

923 Catherine People ①

1881 Census

Name	Age	Occupation	Birthplace	Location	Family
<input checked="" type="checkbox"/> Chivers, Jeremiah	46	Fisherman	Scotland	Cowichan & Salt Spring Island (191 C)	196 <input checked="" type="checkbox"/>
<input checked="" type="checkbox"/> Shaw, Jeremiah	5	None or Unknown	Scotland	Cowichan & Salt Spring Island (191 C)	196 <input checked="" type="checkbox"/>
<input checked="" type="checkbox"/> Shaw, John	10	None or Unknown	Scotland	Cowichan & Salt Spring Island (191 C)	196 <input checked="" type="checkbox"/>
<input type="checkbox"/> Shaw, John	48	Farmer	Scotland	Cowichan & Salt Spring Island (191 C)	196 <input checked="" type="checkbox"/>

<b>Gender</b>	Male	<b>Band</b>	Not applicable
<b>Marital Status</b>	Married	<b>Religion</b>	Presbyterian
<b>Building</b>	House	<b>Origin</b>	Scotland
<b>Attending School</b>	No	<b>Infirmities</b>	Blank or None
<b>Record</b>	census.1881:10721	<b>Comments</b>	None

<input type="checkbox"/> Shaw, Maggie	17	None or Unknown	Scotland	Cowichan & Salt Spring Island (191 C)	196 <input checked="" type="checkbox"/>
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<b>Gender</b>	Female	<b>Band</b>	Not applicable
<b>Marital Status</b>	Single	<b>Religion</b>	Presbyterian
<b>Building</b>	House	<b>Origin</b>	Scotland
<b>Attending School</b>	No	<b>Infirmities</b>	Blank or None
<b>Record</b>	census.1881:10723	<b>Comments</b>	None

<input type="checkbox"/> Shaw, Margaret	47	Homemaker	Scotland	Cowichan & Salt Spring Island (191 C)	196 <input checked="" type="checkbox"/>
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<b>Gender</b>	Female	<b>Band</b>	Not applicable
<b>Marital Status</b>	Married	<b>Religion</b>	Presbyterian
<b>Building</b>	House	<b>Origin</b>	Scotland
<b>Attending School</b>	No	<b>Infirmities</b>	Blank or None
<b>Record</b>	census.1881:10722	<b>Comments</b>	None

<input checked="" type="checkbox"/> Shaw, Robert	15	Farmer	Scotland	Cowichan & Salt Spring Island (191 C)	196 <input checked="" type="checkbox"/>
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~~917~~ Catherine  
923

88-09-093927

37927 160

REGISTRATION OF BIRTHS, DEATHS, AND MARRIAGES ACT, 1872.

SCHEDULE B.—Marriages.

Registration District No. *Mauaimo*

BRIDEGROOM.	No.	<i>313</i>
	His name.	<i>C. Arthur Witter</i>
	Age.	<del>28</del> <i>37</i>
	Residence when married.	<i>Salt Spring Island</i>
	Place of birth.	<i>Winstal England</i>
	Condition.	<i>Bachelor</i>
	Rank or profession.	<i>Farmer</i>
Name of parents.	<i>John William Walter + Eliza</i>	
BRIDE.	Her name.	<i>Margaret Shaw</i>
	Age.	<i>24</i>
	Residence when married.	<i>Lobias Island</i>
	Place of birth.	<i>Glasgow, Scotland</i>
	Spinster or widow.	<i>Spinster</i>
	Name of parents.	<i>John Shaw + Margaret</i>
Name of witnesses.	<i>Ed. Walter + Janet Blyth Wible</i>	
Residence of witnesses.	<i>Salt Spring Island</i>	<i>Mauaimo</i>
Date of marriage.	<i>18th April</i>	<i>1888</i>
Religious denomination of bridegroom.	<i>Episcopal</i>	
Religious denomination of bride.	<i>Presbyterian</i>	
By whom married.	<i>Rev James Miller, Presbyterian Ch., Mauaimo 155.</i>	
By licence.	<i>Licence</i>	
By banns.	—	
Remarks.		

