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

PLEASE LEAVE BLANK

Section A—GENERAL INFORMATION

1. (a) Print name in full: Ian Pearson MacLaren. (b) Reg'l. No.
2. (a) Arm of service: Naval (b) Unit: Toronto Divn RCNVR (c) Rank: Prob Sub Lieut
3. (a) Date of birth: 19 Aug '20 (b) Have you any dependents? NO (c) Place of residence at time of enlistment: Toronto Ontario.
4. (a) Place of enlistment: Toronto Ontario (b) Date of enlistment: 27 Oct '41

Section B—EDUCATION AND TRAINING

5. (a) State age on finally leaving school: 21 years. (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.): Senior Matric.
7. If you attended a university, give name of university and standing or degree secured: Toronto University. finished 2nd year.
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? None.

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: Confederation Life Insurance. Co Address: Toronto.
19. Nature of employer's business (for instance, "farmer", or "building contractor", or "boot factory", or "iron foundry", or "retail store", etc.): Insurance.
20. (a) Your specific occupation: Clerk (b) Number of years' experience at this occupation with any employer: 1 year.
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? NO

IF YOU WERE WORKING ON YOUR OWN UP TO THE TIME OF ENLISTMENT, THAT IS TO SAY, OPERATING A FARM, A STORE, AN AGENCY, OR IN PROFESSIONAL PRACTICE, OR AS A PARTNER IN ANY SUCH LINE, PLEASE ANSWER QUESTIONS 22 AND 23

22. (a) State nature of business, or professional practice (b) Where was it located?
23. (a) Number of years engaged in this business (b) Have you made, or will you make plans to return to the same or a similar business on discharge?

Section F—PARTICULARS OF FARMING EXPERIENCE

24. (a) Do you wish to engage in farming after the war? (b) Do you feel competent to operate a farm? (c) If so, in what kind of farming?
25. (a) Were you born on a farm? (b) How many years' actual farming experience have you had? (c) In what provinces did you have experience?

Section G—MISCELLANEOUS

26. Have you made any arrangements other than indicated above, for re-establishment in civil life after discharge? Yes
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.): Return to Toronto University.
28. State any employment preference or ambition you may have, other than indicated elsewhere in this form: None.

DATE: 27 Oct. 194 41 SIGNATURE: Ian P. MacLaren

FOR COMPLETION AND RETURN BY

Form P. 64

Mrs. Helen Maclaren,
267 Benson Avenue,
Toronto, Ontario.

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. 0-45010 FD. 622

DEPARTMENT OF NATIONAL DEFENCE

ESTATES BRANCH

OTTAWA, ONT.

September 13 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

Ian Pearson Maclaren, Lieutenant,

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.

ESTATES BRANCH OCT 4 1944 OTTAWA NATIONAL DEFENCE

H. Meade
Commander RCNVR
for 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:

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		HELEN SIGNE MACLAREN	23	267 BENSON AVENUE TORONTO, ONTARIO CANADA
2	Children of the Deceased and dates of their Births				
3	Father of the Deceased		KENNETH B. MACLAREN	54	62 HEATHDALE Rd TORONTO, ONTARIO
4	Mother of the Deceased		IDA MACLAREN	52	62 HEATHDALE Rd TORONTO, ONTARIO
5	Brothers of the Deceased		KENNETH B MACLAREN JR.	27	
		Full Blood	DAVID J. MACLAREN	23	F.M.O. HALIFAX NOVA SCOTIA
		Half Blood	nil		
6	Sisters of the Deceased	Full Blood	nil.		
		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
			nil.		

ANSWER FULLY EACH QUESTION ON THIS PAGE

PARTICULARS AS TO IDENTITY

8	Full names of the deceased.	IAN PEARSON MACLAREN
9	Date of his birth.	AUGUST 19, 1920
10	Place and date of his marriage.	KINGS COLLEGE, HALIFAX, N.S. JANUARY 31, 1943
11	Place and date of his parents' marriage.	

PARTICULARS OF DOMICILE

12	Place where deceased was born.	TORONTO, ONTARIO
13	State, in order, the Province, State and/or County in which he resided before enlistment and the period of time in each.	(a) ONTARIO, CANADA – 23 YRS. (b) (c) (d)
14	Nature of employment before enlistment.	STUDENT AT UNIVERSITY OF TORONTO
15	State whether he owned the premises in which he lived, and, if so, where situated.	NO
16	Name place where deceased stated he intended to make his permanent home.	TORONTO, ONTARIO

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?	NO
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?	NO
20	Amount of War Savings Certificates held by deceased. Indicate where located.	Nil
21	Amount of Victory Loan Bonds held by deceased. Indicate whether registered or bearer and where located.	28 $50 = Number H 1360772 + H 15242 Registered: In Province of N.S. Charlottetown. 29.
22	If deceased had life insurance, name companies and amount payable under each policy and the person named as beneficiary therein.	CONFEDERATION LIFE ASSURANCE CO. $1,000 – HELEN S. MACLAREN - BENEFICIARY
23	Describe other assets, if any, and estimated value thereof. Use space on page 4 if necessary.	Nil.

