

R108021
BROOKES
THOMAS

ROBER

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OCCUPATIONAL HISTORY FORM

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

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

Section A—GENERAL INFORMATION

- R 107021
A 62
1. (a) Print name in full BROOKES, T. A. (b) Reg'l. No.
AIR FORCE (c) Rank
 2. (a) Arm of service (b) Unit (c) Place of residence
19-3-20 (b) Have you NO (c) Place of residence Montreal Que
 any dependents? at time of enlistment
 3. (a) Date of birth (b) Date of enlistment 17-6-41
Montreal Que (b) Date of enlistment

PLEASE
LEAVE
BLANK

Section B—EDUCATION AND TRAINING

5. (a) State age on 14 (b) Were you attending school NO
 finally leaving school or college up to the time of enlistment?
 6. State definitely highest standing reached at public, technical or high school
 (for instance—"4 years, Public School", "two years, High School", "Junior HIGH SCHOOL ENT.
 Matriculation", or "4 years technical course in ", etc.)
 7. If you attended a university, give name of
 university and standing or degree secured
 8. (a) Did you ever YES (b) If so, MACHINIST (c) Did you YES (d) If you did not
 enter upon a trade for what finish it, how long
 apprenticeship? occupation? finish it? did you serve at it?
 9. (a) What languages ENGLISH, FRENCH (b) What languages FRENCH ENGLISH
 do you speak fluently? do you read well?

Section C—EMPLOYMENT CONDITION AT TIME OF ENLISTMENT

10. (a) State whether you were WORKING (b) At time of en-
 WORKING or NOT WORK- listment of what
 ING at time of enlistment. trade union or
 (Enter here only "Work- professional society
 ing" or "Not Working", were you a member?
 as case may be; particu- NO
 lars are asked for below)

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", (b) State how long you
 state exact trade or occupation had worked at this
 at which you actually worked 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 Address
 employer, if any: Name
 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 (b) Date of dis-
 in a business of your own, state continuing it
 nature and address of business

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 DOMINION CLASS Address MONTREAL
 19. Nature of employer's business (for instance, "farmer", or "building
 contractor", or "boot factory", or "iron foundry", or "retail store", etc.) GLASS BULB MANF'S.
 20. (a) Your MACHINIST (b) Number of years' experience at 5
 specific occupation this occupation with any employer
 21. (a) Did your employer promise YES (b) Did your employer N.A. (c) Do you wish YES
 definitely to give you refuse to promise you to return to your
 employment on discharge? employment on discharge? 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, N.A. (b) Where was N.A.
 or professional practice it located?
 23. (a) Number of years N.A. (b) Have you made, or will you make plans to N.A.
 engaged in this business return to the same or a similar business on discharge?

Section F—PARTICULARS OF FARMING EXPERIENCE

24. (a) Do you wish to engage NO (b) Do you feel competent NO (c) If so, in what N.A.
 in farming after the war? to operate a farm? kind of farming?
 25. (a) Were you NO (b) How many years' actual N.A. (c) In what provinces N.A.
 born on a farm? farming experience have you had? 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? NO
 27. If so, state nature of your plans (for example, do you plan N.A.
 to return to school, or have you been assured of a job, etc.)
 28. State any employment preference or ambition you MACHINIST
 may have, other than indicated elsewhere in this form

DATE JUNE 19 1 194 SIGNATURE T. A. Brookes

R.C.A.F. Records Office
Rec'd JUN 20 1949
O.K. _____ C.I.S. _____
R.C. EmH N.I. _____
S.L. _____ T.A. _____

FOR COMPLETION AND RETURN BY

Form P. 64

Mr. Charles Brookes,

1911 Laurier East Ave.,

Apt. #3, MONTREAL, Que.,

Any further communication on this subject should
be addressed to:—THE ADMINISTRATOR OF ESTATES,
DEPARTMENT OF NATIONAL DEFENCE,
OTTAWA, ONTARIO.

and the following number quoted:—

H.Q. 1040-B-52 FD 20

DEPARTMENT OF NATIONAL DEFENCE
ESTATES BRANCH
OTTAWA, ONT.



February 11, 1944

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

BROOKES, THOMAS ROBERT LAC.

R108021 R.C.A.F.

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

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

IGR:TL

N.O. Seagram
(N.O. Seagram) S/L,
for (L.M. Firth) Lt.-Col.,
Administrator of Estates.

ANSWER IN FULL ALL APPLICABLE QUESTIONS

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

Degrees of Relationship	RELATIVES required to be accounted for	INFORMANT'S STATEMENT		
		NAME IN FULL of any Relative, if any, in each degree specified	Age	ADDRESS IN FULL of each surviving Relative, opposite his or her name, and date of death of each deceased relative
1	Widow of the Deceased.....			
2	Children of the Deceased and dates of their Births.....			
3	Father of the Deceased.....	Charles Brookes	61	1911 Laurier Ave. E, Montreal, Que.
4	Mother of the Deceased.....	Mary Ann Brookes	56	1911 Laurier Ave. E, Montreal, Que.
5	Brothers of the Deceased	John Edward Brookes	27	1911 Laurier Ave. E, Montreal, Que.
6	Sisters of the Deceased			
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.	Thomas Robert Brookes
9	Date of his birth.	March 19, 1920
10	Place and date of his marriage.	_____
11	Place and date of his parents' marriage.	Montreal, Quebec.

PARTICULARS OF DOMICILE

12	Place where deceased was born.	Montreal, Quebec.
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, County of Hochelaga. (b) (c) (d)
14	Nature of employment before enlistment.	Machinist
15	State whether he owned the premises in which he lived, and, if so, where situated.	No
16	Name place where deceased stated he intended to make his permanent home.	Montreal, Quebec.

PARTICULARS OF ESTATE

17	Did he leave a Will? If in your custody, please forward.	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?	Not applicable
19	Did he have a Bank, Post Office or other deposit account? If so, give name and address of bank, etc., and the amount on deposit. Do you wish it administered with the pay account?	No
20	Amount of War Savings Certificates held by deceased. Indicate where located.	Face Value- \$20.00 1911 Laurier Ave. E, Montreal.
21	Amount of Victory Loan Bonds held by deceased. Indicate whether registered or bearer and where located.	Not applicable.
22	If deceased had life insurance, name companies and amount payable under each policy and the person named as beneficiary therein.	Metropolitan Life Insurance Co --\$230.00 -- Beneficiary-Mary Ann Brookes.
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.	Not applicable
25	Have you or any other relative paid the funeral expenses or any part thereof? If so, attach itemized accounts showing amount paid, and by whom.	-----

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

(PLEASE TURN OVER)

DECLARATION

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

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

* 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.

Charles Brookes

{ Signature of Informant

1911 Laurier Ave. E., Montreal, Quebec. Address

CERTIFICATE

I hereby certify that to the best of my knowledge and belief Charles Brookes

See above. { Name of informant } is the Father of the Deceased above described, and I believe the above Declaration and the Statement of Relatives and of Particulars made by the Informant and signed in my presence to be complete and correct.

Dated at Montreal, Quebec. this 21st day of February 19 44

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

J. G. Laroc

Qualification.....

Commissioner of the Superior Court

Address..... *District of Montreal 2046 Mount Royal East*

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

R.C.A.F. Special Reserve

AIR FORCE No. R 108021

POSTED TO # 1 M.D. Toronto, Ont.

TRADE Airframe Mechanic
Metal Standard

Ammauer

ROYAL CANADIAN AIR FORCE

(ATTESTATION PAPER)

COMPLETE

Date 12-5-41

Initials J.M.S.

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

1. Name BROOKES Brookes FULL Christian Name THOMAS ROBERT Thomas Robert ✓
2. Present Address 1911 Laurier Ave. East. Apt. 3 Montreal Que. Telephone Ch. 16.01
3. Permanent Address 1911 Laurier Ave. East. Apt. 3. Montreal P.Q.
4. Place of Birth Montreal P.Q. ✓ Citizenship Canadian
5. Date of Birth March 19th 1920 ✓ Married, Single, Widower, Separated, Divorced Single
6. Particulars of Children None

Name	Date of birth	Name	Date of birth
<u>NA.</u> ✓			

7. Occupation Machinist ✓ 8. Religion Church of England ✓
State denomination
9. Languages English & French Both Fluently ✓
State proficiency
10. Next of Kin (Full Name) Charles Brookes ✓ Relationship Father
" Address 1911 Laurier Ave East. Apt. 3 Montreal P.Q.
11. Father (Full Name) Charles Brookes ✓ Birthplace Birmingham Eng.
" Address 1911 Laurier Ave East. Apt. 3 Montreal P.Q. Citizenship Canadian
" Occupation Checker ✓
12. Mother (Full Maiden Name) Mary Ann Carter ✓ Birthplace Lancashire Eng.
" Address 1911 Laurier Ave East. Apt. 3 Montreal P.Q. ✓ Citizenship Canadian
13. Details of any Naval, Military or Air Force Service: None

Unit	Place	Rank	Trade	Date		Reason for discharge
				From	To	
<u>NA.</u> ✓						

R.C.A.F. Records Office

Rec'd JUN 20 1941

O. K. [Signature] C.I.B. [Signature]

H. E. R. M. N. I. [Signature]

S. I. P. A. M. [Signature]

14. Honours, Awards, Mentions None ✓
15. Are you now on any Naval, Military or Air Force Reserve? NO.
16. Have you previously made application to join the R.C.A.F.? NO. If so, where? 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.