I hereby certify the particulars given in the above Report to be correct to the best of my knowledge and information.

Dated the *18th* day of *April*, A.D. 18*88*

Signature of Officiating Clergyman, &c. *James Miller*

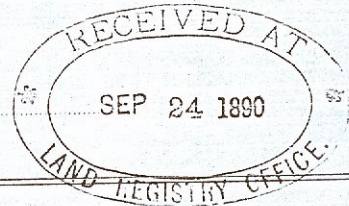
90-09-005603

REGISTRATION OF BIRTHS, DEATHS, AND MARRIAGES ACT, 1872.

2303

SCHEDULE A.—Births.

Registration District No. 1



No.	2547
When born.	15 <sup>th</sup> August 1890
Name.	Mary
Sex.	Female
Name and surname of Father.	Arthur Walter
Name and maiden surname of Mother.	Margaret Shaw
Rank or profession of Father.	Farmer
Signature, description, and residence of informant.	A. Walter Father of Infant Salt Spring Island
When registered.	24 <sup>th</sup> September 1890
Name of Accoucheur.	Mrs Rosman
Signature of Registrar.	E. J. Leggatt
Remarks.	

*1891 Census*

Name	Age	Occupation	Birthplace	Location	Family
<input type="checkbox"/> Walter, Arthur	41	Farmer	England	Saltspring North, Thetis & Kuper Islands (3 m-1)	15 <input checked="" type="checkbox"/>

Gender	Male	Band	Not applicable
Marital Status	Married	Religion	Anglican/Episcopal/C of E
Relationship to Head	Head of Household	Father's Birthplace	England
Employer	No	Mother's Birthplace	England
Wage Earner	No	French Canadian	No
Hands Employed	0	Infirmities	Blank or None
Unemployed	No	Floors/Rooms	1/4
Building/Construction	House/Wood	Record	census.1891:12499
Comments	None		

<input type="checkbox"/> Walter, Margaret	27	Homemaker	Scotland	Saltspring North, Thetis & Kuper Islands (3 m-1)	15 <input checked="" type="checkbox"/>
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Gender	Female	Band	Not applicable
Marital Status	Married	Religion	Anglican/Episcopal/C of E
Relationship to Head	Wife of Head	Father's Birthplace	Scotland
Employer	No	Mother's Birthplace	Scotland
Wage Earner	No	French Canadian	No
Hands Employed	0	Infirmities	Blank or None
Unemployed	No	Floors/Rooms	1/4
Building/Construction	House/Wood	Record	census.1891:12500
Comments	None		

<input type="checkbox"/> Walter, Arthur	2	None or Unknown	British Columbia	Saltspring North, Thetis & Kuper Islands (3 m-1)	15 <input checked="" type="checkbox"/>
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Gender	Male	Band	Not applicable
Marital Status	Single	Religion	Anglican/Episcopal/C of E
Relationship to Head	Son of Head	Father's Birthplace	England
Employer	No	Mother's Birthplace	Scotland
Wage Earner	No	French Canadian	No
Hands Employed	0	Infirmities	Blank or None
Unemployed	No	Floors/Rooms	1/4
Building/Construction	House/Wood	Record	census.1891:12501
Comments	None		

<input type="checkbox"/> Walter, Mary	1	None or Unknown	British Columbia	Saltspring North, Thetis & Kuper Islands (3 m-1)	15
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1/2 L. 4 & 5, R 1, E

*1901 Census*

H1/05/18 Walter, Arthur, m, h, m, 6 May 1849, 51, ENG, to Can: 1884, CE, Farmer.  
 ..... Rems: MRI: Arthur Walter mar Margaret Shaw, 18 Apr 1888, Nanaimo.  
 H1/05/19 Walter, Margaret, f, wife, m, 21 Nov 1863, 37, SCT, to Can: 1877, CE.  
 H1/05/20 Walter, Arthur B., m, son, s, 13 Jun 1889, 11, BC, CE.  
 ..... Rems: BR: Arthur Brittan Walter, b.18 Jun 1889 at Saltspring Island, s.o.Arthur Walter, SSI, farmer & Margaret Shaw.  
 H1/05/21 Walter, Mary, f, dau, s, 15 Aug 1890, 10, BC, CE

