J85722
SMITH
SYDNEY EMMIN

"SPECIAL RESERVE"

AIR FORCE No. R.165239 POSTED TO #1 M. D. Toronto, Ont. TRADE Aircrew (O or P) WETP

ROYAL CANADIAN AIR FORCE

(ATTESTATION PAPER)

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

FERN HIGGS

1. Surname SMITH FULL Christian Names SYDNEY EMMINGTON
2. Present Address mailto 893 - 3rd. AVE., VAL D'OR QUEBEC Telephone
3. Permanent Address 1102A YONGE, TORONTO, ONT.
4. Place of Birth TORONTO, Ontario Citizenship CANADIAN
5. Date of Birth JAN. 9/13 Married, ~~Single~~, ~~Widower, Separated, Divorced~~ ~~SINGLE~~ MARRIED
6. Particulars of Children

Name	Date of birth	Name	Date of birth
	None		

7. Occupation SAMPLER 8. Religion ANGLICAN (State denomination)
9. Languages ENGLISH WELL (State proficiency)
10. Next of Kin (Full Name) ~~CLAIRE DAUPHINAIS~~ ~~SYDNEY SMITH~~ CLAIRE DAUPHINAIS SMITH Relationship ~~FATHER~~ WIFE
" Address 1102A YONGE ST., TORONTO, ONT.
11. Father (Full Name) SYDNEY SMITH Birthplace LIVERPOOL, ENGLAND
" Address 1102A YONGE ST., Toronto, Ont. Citizenship BRITISH
" Occupation SAW MAKER Annie
12. Mother (Full Maiden Name) LYDIA HIGGS Birthplace LIVERPOOL, ENGLAND
" Address DECEASED Citizenship BRITISH
13. Details of any Naval, Military or Air Force Service:

Unit	Place	Rank	Trade	Date From	Date To	Reason for discharge
NA						

JUN 13 1944

R.C.A.F. Records Office
Rec'd. MAY 8 1942
O.K. C.I.B.
R.C. M.t.
S.L. P.A.

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? n/a
When? n/a Result n/a
17. Were you ever discharged from any branch of His Majesty's Forces as Medically Unfit? NO
If so, state nature of disability N.A.
18. Have you ever been or are you now in receipt of a Disability Pension? NO
If so, state nature of Disability 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.

R.C.A.F. Form R. 100
150M—10-41 (993)
H.Q. 1062-3-83

444- 399

21. Particulars of Education:

—	Name of school	Date From	Date To	Courses—Subjects, etc.
~~Primary Education~~—Public ~~or Separate School~~	WELLESLEY	1918	1927	SR IV
High School—~~Collegiate~~ Institute, etc.				
Technical School	CENTRAL TECHNICAL	1927	1928	
University or School other than above				
Correspondence Courses, etc.	CAN. INST. SCIENCE & TECHNOLOGY	1941	1942	MATHEMATICS
WTP Graduate.				

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

Employer and place	Duties, trades, positions	Date From	Date To	Reason for leaving
CAN. GEN. ELECTRIC WARD WALLACE	SPRAY PAINTER	1929	1930	LAYED OFF
AL. COOPER	DRUMMER	1934	1940	QUIT
LAMAQUE MINING CO.	SAMPLER	1941	PRESENT	

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

24. Special Qualifications, Hobbies, etc., useful to the R.C.A.F. N/A

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

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

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

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

Name	Address	Occupation
J. PAGE	45 WESTLAKE, TORONTO	CLERK
MR. LEECH	1102A YONGE ST. TORONTO	JANITOR
MR. J. LEFCOE	VAL D'OR, QUEBEC.	MERCHANT
MR. M. FRIEDMAN	VAL D'OR QUEBEC	MERCHANT

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 Feb 4 1942 Signature Sgt. Smith

NATIONAL REGISTRATION CERTIFICATE PRODUCED. 54 A. F. J. F. Macmillan F/O.

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 (Not required for Standard (Tradesmen)—*

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, Sydney Emmington Fern Higgs SMITH .....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 April 30th 1942 Syd. Smith
Signature of Recruit

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

I, Sydney Emmington Fern Higgs SMITH .....do sincerely promise and swear (or solemnly declare) that I will be faithful and bear true allegiance to His Majesty.

Date April 30th 1942 Syd. Smith
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 Toronto, Ont. this 30th day of April 1942

J. F. Macmillan — Signature of Officer
F/O — Rank
RCAF Rec. Centre, Toronto, Ont. — Unit

FOR OFFICIAL USE ONLY

CERTIFICATE OF MEDICAL EXAMINATION

Part 1. Information obtained from the applicant—

1. Age. 29 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? No

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

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

Syd. Smith
Signature of Applicant

Examiner's Remarks *re* above T. and A. Occasional granulations on eyelids. No fracures. Measles, mumps, whooping cough.

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

1. Identification marks or scars (if operative obtain history) Birth mark - left hip.

2. Height 5 feet 7¾ inches. 3. Weight 140 pounds.

4. Complexion Fair 5. Color of Eyes Blue Hair Fair

6. Development ~~Good~~ Fair ~~Poor~~ 7. Chest Measurement—Full expiration 34-36 inches

Range of expansion 2 inches

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

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

Left 20/20 Left

10. Condition of mouth and teeth Healthy

11. Urine—Albumen Neg. Sugar Neg.

12. Abnormalities (Congenital and Pathological) found on Examination None.

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 X-ray chest -- neg. XR.64906 6/2/42.

13. Reflexes Normal

14. Heart Normal

15. Lungs Normal

16. Blood Pressure 130/80

17. Colour Vision Normal Ishihara

Date February 5 19 42.

D Chrystie Flt
President

J O White F/L
Member

Member

AIR FORCE No. ~~R/65239~~ J.85722.

SURNAME: Smith

FULL CHRISTIAN NAME: Sydney Emington

ENLISTMENT/APPOINTMENT — PLACE: Toronto — DATE: 30-4-42

RELIGION: Anglican

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

Comm 10.4.44.

R.C.A.F. FORM R230
100M-2-43 (3137)
H.Q. 885-R-230

BIRTH DATE	PLACE	COUNTRY	CITIZENSHIP	RACIAL ORIGIN
9-1-13	Toronto	Ontario	Canada	British

CIVIL EDUCATION

PUBLIC SCHOOL	JUNIOR MATRICULATION
HIGH SCHOOL ENTRANCE ✓	SENIOR MATRICULATION
TECHNICAL SCHOOL 1 yr.	UNIVERSITY 1 yr. W.E.T.P. Graduate
CORR./BUSINESS COURSES	LANGUAGES SPOKEN

CIVIL OCCUPATIONS AND EXPERIENCE

Sampler.

PREVIOUS SERVICE

nil.

PLACE AND DATE OF MEDICAL	CATEGORY	PLACE AND DATE OF MEDICAL	CATEGORY
30-4-42	A 1/3 B		

PARTICULARS OF FAMILY

SINGLE, MARRIED, WIDOWER, DIVORCED: married

WIFE (FULL MAIDEN NAME) OR HUSBAND: Claire Dauphinais

PRESENT ADDRESS (IN PENCIL):

PLACE OF MARRIAGE: Toronto. DATE: 4.4.42.

AUTHORITY (IF AFTER APPOINTMENT/ENLISTMENT):

CHILDREN

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

NAME(S), ADDRESS(ES), RELATIONSHIP OF PERSON(S) TO BE INFORMED OF CASUALTIES (IN PENCIL)

Mrs. C. Smith (Wife) 14 MADISON AVE. TORONTO ONT.

Mr. S. Smith 1109 ½ YONGE ST TORONTO ONT.

EMPLOYMENT AS INSTRUCTOR OFFICER AIRMAN/AIRWOMAN

TYPE	FROM	TO	TYPE	FROM	TO

OFFICERS

RANK, BRANCH AND CATEGORY	DATE	AUTH.	DUTIES PERFORMED DURING SERVICE, E.G. ADJ.
P.O. S.R. G.L. Pilot	10 4 44	00 961 44	
A/S-O.	26 6 44	10/Repat-34/44	

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

AIRMEN AND AIRWOMEN

RANK	DATE	AUTH.	TRADE	DATE	AUTH.
A.C.2	30 4 42		P. or Obs.	30 4 42	
L.A.C.	26 9 42	ARO 232	Aircrew Pilot	26 9 42	ARO 232
T/Sgt.	30 4 43	A.D. 106/43	Pilot	30 4 43	A.D. 106/43
T/F/Sgt	30 10 43	A.D. 810/43 1805/43 781/43 7/44			

OFFICERS, AIRMEN/AIRWOMEN

COURSE OR TRADE	GRP.	%	PF	DATE
P. or Obs.				30 4 42
Aircrew				30 6 42
P/O S.T.S. Crse 22	2/3			1/30/4 43

ADVISE ENTRIES
UNIT RECORDS RETURNED
TO CANADA

AIR FORCE No. ~~R165239~~ J.85722

SURNAME: SMITH

FULL CHRISTIAN NAME: SYDNEY EMINGTON

ENLISTMENT/APPOINTMENT
PLACE Toronto
DATE 30-4-42
Comm 10.4.44.

RELIGION C Anglican

R.C.A.F. FORM R230

TYPE OF LEAVE

FROM	TO	No. DAYS	DESCRIPTION	AUTH.
23-6-43	26-6-43	4	P.L.	3 P.R.C. 153/43
26.8.43	1.9.43	7	Privi Leave	20(P)AFU 26/43
8.9.43	10.9.43	3	Privi Leave	20(P)AFU 38/43
8-2-44	21-2-44	14	LEAVE.	18 OTU. 8/44
22-5-44	28-5-44	7	P.L.	101 Sqn 25
13-7-44	19-7-44	7	P.L.	101 Sqn 33/44

HONOURS, AWARDS AND MENTIONS

DATE	AWARD	AUTHORITY
30 4 43	Pilot Flying Badge	A.D. 106/43
15 1 44	CVSM & M/L	11 Base 1/44

TYPE OF AIRCRAFT ON WHICH MOST PROFICIENT

(IF UNDER INSTRUCTION STATE NUMBER OF HOURS ON EACH TYPE AND TESTS PASSED)

SERVICE MACHINES FLOWN

CHARACTER AND TRADE ASSESSMENT

DATE	CHARACTER	TRADE ASSESSMENT

POSTINGS, ATTACHMENTS & TEMPORARY DUTY

SOS TOS	FROM	TO	DATE	AUTHORITY
	Assemb. U.K.		4 6 43	E 672
2.O.S.	at 3 P.R.C.		5 6 43	Int.(Cty)
S.O.S.	3 P.R.C.	to #20(P)AFU	29 6 43	3 P.R.C 141/43
Att.	R.A.F. 1515 BAT. Flt		3 8 43	1515 Flt. 14/43
CTBA	to 1515 BAT. Flt.		10 8 43	1515 BAT 15/43
SOS	20(P)AFU	18 OTU	12 10 43	20(P)AFU 34/43 18 OTU 32/43
SOS	18 OTU	to 11 Base	21 2 44	18 OTU 10/44 11 Base 4/44
	Duck to Comm.		9 4 44	11 B 23/44
TOS	101 Sqn.	fr 11 Base.	12 5 44	101 Sqn 24
	Reported 11 Base (on appointment to a Commission)		9 5 44	11 Base 25
F/B	Missing from 101 Sqn.		~~28~~ 21 7 44	CR 5-29, 101 Sqn 33/44
Sad	101 Sqn	to RCAF		CR 5-22
	U/K N/E Unit		21 7 44	AFRO 1911/44
MISSING BELIEVED KILLED			1 3 45	C.L. 706
DS	N/EU.		~~28~~ 4 44.	N.E.U. 10/44
	Presumed Dead		21 7 44	CR 7-22 AFRO 1085/45
SOS.	UK NE to Presumed Dead		21 7 44.	UKNEU 2/46

ALL OTHER CASUALTIES

CASUALTY AND DATE	AUTHORITY
Adm on 23.11.43 Forfeits 1 days pay (Loses 8 hrs 44 m)	18 OTU 27/43

ADVISE ENTRIES
UNIT RECORDS RETURNED
TO CANADA

Emb. 27-5-43

AIR FORCE No. ~~R165239~~ J.85722

SURNAME: SMITH, FULL CHRISTIAN NAMES: SYDNEY EMMINGTON FERN HIGGS

ENLISTMENT PLACE Toronto, Ont DATE 30-4-42

RE-ENLISTMENT

C.R. FILE NUMBER Res. S.S.

