

O44950

P 646257EBER	IOE
OCCUPATIONAL HISTORY FORM	1119
THIS FORM IS TO BE COMPLETED FOR FACH MEMBER OF THE ARMED FORCES. THE INFORMATION SOUGHT IS FOR THE USE OF GENERAL ADVIS MITTEE ON DEMOBILIZATION AND REHABILITATION, A COMMITTEE SET UP BY THE GOVERNMENT OF CANADA TO STUDY PLANS FOR ESTABL INDUSTRIAL LIFE THE MEMBERS OF THE ARMED FORCES, AFTER DISCHARGE. ACCURACY AND COMPLETENESS IN ANSWERING WILL BE HELP TO THE COMMITTEE.	DRY COM-
PLEASE READ CAREFULLY THE INSTRUCTIONS GIVEN ON THE INSIDE OF COVER BEFORE COMPLETING FOR	
Section A—GENERAL INFORMATION	PLEASE
1. (a) Print name in full       (b) Unit       (c) Rank         2. (a) Arm of service       (b) Unit       (c) Rank         3. (a) Date of birth       (c) Place of residence       (c) Place of residence	BLANK
3. (a) Date of birth. Jan. 31. 17.2. any dependents?	
4. (a) Place of enlistment (b) Date of enlistment (c) Date of enlist	
5. (a) State age on (b) Were you attending school view of 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.)	
7. If you attended a university, give name of	
8. (a) Did you ever enter upon a trade apprenticeship?       (b) If so, for what       (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?       (c) Did you finish it?       (c) Did you finish it?	
Section C-EMPLOYMENT CONDITION AT TIME OF ENLISTMENT 10. (a) State whether you were WORKING or NOTWORK- (b) At time of en-	
ING at time of enlistment. (Enter here only "Work-	
ing" or "Not Working", as case may be; particu- lars are asked for below)	
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)	
<ul> <li>11. Had you ever been employed fairly regularly since leaving school?</li> <li>12. (a) If answer to 11 be "Yes", (b) State how long you</li> </ul>	2
12. (a) If answer to 11 be "res", (b) State now long you had worked at this at which you actually worked	
<ul> <li>13. If answer to 11 be "No", state exact trade or occupation for which you feel qualified</li></ul>	NK (
<ul> <li>when you last worked fairly regularly before enlistment.</li> <li>15. Give details of last employer, if any: Name</li></ul>	1
<ul> <li>16. Nature of employer's business (for instance, "farmer", or "building contractor", or "boot factory", or "iron foundry", or "retail store", etc.)</li></ul>	12
in a business of your own, state nature and address of business	14
Section E-PARTICULARS CONCERNING THOSE WHO WERE EMPLOYED AT TIME OF ENLISTMENT	1
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	11 m
	1 Car
<ol> <li>Nature of employer's business (for instance, "farmer", or "building contractor", or "boot factory", or "iron foundry", or "retail store", etc.)</li></ol>	
20. (a) Your       (b) Number of years' experience at specific occupationthis occupation with any employer	
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	5 "
22. (a) State nature of business, (b) Where was or professional practice it located?	
23. (a) Number of years (b) Have you made, or will you make plans to engaged in this business	
Section F—PARTICULARS OF FARMING EXPERIENCE 24. (a) Do you wish to engage (b) Do you feel competent (c) If so, in what in farming after the war? (b) Do you feel competent (c) If so, in what to operate a farm? (c) If so, in what	
in farming after the war?to operate a farm?kind of farming?kind of farming?kind of farming? 25. (a) Were you (b) How many years' actual (c) In what provinces born on a farm?farming experience have you had?did you have experience?	DO
Section G—MISCELLANEOUS	ay.
<ul> <li>26. Have you made any arrangements other than indicated above, for re-establishment in civil life after discharge?</li> <li>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.)</li> </ul>	H.F.
28. State any employment preference or ambition you may have, other than indicated elsewhere in this form	
	0
DATE may 23 194 / SIGNATURE / Man Maddadta	



UN 1 2 1941

Form P. 64

FOR COMPLETION AND RETURN BY

Mrs. Olga Irene Maclachlan,

....83. Cambridge Street,

-Halifax, 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. 0-44950 FD. 604

BRANCH

3

OTTAW

#### DEPARTMENT OF NATIONAL DEFENCE

ESTATES BRANCH

OTTAWA, ONT.

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

MACLACHIAN, George Alan, Lieutenant,

OCT

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.

Commander Ilc

Director of Estates.

GC/

M.F.W. 77 6-44 (4878) H.Q. 1772-39-972

## 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:

greed	12.12 AT 13.	A THE ROUTERS	INFORMANT'S ST	TATEMI	ENT
egrees of Rela- tion- ship	required to be	TIVES e accounted for	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 D	Deceased	Olg a Trene Maclachla	23	83 Cambridges Halitax N.S
2	Children of the dates of their	Deceased and Births	Alan Diann Maclachlan Aug 16th. 1944.		83 Cambridge 3 Halifax. N.
3	Father of the D	Deceased	Cdr. K.S. Maclachlan	52	18 Richelieu Plan
4	Mother of the I	Deceased	Jessie G. Maclachlan	51	" "
5	Brothers of the Deceased	Full Blood	Midshipmon W. P.Maclach. RCN	44 20	Overseas
		Half Blood	-		
. 10		v <sup>3</sup> Full	Nañcy Maude Maclachlan		
6	Sisters of the Deceased	Blood	Jassie Wendy Maclachlan	16	11 11
		Half Blood			
7	of the full or th	or sisters (whether e half blood) of the re dead, and date of	Names and ages of their children (if any)		Address of their children
			9		17. 19. 19. 19. (17.19. 19. 19. (17.19. 19. 19. 19. 19. 19.

