

J22212  
GINGRAS  
JOSEPH RENE



1943  
1944  
1945

ROYAL CANADIAN AIR FORCE



SERVICE

AND

PAY BOOK

THIS BOOK IS THE PROPERTY OF THE  
ROYAL CANADIAN AIR FORCE, AND  
MAY BE BORROWED BY PERSONS



432 Miss. Col. Miller

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.

~~Missing~~ Miss. 26-6-43

Air Force No. 22212 Surname GINGRAS  
 Christian Names (in full) JOSEPH RENE  
 Date of Birth 1-11-18 Religion RC  
 Date of ~~Enlistment~~/Appointment 11-9-42  
 Married (M), Widower (W) or Single (S) S  
 Occupation in Civil Life.....

Signature of Holder J. Gingras F/O

Name and Address of Next-of-Kin.....  
MR DANIEL GINGRAS  
51 BROADWAY ST GATINEAU QUE

Name, Address, and Relationship of Person to be informed of Casualties—  
(Can) R-125053 - GINGRAS F.X.J.D  
405 Sqad. Gt. GRANSDEN

Certified Correct for AB Mackenzie FL  
 Date 8-4-43 Place RCAF O/S HQ







**DISTRIBUTION OF SERVICE ESTATES**

Estates Form "P. 4"

AIR FORCE

MM

Name..... GINGRAS..... Joseph R. Guy..... No. J.22212  
Surname Christian Names  
 Rank P/O Unit R.C.A.F. Date of Death 25.6.43

AMOUNT	<b>W.S.G.</b>	<b>279.54</b>
	<b>L.P.C.....\$</b>	<b>746.62</b>
Date..... <u>10.1.47</u>	<b>Other Credits.....</b>	<b>303.42</b>
	<b>Total.....</b>	<b>1329.58</b>
	<b>Prev. Dist.</b>	<b>1050.04</b>
	<b>This Dist.</b>	<b>279.54</b>

SHARE	RELATIONSHIP	NAME AND ADDRESS	AMOUNT
ALL	FATHER	Daniel Gingras, 51 Broadway Ave., Gatineau Mills, P.Q.  (Sole beneficiary under will.)  P4. TO TREAS. JAN 15 1947	279.54

*W.P.G.*

AUTHORITY					
H.Q. F.E. No.	VOTE	PRI	H.Q. SUB.	OBJ.	AMOUNT
<del>0000</del> 0000	833	01	70	000	279.54
CLASSIFIED BY  <i>A</i>			EXAMINED BY  For Chief Treasury Officer		

DISTRIBUTION APPROVED AND AUTHORIZED

*[Signature]*

(L. M. FIRTH) Colonel  
Director of Estates

AUDITED FOR PAYMENT

.....  
For Chief Treasury Officer



ROYAL CANADIAN AIR FORCE

WAR SERVICE GRATUITY - PARTICULARS OF SERVICE

CASUALTY

1  
W.S.G 700

NUMBER: 22212 ✓ FINAL PAID RANK: 2nd Lt ✓ GROUP: 4th ✓ CHRISTIAN NAMES: Joseph Remondy Gingras ✓ SURNAME: Gingras ✓  
 (11-3-43 (APR. 164/8-9-43))

Reason for termination of service: Ret. 25-6-43

TOTAL SERVICE:

T.O.S. 17-11-41 ✓ S.O.S. 25-6-43 ✓ 586 DAYS ✓  
 T.O.S. \_\_\_\_\_ S.O.S. \_\_\_\_\_ DAYS \_\_\_\_\_  
 TOTAL 586 DAYS ✓

LESS NON-QUALIFYING SERVICE:

From: \_\_\_\_\_ To: \_\_\_\_\_ DAYS \_\_\_\_\_  
 From: \_\_\_\_\_ To: \_\_\_\_\_ DAYS \_\_\_\_\_  
 From: \_\_\_\_\_ To: \_\_\_\_\_ DAYS \_\_\_\_\_  
 TOTAL QUALIFYING SERVICE 586 DAYS ✓

OVERSEAS SERVICE:

From: 27-10-42 ✓ To: 25-6-43 ✓ 242 DAYS ✓  
 From: \_\_\_\_\_ To: \_\_\_\_\_ DAYS \_\_\_\_\_  
 From: \_\_\_\_\_ To: \_\_\_\_\_ DAYS \_\_\_\_\_  
 TOTAL 242 DAYS ✓

LESS NON-QUALIFYING SERVICE:

From: \_\_\_\_\_ To: \_\_\_\_\_ DAYS \_\_\_\_\_  
 From: \_\_\_\_\_ To: \_\_\_\_\_ DAYS \_\_\_\_\_  
 From: \_\_\_\_\_ To: \_\_\_\_\_ DAYS \_\_\_\_\_  
 TOTAL QUALIFYING OVERSEAS SERVICE 242 DAYS ✓

1385  
799  
586  
1143  
242

Certified that entitlement to benefits under The War Service Grants Act, 1944 has been established, based on service shown herein.

COMPUTER'S INITIALS	<i>[Signature]</i>
CHECKER'S INITIALS	<i>[Signature]</i>
DATE	20-6-43

*[Signature]*  
 R.C.A.F. RECORDS OFFICE  
 OTTAWA  
 R.C.A.F.-R.310



AIR FORCE No. **R143523**

**GINGRAS, JOSEPH RENE GUY**

SURNAME FULL CHRISTIAN NAMES

ENLISTMENT

RE-ENLISTMENT

C.R. FILE NUMBER *SL*

PLACE *Ottawa*  
DATE *17-11-41*

**J.22212**

**OFFICER**

RECORD OF SERVICE AIRMEN

*Comm. 11-9-42*

R.C.A.F. FORM R44(B)  
50M-10-40 (7685)  
H.Q. 1062-3-58

1. POSTING (INDICATE S.O.S. AND T.O.S.) <i>att.</i>				2. RECLASS'NS-PROMOTIONS-ETC.				4. TRADE AND CHARACTER				6. LEAVE				
S.O.S. OR T.O.S.	UNIT AND PLACE	EFFECTIVE	D.R.O.	RANK	EFFECTIVE	D.R.O.	TRADE	GROUP	EFFECTIVE	D.R.O.	FROM	TO	DAYS	REMARKS	D.R.O.	
<i>SOS</i>	<i>2nd Brandon</i>	<i>17 11 41</i>	<i>2MD278</i>	<i>O.C.2.</i>	<i>17 11 41</i>	<i>2MD278</i>	<i>P. or O.</i>	<i>S.</i>	<i>17 11 41</i>	<i>2MD278</i>	<i>12-9-42</i>	<i>26-9-42</i>		<i>pre-embarked</i>	<i>8008300</i>	
<i>SOS</i>	<i>2nd Brandon</i>	<i>17 1 42</i>	<i>27M014</i>	<i>LAC</i>	<i>9 5 42</i>	<i>39T8112</i>	<i>Obs</i>	<i>S</i>	<i>9 5 42</i>	<i>39T8112</i>	<i>50</i>					
<i>TOS</i>	<i>35 EFTS Neipawa (270)</i>	<i>18 1 42</i>	<i>27C85</i>													
<i>TOS</i>	<i>35 EFTS Neipawa (amended)</i>	<i>17 1 42</i>	<i>35E734</i>	<i>Illegible</i>	<i>11 9 42</i>	<i>8008300</i>	<i>Adv. Man.</i>	<i>S</i>	<i>9 5 42</i>	<i>800897</i>						
<i>SOS</i>	<i>35 EFTS Neipawa</i>	<i>13 3 42</i>	<i>35E736</i>				<i>Adv. Man.</i>	<i>S</i>	<i>11 9 42</i>	<i>8008300</i>						
<i>TOS</i>	<i>3 Lt. S. Victoriaville Op.</i>	<i>14 3 42</i>	<i>29T865</i>													
<i>Att</i>	<i>to 35 E7 from 3 LTS</i>	<i>16 13 42</i>	<i>35E7-16</i>				<i>Adv. Man.</i>	<i>S</i>	<i>11 9 42</i>	<i>(APR 11-143)</i>						
<i>SOS</i>	<i>39T8 Victoriaville</i>	<i>9 5 42</i>	<i>39T8112</i>	<i>(NO. 11-9-42 (APR 11-143))</i>												
<i>SOS</i>	<i>8008 Ancunme</i>	<i>10 5 42</i>	<i>800871</i>	<i>T8</i>												
<i>SOS</i>	<i>8008 Ancunme</i>	<i>15 9 42</i>	<i>8008300</i>	<i>T.F.O. 11-3-42 98612</i>												
<i>TOS</i>	<i>127th Depot Halifax</i>	<i>26 9 42</i>	<i>14271</i>	<i>T.F.O. 11-3-43 (APR 16-4/89-43)</i>												
<i>SOS</i>	<i>127th Depot Halifax</i>	<i>27 10 42</i>	<i>14314</i>													
3. MEDICAL HISTORY																
EXAMINATIONS (IN RED INK)																
	DATE	FORM	CATEGORY	REMARKS												
HOSPITALIZATION (IN BLACK INK)																
	HOSPITAL	ADMITTED	DISCHARGE	D.R.O.												
	QUARTERS	CONFINED	RET'N DUTY													
<i>SOS to Overseas</i>	<i>27 10 42</i>	<i>E 551</i>														
<i>Missing</i>	<i>25 6 43</i>				<i>17-11-41</i>	<i>R100</i>	<i>01B.030.</i>									
<i>pc X 124</i>	<i>26 6 43</i>				<i>31-3-42</i>	<i>212</i>	<i>Q. 13 Q. 13</i>									
<i>P. 10.</i>	<i>25 6 43</i>															
<i>(pc X 830 - 29-1-44)</i>																
5. COURSES-TESTS-ETC.																
	SUBJECT	RESULT	DATE	AUTHORITY												
<i>WS &amp; Computed</i>	<i>26/9/44</i>															
<i>casualty</i>																

1 R.C.A.F. OVERSEAS  
 2 ENLISTMENT  
 3 MARRIAGE  
 4 MARRIAGE  
 5 PRESENT  
 6 MARRIAGE  
 7 MARRIAGE  
 8 HIGH & TECH. SCHOOL EDUCATION  
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5523

GINGRAS, JOSEPH RENE GUY

ENLISTMENT

RE-ENLISTMENT

C.R. FILE NUMBER

PLACE *Ottawa*

DATE *17-11-41*

*Comm. 11.9.42*

R.C.A.F. FORM R. 44 (B)

22212

OFFICER

RECORD OF SERVICE AIRMEN

BIRTH: DATE *1-11-18* PLACE *Annunciation, Que.* CITIZENSHIP *British*

FATHER (FULL NAME) *Daniel Gingras*

BIRTHPLACE *St. Joseph, Que.*

MOTHER (FULL MAIDEN NAME) *Amanda Bureau*

BIRTHPLACE *St. Faustin, Que.*

8. EDUCATIONAL STANDING

HIGH SCHOOL ENTRANCE *X* *Que.*

JUNIOR MATRICULATION *X* *Ont.*

SENIOR MATRICULATION *Part Senior* *Ont.*

TECHNICAL SCHOOL

UNIVERSITY

CORRESPONDENCE COURSES *6*

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

*Paper Tester - 2 yrs C.D.P.C. Que.*

*3960*

10. PREVIOUS ARMY, NAVY OR AIR FORCE SERVICE

*Hull's Regt - St. Jerome Ste. Nov. to Dec. 1940.*

*6*

11. HONOURS-AWARDS, MENTIONS

AUTHORITY	DATE
<i>Air Observer's Badge</i>	<i>8A0830a 11-9-42</i>
<i>Operational Wings</i>	<i>AFRO 2274/44</i>

12. FLYING EXPERIENCE ON ENLISTMENT (HOURS)

SOLO	DUAL	PASSENGER
		<i>14 hr.</i>

13. RELIGION *R. Catholic*

14. LANGUAGES *French, English fair*

15. SPORTS *Skating*

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

WIFE (FULL MAIDEN NAME)

PLACE OF MARRIAGE DATE

AUTHORITY (IF AFTER ENLISTMENT)

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: *Daniel Gingras* RELATIONSHIP *Father*

ADDRESS: *57 Broadway St., Gateau Mills, Que.* D.R.O.

FULL NAME: *2ue* RELATIONSHIP

ADDRESS: D.R.O.

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

RATE CHANGES ETC.	EFFECTIVE	D.R.O.	RATE CHANGES ETC.	EFFECTIVE	D.R.O.

