J5342
FREELAND
JOHN ROY

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. J 5342
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 ...

CONFIDENTIAL

R.C.A.F. Special Reserve
INTAKE 7

ROYAL CANADIAN AIR FORCE

R.C.A.F. M. 2
5M—8-38
H.Q. 1062-10-2

FILE NUMBER

Medical Board held at Montreal, Quebec. *Date* 20-6-40

Surname FREELAND *Chr. Names* John Roy
Nature of Commission Aircrew. *Date of Birth* 24-8-18 *Married or Single* Single.
Branch *Hours Flown*
Address 2425 Madison Ave., Montreal, Quebec.

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 Tonsils out december 1938.
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 Left eye astigmatision
Wearing of Glasses for office work since a year.
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 Appendix, 1940, Tonsils 1938.
(x) Any Illness or Injury not mentioned above NO

Education Jr. matriculation. 2 years college.
Present Occupation bank teller. Hobbies none
Previous Service Black Watch 1939.
Athletics football, hockey, ski, swim, riding,
Habits—Smoking c.10 Alcohol no
FAMILY HISTORY—Consumption no
Nervous Ailments, Mental Trouble, or "Fits" no
Father Alive—Health goood Dead—Cause
Mother Alive—Health good Dead—Cause
Brothers (....) Alive—Health (1) Dead—Cause appendicitis.
Sisters (2..) 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 20-6-40 *Signature* J R Freeland. *Witness*

GENERAL MEDICAL AND SURGICAL EXAMINATION

Impression given by *(a)* Physique....fair....*(b)* Mentality....average.....
Body Marks, Scars, Deformities....freckles., appendectomy scar.....
Size of Thyroid Gland....normal.....
Surgical Abnormalities....nil.....
Results of Wounds, Injuries, Operations....appendectomy scar.....

		Date 20-6-40	Assessing Room	Date 22-7-40	Assessing Room	Date	Assessing Room	Remarks on any Abnormalities Found
Height (ins.)		70¾						*Date*.....
Weight (lbs.)		140						
Chest Circumference (ins.)		35½						
Body Build (lbs.)		151						
Leg Length (ins.)								
Pulse Rate	Sitting	84						
	Standing 1st	96						
	Standing 2nd	84						
	After Exercise	120						
	Time to Normal	20						
Arterial Walls		N						
Blood Pressure	Systolic	138						
	Diastolic	80						
Heart	Size	N						
	Sounds	N						
	Rhythm	reg.						
Lungs		N						
Breath held		115"						
Expiratory Force		140						
Vital Capacity (Best of 5)		240 cu. inch.						*Date*.....
Reflexes	Knee	Nx.						
	Ankle	n						
	Triceps	n						
	Abdominal	ex.						
	Plantar	flex.						
Cranial Nerves		n						
		R. L.	R. L.	R. L.	R. L.	R. L.	R. L.	
Balancing Rod		S S						
		R. L.	R. L.	R. L.	R. L.	R. L.	R. L.	
Self Balancing		Sl Sl						
Tremors	Fingers	nil						*Date*.....
	Eyelids	nil						
Abdomen	Liver	N						
	Spleen	N						
	Muscular Tone	good						
Urine	Albumen	yes.		neg.				
	Sugar	neg.		neg.				
Initials of M.O.		[illegible]						

40 mm. Hg. Test....70"-6/788/888/767/677/77.....
Date.....
Date.....
Date.....
Date.....

Remarks by Consultant.

EYE EXAMINATION

History	Glasses for office work since a year.		
Visual Acuity R.	$^{20}/_{20}$, c ~~20/25~~ corrected to	20/20	20/20
Visual Acuity L.	$^{20}/_{50}$, c corrected to	20/20	20/20
Colour Vision	Ishihara normal.		
Red, Green	R. temporary neglect red	L. exo $2\frac{1}{2}$ inch.	
Diaphragm Test (P.D. = 60)	bars at 5.		
Convergence C. =	7 cms.		
Convergence S. C. =	12 cms.		
Accommodation R.	13		
Accommodation L.	$13\frac{1}{2}$		
Cover Test	R. L. div. R.R.		
Fundi and Media	N		
Fields	N		
Remarks: borderline.			
	Initials of M.O. D	*Initials of M.O.*	*Initials of M.O.*
	Date 20-6-40	*Date*	*Date*

EXAMINATION OF EAR, NOSE AND THROAT

History: Tonsils out 1938.

Hearing	R. Ear	W.V. 20		
	L. Ear	W.V. 20		
External Ear, Meatus Membranes	R. Ear	N		
	L. Ear	N		
Middle Ear, Eustachian Tubes	R. Ear	Patent		
	L. Ear	Patent		
Cochlear Apparatus	R. Ear	N		
	L. Ear	N		
Vestibular Apparatus	R. Ear	N		
	L. Ear	N		
Buccal Cavity		clear.		
Teeth		9 fillings healthy clean.		
Gums		N		
Pharynx		N		
Nasopharynx		N		
Nose		Patent		
Larynx		N		
Remarks:		*Initials of M.O.* D	*Initials of M.O.*	*Initials of M.O.*
		Date 20-6-40	*Date*	*Date*

HISTORY OF PRESENT CONDITION

Date 22-6-40

Albumen positive. Yours Despin Lt

22-7-40 Urine negative. Yours Despin Lt

eyes re-check 20/20, 20/35. Yours Despin Lt

OBSERVATIONS AND FINDINGS BY PRESIDENT OF BOARD

Date 22-6-40

Category A.T.B.T.

Yours Despin Lt
C Tan Lt

22-7-40 Category A1B.

3/9/40 Reclad IV. A1D Authafin Lt. Yours Despin Lt
C Tan Capt

MEMORANDUM FOR P. 64

Mr. J.A. Freeland,

2425 Madison Avenue, N.D.G

Montreal, P.Q.

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

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

and the following number quoted:—

H.Q. J.5342 FD 278

DEPARTMENT OF NATIONAL DEFENCE
OTTAWA, ONT.

April 18 1942

For the purpose of record and in the event of there being any balance of pay, medals or memorials available for distribution (according to law) on account of the late

FREELAND, John Roy, P/O

No. J.5342, R.C.A.F. att. R.A.F. Overseas.

it is necessary that the requisite information regarding the deceased and his relatives should be furnished on the inside of this form in strict accordance with the printed instructions. The particulars required are to be carefully filled in and the Declaration on the back should then be signed in the presence of a Clergyman, Priest, Local Magistrate, Commissioner for Oaths or Notary Public, who should be asked to complete and sign the Certificate. This form should then be returned to the above address.

(N.O. Seagram) F/L
for (L.M. Firth) Major,
Administrator of Estates.

M.F.W. 77
5M—9-41 (1669)
H.Q. 1772-39-972

ESTATES BRANCH
APR 29 1942
H.Q.
OTTAWA.
NATIONAL DEFENCE

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 inquired for	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		—		—
2	Children of the Deceased and dates of their Births		—		—
3	Father of the Deceased		J. A. Freeland	61	Tennis Kamming P.Q
4	Mother of the Deceased		Etta Tasker Freeland	55	"
5	Brothers of the Deceased	Full Blood	—		—
		Half Blood	—		—
6	Sisters of the Deceased	Full Blood	Mrs. John S. Stephens Maricita L. Freeland	31 21	Tennis Kamming P.Q. "
		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
	Andrew Gordon Freeland. Sept. 14, 1915.		~~Andrew Gordon Freeland Sept 14 1915~~		—

ONLY IF NO RELATIVES IN THE DEGREES ABOVE ARE NOW LIVING, THE FOLLOWING PARTICULARS SHOULD BE GIVEN

	—	NAMES OF THOSE LIVING	Age	ADDRESS IN FULL
8	Grand-Parents of the Deceased			
9	Uncles and Aunts by blood of the Deceased (not Uncles and Aunts by marriage)		Age	

FULL PARTICULARS AS TO IDENTITY

10	What is the full name of the deceased?	John Roy Freeland
11	Give the month and year of his birth.	Aug. 24 - 1918
12	Where and when were his parents married?	Quebec, P.Q. June 1-1909
13	If deceased was married, state place and date of marriage.	—
14	Did he leave a Will? If so, a copy should be attached hereto.	?
15	Did he leave a bank account? If so, give full particulars. Sept.8.41 - 11.18-7 Cox's & King's No further statement from Lloyds re this account.	Any Royal Bk of Canada Sherbrooke & Hampton Lloyds Bank Ltd Br. London, Eng. Montreal
16	Is there any other estate which will necessitate application being made for Probate of the Will or Letters of Administration of the estate?	
17	State *your own* postal address in full.	Temiskaming P.Q.

PARTICULARS OF DOMICILE

18	Where was deceased born?	Toronto, Ont.
19	State, in order, the Province (or State) and country in which the deceased resided and the period of time in each, and in which last.	1 Ontario 2 mos. & Quebec 19 yrs 3 mos. 2 N.Y. State 6 " 3 Ontario 3 yrs. 5. Ontario 1 mo.
20	What was the nature of his employment?	Bank Clerk
21	Did he own the premises in which he lived? If so, where?	—
22	Did he ever state verbally, or in writing, where he intended to make his permanent home?	—

OTHER PARTICULARS

23	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.	—
24	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, 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 the foregoing particulars are correct, and a true and complete statement of all the relatives that the deceased ever had in the degrees inquired for ; and that I am the

*Father .....of the deceased.

N.B. To be signed in full in the presence of a Clergyman, Priest, Local Magistrate, Commissioner or Notary Public.

J. A. Freeland ..... {Signature of Informant}

CERTIFICATE

I hereby certify that, to the best of my knowledge and belief J. A. Freeland — .....

*See above Informant .....{Name of Informant} is the *Father .....of the Deceased above described, and I believe the above Declaration and the Statement of Relatives made by the Informant and signed in my presence to be complete and correct.

