R108379
□"ANDERSON "
JAMES WARD

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R0108379 ANDERSON JAMES W — LAC6

1 NUMBER — 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	GEN. SERVICE MEDAL	C.V.S.M.	
									1	1	

	-AWARD
	AWARD AND CLASP
	APPLICATION DISPATCHED
3476	RIBBON ISSUED
3480	MEDAL ISSUED

PREFIX — NUMBER — NAME — RANK — CODE

IBM 83961

LICENSED FOR USE UNDER CANADIAN PATENT NUMBER 315306

Ward Anderson (Father)
3575 Jeanne Mance St.,
Montreal,
Que.

mar.-42.

MEM[illegible] BAR
DATE DES[illegible]
REGN. NO 3364

28/10/49
8609

10M—3-40 (4425)
H.Q. 1772-45-8

MINISTERIAL CARD ROYAL MESSAGE MEMORIAL CROSS

H.Q. FILE NO. 1022-A-1108
3

NAME ANDERSON James Ward

REGT'L NO. R108379

RANK ~~P.O.~~ L.A.C. UNIT Canada

CABLE NO.	CABLE DATE	NATURE OF CASUALTY	IS WIFE LIVING?	CAS. LIST NO.	CAS. LIST DATE
	DATE OF DEATH 16-11-41	IS MOTHER LIVING? NO	NA		
	MINISTERIAL CARD SENT: 25-11-41	ROYAL MESSAGE SENT: 8-1-42	MEMORIAL CROSS SENT:		
F.				N.A.	
	To the father	To the father.			

To Dept. of Ex. Affairs 5-2-42

Father: ~~Mr.~~ Ward
Mrs. J. Anderson,
3575 Jeanne Mance Street,
Montreal, Quebec,

CABLE		NATURE OF CASUALTY	CAS. LIST	
NO.	DATE		NO.	DATE

R.C.A.F. Special Re[illegible]

AIR FORCE NO. R108379 POSTED TO # 4 A.M.D. St. Hubert P.Q. TRADE Pilot or Observer Standard

ROYAL CANADIAN AIR FORCE

(ATTESTATION PAPER)

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

ANDERSON JAMES WARD

1. Surname Anderson Full Christian Names James Ward
2. Present Address 3575 Jeanne e Mance St, Montreal, Que Telephone Ha. 6590.
3. Permanent Address 3575 Jeanne e Mance St. e Montreal, Que.
4. Place of Birth Fraser's Point, Dundee, Que Citizenship Canadian
5. Date of Birth e Mar 5, 1923 Married, Single, ~~Widower~~, ~~Separated~~, ~~Divorced~~ Single
6. Particulars of Children

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

7. Occupation Student 8. Religion Presbyterian
9. Languages English, French (moderately) (State proficiency) (State denomination)
10. Next of Kin (Full Name) Ward e Anderson Relationship Father
" Address 3575 Jeanne e Mance St. Montreal, Que.
11. Father (Full Name) Ward e Anderson Birthplace e Anderson Corners Que,
" Address 3575 Jeanne e Mance St, Montreal, Que. Citizenship Canadian.
" Occupation Tailor
12. Mother (Full Maiden Name) Margaret Wilhelmina McCartney Birthplace Ormstown, Que.
" Address Deceased Citizenship Canadian
13. Details of any Naval, Military or Air Force Service:

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

R.C.A.F. Records Office
Rec'd JUL 4 1941
O. K. W. C.I.B.
R.C.A.M. N.I.
S.L. P.A.

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

46 — 2/5

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

21. Particulars of Education:

—	Name of school	Date From	Date To	Courses—Subjects, etc.
Primary Education—Public or Separate School	Strathcona School	1928	1936	primary
High School—Collegiate Institute, etc.	Montreal High School	1936	1940	Science course
Technical School				
University or School other than above	Montreal High School XII th Year	1940	1941	Pre-Engineering
Correspondence Courses, etc	Lilli in Montreal P.Q.			

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

Employer and place	Duties, trades, positions	Date From	Date To	Reason for leaving
N.A	N.A.			N.A.

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

24. Special Qualifications, Hobbies, etc., useful to the R.C.A.F. Member of Model Aircraft League of Montreal.

25. Sports engaged in. State: extensively, moderately, occasionally Basketball, baseball (extensively); swimming, hockey, (moderately) golf (occasionally)

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

If for Ground Duties, state Air Force trade in which you wish to enlist —
If for Flying Duties, state preference as (a) Pilot; (b) ~~Observer~~ 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 Lilli in Montreal P.Q.	Occupation
Mr. W. J. Forbes	5492 Queen Mary Road.	Engineer.
Mr. H. V. Flegg	3546 Lorne ave.	Accountant.
Mr A.R McDani	Montreal High School	Teacher
Mr. J. Lemmaville	Montreal High School	Rector.

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 June 24 1941 Signature ~~James Ward Anderson~~ James Anderson.

NATIONAL REGISTRATION CERTIFICATE PRODUCED. [signature] F/O

FOR OFFICIAL USE ONLY

(A) *Report of Interviewing Officer—*

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

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

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

(B) *Report of Trade Test—*

Trade in which tested.....

Result.....

Trade qualifications other than above likely to lead to efficient employment in the R.C.A.F.....

.....

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

(C) **DECLARATION MADE BY MAN ON ATTESTATION**

I, James Ward Anderson, 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 27th 19 41 James e Anderson
Signature of Recruit

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

I, James Ward Anderson do sincerely promise and swear (or solemnly declare) that I will be faithful and bear true allegiance to His Majesty.