21. ENGAGEMENTS

TERM	EFFECTIVE	D.R.O.	TERM	EFFECTIVE	D.R.O.
<i>Duration</i>	<i>17/11/41</i>				

22. TEMPORARY DUTY AND MISCELLANEOUS ENTRIES

FROM	TO	DATE	D.R.O.
<i>Spec. pub. gtr</i>		<i>19-11-41</i>	<i>1M0278</i>
<i>attach. to 2TC. for pay + allow.</i>		<i>18-1-42</i>	<i>2TC 25.</i>
<i>Cross rates + TORS</i>		<i>10-2-42</i>	<i>35878</i>
<i>ceases to be att. 2TC. for pay + allow.</i>		<i>13-2-42</i>	<i>2TC 58</i>
<i>Spec. gtr. to gtr. &amp; spec. rates</i>		<i>16-3-42</i>	<i>397A65</i>
<i>T.W. no 126 005</i>			<i>356726</i>
<i>Spec. T.W. C121499</i>		<i>11-9-42</i>	<i>8A0830a</i>
<i>Water's Allow.</i>		<i>12-9-42</i>	<i>8A0830a</i>

*A.P.E. 51 Broadway St., Gateau Mills, Que.*

*22401*

23. DOCUMENT CONTROL (INDICATE RECEIPT BY DATE)

R60	R79	B465	X-RAY	AFM-13	IDN. CARD
<i>24-11-41</i>	<i>2-9-42</i>	<i>24-11-41</i>			<i>01F</i>



R 143523

AIR FORCE No. <b>J 22212</b>	<b>Gingras, Joseph Rene Guy</b> <small>SURNAME FULL CHRISTIAN NAME</small>	ENLISTMENT/APPOINTMENT PLACE <i>Ottawa</i> DATE <i>17-11-41 Comm. 11-9-42</i>	RELIGION <i>P.C.</i>
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**ROYAL CANADIAN AIR FORCE  
RECORD OF SERVICE  
OFFICERS, AIRMEN AND AIRWOMEN**

R.C.A.F. FORM R230  
100M-3-43 (3137)  
N.Q. 685-R-230

BIRTH DATE <i>1-11-18</i>	PLACE <i>L'Annonciation P.Q. Canada</i>	COUNTRY <i>Canada</i>	CITIZENSHIP <i>British</i>	RACIAL ORIGIN <i>Fr. Can.</i>	PARTICULARS OF FAMILY			
CIVIL EDUCATION					SINGLE, MARRIED, WIDOWER, DIVORCED <i>Single</i>			
					WIFE (FULL MAIDEN NAME) OR HUSBAND			
PUBLIC SCHOOL					PRESENT ADDRESS (IN PENCIL)			
					PLACE OF MARRIAGE			
HIGH SCHOOL ENTRANCE					AUTHORITY (IF AFTER APPOINTMENT/ENLISTMENT)			
					UNIVERSITY			
TECHNICAL SCHOOL					CHILDREN			
					LANGUAGES SPOKEN <i>French</i>			
CORR./BUSINESS COURSES					NAMES			
					PLACE AND DATE OF BIRTH			

CIVIL OCCUPATIONS AND EXPERIENCE	PREVIOUS SERVICE
<i>3961 Paper Tester</i>	<i>Hulls Regt - St Jerome P.Q. Nov to Dec 1940</i>

NAME(S), ADDRESS(ES), RELATIONSHIP OF PERSON(S) TO BE INFORMED OF CASUALTIES (IN PENCIL)					
<i>Daniel Gingras (Father) 51 Broadway St Gatineau Mills Que</i>					
EMPLOYMENT AS INSTRUCTOR OFFICER AIRMAN/AIRWOMAN					
TYPE	FROM	TO	TYPE	FROM	TO

OFFICERS				AIRMEN AND AIRWOMEN				OFFICERS, AIRMEN/AIRWOMEN						
RANK, BRANCH AND CATEGORY	DATE	AUTH.	DUTIES PERFORMED DURING SERVICE, E.G. ADJ.	RANK	DATE	AUTH.	TRADE	DATE	AUTH.	COURSE OR TRADE	GRP.	%	PF	DATE
<i>P/O G. M. St L.</i>	<i>11 9 42</i>	<i>HPB 6/11/43</i>		<i>Sgt.</i>	<i>11 9 42</i>					<i>8 A.O.S. No 50</i>	<i>16/38</i>			<i>8/11 5/14 42</i>
<i>T/F.O. RFRD 19/11/43</i>	<i>3 43</i>	<i>6/12/43</i>												
COURTS-MARTIAL ATTENDED WITH DATES (STATE IF UNDER INSTRUCTION OR AS MEMBER)														

ADVISE ENTRIES  
 UNIT RECORDS RETURNED  
 TO CANADA



R 143523

AIR FORCE No.

J.22212

GINGRAS. JOSEPH RENE GUY

SURNAME

FULL CHRISTIAN NAME

ENLISTMENT/APPOINTMENT

PLACE *Ottawa*

DATE *17-11-41 Comm 1-9-41*

REL

*R E*

R.C.A.F. FORM R230

TYPE OF LEAVE					TYPE OF AIRCRAFT ON WHICH MOST PROFICIENT	POSTINGS, ATTACHMENTS & TEMPORARY DUTY				ALL OTHER CASUALTIES		
FROM	TO	NO. DAYS	DESCRIPTION	AUTH.	(IF UNDER INSTRUCTION STATE NUMBER OF HOURS ON EACH TYPE AND TESTS PASSED)	SOS TOS	FROM	TO	DATE	AUTHORITY	CASUALTY AND DATE	AUTHORITY
<i>9-3-43</i>	<i>15-3-43</i>	<i>7</i>	<i>Leave</i>	<i>29 Apr. 5-1-43</i>			<i>Sgt 8008</i>	<i>Laretti</i>	<i>25 9 42</i>	<i>8008 300</i>		
<i>16-3-43</i>	<i>22-3-43</i>	<i>7</i>	<i>"</i>	<i>w. 7 high 2/43</i>			<i>Sgt 1047</i>	<i>RAF training school</i>	<i>27 10 42</i>	<i>14 3/4</i>		
<i>1-6-43</i>	<i>9-6-43</i>	<i>9</i>	<i>Leave.</i>	<i>23 Oct. 30 43</i>			<i>Disembarked U.K.</i>		<i>4 11 42</i>	<i>E 551</i>		
							<i>3 P.R.C.</i>					
							<i>TOS at 4 A.O.S.</i>		<i>33/4</i>	<i>26 1 43</i>		<i>24/43</i>
							<i>TOS at RAF St. Pashov</i>	<i>4/43</i>	<i>23 3 43</i>	<i>POR 37/43</i>		
							<i>Discharged to Commission</i>		<i>10 9 43</i>	<i>P RO 32 1/43</i>		
							<i>S.O.S. 23 Oct. to 43</i>	<i>24 Sep</i>	<i>10 6 43</i>	<i>432 Sep. 3/43</i>		
							<i>FIB Missing from 432 Sep.</i>	<i>24 6 43</i>	<i>OR. 337</i>	<i>1651/43</i>		
							<i>MISSING BEL. KILLED</i>			<i>CR 394</i>	<i>29-11-43</i>	<i>4 EU. 3/44</i>
							<i>TOS. 432 Sep. - RCAF N/E.U. (M)</i>	<i>26 6 43</i>	<i>N/E.U. 1/43</i>			
							<i>Presumed Dead.</i>	<i>25 6 43</i>	<i>CR 433</i>			
							<i>S.O.S. RCAF N/E. Unit (P.D)</i>	<i>26 6 43</i>	<i>AFRO 410/44</i>	<i>N/E.U. 5/44</i>		
<div style="border: 1px solid black; padding: 10px; width: fit-content; margin: auto;"> <p>ADVISE ENTRIES UNIT RECORDS RETURNED TO CANADA</p> </div>												
CHARACTER AND TRADE ASSESSMENT												
DATE		CHARACTER			TRADE ASSESSMENT							
HONOURS, AWARDS AND MENTIONS												
DATE		AWARD			AUTHORITY							
<i>11 9 42</i>	<i>1/2</i>	<i>AP/Badge</i>			<i>8008 130 00</i>							
		<i>Apso Wings</i>			<i>AFRO. 22 74</i>							

*Emb. 28-10-42.*



**CONFIDENTIAL**

No. 3 MEDICAL SELECTION BOARD,  
No. 3 INITIAL TRAINING SCHOOL, R.C.A.F.,  
VICTORIAVILLE, P. Q.

R.C.A.F. M. 2  
300M-4-41 (87)  
H.Q. 1062-10-2

# ROYAL CANADIAN AIR FORCE

FILE NUMBER

143223

Medical Board held at Ottawa, Ontario

Date Nov. 12/41

Surname.....GINGRAS..... Chr. Names.....JOSEPH HENRI GUY  
 Nature of Commission.....Pilot..... Date of Birth.....1/11/18..... Married or Single.....Single  
 Branch.....R.C.A.F...... Hours Flown.....1/4 hour pass.  
 Address.....51 Broadway St., Gatineau Mills, Que.

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 Tonsilitis.....NO  
 Diphtheria, Scarlet Fever or Scarletina.....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.....Sick in car aged 7  
 Discomfort on Swings, Roundabouts, Switchbacks.....Has been sick on merry-go-round
- (ix) OPERATIONS.....NO
- (x) Any illness or Injury not mentioned above.....Chicken pox. No sequelae.

Education.....Jr. Matric.  
 Present Occupation.....Paper Tester (Mill)..... Hobbies.....Festines  
 Previous Service.....Training 30 days.  
 Athletics.....Skating, Bicycling, Softball (mod)  
 Habits—Smoking.....10 cigs. daily..... Alcohol.....None  
 FAMILY HISTORY—Consumption.....Mother had Tb...... Diabetes.....No..... Haemophilia.....No  
 Nervous Ailments, Mental Trouble, or "Fits".....No  
 Father Alive—Health.....Good..... Dead—Cause.....Nervous breakdown last year.  
 Mother Alive—Health.....Good now..... Dead—Cause.....  
 Brothers (1.) Alive—Health.....Good..... (0)..... Dead—Cause.....  
 Sisters (4.) Alive—Health.....Good..... (0)..... 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 accepted for Service, or if accepted, of being discharged or retired and forfeit any claim to gratuity or other award.

Date 12-11-41..... Signature [Signature]..... Witness [Signature]



GENERAL MEDICAL AND SURGICAL EXAMINATION

Impression given by (a) Physique *Athletic* (b) Mentality *Alert*  
 Body Marks, Scars, Deformities *Hairy mole right shoulder, 1/8" scar tip of nose.*  
 Size of Thyroid Gland *N.P.*  
 Surgical Abnormalities *Nil*  
 Results of Wounds, Injuries, Operations *Nil*

	Date <i>12/11/41</i>	# 3 MSb. Date <i>31-3-42.</i>	Date	REMARKS ON ANY ABNORMALITIES FOUND
Height (ins.)	<i>68 1/2</i>	<i>68 7/8</i>		
Weight (lbs.)	<i>140</i>	<i>137 1/2</i>		<i>Date</i>
Chest Circumference (ins.)	<i>31-33 1/2</i>	<i>32</i>		
Body Build (lbs.)	<i>-1</i>	<i>1</i>		
LEG LENGTH (ins.)	<i>41</i>	<i>41</i>		
Pulse Rate	{ Sitting	<i>84</i>	<i>84</i>	
	{ Standing 1st	<i>108</i>		
	{ Standing 2nd	<i>96</i>		
	{ Exercise	<i>120</i>		
	Time to normal	<i>30 sec.</i>		
Arterial Walls	<i>N</i>	<i>N</i>		<i>Date 31-3-42.</i>
Blood Pressure	{ Systolic	<i>140</i>	<i>110</i>	<i>There is a constant, harsh, high-pitched mitral early systolic murmur, heard also towards, the tricuspid area, and only faintly toward the axilla. Heart is at the borderline of normal. No palpable thrill</i>
	{ Diastolic	<i>70</i>	<i>90</i>	
Room Temperature	<i>70</i>	<i>70°</i>		
Heart	{ Size (in cms.)	<i>8.5</i>	<i>8.7</i>	
	{ Sounds	<i>N</i>	<i>N</i>	
	{ Rhythm	<i>Reg.</i>	<i>N</i>	
Lungs	{ Inspection	<i>N</i>	<i>N</i>	
	{ Palpation	<i>N</i>	<i>N</i>	
	{ Percussion	<i>N</i>	<i>N</i>	
	{ Auscultation	<i>N</i>	<i>N</i>	
	{ Expiratory Force	<i>170</i>	<i>N</i>	
X-Ray				<i>PTG.</i>
Reflexes	{ Knee	<i>Active</i>	<i>N</i>	
	{ Ankle	<i>"</i>	<i>N</i>	
	{ Triceps	<i>"</i>	<i>N</i>	
	{ Abdominal	<i>"</i>	<i>N</i>	
	{ Plantar	<i>Fl.</i>	<i>N</i>	
Cranial Nerves	<i>Intact</i>	<i>N</i>		
Balancing Rod	R. L.	<i>S-1 S-1</i>	R. L. R. L.	
	R. L.		R. L. R. L.	
Self Balancing	<i>S S</i>			
Tremors	{ Fingers	<i>0</i>		<i>Date</i>
	{ Eyelids	<i>0</i>		
Abdomen	{ Liver	<i>N.P.</i>	<i>N</i>	
	{ Spleen	<i>N.P.</i>	<i>N</i>	
	{ Muscular Tone	<i>Good</i>	<i>fair.</i>	
Urine	{ Albumen	<i>0</i>	<i>neg.</i>	
	{ Sugar	<i>0</i>	<i>neg.</i>	
Initials of M.O.	<i>W.E.H.</i>	<i>PTG.</i>		

40 mm. Hg. Test  
 Date *12/11/41* 60 sec. *8/8-9-8, 7-7-6, 7-7-7, 7-6-6* 1st trial *T.P.*  
 Date *7/777/666/666/678/6* 65 secs. *PTG.*  
 Date  
 Date

Fit. T. Pashby F/O



EYE EXAMINATION

History..... Neg. .... Neg. ....

