

WIGHT
ALLAN ERNEST
N40555

Entered from: OTTAWA, ONT.

229
210

H. M. C. S. "STADACONA".

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

40555-24
62-20310

CONTINUOUS SERVICE ENGAGEMENT, OR RE-ENGAGEMENT

To be forwarded to the Naval Secretary, Department of National Defence, with Form S. 59

CHRISTIAN AND SURNAME IN FULL		NEXT OF KIN	PRESENT RATING
Allan Ernest W I G H T.		Mother, Gertrude, Name.....126, LeBreton St., Address.....OTTAWA.	Victualling Assistant.
DATE OF BIRTH*	PLACE OF BIRTH†		NAME, RANK AND STATION OF RECRUITING OFFICER
7th March, 1920.	Town.....Ottawa. County.....Carleton. Province.....Ontario.	1384	Commander WJR. Beech, RCN., Commanding Officer, HMCS. "STADACONA".

Personal Description at the Date of this Document

Height	Chest	Hair	Eyes	Complexion	WOUNDS, SCARS OR MARKS	Religious Denomination	TRADE OR OCCUPATION
5ft. 4 3/4	34 1/2 32 33.	lt Brown	Blue	Fair.	Nil.	Church of England	Scholar.

Commencing date of Engagement or Re-engagement	27th August, 1938.	Period of Engage- ment or Re- engagement	Seven Years' CS.
Date of actually vol- unteering to en- gage or re-engage	27th August, 1938.	Date of entering present ship	27th August, 1938.

Particulars of former Continuous Service Engagements, if any; but, if none, and the person engaging has had previous Service, the date of his First Entry should be given. If the person has not previously served, write the words "First Entry" here.

First Entry.

If an Engagement is ante-dated for any period, the man's services for such period should be forwarded in to office, with the Engagement, on Form S.—1243.

Declaration of Entry or Re-Entry from Shore for Continuous Service

The following questions are to be put by the Commanding Officer to the person about to engage for Continuous Service, whose answers are to be recorded hereon:—

- Are the particulars given above of your name and date and place of birth correct?..... Yes.
- Are you a British subject?†..... Yes.
- Nationality of parents—Father..... English. Mother..... English.
- Have you ever served in the Navy, Royal Fleet Reserve, Royal Naval Reserve, Army, Army Reserve, Marines, Militia, Volunteers (Naval or Military), Territorial Force, or in His Majesty's Indian or Colonial Military Forces, or in the R. C. Mounted Police?‡..... 25th FB.RCA. - 3 years. (NPAMP)
- Do you now belong to the Militia, Volunteers (Naval or Military), Territorial Force or any Regiment or Corps in His Majesty's Army, or to any established Naval or Army Reserve Force, or to the R. C. Mounted Police?‡..... No.
- Have you ever been rejected as unfit for His Majesty's service, or discharged from it on that account? If so, state reason of rejection or discharge, and date..... No.
- Have you ever been discharged from the Navy, Marines, Army or R. C. Mounted Police on account of misconduct?..... No.
- Are you willing to be vaccinated or re-vaccinated and inoculated?..... Yes.
- Can you swim?..... Yes.

* When evidence of age is obtained on First Entry, it should be attached to this Form.

† Foreigners are not to be entered. On the entry of a person born out of the British Empire, it should be ascertained that he is (and in the case of a boy, that his father is) a British Subject, and evidence of the fact should be attached to the "Entry Papers."

‡ Particulars of service in the Army, Army Reserve, Naval Reserve, Marines, Militia, or H. M. Indian or Colonial Military Forces, or in the Merchant Service should be forwarded in to office with this Engagement. If a member of the Royal Fleet Reserve, the man's Registrar is to be immediately informed of his entry (Royal Fleet Reserve Instructions). If an R.N.R. man, state number of R.V. 2.

NOTED
12/10/38

C.N.S. 55
2M-2-37
N.S. 815-9-55

(OVER)

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

I, **Allan Ernest WIGHT**, 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* **for the term of seven years, 27th August, 1938**, 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 **30th** day of **August, 1938**.

Man's Signature in full
Allan Ernest Wight
Witness to Signature *W. J. Triske C.O.*

Attested before me this **30th** day of **August, 1938**.

[Signature]
Signature of a Commissioned Officer of the Naval Service

Date **30th August, 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.

[Signature]
COMMANDER.
Commanding Officer
Lt.-Col. RCAMC.
Medical Officer

II.—Certificate and Declaration for Boys

Date..... 193.....

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..... years' continuous and general service from the age of 18, in addition to whatever period may be necessary till he attains that age.

..... Commanding Officer
..... 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..... years' continuous and general service from the age of 18, provided my service should be so long required, in addition to whatever period may be necessary till I attain that age. And I do sincerely promise and swear (or solemnly declare) that I will be faithful and bear true allegiance to His Majesty.

..... Boy's Signature in full
Witness to Signature.....

Attested before me this..... day of..... 193.....

..... 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 indicated on the other side are also required when this Form is used.

I,....., now serving as a..... on board H. M. C. S....., who on the..... of..... 193.....

engaged to serve in the Naval Service of Canada for a period of §..... years, do hereby engage to serve for a further period**..... from ††..... 193..... provided my services should be so long required.