OFFICER RECORD OF SERVICE AIRMEN

Comm. 10-4-44

R.C.A.F. FORM R44 (B) 30M-12-41 (1346) H. Q. 1062-3-58

7. BIRTH: DATE 9-1-13 PLACE Toronto, Ont CITIZENSHIP British

FATHER (FULL NAME) Sydney Smith

BIRTHPLACE Liverpool England

MOTHER (FULL MAIDEN NAME) Lydia Annie Higgs (Deceased)

BIRTHPLACE Liverpool England

8. EDUCATIONAL STANDING

HIGH SCHOOL ENTRANCE x Ont.

JUNIOR MATRICULATION

SENIOR MATRICULATION

TECHNICAL SCHOOL Can. Tech. 1 yr.

~~UNIVERSITY~~ Can Inst. Science & Tech. 1941-42

CORRESPONDENCE COURSES Mathematics I.C.S.

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

Spray painter (Can Gen. Elec) 1929-30

Drummer (Al. Cooper) 1934-40

Sampler (Mining Co) 1941-42

170 1800

10. PREVIOUS ARMY, NAVY OR AIR FORCE SERVICE

Nil

0

11. HONOURS-AWARDS, MENTIONS	AUTHORITY	DATE
Pilot's Flying Badge	16 S/106	30-4-43
6 Clasps	DB.69.108	15.1.44

12. FLYING EXPERIENCE ON ENLISTMENT (HOURS)

SOLO — DUAL — PASSENGER —

13. RELIGION C. of E. 3

14. LANGUAGES English 1

15. SPORTS —

16. SINGLE-MARRIED-WIDOWER-SEPARATED-DIVORCED Married

WIFE (FULL MAIDEN NAME) Claire Dauphinais

PLACE OF MARRIAGE Toronto, Ont DATE 4-4-42

AUTHORITY (IF AFTER ENLISTMENT)

2

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: Claire Dauphinais Smith RELATIONSHIP wife

ADDRESS: 14 Madison Ave Toronto D.R.O. D 123A-8

FULL NAME: 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.
R.A. 14 days	28/12 9/10 42	5-AT5230			

21. ENGAGEMENTS

TERM	EFFECTIVE	D.R.O.	TERM	EFFECTIVE	D.R.O.
Duration	30 4 42				

22. TEMPORARY DUTY AND MISCELLANEOUS ENTRIES

FROM	TO	DATE	D.R.O.
Issued T.W.	No. 272057	1-8-42	6SF157

Date and Place of Signing R 40.

22.(A) ADDRESS PRIOR TO ENLISTMENT

1102 A Yonge St., Toronto, Ont.

15614

23. DOCUMENT CONTROL (INDICATE RECEIPT BY DATE) QHF

R60	R79	B465	X-RAY	FM-13	IDN. CARD
6-5-42	11-5-42	1-5-42			

AIR FORCE No. ~~R165239~~

SURNAME: SMITH, FULL CHRISTIAN NAMES: SYDNEY EMMINGTON FERN HIGGS

ENLISTMENT / RE-ENLISTMENT — PLACE Toronto, Ont. — DATE 30-4-42

C.R. FILE NUMBER Rec. S.S.

J.85722

OFFICER RECORD OF SERVICE AIRMEN

Comm. 10-4-44

R.C.A.F. FORM R44 (B) 30M-12-41 (1346) H. Q. 1062-3-58

1. POSTING (INDICATE S.O.S. AND T.O.S.)

Temporary Duty (In Red)

S.O.S. OR T.O.S.	UNIT AND PLACE	EFFECTIVE			D.R.O.
T.O.S.	#1 M. D. Toronto	30	4	42	1 M.D. 104
SOA	1 M D Toronto	29	6	42	1 M D 155
TOS	6 S F T S. Dunnville	30	6	42	6 S F 133
SOS	6 S F (Dunnville	1	8	42	6 S F 157
TOS	5 I T S. Belleville	2	8	42	5 I T S 186
SOA	5 I T S Belleville	24	10	42	5 I T S 257
TOS	#13 E F T S St Eugene	24	10	42	13 E F 141
SOS	13 E F	9	1	43	13 E F 165
TOS	16 S F Hagersville	10	1	43	16 S F 11.
SOS	16 S F Hagersville	14	5	43	16 S F 106 A
T.O.S.	1 Depot Halifax N. S.	15	5	43	1 Y 12 070
S.O.S.	Y 12 R A F Transient Pool	26	5	43	1 Y 13 740
Missing 21 July 44. PC ✕ 893 2/22 July 44					
Presumed Dead 21 July 44. DC ✕ 16202 2/12 May 45.					

COMPLETED 23 6 45

2. RECLASS'NS-PROMOTIONS-ETC.

RANK	EFFECTIVE			D.R.O.
A.C.2	30	4	42	1 M.D. 104
8				
LAC	26	9	42	5 I T S 232
T/Sgt (Pd)	30	4	43	16 S F 106 A
T/Flt Sgt (pd)	30	10	43	GB. 781.
P/O. 10-4-44 (RR 128/5-6-44) T8				GB 941
A F/O.	26	6	44	O.I.C. 10 A-56

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.
6-7-44	R100	G.I.B. 43B	

4. TRADE AND CHARACTER

TRADE	GROUP	EFFECTIVE			D.R.O.
O. or P. on E.F.T.P. 300 hrs.	2	30	4	42	1 M.D. 104
Aircrew (S.D.)		30	6	42	6 S F. 134
Aircrew P	1	26	9	42	5 I T S 232
Pilot (a472)	1	30	4	43	16 S F 106 A
Pilot, Gen (Gen) 1 M 00		10	4	44	(RR 128/5-6-44)

TRADE PROFICIENCY	CHARACTER ASSESSMENT	DATE OF R41
Categorized	Ra- 16 S F 106	

5. COURSES-TESTS-ETC.

SUBJECT	RESULT	DATE	AUTHORITY

6. LEAVE

FROM	TO	DAYS	REMARKS	D.R.O.
28.9.42	12.10.42		Special Leave	5 I T S 270
1-5-43	14-5-43	14	Pre. Embarkation	16 S F 106 A
50				

6(A) RATIONS AND QUARTERS

UNIT	DATE COMMENCED	DATE DISCONTINUED	D. R. O.

RELIGION — PRES. R.C. HEB. MIS. OTHER — PREV. SERV. — PROVINCE OF ENLISTMENT — DISCHARGE — AC

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 PRO. — RELIGION

211973

NAME SMXXXX SMITH, Sydney Emmington Fern Higgs, FILE NO. XXXXX J85722

RANK P/O CATEGORY XXXXXXX PRES. DEAD REG. NO. J85722

DATE OF DEATH: 21 July /44 MOTHER LIVING: NO WIFE: YES

MINISTERIAL CARD: 16-8-44 ROYAL MESSAGE: MEMORIAL CROSS TO CHAPLAIN:

To Wife-
To Wife-12-6-45

AUG 24 1945

DEL'D TO MOTHER: AUG 23 1945

DEL'D TO WIFE:

Mrs. S. E. F. H. Smith,
14 Madison Avenue,
Toronto, Ontario.

COMMAND:

RELIGION:

J085722 SMITH SYDNEY EFH F07

1 NUMBER 9 NAME 29 RANK

SERVICE AWARD CARD

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

39-45 STAR	ATL. STAR	A/C EUR STAR	AFRICA STAR	PACIFIC STAR	BURMA STAR	ITALY STAR	FR. AND GER. STAR	DEFENCE MEDAL	GEN. SER. MEDAL	C.V.S.M.				
												OP 265		AWARD
														AWARD AND CLASP
														APPLICATION DISPATCHED
														RIBBON ISSUED
												15 1 47		MEDAL ISSUED

PREFIX NUMBER NAME RANK CODE

IBM 83961

LICENSED FOR USE UNDER CANADIAN PATENT NUMBER 315306

Mrs. Claire D. Smith (Widow)

~~14 Madison Ave.,~~ 133 Roncesvalles Apt B

Toronto, 28-9-51

Ont. Feb..46.

8160-3-11-49

MEMORIAL BAR
4858
DATE DESP 8-1-52
REGN NO 5889
CANCELLED

SPECIAL RESERVE

ROYAL CANADIAN AIR FORCE
INTERVIEW REPORT

Appendix "D"
M.20/10

1. SURNAME. . . SMITH . . . . . .

2. CHRISTIAN NAMES . Sydney Emmington Fern Higgs. . . . . .

3. APPLYING FOR ENLISTMENT AS . . P & O. . . . . .

SELECTION BOARD

4. PERSONNEL OFFICER
Education. X ont . Letter from C.T.S. . . . . (Passed W.R.F.T.P.)

A. to L. Score. . . 35. . . . . .

ASSESSMENT: (Educational Standing: Ability to Learn: Personal Background)

RECOMMENDED FOR. . . . .P.&.O. after D.R.Y.T. . . . . .

SUITABLE FOR COMMISSION. . .Yes. . . . . .

Signed R. W. Philp F/O

---

5. MEDICAL OFFICER

Medical Category. . . .A.1.B.A.3.B. . . . . .

ASSESSMENT : (Physical: Temperamental)
Fit. Average.

RECOMMENDED FOR. . .P.&.O. . . . . .

SUITABLE FOR COMMISSION. . Yes with training. . . . . .

Signed J. T. White F/L

---

6. INTERVIEWING OFFICER

ASSESSMENT: (General Fitness)
Medium build--neat-clean-good appearance--pleasant personality--confident-sincere-quick response--self reliant--good family background--swims & plays baseball moderately--appears to have courage & stability--Average Air-crew material.

RECOMMENDED FOR . . .P. & O. . . . . .

SUITABLE FOR COMMISSION . Yes with training. . . . . .

Signed N. J. Moran F/D

FOUND ACCEPTABLE FOR . . .P. & O. . . . . for: (C.McNicoll), Squadron Leader, Commanding Officer

Date: 19/2/42 . . No . 11 . . Recruiting Centre RCAF

A.F.M.5
24. 12. 41

Certified to be the original true copy on file.
. . . . . .
J. F. Macmillan F/O

J.A.T. CANADA

J. 85722.

To be made out in duplicate

M.F.M. 5
200M—7-40 (6098-9)
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 SMITH, SYDNEY, LEMMINGTON, FERN, HIGGS,
(Surname first—Christian names in full—Block capitals)

(2) Regimental or Air Force Number and Rank J 85722

(3) Unit RAF STATION, LUDFORD MAGNA, LINCOLNSHIRE

(4) Are you married? YES

(5) If married, state,

(*a*) Full name of your wife MRS. CLAIRE DAUPHINAIS SMITH

(*b*) Present postal address of wife 14 MADISON AVE. TORONTO, ONTARIO, CANADA

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

(7) Are you a widower? —

(8) Have you any children? NO Number of boys — Girls —

Names and ages —

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

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

Name NIL,

Postal Address

[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.....

.....

.....

(11) Is your father alive? YES

If so, state name and address, occupation MR. S. SMITH, 1102A YONGE ST., TORONTO, ONTARIO, CANADA.

(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? NO

If so, state name and address.....

.....

(15) If your mother is a widow, are you her sole or partial support? N/A.

(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.....

Full Name.....

Postal Address.....

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

.....

(18) Are you insured? YES

If so, in what Company? LONDON LIFE - MAIN OFFICE, BAY ST. TORONTO - No: 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.

L E Smith P/O
(Signature of officer or man)

Date 29 MAY 1944

R Clare F/O for W/C.
Officer Commanding 107 Sqn. RAF.

Date 31/5/44

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.

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 Evans Edmund Leon Hess Smith (b) Reg'l. No. 165239
2. (a) Arm of service R.C.A.F. (b) Unit Dist Manning Dept (c) Rank A.C.2
3. (a) Date of birth June 9/13 (b) Have you any dependents? Yes (c) Place of residence at time of enlistment Val D'Or Que
4. (a) Place of enlistment Toronto Ont. (b) Date of enlistment May 30/42

Section B—EDUCATION AND TRAINING

5. (a) State age on finally leaving school 18 yrs (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 Matriculation
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? No (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? English (b) What languages do you read well? 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? —

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 Lamaque Mines Address Bourlamaque Quebec
19. Nature of employer's business (for instance, "farmer", or "building contractor", or "boot factory", or "iron foundry", or "retail store", etc.) Gold Mine
20. (a) Your specific occupation Sampler (b) Number of years' experience at this occupation with any employer 1 Yr.
21. (a) Did your employer promise definitely to give you employment on discharge? No. (b) Did your employer refuse to promise you employment on discharge? No (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? No (b) Do you feel competent to operate a farm? No (c) If so, in what kind of farming?
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.)
28. State any employment preference or ambition you may have, other than indicated elsewhere in this form Mining Or Civil Engineering

R.C.A.F. Records Office Rec'd MAY 11 1942 C.I.B. O.K. R.C.A.F. S.L. P.

