

A490
MENZIES
ARCHIBALD

NELSO

MEMORANDUM FOR

P. 64

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

Mrs. Susanna Menzies.
329 Kingston Street.
Victoria, B.C.

THE SECRETARY,
DEPARTMENT OF NATIONAL DEFENCE,
OTTAWA, ONTARIO
ATTENTION: ADMINISTRATOR OF ESTATES

and the following number quoted:—

H.Q. 123-M-229 FD. 244

DEPARTMENT OF NATIONAL DEFENCE
OTTAWA, ONT.

September 30 1941

For the purpose of record and in the event of there being any balance of pay, medals or memorials available for distribution (according to law) on account of the late

A.B. Archibald N. McL. MENZIES,

No. A. 490 R.C.N.R.

it is necessary that the requisite information regarding the deceased and his relatives should be furnished on the inside of this form in strict accordance with the printed instructions. The particulars required are to be carefully filled in and the Declaration on the back should then be signed in the presence of a Clergyman, Priest or Local Magistrate, who should be asked to complete and sign the Certificate. This form should then be returned to the above address.

(L.M. Firth) Major,
Administrator of Estates.



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.

Degree of Relationship	RELATIVES required to be accounted for	INFORMANT'S STATEMENT			
		NAME IN FULL of any Relative, if any, in each degree inquired for	Age	ADDRESS IN FULL of each surviving Relative, opposite his or her name, and date of death of each deceased relative	
1	Widow of the Deceased.....	Susanna Menzies	28	329-Kingston, St., Victoria. B. C.	
2	Children of the Deceased and dates of their Births.....	Robert Allan Menzies James William Menzies David Ross Menzies	5 4 1	329-Kingston, St., Victoria B. C.	
3	Father of the Deceased.....	deceased-1919			
4	Mother of the Deceased.....	Isabella Lean	55	2509-25th, ave Oakland, Calif U. S. A.	
5	Brothers of the Deceased	Full Blood	James Menzies William Menzies	39 33	California U. S. A.
		Half Blood			
6	Sisters of the Deceased	Full Blood	Agnes Harper Helen Larsen Edith Bowyer	28 28 21	California " U. S. A. "
		Half Blood	May Lean		
	Names of brothers or sisters (whether of the full or the half blood) of the De- ceased, who are dead, and date of death of each.	Names and ages of their children (if any)	Address of their children		
7	none	Raymond Menzies 15. Francis Menzies 10. Isabella Larsen 7 yrs Henry Bowyer 2 yrs	California. " U. S. A. " "		

ONLY IF NO RELATIVES IN THE DEGREES ABOVE ARE NOW LIVING, THE FOLLOWING PARTICULARS SHOULD BE GIVEN

		NAMES OF THOSE LIVING	Age	ADDRESS IN FULL
8	Grand-Parents of the Deceased.....	deceased	-	-
9	Uncles and Aunts by blood of the Deceased (not Uncles and Aunts by marriage).....	-	Age	-

FULL PARTICULARS AS TO IDENTITY

10	What is the full name of the deceased?	Archibald N. MacLennan
11	Give the month and year of his birth.	March-20-1910
12	Where and when were his parents married?	Scotland
13	Was he ever married? If so, state exact place and date of marriage.	Yes. Sept 19, 1937 at Pico, Vancouver Hasting St E.
14	Did he leave a (later) Will? If so, it should be forwarded.	No.
15	Is there any other estate which will necessitate application being made for Probate or Letters of Administration?	

PARTICULARS OF DOMICILE

16	Where was deceased born?	Sterling-Scotland
17	In what Province, Country or State did he reside, and in which last?	British Columbia
18	How long in each?	31 yrs in B.C.
19	What was the nature of his employment?	Seaman
20	Did he own the house or homestead in which he lived? If so, where?	rented at 329 Kington St.
21	Did he ever state verbally, or in writing, where he intended to make his permanent home?	No
22	State <u>your</u> postal address in full.	329-Kington St. Victoria, B.C.

PARTICULARS AS TO CLAIMS

23	Have the funeral expenses been paid? If so, by whom?	yes Navy
24	Are there any outstanding claims against the estate? If so, furnish full name and address of each Creditor in this space and enclose his Bill of Account. (See Note Below).	No

NOTE.—Paragraph 24 refers to debts incurred for board and lodging, medical and funeral expenses, money borrowed, goods purchased, etc.; the following information to be embodied in all accounts submitted:—

1. Name and address of Creditor. none
2. Detailed statement of particulars of claim with date or dates incurred.
3. At the end of his statement the creditor should certify that the account is just and reasonable, that no payments save as shown, have been made thereon and that he holds no security therefor; the creditor should then sign same, and if you admit that the claim is correct, then you "O.K." the bill and sign same.

(PLEASE TURN OVER)

DECLARATION

*Insert
of rela
for exa
"Widow,"
"Father,"
"Brother," etc.

I hereby declare that the foregoing particulars are correct, and a true and complete statement of all the relatives that the deceased ever had in the degrees inquired for; and that I am the

*.....*Widow*.....of the deceased.

N.B. To be signed in full in the presence of a Clergyman, Priest or Local Magistrate

Susanna Menzies {Signature of Informant

CERTIFICATE

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

*See above { Name of Informant } is the *.....*Widow*.....of the Deceased above described, and I believe the above Declaration and the Statement of Relatives made by the Informant and signed in my presence to be complete and correct.

Dated at.....*Victoria 38*.....this.....*10th*.....day of.....*October*.....19*41*

Signature of Clergyman, Priest or Magistrate }

H. C. Wallace

Qualification.....

Priest Magistrate

Address.....

Victoria 38

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 of each surviving Relative enquired after is stated in its proper place in the Statement opposite.



N. R. 5

5M-1-39

N.S. 815-12-5

NATIONAL DEFENCE

MAR 13 1940

H.Q. 123-7A 229
CANADA**ATTESTATION FORM**

10417

FOR MEN OF THE ROYAL CANADIAN NAVAL RESERVESURNAME MENZIES OFFICIAL No. A490CHRISTIAN NAMES Archibald Nelson McLeod MARRIED, SINGLE OR WIDOWER Married

PERMANENT ADDRESS		RELIGION
2616 Cambridge Street, Vancouver, B.C.		Presbyterian
DATE OF BIRTH	PLACE OF BIRTH	NAME AND ADDRESS OF NEXT OF KIN
March 20th 1910	Town <u>Stirling</u> County Province <u>Scotland</u>	Wife - <u>Sussana</u> <u>2616 Cambridge Street</u> <u>Vancouver, B.C.</u>

PERSONAL DESCRIPTION ON ENROLMENT

HEIGHT	CHEST MEASUREMENT	HAIR	EYES	COM- PLEXION	WOUNDS, SCARS, MARKS
Feet <u>5</u>	Inflated <u>38½</u>	<u>Brown</u>	<u>Brown</u>	<u>Med.</u>	<u>Tattoo right forearm</u>
Inches <u>9</u>	Deflated <u>33</u>				
Mean <u>36½</u>					
DATE OF ENROLMENT	RATING ENROLLING FOR	TRADE OR CALLING AND IN WHOSE EMPLOY			
<u>18th February 1940</u>	<u>Probationary</u> <u>Able Seaman</u> <u>R.C.N.R.</u> <u>(Temp)</u>	<u>Seaman,</u> <u>C.P.R. B.C. Coast Service,</u> <u>Victoria, B.C.</u>			

(B) DECLARATION TO BE MADE BY APPLICANT

I hereby declare as follows:—

- (1) That I am a British Subject domiciled in Canada.
- (2) That I am desirous of being enrolled as a member of the Royal Canadian Naval Reserve, and that I accept and agree to abide by the rules of the said Force.
- (3) (a) That it is my intention to follow the sea for a period of at least five years from this date.
- (b) ~~That it is my intention to follow the calling of a Fireman, either at sea or on shore, for a period of five years from this date.~~
- (c) ~~That it is my intention to follow the sea in an Engine room capacity for a period of five years from this date.~~

NOTE.—Candidates for enrolment as *Seaman* are to cross out clauses (b) and (c) above.Candidates for enrolment as *Stoker* are to cross out clauses (a) and (c) above.Candidates for enrolment as *E.R.A.* are to cross out clauses (a), (b) and (c) above.Candidates for enrolment as *Engineman* are to cross out clauses (a) and (b) above.

