

968 Balmoral

People 3

51490

VITAL STATISTICS ACT.

SCHEDULE B.—Deaths.



REGISTRAR.

191

FILED

Registered No. 1866 City or town of Vancouver

1. Full name William MacHaffie District of B.C.

2. (a.) Sex M (b.) Colour or race W (c.) Single Married 10. How long resident in city 23 years

3. (a.) Birthplace Scotland (b.) Date of birth Feb. 21-1896 11. How long in district " "

4. Age 22 Years 9 Months 24 Days 12. How long in Canada, if foreign born 65 "

5. Died on the 15th day of December 1918 at about 8:00 P M. 13. (a.) Name of father " "

6. Last occupation Retired Landing White Canadian Customs (b.) Birthplace of father Scotland

7. Former occupation " " (c.) Maiden name of mother " "

8. (a.) Place of death 1036 Haro Street (b.) How long at place of death 1 month

9. Former or usual residence 823 Broughton St 15. Informant Jennie C. MacHaffie

16. Date of burial December 17th 1918 Address 823 Broughton St

Hour 2 P M. Undertaker Center & Hanna Ltd.

Address 1049 Georgia St W

Vancouver B.C.

The foregoing stated personal particulars are true to the best of my knowledge and belief.

PHYSICIAN'S CERTIFICATE OF CAUSE OF DEATH. IF DEATH FROM VIOLENCE, WAS IT ACCIDENT, SUICIDE, HOMICIDE?

I hereby certify that I attended William MacHaffie from out 1918 to Dec 15 1918.

That I last saw him alive on the 15 day of Dec 1918. That he died, as I am informed, on the 15 day of December 1918 at about 9:40 o'clock P. M., and that to the best of my knowledge and belief, the cause of his death was as hereunder written.

(IF UNDER ONE YEAR OLD, STATE HOW FED.)

(a.) Remote or Earlier Pathological or Morbid Condition <u>arterio sclerosis</u>	Duration in Years, Months, Days or Hours
Was operation performed within one month before death? <u>no</u>	
(b.) Immediate or Final Determining Cause <u>apoplexy</u>	

Witness my hand, this 16 day of Dec 1918 (Signature) W. B. Bennett M.D.

Address 718 Granville St

968 Balmoral

94-09-006465

2465

## REGISTRATION OF BIRTHS, DEATHS, AND MARRIAGES ACT

## SCHEDULE B - Marriages.

Registration District No. One

BRIDEGROOM.	No.	2480
	His name.	Samuel Nish Reid
	Age.	35
	Residence when married.	Victoria city B.C.
	Place of birth.	Ayrshire Scotland
	Condition.	Widower
	Rank or profession.	Merchant Clothier
	Name of parents.	John & Jessie Reid
BRIDE.	Her name.	Barbara Wilson
	Age.	25.
	Residence when married.	Victoria city B.C.
	Place of birth.	Victoria B.C.
	Spinster or widow.	Spinster
	Name of parents.	William & Elizabeth Wilson
Name of witness.	Thomson Fell & David A. Reid	
Residence of witnesses.	Victoria Victoria	
Date of marriage.	10 <sup>th</sup> September 1894	
Religious denomination of bridegroom.	Methodist	
Religious denomination of bride.	Reformed Episcopal	
By whom married.	John Reid.	
By licence.	License	
By banns.		
Remarks.	Samuel Nish Reid.	

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

Dated the 18<sup>th</sup> day of September, A.D. 1894

Signature of Officiating  
Clergyman, &c. J

John Reid pastor  
of St. Paul's Church, New Westminster

1901 CE

38 Frederick St

12/18/21 **Reid, Samuel N.**, m, head, m, 11 Sep 1859, 42, SCT, to Can: 1876, Meth, Clothing salesman.

.....**Rems:** RBCR: Reid, Samuel Nish, 84 y, 22 Oct 1943 at Vic., b.SCT. Same plot: Reid, Elizabeth M., 27 y, 5 Nov 1890 at Vic., b.Barrie, ON. DN, Times, 5 Nov 1890, Elizabeth Ried, 27, w.o.Samuel Reid, e.d.o. the late Rev. Robert Hall Smith, n.o.Barrie, ON. MRI: Samuel Nish Reid mar Barbara Wilson, 10 Sep 1894, Vic. MRI: Samuel Nish Reid mar Lizzie M. Smith, 25 Dec 1882, Vic.

12/18/22 **Reid, Barbara**, f, wife, m, 14 Aug 1868, 32, BC, Meth.

.....**Rems:** RBCR: Reid, Barbara, 62 y, 16 Feb 1932 at Saanich, BC, b.Victoria.

12/18/23 **Reid, Burnie T.**, m, son, s, 9 Sep 1886, 14, BC, Meth.

12/18/24 **Reid, Francis T.**, f, dau, s, 27 Apr 1888, 12, BC, Meth.

.....**Rems:** RBCR: Reid, Frances T., 38 y 9 m, 16 Feb 1926 at Los Angeles, CA, USA, b.Victoria.

12/18/25 **Reid, John D.**, m, son, s, 1 Jan 1890, 11, BC, Meth.

12/18/26 **Reid, Gordon T.**, m, son, s, 27 Sep 1895, 5, BC, Meth.

12/18/27 **Reid, Clifford D.**, m, son, s, 28 Nov 1898, 2, BC, Meth.

12/18/28 **Reid, Reggie**, m, son, s, 22 May 1897, 3, BC, Meth.

12/18/29 **Fulton, Sarah**, f, dom, s, 20 Sep 1873, 27, NS, Psb, Genl. servant.

.....**Rems:** RBCR: Fulton, Sara Ida, 41 y, 17 Oct 1914 at Victoria, b.NS.

MARGIN RESERVED FOR BINDING

Every item of information should be carefully

The jury retired shortly before  
o'clock 968 Balmoral Times  
18 Mar 1939 P. 15  
**BODY OF WOMAN  
FOUND AT GORGE**

**Inquest To-morrow Over Re-  
mains of Mrs. S. M. Reid;  
Missing Over Month**

An inquest will be held to-morrow morning at Sands Funeral Parlors over the body of Mrs. S. M. Reid, found on the beach near the Gorge Auto Camp yesterday afternoon.

Mrs. Reid, who was sixty-two years of age, had been missing from her home at the Alkazar Mansions since February 12.

William Fraser, a resident of the auto camp, discovered the remains left on the beach by the tide. He notified Chief Allan Rankin of the Saanich police.

Mrs. Reid had been sought by police of the city and surrounding municipalities since her disappearance was reported. Her husband was formerly controller of immigration here.

Besides the widower, she leaves one daughter, Mrs. C. Lewis, Chapman Street; three sons, Gordon, Victoria; S. Burnie of Everett, Wash., and Clifford of White Rock, B.C.; two sisters, Mrs. J. E. Phillips, New Westminster, and Mrs. Annie Wilson, Harbinger Avenue, and one brother, Fred W. W. Wilson, Esquimalt Road.

**DIED**

**REID**—On February 16, in this city, Mrs. Barbara Reid, aged sixty-two years and born in Victoria. She is survived by her husband, Mr. S. N. Reid of the Alkazar Mansions, one daughter, Mrs. C. Lewis of Chapman Street, three sons, S. Burnie of Everett, Wash.; Gordon of Victoria and Clifford of White Rock, B.C.; two sisters, Mrs. J. C. Phillips of New Westminster and Miss Annie Wilson of Harbinger Avenue; also one brother, Mr. W. W. Wilson of Esquimalt Road.

The funeral take place to-morrow afternoon, March 19, at 2 o'clock, from the Sands Mortuary Chapel. Rev. Arthur de B. Owen will officiate and the remains will be laid to rest in the family plot at Ross Bay Cemetery.

968 Balmoral Times  
18 Mar 1939 P. 15

WRITE  
Age short  
statement of  
, whether  
a Racial or

968 Balmoral

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

48879

PLACE OF DEATH—

f in Municipality Saanich Registered No. 54  
 f in City or Town Street Off Gorge Road House No. 54  
 f in hospital or institution, give name \_\_\_\_\_  
 NAME OF DECEASED Mrs Barbara Reid  
 Residence Fairfield & Lindon Avenue  
 (Usual place of abode)

PERSONAL AND STATISTICAL INFORMATION

3 SEX Female 4 RACIAL ORIGIN Scotch 5 Single, Married, Widowed or Divorced Married  
 BIRTHPLACE (Province or Country) British Columbia  
 DATE OF BIRTH (month, day and year) August 12-1869  
 AGE In } Years 62 Months \_\_\_\_\_ Days \_\_\_\_\_ If less than one day \_\_\_\_\_ hrs. or \_\_\_\_\_ min.