Dated at Montreal this 27th day of April 1942

Signature of Clergyman, Priest, Magistrate, Commissioner or Notary Public } C. O. Reippenstein ..... Qualification Commissioner of the Superior Court for the District of Montreal

Address 276 St. James St. West Montreal.

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 enquired after is stated in its proper place in the Statement opposite.

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

R.C.A.F. Special Reserve — Air Crew (Pilot or Observer) — 2

AIR FORCE NO. R56-390 POSTED TO No 1 Manning Depot, Toronto, Ont. TRADE

ROYAL CANADIAN AIR FORCE

(ATTESTATION PAPER)

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

1. Surname Freeland (Friedland) FULL Christian Names John Roy
2. Present Address 2425 Madison Ave., N.D.G. Montreal Telephone DE-8938
3. Permanent Address 2425 Madison Ave. Montreal P.Q.
4. Place of Birth Toronto, Ont Citizenship Canadian
5. Date of Birth August 24, 1918. ~~Married~~, Single, ~~Widower, Separated, Divorced~~ Single
6. Particulars of Children NIL

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

7. Occupation Bank Teller 8. Religion Protest. Presbyterian (State denomination)
9. Languages English — French — not fluent (State proficiency)
10. Next of Kin (Full Name) John Anderson Freeland Relationship Father
" Address 2425 Madison Ave., N.D.G., Montreal
11. Father (Full Name) John Anderson Freeland Birthplace Almonte, Ont.
" Address 2425 Madison Ave. Montreal Que Citizenship Canadian
" Occupation Civil Engineer
12. Mother (Full Maiden Name) [redacted] Etta Yanker nee Birthplace Quebec City P.Q.
" Address 2425 Madison Ave. Montreal Que Citizenship Canadian
13. Details of any Naval, Military or Air Force Service:

Unit	Place	Rank	Trade	Date From	Date To	Reason for discharge
The Black Watch	Mtl.	Associate		Nov '39	Sept 39	Ineligible

14. Honours, Awards, Mentions N.A.
15. Are you now on any Naval, Military or Air Force Reserve? No
16. Have you previously made application to join the R.C.A.F.? No If so, where? NA
When? — NA Result — NA
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 P
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 —

R.C.A.F. Records Office
Rec'd SEP 10 1940
O. K. O.I.B.
R. C. N. I.
S. L. P. A.

R.C.A.F. Form R. 100
100M—2-40 (3924)
H.Q. 1062-3-83

13-171 ECR

21. Particulars of Education:

—	Name of school	Date From	Date To	Courses—Subjects, etc.
Primary Education—Public or Separate School	ELIZABETH BALLANTYNE Montreal West	1924	1931	General
High School—Collegiate Institute, etc.	MONTREAL WEST "	1932	1935	Academic Course
Technical School	N.A.			
University or School other than above	N.A.			
Correspondence Courses, etc.	QUEEN'S UNIVERS. Kingston Ont.	1937	1938	Banking — (Commence)

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

Employer and place	Duties, trades, positions	Date From	Date To	Reason for leaving
Imperial Bank of Canada, Montreal P.Q.	Teller	1935	1940	R.C.A.F.

23. Flying Experience (in Hours) Solo N.A. o Dual N.A. o Passenger N.A. o

24. Special Qualifications, Hobbies, etc., useful to the R.C.A.F. my experience in banking useful in Administration

25. Sports engaged in. State: extensively, moderately, occasionally Tennis, swimming, skating — EXTENSIVELY — Golf, hockey, baseball — MODERATELY —

26. Air Force Duty you wish to enlist for ~~Ground Duties.~~ Flying Duties. / Pilot - Observer

If for Ground Duties, state Air Force trade in which you wish to enlist N.A.
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
Lt.-Col. the Rev. A. MacGORDON	106 St. Ann St. Montreal West Que	Minister
A. B. Shearn Esq	Imperial Bank, Montreal	Bank Manager
S. S. Mason	c/o Montreal West High School — Montreal West P.Q.	Principal
C. A. de Blaquiere	c/o Canadian Commission — Montreal Que	Civil Engineer

28. Other information that may have any bearing on this application As Canada is at war, I feel it my duty and my desire to ~~join~~ apply —

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 June 1 — 1940 Signature J. R. Freeland

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, John Roy FREELAND 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 September 5th, 194⁰. J. R. Freeland.
Signature of Recruit

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

I, John Roy FREELAND do sincerely promise and swear (or solemnly declare) that I will be faithful and bear true allegiance to His Majesty.

Date September 5th, 194⁰. J. R. Freeland.
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, Que. this 5th, day of September 19 40.

P. O. Gathois Lt. ROYAL CANADIAN AIR FORCE

Signature of Officer — Rank — Unit

FOR OFFICIAL USE ONLY

CERTIFICATE OF MEDICAL EXAMINATION

Part 1. Information obtained from the applicant—

1. Age. 21 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	no

3. Have you ever worn glasses? For office work since a year

J. J. Sweeland
Signature of Applicant

Examiner's Remarks *re* above

BP 135/80 Heart Lungs Abdomen Urine.

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

1. Identification marks or scars (if operative obtain history)

2. Height 5 feet 10 3/4 inches. 3. Weight 170 pounds.

4. Complexion fair 5. Color of Eyes blue Hair blond

6. Development {Good / Fair / Poor} 7. Chest Measurement—Full expiration 33 inches

Range of expansion 2 1/2 inches

8. Hearing—Right W.N.20 Left W.N.20 Tympana—Right N Left N

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

Left 20/35 Left 20/20

Colour vision Normal

10. Condition of mouth and teeth 9 fillings

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 A1B

Any special remarks of the Medical Officers 3/9/40 Recheck N. No change in Cond. - Qualified
4-9-40 X-Ray No 60113 Negative J.R. Rodwell Lt. J.R. Rodwell Lt.

Date 22/7/40 19

President Member Member

12

J5342
AM
2

The Black Watch (Royal Highland Regiment) of Canada

CERTIFICATE OF DISCHARGE

This Certifies that Pte. (NO. RANK) J. R. Freeland (NAME)
of Montreal Dominion of Canada
served continuously in The Black Watch (Royal Highland Regiment) of Canada
from the 3rd day of April 1939, to the 13th
day of September 1939, on which date he was discharged therefrom.

M. G. Tellier Major
..... Co., ... Bn., B. W. of C.

Dated at Montreal
this 3rd day of Sept. 1940

..... Lieut.-Col.
Commanding ..... Bn., B. W. of C.

R.C.A.F. Records Office
Rec'd SEP 10 1940
O. C.I.B.
R. C. N. I.
S. L. P. A.

FORM 6

DOMINION BUREAU OF STATISTICS—QUEBEC DEATH TRANSCRIPT

Do not write in this space

1. PLACE OF DEATH

Municipal county: OVERSEAS(ENGLAND) | 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: FREELAND (Block letters)

Given names: John Roy

4. RESIDENCE

Street: Madison Ave., No. 2425

Official name of civil municipality or township: Montreal,

Municipal county: Province: P.Q.

5. SEX	6. NATIONALITY (Citizenship)	7. RACIAL ORIGIN	8. Single, Married, Widowed or Divorced (Write the word)
MALE	CANADIAN		SINGLE

9. If married give name of wife or husband of deceased:

10. BIRTHPLACE (Province or Country): Toronto, Ont.

11. DATE OF BIRTH: August (Month) 24th (Day) 1918 (Year)

12. AGE OF DECEASED	Years	Months	Days	If less than one day old
	23	1	5	....hrs. or....min.

OCCUPATION

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

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

15. Date deceased last worked at this occupation: 29-9-41

16. Total years spent in this occupation: 1

	17. NAME	18. BIRTHPLACE (Province or Country)
FATHER	John Anderson FREELAND	Almonte, Ont.
MOTHER (Maiden Name)	Etta Yarker LOVE	Quebec, P.Q.

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)

CONFIDENTIAL MEDICAL CERTIFICATE OF DEATH

22. Date of death: September (Month) 29 (Day) 19 41 (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) Missing after flying operations, now for official purposes presumed to have died.

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: Accident (State which) Date: Sept. 29 19 41

Manner of injury.... (How sustained)

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.)

S C Mitchell F/L
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)

10/4/42

R.C.A.F., H.Q., Ottawa.

[redacted]3/41/P.4.(A).

10 December, 1941.

Sir,

I am commanded by the Air Council to express to you their grave concern on learning from the Casualties Officer of the Royal Canadian Air Force that, in view of information now received from the International Red Cross Society, your son, Pilot Officer John Roy Freeland, is believed to have lost his life as the result of air operations on 29th September, 1941.

The Society's telegram, quoting official Italian information, states your son and another occupant of his aircraft were killed near Turin on that day and were buried in the Cemetery Orbassano, Turin.

Although there is unhappily little reason to doubt the accuracy of this report, it will be necessary to record the casualty as "missing, believed killed" until

/confirmed

J.A. Freeland, Esq.,
2425, Madison Avenue,
Notre Dame de Grace,
Montreal,
Quebec,
Canada.

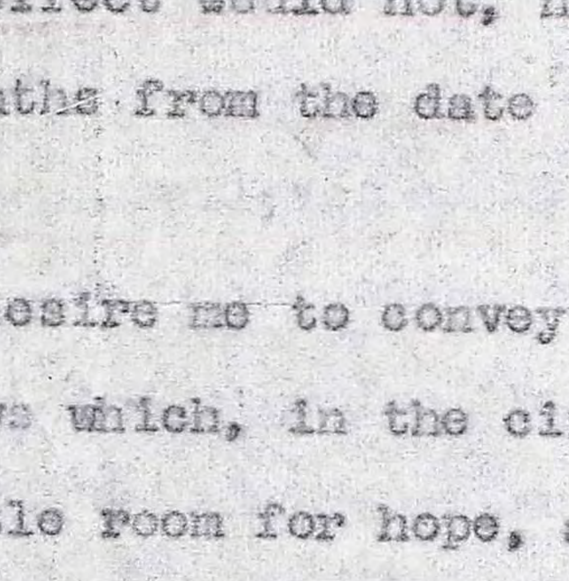
confirmed by further evidence, or until, in the absence of such evidence, it becomes necessary, owing to lapse of time, to presume for official purposes that death has occurred. Action to that effect would not, however, be taken until at least six months from the date when your son was reported missing.