	Full names of the deceased.	George Alan Maclachlan
	Date of his birth.	Jan 31 ST 1922
,	Place and date of his marriage.	April 10th. 1943. Halifax.
	Place and date of his parents' marriage.	April 10th. 1943. Halitax. Sept. 5th. 1918. Toronto. Oni
	PARTICULARS OF D	OOMICILE
	Place where deceased was born.	Toronto. Ont.
	State, in order, the Province, State and/or County in which he resided before enlistment and the period of time in each.	(a) Ontario. to Sept 1930, - 8.41 (b) Quebec to Sept 1936 - 6 (c) New Brunswick
5	Nature of employment before enlistment.	Student - Migill Universit
~	State whether he owned the premises in which he lived, and, if so, where situated.	No.
	Name place where deceased stated he intended to make his permanent home.	Nil.
	PARTICULARS OF	FESTATE
	Did he leave a Will? If in your custody, please forward.	As tar as I know the ast w Nas deposited at HACS Fortha about June 1943.
	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?	Parents domicile is Ontar
	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?	No marriage contract entract evattrust Co. Montreal-approx 7.800 Northrop Strong Securities Ltd. 49 Hell St. East. Toronto. 1019.99. + 150 Royal Bank of Carada Peely She Montreal- A mount not known.
	Amount of War Savings Certificates held by deceased. Indicate where located.	
	Amount of Victory Loan Bonds held by deceased. Indicate whether registered or bearer and where located.	60. — in care of Mother. See list attached.
	If deceased had life insurance, name companies and amount payable under each policy and the person named as beneficiary therein.	Nil.
	Describe other assets, if any, and estimated value thereof. Use space on page 4 if necessary.	See list attached.
	OTHER PARTICU	JLARS
	<ul> <li>Did the deceased after enlistment incur any debts for:— <ul> <li>(a) His own separate board and lodging while on service.</li> <li>(b) Service clothing and equipment.</li> </ul> </li> <li>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.</li> </ul>	No.
	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 and burial is made Overseas as well as where death occurs and zone, and if a relative has already paid those expenses the Gover authorized in the Regulations. Any amount of such expenses is	nment will reimburse such relative to the extent of the amount

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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 "Father", "Brother", etc. Widow .....of the deceased. (Signature Ulga Ture Maclachan 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. of Informant 83 Cambridge St. Halitax. N.S. Address CERTIFICATE I hereby certify that to the best of my knowledge and belief Olgo Irene Maclachlan {Name of } is the\* Widow of the Deceased See above. above described. The above Declaration was made by the Informant and signed in my presence. Dated at Halifax this day of September 19 44 Signature of Clergyman, Priest, Magistrate, Commissioner or Notary Public or Com-missioned Officer of any of His Majesty's Forces. Komachelan Qualification Commander RCNUR Address 18 Richelieu Place - Montreal 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 mit 5 1 11 17-



P 64621 -

N. V. 4

10M-4-40 (4718) N.S. 815-11-4

## ATTESTATION FORM

#### FOR OFFICERS OF THE ROYAL CANADIAN NAVAL VOLUNTEER RESERVE

#### DESCRIPTION OF APPLICANT

(A)	
and the second sec	

SURNAME MACLACHLEN	PERMANENT ADDRESS
CHRISTIAN NAME	630 Clarke Avenue,
RELIGION Church of England	Westmount, Quebec.

DATE OF BIRTH		PLACE OF BIRTH	NAME AND ADDRESS OF NEXT OF KIN		
January 31, 1922	Town County Province Country	Toronto, Ontario Canada	Father: Cgolonel K. S. MacLachlan, 630 Clarke Ave., Westmount, Que.		

#### PERSONAL DESCRIPTION

HEIGHT	CHEST	CHEST MEASUREMENT		EYES	COM- PLEXION	WOUNDS, SCARS, MARKS	
Feet5. Inches9 165	Deflated	39 37 <del>3</del> 38 <del>1</del>	Brown	Blue	Fair	Nil	
DATE OF ENROL	LMENT	RANK IN WHI ENROLLED		MARRIED, SIN WIDOWI	GLE, OR CR	TRADE OR CALLING AND IN WHOSE EMPLOY	
May 13, 1	941	Probationary Sub-Lieutens R.C.N.V.R. (Temp)		Single	, 	Student, McGill University	

#### (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 an Officer of the Royal Canadian Naval Volunteer Reserve Force, and that I accept and will abide by the rules of the said Force.

#### (3) That's (a) Ishawesnever served, and enk not serving in any Maval, Mintary, Reserve of Territorial Europe.

\* (b) I served in <u>CanadianaReserve</u> <u>Army</u> for the period shown, and attach my record of service.

\* Cross out Clause not applicable.

SERVED IN	RANK	FROM	то
Black Watch R.H.C.	2nd Lieutenant	June 194D	May, 1941

(c) I have never been rejected for 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.

Noted in Service Records by B ...

(5) On being enrolled as an Officer of the Royal Canadian Naval Volunteer Reserve, I under and bind myself:-

(a) To serve from the date thereof for as long as my services may be required, being subject to the provisions of the Naval Service Act, and of the regulations made in pursuance thereof for the governing 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 provide myself with the necessary uniform as laid down in R.C.N.V.R. Regulations.

Dated	this 13	th	of	May	 	19.41
- area						

YErryt Alan Msclachlan. Signature of Applicant.

The above declaration was made and signed in my presence this \_\_\_\_\_\_ 13th and in pairs

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nature of Enrolling Officer.

(C)

#### Sub-Lieutenant, R.C.N.V.R. OATH OF ALLEGIANCE

I. George. Alan. MacLACHLAN......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 y. Alan Macladlan.

Altevene Signature of Witness.... 

Rank\_\_\_\_\_Sub-Lieutenant, R.C.N.V.R.

.

The Oath of Allegiance may be administered by any commissioned officer of the Naval Service.

NOTE.—This form when completed is to be forwarded to Naval Service Headquarters, Ottawa, together with Certificate of medical examination B-207, and record of any previous service.

The record of previous service will be returned after examination at Naval Service Headquarters.

