



NELSO

MORANDUM FOR

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Mrs. Susanna Menzies,

.....

Victoria, B.C.

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

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 30 194 1

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.

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



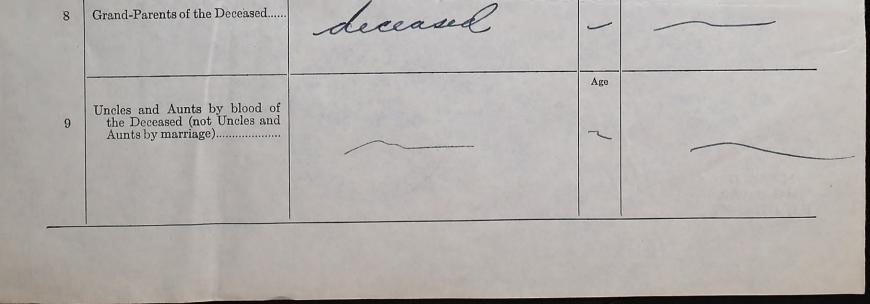
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M.F.W. 77 3M-5-40 (4995) H.Q. 1772-39-972 STATEMENT of the Names, Ages and Addresses, or Dates of Death, of all the relatives that the decised ever had in each of the degrees specified below.

ship			INFORMANT'S S	TATEMEN	NT
Legrees of Relationship	RELAT required to be		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 De	eceased	Susanna Menzies		329- Kingston, fr Victoria. B.
2	Children of the dates of their	Deceased and Births	Robert Allan Menziel James William Menzies David Ross Menzies	4	329- Fingeton
3	Father of the De	eceased	deceased-1919		
4	Mother of the D	Deceased	Jeabella Dean	55	2509-25 th and Oakland Cal
5	Brothers of the Deceased	Full Blood	James Mengies William Mengies	39 33	California 14. A. a
		Half Blood	~		
6	Sisters of the Deceased	Full Blood	Agness Harper Helen Larsen Edith Bowyer	28 28 21	California 11 u.s.a
		Half Blood	May Dean		
	Names of brothers of the full or the hal ceased, who are dead of each.	or sisters (whether lf blood) of the De- d, and date of death	Names and ages of their children (if any)		Address of their children
7	nonle		Raymond Thenziel Francis Thenziel	15. 10. 711	California.
			Henry Bovyer	Rup	

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
and the second second			



FULL PARTICULARS AS TO IDENTITY

rehibald. N. Ther. 10 What is the full name of the deceased? nzied harch-20,-1910 11 Give the month and year of his birth. collan 12 Where and when were his parents married? 193 9 Was he ever married? If so, state exact place and date of 13 marriage. CO 14 Did he leave a (later) Will? If so, it should be forwarded. NO. Is there any other estate which will necessitate application being made for Probate or Letters of Administration? 15 PARTICULARS OF DOMICILE terling - Scotland Where was deceased born? 16 Membias 17 In what Province, Country or State did he reside, and in which last? in. 18 How long in each? What was the nature of his employment? 19 man ted at 329 Did he own the house or homestead in which he lived? If so, 20 where? allo Did he ever state verbally, or in writing, where he intended to make his permanent home? 21 No

22 State your postal address in full.

PARTICULARS AS TO CLAIMS

329- Fe

23	Have the funeral expenses been paid? If so, by whom?	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. month

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)

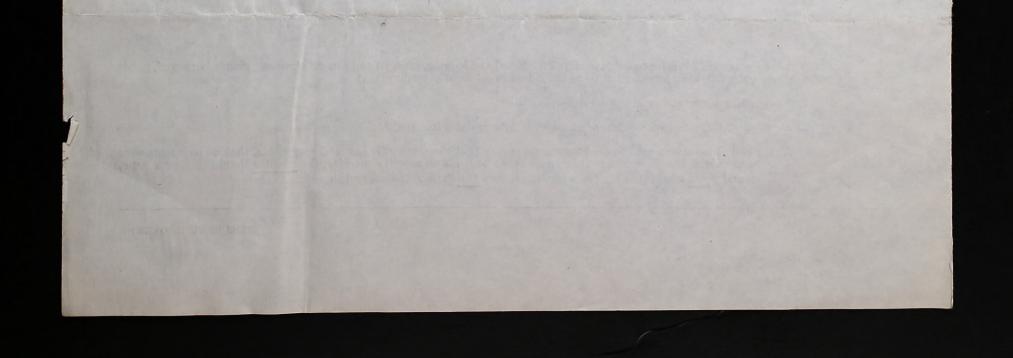
n.B.C

or

DECLARATION

I hereby declare that the foregoing particulars are correct, and a true and complete statement "Father," etc. 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 . { Name of Informant } is the *.... Aof the Deceased *See above 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 Nictore 35 this 10 day of October 1941 H. Corace of thomas Signature of Clergyman, Priest or Magistrate Qualification cton -01, 2 Address...

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 $\overline{5M}$ -1-39 N.S. 815-12-5

10417

1411

ESTATION FORM

FOR MEN OF THE ROYAL CANADIAN NAVAL RESERVE

NO

SURNAME MENZIES OFFICIAL No. A490

CHRISTIAN NAMES Archibald Nelson McLeod

neo St

20

7. 8.

DATE

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and the rest and the second	RELIGION			
2616 Cambridge Stre	et, Vancouver, B.C.		Presbyterian	
DATE OF BIRTH	PLACE OF BIRTH	NAME AND ADDRESS OF NEXT O		
March 20th 1910	Town Stirling County Province Scotland	2616 Ca	Sussana ambridge Street ver, B.C.	

PERSONAL DESCRIPTION ON ENROLMENT

HEIGHT CHEST MEASUREMENT			HAIR	EYES	COM- PLEXION	WOUNDS, SCARS, MARKS		
Feet5 Inches9		a server a	Brown	Brown	Med.	Tatoo right forearm		
DATE OF ENRO	DATE OF ENROLMENT RATING		ING FOR	TRADE OR CALLING AND IN WHOSE EMPLO				
18th February 1940		Probationary Able Seaman R.C.N.R. (Temp)		Seaman, C.P.R. B.C. Coast Service Victoria, B.C.				
(B)	1	ARATION T	OBEN	IADE B	Y APPLI	CANT		

(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.

Personnel Records (b) T eatling of five years from this date (c) That it is my intention to follow the sea in an Engine room capacity Por a period from this date. Note: Candidates for enrolment as Stehen are to cross out clauses (b) and (c) aboverd.

Candidates for enrolment as Stoker are to cross out clauses (a) and (c) cabove - Sub. Card Candidates for enrolment as E.R.A. are to cross out clauses (a), (b) and (c) table $C_{r,t}$ (b) aboyen Candidates for enrolment as Engineman are to cross out clauses (a) and

(4) That I have never been rejected from any of His Majesty's Forces on account of unfitness.

*Cross out clause not applicable

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

(R) XX X X X X X X X X X X X X X X X X X	******	XXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXX
period shown.		•
Transferencescience		,

Served in	Rank	From	То
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	In the second second		
xxx	XXX	xxx	XXX

(6) That the particulars contained above are correct and true according to the best of my knowledge and belief.