The Air Council desire me to convey their great regret on receiving this news which, in the circumstances, unfortunately leaves so little room for hope, and to express their deep sympathy with you in your grave anxiety.

I am, Sir,

Your obedient Servant,

(Sgd.) CHARLES EVANS.



R.C.A.F. Special Reserve

To be made out in duplicate

M.F.M. 5
100M—6-40 (5453-4)
H.Q. 1772-39-1651

PARTICULARS OF FAMILY OF AN OFFICER OR OTHER RANK OF THE C.A.S.F. OR R.C.A.F. (ON ACTIVE SERVICE)

INSTRUCTIONS.

(*a*) This form is to be completed immediately an officer or other rank is appointed to, or enlisted in, the C.A.S.F. or R.C.A.F. (ON ACTIVE SERVICE).

(*b*) All questions, etc., must be completed.

(*c*) Both copies of the form are to be forwarded by the Officer Commanding the unit for each officer and other rank, to the Paymaster, or Officer acting as such. The latter will transmit one copy, through the District, Command, or Camp Paymaster, to the Officer i/c Records, N.D.H.Q., Ottawa. The other copy will be retained by the Paymaster of the unit, when transferred to another unit the copy retained by the Paymaster will be sent to the Paymaster of the individuals new unit.

---

(1) Name of Officer of Other Rank John Roy FREELAND
(Surname first—Christian names in full—Block capitals)

(2) Regimental or Air Force Number and Rank R56-390

(3) Unit ROYAL CANADIAN AIR FORCE

(4) Are you married? NO

(5) If married, state,

(*a*) Full name of your wife N.A.

(*b*) Present postal address of wife N.A.

(6) If married, have you been regularly supporting your wife? If not—state reasons N.A.

(7) Are you a widower? N.A.

(8) Have you any children? N.A. Number of boys N.A. Girls N.A.

Names and ages N.A.

(9) If Dependents' Allowance is claimed in respect of children—state whether you have been regularly supporting them N.A.

Give particulars of Guardian to whom Dependents' Allowance should be paid—if authorized.

Name N.A.

Postal Address N.A.

[SEE OTHER SIDE]

(10) Have you a common-law wife—whom you have been regularly supporting and publicly representing as your wife for at least 2 years immediately prior to appointment or enlistment? NO

If so, state her full name and Postal Address N.A.

(11) Is your father alive? YES.

If so, state name and address, occupation John Anderson FREELAND

2425 Madison Avenue, Montreal, Que. Civil Engineer.

(12) If your father is a widower and is totally incapacitated from earning a living—are you his sole or partial support? NO

(13) If sole or partial support of father who is a widower, totally incapacitated from earning a living —state what amount per month you have given him prior to appointment or enlistment. N.A.

Also state reason he has no other means of support if partially supported by you, what is your reason for not providing full support? N.A.

(14) Is your mother alive? YES.

If so, state name and address Mary Etta Yarker (LOVE) FREELAND

2425 Madison Avenue, Montreal, Que.

(15) If your mother is a widow, are you her sole or partial support? NO

(16) If sole or partial support of widowed mother—state what amount per month you have given her prior to appointment or enlistment N.A.

Also state reason why she has no other means of support, if partially supported by you what is your reason for not providing full support? N.A.

(17) Are you contributing to the support of any dependents, other than those shown above? NO
This may include any brothers 16 years of age or under, or any sisters 17 years of age or under, solely supported and maintained as bona fide members of your household before your appointment or enlistment.

If so, state the following particulars:—

Relationship N.A.

Full Name N.A.

Postal Address N.A.

Amount contributed monthly during the past six months N.A.

(18) Are you insured? YES.

If so, in what Company? MUTUAL LIFE ASSS CO. Number not known.
(Give number of policy)

Have you made arrangements for payment of your Insurance Premium? YES.
If not, and it is a monthly premium, you may assign the amount in addition to any other assignment you wish to make, provided the total assignment is not in excess of the maximum monthly amount which may be assigned.

I hereby certify that the information given by me on this form is correct in each and every particular.

J.H. Freeland.
(Signature of officer or man)

Date September 5th, 1940.

---

for (A.B. Matthews) Flt. Lieut.
Officer Commanding

Date September 5th, 1940. R.C.A.F. Recruiting Centre, Montreal, Que.

N.B. If parent(s) of the officer or other rank concerned has (have) been replaced by foster parent(s), questions relating to fathers and/or mothers above should be altered and answered as applicable.

5

R.C.A.F. Special Reserve

R.C.A.F. Special Reserve

Interview Report

~~Non-flying list~~

Air Crew

~~Administration~~
~~Technical~~
~~Equip. & Accounts~~
Pilot
~~Observer~~
~~Wireless Op. Air.~~
~~Air Gunner~~

SURNAME	CHRISTIAN NAMES IN FULL	
FREELAND	John Roy	

Age 21
Height 6'0"
Weight 148
~~Married or~~ Single
~~No. of Children~~

ACADEMIC STANDING:

Junior Matriculation at Montreal West High School.
2 years Banking, Commerce at Queens' University, Kingston.-
Good academic standing.---

FLYING HISTORY (PARTICULARLY DURING LAST YEAR)

No flying history whatsoever.-

EXPERIENCE AND TRAINING (INCLUDING MILITARY) USEFUL IN THE R.C.A.F.

6 months as a private with the Black Watch.
Also cadet training at school.-
Is at present a teller with the Imperial Bank of Canada.
in Montreal, Quebec.--Has had five years experience with this Bank.

SPORTS:
EXTENSIVELY: tennis, swimming, skating. riding, skiing.-
MODERATELY: Goff, hockey, baseball.-
OCCASIONALLY: Boxing.

HOBBIES:
Radios, repairs and building.--
Automobiles.
Stamp collecting.-

APPEARANCE
HEALTHY-~~RUGGED~~-SLENDER and wiry
TALL-~~MEDIUM-SHORT~~
REFINED-~~ORDINARY-COARSE~~
CLEAN - ~~UNTIDY--DIRTY~~

DRESS: ~~FLASHY~~-TASTEFUL-CONSERVATIVE
~~POORLY DRESSED BUT~~ CLEAN AND
NEAT-SMART-~~UNTIDY-CARELESS~~

INTELLIGENCE: QUICK - DELIBERATE - ~~SLOW~~
ORGANIZED-ACCURATE-~~RAMBLING~~

PERSONALITY: ~~DOMINEERING~~-CONFIDENT-
~~SUBMISSIVE~~-MATURE-
~~IMMATURE~~-PLEASANT-
~~MOROSE-BELIGERENT~~

SUITABLE IN ALL RESPECTS FOR SERVICE IN R.C.A.F.....YES YES/~~NO~~

FULLY QUALIFIED IN PERSONAL RESPECTS FOR COMMISSIONED RANK...YES X ~~NO~~

INFORMATION ELUCIDATED FROM INVESTIGATION IN ACCORDANCE WITH A.F.M. 6/1 Para.1 (b)

Very recommendable.

SUMMARY OF ALL OF THE ABOVE:

Very intelligent chap, quick and knows what he wants. Would make a good Pilot as well as observer.-Would prefer Pilot, but will take observer if it accelerates his entry in the service. Clean-cut and neat. Good appearance and organized. I should recommend him highly.

~~EXCELLENT~~
ABOVE AVERAGE
~~AVERAGE~~
~~BELOW AVERAGE~~
(Strike out words not applicable)

RECOMMENDED FOR:

Air Crew
Pilot

R.C.A.F. Records Office
Rec'd SEP 10 1940
O.K. C.I.B.
R.C. N.I.
S.I. P.A. welfare

DATE: 12/9/40

RECRUITING CENTRE: OFFICER COMMANDING, R.C.A.F. RECRUITING CENTRE, MONTREAL, - QUEBEC.

