

V60221
MASON

GLENN

CAMPB

OCCUPATIONAL HISTORY FORM

THIS FORM IS TO BE COMPLETED FOR EACH MEMBER OF THE ARMED FORCES. THE INFORMATION SOUGHT IS FOR THE USE OF GENERAL ADVISORY COMMITTEE ON DEMOBILIZATION AND REHABILITATION, A COMMITTEE SET UP BY THE GOVERNMENT OF CANADA TO STUDY PLANS FOR ESTABLISHING IN INDUSTRIAL LIFE THE MEMBERS OF THE ARMED FORCES, AFTER DISCHARGE. ACCURACY AND COMPLETENESS IN ANSWERING WILL BE OF MUCH HELP TO THE COMMITTEE.

PLEASE READ CAREFULLY THE INSTRUCTIONS GIVEN ON THE INSIDE OF COVER BEFORE COMPLETING FORM

Section A—GENERAL INFORMATION

1. (a) Print name in full GLENN CAMPBELL MASON (b) Reg'l. No. V60221
2. (a) Arm of service NAVY (b) Unit RCNVR (c) Rank STOKER II
3. (a) Date of birth 27 SEP 1924 (b) Have you any dependents? NO (c) Place of residence at time of enlistment NEW GLASGOW N.S.
4. (a) Place of enlistment HALIFAX N.S. (b) Date of enlistment 29-9-43

PLEASE
LEAVE
BLANK

Section B—EDUCATION AND TRAINING

5. (a) State age on finally leaving school 19 yrs (b) Were you attending school or college up to the time of enlistment? NO
6. State definitely highest standing reached at public, technical or high school (for instance—"4 years, Public School", "two years, High School", "Junior Matriculation", or "4 years technical course in printing", etc.) GRADE II
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) WORKING (b) At time of enlistment of what trade union or professional society were you a member?.....

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 TOWN OF NEW GLASGOW Address NEW GLASGOW N.S.
19. Nature of employer's business (for instance, "farmer", or "building contractor", or "boot factory", or "iron foundry", or "retail store", etc.) TOWN
20. (a) Your specific occupation FIRETRUCK DRIVER (b) Number of years' experience at this occupation with any employer 5 mos.
21. (a) Did your employer promise definitely to give you employment on discharge? NO (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? NO (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 DIESEL

DATE APRIL 24th 194 3 SIGNATURE Glenn Mason



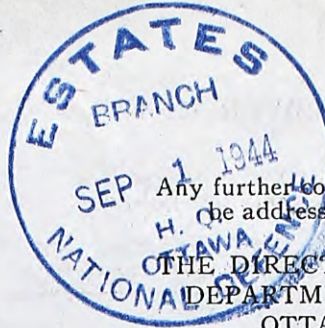
Copy To
VWD
ES

MAY 15 1943

FOR COMPLETION AND RETURN BY

1

Form P. 64



Mrs. Phyllis Mason
399 MacDonald St.
NEW GLASGOW, N.S.

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

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

and the following number quoted:—

H.Q. NS V-60221 FD 542

DEPARTMENT OF NATIONAL DEFENCE
ESTATES BRANCH
OTTAWA, ONT.

August 21st 1944

For the purpose of record and in the event of there being any Service estate available for distribution (according to law) on account of the late

MASON, Glenn Campbell, Stoker First Class

V-60221 R.C.N.V.R.

it is necessary that certain information regarding the deceased and his relatives should be furnished the Estates Branch. You are asked therefore to read the enclosed memorandum before completing pages 2 and 3 of this form. The particulars required are to be carefully filled in and the Declaration on page 4 should then be signed in the presence of a Clergyman, Priest, Local Magistrate, Commissioner for Oaths, Notary Public or a Commissioned Officer of any of His Majesty's Forces who should be asked to complete and sign the Certificate. This form should then be returned to the above address.

If there is insufficient space for complete particulars to be given opposite any question on pages 2 and 3 of this form, the space under "additional remarks" on page 4 should be used.

A. H. W. [Signature]
Commissioner
Director 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 specified	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.....	Kenneth Forbes Mason	56	399 McDonald St., New Glasgow, Nova Scotia
4	Mother of the Deceased.....	Phyllis Campbell Mason	45	Same as above
5	Brothers of the Deceased	Full Blood		Deceased was an only child.
		Half Blood		
6	Sisters of the Deceased	Full Blood		
		Half Blood		
7	Names of brothers or sisters (whether of the full or the half blood) of the Deceased, who are dead, and date of death of each.	Names and ages of their children (if any)		Address of their children

ANSWER FULLY EACH QUESTION ON THIS PAGE
PARTICULARS AS TO IDENTITY

8	Full names of the deceased.	Glenn Campbell Mason
9	Date of his birth.	September 27, 1923
10	Place and date of his marriage.	Nil
11	Place and date of his parents' marriage.	Yuro. Nova Scotia November 11, 1922

PARTICULARS OF DOMICILE

12	Place where deceased was born.	New Glasgow, Nova Scotia
13	State, in order, the Province, State and/or County in which he resided before enlistment and the period of time in each.	(a) Nova Scotia. all his life. (b) (c) (d)
14	Nature of employment before enlistment.	School
15	State whether he owned the premises in which he lived, and, if so, where situated.	Lived with his parents
16	Name place where deceased stated he intended to make his permanent home.	Nova Scotia (New Glasgow)

PARTICULARS OF ESTATE

17	Did he leave a Will? If in your custody, please forward.	No
18	If married, and domiciled in the Province of Quebec or in a State in the U.S.A. or in a Country under the laws of which there is community of property between spouses,—was there a marriage contract dealing with property?	Nil
19	Did he have a Bank, Post Office or other deposit account? If so, give name and address of bank, etc., and the amount on deposit. Do you wish it administered with the pay account?	Opened an account this summer in Royal Bank of Canada, Halifax. Do not know amount. Yes.
20	Amount of War Savings Certificates held by deceased. Indicate where located.	Seven \$5.00 Certificates. New Glasgow. (None)
21	Amount of Victory Loan Bonds held by deceased. Indicate whether registered or bearer and where located.	He was paying on a \$100.00 Bond in Navy.
22	If deceased had life insurance, name companies and amount payable under each policy and the person named as beneficiary therein.	Crown Life Insurance Company. Amount - \$2000.00 His mother - Phyllis Mason
23	Describe other assets, if any, and estimated value thereof. Use space on page 4 if necessary.	

OTHER PARTICULARS

24	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 No
25	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.	No.

(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 or elsewhere in the North American zone, 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.)

(PLEASE TURN OVER)

DECLARATION

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

I hereby declare that all the particulars shown on this form are correct, and a true and complete statement of all the relatives that the deceased ever had in the degrees specified; 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 or Commissioned Officer of any of His Majesty's Forces.

Phyllis Campbell Mason (Signature of Informant)
399 Macdonald St. New Glasgow, N.S. Address

CERTIFICATE

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

Campbell Mason (Name of informant) is the Mother of the Deceased above described. The above Declaration was made by the Informant and signed in my presence.