923 Catherine

21490

This Form, if placed in an envelope marked "Dominion Statistics—Free, penalty for improper use \$300," and addressed by name and title to the Registrar of the Registration Division in which the death occurred, will pass through the mail free.

FORM 6. PROVINCE OF BRITISH COLUMBIA  
**CERTIFICATE OF REGISTRATION OF DEATH**

1 PLACE OF DEATH—

If in Municipality Royal Oak District Name Saanich Registered No. \_\_\_\_\_  
(For use of Registrar of Vital Statistics only)  
 If in City or Town \_\_\_\_\_ Name \_\_\_\_\_ Street Elk Road House No. \_\_\_\_\_  
 If in hospital or institution, give name \_\_\_\_\_

2 NAME OF DECEASED ARTHUR WALTER

Residence Elk Road Saanich  
(Usual place of abode)

PERSONAL AND STATISTICAL INFORMATION				
3 SEX <u>male</u>	4 RACIAL ORIGIN <u>English</u>	5 Single, Married, Widowed or Divorced (Write the Word) <u>married</u>		
6 BIRTHPLACE (Province or Country) <u>Bristol England</u>				
7 DATE OF BIRTH (month, day and year) <u>May 6/1849</u>				
8 AGE In	Years	Months	Days	If less than one day
	<u>80</u>			.....hrs. or.....min.
9 OCCUPATION OF DECEASED				
(a) <u>Retired engineer</u> <small>(Trade or occupation or kind of work)</small>				
(b) _____ <small>(Kind of industry)</small>				
10 LENGTH OF RESIDENCE (In years and months)				
(a) At place of death <u>9 years</u>				
(b) In province <u>abt 32 years</u>				
(c) In Canada (if an immigrant) <u>abt 45 years</u>				
11 Name of father <u>John B. Walter</u>				
12 Birthplace of father _____ <u>England</u> <small>(Province or country)</small>				
13 Maiden name of mother <u>Eliza Phillips</u>				
14 Birthplace of mother _____ <u>England</u> <small>(Province or country)</small>				

MEDICAL CERTIFICATE OF DEATH	
19 Date of death	<u>Dec 14th 1929</u> <small>(Month, day and year)</small>
20 I HEREBY CERTIFY that I attended deceased from <u>July</u> 19 <u>28</u> to <u>Dec 14</u> 19 <u>29</u> that I last saw him alive on <u>Dec 14</u> 19 <u>29</u> and that death occurred on the date stated above, at <u>7 P.</u> m. The CAUSE OF DEATH was as follows: <u>Prostatic Enlargement</u>	
(duration) <u>1 yrs 6 mos.</u> dys.	
CONTRIBUTORY _____	
(duration) _____ yrs. _____ mos. _____ dys.	
21 Where was disease contracted if not at place of death? _____	
Did an operation precede death? <u>No</u> Date of _____	
Nature of operation _____	
Was there an autopsy? <u>No</u>	
(Signed) _____	M.D.
Address <u>305 St. James Bldg.</u>	
Date <u>Dec 16/29</u>	
State the Disease causing Death, or in death from Violent Cause, state (1) Means and Nature of Injury, (2) whether Accidental, Suicidal or Homicidal.	
22. District Registrar's Record Number	<u>ec 17/29</u>
23 Filed	<u>DEC 17 1929</u> District Registrar

WITH UNFADING INK—THIS IS A PERMANENT RECORD. Every item of information should be carefully checked. PHYSICIANS at and STATE CAUSE OF DEATH in plain terms, so that it may be properly classified. It is very important. RACIAL ORIGIN will be described by stating to what race or people the deceased person belongs, French, German, etc. The terms "American" or "Canadian" should not be used as they express citizenship actions on back of Certificate.

