TRAINOR ALFRED NOEL N40459

M13732

Sept. 17. 1986 Dept Tational Depue SEP 21; 536 Ottwow. Can 62-21-45. 76299 Some time ugo I sent in an application for service in the Royal Canaderio Nong of was to let you know my addess should I change Visas line of 606 Barrington St Halipha when I sent is very apprection. F. thought it best to let you know my process old reas, and of there is any possible of my joining now would you kindly Liverely yours. Alfred. 76. Sticknes (Trainor) 94 Berining ham & Helefor Nos MAIN FILE
CHARGED TO LUTY 299
SINCE
REC'D. CENTRAL REGISTRY.

SEP 26 1936
PEFERPED TO LUTY

PEFERPED T



This is to Certify

Rating Steward Official Number 40459.

THE EDUCATIONAL TEST, I

held on Sth November, 1938.

For advancement to Petty Officer

(J.O.Cossette).

Naval Secretary

Department of National Defence.

Ottawa, this 6th day of January, 193 9.

C.N.S. 2431 1M-8-37 N.S. 815-9-2431

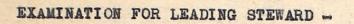
11780

REAT OF RESULT OF PROFESSIONAL EXAMINATION

FOR RATING OF Leading Steward

This form is to be used for examinations for all ratings, except in cases where special forms are provided, or where examinations of several ratings are held at one centre and the complete results are promulgated in one statement. The form is to be prepared in duplicate, original to be given to the Candidate and duplicate sent to his Depot.

AT COLUMN TO AT HOD	Squimait. 8
Name of Candidate (in full) Alfred Noel TRAINOR	
Present rating	61
Port Division and Official No. 40459 H.M.S	Fraser
Rating for which examined Leading Steward	If for M.A.A. insert date of ecommendation for examination
Has Candidate served the requisite period of time, is he fully e	ligible for examination, and has
he the necessary recommendations required by the Regu	ılations?
Yes.	
Remarks.—(Whether passed a V.G., Good or Fair Examination of his deficiency).	on, or, if not passed, particulars
Passed - Satisfactory	*
WE CONSIDER the Candidate to be qualified professionally for	
DATED on board H.M.S. "NAD	EN"
at Esquimalt, B.Con the 13th	of July 19 9
Paymaster Lieutenant	
Paymaster Lieut. Commander	Signatures and Ranks of Examining Officers
COMMANDER, R.C.N.	(as laid down by the Regulations)
Candidate's Signature in full Alfa	A Lag Leainer
Steparo.	1 1 10
(Duplicate). Forwarded. The necessary action has been taken on the Art. 606, Cl. 17 and Art. 1700, Cl. 17, K.R.	original coroncate in accordance with
To XXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXX	(MAL. Agnew)
The Naval Secretary, Dept. of Nat. Defence /c	COMMANDER.
N 2004/20 Sto 118/20	17th July,1939 193
N. 3004/29. Sta. 118/30.	S.—442.
(840) Wt. 9476/8031 12,500 5/37 S.E.R. Ltd. Gp. 671.	





ALFRED NOEL TRAINOR, O.N. 40459

	Maximum Marks	Marks Obtained	
Written Paper	80	58	
Carving	20	15	
Wine, Steward's Duties	40	30	
Table Attendance	20	18	
Mess Traps	20	12	
Volsting and care of Cabins	20	15	
TOTAL:	200	148	i para

Passed - 'Satisfactory'



ORIGINAL

STOP NOTICE

(Navy Allotments)

6-2 1939 F-129

		(Navy All	otments)		L	
LIST NUMBER	ALI	OTTOR'S SURNAME	CHRISTIAN	CHRISTIAN NAME		
D2 5 /25 "FRASER"	TRA	INOR	Alfred Noel	124	Steward- 4045 9	
	y. P	ARTICULARS OF ALLO	TMENT BEING STO	OPPED	100	
RATE PER MONTH	DATE (Inclusive to which Allotment is to be paid)	NAME OF ALLOTTEE	RELATIONSHIP TO ALLOTTOR		ADDRESS	
\$5.00	31st July, 1939.	A. Fleming & Co.		Chatham, K	ent,	
Rough Ledger	7 A A A		Stewar	A	lace Flace	
(When an Allotm on whose according be stopped, info	se of Stoppage ent in favour of a unt M.A. is cred ormation regarding hould be also ins	an Allottee, ited has to ng the stop-	equired Account anding Officer, H			
Department of (Nava	L Superintender National Defe I Service) a, Canada		Paymaster H.M.C.S.	"NADEN"	Accountant Officer August, 1939.	
FOR USE	AT HEADQUARTERS	ONLY	INITIALS	DATE		
1. Inde	ex Card Destroye	ed		129		

2. Noted in Birth Record Ledger.....

M./A. Card Destroyed.....
 Ledger Account Closed....



NATIONAL DEFENCE

NO 920 N.S. 62 1949 129

CANADA

H.Q. File No.

