J12736
GUITON
ERNEST STUAR

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#1 Y Depot.	15 June.	P/O.

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ROYAL CANADIAN AIR FORCE

Right Index Fingerprint

Name GUITON, Ernest Stuart R 1 1 7 5 5 3

Rank AC2 R.C.A.F.

Age 23 Height 5' 11¼" Weight 165

Hair Lt. Brown Eyes Brown Hair on face Medium.

Marks, scars, etc. None visible.

E.S. Guiton (Signature of holder)

A.M. Kennedy F/O. (Signature of issuer)

Place Montreal P.Q. Rec. Centre Date July 15th, 1941.

Card serial number 258876

J 12736
856

Guiton E. S.

P/O.

MISSING.

R.C.A.F. A.47
Part 1.

ROYAL CANADIAN AIR FORCE SERVICE BOOK

INSTRUCTIONS TO OFFICERS AND AIRMEN

1. You will be held responsible for the safe custody of the book.

2. You will always carry the book on your person both at home and abroad.

3. You must produce the book whenever called upon to do so by a competent authority, civil, naval, military or air.

4. You must not alter or make any entry in this Book (except as regards short form of Will on page 16, see instructions on pages 12 to 15), and disobedience of this order will be treated as a serious offence.

5. Should you consider that any entry in the book is lacking or incorrect, or should you lose the book, you will report the matter to your immediate superior in the Royal Canadian Air Force. Any change in name or address of person to be informed of casualties must be reported immediately to your Commanding Officer.

Air Force No. J12736 Surname Guiton

Christian Names (in full) Ernest Stuart

Date of Birth 2-6-18 Religion C of E.

Date of ~~Enlistment~~/Appointment 3-7-42

Married (M), Widower (W) or Single (S) M.

Occupation in Civil Life

Signature of Holder E S Guiton

Name and Address of Next-of-Kin wife

Mrs. E. S. Guiton

29 Donegani Ave, Valois, Que

Name, Address, and Relationship of Person to be informed of Casualties—

as above — also

Mr F E Guiton father

93 Turens Rd, Valois Que

Certified Correct [signature] P/O

Date 14-6-43 Place #1 Ylepot Halifax

RANK, GROUP AND R.C.A.F. TRADE OR BRANCH

Branch or Trade and Group	Date of Effect	Authority	Signature and Rank of Officer making Entry
Nav. B. GL	3.7.42		[signature] P/O

Rank	Date of Effect	Authority	Signature and Rank of Officer making Entry
P/O	3.7.42		[signature] P/O
F/O			

MEDALS, DECORATIONS, MENTIONS, ETC.

Particulars	Date and Authority	Signature and Rank of Officer

MISCELLANEOUS ENTRIES

(For entries for which space is not otherwise provided)

NOTE—No entry on this page has any legal effect as a Will

Particulars	Date and Authority	Signature and Rank of Officer
1250	16.6.43	[signature] P/O

LEAVE RECORD
(With Free Railway Warrant)

From (date)	To (date)	Signature of Officer

LEAVE RECORD
(With Special Leave Warrant A.24)

From (date)	To (date)	Authority and Signature of Officer
		T.W.#
		T.W.#
		T.W.#
		T.W.#
		T.W.#

MEDICAL CLASSIFICATION

Date	Category	Medical Board or Medical Exam. (Form No.)	Unit	Initials of M.O.

BLOOD GROUP

Date	International	Initials of M.O.

BLOOD GROUP O

NIGHT VISUAL CAPACITY

Date	Score	Group	Initials of M.O.

IMMUNIZATION PROCEDURES
VACCINATION

Date	Result	Initials of M.O.
20.8.41	J. F. HOPKIRK	

Susceptibility Test	Date	Result	
Schick Test			
Dick Test			

PROTECTIVE INOCULATIONS*

Nature of Inoculation	Date	Dose	Initials of M.O.
Kahn neg	16.6.43	—	J. F. HOPKIRK

IMMUNIZATION PROCEDURES—Con.

Nature of Inoculation	Date	Dose	Initials of M.O.

* To include diphtheria toxoid, scarlet fever toxin, cholera, plague and yellow fever vaccines, etc.

Solely for use on Active Service. This Will page must NOT be used until you have been placed under orders for Active Service.

WILL

(For use if the Officer or Airman has not already made a will or wishes to alter one already made. See instructions on page 15.)

In the event of my death I give

I appoint.....

Residing at.....

to be my executor.

Signature.....

Rank, Air Force No.....

Unit.....

Date.....

1221

DOMINION OF CANADA

NATIONAL REGISTRATION REGULATIONS, 1940

REGISTRATION CERTIFICATE

This certificate must always be carried upon the person of the registrant.

Electoral District	No. 87	St. Lawrence - St. George (Name)
Polling Division	No. 181	(Name if any)

THIS IS TO CERTIFY THAT

Earnest Stuart Guiton

residing at 93 Queens Rd.

Valois was duly registered under the above-mentioned Regulations this 16th day of August 1940.

A. Rowan

Deputy Registrar.

Signature of Registrant

E. Guiton

DOMINION DU CANADA

RÈGLEMENTS CONCERNANT L'INSCRIPTION NATIONALE, 1940

CERTIFICAT D'INSCRIPTION

L'inscrit doit toujours porter son certificat sur lui.

District électoral N° .....

(Nom)

Arrondissement de votation N° .....

(Nom, s'il en est)

JE CERTIFIE QUE

J 12736

.....

domicilié(e) à.....

.....s'est régulièrement inscrit(e) en conformité des règlements susmentionnés ce.....jour d..... .....1940.

.....

Sous-registraire

Signature de l'inscrivant

PARTICULARS OF DENTAL TREATMENT

Date	Required	Completed	SPECIFICATION Use authorized abbreviations and symbols	SIGNATURE OF DENTAL OFFICER
16.6.43		✓		[illegible] capt.

R.C.A.F. A.47A J8R7 36
100M—4-43 (3174)
H.Q. 885-A-47A P/O E.S. Quiton

NAME GUITON, Ernest Stuart FILE NO. J12736

RANK F/O CATEGORY ~~XXXXXX~~ PRES. DEAD REG. NO. J12736

DATE OF DEATH: 30 Jan. /44 MOTHER LIVING: YES WIFE: ~~XX~~ YES

MINISTERIAL CARD: 9-2-44 ROYAL MESSAGE: APR 19 1945 MEMORIAL CROSS TO CHAPLAIN: APR 17 1945

To wife DEL'D TO MOTHER:

To Wife- 16-2-45 DEL'D TO WIFE:

Mrs. E.S. Guiton,
~~XXXXXXXXXXXXXXX~~, 26 First Ave.,
~~XXXXXXXXXXXXXXXXX~~, Ottawa, Ont.
~~XXXXXXXXXXXXXXX~~

Mother-
Mrs. J. E. Guiton,
~~XXXXXXXXXXXXXXX~~, 93 Queens Rd.,
Valvois, Quebec.

COMMAND:

RELIGION:

J12736 Poc

R.C.A.F. R.47
100M—10-40 (7391)
H.Q. 1062—3—56

ROYAL CANADIAN AIR FORCE

OFFICER'S APPLICATION AND RECORD SHEET

Date August 18 1942

I have the honour to apply for an appointment to the Special Reserve ~~(Non-Flying List)~~ (General List)

Please read these notes before completing the form:—

(a) All questions must be answered in candidate's own handwriting It is not sufficient to leave a space for reply, blank. Write "N.A." if "Not Applicable". Incorrect answers may prejudice an applicant's chance of selection.

(b) Where spaces are inadequate, information should be given on foolscap paper attached to and identified with this application.

(c) Paragraphs 35, 36 and 37 must be signed, dated and witnessed.

(d) The submission of false information or falsified documents in connection with this application may render the applicant liable to Prosecution.

1. Surname GUITON (Use capital letters)

2. Christian Names ERNEST STUART (Use capital letters)

3. Date of Birth JUNE 2, 1918 Place Montreal (City) Quebec (Province) Canada (Country)

4. Permanent Address 93 Queens Road, Valois, Quebec.

5. Present address for correspondence stating date until which it holds good. Y. M. C. A. Winnipeg, Man. (unknown) Telephone 22861.

6. Nationality (If Naturalized Canadian, proof of naturalization must be submitted) Canadian

7. Religion (State denomination, e.g., C. of E., R.C., U.C., etc.) C of E.

8. Next of Kin (Name) Patricia Marguerite Guiton Relationship wife
Address 29 Donegani Ave., Valois, Quebec.

9. Father's name in full James Ernest Guiton Alive Deceased alive
Address 93 Queens Road, Valois, Quebec.
Birth Place St. Helier, Jersey Island Nationality Canadian
Profession Accountant
Mother's maiden name in full Edna Constance Evans Alive Deceased alive
Birth Place Montreal, Quebec

10. Has either parent acquired any other nationality? (If so, full particulars and date must be given) no.

11. Single, Married, Widower, Divorced, Separated? married
Particulars of Marriage June 27 1942 (Date) Valois, Quebec. (Place)
Full maiden name of Wife Patricia Marguerite Suttie Birthplace Scotland

12. Particulars of Children:—

NAME	DATE OF BIRTH	PLACE OF BIRTH
N. A.		

R.C.A.F. Records Office
Rec'd SEP 22 1942
O.R.
R.C.
S.I.

13. Person or persons to be notified in case of casualty:—
Name Mrs. E. S. Guiton Relationship wife
Address 29 Donegani Ave., Valois, Quebec.

14. Education:—

SCHOOLS	DATES IN ATTENDANCE FROM	DATES IN ATTENDANCE TO	COURSES	DIPLOMAS AND DEGREES
Lachine High School	1923	1935	Grammar & High School	
Montreal Tech. School	1936	1940	Electricity (night school)	
Universities				

15. Special Civil Courses or Examinations other than in 14 above, Correspondence Courses, etc.

International Correspondence School 1940-41 Electricity

16. Civil Employment, from leaving school to present in chronological order, and Reasons, if any, for leaving:—
(If space does not permit full details of civil duties supplementary memorandum should be attached to and identified with each copy of this form.)

NAME AND ADDRESS OF EMPLOYER	FROM	TO	DUTIES	CAUSE OF LEAVING
Bepco Canada Ltd.	Aug.	Aug.	clerk	Joined
Montreal, Quebec	1936	1941	shop work Production Engineering	R.C.A.F.

17. Clubs or Organizations of which applicant is a member NONE

18. Previous Service with Navy, Army, Air Force, Permanent or Non-Permanent:—
(If in the Air Force state nature of duties, *e.g.*, Pilot, Observer, Technical or Ground duties and if entitled to wings.)

FULL NAME OF UNIT	FROM	TO	RANK	DUTIES
Royal Montreal Regt. N.P.	June 1940	July 1941	Private	Signaller
Royal Cand. Air Force	Aug 1941	June 1942	Trainee	Observer.

19. Reason for Termination of last Service Engagement Completed course

20. Details of Ground Officer's Duties Performed NONE

21. Experience as Teacher or Instructor (Service or Civilian):—

SUBJECT	FROM	TO	UNIT	PLACE
NONE				

22. Have you ever been or are you now in receipt of a Disability Pension? NO

If so, state nature of disability: N.A.

Particulars of other Pension: N.A.

23. Honours and Awards (Quote authority—*London* or *Canada Gazette*)

NONE.

24. Service Courses taken:—

TYPE OF COURSE	PLACE	FROM	TO
INITIAL TRAINING ~~NONE~~ SCHOOL.	#6 TORONTO	OCT. 28'41	JAN 2'42
AIR OBSERVER SCHOOL	#3 WINNIPEG	JAN 4'42	APR 12'42
BOMBING & GUNNERY	#7 PAULSON	APR 12'42	MAY 24'42
ASTRO NAVIGATION	#1 RIVERS	MAY 24'42	JUNE 25'42

25. Have you previously applied for a Commission or for enlistment in the Royal Canadian Air Force or any of its auxiliaries? If so, state:—

NO

(Unit and Place) (Date) (Result)

26. Have you any knowledge of internal combustion engines, construction of aircraft, mechanics or electricity?

YES

27. Types of Aircraft Flown (Service or Civilian):—

PLACE	LIST FLYING HOURS BY YEARS	REMARKS
NONE		

28. Total Flying Time.....

(Hours) (State Type and No. of Licence held)

29. Sports and games played, and whether extensively, moderately or occasionally.

Bowling, Table Tennis (occasionally)

30. Hobbies N O N E.

31. Languages spoken, or written (State proficiency) English

32. Any other remarks or information not included in the foregoing—

N. A.

33. Names and present addresses of responsible persons (preferably including employer), able to certify from personal knowledge of the candidate's career, as to his suitability for commissioned rank.

Name C. G. ABBEY (in capitals) Name S. E. GLADWELL (in capitals)

Address 4018 St. Catherine St. W., Montreal Address KINGS RD., VALOIS, QUE.

Profession Businessman Profession Businessman

Name Lieut. J. P. ALLAN (in capitals) Name Rev. S. MACHIN (in capitals)

Address 29 Monegani Ave., Valois, Que Address VALOIS UNITED CHURCH

Profession ARMY. Profession MINISTER.

34. NOTE:—

The applicant must be prepared to provide, if required, references from his former headmaster, employer or other person. The Department is not prepared to enter into correspondence, whether officially or unofficially, with persons other than those whom the candidate has nominated; and the Selection Board will disregard recommendations from any persons who are not directly and personally acquainted with the candidate's work, at school, university, in industry or business, in H.M. Forces or otherwise. **Applicants are cautioned not to prejudice their candidature by endeavouring to enlist the support of persons inside or outside the Service who they consider might have some influence.**

35. CERTIFICATE

The foregoing information was personally compiled by me and is correct to the best of my knowledge and belief. I understand that His Majesty may exercise the right at any time to dispense with the services of an Officer on probation.

Witness Pat Payne P/O Signature E S Gladwell

Date Aug. 18 19 42

36. AGREEMENT

If selected, I agree to accept a Commission in the Royal Canadian Air Force, Special Reserve (Non-Flying List) (General List).

Witness Pat Payne P/O Signature E S Gladwell

Date Aug. 18 19 42

37. **DECLARATION**

I, Ernest Stuart Guiton, having made an application, dated (Aug. 18 '42.) for a Commission on the Special Reserve of the R.C.A.F. do hereby declare, provided my said application is accepted, that I am willing to serve on Active Service, anywhere in Canada, also beyond Canada and Overseas for the duration of the present war, and for the period of demobilization thereafter, should His Majesty so long require my services.

Witness A. Payne A/10

Date Aug 18 19 42 Signature E S Guiton

Place Winnipeg, Man.

38. *(a)* Location of Will R.C.A.F.