DATE May 11/42 194 SIGNATURE Sgt. Smith

FOR COMPLETION AND RETURN BY 1 **Form P. 64**

Mrs. Sydney Emmington Fern H. Smith
14 Madison Ave.,
Toronto, Ont.

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

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

and the following number quoted:—

H.Q. J85722 FD 23

DEPARTMENT OF NATIONAL DEFENCE

ESTATES BRANCH

OTTAWA, ONT.

June 26 1945

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

SMITH Sydney E.F.H. ~~P/O~~ F/O.

J85722 R. C. A. F. O/S

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

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

R. Sydney Smith Col.

Director of Estates.

CYS/VS

M.F.W. 77
6M—4-45 (7053)
H.Q. 1772-39-972

ANSWER IN FULL ALL APPLICABLE QUESTIONS

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

Degrees of Relationship	RELATIVES required to be accounted for		INFORMANT'S STATEMENT: NAME IN FULL of any Relative, if any, in each degree specified	Age	ADDRESS IN FULL of each surviving Relative, opposite his or her name, and date of death of each deceased relative
1	Widow of the Deceased.....		Claire Madeleine Smith	25	14 Madison Ave Toronto
2	Children of the Deceased and dates of their Births.....		none.		—
3	Father of the Deceased.....		Sydney Smith	57	1102½ Yonge St Toronto.
4	Mother of the Deceased.....		Deceased.		—
5	Brothers of the Deceased	Full Blood	Vincent Lawrence	29	177 Gardenctve Toronto.
			Alfred Stanley	21	1102½ Yonge St Toronto
		Half Blood			
6	Sisters of the Deceased	Full Blood	Eileen Lydia Carey.	33	1465 Dundas St W. Toronto.
		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
	Alfred Born 1921 Died 1921	—	—

ANSWER FULLY EACH QUESTION ON THIS PAGE

PARTICULARS AS TO IDENTITY

8	Full names of the deceased.	Sydney Emmington Fern Higgs-Smith
9	Date of his birth.	Jan 9/1913.
10	Place and date of his marriage.	Toronto April 4/1942
11	Place and date of his parents' marriage.	Toronto Nov 3/1910

PARTICULARS OF DOMICILE

12	Place where deceased was born.	76 Redwood Ave Toronto
13	State, in order, the Province, State and/or County in which he resided before enlistment and the period of time in each.	(a) Ontario 24 years (b) Quebec 5 " (c) (d)
14	Nature of employment before enlistment.	Sampler.
15	State whether he owned the premises in which he lived, and, if so, where situated.	—
16	Name place where deceased stated he intended to make his permanent home.	—

PARTICULARS OF ESTATE

17	Did the deceased leave a Will other than a Service Will? If in your custody, please forward. If not, can you state where it is?	No other than service Will
18	If married, and domiciled in the Province of Quebec or in a State in the U.S.A. or in a Country under the laws of which there is community of property between spouses,—was there a marriage contract dealing with property?	No
19	(a) Did he have a Bank, Post Office or other deposit account? (b) Give name and address of bank, etc., and the amount on deposit. (c) Do you wish it administered with the pay account? (d) If it is a joint account, state the survivor's name and relationship to the deceased.	? Maderosland he had an account overseas Cannot say. Yes.
20	Amount of War Savings Certificates purchased by the deceased and registered in his name. State where located.	~~Bank of Montreal Queen & Yonge Toronto $100. In safety deposit Box~~ NONE
21	(a) Amount of Victory Loan Bonds left by deceased. (b) State whether bearer or registered. (c) State in whose name they are registered. (d) During what loan were they purchased? (1st, 2nd, 3rd, etc.) (e) In whose possession, and address, are they?	$100 Registered His own ? Mrs Claire Smith 14 Madison Ave Toronto
22	If deceased had life insurance, name companies and amount payable under each policy and the person named as beneficiary therein.	1 in London life Beneficiary Wife 1 " " " " Father Amount ?
23	Describe other assets, if any, and estimated value thereof. Use space on page 4 if necessary.	—

OTHER PARTICULARS

24	Did the deceased after enlistment incur any debts for:— (a) His own separate board and lodging while on service. (b) Service clothing and equipment. An itemized account for each such debt should be attached hereto, and if same is correct you should mark the bill "approved" and sign same. If believed incorrect, give particulars.	—

(PLEASE TURN OVER)

nil

DECLARATION

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

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

* Widow of the deceased.

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

Claire Smith — Signature of Informant

14 Madison Ave — Address

CERTIFICATE

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

See above. — {Name of informant} is the widow of the Deceased above described. The above Declaration was made by the Informant and signed in my presence.

Dated at Toronto this 6th day of July 1945

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

J. F. Kennedy — Qualification A Com S.C.O.

Address Room 109 City Hall, Toronto

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

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

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

(24)

FROM: F/O V.L. Oury.

TO: O i/c N.A.R.

DATE: 20th Apr/1945.

AIR RAID ON COURTRAI ON 21 JUL 1944.

Investigation into crash of a 4-engined British Bomber on COURTRAI on 21 July, 1944, during the raid by British Aircraft has revealed that more than one Bomber crashed during the same raid but very little positive information appears to be available on the subject, the reason given being that the Germans were very reticent to provide information and moreover, such chaos resulted from the raid that the civil authorities failed to record anything about the crashes. Visits to the Town Hall, Commissariat of Police, and Police Sub Station at the Basse Ville COURTRAI yielded only the names and other particulars of 3 airmen who were found dead in various parts of the town at various dates after the Raid. Many civilians and a Police Officer on duty during the raid were interviewed but provided little tangible or reliable evidence.

The particular aircraft investigated appears to have crashed over a wide area of the town - one mainplane and part of fuselage in the main square, another portion of the fuselage in a street about 300 yards distant, and one engine some 300 yards from the main square in the opposite direction. It is this engine which has just come to eight, having been found amongst extensive bomb damage now being cleared. Particulars of this engine are: MERLIN No. 153525 A441221. Brass Plate on main engine bearer is stamped DRWG 3/211 SERIAL No. M.61615. Particulars of propeller found nearby are:- A5/148 DH 23 EX - 493 Mfg. No. NK8444. Both engine and prop bore signs of extensive flak damage. This wreckage has now been removed as it constituted an obstruction. It has been taken to Army Salvage Depot at LILLE.

The following information was obtained from the Police Sub-Station in the Basse Ville COURTRAI purporting to relate to part of the crew of the aircraft in question.

REF: NO. 804.S. Killed in Raid of 21/7/44. Body found on 31/7/44 on 2nd storey of bombed building in AALBEKE STEENWEG COURTRAI - AUS 423922 AIRMAN T.L. ROBERTS C.E. R.A.A.F. Body removed to Civil Hospital and subsequently taken to CEMETERY of WEVELGEM by German Authorities, for burial. (No.169 on Casualty list.)

REF: NO. 805.S. Killes in Raid of 21/7/44. Body found on 23/7/44 in street at CASINOPLAATS, COURTRAI. 528555 C.E. R.A.F. E.D.E. (name presumed "EDE"). Disposal of body as above. (No. 170 on CASUALTY list.)

REF: NO. 806.S. Killed in Raid of 21/7/44. Body found on 25/7/44 in AALBEKE STEENWEG, COURTRAI . 414916 DOWNIE A.J. R.A.A.F. C.of E. Disposal of body as above. (No. 171 on CASUALTY list.)

The a bove names and particulars also appear on the list of casualties inspected at the Bureau d'Etat Civil COURTRAI and their respective numbers on the CASUALTY list given in each case.

Investigation into report by a civilian that a further member of the crew was found 100 days after the raid, revealed that in the course of bomb damage clearance another body was discovered towards the end of October 1944 (exact date not known by Belgium authorities as matter dealt with by Civil affairs.) This body was identified as that of 427420 F/Sgt. D.B. JEFFERY R.A.A.F. PRES. He is buried in grave No. 12 British section COURTRAI CEMETERY.

A visit to WEVELGEM Cemetery and Town Hall brought to light the fact that altogether 19 aircrew casualties resulting from the raid of 21/7/44 on COURTRAI were brought to the Cemetery by the Germans, for burial. The particulars entered in the Register are as follows:

GRAVE NO.	DIED	BURIED	PARTICULARS
478	21/7/44	22/7/44	MORRISS, G.H. C. of E. B.G.A. RCAF 177548
479	"	"	BARNES, R.H. G.E.R.H. O. RAF 1337287
480/1/2/3	"	"	4 Unidentified Bodies (English Flyers)
484	"	"	SIMPSON, R.A. R.171384
485-493	"	"	9 Unidentified Bodies (English Flyers)
494	"	24/7/44	EDE, R.E. 628555
495	"	27/7/44	Unidentified Body (English Flyer)
496	"	2/8/44	Unidentified Body (English Flyer)

Over/

The last two are entered in the Register at the Town Hall Wevelgen under Reference 62 & 63 respectively but as stated are unidentified. Since the Police Register at Courtrai shows the bodies of DOWNIE and ROBERTS as having been taken to Wevelgen for burial it seems probable that Grave No. 495 contains the body of 414916 DOWNIE, A.J. found on 25/7/44 and buried on 27/7/44 and Grave No. 496, the body of AUS.423922 ROBERTS, T.L. R.A.A.F. found on 31/7/44 and buried on 2/8/44. Although everything points to this, it was not possible to establish this conclusively.

Referring to EDE, it should be noted that his service number is shown in Courtrai Records as 528555 and in Wevelgen Records as 628555.

An employee at the Courtrai Commissariat of Police, interviewed in the presence of the Police Commissioner declared that later in the day of the raid (21/7/44), he saw and gave water to slightly injured R.A.F. prisoners, survivors of one or more of the aircraft crashed in or near Courtrai.

(Sgd) V.L. Oury, F/O.

A49-36

J.A.T.P. CANADA

OFFICIAL ROYAL CANADIAN AIR FORCE CASUALTY NOTIFICATION

NUMBER J85722 (~~R165239~~) RANK ~~PILOT OFFICER~~ 410. UNIT 101 SQDN (OVERSEAS)

TRADE PILOT (G.L.)

NAME SMITH, SYDNEY EMMINGTON FERN HIGGS

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

PRESENT MARITAL STATUS MARRIED RELIGION ANGLICAN CANADIAN YES

FRENCH CANADIAN OTHER

NEXT OF KIN MRS. SYDNEY EMMINGTON FERN HIGGS SMITH

RELATIONSHIP WIFE

ADDRESS 14 MADISON AVE. TORONTO ONT.

FATHER'S NAME MR. SYDNEY SMITH

ADDRESS 1102A YONGE ST. TORONTO ONT. LIVING ON ENLISTMENT YES

MOTHER'S NAME DECEASED

ADDRESS LIVING ON ENLISTMENT NO

ADDRESS AT TIME OF ENLISTMENT MARITAL STATUS AT TIME OF ENLISTMENT

OCCUPATION

WAS MEMBER ATTACHED TO R.A.F. AT ANY TIME? YES/NO

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

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

ESTATES BRANCH JUN 11 194 H.Q. OTTAWA NATIONAL DEFENCE

CASUALTY DETAILS:

AUTHORITY CAS. SIG. NO. BOMBER MAIL LIST---d-18-APRIL-45

PREVIOUSLY REPORTED "MISSING" 21-JULY-44 AFTER AIR OPERATIONS(OVERSEAS) (OVER COURTRAI BELGIUM) AND SUBSEQUENTLY REPORTED "MISSING BELIEVED KILLED" (OFFICIAL GERMAN INFORMATION)

NOW "PRESUMED DEAD" 21-JULY-44 FOR OFFICIAL PURPOSES.

LAST WILL ATTACHED TO NOTIFICATION TO A. OF E.? YES/NO

M.F.M. 5 ATTACHED TO NOTIFICATION TO A. OF E.? YES/NO

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

DATE 30-MAY-45

W M Buchanan

FOR CHIEF OF THE AIR STAFF

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

2

ADMINISTRATOR OF ESTATES, OTTAWA

72955

orm 6

PROVINCE OF ONTARIO
VITAL STATISTICS ACT
REGISTRATION OF DEATH

Registration Number

For use of Registrar General only.

1. PLACE OF DEATH
City, Town or Village of OVERSEAS (BELGIUM) Street
(If death occurred in a hospital or institution, give the name instead of street and number)
Township of County or District of

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

3. PRINT FULL NAME OF DECEASED SMITH (Surname or last name) SYDNEY EDMINGTON FERN HIGGS. (Given or Christian names)

4. PERMANENT RESIDENCE OF DECEASED:
City, Town or Village of Toronto Street 1102A Yonge Street
Township of County or District of Province of Ontario.

