J88747
TOBIN
LEO SARSFI

R.C.A.F. Special Reserve

AIR FORCE No. R108399 POSTED TO #'14 A.M.D. St. Hubert, P.Q. TRADE Pilot or Observer Standard

# ROYAL CANADIAN AIR FORCE

## (ATTESTATION PAPER)

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

1. Surname Tobin (TOBIN) FULL Christian Names Leo Sarsfield (LEO SARSFIELD)
2. Present Address 630 Roslyn Ave Westmount P.Q. Telephone WA 6007
3. Permanent Address 630 Roslyn Ave Westmount P.Q. PL 9613
4. Place of Birth 77 Cote des Neiges Ave Citizenship Canadian
5. Date of Birth October 15 1919 Married, Single, Widower, Separated, Divorced Single
6. Particulars of Children

| Name | Date of birth | Name | Date of birth |
|---|---|---|---|
| N.A. | N.A. | N.A. | N.A. |
| | | | |
| | | | |
| | | | |

7. Occupation Travel clerk 8. Religion Roman Catholic. (State denomination)
9. Languages English fluently French fluent & a little (State proficiency)
10. Next of Kin (Full Name) Leo Sarsfield Tobin Relationship father
" Address 630 Roslyn Ave Westmount P.Q.
11. Father (Full Name) Leo Sarsfield Tobin Birthplace Stratford Ont
" Address 630 Roslyn Ave Westmount P.Q. Citizenship Canadian
" Occupation Mrs. Tobin's travel Service
12. Mother (Full Maiden Name) Ida May Hart Birthplace Toronto Ont.
" Address 630 Roslyn Av. Westmount P.Q. Citizenship Canadian
13. Details of any Naval, Military or Air Force Service:

| Unit | Place | Rank | Trade | Date From | Date To | Reason for discharge |
|---|---|---|---|---|---|---|
| Lower Canada College Cadets | Montreal P.Q. | Cadet | | 1934 | 1937 | Left for other emp. |
| Loyola C.O.T.C | Montreal P.Q. | | | 1940 | 1941 | Join RCAF |

R.C.A.F. Records Office Rec'd JUL 4 1941 O.K. C.I.B. R.C.N.W.M.P. N.I. S.I. P.A.

14. Honours, Awards, Mentions
15. Are you now on any Naval, Military or Air Force Reserve? Loyola C.O.T.C
16. Have you previously made application to join the R.C.A.F.? no If so, where? N.A.
When? N.A. Result N.A.
17. Were you ever discharged from any branch of His Majesty's Forces as Medically Unfit? No
If so, state nature of disability N.A.
18. Have you ever been or are you now in receipt of a Disability Pension? No
If so, state nature of Disability N.A.
19. Have you ever been convicted of an indictable offence? No If so state nature N.A.
20. Are you in debt? No If so, state particulars N.A.

R.C.A.F. Form R. 100
400M—6-40 (5738)
H.Q. 1062-3-83

88-10-8

21. Particulars of Education:

| | Name of school | Date From | Date To | Courses—Subjects, etc. |
|---|---|---|---|---|
| Primary Education—Public or Separate School | Lower Canada College. | 1930 | 1936 | Latin, Geometry, algebra, English French. |
| High School—Collegiate Institute, etc. | | | | |
| Technical School | | | | |
| University or School other than above | St Leo's High (Both Montreal P.Que.) | 1936 | 1938 | (3rd year high) |
| Correspondence Courses, etc. | | | | |
| | | | | |

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

| Employer and place | Duties, trades, positions | Date From | Date To | Reason for leaving |
|---|---|---|---|---|
| | | | | |
| Tobin's Travel Bureau 1240 Peel Street Montreal Que. | Travel clerk and tour conductor | 1939 | 1940 | |

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

24. Special Qualifications, Hobbies, etc., useful to the R.C.A.F. I have car for two years; motor, army training,

25. Sports engaged in. State: extensively, moderately, occasionally Swimming; tennis, golf (extensively); skiing, boxing, gym (extensively) cycling track rugby (moderately)

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

~~If for Ground Duties, state Air Force trade in which you wish to enlist~~ N.A.

If for Flying Duties, state preference as (a) Pilot; (b) Observer; (c) Air Gunner (d) Wireless Operator (Air Crew). (Cross out words not applicable.)

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

| Name | Address all in Montreal P.Q. | Occupation |
|---|---|---|
| Mr James Muir | 27 Holton Ave | Asst Gen. Manager Royal Bank Head Office |
| Capt. K. J. Rea | 1529 McGregor St | Architect |
| H. L. Stinson | 4200 Sherbrooke W. St. | Mtg. Agent. |

28. Other information that may have any bearing on this application Haven't taken up smoking. Drink very little A keen interest in aeronautics.

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 October 1940 Signature Leo Tobin

NATIONAL REGISTRATION CERTIFICATE PRODUCED.

**FOR OFFICIAL USE ONLY**

(A) *Report of Interviewing Officer—*

[redacted]e.....General appearance.....

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

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

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(B) *Report of Trade Test—*

Trade in which tested.....

Result.....

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

.....

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

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

I, **Leo Sarsfield Tobin** .....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 **June 28th** 19**41** Leo Tobin
Signature of Recruit

---

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

I, **Leo Sarsfield Tobin** .....do sincerely promise and swear (or solemnly declare) that I will be faithful and bear true allegiance to His Majesty.

Date **June 28th** 19**41** Leo Tobin
Signature of Recruit

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(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,

**Montreal, P.Q.** this **28th** day of **June** 19**41**

P. O. Bastien Lt
Signature of Officer — Rank

**RCAF. Recruiting Centre, Montreal.**
Unit

# FOR OFFICIAL USE ONLY

## CERTIFICATE OF MEDICAL EXAMINATION

*Part 1. Information obtained from the applicant—*

1. Age. 21 2. Have you ever suffered from any of the following defects in health?

| | | | |
|---|---|---|---|
| (a) Rheumatism | Nil | (j) Nasal Trouble | Nil |
| (b) Tuberculosis | Nil | (k) Ear Disease | Nil |
| (c) Bronchitis or Asthma | Nil | (l) Eye Disease | Nil |
| (d) Heart Disease | Nil | (m) Epilepsy | Nil |
| (e) Kidney or Bladder Disease | Nil | (n) Nervous or Mental Disease | Nil |
| (f) Gastro-intestinal | Nil | (o) Syphilis | Nil |
| (g) Rupture | Nil | (p) Gonorrhoea | Nil |
| (h) Varicose Veins | Nil | (q) Bone Fracture | Fracture of 2 ribs |
| (i) Flat or Deformed Feet | Nil | (r) Other Disease or Defect | Tonsillectomy |

3. Have you ever worn glasses? No

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

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

Signature of Applicant

Examiner's Remarks *re* above Col Vis: R. B.C.: 122-70

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

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

2. Height 5 feet 9 1/2 inches. 3. Weight 175 pounds.

4. Complexion Dark 5. Color of Eyes Brown Hair Brown

6. Development {Good / ~~Fair~~ / ~~Poor~~} 7. Chest Measurement—Full expiration 38 inches

Range of expansion 2 inches

8. Hearing—Right W V 20 Left W V 20 Tympana—Right 2 perforations Left wax

9. Vision—Without glasses—Right 20/40 With glasses—Right 0

Left 20/20 Left Corr. to 6/9

10. Condition of mouth and teeth Healthy

11. Urine—Albumen Neg Sugar Neg

12. Abnormalities (Congenital and Pathological) found on Examination

11-6-41 X-Ray # 81048 Neg DHP

*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 A1 B2 Qual.

~~A+BF~~ A1 B2 Qual.

Any special remarks of the Medical Officers 26-6-41 Recheck normal DHP.

vision slightly defective -

2 perforations of right tympana. Nil.

5-6-41 - No perforations now. To bring oculists report - A+B1. Qualified

9-6-41 - Recall. Now fit A1 B2 Qual.

Part 2 Cont'd.

13. Reflexes N

14. Heart N

15. Lungs N

16. Blood Pressure 120/80

17. Colour Vision N

Date 22-10-40 19.....

L W Benjamin Lt — President

Capt Barker Lt — Member

Member

HF.

3
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344

Tobin L. W.

34 OTU

R 108399 7336

Tobin · L W ·

NAME TOBIN, Leo Sarsfield, FILE NO. FD239

RANK ~~W.O.~~ P/O ~~AIR GUNNER~~ CATEGORY ~~MISSING~~ PRES. DEAD. REG. NO. J88747 - ~~R108392~~

DATE OF DEATH: 20 AUG 44 MOTHER LIVING: YES WIFE: YES

MINISTERIAL CARD: 6-9-44 ROYAL MESSAGE: MEMORIAL CROSS TO CHAPLAIN:

DEL'D TO MOTHER:

To Wife-

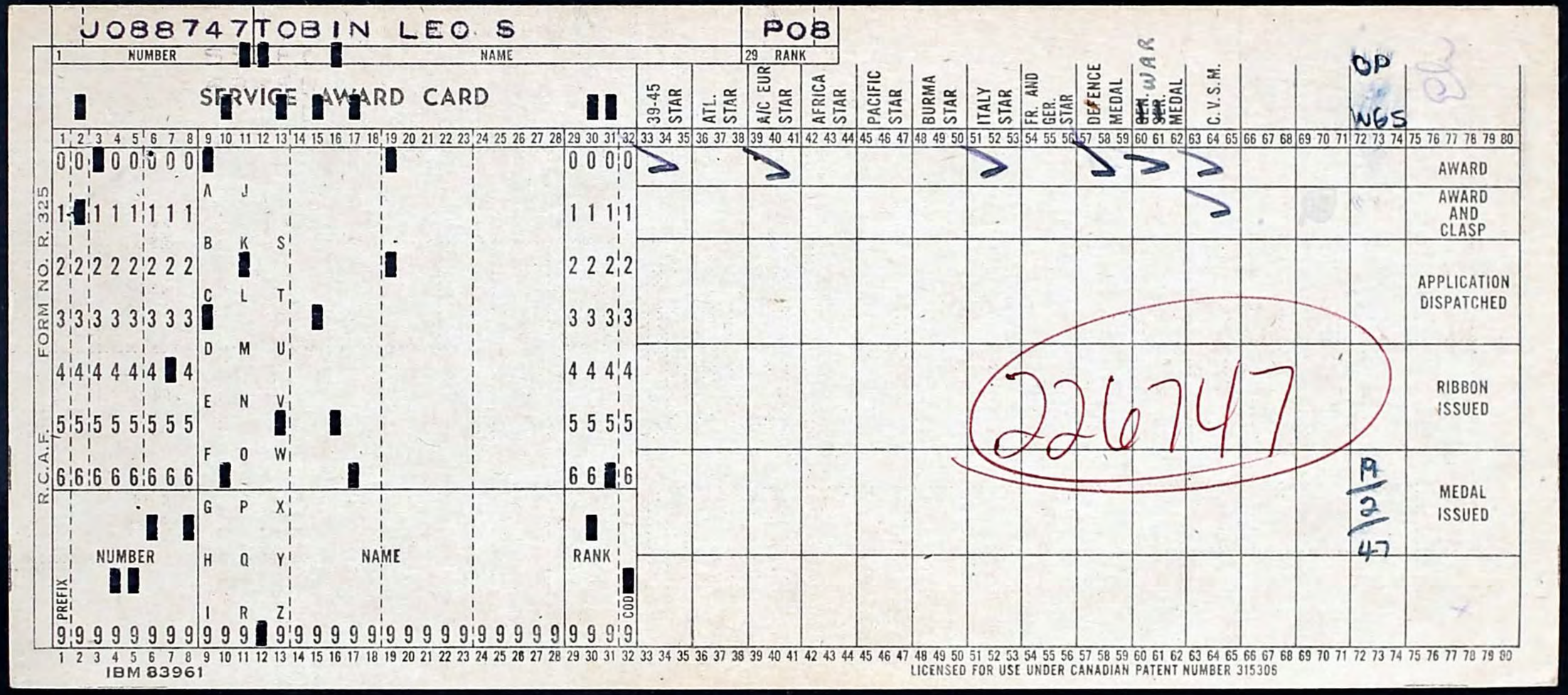
To Wife- 7-12-45 DEL'D TO WIFE:

Mrs. L. S. Tobin,
3219 Westmount Blvd.,
Westmount, Montreal,
Quebec.

