J92332
APPLIN
DONALD JOHN

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

COPY FOR H.Q. OTTAWA

R189546 Sgt. Applin, D.J.
(NUMBER) (RANK) (NAME)

4193/4-110

R189546

No. 419 (R.C.A.F.) Squadron,
"MOOSE SQUADRON"

17th June, 1944.

Dear Mr. Applin:

I deeply regret the necessity of confirming the information, which you have already received, that your son, Sergeant Donald John Applin, is missing from operations on the night of 12/13th June, 1944. This operation was an attack on a very important objective in enemy occupied territory, and has since proved to have been very effective. Unfortunately, nothing has been heard of your son's aircraft since time of take-off and its loss can only be attributed to enemy action. There is still quite a possibility, however, that all or part of the crew may have escaped or, at worst, be prisoners of war, but news of this could not be expected for some considerable time.

Your son was with us for two weeks and during that time successfully took part in three attacks on the enemy. He was a very cheerful lad, eager to do anything to help the Squadron and our war effort as a whole, and was certainly one of the best workers we have had here. In the short time he was with us, he became very popular with his fellows and they wish me to convey their very sincere sympathy.

R93636 Sgt. High, D., of this Squadron, a personal friend of your son's, would be pleased to give you any information of a personal nature if you care to write to him.

If any further news comes to hand, you may rest assured you will be notified immediately.

Sgt. Applin's kit and personal effects have been collected and forwarded to the Central Depository, Colnbrook, Slough, Bucks. who, after completion of necessary details, will communicate with you as to their disposal.

May I convey my sincere sympathy to you in your great loss and hope with you that better news may follow.

Yours sincerely,

(W.P. Pleasance DFC) Wing Commander,
Commanding 419 (R.C.A.F.) Squadron.

Mr. J. Applin,
651 Grosvenor Ave.,
Westmount, P.Q. Canada.

22 JUN 1944 P.M.

NAME APPLIN, Donald John FILE NO. XXXXX 189546

RANK ~~XXXXXXXXXXXXXX~~ P/O CATEGORY ~~XXXXXXXXXXXXXX~~ PRES. DEAD REG. NO. ~~XXXXXX~~ J92332

DATE OF DEATH: 13 June. /44 MOTHER LIVING: YES WIFE: NA

MINISTERIAL CARD: 23-6-44 ROYAL MESSAGE: MEMORIAL CROSS TO CHAPLAIN:

JUN 19 1945

To Mother and Father- DEL'D TO MOTHER:

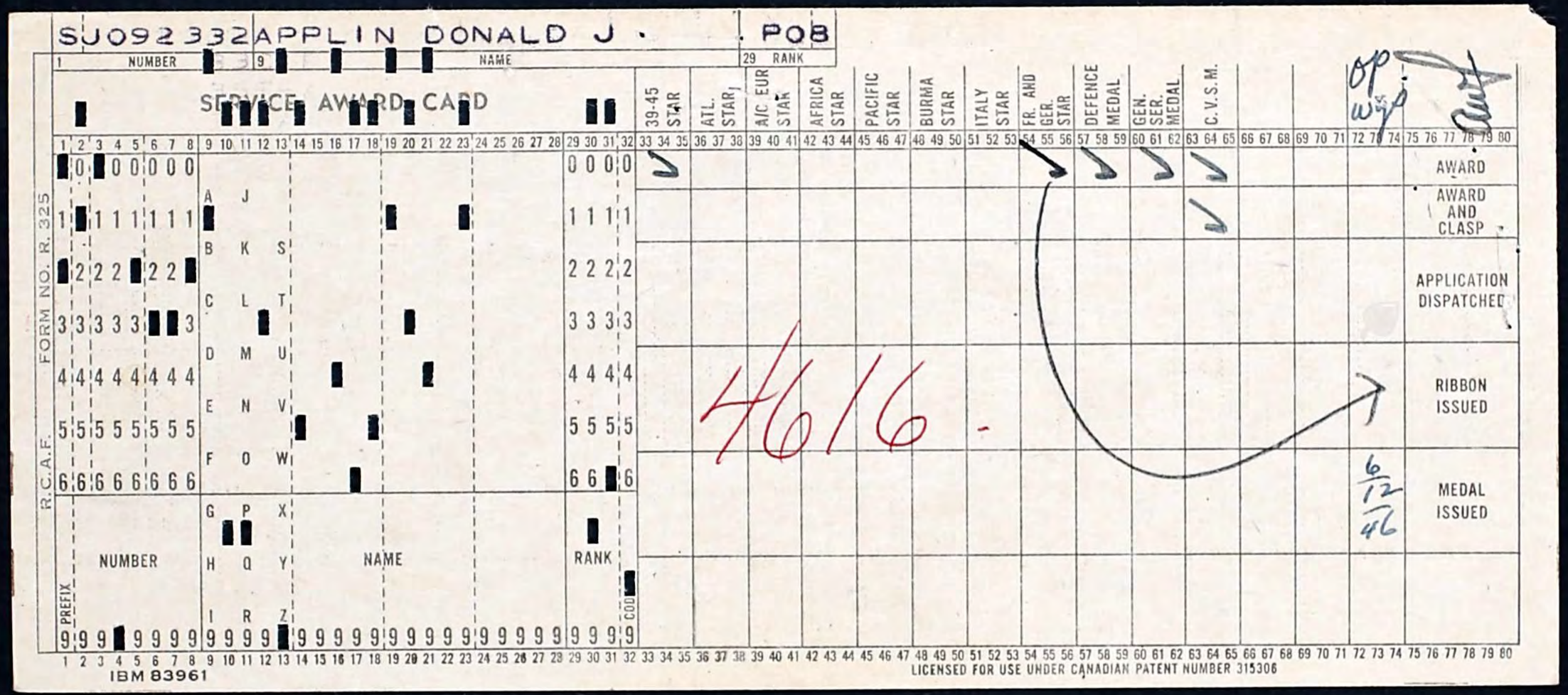
MAR 2 1945

To Mother and Father- DEL'D TO WIFE:

Mr. & Mrs. John Applin,
651 Grosvenor Avenue,
Westmount, Quebec.

COMMAND:

RELIGION:


SU092332 APPLIN DONALD J. 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
4616
6/12/46
IBM 83961
LICENSED FOR USE UNDER CANADIAN PATENT NUMBER 315306

6542, 21.3.50

MEMORIAL BAR
DATE DESP
REGN. NO 1281

Mrs. Maud M. Applin (mother)
~~651 Grosvenor Ave,~~
~~Westmount,~~
Que.

3430 DECARIE BLVD.,
MONTREAL 28, QUE

Authy: Letter d/17-6-50

June-45:

RB.

2360-7-7-50

AIR FORCE No. J.92332. R.1895 A.G.

SURNAME: Applin.

FULL CHRISTIAN NAME: Donald. John. 600100000

ENLISTMENT/APPOINTMENT — PLACE: Montreal — DATE: 28-8-42.

RELIGION: U.C.

R.C.A.F. FORM R230

TYPE OF LEAVE

FROM	TO	No. DAYS	DESCRIPTION	AUTH.
10-5-43.	17-5-43 (~~Mar~~)	7	M.T.L.	" 117.
5-10-43.	18-10-43.	14.	Emb. Leave.	253A.
8 11 43	13 11 43	5	Priv Leave	3 PRC 15/43
22 3 44	8 4 44	18	Priv Leave	240TU 44

TYPE OF AIRCRAFT ON WHICH MOST PROFICIENT

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

SERVICE MACHINES FLOWN

CHARACTER AND TRADE ASSESSMENT

DATE	CHARACTER	TRADE ASSESSMENT

HONOURS, AWARDS AND MENTIONS

DATE	AWARD	AUTHORITY
4 10 43.	Wireless Operator's Badge.	DTD. 253A.
24 3 44	Bar to CVSM	Ltd to L 240TU 50/44

POSTINGS, ATTACHMENTS & TEMPORARY DUTY

SOS TOS	FROM TO	DATE	AUTHORITY
SOS.	#2 W.S. #6 B & G.	21 8 43	DTD 200
"	M.T. Ver. #1 "Y" Depot	18 10 43	" 253A.
"	L 4 D 3 PRC	22 Oct 43	" 266
	Embo. Halifax	22 10 43	
	Disembo. U.K.	30 10 43	
	3 PRC (Recat) PRC	31 10 43	6(0)AFU 5/43
SOS	3 PRC to 6(0) AFU	23 11 43	3 PRC 30/43 6(0)AFU 5/44
TOS	240TU from 6(0) AFU	11 1 44	240TU 3/44
SOS	240TU ~~to~~ 61 Base	8 4 44	61 Base 52/44 240TU 3/44
ATT to	Dalton Battle School	22 4 44	61 Base 3/44 92/44
ATT to	1659 CU	19 5 44	1659 CU 34/44
FOS	419 Sqn fr 61 Base	19 5 44	419 Sqn 38/44 61 Base 45/44
F/13	Missing from 419 Sqn.	13 6 44	419 Sqn 192/44 CR 490 AFRO 1536/44
SOS	419 Sqn to REAF UK N/E Unit	13 6 44	419 Sqn 46/44
	MISSING BELIEVED KILLED		CR 597 Q 14/10/44
	Presumed Dead		CL 685/44 AERO 5088/293

ALL OTHER CASUALTIES

CASUALTY AND DATE	AUTHORITY

ADVISE ENTRIES
UNIT RECORDS RETURNED
TO CANADA

Emb. 22-10-43

AIR FORCE No. J. 92382. R.189546

SURNAME: Applin.

FULL CHRISTIAN NAME: Donald John.

ENLISTMENT/APPOINTMENT — PLACE: Montreal. DATE: 28-8-42.

RELIGION: R.C. 2

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

Duration. Comm. 11.6.44.

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

BIRTH DATE	PLACE	COUNTRY	CITIZENSHIP	RACIAL ORIGIN
28-7-22.	Montreal P.Q.	Canada	Canada.	British

CIVIL EDUCATION

PUBLIC SCHOOL	JUNIOR MATRICULATION 4 yrs.
HIGH SCHOOL ENTRANCE	SENIOR MATRICULATION
TECHNICAL SCHOOL	UNIVERSITY
CORR./BUSINESS COURSES	LANGUAGES SPOKEN

CIVIL OCCUPATIONS AND EXPERIENCE

Office Clerk. 1 yr.

PREVIOUS SERVICE

Nil.

PLACE AND DATE OF MEDICAL	CATEGORY	PLACE AND DATE OF MEDICAL	CATEGORY
28-8-42.	A1B A3B.		

OFFICERS

RANK, BRANCH AND CATEGORY	DATE	AUTH.	DUTIES PERFORMED DURING SERVICE, E.G. ADJ.
P/O(R)SS. GL. W.O.O.	11 6 44	PRO 1259/44 PRO 332/45.	— T/Sgt (pd). 4 10 43 DRO 253A

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

PARTICULARS OF FAMILY

SINGLE, MARRIED, WIDOWER, DIVORCED: S.