W. Carter will officiate. Dec 16, 1929  
 917 Catherine Hanes P. 15  
 There passed away at his residence, Elk Road, Saanich, on Saturday, Arthur Walter, a resident of this Province for the last nine years, aged eighty years. He was born in Bristol, England. He is survived by his widow in Saanich; one daughter, Mary, also of Saanich; one son, Dr. Arthur B. Walter of St. John, N.B., and two grandsons. The remains will leave Hayward's B.C. Funeral Chapel on Tuesday morning for Salt Spring Island, where interment will take place.

The Undertaker or person acting as Undertaker to obtain all the particulars required in the same with the District Registrar who shall issue the burial permit.

(OVER)

Arthur Walter  
 Edward Walter  
 The Maples  
 Banges.  
 wife Florence

1891

Name	Age	Occupation	Birthplace	Location	Family
<input type="checkbox"/> Lucas, Ivor	34	Farmer	England	Saltspring North, Thetis & Kuper Islands (3 m-1)	3 <input checked="" type="checkbox"/>

<b>Gender</b>	Male	<b>Band</b>	Not applicable
<b>Marital Status</b>	Married	<b>Religion</b>	Anglican/Episcopal/C of E
<b>Relationship to Head</b>	Head of Household	<b>Father's Birthplace</b>	England
<b>Employer</b>	No	<b>Mother's Birthplace</b>	England
<b>Wage Earner</b>	No	<b>French Canadian</b>	No
<b>Hands Employed</b>	0	<b>Infirmities</b>	Blank or None
<b>Unemployed</b>	No	<b>Floors/Rooms</b>	2/6
<b>Building/Construction</b>	House/Wood	<b>Record</b>	census.1891:12447
<b>Comments</b>	None		

<input type="checkbox"/> Lucas, Clara	28	Homemaker	Canada	Saltspring North, Thetis & Kuper Islands (3 m-1)	3 <input checked="" type="checkbox"/>
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<b>Gender</b>	Female	<b>Band</b>	Not applicable
<b>Marital Status</b>	Married	<b>Religion</b>	Anglican/Episcopal/C of E
<b>Relationship to Head</b>	Wife of Head	<b>Father's Birthplace</b>	England
<b>Employer</b>	No	<b>Mother's Birthplace</b>	England
<b>Wage Earner</b>	No	<b>French Canadian</b>	No
<b>Hands Employed</b>	0	<b>Infirmities</b>	Blank or None
<b>Unemployed</b>	No	<b>Floors/Rooms</b>	2/6
<b>Building/Construction</b>	House/Wood	<b>Record</b>	census.1891:12448
<b>Comments</b>	None		

<input type="checkbox"/> Walter, Edward	34	Farmer	England	Saltspring North, Thetis & Kuper Islands (3 m-1)	3 <input checked="" type="checkbox"/>
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<b>Gender</b>	Male	<b>Band</b>	Not applicable
<b>Marital Status</b>	Single	<b>Religion</b>	Anglican/Episcopal/C of E
<b>Relationship to Head</b>	Boarder or Lodger	<b>Father's Birthplace</b>	England
<b>Employer</b>	No	<b>Mother's Birthplace</b>	England
<b>Wage Earner</b>	No	<b>French Canadian</b>	No
<b>Hands Employed</b>	0	<b>Infirmities</b>	Blank or None
<b>Unemployed</b>	No	<b>Floors/Rooms</b>	2/6
<b>Building/Construction</b>	House/Wood	<b>Record</b>	census.1891:12449
<b>Comments</b>	None		

923 Catherine

This Form, if placed in an envelope marked "Dominion Statistics—Free, penalty for improper use \$300," and addressed by name and title to the Registrar of the Registration Division in which the death occurred, will pass through the mail free.

49662

FORM 6.

