People

113 Clarence St. **1905** (111 Clarence).

Date	Name	Land	Improvements
1902/3	Johnstone, Mrs. J.	600	-
1904/5	Pike, Albert	"	-
1906	Pengelly, Norah	"	1600
1907	"	750	1800
1908	"	900	"
1909	"	1100	"
1910	"	1400	"
1911	Powell, Montague Tyndale	1750	"
1912	"	2250	1900
1913/14	Milligan, Jas. P.	2800	"
1915	"	2650	"
1916	"	2160	1710

Legal Description:

Lot 11, Block 9, Beckley Farm

113 Clarence – CD's
1908
1909
1910/11
1912 Powell, Montague Ty OT Chauffeur.
1914 Milligan, James P.
1917 Daby, Geo H. (not in people section) + 1918
1920 - Armstrong
1921 Armstrong, Fredk C filer Cameron Lbr Co.
1924 Irvine, Fred carp.
1929 " same.
1931 same
1937 Matcham, A Lot E (Margt J) bk pr MacDonald Elec
1939 same
1941 - Pells, John S (Constance) chf clk Can Gov't
1943 - Nelson, Adolf (Lily) emp VMD
1946 Thomas, Geo F. (Charlotte E) civ eng.
1945 Thomas, Geo F.
died in VC in 1967 at 75
1951 same
there in 1955 Gone by 1967

113 Clarence St

Charles Albert Pike ?
Gertrude Maud Robbins
1912 8 29
VICTORIA
1912-09-023782
B11370

check col
no.

~~Albert Pike~~
~~1943 3 5~~
~~87~~
~~VICTORIA~~
~~1943-09-620820~~
~~B13178~~
? 1 Col

Francis T. Pengelley
~~Ho~~ Norah Denny
1907 1 16
VICTORIA
1907-09-015035
B11369

1907.01.18,05

Francis T Pengelley
1968 3 16
90
VICTORIA
1968-09-003857
B13288

1 Col

Norah Denny Pengelley
1961 7 25
85
VICTORIA
1961-09-008703
B13252.

ity Colonist

CLASSIFIED OR WANT
ERTISEMENTS

ord each insertion, twelve
week, with a minimum of
with order. No advertise-
for less than twenty-five

neral Notices $1.50 first
or each additional inser-
Cards of Thanks and
tices, $1.50 per insertion.

$1.00 per insertion.

desire may have replies
ox at The Colonist and
eir private address. A
nts is made for mailing
case add three words
) to the count for the

aders of our advertise-
isers to give address as
bers, as it is not always
nicate through the phone.

nate on account of error
be made within thirty
e of the same, otherwise
allowed

ll not be responsible for
correct insertion of any
ered for more than one

vice is available every
to 9 p.m., excepting
all Empire 4114.

on. Classified Ads should
before 9 p.m. on the
ublication.

or The Sunday Colonist
to 9 p.m. on Saturdays.

IFICATIONS

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Rent 49A
Wanted 50A
Beauty Specialists 21A
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Male 17
naces 40I
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..... 41A
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ous 38
to Rent 55B
Wanted 57B
lp 14
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2 DEATHS
(Continued)

CRAWFORD—There passed away at her residence, 658 Niagara Street, on Thursday, March 4, Margaret Elizabeth Crawford, in her eightieth year. The late Mrs. Crawford was born in Collingwood, Ont., and lived for many years at Hanna, Alberta, and came to Victoria three months ago. She leaves in sorrow her husband, John Wallace Crawford, now in Ontario; two sons, Roy, with the R.C.A.F. in the East; Russell, at Calgary, Alta., and four daughters, Mrs. C. E. Anderson, of Kashabowie, Ont.; Mrs. Thomas Todd, of Redcliffe, Alta.; Mrs. Garfield Webb, of Alix, Alta., and Mrs. C. T. Anderson, of Victoria; also twenty-two grandchildren.

The remains are resting at the Thomson Funeral Home from where funeral services will be held on Monday afternoon, March 8, at 2:30. Rev. G. A. Reynolds will officiate and interment will be in the Royal Oak Burial Park.

Daily Colonist March 6, 1943

PIKE—At the family residence, Milnes Landing, Sooke, there passed away Friday, March 5, Albert Pike, at the age of seventy-eight years. The late Mr. Pike was born in England, and moved to Milnes Landing twenty-four years ago. He is survived by his wife, Mary, and one son, Robert, at Milnes Landing.

Funeral services will be conducted Monday afternoon at 2:30 o'clock from the parlors of the S. J. Curry & Son Funeral Home. Rev. D. Munro will officiate and the remains will be laid to rest in the Colwood Burial Park. (It is requested that no flowers be sent).

SPARROW—At the St. Joseph's Hospital on Thursday, March 4, John Edward Sparrow, 913 Wollaston Street, aged fifty years. The late Mr. Sparrow was born in Calgary, Alberta, and had resided in Victoria and district for the past eleven years and was employed in the Provincial Government as an auditor for the past nine years. Besides his widow, Pearl, he leaves to mourn his loss one son, Petty Officer John Edward Peter Sparrow, R.C.N.; two daughters, Mrs. Raymond White, of View Royal, and Mrs. A. G. Higgins, 913 Wollaston Street; three brothers, A. C. Sparrow, of Calgary, Alta.; Frank, in the R.C.A.F., and Ray, in New York; four sisters, Miss Janet Sparrow, Mrs. Walter Fulton, Mrs. A. G. Plunkett, and Miss Mona Sparrow, all residing in Calgary, Alberta.

Funeral services will be announced later by McCall Bros., funeral directors.
(Calgary papers please copy.)

6 FUNERAL DIRECTORS

B.C. FUNERAL CO. (HAYWARD'S), LTD.
Established 1867
Moderate Charges — Lady Attendant
734 Broughton Street
Calls Attended to at All Hours

S. J. CURRY & SON
Funeral Directors
Corner Quadra and Broughton Streets
Phone G 5512

McCALL BROS.
"The Floral Funeral Home"
Phone G arden 2012
Office and Chapel, Corner Johnson and Vancouver Streets

SANDS MORTUARY, LIMITED
1803 Quadra Street — Phone E 7511
Beautiful Chapel With Pipe Organ
Distinctive Service at Reasonable Cost

THOMSON FUNERAL HOME
Established 1911, Formerly of Winnipeg
Lady Assistant — Licensed Embalmer
1625 Quadra Street — Phone G 2612

7 FLOWERS

ALL Floral Work Artistically Designed. We grow our flowers. Brown's Victoria Nurseries, 618 View — G 6612 - G 3521

ANY FLORAL DESIGNS at lowest prices. N. B. Pollock, 1315 Douglas. G 5315

THE POSY SHOP, 623 FORT STREET—Floral tributes, fresh cut flowers, wedding bouquets, corsages. Phone G 5422.

FUNERAL DESIGNS
Weddings, Bouquets, Corsages
Fresh-Cut Flowers Delivered
WOODWARDS, FLORISTS
619 Fort Street — Phone G 5614

10 COMING EVENTS

14 WANTED—FEMALE HELP
(Continued)

COOK-GENERAL, MODERN HOME. Electrical appliances; sleep in or out. Three adults, $30 a month. E 2443 or E 6014.

CAPABLE WOMAN TO TAKE CHARGE of small house for few weeks; two adults and baby, newly born. G 8293.

GENERAL MAID, FRENCH OR English speaking, for small home, 3 in family. Phone G arden 6510.

GENERAL HELP FOR LADY WITH small baby in apartment. G 6257.

LEARN HAIRDRESSING — THERE IS A serious shortage of operators. Course starting now. Winter terms. Apply Victoria Hairdressing School, Woolworth Building.

NURSEMAID IN ESQUIMALT FOR afternoon. Phone G 2147.

PRACTICAL NURSE WANTED FOR elderly lady. State references and salary expected. Box 4433, Colonist.

RELIABLE WOMAN FOR HOUSEWORK, part or whole time. Three in family. Close to Uplands car line. G 7522.

RELIABLE WOMAN FOR GENERAL housework three mornings a week. G 4347.

RELIABLE GIRL OR WOMAN FOR general help. E 6685.

UNDERGRADUATE OR PRACTICAL nurse for general duty nursing. Would give willing girl practical training. Box 5292, Colonist.

WANTED FOR INSPECTION WORK and part-time office duties. Must have stenographic and business experience. Apply Employment and Selective Service Office. Order No. 227.

WILL GIVE ROOM AND BOARD TO serviceman's wife in exchange for light household duties; four adults in family; no objection to one small child. G arden 1221.

WANTED—TAILORESS, ALSO POWER machine operator. Apply Employment and Selective Service Office. Order No. 062.

WANTED EXPERIENCED SEAMSTRESS, for full or part-time work, for ready-to-wear alterations. Apply Selective Service Office. Order No. 179.