Visual Acuity { R. 20/15, c - 2.50v = 20/200 ..... 20-15 c. 2.5 blur.  
 L. 20/15, c - 2.50 = 20/200 ..... 20-15 c. 2.5 blur.

Colour Vision C.V. Safe (Archer Giles) ..... Def. Safe (Ishihara)

Rec. Green..... Hyperphoria 1D. .... Ortho.

Diaphragm Test (P.D. = 58 mm.) bar over 4 @ 5 60 bar @ 1.

Convergence { C. = 8 ..... cms. .... 5  
 S. C. = 9 ..... cms. .... 7

Accommodation { R. 10.5 cms. .... 8  
 L. 10.5 cms. .... 8

Cover Test..... Sl. lat. div. Rap. Rec. .... Sl. lat. div. RR.

Fundi and Media..... Clear ..... N

Fields..... N ..... N

REMARKS: ..... Fit. .... fit.

Initials of M.O. T.P. .... Initials of M.O. RTG. .... Initials of M.O.

Date 12/11/41 ..... Date 31-3-42. .... Date

EXAMINATION OF EAR, NOSE AND THROAT

History..... Neg. .... Neg. ....

Hearing { R. Ear..... WV 20 ft. .... w. v. 20'  
 L. Ear..... WV 20 ft. .... w. v. 20'

External Ear, Meatus Membranes { R. Ear..... N ..... N  
 L. Ear..... N ..... N

Middle Ear, Eustachian Tubes..... { R. Ear..... P ..... N  
 L. Ear..... P ..... N

Cochlear Apparatus..... { R. Ear..... N ..... N  
 L. Ear..... N ..... N

Vestibular Apparatus..... { R. Ear..... N ..... N  
 L. Ear..... N ..... N

Buccal Cavity..... N ..... healthy

Teeth..... D.C. 28, Pts. 16 ..... satisfactory

Gums..... N ..... healthy.

Pharynx..... N ..... somewhat injected i. rt. Tonsil slightly red

Nasopharynx..... N ..... N

Nose..... Slt. rhinitis. Otherwise O.K. .... N

Larynx..... N ..... N

REMARKS: ..... Fit. .... Initials of M.O. T.P. .... Initials of M.O. RTG. .... Initials of M.O.

Date 12/11/41 ..... Date 31-3-42. .... Date



GENERAL REMARKS BY THE MEDICAL OFFICER ON HIS IMPRESSIONS OF THE CANDIDATE

12/11/41

Good candidate who should succeed.

Fit ALB - A3B

T. Paahby F/O

*Matthew R. H.*

#3 M.S.B. - 27-3-42- I hereby declare that I have had no illness etc since my last M2 exa

FAMILY Brother a student pilot in the air force. No family objections.  
 T. B. and nervous breakdown in parents.  
 EDUCATION Junior matric. failed English only.  
 MOTIVATION Fair.  
 INTELLIGENCE Average.  
 EMOTIONAL STABILITY Average.  
 GENERAL ADJUSTMENT Good.  
 COMMENTS Wants to be pilot or ground crew. Doesn't think he would like to be in a plane unless he could control it. Average or a little better.

P.T. Green, F/Lt.

OBSERVATIONS AND FINDINGS OF THE REVIEWING MEDICAL OFFICER

Date.....

**FIT** | Date 31/3/42

**PILOT**  
**OBSERVER**  
**W/OPERATOR**  
**A/GUNNER**

M.O.

*W. C. Bades F/O*

Night visual acuity quality:

E.E.G. 8

E.C.G.

L.P.C. 2

Score: 24

R.C.A.F. Records  
 Rec'd APR 30 1942  
 O.K. CI.  
 R. C. NI.  
 S.L. PA.



ROYAL CANADIAN AIR FORCE

INTERVIEW REPORT

SURNAME **GINGRAS**

CHRISTIAN NAMES **Joseph Rene Guy** N.F.

MARRIED **Single** NO. OF CHILDREN **None** FLY-ING

EDUCATIONAL STANDING:- Number of years

High School **4 1/2 yrs.** Technical Commercial

University (Name and dates of Attendance)

**Part of Sr. Matric**

Standing Other Countries

FLYING EXPERIENCE:- Total hours

Commercial Hours Solo Dual

Private " Solo Dual Passenger

No. Hours & Types during last 2 yrs.

MILITARY AND OTHER TRAINING:

**1 Month training at St. Jerome. Nov. 40 to Dec. 40**

SPORTS:- (What branches)

**Skating, Softball, Swimming, Football,**

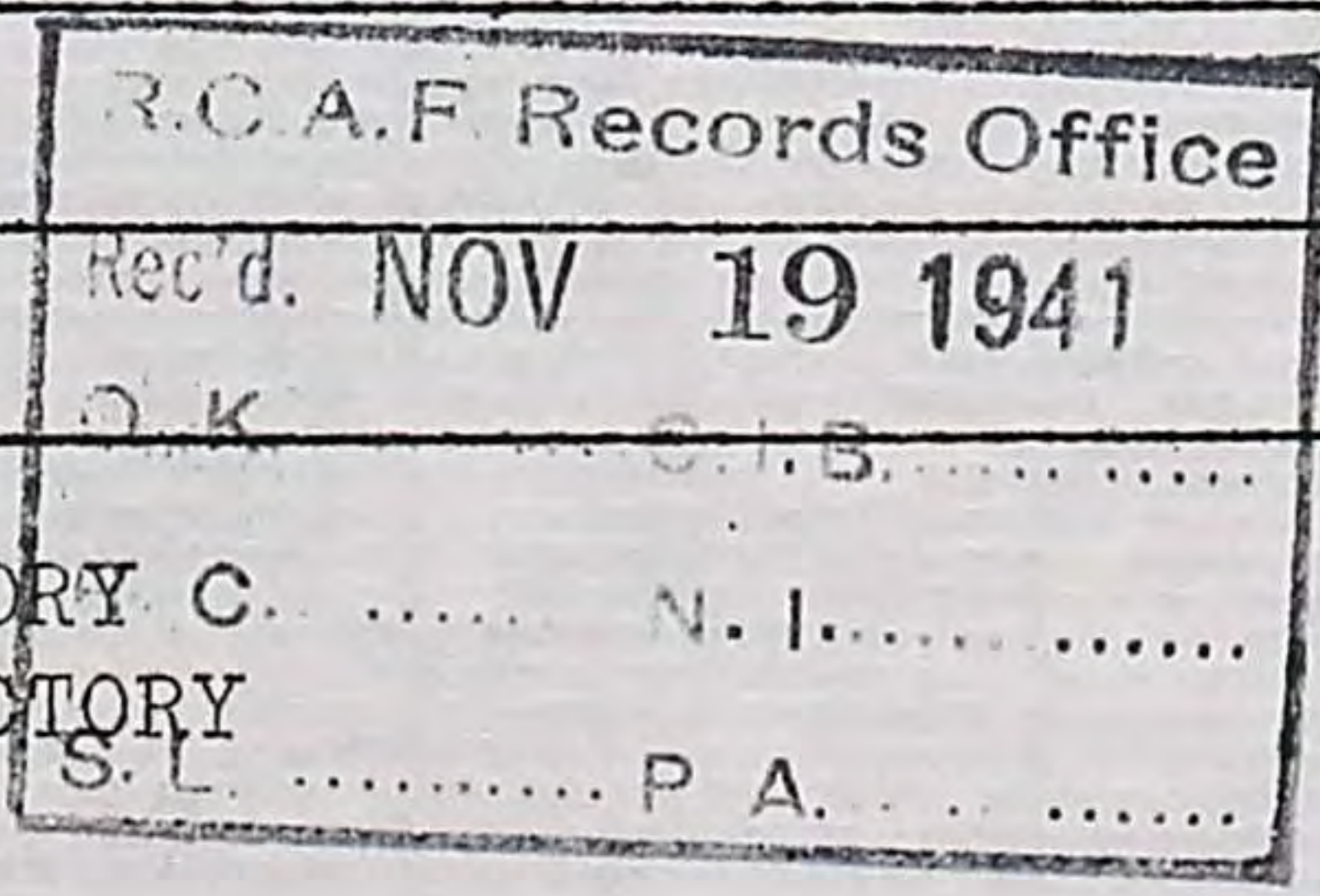
HOBBIES: **None**

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

**Comes from labour family. Family background lacking**

**but he will improve and polish up with mixing and**

**discipline. English fairly fluent for aAircrew.**



REFERENCES CHECKED -- SATISFACTORY C. N. I.

" " -- UNSATISFACTORY

" NOT CHECKED S. L. P. A.

CONSIDERED SUITABLE FOR COMMISSIONED RANK? **later**

BEST FITTED FOR **P.O.**

AGE **23**  
HEIGHT **5'10**  
WEIGHT **143**

ADMINISTRATION  
TECHNICAL  
EQUIP/ACCTS  
GEN. LIST  
PILOT **X**  
OBSERVER **X**  
W.O. AIR GUNNER  
APPROACH  
Confident **X**  
Nervous  
Easy

CARRIAGE  
Upright **X**  
Medium  
Athletic

DRESS  
Neat **X**  
Conservative  
Clean  
Careless

PHYSIQUE **X**  
Medium  
Heavy set  
Slender

SPEECH **X**  
Clear  
Slow  
Hesitant

RESPONSE **X**  
Quick  
Deliberate  
Slow

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

EXCELLENT  
ABOVE AVERAGE  
AVERAGE **X**  
BELOW AVERAGE

MARK WITH AN X THE DESCRIPTION WHICH APPLIES

DATE **Nov. 12-41**

RECRUITING CENTRE  
OTTAWA

**W. D. STRAND**

**(T.B. Senez) F.O.**

Signature of Officer



UNIVERSITY OF OTTAWA  
OTTAWA, CANADA

HIGH SCHOOL DEPARTMENT  
OFFICE OF THE PRINCIPAL

June 30 1939

TO WHOM IT MAY CONCERN:

This is to certify that Guy Gingras has been a student at the University of Ottawa High School from September 1934 to June 1938. He left after his Fourth form.

While in attendance here his conduct and application have always been very satisfactory.

*J. R. Gendron, O.M.S.*

The Principal.

Per. *ABL*



## ROYAL CANADIAN AIR FORCE (ATTESTATION PAPER)

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

1. Surname GINGRAS FULL Christian Names Joseph Rene Guy ✓  
 2. Present Address 51 Broadway St., Gatineau Mills, Que. Telephone None  
 3. Permanent Address 51 Broadway St., Gatineau Mills, Que.  
 4. Place of Birth L'Annonciation, Quebec Citizenship Canadian  
 5. Date of Birth Novembre 1st, 1918 Married, Single, Widower, Separated, Divorced Single  
 6. Particulars of Children None

Name	Date of birth	Name	Date of birth
NA			

7. Occupation Paper tester 8. Religion Roman Catholic  
State denomination  
 9. Languages French (fluently) English (fair)  
State proficiency  
 10. Next of Kin (Full Name) Daniel Gingras Relationship Father  
 " Address 51 Broadway St., Gatineau Mills, Que.  
 11. Father (Full Name) Daniel Gingras Birthplace St. Jovite, Que.  
 " Address 51 Broadway St., Gatineau Mills, Que. Citizenship Canadian  
 " Occupation Labourer  
 12. Mother (Full Maiden Name) Amanda Gareau Birthplace St. Faustin, Que.  
 " Address 51 Broadway St., Gatineau Mills, Que. Citizenship Canadian

13. Details of any Naval, Military or Air Force Service: None

Unit	Place	Rank	Trade	Date		Reason for discharge
				From	To	
<u>Hull's Regiment</u>	<u>St. Jerome, Que.</u>	<u>Pte.</u>		<u>Nov. 1940</u>	<u>Dec. 1940</u>	<u>End of training.</u>

R.C.A.F. Records Office

Rec'd NOV 19 1940

O.K. ll

R.C. B.R.

S.L. Yes P.A.

14. Honours, Awards, Mentions None  
 15. Are you now on any Naval, Military or Air Force Reserve?  
 16. Have you previously made application to join the R.C.A.F.? Yes If so, where? Ottawa, Ont.  
 When? 1939 Result None  
 17. Were you ever discharged from any branch of His Majesty's Forces as Medically Unfit? No  
 If so, state nature of disability NA  
 18. Have you ever been or are you now in receipt of a Disability Pension? No  
 If so, state nature of Disability NA  
 19. Have you ever been convicted of an indictable offence? No If so state nature NA  
 20. Are you in debt? No If so, state particulars NA

410-300



21. Particulars of Education:

	Name of school	Date		Courses—Subjects, etc.
		From	To	
Primary Education—Public or Separate School.....	Gatineau Mills School	1926	1934	General
High School—Collegiate Institute, etc.....	Lisgar Collegiate Inst.	1938	1939	General
Technical School .....				
University or School other than above.....	Ottawa University	1934	1938	Matriculation
Correspondence Courses, etc.....				