Date June 27th 19 41 James e Anderson
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 27th day of June 19 41

[signature] F/O. RCAF. Recruiting Centre, Montreal.
Signature of Officer — Rank — Unit

FOR OFFICIAL USE ONLY

CERTIFICATE OF MEDICAL EXAMINATION

Part 1. Information obtained from the applicant—

1. Age. 18 2. Have you ever suffered from any of the following defects in health?

(a) Rheumatism NO
(b) Tuberculosis NO
(c) Bronchitis or Asthma NO
(d) Heart Disease NO
(e) Kidney or Bladder Disease NO
(f) Gastro-intestinal NO
(g) Rupture NO
(h) Varicose Veins NO
(i) Flat or Deformed Feet NO
(j) Nasal Trouble Broken nose at 5 yrs.
(k) Ear Disease NO
(l) Eye Disease NO
(m) Epilepsy NO
(n) Nervous or Mental Disease NO
(o) Syphilis NO
(p) Gonorrhoea NO
(q) Bone Fracture nose at 5 yrs
(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

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

Signature of Applicant James E Anderson.

Examiner's Remarks *re* above none

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

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

2. Height 5 feet 10 inches. 3. Weight 145 pounds.

4. Complexion Fair 5. Color of Eyes blue Hair blonde

6. Development {Good / ~~Fair~~ / ~~Poor~~} 7. Chest Measurement—Full expiration 34½ - 36 inches

Range of expansion 1½ inches

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

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

Left 20/20 Left

10. Condition of mouth and teeth fit

11. Urine—Albumen neg Sugar neg

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

A1, A3 & Aux 2.

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 ~~A1 B~~

Any special remarks of the Medical Officers

26-6-41 - Recheck fit A.B. A3 and
29-6-41 X Ray # D 3122 Neg.

Part 2 Cont'.

13. Reflexes N
14. Heart N
15. Lungs N
16. Blood Pressure 130/75 S. D.
17. Colour Vision N. 1/3

Date 24-6-41 19

Dan Frosen F/O — President
[illegible] — Member
Member

AIR FORCE No. R108379

SURNAME: ANDERSON, FULL CHRISTIAN NAMES: JAMES WARD

ENLISTMENT PLACE Montreal DATE 27-6-41

RE-ENLISTMENT

C.R. FILE NUMBER

RECORD OF SERVICE AIRMEN

(8) 13

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

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

S.O.S. OR T.O.S.	UNIT AND PLACE	EFFECTIVE			D.R.O.
T S	4 a.m.d St Hubert	27	6	41	4 a.m.d 48
S.o.S.	4 p.m.d St. Hubert	27	7	41	4 P.m.D 73
T.O.S.	3 S.T.S. Victoriaville	28	7	41	3 S.T.S 109
S.O.S	3 S.T.S. Victoriaville	1	9	41	3 S.T.S 138
T.O.S	13 E.D St Eugene	2	9	41	13 E.D 202
S.O.S	13 E.D St. Eugene	25	10	41	13 E.D 239
T.O.S	2 S.F. Uplands	26	10	41	2 S.F. 261
S.O.S	2 S.F. Uplands	16	11	41	2 S.F. 275
	Died as a result of flying accident				
Killed	Flying accident training	16	11	41	Sig A 640
Harvard					Sd/16-11-41.
5 mi's south of Uplands Aerodrome. Aircraft believed to have collided in air with another Harvard. Cause of discuse. Cause primary.					
21-QC-002	2 S.F.T.S Uplands				

C	CH	STRENGTH	DATE	CAUSE	STATUS	RESULT	DATE OR PLACE	P	CH
R	D	38	16 11 41	0	9	7	10500		

W. S. & Comp.	29	9	44
Cas/wds	17	7	45

2. RECLASS'NS-PROMOTIONS-ETC.

RANK	EFFECTIVE			D.R.O.
AC 2	27	6	41	40 m D 48
LAC	1	9	41	3 S.T.S 138
6				

3. MEDICAL HISTORY

EXAMINATIONS (IN RED INK)

DATE	FORM	CATEGORY	REMARKS

HOSPITALIZATION (IN BLACK INK)

HOSPITAL QUARTERS	ADMITTED CONFINED	DISCHARGE RET'N DUTY	D.R.O.
26-6-41	R 100	A 1 B A 3 B.	

4. TRADE AND CHARACTER

TRADE	GROUP	EFFECTIVE			D.R.O.
P. or O 3.0.18	2.	27	6	41	40 m D 48

TRADE PROFICIENCY	CHARACTER ASSESSMENT	DATE OF R41

5. COURSES-TESTS-ETC.

SUBJECT	RESULT	DATE	AUTHORITY
Pupil R.C.A.F. Crse.	11.8	25 10 41	T 93-1387 2 S.F. - T 87 2 S.F.T. 275
Killed in Flying accident			

6. LEAVE

FROM	TO	DAYS	REMARKS	D.R.O.

R.C.A.F. OVERSEAS | ENLISTMENT MARTIAL STATUS | PRESENT MARTIAL STATUS | HIGH & TECH. SCHOOL EDUCATION | C. OF E. BAP. U.C. PRES. R.C. HEB. MIS. OTHER RELIGION | PREV. SERV. | PROVINCE OF ENLISTMENT | DISCHARGE | AC

AIR FORCE No. R108379 R

SURNAME: ANDERSON | FULL CHRISTIAN NAMES: JAMES WARD

ENLISTMENT PLACE Montreal DATE 27-6-41

RE-ENLISTMENT

C.R. FILE NUMBER

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

RECORD OF SERVICE AIRMEN

7. BIRTH: DATE 5-3-23 | PLACE Fraser's Point Que. | CITIZENSHIP 2 British

FATHER (FULL NAME) Ward Anderson

BIRTHPLACE Anderson's Corner Que.

