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AULENBACK GEORGE VALLELLIE N2966

1.-Declaration and Certificate for Men newly entered and Men who have been out of the Service since the expiration of their previous C. S. Engagement I,....., do solemnly declare that to the best of my knowledge and belief the answers to the questions overleaf are true, and I do hereby agree to serve honestly and faithfully in the Navalfrom†.... Service of Canada*. 193 provided my Man's Signature in full Witness to Signature..... Signature of a Commissioned Officer of the Naval Service Date..... This is to certify that we have examined the person named on the other side hereof as to his fitness for the Naval Service of Canada, and we find as follows :- He is of perfectly sound and healthy constitution, free from all physical malformation, active and intelligent; and we consider him in all respects fit for His Majesty's Service. II.-Certificate and Declaration for Boys This is to certify that we have examined the boy named on the other side hereof as to his fitness for the Naval Service of Canada, and we find as follows:—He is a well grown, stout, intelligent lad, of perfectly sound and healthy constitution, and free from all physical malformation, and we consider him in all respects fit for His Majesty's Service. The consent of his parents or guardian has been obtained in writing, and they are willing and desirous that the to whatever period may be necessary till he attains that age. COMMENDER, RCNommanding Officer Lieutenant - Cdr. RCN. G I declare that to the best of my knowledge or belief the answers to the questions on the other side of this form are true and that I am not indentured as an apprentice. SEVEN. and bear true allegiance to His Majesty. allellie helenback. Boy's Signature in full Boy Seaman. etty officer. Witness to Signature. in Chief 18th day of May., 193.7. Attested before me this..... RCN. C u Signature of a Commissioned Lieutenant, Officer of the Naval Service III.—Re-engagement for Continuous Service To be executed by men who have not been out of the Service since the expiration of their first engagement The particulars indicated on the other side are also required when this I,....., now serving as a..... engaged to serve in the Naval Service of Canada for a period of §...... years, do hereby Man's Signature in full Witness,.... Insert "for the term of (number in words) years," or "to complete (number) years for pension," or "until I attain the age of years."
Insert the date from which the engagement actually commences.
The document conveying the consent to be attached to this paper. (N.B.—Not required in the case of youths over 17 years of age.)
To be written in words.
Insert as follows:--''Of (number) years," or "to complete time for pension," or "until I attain the age of years," as the case may be.
Insert the date of commencement of the re-engagement, which must either be coincident with, or (when the re-engagement is ante-dated) earlier than the date of execution. S. 55

| CHRIS | TIAN AND SUR | | | NEXT OF KIN | P | RESENT RATING |
|---|---|--|---|---|---------------------------|--|
| eorge Vallel | lie AULE | ENBACK. | | Grandmother Name Margaret F Address Mersey Poi | | Seaman. |
| DATE OF | 3IRTH* | | E | Queens Co. PLACE OF BIRTH† N. | S. NAME, J | RANK AND STATION OF |
| th September | | Co | ovince | lersey Point, Queens. NOVA SCOTIA. he Date of this Docum | Cree Comm HMCS | ander W.B. ry, RCN., anding Off: "STADACONA |
| Height Chest | Hair | Eyes | Complexion | Wounds, Scars or Marks | Religious Denomination | TRADE OR OCCUPATION |
| 51 33" | Steel Surger | Blue | Hich | Nel. | R. C. | Fisherman |
| Commencing date Engagement Re-engagemen | r 194 | th Sept | ember, 1937. | Period of Engage- ment or Re- engagement | Seven | Years. |
| Date of <i>actually</i> vo unteering to en gage or re-engag | n-}]] | th May, | ¥XXXXXXXX | Date of entering present ship | 15th May | , 1937. |
| erson has not prev. ere. If an Engagement is ant forwarded in to office, with The following of | -dated for any peri the Engagement, o Declarat uestions are | iod, the man's se on Form S.—1243 tion of Entr to be put | ry or Re-Entry by the Comman | - | | e for Continuous |
| ervice, whose answ | | | | | | |
| ervice, whose answ . Are the particula place of birth c | rs given abc prrect? | ove of your | name and dat | e and } Yes. | | |
| ervice, whose answ . Are the particula place of birth c . Are you a British | subject?† | | | Yes. | | |
| ervice, whose answ Are the particula place of birth c Are you a British Nationality of pa Have you ever Royal Naval Militia, Volunt or in His Maje in the R.C. Me Do you now be Military), Terr His Majesty's . Reserve Force, Have you ever by vice, or dischar reserve for reight | subject?† rents—Fath served in th Reserve, Ar eers (Naval sty's Indian bunted Police long to the itorial Force Army, or to or to the R. een rejected ged from it ion or dische | er. my, Army or Military or Colonia e?‡ Militia, V e or any R any establi C. Mounte as unfit fo on that ac | British Royal Fleet Res y Reserve, Ma y), Territorial I Il Military Forc Volunteers (Nav cegiment or Con ished Naval or ed Police?‡ or His Majesty' ccount? If so, ate No. | Yes. Mother Serve, Force, Force, Zal or rps in Army S ser- state | British No. No. | • |

