HEALE RENFRED CHARLES N2689 Imp.: S. 459.

The corner of this certificate is to be cut off whenever it is considered that the man's antecedents and character are such as to render his re-entry at any future time undesirable. Whenever the corner is cut off the fact is to be noted in the Ledger.

CERTIFICATE of the Service of

Renfred Charles HEALE.
in the Naval Service of Canada.

PORT DIVISION	P.C. 198	Hale	fax, v.	s	2.8	OFFICIAL N	имвек 2689.				
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Date of actually volunteering.	Commencer of time.	-	Period volunteering for	or.	Date Received.	. Nature of Decoration.					
DESCRIPTION OF PERSON		TATURE		colour or	r						
DESCRIPTION OF PERSON	Fe			Hair, g		MARKS	S, WOUNDS AND SCARS.				
On entry as a boy On advancement to man's ra	tina		Medium	Brown	Grey.	TARE.	-NIL-				
or on entry under 28 yea On re-entry for C.S. or for C.S. after attaining 28 yea	rs Ø	74	11	"	4						
Further description if necessary											

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Name Reafred Charles HEALE.

CHARACTER, ABILITY IN RATING, RECOMMENDATIONS FOR MEDAL AND GRATUITY (R.M.G.) SECOND CLASS FOR CONDUCTA ON 31ST DECEMBER EACH YEAR AND ON DISCHARGE FROM THE SERVICE INCLUSIVE DATES Ability in Rating noting Seaman's duty, e.g., Coxswain, &c. R.M.G. Captain's Signature Character Mrs. (Boy Sm2) 3apess Chillagh Fatt. (O.Smn) 31 Dec 35 (A.B) 3 Dec'36 31 plec : 38 (aB) 3/ Dec 3 9 Sat. (A.B.) V.S. 220ct 40. GOOD CONDUCT BADGES Days Date Date aminations and Notatio Time Forfeited

(Entered from Crabtree Mills, Que.)

NATIONAL DEFENCE

CONTINUOUS SERVICE ENGAGEMENT, OR RE-ENGAGEMENT

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

CHRISTIAN AND SURNA	ME IN FULL	NEXT OF KIN	PRESENT RATING
Renfred Charles HEA	LE.	Mother, Ruth. NameCrabtree Mills, AddressQue.	Boy Seaman.
DATE OF BIRTH*		PLACE OF BIRTH†	Name, Rank and Station of Recruiting Officer
4th.April,1917.		VERDUN.	Commander CRH Taylor, RCN., Commanding Officer, HMCS"STADACONA".
		QUEBEC.	HMCS"STADACONA".

-			Personal	Description at	the Date of this Documen	t		
Height	Chest	Hair	Eyes	Complexion	Wounds, Scars or Marks	Religious Denomination	TRADE OR OCCUPATION	
5*8"	33"	Brown	Grey	Medium	hil.	Church of England	Mechanic	
Eng	cing date gagement engagemen	or} 4t	h.April	,1935.	Period of Engage- ment or Re- engagement	rs CS.		
Date of actually vol- unteering to en- gage or re-engage 5th.January,1935.					Date of entering present ship	ary,1935.		

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.

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.

First Entry.

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?	
1	,

3. Nationality of parents—Father English. Mother Mother

4. 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 India or Colonial Military Forces, or in the R.C. Mounted Police? ‡...

5. 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? ‡.....

6. 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.....

7. Have you ever been discharged from the Navy, Marines, Army or R.C. Mounted Police on account of misconduct?

No.

No.

No.

No.

*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.

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

Declaration	expiration of their previous C. S. Engagement
I,the answers to the o	do solemnly declare that to the best of my knowledge and belief destions overleaf are true, and I do hereby agree to serve honestly and faithfully in the Naval
	from†
	ce to His Majesty. As witness my hand this
	Man's Signature in full
Witness to Signature	
Attested before	ne thisday of
	Signature of a Commissioned Officer of the Naval Service
	Date
Service of Canada, a	that we have examined the person named on the other side hereof as to his fitness for the Naval d we find as follows:—He is of perfectly sound and healthy constitution, free from all physical and intelligent; and we consider him in all respects fit for His Majesty's Service.
Same To	Medical Officer
	II—Certificate and Declaration for Boys
	Date5th. January, 1935
Service of Canada, a	that we have examined the boy named on the other side hereof as to his fitness for the Naval d we find as follows:—He is a well grown, stout, intelligent lad, of perfectly sound and healthy from all physical malformation, and we consider him in all respects fit for His Majesty's Service. his parents or guardian has been obtained in writing, and they are willing and desirous that the
	for. Seven years' continuous and general service from the age of 18, in addition ay be necessary till he attains that age. COMMANDER. Commanding Officer
	Difficulties Lieutenant - Commanding Officer
true and that I am: I am willing to general service from	captain. R.C.A. Medical Officer the best of my knowledge or belief the answers to the questions on the other side of this form are of indentured as an apprentice. Inter and serve in the Naval Service of Canada for
Witness to Signatur	Renfred & harles Tleale Boy's Signature in full seading Writer.
Attested before	Signature of a Commissioned Lieutenant/Commander. Signature of a Commissioned Officer of the Naval Service
T	III—Re-engagement for Continuous Service be executed by men who have not been out of the Service since the expiration of their first engagement
The particulars	
other side are also 1, required when this Form is used.	, now serving as a
	, who on the
	ne Naval Service of Canada for a period of §
engage to serve for a provided my service	further period from ¶ 193should be so long required.
	Man's Signature in full
e .	193
	wher in words) years," or "to complete (number) years for pension," or "until I attain the age of the engagement actually commences. the consent to be attached to this paper. (N.B.—Not required in the case of youths over 17 years of age.) unmber) years," or "to complete time for pension," or "until I attain the age of years," as the case may be necessary to the re-engagement, which must either be coincident with, or (when the re-engagement is ante-dated) earlier than the date of execution.

