ADDRESS ALL COMMUNICATIONS
TO THE REGISTRAR-GENERAL
PARLIAMENT BUILDINGS, TORONTO

ONTARIO

DEPARTMENT OF PROVINCIAL SECRETARY

REGISTRAR-GENERAL'S BRANCH

This Certificate of Birth is issued for Military, Naval and Air Force purposes only

October 23rd, 1940.

THIS IS TO CERTIFY that the Birth of the person named hereunder is of record at the office of the Registrar-General of Ontario as of the date and place noted.

George John Imrie

Toronto

March 10th, 1922.

Name of Father George Herbert Imrie

Maiden Name of Mother Hazel Irene Banks

1922-1-511.

F. V. Johns.

Deputy Registrar-General

R.C.A.F. Records Office
Rec'd. MAR 19 1942
O. K. ..... C. I. B. .....
R. C. ..... N. I. .....
S. I. ..... P. A. .....

RB.

Protestant Board of School Commissioners

of the City of Montreal

WEST HILL HIGH SCHOOL
4400 WEST HILL AVENUE
H. C. ATKINSON, B.A., PRINCIPAL

Montreal, November 26, 1941.

To:
The Royal Canadian Air Force.

I have much pleasure in writing in favour of Mr. G. John Imrie, residing at 5870 Somerled Avenue, Montreal, who was a pupil of the West Hill High School from September 1935 to June 1940. After completing the top Grade of an Elementary School in Toronto, he entered this school and completed the four years of the High School Course. His School record is as follows:

1935-36	First Year High	64.9 %	Promoted
1936-38	Second Year High	61.9	Promoted
1938-39	Third Year High	73.7	Promoted
1939-40	Fourth Year High	61.7	Graduated
	(Matriculation Standing, Science, except for French)		

Concerning John's diligence, conduct and reliability, I have only favourable comment to make, and feel that I can recommend him for the Service.

(Signed)

H. C. Atkinson
Principal

HCA:DL

Protestant Board of School Commissioners

of the City of Montreal

WEST HILL HIGH SCHOOL
4400 WEST HILL AVENUE
H. C. ATKINSON, B.A., PRINCIPAL

Dec. 4, 1941

To Whom It May Concern:

This letter is to certify that I knew ~~John~~ Imrie as a pupil at West Hill High School, Montreal. I am pleased to commend him as being a trustworthy and capable young man, and as one who is likely to acquit himself acceptably in any employment for which he is qualified.

(Signed) G. A. Potter,

Teacher, West Hill High School.

R159909

ROYAL CANADIAN AIR FORCE

(SUPPLEMENTARY DECLARATION TO ATTESTATION)

(Items marked (x), only, to be completed)

1. Surname IMRIE Full Christian Names GEORGE JOHN
2. Present Address ..... Telephone .....
3. Permanent Address .....
4. Place of Birth ..... Citizenship .....
5. Date of Birth ..... Married, Single, Widower, Separated, Divorced .....
6. Particulars of Children

Name	Date of birth	Name	Date of birth

7. Occupation ..... 8. Religion ..... State denomination
9. Languages ..... State proficiency
10. Next of kin (Full Name) ..... Relationship .....
    " Address .....
11. Father (Full Name) George Herbert Imrie Birthplace Toronto, Ont.
    " Address 5870 Somerled Ave., Montreal, P.Q. Citizenship Canadian XX
    " Occupation Merchandising Manager, Tooke Bros.
12. Mother (Full Maiden Name) ..... Birthplace .....
    " Address ..... Citizenship .....
13. Details of any Naval, Military or Air Force Service:

Unit	Place	Rank	Trade	Date		Reason for discharge
				From	To	

14. Honours, Awards, Mentions .....
15. Are you now on any Naval, Military or Air Force Reserve? .....
16. Have you previously made application to join the R.C.A.F.? ..... If so, where? .....
    When? ..... Result .....
17. Were you ever discharged from any branch of His Majesty's Forces as Medically Unfit? .....
    If so, state nature of disability .....
18. Have you ever been or are you now in receipt of a Disability Pension? .....
    If so, state nature of disability .....
19. Have you ever been convicted of an indictable offence? ..... If so state nature .....
20. Are you in debt? ..... If so, state particulars .....

APR 17 1942 K. C.I.B. R.C. N. S. P. A.

I George John Imrie do solemnly declare that the above noted particulars (x) are true and are to be read as supplementing and/or amending the particulars attested to by me on Attestation Form R. 100 dated March 16th 1942 at Montreal, P.Q.

Dated at the City of Lachine this 6th day of April 19 42

Signature and Rank of Officer — *Signature of Airman*

(Appendix)
R.C.A.F. R. 100X
10M—7-40 (6195)
H.Q. 1062-3-83

9.

Royal Air Force Station,
WITCHFORD,
Near ELY,
Cambridgeshire.

115S/C.1700/28/P.1. 2nd August, 1944.

Dear Mr. Imrie,

It is with deep regret that I have to confirm the news that your son, No.R.159909 Sergeant George John Imrie, has been reported missing.

There is unfortunately very little definite information that I can give you at the moment. He went out on an operational flight on 30th July, 1944, to attack an important target in enemy occupied territory, and up to the time of writing nothing further has been heard of his aircraft.

During your son's service with my Squadron, he rapidly proved himself a very capable Air Bomber, and was becoming a popular member of the Squadron; his loss will be keenly felt by all.

I should like to assure you how greatly his comrades in the Royal Air Force admire the unselfish sacrifice your sone has made for his Country and for the cause of Freedom.

His personal effects have been carefully collected and forwarded to the Royal Air Force Central Depository, Colnbrook, and in due course you will receive a communication from them.

Air Ministry instructions preclude my enclosing the addresses of the next of kin of the other members of the crew, but in the event of any news coming to hand regarding your son rest assured it will be communicated to you immediately.

In the interim, please accept the most sincere sympathy of myself and all personnel of the Squadron in your period of anxiety.

Yours very sincerely
W. E. Evans.
Wing Commander.

Mr. G.H. Imrie,
5870 Somerled Avenue,
Montreal,
CANADA.

SIXTH VICTORY LOAN BONDS

Certified that R159901 SGT. IMRIE George J.
(Regimental No.) (Rank) (Name)

has subscribed for $ 50.00 SIXTH VICTORY LOAN BONDS

(a) By outright purchase in respect of which Cheque/Draft/Crossed Warrant/Money Order, for $..... has been received.

(b) By monthly assignments of pay $ 8.40

Bonds to be delivered to: Mr George H Imrie
5870 Somerled ave
Montreal, Que

Date: .....

NOTE: This stub to be torn off and handed to subscriber.

John P. Hind P/O
(Unit Representative)

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

DEPARTMENT OF NATIONAL DEFENCE

NAVY — ARMY — AIR FORCE

2 AIR

STATEMENT OF WAR SERVICE GRATUITY

DECEASED MEMBER'S NAME: George J. (CHRISTIAN NAMES) Imrie (SURNAME)

REGISTER NO. E-398-17

FILE NO. 22477

PAYEE: Receiver General of Canada,

DATE: 27 Oct/45

ADDRESS: Director of Estates, Ottawa, Ont.

SERVICE NO. J.95163

FINAL RANK OR RATING P/O

DATE OF TERMINATION OF OVERSEAS SERVICE 30 July /44

DATE OF DISCHARGE 30 July/44

		$ ¢
A. TOTAL QUALIFYING SERVICE	NO. OF DAYS 868/30 EQUAL TO 28 COMPLETE PERIODS AT $7.50	210.00
B. QUALIFYING OVERSEAS SERVICE	NO. OF DAYS 283 LESS 28 INELIGIBLE DAYS, EQUAL TO 255 DAYS @ 25c. PER DAY	63.75
C. SUPPLEMENT FOR OVERSEAS SERVICE		
	DAILY RATES AT DISCHARGE	
	PAY $ 6.25	
	SUBSISTENCE OR LODGING AND PROVISION ALLOWANCE $ 1.70	
	ADDITIONAL PAY $	
	$	
	$	
	DEPENDENTS' ALLOWANCE 1/30 OF $ _____ $	
	TOTAL $ 7.95 ×7 = $ 55.65	
	NO. OF DAYS 283/183 ×$ 55.65	86.06
D. WAR SERVICE GRATUITY		359.81
E. DEDUCTIONS	OVERPAYMENT OF PAY AND ALLOWANCES $	
	DEPENDENTS' ALLOWANCE AND ASSIGNED PAY $ 20.00	
	OTHER DEDUCTIONS $	20.00
F. TOTAL AMOUNT PAYABLE		339.81

G. YOUR PORTION OF GRATUITY IS—

DEPENDENTS' ALLOWANCE IN ISSUE TO YOU $_____ OF $ =$

TOTAL DEPENDENTS' ALLOWANCE IN ISSUE $

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

PREPARED BY	CHECKED BY
PEN	LGS

TREASURY	
CHECKED BY	DATE
	1-11-45

SERVICE REPRESENTATIVE

DISTRIBUTION OF SERVICE ESTATES

GMW

AIR

Estates Form "P. 4"

Name: IMRIE, George J. No.: J95163
Surname Christian Names

P/O O/S 30-7-44
Rank Unit Date of Death

AMOUNT W.S.G. 339.81
L.P.C. $ 236.79

Date: 28-12-45

Other Credits

Total 576.60
Prev. Dist. 236.79
This Dist. 339.81

SHARE	RELATIONSHIP	NAME AND ADDRESS	AMOUNT
All	Father	George H. Imrie, 5870 Somerled Ave., Montreal, P.Q. (Sole beneficiary per will)	339.81

P4. TO TREAS.
JAN 15 1946

WSG

AUTHORITY

H.Q. F.E. No.	VOTE	PRI	H.Q. SUB.	OBJ.	AMOUNT
0000 9999	833	01	70	000	339.81

CLASSIFIED BY

EXAMINED BY

For Chief Treasury Officer

DISTRIBUTION APPROVED AND AUTHORIZED

(L. M. Firth) Colonel
Director of Estates

AUDITED FOR PAYMENT

For Chief Treasury Officer

75M—2-45 (6771)
H.Q. 1772-80-2

RANK	POSTED TO	DATE	D.A.P.M.
LAC	No 1 S.A.O.S.	4-4-43	[illegible]

IF YOU LOSE THIS CARD,

NOTIFY YOUR C.O. IMMEDIATELY, GIVING HIM FULL PARTICULARS

IF YOU FIND THIS CARD,

PLEASE MAIL IN AN ENVELOPE ADDRESSED TO:
"THE SECRETARY,
DEPT. OF NATIONAL DEFENCE FOR AIR,
OTTAWA ATTENTION P.I.B.

NO POSTAGE NECESSARY

ROYAL CANADIAN AIR FORCE

Right Index Fingerprint

Name DMRIE. GEORGE JOHN R-159979

Rank AC/2 R.C.A.F.

Age 20 Height 5' 9" Weight 134

Hair LIGHT BROWN Eyes BLUE Hair on face LIGHT

Marks, scars, etc. NONE VISIBLE

John Dmrie (Signature of holder)

A. J. Chopin F/L (Signature of issuer)

Place 5 "A" DEPOT LACHINE P.Q. Date MARCH 19th. 1942.

