

J9147
POIRIER
JOSEPH ALFRE

FL6

IBM 83961

LICENSED FOR USE UNDER CANADIAN PATENT NUMBER 315306

Mrs. Ann. M. Poirier (mother)
212 - 2nd St., N.,
Kenora,
Ont.

June - 4.5.

English.

30 5'

27.3 - 5'0.

MEMORIAL B. K.
DATE DESP.
REGN. NO. 2454

POIRIER		Alfred Raymond	H-414004 Pte	FILE No.
SURNAME (IN BLOCK LETTERS)		CHRISTIAN NAMES	REG. No.	C.A.S.F. UNIT
WAR SERVICE				
BADGE				
(CLASS)	No.	DATE DESPATCHED:		
ADDRESS:				
CAMPAIGN MEDALS		REGISTRATION NUMBER AND DATE DESPATCHED		
War Medal 1939-45		RCAF distribution		

NAME POIRIER, Joseph Alfred Raymond

FILE NO. _____

RANK E/LT

CATEGORY _____

~~MISSING~~ PRES DEAD

REG. NO. J9147

DATE OF DEATH: 20-Oct-43

MOTHER LIVING: Yes

WIFE: NA

MINISTERIAL CARD: 9-11-43

ROYAL MESSAGE:

MEMORIAL CROSS
TO CHAPLAIN:

To mother & father

()

OCT 27 1944

DEL'D TO MOTHER:

OCT 20 1944

To MOTHER & FATHER; 25-Aug-44

DEL'D TO WIFE:

Mr. & Mrs. Joseph Amie Poirier,
212 -2nd Street, North,
Kenora, Ontario.

COMMAND: NO 2TC

RELIGION: R.C.

Am

NATIONAL PERSONNEL RECORDS CENTER CENTRE NATIONAL des DOCUMENTS du PERSONNEL			MIL
CSC SCC			CMP GRC

ON RECOMMENDATION FOR APPOINTMENT TO ACTING HIGHER RANK

No. J.9147 Name POIRIER J A R Rank F/O Trade GL PILOT

CONFIDENTIAL

CONFIDENTIAL PERSONAL ASSESSMENT

INSTRUCTIONS

Read the statements under each heading carefully. Consider the person being assessed in relation to each "statement" enumerated below. When possible compare him with others you can call to mind who represent outstanding examples of the traits described. Under each heading place a cross in the brackets after the one statement which best describes the person being assessed. This form will prove only as dependable as the assessment is thorough.

For A.F.H.Q. use only

RCAF R.211
100M-4-42
H.Q. 885-R-211

Include PART I in all reports.
Include PART II for Officers and N.C.O.'s other than Aircrew under training.
When assessment is on a member of the Women's Division the term "he" will be read as "she", etc

PART I

(Include in all reports)

1. APPEARANCE & BEARING

Note - this applies not only on Parade.
Observe in mess, at games, off duty.

Careless - creates an unfavourable impression..... ()
Some room for improvement..... ()
Neat - meets all ordinary requirements..... (x)
Excellent appearance - stands out among fellows..... ()

2. MENTAL ALERTNESS

Consider how readily he grasps a situation and is able to understand what is required.

Slow and confused in understanding..... ()
Requires more than ordinary explanation..... ()
No particular difficulty in understanding..... ()
Exceptionally quick to understand what is required.. (x)

3. POWER OF EXPRESSION

Some men are able to speak in such a way as to hold attention and communicate ideas clearly and readily. They say what they mean simply and directly. At the other extreme is the man whose speech is slow, hesitating and ineffectual.

Difficult to follow - does not make himself clear... ()
Rather hesitant and inarticulate..... ()
States what he means clearly..... ()
Forceful - gets ideas over..... (x)

4. SELF-CONFIDENCE

Consider the extent to which he displays confidence in his ability to carry things through.

Timid, self-conscious, easily subdued..... ()
Uncertain of himself - lacks force, tries to bluff.. ()
Sufficient self assurance - does not back down too easily..... ()
Appears so competent that others have confidence in him..... (x)

5. INITIATIVE

Consider the extent to which he does the right thing without being told.

Has to be told what to do - does not think for himself..... ()
Routine worker - not much initiative..... ()
Displays initiative when the course is clear..... ()
Has excellent ideas and does not hesitate to present them..... (x)

6. ENERGY & PERSISTENCE

Some put very little effort into their work. Others may work in tremendous spurts and then wilt - ideal has well controlled energy and perseverance.

Indifferent - half hearted; loses interest..... ()
Does only what is required of him..... ()
Active. Applies himself diligently..... (x)
Vigorous, enthusiastic in all he undertakes..... ()

7. ACCURACY & RELIABILITY

Consider how dependable he is. Watch for the "buck passer", the one with the ready excuse.

Too irresponsible to be entrusted with important duties..... ()
Makes some mistakes - needs to be checked up occasionally..... ()
Can depend upon him for the performance of all ordinary duties..... ()
Can rely upon him to successfully complete the most difficult jobs..... (x)

8. CO-OPERATION

Consider how well he works with a group. Does he give whole-hearted support to a common cause.

Inclined to create trouble..... ()
Rarely puts himself out to help others..... ()
Co-operative - willing to help others..... ()
Definitely promotes harmony and good will among his associates..... (x)

9. INTEREST IN STATION ACTIVITIES

Participation or interest in sports, social, recreational and other Station activities.

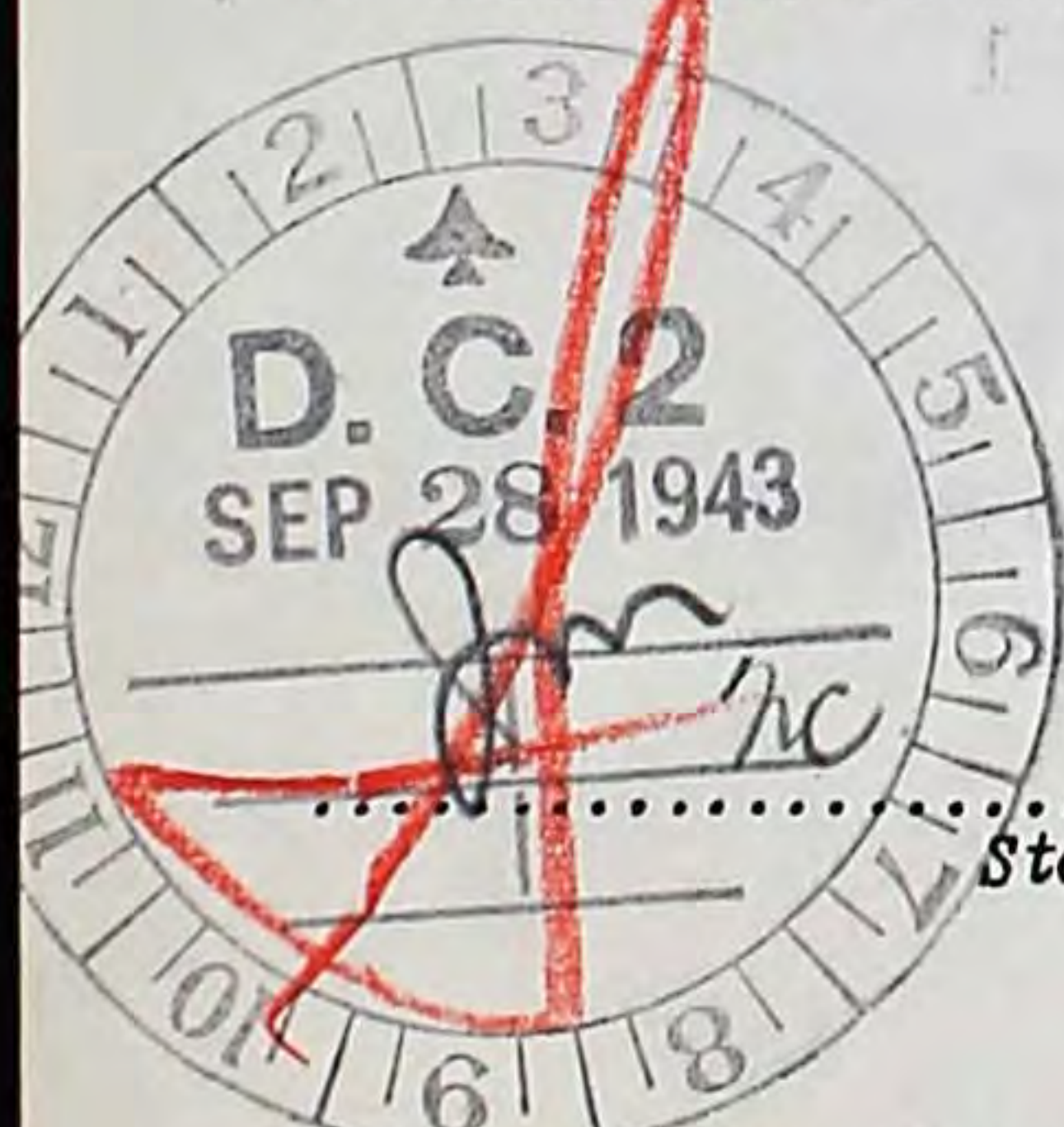
Indifferent - keeps to himself..... ()
Has very little interest..... ()
Usually participates in Station activities..... (x)
Active in promoting Station activities..... ()

10. LEADERSHIP

Consider the extent to which others have confidence in him and follow his direction.

Does not carry much weight with his fellows..... ()
Occasionally takes the lead..... ()
Able to provide good leadership..... ()
Skilful in directing others - inspires confidence and commands respect..... (x)

If assessment is on Aircrew under training, this side only will be completed and Assessing Officer will sign below.



Station

Date

This assessment is made from my personal knowledge of the individual concerned.

Signature and Rank of Assessing Officer

If other than Aircrew under training, balance of assessment is to be completed on the reverse side of this form and Assessing Officer will sign at the end of PART II only.

AUG 28 1943

PART II

(To be completed in addition to PART I for Officers and N.C.O.'s other than Aircrew under training)

1. SERVICE KNOWLEDGE

Does he show steady improvement and try to fit himself for greater responsibilities?

Satisfied with present knowledge..... ()
Improves his knowledge if not too much effort..... ()
Searches for ways to improve his service knowledge.... (X)
Surpasses others in keeping up to date with his
Service knowledge..... ()

3. ADMINISTRATIVE ABILITY

Consider the extent to which he displays organizing and supervising ability.

Confused in carrying out his work - busy without accomplishment..... ()
Does not organize things very well..... ()
Organizes effectively and gets things done..... ()
Outstanding organizer - produces excellent results promptly..... (X)

2. TRADE PROFICIENCY

Consider how proficient he is in the discharge of his duties.

Inferior - poorly qualified - below standard..... ()
Moderate - needs more training and experience..... ()
Satisfactory - does his work as well as the average... ()
Superior - knows his work and does it well..... ()
Exceptional - stands out unmistakably in capacity and efficiency in performance of his duties..... (X)

4. LOYALTY

Consider the extent to which he can be depended upon for his loyal support on all occasions.

Cannot bank upon him for whole-hearted support..... ()
Usually can count upon his loyalty..... ()
Can definitely depend upon his loyalty..... ()
Always strengthens the hand of those under whom he serves..... (X)

State any special qualifications for employment other than that on which engaged:

On completion of this officer's tour of duty as an operational pilot, strongly recommend he be given an engineering course so he may pursue that trade. He has proven to be very capable in Maintenance Work.

Any special remarks or observations not covered by this assessment:

As an Operational Captain this officer has proven outstanding in the performance of his duties. His knowledge of his work and of the aircraft are exceptional. The latter has enabled him to act as Engineering Officer for a short period, and while so employed he carried out those duties with the efficiency as his flying duties. Strongly recommended for accelerated promotion to Flight Lieutenant.

This assessment is made from my personal knowledge of the individual concerned.

10 Sqdn. Gander, Nfld.
Station

August 24th, 1943.
Date

.....
(J.M. YOUNG) SQUADRON LEADER

COMMANDING OFFICER'S STATEMENT

When assessing those other than Aircrew under training, in addition to the above assessment the following is to be completed by the Commanding Officer:

If not entirely in accord with the above assessment, which may have been made by another officer, the Commanding Officer is to submit an additional complete assessment.

Where more than one assessment on a man is being submitted from a station or unit, this section is to be completed on one only.

1. I have recently drawn to this man's attention the weaknesses which have been indicated on this assessment and I have made the following suggestions to him for his improvement:

3. Having thoroughly examined the Station Confidential File, Record Card and Conduct Sheets, the following "logging" and Conduct Sheet entries are noted as having been recorded within the last twelve months. (If there is no entry - write, - "none".)

I concur in the above remarks but not entirely with the assessment. See additional R. 211 attached.

2. My recommendation for his promotion is as follows:

Accelerated - Ordinary - Delayed - Not Recommended
(Encircle your recommendation)

5. He is qualified in drill up to and

including..... Wing Ceremonial.....

Gander, Nfld.
Station

Aug. 24/43
Date

.....
(C:L: ANNIS) GROUP CAPTAIN

Remarks or Recommendations by Air Officer Commanding (If Required):

app. B/S.L. (prob) 1.4.43

.....
Command

24/9
Date

.....
Signature of Air Officer Commanding



AIR MAIL
100-69

OTTAWA, Canada, 28th June, 1946.

Mr. J.A. Poirier,
212 2nd Street, North,
Kenora, Ontario.

Dear Mr. Poirier:

It is my painful duty to confirm the information that was conveyed in the three telegrams I recently despatched to you, advising of the locating of the wreckage of the Liberator aircraft on which your son was proceeding from Gander to Dorval October 20th, 1943. I sincerely regret that at this time it is not possible to convey to you many more details than were contained in the telegrams, for the search party that experienced great difficulty in reaching the site of the crash identified the wreckage as that of the Liberator and determined that it was not possible to make recovery or identify any of the occupants and then returned to the village of St. Donat, Quebec, with their initial report which was conveyed to you in my telegram of June 25th.

The wreckage was sighted by a Pilot who was engaged on the search for a missing aircraft that had proceeded over that area the day before and had failed to arrive at its destination. He observed a glint of sunshine on a metal object and on further investigation was able to determine that it was what remained of an aircraft but could not identify it. He conveyed the location to Headquarters and a search party was despatched immediately, but owing to the mountainous region, dense undergrowth and heavy timber the search party was not able to locate the site. An aircraft was then despatched to guide the search party from the air and difficulties encountered were so great that the site could not be observed until within fifteen feet of it. In addition, air activities were hampered by weather conditions. The exact location is described as forty-six degrees sixteen minutes North, seventy-four degrees, eighteen minutes West, on west side of twenty-five hundred foot mountain. It is approximately six miles from the village of St. Donat, Quebec.



-- 2 --

The search party has again proceeded and is at present at the scene of the crash where they will clear the area as well as possible and erect a cairn. Crosses are being made and will be taken to the scene of the crash for erection. These will be individual Crosses with the name, rank and date of death inscribed thereon. The difficulty of transporting flowers has been carefully considered, but twenty-four-roses will be taken to the site which will represent one for each of the occupants of the aircraft. The Memorial Burial Service will be held at the site of the crash on Wednesday, July 3rd, 1946, at 2:30 P.M. Eastern Daylight Time, weather permitting, the area being quite liable to be entirely covered by cloud if it is not a clear day. Wing Commander R.M. Frayne, Principal R.C.A.F. Protestant Chaplain and Wing Commander L.A. Costello, Principal R.C.A.F. Roman Catholic Chaplain will proceed to the site and will officiate at the service. A trumpeter will also be present. Official R.C.A.F. photographers will secure photographs which will be conveyed to you and complete reports of the service will also be sent to you by the respective Chaplains. During the service a Union Jack will be draped over the cairn. A flag-pole will be erected if it is possible, behind the cairn. A permanent brass plaque will be placed on the cairn at a later date; it is not possible to have such a plaque manufactured and ready for the service.

The officer in charge of the search party states that it is beyond all doubt death was instantaneous to all occupants of the aircraft. He also states that the site is quite inaccessible and should only be undertaken by an experienced woodsman. Considerable difficulty will be encountered in getting the officiating party for the memorial service to the site.

I realize that the anxiety and heartaches you have had to endure these many months will not be lessened by anything conveyed in this letter, but it is my sincere hope that you may derive some measure of comfort from the knowledge that these gallant boys did not suffer, for death is merciful to the men who fly in the air.

May I express to you and the members of your family my deepest sympathy.

Yours sincerely,

9
(W.R. Gunn),
Wing Commander,
R.C.A.F. Casualties Officer,
for Chief of the Air Staff.

WRG/BM

copy for RO

J1947 (D of P)

Lisgar Building,
Ottawa, Ontario,

8th July, 1946.