197-206

NA

21. Particulars of Education:

	Name of school	Date		Courses—Subjects, etc.
		From	To	
Primary Education—Public or Separate School.....	W ^m Dawson Ave. ^{Montreal P.Q.}	1926	1934	Elementary
High School—Collegiate Institute, etc.....	NA.			
Technical School.....	NIGHT. Montreal Technical ^{Montreal} P.Q.	1936	1937	Mathematics
University or School other than above.....	NA.			
Correspondence Courses, etc.....	NA.			

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

Employer and place	Duties, trades, positions	Date		Reason for leaving
		From	To	
Dominion Glass Co. ^{Montreal P.Q.}	Operator Machinist	1936	1940	Present Employment.
	Unemployed	1934	1936	

23. Flying Experience (in Hours) Solo None ✓ Dual None ✓ Passenger None

24. Special Qualifications, Hobbies, etc., useful to the R.C.A.F. None ✓

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

Swimming / Sking / Tennis
in season / in season / moderately ✓ Airframe Mechanic Metal

26. AIR FORCE DUTY you wish to enlist for Ground Duties. None ✓
Flying Duties. None ✓
If for Ground Duties, state Air Force trade in which you wish to enlist. Airframe Mechanic
If for Flying Duties, state preference as (a) Pilot; (b) Observer; (c) Air Gunner (d) Wireless Operator (Air Crew).
(Cross out words not applicable.)

27. Names of at least two persons who can give references as to character and ability.

Name	Address	Occupation
J. H. Wrotele	Westmount P.Q. 756 Upper Lansdowne Ave.	Vice President of the Southern Canada Power Co.
G. Udell S.R.	Montreal P.Q. 1911 Laurier Ave. E. apt 2	Checker. C.P.R. Wharf
J. E. Rose	Montreal P.Q. 6974 DeLormer Ave	Shipper. Standard Sheet Co.

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

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

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

Date Feb. 12 1941 Signature Brookes ✓

FOI

(A) Report of Interviewing Officer—

Type Over Confident

Suitability for (state in what capacity)

Date 12.2.41 Signature

(B) Report of Trade Test—

Trade in which tested..... a

Result Airframe

Trade qualifications other than above list

Date 12.2.41 S

(C) DECLARATION

I, Thomas Robert Brookes /
particulars are true, and I hereby engage to
and overseas, in the Royal Canadian Air Force
thereafter, and in any event for a period of
services.

Date June 17th ✓ 1

(D) OATH TAKEN

I, Thomas Robert Brookes /
declare) that I will be faithful and bear true

Date June 17th ✓ 1

(E) CERTIFICATION

The Recruit above named was cautioned
he would be liable to be punished as provided

The above questions and answers were taken

I have taken care that he understands each
as replied to and the said Recruit has made a

at Montreal, P.Q.

G. W. [Signature]
Signature of Officer

NATIONAL REGISTRATION CERTIFICATE
PRODUCED
J.W. by T.C.A. F.O.

FOR OFFICIAL USE ONLY

(A) Report of Interviewing Officer—

Type Over Confident. General appearance Very Good
~~Armed Forces~~
Suitability for (state in what capacity) Airframe Mechanic Metal
~~Armed Forces~~
Date 12.2.41 Signature R. Davis Rank WO2

(B) Report of Trade Test—

Trade in which tested na Airframe Mechanic Metal
Result Airframe Mechanic Metal Standard
Trade qualifications other than above likely to lead to efficient employment in the R.C.A.F. Sig. Mechanic
Date 12.2.41 Signature R. Davis Rank WO2

(C) DECLARATION MADE BY MAN ON ATTESTATION

I, Thomas Robert Brookes 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 17th 19 41 R. Brookes
Signature of Recruit

(D) OATH TAKEN BY MAN ON ATTESTATION

I, Thomas Robert Brookes do sincerely promise and swear (or solemnly declare) that I will be faithful and bear true allegiance to His Majesty.

Date June 17th 19 41 R. Brookes
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 17th day of June 19 41

J.W. by T.C.A. F.O. Signature of Officer Rank Unit
RCAF Recruiting Centre Montreal.

Courses—Subjects, etc.

Elementary Mathematics

Reason for leaving

Efficient Employment

Passenger None

no mechanic metal
metal
Mechanic
Wireless Operator (Air Crew)

Occupation

President of the
Canadian Power Co.
at C.P.R. Wharf
Standard
Co.

Yes
to the best of my knowledge and

Finger Printed
Date 17-6-41
Initials E.B.

FOR OFFICIAL USE ONLY
CERTIFICATE OF MEDICAL EXAMINATION

Part 1. Information obtained from the applicant—

1. Age. 20 2. Have you ever suffered from any of the following defects in health?
- | | | | |
|------------------------------------|-------|------------------------------------|-------|
| (a) Rheumatism..... | no | (j) Nasal Trouble..... | no |
| (b) Tuberculosis..... | no | (k) Ear Disease..... | no |
| (c) Bronchitis or Asthma..... | no no | (l) Eye Disease..... | no |
| (d) Heart Disease..... | no | (m) Epilepsy..... | no |
| (e) Kidney or Bladder Disease..... | no no | (n) Nervous or Mental Disease..... | no no |
| (f) Gastro-intestinal..... | no no | (o) Syphilis..... | no |
| (g) Rupture..... | no | (p) Gonorrhoea..... | no |
| (h) Varicose Veins..... | no | (q) Bone Fracture..... | no |
| (i) Flat or Deformed Feet..... | no | (r) Other Disease or Defect..... | no |

3. Have you ever worn glasses? no
4. Have you had any illness for more than one week's duration. no

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

Signature of Applicant

Examiner's Remarks re above

Yannovle
None

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

1. Identification marks or scars (if operative obtain history).....
nil
2. Height..... 5 feet..... 10 1/2 inches. 3. Weight..... 165 pounds.
4. Complexion..... light 5. Color of Eyes..... hazel Hair..... Brown
6. Development { Good Fair Poor } 7. Chest Measurement—Full expiration..... 37 inches
Range of expansion..... 3" inches
8. Hearing—Right..... 20/20 ft. Left..... 20/20 ft. Tympana—Right..... norm. Left..... norm.
9. Vision—Without glasses—Right..... 20/20 With glasses—Right..... no
Left..... 20/20 Left..... no
10. Condition of mouth and teeth..... 20 pts good
11. Urine—Albumen..... neg Sugar..... neg
12. Abnormalities (Congenital and Pathological) found on Examination.....
nil

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

A.V.B. MP
A.B.T.
A.V.T.S.

Any special remarks of the Medical Officers.....

BP too high to review 1 wk.
17-2-41 Rechecked B.P. 135-88
8/5/41 recheck normal B.P.
9-5-41 X-Ray # 78002 neg
17-6-41 Rechecked Norm

Date 13-2-41 19

John Collins To President
Andrasen Capt Member

- Part 2 Cont.
13. Reflexes IX
14. Heart N
15. Lungs IX
16. Blood Pressure S.D. 135/88
17. Colour Vision

7121

Charles Brookes (Father)
1911 Laurier Ave., E.,
Apt. 3,
Montreal,
Que.

May-45.

MEMORIAL BAR
DATE DESP.....
REGN. NO. 745

NAME BROOKES, Thomas Robert

FILE NO. 1040-B-52

RANK L.A.C.

CATEGORY ~~MISSING~~ ~~DEAD~~ PRES. DEAD

REG. NO. R108021

DATE OF DEATH: 1 June 43 MOTHER LIVING: Yes WIFE: N.A.

MINISTERIAL CARD: 19-6-43

ROYAL MESSAGE: JUN 20 1944

MEMORIAL CROSS
TO CHAPLAIN: JUN 3 1944

To mother & father

To mother & father 2-2-44

DEL'D TO MOTHER:

DEL'D TO WIFE:

Mr. & Mrs. Charles Brookes,
1911 Laurier Avenue, East,
Apt. 3, Montreal, Quebec.

COMMAND: 3 T.C.

RELIGION: C. of E.

R108021 (DPC)

Ontario,
3 March, 1952.

Mr. Charles Brookes,
1911 Laurier Avenue, East,
Apartment 3,
Montreal, Quebec.

Dear Mr. Brookes:

It is with reluctance that after so long an interval, I must refer to the loss of your son, Leading Aircraftman Thomas Robert Brookes, but due to the lack of any information concerning him since he was reported missing, it must be regretfully accepted and officially recorded that he does not have a "known" grave.

Due to the extreme hazards attending air operations there are, unhappily, many thousands of British aircrew boys who do not have "known" graves and all will be commemorated on General Memorials that will be erected at a number of locations by the Imperial War Graves Commission (of which Canada is a member), each Memorial representative of a theatre of operations. One of these Memorials will be erected at Runnymede, England, and the name of your son will appear on that Memorial.

I realize that this is an extremely distressing letter and that there is no manner of conveying such information to you that would not add to your heartaches. I am fully aware that nothing I may say will lessen your great sorrow, but I would like to express to you and the members of your family my deepest sympathy.

Yours sincerely,

77
for (W.R. Gunn)
Wing Commander,
R.C.A.F. Casualties Officer,
for Chief of the Air Staff.

FFF/MC

R 108021

420 (RCAF) SQUADRON.

8

1st July, 1943.

Mr. G. Brookes
1911 Laurier Ave, East,
Montreal, Quebec.

Dear Mrs Brookes,

Before you receive this letter you will have been informed by the Record Office of the fact that your son LAC Brookes is missing.

I regret to say that at the moment all I can tell you is that your son is missing. He was a passenger in an aircraft en route to North Africa, and nothing has been heard from him since the bomber took off. It is possible of course, that he may be a prisoner of war, but only time will tell.