SIGNATURE OF OFFICER: (M.Janin) F/O

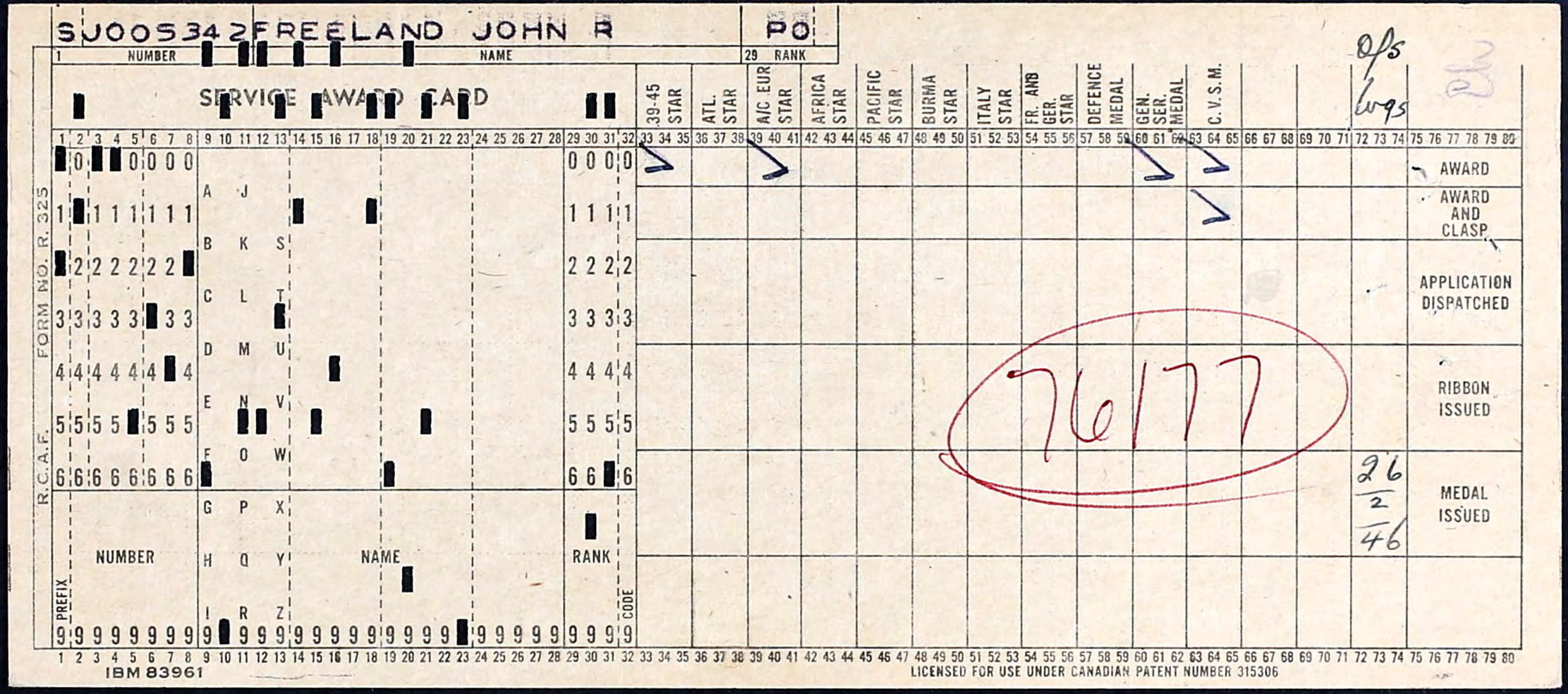
A.F.M.5

John A. Freeland, (Father)
Box 9,
Temiskaming,
P.Q.

~~Nov.-45.~~
Nov. 49

718. 24-11-49

MEMORIAL BAR
DATE DESP
REGN. NO 1246


SJ005342 FREELAND JOHN R
1 NUMBER
NAME
29 RANK
PO
SERVICE AWARD CARD
R.C.A.F. FORM NO. R. 325
NUMBER
NAME
RANK
PREFIX
CODE
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.
AWARD
AWARD AND CLASP
APPLICATION DISPATCHED
RIBBON ISSUED
MEDAL ISSUED
76177
26/2/46
IBM 83961
LICENSED FOR USE UNDER CANADIAN PATENT NUMBER 315306

MINISTERIAL CARD ROYAL MESSAGE MEMORIAL CROSS

10M—3-40 (4425)
H.Q. 1772-45-8

H.Q. FILE NO.

NAME FREELAND, John Roy

REGT'L NO. J5342

RANK Pilot Officer UNIT Overseas (xxxxxxxx)

CABLE NO.	CABLE DATE	NATURE OF CASUALTY	CAS. LIST NO.	CAS. LIST DATE
DATE OF ~~DEATH~~	29-9-41	IS MOTHER LIVING? Yes / IS WIFE LIVING? Nil		
MINISTERIAL CARD SENT:	4-10-41	ROYAL MESSAGE SENT: 13-5-42 / MEMORIAL CROSS SENT: 30-4-42		
To father same address		To the father. / To the mother.		
Fatal - 16-4-42				
		PRESUMED DEAD - Cas.List. 9-4-42		
		(John Anderson)		
		Father: Mr. J. A. Freeland, 2425 Madison Avenue, Montreal, Quebec. / New address; Temiskaming, P.Q.		

AIR FORCE No. R56390

Freeland John Roy
SURNAME FULL CHRISTIAN NAMES

ENLISTMENT RE-ENLISTMENT
PLACE Montreal, Que
DATE 5-9-40

C.R. FILE NUMBER SR

J.5342 SJ

RECORD OF SERVICE AIRMEN

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

Commissioned 17-5-41

7. BIRTH: DATE 24-8-18 PLACE Toronto, Ont CITIZENSHIP British 2

FATHER (FULL NAME) John Anderson Freeland

BIRTHPLACE Almonte, Ont.

MOTHER (FULL MAIDEN NAME) Etta Yonker Love

BIRTHPLACE Quebec City

8. EDUCATIONAL STANDING

HIGH SCHOOL ENTRANCE X Que

JUNIOR MATRICULATION X Que

SENIOR MATRICULATION

TECHNICAL SCHOOL

UNIVERSITY 1937-38 Banking, Ont. Queen's Univ

CORRESPONDENCE COURSES

6

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

Bank teller 5 years 1935-40
Imperial Bank of Canada

8300

10. PREVIOUS ARMY, NAVY OR AIR FORCE SERVICE

Black Watch, Montreal April-1939 to Sept, 1939 - 6 mos.

6

11. HONOURS-AWARDS, MENTIONS

	AUTHORITY	DATE
Pilots' Flying Badge	13F 130	16-5-41

12. FLYING EXPERIENCE ON ENLISTMENT (HOURS)

SOLO — DUAL — PASSENGER —

13. RELIGION Presbyterian 4

14. LANGUAGES English, French, not fluent. 1

15. SPORTS tennis, swimming, skating, golf, hockey, baseball.

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

WIFE (FULL MAIDEN NAME)

PLACE OF MARRIAGE DATE

AUTHORITY (IF AFTER ENLISTMENT)

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: John Anderson RELATIONSHIP Father
ADDRESS: P.O. Box 9, D.R.O. L.Rd 28/3/46
FULL NAME: Temiskaming P. Que 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.
Duration	5 9 40				

22. TEMPORARY DUTY AND MISCELLANEOUS ENTRIES

FROM	TO	DATE	D.R.O.
Attached to 4BGS	goit gtrs & rations	25-10-40	4BGS1
Ceased to be attached		28-11-40	4BGS19

A.P.E. 2425 Madison Ave, ~~Freeland~~ Montreal, Que.

22302

23. DOCUMENT CONTROL (INDICATE RECEIPT BY DATE)

R60	R79	B465	X-RAY	AFM-13	IDN. CARD	
24-9-40		10-9-40				KX

AIR FORCE No. R56390

SURNAME FREELAND, FULL CHRISTIAN NAMES JOHN ROY

ENLISTMENT PLACE Montreal, Que DATE 5-9-40

C.R. FILE NUMBER

J5342 **OFFICER** RECORD OF SERVICE AIRMEN 13

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.)

S.O.S. OR T.O.S.	UNIT AND PLACE	EFFECTIVE			D.R.O.
T.O.S.	1 M.D Toronto	6	9	40	1 MP 214
S.O.S.	1 M.D to 1 T.C. Toronto	10	10	40	1 MP 253
S.O.S.	1 T.C. to 4 B & G Dingal.	8	11	40	1 T.C 125
S.O.S.	4 B & G Toronto	28	11	40	4 B&G 14
T.O.S.	1221 Toronto	29	11	40	1221 223
S.O.S.	1221 Toronto	3	1	41	1221 4
		amended by			11 E R 5
T.O.S.	11 E.T. Cap de Madeleine	5	1	41	11 E R 2
S.O.S.	11 E R Coop. de Mad.	4	1	41	11 E R 5
S.O.S.	11 E R " " "	21	2	41	11 E R 11
T.O.S.	4 M D Quebec	21	2	41	4 M D 45
S.O.S.	4 M.D.	5	3	41	4 M.D. 58,68
	& S.F.T.S. Moncton				
S.O.S.	4 M.D. Quebec	5	3	41	4 M D 68
T.O.S.	1871 Camp Borden	6	3	41	1 SF 46
		amend.			1 SF 96
S.O.S.	1 S.F.T.S. Camp Borden	16	5	41	1 SF 94
	1 M Depot Halifax N.S.				
S.O.S.	1 S.F.T.S. Camp Borden	17	5	41	1 SF 95
	1 M.D Depot Halifax N.S.				
	Embarked Canada to O.S.	19	6	41	
20.9.41	COMPLETED	16	5	42	
	Previously reported Missing Now				
	& for Official Purposes presumed dead	29	9	41	POR 19.17 AFRO 567/42
	Operational - Flying Accident - Overseas				
	Primary - Cont'l Europe - 2 Sqn Ldr X6602				d/30.9.41
	Off Presumed Dead	Sgt P/5834			d/7-4-42
W.D.G.	Computed	25	9	44	
	1 R.A.F. Depot	29	9	41	9 Sqn POR 41

2. RECLASS'NS-PROMOTIONS-ETC.

RANK	EFFECTIVE			D.R.O.
A/C 2	5	9	40	1 MP 214
L.A.C.	3	1	41	1 J 54
T/Sgt (P.D.)	16	5	41	A.F. 94
Pilot Officer	17	5	41	E.M. 101
T8				
P.O.	17	5	41	

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.
3-9-40	R 100	A I B.	
St. Hosp	25-3-41	26-3-41	1 SF 60, 62

4. TRADE AND CHARACTER

TRADE	GROUP	EFFECTIVE			D.R.O.
P. O.	8	5	9	40	1 MP 214
Pupil Pilot	Spec	16	5	41	A.F. 94
102					1
G & S R (P)	17	5	41		
TRADE PROFICIENCY	CHARACTER ASSESSMENT			DATE OF R41	

5. COURSES-TESTS-ETC.

SUBJECT	RESULT	DATE			AUTHORITY
Relative Course 22	68.96	16	5	41	1 SF 78A

6. LEAVE

FROM	TO	DAYS	REMARKS	D.R.O.
~~2-2-41 (from M.D.)~~				11 E 244
21-2-41	3-3-41	10		4 M D 45
~~Reporting 5-3-41 to 5 M D~~				11 E 244
21-2-41	5-3-41			11 E 211