Personnel Records Division.	
1. Noted in Records
2. Index Card
3. Sub. Card
4. Statistical Card
5. Roneo Strip
6. Pension Card
7.
8.
DATE	<u>20-3-40</u>

*Cross out
clause not
applicable

(b) ~~I served in~~ for the period shown.

Served in	Rank	From	To
xxx	xxx	xxx	xxx

(7) On being enrolled as a member of the Royal Canadian Naval Reserve, I undertake and bind myself:—

duration of hostilities

- (a) To serve from the date thereof for ~~five consecutive years~~, being subject to the provisions of the Naval Service Act, and of the Regulations made in pursuance thereof for the government of the Royal Canadian Naval Reserve, and to the customs and usages of His Majesty's Canadian Naval Service.
- (b) To report for active service if called upon in time of war or emergency, and, if called into active service, to serve ashore or afloat as may be directed according to where my services are required.
- (c) To keep in good repair and condition the articles of uniform and any articles of outfit which may be issued to me and to return them to the nearest Registrar or to Training Headquarters prior to my discharge or when required so to do by any authorized person, or to pay compensation for any loss or damage thereto other than fair wear and tear; and also not to wear such uniform or outfit (which is and remains the property of the Crown) except when on Naval duty.

Dated this 15th day of February 1940

99. Mensin
 (Signature of Applicant)

(C)

OATH OF ALLEGIANCE

I, Archibald Nelson McLeod Menzies.....do sincerely promise and swear (or solemnly declare) that I will be faithful and bear true allegiance to His Britannic Majesty.

Signature of Applicant..... *A. H. Menzies*

Witness.....

Date.....15th February 1940..... Rank.....Lieutenant R.C.N.R.....

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

(D)

CERTIFICATE OF ATTESTING OFFICIAL

I hereby certify that all the foregoing statements were made by the man above named, in my presence, and that he has made and signed the above declaration and has taken the oath of

allegiance in my presence this 15th day of February 1940

.....Lieutenant R.C.N.R.....
(Signature of Officer and rank)

NOTE.—When this form has been completed it is to be forwarded to Naval Service Headquarters, Ottawa, for custody.



Can. B. 207

20M-11-39 (3063)
N.S. 815-2-207

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

(R.C.N. OR RESERVE FORCES)

10418

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 Archibald Nelson MacLeod MENZIES
candidate for entry as AB R.C.N.V.R.
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.

Dated at Vancouver B.C. the 14th of Feb 19 40

*Delete one

B.P. 132/20 SG 1020 alb. neg Examining Medical Officer
White Race neg (Rank) Lt. Col. R.C.N.V.R.

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

Age { Years Months	Weight without Clothes	Height with Bare Feet	General Development	Chest Girth	Vision by— (i) Snellen's Types (ii) Colour Vision	Vaccinated or revac- cinated for Small Pox (Date)	Lungs, Heart, etc.	Abdomen, Hernia, etc.	Limbs and Joints	Skin	Ears and Hearing	Testes, Varicocele, etc.	Mouth, Teeth (No. deficient and No. defective, if any), Nose, Tonsils, etc.	Anus, Haemorrhoids, etc.	
(a)	(b)	(c)	(d)	(e)	(f)	(g)	(h)	(i)	(j)	(k)	(l)	(m)	(n)	(o)	(p)
$\frac{1}{2}$ 2	lbs. 148	ft. ins. 5.1 9"	Good	inches (a) maximum 38 $\frac{1}{4}$ (b) minimum 35 $\frac{1}{2}$ (c) mean 36 $\frac{1}{2}$	right eye $\frac{20}{25}$ left eye $\frac{20}{25}$ colour vision C.V.N.	Childhood	Normal	Normal	Flat 17/11/17	Clear	Wax - both Drumming	Normal	2 Complete Plaques	Normal	

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

CERTIFICATE TO BE SIGNED BY CANDIDATE

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

A. N. Menzies
Signature of Candidate

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

This Candidate is the subject of Per planus

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

*Delete one

SG 1020
Examining Medical Officer
(Rank) Sgt. Lt.

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

R.C.N.R.-D-/41

MEDALS AND MEMORIALS—DECEASED PERSONNEL

REGISTRATION No. DATE OF DESPATCH

(1) MEDALS

PERSON

ENTITLED TO Mrs. S. Menzies - Mother

ADDRESS: ~~--329 Kingston St.,~~ Box 334
~~--Victoria, B.C.--~~ NEW WESTMINSTER, B.C.

(2) MEMORIAL CROSS

WIDOW

ADDRESS:

(3) MEMORIAL CROSS

MOTHER

ADDRESS:

MEMORIAL B A H

(1)

DATE DESP

REGN. NO

249

(2)

(3)

DECEASED 14 August 1941

DEPARTMENT OF VETERANS AFFAIRS

AWARDS

NAVY

D.D.
WAR SERVICE RECORDS

MENZIES	Archibald Nelson McLeod	A-490	A.B.	FILE No.
SURNAME (IN BLOCK LETTERS)	CHRISTIAN NAMES	REG. No.	RANK ON DISCHARGE	C.A.S.F. UNIT

WAR SERVICE

BADGE

(CLASS)

No.

DATE DESPATCHED:

ADDRESS:

CAMPAIGN MEDALS	REGISTRATION NUMBER AND DATE DESPATCHED
1939-45 Star	5849 24 1149
C.V.S.M. & Clasp	
War Medal	
	(THE REVERSE TO BE USED FOR ESTATE PURPOSES)

This card is to be shown on demand by NAVAL,
MILITARY or POLICE AUTHORITIES

Specimen Signature

Age		Colour of Hair	
20 Mch. 10		Brown	
Height		Next of Kin	
Feet	Inches		
5	9		
Weight			
Eyes			
Brown			

DEPARTMENT OF NATIONAL DEFENCE
NAVAL SERVICE

1048 IDENTIFICATION CARD

This is to Certify that

N.S. 25915

Archibald N.M.MENZIES P/AB A490

NAME

Rank or
Rating

Official
Number

~~R.C.N.~~
~~R.C.N.R.~~
~~R.C.N.V.~~

~~Royal Canadian Navy~~

is on Active Service
~~Divisional Strength~~ of the

NADEN

Division, R.C.N.V.R.

S. 2532

30M-8-40 (6630)

H.Q.N.S. 815-9-2582

Commanding Officer

VERIFICATION FORM

RANK/RATING

OFF. NO.

SERVICE

SHIP

AREA

QUALIFYING PERIODS I

FROM

TO

DAYS

FROM

TO

1939-45 ATLANTIC

18240

Pr. Robert 31.7.4/14-8.41 and W.C.

Lead 148-91

VERIFIED BY

VERIFIED BY

CONDUCT SHEET.

NAME Archibald Nelson McLeod MENZIESRATING AB{ PORT DIVISION and
OFFICIAL NUMBERA. 490

NAME OF SHIP.	Date of Entry.	No. of G.C. Badges held.	Date of Commencement of "very good" conduct. (Art. 527, cl. 4 and 5). If conduct is not "very good" insert "Nil."	Class for Conduct.	Class for Leave.	Character since last assessment on Service Certificate or Conduct Sheet (Art. 605, cl. 5 and 8).			Efficiency. (Art. 607).	For Art. 413 ratings only. (See Notes 5, 6 and 7.)		Ship Discharged to (giving date, if it differs from date of assessment of character, and, in the case of an N.C.S. Steward or Cook discharged to Shore, the cause of discharge).	In red ink—Whether recommended for (a) Boys' Training Service, (b) Other Instructional Duties. (See Note 9).	R.M.G. or R.R. (where applicable).	Commanding Officer's Signature.
				If in 2nd class, insert (1) Date of reduction. (2) Date of proposed restoration.	If in 2nd class, insert date from which entitled to restoration to 1st class. (Art. 573, cl.2)	From.	To.	Character Assessment.		Whether recommended for advancement (Must be fit for immediate advancement, and fully qualified).	Whether recommended with a view to accelerated advancement. (Must also be fit for immediate advancement but not necessarily fully qualified).				
Naden.	18 Feb 40	—	18 Feb 40	1.	1.	1940 18 Feb.	30 July	YG.	Sat	No (NQ)	No	P. Robert	—	—	[Signature]
Prince Robert	3 July 40	—	—	1	1	Jan '41	14 Aug '41	VG	Sat	—	—	D.D.			[Signature]

NOTES.

