J92200
DECORDOUE
COMTE JACQU

Do not remove documents from this folder. Prepared for digitization project. Ces documents seront numérisés. Ne pas les déplacer.

FORM 6

DOMINION BUREAU OF STATISTICS—QUEBEC DEATH TRANSCRIPT

Do not write in this space

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

Street: | No. | Hospital or Institution:

2. LENGTH OF STAY

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

3. NAME OF DECEASED

Surname: DE CORDOUE (*Block letters*)

Given names: JACQUES FERNAND GABRIEL

Do not write in this space

4. RESIDENCE

Street: Des Erables Street No. 2358

Official name of civil municipality or township: Montreal

Municipal county: Province: Quebec

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

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

10. BIRTHPLACE (Province or Country): Quebec

11. DATE OF BIRTH: June (Month) 13th (Day) 1915 (Year)

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

OCCUPATION

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

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

15. Date deceased last worked at this occupation: Sept.21/44

16. Total years spent in this occupation: Three

	17. NAME	18. BIRTHPLACE (Province or Country)
FATHER	de Cordoue, Huques Fernand Stanislas	France
MOTHER (Maiden Name)	Higgins, Maria Rose	Quebec

19. Place of burial, cremation or removal

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

21. PLACE OF REGISTRATION OF THIS BURIAL

(a) Name of parish or church

(b) Civil municipality of

(c) Municipal county

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

CONFIDENTIAL MEDICAL CERTIFICATE OF DEATH

22. Date of death: September (Month) 21st (Day) 19 44 (Year)

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

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

24. CAUSE OF DEATH

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

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

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

(b)

due to

(c)

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

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

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

(b) Duration of disease....days

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

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

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

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

Accident, suicide or homicide: Accident (State which) Date: Sept.21st 19 44

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

Nature of injury....

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

Signed....M.D.

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

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

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

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

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

(Voir l'autre côté pour le français)

FOR COMPLETION AND RETURN BY

Form P. 64

Mrs. Hugues F.S. Decordoue,

2358 Des Erables Street,

Montreal Quebec.

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

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

and the following number quoted:—

H.Q. J92200

DEPARTMENT OF NATIONAL DEFENCE

ESTATES BRANCH

OTTAWA, ONT.

2 June 1945

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

DECORDOUE Jacques Fernand Gabriel Pilot Officer

J 92200 R.C.A.F. Overseas.

ESTATES
JUL 21 1945
H. Q.
NATIONAL DEFENCE

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.

COPIED
Archives
COPIE

E. Leslie Smith Col.

Director of Estates.

MG/TJM

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

ANSWER IN FULL ALL APPLICABLE QUESTIONS

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

Degrees of Relationship	RELATIVES required to be accounted for		INFORMANT'S STATEMENT		
			NAME IN FULL of any Relative, if any, in each degree specified	Age	ADDRESS IN FULL of each surviving Relative, opposite his or her name, and date of death of each deceased relative
1	Widow of the Deceased.....		~~		
2	Children of the Deceased and dates of their Births.....				
3	Father of the Deceased.....		Hugues F.S. de Cordoüe	56	2358 des Erables Montreal
4	Mother of the Deceased.....		Marie. Rose. Higgins	56	2358 des Erables Montreal
5	Brothers of the Deceased	Full Blood	~		
		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
			~		

COPIED Archives COPIE

ANSWER FULLY EACH QUESTION ON THIS PAGE

PARTICULARS AS TO IDENTITY

8	Full names of the deceased.	Jacques Fernand Gabriel de Cordoüe
9	Date of his birth.	13 Juin. 1915
10	Place and date of his marriage.	———
11	Place and date of his parents' marriage.	11 decembre 1911 à Montreal

PARTICULARS OF DOMICILE

12	Place where deceased was born.	Montreal
13	State, in order, the Province, State and/or County in which he resided before enlistment and the period of time in each.	(a) Quebec (b) Canada (c) (d)
14	Nature of employment before enlistment.	employé Dupuis Freres à Montreal.
15	State whether he owned the premises in which he lived, and, if so, where situated.	———
16	Name place where deceased stated he intended to make his permanent home.	———

PARTICULARS OF ESTATE

17	Did he leave a Will? If in your custody, please forward.	———
18	If married, and domiciled in the Province of Quebec or in a State in the U.S.A. or in a Country under the laws of which there is community of property between spouses,—was there a marriage contract dealing with property?	———
19	Did he have a Bank, Post Office or other deposit account? If so, give name and address of bank, etc., and the amount on deposit. Do you wish it administered with the pay account?	———
20	Amount of War Savings Certificates held by deceased. Indicate where located.	inconnue
21	Amount of Victory Loan Bonds held by deceased. Indicate whether registered or bearer and where located.	inconnue
22	If deceased had life insurance, name companies and amount payable under each policy and the person named as beneficiary therein.	Metropolitaine de Toronto
23	Describe other assets, if any, and estimated value thereof. Use space on page 4 if necessary.	———

COPIED Archives COPIE

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.	inconnue
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.	———

(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

*Son Père ..... 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.

H. de Cordova ..... {Signature of Informant}

2358 des Erables Montreal. ..... Address

CERTIFICATE

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

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 Montreal this 19th day of July 1945

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

Address 2179 Sherbrooke East - Montreal

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

COPIED Archives COPIE

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

Royal Canadian Air Force

CERTIFICATE OF PRESUMPTION OF DEATH

NO. 12407

This is to Certify that

J92200 PILOT OFFICER JACQUES FERNAND GABRIEL DE COURDOUE R.C.A.F.
(Number) (Rank) (Name in Full) (Unit)

has been officially reported as missing since the 21ST day

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

Dated at Ottawa, Canada, this 25TH day of MAY 1945

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

SJ092200 DECORDOUE JACQUES FG POB

1 NUMBER 9 NAME 29 RANK

SERVICE AWARD CARD

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

PREFIX NUMBER NAME RANK CODE

39-45 STAR	ATL. STAR	A/C EUR STAR	AFRICA STAR	PACIFIC STAR	BURMA STAR	ITALY STAR	FR. AND GER. STAR	DEFENCE MEDAL	GEN. SER. MEDAL	C.V.S.M.				
AWARD	✓		✓					✓		✓	✓			
AWARD AND CLASP			✓								✓			
APPLICATION DISPATCHED														
RIBBON ISSUED														
MEDAL ISSUED												29/5/47		

OP WQ

COPIED Archives COPIE

IBM 83961

LICENSED FOR USE UNDER CANADIAN PATENT NUMBER 315306

Mr. + Mrs. Hugue F. S. Decordove
(Parents)

2358 Des Erables St.,

Montreal,

Que.

Nov.-45.

MEMORIAL BAR
DATE DESP
REGN. NO 3446

COPIED
Archives
COPIE

2689 11-3-50

AIR FORCE No. ~~R144751~~ J.92200

DE CORDOUE, JACQUES FERNAND GABRIEL
SURNAME — FULL CHRISTIAN NAMES

ENLISTMENT — PLACE Montreal — DATE 4-12-41
RE-ENLISTMENT

C.R. FILE NUMBER R55

OFFICER RECORD OF SERVICE AIRMEN

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

Comm 20-9-44

7. BIRTH: DATE 13-6-15 — PLACE Montreal — CITIZENSHIP British

FATHER (FULL NAME) Hugues Fernand Henri Jules de Cordoue

BIRTHPLACE France

MOTHER (FULL MAIDEN NAME) Marie Rose Higgins

BIRTHPLACE Montreal

8. EDUCATIONAL STANDING

HIGH SCHOOL ENTRANCE X — Rec.
JUNIOR MATRICULATION
SENIOR MATRICULATION
TECHNICAL SCHOOL 2 yrs drawing course Rec
UNIVERSITY
CORRESPONDENCE COURSES X

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

waiter	2 yrs.
bartender & stockkeeper	8 yrs.

8400

10. PREVIOUS ARMY, NAVY OR AIR FORCE SERVICE

Black Watch 73rd Regt - Mtl - Pte - June 1940 to Dec 1941

R

11. HONOURS-AWARDS, MENTIONS

HONOURS-AWARDS, MENTIONS	AUTHORITY	DATE
Bid C V S. M. Ribbon & M LE	NO-134-192	15-1-44

12. FLYING EXPERIENCE ON ENLISTMENT (HOURS)

SOLO — DUAL — PASSENGER

13. RELIGION R Catholic

14. LANGUAGES French English

3

15. SPORTS swimming hunting boxing

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

WIFE (FULL MAIDEN NAME)
PLACE OF MARRIAGE — DATE
AUTHORITY (IF AFTER ENLISTMENT)

17. MARRIED ESTABLISHMENT

REMARKS	RANK	EFFECTIVE	D.R.O.

18. CHILDREN

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

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

FULL NAME: Hugues de Cordoue — RELATIONSHIP Father
ADDRESS: 2358 Des Crabbes Montreal Que. — D.R.O.
FULL NAME: — RELATIONSHIP
ADDRESS: — D.R.O.

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

RATE CHANGES ETC.	EFFECTIVE	D.R.O.	RATE CHANGES ETC.	EFFECTIVE	D.R.O.

COPIED Archives COPIE

21. ENGAGEMENTS

TERM	EFFECTIVE	D.R.O.	TERM	EFFECTIVE	D.R.O.
Duration	4 12 41				

22. TEMPORARY DUTY AND MISCELLANEOUS ENTRIES

FROM	TO	DATE	D.R.O.
Occ Sub. q trs & drawg dtns		5-12-41	4 M 91
Rep. q trs. & stns		6-1-42	1 M 96
Occ Sent 2 hrs & draw dtns		24-1-42	E 38

Date and Place of Signing R 40.