Card serial number 86696


R 159909
A 1175

IMRIE, G.J.

ROYAL CANADIAN AIR FORCE

SERVICE

AND

PAY BOOK

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

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

ROYAL CANADIAN AIR FORCE SERVICE BOOK

INSTRUCTIONS TO OFFICERS AND AIRMEN

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

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

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

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

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

Air Force No. R169909 Surname: IMRIE

Christian Names (in full): GEORGE JOHN.

Date of Birth: 10-3-22 Religion: Protestant.

Date of Enlistment/Appointment: 16-3-42.

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

Occupation in Civil Life: Apprentice Engineer

Signature of Holder: G. J. Imrie

Name and Address of Next-of-Kin:

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

Mr. George Herbert Imrie (father)
5870 Somerled Ave.
Montreal PQ.

Certified Correct: A B Hamilton P/O

Date: 8-7-43 Place: G D Depot Halifax

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

Branch or Trade and Group	Date of Effect	Authority	Signature and Rank of Officer making Entry
Air Nav. B.	20-8-43	196	A B Hamilton P/O

Rank	Date of Effect	Authority	Signature and Rank of Officer making Entry
T/Sgt. Pd.	20-8-43	196	A B Hamilton P/O
F/SgT	20.5.44	% 1069/44	M Robinson Sgt.

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
10009 1250	17-10-43	G Julien P/O

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.
2.11.43	A1B. A3B(A)	M.B.		RFH

BLOOD GROUP

Date	International	Initials of M.O.
	BLOOD GROUP A	

NIGHT VISUAL CAPACITY

Date	Score	Group	Initials of M.O.
14-10-43	8		[illegible]

IMMUNIZATION PROCEDURES

VACCINATION

Date	Result	Initials of M.O.
17-3-42	——	J. F. HOPKIRK

Susceptibility Test	Date	Result	
Schick Test			
Dick Test			

PROTECTIVE INOCULATIONS*

Nature of Inoculation	Date	Dose	Initials of M.O.
TABT.	17.3.42	1.0	JFH
TABT	7.4.42.	1.0	
TABT.	4.5.2.	1.0	

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.....

Postal Insurance Account #52667
Upgrade #5829427
1250 # 10652260
E4B3
14/(32)/9
226
18

NAME IMRIE, ~~XXXXX~~ George John,

FILE NO. ~~FD219~~ R159909

RANK ~~XXXXXXXXXXXXXXXXXXXX~~ P.O

CATEGORY ~~XXXXXXX~~ Pres Dead

REG. NO. ~~XX59909~~ J95163

DATE OF DEATH: 30-July-44

MOTHER LIVING: YES

WIFE: NA

MINISTERIAL CARD: 28-8-44

ROYAL MESSAGE:

MEMORIAL CROSS TO CHAPLAIN:

SEP 23 1945

SEP 18 1945

To Mother and Father-

To Mother and Father- 18-7-45

DEL'D TO MOTHER:

DEL'D TO WIFE:

Mr. & Mrs. George Herbert Imrie,
5870 Somerled Avenue,
Montreal, Quebec.

108465

COMMAND:

RELIGION:

MAB

AIR FORCE No.	SURNAME	FULL CHRISTIAN NAME	ENLISTMENT/APPOINTMENT	RELIGION
J95163. R/159909	Smrie	George John	PLACE Montreal Que. DATE 16-3-42.	Protestant

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

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

Comm. 29-July-44

BIRTH DATE	PLACE	COUNTRY	CITIZENSHIP	RACIAL ORIGIN
10-3-22	Toronto. Ont.	Canada.	Canada.	Canadian.

CIVIL EDUCATION

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

CIVIL OCCUPATIONS AND EXPERIENCE

Apprentice Engineer
22-7-40 to 7-12-41.

PREVIOUS SERVICE

None.

PLACE AND DATE OF MEDICAL	CATEGORY	PLACE AND DATE OF MEDICAL	CATEGORY
12-3-42.	A1B.		
	A3B.		

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 George Herbert Smrie (Father)
5820 Somerled Ave. Montreal P.Q.

EMPLOYMENT AS INSTRUCTOR OFFICER AIRMAN/AIRWOMAN

TYPE	FROM	TO	TYPE	FROM	TO

OFFICERS

RANK, BRANCH AND CATEGORY	DATE	AUTH.	DUTIES PERFORMED DURING SERVICE, E.G. ADJ.
P/O (R) S.S. G.L. Nav. "B"	29 7 44	1583/45	—

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

AIRMEN AND AIRWOMEN

RANK	DATE	AUTH.	TRADE	DATE	AUTH.
T/Sgt Pd.	20 8 43	196.	Air Nav. "B"	20 8 43	196.
T/F/Sgt.	20 5 44	06/1069/44	(Sp. Gp.)		

OFFICERS, AIRMEN/AIRWOMEN

COURSE OR TRADE	GRP.	%	PF	DATE
—				

ADVISE ENTRIES
UNIT RECORDS RETURNED
TO CANADA

AIR FORCE No. R/95163. R/159909

SURNAME: IMRIE (Imrie)

FULL CHRISTIAN NAME: George John

ENLISTMENT/APPOINTMENT
PLACE: Montreal Que.
DATE: 16-3-42.

RELIGION: Protestant

R.C.A.F. FORM R230

TYPE OF LEAVE

FROM	TO	NO. DAYS	DESCRIPTION	AUTH.
2-10-43	15-10-43	14	Emb.	236
10-11-43	17-11-43	7	P.P.	3RCAF.PRC 16-43
23.12.43	28.12.43	6	Mil.	Milland 50/43.
6.5.44	19.5.44.	14	P/L.	120TU 26/44
19-7-44	24-7-44	6	P/L	115Sq 45/44

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
20 8 43	Categorized P+O	Dro 196.
31 12 43	V.G.	U/T QB

POSTINGS, ATTACHMENTS & TEMPORARY DUTY

SOS TOS	FROM TO	DATE	AUTHORITY
SOS	#8 AOS #1 BTG.	4 9 43	196.
"	#1 BTG. #1 "Y" Dept.	15 10 43	236.
"	1.4D 3PRC	22 10 43	266
	Emb. Halifax	22 10 43	
	Disem. U.K.	30 10 43	
	31 P.R.C. RCAF. Int C137	31 10 43	
SOS	3(RCAF) PRC to 5AOS.	20 11 43	5AOS 53/43. 3RCAF 27/43
SOS	5AOS. to 2(O)AFU.	20 12 43	5AOS 63/43 26(B)AFU. 5/44
SOS	26(B)AFU to 120TU	15 2 44	2AFU. 120TU. 14/44. 11/44
SOS	12.OTU. to 31 Base	19 5 44	31 Base 8/44 12.OTU 29/44
ATT	1657 CU. fr. 61 Base	26/6 5 44	31 Base 9/44
Det.	RAF. Shepherds Grove.	11/6 6 44	31 Base 10/44
T.O.S.	115 Sqd.	17 7 44	115 Sqd. 45/44 31 Base 125/44
Det	to 3LFS	8/18 7 44	31 Base 125/44 115 Sq 45/44
F/B	Missing from 115 Sqd.	30 7 44	AFRO 1939/45 CR 530
TOS	NEU 1/2/44	31 7 44	
	PRES DEAD	30 7 44	CR 784
	Killed	30 7 44	AFRO 1147/45
SOS	NEU & Pres Dead	30 7 44	NEU 125

ALL OTHER CASUALTIES

CASUALTY AND DATE	AUTHORITY

HONOURS, AWARDS AND MENTIONS

DATE	AWARD	AUTHORITY
34 2 42	Air Navig. Badge.	
18 1 44	CVS Medal & MM Emblem.	12 OTU. 17/44. 2(O)AFU. 14/44.

Crook

ADVISE ENTRIES
UNIT RECORDS RETURNED
TO CANADA

Emb. 22-10-43

AIR FORCE No. ~~R159609~~ R

SURNAME: IMRIE, FULL CHRISTIAN NAMES: GEORGE JOHN

ENLISTMENT — PLACE Montreal — DATE 16-3-42

RE-ENLISTMENT

C.R. FILE NUMBER Ross

J.95163

OFFICER RECORD OF SERVICE AIRMEN

Comm 29-7-44

R.C.A.F. FORM R44(B) 30M-8-41 (637) H.Q. 1062-3 58

7. BIRTH: DATE 10-8-22 — PLACE Toronto Ont. — CITIZENSHIP British 2

FATHER (FULL NAME) George Herbert Imrie

BIRTHPLACE Toronto, Ont.

MOTHER (FULL MAIDEN NAME) Hazel Irene Banks

BIRTHPLACE Toronto, Ont.

8. EDUCATIONAL STANDING

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

6

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

Apprentice Engineer. 1½ yrs.

10. PREVIOUS ARMY, NAVY OR AIR FORCE SERVICE

nil

0

11. HONOURS-AWARDS, MENTIONS

	AUTHORITY	DATE
AOS Badge (Interim for a Nav. Badge)	8AOS.196	20-8-43.
C.T.S. Bn-clasp.	DB70-26	15-1-44

12. FLYING EXPERIENCE ON ENLISTMENT (HOURS)

SOLO — DUAL — PASSENGER —

13. RELIGION United.

2

14. LANGUAGES English

1

15. SPORTS

swimming, skating, skiing

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

WIFE (FULL MAIDEN NAME)

PLACE OF MARRIAGE — DATE

AUTHORITY (IF AFTER ENLISTMENT)

1

17. MARRIED ESTABLISHMENT

REMARKS	RANK	EFFECTIVE	D.R.O.

18. CHILDREN

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

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

FULL NAME: George Herbert Imrie — RELATIONSHIP Father

ADDRESS: 5876 Somerled Ave., 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.
R.A. 13 days	17/24 9 42	6 ITS 219			
R.A. 10 days	25/4 9 42	6 ITS 228			

21. ENGAGEMENTS

TERM	EFFECTIVE	D.R.O.	TERM	EFFECTIVE	D.R.O.
Duration	16 3 42				

22. TEMPORARY DUTY AND MISCELLANEOUS ENTRIES

FROM	TO	DATE	D.R.O.
Recg'ts & clearances.		16-3-42	5 MD 64
S.F.T.W. #C163112		11-9-42	6 ITS 220

