CRANE ALAN CREIGHTON N21550

OFFICIAL No. IF KNOWN Space to be left vacant if not known

# CONTINUOUS SERVICE ENGAGEMENT, OR RE-ENGAGEMENT To be forwarded to the Naval Secretary, Department of National Defence, with Form S. 59

	CHRISTIA	N AND SURN	AME IN FUI	T.	NEXT OF KIN	- 10	Pri	ESENT RATING
Alan	reighto	n CRANE	42		Mother. NamDora Grane. Address 1037 Lyal 1	St.	A/E	.R.A. 4/5.
	DATE OF BIR	tTH*		P	Esquimalt,	в.с.	1 1 1 1 1 1 1 1	ANK AND STATION OF JUITING OFFICER
28th /	April, 1		Cou	untyEng			Oland RON B	nder, JEW. ,DSC, RCN, arracks, malt, B.C.
1000		Po	ersonal D	escription at th	ne Date of this Docume	nt	- العال	
Height	Chest	Hair	Eyes	Complexion	Wounds, Scars or Marks	The 1200	oligious omination	TRADE OR OCCUPATION
, u	35 1/2 32 33	Black	Grey	Medium	- NIL -	0.	of E.	Machinia
Enga	ng date of gement or ngagement	13th	July,	1938.	Period of Engage- ment or Re- engagement	Sev	en Yea	rs.
unteerin	g to en- re-engage	13th	July,	1938.	Date of entering present ship	13t	h July	, 1938.
The for Service, when the place of	ollowing que nose answers particulars of birth corr	Declarations are to sare to be a given above tect?	on of Entrope be put be ecorded he	by the Comman dereon:— name and date	rom Shore for Continuous ding Officer to the person and	n about	to engage	
					Yes			
3. Nationa	lity of pare	nts—Father	Eng	lish	Mother		English	a
Royal Militia or in 1 in the 5. Do you Milita His M	Naval Rea, Volunteer His Majesty R.C. Mour now belon ry), Territo Lajesty's Arr	serve, Arm rs (Naval or r's Indian or rted Police? ag to the Indian Force ony, or to an	y, Army r Military r Colonial ‡ Iilitia, Vo or any Re ny establis	coyal Fleet Res Reserve, Man r), Territorial F Military Force colunteers (Nav- egiment or Cor shed Naval or A dd Police?‡	rines, Porce, Sal or ps in No.	O		
6. Have you reason 7. Have y Army	ou ever been discharge of rejection ou ever been or R. C.	n rejected a d from it o n or dischar en discharg Mounted F	s unfit fo n that ac ge, and da ed from to olice on	r His Majesty's count? If so, atethe Navy. Mai	s ser- state	Alex	No	ALEO.
					noculated?Y.	es.	JB 02	
					Y		Ro	Stew
* When evid † Foreigners a Britisl † Particular forward	ence of age is obta	ined on First Ent ored. On the ent dence of the fact Army, Army Re	ry, it should be ry of a person hould be attack serve, Naval l	e attached to this Form born out of the British hed to the "Entry Pape Reserve, Marines, Milit er of the Royal Fleet R	Empire, it should be ascertained that	he is (and i		The property of the contract o
C.N.S. 55 2M-2-37 N.S. 815-9-6		5 A	1/2	02 2	1 B.	E.W. 8	38	

