R117670
COMEAU
JOSEPH NAPOL

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NAME COMEAU, Joseph Napoleon Pascal Eugene FILE NO. 1022-C-6404

RANK Sgt. Air Gunner CATEGORY ~~MISSING~~ PRES. DEAD REG. NO. R117670

DATE OF DEATH: 28-May-43 MOTHER LIVING: YES WIFE: NA

MINISTERIAL CARD: 22 June 43 ROYAL MESSAGE: FEB 28 1944 MEMORIAL CROSS TO CHAPLAIN: FEB 22 1944

To mother & father (french card)

To mother & father 5-11-43

DEL'D TO MOTHER:

DEL'D TO WIFE:

Mr. & Mrs. James Eugene Comeau,
Godbout, Saguenay Co.,
Quebec.

COMMAND: No. 3

RELIGION: R.C.

AIR FORCE No. R117670 R

COMEAU, JOSEPH NAPOLEON PASCAL EUGENE
SURNAME — FULL CHRISTIAN NAMES

ENLISTMENT	RE-ENLISTMENT	C.R. FILE NUMBER
PLACE Montreal		
DATE 24-7-41		

RECORD OF SERVICE AIRMEN

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

7. BIRTH: DATE 12-3-19 PLACE Godbout, Que. CITIZENSHIP British 1

FATHER (FULL NAME) Eugene Comeau

BIRTHPLACE Godbout Que.

MOTHER (FULL MAIDEN NAME) Maria Martel ✓

BIRTHPLACE Quebec, Que.

8. EDUCATIONAL STANDING

HIGH SCHOOL ENTRANCE	1	Que.
JUNIOR MATRICULATION	Grade X	N.B.
SENIOR MATRICULATION		
TECHNICAL SCHOOL		
UNIVERSITY		
CORRESPONDENCE COURSES	0	2

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

Waiter - 3 yrs.
Clerk - 1 yr.
asst Inspector in 1941 (Public Works)
1980

10. PREVIOUS ARMY, NAVY OR AIR FORCE SERVICE

nil

0

11. HONOURS-AWARDS, MENTIONS

HONOURS-AWARDS, MENTIONS	AUTHORITY	DATE
Air Gunner's Badge	5B4145	25-5-42

12. FLYING EXPERIENCE ON ENLISTMENT (HOURS) SOLO — DUAL — PASSENGER —

13. RELIGION R catholic 1

14. LANGUAGES French & English 3

15. SPORTS Tennis, badminton, squash

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: Eugene Comeau ✓ — RELATIONSHIP Father

ADDRESS: Godbout, Que. — D.R.O. NK

FULL NAME: — RELATIONSHIP

ADDRESS: — D.R.O.

20. PAY ENTRIES (OFFENCE FORFEITURES, STOPPAGES IN RED INK)

RATE CHANGES ETC.	EFFECTIVE			D.R.O.	RATE CHANGES ETC.	EFFECTIVE	D.R.O.
admonished & forfeits one days pay for (1) breaking from ranks on parade (2) AWL - 18 hrs 30 mins.	29	8	42	RA7 65			

21. ENGAGEMENTS

TERM	EFFECTIVE			D.R.O.	TERM	EFFECTIVE	D.R.O.
Duration	24	7	41				

22. TEMPORARY DUTY AND MISCELLANEOUS ENTRIES

FROM / TO	DATE	D.R.O.
Occ. qtrs. & draws rations	24/7/41	4 AmD 71
Ass 2 EF for rations qtrs. duty & discip.	28-8-41	3TC 184
Att. to 5 AmD	25/9/41	5 AmD 129 130
Ceases to be att 22 EFTS	23-9-41	3TC 202 5AMD 140
Att 5 AmD for duty, discipline & qtrs	24-9-41	3TC 202 5AMD 140
Ceases to be att 5 AmD on posting	11-10-41	3TC 202
Issued T.D. Special Leave 54445	4-3-42	1WS 60 65
Occ Govt Qtrs & draws rations	19-3-42	E.80

22.(A) ADDRESS PRIOR TO ENLISTMENT

148 Champlain Baie Comeau, Que.

2610

23. DOCUMENT CONTROL (INDICATE RECEIPT BY DATE)

R60	R79	B465	X-RAY	AFM-13	IDN. CARD
13-8-41	JAN 16 '42	26-8-41			

AIR FORCE No. R117670

COMEAU, JOSEPH NAPOLEON PASCAL EUG [redacted]
SURNAME — FULL CHRISTIAN NAMES

ENLISTMENT PLACE Montreal DATE 24-7-41

RE-EN [redacted]