DECLARATION OF ALLOTMENT P0234

List and Number in Ledger	er	A	LLOTTOR		Rank or Rating	Official No.	Daily Rate of Pay
STADAC	ONA						
501/2	Surname Christian \ Names				I/STD. R.C.N.	40459	\$2.25 \$1.00 New Rate
Section A		A	LLOTMENT	NOW DECLA	RED		7
FULL NAME OF ALLOTTEE			Relationship	AI	DDRESS	Rate per Month to be charged on ledger	Month to commence Payable on last working day
SurnameB. Christian	ond Clothes	.Shop	Naval Outfitte	alifax	ington Str.	eet \$6.00 NEW	May/40
Section B				EXISTING AI		(Se	ee Note 1 below
Rate	NAME OF AI	LLOTTEE		ADDRESS	These	allotments are to be dis	sposed of as indicated e 2):—
Note 1:—If ther	re be no existing Allotment, "Increased or reduced as-Se	A.H.G. On the word 'N cotion A"; "T	Allotmen IL should be writte	t Ledgers	No.	he continu	eis/V
ENTERED IN	N FAIR LEDGER	B		ENTE	RED IN ROUGH LE	DOGER	
The allot date. The rare:—	tment now declare eduction or transf	d has be	en duly entere en duly appro	ed in the Fair an	manding Officer	rs with effect from and the reasons i	the appropriate for the alteration
THE NAVAL	SECRETARY.	,-	o se in a series of the second	PAY		ANTRCNVRJ	C
	rtment of National (Naval Service) Ottawa,		The state of the s	TOANTATT	for Ac	CONA	P
S. 63 15M—10-39 (2286) N.S. 815-9-63		1	DATE		7	1	

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

FOR USE AT HEADQUARTERS ONLY

of an end and an end of the second of	INITIALS	DATE
Declaration received at Headquarters	olf to the first	raisou pas
Declaration received at Headquarters Declaration examined	4	Intinappe
Approved		The state of the s
Index card made		
Allotment ledger sheet made		
Allotment ledger sheet checked		
Type plate made	MATURAL PARTIES AND THE PROPERTY OF	

MAIN FILE	CHARGED TO	SINCE	REC'D, CENTRAL REGISTRY	MAY 9 1940	REFERRED TO May.			
-----------	------------	-------	-------------------------	------------	------------------	--	--	--



13 th Mch.1941. P 31200

ORIGINAL

APPLICATION FOR PAYMENT OF MARRIAGE ALLOWANCE

List and Number in Ledger		NAME	ř		Rank or Rating	Official No.	Daily Rate of Pay
ST.LAURENT.	Surname	Frainor,			L/Stwd.	40459.	\$2.20 .75 MA
	Christian N	ames Alfred					
NAI	ME OF WII	TE XVIXXVIVARIDIANX			AD	DRESS	\n
	n	2			erman Rd oria,B.C	• E	NOTED ON STIMATE CARD rate /. 4/4/.
Christian Names	Mrs. D	CHILD OR CI	Maria Co	N			nitial VIR.
No		Sex	IIID IVE	Date of	Birth	Attains	majority
(1) Eleen E (2) (3) (3)	M/A. A	Female PPLICATIONS n Birth Record Led on M/A.Card				/	Mch.1957
	Ent'd	n Allotment Ledge	UNIONE PROPERTY	e correct.		July 1	
Signed in the pro-	esence of:	per diem	Signati	ire Wy	Legaing	Stewar	airl
		per diem100		J	+		
for plyment. MAR 13 194	theon suppor	ted with the necessary doc	//	Ca	nt Comma	ander R.	Steut
M.M.C.S. This amb	unt per day	nas been credited from	16th	March			19.140
at List		1 Y Ledger endi					
Allotmen with regulations	t of \$SQ.₃.O 	Oin force from the		18m	112.1	has 0	
70	t of National	Defence, AR 17 1941	1//	fo: M. C. S	r STADACO1	Aecou	ntant Öfficer.
W MAR 1	7 1941	Ottawa. HALIFAX, N. S. R. C. N. BARRACKS			Forwarded		Noted in Service

NOTE

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

FOR USE AT HEADQUARTERS ONLY	Initials	DATE
Application received		
Entered in Birth Record Ledger	Hart Para Small maken	
Entered on M/A Card		
Entered in Allotment Ledger		
		-





AIR MAIL

le le

19th September, 1942.

Dear Madam:

It is with deep regret that I must confirm the telegram of the 18th September from the Minister of National Defence for Naval Services informing you that your husband, Alfred Noel Trainor, Petty Officer Steward, O.N. 40459, R.C.N., is missing believed killed in action.

It is in the public interest that the name of his ship and the fact that she has been in action should not find its way to the enemy until such time as it is decided to publish the fact in a Naval Casualty List. It is therefore requested that this news, other than the fact that your husband is missing, may be treated as confidential.