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## Certificate of Medical Examination of Officers, Men and Boys

NAVAL SERVICE OF CANADA

(R.C.N. OR RESERVE FORCES)

Nors-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 Mug Lachlan I. a.

t candidate for entry as \_\_\_\_\_\_ Sale - It and I believe him to be \* in all respects fit for His Majesty's Service. \_\_\_\_\_\_ He has signed He has signed unfit for His Majesty's Service for the reason stated below. 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 {Years Months	© Weight without Clothes	<ul> <li>Height with Bare</li> <li>Feet</li> </ul>	Generai Development (d)	Chest Girth	S (i) Snellen's Types (ii) Colour Vision	Vaccinated or revac- cinated for Small Date)	(? Lungs, Heart, etc.	🙃 Abdomen, Hernia, etc.	$\frac{1}{2}$ Limbs and Joints	(?) Skin	2 Ears and Hearing	<ol> <li>Testes,</li> <li>Varicocele, etc.</li> </ol>	Mouth, Teeth (No. deficient and No. efective, if any), Nove, Tonsils, etc.	a Anus, Azmorrhoids, etc.
19 4	lbs.	ft. ins.	good.	inches (a) maximum 39 minimum 373 (c) mean 1 384	right eye	1844/ clied	numel	normal	normal	normal	Hornell,	normal	Defini 0 Defer 3	normal

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

X-ray X-ray X-ray X-ray Not taken. Approved. Positive. Doubtful.	78095 Officered, Write in the appropriate notation, and any remarks necessary.	
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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.

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

Chos. C. M

2. Pp.

Signature of Candidate

edana.

Examining Medical Officer

R.C.N.V.

Can. B. 207 100 M-11-40 (7881)

N.S. 815-2-207

64622

P

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 Montreal the 15 of Ma

DEPARTMENT OF VETERANS AFFAIRS	WARDS (	NAVY	WAR SERVICE RECORDS
DECEASED 7 May 1944	1	as which as will	D.D.
·		- 41	FILE No.
MACLACHLAN George Alan	0-44950	Lt.(A/S)	
SURNAME (IN BLOCK LETTERS) CHRISTIAN NAMES	REG. No.	RANK ON DISCHARGE	C.A.S.F. UNIT
WAR SERVICE BADGE (CLASS) No. DATE DES	SPATCHED:		
ADDRESS:			
CAMPAIGN MEDALS	REGISTRATION NUM	BER AND DATE D	ESPATCHED
1939-45 Star			
Atlantic Star			
C.V.S.M. and Clasp	1000		
War Medal	41	12.	4
		03-17	179 M

(THE REVER

DVA 806

#### MEDALS AND MEMORIALS-DECEASED PERSONNEL

#### RCNVR Feb. 45 "VALLEYFIELD"

REGISTRATION No. DATE OF DESPATCH

(1)	MEDALS		
	ENTITLED TO	Mr. Kellog S. MacLachlan - Executor	MEMORIAL BAR
		83 Cambridge St.,	DATE DESP
	ADDRESS:	HALIFAX, N.S.	DATE DESI
(2)	MEMORIAL CROS		REGICAON CEEVEL
	WIDOW	Mrs. Olga I. MacLachlan	
	ADDRESS:	83 Cambridge Street HALIFAX, N.S.	<sup>(2)</sup> 10 October 1944
(3)	MEMORIAL CROS	ss	
	MOTHER	Mrs. K. S. MacLachlan	
-	ADDRESS:	18 Richelieu Place - MONTREAL, Que.	(3) 28 October 1944
-			

OFFER OF SERVICE P 64623 (NAVAL) DATE OF AFFLICATION: NAME: (Ploaso Print) George alan Mc Lacklan MAY 29 1941 ADDRESS (Stroot No.) 630 blacke ave. N.S. 103200 CANADA (City and Prov.) Westmount, Luce PHONE NO? 72. 5191. PLACE OF BIRTH: Toronto. DATE OF BIRTH: 31/1/1922. AGE: 19 SUMMARY OF NAVAL OR MERCANTILE MARINE EXPERIENCE: None ANY PHYSIC.L DEFECTS (Esp. Eyosight): None Inglish LANGUAGES SPOKEN: PROFESSION, TRADE OR OCCUPATION IN CIVIL LIFE: Student (melere) IF EMPLOYED, WHERE AND HOW: ARE YOU APPLYING FOR ENTRY AS AN OFFICER OR AFICE IS A RATING (i.o. in the ranks): BRINCH OF SERVICE DESIRED: 2 Kecutive IF YOU CANNOT BE ACCEPTED AS AN OFFICER (OR NOT IMMEDI.T.ELY) ARE YOU WILLING TO NO. ENTER AS A RATING? 15 yr Scrence - Mellill. **JDUC.TICN**: ANY OTHER SPECIAL QUALIFICATIONS LIKELY TO BE OF VALUE TO THE NAVY: Black batch (R. H.K. 2nd Link. Canadian NATIONALITY OF PARENTS:

NAME OF FATHER: / K. J. Mc Laclan 47 AGE OF FATHER:-IF DECEASED LAST OCCUPATION: -EDUCATION: -

AGE OF FATHER:-OCCUPATION OF FATHER Deputy Minista National Defence. NAME OF FATHER'S EMPLOYER:- Canadian Gov'T. and the first of the state of the second

Matriculation Junior:- Yes Senior:- Leguivalent. College Degrees:- None.

EVIDENCE OF LEADERSHIP:-

Slack watch (R. H. K.) 2nd fient.

A PARTICIA PARA

YACHTING EXPERIENCE:-

YACHT CLUB MEMBERSHIP: -EFFICIENCY :--SUJTABILJTY: -

No. Contraction of the R.