5. SEX	**6.** CITIZENSHIP (See marginal note)	**7.** RACIAL ORIGIN (See marginal note)	**8.** Single, Married, Widowed or Divorced (Write the word)	**9.** BIRTHPLACE (Province or Country)
Male	Canadian	English	Married	Ontario.

10. Date of Birth: January (Month by name) 9th (Day) 1913 (Year)

11. AGE: Years 31 | Months | Days | If less than one day hrs. or min.

OCCUPATION

12. (a) Trade, profession or kind of work as spinner, grader, clerk, etc. Pilot
(b) Kind of industry or business, as paper mill, lumber, bank, etc. R.C.A.F.
(If "Labourer" specify kind of work above)

13. Date deceased last worked at this occupation July 21, 1944.

14. Total years spent in this occupation two

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

16. Name of father Smith (Surname or last name) Sydney (Given or Christian names)

17. Maiden name of mother Higgs (Surname or last name) Lydia Annie (Given or Christian names)

18. Birthplace: Father England (Province or Country) Mother England (Province or Country)

19. I certify the foregoing to be true and correct to the best of my knowledge and belief.
Given under my hand at Ottawa, this 2nd day of June 19 45.
Signature of informant For (R.C.A.F. Records Officer) Relationship to deceased
Address

20. Burial, Cremation or Removal Date (Month by name) (Day) 19 (Year)
Place of Burial (Municipality) Cemetery
Burial Permit was issued by Address

21. Funeral Director:
Name Address

22. Marginal notations (Office use only)

MEDICAL CERTIFICATE OF DEATH

23. DATE OF DEATH July (Month by name) 21, (Day) 19 44. (Year)

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

CAUSE OF DEATH		DURATION Yrs.	Mos.	Dys.
I Immediate cause — Give disease, injury or complication which caused death, NOT the mode of dying, such as heart failure, asphyxia, asthenia, etc.	(a) Previously reported missing after air operations and subsequently reported missing believed killed now for official purposes presumed dead.			
Morbid conditions, if any, giving rise to immediate cause (stated in order proceeding backwards from immediate cause).	due to (b)			
	due to (c)			
II Other morbid conditions (if important) contributing to death but not causally related to immediate cause.				

25. If a woman, was the death associated with pregnancy? Duration weeks. Was there a delivery?

26. Was there a surgical operation? Date of operation 19
State findings Was there an autopsy?

27. If death was due to external causes (violence) fill in also the following:—
Accident, suicide or homicide? Accident (State which) Date of injury July 21 44 19
Manner of injury (How sustained)
Nature of injury Presumed killed during air operations.
Specify whether injury occurred in INDUSTRY, in HOME, or in PUBLIC PLACE public place.

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

Division Registrar's Record No.
Date of Registration 19 (*For use of Division Registrar only*) (*Signature of Division Registrar*)

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

CITIZENSHIP (NATIONALITY) is defined in terms of the country to which the person owes allegiance. The term "Canadian" should be used as descriptive of a person who was born in Canada or who has subsequently become the citizen of another country. A person who was born in Canada, unless he or she has subsequently become a citizen of another country, is a natural-born Canadian citizen.

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

In case of Stillbirth consult reverse side before making out certificate.

F-59.

CONFIDENTIAL

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

ROYAL CANADIAN AIR FORCE

R.165239

Medical Board held at Toronto, Ontario. *Date* 5/2/42.

FILE NUMBER

Surname SMITH *Chr. Names* SYDNEY EMMINGTON FERN HIGGS
Nature of Commission P. O. *Date of Birth* Jan. 9/13 *Married or Single* ~~Single~~ married
Branch R.C.A.F. Spec. Res. *Hours Flown* None
Address 1102 A Yonge Street, Toronto, Ontario.

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 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	occasional granulations on eyelids.
	Wearing of Glasses	No
	Colour or Night Blindness	No
(viii)	EAR TROUBLE, Earache or Discharge from Ears	No
	Deafness, Noises in the Ears, or Dizziness	No
	Frequent Colds in Head, Catarrh or Obstruction	No
	Prolonged Hoarseness or Loss of Voice	No
	Sea, Car or Train Sickness	No
	Discomfort on Swings, Roundabouts, Switchbacks	No
(ix)	OPERATIONS	T. and A. no fractures.
(x)	Any illness or Injury not mentioned above	Measles, mumps, whooping-cough.

Education Grade X Ontario.
Present Occupation Sampler - mining Hobbies Music
Previous Service None
Athletics Tennis, swimming, baseball, (occasionally)
Habits—Smoking Yes Alcohol Yes
FAMILY HISTORY—Consumption No Diabetes Yes Haemophilia No
Nervous Ailments, Mental Trouble, or "Fits" No
Father Alive—Health a & w Dead—Cause
Mother Alive—Health Dead—Cause diabetes
Brothers (....) Alive—Health (....) Dead—Cause Infancy
Sisters (....) Alive—Health (....) 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 5/2/42 *Signature* Syd Smith *Witness* J Talbot F/L

GENERAL MEDICAL AND SURGICAL EXAMINATION

Impression given by *(a)* Physique ..... Sedentary ..... *(b)* Mentality ..... Standard .....
Body Marks, Scars, Deformities ..... Birth mark--left hip. .....
Size of Thyroid Gland ..... Normal .....
Surgical Abnormalities ..... None .....
Results of Wounds, Injuries, Operations ..... None .....

	Date Feb. 5/42	Date 20-8-42	Date	Remarks on any Abnormalities Found
Height (ins.)	67¾	68		
Weight (lbs.)	140	143		*Date*
Chest Circumference (ins.)	34-36			
Body Build (lbs.)	-7	-4		
Leg Length (ins.)	41½			
Pulse Rate — Sitting	84	84		
Pulse Rate — Standing 1st	108	96		
Pulse Rate — Standing 2nd	96	84		
Pulse Rate — After Exercise	120	168		
Pulse Rate — Time to Normal	40 S.	30		
Arterial Walls	N			*Date*
Blood Pressure — Systolic	130	126		
Blood Pressure — Diastolic	80	68		
Room Temperature	N			
Heart — Size (in cms.)	N	N		
Heart — Sounds	N	N		
Heart — Rhythm	R	N		
Lungs — Inspection	N	N		
Lungs — Palpation	N			
Lungs — Percussion	N			
Lungs — Auscultation	N			
Lungs — Expiratory Force	120			
Lungs — X-Ray				*Date*
Reflexes — Knee	N	N		
Reflexes — Ankle	N			
Reflexes — Triceps	N			
Reflexes — Abdominal	N			
Reflexes — Plantar	N			
Cranial Nerves	N			
Balancing Rod	R. L. not done.	R. L.	R. L.	
Self Balancing	R. L. 1/S 1/S	R. L. 1S 1S	R. L.	
Tremors — Fingers	None	abs.		*Date*
Tremors — Eyelids	None	abs.		
Abdomen — Liver	N			
Abdomen — Spleen	N			
Abdomen — Muscular Tone	Fair			
Urine — Albumen	Neg.	Neg		
Urine — Sugar	Neg.	Neg		
Initials of M.O.	J.T. White JOW			

40 mm. Hg. Test ..... 70 secs./8/9 11 11/11 10 11/9 10 10/10 9 ..... J.T.W. .....
Date 20-8-42 ..... 60 secs 7/8 9 10, 10 10 10, 9 7 6, 6 6 4 JOW .....
Date .....
Date .....
Date .....

21-8-42 Physically fit.
Somewhat soft.
Emotionally fairly stable. Fit
P.4 O4
(M.L. BARR) W/C J.T. White.
JOW

EYE EXAMINATION

History	Negative	N.L	
		R H - R E	
Visual Acuity	R 20/20 , c̄ —— =	20/20 +2.50 blur	
	L 20/20 , c̄ 2.50 BLUR	20/20 +2.50 20/200	
Colour Vision	Normal - Ishihara	C.V.N #9 Ishihara	
Red, Green	Orthophoria	M.R. 6m Exo 1, 26 cm Eso 3°	
Diaphragm Test (P.D. = 6.5) Bar 3.		P.D. 66 Bar at 2	
Convergence	C. = 6.5 cms.	6 cm.	
	S. C. = 10.0 cms.	8 cm.	
Accommodation	R. 9.0 cms.	7 cm.	
	L. 9.0 cms.	7 cm.	
Cover Test	Normal	sl. lat dev. R.R.	
Fundi and Media	Normal	N	
Fields	Normal	N	
Remarks:		A, B - A 3 B.	
	FIT		
	Initials of M.O. J.T.White	*Initials of M.O.* ADV	*Initials of M.O.*
	Date 5/2/42.	*Date* 20-8-42	*Date*

EXAMINATION OF EAR, NOSE AND THROAT

History	T. and A.		
Hearing	R. Ear	W.V. - 20'	W. V. 20'
	L. Ear	W.V. - 20'	W. V. 20'
External Ear, Meatus Membranes	R. Ear	N	N
	L. Ear	N	N
Middle Ear, Eustachian Tubes	R. Ear	N & P	N
	L. Ear	N & P	N
Cochlear Apparatus	R. Ear	N	
	L. Ear	N	
Vestibular Apparatus	R. Ear	N	
	L. Ear	N	
Buccal Cavity		Healthy	Clean
Teeth		Healthy	Good cond.
Gums		Healthy	Healthy
Pharynx		Healthy	N
Nasopharynx		Normal	N
Nose		Slightly congested	N
Larynx		Normal	
Remarks:			
	FIT	*Initials of M.O.* J.T.White	*Initials of M.O.* MLB
		Date 5/2/42.	*Date* 20-8-42
			Initials of M.O.
			Date

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

February 5, 1942.

Average type. Responses fairly well. Mature. Pulses amd 40 mm Hg. test fair. Eyes and ears normal.

Category A1B A3B

24/2/42 Rechecked Johnston F/L A1B, A3B

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

Signed Syd. Smith

Witnessed Johnston F/L

Dated 30/4/42

D Christie F/L

(David Christie) Flt. /Lt.,
Medical Officer, i/c,
No. 11 Recruiting Centre, RCAF,
Toronto, Ontario.

G.J.

OBSERVATIONS AND FINDINGS OF THE REVIEWING MEDICAL OFFICER

Date 21-8-42

1. Physically fit but only fair condition.
2. Emotionally stable.
3. R.H. R.E.

A1B. A3B.

R.G.M. Harbert, Flt. Lt.

N. VISION	18/24 Average
E. E. G.	7
E. C. G.	
D. CHAMBER	No trouble.

R.C.A.F Records Office
Rec'd OCT 30 1942
A. K. ..... C.I.B. .....
R. C. ..... N. I. .....
S. L. ..... P. A. ER

Confidential | R.A.F.—TRAINING REPORT | R.A.F. Form 5015.

PILOT

No. 18 OPERATION TRAINING UNIT

1. Surname SMITH Christian Names SYDNEY EMMINGTON FANE HIGGS
2. Number R.165239 3. Rank F/Sgt. 4. Course No. 13
5. Posted from 20(P) A.F.U. 12.10.43 6. Date course commenced 13.10.43. 7. Date course ended 5.2.44. 8. Posted to 11 Base, Lindholme 21.2.44

9. Ground Examinations

Subject	Marks Allotted	Marks Obtained
(a) Airmanship	300	274
(b) Armament	300	223
(c) Meteorology	100	75
(d) Navigation	200	180
(e) Signals	100	55
Total	1,000	807
PER CENT.		80.7

10. Flying Tests

Subject	Marks Allotted	Marks Obtained
(a) General Flying	400	235
(b) Applied Flying	200	115
(c) Instrument Flying ...	250	140
(d) Night Flying	100	55
(e) Link Trainer	50	40
Total	1,000	585
PER CENT.		67

11. Assessment of qualities of Character and Leadership	Marks Allotted	Marks Obtained
	100	59

12. **Remarks :** A slow starter but improved rapidly and noticeably when half-way through day cross countries. Has since shown himself to be a capable captain and pilot and very keen to obtain knowledge to improve himself further.

Not recommended for a commission at present.

Decompression Chamber Test: 25.11.43.

Date 11.2.44 Signed Thos Brown S/L
Officer Commanding.

(N.B.—Flying Times and Accident Record shown overleaf.)

13. **Flying Times** (At this Unit) :

Type of Aircraft	Time	Dual to 1st Solo	Total dual	Solo	Passenger	Formation	Instrument	Link Trainer
WELLINGTON.	Day ...	8.10	9.10	36.20	--	--	13.00	12.30
	Night...	5.45	8.30	36.40				

14. **Flying Accidents.—All** flying accidents in which this pupil was concerned while at this unit are to be noted below, whether serious or trivial, whether otherwise reported or not. If there were no such accidents, write in " None."

