i>							AFRICA		
<i>Atlantic</i>							PACIFIC		
							BURMA		
							ITALY		
							DEFENCE		
							C.V.S.M.	2	<i>@ clasp</i>
							" CLASP		
							WAR 1945	1	<i>Medal</i>
							WAR 1915		

VERIFIED BY *G. F. ...*

VERIFIED BY ..... DIR. OF PERSONNEL RECORDS.

DEPARTMENT OF NATIONAL DEFENCE  
OTTAWA, CANADA

15th August, 1942.

AT THE HIGHER EDUCATIONAL TEST HELD ON

6th - 10th July, 1942.

NAME Charles A. MacKENZIE RATING Leading Seaman, R.C.N.V.R.,  
O.N. V.7757.

OBTAINED THE MARKS SHOWN IN THE FOLLOWING SUBJECTS:

<u>SUBJECTS</u>	<u>MARKS</u>
<u>GENERAL KNOWLEDGE</u>	<u>67</u>
.....	.....
.....	.....
.....	.....
.....	.....

NOTE - (75% and over = 1st class marks. 55% and over = 2nd class marks)

This form is a statement FOR INFORMATION ONLY. It is NOT a "Higher Educational Certificate" or a Certificate of Qualification for Warrant Rank, both of which require a certain standard to be obtained in several specified subjects.

**PROGRESS UNDER TRAINING FOR ABLE SEAMAN.**

Educational Examinations  Passed Educationally { Accelerated Advancement For Able Seaman (if G.C. III.) Educational Test I.  Rated Ordinary Seaman	Date	Ship	Signature and Rank of Divisional Officer
---	------	------	--

SEAMANSHIP			GUNNERY			TORPEDO		
Subject	Hours	%	Subject	Hours	%	Subject	Hours	%
Boat Work			Field Training			Whitehead		
Anchors and Cables			Gun Drill		75	Low Power		80
Compass and Wheel Rule of the Road		90%	Stripping			High Power		
Rigging Sheers and Derricks			Fire Control		55	Instruments		
Sounding Machine Lead and Line			Ammunition		80	Explosives		
Bends and Hitches Blocks and Tackles			Director and Sighting		55	Paravanes		
Part of Ship Evolutions			Machine Gun					
Signals		100%						
TOTAL		95%	TOTAL		75%	TOTAL		
* Date of Passing		6/7/40	* Date of Passing		27/6/40	* Date of Passing		

Signature and Rank of Divisional Officer, and Ship  
*James Stewart*  
Lt. R.C.N.V.R.

Signature and Rank of Divisional Officer, and Ship  
*James Stewart*  
Lt. R.C.N.V.R.  
H.M.C.S. "Stadrona"

Signature and Rank of Divisional Officer, and Ship  
*James Stewart*  
Lt. R.C.N.V.R.  
H.M.C.S. "Stadrona"

\* In the event of failure to pass any examination, the percentage is to be noted in RED, and the word "FAILED" noted.  
 † The letters "S.G.," "S.T.," "S.D.," "A.G.," etc., are to be entered by the Divisional Officer in the case of men so recommended. If not recommended, the word "NO" is to be entered.

Ship	Total Period of Practical Experience as Ord. Seaman in part of Ship	Recommended for Advancement to Able Seaman on (Date)	Divisional Officer's Remarks

Ordinary Seaman (Special Service).  
 Qualified for advancement to Able Seaman (S.S.)  
 on \_\_\_\_\_ Date.  
 \_\_\_\_\_ Commodore. \_\_\_\_\_ Date  
 \_\_\_\_\_ Depot. \_\_\_\_\_ Date  
 \_\_\_\_\_ Captain. 376/672

Rated Able Seaman and Recommendations inserted on History Sheet.  
 H.M.S. \_\_\_\_\_  
 \_\_\_\_\_ Date



*STAD 3-6-42 V-7757*

S. 536d. }  
T.S. 34. } (Revised—Nov., 1936).

**CERTIFICATE OF PROGRESS OF BOYS AND ORDINARY SEAMEN.**

(To be used in conjunction with Form S. 399 Divisional Training Progress Book).