..... Man's Signature in full
..... 193.....

Witness,..... Commanding Officer

* 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.



DEPARTMENT OF NATIONAL DEFENCE
AUG 30 1938
N.S. CANADA

Can. B. 207
2M-2-36
N. S. 815-2-207

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

(R.C.N. OR RESERVE FORCES)

121162

12

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

I, the undersigned, have examined W. G. H. T. ALLAN ERNEST
candidate for entry as Vicqualling Assistant R.C.N.
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 Ottawa, Ont the 23rd of August 1938.

Of white race

[Signature]

Examining Medical Officer

Results of X-ray of chest satisfactory. Radiologist's report & certificate attached.

(Rank)

Capt. R. C. A. M. C.

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

(a) Age (Years / Months)	(b) Weight without Clothes (lbs.)	(c) Height with Bare Feet (ft. ins.)	(d) General Development	(e) Chest Girth (inches)	(f) Vision by Snellen's Types (i) Colour Vision (ii)	(g) Vaccinated or re-vaccinated for Small Pox (Date)	(h) Lungs, Heart, etc.	(i) Abdomen, Hernia, etc.	(j) Limbs and Joints	(k) Skin	(l) Ears and Hearing	(m) Testes, Varicocele, etc.	(n) Mouth, Teeth (No. deficient and No. defective, if any), Nose, Tonsils, etc.	(o) Anus, Hemorrhoids, etc.
18 yrs. 6 mo.	120	5' 4 3/4"	Fairly Good	(a) maximum 34 1/2 (b) minimum 32" (c) mean 33"	right eye 20/20 left eye 20/30 colour vision normal	Vaccinated in chest One mark, left arm	Lungs clear Heart normal	Abdomen negative Hernia absent	normal	clear	w.v. 20ft. both ears	Testes normal no varicocele	Two teeth deficient no teeth defective	Anus normal no hemorrhoids

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.

[Signature]
Signature of Candidate

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 slightly underweight for age & height

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

[Signature]
Examining Medical Officer

(Rank)

Capt.

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

RCN Aug. 41 "MARGAREE"

MEDALS AND MEMORIALS—DECEASED PERSONNEL

REGISTRATION No. DATE OF DESPATCH

(1) MEDALS
PERSON

ENTITLED TO Mrs. Gertrude Wight - Mother

ADDRESS: 126 LeBreton Street,
Ottawa, Ont.

(2) MEMORIAL CROSS
WIDOW

ADDRESS:

(3) MEMORIAL CROSS
MOTHER

Mrs. Gertrude Wight

ADDRESS: 126 Lebreton St., Ottawa, Ont.

MEMORIAL BAR

(1)
DATE DESP.....

REGN. NO.....

518

(2)

(3)

14-5-41

D OF D 22-10-40

DEPARTMENT OF VETERANS AFFAIRS

AWARDS (NAVY)

D.D.

WAR SERVICE RECORDS

WIGHT	Allan Ernest	N-40555	Sto. 2/c	FILE No.
SURNAME (IN BLOCK LETTERS)	CHRISTIAN NAMES	REG. No.	RANK ON DISCHARGE	C.A.S.F. UNIT

WAR SERVICE

BADGE

(CLASS)

No.

DATE DESPATCHED:

ADDRESS:

CAMPAIGN MEDALS	REGISTRATION NUMBER AN DATE DESPATCHED
1939-45 Star	7571
C.V.S.M. & Clasp	
War Medal	

(THE REVERSE TO BE USED FOR ESTATE PURPOSES)

40555

OFFICIAL NUMBER

NAME **WIGHT**
(Surname)

Allan E.
(Given Names)

OFFICIAL NUMBER 40555

Ship or Establishment	Rating	From			Remarks	Character	Efficiency	Date			Non-Sub. Rating	Qualified			Promoted	
		Day	Month	Year				Day	Month	Year		Day	Month	Year	Day	Year
Stadacona	Vict. Asst.	27	8	38		V.G.	Sat.	31	12	38						
Gaspé	"	24	1	39		V.G.	Sat.	31	12	39						
Stadacona	"	26	4	39		V.G.	Supr.	22	10	40						
	Stoker 2/c	14	11	39												
Fraser	"	15	3	40												
Margaree	"	6	9	40												
	DISCHARGED	22	10	40	DEAD--Missing, presumed dead											

GENERAL REMARKS

14-5-41 Memorial Cross issued to
Mother: Mrs. Gertrude Wight
126 LeBreton St.
Ottawa, Ont.