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
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

*.....Father.....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.

.....Harold N Marlam..... Signature of Informant

.....536 Confederation Life Bldg. Toronto..... Address

CERTIFICATE

I hereby certify that to the best of my knowledge and belief.....Harold N Marlam..... {Name of informant} is the*.....Father.....of the Deceased above described. The above Declaration was made by the Informant and signed in my presence.

*See above.

Dated at.....Toronto.....this.....3rd.....day of.....October.....19 44

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

.....W Livingston..... Qualification.....A Commissioner

Address.....12 Richmond St East.....

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

N. V. 4
10M—4-40 (4718)
N.S. 815-11-4

P153730
NATIONAL DEF
OCT 30 19
N.S. 103-M378
CANADA

4

CANADA

ATTESTATION FORM

FOR OFFICERS OF THE ROYAL CANADIAN NAVAL VOLUNTEER RESERVE

(A) DESCRIPTION OF APPLICANT

SURNAME MacLaren,	PERMANENT ADDRESS
CHRISTIAN NAME Ian, Pearson.	62 Heathdale Rd.
RELIGION C of E.	Toronto, Ontario.

DATE OF BIRTH	PLACE OF BIRTH	NAME AND ADDRESS OF NEXT OF KIN
19 Aug '20	Town Toronto, County York Province Ontario. Country Canada.	Father: K.B. MacLaren. Same Address.

PERSONAL DESCRIPTION

HEIGHT	CHEST MEASUREMENT	HAIR	EYES	COMPLEXION	WOUNDS, SCARS, MARKS
Feet 5 Inches 9¾	Inflated 39 Deflated 36 Mean 37½	Fair.	Blue	Fair	None.

DATE OF ENROLMENT	RANK IN WHICH ENROLLED	MARRIED, SINGLE, OR WIDOWER	TRADE OR CALLING AND IN WHOSE EMPLOY
27 Oct '41	Prob Sub-Lieut (temp)	Single.	Confederation Life Ins. Co.

(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* (a) I have never served, and am not serving in any Naval, Military, Reserve or Territorial Force.

~~* (b) I served in .... for the period shown, and attach my record of service.~~

* Cross out Clause not applicable.

SERVED IN	RANK	FROM	TO

(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.

(OVER)

Noted in Service
Records by AB.

(5) On being enrolled as an Officer of the Royal Canadian Naval Volunteer Reserve, I undert[illegible] 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 27th day of October 19 41

Ian P. Maclaren
Signature of Applicant.

The above declaration was made and signed in my presence this twenty-seventh

day of October 19 41

A/Commander RCNVR A C Trumm
Signature of Enrolling Officer.

(C) **OATH OF ALLEGIANCE**

I Ian Pearson MacLaren. 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 Ian P. Maclaren

Signature of Witness A C Trumm

Date 27 October '41

Rank A/Commander, 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.

P153732

Can. B. 207
100 M—11-40 (7881)
N.S. 815-2-207

2

CANADA

Certificate of Medical Examination of Officers, Men and Boys

NAVAL SERVICE OF CANADA

(R.C.N. OR RESERVE FORCES)

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

I, the undersigned, have examined I. Maclaren

‡candidate for entry as Prob

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.

Age {Years / Months (a)	Weight without Clothes (b)	Height with Bare Feet (c)	General Development (d)	Chest Girth (e)	Vision by— (i) Snellen's Types (ii) Colour Vision (f)	Vaccinated or revaccinated for Small Pox (Date) (g)	Lungs, Heart, etc. (h)	Abdomen, Hernia, etc. (i)	Limbs and Joints (k)	Skin (l)	Ears and Hearing (m)	Testes, Varicocele, etc. (n)	Mouth, Teeth (No. deficient and No. defective, if any), Nose, Tonsils, etc. (o)	Anus, Hemorrhoids, etc. (p)
	lbs.	ft. ins.		inches (a) maximum	right eye									
21-2	135-8 1/2	5'9 3/4"	Good	39	30/20	1939	NORMAL	NORMAL	NORMAL	NORMAL	NORMAL	NORMAL	1 deficient	NORMAL
				(b) minimum 36	left eye 20/20									
				(c) mean 37 1/2	*colour vision NORMAL									

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

Albumen neg.

X-ray {~~Not taken.~~ Approved. ~~Positive.~~ ~~Doubtful.~~}

Write in the appropriate notation, and any remarks necessary.

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.

Ian Maclaren
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 Toronto the 24 of October 1941

J. T. McCormack
Examining Medical Officer

(Rank) Surg. Lieut R.C.N.V.R.