WIFE (FULL MAIDEN NAME) OR HUSBAND:

PRESENT ADDRESS (IN PENCIL):

PLACE OF MARRIAGE: DATE:

AUTHORITY (IF AFTER APPOINTMENT/ENLISTMENT):

CHILDREN

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

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

Mr. John Applin (Father).
651 Grosvenor Ave.
Westmount P.Q.

EMPLOYMENT AS INSTRUCTOR OFFICER AIRMAN/AIRWOMAN

TYPE	FROM	TO	TYPE	FROM	TO

T4 AIRMEN AND AIRWOMEN 3041

RANK	DATE	AUTH.	TRADE	DATE	AUTH.
T/Sgt (pd).	4 10 43	DRO 253A	~~Aircrew (W.S.)~~	~~28 8 42~~	
			— W.O.A.G.	4 10 43	DRO 253A

OFFICERS, AIRMEN/AIRWOMEN

COURSE OR TRADE	GRP.	%	PF	DATE

ADVISE ENTRIES
UNIT RECORDS RETURNED
TO CANADA

AIR FORCE No. ~~R.189546~~

J.92332

APPLIN, **DONALD JOHN**

SURNAME — FULL CHRISTIAN NAMES

OFFICER

RECORD OF SERVICE AIRMEN

Comm. 11-6-44 13

ENLISTMENT PLACE Montreal, P.Q. DATE 28-8-42

RE-ENLISTMENT

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

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

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	5 M.D. Lachine	28	8	42	5 M.D. 206
SOS	#5 M.D. Lachine	5	12	42	5 M.D. 291
TOS	PAED McGill Montreal Que	6	12	42	9PAE 1
SOS	9 PAE McGill	5	2	43	9PAE 2
TOS	2 W.S. Calgary	6	2	43	2WS 35
SOS	2 W.S. Calgary Alta	21	8	43	2WS 200
TOS	6 B & G. Mt. View Ont.	22	8	43	MV 215
Sos	6 B&GS Mt. View	18	10	43	Mv. 253a
Tos	1 "Y" D Halifax N.S.	19	10	43	1 YD 257
SOS	1 Y. Depot 3 PRC	22	10	43	1 Y 264
Presumed Dead. 13 June, 44. DCL 938a/3 Feb.45.					
	COMPLETED	9	7	45	
	Missing	13	6	44	
	PCX 882	14	6	44	

2. RECLASS'NS-PROMOTIONS-ETC.

RANK	EFFECTIVE			D.R.O.
AC2	28	8	42	5 M.D. 206
LAC	8	3	43	2WS 65
T/Sgt (od)	4	10	43	Mv 253a
P/O 11-6-44 / AP+R 13/22-1-45				AFRO 132/45 GB 259

3. MEDICAL HISTORY

EXAMINATIONS (IN RED INK)

DATE	FORM	CATEGORY	REMARKS
28/8/42	R100	A1B/A3B	

HOSPITALIZATION (IN BLACK INK)

HOSPITAL / QUARTERS	ADMITTED / CONFINED	DISCHARGE / RET'N DUTY	D.R.O.

4. TRADE AND CHARACTER

TRADE	GROUP	EFFECTIVE			D.R.O.
Aircrew W.S.	5	28	8	42	5 M.D. 206
W.O. (A.G.)	St.	4	10	43	Mv. 253a
W. Off. Op. Bu. Gl.		11	6	44	AP+R 13/22-1-45

TRADE PROFICIENCY	CHARACTER ASSESSMENT	DATE OF R41

5. COURSES-TESTS-ETC.

SUBJECT	RESULT	DATE	AUTHORITY

6. LEAVE

FROM	TO	DAYS	REMARKS	D.R.O.
26-1-43	6-2-43	11		9PAE 2
10-5-43	17-5-43	7	Mid-Term	2WS 117
5-10-43	18-10-43	14	Embark	Mv. 253a

6(A) RATIONS AND QUARTERS

UNIT	DATE COMMENCED	DATE DISCONTINUED	D. R. O.

1 2 R.C.A.F. OVERSEAS · 3 4 5 ENLISTMENT MARITAL STATUS · 6 7 8 PRESENT MARITAL STATUS · 9 10 11 12 13 14 15 HIGH & TECH. SCHOOL EDUCATION · 16 17 18 19 20 21 22 23 RELIGION C. OF E. BAP. U.C. PRES. R.C. HEB. MIS. OTHER PRO. · 24 PREV. SERV. · 25 26 27 28 29 30 31 32 33 PROVINCE OF ENLISTMENT · 34 35 36 37 DISCHARGE · 38 AC

AIR FORCE No. R. 189546

SURNAME APPLIN, FULL CHRISTIAN NAMES DONALD JOHN

ENLISTMENT PLACE Montreal, P.Q. DATE 28.8.42 RE-ENLISTMENT

C.R. FILE NUMBER R88

J.92332 OFFICER

RECORD OF SERVICE AIRMEN

Comm. 11-6-44

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

7. BIRTH: DATE 28-7-22 PLACE Montreal, P.Q. CITIZENSHIP British

FATHER (FULL NAME) John Applin

BIRTHPLACE Newfoundland

MOTHER (FULL MAIDEN NAME) Maude Neil

BIRTHPLACE Quebec.

8. EDUCATIONAL STANDING P.2.

HIGH SCHOOL ENTRANCE X

JUNIOR MATRICULATION X "

SENIOR MATRICULATION

TECHNICAL SCHOOL Oct/41 - May/42 draughting (at night)

UNIVERSITY

CORRESPONDENCE COURSES

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

Office Clerk 1941-42

$300

10. PREVIOUS ARMY, NAVY OR AIR FORCE SERVICE ?

Nil

0

11. HONOURS-AWARDS, MENTIONS	AUTHORITY	DATE
W.D.C.A.G.I. Badge	MW 2530	4.10.43
C.V.S.M. Maple Leaf	AB 117.	273-44

12. FLYING EXPERIENCE ON ENLISTMENT (HOURS)

SOLO — DUAL — PASSENGER —

13. RELIGION United Church

14. LANGUAGES English, a little French

15. SPORTS all sports.

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: John Applin RELATIONSHIP Father

ADDRESS: 651 Grosvenor Ave., Westmount, P.Q. 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.

21. ENGAGEMENTS

TERM	EFFECTIVE	D.R.O.	TERM	EFFECTIVE	D.R.O.
Duration	28 8 42				

22. TEMPORARY DUTY AND MISCELLANEOUS ENTRIES

FROM	TO	DATE	D.R.O.
S.L.T.W.	C.29302 4.	6-5-43	2W5.117.

Date and Place of Signing R40.

22.(A) ADDRESS PRIOR TO ENLISTMENT

651 Grosvenor Ave., Westmount, P.Q.

22310

23. DOCUMENT CONTROL (INDICATE RECEIPT BY DATE)

R60	R79	B465	X-RAY	AFM-13	IDN. CARD	K.X.
		11-9-42				

R189546A8446

"CTF CANADA"

R.C.A.F. A. 67

ROYAL CANADIAN AIR FORCE

SERVICE

AND

PAY BOOK

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

10229

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.

Missing

J92332 1

Air Force No. R189546 Surname APPLIN

Christian Names (in full) DONALD JOHN

Date of Birth 28-7-22 Religion U.C.

Date of Enlistment/Appointment 28-8-42

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

Occupation in Civil Life Office Clerk

Signature of Holder D. J. Applin

Name and Address of Next-of-Kin

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

Mr John Applin
65-1 Inverness Ave.
Westmount
(Father) P.Q.

Certified Correct R E Beckler P/O

Date Place 4 Depot

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
W.O.A.G.	4-10-43	Do 253	H.E. Hackler P/O

Rank	Date of Effect	Authority	Signature and Rank of Officer making Entry
Sgt.	4-10-43	Do 253	H.E. Hackler P/O
P/O	4.6.44	d/o 125 9/44.	

MEDALS, DECORATIONS, MENTIONS, ETC.

Particulars	Date and Authority	Signature and Rank of Officer

MISCELLANEOUS ENTRIES

(For entries for which space is not otherwise provided)

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

Particulars	Date and Authority	Signature and Rank of Officer
1250	20/10/43	H. Young Sgt.

LEAVE RECORD
(With Free Railway Warrant)

From (date)	To (date)	Signature of Officer

LEAVE RECORD
(With Special Leave Warrant A.24)

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

MEDICAL CLASSIFICATION

Date	Category	Medical Board or Medical Exam. (Form No.)	Unit	Initials of M.O.
27-9-43	A3B(T)	B-2	1 F.	HOPKIRK
18:5:44	V.A.	R 6/6 L 6/6		

BLOOD GROUP

Date	International	Initials of M.O.
	BLOOD GROUP O	

NIGHT VISUAL CAPACITY

Date	Score	Group	Initials of M.O.

PRESCRIPTION FOR SPECTACLES

	Vision without Glasses	SPH	CYL	Axis Standard Notation	Vision with Glasses	Unit	Date of Exam.
R						Frame No. (or measurements)	Date of Issue
L							

Initials of M.O.....

	Vision without Glasses	SPH	CYL	Axis Standard Notation	Vision with Glasses	Unit	Date of Exam.
R						Frame No. (or measurements)	Date of Issue
L							

Initials of M.O.....

DENTURES SUPPLIED

Particulars	Date	Initials of Medical or Dental Officer
.....	.....	.....
.....	.....	.....
.....	.....	.....
.....	.....	.....
.....	.....	.....

SURGICAL APPLIANCES ISSUED

Particulars	Date	Initials of M.O.
.....	.....	.....
.....	.....	.....
.....	.....	.....
.....	.....	.....
.....	.....	.....

MISCELLANEOUS MEDICAL ENTRIES

(for entries for which space is not otherwise available)

Particulars	Date	Initials of M.O.

MEDICAL INSTRUCTIONS TO PERSONNEL ON LEAVE IN CANADA

1. Personnel on leave or pass or otherwise absent from their parent unit who require medical attention are to report to the nearest R.C.A.F. Medical Officer. In cases of urgency when the services of an R.C.A.F. Medical Officer are not available, report to:

(a) An R.C.A.M.C. Medical Officer,

(b) A Medical Officer of the Dept. of Pensions and National Health, or

(c) A civilian medical practitioner,

in that order.

2. When it is necessary to call in other than an R.C.A.F. Medical Officer, arrangements are to be made to notify the R.C.A.F. Medical Officer, if one is located in the vicinity, in order that he may assume charge of the case. Immediate action is also to be taken to notify the individual's Commanding Officer in the event that the illness is of serious nature and likely to delay reporting to the unit on termination of leave.