and a second a second

Ottawa, Ont.		2nd.Battalion	ORIGINAL         ACTIVE MILITIA OF CANADA         READ INSTRUCTIONS ON BACK         Lion       Squadron, Battery or Company         *The.Black Watch(Royal Highland Regiment)of				H.Q. M.D. M. 11-M-1456 Canada Regin				
Headd	quarters at Montreal		Provin	nce of	Quebec	2		Date2	0 June		
1	2	3	4	5	6	7	8 Military	9 QUALIFICATION	10	11	12
Present Rank	(The whole name in full, Surnam (IN BLOCK CAPITALS)	e last) Profession or Occupation	Residence and Post Office Address <u>IN FULL</u>	Native Country (if born abroad state if British Subject)	Date of Birth	Married or Single	Qualified for rank of	Branch of Service Number and Data of Certificate	Rank for which Recommende	Appointment to date from	How vacancy was caused
	1. George 2. Alan 3. Maclachlan	Studen	t 630,Clarke Avenue, Westmount, P.Q.	Canada	31, Jan. 1922	s.	NIL.	NIL.	2/Lt.	20 June 1940.	e, Supernumerary.
13 Particulars of Edu including Matricul and University De	lation	chools Attended	From	DATES	To	1	Natur	e of Course	Degrees	or Educational	Certificates Obtained
	Ridley College McGill Univers	, St.Catherines,Ont ity, Montreal.	• 1934 1939		194 194		Matricu Sci	lation ence	Matri	leulation	Certificate.
14 Particulars of active (See instruct reverse side	tions on of Form). NIL.		to the t					9999 Y	M NIL.	EDALS AND D	
that the above correct. I am willing to <u>y</u> <u>Alen</u>	15 at I am a British Subject and ve particulars of myself are o accept this appointment. <u>Maddada</u> (Signature of Appointee) June 1940.	0.C.The Black Wate Date20.June, 194	Johnston, Maj ck Watch (RHR) O. Chison, ItCo h (RHR) of Car	jor. of Canada	ceMont tels.t.	real,	Distric		ding	Canada Gazette No	This space for use at National Defence Headquarters only Extract No. 23 13 Date 1946

Mas.

## INSTRUCTIONS

#### READ THE INSTRUCTIONS CAREFULLY

<sup>†\*</sup>Strike out the term not applicable. The Squadron, Battery, Company or similar formation to which the appointee is to be posted, transferred, etc., should be shown in all cases where units of the Regiment or Brigade, etc., are not centralized.

Under appropriate Columns information in accordance with the following must be inserted.

- COLUMN No. 1—Whether holding any rank in the Canadian Militia, the Military or Air Forces of the British Empire. If so, rank, unit and force to be shown.
  - No. 2-Christian name (or names) and surname to be clearly inserted in full (surname last), particular attention to be given to correct spelling.
  - No. 3-The actual profession or occupation to be stated.
  - No. 5-If a naturalized British subject, how naturalization was obtained to be stated.
  - No. 6—Accuracy is essential as to the day, month and year of birth; verification may be necessary at a later date.

Nos. 8 and 9-All qualifications to be inserted.

- No. 10-If a provisional or supernumerary appointment, it must always be so stated.
- No. 11—Except under very special circumstances, appointments will not be antedated prior to the date of recommendation. If an antedate is recommended the reason therefor must accompany this Form.
- No. 12—How vacancy was caused must be given, i.e., vice "\_\_\_\_\_" promoted, transferred or retired as the case may be. "To complete establishment" is not correct after the establishment has once been completed.
- No. 13-Degrees or Educational Certificates to be inserted in detail.
- No. 14—Particulars of active service. To include information as to actual theatre of war in which services were performed, with dates.
- No. 15—The person recommended must sign his name, showing that he consents to the appointment or promotion.
- No. 16—Medical Certificate to be completed in compliance with paragraph 145 (v) K.R. (Canada), 1939.

a—In all instances this recommendation must be sent direct by the Squadron, Battery or Company Commander to the Officer Commanding the Regiment for his recommendation to the Officer Commanding Division or District.
 b—In all instances "Transfer Receipt" of Stores must accompany the recommendation for promotion, or the resignation of an Officer Commanding a unit.
 c—For full instructions see "The King's Regulations and Orders for the Canadian Militia, 1939".

# MEDICAL CERTIFICATE

CERTIFIED that the Candidate has been medically examined in instructions laid down in Appendix No. 6, Regulations for the Canadian

Category.

found fit for

and has been

1923,

Date.

accordance with Medical Service,



IN REPLY PLEASE QUOTE

Department of National Defence

- A R M Y -

Montreal, P.Q., 23rd May, 194 1.

The Secretary, Department of National Defence, OTTAWA, Canada.

NATIONAL DEFENCE

MAY 23 1941

H.Q. 332-5-333

2nd Lieut. G.A. Maclachlan The B.W. (RHR) of Canada (R) C.A.

> The Officer Commanding The Black Watch (RHR) of Canada, (R) C.A. has advised this Headquarters that the marginally named has requested permission to resign his commission in the (Reserve) Canadian Army, with effect from 1st June, 1941, for the purpose of enlisting in the ranks of the R.C.N.V.R.

2. The provisions of K.R. (Can) para. 265 have been complied with.

3. I concur.

Please adorse effectus date à enlistment.

(E. de B. Panet), Brig.-Gen., District Officer Commanding, Military District Number 4.

A.G.

On discharge from

The arrive June 1 4

N.D. 23 500M-11-40 (8274-8) H.Q. 1772-101-23

Maral Decy,

2+/5/41.

# Memorandum

To: Deputy Minister (Naval Services)

Department of National Defence H.Q.332-5-333

. OTTAWA, 3rd May, 1941.

2nd Lieut. George Alan Maclachlan 2nd Bn. The Black Watch (Royal Highland Regt.) of Canada.

> I find on looking into this case that the marginally noted officer was commissioned in the rank of 2nd Lieutenant from the 20th June, 1940, and has qualified in the first paper only for Lieutenant.

2. Under the new regulations just published by the General Staff, it will be necessary for this officer, in order to complete qualification, to write the second paper which is special to Infantry at local Headquarters, after completion of which, he will have to spend two weeks for the practical portion, at the Officers' Training Centre at Brockville.

3. For qualification for the Active Force he will have to spend twelve weeks at the Officers' Training Centre above mentioned and to qualify for Lieutenant, an additional period at an advanced Training Centre for Infantry of eight weeks.

4. Unfortunately, the first paper mentioned in para. 1, does not give any credit towards the qualification mentioned in paras. 2 and 3.

Major-General, Adjutant-General.

wirmi

N.D. 25 150M—9-40 (7313) H.Q. 1772-101-25



By Command of the Honourable the Minister



of National Defence of the Dominion of Canada

103-11-279.

Ut Mr. George Alan Maclachlan,--

The Minister of National Defence hereby appoints you

Probationary Sub-Lieutenant, (Temporary),

Your appointment is to take effect from 13th May, 1941.