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

RATING.....

**PORT DIVISION and
OFFICIAL NUMBER** **A.490**

[illegible]

Name MENZIES A.N.M.
 Sub-Rating and Seniority A.B. 18/2/40 Non-Sub.
 O.N. A490 S.B. No. _____ W.B. No. _____
 Joined Ship 19/2/40 from SHORE
 Engagement: Period HOST Expires _____
 Date of Birth 20/3/10 Religion _____
 Character V.G. Efficiency Sat Date 16 Apr 40
 Badges nil Class for Conduct 1st Class for Leave 1st
 Date due for: Next Badge 18/2/43
 Progressive Pay _____
 L.S. & G.C. Recommended _____
 Advancement. WISHES TO PASS? RECOMMENDED? DATE QUALIFIED?
 Educ. Test Pt. 1 _____
 Higher Educ. Test. _____
 Professional for _____
 higher Sub-rating _____
 do Non-Sub. _____
 (For Ordinary Seamen Form T.S. 34 must be used in addition)

Any Non-Service Attainments _____

Swimming Qualification _____

Athletic Capabilities _____

General Remarks (including intelligence, energy, initiative, powers of command).

In Disciplinary Course this rating was "Satisfactory" in both Seamanship and Gunnery.

H.M.C.S. " NADEN "

J.F.S. 3 Aug 40.

J.F. Stairs. Lieut. R.N.V.R.
Officer of Division

Date 16 Apr 40

- NOTES:—(1) This form is to be kept for each rating by the Officer of his Division.
 (2) The form is to be completed to date, and signed by the Officer of the Division before the rating changes his Division or Ship.
 (3) On a rating changing his Ship or Establishment, Form S. 264 is to be transferred with his other papers for the information of the next Officer of Division.

See J.S.

HMC. S. Prince Robert

Joined ship 31st July 1940

An intelligent rating. Has
made a good Shipwright's Mate
Energy & ability good

J. M. C. Day

Lt. R. C. N. R.

KIT LIST—MEN DRESSED AS SEAMEN O.N. *A490*

NAME *MENZIES H. N. M.*

RATING *AB*

REG. KIT	DATES	8/3/40	12/3/41	28/7/41					
3	Serge Jumper with cuffs.....	2	2	2	3				
3	Prs. Serge Trousers.....	2	2	2	3				
2	Drill Uniform Jumpers.....				✓				
3	Duck Working Jumpers (Seamen, etc.).....	2	-	2	2				
2	“ “ (Stokers, etc.).....				-				
3	Prs. Duck Trousers (Seamen, etc.).....	2	-	2	2				
2	“ “ (Stokers, etc.).....				-				
2	Prs. Drill Trousers.....				-				
1	Blue Overall Suit (Seamen, etc.).....	1	1	1	1				
2	“ “ (Stokers, etc.).....				-				
3	Blue Jean Collars.....	3	3	3	3				
2	“ Cloth Caps.....	1	1	1	2				
1	White Duck Cap.....	2	2	1	1				
1	Cap Box.....	1	1	1	1				
2	“ Ribbons.....	2	2	2	2				
2	B.S. Scarves.....	2	2	2	2				
2	Prs. Socks or Stockings.....	2	2 1/2	2 1/2	2	Long			
2	“ Half Boots.....	2	2	1	2				
1	“ Shoes, gymnastic.....	1	1	1	1				
1	Bed.....	1	1	1	1				
1	Blanket.....	2	2	2	1				
2	Bed Covers.....	2	2	2	-				
3	Flannels.....	3	3	3	3				
1	Jersey.....	1	1	1	2				
*1	Knife.....	1	1	1	1				
2	“ Lanyards.....	2	2	2	1				
1	Soap Bag.....	1	1	1	2				
1	Horn Comb.....	1	1	1	-				
1	Hair Brush.....	1	1	1	1				
1	Tooth “.....	1	1	1	1				
1	Clothes Brush.....	1	1	1	1				
1	Blacking “.....	1	1	1	1				
1	Hard Boot Brush.....		+		-				
1	Polishing Boot Brush.....	1	1	1	1				
1	Housewife.....				-				
1	Type.....	1	1	1	1				
1	Ditty Box <i>or Attache Case</i>	1	1	1	1				
24	Clothes Stops.....				-				
2	Prs. Drawers.....	2	2	2	1				
2	Check Shirts.....				-				
2	Towels.....	2	2	2	2				
1	Waist Belt.....	1	-	1	3				
1	Overcoat.....	1	1	1	1				
1	Oilskin Coat.....	1	1	1	1				
3	Singlets Tropical.....			3	1				
3	Shorts Tropical.....			2	2				
1	Vol. I Seamanship Manual (O.S. and Boys only).....				-				
‡2	Hammocks.....	2	2	2	2				
‡1	Set Clews.....	1	1	1	1				
‡1	Lashing.....	1	1	1	1				
‡1	Kit Bag.....	1	1	1	1				

[illegible]

To be filled in immediately on completion of Course.

[illegible]

To be filled in by Medical Officer after each Test.

[illegible]

GUNNERY HISTORY SHEET

To be attached to the rating's Service Certificate until final discharge from the Service, when this History Sheet is to be given to the man, together with his Service Certificate.

Name..... A MENZIES Official No. 17490
(Surname in BLOCK LETTERS)

Port Division.....VANCOUVER (RCNR)

RECORD OF GUNNERY STATIONS IN SHIPS AT SEA

To be filled in, in H. M. Ships at sea, when duties are performed **for not less than six months.**

Where a rating is found unsuited for any particular Gunnery duty, a notation to that effect is to be made in RED. Should any man be subject to severe seasickness, and therefore unsuitable for employment in ships smaller than cruisers, this fact is to be reported to the Commodore of the man's Depot, and a notation made on Page 1.

[illegible]

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

The corner of this Certificate is to be cut off if the man is discharged with a "Bad" character or with disgrace, or if specially directed by the Department of National Defence (Naval Service). If the corner is cut off, the fact is to be noted in the Ledger.

CERTIFICATE of the Service of

Archibald Nelson McLeod MENZIES

IN THE ROYAL CANADIAN ~~NAVY~~ NAVAL RESERVE

I.C. N.S. 25915

Official Number *A490*

Naden

Date of birth *20 March 1910*

Where born { Province *Stirling*
Town or county *Scotland*

Trade brought up to

Religious denomination *Presbyterian*

Date passed swimming test

Man's signature on discharge to pension }

Nearest known Relative or Friend
(To be noted in pencil)

Name: *Sussana Menzies*

Relationship: *Wife*

Address: *329 Kingston St
Victoria B.C.*

All Engagements, including N.C.S., to be noted in these Columns

Date of actually volunteering	Commencement of time	Period volunteered for	Date of actually volunteering	Commencement of time	Period volunteered for
1.	<i>18 Feb 40</i>	<i>Hostilities</i>	5.		
2.			6.		
3.			7.		
4.			8.		

Medals, Clasps, Etc.

Date received or forfeited	Nature of decoration	Date received or forfeited	Nature of decoration

Description of Person	Stature		Chest, In.	Colour of			Marks, Wounds and Scars
	Feet	In.		Hair	Eyes	Complexion	
On entry as a boy.....							<i>Tattoo right</i>
On advancement to man's rating or on entry under 28 years.....	<i>5</i>	<i>9</i>		<i>Brown</i>	<i>Brown</i>	<i>Med</i>	<i>forearm.</i>
On re-entry for C.S. or for Non-C.S. after attaining 28 years.....							
Further description if necessary.....							

[illegible]

Examinations passed and Notations or Qualifications other than those entered on History Sheets

[illegible]

[illegible]

Six copies to be rendered to Naval Service Headquarters

REPORT OF THE DEATH OF AN OFFICER, MAN OR BOY

HMCS. Naval Service Headquarters at Ottawa, Ontario.