RELIGION: 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 | PREV. SERV. | PROVINCE OF ENLISTMENT | DISCHARGE | AC

ROYAL CANADIAN AIR FORCE

RECORD OF SERVICE AIRMEN

R 56390 — A.F. No.
Freeland — Surname
5342 — (struck through)
John Roy — Christian Names
Pres — Religion

Born 24.8.18 Place Toronto Country Ont. Citizen of — Racial Origin

ENLISTMENT	CIVIL EDUCATION	PREVIOUS SERVICE
Date 5.9.40	High School Entrance — Jr. Mat. Yes — Sr. Mat.	Black Watch Pte.
At Montreal	Technical School — Corres. Courses	3.4.39 — 13.9.39
Term Duration	University	

RANK	DATE	Med. Cat.	Date
AC 2	5 9 40	ATBT	20 6 40
LAC	3 1 41	A1B	22 7 40
Sgt (TP)	16 5 41	A1B A3B	30 11 40

CIVIL OCCUPATIONS AND EXPERIENCE

Bank Teller

COURSES AND TRADE TESTS

Trade	Grp.	%	PorF	Date Rem.	Trade	Grp.	%	PorF	Date Rem.
Fireview	Sgt	68.86	P						

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. John Anderson Freeland (Father) 2425 Madison Ave Montreal.

LEAVE

FROM	TO	AUTH. AND DESCRIPTION
21.2.41	5.3.41	Spec. Completion Course

CHARACTER AND TRADE ASSM. HONOURS, AWARDS AND MENTIONS

DATE	CHARACTER	TRADE AND ASSM.	HONOURS AND AWARDS	SIGNATURE

MOVEMENTS AND CASUALTIES

AUTHORITY	UNIT FROM	UNIT TO	DATE	AUTHORITY	UNIT FROM	UNIT TO	DATE
M.O. 13	Montreal	Toronto	5.9.40				
DRO 239	1 MD Toronto	1 ITS Toronto	10.10.40				
" 125	1. ITS	4 B&G Fingal	8.11.40				
" 249		#11 EFTS Cap de la Madeleine	3.1.41				
" 11	#11 EFTS	#4 M Depot Quebec	21.2.41				
" 60	admitted	Hospital	25.3.41				
" 62	Discharged	"	26.3.41				
" 95	#1 SFTS Camp Borden	No 1 MD Halifax	17.5.41				

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

(OVER)

8

R.C.A.F. Special Reserve

Imperial Bank of Canada,

Montreal, Que. June 11, 1940.

CABLE ADDRESS
"PRIMULA"

CODES { PETERSON INTERNATIONAL 2ND & 3RD EDITION
BENTLEY'S COMPLETE PHRASE CODE
LIEBER'S 5 LETTER
AMERICAN BANKERS ASSOCIATION

IN REPLYING PLEASE QUOTE INITIALS EJF:S.

The Officer Commanding,
Royal Canadian Air Force,
Montreal,
P.Q.

Dear Sir:

Re: Mr. J. R. Freeland:

The above named Member of the Staff has signified his wish to join the Air Force.

I can recommend him as a young man who has given satisfactory service since joining the Bank, in October 1935. He has earned steady promotion and in my opinion he should prove a satisfactory pupil in the necessary knowledge of any duties required of him should his application be accepted.

Yours very truly,

E.J.Friesen,
Assistant Manager.

R.C.A.F. Records Office
Rec'd SEP 10 1940
O. K.....C.I.B.....
R. C.....N. I.....
S. L.....P. A.....

R.C.A.F. T-58
15M—7-40 (6223)
H.Q. 1062-13-56

ROYAL CANADIAN AIR FORCE

Report on Pupil Pilot—Flying and Ground Training

Surname Freeland Christian Names J.R. J.R. (J5342)

Number R56390 Rank AC2.

INSTRUCTIONS

1. The report is to be forwarded so as to arrive on or before the reporting date of the pupil as follows:—

ORIGINAL AND DUPLICATE

From Initial Training School to Elementary Flying Training School (or Flying Club)

From Elementary Flying Training School (or Flying Club) to Intermediate Training Squadron (Service Flying Training School).

From Intermediate Training Squadron to Advanced Training Squadron.

DUPLICATE

To be available on demand by the Training Command concerned.

2. On completion of Advanced Training, the duplicate is to be forwarded to Air Force Headquarters through Command Headquarters and the original placed on the pupil's personal file.

3. In the event of discontinuance of training at any stage: one copy is to be forwarded to R.C.A.F. Headquarters through Command Headquarters with full particulars as to the cause of discontinuance of training and instructor's report as to the reasons for the pupil's failure.

4. A pupil pilot will be entitled to "Pass" if he obtains not less than 60 per cent of the total marks in the Written, Practical and Oral Tests, and not less than 50 per cent in each subject, each stage.

PART I

INITIAL TRAINING

1. No. 1 Initial Training School. Course No. 12 From 29-11-40 To 4-1-41.

2. Results of Examinations:—

Subject	Maximum Marks	Marks Obtained	Subject	Maximum Marks	Marks Obtained
Mathematics	100	97	Drill	100	72
Armament (P & O.)	100	94	Law and Disc., etc	100	77
Visual L. Tr.	100	77	TOTAL	500	437

3. Maximum Marks 500. Marks Obtained 437 Percentage 87 Passed or Failed P

Position in Class 19 No. in Pilot's Class 75

4. Remarks Very good pilot material. Plenty of the right spirit.

Second aircrew recommendation: Air Observer.

Entered in Records
Date Initials
PR 5

Wg. Comdr.
Commanding Officer

No. I.T.S.

To be passed to No. 11 E.F.T.S. Date

PART II

ELEMENTARY TRAINING

1. No. 11 Elementary Flying Training School. Course No. 17 From 4/1/41 To 21/2/41

FLYING TRAINING

2. Flying Time:—

Aircraft	Dual	Solo	Passenger	Total	Link Trainer
Fleet Finch 11	31.25	35.35		67.00	5:00

3. Results of Flying Tests:—20 hour 62 % 50 hour 71 % Instr. Fly 63 %

4. Ability as a Pilot Average Pass or Fail P

5. Recommended for training on T.E. or S.E. Aircraft S.E.

6. Remarks on Flying Progress and points which require special consideration Slow to learn at the start, but has progressed very well since first solo. He is very fond of aerobatics and has a lot of dash.

P.M. Boisvert. P.M. Boisvert
Chief Flying Instructor

Date 12/2/41

GROUND TRAINING

7.

Subject	Maximum Marks	Marks Obtained	Subject	Maximum Marks	Marks Obtained
Airmanship	200	146	Th. of Flight	100	69
Airframes	~~200~~ 100	80	Air Nav	200	139
Aero Engines	~~200~~ 100	92	Arm. (Oral)	200	142
Signals (Prac.)	50	50	Quals. as an ~~Officer~~ N.C.O.	200	175

Maximum Marks ~~1350~~ 1150 Marks Obtained 893 Percentage 77.65 Pass or Fail Pass

Position in Class 12 No. in Class 34

8. Commissioned Rank (appears ~~suitable~~ or unsuitable) Unsuitable

9. General Remarks (Ability, Conduct, etc.) Very bright and keen, good worker, Conduct - excellent.

J. Jardine Elliott.
CHIEF GROUND INSTRUCTOR

D. McLennan S/Ldr.
~~Squadron Leader~~
Commanding Officer

To be passed to No. 8. S.F.T.S.

No. 11 E.F.T.S. Cap-de-la-Madeleine.

Date 19.2.41

No. R.56390 LAC. Freeland, J

PART III RCAF T.58A.

SERVICE FLYING TRAINING

1. No. 1 S.F.T.S. Course No. 22 From 5-3-41 To 16-5-41

2. Flying Time:-

FLYING TRAINING

Aircraft	S.E. Aircraft				T.E. Aircraft				Instrument	Link Trainer	Passenger.
	Day		Night		Day		Night				
	Dual	Solo	Dual	Solo	Dual	Solo	Dual	Solo			
Yale	8.55	12.15	1.40								
Harvard	32.05	15.10	4.50	4.00					20.10	20.10	
Total	41.00	27.25	6.30	4.00					20.10	15.00	
Brought Forward from E.F.T.S	31.25	35.35							5.10	5.10	
Grand Totals	72.25	63.00	6.30	4.00					25.20	20.10	

3. Qualities as a Pilot, 750. Marks Obtained 487

4. Remarks on Flying Progress, Navigation, and points which require consideration

Average pilot. No special faults

Squadron Commander

Date 15-5-41

GROUND TRAINING

Subject	Maximum Marks	Marks Obtained	Subject	Maximum Marks	Marks Obtained
Airmanship & Maintenance	200	129	Navigation & Meteorology	200	136
Armament (W)	100	68	Signals (W)	100	81
Armament (P)	100	92	Signals (P)	50	40
			TOTAL	750	546

6. Remarks of C.G.I. Very Satisfactory

S/L

Chief Ground Instructor

Date 15-5-41

ARMAMENT (AIR EXERCISES) (T.E. Schools only)

Subject	Maximum Marks	Marks Obtained
Wind Speed and Direction Finding	100	
Straight Runs Over as Pilot	100	
TOTAL	200	

PART III (Continued)

8. Character & Leadership (Marks Possible) 750. Marks Obtained 517

9. Final Assessment (S.E. and T.E. Schools):-

	Maximum Marks	Marks Obtained
S.E. Schools.....	1500	1033 .....
T.E. Schools.....	2350	.....