This appointment is for formal entry in the R.C.N.V.R., as from the date shown. It does NOT put the appointee on duty with pay. For that, an appointment to a ship or R.C.N. Establishment is necessary, and will be issued when required.

Rear-Admiral, Chief of the Naval Staff					
Chief	of	the	Naval	Staff	

	Personnel Records Division.
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3.	In ov Card .
4.	Non-Sub. Card .
5.	Statistical Card .
6.	Renno Strip .
7.	Pension Card .
8.	TE June 1941

NC

Department of National Defence, Ottawa, 4th June,

Shore

1941.

N.S. 814-16-1 1M-12-40-(M170)



By Command of the Honourable the Minister

of National Defence of the Dominion of Canada 103-M-27910

To Probationary Sub-Lieutenant George A. MacLachlan, R.C.N.V.R., (Temporary), --

The Minister of National Defence hereby appoints you

P129102

Probationary Sub-Lieutenant, R.C.N.V.R.,

of His Majesty's Canadian Ship(a) STADACONA additional for duty at Divisional Headquarters, Montreal and travelling time, (Borne in books of BYTOWN for pay); (b) ROYAL ROADS.

Pour appointment is to take effect from (a)18th August, 1941; (b)2nd September, 1941.

ENTERED IN PAY LEDGERS H. M. C. S. "BYTOWN"
FAIR LR Ann
ROUGH Goburn

1

Rear Amiral, Chief of the Naval Staff

	Personnel Records Division.
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-	24/9/41

Department of Rational Defence

Ottawa, 17th September, 1941.

N. S. 815-7-36a Mtt Div 10M-7-41 (1117)

# P002530

10/2

By Command of the Honourable the Minister of National Defence of the Dominion of Canada

1098-1-279

To Probationary Sub-Lieutenant George A. Maclachlan, R.C.N.V.R., (Temporary),---

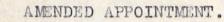
Sub-Lieutenant, R.C.N.V.R., (Temporary),

of His Majesty's Canadian Ship<sub>(a)ROYAL ROADS</sub> for leave and travelling time; (b)HOCHELAGA II additional for THUNDER; (c)VENTURE additional for THUNDER.

> Pour appointment is to take effect from (a)21st December, 1941; (b) 4th January, 1942; (c)On Commissioning.

> > Tri an Adminal

	Chief of the Naval Staff	
NIC	Personnel Records Division	
Department of Actional Defence Ottawa, 194 30th December, 1. H.Q. 36a N. S. 815-7-36a 10M-7-41 (1117)	1. Noted in Records	



NATIONAL 1 1942

103-776-2

By Command of the Honourable the Minister of National Defence of the Dominion of Canada

47687

Depa

H.Q. N.S. 10M-

To Sub-Lieutenant George A. Maclachlan, R.C.N.V.R., (Temporary),

The Minister of National Defence hereby appoints you

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

of His Majesty's Canadian Ship VENTURE additional for THUNDER.

Pour appointment is to take effect from 4th January, 1942.

	Chief of the Nabal Staff
29	Personnel Records Division
urtment of National Defence	1. Noted in Records
Ottawa, 10th March, 1942.	4. Statisti • Cero.
36a 315-7-36a Rayal Roadelfo 7-41 (1117)	5. Roneo Strip. 6. Pension Card 7 8
lac & tear time	8 DATE 16/3/42

To Sub-Lieutenant (a/s) George A. MacLachlan, R.C.N.V.R., (Temporary),

Dou are hereby appointed promoted and re-appointed

Lieutenant (a/s), R.C.N.V.R., (Temporary),

of His Alajesty's Canadian Ship FORT RAMSAY for duty with Naval Officer in charge, Gaspe.

Pour appointment is to take effect from 18th August, 1943.

194

3.

Secretary, Rabal Board Personnel Records Division. 1. Noted in Records ...... 2. Index Card ..... 3. Non-Sub. Card. . . 4. Statistical Card . : : 5. Flonco Strip . . . . 6. Pension Card . 7. 8. 23.8. DATE

103-71-379

Department of National Defence Naval Service

Ottawa, 17th August,

DH

H.Q. 36a 15M-2-43 (8622) N.S. 815-7-36 AMENDED AP OINTMENT.

y command of the Honourable the Minister of National Defence for Naval Services of the Dominion of Canada

To Sub-Lieutenant (a/s) George A. MacLachlan, R.C.N.V.R., (Temporary),

Pou are hereby appointed

Sub-Lieutenant (a/s), R.C.N.V.R.,

of His Majesty's Canadian Ship FORT RAMSAY for duty with Naval Officer in charge, Gaspe.

> 28th April, 1943. Pour appointment is to take effect from

gton

Secretary, Rabal Board

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103-m-279

DIN Department of National Defence Raval Service

Ottawa, 12th May,

H.Q. 36a 15M-8-42 (5538) N.S. 815-7-36 LCM MAY, 194 3. 15M-8-42 (5538) N.S. 815-7-36 with Staff als offer,

To Sub-Lieutenant (a/s) George A. MacLachlan, R.C.N.V.R., (Temporary),

you are hereby appointed

Sub-Lieutenant (a/s), R.C.N.V.R.,

of His Majesty's Canadian Ship (1) STADACONA additional; (2) STADACONA additional for duty with Staff A/S Officer; (3) FORT RAMSAY for duty with Naval Officer-in-charge, Gaspe.

> Pour appointment is to take effect from (1) 5th April, 1943; (2) 19th April, 1943; (3) 1st May, 1943.

Secretary, Rabal Board



103-m-21

Department of National Defence Naval Service

Ottawa, 8th April,

194 3.

H.Q. 36a 15M-8-42 (5538) R.8. 815-7-36

Sub-Lieutenant George A. MacLachlan, R.C.N.V.R., (Temporary), --To

Pou are hereby appointed

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

of His Majesty's Canadian Ship CORNWALLIS additional for training and disposal, (A/S Group Control Course).

Pour appointment is to take effect from 20th July, 1942.

gton

Secretary, Rabal Board

Personnel Records Division
1. Noted in Records

103. M. 279

24

Department of National Defence Raval Service

Ottawa,

5th August, 1942.

