J95501
TREMBLAY
JACQUES JOSEP

R174414
W/OII TREMBLAY J.M.
RCAF
K/A
5.1.45
917059
SJT. JAMI
RAF
K/A
28.12.41
914176
SJT. GORDON D.K.
RAF VR
K/A
28.12.41
A.F.

BLA 282

ROYAL CANADIAN AIR FORCE

Right Index Fingerprint

Name TREMBLAY. JACQUES JOSEPH MAXIME. R-1 7 4 4 1 4

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

Age 28 Height 5' 4½" Weight 148

Hair BROWN Eyes BROWN Hair on face MEDIUM

Marks, scars, etc. NONE VISIBLE

Jacques Tremblay (Signature of holder)

J. Chapin Flt (Signature of issuer)

Place # 5 T.D. DEPOT. LACHINE.P.Q. Date OCTOBER. 9TH 1942

Card serial number 94860

RANK		DATE	CLEARED

Unit From	Unit To	Date	Rank	Signat.
# 9 AOS	#1 Y Depot	20/8/43	F/O	[illegible]

174414A139

R 74414
5510

Trémblay J

CAN-5344

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.

J95501

Air Force No. ~~R 174414~~ Surname TREMBLAY

Christian Names (in full) JACQUES JOSEPH MAXIME

Date of Birth 22-9-14 Religion R.C.

Date of Enlistment/Appointment 30-6-42

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

Occupation in Civil Life Sailor mechanic

Signature of Holder J. Tremblay.

Name and Address of Next-of-Kin

Name, Address, and Relationship of Person to be informed of Casualties—
Mr Jean Marie Joseph Tremblay
104-17th. ave
(Father) Lachine Que

Certified Correct [illegible] F/O

Date 11 Aug 43 Place [illegible] Halifax

786 WALKER ROAD

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
A.B. Sp.	6-8-43	DRO 188	[illegible]

Rank	Date of Effect	Authority	Signature and Rank of Officer making Entry
Sgt.	6-8-43	DRO 188	[illegible]
F/Sgt	6-5-44	POR 30/44	[illegible]
F/WO II	6-11-44	POR 60/44	[illegible]

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	22/8/43	[illegible]

106 WALKER ROAD

LEAVE RECORD
(With Free Railway Warrant)

From (date)	To (date)	Signature of Officer

LEAVE RECORD
(With Special Leave Warrant A.24)

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

MEDICAL CLASSIFICATION

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

BLOOD GROUP

Date	International	Initials of M.O.
	BLOOD GROUP O	

NIGHT VISUAL CAPACITY

Date	Score	Group	Initials of M.O.

106 WALKER ROAD

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..

KILSHOT 161794

TASTOCK

ELEPHANT CASTLE 36 TRAM

NEW CROSS S.E. 14 63 BUSS

156 WALKER ROAD

SJ09550 1 TREMBLAY JACQUES JM POB

1 NUMBER | 9 NAME | 29 RANK

SERVICE AWARD CARD

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

	39-45 STAR	ATL. STAR	A/C EUR STAR	AFRICA STAR	PACIFIC STAR	BURMA STAR	ITALY STAR	FR. AND GER. STAR	DEFENCE MEDAL	CAN. WAR SER. MEDAL	C.V.S.M.			OP NGS	
AWARD	✓							✓	✓	✓	✓				
AWARD AND CLASP											✓				
APPLICATION DISPATCHED															
RIBBON ISSUED															
MEDAL ISSUED									228114					19/2/47	
		4165					11.4.50								

CP

PREFIX NUMBER NAME RANK COD

IBM 83961

LICENSED FOR USE UNDER CANADIAN PATENT NUMBER 315306

Jean. M. J. Tremblay (Father)
468 – 17th Ave.,
Lachine,
P.Q.

June-46.

MEMORIAL BAR
DATE DESP
REGN. NO 3265

FRENCH CARD

NAME TREMBLAY, Jacques Joseph Maxime, FILE NO. FD7

RANK ~~WXOX2XSSXXXXXXOMXXX~~ P/O CATEGORY ~~XXXXXXXX~~ PRES. DEAD. REG. NO. ~~RXXXXXX~~ J95501

DATE OF DEATH: 5 Jan/45 MOTHER LIVING: NO WIFE: NA

MINISTERIAL CARD: 23-1-45 ROYAL MESSAGE: MEMORIAL CROSS TO CHAPLAIN:

JAN 3 1946

To ~~XXXXXXXX~~ Father- DEL'D TO MOTHER:

To Father 4/1/46 DEL'D TO WIFE:

M. Jean Marie Joseph Tremblay,
104, 17e avenue,
Lachine, P. Q.

COMMAND:

RELIGION:

AIR FORCE No. J-95501 ~~R-174414~~

SURNAME: Tremblay

FULL CHRISTIAN NAME: Jacques Joseph Maxime

ENLISTMENT/APPOINTMENT — PLACE: Montreal — DATE: 30-6-42

RELIGION: R.C.

R.C.A.F. FORM R230

TYPE OF LEAVE

FROM	TO	No. DAYS	DESCRIPTION	AUTH.
13-9-43	18-9-43	6	P/L	3 P.R.C. 231/43
24-10-43	30-10-43	7	Priv/L.	3 P.R.C. 7/43
30-12-43	12-1-44	14	P/Leave	3 PRC(T) 62/43
1 2 44	4 2 44	4	Priv Leave	3 PRC 28/44
5-2-44	16-2-44	12	Ex/L.	3 PRC 37/44
21-5-44	29-5-44	9	annual L.	82 O.T.U. 36/44
16.8.44	22.8.44	7	P.L.	429 Sqn. 32/44
27.9.44	3.10.44	7	P.L.	429 Sqn. 42/44
15.11.44		7	P.L.	429 Sq. 63.
21.12.44		7	P.L.	429 Sqn. 78.

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	
6	8	43	Categorized	"AB"	DRO. 188
31	12	44	Good	Supr.	Sat.

HONOURS, AWARDS AND MENTIONS

DATE			AWARD	AUTHORITY
6	8	43	Air B. badge	DRO. 188/43

POSTINGS, ATTACHMENTS & TEMPORARY DUTY

SOS TOS	FROM / TO	DATE			AUTHORITY
S.O.S.	#9 A.O.S. St. Johns Q. / #1 Y.D. Halifax	20	8	43	DRO. 188.
SOS	Y Depot: RAFTP	25	8	43	
	Embarked Halifax	26	8	43	
	Disemb: U.K.	1	9	43	
	3PRC. Int. C123	2	9	43	
SOS	3PRC. to 1(O)AFU.	9	11	43	3PRC 15/43. 1(O)AFU 23/43.
TOS.	3PRC(T) fr. 1(O)AFU	28	12	43	3PRC. 61/43. 1(O)AFU. 31/43.
S.O.S.	3.PRC to 82.OTU.	14	3	44	3PRC. 65/44 82 OTU 33/44
T.O.S.	61 Base from 82 O.T.U.	29	5	44	82 O.T.U. 37/44 61 Base 153/44
att	Battle School Dalton	29	5	44	
Att.	1666 CU from 61 Base	16 / 23	6 / 7	44	1666 CU. 64/44 & 81/44. 61 Base 29/44.
TOS	429 Sqdn from 61 Base	23	7	44	61 Base 29/44. 429 Sqd. 26/44.
	Missing.	5	1	45	Ch. 664
					AFRO supp 293
TOS	NEU.	6	1	45	NEU. 17/45
SOS	NEU to S.R. Comm.	3	1	45	N.E.U. 15/1/45
TOS	U.K. N.E.U. on Comm.	4	1	45	N.E.U. 15/1/45
S.O.S.	UKNEU on Pres. of Death	5	1	45	UKNEU 190/45
AFRO 185/45	Presumed Dead	5	1	45	CR838

ALL OTHER CASUALTIES

CASUALTY AND DATE	AUTHORITY
Adm. S.S.Q. 28.9.43	3 PRC 10/43
Discharged S.S.Q. 4.10.43	3 PRC 15/43

ADVISE ENTRIES
UNIT RECORDS RETURNED TO CANADA

AIR FORCE No. J-95501 ~~R-174414~~

SURNAME: Tremblay

FULL CHRISTIAN NAME: Jacques Joseph Maxime

ENLISTMENT/APPOINTMENT
PLACE: Montreal
DATE: 30-6-42

RELIGION: R.C.