22.(A) ADDRESS PRIOR TO ENLISTMENT

5870 Somerled Ave., Montreal, Que.

22302

23. DOCUMENT CONTROL (INDICATE RECEIPT BY DATE) O HF

R60	R79	B465	X-RAY	AFM-13	IDN. CARD
6-4-42	20-3-42	8-5-42			

AIR FORCE No. ~~R159909~~

J.95163

IMRIE, GEORGE JOHN
SURNAME — FULL CHRISTIAN NAMES

ENLISTMENT — RE-
PLACE Montreal
DATE 16.3.42

C.R. FILE NUMBER Ross

R.C.A.F. FORM R44(B) 30M-8-41 (637) H.Q. 1062-3-58

OFFICER RECORD OF SERVICE AIRMEN

Comm 29-7-44

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

S.O.S. OR T.O.S.	UNIT AND PLACE	EFFECTIVE			D.R.O.
T.O.S.	5 M.D. Lachine	16	3	42	5 MD 64
T.D.	Rockcliffe	19	5	42	5 MD 119
T.D.	3 TC Hatley Park Ugly Pundas	14	6	42	5 MD 141
T.D.	RCAF Stn Rockcliffe	16	6	42	5 MD 138
T.D.	#2 SFTS Uplands	11	7	42	5 MD 168
S.O.S.	5 MD Lachine (Commended 5 MD 172)	19	7	42	5 MD 171
T.O.S.	6 ITS Toronto	19	7	42	6 ITS 172
S.O.S.	5 M.D. Lachine	18	7	42	5 MD 172
T.O.S.	6 ITS Toronto but	10	10	42	6 ITS 241
T.O.S.	#20 EFTS Oshawa	11	10	42	20 EF 242
S.O.S.	20 EF Oshawa	12	11	42	20 EF 270
T.O.S.	K.T.S. Trenton	13	11	42	E 322
S.T.S.	R.C.A.F. Trenton	5	2	43	E 32
T.O.S.	6 B&G Mt. Dennis	6	2	43	M U 38
S.O.S.	Mt. Dennis	3	4	43	M U 82A
T.O.S.	8 AOS Ancienne Lorette	4	4	43	8 AOS 79
S.O.S.	8 AOS Ancienne Lorette	4	9	43	8 AOS 196
T.O.S.	1 B.G. Jarvis, Ont.	5	9	43	1 BGS 216
S.O.S.	1 BGS Jarvis, Ont.	15	10	43	1 BGS 236
	14 Depot Halifax, N.S				
S.O.S.	14 Depot 3 P.R.C	22	10	43	14 264
Missing 13 July 44 - PC X 181 a/1 Aug. 44.					
Presumed Dead 30 July 44 - PC X 104 3 a/3 June 45					
	COMPLETED	12	9	45	
	Missing	13	7	44	
	PC X 181	1	8	44	

2. RECLASS'NS-PROMOTIONS-ETC.

RANK	EFFECTIVE			D.R.O.
AC2	16	3	42	5 MD 64
L.A.C.	11	9	42	6 ITS 219
T/Sgt. Pd.	20	8	43	8 AOS 196
T/FT Sgt.	20	5	44	GB 1069
P/O	29	7	45	GB 1582
P/O 29-7-44 (ABR 28 1d) 3-9-45)				

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.
12.3.42	R100	43B.	

4. TRADE AND CHARACTER

TRADE	GROUP	EFFECTIVE			D.R.O.
Pos A.	S.	16	3	42	5 MD 64
a/c ITS 301 S.	S	9	7	42	5 MD 163
Aircrew B	S	11	9	42	6 ITS 219
Air Bomber (Cancelled 6343)	S	28	11	42	E 335
Air Nav.	B	2	12	42	E 338
Air Nav. B.	Sg.	20	8	43	8 AOS 196
Navigator B Bn	Gk	29	7	44	(ABR 28 1d) a/3 9-45

TRADE PROFICIENCY	CHARACTER ASSESSMENT	DATE OF R41
Categorized	"NB"	8 AOS 196

5. COURSES-TESTS-ETC.

SUBJECT	RESULT	DATE	AUTHORITY

6. LEAVE

FROM	TO	DAYS	REMARKS	D.R.O.
12-9-42	25-9-42	13	Special	6 ITS 219
25-9-42	5-10-42	10	Special	6 ITS 228
31-12-42	5-1-43	5	Spec. Pass	E 364
20-8-43	5-9-43	16	Spec. leave.	8 AOS 196
2-10-43	15-10-43		Embk	1 BGS 236

RELIGION: C. OF E. — DAP. — U.C. — PRES. — R.C. — HEB. — MIS. — OTHER — PREV. SERV.

ENLISTMENT — OVERSEAS — MARITAL STATUS — PRESENT MARITAL STATUS — HIGH & TECH. SCHOOL EDUCATION — PROVINCE OF ENLISTMENT — DISCHARGE — AC

R.C.A.F. Special Reserve

AIR FORCE No. R 159909 POSTED TO #5 M.D. Lachine, P.Q. TRADE Aircrew Pilot or ~~Observer Std~~

ROYAL CANADIAN AIR FORCE

(ATTESTATION PAPER)

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

1. Surname IMRIE FULL Christian Names GEORGE JOHN
2. Present Address 5870 Somerled Ave., Montreal, P.Q. Telephone EL-4837
3. Permanent Address 5870 Somerled Ave., Montreal, P.Q.
4. Place of Birth Toronto, Ont. Citizenship Canadian
5. Date of Birth Mar. 10, 1922 Married, Single, Widower, Separated, Divorced single
6. Particulars of Children

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

7. Occupation Apprentice Aero Mechanic 8. Religion Protestant. United
   State denomination
9. Languages English, fluently.
   State proficiency
10. Next of Kin (Full Name) George Herbert Imrie Relationship father
    " Address 5870 Somerled Ave., Montreal, P.Q.
11. Father (Full Name) George Herbert Imrie Birthplace Toronto, Ont.
    " Address 5870 Somerled Ave., Montreal, P.Q. Citizenship
    " Occupation Merchandising Manager, Tooke Bros.
12. Mother (Full Maiden Name) Hazel Irene Banks Birthplace Toronto, Ont.
    " Address 5870 Somerled Ave., Montreal, PQ 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. MAR 19 1942
O.K. C.I.B.
R.C. N.I.
S.L. P.A.

14. Honours, Awards, Mentions N.A.
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? NA
    When? NA Result NA
17. Were you ever discharged from any branch of His Majesty's Forces as Medically Unfit? NO
    If so, state nature of disability NA
18. Have you ever been or are you now in receipt of a Disability Pension? NO
    If so, state nature of Disability NA
19. Have you ever been convicted of an indictable offence? NO If so state nature NA
20. Are you in debt? NO If so, state particulars NA

R.C.A.F. Form R. 100
400M—6-40 (5739)
H.Q. 1062-3-83

446-38

21. Particulars of Education:

—	Name of school	Date From	Date To	Courses—Subjects, etc.
Primary Education—Public or Separate School	Geo. R. Allen, Hamilton	1928	1934	
High School—Collegiate Institute, etc.	Withrow, Toronto	1934	1935	
Technical School	West Hill High	1935	1940	Science.
University or School other than above				
Correspondence Courses, etc.				

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

Employer and place	Duties, trades, positions	Date From	Date To	Reason for leaving
No. 4 E.F.T.S., Windsor Mills, PQ	Apprentice Engineer	22-7-40	1-3-41	Transferred to No. 17 E.F.T.S.
No. 17 EFTS, Stanley, N.S.	" "	1-3-41	30-6-41	" No. 21 EFTS
No. 21 EFTS, Chatham, NB		1-7-41	7-12-41	resigned.

23. Flying Experience (in Hours) Solo NO Dual NA Passenger NA

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

Swimming, skating, skiing, mod.

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

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

If for Ground Duties, state Air Force trade in which you wish to enlist P. or Observer.
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
Mr. G.C. Chandler,	4842 Wilson Ave., Mtl, PQ	Insurance Manager.
Rev. Doc. L.H. Fisher	26 Dufferin St., Mtl, PQ	Minister.

28. Other information that may have any bearing on this application

This application is made out under the understanding that I be given Pilot's course if physically fit.

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

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

Date December 28th, 19 41 Signature John Doe

NATIONAL REGISTRATION CERTIFICATE PRODUCED. 6/11 .....

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,.....George John Imrie.....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....March 16th.....19..42 .....John Imrie.....
Signature of Recruit

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

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

Date....March 16th.....19..42 .....John Imrie.....
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,P.Q.....this.....16th.....day of.....March.....19..42.

.....Signature of Officer ..... Rank ....#13 Recruiting Centre, R.C.A.F., Montreal,P.Q.... Unit

FOR OFFICIAL USE ONLY

CERTIFICATE OF MEDICAL EXAMINATION

Part 1. Information obtained from the applicant—

1. Age. 19 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: no
(g) Rupture: no
(h) Varicose Veins: no
(i) Flat or Deformed Feet: no
(j) Nasal Trouble: no
(k) Ear Disease: no
(l) Eye Disease: no
(m) Epilepsy: no
(n) Nervous or Mental Disease: no
(o) Syphilis: no
(p) Gonorrhoea: no
(q) Bone Fracture: no
(r) Other Disease or Defect: measles, mumps, whooping cough

3. Have you ever worn glasses? no

S. John Jamie
~~Jack Jamie~~
Signature of Applicant

4. Have you had any illness for more than one week's duration? Yes

Examiner's Remarks *re* above: Lie.

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

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

1. Identification marks or scars (if operative obtain history): Mole & mark left arm

2. Height 5' feet 9" inches. 3. Weight 134 pounds.

4. Complexion: Med (Good / ~~Fair~~ / ~~Poor~~) 5. Color of Eyes: Blue Hair: Fair

6. Development: Good 7. Chest Measurement—Full expiration: 33 inches
Range of expansion: 35½ (2½) inches

8. Hearing—Right: W.V. 20' Left: W.V. 20' Tympana—Right: N Left: N.

9. Vision—Without glasses—Right: 20/20 With glasses—Right: N/A
Left: 20/20 Left:

10. Condition of mouth and teeth: Good

11. Urine—Albumen: neg Sugar: neg.

12. Abnormalities (Congenital and Pathological) found on Examination: Difficulty in ascertaining B.P.

A3B 7/1/42

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 ~~A1B1~~ ~~A3B2~~ ~~A1B1~~

7-1-42 Xray 104236 neg

Any special remarks of the Medical Officers: Part 2 Cont'd.

To APNH re B.P. check

13. Reflexes N

16-1-42 - Recheck. D.P. + N.H. report is favourable. ~~Has a vaginal discharge now. No infectious disease now.~~ No disease since last exam. Diastolic B.P. still difficult to obtain.

14. Heart N

15. Lungs N

16. Blood Pressure S. D. 118/80

Category A1B1. 12/3/42 Recheck A3B2

17. Colour Vision N. Ish

Date Jan 6th 1942

President Member Member

R159909 Course 58 Recheck No. 6 M.SB. Toronto, Ont. 27-7-42 s

CONFIDENTIAL

R.C.A.F. Special Reserve

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

ROYAL CANADIAN AIR FORCE

FILE NUMBER

Medical Board held at Montreal, P.Q. Date January 6th, 1942.

Surname Imrie Chr. Names George, John

Nature of Commission General List M-2-1 Date of Birth 10-3-22 Married or Single Single

Branch Hours Flown 25 hours dual

Address 5870 Somerled Ave, 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 ..... No
(x) Any illness or Injury not mentioned above Measles, Mumps, Chicken pox

Education High School Graduate
Present Occupation Aero Engine Apprentis Hobbies Model Building
Previous Service No
Athletics Skiing, Hockey, Swimming
Habits—Smoking No Alcohol No
FAMILY HISTORY—Consumption No Diabetes No Haemophilia No
Nervous Ailments, Mental Trouble, or "Fits" No
Father Alive—Health Good Dead—Cause N.A.
Mother Alive—Health Good Dead—Cause N.A.
Brothers 1 (....) Alive—Health Good 0 (....) Dead—Cause N.A.
Sisters 0 (....) Alive—Health 0 (....) Dead—Cause N.A.