Mother-
Mrs. L. S. Tobin,
~~1240 Peel Street~~, 1469 Drummond St. Apt. 93.
Montreal, Quebec.

COMMAND:

RELIGION:



J088747 TOBIN LEO S P08

1 NUMBER NAME 29 RANK

SERVICE AWARD CARD

FORM NO. R. 325

R.C.A.F.

| 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 (WAR) | C.V.S.M. | | | | |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| ✓ | | ✓ | | | | ✓ | | ✓ | ✓ | ✓ | | | OP WGS | AWARD |
| | | | | | | | | | | ✓ | | | | AWARD AND CLASP |
| | | | | | | | | | | | | | | APPLICATION DISPATCHED |
| | | | | | | | | | | | | | | RIBBON ISSUED |
| | | | | | | | | | | | | | P/2/47 | MEDAL ISSUED |

226747

NUMBER NAME RANK

PREFIX COD

IBM 83961

LICENSED FOR USE UNDER CANADIAN PATENT NUMBER 315305

7293. 4/4/5-0

ASSELIN

Mrs. Mary Joy ~~Tobin~~ (Widow) RE-MARRIED.

~~3219 Westmount Blvd.,~~

~~Westmount,~~

~~P.Q.~~ ~~oct.-46.-~~

27 ROSEMOUNT AVE.,

MONTREAL 6, QUE. 3/4/48

MEMORIAL B R

DATE DESP.....

REGN. NO 3181

To be made out in duplicate

R.C.A.F. Special Reserve

M.F.M. 5
200M—2-41 (9495-6)
H.Q. 1772-39-1651

# PARTICULARS OF FAMILY OF AN OFFICER OR OTHER RANK OF THE CANADIAN ARMY (AF) 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 Canadian Army (AF) 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 individual's new unit.

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(1) Name of Officer or Other Rank.....TOBIN LEO SARSFIELD.....
(Surname first—Christian names in full—Block capitals)

.....

(2) Regimental or Official Number and Rank.....R 108399.....AC2.....Standard.....

(3) Unit.....Royal Canadian Air Force.....

(4) Are you married?.....NO.....

(5) If married, state,

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

.....

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

(6) If married, have you been regularly supporting your wife? If not—state reasons.....NO.....

.....

(7) Are you a widower?.....NO.....

(8) Have you any children?.....NO..... Number of boys.....N.A..... Girls.....N.A.....

Names and ages.....N.A.....

.....

R.C.A.F Records Office
Rec'd JUL 4 1941
O.K. C.I.B.
R.C.M.P. N.I.
S.J. P.A.

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

.....

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

Name.....N.A.....

Postal Address.....N.A.....

.....

[SEE OTHER SIDE]

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

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

(11) Is your father alive? Yes

If so, state name and address, occupation Leo Sarsfield Tobin, President, Tobin's Travel Service, 630 Roslyn Ave., Westmount, P.Q.

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

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

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

(14) Is your mother alive? Yes

If so, state name and address Ida May Davis (Tobin) 630 Roslyn Ave, Westmount, P.Q.

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

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

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

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

If so, state the following particulars:—

Relationship N.A.

Full Name N.A.

Postal Address N.A.

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

(18) Are you insured? Yes

If so, in what Company? New York Life Ins. Co.,
(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.

Leo Tobin
(Signature of officer or man)

Date June 28th 1941

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for Officer Commanding R. C. A. F. Recruiting Centre, Montreal, P.Q.

Date June 28th 1941

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.

**CONFIDENTIAL**

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

R.C.A.F. Special Reserve

R.C.A.F. M.2
50M—12-39 (3211)
H.Q. 1062-10-2

(2)

# ROYAL CANADIAN AIR FORCE

**Medical Board held at** Montreal, P.Q. *Date* 22-10-40

FILE NUMBER 108399

*Surname* TOBIN *Chr. Names* LEO SARSFIELD
*Nature of Commission* M-2-3 *Date of Birth* 15-10-19 *Married or Single* S
*Branch* General List. *Hours Flown* None
*Address* 630 Roslyn Avenue, Westmount, P.Q.

HAVE YOU ANY HISTORY OF:—

| | | |
|---|---|---|
| (i) | NERVOUS TROUBLE or Nervous Breakdown | NO |
| | Severe or "Sick" Headaches, Migraine | NO |
| | Fits or Convulsions of any kind | NO |
| | Sun or Heat Stroke | NO |
| | Head Injury or Concussion (including "knock-out") | NO |
| | Insomnia, Nightmares, Sleep-walking, or Bed-wetting | NO |
| (ii) | LUNG TROUBLE or Consumption | NO |
| | Bronchitis, Pneumonia or Pleurisy | NO |
| | Asthma or Hay Fever | NO |
| (iii) | HEART DISEASE, "Weak or Strained Heart" | NO |
| | Fainting Attacks or Giddiness | NO |
| | Rheumatism, Rheumatic Fever or "Growing Pains" | NO |
| | Frequent Sore Throats or Tonsillitis | NO |
| | Diphtheria, Scarlet Fever or Scarlatina | NO |
| (iv) | STOMACH or BOWEL TROUBLE | NO |
| | Chronic Indigestion or Pain after Food | NO |
| (v) | KIDNEY or BLADDER TROUBLE | NO |
| | Syphilis or Gonorrhœa | NO |
| (vi) | TROPICAL DISEASE | NO |
| | Malaria | NO |
| | Dysentery | NO |
| (vii) | EYE TROUBLE or Inflammation of Eyelids | NO |
| | Wearing of Glasses | NO |
| | Colour or Night Blindness | NO |
| (viii) | EAR TROUBLE, Earache or Discharge from Ears | NO |
| | Deafness, Noises in the Ears, or Dizziness | NO |
| | Frequent Colds in Head, Catarrh or Obstruction | NO |
| | Prolonged Hoarseness or Loss of Voice | No |
| | Sea, Car or Train Sickness | NO |
| | Discomfort on Swings, Roundabouts, Switchbacks | NO |
| (ix) | OPERATIONS | NO |
| (x) | Any Illness or Injury not mentioned above | Fracture of left clavicle and 2 ribs, Tonsillectomy, typhoid at 12. |

Education High School 3 yrs.
Present Occupation travel clerk Hobbies NO
Previous Service NO
Athletics Rugby, swimming, skiing.
Habits—Smoking NO Alcohol rarely
FAMILY HISTORY—Consumption NO
Nervous Ailments, Mental Trouble, or "Fits" NO
Father Alive—Health good Dead—Cause
Mother Alive—Health good Dead—Cause
Brothers (....) Alive—Health (....) Dead—Cause
Sisters 2 (...) Alive—Health good (....) Dead—Cause

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

*Date* 22-10-40 *Signature* Leo Tobin AM *Witness* G. Peloquin Lt.

# GENERAL MEDICAL AND SURGICAL EXAMINATION

Impression given by *(a)* Physique ..athletic.. *(b)* Mentality ..alert..
Body Marks, Scars, Deformities ..scar bit small r. 4th finger rt. hand.
Size of Thyroid Gland ..not palpable..
Surgical Abnormalities ..None..
Results of Wounds, Injuries, Operations ..None..

| | | Date 22-10-40 | Assessing Room | Date 5-6-41 | Assessing Room | Date 7-11-41 M.S.B. | Assessing Room | Remarks on any Abnormalities Found |
|---|---|---|---|---|---|---|---|---|
| Height (ins.) | | 69½ | | 69½ | | 69 | | |
| Weight (lbs.) | | 175 | | 180 | | 185 | | *Date* |
| Chest Circumference (ins.) | | 37 | | 39½-41 | | | | |
| Body Build (lbs.) | | +27 | +34 | 146 | | | | |
| Leg Length (ins.) | | | | 42 | | 44 | | |
| Pulse Rate | Sitting | 84 | | 72 | | 78 | | |
| | Standing 1st | 96 | | 84 | | | | |
| | Standing 2nd | 108 | | 78 | | | | |
| | After Exercise | 120 | | 96 | | | | |
| | Time to Normal | 30 sec. | | 40 | | | | |
| Arterial Walls | | soft | | soft | | N | | 7-11-41 Sinus Arrythmia |
| Blood Pressure | Systolic | 127 | | 134 | | 145 | | |
| | Diastolic | 70 | | 70 | | 70 | | |
| Heart | Size | N | | N | | n | | |
| | Sounds | N | | N | | n | | |
| | Rhythm | reg. | | reg. | | n | | |
| Lungs | | N | | N | | n | | |
| Breath held | | 70 | | 60 | | | | |
| Expiratory Force | | 120 | | | | | | |
| Vital Capacity (Best of 5) | | | | | | | | *Date* |
| Reflexes | Knee | N | | N N | | N | | |
| | Ankle | N | | N N | | N | | |
| | Triceps | N | | N N | | N | | |
| | Abdominal | N | | N N | | N | | |
| | Plantar | N | | flex | | N | | |
| Cranial Nerves | | N | | intact | | N | | |
| Balancing Rod | | R. L. FS FS | R. L. | R. L. 2S 1S | R. L. | R. L. | R. L. | |
| Self Balancing | | R. L. FS FS | R. L. | R. L. 1FS 1FS | R. L. | R. L. | R. L. | *Date* |
| Tremors | Fingers | SF SF | | SF | | | | |
| | Eyelids | F F | | SF | | | | |
| Abdomen | Liver | N | | N | | N | | |
| | Spleen | N | | N | | N | | |
| | Muscular Tone | N | | good | | N | | |
| Urine | Albumen | neg. | | 0 | | N | | |
| | Sugar | neg. | | 0 | | N | | |
| *Initials of M.O.* | | DRS | | Asst. | | JDCM | | |

40 mm. Hg. Test ..70 - 7/777,767,767,777,8..
*Date* ..6/677,767,888,776,6 - 65 secs. Asst.
*Date* ..7-11-41 677/687,767,766, - 50 sec.
*Date* .....
*Date* .....

Remarks by Consultant.

Fit. DRS

## EYE EXAMINATION

| | | | |
|---|---|---|---|
| History | negative | | |
| | | | |
| | | | |
| Visual Acuity | R. 20/40 , c 2.25 = 20/200 | 20/30 c 2.25 | R. 20/40 ≠ 2.50 20/200 |
| | L. 20/20 partial , c 2.25 = 20/200 | 20/20 c 2.25 ) 20/200 | L. 20/40 ≠ 2.50 20/200 |
| Colour Vision | Ishihara N | N. Ish. | N |
| Red, Green | sl. eso tendency | Hyper 1 inch, no eso or exo | M.R. ortho. |
| Diaphragm Test (P.D. = 6.5 ) | Bar at 2 | (P.D.-65 mm) exo bar | p.D. 68 Bar at 0 thru 4 at 2 |
| Convergence C. = | 6.5 cms. | 6.0 | 6 |
| Convergence S. C. = | 8 cms. | 12.5 | 7 |
| Accommodation R | 7 | | 9 |
| Accommodation L | 8 ) 6 | ) 8.0 | 9 |
| Cover Test | sl. lat. conv. R.R. | sl. lat. div. rt. R.R. | At 20' N, at 15" SL.LAT.DEV. lt. ortho. N RR |
| Fundi and Media | | N | N |
| Fields | N | N | N |
| Remarks: | Borderline | Rt. hand and eye master. Correction: Rt.10o - 1.25 cyl ≠ 0.25 - 20/15 Lf.17o - 1.00 cyl. ≠ 0.25- 20/15 | Glasses and goggles ordered Fit pilot and A.G. |
| *Initials of M.O.* | Quest | Quest | J.V.N. |
| *Date* | 22-10-40 | 5-6-41 | 7-11-41. |

## EXAMINATION OF EAR, NOSE AND THROAT

| | | | | |
|---|---|---|---|---|
| History | | | | |
| | | | | |
| Hearing | R. Ear | w.v. 20 | w.v. 20' | w.v. 20 |
| Hearing | L. Ear | w.v. 20 | w.v. 20' | w.v. 20 |
| External Ear, Meatus Membranes | R. Ear | 2 perforations of tympana | Scarring, but no perforations. | scarred |
| External Ear, Meatus Membranes | L. Ear | wax | wax | N |
| Middle Ear, Eustachian Tubes | R. Ear | N | | Pat. |
| Middle Ear, Eustachian Tubes | L. Ear | N | | Pat. |
| Cochlear Apparatus | R. Ear | | | N |
| Cochlear Apparatus | L. Ear | | | N |
| Vestibular Apparatus | R. Ear | | | N |
| Vestibular Apparatus | L. Ear | | | N |
| Buccal Cavity | | N | fit | N |
| Teeth | | N | fit | N |
| Gums | | N | fit | N |
| Pharynx | | N | fit | N |
| Nasopharynx | | N | not seen | N |
| Nose | | N | fit | N |
| Larynx | | N | not seen | N |
| Remarks: | unfit | | | JDCM. - 7-11-41. |
| *Initials of M.O.* | | DJS | Quest | Quest |
| *Date* | | 22-10-40 | 5-6-41 | 7-6-41 |

## HISTORY OF PRESENT CONDITION

Date 22-10-40

The candidate has passed through all the tests perfectly except a slight defective vision, and 2 perforations of right tympana

ApBp

5-6-51 To obtain certificate of correctibility of visual acuity and to have wax removed from left ear.