PROVINCE OF BRITISH COLUMBIA

REGISTRATION OF DEATH

Registered No. 250

Name \_\_\_\_\_  
 Street Ganges, B.C. House No. \_\_\_\_\_

Edward Walter

Ganges, B.C.  
 (Usual place of abode)

ON	MEDICAL CERTIFICATE OF DEATH
Widowed or (the Word)	19 Date of death... <u>November 14</u> 19 <u>33</u> (Month, day and year)
and	20 I HEREBY CERTIFY, that I attended deceased from
England	<u>Oct. 24</u> 19 <u>33</u> to <u>Nov. 14</u> 19 <u>33</u> that I
born, 1855	last saw him alive on <u>Nov. 14</u> 19 <u>33</u> and
than one day	that death occurred on the date stated above, at <u>12.30 p.m.</u>
s. or min.	The CAUSE OF DEATH was as follows:
	<u>Brain hemorrhage producing</u>
	<u>left-sided hemiplegia.</u>
	(duration) yrs. <u>3</u> mos. <u>weeks</u> dys.
	CONTRIBUTORY <u>arteriosclerosis</u>
	(duration) yrs. _____ mos. _____ dys.
60 years	21 Where was disease contracted if not at place of death?
	Did an operation precede death... <u>no</u> Date of _____
England	Nature of operation _____
B.	
land	
	Was there an autopsy? <u>no</u>
	(Signed) <u>H. D. Rush</u> M.D.
	Address <u>Ganges, B.C.</u>
	Date <u>Nov. 15, 1933</u>
	State the Disease causing Death, or in death from Violent Causes, state (1) Means and Nature of Injury, (2) whether Accidental, Suicidal or Homicidal.
	22. District Registrar's Record Number <u>141</u>
	23 Filed <u>NOV 15th 19 33</u> <u>John Macleod</u> District Registrar

**SALT SPRING PIONEER DIES**

**Edward Walter Succumbed Yesterday After Short Illness; Funeral on Friday**

Ganges, Nov. 6.—After a short illness, Edward Walter, a resident of Salt Spring Island for the last fifty years, passed away Tuesday at his home "The Maples."

The late Mr. Walter was born seventy-eight years ago at Bristol, Eng. He served as a justice of the peace here and acted as chairman of the hospital board since 1914. He was also chairman of the school board and was churchwarden at St. Paul's Church here for over twenty years. The widow and a nephew, Geoffrey Walter, survive.

The funeral will be held Friday afternoon at St. Paul's Church at 1:30 o'clock, Rev. C. H. Popham officiating.

Address Ganges, B.C.

16 Relationship to deceased Wife

17 Place of burial, cremation or removal Salt Spring Island, B.C. Date of burial Nov 17 19 33

18 Undertaker W. M. MOUAT, GANGES  
(Name and address)

SEC. 46—Vital Statistics Act makes it the duty of the Undertaker or person acting as Undertaker to obtain all the particulars required in the "Certificate of Registration of Death" and to file the same with the District Registrar who shall issue the burial permit.

(OVER)

brother of  
 Arthur Walter.

MARGIN RESERVED FOR BINDING

N.B.—WRITE PLAINLY WITH UNFADING INK—THIS IS A PERMANENT RECORD. Every item of information should be carefully supplied. Age should be stated. Exact statement of OCCUPATION, whether English, Scotch or Racial origin. See

be forwarded to Paris, Ont., where service and interment in family plot will take place. Catherine

WALTER—On February 7, 1954, at the residence, 1149 Monterey Avenue, Margaret Walter, aged 90, widow of Arthur Walter, born in Glasgow, Scotland, came to Canada in 1877 and resided in Victoria since 1917. She leaves one son, Dr. A. B. Walter in St. John, N.B.; one daughter, Miss Mary Walter, at home; one grandson, Dr. E. P. Walter, Cambridge, N.B.; one great-grandson; also one brother, John Shaw in Port Coquitlam, B.C. Funeral will be held on Wednesday, February 10, at 1.30 p.m. in St. Mark's Church, Ganges, B.C., Ven. Archdeacon G. H. Holmes officiating. Interment in Central Cemetery, Ganges. Hayward's B.C. Funeral Co., Ltd., directors.