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

Comm 4-1-45

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

BIRTH DATE	PLACE	COUNTRY	CITIZENSHIP	RACIAL ORIGIN
22-9-14	Lachine P.Q.	Canada	Canadian	French

CIVIL EDUCATION

PUBLIC SCHOOL		JUNIOR MATRICULATION	2 yrs.
HIGH SCHOOL ENTRANCE	✓	SENIOR MATRICULATION	
TECHNICAL SCHOOL		UNIVERSITY	
CORR./BUSINESS COURSES		LANGUAGES SPOKEN	

PARTICULARS OF FAMILY

SINGLE, ~~MARRIED, WIDOWER, DIVORCED~~
WIFE (FULL MAIDEN NAME) OR HUSBAND
PRESENT ADDRESS (IN PENCIL)
PLACE OF MARRIAGE DATE
AUTHORITY (IF AFTER APPOINTMENT/ENLISTMENT)

CIVIL OCCUPATIONS AND EXPERIENCE

Sailor
Mechanic.

CHILDREN

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

PREVIOUS SERVICE

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

Mr Jean Marie Joseph Tremblay
104 - 17th Ave.
Lachine P.Q.
(father)

EMPLOYMENT AS INSTRUCTOR OFFICER AIRMAN/AIRWOMAN

TYPE	FROM	TO	TYPE	FROM	TO

PLACE AND DATE OF MEDICAL	CATEGORY	PLACE AND DATE OF MEDICAL	CATEGORY
2-8-43	A3B A3BT.		

OFFICERS

RANK, BRANCH AND CATEGORY	DATE	AUTH.	DUTIES PERFORMED DURING SERVICE, E.G. ADJ.
P/O (R) SS G.L. BOMB OFF.	4 1 45	O/01662/45	

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

AIRMEN AND AIRWOMEN

RANK	DATE	AUTH.	TRADE	DATE	AUTH.
T/Sgt. (Pd)	6 8 43	DRO.188.	Air B. (p)	6 8 43	DRO.188.
T/Flt. Sgt.	6 5 44	D/O 1076/44			
T/W.O. II	6 11 44	D/O 1215/44			

OFFICERS, AIRMEN/AIRWOMEN

COURSE OR TRADE	GRP.	%	PF	DATE

ADVISE ENTRIES
UNIT RECORDS RETURNED
TO CANADA

AIR FORCE No. ~~R.174414~~

J 95501

TREMBLAY, JACQUES JOSEPH MAX[illegible]

SURNAME — FULL CHRISTIAN NAMES

ENLISTMENT PLACE: Montreal P.Q. DATE: 30-6-42

RE-ENLISTMENT

C.R. FILE NUMBER: Res 55

OFFICER RECORD OF SERVICE AIRMEN

Comm 4-1-45 13

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

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

S.O.S. OR T.O.S.	UNIT AND PLACE	EFFECTIVE			D.R.O.
TOS	Montreal R/c	30	6	42	MRc 64
SOS	13 R/C MTT	7	10	42	MTT/R 102
TOS	5 "M" Depot	8	10	42	5MD 241
SOS	5 M D Lachine	23	1	43	5MD 21
TOS	#3 ITS Victoriaville Que	24	1	43	3 ITS 24
SOS	3 ITS Victoriaville P.Q.	3	4	43	3 ITS 81
TOS	#1 BGS Jarvis Ont.	4	4	43	1 BG 883
SOS	1 B.G.S. Jarvis Ont	26	6	43	1 BG 153
TOS	9 AOS St Johns P.Q.	27	6	43	9 AOS 155
SOS	9 AOS St Johns P.Q.	20	8	43	9 AOS 188
TOS	1 "Y" depot Halifax	21	8	43	1 Y 202
SOS	1 Y.D. to Trainees Pool	25	8	43	1 Y 216
Missing 5 Jan. 45. DCL 917 d/10 Jan. 45.					
Pres. Dead 5-1-45 DCL 1176 d 24-1-45					
Disch	On Appoint to Comm	3	1	45	NEU 151
TOS.	On Appoint to Comm	4	1	45	NEU 151

2. RECLASS'NS-PROMOTIONS-ETC.

RANK	EFFECTIVE			D.R.O.
AC2	30	6	42	MRc 64
LAC	2	4	43	3 ITS 81
Sgt (Temp) (Paid)	6	8	43	9 AOS 188
F/Sgt.	6	5	44	GB 1096
T/WO II	6	11	44	GB 1315
Bomber off. P/O	4	1	45	GB 1662
P/O 4-1-45 (APeR 349 d/22-10-45) NEU 151				

3. MEDICAL HISTORY

EXAMINATIONS (IN RED INK)

DATE	FORM	CATEGORY	REMARKS
18-6-42	R100	A.BA3B	

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.
AC-ITS (WETP)	S	30	6	42	MRc 64
~~A/c A. Bomb~~	S	2	4	43	3 ITS 81
Air Bomber	SG	6	8	43	9 AOS 188
Bomb. off. P/O					
Bomb. off Br. Gd		4	1	45	APeR 349 d/22-10-45

TRADE PROFICIENCY	CHARACTER ASSESSMENT	DATE OF R41
Categorized A.B. 9 AOS 188		

5. COURSES-TESTS-ETC.

SUBJECT	RESULT	DATE	AUTHORITY

6. LEAVE

FROM	TO	DAYS	REMARKS	D.R.O.
1-6-42	grad		L.W.P.	MRc 64
Recalled from L.W.P.			16-8-42	MRc 77
While u/t at WETP U.G.M.				
1-8-43	20-8-43	14	Embark	9 AOS 188

6(A) RATIONS AND QUARTERS

UNIT	DATE COMMENCED	DATE DISCONTINUED	D.R.O.

HIGH & TECH SCHOOL EDUCATION — RELIGION — PROVINCE OF ENLISTMENT — DISCHARGE — AC

AIR FORCE No. ~~R.174414~~

TREMBLAY, JACQUES JOSEPH MAXIME
SURNAME — FULL CHRISTIAN NAMES

ENLISTMENT — PLACE Montreal P.Q. — DATE 30-6-42
RE-ENLISTMENT

C.R. FILE NUMBER Ross

J 95501

OFFICER RECORD OF SERVICE AIRMEN

Comm 4-1-43

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

7. BIRTH: DATE 22-9-14 — PLACE Lachine P.Q. — CITIZENSHIP British

FATHER (FULL NAME) Jean Marie Joseph Tremblay

BIRTHPLACE Montreal P.Q.

MOTHER (FULL MAIDEN NAME) Olympe Sicard (deceased)

BIRTHPLACE Montreal P.Q.

8. EDUCATIONAL STANDING

HIGH SCHOOL ENTRANCE X P.Q.

JUNIOR MATRICULATION 1 yr + 7 mths matric "

SENIOR MATRICULATION

TECHNICAL SCHOOL

UNIVERSITY

CORRESPONDENCE COURSES

WETP (AC-JTS)

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

G.S.L. - sailor - 1930-30.
L.E. Moulton - mechanic - 1930-36
Can. Marconi Co - repairs - 1936-42

280

10. PREVIOUS ARMY, NAVY OR AIR FORCE SERVICE

NA.

0

11. HONOURS-AWARDS, MENTIONS

	AUTHORITY	DATE
Air Bombers Badge	9/OS/188	6-8-43

12. FLYING EXPERIENCE ON ENLISTMENT (HOURS)

SOLO nil — DUAL nil — PASSENGER few mins

13. RELIGION R.C.

14. LANGUAGES English + French well 3

15. SPORTS swimming & rowing.

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: Jean Marie Joseph Tremblay — RELATIONSHIP Father
ADDRESS: 10417th Ave Lachine 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	30 6 42				

22. TEMPORARY DUTY AND MISCELLANEOUS ENTRIES

FROM	TO	DATE	D.R.O.
Aut to draw	Sub allowance	16-8-42	M R/C 72.

22.(A) ADDRESS PRIOR TO ENLISTMENT

10417th Ave. Lachine P.Q.

2210

23. DOCUMENT CONTROL (INDICATE RECEIPT BY DATE)

R60	R79	B465	X-RAY	AFM-13	IDN. CARD	K
	1-8-42					

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 ~~174414~~ J95501 Name TREMBLAY, Jacques Joseph Maxime Rank ~~T/Sgt.~~ WO2 P/O
(In full in block capitals, surname first). (Or acting appointment).

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

Date of Birth 22.9.14 Religion R.C. Occupation in Civil Life Sailor 2 months. Mechanic.

Last Enlisted 30.6.42 Current Engagement D. of W.