AtBt

9-6-41 Recheck - ears fit. Certificate of visual acuity is satisfactory.
Fit A1B

9-6-41 Rechecks ears fit certificate of vision satisfactory Fit A1B

M.S.B. 7-11-41Was in Gr. XI P.Q. when he stopped school at 19. Since then has worked for father as tour conductor and for Can. Nat. Steamships as assistant purser. Choice: P.O.

responsible lad of average intelligence and initaitive. Emotional stability, not more than verage. Self-confidence, average.

C.G. STOGDILL Flt/lt.

---

## OBSERVATIONS AND FINDINGS BY PRESIDENT OF BOARD

Date 22-10-40

ApBp

CATEGORY
G, B 4, B
NOV 5 1941
PRES. NO. 3 MED. SELECTION BD.
for D.M.S. Air.

Unfit Obs.

R.C.A.F. Records
Rec'd NOV 29 1941
O. K. C I
R. C. N. I.
S. L. P. A.

### MEDICAL RE-EXAMINATION

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

Date 26-5-41 Signature [signature] Witness [signature]

M.F.M. 16D
200M—9-40 (6828-9)
H.Q. 1772-39-1763

# UNIT PAYMASTER'S CERTIFICATE THAT HE HAS EXAMINED MARRIAGE CERTIFICATE AND/OR BIRTH CERTIFICATES AND/OR DEATH CERTIFICATE.

This form is to be attached to M.F.M. 16 or M.F.M. 16A 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 Tobin, Leo Sarsfield Official No. R108399

Rank Sgt. Unit No. 1 "Y" Depot,

Unit Stationed at Halifax, N.S.

To—The Dependents' Allowance Board:—

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

## Particulars of Marriage Certificates Produced

| Names of Parties to Marriage | Date of Marriage | Place of Marriage | *STATUS S., B., W. or D. | Name and Designation of Official Performing Ceremony |
|---|---|---|---|---|
| Tobin, William Leo Stanfield | 24-11-42 | Montreal, Que. | B | Rev.John Dixon |
| Thomson, Mary Joy | 24-11-42 | Montreal, Que. | S | ( C. of E.) |
| | | | | |
| | | | | |
| | | | | |

* 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 | Mother |
| | | | | |
| | | | | |
| | | | | |

## Particulars of Death Certificates Produced

| Name of Deceased | Date of Death | Place of Death | Name and Designation of Signer of Certificate |
|---|---|---|---|
| | | | |
| | | | |
| | | | |

NOTE:—Where circumstances are exceptional, such as Separation or Divorce in cases of first marriage, 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').

Date 30-11-42 S/Ldr. No. 1 "Y" Depot, Halifax, N.S.

PAYMASTER UNIT

# ROYAL CANADIAN AIR FORCE

CANADA
B.C.A.T.P.

## SERVICE CONDUCT SHEET

J88747.

Official No. ~~R 108399~~ Name and Initials (IN BLOCK CAPITALS) TOBIN L.S. Date of Enlistment 28-6-41. Sheet No. (IN WORDS) ONE Signature and Rank of C.O. FOR (J.H.KEENS) SQN/LDR. Date 8-7-41.

| UNIT AND PLACE | Date of Offence | Rank | Cases of Drunkenness (In Red Ink) | OFFENCE | Names of Witnesses | PUNISHMENT AWARDED | Date of award, or of order dispensing with trial | BY WHOM AWARDED | Date of Commencement | Date of Expiration | Initials and Rank of Officer making entry and remarks, with date |
|---|---|---|---|---|---|---|---|---|---|---|---|
| No. 3 I.T.S. Victoriaville P.Q. | 2-1-42 | AC2 | | ABSENT WITHOUT LEAVE from 0745 hrs 2-1-42 to 1330 hrs 6-1-42. Abs. 4 days, 5 hrs, 45 mins. Sec. 15(1) | Cpl. Cournoyer 6Cpl. Taylor | 5 days C.B. | 7-1-42 | (L.A. Porteous) Flying Officer | | | Forf. 5 days' pay |
| No. 3 I.T.S. Victoriaville P.Q. | 16-1-42 | AC2 | | ABSENT WITHOUT LEAVE from 0745 hrs. 16-1-42 to 0045 hrs. 19-1-42. Abs. 2 days 17 hrs. Sec. 15 (1). | Cpl. Cournoyer, Cpl. Horsman. | 7 days C.B. | 20-1-42 | (J.S.Williamson) Squadron Leader. | | | Forf. 3 days' pay ~~S/L~~ 20-1-42 |
| RCAF STATION TRENTON, Ontario | ~~27-3-42~~ | ~~AC2~~ | | ~~WHILE ON ACTIVE SERVICE did "KNOWLINGLY AND WITH INTENT TO DEFRAUD, ALTER A DOCUMENT WHICH IT WAS HIS DUTY TO PRESERVE" in that he did alter a leave pass, signed by his Commanding Officer.~~ | ~~Documentary~~ Incorrectly | ~~Admonished~~ | ~~31-3-42~~ | ~~T.A.Lawrence Group Capt.~~ | | | ..... S/L |
| | | | | WHILE ON ACTIVE SERVICE did "ABSENT HIMSELF WITHOUT LEAVE" from 0603 hrs. 27-3-42 to 2025 hrs. 29-3-42 (Absent 2 days, 13 hrs., 55 mins.) | Sgt. Brown, J.A. Cpl. Aldred, J. (Documentary) | 168 hrs. detention | 31-3-42 | T.A.Lawrence Group Captain | | | ..... S/L Forfeits 3 days pay Art. 149 (1) (a) F.R.&I. |

To be carried over

R. C. A. F. R. 72
75M—1-41 (8005)
H.Q. 1062-3-54

| UNIT AND PLACE | Date of Offence | Rank | Cases of Drunkenness (In Red Ink) | OFFENCE | Names of Witnesses | PUNISHMENT AWARDED | Date of award, or of order dispensing with trial | BY WHOM AWARDED | Date of Commencement | Date of Expiration | Initials and Rank of Officer making entry and remarks, with date |
|---|---|---|---|---|---|---|---|---|---|---|---|
| 340 T.U. Pennfield Ridge. | 17.9.42 | SGT | | W.O.A.S. Absent without leave from 00.01hrs on 17.9.42 until reporting to the Main Guard Room at 14.55 hrs on 19.9.42 (Absent 2 days 14hrs 54mins) | Cpl. Webb. (Station Police) Doc. | Reprimand. | 22.9.42 | (G.J.Spence) W/Cmdr. | | | 23.9.42 Forfeits 3 days pay under Art 149 (1) (a) F R & I. |
| | | | | | | | | | | | [illegible] F/LT. |
| No.1"Y" Depot Halifax,N.S. | 25-11-42 | SGT | | A.W.L. from 23:59 hrs.25-11-42 to 22:00 hrs.28-11-42 2 days, 22 hrs. 1 minute late reporting. | R70019 WOII Kinnon,J.M. | Severely Reprimanded | 2-12-42 | (A.Woods) W/C | | Forfeits 3 days' pay. | S/L 5-12-42. |

R.C.A.F. Special Reserve

ROYAL CANADIAN AIR FORCE

INTERVIEW REPORT

SURNAME.....TOBIN.....

CHRISTIAN NAMES.....LEO SARSFIELD.....

MARRIED.....NO. OF CHILDREN.....

N.F.

FLYING X

ING

AGE.....21.....
HEIGHT.....
WEIGHT.....

PILOT.....X.....
OBSERVER.....
W.A.GUNNER.....X.....

EDUCATIONAL:- NUMBER OF YEARS.....

High School.....3 yrs...Technical.....Commercial...

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

.....

Standing other Countries.....

FLYING EXPERIENCE:- Total hours

N O N E

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

Private Hours Solo.....Dual....Pass....

No. hours & types during last 2 yrs.....

N O N E

.....

MILITARY AND OTHER TRAINING:-

...C.O.T.C. Loyola Cadet.....

.....

.....

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

.....

HOBBIES:-.....

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

Good family background, fair appearance, confident

and pleasant. Of good character. Would do well as

Gunner or Observer.

Fair

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

REFERENCES CHECKED 26.6.41 (Date) (Initials)

CONSIDERED SUITABLE FOR COMMISSIONED RANK?.....NO.....

BEST FITTED FOR.....Air Gunner Wireless Operator.....

Pilot Fair

DATE: 21-10-40

RECRUITING CENTRE: Montreal, P.Q.

R.C.A.F. Records Office
Rec'd JUL 4 1941
O.K. ll O.I.B.
R.C.M.D. N.I.
P.A.

H. O. Badois Flt

Signature of Officer

Henri Geoffrion F.O.

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

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

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

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

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

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

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

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

MARK WITH AN X THE DESCRIPTION WHICH APPLIES

R.C.A.F. T.58A

ROYAL CANADIAN AIR FORCE

REPORT ON PUPIL PILOT--FLYING AND GROUND TRAINING

Surname TOBIN Christian Names L.S.

Number R108399 Rank A.C.2

INSTRUCTIONS

1. For instructions on the use of this form, see C.A.P. 100, Section 7.

PART I

INITIAL TRAINING

1. No. 3 I.T.S. Course No. 39 From 27-10-41 To 19-12-41.

2. Results of Examination:-

| Subject | Maximum Marks | Marks Obtained | Subject | Maximum Marks | Marks Obtained |
|---|---|---|---|---|---|
| Mathematics | 150 | 75 | Aircraft Recog. | 100 | 58 |
| Armament | 50 | 34 | Drill | 100 | |
| Signals | 150 | 129 | Administration | 100 | 76 |
| Anti-Gas | 50 | 34 | Navigation | 200 | 33 |
| | | | General Studies | 100 | 73 |

3. Maximum Marks 1000 Marks Obtained 512 Percentage 51.2

4. Passed or Failed F Position(Group) in Class ... No. in P's Class ...
No. of Groups ...

5. Considered ~~Suitable~~ Unsuitable for Commissioned Rank

6. Recommended for training as: (a) ~~Pilot~~ ...
(b) ~~Observer~~ ...
(c) S.A.G.

7. Remarks: Pleasant personality, Fair education, Dependable,
Not up to I.T.S. standard as P. or O. Wishes to proceed as S.A.G.
Recommended.
CHARACTER & LEADERSHIP: 72

8. Alternative Recommendation ...

D.S. Tindal Wg. Comdr.
Commanding Officer

No. 3 I.T.S., Victoriaville, P.Q.