CERTIFICATE

§ Strike out "Parent" or "Guardian" as the case may be.

"Strike out "he" or he" according to sex aWa her

† The assertion of the boy himself should not be taken as sufficient warrant for this state-ment.

| I certify | that I am personal | lly acquainted wi | ith this Boy's § | Fuardian, and am [†] |
|-----------------|---------------------|--------------------|---------------------|-------------------------------|
| are** he has co | onsented to the Boy | 's entry as above, | , and I believe the | particulars stated |
| ein to be true. | | | | |

floo & Selvey_ Clergyman of the Parish.

or.....Resident Householder

......Occupation West Calearance Address April 14 193.7.

Particulars to be stated, if possible, in the case of a Boy whose Father is dead

Date of Father's death.....

Place of death.....

Particulars to be stated, if possible, in the case of a Boy whose Parents are both dead

| Date of Father's death | | | ······································ | |
|--------------------------|--------|------|--|-----------|
| Place of death | | | | |
| Date of Mother's death | | | | |
| Place of Mother's death. | | | | |
| | Signed | | | Guardian. |

CONSENT PAPER

(This paper is required in all cases where the Candidate is under the age of 18 years, in addition to the Certificate of Birth or Declaration.)

M 8038

N.62

I hereby certify that my son, * George & Aulenbach has my full "Strike out "son" or "ward" as the case may be. consent (being himself willing) to enter the Naval Service of Canada for a period of seven years' continuous and general service, from the age of 18, in addition to whatever period may be necessary until he attains that age, agreeably to the King's Regulations. He has not been in a Reformatory, nor has he been sentenced to imprisonment. I declare that he has never had fits. More The date of the boy's birth ist Self 1919 † No alteration or erasure is to be made in the date of birth given. His Religious persuasion is ballacic Witness my hand at Lewerford m.S. b day of Afril 193.7 H Guardian's Signature in full fleres St Clair Bulenbach Parent's Address Jeiner for m.S. ust be signed by ather, if alive, or actory explanation In the case of a Guard-ian see other side. Ullen Mulentack, do consent to enter the I, the above named..... Naval Service of Canada. enlon § Boy's signature in full ... George aulenbach Signed by the said [Here write] boy's name] And [Here write Parent's or] Jerez Julenbac Witnesst ture of Boy, and Parent or Guardian In the presence of iouport 1 lova Ded/ca Address. OVER]

