J88772
LINTON
OSWALD ADAM


AG
R143924
3499

Linton a a.

ROYAL CANADIAN AIR FORCE



SERVICE

AND

PAY BOOK

THIS BOOK IS THE PROPERTY OF THE
ROYAL CANADIAN AIR FORCE, AND
MUST BE SURRENDERED ON DEMAND

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 88972

Air Force No. R143924 Surname LINTON

Christian Names (in full) ASWALD ADAM

Date of Birth 30-1-20 Religion Baptist

Date of Enlistment/Appointment 29-12-41

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

Occupation in Civil Life Farmer

Signature of Holder O. A. Linton

Name and Address of Next-of-Kin

Mrs Katherine Linton (mother)
RR no 2 Agincourt Ont.

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

Certified Correct A B Hamilton P/O

Date 8-7-43 Place 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
AG Sfr.	9-7-43	164A	A B Hamilton

Rank	Date of Effect	Authority	Signature and Rank of Officer making Entry
Sgt.	9-7-43	164A	A B Hamilton
PO 14.344	o/o 1099/44		

MEDALS, DECORATIONS, MENTIONS, ETC.

Particulars	Date and Authority	Signature and Rank of Officer

MISCELLANEOUS ENTRIES

(For entries for which space is not otherwise provided)

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

Particulars	Date and Authority	Signature and Rank of Officer
1250	26-7-43	J Hewson Plt

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.
11.12.41	A. F. HOPKIRK	

Susceptibility Test	Date	Result	
Schick Test			
Dick Test			

PROTECTIVE INOCULATIONS*

Nature of Inoculation	Date	Dose	Initials of M.O.
TABC	15/9/43	.25	JKR F/O
ATT TABC.	21/9/43	1cc. 5.	JKR
Yellow Fever.	21/9/43		JKR

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.

SJ088772 LINTON OSWALD A — PO

1 NUMBER — 9 NAME — 29 RANK

SERVICE AWARD CARD

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

39-45 STAR	ATL. STAR	A/C EUR STAR	AFRICA STAR	PACIFIC STAR	BURMA STAR	ITALY STAR	FR. AND GER. STAR	DEFENCE MEDAL	GEN. SER. MEDAL	C.V.S.M.				
✓		✓						✓	✓	✓			OP wgp	AWARD
										✓				AWARD AND CLASP
														APPLICATION DISPATCHED
														RIBBON ISSUED
													13/11/46	MEDAL ISSUED

1320007

PREFIX — NUMBER — NAME — RANK — CODE

IBM 83961

LICENSED FOR USE UNDER CANADIAN PATENT NUMBER 315306

1297. 31/3/50

Mrs. Katherine Linton (mother)
R. R. 2,
Osgoode,
Ont.

June-45

MEMORIAL BAR
DATE DESP.....
REGN. NO A1303

NAME LINTON, Oswald Adam FILE NO. R14392

RANK ~~SGT.~~ P/O CATEGORY ~~MISSING~~ PRES DEAD REG. NO. ~~R/A~~ J88772

DATE OF DEATH: 15 Mar. /44 MOTHER LIVING: YES WIFE: NA

MINISTERIAL CARD: 5-4-44 ROYAL MESSAGE: MEMORIAL CROSS TO CHAPLAIN: APR 17 1945

APR 19 1945

To mother
To Mother- 16-2-45

DEL'D TO MOTHER:

DEL'D TO WIFE:

Mrs. Alexander Linton,
R.R. No. 2,
Osgoode, Ontario.

COMMAND:

RELIGION:

MILICE ACTIVE NON PERMANENTE DU CANADA

CERTIFICAT DE LICENCIEMENT

Je certifie *par la présente que* C-005829 Private LINTON, Oswald Adam
(Grade et nom)

de Osgoode *Comté de* Carleton

Province de Ontario *a servi sans interruption dans le*

No.3 N.R.M.A. Clearing Depot *de la Milice Active*
(Régiment ou Corps)

Non Permanente du Canada à partir du 4th *jour de*

December *19* 41 *jusqu'au* 28th *jour de* December

19 41. *et en est maintenant licencié, et qu'il a pris part à tous les exercices*

annuels durant les années .....
(Chaque année spécialement en chiffres)

For the purpose of enlisting in R.C.A.F.
(Total du nombre des années en mots)

O. A. Linton
(Signature du soldat)

Endroit CORNWALL? Ontario

Date December 28th *19* 41

.....

Commandant .....
(Escadron, batterie ou compagnie)

.....

†*Commandant* C.A.(B).T.C. # 31
(Régiment ou Corps)

NOTE:— †Non requis dans le cas d'un escadron, d'une batterie ou d'une compagnie indépendante ou détachée.

M.F.B. 350A
2M—7-35
H.Q. 1772—39—62

AIR FORCE No. R143924 POSTED TO #1 M.D. Toronto, Ontario. TRADE Standard General Duties.

ROYAL CANADIAN AIR FORCE

(ATTESTATION PAPER)

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

1. Surname LINTON FULL Christian Names OSWALD ADAM
2. Present Address C.A.B.T.C. no. 31 Cornwall Telephone none
3. Permanent Address Osgoode R.R. no 2 Ontario
4. Place of Birth Papineau County Quebec Citizenship Canadian
5. Date of Birth January 30, 1920 Married, Single, Widower, Separated, Divorced Single
6. Particulars of Children None

Name	Date of birth	Name	Date of birth

7. Occupation Farmer 8. Religion Baptist (State denomination)
9. Languages English (State proficiency)
10. Next of Kin (Full Name) Katherine Linton Relationship Mother
" Address Osgoode R.R. no 2 Ontario
11. Father (Full Name) Alexander Linton Birthplace Montreal, Que.
" Address Osgoode R.R. no 2 Ontario Citizenship Canadian
" Occupation Farmer
12. Mother (Full Maiden Name) Katherine Coursolle Birthplace County Papineau, Quebec.
" Address osgoode, ont. Citizenship Canadian
13. Details of any Naval, Military or Air Force Service: ~~C.A.B.T.C. Cornwall~~

Unit	Place	Rank	Trade	Date From	Date To	Reason for discharge
C.A.B.T.C.	Cornwall	Private		Dec 1941	Dec 1941	To join R.C.A.F

R.C.A.F. Records Office
Rec'd JAN 2 1942
O.K. Loc. M.D. 2
R.C. N.I.
R.A.

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

R.C.A.F. Form R. 100
400M—6-40 (5739)
H.Q. 1062-8-82

423-61

21. Particulars of Education:

——	Name of school	Date From	Date To	Courses—Subjects, etc.
Primary Education—Public or Separate School	Belmeade	1926	1934	Entrance
High School—Collegiate Institute, etc.				
Technical School				
University or School other than above				
Correspondence Courses, etc.				

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

Employer and place	Duties, trades, positions	Date From	Date To	Reason for leaving
Thos. Hoy.	Farm.	1934	1941	To join Army.
Alex Linton. home	Farm. till	1934	1934	

23. Flying Experience (in Hours) Solo None Dual N. A. Passenger no.

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

25. Sports engaged in. State: extensively, moderately, occasionally. Softball Hunting.

26. AIR FORCE DUTY you wish to enlist for Ground Duties. ~~Flying Duties.~~ General Duties

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

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

Name	Address	Occupation
Thomas Hoy	Osgoode R.R.#4 Ontario	Farmer
Katherine Linton	Osgoode R.R.2. Ontario	Farming
Donald. Casselman	Osgoode R.R.2. Ontario	Farming.
Stuart Ferguson	Osgoode. R.R.2. Ontario	Farming.

28. Other information that may have any bearing on this application. Some kind of Mechanical work.

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 December 11 1941 Signature Oswald. Adam. Linton

NATIONAL REGISTRATION CERTIFICATE PRODUCED. RD 106 RD

FOR OFFICIAL USE ONLY

(A) *Report of Interviewing Officer—*

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

Suitability for (state in what capacity) ..... standard general Duties .....

Date ..... Dec. 12, 1941 ..... Signature ..... R B Deney ..... Rank ..... P. .....

(B) *Report of Trade Test—*

Trade in which tested .....

Result .....

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

.....

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

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

I, ... Oswald Adam Linton ..... 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 ..... 29-12-41 ..... 19 ..... Oswald Adam Linton .....
Signature of Recruit

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

I, ... Oswald Adam Linton ..... do sincerely promise and swear (or solemnly declare) that I will be faithful and bear true allegiance to His Majesty.

Date ..... 29-12-41 ..... 19 ..... Oswald Adam Linton .....
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 ..... OTTAWA ..... this ..... 29th ..... day of ..... December ..... 19 41.

J. C. Hewlegging ..... P/O ..... #12 Recruiting Centre, R.C.A.F., OTTAWA, Ontario.
Signature of Officer — Rank — Unit

FOR OFFICIAL USE ONLY

CERTIFICATE OF MEDICAL EXAMINATION

Part 1. Information obtained from the applicant—

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

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

3. Have you ever worn glasses? no

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

Examiner's Remarks *re* above .....