22.(a) ADDRESS PRIOR TO ENLISTMENT

2358 Des Crabbes Montreal Que

22302

23. DOCUMENT CONTROL (INDICATE RECEIPT BY DATE)

R60	R79	B465	X-RAY	AFM-13	IDN. CARD	
9-12-41	2-3-42	15-1-42				

AIR FORCE No. R144751

DE GORDOUE, JACQUES FERNAND GABRIEL

SURNAME — FULL CHRISTIAN NAMES

ENLISTMENT — RE[redacted]T

PLACE Montreal

DATE 4-12-41

C.R. FIL[redacted] NUMBE[redacted]

J.92200 OFFICER

RECORD OF SERVICE AIRMEN

Comm 20-9-[redacted]4

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

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

Temporary Duty (In Red)

S.O.S. OR T.O.S.	UNIT AND PLACE	EFFECTIVE			D.R.O.
TOS	4MD Quebec	4	12	41	4MD291
SOS	4MD Quebec	5	1	42	4MD5
TOS	1MD Toronto	6	1	42	1MD6
SOS	1MD Toronto	24	1	42	1MD22
TOS	K.T.S. Trenton Ont.	25	1	42	E28
SOS	KTS. Trenton Ont.	14	2	42	E46.
TOS	RCAF Stn Dartmouth, N.S.	15	2	42	K48
S.O.S.	R.C.A.F. Stn, Dartmouth	9	10	42	K282
TOS	9B&G. School, Mont. Joli, P.Q.	10	10	42	9BG274
SOS	9B&G Mont Joli	22	1	43	9B&G339
TOS	#340TU Pennfield Ridge NB.	23	1	43	340TU28
SOS	340TU	27	3	43	340TU714
TOS	1YD	28	3	43	1Y80
SOS	1Y to RAF Trainees Pool	7	4	43	1Y106A

Missing 13 July 43. PCX156 d/15

Safe + Sl. Injured. 13 July 43. PCX515 d/16 July 43.

Missing 21 Sept. 44. PCX259 d/23 Sept. 44 DCL 829

Presumed Dead. 21 Sept. 44. DCL 1077 d/9 May 45.

2. RECLASS'NS-PROMOTIONS-ETC.

RANK	EFFECTIVE			D.R.O.
A Lo2.	4	12	41	4MD291
AC1	4	3	42	K129
7				
LAC	4	6	42	K203
Sgt T/Pd	30	12	42	9B&G339
T/Flt Sgt	30	6	43	GB661
T/WOII (pd)	30	12	43	GB866
T/WO1	30	6	44	GB1057
P/D 20-9-44/AP&R13/22-1-45				AFRO 132/45 GB1245

3. MEDICAL HISTORY

EXAMINATIONS (IN RED INK)

DATE	FORM	CATEGORY	REMARKS

HOSPITALIZATION (IN BLACK INK)

HOSPITAL QUARTERS	ADMITTED CONFINED	DISCHARGE RET'N DUTY	D.R.O.
12-11-41	R100	A4B	
18-8-42	M2	A,BA3B	

4. TRADE AND CHARACTER

TRADE	GROUP	EFFECTIVE			D.R.O.
Tradesman	S	4	12	41	4MD291
Guard	S	24	1	42	1MD22
935 S					
Sec Guard	C	8	6	42	K187
Air Gun	S	30	12	42	9B&G339
Gun off Br Gl		20	9	44	AP&R13/22-1-45

TRADE PROFICIENCY	CHARACTER ASSESSMENT	DATE OF R41

5. COURSES-TESTS-ETC.

SUBJECT	RESULT	DATE			AUTHORITY
Sec Guard C	858	8	6	42	K11

6. LEAVE

FROM	TO	DAYS	REMARKS	D.R.O.
16-6-42	30-6-42	14		K166
5-1-43	23-1-43	19	S.L.	9B&G339
14-3-43	27-3-43	14	P. Emb Law	340TU710

COPIED Archives COPIE

R.C.A.F. OVERSEAS — ENLISTMENT MARTIAL STATUS — PRESENT MARTIAL STATUS — HIGH & TECH. SCHOOL EDUCATION — C. OFF. DAP. — U.C. PRES. R.C. HEB. MIS. OTHER PRO. — RELIGION — PREV. SERV. — PROVINCE OF ENLISTMENT — DISCHARGE — AC

AIR FORCE No. J.92200. ~~R14[redacted]754~~

SURNAME: De Cardonne, FULL CHRISTIAN NAME: Jacques Fernand Gabriel

ENLISTMENT/APPOINTMENT — PLACE: Montreal — DATE: 4-12-41

RELIGION: R.C.

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

Demob. 20.9.44.

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

BIRTH DATE	PLACE	COUNTRY	CITIZENSHIP	RACIAL ORIGIN
12-6-15	Montreal P.Q.	Can	British	

CIVIL EDUCATION

PUBLIC SCHOOL	JUNIOR MATRICULATION
HIGH SCHOOL ENTRANCE X	SENIOR MATRICULATION
TECHNICAL SCHOOL 2 yrs. drawing course	UNIVERSITY
CORR./BUSINESS COURSES	LANGUAGES SPOKEN French

CIVIL OCCUPATIONS AND EXPERIENCE

Storekeeper

PREVIOUS SERVICE

Black Watch 73rd Rgt. Mtl 1st June 1940 to 1941

PLACE AND DATE OF MEDICAL	CATEGORY	PLACE AND DATE OF MEDICAL	CATEGORY
12-11-41	A4B		
18-8-42	A1B A3B		

PARTICULARS OF FAMILY

SINGLE, MARRIED, WIDOWER, DIVORCED: Single

WIFE (FULL MAIDEN NAME) OR HUSBAND:

PRESENT ADDRESS (IN PENCIL):

PLACE OF MARRIAGE: DATE:

AUTHORITY (IF AFTER APPOINTMENT/ENLISTMENT):

COPIED Admin COPIE

CHILDREN

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

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

Hugues de Cardonne father 2358 Des Erables Montreal

EMPLOYMENT AS INSTRUCTOR OFFICER AIRMAN/AIRWOMEN

TYPE	FROM	TO	TYPE	FROM	TO

OFFICERS

RANK, BRANCH AND CATEGORY	DATE	AUTH.	DUTIES PERFORMED DURING SERVICE, E.G. ADJ.
P/O(K)SS.GL. Gunn. Off.	20 9 44	No 245/44	ADRO 132/45

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

AIRMEN AND AIRWOMEN

RANK	DATE	AUTH.	TRADE	DATE	AUTH.
AC 2	4 12 41	4 md 291	Tradesman	4 12 41	4 md 291
AC1	4 3 42	K129	Guard	24 1 42	1 md 22
LAC	4 6 42	K203	Sec Guard C	8 6 42	K187
T Sgt.	30 12 42	DRO 337	Air Gunn	30 12 42	9 BG 329
T/F/Sgt	30 6 43	661/43			
T/WO II	30 12 43	2 Gp 299			
T/WO I	30 6 44	1051/44			

OFFICERS, AIRMEN/AIRWOMEN

COURSE OR TRADE	GRP.	%	PF	DATE
Sec Gd C	2 Can	85	P	8 6 42

ADVISE ENT[illegible]ES
UNIT RECORDS F[illegible]NEL
TO CAN[illegible]A

AIR FORCE No. J. 92200. ~~R. 144751~~

DE CORDOUE, JACQUES FERNAND GABRIEL

SURNAME — FULL CHRISTIAN NAME

ENLISTMENT/APPOINTMENT

PLACE Montreal

DATE 4-12-41

RELIGION R.C.

R.C.A.F. FORM R230

TYPE OF LEAVE

FROM	TO	No. DAYS	DESCRIPTION	AUTH.
26/4/43	2/5/43	8	P/Leave	100/43
1.7.43	3.7.43	3	Prev leave	42 OTU 23/43
20-7-43	26-7-43	7	P.L	42 O.T.U 28/43
16.8.43	29.8.43	14	P.L	42 OTU 35/43
30.8.43	6.9.43	8	Extg P.L.	42 OTU 38/43
7-9-43	11-9-43	5	Prev Leave	42 OTU 43/43
22.11.43	30.11.43	7	P/L	299 Sqn 1/43
24.2.44	1.3.44	7	Prev/L	190 Sqdn 3/44
3.4.44	8.4.44	6	" "	" " 5/44
13.5.44	18.5.44	6	" "	" " 8/44
21.6.44	27.6.44	7	" "	" " 13/44
2.8.44	7.8.44	6	" "	190 Sq 20/44

TYPE OF AIRCRAFT ON WHICH MOST PROFICIENT

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

N/E.U. 1/43

T.O.S. RCAF N/E UNIT. 14/7/43

SERVICE MACHINES FLOWN

ATP

POSTINGS, ATTACHMENTS & TEMPORARY DUTY

SOS TOS	FROM	TO	DATE	AUTHORITY
TOS	340 TU Pennfield Ridge		31 43	
SOS to Overseas			7 4 43	E 632
Disembarked U.K.			17 4 43	E 632
SOS 340 TU to 42 O.T.U.			8 6 43	17/43
F/A Missing from 42 O.T.U.			13 7 43	CR 345
Now Safe				CR 348
AD	Heavy Glider Conv. Unit		16 9 43	HGCU 16/43
CTRA	" " " "		26 9 43	HGCU 18/43
SOS	42 OTU to 297 Sqdn.		26 9 43	297 Sq 15/43
SOS.	297 Sqn to 299 Sqn.		4 11 43	297 Sqn 20/43 299 Sqn 2/43
ATT	Cancelled 1665 CU from 299 Sqn		4/23 1/1 44	299 Sqn 1/44 4/44 1665 CU 1/44
ATT	1665 CU fr. 299 Sqd		4/12 1/2 44	299 Sqd 8/44 1665 CU 8/44
SOS	299 Sqd - to - 1665 CU		12 2 44	299 Sqd 8/44
SOS	299 Sqd to 190 Sqd		1 2 44	1665 CU 8/44
TOS	190 Sqdn from 299 Sqdn		12 2 44	190 Sqdn 2/44
	Casualty		23 9 44	[illegible]
F/B Missing from 190 Sqd.			21 9 44	AFRO 2314/44 CR 576
Missing	Beleived Killed		16 3 45	CL 719
TOS	NEU		22 9 44	153/44
	Presumed Dead		21 9 44	U.K. NEU 112 CR 775, AFRO Supp. 1000