(b) Entered in Officer's Records by .....
(Rank) (Date) (Place)

CERTIFICATE OF MEDICAL EXAMINATION

Name in full ERNEST STUART GUITON

PART 1. Information obtained from the applicant:—

1 Age 24 2. Have you ever suffered from any of the following defects in health?

(a) Rheumatism	No	*(j)* Nasal Trouble	No
(b) Tuberculosis	No	*(k)* Ear Disease	No
(c) Bronchitis or Asthma	No	*(l)* Eye Disease	No
(d) Heart Disease	No	*(m)* Epilepsy	No
(e) Kidney or Bladder Disease	No	*(n)* Nervous or Mental Disease	No
(f) Stomach or Bowel Trouble	No	*(o)* Syphilis	No
(g) Rupture	No	*(p)* Gonorrhoea	No
(h) Varicose Veins	No	*(q)* Bone Fracture	No
(i) Flat or Deformed Feet	No	*(r)* Other Disease or Defect	No

3. Have you ever worn glasses? No

4. Have you had any illness of more than one week's duration? None

Signature of Applicant.

Examiner's remarks *re* above Undescended testicle (left)

PART 2. Information obtained by Medical Examination (Applicant must be stripped):—

1. Identification marks or scars (if operative, obtain history) None

2. Height 5 Feet 11 3/4 Inches

3. Weight 160 lbs.

4. Complexion Med.

5. Colour of eyes Brown Hair Brown

6. Development { Good / ~~Fair~~ / ~~Poor~~

7. Chest measurement—full expiration 35 1/2 inches
range of expansion 2 inches

8. Hearing—Right 20 Left 20 Tympana—Right Clear Left Clear

9. Vision—Without Glasses—Right 20/20 With Glasses—Right
Left 20/20 Left
Colour Vision Normal

10. Condition of mouth and teeth Good

11. Heart and blood vessels Normal

12. Blood Pressure—S 136 D 80

13. Reflexes Normal

14. Urine—Albumen N Sugar N

15. Abnormalities (Congenital and Pathological) found on Examination
Undescended left testicle - not in canal

PART 3. The candidate has been examined in accordance with existing standards and he is considered fit for Category A 3 B

General Impression and any special remarks of Medical Officers

Date 20/8/42 19

Guiton P/C
(President) (Member) (Member)

Course 39/ Rec Depot No 6 M.S.D. Toronto 31/10/41

R.C.A.F. Special Reserve

CONFIDENTIAL

R.C.A.F. M.2
150M—8-40 (6421)
H.Q. 1062-10-2

R 117553

ROYAL CANADIAN AIR FORCE

FILE NUMBER

Medical Board held at Montreal, P.Q. *Date* 9-5-41

Surname GUITON *Chr. Names* ERNEST STUART
Nature of Commission M2-1 *Date of Birth* 2-1-18 *Married or Single* S
Branch Gen. List. *Hours Flown* None
Address 93 Queen's Road, Valois, P.Q.

HAVE YOU ANY HISTORY OF:—

(i)	NERVOUS TROUBLE or Nervous Breakdown	NO
	Severe or "Sick" Headaches, Migraine	NO
	Fits or Convulsions of any kind	NO
	Sun or Heat Stroke	NO
	Head Injury or Concussion (including "knock-out")	NO
	Insomnia, Nightmares, Sleep-walking, or Bed-wetting	NO
(ii)	LUNG TROUBLE or Consumption	NO
	Bronchitis, Pneumonia or Pleurisy	NO
	Asthma or Hay Fever	NO
(iii)	HEART DISEASE, "Weak or Strained Heart"	NO
	Fainting Attacks or Giddiness	NO
	Rheumatism, Rheumatic Fever or "Growing Pains"	NO
	Frequent Sore Throats or Tonsillitis	NO
	Diphtheria, Scarlet Fever or Scarlatina	NO
(iv)	STOMACH or BOWEL TROUBLE	NO
	Chronic Indigestion or Pain after Food	NO
(v)	KIDNEY or BLADDER TROUBLE	NO
	Syphilis or Gonorrhœa	NO
(vi)	TROPICAL DISEASE	NO
	Malaria	NO
	Dysentery	NO
(vii)	EYE TROUBLE or Inflammation of Eyelids	NO
	Wearing of Glasses	NO
	Colour or Night Blindness	NO
(viii)	EAR TROUBLE, Earache or Discharge from Ears	NO
	Deafness, Noises in the Ears, or Dizziness	NO
	Frequent Colds in Head, Catarrh or Obstruction	NO
	Prolonged Hoarseness or Loss of Voice	NO
	Sea, Car or Train Sickness	NO
	Discomfort on Swings, Roundabouts, Switchbacks	NO
(ix)	OPERATIONS	NO
(x)	Any Illness or Injury not mentioned above	Chicken pox

Education 3 yrs. High School - 2 yrs. Techn. (Night school)
Present Occupation Clerk Hobbies None
Previous Service 2nd. Batt. R.M.R. Pte, July 1940 to date
Athletics Hockey, skiing, softball (ext.)
Habits—Smoking 6-10 c.a.d. Alcohol Beer occasionally
FAMILY HISTORY—Consumption NO
Nervous Ailments, Mental Trouble, or "Fits" NO
Father Alive—Health good Dead—Cause
Mother Alive—Health good Dead—Cause
Brothers (2....) Alive—Health good (....) Dead—Cause
Sisters (1....) Alive—Health good (....) Dead—Cause

I hereby declare that I have carefully considered the statements made above, that to the best of my belief they are complete and correct, and that I have not withheld any relevant information or made any misleading statement. I am fully aware that by wilfully suppressing any information I shall incur the risk of not being granted a Commission, or if it is granted, of being required to relinquish it and forfeit any claim to gratuity or other award.

Date 9-5-41 *Signature* E Guiton *Witness* [illegible]

GENERAL MEDICAL AND SURGICAL EXAMINATION

Impression given by *(a)* Physique ..athletic.. *(b)* Mentality ..alert..
Body Marks, Scars, Deformities ..None..
Size of Thyroid Gland ..N..
Surgical Abnormalities ..Undescended testicle (left) not in the canal..
Results of Wounds, Injuries, Operations ..NA..

	Date 4-5-41	Assessing Room	Date 31/10/41	Assessing Room	Date	Assessing Room	Remarks on any Abnormalities Found
Height (ins.)	71½						
Weight (lbs.)	165		160				Date
Chest Circumference (ins.)	35½-37½						
Body Build (lbs.)	+11						
Leg Length (ins.)	41½						
Pulse Rate — Sitting	84		84				
Pulse Rate — Standing 1st	108						
Pulse Rate — Standing 2nd	96						
Pulse Rate — After Exercise	108						
Pulse Rate — Time to Normal	30						
Arterial Walls	soft						
Blood Pressure — Systolic	135		140				
Blood Pressure — Diastolic	85		86				
Heart — Size	N		N				
Heart — Sounds	N		N				
Heart — Rhythm	N		Good				
Lungs	N		N				
Breath held	85						
Expiratory Force	110						
Vital Capacity (Best of 5)							Date
Reflexes — Knee	N N		N				
Reflexes — Ankle	N N		N				
Reflexes — Triceps	N N		N				
Reflexes — Abdominal	abs		N				
Reflexes — Plantar	abs		N				
Cranial Nerves	N N		N				
	R. L.	R. L.	R. L.	R. L.	R. L.	R. L.	
Balancing Rod	1S 1S						
	R. L.	R. L.	R. L.	R. L.	R. L.	R. L.	
Self Balancing	1S-1F1U1S		1S 1S				
Tremors — Fingers	SF SF		S C				
Tremors — Eyelids	0 0		0				Date
Abdomen — Liver	N		1 F. Down with deep insp.				
Abdomen — Spleen	N		N				
Abdomen — Muscular Tone	good		Good				
Urine — Albumen	neg.						
Urine — Sugar	neg.						
Initials of M.O.			(F.H)				

40 mm. Hg. Test ..65 - 7/898,999,998,876.6..
Date ..31/10/41.. 60 7/10 10 10/10 10 10/998/765 Has Cold ..F.H.
Date .....
Date .....
Date .....
Date .....

Remarks by Consultant.

Abdominal and plantar reflexes are absent. Left testicle undescended. Not in the canal.

31/10/41 Choice(1) Pilot (2) Observer Physique Good Reliability good.
Intelligence average, Stability ~~good~~ average. Is an alert adaptable type, Should do well

Best has Pilot (3½) Harvie F.O.

EYE EXAMINATION

History	Neg.		
Visual Acuity	R. 20/20 , c ~~+2.25~~ = 20/200	20/20 + 2.50 20/200	20/20 c 2.25 } 20/200
	L. 20/20 , c ~~+2.25 = 20/200~~ B1	20/20 + 2.50 20/200	20/20 c 2.25 } 20/200
Colour Vision	N. Ishihara	N Ish	N Ish
Red, Green	N. ½ exo		
Diaphragm Test (P.D. = 62)	crowding at 6	(60mm) Bar at 2 ~~crowding at~~	
Convergence C. = 6 cms.		6 c mm 6.5	
Convergence S. C. = 14 cms.		13.5 c m 15½	
Accommodation R.		9 c m	} 8.0
Accommodation L.) 7		9 c m	} 8.0
Cover Test	Lat. div. both R. mod R.	Bilat Diverg R R ~~Div. R. mod. R.~~	
Fundi and Media	not seen	n	
Fields	N	n	
Remarks:		A/B A3B	
	Initials of M.O.	*Initials of M.O.* J.B.W.	*Initials of M.O.* Asst.
	Date 9-5-41	*Date* 31/10/41 ~~12-5-41~~	*Date*

EXAMINATION OF EAR, NOSE AND THROAT

History: Treated a week for slight sinus trouble (4 yrs. ago)

Hearing R. Ear	w.v. 20	W.V. 20'	
Hearing L. Ear	w.v. 20	W.V. 20'	
External Ear, Meatus Membranes R. Ear	N	N	
External Ear, Meatus Membranes L. Ear	N	N	
Middle Ear, Eustachian Tubes R. Ear	Pat.	Pat	
Middle Ear, Eustachian Tubes L. Ear	Pat.	Pat	
Cochlear Apparatus R. Ear		N	
Cochlear Apparatus L. Ear		N	
Vestibular Apparatus R. Ear		N	
Vestibular Apparatus L. Ear		N	
Buccal Cavity	H	N	
Teeth	H.C. 22	Good	
Gums	H	Healthy	
Pharynx	H	"	
Nasopharynx	H	"	
Nose	slight obst. rt. nostril	CLEAR	
Larynx	H	N	
Remarks:			
	Initials of M.O.	*Initials of M.O.* J.B.W.	*Initials of M.O.*
	Date 9-5-41	*Date* 31-10-41	*Date*

Fit

HISTORY OF PRESENT CONDITION

Date 9-5-41

Physical efficiency is good. Alert and cooperative.
SC & BH are borderline - to be reckecked.

12-5-41 Rechecked- Ocular muscle balance not satisfactory. Unfit A1B

A3B

OBSERVATIONS AND FINDINGS BY PRESIDENT OF BOARD

Date.....

CATEGORY APPROVED
A1B — A3B
DEC 1 1941
For D.M.S., RCAF

1/12/41 Intelligence and stability average
Reliability good Alert Wants Pilot
P.O.G. (3+ A1B A3B

J.B.W.

R.C.A.F. Records Office
Rec'd DEC 22 1941
O. K..... C.I.B.....
R. C. [illegible] N. I.
S. L.....

4B3

MEDICAL RE-EXAMINATION

I certify upon my honour that I have suffered no illness or disability since my last medical examination..

Date 14-7-41 Signature _____ Witness _____

FORM 6

DOMINION BUREAU OF STATISTICS—QUEBEC DEATH TRANSCRIPT

Do not write in this space

1. PLACE OF DEATH

Municipal county: OVERSEAS (GERMANY) | Official name of civil municipality or township: | *Place an X over the word which applies to this municipality or this territory* — City | Town | Village | Parish | Township

Street: | No. | Hospital or Institution:

2. LENGTH OF STAY

(a) In hospital or institution	Years	Months	Days	(b) In municipality where death occurred	Years	Months	Days	(c) In Province	Years	Months	Days	(d) In Canada (if immigrant)	Years	Months	Days

3. NAME OF DECEASED

Surname: GUITON (Block letters)

Given names: ERNEST STUART

4. RESIDENCE

Street: Queen's Road No. 93

Official name of civil municipality or township: Valois

Municipal county: Province: Quebec

5. SEX	6. NATIONALITY (Citizenship)	7. RACIAL ORIGIN	8. Single, Married, Widowed or Divorced (Write the word)
Male	Canadian	English	Married

9. If married give name of wife or husband of deceased: Suttie, Patricia Marguerite

10. BIRTHPLACE (Province or Country): Quebec

11. DATE OF BIRTH: June (Month) 2nd (Day) 1918 (Year)

12. AGE OF DECEASED	Years	Months	Days	If less than one day old
	25			....hrs. or ....min.

OCCUPATION

13. Trade, profession or kind of work, as **spinner, teamster, office clerk,** etc.: Navigator

14. Kind of industry or business, as **cotton-mill, lumbering, bank,** etc.: R.C.A.F.

15. Date deceased last worked at this occupation: Jan.30/44

16. Total years spent in this occupation: Three

	17. NAME	18. BIRTHPLACE (Province or Country)
FATHER	Guiton, James Ernest	Jersey Is.
MOTHER (Maiden Name)	Evans, Edna	Quebec

19. Place of burial, cremation or removal

20. Date of burial: ....19....

21. PLACE OF REGISTRATION OF THIS BURIAL

(a) Name of parish or church

(b) Civil municipality of

(c) Municipal county

(d) Date: ....19.... (Month) (Day) (Year)

Do not write in this space

CONFIDENTIAL MEDICAL CERTIFICATE OF DEATH

22. Date of death: January (Month) 30th (Day) 44 (Year)

23. I HEREBY CERTIFY that I attended deceased from ....19.... to ....19....

and last saw h.... alive on ....19....

24. 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) Previously reported missing after air operations, now for official purposes, presumed dead.

due to

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

(b)

due to

(c)

II

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

III If a communicable disease is mentioned on this certificate, give

(a) Date of appearance ....19....

(b) Duration of disease ....days

25. If a woman, was there a puerperal condition?

26. Was there a surgical operation? Date of ....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 (State which) Date Accident Jan.30th 44 ....19....

Manner of injury (How sustained) Presumed killed during air operations

Nature of injury

Specify whether injury occurred in **industry, in home, or in public place** public place

Signed ....M.D.

Address Date ....19....

28. Signature of person who fills in the form (curate, coroner, hospital authority, etc.)

For (R.C.A.F. Records Officer)

This signature authorizes the collector to accept this form as authentic.

29. Name of clergyman in charge of Register of Civil Status in which registration of this burial was made.

(Voir l'autre côté pour le français)

M.D. per Hon.