3. All accounts for attendance upon personnel on leave rendered by civilian hospitals or civilian practitioners are to be forwarded in triplicate to the nearest administrative centre of the Dept. of Pensions and National Health for payment.

4. Personnel who, while on leave, are in contact with a case of infectious disease are, on the termination of their leave, to report to their Station Medical Officer before they enter any barrack block, mess or other building on the station.

WILLS

1. The particulars of the next-of-kin should always be carefully inserted in the Form on page 1 of this Book, but the Officer or Airman must understand that the entries made there have no legal effect with respect to the disposition of his estate in the event of his death and therefore do not relieve him from the necessity of making a Will. Unless an Officer or Airman duly makes a Will, his estate is dealt with in the same manner as that of any other person who dies without leaving a Will, and not only may the relative or person desired or intended to be benefited receive little or no share of the estate but the distribution thereof is delayed until such of the next-of-kin as may be legally entitled can be located. Therefore, though his estate may consist of no assets other than the amount of pay and allowances at credit and the belongings he has on his person or in camp, it is urgent that he make a Will which, when completed, is left with his Commanding Officer for transmission to the Records Office for safe custody and in the event of his death is forwarded firstly, to the Estates Branch, Department of National Defence, Ottawa, for administration and distribution of the Service estate, and secondly, if other assets (including real estate) make it necessary, to the Executor named in the Will.

2. The Officer's or Airman's Will should preferably be made out on the Will Form—R.C.A.F. R. 60 (English) or R.C.A.F. R. 60A. (French)—provided for that purpose and on which are also printed a number of helpful instructions. These Forms are obtained through the Commanding Officer of each Unit. A separate sheet of paper may be used but in such case the general form of the Will as shown in the Form R.C.A.F. R. 60 or R. 60A. should be carefully followed. The Officer or Airman will date the Will and at the bottom of it sign his name in the presence of two witnesses who at the same time in the presence of each other and of the Officer or Airman will also sign their respective names. If the Officer or Airman cannot write, he will make his mark in the place in the Will where his signature would ordinarily appear, and immediately above their signatures on the Will the witnesses will write a memorandum as follows:—"The above Will has been first duly and audibly read over to this Officer or Airman when he appeared

to understand it and made his mark hereto in our presence as aforesaid". In such cases, however, it is recommended that the guidance of the Officer's or Airman's immediate superior Officer be obtained.

3. The Short Form of Will (see pages 15 and 16 of this Book) may be used by an Officer or Airman on Active Service but it must be entirely in his own handwriting. It is pointed out, however, that under the laws of some of the Provinces of Canada, such a Will is ineffective as to real estate. Therefore an Officer or Airman having a Canadian domicile and owning real estate should use the Will Form R.C.A.F. R. 60 or R. 60A., and appoint therein a responsible executor. An Officer or Airman having a domicile out of Canada should not use the Short Form on page 16 because it may not comply with the law of such domicile.

4. No person who receives any benefit under a Will can be a witness. If a person to whom an Officer or Airman intends to give any part of his estate is a witness of the Will, he will not be allowed to receive the intended gift. He may, however, be appointed an executor.

5. When making a Will it is not desirable that alterations be made in it. If, however, alterations are made by the Officer or Airman in his Will, he and the two witnesses must write their initials in the margin opposite the alterations. Any changes in the provisions of a previously made Will can always be made by a new document called a Codicil which should refer to the previously made Will and then state the changes desired, and be dated and signed and witnessed in the same manner as the Will itself.

6. A completely new Will can at any time be made and in such case it revokes, or cancels, any Will of earlier date. The laws of all the Provinces of Canada except one, and of most English speaking countries provide that marriage after the date of a Will revokes that Will. Therefore, an Officer or Airman, immediately upon his marriage, should make a new Will in order that, in the event of his death, his estate may be distributed in accordance with his wishes as shown in his Will.

7. The Will of an Officer or Airman on Active Service is not invalid by reason that at the date it was made he was under the age of 21 years.

An Officer or Airman who has made a Will before his enlistment, is recommended to inform his Commanding Officer where such Will has been deposited and the Commanding Officer shall upon receipt of such information forthwith complete the following certificate and despatch the same to the R.C.A.F. Records Officer.

No.....Rank.....Name.....
states that he has executed a Will and that the same has been deposited with.....
at.....

Signature of Officer.....

Rank or Appointment.....

Date.....

Before embarkation, each Officer or Airman is recommended, particularly those who have real estate, to consider the necessity for executing a document appointing some person or Trust Company his Attorney to manage or otherwise deal with real estate during his absence from Canada; also to review his affairs in the light of any changes that may have occurred since the date of his last Will and, if desirable, make a formal Will and inform his Commanding Officer thereof as indicated at the top of this page, or make a Will on R.C.A.F. R. 60 or R. 60A., and hand it duly completed to his Commanding Officer for transmission to the Records Officer concerned for safe custody.

The Officer receiving such Will shall complete the following certificate:—

Certificate R.C.A.F. R. 60 or 60A. received and forwarded to the R.C.A.F. Records Officer.

Signature of Officer.....

Rank or Appointment.....

Date.....

Date Certificate extracted.....
Signature of Officer.....
Unit.....
To Whom sent.....

To Whom sent.....
Unit.....

Solely for use on Active Service. The Will, on page 16, must NOT be used until you have been placed under orders for Active Service.

SHORT FORM OF WILL

(Write Will on next page)

If an Officer or Airman on active service, or under orders, for active service, who has not previously made a Will, or who having previously made one, wishes to cancel it in its entirety or make some change in the disposal of his property, he may do so on the next page. **It must be entirely in his own handwriting and must be signed by him and dated.** The full names and addresses of the persons whom he desires to benefit, and the sum of money or the articles of property which he desires to leave to them, must be clearly stated. **The writing of the name of a person on the next page without stating what he or she is to receive is of no legal value.**

The following is a specimen of a Will leaving all to one person:—

In the event of my death I give all my estate to my mother, Mrs. Sheila Griffin, 711 Victory Street, Toronto, and appoint her my executrix.

(Signature) GEORGE GRIFFIN,
Sgt., R. 12345,
Date October 10th, 1942. R.C.A.F.

The following is a specimen of a Will leaving gifts to more than one person:—

In the event of my death, I give $10.00 to my friend, Miss Rose Smith, of No. 1, High Street, London, and I give $5.00 to my sister, Miss Margaret Griffin, 711 Victory Street, Toronto, and I give the remainder of my estate to my mother, Mrs. Sheila Griffin, 711 Victory Street, Toronto, and appoint my mother my executrix.

(Signature) GEORGE GRIFFIN,
Sgt., R. 12345,
Date October 10th, 1942. R.C.A.F.

Date Will extracted.....
Signature of Officer.....

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.....

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.189546~~ J92332 Name APPLIN Donald John Rank ~~T/Sgt~~ P/O
(In full in block capitals, surname first). (Or acting appointment).

R.A.F. Trade W/Op.A.G. (grp 2) Special Qualifications
(e.g., Gas Instructor, Fire Fighter, Boxing Instructor).

Date of Birth 28.7.22. Religion U.C. Occupation in Civil Life Office Clerk 1 yr.

Last Enlisted 28.8.42. Current Engagement D of W

If a member of the Auxiliary Air Force

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

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

Mr J. Applin 651 Grosvenor Ave Westmount P.Q.

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.")

N of K

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

Section 1.—Movements and Casualties.

Unit FROM which.	Unit TO which.	Date of Effect.
Mt.View	No 1 Y Depot	18.10.43.
No 1 Y Depot	U.K.	22.10.43.
	Emb. Halifax	22.10.43.
	Dis. U.K.	30.10.43.
Int C 137	3 RCAF PRC	31.10.43.
3 RCAF PRC	No. 6(O)AFU	23.11.43.
6(O) AFU.	24 O.T.U	11.1.44.
24 O.T.U.	61 Base Topcliffe	8.4.44
61 Base	419 Sqn.	19.5.44
419 Sqdn.	M.K.N.E. Unit	13.6.44
Discharged on app- to Commission		10.6.44
		O/0125 9/44.

Section 2.— Promotions, Acting Appointments (Paid or Unpaid), Reductions, Remusterings.

* Authority.	Description.	Date of Effect.
	Aircrew WS Std A.C.2.	28.8.42.
	" " " L.A.C.	8.3.43.
	W/Op.A.G. "Sp" T/Sgt	4.10.43.
	" " GRp 2 T/Sgt	4.10.43.

Section 3.—Good Conduct Badges.

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

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

(*11902—10349) Wt. 54527—5881 50M 4/43 T.S. 700
(*12754—10349) Wt. 22097—P1168 40M 8/43 T.S. 700

Section 4.—Character and Trade Proficiency.

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

Rank.	Character.	Trade Classification.	Proficiency. A	Proficiency. B	Proficiency. C	Whether specially recommended, recommended, or not recommended for promotion or reclassification.	Date.	Signature and Rank of Commanding Officer.
Sgt.	VG	WOP/AG.	ON STRENGTH FOR TRAINING ONLY.				31.12.43	P. Jarden S/Ldr.
F/L.	V.G.	WOP/AG.	SAT.	SAT.	81	Rec.	17/6/44	[illegible] W/C.

BR 30/44 15/43 1200 hrs 18 days P. Leave. 22/3 - 8/4/44 to 1200 hrs 8.11.43 to 1200 hrs 13.11.43 5 days Pass. Leave. RND 911428. RW. E15654 5/0 4/0

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 W/Op.A.G. Badge	4.10.43.

R.C.A.F. Special Reserve

Aircrew (W.S.)

"C.T.E. CANADA"

ROYAL CANADIAN AIR FORCE

RECORD OF SERVICE AIRMEN

J92332
~~R.189546~~ A.F. No. | Applin Surname | Donald John Christian Names | United Religion

Born 28-7-22 Place Montreal, P.Q. Country Canada | Citizen of Canada | Racial Origin British

PARTICULARS OF FAMILY M. S. D. W.