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 7/1/42 Signature John Imrie Witness M. Lewall

GENERAL MEDICAL AND SURGICAL EXAMINATION

Impression given by *(a)* Physique Athletic *(b)* Mentality Standard
Body Marks, Scars, Deformities Nil
Size of Thyroid Gland Not Palpable
Surgical Abnormalities Nil
Results of Wounds, Injuries, Operations Vaccination Mark Left Arm

	Date 6-1-42	Date	Date 27-7-42
Height (ins.)	69		69
Weight (lbs.)	134		133
Chest Circumference (ins.)	33-35½		
Body Build (lbs.)	-6		+ 9
Leg Length (ins.)	41		
Pulse Rate — Sitting	84	80	72
Pulse Rate — Standing 1st	108		
Pulse Rate — Standing 2nd	84		
Pulse Rate — After Exercise	120		
Pulse Rate — Time to Normal	30		
Arterial Walls	Soft		N
Blood Pressure — Systolic	118	110	120
Blood Pressure — Diastolic	85	(70) ?	80
Room Temperature	65		
Heart — Size (in cms.)	N (10)		N
Heart — Sounds	N		N
Heart — Rhythm	N		N
Lungs — Inspection	N		N
Lungs — Palpation	N		N
Lungs — Percussion	N		N
Lungs — Auscultation	N		N
Lungs — Expiratory Force	140		
Lungs — X-Ray	Neg		
Reflexes — Knee	Sluggish		N
Reflexes — Ankle	N		N
Reflexes — Triceps	N		N
Reflexes — Abdominal	N		N
Reflexes — Plantar	N		N
Cranial Nerves	N		N
	R. L.	R. L.	R. L.
Balancing Rod	Dis D s		
	R. L.	R. L.	R. L.
Self Balancing	Nil		
Tremors — Fingers	Nil		none
Tremors — Eyelids			S.F.
Abdomen — Liver	Not palp		N
Abdomen — Spleen	Not palp		N
Abdomen — Muscular Tone	~~Nil~~ Good		good
Urine — Albumen	Neg		neg.
Urine — Sugar	Neg		neg.
Initials of M.O.			D.S.M.

Remarks on any Abnormalities Found

Date 6-1-42.
Difficult to ascertain Blood Pressure exactly
D.M.

Date 16-1-42
Still difficult to ascertain Diastolic Blood Pressure

Date 12-3-42
Urethral Discharge has cleared up.
[signature]

Date July 27/42
No difficulty in getting diastolic level to-day, 120/80 R & L Hg. sitting.
D.S. Munroe F.L.

40 mm. Hg. Test 7 888/998/888/77 =55 Second
Date
Date July 27/42 60 secs= 6/899/888/888/888/ D.S. Munroe F.L.
Date
Date

EYE EXAMINATION

History: Neg.

No. 6 M.S.B.
Rt. Handed
O.S. Master

Visual Acuity	R. 20/20, c̄ -2.50 D = 20/200		20/15
	L. 20/20, c̄ -2.50D = 20/200		20/15
			c̄ 2.5 = Blur.
Colour Vision	N.Ish		C.V.N. 9th Ishi
Red, Green	Ortho		M.R. 6 m. ortho. 33 cm. Exo. 3 p.d.
Diaphragm Test (P.D. = 63 cms.)	at 5	P.D. = 63 cms) 4 @ 4	(67) bar at 3
Convergence	C. = 12 cms.	C. = 6.5. cms	6.0
	S. C. = Rt 15 cms.	S.C. Rt 16.5 cms	12.0
Accommodation	R. / Crowd 13	B	11.0
	L.	15.5	11.0
Cover Test	Ortho-	~~Exo~~ ortho	sl. div. dev. /RR
Fundi and Media	Normal		normal
Fields	Normal		full
REMARKS:	Muscle Balance Poor Fit A3B	A3B	Crossed dominance A1B, A3B.
	Initials of M.O.	*Initials of M.O.* N.B.	*Initials of M.O.* P.E.R.
	Date 6-1-42.	*Date* March 12th, 1942.	*Date* 27-7-42

EXAMINATION OF EAR, NOSE AND THROAT

History: Nil -

Hearing	R. Ear	W.V 20	W.V. 20'	
	L. Ear	W.V. 20	W.V. 20'	
External Ear, Meatus Membranes	R. Ear	N.	N	
	L. Ear	N.	N	
Middle Ear, Eustachian Tubes	R. Ear	Pat	N	
	L. Ear	Pat	N	
Cochlear Apparatus	R. Ear	—		
	L. Ear	—		
Vestibular Apparatus	R. Ear	—		
	L. Ear	—		
Buccal Cavity		Clean	Healthy	
Teeth		Good	Good	
Gums		Healthy	Healthy	
Pharynx		Healthy	Sl. congested	
Nasopharynx		Not seen		
Nose		Clean	Clear	
Larynx		Not seen		
REMARKS: Nil		*Initials of M.O.*	*Initials of M.O.* PER	*Initials of M.O.*
		Date 6-1-42	*Date* 27-7-42	*Date*

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

6/1/42. Good Type. Difficult to ascertain Blood Presure exactly. Cardio has has cular res responses apparently normal. To D.P.N.H. for opinion . Muscle balan not good. Fit for Observer

A.T.B.T.

L. W. S. Lucas F/O
R. Sutton F/O

7/1/42. Fit for observer Recheck normal

A 3 B.

L. W. S. Lucas F/O
R. Sutton F/O

Recheck no diseases since last exam has a ~~internal~~ urethral discharge. No other infectious diseases present now. Diastotic blood pres~~sure~~ure is still difficult to obtain D.P.N.H. report favourable ~~pressure is~~ Category A.T.B.T. Referred to his own physician.

G. C. Sutton F/O.

12-1-42 Discharge at urethra cleared up same day as it was noticed, no definite etiology as per doctor's report. No discharge or irritation since. Examination shows no signs of infection.

A3B

FIT Date 3.8.42
PILOT
OBSERVER
W/OPERATOR
A/GUNNER

R. Sutton F/O

OBSERVATIONS AND FINDINGS OF THE REVIEWING MEDICAL OFFICER

Date..... M.O. J. A. D. Marquis S/L

CATEGORY APPROVED
A1B - A3B.
AUG 3 1942
J. A. D. Marquis S/L For D.M.S., RCAF

FIT Date 12-3-42
~~PILOT~~ A3B
OBSERVER
W/OPERATOR
A/GUNNER

M.O. [illegible]

NO. 6 M.SB. Toronto. July 27/42

1. Good physique - Wiry type.

2. Fair to good education. Bright alert, prompt individual.
A.E.M. WITH E.F.T.S. Mentalability average. Wants P.

P.6 O.5 G. D.S. Munroe F.L.

Night vision - 9/32 (low average) C.M.M.D.

Chamber - normal J.C.S.

R.C.A.F. Recruiting Office
Rec'd OCT 1 1942
O. K. ..... O.I.C. .....
R. C. ..... N. I. .....
S. L. ..... P. A. .....

FOR COMPLETION AND RETURN BY 1 **Form P. 64**

Mr. George H. Imrie,
5870 Somerled Ave.,
Montreal 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. R159909 F 19

DEPARTMENT OF NATIONAL DEFENCE

ESTATES BRANCH

OTTAWA, ONT.

July 23 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

IMRIE George John ~~F/Sgt.~~ P/O

R159909 R. C. A. F. O/S

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.

A commission granted as per letter of August 17th, 1945, signed by Sqd.Ldr. W.M. Wismer, R.C.A.F. Casualty Officer, Ottawa. New number and rank as follows:

J95163 Imrie, George John Pilot Officer.

This to take effect from July 29th,1944.

Col.

Director of Estates.

MG/VS

M.F.W. 77
6M—4-45 (7053)
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.....		GEORGE HERBERT IMRIE	46	5870 SOMERLED AVE MONTREAL. P.Q.
4	Mother of the Deceased.....		HAZEL IRENE IMRIE	47	5870 SOMERLED AVE. MONTREAL P.Q.
5	Brothers of the Deceased	Full Blood	DONALD BANKS IMRIE	17	5870 SOMERLED AVE' MONTREAL. P.Q.
		Half Blood	—	—	—
6	Sisters of the Deceased	Full Blood	—	—	—
		Half Blood	—	—	—
7	Names of brothers or sisters (whether of the full or the half blood) of the Deceased, *who are dead* and date of death of each.		Names and ages of their children (if any)		Address of their children
			—		—

ANSWER FULLY EACH QUESTION ON THIS PAGE

PARTICULARS AS TO IDENTITY

8	Full names of the deceased.	GEORGE JOHN IMRIE
9	Date of his birth.	MARCH 10TH 1922
10	Place and date of his marriage.	—
11	Place and date of his parents' marriage.	TORONTO, ONT. APRIL 14TH 1921

PARTICULARS OF DOMICILE

12	Place where deceased was born.	TORONTO, ONT
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, MONTREAL, 1935-1942 when he enlisted (b) Ontario - Toronto, 1934-1935 (c) " - Hamilton 1928-1934 (d) " - Toronto 1921-1928
14	Nature of employment before enlistment.	Graduate High school 1940 Apprentice Air Engineer - Commonwealth Air Training Plan 1940-1942
15	State whether he owned the premises in which he lived, and, if so, where situated.	— NO LIVED AT HOME —
16	Name place where deceased stated he intended to make his permanent home.	EXPECT MONTREAL, P.Q

PARTICULARS OF ESTATE

17	Did the deceased leave a Will other than a Service Will? If in your custody, please forward. If not, can you state where it is?	No
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?	No - SINGLE
19	(a) Did he have a Bank, Post Office or other deposit account? (b) Give name and address of bank, etc., and the amount on deposit. (c) Do you wish it administered with the pay account? (d) If it is a joint account, state the survivor's name and relationship to the deceased.	None in Canada. I believe he deposited savings in England. Likely Post office or Bank near his station - or in a station account. Administer with PAY ACCOUNT
20	Amount of War Savings Certificates purchased by the deceased and registered in his name. State where located.	One 50.00 Certificate - Registered in name of JACK IMRIE. Safety Box 115 - Bank of Montreal - ST. HENRY Montreal.
21	(a) Amount of Victory Loan Bonds left by deceased. (b) State whether bearer or registered. (c) State in whose name they are registered. (d) During what loan were they purchased? (1st, 2nd, 3rd, etc.) (e) In whose possession, and address, are they?	3rd Loan - $50.00 - Registered GEORGE H. IMRIE 4th " - 50.00 - BEARER 5th " - 100.00 - BEARER. These are in Box 115 - Bank of Montreal St. Henry, Montreal. I understand additional Bonds were subscribed for overseas.
22	If deceased had life insurance, name companies and amount payable under each policy and the person named as beneficiary therein.	Mutual Life of Canada $1000.00 - GEORGE H. IMRIE
23	Describe other assets, if any, and estimated value thereof. Use space on page 4 if necessary.	none

OTHER PARTICULARS

24	Did the deceased after enlistment incur any debts for:— (a) His own separate board and lodging while on service. (b) Service clothing and equipment. An itemized account for each such debt should be attached hereto, and if same is correct you should mark the bill "approved" and sign same. If believed incorrect, give particulars.	None to my knowledge

(PLEASE TURN OVER)

DECLARATION

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

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

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

Geo. H. Innis — Signature of Informant

5870 Somerled Ave. Montreal P.Q. — Address

CERTIFICATE

I hereby certify that to the best of my knowledge and belief Geo H Innis

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 31st day of August 1945.