Oswald Adam Linton
Signature of Applicant

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

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

1. Identification marks or scars (if operative obtain history)
"U" Shaped scar on Knuckle top Index finger
Inoculated scar below left elbow.

2. Height 5 feet 11½ inches. 3. Weight 129 pounds.

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

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

Range of expansion 2 inches

8. Hearing—Right W V 20 Left W V 20 Tympana—Right Intact Left Intact

9. Vision—Without glasses—Right 20/15 With glasses—Right

Left 20/20 Left

10. Condition of mouth and teeth Dec 28 pts 18

11. Urine—Albumen nil Sugar nil.

12. Abnormalities (Congenital and Pathological) found on Examination
moderate left varicocele

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 A4B

Any special remarks of the Medical Officers
green vision to be checked at Recruiting centre.

X-Ray 20585 Neg. (Chest) 29-12-41

Part 2 Cont'd.
13. Reflexes N
14. Heart N
15. Lungs N
16. Blood Pressure S. D. 118/74
17. Colour Vision Safe (Irish)

Date Dec 11th 1941

J. H. Hargan Lt Col President
H. H. Warner F/O Member
Member

(*To be completed in triplicate*)

Duplicate

M.F.M. 103
200M—5-41 (442) (971)
H.Q. 1772-39-1828

MILITIA ACT

THE NATIONAL RESOURCES MOBILIZATION ACT, 1940

N.R.M.A. PERSONNEL

ENROLMENT FORM

N.R.M.A. Serial Number of Notice of Call....C-17489....Regimental Number....C-605829

1. Taken on Strength of No....3....N.R.M.A. Clearing Depot....CA(E)TC #31

2. Surname (Block Letters)....LINTON

3. Christian Names (in full)....Oswald Adam

4. Present Address....R.R.# 2, Osgoode

5. Place of Birth....Canada (Country)....Quebec (County or Province)....Papineau (Town or Township)

6. Date of Birth....Jan-30-20.... 7. Religion—Denomination....C of E

8. Physical Description: Height....6.0....Weight....142....Eyes....brown....Hair....dark

Complexion....Fair....Identification marks....curved scar over first joint left index finger

9. Married, Single, Widower?....single

10. Next-of-Kin....Katherine Linton (Name)....Relationship....Mother

....R.R.# 2, Osgoode Ont (Address)

11. Trade or Occupation....Farmer

12. Previous Naval, Military or Air Service....nil (State Units and Dates of Service)

13. Preference, if any, for, R.C.N.?....nil.... Army?....nil (Arm of Service).... R.C.A.F.?....air service

14. Employment in War Industry, if any....no

Oswald Linton
(Signature of Man)

G Phibbs - Lt
(Signature and Rank of Enrolment Officer)

4-dec-41
(Date of Signature)

TRAINING CENTRE PARTICULARS

A. Attached to Basic T.C. No....31....at....Cornwall....Date....4-dec-41....

Completed....Days Basic Training.

(Date, Signature, and Rank of Recording Officer)

B. Attached to Advanced T.C. No....at....Date....

Completed....Days Advanced Training.

Qualities of Leadership, Positive....Becoming Evident?....Dormant?....

Transferred to....R.C.A.F.... Date....28-12-41....
(R.C.N., formation or unit of the C.A., R.C.A.F.)

17/2/42 D K Robinson Lieut
(Date, Signature and Rank of Recording Officer)

C. Medical Category on acceptance at Basic Training Centre....A1

RECORD OF SERVICE of LINTON (Surname) Oswald Adam (Christian Names) Regimental Number C-605829

Qualifications

1. Naval, Military, or Air: nil
2. Business or Professional: nil
3. Trade or Civil: farmer
4. Technical: nil
5. Languages, etc: Engl. (mother tongue) Can speak? Engl Can read and write? Engl

Educational Qualifications

6. High School or Collegiate: nil (years completed) Graduation or Matriculation: nil (specify)
7. *College: nil
8. *University: nil

*(Name of institution, courses or years completed, and degrees obtained to be shown)

Can drive a car? no Repair a motor? no Cooking experience? no Hobby? none

All N.R.M.A. Personnel will be taken on as Private soldiers, appointments and promotions to higher rank to be shown as provided in the space below.

Report: Date	Report: From whom received	Record of Promotions, Reductions, Transfers, Casualties, Reports, etc., from date taken on Strength of Field Force	Rank Shown	Effective Date	Unit	Place	Authority: Part II D.O. No. Cas. List, etc.	Authority: Dated
		Joined on TRANSFER from N.R.M.A. Clearing Depot No.						
		Ceases to be attached to CA(B)TC 31 SOS of no 3 NRMA Clearing Depot on enlistment in the RCAF:	Pte.	28-12-41	CA(B)TC	Cornwall	D.O 167 29-12-41	

Regtl. No. C-605829 Rank Pte Surname LINTON Christian Names Oswald Adam

VACCINATIONS, INOCULATIONS, BOARDS, RECLASSIFICATION OF MEDICAL CATEGORY

Date	Brief Details and Signature	Date	Brief Details and Signature	Date	Brief Details and Signature
1-12-41	Vacc				
1-12-41	1 CC				

STATION	Date of Arrival at Station	Dates of Admission into Hospital			Dates of Discharge from Hospital			DISEASE	Number of days in Hospital	Remarks on nature of the disease; how induced; if mild or severe; if completely recovered from; whether any particular treatment was adopted. In venereal cases state nature of primary disease. If an accident, state whether it occurred on duty and whether a Court of inquiry was held. Date of issue and particulars of artificial teeth or surgical appliances supplied.	Signature of Medical Officer
		Day	Month	Year	Day	Month	Year				

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 OSWALD ADAM LINTON (b) Reg'l. No. R 143924
2. (a) Arm of service R.C.A.F. (b) Unit No. 16 SFTS. HAGERSVILLE (c) Rank A.C. 2
3. (a) Date of birth 30-1-20 (b) Have you any dependents? No (c) Place of residence at time of enlistment OSGOODE RR 2.
4. (a) Place of enlistment OTTAWA. ONTARIO (b) Date of enlistment 29-12-41.

Section B—EDUCATION AND TRAINING

5. (a) State age on finally leaving school 15 (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.) GRADE 8
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 THOS HOY. Address OSGOODE. RR.4. ONT.
19. Nature of employer's business (for instance, "farmer", or "building contractor", or "boot factory", or "iron foundry", or "retail store", etc.) FARMER
20. (a) Your specific occupation FARMER (b) Number of years' experience at this occupation with any employer 7 YRS.
21. (a) Did your employer promise definitely to give you employment on discharge? YES (b) Did your employer refuse to promise you employment on discharge? No (c) Do you wish to return to your former employment? YES

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? YES (b) Do you feel competent to operate a farm? YES (c) If so, in what kind of farming? MIXED
25. (a) Were you born on a farm? YES (b) How many years' actual farming experience have you had? 7 (c) In what provinces did you have experience? ONT.

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

R.C.A.F. Records Office
Rec'd MAY 18 1942
O.K. C.I.B.
R.C. N.I.
S.L. R.A.

DATE 6-3-42 1942 SIGNATURE Oswald Adam Linton

AIRMAN'S STATEMENT AT EMBARKATION

1. Number R143924 Rank Lgt. Name Linton Oswald Acton
   Surname Christian Names

2. Name and address of person to be notified in case of casualty.....
   Mrs. Katherine Linton - R.R.#2 Osgoode
   Ontario Canada Relationship, if any Mother

3. Alternative or second name of person & address to be notified in case of casualty.....
   .....

4. Legal next of kin(wife, if married, father if unmarried, mother if father deceased) Linton Katherine
   Surname Christian Names

5. Are you single, married, widower, divorced, separated? Single
   Full Christian & surname of wife Nil
   Address Nil

6. If married, have you completed a will since marriage? ....state location.....
   No.1 Manning Depot. Toronto Ont.

7. Have you completed necessary documentation for dependent's allowance Yes.

8. Are your parents living? Father N....Mother Yes

9. Full Christian & surname of parents (if living).
   Father.....
   Address.....
   Mother Mrs. Katherine Linton
   Address R.R.#2 Osgoode Ont.

10. Your own permanent home address R.R.#2 Osgoode Ont

11. Religious Denomination Baptist

12. Have you Identification Discs? Yes

A irman's usual signature O. A. Linton

Date 26 July 1943

Records Office
AUG 2 1943
C.I.B.
P. A.

The instructions regarding 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. J.28772 Name LINTON, Aswald Adam. Rank T/Sgt. P/S
(In full in block capitals, surname first). (Or acting appointment).

R.A.F. Trade Air Gunner (Gp.2) Special Qualifications
(e.g., Gas Instructor, Fire Fighter, Boxing Instructor).

Date of Birth 30.1.20. Religion Baptist. Occupation in Civil Life Farmer 1934-41

Last Enlisted 29.12.41. Current Engagement D.of W.

If a member of the Auxiliary Air Force

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

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

Mrs K Linton (mother) RR2 Georgetown Ont

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.")