I.—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
IAlan Oreighton CRANE, 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 Naval
Service of Canada* Seven Years. from† 13th July, 193 &, provided my service should be so long required. And I do sincerely promise and swear (or solemnly declare) that I will be faithful
and bear true allegiance to His Majesty. As witness my hand this 13 th day of July 1193 g.  Witness to Signature 11 Malley 1193 g.  M.A.A.
Witness to Signature M.A.A.
Attested before me this 13 th. day of July, 193 8.
Lieutenant Commander, RCN. Signature of a Commissioned Officer of the Naval Service
Date13th July, 1938.
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.
COMMANDER, RCN Commanding Officer
Mongan Smil Captain, ROAMO. Medical Officer
II.—Certificate and Declaration for Boys
Date
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
boy should be entered for
Series and the control of the contro
Commanding Officer  Lieutenant
Lieutenant  Medical Officer
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.  I am willing to enter and serve in the Naval Service of Canada for
and bear true allegiance to His Majesty.
Boy's Signature in full
Witness to Signature
Attested before me thisday of
Signature of a Commissioned 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 icated on the er side are also I, now serving as a, now serving as a
board H. M. C. S. , who on the
aged to serve in the Naval Service of Canada for a period of §
ge to serve for a further period**
ded my services should be so long required.
193
Commanding Officer
"for the term of (number in words) years," or "to complete (number) years for pension," or "until I attain the age of years."  he date from which the engagement actually commences.  ument conveying the consent to be attached to this paper. (N.B.—Not required in the case of youths over 17 years of age.)
ritten in words.  follows:—"Of (number) years," or "to complete time for pension," or "until I attain the age of years," as the case may be. 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.

## Acting ER.A. 4th Class.

	No. Name CRANE, Allan Creighton Nationality File
	Date of Birth Married Religion
	Date of Application July 12,1938. Medically Examined
0	Address
	Eduction
	Previous Experience
	Remarks 12-7-38 D.N.E. Proceed with entry.
	Directions Re Entry. 12-7-38 telegram to Cdr. enter if fit.
	2M 7-35 (M130)

Original 62C344

No. 297.

H.Q. File No.

## DECLARATION OF ALLOTMENT

List and Number in Ledger	ALLOTTOR	C. R. P. A	Rank or Rating	Official No.	Daily Rate
"NADEN" 1 5A / 203	Surname CRANE,	DATE O. 63.	A/ERA L/c	NK.	3.05
	Christian Names Alan C.			21550	

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 Canadian Bank of Commer Christian Names	ce	1022 Government Street, Victoria, BC	\$65.00 New	30 Aug. 1938

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):—
		NIL Initials	9828
		1005	
	men pe	lara	
	Allound	Caro	
NOTE 1:—If there NOTE 2:—Write	e be no existing Allotment, the sord "NIL" sho 'Increased or Reduced as Section A"; "To be s	topped (charged to)";	"To be continued," etc.  Continued," etc.  Rank or Rating
ENTERED IN	FAIR LEDGER	ENTERED IN RO	UGH LEDGER
	6		le l

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 FINANCIAL SUPERINTENDENT,

Department of National Defence, (Naval Service)

Ottawa, Ont.

Paymaster Lieut. Commander

Accountant Officer

H.M.C.S. "NADEN"

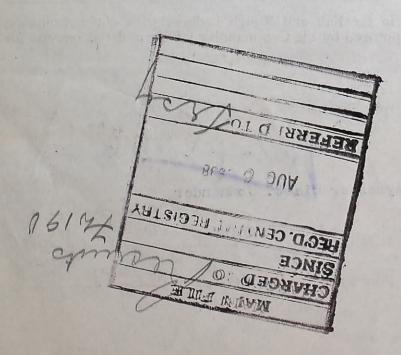
Forwarded 1st August, 1938.

S. 63

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

For use at Headquarters only.

	INITIALS	DATE
Declaration received at Headquarters	6)	
Declaration examined.		
Approved		
Index card made	7	
Allotment ledger sheet made	St	
Allotment ledger sheet checked	The state of the s	





# DEPARTMENT OF NATIONAL DEFENCE OTTAWA, CANADA

1	
-	

		27th	February,	19.7	19	
--	--	------	-----------	------	----	--

## AT THE HIGHER EDUCATIONAL TEST HELD ON

12th November, 1938.

Name CRANE, Alan C. Rating E.R.A.

obtained the marks shown in the following subjects

# SUBJECTS General Knowledge 67% Practical Mathematics. 85% (NOTE - 75% and over = 1st class marks. 55% and over = 2nd class marks)

This form is a statement FOR INFORMATION ONLY. It is NOT a "Higher Educational Certificate" or a Certificate of Qualification for Warrant Rank, both of which require a certain standard to be obtained in several specified subjects.