I would assure you that every endeavour will be made through official channels to discover your son's fate and all likely sources of information will be explored.

Yours very sincerely,

D. McIntosh W/C
(D. McIntosh) Wing Commander,
Officer Commanding,
420 (R.C.A.F.) Squadron.

PHOTO
COPIES
ORIGINAL
LETTER
WING NO
.....
.....

R108021	LHC.	BROOKES, T. R.
(NUMBER)	(CLASS)	(NAME)
P/FILE No.	P 408850/43	
LETTER RECEIVED	30.7.43	
ORIGINAL SENT	✓	
COPY TO OIRA	4.8.43	
PHOTO SENT TO	✓	

RECEIVED
 THE SECRETARY OF STATE
 FOREIGN OFFICE
 LONDON
 10 SEP 1943

THE SECRETARY OF STATE
 FOREIGN OFFICE
 LONDON
 10 SEP 1943

RECEIVED
 THE SECRETARY OF STATE
 FOREIGN OFFICE
 LONDON
 10 SEP 1943

RECEIVED
 THE SECRETARY OF STATE
 FOREIGN OFFICE
 LONDON
 10 SEP 1943

R 108021

GERrard 9234

P.404850/7/43/P4.A2

REAF

6

Casualty Branch,
XXXXXXXXXXXXXXXXXXXX
77, Oxford Street,
XXXXXXXXXXXXXXXXXXXX
London, W.1.

R 108021

Sir,

24 June, 1943.

I am commanded by the Air Council to express to you their grave concern on learning from the Casualties Officer of the Royal Canadian Air Force that your son, Leading Aircraftman Thomas Robert Brookes, is missing as the result of air operations on 1st June, 1943.

This does not necessarily mean that he is killed or wounded, and if he is a prisoner of war he should be able to communicate with you in due course. Meanwhile enquiries are being made through the International Red Cross Committee and as soon as any definite news is received you will be at once informed.

If any information regarding your son is received by you from any source you are requested to be kind enough to communicate it immediately to the Royal Canadian Air Force Casualties Officer, Royal Canadian Air Force Headquarters, Ottawa.

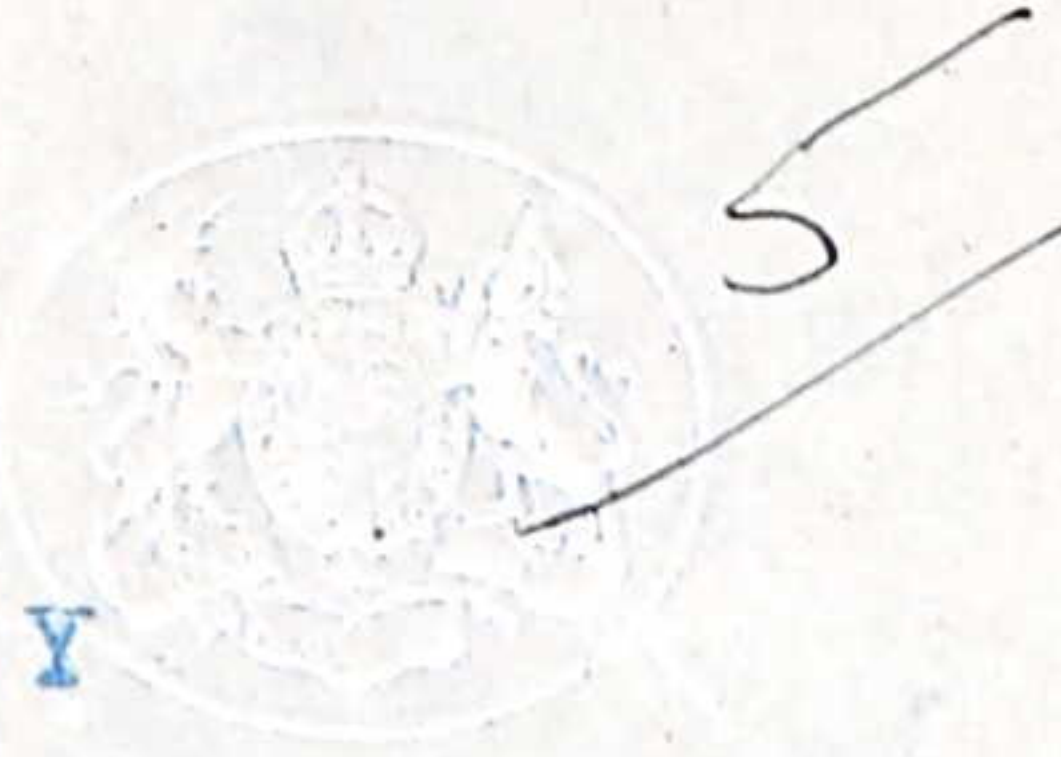
The Air Council desire me to express their deep sympathy with you in your great anxiety, and earnestly hope that favourable news of your son may be forthcoming.

J. A. SMITH

I am, Sir,
Your obedient Servant,

C. Brookes, Esq.,
1911, Laurier Street East,
Apartment 3,
Montreal, Province of Quebec,

P.H.



A I R M I N I S T R Y

73-77 Oxford St, London. W.1.

16th June, 1943.

CAN/R108021/PA/CAS

Dear Mr. Brookes:

It is with deep regret that I must confirm the information which you have already received from Air Force Headquarters, Ottawa, which stated that your son, Leading Aircraftman Thomas Robert Brookes, was reported missing as the result of air operations on the 1st June, 1943.

Your son was a Fitter in a Wellington aircraft, which took off from this country at 4.21 a.m. on the above mentioned date, to carry out a transit flight to North Africa, and for reasons unknown failed to reach its destination. Enquiries are continuing through all available sources, and I can assure you that any information which may be forthcoming will be communicated to you at once by Air Force Headquarters, Ottawa.

Please accept my deepest sympathy with you in your great anxiety.

Yours sincerely,

MILTON A. FOSS

(Milton A. Foss) Flight Lieutenant,
for Air Officer Commanding-in-Chief,
Royal Canadian Air Force, Overseas.

Mr. C. Brookes,
1911 Laurier Ave., E.,
Apartment 3.,
Montreal, Quebec,
C A N A D A

MMG



CAN/J17511/P4/CAS

A I R M I N I S T R Y

73-77 Oxford St., London W.1.

16th. June, 1943.

Dear Mrs. Hollowell,

It is with deep regret that I must confirm the information which you have already received from Air Force Headquarters, Ottawa, which stated that your son, Pilot Officer Robert Spencer Hollowell, was reported missing as the result of air operations on the 1st. June, 1943.

Your son was Wireless Operator Air Gunner of a Wellington aircraft, which took off from this country at 4.21 a.m. on the above mentioned date, to carry out a transit flight, and for reasons unknown failed to reach its destination. Enquiries are continuing through all available sources, and I can assure you that any information which may be forthcoming will be communicated to you at once by Air Force Headquarters, Ottawa.

Please accept my deepest sympathy with you in your great anxiety.

Yours sincerely,

(Milton A. Foss) Flight Lieutenant,
for Air Officer Commanding-in-Chief,
Royal Canadian Air Force, Overseas.

Mrs. E.I. Hollowell,
Wolseley, Saskatchewan,
C A N A D A

POST PRESUMPTION MEMORANDUM 5270

S.7. (Cas.C.5.)
21.2.47.

Relating to Wellington H.E.568 Missing on 1.6.43. from
Transit Flight U.K. to N.W. Africa.

FILE NUMBER	RANK	NUMBER	NAME	INFORMATION
P.404850/43	Sgt.	R.124548	SODERO, A.P.	<p><u>LOST AT SEA.</u></p> <p>Nothing has been heard of these personnel since they were reported missing on 1.6.43. It is therefore assumed that they lost their lives at sea.</p> <p><u>CASE CLOSED.</u></p>
	P/O.	J.17510	KING, W.R.	
	P/O.	J.17511	HOLLOWELL, R.S.	
	F/Sgt.	R.92672	DAVIS, H.L.	
	LAC.	R.61187	MackENZIE, J.E.	
	LAC.	R.108021	BROOKES, T.R.	

Circulation

Amendments (B.1.)
Chron.Cards (B.1.)
S.7. (Cas.C.5.)
Presumptions (B.3.)
Cas. Can.
R.A.A.F. O.H.Q.
P. File
B.1. (Mem.)

G.97038



W.S.G.

Department of National Defence

Ottawa, Canada

JUN 12 1945

Date.....194.....

Received this day from the Treasury Branch cheque for the sum of

THREE HUNDRED AND FORTY TWO-----83 Dollars (\$ 342.83)
100

being in connection with my late son's War Service Gratuity

BROOKES, Thomas R. LAC (Deceased)
No. R108021 R.C.A.F.

#81040-B-52



Charles Brookes

Signature

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

m.b. **2**
AIR

A-4787

DECEASED
MEMBER'S
NAME

Thomas R.

Brookes

REGISTER NO.

(CHRISTIAN NAMES)

(SURNAME)

FILE NO.

5127

PAYEE

Receiver General of Canada,

DATE

1 May/45

ADDRESS

Director of Estates,

SERVICE NO.

R.108021

Ottawa, Ont.