Mother

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.
3 B. & G.	L.Y.Depot	23.7.43.		G.D."Std/ AC.2.	29.12.41.
L.Y.Depot	RAF.Tr.	2.8.43.		" " AC.1.	29.3.42.
	Emb.New York.	3.8.43.		" " LAC.	1.7.42.
	Dis.Emb.U.K.	118.43.		Air Gunner "Std"LAC.	17.4.43.
Int.C.119.	3 PRC.	12.8.43.		Air Gunner "Spec" T/Sgt.	9.7.43
3 PRC.	No. 22 O.T.U.	14.9.43		Air Gunner (Gp.2) T/Sgt.	9.7.43.
22.O.T.U.	61. BASE	4/12/43.			
61 Base	427 Sqdn.	20.2.44			
MISSING FROM OPERATIONS		16-3-44.			
Discharged on Apb. to Commission		13.3.44 P/61099/44			

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.

(*11902—10349) Wt. 54527—5881 50M 4/43 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 posting; 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.	VG	Air Gunner	Sup	Sup	/	Rec'd	16/3/44	R Sturrock Wg/C.

ROYAL CANADIAN AIR FORCE

RECORD OF SERVICE AIRMEN

J86772.

~~R143427~~ A.F. No. | Linton Surname | Oswald Adam Christian Names | Baptist Religion

Born 30/1/20 Place Lapineau Que. Country Canada. Citizen of Canada. Racial Origin Scottish

PARTICULARS OF FAMILY

~~M.~~ S. ~~D.~~ ~~W.~~

Wife's Maiden Name | Present Address (in pencil)

Children Names	Place of Birth	Date	Children Names	Place of Birth	Date

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

(Bro.) Katherine Linton (Mother)
RR 2. Osgoode, Ontario.

CIVIL EDUCATION

High School Entrance ✓ Jr. Mat. Sr. Mat.

Technical School Business Courses

University

CIVIL OCCUPATIONS AND EXPERIENCE

Farmer. 1934-41

PREVIOUS SERVICE	ENLISTMENT	Med. Cat.	Date	Med. Cat.	Date
C.A.(R.)T.C Cornwall Ont. Pte. Dec 1941	Date 29-12-41	A4B3	11 12 41		
	At Ottawa Ont.	A1BA3B(H)	5 7 43		
	Term Duration				

RANK	Auth.	Date	TRADE	Auth.	Date
A/C2.		29/12/41	Standard.		
A/C1		29/3/42	Gen Duties		
LAC	DRO170	1/7/42	Gen Air Gunner		9/7/43
temp Sgt	DRO163A	9/7/43	(spec Group)	DRO163	
P/O (O)	19/4/44.	14/3/44			

TRADE TESTS AND COURSES					
Trade	GP	%	P or F	Date	
Rem. to Aircrew A.G. with Retention of Trade Group	DRO 87/43			17 Apr.	43

LEAVE

From	To	Auth. and Description
8-7-42	21-7-42.	DRO165/42 (14D)
23/12/42.	29/12/42.	DRO366/42 (SD)
7 Apr. 43	14 Apr. 43 (H)	Annual DRO87/43
10-7-43	23-7-43 (14 dep)	Embk. DRO163A

CHARACTER AND TRADE ASSM. HONOURS, AWARDS AND MENTIONS

Date	Character	Trade and Assm.	Honours and Awards	Auth.
9/7/43		A.G.	Air Gunner Badge	DRO163A

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

(OVER)

MOVEMENTS AND CASUALTIES

AUTHORITY	UNIT FROM	UNIT TO	DATE	AUTHORITY	UNIT FROM	UNIT TO	DATE
MOR 13.	R.C. Ottawa Ont.	# 1 M D	29-12-41				
DRO. 312	"	"	30-12-41				
NOL MO 23 W	No. 2 M D.	#16. S. F. T. S.					
Toronto	Toronto	Hagersville Ont.	26/1/42				
DRO 165/42	issued Special Leave TW #71358, 7-7-42 Toronto To Ottawa + Ret						
DRO 199/42	Auth. to draw 8-7-42	Ration allowance to 21-7-42	(14 days)				
DRO 307/42	Temp Det.	to Hamilton	(9/c tests)				
Del 07	45 hrs.	21-12-42 Am.	14.25 h. 21-12-42				
DRO 306/42	Auth draw 23/12/42	Ration Allow 29/12/42	(5 days).				
DRO 87/43 to. 17	Auth to draw Jan/43 incl	Rat. Allow. 7 Apr. 43 (11 days)					
	#6 SFTS	#2 Gen Reserve Ground School					
DRO 87/43	Hagersville	Training School Trenton, Ont	17-3-43				
TOS DRO 110	#16 S.F.T.S.	#2 A.G.G.T.S.	18/Apr/43				
S.O.S. DRO 145	#2 A.G.G.T.S.	#3 B & G.	24-5-43				
DRO 163A	#3 B & G Rockcliffe	#1 Y Depot Aldergrove	23 July 43				

AIR FORCE NO. R143924 NAME OF AIRMAN AC Linton,O.A.

EVIDENCE OF BIRTH

DESCRIPTION OF DOCUMENT Certificate of Baptism

NUMBER DATE Feb 14th,1920

SUBJECT- Self (full name) Oswald Adam Linton
Child(full name) N.A.

DATE OF BIRTH January 30th,1920

PLACE OF BIRTH Montreal, Quebec Canada
city, town, village province, country

MOTHER (Full Maiden Name) Katherine A. Coursolle

FATHER (Full Name) Alexander Linton

DATE 10-3-42 CERTIFIED TRUE EXTRACT

(L.B.Long) Flying Officer,
for Commanding Officer,
No. 16 S.F.T.S.,
Hagersville, Ontario.
(Signature & Rank)

Strike out words not applicable

A.F.M. No.10

R.C.A.F. Station
Rec'd MAR 13 1942
O. K. C.I.B.
R. C. N. I.
P. A.

S T A T U T O R Y D E C L A R A T I O N

I.....Oswald.Adam.Linton.....a citizen of...Canada.....
presently residing in the ~~City~~ Town, of.....Osgoode.....in the
Province of....Ontario.....do solemnly declare that I was born
on the...30th.....day of.....January.....in the year...1920...
in the ~~City~~ Town, of..Papineau.....in the Province of...Quebec.....
AND THAT MY PARENTS ARE:

MOTHER:-(Maiden Name).....Katherine.Coursolle.....

ADDRESS:-.Osgoode..Ontario...R.R.#2.....

PLACE OF BIRTH:-.Papineau.County,.Quebec.....

CITIZENSHIP:-.....Canadian.....

FATHER:-(Full Name)....Alexander.Linton.....

ADDRESS:-..Osgoode.R.R.#2,.Ontario.....

PLACE OF BIRTH:-Montreal,.Quebec.....

CITIZENSHIP:-.....Canadian.....

I solemnly declare that I attended the Institutions of learning and acquired the standard of education, degrees, etc., as set out hereunder:-

HIGH SCHOOL....H.S.Entrance..(Belmeade S..1926.1934).....

TECHNICAL SCHOOL.....

UNIVERSITY.....

CORRESPONDENCE SCHOOL.....

Particulars of Education obtained:-.....

.....

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.

I HEREBY AGREE TO SUBMIT DOCUMENTARY PROOF OF THE FOREGOING DECLARATION AS SOON AS POSSIBLE.

Oswald Adam Linton
.....
(Signature)

DECLARED before me at the
City of OTTAWA, in the Province
of Ontario, this ..29th.....day of..December.....1941.

Wm L Hawkins P/O
.....
No. 12 Recruiting Centre, R.C.A.F.,
OTTAWA, Ontario.

R.C.A.F. Records Office
Rec'd. JAN 2 1942
O.K. ..... C. B .....
R. C. ..... N. I. .....
S. L. ..... P A. .....

ROYAL CANADIAN AIR FORCE

TRAINING REPORT

AIR GUNNER

1. Surname LINTON Christian Names Oswald Adam

2. Number R143924 Rank LAC Course No. 55

3. Posted from #2 AGGTS Trenton Posted to No. 1 Y Depot, Halifax, N. S.

4. Duration of Course: From 19/APRIL/43 To 9/JULY/43

5. Aircrew Category A1B A3B T Height 71½" Girth 35

6.

Equipment Used				
Type Aircraft	Type Gun		Type Turrets	
	In Air	Ground	In Air	Ground
Battle Anson	V.G.O.	V.G.O. Browning	Bristol	Bristol Fraser-Nash Boulton-Paul

7.