Date 12-2-42

To be passed to No. ... EFTS

~~A~~ Can.
~~A~~ ~~Aus~~ ~~NZ~~. Trainee.

NOTE: X out Contries not applicable

## ELEMENTARY TRAINING

1. No. .....E.F.T.S. Course No..... From..... To.....

2. Flying Time:--

### FLYING TRAINING

| Aircraft | Total Dual | Total Solo | Instrument Flying | Passenger | Total | Link Trainer |
|---|---|---|---|---|---|---|
| | | | | | | |

3. Results of Flying Tests:--20 hour.....% Final Test.....% Instr. Fly.....%

4. Ability as a Pilot (Ex., A.A., Below Av., Poor).....Pass or Fail.....

5. Recommended for Training on T.E. or S.E. aircraft.....

6. Remarks on Flying Progress and points which require special consideration....

.....

.....

.....

.....

.....
Chief Flying Instructor

Date.....

### GROUND TRAINING

7.

| Subject | Maximum Marks | Marks Obtained | Subject | Maximum Marks | Marks Obtained |
|---|---|---|---|---|---|
| Airmanship..... | 200 | | Th. of Flight.. | 100 | |
| Airframes..... | 100 | | Air Nav..... | 200 | |
| Aero Engines..... | 100 | | Arm. (Oral).... | 200 | |
| Signals (Prac.).. | 100 | | Quals. as an Offic | 200 | |

Maximum Marks 1200. Marks Obtained.....Percentage.....

Pass or Fail.....Position in Class.....No. in Class.....

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

9. General Remarks (Ability, Conduct, etc.).....

.....

.....

.....
Chief Ground Instructor

Date.....

.....Sqn
Chief Supervisor Officer

No.....E.F.T.S.....

Date.....

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

B.C.A.T.P. CANADA

...ns of this form are contained in Chapter XIII, A.P. 1301 (War Manual Part II). R.A.F. Form 1580.

# ROYAL AIR FORCE.

# AIRMAN'S/AIRWOMAN'S RECORD SHEET (Active Service).

Official No. ~~CAN R108399~~ J 88747 Name TOBIN Leo Sarsfield Rank ~~F/Sgt~~ T/W/O.
(In full in block capitals, surname first). (Or acting appointment).

R.A.F. Trade Air/Gunner (5) Special Qualifications
(e.g., Gas Instructor, Fire Fighter, Boxing Instructor).

Date of Birth 15-10-19. Religion R.C. Occupation in Civil Life Clerk.

Last Enlisted 28-6-41. Current Engagement Ofer.

If a member of the Auxiliary Air Force

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

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

Mrs Mary Joy Tobin, 3219 Westmount Blvd (Wife) Westmount Que.

Name, address and relationship of person (or persons) to be informed of casualties (to be entered in pencil).
(If this person is the legal next of kin, it is only necessary to insert here "Next of Kin.")

NOK

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

| Section I.—Movements and Casualties. | | | Section 2.—Promotions, Acting Appointments (Paid or Unpaid), Reductions, Remusterings. | | |
|---|---|---|---|---|---|
| Unit FROM which. | Unit TO which. | Date of Effect. | * Authority. | Description. | Date of Effect. |
| 340 T Penfield Ridge | 14 Depot Halifax. | 24-11-42. | | Pro O Std AC2. | 28-6-41. |
| 14 Depot | RAF TP. | 11-12-42. | | Rm: Air/Gr. LAC. | 6-5-42. |
| | KMD. CAN. | 11-12-42. | | Air/Gunner "Spec" Sgt | 17-7-42. |
| | UK. | 18-12-42. | POR 21/43. | Promoted T/F/Sgt. | 17-1-43. |
| INT 13 | 3 PRC. | 19-12-42. | POR 28/43. | Promoted T/W/O. (2) | 17-7-43. |
| 3/43. 3 PRC. | R.A.F. Stn. Feltwell | 26.1.43. | | Promoted T/W/O (1) | 17-7-44. |
| S.H.Q. Feltwell | 464 Sqdn. | 15/3/43 | | | |
| 464 Sqdn. | 487 Sqdn. | 18/5/43. | | | |
| 487 NZ Sqdn. | 88 Sqdn. | 26-8-43. | | | |
| 88 Squadron. | 307. F.T.U. | 15.12.43. | | | |
| 304 F.T.U | K.I.B.P.D. R.A.A.F. | 8.2.44 | | | |
| No 1 BPD. | 13 Sqdn | 29.5.44 | | | |
| ~~13 Sqdn~~ | ~~R.C.A.F. U.K.~~ | ~~21.8.44~~ | | | |
| | ~~(Missing 20.8.44)~~ | | | | |
| Discharged from RCAF on | | 28.7.44 | | Clothing etc. returned to store or | |
| Appointed to a commission | | 29.7.44 | | dealt with in accordance with AMO. | |
| | | | | 1129/42. | |
| | | | | F/Lt. | |
| | RO 80 | 7.2.45 | | | |

Section 3.—Good Conduct Badges.

| * Authority. | 1st, 2nd, 3rd. | Awarded, Deprived, Restored. | Date of Effect. |
|---|---|---|---|
| | | | |

* The authority to be quoted will be the serial number of the relevant P.O.R.

(*10349) Wt. 23821—1216 100M 8/42 T.S. 700
(*11118—10349) Wt. 39960—2622 100M 12/42 T.S. 700

## Section 4.—Character and Trade Proficiency.

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

| Rank. | Character. | Trade Classification. | Proficiency. A | Proficiency. B | Proficiency. C | Whether specially recommended, recommended, or not recommended for promotion or reclassification. | Date. | Signature and Rank of Commanding Officer. |
|---|---|---|---|---|---|---|---|---|
| Sgt. | V.G. | A/G. | Lac. | Lac. | | | 22/5/43 | W. Chisholm F/Lt. |
| Sgt. | V.G. | A.G. | Sat | Sat | | | 26-8-43 | R.G. Wright Lt. |
| F/Sgt. | V.G. | A.G. | Sat | Sat | | Recd | 15-12-43 | J.J. Spence W/C |
| T/W/O(2) | VG. | AG | ON THE STRENGTH FOR TRAINING ONLY | | | | 31-12-43 | R.A. Cross W/C |
| T/W/O(2) | VG. | AG | ON THE STRENGTH FOR TRAINING ONLY | | | | 8-2-44 | R.A. Cross W/C |
| T/W/O | V.G | A.G | Sup. | Sup. | - | Recd. | 28.7.44 | Jo Tallon W/C |

| | | | | | | | | |
|---|---|---|---|---|---|---|---|---|
| P.O.R. 3/44 | 3 days Leave 8/44 - 10/44 | D342544 | S.L.A. | | | | | F/LT No 88 Squadron |
| P.O.R. 3/44 | 10 days Leave 20/2/44 - 29/2/44 | D342512 | S.L.A. | | | | | F/LT No 88 Squadron |
| POR 25/43. | 12 days leave. 19/11/43 - 30/11/43 - 12 S.L.A. | D63945. | | | | | | F/Lt. No. 88 Squadron. |
| POR 24/23. | 3 days leave 6/11/43 - 8/11/43. - S.L.A. (3) | | | | | | | F/Lt. No. 88 Squadron. |
| POR 22/43. | 10 days leave. 13/10/43 - 22/10/43 - S.L.A. | 563131. | | | | | | F/Lt. No 88 Squadron |
| | granted 48 hrs Pass. | | 20 9/43. | | | | F/LT | No 88 Squadron 15-16.7.43. |
| 8.7.43 | 14.7.43 | 4 Days "P". | Rw. 761585 | POR 1/43 | | | | 2-3-6-43. |
| 26.5.43 | 1.6.43 | 7 Days "P". | Hq Rly W. | POR 2/43 | 11 days S.L.A. | | | 48 hr. Pass 24/5/43 - 25/5/43 |
| 4/4/43 | 12/4/43 | 9 days P leave | POR 4/43 | Rw.B. 308513 | | | F/LT. | 48 hr. Pass 2/4/43 - 4/4/43 |
| P.O.R. 25/43. | 7 days. | Priv: Leave. | 15/3/43 | to | 21/3/43 | F.W. 307194 | | W/a |
| 1/433 PRC | 1.1.43 | 7.1.43. | Privilege Leave - 7 days (end.) | | | | | Rw. 866779 |

Record of Leave and Issue of Free Travelling Warrants

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

## Section 5.—Results of Courses of Instruction, Recommendations for Aircrew Duties, Recommendations for Commissioned Rank (K.R. 2132, (19) (A)). Decorations, Mentions, Special Commendations by A.Os.C., etc.

| Authority. | Nature. | Date of Effect. |
|---|---|---|
| | | |

Pilot or Observer Standard

# ROYAL CANADIAN AIR FORCE

## RECORD OF SERVICE AIRMEN

R.C.A.F. Special Reserve

| R.108399 | Tobin | Leo Sarsfield | Roman Catholic |
|---|---|---|---|
| A.F. No. | Surname | Christian Names | Religion |

Born 15-10-19 Place Montreal Que Country Canada Citizen of Canada Racial Origin Canada

| ENLISTMENT | CIVIL EDUCATION | PREVIOUS SERVICE |
|---|---|---|
| Date 28/6/41 | High School Entrance — Jr. Mat. ✓ — Sr. Mat. | Loyola COTC 1940-41 |
| At Montreal Que | Technical School — Corres. Courses | |
| Term Duration of War | University | |

| RANK | DATE | Med. Cat. | Date |
|---|---|---|---|
| AC.2 | 28 6 41 | A1B | 27 6 41 |
| D.R.O. #128 L.A.C. | 6 5 42 | | |
| Sgt. | 17 7 42 | | |

CIVIL OCCUPATIONS AND EXPERIENCE

Clerk. 1939-41

COURSES AND TRADE TESTS

| Trade | Grp. | % | PorF | Date Rem. | Trade | Grp. | % | PorF | Date Rem. |
|---|---|---|---|---|---|---|---|---|---|
| Remus. Air Gunner | | | D.R.O. 128 | 6 5 42 | | | | | |
| Air gunner Sgt. | | | | 17 7 42 | | | | | |

PARTICULARS OF FAMILY — S

Wife — Maiden Name — Present Address (in pencil)

| Children | Names | Date of Birth | Place of Birth |
|---|---|---|---|
| | | | |

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

Mrs Mary Joy Tobin,
321 Westmount Blvd, (Wife)
Westmount Que.