WANTED—CHILDREN'S NURSE, APRIL 15, boys 3 and 5 years. Box 5269, Colonist.

WANTED WOMAN FOR 1 DAY'S housework. B 3967 (Doxsee).

WANTED—HELP FOR ISLAND HOME. Write Strathcona Hotel, Mrs. Maude.

HELP WANTED

ORGANIST WANTED
EXPERIENCED PIPE ORGANIST FOR Centennial United Church. References required. Box 5267, Colonist.

15 TEACHERS WANTED

WANTED IMMEDIATELY, TEACHER for Christina Lake rural school. Salary $940. E 0906.

16 AGENTS WANTED

WORK FOR YOURSELF — SPARE TIME! BIG MONEY SELLING PORTRAITS. Send for catalogue. United Art Co., Toronto

17 SITUATIONS WANTED—MALE

BULLDOZING, LEVELING, BACKFILLing, road building, clearing. B 3947.

DUMP TRUCK AND DRIVER, $2.25 PER hour. G 1541, 8 a.m.-6 p.m.

EXPERIENCED FARMER AND 17-YEAR-old son wants position on farm. Would take complete charge. Capable, honest. L. Jacob, 1721 Franklin Street, Vancouver.

ELDERLY GARDENER IS AT LIBERTY. Take charge of property. Reliable. Living quarters required. Box 5295, Colonist.

RESPECTABLE COUPLE OFFER LIGHT

DOUBLE SERVICE IN WANT ADS

You can telephone your answers as well as your classified advertisements to The Colonist. Readers are often interested in Want Advertisements that do not carry the names or addresses of advertisers but a Colonist box number. For the accommodation of those readers who find it inconvenient to write an answer and to serve the advertiser better

We Will Take Replies to Box Numbers Over the Telephone

The Colonist service is available from 8 A.M. to 9 P.M., excepting Sundays. Phone Empire 4114.

21 PERSONAL
(Continued)

LONELY? — CANADIAN FRIENDSHIPS. Hundreds of members, all ages, cities and country, including Victoria and British Columbia, widows with farms and city property. Housekeepers, city and country girls. Particulars 10c. Ladies free. Western Social Club, Sub. 23, Edmonton, Alta.

METAPHYSICAL Library, $1 Monthly, 2 to 5 p.m. 119 Stobart Bldg., Yates St.

PRINTING AND RUBBER STAMPS — Sweeney-McConnell, 1012 Langley. G 2412

SHOTBOLT'S BALSAM OF HONEY—FOR coughs, colds and bronchitis. Shotbolt's Drug Store, 589 Johnson Street.

SEND A RECORD OF YOUR VOICE TO the folks at home. M. Kersey, G 6310.

SLIP COVERS MADE TO ORDER; UPholstery work. Reasonable. B 2760.

1200 ITEMS—1200 BLOCK, DIGGON'S

YOUR WEDDING STATIONERY—INVITATIONS, ANNOUNCEMENTS, ETC.
Let Us Attend to This Important Item for You
THE COLONIST PRINTING DEPARTMENT
1211 Broad Street — Victoria, B.C.

25c THE PHOTO MILL 25c
P.O Box 335, Vancouver
Rolls Developed and Printed, 25c
12 Reprints, 5 x 7 Enlargements, 35c

BARBARA GOULD COSMETICS
"The Royal Road to Loveliness"
Darling's Pharmacy, Fort at Broad

21A HAIRDRESSERS AND BEAUTY SPECIALISTS

A PERMANENT WAVE INDIVIDUALLY styled. Special prices on shampoo and finger wave. Bert Waude Salon, 718 Yates Street. Telephone E 4023.

HAVE YOUR NEW SPRING PERMAnent now by a skilled operating staff. Reimer's Beauty Salon, 714 View. E 4432.

NEW PERMANENTS! FINE HAIR A "A" specialty! Bobette Beauty Salon, Room Campbell Building. G 6852

PREPARE for Your New Spring Permanents now by having Breck reconditioning treatments. Phone for appointment. Avalon Beauty Shop, 1104 Douglas. E 0522.

SUPERFLUOUS HAIR — TREATMENT weakens growth at SUSSEX BEAUTY SALON—E 5115

TYRRELL'S, LTD., HAIR STYLISTS — Croquignole, spiral and machineless permanent wave specialists at D. Spencer

113 Clarence

07-09-015035 6035

BIRTHS, DEATHS AND MARRIAGES REGISTRATION ACT.

SCHEDULE C.—Marriages.

Registration District of

No. 14

His name.	Francis Tristram Pengelley
Age.	29 years
Residence when married.	132 Pandora St. Victoria B.C.
Place of birth.	Port Hope, Ontario, Can.
Condition (Bachelor or Widower.)	Bachelor.
Rank or profession.	Salesman.
Names of parents.	Fanny and Theodor R. Pengelley
Her name.	Norah Denny
Age.	29 years

VICTORIA TIMES
1907-01-18
PAGE-5

—Rev. Dr. Reid officiated yesterday at the marriage of F. P. Pengelly, a popular employee of Weiler Bros., and Miss Norah Denny. The ceremony took place at the residence of the bride's mother, Pandora street.

Particulars of Wedding Solemnized in Christ Church Cathedral on Monday.

On Monday evening, in Christ Church cathedral, the marriage of Thomas Lea, manager of the Saunders Grocery Company, and formerly of Worcester, Eng., and Miss Anna Beyeler, of Berne, Switzerland, was solemnized by Rev. Canon Beanlands. The bride was attended by Miss Marjorie Sherburn and was given away by Mr. Wenger. Mrs. Bancroft, the bridegroom's sister, entertained the wedding party to tea after the ceremony, and the following guests were present: Mr. and Mrs. Lea, Mr. and Mrs. Bancroft, Mr. and Mrs. Wenger, Mr. T. Mullen, Miss Marjorie Sherburn, Mr. Charles Muriset, Mr. Emil Muriset, Mrs. and Miss Dack, Mrs. Pope, Miss Haysting. The bride wore a handsome dress of cream crepe de chine daintily finished with shirred ribbons.

Mr. and Mrs. Lea will reside in their new home, Bencoveen, 54 Frederick street.

...ny
...or Denny
...oria B.C.

...r. Victoria. B.C.

...stram Pengelley
...mentioned Act.

Dated the 31st day of January A.D. 1907

Signature of Clergyman, Minister or Registrar. Rev. John Reid, L.L.D.

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.

6,000 10 1905

113 Clarence

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) 61-09-003703

1. PLACE OF DEATH

Name of city or place: Victoria, B. C. (If outside city or municipal limits add "Rural") — Name of Municipality (if any):

Street or road: Blackwood Street (If death occurred in a hospital or institution, give the name instead of street and number) — House No. 2540

2. LENGTH OF STAY (in years, months and days)	In Municipality where death occurred	In Province	In Canada (if immigrant)
	Fifteen Years	85 Years	85 Years

3. PRINT FULL NAME OF DECEASED: Pengelley (Surname or family name) — Norah Denny (All given or Christian names in full)

4. PERMANENT RESIDENCE OF DECEASED: 51-033-09

Name of city or place: Victoria, B. C. (If outside city or municipal limits add "Rural") — Name of Municipality (if any): Victoria

Street or road: Blackwood Street — House No. 2540

5. SEX	6. CITIZENSHIP (See marginal note)	7. RACIAL GROUP (See marginal note)	8. Single, Married, Widowed or Divorced (Write the word)	9. BIRTHPLACE: (City or Place and Province or Country)
Female	Canadian	English	Married	Victoria, B. C.

10. Date of Birth (Month by name)	(Date)	(Year)	11. AGE (Last Birthday) YEARS	if under 1 year MONTHS	if under 1 month DAYS	if under 24 hours HOURS	if under 1 hour MIN.
April	6th	1876	85 Years				

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. (If labourer specify kind of work above) (If Housewife in own home answer "At Home")

13. Date deceased last worked at this occupation: July 15, 1961 — 14. Total years spent in this occupation: Many Years

15. If married, widowed or divorced give name of husband or maiden name of wife of deceased: Francis Tristram Pengelley

16. Name of father: Not Known (Surname or family name) (All given or Christian names)

17. Maiden name of mother: Not Known (Surname or family name) (All given or Christian names)

18. Birthplace — Father: England (City or Place and Province or Country) — Mother: 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, B. C. this 25th day of July 19 61
Signature of informant: [signature] (Married woman not to use husband's initials or given names) — Relationship to deceased: Hsw.
Address of informant: 2526 (House No.) BLACKWOOD (Name of Street) VICTORIA (Name of City, Municipality or Place) (Province or State)

20. Burial, Cremation or Removal: Burial (State which) — Date: July (Month by name) 27th (Date) 19 61 (Year)
Place of Burial or Cremation: Colwood Burial Park (Municipality, etc., where Cemetery located) — Name of Cemetery: Colwood Burial Park

21. Undertaker's Name: B.C. Funeral Co. (Hayward's) Ltd. Address: 734 - Broughton St., Victoria (Name of City, Municipality or Place) (Province or State)

MEDICAL CERTIFICATE OF DEATH

22. DATE OF DEATH: July (Month by name) 25th (Date) 19 61 (Year)

23. I HEREBY CERTIFY that I attended deceased from ... 19... to ... 19..., and last saw her alive on ... 19...

CAUSE OF DEATH

I. ...on directly leading to death ...ean the mode of dying, e.g., ...isthenia, etc. It means the ...r complication which caused
(a) ... due to (or as a consequence of)
...es ...ons, if any, giving rise to ...se, stating the underlying
(b) ... due to (or as a consequence of)
(c) ...
II ... conditions contributing to ...not related to the disease ...using it.