C.R. FILE NUMBER

F

RECORD OF SERVICE AIRMEN

13

R.C.A.F. FORM R44(B)
50M-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.O.S.	4 AMD. St. Hubert	24	7	41	4 AMD 11
SOS	5 AMD Valcartier	28	8	41	5 AMD 103
TOS	3TC (duty at 8 AOS Quebec)	29	8	41	3TC 184
SOS	3TC Hqtrs Montreal	11	10	41	3TC 202
T.O.S.	1 WS Montreal	12	10	41	1W.S 246.
S.O.S.	1 W.S. Montreal	19	3	42	1WS.55
T.O.S.	K.T.S. Trenton Ont.	20	3	42	E.80
SOS.	K.T.S. Trenton	25	4	42	E107
TOS	5 B&G Sch. Dafoe	26	4	42	5BG 126
SOS	5BG Dafoe	26	5	42	5BG 145
TOS	1 Y Depot Halifax 2848001.	27	5	42	1Y 162
SOS	1Y Dep to RAF Trans. Pool	4	7	42	1Y 260
TOS-	3 P.R.C.	19	7	42.	RAF 50.
SOS	3 P.R.C. to 7. A.G.S.	9	9	42	RAF 64
SOS	7 A.G.S. Stormy Downs to 23 OTU	6	10	42	RAF 69.71
Cas	WSG	19	7	45	
SOS to Overseas		4	7	42	E 501
	Missing 27/28	5	43		
	PX 513/6	28	5	43	
	P. Dead	28	5	43	
	RX 291	12	10	43.	
WSG	Computed 30/9/44				

2. RECLASS'NS-PROMOTIONS-ETC.

RANK	EFFECTIVE			D.R.O.
AC2	24	7	41	4 AMD 11
LAC.	12	11	41	1WS 284
T/Sgt Pd. T4	25	5	42	5BG 145
T/F/Sgt (Pd)	25	11	42	A3R 02688 GB 641
T/WO2 (Paid)	25	5	43	A3R 02688 GB 641

3. MEDICAL HISTORY

EXAMINATIONS (IN RED INK)

DATE	FORM	CATEGORY	REMARKS
22-7-41	R100	A3B.	
4/3/42	B2.	A1B, A3B.	

HOSPITALIZATION (IN BLACK INK)

HOSPITAL / QUARTERS	ADMITTED / CONFINED	DISCHARGE / RET'N DUTY	D.R.O.
S.S.Q.	4.5.42	8.5.42	5BG 126-130
Netley Hosp.	5-8-42	20-8-42	RAF 60-65
S.S. Q	10-9-42.	Trans. 10-9-42	RAF 68.
St. Alban. RAF Hosp.	10-9-42	16-9-42.	RAF 68.

4. TRADE AND CHARACTER

TRADE	GROUP	EFFECTIVE			D.R.O.
W.A.G.	8	24	7	41	4 AMD 11
Air Gunner		30	3	42	E 92
AG Cr 30 3055	8	25	5	42	5BG 145 / 1

TRADE PROFICIENCY	CHARACTER ASSESSMENT	DATE OF R41

5. COURSES-TESTS-ETC.

SUBJECT	RESULT	DATE	AUTHORITY
Transf. to crse	38		1WS.78.
attended Gunnery Crse at Stormy Down	B. 72%	19/8 / 1/10 42	RAF. 71.
Trans to Crse	32.		

6. LEAVE

FROM	TO	DAYS	REMARKS	D.R.O.
5-3-42	19-3-42	14	Special L.	1WS 55.
26-5-42	9-6-42	14	Pre-embark	5B&G 200

R.C.A.F. OVERSEAS — ENLISTMENT MARITAL STATUS — PRESENT MARITAL STATUS — HIGH & TECH. SCHOOL EDUCATION — G. OFE. BAP. U.C. — RELIGION (PRES. R.C. HEB. PRO. HIS. OTHER) — PREV. SERV. — PROVINCE OF ENLISTMENT — DISCHARGE — AC

AIR FORCE No.	SURNAME / FULL CHRISTIAN NAME	ENLISTMENT/APPOINTMENT	RELIGION
R117670	Comeau, Joseph Napoleon Pascal Eugene	PLACE Montreal, Que. DATE 24-7-41	R.C.