(1) Type of Aircraft	(2) Date of Accident	(3) Day or Night	(4) Previous Reports	(5) Nature of Accident	(6) Amount of Damage	(7) Degree of pupil's responsibility	
							Comment
(Name)	Day Month Year	" D " or " N "	e.g. 765c Number or other reports (if any)	Use one or two words (e.g. " Taxying " " Heavy Landing " " Over-shooting " etc.)	" R.U." " R.X.U." or " W.O."*	" None " " Partial " " Full " or " Unknown "	e.g. " Engine Failure " " Inexperience " " Carelessness," etc.

* Column (6) above : " R.U." —Repairable at Unit.
" R.X.U." —Repairable away from Unit.
" W.O." —Write off.

(*12125—10275) Wt. 11892—43 50M 5/43 T.S. 700

"SPECIAL RESERVE"

ROYAL CANADIAN AIR FORCE

RECORD OF SERVICE AIRMEN

J85722
~~R161239~~ A.F. No. | SMITH Surname | SYDNEY EMMINGTON FERN HIGGS. Christian Names | ANG. Religion

Born 9.1.13 Place TORONTO ONT. Country CANADA Citizen of CAN Racial Origin BRITISH

PARTICULARS OF FAMILY

M. S. D. W.

Wife's Maiden Name: DAUPHINAIS Claire (Married - 4 - 4 - 42.)

Present Address (in pencil): 1102 A Yonge St Toronto Ont.

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)

Claire Dauphinais Smith,
1102 A. Yonge St. Toronto.
(Wife)

CIVIL EDUCATION

High School Entrance yes Jr. Mat. Sr. Mat.
Technical School 1 yr. Business Courses
University 1 yr. WEP Graduate.

CIVIL OCCUPATIONS AND EXPERIENCE

Sampler.

PREVIOUS SERVICE

None.

ENLISTMENT

Date 30.4.42
At Toronto
Term Duration

Med. Cat. A 1/3 B — Date 30 4 42

Med. Cat. — Date

RANK

RANK	AUTH.	DATE
AC		30 4 42
LAC	PRO 232	26 9 42
I/Sgt	A.O. 106/43	30 4 43
Comm. P.O.	A.O. 941/44	10 4 44

TRADE

TRADE	AUTH.	DATE
O or P		30 4 42
Aircrew Pilot	PRO 232	26 9 42
Pilot Spec	A.O. 106/43	30 4 43

TRADE TESTS AND COURSES

TRADE	GP	%	P or F	DATE
O or P				30 4 42
Remustered Aircrew (O.T.S.)				30 6 42

LEAVE

FROM	TO	AUTH. AND DESCRIPTION
19 Dec. /42	9 Jan. /43	Spec. Leave.
1-3-43	14-3-43 (14 days)	Embarkation A.O. 106/43

CHARACTER AND TRADE ASSM. HONOURS, AWARDS AND MENTIONS

DATE	CHARACTER	TRADE AND ASSM.	HONOURS AND AWARDS	AUTH.
30 4 43	Awarded	Pilot	Flying Badge	A.O. 106/43
30 4 43		F. A.		A.O. 106/43

R.C.A.F. R.44C
100M—6-41 (305)
H.Q. 1062-3-58

(OVER)

MOVEMENTS AND CASUALTIES

	FROM	UNIT TO	DATE	AUTHORITY	UNIT FROM	UNIT TO	DATE
MOR 13	#11 R.C.	#1 M.D.	30.4.42				
#1 M.P. 104	"	"	30-4-42				
#1 MD, 155-42	#1 MD.	#6 SFTS.	29-6-42				
	Toronto	Dunnville	L.				
DRO 156/42	Dunnville #6 SFTS	Belleville #5 I.T.S.	14-8-42.				
DRO 257	#5 I.T.S.	#13 E.F.T.S.	24-10-42.				
	Belleville	St. Eugene					
DRO 141	Entitled to draw flying Pay		25-10-42				
D.R.O. 166	#13 E.F.T.S,	#16 S.F.T.S,	9 Jan./43				
	St. Eugene, Ont.	Hagersville Ont.					
DRO 21/43	Auth Wodraw	Radio Albouw.					
23	Dec/42 to 9	Jan/43 (18 days)					
A.O. 106/43	#16 SFTS	#1 "Y" Depot	14-1-43				
	Hagersville	Halifax N.S.					
DRO-139	#1 Y Depot	R.C.A. - T.P.	26-5-43				
		Emb. Halifax	27.5.43				
		Disemb. U.K.	4.6.43				
	(Int. P. 49)	3.P.R.C.	5.6.43				
	3.P.R.C.						

J85722 (R.O.4)

OTTAWA, Canada, 7th February, 1945.

Mrs. S.E.P.H. Smith,
14 Madison Avenue,
Toronto, Ontario.

Dear Mrs. Smith:

A report has been received from Overseas concerning certain members of the crew of your husband, Pilot Officer Sydney Emmington Fern Higgs Smith.

According to German information received through the International Red Cross Committee, Warrant Officer Class I Noble is a Prisoner of War but unfortunately wounded, and Pilot Officer R.A. Simpson lost his life on July 21st, 1944. The German report also stated that the bodies of six "unknown" were also discovered. As it is not possible to identify the "unknown", I feel sure you will appreciate that it cannot be definitely established that they were members of the crew.

I know how anxious you must be to obtain word and I am sorry indeed that I cannot give you news of a more hopeful nature. I do wish to assure you that just as soon as any news of him is received, I will communicate with you at once.

May I offer you my most earnest sympathy inthis long period of anxious waiting.

Yours sincerely,

W

R.C.A.F. Casualty Officer,
for Chief of the Air Staff.

JLW/MGS

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

Royal Canadian Air Force

CERTIFICATE OF PRESUMPTION OF DEATH

NO. 12477

This is to Certify that

J85722 PILOT OFFICER SYDNEY EMMINGTON FERN HIGGS SMITH R.C.A.F.
(Number) (Rank) (Name in Full) (Unit)

has been officially reported as missing since the 21ST day

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

Dated at Ottawa, Canada, this 30TH day of MAY 1945

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

J85722 (R.O.)

P.A.

OTTAWA, Canada, 15th January, 1947.

REGISTERED

Mrs. Claire D. Smith,
14 Madison Ave.,
Toronto, Ontario.

Dear Mrs. Smith:

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

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

Yours very sincerely,

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

/MS

ROYAL CANADIAN AIR FORCE

SERVICE

AND

PAY BOOK

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.

J-85722

Air Force No. R165239 Surname SMITH

Christian Names (in full) SYDNEY EMMINGTON

Date of Birth 9-1-13. Religion ANGLICAN.

Date of Enlistment/Appointment 30-4-42.

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

Occupation in Civil Life SAMPLER.

Signature of Holder S E Smith

Name and Address of Next-of-Kin

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

Mrs. S.E. Smith,
1102A Yonge St.,
Toronto, Ontario
(Wife)

Certified Correct H.M. Martin F/L

Date 12 May 1943 Place N.S.N.Y. Depot
Halifax

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

Branch or Trade and Group	Date of Effect	Authority	Signature and Rank of Officer making Entry
Pilot "SP"	30-4-43	A.O. 106	H.K. Martin Y/L

Rank	Date of Effect	Authority	Signature and Rank of Officer making Entry
T/Sgt.	30-4-43	A.O. 106	H.K. Martin Y/L
F/Sgt	30-10-43	P.O. 781/43	L. Nuttall W/O2
P/O	10-4-44	P.O. 941/44	L. Nuttall W/O2
F/O	26-6-44	P.O.R. 34/44	L. Nuttall W/O2

MEDALS, DECORATIONS, MENTIONS, ETC.

Particulars	Date and Authority	Signature and Rank of Officer
Pilots Flying Badge	30-4-43.	H.K. Martin Y/L

MISCELLANEOUS ENTRIES

(For entries for which space is not otherwise provided)

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

Particulars	Date and Authority	Signature and Rank of Officer

LEAVE RECORD
(With Free Railway Warrant)

From (date)	To (date)	Signature of Officer

LEAVE RECORD
(With Special Leave Warrant A.24)

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

MEDICAL CLASSIFICATION

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

BLOOD GROUP

Date	International	Initials of M.O.
	BLOOD GROUP A	

NIGHT VISUAL CAPACITY

Date	Score	Group	Initials of M.O.

IMMUNIZATION PROCEDURES
VACCINATION

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

Susceptibility Test	Date	Result	
Schick Test			
Dick Test			

PROTECTIVE INOCULATIONS*

Nature of Inoculation	Date	Dose	Initials of M.O.
A.T.T.	28-11-43	1-cc	F/LT
~~T.A.B.C~~	~~28-11-43~~	~~.5cc~~	

IMMUNIZATION PROCEDURES—Con.

Nature of Inoculation	Date	Dose	Initials of M.O.

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

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

WILL

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

In the event of my death I give

I appoint.....

Residing at.....

to be my executor.

Signature.....

Rank, Air Force No.....

Unit.....

Date.....

DOMINION OF CANADA)
PROVINCE OF ONTARIO)
County of York)
To Wit:)

IN THE MATTER OF The Application of

SYDNEY EMMINGTON FERN HIGGS SMITH

I, SYDNEY EMMINGTON FERN HIGGS SMITH, of the City of Toronto, in the County of York, in the Province of Ontario, Sampler, do solemly declare as follows:

1. That the Marriage Certificate of SYDNEY EMMINGTON FERN HIGGS SMITH attached hereto in support of my application for enlistment in the R.C.A.F., is the true Marriage Certificate of me, the declarant.

2. On said Marriage Certificate my name is set forth as SYDNEY FERN SMITH instead of my correct and full name which should have been shown as SYDNEY EMMINGTON FERN HIGGS SMITH and I believe these to be ommissions on the part of the issuing authorities.

AND I MAKE this solemn declaration conscientiously believing it to be true and knowing that it is of the same force and effect as if made under oath and by virtue of THE CANADA EVIDENCE ACT.

DECLARED before me at the)
City of Toronto, in the)
County of York, and the)
Province of Ontario, this)
25th day of April A.D.1942)

Syd. Smith

A.J. Moran F/O
A Commissioned Officer,
duly authorized for taking affidavits, etc.

R.C.A.F. Records Office
Rec'd. MAY 8 1942
O.K. ... C.I.B ...
R.C. ... N.I. ...
S. ... P.A. ...

NORTH AMERICAN DIVISION
OF THE
BRITISH INSTITUTE
OF
ENGINEERING TECHNOLOGY
LONDON, ENGLAND

OFFICES AT
JOHANNESBURG
BOMBAY, SYDNEY
CAIRO, JERUSALEM

REGISTERED AS A TRADE-SCHOOL UNDER THE TRADE-SCHOOLS REGULATION ACTS

CANADIAN INSTITUTE OF SCIENCE & TECHNOLOGY, LIMITED

TELEPHONE: ELGIN 5218-9
219 BAY STREET
TORONTO, CANADA

February 4th, 1942

Royal Canadian Air Force,
Toronto, Ontario.

Gentlemen:

This is to place on record that Mr. S. Smith is taking a course of studies with us in civil engineering.

Mr. Smith has to date made excellent progress in his studies and is presently engaged upon the study of Mathematics prior to commencing upon the main sections of his course. The work he has completed to date covers fractions, decimals, ratio and proportion, percentage, area, metric system, mensuration, and algebra.

The standard of his work has been excellent at all times as he has received an average of 94% on his papers. You will therefore appreciate that we are more than satisfied with the type of work he has maintained and are confident that if he continues as he has done in the past, he will complete his studies to the entire satisfaction of his tutors.

We therefore have no hesitation in recommending him and feel sure that he will fulfill his duties in a completely satisfactory manner.

Yours sincerely,

CANADIAN INSTITUTE OF SCIENCE & TECHNOLOGY LIMITED

W E Goodland

SECRETARY

WEG/AL

R.C.A.F. Records Office
Rec'd. MAY 8 1942
O. K. ... C. ...
R. C. ... N. I. ...
S. L. ... P A. ...

OUR FILE.....

REF. YOUR .....

DATED....APPENDIX "C"
M.10/40

ROYAL CANADIAN AIR FORCE
R.C.A.F.

EVIDENCE OF EDUCATION

This is to certify that Smith, Syd. has
(Name)

been a student at the PRE-ENTRY AIRCREW EDUCATIONAL COURSE

at Central Technical School under the auspices of:
(Place)

DOMINION PROVINCIAL YOUTH TRAINING PROGRAMME
CANADIAN LEGION EDUCATIONAL SERVICES
DEPARTMENT OF EDUCATION, PROVINCE OF .....