C.N.S. 2418 1M-4-36 H.Q. 815-9-2418

C.N.S. 2417 DEPARTMENT OF NATIONAL DEFENCE 3M-2-36 N.S. 815-9-2417 (Naval Service) APPLICATION FOR ENTRY IN THE ROYAL CANADIAN NAVY 427 The Naval Secretary, Department of National Defence, OTTAWA. 62 SIR: I hereby make formal application for entry in the Boyal Canadian Navy, under a seven years' continuous se engagement as a *Engine Roym Intificu*. (Insert rating chosen) I certify that the following particulars are in my own handwriting and are true in e spect 1. Name (to be given in full in Block Letters) GEOHGE. VAL 2. Date of Birth (Birth Certificate or sworn declaration by parent or guardian must be attached). Voin lova 3. Place of Birth. Town..... Province. no 4. Permanent Place of Residence. No. Street Joins ener ma Province ... Town..... 5. Are you a British Subject?. 6. How long have you resided in Can la ?.... 7. What is your Mother Tongue?..... 8. What other language do you speak?.... one hen 9. Are you of the White Race?..... 10. Are you Single, Married or a Wadower? Tave completes 11. How far advanced educationally are you? (Certificates of School Authorities must be 12. What practical experience have you had? (Details and certificates from employers, trade credentials, etc., must be attached to substantiate employment reported.) None. 13. Do you belong to any Naval, Military, Air or Police Force?.... 14. If so, give details..... 15. Have you ever served in such forces? 16. If so, give dates and details 17. Have you ever been discharged from His Majesty's Forces as medically unfit?..... 18. Have you ever offered to serve in His Majesty's Forces and been rejected ?.... 10. Why? 19. Have you ever been convicted of a criminal offence? (Enclose two character references, one of which must answer to Question 19) 4. Height 21. Have you ever had fits?, (0..... 22. Do you suffer from any deformity?..... 23. Have you suffered the loss of any fingers, toes, etc? ... 24. Do you suffer from any disease?..... 25. Do you wear glasses?..... 26. Are you subject to any disability which might cause your rejection? 27. Give details 28. Are you willing to be vaccinated and inoculated as considered necessary by the appropriate authorit Francis T. Funch M. L. Signature of Witness Glonge Signature of Applicant Wenbo CERTIFICATE TO BE SIGNED BY THE PARENT OR GUARDIAN OF CANDIDATES UNDER 21 YEARS OLD I agree to refund to the Department of National Defence the expenses incurred by that Department for transportation to a Naval Base of the above applicant, should he, on arrival at such Base, fail to enrol for seven years' continuous Naval service for reasons which in the opinion of the Department are within his own control. Signed and Sealed at <u>Sealed at</u>, this <u>J.6</u> day of <u>Felorulary</u>, 193.7 in the presence of <u>amount</u>, <u>Ferrer maxime Trage Perce Outlenback</u>. Ing. ramo Signature of Witness Signature of Parent or Guardian CERTIFICATE TO BE SIGNED BY CANDIDATES OVER 21 YEARS OF AGE I agree to refund to the Department of National Defence the expenses incurred by that Department for my transportation to a Naval Base, should I, on arrival at such Base, fail to enrol for seven years' continuous Naval service for reasons which in the opinion of the Department are within my own control. Signed and Sealed at .. this.day of in the cont to presence of Amanus / Signature of Mitness Signature of Candidate



Department of National Defence

Naval Service

Ottawa, Canada.

STATEMENT OF SERVICE OF

GEORGE VALLELIE AULENBACK,

Able Seaman, R.C.N. 0.N. 2966.

Ship or Establishment

"ST.LAURENT"

"STADACONA"

"MARGAREE"

"SKEENA"

"FRASER"

H.M.C.S. "STADACONA"

-

61

#

=

#

Rating

Boy Seaman

Ord. Seaman

=

68

\$1

Able Seaman

From

15 May, 1937

19 September, 1937

1 January, 1938

19 December, 1938

23 November, 1939.

30 December, 1939

21 April, 1938

To

September, 1937.
 December, 1937.
 April, 1938.
 December, 1938.

22 October, 1940.

Character Assessment for whole of time - "VERY GOOD".

DISCHARGED "DEAD" - 22 October, 1940.

(J.O.Cossette) Naval Secretary. IN REPLY PLEASE QUOTE

1940

No. NS. 62-4.121.