STAGE I		
	Mks. Poss.	Mks. Obtd.
Armament Oral	100	86
Armament Written	300	243
Anti-Gas	100	82
Aircraft Recognition	100	100
Mathematics	50	29
Navigation	100	54
Law Admin. Hygiene, etc.	100	75
Signals	100	75
TOTAL	950	744
Percentage		78.3

8. STAGE II

Air and Ground Training Assessment

	Day	Night
Flying Time	22:45	
Films Exposed	0'	
Hrs. Turret Manip.	15:00	
Skeet (# Rds)	400	
25 X Range.	760	
200 X. Range.	700	400
Air to Ground	400	
Air to Air	3490	
% Hits Air to Air	9	

Subject	Mks. Poss.	Mks. Obtd.
Armament Written	150	134
Practical & Oral	100	82
Aircraft Recognition	100	99
Drill	100	75
Signals	100	90
Ability as Firer	100	75
TOTAL	650	555
TOTAL TRNG. MARKS	1600	1299
Percentage		81.2
Personal Assessment	800	424

9. No. in Class 116 Position in Class 57 Pass or Fail 55

10. Recommended for commissioned rank. No (Yes or No)

11. Experience in arming, loading and harmonizing turrets, etc, No. of Hrs. 3:00

R.C.A.F. Records Office
AUG 5 1943
O.K. ..... C.I.B. .....
R.C. JB ... N.I. .....
S.L. ..... P.A. .....

12.

Suitability for further training as a Gunnery Instructor	Not at all Suitable	Moderately Suitable	Definitely Suitable	Extremely Suitable
	X			

Mark "X" in the appropriate column.

13. REMARKS:- Average student, fairly neat, appearance, good sound knowledge of armament, quite conscientious type.

Date:- 27/May/43

(signed) M.H. Fleming F/O
Chief Instructor

Date:- 27/May/43

(signed) F.A. Clark F/O
for Officer Commanding,
No. 2 A.G.G.T.S.,
R.C.A.F. Station, Trenton, Ont.

(Certified True Copy) A Kilgour F/L

14. REMARKS:- Average student, hard and willing worker; has a sound basic knowledge of his trade, takes a keen interest in his work, should make a good crew member.

Date:- 9/July/43

C Taylor S/L
Chief Instructor

Date:- 9/July/43

R J Lines G/C
Commanding Officer,
No. 3 B.&.G School, R.C.A.F.,
MacDonald, Manitoba.

Form T.82.

ADDRESS REPLY TO:
The Secretary,
Department of National Defence for Air,
OTTAWA, Canada.

R143924 (R.O.4)

OTTAWA, Canada, 20th March, 1944.

Mrs. Alexander Linton,
R.R. No. 2,
Osgoode, Ontario.

Dear Mrs. Linton:

It is my painful duty to confirm the telegram recently received by you which informed you that your son, Sergeant Oswald Adam Linton, is reported missing on Active Service.

Advice has been received from the Royal Canadian Air Force Casualties Officer, Overseas, that your son was a member of the crew of an aircraft which failed to return to its base after a bombing raid over Stuttgart, Germany, on the night of March 15th and the early morning of March 16th, 1944. There were five other members of the Royal Canadian Air Force in the crew and they also have been reported missing. Since you may wish to know their names and next-of-kin, we are listing them below:

Flying Officer J.F. Creba, Reaction
Next-of-kin, Mrs. William Creba, (mother)
Suite 2, 34 Ruby Street, Winnipeg, Manitoba.

Flying Officer H.B. Steeves,
Next-of-kin, Mrs. H.B. Steeves, (wife)
2212-8th Street East, Calgary, Alberta.

Flying Officer L.E. Symington, Safe
Next-of-kin, Mr. W.J. Symington, (father)
48 Muir Avenue, Toronto, Ontario.

Warrant Officer Stanley Mydaski,
Next-of-kin, Mr. Fred Mydaski, (father)
Mitchellton, Saskatchewan.

Sergeant L.J. Dunn,
Next-of-kin, Mr. J.R. Dunn, (father)
Box 76, Pictou, Pictou County, Nova Scotia.

.... 2.....

This 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 you may be assured that any further information received by us 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.

May 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,

S.E.D.

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

R.B.

P.A.

J88772 (RO)

R E G I S T E R E D OTTAWA, Canada, 13th November, 1946.

Mrs. Katherine Linton,
R.R. No. 2,
Osgoode, Ont.

Dear Mrs. Linton:

It is a privilege to have the opportunity of sending you the Operational Wings and Certificate in recognition of the gallant services rendered by your son, Pilot Officer O.A. Linton.

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

Yours very sincerely,

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

/BBO

R.R.#2 Osgoode, Ont.
25th Nov. 1946.

The Secretary,
Dept. of National Defence for Air.
Ottawa

1946 NOV 29 PM 2
Referred to 28
REPLIED TO
J 88772

Dear Sir:—

It is with a grateful and thankful heart that I wish to acknowledge the lovely "Wings" and Certificate you have awarded to my dear Son, Oswald.

I was indeed pleased to receive them and will certainly cherish and keep them safely.

As time goes on his memory grows dearer to me and the rest of my family and he will always remain as a great and cherished example of fortitude in our hearts. Please accept our sincerest thanks for everything.

I remain

Yours Sincerely

(Mrs) Katherine Linton.

Notes and
J R2-2-1
3.12.46.

J88772 (DFC)

OTTAWA, Canada, January 25th, 1949.

Mrs. Alexander Linton,
R.R. #2,
Osgoode, Ontario.

Dear Mrs. Linton:

It is with regret that I refer to the loss of your son, Pilot Officer Oswald Adam Linton, who lost his life on air operations against the enemy March 15th, 1944, and I would also refer to my letter of March 29th, 1946, which advised that your son, two members of his crew, and three unidentified, were reported to have been buried by the Germans in the Betzingen Cemetery, near Reutlingen, Germany.

A report has now been received from our Missing Research and Enquiry Service that your son and the members of his crew who were buried with him have been moved to the permanent British Military Cemetery at Bad Tolz, Germany. The cemetery is known as the Bad Tolz (Durnbach) British Cemetery, and is located twenty-eight miles south southeast of Munich, Germany. I know that it will be of comfort to you to know that your son and all members of his crew were individually identified, and your son is resting in Grave No. 23, Row H, Plot No. 4, of that cemetery. The five members of his crew are resting in adjoining graves numbered 20, 21, 22, 24 and 25.

This is in accordance with the agreed policy of the Nations of the British Commonwealth that all British aircrew buried in Germany would be moved to British Military Cemeteries located in Germany, where the graves and cemeteries will be reverently cared for and maintained in perpetuity by the Imperial War Graves Commission (of which Canada is a member). The cemetery will be beautified by landscaping and the planting of trees, shrubs and flowers, and the Commission will also erect a permanent headstone at your son's resting place, and before the stone is prepared will write to you.

It is my earnest hope that you will be comforted with the knowledge that your son's resting place is known, and that it will be permanently maintained, and I would like to take this opportunity of

.... 2 ....

expressing to you and the members of your family my deepest sympathy in the loss of your gallant son.

Yours sincerely,

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

WRG:LC

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

Royal Canadian Air Force

CERTIFICATE OF PRESUMPTION OF DEATH

NO. 10022

This is to Certify that

J88772 PILOT OFFICER OSWALD ADAM LINTON R.C.A.F.

(Number) (Rank) (Name in Full) (Unit)

has been officially reported as missing since the 15TH day of MARCH, 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 1ST day of DECEMBER 1944

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

FR.47982.

PERSONAL EFFECTS OF CAN/R.143924. SGT. LINTON. O. A.

1 Cardboard Carton contg:-

1 Sweat shirt, white.
crested.
2 Towels, tea.
2 Towels, hand.
2 Vests.
3 Shirts. -
1 Khaki - 1 Silver grey -
1 blue.
2 Collars - khaki.
10 handkerchieves.
3 Brass polishing cloths.
2 Face flannels.
5 Prs. socks.
1 Pr. swim trunks, black,
satin.
1 Writing case, black leather.
11 Metal sole-savers on card.
1 Pocket watch, gold - Waltham.
(No.18857681).
1 Chain.
1 Clothes brush with leather
on top.
1 Nail brush.
1 Pr. gloves, blue woollen.
1 New testament.
1 C.A. Diary.
2 Prs. garters.
1 Pr. braces.
1 Tie, black.
2 Airgunner's brevets.
1 Kitbag handle.
1 Belt, black leather.

1 Pr. sun glasses in case.
1 Metal mirror.
1 Lock and chain.
1 Torch, small silver metal.
2 Wallets, leather.
1 Table napkin.
2 Propelling pencils.
(1 brown - 1 grey).
1 Safety razor, Gem.
1 Soap dish, metal contg:-
1 Identity bracelet
(silver).
4 Souvenir coins.
1 Key.
1 Tie clip.
1 Leather strap.
1 Gillette safety razor.
2 Combs.
7 laces, black.
1 Colgate kitbag.
1 Small blue kitbag.
1 Ladies red handkerchief.
1 Small bundle of letters
and photos.

1 B.S.A. All black sports cycle - no accessories - in good condition - approximately value £6.
retained at Unit pending disposal instructions.

P.T.O

Cash amounting to £4.0s.3d. found amongst the Perso
Effects has been credited to his Service Account.

==========

Original Station inventory signed by G.A.Birge F/O dated 17.3.44.
Effects checked at Central Depository on 15.4.44.

10

MINUTE 1.

D.P.S.

1. No.427 R.C.A.F. Squadron reported that Halifax aircraft, LW.558, with a crew of 7, failed to return from an operational attack on Stuttgart. It left base at approximately 18.50 hours on the 15th. March, 1944, after which no further news was received.