ROYAL CANADIAN AIR FORCE

RECORD OF SERVICE

OFFICERS, AIRMEN AND AIRWOMEN

R.C.A.F. FORM R230
150M-7-42 (2446)
H.Q. 885-R-230

BIRTH DATE	PLACE	COUNTRY	CITIZENSHIP	RACIAL ORIGIN
12-3-19	Godbout, Que	Canada	British	

CIVIL EDUCATION

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

CIVIL OCCUPATIONS AND EXPERIENCE

Clerk 7980

PARTICULARS OF FAMILY

SINGLE, MARRIED, WIDOWER, DIVORCED Single

WIFE (FULL MAIDEN NAME) OR HUSBAND

PRESENT ADDRESS (IN PENCIL)

PLACE OF MARRIAGE DATE

AUTHORITY (IF AFTER APPOINTMENT/ENLISTMENT)

CHILDREN

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

PREVIOUS SERVICE

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

Mr. Eugene Comeau (Father) Godbout, Que.

PLACE AND DATE OF MEDICAL	CATEGORY	PLACE AND DATE OF MEDICAL	CATEGORY
22-7-41	A3B		
4-3-42	A1B A3B		

EMPLOYMENT AS INSTRUCTOR OFFICER AIRMAN/AIRWOMAN

TYPE	FROM	TO	TYPE	FROM	TO

OFFICERS

RANK, BRANCH AND CATEGORY	DATE	AUTH.	DUTIES PERFORMED DURING SERVICE, E.G. ADJ.

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

AIRMEN AND AIRWOMEN

RANK	DATE	AUTH.	TRADE	DATE	AUTH.
AC2	24 7 41	4AMD 71	Wag 'S'	24 7 41	Hand 71
LAC	12 11 41	1WS 284	Gen Gunner	30 3 42	292
T/Sgt Pd.	25 5 42	5BGS 145	AG w 30 Sp	25 5 42	5BGS 145
T/Flt Sgt	25 11 42	o/o 644 43.			
T WO II	25 5 43	o/o 641 43.			
2 T/Sgt	25 11 42	408 Sq 35/43 AFRO 2688/43			
2 WO II	25 5 43	" o/o 566/43 AFRO 2688/43			

OFFICERS, AIRMEN/AIRWOMEN

COURSE OR TRADE	GRP.	%	PF	DATE
Transf to use 30		30		

ADVISE ENTRIES
UNIT RECORDS RETURNED
TO CANADA

AIR FORCE No. R117670

COMEAU, JOSEPH NAPOLEON PASCAL EUGENE ✓

SURNAME FULL CHRISTIAN NAME

ENLISTMENT/APPOINTMENT
PLACE Montreal, Que.
DATE 24-7-41

RELIGION
~~Missing~~
R.C. ✓

R.C.A.F. FORM R230

TYPE OF LEAVE

FROM	TO	No. DAYS	DESCRIPTION	AUTH.
22/4/43	28/4/43	7	P/Leave	8/43

TYPE OF AIRCRAFT ON WHICH MOST PROFICIENT

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

SERVICE MACHINES FLOWN

CHARACTER AND TRADE ASSESSMENT

DATE	CHARACTER	TRADE ASSESSMENT

POSTINGS, ATTACHMENTS & TEMPORARY DUTY

SOS TOS	FROM TO	DATE	AUTHORITY
SOS	5BJ Dafoe	26 5 42	5BJ 145
SOS	Y Dep & RAF Trainees Pool	4 7 42	14 260
Disembarked U.K.		18 7 42	E501.
SOS 3PRC to 7 A.G.S.		18 8 42	MO334.
TOS 23 O.T.U.		6 10 42	69/13.
SOS to 1659 C.U.		4 1 43	12/33.
SOS to 408 Sqdn.		22 2 43	43/39
Missing		27/28 5 43	CR 324 AFRO 1338
Posted to W.C.A. D Uxbridge		27/28 5 43	73/43.
Missing Believed Killed			CR 375 24-9-43
Presumed Dead		28 5 43	CR 383 AFRO 2322/43

ADVISE ENTRIES
UNIT RECORDS RETURNED TO CANADA

ALL OTHER CASUALTIES

CASUALTY AND DATE	AUTHORITY
SS2 4-5-42/8-5-42	5BG126-130
Netley Hosp 5-8-42	RAF60
SS2 10-9-42/trans 10-9-42	RAF68
St Alban RAF Hosp 10-9-42/16-9-42	RAF68

HONOURS, AWARDS AND MENTIONS

DATE	AWARD	AUTHORITY
25 5 42	Air Gunners Badge	5BGS 145

Emb 5/7/42

AIR FORCE No. R117690

Comeau, Pascal Eugene
SURNAME FULL CHRISTIAN NAME

ENLISTMENT/APPOINTMENT
PLACE
DATE 24-7-41

RELIGION R.C.