ALL OTHER CASUALTIES

CASUALTY AND DATE	AUTHORITY
Adm SSQ 22.6.43	42 OTU 21/43
Dis SSQ 27-6-43	42 OTU 22/43
Slightly Injured (at SSQ Pembroke Dock)	CR 348
Disch SSQ 18-7-43 (ADMIT 5 7 43)	44 Pembroke Dock 346/43

CHARACTER AND TRADE ASSESSMENT

DATE	CHARACTER	TRADE ASSESSMENT

HONOURS, AWARDS AND MENTIONS

DATE	AWARD	AUTHORITY
30 12 42	A. G's Badge	
15 1 44	CUSM & ML	190 Sqdn 11/44 299 Sqn 6/44

COPIED Archives COPIE

ADVISE ENTRIES
UNIT RECORDS RETURNED
TO CANADA

Emb 18/4/43

nger Printed
Date 4-12-41
Initials EB

POUR L'USAGE DU DÉPARTEMENT SEULEMENT

CERTIFICAT DE L'EXAMEN MÉDICAL

Partie 1. Renseignements obtenus de la recrue—

1. Age 25 2. Avez-vous souffert d'une des maladies suivantes·

(a) Rhumatisme	nil	*(j)* Affection nasale	nil
(b) Tuberculose	nil	*(k)* Maladies des oreilles	nil
(c) Bronchite ou asthme	nil	*(l)* Maladies des yeux	nil
(d) Affection cardiaque	nil	*(m)* Epilepsie	nil
(e) Maladie du rein ou de la vessie	nil	*(n)* Maladie nerveuse ou mentale	nil
(f) Gastrite intestinale	nil	*(o)* Syphilis	nil
(g) Hernie	nil	*(p)* Gonorrhée	nil
(h) Varices	nil	*(q)* Fracture	nil
(i) Pieds plats ou déformés	nil	*(r)* Autre maladie ou défectuosité	yes

3. Avez-vous jamais porté des lunettes? nil

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

5. I certify that I have revealed my full medical history and have withheld any relevant information. F de Cordoue
Signature de la recrue

Observations des examinateurs Pneumonia age 8, ? scarlet fever age 6

Partie 2. Renseignements obtenus par l'examen médical. (La recrue doit être déshabillée)—

1. Marques distinctives ou cicatrices (si celles-ci sont opératoires, obtenir les détails) Vaccination left arm. Small scar right 5th finger.

2. Taille 5 pieds 6 pouces. 3. Poids 152 livres.

4. Teint Red. dark. 5. Couleur des yeux Brown Cheveux Dk Brown

6. Développement (Bon / Passable / Médiocre) 7. Tour de poitrine—Expiration 34 pouces

Degré d'expansion 4 pouces

8. Ouie—Droite W.V. 20 Gauche W.V. 20 Tympan—Droit nil gauche nil

9. Vue—sans lunettes—droit 20/20 avec lunettes—droit N.A.

gauche 20/30 gauche

10. État de la bouche et des dents Teeth badly stained. At least 5 decay carious teeth

11. Urine—Albumine neg Sucre neg

12. Anomalies révélées à l'examen (congénitales et pathologiques) nil

Partie 3. Le candidat a été examiné conformément aux instructions de la brochure "Physical Standards and Instructions for the Medical Examination of Recruits" et jugé apte pour la catégorie.

AFBT A4B

12/11/41 98782 neg

Observations spéciales des médecins Has bad teeth attended to prior to acceptance
Nov 11/41 Has had teeth attended to Fit. GRH
Remarks nominal Duty

Part 2 Cont.

13. Reflexes nil
14. Heart nil
15. Lungs nil
16. Blood Pressure 140/90
17. Colour Vision N (Ish)

Date November 6th 1941

Lewis R Berger
Président

Membre

Lewis R Berger
Membre

NATIONAL REGISTRATION CERTIFICATE PRODUCED.
86/195 [signature]

DEC 4 1941

POUR L'USAGE DU DÉPARTEMENT SEULEMENT

(A) *Rapport de l'officier qui a eu une entrevue avec le candidat—*

Type d'homme Good Apparence générale Clean

Aptitudes pour (indiquez à quel titre) Standard Tradesman 4/12/41 ~~GDG~~ Equipment Assistant

Date 28/7/41 Signature [signature] Grade Capt.

(B) *Rapport sur l'épreuve professionnelle—*

Métier sur lequel a porté l'épreuve Standard Tradesman 4/12/41 Equipment Assistant

Résultat Standard group f.

Autres qualités professionnelles susceptibles d'être mises à profit dans le C. d'A.R.C.

Date 28/7/41 Signature [signature] Grade Capt.

(C) **DÉCLARATION D'ENGAGEMENT DE LA RECRUE**

Je, soussigné, Jacques Fernand Gabriel de Cordoue déclare solennellement que les renseignements ci-dessus mentionnés sont vrais et je m'engage, par les présentes, à faire du service actif dans le Corps d'aviation royal canadien, où que ce soit au Canada, de même qu'en dehors du Canada et outre-mer, pendant la durée de la présente guerre, ainsi que pour la période de démobilisation subséquente et, en tout cas, pour une période de pas moins d'un an, si Sa Majesté requiert mes services.

Date 4 decembre 1941 [signature]
Signature de la recrue

COPIED Archives COPIE

(D) **SERMENT PRÊTÉ PAR LA RECRUE**

Je, soussigné, Jacques Fernand Gabriel de Cordoue promets sincèrement et jure (ou déclare solennellement) que je serai fidèle et porterai loyale allégeance à Sa Majesté.

Date 4 decembre 1941 [signature]
Signature de la recrue

(E) **DÉCLARATION DE L'OFFICIER CERTIFICATEUR**

J'ai averti la recrue susnommée que, si elle répondait inexactement à l'une quelconque des questions précitées, elle serait passible des peines prévues par la loi.

Les questions et réponses ci-dessus indiquées lui ont été ensuite lues en ma présence.

Je me suis assuré que la recrue comprenait chaque question et que sa réponse à chacune d'elles a été dûment inscrite telle que donnée et la recrue a fait et signé la déclaration, de même qu'elle a prêté serment devant moi,

à Montreal, P.Q. ce 4eme jour de decembre 1941

[signature] RCAF Recruiting, Montreal, P.Q.
Signature de l'Officier — Grade — Unité

21. Éducation:

—	Nom de l'école	Date du	Date au	Cours, sujets, etc.
Instruction primaire—Ecole publique ou séparée	Ecole Meilleur	1924	1931	primaire Montreal p. 2.
Cours supérieur—Collège, etc.	Ecole Frontenac	1922	1924	primaire Montreal p. 2
Cours technique	Monument			
Autres cours universitaires ou scolaires	national	1931	1933	Cour de fusee
Cours par correspondance	Montreal p. 2.			

22. Emplois civils (détails au complet):

Employeur et lieu	Fonctions, métiers, positions	Date du	Date au	Motif du départ
Restaurant-Co.	Commis	1931	1933	Tendu.
Dupuis Freres	Receiver, Barkender. stock Keeper.	1933	1941	Tour R.C.A.F.

23. Heures de vol, seul. Aucune accompagné Aucune avec passager Aucune

24. Qualités spéciales, passe-temps favoris, etc., utiles dans le C. d'A.R.C.

N A

25. Sports pratiqués, et dans quelle mesure, soit intensément, ou modérément, ou occasionnellement

Natation chasse boxe moderement

26. Service aéronautique dans lequel vous voulez vous engager {Service à terre. / Service navigant.} Eqt Cnd

Si c'est dans le service à terre, indiquez le métier aéronautique que vous visez Service General

Si c'est dans le service navigant, indiquez votre préférence soit comme (a) pilote; (b) observateur; (c) mitrailleur ou (d) radiotélégraphiste (membre d'équipage). (Biffez les mots qui ne s'appliquent pas).

27. Nommez au moins deux personnes qui peuvent témoigner de votre réputation et de vos aptitudes:

Nom	Adresse	Profession
Louis Albert Dubois	2358 Des Erables Montreal	Employé civil
Lucien Lamarr	2352 Des Erables Montreal	journalier
Marcel White	1196 Cartier Montreal	Bijoutier
Jack Nolby	3660 Lorne Crescent Montreal	Bureau

Tous de Montreal P. 2.

28. Autres renseignements se rapportant à votre demande d'engagement

N A

29. Comprenez-vous bien que la vaccination, la revaccination et l'inoculation sont obligatoires? Oui

JE, SOUSSIGNÉ, CERTIFIE que les renseignements que j'ai fournis ci-dessus sont exacts, autant que je sache et que j'aie raison de croire.