2. A telegram from the I.R.C.C. quoting German information, states that F/O. Creba and Sgt. Linton, were killed on the 15th. March, 1944. There are no burial particulars notified.

3. In view of the evidence received and the lapse of time, it is accordingly submitted that the death of CAN/R143924 SGT. O.A. LINTON, and, CAN/J24044 F/O. J.F. CREBA, be presumed, for official purposes, to have occurred on the 15th. March, 1944.

4. One R.C.A.F. member of this crew, F/O. L.E. Symington, is now a Prisoner of War and the remaining three R.C.A.F. members, W.O.1. Mydaski, Sgt. Dunn and F/O. Steeves, are still classified as "Missing". The one remaining member of this crew was not R.C.A.F. personnel.

20/10/44. W. W. Goldberg WAC

21/10/44. M. Cameron S/O
for R.C.A.F. Casualties Officer.

MINUTE 2.

Para. 3. of Minute 1. approved.

ORIGINAL ON P4/CAS/CAN.
"RETURNS": 4-17 VOL: 6 FOLIO: 66
O.C.2 last to Ottawa 45 B. 28/10/44
C.12.
24/10/44. W.C.S. i/c W. W. Goldberg WAC

G.E.J. Welsh S/L
(G.E.J. Welsh) Squadron Leader,
for Director of Personal Services.

COPY

GRAVES REGISTRATION REPORT FORM

From: Officer Commanding "H" Section
No. 4 M.R.E.U. c/o No. 85 G.C.U., BAOR 42

To: Air Ministry, S.14 (Cas.)
2, Seville St., Knightsbridge, London, S.W.1

I.W.G.C., High Wycombe
I.W.G.C., Bruxelles

No.: 'H' Section

Date: 11 January 1949

Reference: 2MREU/5000/AIR/342

Subject: Graves Registration

Place of Burial: BAD TOELZ (DURNBACH) BRITISH MILITARY CEMETERY

Location and Map Reference: GSGS 4346 15350,000 M 48/Y 994168

Casualty Enquiry Number G 1757

					Date of death	Plot, Row and Grave
1502460	SGT	EVANS	B.	F/ENG	15.3.44	IV N 20
J.25442	F/O	STEEVES	H.B.	PILOT		IV N 21
J.88709	P/O	DUNN	L.J.	A/G/		IV N 22
J.88772	P/O	LINTON	O.A.	A/G		IV N 23
J.24044	F/O	CREBA	J.F.	NAV.		IV N 24
R.114903	W/O	MYDASKI	S.	WOP/AG		IV N 25

Final concentration Graves Registration Report Form

EXTRACT FROM S.B.C.D. 1025.

11

BERLIN COMMUNICATES FOLLOWING DECEASED AIRMEN

J16496	G.C. BURNS	KILLED 23/4
R108261	C.W. HAY	KILLED 22/3

BOTH BURIAL PLACE UNKNOWN.

R155142	ARTHUR FOX	KILLED 15/3 BURIED COMMUNAL CEMETERY OBERESCHBACH
R143924	OA LINTON	KILLED 15/3 BURIED 20/3 COMMUNAL CEMETERY BETZINGEN

OTTAWA CONFIRMS RECEIPT S.B.C.D. 1025.

7. 3. 44

COMPLETION AND RETURN BY

Form P. 64

Mrs. Alexander Linton,
R.R. # 2,
OSGOODE, Ontario.

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. J88772 FD310

DEPARTMENT OF NATIONAL DEFENCE

ESTATES BRANCH

OTTAWA, ONT.

11 December 194 4

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

LINTON, Oswald Adam P/O

J88772 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.

ESTATES BRANCH
DEC 19 [illegible]
H. Q.
OTTAWA
NATIONAL DEFENCE

EE.M/EK

for Director of Estates.

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

ANSWER IN FULL ALL APPLICABLE QUESTIONS

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

Degrees of Relationship	RELATIVES required to be accounted for		INFORMANT'S STATEMENT: NAME IN FULL of any Relative, if any, in each degree specified	Age	ADDRESS IN FULL of each surviving Relative, opposite his or her name, and date of death of each deceased relative
1	Widow of the Deceased.....		~~~		
2	Children of the Deceased and dates of their Births.....		~~~		
3	Father of the Deceased.....		Alexander Linton	63	Deceased 27 Nov. 1938
4	Mother of the Deceased.....		Mrs. Katherine Linton	52	Osgoode, R.R. #2. Ont.
5	Brothers of the Deceased	Full Blood	Richard H. Linton	20	" " "
			Alexander K. Linton	14	" " "
			Harvey C. Linton	13	" " "
		Half Blood	~~~		
6	Sisters of the Deceased	Full Blood	Florence A. Linton	26	" " "
			Mrs. Edith H. Forget	22	Osgoode R.R. #4, Ont.
			June Rose K. Linton	16	" " #2 "
		Half Blood	~~~		
7	Names of brothers or sisters (whether of the full or the half blood) of the Deceased, *who are dead*, and date of death of each.		Names and ages of their children (if any)		Address of their children
	~~		~~~		~~~

ANSWER FULLY EACH QUESTION ON THIS PAGE

PARTICULARS AS TO IDENTITY

8	Full names of the deceased.	Oswald Adam Linton
9	Date of his birth.	30th January, 1920.
10	Place and date of his marriage.	
11	Place and date of his parents' marriage.	Montreal Que. 6th March 1917.

PARTICULARS OF DOMICILE

12	Place where deceased was born.	Montreal Que
13	State, in order, the Province, State and/or County in which he resided before enlistment and the period of time in each.	~~1930-1942-3~~ 1920-1930. (a) Ontario — Quebec (b) Osgoode, — Brookdale P.O. (c) Carleton Co. — Papineau (d) Twelve years. — Ten years.
14	Nature of employment before enlistment.	Farmer's helper.
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.	Osgoode, Ont.

PARTICULARS OF ESTATE

17	Did he leave a Will? If in your custody, please forward.	Not known.
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?	
19	Did he have a Bank, Post Office or other deposit account? If so, give name and address of bank, etc., and the amount on deposit. Do you wish it administered with the pay account?	Amount deposited not known. Yes. Royal Bank of Canada ~~Metcalfe Ont.~~
20	Amount of War Savings Certificates held by deceased. Indicate where located.	
21	Amount of Victory Loan Bonds held by deceased. Indicate whether registered or bearer and where located.	1 Bond $50.00 in Bank at Metcalfe 1 " $50.00 in my name (Katherine Linton
22	If deceased had life insurance, name companies and amount payable under each policy and the person named as beneficiary therein.	New York Life Insurance #1000 — (Idte) Alexander Linton.
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.	No.
25	Have you or any other relative paid the funeral expenses or any part thereof? If so, attach itemized accounts showing amount paid, and by whom.	No.

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

(PLEASE TURN OVER)

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

*.....Mother.....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.

.....Katherine Linton..... {Signature of Informant}

.....Osgoode, R.R.#2 Ont.....Address

CERTIFICATE

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

See above. Mrs. Kate Linton {Name of informant} is the.....Mother.....of the Deceased above described. The above Declaration was made by the Informant and signed in my presence.

Dated at.....Village of Vernon.....this.....16.....day of.....Dec.....19.44

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

.....A. J. O Peters..... Qualification.....Commissioner

Address.....Vernon, Ont.

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

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

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

Oswald left his bank book in care of the man he worked for previous to his enlistment. Mr. Thos. Hoy, R.R.#4, Osgoode, Ont. also most of his wearing apparel.

I would like to have all his belonging which he had in his possession in England returned if possible.

Could you give me any information as to whether his grave or place of burial has ever been located yet.

Nevertheless still pray that he may still be safe somewhere

Katherine Linton.

be made out in duplicate

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.

---

(1) Name of Officer or Other Rank LINTON OSWALD ADAM
(Surname first—Christian names in full—Block capitals)

(2) Regimental or Official Number and Rank R 174 3824 AC2

(3) Unit No. 1 M DEPOT R.C.A.F. TORONTO

(4) Are you married? No

(5) If married, state,

(*a*) Full name of your wife

(*b*) Present postal address of wife

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

(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

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

Name

Postal Address

R.C.A.F. JAN 22 1942 C.I.B. O.K. N.I. T.O. P.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 .....

.....

.....

(11) Is your father alive? No .....

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

.....

.....

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

(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 .....

.....

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

(14) Is your mother alive? yes .....

If so, state name and address Katherine Linton

Osgoode, Ontario, R.R. #2

(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 No .....

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? No .....

(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? New York Life Insurance 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.

Oswald Adam Linton

(Signature of officer or man)

Date 30/12/40

.....

Officer Commanding FOR (G.E.NASH) W/C

Date 30/12/40 No. 1 M DEPOT R.C.A.F.- TORONTO

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.

OFFICIAL ROYAL CANADIAN AIR FORCE CASUALTY NOTIFICATION

NUMBER J88772 (R143924) RANK P/O UNIT 427 SQDN (OVERSEAS)

TRADE A/G (G.L.)