If a member of the Auxiliary Air Force

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

Name, address and relationship of legal next of kin (to be entered in pencil): Father
Mr J. N. J. Tremblay, 104-17th Ave, Lachine PQ

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.

Unit FROM which.	Unit TO which.	Date of Effect.
No. 9 A.O.S.	No. 1 Y Depot.	20.8.43
No. 1 Y Depot.	RAFTP	25.8.43
	Emb. Halifax	26.8.43
	Disemb. U.K.	1.9.43
Int. C.123	3 PRC	2.9.43
3 PRC	No 1 (O) AFU	9.11.43
1 (O) AFU.	3 PRC (RCAF)	28.12.43
3 RCAF PRC	82 OTU	14.3.44
82 O.T.U.	61 Base	29.5.44
61 Base	429 Sqn	23.7.44
429 SQDN	R.C.A.F N/E UNIT	5.1.45

Discharged on appointment to Commission 3.1.45 % 1662/1/45 Nec 151/1/45

SECTION 2.—PROMOTIONS, ACTING APPOINTMENTS (PAID OR UNPAID), REDUCTIONS, REMUSTERINGS.

* Authority.	Description.	Date of Effect.
	Aircrew I.T.S. AC2	30.6.42
	Air Bomber "Std" LAC	2.4.43
	" " "Spec" T/Sgt.	6.8.43
	Air Bomber (Gr. 2) T/Sgt.	6.8.43
POR 32/44	Promoted T/F/S.	6.5.44
POR 60/44	Promoted T/WO2	6.11.44

SECTION 3.—GOOD CONDUCT BADGES.

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

1. RCAF GENERAL CONDUCT SHEET HAS NOT BEEN RAISED IN CANADA.

2. RAF FORM 121 RAISED AT.......... ON..........

SECTION 4.—CHARACTER AND TRADE PROFICIENCY.

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

Rank.	Character.	Trade Classification.	Proficiency. A	Proficiency. B	Proficiency. C	Whether specially recommended, recommended, or not recommended for promotion or reclassification.	Date.	Signature and Rank of Commanding Officer.
Sgt	VG	Air Bomber	ON STRENGTH FOR TRAINING ONLY.				28.12.43	A Hopper S/L
T/W.O. 2.	Good	A/B.	Superlad	/			31/12/44	R L Bolam W/C.

82 OTU POR 36/44	9 Days Annual Leave	21.5.44 — 29.5.44.	R.W. F135421		[signature] F/L
POR 37/44.	Granted Extension of Priv: Leave from	5.2.44 - 16.2.44	(12 Days)		[signature] Earl W/O
POR 28/44.	4 Days Priv: Leave	1.2.44 — 4.2.44	RW-E20163.		[signature] Earl W/O
POR 62/43	30.12.43 to 12.1.44	14 Days Priv. Leave	RW. E78473		[signature] Earl W/O
POR 7/43.	7 Days Priv: Leave	24.10.43 - 30.10.43	RW. C813686.		[signature] Earl W/O
POR 231/43.	6 Days Priv: Leave	13.9.43 - 18.9.43	RW. C810044		[signature] Earl W/O

RECORD OF LEAVE AND ISSUE OF FREE TRAVELLING WARRANTS.

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

SECTION 5.—RESULTS OF COURSES OF INSTRUCTION, RECOMMENDATIONS FOR AIRCREW DUTIES, RECOMMENDATIONS FOR COMMISSIONED RANK (K.R. 2132, (19) (A)). DECORATIONS, MENTIONS, SPECIAL COMMENDATIONS BY A.Os.C., ETC.

Authority.	Nature.	Date of Effect.
	Awarded Air Bomber Badge	6.8.43
	Rec. for Commission	6.10.44

Aircrew I.T.S. YT.

ROYAL CANADIAN AIR FORCE

R.C.A.F. Special Reserve

J.95501.

RECORD OF SERVICE AIRMEN

A.F. No.	Surname	Christian Names	Religion
R.174414	Tremblay	Jacques Joseph Maxime	R.C.

Born 22-9-14 Place Lachine. Que Country Canada Citizen of Canada Racial Origin French 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 Jean Marie Joseph Tremblay (Father)
104-17th Ave. Lachine. P.Q.

CIVIL EDUCATION

High School Entrance + Jr. Mat. 2 years Sr. Mat.

Technical School Business Courses

University

CIVIL OCCUPATIONS AND EXPERIENCE

Sailor - 1930 (2 months)
Mechanic - 1930. 1936 - General repairs for 4 years. C.F.C.F. 2 years -

PREVIOUS SERVICE	ENLISTMENT		Med. Cat.	Date	Med. Cat.	Date
N.A	Date	30-6-42	A1B	25 6 42		
	At	Montreal. Que	A2B			
	Term	Duration	A3BT	2 8 43		

Rank	Auth.	Date	Trade	Auth.	Date
A.C.2		30 6 42	Aircrew. I.T.S. YT		30 6 42
LAC	DRO 81	2 4 43	WETP GRAD.		
Actg. T/Sgt. (Pd)	D.R.O. 188/43	6 8 43	Rem. Bomber Std	DRO 81	2 4 43
P/O	1662/45	5 1 45	Rem. Air Bombers "S"	D.R.O. 188	6 8 43

TRADE TESTS AND COURSES

Trade	GP	%	P or F	Date
Aircrew I.T.S. YT	S		P	
Rem. Bomber Std				2 4 43

LEAVE

From	To	Auth. and Description	Date
1-7-42	graduation (15-8-42)	O.L.W.P.	6 8 43
7-8-43	21-8-43 (14 DAYS)	EMB. LEAVE DRO 188	6 8 43
DRO 188 Auth. to draw Rations Allow.		7-8-43 to 20-8-43 (14 DYS)	

CHARACTER AND TRADE ASSM. HONOURS, AWARDS AND MENTIONS

Character	Trade and Assm.	Honours and Awards	Auth.
—	—	Air Bombers Badge	DRO 188/43
Categorized	"AB"	DRO 188 d/	6-8-43

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

(OVER)

MOVEMENTS AND CASUALTIES

Authority	Unit from	Unit to	Date	Authority	Unit from	Unit to	Date
M.O.R. 13	#13.R.C. MTL	#13.R.C. MTL	30.6.42				
DRO 77/42	TOS for RCAF	Re a. eff	16-8-42				
DRO 102/42	#13 RC MONTREAL	#5 MD LACHINE	SOS 7-10-42.				
D.RO 241/42	T.O.S. #5 M.D.	Lachine	8-10-42.				
DRO 21-43	5 MD	#3 I.T.S.	23-1-43				
DRO 81/43	#3 I.T.S. Victoriaville P.Q.	#1 B&G Sch. Jarvis, Ont.	3.4.43.				
DRO #153	#1 B&G Jarvis	#9 A.O.S. St Johns QUE	26/June/43				
DRO 188/43	#9 AOS St. Johns, P.Q.	#1 "Y" Dep. Halifax, N.S.	20-8-43				

R.C.A.F. Special Reserve

AIR FORCE No. R.174414 POSTED TO #13 Recruiting Centre, Montreal, P.Q. TRADE Aircrew I.T.S. Y.T.

ROYAL CANADIAN AIR FORCE

(ATTESTATION PAPER)

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

1. Surname Tremblay FULL Christian Names Jacques Joseph Maxime
2. Present Address 104 17th Ave., Lachine , P.Q. Telephone None
3. Permanent Address 104 17th Ave., Lachine , P.Q.
4. Place of Birth Lachine, P.Q. Citizenship Canadian
5. Date of Birth 22nd Sept. 1914 Married, Single, Widower, Separated, Divorced Single
6. Particulars of Children N.A.

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

7. Occupation Employer At Canadian Marconi Company 8. Religion Roman Catholic (State denomination)
9. Languages English and French fluently (State proficiency)
10. Next of Kin (Full Name) Jean Marie Joseph Tremblay Relationship Father
    " Address 104 17th Ave, Lachine , P.Q.
11. Father (Full Name) Jean Marie Joseph Tremblay Birthplace Montreal.
    " Address 104 17th Ave., Lachine, P.Q. Citizenship Canadian
    " Occupation Retired
12. Mother (Full Maiden Name) Olyme Sicard Birthplace Montreal
    " Address Deceased Citizenship Canadian
13. Details of any Naval, Military or Air Force Service: N.A.