Underline to indicate

He has taken the final R.C.A.F. examinations in English
(Subject)

Science and Mathematics and has obtained
(Subject) (Subject)

the following marks:

Subject	Mark	(Delete word not applicable)	
~~English~~	55	Pass	~~Failed~~
Science	68	Pass	~~Failed~~
Mathematics	74	Pass	~~Failed~~

Date: April 24, 1942. Signed Jas. L. White F/O
(Teacher)

A.F.M.59
27.11.41

R.C.A.F. Records Office
Rec'd. MAY 8 1942
O. K. ... C. B. ...
R. C. ... N. I. ...
S. L. ... P. A. ...

R.C.A.F. G. 32
2000M—9-41 (855)
H.Q. 1062-9-36

ADDRESS ALL COMMUNICATIONS
TO THE REGISTRAR-GENERAL
PARLIAMENT BUILDINGS, TORONTO

ONTARIO

DEPARTMENT OF PROVINCIAL SECRETARY

REGISTRAR-GENERAL'S BRANCH

February 4, 1942

This Certificate of Birth is issued for Military, Naval and Air Force purposes only

THIS IS TO CERTIFY that the Birth of the person named hereunder is of record at the office of the Registrar-General of Ontario as of the date and place noted.

Sydney Emmington Fern Higgs Smith

Toronto

January 9, 1913

Name of Father Sydney Smith

Maiden Name of Mother Lydia Annie Higgs

Reg. February 3, 1913

1913-1-186

F. R. Johns.

Deputy Registrar-General

RHC

R.C.A.F. Records Office
Rec'd. MAY 8 1942
O.K. ..... C.I.B. .....
R.C. ..... N.I. .....
S.I. ..... P.A. .....

NAME	SMITH.		REGT. R.C.A.F.
RANK P/O.	TITLE		SN.
INIT'S S.	E. F. H.		NUMBER J. 85722.
DATE OF DEATH 21-7-44.	DIED		
CEMETERY WEVELGHEM. PARISH.			
PLOT	ROW	GRAVE NO. 435 - 489	COUNTRY BELGIUM.
COMMUNE COLL. B/W. 4 OTHERS			MAP REF.
REPORT NO W. FLANDERS 21-1	CROSS		AUTHORITY CAF. 706-522/30.
AGE	FILE NO. E/19932. BM/1611.		NEXT OF KIN:-

POWERS-SAMAS ACCOUNTING MACHINES

TRADE MARK

FACTAB

SP2958

PAT. NO. 368828 771481

REG. NO.

1 2 3 4 5 6 7 8 9 10 11 12 13 14 15 16 17 18 19 20 21 22 23 24 25 26 27 28 29 30 31 32 33 34 35 36 37 38 39 40 41 42 43 44 45 46 47 48 49 50 51 52 53 54 55 56 57 58 59 60 61 62 63 64 65

RECEIVED
SEP 16
CASUALTY
DIVISION

S.14 (Cas.) C.5.

POST PRESUMPTION MEMORANDUM NO. 984/48

FILE NUMBER P.420523/44 DATE 1.3.48

Relating to LANCASTER W.4967 Missing on 20/21.7.44

Crashed at COURTRAI

RECEIVED APR 5

NUMBER	RANK	NAME	BURIAL DETAILS	INFORMATION
			WEVELGHEM COMMUNAL CEMETERY, BELGIUM	BELGIUM
J.85722	Plt.Off.	SMITH S.E.F.H.	Buried collectively in Graves 485 to 489.	Exhumations of graves 484-490 in WEVELGHEM CEMETERY established that two Canadian members of the crew were buried in graves 484-490. Further individual identification was impossible. Graves Registration Report confirms that five members of the crew are buried collectively as shown and Plt.Off. WOELFLE is buried in Grave 490. Casualty Enquiry 266 shows Plt.Off. SIMPSON buried as indicated. Remaining member of crew, W.O. NOBLE reported safe. Previous P.P.M. 436/48 30.1.48 cancelled. Case Closed.
1869160	Sgt.	CUSTANCE C.		
1670523	Sgt.	PARKHILL A.C.		
1097178	Sgt.	McGUIGAN H.		
2206408	Sgt.	GRISDALE H.		
J.88324	Plt.Off.	WOELFLE C.H.	Grave 490 ADEGHAM CEMETERY	
J.91097	Plt.Off.	SIMPSON R.A.	Plot 10, Row D, Grave 8.	
R.147801	W.O.	NOBLE G.A.	Safe	

Circulation:-

P. File S.14 Cas. (C.5)
B.1 (Alpha) S.14 Cas. (C.6)
B.1 (Chron.Cards) Cas. Can.
B.1 (MEM)

G.161850(f)

WILL

R.C.A.F. r. 60

(1) I SMITH, Sydney Emmington ..... of the (City, Town,) (Village, Township)
Toronto
of .....in the County District of.....
Ontario
Province of .....
Sampler
(Civil Occupation)
a member of the Royal Canadian Air Force, Number..XXXXXXXXR 165239..... do hereby revoke all former wills made by me and declare this to be my Last Will

(2) I give, Devise and bequeath unto:-
My Wife: Mrs. Claire Dauphinais Smith,
1102A Yonge Street, Toronto, Ontario.

MY WHOLE ESTATE

(3) I Give, Devise and Bequeath all the rest and residue of my estate, Both real and personal, of whatsoever kind and wheresoever situated unto:-

(4) I appoint My Wife: Mrs. Claire Dauphinais Smith OF THE ABOVE ADDRESS
(Name) (Address)
..... to be the Executrix
of this my LAST WILL IN WITNESS WHEREOF I have hereunto set my hand this
.....1st.....day of .....May..... 19 .....42.....

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.

Syd. Smith
(Signature of Testator)

(5) Signature ...Allan G. Hall...
Address ...No. 1 Manning Depot, R.C.A.F., Toronto
Occupation ..Clerk.....

Signature ...J. Grant Lyons...
Address ...No. 1 Manning Depot, R.C.A.F., Toronto
Occupation ..Clerk.....

R.C.A.F Records Office
Rec'd MAY 6 1942
O. K. ..... C.I.B. .....
R. C. B. L. N. I. .....
S. L. ..... P. A. .....

W

BZ.20954.

PERSONAL EFFECTS OF NO: J.85722. P/O. SMITH. S.E.

1. Tin trunk contg:-

1. Officers tunic(wing)
1. Pr.Officer's trousers.
1. Officer's raincoat.
1. Green civilian jacket.
1. Pr.civilian trousers (brown)
1. Pr.gumboots.
4. Prs.shoes (black)
1. Pr.leather mittens.
1. Dressing gown.
2. Prs.leather gloves.
1. Cycling jacket.
1. Cycle pump (no connection)
1. Leather belt.
7. Shirts.
2. Prs.Pyjama trousers.
5. Prs.underpants.
4. Towels.
3. Vests.
1. Sports vest.
3. Pullovers.
1. Polo collar.
12. Prs.socks.
1. Collar case contg:-
5. collars.
1. Tie.
1. Pr.gym shorts.
2. Prs.slippers.
2. Prs.braces.
1. Box of drawing instruments. in leather case.
18. Handkerchiefs.
1. Pr.of sunglasses in case.
1. Snapshot album.
1. Large photograph.
1. Photograph in leather wallet.
1. Set of books (Pelmanism)
1. Leather stamp case.
1. Bunch of keys.
2. Wire coathangers.
1. Leather zip tlilet case contg:-
3. Toothbrushes.
1. Pr.nail scissors.
1. Rolls razor.
1. Tin of strap dressing.
1. Looking glass.
1. Collar stud.
1. Torch.
1. Shaving brush.
2. Toothbrushes(1 in glass holder)
1. Toilet bag (empty)
1. Face cloth.
1. Steel mirror in case.
1. Hairbrush.
1. Tin opener.
1. Safety Razor in case 'Gillette'
1. Eye bath.
1. Shaving brush.
1. Address book.
1. Wallet contg:- personal papers.
1. Razor box contg:-
1. Pr.cuff links.
1. Collar stud.
1. Badge.
1. Tube of flints.
1. Clothes brush.
1. Cycle clip.
1. Pr.suspenders.
1. Lock
1. Holdall.
1. Pilot's badge.
1. Pr.tweezers.
1. Leather writing case contg:- photos, letters and stationery. /P.T.O.

Original Station inventory signed by ??S/L dated.30.7.44
/Cont'd..Effects checked at Central Depository on 25.8.44.

1. Dictionary.
1. Carton contg:-
1. V=lise.
1. Towel.
1. Blue shirt.
1. Yellow sports shirt.
1. Vest.1. Colloured scarf.
2. Cleaning bags.
1. Jock strap.
2. Black ties.
3. Face flannels
4. Handkerchiefs.
7. Pr.socks.
1. Pr.black shoes.
1. Pr.overshoes.
1. Pr.plimsoles.

1. Small blue kit bag.
1. Nail file.
1. Pr.braces.
1. New Testament.
1. Collar.
1. Pipe smoking (in bag)
1. Propelling pencil 'Barker'
1. Pilot's badge.
1. Set coloured postcards.(view)
1. Haversack.
1. Officers Dress Hat.
1. Pr.mittens.
5. Handkerchiefs.
2. Vests.
1. Pr.black socks.
2. Shirts. 1. Vest.
1. Pr.pyjamas. 2.Prs.socks.
1. Towel. 3. Handkerchiefs.
2. Prs.underpants.

.....

NOTE:

1. Post Office Savings Bank Book - Doncaster No.47132.
National Savings Certificates for 1 unit.
The London Life Insurance Co. Declaration appointing beneficiary.
6. th Victory Loan Bond Certificate.
Cheque Book with Lloyds Bank Ltd., contg:- counterfoils and unused cheques. Identity Card.
Extracted by unit and forwarded to R.C.A.F. H.Q. Overseas, London.

.....

Cash amounting to 5/6d, found amongst the Personal Effects, has been credited to his Service Account.

.....

I N D E M N I T Y

File No. SJ.85722 Est. ....

TO THE Administrator of Estates,
Department of National Defence,
Ottawa, Canada.

and

The Royal Canadian Air Force

C.N. J.85722 P/O SMITH, Sydney, Emington (Missing)

I, the ....brother.... (relationship) of the above-named missing officer hereby undertake that in consideration of ~~XXXXXX~~ the release by the Administrator of Estates to me or as I may direct of his personal effects I will hold the Administrator of Estates and the Royal Canadian Air Force, their Officers and Servants of His Majesty, indemnified against any claim by him or by any other person in respect of the said effects (BICYCLE) or of the said release, and that I will return them or refund their value to the Administrator of Estates in the event of any such claim being established to the satisfaction of the Administrator of Estates.

Dated this ...26... day of Oct. ..... 1947.

Signed in the presence of:

Name J.E. Stephen
Address R.C.A.F. Station, Dalton
Occupation W.O. A.G.

Signature V.L. Smith
Address R.C.A.F. Station, Dalton Nr. Thirsk
Occupation A.G.

Note: To be dated, signed and returned duly witnessed to Officer i/c Estates, R.C.A.F. Overseas Headquarters, 20 Lincoln's Inn Fields, London, W.C.2.

21 9 12

R.C.A.F. A.188.

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

MARRIED or SINGLE .....

APPOINTED OR ENLISTED
AT ..... ON .....

RECORD OF PAY

NET RATE OF DEFERRED PAY $ .....

BANKING ARRANGEMENTS Imperial S.E.F.H.

No. J85722 NAME IN FULL SMITH

RATE OF PAY

D.R.O. No.	Eff. Date	Rank	Group	P.F. or A.S. Rate	Daily Rate	Add. Pay	Combined Rate	Pen. Ded.	Net Fortnight Rate of Pay £	Casualties affecting rate of pay
	10/12	P.O.	G.D.	A.S.	6/-		6/-	(28)		
34	2/4/41	P.O.	"	"	2/-		2/-	(29)		

ASSIGNMENTS

Assignee	Eff. Date	Amount	Total

DEPENDENTS ALLOWANCE

Date App. Forwarded	Relationship	Amount Awarded	Eff. Date

Mrs Smith 21.7.41 £4 522.20.
Miss Read 21.9.41 £4 770

REMARKS

N.D.T. Class.

Sheet #2.