OCCUPATION OF DECEASED  
House wife  
 (Trade or occupation or kind of work)  
 (Kind of industry)

LENGTH OF RESIDENCE (In years and months)  
 (a) At place of death 6 months (b) In province Life  
 (c) In Canada (if an immigrant) Life

11 Name of father William Wilson  
 12 Birthplace of father Ontario  
 13 Maiden name of mother Elizabeth West  
 14 Birthplace of mother Ontario

5 Informant's name Mr S.N. Reid  
 Address Alkazar Apartments

6 Relationship to deceased Husband

7 Place of burial, cremation or removal Ross Bay Cemetery Date of burial March 19th 1932

18 Undertaker Sands Mortuary Co.  
 (Name and address)

MEDICAL CERTIFICATE OF DEATH

19 Date of death February 16th 19 32  
 (Month, day and year)  
 20 I HEREBY CERTIFY, that I attended deceased from held an inquest 19 32 and last saw him alive on 19 32 and that death occurred on the date stated above, at 5:30 P.m.  
 The CAUSE OF DEATH was as follows:

'found drowned' 1935  
 (duration) \_\_\_\_\_ yrs \_\_\_\_\_ mos \_\_\_\_\_ dys.

CONTRIBUTORY  
 (duration) \_\_\_\_\_ yrs \_\_\_\_\_ mos \_\_\_\_\_ dys.

21 Where was disease contracted if not at place of death?  
 \_\_\_\_\_

Did an operation precede death no Date of \_\_\_\_\_  
 Nature of operation \_\_\_\_\_

Was there an autopsy? no  
 (Signed) Edward Cartel M.D.  
 Address Corner  
 Date March 19/32 Victoria

State the Disease causing Death or in death from Violent Causes (1) Means and Nature of Death (2) Cause of Death (3) Manner of Death (4) Cause of Death (5) Cause of Death  
**REGISTERED**  
 District Registrar's Record Number \_\_\_\_\_  
 23 Filed 19 MAR 19 1932  
 District Registrar

N.B.—WRITE supplied. Age should be exact statement of belonged, whether but not a racial or

SEC. 45—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 REGISTRAR, B. D. & M.

VICTORIA, B. C.

(OVER)

968 Balmora

33 VICTORIA

Form 6

PROVINCE OF BRITISH COLUMBIA  
PROVINCIAL BUREAU OF HEALTH—DIVISION OF VITAL STATISTICS  
REGISTRATION OF DEATH

Reg. No. (Office use only)  
7063

1. PLACE OF DEATH  
Name of city or place Victoria B.C. Name of Municipality (if any).....  
Street or road St. Joseph's Hospital House No. ....  
(If death occurred in a hospital or institution, give the name instead of street and number)

2. LENGTH OF STAY  
(in years, months and days) In Municipality where death occurred 67 years In Province 67 years In Canada (if immigrant) 67 years

3. PRINT FULL NAME OF DECEASED Reid Samuel Nish  
(Surname or last name) (Given or Christian names)

4. PERMANENT RESIDENCE OF DECEASED:  
Name of city or place Victoria B.C. Name of Municipality (if any).....  
Street or road Burdett Avenue House No. 999

5. SEX male 6. CITIZENSHIP Canadian 7. RACIAL ORIGIN Irish 8. Single, Married, Widowed or Divorced Widowed 9. BIRTHPLACE (Province or Country) Scotland

10. Date of Birth September 11-1859 11. AGE 84 Years 1 Months 10 Days If less than one day hrs. or min.

12. (a) Trade, profession or kind of work as spinner, grader, clerk, etc. Dominion Emigration Agent  
(b) Kind of industry or business, as paper mill, lumber, bank, etc. (If labourer specify kind of work above)

13. Date deceased last worked at this occupation..... 14. Total years spent in this occupation.....

15. If married, widowed or divorced give name of husband or maiden name of wife of deceased.....

16. Name of father Reid (Surname or last name) Rev. John (Given or Christian names)  
17. Maiden name of mother Unknown (Surname or last name) (Given or Christian names)

18. Birthplace:— Father Scotland (Province or Country) Mother Unknown (Province or Country)

23. I certify the foregoing to be true and correct to the best of my knowledge and belief.  
Given under my hand at Victoria this 23 day of October 1943  
Signature of informant W. S. Pacific Command Vancouver BC Relationship to deceased.....  
Address.....

20. Burial, Cremation or Removal Burial Date October 26th 1943  
(Month by name) (Day) (Year)  
Place of Burial Victoria B.C. (Municipality) Cemetery Ross Bay Cemetery

21. Undertaker:— Name Sands Mortuary Ltd. Address 1803 Quadra Street

22. Marginal Notations (Office use only)

RESERVED FOR BINDING. WRITE PLAINLY, WITH UNFADING INK. THIS IS A PERMANENT RECORD.  
The term "Canadian" should be used as descriptive of a citizen of another country.  
The terms "Canadian" or "American" should not be used for RACIAL ORIGIN, as they express CITIZENSHIP (NATIONALITY).

MEDICAL CERTIFICATE OF DEATH

23. DATE OF DEATH October 22nd 1943  
(Month by name) (Day) (Year)

24. I HEREBY CERTIFY that I attended deceased from Oct 22nd 1943 and last saw him alive on Oct 22nd 1943

IMMEDIATE CAUSE	CAUSE OF DEATH	DURATION		
		Yrs.	Mos.	Dys.
Give disease, injury or complication which caused death, not the mode of dying, such as heart failure, asphyxia, ataxia, etc.	(a) <u>Cornary thrombosis</u>			<u>18</u>
Worbid conditions, if any, giving rise to immediate cause (stated in order proceeding backwards from immediate cause).	(b) <u>General arterial Sclerosis</u>	<u>5</u>	<u>years</u>	
or morbid conditions (if important) contributing to death but not causally related to immediate cause.	(c) <u>Diabetes mellitus</u>	<u>8</u>	<u>years</u>	

If a woman, was the death associated with pregnancy?.....  
Was there a surgical operation? no Date of operation.....  
State findings..... Was there an autopsy? no  
If death was due to external causes (violence) fill in also the following:—  
Accident, suicide or homicide?..... Date of injury.....  
Manner of injury..... (How sustained)  
Nature of injury.....  
Specify whether injury occurred in industry, in home or in public place.....  
Signed by J. Scallan M.D. Designation M.D., Coroner, etc.  
Address Scallan Bldg Date Oct 25 1940  
I hereby certify that the above return was made to me at Victoria, B. C.

Funeral services will be held in the chapel of the Sands Mortuary, Ltd., on Monday, October 25, at 2:30 o'clock. Rev. L. J. will officiate, followed by cremation at the Royal Oak Crematorium.

REID—On Friday, October 22, at St. Joseph's Hospital, Samuel Nish Reid, aged 84 years; born in Scotland and a resident of Victoria 67 years. He is survived by three sons, Samuel B., at Stanwood, Wash.; Gordon S. and Lieut. Clifford D. Reid, of Victoria; one daughter, Mrs. C. Lewis, Victoria; also one sister, Mrs. Mary Webb, of Victoria. The late Mr. Reid was a member of Columbia Lodge No. 2, I.O.O.F., under whose auspices the funeral will take place on Tuesday, October 26, at 3 p.m., in the chapel of the Sands Mortuary, Ltd. Rev. Dr. Hugh A. McLeod will officiate and interment will be in Ross Bay Cemetery.

968 Balmora, Colonsist & 4 Oct 1943

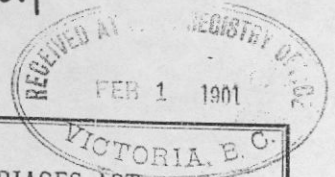
Dated October 27th 1943  
District Registration No. 933

In case of 5th birth consult reverse side before making out certificate

968 Balmoral

01-09- 014242

5242



REGISTRATION OF BIRTHS, DEATHS, AND MARRIAGES ACT.

SCHEDULE C.—Deaths.