Approximate interval between onset and death

...id the death occur either during pregnancy or within 90 days following pregnancy? ... Yes or No
...a recent surgical operation? ... (b) Date of operation ... 19...
...ngs ...n ... (d) Was there an autopsy? ...
...eath, fill in also: (a) Accident ☐; Suicide ☐; Homicide ☐ (b) Date of injury ... 19...
...injury occur? ...
...istained? ... (e.g., fracture of skull, left leg, etc., dislocation of-, burn to-, etc.)
...injury occur? (home, farm, industrial place, highway, etc.) ...

27. Signed by ... Designation ... M.D., Coroner, etc.
Address ... Date ... 19...

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 VICTORIA, B. C.
Dated JUL 28 1961 19...
District Registration No. 1075 — Frances Bruce (Signature of District Registrar)

(SEE REVERSE SIDE FOR INSTRUCTIONS)

DO NOT WRITE BELOW THIS LINE → OFFICE USE ONLY

9004-3,14: 11-7-59

R BINDING. WRITE PLAINLY, WITH UNFADING INK. THIS IS A PERMANENT RECORD.
terms of the country to which the person owes allegiance. The term "Canadian" should be used as descriptive
as rights of Citizenship in Canada, unless he or she has subsequently become the citizen of another country.
ration it is necessary to specify only to which of the following broad racial groups the person belongs, as traced
to, Chinese, Japanese, or other.

...Funeral Chapel ... Williamson, July 27, at ... Mass will be celebrated in St. Andrew's Cathedral on Thursday, July 27, at 9.30 a.m. Interment in the family plot in Ross Bay Cemetery.
Daily Col. p26 61-07-24
PENGELLEY ... July 25, 1961, at Victoria, B.C., Mrs. Norah Denny ... Property of 2540 Blackwood ... aged 85, a native daughter of this city. She was a member of the Church of Our Lord. Survived by her husband, Frank T. Pengelley; one son, Frank T., both of Victoria. Funeral service Hayward's Chapel, Thursday, July 27, 1961, at ... p.m., Rt. Rev. Bishop D. A. C. Knowles officiating. Interment at Royal Oak Burial Park. Supervised parking adjoining chapel.

1 113 Clarence 51 33

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) 68-09-003651

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: Mt. St Mary Private Hospital (If death occurred in a hospital or institution, give the name instead of street and number) House No.

2. LENGTH OF STAY (In years, months and days)	In Municipality where death occurred	In Province	In Canada (if immigrant)
	70 years	70 years	all life

3. PRINT FULL NAME OF DECEASED Pengelley (Surname) Francis Tristram (All given or Christian names in full)

4. PERMANENT RESIDENCE OF DECEASED
Name of city, village, town, district municipality or place: Victoria, B.C. 51-033-09 (If outside city or municipal limits add "Rural")
Street or road: Blackwood St. House No. 2526

5. SEX	6. CITIZENSHIP (See marginal note)	7. RACIAL ORIGIN (See marginal note)	8. Single, Married, Widowed or Divorced (Write the word)	9. BIRTHPLACE (City or Place and Province or Country)
male	Canadian	white	widowed	Ontario, Canada

10. Date of Birth (Month by name) (Date) (Year)	11. AGE (Last Birthday) YEARS	If under 1 year MONTHS	If under 1 month DAYS	If under 24 hours HOURS	If under 1 hour MIN.
May 31 1877	90				

OCCUPATION
12. (a) Trade, profession or kind of work as logger, fisherman, office clerk, etc.: salesman
(b) Kind of industry or business, as logging, fishing, bank, etc.: retail furniture merchant (If labourer specify kind of work above) (If Housewife in own home answer "At Home")
13. Date deceased last worked at this occupation: 1960
14. Total years spent in this occupation: adult life

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

16. Name of father: Pengelley (Surname) Theodor (All given or Christian names)
17. Maiden name of mother: Swann (Surname) Annie (All given or Christian names)
18. Birthplace – Father: Ontario (City or Place and Province or Country) Mother: Ontario (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 16 day of March 19 68
✓ Signature of informant (Married women not to use Husband's initials or given names) Relationship to deceased: son
Address of informant: 2526 (House No.) Blackwood St. (Name of Street) Victoria, B.C. (Name of City, Municipality or Place) (Province)

20. Burial, Cremation or Removal: burial (State which) Date: March (Month by name) 19 (Date) 68 (Year)
Place of Burial or Cremation: Colwood, B.C. (Municipality, etc., where Cemetery located) Name of Cemetery: Hatley Memorial Gardens
21. Undertaker: Name: Hayward's Funeral Chapel Address: Victoria, B.C. (Name of City, Municipality or Place) (Province)

MEDICAL CERTIFICATE OF DEATH

OF DEATH March (Month by name) 16 (Date) 19 68 (Year)
EBY CERTIFY that I attended deceased from June 1966
March 16 19 68., and last saw h im alive on March 14 19 68.

I #222
condition directly leading to death es not mean the mode of dying, e.g., ilure, asthenia, etc. It means the injury, or complication which caused

CAUSE OF DEATH — Approximate interval between onset and death

(a) myocardial degeneration
due to (or as a consequence of)
(b)
due to (or as a consequence of)
(c)

It causes conditions, if any, giving rise to ve cause, stating the underlying on last.

II
lificant conditions contributing to th, but not related to the disease ition causing it.
senility

oman, did the death occur either during pregnancy or within 90 days following pregnancy? ..... 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? .....

tc., dislocation of -, burn to -, etc.)
, etc.) .....
esignation M.D. M.D. or Coroner.
ate June 15 19 68

(Signature of District Registrar)

(UCTIONS)

Form 6 — PROVINCE OF BRITISH COLUMBIA — DEPARTMENT OF HEALTH SERVICES AND HOSPITAL INSURANCE — DIVISION OF VITAL STATISTICS — REGISTRATION OF DEATH

completion of this form must be initialled by the person certifying the information.
ty to which the person owes allegiance. The term "Canadian" should be used as descriptive
ship in Canada, unless he or she has subsequently become the citizen of another country.
ther, in terms of the people or race to which the person belongs such as: English, Scottish,
ing racial groups: -- White, native Indian, Negro, Chinese, Japanese or other.

IMPO
CITIZENSHIP (N
of a person who w
RACIAL ORIGIN

Janzow officiating. Interment at Royal Oak Burial Park. March 17 1968 PT

PENGELLEY—At Victoria, B.C., on March 16, 1968, Francis T. Pengelley, aged 90, of 2526 Blackwood St., a pioneer resident of this city. Survived by a son, Frank Pengelley, Victoria; a sister, Margaret, Rice Lake, Ont.; 2 bothers, Isaac Brock, and Roy Pengelley, Rice Lake, Ont. He was a member of the A.O.F., Columbia Lodge No. 2. Funeral service Tuesday at 10:30 a.m. in HAYWARD'S FUNERAL CHAPEL, 734 Broughton St. Rev. Angus Cameron of Lundavra officiating. Interment in Colwood Burial Park. Flowers gratefully declined. Supervised parking adjoining the chapel.

Daily Colonist

PENGELLEY—The death occurred this morning of William Denny Pengelley, aged 22 years, son of Mr. and Mrs. Francis Pengelley of 2547 Prior Street. He was born in Victoria and is survived by his parents and one brother, Frank, at home. Funeral services will be held at McCall Bros.' Funeral Home on Friday afternoon at 3.30, followed by interment in Colwood Burial Park.

113 Clarence
James Bay.
Son of Francis Pengelly.
who lived at 113 Clarence.

Times p 13
39-04-26

GR 2962
Volume 021

BRITISH COLUMBIA. DIVISION OF VITAL STATISTICS.
Marriage registrations 008667 to 009052
1911

113 Clarence

11-09-021830

8830

BIRTHS, DEATHS, AND MARRIAGES REGISTRATION ACT

RECEIVED
MAY 8 1911
REGISTRAR B.D. & M.
VICTORIA B.C.

SCHEDULE C.—Marriages.