MOV 8

| What is the full name of the deceased? | George Vallellie aulente |
|--|---|
| Give the month and year of his birth. | George & allellie Aulenber Sept. 19 - 1919 |
| Where and when were his parents married? | Caledonia, Quemo Co. 718, - |
| Was he ever married? If so, state exact place and date of marriage. | No- |
| 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? | No- |
| PARTICULARS OF | DOMICILE |
| Where was deceased born? | Mersey Point |
| In what Province, Country or State did he reside, and in which last? | Nova Scotia |
| How long in each? | 18 yrs in Mersey Poin |
| What was the nature of his employment? | Marry |
| Did he own the house or homestead in which he lived? If so, where? | No- |
| Did he ever state verbally, or in writing, where he intended to make his permanent home? | No. |
| State your postal address in full. | |
| PARTICULARS AS 7 | TO CLAIMS |
| Have the funeral expenses been paid? If so, by whom? | |
| 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). | 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 nsert degr relationsh Trelationship, resample I hereby declare that the foregoing particulars are correct, and a true and complete statement Widow." Father," etc. of all the relatives that the deceased ever had in the degrees inquired for; and that I am the Father of the deceased. N.B. To be signed in full in the presence of a Clergyman, Priest or Local Magistrate Pergs Queenbach Signature of Informant CERTIFICATE I hereby certify that, to the best of my knowledge and belief line tark {Name of Informant } is the *..... 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 workool this 7 day of august 1941 R mar Willian Qualification Clergyma Signature of Clergyman, } Address Teverys and hova 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.

| f hip | | | INFORMANT'S STA | TEMEN | IT |
|------------|-----------------------------------|---|---|-------|--|
| Degreetons | RELA 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 D | eceased | not married | | |
| 2 | Children of the dates of their | Deceased and Births | | | |
| 3 | Father of the D | eceased | Perry S. aulenbach | 43 | he iverpool, MS |
| 4 | Mother of the I | Deceased | | | |
| 5 | Brothers of the Deceased | Full Blood | Kellya Aulenhach | 23 | Lo weepool, 7. |
| | | Half Blood | 0. | | 0 |
| 6 | Sisters of the Deceased | Full Blood | | | |
| | - | Half Blood | Jean Marie Culuboc | h14 | hwirkool, M.S. |
| | of the full or the ha | or sisters (whether alf blood) of the De- ad, and date of death | Names and ages of their children (if any) | | Address of their children |
| 7 | | Mare . | | | |

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.

-

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 | | | ** |
| 9 | Uncles and Aunts by blood of the Deceased (not Uncles and Aunts by marriage) | | Age | |
| | | | | And shares |

MENIORANDUM FOR

Mr. Percy Aulenback.

Liverpool,

Nova Scotia.

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

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

and the following number quoted:---

H.Q.N. S. 62-A-121 FD 211

DEPARTMENT OF NATIONAL DEFENCE OTTAWA, ONT.

July 31, 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. George V. AULENBACK, No. 2966,

R.C.N., H.M.C.S. "MARGAREE"

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.

M.F.W. 77 3M-5-40 (4995) H.Q. 1772-39-972

NON QUALIFYING SERVICE

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W.S.G. Application No. 11346 4 FILE NO. N.S. N-29664 TO: D.N.P.A. "G" "WAR SERVICE GRATUITY" COMPUTATION OF SERVICE VALLELLIE 2966 7 OFFICIAL AULEN BACK SURNAME GEORGE CHRISTIAN TAMES RANK OR RATING VALANTE IN FULL NUMBER ON DISCHARGE CAUSE OF DISCHARGE: DEAD (MAR GAREE) (A.P. 000 APPLICANT ... UNCLE , HAN FAVOUR OF GRANDMOTHER BEHALF OF GRANDMOTHER) 366 FAVOUR 22 TOTAL SERVICE 409 Date of Active Service 10 SEPT 39 4 22 OCT 40 1 Date of Discharge Total No. of Days 409 4 # Less non qualifying Total Days 409 " service NIK CVERSEAS SERVICE % Total No. of Days 3721 # Less non qualifying 3724 Total Days service NIL Record of Service in other Forces (per Naval Records) Branch of Service Date of Active Service Date of Discharge # & % Overleaf Computed By Man inpake - Checked By Williams (H.B. Money) for Payr. Cmdr. R.C.N.R. * £G (#) Director of Personnel Records TATE: JUN 291946 DW. OOF NDA.