(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 fixe 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.

(8) I am willing to be vaccinated or re-vaccinated and inoculated as considered necessary by the appropriate authorities.

Dated this....15th February 1940day of*

a.g. Menzies (Signature of

Applicant)

 (\mathbf{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.

ature of Applicant	a.n.	Menza		
	Cen	m		1
Witness			and	

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.

 (\mathbf{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.



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

(R.C.N. OR RESERVE FORCES)

10410

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

Nore-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 Me Lead MENZIES ‡candidate for entry as He has signed the Certificate given below in my presence. Dated at Cancouver B. E 19 40 all ney sug neg Examining Medical Officer *Delete one

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

© Age { Years Months	S Weight without Clothes	 Height with Bare Feet 	General Development (d)	Chest Girth (e)	S Vision by- (i) Snellen's Types (ii) Colour Vision	Vaccinated or revac- cinated for Small Pox (Date)	 E Lungs, Heart, etc. 	 Abdomen, Hernia, etc. 	(7) Limbs and Joints	() Skin	Bars and Hearing	 Testes, Varicocele, etc. 	Mouth, Teeth (No. deficient and No. elective, if any), Nose, Tonsils, etc.	 Anus, Hæmorrhoids, etc.
2/12	lbs. J J J	ft. ins.	to the second	inches (a) maximum 38/4 (b) minimum 35/2 (c) mean 36/2	right eye 20 25 left eye 20 21 colour vision C.V.N.	chielder	Normal	Normel	c 10/21 - 1 = 21	Clear	Wax- 60th	Normel	2 Completer	Normal.

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

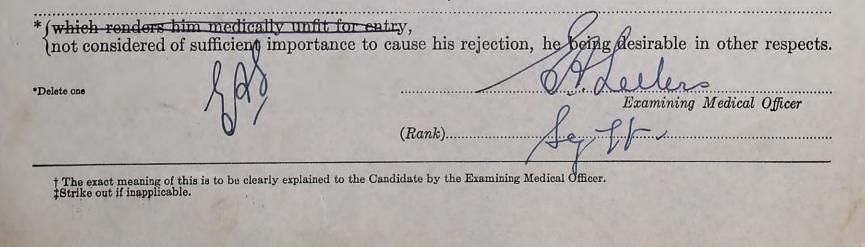
CERTIFICATE TO BE SIGNED BY CANDIDATE

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.

an Menzie Signature of Candidate

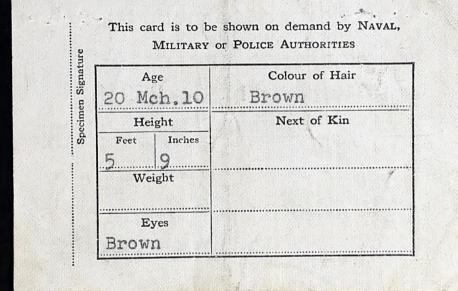
When a Candidate is subject to a defect or disability, the following Certificate is to be filled up

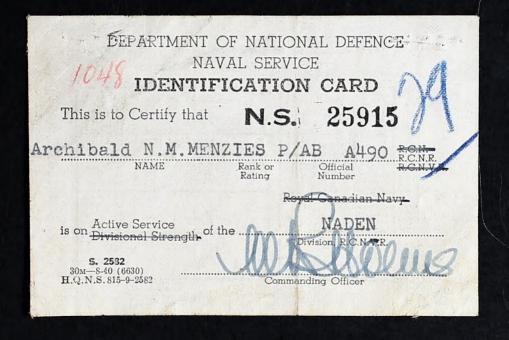
This Candidate is the subject of ______ Land



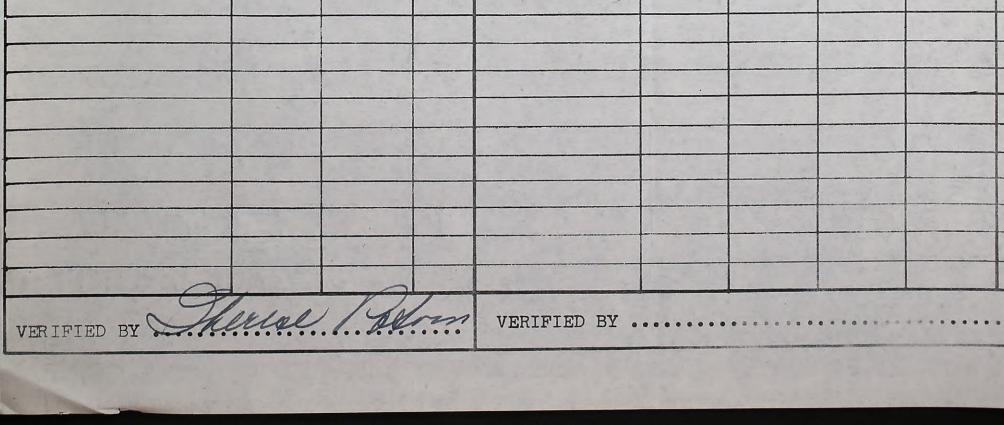
ME	R.C.N.RD-/41 DALS AND MEMORIALS DECEASED PERSONNEL RE MEDALS	GISTRATION NO. DATE OF DESPATCH
	PERSON ENTITLED TO Mrs. S. Menzies - Mother	
	ADDRESS:	DATE DESP 249
(2)	MEMORIAL CROSS WIDOW	REGN. NO - (2)
	ADDRESS:	
(3)	MEMORIAL CROSS MOTHER	(3)
	ADDRESS :	

DECEASED 14 August 1941 DEPARTMENT OF VETERANS AFFA		ARDS	NAVY	D.D. war service records
	10月前 25月11日	1 4 4 K 4	1 .' <i>a</i>	FILE NO.
MENZIES Archibald	Nelson. McLeod	A-490	A.B.	
SURNAME (IN BLOCK LETTERS) C	HRISTIAN NAMES	REG. No.	RANK ON DISCHARGE	C.A.S.F. UNIT
WAR SERVICE				
BADGE (CLASS) No.		ESPATCHED:		1
ADDRESS:		3		
ADDRESS:				
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ADDRESS: CAMPAIGN MEDALS 1939-45 Star		STRATION NUM		DESPATCHED
ADDRESS: CAMPAIGN MEDALS		STRATION NUM	ABER AN DATE D	DESPATCHED
ADDRESS: CAMPAIGN MEDALS 1939-45 Star G.V.S.M. & Clasp		STRATION NUM		DESPATCHED
ADDRESS: CAMPAIGN MEDALS 1939-45 Star G.V.S.M. & Clasp		STRATION NUM		DESPATCHED
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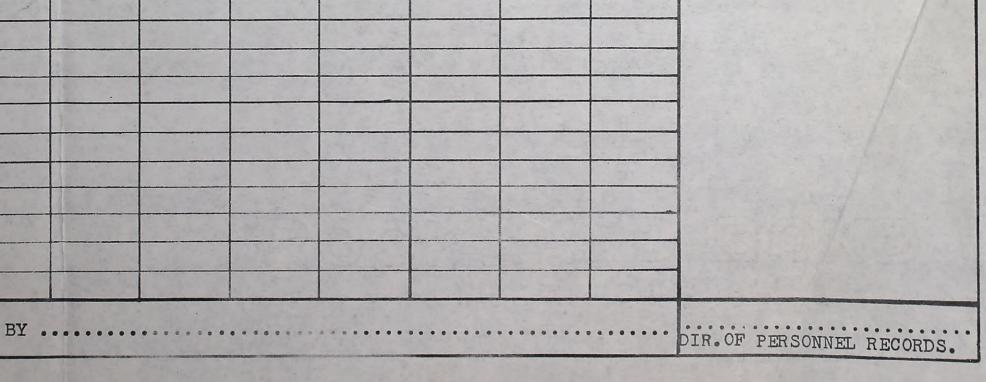