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

Employer and place	Duties, trades, positions	Date		Reason for leaving
		From	To	
C.I.P. Co., Gatineau Mills, Que.	Paper tester	1939	1941	Still employed

23. Flying Experience (in Hours) Solo.....None.....Dual.....None.....Passenger..... $\frac{1}{4}$  hr.

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

25. Sports engaged in. State: extensively, moderately, occasionally...skating,

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.....*pilot observer*  
 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
Rev. R. Glaude	Gatineau Mills, Que.	Parish Priest
Mr. J.R. Gendron	Ottawa University, Ottawa, Ont.	Principal
Mr. George Gibb	Gatineau Mills, Que.	Employment Agent
Mr. A. Lahaie	Gatineau Mills, Que.	Labourer

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 November 12th, 1941 Signature *[Signature]*

/LR



D 42  
NATIONAL REGISTRATION CERTIFICATE  
PRODUCED.  
m m Day

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,.....Joseph Rene Guy GINGRAS.....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 November 17, 1941. ✓ 19.....  
Signature of Recruit

(D) OATH TAKEN BY MAN ON ATTESTATION

I,.....Joseph Rene Guy GINGRAS.....do sincerely promise and swear (or solemnly declare) that I will be faithful and bear true allegiance to His Majesty.

Date November 17, 1941. ✓ 19.....  
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 No. 12 Recruiting Centre, RCAF this 17th day of November 1941.

Signature of Officer

Rank

No. 12 Recruiting Centre,  
R.C.A.F.,  
Ottawa, Ontario.



FOR OFFICIAL USE ONLY  
CERTIFICATE OF MEDICAL EXAMINATION

Finger Printed  
Date NOV 15 1941  
Initials [Signature]

Part 1. Information obtained from the applicant—

- 1. Age. 23 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) Gastro-intestinal. 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. Chickenspot.

3. Have you ever worn glasses? no

4. Have you had any illness for more than one week's duration? no

Examiner's Remarks re above. no

[Signature] Signature of Applicant

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

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

- 1. Identification marks or scars (if operative obtain history) hair mole - over R. Shoulder  
1/2" scar - tip of nose.
- 2. Height. 3' feet 8 1/2" inches. 3. Weight. 170 pounds.
- 4. Complexion. Medium 5. Color of Eyes. BROWN Hair. BROWN
- 6. Development. Good (Fair, Poor) 7. Chest Measurement—Full expiration. 31 inches
- Range of expansion. 2 1/2 inches
- 8. Hearing—Right. 20-25' Left. 20-25' Tympana—Right. N Left. N
- 9. Vision—Without glasses—Right. 20/15 With glasses—Right. 20/15
- Left. 20/15 Left. 20/15
- 10. Condition of mouth and teeth. N. D.C. 28 P. 8
- 11. Urine—Albumen. 0 Sugar. 0
- 12. Abnormalities (Congenital and Pathological) found on Examination. nil
- 17-11-41 X-Ray Neg. (Chest)

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

A1B  
A3B

Any special remarks of the Medical Officers.....

Part 2 Cont'

13. Reflexes. N

14. Heart. N

15. Lungs. N

16. Blood Pressure S. D. 140/90

17. Colour Vision Defective - Iridian

Date 17-11-41 1941

[Signature] President

[Signature] Member

C. D. [Signature] Member



**CANADA**  
**B.C.A.T.P.**

**ROYAL CANADIAN AIR FORCE**

RECORD OF SERVICE AIRMEN

J22212.  
~~R143523~~  
A.F. No.

*Gingras*  
Surname

*Joseph Rene Guy*  
Christian Names

*Roman Catholic*  
Religion

Born *1.11.1918*

Place *L'Annonciation Que.* Country *Canada*

Citizen of *Canada*

Racial Origin *French.*

PARTICULARS OF FAMILY

*M. S. P. W.*

Wife's Maiden Name

Present Address (in pencil)

CHILDREN	NAMES	PLACE OF BIRTH	DATE	CHILDREN	NAMES	PLACE OF BIRTH	DATE

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

*(Mr.) Daniel Gingras (Father)*  
*51 Broadway St. Gatineau Hills Que.*

CIVIL EDUCATION

CIVIL OCCUPATIONS AND EXPERIENCE

High School Entrance  Jr. Mat.  Sr. Mat.   
 Technical School  Business Courses   
 University

*paper tester 1939-41*

PREVIOUS SERVICE

ENLISTMENT

*Hull's Reg. St. Jerome Que. Pte.*  
*1 month.*

Date *17/11/41*

Med. Cat. *A2B1R* DATE *11/41*

At *Ottawa Ont.*

Term *Duration of War*

RANK	AUTH.	DATE	TRADE	AUTH.	DATE	TRADE TESTS AND COURSES				
						TRADE	GP	%	P or F	DATE
<i>AC2</i>		<i>17 11 41</i>	<i>Pom O (std)</i>		<i>17 11 41</i>					
<i>LAC</i>	<i>1570 11/2/42</i>	<i>9 5 42</i>	<i>Renostered</i>							
<i>Flight (paid)</i>	<i>1801309 11/9 42</i>		<i>Observer Std Group</i>	<i>1570 11/2/42</i>	<i>9 5 42</i>					<i>9 5 42</i>
			<i>Alt Navigator Std</i>	<i>D.R.2.32</i>	<i>9 5 42</i>					<i>7 10 42</i>
			<i>Alt Navigator paid</i>	<i>1801309</i>	<i>11 9 42</i>					

LEAVE

CHARACTER AND TRADE ASSM. HONOURS, AWARDS AND MENTIONS

FROM	TO	AUTH. AND DESCRIPTION	DATE	CHARACTER	TRADE AND ASSM.	HONOURS AND AWARDS	AUTH.
<i>12-9-42</i>	<i>26-9-42</i>	<i>1801309/11-9-42</i> <i>(PRE-EMBARRATION)</i>				<i>Awarded Alt</i>	<i>1801309/42</i>
						<i>Observer Body</i>	<i>11-9-42</i>



MOVEMENTS AND CASUALTIES

AUTHORITY	UNIT FROM	UNIT TO	DATE	AUTHORITY	UNIT FROM	UNIT TO	DATE
M013	RC Ottawa Ont.	#2 M.D. Brandon Man.	17/11/41				
			SRo. 278				
<del>LH0312</del>	<del>No 2 M.D. Brandon</del>	<del>For No 336 FTS</del>	<del>37-10-41</del>				
DR0 14	No 2 M.D. Brandon	#35 E FTS Neepawa, Man.	17-1-42				
DR0 112/42	3 ITS	5 AOS					
	Victoriaville	Ancienne Lorette	9-5-42				
DR0130A/42	No 8 AOS	No 1 Y. Depot	25-9-42				
	Ancienne Pette	Kaliforn M.D.					
DR0 130B/42	David Special	T. M.C. 121499	11-9-42				
Serial 317	No 1 Y. Depot	RA 11 P	27. 10. 42				
		Empy Car	28 10 42				
		H. K.	4 11 42				
	INT 3	3 PRC.	5 11 42				
22/43 (18/36) 24/43 (14/33)	3 P.R.C.	4. A.O.S.	26-1-43				

Finger Printed  
 Date NOV 5 1941  
 Initials [Signature]



NO. 23 O.T.U.

FINAL TRAINING REPORT - NAVIGATOR

No. T.22912 Rank P/O Name Quigley, J.R. Course 55

Arrived 23.3.43 Left 31.5.43

Flying Times	Day	Night
PRIOR TO O.T.U.	113.05	51.00
At 1st Navigator	36.00	29.55
At 2nd Navigator	6.45	3.45
GRAND TOTAL	155.50	84.40

Aids plotted	Number of	
	Psn. lines	Fixes
LOOP	30	11
ASTRO	29	9

GEE TRAINING	
AIR HRS. AT SET	16
NO. HOMING RUNS	4
FIXES OBTAINED	56
POSTED TO	60% SQDN.

(To be assessed 1 - 9)

Map Reading ..... 5  
 D.R. .... 6  
 Log keeping ..... 5

Astro (Theory & Ground) ..... 5  
 Astro (Air work) ..... 5  
 Gee ..... 6

As likely Navigation Instructor ..... 5 for commission

Remarks of Station Navigation Officer:

A quiet and steady type. Should be competent on operations when he has gained more confidence and experience.

Exercises not carried out ..... nil Whether recommended for commission N/A

Operational sorties from O.T.U. .... nil

(To be assessed 1 - 9)

Confidence ..... 6 Initiative ..... 5  
 Coolness ..... 6 Determination ..... 6

As an operational Navigator ..... 5

Remarks:

An average navigator, who should improve with experience.

(To be assessed 1 - 9)

Map Reading .....  
 D.R. ....  
 Log keeping .....

GEE TRAINING	
AIR HRS. AT SET	FIXES OBTAINED
NO. HOMING RUNS	POSTED TO SQDN.
Astro (Theory & Ground)	
Astro (Air work)	
Gee	

J. A. Roncoroni  
 Wing Commander, Commanding,  
 Training Wing, No. 23 O.T.U.

As likely Navigation Instructor

Remarks of Station Navigation Officer:



	TARGET	LOCATIONS.
L.N.	ATTEMPTED	SUCCESSFUL.
	9	6
MAV' 8	AVERAGE W/V ERROR YDS.	
	225.	



## R.A.F.—TRAINING REPORT.

**NAVIGATOR (A.F.U.)**

NO. 4 AIR NAVIGATION SCHOOL

Christian  
 1. Surname GINGRAS Names Joseph Rene Guy  
 2. Number R. 143523 3. Rank SGT. P/O. 4. Course No. 30 (AFU)  
 5. Posted No. 3 PRC., 6. Date course com- 7. Date course 8. Posted No. 23 OTU.,  
 from Bournemouth menced 28.1.43 ended 8.3.43 to Pershore.

9. Ground Work			10. Air Work		
Subject	Marks Allotted	Marks Obtained	Subject	Marks Allotted	Marks Obtained
(a) Air Nav.—Exercises ...	250	140	(a) Air Nav.—Day ...	350	190
(b) Air Nav.—Test... ..	250	165	(b) Air Nav.—Night ...	250	170
(c) Reconnaissance... ..	150	N/A	(c) Air Nav.—Map Reading	200	150
(d) Signals ... ..	150	N/A	(d) Photography ... ..	100	72
(e) Photography ... ..	150	N/A	(e) Reconnaissance ... ..	100	70
(f) Aircraft Recognition ...	50	38.5			
Total ... ..	1,000	343.5	Total ... ..	1,000	652
PER CENT.		62.5	PER CENT.		65.2

II. Assessment of qualities of Character and Leadership ... ..	Marks Allotted	Marks Obtained
	100	50

Degree of Suitability for further training	0	1	2	3
	Not at all suitable	Moderately suitable	Definitely suitable	Extremely suitable
12. As a Navigation Instructor ... ..	X			
13. As an Armament Instructor ... ..	X			
14. Specialist Navigation Course ... ..	X			

(Mark "X" in the appropriate column for each)

## 15. Remarks :

A French Canadian. Worked quite hard but rather slow in the uptake and barely reached an average standard.

Date 17th March, 1943.Signed J. A. Whiteley S/O W/Cdr.

Officer Commanding



16. Flying Times (At this Unit) :

Type of Aircraft	Time	1st Nav.*	2nd Nav.	Armament Flying	Other	Total
Anson	Day ...	11:40	20:25	Nil	Nil	32:05
	Night ...	8:00	8:20	Nil	Nil	16:20

\* Count only the time during which the pupil carried full responsibility for the navigation of the aircraft.



M

ARMY TRAINEE

GINGRAS, Guy Rene

C-422520

Pte

30 Days Training

83102



ROYAL AIR FORCE.

ALLIANCE AN'S/AIRWOMAN'S RECORD SHEET (Active Service).

Official No. *CAN. J 22212. R 143523* Name *GINGRAS Joseph Rene Guy* Rank *T/Sgt*  
 (In full in block capitals, surname first). (Or acting appointment).

R.A.F. Trade *A/NAV. (2)* Special Qualifications \_\_\_\_\_  
 (e.g., Gas Instructor, Fire Fighter, Boxing Instructor).

Date of Birth *1-11-18.* Religion *R.C.* Occupation in Civil Life *Paper Tester*

Last Enlisted *17.11.41.* Current Engagement *Def War.*

If a member of the Auxiliary Air Force \_\_\_\_\_

If Reservist, which Class ("E," "F," V.R.) *S.R.* Whether Married, Single or Widower *S*

Name, address and relationship of legal next of kin (to be entered in pencil):

*Mrs D GINGRAS, 51 Broadway St, Gatineau Mills, Ont (Father)*

Name, address and relationship of person (or persons) to be informed of casualties (to be entered in pencil).