Dear Mr. Russell -

In your letter you kindly offered to do anything you could to help us in the event of any difficulties arising through our son Alan Creighton's death. It is now over four months since the "Margaree" met disaster and the authorities at Ottawa are still unable to furnish a death certificate. This prevents all financial and business matters being completed and is extremely inconvenient in many ways besides dragging out the sordid side of the tragedy. We shall be most grateful if you can in any way expedite matters for us.

Yours sincerely,

(Sgd) DoraJ. C. Crane

- Naval Service -

37

25 March, 1941.

THIS IS TO CERTIFY that according to official information Alan Creighton Crane, Engine Room Artificer, Official Number 21550, Royal Canadian Navy, was serving in H.M.C.S. MARGAREE 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. O. Cossette) NAVAL SECRETARY.

## STATEMENT OF ACCOUNT

			I I REAL DOC			Rating	1	The same
IDDDIA ( )							\$	c.
						7 45		,
(Rank	k Rating)					s at \$ 3.05a day)		
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								•00.
	*						1	25
	Chi	<b>.</b>						AAR
A THE STATE OF		· · · · · · · · · · · · · · · · · · ·				Total credits	150	• 09
DEBT from form	mer_account	171	1					
AYMENTS:-	1st	2nd	3rd	4th	5th			
	\$ c.	\$ c.	\$ c.	\$ c.	\$ c.			
st month	8.94					Total	3	· 94
nd month						Total		
rd month						Total		
llotment	October						65	• 00
ension deductio	on (Officers) cha	arged to			of			
Iospital stoppag	ges							
Iulcts								
THER CHAR	GES:	111	1			•••••		
						197- A		
						Total debits	73	• 94
					Balance Cr		56	.15
				(	Balance Dr.	to be shown in red)		
						-		
lumber of days	actually victua	alled during p	period menti	ioned abov	e15			
NOT ICTUALLED	LENT, SICK OR LEAVE		IVE DATE	No. Of DAYS	F SHI	IP, HOSPITAL, etc., I WHICH BORNE		
	221.112	FROM	то		•			
	Lent	6 Sept.	7 Oct.	32	"DR/	KEn		7 57085
							A Aura	1 French

ACCOUNTANT OFFICE

Pay. Sub-Lieutemant, R.C.N.V.R.

C.N.S. 2426 25M—10-40 (7514) N.S. 815-9-2426

Date Int April, 1911.

## 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

Official No. 21550	D	List. BAA. A.
Who* was ""DD" on the		MT T T T W W
Not sum due on ledger en account of Wages		\$ cts.
Net sum due on ledger on account of Wages		50 15
Proceeds of sale of Effects charged against Wages, brought	from the other side	Male
Cash— Proceeds of sale of Effects, paid for in Cash, brought from the other side	\$ cts.	
Found amongst Effects		
Debts collected §	NIL	
CR460-23226	Inc. argustine	1185
Cash debited in the Accountant Officer's Cash Acct		MIL
If in debt in ledger, amount to be stated (in red ink)		MIL
Rate of allotment (in words)	charged to	OOTOBER 19
Name of ship from which transferred	ARCARINE"	
Total†	ORENTTOR	56 15
We hereby certify that we have every reason to believ	that the above age	68.00
		man and an and
true statement of all wages, Effects, and other Credits or D		
	CREDITOR	
of January dollars	PEPERUA-	cents. 🗸
Dated on board H.M.C.S.	at	IPAX
	day of	19
Approved Sm Marke	Il de Acco	ountant Officer
PAYMASTER SUB/LI	The same of the sa	itials of the Assistant Accountant Officer
18 9 / / /EVRS		Accountant Officer
L. C. Leigh, It / Commanding	Officer.	
For Use at Headquarters. \$cts	credited on Inspect	tor's certificate
Noto	Total Office	
Signature		
Sign of the		

\*State whether discharged on shore, D.D. or Run.