Registration District of Victoria City B.C.

Bridegroom.	No.	211
	His name.	Montague Tyndale Powell
	Age.	26.
	Residence when married.	Victoria city B.C.
	Place of birth.	Salisbury. Wilts England
	Condition (Bachelor or Widower.)	Bachelor
	Rank or profession.	Automobile Mechanic
	Names of parents.	John Alexander Tyndale Powell and Elisabeth Powell
Bride.	Her name.	Flora Catherine Ann Shore
	Age.	19.
	Residence when married.	Victoria city B.C. 447 Kingston street
	Place of birth.	Victoria city B.C.

113 clarence

VICTORIA TIMES
1911-05-08
PAGE-15

A pretty home wedding was solemnized Friday afternoon between two well-known young people of this city, when Miss Flora Shore, daughter of Mr. and Mrs. A. Shore, 447 Kingston street, became the bride of Mr. Montague Powell. The ceremony was performed by the Rev. Dr. Reid at the residence of the bride's parents in the presence of intimate friends of the contracting parties. The bride, who looked exceedingly charming in a tailored costume of cream serge, with hat to match, was attended by Miss Lindsay as bridesmaid, dressed in pale blue and large picture hat, while Mr. Victor Gillespie acted as best man. The happy couple, who were the recipients of many handsome presents, left on the afternoon steamer for Vancouver en route to the old country. A Continental tour lasting about three months, will follow the conoration festivities. The wedding party arrived at the boat at racing pace, but were overtaken by a long string of automobiles conveying the guests, and the well-wishers were not sparing in the use of rice.

The marriage of Mr. Alfred Joseph Cromwell, youngest son of Mr. Samuel Cromwell, Dublin, Ireland, and Miss Annie McLean Fulton, youngest daughter of Mr. Peter Fulton, Lanarkshire, Scotland, took place on Saturday at the R. C. cathedral. The honeymoon will be spent in California.

* * *

113 Clarence

51 60

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) 63-09-013379

1. PLACE OF DEATH
Name of city, village, town, district municipality or place: Saanich, B.C. (If outside city or municipal limits add "Rural")
Street or road: Clovelly 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 years, months and days)	In Municipality where death occurred	In Province	In Canada (if immigrant)
	5 years	18 years	30 years

3. PRINT FULL NAME OF DECEASED Powell (Surname) Agnes Catherine Edith (All given or Christian names in full)

4. PERMANENT RESIDENCE OF DECEASED
Name of city, village, town, district municipality or place: Saanich, B.C. 51-060-11 (If outside city or municipal limits add "Rural")
Street or road: Clovelly Terrace House No. 1196

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

10. Date of Birth (Month by name)	(Date)	(Year)	11. AGE (Last Birthday) YEARS	if under 1 year MONTHS	if under 1 month DAYS	if under 24 hours HOURS	if under 1 hour MIN.
June	24th	1890	73				

OCCUPATION
12. (a) Trade, profession or kind of work as logger, fisherman, office clerk, etc. Retired Registered Nurse
(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 1945
14. Total years spent in this occupation 35 years

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

16. Name of father Powell (Surname) Francis Barcham (All given or Christian names)
17. Maiden name of mother Reid (Surname) Edith Annie (All given or Christian names)
18. Birthplace – Father England (City or Place and Province or Country) Mother 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, B.C. this 14th day of November 19 63

Name of informant Irene E. Hardy (Married women not to use Husband's initials or given names) Relationship to deceased sister
Address of informant 41 High Street (House No.) View Royal, B.C. (Name of Street) (Name of City, Municipality or Place) (Province)

Cremation or Removal Cremation (State which) Date November 15th (Month by name) (Date) 19 63 (Year)
Place of Burial Saanich, B.C. (Municipality, etc., where Cemetery located) Name of Cemetery Royal Oak Crematorium
Undertaker: – Sands Mortuary Limited Address Victoria, B.C. (Name of City, Municipality or Place) (Province)

MEDICAL CERTIFICATE OF DEATH

I DECLARE THAT I ATTENDED THE DECEASED FROM November 13th (Date) 19 63 (Year)
I HEREBY CERTIFY that I attended deceased from Dec 1962 to Nov 13 1963, and last saw h alive on Nov 13 1963.

I. Disease or condition directly leading to death (This does not mean the mode of dying, e.g., heart failure, asthenia, etc. It means the disease, injury, or complication which caused death.)
II. 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.

CAUSE OF DEATH	Approximate interval between onset and death
(a) Emphysema	20 yrs
due to (or as a consequence of) (b) Bronchiectasis	70 yrs
due to (or as a consequence of) (c)	
Coronary thrombosis	5 yrs

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? No (b) Date of operation 19
(c) State findings of operation (d) Was there an autopsy? Yes
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 Dan Neely Designation M.D. or Coroner.
Address Victoria Date Nov 14/63 19

28. Print name of Doctor or Coroner, whose signature appears above
29. Notations

30. I hereby certify that the above return was made to me at VICTORIA, B.C.
Dated NOV 19 1963 19
District Registration No. 1714 (Signature of District Registrar)

(SEE REVERSE SIDE FOR INSTRUCTIONS)

DO NOT WRITE BELOW THIS LINE → OFFICE USE ONLY

9004–3.14: 6-12-62

IMPORTANT – CITIZENSHIP (NATIONALITY) of a person who was born a British subject is "British". RACIAL ORIGIN – State whether Aboriginal, European, Asiatic, African, West Indian, Negro, Chinese, Japanese or other. Every allegiance. The term "Canadian" should be used as descriptive of a person who has subsequently become the citizen of another country.

Death Notice

5 DEATHS AND FUNERALS

POWELL—At Clovelly Private Hospital, on November 14, 1963, Miss Agnes Catherine Edith Powell, aged 83 years; born in Norwich, England, and a resident of Victoria, B.C. for the past five years. She leaves her brother, C. H. E. Powell, Ottawa, Ontario; her sister, Mrs. G. E. A. Irene E. Massy, St. High, Surrey, and sisters, Rita and Constance Powell, in England.
Services will be held in the Sands Mortuary Limited Memorial Chapel of Chimes on Friday, December 13, 1963, at 1:30 p.m., Canon Robert Willis officiating.

GR–2951 BRITISH COLUMBIA. DIVISION OF VITAL STATISTICS.

.61 113 Clarence 03-033

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) 73-09-015966

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: GLENWARREN PRIVATE HOSPITAL (If death occurred in a hospital or institution, give the name instead of street and number) House No.

2. LENGTH OF STAY (in years, months and days): In Municipality where death occurred: 5 years; In Province: 59 years; In Canada (if immigrant): 68 years

3. PRINT FULL NAME OF DECEASED (Surname): POWELL (All given or Christian names in full): MONTAGUE

4. PERMANENT RESIDENCE OF DECEASED:
Name of city, village, town, district municipality or place: Victoria, B.C. 03-033-05 (If outside city or municipal limits add "Rural")
Street or road: Glenwarren Private Hospital House No.

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

10. Date of Birth (Month by name)	(Date)	(Year)	11. AGE (Last Birthday) YEARS	if under 1 year MONTHS	if under 1 month DAYS	if under 24 hours HOURS	if under 1 hour MIN.
June	14	1884	89				

OCCUPATION
12. (a) Trade, profession or kind of work as logger, fisherman, office clerk, etc.: Cab Driver Grey Line
(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: N.K.
14. Total years spent in this occupation: N.K.

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

16. Name of father: Powell (Surname) N.K. (All given or Christian names)
17. Maiden name of mother: N.K. (Surname) N.K. (All given or Christian names)
18. Birthplace – Father: N.K. (City or Place and Province or Country) Mother: N.K. (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 14th day of November 1973
Signature of informant: [signature] (Married woman not to use Husband's initials or given names) Relationship to deceased: None
Address of informant: 1947 Cook St. Vic. Bc (Dept. of Human Resources) (House No.) (Name of City, Municipality or Place) (Province)

20. Burial, Cremation or Removal: Cremation (State which) Date: November (Month by name) 19th (Date) 1973 (Year)
...of Burial ...ation: Saanich, V.I. (Municipality, etc., where Cemetery located) Name of Cemetery: Royal Oak Crematorium
...ker: – McCall Bros. Address: Victoria (Name of City, Municipality or Place) B.C. (Province)

MEDICAL CERTIFICATE OF DEATH
...OF DEATH: November (Month by name) 12 (Date) 1973 (Year)
...BY CERTIFY that I attended deceased from November 1969 ... November 1973, and last saw him alive on 8th Nov. 1973

I 480 X
...condition directly leading to death ...s not mean the mode of dying, e.g., ...lure, asthenia, etc. It means the ...njury, or complication which caused ...t causes ...conditions, if any, giving rise to the above cause, stating the underlying condition last.