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

R.C.A.F. Records Office
Rec'd. JUL 29 1942
O.K. C.I.B.
R.C. N.
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? 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
150M—10-41 (993)
H.Q. 1062-3-83

653-115

21. Particulars of Education:

—	Name of school	Date From	Date To	Courses—Subjects, etc.
Primary Education—Public or Separate School	Academic Piche	1921	1930	Ninth Grade completed
High School—Collegiate Institute, etc.	Academic Piche	Oct.	6 1941	Still Going Seven Monthsin Mathematics
Technical School				
University or School other than above				
Correspondence Courses, etc.				

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

Employer and place	Duties, trades, positions	Date From	Date To	Reason for leaving
General Industries Ltd.Lachine	Sailor	1930	2 months	Better Position
L.E.Moulton & Co., Montreal, P.Q.	Mechanic	1930	1936	Better Position
Canadian Marconi Company	General repairsfor 4years C.F.C.F. two years(same job.		1936	to Date

23. Flying Experience (in Hours) Solo N.A. Dual N.A. Passenger few minutes

24. Special Qualifications, Hobbies, etc., useful to the R.C.A.F. Special course for seven months in maths.

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

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 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 persons who can give references as to character and ability.

Name	Address	Occupation
Mr. James Humphries 11-6-42	C.F.C.F. Radio Station 1231 St. Catherins St.W.Mtl.	Manager
Mr. Gaston Chapdelaine 11-6-42	59 13th Ave., Lachine, P.Q.	Mechanic
Mr. Andre Lamoureux	55 14th Ave., Lachine, P.Q.	Draughtsman
Mr. Chateauvert	106 17th Ave., Lachine, P.Q	Electrician

28. Other information that may have any bearing on this application My father is dependent upon me.

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 May 8th, 19 42 Signature Jacques Tremblay

FOR OFFICIAL USE ONLY

CERTIFICATE OF MEDICAL EXAMINATION

Part 1. Information obtained from the applicant—

1. Age. 27 2. Have you ever suffered from any of the following defects in health?

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

3. Have you ever worn glasses? No

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

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

[signature] Signature of Applicant

Examiner's Remarks *re* above — scarlet fever — Pertussis
Fracture left fore-arm -

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

1. Identification marks or scars (if operative obtain history) scar Rt Jaw - Vacc left arm.

2. Height 5 feet 3 1/2 inches. 3. Weight 141 1/2 pounds.

4. Complexion Medium - 5. Color of Eyes Brown Hair Brown -

6. Development {Good / ~~Fair~~ / ~~Poor~~} 7. Chest Measurement—Full expiration 35 inches
Range of expansion 4 inches

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

9. Vision—Without glasses—Right 20/25 With ~~glasses~~ pinhole—Right 20/20
Left 20/20 Left NA

10. Condition of mouth and teeth Good

11. Urine—Albumen Neg Sugar Neg

12. Abnormalities (Congenital and Pathological) found on Examination
athlete's foot -
B.P. Feet.

~~A.T.B.T.~~

25/4/42 *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 [A1B / A3B]

Ray 129366 neg [illegible]

Any special remarks of the Medical Officers
Pulse + B.P. Feet to be checked
25.6.42. Rechecked and found fit - [illegible]

Part 2 Cont'.
13. Reflexes N
14. Heart N
15. Lungs N
16. Blood Pressure 150/85
17. Colour Vision N / Ish 9

Date June 18th 1942

[signature] F/L — President
[signature] F/L — Member
Member

NATIONAL REGISTRATION CERTIFICATE PRODUCED 82/143 St-Ann 30/6/42 L. Larivière Sgt.

FOR OFFICIAL USE ONLY

(A) *Report of Interviewing Officer—*

Type...General appearance...

[hole]ability for (state in what capacity)...

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

(B) *Report of Trade Test (Not required for Standard (Tradesmen)—*

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, JACQUES JOSEPH MAXIME TREMBLAY 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 June 30th 19 42 Jacques Tremblay
Signature of Recruit

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

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

Date June 30th 19 42 Jacques Tremblay
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 30th day of July 1942

[signature] .... #13 Recruiting Centre, Mtl., P.Q.
Signature of Officer Rank Unit

R.C.A.F. Special Reserve

CONFIDENTIAL

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

(2)

ROYAL CANADIAN AIR FORCE

Medical Board held at Montreal, Que *Date* 18-6-42

FILE NUMBER R174414

Surname TREMBLAY *Chr. Names* Jacques Joseph Maxime
Nature of Commission M-2 *Date of Birth* 22-9-14 *Married or Single* Single
Branch General List *Hours Flown* 5 min passenger
Address 104, 17th Ave., Lachine, Que.

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 ... Scarlet fever
(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 ... Pertussis
Fracture left arm

Education ... 2 yrs High School
Present Occupation Gen Repair Radio St CFCF Hobbies ... Reading
Previous Service ... none
Athletics ... swimming, paddling
Habits—Smoking ... 10 cigs a day Alcohol ... Very little
FAMILY HISTORY—Consumption ... no Diabetes ... No Haemophilia ... No
Nervous Ailments, Mental Trouble, or "Fits" No
Father Alive—Health ... good Dead—Cause
Mother Alive—Health Dead—Cause ... 70 Uraemia
Brothers (1) Alive—Health good (9) Dead—Cause ... all in
Sisters (4) Alive—Health ... good (6) Dead—Cause ... infancy

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 18-6-42 *Signature* Jacques Tremblay *Witness* [illegible] F/L

GENERAL MEDICAL AND SURGICAL EXAMINATION

Impression given by *(a)* Physique athletic *(b)* Mentality above average

Body Marks, Scars, Deformities scar rt jaw, vaccination left arm

Size of Thyroid Gland normal

Surgical Abnormalities nil

Results of Wounds, Injuries, Operations nil

	Date 18-6-42	Date 25-6-42	Date	Remarks on any Abnormalities Found
Height (ins.)	63½			Date 18-6-42
Weight (lbs.)	141½			Pulse is fast to-day, but man is nervous. 40 hg test shows a good curve. Could be rechecked and B.P. also
Chest Circumference (ins.)	35-39			
Body Build (lbs.)	normal			
Leg Length (ins.) no shoes	39			
Pulse Rate — Sitting	96	84		
Pulse Rate — Standing 1st	120			CstO
Pulse Rate — Standing 2nd	108			
Pulse Rate — After Exercise	132			
Pulse Rate — Time to Normal	30			
Arterial Walls	soft			Date
Blood Pressure — Systolic	150	130		
Blood Pressure — Diastolic	85	85		
Room Temperature	72			
Heart — Size (in cms.)	normal			
Heart — Sounds	normal			
Heart — Rhythm	regular			
Lungs — Inspection	normal			
Lungs — Palpation	normal			
Lungs — Percussion	normal			
Lungs — Auscultation	normal			
Lungs — Expiratory Force	280			
Lungs — X-Ray	normal			Date
Reflexes — Knee	normal			
Reflexes — Ankle	normal			
Reflexes — Triceps	normal			
Reflexes — Abdominal	normal			
Reflexes — Plantar	normal			
Cranial Nerves	normal			
	R. L.	R. L.	R. L.	
Balancing Rod	n.a.			
	R. L.	R. L.	R. L.	
Self Balancing	1S 1S			
Tremors — Fingers	slight			Date
Tremors — Eyelids	nile			
Abdomen — Liver	normal			
Abdomen — Spleen	normal			
Abdomen — Muscular Tone	good			
Urine — Albumen	negative			
Urine — Sugar	negative			
Initials of M.O.	CstO	GECP		

40 mm. Hg. Test 60=10/101210,111112,1198,898 CstO

Date

Date

Date

Date

EYE EXAMINATION

History: nil

Visual Acuity	R. 20/25 , c +2.50 = 20/200 (with pinhole 20/20)		
	L. 20/20 , c +2.50 = 20/200		
Colour Vision	Normal Ishihara 9		
Red, Green	M.R. Ortho		
Diaphragm Test (P.D. = 67)	at 1 4 out		
Convergence	C. = 6 cms.		
	S. C. = 14½ cms.		
Accommodation	R. 13		
	L. 13		
Cover Test	no deviation		
Fundi and Media	normal		
Fields	normal		

REMARKS: Accomodation normal for his age.
A1B,A3B

Initials of M.O. GRT	*Initials of M.O.*	*Initials of M.O.*
Date 18-6-42	*Date*	*Date*

EXAMINATION OF EAR, NOSE AND THROAT

History: nil

Hearing	R. Ear	W.V. 20		
	L. Ear	W.V. 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				
Teeth		good		
Gums		healthy		
Pharynx		normal		
Nasopharynx		not seen		
Nose		normal		
Larynx		not seen		

REMARKS: fit

Initials of M.O. GRT	*Initials of M.O.*	*Initials of M.O.*
Date 18-6-42	*Date*	*Date*

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

18-6-42 Very good candidate,he is under tension today.Before physical exam was started he was afraid he might fail. He has been taking night lectures for the past 8 months to qualify for aircrew ITS in which he has succeeded. He presents today a fast pulse,a high systolic pressure both of which I am satisfied will come back to normal. 40 mmhg test shows a good curve. He is troubled with athlete's foot at present and is to come back when that condition clears up. When he does,pulse and blood pressure should be rechecked.
AtBt

Claude StOnge F.L.