§Subscription 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

10m-10-40 (7450) H.Q. N.S. 815-9-45 - Agor Fede A



Six copies to be rendered to Naval Service Headquarters

# REPORT OF THE DEATH OF AN OFFICER, MAN OR BOY 30

H.M.C.S	STADACONA at	HALIFAX, N. S.
Name	Alan Creighton CRANE	n full)
Rank of Rating	Engine Room Artificer 4th	
Place of Birth	London, England Date of	f Birth 28th April, 1916
Occupation in Ci	vil Life Machinist Religio	n Church of England
		C.N., or mobilized service in case of R.C.N.
		of Death At Sea
	Lost in collision of (If due to accident, violence, or enemy act	H.M.C.S. MARGAREE
Nearest known relative or friend.		Relationship Mother
Date on which the	he above was informed by Ship	Informed by N.S.H.Q.
Date on which d	leath was registered with local Officials	nk
In the case of Im	aperial Service men, whether Active Serv	ice, Pensioner or Reserve, date on which the
prescribed re	turn was rendered to the Registrar General	ral in London, Edinburgh or Dublin, accord-
ing to Natio	nality	<i>y</i>
Place of Burial	Date o	f Burial(if known)
Location, Number	er, etc., of grave	(if known)
Undertaker emple	oyed(if any	7)
	ipline only, date D.S.Q. or invalided	
		COMMANDER R.C.N., Commanding Officer,
		8th November, 1040

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.

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

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

## MEMORANDUM FOR

7	Mrs. Dora Crane,
	1037 Lyall Street,
	Esquimalt, B.C.

115445 SEP 3 4 7. 64

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

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

and the following number quoted:-

H.Q.N.S. 62-C-344 FD 210

## DEPARTMENT OF NATIONAL DEFENCE OTTAWA, ONT.

	July 2, 194.1
	of record and in the event of there being any balance of pay vailable for distribution (according to law) on account of the
ate	
	CRANE, Alan Creighton, E.R.A. 4,
	No. 21550, R.C.N.
	11. 10. 11. 11. 11. 11. 11. 11. 11. 11.

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 excessed ever had in each of the degrees specified below.

of ship			INFORMANT'S STATEMENT								
Degrees of Relationship	RELATIVES required to be accounted for		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	none	hone	hone.						
2	Children of the dates of their	Deceased and Births	200	u	-						
3	Father of the Deceased		Falter unkerown - (ass optatulon) arthur Cyril Crave.	65	ten & adoption 1037 hyall their st						
4	Mother of the D	eceased	Statuto ) Dora Jane Collier Crane	G1	1037 hyou 8 hers Engrement						
5	Brothers of the Deceased	Full Blood	wone	-	none.						
		Half Blood	The deseared from an attractione - wentered wrother who is is believed, him married		and leas one child						
6	Sisters of the Deceased	Full Blood	wone	0	ore						
		Half Blood	come. Com	, se	e bana. 5.)						
	Names of brothers of the full or the hal ceased, who are dead of each.	or sisters (whether if blood) of the De- l, and date of death	Names and ages of their children (if any)		Address of their children						
7		ki	one so far a	D _							

## 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	

#### FULL PARTICULARS AS TO IDENTITY

_		
10	What is the full name of the deceased?	Ske has borne the asine yalan Creighton Crane ruie 192
11	Give the month and year of his birth.	28. april 1916
12	Where and when were his parents married?	Sto cotter and univaried.  Ament & adoption were want 26. December 1912 as Durbon.
13	Was he ever married? If so, state exact place and date of marriage.	no
14	Did he leave a (later) Will? If so, it should be forwarded.	Els - Copy forward here
5	Is there any other estate which will necessitate application being made for Probate or Letters of Administration?	res.
	PARTICULARS OF	DOMICILE
16	Where was deceased born?	England
7	In what Province, Country or State did he reside, and in which last?	British Columbia
8	How long in each?	Su England until 192 Suice 1921 h Butt Cole
9	What was the nature of his employment?	Permanens warde Jone.
0	Did he own the house or homestead in which he lived? If so, where?	no
1	Did he ever state verbally, or in writing, where he intended to make his permanent home?	no.
2	State your postal address in full.	1039 hyall Street & & &
	PARTICULARS AS	TO CLAIMS
3	Have the funeral expenses been paid? If so, by whom?	host at Sea.
4	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.
- 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 <u>creditor</u> should then sign same, and if <u>you</u> admit that the claim is correct, then <u>you</u> "O.K." the bill and sign same.