0-45010

OFFICERS RECORDS

Date: ~~April~~ May 22,42

Surname: Maclaren Christian Names: Ian Pearson

Rank: Probational Sub-Lieutenant.

Home Address: 62 Heathdale Rd. Toronto.

Date of Birth Aug: 19: 1920 Place of Birth: Toronto.

Education: Matriculation: Senior yes
Junior yes.

University Degrees:

Mercantile Marine Certificates: No.

Precis Mercantile or Yachting Experience:

2 yrs. R.C.Y.C. Toronto
5 " Camp. Kagawong. - Fenelon Falls. Ont.
2 " Sailing Instructor. Oak Ridge Camp. Lorne's Lake. Ont.

Precis of Business Experience:

2 yrs Confederation Life. Insurance Company.

Sports: Hockey 7 yrs. Rugby 7 yrs. Baseball 7 yrs, Basketball 7 yrs, Waterpolo 1940-41 2 yrs. Lacrosse 1937-38 2 yrs Swimming 1934-42, Tumbling 1934-38 4 yrs) Golf. Tennis 1934-42 8 yrs.

Other Hobbies or Interests: Reading.

Previous Naval or Military Training:

Languages spoken fluently: English only.

Languages understood: French

Place of Birth of Father: Toronto, Ontario Place of Birth of Mother: Toronto, Ont.

Fathers Occupation: Barrister-at. Law.

Next-of-Kin: Kenneth B. Maclaren Esq. K.C. (Father).

Surname: Maclaren Christian Names: Kenneth Bruce

Full Address: 62 Heathdale Rd, Toronto, Ont.

Have you been rejected by any other of the Armed Forces? No.

If so give details: —

Religion: C. of E. Naval Identity Card No.

Married or Single Single Dependents: None

Height: 5' 10 3/4" Weight: 160 lbs.

DEPARTMENT OF VETERANS AFFAIRS

AWARDS (NAVY)

WAR SERVICE RECORDS

~~DECEASED 7 May 1944~~

D.D.

SURNAME (IN BLOCK LETTERS)	CHRISTIAN NAMES	REG. No.	RANK ON DISCHARGE	C.A.S.F. UNIT	FILE No.
MACLAREN	Ian Pearson	0-45010	Lieut		

WAR SERVICE BADGE (CLASS) No.

DATE DESPATCHED:

ADDRESS:

CAMPAIGN MEDALS	REGISTRATION NUMBER AND DATE DESPATCHED
1939-45 Star	
Atlantic Star	1655
C.V.S.M. and Clasp	
War Medal	

(THE REVERSE TO BE USED FOR ESTATE PURPOSES)

DVA 806

MEDALS AND MEMORIALS—DECEASED PERSONNEL

RCNVR Dec. 44 "VALLEYFIELD"

REGISTRATION No. DATE OF DESPATCH

1) MEDALS

PERSON ENTITLED TO: Mrs. Helen S. ~~MacLaren~~ Smith (Re-married) - Widow

ADDRESS: ~~267 Benson Ave.,~~ ~~TORONTO, Ont.~~ 7444 260th St., Bellerose L.I. New York, U.S.A.

(1) 9-9-48

(2) MEMORIAL CROSS

WIDOW: Mrs. Helen MacLaren

ADDRESS: 76 Chalfort Street, West View, PITTSBURG, P.O., U.S.A. (Issued 29 September 1944)

(2) MEMORIAL BAR

DATE DESP. .....

REGN. NO. 596

(3) MEMORIAL CROSS

MOTHER: Mrs. Ida MacLaren

ADDRESS: 62 Heathdale Road, TORONTO, Ontario

(3) 13 October 1944

5

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

To Mr. Ian Pearson MacLaren,--

The Minister of National Defence hereby appoints you

Probationary Sub-Lieutenant, (Temporary),

of the Royal Canadian Naval Volunteer Reserve for duty with the
.....TORONTO.....Division.

Your appointment is to take effect from 27th October, 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.

(Registered Number 04452,
for identification purposes)

Rear-Admiral,
Chief of the Naval Staff

Personnel Records Division

1. Noted in Records . LB
2. Index Card . LB
3. Non-Sub. Card .
4. Statistical Card . LB
5. Roneo Strip . LB
6. Pension Card .
7.
8.
DATE 12/11/41

Department of National Defence,

Ottawa, 7th November, 194 1.

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

103-N-378

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

To Probationary Sub-Lieutenant Ian P. McLaren, R.C.N.V.R., (Temporary),

You are hereby appointed P145858 6

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

of His Majesty's Canadian Ship (1) YORK additional;
(2) KINGS additional for training and disposal.

Your appointment is to take effect from (1) 11th May, 1942;
(2) 21st May, 1942.

R. A. Lennington

Secretary, Naval Board

BJ

Department of National Defence
Naval Service

Ottawa, 16th June, 1942.