Date 17 Juillet 1941 Signature ~~Fernand de Cordova~~ F de Cordova

Archives Copie

R.C.A.F. Special Reserve

N° MATRICULE R 144751 VERSÉ À #4 M.D. Quebec, P.Q. MÉTIER Standard Tradesman

CORPS D'AVIATION ROYAL CANADIEN

(FORMULE D'ENGAGEMENT)

16-1-41

(Le postulant devra répondre de sa propre main aux questions des pages 1 et 2)

1. Nom De Fordoue Prénoms en entier Jacques Fernand Gabriel
2. Adresse actuelle 2358 Des Erables Montreal P.Q. Téléphone AM9109
3. Adresse fixe 2358 Des Erables Montreal P.Q.
4. Lieu de naissance Montreal P.Q. Nationalité Canadien Francais
5. Date de naissance 13 juin 1915 Marié, célibataire, veuf, séparé, divorcé Celibataire
6. Enfants

Nom	Date de naissance	Nom	Date de naissance
P.A.			

COPIED Archives C.O.T.E.

7. Profession Commis 8. Religion Catholique Romain (Indiquez la confession religieuse)
9. Langues Francais & Anglais couramment (Degré de connaissance)
10. Plus proche parent (nom en entier) Hugues de Cordoue Degré de parenté père
    Adresse du plus proche parent 2358 Des Erables Montreal P.Q.
11. Père (nom en entier) Hugues Fernand Stanislas de Cordoue Lieu de naissance France
    Adresse 2358 Des Erables Montreal P.Q. Nationalité Français
    Profession Mecanicien
12. Mère (nom de fille en entier) Marie Rose Higgins Lieu de naissance Montreal P.Q.
    Adresse 2358 Des Erables Montreal P.Q. Nationalité Canadienne Française
13. Détails du service dans les armées de terre, de mer ou de l'air:

Unité	Lieu	Rang	Profession	Date du	Date au	Motif de la libération
Black Watch 73 regiment	Montreal Quebec	soldat	Soldat	Juin 1940	1941	CAR To R.C.A.F.

14. Honneurs, récompenses, citations Aucune
15. Faites-vous actuellement partie de la réserve de quelque armée de terre, de mer ou de l'air? Oui
16. Avez-vous déjà demandé de faire partie du C. d'A.R.C.? Non Si oui, où? N.A.
    Quand? N.A. Résultat N.A.
17. Avez-vous déjà réformé de quelque service armé de Sa Majesté pour inaptitude physique? Non
    Si oui, indiquez la nature de l'infirmité N.A.
18. Avez-vous jamais touché ou touchez-vous actuellement une pension de réforme? Non
    Si oui, indiquez la nature de l'infirmité N.A.
19. Avez-vous jamais été trouvé coupable de délit? Non Si oui, indiquez-en la nature N.A.
20. Avez-vous des dettes? Non Si oui, donnez des détails

R.C.A.F. Records Office
Rec'd DEC 10 1941
O.K. C.B.
R.C. N.I.
S.L. P.A.

R.C.A.F.—R.100a
20M—4-41 (88)
Q.C. 1052-3-83

4/9-143

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

WILL

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

(1) I, Jacques Fernand Gabriel de Cordoue of the City / Town / Village / Township of Montréal in the County / ~~District~~ of Ste Eusèbe

Province of Quebec, Store Keeper (Civil Occupation)

Last Permanent Civilian Address

a member of the Royal Canadian Air Force, Number R144751 do hereby revoke all former Wills by me made and declare this to be my LAST WILL.

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

(2) I GIVE, DEVISE AND BEQUEATH unto my mother and father

Mrs Marie Rose Higgins — de Cordoue
2358 des Erables,
Montreal, P.Q.
M. Hugue de Cordoue
2358 des Erables, Montreal, P.Q.
All my Estate

Relationship, Names and Address of Residuary Beneficiaries.

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

N. A.

(4) I appoint M. Albert Dubois, 2358 des Erables, (Name) (Address)
Montreal, P.Q., to be the Executor / ~~Executrix~~ of this my Last Will.

IN WITNESS WHEREOF I have hereunto set my hand this 5th day of December 1941.

Signed and acknowledged by the Testator, in the presence of us present at the same time who in his presence, at his request, and in the presence of each other have hereunto subscribed our names as witnesses.

J de Cordoue
(Signature of Testator)

First Witness sign here.

(5) 1C2 Renaud J.
(Signature)
#4 M.D. Quebec
(Address)
Clerk
(Occupation)

Second Witness sign here.

Pte Renaud spl.
(Signature)
No 4 M. Depot Quebec
(Address)
clerk
(Occupation)

(Witnesses are not to be beneficiaries.)

[OVER]

NOTE

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

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

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

and any personal gift, if desired.

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

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

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

GENERAL

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

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

STATEMENT OF LOCATION OF WILL

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

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

.....

.....
(Signature)

.....
(Signature)

R. 44751 9694

De Cordova S.P.

DUPLICATE
DUPLICATA

1. As requested, Mr. J.J.F. Blom, Secretary of the Netherlands War Graves Committee, was interviewed on 17th of March. From the start it transpired that this assistant was the man who would be in a better position to answer our questions, as he received Mrs. ANTOFT, when she arrived in AMSTERDAM, and helped her to the best of his ability. This gentleman, M.J.R.F. ALPHEN was asked to give a brief summary of Mrs. ANTOFT's visit to their office.

2. He first showed me 3 letters, received from Mrs. ANTOFT requesting clatification as to the actual location of her son's grave, and another written when in DANMARK again requesting more information, the last communication was to warn them of her arrival. In reply to these letters, the Committee had done their utmost to find her son's grave. As he had been buried as "Unknown" they were at a loss when required to give the grave number. He went on to say that he was at the aerodrome when they arrived and accompanied them to their offices. Here, Mr. ALPHEN was asked to repeat what he knew of the telephone conversation between her son and the G.R.U. Officer in Utrecht. As he had to dial and stand by her son in case there was the need for him translating any Dutch, he remained in the box with him. He said that the Army Officer had been very polite and that her son did not looked at all disturbed. Mr. ANTOFT was first informed that his brother was buried in BERGEN OP ZOOM, but was told to await another call as he would contact the D.A.D.G.R. & E in ANTWERP in order to secure more accurate information.

The Officer rang back and told that that he would be buried in the Airborne Cemetery in ARNHEM. They immediately left for ARNHEM. A few minutes after they had arrived, the Army Officers turned up and Mr. AEPHEN states that they were very polite and helpful. They showed them the graves of THORNINGTON and MacDONNELL, members of his crew and aid that her son would be in one of the 4 unknown graves to which he pointed. Mr. Alphen added that as these crosses showed the same death of death, and they they were near the graves of the known, that they would contain the remains of the missing airmen. Some photos of the graves were taken and she then went to pay a visit to the Rev. FINKENSEIPER. He had shown her the graves when these airmen had been buried. Mrs. ANTOFT was very angry at the Army Authorities for having removed the graves, from this cemetery. He saw her again at the aerodrome and she left a very disappointed and angered mother.

3. Both these gentlemen went on to say that there existed a very sad state of affairs between them, the Imperial War Graves and D.D.G.R. & E. Services. The Army Authorities never recognized their organization and they evidently were not ready to pass on information re allied graves. They were receiving thousands of letters from the next-of-kin, but in most cases they could not give the required information. However, they firmly stated that the topic of Graves Units was not discussed with Mrs. ANTOFT, but all along now she kept uttering remarks about the removal of her son's grave.

4. This consluded my investigation as far as this case was concerned, but, however, ~~XXXXXXXXXXXXXXX~~ Mr.BLOOM and Mr. ALPHEN took this opportunity to ask me if a representative from the Army Services or other Unit could visit them to work out some liaison between their organizations. I could not give them any definite information as it is out of our Department but possibly some steps can be made from your office to bring about this cooperation.

Squadron Leader,
Officer Commanding No.2 M.R. & E.Unit (Detachment)
Royal Air Force - THE HAGUE - Holland .

REPORT

From: No 2 M.R.E. Unit , Royal Air Force, B.A.O.R.

To: Air Ministry, S.7 Cas (C), 2 Seville Street, LONDON, S.W.1. (Attn. S/Ldr. V.A.MULLHALL)

Copies to: R.C.A.F. Liaison Officer, Overseas Headquarters.

Date: 18th of March 1947

Your file or folder reference: P. 423456/44/S.7 CASCAN.

Your Casualty Enquiry Number: 245

Our Reference: 2 MREU/2036/Air/245

Name of Search Officer(s), and number(s) of Section(s). F/Lt. L.R. ST.VINCENT Can. J 16850

Target: ARNHEM

Aircraft type and Serial Number: STIRLING LJ. 943 and STIRLING LJ. 982

Date reported missing: 21st September 1944

Place of crash, with Map reference: ZETTEN Holland Sheet 2A & 3A 1/250.000 Z 6172

Place of burial, with Map reference: Airborne Cemetery, OOSTERBEEK

Crew:

R	151666	F/S	HERGER,	R.B.
J	25114	F/O	ANTOFT,	O.H.
J	28491	F/O	MACDONNELL,	J.K.
R	155222	F/S	WHITLOCK,	L.I.
	1818509	Sgt	HILLYARD	L.G.
R	173863	W/O	THOMAS,	J.C.
	143115	F/O	THORNINGTON,	H.A.
T /	175876	Dvr.	PARKER,	G.
T /	157697	Dvr.	NOBLE,	E.
	37012	W/O	HARRISON,	C.E.
N.Z.	421331	W/O	MATHEWSON	
	147128	F/O	McKAY,	N.
	118084	F/L	SKINNER,	N.B.
	1077628	F/S	PERCY,	R.
R	144751	W/O	DE CORDOUE,	J.F.G.
N.Z.	417009	W/O	BRIERLEY,	T.B.
T /	80730	L/Cpl	CALDICOTT,	L.H.
T /	152672	Dvr.	GREGORY,	H.