NAME LINTON, OSWALD ADAM

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

PRESENT MARITAL STATUS SINGLE RELIGION BAPTIST CANADIAN YES

FRENCH CANADIAN ✓ OTHER

NEXT OF KIN MRS ALEXANDER LINTON

RELATIONSHIP MOTHER

ADDRESS RR NO 2, OSGOODE ONT.

FATHER'S NAME DECEASED

ADDRESS LIVING ON ENLISTMENT NO

MOTHER'S NAME MRS ALEXANDER LINTON

ADDRESS RR NO2, LIVING ON ENLISTMENT YES

OSGOODE ONT.

ADDRESS AT TIME OF ENLISTMENT MARITAL STATUS AT TIME OF ENLISTMENT

OCCUPATION

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

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

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

CASUALTY DETAILS:

AUTHORITY CAS. SIG. NO. BOMBER MAIL LETTER----d---28-Oct-44

PREVIOUSLY REPORTED "MISSING" 15-March-44 AFTER AIR OPERATIONS (OVERSEAS) (OVER STUTTGART, GERMANY)AND SUBSEQUENTLY REPORTED "MISSING BELIEVED KILLED" (GERMAN INFORMATION)

NOW "PRESUMED DEAD" 15-March-44 FOR OFFICIAL PURPOSES.

ESTATES BRANCH DEC 7 1944 D.N.D. OTTAWA NATIONAL DEFENCE

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

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

DATE 1-Dec-44

TIFICATE P. OF D. CHED TO A. OF E. COPY YES/~~NO~~ XX

FOR CHIEF OF THE AIR STAFF

2 ADMINISTRATOR OF ESTATES, OTTAWA 66668

R.C.A.F. r.60

WILL

(1) I, LINTON, Oswald Adam ..... of the (City / Town / Village / Township) of Osgoode ..... in the County / District of ..... Province of Ontario ..... Farmer (Civil Occupation)

~~R143928~~ 143924 a member of the Royal Canadian Air Force, Number ..... 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 mother: Mrs. Katherine Linton,
R.R. # 2, Osgoode, Ont.

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 mother, Mrs. Katherine Linton (Name) OF THE ABOVE ADDRESS (Address) ~~Executor~~ ..... to be the Executrix of this my Last Will

IN WITNESS WHEREOF I have hereunto set my hand this 30th day of Dec. 19 41

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.

Oswald Adam Linton
(Signature of Testator)

(5) Signature .... Allan G. Hall

Address No. 1 Manning Depot. R.C.A.F. Toronto.

Occupation Clerk

Signature .... John Billocks

Address No. 1 Manning Depot. R.C.A.F. Toronto

Occupation Clerk

R.C.A.F.
Rec'd JAN 3 1942
O.K. C.I.
R.C. Hme. N.I.
S.L. P.A.

V

Every item of information should be carefully supplied. (See reverse side for instructions)

THIS FORM MUST BE FILED FORTHWITH WITH THE DIVISION REGISTRAR OF THE DIVISION IN WHICH THE DEATH OCCURRED BEFORE A BURIAL PERMIT CAN BE ISSUED

WRITE PLAINLY WITH UNFADING INK
THIS IS A PERMANENT RECORD

FORM 6

This form if placed in an envelope, marked "Dominion Statistics—Free, penalty for improper use $300," and properly addressed will pass through the mail "FREE"

PROVINCE OF ONTARIO—CERTIFICATE OF REGISTRATION OF DEATH

1. PLACE OF DEATH County or District of OVERSEAS (GERMANY) Township of .....

If in City, Town or Village ..... (Name) Street ..... House No. .....
(If death occurred in a hospital or institution, give the name instead of street and number)

2. LENGTH OF STAY (in years, months and days)
(a) In City, Town or Township where death occurred ..... (b) In Province ..... (c) In Canada (if immigrant) .....

3. PRINT FULL NAME OF DECEASED LINTON (Family name) OSWALD ADAM (Given name or names in usual order)

RESIDENCE No. ..... Street R.R.#2 City, Town, Village or Township Osgoode Province Ontario
(Residence means usual place of abode. Post Office Address for residents in rural parts not sufficient)

4. Sex	5. Nationality (Citizenship)	6. Racial Origin	7. Single, Married, Widowed or Divorced (Write the word)
Male	Canadian		Single

8. BIRTHPLACE Quebec (Province or Country)

9. DATE OF BIRTH January (Month) 30th (Day) 1920 (Year)

10. AGE in

Years	Months	Days	If less than one day old
24			....hrs. or....min.

OCCUPATION

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

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

13. Date deceased last worked at this occupation Mar.15/44 **14.** Total years spent in this occupation Two

15. If married give name of wife or husband of deceased .....

FATHER

16. NAME Linton, Alexander

17. BIRTHPLACE Quebec (Province or Country)

MOTHER

18. MAIDEN NAME Courselle, Katherine A.

19. BIRTHPLACE Quebec (Province or Country)

20. Person giving information sign here For (R.C.A.F. Records Officer)

Address .....

Relationship to deceased .....

21. Place of Burial, Cremation or Removal .....

Date of burial or removal .....

22. Burial Permit was issued by .....

Address .....

23. UNDERTAKER .....
(Name and address)

MEDICAL CERTIFICATE OF DEATH

24. DATE OF DEATH March (Month) 15th (Day) 19 44 (Year)

25. I HEREBY CERTIFY that I attended deceased from:

.....19.....to.....19.....

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

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. .....

PHYSICIAN
Underline the cause to which death should be charged statistically

26. If a communicable disease is mentioned on this certificate, give
(a) Date of appearance .....19.....
(b) Duration of disease .....days

27. If a woman, was the death associated with pregnancy? .....

28. Was there a surgical operation? .....Date of operation .....19.....

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

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

Accident, suicide or homicide? Accident (State which) Date of injury March 15th 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 by .....**M.D.**

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

30. Division Registrar's Record No. .....

31. Filed .....19..... .....
(Division Registrar)

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

DEPARTMENT OF NATIONAL DEFENCE

NAVY ——— ARMY ——— AIR FORCE

4
AIR

STATEMENT OF WAR SERVICE GRATUITY

D-177-25

DECEASED MEMBER'S NAME: Oswald A. (CHRISTIAN NAMES) Linton (SURNAME)

REGISTER NO.

FILE NO. 27408

PAYEE

ADDRESS: Mrs. Katherine Linton, R.R. # 2, Osgoode, Ont.

DATE 22 Nov/45

SERVICE NO. J.88772

FINAL RANK OR RATING P/O

DATE OF TERMINATION OF OVERSEAS SERVICE 15 Mar/44

DATE OF DISCHARGE 15 Mar/44

		$	¢
A. TOTAL QUALIFYING SERVICE	NO. OF DAYS 808/30 EQUAL TO 26 COMPLETE PERIODS AT $7.50	195.00	
B. QUALIFYING OVERSEAS SERVICE	NO. OF DAYS 227 LESS 28 INELIGIBLE DAYS, EQUAL TO 199 DAYS @ 25C. PER DAY	49.75	
C. SUPPLEMENT FOR OVERSEAS SERVICE			
	DAILY RATES AT DISCHARGE		
	PAY $ 6.25		
	SUBSISTENCE OR LODGING AND PROVISION ALLOWANCE $ 1.70		
	ADDITIONAL PAY $		
	$		
	$		
	DEPENDENTS' ALLOWANCE 1/30 OF $ $		
	TOTAL $ 7.95 ×7 = $ 55.65		
	NO. OF DAYS 227/183 ×$ 55.65	69.03	
D. WAR SERVICE GRATUITY		313.78	
E. DEDUCTIONS	OVERPAYMENT OF PAY AND ALLOWANCES $		
	DEPENDENTS' ALLOWANCE AND ASSIGNED PAY $		
	OTHER DEDUCTIONS $		
F. TOTAL AMOUNT PAYABLE		313.78	

G. YOUR PORTION OF GRATUITY IS—

DEPENDENTS' ALLOWANCE IN ISSUE TO YOU $ _____ OF $ _____ TOTAL DEPENDENTS' ALLOWANCE IN ISSUE $ 100% =$ 313.78

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
HRH	JFM

TREASURY CHECKED BY NOV 30 1945 DATE 4.11.45

SERVICE REPRESENTATIVE

△T

ROYAL CANADIAN AIR FORCE

STATEMENT OF WAR SERVICE GRATUITY

MEMBER'S NAME: OSWALD A. LINTON
(Christian Names) (Surname)

PAYEE: MRS. KATHERINE LINTON
(Christian Names) (Surname)

ADDRESS: RR #2
OSGOODE, ONT.