Name SEWELL, Archibald Nelson Nelson
(Christian names in full)Rank of Rating Able Seaman Official No. 2-4470, R.C.N.C.
(If unknown, date of first entry)Place of Birth Stirling, Scotland Date of Birth March 27, 1910. Occupation in Civil Life Seaman, C.P.S., R.C. Religion Presbyterian.
 Coast Service,
 Victoria, B.C. Number of years service in the Navy (Long Service R.C.N., or mobilized service in case of R.C.N.
(Temporary) or Reserve ratings) 10 February, 1940 to 14 August, 1941, R.C.N.C. Date of Death 14 August, 1941. Place of Death Talara, Peru. Cause of Death Cerebral concussion, brought about by a light blow while in a
(If due to accident, violence, or enemy action, particulars to be stated briefly)
 state of acute alcoholism. Nearest known relative or friend. { Name Mrs. Susan Seewell, Relationship Wife.
Address 333 Kingston Street, Victoria, B.C.

Date on which the above was informed by Ship.....

Date on which death was registered with local Officials.....

In the case of Imperial Service men, whether Active Service, Pensioner or Reserve, date on which the
prescribed return was rendered to the Registrar General in London, Edinburgh or Dublin, accord-
ing to Nationality.....Place of Burial At sea. Date of Burial 16 August, 1941.
(if known) (if known)Location, Number, etc., of grave.....
(if known)Undertaker employed.....
(if any)

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

Commanding Officer,

 22 October, 1941. The NAVAL SECRETARY,
Department of National Defence,
Ottawa, Canada. M. J. G.
(S.O. (Sewell)),
NAVAL SECRETARY.In all cases this Form is to be sent in addition to the Report by Telegraph required by the
Regulations.

Distribution: File, Imp. W. G. Com., Dom. Stat., Register.

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

4
NAVY

Deceased member's
NAME Archibald N. M. (CHRISTIAN NAMES) MENZIES (SURNAME)
Payee: Mrs. Susanna MENZIES,
ADDRESS 310 Huntington Place
Victoria, B.C.
REGISTER NO. 1207
FILE NO. NS.A-490
DATE 23 Feb/45.
SERVICE NO. A-490
FINAL RANK OR RATING A.B.
DATE OF DISCHARGE 14 Aug/41
DATE OF TERMINATION OF OVERSEAS SERVICE 14 Aug/41

A. TOTAL QUALIFYING SERVICE		\$
NO. OF DAYS 544	EQUAL TO 18 COMPLETE PERIODS AT \$7.50	135.00
B. QUALIFYING OVERSEAS SERVICE		
NO. OF DAYS 380	LESS 4 INELIGIBLE DAYS, EQUAL TO 376 DAYS @ 25c. PER DAY SEE PAR. 2 OVERLEAF FOR EXPLANATION	94.00
C. SUPPLEMENT FOR OVERSEAS SERVICE		
DAILY RATES AT DISCHARGE		
PAY \$ 1.85		
SUBSISTENCE OR LODGING AND PROVISION ALLOWANCE \$ 1.45		
ADDITIONAL PAY Barber \$.05		
DEPENDENTS' ALLOWANCE 1/30 OF \$ 1.50		
TOTAL \$ 4.85 X7 = \$ 33.95		
NO. OF DAYS 376 X\$ 33.95		69.76
D. WAR SERVICE GRATUITY		298.76
E. DEDUCTIONS		
OVERPAYMENT OF PAY AND ALLOWANCES \$		
DEPENDENTS' ALLOWANCE AND ASSIGNED PAY \$		
OTHER DEDUCTIONS \$		NIL
F. AMOUNT PAYABLE		298.76
(THIS AMOUNT IS PAYABLE IN MONTHLY INSTALMENTS OF \$ EACH)		

THE WAR SERVICE GRANTS ACT, 1944, PROVIDES FOR YOUR RE-ESTABLISHMENT CREDIT IN THE AMOUNT SHOWN IN SUB TOTAL OF A. & B. THIS CREDIT IS AVAILABLE TO YOU IN CERTAIN CIRCUMSTANCES. INQUIRY IN THIS CONNECTION SHOULD BE DIRECTED TO THE DEPARTMENT OF VETERANS' AFFAIRS.

SEE REVERSE SIDE
FOR EXPLANATION
OF ITEMS A, B & C

G. MONTHLY INSTALMENT NOT TO EXCEED DAILY RATE OF PAY AND ALLOWANCES \$ X30 \$

INSTALM. PAYABLE	1	2	3	4	5	6	7	8	9
AMOUNT	298.76								
CHEQUE No.	111880								
DATE	10/3/45								

INSTALM. PAYABLE	10	11	12	13	14	15	16	17	18
AMOUNT									
CHEQUE No.									
DATE									

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.

TREASURY	
PREPARED BY BJD	CHECKED BY [Signature]
CHECKED BY [Signature]	DATE 5/3/45

for Dir. Naval Pay. Accting. SERVICE REPRESENTATIVE

EXPLANATION OF ITEMS A, B & C

1. The War Service Grants Act, 1944 provides for the payment of the War Service Gratuity for every thirty days of service as follows:—

- (i) \$7.50 in respect of service which is not classed as overseas service.
- (ii) \$15.00 in respect of service classed as overseas service.

By regulation, each person qualifying is entitled to a gratuity of \$7.50 for each completed period of 30 days of service together with an additional sum of 25 cents for every day of overseas service **which falls within such periods**. No sum is payable for any day of service over and above the last completed 30 day period.

2. An "ineligible day" is any day of overseas service, rendered after completion of the last 30 day period, for which no additional sum of 25 cents per day is payable.
3. In addition, a supplement is payable for service classed as overseas service equivalent to seven days' pay and allowances, including dependents' allowance and subsistence or lodging and provision allowance at standard Canadian rates for each six months of overseas service and proportionately for a period of less than six months. By regulation, "six months" is considered to mean "183 days".
4. For the purpose of computing benefits under the Act, no period of absence without leave or leave of absence without pay, or time served while undergoing sentence of penal servitude, imprisonment or detention, or period of service in respect of which pay is forfeited is included in determining qualifying service.

1207

PARTICULARS OF DEAD OR MISSING PERSONNEL
WITH REGARD TO PAYMENT OF WAR SERVICE GRATUITY

Name of Deceased Member Archibald H. McE. MENZIES Rank or Rating A-B O. No. A490

1. Dependents' Allowance and Assigned Pay in force at date of death: m
B.A. 1.50 Mr. Susanna MENZIES (wife)
ALLOT. 329, Kingston Street,
A.P. 87.00 Victoria B.C.
D.A. -
A.P. -

2. Pension awarded or being awarded to: WIFE - as above

3. War Service Gratuity Application(s) received from: Mr. Susanna MENZIES
310, Huntington Place, Victoria, B.C.

In accordance with the War Service Grants Act, 1944 (Part I, Clause 4) and Directive dated 16th December, 1944 issued under authority of the Minister of Veterans Affairs, application(s) for War Service Gratuity in respect of the service of the above named deceased member may be dealt with as follows:

(X) To be paid to: Mr. Susanna MENZIES (wife) In the FULL proportion of: /
- and -

to: In the proportion of: /

() To be referred to the Dependents' Allowance Board for decision as to dependency within the spirit and intent of the War Service Grants Act, 1944, observing this application(s) is classed under:

Group "B" (ii)

Group "C" of the above mentioned Directive.

Date Feb. 15 / 1945

[Signature]
for D.N.P.A. (G) sig.

1207

TO: D.N.P.A.

FILE No. N.S. A 490.

"WAR SERVICE GRATUITY"

COMPUTATION OF SERVICE

MENZIES ARCHIBALD NELSON MCKEOD A 490. A.B.
SURNAME CHRISTIAN NAMES OFFICIAL RANK OR RATING
IN FULL NUMBER ON DISCHARGE

CAUSE OF DISCHARGE: Dead.

TOTAL SERVICE

Date of Active Service 18 Feb. 1940. ✓
Date of Discharge 14 Aug. 1941. ✓
Total No. of Days 544 ✓
Less non qualifying service NIL. ✓

365
127 W
31 Mch
30 Apr
31 May
30 June
31 July
14 Aug
544

Total Days 544. ✓

OVERSEAS SERVICE

% Total No. of Days 380 ✓
Less non qualifying service NIL. ✓

Total Days 380 ✓

Record of Service in other Forces (per Naval Records)

Branch of Service NIL. ✓
Date of Active Service _____
Date of Discharge _____

Applicant ^{widow} ~~wife~~ (Mrs Susanna Menzies) in receipt of pension.