25-6-42 Re-examined and found fit. He is very anxious and keen to join in aircrew. He bore his own expenses for 8 months on getting lessons from private teacher.
A1B,A3B.

G.E.C.Peloquin F.L.,
R.M.Matthews F.L.

FIT | Date 25-6-42
PILOT A1B A3B
OBSERVER
W/OPERATOR
A/GUNNER

M.O. R. M. Matthews

OBSERVATIONS AND FINDINGS OF THE REVIEWING MEDICAL OFFICER

Date.....

Mr. Jean M.J. Tremblay,
104 - 17th Avenue,
Lachine, 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. J.95501 FD 328

DEPARTMENT OF NATIONAL DEFENCE

ESTATES BRANCH

OTTAWA, ONT.

January 9, 1946

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

TREMBLAY, Jacques Joseph Maxime, P/O

J.95501 R.C.A.F.

ESTATES BRANCH
JAN 19 1946
H.Q.
OTTAWA
NATIONAL DEFENCE

it is necessary that certain information regarding the deceased and his relatives should be furnished the Estates Branch. You are asked therefore to read the enclosed memorandum before completing pages 2 and 3 of this form. The particulars required are to be carefully filled in and the Declaration on page 4 should then be signed in the presence of a Clergyman, Priest, Local Magistrate, Commissioner for Oaths, Notary Public or a Commissioned Officer of any of His Majesty's Forces who should be asked to complete and sign the Certificate. This form should then be returned to the above address.

If there is insufficient space for complete particulars to be given opposite any question on pages 2 and 3 of this form, the space under "additional remarks" on page 4 should be used.

Col.

GWH/NM

Director of Estates.

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 Nil				
2	Children of the Deceased and dates of their Births Nil				
3	Father of the Deceased		Jean Marie Joseph Tremblay	75	468 - 17th ave Lachine
4	Mother of the Deceased		Olympe Sicard		deceased.
5	Brothers of the Deceased	Full Blood	Philippe Tremblay	50	170 - 18th ave Lachine
		Half Blood			
6	Sisters of the Deceased	Full Blood	Lorette Tremblay	49	468 - 17th ave Lachine
			Simone "	47	Mrs Hector Bolduc
			Cécile --	43	Mrs Léo Lizotte
			Pauline --	29	468 17th ave Lachine
		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
	Auguste Antoinette Bertrand [illegible]	All singles	

ANSWER FULLY EACH QUESTION ON THIS PAGE

PARTICULARS AS TO IDENTITY

8	Full names of the deceased.	Jacques - Joseph Maxime Tremblay
9	Date of his birth.	22nd septembre 1914
10	Place and date of his marriage.	Nil.
11	Place and date of his parents' marriage.	Ste Cunegonde - Montréal

PARTICULARS OF DOMICILE

12	Place where deceased was born.	Lachine - Holy Angels
13	State, in order, the Province, State and/or County in which he resided before enlistment and the period of time in each.	(a) Lachine, 1914 - 17th. (b) (c) (d) no other places.
14	Nature of employment before enlistment.	Radio Marconi Co
15	State whether he owned the premises in which he lived, and, if so, where situated.	Resided with his father
16	Name place where deceased stated he intended to make his permanent home.	Intended after his marriage to live with his father.

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?	Not as known.
18	If married, and domiciled in the Province of Quebec or in a State in the U.S.A. or in a Country under the laws of which there is community of property between spouses,—was there a marriage contract dealing with property?	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.	Unknown.
20	Amount of War Savings Certificates purchased by the deceased and registered in his name. State where located.	Heared he had one for he intended to get soon married.
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?	? ?
22	If deceased had life insurance, name companies and amount payable under each policy and the person named as beneficiary therein.	Two — One of $500 Prudential The other of $288 Metropolitan. His father is beneficiary and payer.
23	Describe other assets, if any, and estimated value thereof. Use space on page 4 if necessary.	?

OTHER PARTICULARS

24	Did the deceased after enlistment incur any debts for:— (a) His own separate board and lodging while on service. (b) Service clothing and equipment. An itemized account for each such debt should be attached hereto, and if same is correct you should mark the bill "approved" and sign same. If believed incorrect, give particulars.	Unknown.

(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.

.....Jean Marie Joseph Tremblay..... {Signature of Informant}

.....Address

CERTIFICATE

I hereby certify that to the best of my knowledge and belief.....Jean Marie Joseph Tremblay..... {Name of informant} is the*.....father.....of the Deceased above described. The above Declaration was made by the Informant and signed in my presence.

*See above.

Dated at.....Lachine.....this.....17th.....day of.....January.....1946

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

.....Aime T. Boileau..... Qualification.....pastor-priest

Address.....1400 St Joseph, Lachine

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

The deceased Jacques Joseph Maxime Tremblay

Enroled in June 1942
University three months 16 july to 9 oct. 1942
Manning depot Lachine 9 oct 1942
Victoria-Ville
Jarvis, Ont.
St Jean d'Iberville
Over-sea Sept 1943

Disappeared 5 Jan. 1945
Presumed death 26 nov. 1945.

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

Royal Canadian Air Force

CERTIFICATE OF PRESUMPTION OF DEATH

NO. 15170

This is to Certify that

J95501 PILOT OFFICER JACQUES JOSEPH MAXIME TREMBLAY R.C.A.F.
(Number) (Rank) (Name in Full) (Unit)

has been officially reported as missing since the 5TH day of JANUARY, 1945, 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 7TH day of DECEMBER 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 (GERMANY)

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: TREMBLAY (*Block letters*)

Given names: JACQUES JOSEPH MAXIME

Do not write in this space

4. RESIDENCE

Street: 17th Avenue No. 104

Official name of civil municipality or township: Lachine

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: September (Month) 22nd (Day) 1914 (Year)

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

OCCUPATION

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

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

15. Date deceased last worked at this occupation: Jan.5/45

16. Total years spent in this occupation: Two

	17. NAME	18. BIRTHPLACE (Province or Country)
FATHER	Tremblay, Jean Marie Joseph	Quebec
MOTHER (Maiden Name)	Sicard, Olymbe	Quebec

19. Place of burial, cremation or removal

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

21. PLACE OF REGISTRATION OF THIS BURIAL

(a) Name of parish or church

(b) Civil municipality of

(c) Municipal county

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

CONFIDENTIAL MEDICAL CERTIFICATE OF DEATH

22. Date of death: January (Month) 5th (Day) 19 45 (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 for official purposes, presumed dead.

due to

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

(b)

due to

(c)

II

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

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: Jan.5th 19 45

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)

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

WILL

R.C.A.F. R. 60
40M—5-40 (5140)
H.Q. 1062-3-45

(1) I, Jacques Joseph Maxime Tremblay of the City ~~Town~~ ~~Village~~ ~~Township~~

Last Permanent Civilian Address

of Lachine in the County District of Jacques Cartier

Province of Québec, Repair man (Civil Occupation)

a member of the Royal Canadian Air Force, Number R 124414 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

a, my father

b, Jean Marie Joseph Tremblay

c, no 104 = 17 th ave Lachine, Québec

D, All my estates

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

(4) I appoint Jean Marie Joseph Tremblay (Name) : (Address) no 104 = 17 th ave Lachine Q, to be the Executor ~~Executrix~~ of this my Last Will.

IN WITNESS WHEREOF I have hereunto set my hand this ninth day of October 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.

Jacques Tremblay
(Signature of Testator)

First Witness sign here.

(5) J. L. Dorward (Signature)

4188 Decarie Blvd Montreal (Address)

clerk (Occupation)

Second Witness sign here.

L R Gareau (Signature)

5676 McLynn Ave Montreal Que (Address)

Clerk (Occupation)

(Witnesses are not to be beneficiaries.)