DISTRIBUTION OF SERVICE ESTATES

Naval - Military - Air Force

| Name | AULEBACK | | Goorge V. | No | | 2966 | |
|---------|------------|------|--------------------|-----|-------|---|------|
| 1 | Surname | 1 | Christian Names | | | n alan ke ke na an tini <u>n n</u> a | |
| A.B. | | *1 | MARDARIE# | | | 22-10-10 | |
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| ÷ • * , | | | Other Credits | | | | |
| Date | AUGUST 15. | 1941 | Total | | 43.77 | | |
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| | | | NET TOTAL | • • | 43.77 | | |

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Distribution approved and authorized

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

AUDITED FOR PAYMENT

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For Chief Treasury Officer

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| | ID NAVY | OF NATIONAL DEFENCE ARMY AIR FORCE WAR SERVICE GRATUITY | |
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| 1 | | ULENBACK REGISTER N | |
| Address Live | William E. Feener, rpool, P.O. Box 142, ns Co., N.S. | DAT SERVICE N FINAL RANK OR RATIN | 0. 2966 |
| A. TOTAL QUALIF | | 22 UCT/40 DATE OF DISCHARC | SE EE U |
| | NO. OF DAYS_ | 409 EQUAL TO 13 COMPLETE PERIODS AT \$7.50 | 97.50 |
| B. QUALIFYING O NO. OF DAYS 372 | LESS 19 INELIGIBLE DAYS, EQUAL TO | 353 DAYS @ 25C. PER DAY | 88.25 |
| C. SUPPLEMENT F | OR OVERSEAS SERVICE | | |
| | DAILY RATI | ES AT DISCHARGE | |
| | PAY SUBSISTENCE OR LODGING AND PROVISION ALLOWANCE ADDITIONAL PAY | \$1.85 \$1.45 E.T. \$.10 G.C.B. \$.05 | |
| | EPENDENTS' ALLOWANCE 1/30 OF \$_ | H.L.M. \$.13 NIL 5 TOTAL \$3.58 $\times 7 = 25.06 NO. OF DAYS 372 $\times 25.06 | 50.94 |
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| E. DEDUCTIONS | OVERPAYMENT OF | PAY AND ALLOWANCES \$ DEPENDENTS' ALLOWANCE AND ASSIGNED PAY \$ | |
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| G. YOUR PORTION | OF GRATUITY IS- | | 20.0 |
| dD | DEPENDENTS' ALLOWANCE IN IS TOTAL DEPENDENTS' ALLOWAN | SSUE TO YOU \$OF \$ = CE IN ISSUE \$ | s 236.6 |
| Cleque . | 84811 - act. 2/4 | 5 A | |
| CERTIFICATE I CE | RTIFY THAT THE AMOUNT HAS BEE TERMS OF THE WAR SERVICE GRA | EN CORRECTLY COMPUTED AND IS PAYABLE IN ACC NTS ACT, 1944 AND THE REGULATIONS ISSUED THE | CORDANCE REUNDER. |
| | TREASU | | |

| 2956 OFFICIAL NUMI | BER FILE NUME | BER 62-A.121 | | OFFICIAL NUMBER 2966 |
|--|--|--|--------------------------------------|---------------------------------------|
| NAME AULENBACK (Surname) | George (Given Nam | Vallilie | DATE OF BIRTH | 19 September, 1919. |
| PLACE OF BIRTH Mersey Point, Queens, Co., N.S. RELIGION Roman Catholic. | EDUCATION | OCCUPATION Complètéd Grade IX | Fisherman. | |
| RESIDENCE AT TIME OF ENLISTMENT: Street and No | | | Mersey Point | Province, etc. N.S. |
| ENGAGEMENTS Date (in figures) Period | Height Hair | DESCRIPTION Eyes Complexion | Marks or Scars | PREVIOUS SERVICE Served in Rank Dates |
| Day Month Year | | | | served in or Rating From To |
| 15 5 37 As Boy 19 9 37 Seven years. | 5' 51" Red | Blue Fresh. | | |
| | | | | |
| | | | | |
| | | ***** | | |
| | 0 | | | 2 2 2 |
| NEXT OF KIN RELATIONSHIP (in pencil) ADDRESS (in pencil): Street and No. | | | JEAL D. | Province, etc. |
| MEDALS, CLASPS, HURT CERTIFICATES, PRIZE MONEY | | | Examinations, Certificates, etc. | Province, etc. |
| Date (in figures) Day Month Year | Date (in figures) Day Month Year | Particulars | Date (in figures) Day Month Yea | PARTICULARS |
| | 25 5 37 | P P.T. (Fair) | | |
| | 19 7 37 | P.S.T. (Good) Passed E.T. "One." | | |
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Name George Vallellie HULEN BACK