FINAL RANK OR RATING

LAC

DATE OF TERMINATION OF OVERSEAS SERVICE

1 June/43

DATE OF DISCHARGE

1 June/43

A. TOTAL QUALIFYING SERVICE

NO. OF DAYS **715** EQUAL TO **23** COMPLETE PERIODS AT \$7.50
30

172.50

B. QUALIFYING OVERSEAS SERVICE

NO. OF DAYS **460** LESS **25** INELIGIBLE DAYS, EQUAL TO **435** DAYS @ 25C. PER DAY

108.75

C. SUPPLEMENT FOR OVERSEAS SERVICE

DAILY RATES AT DISCHARGE

PAY \$ **2.25**
SUBSISTENCE OR LODGING
AND PROVISION ALLOWANCE \$ **1.25**
ADDITIONAL PAY \$

DEPENDENTS' ALLOWANCE 1/30 OF \$

TOTAL \$ **3.50** X7 = \$ **24.50**

NO. OF DAYS **460** X \$ **24.50**
183

61.58

D. WAR SERVICE GRATUITY

342.83

E. DEDUCTIONS

OVERPAYMENT OF

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

OTHER DEDUCTIONS \$

F. TOTAL AMOUNT PAYABLE

342.83

G. YOUR PORTION OF GRATUITY IS—

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

TOTAL DEPENDENTS' ALLOWANCE IN ISSUE \$

= \$ *FR*

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 **WRR** CHECKED BY **TGD**

TREASURY
CHECKED BY *[Signature]* DATE **4-5-45**

[Signature]
SERVICE REPRESENTATIVE

OFFICIAL ROYAL CANADIAN AIR FORCE CASUALTY NOTIFICATION

NUMBER **R108021**

RANK **LAG**

UNIT **420 SQDN IN
TRANSIT PORTREATH TO
(OVERSEAS) RASHELMA**

TRADE **FITTER**

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

NAME **BROOKES, THOMAS ROBERT**

MARITAL STATUS **SINGLE**

RELIGION **ANGLICAN**

CANADIAN **YES**

FRENCH CANADIAN

OTHER

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

MR. CHARLES BROOKES, (FATHER)

ADDRESS

**1911 LAURIER AVE., EAST,
APT. # 3, MONTREAL, QUE.**

NAME
ADDRESS
D.A.B.

MRS. MARY BROOKES,

SAME ADDRESS

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

ADDRESS

FATHER'S NAME

ADDRESS

MR. & MRS. CHARLES BROOKES,

MOTHER'S NAME

ADDRESS

**1911 LAURIER AVE., EAST,
APT. # 3, MONTREAL, QUE.**

LIVING ON ENLISTMENT

YES

LIVING ON ENLISTMENT

YES

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

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

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

CASUALTY DETAILS:

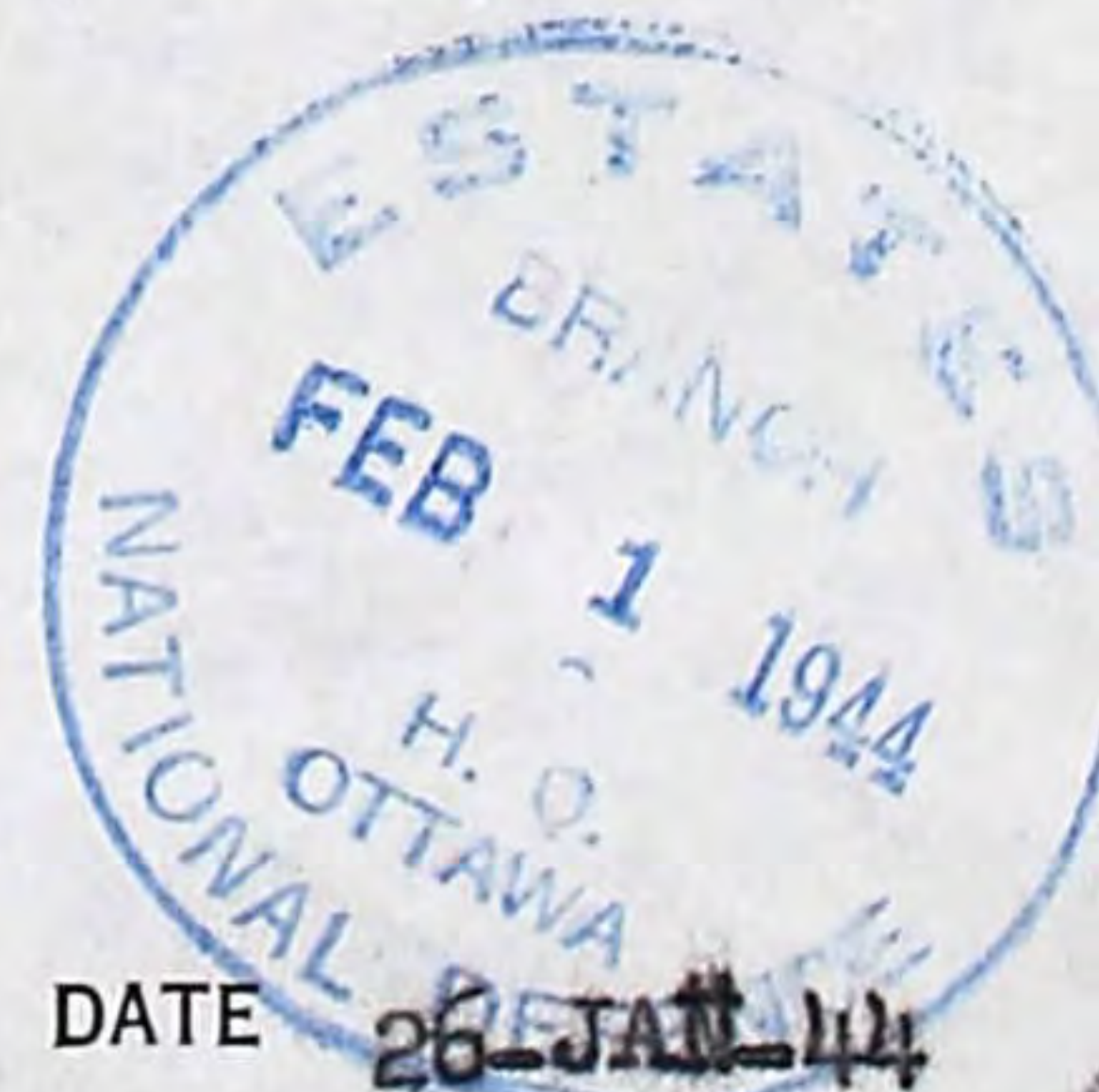
AUTHORITY CAS. SIG. NO.

AIR MIN KWY-----PCX181-----d-17-JAN-44.

NR52/19 JAN.

PREVIOUSLY REPORTED "MISSING" 1-JUNE-43 AFTER AIR OPERATIONS (OVERSEAS)

NOW "PRESUMED DEAD" 1-JUNE-43 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 **26-JAN-44**

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

A. M. Bushnell

FOR CHIEF OF THE AIR STAFF

Royal Canadian Air Force

CERTIFICATE OF PRESUMPTION OF DEATH

NO. 6785

This is to Certify that

R108021 L.A.C. BROOKES, THOMAS ROBERT R.C.A.F.
.....
(Number) (Rank) (Name in Full) (Unit)

has been officially reported as missing since the 18th day
of JUNE , 194³ , and that, full inquiries having been
made, no information has been received which would indicate that he may be still alive.
For official purposes, therefore, he is presumed to have died on or since the above
mentioned date.

Dated at Ottawa, Canada, this 26th day of JANUARY 194⁴

.....
Thomas K. McDougall
(T.K. McDougall)
Group Captain,

R.C.A.F. Records Officer.

be made out in duplicate

R.C.A.F. Special Reserve

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

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

INSTRUCTIONS.

- (a) This form is to be completed immediately an officer or other rank is appointed to, or enlisted in, the Canadian Army (AF) or R.C.A.F. ON ACTIVE SERVICE.
- (b) All questions, etc., must be completed.
- (c) Both copies of the form are to be forwarded by the Officer Commanding the unit for each officer and other rank, to the Paymaster, or Officer acting as such. The latter will transmit one copy, through the District, Command, or Camp Paymaster, to the Officer i/c Records, N.D.H.Q., Ottawa. The other copy will be retained by the Paymaster of the unit, when transferred to another unit the copy retained by the Paymaster will be sent to the Paymaster of the individual's new unit.

(1) Name of Officer or Other Rank... BROOKES THOMAS ROBERT
(Surname first—Christian names in full—Block capitals)

(2) Regimental or Official Number and Rank... R.1.0.8.0.2.1 ✓ AC2 Standard

(3) Unit... Royal Canadian Air Force

(4) Are you married?... NO

(5) If married, state,

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

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

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

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

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

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

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

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

Name..... N.A.

Postal Address..... N.A.

[SEE OTHER SIDE]



(10) Have you a common-law wife—whom you have been regularly supporting and publicly representing as your wife for at least 2 years immediately prior to appointment or enlistment?.....NO.....

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

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

If so, state name and address, occupation Charles Brookes, Checker.....

1911 Laurier Ave East, Montreal, Apt. 3

(12) If your father is a widower and is totally incapacitated from earning a living—are you his sole or partial support?.....NO.....

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

N.A.....

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

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

If so, state name and address...Mary Ann Carter (Brookes).....

1911 Laurier Ave, East, Apt. 3, Montreal, P.Q.....

(15) If your mother is a widow, are you her sole or partial support?.....NO.....

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

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

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

If so, state the following particulars:—

RelationshipN.A.....

Full NameN.A.....

Postal AddressN.A.....

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

(18) Are you insured?No.....

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

(Give number of policy)

Have you made arrangements for payment of your Insurance Premium?.....NO.....