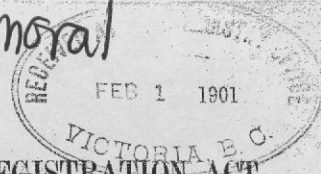
Registration District No. \_\_\_\_\_

No.	22
Name and surname of deceased.	Rose Heller - (Mary Rose Bunn Heller)
When died.	January 31 <sup>st</sup> 1901 Victoria, B.C.
Sex.	Female
Age.	70 1/2
Rank or profession.	Housewife (of Geo C. Heller)
Where born.	Geneva - Switzerland
Certified cause of death, and duration of illness.	Septic Absorption following Pelvic Inflammation Two weeks
Name of Physician, if any.	D. Fraser Dr Hasell
Signature, description, and residence of informant.	John A. Williams Clerk Provincial Infirmary Hospital
When registered.	1 <sup>st</sup> February 1901.
Religious denomination	R. Catholic
Signature of Registrar.	S. G. Wootton
Remarks.	

stranger to court procedure.  
 968 Balmoral FIVE - 31 Jan 1901 P.M.  
 -The death occurred at the Jubilee hospital this morning of Madame Heller, who for some time conducted a dress-making establishment in the apartments above Spencer's Arcade. She was 42 years of age and a native of Geneva, Switzerland. She leaves a family of two daughters and two sons. The funeral will take place on Saturday afternoon from the family residence, Pandora Avenue, and later from the R.C. Cathedral.

968 Balmoral

5-242



BIRTHS, DEATHS, AND MARRIAGES REGISTRATION ACT.

—:—

MEDICAL CERTIFICATE OF DEATH.

—:—

To the Registrar of District No. ....

I hereby certify that I attended Mr Rose Keller

52 Pandora who was apparently aged, or was stated to be aged

Forty years; that I last saw her on the

Thirteenth day of January 1901 that

she died on the Thirteenth day of January 1901

at The Provincial Royal Infirmary that the cause of her death

was Septic Absorption following Pelvic Inflammation

and that the disease continued about Two weeks.

Signature Edward Hasell

Profession M.R.C.S. Eng.

Residence Victoria B.C.



1909CC

52 Pandora Ave

14/01/35 **Heller, George**, m, head, w, 18 Nov 1866, 34, USA, to Can: 1890, Nat: 1899, Lu, Freight clerk.

.....**Rems:** 1900DIR: Heller, George C., carpenter & Mary, dressmaker (70 Yates), h.52 Pandora. RBCR: Heller, Mary Rose Bruno, 4 y (40 in DR), 31 Jan 1901 at Victoria, b.Geneva, CH. DR: Rose Heller (Mary Rose B----- Heller), 40, d.31 Jan 1901, RC, w.o.George C. Heller. Obit Search: Heller, George Clinton, 25 Aug 1939, 75, Victoria. MR: George Clinton Heller, 35, r.Victoria, b.PA, USA, wid saloon keeper, religion n/g, s.o.George Heller & Sarah Read mar Mary Smith, 21, r.Victoria, b.NF, d.o.Jess Smith & Grace Strickler, rel. n/g, 2 Oct 1901, Victoria.  
14/01/36 **Bruno, Richard**, m, lodger, s, 3 May 1872, 28, USA, to Can: 1897, RC, Teamster.  
14/01/37 **Bruno, Thomas**, m, lodger, s, 17 Apr 1877, 23, USA, to Can: 1894, RC, Printer

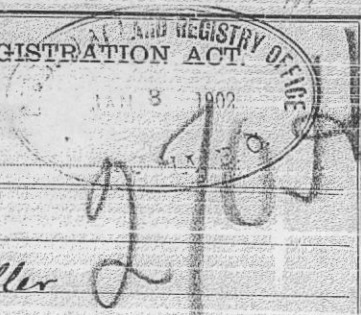
968 Balmoral

C1-09-010019

4019

BIRTHS, DEATHS, AND MARRIAGES REGISTRATION ACT.

SCHEDULE C.--Marriages.



Registration District of

BRIDEGROOM	No.	334 01	<del>244</del>
	His name.	George Clinton Keller	
	Age.	35	
	Residence when married.	Victoria B. C.	
	Place of birth.	Pennsylvania U. S. A.	
	Condition (Bachelor or Widower.)	W.	
	Rank or profession.	Saloon-keeper	
	Names of parents.	George Keller and Sarah Decker	
BRIDE	Her name.	Mary Smith	
	Age.	21	
	Residence when married.	Victoria B. C.	
	Place of birth.	Newfoundland	
	Spinster or widow.	S.	
	Names of parents.	Jess Smith & Grace Stickler	
Names of witnesses.	Isabella Bissett	F. F. Horsfall	
Residence of witnesses.	Victoria B. C.	Victoria B. C.	
Date of marriage.	October 2 <sup>nd</sup> 1901		
Religious denomination of bridegroom.	-		
Religious denomination of bride.	-		
By whom married.	Elliott J. Racco		
By licence or by banns.	L.		
Place of marriage, church, residence, &c.	Residence of Bridegroom 52 Pandora Ave Victoria B. C.		

I hereby certify the foregoing to be the correct Record of the marriage of George Clinton Keller  
 and Mary Smith made in pursuance of the above mentioned Act.

Dated the second day of October, A. D. 1901

Signature of Clergyman, Minister or Registrar: Elliott J. Racco

N. B.—Reports of marriages celebrated are to be delivered, or forwarded by registered post prepaid, to the District Registrar on the last day of March, June, September and December, in each year.

be laid at rest in the Royal Oak Burial Park.

968 Balmoral Colomist  
26 Aug 1939 P. 14

**HELLER**—On Friday, August 25, at St. Joseph's Hospital, there passed away George Clinton Heller, in his seventy-fifth year, born in Wingap, Penn., and a resident of this city for the past fifty-four years, late residence 948 View Street. There remain to mourn his loss his widow, at home; two sons, George Clinton, Jr., and William Arthur Heller, in Victoria; two daughters, Mrs. L. J. Cook, Wilkinson Road, and Mrs. F. G. Harper, of Courtenay; four granddaughters and two grandsons; one brother, Edward Heller, and a sister, Mrs. Mary Wartz, of Allantown, Penn., and nephews and nieces.

The funeral will take place Monday, August 28, at 2 o'clock, in the chapel of the Sands Mortuary, Ltd., and the remains will be laid at rest in the Colwood Burial Park.

WRITE PLAINLY WITH UNFAADING INK  
LAMENT

## Had Lived Here For More Than Half a Century

George Clinton Heller, a resident of this city for over half a century, died yesterday in St. Joseph's Hospital. He was seventy-five years of age.

Born in Wingap, Penn., Mr. Heller came to Victoria in 1895. His late residence was at 948 View Street.

Surviving are his wife, at home; two sons, George Clinton, Jr., and William Arthur, of Victoria; two daughters, Mrs. L. J. Cook, Wilkinson Road, and Mrs. F. G. Harper, of Courtenay; two grandsons and two granddaughters; one brother, Edward Heller, and a sister, Mrs. Mary Wartz, of Allantown, Penn., and several nephews and nieces.

Funeral services will be held on Monday at 2 p.m. in the chapel of Sands Mortuary, Limited. Interment will take place in Colwood Burial Park.

Col All 26 P 2

968 Balmoral

23

FORM 6

This form if placed in an envelope, marked "Dominion Statistics—Free, penalty for improper use \$300," and properly addressed will pass through the mail "FREE"

PROVINCE OF BRITISH COLUMBIA—REGISTRATION OF DEATH

Registered Notary Public  
For use of the Registrar of Births,  
Deaths and Marriages only

1. PLACE OF DEATH { If in Rural Municipality (Name) .....  
If in City, Town or Village..... Victoria (Name) Street..... St Joseph's Hospital House No.....  
(If death occurred in a hospital or institution, give the name instead of street and number)

2. LENGTH OF STAY (in years, months and days)  
(a) In Municipality where death occurred..... 54 years (b) In Province..... 54 years In Canada (if immigrant)..... 54 years

3. NAME OF DECEASED..... Heller George Clinton (Surname) (Given name or names)  
RESIDENCE No. 948 Street..... View City, town, village or rural municipality..... Victoria Province..... B.C.  
(Residence means usual place of abode. Post Office Address for residents in rural parts not sufficient)

4. SEX Male  
5. NATIONALITY (Citizenship) Canadian  
6. RACIAL ORIGIN British  
7. Single, Married, Widowed or Divorced Married  
(Write the word)

MEDICAL CERTIFICATE OF DEATH  
23. DATE OF DEATH..... August 25th 1939  
(Month) (Day) (Year)

8. BIRTHPLACE..... Pennsylvania  
(Province or Country)  
9. DATE OF BIRTH..... Nov-18-1864  
(Month) (Day) (Year)

24. I HEREBY CERTIFY that I attended deceased from:  
Aug 20 1939 to Aug 25 1939  
and last saw h. me alive on Aug 25 1939

10. AGE in Years Months Days If less than one day old  
74 9 7 ..... hrs. or ..... min.

CAUSE OF DEATH  
I. Immediate cause (a) Miliary tuberculosis  
Give disease, injury or complication which caused death, not the mode of dying, such as heart failure, asphyxia, asthma, etc. due to  
(b) ..... due to  
(c) ..... due to  
Morbid conditions, if any, giving rise to immediate cause (stated in order proceeding backwards from immediate cause).  
II. Other morbid conditions (if important) contributing to death but not causally related to immediate cause.