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

Toronto Div.

Personnel Records Division	
1. Noted in Records	LB
2. Index Card	
3. Non-Sub. Card	LB
4. Statistical Card	LB
5. Roneo Strip	LB
6. Pension Card	
7.	
8.	
DATE	23/6/42

103-M-338

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

To Probationary Sub-Lieutenant Ian P. MacLaren, R.C.N.V.R., (Temporary),--

You are hereby appointed

7

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

of His Majesty's Canadian Ship AVALON additional for COWICHAN.

Your appointment is to take effect from 14th September, 1942.

R. A. Lennington

Secretary, Naval Board

Personnel Records Division

1. Noted in Records . . . . LB
2. Index Card . . . . . .
3. Non-Sub. Card . . . . . .
4. Statistical Card . . . . . .
5. Roneo Strip . . . . LB
6. Pension Card . . . . . .
7. . . . . .
8. . . . . .

DATE 30/9/42

Department of National Defence
Naval Service

Ottawa, 26th September, 194 2.

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

Keep for A & A.

SW 103-M-378

Command of the Honourable the Minister of National Defence

for Naval Services of the Dominion of Canada

To Sub-Lieutenant Ian P. MacLaren, R.C.N.V.R., (Temporary),--

You are hereby appointed

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

of His Majesty's Canadian Ship (1) BYTOWN additional for Naval Superintendent Contract Built Ships for VALLEYFIELD;
(2) VALLEYFIELD.

Your appointment is to take effect from (1) 20th November, 1943;
(2) On commissioning.

R. A. Lemmington

Secretary, Naval Board

Personnel Records Division	
1. Noted in Records	
2. Index Card	
3. Non-Sub. Card	
4. Statistical Card	
5. Roneo Strip	
6. Pension Card	
7.	
8.	
DATE	26.11.43

Department of National Defence
Naval Service

Ottawa, 17th November, 194 3.
COWICHAN

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

023995 0-45010

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

To Sub-Lieutenant Ian P. MacLaren, R.C.N.V.R., (Temporary),--

You are hereby ~~appointed~~ promoted and re-appointed

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

17

of His Majesty's Canadian Ship VALLEYFIELD.

Your ~~appointment~~ promotion is to take effect from 15th January, 1944.

(With the seniority of 11th May, 1943)

R. A. Lemmington

Secretary, Naval Board

P.A.

Department of National Defence
Naval Service

Ottawa, 28th February, 1944.

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

V.R.

OFFICIAL NUMBER | NAME MACLAREN (Surname) Ian Pearson (Given Names) | OFFICIAL NUMBER

Ship or Establishment	Rating	From Day	From Month	From Year	Remarks	Character	Efficiency	Date Day	Date Month	Date Year	Non-Sub. Rating	Qualified Day	Qualified Month	Qualified Year	Re-Qualified Day	Re-Qualified Month	Re-Qualified Year
Div. Str. Toronto	Prob Sub-Lt T	27	10	41													
H.M.C.S. York	Prob Sub-Lt T	11	5	42		Per Appt. 16-6-42											
H.M.C.S. Kings	Prob Sub-Lt T	21	5	42	for trng. and disposal												
Avalon (Cowichan)	Sub-Lieut. T.	14	9	42	Per Appt. 26-9-42												
Bytown	Sub-Lieut. T.	20	11	43	addl. for Naval Super. Contract Built Ships for VALLEYFIELD												
Valleyfield	Sub-Lieut. T.	7	12	43								per Appt. 17-11-43					
Valleyfield	Lieutenant T.	15	1	44	per Appt. List. No. 36-44	(With Sen. of 11-5-43)											
DISCHARGED	" "	9	5	44	"Missing" After sinking of H.M.C.S. Valleyfield Per Casualty List -Presumed Dead"												
								per Casualty Correction Sheet - Page 49									

GENERAL REMARKS

Chest X-Ray Approved
Mrs. Ian P. MacLaren, (Widow)
267 Benson Avenue,
Toronto, Ontario. has been
awarded pension in respect of her
husband's death with effect from
the 8th of May, 1944.

CANADIAN MEMORIAL CROSS sent to
Mother: Mrs. Idah MacLaren,
62 Heathdale Road,
Toronto, Ontario.
13-10-44

CANADIAN MEMORIAL CROSS sent to
WIFE: Mrs. Helen MacLaren,
267 Benson Avenue,
Toronto, Ontario. (Sent 29-9-44)

DATE OF BIRTH DY.	MO.	YR.	PLACE OF BIRTH	CIVIL OCCU. MAIN	SUB	RELIGION	ED	PERM. RESIDENCE P.	CTY.	TOWN	PREV. SERV.	ENLI DIV.	RANK OR RATE ON ENLISTMENT A	BR	RANK
19	8	20	11	69	0	30	X	1	56	14	0	23	2	01	12