### LEAVE

| FROM | TO | AUTH. AND DESCRIPTION |
|---|---|---|
| 19-3-42 | 24-3-42 | D.R.O. 80 - 5 days. |
| 19-7-42 | 3-8-42 ind. | Embark. leave |
| 10.9.42 | 16.9.42 | Special 7 days. D.R.O. 140. |
| Warrant | N.C 102912 | issued 9.9.42 D.R.O. 140. |
| 11-11-42. | 24-11-42. | 14 Pre. Emb. 201. |
| Warrant C | 152356. | dated. 8-11-42. |

### CHARACTER AND TRADE ASSM. HONOURS, AWARDS AND MENTIONS

| DATE | CHARACTER | TRADE AND ASSM. | HONOURS AND AWARDS | SIGNATURE |
|---|---|---|---|---|
| 19-7-42 | Awarded & Auth. to wear A/Sgt Badge | | | |

### MOVEMENTS AND CASUALTIES

| AUTHORITY | UNIT FROM | UNIT TO | DATE |
|---|---|---|---|
| M.O. R 13 | R/C Mtd Que | #4 M D Toronto then St Hubert Que | 28/6/41 |
| D.R.O. 50/41 T.O.S. | #4A M.D. | St Hubert | 28/6/41 |
| D.R.O. 86/41 | #4A M.D. St. Hubert | #9 E.F. T.S. Summerside | 8/8/41 |
| D.R.O. 247/41 | #9 S.F.T.S. | #3 F.T.S. | |
| | Summerside | Victoriaville | 26-10-41 |
| D.R.O. 7/42. | Forfeits A.W.L. 2-1-42 to | 5 days pay 0745 hrs. 1330 hrs. | 6-1-42. |

| AUTHORITY | UNIT FROM | UNIT TO | DATE |
|---|---|---|---|
| D.R.O. 18/42. | Forfeits A.W.L. 0745 hrs. 16-1-42 to | pay 3 days 0045 hrs. | 19-1-42. |
| D.R.O. 38/42. | 31 T.S. Victoriaville, P.Q. | K.T.S. Trenton, Ont. | 25-2-42. |
| D.R.O. 79 - Issued | S.L.T. W.A.C. | 8.20.90 | 19-3-42 |
| S.O.S. - D.R.O. 134 | K.T.S. Trenton | C.B.S. M.T. Unit | 23-5-42 |
| ~~S.O.S. - D.R.O. 1487~~ | ~~Mt. View Unit~~ | ~~Halifax~~ | ~~23-6-42~~ |
| D.R.O. 152/42 | A.W.L. from | 0630 hours | 23-6-42 |
| D.R.O. 156/42 | Cease to be A.W.L. | 1530 hours | 25-6-42 |
| D.R.O. 157/42 | Forfeits 3 days pay | A.W.L. | 2 days 9 hours |
| D.R.O. 172A. | Mt. View Unit | Halifax | 18-7-42 |

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

(OVER)

CANADA B.C.A.T.P.

| | | | | | | | |
|---|---|---|---|---|---|---|---|
| DRO 222 | 1Y Depot | R.A.F.S.P. 1 Y.D. Depot | 6-8-42 | | | | |
| DRO. 201. 340 | Innisfail Kings | Halifax | 24-11-42. | | | | |
| Married to Miss Mary Joy Thomson on 24-11-42 at Montreal & Lieut. Lythe Rev. John Lloyd (C of E) Qualified to Rec. Asst. Allen. Sgt. | | 24-11-46. | | | | | |
| DRO 358/42 | 1 Y. D. Depot | R.A.F. FTP | 11.12.42 | | | | |
| 48/42 (35) | | Bank Cau | 12.12.42 | | | | |
| | | U.K. | 18.12.42 | | | | |
| | Ind. 13. | 3 PRC | 19.12.42 | | | | |
| 23/43 (8/24) | 3 P.R.C. | FELTWELL | 26.1.43 | | | | |
| 2/43 | FELTWELL | 464 Sydn. | 15. 3. 43. | | | | |

Mrs. Leo Sarsfield Tobin,
3219 Westmount Blvd.,
Westmount, Quebec.

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. J.88747 FD 144

# DEPARTMENT OF NATIONAL DEFENCE
## ESTATES BRANCH
### OTTAWA, ONT.

26th March, 1946.

ESTATES BRANCH MAR 30 1946 H. Q. OTTAWA NATIONAL DEFENCE

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

P/O Leo Sarsfield Tobin,

J.88747 R.C.A.F.

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.

GWH/MEM

G. W. Hill p/
Director of Estates.

M.F.W. 77
3M—11-45 (8368)
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..... | | TOBIN - MARY JOY (MAIDEN NAME-THOMSON) | 24 | 3219 Westmount Blvd. WESTMOUNT P. QUE. |
| 2 | Children of the Deceased and dates of their Births..... | | NONE. | | |
| 3 | Father of the Deceased..... | | LEO SARSFIELD TOBIN | 60 | 630 ROSLYN AVE WESTMOUNT. PQUE |
| 4 | Mother of the Deceased..... | | IDA MAY TOBIN. (MAIDEN NAME - DAVIS | 56 | same. |
| 5 | Brothers of the Deceased | Full Blood | NONE | | |
| | | Half Blood | | | |
| 6 | Sisters of the Deceased | Full Blood | Patricia tobin<br>DOROTHY TOBIN. | 26 | Married now - can be reached 630 Roslyn Ave. WESTMOUNT. P.QUE.<br>DECEASED. 1940 APPROXIMATELY. |
| | | 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 |
| | | | none | | — |

ANSWER FULLY EACH QUESTION ON THIS PAGE

PARTICULARS AS TO IDENTITY

| | | |
|---|---|---|
| 8 | Full names of the deceased. | LEO SARSFIELD TOBIN jr. |
| 9 | Date of his birth. | 15th OCTOBER . 1919 |
| 10 | Place and date of his marriage. | 24th NOVEMBER 1942 Montreal. CHRIST CHURCH CATHEDRAL |
| 11 | Place and date of his parents' marriage. | ? MONTREAL. |

PARTICULARS OF DOMICILE

| | | |
|---|---|---|
| 12 | Place where deceased was born. | MONTREAL. |
| 13 | State, in order, the Province, State and/or County in which he resided before enlistment and the period of time in each. | (a) QUEBEC PROVINCE<br>(b) EXCEPT FOR SHORT VACATIONS<br>(c) TO B.W.I etc., Home of parents<br>(d) |
| 14 | Nature of employment before enlistment. | WORKED IN FATHER'S BUISNESS. TOBIN'S TRAVEL BUREAU. |
| 15 | State whether he owned the premises in which he lived, and, if so, where situated. | — NO — |
| 16 | Name place where deceased stated he intended to make his permanent home. | MONTREAL P.QUE. |

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? | I Know of NO 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? | YES - $25,000 to be SETTLED ON THE WIFE. |
| 19 | (a) Did he have a Bank, Post Office or other deposit account?<br>(b) Give name and address of bank, etc., and the amount on deposit.<br>(c) Do you wish it administered with the pay account?<br>(d) If it is a joint account, state the survivor's name and relationship to the deceased. | I Know of NO BANK ACCOUNT - |
| 20 | Amount of War Savings Certificates purchased by the deceased and registered in his name. State where located. | I Know of NO SUCH CERTIFICATES. |
| 21 | (a) Amount of Victory Loan Bonds left by deceased.<br>(b) State whether bearer or registered.<br>(c) State in whose name they are registered.<br>(d) During what loan were they purchased? (1st, 2nd, 3rd, etc.)<br>(e) In whose possession, and address, are they? | NONE - that I Know of. |
| 22 | If deceased had life insurance, name companies and amount payable under each policy and the person named as beneficiary therein. | YES. NEW YORK LIFE INSURANCE. MONTREAL. for $5,000 — |
| 23 | Describe other assets, if any, and estimated value thereof. Use space on page 4 if necessary. | I Know of NONE. |

OTHER PARTICULARS

| | | |
|---|---|---|
| 24 | Did the deceased after enlistment incur any debts for:—<br>(a) His own separate board and lodging while on service.<br>(b) Service clothing and equipment.<br>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. | I Know of NONE. |

(PLEASE TURN OVER)

## DECLARATION

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

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

*WIDOW of the deceased. TO THE BEST OF MY ABILITY. AS TO TIME OF DEATH OF DOROTHY TOBIN ETC. SEE BELOW

Mary Jay Tobin
Signature of Informant

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.

3219 Westmount Blvd.
Address

Westmount. P.Que.

## CERTIFICATE

I hereby certify that to the best of my knowledge and belief Mrs. Mary Jay Tobin {Name of informant} is the* Widow of the Deceased above described. The above Declaration was made by the Informant and signed in my presence.

*See above.

Dated at Montreal this 29th day of March 1946

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

E Boulin
Qualification Ex Fl.Lt R.C.A.F. J4882

Address 27 Rosemount ave. Westmount

**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 addressed and relationship of other relatives should be set out below.)

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

P/O LEO SARSFIELD TOBIN, JR HAD ONLY 2 SISTERS.
ONE - DOROTHY TOBIN - DIED EITHER 1939 OR '40 -
THE OTHER PATRICIA TOBIN IS NOW MARRIED
SHE MAY BE REACHED THRU HER PARENTS AT
630 ROSLYN AVE. WESTMOUNT P.Q.
IF FURTHER IMFORMATION IS REQUIRED
YOU MAY WRITE LEO S. TOBIN - TOBIN'S TRAVEL
BUREAU. PEELE ST. MONTREAL. (I CANNOT
supply you with MORE.) his Mother &
FATHER LIVE 630 ROSLYN AVE. AS STATED HEREIN.
THEY COULD HELP YOU IN THE DETAILS OF WHICH
I KNOW NOTHING, SUCH AS, BANK ACCOUNT etc.

Sincerely
M. Jay Tobin

C O P Y

40968 W/Cdr. J. Wallace,
13 Squadron,
R.A.F.,
C.M.F.

24th August, 1944.

Dear Mrs. Tobin:

By this time you will have been informed by the Royal Canadian Air Force Authorities that your husband, Warrant Officer L.W.S. Tobin is missing from operations.

I regret to say that at the moment all I can tell you is that your husband is missing. He and his crew, together with a member of other crew, were engaged on a night operation in the Genoa area on the 20/21st August and from this flight his aircraft failed to return. The only other information we possess is that two other crews report seeing an aircraft crash in the sea just off the coast south of Genoa.

I would assure you that every endeavour will be made to discover your husband's fate and every likely source of information will be explored.

While I do not wish to raise false hopes I ought to tell you that there is just a possibility that your husband is a Prisoner of War. If such is the case it will be ascertained in due course, and, in any event, endeavours to trace your husband will continue and any information that is obtained will be passed on to you at once.

May I now express the great sympathy which I, as his Commanding Officer, and all his frineds in the Squadron feel with you in your present anxiety.

I am indeed glad to be able to tell you that your husband was a member of what was my best operational crew in the Squadron and the grand fighting spirit which they displayed at all times was an inspiration both to myself and all the other crews - their failure to return from operations is a great blow to us all and we join you in hoping sincerely that your present great anxiety may prove to be without foundation.

Sincerely yours,

(SGD) J. Wallace..

R 108399 (R.O.4)

OTTAWA, Canada, 4th September, 1944.

Mr. L.S. Tobin,
1240 Peel Street,
Montreal, P.Q.

Dear Mr. Tobin:

It is with deep regret that I must confirm our recent telegram informing you that your son, Warrant Officer First Class Leo Sarsfield Tobin, is reported missing on Active Service.

Advice has been received from the Royal Canadian Air Force Casualties Officer, Overseas, that your son and the entire crew of his aircraft failed to return to their base after taking off at 1:00 A.M. on August 20th, 1944, to carry out armed reconnaissance operations in the area between Genoa and Turin, Italy. Three other aircraft report seeing what appeared to be your son's aircraft fall to the ground after being hit by intense enemy anti-aircraft fire near Pinerolo, Italy.

The term "missing" is used only to indicate that his whereabouts is not immediately known and does not necessarily mean that your son has been killed or wounded. He may have landed in enemy territory and might be a Prisoner of War. Enquiries have been made through the International Red Cross Society and all other appropriate sources and I wish to assure you that any further information received will be communicated to you immediately.

Your son's name will not appear on the official casualty list for five weeks. You may however, release to the Press or Radio the fact that he is reported missing, but not disclosing the date, place or his unit.

Permit me to extend to you my heartfelt sympathy during this period of uncertainty and I join with you and the members of your family in the hope that better news will be forthcoming in the near future.

Yours sincerely,

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

J88747(RO)

P.A.

OTTAWA, Canada, 19th February, 1947.

R E G I S T E R E D

Mrs. M. Joy Tobin,
3219 Westmount Blvd.,
Westmount, Quebec.

Dear Mrs. Tobin:

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, Pilot Officer L.S. Tobin.

I realize there is little which may be daid 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.

F/O R.J. Rocheleau/AD

# OFFICIAL ROYAL CANADIAN AIR FORCE CASUALTY NOTIFICATION

NUMBER J88747 (R108399) RANK PILOT OFFICER UNIT 13 SQDN (OVERSEAS)

TRADE A/G (G.L.)

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

NAME TOBIN, LEO SARSFIELD

PRESENT MARITAL STATUS MARRIED RELIGION R.C. CANADIAN YES

FRENCH CANADIAN OTHER

NEXT OF KIN MRS LEO SARSFIELD TOBIN

RELATIONSHIP WIFE

ADDRESS 3219 WESTMOUNT BLVD WESTMOUNT QUEBEC.

