OLSON
OLE ADRIAN
21555

DEPARTMENT OF NATIONAL DEFENCE
(Naval Service)

M 7033

C.N.S. 2417
3M—4-37
N.S. 815-9-2417

APPLICATION FOR ENTRY IN THE ROYAL CANADIAN NAVY

Robsart Sask.
(Place)

The Naval Secretary,
Department of National Defence,
OTTAWA.

March 21st 1938
(Date)

3

MAR 26 1938
62-21-4 Q

SIR—

I hereby make formal application for entry in the Royal Canadian Navy, under a seven years' continuous service engagement as a Seaman
(Insert rating chosen)

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

Cert. of Bap. 28/3/38 M.M.

1. Name (to be given in full in Block Letters) OLE ADRIAN OLSON
2. Date of Birth (Birth Certificate or sworn declaration by parent or guardian *must* be attached) April 30 1919
3. Place of Birth. Town Robsart, Province Saskatchewan
4. Permanent Place of Residence. No ..... Street .....
   Town Robsart, Province Saskatchewan
5. Are you a British Subject? Yes
6. How long have you resided in Canada? Almost nineteen 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? Grade XI with the exception of one subject.
    (Certificates of School Authorities *must* be attached)
12. What practical experience have you had?
    (Details and certificates from employers, trade credentials, etc., *must* be attached to substantiate employment reported.)
    Truck Driver
13. Do you belong to any Naval, Military, Air or Police Force? No
14. If so, give details —
15. Have you ever served in such forces? No
16. If so, give dates and details .....
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
    Why? —
19. Have you ever been convicted of a criminal offence? No
    (Enclose two character references, one of which must confirm your answer to Question 19)
20. What is your weight? 168 Height 6' 1" Chest Measurement (Not inflated) 38"
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

Muriel Hallman
Signature of Witness

Ole Adrian Olson
Signature of Applicant

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 Robsart, this 21 day of March, 1938 in the presence of

Muriel Hallman
Signature of Witness

Bill Olson
Signature of Parent or Guardian

CERTIFICATE TO BE SIGNED BY CANDIDATES OVER 21 YEARS OF AGE

I agree to refund to the Department of National Defence the expenses incurred by that Department for my transportation to a naval Base, should I, on arrival at such Base, fail to enrol for seven years' continuous Naval service for reasons which in the opinion of the Department are within my own control.

Signed and Sealed at ....., this ..... day of ....., 19..... in the presence of .....

Signature of Witness

Signature of Candidate

H. M. C. S. "NADEN", Esquimalt, B. C.

OFFICIAL No. IF KNOWN
Space to be left vacant if not known } 21555

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
Ole Adrian Olson.	Father, Ole Olson, Name Robsart, Address Saskatchewan	Stoker 2 cl.

DATE OF BIRTH*	PLACE OF BIRTH†		NAME, RANK AND STATION OF RECRUITING OFFICER
30th April, 1919	Town	Robsart	Commander J.E.W. Oland, D.S.C. RCN R.C.N. Barracks, Esquimalt, B. C.
	County		
	Province	Saskatchewan	

Personal Description at the Date of this Document

Height	Chest	Hair	Eyes	Complexion	WOUNDS, SCARS OR MARKS	Religious Denomination	TRADE OR OCCUPATION
6'1"	38 33 35½	Dark Brown	Blue	Medium	4 inch Linear Scar on Left Leg	R.C.	Truck Driver

Commencing date of Engagement or Re-engagement	3rd October, 1938	Period of Engagement or Re-engagement	SEVEN YEARS
Date of *actually* volunteering to engage or re-engage	3rd October, 1938	Date of entering present ship	3rd October, 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:—

1. Are the particulars given above of your name and date and place of birth correct? — Yes
2. Are you a British subject? — Yes
3. Nationality of parents—Father Norweigan Mother Newfoundlander
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 Indian or Colonial Military Forces, or in the R. C. Mounted Police?‡ — No.
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? — No.
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 — No.
7. Have you ever been discharged from the Navy, Marines, Army or R. C. Mounted Police on account of misconduct? — No.
8. Are you willing to be vaccinated or re-vaccinated and inoculated? — Yes.
9. 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 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 warded 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 Instructions). If an R.N.R. man, state number of R.V. 2.

NOTED. 25.11.38

C.N.S. 55
2,500—3-38
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

I, Ole Adrian Olson, 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 from† 3rd October 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 Third day of October 1938

Ole Adrian Olson ..... Man's Signature in full

Witness to Signature .....