Dated at New Glasgow this 24th day of August 1944

Signature of Clergyman, Priest, Magistrate, Commissioner or Notary Public or Commissioned Officer of any of His Majesty's Forces.

H. G. Nicholson Qualification Commissioner

Address 386 McDonald St New Glasgow, N.S.

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 specified is stated in its proper place in the Statement opposite.

(If the deceased has no living relatives of the degrees shown on page 2, the names and addresses and relationship of other relatives should be set out below.)

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

113-77-7277



N. V. 5
25M-9-40 (6793)
N.S. 815-11-5

no file 5

ATTESTATION FORM (HOSTILITIES FORM)

94340

FOR MEN OF THE ROYAL CANADIAN NAVAL VOLUNTEER RESERVE

SURNAME MASON OFFICIAL NO. V60221

CHRISTIAN NAMES Glenn Campbell MARRIED, SINGLE OR WIDOWER Single.

PERMANENT ADDRESS	RELIGION
399 MacDonald St., New Glasgow, N.S.	C of E.

DATE OF BIRTH	*PLACE OF BIRTH	NAME AND ADDRESS OF NEXT OF KIN
27th September, 1923	Town New Glasgow County Pictou Province N.S.	Mrs. Phyllis Mason, (Mother) 399 MacDonald St. New Glasgow, N.S.

*Original Nationality of:
Father British
Mother British

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

PERSONAL DESCRIPTION ON ENROLMENT

HEIGHT	CHEST MEASUREMENT	HAIR	EYES	COMPLEXION	WOUNDS, SCARS, MARKS
Feet. <u>5</u>	Inflated. <u>36</u>	Blond	Fair Blue	Fair	Nil..
Inches. <u>7</u>	Deflated. <u>35</u>				
<u>138</u>	Mean. <u>35 1/2</u>				

DATE OF ENROLMENT	RATING ENROLLING FOR	TRADE OR CALLING AND IN WHOSE EMPLOY
24th April, 1943. Divisional Strength	Stoker 2/c (Temp)	fire truck driver, Town of New Glasgow, N.S.
R.C.N.V.R. Division (or other establishment) at which enrolled	Stadacona	

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

*Cross out Clause not applicable.

SERVED IN	RANK	FROM
	Nil.....	

Personnel Records Division

1. Noted in Records . *A.T.*

2. Index Card *A.T.*

3. Non Sub. Card *A.T.*

4. Statistical Card *A.T.*

5.

6. Pension Card

7.

8.

DATE 18-2-43

(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.

(3) On being enrolled as a member of the Halifax 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 24th day of April, 1943.

Signature of applicant: Glenn Mason

(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 24th day of April, 1943.

Roy P. Oxtaun
Signature of and rank of Attesting Officer.
Lieutenant, R.C.N.V.R.

(D) OATH OF ALLEGIANCE

I, Glenn Campbell MASON, 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: Glenn Mason

Witness: Roy P. Oxtaun

Date 24th April, 1943 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

Glenn Campbell MASON 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 Halifax Division of the R.C.N.V.R. or in the appropriate official documents.

Roy P. Oxtaun
Attesting Officer.
Lieutenant, R.C.N.V.R.
R.C.N.V.R. Division
(or other establishment) Stadacona

24th April, 1943

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 Stoker Branch of the Naval Service by the prospect of being transferred at some future date to another Branch.

Glenn Mason
Signature



CANADA

Can. B. 207
150M-9-42 (8269)
N.S. 815-2-207

Certificate of Medical Examination of Officers, Men and Boys

NAVAL SERVICE OF CANADA

(R.C.N. OR RESERVE FORCES)

4

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

I, the undersigned, have examined MASON Glen E.
candidate for entry as S.T. 4 NR.
and I believe him to be * in all respects fit for His Majesty's Service
unfit for His Majesty's Service for the reason stated below } He has signed the Certificate
given below in my presence.

†Strike out if inapplicable. *Delete one.

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

(a) Age	Yrs.	Mos.	(j) Date of last Vaccination	<u>school.</u>	
	<u>19</u>	<u>6</u>			
(b) Height with bare feet	Feet	In.	(k) General Development	<u>fair</u>	
	<u>5</u>	<u>7</u>			
(c) Weight without clothes	<u>138</u>		(l) Nose, Throat and Tonsils	<u>clear</u>	
(d) Ears and Hearing	Rt. <u>normal</u> Lt. <u>normal</u> <u>C.V. 20</u>		(m) Heart and Lungs	<u>N.A.D. BP $\frac{140}{85}$</u>	
(e) Chest Girth	Max.	Min.	Mean	(n) Abdomen Hernia, etc.	
	<u>37</u>	<u>35</u>	<u>35½</u>	<u>normal</u>	
(f) Teeth	Deficient	Defective	Dentures	(o) Limbs and Joints	
	<u>0</u>	<u>5</u>	<u>0</u>	<u>normal</u>	
(g) Vision by Snellens Types	without glasses	<u>4/9</u> Rt.	<u>4/7</u> Lt.	Both	(p) Skin
					<u>marked</u> <u>vene. valg.</u>
	with glasses where worn	Rt.	Lt.	Both	(q) Anus Haemorrhoids
					<u>normal</u>
(h) Colour Vision	Ishihara	<u>N</u>			(r) Testes Varicocele
	R.C.N. Lantern				<u>normal</u>
(i) Chest x-ray	<u>not taken</u>	<u>approved</u>			(s) Urine
	<u>24-4-43</u>	<u>no</u>			<u>neg.</u>

CERTIFICATE TO BE SIGNED BY CANDIDATE

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

Glen E. Mason
Signature of Candidate

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

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

This Candidate is the subject of.....

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

*Delete one.

IF REJECTED
insert here
UNFIT
in block letters

Dated at Halifax N.S. the 22 of April 1943

Challenger
Examining Medical Officer

(Rank)

SURGEON LIEUT.

MEDALS AND MEMORIALS—DECEASED PERSONNEL

R.C.N.V.R-D - Mar. /45.

REGISTRATION No. DATE OF DESPATCH

(1) MEDALS
PERSON

ENTITLED TO Mr. Kenneth F. Mason - Father

ADDRESS: 399 MacDonald St.
New Glasgow, N.S.

(2) MEMORIAL CROSS

WIDOW

ADDRESS:

(3) MEMORIAL CROSS

MOTHER Mrs. P. Mason

ADDRESS: 399 MacDonald Street
NEW GLASGOW, N.S.

MEMORIAL BAR

(1)

DATE DESP.....

REGN. NO. 1040

(2)

(3)

14 September 1944

AWARDS

~~DECEASED~~ 5 August 1944

MASON

Glenn Campbell

V-60221

Sto.1

FILE No.

SURNAME (IN BLOCK LETTERS)

CHRISTIAN NAMES

REG. No.

RANK ON
DISCHARGE

C.A.S.F. UNIT

WAR SERVICEBADGE

(CLASS)

No.

DATE DESPATCHED:

ADDRESS:

CAMPAIGN MEDALS

REGISTRATION NUMBER AND DATE DESPATCHED

1939-45 Star

Atlantic Star

C.V.S.M. & Clasp

War Medal

279.