If not, and it is a monthly premium, you may assign the amount in addition to any other assignment you wish to make, provided the total assignment is not in excess of the maximum monthly amount which may be assigned.

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

C. Brookes
(Signature of officer or man)

Date June 17th 1941

for Officer Commanding.....

Date June 17th 1941 R.C.A.F. Recruiting Centre, Montreal, P.Q.

N.B. If parent(s) of the officer or other rank concerned has (have) been replaced by foster parent(s), questions relating to fathers and/or mothers above should be altered and answered as applicable.

WILL

R.C.A.F. r.60

(1) I.....BROOKES...Thomas..Robert.....of the
 (City
 (Town
 (Village
 (Township
 County
 of.....Montreal.....in the District of.....
 Province of.....Quebec.....Machinist
 (Civil Occupation)

a member of the Royal Canadian Air Force, Number..R.108024..... Do hereby
 revoke all former Wills made by me and declare this to be my Last Will.

(2) I give, Devise and bequeath unto:-

My Father Mr Charles Brookes
 of 1911 Laurier Ave E Apts 3
 Montreal
 Que

my whole estate

(3) I Give, Devise and Bequeath all the rest and residue of my Estate, both real
 and personal, of whatsoever kind and wheresoever situated unto:-

(4) I appoint...My...Father... Mr Charles Brookes of the above address.....
 (Name) (Address)
 Executor
, to be the Executor of this my Last Will

IN WITNESS WHEREOF I have hereunto set my hand this18th...day of
June.....19.....41..

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 out)
 names as witnesses.)

Charles Brookes

(Signature of Testator)

(5) Signature.....W H Ayman.....
 AddressNo. 1 Manning Depot. R.C.A.F. Toronto......
 Occupation.....Clerk.....
 Signature[Signature].....
 AddressNo. 1 Manning Depot. R.C.A.F. Toronto......
 Occupation.....Clerk.....
 Occupation.....Clerk.....

R.C.A.F Records Office
 Rec'd JUN 25 1941
 O. K.....C.I.B.....
 R. C. W.C......N. I.....
 S. L.....P. A.....

ADDRESS REPLY TO:
The Secretary,
Department of National Defence for Air,
OTTAWA, Canada.

1040-B-52 (R.O.4)

OTTAWA, Canada, 31st December, 1943.

Mr. Charles Brookes,
1911 Laurier Ave., East,
Apartment 3,
Montreal, Quebec.

Dear Mr. Brookes:

I wish to acknowledge your letter of
December 23rd concerning your son, Leading Aircraftman
Thomas Robert Brookes.

I regret that I can give you no hope
that the personnel who parachuted to safety and were
interned in Portugal are the seven members of the crew
of your son's aircraft as Neutral Governments inform
these Headquarters of all Royal Canadian Air Force per-
sonnel who are interned by their respective Governments.

Owing to the length of time and lack of
information since your son was reported missing there
would appear to be nothing on which to base a hope that
he is still alive.

May I again offer you and the members of
your family my deepest sympathy.

Yours sincerely,

MPG
(W.R. Gunn)
Squadron Leader,
R.C.A.F. Casualties Officer,
for Chief of the Air Staff.

/BU

gm
December 23rd, 1943.

The Secretary,
Department of National Defence for Air,
Ottawa, Ontario.

*Answer to
Kinagore #70*
25 PM 26
Your Ref: 1040-B-52 (R.O.4)
re Lac. Thomas Robert Brookes.

Dear Sir:

This will acknowledge receipt of your letter of the 8th inst. concerning my son, Lac. T. R. Brookes who was reported missing by you on the 4th June 1943 while on a transit flight to North Africa.

From reports received by me to date I understand that my son together with six other members of the crew departed on June 1st for Raselma, Algeria, in a RCAF bomber which failed to arrive at its destination.

At the time of writing I regret to advise you that I have not received any further definite information regarding him.

However, I think it would be adviseable to bring the following matter to your attention in the hope that possibly you might be in a position to ascertain whether it has any bearing on the disappearance of my son and the six other members of the crew, whose names are listed hereunder:

F/O G.H. Hubbell.
P/O W.R. King.
P/O R.S. Hollowell.
Flight Sergeant H.L. Davis.
Sergeant A.T. Sodero.
Corporal J.F. MacKenzie.

The following is a report contained in a Canadian newspaper which bears the dateline - Associated Press, Lisbon, Portugal, June 5th, 1943.

" Seven unidentified Canadian airmen who parachuted yesterday from their crippled bomber over the Bay of Biscay said today that their bomber was attacked by enemy planes which apparently were continuing patrols in force in that area.

Two of the Canadians were wounded in the legs and another was wounded in the body by shell splinters. Four of the airmen parachuted to safety near Cortegaca and three landed at Esmoriz, Northern Portugal.

Unconfirmed reports said it was believed the bomber crashed into the sea."

I communicated with the Associated Press, General Office, Rockefeller Plaza, New York City, who informed me that no further details but those contained in the report were received by them.

P.T.O.

Although I can readily understand that this report may be purely coincidental I do not feel that I can afford to leave anything unturned in an endeavour to establish their whereabouts.

I realize full well that my request for you to thoroughly investigate this report may be considered unusual and will entail a great deal of work but please rest assured that any results which you may obtain will be received with my sincere gratitude.

In writing to you in this manner I write not only for myself and family but for the families of the other members of the missing crew with whom I have been in communication.

Any expenses which may be incurred by you in connection with cables etc. will be gladly reimbursed by me.

Thanking you in anticipation for your attention to this matter and awaiting receipt of your reply,

I am,

Yours sincerely,

Charles Brookes.

Charles Brookes,
1911 Laurier Avenue East, Apt. 3,
Montreal, Quebec.

ADDRESS REPLY TO:

1040-B-52 (R.O.4)

The Secretary,
Department of National Defence for Air,
OTTAWA, Canada.

OTTAWA, Canada 10th June 1943.

✓
Mr. Charles Brookes,
1911 Laurier Ave., East,
Apartment 3,
Montreal, Quebec.

Dear Mr. Brookes:

It is my painful duty to confirm the telegram recently received by you which informed you that your son, Leading Aircraftman Thomas Robert Brookes, is reported missing on Active Service.

Advice has been received from the Royal Canadian Air Force Casualties Officer, Overseas, that your son was a member of the crew of an aircraft which failed to arrive at its base after air operations, while in transit from Portreath to Raselma, Algeria. The aircraft took off from Portreath at 4:21 A.M. on June 1st, 1943. There were five other members of the Royal Canadian Air Force in the crew and they also have been reported missing. Since you may wish to know their names and next-of-kin we are listing them below:

Flying Officer G.H. Hubbell
Mrs. G.H. Hubbell (wife)
157 Fischer Street,
Waterloo, Ontario.

Pilot Officer W.R. King,
Mr. William King (father)
226 Victoria Street,
Kingston, Ontario.

Pilot Officer R.S. Hollowell
Mr. Thomas Hollowell (father)
Wolseley, Saskatchewan.

Flight Sergeant H.L. Davis,
Mr. H.L. Davis (father)
Acme, Alberta.

... 2 ...

... 2 ...

Sergeant A.T. Sodero
Mr. Philip Sodero (father)
23 South Bentinck Street,
Sydney, N.S.

Corporal J.F. MacKenzie
Mrs. J.F. MacKenzie, (wife)
Sedgewick, Alberta.

This does not necessarily mean that your son has been killed or wounded. He may have landed in enemy territory and might be a Prisoner of War. Enquiries have been made through the International Red Cross Society and all other appropriate sources and you may be assured that any further information received will be communicated to you immediately.

Your son's name will not appear on the official casualty list for five weeks. You may, however, release to the Press or Radio the fact that he is reported missing but not disclosing the date, place, or his unit.

May I join with you and Mrs. Brookes in the hope that better news will be forthcoming in the near future.

Yours sincerely,

(W.R. Gunn)
Flight Lieutenant,
R.C.A.F. Casualties Officer,
for Chief of the Air Staff.