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

R.C.A.F. FORM R230
100M-5-43 (3287)
H.Q. 885-R-230
K.P. 75434

BIRTH DATE	PLACE	COUNTRY	CITIZENSHIP	RACIAL ORIGIN
12-3-19				

CIVIL EDUCATION

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

CIVIL OCCUPATIONS AND EXPERIENCE

PREVIOUS SERVICE

PLACE AND DATE OF MEDICAL	CATEGORY	PLACE AND DATE OF MEDICAL	CATEGORY

PARTICULARS OF FAMILY

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

CHILDREN

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

NAME(S), ADDRESS(ES), RELATIONSHIP OF PERSON(S) TO BE INFORMED OF CASUALTIES (IN PENCIL)
Mr. Eugene Comeau (Father) Godbout, Que

EMPLOYMENT AS INSTRUCTOR OFFICER AIRMAN/AIRWOMAN

TYPE	FROM	TO	TYPE	FROM	TO

OFFICERS

RANK, BRANCH AND CATEGORY	DATE	AUTH.	DUTIES PERFORMED DURING SERVICE, E.G. ADJ.

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

AIRMEN AND AIRWOMEN

RANK	DATE	AUTH.	TRADE	DATE	AUTH.
Sgt	25 5 42		A.G.		
WO 2	25 5 43	566/43			

OFFICERS, AIRMEN/AIRWOMEN

COURSE OR TRADE	GRP.	%	PF	DATE
5 B.G.S. (Arm/Air)				27/4/5/42

AIR FORCE No. R117670

SURNAME: Comeau, FULL CHRISTIAN NAME: Pascal Eurene

ENLISTMENT/APPOINTMENT
PLACE
DATE 24-7-41

RELIGION: R.C.

R.C.A.F. FORM R230

TYPE OF LEAVE

FROM	TO	No. DAYS	DESCRIPTION	AUTH.
22-4-43	28-4-43	7	Prio. Leave	408 Sqn 8/43.

TYPE OF AIRCRAFT ON WHICH MOST PROFICIENT

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

SERVICE MACHINES FLOWN

CHARACTER AND TRADE ASSESSMENT

DATE	CHARACTER	TRADE ASSESSMENT

HONOURS, AWARDS AND MENTIONS

DATE	AWARD	AUTHORITY

POSTINGS, ATTACHMENTS & TEMPORARY DUTY

SOS TOS	FROM TO	DATE	AUTHORITY
	Embarked for U.K.	5 7 42	
	Disembarked U.K.	18 7 42	FSDI
	3 PRC		
SOS	3 PRC to 7 AGS	18 8 42	3PRC 334
TOS	23 O.T.U.	6 10 42	23OTU 232/42
TOS	165 C.U.	4 1 43	3/43.
TOS	408 Sqn	22 2 43	15/42
F/B	Missing B. Killed	27/28 5 43	CR 375 CR 324
TOS	WCAD Elbridge	27/28 5 43	408 Sqn 13/42
	Presumed dead	28 5 43	CR 383
TOS	Reat NIE Unit (APH)	29 5 43	NEU
SOS	Reat NIE Unit (PD)	29 5 43	1/42.

ALL OTHER CASUALTIES

CASUALTY AND DATE	AUTHORITY

R0117670 COMEAU JOSEPH NPE | W022

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. SER.~~ WAR MEDAL	C.V.S.M.				Ops Niagara
AWARD	✓		✓						✓	✓	✓				
AWARD AND CLASP											✓				
APPLICATION DISPATCHED															
RIBBON ISSUED															
MEDAL ISSUED								44198						20th July 46	

NUMBER | NAME | RANK | PREFIX | CODE

IBM 83961

LICENSED FOR USE UNDER CANADIAN PATENT NUMBER 315306

Mrs. Maria L. Comeau (mother)
Godbout,
Saguenay Co.,
Que.

2878

Aug.-44.

MEMORIAL BAR
DATE DESP.
REGN. NO. 3524
18/10/44.

22. Courses of instruction : Subject.	Unit.	From	To.	Result and percentage of marks.
Course No. 31 No. 5B & G Dafoe, Sask.				

23. Postings and Attachments.

To	Duty	"P" or "A"	Date	Authy.
Embarked			5-7-42	
Disembarked			18-7-42	
3 P.R.C.,		P	19-7-42	199/42
7 A.G.S.		P	9-9-42	243/42
23. O.T.U. 1659 Con. Unit		P.	6.10.42	
H.Q. Sqdn.		P.	22.2.43	

Postings and Attachments.

To	Duty	"P" or "A"	Date	Authy.

24. Attendances at Courts Martial.

Date	Under Instrn.	As P. or M.	Date	Under Instrn.	As P. or M.

Canadian. 84 Can. R. 117670

GROUP / UNIT Copy

ROYAL AIR FORCE.