Read this whole Form and Instructions on other side before commencing to complete.

WILL

R.C.A.F. R. 60
40M—5-41 (225)
H.Q. 1062-3-45

(1) I, ERNEST STUART GUITON of the City / Town / Village / Township of VALOIS, QUE. in the County / District of JACQUES CARTIER

Last Permanent Civilian Address

Province of QUEBEC, ENGINEERING. (Civil Occupation)

a member of the Royal Canadian Air Force, Number J-12736 do hereby revoke all former Wills by me made and declare this to be my LAST WILL.

(a) Relationship (b) Names and (c) Address of beneficiaries and (d) What each is to receive.

(2) I GIVE, DEVISE AND BEQUEATH unto my wife Patricia Marguerite Guiton of 29 Montgomi Ave., Valois, Que my whole estate.

Relationship, Names and Address of Residuary Beneficiaries.

(3) I GIVE, DEVISE AND BEQUEATH all the rest and residue of my estate, both real and personal, of whatsoever kind and wheresoever situate unto

(4) I appoint Gordon Guiton (Name) 93 Queens Rd., Valois Que. (Address), to be the Executor / Executrix of this my Last Will.

IN WITNESS WHEREOF I have hereunto set my hand this 16th day of June 1943.

Signed and acknowledged by the Testator, in the presence of us present at the same time who in his presence, at his request, and in the presence of each other have hereunto subscribed our names as witnesses.

E. S. Guiton
(Signature of Testator)

First Witness sign here.

(5) D L Jones P/O
(Signature)
#1 "Y" DEPOT HALIFAX N.S.
(Address)
R.C.A.F. NAV. "B"
(Occupation)

Second Witness sign here.

Herbert William Rogers P/O
(Signature)
#1 "Y" DEPOT HALIFAX, N.S.
(Address)
R.C.A.F. NAV. "B"
(Occupation)

(Witnesses are not to be beneficiaries.)

[OVER]

Y.

NOTE

(1) **Example:** I, John Charles Brown, of the City of Ottawa, County of Carleton, Province of Ontario, Mechanic.

(2) If only one beneficiary, complete as follows: I give, devise and bequeath unto "my wife, Mary Brown, 26 Cherry Avenue, Ottawa, Ontario, all my estate", in which event, strike out clause (3). If more than one beneficiary, set out in clause (2) what each is to receive, such as—

"my wife, Mary Brown, 26 Cherry Avenue, Ottawa, Ont.....$.....00 and my household goods and effects",
"my mother, Ethel Brown, 480 Yonge St., Toronto, Ont. . .....$.....00",
"my sister, Margaret Brown, 480 Yonge St., Toronto, Ont.....$.....00",
"my friend, John Smith, 60 LaSalle St., Winnipeg, Man.....$.....00",

and any personal gift, if desired.

(3) If any specific gifts have been made in clause (2), the testator should name the person or persons to whom he desires to give the balance of his estate in clause (3), such as "my wife, Mary Brown, 26 Cherry Avenue, Ottawa, Ontario" or "my mother, Ethel Brown, and my father, George Brown, of 480 Yonge Street, Toronto, Ontario, equally" or as desired.

(4) Failure to appoint an executor or an executrix can only result in additional expense in the settlement of the estate in question. Testators are, therefore, strongly urged to make such an appointment. A beneficiary or legatee under the will may be appointed executor or executrix. It is recommended, however, that testators avoid appointing as executor any person on or likely to be on Active Service.

(5) Do not omit to date the will. The testator should sign the will with his usual signature in the presence of two witnesses, each of whom should immediately thereafter, and in the presence of the testator, sign his or her name, and insert his or her address and occupation in the place provided. No person who receives any benefits under the will should act as witness. It is preferable, though not essential, that the witnesses be persons not on Active Service.

GENERAL

Generally speaking, under the Laws of most of the provinces, a will revoked or cancelled by marriage of the testator after the date of the will is invalid; it is advisable, therefore, immediately upon marriage to make a new will.

When completed, leave with Commanding Officer for transmission to the Records Office for safe custody.

STATEMENT OF LOCATION OF WILL

I hereby certify that I have previously made a will, which is now located at.....

R.C.A.F. Ottawa

.....
(Name and address in full)

.....

E.L. Gunton

.....
(Signature)

10(O) A.F.U. Dumfries

ROYAL CANADIAN AIR FORCE

R.C.A.F. R. 45
75M—8-41 (648)
H.Q. 1062-2-126

P/O

Individual Record of Flying 4/G

RANK ~~L.A.C.~~ P/O   NO. ~~R.117553~~ J12732   NAME Guiton, E.S.

UNIT	PERIOD ENDING	SERIAL NO.	Single-Engine Day 1st Pilot (A)	Single-Engine Day 2nd Pilot (B)	Single-Engine Day Dual (C)	Single-Engine Night 1st Pilot (D)	Single-Engine Night 2nd Pilot (E)	Single-Engine Night Dual (F)	Multi-Engine Day 1st Pilot (G)	Multi-Engine Day 2nd Pilot (H)	Multi-Engine Day Dual (J)	Multi-Engine Night 1st Pilot (K)	Multi-Engine Night 2nd Pilot (L)	Multi-Engine Night Dual (M)	Crew Duties Observer (N)	Crew Duties Air Gunner (O)	Crew Duties Other (P)	Passenger (Q)	Total (R)
			Hrs Mins	Hrs Mins	Hrs Mins	Hrs Mins	Hrs Mins	Hrs Mins	Hrs Mins	Hrs Mins	Hrs Mins	Hrs Mins	Hrs Mins	Hrs Mins	Hrs Mins	Hrs Mins	Hrs Mins	Hrs Mins	Hrs Mins
#5 A.O.S.	1-1-42																		
Wpg	10.4.42														84 55				84 55
#7 B. & G.S. Paulson, Man.	23-5-42														32:05				117:00

Total Flying Time at No. 7 B. and G. S. 32 hrs. 05 mins.
Certified Correct
Date 23-5-42   K.W. Walton F/L
Chief Instructor

UNIT	PERIOD ENDING	SERIAL NO.	(A)	(B)	(C)	(D)	(E)	(F)	(G)	(H)	(J)	(K)	(L)	(M)	(N)	(O)	(P)	(Q)	(R)
#1 C.N.S. Rivers Man															Nav.				
														Day	12 25				
														Night	17 20				29 45
Period Ending 24-6-42															Grand Total				146 45
5 A.O.S. Winnipeg																			
	31/8/42														16 05				162 50
✓	30-9-42														11 15				174 05
✓	31/10/42														23 05				197 10
✓	30/11/42														6 35				203 45
✓	31/12/42														5 05				208 50
✓	28/2/43														11 20				220 10
✓	31/3/43														14 20				234 30
✓	30/4/43														9 40				244 10
✓	31/5/43														2 40				246 50

R.C.A.F. Special Reserve

ROYAL CANADIAN AIR FORCE

APPENDIX "D"

ENLISTMENT AGREEMENT

Bulletin No. 150

AIRCREW (on leave without Pay)

1. I, the undersigned, do acknowledge that I have read, understand and agree to the following conditions of service upon being accepted for enlistment as Aircrew in the Royal Canadian Air Force and granted leave of absence until such date as my period of duty becomes effective:

(a) That during the period of such leave, I will not be entitled to, nor will receive any Pay or Allowances nor Medical Services.

(b) That if during the period of such leave I should sustain any injury or suffer any illness resulting in my becoming physically or mentally unfit, I will not be entitled to be paid any disability pension by the Crown by reason of such injury or illness.

(c) That until I report after the period of such leave I will not be entitled to any issue of uniform or equipment.

(d) That during the period of such leave I will not be entitled to wear any R.C.A.F. uniform or equipment.

(e) That from the date of my enlistment and during such period of leave, I will be subject to Air Force Law and Discipline.

A. L. L. Laporte F/O
(Witness)

E. Guiton
(Signature of Recruit)

~~Montreal, P.Q.~~
(Place)

~~July 15th, 1941.~~
(Date)

LEAVE OR PASS FORM

Date: ...July 15th, 1941..

No. R117553 ..Rank.....AC2.....Name.....GUITON, Ernest Stuart.....

was enlisted in the Royal Canadian Air Force on the 15th day of July 1941, and has been granted leave of absence without pay from the 16th day of July 1941, until the ~~15th~~ 14th day of August 1941, and ordered to report to the R.C.A.F. Recruiting Centre at 0900 hrs. Aug ~~15~~ 15th/41. at the expiration of his leave.

A. L. L. Laporte F/O
(Signature of Attesting Officer)

A.F.M. 23(D)
2-4-41

R.C.A.F. Records Office
Rec'd JUL 19 1941
O. K. C.I.B.
R. C. N. I.
S. L. P. A.

COURSE	FROM	TO	RESULT
Initial Training, Toronto, Ont.	27-10-41	19-12-41	Passed, 84% 11th.
Air Observer's Course, Winnipeg, Man.	4-1-42	11-4-42	Passed, 80.2% 4th.
Armament Training, Paulson, Man.	13-4-42	23-5-42	Passed, 76.9% 12th.
Advanced Air Observer's Training, Rivers, Man.	25-5-42	3-7-42	Passed, 76.7% 64th.
			Air Observer's Badge, 23-5-42
Air Observer Instructor's Course, Rivers, Man.	13-7-42	27-7-42	Average, 72.3% Passed, 10th.

NAME GUITON, E.S. No. J.12736

Form No. M.76--cut and punched to be used in the "NU-STYL" Binder, Model No. A16F.
VISIBLE RECORDS LTD., TORONTO, CANADA
R.C.A.F. T-118 10M-10-41 (1145) H.Q. 885-T-118

R.A.F. Form 39
Army Form I. 1220
Naval Form M. 246

Surname....Guiton..... Christian Names.....E.S.....

R.A.F. or [redacted] No. }J12736..... Rank.....F/O.....

Corps.....d..... Branch or Trade....Nav/B.....

Unit .....405 Sqdn..... Under instruction as }.....

Age.....Total Service }..... CONFIDENTIAL

Hospital or Sick List—Record Card

Hospital or Station rendering this form }....RCAF H.Q.....

No. of enclosure in Form 48..... Serial No. in Form 38 or in A. & D. Book }.....

Dates of:

Arrival as direct admission .....from .....

,, ,, transfer .....from .....

Discharge to duty.....

,, as an invalid or to unit for invaliding .....

Transfe.....to.....

Death.....30-1-44.....

Number of days under treatment.....

CLINICAL NOTES

Disease or injury .....Death Presumed.....

.....

New disease supervening, and date.....

.....

Operation, nature and date .....

.....

Anæsthetic, and method of administration.....

Date	Previous history of case and family, if relevant.....
	.....
	.....
	.....
	.....
	.....
30-1-44	Condition on admission.....Death Presumed.....
	.....
	.....
	.....
	.....RCAF C.R. 423/52.....
	.....

N.B.—In the event of an error in diagnosis, the disease or injury entered will be crossed out in such a way as to remain legible, and the new disease or injury will be entered above it. In the event of a new disease supervening it will be entered in the space allotted.

D4683 Wt.39094/02965 40,000 12/43 T51-7804 D&Co.(Stpt)Ltd

Date	Progress of case
30-1-44	Condition on discharge Death Presumed
	Signature of Medical Officer Grace Darling S/L
	Date 22-11-44

R.C.A.F. A-81
25M-12-44 (4876)
H.Q. 885-A81

DEPARTMENT OF NATIONAL DEFENCE

NAVY ═══ ARMY ═══ AIR FORCE

STATEMENT OF WAR SERVICE GRATUITY

4
AIR

16258

DECEASED MEMBER'S NAME: Ernest S. (CHRISTIAN NAMES) Guiton (SURNAME)

PAYEE: Mrs. Patricia M. Guiton,

ADDRESS: 26 First Ave., Ottawa, Ont.

REGISTER NO.
FILE NO. 14173
DATE 8 Mar/45
SERVICE NO. J.12736
FINAL RANK OR RATING F/O
DATE OF DISCHARGE 30 Jan/44

DATE OF TERMINATION OF OVERSEAS SERVICE 30 Jan/44

		$	¢
A. TOTAL QUALIFYING SERVICE	NO. OF DAYS 900 / 30 EQUAL TO 30 COMPLETE PERIODS AT $7.50	225.00	
B. QUALIFYING OVERSEAS SERVICE	NO. OF DAYS 223 LESS INELIGIBLE DAYS, EQUAL TO 223 DAYS @ 25c. PER DAY	55.75	
C. SUPPLEMENT FOR OVERSEAS SERVICE			
DAILY RATES AT DISCHARGE			
PAY	$ 7.00		
SUBSISTENCE OR LODGING AND PROVISION ALLOWANCE	$ 1.70		
ADDITIONAL PAY	$		
	$		
	$		
DEPENDENTS' ALLOWANCE 1/30 OF $ 47.20	$ 1.57		
TOTAL	$ 10.27 ×7 = $ 71.89		
NO. OF DAYS 223 / 183	×$ 71.89	87.61	
D. WAR SERVICE GRATUITY		368.36	
E. DEDUCTIONS — OVERPAYMENT OF PAY AND ALLOWANCES	$		
DEPENDENTS' ALLOWANCE AND ASSIGNED PAY	$		
OTHER DEDUCTIONS	$		
F. TOTAL AMOUNT PAYABLE		368.36	

MAR 15 1945

G. YOUR PORTION OF GRATUITY IS—

DEPENDENTS' ALLOWANCE IN ISSUE TO YOU $ 47.20 / TOTAL DEPENDENTS' ALLOWANCE IN ISSUE $ 47.20 OF $ 368.36 =$ 368.36

C.I.B.
N. I.
S. L. P. A.

CERTIFICATE I CERTIFY THAT THE AMOUNT HAS BEEN CORRECTLY COMPUTED AND IS PAYABLE IN ACCORDANCE WITH THE TERMS OF THE WAR SERVICE GRANTS ACT, 1944 AND THE REGULATIONS ISSUED THEREUNDER.

PREPARED BY	CHECKED BY
JMF	JFM

TREASURY

CHECKED BY	DATE
	14.3.45

SERVICE REPRESENTATIVE

△T

Treasury Office.
Air Force Services
OTTAWA, - CANADA.
Rec'd. MAR 10 1945
P. & A. SECTION

R.C.A.F. Special Reserve

ROYAL CANADIAN AIR FORCE

INTERVIEW REPORT

SURNAME.....GULTON.....

CHRISTIAN NAMES...ERNEST.STUART.....

MARRIED.....SINGLE.....NO. OF CHILDREN.....NONE.

N.F.

FLYING

AGE....22....
HEIGHT.....
WEIGHT.....
.....
.....
.....
.....
PILOT.....
OBSERVER...X...
W.A.GUNNER.....