FATHER'S NAME MR & MRS LEO SARSFIELD TOBIN

ADDRESS APT 93 LIVING ON ENLISTMENT YES

MOTHER'S NAME 1469 DRUMMOND STREET

ADDRESS MONTREAL QUEBEC. LIVING ON ENLISTMENT YES

ADDRESS AT TIME OF ENLISTMENT

MARITAL STATUS AT TIME OF ENLISTMENT

OCCUPATION

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

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 DEC 10 1945 H. Q. OTTAWA NATIONAL DEFENCE

CASUALTY DETAILS:

AUTHORITY CAS. SIG. NO. AFHQ PRESUMPTION OF DEATH MEMO NO. 424----d--21-NOV-45

PREVIOUSLY REPORTED "MISSING" 20-AUG-44 AFTER AIR OPERATIONS OVERSEAS (ARMED RECONNAISSANCE BETWEEN GENOA AND TURIN ITALY)

NOW "PRESUMED DEAD" 20-AUG-44 FOR OFFICIAL PURPOSES.

ALL WILLS (2)

~~XXXXXXX~~ 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 1-DEC-45

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

47984

FORM 6

# DOMINION BUREAU OF STATISTICS—QUEBEC DEATH TRANSCRIPT

Do not write in this space

**1. PLACE OF DEATH**

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

Street: | No. | Hospital or Institution:

**2. LENGTH OF STAY**

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

**3. NAME OF DECEASED**

Surname: TOBIN (Block letters)

Given names: LEO SARSFIELD

Do not write in this space

**4. RESIDENCE**

Street: Roslyn Avenue No. 630

Official name of civil municipality or township: Westmount

Municipal county: Province: Quebec

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

**9.** If married give name of wife or husband of deceased: Thomson, Mary Joy

**10.** BIRTHPLACE (Province or Country): Quebec

**11.** DATE OF BIRTH: October (Month) 15th (Day) 1919 (Year)

| 12. AGE OF DECEASED | Years | Months | Days | If less than one day old |
|---|---|---|---|---|
| | 24 | | | ....hrs. or....min. |

**OCCUPATION**

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

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

**15.** Date deceased last worked at this occupation: Aug. 20/44

**16.** Total years spent in this occupation: Three

| | 17. NAME | 18. BIRTHPLACE (Province or Country) |
|---|---|---|
| FATHER | Tobin, Leo Sarsfield | Ontario |
| MOTHER (Maiden Name) | Davis, Ida May | Ontario |

**19.** Place of burial, cremation or removal

**20.** Date of burial....19....

**21. PLACE OF REGISTRATION OF THIS BURIAL**

(a) Name of parish or church

(b) Civil municipality of

(c) Municipal county

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

## CONFIDENTIAL MEDICAL CERTIFICATE OF DEATH

**22.** Date of death: August (Month) 20th (Day) 19 44 (Year)

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

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

**24. CAUSE OF DEATH**

**I** **Immediate cause** Give disease, injury or complication which caused death, **not** the mode of dying, such as heart failure, asphyxia, asthenia, etc.

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

due to

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

(b)

due to

(c)

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

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

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

(b) Duration of disease....days

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

**26.** Was there a surgical operation?....Date of....19....

State findings....Was there an autopsy?....

**27.** If death was due to external causes (violence) fill in also the following:—

Accident, suicide or homicide: Accident (State which) Date: Aug. 20th 19 44

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

Nature of injury....

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

**Signed**....**M.D.**

**Address**....**Date**....19....

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

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

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

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

**(Voir l'autre côté pour le français)**

AIR FORCE No. J.88747. R108399

SURNAME: Tobin. FULL CHRISTIAN NAME: Leo Sarsfield

ENLISTMENT/APPOINTMENT — PLACE: Montreal, Que. DATE: 28-6-41

RELIGION: R.C.

ROYAL CANADIAN AIR FORCE

# RECORD OF SERVICE

OFFICERS, AIRMEN AND AIRWOMEN

Comm. 29-7-44.

R.C.A.F. FORM R230 100M-3-43 (3137) P.Q. 885-R-230

| BIRTH DATE | PLACE | COUNTRY | CITIZENSHIP | RACIAL ORIGIN |
|---|---|---|---|---|
| 15-10-19 | Montreal Que | Canada | British | |

## CIVIL EDUCATION

| | |
|---|---|
| PUBLIC SCHOOL | JUNIOR MATRICULATION X 3 yrs. |
| HIGH SCHOOL ENTRANCE | SENIOR MATRICULATION |
| TECHNICAL SCHOOL | UNIVERSITY |
| CORR./BUSINESS COURSES | LANGUAGES SPOKEN |

## CIVIL OCCUPATIONS AND EXPERIENCE

clerk

5610

## PREVIOUS SERVICE

Lower Canada College Cadets Mtl 34-37

Loyola 6076 Mtl 3-1-40 to 16-6-41

## PARTICULARS OF FAMILY

| | |
|---|---|
| SINGLE, MARRIED, WIDOWER, DIVORCED | Single Married |
| WIFE (FULL MAIDEN NAME) OR HUSBAND | |
| PRESENT ADDRESS (IN PENCIL) | |
| PLACE OF MARRIAGE | DATE 24.11.42 |
| 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)

Leo Sarsfield Tobin. Father 630 Roslyn Ave

Mrs Mary Tobin. Wife 3219 Westmount Blvd Westmount P.Q.

## EMPLOYMENT AS INSTRUCTOR OFFICER AIRMAN/AIRWOMAN

| TYPE | FROM | TO | TYPE | FROM | TO |
|---|---|---|---|---|---|
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |

| PLACE AND DATE OF MEDICAL | CATEGORY | PLACE AND DATE OF MEDICAL | CATEGORY |
|---|---|---|---|
| 9-6-41 | A B. | | |
| 5-11-41 | A B A3 B | | |
| 12-2-42 | A B A B. | | |

## OFFICERS

| RANK, BRANCH AND CATEGORY | DATE | AUTH. | DUTIES PERFORMED DURING SERVICE, E.G. ADJ. |
|---|---|---|---|
| P/O SR. Sh. GUNNERY | 29 7 44 | O.C. 1099/44 | |

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

## AIRMEN AND AIRWOMEN

| RANK | DATE | AUTH. | TRADE | DATE | AUTH. |
|---|---|---|---|---|---|
| AC2 | 28 6 41 | 44/M/30 | Pte O | 28 6 41 | 44/M/30 |
| Lac | 6 5 42 | E128 | A.G. | 6 5 42 | E128 |
| 2/Sgt Pd | 17 7 42 | M4 1124 010641 | Air Gunner B.G. | 17 7 42 | M4 1124 |
| F/Lt Sgt. | 17 1 43 | 885/43 2114/43 | | | |
| T/F/Lt Sgt. | 17 1 43 | | | | |
| T/W/O II | 17 7 43 | 010885/43 7981/43 | | | |
| T/W/O I | 17 1 44 | 888/44 | | | |

28/4/44. 11/44

## OFFICERS, AIRMEN/AIRWOMEN

| COURSE OR TRADE | GRP. | % | PF | DATE |
|---|---|---|---|---|
| Transf to Course 3964 | 1 | 39 | 28 | |
| Transf Course 41 to 43 | (3rd Yr) | | | |
| Posted to R21 | | | | 13 2 42 |
| 6 BGS Course 33 | | 8-6-42 | — | 17 7 42 |

ADVISE ENTRIES UNIT RECORDS RETURNED TO CANADA TD 4864

AIR FORCE No. J. 88747 ~~R108599~~

TOBIN — SURNAME

LEO SARSFIELD — FULL CHRISTIAN NAME

ENLISTMENT/APPOINTMENT
PLACE Montreal Que
DATE 28-6-41

RELIGION R.C.
R.C.A.F. FORM R230

## TYPE OF LEAVE

| FROM | TO | No. DAYS | DESCRIPTION | AUTH. |
|---|---|---|---|---|
| 4.4.43 | 12.4.43 | | Privilege Leave 464 Sqn | 4 |
| 26.5.43 | 1.6.43 | | " " 487 Sqn | 8 |
| 13/10/43 | 22/10/43 | 10. | P/L. | 88S. 22/43 |
| 19.11.43 | 30.11.43 | 12 | P/L. | 88S 38/43 |
| 6.11.43 | 8.11.43 | 3 | PL | " 24/43 |
| 20.12.43 | 2.1.44 | 14 | P/L. | 307 FTU. 1/44. |
| Recalled | 27.12.43 | (7 days unexpired). | | 307 FTU. 2/44. |
| 8.1.44 | 10.1.44 | 3 | P/L. | 307 FTU. 2/44. |
| 20-12-43 | 2-1-44 | 14 | P/L. | 88 Sq. 2/44 |
| Recalled | 27-12-43 | 4 | unexpired | 88 Sq. 2/44 |

## TYPE OF AIRCRAFT ON WHICH MOST PROFICIENT

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

Attachment converted to Posting wef 15/12/43 304 FTU 16/44

## SERVICE MACHINES FLOWN

## CHARACTER AND TRADE ASSESSMENT

| DATE | CHARACTER | TRADE ASSESSMENT |
|---|---|---|

## HONOURS, AWARDS AND MENTIONS

| DATE | AWARD | AUTHORITY |
|---|---|---|
| 17 7 42 | Air Gunner's Badge | M. U.172 A. |
| 15 1 44 | C.V.S.M. & M.L | 18 Sqdn 13/44. |

## POSTINGS, ATTACHMENTS & TEMPORARY DUTY

| SOS TOS | FROM TO | DATE | AUTHORITY |
|---|---|---|---|
| S.O.S | 34 2 T.U. Pennfield R. | 24 11 42 | 340 TU 201 |
| S.O.S | 1 y to R.C.A.F. Trainees Pool | 11 12 42 | 1 y 358 |
| | Disembark UK | 18 12 42 | E564 |
| TOS | 3 PRC Bournemouth | 19 12 42 | Int 13 |
| TOS | Feltwell | 26 1 43 | 8/27 |
| TOS | 464 Sqn | 15 3 43 | 2 |
| TOS | 487 Sqn RNZAF | 18 5 43 | 487 Sqn 7 |
| detach | to Isle of Wight | 18 6 43 | 487 Sqn 11.43. |
| SOS. | 487 Sqd to 88 Sqd. | 26 8 43 | 88 Sq 18/43 |
| att. | 307 F.T.U. p/p. o/s. | 15/12/43 | 88 Sq. 28/43. |
| ATT | 304 FTU ~~Sqdn~~ p. 88 Sqd. | 14/1 1/44 | 307 FTU. 1/44 |
| | | 15 1/2 44 | 307 FTU. 5/44 |
| | | | 304 F.T.U. 5/44 |
| Proc. | R.A.F. Portreath | 5 2 44 | 304 F.T.U. 5/44 |
| arrived | 1 O.A.D.U. from U.S.A. | 5/8 2/2 44 | 1 O.A.D.U. 6/44 |
| TOS | 2 ARC Med. A.F. from U.K. | 8 2 44 | 2 ARC 14/44. |
| SOS | 2 ARC. to 1 BPD (O & ARP) | 9 2 44 | 2 ARC 14/44 1 BPD 21/44 |
| SOS | 1 BPD to 232 Wg | 24 2 44 | 304 FTU 9/44 |
| | amended to read as below | | 1 BPD 21/44 |
| TOS | 18 Sqn FR. 1 BPD | 6 3 44 | 18 Sqdn 9/44 |
| T.O.S | 18 Sqdn from 232 Wing | 6 3 44 | 18 Sqdn 9/44 |
| T.O.S. | 307 FTU from 88 Sqdn | 15 12 43 | 88 Sqdn 4/44 |
| T.O.S. | 232 Wing from 1 BPD | 27 2 44 | 232 wing 1/44 |
| SOS. | 18 Sqn & 13 Sqn | 29 5 44 | 18 Sqn. 15/44 13 Sqn. 13/44 |
| Desch to Comm. | | 28 7 44 | 13 sq 19 |
| F/13 | Missing from 13 Sqd (ME) | 20 8 44 | 13 Sqn 18/44 CR548 |
| S.O.S | 13 Sqn to RCAF. UK. N/E U | 21 8 44 | AFRO 2191/44 13 Sqn 18/44 |
| TOS. | N/E UNIT. | 21 8 44 | NEU 149/44. |
| S.O.S | N.E.N. Presumed Dead. | 20 8 44 | NEN. 191/45. |
| Now | "Presumed Dead" | 20 8 44 | CR840 AFRO 1851 |