M. A. A.

Attested before me this Third day of October 1938.

J. Edwards ..... Signature of a Commissioned Officer of the Naval Service
Lieutenant-Commander, R.C.N.

Date 3rd October 1938

This is to certify that we have examined the person named on the other side hereof as to his fitness for the Naval Service of Canada, and we find as follows:—He is of perfectly sound and healthy constitution, free from all physical malformation, active and intelligent; and we consider him in all respects fit for His Majesty's Service.

..... COMMANDER, RCN. ..... Commanding Officer

G. L. Morgan-Smith CAPTAIN, 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

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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

particulars ted on the ide are also d when this s used.

I, ..., now serving as a .....

oard H. M. C. S. ....., who on the ..... of ..... 193.....

ed to serve in the Naval Service of Canada for a period of § ..... years, do hereby

e to serve for a further period** ..... from †† ..... 193.....

ed my services should be so long required.

..... Man's Signature in full

..... 193.....

..... Commanding Officer

or the term of (number in words) years," or "to complete (number) years for pension," or "until I attain the age of years."

e date from which the engagement actually commences.

ment conveying the consent to be attached to this paper. (N.B.—Not required in the case of youths over 17 years of age.)

tten in words.

llows:—"*Of (number) years,*" or "*to complete time for pension,*" or "*until I attain the age of years,*" as the case may be.

date of commencement of the re-engagement, which must either be coincident with, or (when the re-engagement is ante-dated) earlier than the date of execution.

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

Ole Adrian OLSON.

IN THE ROYAL CANADIAN NAVY

Esquimalt B.C

Official Number 21555

Date of birth 30th April, 1919.

Where born { Province Saskatchewan. Town or county Robsart.

Trade brought up to Truck Driver.

Religious denomination Roman Catholic.

Date passed swimming test PPT (Good) 13 Oct 38 J.L.G. Hand
PST (U-G) 17 July 39

Man's signature on discharge to pension

Nearest known Relative or Friend
(To be noted in pencil)

Name: Father

Relationship: Ole

Address: Robsart Sask

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. 3rd Oct. 1938.		Seven years.	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 Feet	Stature In.	Chest, In.	Colour of Hair	Colour of Eyes	Colour of Complexion	Marks, Wounds and Scars
On entry as a boy							
On advancement to man's rating or on entry under 28 years	6	1	33	Dk. Brown	Blue	Medium	4" linear scar on left leg.
On re-entry for C.S. or for Non-C.S. after attaining 28 years							
Further description if necessary							

C.N.S. 459
1,500—10-31
N.S. 815-9-459

CAUTION.—This is an Official document. Any alteration made to it without proper authority will render the offender liable to severe penalties.

Name Ole Adrian OLSON.

Ship's Name (Tenders to be inserted in brackets)	List and No.		Rating	From	To	Cause of Discharge
"Naden"	-	-	Stoker 2.	3 Oct '38	16 Jan '39	
Fraser	-	-	-"-	17 Jan '39	2 July '39	
Fraser			Stoker 1/c	3 July '39	5 Sep '40	
Margaree	-	-	—"—	6 Sep '40	22 Oct '40	"D.D."

Date	Wounds received in Action and Hurt Certificate; also any Meritorious Service, Special Recommendations, Prize or other Grants	Captain's Signature

Service

Ship's Name (Tenders to be inserted in brackets)	List and No.		Rating	From	To	Cause of Discharge

Examinations passed and Notations or Qualifications other than those entered on History Sheets

Date	Particulars	Captain's Signature	Date	Particulars	Captain's Signature
14 Mch '39	Passed E.T.I	[illegible]			
29 Aug '39	Supplt. A/G. app.	[illegible]			
18 May '40	Granted Aux W/K Cert.	J. Edwards			

Name Ole Adrian OLSON. Conduct

Second Class for Conduct (inclusive dates)	
From	To

Efficiency in Rating—Article 607—K.R.

3. **Definition of Terms**—As a guide to Commanding Officers when making their award the following definitions are given of the terms to be used:—

Superior.....A man who performs his duties with more than average efficiency.
to be written Supr.

Satisfactory .....A man who performs his duties with average efficiency.
" Sat.

Moderate.....A man who performs his duties in an efficient manner but with less than average efficiency.
" Mod.

Inferior.....A man who performs his duties in an inefficient manner.
" Inferior.