Please allow me to express sincere sympathy with you in your bereavement on behalf of the Minister of National Defence for Naval Services, Chief of the Naval Staff, and the Officers and men of the Royal Canadian Navy, the high traditions of which your husband has helped to maintain.

Yours sincerely,

Deput Secretary, Naval Board.

Mrs. Doris E. Trainor, Box 1118, Armdale Post Office, HALIFAX, N.S.

5-

.

- NAVAL SERVICE -

3rd October, 1942.

Sir:

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

NAME, RANK/RATING NO.

TRAINOR, Alfred Noel. P.O. Steward, O.N. 40459, R.C.N. PLACE, DATE & CAUSE of DEATH

Missing, believed killed in action on the 13th of September, 1942. He was on board H.M.C.S. "OTTAWA". · NEXT OF KIN

Wife:
Mrs. Doris E. Trainor,
Box 1118,
Armdale Post Office,
HALIFAX, N.S.

ALLOTMENTS IN FORCE.

In favour of:

Mrs. Doris E. Trainor Box 1118 Armsdale P.O. Halifax N.S.

\$120.00

Amount.

m

Prudential Life Ins. Co. 620 Cathcart St., Montreal - \$6.00

WILL: No record.

Yours truly,

SECRETARY, NAVAL BOARD.

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

- NAVAL SERVICE -

62-4-129

14th Movember, 1942.

THIS IS TO CERTIFY that according to official information Alfred Noel Trainer, Petty Officer Steward, Official Mumber 40459. Royal Canadian Navy, is missing, believed killed in action to date the 13th of September, 1942. He was on board H.M.C.S. "OTTAWA" which has been reported lost.

SECRETARY, NAVAL BOARD

ACCOUNTS OF MEN DISCHARGED

62-T-129

Account of the Balance of Wages, the Sale of Clothes and Effects and the other Credits of Men Discharged to the P289823 Shore, D. D. or Run

Nome Trainer Alfred Retire To G	
Name Trainor, Alfred Rating PO S	
Official No. 40459 H.M.C.S. PTTAWA	List5911
Who* D.D. on the	19
Net sum due on ledger on account of Wages	\$ cts. 24 20
Proceeds of sale of Effects charged against Wages, brought from the other side	
Cash— Proceeds of sale of Effects, paid for in Cash, brought from the other side	15 00
Found amongst Effects # 25258 15 00 # Debts collected § cheque attached	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
Cash debited in the Accountant Officer's Cash Acct	
If in debt in ledger, amount to be stated (in red ink)	ер
Name of ship from which transferred	39 20
Total†ereditor	24 20
We hereby certify that we have every reason to believe that the above ac	count contains a
true statement of all wages, Effects, and other Credits or Debts on the Ledger	ofHMCS
Ottawa amounting to a net balance† creditor	
offwenty-four dollars Twenty	
Dated on board H.M.C.S. AVALON at ST J	
NFLD, this thirteenth day of Novem	ber 19 42
Approved A/Pay Ligut, Rommander, RCNV Pay Lieut RCNVR Commanding Officer.	ecountant Officer R Initials of the Assistant Accountant Officer
	ector's certificate
For Use at Headquarters. \$ctscredited on Inspe	color s certificate
For Use at Headquarters. \$ctscredited on Inspection	en e

of 60-16387. deposited to Naval Estates

STATEMENT OF ACCOUNT

When entered	כד הד						D. 17	Gor
-	F.D.	Date	of appearan	ce		Whither discharged		
							\$	c.
								80
(Rank Ra	ting)					ys at \$.2.65a day)		
						" .05 ") " .1.55 ")		
						" .50 ")		
						"		
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THER CREDITS	S:			•••••			••••	
						Total credits	454	75
			·		-	Total credits		
DEBT from former	r_account					<u></u> ,	15	05
PAYMENTS:-	1st	2nd	3rd	4th	5th			
	\$ c.	\$.c.	\$ c.	\$ c.	\$ c.			
st month	No.	Control of the Contro						
and month	15.50	V.A.				Total		
rd month	15.50					Total	2.2	00
Allotment	1	20,00	6.00 Ch	narged	July	Aug Sep	378	00 -
Pension deduction	(Officers) cha	rged to			of			
Hospital stoppages.								
Mulcts								
	 ES:							
	CS:	*						
	S:							
	SS:							
	R //	/				Total debits	430	55
Mulcts OTHER CHARGE LEDGERS	R W						430	55
OTHER CHARGE	R W				Balance	Total debits	430	55
LEDGERS	R W			(E	Balance I	Total debits Cr. or DTX	430	55
LEDGERS	R W			(E	Balance I	Total debits Cr. or DTX	430	55
LEDGERS Number of days ac	R W	lled during	period ment	(E	Balance I	Total debits Cr. or DTX	430	55
LEDGERS Number of days ac	R W tually victua	lled during	period ment	(Ecioned above	Balance I	Total debits Cr. or DTX Or. to be shown in red)	430	55
LEDGERS Vumber of days ac	R W tually victua	lled during	period ment	(Ecioned above	Balance I	Total debits Cr. or DTX Or. to be shown in red)	430	. 55
LEDGERS Number of days ac	R W tually victua	lled during	period ment	(Ecioned above	Balance I	Total debits Cr. or DTX Or. to be shown in red)	430	55
LEDGERS Number of days activity of the control of	R W tually victua	lled during	period ment	(Ecioned above	Balance I	Total debits Cr. or DTX Or. to be shown in red)	430	. 55

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



IN RE

The Hrudential

INSURANCE COMPANY OF AMERICA

HOME OFFICE: NEWARK, N. J.