R.C.A.F. Records Office
Rec'd OCT 13 1942
O.K. ...... C.I.B. ......
R.C. ...... N.I. ......
S.L. ...... P.A. ...... ER

[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

APPENDIX "A"
M.10/29

ROYAL CANADIAN AIR FORCE

Personnel Posted on Leave Without Pay
for W.E.T.P. Training.

I, the undersigned, do acknowledge that I have read, understand, and agree to the following conditions of service upon being accepted for enlistment in the Royal Canadian Air Force and granted leave of absence until such date as my period of duty becomes effective:

(a) That during the period of such leave, I will not be entitled to, nor will I receive any Pay or Allowances from the Royal Canadian Air Force.

(b) That during the period of such leave, I will be required to attend University of Montreal and take the prescribed course of training as Aircrew I.T.S. Y.T. receiving subsistence allowance provided under the W.E.T.P., while being so trained.

(c) That if during the period of such leave I should sustain any injury or suffer any illness resulting in my becoming physically or mentally unfit, I will not be entitled to be paid any disability pension by the Crown by reason of such injury or illness.

(d) That until I report after the period of such leave I will not be entitled to any issue of uniform or equipment.

(e) That during the period of such leave, I will not be entitled to wear R.C.A.F. uniform or equipment.

(f) That from the date of my enlistment and during such period of leave I will be subject to Air Force Law and Discipline.

(g) That if I marry during the period of my leave, dependents' allowance will not be payable until completion of six months' service for which pay is admissible, or upon the completion of my R.C.A.F. training, whichever is the longer.

John Shore Cpl.
(Witness)

Jacques Tremblay
(Signature of Recruit)

Montreal, P.Q.
(Place)

June 30th, 1942.
(Date)

LEAVE OR PASS FORM

Date June 30th, 1942.

No. R.174414 Rank AC.2 Name TREMBLAY, Jacques Joseph Maxime

was enlisted in the Royal Canadian Air Force on the 30th day of June 1942 and has been granted leave of absence without pay from the 1st day of July 1942 until date of graduation from University of Montreal or until ordered to report to the R.C.A.F. Recruiting Centre at Montreal, Que.

R.C.A.F. Records Office
Rec'd. JUL 29 1942
O.K. C.I.B.
N.I.
P.A.

(Signature of Attesting Officer)

A.F.M. 23(a) W.E.T.P.

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

ROYAL CANADIAN AIR FORCE

Individual Record of Flying

RANK LAC NO. ~~LAC~~ R194444 NAME Tremblay, J.J.M.

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	A.B ~~OTHER~~ (P) Hrs	Mins	PASSENGER (Q) Hrs	Mins	TOTAL (R) Hrs	Mins
No 1 B&G Jarvis Ont	Jan 25/43																										40	45	13	25	9	05			63	15
No. 9 A.O.S. RCAF. St. Johns. Quebec	31-7-43																														45	40			108	55
	4-8-43																														5	35			114	20

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

CERTIFIED CORRECT
SIGNATURE J. A. Silou F/O
C.S.O. No. 9 AIR OBSERVER SCHOOL
ST. JOHNS, QUE.

Call OUT
and
Preface IN

Serial No.

Date

(Above this line is for Signals use only)

R.C.A.F. S. 5
60M PADS OF
100-9-43(3459)
H.Q. 885-S-5
K.P. 89412

R.C.A.F. MESSAGE

NO. OF GROUPS 53 LF FILE

OFFICE DATE STAMP & SERIAL NUMBER

TO* MR JMJ TREMBLAY 104 17TH AVENUE LACHINE QUE
(Report Delivery)

FROM* OFFICER PREPOSE REGISTRE MORTS BLESSES ~~DUSOARYS~~ DISPARUS CARC

ORIGINATOR'S NUMBER	DATE	REFERENCE AND DATE	
M9435	7 JAN	MY	YOUR

(*Use Double Space Typing*)

REGRETTE VOUS APPRENDRE QUE VOTRE FILS R UN SEPT QUATRE

QUATRE UN QUATRE LE SOUS-OFFICIER BREVETE DE 2E CLASSE

JACQUES JOSEPH MAXIME TREMBLAY EST PORTE DISPARU A LA SUITE

OPERATIONS AERIENNES EFFECTUEES OUTRE-MER LE CINQ JANVIER

STOP LETTRE SUIT.

NR 34/7 ROMAN CATHOLIC R174414

This message must be sent AS WRITTEN and may‡............be sent by W/T.
Signature [signature] 8/0

This message must be sent IN CYPHER and may‡............be sent by W/T.
Signature

RO 4

Originator's Instructions* Degree of Priority*

IMMEDIATE

TIME OF ORIGIN 2325 G.M.T.

‡Originator to insert "NOT" if message is not to go by W/T over any part of the route. (Below this line is for Signals use only)

T.O.R.

SYSTEM IN	TIME IN	READER	SENDER	SYSTEM OUT	TIME OUT	READER	SENDER	SYSTEM OUT	TIME OUT	READER	SENDER
				TT	2345		BEW				

T.H.I.

*The Signal Department is responsible that these details are transposed to the appropriate portion of the message form and that all possibility of compromising distinguishing signals, etc., by omitting to remove their signification from the address, etc., is avoided. Before delivery of the message these details are to be re-inserted in P/L

6-2-45
MS

P427241

Ref:420/S2-4-162

From: No. 429 Squadron, R.C.A.F.

Date: 7th January, 1945

CIRCUMSTANTIAL REPORT ON HALIFAX III LV.964 - MISSING 5.1.45

The above mentioned aircraft took off at 1633 hours on 5th January 1945, enroute to a bombing attack on Hanover, Germany, and since that time nothing further has been heard of the aircraft or the occupants whose names and crew positions were as follows:-

Pilot	J.88980	P/O	G. Hay
Nav.	J.35005	F/O	J.L.M. Savard
A/B	R174414	W/O2	Tremblay J.J.M.
F/E	185768	P/O	F.J. Nicholson
WO/AIR	184760	P/O	R.H. Couzens
MU/AG	R.215731	F/S	Brown F.N.
A/G	R.254628	F/S	Gabriel T.A.

2. The aircraft was carrying 16 x 500 lb. M.C.

3. This incident has already been reported on signal AO 2 dated 6th January, 1945.

Sgd: R.L. Bolduc,
Wing Commander, Commanding,
No. 429 Squadron, R.C.A.F.
Leeming. Yorks

DEPARTMENT OF NATIONAL DEFENCE

INVENTORY

ESTATES BRANCH
MAY 4 1946
H. Q.
OTTAWA
NATIONAL DEFENCE

DATE.....

The Estates Branch has received the following personal effects of:

NAME... R.17414 W/O 11 TREMBLAY, J.J.M. .....

1 Khaki Kitbag.
1 Swim Trunks.
1 White Sweatshirt.
1 Blue Knitted Pullover.
2 Face Cloths.
2 Underwear Shorts.
2 Underwear Vests.
1 Large Sqdn. Crest with Frame.
1 Blue Woollen Scarf.
1 Pr. Leather Gloves.
8 Prs. Socks.
5 Handkerchiefs.
1 Green Musical Instrument.
2 Belts.
1 Cloth Bag.
2 B/A Brevets.
1 Can Opener.
2 Wire Sleeve Hands.
1 Deck Playing Cards.
2 Combs.
4 Prs. Shoe Laces.
2 Kitbag Handles.
2 Padlocks.
1 Pipe Broken.
2 6" Rules.
1 Green Metal Mirror.
1 Shaving Brush.
1 Soap Container.
1 Blue Leather Notecase.
4 Keys.
1 Italian/English Dictionary.
1 Tobacco Pouch.
2 Prs. Pliers.
2 Prs. Scissors.
1 Black Foutain Pen.
1 Ticket Puncher.
1 New Testament.
3 Prop. Pencils.
1 Cigarette Case.
1 Religious Medal.
1 Metal Container.
1 Collar Clip.
1 British Pocket Atlas.
1 Envelope of Snaps.
1 Blue Brief Case.
1 Bundle Misc. Books.
1 Magnet.
1 Wish Bone.
1 Bottle Opener.
19 Handkerchiefs.
1 Face Cloth.
1 Pr. Socks.
1 Hand Towel.

Received the effects as listed

SIGNATURE. J. M. L. Tremblay

DATE REC'D. 30 April 1946

EMS.

Tout en parfaite condition

J95501(RO)

P.A.