Note.—In these definitions "duties" means the general duties of the substantive rating held, and "average efficiency" means the average efficiency of all men in the Service holding the same substantive rating.

The substantive rating held by the man at the time is to be noted in brackets after each assessment thus: Supr. (A.B.).

Good Conduct Badges		
Date	1st, 2nd, 3rd	Granted, Deprived, Restored

Time forfeited			
Date	P., D., C., C.P., W.T.	Number of days	
		Awarded	Served

Character	Efficiency in Rating, noting substantive rating in brackets	Whether R.M.G. or not	Date	Captain's Signature
V.G.	Sat. (Sto. 2)		31 Dec. 38	[illegible]
V.G.	Supr (Sto 1/c)		31 Dec '39	[illegible]
V.G.	Supr. (Sto. 1/c)		22 Oct 40.	J J Edwards

21555 OFFICIAL NUMBER | FILE NUMBER 62-0.53 | OFFICIAL NUMBER 21555

NAME OLSON (Surname) Ole Adrian (Given Names) DATE OF BIRTH 30th April 1919.

PLACE OF BIRTH Robsart, Saskatchewan. OCCUPATION Truck Driver.

RELIGION Roman Catholic EDUCATION Grade XI

RESIDENCE AT TIME OF ENLISTMENT: Street and No. Box 41 Town Robsart Province, etc. Sask.

Engagements				Description					Previous Service			
Date (in figures) Day	Month	Year	Period	Height	Hair	Eyes	Complexion	Marks or Scars	Served in	Rank or Rating	Dates From	To
3	10	38	Seven years.	6'1"	Dk.Brn.	Blue	Medium	4" linear scar left leg.				

NEXT OF KIN RELATIONSHIP (in pencil) Mother NAME (in pencil) Mrs Bessie M. Olson

ADDRESS (in pencil): Street and No. 385-4th Street Town Medicine Hat Province, etc. Alberta

Medals, Clasps, Hurt Certificates, Prize Money			
Date (in figures) Day	Month	Year	Particulars

Examinations, Certificates, etc.				Date (in figures)			Particulars
Date (in figures) Day	Month	Year	Particulars	Day	Month	Year	
13	10	38	P.P.T.(Good)				
14	3	39	E.T."One".				
17	7	39	P.S.T.(V.G.)				
18	5	40	A.W/K.Cert.				

Badges, G.C. or G.S.				
Date (in figures) Day	Month	Year	1st, 2nd or 3rd G.C. or G.S.	Granted Deprived Restored

Brief Particulars of Warrant or C.M. Punishments and C.P. Charges						
Ship or Establishment	Wt. No.	Date (in figures) Day	Month	Year	Brief Particulars of Offence	Punishment

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

FILM NO. WAR 4866-6-
DATE

Second Class For Conduct

From	To

W.S.G. APPLICATION 6116 RECEIVED 11/10/45

H.Q. 35—30M—4-42 (4260)
N.S. 815—7-35

21555 OFFICIAL NUMBER

NAME OLSON (Surname) Ole Adrian (Given Names)

OFFICIAL NUMBER 21555

Ship or Establishment	Rating	From Day	From Month	From Year	Remarks	Character	Efficiency	Date Day	Date Month	Date Year
Naden	Stoker 2/c.	3	10	38		V.G.	Sat.	31	12	38
Fraser	"	17	1	39	Lent Naden 25-30/5/39.	V.G.	Supr.	31	12	39
	Stoker 1/c.	3	7	39		V.G.	Supr.	22	10	40
Margaree	"	6	9	40						
Discharged		22	10	40	Dead-Missing presumed dead.					

Non-Sub. Rating	Qualified Day	Qualified Month	Qualified Year	Re-Qualified Day	Re-Qualified Month	Re-Qualified Year

GENERAL REMARKS

14.5.41. Memorial Crosses issued to
Wife: Mrs.Jane F.Olson,
c/o W.H.C.S. Thringe, Esq.,
"Hatherley" Suffron, Walden,
Essex, England.
Mother: Mrs.Bessie M.Olson,
Box 41, Robsart, Sask.