CAUSE OF DEATH	Approximate interval between onset and death
(a) Virus pneumonia due to (or as a consequence of)	4 days
(b) due to (or as a consequence of)	
(c)	

II
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? 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. Nelson Designation: M.D. M.D. or Coroner.
Address: 430 - 1105 Pandora Victoria Date: 16th November 1973

28. Print name of Doctor or Coroner, whose signature appears above: J.W. NELSON

29. Notations

30. I hereby certify that the above return was made to me at VICTORIA, B.C.
Dated NOV 26 1973 19
District Registration No. 1965 (Signature of District Registrar)
(SEE REVERSE SIDE FOR INSTRUCTIONS)

DO NOT WRITE BELOW THIS LINE OFFICE USE ONLY

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9004-3.14: 11-12-68

...n of this form must be initialled by the person certifying the information.
...ch the person owes allegiance. The term "Canadian" should be used as descriptive ...Canada, unless he or she has subsequently become the citizen of another country.
...erms of the people or race to which the person belongs such as: English, Scottish, ...l groups: – White, native Indian, Negro, Chinese, Japanese or other.

IMPORTANT: Any c...
CITIZENSHIP (NATIONALITY) ...
of a person who was born in Ca...
RACIAL ORIGIN – State the ra...
German, etc...

...be made to the Cancer ... Caledonia Ave.) Colonist 113 Clarence Nov 15, 1973 p.61
POWELL—In Victoria on November 12, 1973, Montague "Monty" Powell aged 89 years, born in England and resident here since 1914. He was a former well-known driver for the Gray Line.
Funeral service in McCall Bros. FAMILY CHAPEL on Friday, Nov. 16 at 10 a.m., followed by cremation.

GR 2951
Volume 554

BRITISH COLUMBIA. DIVISION OF VITAL STATISTICS.
Death registrations 001001 to 001500

113 Clarence

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 No. 1318
For use of the Registrar of Births, Deaths and Marriages only

1. PLACE OF DEATH — If in Rural Municipality ..... If in City, Town or Village (Name) Victoria Street (Name) Moss House No. 223
(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 25 yrs. (b) In Province Abt. 35 yrs. (c) In Canada (if immigrant) --

3. NAME OF DECEASED MILLIGAN, (Surname) JAMES PETER (Given name or names)

RESIDENCE No. 223 Street Moss 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	5. NATIONALITY (Citizenship)	6. RACIAL ORIGIN	7. Single, Married, Widowed or Divorced (Write the word)
Male	Canadian	Scotch	Widowed

8. BIRTHPLACE Napanee, Ontario (Province or Country)

9. DATE OF BIRTH October 2, 1858 (Month) (Day) (Year)

10. AGE In	Years	Months	Days	If less than one day old
	80	5	22	hrs. or min

OCCUPATION

11. Trade, profession or kind of work as spinner, teamster, office clerk, etc. Apartment House Manager

12. Kind of industry or business, as cotton mill, lumbering, bank, etc.

13. Date deceased last worked at this occupation Abt. 30 yrs. ago

14. Total years spent in this occupation Abt. 10 yrs.

15. If married give name of wife or husband of deceased late Caroline Milligan

FATHER

16. NAME Robert Milligan,

17. BIRTHPLACE Edinburgh, Scotland (Province or Country)

MOTHER

18. MAIDEN NAME Mary ~~Hogg~~ Scott

19. BIRTHPLACE Edinburgh, Scotland (Province or Country)

20. Signature of informant Anna P Okell
Address 223 Moss St. Victoria.
Relationship to deceased daughter

21. Place of Burial, ~~XXXXXXXXXXXX~~ Ross Bay Cemetery
Date of burial ~~XXXXXX~~ March 27, 1939

22. UNDERTAKER HAYWARD'S B.C. FUNERAL CO. LTD.
734 Broughton St., (Name and address) Victoria, B.C.

Sec. 46—Vital Statistics Act makes it the duty of the Undertaker or person acting as Undertaker to obtain all the ... Death" and to file the same with the District Registrar who shall issue the ...

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

MEDICAL CERTIFICATE OF DEATH

23. DATE OF DEATH March 24, (Month) (Day) 19 39 (Year)

24. I HEREBY CERTIFY that I attended deceased from:
Feb 1937 19 ... to March 24 19 39
and last saw h im alive on March 24 19 39

CAUSE OF DEATH

I. Immediate cause — Give disease, injury or complication which caused death, not the mode of dying, such as heart failure, asphyxia, asthenia, etc.
(a) Congestive Heart Failure
due to
(b) Coronary Sclerosis
due to
(c)

II. Other morbid conditions (if important) contributing to death but not causally related to immediate cause.
Pernicious Anaemia

Morbid conditions, if any, giving rise to immediate cause (stated in order proceeding backwards from immediate cause).

25. If a woman, was the death ass...

26. Was there a surgical operation?
State findings

27. If death was due to external ca...
Accident, suicide or homicide?
Manner of injury
Nature of injury
Specify whether injury occurred ... Industry, in home, or in publi...

Signed by Kay
Address Victoria,

28. District Registrar's Record Nu...

29. Filed 27th March

held. 113 Clarence Times 24 Mar 1939 p 3

MILLIGAN — James Peter Milligan, a resident of this city for 25 years, died this morning at the family residence, 223 Moss Street, in his 81st year. He was born in Napanee, Ontario, and leaves one daughter, Mrs. Stanley Okell, and three grandchildren, Clifford and Bruce Irvine, and Mrs. Leonard Kissinger, all of this city. A man of cherry disposition, Mr. Milligan left a host of friends here. Funeral services will be held on Monday afternoon at 2 at Hayward's B.C. Funeral Chapel, followed by interment in the family plot in Ross Bay Cemetery.

1901CC

3 Kings Rd

15/12/07 **Irvine, William**, m, head, m, 10 Sep 1851, 49, BC, CE, Brick lab.
..... **Rems:** SLAC: William Irvine, 10 Sep 1851 - 10 Apr 1922; claims to be 1st white child born at Fort Victoria. HOW3, p.795: William Irvine, b.Victoria, 10 Sep 1851, mar 1 Jan 1883, Victoria, Florence Beatrice Carlow, d.o.Horatio Carlow.
15/12/08 **Irvine, Florance**, f, wife, m, 26 Mar 1861, 39, NB, CE.
..... **Rems:** SLAC: Florence B. (Carlow) Irvine, 1861-1945.
15/12/09 **Irvine, Charles**, m, son, s, 7 Nov 1883, 17, BC, CE, Printer.
..... **Rems:** SLAC: Charles W. Irvine, s.o.William & Florence B. Irvine, 1883 - 11 Dec 1954.
15/12/10 **Irvine, Frederick**, m, son, s, 18 Apr 1885, 15, BC, CE, Messenger boy.
..... **Rems:** SLAC: Frederick Irvine, s.o.William & Florence B. Irvine, 1885 - 1932.
15/12/11 **Irvine, Winfred**, f, dau, s, 10 Jul 1888, 12, BC, CE.
..... **Rems:** SLAC: Winnifred Irvine, d.o.William & Florence B. Irvine, 1888-1940.
15/12/12 **Irvine, Cecil**, f, dau, s, 17 Jan 1891, 10, BC, CE.
..... **Rems:** SLAC: Cecile Irvine, d.o.William & Florence B. Irvine, b.1891.
15/12/13 **Irvine, Kenneth**, m, son, s, 25 Apr 1893, 7, BC, CE.
..... **Rems:** SLAC: Kenneth Irvine, s.o.William & Florence B. Irvine, 1893 - 1966.
15/12/14 **Irvine, Alma**, f, dau, s, -- Sep 1895, 5, BC, CE.
..... **Rems:** SLAC: Alma Irvine, d.o.William & Florence B. Irvine, b.1895.
15/12/15 **Irvine, Duglas**, m, son, s, 18 Jan 1897, 3, BC, CE.
..... **Rems:** SLAC: Douglas Irvine, s.o.William & Florence B. Irvine, 1892 - 1852.
15/12/16 **Irvine, Earl**, m, son, s, 21 Jul 1899, 8 m, BC, CE.
..... **Rems:** SLAC: Earl Irvine, s.o.William & Florence B. Irvine, 1900 - 1941.

1901

113 Clarence

FORM 6. PROVINCE OF BRITISH COLUMBIA 85371

CERTIFICATE OF REGISTRATION OF DEATH

1 PLACE OF DEATH—

If in Municipality ..... (Name) Registered No. 1922 (For use of Registrar of Vital Statistics only)

If in City or Town Victoria (Name) B.C. Street ..... House No. .....