NAME OFFICIAL No. Date of Birth  
*Mackenzie Charles A.* *V 7757.* *27<sup>th</sup> Sept. 1918*

**ON LEAVING HARBOUR TRAINING SERVICE.**

Subject	Ability	REMARKS (percentages obtained etc.)	Initials of Instructing Officer
*School			
Seamanship			
Boat work			
(a) Pulling			
(b) Sailing			
Gunnery and Disciplinary Training			
Shooting			
Swimming—P. P. T.		Date qualified	
Physical & Recreational Training			
Culinary Course			
Special qualifications			
Call Boy			
Bugler (Sea Service)			
Drummer			
Special Remarks			<i>[Signature]</i>
		<i>Above average. Very good.</i>	

On joining:—    Weight                      Height                      Date

On leaving:—   Weight                      Height                      Date

\* State in remarks column whether G.C.I., II or III, or Advanced Class, or V/S or W/T.

H.M.S. "                      "                      Date                      Captain.

# 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. Stadacona

Name of Candidate (in full) MacKENZIE, Charles Alexander

Present Rating Able Seaman, R.C.N.V.R. O.N. V 7757

Port Division Halifax, N.S.

Date of Application for Examination 31-3-41

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

**J. C. I. EDWARDS**

*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).

II.—RESULT OF EXAMINATION

SECTION I

Whether "Passed" or "Failed" "Good"

(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	45	
Anchor Work.....	50	60	25	30	48	
Rule of the Road.....	30	30	15	15	28	
Boat Work.....	80	80	48	48	56	
General Duties.....	60	40	30	20	35	
Organization.....	40		20			
Signals.....	30	30	15	15	24	
Watertight Fittings.....	10	10	5	5	8	
Duties in Part of Ship and Mess.....		30		15	24	

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 7th April 1941.

A. J. Hall  
President of Board

Candidate's Signature (in full) Charles Alexander MacKenzie

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

is 31st March 1941.

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

H.M.C.S. "....." on..... 193.....

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.....

# Passing Certificate

---

## This is to Certify

that Charles MACKENZIE,

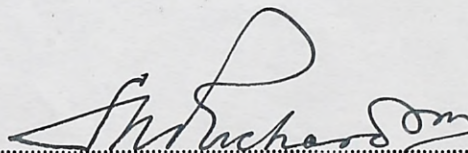
Rating Able Seaman, Official Number V.7757  
R.C.N.V.R.

has passed

## THE EDUCATIONAL TEST, I, R.C.N.

held on 7th November, 1941.

For advancement to Petty Officer



Naval Secretary  
Director of Education.

Department of National Defence,

Ottawa, this 1st day of December 1941.

---

LA:FMW

113-M-942.

30th November, 1942.

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THIS IS TO CERTIFY that according to official information Charles Alexander MacKenzie, Leading Seaman, Official Number V-7757, Royal Canadian Naval Volunteer Reserve, is missing, believed killed in action to date the 13th of September, 1942. He was on board H.M.C.S. "OTTAWA", which has been reported lost.

*Stan*

Deputy SECRETARY, NAVAL BOARD.

*AW*

*stan*



Department of National Defence

Naval Service

Ottawa, Canada.

IN REPLY PLEASE QUOTE

No. 113-M-942

1 October, 1942.

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 &amp; CAUSE of DEATH</u>	<u>NEXT OF KIN</u>
MackENZIE, Charles Alexander Leading Seaman, V-7757 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".	Mrs. Jessie G. MacKenzie, 19--24th Street, LONG BRANCH, Ont.

*Mother:*

<u>In favour of</u>	<u>ALLOTMENTS IN FORCE</u>	<u>Amount</u>	<u>Initials</u>
(mother) Mrs. Jessie MacKenzie	19-24th St., Longbranch, Ont.	\$40.00	V.M.G.



WILL: No Record.

Yours truly,

*R. A. ...*  
SECRETARY, NAVAL BOARD.