(THE REVERSE TO BE USED FOR ESTATE PURPOSES)

VERIFICATION FORM
 CAMPAIGN STARS, DEFENCE MEDAL, WAR MEDAL,
 NAVAL GENERAL SERVICE MEDAL

NAME IN FULL *Mason, Glenn Campbell* RANK/RATING *SS-11c*

SHIP	SERVICE			AREA	QUALIFY		
	FROM	TO	DAYS		FROM	TO	1939
	<i>15.6.43</i>						
<i>Grand-mère</i>	<i>5.11.43</i>	<i>5.8.44</i>	<i>275</i>	<i>OTL</i>			
				<i>OTL "Dead"</i>			
				<i>5.8.44</i>			

VERIFIED BY *[Signature]* VERIFIED BY

VERIFICATION FORM

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

Campbell
 RANK/RATING *LTJG* OFF. NO. *1-60221* ADDRESS

DAYS	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		<i>1 star</i>
<i>275</i>	<i>ATL</i>							ATLANTIC		<i>1 star</i>
								FRANCE G.		
								AFRICA		
<i>5.8.44</i>	<i>"Leach"</i>							PACIFIC		
								BURMA		
								ITALY		
								DEFENCE		
								C.V.S.M.		<i>2 Clasp</i>
								" CLASP		
								WAR 1945		<i>1 Medal</i>
								WAR 1915		

VERIFIED BY *Jon*
SR

VERIFIED BY DIR. OF PERSONNEL RECORDS.

CONDUCT SHEET

Page 1

NAME *Glenn Campbell Mason*

RATING *Ole 7 Temp*

PORT DIVISION AND OFFICIAL NUMBER *Halifax N.S.*

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		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
				If in 2nd class, insert date from which entitled to restoration to 1st class (Art. 573, cl. 2)	If in 2nd class, insert date from which entitled to restoration to 1st class (Art. 573, cl. 2)	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)				
<i>Stadacona</i>	<i>15 June 43</i>	<i>Nil</i>	<i>24 Oct 43</i>	<i>1</i>	<i>1</i>	<i>15 June 1943</i>	<i>18 June</i>	<i>U.G.</i>	<i>Under three months</i>	<i>Protector II</i>	<i>Agnes C. White</i>				
<i>Protector II</i>	<i>19 June 40</i>	<i>Nil</i>	<i>—</i>	<i>1st</i>	<i>1st</i>	<i>19 June 43</i>	<i>3 Aug 43</i>	<i>V.G.</i>	<i>Under three months</i>	<i>Comwallis</i>	<i>Agnes C. White</i>				
<i>Comwallis</i>	<i>4 Aug 43</i>	<i>—</i>	<i>—</i>	<i>—</i>	<i>—</i>	<i>4 Aug 43</i>	<i>1 Oct 43</i>	<i>V.G.</i>	<i>2nd</i>	<i>N.Y. (N.O.)</i>	<i>Agnes C. White</i>				
<i>Stadacona</i>	<i>—</i>	<i>—</i>	<i>—</i>	<i>—</i>	<i>—</i>	<i>2 Oct.</i>	<i>4 Nov.</i>	<i>V.G.</i>	<i>Under 3 months</i>	<i>Grandmere</i>	<i>Agnes C. White</i>				
<i>Grandmere</i>	<i>5 Nov 43</i>	<i>—</i>	<i>—</i>	<i>—</i>	<i>—</i>	<i>5 Nov 43</i>	<i>5 Aug 44</i>	<i>V.G.</i>	<i>1st</i>	<i>L.P.D.</i>	<i>Agnes C. White</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.As, E.As, O.As, C.P.Os, P.Os 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".

DISTRIBUTION OF SERVICE ESTATES

MH
Estates Form "P. 4"

NAVY

Name: MASON, Surname Glenn C. Christian Names No.: V-60221

STO I/C Rank HMCS Stadacona Unit 5-8-44 Date of Death

AMOUNT

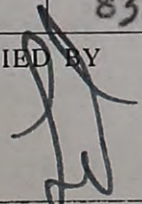
Date: 4-8-45

W.S.G.	\$ 191.19
L.P.C.	71.20
Other Credits	33.74
Total	<u>296.13</u>
Prev. dist.	104.94
This dist.	191.19

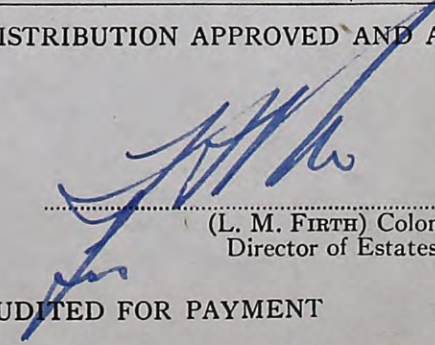
SHARE	RELATIONSHIP	NAME AND ADDRESS	AMOUNT
1/2	Father	Kenneth F. Mason, 399 Mc Donald St., NEW GLASGOW, N.S.	95.60
1/2	Mother	Mrs. Phyllis Mason, (As above)	95.59
		(As next of kin entitled)	

P4. TO TREAS.

14/8/45

AUTHORITY					
H.Q. F.E. No.	VOTE	PRI	H.Q. SUB.	OBJ.	AMOUNT
9999	831	00	50	000	\$191.19
CLASSIFIED BY 			EXAMINED BY		
			For Chief Treasury Officer		

DISTRIBUTION APPROVED AND AUTHORIZED


(L. M. FIRTH) Colonel
Director of Estates

AUDITED FOR PAYMENT

.....
For Chief Treasury Officer

H.Q. N.S. V-60221

ESTATES BRANCH

16th August, 1945.

Mr. Kenneth F. Mason,
399 McDonald St.,
New Glasgow, N.S.

MASON Glenn C. STO I/C (Deceased)
No. V-60221 R.C.N.

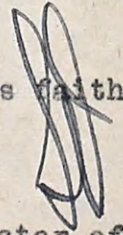
Dear Mr. Mason:

The War Service Gratuity due to your son has been determined in the amount shown on the attached award form.

As your son died without having made a will, this amount is distributable in accordance with the intestacy laws of his province of domicile, which provide that you share equally with your wife, Mrs. Phyllis Mason.

A cheque has been requisitioned from Treasury payable to your order for your one-half share, and upon receipt of same will you kindly sign and return the enclosed form of acknowledgment to this Branch.

Yours faithfully,


Director of Estates.

ENC:
HLV/MM

MEDICAL EXAMINER'S REPORTS

Halifax, N.S. August 6, 1944.

I have enquired into the death of V-60221, Stoker Glen Campbell Mason, at Halifax, N.S. on August 5, 1944, and I have examined the body.

The body is identified by members of the staff of the Victoria General Hospital, Halifax.

It is stated that deceased was an occupant of a stolen car in the evening of August 5, 1944. While speeding, the car struck a curb on Spring Garden Road, Halifax, and overturned several times. Deceased was taken to hospital but not admitted as death had occurred before arrival. Body was placed in the morgue.