DECLARATION

*Insert degree of relationship,		DODING TO TO			
for example "Widow," I hereby de	eclare that the foregoi				
"Father," etc. of all the relat	ives that the decease	ed ever had in	the degrees inquire	ed for; and th	at I am the
talke.	& adopte	_ ^			
* * * * * * * * * * * * * * * * * * * *	2 Joseph	of the c	leceased.		
-	No.				
N.B. To be signed in full in the presence of a Clergyman, Priest or Local Magistrate		arthur	rave	device, call.	$\begin{cases} \text{Signature} \\ \text{of} \\ \text{Informant} \end{cases}$
					(Illiorillant
	3 11-	1 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3		4	
		CERTIFICATE			
the compared by the second about the	agentines have be represented to	and the second	the same of the sa	Carlle.	C .:
I hereby ce	rtify that, to the best	of my knowledg	ge and belief		Die
*See above	Nam (Nam	ne of ligtho *.	ther & ad	of liver of	the Deceased
			STREET, INC. OF CO., or		
	, and I believe the a			t of Relatives	made by the
Informant and s	signed in my presence	to be complete a	nd correct.		
	11	1			
Dated at.	cloria 8	this.	day of kee	)	1941
<b>b</b>	0.			1	-
Signature of Clergyman Priest or Magistrate	a.e.	napi	ification AN	star Pu	bli un
Priest or Magistrate V		oual	and forthe 1	Every,	of butil Columb
2 million	. 537 R	n or	- + 10 -	· At	, and the second
Add	iress	Tun ou	er o cera		¿

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.

This is the last will of me, Alan Creighton Crane, of 1037 Lyall Street, Esquimalt, B.C., and I leave to my parents Arthur Cyril Crane and Dora Jane Collier Crane all that I die possessed of, both real and personal property, and I hereby appoint Arthur Cyril Crane sole executor of this my Will and I revoke all former wills and codicils.

Signed by the testator, in the presence of us, both present at the same time who in his presence and in the presence of each other have hereunto set our nemes as witnesses.

ALAN C CRANE

C. J. HUDSON. 1040 Lyall St. Victoria B C.

F. L. HUDSON 1040 Lyall St. Victoria B.C.

This fifth day of August in the year of our Lord One Thousand nine Hundred and Thirty Eight.



1

## NAVX

ame: CF	Surname			Alan Christian	C. Names		No.:	V-21550
ERA 4/0			Un	HMCS	MARGAREE		Γ	22-10-40 Pate of Death
					AM	IOUNT	W.S.G. L.P.C	271.66 68.00
		Date:	10-8	-45			Other Credits	
							Total	339.66
							Prev.dist. This dist.	68.00 271.66
SHARE	RELAT	`IONSHIP			NAME ANI	) ADDRI	ESS	AMOUNT
All	Father	ė.		Execu	ur C Crane, utor of the lan C Crane, Bessborough ORIA, B.C.	extate dec'e Ave.,		271.66
					P4. TO	TREA /4/4	S.	
								WSG
AUTHO H.O.	1 .	DDI	H.O.	OPI	AMOUNT	DISTR	IBUTION APPROVED	AND AUTHORIZE
H.Q. F.E. No.	VOTE	PRI	H.Q. SUB.	OBJ.	AMOUNT		1111	