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	FROM	TO	1939-45	ATLANTIC	DEFENCE	CLASP C.V.S.M.	1915 MEDAL	MEDALS	12	FOR AWARDS OF
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S.—239a. (I • Page 1.	Revised—A	April, 19	937).	C				, King's R	and the second se	, 1936). I E E		ORT DIVISION a	nd		
NAME ^A rc. NAME OF SHIP.	Date of Entry.	Nels No. of G.C. Badges held.	Date of Commencement of "very good" conduct. (Art. 527, cl. 4 and 5). If conduct is not "very good" insert "Nil."	Class for Conduct. If in 2nd class.	S Class for Leave. If in 2nd class, insert date from which entitled to restoration to 1st class. (Art. 573, cl.2)	Character on Ser	RATING since last a rvice Certifi onduct She 605, cl. 5 a To.	ssessment cate or et	Efficiency (Art. 607).	For Art. 413 (See Notes Whether recommended	ratings only. 5, 6 and 7.) Whether recom- mended with a view to accelerated advancement. (Must also be fit for immediate advancement but not necessarily	FICIAL NUMBE 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).	R Un red ink- Whether recom- mended for (a) Boys' Training Service. (b) Other Instructional Duties	R.M.G.	Commanding Officer's Signature.
1 0.	187 <i>eb.40</i> 3,July'sc	100000000000000000000000000000000000000	187eb 40	1.	 	194 18 7.el. 1 Jan '41	10 30 July 14 August	YG. VG	Sat Sat	No (119)	fully qualified).	Pr. Rabert D.D.	(See Note 9).		Whiteus
							N.C	TEC							

- NOIES.
- 1. 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.
- 2. 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.
- 3. 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.
- 4. 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).
- 5. 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) :
 - (1) "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.
 - (3) "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.
- 6. 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."
- 7. 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 \$.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.
- 8. 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."

192512. Wt. 14030. 136,000. 6/38. W. & S. Ltd. (56) S 239

CONDUCT SHEET.

NAME Ar	chibald Nelson Mc ^L eod MENZIES	RATING all	PORT DIVISI OFFICIAL N	ON and UMBER A+490
Date of Offence.	OFFENCE.	PUNISHMENT AWARDED.	By whom awarded, Ship and date.	REMARKS.
17.Sup '40	was sesent from his places faily without permission, namely welch on duck	I days # 16	Capt "punce Polunt"	
	pamission, namely witch on duck		18 Sep'40	
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Page 2.

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C.N.S. 264 5M-9-39 (2093) N.S. 815-9-264

	ZIES A.N.		
Sub-Rating and Sen	iority A.B. 18	12/40 Non-Sub	
0.N. A 490.		W.B.	No
	9/2/40		
Engagement: Period	HOST.	Expires	
Character V.G.	0/3/10 Efficiency	Sal. D	Pate 16 ap 1/40
Badges mil .	Class for Conduct	Class for	Leave 1
Date due for:	Next Badge 18/	2/43	
	Progressive Pay		
	L.S. & G.C. Recomm	nended	
Advancement.	WISHES TO PASS?	RECOMMENDED?	DATE QUALIFIED?
Educ. Test Pt. 1			
Higher Educ. Test. Professional for			
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 Ourse this rating was Satis factory " in both Seamanship and Gumery,

J. J.S. 3 King 40. ROAWR H.M.C.S. " NADEN. Officer of Division Date 16 Apl'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

(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.

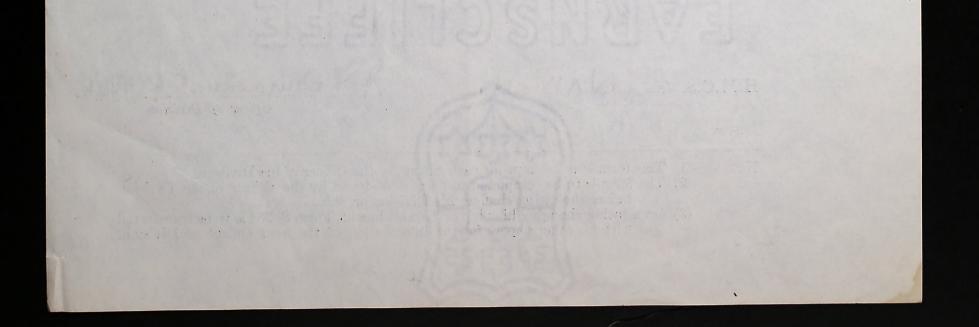
Au Un

J-1MC. J. Amice Robert Asnied ship 312 July 1940 An intelligent rating This Made a Good Shiparizeto' Mate Gnergy & ability good

Mociay Le. R.CNR

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N. S. 815 VAME.		••••••			RATING	A	B.			
REG. KIT	DA	TES	\$/3/40	123/41	28/7/41		1		1	
3	Serge Jumper with cuffs	2		12	3					
3	Prs. Serge Trousers			2	3		dry/s			
2	Drill Uniform Jumpers						9101			
3	Duck Working Jumpers (Seamen, etc.)		1.000		2					1 14
2	" " (Stokers, etc.)					ger ;				
3	Prs. Duck Trousers (Seamen, etc.)				2			1		
2	" " (Stokers, etc.)				-					
2	Prs. Drill Trousers				-					
1	Blue Overall Suit (Seamen, etc.)				1					
2	" " (Stokers, etc.)				-	••••••				
2 3	Blue Jean Collars			3	3	••••••	••••••			
3 2	" Cloth Caps			1	2	······				
			0	1		·/·····				
1	White Duck Cap		1			•••••	•••••			
1	Cap Box	-	2	2	2	•••••	•••••			
2	" Ribbons	• • • • • • • • • • • • • • • •	2	2		•••••				
2	B.S. Scarves		2/		2	P				
2	Prs. Socks or Stockings			2/2	2	Long				
2	" Half Boots		2							
1	" Shoes, gymnastic			··/······			••••••			
1	Bed						••••••			
1	Blanket		.2			·····				
2	Bed Covers	2		2	-					
3	Flannels		3	3	3					
1 -	Jersey	······			2					
*1	Knife									
2	" Lanyards			2						
1/	Soap Bag	<u>)</u>								
1	Horn Comb	1		.1	-					
1	Hair Brush			1						
1	Tooth "			1						
1	Clothes Brush			1						
1	Blacking "			1	1					
1	Hard Boot Brush				-					
1	Polishing Boot Brush			1	1					
1	Housewife				-					
1	Type				1					
1					1					
24	Clothes Stops				-					
24 2	Prs. Drawers		121	2	1					
-								1		