10. Percentage 68.86 Passed or Failed P Position in Class 15 No. in Class 50

11. Qualities as an Operational Pilot. (Ex., Above Av., Av., Below Av., Poor)

(a) Formation Flying Av. (b) Navigation Ability Av.

(c) Night Flying A. Av. (d) Determ. and Initiative A. Av.

(e) Instrument Flying Av.

(f) Ability to Maintain Speed, Course & Height (T.E.).....

Recommended for (Type of Service Squadron) Bomber

Type of A/C (T.E. or S.E.) S.E. Recommended for Flying Instructor Yes (Yes or No)

NOTE: Paras. 11(a) (b) (c) (d) (e) (f) to be assessed Ex., A.Av., Av., Below Av., Poor.

12. General Remarks on Training, Ability etc Keen, alert, intelligent - good nerve Uses his own initiative

Certified that pupil pilot has passed all tests required for Pilot's Badge, as laid down by C.A.P.100, Section 7, (Yes or No) Yes

W.W. Bradshaw Syn-Ldr Wg. Comdr.
Chief Instructor

13. Awarded Pilot's Flying Badge. Date 16-5-41

14. Recommended for Commissioned Rank Yes (Yes or No) Assessment Av. (Ex., Above Av., Av.)

15. Remarks of Commanding Officer

Learner.

R.D. Kennedy Gp. C.
Commanding Officer

No. 1 S.F.T.S. C.B.

Date 12.5.41

16. Accidents (C.A.P. 100, Sec. 4)

This pupil has been involved in the following flying accidents during his training.

E.F.T.S. or S.F.T.S.	Type of Accident Para. 27	Assessment of Blame - Para. 25.	Previous Communications	Signature of Chief Supervisory Officer or Chief Instructor (as applicable)

9 Days

10G

DENTIAL. Form 1499D.

REPORT ON THE FLYING AND GROUND TRAINING OF PILOTS

SURNAME Freeland CHRISTIAN NAMES J.R.

NUMBER J.5342 RANK P/O

AT

No. 21 OPERATIONAL TRAINING UNIT

ARRIVED ON 14/7/41 LEFT 13.9.41 COURSE No. 12

FLYING TIMES

Type of Aircraft	Day				Night				Instrument Flying	Formation Flying	Link Trainer
	Dual	2nd Pilot	Solo	Crew Training	Dual	2nd Pilot	Solo	Crew Training			
Previous Flying	41.00		27.25		6.30	4.00	~~1.00~~		20.10		20.00
At O.T.U.	11.35	22.25	8.35	33.20	6.15	13.40	1.30	13.05	13.35	.40	10.00
Total ..	52.35	22.25	36.00	33.20	12.45	17.40	1.30	13.05	33.45	.40	30.00

GROUND EXAMINATION MARKS

Airmanship	%	**Navigation**	%
Maintenance	%	**Aircraft Recognition**	%
Armament	%	.....	%
Signals (Pract.)	%	.....	%

FLYING APTITUDE (on conclusion of Course)

	Exceptional	Above Average	Average	Below Average	Poor
1. **Natural Aptitude**			x		
2. **Skill in Landing**				x	
3. **Airmanship**			x		
4. **Aerobatics**	Failed to do a roll off the top three times in succession.				
5. **Cockpit Drill**			x		
6. **Instrument Flying**			x		
7. **Formation Flying**			x		
8. **Night Flying**			x		
9. **Map Reading**			x		
10. **Flying for Bombing**			x		

Note.—This report need not be shown to the pupil unless it accompanies a recommendation to cease instruction. For full instructions regarding compilation and distribution of this Form see A.M.O.....

Wt. 48705/71374 15m. 5/41 APL. 4952 Gp. 745/8.

DISTINCTIVE QUALITIES

Exceptional	Above Average	Average	Below Average	
		X		
		X		
		X		
		X		
		X		
		X		
	X			
		X		
		X		
		X		
		X		

1. **Persistence**
   (Does he keep on trying or is he easily discouraged ?)

2. **Sense of Responsibility**
   (Has he common sense or is he over-confident ?)

3. **Endurance**
   (Does he put up a consistently satisfactory performance under conditions of strain ?)

4. **Leadership**
   (Has he taken the lead in any activities ? Would he make a good captain of aircraft or Flight leader ?)

5. **Method**
   (Does he work systematically to a plan ?)

6. **Deliberation**
   (Does he act decisively **for reasons** or on impulse ?)

7. **Initiative**
   (Does he want to try things on his own ?)

8. **Dash**
   (Is he quick and decisive in action ?)

9. **Distribution of Attention**
   (Does he find it difficult to do more than one thing at a time ?)

10. **Self-Control**
    (Does he get flustered ?)

11. **General Assessment of suitability as Operational Pilot**

(a) Exercises not carried out :

(b) Number of bombs dropped as pilot : (1) Day : 17 (2) Night : 16

(c) Number of bombs dropped as bomb aimer : (1) Day : (2) Night :

(d) Result of best high level exercise : As pilot : (1) Day : 100[x] (2) Night : 113[x]

As bomb aimer : (1) Day : (2) Night :

(e) Number of rounds fired : (1) Air to air : (2) Air to ground :

General Remarks (if any required) :

Keen but impatient, needs landing practice (still inclined to hold off too high).

Date 14-10-41 Signature R. A. F. Officer Commanding.

M. F. M. 14
120M-8-40 (6128-9)
H. Q. 1772-39-1662

~~SGT/P~~ P/O.
~~XXX~~

No. ~~R56390~~ J5342 RANK ~~AC2~~ NAME Freeland, J. R.

~~XXXXXX~~ Montreal, P.Q.
*~~MARRIED~~ ~~XXXXXXX~~ PLACE OF ENLISTMENT
*~~WIDOWER~~ AND DATE
*SINGLE 5-9-40

RATE OF PAY

D. O. No.	DATE	RANK	GROUP	P. F. OR A. S.	DAILY RATE	IF LIABLE PEN. DED.	REMARKS
214	7-9-40	AC2	S	As	1.30		On Enl.
4	4-~~11~~41	LAC	S	A.S	1.50		eff. 3-1-41
2	6-1-41	"	"	"	.75		" 4-1-41 Fly. Pay.
94	15-5-41	SGT/P	S.G.	A.S.	3.70		Eff. 16-5-41
101	2-6-41	P/O.	G.2		6.25		" 17-5-41.

ASSIGNMENTS

ASSIGNEE	EFFECTIVE DATE	AMOUNT	TOTAL
Etta Parker	1-6-41	87 00	
Mother (Vol)			

DEPENDENTS' ALLOWANCES

DATE APPLICATION FORWARDED	RELATIONSHIP	AMOUNT AWARDED	EFFECTIVE DATE

OUTFIT ALLOWANCE $ PAID ON
*DELETE WORDS WHICH ARE INAPPLICABLE

IN RECEIPT OF PENSION UNDER PENSION ACT
OR MILITIA PENSION ACT. (1910) $ P. A.

CASUALTIES, ETC.

PART II D. O. NO.	DATE	
223	5-12-40	TOS #1 ITS fr #4 B.&.G. Fingal, Eff. 29-11-40.
4	4-1-41	SOS #1.ITS to #11 EFTS Cap de la Madeline eff. 3-1-41
2	6-1-41	TOS #11 EFTS from #1 ITS. Toronto " 4-1-41
2	6-1-41	Ent. Flying Pay Eff. 4-1-41
11	19-2-41	SOS #11 EFTS to #4 M.D. Que. " 21-2-41
45	22-2-41	TOS#4M.D.Que.from #11 EFTS Cap de la Madeleine Eff.21-2-41
58	10-3-41	SOS #4 M.D. Que. to # 8 SFTS Moncton, N.B. Eff. 5-3-41
68	21-3-41	D.R.O. # 58 d/10-3-41 is cancelled as affecting this airma
68	21-3-41	SOS #4 M.D.Que. to #1 SFTS,Camp Borden,Ont. Eff.5-3-41
94	15-5-41	Promoted Sgt/P Sp. Gr. eff 16-5-41
95	16-5-41	SOS Borden to #1 "M" Depot, Halifax eff. 17-5-41
101	1-6-41	TOS #1(M)Depot from C. Borden " 17-5-41
	NR	SOS to RAF trainees hove eff 18-6-41 fw F-183

COURSE	FROM	TO	RESULT
Initial Training, Toronto, Ont.	29-11-40	4-1-41	Passed, 87% 19th
Elementary Training, Cap de la Madeleine, Que.	4-1-41	21-2-41	Passed, 77.65% 12th
Service Flying Training, Camp Borden, Ont.	5-3-41	16-5-41	Passed, 68.86% 15th
			Wings, 16-5-41

NAME FREELAND, J.R. KILLED OVERSEAS No. J.5342

Form No. M.76 — cut and punched to be used in the "NU-STYL" Binder, VISIBLE RECORDS LTD., TORONTO, CANADA

ROYAL CANADIAN AIR FORCE

Individual Record of Flying

RANK P/O. ~~L.A.C.~~ NO. J.5342 ~~R.56390~~ NAME Freeland J.R.

UNIT	Month ending	SINGLE-ENGINE AIRCRAFT						MULTI-ENGINE AIRCRAFT						Obs
		DAY			NIGHT			DAY			NIGHT			
		Captain of Aircraft	2nd Pilot	Dual	Captain of Aircraft	2nd Pilot	Dual	Captain of Aircraft	2nd Pilot	Dual	Captain of Aircraft	2nd Pilot	Dual	
		(A)	(B)	(C)	(D)	(E)	(F)	(G)	(H)	(J)	(K)	(L)	(M)	(N
		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
No. 1 S.F.T.S. Camp Borden 16/5/41		27 25		41 00	4 00		6 30							

ROYAL CANADIAN AIR FORCE

R.C.A.F. R. 45
40M—8-40 (6622)
H.Q. 1062-2-126

Individual Record of Flying

J.5342

NO. ~~R 56390~~ NAME Freeland J.R

Month ending	SINGLE-ENGINE AIRCRAFT						MULTI-ENGINE AIRCRAFT						CREW DUTIES			Passenger	TOTAL	
	DAY			NIGHT			DAY			NIGHT								
	Captain of Aircraft	2nd Pilot	Dual	Captain of Aircraft	2nd Pilot	Dual	Captain of Aircraft	2nd Pilot	Dual	Captain of Aircraft	2nd Pilot	Dual	Observer	Air Gunner	Other			
	(A)	(B)	(C)	(D)	(E)	(F)	(G)	(H)	(J)	(K)	(L)	(M)	(N)	(O)	(P)	(Q)	(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
	27 25		41 00	4 00		6 30											78	55

April 8th, 1942.