923 Catherine  
**PROVINCE OF BRITISH COLUMBIA**  
 DEPARTMENT OF HEALTH AND WELFARE — DIVISION OF VITAL STATISTICS  
**REGISTRATION OF DEATH**

Reg. No. **923 Catherine**  
**54-09-002218**

1. PLACE OF DEATH  
 Name of city or place: **Monterey Avenue** House No. **1149**  
 Name of Municipality (if any): **Oak Bay, B. C.**

2. LENGTH OF STAY  
 In Municipality where death occurred: **19 years**  
 In Province: **77 years**  
 In Canada (if immigrant): **77 years**

3. PRINT FULL NAME OF DECEASED: **WALTER, MARGARET**

4. PERMANENT RESIDENCE OF DECEASED:  
 Name of city or place: **Monterey Avenue** House No. **1149**  
 Name of Municipality (if any): **Oak Bay, B. C.**

5. SEX: **Female** 6. CITIZENSHIP: **British** 7. RACIAL ORIGIN: **Scottish** 8. Single, Married, Widowed or Divorced: **Widowed** 9. BIRTHPLACE: **Glasgow, Scotland**

10. DATE OF BIRTH: **21, 1863** 11. AGE: **90** Years **2** Months **17** Days

12. OCCUPATION: **Housewife**

13. PLACE OF DEATH: **At home**

14. Total years spent in this occupation: \_\_\_\_\_

15. Name of wife of deceased: **Arthur Walter**

16. Name of deceased: **Shaw, John**

17. Name of deceased: **Chivers, Margaret**

18. Name of deceased: **Scotland**

19. Name of deceased: **Scotland**

20. Name of deceased: **Victoria, B.C.**

21. Name of deceased: **377 Lawrence St., Lancaster, N.B.**

22. Name of deceased: **Barial**

23. Name of deceased: **February 10, 1954**

24. Name of deceased: **Central Cemetery**

25. Name of deceased: **RAL CO. (HAYWARD'S) LIMITED**

26. Name of deceased: **734 Broughton St., Victoria, B.C.**

# She Met Her Husband 67 Years Ago By Boat

**Saanich Pen. & G.I. Review Feb. 17, 54**  
 Last rites for Mrs. Margaret Walter were observed from St. Mark's Church in Ganges by Ven. Archdeacon G. H. Holmes on Wednesday, Feb. 10.

A large representation of islanders attended to pay their last tribute to the 90-year-old lady whose life had been closely tied to the islands.

Mrs. Walter passed away at her Victoria Ave. home on Sunday, Feb. 7.

A native of Glasgow, Scotland, she came to the coast with her parents in 1878. The family settled on Galiano Island, where Mrs. Walter spent her childhood.

The Scottish family lived within the confines of the island farm and their only contact with the outside world was through the Indians during the early days of their new life. The cove adjacent to their farm was a popular resting place for the Indians who travelled up and down the coast in their canoes. Each time a canoe pulled into the shelter of the bay its occupants made their way to the big house overlooking the water.

The family adopted the regular custom of visiting Salt Spring Island to attend church services in the school hall there. By making this regular boat journey they also encountered other communities of whites among the sparsely settled islands.

It was due to the habit of regularly visiting the larger island by rowboat that Mrs. Walter met her

husband, Andrew Walter had been engaged in Japan as a marine engineer. En route to his native Britain, he passed through British Columbia. He was impressed with Salt Spring Island and acquired property there. Later he settled on the island and met the girl whom he later married.

The couple set up their home on Salt Spring Island in 1887 immediately following their marriage. For 30 years they farmed their property in the vicinity of Wood Hill. This was the former Booth property.

Their family was born during their Salt Spring Island residence. Miss Mary Walter was born on the island and Dr. A. B. Walter was born in Nanaimo.