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

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

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

John Applin, Father,
651 Grosvenor Ave.,
Westmount, P.Q

CIVIL EDUCATION		CIVIL OCCUPATIONS AND EXPERIENCE
High School Entrance	Jr. Mat. 4 yrs. Sr. Mat.	Office Clerk 1 yr.
Technical School	Business Courses	
University		

PREVIOUS SERVICE	ENLISTMENT		Med. Cat.	Date			Med. Cat.	Date		
Nil	Date	28-8-42	A,B A3B	28	8	42				
	At	Montreal								
	Term	Duration								

RANK	Auth.	Date			TRADE	Auth.	Date			TRADE TESTS AND COURSES						
										Trade	GP	%	P or F	Date		
AC2		28	8	42	Aircrew (W.S.)		28	8	42	Aircrew (W.S.)	S		P	28	8	42
LAC	ORO65	8	3	43						Rem. W.O. A.G.	S		P	4	10	43
T/SGT. (pd)	DRO 253A	4	10	43												
P/O ~~R.55~~ OP	12 59/44	11	6	44												

LEAVE			CHARACTER AND TRADE ASSM. HONOURS, AWARDS AND MENTIONS					
From	To	Auth. and Description	Date	Character	Trade and Assm.	Honours and Awards	Auth.
23-12-42	29-12-42	Xmas leave DRO 3/42	4 10 43	Awarded Wireless Operator Air Gunners Badge			DRO 253A
26-1-43	6-2-43	11 days spec leave DRO 2/43					
10-5-43	17-5-43 (7)	M.T.L. DRO 119					
5-10-43	18-10-43 (14)	DRO 253A Embarkation					

MOVEMENTS AND CASUALTIES

AUTHORITY	UNIT FROM	UNIT TO	DATE	AUTHORITY	UNIT FROM	UNIT TO	DATE
NDHQ/13	RIC	No 5 M.D.					
	Montreal	Lachine	28-8-42				
DRO-206-42	TOS-	5 MD Lachine	28-8-42				
DRO 29/42	5.7.42	McGill U.M	5-12-42				
DRO 42/43	#6 Re-Adm. Recieved	#2 W.S.					
	Det. McGill	Calgary	5-2-43				
Issued S.L.T.W.	C 29302	4 DRO. 417	6/5/43				
DRO 200	#2. W.S.	#6. Bvd.	21-8-43				
DRO 253A/43	Mk. Univ. Ont.	#1 "Y" DEPOT HALIFAX, N.S.	18 Oct 43				

"C.T.E. CANADA"

R.C.A.F. Special Reserve

Appendix "D"
M.20/10

ROYAL CANADIAN AIR FORCE
INTERVIEW REPORT

1. SURNAME..... APPLIN

2. CHRISTIAN NAMES..... DONALD JOHN

3. APPLYING FOR ENLISTMENT AS..... AIRCREW IT.S.

SELECTION BOARD

4. PERSONNEL OFFICER.
Education..... 11

C.A.T. Score..... 41 M.A.T. ..... C.A.T. 66

ASSESSMENT: (Educational Standing; Ability to Learn; Personal Background)
C.T. C.A.T. educational standing satisfactory

.....

.....

RECOMMENDED FOR..... Aircrew W.S.

SUITABLE FOR COMMISSION..... NO

.....

15-8-42 Signed, J.L.P.Lambert F.O.

5. MEDICAL OFFICER.
Medical Category..... A1B A3B

Assessment; (Physical; Temperamental)
Steady, cooperative, gentlemanly and intelligent, excellentp;hysique good aircrew material

RECOMMENDED FOR..... Aircrew W.S.

SUITABLE FOR COMMISSION..... YES

Signed H.W.Laws F.L.

6. INTERVIEWING OFFICER

ASSESSMENT: (General Fitness)..... Completed 4 years high school.
only fair in mths. wants to take W.E.T.P. course. Health record good. can drive a car, clerk by trade. All sports moderately. Fair marksman. Very keen to fly. Prefers pilot. Keen creates good impression. Looks excellent.

RECOMMENDED FOR..... Aircrew I.T.S. W.E.T.P.

SUITABLE FOR COMMISSION..... YES

28-7-42 Signed J.C.Laffoley F.O.

FOUND ACCEPTABLE FOR..... Aircrew W.S.

Potential Recommended

DATE: 28-8-42 J C. L.

For Commanding Officer
No. 13 Recruiting Centre RCAF.,
Montreal, P.Q.

A.F.M. 5
24.12.41

"C.T.E. CANADA"

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

ROYAL CANADIAN AIR FORCE

Individual Record of Flying

RANK L.A.C NO. R189546 NAME Applin, D.J.

UNIT	PERIOD ENDING	SERIAL NO.	SINGLE-ENGINE AIRCRAFT DAY 1ST PILOT (A) Hrs	(A) Mins	2ND PILOT (B) Hrs	(B) Mins	DUAL (C) Hrs	(C) Mins	SINGLE-ENGINE AIRCRAFT NIGHT 1ST PILOT (D) Hrs	(D) Mins	2ND PILOT (E) Hrs	(E) Mins	DUAL (F) Hrs	(F) Mins	MULTI-ENGINE AIRCRAFT DAY 1ST PILOT (G) Hrs	(G) Mins	2ND PILOT (H) Hrs	(H) Mins	DUAL (J) Hrs	(J) Mins	MULTI-ENGINE AIRCRAFT NIGHT 1ST PILOT (K) Hrs	(K) Mins	2ND PILOT (L) Hrs	(L) Mins	DUAL (M) Hrs	(M) Mins	CREW DUTIES OBSERVER (N) Hrs	(N) Mins	AIR GUNNER (O) Hrs	(O) Mins	OTHER (P) Hrs	(P) Mins	PASSENGER (Q) Hrs	(Q) Mins	TOTAL (R) Hrs	(R) Mins
#6 B&G	31/7/43																												29	40			2	30	32	10
#6 B&G	4/8/43																																		14	45

CERTIFIED FLYING TIMES CORRECT
Officer i/c Air Operating
Section No. 2 Wireless
School, R.C.A.F.

No. 6 B. & G. SCHOOL

W. L. Hagues S/LDR.
O/C GROUND INSTRUCTION SCHOOL
No. 6 B. & G. SCHOOL
MOUNTAIN VIEW - ONT.

No. 6 (O) A.F.U. sub form 5055

1. Surname APPLIN Christian Names D.J

2. Number R.189546 3. Rank Sgt 4. Course number 97 WO/AG

Date course commenced 5. Posted from 3 PRC 6. 24.11.43 Date course ended 7. 11.1.44 Posted 8. to 24 OTU

Date 23.11.43 Date 11.1.44

9. Morse and Visual Tests.

Tests	Required	Obtained on arrival at Unit Sending	Receiving	Obtained at end of course Sending	Receiving
Morse speed P/L	18 W.P.M	18	18	21	22
Morse speed code	18 W.P.M.	18	17	21	21
Aldis lamp speed	8 W.P.M.	6	6	8	8

10. Ground Results.

Subject	Marks allotted	Marks obtained
Knowledge of W/T R/T & Electrical aircraft Equipment	200	140
W/T set Manipulation	200	160
Fault finding	200	100
W/T procedure	200	160
W/T Organisation	200	100
TOTAL	1,000	660
	per cent	66

11. Air Results

Subject	Marks allotted	Marks obtained
W/T set Manip:	300	231
D/F loop manip:	200	158
Air op: procedure	400	332
Log keeping	100	82
TOTAL	1,000	800
	per cent	80

12. Number of W/T operations done in aircraft at this Unit.

Frequency changes 67	H/F D/F Bearings 13	D/F Loop bearings 9
Messages received 12	M/F D/F Fixes 3	Flying control con.
Messages transmitted 18	H/F D/F Homings 8	Darky exercises
Descent thro' cloud ex:	Daily inspection 6	Homing A/C-A/C or S/V-A/C

13. Degree of Aptitude for Navigation.

0	1	2	3
~~POOR~~	MODERATE	~~GOOD~~	~~EXCEPTIONAL~~

14. Flying Times at this Unit

Type of aircraft	Type of W/T Equip:	Hourse at W/T set	Total hours.
Anson	Marconi. G.P	11.55	18.20

15. Assessment of Qualities of Character and Leadership.

Marks allotted	Marks obtained
100	25

16. Degree of suitability as WO/AG Instructor.

0	1	2	3
Not at all suitable	~~Moderately suitable~~	~~Definitely suitable~~	~~Extremely suitable~~

Date 21.1.44

Signed
for W/Cdr. for Officer Commanding.
No. 6 (O) A.F.U. Staverton.

Confidential R.A.F. Form 5042 B

R.A.F.—TRAINING REPORT

WIRELESS OPERATOR/AIR GUNNER

No. 24 O.T.U.

1. Surname APLIN, Christian Names D.J.

2. Number R.185546 3. Rank Sgt. 4. Course No. 40

5. Posted from 6 (O) A.F.U. 6. Date Course commenced 11.1.44. 7. Date Course ended 17.3.44. 8. Posted to Dalton B. School.

Date 11.1.44. Date 8.4.'44

9. Morse and Visual Tests.

TESTS	REQUIRED	Obtained on Arrival at Unit		Obtained at end of Course	
		S.	R.	S.	R.
Morse Speed P/L (through interference)	18 w.p.m.	18	18	20	20
Morse Speed Groups (through interference)	18 g.p.m.	18	18	20	20
Aldis Lamp Speed	8 w.p.m.	8	8	10	10

10. Ground Results.

SUBJECT	Marks Allotted	Marks Obtained
Knowledge and Manipulation of W/T and R/T Equipment	300	252
W/T Organisation and Procedure	200	168
Special Equipment	200	160
Navigation	100	-
Armament	100	74
Log-keeping	100	74
Total ...	1,000	728
Per cent. ...		72.8%

11. Air Results.

SUBJECT	Marks Allotted	Marks Obtained
Air Operating	1,000	700
Per cent. ...		70

12. Number of W/T Operations Done in Aircraft at this Unit.

H/F D/F Contacts (Base)	47		Messages Received...	4
H/F D/F Contacts (not Base) ...	86		Messages Transmitted	45
M/F D/F Fixes	23		Flying Control Contacts	24
M/F D/F Sections Worked ...	-		Daily Inspections	25
Loop Bearings (Practice)	V. 82	A. 81	Per cent. Broadcasts Received ...	99
Loop Bearings Plotted by Navigator	75	73		70%

13. Number of Gunnery Practices at this Unit.

	AIR FIRING		CINE CAMERA GUN	
	Number of Exercises	Number of Rounds	Number of Exercises	Number of Rounds
Air—Ground				
Air—Air				

14. Flying Times at this Unit.

TYPE OF AIRCRAFT	TYPE OF W/T EQUIPMENT	HOURS AT W/T SET Day	Night	TOTAL HOURS
Anson	T.1154 R.1155	7.40	555	13.35
Whitley	T.1154 R.1155	38.20	40.55	79.15

	Marks allotted	Marks obtained
15. Assessment of Qualities of Character and Leadership	100	

	0	1	2	3
	Not at all suitable	Moderately suitable	Definitely suitable	Extremely suitable
16. Degree of Suitability for Further Training as a W.O./A.G. Instructor			X	

(Mark "X" in appropriate column.)

Remarks :

A consistent reliable operator of very good type, who has obtained good average results.

(Signed) C.T. Burridge, S/Ldr.
Station Signals Officer.

(Signed) T.J. Gunn, W/Cdr.
Chief Instructor.

A.C.P. Carver, G/Capt.

Date 16th. March, 1944.

Signed .....
Officer Commanding.