Policy D.11 510 712 Alfred N. Trainor Your N.S. 62-T-129

62-T-129 December 10, 1942.

DANIEL A. MCCABE

Department of National Defence,

62 afred Noel

ALBERT F. JAQUES, SECOND VICE PRESIDENT RALPH T. HELLER, SUPERVISOR

WALTER R. DUNN, ASSISTANT SUPERVISOR ORDINARY CLAIM DEPARTMENT CHESTER A. VAN NOSTRAND, MANAGER

MARTIN W. BENNETT

ASSISTANT MANAGERS
MCCABE FRED R. GIBNEY

Attention: Deputy Secretary, Naval Board

Gentlemen:

Naval Service, Ottawa, Canada.

We thank you for your letter of December 6, 1942.

For the purposes of our policy, we believe that the line of territorial waters of the Dominion of Canada has been defined by Parliament for the purposes of the Customs Act, that is, the territorial waters of Canada mean the waters forming part of the territory of the Dominion of Canada and the waters adjacent to the Dominion within three marine miles thereof.

Therefore, if you are in a position to tell us whether or not H.M.C.S. "Ottawa" was lost in waters adjacent to the Dominion of Canada or the United States of America within three miles thereof, we will be in a position to establish our liability.

Please be assured that any information which you furnish will be held in strict confidence and will not be divulged to the public.

Yours truly,

Assistant Manager, Ordinary Claim Dept. CHARGED TOY DE REGISTRY AFFERGED TO PLIZA Strateger, i NATIONAL DEFENSE JAN 14 1943 H.Q. 27-129 GO9544 FID 3699 1943 14 Jan N. D. OTT Halifay IT.S 10 Jan. 11th /43. Hon. angus. L. Mª Wonald.
minister of National Defence. for naval. Service Eltava. Consda. Wear Sir, Some few month ago I dost my son. alfred . n. Trainor. P.O. Std. when his ship the altawa was lost. He was my only son. and only support. as I never rece any allowance from the Government. my son always: governe an allowance from his pay every month. now as . I am not well and chave to go for an aperation I will not be able to work for six or eight months. and as I will have no allowance. I am writing to ask you do you think there is any way. I could get a mothus allowance. I have no home & my run. only just where I work. Mr Mi Wonald would you please ans. and let me know if you can do engthing to help me out in the way of a mothers allowance.

In Mrs. Margaret Trainor Umdale. Po

Ch. Rev. P. F. Mortin. Halif af . Co. N. S

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REFER.	INIT	DA
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PIB		
DEP		
P.A.		

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WAIN FIL	SED TO	CENTRAL RE	JA: 14 1043	RED TO	
	CHARGED	d		REFERRED	A CONTRACTOR SECURITY CONT

H.Q.	1000
15M	(ENGLISH)-9-44
N.S.	7570-H.Q. 100

F. AMOUNT PAYABLE

AMOUNT

DATE

INSTALM.

AMOUNT

DATE

711.08

DEPARTMENT OF NATIONAL DEFENCE

10 NAVY ARMY ARMY AIR FORCE





STATEMENT OF WAR SERVICE GRATUITY eased member's Alfred Noel TRAINOR REGISTER NO. 910 Vee: Mrs. Christian NAMES) FILE NO. NSN-40459 (SURNAME) DATE 28 Feb/45 ADDRESS 1211 Alderman Rd. SERVICE NO. 40459 Victoria, B.C. FINAL RANK OR RATING P.O. Stwd. 13 Sep/42 DATE OF DISCHARGE 13 Sep/42 DATE OF TERMINATION OF OVERSEAS SERVICE A. TOTAL QUALIFYING SERVICE NO. OF DAYS 1100 EQUAL TO 36 COMPLETE PERIODS AT \$7.50 270.00 B. QUALIFYING OVERSEAS SERVICE
NO. OF DAYS
LESS
INELIGIE INCLIGIBLE DAYS, EQUAL TO 931 SEE PAR. 2 OVERLEAF FOR EXPLANATION 232.75 DAYS @ 25c. PER DAY SUB TOTAL C. SUPPLEMENT FOR OVERSEAS SERVICE DAILY RATES AT DISCHARGE \$2.65 PAY SUBSISTENCE OR LODGING AND PROVISION ALLOWANCE ADDITIONAL PAY H.L.M. \$.15 1 B. DEPENDENTS' ALLOWANCE 1/30 OF \$_ x7 = \$40.95 \$5.85 TOTAL xs 40.95 208.33 NO. OF DAYS 711.08 D. WAR SERVICE GRATUITY PAY AND ALLOWANCES \$
DEPENDENTS' ALLOWANCE
AND ASSIGNED PAY \$ E. DEDUCTIONS OVERPAYMENT OF NIL. OTHER DEDUCTIONS

MONTHLY INSTALMENTS OF \$

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

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

711.08

G. MONTHLY INSTALMENT NOT TO EXCEED AND ALLOWANCES \$

(THIS AMOUNT IS PAYABLE IN

X30

 5
 6
 7
 8
 9

 14
 15
 16
 17
 18

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.