(If this person is the legal next of kin, it is only necessary to insert here "Next of Kin.")

*N.K.*

Any alteration to above (e.g., Promotions) to be made by crossing out and writing above.

SECTION I.—MOVEMENTS AND CASUALTIES.

SECTION 2.—  
 PROMOTIONS, ACTING APPOINTMENTS (PAID OR UNPAID),  
 REDUCTIONS, REMUSTERINGS.

Unit FROM which.	Unit TO which.	Date of Effect.	* Authority.	Description.	Date of Effect.
<i>8 A.O.S.</i>	<i>1.V. Depot</i>	<i>25.9.42</i>		<i>PorO Std AEC</i>	<i>17.11.41</i>
<i>1.V. Depot</i>	<i>R.A.F.T.P</i>	<i>27.10.42</i>		<i>A/Obo. Std LAC.</i>	<i>9.5.42</i>
	<i>Emb. Can.</i>	<i>28.10.42</i>		<i>A/NAV.</i>	<i>9.5.42</i>
	<i>U.K.</i>	<i>4.11.42</i>		<i>" Spec. (2) T/Sgt</i>	<i>11.9.42</i>
<i>INT. 3</i>	<i>3P.R.C.</i>	<i>5.11.42</i>			
<i>22/43 3P.R.C.</i>	<i>4A.O.S.</i>	<i>25.1.43</i>			
<i>4 A.O.S.</i>	<i>23 O.T. 4</i>	<i>23.3.43</i>			
<i>23 O.T. 4</i>	<i>Discharged w appointment to commissioned Rank</i>	<i>10.9.42</i>			
	<i>RO80</i>	<i>28.5.43</i>			



SECTION 4.—CHARACTER AND TRADE PROFICIENCY.

(To be assessed on every occasion on which an airman or airwoman is struck off the strength of a unit, e.g., on posting; admission to hospital when posted to N.E. strength; death; etc.; also on 31st December each year.)

Rank.	Character.	Trade Classification.	Proficiency.			Whether specially recommended, recommended, or not recommended for promotion or reclassification.	Date.	Signature of Commanding Officer.	Rank of Officer.
			A	B	C				
T/Sgt.	V.G.	A/NAV.(2)	On strength for training only				23/9/42	[Signature]	SP
ASgt	V.G.	PIC NAV	ON STRENGTH FOR TRAINING ONLY				16.3.42	[Signature]	SP
ASgt	V.G.	AIR/NAV					10/9/42	[Signature]	SP
6.3.43	22.3.43	7 Days ext of Paid Leave						[Signature]	SP
9.3.43	15.3.43	7 Days Paid L. 4/43						[Signature]	SP
14/43	18.1.43	Privilege Leave - 7 day (incl)						[Signature]	SP

RECORD OF LEAVE AND ISSUE OF FREE TRAVELLING WARRANTS

First entry to be made at bottom of above section; subsequent entries to be made directly above in sequence.

SECTION 5.—RESULTS OF COURSES OF INSTRUCTION, RECOMMENDATIONS FOR AIRCREW DUTIES, RECOMMENDATIONS FOR COMMISSIONED RANK (K.R. 2132, (19) (A)). DECORATIONS, MENTIONS, SPECIAL COMMENDATIONS BY A.Os.C., ETC.

Authority

Nature





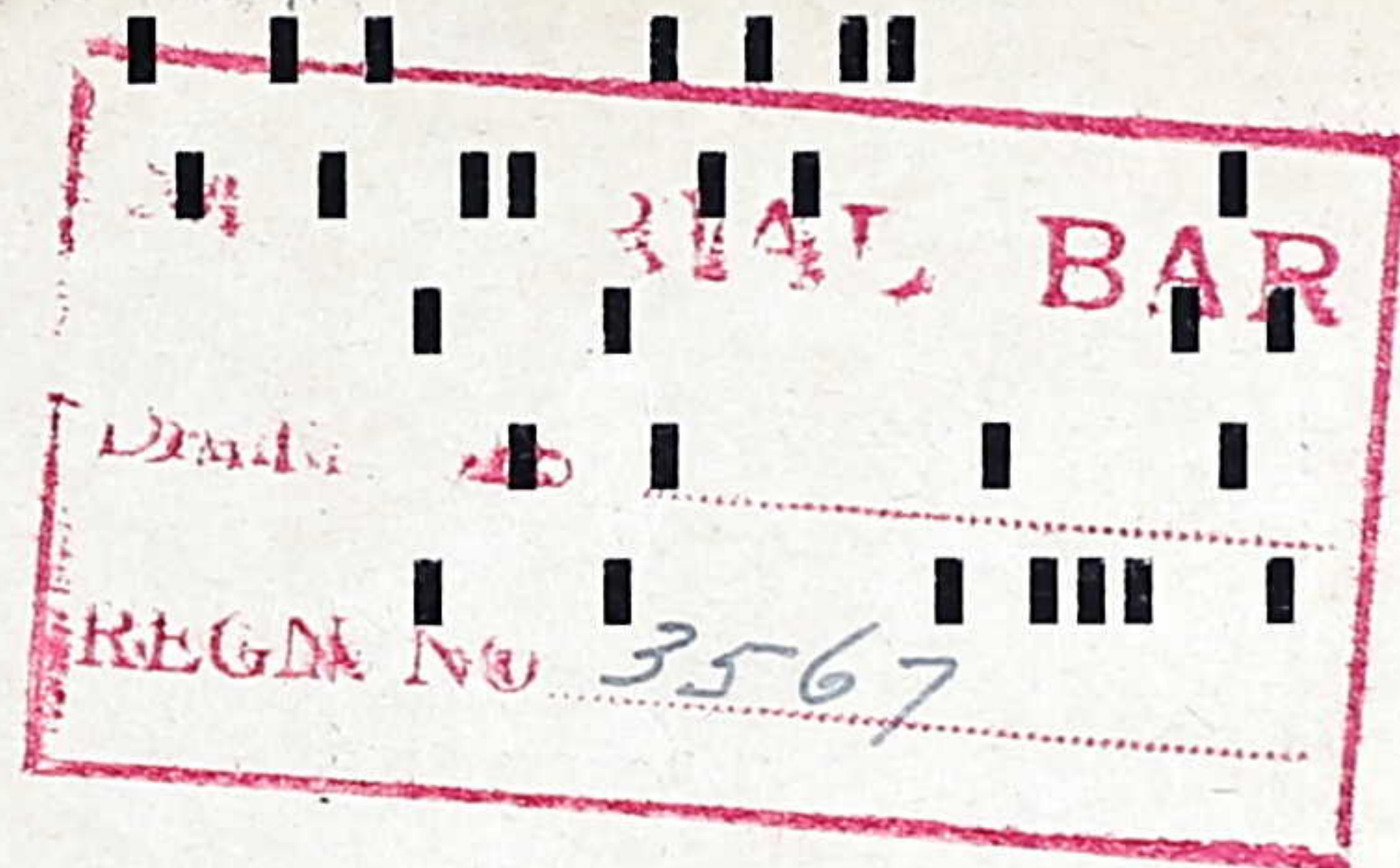


Daniel Gingras (Father)  
51 Broadway Ave.,  
Gatineau Mills,  
Que.

Jan. - 47.

5128

21-11-49





NAME GINGRAS, Joseph Rene Guy

FILE NO. J22212

PRES. DEAD

RANK ~~XXXX~~ F/O

CATEGORY XXXXXXXXXXXXXXXXXXXXXXXXXX

REG. NO. \_\_\_\_\_

DATE OF DEATH: 25-June-43

MOTHER LIVING: YES

WIFE: NA

MINISTERIAL CARD: 20 July 43

ROYAL MESSAGE:

**JUN 20 1944**

MEMORIAL CROSS  
TO CHAPLAIN:

**JUN 3 1944**

To mother & father ( french card)  
New C ard 22-11-43  
To mother & father 15-2-44

DEL'D TO MOTHER:

DEL'D TO WIFE:

Mr. & Mrs. Daniel Gingras,  
51 Broadway Ave.,  
Gatineau Mills, Que.

COMMAND: No. 3

RELIGION: R.C.



43523 LAC Gingras, J.R.

PART II (For Air Navigators)

.....8.....Air Observers' School.

Course No...50..... From.....8-5-42....

To.....11-9-42.....

Flying Time

Aircraft	Day		Night		Passenger	Total
	1st Nav.	2nd Nav.	1st Nav.	2nd Nav.		
Ansor I	35.05	44.55	17.30	17.10		114.40
.....	.....	.....	.....	.....	.....	.....

Examinations and Proficiency:

	Marks		
	Maximum	Obtained	
Navigation (Air Work).....	700	.....512.....	Navigation Does a very good job of navigation in the air.
Geography (Air Work).....	100	.....74.....	
Elements of Navigation.....	500	.....398.....	
Metism and Compasses.....	100	.....78.....	
struments.....	50	.....41.....	
als (Practical).....	100	.....95.....	
als (Written).....	50	.....31.....	
and Charts.....	50	.....37.....	
orology.....	100	.....67.....	
ography.....	50	.....44.....	
naissance.....	100	.....65.....	General Co-operative. Quick to pick up new ideas in spite of a slight language difficulty. Quite and undemonstrative in manner.
raft Recognition.....	100	.....50.....	
Totals.....	2000	.....1492.....	
tion in Class	16	Percentage	74.6 %
n Class	28	Pass	Fail
smment as Air Navigator.....	Average.....		
structor.....	Suitable	Unsuitable	
ession Rank.....	Suitable	Unsuitable	
cter and Leadership.....	Maximum 1000	Obtained ...660.....	

warded Air Navigators Badge 11-9-42

.....*W. Heroux* 7/1/42.....  
CHIEF INSTRUCTOR

No.....8.....A.O.S. Date...11-9-42.....



# ROYAL CANADIAN AIR FORCE

## REPORT ON PUPIL AIR OBSERVERS

### AIR AND GROUND TRAINING

SURNAME..... GINGRAS ..... Christian Names..... J.R.G. .....  
 Number..... R143523 ..... Rank..... L.A.C. .....

### 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..... 3 ..... INITIAL TRAINING SCHOOL. COURSE No..... 49 ..... FROM..... 16-3-42 .....  
 To..... 8-5-42 .....

### 2. EXAMINATION RESULTS.

SUBJECT	MARKS		REMARKS
	Maximum	Obtained	
Mathematics.....	150	<u>131</u>	Neat, Serious, Retiring, Persistent Alternative Recommendation: W.Aero Engine Mechanic CHARACTER & LEADERSHIP: <u>96</u> <i>(if possible)</i> <i>KLM</i>
Armament.....	50	<u>44</u>	
Signals.....	150	<u>135</u>	
Navigation.....	200	<u>190</u>	
Visual Link Trainer.....			
Airmanship, Theory of Flight and Engines.....	100	<u>82</u>	
Drill.....	100	<u>52</u>	
Law and Discipline, etc.....	100	<u>91</u>	
Hygiene and Sanitation.....			
A/C Recognition.....	100	<u>74</u>	
Anti-Gas.....	50	<u>43</u>	
TOTAL.....	1000	<u>842</u>	
Position in Class	<u>64</u>	Percentage	<u>84</u> %
No. in Class	<u>201</u>	PASS	<u>Rate</u>

R.C.A.F. Office  
 Rec'd. NOV 23 1942  
 O.K. C.I.B.  
 H.C. JB N.I.  
 S.L. JB P.A.

*[Signature]*  
 Commanding Officer

To BE PASSED TO..... 8 ..... A.O.S.

No..... 3 ..... I.T.S.

DATE..... 6-5-42 .....