OCCUPATION  
11. Trade, profession or kind of work as spinner, teamster, office clerk etc. Grain Merchant  
12. Kind of industry or business, as cotton mill, lumbering, bank, etc.  
13. Date deceased last worked at this occupation.....  
14. Total years spent in this occupation.....

25. If a woman, was the death associated with pregnancy? no

15. If married give name of wife or husband of deceased..... Mary Heller

26. Was there a surgical operation? no Date of operation..... 19.....  
State findings..... no confirmation Was there an autopsy? no

FATHER  
16. NAME..... Clinton Heller

27. If death was due to external cause (violence) fill in also the following—  
Accident, suicide or homicide? no Date of injury..... 19.....  
(State which)

17. BIRTHPLACE..... U.S.A.  
(Province or Country)

Manner of injury.....  
(How sustained)

MOTHER  
18. MAIDEN NAME..... Molly Malone

Nature of injury.....  
Specify whether injury occurred in Industry, in home, or in public place.....

19. BIRTHPLACE..... Ireland  
(Province or Country)

Signed by..... M. McIlair M.B.

20. Signature of informant..... M. Heller

Address..... Victoria Date 28/8/39 19.....

Address..... 948 View St.

Relationship to deceased..... Son

21. Place of Burial, Cremation or Removal Colwood Burial ark  
Date of burial or removal..... August 28th 1939

28. District Registrar's Record Number..... 556

22. UNDERTAKER..... Sands Mortuary Ltd.  
(Name and address)

29. Filed..... Aug. 28th 1939..... led Watt  
(District Registrar)

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.

(SEE REVERSE SIDE FOR INSTRUCTIONS)

THIS IS A PERMANENT RECORD Every item of information should be carefully supplied

908 Balmora

33 VICTORIA  
Reg. No. (Office use only)

56-09-001152

Form 6

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

DO NOT USE BALL POINT PEN

1. PLACE OF DEATH

Name of city or place Victoria Name of Municipality (if any) Victoria  
Street or road Rendall House No. 139  
(If death occurred in a hospital or institution, give the name instead of street and number)

2. LENGTH OF STAY

In Municipality where death occurred 43 years In Province 43 years In Canada (if immigrant) 44 years  
(in years, months and days)

3. PRINT FULL NAME OF DECEASED

Hall Thomas  
(Surname or family name) (All given or Christian names in full)

4. PERMANENT RESIDENCE OF DECEASED:

Name of city or place Victoria Name of Municipality (if any) Victoria  
Street or road Rendall St. House No. 139  
(If outside city or municipal limits add "Rural")

5. SEX

male

6. CITIZENSHIP

Canadian

7. RACIAL ORIGIN

English

8. Single, Married, Widowed or Divorced

married

9. BIRTHPLACE:

Northumberland, England  
(City or Place and Province or Country)

10. Date of Birth

July 3 1884  
(Month by name) (Date) (Year)

11. AGE

71 Years 6 Months 3 Days  
If less than one day hrs. or min.

OCCUPATION

12. (a) Trade, profession or kind of work as logger, fisherman, office clerk, etc. Police Officer  
(b) Kind of industry or business, as logging, fishing, bank, etc. City of Victoria  
(If labourer specify kind of work above) (If "Housewife" in own home answer "At Home")

13. Date deceased last worked at this occupation

12 years ago

14. Total years spent in this occupation 32 years

15. If married, widowed or divorced give name of husband or maiden name of wife of deceased

Florence Watson Orrick

16. Name of father

Hall  
(Surname or family name)

Thomas  
(All given or Christian names)

17. Maiden name of mother

Easton  
(Surname or family name)

Margaret  
(All given or Christian names)

18. Birthplace—

England  
(City or Place and Province or Country)

England  
(City or Place and Province or Country)

19. I certify the foregoing to be true and correct to the best of my knowledge and belief.

Given under my hand at Victoria, this 7 day of January, 1956

Signature of informant Florence W. Orrick Relationship to deceased wife  
(Married woman not to use Husband's initials or given names)

Address of informant 139 Rendall Ave. Victoria B.C.  
(House No.) (Name of street) (Name of City, Municipality or Place) (Province or State)

20. Burial, Cremation or Removal

Cremation  
(State which)

Date January 9 1956  
(Month by name) (Date) (Year)

Place of Burial or Cremation Saanich  
(Municipality, etc., where Cemetery located)

Name of Cemetery Royal Oak Crematorium

21. Undertaker:—

Name McCall Bros.

Address 1400 Vancouver St.  
(Name of City, Municipality or Place) (Province or State)

MEDICAL CERTIFICATE OF DEATH

22. DATE OF DEATH

January 6 1956  
(Month by name) (Date) (Year)

23. I HEREBY CERTIFY that I attended deceased from held an autopsy to as to cause of death and last alive on 19

Disseas or condition directly leading to death

422.2

CAUSE OF DEATH

Sudden death  
Myocardial

Antecedent causes

Morbid conditions, if any, giving rise to the above cause, stating the underlying condition last.

725x  
Chronic Coronary Artery Disease for two years

Other significant conditions contributing to the death, but not related to the disease or condition causing it.

24. If a woman, was the death

(a) Associated with pregnancy? (b) Duration weeks. (c) Was there a delivery?

25. (a) Was there a recent surgical operation?

(c) State findings of operation. (d) Was there an autopsy? no

26. If death was due to external causes (violence) fill in also the following:—

(a) Accident, suicide or homicide? (b) Date of injury. (c) Manner of injury. (d) Nature of injury.

(e) Specify whether injury occurred in industry, in home or in public place.

27. Signed by

Florence W. Orrick

Designation Coroner M.D., Coroner, etc.  
Date January 10 1956

28. Print name of M.D., Coroner, etc., whose signature appears above.  
29. Notations

30. I hereby certify that the above return was made to me at

Dated JAN 11 1956  
District Registration No. 64

VICTORIA, B.C.

Eric Gammel  
(Signature of District Registrar)

(SEE REVERSE SIDE FOR INSTRUCTIONS)

MARGIN RESERVED FOR BINDING. WRITE PLAINLY, WITH UNFADING INK. THIS IS A PERMANENT RECORD.

CITIZENSHIP (NATIONALITY) is defined in terms of the country to which the person owes allegiance. The term "Canadian" should be used as descriptive of a person who was born in Canada or who has rights of Citizenship in Canada, unless he or she has subsequently become the citizen of another country. RACIAL ORIGIN is defined in terms of the people or race to which the person—traced through the father—belongs, whether English, Irish, Scottish, French, German, Russian, Ukrainian, etc. The terms "Canadian" or "American" should not be used for RACIAL ORIGIN, as they express CITIZENSHIP (NATIONALITY).

DO NOT WRITE BELOW  
DOUBLE LINE  
OFFICE USE ONLY

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

968 Balmoral  
Colonist 28 Jan 1956 P. 22

**HALL**—At the residence, 139 Rendall Street on January 6, 1956, Thomas Hall, aged 71 years; born in Northumberland, Eng., a resident here since 1912 and a former city police officer. He is survived by his wife, Florence, at home; one daughter, Mrs. T. S. MacIntyre (Florence) of Victoria; three sons, Harold of Victoria, Thomas of New Westminster, B.C., and John with the R.C.M.P. in Nanaimo, V.I.; 11 grandchildren; also a brother in Leeds, England. The late Mr. Hall was an honorary member of the Sons of England.