Result of Investigation and Findings, on reverse side.

OFFICIALLY PRESUMED DEAD.

B.F. DATE.....

NO. J92200.....RANK....P/O.....,.NAME....DECORDOUE, J.F.G.....

UNIT. OVERSEAS.....EFF. DATE..21-Sept-44....D.C.L. #1017d/9-May-45.

MFW2643 rec'd.....N.A.....M10 (INCLUDING M13).✓.....m.j.

STN. FILE rec'd.✓.....1-8-45..MFB465a DENTAL ENV.✓.....mj..

M10 to DMS(AIR).....N.A.....DEATH CERTIFICATE.✓.....mj..

1

mj

13-8-45

FRENCH CARD

NAME DE CORDOUE, Jacques Fernand Gabriel, FILE NO. ~~XXXXX~~ R144751 J92200

RANK ~~W.O.1 AIR GUNNER~~ P/O CATEGORY ~~MISSING~~ PRES.DEAD REG. NO. ~~R144751~~

DATE OF DEATH: 21 Sept. /44 MOTHER LIVING: YES WIFE: NA

MINISTERIAL CARD: 14-10-44 ROYAL MESSAGE: MEMORIAL CROSS TO CHAPLAIN:

To Mother and Father-

To Mother and Father-30-5-45

M. et Mme.
~~XXXXXX~~.Huques Fernand Stanislas de Cordoue,
2358, rue des Erables,
Montreal, Province de Quebec.

AUG 21 1945

DEL'D TO MOTHER:

AUG 20 1945

DEL'D TO WIFE:

COMMAND:

RELIGION:

MB

[redacted]27100. Personal Effects of No.J92200 P/O De CORDOU[redacted] J.F.

1 Brown Fibre Suitcase, lock unserviceable, contg:
2 White Silk Scarves.
1 Zip Lumber Jacket.
2 Sleeveless Pullovers.
1 Woollen Scarf.
1 pr. Civilian Trousers.
1 pr. Kid Gloves.
9½ pr. Socks.
1 pr. Leather Mitts.
1 Leather Cigarette Case.
1 Electric Iron.
1 Blue Civilian Shirt.
1 Civilian Tie.
2 Civilian Undervests.
2 Civilian Towels.
1 pr. Fleece Lined Mitts.
1 pr. Braces.
1 Moneybelt.
1 Red Comb.
1 pr. Civilian Underpants.
4 Coathangers.
10 Handkerchiefs.
2 Shoe Brushes.
1 Shoe Polisher.
4 Electric Plug Fittings.
2 Leather Belts.
1 Kitbag Handle and Padlock.
1 pr. Boot Laces.
2 Balls Wool.
3 Hanks Wool.
1 pr. Sunglasses in Case.
1 Red Box contg:
1 Tobacco Pouch, 5 pipes, 2 broken, 1 shaving brush, 1 pr. small scissors, razor in case, tooth: :brush, cigarette lighter, badge.
1 Iron Element.
1 Nameless Unserviceable Wristwatch.
1 Crucifix in Leather Case.
1 Kitbag Handle with Padlock.
1 Waterman Fountain Pen.
1 Blue Wallet with Civilian Identity Card.
1 Blue Writing Wallet with bundle photos, 2 Canadian permits tp purchase pistol, 2 Canadian permits to sell pistol, pistol registration certificate, registration card, gasoline coupon book cover.
2 Books,
Lord Tony's Wife by Baroness Orczy.
Dracula by Bram Stoker.
1 Black Comb.
1 RCAF Broken Crested Ring.
1 Ring with 7 Keys.
1. Colt Revolver.

NOTE:

Cash amounting to 4/-d found in the effects has been credited to his service account.

[redacted].

Original Station inventory signed by A.B.Williams, F/O. undated.

Effects checked at Central Depository 18/10/44 & 17/4/45.

The instructions regarding this form are contained in Chapter XIII, A.P. 1801 (War Manual Part II). R.A.F. Form 1580.

ROYAL AIR FORCE.

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

Official No. ~~CAN.R.144751~~ J92200 Name DE CORDOUE Jacques Fernand Gabriel Rank ~~T/Sgt~~ F/Lt

(In full in block capitals, surname first). (Or acting appointment).

R.A.F. Trade A.Gunner "Sp" Special Qualifications

(e.g., Gas Instructor, Fire Fighter, Boxing Instructor).

Date of Birth 13.6.15 Religion R C. Occupation in Civil Life Clerk 2 years

Last Enlisted 4th Dec. 41 Current Engagement D. of W Stock Keeper 8 years

If a member of the Auxiliary Air Force

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

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

Mr Hugues de Cordoue (Father) 2378 Des Erables St Montreal Quebec.

Name, address and relationship of person (or persons) to be informed of casualties (to be entered in pencil).

(If this person is the legal next of kin, it is only necessary to insert here "Next of Kin.")

Next of Kin

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

Section I.—Movements and Casualties.			Section 2.—Promotions, Acting Appointments (Paid or Unpaid), Reductions, Remusterings.		
Unit FROM which.	Unit TO which.	Date of Effect.	* Authority.	Description.	Date of Effect.
34 O.T.U.	No.1.Y Depot	27.3.43.		Tradesman "Std" A.C.2.	4.12.41
No.1.Y Depot	RAFTP	7.4.43		Guard "Std" A.C.2.	24.1.42.
	Emb.Halifax	8.4.43.		" "Std" A.C.1.	4.3.42
	U.K.	17.4.43.		" "Std" LAC	4.6.42.
Intake C.54	3 PRC	18.4.43.		" "C" LAC	8.6.42.
3 PRC	No. 42 O.T.U.	8.6.43		A.Gunner "Sp" T.Sgt.	30.12.42.
No. 420 T.U.	No. 294 Sqdn.	26.9.43	POR 17/43	Promoted T/F/Sgt	30.6.43
No. 294 Sqdn	No. 299 Sqdn	4.11.43	POR 6/44.	Promoted T/W/O.2.	30.12.43.
~~No. 299 Sqdn.~~	~~to No. 1 C.D.~~	~~12.2.44.~~	POR 19/44.	Promoted T/W/O.1.	30.6.44
299 SQDN	190 SQDN.	12.2.44.			
190 Sqdn.	R.C.A.F. w/a. Medical	21.9.44			
Discharged on app. 19.9.44 to Commission					
			O/0124/44		

Section 3.—Good Conduct Badges.			
* Authority.	1st, 2nd, 3rd.	Awarded, Deprived, Restored.	Date of Effect.

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

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

Section 4.—Character and Trade Proficiency.

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

Rank.	Character.	Trade Classification.	Proficiency. A	B	C	Whether specially recommended, recommended, or not recommended for promotion or reclassification.	Date.	Signature and Rank of Commanding Officer.
SGT.	V.G.	A/G	ON STRENGTH FOR TRAINING ONLY				23.9.43	W/Stallom F/Lt.
1/F/Sgt	V.G.	Air Gunner	Sat.	Sat.	-	—	31.12.43	[illegible]
A/F/Sgt	V.G.	Air Gunner	Sat	Sat			12.2.44	[illegible]
T/W/O.	V.G.	Air Gunner	Sat	Sat				[illegible] W/C.

POR 8/44.	6 days.	(P) 13-18-5-44. RW F081439. Plus S.A.S.A.			
Por 5/44.	6 days.	(P) 3-8-4-44. RW F015559.			
POR. 3/44.	7 days.	(P) 24-1-3-44. RW.E118214.			
POR 43/43	Priv.	7-9.43 - 11.9.43 (5 days) R/W. B.342885			W/Stallom F/Lt.
POR 38/43	Priv	Eight days Ex. from 30.8.43 - 6.9.43.			W/Stallom F/Lt.
POR 35/43.	14 days.	Priv. Leave 16.8.43. - 29.8.43. R.W. B.342296.			[illegible] F/O
POR 28/43	7 Days	Privilege Leave -20.7.43 - 26-7-43 R.W. B341896			W/Stallom F/Lt.
POR 111/43	Priv	1.7.43 - 3.7.43. (3 days) NRWI.			W/Stallom F/Lt.
100/43	3 RC	26.4.43 to 2.5.43 7 days Priv. RW B385184			[illegible] W/O

Record of Leave and Issue of Free Travelling Warrants

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

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

Authority.	Nature.	Date of Effect.
	Awarded Air Gunners Badge -	30.12.42.
POR 11/44	Awarded Volunteer Service Ribbon & Maple Leaf Emblem.	15.1.44

Passing

ROYAL CANADIAN AIR FORCE

Individual Record of Flying

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

RANK Sgt. NO. R144751 NAME DECORDOUE, James Fernand Gabriel

UNIT	PERIOD ENDING	SERIAL NO.	SINGLE-ENGINE AIRCRAFT DAY 1ST PILOT (A) Hrs	Mins	2ND PILOT (B) Hrs	Mins	DUAL (C) Hrs	Mins	SINGLE-ENGINE AIRCRAFT NIGHT 1ST PILOT (D) Hrs	Mins	2ND PILOT (E) Hrs	Mins	DUAL (F) Hrs	Mins	MULTI-ENGINE AIRCRAFT DAY 1ST PILOT (G) Hrs	Mins	2ND PILOT (H) Hrs	Mins	DUAL (J) Hrs	Mins	MULTI-ENGINE AIRCRAFT NIGHT 1ST PILOT (K) Hrs	Mins	2ND PILOT (L) Hrs	Mins	DUAL (M) Hrs	Mins	CREW DUTIES OBSERVER (N) Hrs	Mins	AIR GUNNER (O) Hrs	Mins	OTHER (P) Hrs	Mins	PASSENGER (Q) Hrs	Mins	TOTAL (R) Hrs	Mins
#9B&GS, Mont Joli PQ Dec.29/42.																													12	05						12	05
34 O.T.U.	28/2/43																												8	50						8	50
"	12/3/43																												4	50						4	50
																													13	40						13	40

J. H. Fairbairn S/LDR.
C. F. I. No. 84, O. T. U.

G R O U N D T R A I N I N G.