If in hospital or institution, give name Jubilee Hospital

2 NAME OF DECEASED William Irvine

Residence Cedar Hill (Usual place of abode)

PERSONAL AND STATISTICAL INFORMATION

3 SEX	4 RACIAL ORIGIN	5 Single, Married, Widowed or Divorced (*Write the word*)
male	Scotland	married.

6 BIRTHPLACE (Province or Country) Victoria BC

7 DATE OF BIRTH (month, day and year) Sept. 10th. 1851

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

9 LAST OCCUPATION OF DECEASED

(a) Farmer (Trade or occupation or kind of work) (b) ..... (Kind of industry)

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

10 FORMER OCCUPATION OF DECEASED

(a) Farmer (Trade or occupation or kind of work) (b) ..... (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 10 days (b) In province 73 years

(c) In Canada (if an immigrant) 73 years

Parents

12 Name of father John Irvine

13 Birthplace of father Orkney Island Scotland (Province or country)

14 Maiden name of mother Mary ?

15 Birthplace of mother Scotland (Province or country)

16 Informant's name Fred Irvine

Address 111 Clarence St.

17 Relationship to deceased Friend Grandson (son)

18 Place of burial, cremation or removal: Cedar Hill Cemetery — Date of burial: April 13/22

19 Undertaker B.C. Funeral Co (Haywards Ltd) Victoria BC (Name and Address)

MEDICAL CERTIFICATE OF DEATH

20 Date of death April 10th. 1922 (Month, day and year)

21 I HEREBY CERTIFY, that I attended deceased from age 6 19 22 to age 10 19 22 that I last saw h— alive on age 9 19 22 and that death occurred on the date stated above, at 8 m.

The CAUSE OF DEATH was as follows:

Chr. Bright's Disease.

131

(duration) 6 yrs. mos. dys

CONTRIBUTORY (Secondary)

(duration) yrs. mos. dys.

22 Where was disease contracted if not at place of death?

no.

Did an operation precede death? no. Date of .....

Was there an autopsy? no.

(Signed) D. D. McLean M.D.

Address Victoria

Date 7/4/22

State the Disease causing Death, or in death from Violent Causes, state (1) Means and Nature of Injury, (2) whether Accidental, Suicidal or Homicidal.

23 District Registrar's Record Number .....

24 Filed ..... 19 ..... District Registrar

REGISTERED APR 19 1922

REGISTRAR, B.D. & M. VICTORIA, B.C.

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 fyle the same with the District Registrar who shall issue the burial permit. (OVER)

AGE should be stated EXACTLY. PHYSICIANS should STATE CAUSE OF DEATH in plain terms, so that it may be properly classified. State correct 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.

GR 2951
Volume 496

BRITISH COLUMBIA. DIVISION OF VITAL STATISTICS.
Death registrations 000001 to 000500

113 Clarence

VICTORIA

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

166

1 PLACE OF DEATH—

If in Municipality ..... (Name) Registered No. ..... (For use of Registrar of Vital Statistics only)

If in City or Town Victoria (Name) Street Moss House No. 223

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

2 NAME OF DECEASED CAROLINE MILLIGAN.

Residence 223 Moss Street, Victoria, B. C. (Usual place of abode)

A PERMANENT RECORD. Every item of information should be carefully STATE CAUSE OF DEATH in plain terms, so that it may be properly classified. ORIGIN will be described by stating to what race or people the deceased person terms "American" or "Canadian" should not be used as they express citizenship

MARGIN RESERVED FOR BINDING

PERSONAL AND STATISTICAL INFORMATION

3 SEX	4 RACIAL ORIGIN	5 Single, Married, Widowed or Divorced (Write the Word)
Female	Unknown	Married

6 BIRTHPLACE (Province or Country) Cleveland, Ohio

7 DATE OF BIRTH (month, day and year) Oct. 27, 1857

8 AGE In	Years	Months	Days	If less than one day
	77	2	14	....hrs. or....min.

9 OCCUPATION OF DECEASED

(a) Wife of J. P. Milligan (Trade or occupation or kind of work)

(b) ..... (Industry or business)

(c) ..... (Nature of work)

10 NATIVITY ..... 11 CITIZENSHIP .....

12 RESIDENCE ON FARM? ..... 13 IF SO, OWNER OR TENANT? .....

14 HOW LONG IN PROVINCE? ..... years

15 HOW LONG IN CANADA? .....

16 HOW LONG IN CITY OR TOWN? .....

17 WHERE BURIED? .....

18 DATE OF BURIAL 19 35

UNDERTAKER ..... LTD., ..., B.C.

MEDICAL CERTIFICATE OF DEATH

19 Date of death January 10, 1935 19.... (Month, day and year)

20 I HEREBY CERTIFY that I attended deceased from 31st Dec 1934 to 9th Jan 1935 that I last saw her alive on 9th Jan. 1935 and that death occurred on the date stated above, at 12:30 P.m.

The CAUSE OF DEATH was as follows:

Senility 142B

(No disease present)

.....(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) [illegible] M.R.C.P. Lond. M.D. L.R.C.P. Edin. & L.M. Canada.

Address 805 Government St., Victoria.

Date January 11, 1935

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 .....

23 Filed JAN. 12th. 1935 [signature] District Registrar

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

(OVER)

Mrs. J. P. Milligan Called to Rest

Mrs. Caroline Milligan, wife of J. P. Milligan of 223 Moss Street, passed away at noon to-day at the family residence. Mrs. Milligan was born in Cleveland, Ohio, and came to Canada many years ago, first residing in Ottawa, then in the Okanagan, before coming to this city about twenty years ago.

She is survived by her husband, two daughters, Mrs. S. H. Odell and Mrs. F. Irving, three grandchildren and two great-grandchildren. Funeral arrangements will be announced later.

Inclosing Times clipping dated Jan 12 1935

GR 2951 BRITISH COLUMBIA. DIVISION OF VITAL STATISTICS.
Volume 474 Death registrations 044231 to 044780

Times 32-02-01 p11

SON OF PIONEER FAMILY DIES

Another link with pioneer days in Victoria was severed by the death yesterday of Frederick Armour Irvine of 111 Clarence Street. He was born in this city forty-six years ago; son of the late William and Mrs. Florence Irvine, well-known pioneers of the Cedar Hill district.

He is survived by his widow, one daughter, Miss Maxine, and two sons, Clifford and Bruce, at home; his mother; three sisters, Mrs. L. Glazan, of this city; Mrs. A. A. Fisher, in Seattle, and Mrs. C. Drew, in New York, and four brothers, Charles and Kenneth, in Victoria, and Douglas and Earl in Seattle. The remains are resting at McCall Bros.' Funeral Home, where services will be conducted by Rev. W. R. Brown to-morrow afternoon at 2.30 o'clock. Interment will be in Royal Oak Burial Park.

113 Clarence

This Form, if placed in an envelope marked "Dominion Statistics—Free, penalty for improper use $300," and the Registrar of the Registration Division in which the death occurred, will pass through th

FORM 6. PROVINCE OF BRITISH COLUMBIA

CERTIFICATE OF REGISTRATION OF D

79

1 PLACE OF DEATH—

If in Municipality ..... Registered No. ..... (For use of Registrar of Vital Statistics only)
Name

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

If in hospital or institution, give name Royal Jubilee Hospital

2 NAME OF DECEASED Frederick Armour Irvine

Residence 111 Clarence St. Victoria
(Usual place of abode)

PERSONAL AND STATISTICAL INFORMATION

3 SEX	4 RACIAL ORIGIN	5 Single, Married, Widowed or Divorced (*Write the Word*)
Male	Scotch	Married

6 BIRTHPLACE (Province or Country) Victoria B.C.

7 DATE OF BIRTH (month, day and year) April 18th, 1885

8 AGE In	Years	Months	Days	If less than one day
	46	9	21	..... hrs. or ..... min.

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

10 LENGTH OF RESIDENCE (In years and months)
(a) At place of death 3 days (b) In province life
(c) In Canada (if an immigrant) .....

Parents
11 Name of father William Irvine
12 Birthplace of father Victoria B.C.
(Province or country)
13 Maiden name of mother Florence Carlow
14 Birthplace of mother New Brunswick
(Province or country)

15 Informant's name Kenneth Irvine
Address 1434 Mitchell St.
16 Relationship to deceased Brother

17 Place of burial, cremation or removal: St. Lucks Cedar Churchyard Hill
Date of burial: Feb. 10th. 1932 19

18 Undertaker McCall Bros.
(Name and address)

MEDICAL CERTIFICATE OF DEATH

19 Date of death Feb. 8th. 1932 19
(Month, day and year)

20 I HEREBY CERTIFY, that I attended deceased from Feb 3 1932 to Feb 8 1932 that I last saw him alive on Feb 8 1932 and that death occurred on the date stated above, at 5.20 P.m.

The CAUSE OF DEATH was as follows:
Cerebral Hemorrhage
82 A
(duration) ..... yrs. ..... mos. ..... dys.