& % Overleaf

Computed By _____
Checked By _____

DATE: NOV 9 1944

Heather
for (H.B. Money)
Payr. Cmdr. R.C.N.R.
Officer-in-Charge
Naval Personnel Records

no S/C enclosed - copy on file. fe.

NON QUALIFYING SERVICE

Overseas

(#) Date	Reason	No. of Days	
"	"	"	"
"	"	"	"
"	"	"	"
"	"	"	"
"	"	"	"
"	"	"	"
"	"	"	"
		Total Days	

(%)

OVERSEAS SERVICE:

Where Serving	From	To.	No. of Days
<i>Prince Robert.</i>	<i>31 July 40.</i>	<i>14 Aug 41.</i>	<i>380.</i>

365
14
380

For (U.S. Navy)
Pay, Civil W.C. 1.1.
Officer-in-Charge
Naval Personnel Records

DEPARTMENT OF NATIONAL DEFENCE
ESTATES BRANCH

Ottawa, Canada

Date *Dec 10th* 1941.

Received this date from the Administrator of Estates cheque
of the Receiver General of Canada, payable to my order for
the sum of **TWO HUNDRED AND ELEVEN**
..... **20**/100 Dollars ... (\$211.20),
being that portion of the Service estate of the belowmentioned
deceased representing **3** shares of \$ **70.40** each, legally de-
volving upon persons under the age of twenty-one years, being
..... **children** of the deceased, now under the
care and custody of me their **mother**. I undertake with the
Department of National Defence, Ottawa, Canada, to use the
amount of one of such shares for the benefit of each of such
minors entitled thereto, namely:-

Robert, James, David,

all residing with me at **329 Kingston St., Victoria, B.C.**

..... *Susanna Menzies*
Signature

MENZIES, Archibald N.M., A.B. (Deceased)
No. A-490, H.M.C.S. PRINCE ROBERT.

R

ESTATES BRANCH

December 4th, 1941.

Mrs. Susanna Menzies,
329 Kingston Street,
Victoria, B.C.

MENZIES, Archibald H.M. A.B. (Deceased)
No. A-490, H.M.C.S. "Prince Robert".

Dear Mrs. Menzies:

All documents in connection with your deceased husband have now been received and it is desired to make legal distribution of an amount representing the balance of pay at his credit.

The total of your husband's Service estate is \$316.81. This amount includes balance of wages \$20.56 amount realized from sales of effects \$163.25, cash found in effects, \$107.15, debts collected .75, together with the balance in his account with the Canadian Bank of Commerce, Victoria, B.C., \$25.10.

Your husband died without having made a Will and his Service estate, is, therefore, in accordance with the law of his Province of domicile, distributable in the proportion of 1/3 to you and the other 2/3 equally among his children.

In accordance with the information supplied, there are three children, all minors, but authority has been obtained to pay amounts distributable to minors, to the widow, or parent, or guardian, or such other person, as the case may be, who has the custody of such minors, so that their shares may be applied for the maintenance, education and benefit of each such minor, respectively. In this instance the sum of \$211.20, representing three shares of \$70.40 each, may be paid to you providing you undertake to use the money accordingly and sign and return, in the meantime, the form of receipt annexed hereto.

If the form, duly signed, reaches us within the next few days, it is anticipated that the cheque can be forwarded within a short time thereafter.

Yours faithfully,

(L.M. Firth) Major,
Administrator of Estates.

EQ:GL

NAVY

DISTRIBUTION OF SERVICE ESTATES

Naval - Military - Air Force

MENZIES

Archibald H.M.

A-490

61

Name _____ No. _____

A.B. Surname H.M.C.S. Christian Names

14/8/41

Rank

Unit

Date of Death

AMOUNT

L. P. C. \$ 291.71

Other Credits 25.10

Total 316.81

Shares Retained 316.81

NET TOTAL

December 4th, 1941.

Date _____

SHARE	RELATIONSHIP	NAME AND ADDRESS	AMOUNT																																																																
		Mrs. Maudie Menzies, 329 Kingston Street, Victoria, B.C. (1/3 as next of kin entitled 2/3 for ben-fit of three minors)	316.81																																																																
<table><tr><th colspan="8">AUTHORITY</th></tr><tr><th>H.O. F.E. No.</th><th>DIV.</th><th>EST.</th><th>VOTE</th><th>PRI.</th><th>D.A. OR H.O. SUB.</th><th>OBJ.</th><th>AMOUNT</th></tr><tr><td>9999</td><td></td><td></td><td>831</td><td>00</td><td>00</td><td>000</td><td>316.81</td></tr><tr><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td></tr><tr><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td></tr><tr><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td></tr><tr><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td></tr><tr><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td></tr></table>				AUTHORITY								H.O. F.E. No.	DIV.	EST.	VOTE	PRI.	D.A. OR H.O. SUB.	OBJ.	AMOUNT	9999			831	00	00	000	316.81																																								
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9999			831	00	00	000	316.81																																																												
none	SHARES RETAINED	CERTIFIED BY Chas Smith	EXAMINED BY [Signature] FOR THE JURY OFFICER																																																																
			316.81 TOTAL																																																																

Distribution approved and authorized

AUDITED FOR PAYMENT

[Signature]

For Chief Treasury Officer

L.M. Firth
 (L.M. Firth) Major,
 Administrator of Estates.

ACCOUNTS OF MEN DISCHARGED

DEPT. NATIONAL DEFENCE
AUG 30 1941
N.S. 123-M-229
CANADA

Account of the Balance of Wages, the Sale of Clothes and Effects
and the other Credits of Men Discharged to the
Shore, D. D. or Run

114669
bal - 28 50

Name Archibald Nelson McLeod MENZIES. Rating Able Seaman

Official No. A-490 H.M.C.S. "PRINCE ROBERT" List 5-2/27

Who* DIED on the 14th August 1941

Net sum due on ledger on account of Wages.....
Proceeds of sale of Effects charged against Wages, brought from the other
side.....

\$ 20.56

CASH—

Proceeds of sale of Effects, paid for in Cash, brought
from the other side.....

Found amongst Effects.....

Debts collected \$.....

\$	cts.
163.	25
107.	15
.	75

Cash debited in the Accountant Officer's Cash Acct.....

271.15

If in debt in ledger, amount to be stated (in red ink).....

Rate of allotment (in words) EIGHTY SEVEN charged to 31 Aug '41.

FIVE

Name of ship from which transferred NADEN to PRINCE ROBERT
31 July 1940.

Total†.....

291.71

We hereby certify that we have every reason to believe that the above account contains a
true statement of all wages, Effects, and other Credits or Debts on the Ledger of "PRINCE ROBERT"
amounting to a net balance† CREDITOR

of TWO HUNDRED NINETY ONE - - - dollars SEVENTY ONE - - - cents.

Dated on board H.M.C.S. "PRINCE ROBERT" at Sea

23rd this 23rd day of August 1941.

Approved

[Signature]

[Signature] Accountant Officer
a/Paymaster Lieut Cdr. RCNR.

{ Initials of the Assistant
Accountant Officer

Commanding Officer.

Commander, RCN.

For Use at Headquarters. \$.....cts.....credited on Inspector's certificate

No.....to.....

Signature.....

Date.....19.....

*State whether discharged on shore, D.D. or Run. †State whether "debtor" or "creditor".
§Subscriptions for Charitable or other purposes should not be shown hereon, but on a Remittance List, and dealt with as laid down in the
King's Regulations.

C.N.S. 46

2M-10-39(2369)
H.Q. N.S. 815-9-45

No Will or any document of a testamentary nature
was found in effects.

