

CANADIAN CONFEDERATION CENTENNIAL COMMITTEE  
OF BRITISH COLUMBIA

CENTENNIAL COMMITTEE OF VANCOUVER

1366 WEST BROADWAY

Pioneer Medallion Application Form

Return this form in quadruplicate to your local Centennial Committee for forwarding to Victoria. No forms will be accepted after November 19, 1966.

ELIGIBILITY

For purposes of this award, a pioneer shall be any person who was *either* born in Canada or a resident of Canada *prior* to January 1, 1892, but must be a resident of British Columbia *NOW*.

Please type or print.

1. Name in full ADAMS Mrs. Jessie  
(Family name.) (Given names.)
2. Date of birth 9 8 1987 3. Place of birth BRANT, MANITOBA  
(Day.) (Month.) (Year.)
- If married—
4. Maiden name JESSIE ADAMS
5. Husband's given names THOMAS
6. Wife's full maiden name JESSIE ALLEN
7. Occupation now or before retirement HOUSEWIFE
8. If born *outside* Canada—
- (a) When did you first come to Canada \_\_\_\_\_
- (b) Where did you first live in Canada \_\_\_\_\_
- (c) Where did you live immediately before coming to Canada \_\_\_\_\_
9. If born in Canada but *outside* British Columbia—
- (a) When did you first come to British Columbia 1919
- (b) Where did you first live in British Columbia VANCOUVER
- (c) Where did you live immediately before coming to British Columbia SEATTLE, WASH.
10. Names of parents in full, including maiden name of mother—
- (Father) FRANK BAKER ALLEN
- (Mother) MARION ELIZABETH WEAVER
11. Given names of brothers or sisters ELLEN WEAVER  
BEATRICE  
GERTRUDE
12. Any remarks you may care to make about your family background or experiences (if required, please attach separate sheet) \_\_\_\_\_
13. Do you have in your possession family records? - - - - - Yes. ☐ No. ☒  
photographs? - - - - - Yes. ☐ No. ☒  
Would you be willing to make them available to the Provincial Archives as a gift? - Yes. ☐ No. ☒  
on loan? - Yes. ☐ No. ☒
14. 65 EAST 51<sup>ST</sup> AVE. VANCOUVER 15 Jessie Adams  
(Present address of applicant.) (Signature of applicant.)

Tel. No. -327-7534

19 Jan 67  
(Date.)

(Signature of local Centennial Committee Chairman.)

(Name of local Centennial Committee.)

What, if any, verification of date of birth was available \_\_\_\_\_