## DOMINION BUREAU OF STATISTICS—QUEBEC DEATH TRANSCRIPT

Do not  
write in  
this space

1. PLACE OF DEATH	Municipal county	<b>OVERSEAS (GERMANY)</b>		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	<b>GINGRAS</b> (Block letters)					Do not write in this space	CONFIDENTIAL MEDICAL CERTIFICATE OF DEATH									
	Given names	<b>JOSEPH RENE GUY</b>						22. Date of death	<b>June</b>	<b>25th</b>	19 <b>43</b>						
4. RESIDENCE	Street	<b>Broadway Street</b>					No.	<b>51</b>									
	Official name of civil municipality or township	<b>Gatineau Mills</b>															
	Municipal county	<b>Quebec</b>															
5. SEX	6. NATIONALITY (Citizenship)	7. RACIAL ORIGIN	8. Single, Married, Widowed or Divorced (Write the word)														
<b>Male</b>	<b>Canadian</b>		<b>Single</b>														
9. If married give name of wife or husband of deceased																	
10. BIRTHPLACE (Province or Country) <b>Quebec</b>																	
11. DATE OF BIRTH <b>November 1st 1918</b> (Month) (Day) (Year)																	
12. AGE OF DECEASED <b>24</b> Years Months Days If less than one day old .....hrs. or.....min.																	
OCCUPATION	13. Trade, profession or kind of work, as spinner, teamster, office clerk, etc. <b>Navigator</b>																
	14. Kind of industry or business, as cotton-mill, lumbering, bank, etc. <b>R.C.A.F.</b>																
	15. Date deceased last worked at this occupation <b>June 25/43</b>																
16. Total years spent in this occupation <b>Two</b>																	
17. NAME																	
18. BIRTHPLACE (Province or Country)																	
FATHER		<b>Gingras, Daniel</b>					<b>Quebec</b>										
MOTHER (Maiden Name)		<b>Gareau, Amanda</b>					<b>Quebec</b>										
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)																
22. 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) <b>Previously reported missing after air operations, now for official purposes, presumed dead.</b>																	
Morbid conditions, if any, giving rise to immediate cause (stated in order proceeding backwards from immediate cause). (b)..... (c).....																	
II Other morbid conditions (if important) contributing to death but not causally related to immediate cause. (a)..... (b).....																	
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 <b>Accident</b> Date <b>June 25th 19 43</b> (State which) Manner of injury <b>Presumed killed during air operations</b> (How sustained) Nature of injury..... Specify whether injury occurred in <b>public place</b> industry, in home, or in public place.....																	
Signed.....M.D. Address.....Date.....19.....																	
28. Signature of person who fills in the form (curate, coroner, hospital authority, etc.) <i>R. C. A. F. Records Officer</i> <b>For (R.C.A.F. Records Officer)</b> 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)																	

25



Gatineau Mills 8 Janv. 1946-

A Mr. F. K. McJougals

Referred to.....

File No.....

Cher Monsieur

J'ai reçu le 2 septembre 1945 une lettre se rapportant à mon fils Guy (dossier J-22212 R-2-1-2).

J'ai répondu à cette lettre en octobre et je n'ai reçu aucune nouvelle. J'aimerais bien que le tout soit réglé au plus tôt car il m'est pénible de toucher ce sujet.

Votre serv.

Daniel Gingras

51 rue

Broadway

Gatineau Mills. Qué.



Gatineau Mills, January 8th, 1946.

Gentlemen,

On September 5th 1945 I received  
a letter relative to my son Guy ( File J.22212 R-2-1-2)

Since then I have had no further  
news, although I replied in October.

I would like this matter settled  
as soon as possible as I find it hard to deal with this  
subject.

Yours truly,

(Sgd) Daniel Gingras,  
51 Broadway St.,  
Gatineau Mills, P.Q.



29934 J 22212

Gatineau Mills, January 8th, 1946.

Gentlemen,

On September 5th 1945 I received  
a letter relative to my son Guy ( File J.22212 R-3-1-2)

Since then I have had no further  
news, although I replied in October.

I would like this matter settled  
as soon as possible as I find it hard to deal with this  
subject.

Yours truly,

(Sgd) Daniel Gingras,  
51 Broadway St.,  
Gatineau Mills, P.Q.

check

app

L 89

the returned copy 1

C916





DEPARTMENT OF NATIONAL DEFENCE  
NAVY ===== ARMY ===== AIR FORCE  
STATEMENT OF WAR SERVICE GRATUITY

4  
AIR

DECEASED  
MEMBER'S  
NAME

J.R. Guy (CHRISTIAN NAMES)      Gingras (SURNAME)

REGISTER NO. *E607-12*

FILE NO. 29934

DATE 31 May/46

SERVICE NO. J22212

FINAL RANK OR RATING F/O

DATE OF DISCHARGE 25 June/43

PAYEE

Receiver General of Canada

ADDRESS

Director of Estates  
Ottawa, Ont.

DATE OF TERMINATION OF OVERSEAS SERVICE 25 June/43

A. TOTAL QUALIFYING SERVICE

NO. OF DAYS 586 EQUAL TO 19 COMPLETE PERIODS AT \$7.50

\$ 142.50

B. QUALIFYING OVERSEAS SERVICE

NO. OF DAYS 242 LESS 16 INELIGIBLE DAYS, EQUAL TO 226 DAYS @ 25c. PER DAY

\$ 56.50

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 \$

TOTAL \$ 8.70 X 7 = \$ 60.90

NO. OF DAYS 242 X \$ 60.90

183

\$ 80.54

D. WAR SERVICE GRATUITY

\$ 279.54

E. DEDUCTIONS

OVERPAYMENT OF

PAY AND ALLOWANCES \$  
DEPENDENTS' ALLOWANCE AND ASSIGNED PAY \$

OTHER DEDUCTIONS \$

F. TOTAL AMOUNT PAYABLE

\$ 279.54

G. YOUR PORTION OF GRATUITY IS—

DEPENDENTS' ALLOWANCE IN ISSUE TO YOU \$ \_\_\_\_\_ OF \$ \_\_\_\_\_ = \$ \_\_\_\_\_

TOTAL DEPENDENTS' ALLOWANCE IN ISSUE \$ \_\_\_\_\_

**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

LG

H

TREASURY

CHECKED BY

DATE

SERVICE REPRESENTATIVE



# 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

## Section A—GENERAL INFORMATION

- 3
1. (a) Print name in full GINGRAS, Guy Joseph Rene (b) Reg'l. No. 2143524
2. (a) Arm of service ASZ (b) Unit 42 RD, RCAP, Brandon, Man. (c) Rank ASZ
3. (a) Date of birth Nov. 1, 1918 (b) Have you No any dependents? (c) Place of residence Ottawa, Ont at time of enlistment.
4. (a) Place of enlistment Ottawa, Ont. (b) Date of enlistment 17-11-41

PLEASE  
LEAVE  
BLANK

## Section B—EDUCATION AND TRAINING

5. (a) State age on finally leaving school 21 (b) Were you attending school or college up to the time of enlistment? No
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.) Junior Matric.
7. If you attended a university, give name of university and standing or degree secured.....
8. (a) Did you ever enter upon a trade No (b) If so, for what apprenticeship?..... (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? French & English (b) What languages do you read well? French & English

## 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) WORKING (b) At time of enlistment of what trade union or professional society were you a member? International Union of Paper Workers

## 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 Canada International Paper Co. Address 1000 Bank St., Ottawa, Ont.
19. Nature of employer's business (for instance, "farmer", or "building contractor", or "boot factory", or "iron foundry", or "retail store", etc.) Paper Manufacturers
20. (a) Your specific occupation Paper mill (b) Number of years' experience at this occupation with any employer 3 yrs.
21. (a) Did your employer promise definitely to give you employment on discharge? Yes (b) Did your employer refuse to promise you employment on discharge?..... (c) Do you wish to return to your former employment? Probably

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? No (b) Do you feel competent to operate a farm? No (c) If so, in what kind of farming? None
25. (a) Were you born on a farm? No (b) How many years' actual farming experience have you had? None (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.) Remain in Service
28. State any employment preference or ambition you may have, other than indicated elsewhere in this form.....

DATE 20-11-41 194..... SIGNATURE Guy Joseph Rene Gingras



RECEIVED  
DEC 8 1941  
R. C. ...  
S. I. ...

*jm*



GATINEAU MILLS, QUE.  
**GENERAL INFORMATION** SINGLE

EDUCATION

1926-34 - Gatineau Mills School - General.  
 1938-39 - Lisgar Collegiate Inst. - General.  
 1934-38 - Ottawa University - Matriculation.

CIVIL EXPERIENCE

1939-41 - C.I.P. Co., Gatineau Mills, Que. - Paper tester.

SPORTS

Skating.

Awarded posthumously the OPS.WINGS in recognition of meritorious operational service in action against the enemy. AFRO 2274,20-10-44.

SERVICE EXPERIENCE

Nov;1940-Dec.1940 - Hull's Regiment, St. Jerome, Que. - Pte.

(G.L.) CFR GINGRAS, Joseph Rene Guy (SR)  
 1-11-18 Air Navigator. 24 11-9-42  
 Birth Date Age on Appointment Date of Appointment

POSTINGS			
Rank	Date	Station	Date
P/O	11-9-42	#8 A.O.S. Ancienne Lorette	
P/O	11-9-42	RAF Overseas	27-10-42
TFO	11-3-43	RAF OVERSEAS	27-10-42
		Missing after Flying Operations 25-6-43 Cas. List #448 5-7-43	
		AUTH: AP&R NO. 164, 8-9-43.	
		MISSING AFTER FLYING OPERATIONS 25-6-43 CAS. LIST #448, 5-7-43.	
		Previously reported missing now for official purposes presumed to have died	
			25-6-43 CAS. LIST 628



Translation

BM

2/9/54.

Gatineau,  
August 30th, 1954.

R.C.A.F. war claims commission  
Ottawa, Ontario.

SEP 10

①

Dear Sir,

We are the parents of S.Lr Guy Gingras,  
of the Air Force, who was shot down on June 24th, 1943.

I am ~~xxx~~ writing to request my  
pension for myself and my wife. I was 66 in March,  
and my wife will be 66 in November.

I work for the Int. Paper of Gatineau  
and I will be dismissed in September, of this year.  
I am sick and under doctor's care, and my wife is also.

I hope to receive the pension shortly,  
and it will be of great assistance to us.

Yours truly,

Daniel Gingras,  
215 Main,  
Gatineau Mills,  
P.Q.

(No. 22212 Guy Gingras).

② Secretary L.P.  
Rec'd this direct route  
in error. For your direct  
reply to Mr. Gingras please.  
Note original rec'd in French.  
All addresses F/O  
DAF/AF 2-4-2  
3445

10/9/54

③ To file  
Original placed  
on D.A. file &  
action taken by CAS.  
OS  
24-9-54



Date: April 30/47

- 13 -

General Cemetery, Bergen/Aan/Zee, N.H.

SER. NO.	A.M. FILE NO. etc.	CASUALTY DATE	SERVICE NO.	RANK	NAME AND INITIALS	CREW POSITION	BURIAL DETAILS	FOR USE BY M.R.E.U.
78	P.405655/43 C.E. No. H.236	25.6.43	<u>J.22212</u>	F/O /	Gringras J.R.G.	Nav.	Row 8, gr. 223	
			R.158749	F/Sgt.	Deverill M.R.	A/B	♯	
			R.55654	F/Sgt.	Legace J.M.C.	A/G	Row 4, gr. 69, Westduin	
			1312182	Sgt.	Tobin M.P.	WOP/AG. )	Presumed	
			R.135156	F/Sgt.	Mercier J.J.C.	Pilot )	lost at sea.	

( / Amended registration required)

(♯ Grave 2 in row F, plot 8, Bergen-op-Zoom (Canadian Mi.) Cemetery, allotted to this N.C.O., is reported to have been concentrated from grave 4, row C, Ouddorp General Cemetery, Overflakke. German records give Deverill's original burial place as grave 2, row 3, North side, Ouddorp General Cemetery. It is suggested that this discrepancy be investigated and clarified before the grave at Bergen-Op-Zoom is finally registered in his name.)



P.405655/43

U1959 (GINGRAS)  
U1650 (LEGACE)  
U1669 (DEVERELL)

EXTRACT FROM GERMAN DOCUMENTS ~~K.E.~~

E.V. (No death cards available)

DETAILS OF CRASH. N/T

DETAILS OF CREW. Record of men washed ashore:-

1. J.R. Gingras R.143523. On 29.8.43 at 1600 hrs near Bergen am See
2. Sgt. M.R. Deverell R.158749. On 14.7.43 at ~~1000xhrs~~ approx. 22.00 hrs on the  
S. Coast of OVERFLAKEE, ~~at~~ 150 ms. W. of GILHAVEN.
3. JIM.C. LAGACE R.55654. On 10.7.43 at SCHEVENINGEN. Buried in Military Cemetery  
of WESTDUIN, District of DEN HAAG. S. Holland, Grave 69, English section.

SIGNATURE J.G. RULLOCK DATE 30/4/47

PHOTOSTATS ATTACHED.