The body is that of a well developed white male corresponding in appearance to about the stated age of nineteen years. Clothing is naval uniform. Head is covered with blood clot. There is a fracture and a large hole in the right parietal region of the skull and extensive laceration of the skin and a little splintering of surface bone over the right mastoid region. The left side of the chest is crushed in front and ribs fractured from the fifth down.

The sum of Three Dollars and thirty-one cents and two tram tickets were taken from the clothing and handed over to the Provincial Secretary in accordance with provisions of the Medical Examiner Act. A ring was left in position on one hand.

In my opinion death was the result of the head and chest injuries above described. These injuries are such as could have been caused in the manner above suggested and are sufficient in themselves to have caused death. Death was accidental.

Signed "F. W. Woodbury" M.D.,
Medical Examiner for the City
of Halifax and town of Dartmouth.

Evidence of Lieutenant Clarke Hamilton Gosse, Royal Canadian Naval Volunteer Reserve, of H.M.C.S. "STADACONA".

NAME: LIEUT. CLARKE H. GOSSE, R.C.N.V.R.

Called and examined by the Board, testified as follows:

-
- 1 Q Are you Lieutenant Clarke Hamilton Gosse, Royal Canadian Naval Volunteer Reserve?
A Yes sir.
 - 2 Q Where are you presently serving?
A In H.M.C.S. "STADACONA", sir.
 - 3 Q What are your duties there?
A D.E.M.S. Training Officer, sir.
 - 4 Q Where were you at approximately 2200 on 5th. August, 1944?
A On Spring Garden Road opposite the Public Gardens.
 - 5 Q Did you see any unusual occurrence there?
A Yes sir.
 - 6 Q Will you describe to the Court exactly what happened?
A The first thing I saw was a car standing practically on its front wheels, and then starting to turn, and it rolled sideways.
 - 7 Q Where was that car?
A Approximately between Tower Road and South Park Street on Spring Garden road, heading west.
 - 8 Q Will you continue please?
A Well, the car turned sideways and turned over three times and ended up on its four wheels facing south and a bit towards the west on Spring Garden Road. I went to the car and looked in the front seat and there was nobody there. By that time people had gathered and someone said there was a hand sticking out from underneath the car, whereupon the crowd of people there at that time turned the car over on its side, showing a Naval rating underneath the car.
 - 9 Q How many Naval ratings did you see near the car at the moment of the accident?
A I saw none, sir.
 - 10 Q When you saw the car turn over did you notice how many occupants there were?
A No, I couldn't see, sir; I was about fifty feet from it.
 - 11 Q Did you see anyone walking away from the car after?

- A After the car had stopped, sir, I would say no one got out on the right hand side of the car, which was the side facing me.
- 12 Q Could you see the left hand side of the car?
- A No sir.
- 13 Q Was the rating under the car alive or dead when you saw him, do you know?
- A Well I couldn't give an opinion, but I thought that he was dead. He was bleeding from both ears and from the nose, and I immediately went for a doctor.
- 14 Q Did you see anything that would indicate that the rating whom you found under the car had been driving that car?
- A Nothing whatsoever, sir.
- 15 Q Did you make any attempt to identify the rating?
- A No.
- 16 Q Will you continue please?
- A The doctor pronounced the man dead, and then Commander McEwen and a Surgeon-Lieutenant from a ship appeared on the scene, and the civilian doctor turned the case over to Commander McEwen.
- 17 Q I think this question was asked before, but you saw no one thrown from the car during its turning over?
- A No sir.
- 18 Q Who was the doctor who first saw the body?
- A Dr. Gosse, sir.
- 19 Q Did he examine the body?
- A The doctor arrived on the scene probably ten to fifteen seconds before I did because I went into his house to get a flashlight.
- 20 Q So you don't know?
- A When I arrived back I asked him what the man's condition was, and he said he was dead.
- 21 Q How long was it after that when Surgeon Commander McEwen appeared?
- A Almost immediately, sir; I pointed him out to the civilian doctor.
- 22 Q And did Surgeon Commander McEwen then take charge?
- A The three doctors remained on the scene until the man had been moved away in the ambulance. The

civilian police actually took charge.

23 Q They took charge, but what other Naval doctor was there?

A I don't know his name, sir. He said he was off a ship. Dr. Gosse spoke to him and he said he was off a ship, and he said "Surgeon Commander McEwen is here".

24 Q And did Surgeon Commander McEwen examine the body?

A Not in my sight, sir. The civilian doctor told me he just lifted an eyelid and that is all.

25 Q Did you see any signs of liquor in or near the car?

A Yes sir.

26 Q What did you see?

A A bottle on the right hand side of the car, sir.

27 Q Was it broken?

A I couldn't say that sir, it was fairly dark and I just saw the bottle.

28 Q Did you see the label?

A No, but I could smell it, sir.

29 Q What did it smell like?

A It just smelled like liquor.

30 Q You don't know what it was?

A Well, no---it was mixed with gasoline.

31 Q Did you see any other evidence of liquor?

A None, sir.

32 Q The smell of liquor was in the air I presume, along with gasoline?

A That is right.

33 Q This man who was under the car---from his position would you say it was quite possible for him to have come out of the car, or would it have been?

A Well, it is hard to say. The man could fly out of the car and then be hit on the next turn of the car, but he was directly under the car, and it was sitting on its four wheels.

34 Q The car was on its side?

A No, the car wasn't on its side until it was turned on its side by the crowd of people.

35 Q It was on its four wheels?

A When the car ended up, stopped, it was sitting on its four wheels.

WITNESS WITHDREW.

A I heard him say later he got a faint flicker,
just very faint.

85 Q Do you know who that Sick Berth Attendant is?

A No. He was at the Police Court following the
accident, he was there for a time, he hung around
there quite a time waiting for the detectives and
special investigators to come back, and they
allowed these two Sick Berth Attendants to go,
and I don't know if they came back later or not.
I didn't see them.

WITNESS WITHDREW.

Evidence of William Earl Boyd, Acting Shipwright 4th. Class,
Official Number V-84627, of H.M.C.S. "SCOTIAN".

NAME: WILLIAM E. BOYD, A/SHPT. 4/c, V-84627.

Called, examined by the Board, testified as follows:

86 Q Are you William Earl Boyd, Acting Shipwright
4th. Class, Official Number V-84627?

A Yes sir.

87 Q Where are you serving?

A I am with the Shipwright Department in H.M.C.S.
"SCOTIAN".

88 Q Have you any specific duties there?

A I am on one of the ships as a welder, and every-
thing else that comes my way combined.

89 Q Where were you at approximately 2200 on 5th.
August, 1944?

A I was proceeding west on Spring Garden Road at the
Park sir.

90 Q That is toward the Arm?

A Yes.

91 Q Which side of the road were you on?

A On the north side.

92 Q That is next to the park?

A That is right, sir.

93 Q Did you see an accident there?

A Yes sir I did.