(*12893) Wt. 25618—P1439 10M 8/43 T.S. 700

CONFIDENTIAL R.C.A.F. FORM 5035

R.C.A.F. TRAINING REPORT

WIRELESS OPERATOR (AIR GUNNER) ~~AND AIR GUNNER~~

NO....6.....BOMBING AND GUNNERY SCHOOL

1. SURNAME.....APPLIN.....CHRISTIAN NAMES.....Donald John.....

2. NUMBER.....R189546.....3. RANK.....LAC..... 4. COURSE NO.....62.....

5. POSTED FROM.....#2 W.S..... 6. DATE COURSE COMMENCED.....23/8/43..... 7. DATE COURSE ENDED.....4/10/43..... 8. POSTED TO.....#1 "Y" Depot.....

9. AIRCREW TRADE.....W.Q.A.G..... 10. HEIGHT.....5'8½".... 11. GIRTH.....31".....

12. EQUIPMENT USED

TYPE OF AIRCRAFT	TYPE OF GUNS			TYPE OF TURRETS			
	IN AIR	ON GROUND	ROUNDS FIRED 25 YD.	IN AIR	ON GROUND	ROUNDS FIRED 200 YD.	HOURS TURRET MANIP.
Bolingbroke	Browning	Browning	405	Bristol	Bristol	1000	17:40
					F.N.		
					B.P.		

13. GROUND WORK

SUBJECT	MARKS ALLOTTED	MARKS OBTAINED
GUNS, PYROS. AND AMMO. (WRITTEN)	200	162
GUNS (PRACTICAL)	100	78
SIGHTING (WRITTEN)	250	208
TURRETS (PRACTICAL)	200	164
A/C RECOGNITION	150	150
SIGNALS	100	100
TOTAL	1000	862
PERCENTAGE		86.2

14. AIR WORK

FLYING EXPERIENCE		DAY	NIGHT
NUMBER HOURS FLOWN		14.45	
NO. CINE EX. COMPLETED		1	
ROUNDS FIRED	AIR TO GROUND	300	
	AIR TO AIR	3400	
% HITS AIR TO AIR		5.6	

AIR FIRING MARK	MARKS ALLOTTED	MARKS OBTAINED
	1000	770

15. ASSESSMENT OF QUALITIES OF CHARACTER AND LEADERSHIP	MARKS ALLOTTED	MARKS OBTAINED
	100	76

16. DEGREE OF SUITABILITY FOR FURTHER TRAINING	0 NOT AT ALL SUITABLE	1 MODERATELY SUITABLE	2 DEFINITELY SUITABLE	3 EXTREMELY SUITABLE
AS A GUNNERY INSTRUCTOR				X

(MARK "X" IN APPROPRIATE COLUMN)

17. REMARKS:- Keen, hard-working, neat student.

DATE:-.....4/10/43.....

W/C ~~G/C~~
6 OFFICER COMMANDING
NO.....BOMBING & GUNNERY SCHOOL

"C.T.E. CANADA"

R.C.A.F. T. 82 (Revised)
50M—1-42 (1590)
H.Q. 1062-13-65

ROYAL CANADIAN AIR FORCE

REPORT ON PUPIL WIRELESS OPERATOR (AIR GUNNER) OR AIR GUNNER

AIR AND GROUND TRAINING

Surname APPLIN Christian Names D.J.

Number R189546 Rank LAC

INSTRUCTIONS

Instructions regarding the use and distribution of this form are contained in Air Force Administrative Order A.51/24.

PART I

WIRELESS TRAINING

1. No. 2 Wireless School. Course No. 62 To 20 Aug/43 From 8 Feb/43

2. *Flying Times*—
   (a) ~~In Flying Classroom~~ as 1st Operator 23 30 hours.
   2nd Operator
   (b) In Flying Classroom, ~~listening watch~~ 6 10 hours.
   (c) In 2-seat aircraft as sole operator N.A. hours.

3. Assessment as Air Operator (delete categories not applicable). Unless at least 5 hours has been shown against para. 2 *(a)* above, no assessment is to be made and therefore all categories are to be deleted.

   Above average
   ~~Average~~
   Below average

4. *Ground Training*—

Subject	Maximum marks	Marks obtained	Subject	Maximum marks	Marks obtained
			D.I. & F.F.	50	47
Theory	50	38	Signals Organization	150	109
Radio Equipment	250	207	~~Armament~~ VISUAL	50 100	48
Morse	200	190	Drill and P.T	50	40
Procedure	200	185	TOTALS	1000	864

Maximum Marks, 1000. Marks Obtained 864 Percentage 86.4 Pass or Fail Pass

Position in Class 48 No. in Class 147

5. Date authorized to wear Wireless Operator's Badge August 20/43.

6. Character and Leadership—Assessment (Max. 500 Marks) 362/500 Marks.

E. R. Owen S/L
Officer Commanding

No. 2 Wireless School

Date AUG 20 1943

To be passed to No. 6 B. G. S.

PART II

ARMAMENT TRAINING

1. No.....B. G. S. Course No.....

2. Dates of Courses:— From.....To.....

AIR TRAINING

GUNNERY

3. *Flying Time*:—

Aircraft	Day	Night	Passenger	Total Hrs.	Total Mins.

4. *Air Gunnery Results*— Average percentage hits to rounds fired

(a) Beam Test..... .....%
(b) Beam Relative Speed Test..... .....%
(c) Under Tail Test..... .....%

5. *Total Rounds Fired*—

Ground..... .....
Air to Ground..... .....
Air to Air..... .....

6. *Assessment*— Marks Obtained

(a) Written Examination..... (100 Marks) .....
(b) Practical and Oral Examination..... (100 Marks) .....
(c) Ability as Firer..... (250 Marks) .....

Totals.....(450 Marks) .....

7. Position in Class..... No. in Class..... Pass or Fail.....
8. Date authorized to wear Air Gunner's Badge.....
9. Character and Leadership—Assessment (Maximum 250 Marks).....Marks.
10. Remarks.....
.....
.....

.....
Chief Instructor
No.....B. G. S.
Date.....

11. *Final Assessment*:—

Course	Training Marks Max.	Training Marks Obtained	Character and Leadership Max.	Character and Leadership Obtained	Totals Max.	Totals Obtained	Totals %
Wireless School.....	1000	.....	500	.....	1500	.....	.....
Bombing and Gunnery School.....	450	.....	250	.....	700	.....	.....
TOTALS.....	1450	.....	750	.....	2200	.....	.....

12. Position in Class..... No. in Class.....
13. Remarks.....
.....
.....

.....
Officer Commanding
No.....B. & G. S.
Date.....

CONFIDENTIAL

R.C.A.F. M.2
150M—8-40 (6421)
H.Q. 1062-10-2

MWV

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

Medical Board held at Montreal, Quebec *Date* Aug. 20/42

FILE NUMBER R189546

Surname APPLIN *Chr. Names* DONALD JOHN
Nature of Commission M2 *Date of Birth* July28/22 *Married or Single* Single
Branch General List *Hours Flown*
Address 651 Grosvenor Avenue, Westmount, Quebec.

HAVE YOU ANY HISTORY OF:—

(i) NERVOUS TROUBLE or Nervous Breakdown NO
Severe or "Sick" Headaches, Migraine NO
Fits or Convulsions of any kind NO
Sun or Heat Stroke NO
Head Injury or Concussion (including "knock-out") NO
Insomnia, Nightmares, Sleep-walking, or Bed-wetting NO
(ii) LUNG TROUBLE or Consumption NO
Bronchitis, Pneumonia or Pleurisy NO
Asthma or Hay Fever NO
(iii) HEART DISEASE, "Weak or Strained Heart" NO
Fainting Attacks or Giddiness NO
Rheumatism, Rheumatic Fever or "Growing Pains" NO
Frequent Sore Throats or Tonsillitis NO
Diphtheria, Scarlet Fever or Scarlatina NO
(iv) STOMACH or BOWEL TROUBLE Chronic constipation.
Chronic Indigestion or Pain after Food Indigestion occasionally.
(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 Granulations of lids past 5 yrs.
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 Sick on street car until age of 12-none since
Discomfort on Swings, Roundabouts, Switchbacks NO never been to sea
(ix) OPERATIONS Tonsils and Adenoids at age of 5
(x) Any Illness or Injury not mentioned above whooping cough, chicken-pox, measles,

Education High School Leaving
Present Occupation Clerk Hobbies stamps, harmonica
Previous Service none
Athletics rugby, tennis, swimming, hockey,
Habits—Smoking none Alcohol none
FAMILY HISTORY—Consumption no
Nervous Ailments, Mental Trouble, or "Fits" no
Father Alive—Health Diabetes Slight Dead—Cause
Mother Alive—Health Good Dead—Cause
Brothers (....) Alive—Health n.a (....) Dead—Cause
Sisters (....) Alive—Health n.a (....) Dead—Cause

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

Date Aug 20/42 *Signature* Donald J. Applin *Witness* H.W. Laws F.L.

GENERAL MEDICAL AND SURGICAL EXAMINATION

Impression given by *(a)* Physique ..good.. *(b)* Mentality ..good..
Body Marks, Scars, Deformities ..none..
Size of Thyroid Gland ..not palpable..
Surgical Abnormalities ..none..
Results of Wounds, Injuries, Operations ..n.a..

	Date Aug.20/42 Assessing Room	Date ... Assessing Room	Date ... Assessing Room	Remarks on any Abnormalities Found
Height (ins.)	68¼			
Weight (lbs.)	150			*Date*
Chest Circumference (ins.)	34½-36½			
Body Build (lbs.)	x 12			
Leg Length (ins.)	39½			
Pulse Rate — Sitting	72			
Pulse Rate — Standing 1st				
Pulse Rate — Standing 2nd				
Pulse Rate — After Exercise				
Pulse Rate — Time to Normal				
Arterial Walls	soft			
Blood Pressure — Systolic	120			
Blood Pressure — Diastolic	86			
Heart — Size	9			
Heart — Sounds	normal			
Heart — Rhythm	regular			
Lungs	normal			
Breath held				
Expiratory Force	80			
Vital Capacity (Best of 5)				
Reflexes — Knee	N N			*Date*
Reflexes — Ankle	N N			
Reflexes — Triceps	N N			
Reflexes — Abdominal	N N			
Reflexes — Plantar	N N			
Cranial Nerves	N N			
Balancing Rod	R. L.	R. L.	R. L. R. L. R. L. R. L.	
Self Balancing	R. L.	R. L.	R. L. R. L. R. L. R. L.	
Tremors — Fingers	lrs ls			
Tremors — Eyelids	SF SF			*Date* August 20/42
Abdomen — Liver	none			Rings tight.
Abdomen — Spleen	normal			Arches good.
Abdomen — Muscular Tone	normal			No urethral discharge.
Urine — Albumen	negative			
Urine — Sugar	negative			
Initials of M.O.				

40 mm. Hg. Test 6, 7 8 6, 7 7 7, 7 6 8, 8 9 9, 7 7 6,
Date .....
Date .....
Date .....
Date .....