\$271.66

For Chief Treasury Officer

(L. M. Firth) Colonel Director of Estates

AUDITED FOR PAYMENT

9999

CLASSIFIED

831

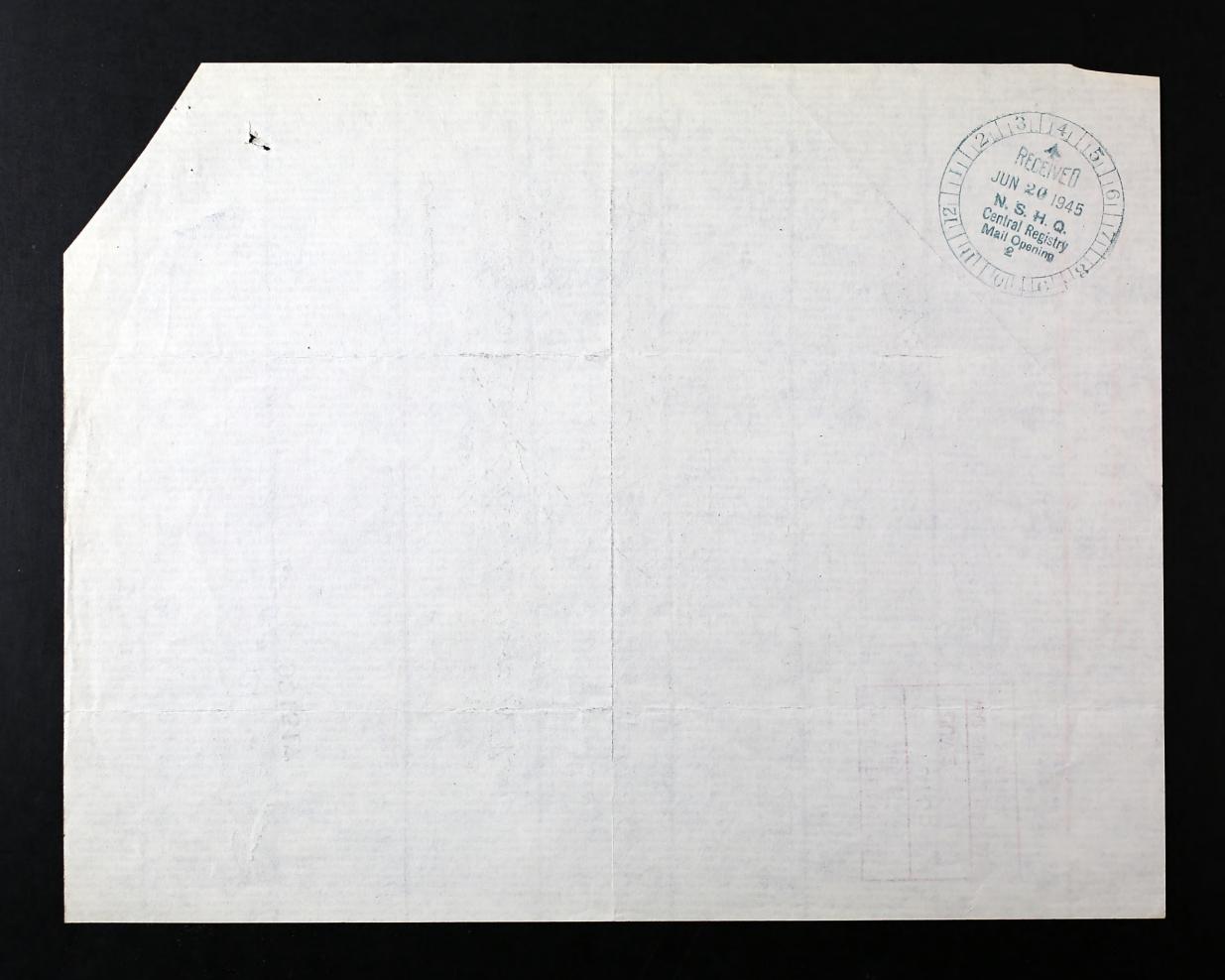
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EXAMINED BY