CAMPAIGN STARS, DEFENCE MEDAL, WAR M.

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NAVAL GENERAL SERVICE MEDAL Sen free harles RANK/RATING SERVICE SHIP AREA TO TO FROM DAYS FROM 10/9/32/10/11/34 64 are. Gaspe. 17/11/39 22/10/40 VERIFIED BY

VERIFICATION FORM
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DECEASED 22 October 1940 DEPARTMENT OF VETERANS AFFAIRS	AW.	ARDS	NAVY	D.D. WAR SERVICE RECORD
HEALE Renfred Charles	s	N-2689	А.В.	295905
SURNAME (IN BLOCK LETTERS) CHRIS	STIAN NAMES	REG. No.	RANK ON DISCHARGE	C.A.S.F. UNIT
WAR SERVICE BADGE (CLASS) No.	DATE D	ESPATCHED:		
ADDRESS:				
CAMPAIGN MEDALS	REGI	STRATION NUM	BER AN DATE D	ESPATCHED
1939-45 Star Defence Medal		14	428	
C.V.S.M. & Clasp War Medal				Banking a
	7, 7,		4.	-

DVA 806

(THE REVERSE TO BE USED FOR ESTATE PURPOSES)



CANADA 4 H

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

16713

Strike out "son" or "ward" as the case may I hereby certify that my son,* Toufred Charles Heals, has my full

consent (being himself willing) to enter the Naval Service of Canada for a period of seven years' continuous and general service, from the age of 18, in addition to whatever period may be necessary until he attains that age, agreeably to the King's Regulations.

He has not been in a Reformatory, nor has he been sentenced to imprisonment.

I declare that he has never had fits.

† No alteration or erasure is to be made in the date of birth given.

The date of the boy's birth is, † All Charles Consent to enter the Naval Service of Canada.

His Religious persuasion is, Pates and Canada.

His Religious persuasion is, Pate

In the case of a Guardian see other side.

§ The Boy and Parent or Guardian must sign in the presence of the witness to their sig-

Signed by the said [Here write | Most | Most

[OVER]

CERTIFICATE

1

§ Strike out "Parent" or "Guardian" as the case may be. I certify that I am personally acquainted with this Boys § Parent, and Guardian, and "Strike out "he" or am † aware** he has consented to the Boy's entry as above, and I believe the particulars of Parent or Guardian.
† The assertion of the stated herein to be true. boy himself should not be taken as sufficient warrant for this state- ment. Clergyman of the Parish.
or Slichau Resident Householder
Might Superintendant Occupation.
Dee 6 1934.
Particulars to be stated, if possible, in the case of a Boy whose Father is dead
Date of the Father's death
Place of death
Place of death
SignedMother.
Signed
Signed
Particulars to be stated, if possible, in the case of a Boy whose Parents are both dead
Particulars to be stated, if possible, in the case of a Boy whose Parents are both dead Date of Father's death

Signed

2689			FFICIAL NU	MBER	FIL	E NUMB	ER	62-	H. 204						OFF	FICIAL NUMBER	2689	
NAME,	(Surna	ame)			Re (C	enfred Siven Name	Cha:	rles.			- 41-1	DATE OI	F BIRT	н4	thApril,	1917.		
PLACE OF BIR	RTH VERDUN, P.									'ION	Mecha	nic.						
RESIDENCE A	T TIME OF ENLISTM	IENT: Street and I	ło								CRABTREE	MILLS				Quebec.		
Date (in figures)	ENGAGEMENTS	n		-	7-1-1-	***-1-	1	P	DESCRIPT		1 1		-			PREVIOUS SERVICE Rank	Dates	
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	2689	OFFICIAL NUMBER	NAME	Surr	HEAI	E Renfred Charles (Given Names)							OFFICIAL NUMBER 2689											
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MEMORANDUM FOR

 Mrs. Marlowe Heale,
 34 Kenyon Road,
 North End,
 PORTSMOUTH, England.

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

THE ADMINISTRATOR OF ESTATES,
DEPARTMENT OF NATIONAL DEFENCE,
OTTAWA, ONTARIO.

and the following number quoted:-

H.62-H-204 FD.24

DEPARTMENT OF NATIONAL DEFENCE OTTAWA, ONT.

	APRIL 15	194
For the purpose of recormedals or memorials available late	rd and in the event of there being le for distribution (according to la	(any balance of pay, w) on account of the
HEALE, Re	nfred Charles, Able Smn.	
No. 2689,	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, Local Magistrate, Commissioner for Oaths or Notary Public, who should be asked to complete and sign the Certificate. This form should then be returned to the above address.