Funeral services from McCall Bros. Floral-Funeral Chapel on Monday, Jan. 9, at 3 p.m., Rev. Canon George Biddle officiating. Cremation.

968 Balmoral

51 45

Form 6

PROVINCE OF BRITISH COLUMBIA  
DEPARTMENT OF HEALTH SERVICES AND HOSPITAL INSURANCE  
DIVISION OF VITAL STATISTICS  
REGISTRATION OF DEATH

Reg. No. (Office use only)

69-09-001077

1. PLACE OF DEATH

Name of city, village, town, district municipality or place Victoria, B.C.  
(If outside city or municipal limits add "Rural")

Street or road WEST BAY PRIVATE HOSPITAL House No. \_\_\_\_\_  
(If death occurred in a hospital or institution, give the name instead of street and number)

2. LENGTH OF STAY In Municipality where death occurred In Province In Canada (if immigrant)  
(In years, months and days) 3 years 58 years 58 years

3. PRINT FULL NAME OF DECEASED HALL FLORENCE  
(Surname) (All given or Christian names in full)

4. PERMANENT RESIDENCE OF DECEASED  
Name of city, village, town, district municipality or place Victoria, B.C. Esquimalt  
(If outside city or municipal limits add "Rural")

Street or road West Bay Private Hospital House No. \_\_\_\_\_

5. SEX Female 6. CITIZENSHIP Canadian 7. RACIAL ORIGIN White 8. Single, Married, Widowed or Divorced Widow 9. BIRTHPLACE Newcastle, England  
(See marginal note) (See marginal note) (Write the word) (City or Place and Province or Country)

10. Date of Birth May 12 1887 11. AGE (Last Birthday) 81  
(Month by name) (Date) (Year) YEARS MONTHS DAYS HOURS MIN.

12. (a) Trade, profession or kind of work as logger, fisherman, office clerk, etc. Home duties  
(b) Kind of industry or business, as logging, fishing, bank, etc. \_\_\_\_\_  
(If labourer specify kind of work above) (If Housewife in own home answer "At Home")

13. Date deceased last worked at this occupation \_\_\_\_\_ 14. Total years spent in this occupation \_\_\_\_\_

15. If married, widowed or divorced give name of husband or maiden name of wife of deceased Thomas Hall

16. Name of father Orrick John  
(Surname) (All given or Christian names)

17. Maiden name of mother N.K. N.K.  
(Surname) (All given or Christian names)

18. Birthplace - England England  
Father (City or Place and Province or Country) Mother (City or Place and Province or Country)

19. I certify the foregoing to be true and correct to the best of my knowledge and belief.  
Given under my hand at Victoria, B.C., this 6th day of January 1969

Signature of informant J. McCall Relationship to deceased Son  
(Married woman not to use Husband's initials or given names)

Address of informant 5925 Woodfield Rd. Victoria B.C.  
(House No.) (Name of Street) (Name of City, Municipality or Place) (Province)

20. Burial, Cremation or Removal Cremation Date January 9 1969  
(State which) (Month by name) (Date) (Year)

Place of Burial Saanich, V.I. Name of Cemetery Royal Oak Crematorium  
(Municipality, etc., where Cemetery located)

21. Undertaker: - McCall Bros. Victoria B.C.  
Name (Address (Name of City, Municipality or Place) (Province)

MEDICAL CERTIFICATE OF DEATH

22. DATE OF DEATH January 6 1969  
(Month by name) (Date) (Year)

23. I HEREBY CERTIFY that I attended deceased from Jan 6 1969, and last saw her alive on Jan 6 1969

CAUSE OF DEATH  
Disease or condition directly leading to death (This does not mean the mode of dying, e.g., heart failure, asthma, etc. It means the disease, injury, or complication which caused death.)  
Antecedent causes Morbid conditions, if any, giving rise to the above cause, stating the underlying condition last.  
Other significant conditions contributing to the death, but not related to the disease or condition causing it.  
(a) Lobar Pneumonia due to (or as a consequence of) 20 days  
(b) \_\_\_\_\_ due to (or as a consequence of) \_\_\_\_\_  
(c) Adrenal Tumour 3 years

24. If a woman, did the death occur either during pregnancy or within 90 days following pregnancy? NO  
Yes or No

25. (a) Was there a recent surgical operation? NO (b) Date of operation \_\_\_\_\_ 19\_\_\_\_  
(c) State findings of operation \_\_\_\_\_ (d) Was there an autopsy? NO

26. If a violent death, fill in also: (a) Accident ; Suicide ; Homicide  (b) Date of injury \_\_\_\_\_ 19\_\_\_\_  
(c) How did injury occur? \_\_\_\_\_

(d) Injuries sustained? \_\_\_\_\_  
(e.g. fracture of skull, left leg, etc., dislocation of -, burn to -, etc.)  
(e) Where did injury occur? (home, farm, industrial place, highway, etc.) \_\_\_\_\_

27. Signed by J. McCall Designation M.D. M.D. or Coroner.  
Address 1139 Yates Date Jan 7/69 19\_\_\_\_

28. Print name of Doctor or Coroner, whose signature appears above J. McCall

29. Notations \_\_\_\_\_

30. I hereby certify that the above return was made to me at VICTORIA, B. C.

Dated JAN 14 1969 19\_\_\_\_  
E. M. Barlow

District Registration No. \_\_\_\_\_ (Signature of District Registrar)

(SEE REVERSE SIDE FOR INSTRUCTIONS)

IMPORTANT: Any change or correction made in the completion of this form must be initialled by the person certifying the information. CITIZENSHIP (NATIONALITY) is defined in terms of the country to which the person owes allegiance. The term "Canadian" should be used as descriptive of a person who was born in Canada or who has rights of Citizenship in Canada, unless he or she has subsequently become the citizen of another country. RACIAL ORIGIN - State the racial origin, traced through the father, in terms of the people or race to which the person belongs such as: English, Scottish, German, etc. or in terms of one of the following racial groups: - White, native Indian, Negro, Chinese, Japanese or other.

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teen. Apply to: Cormorant street.  
Times 29 June 1906 pg 5  
Capt. Lizzie Brannigan, of the Salvation Army, was married last night to Mr. J. Leslie McGregor, of this city, at the barracks on Broad street. The ceremony was performed by Ensign Bloss, of Vancouver, in the presence of a large audience. Capt. Brannigan, who hails from Dundas, Ont., will resign her official position as the result of her marriage. Mr. and Mrs. McGregor will reside in Victoria.

Colonist 30 Aug  
p. 15

in the Royal Oak Burial Park.

McGREGOR—Passed away in this city on August 26, 1946. Mrs. Sarah Elizabeth (Betty) McGregor, aged 76 years, of 724 Fort Street, widow of the late John McGregor. She was born in Ontario, and had resided in Victoria for the past 40 years.

Funeral services will be held in McCall Bros. Floral Funeral Chapel on Friday afternoon at 3:30 o'clock. Major Jack Nelson will officiate, after which interment will be in the family plot in Ross Bay Cemetery.

(Regina, Sask., and Dundas, Ont. papers, please copy).



908 Balmoor

C6-C9-C14545 5545

BIRTHS, DEATHS, AND MARRIAGES REGISTRATION ACT.

SCHEDULE C.—Marriages.

Registration District of *Vancouver Island British Columbia*

137

*758 me*

BRIDEGROOM

BRIDE

No.	<i>One</i>	
His name.	<i>John Leslie Mac Gregor</i>	
Age.	<i>36</i>	
Residence when married.	<i>Oak Bay Ave Victoria B. C.</i>	
Place of birth.	<i>Shedford Ontario</i>	
Condition (Bachelor or Widower.)	<i>Bachelor</i>	
Rank or profession.	<i>Cabinet Maker</i>	
Names of parents.	<i>John Mac Gregor Jane Mac Gregor</i>	
Her name.	<i>Sarah Elizabeth Bramigan</i>	
Age.	<i>35</i>	
Residence when married.	<i>Oak Bay Ave Victoria B. C.</i>	
Place of birth.	<i>Stravon Ontario</i>	
Spinster or widow.	<i>Spinster</i>	
Names of parents.	<i>George Bramigan Mary Ann Bramigan</i>	
Names of witnesses.	<i>William Fitchie</i>	<i>Adela Mortimer</i>
Residence of witnesses.	<i>Victoria</i>	<i>Victoria</i>
Date of marriage.	<i>June 28<sup>th</sup> 1906</i>	
Religious denomination of bridegroom.	<i>Salvationist</i>	
Religious denomination of bride.	<i>Salvationist</i>	
By whom married.	<i>Ensign Thomas Bloss</i>	
By licence or by banns.	<i>Licence</i>	
Place of marriage, church, residence, &c.	<i>Salvation Army Banquets</i>	

I hereby certify the foregoing to be the correct record of the marriage of *John Leslie Mac Gregor* and *Sarah Elizabeth Bramigan* made in pursuance of the above mentioned Act.