Form 373.

1. Rank.	2. Christian Names.	3. Surname.	4. Decorations.
Sgt.	Joseph Napolean Pascal	COMEAU.	

5. Type and date of commission or engagement, if Airman Pilot.

Date of expiry.

7. Date of award of flying badge.

Date of qualification as service pilot, % marks, and whether failed, and re-examined.

7a. Qualifications, including any symbols; whether passed Promotion Exam. (with date) and whether passed Staff College Qualifying Exam.

8. Types of service aircraft flown.

Fairey Battle

6. Branch or Trade.

Air Gunner.

9. Type on which most proficient. (If under instruction state total number of hours flown on each type and tests passed).

10. Date of birth.

12-3-19

12. If married: Date.

S'

11. Religion.

13. Medical classfn.

14. Date and place of last medical Exam.

15. *Date of last vaccination.

16. *Date of last inoculation.

1. T.A.B.
2. Cholera.
3. Plague.

9. 13-19 and 21 to be kept in pencil.

*To be inserted in unit copy only.

17. Permanent Address.

18. Next of kin. Relationship and address.

(Father)
Mr. J. E. Comeau,
Godbout,
Saguenay County, Que.
Canada.

19. Name and address of person to be notified in case of casualty.

Instead of / *In addition to the Next of kin.

*Delete as necessary.

20. Periods in hospital, or sick quarters, or sick at home.

21. Whether completed Annual Musketry Course and Annual Gunnery and Signalling Training; If not, what tests still require to be passed.

Wt. 44507/3061 380M. 2/42 KJ 51-4307.

No. 23 O.T.U.

FINAL TRAINING REPORT - AIR GUNNER

No. R117670 Rank Sgt. Name Comeau P. Course 45

Arrived 8.10.42 Left 29.12.42

FLYING TIMES	DAY	NIGHT
PRIOR TO O.T.U.	2·35	—
AT O.T.U.	51·05	39·50
TOTAL	53·40	39·50

Air Firing	No. of Exercises	No. of Rounds	Av. % Hits
Air to Air	7	2800	
Air to Ground-Sea	1	400	

25 YARDS RANGE 1250 ROUNDS — No. OF CINE GUN EXERCISES 6

400 " " — SPOTLIGHT TRAINER, HOURS 40

GROUND GUNNERY:

Browning Gun	5	Gun cleaning	5
Vickers Gun (Whitley only)		Recognition	5
Frazer Nash Turret	4	Range Estimation	5
Sighting	4		
Aircraft Recognition	5	Final Assessment	5

REMARKS:

Average, has to be continually "pushed".

Exercises not carried out:- NIL

Operational sorties from O.T.U.:- NIL

Whether recommended for commission:- NO

(To be assessed numerically 1 - 9)

Confidence 5 Initiative 5

Coolness 5 Determination 5

As Operational Air Gunner 5

Remarks: Could improve greatly if he wasn't inclined to shirk his work. Average.

F.W.S. Turner S/Ldr.
for Wing Commander, Commanding,
Training Wing, No.23 O.T.U.

ROYAL CANADIAN AIR FORCE

R.C.A.F. R. 45
15M-11-40 (8336)
H. Q. 1062-2-126

Individual Record of Flying

J. A. T. P. CANADA

RANK SGT. No. R117670 NAME COMEAU, P.E.

Unit	Period Ending	Serial No.	Single-Engine Aircraft Day 1st Pilot (A) Hrs	Mins	Single-Engine Aircraft Day 2nd Pilot (B) Hrs	Mins	Single-Engine Aircraft Day Dual (C) Hrs	Mins	Single-Engine Aircraft Night 1st Pilot (D) Hrs	Mins	Single-Engine Aircraft Night 2nd Pilot (E) Hrs	Mins	Single-Engine Aircraft Night Dual (F) Hrs	Mins	Multi-Engine Aircraft Day 1st Pilot (G) Hrs	Mins	Multi-Engine Aircraft Day 2nd Pilot (H) Hrs	Mins	Multi-Engine Aircraft Day Dual (J) Hrs	Mins	Multi-Engine Aircraft Night 1st Pilot (K) Hrs	Mins	Multi-Engine Aircraft Night 2nd Pilot (L) Hrs	Mins	Multi-Engine Aircraft Night Dual (M) Hrs	Mins	Crew Duties Observer (N) Hrs	Mins	Crew Duties Air Gunner (O) Hrs	Mins	Crew Duties Other (P) Hrs	Mins	Passenger (Q) Hrs	Mins	Total (R) Hrs	Mins
No. 5 B&GS Dafoe	25/5/42																												18	05					18	05

23 O.T.U.

J. A. T. P. CANADA

R.C.A.F. T. 82
5M—11-40 (8313)
H.Q. 1062-13-65

1. AGS

ROYAL CANADIAN AIR FORCE

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

AIR AND GROUND TRAINING

Surname COMEAU Christian Names P.R.