ACCOUNT OF SALE OF THE EFFECTS

SOLD before the Mast, the TWENTY FIRST day of AUGUST 1941. 19

TO WHOM SOLD		PARTICULARS	Charged in Ledger	Paid for in Cash
No. Ship's Book in consecutive order	NAME (If any are not sold, state how they are to be disposed of)			
		BROUGHT FORWARD - - - - -		\$ 74.50
5-2/230	FUGLER, Thomas F.	1 Serge Jumper & Trousers		3.50
245	McTAVISH, Douglas	1 Cap Box		2.00
248	MANN, Lawrence P.	2 Shorts (Tropical)		6.00
249	PORTER, Henry A.	1 Jersey (Sport)		3.50
5A1/1	KERRY, Walter R.	1 Pr. Hose Suspenders 2 Pair Shoe Laces		3.00
24	IRONSIDE, Edmund D.	2 pkgs. Cigarette Tobacco		2.25
5B1/4	SMITH, Lawrence W.	1 Pr. Drawers, 1 Flannel 1 Jersey		8.00
5B2/1	SPRUSTON, Joseph.	1 Oilskin, 1 Flannel, 1 Jersey.		9.25
2	STIDDER, Edward F.	1 Suit Overalls.		10.00
5D1/6	HALFYARD, Charles F.	Barber Equipment & Toilet Gear less Electric Hair Clippers		11.00
7	GLEAVE, Noel H.H.	3 Waist Belts.		2.00
5D2/2	NOBLE, Andrew F.	1 Pr. Shoes (Gymnastic)		1.75
25	LINTAMAN, James G.	150 Cigarettes		2.75
22	MICHAUD, Adrien L.	1 Singlet (Tropical)		2.00
29	STEVENS, Norman G.	2 Dickies.		2.50
35	HILLER, Frank	1 Electric Hair Clippers		19.25
Total proceeds of sale carried to account on the other side				163.25

[Signature]
Lieutenant, RCNR.

{ Lieutenant or Officer who
attended at the sale of
the Effects.

The whole of the Effects which were left by the person named on the other side, are enumerated in the above Account and on the other side thereof.*

[Signature] Signature | *[Signature]* Signature
a/Commander, RCN. (Temp.) Rank | Chief Petty Officer, RCNVR. Rank

When the effects are those of an Officer, this statement is to be signed by two of his messmates; when they are those of a Petty Officer, Seaman or Boy, it is to be signed by the Executive Officer and by the Master at Arms or a Ship's Corporal.

ACCOUNT OF SALE OF THE EFFECTS

SOLD before the Mast, the TWENTY FIRST day of AUGUST 1941 19

TO WHOM SOLD		PARTICULARS	Charged in Ledger	Paid for in Cash
No. Ship's Book in consecutive order	NAME (If any are not sold, state how they are to be disposed of)			
3-5	KENNEDY, Henry M.	1 Cigarette Roller		\$ 2.00
5-1/10	MOIST, Frederick H.	1 Flannel		3.00
17	WILSON, James.	2 B.S. Scarves, 2 Soap bags 2 pairs stockings.		3.00
5-2/10	GRIFFITHS, Charles	Tools, 1 Serge Jumper & Trousers.		8.00
31	SKIBO, William.	1 attache case		2.00
41	MCGORRAN, Patrick.	1 pair rubbers		1.50
60	MURPHY, James A.	1 Jersey (Sport)		5.00
75	ROBB, Harry W.	1 knife, 1 lanyard, 1 type 5 assorted brushes.		3.00
83	HART, Walter C.	1 Overcoat.		17.00
144	PARTINGTON, Richard.	2 pairs boots.		4.00
170	BIRD, Lynden V.	1 Duck Jumper & Trousers		5.00
171	BERTRAND, Donald C.	3 Blue Jean Collars.		6.75
213	JONES, Edward C.	1 Serge Jumper & Trousers		5.50
217	ROWAT, James A.	2 tins Cigarette Tobacco 1 pkg. Cigarette papers 1 pkg. matches.		2.50
218	OLSEN, George B.	2 Blue Caps, 1 White Cap 1 cap cover, 2 Cap Ribbons		3.00
222	HARKNESS, William R.	1 Duck Jumper, & Trousers.		3.25
Total proceeds of sale carried to account on the other side			— — — — —	\$ 74.50

FORWARD

ACCOUNTS OF MEN DISCHARGED

Account of the Balance of Wages, the Sale of Clothes and Effects
and the other Credits of Men Discharged to the
Shore, D. D. or Run

Name.....Rating.....

Official No.....H.M.C.S.....List.....

Who*.....on the.....19.....

Net sum due on ledger on account of Wages.....

Proceeds of sale of Effects charged against Wages, brought from the other
side.....

CASH—

Proceeds of sale of Effects, paid for in Cash, brought
from the other side.....

Found amongst Effects.....

Debts collected \$.....

\$	cts.

Cash debited in the Accountant Officer's Cash Acct.....

If in debt in ledger, amount to be stated (in red ink).....

Rate of allotment (in words).....charged to.....

Name of ship from which transferred.....

Total†.....

\$	cts.

We hereby certify that we have every reason to believe that the above account contains a
true statement of all wages, Effects, and other Credits or Debts on the Ledger of.....

.....amounting to a net balance†.....

of.....dollars.....cents.

Dated on board H.M.C.S.....at.....

.....this.....day of.....19.....

Approved.....Accountant Officer

20

LIST OF EFFECTS OF Archibald N. MENZIES, "D.D."

No Will or any document of a testamentary nature was found in effects.

(1) NAVAL KIT

3 Serge Jumpers with cuffs
3 Prs. Serge Trousers
2 Duck Working Jumpers
2 Prs. Duck Trousers
1 Blue Overall Suit
3 Blue Jean Collars
2 Blue Cloth Caps
1 White Duck Cap
1 Cap Box
2 Cap Ribbons
2 B.S. Scarves
2 Prs. Stockings
2 Prs. Half Boots
1 Pr. Shoes (Gymnastic)
1 Blanket - - - - - RESERVED
3 Flannels
2 Jerseys
1 Knife
1 Lanyard
2 Soap Bags
1 Hair Brush
1 Tooth Brush
1 Clothes Brush
1 Blacking Brush
1 Polishing Boot Brush
1 Type
1 Ditty Box or Attache Case
1 Pr. Drawers
3 Waist Belts
1 Oilskin Coat
1 Overcoat
1 Pr. Rubbers
1 Singlet, tropical
2 Shorts, tropical
2 Dickies
1 Burberry - - - - - RESERVED
2 Jerseys, sports
1 cap cover

49

(2) BARBER EQUIPMENT & PERSONAL TOILET GEAR

1 Hair Clipper (Electric)
1 Hair Clipper (Hand)
1 Razor Strop
3 Shaving Brushes
1 Clean up Brush
2 Brushes for hair clippers
1 Straight Razor
3 Hones (stone) 1 large, 1 small, 1 medium.
1 Barber Scissors
4 Combs, hair.
1 Shaving Tablet (Palmolive)
1 Shaving Mug
1 Razor, safety (Gillette)
1 Soap Container
1 Table Mirror (small oval)
1 Box to contain the above
1 Pr. Hose Suspenders
2 Pr. Shoe Laces (black)

(Continued on Page 2)

MAIN FILE
CHARGED TO *alloy*
SINCE *28.8.41*
REC'D CENTRAL REGISTRY
AUG 30 1941
REFERRED TO

LIST OF EFFECTS OF Archibald N. MENZIES, "D.D."

(3) TOOLS

1 Hammer - claw
1 Spike (splicing)
1 Roller Cutter
1 Chisel
1 Wood Rasp (small)
1 Screwdriver (small)
1 Rule (36")
1 Plum bob (small)

48

(4) CLOTHING

1 Wind breaker (Heavy Cloth)	- -	RESERVED
1 Work Shirt (Blue)	- -	RESERVED
2 Undershirts (winter weight)	- -	RESERVED
4 Handkerchiefs	- -	RESERVED
1 Bathing Trunks	- -	RESERVED
2 Sweaters (knitted sleeveless)	- -	RESERVED
2 Helmets (knitted)	- -	RESERVED
2 Scarves (knitted)	- -	RESERVED
1 Pr. Mittens (knitted)	- -	RESERVED
3 Prs. Sox	- -	RESERVED
1 Pr. House Slippers	- -	RESERVED
1 Bath towel (small)	- -	RESERVED
1 Pr. Gloves, (leather work)	- -	RESERVED
1 Pr. Gloves, leather.	- -	RESERVED
1 Wash Cloth	- -	RESERVED
1 Pillow Cover, hand made	- -	RESERVED

(5) TOBACCO - Etc.