1-	Waist BeltJ.			3		
1	Overcoat	1	. [
1	Oilskin Coat	1				
3	Singlets Tropical		3			
3	Shorts Tropical		2	2		
1	Vol. I Seamanship Manual (O.S. and Boys only)			-		
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REG. KIT	DATES			-	28/9/41					
	OPTIONAL ARTICLES									
1	Pr. Leggings				-					
1	Sou'wester				-					
†1	Canvas Jacket (Stoker ratings only)				-					
1	Pr. Black Leather Shoes				-					
1	Razor or 1 pr. Scissors				-					
1	Pr. Gloves or Mitts				/			•		
6	Pocket Handkerchiefs				-					
1	Shaving Brush				-					
2	Cholera Belts				-					
1	Pr. Black Leather Gaiters				-					
1	Comforter				-					
1	Cap Cover									
1	Scarf, plain white				-					
1	Pair Brown Leather Gloves									
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Date.....

NOTE—This form is to be kept by the Divisional Officer. On a man leaving a Ship or Establishment the form is to be brought up to date and transferred with his other papers.

RECORD OF TEST FIRINGS

To be filled in for Test Firings only carried out in Gunnery Schools and H. M. Ships at sea with any gun 3-inch and above.

Date	Ship		Gun	Mounting	Rounds		of	ualified or ailed	Assessment	Initials of Gunnery Officer
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RECORD OF VISION TESTS

To be filled in by Medical Officer after each Test.

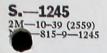
NOTE:-Date of issue of astigmatic lens is to be noted in this space.

Ship	Gunnery Rating	Date	Hospital or Ship	Vision	Initial Test for	Re- qualifying Test for	Passed or Failed	Remarks	Initials of Medical Officer
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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 # 490
(Surname in BLOCK LETTERS)	Omerar ivo
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.

Date	CUID	Ra	tings	Stati	ion		Initials of	
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On entry as a boy.....

On re-entry for C.S. or for Non-C.S. after attaining 28 years.....

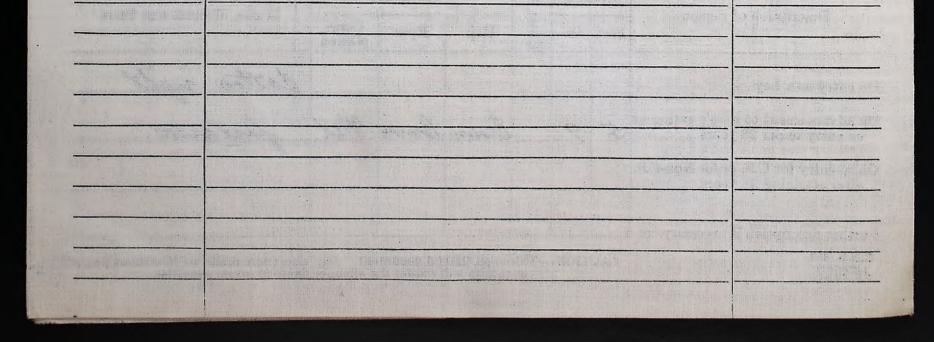
Further description if necessary......

C.N.S. 459 1,500-10-31 N.S. 815-9-459 CAUTION.—This is an Official document. Any alteration made to it without proper ' authority will render the offender liable to severe penalties.

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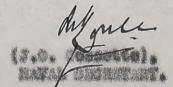
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Six copies to be rendered to Naval Service Headquarters

REPORT OF THE DEATH OF AN OFFICER, MAN OR BOY

	due to the second se
Name	(Christian names in full)
Rank of Rating.	Official No
Place of Birth	Date of Birth
Occupation in Civ	vil Life Religion Religion
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)
Date of Death	Place of Death
Cause of Death	(If due to accident, violence, or enemy action, particulars to be stated briefly)
state of appl	alterial and a solution, for them, action, particulars to be stated brieny)
	Name Relationship
Nearest known relative or	Address
friend.	
Date on which th	ne above was informed by Ship
	eath was registered with local Officials
	aperial Service men, whether Active Service, Pensioner or Reserve, date on which the
	turn was rendered to the Registrar General in London, Edinburgh or Dublin, accord-
	nality
Place of Burial	(if known) (if known)
Location, Numbe	r, etc., of grave(if known)
Undertaker emplo	oyed(if any)

The NAVAL SECRETARY, Department of National Defence, Ottawa, Canada.



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Commanding Officer,

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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.

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EXPLANATION OF ITEMS A, B & C

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- - (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.

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

Name of Rank or Peccased Member Archibald. h. Mcl. MENZIES Rating A-B. O. No. A 490

1. Dependents' Allowance and Assigned Pay in force at date of death:

₽.A. ALLOT.	1.50
A.P. 3	57.00
D.A.	-
A.P.	-

2. Pension awarded or being awarded to:

as above WIFE -

3. War Service Gratuity Application(s) received from:

mo Susanna MENZIES

310. Huntington Place, Victoria. B.C.

Mr- Susanna MENZIES (wife) 329, Kingston Street, Nectoria 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: To be paid to: Mr. Sucanna. MENZIES (wife)

to:

In the FULL proportion of: /

In the proportion of: 1

() 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:

- and -

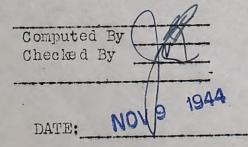
Group "B" (11)

Group "C" of the above mentioned Directive.

Date Jeb. 15/1945 for D.N.P.A. (G) Mr.9

		120	07
		FILE No. M.S. A	490.
	R SERVICE GRATUITY"	1.14.14	
the sugar and COLE	UTATEON OF SERVICE	1. 102 694 	11) 195 W.
MENZIES ARC SURNAME CHRISTIA IN FU	IN NAMES OFFIC	TAL RAMA OR RAL	
CAUSE OF DISCHARGE:	sleat.	n de service en	
Date of Active Service Date of Discharge Total No. of Days # Less non qualifying service	<u>TOTAL SERVICE</u> <u>197.cb.1940.1</u> <u>14 aug.1941.1</u> <u>544 1</u> <u>NIL.1</u>	3 3 3 3 3 3	27 M Inch oapl Iman Iman Iman Iman Iman Iman Iman Iman
% Total No. of Days	OVERSEAS SERVICE		
# Less non qualifying service	nlh.	Total Days	380
Record of Service in oth Branch of Service Date of Active Service Date of Discharge	er Forces (per Naval Re		
			,

& % Overleaf



for (H.B. Money) Payr. Cmdr. R.C.N.R.