Number R117670 Rank LAC

INSTRUCTIONS

1. At the conclusion of each stage of training this report must be completed and forwarded as indicated below in sufficient time to arrive on or before the date on which the pupil reports for the commencement of the next stages of training:—

Original and Duplicate—From Wireless School to Bombing and Gunnery School.

2. On completion of training, the original is to be placed on the pupil's personal file and the duplicate forwarded to Air Force Headquarters through Command Headquarters.

3. In the event of the discontinuance of training at any stage, the duplicate is to be forwarded to R.C.A.F. Headquarters through Command Headquarters with full particulars as to the cause of discontinuance of training and instructor's report as to the reasons for the pupil's failure and the original is to be placed on the pupil's personal file.

4. A pupil will be entitled to "Pass" if he obtains not less than 60 per cent of the total marks in the Written, Practical and Oral Tests, and not less than 50 per cent in each of the separate subjects included in this Test.

PART I

WIRELESS TRAINING

1. No. 1 Wireless School. Course No. 32 To 23.5.42 From 8.12.41

2. *Flying Times*—

(*a*) In Flying Classroom as 1st Operator.....hours.

(*b*) In Flying Classroom, listening watch.....hours.

(*c*) In 2-seat aircraft as sole operator.....hours.

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

Above average
Average
Below average

4. *Ground Training*—

Subject	Maximum marks	Marks obtained	Subject	Maximum marks	Marks obtained
Theory	50		Signals Organization	150	
Radio Equipment	250		Armament	100	
Morse (buzzer and lamp)	200		Drill and P.T	50	
Procedure	200		TOTALS	1000	

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

Position in Class..... No. in Class.....

5. Date authorized to wear Wireless Operator's Badge.....

E. J. Doran F/O

CERTIFIED TRUE COPY

PART I—*Concluded*

WIRELESS TRAINING

6. ~~Comments as to suitability for Commissioned rank:—~~ Ceased Training 4.3.42. This Airman commenced training with the 28th entry and was put back to the 32nd entry for inability at morse. Ceased training for inability at morse- average on all other subjects. It is recommended that he be remustered to Straight Air Gunner after 3 months Standard General Duties Posted to C.T.S., Trenton, effective date 19.3.42. reporting same date.

(Signed).....
Officer Commanding
No. 1 Wireless School

Date 4.3.42.

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

PART II

ARMAMENT TRAINING

1. No. 5 B. G. S. Course No. 30

2. Dates of Courses:— From 27.4.42. To 25.5.42.

AIR TRAINING

GUNNERY

3. *Flying Time:—*

Aircraft	Day	Night	Passenger	Total Hrs. Mins.
Battle	18:05			18:05

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

(*a*) Beam Test ..... 18 %
(*b*) Beam Relative Speed Test ..... 10 %
(*c*) Under Tail Test ..... 10¼ %

5. *Total Rounds Fired—*

Ground ..... 550 %
Air to Ground ..... 300 %
Air to Air ..... 1950 %
Tracer 300

6. *Assessment—* Marks Obtained

(*a*) Written Examination ..... (100 Marks) 51
(*b*) Practical and Oral Examination ..... (100 Marks) 71
(*c*) Ability as Firer ..... (250 Marks) 175
(*d*) Qualities as an N.C.O ..... (150 Marks) .....

Totals ..... 450 ..... (~~600~~ Marks) 297

7. Position in Class 28 No. in Class 32 Pass or Fail P.

8. Date authorized to wear Air Gunner's Badge 25.5.42.

9. ~~Comments on~~ Numerical assessment as to suitability for Commissioned Rank 165

10. Remarks A ~~[illegible]~~ good gunner. Speaks French and English. Has a fair practical knowledge of guns.

P.H. Lowe Holmes W.C.
Chief Instructor
No. 5 B. G. S.

Date 25.5.42.

PART II—*Concluded*

AIR TRAINING

11. *Final Assessment* (to be completed at B. G. S.)

Course	Maximum Marks	Marks Obtained
Wireless School	1000	
Bombing and Gunnery School 450	~~600~~	297
TOTALS 450	~~1600~~	297

12. Percentage 66 Pass or Fail ..... Position in Class .....

No. in Class .....

13. Recommended for Commissioned Rank ..... (*yes or no*) Assessment ..... (*ex., above average*)

14. Remarks Concur in para. 10

Flt Lieut Holmes W/Cdr for G.C.
Officer Commanding
No. 5 B. G. S.