DATE OF BIRTH	PLACE	CIVIL	COLOR	RELI	RES	RESIDENCE	PREM	ENL.	RANK OR RATE ON ENLISTMENT							
BY MO. YR.									A	BR	RANK					
27	3	20	11	VXX	0	30	2	1	05	02	0	19	0	22	94	
ENLIST. DATE	ACT. DATE	DATE		DATE		DATE		DATE		DATE		DATE		DATE		
BY MO. YR.	BY MO. YR.	BY MO. YR.	BY MO. YR.	BY MO. YR.	BY MO. YR.	BY MO. YR.	BY MO. YR.	BY MO. YR.	BY MO. YR.	BY MO. YR.	BY MO. YR.	BY MO. YR.	BY MO. YR.	BY MO. YR.	BY MO. YR.	
27	10	8	38	27	08	38										
SENIORITY	STR.	NON-SUB	DATE		DATE		DATE		DATE		DATE		DATE		DATE	
BY MO. YR.	BY MO. YR.	BY MO. YR.	BY MO. YR.	BY MO. YR.	BY MO. YR.	BY MO. YR.	BY MO. YR.	BY MO. YR.	BY MO. YR.	BY MO. YR.	BY MO. YR.	BY MO. YR.	BY MO. YR.	BY MO. YR.	BY MO. YR.	BY MO. YR.
14	11	39	09													
										CHECKED		ER				

40555

OFFICIAL NUMBER

FILE NUMBER

62-W.310

OFFICIAL NUMBER 40555

NAME

WIGHT

(Surname)

Allan E.

(Given Names)

DATE OF BIRTH

7th March, 1920

PLACE OF BIRTH

Ottawa, Ont.

OCCUPATION Scholar

RELIGION

Church of England

EDUCATION

In Second Form

RESIDENCE AT TIME OF ENLISTMENT: Street and No.

126 Lebreton St.

Town

Ottawa

Province, etc.

Ont.

ENGAGEMENTS				DESCRIPTION					PREVIOUS SERVICE			
Date (in figures)			Period	Height	Hair	Eyes	Complexion	Marks or Scars	Served in	Rank or Rating	Dates	
Day	Month	Year									From	To
27	8	38	Seven years	5' 4 ³ / ₄ "	L.Brwn.	Blue	Fair					

NEXT OF KIN RELATIONSHIP (in pencil)

Mother

NAME (in pencil)

Mrs. Beatrice Wight

ADDRESS (in pencil): Street and No.

126 Lebreton St.

Town

Ottawa

Province, etc.

Ont.

MEDALS, CLASPS, HURT CERTIFICATES, PRIZE MONEY				EXAMINATIONS, CERTIFICATES, ETC.							
Date (in figures)			Particulars	Date (in figures)			Particulars	Date (in figures)			PARTICULARS
Day	Month	Year		Day	Month	Year		Day	Month	Year	
				3	9	38	P.S.T. (Good)				
				14	3	39	E.T. one				

BADGES, G.C. OR G.S.				BRIEF PARTICULARS OF WARRANT OR C.M. PUNISHMENTS AND C.P. CHARGES							
Date (in figures)			1st, 2nd or 3rd G.C. or G.S.	Granted Deprived Restored	SHIP OR ESTABLISHMENT	Wt. No.	Date (in figures)			BRIEF PARTICULARS OF OFFENCE	PUNISHMENT
Day	Month	Year					Day	Month	Year		

FILM
NO. WSN 5007-3-
DATE

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

SECOND CLASS FOR CONDUCT

From

To



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

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

CERTIFICATE of the Service of

Allan Ernest WIGHT

IN THE ROYAL CANADIAN NAVY

Port Division	<i>Halifax, N.S.</i>	Official Number <i>40555</i>
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Date of birth	<i>7th March, 1920.</i>	Nearest known Relative or Friend (To be noted in pencil)
Where born { Province	<i>Ontario.</i>	Name: <i>Gertrude</i>
{ Town or county	<i>Ottawa.</i>	Relationship: <i>Mother</i>
Trade brought up to	<i>Scholar.</i>	Address: <i>126 Le Breton St., Ottawa, Ont.</i>
Religious denomination	<i>Church of England.</i>	
Date passed swimming test	<i>3 Sep '38 - P.S.T. (V.K.I.) 10 NOV '38 - P.P.T. (Wood) with</i>	<i>28 Dec '38</i>
Man's signature on discharge to pension		

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

	Date of actually volunteering	Commencement of time	Period volunteered for	Date of actually volunteering	Commencement of time	Period volunteered for
1.	<i>27th August, 1938.</i>		<i>Seven years.</i>	5.		
2.				6.		
3.				7.		
4.				8.		

Medals, Clasps, Etc.

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

Description of Person	Stature		Chest, In.	Colour of			Marks, Wounds and Scars
	Feet	In.		Hair	Eyes	Complexion	
On entry as a boy.....							
On advancement to man's rating or on entry under 28 years.....	<i>5</i>	<i>4 3/4</i>	<i>33</i>	<i>high Brown</i>	<i>Blue</i>	<i>Fair</i>	<i>- Nil -</i>
On re-entry for C.S. or for Non-C.S. after attaining 28 years.....							
Further description if necessary.....							

P096980

62-2-310

Six copies to be rendered to Naval Service Headquarters

REPORT OF THE DEATH OF AN OFFICER, MAN OR BOY

59

H.M.C.S. STADACONA at HALIFAX, N. S.

Name Allan Ernest WIGHT (Christian names in full)

Rank of Rating Stoker Second Class Official No. 40555 (If unknown, date of first entry)

Place of Birth Ottawa, Ontario. Date of Birth 7th March, 1920.