J.F.
~~Handwritten signature~~

AFM
gu

Handwritten initials

AIR FORCE No. *R10802*

SURNAME *Brookes, Thomas Robert*

FULL CHRISTIAN NAME

ENLISTMENT/APPOINTMENT

PLACE *Montreal, Que.*

DATE *19-6-41*

RELIGION *C of E*

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

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

BIRTH DATE				PLACE		COUNTRY		CITIZENSHIP		RACIAL ORIGIN		PARTICULARS OF FAMILY																				
<i>19-3-1920</i>				<i>Montreal, Que.</i>		<i>Canada</i>		<i>British</i>				SINGLE, MARRIED, WIDOWER, DIVORCED <i>Single</i>																				
CIVIL EDUCATION												WIFE (FULL MAIDEN NAME) OR HUSBAND																				
PUBLIC SCHOOL				JUNIOR MATRICULATION <i>High School</i>		PRESENT ADDRESS (IN PENCIL)		PLACE OF MARRIAGE		DATE		AUTHORITY (IF AFTER APPOINTMENT/ENLISTMENT)																				
HIGH SCHOOL ENTRANCE <input checked="" type="checkbox"/>				SENIOR MATRICULATION																												
TECHNICAL SCHOOL				UNIVERSITY																												
CORR./BUSINESS COURSES				LANGUAGES SPOKEN <i>French</i>																												
CIVIL OCCUPATIONS AND EXPERIENCE												CHILDREN																				
<i>2700</i>												NAMES		PLACE AND DATE OF BIRTH		NAMES		PLACE AND DATE OF BIRTH														
<i>Machinist 3 yrs.</i>																																
PREVIOUS SERVICE												NAME(S), ADDRESS(ES), RELATIONSHIP OF PERSON(S) TO BE INFORMED OF CASUALTIES (IN PENCIL)																				
<i>Nil</i>												<i>C. Harold Brooks, Father, 1911 Laurier Ave. East Apt 3 Montreal P.Q. J. Hylands 5702 13 Ave. B. Montreal P.Q.</i>																				
EMPLOYMENT AS INSTRUCTOR, OFFICER, AIRMAN/AIRWOMAN																																
PLACE AND DATE OF MEDICAL				CATEGORY		PLACE AND DATE OF MEDICAL				CATEGORY		TYPE		FROM		TO		TYPE		FROM		TO										
<i>17-6-41</i>				<i>A.4.B.</i>																												
OFFICERS												AIRMEN AND AIRWOMEN				OFFICERS, AIRMEN/AIRWOMEN																
RANK, BRANCH AND CATEGORY			DATE		AUTH.		DUTIES PERFORMED DURING SERVICE, E.G. ADJ.				RANK		DATE		AUTH.		TRADE		DATE		AUTH.		COURSE OR TRADE		GRP.		%		PF		DATE	
											<i>U62</i>		<i>17 6 41</i>		<i>100144</i>		<i>A2M (272)</i>				<i>17 6 41</i>		<i>100144</i>		<i>Examined</i>		<i>61.3</i>		<i>28/8/42</i>		<i>1/1/42</i>	
											<i>A4</i>		<i>15 11 41</i>		<i>TT5 276</i>		<i>A2M, b</i>				<i>15 11 41</i>		<i>TT5 274</i>									
											<i>- SAC</i>		<i>1 4 42</i>				<i>Record purpose only A2M (272R) 630 1 4 41 TT5 305</i>															
																	<i>A2M B</i>				<i>1 4 42</i>		<i>882388</i>									
																	<i>A2M a</i>				<i>1 7 42</i>		<i>882388</i>									
																	<i>2M a 224 1</i>				<i>1 9 42</i>		<i>88260</i>									
COURTS-MARTIAL ATTENDED WITH DATES (STATE IF UNDER INSTRUCTION OR AS MEMBER)																																

ADVISE ENTRIES
UNIT RECORDS RETURNED
TO CANADA

AIR FORCE No.

RI08021

BROOKES, THOMAS ROBERT

SURNAME FULL CHRISTIAN NAMES

ENLISTMENT

RE-ENLISTMENT

C.R. FILE NUMBER

PLACE *Montreal P-2*
DATE *17-6-1941*

RECORD OF SERVICE AIRMEN

13

R.C.A.F. FORM R44(B)
SOM-3-41 (9782)
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	1MD Toronto	17 6 41	1MD144
SOS	1MD Toronto	11 7 41	1MD163
TOS	115 St Thomas	12 7 41	775165
TOS	111 St Thomas	29 12 41	115307
TOS	4RD Soudan NB	30 12 41	4RD1
TOS	4RD Soudan NB	12 2 42	4RD36
TOS	20 174 Dip Halifax NB	13 2 42	17958
SOS	174 Dept RCAF Halifax NB	27 2 42	17975V
TOS	3 PRC	10 3 42	RAF13
TOS	3PRC to 3 SFTT	21 4 42	RAF23,25
SOS	3 S. of 11. to 420 Sqd	9 9 42	RAF606

2. RECLASS'NS-PROMOTIONS-ETC.

RANK	EFFECTIVE	D.R.O.
A.C. 2.	17 6 41	1MD144
AC1	15 11 41	TR8276
LAL	1 9 42	RAF784

4. TRADE AND CHARACTER

TRADE	GROUP	EFFECTIVE	D.R.O.
A.F.M.(M)	S	17 6 41	1MD144
A.F.M.	C	15 11 41	TR8276
A.F.M.(M)	C	20 12 41	RAF305
509C			RAF784
A.F.M.	B	1 4 42	RAF238B
A.F.M.	A	1 7 42	RAF238B
7ma 71a	1	1 9 42	RAF60

6. LEAVE

FROM	TO	DAYS	REMARKS	D.R.O.
14-2-42	28-2-42	14	(cancelled)	49030
12-2-42	26-2-42	14	embarkation	49037

Completed NOV 23 1944
K.L. Co. Camp
RAF
Pend NRE458

3. MEDICAL HISTORY

EXAMINATIONS (IN RED INK)			
DATE	FORM	CATEGORY	REMARKS
17-6-41	R.100	A.4.B.	

Mxising, 1/6/43
PCX 8392 2/6/43
6-42
Pres. Dead PCX 281 17-1-44

5. COURSES-TESTS-ETC.

SUBJECT	RESULT	DATE	AUTHORITY
Examined	61.3	25/9/42	RAF60

1 R.C.A.F. ENLISTMENT
 2 OVERSEAS
 3 MARRIAGE STATUS
 4 MARRIAGE STATUS
 5 MARRIAGE STATUS
 6 PRESENT
 7 MARRIAGE STATUS
 8 MARRIAGE STATUS
 9 HIGH & TECH. SCHOOL EDUCATION
 10 SCHOOL EDUCATION
 11 SCHOOL EDUCATION
 12 SCHOOL EDUCATION
 13 SCHOOL EDUCATION
 14 SCHOOL EDUCATION
 15 SCHOOL EDUCATION
 16 OFF. BAR
 17 OFF. BAR
 18 OFF. BAR
 19 PRES. R.C. HEB.
 20 RELIGION
 21 RELIGION
 22 RELIGION
 23 MIS. OTHER SERV.
 24 MIS. OTHER SERV.
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 98 MIS. OTHER SERV.
 99 MIS. OTHER SERV.
 100 MIS. OTHER SERV.