150 Cigarettes (Sweet Caporal)
2 Pkgs. 1/12 Cigarette Tobacco
2 Tins 1/8 Cigarette Tobacco
1 Pkg. Cigarette papers
1 Pkg. Safety Matches
1 Cigarette Roller

(6) SOUVENIRS

4 Cushion Covers (fancy art silk)-	- -	RESERVED
1 Cushion Cover (fancy cloth)	- -	RESERVED
2 Table Covers (Bridge, art silk)-	- -	RESERVED
2 Table Covers (Small, art silk)	- -	RESERVED
1 Purse, ladies	- -	RESERVED
1 Coin Bar	- -	RESERVED
1 Necklace (shell)	- -	RESERVED
1 Painted Sea Shell	- -	RESERVED
4 Miniature Life Belts	- -	RESERVED

(7) MISCELLANEOUS

2 Writing Pads	- -	RESERVED
1 Glass Drinking Mug	- -	RESERVED
1 tumbler	- -	RESERVED
3 Harmonicas	- -	RESERVED
1 Fountain Pen	- -	RESERVED
1 Wrist Watch & Metal Bracelet	- -	RESERVED
1 Bottle of Ink	- -	RESERVED
1 Cigarette Case (leather)	- -	RESERVED
2 knives, table	- -	RESERVED
2 Flash lights	- -	RESERVED
1 Tin Shoe Cleaher	- -	RESERVED
1 Padlock	- -	RESERVED
1 Pkg. Blueing	- -	RESERVED
1 Spool white thread	- -	RESERVED
1 Deck Playing Cards	- -	RESERVED
1 Pair Sun Glasses	- -	RESERVED
2 Bibles (small)	- -	RESERVED

Archibald N. Menzies
1940



Department of National Defence

Naval Service

Ottawa, Canada.

IN REPLY PLEASE QUOTE

NO. N.S. 123-M-229

12 September, 1941.

Sir:

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

<u>NAME</u>	<u>RANK/ RATING</u>	<u>NO.</u>	<u>PLACE & DATE OF DEATH</u>	<u>NEXT OF KIN</u>
MENZIES, Archibald Nelson McLeod	Able Seaman	A.490 R.C.N.R.	Died of Cerebral Concussion on the 14th of August, 1941, at Talara, Peru.	Wife: Mrs. Susanna Menzies, 329 Kingston St., VICTORIA, B.C.

WILL: No record.

Yours truly,

(J. O. Gossette)
NAVAL SECRETARY.

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



1 16283

14

DEPT.
NATIONAL DEFENCE

SEP -2 1941

REPORT OF DEATH

N.S.

123 M 229

CANADA

REPORT OF THE DEATH OF AN OFFICER, MAN OR BOY

H.M.C.S. "PRINCE ROBERT" AT

Name (Christian Names in full) Archibald Nelson McLeod Menzies

Rank or Rating Able Seaman

Official No. (if unknown, date of first entry) A.490

Date of death 14th August 1941

Place of death Talara, Peru

Cause of death Cerebral concussion ✓

(If due to accident or violence particulars to be stated briefly) See PR 045 of 19th August 1941
(Minutes of Board of Enquiry)

Nearest known relative or friend	{	Name and relationship	Susana Menzies, Wife
		Address	329 Kingston St. Victoria B.C.

Date on which the above was informed by Ship Not informed, see P.R.'s message
1350Z/14 August

Date on which death was registered with local officials

In the case of Imperial Service men, whether active Service, Pensioner or Re- serve.	{	Date on which the prescribed return was rendered to the Registrar General in London, Edinburgh or Dublin according to Nationality	

Place of burial (if known) At sea

Religion (if known) Presbyterian

If borne for discipline only, date on which man was D.S.Q.
or invalided

COMMANDER R.C.N.

Commanding Officer

23rd August 1941

The Naval Secretary,

Department of National Defence,

Ottawa, Canada

In all cases this Form is to be sent in addition to the report by Telegraph required by the Regulations.

C.N.S. 1121
200-12-38
N.S. 815-9-1121Noted.
JW.
10/9/41

MAIN FILE	
CHARGED TO	NPR
SINCE	1-8-41
REC'D CENTRAL REGISTRY	
SEP 3 1941	
REFERRED TO	



RECEIVED
FIVE NOV 1941

RECORD OF THE DEATH OF VIA OFFICER MAYA OB BOX

RECORD OF DEATH

S. 2063
10M-240 (3898)
N.S. 815-9-2063

No. 40

P 13621
ORIGINAL

STOP NOTICE

(Navy Allotments)

NATIONAL DEFENCE

AUG 29 1941

NS 123-M-229

LIST NUMBER	ALLOTOR'S SURNAME	CHRISTIAN NAME	RANK OR OFF. No.
5-2/27 "PRINCE ROBERT"	MENZIES 301004	Archibald	A-490 RCNR.

PARTICULARS OF ALLOTMENT BEING STOPPED

RATE PER MONTH	DATE (Inclusive to which Allotment is to be paid)	NAME OF ALLOTTEE	RELATIONSHIP TO ALLOTOR	ADDRESS
87.00 ✓	31 Aug '41	Mrs. S. Menzies.	WIFE	329 Kingston St., Victoria, B.C.

Entered in:—

Fair Ledger.....

Rough Ledger.....

SIGNATURE NOT AVAILABLE

Signature of Allotor

Cause of Stoppage

(When an Allotment in favour of an Allottee, on whose account M.A. is credited has to be stopped, information regarding the stoppage of M.A. should be also inserted here.)

"D.D."

THE FINANCIAL SUPERINTENDENT
DEPARTMENT OF NATIONAL DEFENCE
(Naval Service)
OTTAWA, CANADA

W. E. Adamson
a/Paymaster Lieut. Cdr. RCNR.
Accountant Officer

H.M.C.S. "PRINCE ROBERT"

Date forwarded.....

FOR USE AT HEADQUARTERS ONLY

1. Index Card Destroyed.....
2. Noted in Birth Record Ledger.....
3. M./A. Card Destroyed.....
4. Ledger Account Closed.....

Allotment Declaration	INITIALS	DATE
Ent'd. on Index Card	h.m.k.	30/8/41
Ent'd. on Allotment Ledgers		

P. 25-9-41
further

INSTRUCTIONS FOR ACCOUNTANT OFFICERS

When an Officer or Rating has two or more allotments in force they are not to be combined but treated as two or more allotments, and therefore Stop Notices should be dealt with accordingly.

A Stop Notice form should be filled out immediately an allotment has to be stopped, numbered consecutively and despatched at once to Headquarters.

A night-letter giving the Stop Notice number and other required particulars should be sent when it is impossible to forward this form in time to reach Headquarters by the 16th of the month.

This night-letter should be immediately confirmed by a Stop Notice form.

Canadian Allotments, if any, of R.N. ranks or ratings returning to R. N. should be stopped and debited prior to discharge.

Allotments continue to be paid by Headquarters until a Stop Notice is received. A Stop Notice should, therefore, be sent whenever an allotment has to be discontinued for reasons such as discharge, etc.

Tag.

ORIGINAL

P041867

No. 75/123-71229 H.Q. File No. 9

DECLARATION OF ALLOTMENT

List and Number in Ledger	ALLOTOR	Rank or Rating	Official No.	Daily Rate of Pay
"NADEN" 14NR/401 R.C.N.R. 52/284	Surname MENZIES Christian Names Archibald N.M.	Able Seaman R.C.N.R.	A 490	\$1.85 \$1.50 M.A.

Section A ALLOTMENT NOW DECLARED				
FULL NAME OF ALLOTTEE	Relationship	ADDRESS	Rate per Month to be charged on ledger	Month to commence. Payable on last working day
Surname MENZIES Christian Names Mrs. Susanna	WIFE	329 Kingston Street VICTORIA, B.C.	\$87.00 \$77.00 Increased	July 1940

Section B DISPOSAL OF EXISTING ALLOTMENTS (See Note 1 below)			
The following allotments are in force:—			
Rate	NAME OF ALLOTTEE	ADDRESS	These allotments are to be disposed of as indicated below. (See Note 2):—
\$70.00	Mrs. S. Menzies	Victoria, B.C.	Increased as in Section A
\$5.00	Can. Bank of Commerce	Victoria, B.C.	To be continued.