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

MG

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

4  
 NAVY

DECEASED MEMBER'S NAME: Charles Alexander MacKENZIE  
 (CHRISTIAN NAMES) (SURNAME)  
 PAYEE: Director of Estates, for Service Estate of  
 ADDRESS: 308 Sparks St., Charles A. MacKenzie,  
 Ottawa, Ont. NSV-7757  
 13 Sep/42  
 REGISTER NO. 10145  
 FILE NO. NSV-7757  
 DATE 17 Oct/45  
 SERVICE NO. V-7757  
 A/P.O.  
 FINAL RANK OR RATING 13 Sep/45  
 DATE OF DISCHARGE

DATE OF TERMINATION OF OVERSEAS SERVICE		DATE OF DISCHARGE
A. TOTAL QUALIFYING SERVICE		
NO. OF DAYS	854	28
	EQUAL TO COMPLETE PERIODS AT \$7.50	
		210.00
B. QUALIFYING OVERSEAS SERVICE		
NO. OF DAYS	590	14
	LESS INELIGIBLE DAYS, EQUAL TO 576 DAYS @ 25C. PER DAY	
		144.00
C. SUPPLEMENT FOR OVERSEAS SERVICE		
DAILY RATES AT DISCHARGE		
PAY	\$ 2.40	
SUBSISTENCE OR LODGING AND PROVISION ALLOWANCE	\$ 1.45	
ADDITIONAL PAY L.R.I.	\$ .35	
H.L.M.	\$ .15	
	\$	
DEPENDENTS' ALLOWANCE 1/30 OF \$ N11	\$	
TOTAL	\$ 4.35	X7 = \$ 30.45
NO. OF DAYS	590	X\$ 30.45
	183	
		98.18
D. WAR SERVICE GRATUITY		
		452.18
E. DEDUCTIONS		
OVERPAYMENT OF PAY AND ALLOWANCES \$		
DEPENDENTS' ALLOWANCE AND ASSIGNED PAY \$	N11	
OTHER DEDUCTIONS \$		
F. TOTAL AMOUNT PAYABLE		
		452.18
G. YOUR PORTION OF GRATUITY IS—		
DEPENDENTS' ALLOWANCE IN ISSUE TO YOU \$		OF \$
TOTAL DEPENDENTS' ALLOWANCE IN ISSUE \$		= \$ 452.18

Voucher 3068 - Oct. 27/45

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.

AT

PREPARED BY EP  
 CHECKED BY 109

TREASURY  
 CHECKED BY  
 DATE

for Dir. Naval Pay Acctng.

SERVICE REPRESENTATIVE

# STATEMENT OF ACCOUNT

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True extract from the ledger of H.M.C.S. "OTTAWA" ending 30th Sept. 19.42.

List 5/2 No. 561 (Name) MCKENZIE, Chas. Rank Rating A/L/Smn. No. V-7757 D.D.

When entered Stadacona Date of appearance - - Whither discharged 13th Sept. '42  
P.M. 4th July '42

		\$	c.				
CREDIT from former account.....		-	-				
Pay as	A/L/Smn. from 2nd July to 31st Aug. (61 days at \$ 2.10 day)	128.	10				
	(Rank Rating)						
"	L.R.II " 2nd July " " (61 " .20 " )	12.	20				
"	H.L.M. " 5th July " " (58 " .15 " )	7.	54				
"	G.M. " " " " " (X 58' .06 " )	3.	48				
"	" " " " " ( " " " )						
Kit Upkeep Allowance.....							
OTHER CREDITS: .....							
Total credits.....		151.	32				
DEBT from former account.....		24.	97				
PAYMENTS:—	1st	2nd	3rd	4th	5th		
	\$ c.	\$ c.	\$ c.	\$ c.	\$ c.		
1st month.....		45.00				Total.....	45.00
2nd month.....						Total.....	
3rd month.....						Total.....	
Allotment 40.00, Aug. & Sept. ....						Total.....	80.00
Pension deduction (Officers) charged to..... of.....							
Hospital stoppages.....							
Mulcts.....							
OTHER CHARGES: .....							
Total debits						149.	97
Balance Cr. or <del>Dr.</del>						1.	35
(Balance Dr. to be shown in red)							

LEDGERS: R. *[Signature]*  
F. *[Signature]*

Number of days actually victualled during period mentioned above 58

NOT VICTUALLED	LENT, SICK OR LEAVE	INCLUSIVE DATE		No. OF DAYS	SHIP, HOSPITAL, etc., IN WHICH BORNE
		FROM	TO		

Date 9th November 19.42.