	3.N - B
PREPARED BY CHECKED BY CHECKED BY DATE	F. F.
500	His has been
	SERVICE REPRESENTATIVE
for Altri Movel Pay.	ACCULING.



Department of National Defence

No. N. S. 62-T-129

Naval Service

Ottawa, Canada.

114

3rd October, 1942.

Sir: .

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



NAME, RANK/RATING NO.

TRAINOR, Alfred Noel, P.O. Steward, O.N. 40459, R.C.N.

PLACE, DATE & CAUSE of DEATH

Missing, believed killed in action on the 13th of September, 1942. He was on board H.M.C.S. "OTTAWA". · NEXT OF KIN

Wife:

Mrs. Doris E. Trainor, Box 1118, Armdale Post Office, HALIFAX, N.S.

ALLOTMENTS IN FORCE.

In favour of:

Box 1118 Armsdale P.O.

Amount.

Initials.

Mrs. Doris E. Trainor

Halifax N.S.

\$120.00

Prudential Life Ins. Co. 620 Cathcart St., Montreal P.Q.

\$6.00

WILL: No record.

Yours truly,

SECRETARY, NAVAL BOARD.

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

DIEMORANDUM FOR

Mrs. Doris E. Trainor. Box 1118, Armdale Post Office, Halifax, N.S.

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

THE SECRETARY,
DEPARTMENT OF NATIONAL DEFENCE,
OTTAWA, ONTARIO

ATTENTION: ADMINISTRATOR OF ESTATES

and the following number quoted:-

H.Q. 62-T-129 FD.164

DEPARTMENT OF NATIONAL DEFENCE OTTAWA, ONT.

October 13, 1942. 194

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

TRAINOR, Alfred Noel, P.O. Steward, No. O.N. 40459, R.C.N.

.....

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.

(H.R. Wade) Lt.-Cdr.,

for (L.M. Firth) Lt.-Col., 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.

	of			INFORMANT'S STA	NT NT	
ŕ	Degrees of Relationship	RELAT		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	Mrs. Doris Elizabet Grain	23	422 Craigflower Road Victoria B.E.
	2	Children of the dates of their	Deceased and Births	Eleen Elizabeth Trainon March 16/1940	2 yes 7 mont	
_	3	Father of the De	eceased			
	4	Mother of the D	eceased	Mrs. Margaret Trainor 1 Brother - do not know	dea	St. John the Babtiste Eles Melvelle Cove Is Roa armadale P.
ing	25 help	Brothers of the Deceased	Full Blood	1 Brother - do not know name.		Halif
13	som		Half Blood			
en and	Moche	Sisters of the Deceased	Full Blood	Bertha Trainor Florance Trainor	34	in Catholic Home Halifat - M.S.
in i	Z		Half Blood			
1	em.	Names of brothers of the full or the had ceased, who are dead of each.	or sisters (whether If blood) of the De- d, and date of death	Names and ages of their children (if any)		Address of their children
But I do no	you then	Winifre around works	d Irainos Sept. 1939 ne	Had one child whom cannot be located		

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
Grand-Parents of the Deceased			
Uncles and Aunts by blood of the Deceased (not Uncles and Aunts by marriage)	·	Age	,

10	What is the full name of the deceased?	alfred Noel Trainor
11	Give the month and year of his birth.	August 12 - 1916
12	Where and when were his parents married?	do not know
13	Was he ever married? If so, state exact place and date of marriage.	yes - Maval church-Esquimal 14th January 1939.
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?	Charlotte Town. Prince Edwards. Halifay - a short time in Victor
17	In what Province, Country or State did he reside, and in which last?	Halifay - a short time in Victore Halifay last Do not know how long in Holifa
18	How long in each?	he was about 3 yes and further regided
19	What was the nature of his employment?	P.O. stewart Navy
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?	Victoria 422 Craigflower Rd. Victoria B.C.
22	State your postal address in full.	422 Craigflower Rd.
	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, furnish full name and address of each Creditor in this space and enclose his Bill of Account. (See Note Below).	
	purchased, etc.; the following information to be embodied in all 1. Name and address of Creditor. 2. Detailed statement of particulars of claim with date or 3. At the end of his statement, the creditor should certify t	dates incurred. hat the account is just and reasonable, that no payments save holds no security therefor; the creditor should then sign same,