Ottawa, Canada, le 19 février, 1947.

R E C O M M A N D E E

Monsieur J.M.J. Tremblay,
468-17ième avenue,
Lachine, Québec.

Cher Monsieur Tremblay:

C'est pour moi un heureux privilège que de pouvoir vous faire parvenir les ailes - emblématiques et le certificat reconnaissant les éclatants services rendus par votre fils, l'officier pilote J.J.M. Tremblay.

Les plus belles paroles, je le comprends parfaitement, ne sauraient alléger votre chagrin; j'ai le ferme espoir, toutefois, que ces "Ailes", emblème d'opérations militaires contre l'ennemi, seront pour vous un précieux mémento, rappelant le sacrifice, sur l'autel de la Liberté, d'une vie encore à son printemps, pour la défense du Foyer et de la Patrie.

Sincèrement,

W.A. Dicks
Commandant d'escadre
Officier préposé aux registres du C.A.R.C.

F/O R.J. Rocheleau/AD

R.C.A.F. A81-A
5M-12-44 (4876)
H.Q. 885-A81-A

MINISTÈRE DE LA DÉFENSE NATIONALE

MARINE ═══ ARMÉE ═══ AVIATION

DÉCLARATION TOUCHANT LA GRATIFICATION DE SERVICE DE GUERRE

NOM DU MILITAIRE DÉFUNT: Jacques T.M. (PRÉNOMS) TREMBLAY (NOM)

No DU REGISTRE: 32877

No DU DOSSIER:

BÉNÉFICIAIRE: Jean-Marie Joseph Tremblay,

DATE: 29-1-51

ADRESSE: 468 - 17th. Avenue, LACHINE, Quebec.

No MATRICULE: J-95501

GRADE DÉFINITIF: P/O

DATE À LAQUELLE LE SERVICE OUTRE-MER A ÉTÉ TERMINÉ: 5-1-45

DATE DE LIBÉRATION: 5-1-45

	$ ¢
A. DURÉE TOTALE DU SERVICE DONNANT DROIT À LA GRATIFICATION	
NOMBRE DE JOURS 875 / 30 ÉQUIVALANT À 29 PÉRIODES COMPLÈTES @ $7.50	217.50
B. DURÉE DU SERVICE OUTRE-MER DONNANT DROIT À LA GRATIFICATION	
NOMBRE DE JOURS 500 MOINS 5 JOURS QUI NE SONT PAS ADMISSIBLES ÉQUIVALANT À 495 JOURS @ 25 CENTS PAR JOUR	123.75
VOIR L'ALINÉA 2 AU VERSO POUR L'EXPLICATION	
C. SUPPLÉMENT POUR LE SERVICE OUTRE-MER	
TAUX QUOTIDIENS LORS DE LA LIBÉRATION	
SOLDE $ 6.25	
INDEMNITÉ DE SUBSISTANCE OU INDEMNITÉ DE VIVRES ET DE LOGEMENT $ 1.70	
SOLDE SUPPLÉMENTAIRE $	
$	
$	
ALLOCATION FAMILIALE MILITAIRE 1/30 DE $ $	
TOTAL $ 7.95 ×7 = $ 55.65	
NOMBRE DE JOURS 500 / 183 ×$ 55.65	
	152.04
D. GRATIFICATION DE SERVICE DE GUERRE	493.29
E. DÉDUCTIONS PAIEMENT EN TROP DE SOLDE ET ALLOCATIONS $	
ALLOCATION FAMILIALE MILITAIRE ET DÉLÉGATION DE SOLDE $	
AUTRES DÉDUCTIONS $	
F. MONTANT TOTAL PAYABLE ENGLISH COPY MAILED TO PAYEE	493.29

G. VOTRE PART DE LA GRATIFICATION EST—

ALLOCATION FAMILIALE MILITAIRE QUI VOUS EST VERSÉE $ _____ DE $ NIL =$ 493.29

MONTANT TOTAL DE L'ALLOCATION FAMILIALE MILITAIRE VERSÉE $

CERTIFICAT JE CERTIFIE QUE LE MONTANT A ÉTÉ BIEN CALCULÉ ET EST PAYABLE CONFORMÉMENT AUX DISPOSITIONS DE LA LOI DE 1944 SUR LES INDEMNITÉS DE SERVICE DE GUERRE ET AUX RÈGLEMENTS ÉTABLIS EN VERTU DE LADITE LOI.

PRÉPARÉ PAR	VÉRIFIÉ PAR
EC	

TRÉSOR	
VÉRIFIÉ PAR	DATE
E. L. Tremblay	16/2/51

Capt.
REPRÉSENTANT MILITAIRE

ΔTU

OFFICIAL ROYAL CANADIAN AIR FORCE CASUALTY NOTIFICATION

NUMBER J95501 (~~R17414~~) RANK PILOT OFFICER EFF 4-1-45 UNIT 429 SQDN (OVERSEAS)

TRADE A/B (G.L.)

NAME TREMBLAY, JACQUES JOSEPH MAXIME

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

PRESENT MARITAL STATUS SINGLE RELIGION R.C. CANADIAN YES

FRENCH CANADIAN OTHER

NEXT OF KIN MR JEAN MARIE JOSEPH TREMBLAY

RELATIONSHIP FATHER

ADDRESS 104 - 17TH AVENUE LACHINE QUEBEC.

FATHER'S NAME MR J.M.J. TREMBLAY

ADDRESS ~~XXX~~ 104- 17TH AVENUE LACHINE QUE LIVING ON ENLISTMENT YES

MOTHER'S NAME DECEASED

ADDRESS LIVING ON ENLISTMENT NO

ADDRESS AT TIME OF ENLISTMENT MARITAL STATUS AT TIME OF ENLISTMENT

OCCUPATION

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

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

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

ESTATES BRANCH DEC 27 1945 OTTAWA NATIONAL DEFENCE

CASUALTY DETAILS:

AUTHORITY CAS. SIG. NO. AFHQ PRESUMPTION OF DEATH MEMO NO. 368---d--15-NOV-45

PREVIOUSLY REPORTED "MISSING" 5-JAN-45 AFTER AIR OPERATIONS OVERSEAS (OVER HANOVER GERMANY)

NOW "PRESUMED DEAD" 5-JAN-45 FOR OFFICIAL PURPOSES.

ALL WILLS~~XXX~~(1)

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

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

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

DATE 7-DEC-45

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

47742

R.C.A.F. RECORD OF PAY

R.C.A.F. R.28C
WT. P700/26824 100M 8/44 S.L.S.T.C.

OUTFIT ALLOWANCE PAID
WARRANT OFFICERS $ ____ ON ____
OFFICERS $ ____ ON ____
$ ____ ON ____

TRADE | EFF. DATE

SUBJECT TO PENSION DED.	YES	NO
		No 1.5.43

RATES OF PAY P.F. or A.S.

EFF. DATE	EFF. DATE
	1.5.43

BANKING ARRANGEMENTS

J95501
No. R174414 NAME IN FULL TREMBLAY JACQUES M. JOSEPH

BASIC ACCOUNT

DATE	PARTICULARS	EFF. DATE	DAILY RATE OF PAY	TOTAL MONTHLY PAY	TOTAL ASS. PAY	TOTAL DEF. PAY	DEBIT	CREDIT	BALANCE	FORTNIGHTLY ENTITLEMENT DOLLARS	STERLING	EFF. DATE	A.51 SENT
26.10.44	Stret [illegible] F/S. S.P.	6.5.44	4 00	120 00				120 00	120 00				
"	A Pay See particulars				20 00		20 00		100 00	46 94	10 10 0	1.11.44	new pay [illegible]
26	4/91222. 7th V. Loan (A51 27/11 $1-46)	1.11.44			28 40		8 40		91 60	42 91	9 12 0	1.12.44	27.10.44
12	3/130709. Prom WO2	6.11.44	4 60	138 00				18 00	109 60	57 41	11 10 0	1.1.45	27.11.44
A/L 578	Appt'd (4/1662) P.O. (Aug 20/351286)	4.1.45	6 25	187 50									

ASSIGNED PAY

ASSIGNEE (FULL CHRISTIAN NAMES)	EFF. DATE	AMOUNT	TOTAL
Mrs Jan M. [illegible]	1.8.42	20 00	20 00
4/91222 7th V. Loan	1.11.44	8 40	28 40
Tremblay Jan M.	1.2.45	20 00	
Rec. Gen. (Grp 2)	1.11.44	8 40	