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

21 Where was disease contracted if not at place of death?
at his home

Did an operation precede death no Date of .....
Nature of operation —

Was there an autopsy? no
(Signed) A. D. Redstall M.D.
Address Victoria B.C.
Date

State the Disease causing Death in Deaths from Violent Causes, state (1) Means and Nature of Injury, (2) whether Accidental, Suicidal or Homicidal.

22. District Registrar's Record Number
23 Filed ..... 19 ..... District Registrar

REGISTERED
FEB 10 1932
REGISTRAR, B. D. & M.
VICTORIA, B.C.

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)

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 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" should not be used as they express citizenship but not a Racial origin. See instructions on back of Certificate.

GR 2951
Volume 500

BRITISH COLUMBIA. DIVISION OF VITAL STATISTICS.
Death registrations 002001 to 002500

13 Clarence

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"

VICTORIA

PROVINCE OF BRITISH COLUMBIA—REGISTRATION OF DEATH

Registered No. 2403
For use of the Registrar of Births, Deaths and Marriages only

02403
051
76
1
1
2
03
70
3
40
11
26
2-43

1. PLACE OF DEATH { If in Rural Municipality ..... If in City, Town or Village (Name) Victoria Street (Name) Pandora House No. 1114 (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 11 months (b) In Province 30 (c) In Canada (if immigrant) Life

3. NAME OF DECEASED Irvine (Surname) Carrie Louise (Given name or names)

RESIDENCE No. 1114 Street Pandora 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	5. NATIONALITY (Citizenship)	6. RACIAL ORIGIN	7. Single, Married, Widowed or Divorced (Write the word)
Female	Canadian	Scotch	Widow

8. BIRTHPLACE Cleveland, U.S.A. (Province or Country)

9. DATE OF BIRTH Nov 19th 1886 (Year)

than one day old
hrs. or min.

ed Dutes

Irvine

ry)

Bay Cemetery
1935
ess)

MEDICAL CERTIFICATE OF DEATH

23. DATE OF DEATH May 25th 1935
(Month) (Day) (Year)

24. I HEREBY CERTIFY that I attended deceased from May 15th 1935 to May 23rd 1935
and last saw h... alive on May 23rd 1935

CAUSE OF DEATH

I. Immediate cause — Give disease, injury or complication which caused death, not the mode of dying, such as heart failure, asphyxia, asthenia, etc.
(a) Toxaemia

Morbid conditions, if any, giving rise to immediate cause (stated in order proceeding backwards from immediate cause).
due to (b) Disseminated Sclerosis.
due to (c) 87 D

II. Other morbid conditions (if important) contributing to death but not causally related to immediate cause.
Cystitis
Pyelonephritis.

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? .....

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

Signed by W.E. Mitchell M.R.C.S. Eng. L.R.C.P. Lond. L.R.C.P. & S. Edin. M.D.
Address Victoria B.C. Date 27th May 1935

28. District Registrar's Record Number 310

29. Filed MAY 29th 1935 (District Registrar)

Undertaker or person acting as Undertaker to obtain all the particulars required in the "Certificate of Registration of ... file the same with the District Registrar who shall issue the burial permit.

(SEE REVERSE SIDE FOR INSTRUCTIONS)

PASSED AWAY ON SATURDAY

Mrs. Carrie Louise Irvine, of 1114 Pandora Avenue, passed away on Saturday evening, aged forty-eight years. She was the widof of Fred Irvine, who predeceased her three years ago. She was born in Cleveland, Ohio. She is survived by her father, J. P. Milligan, Moss Street, two sons, Clifford of Sproat Lake, and Bruce of Armia Street, Esquimalt; one daughter, Miss Maxine Irvine of 223 Moss Street, and one sister, Mrs. Anne Okell, of 223 Moss Street and two grandchildren. The funeral will be held on Wednesday afternoon at 2 o'clock from McCall Brothers' Funeral Home. Rev. Dr. E. A. Henry will conduct the service, after which interment will be in the family plot at Ross Bay Cemetery.

13 Clarence Times
27 May 1935 P.15

Form 6

DO NOT USE BALL POINT PEN

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

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

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

1Bclarence

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

Reg. No. (Office use only)
57-09- -002207

1. PLACE OF DEATH
Name of city or place: Victoria, B.C. (If outside city or municipal limits add "Rural") Name of Municipality (if any):
Street or road: Royal Jubilee Hospital (If death occurred in a hospital or institution, give the name instead of street and number) House No.:

2. LENGTH OF STAY (in years, months and days)	In Municipality where death occurred	In Province	In Canada (if immigrant)
	28 years	28 years	51 years

3. PRINT FULL NAME OF DECEASED: Matcham (Surname or family name) Margaret Jannette (All given or Christian names in full)

4. PERMANENT RESIDENCE OF DECEASED:
Name of city or place: Victoria, B.C. (If outside city or municipal limits add "Rural") Name of Municipality (if any):
Street or road: Bank Street House No.: 1035

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

10. Date of Birth (Month by name) (Date) (Year)	11. AGE (Last Birthday) YEARS	if under 1 year MONTHS	if under 1 month DAYS	if under 24 hours HOURS	if under 1 hour MIN.
December 17th 1903	53 years				

OCCUPATION
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: Albert Ernest Matcham

16. Name of father: White (Surname or family name) William (All given or Christian names)
17. Maiden name of mother: McMullen (Surname or family name) Agnes (All given or Christian names)
18. Birthplace — Father: Quebec (City or Place and Province or Country) Mother: Quebec (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 4th day of February 19 57
Signature of informant: x Jo Matcham (Married woman not to use husband's initials or given names) Relationship to deceased: husband
Address of informant: 1035 Bank Street, Victoria, B.C. (House No.) (Name of Street) (Name of City, Municipality or Place) (Province or State)

20. Burial, ~~Cremation or Removal~~ — Burial (State which) Date: February 6th. 19 57 (Month by name) (Date) (Year)
Place of Burial or ~~Cremation~~: Saanich (Municipality, etc., where Cemetery located) Name of Cemetery: Royal Oak Burial Park
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: February (Month by name) 3rd. (Date) 19 57 (Year)

23. I HEREBY CERTIFY that I attended deceased from April 19 57 to Feb 3 19 57 and last saw h... alive on Feb 4 19 57

CAUSE OF DEATH

		Approximate interval between onset and death
I Disease or condition directly leading to death (This does not mean the mode of dying, e.g., heart failure, asthenia, etc. It means the disease, injury, or complication which caused death.)	(a) Multiple Carcinoma	2 yrs
	due to (or as a consequence of) (b) Carcinoma Rt breast	6 yrs
Accident causes	due to (or as a consequence of) (c)	
Morbid conditions, if any, giving rise to the above cause, stating the underlying condition last.		
II Other significant conditions contributing to the death, but not related to the disease or condition causing it.		

If a woman, was the death (a) Associated with pregnancy? ..... (b) Duration ..... weeks. (c) Was there a delivery? .....
(a) Was there a recent surgical operation? Yes (b) Date of operation 1949 19 ....
(c) State findings of operation Carcinoma Rt breast (d) Was there an autopsy? No
If death was due to external causes (violence) fill in also the following:—
(a) Accident, suicide or homicide? ..... (State which) (b) Date of injury ..... 19 .....
(c) Manner of injury ..... (How sustained)
(d) Nature of injury .....
(e) Specify whether injury occurred in industry, in home or in public place .....
Signed by W J McElwaine Designation M.D. M.D., Coroner, etc.
Address Victoria Date Feb 5 57 19 ....
Print name of M.D., Coroner, etc., whose signature appears above .....
Notations

I hereby certify that the above return was made to me at VICTORIA, B.C.
Dated FEB-6 1957 19 ....
District Registration No. 269 (Signature of District Registrar)

(SEE REVERSE SIDE FOR INSTRUCTIONS)

Burial Park. 6 Colonist Feb 8 1957 p. 15
1Bclarence

MATCHAM—In Victoria on Feb. 3, 1957, Margaret Jannette Matcham of 1035 Bank Street, formerly of Regina. Born in Waterloo, Iowa, a resident of Victoria since 1929. She leaves to mourn her loss, her husband, Albert Ernest, at the residence; two daughters, Marion Jean, at home, Mrs. E. C. (Margaret Waverley) Smith in Pointe-a-La-Garde, Que.; one grandchild, Sandra; two sisters, Mrs. C. W. (Robena) Lamb, of Newark, S.D. Miss Elizabeth C. White, of Long Beach, Calif.; five brothers, John White, of Duncan, B.C., Russell, of Oliver, B.C., William, of Shawnigan Lake, Walter Scott, of Regina, Donald, of Vancouver. The late Mrs. Matcham was a valued member of Fairfield United Church. Funeral services will be held in Fairfield United Church on Wednesday, Feb. 6, at 1.30 p.m., Rev. Tom Haythorpe officiating. Interment in Royal Oak Burial Park. McCall—Bros.—Funeral—Directors Ltd.