ENLIST. DATE DY.	MO.	YR.	ACT. SERV. DATE DY.	MO.	YR.	STR. CAT.		ACT. SERV. DATE DY.	MO.	YR.	SHIP OR ESTAB.	RANK OR RATE A	BR.	RANK
27	10	41	11	05	42						1220	0	01	09

SENIORITY DY	MO.	YR.	STR. CAT.	NON-SUB A	B	M ST.		CODED	CHECKED
15	01	44	10			62	EN		

09-06-44

OFFICIAL NUMBER | FILE NUMBER 103-M-378 O - 45010 | OFFICIAL NUMBER

NAME MACLAREN (Surname) Ian Pearson (Given Names) DATE OF BIRTH 19 August, 1920

PLACE OF BIRTH Toronto, Ontario OCCUPATION Confederation Life Ins. Co.

RELIGION Church of England EDUCATION

RESIDENCE AT TIME OF ENLISTMENT: Street and No. 62 Heathdale Rd. Town Toronto Province, etc Ontario

Engagements				Description					Previous Service			
Date (in figures) Day	Month	Year	Period	Height	Hair	Eyes	Complexion	Marks or Scars	Served in	Rank or Rating	Dates From	To
27	10	41	H.O.	5'9 3/4"	Fair	Blue	Fair	Nil				

NEXT OF KIN RELATIONSHIP (in pencil) Wife NAME (in pencil) Helen Maclaren

ADDRESS (in pencil): Street and No. 76 Chelfont St., West View Town Pittsburg Province, etc. Pa. U.S.A.

12/44 from letter

Medals, Clasps, Hurt Certificates, Prize Money

Date (in figures) Day	Month	Year	Particulars

Examinations, Certificates, etc.

Date (in figures) Day	Month	Year	Particulars	Date (in figures) Day	Month	Year	Particulars
21	8	43	Res. of Short A/S Exam. 82%				
8	9	43	Watchkeeping Certificate				

Badges, G.C. or G.S.

Date (in figures) Day	Month	Year	1st, 2nd or 3rd G.C. or G.S.	Granted Deprived Restored

Brief Particulars of Warrant or C.M. Punishments and C.P. Charges

Ship or Establishment	Wt. No.	Date (in figures) Day	Month	Year	Brief Particulars of Offence	Punishment

Date (in figures) Day	Month	Year	Days Forfeited: Prison	Det'n	Cells	C. Power	W. Trial	In diff. Char.

O.H.F. Received

Last Will & Testament dated 27-10-41 No. 22942

FILM NO. WSR 4477-4
DATE

Second Class For Conduct

From	To

W.S.G. APPLICATION 10423 RECEIVED 7/6/45

H.Q. 35—30M—5-41 (337)
N.S. 815—7-35

N.P.R./5-2.

FORM "B"

FILE: N.S. 0-45010, PERS. (N)

DEPARTMENT OF NATIONAL DEFENCE
- Naval Service -
Ottawa, Canada.

146284

Sir:

AUG 30 1944
(Date)

The following casualty has been reported -

NAME	RANK or RATING	NAVAL NO.
MacLAREN, Ian Pearson,	Lieutenant	R.C.N.V.R.

DATE OF ENLISTMENT - 27 Oct., 1941 Active Service: 11 May, 1942

DATE OF DISCHARGE - 7 May, 1944

HOSPITAL -
(If discharged in hospital under jurisdiction of D.P. & N.H.)

SERVICE - Canada & High Seas
(Indicate whether in Canada only; or in Canada and the high seas or elsewhere.)

Reason for discharge and when and where any disability was incurred, or where death occurred. - Missing, presumed dead, when H.M.C.S. "VALLEYFIELD" was torpedoed and sunk by enemy action in the Atlantic.

(Show clearly whether death or disability due to enemy action, accident or disease, and whether it occurred in Canada, or on the high seas or elsewhere outside Canada.)

NEXT OF KIN & RELATIONSHIP -

RELATIONSHIP - Wife NAME - Mrs. Helen MacLaren,

ADDRESS - 267 Benson Ave., TORONTO, Ont.

P.A.'S CHECKED IN
C.R. BY

NOTE: If records indicate that rating was separated from his wife, legally or otherwise, details to be furnished and copy of any Court Order, the Separation Agreement, etc., to be furnished.

FORM "A" RESPECTING THE ABOVE NAMED HAS BEEN PREVIOUSLY FORWARDED. PLEASE SEE REVERSE SIDE FOR DETAILS OF MARRIAGE ALLOWANCE, DEPENDENTS ALLOWANCE, etc.

C. R.
P. A.
NAVAL TREASURY
DATE 22/9/44
INITIAL

REMARKS:.....

THIS PORTION OF FORM COMPLETED BY CHIEF TREASURY OFFICER, DEPARTMENT OF NATIONAL DEFENCE, NAVAL SERVICE.