DATE OF BIRTH DY.	MO.	YR.	PLACE OF BIRTH	CIVIL OCCU. MAIN	SUB	RELIGION	PERM. RESIDENCE				PRIM. ENG. DIV.	A	SR	RANK OR RATE
30	4	19	19	580	0	10	4	1	04	15	0	13	0	15 95

ENLIST. DATE DY.	MO.	YR.	ACT. SERV. DATE DY.	MO.	YR.							A	SR	RANK OR RATE RANK
03	10	38	03	10	38						03/5	0	15	94

SENIORITY DY.	MO.	YR.	SAT.	A	B						CO. & D.	CHECKED
03	07	39	09	-	-	20	22	10	[illegible]			

DECEASED 22 October 1940

DEPARTMENT OF VETERANS AFFAIRS

AWARDS (NAVY)

D.D.
WAR SERVICE RECORDS

SURNAME (IN BLOCK LETTERS)	CHRISTIAN NAMES	REG. No.	RANK ON DISCHARGE	C.A.S.F. UNIT	FILE No.
OLSON	Ole Adrian	N-21555	Sto. 1		

WAR SERVICE
BADGE
(CLASS) No. DATE DESPATCHED:

ADDRESS:

CAMPAIGN MEDALS	REGISTRATION NUMBER AN DATE DESPATCHED
1939-45 Star	Ret'd To Stock.
Atlantic Star	CANCELLED 1383 Medals Ret'd Undelivered
C.V.S.M. & Clasp	
War Medal	
	(THE REVERS... ...ESTATE PURPOSES)

DVA 806

HMCS "MARGAREE" RCN Mar./42

MEDALS AND MEMORIALS—DECEASED PERSONNEL

	REGISTRATION No. DATE OF DESPATCH
(1) **MEDALS** PERSON ENTITLED TO: Mrs. Jane F. ~~Olson~~ Mackworth (Re-married) - Widow ADDRESS: ~~75 Oxford Road,~~ 33 Parkside Cambridge, Eng. 10-9-41	(1) Held pending application 16-6-50.
(2) **MEMORIAL CROSS** WIDOW: Mrs. Jane F. Olson ADDRESS: c/o WHCS THRING Esq., "Heatherley", Saffron Walden Essex, England	(2) 14 May 1941
(3) **MEMORIAL CROSS** MOTHER: Mrs. Bessie M. Olson ADDRESS: Box 41 ROBSART, Sask.	(3) 15 May 1941

MORANDUM FOR

P. 64

Mrs. A.O. Olson,
~~4 St. Andrews St.,~~ 75 Oxford Road
Cambridge, England.

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. N.S. 62-0-53 FD.160.

86

DEPARTMENT OF NATIONAL DEFENCE
OTTAWA, ONT.

July 2nd, 1941.

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. 1 O.A. OLSON, No. 21555.

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.

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

STATEMENT of the Names, Ages and Addresses, or Dates of Death, of all the relatives that the de
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.....		Jane Felicity Olson	23	75, Oxford Rd Cambridge, England
2	Children of the Deceased and dates of their Births.....				
3	Father of the Deceased.....		Ole Olson	57	Robsart, Sask.
4	Mother of the Deceased.....		Elizabeth Olson.	48	Robsart, Sask.
5	Brothers of the Deceased	Full Blood			
		Half Blood			
6	Sisters of the Deceased	Full Blood	Margaret Lorraine Olson	14	Robsart Sask.
		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

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?	Ole Adrian Olson
11	Give the month and year of his birth.	April 30th 1919
12	Where and when were his parents married?	Sydney, Nova Scotia, Canada Jan 7.18
13	Was he ever married? If so, state exact place and date of marriage.	Sept 17th, 1940. St Pancras Town Hall London. England.
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?	Robsart, Saskatchewan, Canada
17	In what Province, Country or State did he reside, and in which last?	Sask.
18	How long in each?	In Sask excepting two yrs. in the Canadian Navy
19	What was the nature of his employment?	Stoker R.C.N.
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?	no
22	State your postal address in full.	Mrs. J. J. Olson 75 Oxford Rd. Cambridge, Eng.

PARTICULARS AS TO CLAIMS

23	Have the funeral expenses been paid? If so, by whom?	Drowned at sea on Active Service.
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).	Nil.

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

Ole Olson
Elizabeth Olson. } Signature of Informant

CERTIFICATE

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

*See above ..... {Name of Informant} is the *..... 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 Medicine Hat this 29th day of December 19 41.

Signature of Clergyman, Priest or Magistrate } B. H. Howells C.F. Qualification Chaplain, R.A.F.

Address No. 34 S.F.T.S., R.A.F. Medicine Hat, Canada

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.