FORM 6

61

PROVINCE OF
BRITISH COLUMBIA (Canada)
DEPARTMENT OF HEALTH
Division of Vital Statistics

113 Clarence

REGISTRATION OF
DEATH

03 033

Registration No. (Department use only)
76-09-004605

NAME OF DECEASED	1. Surname of deceased (print or type): MATCHAM All given names in full (print or type): Albert Ernest 2. SEX: male
PLACE OF DEATH	3. Name of hospital or institution (otherwise give exact location where death occurred): D.O.A. Royal Jubilee Hospital City, town or other place (by name): Victoria, B.C. Inside municipal limits? (State Yes or No): yes
USUAL RESIDENCE	4. Complete street address: If rural give exact location (not Post Office or Rural Route address): 2701 Arbutus Rd. 03-060-14 City, town or other place (by name): Victoria Inside municipal limits? (State Yes or No): yes Province (or country): B.C.
MARITAL STATUS	5. Single, married, widowed, or divorced (Specify): widowed 6. If married, widowed, or divorced, give full name of husband or full maiden name of wife: Margaret Jeannette Whitlow
OCCUPATION	7. Kind of work done during most of working life: accountant 8. Kind of business or industry in which worked: accounting
BIRTHDATE	9. Month (by name), day, year of birth: May 27,1899 10. AGE (years): 76 (Months) (Days) If under 1 year (Hours) (Minutes) If under 1 day
BIRTHPLACE	11. City or place: Aldershott, Province (or country) of birth: England 12. Native Indian? Yes ☐ No ☒ If "yes" state name of band
FATHER	13. Surname and given names of father (print or type): Matcham William 14. BIRTHPLACE – City or place, Province (or country): England
MOTHER	15. Maiden surname and given names of mother (print or type): n.k. n.k. 16. BIRTHPLACE – City or place, Province (or country): Wales
INFORMANT	17. Signature of informant: X Marion J Matcham 18. Relationship to deceased: Daughter 19. Address of informant: 2701 Arbutus Rd. Victoria, B.C. 20. Date signed – Month, day, year: Mar 9/76
DISPOSITION	21. Burial, cremation or other disposition (specify): Burial 22. Date of burial or disposition (month, day, year): March 11,1976 23. Name and address of cemetery, crematorium or place of disposition: Royal Oak Burial Park Saanich, V.I.
	24. Name and address of funeral director (or person in charge of remains) (print or type): ...ros. Victoria, B.C.

61

188
861

...ructions
...e in the completion of this form
...ing the original information.

113 Clarence Colonist 10 Mar 1976 p 43

5 DEATHS and FUNERALS

MATCHAM — On March 7, 1976, in Victoria, B.C., Albert (Bert) Ernest Matcham of 2701 Arbutus Rd. He is survived by two daughters, Marion Jean of Victoria and Margaret Waverley of Halifax, N.S.; three grandchildren of Halifax; three sisters, Mildred, Priscilla and Elsie; one brother, William of England, several nieces and nephews. He was a former member of the Oak Bay Camera Club, the Gordon Head Garden Club and was recently associated with the Victoria Credit Granters Association.

Funeral service in McCall Bros. Chapel, Johnson and Vancouver Streets, on Thursday, March 11, at 11:00 a.m. (Flowers gratefully declined. Friends, if desired, may donate to the charity of their choice.)

MEDICAL CERTIFICATE OF DEATH

...e), day, year of death: ...1976

...of death: 4123 (a) arteriosclerotic heart disease — Approx. interval between onset & death: —

due to, or as a consequence of

...es, ...e to ...use (a) ...e under- (b) ... due to, or as a consequence of (c) ...

...buting ...ct ...to the ...(a) above

...es ☐ No ☒ | 28. Does the cause of death stated above take account of autopsy findings? Yes ☐ No ☐ | 29. May further information relating to the cause of death be available later? Yes ☐ No ☐

...uicide, homicide or ...(specify) | 31. Place of injury (e.g. home, farm, highway, etc.) | 32. Date of injury (Month (by name), day, year)

...y occur? (describe circumstances)

...recent surgical ...date of operation | 35. State operative findings

...to the best of my ...d belief the above- ...died on the date and from the causes stated herein: Signature (attending physician, coroner, etc.): X A.G. Gray M.D. Attending physician ☒ Physician examining body after death ☐ Coroner ☐

...(attending physician, coroner, etc.) 37. Name of physician or coroner (print or type): A.G.Gray, 1120 Yates St. Victoria, B.C. Address Date: Month, day, year: Mar.9,1976

DO NOT WRITE BELOW THIS LINE – OFFICE USE ONLY

Notations:

Coroner waived Signing

CERTIFICATION OF DISTRICT REGISTRAR

I certify this return was accepted by me on this date at – VICTORIA, B. C. B.C.

District Registration No.: 471

MAR 17 1976
Date: Month (by name), day, year

H. Anderson
Signature of District Registrar

46

4–2302–3.14: 26-9-73

FORM 6

PROVINCE OF
BRITISH COLUMBIA (Canada)
DEPARTMENT OF HEALTH
Division of Vital Statistics

REGISTRATION OF
DEATH

Registration No. (Department use only)
74-09-007409

NAME OF DECEASED

1. Surname of deceased (print or type): Thomas

All given names in full (print or type): George Francis

2. SEX: male

PLACE OF DEATH

3. Name of hospital or institution (otherwise give exact location where death occurred): Victoria General Hospital

City, town or other place (by name): Victoria

Inside municipal limits? (State Yes or No): yes

USUAL RESIDENCE

4. Complete street address: If rural give exact location (not Post Office or Rural Route address): 1540 Rowan St.

City, town or other place (by name): Victoria

Inside municipal limits? (State Yes or No): yes

Province (or country): B.C.

MARITAL STATUS

5. Single, married, widowed, or divorced (Specify): Married

6. If married, widowed, or divorced, give full name of husband or full maiden name of wife: Charlotte Ethel Whall

OCCUPATION

7. Kind of work done during most of working life: Civil Engineer & Surveyor

8. Kind of business or industry in which worked:

BIRTHDATE

9. Month (by name), day, year of birth: April 16 1889

10. AGE (years): 85 (Months) (Days) If under 1 year (Hours) (Minutes) If under 1 day

BIRTHPLACE

11. City or place Province (or country) of birth: Moncton, N.B.

12. Native Indian? Yes ☐ No ☒ If "yes" state name of band

FATHER

13. Surname and given names of father (print or type): Thomas John

14. BIRTHPLACE – City or place, Province (or country): Canada

MOTHER

15. Maiden surname and given names of mother (print or type): Lamoreau Annie

16. BIRTHPLACE – City or place, Province (or country): Canada

INFORMANT

17. Signature of informant: X Charlotte E Thomas

18. Relationship to deceased: Wife

19. Address of informant: 1540 Rowan St. Victoria, B.C.

20. Date signed – Month, day, year: May 9th. 1974

DISPOSITION

21. Burial, cremation or other disposition (specify): Cremation

22. Date of burial or disposition (month, day, year): May 14, 1974

23. Name and address of cemetery, crematorium or place of disposition: Royal Oak Crematorium Saanich, V.I.

FUNERAL DIRECTOR

24. Name and address of funeral director (or person in charge of remains) (print or type): McCall Bros. 1500 Vancouver St.

MEDICAL CERTIFICATE OF DEATH

DATE OF DEATH

25. Month (by name), day, year of death: May 09, 1974

CAUSE OF DEATH

26. Part I 1579

Immediate cause of death (a): Carcinomatosis — Approx. interval between onset & death: 2 Weeks

due to, or as a consequence of

Antecedent causes, if any, giving rise to the immediate cause (a) above, stating the underlying cause last

(b): Carcinoma Pancreas — Unknown

due to, or as a consequence of

(c):

Part II 4409

Other significant conditions contributing to the death but not causally related to the immediate cause (a) above

Congestive heart failure — 3 years

Generalized arteriosclerosis — years

AUTOPSY PARTICULARS

27. Autopsy being held? Yes ☒ No ☐

28. Does the cause of death stated above take account of autopsy findings? Yes ☒ No ☐

29. May further information relating to the cause of death be available later? Yes ☐ No ☒

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):

33. How did injury occur? (describe circumstances):

SURGICAL OPERATION

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: Signature (attending physician, coroner, etc.) X R.M.L. Shorting — Attending physician ☒ Physician examining body after death ☐ Coroner ☐

37. Name of physician or coroner (print or type): Address: 17. 1123 Yates St. Victoria — Date: Month, day, year: May 10, 1974

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 – VICTORIA, B. C.

District Registration No. 913

Date: Month (by name), day, year: MAY 15 1974

Signature of District Registrar

VICTORIA B.C. MAY 13 1974 VITAL STATISTICS DEPARTMENT DISTRICT REGISTRAR

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

See Reverse for Instructions

4-2302-3.14: 26-9-73