MOTHER (FULL MAIDEN NAME) Margaret Wilhelmina McCartney (deceased)

BIRTHPLACE Armstown, Que.

8. EDUCATIONAL STANDING

HIGH SCHOOL ENTRANCE x P. 2.

JUNIOR MATRICULATION x P. 2.

SENIOR MATRICULATION x P. 2.

TECHNICAL SCHOOL 1 Pre-Engineering.

UNIVERSITY

CORRESPONDENCE COURSES

7

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

nil

9500

10. PREVIOUS ARMY, NAVY OR AIR FORCE SERVICE

nil

0

11. HONOURS-AWARDS, MENTIONS

AUTHORITY	DATE

12. FLYING EXPERIENCE ON ENLISTMENT (HOURS)

SOLO — DUAL — PASSENGER —

13. RELIGION Presbyterian 4

14. LANGUAGES English, French (Moderately) 3

15. SPORTS Basketball, Baseball, Swimming, Hockey, Golf. Member of "Model Aircraft League" at Montreal

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: Ward Anderson RELATIONSHIP Father

ADDRESS: 3525 Jeanne Mance St. D.R.O.

FULL NAME: Montreal, Que. 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	27 6 41				

22. TEMPORARY DUTY AND MISCELLANEOUS ENTRIES

FROM	TO	DATE	D.R.O.
Occ qtrs & dd stns		27-6-41	40 & 48
Ent-part-qtrs & stns.		27-7-41	222 & 109
SOS having died as a result of flying accident near Uplands		16-11-41	287275

22.(A) ADDRESS PRIOR TO ENLISTMENT

3525 Jeanne Mance St.
Montreal, Que.

22302

23. DOCUMENT CONTROL (INDICATE RECEIPT BY DATE)

R60	R79	B465	X-RAY	AFM-13	IDN. CARD	Rx
18/7/41		2/7/41			6-11-41	

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

RECORD OF PAY

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

APPOINTED OR ENLISTED AT MONTREAL, QUE. ON 27-6-41

MARRIED OR SINGLE SINGLE

No. R108379

NAME IN FULL LAC ANDERSON, JAMES W.

RATE OF PAY

D.R.O. No.	Eff. Date	Rank	Group	P.F. or A.S. Rate	Daily Rate	Add. Pay	Combined Rate	Pen. Ded.	Casualties Affecting Rate of Pay
		LAC	8	A.S.	1 50	.75	2 25		No. 2 SFTS Uplands Ont

ASSIGNMENTS

Assignee	Eff. Date	Amount	Total

DEPENDENTS ALLOWANCE

Date App. Forwarded	Relationship	Amount Awarded	Eff. Date

REMARKS

N.D.T. Class.

Period	No. of Days	Amount of Pay	Sub. Allce.	Other Credits Description	Other Credits Amount	Credit B/F	Total Credits	Ass. Pay	Pen. Ded. & N.D.T.		Debit B/F	Other Debits Description	Other Debits Amount	Cas. Pay	Mid Pay	Total Debits to this Column	End Pay	Debits & Credits to Next Account	Casualties and Sig. of A.O. on Transfer of Account
—	—	—				37 50	37 50												Fr Bal from Nov. A/c
				Deposit Receipt (Voucher)		$ 10	42 60									Nil		42 60	205 (deceased 16.11.41) Do 715 #7 SFTS Uplands Ont
							42 60					ESTATES CHEQUE #724897				42 60		$	

ATO
8
R. H.

Draft advised

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

RECORD OF PAY

CLAIM FOR OUTFIT ALLOWANCE FORWARDED TO..... ON..... APPOINTED OR ENLISTED AT..... ON..... MARRIED OR SINGLE..... No..... NAME IN FULL.....

RATE OF PAY										ASSIGNMENTS				DEPENDENTS ALLOWANCE				REMARKS
D.R.O. No.	Eff. Date	Rank	Group	P.F. or A.S. Rate	Daily Rate	Add. Pay	Combined Rate	Pen. Ded.	Casualties affecting rate of pay	Assignee	Eff. Date	Amount	Total	Date App. Forwarded	Relationship	Amount Awarded	Eff. Date	N.D.T. Class.

Period	No. of Days	Amount of Pay	Sub. Allce.	Other Credits Description	Other Credits Amount	Credit B/F	Total Credits	Ass. Pay	Pen. Ded. & N.D.T.		Debit B/F	Other Debits Description	Other Debits Amount	Cas. Pay	Mid Pay	Total Debits to this Column	End Pay	Debits & Credits to Next Account	Casualties and Sig. of A.O. on Transfer of Account

Pilot or Observer Standard

R.C.A.F. Special Reserve

ROYAL CANADIAN AIR FORCE

RECORD OF SERVICE AIRMEN

R.108379	Anderson	James Ward.	Presbyterian
A.F. No.	Surname	Christian Names	Religion

Born 5-3-23 Place Fraser's Point Que Country Canada Citizen of Canada Racial Origin Canada

ENLISTMENT

Date 27/6/41

At Montreal Que

Term Duration of War

CIVIL EDUCATION

High School Entrance — Jr. Mat. — Sr. Mat.

Technical School — Corres. Courses

University

PREVIOUS SERVICE

None

Rank	Date			Med. Cat.	Date		
AC.2	27	6	41	AIB. A3B	26	6	41
LAC	1	9	41				

CIVIL OCCUPATIONS AND EXPERIENCE

None

COURSES AND TRADE TESTS

Trade	Grp.	%	PorF	Date Rem.	Trade	Grp.	%	PorF	Date Rem.