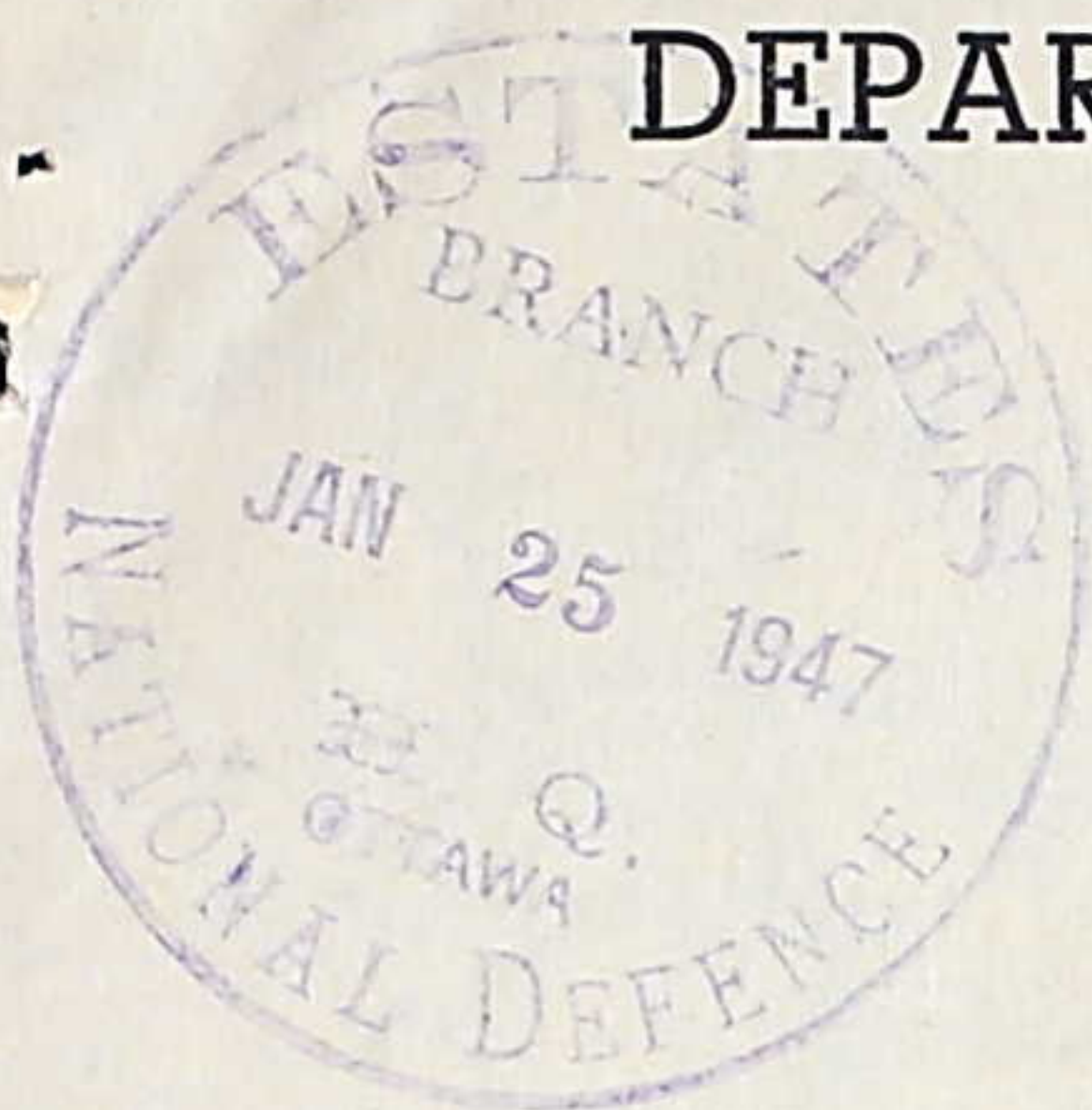
INITIALS

DATE

COPY TO:- CAS.CAN. ✓  
RAAF. O.H.Q.  
RNZAF. O.H.Q.  
D.A.F.L.

S.7.CAS. (C.5.)





DEPARTMENT OF NATIONAL DEFENCE

ESTATES BRANCH

OTTAWA, CANADA

XX

Date *Gatmean Hills*  
*24 Janvier* 1947

RECEIVED this date Treasury cheque for the sum of

-----TWO HUNDRED AND SEVENTY NINE-----  $\frac{54}{100}$  Dollars (\$279.54)

War Service Gratuity  
in connection with the ~~estate~~ of the below-named deceased,

GINGRAS, J.R. Ruy F/O (Deceased)  
J.22212 RCAF

*Daniel Gingras*  
Signature



Bene. Father

Daniel Gingras  
51 Broadway Ave.  
Gutierrez Mills, P. O.  
(sole Bene. under will)

\$279.54.



DEPARTMENT OF NATIONAL DEFENCE  
NAVY ===== ARMY ===== AIR FORCE  
STATEMENT OF WAR SERVICE GRATUITY

*WB.* **2**  
AIR

DECEASED  
MEMBER'S  
NAME

**J.R. Guy** **Gingras**  
(CHRISTIAN NAMES) (SURNAME)

REGISTER NO. **E607-12**

FILE NO. **29934**

PAYEE

**Receiver General of Canada**

DATE **31 May/46**

ADDRESS

**Director of Estates  
Ottawa, Ont.**

SERVICE NO. **J22212**

FINAL RANK OR RATING **F/O**

DATE OF TERMINATION OF OVERSEAS SERVICE **25 June/43**

DATE OF DISCHARGE **25 June/43**

A. TOTAL QUALIFYING SERVICE

NO. OF DAYS **586** EQUAL TO **19** COMPLETE PERIODS AT \$7.50  
30

\$ **142.50**

B. QUALIFYING OVERSEAS SERVICE

NO. OF DAYS **242** LESS **16** INELIGIBLE DAYS, EQUAL TO **226** DAYS @ 25C. PER DAY

**56.50**

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 \$

TOTAL \$ **8.70** X 7 = \$ **60.90**

NO. OF DAYS **242** X \$ **60.90**  
183

**80.54**

D. WAR SERVICE GRATUITY

**279.54**

E. DEDUCTIONS

OVERPAYMENT OF

PAY AND ALLOWANCES  
DEPENDENTS' ALLOWANCE  
AND ASSIGNED PAY \$

OTHER DEDUCTIONS

F. TOTAL AMOUNT PAYABLE

**279.54**

G. YOUR PORTION OF GRATUITY IS—

DEPENDENTS' ALLOWANCE IN ISSUE TO YOU \$ \_\_\_\_\_ OF \$ \_\_\_\_\_ = \$ \_\_\_\_\_

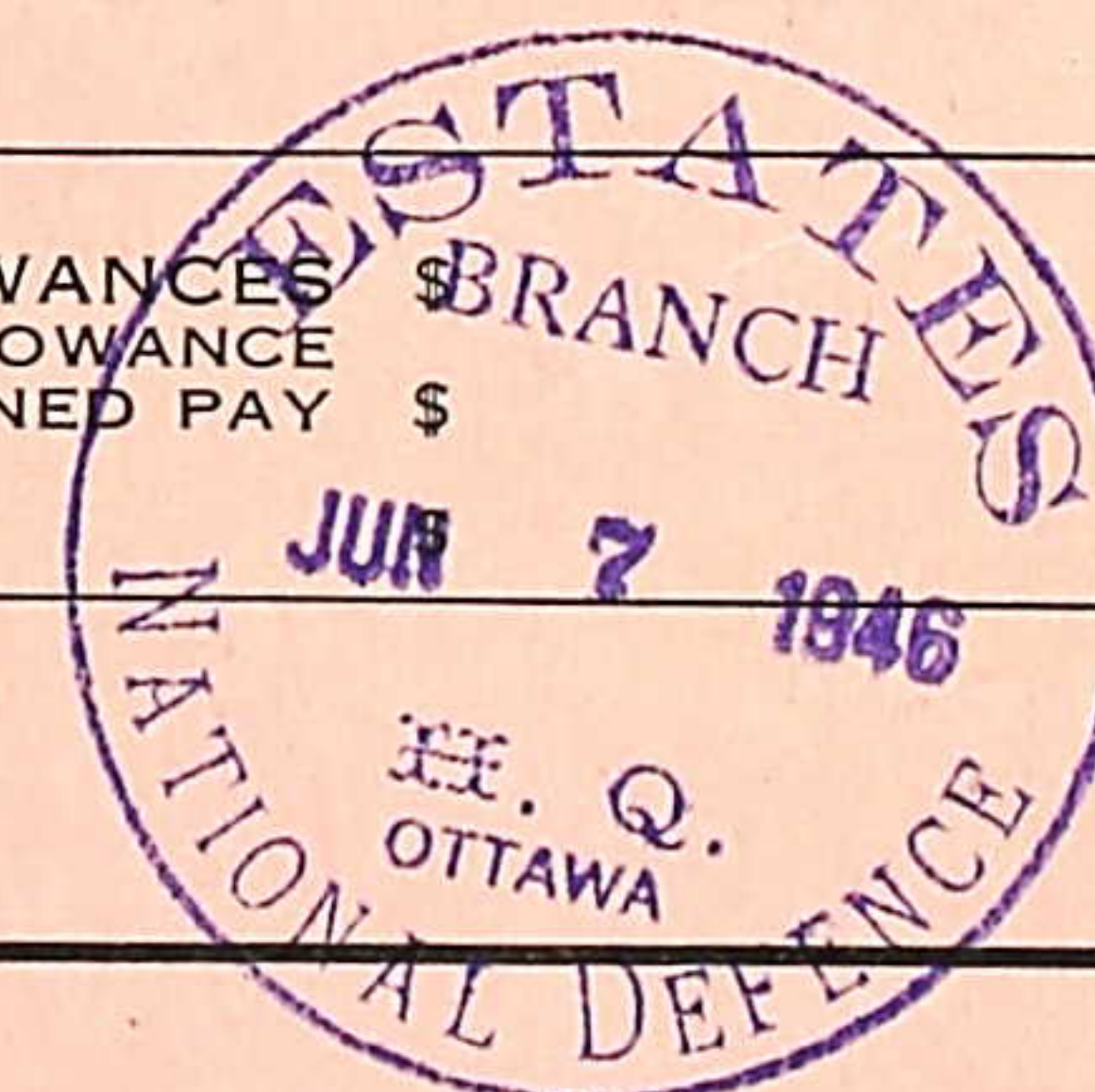
TOTAL DEPENDENTS' ALLOWANCE IN ISSUE \$ \_\_\_\_\_

**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 **LG** CHECKED BY **H**

TREASURY  
CHECKED BY **[Signature]** DATE **3/6/46**

**[Signature]**  
SERVICE REPRESENTATIVE





J22212 (RO)

OTTAWA, Canada, December 8th, 1947.

Mr. D. Gingras,  
51 Broadway St.,  
Gatineau, Quebec.

Dear Mr. Gingras;

It is with regret that I again refer to the loss of your son, Flying Officer Joseph Rene Guy Gingras, but you will wish to know of a communication received from the Graves Registration Services Overseas.

The report states that your son's grave has been registered by this Service as Row 8, Grave No. 223 in the Bergen aan Zee Cemetery, Holland, on the coast approximately 20 miles south of Texel Island.

The reverent and perpetual care of the burial places of all who served in the Royal Canadian Air Force is the task of the Imperial War Graves Commission (of which Canada is a member). The Commission will also erect a headstone at the grave. Unhappily, there are great numbers of these headstones to be erected, and it will quite naturally take considerable time. It is not necessary to write to the Imperial War Graves Commission, as you will be contacted by them before the stone is prepared.

May I again offer to you and the members of your family my deepest sympathy in the loss of your gallant son.

Yours sincerely,

*J. J.*  
R.C.A.F. Casualty Officers,  
for Chief of the Air Staff.

PPF:JIF



C O P Y

From: No.2 M.R.E.Unit (Detachment), Royal Air Force, c/o British  
Military Mission to the Netherlands, THE HAGUE, Holland.

To: Air Ministry, S.7 Cas (C) 2 Seville Street, LONDON, S.W.1.

COPY: Royal Canadian Air Force, per Air Ministry LONDON.

Date: 17th of March 1947

Your Ref: P.405655/43/P.4.M.R.2

Our Ref: 2 MREU/2036/Air/H.236

CASUALTY ENQUIRY No. H236

1. Further to our report under this Casualty Enquiry number dated 20th of January last.
2. We have now been successful in tracing F/S LEGACE. He was washed ashore at SCHEVENINGEN (not VLISSINGEN) on 10th of July 1943 and buried as J.H.R. LAGACE RAF 55654 in the "Westduin" Temporary Military Cemetery, THE HAGUE, Grave No. 69 on 13th of July 1943.
3. We are taking 3372 action for F/S LEGACE, we have already taken this action for P/O GINGRAS, and we await your action regarding rank and name spelling of Sgt. DEVERILL.
4. In connection we recommend you pass this latter NCO's correct particulars direct to I.W.G.C. as the Canadian Cemetery at BERGEN OP ZOOM is now in their hands and there is no local representation.
5. There remains no trace of the two remaining crew members and we are afraid they must be considered lost at sea. Please comment.

?? Squadron Leader,  
Officer Commanding No.2 M.R. & E.Unit(Det)  
Royal Air Force - THE HAGUE - Holland.

Investigating Officer: - F/Lt. J.E.GROSVENOR.



# ORIGINAL

MF 82A  
192M-8-40 (6653)  
H.Q. 1772-39-1774

## LOI DE LA MILICE

Loi de Mobilisation de Ressources Nationales, 1940

64

# ENROLEMENT

MILICE ACTIVE NON PERMANENTE DU CANADA

345

NO. MATRICULE C422520

Pris à l'effectif de

Reg de Kuehl  
(Unité de la Milice)

1. Nom (Caractère d'imprimerie)

BINGRAS

2. Prénoms (au long)

GUY, RENE

3. Adresse actuelle

51 Broadway Gatineau

4. Lieu de naissance

annonciat

Date de naissance

1 nov 1918

5. Religion

R.C.