(N.O. Songram) F/L.

for (L.M. Firth) Major

Administrator of Estates.



ANSWER IN FULL ALL APPLICABLE QUESTIONS

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	RELATIVES required to be accounted for		INFORMANT'S STA	TEMEN	T
Degrees of Relationship			NAME IN FULL of any Relative, if any, in each degree inquired for	Age	ADDRESS IN FULL of each surviving Relative, opposite his or her name, and date of death of each deceased relative
1	Widow of the D	eceased	MARLOWE FLORENCE HEALE	22	34 KENYON RD NORTHEND PORTSMOUTH
2	Children of the dates of their	Deceased and Births	RENFORD KEETH HEALE JULY 14 12 1941	10 Mont	34 KENYON RO NORTHEND PORTSMOUT ENGLAN
3	Father of the De	eceased	CIONEL HEALE	NOT	CRABTREE WILLS SOLICITE P. 200 BEC CANADI
4	Mother of the I	Deceased	RUTH HEALE	NOT	TOLIETTE
5	Brothers of the Deceased	Full Blood	TACK HEALE WILLIAM HEALE	NOT KNOW KNOW	JOLIETTE .
		Half Blood			
6	Sisters of the Deceased	Full Blood	EVA MYRTLE } HEALE BETTY	NOT	CRABTREE WILLS N JOLIETTE P. QUEBEC
3.		Half Blood			
7	Names of brothers of the full or the hi ceased, who are dea of each.	or sisters (whether alf blood) of the De- d, and date of death	Names and ages of their children (if any)		Address of their children

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?	RENFORD CHARLES HEALE
11	Give the month and year of his birth.	APRIL 4 1914.
12	Where and when were his parents married?	
13	If deceased was married, state place and date of marriage.	REGISTER OFFICE COUNTY BOROUGH PORTSMOUTH
14	Did he leave a Will? If so, a copy should be attached hereto.	No.
15	Did he leave a bank account? If so, give full particulars.	NO.
16	Is there any other estate which will necessitate application being made for Probate of the Will or Letters of Administration of the estate?	NO
17	State your own postal address in full.	34 KENYON RO NORTHEND PORTSMOUTH ENGLAND

PARTICULARS OF DOMICILE

18	Where was deceased born?	CRABTREE MILLS JOLIETTE P. QUEBEC CANADA.
. 19	State, in order, the Province (or State) and country in which the deceased resided and the period of time in each, and in which last.	ENGLAND.
20	What was the nature of his employment?	ROYAL CANADIAN NAVY.
21	Did he own the premises in which he lived? If so, where?	NO
22	Did he ever state verbally, or in writing, where he intended to make his permanent home?	CANADA.

OTHER PARTICULARS

23	Did the deceased after enlistment incur any debts for:— (a) His own separate board and lodging while on service. (b) Service clothing and equipment. An itemized account for each such debt should be attached hereto, and if same is correct you should mark the bill "approved" and sign same. If believed incorrect, give particulars.	No
24	Have you or any other relative paid the funeral expenses or any part thereof? If so, attach itemized accounts showing amount paid, and by whom.	NO.
	(Note:—The Government pays funeral expenses within the a and burial is made Overseas as well as where death occurs and bu those expenses the Government will reimburse such relative to the amount of such expenses in excess of those authorized in the Regula against the service estate of the deceased.)	rial is made in Canada, and if a relative has already paid extent of the amount authorized in the Regulations. Any

DECLARATION



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

NIDOW of the deceased.

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

Martine Flerence Heale Signature of Informant

CERTIFICATE

	I hereby certi	fy that, to the best of		ge and belief		
*See above		Name of Informant and I believe the ab	} is the *		16	
		ned in my presence t				A Tigle
Date	ed at	this	1			19
Signature of C Priest, Ma Commission Notary Pul	Clergyman, agistrate, her or blic	Annual and the Annual and annual	Quali	fication		
	Add	ress		****		

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 and age of each surviving Relative enquired after is stated in its proper place in the Statement opposite.

USE SPACE BELOW FOR ANY ADDITIONAL REMARKS YOU MAY WISH TO MAKE

Jean dir,

I have filled in this form to my
ability, but seems as how my husbands please of
our all in banada, I cannot give dates of
with ite: I was married to my husband
here in England, but have done my best
to put the statements correct to the
best of my knowledge

Yours Incerely

y I Heale



MAYY

Name: Surnam		No.: 2689	
A.B. SIN.	Unit	Date of Death	
	AM	OUNT	
		L.P.C\$ 40.75	
	Date:	Other Credits	
		Total 40.75	

SHARE	RELATIONSHIP	NAME AND ADDRESS	AMOUNT
Part	Creditor	Barnetts, 17 St. Davids Road, Southsea, Portsmouth, at par \$ 10.73 England.	\$ 9.85
Bel.	Widow	Barnetts, 17 St. Davids Road, Southsea, Portsmouth, at par \$ 10.73 England. Mrs. Marlove Heale, 34 Kenyon Road. North End. Portsmouth, at par \$ 33.64 England.	\$ 30.90
		(1/2 in community of property) (1/2 for benefit of 1 minor)	
		2 + 3 3	
		2 1834	
	-1	9	