94 Q Will you tell the Board what you saw?

- A I was proceeding west on Spring Garden road on the north side of the street. I would say I was approximately 40 to 50 feet from Spring Garden and I believe it is South Park Street, when I heard a shout behind me. I turned in time to see an automobile strike the north-west curb. The car immediately careened towards the centre of the road and began to roll over. As soon as the car began to roll I started to run toward where I figured the car would end up. While going to the car I passed a sailor staggering away from it, approximately I would say 10 feet from it.
- 95 Q Did you see the sailor get out of the car?
- A I didn't see him get out, sir.
- 96 Q Would you recognize him if you saw him again?
- A No I would not.
- 97 Q Did he appear to be hurt?
- A No, he didn't show any signs of being hurt other than he staggered slightly, possibly through injury, being dazed, or something in that condition. I was the first person to reach the car and I passed right by the sailor. The first thing I noticed was two feet and a hand of a person protruding from under the running board on the west side of the car.
- 98 Q The car was upright on its four wheels?
- A Yes, the car was upright on its four wheels.
- 99 Q Was it on the road or the sidewalk?
- A No, it was approximately in the centre of the street between the car tracks.
- 100 Q It was in the middle of the road?
- A Yes.
- 101 Q Not on the sidewalk?
- A No, the car was in the middle of the road.
- 102 Q That was after the wreck?
- A Yes, immediately when it came to a stop. By this time another chap had joined me and we tried to move the body of the victim and we couldn't do so, and at this time quite a crowd had gathered and we pushed the car over on its left side again so that we could get at the chap that was underneath. We immediately noticed that he was badly hurt and I felt for his pulse and found no pulse at all. By that time a doctor had come to the scene and he took over looking after the body and also some Naval surgeon came along, so they took over from there on.

- 103 Q Would you say that it was possible for the man you saw under the car to have been driving, or to have been in the car at the time of the accident?
- A My theory on it sir is that he would be a passenger in the car.
- 104 Q Why?
- A Because when the car began to roll on the first roll over the door flew open.
- 105 Q On which side?
- A The front right hand side where the passenger would be riding, and I imagine possibly on the first roll he may have struck his head, which rendered him partially unconscious, and on the second roll he would be thrown clear of the car. The other occupant of the car I imagine would be the driver and he would have the steering wheel to brace himself with.
- 106 Q Was the steering column broken?
- A I didn't notice it at all sir.
- 107 Q You think very likely that he was the occupant?
- A Yes.
- 108 Q That he was a passenger?
- A Yes sir.
- 109 Q You say the door opened---did you see anybody inside the car?
- A No I did not.
- 110 Q You didn't see how many people there were in the car?
- A No, you see the back was towards me and it started to roll. It rolled approximately 100 to 125 feet past me, perhaps more.
- 111 Q Did you see from what direction the sailor came that passed you?
- A From the car?
- 112 Q Yes?
- A Well, I was going to the car from the north side, I was proceeding south, and he would be proceeding in a north-easterly direction.
- 113 Q Did you see from what side of the car he came--- did you see him get out of the car?
- A No I didn't see him get out of the car, but he came from the right hand side or the west side of the car.
- 114 Q That would be the passenger's side he came from?

- A Yes, that is right sir.
- 115 Q Did you see any signs of liquor in or near the car?
- A No I didn't, I didn't look for that at all sir.
- 116 Q Did you smell any?
- A No sir, the main smell at that time was gasoline---
it was all over the place.
- 117 Q From the position of the car in relation to your
position at the time you were approaching it, would
it have been possible for the rating you saw
standing on the road there to have gotten out of
the open door without you seeing him?
- A Yes it would be sir, I was approaching the car from
the rear end.
- 118 Q Did you see anyone else take the pulse of the man
that was under the car? Do you know if you were
the first to take it?
- A I believe I was the first, sir, then there was
two Sick Berth Attendants came along.
- 119 Q Do you know who they were?
- A I don't know sir, they were off a ship.
- 120 Q Have you ever taken anybody's pulse before?
- A Yes sir I have. I have had considerable experience
with first aid, and before joining the Navy I was
two years in aircraft work, flying and the
mechanical end of it, and during that time I had
reason to use that method through accidents we
had at the airfield.
- 121 Q You are positive when you took the man's pulse there
was no pulse there---in other words the man was
dead?
- A That is my opinion, either that or it was so faint
you couldn't feel it at all.
- 122 Q You, as far as you know, were the first person to
take his pulse?
- A I believe I was.
- 123 Q Did you look at him carefully when you took his
pulse; was there any external appearance of
injury?
- A Yes sir, I felt his pulse first at the wrist, that
would be his right arm, and then I felt for a
pulse at the neck, and there were no external
breaks in the skin that I noticed at that time,
other than there was blood coming from his mouth
and ears and nose. At the back of his head there
was quite a dent in his skull.
- 124 Q You saw that?
- A I saw that sir, yes, and it was that I imagine

that would cause the concussion, whereas the blood would come from the external openings in the head.

125 Q Which way was the car pointing when it finally stopped?

A It was pointing south, more shall we say south by south-west.

126 Q In other words it was diagonally across the street?

A Yes, not quite a direct diagonal.

127 Q Which door was open on the car?

A It would be the right hand front door, it was smashed right up tight against the body.

128 Q It had been turned right back against the body you mean?

A Yes sir.

129 Q The body of the car?

A Yes sir, towards the fender.

130 Q Did you try any of the other doors?

A No I didn't, sir. We pushed the car off the chap immediately, and therefore the doors would be two under and two up in the air.

131 Q You can't think of anything else you wish to say?

A I don't think so sir.

WITNESS WITHDREW.

Evidence of Surgeon Commander Charles S. McEuen, M.D.C., Royal Canadian Naval Volunteer Reserve, of H.M.C.S. "CORNWALLIS".

NAME: SURG. COMMANDER CHARLES S. MCEUEN, R.C.N.V.R.

Called, examined by the Board, testified as follows:

132 Q Are you Surgeon Commander Charles S. McEuen, M.D.C., Royal Canadian Naval Volunteer Reserve?

A I am.

133 Q Where are you serving at the present time?

A You mean what ship am I on?

134 Q Yes?

A "CORNWALLIS", but I am actually on leave at the moment.

135 Q Would you tell the Board where you were about 2200 on

FH/VD

113-A-1625

NS: 113-M-7277

19th May, 1943.

6

MEMORANDUM:

The enrolment of the undermentioned ratings
in the **HALIPAX** Division, R.C.N.V.R., is approved:

<u>NAME</u>	<u>RATING</u>	<u>O.N.</u>	<u>DATE</u>
ARCHIBALD, Samuel Vincent	Stoker 2/c	V60215	28 Apl '43.
VEINOTT, Arnold Leroy	Ord. Snn.	V60216	30 Apl '43.
RYAN, Bernard	Ord. Snn.	V60217	29 Apl '43.
ROSS, Archibald Franklin	Stoker 2/c	V60218	30 Apl '43.
MURPHY, Alexander Lengard	Ord. Snn.	V60219	29 Apl '43.
JESSOME, Patrick Ambrose	Ord. Snn.	V60220	29 Apl '43.
MASON, Glenn Campbell	Stoker 2/c	V60221	24 Apl '43.
FORSE, Ronald Barton	Ord. Coder	V60222	29 Apl '43.
DALTON, James Francis	Ord. Snn.	V60223	30 Apl '43.