Payr. Cmdr, R.C.N.R. Officer-in-Charge Naval Personnel Records

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NON QUALIFYING SERVICE

overseas

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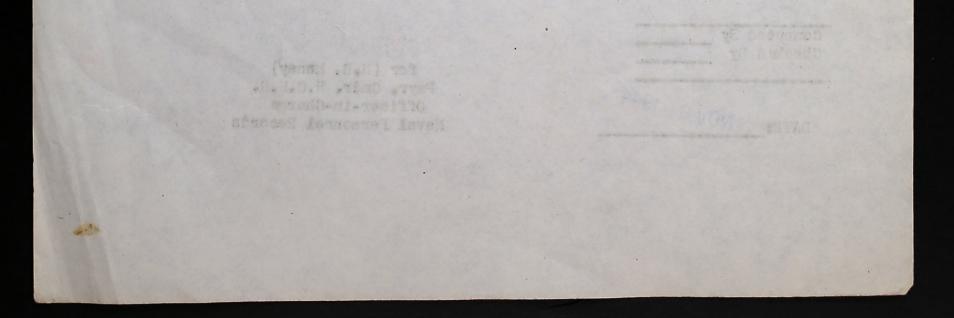
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(#) Date	Reason		No. of	Days	
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Where Serving	From	To.	No. of Da		
Prinse Robert.	31 July 40!	14 aug 41.	30	Poit	1703

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DEPARTMENT OF NATIONAL DEFENCE ESTATES BRANCH

Ottawa, Canada Date lec. 10 Th 1941.

Robert, James, David,

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

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

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

ESTATES BRANCH

December 4th, 1941.

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

MENZIES, Archibald N.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.

adaption Steam and the Refer

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 Datates. HAWY

and and

DISTRIBUTION OF SERVICE ESTATES North Action Control C

	MEMICIES	ILdosA	mla M.H.		A-490		61
Name				No.			
	A.B. Surname	H.H.C.SCINCIST:	an Names		14/1	8/112	
	·				:		
	Rank		Jnit		291.71	Date	of Death
		4	<u>AMOUNT</u> L. P. C.	÷	25.10		
	December 4th.	1917.	Other Credits		316.82	<i>F</i>	
			Total				
Date_			Shares Retaine	ed	316.01		
			NET TOTAL	• •			

SHAR	E RELATIONSHIP	NAME AND ADDRESS	AMOUNT
	*	189 Mingston Street, Victoria, B.C.	0316.81
		(1/3 as next of kin entitled 2/3 for ben-fit of three minors)	
		AUTHORITY	
4.		H.O. DIV. EST. VOTE PRI DA.OR OBJ. AMO	UNT
4		1000	681
		CYCS TED BY EXAMINED BY	
1010	SHARES RETAINED	Who sith 13/	68/

Distribution approved and authorized AUDITED FOR PAYMENT Image: Constraint of the states of the

110000111	S OF MEN DISCHARGED N.S. 123-M-	
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 Archibald Nelso	on McLeod MENZIES. Rating Able Seaman	
Official No. A-490	.M.C.S"PRINCE ROBERT" List 5-2/27	
Who* DIED		
	arged against Wages, brought from the other	
CASH— Proceeds of sale of Effects, from the other side	paid for in Cash, brought \$ cts. 163.25	
Found amongst Effects		
Debts collected §		
Cash debited in the Accountant	Officer's Cash Acct. 271. 15	
	be stated (in red ink)	
Rate of allotment (in words)	LIGHTY SEVEN charged to 31 Aug'41.	
	erredNADEN to PRINCE ROBERT	
	Total [†]	
We hereby certify that we	have every reason to believe that the above account contains a	
true statement of all wages, Ef	fects, and other Credits or Debts on the Ledger of "PRINCEROBE	
amou	nting to a net balance [†] CREDITOR	
of.TWOHUNDREDNINETY	ONE cents.	
Dated on board H.M.C.S.	"PRINCE ROBERT" at Sea	
23rd thi	isday ofAugust19.41.	
Approved	a Paymaster Lleup Cdr. RCNR.	
Itta	Initials of the Assistant Accountant Officer	

ACCOUNT OF SALE OF THE EFFECTS

SC

TO WHOM SOLD					
No. Ship's Book in consecutive order	N A M E (If any are not sold, state how they are to be disposed of)	PARTICULARS	Charged in Ledger	Paid for in Cash	
	BROU	GHT 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)			
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	
5 <u>B1/4</u>	SMITH, Lawrence W.	1 Pr. Drawers, 1 Flannel 1 Jersey		8.00	
582/1	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 Cl	ippers.	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	
	HILLER, Frank	1 Electric Hair Clippers		19.25	
		Total proceeds of sale carried to account on the other side		163.25	

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 Chief Petty Officer, RCNVR. Rent-

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

sd

	TO WHOM SOLD		11	
No. Ship's Book in consecutive order	N A M E (If any are not sold, state how they are to be disposed of)	PARTICULARS	Charged in Ledger	Paid for in Cash
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.	·····	
5-2/10	GRIFFITHS, Charles	Tools, 1 Serge Jumper & Trousers.		8.00
	SKIBO, William.	1 attache case		2.00
41	McGORRAN, Patrick.	1 pair rubbers		1.50
60	MURPHY, James A.	1 Jersey (Sport)		5.00
	ROBB, Harry W.	1 knife,1 lanyard,1 type 5 assorted brushes.		
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
	A	Total proceeds of sale carrieting Rowing the other side		\$ 74.50

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	
Official No	
Who*	on the
	ger on account of Wages
	Effects charged against Wages, brought from the other
CASH— Proceeds of sale from the ot	of Effects, paid for in Cash, brought her side
	ngst Effects
	Accountant Officer's Cash Acctamount to be stated (in red ink)
Rate of allotment (in	n words)charged to
	Total†
true statement of al	ify that we have every reason to believe that the above account contains a l wages, Effects, and other Credits or Debts on the Ledger of amounting to a net balance [†]
Dated on board	dollars
Approved	Accountant Officer

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 (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)

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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)

(4)CLOTHING

1	Wind breaker (Heavy Cloth)	-	-	RESERVED
1	Work Shirt (Blue)	-	-	RESERVED
2	Undershirts (winter weight)	0100	-	RESERVED
4	Handkerchiefs	-	-	RESERVED
1	Bathing Trunks		-	RESERVED
2	Sweaters (knitted sleeveless)	-		RESERVED
	Helmets (knitted)	-	-	RESERVED
	Scarves (knitted)		-	RESERVED
1	Pr. Mittens (knitted)	-	-	RESERVED
3	Prs. Sox	-	-	RESERVED
1	Pr. House Slippers	-	100	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

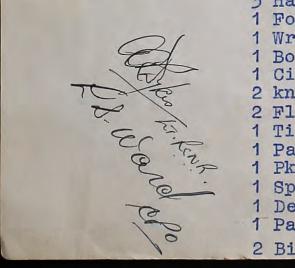
 - 1 Pkg. Cigarette papers
 - 1 Pkg. Safety Matches
 - 1 Cigarette Roller

(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
		RESERVED
		RESERVED
		RESERVED
4 Miniature Life Belts -	-	RESERVED

(7)MISCELLANEOUS

2 Writing Pads



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

- RESERVED RESERVED RESERVED RESERVED -RESERVED -RESERVED -RESERVED -RESERVED -RESERVED RESERVED -RESERVED -
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Department of National Defence

IN REPLY PLEASE QUOTE No.N.S. 123-M-229

Naval Service

Ottawa, Canada.