Remarks by Consultant.

EYE EXAMINATION

History	Occasional granulation of lids - usually on getting up in the morning.		
Visual Acuity	R. 20/30 , c̄ =		
	L. 20/20 , c̄ 2.5 = 20/200		
Colour Vision	Ishihara Unsafe. Safe Giles Archer Lamp		
Red, Green	Maddox Rod Ortho		
Diaphragm Test (P.D. = 5.8)	4 @ 1.5		
Convergence	C. = 7.0 cms.		
	S. C. = 10.5 cms.		
Accommodation	R. } 8.0		
	L.		
Cover Test	Sl. Div. Dev. R.R.		
Fundi and Media	normal		
Fields	normal		
Remarks:	A1BA3B		
	Initials of M.O. HWL	*Initials of M.O.*	*Initials of M.O.*
	Date Aug.20/42	*Date*	*Date*

EXAMINATION OF EAR, NOSE AND THROAT

History	Tonsils and Adenoids at age of 5			
Hearing	R. Ear	WV 20		
	L. Ear	WV 20		
External Ear, Meatus Membranes	R. Ear	normal		
	L. Ear	normal		
Middle Ear, Eustachian Tubes	R. Ear	patent		
	L. Ear	patent		
Cochlear Apparatus	R. Ear			
	L. Ear			
Vestibular Apparatus	R. Ear			
	L. Ear			
Buccal Cavity		healthy		
Teeth		normal		
Gums		normal		
Pharynx		normal		
Nasopharynx				
Nose		normal		
Larynx				
Remarks:	A1BA3B			
		Initials of M.O. HWL	*Initials of M.O.*	*Initials of M.O.*
		Date Aug.20/42	*Date*	*Date*

HISTORY OF PRESENT CONDITION

Date..... Aug.20/42.....

Good physique. Co-operative an intelligent and gentlemanly. Excellent material.

A1BA3B

H.W.Laws F.L.

FIT
PILOT
OBSERVER
W/OPERATOR
A/GUNNER

Date 25/8/42

M.O.

Service Medical History .....

Height ..... 69 ..... Weight ..... 163 ..... Lbs.
Visual Acuity ..... R ..... 20/20 ..... L 20/20 → Blurs
Colour Vision ..... OK ..... Ishihari 9th Edition .....
Tympana R ..... OK ..... L ..... OK .....
Nose ..... — ..... Throat .....
Heart ..... — ..... B.P. ..... 120/80 .....
Chest ..... V.D. ..... — ..... Hernia ..... —
CATEGORY ..... A3B ..... APPROVED
DATE 7 Feb. 1943 No 2 Wireless School.
..... M.O.

OBSERVATIONS AND FINDINGS BY PRESIDENT OF BOARD

Date.....

R.C.A.F Records
Rec'd MAR 15 1943
O. K. ..... C.
R. C. ..... N. I.
S. L. ..... P. A.

(50) #9 Detach. McGill Univ.

R.C.A.F. G.141

R.C.A.F.

C E R T I F I C A T E O F E D U C A T I O N

THIS IS TO CERTIFY THAT

R189546 AC2 Applin, D.J.
(Number) (Name)

has been a trainee at the Pre-Aircrew Education Course at

McGill Univ., Montreal
(Place)

under the auspices of the University Pre-Aircrew Education ~~War Emergency Training~~ Programme. He has taken the Royal Canadian Air Force final examination in the following subjects and (HAS) ~~(HAS NOT)~~ been recommended as educationally qualified for the category of AIRCREW (~~E.P.S.N.~~).(WS)

Subject	Mark		
English	~~N.A.~~	Signals	100
Science	67	Aircraft Recognition	N.A.
Mathematics	58		

Remarks:

Date: 25-1-43

Signed: W.F. Purvis
(Examination Officer)

(W.F.Purvis) Flight Lieutenant

R.C.A.F. Records Office
Rec'd JAN 28 1943
Cr. K. ..... C.I.S. .....
R. C. ..... N. I. .....
S. L. ..... P. A. .....

CONFIDENTIAL

R.C.A.F. FORM 5000A

RECAPITULATION OF TRAINING AND PERSONAL ASSESSMENTS FOR COMMISSIONING PURPOSES

1. SURNAME APPLIN CHRISTIAN NAMES Donald John

2. NUMBER R189546 RANK LAC

	(1) % of Training Marks Attained Ground / Air	(2) Training Index	(3) Multiply by Weight Factor	(4) Final Training Index	(5) % of C&L Marks Attained	(6) Multiply by Weight Factor	(7) Final C&L Index	(8) Total Index
PILOTS								
ITS			2					
EFTS								
SFTS			2			2		
			TOTAL			TOTALS		
NAVIGATORS								
ITS			2					
AOS or AND			2			2		
			TOTAL			TOTALS		
NAVIGATORS "B"								
ITS			2					
B&G								
AOS or ANS			2			2		
			TOTAL			TOTALS		
NAVIGATORS "W"								
ITS								
W/S								
AOS or ANS								
			TOTAL			TOTALS		
AIR BOMBERS								
ITS			2					
B&G			2			2		
AOS or ANS								
			TOTAL			TOTALS		

(See reverse side)

	(1) % of Training Marks Attained Ground	(1) % of Training Marks Attained Air	(2) Training Index	(3) Multiply by Weight Factor	(4) Final Training Index	(5) % of C&L Marks Attained	(6) Multiply by Weight Factor	(7) Final C&L Index	(8) Total Index
W.A.G.s	86.4		86.4	10/5	864	72.4	5	362	1226
W/S	86	77	163		163	76		76	239
				TOTAL	1027		TOTALS	438	1465
AIR GUNNERS B&G									
				TOTAL			TOTALS		

INSTRUCTIONS FOR USE OF FORM 5000A (RE/CAP SHEET)

Following instructions are issued for your guidance in completing this Form:

Column 1

(a) Enter % of ground marks attained.
(b) Enter % of air marks attained.

Column 2

Percentage of ground marks plus percentage of air marks.

Column 3

The weighting factor by which Column 2 is to be multiplied.

Column 4

Result of Column 2 multiplied by the weighting factor in Column 3. This figure to be entered under Column (g) of Class Report.

Column 5

Percentage of character and leadership marks attained.

Column 6

Weighting factor by which Column 5 is to be multiplied.

Column 7

Result of Column 5 multiplied by the weighting factor in Column 6. This figure to be entered under Column (i) of Class Report.

Column 8

Result of Column 4 added to Column 7. This figure to be entered under Column (j) of Class Report.

CONFIDENTIAL R.C.A.F. FORM 5035

R.C.A.F. TRAINING REPORT

WIRELESS OPERATOR (AIR GUNNER) ~~AND AIR GUNNER~~

NO....6.....BOMBING AND GUNNERY SCHOOL

1. SURNAME.....APPLIN.....CHRISTIAN NAMES..Donald John.....

2. NUMBER..R189546.....3. RANK.....LAC..... 4. COURSE NO.....62.....

5. POSTED FROM..E2 R.S..... 6. DATE COURSE COMMENCED..23/8/43..... 7. DATE COURSE ENDED..4/10/43..... 8. POSTED TO..#1 "Y" Depot.....

9. AIRCREW TRADE.....W.Q.A.G..... 10. HEIGHT.....5'8½"... 11. GIRTH...31".....

12. EQUIPMENT USED

TYPE OF AIRCRAFT	TYPE OF GUNS			TYPE OF TURRETS			
	IN AIR	ON GROUND	ROUNDS FIRED 25 YD.	IN AIR	ON GROUND	ROUNDS FIRED 200 YD.	HOURS TURRET MANIP.
Bolingbroke	Browning	Browning	405	Bristol	Bristol	1000	17:40
					F.N.		
					B.P.		

13. GROUND WORK

SUBJECT	MARKS ALLOTTED	MARKS OBTAINED
GUNS, PYROS. AND AMMO. (WRITTEN)	200	162
GUNS (PRACTICAL)	100	78
SIGHTING (WRITTEN)	250	208
TURRETS (PRACTICAL)	200	164
A/C RECOGNITION	150	150
SIGNALS	100	100
TOTAL	1000	862
PERCENTAGE		86.2

14. AIR WORK

FLYING EXPERIENCE		DAY	NIGHT
NUMBER HOURS FLOWN		14.45	
NO. CINE EX. COMPLETED		1	
ROUNDS FIRED	AIR TO GROUND	300	
	AIR TO AIR	3400	
% HITS AIR TO AIR		5.6	

AIR FIRING

MARK	MARKS ALLOTTED	MARKS OBTAINED
	1000	770

R.C.A.F. Records Office
Rec'd. 16 OCT 1943
O.K. ..... C.I.B. .....
S.C. JB N.I. .....
S. JB P.A. .....

15. ASSESSMENT OF QUALITIES OF CHARACTER AND LEADERSHIP	MARKS ALLOTTED	MARKS OBTAINED
	100	76

16. DEGREE OF SUITABILITY FOR FURTHER TRAINING

	0 NOT AT ALL SUITABLE	1 MODERATELY SUITABLE	2 DEFINITELY SUITABLE	3 EXTREMELY SUITABLE
AS A GUNNERY INSTRUCTOR				X

(MARK "X" IN APPROPRIATE COLUMN)

17. REMARKS:- Keen, hard-working, neat student.

DATE:-.....4/10/43..

6 for OFFICER COMMANDING
NO.....BOMBING & GUNNERY SCHOOL

FORM 6

DOMINION BUREAU OF STATISTICS—QUEBEC DEATH TRANSCRIPT

Do not write in this space

1. PLACE OF DEATH — Municipal county: OVERSEAS (FRANCE) | 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

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

3. NAME OF DECEASED

Surname: APPLIN (Block letters)

Given names: DONALD JOHN

4. RESIDENCE

Street: Grosvenor Ave. No. 651

Official name of civil municipality or township: Westmount

Municipal county: Province: Quebec

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

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

10. BIRTHPLACE (Province or Country): Quebec

11. DATE OF BIRTH: July (Month) 28th (Day) 1922 (Year)

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

OCCUPATION

13. Trade, profession or kind of work, as **spinner, teamster, office clerk,** etc.: Wireless Operator 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: June 13/44

16. Total years spent in this occupation: Two

	17. NAME	18. BIRTHPLACE (Province or Country)
FATHER	Applin, John	Newfoundland
MOTHER (Maiden Name)	Neil, Maude	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)

Do not write in this space

CONFIDENTIAL MEDICAL CERTIFICATE OF DEATH

22. Date of death: June (Month) 13th (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: June 13th 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)

92332

ROYAL CANADIAN AIR FORCE

STATEMENT OF WAR SERVICE GRATUITY

MEMBER'S NAME: Donald J. Applin
(Christian Names) (Surname)

PAYEE: R.C.A.F.
(Christian Names) (Surname)

ADDRESS:

Register No. .....
File No. 21917
Date 13 Aug. 45
Service No. J 92332
Final Rank or Rating P/O
Date of Discharge 13 June 44

Date of Termination of O/S service 13 June 44

	$	¢
A. TOTAL QUALIFYING SERVICE No. of days $\frac{656}{30}$ equal to 21 complete periods @ $7.50		157.50
B. QUALIFYING OVERSEAS SERVICE No. of days 236 less 26 ineligible days, equal to 210 days @ 25¢ per day		52.50
C. SUPPLEMENT FOR OVERSEAS SERVICE Daily Rates at Discharge Pay .....$.....6.25 Subsistence or Lodging and Provision Allowance .....$.....1.70 Additional Pay ....$..... Dependents' Allowance 1/30 of $ .....$..... TOTAL $ 7.95 x 7 = $ 55.65 No. of days $\frac{236}{183}$ x $ 55.65		71.77
DD. WAR SERVICE GRATUITY		281.77
E. Deductions Overpayment of Pay and Allowances $ Dependents' Allowance $ and Assigned Pay Other deductions $		
F. TOTAL AMOUNT PAYABLE		281.77
G. YOUR PROPORTION: (D.A. in issue to you) = ——— of $ (Total D.A. in issue)		

PREPARED BY	CHECKED BY
JFM.	