PARTICULARS OF FAMILY M — S — D

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 Ward Anderson (Father)

3575 Jeanne Mance st Montreal Que

LEAVE

From	To	Auth. and Description

CHARACTER AND TRADE ASSM. HONOURS, AWARDS AND MENTIONS

Date	Character	Trade and Assm.	Honours and Awards	Signature

MOVEMENTS AND CASUALTIES

Authority	Unit from	Unit to	Date	Authority	Unit from	Unit to	Date
MO.R13	R/C Mot Que	#4AM1) St Hubert Que	27/6/41				
PRO 48/41, T.O.S. ORO 73/41,	#4AMD St Hubert	#4 MD St Hubert #3 I.T.S. Victoriaville	27/6/41				
DRO 140/41	3 I.T.S. Victoriaville	#3 I.T.S. St. Eugene	1-9-41				
DRO 239/41	No 13 E.F.T.S. St Eugene	No 2 S.F.T.S. Uplands	25/10/41.				
PRO 275 S.O.S. No. 2 S.F.T.S. Uplands, Having Died as Result of Flying Accident near Uplands			16-11-41				

R.C.A.F. R.44C
100M—12-40 (8755)
H.Q. 1062-3-58

(OVER)

Protestant Board of School Commissioners

of the City of Montreal

HIGH SCHOOL OF MONTREAL
3449 UNIVERSITY STREET
THOMAS SOMMERVILLE, M.A., RECTOR

June 17,1941.

R.C.A.F.

Gentlemen:

This is to certify that James Ward Anderson has-during his five years in The High School of Montreal-been very satisfactory in work and conduct.I taught him for the past year in the 12th year of the school (approximately equivalent to the First Year of the University),and I think well of him-very well indeed. He is punctual,reliable and courteous. My colleagues,his class-mates,and his team mates (on the senior basket ball team)regard him highly.In a word,he is the kind of boy we like to have representing the school.

Respectfully yours,

A.R.McBain

Senior English Master,

High School o f Montreal.

R.C.A.F Records Office
Rec'd JUL 4 1941
O. K. ..... C.I.B. .....
R. C. ..... N. I. .....
S. L. ..... P. A. .....

R.C.A.F. Special Reserve

ROYAL CANADIAN AIR FORCE

INTERVIEW REPORT

SURNAME.....Anderson.....

CHRISTIAN NAME.....James Ward.....

MARRIED NO NO. OF CHILDREN N.A.

N.F.

FLYING

AGE..18.....
HEIGHT..5'11.....
WEIGHT.....150...

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

PILOT..X.....
OBSERVER.....
W.A. GUNNER.....

EDUCATIONAL:- NUMBER OF YEARS...13.....

High School..5.....Technical..NONE.....Commercial..NONE

University (Name and Dates of Attendance).....

.....NONE.....

Standing other Countries.....NONE.....

FLYING EXPERIENCE:- Total hours

Commercial Hours Solo.....NONE.....Dual.....

Private Hours Solo.....Dual.....Pass.....

No. hours & types during last 2 yrs.....

.....

MILITARY AND OTHER TRAINING:-

NONE

.....

.....

.....

SPORTS:-(What branches).....

basketball, baseball (extensively) swimming, hockey, (moderately)

golf (occ)

HOBBIES:-.....aircraft model building.....

INTERVIEWING OFFICER'S OPINION AS TO CHARACTER AND SUITABILITY FOR THE SERVICE:-.....

recommended as having set an excellent example

in athletic and general behaviour at the High School

Has a good education. Has fine manners Is very keen.

Should be good material

REFERENCES CHECKED // SATISFACTORY
REFERENCES CHECKED // UNSATISFACTORY
REFERENCES NOT CHECKED

CONSIDERED SUITABLE FOR COMMISSIONED RANK?..YES....

BEST FITTED FOR.....PILOT OR OBSERVER.....

DATE: 24-6-41

RECRUITING CENTRE:
Montreal Que

A.F.M.5

R.C.A.F Records Office
Rec'd JUL 4 1941
O.C. R.C.A.F. C.R.B.
R.C.A.F. N.L.
S.L. P.A.

REFERENCES CHECKED
2-7-41 (Date) (Initial)

APPROACH
Confident X.....
Nervous.....
Easy.....

CARRIAGE
Upright.....
Medium.....
Athletic.....X..

DRESS
Neat.....X...
Conservative X.....
Clean.....X.....
Careless.....

PHYSIQUE
Medium.....
Heavy Set.X.....
Slender.....

SPEECH
Clear.....X.....
Slow.....
Hesitant.....

RESPONSE
Quick.....
Deliberate.X.....
Slow.....

MANNER
Alert.....X..
Confident.....X..
Sincere.....X....
Reserved....X.....
Nervous.....
Overbearing.....
Irresponsible.....

EXCELLENT.....
ABOVE AVERAGE X....
AVERAGE.....
BELOW AVERAGE.....
MARK WITH AN X THE DESCRIPTION WHICH APPLIES

for Signature of Officer
J.R.O. Gibeault, F.O.

RE-CHECKED BY NO 3 MEDICAL SELECTION BOARD.