BY ORDER,

Thos. L. Brandson

for

SECRETARY, NAVAL BOARD.

The Commanding Officer,
H.M.C.S. "STADACONA".

[Signature] P.R.

OTTAWA, Ont., 7 August,
N.S.
V-60221 PERS. (N)

4

15

Dear Sir:

The undermentioned Canadian Naval Casualty is forwarded to you for transmission to the Inspector of Income Tax concerned:

Name... **MASON** **Glenn Campbell**
(Surname) (Christian Names)

Rank/Rating ... **Stoker First Class**

Official No.... **V-60221, R.C.N.V.R.**

Nature of Casualty .. **Died due to automobile accident**

Date of Casualty .. **5 August, 1944**

Address at time of Enlistment .. **399 MacDonal. Street**

..... **New Glasgow, N.S.**

Marital Status at time of Enlistment... **Single**

Occupation.. **Fire truck driver**

Name & Address of Next of Kin ... **Mother: Mrs. Phyllis Mason,**

..... **399 MacDonal. Street, New Glasgow, N.S.**

Yours truly,

J. B. Money

for

SECRETARY, NAVAL BOARD.

The Deputy Minister (Taxation),
Department of National Revenue,
Ottawa, Ont.

nd

B.D.
7/9/44
NPR
e

N.S. V-60221 PERS. (N)

① D.N.P.A.
② P & N.H.

27

11 September, 1944.

Dear Mrs. Mason:

For the information of the Imperial War Graves Commission, who is charged with the responsibility of permanently marking, by the use of a uniform type of headstone, the graves of all members of His Majesty's forces who die on service in the war, it would be appreciated if the following information respecting your son's burial might be forwarded to this Department:

Name of the Cemetery:

Date of Burial:

Location, Number, etc., of grave:

Undertaker employed:

Yours sincerely,

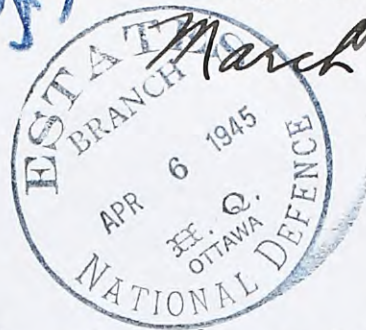
for
SECRETARY, NAVAL BOARD.

Mrs. Phyllis Mason,
399 MacDonald Street,
New Glasgow, N.S.



B2
New

399 Macdonald St.,
New Glasgow, N.S.,
March 28, 1945.



Director of Estates,
Department of National Defence
for
Naval Service
Ottawa.

Mason, Glenn C., Sto. 1 (Deceased)
No. U-60221, R.C.N.V.R.
File - H.Q.N.S. U60221 F.D.542 -

Dear Sir:

Enclosed you will find signed receipt forms in connection with my son's Service Estate.

At the time of my son's death the Commanding Officer at H.M.C.S. Stadacona advised us by telegram that we would receive a grant of Twenty-five Dollars towards his funeral expenses. We have not received this grant at time of writing nor is it included in his Service estate. Would you kindly look into this matter for me.

Yours truly
(Mrs.) Phyllis Mason.

Encl. 2.



Department of National Defence

Naval Service

IN REPLY PLEASE QUOTE

NO. N.S. V-60221 PERS. (N)

OTTAWA, Ont., 7th August, 1944.

111365



Sir:

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

<u>NAME, RANK/RATING NO.</u>	<u>PLACE, DATE & CAUSE of DEATH</u>	<u>NEXT OF KIN</u>
MASON, Glenn Campbell, Stoker First Class, V-60221, R.C.N.V.R.	Died in Halifax, N.S., 5th August, 1944, due to automobile accident.	MOTHER: Mrs. Phyllis Mason, 399 MacDonald St., NEW GLASGOW, N.S.

<u>IN FAVOUR OF</u>	<u>ALLOTMENT</u>	<u>AMOUNT</u>	<u>INITIALS</u>
Receiver General of Canada, for Sixth Victory Loan, Ottawa, Ont.	\$16.80	\$16.80	DMD <i>DMD</i>

WILL: No Record.

Yours truly,

H.B. Money

for
SECRETARY, NAVAL BOARD.

Administrator of Estates,
Estates Branch,
Department of National Defence,
O T T A W A.



TO: SAC, [illegible]
FROM: [illegible]

SUBJECT: [illegible]

DATE: [illegible]

IN THE MATTER OF [illegible]
[illegible]

[illegible]

[illegible]

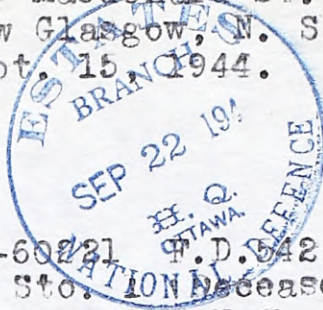
LIST OF PERSONAL EFFECTS BELONGING TO GLEN CAMPBELL MASON,
STOKER 1ST. CLASS, OFFICIAL NUMBER V-60221 (DECEASED):-

2 combs
3 silk scarves
3 wash rags
1 leather jacket
2 suede jackets
1 flannel shirt
1 pair leather gloves
3 work shirts
1 dungaree
1 wool scarf
2 yards serge
1 money belt
1 pr. pyjamas
1 laundry bag
1 sewing kit
1 pr. suspenders
4 underwear tops
6 handkerchiefs
1 sweat shirt
1 leather belt
2 underwear shorts
2 pr. socks
1 Red Cross bag.
2 writing pads
1 brown suitcase
1 pr. leather gloves
1 single leather glove
1 shoe shine kit
1 ring
1 padlock
1 picture of ship
1 diary
1 pr. socks
1 plug tobacco
1 dictionary
1 ruler
1 nail set (tweezers, scissors, nail file).
1 deck cards
1 wrist watch
1 cigaret lighter
1 black leather wallet
1 brown leather wallet
1 cigaret case
1 clothes brush
1 hair brush
2 flashlights
1 pocketknife
5 note books
1 package of letters

399 Macdonald St.,
New Glasgow, N. S.,
Sept. 15, 1944.

Director of Estates,
Naval Services,
Dept. of National Defence,
Ottawa.

H.Q. N.S. V-60221
MASON, G.C. (deceased)
No. V-60221 R.C.N.V.R.



Dear Sir:

I received the personal effects of my late son for which I thank you. I was disappointed that there were none of his Navy clothes as I would like to have had at least his Navy cap. But I know that is impossible now.

However, I have a request to make which I hope you won't consider too odd. There was a very nice little picture of my son on the Navy identification card that he carried in his billfold, but this card had been removed from same before sending his effects. Would it be possible to get the proof of this picture or could you direct me to whom to write regarding it.

My son was infortunate in getting leaves while serving with the Naval Forces and we did not get an opportunity to get pictures of him - thus any little one is very precious to us. He was our only child.