Mr. J. A. Poirier,
212 - 2nd Street, N.,
Kenora, Ontario.

Dear Mr. Poirier;

Perhaps just a word or two from me is in order, now that both of us have returned to our normal endeavours. May I say at the very outset that I considered it a privilege rather than a duty to officiate at the Libera service which was chanted on the slope of Black Mountain for the Roman Catholic boys who are presumed to have died in the Liberator crash, October 23, 1943.

All hopes of finding any of the passengers alive had been abandoned long ago but the recent discovery of the wreckage has served to clear the uncertainty of just what did happen, and the combined efforts of the townsfolk of St. Donat and R.C.A.F. personnel to give the unfortunate victims the best possible service, despite the difficulties, have done much to comfort the bereaved relatives of those involved.

May I assure you, Mr. Poirier, that I enjoyed making your acquaintance and that also of your son who accompanied you. Should the opportunity present itself I would deem it a privilege to meet Mrs. Poirier, perhaps when I am en route on a Western trip.

Assuring you once again of my willingness to assist you in any way possible,

Very sincerely yours,



(L.A. Costello) Wing Commander,
Principal Chaplain (RC)

Date	CONFIDENTIAL REPORTS	Date	A. M. P. Liaison Reports
9-6-42	He is as yet relatively inexperienced. He is nevertheless displaying commendable enthusiasm and aptitude in his work. Retention recommended. (W/C C.L. Annis, O.C. #10 (BR) Sqn. Gander, Nfld.)		
1-10-42	"For Promotion" R.211--3,4,3,4,3,4,4,4,3,3,3,4, para 3 part 2 Administrative Ability not assessed, 4, Total 72. Comment-- Recommended for promotion to flying officer. (S/L J.M. Young, Gander, Nfld.) (W/C F.S. Coghill, Gander, Nfld.)		
5-11-42	R.211...3,3,3,4,3-3,4,4,3,3-3,4-3,4. Total Score 72. Comments...This officer, while not yet qualified as a captain operational, due to lack of vacancies, is fully capable of handling the job. He is well liked by his crew and fellow officers. (S/L J.M. Young, Gander Nfld.). None. (G/C R.H. Foss, Gander, Nfld). "On Posting from Gander to Dartmouth"		
17-7-43	R.211..Score 75. A splendid experienced operational captain of Liberator aircraft. Will be ready for promotion shortly. (C.L. Annis W/C. O.C. #10 (BR) Sqn. Gander). (L.E. Wray G/C. C.O. Stn. Gander).		
2-9-43	Letter - This Officer is as nearly qualified as anyone in this command for this duty at No. 3 OTU, being an operational captain on Digby and Liberator aircraft and first pilot Norseman, and it is felt that he will have no difficulty in mastering the other types necessary. He is keenly interested in engineering having a good practical background in this subject and was felt to be capable of carrying out forty hour inspection on Digby aircraft. During the past few weeks while their engineering Officer was on leave he has also served No. 10 Squadron in that capacity. He has already been recommended for promotion to A/F/L and is considered capable in all respects for this appointment. (S/L A.M. Cameron for A.O.C.-in-C., E.A.C.)		Recommendations for Promotion
24-8-43	Recommendation for appointment to A/rank. R.211..Score 92. On completion of this officer's tour of duty as an operational pilot, strongly recommend he be given an engineering course so he may pursue that trade. He has proven to be very capable in Maintenance Work. As an operational Captain this officer has proven outstanding in the performance of his duties. His knowledge of his work and of the aircraft are exceptional. The latter has enabled him to act as Engineering officer for a short period, and while so employed he carried out those duties with the same efficiency as his flying duties. Strongly recommended for accelerated promotion to Flight Lieutenant. (J.M. Young, S/L, No.10 Sqn Gander) I concur in the above remarks but not entirely with the assessment. See additional R.211. d/25-8-43. (C.L. Annis, G/C, Gander)	1-10-42	R.211-----Ordinary.
		5-11-42	R.221.....Ordinary.
		17-7-43	R.211.....Ordinary.
		24-8-43	R.211.....Accelerated.
		25-8-43	R.211.....Accelerated.
25-8-43	Recommendation for promotion to A/Rank. R.211..Score 77. (C.L. Annis, G/C, Stn Gander)		
			Remarks of Promotion Board

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

1908
new 2
AIR

DECEASED
MEMBER'S
NAME

J.A. Raymond
(CHRISTIAN NAMES)

Poirier
(SURNAME)

REGISTER NO.

FILE NO.

DATE

SERVICE NO.

FINAL RANK OR RATING

DATE OF DISCHARGE

PAYEE
ADDRESS

Receiver General of Canada,
Director of Estates,
Ottawa, Ont.

DATE OF TERMINATION OF OVERSEAS SERVICE

20 Oct/43

46268
21801

10 Aug/45

J9147

F/L

20 Oct/43

A. TOTAL QUALIFYING SERVICE

NO. OF DAYS 1143 EQUAL TO 38 COMPLETE PERIODS AT \$7.50
30

\$
285.00

B. QUALIFYING OVERSEAS SERVICE

NO. OF DAYS 553 LESS 3 INELIGIBLE DAYS, EQUAL TO 550 DAYS @ 25c. PER DAY

137.50

C. SUPPLEMENT FOR OVERSEAS SERVICE

DAILY RATES AT DISCHARGE

PAY \$ 8.50
SUBSISTENCE OR LODGING
AND PROVISION ALLOWANCE \$ 1.70
ADDITIONAL PAY \$
\$
\$

DEPENDENTS' ALLOWANCE 1/30 OF \$

TOTAL \$ 10.20 X 7 = \$ 71.40

NO. OF DAYS 553 X \$ 71.40
183

215.76

D. WAR SERVICE GRATUITY

638.26

E. DEDUCTIONS

OVERPAYMENT OF

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

OTHER DEDUCTIONS \$

F. TOTAL AMOUNT PAYABLE

638.26

G. YOUR PORTION OF GRATUITY IS—

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

= \$

TOTAL DEPENDENTS' ALLOWANCE IN ISSUE \$

CERTIFICATE I CERTIFY THAT THE AMOUNT HAS BEEN CORRECTLY COMPUTED AND IS PAYABLE IN ACCORDANCE WITH
THE TERMS OF THE WAR SERVICE GRANTS ACT, 1944 AND THE REGULATIONS ISSUED THEREUNDER.

PREPARED BY MYB
CHECKED BY JFM

TREASURY
CHECKED BY
DATE 14/8/45

SERVICE REPRESENTATIVE

XXXXXXXXXXXXXXXXXXXX
XXXXXXXXXXXXXXXXXXXX
XXXXXXXXXXXXXXXXXXXX
XXXXXXXXXXXXXXXXXXXX

HQ.J9147 FD216

ESTATES BRANCH

OTTAWA

CANADA

11th June, 1945.

Mrs. Anne M. Poirier,
212 Second Street, North,
KENORA, Ontario.

POIRIER, Joseph Alfred Raymond, F/L (Deceased)
No. J.9147 R. C. A. F.

Dear Mrs. Poirier:

You will recently have received from Treasury a
cheque payable to your order in the amount of \$29.51.

This is the total amount to the credit of your son's
Service estate and is made up as follows:

Refund of National Defence Tax.....	\$ 13.60
Balance of Pay Account.....	15.91
	<u>\$ 29.21</u>

This amount is paid to you as the sole beneficiary named
in your son's will on file in this Branch. Will you kindly sign
and return the enclosed form of acknowledgment.

We are also sending you the enclosed Income Tax Abate-
ment Certificate, in triplicate for the period mentioned therein.
We regret that we are unable to assist you in matters pertaining
to your son's Income Tax. The enclosed certificate is to be
referred to the appropriate inspector should inquiries regarding
income tax be made.

We are forwarding under separate cover three \$100.00
Victory Loan Bearer Bonds and you will be receiving them shortly.

Yours faithfully,

M. G. Gaudet
Director of Estates.

MG:LAW

EXHIBIT "A"

Contents of Steamer Trunk

Side Compartment

1 pr. Trousers, battledress
1 ea. Tunic, battledress
1 pr. Trousers, khaki, Service dress
1 pr. Trousers, grey, summer
1 ea. Air Force blazer
1 pr. Trousers, gray flannel
1 ea. Belt, white
1 ea. Tunic, blue, Service dress
2 pr. Trousers, blue, Service dress
2 ea. Towels

Top Drawer

2 ea. Sweaters, blue, sleeveless
4 ea. Handkerchiefs
1 ea. Tie
1 ea. L.L. note book
1 ea. Note book
1 ea. Diary book
1 ea. Letter
1 ea. French-English dictionary
1 ea. Prayer book
Several snaps

Second Drawer

13 pr. Socks
1 pr. Dividers
1 set Drafting instruments
1 ea. Letter case, with zipper
1 set Toilet articles
1 pr. Sun glasses
1 ea. Leather cigarette case
3 pr. Suspenders
1 ea. Watch case (empty)
1 ea. Caps, wedge, Field Service
Letters
Religious pamphlets

Third Drawer

2 ea. Winter underwear suits
2 ea. Gym shirts
5 ea. Undershirts
1 pr. Gym shorts
5 pr. Undershorts
1 ea. White scarf
15 ea. Handkerchiefs

Fourth Drawer

3 pr. Pyjamas
7 ea. Shirts, blue,
2 ea. Sport shirts
4 ea. Shirts, khaki

Small Wooden Box

1 ea. Model of speedboat (uncompleted)

Big Wooden Box

1 ea. Brace
1 ea. Hand ratchet
2 ea. Sockets
1 pr. Pliers
1 ea. Universal wrench
1 ea. Screwdriver
1 ea. File
6 ea. Crescent wrenches
2 ea. Golf clubs

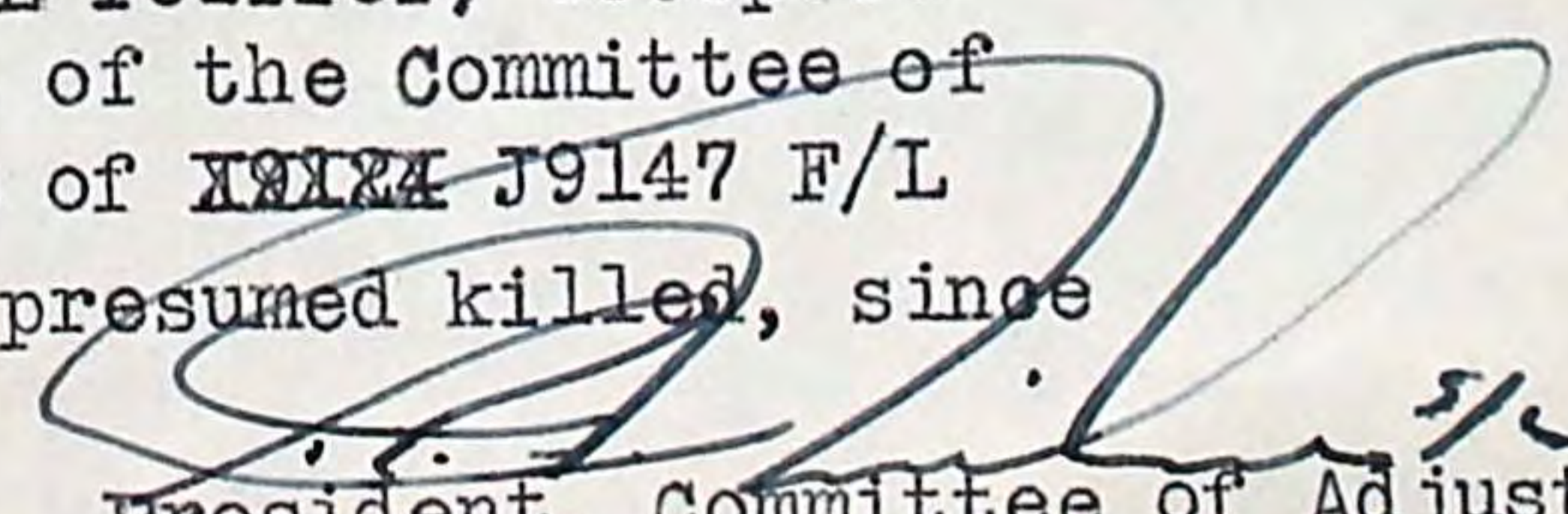
Large Wooden Box (Cont'd)

1 ea. Jacket, brown
3 pr. Oxfords, black
1 ea. Photograph
1 pr. Leather slippers
1 pr. Toe rubbers
1 pr. Overshoes, zipper
1 pr. Running shoes
1 bk. "Air Force Guide"
1 ea. Lamp shade frame
5 ea. "DublHex" wrenches, assorted

Large Wooden Box

1 ea. Greatcoat
1 ea. Record player
58 ea. Records
1 ea. Jig saw puzzle
1 ea. Writing Tablet
1 ea. Zipper writing kit
1 bk. "Elementary Trigonometry"
1 bk. "Business Letters"
1 bk. "Aeronautics"
1 pr. Ice skates
1 box Miscellaneous articles
1 ea. Table lamp stand
1 ea. Sweat shirt
1 pr. Trousers, khaki
1 ea. Belt, black
1 ea. Shirt, khaki
9 pr. Socks
1 ea. Sweater, blue, zipper front
1 pr. Swimming trunks, gray
1 ea. Sweater, gray, sleeveless
1 bag Button polishing kit
1 pr. Gloves, blue, wool
1 pr. Gloves, brown, leather
1 ea. Thermos bottle
1 box from Hampton Hobby Shop
2 ea. Towels

This is Exhibit "A" (being complete inventory of personal effects of F/L Poirier) accepted and entered in the report of the Committee of Adjustment for the estate of ~~19124~~ J9147 F/L Poirier, J.A.R., missing presumed killed, since 20th October, 1943.


President, Committee of Adjustment.

OR SINGLE.....Single

No. J-9147

NAME IN FULL POIRIER Alfred Raymond

[illegible][illegible]

Mrs. A. Poirier,
212-2nd. St. North
Kenora, 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. J9147 FD 216

DEPARTMENT OF NATIONAL DEFENCE
ESTATES BRANCH
OTTAWA, ONT.

29 August 1944

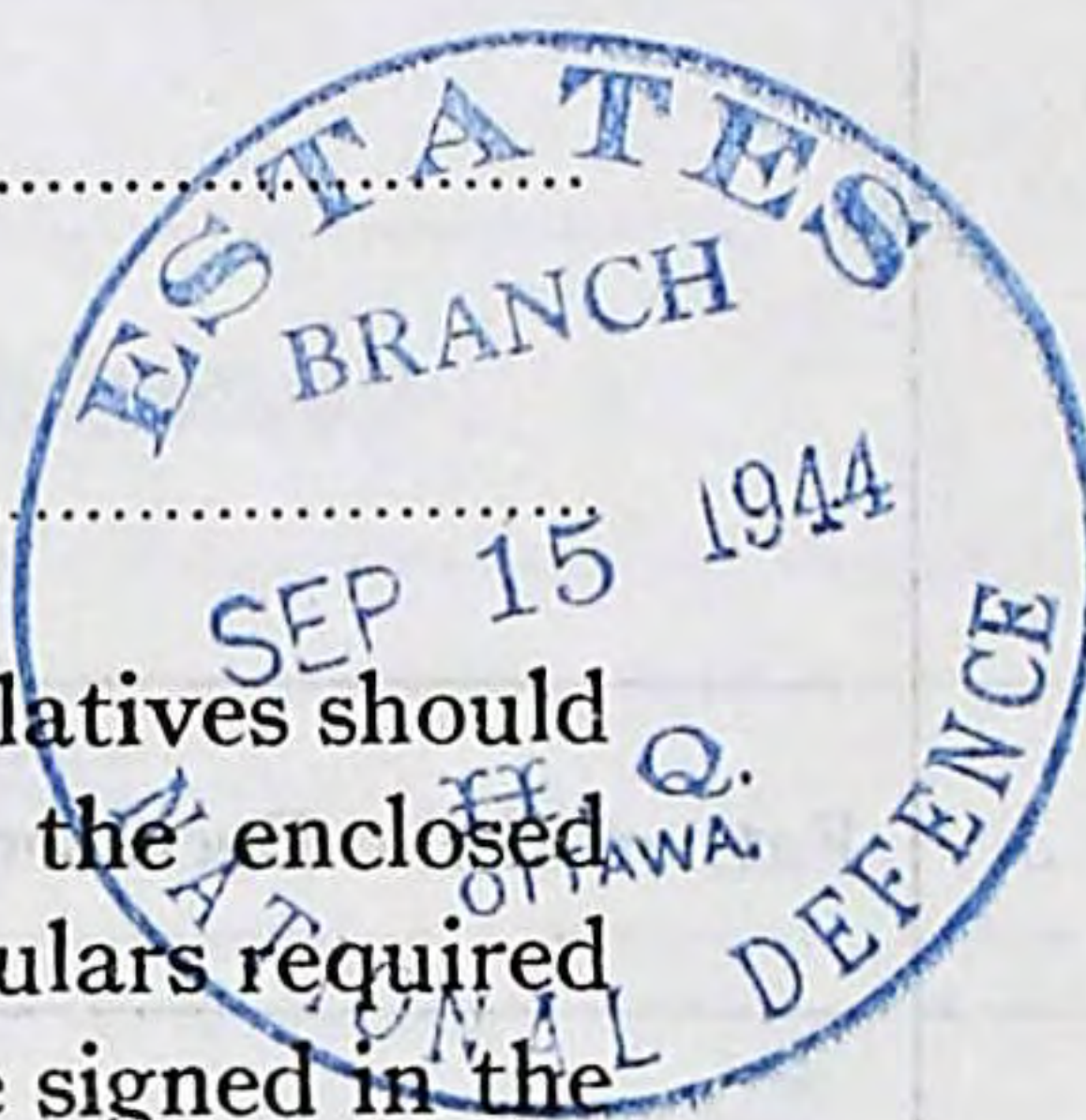
For the purpose of record and in the event of there being any Service estate available for distribution (according to law) on account of the late

Poirier, Joseph Alfred, Raymond F/lt.