PAY AND ALLOWANCES

894 Checked GB

Date	Particulars of Entry	Debit	Credit	Balance
	BROUGHT FORWARD from Sheet #1.		127 09	127 09
Aug	14/12/6281 2a. Res. Aug. a/pay		53 00	180 09
	" " " May-Aug. Lain		67 20	247 29
	" " " Aug. Pay	193 75		53 54
	18/3/2114 Prom. on F/O.		27 00	80 54
	22/11/4981 C.I.E.		✓ 123.	81 77
	22/11/4970 adm.		521.	86 98
(Nov) June	16/2/0312 Bank Bal. - Lloyds.		✓ 374 21	461 19
	23/12/2165.3 Mess Bill: Lydiard House	6 24.		454 93
June	12/2/2682 Nat. Sav. Cert.		✓ 3 41.	458 34
	24/2/4197 Bank Bal. - P.O.S.B.		✓ 56 01.	514 35
	To Bal.	514 35		
		714 36	714 36	
	Bug'ts L.R.C. Bal.		514 35	514 35

CARRIED FORWARD

Date	Particulars of Entry	Debit	Credit	Balance
	BROUGHT FORWARD			

CARRIED FORWARD

DEFERRED PAY NK528

Date	Particulars	Debit	Credit	Balance
	BROUGHT FORWARD	Nil		

C.I.E.
Lloyds B.E.
National Savings cert.
P.O.S.B. Acct

514.35 £2.14.7

CARRIED FORWARD

027334

R.C.A.F.
O.B. Headquarters
SEP 1942
ESTATE

OUTFIT ALLOWANCE PAID
WARRANT OFFICERS $ ..... ON .....
OFFICERS $ 200.00 ON 2.5.44
$ ..... ON .....

MARRIED or SINGLE ?

APPOINTED OR ENLISTED
AT ..... ON .....

RECORD OF PAY

NET RATE OF DEFERRED PAY $ .....

BANKING ARRANGEMENTS Imperial SYDNEY EMMINGTON

No. A/65239 NAME IN FULL SMITH, FERN iliggs

R.C.A.F. A28B. *(3406AD) WT 17873/0733 300M 6/43 M.J.B.&L. GP 7461-6

RATE OF PAY

B.R.O. No.	Eff. Date	Rank	Group	P.F. or A.S. Rate	Daily Rate	Add Pay	Combined Rate	Pen. Ded.	Net Fortnightly Rate of Pay $	Casualties Affecting Rate of Pay
	3rd Oct	F/L	S.G.	P.S.			4 60		9 20	
A/65239	Appointed	P/O	G.L.	A.S.			6 25	(2)	25 00 12 50 20 00 12 50	946 941

ASSIGNMENTS

Assignee	Eff. Date	Amount	Total
Mrs Claire Smith	1.6.43		35 00
[illegible]	1.6.44	16 80	51 80
Mrs C Smith 4/1/4423	1.6.44	23 00	69 80
Smith	1.5.44	16 80	
	1-8.44	53 00	

DEPENDENTS ALLOWANCE

Date App. Forwarded	Relationship	Amount Awarded	Eff. Date
(12)			
(12)			
(12)			
(21)			
(21)			

REMARKS

N.D.T. Class.

Missing 21.7.44 GR 522 30

Sheet #1.

PAY AND ALLOWANCES

Date	Particulars of Entry	Debit	Credit	Balance
	BROUGHT FORWARD		85 83	85 83
	AR 46782	35 31 ✓	50 52	50 52
	Pay		114 70	
24/12	AR 42211	35 00 ✓		130 22
3/1	AR 47967 1 BOT U.	35 31 ✓		94 91
	1.3666 - F/S from 24/10/43		28 20	59 60
	Pay		116 00	87 80
	A.F.	35 00		168 80
2/1	AR 49410 Fearnaught	35 31 ✓		133 49
4/2	AR 50212	35 31 ✓		98 18
	Pay		124 00	222 18
	A.F.	35 00		187 18
1/2	AR 51133	35 31 ✓ ✓		151 87
2/3	AR 54485 Lindholme	67 50 ✓		84 37
16/3	AR 55490	39 34 ✓		45 03
	Pay		120 00	
	A.F.	35 00		130 03
30/3	AR 3946	39 34 ✓		90 69
	Pay		124 00	
	A.F.	35 00		179 69
	C/F.	179 69		0
		702 73	721 73	
	C/F.		179 69	179 69
	CARRIED FORWARD	179 69		179 69

Date	Particulars of Entry	Debit	Credit	Balance
	BROUGHT FORWARD		179 69	179 69
	Pay & Allce 10/4/44 (52d @ 2.25)		117 00	296 69
	@ Squad Liddon 184 V13/546	39 34 ✓		257 35
	@ Squad Lindholme 424 JM 6843	39 34 ✓		218 01
	@ Fearnaught A.F. 44-9354	16 80 (15)		201 21
	From Pay - Mag Ext 13-4-44	134 10 (15)		67 11
	Post Allce 13-4-44	201 15 (12)		184 04
	Pay & Allce 22/5/44 V 2/806	34 70		178 74
	Wireless Mech Comm V 3/2430	10 86		
	Post Allce. V No 2774	201 15	33 27	
	June Pay	187 50	220 77	
	A	69 80	150 97	
	A11 219 Lindholme 11/5/44 VGH6LA	39 34 (12)	111 63	
	June Dep.	111 75	12 Dec.	
	July Pay	193 75	193 63	
	A	69 80	123 83	
	Dep.	120 69	3 14	
	Emergency Pay	193 75	196 89	
	A	69 80	127 09	
	Bal Non-Eff - V10-1128	127 09	0	
	Bal Forward	1083 70	1083 70	
		127 09	127 09 (12)	
	In Charge 2.			
	CARRIED FORWARD			

DEFERRED PAY NK538

Date	Particulars	Debit	Credit	Balance
	BROUGHT FORWARD			0

027334

R.A.F.
O.B. Headquarters
2 DEC 1944

R.C.A.F. A288.
(1st Issue)
WT 17-233/2753
100M 6/42
H.Q.R. & O. 750/1

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

MARRIED or SINGLE ?

APPOINTED or ENLISTED
AT TORONTO ON 30-4-42

RECORD OF PAY

NET RATE OF DEFERRED PAY $ .....

BANKING ARRANGEMENTS .....

No. R-155339 J85782

NAME IN FULL SMITH SYDNEY EMMINGTON FERN HIGGS

RATE OF PAY

D.R.O. No.	Eff. Date	Rank	Group	P.F. or A.S. Rate	Daily Rate	Add Pay	Combined Rate	Pen. Ded.	Net Fortnight Rate of Pay $	Casualties affecting rate of pay
106	30/4/42	SGT	SG	AS	3 70				32 29	
(1)	29-10-43	Flt	~	~	4 00				35 00	V 26662 - 1.0229/42 P.W. Appd. 30/1

ASSIGNMENTS

Assignee	Eff. Date	Amount	Total
SMITH MRS CLAIRE	1-2-43	23 00	
RECOCE H. M. VIC. LOAN	1-5-43	8 40	31 40
MFM 19	1-6-43	23 00	
H.M.V.L.	1-11-43	8 40	43 40
			35 00

DEPENDENTS ALLOWANCE

Date App. Forwarded	Relationship	Amount Awarded	Eff. Date

REMARKS

N.D.T. Class. 1A1

Reconciled with A47 Aug 24/44 OP

PAY AND ALLOWANCES

Date	Particulars of Entry	Debit	Credit	Balance
	BROUGHT FORWARD Debit	37 10		
May	Pay		114 70	
	AP.	31 40		
	Ent Pay	46 15		
June	Pay		111 00	
	AP.	43 40		
July	Pay		114 70	
	AP.	43 40		
	V 32855	15 65 ✓		
		35 76 ✓		87 49
	Carried forward	87 49		
		340 40	340 40	

CARRIED FORWARD

Date	Particulars of Entry	Debit	Credit	Balance
	BROUGHT FORWARD		87 49	87 49
A06	Pay		114 70	
	A.P.	43 40		
	AR 40277	31 29 ✓		
	AR 40356	31 29 ✓		
	AR 40600	31 29 ✓		64 92 ✓
Sept	Pay		111 00	
	A.P.	43 40	✓	132 52
	AR 41484	31 29 ✓		101 23
	AR 41965	31 29 ✓		69 94 ✓
Oct	Pay		114 70	
	A.P.	43 40	✓	141 24
	AR 43044	31 29 ✓		
	AR 43310	31 29 ✓		78 66 ✓
Nov.	Pay		111 00	
	A.P.	35 00	✓	154 66
	AR 43713	31 29 ✓		123 37
	AR 44317	31 29 ✓		
	AR 44910	31 29 ✓		60 79 ✓
Dec	Pay		114 70	
	A.P.	35 00		140 49 ✓
	45470	31 29 ✓		
	45890	19 67 ✓		
	V 29229 - forfeit 1 days pay 19-11-43	3 70		85 83
	CARRIED FORWARD	85 83	(OP)	85 83
		652 59	652 59	

DEFERRED PAY NK238

Date	Particulars	Debit	Credit	Balance
	BROUGHT FORWARD N.T.			Nil

CARRIED FORWARD

027334

R.C.A.F.
O.S. Headquarters
SEP 24 1945
ESTABLISHMENT

14 Madison Ave
Toronto
Aug 15/44

Administrator
of Estates
Dept of Nat. Defence
Ottawa

RECEIVED
CASUALTY BRANCH
AUG 17 1944
H.Q.
OTTAWA.
NATIONAL DEFENCE

Dear Sir

My herman Husband P.O. Smith S.B. is reported missing and I wish to state at the end of the allotted time allowed before the disposal of said officers effects that I would very much like to have all his personal effects. I understand he has a bicycle and I would like to have it given over to his brother who is also in the R.C.A.F. Overseas R. 285735 Smith Sgt. A.P.Z.

Do I understand this correctly that my husbands personal

property is kept in safe keeping
for 6 months after he was reported
missing and at the end of that time
I can have his effects transfered
here to me. Please advise as
to the proper procedure to make.
and Oblige
Mrs. S. E. Smith.

15-9-44.

J 85722 R/O
Smith, S. E. F/H.

missing
20/21 July/44.

Late Sqn/Ldr 1st May/42.
Ben: Wife.
Mrs. Claire Dauphinais
Smith
14 Madison Ave.,
Toronto, Ont.
"My whole estate."
Executrix - Same.

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

out

DEPARTMENT OF NATIONAL DEFENCE

NAVY ═══ ARMY ═══ AIR FORCE

4 AIR

STATEMENT OF WAR SERVICE GRATUITY

DECEASED MEMBER'S NAME — Sydney E.F.H. (CHRISTIAN NAMES) Smith (SURNAME)

REGISTER NO. O-180-2

PAYEE / ADDRESS — Mrs. Claire Smith, 14 Madison Ave., Toronto, Ont.

FILE NO. 21158

DATE 11 Oct/45

SERVICE NO. J.85722

FINAL RANK OR RATING F/O

DATE OF TERMINATION OF OVERSEAS SERVICE 21 July/44

DATE OF DISCHARGE 21 July/44

		$ ¢
A. TOTAL QUALIFYING SERVICE	NO. OF DAYS 814/30 EQUAL TO 27 COMPLETE PERIODS AT $7.50	202.50
B. QUALIFYING OVERSEAS SERVICE	NO. OF DAYS 423 LESS 4 INELIGIBLE DAYS, EQUAL TO 419 DAYS @ 25C. PER DAY	104.75
C. SUPPLEMENT FOR OVERSEAS SERVICE		
DAILY RATES AT DISCHARGE — PAY	$ 7.00	
SUBSISTENCE OR LODGING AND PROVISION ALLOWANCE	$ 1.70	
ADDITIONAL PAY	$	
	$	
	$	
DEPENDENTS' ALLOWANCE 1/30 OF $ 47.20	$ 1.57	
TOTAL	$ 10.27 ×7 = $ 71.89	
NO. OF DAYS 423/183	×$ 71.89	166.18
D. WAR SERVICE GRATUITY		473.43
E. DEDUCTIONS — OVERPAYMENT OF PAY AND ALLOWANCES	$	
DEPENDENTS' ALLOWANCE AND ASSIGNED PAY	$	
OTHER DEDUCTIONS	$	
F. TOTAL AMOUNT PAYABLE		473.43
G. YOUR PORTION OF GRATUITY IS—		
DEPENDENTS' ALLOWANCE IN ISSUE TO YOU $ 47.20 / TOTAL DEPENDENTS' ALLOWANCE IN ISSUE $ 47.20	OF $ 473.43	=$ 473.43

OCT 22 1945

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
PEN	JFM

TREASURY

CHECKED BY	DATE
	15/10/45

SERVICE REPRESENTATIVE

△T

ROYAL CANADIAN AIR FORCE

STATEMENT OF WAR SERVICE GRATUITY

SYDNEY E.F.H. [illegible]-SMITH
(Christian Names) (Surname)

MRS. CLAIRE SMITH
(Christian Names) (Surname)

ESS: 14 MADISON AVE,
Toronto, Ont.