AIR FORCE No. **RI08021**

BROOKES, THOMAS ROBERT
SURNAME FULL CHRISTIAN NAMES

ENLISTMENT PLACE **Montreal P. 2** RE-ENLISTMENT DATE **19-6-1941**

C.R. FILE NUMBER

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

RECORD OF SERVICE AIRMEN

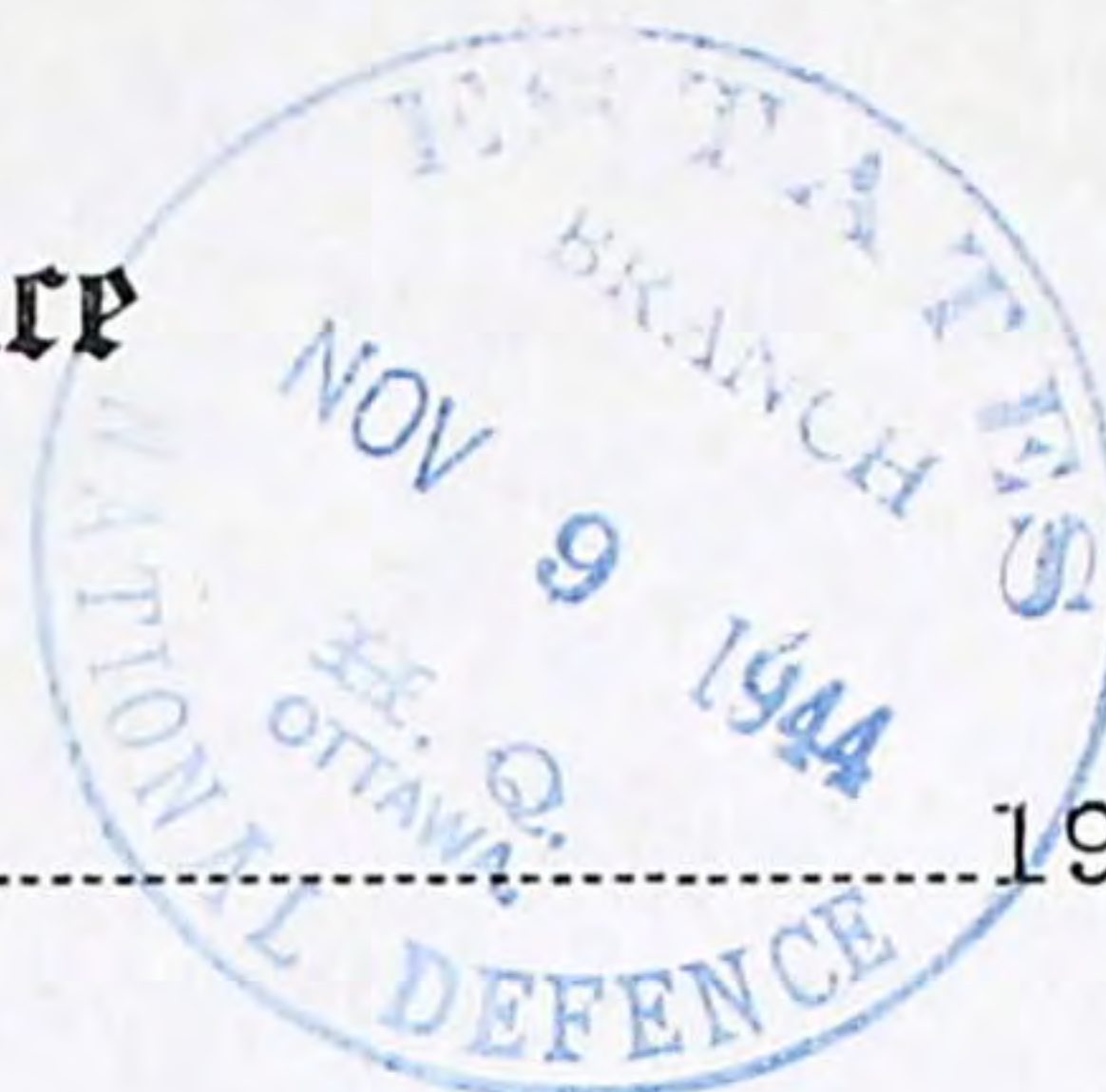
<p>7. BIRTH: DATE 19-3-1920 PLACE Montreal P. 2 CITIZENSHIP British</p> <p>FATHER (FULL NAME) Charles Brookes</p> <p>BIRTHPLACE Birmingham, England</p> <p>MOTHER (FULL MAIDEN NAME) Mary Ann Carter</p> <p>BIRTHPLACE England</p>			<p>16. SINGLE-MARRIED-WIDOWER-SEPARATED-DIVORCED: Single</p> <p>WIFE (FULL MAIDEN NAME)</p> <p>PLACE OF MARRIAGE DATE</p> <p>AUTHORITY (IF AFTER ENLISTMENT)</p>			<p>21. ENGAGEMENTS</p> <table border="1"> <thead> <tr> <th>TERM</th> <th>EFFECTIVE</th> <th>D.R.O.</th> <th>TERM</th> <th>EFFECTIVE</th> <th>D.R.O.</th> </tr> </thead> <tbody> <tr> <td>Duration</td> <td>17 6 41</td> <td></td> <td></td> <td></td> <td></td> </tr> </tbody> </table>			TERM	EFFECTIVE	D.R.O.	TERM	EFFECTIVE	D.R.O.	Duration	17 6 41																												
TERM	EFFECTIVE	D.R.O.	TERM	EFFECTIVE	D.R.O.																																							
Duration	17 6 41																																											
<p>8. EDUCATIONAL STANDING</p> <p>HIGH SCHOOL ENTRANCE X P. 2</p> <p>JUNIOR MATRICULATION 1 year High School P. 2</p> <p>SENIOR MATRICULATION</p> <p>TECHNICAL SCHOOL</p> <p>UNIVERSITY</p> <p>CORRESPONDENCE COURSES</p>			<p>17. MARRIED ESTABLISHMENT</p> <table border="1"> <thead> <tr> <th>REMARKS</th> <th>RANK</th> <th>EFFECTIVE</th> <th>D.R.O.</th> </tr> </thead> <tbody> <tr> <td></td> <td></td> <td></td> <td></td> </tr> </tbody> </table>			REMARKS	RANK	EFFECTIVE	D.R.O.					<p>22. TEMPORARY DUTY AND MISCELLANEOUS ENTRIES</p> <table border="1"> <thead> <tr> <th>FROM</th> <th>TO</th> <th>DATE</th> <th>D.R.O.</th> </tr> </thead> <tbody> <tr> <td>Rep. Public Department & rotation</td> <td></td> <td>18-6-41</td> <td>140144</td> </tr> <tr> <td>Occup. Govt. Dept. & rotation</td> <td></td> <td>11-7-41</td> <td>775165</td> </tr> <tr> <td>Occ. Govt. Dept. - rotation in kind</td> <td></td> <td>1-1-42</td> <td>4RD1</td> </tr> <tr> <td>Issued lpl leave to C. 73505</td> <td></td> <td>10-2-42</td> <td>4RD36</td> </tr> <tr> <td>Ceases occ. gov't dept. - rotation in kind</td> <td></td> <td>11-2-42</td> <td>4RD36</td> </tr> <tr> <td>Occ. pub. Dept. & rotation</td> <td></td> <td>26-2-42</td> <td>17958</td> </tr> </tbody> </table>			FROM	TO	DATE	D.R.O.	Rep. Public Department & rotation		18-6-41	140144	Occup. Govt. Dept. & rotation		11-7-41	775165	Occ. Govt. Dept. - rotation in kind		1-1-42	4RD1	Issued lpl leave to C. 73505		10-2-42	4RD36	Ceases occ. gov't dept. - rotation in kind		11-2-42	4RD36	Occ. pub. Dept. & rotation		26-2-42	17958
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Occ. pub. Dept. & rotation		26-2-42	17958																																									
<p>9. CIVIL OCCUPATIONS OR EXPERIENCE USEFUL TO R.C.A.F.</p> <p>Machinist, Dominion Glass Co. Montreal P. 2 - 5 years. 2700</p>			<p>18. CHILDREN</p> <table border="1"> <thead> <tr> <th>CHRISTIAN NAMES</th> <th>BIRTH DATE</th> <th>D.R.O.</th> <th>CHRISTIAN NAMES</th> <th>BIRTH DATE</th> <th>D.R.O.</th> </tr> </thead> <tbody> <tr> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> </tr> </tbody> </table>			CHRISTIAN NAMES	BIRTH DATE	D.R.O.	CHRISTIAN NAMES	BIRTH DATE	D.R.O.																																	
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<p>10. PREVIOUS ARMY, NAVY OR AIR FORCE SERVICE</p> <p>Nil</p>			<p>19. NEXT OF KIN (ADDRESS AND D.R.O. IN PENCIL)</p> <p>FULL NAME: Charles Brookes RELATIONSHIP Father</p> <p>ADDRESS: 1911, Laurier Ave. E. Apt. 3, Montreal P. 2 D.R.O. 11-15</p> <p>FULL NAME: A. Hylander RELATIONSHIP</p> <p>ADDRESS: 5902 13th Ave. Rosemount, Montreal D.R.O. 11-15</p>																																									
<p>11. HONOURS-AWARDS, MENTIONS</p> <table border="1"> <thead> <tr> <th>AUTHORITY</th> <th>DATE</th> </tr> </thead> <tbody> <tr> <td></td> <td></td> </tr> </tbody> </table>			AUTHORITY	DATE			<p>20. PAY ENTRIES (OFFENCE FORFEITURES, STOPPAGES IN RED INK)</p> <table border="1"> <thead> <tr> <th>RATE CHANGES ETC.</th> <th>EFFECTIVE</th> <th>D.R.O.</th> <th>RATE CHANGES ETC.</th> <th>EFFECTIVE</th> <th>D.R.O.</th> </tr> </thead> <tbody> <tr> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> </tr> </tbody> </table>			RATE CHANGES ETC.	EFFECTIVE	D.R.O.	RATE CHANGES ETC.	EFFECTIVE	D.R.O.																													
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<p>12. FLYING EXPERIENCE ON ENLISTMENT (HOURS)</p> <p>SOLO _____ DUAL _____ PASSENGER _____</p>			<p>22.(A) ADDRESS PRIOR TO ENLISTMENT</p> <p>1911, Laurier Ave. East. Apt. 3. Montreal P. 2.</p>																																									
<p>13. RELIGION Church of England</p>			<p>23. DOCUMENT CONTROL (INDICATE RECEIPT BY DATE)</p> <table border="1"> <thead> <tr> <th>R60</th> <th>R79</th> <th>B465</th> <th>X-RAY</th> <th>AFM-13</th> <th>IDN. CARD</th> </tr> </thead> <tbody> <tr> <td>25-6-41</td> <td>75-1-42</td> <td></td> <td></td> <td></td> <td>ONE K-X R.M.</td> </tr> </tbody> </table>			R60	R79	B465	X-RAY	AFM-13	IDN. CARD	25-6-41	75-1-42				ONE K-X R.M.																											
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25-6-41	75-1-42				ONE K-X R.M.																																							
<p>14. LANGUAGES English and French</p>																																												
<p>15. SPORTS Swimming, skiing, tennis</p>																																												

Department of National Defence

Ottawa, Canada

ESTATES BRANCH

Date 194.....



Received this date from the Treasury Branch cheque for the sum of

..... One Hundred and Eighty-Six $\frac{05}{100}$ Dollars (\$186.05.....)

being in connection with my deceased son's Service estate.....

BROOKES, Thomas Robert, LAC (Deceased)
No. R.108021, R. C. A. F.

Charles Brookes
.....
Signature

R 108021 AC 2

BROOKES, Thomas Robert

R.C.A.F. Special Reserve

APPENDIX "A"
Bulletin No. 150

ROYAL CANADIAN AIR FORCE

ENLISTMENT AGREEMENT

TRADESMEN

1. In the event of my being accepted for enlistment in the Royal Canadian Air Force, I hereby acknowledge that I have read, understand and agree to the following conditions of service:

- (a) That I may be called upon to perform duties not directly or indirectly connected with the trade in which I have applied, i.e.....~~Aircraft Mechanic~~ **Metal Standard** until such time as the R.C.A.F. is in a position to employ or train me in said trade.
- (b) That I will be required to pass the prescribed examinations and tests before an R.C.A.F. Trade Test Board before I will become eligible for remustering to a higher trade group.
- (c) That in the event of my being found unsuitable by R.C.A.F. authorities for employment or training in the above mentioned trade, I am liable to be re-mustered to another trade or Standard General Duties.

2. I have carefully read this agreement, and fully understand it to be in addition to the declaration in the Attestation Paper that it will be necessary for me to sign if I should be attested.

John Lee
(Witness)

Thomas Robert Brookes
(Signature of Applicant)

R.C.A.F. Records Office

Recd JUN 20 1941

Montreal (Place) P. O. lib

O. K. G.I.B.

R. C. R.M.I.

S. I. P. A. M.

June 17th, 1941
(Date)

A.F.M. 23 (A)
2-4-41

ROYAL CANADIAN AIR FORCE

RECORD OF CHARACTER, TRADE PROFICIENCY AND PROMOTION
OF

No. R103021 Rank AC1 Name Brookes, T.R.