Date 25.5.42

Altitude Tolerance Test 16/6/42.

Ascents.	Alt.	Duration	Symptoms.
2.	35,000 ft.	1:25	Mod.
		2 hrs.	Nil.

~~Unfitted for flying to 35,000 ft.~~

Fit for flying to 25,000 ft only.

Sheet Destroyed, date.....
Date of last entry.....
Number of cases of drunkenness.....
Date of last instance of drunkenness.....

J. A. T. P. CANADA

ROYAL CANADIAN AIR FORCE

GENERAL CONDUCT SHEET

OFFICIAL No. R117670 NAME AND INITIALS COMEAU J.N.P.E. (IN BLOCK LETTERS) DATE OF ENLISTMENT 24-7-41

SHEET No. ONE (IN WORDS) SIGNATURE AND RANK OF C.O. for (R.M.Smith) Wing Commander F/LT DATE 18-10-41

UNIT AND PLACE	Date of Offence	Rank	Cases of Drunkenness (in red)	OFFENCE	Names of Witnesses	Punishment awarded	Date of award or of order dispensing with trial	By whom awarded	Initials and Rank of Officer making entry and Remarks, with Date
3 P.R.C. Bournemouth	28/8/42	Sgt.		W.O.A.S. (1) Breaking from the ranks whilst being marched from the parade ground (Odeon Car Park) to Lewis Road. (2) Absent from 1415 hrs 28-8-42 until reporting to F/Sgt Gardner on the 0845 hrs parade 29-8-42: Absent 18 hrs 30 mins: Auth F.281		Admonished	29/8/42	S/Ldr. Sinclair	Forfeits one days pay under K.R & ACI Para 3470 [illegible] F/O 10/9/42
				To be carried over					

R.C.A.F. R. 71
50M—1-41 (8774)
H.Q. 1062—3-53

				Brought forward					
				CERTIFIED NO FURTHER ENTRIES	G. T. Evans P/O	Adjutant, No 7 AGS RAF		Station, Stormy Down	6.10.42
				CERTIFIED NO FURTHER ENTRY	[illegible]	F/L Adj No 2 Wing		No 23 O.T.U	7. 1 43

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

ROYAL AIR FORCE

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

Official No. CAN/R117670 Name COMEAU Joseph Napoleon Pascal Eugene Rank T/Sgt.
(In full in block capitals, surname first). (Or acting appointment).

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

Date of Birth 12.3.19 Religion R.C. Occupation in Civil Life Waiter: Clerk

Last Enlisted 24.7.41 Current Engagement D of W.

If a member of the Auxiliary Air Force

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

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

Mr E. Comeau (Father) Godbout, Quebec

Name, address and relationship of person (or persons) to be informed of casualties (to be entered in pencil).

(If this person is the legal next of kin, it is only necessary to insert here "Next of Kin.")

N of Kin

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

Section 1.—Movements and Casualties.

Unit FROM which.	Unit TO which.	Date of Effect.
5 B & G	1 Y Depot H'fax	26.5.42
1 Y Depot	RAF TP	3.7.42
	Emb. Can	5.7.42
	UK.	18.7.42
(Pst 420)	3 PRC	19.7.42
	7 A.G.S.	9/9/42
7 A.G.S.	23 O.T.U	6.10.42
23 O.T.U	1659 Con Unit	4.1.43
1659 Con. Unit	408 Sqdn.	22.2.43
408 Sqdn	C.L. (Dominion)	Section
	Ruislip	27/28-5-43

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

* Authority.	Description.	Date of Effect.
	Enlist AC2 Por OST)	24.7.41
	Reclass LAC	12.11.41
	Remust A/G STT)	30.3.42
	Promoted T/Sgt A/G Spec (2)	25.5.42
POR 244/42	ATTENDED GUNNERY COURSE AT STORMY DOWN ON 16/9-5/10/42 OBTAINED 72 % CLASS "B"	

Section 3.—Good Conduct Badges.

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

FORM 64 issued

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

Wt. 23173/1099 357M 8/41 McC. & Co. Ltd. 51-994.

Lan

Section 4.—Character and Trade Proficiency.