Occupation in Civil Life Scholar Religion Church of England

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) 2 Years 2 Months

Date of Death 22nd October, 1940 Place of Death At Sea

Cause of Death Lost in collision of H.M.C.S. MARGAREE (If due to accident, violence, or enemy action, particulars to be stated briefly)

Nearest known relative or friend { Name Gertrude WIGHT Relationship Mother Address 126 Le Breton Street, Ottawa, Ont.

Date on which the above was informed by Ship Informed by N.S.H.Q.

Date on which death was registered with local Officials NK

In the case of Imperial Service men, whether Active Service, Pensioner or Reserve, date on which the prescribed return was rendered to the Registrar General in London, Edinburgh or Dublin, according to Nationality

Place of Burial (if known) Date of Burial (if known)

Location, Number, etc., of grave (if known)

Undertaker employed (if any)

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


Signature of J.P. Edwards, COMMANDER R.C.N., Commanding Officer, 8th November, 1940

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.

VICTUALLING ASSISTANT

No.  Name WIGHT, Allan E. Nationality Br.(Can) File F.D. 84

Date of Birth 7th March, 1920 Married Single Religion

Date of Application 28th June, 1938 Medically Examined

Address 126 Lebreton Street, Ottawa, Ontario.

Education In Second Form

Previous Experience Royal Canadian Artillery since May, 1936.

Remarks 6-7-38 A.N.S. Place on V.A. Roster.

Directions Re Entry 7-7-38 Letter to Applicant. 1938-1-25 (over)

2M 7-35 (M130)

Passing Certificate

This is to Certify

that Allan T. WIGHT,

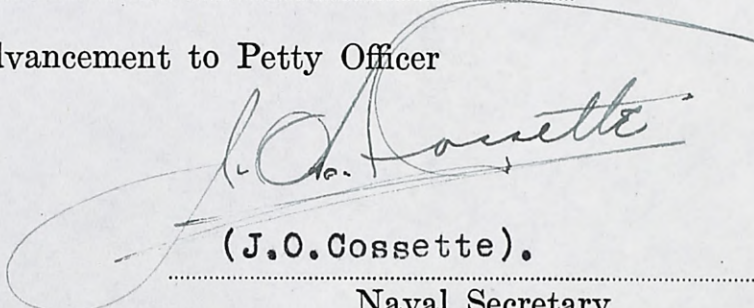
Rating Vict. Asst. Official Number 40555

has passed

THE EDUCATIONAL TEST, I

held on 14th March, 1939.

For advancement to Petty Officer


(J.O. Cossette).

Naval Secretary

Department of National Defence.

Ottawa, this 3rd day of May, 1939.

MMC/MVC

NS. 62-21-4 "W"
F.D. 84

8

- NAVAL SERVICE -


14th July, 1938.

Sir,-

With reference to your letter of recent date, I am directed to inform you that your chest measurement is $1\frac{1}{2}$ inches below the required physical standard for entry in the Royal Canadian Navy.

You should endeavour by means of exercise to improve your chest measurement, as otherwise you will not pass the required physical standard for entry when your name is reached and you are being considered for entry.

Yours truly,


(J. O'B. LeBlanc),
Assistant Naval Secretary.

Mr. Allan E. Wight,
126 LeBreton Street,
OTTAWA, Ontario.

AC-01

DEPARTMENT OF NATIONAL DEFENCE (Naval Service)

JUN 27 1938

C.N.S. 2417 3M-1-38 N.S. 815-9-2417

CANADA

APPLICATION FOR ENTRY IN THE ROYAL CANADIAN NAVY

4

Ottawa Ontario (Place)

June 28, 1938 (Date)

The Naval Secretary, Department of National Defence, OTTAWA.

SIR:— I hereby make formal application for entry in the Royal Canadian Navy, under a seven years' continuous service engagement as a... Victualling Assistant (Insert rating chosen)

I certify that the following particulars are in my own handwriting and are true in every respect:

- 1. Name (to be given in full in Block Letters) ALAN EARNEST WIGHT
2. Date of Birth (Birth Certificate or sworn declaration by parent or guardian must be attached) MARCH 7, 1920
3. Place of Birth. Town OTTAWA Province ONTARIO
4. Permanent Place of Residence. No. 126 Street LEBRETON Town OTTAWA Province ONTARIO
5. Are you a British Subject? YES
6. How long have you resided in Canada? 18 YEARS
7. What is your Mother Tongue? ENGLISH
8. What other language do you speak? NONE
9. Are you of the White Race? YES
10. Are you Single, Married or a Widower? SINGLE
11. How far advanced educationally are you? END OF SECOND YEAR HIGH SCHOOL OF COMMERCE.

cut of top 28/6/38

- 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? YES
14. If so, give details. ROYAL CANADIAN ARTILLERY L/BDR
15. Have you ever served in such forces? YES
16. If so, give dates and details. MAY 1936
17. Have you ever been discharged from His Majesty's Forces as medically unfit? NO
18. Have you ever offered to serve in His Majesty's Forces and been rejected? NO

- 19. Have you ever been convicted of a criminal offence? NO
20. What is your weight? 124 Height 5' 3" Chest Measurement (Not inflated) 31 1/2
21. Have you ever had fits? NO
22. Do you suffer from any deformity? NO
23. Have you suffered the loss of any fingers, toes, etc.? NO
24. Do you suffer from any disease? NO
25. Do you wear glasses? NO
26. Are you subject to any disability which might cause your rejection? NO