Dated the *Twenty Eight* day of *June*. 1906. . A.D.

Signature of Clergyman, Minister or Registrar. *Thomas Bloss*  
*Ensign.*

N. B.—Reports of marriages celebrated are to be delivered, or forwarded by registered post prepaid, to the District Registrar on the last day of March, June, September and December, in each year.

968 Balmoral

85472

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

1 PLACE OF DEATH—

If in Municipality ..... Registered No. 15 Mc 22  
(For use of Registrar of Vital Statistics only)

If in City or Town Victoria Name ..... Street Douglas House No. 2421  
Name

If in hospital or institution, give name .....

2 NAME OF DECEASED John Leslie MacGregor

Residence 2421 Douglas St.  
(Usual place of abode)

PERSONAL AND STATISTICAL INFORMATION

3 SEX Male 4 RACIAL ORIGIN Scotch 5 Single, Married, widowed or Divorced (Write the word) Married

6 BIRTHPLACE (Province or Country) Ontario

7 DATE OF BIRTH (month, day and year) Jan 26 1870

8 AGE Years 52 Months Days If less than one day, hrs. or min.

9 LAST OCCUPATION OF DECEASED  
(a) Laborer (b) .....  
(Trade or occupation or kind of work) (Kind of industry)

(c) From ..... to .....  
(Date from which to which so employed)

10 FORMER OCCUPATION OF DECEASED  
(a) ..... (b) .....  
(Trade or occupation or kind of work) (Kind of industry)

(c) From ..... to .....  
(Date from which to which so employed)

11 LENGTH OF RESIDENCE (In years and months)

(a) At place of death 6 years (b) In province 32 years

(c) In Canada (if an immigrant) 6 yrs

12 Name of father John MacGregor

13 Birthplace of father Scotland  
(Province or country)

14 Maiden name of mother Jane McGill

15 Birthplace of mother Scotland  
(Province or country)

16 Informant's name Mr. J. MacGregor  
Address 2421 Douglas St.

17 Relationship to deceased Wife

18 Place of burial, cremation or removal Sands Funeral Home Date of burial July 26 1922

19 Undertaker Sands Funeral Home  
(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.

VICTORIA, B. C.

D. & M.

23 District Registrar's Record Number 15 Mc 22

24 Filed JUL 25 1922 District Registrar J. B. Murch

(OVER)

N.B.—WRITE PLAINLY WITH UNFADING INK—THIS IS A PERMANENT RECORD. Every item of information should be carefully supplied. AGE should be stated EXACTLY. PHYSICIANS should STATE CAUSE OF DEATH in plain terms, so that it may be properly classified. Exact statement of OCCUPATION is very important. RACIAL ORIGIN will be described by stating to what race or people the deceased person belonged whether English, Irish, Scotch, French, German, etc. The terms "American" or "Canadian" must not be used as they express citizenship but not a Racial origin. See instructions on back of Certificate.

toria. 33. \$2. times  
968 Balmoral 22 JULY 1922 P.M.

OBITUARY RECORD

John Leslie MacGregor died this morning at the family residence, 2421 Douglas Street at the age of 52 years. He was born at Thetford, Ontario. The late Mr. MacGregor is survived by his widow in this city, his mother, one sister and one brother in Regina, and one brother in Moose Jaw. The remains are reposing at the Sands Funeral Chapel and burial arrangements will be announced later.

968 (Salmon)

**PROVINCE OF BRITISH COLUMBIA**  
**PROVINCIAL BOARD OF HEALTH—DIVISION OF VITAL STATISTICS**  
**REGISTRATION OF DEATH**

**VICTORIA**  
 Reg. No. (Office use only)  
**010623**

**MARGIN RESERVED FOR BINDING. WRITE PLAINLY, WITH UNFADING INK. THIS IS A PERMANENT RECORD.**

**CITIZENSHIP (NATIONALITY)** is defined in terms of the country to which the person owes allegiance. The term "Canadian" should be used as descriptive of a person who was born in Canada or who has rights of Citizenship in Canada, unless he or she has subsequently become the citizen of another country.

**RACIAL ORIGIN** is defined in terms of the people or race to which the person—traced through the father—belongs, whether English, Irish, Scottish, French, German, Russian, Ukrainian, etc. The terms "Canadian" or "American" should not be used for **RACIAL ORIGIN**, as they express **CITIZENSHIP (NATIONALITY)**.

**1. PLACE OF DEATH**  
 Name of city or place Victoria, B. C. Name of Municipality (if any) \_\_\_\_\_  
 Street or road Victoria Nursing Home. House No. \_\_\_\_\_  
(If death occurred in a hospital or institution, give the name instead of street and number)

**2. LENGTH OF STAY**  
 In Municipality where death occurred 40 years. In Province 40 Years. In Canada (if immigrant) \_\_\_\_\_  
(in years, months and days)

**3. PRINT FULL NAME OF DECEASED** McGregor. Sarah Elizabeth  
(Surname or last name) (Given or Christian names)

**4. PERMANENT RESIDENCE OF DECEASED:**  
 Name of city or place Victoria, B. C. Name of Municipality (if any) \_\_\_\_\_  
 Street or road 724 Fort Street. House No. 724

**5. SEX** Female **6. CITIZENSHIP** Canadian. **7. RACIAL ORIGIN** Irish. **8. Single, Married, Widowed or Divorced (Write the word)** Widow. **9. BIRTHPLACE (Province or Country)** Ontario.

**10. Date of Birth** April 15 1870 **11. AGE** 76 4 11  
(Month by name) (Day) (Year) (Years) (Months) (Days) If less than one day hrs. or min.

**12. (a) Trade, profession or kind of work as spinner, grader, clerk, etc. (b) Kind of industry or business, as paper mill, lumber, bank, etc.** Home Duties.  
(If labourer specify kind of work above)

**13. Date deceased last worked at this occupation** \_\_\_\_\_ **14. Total years spent in this occupation** \_\_\_\_\_

**15. If married, widowed or divorced give name of husband or maiden name of wife of deceased** John McGregor.

**16. Name of father.** Branigan. George  
(Surname or last name) (Given or Christian names)

**17. Maiden name of mother.** Not shown.  
(Surname or last name) (Given or Christian names)

**18. Birthplace:—**  
 Father Not known. Mother Not known.  
(Province or Country) (Province or Country)

**19. I certify the foregoing to be true and correct to the best of my knowledge and belief.**  
 Given under my hand at Victoria, B. C., this 27th day of August, 19 46  
 Signature of informant Herbert Pearce Relationship to deceased none  
 Address 1155 Bedford St.

**20. Burial, Cremation or Removal** Burial Date Aug 30 19 46  
(Municipality name) (Day) (Year)  
 Place of Burial Victoria, B. C. Cemetery Ross Bay.

**21. Undertaker:—**  
 Name McCall Brothers. Address 1400 Vancouver St. Victoria

**22. Marginal Notations (Office use only)**

**MEDICAL CERTIFICATE OF DEATH**

**23. DATE OF DEATH** August 26th. 19 46  
(Month by name) (Day) (Year)

**24. I HEREBY CERTIFY that I attended deceased from** Sept 1 19 44  
 to Aug 26 19 46 and last saw him alive on August 14 19 46

**CAUSE OF DEATH**

	DURATION		
	Yrs.	Mos.	Dys.
<b>I</b> Immediate cause Give disease, injury or complication which caused death, not the mode of dying, such as heart failure, asphyxia, ashenia, etc.	<u>Cerebral Heart Failure</u>		
<b>World conditions, if any, giving rise to immediate cause (stated in order proceeding backwards from immediate cause).</b>	<u>Cerebral thrombosis</u>		
	<u>Cerebral sclerosis</u>		
<b>II</b> Other world conditions (if important) contributing to death but not causally related to immediate cause.			