No. J9147 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.



Director of Estates

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.....	Joseph Aime Poirier	51	212 -2nd St.North, Kenora, Ontario.	
4	Mother of the Deceased.....	Ann Marie Poirier	49	212 - 2nd St.North, Kenora, Ontario.	
5	Brothers of the Deceased	Full Blood	Cecil Lambert Poirier	19	212 - 2nd St.North, Kenora, Ontario.
		Half Blood	- - -		
6	Sisters of the Deceased	Full Blood	- - -		
		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.	Joseph Alfred Raymond Poirier
9	Date of his birth.	November 25, 1921
10	Place and date of his marriage.	- single -
11	Place and date of his parents' marriage.	Kenora, Ontario, Jan. 26, 1921

PARTICULARS OF DOMICILE

12	Place where deceased was born.	Kenora, Ontario
13	State, in order, the Province, State and/or County in which he resided before enlistment and the period of time in each.	(a) (b) in Kenora, Ontario from birth (c) until he enlisted in R.C.A.F. (d)
14	Nature of employment before enlistment.	Student
15	State whether he owned the premises in which he lived, and, if so, where situated.	living with parents.
16	Name place where deceased stated he intended to make his permanent home.	Kenora, Ontario

PARTICULARS OF ESTATE

17	Did he leave a Will? If in your custody, please forward.	Yes - In custody of R.C.A.F.
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?	- single -
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?	no
20	Amount of War Savings Certificates held by deceased. Indicate where located.	1 - \$5.00, 1 - \$50.00 in my possession.
21	Amount of Victory Loan Bonds held by deceased. Indicate whether registered or bearer and where located.	3 - \$100. Bearer Bonds in my possession. also 3 - \$100. Bearer Bonds paid up but not yet received.
22	If deceased had life insurance, name companies and amount payable under each policy and the person named as beneficiary therein.	Also 1 - \$500. Bearer Bond taken out in Oct. /43 with some payments made on acct. of same
23	Describe other assets, if any, and estimated value thereof. Use space on page 4 if necessary.	none

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 debts
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)

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

* Father 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.

A. Poirier

{ Signature of Informant

212 - Second St. North, Kenora, Ontario Address

CERTIFICATE

I hereby certify that to the best of my knowledge and belief Joseph Aime Poirier

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

Dated at Kenora, Ontario this 9th day of September 1944.

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

H. J. Donley

Qualification Barrister at Law

Address Kenora, Ontario

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

OFFICIAL ROYAL CANADIAN AIR FORCE CASUALTY NOTIFICATION

NUMBER **J9147(R100383)**

RANK **FLT. LT.**

UNIT **10 SQDN**

GANDER NF.LD.

TRADE **PILOT (G.L.)**

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

NAME **POIRIER, JOSEPH ALFRED RAYMOND.**

MARITAL STATUS **SINGLE**

RELIGION **R.C.**

CANADIAN

FRENCH CANADIAN **YES**

OTHER

NEXT OF KIN AS SHOWN ON
REC. OF SERV. & RELATIONSHIP

MR. JOSEPH AMIE POIRIER (FATHER)

ADDRESS **212-2ND ST. NORTH**

NAME **KENORA, ONT.**
ADDRESS
D.A.B.



NEXT OF KIN AS SHOWN ON
CAS. SIG. & RELATIONSHIP

MRS. A. POIRIER (MOTHER)

ADDRESS **212-2nd ST. NORTH**

NAME **KENORA, ONT.**
ADDRESS
D.A.B.

FATHER'S NAME

ADDRESS

MR. & MRS. JOSEPH AMIE POIRIER

LIVING ON ENLISTMENT **YES**

MOTHER'S NAME **212-2ND ST. NORTH**

ADDRESS **KENORA, ONT.**

LIVING ON ENLISTMENT **YES**

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

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

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

CASUALTY DETAILS:

AUTHORITY CAS. SIG. NO. **K.R. (AIR) PARA. 710 (3)-----d-17-JULY-44**

PREVIOUSLY REPORTED "MISSING" 20-OCT-43 AS A RESULT OF A FLYING
ACCIDENT--AIRCRAFT LAST REPORTED OVER MONT JOLI--ENROUTE TO GANDER TO
DORVAL (FAMILIARIZATION & TRANSPORTATION)

NOW "PRESUMED DEAD" 20-OCT-43 FOR OFFICIAL PURPOSES.

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

(2)

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

NO

DATE **5-AUG-44**

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

NO

Arthur J. B.

FOR CHIEF OF THE AIR STAFF

Royal Canadian Air Force

CERTIFICATE OF PRESUMPTION OF DEATH

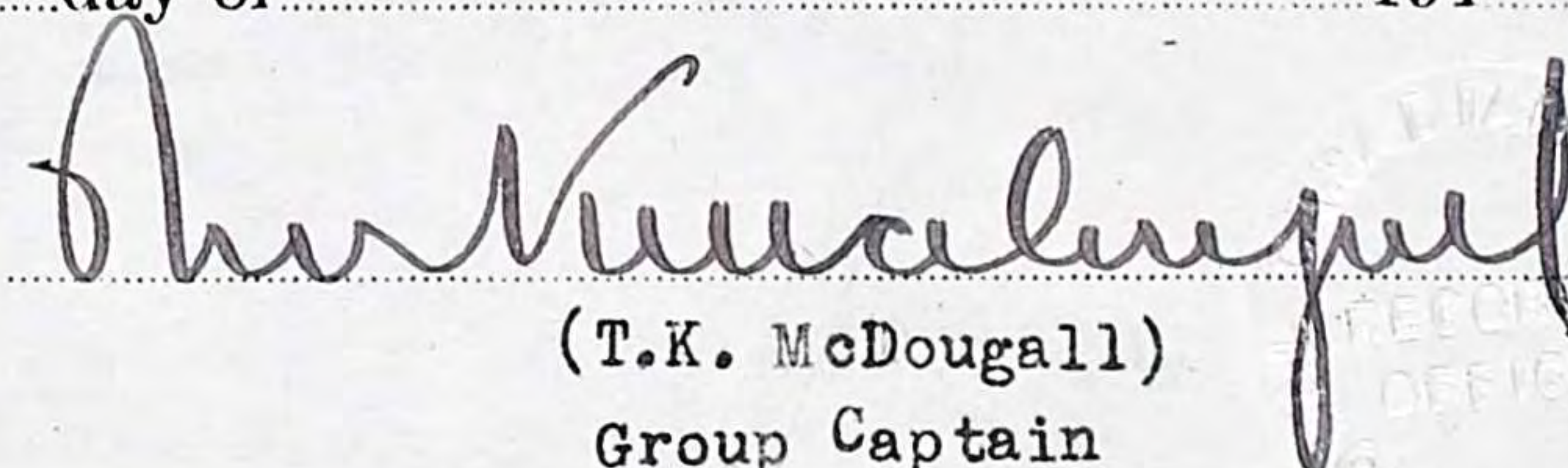
NO. 9311

This is to Certify that

J9147 FLIGHT LIEUTENANT JOSEPH ALFRED RAYMOND POIRIER
(Number) (Rank) (Name in Full) (Unit)
R.C.A.F.

has been officially reported as missing since the 20TH day
of OCTOBER, 194 3, 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 5TH day of AUGUST 194 4



(T.K. McDougall)
Group Captain

R.C.A.F. Records Officer.

Read this whole form and
instructions on other side
before commencing to
complete.

Last
Permanent
Civilian
Address

(1) I, P/O Alfred Raymond Poirier of the Kenora County
of Kenora in the District of Kenora
Province of ONTARIO (None)
(Civil Occupation)
a member of the Royal Canadian Air Force, Number.....do hereby
revoke all former Wills by me made and declare this to be my LAST WILL.

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

(2) I GIVE, DEVISE AND BEQUEATH UNTO
My Mother - Mrs. A. Poirier.
212 2nd. St. North.
Kenora. Ont.

Relationship
Names and
Address of
Residuary
Beneficiaries.

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

(4) I appoint Mrs. A. Poirier Kenora Ont.
(Name) (address)
....., to be the ^{Executor} Executrix of this my Last Will.

IN WITNESS WHEREOF I have hereunto set my hand this twenty. 2nd day of
December 19 41

Signed and acknowledged by the Tes-)
tator, 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.) Alfred Poirier
(Signature of Testator)

First
Witness
sign here.

(5) R. S. Keetley
(Signature)
#31 G. R. S., Charlottetown
(Address)
P/O
(Occupation)

Second
Witness
sign here.

Allan P. Cheater
(Signature)
#31 G. R. S., Charlottetown, P.E.I.
(Address)
P/O
(Occupation)

(Witnesses are not to be beneficiaries.)

To be made out in duplicate

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

SPECIAL RESERVE
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..... **POIRIER JOSEPH ALFRED RAYMOND**
(Surname first—Christian names in full—Block capitals)

(2) Regimental or Official Number and Rank..... **R-100383 AC 2**

(3) Unit..... **R.C.A.F.**

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

(5) If married, state,

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

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

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

..... **N.A.**

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

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

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

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

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

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

Postal Address.....

R.C.A.F. Records Office	
Rec'd MAY 1 1941	
O. K.....	C.I.B.....
R. C.....	N. I.....
S. L.....	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.....

N.A.

(11) Is your father alive?.....YES

If so, state name and address, occupation.....Mr. Joseph Asie Poirier,

212 - 2nd St., North, Kenora, Ontario, Railroad Conductor.

(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?.....

YES

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

If so, state name and address.....Mrs. Ann Marie Poirier,

212 - 2nd St., North, Kenora, Ontario.

(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?.....

NO

(17) Are you contributing to the support of any dependents, other than those shown above?.....
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.....

NO

(18) Are you insured?.....

If so, in what Company?.....

(Give number of policy)

N.A.

Have you made arrangements for payment of your Insurance Premium?.....

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.

Date.....

APRIL 9th, 1941

(Signature of officer or man)

Date.....

APRIL 9th, 1941

Officer Commanding

R.C.A.F. RECRUITING CENTRE
LINDSAY BLDG. WINNIPEG, MAN

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.

Royal Canadian Air Force

CERTIFICATE OF PRESUMPTION OF DEATH

NO. 8311

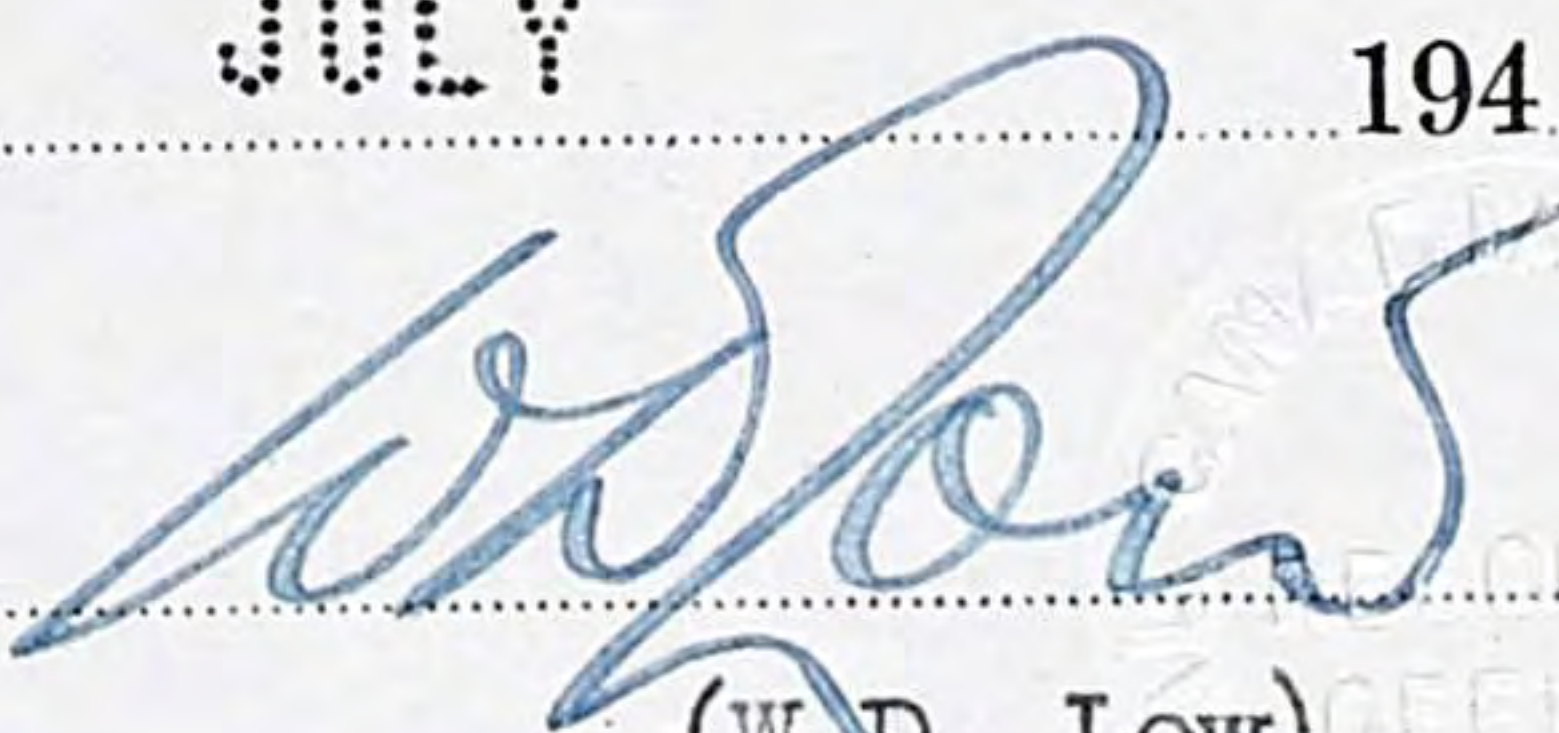
This is to Certify that

J9147 FLIGHT LIEUTENANT JOSEPH ALFRED RAYMOND POIRIER
(Number) (Rank) (Name in Full) (Unit) R.C.A.F.

has been officially reported as missing since the 20TH day

of OCTOBER, 1943, 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 17TH day of JULY 1944


(W.D. Low)
Squadron Leader,
Acting R.C.A.F. Records Officer.

1130 P 370

PA

09147

R.C.A.F. R.47
100M-10-40 (7391)
H.Q. 1062-3-56

ROYAL CANADIAN AIR FORCE
OFFICER'S APPLICATION AND RECORD SHEET

Date December 28 1941

I have the honour to apply for an appointment to the Special Reserve (Non-Flying List)
(General List)

Please read these notes before completing the form:—

- (a) All questions must be answered in candidate's own handwriting. It is not sufficient to leave a space for reply, blank. Write "N.A." if "Not Applicable". Incorrect answers may prejudice an applicant's chance of selection.
- (b) Where spaces are inadequate, information should be given on foolscap paper attached to and identified with this application.
- (c) Paragraphs 35, 36 and 37 must be signed, dated and witnessed.
- (d) The submission of false information or falsified documents in connection with this application may render the applicant liable to Prosecution.