Register No. .....
File No. 27408
Date 22 NOV 45
Service No. J 88772
Final Rank or Rating P/O
Date of Discharge 15 MAR 44

Date of Termination of O/S service 15 MAR 44

	$	¢
A. TOTAL QUALIFYING SERVICE No. of days 808/30 equal to 26 complete periods @ $7.50	195.	00
B. QUALIFYING OVERSEAS SERVICE No. of days 227 less 28 ineligible days, equal to 199 days @ 25¢ per day	49.	75
C. SUPPLEMENT FOR OVERSEAS SERVICE		
Daily Rates at Discharge Pay .....$..... 6.35 Subsistence or Lodging and Provision Allowance .....$..... 1.70 Additional Pay ....$..... Dependents' Allowance 1/30 of $ .....$..... TOTAL $ 7.95 x 7 = $ 55.65 No. of days 227/183 x $ 55.65	69.	03
DD. WAR SERVICE GRATUITY	313.	78
E. Deductions — Overpayment of ..... Pay and Allowances $ Dependents' Allowance $ and Assigned Pay Other deductions $		
F. TOTAL AMOUNT PAYABLE	313.	78
G. YOUR PROPORTION: (D.A. in issue to you / Total D.A. in issue) = ——— of $ 100%	313.	78

60.82
8.21
69.03

PREPARED BY	CHECKED BY
[illegible]	[illegible]

R.C.A.F. FORM A.28
150M—10-41 (1009)
H.Q. 885-A-28

RECORD OF PAY

W.b.K.

CLAIM FOR OUTFIT ALLOWANCE FORWARDED TO ..... ON .....

APPOINTED OR ENLISTED AT OTTAWA ONT ON 29-12-41

MARRIED OR SINGLE SINGLE

No. R 143924

NAME IN FULL LINTON Oswald Adam

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.	Casualties affecting rate of pay
312	29-12-41	ACY	5	A 5.	1 30				#1 M Depot, Toronto DRO 312
68	29-3-42	AC1	5	"	1 40				Reclassified AC1
170	1-7-42	LAC	5	"	1 50				Re-CLASS LAC EFF 1-7-42.
130	30/5/42	LAC	5	AS	1 50	75	2 25		Ent to Flg Pay

ASSIGNMENTS

Assignee	Eff. Date	Amount	Total
REG. GEN. (4TH VICTORY LOAN)	1-5-42	8 40	8 40

DEPENDENTS ALLOWANCE

Date App. Forwarded	Relationship	Amount Awarded	Eff. Date

REMARKS

N.D.T. Class.

Period	No. of Days	Amount of Pay	Sig. A.I.Lice.	Other Credits: Description	Other Credits: Amount	Credit B/F	Total Credits	Ass. Pay	Pen. Ded. & N.D.T.		Debit B/F	Other Debits: Description	Other Debits: Amount	Cas. Pay	Mid Pay	Total Debits to this Column	End Pay	Debits & Credits to Next Account	Casualties and Sig. of A.O. on Transfer of Account
29-12																			TOS OTTAWA
31-12-41	3	3 90					3 90											3 90	
1-1-42																			20 SA/16 S.F.T.S. HAGERSVILLE.
26-1-42	26	33 80				3 90	37 70							17 00	20 25	37 25		45	O12 0123 W.b. Kerswell Lt/col
27-3-42	5	6 50				45	6 95											6 95	T.O.S. No. 16, S.F.T.S. FROM NO. 1. M.D. Toronto
1-28-42	28	36 40				6 95	43 35					R75 2/45	10		21 00	21 10	22 25	NIL	EFF. 27-1-42 D.R.O. 26 30-1-42
1-28-42	28	36 40 / 37 20										R75 2/60	10		20 00		20 50		
29-31-42	3	4 20					40 60									20 10		NIL	
1-30-42	30	42 00				11	42 00					R75-A25	50		21 00	21 50	20 50		
1-31-42	31	43 40					43 40					R75 A45	50		21 00	21 50	21 90	NIL	
1-30-42	30	42 00					42 00					R75 A64	50		20 00	20 50	21 50	NIL	165-LEAVE 8-21/7/42 INCL.
1-31-42	31	46 50					46 50					R75 A91	50	30 00		30 50	16 00		DO 199 GRANTED ~~LEAVE~~ RA 8-VII-41 (14 DAYS INCL)
1-31-42	31	46 50	7 00				53 50					R75 A114	50		23 00	23 50	30 00	NIL	
1-30-42	30	45 00					45 00					R75 A136	50		22 00	22 50	22 50	NIL	
1-31-42	31	46 50					46 50					R75 A176	50		23 00	23 50	23 00	NIL	
1-30-42	30	45 00					45 00					R75 A202	50		22 00	22 50	22 50	NIL	
1-31-42	31	46 50	3 50				49 00					R75 A237	50		23 00	23 50	25 50	—	A.O. 301 SPEC XMAS LEAVE
1-31-43	31	46 50					46 50					R75 A255	50		23 00	23 50	23 00	NIL	
1-28-43	28	42 00					42 00					R75 A291	50		21 00	21 50	20 50	NIL	
1-31-43	31	46 50					46 50					R75 A313	50		23 00	23 50	23 00	NIL	
1-17-43	17	25 50	5 50				31 00							25 50		25 50		5 50	S.O.S. No. 16, S.F.T.S. TO NO. 2 G. SCHOOL TRENTON, ONT. DO 57 LEAVE & RA. 7 Apr/43 EFF. 17 Apr/43 D.R.O. 57 TO 23 Apr/43 INCL (11 DAYS)
1-30-43	13	19 50				5 50	25 00										25 00		110. T.O.S. EFF 16.4.43.
1-29-43	29	43 50					43 50	8 15						15 00	20 00	43 15		30	1453 O.S.T.U. B.G. NAV [redacted] EFF 29-5-43
						35													

R.C.A.F. FORM A.28
150M—10-41 (1009)
H.Q. 885-A-28

RECORD OF PAY

CLAIM FOR OUTFIT ALLOWANCE FORWARDED TO ..... ON .....

APPOINTED OR ENLISTED AT OTTAWA, Ontario. ON 29-12-41

MARRIED OR SINGLE Single. No R.143924 NAME IN FULL LINTON, Oswald, Adam.

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.	Casualties affecting rate of pay
130	30/5	lac.	S	AS	150	75	2 25		Ent. to Fly Pay.
163A0	9/6/43	Sgt AC	SC	AS	2 95	-	2 95		REM.

ASSIGNMENTS

Assignee	Eff. Date	Amount	Total
Rec.Gen. 4th V.L.	1/5/43	8 40	8 40

DEPENDENTS ALLOWANCE

Date App. Forwarded	Relationship	Amount Awarded	Eff. Date

REMARKS — N.D.T. Class.

Period	No. of Days	Amount of Pay	Sub. Allce.	Other Credits: Description	Other Credits: Amount	Credit B/F	Total Credits	Ass. Pay	Pen. Ded. & N.D.T.	Debit B/F	Other Debits: Description	Other Debits: Amount	Cas. Pay	Mid Pay	Total Debits to this Column	End Pay	Debits & Credits to Next Account
1942																	
30-31/5	2	1 50				35	4 85	25									4 60
1-30-6	30	67 50				4 60	72 10	8 40						30 00	38 40	33 70	—
1/8-7	8	18 00	3 00								IUMC 829	6 33	54 00	—	66 83	—	92
9/28-7	15	41 25				92	67 75	6 50									.92

Pro 163/10 Eve. 10/23-7-43 INCT (UNPAID) RA FOR 11 DAYS 205 #1 Y Depot HALIFAX, NS Eff 23-7-43

Ghormley FIC

C. And. by Treasury
14-7-43 for Secretary.

AIR FORCE No. J.88772 R.143924.

SURNAME: LINTON.

FULL CHRISTIAN NAME: OSWALD ADAM. ✓

ENLISTMENT/APPOINTMENT
PLACE OTTAWA.
DATE 29-12-41.

RELIGION: BAPTIST.

R.C.A.F. FORM R230

TYPE OF LEAVE

FROM	TO	No. DAYS	DESCRIPTION	AUTH.
21.11.43	4.12.43	14	Pms Leave	22 OTU 92/43
21.12.43	29 12 43	9.	Pms Leave	61 Base 107/43

TYPE OF AIRCRAFT ON WHICH MOST PROFICIENT

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

SERVICE MACHINES FLOWN

CHARACTER AND TRADE ASSESSMENT

DATE	CHARACTER	TRADE ASSESSMENT
		A. G

HONOURS, AWARDS AND MENTIONS

DATE	AWARD	AUTHORITY
9 7 43	AIR GUNNER BADGE	DRO 163A
15 1. 44	CVSM & Mcl	427 Sqn 17 Apr

POSTINGS, ATTACHMENTS & TEMPORARY DUTY

SOS TOS	FROM	TO	DATE	AUTHORITY
SOS	#2 OTU	#3 B+G	29 5 43	DPO 148
SOS	#3 B+G	#1 Y.D.		
	MACDONALD	HALIFAX	23 7 43	DRO 163A
SOS	No 1 Y.D.	R.A.F.T.P.	28 8 43	DRO 197
	Embarked	NY	3 8 43	
	Disembarked	U.K.	11 8 43	
	Int C119	- 3 PRC.	12 8 43	
T.O.S	3 PRC	to 22 O.T.U.	14 9 43	22 OTU 67/43
S.OS	22 O.T.U	to 61 Base	4 12 43	61 Base 101/43 22 OTU 45/43
att.	427 Sqd.	from 61 Base	8/20 1/2 44	61 Base 17 427 Sqn 6/44
TOS.	427 Sqd.	from 61 Base	20 2 44	61 Base 17 427 Sqn 17/44
F/S	Missing	from 427 Sqd.	15/16 3 44	AFRO 921/44 #427 Sqn 20/44 CR 440
S.O.S	427 Sqn	to U.K. NFE U.	16 3 44	427 Sqn 21/44
MISSING BELIEVED KILLED				CR 492 19/6/44
PRESUMED	DEAD		15 3 44	AFRO 2024/44 CR 615