*[Signature]*  
ACCOUNTANT OFFICER



# STATEMENT OF ACCOUNT

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

List 5/1 No 58 (Name) MCKENZIE, Chas. Rank Rating <sup>A/</sup> P.O. (ty) No. V-7757

When entered List 5/2/561 Date of appearance - - - Whither discharged 13th Sept. 1942  
 A.M. 1st Sept.

	\$	c.
CREDIT from former account	1	35
Pay as <sup>A/P.O. (ty)</sup> from 1st Sept to 30th Sept. 30 days at \$ 2.40 day	72	00
" L.R. 1 " 1st June " 31st Aug. (92 " .15 " diff	13	80
" L.R. 1 " 1st Sept. " 30th Sept. 30 " .35 " )	10	50
" H.D.M. " 1st. Sept. " 13th Sept. 13 " .15 " )	4	50
" G.M. " 1st Sept. " 13th Sept. 13 " .06 " )	1	80
Kit Upkeep Allowance		
OTHER CREDITS:		
Total credits	103	95

DEBT from former account ~~425.22~~

PAYMENTS:—	1st		2nd		3rd		4th		5th		
	\$	c.	\$	c.	\$	c.	\$	c.	\$	c.	
1st month											Total
2nd month											Total
3rd month											Total

Allotment ~~40.00~~ 40.00, List 5/2/561 (charged) ~~40.00~~

Pension deduction (Officers) charged to \_\_\_\_\_ of \_\_\_\_\_

Hospital stoppages \_\_\_\_\_

Mulcts \_\_\_\_\_

OTHER CHARGES: \_\_\_\_\_

Added RB D.A.P.A. 171  
12-6-45  
M.P.A. (9)  
16-6-45

Ledgers R on  
FM

Total debits ~~425.22~~ 11  
 Balance Cr. or ~~KX~~  
 103.95  
 (Balance Dr. to be shown in red)

Number of days actually victualled during period mentioned above 13

NOT VICTUALLED	LENT, SICK OR LEAVE	INCLUSIVE DATE		No. OF DAYS	SHIP, HOSPITAL, etc., IN WHICH BORNE
		FROM	TO		

Date 9th November 1942

L. Wright

ACCOUNTANT OFFICER

**DISTRIBUTION OF SERVICE ESTATES GMV**

Estates Form "P. 4"

**NAVY**

Name: MACKENZIE, Charles A. No.: NSV 7757  
Surname Christian Names

Rank: A/PO Unit: HMCS Ottawa Date of Death: 13-9-42

Date: 7-1-46

<u>AMOUNT</u>	<u>W.S.C.</u>	<u>452.18</u>
	<u>L.P.C.....\$</u>	<u>103.95</u>
	<u>Other Credits.....</u>	<u>8.00</u>
	<u>Total.....</u>	<u>564.13</u>
	<u>Prev. Dist.</u>	<u>111.95</u>
	<u>This Dist.</u>	<u>452.18</u>

SHARE	RELATIONSHIP	NAME AND ADDRESS	AMOUNT
$\frac{1}{2}$	Father	Charles A. MacKenzie 19 - 24th Street Long Branch, Ont.  ( $\frac{1}{4}$ as n/k entitled) ( $\frac{1}{4}$ for benefit of 1 minor)	226.09
$\frac{1}{4}$	Mother	Mrs. Jessie G. MacKenzie, (As above)	113.05
$\frac{1}{4}$	Sister	Mrs. Jessie E. Gould (As above)  (As next-of-kin entitled)	113.04

*W.S.G.*

AUTHORITY					
H.Q. F.E. No.	VOTE	PRI	H.Q. SUB.	OBJ.	AMOUNT
9999	831	00	50	000	452.18
CLASSIFIED BY			EXAMINED BY		
			For Chief Treasury Officer		

DISTRIBUTION APPROVED AND AUTHORIZED

*(Signature)*  
 (L. M. FIRTH) Colonel  
 Director of Estates

AUDITED FOR PAYMENT

.....  
 For Chief Treasury Officer