Names of Dependents	Relationship	Maiden name of wife	Date of marriage and/or date of birth of children
Mrs. Helen MacLaren	Wife	-----	-----

	D. A.	A. P.	TOTAL
Monthly rate:	$52.20	$100.00	$152.20

To Whom Paid: Mrs. Helen MacLaren Address 267 Benson Ave., Toronto, Ontario.

Date of Enlistment: See other side.

Date of Discharge: See other side.

Inclusive date to which D.A. and/or A.P. was Paid:

The final deduction of Assigned Pay for $100.00 has been made for the period from 1st to 31st of May 1944.

Remarks:

Computed by.....L.D.....

Checked by.....D.M.D.....

for Alec L. Boswell
Chief Treasury Officer,
DEPARTMENT OF NATIONAL DEFENCE,
(Naval Service).

The Secretary, The Canadian Pension Commission,
Room 228, Daly Building, OTTAWA, Ontario.

Can. S. 545
20M—4-41 (135)
N.S. 815-9-545

IN THE NAME OF GOD, AMEN

I, Ian Pearson MacLaren. of His Majesty's Ship Toronto, Division R.C.N.V.R. (now a Patient* in), being sound of mind, do hereby make this my last Will and Testament: I give and bequeath unto my

*If in Hospital or in Hospital Ship.

Insert the degree of relationship (if of any) and place of residence of the Legatee or Legatees.

See instructions on the back hereof.

Father:

Kenneth B. MacLaren.

62 Heathdale Rd.,

Toronto, Ontario.

22942

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 Father:

Kenneth B. MacLaren,
62 Heathdale Rd.,
Toronto, Ontario.

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.

In Witness whereof I have at Toronto, Ontario hereunto set my hand, this twenty-seventh day of October. , in the Year of Our Lord One Thousand Nine Hundred forty-one.

Ian P. MacLaren

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 request and in the presence of each other have subscribed our names as Witnesses. } *Witnesses* { J. Hill / B. Verbeck, Pay Sub-Lt. R.N.R.

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.

J. W. Cranbury ..... { Signature of the person by whom the Will was prepared.

Every item of information should be carefully supplied. (See reverse side for instructions)

THIS FORM MUST BE FILED FORTHWITH WITH THE DIVISION REGISTRAR OF THE DIVISION IN WHICH THE DEATH OCCURRED BEFORE A BURIAL PERMIT CAN BE ISSUED

WRITE PLAINLY WITH UNFADING INK THIS IS A PERMANENT RECORD

FORM 6

This form if placed in an envelope, marked "Dominion Statistics—Free, penalty for improper use $300," and properly addressed will pass through the mail "FREE"

PROVINCE OF ONTARIO—CERTIFICATE OF REGISTRATION OF DEATH

1. PLACE OF DEATH County or District of At Sea Township of

If in City, Town or Village (Name) Street House No.

(If death occurred in a hospital or institution, give the name instead of street and number)

2. LENGTH OF STAY (in years, months and days)
(a) In City, Town or Township where death occurred (b) In Province (c) In Canada (if immigrant)

3. PRINT FULL NAME OF DECEASED MACLAREN (Family name) Ian Pearson (Given name or names in usual order)

RESIDENCE No. 62 Street Heathdale Rd. City, Town, Village or Township Toronto Province Ontario.

(Residence means usual place of abode. Post Office Address for residents in rural parts not sufficient)

4. Sex	5. Nationality (Citizenship)	6. Racial Origin	7. Single, Married, Widowed or Divorced (Write the word)
Male	Canadian		Married

8. BIRTHPLACE Ontario (Province or Country)

9. DATE OF BIRTH August (Month) 19 (Day) 1920 (Year)

10. AGE in

Years	Months	Days	If less than one day old
23	9		hrs. or min.

OCCUPATION

11. Trade, profession or kind of work as spinner, teamster, office clerk, etc. Confederation Life Ins. Co.

12. Kind of industry or business, as cotton-mill, lumbering, bank, etc.

13. Date deceased last worked at this occupation

14. Total years spent in this occupation

15. If married give name of wife or husband of deceased

FATHER

16. NAME

17. BIRTHPLACE (Province or Country)

MOTHER

18. MAIDEN NAME

19. BIRTHPLACE (Province or Country)

20. Person giving information sign here Paymr. Cdr., R.C.N.R.,

Address Naval Service Headquarters, Ottawa, Ont.

Relationship to deceased Officer i/c. Naval Personnel Records.

21. Place of Burial, Cremation or Removal Not recovered.

Date of burial or removal

22. Burial Permit was issued by

Address

23. UNDERTAKER (Name and address)

MEDICAL CERTIFICATE OF DEATH

24. DATE OF DEATH May (Month) 7th (Day), 19 44 (Year)

25. I HEREBY CERTIFY that I attended deceased from:

19 to 19

and last saw h. alive on 19

CAUSE OF DEATH

I. Immediate cause — Give disease, injury or complication which caused death, not the mode of dying, such as heart failure, asphyxia, asthenia, etc.