CONFIDENTIAL

R.C.A.F. Special Reserve

not in 39/8

R.C.A.F. M.2
50M—12-39 (3211)
H.Q. 1062-10-2

ROYAL CANADIAN AIR FORCE

Medical Board held at Montreal *Date* June 24, 1941

FILE NUMBER 108379

Surname Anderson *Chr. Names* James Ward
Nature of Commission M-2-1 *Date of Birth* Mars 5-1923 *Married or Single* S
Branch General List *Hours Flown* NONE
Address 3575 Jeanne Mance St. Montreal

HAVE YOU ANY HISTORY OF:—

(i) NERVOUS TROUBLE or Nervous Breakdown NO
Severe or "Sick" Headaches, Migraine NO
Fits or Convulsions of any kind NO
Sun or Heat Stroke NO
Head Injury or Concussion (including "knock-out") NO
Insomnia, Nightmares, Sleep-walking, or Bed-wetting NO
(ii) LUNG TROUBLE or Consumption NO
Bronchitis, Pneumonia or Pleurisy NO
Asthma or Hay Fever NO
(iii) HEART DISEASE, "Weak or Strained Heart" NO
Fainting Attacks or Giddiness NO
Rheumatism, Rheumatic Fever or "Growing Pains" NO
Frequent Sore Throats or Tonsillitis NO
Diphtheria, Scarlet Fever or Scarlatina NO
(iv) STOMACH or BOWEL TROUBLE NO
Chronic Indigestion or Pain after Food NO
(v) KIDNEY or BLADDER TROUBLE NO
Syphilis or Gonorrhœa NO
(vi) TROPICAL DISEASE never in tropics
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 never on sea no car or train sickness
Discomfort on Swings, Roundabouts, Switchbacks NO
(ix) OPERATIONS NONE
(x) Any Illness or Injury not mentioned above broken nose at 5 yrs. no trouble since

Education 5 yrs High School
Present Occupation student Hobbies model airplanes
Previous Service NONE
Athletics basketball, baseball, swimming, hockey — on H.S. basketball & baseball teams
Habits—Smoking NONE Alcohol NONE
FAMILY HISTORY—Consumption NO
Nervous Ailments, Mental Trouble, or "Fits" NO
Father Alive—Health good Dead—Cause
Mother Alive—Health Dead—Cause cancer
Brothers (9) Alive—Health (0) Dead—Cause
Sisters (4) Alive—Health (1) Dead—Cause diabetes

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

Date June 24, 1941 *Signature* James Anderson *Witness* [illegible]

GENERAL MEDICAL AND SURGICAL EXAMINATION

Impression given by *(a)* Physique athletic *(b)* Mentality standard
Body Marks, Scars, Deformities NONE
Size of Thyroid Gland N
Surgical Abnormalities NONE
Results of Wounds, Injuries, Operations GOOD

		Date 24-6-41	Assessing Room	Date 26-6-41	Assessing Room	Date 7-8-41 MSB.	Assessing Room	Remarks on any Abnormalities Found
Height (ins.)		70				70		
Weight (lbs.)		145				143		*Date*
Chest Circumference (ins.)		34½-36						
Body Build (lbs.)		1 2 143						
Leg Length (ins.)		42				43		
Pulse Rate	Sitting	84		84		84		
	Standing 1st	108		96				
	Standing 2nd	96		84				
	After Exercise	120		108				
	Time to Normal	75		40				
Arterial Walls		soft				n		
Blood Pressure	Systolic	130				120		
	Diastolic	75				75		
Heart	Size	N				n		
	Sounds	N				n		
	Rhythm	REG				n		
Lungs		N				n		
Breath held		45		85				
Expiratory Force								
Vital Capacity (Best of 5)								
Reflexes	Knee	N N				n		*Date*
	Ankle	N N				n		
	Triceps	N N				n		
	Abdominal	N N				n		
	Plantar	flex				n		
Cranial Nerves		intact						
		R. L.	R. L.	R. L.	R. L.	R. L.	R. L.	
Balancing Rod		1S 1S						
		R. L.	R. L.	R. L.	R. L.	R. L.	R. L.	
Self Balancing		1S 3FS						
Tremors	Fingers	SF						
	Eyelids	SF						*Date*
Abdomen	Liver	N				n		
	Spleen	N				n		
	Muscular Tone	GOOD				n		
Urine	Albumen	NEG				n		
	Sugar	NEG				n		
Initials of M.O.		Cmd.		Cmd.		JDC.		

40 mm. Hg. Test 26-6-41 7/81111,101010,777,766,666,66 85 sec. Cmd.
Date
Date
Date
Date

Remarks by Consultant.

Breath holding test unsatisfactory Cmd.

26-6-41 Cardio resp. tests improved Cmd.

EYE EXAMINATION

History	neg.	No Symptoms.	
Visual Acuity	R. 20/20 , C 2.25 = 20/200	R 20/20 2.25 20/200	
	L. 20/20 , C 2.25 =	L 20/20 2.25 20/200	
Colour Vision	N. ISH	N	
Red, Green	eso. ½ in. hyper ½ in.	M.R. Eso 2	
Diaphragm Test (P.D. = 63 mm)	barthru 4 at 4	P. D. 63 Bar at 0	
Convergence C. = 8.5 cms.		8	
Convergence S. C. = 14.5 cms.		8	
Accommodation R.) 7.0		9	
Accommodation L.)		9	
Cover Test	mod. div. rt. med. R. left ortho	At 20'N. at 13" Sl Lat Dev. R.R.	
Fundi and Media	N	N N	
Fields	N		
Remarks:	FIT	Rt hand and eye master. Fit.	
	Initials of M.O. [signature]	*Initials of M.O.* J.N.V.	*Initials of M.O.*
	Date 24-6-41	*Date* Aug. 7-41	*Date*