DECLARATION I hereby declare that the foregoing particulars are correct, and a true and complete statement etc. of all the relatives that the deceased ever had in the degrees inquired for; and that I am the * Widow of the deceased. N.B. To be signed in full in the presence of a Clergyman, Priest or Local Magistrate Mrs. Doris Elizabeth Signature of Informant

CERTIFICATE

I hereby certify that, to the best of my knowledge and belief..... *See above Mrs Doris Elystell [Name of Informant] is the * widow of the Deceased Learn above described, and I believe the above Declaration and the Statement of Relatives made by the Informant and signed in my presence to be complete and correct. Dated at Victoria 156. this 26th day of October 1942 Signature of Clergyman, } for for for Signature of Clergyman, } for for for Magistrate Qualification Minister Signature of Clergyman, } Address 561 Rayne are, Wittonia, B.C.

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.

I can not give any information as to his Brothers + sisters (as I know only of them. if you were to Write to Mrs. Margaret Trainor she could help you out much better than I. affred was brought up in a home so he did not know about his people until this last year or so. Which makes it hard to know very much about them. He only came to know his mother for the first time just sa (little) around 2 yrs.



MAVY

Name:	Surname			Christian	Names		No.:						
Rank	P.O. Stud	*	Ur	H.H.	C.S. "Ottom"		Dat	e of Death					
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							L.P.C\$	42.20					
		Date:		19-6	- T		Other Credits						
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Original signed by N. O. SEAGRAM

(L. M. Firth) Lt.-Colonel Administrator of Estates

AUDITED FOR PAYMENT

For Chief Treasury Officer

10M-5-43 (9861) H.Q. 1772-80-2

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CLASSIFIED BY

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EXAMINED BY

3.00

For Chief Treasury Officer

Bertrand





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

(R.C.N. OR RESERVE FORCES'

				(1)		RESER	VE FORG	ES)						
Note-	This C Defend	ertificate e, Ottawa	is to be completed.	d by the l	Examining	Officer a	nd forwar	ded to the	ne Naval	Secre	tary, D	epartme	ent of N	ational
and :	idate I belie	for en	dersigned, harders as	tema.	fit for	Re His Ma	N. jesty's	Service	e. He	en has	try signe	ed the	193	
			,					^	2.6.	Exam	nining	Medic	al Office	r
							(Rank))	cent		la	me		
	Thi	s exan	nination has b	een ma	de in ac	cordan	ce with	the Ir	struct	ions	for R	ecrui	ting.	
© Age (Years (Months	© Weight without	3 Height with Bare	General Development	Chest Girth	Vision by— S (i) Snellen's Types (ii) Colour Vision	Vaccinated or re- S vaccinated for Small Pox (Date)	S Lungs, Heart, etc.	E Abdomen, Hernia, etc.	E Limbs and Joints	Skin Skin	Ears and Hearing	Testes,	Mouth, Teeth (No.defi- cient and No. defective, if any), Nose, Tonsils, etc.	3 Anus, Hæmorrhoids, etc.
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not o	consid	erea o	f sufficient im	portane	e to ca	use IIIs		s. A		ien	ia	w	al Office	
						(Rank)							
										Om				

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

APPLICATION FOR, AND REPORT OF RESULT OF, PROFESSIONAL EXAMINATION

FOR RATING OF Petty Officer Steward.

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T.	LT I	LICH	11014	LOK	EXAMINA	TION

H.M.S. "St. Laurent".
Name of Candidate (in full) Alfred Trainor.
Present rating Leading Steward. Port Division and Official No. R.C.N. 40459.
Date of application for Examination
Date of recommendation for Examination (if for M.A.A.)
Date and particulars of previous failures
The candidate has served the requisite period of time, he is fully eligible fo examination, and has the necessary recommendations required by the Regulations. To "YES". (See original.) Captain.
II. RESULT OF EXAMINATION.
WE CONSIDER the Candidate to be qualified professionally for the rating of to the rating of to the rating of the state of
REMARKS:—(Whether passed a V.G., Good or Fair Examination, or if not passed, particulars of his deficiency.)
Fair - 160 (200.
DATED on board H.M.S. Hecla
at on the 20th of February 194!
las yunes. Parofdu Hors Hecla.
Wines - Pary du Hris Hecla. Signatures and Ranks of Examining Officers (as laid down by the Regulations)
Candidate's Signature in full Refeed Hosel Trains
(Duplicate). Forwarded. The necessary action has been taken on the original certificate in accordance with K.R. & A.I., Art. 606, Cl. 17 and Art. 1700, Cl. 17.
To the Commodore, Captain.
R.N. Barracks, H.M.S.
194
NOTE.—This form is to be used for examinations for all ratings, except in cases where special forms are provided, or where

examinations of several ratings are held at one centre and the complete results are promulgated in one statement. Applications are to be submitted to the Administrative Authority in duplicate, at least one week before the examination is due, together with Service Certificate (or Certified Copy) and History Sheet. On completion of the examination, the original form is to be given to the candidate and the duplicate sent to his Depot.