Mr. J.A. Freeland,
2425 Madison Avenue,
Montreal, Quebec.

Dear Mr. Freeland:

I have learned with deep regret that your son, Pilot Officer John Roy Freeland, previously reported missing on Active Service Overseas and subsequently reported missing believed killed, is now presumed to have died on September 29th, 1941. I wish to offer both you and Mrs. Freeland my sincere and heartfelt sympathy.

It is so unfortunate that a promising career should be thus terminated and I would like you to know that his loss is greatly deplored by all those with whom your son was serving.

Yours sincerely,

(SGD.) C. A. S.

(L.S. Breadner)
Air Marshal,
Chief of the Air Staff.

/AM

9

FOR INFORMATION ONLY
NOT TO BE INCLUDED IN
STATISTICS

POST PRESUMPTION MEMORANDUM 2418

P.4.Cas. 10.4.46.

File number	Rank	Number	Name	Information
				DENMARK
P.403548/43.				
Cas. date	Sgt.	1336737	F.C. SWAIN	
29.4.43.	Sgt.	1254714	A. WHEATLEY	A report from No.3 M.R. & E.S. shows this crew
	Sgt.	1317194	E.G. QUICK	buried at Aabenraa Cemetery in Row 3 Communal
	Sgt.	1311769	G.R. BURGESS	Grave No.12 (M.M.2937 refers)
	Sgt.	1610909	E.D. CURLING	
				ITALY
P.362623/41.				
Cas. date	F/Sgt	580055	W.S. KITSON D.F.M.	
29.9.41	P/O	J.5342	J.R.FREELAND	A report from Graves Registration states this
	Sgt.	748724	R.G. GOVE	crew have been exhumed and reburied in the
	Sgt.	957006	J.R. PALMER	British Empire Cemetery, Milan, Plot 1, Row E,
	Sgt.	920387	J.A.L. McLEAN	Graves 6 to 11 respectively (MM. Enc. 21A refers)
	Sgt.	638198	J.W. LEE	

Amendment to P.P.M.2359

P.419014/44. Column 5 should read Row 1, Graves 84 to 87 and not 184 to 187 as previously stated.

Circulation

Main File
M.R.3. Records
Pres (B.6.)
War Graves (B.7.)
Amendments (Miss Dowden)(2)
Chron.cards (Miss Lambourne)

M.C.I.
R.A.A.F.
R.C.A.F.

P.A. J.5342

G.95586.

J 5342

NOTIFICATION OF DEATH

CERTIFIED that according to the records of this department, CAN/J5342 Pilot Officer John Roy FREELAND, Royal Canadian Air Force, was reported missing and is presumed for official purposes to have lost his life on the twenty-ninth day of September, 1941, as the result of air operations.

Gordon Isaacson
Flight Lieutenant,
for Director of Personal Services.

Dated at
the Air Ministry,
London, W
this 24th day of June, 1942.

RECEIVED
JUL 6 A.M.
CASUALTY
SECTION

CANADIAN
PE[redacted] COMMISSION

IN REPLY REFER TO

NO. P. & N.H.

638-J

Ottawa, April 16, 1942.

G.H. Bowler, Esq.,
Ministry Representative,
British Ministry of Pensions,
Journal Building,
Ottawa, Ontario.

J 5342 P. O. FREELAND, J. R.
(Formerly R56390)

Dear Sir:

The Department of National Defence, Air Service, officially reports that the marginally named was reported who previously "MISSING 29-9-41 now presumed DEAD for official purposes 29-9-41." ~~on the~~ He was a member of the R.C.A.F. attached to the R.A.F. (Overseas) and his next of kin is reported as Father -

Mr. J. A. Freeland,
2425 Madison Avenue,
Montreal, Quebec.

Estate 11737 22-9-42
W.S.G 1547 27-11-45

Ben. will.

The Addressograph Stencil shows payment of Assigned Pay of $ 87.00 a month to

Mrs. Etta Y. Freeland,
2425 Madison Ave., N.D.G.,
Montreal, P. Q. (Relationship not stated)

As no D.A. was payable the Commission will not take any action unless a claim be filed.

Yours sincerely,

E. Clewes,

for
Canadian Pension Commission.

/LR

COPY/MONTREAL D. O.

C.P.C. 70 2M-9-41 Req 722

R.C.A.F. G. 64
1M—6-41 (324)
H.Q. 1062-9-22

Royal Canadian Air Force

CERTIFICATE OF PRESUMPTION OF DEATH

No. 384.

This is to Certify that

J5342 Pilot Officer John Roy Freeland R.C.A.F.
(Number) (Rank) (Name in Full) (Unit)

has been officially reported as missing since the Twenty-ninth day of September, 1941, 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 Fourteenth day of April 1942.

T.K. McDougall

(T.K. McDougall),
Squadron Leader,
R.C.A.F. Records Officer.

Personal effects of P/O Freeland J.R.

A

1 cabin trunk (lock broken)
containing:

1 pocket knife.
1 case of keys.
1 hand brush.
2 brushes.
1 money belt.
1 pr. braces.
2 photos in frames.
1 New Testament.
1 pr. suspenders.
2 leather belts.
1 Gillette razor.
1 pr. cuff links.
1 cigarette lighter.
1 pr. glasses in case.
1 pr. nail clippers in case.
5 ties.
3 collars.
1 pr. gloves.
9 prs. socks.

20 handkerchiefs.
1 towel.
7 prs drawers.
4 prs. combinations.
2 vests.
6 shirts.
4 pr. pyjamas.
1 pr.sports shoes.
2 pullovers.
2 scarves.
1 holdall
1 housewife.
1 handle and lock.
2 prs. flannels.
1 golf jacket.
1 pr. trousers.
2 shoes.
1 pr. shoe trees.
1 writing case with photos.

CERTIFIED TRUE COPY... [signature] F/O

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

AIR

A18734

DECEASED MEMBER'S NAME: John R. (CHRISTIAN NAMES) Freeland (SURNAME)

REGISTER NO.

FILE NO. 20091

PAYEE / ADDRESS: Receiver General of Canada, Director of Estates, Ottawa, Ont.

DATE 27 Aug/45

SERVICE NO. J5342

FINAL RANK OR RATING P/O

DATE OF TERMINATION OF OVERSEAS SERVICE 29 Sept/41 DATE OF DISCHARGE 29 Sept/41

		$	¢
A. TOTAL QUALIFYING SERVICE	NO. OF DAYS 390/30 EQUAL TO 13 COMPLETE PERIODS AT $7.50	97.50	
B. QUALIFYING OVERSEAS SERVICE	NO. OF DAYS 103 LESS INELIGIBLE DAYS, EQUAL TO 103 DAYS @ 25C. PER DAY	25.75	
C. SUPPLEMENT FOR OVERSEAS SERVICE			
DAILY RATES AT DISCHARGE			
PAY	$6.25		
SUBSISTENCE OR LODGING AND PROVISION ALLOWANCE	$1.70		
ADDITIONAL PAY	$		
	$		
	$		
DEPENDENTS' ALLOWANCE 1/30 OF $	$		
TOTAL	$7.95 ×7 = $ 55.65		
NO. OF DAYS 103/183	×$ 55.65	31.32	
D. WAR SERVICE GRATUITY		154.57	
E. DEDUCTIONS — OVERPAYMENT OF PAY AND ALLOWANCES	$		
DEPENDENTS' ALLOWANCE AND ASSIGNED PAY	$		
OTHER DEDUCTIONS	$		
F. TOTAL AMOUNT PAYABLE		154.57	

G. YOUR PORTION OF GRATUITY IS—

DEPENDENTS' ALLOWANCE IN ISSUE TO YOU $ _____ OF $ _____ =$

TOTAL DEPENDENTS' ALLOWANCE IN ISSUE $

SEP. 17 1945

O. K. ..... N. I. .....

P. & A. ~~Bal.~~ Trans. Trust Account
Journal Voucher #G174

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
SJB	RK

TREASURY

CHECKED BY	DATE
	20-8-45

SERVICE REPRESENTATIVE

△T

Treasury Office.
Air Force Services
OTTAWA. - CANADA.
Rec'd. AUG 28 194?
P. & A. SECTION

pa

J 5342

On August, 1.

Dear Mr. Freeland:

Your son, Pilot Officer F.B. Freeland, has requested that his Officer's Commission Script be forwarded direct to you from these Headquarters, in order to eliminate the possibility of damage to the script in travelling.

The enclosed Officer's Commission Script represents the authority vested in your son as well as the trust placed in him by His Majesty, The King.

Would you be good enough to sign and return the attached receipt as evidence that this script has been received by you in good condition.

Yours very truly,

(C. Sheldon)
Flight Lieutenant,
for Chief of the Air Staff.

Encl.

Mr. J.A. Freeland,
2425 - Madison Avenue,
Montreal, Quebec.

WGB:EVM.

5

P.A.

J5342 (R.2-2-1)

R E G I S T E R E D

OTTAWA, Canada, February 26th., 1946.

Mrs J.A. Freeland,
P.O. Box 9,
Temaskaming, Quebec.