EXAMINATION OF EAR, NOSE AND THROAT

History neg

Hearing R. Ear	W V 20	w.v. 20'	
Hearing L. Ear	W V 20	w.v. 20'	
External Ear, Meatus Membranes R. Ear	N	n	
External Ear, Meatus Membranes L. Ear	N	n	
Middle Ear, Eustachian Tubes R. Ear	PAT	patent	
Middle Ear, Eustachian Tubes L. Ear	PAT	patent	
Cochlear Apparatus R. Ear		n	
Cochlear Apparatus L. Ear		n	
Vestibular Apparatus R. Ear		n	
Vestibular Apparatus L. Ear		n	
Buccal Cavity	fit	n	
Teeth	fit	n	
Gums	fit	n	
Pharynx	fit	n	
Nasopharynx	not seen	n	
Nose	fit	n	
Larynx	not seen	n	
Remarks: fit			
	Initials of M.O. [signature]	*Initials of M.O.* JDC	*Initials of M.O.*
	Date 24.6-41	*Date* 7-8-41	*Date*

HISTORY OF PRESENT CONDITION.

Date 24-6-41

History:- Favourable, except for 1 caseof diabetes in family

Examination:- Pulse responces high. Breath holding test unsatisfactory
Applicant finished Senior Matric. examinations yesterday
Is advised to rest a few days and to return for recheck
of cardio respiratory tests.

A1B

26-6-41 Recheck
Cardio respiratory tests improved

Now fit A1B A3B

M.S.B. 7-8-41 Completed Gr. XIII Montreal equiv. of St. Matric at 18 Then joined up Choice P.O.G. Does not drive car. Steady Alert quick young lad of superior intelligence. General adjustment self-confidence, attitude responsibility-better than average.

C.G. Stogdill. F/L.

OBSERVATIONS AND FINDINGS BY PRESIDENT OF BOARD

Date 7.8.41

Cat A1B A3B

R.C.A.F. Records Office
Rec'd SEP 22 1941
O. K. C.I.B.
R. C. N. I.
S L. P A W d

(E.C. Noble) Wing Commander.
President of No 3 Medical Selection Board

MEDICAL RE-EXAMINATION

I certify upon my honour that I have suffered no illness or disability since my last examination.

Date _____ Signature _____ Witness _____

R.C.A.F. T.58A

ROYAL CANADIAN AIR FORCE

REPORT ON PUPIL PILOT--FLYING AND GROUND TRAINING

Surname...ANDERSON..... Christian Names...G.W.....

Number...R108379..... Rank.....LAC.....

INSTRUCTIONS

1. For instructions on the use of this form, see C.A.P. 100, Section 7.

PART I

INITIAL TRAINING

1. No....3..... I.T.S. Course No...32..... From..27-7-41.....To..1-9-41.....

2. Results of Examination:-

Subject	Maximum Marks	Marks Obtained	Subject	Maximun Marks	Marks Obtained
Mathematics.....	100	..51....	Hygiene & Sanitation	40	..32....
Armament (R & O)	100	..76....	Drill.....	100	..82....
Signals.....	100	..84....	Law and Disc., etc..	60	..48....

3. Maximum Marks 500. Marks Obtained..373.....Percentage..75.....

4. Passed or Failed....P.... Position(Group) in Class..76..No in P's Class..265..
No of Groups..128.....

5. Considered ~~XXXXXXX~~ for Commissioned Rank
Unsuitable

6. Recommended for training as : (a) Pilot.....
(b) ~~Air Observer~~.....
(c)

7. Remarks..Clean cut. Very alert. Enthusiastic. Confident. Good home.....
background.....
.....
.....

8. Alternative Recommendation.....W A G

D J Findlay .....Wg. Comdr.
Commanding Officer

No. 3 I.T.S., Victoriaville, P.Q.

Date .....1-9-41.....

To be passed to No....13..EFTS.

A ~~U.K.~~ Can. Trainee.
~~Aus.~~
~~N.Z.~~

NOTE: X out Countries not applicable

R-108379 LAC. ANDERSON, G.W.

PART II

ELEMENTARY TRAINING

No. 13 .....E.F.T.S. Course No. ....37 .....From... 1-9-41 ... To..... 25-10-41 ...

Flying Time :- FLYING TRAINING

Aircraft	Dual (Excluding I.F. Dual)	Solo	Instrument Flying	Passenger	Total	Link Trainer
. FINCH. II. .	.....32.45....	..27.20	....10.00	..... nil	...60.05 .	....10.00 ..

3. Results of Flying Tests:- 20 hour... 65.7. % Final Test. 68.0 ...% Instr.Fly 67.1 .%

4. Ability as a Pilot..... average ..... Pass or Fail ..... pass .....

5. Recommended for training on T.E. or S.E. Aircraft .. T.E. .....

6. Remarks on Flying Progress and points which require special consideration.....

.... Average on all flying, aerobatics and instrument. .....

.... He progressed rapidly at finish... Will be very good with more experience. .....

.....

.....

J. E. McKay
Chief Flying Instructor.

Date..... Oct. 24/41

7. GROUND TRAINING

Subject	Maximum Marks	Marks Obtained	Subject	Maximum Marks	Marks Obtained
Airmanship.....	200	..121..	Th. of Flight.....	100	..71.....
Airframes	100	...65...	Air Nav.....	200	.146.....
Aero Engines.....	100	...65...	Arm. (Oral).....	200	.158.....
Signals (Prac.).....	100	...95...	Quals. as an (Officer (N.C.O.	200	 140

Maximum Marks 1200. Marks Obtained .....861.... Percentage.....71.8.....

Pass or Fail .....pass..... Position in Class ..23.....No. in Class....41....