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

Address 3801 Howard Ave. - 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

Re item 19 - I understand my son had a savings accounts of some kind in England, because he had told us of the depositing of money for safe keeping and for the future as a credit. I do not know whether he used the Post Office or a savings bank, but in all probability it would be somewhere handy to the stations at which he was staying.

Re item 21 - In addition to Victory Bonds for the third, fourth and fifth loans, my son informed me that he had taken out further Victory Bonds. In all probability these have not been fully paid up, as he had only received the third, fourth and fifth Victory Loan Bonds as enumerated. I feel sure, however, that payments have been made on further bonds and these payments should be to the credit of the estate.

OCCUPATIONAL HISTORY FORM

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

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

PLEASE LEAVE BLANK

Section A—GENERAL INFORMATION

1. (a) Print name in full ..... (b) Reg'l. No. ..... K 159909
2. (a) Arm of service ..... (b) Unit ..... (c) Rank ..... PRIVATE
3. (a) Date of birth ..... (b) Have you any dependents? ..... No (c) Place of residence at time of enlistment 16-3-42
4. (a) Place of enlistment ..... (b) Date of enlistment .....

Section B—EDUCATION AND TRAINING

5. (a) State age on finally leaving school ..... 18 (b) Were you attending school or college up to the time of enlistment? ..... No
6. State definitely highest standing reached at public, technical or high school (for instance—"4 years, Public School", "two years, High School", "Junior Matriculation", or "4 years technical course in printing", etc.) ..... JR. MATRIC.
7. If you attended a university, give name of university and standing or degree secured .....
8. (a) Did you ever enter upon a trade apprenticeship? ..... No (b) If so, for what occupation? ..... (c) Did you finish it? ..... (d) If you did not finish it, how long did you serve at it? .....
9. (a) What languages do you speak fluently? ..... ENGLISH (b) What languages do you read well? ..... ENGLISH

Section C—EMPLOYMENT CONDITION AT TIME OF ENLISTMENT

10. (a) State whether you were WORKING or NOT WORKING at time of enlistment. (Enter here only "Working" or "Not Working", as case may be; particulars are asked for below) ..... WORKING (b) At time of enlistment of what trade union or professional society were you a member? ..... —

Section D—PARTICULARS CONCERNING THOSE WHO WERE UNEMPLOYED AT TIME OF ENLISTMENT

QUESTIONS 11 TO 17 REFER ONLY TO THOSE WHO ANSWER "NOT WORKING" IN QUESTION 10 (a)

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

Section E—PARTICULARS CONCERNING THOSE WHO WERE EMPLOYED AT TIME OF ENLISTMENT

QUESTIONS 18 TO 23 REFER ONLY TO THOSE WHO ANSWER "WORKING" IN QUESTION 10 (a). PLEASE READ THESE QUESTIONS AND REPLY TO THOSE APPLYING TO YOU AT TIME OF ENLISTMENT

IF YOU WERE AN EMPLOYEE WORKING FOR AN EMPLOYER UP TO THE TIME OF ENLISTMENT, PLEASE ANSWER QUESTIONS 18 TO 21.

18. Name of employer ..... Address .....
19. Nature of employer's business (for instance, "farmer", or "building contractor", or "boot factory", or "iron foundry", or "retail store", etc.) ..... E.F.T.S.
20. (a) Your specific occupation ..... (b) Number of years' experience at this occupation with any employer .....
21. (a) Did your employer promise definitely to give you employment on discharge? ..... No (b) Did your employer refuse to promise you employment on discharge? ..... — (c) Do you wish to return to your former employment? .....

IF YOU WERE WORKING ON YOUR OWN UP TO THE TIME OF ENLISTMENT, THAT IS TO SAY, OPERATING A FARM, A STORE, AN AGENCY, OR IN PROFESSIONAL PRACTICE, OR AS A PARTNER IN ANY SUCH LINE, PLEASE ANSWER QUESTIONS 22 AND 23

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

Section F—PARTICULARS OF FARMING EXPERIENCE

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

Section G—MISCELLANEOUS

26. Have you made any arrangements other than indicated above, for re-establishment in civil life after discharge? ..... MCC
27. If so, state nature of your plans (for example, do you plan to return to school, or have you been assured of a job, etc.) ..... AVIATION
28. State any employment preference or ambition you may have, other than indicated elsewhere in this form .....

DATE March 17 194 2 SIGNATURE John Imrie

Pilot or Observer (Std)

ROYAL CANADIAN AIR FORCE

RECORD OF SERVICE AIRMEN

R.C.A.F. Special Reserve

A.F. No.	Surname	Christian Names	Religion
R.159909	Imzie	George John	Protestant.

Born 10-3-22 Place Toronto - Ont. Country Canada. Citizen of Canada Racial Origin Canadian

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)

Mr George Herbert Imzie (Father)
5870 Somerled. Ave. Montreal - P.Q.

CIVIL EDUCATION

High School Entrance ✗ Jr. Mat. ✗ Sr. Mat.

Technical School Business Courses

University

CIVIL OCCUPATIONS AND EXPERIENCE

Apprentice Engineer - (22-7-40 - 7-12-41)

PREVIOUS SERVICE	ENLISTMENT		Med. Cat.	Date			Med. Cat.	Date		
None	Date	16-3-42	A1B	12	3	42				
	At	Montreal - Que	A3B							
	Term	Duration								

RANK	Auth.	Date			TRADE	Auth.	Date		
A.C.2		16	3	42	P + O		16	3	42
					Remustered to Aircrew (ITS) Std	DRO 966 D/2	6	7	42
L.A.C.		11	9	42	Pilot Std.		11	9	42
T/Sgt. (P)	DRO 196/43.	20	8	43	~~Remuster Air Bombardier~~	~~DRO 334B~~	~~28~~	~~11~~	~~42~~
					~~Remuster Air Navigator "B"~~	~~DRO 335~~			
					Remuster Air Nav "B"	DRO 338	2	12	42
					Rem. Air Nav 'B' S/L. Gr.	DRO 196/43	20	8	43

TRADE TESTS AND COURSES						
Trade	GP	%	P or F	Date		
P + O	S		P	29	12	41
categorized	NB			20	8	43

LEAVE

From	To	Auth. and Description
12-9-42	25-9-42	Spec. DRO 219
25-9-42	5-10-42	Spec DRO 228
31.12.42 to 6.1.43 (5 dys)		DRO 364 Spec New Years leave
20-8-43	5-9-43 (16)	Special DRO 196/43
2-10-43	15-10-43 (14)	Embar. DRO 236

CHARACTER AND TRADE ASSM. HONOURS, AWARDS AND MENTIONS

Date			Character	Trade and Assm.	Honours and Awards	Auth.
20	8	43.	Awarded Air Observers Badge - until			AFHQ P2580
			Air Navigators Badge	is available		24-7-42

R.C.A.F. R.44C
50M—10-41 (961)
H.Q. 1062-3-58

(OVER)

MOVEMENTS AND CASUALTIES

Authority	Unit from	Unit to	Date	Authority	Unit from	Unit to	Date
MOR. 13	#13. R.C. Mtl.	#5 - Lachin. - Que.	16-3-42				
DRO 64/42	T.O.S #5 M.D	LACHINE QUE	16-3-42				
MO 119/42 Proc	T/D Rockcliffe	17-5-42 Ret	19-5-42				
DRO 163/42.	Remustered Aircrew (ITS) Std.		eff 9-7-42				
DRO 170/42	#5 MD	#6 ITS	18-7-42				
DRO 220	Issued SHT W	#C 163112	eff 11-9-42				
DRO 241/42	#6 I.T.S.	#10 EFTS	16-10-42				
DRO 270	#20 EFTS	KTS	12-11-42				
TOS DRO 322	Oshawa	Trenton	15-11-42				
SOS DRO 32	#1 RCT Trenton	#6 B&G	5/Feb/43.				
DRO 54A.	Ont. View Apt.	8 A.O.S. Ancienne Lorette	3-4-43				
DRO 196/43	No 8 AOS Anc. Lorette	No 1 B&G Jarvis	4-9-43.				
DRO 236 SOS	#1 B&G	#9 Y Depot	15-10-43				

The instructions regarding this form are contained in Chapter XIII, A.P. 1301 (War Manual Part II). **R.A.F. Form 1580.**

ROYAL AIR FORCE.

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

Official No. CAN.R.159909 Name IMRIE George John. Rank T.SGT.
(In full in block capitals, surname first). (Or acting appointment).

R.A.F. Trade Navigator B. Grp.2. Special Qualifications
(e.g., Gas Instructor, Fire Fighter, Boxing Instructor).

Date of Birth 10.3.22. Religion PROTESTANT Occupation in Civil Life Appr.Eng.1940-41.

Last Enlisted 16.3.42. 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) :
Mr G H Imrie 5870 Donald Ave Montreal Father

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.
1. B & G.	1.Y. Depot.	15.10.43.		P/O STD AC.2.	16.3.42.
1.Y. Depot.	U.K.	22.10.43.		Pilot. " LAC.	11.9.42.
	Emb.Halifax.	22.10.43.		Nav.B. " "	2.12.42.
	Disemb. U.K.	30.10.43.		" " SPEC. T.SGT.	20.8.43.
Int.C.137.	3.(RCAF)PRC.	31.10.43.		Nav.B. Grp.2. "	20.8.43.
3.(RCAF)PRC.	5 A.O.S	20.11.43			
5 A.O.S.	2(O)AFU.	20/12/43.			
2(O)AFU.	12.OTU.	22 Feb 44.			
12 O.T.U.	31 Base	19.5.44			
31 Base.	115 Sqdn	17/7/44.			
115 Sqdn	RCAF. U/K N/C.	30.7.44			
Clothing	etc. dealt with in				
accordance	with X.M.O. X. 1129/42				
	P. L. Wood S/Ld.				
	33 Base Waterbeach				
Pres. Dead	CR. 784	30.7.44			
		Gen 125/45			

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

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

(*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.
F/Sgt	V.G.	Nav. B	ON STRENGTH FOR TRAINING ONLY				20/12/43	[illegible] S/L
Sgt.	Gd	Nav (B)	ON STRENGTH FOR TRAINING ONLY				31.12.43	[illegible] F/Lt.
F/Sgt		Nav. B	ON STRENGTH FOR TRAINING ONLY				19.5.44	[illegible] S/L
Sgt.	V.G.	A/B.	On Strength less than one month				30.7.44	W. Sweeney W/O
POR 50/43	23.12.43	28.12.43	6 days P Leave. F1642 Issued.					[illegible] S/O
POR 16/43.	7 Days Prv: Leave 10.11.43-17.11.43 (1300 hrs) RW.E15505.							[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 Navigators Badge.	20.8.43.
POR. 17/44.	Authorised to wear the Canadian Volunteer Service Medal Ribbon + Maple Leaf Emblem ~~wef 15.1.44~~	15.1.44.

R E P O R T

FROM: No. 1 Missing Research and Enquiry Unit, Royal Air Force, c/o British Army of the Rhine.

COPIES TO: Air Ministry, (P.4Cas) 73-77 Oxford Street, London W.1.