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 ! FLACE &

> DATE OF DEATH

NAME

RANK/ RATING

MENZIES, Archibald Nelson McLeod

R.C.N.R. Cerebral

NO.

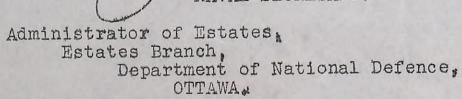
Able Seaman A.490 Died of Wife: Mrs. Susanna Menzies, 329 Kingston St., Concussion VICTORIA, B.C. on the 14th

NEXT OF KIN

of August, 1941, at Talara, Peru.

WILL: No record.

Yours truly (J. 0, _Gossette) NAVAL SECRETARY.



H.Q. 1010 A N.S. 815-7-1010







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Moted .. JW: 10/9/41

REPORT OF THE DEATH OF AN OFFICER, MAN OR BOY

Name (Christian Names in full) Archibald Nelson	McLeod Menzies
Rank or RatingAble. Seaman	
Official No. (if unknown, date of first entry)A4.90	
Date of death 14th August 1941	
Place of death Talara, Peru	
Cause of death Cererbral concussion	
(If due to accident or violence particulars to be stated briefly)	See PR 045 of 19th August 1941 (Minutes of Board of Enquiry)
relative	Susana Menzies, Wife 329 Kingston St. Bictoria B.C.
Date on which the above was informed by Ship Date on which death was registered with local officials	Not informed, see P.R.'s message 1350Z/14 August
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	
M.	Hart
Contra	ANDER R.C.N. Commanding Office

Department of National Defence,

Ottawa, Canada ·

The Naval Secretary,

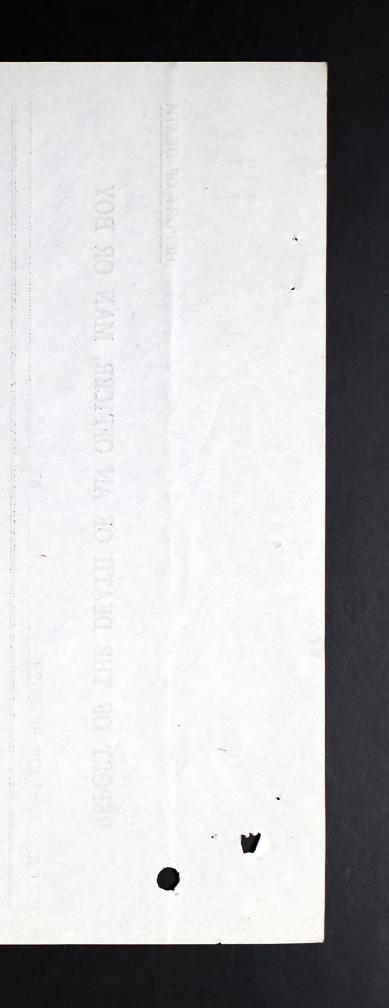
In all cases this Form is to be sent in addition to the report by Telegraph required by the Regulations.

C.N.S. 1121 200—12-38 N.S. 815-9-1121

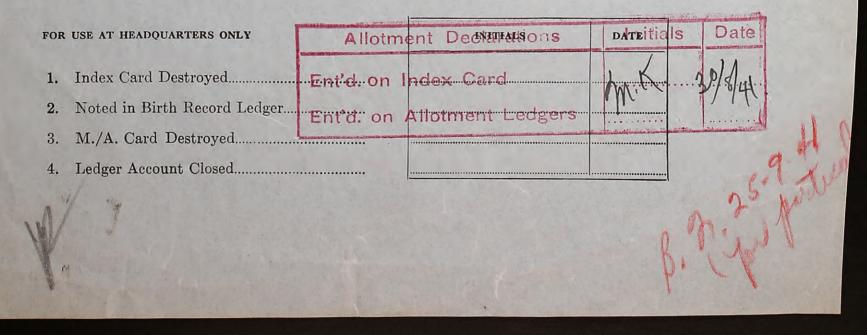
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		S	TOP N (Navy Allot		NATION/ 11 RUG 12 1 N.S. 12 3	1941 1941	12-229
LIST NUMBER	AI	LOTTOR'S SU	RNAME	CHRISTIAN NA	CANA	RANK	OR OFF. No.
5-2/27 "PRINCE ROBERT"	MENZIES 20100H			Archibald		A-49 RCNI	
	Р	ARTICUL.	ARS OF ALLOTM	IENT BEING STOPP	ED		
RATE PER MONTH	DATE (Inclusive to which) Allotment is to be paid	NAME	OF ALLOTTEE	RELATIONSHIP TO ALLOTTOR		ADDRESS	
87.00	31 Aug'41	Mrs. S	Menzies.	WIFE	329 Kii Vie	ngston ctoria,	
Entered in:— Fair Ledger Rough Ledger	A			SIGNATU	RE NOT AV Sig	VA ILABI gnature of	******************
(When an Allotme on whose accou be stopped, info	of Stoppage ent in favour of a nt M.A. is credi rmation regardin hould be also inse	ted has to g the stop-		"D.D."			
DEPARTMENT OF	L SUPERINTENDI NATIONAL DEFE I Service)			a/Paymaster I	PRINCE RC		tant Officer
Ottaw	a, Canada			Date forwarde		lip's	0
			- 1				



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.

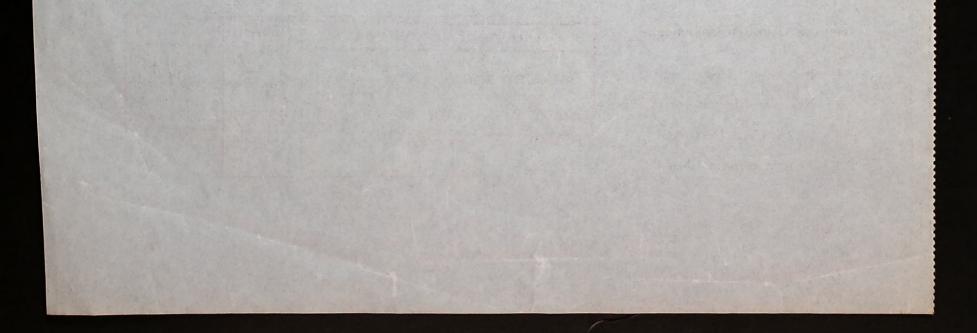
A Stop Notice form should be filled out immediately an allotment has to be stopped, numbered consecutively and despatched at once to Headquarters.

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.