DEPENDENTS' ALLOWANCE

DATE AFP. FORWARDED	RELATIONSHIP	AMOUNT AWARDED	EFF. DATE

Missing 5.1.45 CL 664.23 Pres Dead 5.1.45 CL 838

PAY AND ALLOWANCES

Reconciled 9.2.56

Form 901 Checked 17.5.45 [illegible]

DATE	PARTICULARS OF ENTRY	DEBIT	CREDIT	BALANCE
Nov	Pay		120 00	120 00
	A.P.	28 40		91 60
22	3/130709. Prom. WO2 (A51 Cat 7.1.45 27/11 Paid 6/11/44)		15 00	106 60
24	AR 134882. Leeming. 10/11	46 94		59 66
	New Pay		142 60	202 26
	A.P.	28 40		173 86
	Balance from old A.28 A51 18/10/80		49 11	222 97
15	AR. 152464. Leeming 24/11	38 89		184 08
21	AR. 162623. " 8/12	42 91		141 17
Jan	Net Pay		109 60	250 77
	1 Day's Pay		4 60	255 37
9	AR. 175157. " 20/12	125 61		129 76
	To Non/Eff.	129 76		—
		440 91	440 91	
Jan	B/forward 19/10/181591		129 76	129 76
	24/3/137475 Rev 7V.L. to 1.11.44		25 20	154 96
Feb	6/11/194325 Can. Cheque for credit		10 00	164 96
	23/11/214438 C.I.E.		114 45	279 41
	" R.A.F. Allces.		4 32	283 73
Aug.	20/351286 Inc. on Comm.		46 20	329 93
	357884 Mess Bill - Leeming.	2 09		327 84
	To Balance	327 84		
		329 93	329 93	

Rev. 7th V.L.B.
Can. Cheque Cr.
C.I.E.
R.A.F. Allce

DATE	PARTICULARS OF ENTRY	DEBIT	CREDIT	BALANCE
Nov.	Brought Forward		327 84	327 84
✓	15/3/410660. Payment of debt owed by J88950 P/O G. Kay		22 25	350 09
	To Balance	350 09		
		350 09	350 09	
	L.F.6 Feb/56		350 09	350 09

DEFERRED PAY

NR 606

DATE	PARTICULARS OF ENTRY	DEBIT	CREDIT	BALANCE
✓				Nil

Cheque in Effects

350.09 [illegible]

CONFIDENTIAL

R.C.A.F. TRAINING REPORT

R.C.A.F. FORM 5031

AIR BOMBER

No. 9 AIR OBSERVER SCHOOL

1. Surname ....TREMBLAY.... Christian Names ....Jacques Joseph Maxime....

2. Number ....R174414.... 3. Rank ....LAC.... 4. Course No. ..79B "X"..

5. Posted from ..#1 B. & G... 6. Date course commenced ..28-6-43.. 7. Date course ended ..6-8-43.. 8. Posted to .."Y" Depot.

9. GROUND WORK			10. AIR WORK		
Subject	MARKS ALLOTTED	MARKS OBTAINED	Subject	MARKS ALLOTTED	MARKS OBTAINED
(a) Air Nav.-Elements	200	144	(a) Air Nav.-Day	300 ~~200~~	206
(b) Aircraft Recognition	250	138	(b) Air Nav.-Night	200	136
(c) Signals-Practical	250	175	(c) Bombing	300	225
(d) Reconnaissance	150	75	(d) Photography	200 ~~300~~	126
(e) Photography	150	111			
Total	1000	643	Total	1000	693
PER CENT		64.3	PER CENT		69.3

11. Assessment of qualities of Character and Leadership	MARKS ALLOTTED	MARKS OBTAINED
	100	36.5

Degree of Suitability for further training	0 NOT AT ALL SUITABLE	1 MODERATELY SUITABLE	2 DEFINITELY SUITABLE	3 EXTREMELY SUITABLE
12. As an Instructor	X			

(Mark "X" in the appropriate column)

13. Remarks: (See overleaf)

Passed/~~Failed~~

(Class Standing - 26/27)

R.C.A.F. Records Office
Rec'd. 15 OCT 1943
O.K. ..... C.B. .....
R.C. JB N.I. .....
.....JB..... P.A. GR

Date ....August 6th, 1943.... Signed ....[signature].... Officer Commanding

N.B. (Flying times shown overleaf).

14. Flying Times (at this Unit):

Type of Aircraft	Time	Navigation	Armament Flying	Other	Total
ANSON	Day	29:30			29:30
	Night	21:35			21:35

REMARKS: (Air Work) After poor beginning displayed considerable improvement and became a capable, co-operative crew-man.

(General) Appearance, manner and personality are fair. Appears to learn slowly and has to work hard to keep abreast. A steady plugger.

Not recommended for a commission.

R.C.A.F. Special Reserve

Appendix "D"
H.20/10

ROYAL CANADIAN AIR FORCE
INTERVIEW REPORT

1. SURNAME.....TREMBLAY.....

2. CHRISTIAN NAMES.....JACQUES JOSEPH MAXIME.....

3. APPLYING FOR ENLISTMENT AS.....AIRCREW I.T.S.....

SELECTION BOARD

4. PERSONNEL OFFICER

Education.....9.....

A to L Score.....C.T. 50.....

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

Claims 2 yrs. H.S. C.T. score adequate for Aircrew I.T.S. W.E.T.P. Good occupational record. Bilingual. Good potential.

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

SUITABLE FOR COMMISSION....No.....

12-6-42 Signed J.L.Gibault F/O

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5. MEDICAL OFFICER

Medical Category....A1B A3B.....

ASSESSMENT: (Physical; Temperamental) Feet, B.P. & Pulse.
Very good candidate. Has been taking private lessons for past 8 months to qualify for Aircrew in which he did. He is nervous today but I am satisfied that he will be O.K.

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

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

Signed Claude St. Onge F/L

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6. INTERVIEWING OFFICER

ASSESSMENT: (General Fitness) Claims to have the equivalent of two yrs.H.S. Good appearance. Well mannered. Speaks English fairly well. Studeous type. Mechanically inclined. Drives automobile. Likes swimming.

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

SUITABLE FOR COMMISSION.....No.....

8-6-42 Signed B? LECLERC F.O.

FOUND ACCEPTABLE FOR.....Aircrew.I.T.S....W.E.T.P.....

Commanding Officer

No. 13 Recruiting Centre.

DATE:

R.C.A.F. Records Office
JUL 29 1942
O.K.....C.I.B.....
R.C.....N.I.....
.....P.A.....
JUN 30 1942

A.F.M. 5
24.12.41.

R.C.A.F. T. 81 (Revised)
15M—4–42 (2009)
H.Q. 1062-13-58

ROYAL CANADIAN AIR FORCE

REPORT ON PUPIL AIR BOMBERS. ~~OBSERVERS~~

AIR AND GROUND TRAINING

SURNAME Tremblay, Christian Names J.J.M.

Number R174414 Rank L.A.C.

INSTRUCTIONS

Instructions regarding Form T.81 are given in A.F.A.O. A.51/22, paras. 5, 10, 11, and 15. CROSS OUT WORDS NOT APPLICABLE.

PART I

1. No. 3 INITIAL TRAINING SCHOOL. COURSE NO. 71 FROM Jan.25/43
To April.2/43

2. EXAMINATION RESULTS.

SUBJECT	MARKS Maximum	MARKS Obtained
Mathematics	100 ~~150~~	65
Armament Written,	50	34
Armament Practical,	50 ~~50~~	34
Signals Buzzer,	100	90
Signals Lamp,	50 ~~150~~	46
Navigation	150 ~~200~~	92
Visual Link Trainer		
Airmanship, Theory of Flight and Engines	100	69
Drill	100	64
Law and Discipline, etc	100	56
~~Hygiene and Sanitation~~ Meteorology	50	38
A/C Recognition	100	37 S 62
Anti-Gas	50	40
TOTAL	1000	665

Position in Class	97	Percentage	67 %
No. in Class	116	PASS	FAIL

REMARKS

Good Service Spirit. Good personality & intelligence. Sound judgment & decisive. Reliable & dependable.

Character & leadership: ... 109

Alternative recommendation: W.A.G.

R.C.A.F. Records Office
Rec'd. 9 DEC 1943
O.K. .... C.I.B ....
R.C. JD N.I. ....
18

[signature] W/Cmdr.
Commanding Officer

To BE PASSED TO #1 B.&.G.S. ~~A.O.S.~~

No. 3 I.T.S.

DATE March 31/43