R.C.A.F. Special Reserve

AIR FORCE NO. R.189546 POSTED TO #5 M.D..Lachine, PQ. TRADE Aircrew WS

ROYAL CANADIAN AIR FORCE

(ATTESTATION PAPER)

26-1-42

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

1. Surname APPLIN FULL Christian Names DONALD JOHN
2. Present Address 651 Grosvenor Ave., Westmount, Que., Telephone El. 5266.
3. Permanent Address 651 Grosvenor Ave., Westmount, Que.,
4. Place of Birth Montreal, Que., Citizenship Canadian.
5. Date of Birth July 28th, 1922. Married, Single, Widower, Separated, Divorced Single.
6. Particulars of Children

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

7. Occupation Clerk. 8. Religion Protestant, United Church.
   State denomination
9. Languages English fluently, a little French.
   State proficiency
10. Next of Kin (Full Name) John ~~XXXXX~~ Applin Relationship Father.
    " Address 651 Grosvenor Ave., Westmount, Que.,
11. Father (Full Name) John Applin Birthplace New Foundland.
    " Address 651 Grosvenor Ave., Westmount, Que., Citizenship British.
    " Occupation Munition Inspector.
12. Mother (Full Maiden Name) Maude Neil Birthplace Quebec.
    " Address 651 Grosvenor Ave., Westmount, Que., Citizenship Canadian.
13. Details of any Naval, Military or Air Force Service:

Unit	Place	Rank	Trade	Date From	Date To	Reason for discharge
N.A.						

R.C.A.F. Records Office
Rec'd. SEP 7 1942
O.K. C.I.S.

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
    If so, state nature of disability N.A.
18. Have you ever been or are you now in receipt of a Disability Pension? NO
    If so, state nature of Disability N.A.
19. Have you ever been convicted of an indictable offence? NO If so state nature N.A.
20. Are you in debt? NO If so, state particulars N.A.

R.C.A.F. Form R. 100
400M—5-46 (5739)
H.Q. 1052-2-62

640-288

21. Particulars of Education:

—	Name of school	Date From	Date To	Courses—Subjects, etc.
Primary Education—Public or Separate School	Iona School,	1929	1936	Primary Course, 7th grade.
High School—Collegiate Institute, etc.	N.D.G., Montreal, Que.,			
Technical School	Westmount High School,	1936	1941	High School completed.
University or School other than above	Westmount, Que.,			
Correspondence Courses, etc.	Sir George Williams	1941	1942	Draughting (night)
	College, Montreal, Que.,	Oct.	May	

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

Employer and place	Duties, trades, positions	Date From	Date To	Reason for leaving
Aluminum Co., of Canada, Montreal, Que.,	Office Clerk	1941	194---	Still employed.

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

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

25. Sports engaged in. State: extensively, moderately, occasionally All sports (moderately)

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

If for Ground Duties, state Air Force trade in which you wish to enlist Aircrew I.T S.
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
D. Jackson 5-8-42	644 Victoria Ave., Westmount, Que.,	Dept., Head.
W.L. Pugh 5-8-42	621 Sun Life Building, Montreal, Que.,	Draughtsman.
Rev. L. Smith	692 Victoria Ave., Montreal, Que.,	Minister.
J.E. Warren	621 Sun Life Building, Montreal, Que.,	Clerk.

28. Other information that may have any bearing on this application NONE

29. Do you understand that vaccination, re-vaccination and inoculation are compulsory? YES

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

Date July 28th 19 42. S.I.M. Signature ~~Donald John Aspelin~~ Donald J. Aspelin

NATIONAL REGISTRATION CERTIFICATE
PRODUCED. 28.8.42
76/73 Ferebonne
A Hunter
M Hagarse
Cpl

FOR OFFICIAL USE ONLY

(A) *Report of Interviewing Officer—*

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

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

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

(B) *Report of Trade Test—*

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, Donald John APPLIN 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 August 28th, 1942 Donald J. Applin
Signature of Recruit

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

I, ~~Donald~~ Donald John APPLIN do sincerely promise and swear (or solemnly declare) that I will be faithful and bear true allegiance to His Majesty.

Date August 28th, 1942 Donald J. Applin
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 Montreal, PQ. this 28th day of August 1942

.....
Signature of Officer

.....
Rank

#13 REcruiting Centre, Montreal, PQ.
Unit

FOR OFFICIAL USE ONLY

CERTIFICATE OF MEDICAL EXAMINATION

Part 1. Information obtained from the applicant—

1. Age. 20 2. Have you ever suffered from any of the following defects in health?

(a) Rheumatism No
(b) Tuberculosis No
(c) Bronchitis or Asthma No
(d) Heart Disease No
(e) Kidney or Bladder Disease No
(f) Gastro-intestinal Constipation.
(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) Bone Fracture No
(r) Other Disease or Defect

3. Have you ever worn glasses? No

4. Have you had any illness for more than one week's duration. Chicken pox measles whooping cough - T.V.A. adenoids.

Examiner's Remarks *re* above

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

Signature of Applicant Donald J. Applin

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

1. Identification marks or scars (if operative obtain history) None.

2. Height ~~.....~~ feet 68 1/4 inches. 3. Weight 150. pounds.

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

6. Development {Good / ~~Fair~~ / ~~Poor~~} 7. Chest Measurement—Full expiration 34 1/4 inches

Range of expansion 2 1/4 inches

8. Hearing—Right WV 20 Left WV 20 Tympana—Right N Left N.

9. Vision—Without glasses—Right 20/30 With glasses—Right

Left 20/20 Left N.V.A.

10. Condition of mouth and teeth Healthy.

11. Urine—Albumen Nil Sugar Nil

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

29/8/42 RICK FIT S.E.S.

Part 3. The Candidate has been examined in accordance with the pamphlet, "Physical Standards and Instructions for the Medical Examination of Recruits," and he is considered fit for Category A1B / A1B.

21.8.42 X Ray 139335 Nil. Sed.

Any special remarks of the Medical Officers

Part 2 Cont'.

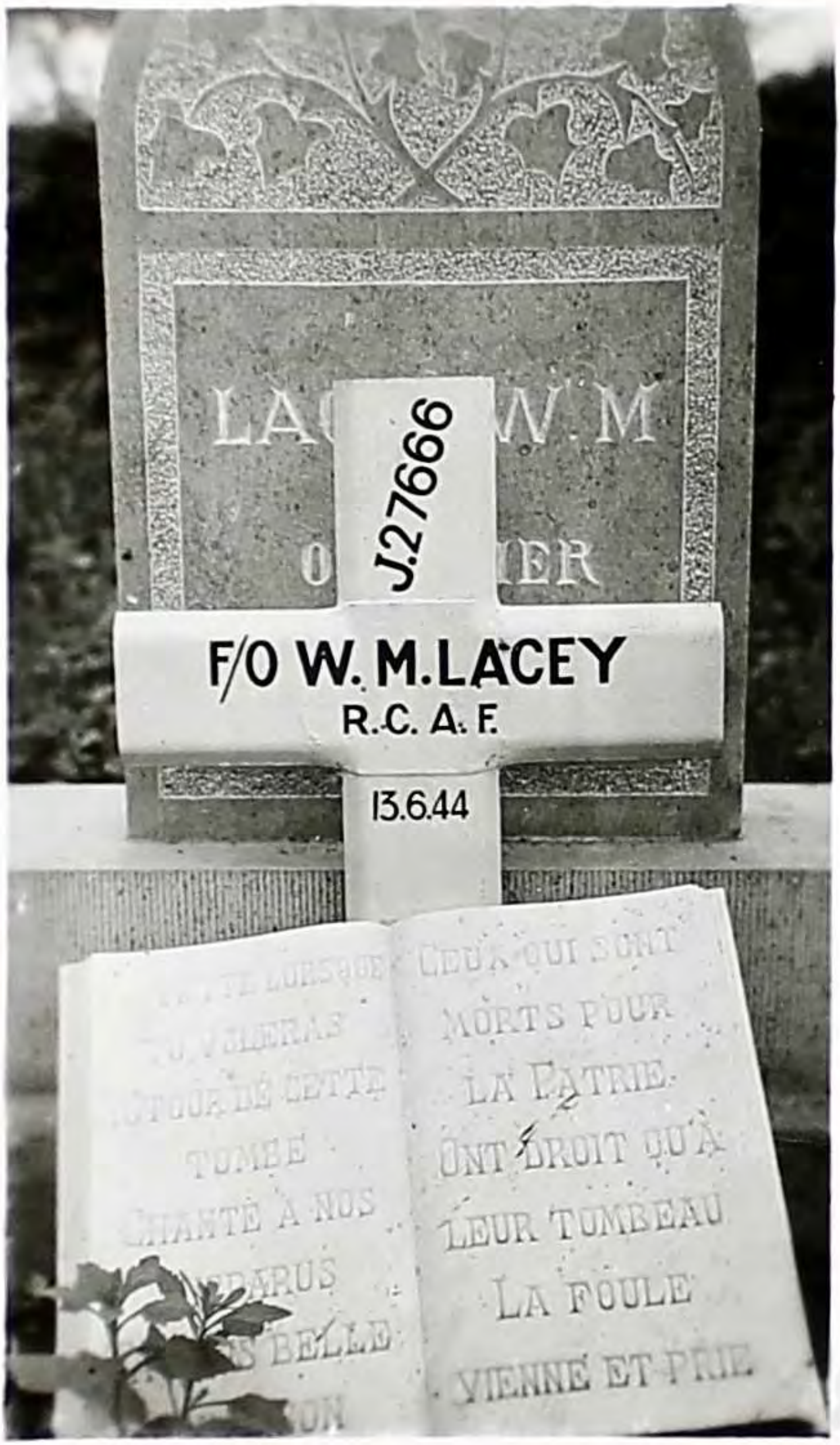
13. Reflexes N.
14. Heart N.
15. Lungs N.
16. Blood Pressure S. D. 120/86
17. Colour Vision

Date 29/8/42 19.....