Where en	tered March 1st l tered Halifax evil	5				$A\ M\ E$	Where Born	Where Born b harlotte town. P& S.							
	Birth 14-8-1916 Entry 206/12 4		7	RAINO	P. C	Ulfred Noel.	Previous Oc	Where Born le harlotte town. P. J							
RATING	SHIP'S NAME	No. on Ship's Books	Date of Admission on Sick List	Date of Discharge from Sick List	No. of Day's Sick	DISEASE OR HURT	HOW DISPOSED OF	Surgeon of Ship's Initials	No. of Days in Hospital	If invalided, where? and when?	Medical Officer of Hospital's Initials	1910.)			
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4,000—Dec. 22-17.	. Req. 5006.											•			

Can. S. 1246 E. (Established Feb., 1922.)

Received from the Accountant Officer, HMCS"STADACONA", One (I) B.R. 97. (Manual for Officers'Stewards).

Imp. S. 1246 E.

OFFICERS, STEWARDS AND COOKS HISTORY SHEET

HALIFAX, N.S.

Full Name Alfred Noel T R A I N O R .

Official No. 40459

Note:—To be kept with the Service Certificate and filled up on termination of service in a particular ship or establishment.

To be handed to the rating on final discharge from the Service.

0		DA	TE	MESS IN WHICH	Capacity in which employed e.g., Admiral's Ch. Std.,	Remarks as to ability, whether recommended for Valet, Wine Steward, Messman, Steward, Admiral or Captain's Cook, etc.,	Whether recommended for advancement, if so,	Signature of
SHIP 1	RATING 2	From 3	To 4	EMPLOYED 5	Captain's Valet, W.R. Messman, Gun Room Cook, etc.	Ability to take charge of Staff 7	to what rating	Generating Officer
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Checked, Naval Service Headquarters

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

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H. M. C. S. "ST ADACONA".

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

	CHRISTIA	N AND SURNA	AME IN	FULL		NEXT OF KIN		1	PRESENT RATING	
lfred	Noel TR	AINOR.		- · · ·		er. Winifred Th Sturgeon, I		St	eward.	
DATE OF BIRTH*						PLACE OF BIRTH†			Name, Rank and Station of Recruiting Officer	
14th A	ugust,			Town	Queen:			Cree	ander W.B. ry, R.C.N. anding Offi "STADACONA	
		P	erson	al Description	at the Date	of this Documen	t			
Height	Chest	Hair	Eyes	Complexion	Wou	NDS, SCARS OR MARKS		igious nination	TRADE OR OCCUPATION	
10."	39.	Dop Bin	Blue	e, Fresh	l, Se.	neep,	1.	3	habourer	
Enga	ng date of agement or ngagement	3r	d Ma	arch, 193	7. n	d of Engage- nent or Re- ngagement	Seve	n Yes	rs.	
unteerin	g to en- re-engage	17t	h Ji	anuary,19		of entering present ship	3rd	March	1, 1937.	
ervice, w	hose answer	estions are to s are to be r	o be p	ut by the Coned hereon:—	nmanding C	nore for Continuou			e for Continuous	
				ur name and		Ye	s.		*	
. Are vou	ı a British s	ubiect? †				Ye	8.			
				British						
Have y Royal Militi or in	ou ever ser Naval Re a, Voluntee His Majesty	ved in the l serve, Army rs (Naval or v's Indian or	Navy, y, Arn Milita Color	Royal Fleet ny Reserve, ary), Territori nial Military F	Reserve, Marines, al Force, Forces, or	No				
. Do you Milita His M Reser	now belor ary), Territo Iajesty's Ar ve Force, or	ng to the Morial Force of my, or to an or to the R.C.	lilitia, or any y esta . Mou	Volunteers (Regiment or blished Naval nted Police? ‡	Naval or Corps in or Army	No		· · · · · · · · · · · · · · · · · · ·		
. Have y vice, reason	ou ever bee or discharge n of rejectio	n rejected as ed from it or n or discharg	s unfit n that ge, and	for His Maje account? If d date	sty's ser- sq. state No.	***		NC	rteD.	
Army duct?	or R.C. I	Mounted Po	olice o	m the Navy, on account of	No.					
. Are you	willing to	be vaccinate	ed or 1	re-vaccinated	and inocula		***************************************			
. Can yo	u swim?				,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	Ye	S.			
* When evid	dence of age is obt	ained on First Ent	ry, it sho	ould be attached to th	is Form.			Market and	a de la compania del compania del compania de la compania del compania de la compania de la compania del compania de la compania de la compania de la compania del compania	

† 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, Mailita, 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. (OVER)

C.N.S. 55 2M-3-32 N.S. 815-9-55

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 Alfred Noel TRAINOR., 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 Seven Years. from† 3rd March 193. 7., provided my service should be so long required. And I do sincerely promise and swear (or solemnly declare) that I will be faithful day of March 1937. and bear true allegiance to His Majesty. As witness my hand this 3rd Man's Signature in full chief Petty Officer.