For Chief Treasury Officer

H.Q. F.E. No.	VOTE	PRI	H.Q. SUB.	овј.	AMOUNT
9999	831	00	50	000	40.75
LASSIFIE	D BY		EXAM	INED BY	

DISTRIBUTION APPROVED AND AUTHORIZED

Original signed by L. M. FIRTH

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

AUDITED FOR PAYMENT

Bertrand For Chief Treasury Officer

25M—9-43 (1913) H.Q. 1772-80-2

DEPARTMENT OF NATIONAL DE NAVY ARMY STATEMENT OF WAR SERVICE GRA DECEASED MEMBER'S Renfred Charles HEALE NAME REGIST (CHRISTIAN NAMES) (SURNAME) Mrs. Marlowe Florence UNSWORTH, PAYEE DAT 24 Lefeyre Rd., ADDRESS SERVICE NO. Bow, London E. 3, ENGLAND. FINAL RANK OR RATING DATE OF TERMINATION OF OVERSEAS SERVICE 22 Oct 40 DATE OF DISCHARGE 22 A. TOTAL QUALIFYING SERVICE COMPLETE PERIODS AT \$7.50 B. QUALIFYING OVERSEAS SERVICE
NO. OF DAYS
LESS INELIGIB INELIGIBLE DAYS, EQUAL TO 386 DAYS @ 25C. PER DAY C. SUPPLEMENT FOR OVERSEAS SERVICE DAILY RATES AT DISCHARGE SUBSISTENCE OR LODGING AND PROVISION ALLOWANCE ADDITIONAL PAY S.T. DEPENDENTS' ALLOWANCE 1/30 OF \$ M.A. TOTAL 67.08 NO OF DAYS 261.08 D. WAR SERVICE GRATUITY PAY AND ALLOWANCES \$
DEPENDENTS' ALLOWANCE
AND ASSIGNED PAY \$ E. DEDUCTIONS OVERPAYMENT OF OTHER DEDUCTIONS 261.08 F. TOTAL AMOUNT PAYABLE G. YOUR PORTION OF GRATUITY IS-_s261.08 DEPENDENTS' ALLOWANCE IN ISSUE TO YOU \$_ TOTAL DEPENDENTS' ALLOWANCE IN ISSUE \$ 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. TREASURY

PREPARED BY CHECKED BY

RJ CHECKED BY

SERVICE REPRESENTATIVE

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

W,S.G. Application No. 12244 T FILE NO. N.S. N-2689 T

"WAR SERVICE GRATUITY"

COMPUTATION OF SERVICE

HEALE, Ren	CHRISTIAN L'ANES	V-2689 OFFICIAL	RANK OR RATING
	IN FULL	NUMBER	ON DISCHARGE
CAUSE OF DISCHARGE:	Automorphism Administration At an	rgaree)	
applicant-	widow -		receptoffens
Remarie	A.	418	
	TOTAL SERVICE	408	
Date of Active Servic	10 Sept 39 4	409	
Date of Discharge	22 oct 40 1	409	
Total No. of Days	409 4		
# Less non qualifying service	Nin	Tot	al Days 409
	CVERSEAS SERVICE		KIL
% Total No. of Days	405 4		
# Less non qualifying service	NiL	Tot	al Days 405
SPERIOR SERVINE		20	To. of Dega
Record of Service in	other Forces (per Na	val Records)	
Branch of Service	N		
Date of Active Service	в		
Date of Discharge			
# & % Overleaf			
	8		
N V		u u	
Computed By Winot	by Troetor	N-	
Checked By	June of	1	
4		Mate	
	A	for (H.B. Mon	
JUL 1 1 1945	NAME OF .	Payr. Cmdr. R.C Director of Personn	

200

NON QUALIFYING SERVICE

(#) Date	Reason	No. of Days_	l isoprie
II .	II .	Tor (MIZ - Mode	A) 1
ıı ,	11	Make +	
Minacked by	11	ı,	
narousey Sh	II .	, п	
n .	n ·	6 14	
11	11	"	
A W & CANDYART		Total days	
Date of blackerse			
Date of Active Service			
(%)			
OVERSHAS SERVICE:	ther Toross (per Na	ral Apourds)	
Where Serving	From	<u>To</u>	No. of Days
gaspe -	10 Sept 39 4	12 NOV 397	644
V		1 4n 1	3414
Victory "	17 NOV 39"	22 00 40	4054
Vernon 1			
Temproke 11		20\$1	N DELLE
margarei)			
Date of Dischage	Annual Control Control Control		
Date of Active Service	Market and the Commence of Market Commen		
	WORVE AREATON		
		and the second	
73	418		***********
63		the state of the s	
14	340	nontrivia.	cu nightanna
2027774	341	ON TOLVE	SAME ON CONTRA

POMPTINE OF SERVINGS PANDS

FILE W. P.S.

W.S.O. Application Mr.