H.Q. 36a 10M-4-42 (4052) N.S. 815-7-36

Thierder.

als.

TO Sub-Lieutenant George A. MacLachlan, R.C.N.V.R., (Temporary), --

Pou are hereby appointed

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

of His Majesty's Canadian Ship CORNWALLIS for duty in A/S School.

22nd September, 1942. Pour appointment is to take effect from

nigton

Secretary, Rabal Board

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103-M-279

26

Department of National Defence Rabal Service

Ottawa, 26th September, 1942.

H.Q. 36a 10M-4-42 (4052) N.S. 815-7-36

Comunelis for Josp, A/S Case

ToSub-Lieutenant (a/s) George A. MacLachlan, R.C.N.V.R., (Temporary),-

Pou are hereby appointed

Sub-Lieutenant (a/s), R.C.N.V.R.,

of His Majesty's Canadian Ship NIAGARA, (vice Patterson).

Pour appointment is to take effect from 1st December, 1942.

R igton

Secretary, Rabal Board

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DATE 24	.12.42

103-M-279

P30260

B14 Department of National Defence Naval Service

Ottawa, 19th December,

1942.

Cornwallis for derly

with a 15 School

H.Q. 36a 15M-8-42 (5538) N.S. 815-7-36

To Lieutenant (a/s) George A. MacLachlan, R.C.N.V.R., (Temporary), --

Pou are hereby appointed

DK

Department of National Defence Rabal Serbice

Ottawa, 20th December,

H.Q. 36a

15M-2-43 (8622) N.S. 815-7-36

Lieutenant (a/s), R.C.N.V.R.,

of His Majesty's Canadian Ship AVALON additional for Group A/S duties in C.l Group.

Pour appointment is to take effect from 10th January, 1944.

A hieranigton

Herr	etary, Maual Board Records Division
National Defence l Service	1. No et in R cords. A. 2 In 'e Card. 3. f.on Sut. Card. 4. Sut stica Card. 5 Ro ep Strp
oth December, 194 3.	6 Fens on Card
FORT RAMSAY for duty with NOi/c, (	Gaspe. 31/12/43

0-44940

To Lieutenant (a/s) George A. MacLachlan, R.C.N.V.R., (Temporary), --

Pou are hereby appointed

Lieutenant (a/s), R.C.N.V.R.,

of His Majesty's Canadian Ship HALIFAX, (Temporary) for Group a/s duties in C-1 Group.

Pour appointment is to take effect from 25th January, 1944.

1944.

DH

Department of National Defence

Rabal Service

Ottawa, 1st February,

H.Q. 36a 15M-2-43 (8622) N.S. 815-7-36

Secretary, Rabal Board Personnel Records Division 1. No e in R cords . . ! C. C ..... 2 In e 3. No. 30 . C.rd . . . . 4. S at stigt Card J.R. 6 Forwon Card .... AVALON addl. for group A/S duties in C+A Group.

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Can. S. 545 20M-8-42 (5724) N.S. 815-9-545

IN THE NAME OF GOD, AMEN George flan Maclacklan 's Ship Fort Remsay J. Majesty's Ship (now a Patient\* in

of His

),

Ι

\*If in Hospital or being sound of mind, do hereby make this my last Will and Testament: Insert the degree give and bequeath unto my uife of relationship (if of give and bequeath unto my uife any) and place of residence of the Legatee or Legatees. See instructions on the back hereof.

olga Frene macladlan 83 bambnidge Street Halifad, nova Scotia

all such Wages, Prize Money, Allowances, and other Sum or Sums of Money, as now are, or hereafter may be due to me for my service on board the said Ship, or any other Ship or Vessel, of the Royal Navy, together with all other my Estate and Effects whatsoever and wheresoever.

Insert the degree of relationship (if of any) and place of residence of the Executor or Executors.

And I do hereby appoint Kellog Sinclair maclachlan. (Father) 18 Richelieu Place. montreal, Prov. of Luebec.

Executors of this my last Will and Testament; and hereby revoking all former Wills by me made, I declare this to be my last Will and Testament.

this secret day of June One Thousand Nine Hundred Forty three

In Witness whereof I have at Gaspe P. Que . hereunto set my hand, this secuentle day of Jung , in the Year of Our Lord

Signed by the said Testator, as his last Will and Testament, in the presence of us present at the same time, who in his presence at his Witnesses request and in the presence of each other have subscribed our names as Witnesses.

ge Alan keach

NOTE.—As Wills of Petty Officers, Seamen, and Marines must be executed with the formalities required by the Law of England in the case of other persons, every such Will must be executed in the presence of, and be attested by, two disinterested Witnesses.

Where the Will is made on board one of His Majesty's Ships, one of the two requisite attesting Witnesses shall be a Commissioned Officer, Chaplain, or Warrant or Subordinate Officer belonging to His Majesty's Naval or Marine or Military Force.

Where the Will is made elsewhere than on Board one of His Majesty's Ships, one of the two requisite attesting Witnesses shall be a Commissioned Officer, or Chaplain, or Warrant or Subordinate Officer, or the Governor, Agent, Physician, Surgeon, Assistant-Surgeon, or Chaplain of a Naval Hospital at home or abroad, or a Justice of the Peace, or the Incumbent, Curate, or Minister of a Church or Place of Worship in the Parish where the Will is executed, or a British Consular Officer, or an Officer of Customs, or a Notary Public, or a Solicitor, or in Scotland a Law Agent.

A Will made by any person while serving as a Seaman or Marine will not be valid for any purpose if it is written or contained on or in the same Paper, Parchment, or Instrument with a Power of Attorney.

The Certificate on the back hereof, is to be signed by the person by whom the Will is prepared.

## Instructions for filling up the Form

If a special legacy is to be given, the name, residence (and relationship if any) of the person interested is to be inserted in the space after the words "I give and bequeath," or if more than one person, the respective names, &c., also the particulars of the property bequeathed.

Then the words "And I give and bequeath unto" should be inserted together with the names, &c., of the person or persons to whom the residue of the Testator's property is to be given, and the words printed in italics commencing "all such wages," should be struck out.