Attested before me this 3rd day of Witness to Signature..... March 1937. Lieutenant, R.C.N. Signature of a Commissioned Officer of the Naval Service Date 3rd March 1937. 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. Commanding Officer . Medical Officer 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 thevears' continuous and general service from the age of 18, in addition boy should be entered for..... to whatever period may be necessary till he attains that age. ... Commanding OfficerMedical 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 foryears' 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....193...... Attested before me this......day of......d 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 licated on the her side are also quired when this now serving as a..... engaged to serve in the Naval Service of Canada for a period of §......years, do hereby 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.

DEPARTMENT OF NATIONAL DEFENCE

(Naval Service)

C.N.S. 2417 3M—2-35 N.S. 815-9-2417

902 APPLICATION FOR ENTRY IN THE ROYAL CANADIAN NAVY

	Malilar Nous Section
	(Place)
The Naval Secretary, Department of National Defence, OTTAWA.	January 14, 1936, 1 11, 193
Sir:—	62-21-4
I hereby make formal application for entry in the Roy	al Canadian Navy, under a seven years' continuous service
engagement as a ficers Steesard	rt rating chosen)
I certify that the following particulars are in my own ha	N III
1. Name (to be given in full in Block Letters) ALFR.	
2. Date of Birth (Birth Certificate, or sworn declaration by par	111111111111111111111111111111111111111
3. Place of Birth. Town Charlottetoion	
4. Permanent Place of Residence. No. 6.0.6 Street	Barrengton Street
Town Halifax , Province. 5. Are you a British Subject? Yes	
6. How long have you resided in Canada?	
7. What is your Mother Tongue?	
8. What other language do you speak?	
9. Are you of the White Race?	1:0
10. Are you Single, Married or a Widower?	1 VIII VI VI II
11. How far advanced educationally are you?(Certificates of School Authorities must be attached)	y same
certificate enclosed	
12. What practical experience have you had? (Details and certificates from employers, trade credentials, etc.,	nust be attached to substantiate employment reported.)
	4
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	4/0
18. Have you ever offered to serve in His Majesty's Forces and	d been rejected?
Why?	
19. Have you ever been convicted of a criminal offence? (Enclose two character references, one of which must confirm	n your answer to Question 19)
19. Have you ever been convicted of a criminal offence?	n your answer to Question 19) 102 Chest Measurement (Not inflated) 36
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19. Have you ever been convicted of a criminal offence? (Enclose two character references, one of which must confirm to the confirmal offence? 20. What is your weight? 21. Have you ever had fits? 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 to the confirmal and inoculated as considered as considered and inoculated as considere	rejection? rejection? red necessary by the appropriate authorities? Signature of Applicant. GUARDIAN OF CANDIDATES UNDER 21 YEARS OLD Defence the expenses incurred by that Department for d he, on arrival at such Base, fail to enrol for seven years' of the Department are within his own control. Signed and
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RCN Sept. 43 "OTTAWA" MEDALS AND MEMORIALS—DECEASED PERSONNEL REGISTRATION NO. DATE OF DESPATCH

-	MEDALIC		TATITION THE DUE
(1)	RSON ENTITLED TO	Stefanek (Re-married) Mrs. Doris E. Trainer - Widow	DATE DESP
	ADDRESS:	Box 1118, Armdale P.O., Halifax, N.S.	REGN. NO. 229
(2)	MEMORIAL CROSS WIDOW	847 Selkirk Ave., VICTORIA, B.C. Mrs. Doris E. Trainor	(2)
	ADDRESS:	Box 1118, Armdale P.O. Halifax, N.S.	25-11-42
(3)	MEMORIAL CROSS MOTHER	Mrs. Margaret Trainor	
	ADDRESS:	St. John the Baptist, Glebe Melvel Cove Isle Road, Armdale Halifax, N.S.	(3) 5 -1-43

D 07 D 70 2 10	D	OF	D	13-9-42
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AWARDS

NAVY

D.D.

WAR SERVICE RECORDS

TRAINOR ALF	red Noel	N-40459	P.O.Stwd.	FILE No.	
SURNAME (IN BLOCK LETTERS)	CHRISTIAN NAMES	REG. No.	RANK ON DISCHARGE	C,A.S.F. UNIT	

WAR SERVICE

BADGE

(CLASS)

No.

DEPARTMENT OF VETERANS AFFAIRS

DATE DESPATCHED:

ADDRESS:

CAMPAIGN MEDALS	REGISTRATION NUMB	ER AN DATE DESPATCHED
1939-45 Star	2176	
Atlantic Star		
C.V.S.M. & Clasp		
War Medal		
<u> </u>		
read to the second		
	(THE REVERSE TO BE	USED FOR ESTATE PURPOSES)