4. GROUND TRAINING RESULTS.

SUBJECT.	% MARKS OBTAINED.	SUBJECT.	% MARKS OBTAINED.
Morse 8 (W.P.M.)	PASS	Airmanship.	69.
~~Signals Procedure.~~	—	Tactics.	N/A
Armament.	65.5	Intelligence.	N/A

5. REMARKS BY CHIEF GROUND INSTRUCTOR.

This N.C.O. is a French Canadian who finds it difficult to write English, but speaks it reasonably well. The examination marks above are the result of this. In practice he has a sound knowledge of his job and is above average.

S/Ldr.
CHIEF GROUND INSTRUCTOR.

6. REMARKS BY CHIEF INSTRUCTOR:
(Ability as Air Operator and Air Gunner etc)

Average air gunner who is very good in his work in the air.
Has plenty of confidence but did not do well in ground subjects due to his poor English although his diction is reasonable enough. Would probably be more at home in a French Canadian Squadron.

W/Comm.
CHIEF INSTRUCTOR.

7. REMARKS BY COMMANDING OFFICER:

MAR 20 1943
DATE.....

G/Capt.
OFFICER COMMANDING. 34 O.T.U.R.A.F.
PENNFIELD RIDGE.

53

NO. 34 OPERATIONAL TRAINING UNIT. T.82
R.A.F. STATION PENNFIELD RIDGE N.B.

REPORT ON ~~WIRELESS OPERATOR~~ AIR GUNNER.

AIR & GROUND TRAINING.

SURNAME de. GORDOUE. CHRISTIAN NAMES JAMES BERNARD GABRIEL.

NUMBER R.144751. RANK SGT.

COURSE NO 7. FROM 25.1.43 TO 12-3-43

F L Y T N G T R A I N I N G.

1. FLYING TIMES AT O.T.U.

AIRCRAFT.	DAY.		NIGHT.		PASSENGER.
	1st.W/Op.	2nd.W/Op.	1st. W/Op.	2nd. W/Op.	
VENTURA.	13.40				
TOTAL.	1 3.40				

2. (a) AIR GUNNERY RESULTS.

EXERCISE.	NO OF ROUNDS FIRED	% HITS TO ROUNDS FIRED.
DROGUE BEAM RELATIVE ~~SPEED~~ TEST.	950	
UNDER TAIL TEST.		
CROSS OVER QUARTER TEST.		
SPLASH	24 00	

(b) TOTAL ROUNDS FIRED: GROUND NIL AIR TO GROUND 2400

AIR TO AIR 950

3. AIR EXERCISE NOT CARRIED OUT.

GROUND FIRING EXERCISES.

RECOMMENDED FOR:
(A.) Flying to 35 000 ft. or more.
~~B. Limited flying to 35,000 ft.~~
~~C. Flying only to 25,000 feet.~~

ALTITUDE TOLERANCE TEST. DATE 3/4/43

		Symptoms
No. of 2 hrs. tests at 35.000 feet	1.	nil on 2 runs
	(2.)	mild on "
	3.	moderate on "
		severe on "

ROYAL CANADIAN AIR FORCE

TRAINING REPORT

AIR GUNNER

No. 9 B. & G. School
Christian

1. Surname DE CORDOUE Names James Fernand Gabriel

2. Number R144751 Rank LAC Course No. 42 Duration

3. Posted from RCAF Sta.Dartmouth,N.S. Posted to #9B&GS Of Course From 120ct/42

To 29Dec/42

4. Aircrew Category Height Girth

5.

Type Aircraft	EQUIPMENT USED			
	Type Guns		Type Turrets	
	In Air	Ground	In Air	Ground
Battle	V.G.O.	V.G.O.	Bristol	Bristol F.N.
		Browning		B.P.

6. STAGE I.

7. STAGE II.

	Mks. Poss.	Mks Obtd.
Armament Oral	10	85
Armament Written	00	204
Anti-Gas	100	59
A/C Recognition	100	69
Mathematics	50	25
Navigation	100	50
Law, Admin., Hygiene, etc.	100	50
Signals	100	90
Total	950	632

AIR AND GROUND TRAINING	Day	Night
Flying Time	12:05	
Films Exposed	1	
Hrs.Turret Manip	11:20	
Skeet (# Rds)	—	
25X Range	450	
200 X Range	800	
Air to Ground	800	
Air to Air	2550	
% Hits Air to Air	2.2	

ASSESSMENT Subject	Mks. Poss.	Mks. Obtd.
Written	150	77.
Practical And Oral	100	74.
A/C Recognition	100	74.
Drill	100	78.
Signals	100	95.
Acility as Firer	100	67
Total	650	465
Total Trng. Marks	1600	1097
Percentage		68.6
Personnel Assessment	800	339

8. No. in class 56 Position in class 49 Pass or Fail PASS

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

10. Experience in armir , loading and harmonizing turrets.

R.C.A.F. Records Office
Rec'd. MAR 4 1943
O.K. ... C.B. ....
R.C. JB N.I. ....
S.L. JB P.A. ....

11.

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

Mark "X" in appropriate column.

12. Remarks: **Routine worker, slow mentally but reliable.**

Date **31Dec/42** **(G.O. Godson) S/L**

Chief Instructor

Date: **31Dec/42** **(R.H. Foss) G/C**

Officer Commanding #9 B&G Sch.

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

RECORD OF PAY

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

APPOINTED OR ENLISTED AT Montreal, P.Q. ON 4-12-41

MARRIED OR SINGLE "S"

No. R-144751

NAME IN FULL DE CORDOUE Jac. Fer. Gabriel

RATE OF PAY

D.R.O. No.	Eff. Date	Rank	Group	P.F. or A.S. Rate	Daily Rate	Add. Pay	Combined Rate	Pen. Ded.	Casualties Affecting Rate of Pay
291	4-12-41	AC2	"S"	A.S.	1 30		1 30		T.O.S #4 "M" Depot, Aux. on enlist.
129	23-4-41	AC1	6	AS	1 10		1 10		
185	8-6-41	AC1	6	AS.	1 65		1 65		
203	4-6-41	LAC	6	AS	1 75		1 75		
316	21-11	LAC	C	AS	1 75	75	2 50		Ent F/P.
339	30-12	Sgt.	Spc	A/S.	2 95	-	2 95		Remitted as Summer-

ASSIGNMENTS

Assignee	Eff. Date	Amount	Total
DE CORDOUE MRS. MARIE ROSE (MOTHER)	1-12-41	20 00	20 00

DEPENDENTS ALLOWANCE

Date App. Forwarded	Relationship	Amount Awarded	Eff. Date
5-12-41	MOTHER		

REMARKS

N.D.T.

Period	No. of Days	Amount of Pay	Sub. Allce.	Other Credits Description	Other Credits Amount	Credit B/F	Total Credits	Ass. Pay	Pen. Ded. & N.D.T.	Debit B/F	Other Debits Description	Other Debits Amount	Cas. Pay	Mid Pay	Total Debits to this Column	End Pay	Debits & Credits to Next Account	Casualties and Sig. of A.O. on Transfer of Account
4-12-41																		
21-12-41	28	36 40					36 40	20 -					(178) 6 -	-	26 -	10 40	0	
1-1-42																		
5-1-42	5	6 50					6 50	3 33					(186) 3 17		6 50		0	S.O.S. #4 M Depot on post to #1 M Depot Toronto
																		46-5-1-42 to #5
6-4-42																		
24-4-42	19	24 70					24 70	12 67					5 00	10 25	27 92		3 22	S.O.S. 24-4-42 TRENTON - 22 WD Kananaskis
																		23. TOS. TRENTON (RTS) FR #1 M.D. TORONTO. EFF 25-4-42
25.31	7	9 10					9 10	4 00		3 22			1 88		9 10		0	
1-14/2	14	18 20					18 20	9 34						8 00	17 34		86	46. SOS TRENTON (RTS) TO DARTMOUTH. EFF 14.2.42.
																		M. Almost Flt
15/2-28/2	14	18 20				86	19 06	10 66							10 66	8 40	0	48, T.O.S., RCAF Station Saltmouth N.S. 48 15-2
																		166 (Hants) Leave 16-6-42 to 30-6-42 (14 days)
1/3-31/3	31	46 30					46 30	20 -						10 00	30 -	10 30	0	
1/4-30/4	20	29 -					39 -	20 -						10 -	30 -	9 -	0	
1/5-30/5	28	5 80					49 20	20 -						15 -	35 -	14 20	0	
1/5-31/5	31	43 40																
1/30/6	30	42 -					42 -	20 00					22 -		42 -	-	0	
1-30/6	23	5 75						20 -						20 -				
1-30/6	27	2 70																
1-31-7	31	54 25					62 70								40 00	14 25	8 45	
1-31/8	31	64 25				8 45	62 70	20 00					8 45	15 -	43 45	19 25	0	
1-30/9	30	52 50					52 50	20 00						15 00	35 -	17 50	0	28 2 SOS To 98 2nd Mont Jct P.Q.
1-9/10	9	15 75					15 75	6 00					9 75		15 75		0	Ent 9/10/42.
10-31-10-42	22	38 50					38 50	14 00					5 00		19 00	19 50	0	
1-30/11	30	52 50					52 50	20 -						15 00	35 -	17 50	0	
1-29/12	29	72 50	2 50	F/P Nov	10 075	7 50								30 -		37 50	-	CHRISTMAS (50
																		00.14 ENT. TO R.A. SPEC LEAVE 31-12-42 TO 5-1-43
																		AO.339 ENT. TO R.A. SPEC LEAVE 5-1-43 TO 23-1-43 (18 da)
30-31/12	2	5 90	9 00				97 40	20 00					55 00		105 00		45 10	
1-22/1	22	64 90					64 90	15 00		45 10					60 10		4 80	AO. 339 SOS. 4 940 T.U. PENNFIELD RIDGE, NB. EFF 22-1-43
																		Lac