## ALL OTHER CASUALTIES

| CASUALTY AND DATE | AUTHORITY |
|---|---|
| Forf pay 5 days a.w.l. 2/6-1-42 | S ITS 7. |
| Forf pay 3 days a.w.l. 16/9-1-42 | 3 ITS 18 |
| Forf pay a.w.l. 29/29 3-42 | E 91 |
| Forf pay 31/6 3/4 42 | E 91 |
| 168 hrs. det. 31-3-42 | E 91 |
| a.w.l. from 0630 hrs. 23-6-42 | MV 152. |
| Forf pay a.w.l 3 days. 23/25-6-42 | MV 157 |
| Cancel a.w.l. 25-6-42. | MV 156 |
| Forf. 3 days pay. 17-9-42 | 340 TU. 153 |
| a.w.l. 2 days. 17/19-9-42. | 340 TU. 153 |

ADVISE ENTRIES
UNIT RECORDS RETURNED
TO CANADA

Embarked 12.12.42

AIR FORCE No. ~~R108399~~

SURNAME: TOBIN, FULL CHRISTIAN NAMES: LEO SARSFIELD

ENLISTMENT PLACE Montreal DATE 28-6-41 — RE-ENLISTMENT

C.R. FILE NUMBER R 828

J.88747

# OFFICER RECORD OF SERVICE AIRMEN

13 Comm. 29-7-44

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

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

| S.O.S. OR T.O.S. | UNIT AND PLACE | EFFECTIVE | | | D.R.O. |
|---|---|---|---|---|---|
| J.O.S. | 4 AMD St. Hubert | 28 | 6 | 41 | 4AMD50 |
| SOS | 4 AMD St Hubert | 8 | 8 | 41 | 4AMD86 |
| TOS | 32 TS Summerside | 9 | 8 | 41 | 32TS85, 125 |
| SOS | 32 TS Summerside | 26 | 10 | 41 | 32T247 |
| TOS | 33 TS Victoriaville | 27 | 10 | 41 | 33T187 |
| S OS | 33 TS Victoriaville | 25 | 2 | 42 | 33T538 |
| SOS | RTS Trenton | 26 | 2 | 42 | 6:9 |
| SOS | RTS Jrenton | 23 | 5 | 42 | E134 |
| TOS | 6 B&G Mountain Jun | 24 | 5 | 42 | MV126 |
| SOS | 6 BTS Mtn View | 18 | 7 | 42 | MV172A |
| TOS | #11 Depot Halifax | 19 | 7 | 42 | 11T222 |
| SOS | 11 Depot Halifax | 14 | 8 | 42 | 11T229 |
| SOS | 34 BTU Pennfield Ridge | 15 | 8 | 42 | 34 O.T.U 119 |
| Att. | 1 Det Yarmouth | 22 | 10 | 42 | 34OT94/182 |
| S.O.S | 34 O.T.U. Pennfield R | 24 | 11 | 42 | 34OTU201 |
| TOS | 1 "Y" Depot Halifax | 25 | 11 | 42 | 1T377 |
| SOS | 1 X Sta RAF Trainee Pool | 17 | 12 | 42 | 1T358 |
| SOS | 1 Y to Rad. T. Pool | 10 | 12 | 42 | 1T66 |
| Missing 20 Aug. 44 - PC X 617 d/22 Aug. 44. | | | | | |
| Presumed Dead 20 Aug. 44. DCK 1177 d/23 Nov. 45. | | | | | |
| SOS | to Overseas | 10 | 12 | 42 | E564 |
| | Missing | 20 | 8 | 44 | |
| | PC X 617 | 22 | 8 | 44 | |

## 2. RECLASS'NS-PROMOTIONS-ETC.

| RANK | EFFECTIVE | | | D.R.O. |
|---|---|---|---|---|
| AC2 | 28 | 6 | 41 | 4AMD50 |
| LAC (cancelled) | 14 | 2 | 42 | 33T538 |
| LAC | 6 | 5 | 42 | E128 |
| T/Sgt. (pd) | 17 | 7 | 42 | MV172A |
| T/F/Sgt (paid) | 17 | 1 | 43 | GB641 |
| T/WO" pd | 17 | 7 | 43 | GB740 |
| S/WO1 (pd) | 17 | 1 | 44 | GB888 |
| A/D 29-7-44 (APR 239/9-10-44) | | | | GB1899 |

## 3. MEDICAL HISTORY

EXAMINATIONS (IN RED INK)

| DATE | FORM | CATEGORY | REMARKS |
|---|---|---|---|

HOSPITALIZATION (IN BLACK INK)

| HOSPITAL QUARTERS | ADMITTED CONFINED | DISCHARGE RET'N DUTY | D.R.O. |
|---|---|---|---|
| 9.6.41 | R-I-C-O | A.B | |
| 5-11-41 | M 2 | A, B, A, B | |
| 12-2-42 | B 2 | A, B, A, B | |

## 4. TRADE AND CHARACTER

| TRADE | GROUP | EFFECTIVE | | | D.R.O. |
|---|---|---|---|---|---|
| PnO | S | 28 | 6 | 41 | 4AMD50 |
| AG. | | 6 | 5 | 42 | E128 |
| | | 30 | 5 | 42 | — |
| air gunner | S/F | 17 | 7 | 42 | MV172A |
| Tarroff J.L. | | 29 | 7 | 44 | (APR239/9-10-44) |

| TRADE PROFICIENCY | CHARACTER ASSESSMENT | DATE OF R41 |
|---|---|---|

## 5. COURSES-TESTS-ETC.

| SUBJECT | RESULT | DATE | AUTHORITY |
|---|---|---|---|
| Transf. to course 3 | | 41 | 32T.S. 234 220 |
| Grad Ose 41 | | 43 | 3 I T 825 |
| Grad 43 posted to RTS | | 13 7 42 | 3 I T 42 |

## 6. LEAVE

| FROM | TO | DAYS | REMARKS | D.R.O. |
|---|---|---|---|---|
| 19-3-42 | 24-3-42 | 5 | | E80-91 |
| 19-7-42 | 1-8-42 | 14 | embarkation | MV172A |
| 10-9-42 | 16-9-42 | 7 | | 34OTU146 |
| 11-11-42 | 25-11-42 | 14 | embarkation | 34OT8126 |

RELIGION — R.C. / PROT. / HEB. / MIS. / OTHER / PREV. SERV.

PROVINCE OF ENLISTMENT

DISCHARGE — C. OF E. / BAP. / R.C. / U.C. / PRES. / HEB. / AC

R.C.A.F. OVERSEAS — ENLISTMENT — MARTIAL STATUS — PRESENT MARTIAL STATUS — HIGH & TECH. SCHOOL EDUCATION

AIR FORCE No. ~~R108399~~ R

SURNAME: TOBIN, FULL CHRISTIAN NAMES: LEO SARSFIELD

ENLISTMENT PLACE Montreal DATE 28-6-41

RE-ENLISTMENT

C.R. FILE NUMBER R.S.S

J.88747

# OFFICER RECORD OF SERVICE AIRMEN

Comm 29-7-44

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

**7. BIRTH:** DATE 15-10-19 | PLACE Montreal | CITIZENSHIP British

FATHER (FULL NAME) Leo Sarsfield Tobin.

BIRTHPLACE Stratford, Ont.

MOTHER (FULL MAIDEN NAME) Ida May Hawes

BIRTHPLACE Toronto, Ont.

**8. EDUCATIONAL STANDING**

HIGH SCHOOL ENTRANCE V Jun

JUNIOR MATRICULATION 3 yrs Jun.

SENIOR MATRICULATION

TECHNICAL SCHOOL

UNIVERSITY

CORRESPONDENCE COURSES

3

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

Trans Clerk & tour conductor 2 yrs.

5610

**10. PREVIOUS ARMY, NAVY OR AIR FORCE SERVICE**

Loyola Canada College Cadets. mtd 3-10-37
Loyola C.O.T.C. mtd. 3-1-40
16-6-41

6

**11. HONOURS-AWARDS, MENTIONS**

| | AUTHORITY | DATE |
|---|---|---|
| Air Gunner's Badge. | 17-7-42 | MV172A |

**12. FLYING EXPERIENCE ON ENLISTMENT (HOURS)**

SOLO | DUAL | PASSENGER

**13. RELIGION** R.C.

1

**14. LANGUAGES** English

1

**15. SPORTS** Swimming, tennis, golf, skating, boxing, Gym. riding, basketball, Rugby, Mechanics.

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

WIFE (FULL MAIDEN NAME) Mary Joy Thomson

PLACE OF MARRIAGE Montreal, P.Q. DATE 24-11-42

AUTHORITY (IF AFTER ENLISTMENT) 14339

1

**17. MARRIED ESTABLISHMENT**

| REMARKS | RANK | EFFECTIVE | D.R.O. |
|---|---|---|---|
| | | | |

**18. CHILDREN**

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

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

FULL NAME: Leo Sarsfield Tobin. RELATIONSHIP Father

ADDRESS: 630 Roslyn Ave. D.R.O.

FULL NAME: Mrs Mary Tobin RELATIONSHIP Wife

ADDRESS: 3219 Westmount Blvd Westmount P.Q. D.R.O.

1

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

| RATE CHANGES ETC. | EFFECTIVE | | | D.R.O. | RATE CHANGES ETC. | EFFECTIVE | | | D.R.O. |
|---|---|---|---|---|---|---|---|---|---|
| Forfeit pay & allow 5 days AWL | 2/6 | 1 | 42 | 6475 | | | | | |
| Forfeit pay & allow 3 days AWL | 16/9 | 1 | 42 | 3475 | | | | | |
| Hosp & NYD 12 hours 55 minutes | 27/9 | 3 | 42 | E91 | | | | | |
| Ofte Pay | 31/6 | 3/4 | 42 | E91 | | | | | |
| 168 Hours detention | 31 | 3 | 42 | E91 | | | | | |
| A.W.L. from 0630 hrs | 23 | 6 | 42 | MV152 | | | | | |
| Forfeits pay A.W.L. 3 days | 23/25 | 6 | 42 | MV157 | | | | | |
| Cancelp. A.W.L. 1530 hrs | 25 | 6 | 42 | MV156 | | | | | |
| Forfeits 3 days pay | 1/7 | 9 | 42 | 3475U153 | | | | | |
| Remit Cdn Pay Allot | 1/9 | 9 | 42 | 3475U153 | | | | | |
| Forfeit Pt Badge Pay | 23/28 | 11 | 42 | 1/3941 | | | | | |

**21. ENGAGEMENTS**

| TERM | EFFECTIVE | D.R.O. | TERM | EFFECTIVE | D.R.O. |
|---|---|---|---|---|---|
| Duration | 28 6 41 | | | | |

**22. TEMPORARY DUTY AND MISCELLANEOUS ENTRIES**

| FROM | TO | DATE | D.R.O. |
|---|---|---|---|
| Occ. qtrs. & draw rations | | 28/6/41 | 4AM 250 |
| Occ. Guard qtrs & drawing stns | | 10-8-41 | 987165 |
| Occ. QR qtrs & draw stns | | 26-10-41 | 3475187 |
| Occ Guard qtrs & draw rats. | | 27-2-42 | E59 |
| Iss S.L.T.W. No C82090 | | 19-3-42 | E79 |
| S.L.T.W. #C102912 d/ 9-9-42 | | | 3407U140 |
| Issued S.L.T.W. C152356 | | 8-11-42 | 3407U201 |