If you could give me any information about this matter, it would be deeply appreciated by

Yours truly,

(Mrs.) Phyllis Mason

ESTATES BRANCH

HQ.NS. V-60221 FD.542

September 29, 1944.

Mrs. Phyllis Mason,
399 Macdonald Street,
New Glasgow, N.S.

MASON, Glenn Campbell, Sto.1 (Deceased)
No. V.60221, R.C.N.V.R.

Dear Mrs. Mason:

This will acknowledge receipt of your letter of the 15th instant returning completed receipt form for the personal effects delivered to you, and I hasten to advise you that no articles of uniform were included with the personal effects when received here, as you seem to have been disappointed at not receiving any.

Your request regarding a photograph of your late son, which was apparently used in his Identification Card, will be referred to the Personnel Identification Bureau at Headquarters here, and I trust you will hear from the Department in due course regarding this. I see no reason why you should not be supplied with a copy of the photograph, if the negative still remains at Naval Service Headquarters.

The finalized statement of pay and allowances has not yet been received at this Branch to admit of distribution, but as soon as particulars of same are received a further communication will be sent to you.

Yours faithfully,

J. H. Mason
Director of Estates.

HRW/JN

2265

Six copies to be rendered to Naval Service Headquarters

REPORT OF THE DEATH OF AN OFFICER, MAN OR BOY

H.M.C.S. STADACONA at Halifax, N. S. 25

Name MASON Glenn Campbell
(Christian names in full)

Rank of Rating Stoker I Official No. V-60221 R.C.N.V.R.
(If unknown, date of first entry)

Place of Birth New Glasgow, N. S. Date of Birth 27th September, 1923.

Occupation in Civil Life Fire Truck Driver Religion Church of England

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) 1 yr. 4 mos.

Date of Death August 5th, 1944 Place of Death Halifax, N. S.

Cause of Death Killed in car accident in Halifax.
(If due to accident, violence, or enemy action, particulars to be stated briefly)

Nearest known relative or friend { Name Mrs. Phyllis Mason Relationship Mother
Address 399 MacDonald St.,
New Glasgow, N. S.

Date on which the above was informed by Ship August 5th, 1944

Date on which death was registered with local Officials August 7th, 1944

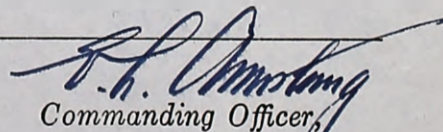
In the case of Imperial Service men, whether Active Service, Pensioner or Reserve, date on which the prescribed return was rendered to the Registrar General in London, Edinburgh or Dublin, according to Nationality.....

Place of Burial New Glasgow, N. S. Date of Burial Not known
(if known) (if known)

Location, Number, etc., of grave Not known
(if known)

Undertaker employed Cruikshank's Funeral Home, 416 Robie St., Halifax, N. S.
(if any)

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


Commanding Officer

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

If a copy of this Form is required, Form C.N.S. 1243 is to be used

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.

CERTIFICATE of the Service of

Glenn Campbell MASON

IN THE ROYAL CANADIAN NAVAL Volunteer Reserve

<i>Halifax Nova Scotia</i>	<i>Halifax Division</i>	Official Number <i>✓ 60221</i>
--------------------------------	-------------------------	--------------------------------

Date of birth <i>27 September, 1923</i>	Nearest known Relative or Friend (To be noted in pencil) <i>15/1/43</i>
Where born { Province <i>Nova Scotia</i>	Name: <i>Mrs Phyllis Mason</i>
{ Town or county <i>New Glasgow, Pictou Co.</i>	Relationship: <i>Mother</i>
Trade brought up to <i>Fire Truck Driver</i>	Address: <i>399 Macdonald St. New Glasgow, NS</i>
Religious denomination <i>Church of England</i>	
Date passed swimming test	
Man's signature on discharge to pension }	

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. <i>24 April</i>	<i>1943</i>	<i>Host.</i>	5.		
2.			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		Chest, In.	Colour of			Marks, Wounds and Scars
	Feet	In.		Hair	Eyes	Complexion	
On entry as a boy	<i>5</i>	<i>7</i>	<i>35½</i>	<i>Blond</i>	<i>Blue</i>	<i>Fair</i>	<i>Nil</i>
On advancement to man's rating or on entry under 28 years.....							
On re-entry for C.S. or for Non-C.S. after attaining 28 years.....							
Further description if necessary....							

STATEMENT OF ACCOUNT

30

True extract from the ledger of H.M.C.S. " STADACONA " ending 30 Sept 1944.

List 5A2 No. 736 (Name) MASON Glenn Rank Rating Sto 1 No. V-60221

When entered PM 6 Aug Date of appearance 6 Aug Whither discharged D.D.

	\$	c.
CREDIT from former account.....	18.	63 ✓
Pay as <u>Sto I</u> from <u>6 Aug</u> to <u>31 Aug</u> (<u>26</u> days at \$ <u>2.00</u> a day) ✓	52.	00 ✓
“ (Rank Rating) “ “ “ “ “).....		
“ “ “ “ “ “).....		
“ “ “ “ “ “).....		
“ “ “ “ “ “).....		
Kit Upkeep Allowance.....	4.	44 ✓
OTHER CREDITS:..... <u>Grog M.</u>		06 ✓
Total credits.....	75.	13 ✓

DEBT from former account.....

PAYMENTS:—	INCLUSIVE DATE							
	1st	2nd	3rd	4th	5th			
	\$ c.	\$ c.	\$ c.	\$ c.	\$ c.			
1st month.....						Total.....		
2nd month.....	58.33	Official Receipt # 162/16247				Total.....	58.	33 ✓
3rd month.....						Total.....		
Allotment.....			16.80				16.	80 ✓
Pension deduction (Officers) charged to..... of.....								
Hospital stoppages.....								
Mulcts.....								
OTHER CHARGES:.....								
						Total debits.....	75.	13 ✓
						Balance Cr. or Dr.	NIL	

L
A
M

(Balance Dr. to be shown in red)

Number of days actually victualled during period mentioned above (0)

NOT VICTUALLED

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

Date 21 August 1944

W. C. Salmon
Pay Lieut RCNVR for ACCOUNTANT OFFICER

DC

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

4
 NAVY

DECEASED MEMBER'S NAME **Glenn Campbell** (CHRISTIAN NAMES) **MASON** (SURNAME)
 PAYEE **Director of Estates,** **for Service Estate of**
 ADDRESS **308 Sparks St.,** **Glenn C. MASON,**
Ottawa, Ont. **NSV-60221**
 DATE OF TERMINATION OF OVERSEAS SERVICE **5 Aug/44** DATE OF DISCHARGE **5 Aug/44**
 REGISTER NO **188**
 FILE NO **NSV-60221**
 DATE **19 June/45**
 SERVICE NO **V-60221**
 FINAL RANK OR RATING **Sto.1/c**