27. Give details...
28. Are you willing to be vaccinated and inoculated as considered necessary by the appropriate authorities? YES
Signature of Witness: P. Hamilton
Signature of Applicant: Alan Earnest Wight

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 OTTAWA, this 16 day of June, 1938, in the presence of P. Mrs. Gertrude Wight

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 OTTAWA, this 16 day of June, 1938, in the presence of P. Hamilton Signature of Witness, Alan Earnest Wight Signature of Candidate

N. S. 62-21-4. "W"
F. D. 84.

#16156

DEFENCE

JULY 1, 1938

N.S. 62-21-4 (W)
CANADA

126 LeBreton St.

July 1/38. 7084

2

Naval Secretary:

In reply to letter received June 29. I am enclosing two character references and a note stating: I have had no cause to have any criminal charge from the deputy Chief of Police.

I am very sorry to have put you to trouble over my carelessness.

D. 20.

Best not inflated 30 1/2".

Yours truly,

Allan C. Wright.

BF

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

588 2
 NAVY

DECEASED
MEMBER'S
NAME

Allan Ernest
 (CHRISTIAN NAMES)

WIGHT
 (SURNAME)

REGISTER NO. 10126

PAYEE
ADDRESS

Director of Estates,
 308 Sparks St.,
 Ottawa, Ont.

for service Estate of
 Allan E. WIGHT
 NS N-40555

FILE NO. NS N-40555

DATE 28 Sept./45

SERVICE NO. N-40555

FINAL RANK OR RATING Sto. 2/c

DATE OF TERMINATION OF OVERSEAS SERVICE 22 Oct./40

DATE OF DISCHARGE 22 Oct./40

A. TOTAL QUALIFYING SERVICE

NO. OF DAYS 409 EQUAL TO 13 COMPLETE PERIODS AT \$7.50

\$ 97.50

B. QUALIFYING OVERSEAS SERVICE

NO. OF DAYS 222 LESS 19 INELIGIBLE DAYS, EQUAL TO 203 DAYS @ 25c. PER DAY

\$ 50.75

C. SUPPLEMENT FOR OVERSEAS SERVICE

DAILY RATES AT DISCHARGE

PAY \$ 1.60
 SUBSISTENCE OR LODGING
 AND PROVISION ALLOWANCE \$ 1.45
 ADDITIONAL PAY HLM \$.10

OCT 25 1945

DEPENDENTS' ALLOWANCE 1/30 OF \$ Nil

TOTAL \$ 3.15 X 7 = \$ 22.05

NO. OF DAYS 222 X \$ 22.05

\$ 26.75

D. WAR SERVICE GRATUITY

\$ 175.00

E. DEDUCTIONS

OVERPAYMENT OF

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

OTHER DEDUCTIONS

\$ Nil

F. TOTAL AMOUNT PAYABLE

\$ 175.00

G. YOUR PORTION OF GRATUITY IS—

DEPENDENTS' ALLOWANCE IN ISSUE TO YOU \$ _____ OF \$

= \$ 175.00

TOTAL DEPENDENTS' ALLOWANCE IN ISSUE \$

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

PREPARED BY
 YN

TREASURY
 CHECKED BY
 DATE

for Dir Naval Pay SERVICE REPRESENTATIVE

AT

DISTRIBUTION OF SERVICE ESTATES

DME

Estates Form "P. 4"

NAVY

Name WIGHT Allan E. No. N 40555
Surname Christian Names

STO. 2/c HMCS Margaree 22-10-40
Rank Unit Date of Death

AMOUNT W.S.G. 175.00
 L.P.C. \$ 53.51

Date 14-11-45

Other Credits.....

Total..... 228.51
 Prev. dist. 53.51
 This dist. 175.00

SHARE	RELATIONSHIP	NAME AND ADDRESS	AMOUNT
1/11	father	Frank H. Wight, 126 LeBreton St., Ottawa, Ont.	15.91
1/11	mother	Mrs. Gertrude Wight, (As above)	15.91
1/11	brother	Frank W. Wight, 64 Pinhey Ave., Ottawa, Ont.	15.91
1/11	brother	James P. Wight, c/o J.D Bourgere, Brookside Road., Darien, Connecticut, U.S.A.	15.91
1/11	brother	(Cheque to have non-convertible endorsement) Robert P. Wight, 126 LeBreton St., Ottawa, Ont.	15.91
1/11	brother	Gordon T. Wight, (As above)	15.91
1/11	brother	George H. Wight, (As above)	15.91
1/11	brother	Albert H. Wight, (As above)	15.91
1/11	sister	Mrs. Emma Smith, Apt. A43, 100 E. Palisade Ave., Englewood N. Jersey, U.S.A.	15.91
1/11	sister	(Cheque to have non-convertible endorsement) Mrs. Dorothy Daoust, 35 Rockwood Ave., Ottawa, Ont.	15.91