**25. If a woman, was the death associated with pregnancy?** No

**26. Was there a surgical operation?** No Date of operation \_\_\_\_\_ 19 \_\_\_\_\_  
 State findings \_\_\_\_\_ Was there an autopsy? 2

**27. If death was due to external causes (violence) fill in also the following:—**  
 Accident, suicide or homicide? \_\_\_\_\_ Date of injury \_\_\_\_\_ 19 \_\_\_\_\_  
 Manner of injury \_\_\_\_\_ (How sustained)  
 Nature of injury \_\_\_\_\_  
 Specify whether injury occurred in Industry, at home or in public place

Signed by Herbert Pearce Designation 2nd M.D., Coroner, etc.  
 Address Victoria B.C. Date Aug 27 19 46

**28. I hereby certify that the above return was made to me at** VICTORIA, B. C.  
 Dated AUGUST 29TH 19 46  
 District Registration No. 801  
Clare Stewart  
(District Registrar)

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

Directors

1953  
**PRATT**—In Victoria on October 8, 1953. Mr. Alfred James Pratt, aged 81 years, of 968 Balmoral Road, and formerly of Esther, Alberta, prior to coming to Victoria in 1936. He leaves his wife, Alice; two daughters, Mrs. Sam (Hettie) Kelly, of Crossfield, Alberta, Mrs. Albert (May) McCarthy of Keating; four sons, James, William, Harold and Frank, of Esther, Alberta; one sister, Jennie Pratt, of Seattle, Wash. Funeral services from McCall Bros. Floral Funeral Chapel on Saturday afternoon, October 10, at 3.15 o'clock. Rev. E. M. Smiley and Rev. J. B. Rowell, D.D., officiating. Cremation.

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 1916  
 1916

plot - Bass Bay Cemetery. - 05 May  
 968 Balmoral Colonist 1963 p. 27  
**PRATT**—At Rest Haven Hospital on May 3, 1963. Mrs. Alice Pratt, of 6373 Oldfield Road, aged 85 years. Born at Hertfordshire, England, a resident of Victoria for the past 25 years and formerly of Esther, Alta. She leaves three sons, James, William and Frank of Esther, Alberta, two daughters, (Hettie) Mrs. Sam Kelly of Crossfield, Alta. and (May) Mrs. Albert McCarthy of Oldfield Road; 20 grandchildren and 3 great-grandchildren; 2 brothers and 2 sisters in England. A memorial service will be held in Chaplin's Funeral Chapel, 1155 Fort St., on Sunday, May 5, at 3:00 p.m. with the Rev. Dr. J. B. Rowell and Rev. T. L. Wescott officiating. The remains will be accompanied to Esther, Alta., for interment. Donations may be made to the Shantymen's Christian Association or the Canadian Bible Society.

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968 Bal Mora

Reg. No. (Office use only)

53-09-009990

PROVINCE OF BRITISH COLUMBIA DEPARTMENT OF HEALTH AND WELFARE - DIVISION OF VITAL STATISTICS REGISTRATION OF DEATH

DO NOT USE BALL POINT PEN

1. PLACE OF DEATH

Name of city or place: Victoria, B.C. Name of Municipality (if any): Victoria, B.C. Street or road: St. Joseph's Hospital House No. (If death occurred in a hospital or institution, give the name instead of street and number)

2. LENGTH OF STAY In Municipality where death occurred In Province In Canada (if immigrant) since 1936 since 1936 60 years

3. PRINT FULL NAME OF DECEASED Pratt Alfred James (Surname or family name) (All given or Christian names in full)

4. PERMANENT RESIDENCE OF DECEASED: Name of city or place: Victoria, B.C. Name of Municipality (if any): Victoria, B.C. Street or road: Balmoral Rd. House No. 968

5. SEX M. 6. CITIZENSHIP Canadian 7. RACIAL ORIGIN English 8. Single, Married, Widowed or Divorced Married 9. BIRTHPLACE: England.

10. Date of Birth May 21 1893 11. AGE 60 Years 4 Months 17 Days If less than one day hrs. or min.

12. (a) Trade, profession or kind of work as logger, fisherman, office clerk, etc. Farmer (b) Kind of industry or business, as logging, fishing, bank, etc.

13. Date deceased last worked at this occupation 1936 14. Total years spent in this occupation life

15. If married, widowed or divorced give name of husband or maiden name of wife of deceased Alice Hornett.

16. Name of father Pratt James (Surname or family name) (All given or Christian names)

17. Maiden name of mother Rose Annie (Surname or family name) (All given or Christian names)

18. Birthplace— Father England Mother England (City or Place and Province or Country) (City or Place and Province or Country)

19. I certify the foregoing to be true and correct to the best of my knowledge and belief.

Given under my hand at Victoria, B.C., this 24th day of September 1953 Signature of informant + Relationship to deceased Self Address of informant 968 Balmoral Rd. Victoria B.C.

20. Place of Cremation or Cremation Cremation Date October 10th 1953 (State which) (Month by name) (Date) (Year) Name of Cemetery Royal Oak Crematorium (Municipality, etc., where Cemetery located)

21. Undertaker:-- Name McCall Bros. Address 1400 Vancouver St. (Name of City, Municipality or Place) (Province or State)

MEDICAL CERTIFICATE OF DEATH

22. DATE OF DEATH October 8th 1953 (Month by name) (Date) (Year)

23. I HEREBY CERTIFY that I attended deceased from October 8th 1953 to Oct 8 1953 and last saw him alive on Oct 7 1953

CAUSE OF DEATH (This does not mean the mode of dying, e.g., heart failure, pneumonia, etc. It means the disease, injury, or complication which caused death.) (a) Myocardial failure (b) Ch. Hypertensive Cardiovascular disease (c) Endarteritis obliterans Polycythemia Rubra vera

24. If a woman, was the death (a) Associated with pregnancy? (b) Duration weeks. (c) Was there a delivery? 25. (a) Was there a recent surgical operation? (b) Date of operation (c) State findings of operation (d) Was there an autopsy?

26. If death was due to external causes (violence) fill in also the following-- (a) Accident, suicide or homicide? (b) Date of injury (c) Manner of injury (d) Nature of injury (e) Specify whether injury occurred in industry, in home or in public place.

27. Signed by M.D. Designation M.D., Coroner, etc. Address Date 1953

28. Print name of M.D., Coroner, etc., whose signature appears above 29. Notations

30. I hereby certify that the above return was made in accordance with the law. Dated Oct 9 1953 District Registration No. 1213 VICTORIA, B. C.

MARGIN RESERVED FOR BINDING. WRITE PLAINLY, WITH UNFADING INK. THIS IS A PERMANENT RECORD. CITIZENSHIP (NATIONALITY) is defined in terms of the country to which the person owes allegiance. The term "Canadian" should be used as descriptive of a person who was born in Canada or who has rights of Citizenship in Canada, unless he or she has subsequently become the citizen of another country. RACIAL ORIGIN is defined in terms of the people or race to which the person—traced through the father—belongs, whether English, Irish, Scottish, French, German, Russian, Ukrainian, etc. The terms "Canadian" or "American" should not be used for RACIAL ORIGIN, as they express CITIZENSHIP (NATIONALITY).

63-377

DO NOT WRITE BELOW DOUBLE LINE OFFICE USE ONLY

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

968 Balmora

Form 6

PROV. OF BRITISH COLUMBIA
DEPARTMENT OF HEALTH SERVICES AND HOSPITAL INSURANCE
DIVISION OF VITAL STATISTICS
REGISTRATION OF DEATH

Reg. No. (Office use only)

63-09-005653

1. PLACE OF DEATH

Name of city, village, town, district municipality or place Sidney
Street or road Rest Haven Hospital
House No. (If death occurred in a hospital or institution, give the name instead of street and number)

2. LENGTH OF STAY

In Province 38 years
In Canada (if immigrant) 62 years

3. PRINT FULL NAME OF DECEASED

PRATT, Alice

4. PERMANENT RESIDENCE OF DECEASED

Name of city, village, town, district municipality or place Sidney
Street or road Oldfield Road
House No. 6373

5. SEX female
6. CITIZENSHIP Canadian

7. RACIAL ORIGIN Caucasian

8. Single, Married, Widowed or Divorced Widowed

9. BIRTHPLACE England

10. Date of Birth April 10, 1878

11. AGE (Last Birthday) 85

If under 1 year MONTHS
If under 1 month DAYS
If under 24 hours HOURS
If under 1 hour MIN.