NOTE 1:—If there be no existing Allotment, the word "NIL" should be written across Section B.
NOTE 2:—Write "Increased or reduced as Section A"; "To be stopped (charged to.....)"; "To be continued," etc.

Allottor's Signature authorizing charges A. N. M. Menzies
Rank or Rating Able Seaman, R.C.N.R.

ENTERED IN FAIR LEDGER	ENTERED IN ROUGH LEDGER

The allotment now declared has been duly entered in the Fair and Rough Ledgers with effect from the appropriate date. The reduction or transfer has been duly approved by the Commanding Officer and the reasons for the alteration are:—

THE NAVAL SECRETARY,
Department of National Defence,
(Naval Service)
Ottawa, Ont.

C. R. P. A.	PAYMASTER
A/Paymaster Lieutenant, R.C.N.R.	
For Station Accountant Officer	
H.M.C.S. "NADEN"	Forwarded
July 1940	

DECLARATION OF ALLOTMENT

NOT MORE THAN ONE MONTHLY ALLOTMENT SHOULD BE DEALT WITH ON THIS SHEET
FOR USE AT HEADQUARTERS ONLY

	INITIALS	DATE
Declaration received at Headquarters.....		
Declaration examined.....		
Approved.....		
Index card made.....		
Allotment ledger sheet made.....		
Allotment ledger sheet checked.....		
Type plate made.....		

MAIN FILE
CHARGED TO
SINCE
REC'D. CENTRAL REGISTRY
JUL 13 1940
REFERRED TO <i>Gray</i>

Can. 2041
10M-10-39 (2378)
N.S. 815-9-2041

Tag.
P037587

No. 229
JUN 11 1940
123-M-229
CANADA

ORIGINAL

Number.....

APPLICATION FOR PAYMENT OF MARRIAGE ALLOWANCE

List and Number in Ledger	NAME	Rank or Rating	Official No.	Daily Rate of Pay
"NADEN" 14NR/401 R.C.N.R.	Surname..... MENZIES Christian Names..... Archibald Nelson M.	A.B. RCNR	A 490	\$1.85

NAME OF WIFE OR GUARDIAN	ADDRESS
Surname..... MENZIES Christian Names..... Mrs. Susanna	329 Kingston Street VICTORIA, B.C.

CHILD OR CHILDREN			
Name	Sex	Date of Birth	Attains majority
(1)..... David Ross Menzies	Male	3rd June 1940	3rd June 1956
(2).....			
(3)..... David Ross	Male	3rd June 1940	3rd June 1956
(4).....			

I do hereby solemnly declare that the above particulars are correct.

Signed in the presence of: P. J. Hollins A. H. M. Menzies
C.P.O. Writer Signature
Rank or Rating..... Able Seaman, R.C.N.R.

Ent'd in Birth Record Ledger 3/7/40
Ent'd in Allotment Ledger 3/7/40

Marriage Allowance in force per diem..... \$1.25
Marriage Allowance claimed per diem..... \$1.50

Claim has been supported with the necessary documentary evidence and the above amount has been approved for payment.

Birth Certificate examined and found to be correct

This amount per day has been credited from..... 3rd June
at List NADEN 14NR No. 401 Ledger ending..... 30th June

Allotment of \$..... 77.00 in force from the month of..... July 1940 in accordance with regulations. Increased from \$70.00 July

LEDGERS:
Fair
Rough
THE NAVAL SECRETARY,
Department of National Defence,
Ottawa.

A/Paymaster Lieutenant, R.C.N.R.
For Station Accountant Officer.

H. M. C. S. "NADEN"

Forwarded..... 26 June 1940

Personal Records Division	
1. Notes & Reports	
2. Index Card	
3. Non-Ex. Card	
4. Service Card	
5. Record Card	
6. Pension Card	1940
7.	
8.	1940
DATE 13/7/40 Jms.	

NOTE

- (1) All applications for Marriage Allowance must be supported by Certificate of Marriage, Birth Certificates in the case of children, or other unimpeachable evidences as to marriage, birth or guardianship.
- (2) The Allotment should be equivalent to the nearest dollar of 15 days' pay of rank or rating, and the Marriage Allowance based on a thirty day month.

FOR USE AT HEADQUARTERS ONLY	INITIALS	DATE
Application received.....		
Entered in Birth Record Ledger.....		
Entered on M/A Card.....		
Entered in Allotment Ledger.....		

Tag.

Can. S. 2041
2M-8
N.S. 815

ORIGINAL

Number 473
123/162229

APPLICATION FOR PAYMENT OF MARRIAGE ALLOWANCE

List and Number in Ledger	NAME	Rank or Rating	Official No.	Daily Rate of Pay
"NADEN"			P011687	
NR/401	Surname... MENZIES	Prob A.B.	A490	\$1.85 \$1.00 MA.
R.C.N.R.	Christian Names... Archibald Nelson McLeod	RCNR		\$1.25 NR

NAME OF WIFE OR GUARDIAN	ADDRESS
Surname... MENZIES	2616 Cambridge Street,
Christian Names... Mrs Susanna, (Wife)	VANCOUVER, B.C.

CHILD OR CHILDREN			
Name	Sex	Date of Birth	Attains majority
(1) Robert Allan Menzies	Male	17th October 1935	1951
(2) James William Menzies	Male	31st May, 1937	1953
(3)			
(4)			

I do hereby solemnly declare that the above particulars are correct.

Signed in the presence of:

[Signature]
C.P.O.

Signature

Rank or Rating... ABLE SEAMAN... R.C.N.R.

Marriage Allowance in force per diem...

Marriage and Birth Certificates

Marriage Allowance claimed per diem... \$1.00 \$1.25 examined and found to be correct.

Claim has been supported with the necessary documentary evidence and the above amount has been approved for payment.

COMMANDER

Commanding Officer.

This amount per day has been credited from

18th February

19.40

at List

No. 401

Ledger ending

March

1940.

Allotment of \$ 70.00 in force from the month of March

19.40 in accordance with regulations.

LEDGERS:
Fair
Rough

A/Paymaster Commander

Accountant Officer.

THE NAVAL SECRETARY,

Department of National Defence,

Ottawa.

H. M. C. S. "NADEN"

Forwarded March, 1940.

NOTE

- (1) All applications for Marriage Allowance must be supported by Certificate of Marriage, Birth Certificates in the case of children, or other unimpeachable evidences as to marriage, birth or guardianship.
- (2) The Allotment should be equivalent to the nearest dollar of 15 days' pay of rank or rating, and the Marriage Allowance based on a thirty day month.

FOR USE AT HEADQUARTERS ONLY	INITIALS	DATE
Application received.....		
Entered in Birth Record Ledger.....		
Entered on M/A Card.....		
Entered in Allotment Ledger.....		

[Handwritten signature]

[Handwritten signature]

A 490.

OFFICIAL NUMBER

FILE NUMBER

123-M-229

OFFICIAL NUMBER.....A 490

NAME _____

MENZIES.

ED,
(Surname)

Archibald Nelson McLeod

(Given Names)

DATE OF BIRTH

20 March. 1910

PLACE OF BIRTH.....Stirling, Scotland

OCCUPATION Seaman, C.P.R. B.C. Coast Service, Victoria, B.C.

RELIGION.....Presbyterian

EDUCATION

RESIDENCE AT TIME OF ENLISTMENT: Street and No.

2616 Cambridge St.

...Town

Victoria.

Province, etc. B. C.

B.C.

[illegible]

NEXT OF KIN RELATIONSHIP (in pencil)..

NAME (in pencil)

ADDRESS (in pencil): Street and No.

Town.

Province, etc.

MEDALS. CLASPS. HURT CERTIFICATES. PRIZE MONEY

EXAMINATIONS. CERTIFICATES. ETC.

[illegible]

BADGES, G.C. OR G.S.

BRIEF PARTICULARS OF WARRANT OR C.M. PUNISHMENTS AND C.P. CHARGES

[illegible]

Date (in figures)

DAYS FORFEITED

[illegible]

SECOND CLASS FOR CONDUCT

From

To

H.Q. 35-30M-4-42 (4260)
N.S. 815-7-35

W.S.G.
APPLICATION
1207
RECEIVED