P4. TO TREAS.
NOV 23 1945

AUTHORITY					
H.Q. F.E. No.	VOTE	PRI	H.Q. SUB.	OBJ.	AMOUNT
9999	831	00	50	000	\$175.00
CLASSIFIED BY			EXAMINED BY		
			For Chief Treasury Officer		

DISTRIBUTION APPROVED AND AUTHORIZED



(L. M. FIRTH) Colonel
 Director of Estates

AUDITED FOR PAYMENT

.....
 For Chief Treasury Officer

DISTRIBUTION OF SERVICE ESTATES

DME

Estates Form "P. 4"

NAVY

Name..... **WIGHT** **Allan E.** No. **N 40555**
 Surname Christian Names

STO. 2/c **HMCS Margaree** **22-10-40**
 Rank Unit Date of Death

AMOUNT **W.S.G.** **175.00**
 L.P.C.....\$ **53.51**

Date..... **14-11-45**

Other Credits.....
 Total..... **228.51**
 Prev. dist. **53.51**
 This dist. **175.00**

SHARE	RELATIONSHIP	NAME AND ADDRESS	AMOUNT
1/11	sister	Edna P. Wight, 126 LeBreton St., Ottawa, Ontario. (As next of kin entitled)	15.90

WSG

AUTHORITY					
H.Q. F.E. No.	VOTE	PRI	H.Q. SUB.	OBJ.	AMOUNT
9999	831	00	50	1 000	\$175.00
CLASSIFIED BY			EXAMINED BY		
			For Chief Treasury Officer		

DISTRIBUTION APPROVED AND AUTHORIZED

.....
 (L. M. FIRTH) Colonel
 Director of Estates

AUDITED FOR PAYMENT

.....
 For Chief Treasury Officer

THE CANADIAN PENSION COMMISSION

MEMORANDUM

To.....Pension Medical Examiner, OTTAWA.....

From.....Head Office.....

Ottawa, June 15, 1942.

M. 40555 Sto. 2, WIGHT, A. E.

P. & N. H. 1934-A

The Department of National Defence, **Naval Service**
officially reports that the marginally named was reported -

"LOST IN COLLISION OF H.M.C.S. "MARGAREE",
on the **22nd. October, 1940.** ~~XXXXXXXXXX~~ **on service**

His next of kin is reported as - **Mother -**
Mrs. Gertrude Wight,
126 LeBreton Street,
Ottawa, Ontario.

The Addressograph Stencil shows payment of Assigned Pay of

\$ 10.00

a month to - **Mother -**
Mrs. Gertrude Wight.

\$ 5.00

a month to - **London Life Ins. Co. Ltd.,**
Roy Building,
Halifax, N. S.

As no D.A. was payable the Commission will not take
any action unless a claim is filed.

/LR

E. Clowes,
for
Canadian Pension Commission.

W.S.G. Application No. 10126

TO: D.N.P.A. "G"

FILE NO. N.S. N-40555

"WAR SERVICE GRATUITY"

COMPUTATION OF SERVICE

<u>WIGHT, Allan Ernest</u>	<u>40555</u>	<u>Sto 2/c.</u>
SURNAME	OFFICIAL NUMBER	RANK OR RATING ON DISCHARGE
CHRISTIAN NAMES IN FULL		

CAUSE OF DISCHARGE: Dead - Margaret

Applicant - Mother - A.P. \$10.00

3
21
22
409

TOTAL SERVICE

Date of Active Service 10 Sep '39

Date of Discharge 22 Oct '40

Total No. of Days 409

Less non qualifying service _____

Total Days 409

OVERSEAS SERVICE

% Total No. of Days 222

Less non qualifying service _____

Total Days 222

Record of Service in other Forces (per Naval Records)

Branch of Service _____

Date of Active Service _____

Date of Discharge _____

& % Overleaf _____

Computed By J Hamilton

Checked By [Signature]

[Signature]
for (H.B. Money)
Payr. Cmdr, R.C.N.R.
Director of Personnel Records

DATE: JUN 14 1945

'00F'

NON QUALIFYING SERVICE

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

Total days

Date of Discharge _____
 Date of Postwar Release _____

(%)
OVERSEAS SERVICE:

Where Serving	From	To	No. of Days
Fraser Margaret }	15 Mch 145	22 Oct 140	222

RELATIONS 17
 & POST-WAR SERVICE 30
 31
 LOSS OF SERVICE 30
 31
 DATE OF DISCHARGE 31
 30
 DATE OF POSTWAR RELEASE 22
222

CHARACTER OF DISCHARGE _____
 IN LINE _____
 NUMBER OF DISCHARGE _____
 QUALIFYING SERVICE _____

CONVERSION OF SERVICE

DATE SERVICE CONVERTED

DATE OF SERVICE _____
 DATE OF SERVICE _____
 DATE OF SERVICE _____

STATEMENT OF ACCOUNT

55

True extract from the ledger of H.M.C.S. "MARGAREE" ending 31 Oct. 19 40

List 5A2 No. 14 (Name) WIGHT, ALLEN E. Rank Rating STO 2 No. 40555

When entered 1 Oct. Date of appearance 6 Sep. Whither discharged "DD"