EDUCATIONAL:- NUMBER OF YEARS.....

High School.....Technical..4.yrs..Commercial...

University (Name and dates of Attendance).....

.....None.....

Standing other Countries.....None.....

FLYING EXPERIENCE:- Total hours

Commercial Hours Solo.....Dual.....

Private Hours Solo.....Dual....Pass.½.hr.

No. hours & types during last 2 yrs....½.hr..passenger.

.....

MILITARY AND OTHER TRAINING:-

.6 mos. to present - 2nd Batt. R.M.R. Pte., 2 yrs. 1936-38 Clerk-Electrical Mftrs.,...2½ yrs., 1938 to date practical work and production man on Manufacture of Electrical apparatus.

SPORTS:- (What branches).....

.....Hockey, skiing, softball.....

HOBBIES:-.....Electrical and mechanical studies.....

INTERVIEWING OFFICER'S OPINION AS TO CHARACTER AND SUITABILITY FOR THE SERVICE:-.....

Bright, energetic, well-mannered, sufficient confidence to tackle a job well. Should make good observer training material.

.....

.....

REFERENCES CHECKED // SATISFACTORY
REFERENCES CHECKED // UNSATISFACTORY
REFERENCES NOT CHECKED

REFERENCES CHECKED 15/7/41 (Date) (Initials)

CONSIDERED SUITABLE FOR COMMISSIONED RANK?.....Likely.....

BEST FITTED FOR.....Observer.....

DATE: 24-1-41

RECRUITING CENTRE: Montreal, P.Q.

A. L. Lapointe F/O
Signature of Officer
F. W. McCrea F.O.

R.C.A.F. Records Office Rec'd JUL 19 1941 O.K. C.R.B. R.C. N.L. S.L. P.A.

APPROACH
Confident.....
Nervous.....
Easy.....X....

CARRIAGE
Upright.....X...
Medium.....
Athletic.....

DRESS
Neat.....X....
Conservative.X..
Clean.....X.....
Careless.....

PHYSIQUE.....
Medium.....X...
Heavy Set.....
Slender.....

SPEECH
Clear .....X.....
Slow.....
Hesitant.....

RESPONSE
Quick.....X....
Deliberate.....
Slow.....

MANNER
Alert.....X...
Confident....X..
Sincere....X....
Reserved.....X..
Nervous.....
Overbearing.....
Irresponsible...

EXCELLENT.....
ABOVE AVERAGE.X.
AVERAGE.....
BELOW AVERAGE...

MARK WITH AN X THE DESCRIPTION WHICH APPLIES

5AOS

8 12736

A.F.NO.....(P.G.)..... .....NAME OF OFFICER OR AIRMAN..P/O Guiton, E.S...

EVIDENCE OF MARRIAGE

DESCRIPTION Certificate of Marriage

NO.

DATE

ISSUING AUTHORITY S.G. Machin

HUSBAND (Full Name) GUITON Ernest Stuart

WIFE (Full Maiden Name) Suttie, Patricia Marguerite

DATE OF MARRIAGE 27-6-42

PLACE OF MARRIAGE Valois, Pointe Claire, P.Q.

DATE 18-7-42

CERTIFIED TRUE EXTRACT

R.R. Goodwin

(R.R. Goodwin)
(Signature and rank)

A.F.M. No.13

R.C.A.F Records Office
Rec'd JUL 23 1942
O. K.....C.I.B.....
R. C.....N. I.....
S. L.....P. A.....

OUTFIT ALLOWANCE PAID
WARRANT OFFICERS $ ..... ON .....
OFFICERS $ ..... ON .....
$ ..... ON .....

MARRIED or SINGLE M

APPOINTED OR ENLISTED AT Montreal Que ON 15.8.41

RECORD OF PAY

NET RATE OF DEFERRED PAY $ Nil

BANKING ARRANGEMENTS (1) Montreal 33603 ERROL ST WEST

No. J 12726 NAME IN FULL Gee TON

RATE OF PAY

D.R.C. No.	Eff. Date	Rank	Group	P.F. or A.S. Rate	Daily Rate	A/D Pay	Combined Rate	Pen. Ded.	Net Fortnight Rate of Pay £	Casualties affecting rate of pay
34	3.1.43	P/O	Lt	12.3	7.10	+	7.10	—	25.0.0 105.00	Knee p/o #-51.

ASSIGNMENTS

Assignee	Eff. Date	Amount	Total
Bal Fwd	1.1.43	106 80	80
Wife	1.2.43	90 00	
5th V. Loan	1.11.43	16 80	

DEPENDENTS ALLOWANCE

Date App. Forwarded	Relationship	Amount Awarded	Eff. Date
	Wife		
Missing 30/1/44			
Presumed Dead 30.12.46		60	1.1.47

REMARKS
Reconciled with H.Q. 16.7.45 - R.P.
C.I.E. 29.7.11
F 894 on file

PAY AND ALLOWANCES

Date	Particulars of Entry	Debit	Credit	Balance
1943	BROUGHT FORWARD		5 71	5 71
Jan	Pay		217 60	223 31
	C.P.	106 80		116 51
	Jan Dep	105 05		10 86
Feb.	Pay		203 00	213 86
	A.P.	106 80		107 06
	Bal to Jan off	107 06		0
		425 71	425 71	
	Bal Fwd		107 06	107 06
1/2/2/43	REVERSE FEB. PAY	203 00		95 94
✓	✓ A/P.		106 80	1086
✓	5th V. Loan (Nov-Jan 1)		✓ 50 40	61 26
MAR 1/334/E3998	C.I.E.		✓ 42 00	103 26
June 3.11.2176	Certain Effects (Cycle)		✓ 8 94	112 20
Nov 17-5	128669 INS. Memt on Bicycle	6 71		105 49
DEC 20-11	158832 BANK BAL (MTL)		✓ 33 69	139 18
✓ 22-11	16 1996 SETTLEMENT OF			
45	DEBT OWING		✓ 33 65	172 53
JAN 18-12	1827 #1 MESS DIN GRANDEN	7 49		135 04
FEB	BALANCE	135 04		0
		352 43	352 43	
✓	bpc		135 04	135 04

CARRIED FORWARD

DEFERRED PAY

NR 4/5

Date	Particulars	Debit	Credit	Balance
	BROUGHT FORWARD			

CARRIED FORWARD

5th V. Loan.
C.I.E.
Sale of bicycle.
Bk. Montreal.
C.I.E. (Drawing).

135.04 E.E. 71 D.

TC29

R.C.A.F.
OVERSEAS HEADQUARTERS
FEB 23 1945

R.C.A.F. A28B. *(140640) WT-17533/0733 100M 6/43 H.I.R.&L. GP 748/6

OUTFIT ALLOWANCE PAID at #5 A.O.S.
WARRANT OFFICERS $ ..... ON .....
OFFICERS $50.00 ON 10-8-42 (12)
$ ..... ON .....

MARRIED or SINGLE M

APPOINTED OR ENLISTED AT Montreal, Que ON 15-8-41

RECORD OF PAY

NET RATE OF DEFERRED PAY $ Nil

BANKING ARRANGEMENTS Montreal

No. J12736 NAME IN FULL ERNEST STUART GUITON

RATE OF PAY

D.R.O. No.	Eff. Date	Rank	Group	P.F. or A.S. Rate	Daily Rate	Add Pay	Combined Rate	Pen. Ded.	Net Rate of Pay £	Casualties Affecting Rate of Pay
(12)	31-7-42	P/O	GL	A.S.	6 25		6 25		18.10.0 / 82.7.0	
0.3021	1-11-43	P/O	GL	A.S.	6 25		6 25		22.0.0 / 88.3.4	Decrease A/P
		P/O	SL	A.S.	6 25		6 25		18.10.0 / 82.7.0	5th V.L.
O/S 690-696	3.1.43	P/O	SL	A.S. (12)	7 00		7 00		33.10.0 / 105.05	From P/O

ASSIGNMENTS

Assignee	Eff. Date	Amount	Total
4th V.L.	1-5-43	16 80	
Mrs. Guiton Patricia M.	1-7-43	90 00	106 80
4th V.L.	1-11-43	16 80	90 00
5th V.L. F.O. 3530	1-11-43	16 80	106 80

DEPENDENTS ALLOWANCE

Date App. Forwarded	Relationship	Amount Awarded	Eff. Date
(12)	Wife		

REMARKS

N.D.T. CLASS. 672050

PAY AND ALLOWANCES

Date	Particulars of Entry	Debit	Credit	Balance
1943	BROUGHT FORWARD	92 35		
1-30-6	Pay		187 50	
	Sick Allow		7 00	
	Ass'l Pay	16 80		
	End Pay	85 35		0
		194 50	194 50	
	CARRIED FORWARD			

Date	Particulars of Entry	Debit	Credit	Balance
	BROUGHT FORWARD			
July	July Pay		193 75	193 75
"	Ass Pay	106 80		86 95
24	Cas Pay V 2917	44 70		42 25
31	Deposit V 1518	40 23		2 02
Aug	Aug. pay		193 75	195 77
	" ass'd pay	106 80		88 97
23	Related Dr IVC 1565 BV/079	18		88 79
27	Aug Dep	82 70		6 09
Sept	Sept Pay		187 50	193 59
	" Ass Pay	106 80		86 79
10	Cas Pay (Bournemouth) V-GH 3186	22 35		64 44
23	Cas Pay from Airmen a/c B-GH-404	22 35		42 09
27	Sept Dep	82 70		40 61
Oct	Oct Pay		193 75	153 1[illegible]
	" Ass Pay	106 80		116 34
28	" Deposit	44 70		1 64
1-30/11	Nov Pay		187 50	189 14
"	" a/p	106 80		82 34
11	From P/O 3-1-43 V-5138		249 00	331 34
	Nov Deposit	330 78		56 1
Dec	Dec pay		217 00	
	" A/P	106 80		110 76
28	Dec Deposit	105 05		5 71
	CARRIED FORWARD	146 54	1422 25	

DEFERRED PAY NR415

Date	Particulars	Debit	Credit	Balance
(12)	BROUGHT FORWARD			
	CARRIED FORWARD			

7629

R.C.A.F.
OVERSEAS HEADQUARTERS
AIR
FEB 23 1945

J012736 GUITON ERNEST S — FO

1 NUMBER | 9 NAME | 29 RANK

SERVICE AWARD CARD

R.C.A.F. FORM NO. R. 325

39-45 STAR	ATL. STAR	A/C EUR STAR	AFRICA STAR	PACIFIC STAR	BURMA STAR	ITALY STAR	FR. AND GER. STAR	DEFENCE MEDAL	GEN. SER. MEDAL	C.V.S.M.					
✓		✓						✓	✓	✓			op wgp		CP
										✓				AWARD	
														AWARD AND CLASP	
														APPLICATION DISPATCHED	
														RIBBON ISSUED	
													21/11/46	MEDAL ISSUED	

90231

PREFIX | NUMBER | NAME | RANK | CODE

IBM 83961

LICENSED FOR USE UNDER CANADIAN PATENT NUMBER 315306

CANCELLED

2986. 27/3/50

MEDALS RETD. UNDELIVERD

RETD TO STOCK 12-4-50

BARRIE

Mrs. Patricia M. ~~Guiton~~ (Widow) RE-MARRIED.

~~26 First Ave., 1436 - 6A ST. N.W.~~

~~Ottawa,~~ ~~CALGARY, ALBERTA~~

~~Ont.~~

~~Jan. 46.~~

27/4/48

11145 — 84TH AVE.

EDMONTON. ALTA.

3/10/49.

5865: 12/7/50

MEMORIAL BAR

DATE DESP

REGN. NO 866

R.C.A.F. G.64
H.Q. 885-G-64

Royal Canadian Air Force

CERTIFICATE OF PRESUMPTION OF DEATH

NO. 10060

This is to Certify that

J12736 FLYING OFFICER ERNEST STUART GULTON R.C.A.F.
(Number) (Rank) (Name in Full) (Unit)

has been officially reported as missing since the 30TH day

of JANUARY, 1944, and that, full inquiries having been made, no information has been received which would indicate that he may be still alive. For official purposes, therefore, he is presumed to have died on or since the above mentioned date.

Dated at Ottawa, Canada, this 6TH day of DECEMBER 1944

(T.K. McDougall)
Group Captain
R.C.A.F. Records Officer.

ROYAL CANADIAN AIR FORCE RECORDS OFFICE

J12736 (RO).

P.A.

REGISTERED OTTAWA, Canada, 21st November, 1946.

Mrs. Patricia M. Guiton,
29 Donegani Avenue,
Valois, Que.

Dear Mrs. Guiton:

It is a privilege to have the opportunity of sending you the Operational Wings and Certificate in recognition of the gallant services rendered by your husband, Flying Officer E.S. Guiton.

I realize there is little which may be said or done to lessen your sorrow, but it is my hope that these "Wings", indicative of operations against the enemy, will be a treasured memento of a young life offered on the altar of freedom in defence of his Home and Country.

Yours very sincerely,

(W.A. Dicks)
Wing Commander
for Chief of the Air Staff.

/BBO

BV.15486 Personal Effects of J.12736 F/O. Guiton, E.S.

1 gladstone bag contg:-
2 prs. trousers
2 tunics
1 pr. braces
1 belt
8 collars
3 pipes
1 Schick electric razor in case
(cover broken)
14 ties
2 hanks wool
3 needles
1 field service cap
9 shirts
1 pr. flannels
8 handkerchiefs
1 towel
4 photos(1 frame & 2 cases)
2 prs. scissors
1 pr. pyjama trousers
1 pr. combinations
1 pr. pants
1 glove
1 diary
1 note book
1 loose leaf cover
1 toilet case contg:-
1 hair brush
1 steel mirror
1 razor in case
1 shave brush in case
2 shave soap cases
1 wrist watch "Cyma"(glass broken)
1 writing case contg:-
Stationery
Photographs
Letters
1 Waterman fountain pen
1 pencil
1 wallet
1 pack playing cards
1 pamphlet
1 tobacco pouch with
1 identity bracelet
1 button
1 stud
Rank braid
1 pr. laces
1 blood donor card
1 pr. ladies silk stockings

1 carton contg:-
1 kit bag
3 prs. shoes
2 prs. shoe trees
1 pr. leather slippers
1 pr. pyjamas
4 prs. pants
3 vests
1 jock strap
1 sports shirt
1 handkerchief
1½ prs. socks
3 prs. gloves
½ pr. mittens
1 scarf
1 belt
1 hair brush
1 Testament
1 holdall with housewife
1 button stick
3 brushes
1 shave brush
1 duster
1 ball wool
2 spanners
1 spoon
2 prs. laces
1 kit bag
1 greatcoat
1 raincoat
1 money belt
1 zip waistcoat
1 pr. khaki drill trousers
1 service dress cap
1 jock strap
1 swim trunks

P.T.O.