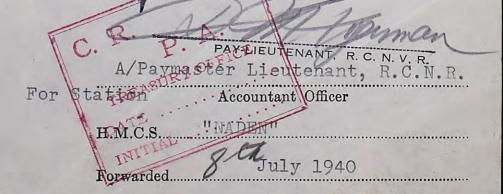
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-	P041867 DECLA	RATION		No. 75 M.S.	CANH.Q. File	No
List and Number in Ledger	A	LLOTTOR	Δ	Rank or Rating	Official No.	Daily Rate of Pay
'NADEN''			20000			
$\frac{14NR}{401}$ R.C.N.R. $5^{2}/284$	Surname <u>MENZT</u> Christian }Ar.c.h Names }			Able	A 490 ·	\$1.85 \$1.50 M.A.
Section A		LOTMENT	W DECLAR	ED		<u> </u>
FULL NAM	IE OF ALLOTTEE	Relationship	A A P	DRESS	Rate per Month to be charged on ledger	Month to commence. Payable on last working day
SurnameMENZ Christian	LIES Susanna	WIFE	329 A	ston Stree	et \$7.00.3 \$77.00.6% Increase	July 1940
Section B	DIS	POSAL OF EX	ISTING AF	LOTMENTS force:—	(Se	ee Note 1 below)
Rate	NAME OF ALLOTTEE	Ded	ADDRESS	These a	illotments are to be dis below. (See Not	sposed of as indicated e 2):
	rs. S. Menzies n.Bank of Comme	erce Victo	Ent'd, on lad		reased as be continue	in Section A
Nore 1:—If there be na Nore 2:—Write "Incre	o existing Allotment, the word "NII ased or reduced as Section A"; "To Allottor's Sign	" should be written acro be stopped (charged to nature authorizin		ann m	Menz Rank or Rating	R.
ENTERED IN FAI	r LEDGER			ED IN ROUGH LEI		

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:—

1

THE NAVAL SECRETARY,

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



S. 63

15M-10-39 (2286) N.S. 815-9-63

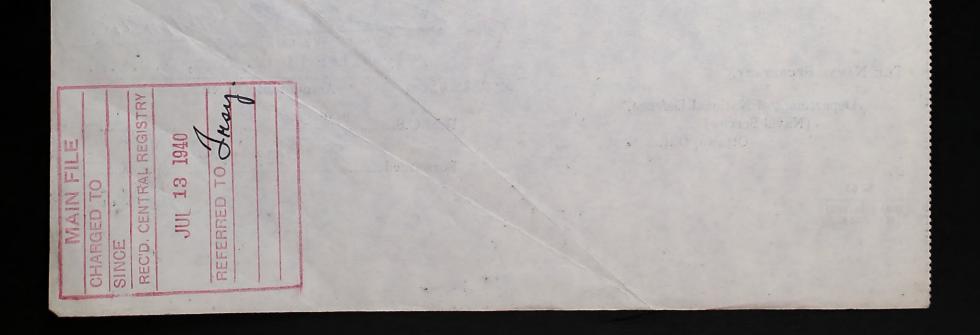
NOT MORE THAN ONE MONTHLY ALLOTMENT SHOULD BE DEALT WITH ON THIS SHEET

10

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		

The elletter the colorest has been dely entered in the Fair and House Ledgers with effect for the spart date



Can 2041		Tag P037	587 /	14.1	NAL DEFENCE	240
10M-10-39 (2378) N.S. 815-9-2041	PLICATION	originai FOR PAYMENT OI	No, 2	in vedenska vist	2 3 - m - Numbe	
List and Number in Ledger		NAME		Rank or Rating	Official No.	Daily Rate of Pay
"NADEN" 4NR/401	SurnameMEN	ZIES		A.B. RCNR	A 490	\$1.85
.C.N.R.	Christian Names	Archibald Nels	on M.		ng ang katalan Mga mang katalan	n in spainipal Rubi tenstrik
NA	ME OF WIFE O	R GUARDIAN		AD	DRESS	
SurnameME	NZIES		. 329 Ki VICTOR	ngston IA,B.C.	Street	
Christian Names	Mrs. Susa					
		CHILD OR CHILDR		D: /1		,
Na	me	Sex	Date of		Attains r	×.
(1) David (2)	V Roce	Male M/A: AFFLICATIO				
(4)		Ent'd. in Birth Reco	ord Ledge	r St	13/7/4	0
Signed in the pr	esence of:	that the above particulars a Ent'd in Allotmen			Laf 7/1	140
	Writer	100000	ture	(M, 9 Able Sea	man, R.C	.N.R.
Marriage Allows	nce in force per di	em \$1.25 (Lak	2		Perso	e P cords
Marriage Allows Claim has for payment.	nce claimed per di s been supported w tificate exta	em\$150 ith the necessary documenta amined and found t COM	1	Habe	e amount has 2. Ind: 8. Non-34	been approved

6. Fension -1 1940 7.

at List NADEN 14NR No. 401 Ledger ending

Jan

Fai THE NAVAL SECRETARY, Department of National Defence, Ottawa.

LEDGER

R.C.N.R. Accountant Officer. .A/Paymaster Li ant. For Station

.9

H. M. C. S. "NADEN"

Forwarded 26 Mane 1940.

3

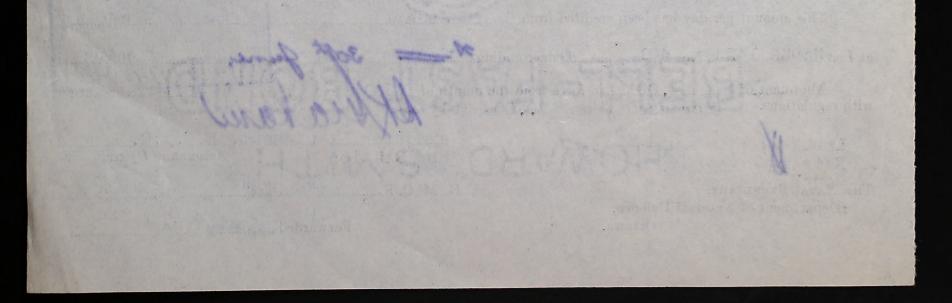
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40 Jm