1. Surname POIRIER (Use capital letters)

2. Christian Names JOSEPH ALFRED (Use capital letters)

3. Date of Birth November 25 1921 Place Kenora Ontario City Province Country

4. Permanent Address 212 2nd St North

5. Present address for correspondence stating date until which it holds good. Telephone
#31 2 G.B.S. Chulattatoum P.E.I.

6. Nationality (If Naturalized Canadian, proof of naturalization must be submitted) French

7. Religion (State denomination, e.g., C. of E., R.C., U.C., etc.)

8. Next of Kin (Name) Mrs. Annie Poirier Relationship Mother Address 212 2nd St North Kenora Ontario

9. Father's name in full J. Annie Poirier Alive Deceased Address 212 2nd St North Kenora Ont. Birth Place Nationality French Profession Railway Conductor Mother's maiden name in full Anna Marie Ouellette Alive Deceased Birth Place

10. Has either parent acquired any other nationality? (If so, full particulars and date must be given) N.A.

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

12. Particulars of Children:—

NAME	DATE OF BIRTH	PLACE OF BIRTH
N.A.		

13. Person or persons to be notified in case of casualty:—

Name Mrs. A. Poirier Relationship Mother Address 212 2nd St North Kenora Ont.

14. Education:—

SCHOOLS	DATES IN ATTENDANCE		COURSES	DIPLOMAS AND DEGREES
	FROM	TO		
Mount Carmel School	Sept 1934	1934	Matriculation	Grade 8
Kenora High School	" 1934	1940	"	" XI
Universities				

15. Special Civil Courses or Examinations other than in 14 above, Correspondence Courses, etc.

16. Civil Employment, from leaving school to present in chronological order, and Reasons, if any, for leaving:—
(If space does not permit full details of civil duties supplementary memorandum should be attached to and identified with each copy of this form.)

NAME AND ADDRESS OF EMPLOYER	FROM	TO	DUTIES	CAUSE OF LEAVING
J.P. Stone & Co. Kenora Ont.	14/4/40	30/7/41	Book Binder	Enlistment in His Majesty's Forces

17. Clubs or Organizations of which applicant is a member.....

— N.A. —

18. Previous Service with Navy, Army, Air Force, Permanent or Non-Permanent:—

(If in the Air Force state nature of duties, e.g., Pilot, Observer, Technical or Ground duties and if entitled to wings.)

FULL NAME OF UNIT	FROM	TO	RANK	DUTIES
Kenora Light Infantry	19/9/39	-	Private	General
16th. mech Bty. R.C.A.F.	-	9/40	Sergeant	Signaller
100th C.A.B.T.C.	9/40	9/4/41	Sergeant	Instructor

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

20. Details of Ground Officer's Duties Performed..... None

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

SUBJECT	FROM	TO	UNIT	PLACE
Self Artillery and Infantry Subjects	10/39	9/40	16th mech Bty	Kenora
	9/40	4/41	100th C.A.B.T.C.	Portage La Prairie

22. Have you ever been or are you now in receipt of a Disability Pension?..... No

If so, state nature of disability:..... N.A.

Particulars of other Pension:.....

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

None

Service Courses taken:—

TYPE OF COURSE	PLACE	FROM	TO
J. F. S.	Edmonton	10/6/41	26/7/41
E. F. J. S.	Boundary Bay	26/7/41	27/9/41
S. F. J. S.	Clareholm	27/9/41	5/12/41

25. Have you previously applied for a Commission or for enlistment in the Royal Canadian Air Force or any of its auxiliaries? If so, state:—

(Unit and Place) *Mo* (Date) (Result)

26. Have you any knowledge of internal combustion engines, construction of aircraft, mechanics or electricity?

General

27. Types of Aircraft Flown (Service or Civilian):—

PLACE	LIST FLYING HOURS BY YEARS	REMARKS
#182 F.T.S.	55 hours.	Tiger Moths
#151 F.T.S.	110 hours.	Canon Canons

28. Total Flying Time *165* (Hours) (State Type and No. of Licence held)

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

Basketball, Badminton, Rugby, Tennis

30. Hobbies *Reading (Science & Travel)*

31. Languages spoken, or written (State proficiency) *English*

32. Any other remarks or information not included in the foregoing—

None

33. Names and present addresses of responsible persons (preferably including employer), able to certify from personal knowledge of the candidate's career, as to his suitability for commissioned rank.

Name *E. D. MARVIN* (in capitals) Name *J. C. OUELLETTE* (in capitals)

Address *Kenora Ontario* Address *Kenora Ontario*

Profession *Principal (High School)* Profession *Manager*

Name *J. A. STONE* (in capitals) Name *J. W. WILLIAMS* (in capitals)

Address *Kenora Ontario* Address *Kenora Ontario*

Profession *Manager* Profession *Manager*

34. NOTE:—

The applicant must be prepared to provide, if required, references from his former headmaster, employer or other person. The Department is not prepared to enter into correspondence, whether officially or unofficially, with persons other than those whom the candidate has nominated; and the Selection Board will disregard recommendations from any persons who are not directly and personally acquainted with the candidate's work, at school, university, in industry or business, in H.M. Forces or otherwise. Applicants are cautioned not to prejudice their candidature by endeavouring to enlist the support of persons inside or outside the Service who they consider might have some influence.

35. CERTIFICATE

The foregoing information was personally compiled by me and is correct to the best of my knowledge and belief. I understand that His Majesty may exercise the right at any time to dispense with the services of an Officer on probation.

Witness *R. S. Keetley* Signature *AR Parris*

Date *27/12/41* 19

36. AGREEMENT

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

Witness *R. S. Keetley* Signature *AR Parris*

Date *27/12/41* 19

37.

DECLARATION

I, Alfred Raymond Pomeroy having made an application, dated
(27/12/41) for a Commission on the Special Reserve of the R.C.A.F. do hereby declare, provided my said
application is accepted, that I am willing to serve on Active Service, anywhere in Canada, also beyond Canada and Overseas for the
duration of the present war, and for the period of demobilization thereafter, should His Majesty so long require my services.

Witness.....R. S. Kettle.....Date.....27/12/41.....19.....Place.....Charlottetown, P.E.I......Signature.....AR Pomeroy.....38. (a) Location of Will.....# 31, G. R. S. Charlottetown, P.E.I......(b) Entered in Officer's Records by.....R. S. Kettle.....
(Rank) (Date) (Place)

CERTIFICATE OF MEDICAL EXAMINATION

Name in full.....

PART 1. Information obtained from the applicant:—

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

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

3. Have you ever worn glasses?..... 4. Have you had any illness of more than one
week's duration?.....

Signature of Applicant.

Examiner's remarks re above.....

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

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

2. Height..... Feet..... Inches 3. Weight..... lbs.

4. Complexion..... 5. Colour of eyes..... Hair.....

6. Development { Good 7. Chest measurement—full expiration..... inches
Fair range of expansion..... inches
Poor

8. Hearing—Right..... Left..... Tympana—Right..... Left.....

9. Vision—Without Glasses—Right..... With Glasses—Right.....

Left..... Left.....

Colour Vision.....

10. Condition of mouth and teeth.....

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

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

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

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

General Impression and any special remarks of Medical Officers.....

Date.....19.....

(President)

(Member)

(Member)

REPORT ON PERSONNEL - GENERAL RECONNAISSANCE SCHOOL.

99147

NAME A.R. POIRIER (1.9147) RANK P/O STATION Charlottetown
COURSE NO. 28 DATE COMMENCED 29. 12. 41. DATE TERMINATED 28. 2. 42.

Aircraft Type	Dual	Solo	Navigation	Crew	Total
ANSON DAY			29	45	29 45
ANSON NIGHT					
Total all types					

© Assessment and remarks on Air Navigation Flying:

ABOVE AVERAGE. A keen pupil. His only fault is that of trying to work too fast. He has, however, shown considerable improvement.

Day and night flying on each type to be entered separately.

A. M. M. LDR
G.R. Officer or Instructor.

Marks - Air Work.

NAV. 216/300 RECO. 80/100.

GROUND TRAINING.			
SUBJECT.	WRITTEN.	MAXIMUM	PERCENT.
D.R. Navigation	78	100	78
D.R. Navigation	228	300	76
Astro Navigation	87	100	87
Compasses & Instruments	136	200	68
Meteorology	100	200	50
Signals	69	100	69
Reconnaissance	156	200	78
Coding	92	100	92
Ship Recognition	154	200	77
Photography	81	100	81
Visual Signals	Pass	Pass	
Totals	1181	1600	74

© Assessment and remarks on Ground Training. AVERAGE. A sound, hard working pupil Acquires knowledge quickly, but he is inclined to sacrifice accuracy for speed.

© To be assessed: Exceptional Passed...Yes...Order of Merit...9...
Above the average
Average
Below average. Failed...23...
Poor

R.C.A.F. Records Office
Rec'd. MAR 30 1942
O.K.

A. M. M. LDR
G.R. Officer or Instructor

REMARKS OF O.C. NO. 31 GENERAL RECONNAISSANCE SCHOOL. This officer is h
working but sacrifices accuracy for speed.

E. F. Reynolds
Chief Instructor, O.C. No. 31 G.R.

REMARKS OF O.C. STATION. Good officer. Rather apt to rush his fence
HEI develop into useful G.R. Navigator.

DATE 27. 2. 42.

Commanding, R.A.F. Station, Cha

6

R.C.A.F. R. 78A
60M-8-41 (679)
H.Q. 1062-3-61

ROYAL CANADIAN AIR FORCE
OFFICER OR AIRMAN — REPORT ON ACCIDENTAL OR
SELF-INFLICTED INJURIES OR IMMEDIATE DEATH THEREFROM

N.B.—To be rendered in accordance with the Instructions on Pages 3 and 4

1. Name POIRIER Alfred Raymond
(Surname) (Christian Names in Full)
Rank P/off Number J.9147 Unit 31 C.R.S.
Date and time of accident 16-2-42 1305 hrs Place of accident R.A.F. Aerodrome
(exact locality) Charlottetown, P.E.I.

2. Short statement by injured person of the circumstances of the injury (see Instruction 6). Signed statements of witnesses, or of persons to whom the injured person may have mentioned his injury, to be attached (see Instructions 7 and 9).

I was in a taxiing aircraft when the undercarriage collapsed and I
received no injury.

W.R. Poirier P/O

N.B.—See Instruction 4 before completing the following Section.

3. (a) Type and R.C.A.F. No. of Aircraft Anson AX 222
(b) Name of Pilot of Aircraft P/off A. James
(c) Number in Aircraft, including Pilot 4
(d) Crash occurred while: taking off stationary in air (collision)
landing forced landing taxying
(strike out those not applicable)
(e) Weather N/A
(f) In case of non-fatal crash does individual recall all events immediately preceding and following
crash? Yes
(g) Number of flying hours of person reported on: Dual N/A Solo N/A
(h) Duty: instructor pupil aircrew passenger other (specify)
(Strike out those not applicable)

4. (a) Description of injuries: None
(b) Are the injuries serious or of such a nature that they might be the exciting cause of disability later? N/A
(c) Whether admitted to hospital or Sick in Quarters? No
Give name of hospital. N/A
(d) How long before initial treatment was given? N/A

Date 16-2-42 Signature of Medical Officer H.W. Whittingham P/Lt.

5. Commanding Officer's statement:—

(a) Was the injury sustained

(i) In the performance of air force duty?.....YES
(See Instruction 9)(ii) In a game or other form of physical recreation definitely organized by or with the approval of the proper air force authority?.....NO(iii) On leave? (State whether with or without pay).....NO

N.B.—See Instruction 8 before completing the following Section.

(b) If the answer to (a) (ii) is in the affirmative, state

(i) By whom was the game, etc., organized and under whose authority?.....NO(ii) The nature of the game, etc. (e.g., hockey, baseball, etc.).....NO(iii) Was the Officer or airman detailed to take part in it (a) as a member of an air force team, or (b) to compete as an individual.....NO

NOTE.—Questions (iv) to (vi) to be answered in addition only if the injury was sustained at practice.

(iv) For what service event was the practice held?.....NO(v) Was the Officer or airman a selected representative of an air force unit practising under authority?.....NIL(vi) If so, under what authority and supervision?.....NIL

(c) If sustained in a game, etc., but not in an organized game, state if there are any special circumstances which should be taken into account if and when the question of attributability comes to be decided by the Canadian Pension Commission:—

.....NIL

N.B.—See Instruction 12 before completing the following Section.

(d) Was the injury due to his own fault, i.e., did it arise from negligence, wilful disobedience of Orders, misconduct, or any blameworthy cause within his own control?.....NOIf so, state in what way.....NO(e) Was anyone else to blame? If so, give name and particulars.....NO

(f) Is the accident being investigated by

(i) Court of Inquiry? If so, state date and place.....NO(ii) An investigating Officer?.....NOSignature E.A. Blake G/CDate: 23-2-42 Commanding _____

CONFIDENTIAL

R.C.A.F. M.3
150M-8-40 (0421)
H.Q. 1002-10-2

ROYAL CANADIAN AIR FORCE

Medical Board held at Winnipeg, Man.

Date 12.11.40

FILE NUMBER

Surname POIRIER Chr. Names ALFRED RAYMOND
Nature of Commission Pilot Date of Birth 25.11.21 Married or Single Single
Branch passenger only
Address 212, 2nd St. North, Kenora, Ont.

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 Scarletina Scarlet fever as a child—
(iv) STOMACH or BOWEL TROUBLE no
Chronic Indigestion or Pain after Food no
(v) KIDNEY or BLADDER TROUBLE no
Syphilis or Gonorrhoea 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 2 days because of drilling soldiers for hours.
Sea, Car or Train Sickness no
Discomfort on Swings, Roundabouts, Switchbacks no
(ix) OPERATIONS no
(x) Any Illness or Injury not mentioned above Fr. rt. arm at 10 yrs. age.
Measles, mumps.

Education Junior matric. in Ontario.—1940
Present Occupation Soldier (Sergeant) Hobbies Model aircraft making
Previous Service yes. 5 yrs. 2 mos. in N.P.A.M. Signalling (Morse)
Athletics rugby & basketball (good player)
Habits—Smoking Occasional pipe Alcohol 6 glasses beer per month
FAMILY HISTORY—Consumption no
Nervous Ailments, Mental Trouble, or "Fits" no
Father Alive—Health 47) good Dead—Cause no
Mother Alive—Health Hypertension Dead—Cause no
Brothers (1) Alive—Health good Dead—Cause no
Sisters (2) Alive—Health good Dead—Cause no

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 9-1-41

Signature Alf Poirier

Witness W. H. Bayliff

GENERAL MEDICAL AND SURGICAL EXAMINATION

Impression given by (a) Physique...athletic, overweight(b) Mentality.....a,ert
 Body Marks, Scars, Deformities.....small scar above left ankle; scar over left thenar
 Size of Thyroid Gland.....normal.....eminence
 Surgical Abnormalities.....none
 Results of Wounds, Injuries, Operations.....none

	Date 12.11.40	Assessing Room	Date 8.4.41	Assessing Room	Date	Assessing Room	REMARKS ON ANY ABNORMALITIES FOUND
Height (ins.)	69		69	70			Date.....
Weight (lbs.)	206		197	199			
Chest Circumference (ins.)			42-3 $\frac{3}{4}$	41			
Body Build (lbs.)	62		53	51			
LEG LENGTH (ins.)	-		40	42			
Pulse Rate {							
Sitting	60		62	52			
Standing 1st	84		84	84			
Standing 2nd	60		60	60			
After Exercise	108		84	84			
Time to Normal	35 secs.		15	25			
Arterial Walls	N		elastic	Soft			
Blood Pressure {							
Systolic	135		140	124			
Diastolic	80		80	74			
Heart {							
Size	N		N	N			
Sounds	N		N	Clear			
Rhythm	N		good	Reg			
Lungs	N		N	Clear			Date.....
Breath held	59 secs.		60				
Expiratory Force	200		180				
Vital Capacity (Best of 5)	N		-				
Reflexes {							
Knee	N		N				
Ankle	N		N				
Triceps	N		N				
Abdominal	N		N				
Plantar	flex.		N				
Cranial Nerves	N		Aff N				
Balancing Rod	R. L. 1s 1s	R. L.	R. L. 1s 1s	R. L.	R. L.	R. L.	Date.....
Self Balancing	R. L. 1s 1s	R. L.	R. L. 1s 1s	R. L.	R. L.	R. L.	
Tremors {							
Fingers	none		none				
Eyelids	none		c.t.				
Abdomen {							
Liver	N		N	N.P.			
Spleen	N		N	N.P.			
Muscular Tone	good		good	good			
Urine {							
Albumen	neg.		N	neg			
Sugar	neg.		N	neg			
Initials of M.O.	JFA		E.g.R.				