1 dressing gown
1 pr. suspenders
4 coat hangers
1½ prs. pyjamas
2 vests
1 pr. pants
1 pr. braces
1 kit bag handle
12½ prs. socks
1 box letters
1 nail file
1 ball wool
3 handkerchiefs
3 collars
2 prs. socks
1 shirt

1 all black cycle retained at unit pending disposal instructions.

P.O. Savings Bank book 28473 Glasgow and 28472 Glasgow extracted by unit and forwarded to Officer i/c Estates, R.C.A.F. Overseas Headquarters.

1. Carton contg;-
   5. shirts.
   2. Prs. socks.
   2. Prs. Pants.
   1. Vest.
   6. Handkerchieves.

Original Station inventory signed by G Nutkins F/O dated 1.3.44.
Effects checked at Central Depository on 24.2.44.

P.T.O.

OFFICIAL ROYAL CANADIAN AIR FORCE CASUALTY NOTIFICATION

NUMBER J12736 (~~R117553~~) RANK F/O UNIT 405 SQDN. (OVERSEAS)

TRADE NAV. (G.L.)

NAME GUITON, ERNEST STUART

R.C.A.F.	R.A.F.	R.A.A.F.	R.N.Z.A.F.	OTHER
X				

PRESENT MARITAL STATUS MARRIED RELIGION C OF E CANADIAN YES

FRENCH CANADIAN OTHER

NEXT OF KIN MRS. E.S. GUITON

RELATIONSHIP ~~XXXXXXXXXXXX~~ WIFE

ADDRESS ~~26 FIRST AVE., OTTAWA, ONT.~~ 29 Donegani Ave., Valois, Que.

FATHER'S NAME

ADDRESS MR. & MRS. JAMES ERNEST GUITON LIVING ON ENLISTMENT YES

MOTHER'S NAME PRINCE EDWARD AVENUE,

ADDRESS VALVOIS, QUE. LIVING ON ENLISTMENT YES

ADDRESS AT TIME OF ENLISTMENT MARITAL STATUS AT TIME OF ENLISTMENT

OCCUPATION

WAS MEMBER ATTACHED TO R.A.F. AT ANY TIME? YES/NO NOT KNOWN BEING OBTAINED

IF CASUALTY OCCURRED IN CANADA DID MEMBER HAVE SERVICE OUTSIDE CANADA DURING WAR WITH THE GERMAN REICH? YES/NO

IF ON LEAVE, STATE DATE LEAVE COMMENCED AND WHETHER ON LEAVE WITH OR WITHOUT PAY?

CASUALTY DETAILS:

AUTHORITY CAS. SIG. NO. BOMBER MAIL LETTER-----d-3-NOV-44

ESTATES BRANCH DEC 13 1944 H.Q. OTTAWA DEPARTMENT OF NATIONAL DEFENCE

PREVIOUSLY REPORTED "MISSING" 30-JAN-44 (OFFICIAL MISSING DATE CORRECTED) AFTER AIR OPERATIONS (OVERSEAS)(OVER BERLIN, GERMANY)

NOW "PRESUMED DEAD" 30-JAN-44 FOR OFFICIAL PURPOSES.

LAST WILL ATTACHED TO NOTIFICATION TO A. OF E.? YES/~~NO~~ (2) M.F.M. 5 ATTACHED TO NOTIFICATION TO A. OF E.? YES/~~NO~~

CERTIFICATE P. OF D. ATTACHED TO A. OF E. COPY YES/~~NO~~

DATE 6-DEC-44

FOR CHIEF OF THE AIR STAFF

R.C.A.F. R217
30M-6-44 (4664)
H.Q. 885-R217
△TS-RT

2

ADMINISTRATOR OF ESTATES, OTTAWA

66851

R.C.A.F. MESSAGE

No. of Groups [illegible] SO FILE

OFFICE DATE STAMP & SERIAL NUMBER

TO MRS E S GUITON 29 DONEGANI AVENUE VALOIS QUEBEC

(REPORT DELIVERY)

FROM RCAF CASUALTIES OFFICER

ORIGINATOR'S NUMBER	DATE	REFERENCE AND DATE
9580	1FEB	MY / YOUR

(Use Double Space Typing)

REGRET TO ADVISE THAT YOUR H SBAND FLYING OFFICER ERNEST STUART GUITON J ONE TWO SEVEN THREE SIX IS REPORTED MISSING AFTER AIR OPERATIONS OVERSEAS JANUARY THIRTY FIRST STOP LETTER FOLLOWS

NR 119/1 CHURCH OF ENGLAND

This message must be sent AS WRITTEN and may # be sent by W/T.

R04

SIGNATURE L E Oatm S/O

ORIGINATOR'S INSTRUCTIONS - DEGREE OF PRIORITY

IMMEDIATE

TIME OF ORIGIN 1615 GMT

T. O. R.

SYSTEM IN	TIME IN	READER	SENDER	SYSTEM OUT	TIME OUT	READER	SENDER	SYSTEM OUT	TIME OUT	READER	SENDER
				11	1726		TD				

T. H. I.

 # Originator is to insert "NOT" if message is not to go by W/T over any part of the route.

R. C. A. F. S. 11
300M Sets-2-43 (3077)
H.Q. 885-S-11

CENTRAL REGISTRY FILE COPY

Statement of Services

Promotions, Reductions, Transfers, Casualties, Annual Training, Qualification Certificates, etc.	Effective Date	Authority for Entry	Signatures of Officers Certifying Correctness of entries
Accepted for Service with effect from.....			..... Officer Commanding
.....			Unit.....

NOTE.—These entries are to be made from time to time as they occur and certified by the Officer making the entry.

Attestations to be made out in duplicate, the original being forwarded to be filed in Regimental Orderly Room, the duplicate to be kept in the Battery, Squadron, Company, etc.

H.Q.60

G-350

ATTESTATION D526325

NON-PERMANENT ACTIVE MILITIA OF CANADA

UNIT 2nd. BATT'N. ROYAL MONTREAL REGT. N.P.A.M REGTL. No. 889

1. Surname? (Block letters) GUITON
2. Christian names? Ernest Stuart
3. Present address? 93 Queens Rd - Valois P.Q.
   Phone No. Pt Claire 2158
4. Date of Birth?* June 2-1918 5. British subject? Yes
6. Occupation? Clerk 7. Religion? C of E
8. Next of Kin James E Guiton 9. Relationship? father
   Address 93 Queens Rd - Valois
10. Previous Naval, Military or Air Force Service No
    (Give particulars, qualifications, etc.)

J B of D.

CERTIFICATE OF MEDICAL EXAMINATION

R 20/20 L 20/20

Height 5-11 Weight 164 Chest max 37 1/4 min 34 1/2

Descriptive marks atrophy left testis

I have examined the above named man in accordance with instructions laid down in Instructions for the R.C.A.M.C. and C.D.C. 1937 Appendix V and find him ..... Category A

Date July 22 1940 Signature R. G. Reid, Capt. R.C.A.M.C.

DECLARATION TO BE MADE ON ATTESTATION

I, the undersigned E. S. Guiton do sincerely and solemnly declare that to the best of my knowledge and belief, the above answers (made by me) to the foregoing questions are true; that I am willing to be attested for the term of three years or until legally discharged, and do understand the nature and terms of this engagement, that I will safeguard all clothing, arms and equipment issued to me and will return same when required, and that I will report any change in address of myself, or my next of kin to my Commanding Officer.

OATH TO BE TAKEN

I, Ernest S. Guiton do sincerely promise and swear (or solemnly declare) that I will be faithful and bear true allegiance to His Majesty.

[signature] Signature of Witness [signature] Signature of Man

Dated this 22nd day of July 1940 at Montreal

CERTIFICATE OF ATTESTING OFFICER

The recruit above-named was cautioned by me that if he made any false answers to any of the above questions he would be liable to be punished by law. The above questions were then read to the recruit in my presence. I have taken care that he understands each question and that his answer to each question has been duly entered and replied to, and the said recruit has made and signed the declaration and taken the oath.

[signature] Signature of Magistrate, Justice of Peace, or Attesting Officer

M.F.B. 235d
80M—3-40 (4392)
H.Q. 1772-39-1545

*To be shown day, month, year—Example:—25-8-39.

Statement of Services

Promotions, Reductions, Transfers, Casualties, Annual Training, Qualification Certificates, etc.	Effective Date	Authority for Entry	Signatures of Officers Certifying Correctness of entries
Accepted for Service with effect from.....	22.7.40.	Pt. II O. No. 8. 22.7.40.	[signature] Officer Commanding Unit.....
Posted to H.Q	7-8-40	Pt. II O-No. 15 7-8-40	[signature]
Proceeded to St. B.C.	25.8.40.		
Proceeded to Mount St. Bruno	25.8.40		
~~Returned from Mount St. Bruno~~	~~14.9.40~~		
Returned to Montreal	7-9-40	Pt. II O-No. 33 7-9-40	[signature]
To be S.O.S. being under 25 years of age, unmarried, fit, but refuses to consider Active Service HQs. notified 12.6.41			[signature] Capt. Adjt.
S.O.S. (KR & O.(Can.)392/93	11.6.41	Pt.11 O. 28 15.6.41	
Amendment: Pt.11 O. 28, d/15.6.41 cancelled. S.O.S. to RCAF	15.6.41	Pt.11 O. 36, d/ 28.7.41	[signature] Lieut
Medals and Decorations			

NOTE.—These entries are to be made from time to time as they occur and certified by the Officer making the entry.

Attestations to be made out in duplicate, the original being forwarded to be filed in Regimental Orderly Room, the duplicate to be kept in the Battery, Squadron, Company, etc

Statement of Services

M.F.B. 235d
80M—3-40 (4392)
H.Q. 1772-39-1545

Promotions, Reductions, Transfers, Casualties, Annual Training, Qualification Certificates, etc.	Effective Date	Authority for Entry	Signatures of Officers Certifying Correctness of entries
Accepted for Service with effect from.....			Officer Commanding Unit.....

NOTE.—These entries are to be made from time to time as they occur and certified by the Officer making the entry.

Attestations to be made out in duplicate, the original being forwarded to be filed in Regimental Orderly Room, the duplicate to be kept in the Battery, Squadron, Company, etc.

Air Crew Pilot or Observer Standard

ROYAL CANADIAN AIR FORCE

RECORD OF SERVICE AIRMEN

R.C.A.F. Special Reserve

9/1294/36

R-117553	GUITON	ERNEST STUART	CHURCH OF ENGLAND
A.F. No.	Surname	Christian Names	Religion

2-6-18 Place Montreal, Que. Country Canada Citizen of Canada Racial Origin British

ENLISTMENT	CIVIL EDUCATION	PREVIOUS SERVICE
Date 15-7-41	High School Entrance ✓ Jr. Mat. Sr. Mat.	2nd Batt. R.M.R.
At Montreal, Que.	Technical School 4 yrs Corres. Courses 2 yrs. electricity	Montreal
Term Duration of War	University	July 1940 - July 1941

RANK	DATE	MED. CAT.	DATE
AC2	15 7 41	A3B	14 7 41
LAC	19 12 41		
Sgt.	23 5 42		

CIVIL OCCUPATIONS AND EXPERIENCE

Clerk 1936-1938
Electrical repairing Shop 1938-1940
Clerk 1948 - 1941

COURSES AND TRADE TESTS

Trade	Grp.	%	PorF	Date Rem.	Trade	Grp.	%	PorF	Date Rem.
Observer				19 12 41					
Observ. Sp.				23 5 42					

PARTICULARS OF FAMILY M S D

Wife Maiden Name Present Address (in pencil)

Children	Names	Date of Birth	Place of Birth

NAME(S) ADDRESS AND RELATIONSHIP OF PERSONS TO BE INFORMED OF CASUALTIES (in pencil)

Mr. James Ernest Guiton (Father)
93 Queen's Road Valois.
Que.

LEAVE

FROM	TO	AUTH. AND DESCRIPTION
16-7-41	~~15-8-41~~ 14-8-41	~~On leave wit-hout pay~~ Bull. 129
Issued Sp.L.T.W. No C 101271 d/24-6-42 DR0153/42		
4-7-42	13-7-42	(9) Sp Leave DRO. 159

CHARACTER AND TRADE ASSM. HONOURS, AWARDS AND MENTIONS

DATE	CHARACTER	TRADE AND ASSM.	HONOURS AND AWARDS	SIGNATURE
DRO 129 23/5/42	Awarded Observers Badge			W.D.S./S/L.

MOVEMENTS AND CASUALTIES

AUTHORITY	UNIT FROM	UNIT TO	DATE
M.O. R 13	R/C Mtl. Que.	R/C. Mtl. Que.	15-7-41
	R/C Mtl Que	~~#1 M.D. Toronto~~ ~~Leave~~ ~~Boat~~ #1 M.D. Toronto	15-8-41
		DRO. 199/41	
DRO - 201-41	#1 M.D. Toronto	#4 Bch's Fingal	20/8/41
DRO 270/41	#4 Bch's Fingal	#6 I.T.S. Toronto	27/10/41
DRO 9/42	#6 I T S	#5 A O S Winnipeg Man	2-12-42

AUTHORITY	UNIT FROM	UNIT TO	DATE
DRO 70 Issued D.R.O. #86.	S.L.T.W.C. #5 A.O.S. Wpg.	23340 d/ #7 B&G Carlson	22-12-41 11-4-42
DRO 129	#7 B&G	#1 ANS	23-5-42
DRO 168	Discharged to a Commission		2-7-42

R.C.A.F. R.44C
100M—12-40 (8755)
H.Q. 1062-3-58

(OVER)

Finger Printed
Date 15-7-41
Initials EB

(6)

R.C.A.F. T.81 (Revised)
25M—10-41 (974)
H.Q. 1062-13-58

ROYAL CANADIAN AIR FORCE

J. A. T. P. CANADA

REPORT ON PUPIL AIR OBSERVERS

AIR AND GROUND TRAINING

SURNAME GUITON Christian Names Ernest Stuart

Number J. 12436 ~~R.51.353~~ Rank ~~AC 2~~ P/O

INSTRUCTIONS

Instructions regarding Form T.81 are given in A.F.A.O. A.51/22, paras. 5, 10, 11, and 15. CROSS OUT WORDS NOT APPLICABLE.

PART I

1. No. 6 INITIAL TRAINING SCHOOL. COURSE NO. 39 FROM 27-10-41
TO 19-12-41

2. EXAMINATION RESULTS.

SUBJECT	MARKS Maximum	MARKS Obtained	REMARKS
Mathematics	150	109	
Armament	50	48	
Signals	150	135	
Navigation	200	169	
Visual Link Trainer (39)			
Airmanship, Theory of Flight and Engines	100	83	Keen alert type, fairly self confident.
Drill	100	86	(in special mathematics test after
Law and Discipline, etc	100	73	examination obtained mark of 138.)
Hygiene and Sanitation			
A/C Recognition	100	94	
Anti-Gas	50	39	
TOTAL	1000	836	
Position in Class 11	Percentage	84 %	
No. in Class 23	PASS	//~~FAIL~~/	

F. Stanchet Taylor W/Cmdr.
Commanding Officer

TO BE PASSED TO 5 A.O.S. Winnipeg

No. 6 I.T.S. Toronto, Ontario.