P096950 62-053

Six copies to be rendered to Naval Service Headquarters

REPORT OF THE DEATH OF AN OFFICER, MAN OR BOY

H.M.C.S. STADACONA at HALIFAX NOVA SCOTIA

Name Ole Adrian OLSON
(Christian names in full)

Rank of Rating Stoker First Class Official No. 21555
(If unknown, date of first entry)

Place of Birth Robeart, Saskatchewan Date of Birth 30th April, 1919.

Occupation in Civil Life Truck Driver Religion Roman Catholic

Number of years service in the Navy (Long Service R.C.N., or mobilized service in case of R.C.N. (Temporary) or Reserve ratings) 2 years

Date of Death 22nd October 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 Mr. Ole OLSON Relationship Father
Address Robsart
Saskatchewan

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

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.

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

Can. B. 207
2M—1-37
N.S. 815-2-207

CANADA

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

(R.C.N. OR RESERVE FORCES)

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

I, the undersigned, have examined Ole Olson

candidate for entry as Ordinary seaman

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 Vedora the 13 of September 1938

Dr R. Wm Johnstone
Examining Medical Officer

(*Rank*)

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

Age { Years Months (a)	Weight without Clothes (b)	Height with Bare Feet (c)	General Development (d)	Chest Girth (e)	Vision by— (i) Snellen's Types (ii) Colour Vision (f)	Vaccinated or re-vaccinated for Small Pox (Date) (g)	Lungs, Heart, etc. (h)	Abdomen, Hernia, etc. (i)	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, Hæmorrhoids, etc. (p)
19-4	lbs. 158	ft. ins. 6.½	Good	inches (a) maximum 38 (b) minimum 33 (c) mean 34½	right eye normal; left eye normal; colour vision good	yes	normal; normal	normal; flat feet	normal	normal	good	normal	Perfect	normal

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.

Exception of incontinence
briefly, being 11 years
old and recorded from enrollment
no recurrence

Ole A. Olson
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 nil

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

R.W. Johnstone MD
Examining Medical Officer

(*Rank*)

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

NS:62-0.53.

Passing Certificate

This is to Certify

that Ole A.OLSON,

Rating Stoker 2nd Class. Official Number 21555

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 13th day of June, 1939.

C.N.S. 2431
1M—3-39
N.S. 815-9-2431

Robsart Sask Oct 30/37

Dear sir

I have a boy 19 years old that would like to enlist in the navy. How long have he have to wait in order to get in

Hoping hear from you

Yours truly

Ole Olson
Box 41
Robsart
Sask

PN
Que
G

Robsart Sask Sept 9/38

Department of Naval Affairs
Ottawa

Dear sir
sometime ago my boy sent in aplication for O D seaman. in the mean time he has to use glasses to read would that interfere with him getting in would there be a better chance in the stokehold or with the electrisions in anny other ways he is a one as he went true a doctors exsam. He would prefer to get in as electrisions helper.

Yours truly
Ole Olson
Box 41
Robsart sask

62-8-53.

37

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, Ole Adrian Olson, Stoker I, O.N. 21555, R.C.N., was missing, believed killed.

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

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

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

Yours very truly,

(J. O. Cossette)
NAVAL SECRETARY.

Mrs. Bessie M. Olson,
Box 41, ROBSART, Sask.

4, St Andrews St.
Cambridge
England 41
22nd Nov. 1940.

Dear Sir

I am anxious to get in touch with the parents of my husband, O. A. Olson, 21555 R.C.N., who was posted as missing recently.

I was recommended by Canada House to write to you for their address.

Yours faithfully

Jane F. Olson.

"Flatherley"
Saffron Walden
Essex
England.
23 Nov 1940

49

Dear Sir

My daughter, Jane Felicity, was married at St. Pancras Town Hall, London, on Tuesday Sept 17th 1940, to Ole Adrian Olson, serving as Stoker 1st class, H.M.C.N. 21555. We have every reason to believe that he was on board H.M.C. Destroyer "Margaree" when she was sunk after a collision, about Oct 20th 1940. His name does not appear in the list of survivors. We shall be glad to have official confirmation of these facts.

I noted that the Canadian Govt. proposed to issue badges to war widows, I think my daughter would be glad to receive one. She is a graduate of Cambridge University, where she is now doing research work, but the above may be noted as her permanent address.

I am, Sir
Yours faithfully
W. H. C. S. Irving
Captain R.N. (Ret.)

The Secretary
H.M.C. Navy Office.

COPY

NS. 62-0-53

62

6th January, 1941.