40 mm. Hg. Test Nov. 12/40 50 secs. 81111,101010,1077,6
 Date 8.4.41 7/788,999,874 - 45
 Date 10-7-41 - 65 - 6/698,665, 5-4-7, 4-4-4, 4
 Date
 Date

Remarks by Consultant. Passed testssatisfactorily.
 Overweight but fit, and should make good pilot. Alert & intelligent. JF Avery
 Lieut. RCAMC

8.4.41 Reduction in wt. 9 lbs.

Fit - some improvement in 40 mm. test - Fit W.G. Boyle

10-7-41 - Pulse slow but steady. Tests good. About 51 lb. over-weight. 7' it overweight, appears to be good type E.g.R

EYE EXAMINATION

History.....	nil	nil	
Visual Acuity	{ R. 20/15 , 2.25 = 20/200 L. 20/15 , 2.25 = 20/200	20/20 - 2.25 - 20/200 20/20 - 2.25 - 20/200	<i>W</i> <i>W</i> <i>W</i> <i>W</i>
Colour Vision	Normal	orthophoria	<i>N. Est.</i>
Red, Green	ortho.		<i>N. Est.</i>
Diaphragm Test (P.D. = ...)	65 bar. 4&5. exo 1	65 bar. at 4. exo 1	
Convergence	{ C. = 6 1/2 cms. S. C. = 9 1/2 cms.	6 7	6 9
Accommodation	{ R. 8 L. 8	8 8	1.0 1.0
Cover Test	fixed	fixed	<i>st. dir. P.R.</i>
Fundi and Media	N	N	
Fields	full	full	<i>N</i>
Remarks:			
	Fit	AlB A3B	
	Initials of M.O. JJP	Initials of M.O.	Initials of M.O. <i>W</i>
	Date 12-11-40	Date 8-4-41	Date 10.7.41

EXAMINATION OF EAR, NOSE AND THROAT

History.....	nil	nil	
Hearing	{ R. Ear..... w.v. 20 L. Ear..... w.v. 20	w.v. 20 w.v. 20	<i>W.V. 20</i> <i>W.V. 20</i>
External Ear, Meatus Membranes	{ R. Ear..... normal L. Ear..... N	N N	<i>N</i> <i>N</i>
Middle Ear, Eustachian Tubes	{ R. Ear..... patent L. Ear..... patent	patent patent	<i>N</i> <i>N</i>
Cochlear Apparatus	{ R. Ear..... N L. Ear..... N	N N	<i>N</i> <i>N</i>
Vestibular Apparatus	{ R. Ear..... N L. Ear..... N	N (R) N (R)	<i>N</i> <i>N</i>
Buccal Cavity	M. good	good	<i>N</i>
Teeth	good	good	<i>N</i>
Gums	good	healthy	<i>N</i>
Pharynx	N	N	<i>N</i>
Nasopharynx	N	N	<i>N</i>
Nose	N	N	<i>N</i>
Larynx	N	N	<i>N</i>
Remarks:		fit	
	fit	Initials of M.O. JJP	Initials of M.O. <i>W</i>
	Date 12-11-40	Date 8-4-41	Date 10.7.41

HISTORY OF PRESENT CONDITION

Date..... Nov. 12/40.....

History good.

E.E.N.T. normal.

Passed all tests.

Overweight. Must lose at least 6 lbs. before acceptable as a pilot.

AtB

JF Avery Lieut RCAMC

Nov. 20/40

Weight 197 lbs. Now fit for pilot.

Category A1B

JF Avery F/O

8.4.41

Physical recheck o.k. - wt. 197 lbs.

Some improvement in 40 mm. Test. - Fit.

A1B

W. G. Boyle F/O
W.G. Boyle F/O
PRESIDENT MEDICAL BOARD

10-7-41

P Impicably fit overweight. appears to be good type

A1B.

S. Ryan F/O

OBSERVATIONS AND FINDINGS BY PRESIDENT OF BOARD

Date.....

APPROVED

CATEGORY.....

W. H. Kemp.....F/Lt.

Pres. No.4 Med. Sel. Board.

DATE - 23-7-41.

ROYAL CANADIAN AIR FORCE

R.C.A.F. R. 45
30M-4-41 (168)
H.Q. 1062-2-126

Individual Record of Flying

Forer

RANK..... **No.**..... **NAME**.....

[illegible]

ROYAL CANADIAN AIR FORCE

RECORD OF CHARACTER, TRADE PROFICIENCY AND PROMOTION
OF

No. R.100381 Rank Sergeant Pilot Name Poirier, J.A.R.

1. Date of enlistment 9-4-41
2. Trade classification Airman Pilot
3. Married or single Single
4. Assessment of character Very Good
(Vide Para. 415 K.R. and O. for R.C.A.F.)
5. Assessment of trade proficiency Superior
(Vide Para. 416 K.R. and O. for R.C.A.F.)

6. Outstanding features of an airman's work in his trade:— <u>Good judgment, ability to think for himself.</u>	7. Specializes in his trade in:— <u>Navigation and Instrument Flying</u>	8. Promotion:— (a) Accelerated <u>x</u> (b) Ordinary (c) Retard Remarks: <u>Good capable type</u>
---	---	---

9. Capabilities other than trade classification:— <u>Bi-lingual</u>	10. Outstanding in:— <u>Sports</u>	11. Recommendations:— <u>Suitable for Commissioned Rank</u>
--	---	--

12.

13. Initials of airman reported on

14. Date 31-12-41

Initials of Flight Commander or other person who originated the Document.

W.E. Kennedy Wg. Comdr. C.O.
(W.E. Kennedy) (Signature)
Commanding Officer
(Appointment)
No. 15 S.F.T.S., Claresholm, Alberta.
(Unit)

[OVER]

REPORT ON FLYING ABILITY OF AIRMAN PILOT FOR YEAR 19.....

No. R.100381.....Rank Sergeant Pilot.....Name Poirier, J.A.R......

1. Date of remustering as pilot.....9-4-41......

2. Ability in flying duties.....A.A. (Pupil Pilot).....
(To be assessed in accordance with Administrative Order A.51/1)

3. Total number of hours flown from January 1st to date:

(i) As pilot.....165 (approx) Dual and Solo.....

(ii) Dual instructor.....Nil.....

(iii) As passenger.....10.....

4. Total number of hours flown to date:

(i) As pilot.....165.....

(ii) Dual instructor.....Nil.....

(iii) As passenger.....10.....

5. Types of aircraft on which proficient:

Tiger Moth, Avro Anson.....

6. Flying instructor.....No.....Category.....N.A......

7. Whether recommended for flying instructor's course.....No......

8. Whether recommended for any special employment.....G.R. Boat.....

9. Courses undertaken.....I.T.S., E.F.T.S., S.F.T.S......

10. Type of work carried out as pilot during year.....Pupil S.E. & T.E......

11. Additional qualifications as pilot, i.e., Photographic, Test, Operational, etc.....

Nil......

12. Remarks by Commanding Officer.....

Date.....31-12-41.....

Wg. Comdr C.O.
(W.E. Kenndey) (Signature)

13. Initials of Flt. Comdr. or other person who
originated the document.....W.E.K......

Commanding Officer
(Appointment)

No. 15 S.F.T.S., Claresholm, Alberta.
(Unit)

14. Initials of airman reported on.....

Date.....31.12.41.....

PART 11

ELEMENTARY TRAINING

1. No...18.....E.F.T.S. Course No...34.....From...27-7-41....To...13-9-41.....
2. Flying Time:--

FLYING TRAINING

Aircraft	Total Dual	Total Solo	Instrument Flying	Passenger	Total	Link Trainer
...Tiger Moth...	28:10	26:05	5:35		54:15	10:00

3. Results of Flying Tests--20 hour..68.5%Final Test...77.....% Instr. Fly..70...%

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

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

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

.....A student of better than average flying ability. Has sound idea of flying

.....good airsense and judgment. No outstanding faults. Should do very well at

.....Service.....

7. GROUND TRAINING

Subject	Maximum Marks	Marks Obtained	Subject	Maximum Marks	Marks Obtained
Airmanship	200	..108...	Th. of Flight.....	10056...
Airframes	100	...65...	Air Nav.....	200126...
Aero Engines	100	...64...	Arm. (Oral).....	200160...
Signals(Prac.)	10090..	Quals. as an Officer	20086...

Maximum Marks 1200. Marks Obtained....755.....Percentage...63...%

Pass or Fail...Pass.....Position in Class...39.....No. in Class...54.....

8. Commissioned Rank (appears suitable or unsuitable).....Unsuitable
9. General Remarks (Ability, Conduct, etc.)...Not consistently satisfactory in G.I.S.
-appears surly at times and inclined to lack application. Attitude and conduct
-have been fair.. but with further experience should develop into satisfactory
-N.C.Q. material.....

Chief Ground Instructor

Date.....9-9-41.....

Sqn. Leader.
Chief Supervisory Officer

No.....18.....E.F.T.S. Boundary Bay.. B.C.

Date.....9-9-41.....

To be passed to No...15.....S. F. T. S.
Clareholm, Alta.

ROYAL CANADIAN AIR FORCE
REPORT ON PUPIL PILOT--FLYING AND GROUND TRAINING

Surname....Poirier.....Christian Names....Joseph Alfred Raymond.....
Number.....R1QQ383.....Rank.....AC2.....

INSTRUCTIONS

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

PART 1

INITIAL TRAINING

1. No.....4.....I.T.S. Course No.....29.....From.....21-6-41.....To.....26-7-41.....

2. Results of Examinations:--

				Maximum Marks	Marks Obtained
Subject	Maximum Marks	Marks Obtained	Subject	Maximum Marks	Marks Obtained
Mathmatics....	100	83	Hygiene & Sanitation	40	26
Armament (P.& O).. <td>100</td> <td>89</td> <td>Drill.....</td> <td>100</td> <td>87</td>	100	89	Drill.....	100	87
Signals.....	100	100	Law and Disc., etc..	60	59

3. Maximum Marks 500. Marks Obtained.....444.....Percentage.....89.....

4. Passed or Failed...passed.....Position in Class.....11.....No. in Pilot's Class.....183.....

5. Considered Suitable For Commissioned Rank.

6. Recommended for training as : (a) Pilot.....yes.....
(b) Air Observer.....
(c)

7. Remarks.....Visual Link -- 85% Posted to No. 18 E.F.T.S. 26-7-41.....

.....Almost direct from school...Some experience...Boat operator...Lake of the Woods...Neat and methodical in work. Active in sports. N.P.A.M. infantry and artillery. - 1935. - 1940...CARTC 8 months...Sergeant instructor.....

.....[Signature].....Wg. Comdr.
Commanding Officer

Medical Category ALB

No.....4.....I. T. S. Edmonton, Alta.
Date.....21-7-41.....

To be passed to No....18....E.F.T.S.

Can.
UxxK Trainee
~~ANS~~
~~NxxZx~~

NOTE: X out Countries
not applicable.

SERVICE AND CASUALTY FORM

PART I (For all ranks)

M.F.M. 4 (Part I)
A.F.B. 103 (Part I)
500M-8-39 (1700)
H.Q. 1772-45-18

Unit.....100th Canadian Militia Training Centre.....

Regimental Number H. 414004

1. Surname..... <u>Poirier</u> 2. Christian Names..... <u>Alfred Raymond</u> 3. *Substantive Rank and Appointment..... <u>PRIVATE</u> *Acting Temporary or Local Rank..... <u>A/ SARGEANT</u> giving date..... <u>2/9/40</u> *To be entered in pencil to facilitate alteration.		(17) Regiment or Corps		Unit (Battn., etc)	
4. Place of birth..... <u>Kenora, Ont. Canada</u> 5. Date of birth as declared on attestation..... <u>25 Nov. 1920</u> (A).....		(18) Medical.....			
6. Date of enlistment..... <u>2-9-40</u> 7. Place of enlistment..... <u>Winnipeg, Manitoba</u> 8. Residence at time of enlistment..... <u>212-2 St. North, Kenora, Ontario</u> 9. (B) Special conditions (if any) of enlistment or rate of pay.....		Category	Date	Authority	
10. (C) Any subsequent variations of conditions of service.....		<u>A</u>	<u>2-9-40</u>	<u>Med. Board</u>	
11. Religion..... <u>Roman Catholic</u> 12. If married, state date..... <u>N/A</u> 13. Trade on enlistment..... <u>Clerk</u> 14. Corps, trade and grade..... 15. (D) Qualifications..... 16. (E) Miscellaneous entries.....		(19) Next of kin (entries to be made in pencil)..... <u>MR. AIME POIRIER (FATHER)</u> <u>212 2ND STREET, KENORA, ONTARIO</u>			
		(20) E.....			
		(21) E.....			
		(22) E.....			

NOTES—

- (A) Here enter particulars of any subsequent claim as to actual age after verification of birth certificate.
- (B) Whether for home service only, enlisted at special rates of pay, etc.
- (C) If to be retained on home service, period if specified to be stated; also authority and on what grounds: see (A) above.
- (D) Signaller, Farrier, etc.
- (E) Instructions regarding allotment of these sub-heads will be made as may be necessary after mobilization.

C.A.S.F. & R.C.A.F.

CANADA

LAST PAY CERTIFICATE

Regtl. No. H 414004 Rank and Name Sargeant POIRIER, Alfred Raymond
of 100th C.A.(R) Basic Trg. Centre Regiment, etc., on 16th Medium Battery
(Transfer, Posting or Discharge) Transfer to R.C.A.(CA(R)) on 7-4-41 194
Ceases to be on Command (Unit and Station)
Reason for discharge on return to Reserve unit for Authority: D.O. 80 d/ 7-4-41
the purpose of joining the R.C.A.F.

On TRANSFER OF OFFICER or WARRANT OFFICER, Class I

Outfit allowance of \$ N/A has been paid by the Treasury Officer, Military District
No. N/A or N/A Air Command.

REMARKS:

- State (1) Date of appointment or enlistment 2nd September, 1940
(2) If individual has dependents eligible for Dependents Allowance, has application been submitted? N/A
(3) Has assignment of pay been made? Yes If so, amount \$40.00 effective date 1-10-40
(4) In the case of Officers in receipt of a Service (P. F.) Pension state monthly deduction \$ N/A

The folowing is a statement of the account of the above named from 1-4-41 to 7-4-1941 the inclusive date of transfer, posting or discharge.

DR.		CR.	
PARTICULARS	AMOUNT	PARTICULARS	AMOUNT
Balance Dr. from last account	N11	Balance Cr. from last account	N11
First Monthly Payment	N11	Regimental Pay <u>7</u> days at <u>\$2.20</u>	15 40
Casual Payments	N11	Trademen's Pay days at\$.	N11
Payment on Transfer, Posting or Discharge.	6 05	Additional Pay (Give particulars) days at\$.	N11
Assigned Pay <u>7/30 of 30 Days</u>	9 35	Allowances (Give particulars)days at\$.	N11
Regimental Charges	N11		
Public Stoppages (Give particulars):	N11		
To Balance Cr. (To be paid by new unit)	N11	By Balance Dr. (To be deducted by new unit)	N11
Total	15 40	Total	15 40

I certify that the above is a true and correct statement of the account of the above named on transfer, posting or discharge.

Portage la Prairie, Manitoba.
(Place)
7th April, 1941.
(Date)

H. Hartland Stevens Lieut.
H. Hartland Stevens Paymaster.
100th C.A.(R) Basic Training Centre

Sheet No. 2

M.F.M. 1 & 2 (a)
700 M-8-39 (1697)
H.Q. 1772-45-18

[illegible]

Rank.....A/Sgt.....

Sheet No. 2

Name. POIRIER, Alfred Raymond

M.F.M. 1 & 2 (a)
700 M-8-39 (1697)
H.Q. 1772-45-18

[illegible]

ORIGINAL
DUPLICATE
TRIPLICATE

M.F.M. 2
A.F.B. 271
450M-5-40 (5237)
H.Q. 1772-39-1045

(To be completed in triplicate. Copy designation to be shown by striking out terms not applicable.)