C.N.S. 2032 400-11-33 (M947) N.S. 815-032/ NAME Renfred Charles H E A L E. O.N. 2659.	Sub. Rating AB. Seniority	SHIP Margaree
File No. 3-H-30 Religion C. of E. Division Date of Birth 4051.1917	Non Sub. Rating S. 7.7	Date Q. or R. Q. 14 Dec.37
Date Commencement Time 4 apl. 1935.		
Present Engagement Seriew Years. Date Expires 3 apr. 1942	Next of Kin mother & Address Crapture mills	the lett, colors
No. of Badges Date due Next Progressive Due	for Next Hapl H3	117 ,
Date Entry in Ship NK From Course in MK	Date Discharged	
Passed Professionally	Passed Educationally E.T.F. Date 5 mek. 35	
Special Recommendations or Requests P. 7. (vg) 170	Tan 35.	

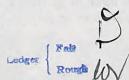
ACCOUNTS OF MEN DISCHARGED

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

Name. RE NFREW HEALE	Rating A.B.	
Official No. 2689 H.M.C.S. "MAR	GAREE"	List 5-2/96
Who* was "DD"	on the 22nd October	19. 40
Net sum due on ledger on account of Wages		* cts.
Proceeds of sale of Effects charged against Wages,	brought from the other side	NIL
Савн— Proceeds of sale of Effects, paid for in Cash, b from the other side	rought s cts.	
Found amongst Effects	NIL	
Debts collected §	n I r	
Cash debited in the Accountant Officer's Cash Acc	et	NIL
If in debt in ledger, amount to be stated (in red in FORTY-NINE.		127 88
Rate of allotment (in words)THREE&THRE	charged to	
Name of ship from which transferred	. "MARGAREE"	
Total†B	LANCE DEBTOR	127 88
We hereby certify that we have every reason	to believe that the above acco	ount contains a
We hereby certify that we have every reason true statement of all wages, Effects, and other Cre "MARGAREE" amounting to a net bal	edits or Debts on the Ledger of	
"MARGAREE" amounting to a net bal	edits or Debts on the Ledger of DEBTOR ance† EIGHTY EIGH	H.M.C.S
"MARGAREE" amounting to a net bal	edits or Debts on the Ledger of DEBTOR ance† EIGHTY EIGH	H.M.C.S
"MARGAREE" amounting to a net bal	edits or Debts on the Ledger of DEBTOR ance† EIGHTY EIGH	H.M.C.S
"MARGAREE" amounting to a net bal One HUNDRED AND TWENTY/SEVI Dated on board H.M.C.S. "STADACONA"	edits or Debts on the Ledger of DEBTOR ance† EIGHTY EIGH dollars HALL at HALL day of MARCH	H.M.C.S
"MARGAREE" amounting to a net ball ofONE HUNDRED AND TWENTY/SEVIOR Dated on board H.M.C.S. "STADACONA" NOVA SCOTIA this	edits or Debts on the Ledger of DEBTOR ance† EIGHTY EIGH ALL ALL MARCH Bull-Lieutenant, RC1	H.M.C.S HT cents. IFAX,
"MARGAREE" amounting to a net ball ofONE HUNDRED AND TWENTY/SEVIOR Dated on board H.M.C.S. "STADACONA" NOVA SCOTIA this	edits or Debts on the Ledger of DEBTOR ance† EIGHTY EIGH dollars HALL at HALL day of MARCH FOR Bub-Lieutenant, RCI	H.M.C.S IT cents. IFAX, 19.41. We tant Officer Accountant Officer
"MARGAREE" amounting to a net ball ofONE HUNDRED AND TWENTY/SEVIOR Dated on board H.M.C.S. "STADACONA" NOVA SCOTIA this	DEBTOR ance† EIGHTY EIGH At HALL day of MARCH Buy-Lieutenant Rej	H.M.C.S IT cents. IFAX, 19.41. We tant Officer Accountant Officer
"MARGAREE" amounting to a net ball ofONE HUNDRED AND TWENTY/SEVIOR Dated on board H.M.C.S. "STADACONA" NOVA SCOTIA this	DEBTOR ance† EIGHTY EIGH At HALL day of MARCH FOR Bull-Lieutenant, Rej manding Officer.	H.M.C.S IT cents. IFAX, 19.41. We tant Officer Accountant Officer

C.N.S. 46

10м—10-40 (7450) H.Q. N.S. 815-9-45



STATEMENT OF ACCOUNT

104

				6+h	Com	Rating A.B. N		
When entered	n sep.	Date	e of appearan	nceOull	2eb•	Whither discharged		מת
					,		\$	c.
CREDIT from form	er account							
Pay as A.B. (Rank Rat	fro	m 6th 8	Sep. to 3	1st Oct	•(56 _{day}	vs at \$ 1 • 85a day).		
" S.T.		11 1	" " "	11	(56	" •10 ")}	112	00
" 1 GCB		11	" " "	113	. 56	" •05 ")		
"			"		(" ")		
"		;	"		(" ")		
Kit Upkeep Allowan	ice							
	F	H. L. M					5	33
		1 & 0						2)
						Total credits	127	91
			nil					
DEBT from former	account		1122			1		
PAYMENTS:—	1st	2nd	3rd	4th	5th			
÷	\$ c.	\$ c.	\$ c.	\$ c.	\$ c.		00	7.0-
st month	8.94	8.94	4.47			Total	22	55
and month				•••••		Total		
ord month						. Total		
Allotment OC	tober						69	00
Pension deduction (Officers) cha	rged to			of			
Hospital stoppages								
Mulcts						24	00	
viuicts	s:H.M.	S. PEM	BROKE				71	44
		CEMBER A	RREARS .	ALLOTTM	ENTS		69	00
	SEPT							
	SEPI						10000000	
	SEPI							
	SEP					Total debits	XXX 255	X&& 79
OTHER CHARGE	SEP				Balance @		127	79 88

Number of days actually victualled during period mentioned above.