		\$	c.			
CREDIT from former account.....		7	10			
Pay as <u>Sto 2</u> from <u>1 Oct.</u> to <u>31 Oct.</u> (<u>31</u> days at \$ <u>1.60</u> day)	(Rank Rating)	49	60			
" " " " " " " " " " " "						
" " " " " " " " " " " "						
" " " " " " " " " " " "						
Kit Upkeep Allowance.....		3	33			
OTHER CREDITS: <u>H.L.M.</u>		2	20			
<u>L.A.</u>		3	50			
<u>G.M.</u>		1	32			
Total credits.....		67	05			
DEBT from former account..... <u>Nil</u>						
PAYMENTS:—	1st	2nd	3rd	4th	5th	
	\$ c.	\$ c.	\$ c.	\$ c.	\$ c.	
1st month.....	8.94					Total..... 8.94
2nd month.....						Total.....
3rd month.....						Total.....
Allotment.....	<u>OCTOBER</u>					15.00
Pension deduction (Officers) charged to..... of.....						
Hospital stoppages.....						
Mulcts.....	<u>23/9/40</u>					1.60
OTHER CHARGES:.....						
Total debits						25 54
Balance Cr. of Dr.						41 51
(Balance Dr. to be shown in red)						

noted 20 paid 19/6/45

Number of days actually victualled during period mentioned above..... 22

NOT VICTUALLED	LENT, SICK OR LEAVE	INCLUSIVE DATE		No. OF DAYS	SHIP, HOSPITAL, etc., IN WHICH BORNE
		FROM	TO		
	<u>LENT</u>	<u>6 Sep.</u>	<u>30 Sep.</u>	<u>25</u>	<u>Drake</u>

Date 1st April 19 41


 PAYMASTER SUB/LIEUT. FOR ACCOUNTANT OFFICER R.C.N.V.R.

22

()



WIGHT, E.

Stoker. 2nd.

O. N. 40555

1	Bulova wrist watch. Gold, swiss made 17 jewels.	85	48.50
1	Watermans fountain pen.		2.00X
1	Leather suitcase.		5.00X
1	Kodak camera. size 120.		10.00X
1	Gold signet ring.		10.00 ^v
1	Shaving set and brushes.		7.00

43

82.50

The articles described above were all lost by me
whilst on service in HMCS "FRASER".

E. E. Wight

MEMORANDUM FOR

P. 64

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

Mrs. Gertrude Wight,
126 Le Breton St.,
Ottawa, Ontario.

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

and the following number quoted:—
H.Q. N.S. 62-W-310 FD.158.

64

DEPARTMENT OF NATIONAL DEFENCE
OTTAWA, ONT.

July 3rd, 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

Sto. 2 Allan Ernest WIGHT, O.No. 40555.

R.C.N. "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.

STATEMENT of the Names, Ages and Addresses, or Dates of Death, of all the relatives that the deceased ever had in each of the degrees specified below.

Degrees of Relationship	RELATIVES required to be accounted for	INFORMANT'S STATEMENT		
		NAME IN FULL of any Relative, if any, in each degree inquired for	Age	ADDRESS IN FULL of each surviving Relative, opposite his or her name, and date of death of each deceased relative
1	Widow of the Deceased.....	—		—
2	Children of the Deceased and dates of their Births.....	—		—
3	Father of the Deceased.....	Frank Harold Wight	57	126 LeBreton St.
4	Mother of the Deceased.....	Gertrude Wight	55	126 LeBreton St.
5	Brothers of the Deceased	Full Blood	Frank Willis 32 James Percy 29 George Hilliard 28 Albert Horace 23	144 Eccles St. Q.C.N.V.R. 126 LeBreton St. <i>overseas</i> 6' Havelock St. Ottawa East
		Half Blood	Robert Pooley 19 Gordon Theodore 18	126 LeBreton St. 126 LeBreton St.
6	Sisters of the Deceased	Full Blood	Emma Anton 37 Mrs. Dorothy Dorset 30 Edna Pearl Wight 17	225 East 54 St. New York City 90 Charlotte St. 126 LeBreton St.
		Half Blood		
7	Names of brothers or sisters (whether of the full or the half blood) of the Deceased, who are dead, and date of death of each.	Names and ages of their children (if any)	Address of their children	
	Ernie Gladys Jessica Florence Harold	died April 1st 1908 " August 21st 1910 " November 28th 1912 " July 19th 1915	—	

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).....	Mrs. Gerald Sheehan 47 Mrs. Hugh Beardon 42 Horace Wight 55 Percy Wight 48 Leslie Wight 44	19 Plymouth Ave 25 Highcroft Rd, Toronto Carling Ave Ottawa O'Connor St. 55 Grosvenor Ave.

Does not apply

W. Hamilton J. 10

10	What is the full name of the deceased?
11	Give the month and year of death.
12	Where and when were his parents born?
13	Was he ever married? If so, give date of marriage.
14	Did he leave a (later) Will?
15	Is there any other estate being made for Probate?
16	Where was deceased born?
17	In what Province, Country or Territory was he born last?
18	How long in each?
19	What was the nature of his business?
20	Did he own the house or home where he lived?
21	Did he ever state verbally, in writing or otherwise, that he intended to make his permanent home in Canada?
22	State your postal address in full.
23	Have the funeral expenses been paid?
24	Are there any outstanding bills or debts? If so, furnish full name and address of creditor and enclose his Bill of Exchange or Receipt. (See Note.)