Unit 100th CANADIAN MILITIA TRAINING CENTRE Regimental Number H. 414004

CANADIAN ACTIVE SERVICE FORCE ATTESTATION PAPER

1. Surname..... POIRIER
2. Christian Names..... ALFRED RAYMOND
3. Present address..... 212 2nd St. North. Kenora Ontario
4. Date of birth..... 25th Nov. 1920
5. Place of birth..... Kenora Ontario Kenora
(Country) (County or Province) (Town or Township)
6. Religion (state denomination)..... ROMAN CATHOLIC
7. Trade or Calling..... CLERK
8. Married, Widower or Single..... SINGLE
9. Name of next of kin..... Aime POIRIER
10. Relationship..... Father
11. Address of next of kin..... 212 2nd St. North. Kenora Ontario
12. Do you belong to, or have you served in the Active Militia of Canada?.....
16th Medium Battery. Kenora Ont.
(If Yes, Give Unit and Dates of Service)
13. Have you served in (a) The Canadian Active Service Force?..... no
(If Yes, Give Regimental No. and Unit) (Yes or No)
(b) Any other Naval, Military, or Air Force?..... no
(Yes or No) (If Yes, specify Unit and Period of Service)
14. Did you serve during the Great War 1914-1918?..... no
(If Yes, specify Regimental No., Unit and Dates of Service)

DECLARATION TO BE MADE BY MAN ON ATTESTATION

I, do solemnly declare that the above particulars are true, and I hereby engage to serve in the Canadian Active Service Force so long as an emergency, i.e., war, invasion, riot or insurrection, real or apprehended, exists, and for the period of demobilization after said emergency ceases to exist, and in any event for a period of not less than one year, provided His Majesty should so require my services.

Date..... (Signature of recruit)

OATH TO BE TAKEN BY MAN ON ATTESTATION

I, do sincerely promise and swear (or solemnly declare) that I will be faithful and bear true allegiance to His Majesty.
(Signature of Recruit)

CERTIFICATE OF MAGISTRATE, JUSTICE OF THE PEACE OR 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..... this..... day of..... 19.....

..... {Signature of Magistrate, Justice
or Attesting Officer.
..... {Office or Rank and Unit
or appointment.

N.B.—ATTENTION IS DRAWN TO THE FACT THAT ANY PERSON MAKING A FALSE ANSWER TO ANY OF THE ABOVE QUESTIONS IS LIABLE TO A PENALTY OF SIX MONTHS' IMPRISONMENT

Called out under G.O. 139/39

Record of Service of

POIRIER

(Surname)

ALFRED RAYMONS

(Christian Names)

Regimental Number H. 414004

QUALIFICATIONS

EDUCATIONAL QUALIFICATIONS

Military *Sergeant (Artillery)*Business or Professional *None*Trade or Civil *Clerk*Technical *None*Languages *English*

High School

or

Collegiate

4 years
(years completed)

Graduation

or

Matriculation

Graduated
(specify)

*College

None

*University

None

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

All enlisted personnel will be taken on as Private soldiers, appointments and promotions to higher rank to be shown as provided in the space below.

Report		Record of Promotions, Reductions, Transfers, Casualties, Reports, etc., from date taken on Strength of Field Force	Rank Shown	Effective Date	Unit	Place	Authority	
Date	From whom received						Part II D.O. No. Cas. List, etc.	Dated
		Joined on appointment						
		100th Canadian Militia Training Centre						
		Attached to the 100th C.M.T.C. for all purposes	Pte.	2-9-40	100th C.M.T.C.	PORTAGE LA PRAIRIE	Part 11 # 3	8-9-40
		Promoted to the rank of A/Sgt.	A/Sgt.	2-9-40	100 NPAMTC	Portage la Prairie	#3 Page 2	8-9-40
		Authorized to draw subsistence allowance .85¢ per diem.	A/Sgt.	2/9/40	100 CMTC	Portage la Prairie	Page 2. No. 3	8/9/40
		Ceases to draw subsistence allowance of .85¢ per diem.	A/Sgt.	7-10-40	100 CMTC	Portage la Prairie	Page 2, No. 27	7-10-40
		Admitted to Training Centre Hospital	A/Sgt.	14-1-41	100 CA(R)TC	Portage la Prairie	No. 12	16-1-41
		Discharged from Training Centre Hospital	A/Sgt.	20-1-41	100 CA(R)TC	Portage la Prairie	No. 16	21-1-41
		Admitted to Training Centre Hospital	A/Sgt.	9-2-41	100 CA(R)TC	Portage la Prairie	No. 32	10-2-41
		Discharged from Training Centre Hospital	A/Sgt.	10-2-41	100 CA(R)TC	Portage la Prairie	No. 33	11-2-41
		Granted furlough, 3-3-41 to 16-3-41	A/Sgt.	3-3-41	100 CA(R)TC	Portage la Prairie	Part 11, No. 48	1-3-41

For additional entries use M.F.M. 1 and 2 (a)

CERTIFICATE OF MEDICAL EXAMINATION

Name in full Alfred Raymond Poirier Date 2-9-40

Part 1. Information obtained from the recruit.

1. Age 19
2. Have you ever suffered from any of the following diseases?
 - a. Rheumatism no
 - b. Tuberculosis no
 - c. Bronchitis or asthma no
 - d. Heart disease no
 - e. Kidney or bladder disease no
 - f. Gastro-intestinal no
 - g. Rupture no
 - h. Varicose veins no
 - i. Flat or deformed feet no
 - j. Nasal trouble no
 - k. Ear disease no
 - l. Eye disease no
 - m. Epilepsy no
 - n. Nervous or mental disease no
 - o. Syphilis no
 - p. Gonorrhoea no
 - q. Have you ever worn glasses? no
 - r. Are you now or have you in the past received disability pension or compensation? If so, give details no

Alfred Poirier
Signature of Applicant

nil

Part 2. Information obtained by medical examination. The recruit must be stripped.

1. Identification marks or scars. (If operative obtain history.)
Not vacc. Scar left thumb.
2. Height 5 feet 9½ inches.
3. Weight 204 pounds.
4. Complexion Medium Eyes Blue
5. Development Good. Good Fair Poor
- Hair Brown
6. Chest measurement—Girth on full expansion 41 inches.
Range of expansion 3 inches.
7. Vision, right 20/20 left 20/20
8. Hearing, right W.V. 20 left W.V. 20
9. Condition of mouth and teeth Good.
10. The abnormalities (congenital and pathological) found on examination are as follows.
nil

Part 3. We, the examiners find no evidence of the diseases mentioned in Question 2, Part 1, except as reported in the remarks. We have examined the Recruit in accordance with the pamphlet "Physical standards and Instructions for the medical examination of recruits" and he is found fit for Category "A"
Special remarks when category lower than A.

J.T. Stirling President Lt.-Col. H.W. Wadge Member Major A.J. Swan Member Major
VACCINATIONS, INOCULATIONS, BOARDS, RECLASSIFICATION OF MEDICAL CATEGORY

Date	Brief details and signature	Date	Brief details and signature
Reexamined, Normal Urine, Ears, Reflexes, etc.			
2-9-40	<u>J.T. Stirling</u> <u>LT COL</u>		
5-9-40	<u>KRAY CHEST NEG.</u> <u>Spaworth Capt</u>		
6-1-41	<u>VACC. TAB ½ cc</u> <u>Spaworth Capt</u>		
14-1-41	<u>TAB ½ cc TET 1 cc</u> <u>Spaworth Capt</u>		
25-2-41	<u>T.A.D. 1 cc</u> <u>Spaworth Capt</u>		
25/3/41	<u>Transferred to Active Res. category</u>		
4.4.41	<u>unchanged</u> <u>Spaworth Capt</u>		
	<u>T.E.T. 1 cc</u> <u>Ch Riddell Capt</u>		

Regtl. No. H. 414004

Private

Poirier

Alfred Raymond

Rank

Surname

Christian Name.

[illegible]

For additional entries use M.F.M. 1 and 2 (b)

For Discharge read:-
Ceasing to be on Command

M.F.M. 23
33M-8-40 (0385-6)
H.Q. 1772-39-1677

CANADIAN ACTIVE SERVICE FORCE
PROCEEDINGS ON DISCHARGE

(These proceedings should be accompanied by the documents specified on fourth page)

Regimental No. H414004	Rank A/Sgt.
Surname POIRIER	
Christian name Alfred Raymond <small>NOTE.—The name must agree strictly with that on enlistment unless changed subsequently by authority.</small>	
Unit or Corps 16th. Medium Battery, R.C.A. attached to the 100th.C.A.(R) Training Centre.	
Date of discharge 7th. April, 1941	
Place of discharge Portage la Prairie, Man.	Mil. Dist. No.10
1. DESCRIPTION AT DATE OF DISCHARGE	
Age 20 years 4 months	Descriptive marks Scar left thumb
Height 5 feet 9 1/4 inches	
Complexion Medium	
Eyes Blue	
Hair Brown	
Trade Clerk	
Intended place of residence } <small>(To be given as fully as practicable; i.e., mailing address)</small>	212 Second Street, North Kenora <small>Street and Number P.O., City or Town, etc.</small>
Province Ontario	
2. The above-named man is discharged in consequence of ceasing to be on Command on return to his original unit, for the purpose of joining the Royal Canadian Air Force Authority for discharge..... <small>N.B.—The cause of discharge must be worded in accordance with C.A.S.F. Routine Orders as may be published. If discharged by superior authority, the number and date of the letter to be quoted.</small>	
To be in the handwriting of the Commanding Officer, who will himself make identical entries on the discharge certificate and initial them.	3. Conduct while in the service has been, according to the records, etc. Good <small>N.B.—See K.R. Can. 385. This will be assessed when practicable, by the Commanding Officer, in the presence of the soldier and the Officer Commanding his Squadron, Battery or Company.</small>
	4. Special qualifications for employment in civil life. (Vide 384, K.R. Can.) Clerk

(OVER)

5. He is in possession of the following number of G.C. Badges:

5A. Service Button (Class and number.....)
(If and when authorized)

No reference to G.C. Badges is to be made on either the discharge or character certificate.

6. Medals and Decorations.....

To be copied by the Commanding Officer on to the permanent Discharge Certificate.

7. I have impartially enquired into all matters concerning this soldier's discharge brought before me in accordance with Regulations.

(Place) Portage la Prairie..... Tracelund Lt.-Colonel

(Date) 9th. April, 1941..... Commanding 100th. C.A. (R) T.C.

8. Certificate to be signed by the Soldier on Discharge

I hereby acknowledge that I received all my Pay, Allowances, and Clothing, and all just demands, up to the present date, subject to the reservations of the claims noted on the third page, and that I have received my permanent discharge certificate.

(Place) Portage la Prairie, Man. A.R. Parier (Signature of Soldier)

(Date) 7th. April, 1941 V. Sautland (Signature of Witness)

When a soldier is absent through illness or any other cause and it is not desirable to forward these proceedings to him for signature, a manuscript copy should be sent for the man to sign, and when returned, should be attached here.

9. Statement of Service

(Date of enlistment—C.A.S.F.) 2nd. September, 1940

(Date of discharge—C.A.S.F.) 7th. April, 1941

(Total Service—C.A.S.F.) Nil years 218 days

10. Confirmation of Discharge

The discharge of the above-named man is hereby confirmed.

(Place) Portage la Prairie, Man. (Signature) Tracelund Lt.-Colonel

(Date) 9th. April, 1941..... Commanding 100th. C.A. (R) T.C.

Reservations referred to at Para. 8

(To be signed by the soldier. When there are none, it is to be so stated, and signed by the soldier.)

NONE

(Date) 7th April, 1941

A.R. Pinner

(Signature of Soldier)

List of Discharge Documents

Field Conduct Sheet (M.F.M. 6).	XXXXXXXXXXXXXXXXXXXXX Form of Will (M.F.M. 10 or 10A).
XXXXXXXXXXXXX Copies of XXXXXXXXXXXXXXXX by XXXXXXXX.	XXXXXXXXXXXXX Copy of Record of Declaration of Court of Inquiry (R.R. Can. 1513).
Casualty Form (M.F.M. 4).	Attestation (Duplicate and Triplicate M.F.M. 2).
Proceedings Medical Board ³ (2 copies).	Particulars of Family (M.F.M. 5).
XXXXXXXXXXXXX Medical Case History Sheet.	Proceedings on Discharge.
Dental History Sheet. 2 Copies	
Last Pay Certificate.	
XXXXXXXXXXXXX Discharge Certificate (M.F.M. 17).	

Documents not accompanying this form should be crossed out.

I hereby certify that the following documents are unobtainable.

.....
Officer Commanding

H.O. 885-T-118

[illegible]

H.Q. 885—R.47A

R.C.A.F., R.47A 15M—10—41 (1040)

VISIBLE RECORDS LIMITED, TORONTO, CANADA

NAME

POIRIER, Joseph Alfred Raymond

No 8050 apt

No.

J9147

T

NEXT
OF
KINMrs Aimee Poirier, 212 - 2nd St North, Kenora
Ont.

RELATION

mother

CHECK ☒
PERSON
TO BE
NOTIFIED

OTHER

1 R 47

RANK

P.O. 5-12-41 (AP&R 213 d/20-12-41) (L 31 d 31 - 1 - 42) (AFRO I/42) (15 SFTS 206/41) ✓

PROMOTION

AND
APPOINT-
MENTHONOURS
AND
AWARDSCOURTS
MARTIAL

R.C.A.F. R.40 SERVICE ROLL DATE AND PLACE

St Charlottetown 6-1-42 ✓

CLASSIFICATION

GENERAL LIST (SR) Pilot 5-12-41 (AP&R 213 d/20-12-41) ✓

GROUND
DUTIES
PER
FORMED

MISCELLANEOUS

STATION	D.R.O. NO.	OTHER AUTHORITY	DATE	CODE	STATION	D.R.O. NO.	OTHER AUTHORITY	DATE	CODE	CODE
155 FTS. Clarendon			5 - 12 - 41	1						
" "	206	181 T.W.		24						1. POSTING ON APPOINTMENT.
" "	206	181	26 - 12 - 41	2	✓					2. POSTING.
5 th Charlotte	5	22	27 - 12 - 41	2	✓					
" "	5	1015	28 - 12 - 41	24						4. COMMAND.
" "	52	5015	28 - 2 - 42	24						5. TEMPORARY DUTY
" "	52	T.W.		24						6. ATTACHMENT.
" "	52	17. Day att. for 24. 17. Day att. for 24.	28 - 3 - 42	24						7. DETACHMENT.
" "	52	1 - 3 - 42	1 - 3 - 42	2	✓					
E.A.C. Halifax	53	Rep	1 - 3 - 42	2	✓					
" "	53	P.A.	1 - 3 - 42	24						
" "	54		3 - 3 - 42	2	✓					9. HOSPITALIZATION.
2 A.N.S. Pennfield Ridge	54	Rep	3 - 3 - 42	2	✓					10. CONFINED TO QUARTERS.
" "	54	P.A.	4 - 3 - 42	24						
										11. LEAVE
										13. ABSENT WITHOUT LEAVE.
										14. SICK LEAVE.
										24. TRAVEL PAY QUARTERS RATIONS.
										20. MISC.

NO.

NAME

J9147

POIRIER, J.A.R.

R

SPECIAL RESERVE

ROYAL CANADIAN AIR FORCE

RECORD OF SERVICE AIRMEN

R-100383
A.F. No.

Poirier
Surname

Joseph Alfred Raymond
Christian Names

Roman Catholic
Religion

born 25. 11. 21 Place Kenora ont Country Canada Citizen of Canada Racial Origin Canadian

ENLISTMENT		CIVIL EDUCATION			PREVIOUS SERVICE
Date	9. 4. 41	High School Entrance	Jr. Mat. yes	Sr. Mat.	16th med. Batt. Kenora ont Sgt 19.9.35 to 7.4.41
At	Winnipeg	Technical School	Corres. Courses		
Term	dur. of war	University			

RANK	DATE	Med. Cat.	Date	CIVIL OCCUPATIONS AND EXPERIENCE
AC-2	9 4 41	A, B, C	6 4 41	clerk - 1 year
LAC	26 7 41			Boatman - 1 year
DRB 181/57	5 12 41			

COURSES AND TRADE TESTS									
Trade	Grp.	%	PorF	Date Rem.	Trade	Grp.	%	PorF	Date Rem.
Pilot	Std		P	9 4 41					
Reg. Airman									
Spec. Grp.				5 12 41					
									DRB 181/41

PARTICULARS OF FAMILY M S D

Wife Maiden Name Present Address (in pencil)

Children	Names	Date of Birth	Place of Birth

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

Mr. Joseph Poirier (father) 212 - 2nd St. Kenora, Ont.