A. TOTAL QUALIFYING SERVICE		NO. OF DAYS 418	EQUAL TO 13	COMPLETE PERIODS AT \$7.50	\$ 97.50
B. QUALIFYING OVERSEAS SERVICE		NO. OF DAYS 275	LESS 28	INELIGIBLE DAYS, EQUAL TO 247	DAYS @ 25c. PER DAY 61.75
C. SUPPLEMENT FOR OVERSEAS SERVICE					
DAILY RATES AT DISCHARGE					
	PAY	\$	2.00		
	SUBSISTENCE OR LODGING AND PROVISION ALLOWANCE	\$	1.25		
	ADDITIONAL PAY	\$	H.L.M. .13		
		\$			
		\$			
	DEPENDENTS' ALLOWANCE 1/30 OF \$	\$			
	TOTAL	\$	3.38	x7 = \$	23.66
	NO. OF DAYS	247		x \$	23.66
			183		31.94
D. WAR SERVICE GRATUITY					191.19
E. DEDUCTIONS		OVERPAYMENT OF	PAY AND ALLOWANCES \$		
			DEPENDENTS' ALLOWANCE \$	NIL	
			AND ASSIGNED PAY \$		
		OTHER DEDUCTIONS	\$		
F. TOTAL AMOUNT PAYABLE					191.19

G. YOUR PORTION OF GRATUITY IS—

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

= \$ **191.19**

Voucher 859 28/6/45.

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	
DHJ		<i>[Signature]</i>		DATE	
		<i>[Signature]</i>		<i>20/6/45</i>	

FOR Dir. Naval Pay Accounting. SERVICE REPRESENTATIVE

STATEMENT OF WAR SERVICE GRATUITY - NAVY

Deceased Name Glenn Campbell MASON
 (Christian Names) (Surname)

Payee Director of Estates for service estate of
 Address 308 Sparks St. Glenn C. MASON
Ottawa, N.S. V60221.

Register No. 188
 File No. V60221
 Date 10 April 45
 Service No. V60221
 Final Rank or Rating STO. 1/c
 Date of Discharge 5 Aug 44

Date of termination of overseas service 5 Aug 44

A. TOTAL QUALIFYING SERVICE
 No. of days 418 equal to 13 complete periods at \$7.50
 30 \$ 97.50

B. QUALIFYING OVERSEAS SERVICE
 No. of days 275 less 28 ineligible days equal to 247 days @ 25¢ per day \$ 61.75

C. SUPPLEMENT FOR OVERSEAS SERVICE
 DAILY RATES AT DISCHARGE

Pay	\$ 2.00	
Subsistence or Lodging and Provision Allowance	\$ 1.25	
Additional Pay	H.L.M. .13	
Dependents' Allowance 1/30 of \$	- - -	23.66
Total	3.38	x 7 = \$ 23.66
No. of days	<u>247</u>	x \$ 23.66
	183	<u>23.66</u>

31.94

D. WAR SERVICE GRATUITY ~~189.95~~

E. DEDUCTIONS
 OVERPAYMENT OF PAY AND ALLOWANCES \$
 DEPENDENTS' ALLOWANCE AND ASSIGNED PAY \$ 191.19
 OTHER DEDUCTIONS \$

F. TOTAL AMOUNT PAYABLE 191.19

G. YOUR PORTION OF GRATUITY IS
 Dependents' Allowance in issue to you \$ _____ of \$ = \$ 191.19
 Total Dependents' Allowance in issue \$

CERTIFICATE: I certify that the amount has been correctly computed and is payable in accordance with the terms of the War Service Grants Act, 1944 and the regulations issued thereunder.

Prepared by	Checked by	Treasury	
		Checked by	Date

Service Representative

D.N.P.A. CHECK

1	<u>BNJ</u>	6	<u>[Signature]</u>
2	<u>[Signature]</u>	7	<u>[Signature]</u>
3	<u>[Signature]</u>	8	<u>[Signature]</u>
4	<u>[Signature]</u>	9	<u>[Signature]</u>
5	<u>[Signature]</u>	10	<u>[Signature]</u>

V60221

OFFICIAL NUMBER

NAME MASON
(Surname)

Glenn Campbell
(Given Names)

OFFICIAL NUMBER

V60221

PIB

Ship or Establishment	Rating	From			Remarks	Character	Efficiency	Date			Non-Sub. Rating	Qualified			Re-Qualified		
		Day	Month	Year				Day	Month	Year		Day	Month	Year	Day	Month	Year
Div. Str. Halifax	Sto. II	21	1	43		V.G.	Sat.	31	12	43							
H.M.C.S. Stadacona	"	15	6	43	DRD H-1812 Active Service.	V.G.	Sat.	5	8	44							
H.M.C.S. Protector II	"	19	6	43	DRD H-1841												
Cornwallis	"	4	8	43	WRD #23.												
Stadacona	"	1	10	43	DRD H-2766												
Grandmere	"	5	11	43	DRD H-5116												
"	Sto 1/c	14	3	44	Rated 249A/A 4524												
DISCHARGED:	"	5	8	44	"Dead" (Accidentally Killed) W/T.060425Z/8/44.												

GENERAL REMARKS

CANADIAN MEMORIAL CROSS sent to:-
 Mother,
 Mrs. Phyllis Mason,
 399 MacDonald Street,
 NEW GLASGOW, N.S. (14-9-44).

DATE OF BIRTH			PLACE OF BIRTH		CIVIL OCCU.		RELI.	ED	PERM. RESIDENCE			PREV. ENL.	RANK OR RATE ON ENLISTMENT		
DY.	MO.	YR.	BIRTH	MAIN	SUB	GION	R	CTV	TOWN	SERV	DIV.	A	BR	RANK	
27	9	23	14	580	0	30	3	4	13	01	0	19	0	15 95	
ENLIST. DATE			ACT. SERV. DATE			STR.	ACT. SERV. DATE			SHIP OR ESTAB.		RANK OR RATE			
DY.	MO.	YR.	DY.	MO.	YR.	CAT.	DY.	MO.	YR.	ESTAB.		A	BR	RANK	
24	04	43	15	06	43					3280		0	15	95	
SENIORITY			STR.	NON-SUB		M				CODED		CHECKED			
DY.	MO.	YR.	CAT.	A	B	ST.									
15	06	43	13	00	00		Mason			EX					

V60221

OFFICIAL NUMBER

FILE NUMBER

113-M-7277

OFFICIAL NUMBER V60221

NAME MASON (Surname) Glenn Campbell (Given Names) DATE OF BIRTH 27 Sept. 1923PLACE OF BIRTH New Glasgow, N.S. OCCUPATION Fire truck driverRELIGION C. of E. EDUCATION Grade 10RESIDENCE AT TIME OF ENLISTMENT: Street and No. 399 MacDonald St. Town New Glasgow, Province, etc. N.S.

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
24	4	43	H.O.	5' 7"	blond	blue	fair	nil				

NEXT OF KIN RELATIONSHIP (in pencil) mother NAME (in pencil) Mrs Phillip MasonADDRESS (in pencil): Street and No. 399 MacDonald St. Town New Glasgow, Province, etc. N.S.

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	
				18	6	43	Qual. Anti-Gas 1 day, 249A/28428.				

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.	

SECOND CLASS FOR CONDUCT

From

To



FILM
NO. W6021-5
D. FE