DATE: 23rd February, 1946.

YOUR FILE OR FOLDER REFEEENCE: P420993/44/MR407 d/d 16.1.46

YOUR CASUALTY ENQUIRY NUMBER: CE NO. 80

OUR REEERENCE: 1MREU/S.8/CE80/AIR

NAME OF SEARCH OFFICER AND NUMBER OF SECTION: S/Ldr Le Bas, No. 2 Section

TARGET: Caen

AIRCRAFT TYPE AND SERIAL NUMBER: Lancaster Mark III P.B. 130

DATE REPORTED MISSING 30th July, 1944.

PLACE OF CRASH, WITH MAP REFERENCE: Clinchamp S/Orne 10 Kms. S. of Caen Sheet 8, T/9957

PLACE OF BURIAL, WITH MAP REFERENCE: Bretteville S/Laize Canadian Cemetery for Sgt. Thompson and 3 Unknowns Map Ref: Scene of Crash for Sgt. Conly A.8/U05.).

CREW:	R163512 Sgt Thomson, C.A.	Pilot	R166140	Sgt Lonie, J.M.	Nav
	R159909 Sgt Imrie, G.J.	AB	R198995	Sgt Conly, W.M.	AG
	R213501 Sgt Carey, R.W.B.	AG	172728	P/O Fisher, E.T.	WOP/AG
	1867911 Sgt Money, E.T.	E/Eng			

RESULT OF INVESTIGATION AND FINDINGS:

See attached 3MRES/XF.41/Calvados/AC dated 12th November, 1945, also refers to this case.

As reported earlier Sergeant Thompson, C.A. is buried in the Canadian Cemetery at Bretteville S/Laize, Map ref: 7F.079545, i.e. about 12 Kms, S. of Caen, in Plot 3, Row "D" Grave No. 11. I revisited this grave. Three unknown members of the crew of this crash are also buried in this cemetery in Plot 2, Row A, Grave Nos: 1, 2 and 3. This fact is proved by the map coordiantes of where these 3 unnamed bodies were originally picked up which was the scene of the crash.

After considerable search the aircraft was found at the entrance to a wood at T/9957 and definitely identified as Lancaster, P.B. 130. Traces were found of four bodies having been temporarily buried near the crash. These were found of four Canadian Cemetery. After further considerable search the grave of Sgt. Conly was found deep in the wood 500 x S. of the crash. His grave of Sgt. Conly R?C.A.F. and would appear to be in the same state as when buried on 13-8-44 by the Army Chaplain. I am causing this body to be exhumed and buried in the canadian Cemetery of BrettevilleS/Laize. The 2 remaining members of the crew are in m opinion crabonised in the burnt out portion of the aircraft where part of a skull was found by me. A search will be made early next week of the ashes and surroundings and all human remains removed and if unidentifiable will be placed with the other 3 unidentifiables in Bretteville s/Laize ~~x~~ Cemetery.

A further report will be made and Grave Nos notified during the ~~gx~~ course of next week.

signed H.A. Le Bas, Squadron Leader,

E.R. Edmon S/L
for Wing Commander, Commanding
No. 1 Missing Research & Enquiry Unit.

Encls.

DEPARTMENT OF NATIONAL DEFENCE

INVENTORY

Date .....

The Estates Branch has received the following personal effects of:

NAME G.J.IMRIE,F/Sgt., R-159909

1 Black travelling zip bag contg;-
1 Pr.civilian trousers
1 Toilet case contg;-
soap container
hairbrush
clothes brush
1 bakelite razor in case
1 Case contg;-
razor blades
3 collar studs
1 identity disc chain
1 tooth brush in container
1 steptic pencil
1 comb
3 prs.scissors
1 wish bone
10. prs.socks
1 pr. football socks
1 bathing cap
1 pr.leather gloves
1 pr. sun glasses in leather case
1 Gillette razor in case with 4 blades

1 parker Dufold fountain pen
1 cycle pump with connection
1 leather writing case W/zip fastener contg;- misc.correspondence,photos & address books etc.
1 holdall containing 2 brushes
1 cigarette lighter,no name (unserv)
1 cycle repair outfit
1 tin contg;-mis.correspondence, 3 keys,comb & nail file etc.
1 torch
2 Wallets (broken)
5 Books
1 Wallet contg;- souv.note,coins.
1 New Testament
1 Leather cigarette case
1 Book Daily Prayers
1 housewife case contg;- wrist watch strap,razor blades,shoe laces
1 shaving brush
3 brevets "N" RCAF
1 soap container (empty)
chevrons
1 Pr. socks

Received the effects as listed

SIGNATURE ....Geo A. Imrie....

DATE REC'D ....Dec 9/45....

D/G

DEPARTMENT OF NATIONAL DEFENCE

INVENTORY

Date .....

The Estates Branch has received the following personal effects of:

NAME G.J.IMRIE,F/Sgt.,R-159909

1 cycle tool bag contg;-xxxxx
1 toothbrush in container
1 cardboard box contg;- 6 films
2 tobacco pouches
1 sheepskin jacket
1 cardboard carton contg;-
2 prs.pyjamas
4 face cloths
6 shirts
6 prs.pants
4 vests
2 prs.long pants
2 prs.combinations
9 ties
1 money belt contg; - 1 cent
10 handkerchiefs
1 pr.braces
1 pr.slippers
1 steel mirror
2 chevrons
2 F/Sgt.crowns
2 neck comforters
1 sleeveless pullover
1 long sleeve pullover
1 khaki jacket
1 pr.bathing trunks
2 civilian ties
1 " jacket
1 O brevet
2 gym shirts
2 underwear tops

Received the effects as listed

SIGNATURE ..... Geo H. Imrie

DATE REC'D ..... Dec 9/45

D/G

Sgt Imrie G.J

Copy to Ottawa 24/2

P.420993

33

No.115 Squadron,
R.A.F.Station,
Witchford,
Nr. Ely, Cambs.

1153/C.1700/28/P.1. 31st July, 1944.

Sir,

FLYING BATTLE CASUALTY TO LANCASTER III AIRCRAFT PB.130
DURING OPERATIONS DAWN 30th JULY, 1944.

I have the honour to forward a brief report in amplification of this Unit's signal A.122 dated 30th July, 1944.

This aircraft with R.163512 Sgt. Thompson C.A. as Captain and the undermentioned crew took off at 05.59 hours to attack CAEN, and since the time of take off, nothing further has been heard of it.

R.166140	Sgt.	Lonie J.M.	Nav.
R.159909	Sgt.	Imrie G.J.	A/B.
R.198995	Sgt.	Cohly W.M.	A/G.
R.213501	Sgt.	Carey R.W.	A/G.
172728	P/O.	R.T.Fisher	WOP/AIR.
1867911	Sgt.	Money E.	F/Eng.

I have the honour to be,
Sir,
Your obedient Servant,

Sgd: ? ? ? ?

Wing Commander, Commanding,
No.115 Squadron, R.A.F.

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

Royal Canadian Air Force

CERTIFICATE OF PRESUMPTION OF DEATH

NO. 12941

This is to Certify that

R159909 FLIGHT SERGEANT IMRIE, GEORGE JOHN R.C.A.F.
(Number) (Rank) (Name in Full) (Unit)

has been officially reported as missing since the 30TH day

of JULY, 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 27TH day of JUNE 1945

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

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

(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: IMRIE (*Block letters*)

Given names: GEORGE JOHN

Do not write in this space

4. RESIDENCE

Street: Somerled Avenue No. 5870

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		Single

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

10. BIRTHPLACE (Province or Country): Ontario

11. DATE OF BIRTH: March (Month) 10th (Day) 1922 (Year)

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

OCCUPATION

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

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

15. Date deceased last worked at this occupation: July 30/44

16. Total years spent in this occupation: Two

	17. NAME	18. BIRTHPLACE (Province or Country)
FATHER	Imrie, George Herbert	Ontario
MOTHER (Maiden Name)	Banks, Hazel Irene	Ontario

19. Place of burial, cremation or removal

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

21. PLACE OF REGISTRATION OF THIS BURIAL

(a) Name of parish or church

(b) Civil municipality of

(c) Municipal county

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

CONFIDENTIAL MEDICAL CERTIFICATE OF DEATH

22. Date of death: July (Month) 30th (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: July 30th 44 19

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.): Registrar Officer

For (R.C.A.F. R

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)

095-16-3

OFFICIAL ROYAL CANADIAN AIR FORCE CASUALTY NOTIFICATION

Opened

NUMBER J95163 (R159909) RANK P/O WITH EFF. 29-JULY-44 UNIT 115 SQDN OVERSEAS

TRADE NAV (G.L.) H.Q. R15-9909

NAME IMRIE, GEORGE JOHN

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

PRESENT MARITAL STATUS RELIGION CANADIAN

FRENCH CANADIAN OTHER

NEXT OF KIN

RELATIONSHIP

ADDRESS

AMENDED EXTRACT RE: RANK

FATHER'S NAME

ADDRESS LIVING ON ENLISTMENT

MOTHER'S NAME

ADDRESS LIVING ON ENLISTMENT

ADDRESS AT TIME OF ENLISTMENT MARITAL STATUS AT TIME OF ENLISTMENT

OCCUPATION

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

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

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

CASUALTY DETAILS:

AUTHORITY CAS. SIG. NO.

BOMBER MAIL LETTER----------d-28-MAY-45

PREVIOUSLY REPORTED "MISSING" 30-JULY-44 AFTER AIR OPERATIONS (OVERSEAS) (OVER CAEN FRANCE)

NOW "PRESUMED DEAD" 30-JULY-44 FOR OFFICIAL PURPOSES

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

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

DATE 20-AUG-45

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

A. E. Ashmore

FOR CHIEF OF THE AIR STAFF

R.C.A.F. R217
30M-6-44 (4664)
H.Q. 885-R217
△TS-RT

2

ADMINISTRATOR OF ESTATES, OTTAWA

46164

R159909 (R.O)

OTTAWA, Canada, 21st January, 1947.

R E G I S T E R E D

Mr. G.H. Imrie,
5870 Somerled Ave.,
Montreal, P.Q.

Dear Mr. Imrie:

It is a privilege to have the opportunity of sending youtthe Operational Wings and Certificate in recognition of the gallant services rendered by your son, Flight Sergeant G.J. Imrie.

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

Yours very sincerely,

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

Out 895163

R.A.F. Form 39.
Army Form I. 1220.
Naval Form M. 246.

Surna[redacted] IMRIE — Christian Names G.J.

R.A.F. or Army No. R159909 — Rank F/S

Command — Branch or Trade Nav/B

Unit 115 Sqdn — Under instruction as

Age — Total Service

CONFIDENTIAL.

Hospital or Sick List—Record Card.

Hospital or Station rendering this form: RCAF O/S H.Q.

No. of enclosure in Form 48 — Serial No. in Form 38 or in A. & D. Book

Dates of:

Arrival as direct admission — from

" " transfer — from

Discharge to duty

" as an invalid or to unit for invaliding

Transfer — to

Death 30-7-44

Number of days under treatment

CLINICAL NOTES.