DATE 18-12-41

PART II

1. No. 5 Air Observers' School. Course No. 41 From 4-1-42

2. Flying Time:— To 11-4-42

Aircraft	Day		Night		Bombing	Photo ~~Camera~~	Total
	1st Nav.	2nd Nav.	1st Nav.	2nd Nav.			
Avro Anson	26.25	24.15	7.55	7.50	14.35	3.55	84.55

3. Bombing Results:—

Exercise	Error in Yards converted to 10,000 feet	No. of Bombs Dropped
Grouping, Radius	111	17
Application, High Level	187	18
Bombs dropped on Navigation Flights and/or Camera Obscura Bombing		

4. Examinations and Proficiency:—

Subject	Marks Maximum	Marks Obtained	Remarks
Proficiency as A/Navigator	500	391	Navigation: Class air work well above average. Works well under adverse conditions.
Proficiency as B/A	100	67	
D.R. Plotting	150	114	
D.R. and D/F. W/T (Written)	200	180	
Compasses and Instruments	150	112	
Signals	100	95	
Bombing	100	91	
Maps and Charts	100	75	
Meteorology	100	80	
Photography	100	84	
Reconnaissance	100	74	Armament: Has done some very good bombing. Is sometimes erratic. Needs practice recognizing and correcting errors.
Totals	1,700	1363	
Position in Class 4	Percentage	80.2 %	
No. in Class 26	Pass	~~Fail~~	General: A young man with leadership qualities. Is keen and hard working.
Assessment as A/O	Above Average		
As Instructor	~~Suitable~~	Unsuitable	
Commission Rank	Suitable	Unsuitable	
Character and Leadership	Maximum 850	Obtained 589	

G Kaa Flt-Lt.
Chief Instructor

To be Passed to No. 7 B. & G. S. PAULSON, MAN.

No. 5 A.O.S.

Date 11-4-42

PART III

1. No. 7 Bombing and Gunnery School. Course No. 41 From 13-4-42

2. Flying Time:— To 23-5-42

Aircraft	Bombing		Gunnery		Passenger	Total
	Day	Night	Day	Night		
Battle	17:40	4:45	9:40	-	-	32:05
				Brought Forward		84:55
				Grand Total		117:00

3. Bombing Results:—

Exercise	Average Error in Yards		No. of Bombs Dropped	
	Day	Night	D	N
Application—High Level—Converted to ~~1,000 feet~~ 10,000'	143	199	42	18
Low Level	90	-	18	

4. Air Gunnery:—

Exercise	% Hits to Rounds Fired	No. of Rounds Fired
Beam Test	5	500
Beam Relative Speed Test	3	700
Under Tail Test	5.5	600

5. Examinations and Proficiency:—

Subject	Marks		Remarks
	Maximum	Obtained	
Bombing (Written)	150	101	Bombing: Fair bomb aimer. Not quite sure of bombing errors.
Bombing (Pract.)	150~~300~~	126	
Proficiency as a B/A	300~~150~~	243	
Gunnery (Written)	100	76	
Gunnery (Pract.)	100~~200~~	83	
Proficiency as a A/G	200~~100~~	140	
			Gunnery: Fairly consistent gunner. Competent in handling guns.
Total	1,000	769	
Position in Class 12	Percentage	76.9 %	
Number in Class 25	Pass	~~Fail~~	General: Learns quickly. Grasps new ideas. Fairly quick to take the initiative if course is clear.
Commission Rank	Suitable	Unsuitable	
Character and Leadership	Maximum 500	Obtained 360	

W. L. Gilmour W/Cdr
Chief Instructor

W. E. Dippie G/C
Officer Commanding

Awarded Air Observers Badge—Date 23-5-42

No. 7 B. & G. S.

To be Passed to No. 1 A.N.S.

Date 23-5-42

PART IV

1. No. 1 Air Navigation School. Course No. 41 From 25/5/42
   To: 3/7/42

2. Flying Time:—

Aircraft	Day		Night		Bombing	Passenger	Total
	1st Nav.	2nd Nav.	1st Nav.	2nd Nav.			
Anson	6:05	7:00	7:25	7:35			28:05
				Brought Forward			117:00
				Grand Total			145:05

3. Examination and Proficiency:—

Subject	Marks		Remarks
	Maximum	Obtained	
Proficiency as Air Navigator	250	200	Clean cut, intelligent and respectful. An excellent type with above average ability. Good in air work and give his best to all his work.
Astronomical Navigation Plotting	150	106	
Astronomical Navigation (Written)	100	95	
Total	500	401	
Position in Class 6	Percentage	80.2%	
Number in Class 26	Pass	PASS	
Recommended as Instructor	Yes	Yes	
Assessment as Air Navigator	Above average		
Character and Leadership	Maximum 250	Obtained 202	

Chief Instructor

No. 1 A.N.S.

Date 3/7/42

4. Final Assessment:—

	Training Marks			Character and Leadership			Totals		
	Maximum	Obtained	%	Maximum	Obtained	%	Maximum	Obtained	%
Air Observer School	1,700	1363	80.2	850	589	69.3	2,550	1952	76.6
Bombing and Gunnery School	1,000	769	76.9	500	360	72.0	1,500	1129	75.3
Air Navigation School	500	401	80.2	250	202	81.	750	603	80.4
Totals	3,200	2533	79.1	1,600	1151	72.	4,800	3684	76.7

Position in Class 64 out of 277

Remarks:—

Recommended for Commission

Officer Commanding

No. 1 A.N.S. ~~and B. & G.S.~~

Date 3/7/42

OCCUPATIONAL HISTORY FORM

THIS FORM IS TO BE COMPLETED FOR EACH MEMBER OF THE ARMED FORCES. THE INFORMATION SOUGHT IS FOR THE USE OF GENERAL ADVISORY COMMITTEE ON DEMOBILIZATION AND REHABILITATION, A COMMITTEE SET UP BY THE GOVERNMENT OF CANADA TO STUDY PLANS FOR ESTABLISHING IN INDUSTRIAL LIFE THE MEMBERS OF THE ARMED FORCES, AFTER DISCHARGE. ACCURACY AND COMPLETENESS IN ANSWERING WILL BE OF MUCH HELP TO THE COMMITTEE.

PLEASE READ CAREFULLY THE INSTRUCTIONS GIVEN ON THE INSIDE OF COVER BEFORE COMPLETING FORM

PLEASE LEAVE BLANK

Section A—GENERAL INFORMATION

1. (a) Print name in full.....(b) Reg'l. No.....
2. (a) Arm of service.....(b) Unit.....(c) Rank.....
3. (a) Date of birth.....(b) Have you any dependents?.....(c) Place of residence at time of enlistment.....
4. (a) Place of enlistment.....(b) Date of enlistment.....

Section B—EDUCATION AND TRAINING

5. (a) State age on finally leaving school.....(b) Were you attending school or college up to the time of enlistment?.....
6. State definitely highest standing reached at public, technical or high school (for instance—"4 years, Public School", "two years, High School", "Junior Matriculation", or "4 years technical course in printing", etc.).....
7. If you attended a university, give name of university and standing or degree secured.....
8. (a) Did you ever enter upon a trade apprenticeship?.....(b) If so, for what occupation?.....(c) Did you finish it?.....(d) If you did not finish it, how long did you serve at it?.....
9. (a) What languages do you speak fluently?.....(b) What languages do you read well?.....

Section C—EMPLOYMENT CONDITION AT TIME OF ENLISTMENT

10. (a) State whether you were WORKING or NOT WORKING at time of enlistment. (Enter here only "Working" or "Not Working", as case may be; particulars are asked for below).....(b) At time of enlistment of what trade union or professional society were you a member?.....

Section D—PARTICULARS CONCERNING THOSE WHO WERE UNEMPLOYED AT TIME OF ENLISTMENT

QUESTIONS 11 TO 17 REFER ONLY TO THOSE WHO ANSWER "NOT WORKING" IN QUESTION 10 (a)

11. Had you ever been employed fairly regularly since leaving school?.....
12. (a) If answer to 11 be "Yes", state exact trade or occupation at which you actually worked.....(b) State how long you had worked at this trade or occupation.....
13. If answer to 11 be "No", state exact trade or occupation for which you feel qualified.....
14. If you had been employed after leaving school, state when you last worked fairly regularly before enlistment.....
15. Give details of last employer, if any: Name.....Address.....
16. Nature of employer's business (for instance, "farmer", or "building contractor", or "boot factory", or "iron foundry", or "retail store", etc.).....
17. (a) If your last employment was in a business of your own, state nature and address of business.....(b) Date of discontinuing it.....

Section E—PARTICULARS CONCERNING THOSE WHO WERE EMPLOYED AT TIME OF ENLISTMENT

QUESTIONS 18 TO 23 REFER ONLY TO THOSE WHO ANSWER "WORKING" IN QUESTION 10 (a). PLEASE READ THESE QUESTIONS AND REPLY TO THOSE APPLYING TO YOU AT TIME OF ENLISTMENT

IF YOU WERE AN EMPLOYEE WORKING FOR AN EMPLOYER UP TO THE TIME OF ENLISTMENT, PLEASE ANSWER QUESTIONS 18 TO 21

18. Name of employer.....Address.....
19. Nature of employer's business (for instance, "farmer", or "building contractor", or "boot factory", or "iron foundry", or "retail store", etc.).....
20. (a) Your specific occupation.....(b) Number of years' experience at this occupation with any employer.....
21. (a) Did your employer promise definitely to give you employment on discharge?.....(b) Did your employer refuse to promise you employment on discharge?.....(c) Do you wish to return to your former employment?.....

IF YOU WERE WORKING ON YOUR OWN UP TO THE TIME OF ENLISTMENT, THAT IS TO SAY, OPERATING A FARM, A STORE, AN AGENCY, OR IN PROFESSIONAL PRACTICE, OR AS A PARTNER IN ANY SUCH LINE, PLEASE ANSWER QUESTIONS 22 AND 23

22. (a) State nature of business, or professional practice.....(b) Where was it located?.....
23. (a) Number of years engaged in this business.....(b) Have you made, or will you make plans to return to the same or a similar business on discharge?.....

Section F—PARTICULARS OF FARMING EXPERIENCE

24. (a) Do you wish to engage in farming after the war?.....(b) Do you feel competent to operate a farm?.....(c) If so, in what kind of farming?.....
25. (a) Were you born on a farm?.....(b) How many years' actual farming experience have you had?.....(c) In what provinces did you have experience?.....

Section G—MISCELLANEOUS

26. Have you made any arrangements other than indicated above, for re-establishment in civil life after discharge?.....
27. If so, state nature of your plans (for example, do you plan to return to school, or have you been assured of a job, etc.).....
28. State any employment preference or ambition you may have, other than indicated elsewhere in this form.....

DATE.....194.....SIGNATURE.....

R.C.A.F. Records Office
Rec'd AUG 1941
C.I.B.
O. K.
R. C. G. H. N. I.
S. L.

[redacted] Completion and Return by

Form P. 64

[redacted]

Mrs. (Patricia M.) E.S. Guiton

~~26 First Ave.,~~ 29 Donegani Ave

~~OTTAWA, Ontario~~ Valois, Que

Any further communication on this subject should be addressed to:—

THE DIRECTOR OF ESTATES,
DEPARTMENT OF NATIONAL DEFENCE,
OTTAWA, ONTARIO.

and the following number quoted:—

H.Q. J12736 F.D. 316

ESTATES BRANCH
JAN 11 1945
H.Q.
OTTAWA
DEFENCE

DEPARTMENT OF NATIONAL DEFENCE

ESTATES BRANCH

OTTAWA, ONT.

2 Jan 1945

For the purpose of record and in the event of there being any Service estate available for distribution (according to law) on account of the late

GUITON ERNEST STUART F/O

J12736 R.C.A.F.O/S

it is necessary that certain information regarding the deceased and his relatives should be furnished the Estates Branch. You are asked therefore to read the enclosed memorandum before completing pages 2 and 3 of this form. The particulars required are to be carefully filled in and the Declaration on page 4 should then be signed in the presence of a Clergyman, Priest, Local Magistrate, Commissioner for Oaths, Notary Public or a Commissioned Officer of any of His Majesty's Forces who should be asked to complete and sign the Certificate. This form should then be returned to the above address.

If there is insufficient space for complete particulars to be given opposite any question on pages 2 and 3 of this form, the space under "additional remarks" on page 4 should be used.

GSG/DW

for G.S. Gibson F/L
Director of Estates.

M.F.W. 77
16M-10-44 (5854)
H.Q. 1772-39-972

ANSWER IN FULL ALL APPLICABLE QUESTIONS

STATEMENT of the Names, Ages and Addresses or Dates of Death, of all the relatives that the deceased ever had in each of the degrees specified below:

Degrees of Relationship	RELATIVES required to be accounted for		INFORMANT'S STATEMENT: NAME IN FULL of any Relative, if any, in each degree specified	Age	ADDRESS IN FULL of each surviving Relative, opposite his or her name, and date of death of each deceased relative
1	Widow of the Deceased		PATRICIA MARGUERITE GUITON	23	26 FIRST AVE. OTTAWA, ONTARIO
2	Children of the Deceased and dates of their Births		—		—
3	Father of the Deceased		JAMES ERNEST GUITON	56	84 PRINCE EDWARD VALOIS, QUE.
4	Mother of the Deceased		EDNA C.B. GUITON	54	84 PRINCE EDWARD VALOIS, QUEBEC.
5	Brothers of the Deceased	Full Blood	JAMES GORDON GUITON	29	63 ORANGE ST. SAINT JOHN, N.B.
			DOUGLAS EDWARD GUITON	25	CANADIAN ARMY OVERSEAS.
		Half Blood	—		—
6	Sisters of the Deceased	Full Blood	MARJORIE BROWN		211 DESAULNIERS BLVD, ST. LAMBERT, QUE.
		Half Blood	—		—
7	Names of brothers or sisters (whether of the full or the half blood) of the Deceased, *who are dead*, and date of death of each.		Names and ages of their children (if any)		Address of their children
	—		—		—

ANSWER FULLY EACH QUESTION ON THIS PAGE

PARTICULARS AS TO IDENTITY

8	Full names of the deceased.	ERNEST STUART GUITON
9	Date of his birth.	JUNE 2, 1918
10	Place and date of his marriage.	JUNE 27, 1942, VALOIS, QUEBEC.
11	Place and date of his parents' marriage.	APRIL 30, 1915, MONTREAL, QUE.