If, however, the *whole* of the Testator's property is to be given to one person, or between several, all that is necessary is to insert in the space, the names, &c., of the person or persons to be benefited.

#### CERTIFICATE

I hereby certify that the Will on the other side hereof was previously to its execution read over to the Testator who appeared perfectly to understand the

same. George Alan Machallan { Signature of the person by whom the Will was prepared.

FORM 6 DOMINION BUE	REAU OF STATIS	STICS	QUEBEC DEATH TR	ANSCRI	PT		Do
1. PLACE Muni- cipal county At Sea	Official name of civil municipali- ty or township	Ē.				the word which ipality or this territory   Parish   Township	wri this
DEATH Street	No.	<u>P</u>	Hospital or Institution	10	ty   10un   vittage	1 arish   1 ownship	
2. LENGTH (a) In hospital Years Months Days		Months	Days         Years         Months           (c) In Province	(d)	In Canada Y immigrant)	ears Months Days	
3. NAME Surname MACLACHLAN		Do not	CONFIDENTIAL MEDI	CAL CERT	IFICATE OF	DEATH	-
OF (Block lett DECEASED Given names. George 1		write in his space	22. Date of death. May	h)	7th		
Street 630 Clarke Avenue, Official name of eivil municipali- ty or township Municipal county.	No		23. I HEREBY CERTIFY that I attende	ed deceased from	n		
Wunicipal county	rovince Quebec.		and last saw halive or				
5. SEX 6. NATIONALITY (Citizenship) 7. RACIAL ORIGIN	8. Single, Married, Widowed or Divorced (Write the word)		I Immediate cause Give disease, injury or complica- tion which caused death, not the	JSE OF DE	ag, presum	ied dead,	
Male Canadian 9. If married give name of wife or hus- band of deceased	Married		tion which caused death, not the mode of dying, such as heart failure, asphyxia, asthenia, etc. Morbid conditions, if any, giving rise to immediate cause (stated in order proceeding backwards from {	( (b) was to	orpedoed &	VALLEYFIEL sunk by energy Atlantic.	-
0. BIRTHPLACE Province or Country) Ontar	io.	+	immediate cause).	(c)			
1. DATE OF January 31 BIRTH (Month) (Day)			Other morbid conditions (if impor- tant) contributing to death but not causally related to immediate cause.	[			
DECEASED	f less than one day old						
12 The de marfanian an				uration of disea	se	days	
14. Kind of industry or business, as cotton-mill.		-	25. If a woman, was there a puerperal cond				
Iumbering, bank, etc.         16. Tota           15. Date deceased last         spent	l years in this		26. Was there a surgical operation?	Date of			
worked at this occupation occupation occupation	18. BIRTHPLACE (Province or		State findings				
FATHER	Country)		Accident, suicide or homicide(Stat				
MOTHER (Maiden Name)			Manner of injury				
9. Place of burial, cre- mation or removal Body not recove	red		Specify whether injury occurred in industry, in home, or in public place				
9. Date of burial		-	Signed				
(a) Name of parish church	-		Address	Dat	e		
KOLLY (b) Civil muni- cipality of		28. Sig	atome of person who fills in the form	Civil		charge of Register of registration of this	
(c) Municipal county		Pa m	Cdr. R.C. N.R. Offic ature authorizes the collector to accept this form as authentic. Service Headquarters,	cer i/c,	Naval Per	sonnel Recor	ds

# The Royal Bank of Canada

QUINPOOL & OXFORD BRANCH HALIFAX, N.S.

April 14

Director of Estates, Department of National Defence, 308 Sparks Street, Ottawa, Ontario.

Dear Sir:

Lieut.George Alan MacLachlan -Deceased

APR 19

With reference to your letter of September 29, 1944, NS 0-44950 FD 604, re the above, will you kindly advise us as to the probable time this estate will be cleared. We continue to hold \$250 in Dominion of Canada bonds and an unsealed envelope containing certain private papers.

Yours truly,

101 0

L. A. Hines, pro Manager.

LAH:SS

ASED	STATEMENT OF WAR SERVICE G		IX
NAME Georg	CHRISTIAN NAMES) MACLACHLAN (SURNAME)	REGISTER NO.	96 NSO-4
Address 83 Ca	Olga I. MacLachlan, mbridge St., ax, N.S. MINATION OF OVERSEAS SERVICE 7 May/44		20 Mo RCNVF Lieut
A. TOTAL QUALIFY	ING SERVICE	and the second second	\$
B. QUALIFYING OV	ERSEAS SERVICE	PLETE PERIODS AT \$7.50	247.5
NO. OF DAYS 441	LESS 4 INELIGIBLE DAYS, EQUAL TO 437 DAYS @ 25C. PER DAY		109.2
C. SUPPLEMENT FO	R OVERSEAS SERVICE		
	DAILY RATES AT DISCHARGE		
	SUBSISTENCE OR LODGING AND PROVISION ALLOWANCE		
	ADDITIONAL PAY Spec. 4 5 . 25		
DEE	S \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$		
		(7 = \$ 67.90	
	NO. OF DAYS	×\$ 67.90	162.1
D. WAR SERV	ICE GRATUITY		518.9
E. DEDUCTIONS	OVERPAYMENT OF PAY AND ALLOWANCE DEPENDENTS' ALLOWANCE AND ASSIGNED PA	CE	
	OTHER DEDUCTIONS	s NIL	
F. TOTAL AMOUNT	PAYABLE		
G. YOUR PORTION	DE GRATUITY IS-		518.9
			1
1	DEPENDENTS' ALLOWANCE IN ISSUE TO YOU \$	_OF \$ =\$	518.9
	cheque.	#	9/3/1
	1		0/40
CERTIFICATE I CER	TIFY THAT THE AMOUNT HAS BEEN CORRECTLY COMPUTED A ERMS OF THE WAR SERVICE GRANTS ACT, 1944 AND THE REG	AND IS PAYABLE IN ACCC	EUNDER.
	TREASURY	1/2	