Disease or injury: Death Presumed

New disease supervening, and date

Operation, nature and date

Anæsthetic, and method of administration

Date	Previous history of case and family, if relevant
30-7-44	Condition on admission: Death Presumed RCAF C.R. 530/7 J.B. Hardie F/L (J.B. Hardie) F/L M.3

N.B.—In the event of an error in diagnosis, the disease or injury entered will be crossed out in such a way as to remain legible, and the new disease or injury will be entered above it. In the event of a new disease supervening it will be entered in the space allotted.

(GV624) Wt. 17225/O1054. 50M pads. 7/44. B & S. Ltd. 51-8847.

OCT 6 1943

2873
30

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, Que. ON 16-3-42

MARRIED OR SINGLE Single

No R-159909

NAME IN FULL IMRIE, G. J.

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
46	8-2-43	L/AC	S	–	1 50	75	2 25		AUTH F.P. 9-2-43
196	Aug 20/43	Sgt.	S.		3 70		3 70	N.A.	REM. TO PIR NAVIGATOR CLASS G. AWARDED A.O. BADGE TAPE/TO RANK T/SGT PAID

ASSIGNMENTS

Assignee	Eff. Date	Amount	Total
IMRIE G.H. FATHER Dep	1-4-42	15 –	27 40
R.C.A.F.	1-9-42	4 –	
R.C.A.F. C 4th U.L.	1-5-43	8 40	27 40

DEPENDENTS ALLOWANCE

Date App. Forwarded	Relationship	Amount Awarded	Eff. Date

REMARKS

N.D.T. Class.

Period	No. of Days	Amount of Pay	Sub. Allce.	Other Credits Description	Other Credits Amount	Credit B/F	Total Credits	Ass. Pay	Pen. Ded. & N.D.T.	Debit B/F	Other Debits Description	Other Debits Amount	Cas. Pay	Mid Pay	Total Debits to this Column	End Pay	Debits & Credits to Next Account	Casualties and Sig. of A.O. on Transfer of Account
1-31-7	31	69 75					69 75	27 40						21 –	48 40	21 35	0	
1-19/8	19	42 75																GRANTED SP. LEAVE AUG 20/43 TO SEPT 4/43 16 DAYS.
20-31/8	12	44 40	8 00				95 15	27 40					57 40	21 –	105 80		10 65	SOS TO No 1 B+G JARVIS. EFF Aug 4/43 DRO 196
1-4/9	4	14 80					14 80	3 65		10 65					14 30		50	
5-30 Sept-43	26	96 20			7 00	50	96 70	23 75					35 00 –	–	58 75	86 75	48 80	A.I.S.B.
1-15 Oct-43	15	55 50		RIA	7 00		62 50	13 70		48 80					62 50		0	EMB LU 2-15 OCT/43 (1 PAY) DR 236 RIA SOS TO No 1 Y. DEPOT HALIFAX, N.S. EFF 15 OCT 43 DRO 236.

Audited by Treas.
8-10-43 D.M. Reid

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

RECORD OF PAY

P or O.

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

APPOINTED OR ENLISTED AT Montreal, Quebec. ON 16-3-42

MARRIED OR SINGLE Single.

No. R.159909 NAME IN FULL IMRIE. G.J.

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
6a	16-3-42	AC2	S.	A.S.	1 30	- -	1 30	NA.	#5 Manning Depot. Lachine, Que.
219	11-9-42	LAC	S	A.S.	1 50		1 50		#6 I.T.S.
2-PV	11-10-42	LAC	S	A.S.	1 50	75	2 25		F. Pay
270	12-11-42	LAC	S	A.S.	1 50	—	1 50		" " Classes
46	8-2-43	-	-	-	1 50	75	2 25		and A.P. 8-2-43.

ASSIGNMENTS

Assignee	Eff. Date	Amount	Total
IMRIE. George Herbert. father. vol. assigt.	1/4/42	15 00	15 00
REC GEN WSC	1-9-42	4 00	19 00
" " 3rd LOAN	1-11-42	8 41	27 41
Final Payment 3rd L.	1-5-43	8 41	19 00
P.G. of C 4th Loan	1-5-43	8 40	27 40

DEPENDENTS ALLOWANCE

Date App. Forwarded	Relationship	Amount Awarded	Eff. Date

REMARKS

N.D.T. Class.

PERIOD — OTHER CREDITS — CREDIT B/F — TOTAL CREDITS — ASS. PAY — PEN. DED. & N.D.T. — DEBIT B/F — OTHER DEBITS — 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

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
16-31/3/42	16	20 80					20 80									20 80	✓	
1/30-4-42	30	39 00					39 00	15 00						10 00	25 00	14 00	✓	
1942 1/31-5	31	40 30					40 30	15 00						10 00	25 00	15 30	0	
1/30-6	30	39 00				0	39 00	15 00		0			8 88 1 00		24 88	14 12	0	
1/18-7	18	23 40					23 40	9 50						10 00	19 50		3 90	SOS, TO #6 I.T.S. TORONTO. RO: 171 EFF: 18-7-42
July 1/31-7	13	16 90				3 90	20 80	5 50							5 50	15 30	0	
1-31/8	31	40 30					40 30	15 00						10 00	25 00	15 30	0	
1-10/9 11-30/9	10 20	13 00 30 00	5 00 6 50	RA R.A.			54 50	19 00			E-224	95	28 00 A-62 4 67 A-70 10 54 A-69		47 95		6 55	DO 219 12-2 & 9/42 INCL: DO 228 25/9 to 4/10/42 INCL: DO 241 SOS 20 CFTS OSHAWA EFF: 10/10/42
1-10/10	10	15 00				6 55	21 55	6 34							21 55		0	
Oct. 11-31	21	47 25					47 25	12 66						10 00	22 66	24 59	0	
Nov. 1-12	12	27 00					27 00	10 96						20 00	30 96		3 96	DRO 270 - SOS TO RTS, TRENTON. eff. 12-11-42
12-30/11	18	27 00					27 00	16 45		3 96					20 41	6 59	—	322 TO 3 RC EFF 13-11-42
1-31/12	31	46 50	2 50				49 00	27 41			E2102 GAUNTLETS	2 43		10 00	39 84 40 41	9 16	0	364-D-9 2V & R.A - 5 DYS
1943 1-31/1	31	46 50					46 50	27 41					3 00	10 00	37 41	9 09	3 80	
1-5/2	5	7 50					7 50	4 50		3 00			3 00		7 50	—	0	32 SOS TO 6 BBE MONTREAL-VIEW, EFF 5-2-43
6-7-2 8-28-2	2 21	3 00 47 25					50 25	22 91					5 00		27 91	22 34	0	
1-31/3	31	69 75					69 75	27 41						20 00	47 41	22 34	0	
1-3/4	3	6 75					6 75	2 75							2 75		4 00	TO: 83 A. SOS #8 BOS. ANCIENNE LORETTE EFF. 3-4-43. SOS. No. 79
4-30/4	27	60 75				4 00	64 75	24 66						20 —	44 66	20 09	— 0	
1-31/5	31	69 75					69 75	27 40						21 —	48 40	21 35		
1-30/6	30	67 50					67 50	27 40						20 —	47 40	20 10	— 0	

R.C.A.F. R. 45
75M—8-41 (648)
H.Q. 1062-2-126

ROYAL CANADIAN AIR FORCE

Individual Record of Flying

RANK: LAC No. R 159909 NAME: Inwin, G.J.

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
No. 20 E.F.T.S OSHAWA, ONT.			5	20			20	15																											25	35
No. 6 B. & G. SCHOOL MOUNTAIN VIEW - ONT.																											38	15	11	50					50	05
No. 8 AIR OBSERVER SCHOOL ANCIENNE LORETTE, QUEBEC	20 August-1943																																		116	35
No. 1 B+G JARVIS ONT.	OCT. 1943																																		9	15

G.E. Guyer-Smith S/LDR.
O/C GROUND INSTRUCTION SCHOOL
No. 6 B. & G. SCHOOL
MOUNTAIN VIEW - ONT.

CERTIFIED CORRECT
SIGNATURE Geo W Jacobs
C.S.O. No. 8 AIR OBSERVER SCHOOL
ANCIENNE LORETTE, P.Q.

L.B. Montigny S/L
O.C., A.T. Squadron,
No. 1, Bombing and Gunnery School, Jarvis, Ontario

THE CANADIAN
PENSION COMMISSION
115 SQDN OVERSEAS

IN REPLY REFER TO
NO. XXXXXXXXXX P. & N.H.
D.V.A. 930-G

Ottawa, July 7th, 1945.

G.H. Bowler, Esq.,
Ministry Representative,
British Ministry of Pensions,
Journal Building,
Ottawa, Ontario.

R.159909 F/SGT IMRIE, George J.

Dear Sir:

The Department of National Defence for Air reports that the marginally named who was reported "Missing" 30-JULY-44 after air operations now ~~on the~~ "presumed dead" 30-JULY-44 for official purposes. He was a member of the R.C.A.F. attached to the R.A.F. (Overseas) and his next of kin is reported as

Father -
Mr. George Herbert Imrie,
5870 Somerled Ave., Montreal, Que.

The Addressograph Stencil shows payment of Assigned Pay of $ 20.00 a month to Mr. George H. Imrie,
5870 Somerled Ave.,
Montreal, P.Q.

As no D.A. was payable the Commission will not take any action unless a claim be filed.

Yours sincerely,

E. Clewes,
for
Canadian Pension Commission.

/AS
COPY/MONTREAL D.O.

C.P.C. 70 4M-9-42 Req. 902

c4

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, GEORGE JOHN IMRIE of the City / Town / Village / Township

Last Permanent Civilian Address

of Montreal in the County / District of

Province of Que., aero apprentice (Civil Occupation)

a member of the Royal Canadian Air Force, Number R. 159909 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 Father

GEORGE HERBERT IMRIE
5870 Somerled Ave;
Montreal, Que.

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 all my Estate

108465

(4) I appoint George Herbert Imrie (Name) (Address) Same as above, to be the Executor ~~Executrix~~ of this my Last Will.

IN WITNESS WHEREOF I have hereunto set my hand this 17th day of March 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.

John Imrie (Signature of Testator)

First Witness sign here.

(5) Oliver Rouyela (Signature)
#5 M.D. Lachine Que (Address)
Clerk (Occupation)

Second Witness sign here.

Romeo Grignon (Signature)
#5 M.D. Lachine Que (Address)
Clerk (Occupation)

(Witnesses are not to be beneficiaries.)

R.C.A.F. Rec'd APR 6 1942
O.K.
R.C.
S.L.

[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.

M

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)

CONFIDENTIAL

FORM 5023

R.C.A.F. TRAINING REPORT

NAVIGATOR (B)

No. 8 AIR OBSERVER SCHOOL

1. Surname IMRIE Christian Names George John

2. Number R159909 3. Rank LAC. 4. Course No. 73(A)

5. Posted from No. 6 B. & G. 6. Date course commenced 5 Apr. 1943 7. Date course ended 20 Aug. 1943 8. Posted to No. 1 B. & G.