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Second Class for Conduct (inclusive dates)

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

(R.C.N. OR RESERVE FORCES)

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 <u>AULENBACK</u> <u>Searge</u> <u>Consecutive</u> candidate for entry as <u>Boy Sea RCN</u> and I believe him to be in all respects fit for His Majesty's Service. He has signed the Certificate given below in my presence.

Dated at Hallax N.S. the 15th of Man 1937 Examining Medical Officer 88 J ie (Rank) Lunt. R.C.A.M.C. M.O. P.C.M.

. This examination has been made in accordance with the Instructions for Recruiting.

| 3 Age { Years Months | © Weight without Clothes | ${\scriptstyle \widehat{\odot}}$ Height with Bare ${\scriptstyle \widehat{\odot}}$ Feet | General Development (d) | Chest Girth | S (i) Shellen's Types (i) Colour Vision | Vaccinated or re- s Small Pox (Date) | © Lungs, Heart, etc. | © Abdomen, Hernia, © etc. | © Limbs and Joints | © Skin | 3 Ears and Hearing | ∋ Testes, Uaricocele, etc. | Mouth, Teeth (No. defe- cient and No. defective, if any), Nose, Tonsils, etc. | ³ Anus, Hæmorrhoids, etc. |
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CERTIFICATE TO BE SIGNED BY THE 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.

Mac. ulenback. Signature of Candidate

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When a Candidate is passed, notwithstanding a slight defect or disability, the following Certificate is to be filled up

This Candidate is the subject of.....

..... not considered of sufficient importance to cause his rejection, he being desirable in other respects.

(Rank)

Examining Medical Officer

Can. B. 207 2M-3-34 N.S. 815-2-207

* The exact meaning of this is to be clearly explained to the Candidate by the Examining Medical Officer.

| RCN "MARGAREE" | n a mai dina a sa mai na sa |
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| | EGISTRATION NO PRTEAT DESPITCHR |
| (1) <u>MEDALS</u> <u>PERSON</u> ENTITLED TO Mr. Percy S. Aulenback - Father ADDRESS: LIVERPOOL, N.S. | DATE DESP (1) REGN. NO 692 |
| (2) MEMORIAL CROSS - WIDOW | (2) |
| ADDRESS: | |
| (3) MEMORIAL CROSS MOTHER | (3) |
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| DEPARTMENT OF VETERANS A | FFAIRS AW | ARDS | 1 2 1 | D.D. WAR SERVICE RECORDS |
| AULENBACK George | Vallellie | N-2966 | A.B. | FILE No. |
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HTWG/RM

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62-a121 34B

1st November, 1940.

Dear Sir:

It is with deep regret that I must confirm the telegram sent out by the Minister of National Defence, reporting that your nephew, George Vallellie Aulenback, Able Seaman, O.N. 2966, R.C.N., was missing, believed killed.

Few details are available, but it is known that H.M.C.S. "MARGAREE" was sunk in collision in the North Atlantic whilst steaming without lights, on convoy duty, and in the submarine zone. 142 Officers and ratings are missing and must be presumed lost at sea.

I am requested to express to you the sincere sympathy of the Minister of National Defence for Naval Services and the Chief of the Naval Staff in your bereavement.

Any further information, which is received, will be at once communicated to you.

Yours very truly,

(J.O. Cossette), NAVAL SECRETARY.

Mr. William E. Feener, LIVERPOOL, N.S.

62-A-121

30

BM/IF

- Naval Service -

12 December, 1940.

THIS IS TO CERTIFY that according to official information George Vallelie Aulenback, Able Seamen, Official No. 2966, Royal Canadian Navy, was serving in H.M.C.S. MARGARGE when that ship was lost in the North Atlantic on the 22nd of October, 1940, and that he is missing and presumed dead by Naval Authorities.