(a) Missing, persumed dead, when H.M.C.S. "VALLEYFIELD" was torpedoed & sunk due to enemy action in the Atlantic.

due to

Morbid conditions, if any, giving rise to immediate cause (stated in order proceeding backwards from immediate cause).

(b)

due to

(c)

II. Other morbid conditions (if important) contributing to death but not causally related to immediate cause.

PHYSICIAN — Underline the cause to which death should be charged statistically

26. If a communicable disease is mentioned on this certificate, give (a) Date of appearance 19 (b) Duration of disease days

27. If a woman, was the death associated with pregnancy?

28. Was there a surgical operation? Date of operation 19

State findings Was there an autopsy?

29. If death was due to external causes (violence) fill in also the following:—

Accident, suicide or homicide? (State which) Date of injury 19

Manner of injury (How sustained)

Nature of injury

Specify whether injury occurred in industry, in home, or in public place

Signed by M.D.

Address **Date** 19

30. Division Registrar's Record No.

31. Filed 19 (Division Registrar)

4
NAVY

MRR

DEPARTMENT OF NATIONAL DEFENCE

NAVY ARMY AIR FORCE

STATEMENT OF WAR SERVICE GRATUITY

DECEASED MEMBER'S NAME Ian Pearson (CHRISTIAN NAMES) MacLAREN (SURNAME)

REGISTER NO. 10423
FILE NO. NS.045010
DATE 5 July/45
SERVICE NO. R.C.N.V.R
FINAL RANK OR RATING Lieut.
DATE OF DISCHARGE 7 May/44

PAYEE Mrs. Helen MacLaren
ADDRESS 76 Chalfont St.,
West View,
Pittsburg 2, Pa. U.S.A.

DATE OF TERMINATION OF OVERSEAS SERVICE 7 May/44

	$ ¢
A. TOTAL QUALIFYING SERVICE NO. OF DAYS 728/30 EQUAL TO 24 COMPLETE PERIODS AT $7.50	180.00
B. QUALIFYING OVERSEAS SERVICE NO. OF DAYS 585 LESS 8 INELIGIBLE DAYS, EQUAL TO 577 DAYS @ 25C. PER DAY	144.25
C. SUPPLEMENT FOR OVERSEAS SERVICE DAILY RATES AT DISCHARGE PAY $ 6.00 SUBSISTENCE OR LODGING AND PROVISION ALLOWANCE $ 1.70 ADDITIONAL PAY $ $ $ DEPENDENTS' ALLOWANCE 1/30 OF $ 52.20 $ 1.74 TOTAL $ 9.44 ×7 = $ 66.08 NO. OF DAYS 585/183 ×$ 66.08	211.24
D. WAR SERVICE GRATUITY	535.49
E. DEDUCTIONS OVERPAYMENT OF PAY AND ALLOWANCES $ DEPENDENTS' ALLOWANCE AND ASSIGNED PAY $ OTHER DEDUCTIONS $	Nil
F. TOTAL AMOUNT PAYABLE Cleared by F.E.C.B.	535.49

G. YOUR PORTION OF GRATUITY IS—

DEPENDENTS' ALLOWANCE IN ISSUE TO YOU $_____ OF $ _____ =$ 535.49
TOTAL DEPENDENTS' ALLOWANCE IN ISSUE $

Cheque 45669 - July 27/45

CERTIFICATE I CERTIFY THAT THE AMOUNT HAS BEEN CORRECTLY COMPUTED AND IS PAYABLE IN ACCORDANCE WITH THE TERMS OF THE WAR SERVICE GRANTS ACT, 1944 AND THE REGULATIONS ISSUED THEREUNDER.

PREPARED BY	CHECKED BY	TREASURY CHECKED BY	DATE
EP	[illegible]	H. Laflamme	17/45

SERVICE REPRESENTATIVE
for Dir. Naval Pay Acctng.

CANADA

Department of National Defence

126732

Naval Service

OTTAWA, Ont., 30 August, 1944.

IN REPLY PLEASE QUOTE

N.S. 0-45010 PERS. (N)

ESTATES BRANCH SEP 7 1944 H.Q. OTTAWA NATIONAL DEFENCE

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:

NAME, RANK/RATING, Official No., UNIT	PARTICULARS RE DEATH	NEXT OF KIN
Ian Pearson Maclaren, Lieutenant, R.C.N.V.R.	Missing, presumed dead to date 7 May, 1944. He was serving in H.M.C.S. "VALLEYFIELD", which was torpedoed and sunk by enemy action while on Convoy escort duty in the Atlantic.	Wife: Mrs. Helen Maclaren, 267 Benson Avenue, Toronto, Ontario.