President

Member H. W. Laws Flt Lt

Member Unsafe Dsh. Safe Gilespie Archer.


J27666
F/O W. M. LACEY
R.C. A.F.
13.6.44
CEUX QUI SONT
MORTS POUR
LA PATRIE.
ONT DROIT QU'À
LEUR TOMBEAU
LA FOULE
VIENNE ET PRIE

1

BLA 270

GRAVES REGISTRATION REPORT FORM

Place of Burial Vieux Berquin Communal Cemetery — Serial No. 2305

Dept and Map Ref Nord B2/H44 — Date 4-7-47

Number	Rank	Name & Initials	CE No.	Date of Death	How marked	Plot	Row	Grave
J29520	F/O	Lowe, E.R.	F152	13-6-44	See below			1
J92333	P/O	Carruthers, C.W.	"	"	"			2
J27666	F/O	Lacey, W.M.	"	"	"			3
J92332	P/O	Applin, D.J.	"	"	"			4
J93682	P/O	Larkin, M.R.	"	"	"			5

Graves marked as above with pre-fan crosses

7

signed L???

noted

DISTRIBUTION OF SERVICE ESTATES

~~ARMY~~ AIR

AM Estates Form "P. 4"

Name: APPLIN, Donald J., No.: J.92332
Surname Christian Names

P/O R.C.A.F. O/S 13-6-44
Rank Unit Date of Death

AMOUNT

L.P.C. $148.08

Date: 31 May 45 Other Credits 5.00

Total 153.08

SHARE	RELATIONSHIP	NAME AND ADDRESS	AMOUNT
All	Mother	Mrs. Maud M. Applin, 351 Clark Avenue, Westmount, Quebec. (Sole beneficiary under will)	153.08

TO BE FORWARDED BY REG. MAIL DIRECT.

P4. TO TREAS. 22-6-45 QW

AUTHORITY

H.Q. F.E. No.	VOTE	PRI	H.Q. SUB.	OBJ.	AMOUNT
0000 ~~9999~~	833	01	70	000	153.08

CLASSIFIED BY

Original Signed by
L. B. ROSEBUSH

EXAMINED BY

For Chief Treasury Officer

DISTRIBUTION APPROVED AND AUTHORIZED

Original signed by

(L. M. FIRTH) Colonel
Director of Estates

AUDITED FOR PAYMENT

For Chief Treasury Officer

75M—2-45 (6771)
H.Q. 1772-80-2

whole Form and instructions side before commencing to

5 mtd

R.C.A.F. R. 60
(REVISED 1-42)
40M—1-42 (1617)
H.Q. 1062-3-45

WILL

(a) Names in full to be written.

(1) (a) I, Donald John Applin of the ~~Town~~ City ~~Village~~ ~~Township~~

of Montreal in the County of ~~District~~

Province of Quebec clerk
(Civil Occupation)

a member of the Royal Canadian Air Force, Number R. 189546 do hereby revoke all former Wills by me made and declare this to be my LAST WILL.

(a) Insert "wife", "father", "mother", "friend", etc.
(b) Insert the name of beneficiar(y)(ies) in full.
(c) Insert the address(es) if known.
(d) Here state "all of my estate" or the particular articles or money intended to be given.
See reverse side for example.

(2) I GIVE, DEVISE AND BEQUEATH unto my

(a) My Mother
(b) Maud Applin
(c) 651 Grosvenor Ave. Montreal Quebec
(d) All of my estate

Draw a diagonal line through Para. (3) if not applicable, i.e., if all Estate disposed of in Para. (2) above.

(3) All the remainder of my estate I give, devise and bequeath unto:

(a)

(b)

(c)

Name and address of Executor.

(4) I appoint Maud Applin (Name) 651 Grosvenor Ave (Address)

to be the Executor / Executrix of this my Last Will.

IN WITNESS WHEREOF I have hereunto set my hand this 29th

day of August 1942

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

Donald J. Applin
(Signature of Testator)

First Witness sign here.

(5) Peter P Peppas
(Signature)

742 Beatty Ave Montreal
(Permanent Home Address)

Clerk
(Occupation)

Second Witness sign here.

Roger Godin
(Signature)

Lt 854 St Emile Mtl.
(Permanent Home Address)

Clerk
(Occupation)

(Witnesses are not to be beneficiaries.)

R.C.A.F. Records Office
Rec'd SEP 4 1942
O. K. ..... C.I.B. .....
R. C. ..... N. I. .....
S. L. ..... P. A. BB

(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 is named, complete as follows: I give, devise and bequeath unto:

(a) my wife

(b) Mary Brown

(c) 26 Cherry Ave., Ottawa, Ont.

(d) all my estate

If more than one beneficiary, set out in clause 2 (d) what each is to receive, such as:

"my wife, Mary Brown, 26 Cherry Ave., Ottawa, Ont. **$100.00**
and my household goods and effects".
"my mother, Ethel Brown, 480 Yonge St., Toronto, Ont. **$100.00"**
"my friend, John Smith, 60 LaSalle St., Winnipeg, Man. **$100.00"**

and any personal gift, if desired.

If any specific gifts as above have been made, the testator should name in Clause 3 the person or persons to whom he desires to give the balance of his estate, such as "my wife, Mary Brown, 26 Cherry Avenue, Ottawa, Ontario, the balance of my estate", or "my mother, Ethel Brown, and my father, George Brown, of 480 Yonge Street, Toronto, Ontario, the balance of my estate in equal shares or in the event that one dies before the other, the balance to the survivor".

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

(4) **Do not omit to date the will.** You are to sign the will with your usual signature in the presence of two witnesses, each of whom must immediately thereafter, and in your presence, 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

The laws of all the provinces of Canada, except one, provide that marriage subsequent to the date of the will revokes that will. Therefore, an officer or airman, immediately upon his marriage, should make a new will in order that, in the event of his death, his estate may be distributed in accordance with his wishes as set out in his will.

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)

Mrs. John APPLIN
651 GROSVENOR AVE.,
WESTMOUNT, QUE.

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. J92332 FD 34

DEPARTMENT OF NATIONAL DEFENCE
ESTATES BRANCH
OTTAWA, ONT.

20th February 1945

ESTATES BRANCH FEB 26 H.Q. OTTAWA. NATIONAL DEFENCE

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

APPLIN, Donald John P/O

J92332 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.

CYS/MJ

Director of Estates.

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

MAR 19 1945

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.....		NOT. MARRIED		
2	Children of the Deceased and dates of their Births.....		NIL		
3	Father of the Deceased.....		John Applin	56	651 Grosvenor Ave. Westmount PQ
4	Mother of the Deceased.....		Maud. M. Applin	55	651 Grosvenor Av. Westmount PQ
5	Brothers of the Deceased	Full Blood	NIL		
		Half Blood	NIL		
6	Sisters of the Deceased	Full Blood	NIL		
		Half Blood	NIL		

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
	NIL	NIL	

ANSWER FULLY EACH QUESTION ON THIS PAGE

PARTICULARS AS TO IDENTITY

8	Full names of the deceased.	Donald. John Applin
9	Date of his birth.	July. 28. 1922
10	Place and date of his marriage.	Does not apply
11	Place and date of his parents' marriage.	Three Rivers 27 April 1921

PARTICULARS OF DOMICILE

12	Place where deceased was born.	Montreal P.Q.
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) P.Q. (c) (d)
14	Nature of employment before enlistment.	Engineering Dept. (Junior Clerk) Aluminum. Co. of Canada
15	State whether he owned the premises in which he lived, and, if so, where situated.	No
16	Name place where deceased stated he intended to make his permanent home.	Montreal P.Q.

PARTICULARS OF ESTATE

17	Did he leave a Will? If in your custody, please forward.	Yes – Made out with the RCAF
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?	Does not apply
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?	Nil
20	Amount of War Savings Certificates held by deceased. Indicate where located.	5. War Savings Certificate Royal Bank of Can. Queen Mary/Rd. & Decarie
21	Amount of Victory Loan Bonds held by deceased. Indicate whether registered or bearer and where located.	Nil
22	If deceased had life insurance, name companies and amount payable under each policy and the person named as beneficiary therein.	Sun Life Ass. Co. 1.000 Metropolitan Life Ins. 250 Sun Life Ass. Co. 2.200 } 3.200 Beneficiary – John Applin
23	Describe other assets, if any, and estimated value thereof. Use space on page 4 if necessary.	Nil

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 no
25	Have you or any other relative paid the funeral expenses or any part thereof? If so, attach itemized accounts showing amount paid, and by whom.	no

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

(PLEASE TURN OVER)

DECLARATION

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

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

*MOTHER of the deceased.

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

Maud Applin {Signature of Informant}

651 GROSVENOR AVE WESTMOUNT. Que Address

CERTIFICATE

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

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

Dated at MONTREAL, Que this 23rd day of February 1945

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

G R Vanelli N.P. Qualification Notary Public

Address 1204 ALFRED BUILDING 507 PLACE D'ARMES MONTREAL, Que

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

As we expect to move from this addres on May 1st /45. we would appreciate it, if all our Son's personal belongings be forwarded here as soon as possible, including his Log Book. We have been informed that our Son's personal effects were forwarded to Canada in December & that we would receive same from the Estates Branch of R. C. A. F. Headquarters at Ottawa but up to the present we have not received any of these belongings.

File No: AJ.92332 (DA/EST)

ROYAL CANADIAN AIR FORCE
Overseas Headquarters

20, Lincoln's Inn Fields,
London, W. C. 2.

9th March, 1945.

Director of Estates,
Department of National Defence,
Ottawa, Ontario, Canada.

CAN. J.92332 P/O Donald John APPLIN ..... (Deceased)

The undernoted documents relating to the service estate of the above noted deceased are referred for your further action:

Form A.28

Committee of Adjustment Report
Mess account, R.C.A.F. Middleton-St.-George (written-off as is done in all cases where the account is less than 2/7d.)

ESTATES BRANCH
MAR 27 1945
H. Q.
OTTAWA
NATIONAL DEFENCE

and you are advised:

Overseas Action has been completed.

Documents checked. X

Remarks: 1. Personal effects forwarded to Ottawa, 16th January, 1945, Case No. 1541.
2. Our letter dated 10th February 1945, enclosed money order to you.
3. Our letter of 1st March, 1945, refers to reports on the outcome of enquiries made for a brown kit bag.

(A. C. Pennington) W/C.,
Officer i/c Estates,
R.C.A.F. Overseas.