NOT VICTUALLED

LENT, SICK OR	INCLUSI	VE DATE	No. OF	SHIP HOSPITAL etc			
LEAVE	FROM	то	DAYS	SHIP, HOSPITAL, etc., IN WHICH BORNE			
DUTY	6 Sep.	6 Sep.	1				
11	12 Sep .	14 Sep.	3				
ABSENCE	5 Oct	6 Oct	2				

Date 1st APRIL 1941

Paymaster Sub/Lieut. R.C.N.V.R.

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

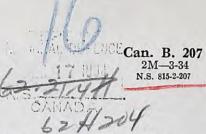
Boy (Seaman Class) No. Name HEALE, Renfred, Charles Nationality Can. File F.D. 131 Date of Birth April 4, 1917. Married 3. Religion Date of Application July 22,1933. Medically Examined 7/12/34 00 Address Crabtree Mills, Quebec. Grade X Previous Experience Remarks 27-7-33. N.S.O. Put on roster. Directions Re Entry 28-7-33. Ir. to applicant. 3/2/24 have medular 2m-1-31-(M572) Final Disposition.....

	111 E
QUESTIONNAIRE FOR CANDIDATES FOR ENTRY	1 1933
(Note.—Reply to question 1 to be in Block Letters. Replies to the difference of the Candidate 125	ADA e in H204
1. Name (in full) RENFRED CHARLESS HEALE	
*Birth Certificate, declaration by parents or Afficiavity is to date of birth must be attached. 3. Permanent place of residence of tabliful Mulls. Such	9884
4. How long resident in Canada? Always (Address in full)	
5. Are you a Brittish Subject? Yes	
6. Are you single, married or a widower? Single.	
7. In what capacity do you wish to engage? Victualling assistant of where vacancy occurs, 8. How far advanced educationally are you? bertificate attached	7.7
*Attach certificate, diploma, etc, if any. 9. Statement of present and previous employment. (Details of all previous employment should b	e given)
*Attach any testimonials or recommondations from employers.	
10. Do you belong to any Naval, Military Reserve or Territorial Force?	
11. Have you ever served in such forces? Give dates and details	
12. Have you ever been discharged from any of His Majesty's Forces as medically unfit?	
13. Have you ever offered to serve in any of His Majesty's Forces and been rejected? No. 14. What is your weight? /25 lbs.	
15. What is your height? 5ft.9/2 16. What is your chest measurement? (Not inflated) 33"	
16. What is your chest measurement? (Not inflated) 3.3"	
17. Are you free from all physical defects and malformation, and not subject to fits? Mealth	
18. Are you willing to be vaccinated and inoculated as considered necessary by the appr	opriate
authorities? Jes. 19. If accepted and sent at Government expense to a Naval Base, do you agree to join the Roya dian Navy for seven years' continuous and general service? Should you fail to do so for any within your own control, do you agree to refund to the Department of National Defence the	reason
incurred by that Department for your transportation to the Naval Base?	
I HEREBY DECLARE that the above answers ara true in every respect.	
Signature R. b. Heale	
har tree Mills	Que
99 - 1, 1, 1933	ALINESTI.
7. W. annundale Witness to Signature Address W. M.	

*Note.—The Certificates, Recommendations, etc., called for in questions 2, 8 and 9 must be attached, otherwise your application can *not* be considered.

C.N.S. 2417.





CERTIFICATE OF MEDICAL EXAMINATION FOR THE ENTRY OF OFFICERS, MEN AND BOYS FOR THE NAVAL SERVICE OF CANADA (R.C.N. OR RESERVE EXAMINATION FOR THE ENTRY OF OFFICERS, MEN AND