During the years that saw the family prosper as island farmers Mr. Walter became a J.P. and was an esteemed member of the island community, in the Central Settlement.

In 1917 Mrs. Walter left Salt Spring Island and took up residence in Oak Bay, where she remained until her death.

**MEDICAL CERTIFICATE OF DEATH**

DECEASED: **FEBRUARY 7, 1954** (Date) **29 54** (Year)

Y that I attended deceased from **October 18 54** (Date) **19 54** (Year) and last saw her **Feb. 7, 54** (Date) **19 54** (Year)

**CAUSE OF DEATH**

(a) **Cerebral thrombosis** (due to or as a consequence of) **2 wks**

(b) **Cerebral arterio-sclerosis** (due to or as a consequence of) **? yrs**

(c) **General arterio-sclerosis** (due to or as a consequence of) **? yrs**

Contributing to the fatal result: **Bleeding from haemorrhoidal abscess** (Date) **1 day**

Diagnosis: **Etiology undetermined**

(h) Duration: \_\_\_\_\_ weeks (i) Was there a delivery? **No**

(j) Date of operation: \_\_\_\_\_ (k) Was there an autopsy? **No**

(l) Date of injury: \_\_\_\_\_ (m) Was there an autopsy? **No**

(n) Date of injury: \_\_\_\_\_ (o) Was there an autopsy? **No**

## Came To Galiano 77 Years Ago

**Pioneer Passes Feb. 10, 54**  
 One of the senior pioneers of Galiano Island, Mrs. Margaret Walter, aged 90 years, passed away at her home in Victoria on Sunday, Feb. 7. The deceased was born in Glasgow, Scotland, and came with her family to reside on Galiano 77 years ago. She continued her residence there until she moved to Victoria in 1917.

Mrs. Walter was the widow of the late Arthur Walter. She leaves one son, Dr. A. B. Walter in St. John, N.B.; one daughter, Miss Mary Walter, at home; one grandson, Dr. E. P. Walter, Cambridge, N.B.; one great-grandson; also one brother, John Shaw, in Port Coquitlam, B.C.

Funeral services were conducted from St. Mark's church in Ganges by Ven. Archdeacon G. H. Holmes on Wednesday afternoon and interment followed in Central Cemetery at Ganges. Hayward's B.C. Funeral Co. were in charge of arrangements.

in public place

Designation: **M.D.** M.D., Coroner, etc.  
 Date: **February 8, 1954**

**VICTORIA, B. C.**

**David Registrar**  
 (Signature of David Registrar)

FOR INSTRUCTIONS

OF VITAL STATISTICS.  
 0 002500

In case of stillbirth consult reverse side before making out certificate.