		GEM		
N.P.R/5-1		FORM A.	File: N.S. 0 - 449	50 Pers.N
	DEPARIMENT – Nav	OF NATIONAL DEN al Service - Ottawa, Ca		
Sir:			(Date)	••••
SIL:	The following	casualty has be	een reported -	
NAME	1110 1011001105	RANK or RAT		43
MACLACI	ILAN. George Alan	Lieutenant		RONNR
DATE OF ENL	A	and the second second	tive Service 18 August.	
DATE OF DIS	CHADOF -	norted later.		
HOSPITAL -				
SERVICE -			l under jurisdiction of D	•P• & N•H•
SERVICE -	(Indicate whether i elsewhere.)		or in Canada and the hig	h seas or
Reason for	discharge and - ere any disability	"Missing" at	sea when the ship in whic	h he was
	d, or where death	serving was 1	ost by enemy action. Whi	le this
2			sible to make an estimate	
chances of	survival, Should no	information be	received to the contrary	you will
elsewhere o	utside Canada).	it occurred i	lity due to enemy action, n Canada, or on the high	seas or
1	& RELATIONSHIP -	-		
RELATIONSHI ADDRESS -	P - Wife	NAME -	- Mrs.Olga - Irone MacLach	len
	Legally or ot	dicate that ratherwise, detai	ting was separated from h ls to be furnished and co Agreement, etc., to be f	py of any
Copies Forn to Allots.				
	. N.P.R/5			
			HBAMONEY.	
			for SECRETARY, NAVAL BOAR	D C/
Secretary, Room 228, 1	Canadian Pension Com Daly Building, OTTAWA	mission, BT , Ont. 12/8/9	14/15 R15	Ęmo
NOTE;	Defence, Naval Serv:	per (Allotment ice, for comple Dependents All	m "B") have been forwards Section), Department of I tion respecting the detai owance, etc., and subsequ	National ils of
		(See reverse	side for further instruct	ions)
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AIRMAIL N.S. 0-44950 PERS. (N)

lot for

nE

8th May, 1944.

Dear Mrs. MacLachlan:

I deeply regret that I must confirm the telegram of the 8th of May, 1944, from the Minister of National Defence for Naval Services, informing you that your husband, Lieutenant George Alan MacLachlan, Royal Canadian Naval Volunteer Reserve, is missing at sea.

According to the report received, your husband is listed as missing when the ship in which he was serving was lost by enemy action, but it is not known as yet whether any hope can be held out for his survival. You may rest assured, however, that as soon as further information is available, you will be notified.

For reasons of security it may be some time before details of this incident of war may be released.

It is requested that you will regard as confidential anything beyond the fact of your husband's loss on war service, until such time as an official announcement is made, as this information might prove useful to the enemy.

Please allow me to express the sincere sympathy of the Minister of National Defence for Naval Services, the Chief of the Naval Staff, and the officers and men of the Royal Canadian Navy, the high traditions of which your husband has helped to maintain.

MAY 9 1944 SECRETARY, NAVAL BOARD

Mrs. Olga Irene MacLachlan. 83 Cambridge Street, HALIFAX, N.S.

MIN. (N)

REGISTERED

FILE NO: N.S. 0-44950 PERS. (N)

30th August, 1944.

Dear Mrs. Maclachlan:

NPA

Further to my letter of the llth of May, 1944, in view of the length of time that has elapsed since your husband, Lieutenant George Alan Maclachlan, Royal Canadian Naval Volunteer Reserve, was reported "missing" after the sinking of H.M.C.S. "VALLEYFIELD", and as no information has since been received of his having survived, the Canadian Naval Authorities have now presumed his death to have occurred on the 7th of May, 1944.

May I again express the sincere sympathy of the Department in your bereavement.

Yours sincerely, Deputy SECRETARY, NAVAL BOARD.

Despetched by Sec. N. B.

Date / Time

a

Wated and 5.9. Usputy SECRE Mrs. Olga I. Maclachlan, 83 Cambridge Street, Halifax, N. S.

Canadian Revel ondolence I ersace

Date Sent 2 NFR 5

PM

M.S. 0-44950 PERS. (N)

64

9 September, 1944.

THIS IS TO CEPTIFY that according to official information Lieutenant George Alan Maclachlan, Royal Canadian Naval Volunteer Reserve, is missing, presumed dead to date the 7th of May, 1944. He was serving in H.M.C.S. "VALLEYFIELD", which was torpedoed and sunk by enemy action whilst on Convoy Escort duty in the North Atlantic.

. Jas. Sale

Deputy SHCRETARY, NAVAL BOARD. sa

the HAW H. B. MONDY, R. C.N.R. H. B. MONDY, R. C.N.R. H. B. Commacharger, COMPA Parmasonic Only EL RECORDS NAVAL PILL OWNER RECORDS

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IN REPLY PLEASE QUOTE



# Department of National Defence Naval Service

Ottawa, Canada.

MEMORANDUM:

(Name) (Rating) (O.N.)

It is approved for the above named rating to count the undermentioned service towards the award of Good Conduct Badges.

Peace time Naval Training, over 18 years of age to 31st August, 1939

Mobilized Service since 1st September, 1939

Total Service towards Good Conduct Badges

2. Servico Cortificato (s), (R.C.N., R.C.N.V.R.), returned herowith.

BY ORDER,

0. Cossotto), Naval Socretary.

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

S. 1320b. 100M Pads of 3-43 (9155-8 N. S. 815-9-132	200 TELEVIER DETECTION	•
For use Signal Department only	ent DRAFTED BY PER A/D	DOOF 54
(Indica	ors Instructions: ation of Priority, ept Group, etc.)	D. No. of Groups:
TO:	VANCOUVER CCO	FROM: OTTAWA CCO
Write Across	Personal for Secretary to COS to COFC from A/DOOF	. Your 5
	221915 Lieutenant (a/s) GEORGE ALAN MACLACHLAN RC	INTR son of 10
	Acting Commander K S MACLACHLAN RCNVR was reporte	ed missing 15
	after sinking of HM6S VALLEYFIELD	20
		25
	P.A. 'S CHECKED IN	
	C.E. BY	35
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S	ystem P/L Code or Cypher Time of Operator Receipt Despatch	Date 24-7-44

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