302 Bessborough Avenue Victoria. B.C. 14 th. June 1946. Secretary, Maral Board La-C-344 921517 Peaval Service Headquarters Ottawa. Reflying to your communication N-21550 Pers. (N) (NIS). On account of my wife's (Mrs Dora Crane) ill health, I am writing on her behalf. alan Creighton Crane G.M.a. Ho 21550 R.C.N. had no dependants when he died. His will, however, was probated in the Supreme Covert of British Columbia on the 17th day of March 1942, by which administration of all his estate was vested in me, arthur Efreil Crane his father, as Executor of his well. Will you therefore note that any gratuities accrueing to alan C. Crane's estate can be paid to me at the above address NAVAL PERSONNEL Yours faithfully, 10756 JUN 2 2 1945 arther. rane. WAR SERVICE GRATUITY SECTION P.S. Rease note address is changed from Lyall St To 302 Besshorough Hven we Victoria.



District Registrar

## In the Supreme Court of British Columbia.

## IN PROBATE.

Be it known that on the	day
	, in the year of our Lord one thousand nine
undred and forty-two	, the last Will and Testament (a copy
hereof is hereunto annexed) of	
ALAW CREIG	HTON CRANE
ate of the Municipality of E	squimolt, British Columbia
	deceased, who died at
2	October, 1940
as exhibited, read, and proved, before a	Judge of the Supreme Court of British Columbia,
nd administration of all the estate whi	ch by law devolves to and vests in the personal
presentative of the said deceased was a	granted to
49	
CLASS CLUSTING V	TT COANG
	he said Will named,
he Execut in t	said Court, thisday
he Execut in t	said Court, this 17th day
GIVEN under the Seal of the s	said Court, thisday
GIVEN under the Seal of the sextracted by To Va Copen	said Court, thisday
e Executor in to give a second of the second	said Court, this 17th day  Cleeve G. White,  District Registrar.
GIVEN under the Seal of the sextracted by	said Court, this 17th day  Cleeve G. White,  District Registrar.  Solicitor. Victoria, B. C.
GIVEN under the Seal of the seator for the Seator f	said Court, this 17th day  Cleeve G. White,  District Registrar.  Solicitor. Victoria, B. C.

This Grant is made upon the condition that no portion of the assets shall be distributed or paid during the War to any beneficiary or creditor who is a National of the German Reich or Italy wherever resident, or to any one on his behalf, or to or on behalf of any person resident in the German Reich or Italy of whatever nationality, or to or on behalf of any subject or citizen of any country at war with His Majesty, without the express sanction of the Crown acting through the Minister of Finance; and if any distribution or payment is made contrary to this condition the grant of probate or letters of administration will be forthwith revoked.

(Seal

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#### DEPARTMENT OF NATIONAL DEFENCE

NAVY ARMY AIR FORCE

#### STATEMENT OF WAR SERVICE GRATUITY

DECEASED MEMBER'S NAME

Alan Creighton

CRANE (SURNAME)

REGISTER NO.

NAV

PAYEE ADDRESS

(CHRISTIAN NAMES) Director of Estates. 308 Sparks St.,

for Service Estate of Alan C. Crane. NS. N-21550

SERVICE NO.

Cttawa, Ont.

DATE OF TERMINATION OF OVERSEAS SERVICE 22nd Oct 40

FINAL RANK OR RATING 22nd Oct DATE OF DISCHARGE

A. TOTAL QUALIFYING SERVICE

409 NO. OF DAYS. 30

COMPLETE PERIODS AT \$7.50

B. QUALIFYING OVERSEAS SERVICE

INFLIGIBLE DAYS FOUAL TO

DAYS @ 25C. PER DAY

C. SUPPLEMENT FOR OVERSEAS SERVICE

LESS 19

DAILY RATES AT DISCHARGE

SUBSISTENCE OR LODGING AND PROVISION ALLOWANCE

DEPENDENTS' ALLOWANCE 1/30 OF \$

ADDITIONAL PAY 1 Cert.