LEAVE			CHARACTER AND TRADE ASSM. HONOURS, AWARDS AND MENTIONS				
FROM	TO	AUTH. AND DESCRIPTION	DATE	CHARACTER	TRADE AND ASSM.	HONOURS AND AWARDS	SIGNATURE
			9. 4. 41	Pilot rot.			
			5-12-41	Awarded			
			31-12-41	Relief Badge			
				Super			

MOVEMENTS AND CASUALTIES							
AUTHORITY	UNIT FROM	UNIT TO	DATE	AUTHORITY	UNIT FROM	UNIT TO	DATE
enlisted RCAF Reg. Cen. mppg		RCAF Reg. Cen. mppg	9. 4. 41				
J.O.S. - DRB #34/41		RCAF Reg. Cen. mppg	9. 4. 41				
S.O.S. - DRB #41/41		RCAF Reg. Cen. mppg	19. 4. 41				
DRB 123	#2 MAN. DEP. BRANDON	#388 SCH. PAULSON	2-5-41				
DRB #	7 (B&G)	4 (TS)	21/6/41				
DRB 30 DRB-47	4 (TS)	4 (TS)	21-7-41				
DRB-66	18 E.F.T.S. BOENBARY Bay	15 E.F.T.S. CLARESHOLD	11-9-41				
DRB 181/41	415 E.F.T.S. DRB 6-12-41			Cancelled. DRB 206			

Discharged
DRO 206 S.O.S. under G.R. (Ais) 392(18)
on appointment to a Commission

ROYAL CANADIAN AIR FORCE

Should this Parchment be Lost or Mislaid no Duplicate of it can be obtained

N.B.—Any person finding this certificate is requested to forward it in an unstamped envelope to the DEPARTMENT OF NATIONAL DEFENCE, OTTAWA, CANADA

Parchment Certificate of Discharge of No. R100383 **(Rank)** Sgt.

(Name) POIRIER, Joseph Alfred Raymond

Born in the County of Kenora

in the Province of Ontario

Attested at Winnipeg, Man. **on the** 9th April 1941

for the period of Duration of War **, at the age of** 21 **years.**

His description is as follows:—

Age 21 years. Height 5 feet 9 ins. Complexion Ruddy

Eyes Blue Hair Brown Trade Pilot

Marks or scars on the face or other parts of the body } Small scar above left ankle

Signature of Man. JAR Poirier

Service towards completion of engagement --- years 241 days.

He is discharged on Dec. 5th, 1941. in consequence of K.R. (Air)

Para 392 (18) on appointment to a commission

Campaigns Nil

Medals and Decorations ---

Discharge confirmed at #15 S.F.T.S. Claresholm, Alta.

Signature. W.E. Kennedy

Date 30-12-41.

B.V.

His conduct and character in the service have been assessed on discharge under K.R.O., R.C.A.F., Para. 415, as:—

Very Good

His qualifications during Air Force service in the trade shown have been assessed under K.R.O., R.C.A.F., Para. 416, as:—

Superior

His qualifications for civil employment in the trades shown are assessed from his Air Force service as:—

Superior Pilot

The man's address on discharge is:—

N.A.

Place...Clareholm, Alta.....

Date...30-12-41.....

W. E. Kennedy
Officer Commanding

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 (NEWFOUNDLAND) Township of _____
If in City, Town or Village _____ Street _____ House No. _____
(Name) (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 POIRIER JOSEPH ALFRED RAYMOND
(Family name) (Given name or names in usual order)

RESIDENCE No. 212 Street 2nd St. North City, Town, Village or Township Kenora Province Ontario
(Residence means usual place of abode. Post Office Address for residents in rural parts not sufficient)

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

8. BIRTHPLACE Ontario
(Province or Country)

9. DATE OF BIRTH November 25th 1921
(Month) (Day) (Year)

10. AGE in { Years 21 Months _____ Days _____ If less than one day old _____
hrs. or _____ min.

OCCUPATION

11. Trade, profession or kind of work as Pilot
spinner, teamster, office clerk, etc.

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

13. Date deceased last worked Oct. 20/43 at this occupation

14. Total years spent in Three this occupation

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

FATHER

16. NAME Poirier, Joseph Anie

17. BIRTHPLACE Manitoba
(Province or Country)

MOTHER

18. MAIDEN NAME Ouellette, Ann Marie

19. BIRTHPLACE Saskatchewan
(Province or Country)

20. Person giving information J. Allan F.H.
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 October 20th 1943
(Month) (Day) (Year)

25. I HEREBY CERTIFY that I attended deceased from: _____
_____ 19 _____ to _____ 19 _____
and last saw h. _____ alive on _____ 19 _____

CAUSE OF DEATH		PHYSICIAN
I. Immediate cause Give disease, injury or complication which caused death, not the mode of dying, such as heart failure, asphyxia, asthenia, etc.	(a) <u>Previously reported missing in flying accident, now for official purposes, presumed dead.</u>	Underline the cause to which death should be charged statistically
Morbid conditions, if any, giving rise to immediate cause (stated in order proceeding backwards from immediate cause).	(b) _____ (c) _____	
II. Other morbid conditions (if important) contributing to death but not causally related to immediate cause.	_____	

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 Date of injury Oct. 20th 1943
(State which)
Manner of injury Presumed killed in flying accident
(transportation flight) (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)

OCCUPATIONAL HISTORY FORM

THIS FORM IS TO BE COMPLETED FOR EACH MEMBER OF THE ARMED FORCES. THE INFORMATION SOUGHT IS FOR THE USE OF GENERAL ADVISORY COMMITTEE ON DEMOBILIZATION AND REHABILITATION, A COMMITTEE SET UP BY THE GOVERNMENT OF CANADA TO STUDY PLANS FOR ESTABLISHING IN INDUSTRIAL LIFE THE MEMBERS OF THE ARMED FORCES, AFTER DISCHARGE. ACCURACY AND COMPLETENESS IN ANSWERING WILL BE OF MUCH HELP TO THE COMMITTEE.

PLEASE READ CAREFULLY THE INSTRUCTIONS GIVEN ON THE INSIDE OF COVER BEFORE COMPLETING FORM

Section A—GENERAL INFORMATION

PLEASE
LEAVE
BLANK

1. (a) Print name in full..... POIRIER JOSEPH. HENRI ED RAYMOND..... (b) Reg'l. No. 59147
2. (a) Arm of service..... R.C.M.F...... (b) Unit..... No 10 Squadron..... (c) Rank..... P/O
3. (a) Date of birth..... 25/11/21..... (b) Have you any dependents?..... No..... (c) Place of residence at time of enlistment..... KEWORA. ONT.
4. (a) Place of enlistment..... Winnipeg..... (b) Date of enlistment..... 9/4/41

Section B—EDUCATION AND TRAINING

5. (a) State age on finally leaving school..... 19..... (b) Were you attending school or college up to the time of enlistment?..... Yes
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.)..... 4 years High School (J.M.)
7. If you attended a university, give name of university and standing or degree secured..... N.A.
8. (a) Did you ever enter upon a trade apprenticeship?..... No..... (b) If so, for what occupation?..... N.A...... (c) Did you finish it?..... No..... (d) If you did not finish it, how long did you serve at it?..... N.A.
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)..... Not Working..... (b) At time of enlistment of what trade union or professional society were you a member?..... N.A.

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?..... No
12. (a) If answer to 11 be "Yes", state exact trade or occupation at which you actually worked..... N.A...... (b) State how long you had worked at this trade or occupation..... N.A.
13. If answer to 11 be "No", state exact trade or occupation for which you feel qualified..... Pilot
14. If you had been employed after leaving school, state when you last worked fairly regularly before enlistment..... N.A.
15. Give details of last employer, if any: Name..... N.A...... Address..... N.A.
16. Nature of employer's business (for instance, "farmer", or "building contractor", or "boot factory", or "iron foundry", or "retail store", etc.)..... N.A.
17. (a) If your last employment was in a business of your own, state nature and address of business..... N.A...... (b) Date of discontinuing it..... N.A.

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..... N.A...... Address..... N.A.
19. Nature of employer's business (for instance, "farmer", or "building contractor", or "boot factory", or "iron foundry", or "retail store", etc.)..... N.A.
20. (a) Your specific occupation..... N.A...... (b) Number of years' experience at this occupation with any employer..... N.A.
21. (a) Did your employer promise definitely to give you employment on discharge?..... N.A...... (b) Did your employer refuse to promise you employment on discharge?..... N.A...... (c) Do you wish to return to your former employment?..... N.A.

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..... N.A...... (b) Where was it located?..... N.A.
23. (a) Number of years engaged in this business..... N.A...... (b) Have you made, or will you make plans to return to the same or a similar business on discharge?..... N.A.

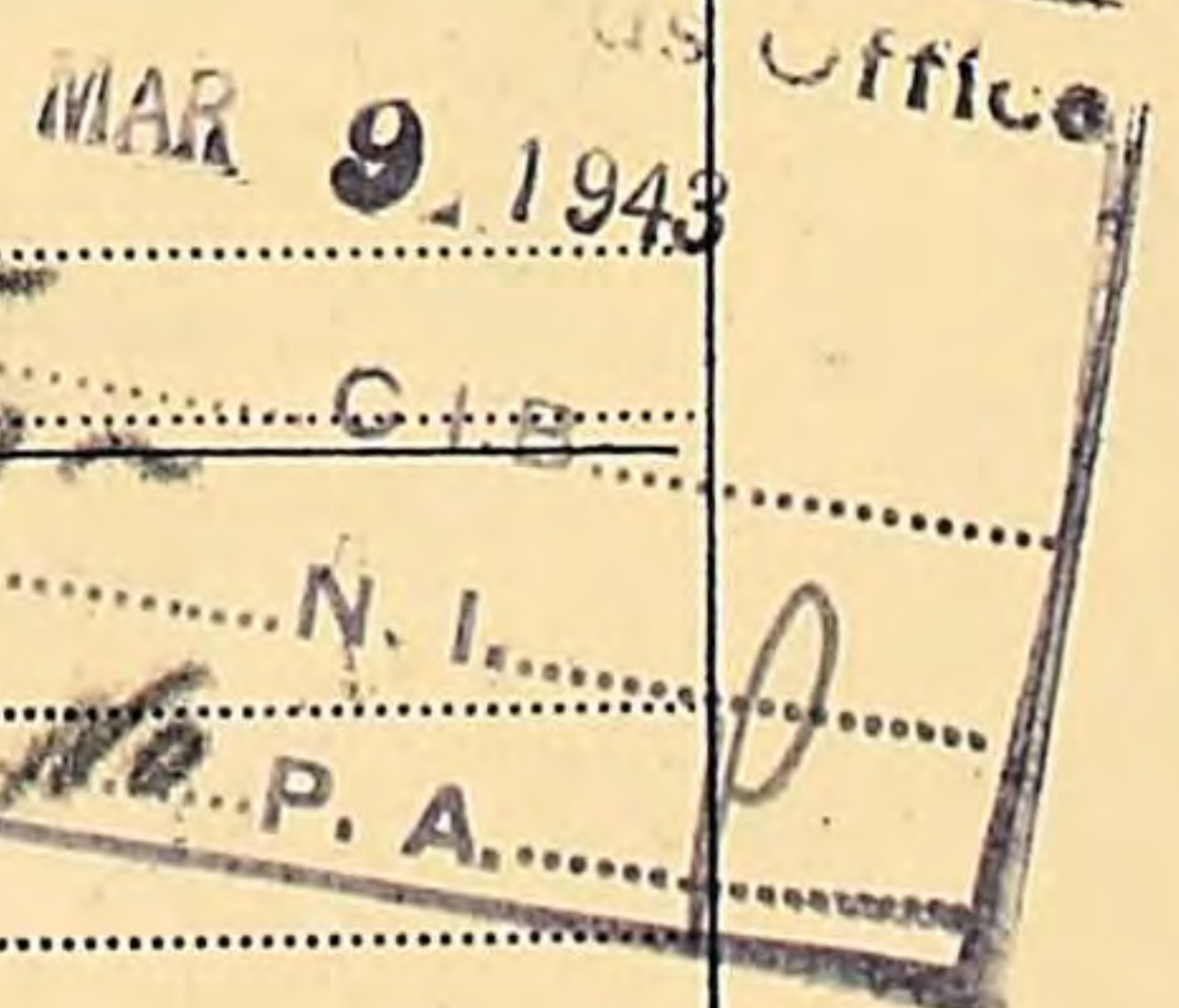
Section F—PARTICULARS OF FARMING EXPERIENCE

24. (a) Do you wish to engage in farming after the war?..... No..... (b) Do you feel competent to operate a farm?..... No..... (c) If so, in what kind of farming?..... N.A.
25. (a) Were you born on a farm?..... No..... (b) How many years' actual farming experience have you had?..... N.A...... (c) In what provinces did you have experience?..... N.A.

Section G—MISCELLANEOUS

26. Have you made any arrangements other than indicated above, for re-establishment in civil life after discharge?..... N.A.
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.)..... N.A.
28. State any employment preference or ambition you may have, other than indicated elsewhere in this form..... Flying

DATE..... 10/2/43..... 194..... SIGNATURE..... JOSEPH POIRIER P.O.



AIR FORCE No. **R-100383**

POSTED TO

SPECIAL RESERVE**RCAF Recruiting Centre,
Winnipeg, Manitoba.**

Quota A 26

TRADE

AC 2 Stan (Aircrew)

Pilot or Observer

ROYAL CANADIAN AIR FORCE**(ATTESTATION PAPER)**

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

1. Surname **POIRIER** FULL Christian Names **JOSEPH ALFRED** **RAYMOND**
2. Present Address **100th W.P.A. W.T.C. Portage la Prie** Telephone **man**
3. Permanent Address **212 2nd St North Kenora Ontario**
4. Place of Birth **Kenora Ontario** Citizenship **Canadian**
5. Date of Birth **November 23rd 1921** Married, Single, Widower, Separated, Divorced **Single**
6. Particulars of Children **none**

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

7. Occupation **Sergeant Instructor** 8. Religion **Roman Catholic** State denomination
9. Languages **English** State proficiency
10. Next of Kin (Full Name) **Joseph Louis Poirier** Relationship **Father**
" Address **212 2nd St North Kenora Ontario**
11. Father (Full Name) **Joseph Louis Poirier** Birthplace **St. Agathe Man.**
" Address **212 2nd St North Kenora Ont.** Citizenship **Canadian**
" Occupation **Railroad Conductor**
12. Mother (Full Maiden Name) **Ann Marie Ouellette** Birthplace **Wolsely Sask.**
" Address **212 2nd St North Kenora Ont.** Citizenship **Canadian**

13. Details of any Naval, Military or Air Force Service:

Unit	Place	Rank	Trade	Date		Reason for discharge
				From	To	
16th Med. Battery Kenora Ont.		Sergeant	R.C.O. i.e. of Signals	1940/3	Apr 7 1941	Discharge granted on being accepted in the R.C.A.F.

14. Honours, Awards, Mentions **None**
15. Are you now on any Naval, Military or Air Force Reserve? **No**
16. Have you previously made application to join the R.C.A.F.? **No** If so, where? **N.A.**
When? **N.A.** Result **N.A.**
17. Were you ever discharged from any branch of His Majesty's Forces as Medically Unfit? **No** Office **Medical Unit**
If so, state nature of disability **N.A.** Rec'd **MAY 1 1941**
18. Have you ever been or are you now in receipt of a Disability Pension? **No** C.I.B. **3/1**
If so, state nature of Disability **N.A.** R.C. **Mar N.I. 62**
19. Have you ever been convicted of an indictable offence? **No** If so, state nature **P.A. N.A.**
20. Are you in debt? **No** If so, state particulars **N.A.**

169-238

21. Particulars of Education:

	Name of school	Date		Courses—Subjects, etc.
		From	To	
Primary Education—Public or Separate School.....	Mount Carmel School	1926	1935	Grade VII
High School—Collegiate Institute, etc.....	Kenora High School	9/36	6/40	Matriculation
Technical School				
University or School other than above.....				
Correspondence Courses, etc.....	Ontario Schools			

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

Employer and place	Duties, trades, positions	Date		Reason for leaving
		From	To	
J. P. Williams Kenora ^{out.}	Hardware Clerk	4/35	9/38	Returned to school.
Western Grocers Ltd. ^{Kenora out.}	Clerk	4/39	9/39	" " "
J. W. Stone Kenora ^{out.}	Boat Driver	5/40	8/40	Attached to His Majesty's Forces under C. A. S. P.
				Regulation & Rate of Pay.

23. Flying Experience (in Hours) Solo None Dual None Passenger 1 hr.24. Special Qualifications, Hobbies, etc., useful to the R.C.A.F. A model airplane builds for 3 years. Qualified in visual and wireless telegraphy (Army). Fair knowledge of map reading & navigation by land and water.25. Sports engaged in. State: extensively, moderately, occasionally Extensively: Baseball, Hockey, Badminton & Tennis. Moderately: Field & Track, volleyball, table tennis & skiing occasionally.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.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
J. C. Ouellette	Western Grocers Kenora ^{out.}	Manager
E. D. Manning	Kenora High School	Principal
E. A. Fletcher Major	100th N.P.F.M.T.C. P.O. ^{Manicota}	Prairie Company Commander

28. Other information that may have any bearing on this application.....
none29. Do you understand that vaccination, re-vaccination and inoculation are compulsory? Yes.