OCCUPATION

12. (a) Trade, profession or kind of work as logger, fisherman, office clerk, etc. housewife
(b) Kind of industry or business, as logging, fishing, bank, etc.

13. Date deceased last worked at this occupation 1963

14. Total years spent in this occupation not known

15. If married, widowed or divorced give name of husband or maiden name of wife of deceased Alfred Pratt

16. Name of father Hornett, Walter

17. Maiden name of mother Williams, Jane

18. Birthplace - England

19. I certify the foregoing to be true and correct to the best of my knowledge and belief.
Given under my hand at Victoria this 4 day of May 1963

Signature of informant Alice M. E. Peasley Relationship to deceased daughter
Address of informant 6373 Oldfield Road, Sidney, B.C.

20. Burial, Cremation or Removal removal
Place of Burial or Cremation Esther, Alta.

21. Undertaker: - Chaplin's Funeral Chapel
Address 980 Quadra St., Victoria

MEDICAL CERTIFICATE OF DEATH

22. DATE OF DEATH 3 MAY 1963

23. I HEREBY CERTIFY that I attended deceased from MARCH to 3 MAY 1963, and last saw her alive on 3 MAY 1963.

CAUSE OF DEATH
Disease or condition directly leading to death (This does not mean the mode of dying, e.g., heart failure, asphyxia, etc. It means the disease, injury, or complication which caused death.)
Antecedent causes Morbid conditions, if any, giving rise to the above cause, stating the underlying condition last.
Other significant conditions contributing to the death, but not related to the disease or condition causing it.

24. If a woman, did the death occur either during pregnancy or within 90 days following pregnancy? Yes or No

25. (a) Was there a recent surgical operation? (b) Date of operation (c) State findings (d) Was there an autopsy?

26. If a violent death, fill in also: (a) Accident; Suicide; Homicide (b) Date of injury (c) How did injury occur? (d) Injuries sustained? (e) Where did injury occur? (home; farm, industrial place, highway, etc.)

27. Signed by [Signature] Designation M.B. B.S. M.D. or Coroner. Address [Address] Date 4 MAY 1963

28. Print name of Doctor or Coroner, whose signature appears above A. G. McLeod

29. Notations

30. I hereby certify that the above return was made to me at VICTORIA, B. C. Dated MAY 8 1963

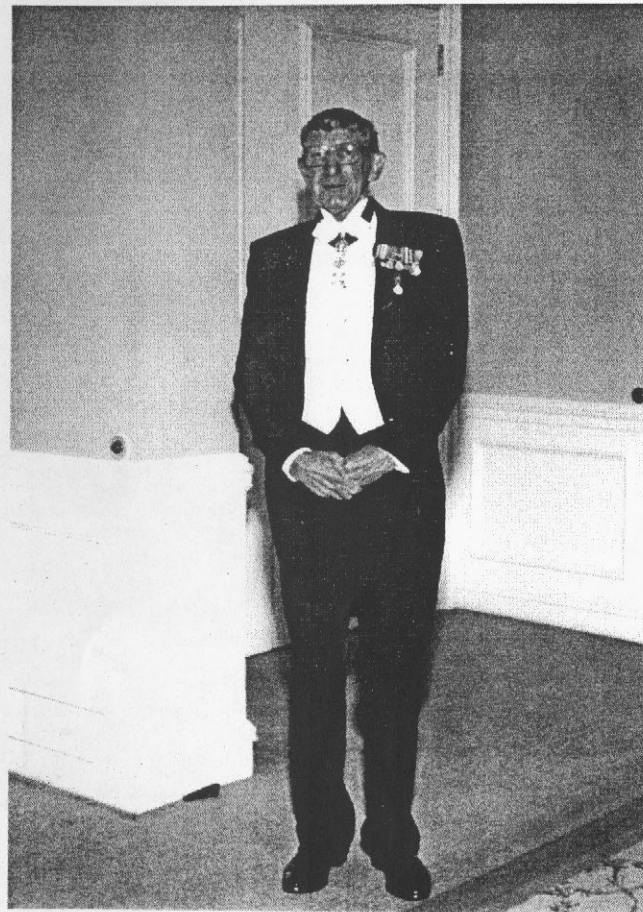
District Registration No. 726 (Signature of District Registrar)

IMPORTANT: All changes or corrections made when completing this form must be initialled by the person signing the form. CITIZENSHIP (NATIONALITY) is defined in terms of the country to which the person owes allegiance. The term "Canadian" should be used as descriptive of a person who was born in Canada or who has rights of Citizenship in Canada, unless he or she has subsequently become the citizen of another country. RACIAL ORIGIN - State the racial origin, traced through the father, in terms of the people or race to which the person belongs such as: English, Scottish, German, etc. or in terms of one of the following racial groups: - White, native Indian, Negro, Chinese, Japanese or other.

DO NOT WRITE BELOW THIS LINE - OFFICE USE ONLY

968 BALMORAL

# Barney Bethune Hagar



23 November 1920 - 6 July 2000

TC pgD 1221 Tutors\*  
3010 Vacation Home Swapping  
10 July 2000

se check your ad the first day it appears. If you find an

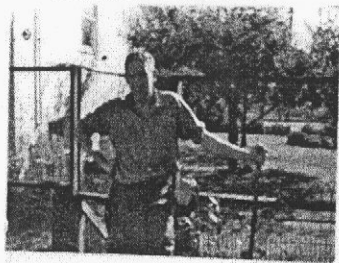
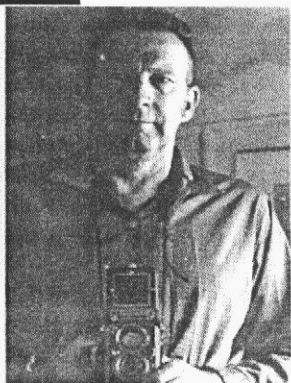
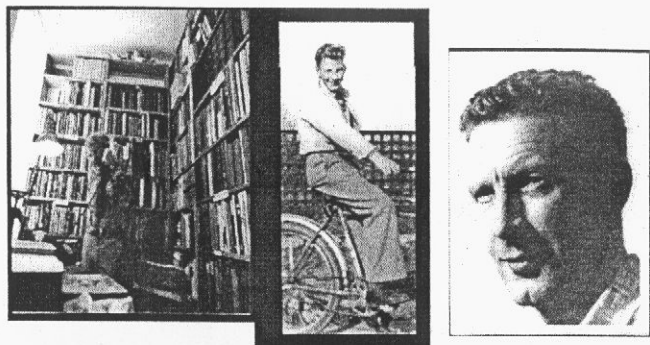
2 DEATHS and FUNERALS 60

**HAGAR** – Barney Bethune. Born in Strawberry Vale, Victoria, on November 23, 1920. Died in Victoria on July 6, 2000. Attended Monterey and Oak Bay High Schools. Commenced working in a Stock Broker's office at age 15. Joined the 5th B.C. Coast Brigade Militia, in February, 1939 and the Regular Army, at Fort Macauley, in August, 1939. Proceeded overseas, in January 1941, with the 3rd Light AA Regt. (16 Bty). Was actively engaged in the Defence of Great Britain (2nd Canadian Infantry Div.). Went through the Normandy Campaign, Battles of the Schelde Estuary, Reichwald and Hochwald forests, Northern Holland and ended VE day outside Oldenburg, Germany. In civilian life, became known in the Insurance and Real Estate business, was a Notary Public, in and for the Province of B.C. and was a Conveyancer for many years. With his wife, Joanna, became a full-time Antiquarian bookseller as proprietors of Poor Richard's Books, in Victoria and members of the Antiquarian Booksellers Assn of Canada. Member of the Union Club of British Columbia, the 78th Fraser Highlanders and actively devoted to the Military and Hospitalier Order of St. Lazarus of Jerusalem, Grand Priory of Canada and of the British Columbia Commandery (a Crusader order and Christian Assembly devoted to Charitable works since 1099) in which he held the rank of Knight Commander. Lately a member of the City of Victoria Steering Committee in revising the North Park Community Plan. A keen gardener, reader and a serious cat person. Survived by his loving wife, Joanna (nee Rindal); sons, John and Kaare; daughter, Lorna; and several grandchildren.

Memorial Service to be held at a later date. No flowers by request.

FIRST MEMORIAL FUNERAL SERVICES  
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