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

RECORD OF PAY

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

APPOINTED OR ENLISTED AT Montreal ON 4-12-41

MARRIED OR SINGLE 'S'

NO. R144751 NAME IN FULL De Cordoue J F G

RATE OF PAY										ASSIGNMENTS				DEPENDENTS ALLOWANCE				REMARKS
D.R.O. No.	Eff. Date	Rank	Group	P.F. or A.S. Rate	Daily Rate	Add. Pay	Combined Rate	Pen. Ded.	Casualties affecting rate of pay	Assignee	Eff. Date	Amount	Total	Date App. Forwarded	Relationship	Amount Awarded	Eff. Date	N.D.T. Class.
		Sgt	Spc	A.S.	2 95					Forward			20 00	5-12-41	Mother	25 00		
										MAS MR De Cordoue MFM	1-1-43		35 00		Checked 24/3/43			

Period	No. of Days	Amount of Pay	Sub. Allce.	Other Credits Description	Other Credits Amount	Credit B/F	Total Credits	Ass. Pay	Pen. Ded. & N.D.T.	Debit B/F	Other Debits Description	Other Debits Amount	Cas. Pay	Mid Pay	Total Debits to this Column	End Pay	Debits & Credits to Next Account	Casualties and Sig. of A.O. on Transfer of Account
23-31 1/	9	26 55				4 80	31 35	5 00							5 00	11 35	15 00	
1-28 2/	28	82 60				15 00	97 60	15 00 35 00						24 00	74 00	23 40	20	
1-27 3/	27	79 65	7 00	Do 71 L 14-27 3/		20	80 85	31 50					55 35		86 85			Do 71 SOS to No 1 Y Depot eff 27 3/43 A D Goodruffe S/L No 340 TU
																		Audited by Treasury 24/3/43 W. Tallon

ROYAL CANADIAN AIR FORCE

TRAINING REPORT

AIR GUNNER

No. 9 B. & G. School

1. Surname ~~DE CORDOUE~~ Christian Names ~~James Fernand Gabriel~~

2. Number ~~R144751~~ Rank ~~LAC~~ Sgt Course No. 42 Duration Of Course From ~~12Oct/42~~ To ~~29Dec/42~~

3. Posted from ~~RCAF Sta.Dartmouth,N.S.~~ Posted to ~~#9B&GS~~

4. Aircrew Category _____ Height _____ Girth _____

5.

Type Aircraft		EQUIPMENT USED			
		Type Guns		Type Turrets	
		In Air	Ground	In Air	Ground
Battle	Extremely Suitable	V.G.O.	V.G.O.	Bristol F.N.	Bristol F.N.
Battle	Suitable	Moderately Suitable	All Browning	for Training	Suitable B.P.

6. STAGE I.

7. STAGE II.

	Mks. Poss.	Mks Obtd.	AIR AND GROUND TRAINING	Day	Night
Armament Oral	100	~~85~~	Flying Time	~~12:05~~	
Armament Written	300	~~204~~	Films Exposed	~~1~~	
Anti-Gas	100	~~59~~	Hrs.Turret Manip	~~11:20~~	
A/C Recognition	100	~~69~~	Skeet (# Rds)	—	
Mathematics	50	~~25~~	25X Range	~~450~~	
Navigation	100	~~50~~	200 X Range	~~800~~	
Law, Admin., Hygiene, etc.	100	~~50~~	Air to Ground	~~800~~	
Signals	100	~~90~~	Air to Air	~~2550~~	
Total	950	~~632~~	% Hits Air to Air	~~2.2~~	

ASSESSMENT		
Subject	Mks. Poss.	Mks. Obtd.
Written	150	~~77~~
Practical And Oral	100	~~74~~
A/C Recognition	100	~~74~~
Drill	100	~~78~~
Signals	100	~~95~~
Ability as Firer	100	~~67~~
Total	650	~~465~~
Total Trng. Marks	1600	~~1097~~
Percentage		~~68.6~~
Personnel Assessment	800	~~339~~

8. No. in class ~~56~~ Position in class ~~49~~ Pass or Fail ~~PASS~~

9. Recommended for commissioned rank ~~No~~ (Yes or No.)

10. Experience in arming, loading and harmonizing turrets.

as a Gunnery Instructor	Suitable					
	X					

Mark "X" in appropriate column.

12. Remarks: **Routine worker, slow mentally but reliable.**

Date: 31Dec/42 (G.O. Godson) S/L

G.O. Godson S/L
Chief Instructor

Date: 31Dec/42 (R.H. Foss) G/C

R.H. Foss G/C
Officer Commanding #9 B&G Sch.

(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? .....

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

N. A.

.....

(11) Is your father alive? YE

If so, state name and address, occupation De Cordova Mr. Hugues - 2358 E. Des Erables - Montl. Levis. — Unemployed

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

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

N. A.

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

(14) Is your mother alive? YES

If so, state name and address De Cordova Mrs. Marie Rose

2358 Des Erables, Montl. P.Q.

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

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

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

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

If so, state the following particulars:—

Relationship N. A

Full Name .....

Postal Address .....

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

.....

(18) Are you insured? YES

If so, in what Company? Prudential Life

(Give number of policy)

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

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

J de Cordova

(Signature of officer or man)

Date 5-12-41

Officer Commanding No. 4 "M" Depot, RCAF Quebec

Date 5-12-41

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.

To be made out in duplicate

M.F.M. 5
50M—8-41 (1292)
H.Q. 1772-39-1651

PARTICULARS OF FAMILY OF AN OFFICER OR OTHER RANK OF THE ~~CANADIAN ARMY (AF) OR~~ R.C.A.F. (ON ACTIVE SERVICE)

INSTRUCTIONS.

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

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

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

---

(1) Name of Officer or Other Rank De Cardone Jacques Fernand Gabriel
(Surname first—Christian names in full—Block capitals)

(2) Regimental or Official Number and Rank R-144751

(3) Unit #4 "A" Depot, Que.

(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? N.A. Number of boys N.A. Girls N.A.

Names and ages N.A.

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

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

Name N.A.

Postal Address

Rec'd DEC 8 1941
K. C.I.B.
C. N.I.
S.L. P.
[SEE OTHER SIDE]

R 44751
9694

ЗЕМЛЯ

ЛЕС ПРОМОЛВИТ

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

ROYAL CANADIAN AIR FORCE SERVICE BOOK

INSTRUCTIONS TO OFFICERS AND AIRMEN

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

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

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

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

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

J 92200 1

Air Force No. R144751 Surname De Cordone

Christian Names (in full) Jacques Fernand Gabriel

Date of Birth 13-6-15 Religion R-C

Date of Enlistment/Appointment 4-12-41

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

Occupation in Civil Life Stock Ruper

Signature of Holder

Name and Address of Next-of-Kin

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

Mr. Hugues De Cordone
2 3 1-8 Des Grables st
Montreal
P.Q.

Certified Correct

Date Place

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

Branch or Trade and Group	Date of Effect	Authority	Signature and Rank of Officer making Entry
AIR.D. Mech.	20-12-42		

Rank	Date of Effect	Authority	Signature and Rank of Officer making Entry
T/AT	20-12-42	DRO 319	
F/SGT	30.6.43	AOR 7/43	
WO 2	30.12.43	" 6/44	
WO 1	30.6.44	" 9/44	
FO	20.9.44	0/01245/44	L. Nuttall WO2

MEDALS, DECORATIONS, MENTIONS, ETC.

Particulars	Date and Authority	Signature and Rank of Officer

MISCELLANEOUS ENTRIES

(For entries for which space is not otherwise provided)

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

Particulars	Date and Authority	Signature and Rank of Officer

LEAVE RECORD
(With Free Railway Warrant)

From (date)	To (date)	Signature of Officer

LEAVE RECORD
(With Special Leave Warrant A.24)

From (date)	To (date)	Authority and Signature of Officer
14-1-43	27-1-43	T.W.#
		T.W.#
		T.W.#
		T.W.#
		T.W.#

MEDICAL CLASSIFICATION

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

BLOOD GROUP

Date	International	Initials of M.O.
	BLOOD GROUP O	MPS.

NIGHT VISUAL CAPACITY

Date	Score	Group	Initials of M.O.
31/3/43	12		MB

IMMUNIZATION PROCEDURES
VACCINATION

Date	Result	Initials of M.O.
5-12-41	— J. F. HOPKIRK	

Susceptibility Test	Date	Result	
Schick Test	11-12-41	Pos	
Dick Test	11-12-41	Neg	

PROTECTIVE INOCULATIONS*

Nature of Inoculation	Date	Dose	Initials of M.O.
Dip. Tox. — 1st	16-12-41	1 c.c.	
" " — 2nd	4-1-42	1 c.c.	
T. A. B. T. — 1st.	5-12-41	1 c.c.	
" — 2nd	3-2-42	1 c.c.	
" — 3rd.	10-2-42	1 c.c.	
" — Ann	14-12-42	½ c.c.	
Wass. Test - Neg	14-12-42	—	
TABC ATT	19/12/43	.25 cc 1 cc	Lm/c/o.