Date and Place of Signing R 40

**22.(A) ADDRESS PRIOR TO ENLISTMENT**

630 Roslyn Ave,
Westmount P.Q.

15600

**23. DOCUMENT CONTROL** (INDICATE RECEIPT BY DATE)

| R60 | R79 | B465 | X-RAY | AFM-13 | IDN. CARD | |
|---|---|---|---|---|---|---|
| 24-7-41 | JAN 26 '42 | 3-7-41 | | | | KX |
| 11-12-42. | | 18-7-41 | | | | Etf. |

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

# ROYAL CANADIAN AIR FORCE SERVICE BOOK

## INSTRUCTIONS TO OFFICERS AND AIRMEN

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

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

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

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

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



Air Force No. R108399 Surname TOBIN

Christian Names (in full) LES SARSFIELD

Date of Birth 5-10-19 Religion R C

Date of Enlistment/~~Appointment~~ 28-6-41

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

Occupation in Civil Life Asst Clerk / Asst Purser

Signature of Holder

Name and Address of Next-of-Kin

Mrs Mary Joy Tobin

3219 Westmount Blvd, Westmount Que

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

Certified Correct F/Sgt RAB MACKENZIE WO

Date 31-3-41 Place RCAF O/S H.Q

R.A.F. Rank 1-3-43 Sgt Gp air



## 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 |
|---|---|---|---|
| A. G. | 6-5-42 | | |
| " Sp. | 17-[illegible] | 7-42 | |
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |

| Rank | Date of Effect | Authority | Signature and Rank of Officer making Entry |
|---|---|---|---|
| A.C.2 | 28-6-41 | | |
| L.A.C. | 6-5-42 | | |
| Sgt. | 17-7-42 | | |
| F/S & T | 17.1.43 | Records U.K.B.A.U | |
| W.O. II | 17-7-43 | O/O 740/43. | [illegible] a/s/o UKBAU. |
| P/O | 29-7-44 | O/O 1099/44 | |
| | | | |
| | | | |
| | | | |



## MEDALS, DECORATIONS, MENTIONS, ETC.

| Particulars | Date and Authority | Signature and Rank of Officer |
|---|---|---|
| | | |
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## 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 |
|---|---|---|
| | | |
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## LEAVE RECORD
(With Free Railway Warrant)

| From (date) | To (date) | Signature of Officer |
|---|---|---|
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## 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. |
|---|---|---|---|---|
| 27-6-41 | A1B | | | |
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## BLOOD GROUP

| Date | International | Initials of M.O. |
|---|---|---|
| 11.6.41 | O. | |

## NIGHT VISUAL CAPACITY

| Date | Score | Group | Initials of M.O. |
|---|---|---|---|
| | | | |

## IMMUNIZATION PROCEDURES
## VACCINATION

| Date | Result | Initials of M.O. |
|---|---|---|
| 29.6.41. | — | |
| 9.8.44 | | DP·F/C |

| Susceptibility Test | Date | Result | |
|---|---|---|---|
| Schick Test | 17.10.41 | NEG. | |
| Dick Test | 17.10.41 | POS. | |
| | | | |

## PROTECTIVE INOCULATIONS*

| Nature of Inoculation | Date | Dose | Initials of M.O. |
|---|---|---|---|
| TABT. | 29.6.41. | | |
| TABT. | 16.7.41. | | |
| TABT. (Ann) | 8.12.42 | | |
| TABC -25 cc ATT. 1-c.c. | 1-11-43 | as shown | [illegible] |
| YELLOW FEVER | 20-12-43 | | |
| TYPHUS | 27-7-44 1cc | | DP F/c. |
| | | | |
| | | | |
| | | | |



## IMMUNIZATION PROCEDURES—Con.

| Nature of Inoculation | Date | Dose | Initials of M.O. |
|---|---|---|---|
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* 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.....

ARR. N/A. FEB 8

ASS PAY. APRIL

W/O FEB 17

Ascension Parish
Westmount, P.Q.

To R.C.A.F.

37 Cote St. Antoine Road,
September 4th, 1940.

To certify that I have known Mr. Leo Sarsfield Tobin for the past seven years. He is a member of this parish, and belongs to a very fine Canadian family.

I can testify to his continued good moral conduct.

H. Irish McDonagh

Parish Priest.

R.C.A.F. Records Office
Rec'd JUL 4 1941
C. K. ..... C.I.B. .....
R. C. ..... N. I. .....
S. L. ..... P. A. .....

Montreal Herald
MONTREALS OLDEST EVENING NEWSPAPER-ESTABLISHED-1811
HERALD · PUBLISHING · COMPANY · LIMITED
A.C.MORTON, MANAGING DIRECTOR

October 1st, 1940.

ROYAL CANADIAN AIR FORCE AND
TO WHOM IT MAY CONCERN:

I understand my young friend Leo S. Tobin, seeks enlistment in the Royal Canadian Air Force. I have known Leo Tobin since his birth and it is with a great deal of pleasure I commend him to all concerned as a young man of excellent character, ability and initiative, and as one likely to serve in any branch of the Service with enthusiasm.

A.C. Morton

R.C.A.F Records Office
Rec'd JUL 4 1941
O. K.....C.I.B.....
R. C.....N. I.....
S. L.....P. A.....

R108399 (R-4)

R E G I S T E R E D

27 Nov/45

Mr. L.S. Tobin,
Apt. 93, 1469 Drummond Street,
Montreal, Quebec.

Dear Mr. Tobin:

It is with deep regret that I must inform you that I have been advised by the Casualties Officer that your son, Pilot Officer Leo Sarsfield Tobin, is now for official purposes presumed to have died on Active Service Overseas on August 20th, 1944.

I realize that this letter will be a blow to the hopes you have entertained for so long, and in your added sorrow I offer you my deepest sympathy. May the same spirit which prompted your son to offer his life give you renewed courage.

Yours sincerely,

( Signed ) H. L. Campbell

(H.L. Campbell)
Air Vice-Marshal,
Air Member for Personnel.

GB

GB 24/11

POST PRESUMPTION MEMORANDUM 3074

P.4.Cas. M.R.(1) 16.8.46.

| FILE NO. | RANK | NUMBER | NAME | INFORMATION |
|---|---|---|---|---|
| | | | | ITALY |
| P.422074/44<br>4.8.44.<br>20. | F/Sgt. | 1063380 | DICKSON, A. | Information from H.Q. M.E. M.R. & E.S. shows that the body of Dickson has been re-buried in the British Empire Cemetery, Genoa, Plot 1, Row, C., Grave 6. |
| | W/O | R.108399 | TOBIN, L.W.S. | Nothing has been heard of these three airmen since they were reported missing, and it is assumed they lost their lives at sea. |
| | W/O | 1344410 | McGINNIS, A.W. | |
| | Capt. | 205853V. | KLOMPJE, J. | |
| | | | | CREW COMPLETE |

Circulation to:

Amendments (B.1.)
Chron.Cards (B.1.)
Missing Index (M.R.1.)
M.R.Folder (M.R.1.)
Presumption (B.4.)
Miss Crabbe (B.7. for A.G.13.)
Cas.Can.
R.A.A.F. O.H.Q.
P.File.

G.96276.

J88747 (DPC)

Ontario.
2nd June, 1952.

Mr. Leo S. Tobin,
Tobin's Travel Bureau,
1240 Peel Street,
Montreal, Quebec.

Dear Mr. Tobin:

I have for acknowledgment your letter of May 21, concerning the memorial that is being erected at Runnymede, which is one of five memorials that will be erected to commemorate Commonwealth Air Force boys that lost their lives and that do not have "known" graves, for due to the extreme hazards attending air operations, there are, unhappily, many thousands of Commonwealth aircrew personnel that have no "known" graves, each of the memorials that will be erected, will be representative of a theatre of operations.

The memorial at Runnymede is representative of the North West European theatre of operations. Two memorials will be erected in the Mediterranean or Middle East area, one at Malta, and one at El Alamein. Your son, Pilot Officer Leo Sarsfield Tobin was operating in the Mediterranean Theatre when reported missing, and the name of your son, and his crew companions, one a member of the South African Air Force, the two others members of the Royal Air Force, will appear on the Memorial at Malta. The fourth and fifth memorials will be erected at Singapore and Ottawa, representing the Far East, and North American Theatres of Operations, at a later date official advice will be conveyed to your son's widow. The department is presently engaged in correspondence with the next-of-kin of those to be commemorated at Runnymede.

Concerning your son's service medals, the distribution of service medals is a function carried out by the Department of Veterans Affairs who advise that the medals were despatched to your son's widow, his legal next-of-kin, in April 1950. If there is anything further that you wish to know concerning these Memorials, do not hesitate to write to me, and I would like to take this opportunity of expressing my deepest sympathy in the loss of your gallant son.

Yours sincerely,

(W.R. Gunn) W/C
R.C.A.F. Casualties Officer,
for Chief of the Air Staff.

WRG/YP

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

# WILL

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

(1) I, Leo Garfield Lobin of the ~~City~~ ~~Town~~ ~~Village~~ Township of Montreal in the County District of ..... Province of Que., .....
(Civil Occupation)
a member of the Royal Canadian Air Force, Number R- 108399 do hereby revoke all former Wills by me made and declare this to be my LAST WILL.

Last Permanent Civilian Address

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

(2) I GIVE, DEVISE AND BEQUEATH unto my wife
Mary Jay Zobin
3209 Westmount Blvd.
Westmount, Que.
My whole estate

Relationship, Names and Address of Residuary Beneficiaries.

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

(4) I appoint Mary Jay Zobin 3209 Westmount Blvd.
(Name) (Address)
Westmount, Que., to be the ~~Executor~~ Executrix of this my Last Will.

IN WITNESS WHEREOF I have hereunto set my hand this 30th. day of November 1942.

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.

x Leo Zobin
(Signature of Testator)

First Witness sign here.

(5) Norman Smith.
(Signature)
No 14 Depot Halifax N.S.
(Address)
Clerk.
(Occupation)

Second Witness sign here.

[illegible]
(Signature)
No 4 Depot Halifax N.S.
(Address)
Clerk
(Occupation)

(Witnesses are not to be beneficiaries.)

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

[OVER]

NOTE

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

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

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

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

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

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

GENERAL

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

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

STATEMENT OF LOCATION OF WILL

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

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

.....

.....
(Signature)

DEPARTMENT OF NATIONAL DEFENCE

INVENTORY

Date.....

The Estates Branch has received the following personal effects of

NAME.....J.66747..R/O..TORN..L.S.....

2 Medallions
1 Figured box
2 Observers brevets
1 9ct. gold tie pin
Miscellaneous passes
1 Pr. sun glas es (broken)
in writing case
1 Book memoires
1 Writing case
4 Souvenir books of Scotland
1 Cigarette case metal
1 Parker Duofold pen & pencil in case
Letters & photos in case
4 Metal rings
Souvenir buttons
25 Coins
3 Medal ribbon 1939
5 Studs
2 Dice
1 House mascot
10 Canada badges
1 1000 Kronen note
1 Prayer book
1 Rosary
1 Crucifix
2 Medals on chain
2 Photo wallets
1 Bunch of 6 keys
1 Montmore pen & pencil in case
1 Waterman pen & Sheaffers pencil in case
2 Prs. & 2 odd cuff links
1 Chain bracelet
2 Pr. nail scissors

Received the effects as listed

SIGNATURE.....

DATE REC'D.....

JG

J88747 (R03C)

R108399

OTTAWA, Ontario, March 6th, 1945.

Mrs. L.S. Tobin,
3219 Westmount Blvd.,
Westmount, Que.

Dear Mrs. Tobin:

I have the honour to forward, herewith, the Royal Canadian Air Force Officer's Commission Script for your husband, Pilot Officer Leo S. Tobin. This Script, which is being forwarded to you for safekeeping, represents the authority vested in Pilot Officer Tobin, as well as the trust placed in him by His Majesty, The King.

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

Yours very truly,

(T.K. McDougall)
Group Captain
for Chief of the Air Staff.

Encl. - 3
S/L W.G. Bacon/LD
R108399