ALL OTHER CASUALTIES

CASUALTY AND DATE	AUTHORITY
S.S.Q. 20.8.43. Discharged 25.8.43	3 PRC 217/43

ADVISE ENTITLES
UNIT RECORDS RETURNED
TO CANADA

AIR FORCE No. J.88772 R143924

SURNAME: LINTON

FULL CHRISTIAN NAME: OSWALD ADAM

ENLISTMENT/APPOINTMENT
PLACE OTTAWA, ONT.
DATE 29-12-41

RELIGION: BAPTIST

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

Comm. 14-3-44

R.C.A.F. FORM R230
100M-[illegible]3 (3137)
H.Q. 885-R-230

BIRTH DATE	PLACE	COUNTRY	CITIZENSHIP	RACIAL ORIGIN
30-1-20	PAPINEAU CTY QUE.	CANADA	CANADA	SCOTTISH

CIVIL EDUCATION

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

CIVIL OCCUPATIONS AND EXPERIENCE

FARMER 1934-41

PREVIOUS SERVICE

Ca (B)TC. CORNWALL ONT.
PTE. DEC 1941 —

PLACE AND DATE OF MEDICAL	CATEGORY	PLACE AND DATE OF MEDICAL	CATEGORY
11-12-41	A4B3		
5-7-43	A1BA3B(T)		

PARTICULARS OF FAMILY

SINGLE, ~~MARRIED~~, ~~WIDOWER~~, ~~DIVORCED~~

WIFE (FULL MAIDEN NAME) OR HUSBAND

PRESENT ADDRESS (IN PENCIL)

PLACE OF MARRIAGE — DATE

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. Katherine Linton (Mother)
R.R.2 Osgoode Ontario.

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.
A/Sgt SR SC. GUNNERY	14 3 44	O.O. 1094/44	

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

AIRMEN AND AIRWOMEN

RANK	DATE	AUTH.	TRADE	DATE	AUTH.
Y/Sgt	9 7 43	DRO 163A	AIR REM GUNNER		DRO
			(SPEC. GROUP)	9 7 43	163

OFFICERS, AIRMEN/AIRWOMEN

COURSE OR TRADE	GRP.	%	PF	DATE

ADVISE ENTITLES
UNIT RECORDS RETURNED
TO CANADA

AIR FORCE No. ~~R148324~~

SURNAME: LINTON, FULL CHRISTIAN NAMES: OSWALD ADAM

ENLISTMENT: PLACE Ottawa DATE 29-12-41. RE-ENLISTMENT

C.R. FILE NUMBER: R88

J.88772

OFFICER

RECORD OF SERVICE AIRMEN

12 Comm 14-3-44

R.C.A.F. FORM R44(B) 30M-8-41 (637) 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	29	12	41	1 M.D. 312
S.O.S.	1 M.D. Toronto	26	1	42	1 M.D. 23
T.O.S.	#16 S.F.T.S. Hagersville Ont.	27	1	42	16SF26
TD	16SF307				
SOS	16 S.F.T.S.	17	4	43	16 S.F.T.S.
TOS	2 a G.G.S. Trenton	18	4	43	E110
SOS	2 a G.G.S. Trenton	29	5	43	E148
TOS	3 B&G MacDonald.	30	5	43	3B&G130
S.OS	3 B&G. MacDonald	23	7	43	3B&G163A
TOS	"Y" Depot Halifax N.S	24	7	43	1 Y D 181
SOS	"Y" Det R.A.F. Ordinees Pool	2	8	43	1 Y 195
	P.D 15-3-44 D.C.L.	867	d/	10-11-44.	
	cancelled				
	missing PCX.499. 17-3-44	16	3	44	
	SOS Sgt	20	10	44	

2. RECLASS'NS-PROMOTIONS-ETC.

RANK	EFFECTIVE			D.R.O.
A.C.2	29	12	41	1 M.D. 312
A.C.1	29	3	42	16 S.F. 68
7				
Cpl	1	7	42	16 S.F. 170
A/Sgt. pd	9	7	43	3 B&G 163A.
P/O 14-3-44 (APR 239/9-10-44)				AFB 1099 AER 02231

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.
22-12-41	R100	A 48	

4. TRADE AND CHARACTER

TRADE	GROUP	EFFECTIVE			D.R.O.
G.D.	A.	29	12	41	1 M.D. 312
9308					
A/C A.G. (A.S.)		17	4	43	16 S.F. 87
Air Gunner S.B.		9	7	43	3 B&G 163A
Gunnery L.		14	3	44	(APR 239/9-10-44)

TRADE PROFICIENCY	CHARACTER ASSESSMENT	DATE OF R41

5. COURSES-TESTS-ETC.

SUBJECT	RESULT	DATE	AUTHORITY

6. LEAVE

FROM	TO	DAYS	REMARKS	D.R.O.
8-7-42	21-7-42	14		16SF165
10-7-43	23-7-43		embk L.	3 B&G 163A
7-4-43	17-4-43	11	annual	16SF87

RELIGION: R.C. | U.C. | PRES. | HEB. | MIS. | OTHER | PREV. SERV.

PRESENT MARITAL STATUS | ENLISTMENT MARITAL STATUS | OVERSEAS | R.C.A.F.

HIGH & TECH. SCHOOL EDUCATION

PROVINCE OF ENLISTMENT: C. OF E. | BAP. | U.C. | PRES. | R.C. | HEB. | MIS. | OTHER | PREV. SERV.

DISCHARGE: RELEASE | AC

AIR FORCE No. ~~R143024~~ R

LINTON, OSWALD ADAM
SURNAME FULL CHRISTIAN NAMES

OFFICER

ENLISTMENT PLACE Ottawa DATE 29-12-41.
RE-ENLISTMENT

C.R. FILE NUMBER R 88

J.88772

RECORD OF SERVICE AIRMEN

Comms 14-3-44

C.A.F. FORM R44(B) 30M-8-41 (637) H.Q. 1062-3-53

7. BIRTH: DATE 30-1-20. PLACE Papineau County, Que. CITIZENSHIP 2

FATHER (FULL NAME) Alexander Linton

BIRTHPLACE Montreal, Que.

MOTHER (FULL MAIDEN NAME) Katherine Coursolle

BIRTHPLACE Papineau County, Que.

8. EDUCATIONAL STANDING

HIGH SCHOOL ENTRANCE	X Ont.
JUNIOR MATRICULATION	
SENIOR MATRICULATION	
TECHNICAL SCHOOL	
UNIVERSITY	
CORRESPONDENCE COURSES	

0

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

Farming — Typo.

0000

10. PREVIOUS ARMY, NAVY OR AIR FORCE SERVICE

#31, E.A.(B) D.C. — Pte. Dec. 1941.

0

11. HONOURS-AWARDS, MENTIONS

	AUTHORITY	DATE
Air Gunners Badge	3 Bf 9 1143 A	9-2-43
C.V.S.M & Clasp	PB 36.0	15-1-44

12. FLYING EXPERIENCE ON ENLISTMENT (HOURS)

SOLO — DUAL — PASSENGER —

13. RELIGION Baptist

5

14. LANGUAGES English

1

15. SPORTS Softball, hunting. Mechanics.

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

WIFE (FULL MAIDEN NAME)

PLACE OF MARRIAGE DATE

AUTHORITY (IF AFTER ENLISTMENT)

1

17. MARRIED ESTABLISHMENT

REMARKS	RANK	EFFECTIVE	D.R.O.

18. CHILDREN

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

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

FULL NAME: Katherine Linton RELATIONSHIP Mother

ADDRESS: R.R.#2, Osgoode, Ont. D.R.O.

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.
Auth. Rations allce 14	8/7/42	16SF199			

21. ENGAGEMENTS

TERM	EFFECTIVE	D.R.O.	TERM	EFFECTIVE	D.R.O.
Duration	29/12/41				

22. TEMPORARY DUTY AND MISCELLANEOUS ENTRIES

FROM	TO	DATE	D.R.O.
Occ. Pub. Qtrs.	+ draw. rtns	30-12-41	17 ND 312
Occ. Govt qtrs	+ drawing rtns	27-1-42	16SF26
Sp. L. T. W.	C 71358	7-7-42	16SF165.

Date and Place of Signing R 40.

22.(A) ADDRESS PRIOR TO ENLISTMENT

R.R.#2, Osgoode, Ont.

10500

23. DOCUMENT CONTROL (INDICATE RECEIPT BY DATE) OHF

R60	R79	B465	X-RAY	AFM-13	IDN. CARD
3-1-42	APR 9 '42	30-12-41			