6. Profession

journaliste

7. Plus proche parent

père

Daniel Bingras  
(Nom et adresse)

8. Signalement: Taille

5-10

Poids

145

Yeux

Brown

Cheveux

Brown

9. Préférence, le cas échéant, pour le service de la Marine, de l'Armée, ou de l'Aviation (Donnez des détails, aptitudes, etc.)

3 Aviation

Daté ce

22

jour de

nov

1942

Centre d'instruction No.

44

(Signature de l'homme)

Rene Bingras

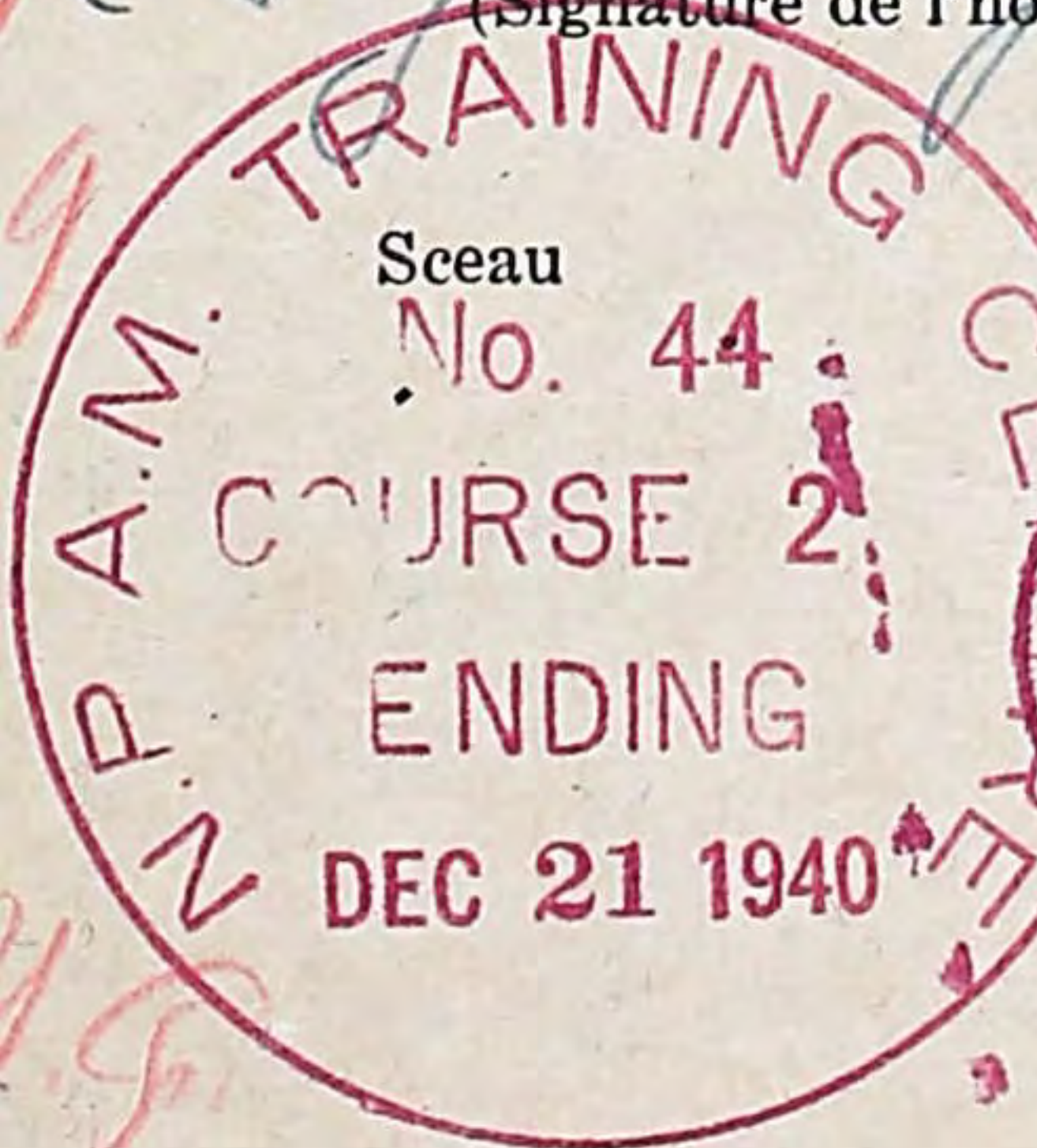
(Signature et grade de l'officier effectuant l'enrôlement).

J. Archambault Lt

Sceau

No. 44

Sceau du certificat d'instruction



Signature de l'officier apposant le sceau

J. Archambault

8922  
03  
11/18  
1  
091



E 9111

868

0945 hrs

42

med car A

hrs



# FORMULE D'EXAMEN MÉDICAL ET DE CERTIFICAT

MINISTÈRE DES SERVICES NATIONAUX DE GUERRE  
LOI DE 1940 SUR LA MOBILISATION DES RESSOURCES NATIONALES

REGISTRAR  
DIVISION "E"  
SEP 20 1940

Numéro d'ordre de l'avis d'appel:  
**E 9111**

Les registraires de division utiliseront ces formules pour dresser les copies de l'original de la formule d'examen médical et de certificat.

## PREMIÈRE PARTIE

Nom et prénoms **GINGRAS** **GUY**  
(Ecrire en lettres moulées) (Nom de famille) (Prénoms)  
Lieu de naissance **L'Amonciation** Province canadienne **P. Que** Date de naissance **1/11/1918**  
(ou autre pays)  
Résidence fixe **51 Broadway** **Catineau** **P. Que**  
(Numéro et rue) (Bureau de poste ou itinéraire de facteur rural) (Ville ou village) (Province)

Répondre aux questions suivantes par "oui" ou par "non".

Avez-vous déjà souffert de l'une quelconque des maladies ou affections suivantes?  
Rhumatisme? **non** Tuberculose? **non** Bronchite ou asthme? **non** Maladie de cœur? **non**  
Maladie du rein ou de la vessie? **non** Maladie de l'estomac ou des intestins? **non** Hernie? **non**  
Varices? **non** Maladie des pieds? **non** Maladie du nez? **non** des oreilles? **non** des yeux? **non**  
Crises épileptiques? **non** Maladie nerveuse ou mentale? **non** Syphilis? **non**  
Gonorrhée? **non** Avez-vous déjà porté des verres? **non** Vous a-t-on déjà rejeté comme inapte au service militaire? **non** Touchez-vous une indemnité ou une pension d'invalidité? **non** Si oui, de quelle source? **---**  
(Oui ou non)

Localité **Hull** Province **Que** Date **20/9/40**  
Signé: **Guy Gingras** Signature du sujet.

## DEUXIÈME PARTIE

Observations du médecin examinateur. (Anamnèse claire et concise de toute maladie ou affection déclarée ci-dessus) **Aucune**

Examen somatique (sur la peau nue)

1. Taille **5** pieds; **10** pouces. 2. Poids **148** livres.  
3. Teint **clair** Couleur des yeux **brun** 4. Constitution **vigoureuse**  
Couleur des cheveux **chatain** } Vigoureuse } Biffer les  
Moyenne } mentions  
Débite } inutiles. **(136)**  
5. Périmètre thoracique à l'ampliation maxima **35** pouces.  
Étendue de l'ampliation **2 1/2** pouces.  
6. (a) Acuité visuelle sans verres correcteurs: Œil droit **bonne 20/20** Œil gauche **bonne 20/20**  
(b) Si le sujet porte des verres, acuité visuelle avec verres correcteurs: Œil droit **---**  
Œil gauche **---**  
7. Acuité auditive: Oreille droite **bonne C.V. 20** Oreille gauche **bonne C.V. 20**  
8. Bouche et dents **bonne condition**  
Indiquer la nature et l'emplacement de toutes dents artificielles.  
9. Si le sujet est atteint de quelque invalidité, congénitale ou pathologique, qui le range dans une catégorie inférieure à "A", désigner ici, clairement et laconiquement, la nature de ladite invalidité.  
**Excellente condition**

## TROISIÈME PARTIE

Après avoir examiné le sujet précité, d'après les instructions relatives aux aptitudes physiques et à l'examen médical des recrues, je le certifie apte à être rangé dans la catégorie suivante:

Catégorie "A" **X** Signé: **Dr E. Ferras**  
" "B I" Signature (Médecin examinateur)  
" "B II"  
" "C I" Adresse **Hull, Que**  
" "C II"  
" "D" Date **20/9/40**  
" "E"

L'espace ci-dessous est réservé aux inscriptions par le Médecin militaire du Centre d'instruction

## QUATRIÈME PARTIE

Faire ici un relevé circonstancié de toute maladie ou invalidité dont il n'a pas été fait mention précédemment: —

*(Handwritten signatures)*  
Signature **---** Médecin militaire du Centre d'instruction militaire

Nom ou numéro du Centre d'instruction **C. 422520**  
Numéro dans la Milice active non permanente **44**

(Important — Voir au verso)



Station	Entré à l'hôpital le			Sorti de l'hôpital le			Maladie	N.B. — Indiquer s'il s'est agi d'une maladie grave ou bénigne et si la guérison a été complète. S'il s'est agi d'un accident, indiquer s'il y a eu Conseil d'enquête et, le cas échéant, la date où l'accidenté a reçu un appareil orthopédique ou prothétique.
	Jour	Mois	Année	Jour	Mois	Année		

### INSTRUCTIONS

1. Seul un médecin diplômé, autorisé à exercer sa profession au Canada et nommé par le ministre des Services nationaux de Guerre à la fonction de médecin examinateur conformément aux Règlements de 1940 sur les Services nationaux de Guerre (Recrues), aura qualité pour examiner le sujet et remplir la présente formule.

2. Le médecin examinateur est tenu d'examiner le sujet et de remplir la présente formule d'après les instructions relatives aux aptitudes physiques et à l'examen des recrues, instructions dont le ministre des Services nationaux de Guerre lui fournira un exemplaire.

3. Dès qu'il aura rempli la présente formule, le médecin examinateur la postera ou la remettra lui-même au registraire de la division administrative du ministère des Services nationaux de Guerre où réside le sujet. Le nom et l'adresse des registraires divisionnaires seront signalés aux médecins examinateurs par voie d'avis publiés dans les journaux ou, si possible, par lettre.

4. Le ministère des Services nationaux de Guerre versera chaque mois aux médecins examinateurs dûment nommés les honoraires fixés pour l'examen de chaque sujet. Aussi les médecins examinateurs s'abstiendront-ils de présenter toute note supplémentaire. La présente formule, dûment remplie, tiendra lieu et place de la note du médecin.

5. Dès qu'il recevra la présente formule, dûment remplie, le registraire de la division administrative où réside le sujet estampillera la date où la formule lui sera parvenue, et il en tapera, ou en fera taper quatre copies identiques, chacune revêtue de la date à laquelle l'original de la formule a été reçu du médecin examinateur. Chaque copie ainsi dressée sera certifiée conforme par le registraire de division ou par une personne nommée par lui à cette fin.

Le registraire de division conservera la première copie. Il en annexera une copie à la formule originale reçue du médecin examinateur, et expédiera aussitôt ces deux documents au ministère des Services nationaux de Guerre, à Ottawa. Il expédiera la troisième copie au représentant du ministère de la Défense nationale, et la quatrième — si toutefois le sujet a été déclaré apte à l'instruction militaire et avisé de se rendre à un centre d'instruction militaire — à l'Officier commandant du centre d'instruction militaire où le sujet aura reçu instruction de se rendre; autrement, le registraire de division conservera la quatrième copie dactylographiée.

6. Personne ne doit, sans autorisation, avoir en sa possession un exemplaire de la présente formule.

L'article 12 (3) des Règlements de 1940 sur les Services nationaux de Guerre (Recrues) se lit comme suit:

" Dans tous les cas où un doute peut s'élever sur le bien-fondé d'un certificat d'inaptitude à l'instruction militaire délivré par le médecin examinateur à l'égard d'un homme qu'il a examiné, le registraire de division pourra donner à l'intéressé un autre avis lui enjoignant de subir un autre examen; dans ce cas, l'homme se présentera aux temps et lieu indiqués par le registraire de division pour être examiné par trois médecins nommés par le Ministre. Ces trois médecins examinateurs examineront l'homme, et s'ils ne confirment pas le certificat donné par le médecin qui a procédé au premier examen, ils délivreront un autre certificat, qui sera définitif et probant."

L'article 36 des Règlements de 1940 sur les Services nationaux de Guerre (Recrues) se lit comme suit:

" Tout médecin examinateur qui, en fournissant des renseignements sous le régime des présents règlements, fait sciemment une déclaration inexacte ou signe un certificat inexact, sera coupable d'une infraction et passible, sur déclaration sommaire de culpabilité, d'un emprisonnement pour une période d'au plus six mois ou d'une amende d'au plus cent dollars, ou à la fois de l'emprisonnement et de l'amende."

Copie certifiée conforme à l'original.

Le registraire estampillera les quatre copies en indiquant le lieu et la date où les copies ont été dressées et certifiées conformes.

(Voir les Règlements de 1940 sur les Services nationaux de Guerre (Recrues))





R 143523











Gunig no. J.R.G.