J. F. HOPKIRK

IMMUNIZATION PROCEDURES—Con.

Nature of Inoculation	Date	Dose	Initials of M.O.

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

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

WILL

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

In the event of my death I give

I appoint.....

Residing at.....

to be my executor.

Signature.....

Rank, Air Force No.....

Unit.....

Date.....

1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 | 9 | 10 | 11 | 12 | 13 | 14 | 15 | 16 | 17 | 18 | 19 | 20 | 21 | 22 | 23 | 24 | 25 | 26 | 27 | 28 | 29 | 30 | 31 | 32 | 33 | 34 | 35

CAN.J-92200

MONTREAL -P.Q.

GENERAL INFORMATION Single

EDUCATION

1922-31 - Frontenac School & Meilleur School, both Montreal, P.Q.(Primary).
1931-33 - Monument,National, Montreal, P.Q. (Art Course).

LANGUAGES

French and English (fluently).

CIVIL EXPERIENCE

1931-33 - Restaurant Co. (Clerk).
1933-41 - Dupuis Bros., Mtl., P.Q. (Receiver, Bartender, Stockkeeper).

SPORTS

Swimming, Hunting, Boxing, (mod.). Softball,Hockey.

OTHER INFORMATION

Experience with Rifles and has taken Machine Gunner's Course.

SERVICE EXPERIENCE

1940(June)-41 - Black Watch, 73 Regiment, Montreal, P.Q. --Pte.
1941 - R.C.A.F. from 4-December-41. Sec.Guard. LAC.
1942 - Remustered to Aircrew. W.O.1.

A.F. R. 198B
20M—5-44 (4624)
H.Q. 885-R.-198B

(GL)(G.O.)(CFR)(FIELD) de CORDOUE, Jacques Fernand Gabriel (SR)

Birth Date	Age on Appointment	Date of Appointment
13-6-15	29	20-9-44

POSTINGS AFRO #132, d/26-1-45.

Rank	Date	Station	Date	Duty
P/O	20-9-44	OVERSEAS		GUNNERY OFFICER
	Reported MISSING after air operations overseas Sept.21/44.			
		New reported DEAD.	21-9-44	Cas. List #1017.

CHARGES

S 78006

MAISON FONDÉE EN 1868

Dupuis Frères
LIMITÉE

LE PRÉSIDENT
ALBERT DUPUIS
LE VICE-PRÉS. & DIR-GÉRANT
A.J. DUGAL
LE SEC-TRÉSORIER
ARMAND DUPUIS

865, RUE STE. CATHERINE EST
MONTRÉAL

TÉLÉPHONE PLATEAU 5151
RÉSEAU PARTICULIER
ADRESSE TÉLÉGRAPHIQUE
DUPFRER MONTRÉAL
CODE A.B.C. 5E EDITION
COMPTOIRS À PARIS,
LONDRES ET NEW YORK

July 22th, 1941.

Royal Canadian Air Force,

To whom it may concern

We certify that Mr. Fernand de Cordoue has been at our employ for the last five years.

He was for some time in our receiving and marking Department and has held different positions since.

He is loyal honest and sober.

Yours truly,
DUPUIS FRERES, Ltd.

per Emile Boucher

J.-Emile Boucher,
Superintendent.

JEB/11

R.C.A.F. Records Office
Rec'd. DEC 10 1941
O.K. ... C.B. ...
R.C. ... N.I. ...
S.L. ... P.A. ...

VEUILLEZ ADRESSER TOUTE CORRESPONDANCE À LA MAISON

CONFIDENTIAL

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

ROYAL CANADIAN AIR FORCE

Medical Board held at #9 B & G School, Mont Joli, P.Q. *Date* 27-12-42

FILE NUMBER (27)

Surname de Cordoue *Chr. Names* James, Fernand, Gabriel

Nature of Commission A/C *Date of Birth* 13-6-15 *Married or Single* singe

Branch Special Reserve *Hours Flown* 15 hours

Address 2358 Des Erables St. Montreal, P.Q.

HAVE YOU ANY HISTORY OF:—

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

Education grade X Mailleur School, Montreal

Present Occupation R.C.A.F. A.G.(training) Hobbies Hunting

Previous Service R.C.A.F. 1 yr. 24 days

Athletics boxing, skating, skiing

Habits—Smoking 15 ciags a day Alcohol 2 pts beer a wk.

FAMILY HISTORY—Consumption no Diabetes no Haemophilia no

Nervous Ailments, Mental Trouble, or "Fits"

Father Alive—Health 62 well Dead—Cause

Mother Alive—Health 50 well Dead—Cause

Brothers (0) Alive—Health (0) Dead—Cause

Sisters (0) Alive—Health (0) Dead—Cause

I hereby declare that I have carefully considered the statements made above, that to the best of my belief they are complete and correct, and that I have not withheld any relevant information or made any misleading statement. I am fully aware that by wilfully suppressing any information I shall incur the risk of not being accepted for Service, or if accepted, of being discharged or retired and forfeit any claim to gratuity or other award.

Date 27-12-42 *Signature* Fde. Cordoue *Witness* G.W. McElman F/L.

GENERAL MEDICAL AND SURGICAL EXAMINATION

Impression given by *(a)* Physique **Athletic** *(b)* Mentality **Standard**
Body Marks, Scars, Deformities **scar 1" middle phalanx 3rd. finger rt. hand palmar surface**
Size of Thyroid Gland **not palp.**
Surgical Abnormalities **none**
Results of Wounds, Injuries, Operations **none**

	Date 27-12-42	Date	Date	Remarks on any Abnormalities Found
Height (ins.)	67½			
Weight (lbs.)	163			*Date* 27-12-42
Chest Circumference (ins.)	36½			**No evidence of skin disease, V.D., nor hernia.**
Body Build (lbs.)				
Leg Length (ins.)	39			**G.W. McElman F/L.**
Pulse Rate — Sitting	6 - 72			
Pulse Rate — Standing 1st				
Pulse Rate — Standing 2nd				
Pulse Rate — After Exercise				
Pulse Rate — Time to Normal				
Arterial Walls	soft			*Date*
Blood Pressure — Systolic	138			
Blood Pressure — Diastolic	88			
Room Temperature	70			
Heart — Size (in cms.)	N			
Heart — Sounds	N			
Heart — Rhythm	reg.			
Lungs — Inspection	N			
Lungs — Palpation	N			
Lungs — Percussion	N			
Lungs — Auscultation	N			
Lungs — Expiratory Force	NA			
Lungs — X-Ray				*Date*
Reflexes — Knee	N N			
Reflexes — Ankle	N N			
Reflexes — Triceps	N N			
Reflexes — Abdominal	N N			
Reflexes — Plantar				
Cranial Nerves	intact			
Balancing Rod	R. L. N.A.	R. L.	R. L.	
Self Balancing	R. L. I S I S	R. L.	R. L.	
Tremors — Fingers	S S			*Date*
Tremors — Eyelids	S S			
Abdomen — Liver	N. P.			
Abdomen — Spleen	N. P			
Abdomen — Muscular Tone	good			
Urine — Albumen	Neg			
Urine — Sugar	Neg			
Initials of M.O.	G.W. M.			

40 mm. Hg. Test
Date 27-12-42 58 secs. 6/666/666/676/55 1st. trial G.W.M.
Date
Date
Date

EYE EXAMINATION

History	Nil		
Visual Acuity	R. 20/15, c) /250 =) 20/200		
	L. 20/15, c) —— =)		
Colour Vision	N Ish. #8		
Red, Green	Maddox Rod ~~XXXXXXXX~~ no apparatus		
Diaphragm Test (P.D. =	62 bar) at 0 4		
Convergence C. =	7 cms.		
Convergence S. C. =	12 cms.		
Accommodation R.	11 cms.		
Accommodation L.			
Cover Test	S. L. D. - R.R.		
Fundi and Media	not ~~XXXX~~ done		
Fields	wide		
Remarks:	Fit A1B - A3B		
Initials of M.O.	G.W. M	*Initials of M.O.*	*Initials of M.O.*
Date	27-12-42	*Date*	*Date*

EXAMINATION OF EAR, NOSE AND THROAT

History	nil		
Hearing R. Ear	W.V. 20'		
Hearing L. Ear	W.V. 20'		
External Ear, Meatus Membranes R. Ear	Intact		
External Ear, Meatus Membranes L. Ear	Intact		
Middle Ear, Eustachian Tubes R. Ear	patent		
Middle Ear, Eustachian Tubes L. Ear	patent		
Cochlear Apparatus R. Ear	not done		
Cochlear Apparatus L. Ear			
Vestibular Apparatus R. Ear	not done		
Vestibular Apparatus L. Ear			
Buccal Cavity	normal		
Teeth	~~need cleaning~~ cleaning, satisfactory		
Gums	healthy		
Pharynx	normal		
Nasopharynx	not seen		
Nose	clear		
Larynx	not seen		
Remarks:	Fit A/C		
Initials of M.O.	G.W.M.	*Initials of M.O.*	*Initials of M.O.*
Date	27-12-42.	*Date*	*Date*

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

27-12042

A1B
A3B tur.
A3B
A3B vis.

Suitable A/C material

M.O. G.W. McElman F/L.

Cat. A1B-A3B (Tur.)

OBSERVATIONS AND FINDINGS OF THE REVIEWING MEDICAL OFFICER

Date.....