NOTE.—Paragraph 24 refers to bills or debts purchased, etc.; the following particulars should be given:

1. Name and address of creditor.
2. Detailed statement of bill or debt.
3. At the end of his statement, as shown, he should state whether or not he is a creditor and if you are a creditor.

the relatives that the deceased

FULL PARTICULARS AS TO IDENTITY

NT

ADDRESS IN FULL of each surviving Relative, opposite his or her name, and date of death of each deceased relative

126 LeBreton St.

126 LeBreton St.

144 Eccles St. Q.R.N.V.R.

126 LeBreton St. Overseas

6' Havelock St. Ottawa East

144 Eccles St.

126 LeBreton St.

126 LeBreton St.

225 East 54 St. New York City

90 Charlotte St.

126 LeBreton St.

Address of their children

ING, THE FOLLOWING

ADDRESS IN FULL

19 Plymouth Ave

25 Highcroft Rd, Toronto

Carling Ave Ottawa

O'Connor St

55 Grosvenor Ave

amilton
J. 10

10	What is the full name of the deceased?	Allan Ernest Wright
11	Give the month and year of his birth.	March 7th. 1920.
12	Where and when were his parents married?	Oct. 8. 1903. Holy Trinity Church Ottawa East
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.	no.
15	Is there any other estate which will necessitate application being made for Probate or Letters of Administration?	no.

PARTICULARS OF DOMICILE

16	Where was deceased born?	Ottawa Canada,
17	In what Province, Country or State did he reside, and in which last?	until going overseas. Ottawa
18	How long in each?	Halifax
19	What was the nature of his employment?	stoker.
20	Did he own the house or homestead in which he lived? If so, where?	no
21	Did he ever state verbally, or in writing, where he intended to make his permanent home?	Ottawa.
22	State your postal address in full.	126 LeBreton St. Ottawa

PARTICULARS AS TO CLAIMS

23	Have the funeral expenses been paid? If so, by whom?	He was drowned at sea.
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.
2. Detailed statement of particulars of claim with date or dates incurred.
3. At the end of his statement the creditor should certify that the account is just and reasonable, that no payments save as shown, have been made thereon and that he holds no security therefor; the creditor should then sign same, and if you admit that the claim is correct, then you "O.K." the bill and sign same.

(PLEASE TURN OVER)

DECLARATION

*Insert degree of relationship, for example "Widow," "Father," "Brother," etc.

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

* mother of the deceased.

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

Gertrude Wight (Signature of Informant)

CERTIFICATE

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

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

Dated at Ottawa this 14th day of July 1941.

Signature of Clergyman, Priest or Magistrate } W Hamilton Qualification Justice of Peace

Address 22 Spruce St, Ottawa

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.

20 Did he own the house or homestead in which he lived? If so, where?

21 Did he ever state verbally, or in writing, where he intended to make his permanent home?

22 Set your postal address in full.

PARTICULARS AS TO CLAIMS

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

24 Are there any outstanding claims against the estate? If so, list them and advise of each creditor in the Statement opposite the full or assumed name of the creditor.

25 Are there any outstanding claims which have not been included in the Statement opposite? If so, list them and advise of each creditor in the Statement opposite the full or assumed name of the creditor.

26 Are there any outstanding claims which have not been included in the Statement opposite? If so, list them and advise of each creditor in the Statement opposite the full or assumed name of the creditor.

27 Are there any outstanding claims which have not been included in the Statement opposite? If so, list them and advise of each creditor in the Statement opposite the full or assumed name of the creditor.

28 Are there any outstanding claims which have not been included in the Statement opposite? If so, list them and advise of each creditor in the Statement opposite the full or assumed name of the creditor.

29 Are there any outstanding claims which have not been included in the Statement opposite? If so, list them and advise of each creditor in the Statement opposite the full or assumed name of the creditor.

30 Are there any outstanding claims which have not been included in the Statement opposite? If so, list them and advise of each creditor in the Statement opposite the full or assumed name of the creditor.

OFFICIAL COPY
NAVAL MESSAGE

S. 1320D
10 MIL-5-40 (5005)
N.S. 815-9-1320D

MRS. GERTRUDE WIGHT
To:
126 LEBRETON STREET
OTTAWA ONT.

From:

62-W-310

45

THE MINISTER OF NATIONAL DEFENCE DEEPLY REGRETS TO INFORM YOU
THAT YOUR SON ALLAN EARNEST WIGHT STOKER R.C.N. OFFICIAL
NO. 40555 IS MISSING, BELIEVED KILLED.

-/26

L/T

P/L

REC'D SDO
1715/26

GB

27-10-40

5544

62-20310

45A

November 1, 1940.

Dear Madam:

It is with deep regret that I must confirm the telegram sent out by the Minister of National Defence, reporting that your son, Allan Ernest Wight, Stoker II, O.N. 40555, 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.

Yours very truly,



(J. O. Cossette)
NAVAL SECRETARY.

Mrs. Gertrude Wight,
126 Lebreton St.,
OTTAWA, Ont.