Dear Sir:

Reference to your letter of the 23rd November, 1940, which has just arrived, I regret to confirm that Ole Adrian Olson, Stoker 1st Class, R.C.N., O.N. 21555, is missing, believed lost at sea in the sinking by collision of H.M.C.S. "MARGAREE" on the 22nd October, 1940.

Your letter was the first intimation received at Naval Service Headquarters that Stoker Olson had been married and it is for that reason that your daughter, Mrs. Jane F. Olson, was not advised of the casualty. A letter will be sent to her confirming this matter.

It is requested that documentary proof of marriage be forwarded to this Department in order that the case may be considered by the Canadian Pensions Board as to the eligibility of the widow.

A letter of sympathy from the Honourable the Minister of National Defence for Naval Services and a Memorial Cross will be forwarded in due course.

Yours very truly,

(J.O. Cossette),
Naval Secretary.

Captain W.H.C.S. Thring, R.N., (Ret'd.),
"Hatherley",
Saffron Walden,
Essex, England.

CJD/RM

NS. 62-0-53

52

8th January, 1941.

Dear Madam:

It is with deep regret that I must confirm that your husband, Ole Adrian Olson, Stoker 1st Class, R.C.N., O.N. 21555, has been listed as missing, believed lost at sea, following the sinking of H.M.C.S. "MARGAREE" on the 22nd October, 1940.

It is regretted that no record of your marriage to Stoker Olson is on file at Naval Service Headquarters, otherwise you would have been immediately advised as the next-of-kin.

I am requested to express to you the sincere sympathy of the Chief of the Naval Staff, Officers and men of the Royal Canadian Navy in your loss.

Yours sincerely,

(J.O. Cossette),
NAVAL SECRETARY.

Mrs. Jane F. Olson,
"Hatherley",
Saffron Walden,
Essex, ENGLAND.

168, Gilbert Rd.
Cambridge
England.
Aug 12th 1945.

Your Ref: N.S.
N.21555 Pers (N).
(P-19)

Norm

62-0-53

1181035

Dear Sir.

With reference to your letter about the gratuity for Ole Adrian Olson, deceased, I am anxious that this should be paid to his mother, Mrs E. Olson, 238, 8th Street, Medicine Hat, Alberta, Canada. Perhaps you will let me know if this is possible. I was the wife of the deceased at the time of his death.

Yours faithfully
Jane F. Mackworth.

JIR/MMS

24th September, 1945.

N.S.N-21555
Pers (N) (P-18)

Dear Madam:

Under the provisions of the War Service Grants Act, 1944, payment of a War Service Gratuity has been authorized on behalf of every member of the Forces who died on active service.

To be directly entitled to this Gratuity, a state of dependency must exist which, in the case of your late son, Ole Adrian OLSON, Stoker 1/c, R.C.N., would apply to his widow, now Mrs. Jane F. Mackworth.

However, Mrs. Mackworth has waived her claim to this Gratuity and has expressed the wish that the amount might be paid to you.

Before payment can be made the Dependents' Allowance Board must classify you as a dependent within the terms of the Act. On the other hand, should this not be possible, payment would automatically be made to the Director of Estates who would then assume responsibility for distribution.

It is accordingly requested that you inform the department at the earliest possible date concerning whether or not you wish to file claim for this Gratuity.

Yours truly,

Estates

SECRETARY, NAVAL BOARD.

Mrs. Elizabeth Olson,
238-8th St.,
MEDICINE HAT, Alta.

R No. 149/337

65 - 5th St S.E.
Medicine Hat, Alta
Oct 1st - 1945

Secy., Naval Board
Dept of Nat'l Defence
Ottawa

1195152

Dear Sirs

Re file no N.S.N. 215-53-

Your letter of Sept 24th received, re the War Service Gratuity to be paid on behalf of my late son "Ole Adrian Olson," Sto 1/c, R.C.N., and in reply beg to say that I would like to file claim for this gratuity.

His widow waived her right to this money, so that it would be paid to me.

My son always allotted me so much a month from his pay, even after he married, so I was a dependent.

You will please note change of address from 238 - 8th St - to 65 - 5th St S.E.

Thanking you for your interest, and hoping to hear from you again

Yours truly,
(Mrs) Elizabeth Olson.

RECEIVED OCT 4 1945 N.M.O. N.S.H.Q.

DIRECTORATE OF NAVAL PAY ACCT'G.
OCT 17 1945
61169.
WAR SERVICE GRATUITY (RECORDS) SECTN.