8. Commissioned Rank (appears suitable or unsuitable).....unsuitable.....

9. General Remarks (Ability, Conduct, etc.)...Conduct good, ability fair, honest,.....

....sincere and willing to work. .....

.....

.....

.....

J. McKay
CHIEF GROUND INSTRUCTOR.

DATE.....OCT 23 1941.....

TO BE PASSED TO.....S.F.T.S...

Arrchard Flo
SQUADRON LEADER
CHIEF SUPERVISORY OFFICER.

NO...13..... E. F. T. S.....

DATE.....24/10/41.....

PART III

SERVICE FLYING TRAINING

Pupil **R108379** **LAC** **Anderson, J.W.**
Number Rank Name

1. ~~No.~~ 2 S.F.T.S. Course No. **41** From **27-10-41** to **12-1-42**

2. FLYING TIME:-

FLYING TRAINING

Aircraft Type	S. E. AIRCRAFT				T.E. AIRCRAFT				In-stru-ment.	Link Train-er.	Pass-en-ger.
	DAY		NIGHT		DAY		NIGHT				
	Dual	Solo	Dual	Solo	Dual	Solo	Dual	Solo			
Harvard											
Total	**10:50**	**6:25**							**1:40**	**6:00**	
Brought Forward From E.F.T.S.	**32:45**	**28:00**									
GRAND TOTALS	**43:35**	**34:25**									

3. Qualities as a Pilot. 750....Marks Obtained **N.A.**

4. Remarks on Flying Progress, Navigation, and points which require consideration:

Killed in flying training accident, 16-11-41.

R. G. Watson F/L.
Squadron Commander

Date **18-11-41**

5. GROUND TRAINING

Subject	Maximum Marks	Marks Obtained	Subject	Maximum Marks	Marks Obtained
Airmanship & Maintenance...	200	**N.A.**	Navigation & Meteorology.....	200	**N.A.**
Armament (W)....	100	**N.A.**	Signals (P).....100		**N.A.**
Armament (P)....	100	**N.A.**	Signals (W).....	50	**N.A.**

6. Remarks of C. G. I. _____

G.E. Wilson
Chief Ground Instructor

Date: 20.11.41

7. Armament (Air Exercises) (T.E. Schools Only) (Ex., A.Av., Av., B.Av., or P.)

(a) Wind Speed and Direction Finding _____

(b) Straight Runs Over as Pilot _____

PART III (Continued)

8. Character & Leadership (Marks Possible) 750. Marks Obtained N.A.

9. Final Assessment (Maximum Marks) 2250. Marks Obtained N.A.

10. Passed or Failed N.A. Position in Class N.A. No. in Class N.A.

11. Qualities as an Operational Pilot (Ex.,Above Av.,Av.,Below Av.,Poor) N.A.

(a) Formation Flying N.A. (b) Navigation Ability N.A.

(c) Night Flying N.A. (d) Determ. & Initiative N/A Average

(e) Instrument Flying NA.

(f) Ability to Maintain Speed, Course & Height (T.E.) N.A.

Recommended for (Type of Service Squadron) N.A.

Type of A/C (T.E. or S.E.) N.A. Recommended for Flying Instructor N.A. (Yes or No)

NOTE: Paras. 11(a)(b)(c)(d)(e)(f) to be assessed Ex.,A.Av.,Av.,Below Av.,Poor.

12. General Remarks on Training, Ability, Etc. Appeared to be an average student.

[illegible] required for Pilot's Badge as [illegible].

W.R. Sharp F/C
Chief Instructor

13. Awarded Pilot's Flying Badge w.e.f. N.A. (Date)

14. Recommended for Commissioned Rank N.A. (Yes or No) Assessment (Ex.,Above Av., Av.)

15. Remarks of Commanding Officer

W.K. Mainprize W/C
Commanding Officer

No. 2 S.F.T.S., Uplands, Ontario.

Date 18-11-41

16. Accidents (C.A.R. 100, Section 4)

This pupil has been involved in the following flying accidents during his training.

E.F.T.S. or S.F.T.S.	Type of Accident Para. 27	Assessment of Blame - Para. 25.	Previous Communications.	Signature of Chief Supervisory Officer or Chief Instructor (as applicable)

ROYAL CANADIAN AIR FORCE

R.C.A.F. R. 45
40M—8-40 (6622)
H.Q. 1062-2-126

Individual Record of Flying

RANK L.A.C. NO. R108379 NAME Anderson, J. H.

UNIT	Month ending	SINGLE-ENGINE AIRCRAFT												MULTI-ENGINE AIRCRAFT												CREW DUTIES			Passenger	TOTAL	
		DAY						NIGHT						DAY						NIGHT											
		Captain of Aircraft		2nd Pilot		Dual		Captain of Aircraft		2nd Pilot		Dual		Captain of Aircraft		2nd Pilot		Dual		Captain of Aircraft		2nd Pilot		Dual		Observer		Air Gunner	Other		
No. 13 E.F.T.S., St. Eugene, Ont.		(A)		(B)		(C)		(D)		(E)		(F)		(G)		(H)		(J)		(K)		(L)		(M)		(N)		(O)	(P)	(Q)	(R)	
		Hrs	Mins	Hrs	Mins	Hrs	Mins	Hrs	Mins	Hrs	Mins	Hrs	Mins	Hrs	Mins	Hrs	Mins	Hrs	Mins	Hrs	Mins	Hrs	Mins	Hrs	Mins	Hrs	Mins	Hrs	Mins	Hrs	Mins	Hrs	Mins
Sept.	30	3	25			12	00																									15	25
Oct.	25	24	35			20	45																									60	45
#2 S.F.P.S. - Uplands.																																	
	16/11/41	5	20			12	00																									17	20

ROYAL CANADIAN AIR FORCE

R.C.A.F. R. 45
40M—8-40 (6622)
H.Q. 1062-2-126

Individual Record of Flying

RANK..... NO..... NAME.....