Register No. .....
File No. 21152
Date 11 Oct/45
Service No. J.85722
Final Rank or Rating FO
Date of Discharge 21 July/44

Date of Termination of O/S service 21 July/44

	$	¢
A. TOTAL QUALIFYING SERVICE		
No. of days 814/30 equal to 27 complete periods @ $7.50	202	50
B. QUALIFYING OVERSEAS SERVICE		
No. of days 423 less 4 ineligible days, equal to 419 days @ 25¢ per day	104	75
C. SUPPLEMENT FOR OVERSEAS SERVICE		
Daily Rates at Discharge		
Pay .....$ 7.00		
Subsistence or Lodging and Provision Allowance .....$ 1.70		
Additional Pay		
.....$.....		
Dependents' Allowance 1/30 of $ 47.20 .....$ 1.57		
TOTAL $ 10.27 x 7 = $ 71.89		
No. of days 423/183 x $ 71.89	166	18
157.14 / 904 / 166.18		
DD. WAR SERVICE GRATUITY	473	43
E. Deductions — Overpayment of Pay and Allowances $; Dependents' Allowance and Assigned Pay $; Other deductions $		
F. TOTAL AMOUNT PAYABLE	473	43
G. YOUR PROPORTION: (D.A. in issue to you / Total D.A. in issue) = 47.20/47.20 of $ 473.43	473	43

PREPARED BY	CHECKED BY.
REN	JFM

OFFICIAL ROYAL CANADIAN AIR FORCE CASUALTY NOTIFICATION

NUMBER J85722 (R165239) RANK PILOT OFFICER UNIT 101 SQDN (OVERSEAS)

TRADE PILOT (G.L.)

NAME SMITH, STUART EDGINGTON PERCY HUGH

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

PRESENT MARITAL STATUS MARRIED RELIGION ANGLICAN CANADIAN YES

FRENCH CANADIAN OTHER

NEXT OF KIN MRS. STUART EDGINGTON PERCY HUGH SMITH

RELATIONSHIP WIFE

ADDRESS 14 MADISON AVE. TORONTO ONT.

FATHER'S NAME MR. STUART SMITH

ADDRESS 1102A YONGE ST. TORONTO ONT. LIVING ON ENLISTMENT YES

MOTHER'S NAME DECEASED

ADDRESS LIVING ON ENLISTMENT NO

ADDRESS AT TIME OF ENLISTMENT

MARITAL STATUS AT TIME OF ENLISTMENT

OCCUPATION

WAS MEMBER ATTACHED TO R.A.F. AT ANY TIME? YES/NO X

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

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

CASUALTY DETAILS:

AUTHORITY CAS. SIG. NO. BOMBER MAIL LIST---6-10-APRIL-45

PREVIOUSLY REPORTED "MISSING" 21-JUN-44 AFTER AIR OPERATIONS(OVERSEAS) (OTHER GENERAL RELIGION) AND SUBSEQUENTLY REPORTED "MISSING BELIEVED KILLED" (OFFICIAL GERMAN INFORMATION)

NOW "PRESUMED DEAD" 21-JUN-44 FOR OFFICIAL PURPOSES.

LAST WILL ATTACHED TO NOTIFICATION TO A. OF E.? YES/NO X

M.F.M. 5 ATTACHED TO NOTIFICATION TO A. OF E.? YES/NO X

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

DATE 30-MAY-45

D D Bushnell

FOR CHIEF OF THE AIR STAFF

72955

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

7

COPY FOR DOCUMENT FILE

J. 85722

To be made out in duplicate

M.F.M. 5
200M—7-40 (6098-9)
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.

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(1) Name of Officer of Other Rank SMITH, SYDNEY, EMMINGTON, FERN, HIGGS,
(Surname first—Christian names in full—Block capitals)

(2) Regimental or Air Force Number and Rank J 85722

(3) Unit R.A.F. STATION LUDFORD MAGNA LINCS.

(4) Are you married? YES

(5) If married, state,

(*a*) Full name of your wife MRS. CLAIRE DAUPHINAIS SMITH

(*b*) Present postal address of wife 14 MADISON AVE. TORONTO, ONT. CAN.

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

(7) Are you a widower? NO.

(8) Have you any children? NO Number of boys — Girls —

Names and ages —

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

JUN 14 1944

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

Name N/A.

Postal Address

[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 ——

(11) Is your father alive? YES

If so, state name and address, occupation MR. S. SMITH, 1102A YONGE ST. TORONTO, ONTARIO, CANADA SAW MAKER

(12) If your father is a widower and is totally incapacitated from earning a living—are you his sole or partial support? N/A.

(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? No.

If so, state name and address ——

(15) If your mother is a widow, are you her sole or partial support? ——

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

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? ——

(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 ——

Full Name ——

Postal Address ——

Amount contributed monthly during the past six months ——

(18) Are you insured? YES

If so, in what Company? LONDON LIFE MAIN OFFICE BAY ST. TORONTO
(Give number of policy) No. NOT KNOWN.

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.

S C Smith P/O
(Signature of officer or man)

Date 29/MAY 1944

A Stave Flt Lt a/Wg Cdr.
Officer Commanding 107 Sqn RAF.

Date 31/5/44.

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.

R.C.A.F. R. 45
90M—12-41 (1419)
H.Q. 1062-2-126

ROYAL CANADIAN AIR FORCE

Individual Record of Flying

RANK L. A. C. NO. R.165239 NAME Smith, S.E.F.H.

UNIT	PERIOD ENDING	SERIAL NO.	SINGLE-ENGINE AIRCRAFT												MULTI-ENGINE AIRCRAFT												CREW DUTIES				PASSENGER		TOTAL	
			DAY						NIGHT						DAY						NIGHT													
			1ST PILOT		2ND PILOT		DUAL		1ST PILOT		2ND PILOT		DUAL		1ST PILOT		2ND PILOT		DUAL		1ST PILOT		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
#13 E.F.T.S., St. Eugene, Ont	8-12-42		26	30			30	30	1	00			4	00																			62	00
#16 S.F.T.S. Hagersville, Ont																																		
Apr. 30-43.															60	05			74	10	8	50			7	10							42	50	150	15
Grand Totals			26	30	-	-	30	30	1	00	-	-	4	00	60	05			74	10	8	50			7	10							42	50	212	15

R.C.A.F. R. 45
90M—12-41 (1419)
H.Q. 1062-2-126

ROYAL CANADIAN AIR FORCE

Individual Record of Flying

RANK..... NO..... NAME.....

UNIT	PERIOD ENDING	SERIAL NO.	SINGLE-ENGINE AIRCRAFT												MULTI-ENGINE AIRCRAFT												CREW DUTIES						PASSENGER		TOTAL	
			DAY						NIGHT						DAY						NIGHT															
			1ST PILOT		2ND PILOT		DUAL		1ST PILOT		2ND PILOT		DUAL		1ST PILOT		2ND PILOT		DUAL		1ST PILOT		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

Confidential

R.A.F. TRAINING REPORT.

R.A.F. Form 5014

PILOT

No. 20(P) ADVANCED FLYING UNIT

1. Surname SMITH Christian Names SYDNEY
2. Number R.165239 3. Rank SGT 4. Course No. 16
5. Posted from 3. P.R.C. 6. Date course commenced 29.6.43 7. Date course ended 12.10.43 8. Posted to No.18. O.T.U

9. Flying Tests

Subject	Marks Allotted	Marks Obtained
(a) General Flying	400	240
(b) Applied Flying	200	120
(c) Instrument Flying ...	250	150
(d) Night Flying	100	65
(e) Link Trainer	50	35
Total	1,000	610
PER CENT.		61%

10. Assessment of qualities of Character and Leadership	Marks Allotted	Marks Obtained
	100	55

Degree of Suitability for further training	0 Not at all suitable	1 Moderately suitable	2 Definitely suitable	3 Extremely suitable
11. As a Flying Instructor		X		

(Mark "X" in appropriate column.)

12. **Remarks :** This pupil has worked hard, is a good average pilot with no outstanding faults and should do very well with his future flying.

Date 11th ~~September~~ October 19

Signed J.OVERBERRY W/Cdr for Officer Commanding.

(N.B.—Flying Times and Accident Record shown overleaf)

13. **Flying Times** (At this Unit) :

Type of Aircraft	Time	Dual to 1st Solo	Total dual	Solo	Passenger	Formation	Instrument	Link Trainer
OXFORD	Day ...	5.55	19.50	28.10	11.15	1.20	6.15 D/N 4.15	8.30
	Night...	5.45	10.40	17.50				

14. **Flying Accidents.—All** flying accidents in which this pupil was concerned while at this unit are to be noted below, whether serious or trivial, whether otherwise reported or not. If there were no such accidents, write in " None."

(1) Type of Aircraft	(2) Date of Accident	(3) Day or Night	(4) Previous Reports	(5) Nature of Accident	(6) Amount of Damage	(7) Degree of pupil's responsibility	
(Name)	Day Month Year	" D " or " N "	e.g. 765c Number or other reports (If any)	Use one or two words (e.g. " Taxying " " Heavy Landing " " Over-shooting " etc.)	" R.U." " R.X.U." or " W.O."*	" None " " Partial " " Full " or " Unknown "	Comment e.g. " Engine Failure " " Inexperience " " Carelessness," etc.
				None.			

* Column (6) above : " R.U." —Repairable at Unit.
" R.X.U." —Repairable away from Unit.
"W.O." —Write off.

(*11077—10274) Wt. 38188—P2393 30M 12/42 T.S. 700
(*12116—10274) Wt. 12085—49 40M 5/43 T.S. 700

A49-36

J.A.T.P. CANADA
R 165
SMITH
13

ROYAL CANADIAN AIR FORCE

JB5722

Right Index Fingerprint

Name SMITH, SYDNEY EMMINGTON F. H. ~~R 1-6-5-0-5~~ 9

Rank AC2 R C A F

Age 29 Height 5'8" Weight 140

Hair LIGHT BROWN Eyes BLUE Hair on face LIGHT MOUSTACHE

Marks, scars, etc. NONE VISIBLE

Syd Smith (Signature of holder)

T E Johnson FLT/LT (Signature of issuer)

Place NO. 1 "M" DEPOT TORONTO Date MAY 4/42

Card serial number 143364

IF YOU LOSE THIS CARD, notify your C. O. immediately, giving him full particulars.

IF YOU FIND THIS CARD, please mail in an envelope addressed to: "The Secretary, Dept. of National Defence (Air); Ottawa, Canada; attention. P. I. B."

NO POSTAGE NECESSARY.

27/5/81

SPECIAL RESERVE

M.F.M. 16D
200M—6-41 (769)
H.Q. 1772-39-1763

PARTICULARS OF MARRIAGE AND/OR BIRTH, AND/OR DEATH CERTIFICATES PRODUCED FOR INSPECTION

This form is to be attached to M.F.M. 16 or M.F.M. 16A where applicable in all cases and to accompany these forms to the Dependents' Allowance Board

DETAILED INSTRUCTIONS ON REVERSE SIDE OF FORM

Name of Officer or Enlisted Man Smith, Sydney Ennington Fern Official No. R.165239

Rank AC 2 Unit R.C.A.F.

Unit Stationed at #1 M. D. Toronto, Ont.

To—The Dependents' Allowance Board:—

I hereby CERTIFY that the above named has produced for my inspection the authentic Certificate of Marriage, Birth and Death, true and exact particulars of which are as follows:—

Particulars of Marriage Certificates Produced

Names of Parties to Marriage (Enter maiden name of wife)	Date of Marriage	Place of Marriage	*STATUS S., B., W. or D.	Name and Designation of Official Performing Ceremony
Sydney Fern Smith			B	
	Apr. 4/42	Toronto, Ont.		J.A. Miller
Claire Dauphinais			S	

*STATUS: S.—Spinster. B.—Bachelor. W.—Widow or Widower. D.—Divorced.

Particulars of Birth Certificates Produced

Name of Child	Date and Year of Birth	Place of Birth	Full Name of Father	Full Maiden Name of Mother
NIL	NIL	NIL	NIL	NIL

Particulars of Death Certificates Produced

Name of Deceased	Date of Death	Place of Death	Name and Designation of Signer of Certificate
NIL	NIL	NIL	NIL

NOTE:—Where circumstances are exceptional, such as Separation or Divorce or Adoption of Children, attach the documents produced to you. The Board will make copies of all original documents and return the originals to the applicant. List any documents attached, hereunder—(If none, insert 'Nil'). NIL

R.C.A.F. Records Office
Rec'd. MAY 8 1942
O.K. ... C.I.B. ...
R.C. ... N.I. ...
S.L. ... P.A. ...

Date 30-4-42 J.F. Macmillan F/O

SIGNATURE. RANK AND APPOINTMENT

OFFICER COMMANDING, R.C.A.F. RECRUITING CENTRE, TORONTO, ONT.

UNIT