(J./C. Cossette) Naval Secretary.

w

P096859

62-12-121

Six copies to be rendered to Naval Service Headquarters

REPORT OF THE DEATH OF AN OFFICER, MAN OR BOY

| Name George Vallellie AULENBACK (Christian names in full) | |
|--|--------|
| Rank of Rating A.B. Official No. 2966 (If unknown, date of first | entry) |
| Place of Birth Mersey Point, N.S. Date of Birth 19th September, 191 | |
| Occupation in Civil Life Fisherman Religion Roman Catholic | |
| 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) <u>3 Years 2 months</u> | |
| Date of Death 22nd October, 1940. Place of Death At Sea | |
| Cause of Death Loss in collision of H.M.C.S. MARGAREE (If due to accident, violence, or enemy action, particulars to be stated briefly) | |
| | |
| Nearest known (Name Margaret Ann FEENER Relationship Grandmothe | |
| Nearest known relative or friend. Name | |
| Date on which the above was informed by Ship Informed by N.S.H.Q. | |
| Date on which death was registered with local Officials | |
| In the case of Imperial Service men, whether Active Service, Pensioner or Reserve, date on whic | |
| prescribed return was rendered to the Registrar General in London, Edinburgh or Dublin, ac | |
| ing to Nationality | |
| Place of Burial | |
| Location, Number, etc., of grave | |
| Undertaker employed | |
| If borne for discipline only, date D.S.Q. or invalided | |
| COMMANDER R.C.N. Commanding Officer | , |
| Cth Negerbary O | |
| Sth November, 194 O | |

Department of National Defence, Ottawa, Canada.

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

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

C.N.S. 1121 15M—7-40 (5849) N.S. 815-9-1121

PARTICULARS OF DEAD OR MISSING PERSONNEL WITH REGARD TO PAYMENT OF WAR SERVICE GRATUITY Nama of Rank or Deceased Member George Vallellie AULENBACKating A-13 0. No. N 2966 Uncle 1. Dependents' Allowance and Assigned Pay in D.A. FEENER Liverp force at date of death: O. Box 142, A.P. \$ 15.00 Queen's Co. -D.A. A.P. 2. Pension awarded or ho record being awarded to: Uncle 5. War Service Gratuity Mr William. E. FEENER. Application(s) received from: Liverpool, P.O. Box 142, Lileno Co, N.S. In accordance with the War Service Grants Act, 1944 (Part I, Clause 4) and Directive dated 16th December, 1944 issued under author-of the Minister of Veterans Affairs, application(s) for War Service Gratuity in respect of the service of the above named deceased rember may be dealt with as follows: () To be paid to: In the proportion of: - and -In the to: proportion of; 1

(X) 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:

X Group "B" (ii)

Group "C"

of the above mentioned Directive.

Konald J. Thorne, C. P.O. WTR. for D.N.P.A. (G) DNJ.

11346

Late 9-

Liverpool, P. O. Box 142, Queens Co., N. S.

June 20, 1945.

Department of National Defence, Naval Service, Ottawa, Ont. P617885

RE: NS N-2966 Pers. (N) (n-15)

Dear Sirs:

62-A-121

Your letter received regarding payment of a war service gratuity, to the Dependent or dependents of the late George Aulenback, Able Seamen, Official Number 2966, R. C. N.

I, William E. Feener, am an Uncle of George Aulenback. His Mother died when he was very young and he was then taken by his Grandmother, Mrs. Alexander Feener, with whom he resided and made his home until his death. She was dependent on him, I received an allotment of fifteen dollars from him each month on her behalf.

She is the one who is intitled to his war service gratuity. I was listed as his next of kin as he wished me to settle all of his business on behalf of his Grandmother in case of his death.

Hoping I may be of further service to you regarding the settling of this war service gratuity.

NAVAL PERSONNEL Yours very truly, RECORTS 11340 JUN 281945 WAR SERVICE GRATUITY SECTION (1990)