I, t.	he und	lersigned, hav	e exan										
ndidate f			an	iai	las)	The	Ka	ya	10	au	4.2	has	y.
		to be in all represence.	espects	fit for	His Ma	jesty's	Service	. He	has	signe	d the	Certi	ficate
		Ilie	ile		th	e 2	16	of	De	ee	uel	er 19:	34
	(2	a	9	1 4		1.	200	i
					6	//. 			Exa	nining	Medi	cal Offic	er
						(Ran	k)	cho	L-	0	Rs	ne	9
This	s exam	ination has be	en mac	de in ac	cordanc	e with	the Ins	tructi	ons fo	or Re	cruiti	ng.	
ths	Sare			Lypes	for	etc.	Hernia,	Joints		ring	etc.	onsils,	, etc.
Months without es	with I	General	Chest	y- len's T	lo b ×	Jeart,		and Je		і Неа		No. de	rhoids
eight	Height with Bare Feet	Development	Girth	sion by- Sneller Colour	accinated or vaccinated i Small Pox (Date)	Lungs, Heart,	Abdomen, etc.	Limbs a	.я	Ears and Hearing	Testes, Varicocele,	ath, Te	Anus, Hæmorrhoids,
(b)	- (c)	(d)	(e)	(S)	V (e)	E Lu	Ab (E)	(%) Lin	3 Skin	(m)	(n)	Mo To	An (e) H
138	ft. ins.	Well de-	inches (a) maximum	right eye	yes							1	
	5.8.	for his	37	left eye	0	I	B	Z	7	A	P	1 %	j
utho		museula	minimum , 94	10/10	3	3	2	1	1	1	1	23	1
		no ms.	(c) mean	colour	1	da	3	B	P	47	8	36	dy
		100 /201	35	O.K.					,			174	
The	mahar a				SIGNE					T2'.	4 -		
ine, Dis	charge	ertify that to from the Ea	urs, or a	iny oth	er disea	se likel	never s y to rer	uпerec ider n	i iron ne ur	i Fits	or His	ontiner Maje	nce o estv's
rvice. I	am w	illing to under	rgo, aft	er entry	y, such	dental	treatme	ent as	may	be au	thori	zed.	
					K.	6.	Hea	ile					
	1						(λ.	Signat	ure of (Candida	te
1	When a	Candidate is pas	sed, notu				or disabi	lity, the	follou	ring C	ertificat	te	
Thi	Cand	lidata ia tha a	b:		to be fille		1-	1.	00			y ,	/
11118		lidate is the s	ubject	01		9		· O	900	w		7	
	4	accel 1											
rigi	erea of	sufficient imp	ortance	e to cau	ise his r	ejection	n, he be						ts.
t conside	1/	/ / /				6	0/1	ec	al	v7	201	OL.	
t conside	ed/	ZX S				7						al Office	

brabtree me May 10 th 1433. The minister of Defence, 62-21-4H Dear Sir, 624/204 I would like very much to join up in H. M. C. havy. Would you please tell me where and how I would do so. Jam seventeen years of agr 12/51/33. m. m. 5ft Tim Sall and in excellent health so have no fear of not passing the medical Board. I would be very grafeful for an early reply. Your Truly Renfred C. Heale.

brabtree hull Bue July 22 = 1933

JUL 24 1933

M 9884

GANADA = H

6 2 H204 Naval Secretary. Dear Sir, Inclosed find necessary certificates please return them soon as posselle. I am the mother of the applicant and can anure you be is a very good bay, he has wanted to join the navy ever since he was ald enough to benow what is ment. His father was all Shraigh She way also all his Uncles, one served 21 years mi the British havy. Anfortabely he did not metric at School you see we fine in a very small vellage the School here only reaches grade of so we head to send on boys devery which was very expensive Wircan only give them two years. I cam prosiderie they were tolk have metaled and the age of the had they had the apple your Truly has L. E. Heale

MILLS AT BEAUHARNOIS, QUE.



Crabtree Mills, Que.

PLEASE REFER TO FILE

December 6/34.

The Naval Secretary,

Department of National Defence,

Ottawa, Canada.

Dear Sir, -

In connection with the application of Renfred C. Heale for entry into the Royal Canadian Navy as a Boy Seaman, and the Department's request for a testimonial as to character, it is my pleasure to submit one on his behalf.

I have known this young man for eleven years very intimately, and highly recommend him. He comes of good British stock, has been reared in a Christian atmosphere possesses a fine moral standard, and is a bright intelligent youth.

He has been employed in the mill in various departments since he left school, and his duties have always been cheerfully and capably discharged. He has participated in various branches of sports and always conducted himself in a gentlemanly and sportsmanlike manner. His whole life is an open book and is without blemish.

Physically, mentally and morally he is a splendid type of manhood, and the writer feels he will make his mark in any line of endeaver, particularly in the marine service where his heart has been set on since boyhood.

Trusting the applicant will successfully pass the necessary physical examination and be accepted in the Service, and feeling sure he will justify the high regard in which he is held,

I remain.

Yours truly

Night. Superintendant.

NS 62 21-4 H

4

MEMORANDUM TO:-

DIRECTOR-GENERAL OF MEDICAL SERVICES

With reference to the attached Report of Medical Examination of Renfred C. Heale, Crabtree Mills, P.Q., for entry into the Royal Canadian Navy as a Boy (Seaman Class), will you please see the remarks by the Examining Medical Officer, and state whether you consider it would be desirable to enter this boy in the Royal Canadian Navy.

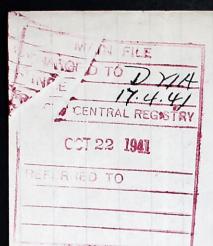
J. O'B. LeBlanc),
Assistant Naval Secretary.

Department of National Defence, OTTAWA, December 17, 1934.