9. GROUND WORK			10. AIR WORK		
Subject	MARKS ALLOTTED	MARKS OBTAINED	Subject	MARKS ALLOTTED	MARKS OBTAINED
(a) Air Nav.-Elements	200	160	(a) Air Nav.-Day	300	225
(b) Air Nav.-Theory	200	164	(b) Air Nav.-Night	200	148
(c) Air Nav.-Exercises	200	140	(c) Log Keeping	150	108
(d) Meteorology	100	76	(d) Reconnaissance	100	67
(e) Signals-Practical	100	85	(e) Photography	100	72
(f) Aircraft Recognition	50	35	(f) Bombing	100	83
(g) Reconnaissance	50	48	(g) Met. Observations	50	25
(h) Photography	50	46			
(i) Armament	50	29			
Total	1000	783	Total	1000	728
PER CENT		78.3	PER CENT		72.8

11. Assessment of qualities of Character and Leadership	MARKS ALLOTTED	MARKS OBTAINED
	100	65.3

Degree of Suitability for further training	0 NOT AT ALL SUITABLE	1 MODERATELY SUITABLE	2 DEFINITELY SUITABLE	3 EXTREMELY SUITABLE
12. As a Navigation Instructor	X			
13. As an Armament Instructor	X			
14. Specialist Navigation Course	X			

(Mark "X" in the appropriate column for each)

15. Remarks: Above Average. An enthusiastic, active student who has a tendency to become slightly erratic at times. A good all round navigator.

Passed/~~Failed~~

Date 20th August, 1943.

Signed [illegible] Officer Commanding

N.B. (Flying times and Bombing shown overleaf).

16. Flying Times (at this Unit):

Type of Aircraft	Time	1st Nav*	2nd Nav	Armament Flying	Other Photo	Total
ANSON	Day	33.25	32.20		5.50	71.35
	Night	21.05	23.55			45.00

* Count only the time during which the pupil carried full responsibility for the navigation of the aircraft.

17. Bombing:

Type of Sights Used	Time	Number of Bombs Dropped			Best two high level day exercises converted to 10,000 Ft.
		High Level	Low Level	Camera Ob. H.E.	
C.S.B.S.	Day	10	nil	nil	Average Error
	Night	5	nil	1	41

Position in class - 12
No. in class - 21

NO. R159909 RANK LAC NAME Imrie, G.J. Date ...18-11-42.....

R.C. Form 1

Date of Birth	Selection Board at	~~Married~~ Single	Civil Occupation	Citizenship
10-3-22	.....		Appr. Eng: at Civil EFTS's (2 yrs.)	Canada

I.T.S.(W)	Maths	90 %	E.F.T.S.	%	S.F.T.S.	
#6	Nav.	88 %	#20	%		

Education XI Ont: (Science) Credits Matric. Jun:	G.T. ( ) 75/80	Sports Interests Football, baseball, hockey, scouting. Aero and Boat models - reading

Flying Time		Service Schools attended	Time to Solo
England .....Hrs.		#6 I.T.S. #20 E.F.T.S.	10.55
U.S.A.....Hrs.			
Canada ...25.35....Hrs.			

Unit by which eliminated	Reason for Elimination	Recommendation of such Unit
#20 E.F.T.S.	5	A.B.

Medical Category	V.G.	Good	Average	Poor
Turret A1BA3B				
Temperament		x		
Personality		x		
Keenness		x		
Intelligence		x		
Service Spirit		x		
Determination			x	

Decision of Reselection Board A.B.

A keen type interested in aircrew and has the quàlifications of A.N. (B) interested inthe practical side as well as Nav ~~KXXX~~ his presence is alert and should have no difficulty if he applies hi self to getting down to work The Board recommends him taking A.N. (B)

F/L. Outram, E.G. F/L. Hince, H.A.

28-11-42
This lad is recommended for A.N. (B) but insists he hasn't the interest to stay the Nav. course and the Board therefore agrees somewhat reluctantly,to his taking the A.B. course.

2-12-42
Had a change of heart.
Now wants to go as A.N. (B)
Is well qualified for this course and should be O.K.

F/O. Smith, M.M. F/L. Sutton, H.R., DFC

F/L. Sutton, H.R., DFC F/L. Outram, E.G.

Member President

SCHOOL REPORT

R.159909 LAC Imrie, G.J.

T.58A Repat :

No. 6 I.T.S. - Young and may be slightly immature. Likeable with very pleasant personality. Serious about job in hand. Second Aircrew recommendation Air Observer.

No. 20 E.F.T.S. - This student's progress insufficient for amount of time. Landings inconsistent - seems tobe tense near ground. Airwork shows tendency to neglect and failure to exercise good judgment. Recommended for Air Bomber.

T.91 Report:

Same as E.F.T.S.

HC

Date of Birth:
10-3-22

R.C.A.F. T.58A
Revised: 1-42

ROYAL CANADIAN AIR FORCE

REPORT ON PUPIL PILOT - FLYING AND GROUND TRAINING

SURNAME IMRIE CHRISTIAN NAMES George John NUMBER R159909 RANK AC 2

I.T.S. No. 6 TORONTO COURSE NO. 58 FROM 20-7-42 TO 11-9-42

E.F.T.S. NO 20 OSHAWA COURSE NO. 66 FROM 12-10-42 TO 4-12-42

S.F.T.S. COURSE NO. FROM TO

TRAINEE FROM: CAN. XXX U.K. AUS. N.Z.

(1) G. I. S. RESULTS

SUBJECTS	Finals ITS	Finals EFTS	Finals SFTS	Supps. ITS	Supps. EFTS	Supps. SFTS
1. Mathematics	135					
2. Law, Discipline	85					
3. Navigation	133					
4. General Studies	71					
5. Airmanship						
6. Airframes						
7. Aero-Engines						
8. Theory of Flight						
9. Anit-Gas	40					
10. Armament (Written)	40					
11. Armament (Practical)						
12. A/C Recognition	98					
13. Drill	65					
14. Signals (Written)	120					
15. Signals (Practical)						
16. Meteorology	42					
TOTAL OBTAINED	829					
TOTAL POSSIBLE	1000					
PERCENTAGE	83					
NUMBER IN CLASS	101					
POSITION IN CLASS	51					

(2) FLYING RESULTS

TESTS	EFTS	SFTS
20 Hours		
Instrument		
Clear Hood		
Navigation		
TOTAL OBTAINED		
TOTAL POSSIBLE		
PERCENTAGE		
NUMBER IN CLASS		
POSITION IN CLASS		
(3) FLYING APTITUDE		
1. Natural Skill		
2. Skill in Landing		
3. Airmanship		
4. Cockpit Drill		
5. Instrument Flying		
6. Night Flying		
7. Aerobatics		
8. Formation Flying		
9. Map Reading		
10. Wind Speed & Direction Finding (TE)		
11. Straight Runs over as Pilot (TE)		

(4) FLYING TIME

School	Type AC	DAY Dual	DAY Solo	NIGHT Dual	NIGHT Solo	Formation	Instrument	Link	NAVIGATION Dual	NAVIGATION Solo	Dual to first Solo	Passenger
#20 E.F.T.S.	Tiger M.	20.15	5.20				1.40	7.30	.40		10.55	

(5) ACCIDENTS (C.A.P. 100 Sec. 4)

School	Type of ~~XXXXXXX~~ Accident Para. 27	Assessment of Blame Para. 25	Previous Communications	Signature of C.S.O. or C.F.I.
No.20 E.F.T.S., Oshawa, Ontario.	"B"	Inexperience	A:347 & A:348	[illegible]

(6) ASSESSMENT OF SUITABILITY FOR FURTHER TRAINING

SCHOOL	SINGLE ENGINE	TWIN ENGINE	FLYING INSTRUCTOR	STAFF PILOT	RECONNAISSANCE PILOT	FIGHTER PILOT	BOMBER PILOT
E.F.T.S.							
S.F.T.S.							

(7) S.F.T.S. FINAL STANDING	Marks Obtained
Flying (Para. 3)	
G.I.S. (Para. 1)	
Character & Leadership (Para. 8)	
TOTAL	
PERCENTAGE	
STANDING IN CLASS	

(8) ASSESSMENT OF CHARACTER AND LEADERSHIP TOTAL	
I.T.S.	93
S.F.T.S.	
TOTAL	

(9) CERTIFIED:

(a) That this pupil pilot has (has not) passed all tests required for Pilot's Flying Badge.

(b) That this pupil is (is not) authorized to wear the Pilot's Flying Badge, w.e.f.

.....

Chief Instructor
No. S.F.T.S.

(10) SIGNATURES OF OFFICERS IN CHARGE - WITH REMARKS, IF NECESSARY

(a) I.T.S. **Young and may be slightly immature. Likeable with very pleasant personality. Serious about job in hand. Second aircrew recommendation Air Observer.**

(A.J. Hanchet-Taylor) Wing Commander.
.....
Commanding Officer,
No. 6 I.T.S.

(b) E.F.T.S. **This student's progress insufficient for amount of time. Landings inconsistent - seems to be tense near ground. Airwork shows tendency to neglect and failure to exercise good judgment. Recommended for Air Bomber.**

.....
Chief Supervisory Officer,
No. 20 E.F.T.S.

(c) S.F.T.S.

.....
Chief Instructor
No. S.F.T.S.

(d) S.F.T.S.

.....
Commanding Officer,
No. S.F.T.S.

NOTES ON USE AND DISTRIBUTION OF T.58A

1. Actual marks to be given for 1, 2, 7, and 8.
2. Para. 2 - Total for E.F.T.S. is from 60 hour Clear Hood Test and Instrument Test. only (omit 20 hour test in total).
3. Paras. 3 and 6 to be assessed as: Ex., A.A. A., B.A., P. (A.F.A.O. A.51/2).
4. Para. 5 - the letter "P", which is the pupil's preference for further training, is to precede the assessment, i.e. "P. (Ex.)"
5. Para. 7 is for Service Flying Training Schools only.

DISTRIBUTION AS LAID DOWN IN AIR FORCE ADMINISTRATIVE ORDER A.51/2

Appendix "D"
N.20/10

ROYAL CANADIAN AIR FORCE
INTERVIEW REPORT

1. SURNAME.....IMRIE.....

2. CHRISTIAN NAMES.....George John.....

3. APPLYING FOR ENLISTMENT AS...P. or O.....

SELECTION BOARD

4. PERSONNEL OFFICER

Education.....4 yrs. H.S.....

A to L Score.....40.....

ASSESSMENT: (Educational Standing; Ability to Learn; Personal Background)

Very good A.L. score

RECOMMENDED FOR.....P. & O.....

SUITABLE FOR COMMISSION.....

29-12-41 Signed R.J.LaBrosse F/O

5. MEDICAL OFFICER

Medical Category.....A3B.....

ASSESSMENT: (Physical; Temperamental)

Ocular muscle balance out : A3B
Quiet, even tempered

RECOMMENDED FOR.....Observer or Gunner.....

SUITABLE FOR COMMISSION.....Yes.....

Signed D.V.Hutton F/Lt.

6. INTERVIEWING OFFICER

ASSESSMENT: (General Fitness) Intelligent youth, well-educated, alert. Well-dressed, neat & clean. Has had previous flying experience. Inspires confidence and looks like very good material aircrew. 4 yrs. H.S.

RECOMMENDED FOR.....P. or O.....

SUITABLE FOR COMMISSION.....Yes..Eventually.....

16-1-42 Signed P. Chevalier F/O

FOUND ACCEPTABLE FOR.....P. or O.....

Commanding Officer

DATE: MAR 16 1942

No. 13 Recruiting Centre.

A.F.M. 5
24.12.41.