PARTICULARS OF DOMICILE

12	Place where deceased was born.	MONTREAL, QUEBEC.
13	State, in order, the Province, State and/or County in which he resided before enlistment and the period of time in each.	(a) MONTREAL, QUEBEC. 2 YEARS (b) ~~VALOIS~~ DORVAL, QUEBEC. 16 ~~22~~ YEARS. (c) VALOIS, 5 11 (d)
14	Nature of employment before enlistment.	ELECTRICIAN, BEPCO. CAN. LTD.
15	State whether he owned the premises in which he lived, and, if so, where situated.	NO.
16	Name place where deceased stated he intended to make his permanent home.	MONTREAL.

PARTICULARS OF ESTATE

17	Did he leave a Will? If in your custody, please forward.	YES. ON AIR FORCE RECORDS
18	If married, and domiciled in the Province of Quebec or in a State in the U.S.A. or in a Country under the laws of which there is community of property between spouses,—was there a marriage contract dealing with property?	YES.
19	Did he have a Bank, Post Office or other deposit account? If so, give name and address of bank, etc., and the amount on deposit. Do you wish it administered with the pay account?	NO.
20	Amount of War Savings Certificates held by deceased. Indicate where located.	8 — 26 FIRST AVE OTTAWA. ONT.
21	Amount of Victory Loan Bonds held by deceased. Indicate whether registered or bearer and where located.	—
22	If deceased had life insurance, name companies and amount payable under each policy and the person named as beneficiary therein.	$1,000.00. METROPOLITAN LIFE. GROUP INS. WITH CO.
23	Describe other assets, if any, and estimated value thereof. Use space on page 4 if necessary.	—

OTHER PARTICULARS

24	Did the deceased after enlistment incur any debts for:— *(a)* His own separate board and lodging while on service. *(b)* Service clothing and equipment. An itemized account for each such debt should be attached hereto, and if same is correct you should mark the bill "approved" and sign same. If believed incorrect, give particulars.	—
25	Have you or any other relative paid the funeral expenses or any part thereof? If so, attach itemized accounts showing amount paid, and by whom.	—

(NOTE:—The government pays funeral expenses within the amounts authorized in the Regulations, where death occurs and burial is made Overseas as well as where death occurs and burial is made in Canada or elsewhere in the North American zone, and if a relative has already paid those expenses the Government will reimburse such relative to the extent of the amount authorized in the Regulations. Any amount of such expenses in excess of those authorized in the Regulations is not payable by the Government nor is it chargeable against the service estate of the deceased.)

(PLEASE TURN OVER)

DECLARATION

*Insert degree of relationship for example, "Widow", "Father", "Brother", etc.

I hereby declare that all the particulars shown on this form are correct, and a true and complete statement of all the relatives that the deceased ever had in the degrees specified; and that I am the

*...Widow..., of the deceased.

N.B.—To be signed in full in the presence of a Clergyman, Priest, Local Magistrate, Commissioner or Notary Public or Commissioned Officer of any of His Majesty's Forces.

...Mrs. T. M. Guiton... {Signature of Informant}

26 First Ave. Ottawa, Ont. Address

CERTIFICATE

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

See above. ...Mrs. T. M. Guiton... {Name of informant} is the...Widow...of the Deceased above described. The above Declaration was made by the Informant and signed in my presence.

Dated at...OTTAWA, Ont...this...9th...day of...Jan...19 45

Signature of Clergyman, Priest, Magistrate, Commissioner or Notary Public or Commissioned Officer of any of His Majesty's Forces...

Qualification...MAJOR Ddn. 17 RHY.

Address...26-1st. Ave— OTTAWA, Ont.

NOTE.—Before granting the above Certificate, care should be taken to see that the informant gives particulars concerning the death of any Relative stated by him or her to have died, and that the full name and address and age of each surviving Relative specified is stated in its proper place in the Statement opposite.

(If the deceased has no living relatives of the degrees shown on page 2, the names and addresses and relationship of other relatives should be set out below.)

USE SPACE BELOW FOR ANY ADDITIONAL REMARKS YOU MAY WISH TO MAKE

R.C.A.F. Special Reserve

Aircrew Pilot or

AIR FORCE No. R 117553 POSTED TO Montreal Recruiting Centre TRADE Observer Std.

ROYAL CANADIAN AIR FORCE

(ATTESTATION PAPER)

(Pages one and two, only, are to be completed in Applicant's own Handwriting)

1. Surname GUITON Full Christian Names ERNEST STUART.
2. Present Address 93 QUEEN'S ROAD, VALOIS, P. Q. Telephone Pte. Cl. 2158
3. Permanent Address 93 QUEEN'S ROAD, VALOIS P. Q.
4. Place of Birth Montreal, Que. Citizenship Canadian
5. Date of Birth June 2, 1918 ~~Married~~, Single, ~~Widower~~, ~~Separated~~, ~~Divorced~~ Single
6. Particulars of Children None

Name	Date of birth	Name	Date of birth
N. A.			

7. Occupation Clerk 8. Religion Protestant (Church of England)
   State denomination
9. Languages English Fluently
   State proficiency
10. Next of Kin (Full Name) James Ernest Guiton Relationship Father
    " Address 93 Queen's Road, Valois, P. Q.
11. Father (Full Name) James Ernest Guiton Birthplace St. Helier, Jersey Island (Brit)
    " Address 93 Queen's Road, Valois, P. Q. Citizenship Canadian
    " Occupation Auditor
12. Mother (Full Maiden Name) Edna Evans Birthplace Montreal
    " Address 93 Queen's Road, Valois, P. Q. Citizenship Canadian
13. Details of any Naval, Military or Air Force Service:

Unit	Place	Rank	Trade	Date From	Date To	Reason for discharge
2nd Batt. R. M. R.	Montreal	Private		July 1940	Present 6-1-41	To join RCAF

R.C.A.F. Records Office
Rec'd. JUL 19 1941
O.K. C.I.S.
R.C. N.I.
S.L. P.A.

14. Honours, Awards, Mentions None
15. Are you now on any Naval, Military or Air Force Reserve? yes
16. Have you previously made application to join the R.C.A.F.? no If so, where? n. a.
    When? n. a. Result n. a.
17. Were you ever discharged from any branch of His Majesty's Forces as Medically Unfit? no
    If so, state nature of disability n. a.
18. Have you ever been or are you now in receipt of a Disability Pension? no
    If so, state nature of Disability n. a.
19. Have you ever been convicted of an indictable offence? no If so state nature n. a.
20. Are you in debt? no If so, state particulars n. a.

R.C.A.F. Form R. 100
400M—6-40 (5739)
H.Q. 1062-3-83

108-208 Eas) (Incomplete

21. Particulars of Education:

—	Name of school	Date From	Date To	Courses—Subjects, etc.
Primary Education—Public or Separate School	Lachine High School	Sept 1924	June 1931	Primary
High School—Collegiate Institute, etc.	Lachine High School	1931	1935	3rd year High School
Technical School	Mtl. Technical Institute	1937	1939	Electricity
University or School other than above				
Correspondence Courses, etc.	International Corr. Mtl P.Q.	1939	Present	Electricity

22. Particulars of all Civil Occupations (in full):

Employer and place	Duties, trades, positions	Date From	Date To	Reason for leaving
Bypco Canada Ltd. Montreal, P.Q.	Clerk & 2 years practical work on Electrical Apparatus	1936	To date	Still Employed.
	unemployed	1935	1936	

23. Flying Experience (in Hours) Solo ...none... Dual ...none... Passenger ...½ hour

24. Special Qualifications, Hobbies, etc., useful to the R.C.A.F. ...none...

25. Sports engaged in. State: extensively, moderately, occasionally ...Hockey, Skiing & Softball extensively.

26. Air Force Duty you wish to enlist for ~~Ground Duties.~~ Flying Duties.

If for Ground Duties, state Air Force trade in which you wish to enlist.....
If for Flying Duties, state preference as (a) Pilot; ~~(b) Observer; (c) Air Gunner (d) Wireless Operator (Air Crew).~~
(Cross out words not applicable.)

27. Names of at least two persons who can give references as to character and ability.

Name	Address	Occupation
S. E. Gladwell	King's Road, Valois, P.Q.	Sanitary Treasurer
L. Burridge	Cedar Ave., Ste. Clare, P.Q.	Accountant
F. Robertson	Kings Road, Valois, P.Q.	Dept. Manager.

28. Other information that may have any bearing on this application ...none...

29. Do you understand that vaccination, re-vaccination and inoculation are compulsory? ...yes...

I Hereby Certify that the foregoing information furnished by me is correct to the best of my knowledge and belief.

Date ...Jan 24th... 1941 Signature ...E. E. Guiton...

NATIONAL REGISTRATION CERTIFICATE
PRODUCED
A. L. L. Laporte 7/6
July 15/41

FOR OFFICIAL USE ONLY

(A) *Report of Interviewing Officer*—

Type.....General appearance.....

Suitability for (state in what capacity).....

Date.....Signature.....Rank.....

(B) *Report of Trade Test*—

Trade in which tested.....

Result.....

Trade qualifications other than above likely to lead to efficient employment in the R.C.A.F.....

.....

Date.....Signature.....Rank.....

(C) **DECLARATION MADE BY MAN ON ATTESTATION**

I, Ernest Stuart Guiton do solemnly declare that the foregoing particulars are true, and I hereby engage to serve on active service anywhere in Canada, and also beyond Canada and overseas, in the Royal Canadian Air Force for the duration of the present war, and for the period of demobilization thereafter, and in any event for a period of not less than one year, provided His Majesty should so long require my services.

Date July 15th 1941 E S Guiton
Signature of Recruit

(D) **OATH TAKEN BY MAN ON ATTESTATION**

I, Ernest Stuart Guiton do sincerely promise and swear (or solemnly declare) that I will be faithful and bear true allegiance to His Majesty.

Date July 15th 1941 E S Guiton
Signature of Recruit

(E) **CERTIFICATE OF ATTESTING OFFICER**

The Recruit above named was cautioned by me that if he made any false answers to any of the above questions he would be liable to be punished as provided by law.

The above questions and answers were then read to the Recruit in my presence.

I have taken care that he understands each question, and that his answer to each question has been duly entered as replied to and the said Recruit has made and signed the declaration and taken the Oath before me,

at Montreal this 15th day of July 19 41

A. L. L. Laporte 7/6 R.C.A.F. Recruiting Centre, Montreal, P.Q.
Signature of Officer Rank Unit

Finger Printed
Date 15-7-41
Initials EB
Initials

FOR OFFICIAL USE ONLY

CERTIFICATE OF MEDICAL EXAMINATION

Part 1. Information obtained from the applicant—

1. Age. 22 2. Have you ever suffered from any of the following defects in health?

(a) Rheumatism no
(b) Tuberculosis no
(c) Bronchitis or Asthma no
(d) Heart Disease no
(e) Kidney or Bladder Disease no
(f) Gastro-intestinal no
(g) Rupture no
(h) Varicose Veins no
(i) Flat or Deformed Feet no
(j) Nasal Trouble 4 years ago [illegible] treated for [illegible] trouble
(k) Ear Disease no
(l) Eye Disease no
(m) Epilepsy no
(n) Nervous or Mental Disease no
(o) Syphilis no
(p) Gonorrhoea no
(q) Bone Fracture no
(r) Other Disease or Defect no

3. Have you ever worn glasses? no

4. Have you had any illness for more than one week's duration. Chicken Pox

5. I certify that I have revealed my full medical history and have not withheld any relevant information.

Signature of Applicant [signature]

Examiner's Remarks *re* above

Part 2. Information obtained by Medical Examination (Applicant must be stripped)—

1. Identification marks or scars (if operative obtain history) none

2. Height 5 feet 11 1/4 inches. 3. Weight 165 pounds.

4. Complexion ruddy 5. Color of Eyes brown Hair brown

6. Development { Good / ~~Fair~~ / ~~Poor~~ } 7. Chest Measurement—Full expiration 35 1/2 - 37 1/2 inches

Range of expansion 2 inches

8. Hearing—Right W.V.W. Left W.V.W. Tympana—Right N Left N

9. Vision—Without glasses—Right 20/20 With glasses—Right N.A.

Left 20/20 Left

10. Condition of mouth and teeth Healthy

11. Urine—Albumen neg Sugar neg

12. Abnormalities (Congenital and Pathological) found on Examination

Part 3. The Candidate has been examined in accordance with the pamphlet, "Physical Standards and Instructions for the Medical Examination of Recruits" and he is considered fit for Category A3B

Part 2 Cont'd.

13. Reflexes N
14. Heart N
15. Lungs N
16. Blood Pressure 135/85 S.D.
17. Colour Vision N. 1/1.

Any special remarks of the Medical Officers Ocular muscle balance not satisfactory
13-2-41 X-Ray # 78371 neg
(4-7-41 – Recheck Jibaut.

Date 9-5-41 19

President [signature] Member [signature] Member

AIR FORCE No. J12736

SURNAME: GUITON — FULL CHRISTIAN NAME: ERNEST STUART

ENLISTMENT/APPOINTMENT
PLACE MONTREAL, QUE.
DATE 15/7/41

RELIGION: CO & E

R.C.A.F. FORM R230
150M-7-42 (2446)
H.Q. 885-R-230

ROYAL CANADIAN AIR FORCE
RECORD OF SERVICE
OFFICERS, AIRMEN AND AIRWOMEN

BIRTH DATE	PLACE	COUNTRY	CITIZENSHIP	RACIAL ORIGIN
2/6/1918	MONTREAL	CANADA	CANADIAN	FRENCH NORMAN

CIVIL EDUCATION

PUBLIC SCHOOL	JUNIOR MATRICULATION
HIGH SCHOOL ENTRANCE	SENIOR MATRICULATION
TECHNICAL SCHOOL	UNIVERSITY
CORR./BUSINESS COURSES	LANGUAGES SPOKEN ENGLISH

CIVIL OCCUPATIONS AND EXPERIENCE

BEPCO CANADA LIMITED
MONTREAL, QUE.
SHOP WORK CHAFTING
ESTIMATING & PRODUCTION
AUG. 1936 - AUG. 1941 (INCL.)

PREVIOUS SERVICE

ROYAL MONTREAL REGT. (M.G.) N.P.A.M. MONTREAL, QUE.
JUNE 1940 - JULY 1941

PLACE AND DATE OF MEDICAL	CATEGORY	PLACE AND DATE OF MEDICAL	CATEGORY
MONTREAL, QUE. 14/7/41 #6 ITS TORONTO			

PARTICULARS OF FAMILY

SINGLE, MARRIED, WIDOWER, DIVORCED: MARRIED
WIFE (FULL MAIDEN NAME) OR HUSBAND: PATRICIA MARGEURITE SUTTIE
PRESENT ADDRESS (IN PENCIL): 183 Kenaston Crescent Wpg Man.
PLACE OF MARRIAGE: VALOIS, QUE. DATE: 27/6/42
AUTHORITY (IF AFTER APPOINTMENT/ENLISTMENT): YES C.O. #1 C.N.S. RIVERS, MAN.