ALLOTMENTS IN FORCE

In favor of		Amount	Initials
Mrs. Helen MacLaren, 267 Benson Avenue, Toronto, Ontario.	NIL	NIL	
	($52.20 D.A. and $100.00 A.P. stopped May 31/44).		
$8.40 5th Victory Loan (Stopped April 30, 1944).			MEM

HEN 1/9/44

Will: Attached.

Yours truly,

H.B. Money

for SECRETARY, NAVAL BOARD.

Administrator of Estates,
Estates Branch,
Department of National Defence,
Ottawa, Ont.

D 2258 A
1000M—4-42 (4259)
N.S. 815-5-2258

NAVAL SERVICE --- MINUTE SHEET

FILE NO. 0-45010 F.D.2 LETTER NO.

50

REFERRED TO	REMARKS (WITH INITIALS & DATE)
Private Sec. (N)	Lieutenant Ian Pearson MacLaren, Royal Canadian Naval Volunteer Reserve, is missing, presumed dead to date the 7th of May, 1944, after the sinking of H.M.C.S. "Valleyfield" by enemy action while on Convoy duty in the North Atlantic. No reports have been received that the undermentioned are dead, missing, dangerously, seriously or slightly injured and therefore they are presumed to be alive and well. They may be contacted by addressing correspondence as follows: Lieut. David James MacLaren, H.M.C.S. "Kings", c/o Fleet Mail Office, Halifax, N.S. Gordon Ross Pearson Bongard, Ordinary Seaman, V/S, O.N. V86065, H.M.C.S. "Montcalm", 30 Laurier Ave., Quebec, P.Q.
DEPT. NUMBER	(T. F. Heard), DA4. Lieutenant, R.C.N.V.R., Naval Personnel Records.

MEMORANDUM

Office of the Prime Minister

Ottawa, Sept. 9, 1944.

Referred from the office of the Prime Minister to the Minister of National Defence for Naval Services.

49

H. R. L. Henry,
Private Secretary.

DRAFTED BY NPR PER TFH
NS 0-45010 PERS (N)

NAVAL MESSAGE

To:

From: N S H Q

MR K B MACLAREN
62 HEATHDALE RD.
TORONTO ONT

THE MINISTER OF NATIONAL DEFENCE FOR NAVAL SERVICES
DEEPLY REGRETS TO REPORT THAT YOUR SON LIEUTENANT
CNP IAN PEARSON MACLAREN RCNVR IS MISSING AT SEA
REQUEST YOU INFORM NAVAL SERVICE HEADQUARTERS
ADDRESS OF HIS WIFE IN HALIFAX

26

101321Z

PASSED TO MR MACLAREN TORONTO 101513

L/T P/L 9-5-44 BK 3150

P.A.'S CHECKED IN

C.R. BY .....

EJ/RR

NS. O-45010(PERS.(N))

18th September, 1944. 53

Sir:

A letter forwarded under registered cover to your daughter-in-law, Mrs. Helen MacLaren, widow of the late Lieut. Ian Pearson MacLaren, R.C.N.V.R. has been returned as she can not be located at her former address; 267 Benson Ave., Toronto, Ont.

It will be appreciated if you will advise the undersigned at Naval Service Headquarters, Ottawa, Ont., as to Mrs. MacLaren's present address.

Yours truly,

(C.F.G. Hill)
A/Pay.Captain, R.C.N.V.R.
Director of Naval Pay Accounting.

Mr. K.B. MacLaren,
62 Heathdale Rd.,
Toronto, Ont.

LA/ERM

O-45010 F.D, 140 PERS(N)

16th October, 1944.

69

THIS IS TO CERTIFY that according to official information Lieutenant Ian Pearson MacLaren, 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 duty in the North Atlantic.

SECRETARY, NAVAL BOARD.

PM

REGISTERED

FILE NO: N.S. 0-45010 PERS. (N)

30th August, 1944.

44

Dear Mrs. MacLaren;

Further to my letter of the 11th of May, 1944, in view of the length of time that has elapsed since your husband, Lieutenant Ian Pearson MacLaren, 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.

Noted on Estate Card. G.P. 5-9-44

Mrs. Helen MacLaren,
267 Benson Avenue,
Toronto, Ontario.

BJ 30/9/44 NPR/5 PM

Royal Canadian
Message Condolence
Date Sent 30/8/44 NPR 5

TFH/AT

REGISTERED
AIR MAIL
NS: O-45010

20

8 May, 1944.

Dear Mrs. Maclaren:

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 Ian Pearson Maclaren, 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.

Yours sincerely,

LETTER OF REGRET
PERSONNEL NAVAL
MAY 9 1944

SECRETARY, NAVAL BOARD.

Mrs. Helen Maclaren,
267 Benson Avenue,
TORONTO, Ontario.