I HEREBY CERTIFY that the foregoing information furnished by me is correct to the best of my knowledge and belief.

Date November 11th 1940Signature A. B. Fairer

FOR OFFICIAL USE ONLY

Report of Interviewing Officer—

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

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

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

(B) Report of Trade Test—

Trade in which tested.....

Result.....

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

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

(C) DECLARATION MADE BY MAN ON ATTESTATION

I,.....JOSEPH ALFRED RAYMOND POIRIER.....do solemnly declare that the foregoing particulars are true, and I hereby engage to serve on active service anywhere in Canada, and also beyond Canada and overseas, in the Royal Canadian Air Force for the duration of the present war, and for the period of demobilization thereafter, and in any event for a period of not less than one year, provided His Majesty should so long require my services.

Date.....APRIL 9th 19 41.....
Signature of Recruit

(D) OATH TAKEN BY MAN ON ATTESTATION

I,.....JOSEPH ALFRED RAYMOND POIRIER.....do sincerely promise and swear (or solemnly declare) that I will be faithful and bear true allegiance to His Majesty.

Date.....APRIL 9th 19 41.....
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.....Winnipeg, Manitoba.....this.....9th.....day of.....April.....19 41..

Signature of Officer
Rank
RCAF RECRUITING CENTRE
WINNIPEG MANITOBA.

FOR OFFICIAL USE ONLY
CERTIFICATE OF MEDICAL EXAMINATION

Part 1. Information obtained from the applicant—

1. Age. 18 2. Have you ever suffered from any of the following defects in health?
- | | |
|--|--|
| (a) Rheumatism..... <u>no</u> | (j) Nasal Trouble..... <u>no</u> |
| (b) Tuberculosis..... <u>no</u> | (k) Ear Disease..... <u>no</u> |
| (c) Bronchitis or Asthma..... <u>no</u> | (l) Eye Disease..... <u>no</u> |
| (d) Heart Disease..... <u>no</u> | (m) Epilepsy..... <u>no</u> |
| (e) Kidney or Bladder Disease..... <u>no</u> | (n) Nervous or Mental Disease..... <u>no</u> |
| (f) Gastro-intestinal..... <u>no</u> | (o) Syphilis..... <u>no</u> |
| (g) Rupture..... <u>no</u> | (p) Gonorrhoea..... <u>no</u> |
| (h) Varicose Veins..... <u>no</u> | (q) Bone Fracture..... <u>no</u> |
| (i) Flat or Deformed Feet..... <u>no</u> | (r) Other Disease or Defect..... <u>no</u> |
3. Have you ever worn glasses?..... no

U. R. Pinner
 Signature of Applicant

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

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

1. Identification marks or scars (if operative obtain history).....
small scar above left ankle. Scar over thenar eminence of left hand.

2. Height..... 5 feet..... 9 inches. 3. Weight..... 206 pounds.

4. Complexion..... ruddy 5. Color of Eyes..... blue Hair..... brown

6. Development { Good overweight
Fair
Poor 7. Chest Measurement—Full expiration..... 38 inches
 Range of expansion..... 3½ inches

8. Hearing—Right w.v. 20 Left w.v. 20 Tympana—Right..... normal Left..... normal

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

10. Condition of mouth and teeth..... satisfactory

11. Urine—Albumen..... neg. Sugar..... neg.

12. Abnormalities (Congenital and Pathological) found on Examination.....

Urinalysis normal - X-ray chest negative - B.P. 135/80 - Normal ishihara

Weight recheck 197 lbs. (8.4.41)

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.....

Date..... Nov. 12 19 40

W. G. Bayle Jr.
 President

S. Adams
 Member

Member

ROYAL CANADIAN AIR FORCE

INTERVIEW REPORT

SPECIAL RESERVE

AGE....18.....
HEIGHT...5'10¹/₂".....
WEIGHT...198.....

SURNAME.....POIRIER.....
CHRISTIAN NAMES.....ALFRED RAYMOND.....
MARRIED.....NO..... NO. OF CHILDREN ...NONE.....

N.F. ADMINISTRATION.....
TECHNICAL.....
EQUIP./ACCTS.....
FLY- GEN.LIST.....
ING PILOT.....X.....
OBSERVER.....X.....
W.O.AIR GUNNER.....

EDUCATIONAL STANDING:- Number of years

High School.4.yrs....Technical.....Commercial.....

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

Standing other Countries.....

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

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

FLYING EXPERIENCE:- Total hours

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

Private " Solo.....Dual.....Passenger.....

No. Hours & Types during last 2 yrs.....

DRESS
Neat.....X.....
ConservativeX.....
Clean.....X.....
Careless.....

PHYSIQUE
Medium....X.....
Heavy set.....
Slender.....

MILITARY AND OTHER TRAINING:-

16th Med. Battery R.C.A. (NPAM) Sgt. Acting Sgt. Major

...Q.Q.Q.H. since October.....

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

SPORTS:- (What branches)

Track and Field Table tennis Skiing
Rugby.Basketball.Curling.Baseball.Hockey.Badminton.Tennis

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

HOBBIES: Model.airplanes.Signals.(Visual & Artillery.wireless)
Map reading and Navigation.

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

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

Military training obvious in this man's demeanor and

carriage...Intelligent..alert.and.athletic... Should

be good material.....

EXCELLENT.....

ABOVE AVERAGE.....

AVERAGE....X.....

BELOW AVERAGE.....

REFERENCES CHECKED--SATISFACTORY
" " --UNSATISFACTORY
" NOT CHECKED.



MARK WITH AN X THE
DESCRIPTION
WHICH APPLIES

CONSIDERED SUITABLE FOR COMMISSIONED RANK?...Possibly.....

BEST FITTED FOR....Pilot.....

DATE 12-11-40

RECRUITING CENTRE Winnipeg

Signature of Officer

A.F.M.5

Kenora High School

E. D. MANNING, B. A., PRINCIPAL

KENORA, ONT.,

September 26, 1940.

The Recruiting Officer,
Lindsay Building,
Winnipeg, Man.

Dear Sir:

This is to certify concerning the school record of Raymond Poirier, who was registered in this school from September 1936 to June 1940. His school record indicates that he has completed the course in Junior Matriculation, less Languages.

During his time at school, he took a very active part in all branches of athletics. In this, he demonstrated sportsmanship, effectiveness and leadership. I can recommend him very highly as a young man of strong character and personality qualities.

Yours very truly,

E. D. Manning

Principal,
Kenora High School.

R.C.A.F. Records Office	
Rec'd	MAY 1 1941
O. K.	<i>SNR</i> C.I.B.
R. C.	<i>MAP</i> N I.
S. L.	<i>DM</i> P A.

PRESIDENT: E. W. T. JONES
VICE-PRESIDENT: V. PEARCE



SECRETARY: M. J. DILGER
100 OSBORNE ST., WINNIPEG
PHONE 45981
TREASURER: H. B. GEORGE
226 BELVEDERE ST., ST. JAMES

Lord Strathcona's Horse (R.C.) Old Comrades' Association

April 8th 1941

To Whom It May Concern.

The bearer ,Raymond Poirier has asked me for a reference with the intention of joining the R.C.AF.

I have known this young man for about eight years and can confidently say he is honest, reliable and most enthusiastic about Army work. As evidence of this, he has been with the R.C.A. for six years and has attained the rank of sergeant.

Yours truly,

A handwritten signature in cursive script, appearing to read "M. J. Dilger". Below the signature is a long horizontal line.

AIR
FORCE ~~R100383~~
No.

POIRIER, JOSEPH ALFRED RAYMOND

ENLISTMENT	RE-ENLISTMENT
PLACE <u>Winnipeg</u>	
DATE <u>9-4-41</u>	

C.R. FILE
NUMBER

JS 147

OFFICER

RECORD OF SERVICE AIRMEN

Comm 5-12-41

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

1. POSTING (INDICATE S.O.S. AND T.O.S.)					2. RECLASS'NS-PROMOTIONS-ETC.					4. TRADE AND CHARACTER					6. LEAVE									
S.O.S. OR T.O.S.	UNIT AND PLACE	EFFECTIVE	D.R.O.		RANK	EFFECTIVE	D.R.O.		TRADE	GROUP	EFFECTIVE	D.R.O.		FROM	TO	DAYS	REMARKS	D.R.O.						
T.O.S.	R/C Innap	9 4 41	24/34		AC 2	9 4 41	24/34		Pilot Obs.	S	9 4 41	24/34		5-6-42	19-6-42	14	annual	188140						
S.O.S.	RCAT Winnipeg	19 4 41	R/C Wpg 41		Lt	26 7 41	4/25/30		Pilot Obs.	S	26 7 41	4/25/30		6-12-41	27-12-41	21	Spc	158746						
T.O.S.	#2 M.D. Brandon	20 4 41	2nd D 94		T Sgt. (PD)	5 12 41	155F-181		92 (SR) Pilot	5	7 12 41	155F-181		11-9-42	24-9-42	14	semi-annual	24/226						
S.O.S.	2nd D Brandon	2 5 41	2nd D 101		P/O CAPR. 2134/41	5 12 41	155F-206/41							11-9-42	24-9-42	14	special	24/229						
T.O.S.	2nd D Brandon	3 5 41	2TC 67		A/F-O. Presby	1 11 42	24/277							31-12-42	5-1-43	5	New Year leave	K 348						
	2 TC (See Para 22)				T. FO (CAPR. 2134/42)	1 10 42	K 28							22-1-43	5-2-43	14	Annual	K 13						
T.O.S.	7 B4 S. Paulson	3 6 41	7B4 89		Y/L (Pres (PD)	1 9 43	24/235							5-2-43	12-2-43	7	Isolation	K 13						
S.O.S.	7 B4 S. Paulson	20 6 41	7B4 822		Y/L (Pres (PD)	1 9 43	24/235							7-6-43	20-6-43	14	semi-annual	24/162						
T.O.S.	4 S. S. Edmonton	21 6 41	4TS 1		Y/L (Pres (PD)	1 9 43	24/235							22-10-43	4-11-43	14	annual	24/282						
S.O.S.	4 S. S. Edmonton	26 7 41	4TS 30															24/256						
T.O.S.	18 EY Boundary Bay	29 7 41	18E 244																					
S.O.S.	18 EF	11 9 41	18E 66																					
T.O.S.	15 S. F. Claresholm	12 9 41	15S 98																					
S.O.S.	155F	26 12 41	155F 181																					
T.O.S.	31 (GR) S. Charlotte	27 12 41	31 5-23																					
S.O.S.	155F	5 12 41	155F 206																					
commissioned					3. MEDICAL HISTORY					TRADE PROFICIENCY					CHARACTER ASSESSMENT					DATE OF R41				
Proc. T. OK1 Proc. T. K. 49					EXAMINATIONS (IN RED INK)																			
Proc. J. D. K. 70, T. D. (un)					DATE FORM CATEGORY REMARKS																			
Missing after air operation					HOSPITALIZATION (IN BLACK INK)																			
					HOSPITAL ADMITTED DISCHARGE D.R.O.																			
					QUARTERS CONFINED RET'N DUTY																			
S.O.S.	1st Bn Charlotte	1 3 42	CH 57																					
T.O.S.	Cac Halifax	2 3 42	EAC 53																					
	WSG Comp	28 9 44																						
S.O.S.	Cac Halifax	3 3 42	EAC 54																					
T.O.S.	2 Ans Pennfield Ridge	4 3 42	2A 1554																					
S.O.S.	2 Ans Pennfield Ridge	15 4 42	2A 1591																					
T.O.S.	10 Sqn Dart to 10 Sqn Paulson	30 4 43	24/119449																					
S.O.S.	10 Sqn Gander	9 9 43	24/221 227																					
T.O.S.	4 RD Scoudouc	10 9 43	4RD 219 222																					
T.O.S.	10 BR Gander	16 7 42	10BR 100																					
T.O.S.	to 4 RD Scoudouc (un)	11 9 43	24/227																					
	Missing	20 10 43																						
	A 82	20 10 43																						
	Presumed to have died	20 10 43	24/184																					
	A D	20 10 43																						
	Comp CAS/WSG	7 7 45																						

AIR
FORCE
No.

R100388

SURNAME

POIRIER, JOSEPH ALFRED RAYMOND

FULL CHRISTIAN NAMES

ENLISTMENT

RE-ENLISTMENT

C.R. FILE
NUMBER

PLACE

DATE

Thiminy
9-4-41

Comm 5-12-41

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

RECORD OF SERVICE AIRMEN

7. BIRTH: DATE PLACE CITIZENSHIP			16. SINGLE-MARRIED-WIDOWER-SEPARATED-DIVORCED: <i>single</i>			21. ENGAGEMENTS													
25-11-21 Kenora, Ontario British (Ireland)			WIFE (FULL MAIDEN NAME)			TERM		EFFECTIVE		D.R.O.		TERM		EFFECTIVE		D.R.O.			
FATHER (FULL NAME) Joseph Amie Poirier			PLACE OF MARRIAGE			Duration		9		4									
BIRTHPLACE St. Agathe, Manitoba			DATE																
MOTHER (FULL MAIDEN NAME) Ann Marie Ouellette			AUTHORITY (IF AFTER ENLISTMENT)																
BIRTHPLACE Wolseley, Saskatchewan			17. MARRIED ESTABLISHMENT																
8. EDUCATIONAL STANDING			REMARKS			RANK		EFFECTIVE		D.R.O.		22. TEMPORARY DUTY AND MISCELLANEOUS ENTRIES							
HIGH SCHOOL ENTRANCE x Ont.												FROM		TO		DATE		D.R.O.	
JUNIOR MATRICULATION x Ont.			18. CHILDREN									with draw pub. & other.				9-4-41		Thiminy	
SENIOR MATRICULATION			CHRISTIAN NAMES BIRTH DATE D.R.O.									Occ. pub. gtr.				12-4-41		2nd 94	
TECHNICAL SCHOOL			CHRISTIAN NAMES BIRTH DATE D.R.O.									Attached for film		27-5-41		788.1			
UNIVERSITY			CHRISTIAN NAMES BIRTH DATE D.R.O.									Rhos. Gtr. Att. 63R. H. for pay & Admin		3-5-41		278.57			
CORRESPONDENCE COURSES			CHRISTIAN NAMES BIRTH DATE D.R.O.									Occ. beat to 2 TC 42 by admin.		9-6-41		378.79			
9. CIVIL OCCUPATIONS OR EXPERIENCE USEFUL TO R.C.A.F.			19. NEXT OF KIN (ADDRESS AND D.R.O. IN PENCIL)									Att. to 4 B. G. (P. K. K. K.)							
Hardware clerk - 3 mos			FULL NAME: Joseph Amie Poirier			RELATIONSHIP		father.				acc. pub. quarters		27-5-41		784.59			
Packer (grocery store) 3 mos			ADDRESS: 212-2nd St. N. Kenora, Ont.			D.R.O.						cross the att. & 2 TC for pay & admin		2-6-41		784.59			
Boat driver 3 mos - J. A. Storer Co. Kenora, Ont.			FULL NAME:			RELATIONSHIP						Occ. Govt. & this drawing film		21-6-41		4.1.1			
			ADDRESS:			D.R.O.						Occ. Govt. gtr. & other gtr.		27-7-41		188.244			
10. PREVIOUS ARMY, NAVY OR AIR FORCE SERVICE			20. PAY ENTRIES (OFFENCE FORFEITURES, STOPPAGES IN RED INK)									Cease: film 19 pub. gtr.		11-9-41		188.66			
Kenora Light Infantry and 10th Medium Battery R.C.A.F.			RATE CHANGES ETC. EFFECTIVE D.R.O.			RATE CHANGES ETC. EFFECTIVE D.R.O.						Occ. Pub. gtr. & draw gtr.		12-9-41		1587.98			
- sergeant - 19-9-35 to 7-4-41.			Allow in lieu of pay 6/4 9/42 7/227									S. L. J. H. C 79814		4-6-42		108.146			
11. HONOURS-AWARDS, MENTIONS			12. FLYING EXPERIENCE ON ENLISTMENT (HOURS)									Serg. Exp. 7 mos 6 mos 3 mos 2 mos 1 mos							
Pilot's Flying Badge			SOLO DUAL PASSENGER									162.45 9.05				29.45		201.35	
13. RELIGION Roman Catholic			14. LANGUAGES English French									P40 H. G. Charlottetown, 6-1-42							
15. SPORTS Rugby, basketball, curling, baseball, hockey, badminton, tennis, field track, volley ball, table tennis, skiing, model airplane building, telegraphy, map reading, navigation on land & water.			23. DOCUMENT CONTROL (INDICATE RECEIPT BY DATE)									2-5-41		✓					