CHILDREN

NAMES	PLACE AND DATE OF BIRTH	NAMES	PLACE AND DATE OF BIRTH

NAME(S), ADDRESS(ES), RELATIONSHIP OF PERSON(S) TO BE INFORMED OF CASUALTIES (IN PENCIL)
(Father) Mrs. J.E. Guiton, 93 Queens Rd., Valois, Que.
(Wife) Mrs E.S. Guiton, 29 Donegani Ave., Valois, Que.
517 Kirkwood Ave. Ottawa Ont OK 437 d 11.3.44

EMPLOYMENT AS INSTRUCTOR OFFICER AIRMAN/AIRWOMAN

TYPE	FROM	TO	TYPE	FROM	TO
OFFICER: NAV. INSTRUCTOR	3/7/42	PRESENT			

OFFICERS

RANK, BRANCH AND CATEGORY	DATE	AUTH.	DUTIES PERFORMED DURING SERVICE, E.G. ADJ.
P/O NAV. "B" GENERAL LIST	3/7/42	AFRO 119/42	NAVIGATION INSTRUCTOR.
T/O AFRO 3648/43	3/1/43	16(c) AFU 3/5/43. 00691/43	

COURTS-MARTIAL ATTENDED WITH DATES
(STATE IF UNDER INSTRUCTION OR AS MEMBER)

AIRMEN AND AIRWOMEN

RANK	DATE	AUTH.	TRADE	DATE	AUTH.
AC2	15/7/41		OBSERVER		
LAC	23/12/42		OBSERVER		
SERG.	24/5/42		OBSERVER		

OFFICERS, AIRMEN/AIRWOMEN

COURSE OR TRADE	GRP.	%	PF	DATE
OBSERVER			P	266 42

ADVISE ENTRIES
UNIT RECORDS RETURNED
TO CANADA

AIR FORCE No. J12736

GUITON ERNEST STUART
SURNAME FULL CHRISTIAN NAME

ENLISTMENT/APPOINTMENT
PLACE MONTREAL; QUE.
DATE 15/7/41

RELIGION
C.O.F.E.

R.C.A.F. FORM R230

TYPE OF LEAVE

FROM	TO	No. DAYS	DESCRIPTION	AUTH.
17-5-43	30-5-43	14	Basic Annuals	
2-6-43	15-6-43	14	Embarkation	17RO 116
13.7.43	19.7.43	7	P.L.	3 PRC 149/43
29.8.43	4-9-43		"	3 PRC 170/43
2.12.43	8.12.43	7	Prior.	NTU 58/43

TYPE OF AIRCRAFT ON WHICH MOST PROFICIENT
(IF UNDER INSTRUCTION STATE NUMBER OF HOURS ON EACH TYPE AND TESTS PASSED)

SERVICE MACHINES FLOWN

CHARACTER AND TRADE ASSESSMENT

DATE	CHARACTER	TRADE ASSESSMENT

HONOURS, AWARDS AND MENTIONS

DATE	AWARD	AUTHORITY
24 5 42	OBSERVER WING	

POSTINGS, ATTACHMENTS & TEMPORARY DUTY

SOS	TOS	FROM	TO	DATE	AUTHORITY
		"SAOS"	"1" D	31 5 43	17RO 116
		Emb. Cal		23 6 43	
		Dis. Emb. U K		1 7 43	
		3 PRC Int C95		2 7 43	
	att	6 H.Q. BC + CSU		5/11 9 43	3 PRC 18/43 6 U.B.C. 37/43
	TOS	10(O)AFU from Interrogate		19 10 43	3 PRC 18 10(O)AFU 27
	T.D. to	M.A.P. (London)		8/9 11 43	BOSCOMBE, Down).
	SOS	10 A.F.U — N.T.U. 8 Grp		30 11 43	10(O)AFU 31/43 NTU 58/43.
	SOS	f NTU 8 grp. to Hospdn		14 1 44	NTU Nos 4/44
	F/B	Missing from SOS Sick.		30/31 1 44	AFRO 568/44 CR 423
		Posted to Base Sec. Reinf Depot ME		31 1 44	NIE until 7/44 HQ 3 Gp 11/44
		PRESUMED DEAD		30 1 44	CR 621 AFRO 2732

ALL OTHER CASUALTIES

CASUALTY AND DATE	AUTHORITY
adm S.S.Q. 15.9.43	3 PRC 187/43
hosp S.S.Q. 20.9.43 Discht. (4.10.43).	3 PRC 2/43
adm S.S.Q. 24.9.43	3 PRC 12/43. 3 PRC 3/43
Struck off Strength Auto 29.9.43	B/Mob 9/43

ADVISE ENTRIES
UNIT RECORDS RETURNED
TO CANADA

AIR FORCE No. ~~R117553~~

SURNAME: GUITON, FULL CHRISTIAN NAMES: ERNEST STUART

ENLISTMENT PLACE Montreal DATE 15-7-41 — RE-ENLISTMENT

C.R. FILE NUMBER

J.12736

OFFICER RECORD OF SERVICE AIRMEN

Comm. 3-7-42

R.C.A.F. FORM R44(B) 30M-3-41 (9782) H.Q. 1062-3-58

1. POSTING (INDICATE S.O.S. AND T.O.S.) Temporary Duty (In Red)

S.O.S. OR T.O.S.	UNIT AND PLACE	EFFECTIVE			D.R.O.
TOS	Montreal A/C	15	7	41	Mtl A/C 63
SOS	Montreal A/C	14	8	41	Mtl A/C 63
TOS	I.M.D. Toronto	15	8	41	I.M.D. 199.
SOS	I.M.D. Toronto	20	8	41	I.M.D. 201
TOS	#4 B & G.S. Fingal	21	8	41	4 B&G S 18
SOS	4 B&G S Fingal	27	10	41	4 B&G 270
TOS	6 I.T.S. Toronto	28	10	41	6 I.T.S. 19.
SOS	6 I.T.S. Toronto	2	1	42	6 I.T.S 3
TOS	5 A.O.S. Winnipeg	3	1	42	5 A.O.S 3
SOS	5 A.O.S. Winnipeg	11	1	42	5 A.O.S 8
T.O.S	7 B&G St Paul's Inn.	12	4	42	7 B&G S. 99.
SOS	7 B&G S Paulson	23	5	42	7 B&G 129 A.O.
TOS	1 C.N.S. Rivers	24	5	42	1 C.N.S. 126
Disch	"X" R. (Air) 392 (18) "On app & Con"	2	7	42	1 C.N.S. 168
TOS	1 C.N.S. Rivers "On app & Con"	3	7	42	1 C.N.S. 168
SOS	1 C.N.S. Rivers	25	7	42	1 C.N.S. 180
TOS	5 A.O.S. Winnipeg	29	7	42	5 A.O.S. 183
S.O.S	5 A.O.S. Winnipeg	31	5	43	5 A.O.S. 116
TOS	"I" Y" Det. Halifax	1	6	43	1 Y 142
SOS	1 Y to R.A.F. Transit Pool	22	6	43	1 Y 160 A.O.
	P.D. 30-1-44. DCL 872a/16-11-44.				
	Missing (PCX 357 1-2-44)	31	1	44	
	A.L.L. Comps.	10	10	44	
	COMPLETED 26-1-45				

2. RECLASS'NS-PROMOTIONS-ETC.

RANK	EFFECTIVE			D.R.O.
AC2	15	7	41	Mtl A/C 63
LAC	19	12	41	6 I.T.S 67
Sgt. (T) (Pd) T4	23	5	42	7 B&G 129 A.O.
Pilot Officer	3	1	42	5 A.O.S 183
P/O. 3-7-42 (A.P.R. 138/27-7-42) (C.R. 9 d/29-8-42) D 2231-43.				
T.E.O.	3	1	43	2/13691
T/F.O. 3-1-43 (A.P.R. 224/10-12-43)				

3. MEDICAL HISTORY

EXAMINATIONS (IN RED INK)

DATE	FORM	CATEGORY	REMARKS

HOSPITALIZATION (IN BLACK INK)

HOSPITAL QUARTERS	ADMITTED CONFINED	DISCHARGE RET'N DUTY	D.R.O.
9-5-41	R100	A3 B.	
8-12-41	M2	A.O. A3B	

4. TRADE AND CHARACTER

TRADE	GROUP	EFFECTIVE			D.R.O.
Gnr or Observer	J.	15	7	41	Mtl A/C 63
Aircrew Observer	J.	19	12	41	6 I.T.S 67
A/O (Cre 41) 3035	S.G	23	5	42	7 B&G 129 A.O.
A/O (C4)		3	7	42	(A.P.R. 138/27-7-42)
N (B)		23	10	42	5 A.O.S 277

TRADE PROFICIENCY	CHARACTER ASSESSMENT	DATE OF R41

5. COURSES-TESTS-ETC.

SUBJECT	RESULT	DATE	AUTHORITY
Trans to A/C 2 Sqdn from Crse 39			6 I.T.S 67
Report back to Rivers from A.O.S Crse		13 7 42	1 C.N.S 157 A.O.

6. LEAVE

FROM	TO	DAYS	REMARKS	D.R.O.
16-7-41	14-8-41	30	Def. L.W.P.	S.W.O.P.
4-7-42	13-7-42	9	Special	1 C.N.S 157 A.O.
14-12-42	22-12-42	9	Semi-annual	5 A.O.S 290
16-5-43	29-5-43	14	Semi-annual	5 A.O.S 109
2-6-43	15-6-43	14	Ann. - Embk.	5 A.O.S 116

R.C.A.F. OVERSEAS | ENLISTMENT MARITAL STATUS | PRESENT MARITAL STATUS | HIGH & TECH. SCHOOL EDUCATION | C. OF E. BAP. U.C. PRES. R.C. HEB. MIS. OTHER RELIGION | PREV. SERV. | PROVINCE OF ENLISTMENT | DISCHARGE | AC

AIR FORCE No. ~~R117553~~ *

GUITON, ERNEST STUART

SURNAME — FULL CHRISTIAN NAMES

ENLISTMENT — PLACE Montreal — DATE 15-7-41

RE-ENLISTMENT

C.R. FILE NUMBER SR

J.12736 SJ

OFFICER RECORD OF SERVICE AIRMEN

Comm. 3-7-42

R.C.A.F. FORM R44(B)

7. BIRTH: DATE 2-6-18 — PLACE Montreal — CITIZENSHIP British

FATHER (FULL NAME) James Ernest Guiton

BIRTHPLACE St. Helier, Jersey Island (Brit.)

MOTHER (FULL MAIDEN NAME) Edna Evans

BIRTHPLACE Montreal, Que

8. EDUCATIONAL STANDING

HIGH SCHOOL ENTRANCE X Quebec

JUNIOR MATRICULATION X

SENIOR MATRICULATION

TECHNICAL SCHOOL X 1937 1939 Electricity 2 yrs.

UNIVERSITY 6

CORRESPONDENCE COURSES - International Electricity 2 yrs.

9. CIVIL OCCUPATIONS OR EXPERIENCE USEFUL TO R.C.A.F.

Clerk + 2 yrs. practical work on electrical apparatus. 1936-41 Repco Canada Ltd. Mdl. P.Q. 8300

10. PREVIOUS ARMY, NAVY OR AIR FORCE SERVICE

2nd. Batt. - R.M.R. - Montreal - Pte - July 1940 - January 41

6

11. HONOURS-AWARDS, MENTIONS

	AUTHORITY	DATE
A/O Badge	7BG129AO	23-5-42

12. FLYING EXPERIENCE ON ENLISTMENT (HOURS)

SOLO — DUAL — PASSENGER 1/2 hr

13. RELIGION C. of E. 3

14. LANGUAGES English 1

15. SPORTS

Hockey, Skiing, Softball.

16. SINGLE-MARRIED-WIDOWER-SEPARATED-DIVORCED: Single

WIFE (FULL MAIDEN NAME) Patricia Marguerite Sattie

PLACE OF MARRIAGE Valois P.Q. DATE 27-6-42

AUTHORITY (IF AFTER ENLISTMENT) 1Cns171 AFM. 13 1

17. MARRIED ESTABLISHMENT

REMARKS	RANK	EFFECTIVE	D.R.O.

18. CHILDREN

CHRISTIAN NAMES	BIRTH DATE	D.R.O.	CHRISTIAN NAMES	BIRTH DATE	D.R.O.

19. NEXT OF KIN (ADDRESS AND D.R.O. IN PENCIL)

FULL NAME: James Ernest Guiton — RELATIONSHIP Father

ADDRESS: 93 Queens Rd. Valois, Que. — D.R.O.

FULL NAME: Patricia M. Guiton — RELATIONSHIP wife

ADDRESS: 183 Kanark Crescent, Winnipeg, Man. — D.R.O. 5A.O.S.69

20. PAY ENTRIES (OFFENCE FORFEITURES, STOPPAGES IN RED INK)

RATE CHANGES ETC.	EFFECTIVE	D.R.O.	RATE CHANGES ETC.	EFFECTIVE	D.R.O.
Pay 1 day					
Subs allow 1 day	15 7 41	Mtl/c63			
Ent. pay.	15 8 41	1M.D. 199			
Special Ace. 75 to day	4 1 42	5AOS 3			
1.20 for day lieu ftns	29 7 42	5AOS183			
R.A.	4/13 7 42	5AOS 229			

21. ENGAGEMENTS

TERM	EFFECTIVE	D.R.O.	TERM	EFFECTIVE	D.R.O.
Duration	15 7 41				

22. TEMPORARY DUTY AND MISCELLANEOUS ENTRIES

FROM	TO	DATE	D.R.O.
Rep. qtrs. + rat.		16-8-41	1M.D. 199
Occ. qtrs + draw rats		21-8-41	4BOS218
Occ. Gov't Qtrs + draw. rtns		27-10-41	6JJS19
Iss SLTW HC 23340		22-12-41	6JJS70
Pub qtrs + rtns		4-1-42	5AOS3
Cease P.H.R		12-4-42	5AOS 86
Special leave T.W. C 101271		24-6-42	1Cns153
SLTW C140620		8-12-42	5AOS 292

Date and Place of Signing R40

22.(A) ADDRESS PRIOR TO ENLISTMENT

93 Queens Road, Valois, Que.

24800

23. DOCUMENT CONTROL (INDICATE RECEIPT BY DATE) OH7

R60	R79	B465	X-RAY	AFM-13	IDN. CARD	R.X.
9-9-41	MAR 24 '42 21-9-42				15-11-41	