Dear Mrs Freeland:

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 son Pilot Officer J.R. Freeland.

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,

JRF.

(T.F.McDougall) G/C
R.C.A.F. Records Officer.

DISTRIBUTION OF SERVICE ESTATES

DME

Estates Form "P. 4"

AIR

Name FREELAND (Surname) John R. (Christian Names) No. J5342

P/O (Rank) O/S (Unit) 29-9-41 (Date of Death)

AMOUNT

W.S.G. $ 154.57
L.P.C. $ 117.37

Date 20-11-45

Other Credits.....

Total..... 271.94
Prev.dist. 117.37
This dist. 154.57

SHARE	RELATIONSHIP	NAME AND ADDRESS	AMOUNT
All	father	John A. Freeland, (Executor of the will of John R. Freeland, deceased) P.O. Box 9, TEMSKAMING, P.Q.	154.57

P4. TO TREAS.

NOV 21 1945

WSG

AUTHORITY

H.Q. F.E. No.	VOTE	PRI	H.Q. SUB.	OBJ.	AMOUNT
0000 9999	$33	01	70	000	$154.57

CLASSIFIED BY

EXAMINED BY

For Chief Treasury Officer

DISTRIBUTION APPROVED AND AUTHORIZED

T.J.S.G.

(L. M. Firth) Colonel
Director of Estates

AUDITED FOR PAYMENT

For Chief Treasury Officer

40M—8-45 (7876)
H.Q.1772-45-27

J 5342 AM 4

- Proof of Birth -

John Anderson Fineland, Civil and Mechanical Engineer, Toronto, Ontario, formerly of Quebec, Province of Quebec, and Etta Gertrude Low his wife have a son born at Toronto, Ontario, on Saturday the Twenty fourth day of August, one thousand nine hundred and eighteen, and baptized on this Sunday the Third day of November, of the same year, named John Roy, by

(signed) Andrew T. Love, DD.
Minister

J. A. Fineland
Etta Gertrude Fineland
Hilda Fineland
Marcia A. Love

I certify the foregoing to be a true extract from the Register of St. Andrews Church, Quebec

A. M. Gordon
Minister

Quebec, P.Q.
30 May, 1940

R.C.A.F. Records Office
Rec'd SEP 10 1940
O.K. C.I.B.
R.C. N.I.
S.L. P.A.

N1-

R.A. J5342

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 MAY 15- 1941

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 FREELAND
(Use capital letters)

2. Christian Names JOHN ROY
(Use capital letters)

3. Date of Birth Aug. 24TH, 1918 Place Toronto, Ont., CANADA.
City Province Country

4. Permanent Address 2425 MADISON AVE, N.D.G., MONTREAL, QUE.

5. Present address for correspondence stating date until which it holds good. UNTIL-27/5/41
2425 madison Ave, N.D.G., Montreal, Que. Telephone DE-8938

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.) Presbyterian

8. Next of Kin (Name) JOHN ANDERSON FREELAND. Relationship Father
Address 2425 MADISON AVE, N.D.G., Montreal, Que.

9. Father's name in full JOHN ANDERSON FREELAND Alive ~~Deceased~~ ALIVE
Address 2425 MADISON AVE, N.D.G., MONTREAL, Que
Birth Place ARMONTE, ONT. Nationality CANADIAN
Profession Civil Engineer.
Mother's maiden name in full ETTA YAHER LOVE Alive ~~Deceased~~ ALIVE
Birth Place Quebec City, Que.

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

11. Single, Married, Widower, Divorced, Separated? SINGLE
Particulars of Marriage N.A.
(Date) (Place)
Full maiden name of Wife N.A. Birthplace N.A.

12. Particulars of Children:—

NAME	DATE OF BIRTH	PLACE OF BIRTH
N.A.	N.A.	N.A.

13. Person or persons to be notified in case of casualty:—
Name JOHN ANDERSON FREELAND Relationship FATHER
Address 2425 Madison Ave, N.D.G., Montreal, Que.

14. Education:—

SCHOOLS	DATES IN ATTENDANCE FROM	DATES IN ATTENDANCE TO	COURSES	DIPLOMAS AND DEGREES
ELIZABETH BALLANTYNE	1924	1931	PUBLIC SCHOOL	
MONTREAL WEST HIGH	1931	1935	ACADEMIC	JR. MATRIC.
Universities				

15. Special Civil Courses or Examinations other than in 14 above, Correspondence Courses, etc.
Queen's Univ. degree in Banking & Commerce (CORRESP.)

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
IMPERIAL BANK OF CANADA	1935	1940	TELLER	R.C.A.F.

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

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
5TH ROYAL HIGHLANDERS OF CANADA	MARCH 1939	SEPT. 1939	PRIVATE	—
R.C.A.F. SPECIAL RESERVE	6/9/40	—	AC2 to LAC	PILOT (WINGS)

19. Reason for Termination of last Service Engagement R.C.A.F.

20. Details of Ground Officer's Duties Performed N.A.

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

SUBJECT	FROM	TO	UNIT	PLACE
N.A.			N.A.	

22. Have you ever been or are you now in receipt of a Disability Pension? N.A.
If so, state nature of disability: N.A.
Particulars of other Pension: N.A.

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

25.
26.
27.
28.
29.
30.
31.
32.
33.
34.
35.
36.

24. Service Courses taken:—

TYPE OF COURSE	PLACE	FROM	TO
STUDENT PILOT	#1 - I.T.S.	Nov. 29/40	Jan. 4/41
- do -	#11 - E.F.T.S.	Jan. 4/41	Mar. 4/41
- do -	#1 - S.F.T.S.	Mar. 4/41	May 16/41

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:—

N. A.

(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~~ TYPE
#11-E.F.T.S. - Capde Tarmacq.		FLEET FINCH
#1-S.F.T.S. - Camp Borden		YALE + HARVARD

28. Total Flying Time 135+ N.A.

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

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

Tennis, golf, swimming, hockey, skiing (MODERATELY)

30. Hobbies Reading

31. Languages spoken, or written (State proficiency) ENGLISH - FRENCH (MODERATELY)

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 HEARN, A.R.B. (in capitals) Name GORDON, DR. A.M. (in capitals)

Address C/O IMPERIAL BANK, MONTREAL Address 107 ANN ST., QUEBEC CITY.

Profession Bank manager Profession minister

Name WATSON, S.S. (in capitals) Name RUNCIMAN, A.S. (in capitals)

Address 9 Montreal West High School Address 68 Cleyson Ave., Montreal West

Profession School Principal Profession Engineer

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 R. Tallack Signature W. Rueland.

Date May 15 - 19 41

36. AGREEMENT

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

Witness R. Tallack Signature W. Rueland.

Date May 15 - 19 41

37. DECLARATION

I, John Roy Freeland, having made an application, dated (May 15/41) 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 R. Wallace

Date May 15 19 41 Signature J. R. Freeland.

Place Camp Borden, Ont.

38. *(a)* Location of Will Director of Airmen Personnel, Ottawa.

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

CERTIFICATE OF MEDICAL EXAMINATION

Name in full FREELAND, JOHN ROY

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	*(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	yes	*(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? yes — for reading

4. Have you had any illness of more than one week's duration? yes

J. R. Freeland.
Signature of Applicant.

Examiner's remarks *re* above Appendectomy 1939 - T&A - 1937 (+) measles at age 12

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

1. Identification marks or scars (if operative, obtain history) Appendectomy scar

2. Height 5 Feet 10 Inches 3. Weight 148 lbs.

4. Complexion Fair - freckled 5. Colour of eyes Blue Hair Brown

6. Development (Good / ~~Fair~~ / ~~Poor~~) 7. Chest measurement—full expiration ..... inches
range of expansion ..... inches

8. Hearing—Right W.V. 20' Left W.V. 20' Tympana—Right Normal Left Normal

9. Vision—Without Glasses—Right 20/70 With Glasses—Right .....
Left 20/70 Left .....
Colour Vision Normal - Ishihara .....

10. Condition of mouth and teeth Healthy

11. Heart and blood vessels Normal 12. Blood Pressure—S 120 D 80

13. Reflexes Normal 14. Urine—Albumen neg Sugar neg

15. Abnormalities (Congenital and Pathological) found on Examination Nil

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

General Impression and any special remarks of Medical Officers SATISFACTORY

Date May 15/41 19

B. L. Dessin S/L (President) J. Barker F/Lt (Member) Surgeon F/Lt (Member)

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

WILL

P/O J-5342

R.C.A.F. R. 60
20M—12-40 (8303)
H.Q. 1062-3-45

(1) I, John Roy Freeland of the City ~~Town~~ ~~Village~~ ~~Township~~ of Montreal in the ~~County~~ District of Mount Royal

Province of Quebec, Bank Teller
(Civil Occupation)

a member of the Royal Canadian Air Force, Number J-5342 do hereby revoke all former Wills by me made and declare this to be my LAST WILL.

Last Permanent Civilian Address

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

(2) I GIVE, DEVISE AND BEQUEATH unto John Anderson Freeland, my father of 2425 Madison Ave., Notre Dame de Grace, Montreal, Que. — all my 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 John Anderson Freeland, 2425 (Name) (Address) Madison Ave. Montreal, to be the Executor ~~Executrix~~ of this my Last Will.

IN WITNESS WHEREOF I have hereunto set my hand this 13TH day of June 1941.

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.

J. R. Freeland P/O
(Signature of Testator)

First Witness sign here.

(5) Arthur Dayoub P/O
(Signature)
6815 Sherbrooke St. W.
Montreal Que
(Address)
Pilot R.C.A.F.
(Occupation)

Second Witness sign here.

Hilyard L. Myers P/O
(Signature)
249 Arlington Ave Toronto Ontario
(Address)
Pilot R.C.A.F.
(Occupation)

(Witnesses are not to be beneficiaries.)

OVER