- 1. Date of enlistment 17-6-41
- 2. Trade classification A.F.M. (MR) "C"
- 3. Married or single Single
- 4. Assessment of character Very good.
(Vide Para. 415 K.R. and O for R.C.A.F.)
- 5. Assessment of trade proficiency Good SAT.
(Vide Para. 416 K.R. and O for R.C.A.F.)

6. Outstanding features of an airman's work in his trade:— <u>nil</u>	7. Specializes in his trade in:— <u>nil</u>	8. Promotion:— (a) Accelerated (b) Ordinary (c) Retard Remarks: <u>Here approximately (2) months. — very quiet steady and conscientious.</u>
--	--	--

9. Capabilities other than trade classification:— <u>Machinist 5 years</u>	10. Outstanding in:— <u>nil</u>	11. Recommendations:—
---	------------------------------------	-----------------------

12. _____

13. Initials of airman reported on _____
 (Signature) [Signature] C.O.

14. Date 3-2-42
 (Appointment) Wing Commander

Initials of Flight Commander or other person who originated the Document. [Signature]
No. 4 Repair Depot, Scoudouc, N.B.
 (Unit)

R.C.A.F. Records Office [OVER]
 Rec'd APR 18 1942
 O.K. _____
 R.C. HQ. _____
 S.L. _____

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

No. Rank Name

1. Date of remustering as pilot.....

2. Ability in flying duties.....

(To be assessed in accordance with Administrative Order A.51/1)

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

(i) As pilot.....

(ii) Dual instructor.....

(iii) As passenger.....

4. Total number of hours flown to date:

(i) As pilot.....

(ii) Dual instructor.....

(iii) As passenger.....

5. Types of aircraft on which proficient:

.....
.....
.....

6. Flying instructor..... Category

7. Whether recommended for flying instructor's course.....

8. Whether recommended for any special employment.....

9. Courses undertaken.....

.....
.....

10. Type of work carried out as pilot during year.....

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

12. Remarks by Commanding Officer.....
.....
.....

Date (Signature) C.O.

13. Initials of Flt. Comdr. or other person who originated the document..... (Appointment)

..... (Unit)

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

DOMINION BUREAU OF STATISTICS—QUEBEC DEATH TRANSCRIPT

Do not
write in
this space

1. PLACE OF DEATH	Municipal county	OVERSEAS		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	BROOKES														
	Given names	THOMAS ROBERT <i>(Block letters)</i>														
4. RESIDENCE	Street	Laurier Avenue East, Apt. 3														
	Official name of civil municipality or township	Montreal														
	Municipal county	Québec														
5. SEX	6. NATIONALITY (Citizenship)	7. RACIAL ORIGIN	8. Single, Married, Widowed or Divorced <i>(Write the word)</i>													
Male	Canadian	English	Single													
9. If married give name of wife or husband of deceased																
10. BIRTHPLACE (Province or Country) Quebec																
11. DATE OF BIRTH March 19th 1920 (Month) (Day) (Year)																
12. AGE OF DECEASED 23 Years Months Days If less than one day oldhrs. or.....min.																
OCCUPATION	13. Trade, profession or kind of work, as spinner, teamster, office clerk, etc. Fitter															
	14. Kind of industry or business, as cotton-mill, lumbering, bank, etc. R.C.A.F.															
	15. Date deceased last worked at this occupation June 1/43															
16. Total years spent in this occupation Two																
17. NAME																
18. BIRTHPLACE (Province or Country)																
FATHER Brookes, Charles England																
MOTHER (Maiden Name) Carter, Mary Ann England																
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)															
22. Date of death..... June 1st 43 (Month) (Day) (Year)																
23. I HEREBY CERTIFY that I attended deceased from19..... to.....19..... and last saw h.....alive on.....19.....																
24. CAUSE OF DEATH previously reported missing after air operations, now for official purposes, presumed dead.																
I Immediate cause Give disease, injury or complication which caused death, not the mode of dying, such as heart failure, asphyxia, asthenia, etc. Morbid conditions, if any, giving rise to immediate cause (stated in order proceeding backwards from immediate cause). 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 June 1st 43 Accident, suicide or homicide.....Date.....19..... Presumed killed during air operations Manner of injury..... (How sustained) Nature of injury..... Specify whether injury occurred in public place industry, in home, or in 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)																
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)																
This signature authorizes the collector to accept this form as authentic.																

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

2 m.h.
4
AIR
A-4787

DECEASED
MEMBER'S
NAME

Thomas R.

Brookes

(CHRISTIAN NAMES)

(SURNAME)

REGISTER NO.

5127

FILE NO.

1 May/45

PAYEE

Receiver General of Canada,

DATE

R.108021

ADDRESS

**Director of Estates,
Ottawa, Ont.**

SERVICE NO.

LAC

FINAL RANK OR RATING

1 June/43

DATE OF TERMINATION OF OVERSEAS SERVICE

1 June/43

DATE OF DISCHARGE

A. TOTAL QUALIFYING SERVICE

NO. OF DAYS **715** EQUAL TO **23** COMPLETE PERIODS AT \$7.50
30

172.50

B. QUALIFYING OVERSEAS SERVICE

NO. OF DAYS **460** LESS **25** INELIGIBLE DAYS, EQUAL TO **435** DAYS @ 25C. PER DAY

108.75

C. SUPPLEMENT FOR OVERSEAS SERVICE

DAILY RATES AT DISCHARGE

PAY \$ **2.25**
SUBSISTENCE OR LODGING
AND PROVISION ALLOWANCE \$ **1.25**
ADDITIONAL PAY \$

DEPENDENTS' ALLOWANCE 1/30 OF \$

TOTAL \$ **3.50** X7 = \$ **24.50**
NO. OF DAYS **460** X \$ **24.50**
183

61.58

D. WAR SERVICE GRATUITY

542.83

E. DEDUCTIONS

OVERPAYMENT OF

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

OTHER DEDUCTIONS \$

F. TOTAL AMOUNT PAYABLE

542.83

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 **WRR** CHECKED BY **TGD**

TREASURY
CHECKED BY *[Signature]* DATE **4-5-45**

[Signature]
SERVICE REPRESENTATIVE

Treasury Office.
Air Force Services
OTTAWA, - CANADA.

Rec'd. **MAY 4** 1945

P. & A. SECTION

Airframe Mechanic Metal Standard **B.C.A.T.P. CANA**

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

RECORD OF SERVICE AIRMEN

R. 108021

Brookes

Thomas Robert

Church of England

A.F. No.

Surname

Christian Names

Religion

Born 19/3/20

Place Montreal Que Country Canada

Citizen of Canada

Racial Origin British

ENLISTMENT

CIVIL EDUCATION

PREVIOUS SERVICE

Date 17/6/41

High School Entrance

Jr. Mat.

Sr. Mat.

None

At Montreal Que

Technical School 1 yr.

Corres. Courses

Term Duration of War.

University

CIVIL OCCUPATIONS AND EXPERIENCE

Machinist 1936-41 (5 years)

COURSES AND TRADE TESTS

Trade	Grp.	%	PorF	Date Rem.	Trade	Grp.	%	PorF	Date Rem.
AFM(M)	S	-	P	12 2 41	AFM	B	60	138	1 4 42
AFM(M)	C	-	P	15 11 41	AFM	A	do	do	1 7 42
AFM	C	-	P	20 12 41	AFM	B	60	238	1 7 42
AFM	A	-	P	1 9 42					

PARTICULARS OF FAMILY

Wife

Maiden Name

Present Address (in pencil)

Children

Names

Date of Birth

Place of Birth

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

Mr. Charles Brookes (Father)

1911 Laurier ave E. apt 3 Montreal Que.

LEAVE

CHARACTER AND TRADE ASSM. HONOURS, AWARDS AND MENTIONS

FROM	TO	AUTH. AND DESCRIPTION	DATE	CHARACTER	TRADE AND ASSM.	HONOURS AND AWARDS	SIGNATURE
14-2-42	28-2-42	PRO. 37 ANNUAL LEAVE (14 DAYS)					
12-2-42	26-2-42	PRO. 37 EMBARKATION LEAVE					

MOVEMENTS AND CASUALTIES

AUTHORITY	UNIT FROM	UNIT TO	DATE	AUTHORITY	UNIT FROM	UNIT TO	DATE
MO. R13	RIC Mtl	#1 MD		37/42 (8/23) 198/42 (1/25)	3PRC	350 T	21.4.42
	Que	Toronto	17/6/41	198/42 (17/60)	3 S.I.T.T	420 S.I.T.T	9.9.42
			14/4/41				1.6.43
PRO. 163/41	#1 MD	T.T.S.					Missing 1.6.43 CR. 327
	Toronto	St. Thomas	11/7/41				
PRO. 307/41	T.T.S.	#4 R.U.					
	ST. THOMAS	SCOU DOUC	29-12-41				
DRO1	"	"	30-12-42				
DRO. 36/42	#4 R.U.	NO. 14 DEPOT	12-2-42				
	SCOU DOUC	H.F.L.I.F.A.X.					
DRO. 36 ISSUED SP. LEAVE	T/W. C. 73505		10-2-42				
PRO. 92	14 Depot	RA 7TP	27.2.42				
		Emb Cas	28.2.42				
			(OVER)				
			76/42. 3PRC				10-3-42.

3 S.P.T.T. 198/42 (170) Examined at Blackpool
on 28.8.42 to 1-9.42 &
7. returned 61.3/0.

Missing 1-6-43
420 sqn C.R.# 327.

Finger Printed
Date 17-6-41
Initials E.P.