MANDING OFFICER JA rend W/ Crabtee mills July 15 1937. JUL 18 1937 Y.M.C.S. "SAGUENA 46 Commander Beach 14. M. b. S. Saguenay. Lalfan N. S. Dear Sir, I write you at the request of my son, R. C. Heale. a. B. who is now in the folleethe Hospita with acute appendules He had show previous astacks, and was just about to leave for his ship when he took a Shied, we called a Doctor and he adused his removal of hospital immediately, he is to be operated on at 11 A.M. Somorrow (16") He asked me to write you regarding application for allowance to cover the cost Hospital e medical Freakmant. Trusting the above arrangement meets with your approval Iremenn, Yuly (Mrs/ L. G. Heale

34 Nemyon Remada 34 Jorthanel NO. N.S. 62_ H - 204. P148667 England. dir,

I was asked to send my marriage
lines to you somet months ago, with
something to do with my husbands back
hay, I did as I was requested, but
received no answer, so I wrote again
o still received no answer, to even
say you had received them.
will I am needing that
copy of my marriage lines to send
somewhere else, Would you kindly
return them to me, as I do not
feel like harting with my original
ones. Thanking you. 6cb: 13#1941. Wa. I. Heale.





34 Kenyon Rel place they Northernel Portsmouth Aug: 2 1941 List.
In reference to your letter of Warch 18: 1941, with regard to hurbands had. adjustment in my husbands pay.
I forwarded on my marriage
certificate, as required, but it
it has not been acknowledged
in any way. I was wondering
if you received, the same, alright.
If not, if you let me
lenow I will get another copy
for you. for you. Yours Sincerely. M. Heale. (Mrs). phys.

NATIONAL DEFENSE

P 58305 NATIONALIU 34 Kenyon Rel CANADA 204

Yorth End Portemouth. 6 = May 1941. Sid,

I am sending you a copy of my marriage certificate as you requested in your letter to me.

I am not sending my original ones, as in these times over here there's no knowing when I shall them. Hoping this meets with your approvat. Yours Sincerely. The M. Freale. in reply please quote no. 1. 3. 62-H-204. R.C. Heale

MAIN FILE
CHARGED TO) WA
CHOCE 17.4.41
REC'D. CENTRAL REGISTRY
MAY 21 1941

Telegrams: "Admiralty, Bath."

In reply please quote-

and address letter to
The Director of Navy Accounts (Branch 9/05),
Admiralty,

Rath

quoting the above number on the envelope.



M.S. 62-H-204 ADMIRALTY,

> 28 May '40 P036395(36395)

Renfrew Heale. A.B. R.C.N. 2689.

69.

Sie, I kave to forward herewith the attacked form S. 636 concerning the above-named rating, which was forwarded to this department in error.

The duplicate form has been returned to H. M.S. Vernon.

J. DIRECTOR OF NAVY ACCOUNTS

The General Superintendent Department of Mational Defence (Maval Service)

Ottawa

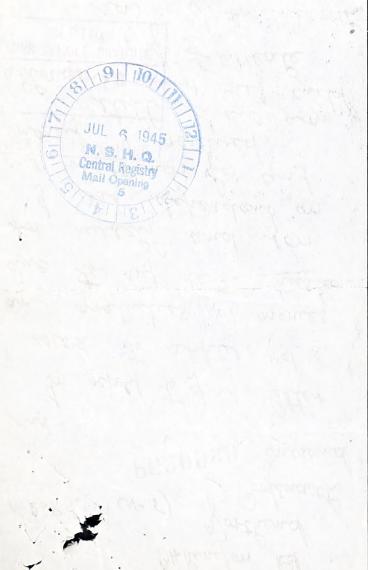
Canada.

62-21-204 195002 34 Kenyon Ret. 71 Fortherd. That Sit,

Would 2/ow mind send on mit cheque
in future to the above adolvers willing cheque
cheque has kept the stille white
slip which I have sharpe of adolvers
Thank were much.

Yours Sincerely R. C. Leale (M) ENTER BRANCH Moted in Service Records Dy 14 C. R. P. DA

N. 26.89. (N) (N-15) Portsmouth Lit 12 20,20990 England. In reply to your letter I wish to apply for any gratuities, or monies due to my late husband for miself and son. My husband for and NAVAL PERSONDEL received. MORRORIS allowers 1945 for his child WAR SERVICE GRATHITY & theate. now. I. f. Unsworth



brabtee mills 1 nov 14" 1940 NATIONAL DEFENCE I lost my son on H.M.C.S Margaree I would be obliged if you would let me have a duplicate of his death certificat, it is necessary to have it in connection with an insurance polecy, Montreal Life Insurance Confrar e which I am named as benifine. Since then he married in England so his wife was named next of Kin. I am handing, over to her land being named beneficiary I must claim M myself first. Thunking you in advance My boys name e mumber I remain your Truly A.B. Penfred C. Heale. 2689. mus L. E. He H.M.C.S Margarer. our

I have another son serving somewhere in Ergland his advers, is Gunner Jack E. Heale D105-38 adminstration Ming Ist Canadian Artillery, Holding Unif G Base Post Office Canada. I wish to Cable him money for his Burthel 30° dee, would yan please alluse me as s the proper way to adres such a Cable, as She Rid Cross meeding this subject was ho up by others with lads orienseas so I said I would write efted out. Thanker you again Thus J. E. Heale