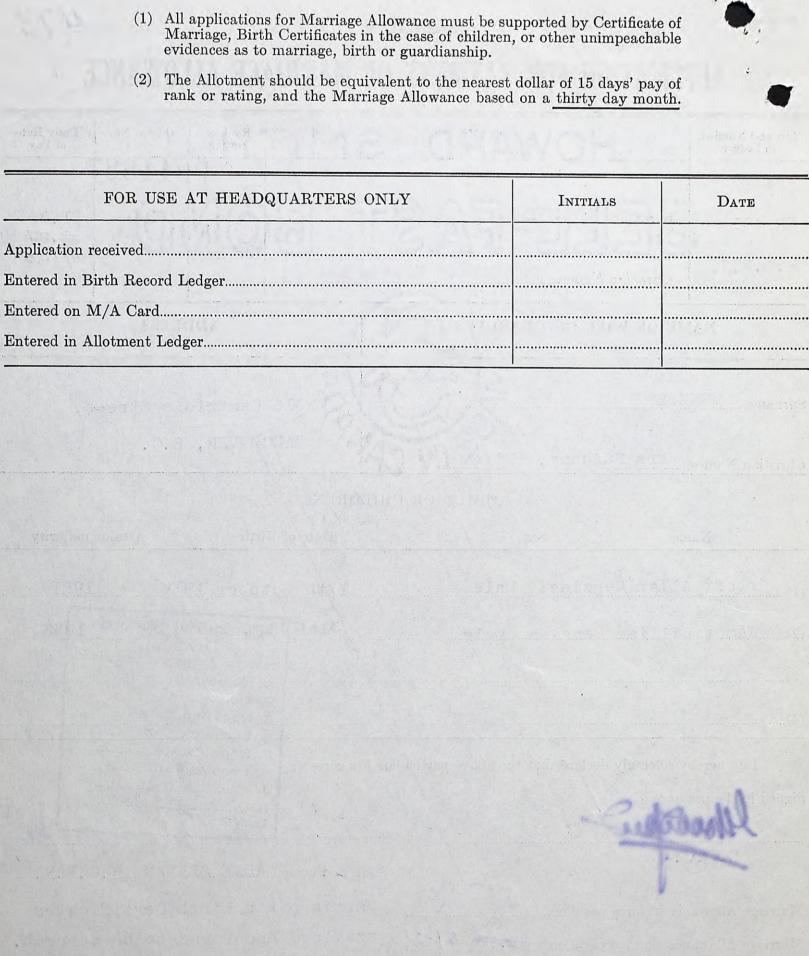
- (1) All applications for Marriage Allowance must be supported by Certificate of Marriage, Birth Certificates in the case of children, or other unimpeachable evidences as to marriage, birth or guardianship.
- (2) The Allotment should be equivalent to the nearest dollar of 15 days' pay of rank or rating,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



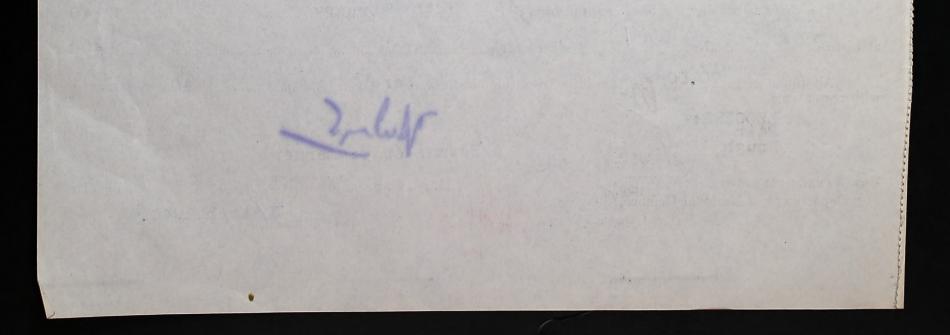
		Ta	g.		in the state	
Can. S. 2041				A LAN	- 13 10.5 m	
N.S. 812		ORIGI	NAL	4.42	3. Mumber	473
· API	PLICATION I	FOR PAYMEN	T OF MAR	RIAGE AL	LOWANC	E
List and Number in Ledger		NAME	1. A. A. A.	Rank or Rating	Official No.	Daily Rate of Pay
"NADEN"				P	01168	
NR/401	SurnameMEN2	ZIES		Prob A.B.	A490	\$1.85 \$1.00 MA.
R.C.N.R.	Christian Names	s Archibald N	lelson McLeo	ed RCNR		#1.25 NR
NA	ME OF WIFE OI	R GUARDIAN		AD:	DRESS	U
Na		CHILD OF Sex	1. M. Dr	of Birth	Attains	majority
Na	me	Sex	M. Barg	of Birth	Attains	majority
(1)Robert	Wayne Allan Menzie	s Male	17th	October 1	9.3.5	1951 Y
(2)Jame.s	William.Menz	ies Male	3lst	Mayer 1931	el Records	³ 1953 √
(3)		12 S	S. J.		Records	
(4)			ž /		ard b. Card al Card	
I do hereb	y solemnly declare	that the above parti	ulars are correct.	5. Roneo 5 6. Pension	Strip	
Signed in the pre	esence of	1 2 2 2	Signature.	7. 8. DATE	28-3-4	and Merrie
C. P.	0.1	N		gABLE.SE	AMAN R.C	
	nce in force per die			and Birt		
		m \$1.00 \$1.2		1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1		
Claim has for payment.	been supported wi	th the necessary docu	Intentary evidence	Ament		
		Mo.		NDER C	Commanding O	ficer.

This amount per day has been credited from [2.]. 18th February 19.40 at List. 19.40 Allotment of \$ 70.00 have 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"



NOTE

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A	490 MENZIES,					le nume n McLe	er od			123-	M-229		ATE OF	BIRTH	H	20 March	OFFICIAL	NUMBER	A 490	
PLACE OF BIR	(Surnar rn Stirling Presbyterian	, Scotland		••••••					.OCCUPA1	NON	Seaman,								С.	
RESIDENCE AT	TIME OF ENLISTM	ENT: Street and N		261	6. Camb	ridge	St.		••••••	Town	Vict	toria.			••••••	Province etc	B.(1.		
	ENGAGEMENTS								DESCRIPT				••••••		1	r rovince, etc		IS SERVICE		
Date (in figures) Day Month Yea		Period			Height	Hair		Eyes		plexion		Marks or				Served in		Rank or Rating	Dat From	es To
18 2 40	Hostilities	only		·····	519"	Brown	B	rown	Mediu	.m.		too ri arm.	.ght							
NEXT OF KIN	RELATIONSHIP (in pe	encil)		the second					. NAMI	E (in per	ncil)					uguu,				
ADDRESS (in pe	ncil): Street and No	2 2 7	- AV	N/QU	M. A	1. M	1		•	Town		00	Mr.	Uni		Provinc	e, etc		2	
Date (in figures) Day Month Year	CLASPS, HURT CERTIFICA	ATES, PRIZE MONE	Y		Date (in Day Mo	figures) nth Year		3	Part	ticulars	Examinatio	ONS, CERT	Dat	, ETC. e (in fig Month			C-10-3-3 PA	ARTICULARS	126-14	2)-
Date (in figures) Day Month Year	BADGES, G.C. OR G.S. 1st, 2nd or 3rd G.C. or G.S.	Granted Deprived Restored		Ship or E	STABLISHME		Wt. No.	Date	PARTICULA (in figures) Month Yea	_	VARRANT OR C	.M. PUNI Brief Par				RGES		Punish	MENT	
				*																
TT 14				in figures)			0.00		ORFEITED											
DATE DATE SEC From	OND CLASS FOR CONDUCT	T To	Day M	Ionth Year	r Prison	Det'n	C		C. Power	W. Tri		har.							W.S.	
H.Q. 35-30M N.S. 815-7-3			()[······			[•••••• •••••	[]							RECEI	VED

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A 490	OFFICIAL NUMBER	NAME	(Surr	ame)	MENZIES, Archiba (Given Na	ld Nelson	n McLec	d		•••••••	OFFICIAL N	JMBEI	۶	A 4	190		1
Shiver Establishment	Rating	Day		Year	Remarks					h Year	Non-Sub. Rating	Qualified Day Month Year			Re-Qualified Day Month Y		
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Naden Prince Robert	n n	13 31	57	50 40													
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