WEEKLY FLYING RETURN OF			SINGLE-ENGINE AIRCRAFT										MULTI-ENGINE AIRCRAFT										CREW DUTIES						PASSENGER		TOTAL	
			DAY						NIGHT				DAY						NIGHT													
UNIT	Week ending	Serial No.	Captain of Aircraft		2nd Pilot		Dual		Captain of Aircraft		2nd Pilot		Dual		Captain of Aircraft		2nd Pilot		Dual		Captain of Aircraft		2nd Pilot		Dual		Observer		Air Gunner		Other			
			(A)		(B)		(C)		(D)		(E)		(F)		(G)		(H)		(J)		(K)		(L)		(M)		(N)		(O)		(P)		(Q)		(R)	
			Hrs	Mins	Hrs	Mins	Hrs	Mins	Hrs	Mins	Hrs	Mins	Hrs	Mins	Hrs	Mins	Hrs	Mins	Hrs	Mins	Hrs	Mins	Hrs	Mins	Hrs	Mins	Hrs	Mins	Hrs	Mins	Hrs	Mins	Hrs	Mins

CASUALTY RETURN

To be filled out for fatal casualties and personnel reported Missing

NAME Anderson, James Ward

NUMBER R106379

RANK LAC.

AIR FORCE TRADE Pilot ~~"B" Group~~ STANDARD OR OBSERVER

SERVICE: RCAF, RAF, RAAF, RNZAF (Strike out Service not applicable) UNIT: No. 2 S.F.T.S., Uplands, Ottawa, Ont.

WAS AIRMAN ON LEAVE WITHOUT PAY? No. MARITAL STATUS: Single

PLACE OF BIRTH AND DATE Fraser's Point, DUNDEE, Quebec 5-3-23

PLACE AND DATE OF ENLISTMENT Montreal, P.Q. 27-6-41

NEXT OF KIN (As shown on Airman's Record of Service Ward Anderson

RELATIONSHIP Father

ADDRESS 3575 Jeanne Mance St., Montreal, P.Q.

NEXT OF KIN (As shown on Casualty Signal from Unit) Ward Anderson

RELATIONSHIP Father

ADDRESS 3575 Jeanne Mance St., Montreal, P.Q.

PARENTS NAME (S) Ward Anderson - ~~Margaret Wilhelmina McCartney~~

ADDRESS (As shown on Airman's Record of Service) 3575 Jeanne Mance St., Montreal, P.Q.

WAS MOTHER LIVING ON ENLISTMENT No...WAS FATHER LIVING ON ENLISTMENT Yes

EDUCATIONAL BACKGROUND (Schools attended, etc.) Montreal Highschool ~~and Montreal High School~~ pre-engineering

GENERAL BACKGROUND (Outstanding Achievements, etc.)

RELIGION Presbyterian

NATIONALITY (Citizenship) British French Canadian

CASUALTY SIGNAL NO A640 DATE 16-11-41

DETAILS OF CASUALTY Aircraft believed to have collided in air and crashed - killed 16-11-41

DATE 16-11-41

(For D.A.P.S.)

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

DEPARTMENT OF NATIONAL DEFENCE

NAVY ═══ ARMY ═══ AIR FORCE

STATEMENT OF WAR SERVICE GRATUITY

4
AIR

A-17316

DECEASED MEMBER'S NAME: James W. (CHRISTIAN NAMES) Anderson (SURNAME)

REGISTER NO.

FILE NO. 23099

PAYEE: Receiver General of Canada,

ADDRESS: Director of Estates, Ottawa, Ont.

DATE 18 Aug/45

SERVICE NO. R.108379

FINAL RANK OR RATING LAC

DATE OF TERMINATION OF OVERSEAS SERVICE N.A.

DATE OF DISCHARGE 16 Nov/41

	$	¢
A. TOTAL QUALIFYING SERVICE		
NO. OF DAYS 143/30 EQUAL TO 4 COMPLETE PERIODS AT $7.50	30	.00
B. QUALIFYING OVERSEAS SERVICE		
NO. OF DAYS LESS INELIGIBLE DAYS, EQUAL TO DAYS @ 25C. PER DAY		
C. SUPPLEMENT FOR OVERSEAS SERVICE		
DAILY RATES AT DISCHARGE		
PAY	$	
SUBSISTENCE OR LODGING AND PROVISION ALLOWANCE	$	
ADDITIONAL PAY	$	
	$	
	$	
DEPENDENTS' ALLOWANCE 1/30 OF $	$	
TOTAL $ ×7 = $		
NO. OF DAYS/183 ×$		
D. WAR SERVICE GRATUITY		30.00
E. DEDUCTIONS — OVERPAYMENT OF PAY AND ALLOWANCES	$	
DEPENDENTS' ALLOWANCE AND ASSIGNED PAY	$	
OTHER DEDUCTIONS	$	
F. TOTAL AMOUNT PAYABLE		30.00

G. YOUR PORTION OF GRATUITY IS—

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

TOTAL DEPENDENTS' ALLOWANCE IN ISSUE $

P. & A. Bal. Trans. Trust Account
Journal Voucher # G149

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

PREPARED BY	CHECKED BY
AMS	DRM

TREASURY

CHECKED BY	DATE
	11 SEP 45

SERVICE REPRESENTATIVE

△T

AUG 27 1945