TOTAL

NO. OF DAYS

76.66

D. WAR SERVICE GRATUITY

271.66

E. DEDUCTIONS

OVERPAYMENT OF

OTHER DEDUCTIONS

PAY AND ALLOWANCES \$
DEPENDENTS' ALLOWANCE
AND ASSIGNED PAY \$

FLM

F. TOTAL AMOUNT PAYABLE

271.66

G. YOUR PORTION OF GRATUITY IS-

DEPENDENTS' ALLOWANCE IN ISSUE TO YOU \$\_ TOTAL DEPENDENTS' ALLOWANCE IN ISSUE \$

\$

271.66

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

PREPARED BY YM

TREASURY

ΔT



MATERIA Can. B. 207
2M—1-37
N.S. 815-2-207
N.S. 44

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

A CO

(R.C.N. OR RESERVE FORCES)

This Certificate is to be completed by the Examining Medical Officer and forwarded to the Naval Secretary, Department of National

I, the undersigned, have examined Alton breighton CRANE
candidate for entry as YERA 4c.
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 Esquimalt BC. the 13th of July 1938
X/Ray of chest satisfactory.  Radiologist's report and certificate  Standard Medical Officer
attached. Examining Medical Officer
White Race Vrine - Neg. (Rank) Gapt. PCAMC.

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

© Age { Years Months	® Weight without	© Height with Bare Feet	$\begin{array}{c} \textbf{General} \\ \textbf{Development} \end{array}$	Chest Girth	Vision by— S (i) Snellen's Types (ii) Colour Vision	Vaccinated or re- Small Pox (Date)	E Lungs, Heart, etc.	S Abdomen, Hernia, etc.	ELimbs and Joints	3 Skin	3 Ears and Hearing	Testes, Varicocele, etc.	Mouth, Teeth (No. deficient and No. defective, if any), Nose, Tonsils, etc.	â Anus, Hæmorrhoids, etc.
2212	1bs.	ft. ms.	Fair.	inches (a) maximum 35½ (b) minimum 32 (c) mean 33	left eye	Never	Normal	N	N	11	N	N	Soligatory	n

## 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.

	alan	. C	Trane
			Signature of Candidate
When a Candidate is passed, notwiths	tanding a slight defect or disa	bility, the	following Certificate

This Candidate is the subject of a Slight colour defect which is

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

In accordance with AFO 942/36 NMO 309 1st Aug 1936.

Defence, Ottawa.

The Morgan Smith

Examining Medical (

(Rank) Cast Reserve

<sup>\*</sup> The exact meaning of this is to be clearly explained to the Candidate by the Examining Medical Officer.

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

# alan breighton CRANE

IN THE ROYAL CANADIAN NAVY

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breighton CRANE Ship's Name (Tenders to be inserted in brackets) Cause List and No. Rating From To of Discharge Wounds received in Action and Hurt Certificate; also any Captain's Date Meritorious Service, Special Recommendations, Prize or other Grants Signature

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21550	OFFICIAL NUMBER	NAME	CR (Surn	ANE			Alan C	reigh	ton				•••••	OFFIC	CIAL NU	MBER	21	550	
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### MEDALS AND MEMORIALS—DECEASED PERSONNEL

REGISTRATION No. DATE OF DESPATCH

(1)	MEDALS PERSON ENTITLED TO	Mr. Arthur Cyril Crane - Father	(1)	
	ADDRESS:	kunixankan, 302 Bessborough Ave.		
(2)	MEMORIAL CR WIDOW	same address.	(2)	
	ADDRESS:		\_'	
(3)	MEMORIAL CR MOTHER	OSS Mrs. Dora Crane		
,	ADDRESS:	1037 Lyall St., Esquimalt, B.C.	(3)	28-4-41

DEPARTMENT OF	VETERANS	AFFAIRS A	WARDS	MAVY	D.D. WAR SERVICE RECORDS
CRANE	Alan	Creighton	N-21550	E.R.A.4	LE No.
SURNAME (IN BLOCK	LETTERS)	CHRISTIAN NAMI	ES REG. No.	RANK ON DISCHARGE	C.A.S.F. UNIT
WAR SERVICE					N Section 1
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(CLASS)	No,	DAT	E DESPATCHED:		

ADDRESS	5	:
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CAMPAIGN MEDALS	REGISTRATION NUMBER AN DATE DESPATCHED	
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