NAME OF DECEASED	1. Surname of deceased (print or type) <b>WALTER</b>		2. SEX <b>female</b>
	All given names in full (print or type) <b>Mary</b>		
PLACE OF DEATH	3. Name of hospital or institution (otherwise give exact location where death occurred) <b>Glengarry Hospital</b>		
	City, town or other place (by name) <b>Victoria, B.C.</b>	Postal Code <b>V8S 1G7</b>	Inside municipal limits? (State Yes or No) <b>yes</b>
USUAL RESIDENCE	4. Complete street address: If rural give exact location (not Post Office or Rural Route address) <b>1780 Fairfield Road</b>		
	City, town or other place (by name) <b>Victoria</b>	Postal Code <b>V8S 1G7</b>	Province (or country) <b>B.C.</b>
MARRITAL STATUS	5. Single, married, widowed, or divorced (Specify) <b>single</b>	6. If married, widowed, or divorced, give full name of husband or full maiden name of wife	
	7. Kind of work done during most of working life <b>Immigration Dept. - Federal Government</b>		
OCCUPATION	8. Kind of business or industry in which worked		
	9. Month (by name), day, year of birth <b>August 15, 1890</b>		
BIRTHDATE	10. AGE (years) (Months) (Days) (Hours) (Minutes) <b>92</b>	If under 1 year	If under 1 day
	11. City or place Province (or country) of birth <b>Salt Spring Island B.C.</b>		
BIRTHPLACE	12. Native Indian? Yes No <b>XX</b>		If "yes" state name of band
	13. Surname and given names of father (print or type) <b>Walter Arthur</b>		14. BIRTHPLACE - City or place, Province (or country) <b>n/k</b>
FATHER	15. Maiden surname and given names of mother (print or type) <b>Shaw Margaret</b>		16. BIRTHPLACE - City or place, Province (or country) <b>n/k</b>
	17. Signature of informant <b>X Rita Nelson (Royal Trust Officer)</b>		18. Relationship to deceased <b>Executrix</b>
INFORMANT	19. Address of informant <b>P.O. Box 580, Victoria, B.C.</b>		20. Date signed - Month, day, year <b>August 11, 1983</b>
	21. Burial, cremation or other disposition (specify) <b>Cremation</b>		22. Date of burial or disposition (month, day, year) <b>August 12, 1983</b>
DISPOSITION	23. Name and address of cemetery, crematorium or place of disposition <b>Royal Oak Crematorium Saanich, B.C.</b>		
	24. Name and address of funeral director (or person in charge of remains) (print or type) <b>McCall Bros. Victoria, B.C.</b>		
FUNERAL DIRECTOR			

MEDICAL CERTIFICATE OF DEATH

DATE OF DEATH	25. Month (by name), day, year of death <b>August 10, 1983</b>		Approx. interval between onset & death
CAUSE OF DEATH	26. Part I Immediate cause of death <b>delirium - respiratory arrest</b>		<b>1 hour</b>
	Antecedent causes (if any, giving rise to the immediate cause (a) above, stating the underlying cause last) <b>stopped eating &amp; drinking</b>		<b>1 week</b>
	Part II Other significant conditions contributing to the death but not causally related to the immediate cause (a) above <b>elderly with heart system problems - extreme delirium, depression</b>		
AUTOPSY PARTICULARS	27. Autopsy being held? Yes No <input type="checkbox"/> <input type="checkbox"/>	28. Does the cause of death stated above take account of autopsy findings? Yes No <input type="checkbox"/> <input type="checkbox"/>	29. May further information relating to the cause of death be available later? Yes No <input type="checkbox"/> <input type="checkbox"/>
ACCIDENT OR VIOLENCE (if applicable)	30. If accident, suicide, homicide or undetermined (specify)		31. Place of injury (e.g. home, farm, highway, etc.)
	32. Date of injury (Month (by name), day, year)		
SURGICAL OPERATION	33. How did injury occur? (describe circumstances)		
	34. If there was a recent surgical operation give date of operation		35. State operative findings
CERTIFICATION (attending physician, coroner, etc.)	36. I certify that to the best of my knowledge and belief the above-named person died on the date and from the causes stated herein: <b>X Gordon Wilson</b>		Attending physician <input type="checkbox"/> Physician examining body after death <input checked="" type="checkbox"/> Coroner <input type="checkbox"/>
	37. Name of physician or coroner (print or type) <b>GORDON WILSON</b>		Address <b>101-2020 Richmond Ave</b>
Date: Month, day, year <b>Aug 10/83</b>			

DO NOT WRITE BELOW THIS LINE - OFFICE USE ONLY

Notations:

CERTIFICATION OF DISTRICT REGISTRAR	I certify this return was accepted by me on this date at - <b>VICTORIA, B. C.</b>		B. C.
	District Registration No. <b>1480</b>	Date: Month (by name), day, year <b>AUG 16 1983</b>	
		Signature of District Registrar <b>DEPUTY</b>	

THIS IS A PERMANENT LEGAL RECORD - TYPE OR WRITE PLAINLY - COMPLETE ALL ITEMS USE BLUE OR BLACK INK ONLY See Reverse for Instructions

IMPORTANT: Any change or correction made in the completion of this form must be initialed by the person certifying the original information.

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