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

Rank.	Character.	Trade Classification.	Proficiency. A	Proficiency. B	Proficiency. C	Whether specially recommended, recommended, or not recommended for promotion or reclassification.	Date.	Signature and Rank of Commanding Officer.
T/Sgt	V.G	Air Gunner	On Strength for Training Only				6.10.42	[signature] F/L
T/Sgt	VG	A/G	ON STRENGTH FOR TRAINING ONLY				4.1.43	[signature] S/L
Sgt.	V.G	A/G	"	"	"	" "	22.2.43	[signature] W/O
Sgt	V.G.	A.G	Sat	Sat	—		27/28.5.43	[signature] S/L
POR 8/43	Priv Leave	22.4.43/28.4.43 (7 days + 48) R.H. Issued						A J Bond F/L
POR 5/43	Priv Leave	30.12.42/3.1.43 (5 days) R.H. Issued						A J Bond F/L
POR 25/43	Priv Leave	8.3.43/14.3.43 (7 days) R.H. Issued						A J Bond F/L

Record of Leave and Issue of Free Travelling Warrants

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

Section 5.—Results of Courses of Instruction, Recommendations for Aircrew Duties, Recommendations for Commissioned Rank (K.R. 2132, (19) (A)). Decorations, Mentions, Special Commendations by A.Os.C., etc.

Authority.	Nature.	Date of Effect.

INTERVIEW REPORT

R.C.A.F. Special Reserve

AGE..... 22
HEIGHT..... 5'6½
WEIGHT..... 132

SURNAME........ COMEAU

CHRISTIAN NAME.. JOSEPH PASCAL EUGENE

MARRIED........ NO ....NO. OF CHILDREN.... N.A.

N.F.

FLYING: PILOT.......... OBSERVER.......... W.A. GUNNER.... X

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

High School............Technical........Commercial.

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

..4. yrs. classical University Sacre Coeur Bathurst

Standing other Countries..........................

FLYING EXPERIENCE:- Total hours

Commercial Hours Solo... N O N E ....Dual..........

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

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

N O N E

MILITARY AND OTHER TRAINING:-

Military - none

Civilian - 1 yr. as clerk, 3 yrs. as waiter in restaurant.

SPORTS:-(What branches).. Tennis, badminton, squash.

HOBBIES:-..... Reading.

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

Intelligent, keen to serve Recommendable.

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

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

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

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

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

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

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

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

REFERENCES CHECKED
24/7/41 (initials)
(Date) (Initials)

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

CONSIDERED SUITABLE FOR COMMISSIONED RANK?....... NO

BEST FITTED FOR........ training as W.O. Air Gunner

DATE:
23-7-41.

RECRUITING CENTRE:
Montreal, P.Q.

A.L.L. Lapointe F/O for
~~J.P. Desloges Sq. Ldr.~~
Signature of Officer

A.F.M.5

air crew wireless air Gunner Std.

ROYAL CANADIAN AIR FORCE

J. A. T. P. CANADA

RECORD OF SERVICE AIRMEN R.C.A.F. Special Reserve

A.F. No.	Surname	Christian Names	Religion
R-117620	Comeau	Joseph-Napoleon-Pascal-Eugene	Roman Catholic

Born 12-3-19 Place Godbout, Que. Country Canada Citizen of Canada Racial Origin Canadian

ENLISTMENT	CIVIL EDUCATION			PREVIOUS SERVICE
Date 24-7-41	High School Entrance	Jr. Mat.	Sr. Mat.	N.A.
At Montreal, Que	Technical School	Corres. Courses		
Term Duration of War	University 4 yrs.			

Rank	Date			Med. Cat.	Date		
AC2	24	7	41	A3B	22	7	41
LAC	12	11	41				
Sgt(T)(Pd)	25	5	42				

CIVIL OCCUPATIONS AND EXPERIENCE

Waiter 1937-40
Clerk 1940-41
ass't. Trop. 1941-41

COURSES AND TRADE TESTS

Trade	Grp.	%	PorF	Date Rem.			Trade	Grp.	%	PorF	Date Rem.
WO/AG				24	7	41					
Ceased Training			DRO 61	4	3	42					
Remus A/G			DRO 92	30	3	42					
Remus A.G. (Spec Exp)			DRO 145	25	5	42					

PARTICULARS OF FAMILY M S W

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. Eugene Comeau (Father)
Godbout, Que.

LEAVE

From	To	Auth. and Description
5-3-42	19-3-42 F.W.S.M.	14 days Special leave
Issue S.L.T.W. #544452	4-3-42	DRO 65/42

CHARACTER AND TRADE ASSM. HONOURS, AWARDS AND MENTIONS

Date	Character	Trade and Assm.	Honours and Awards	Signature
			A.G. Badge	DRO 145

MOVEMENTS AND CASUALTIES

Authority	Unit from	Unit to	Date	Authority	Unit from	Unit to	Date
MO.R13	R.C. MTL. Que	#4.A.M.D. St Hubert Que	24-7-41	LGRO 198	1 Y Depot	RAFTP	3-7-42
						Emb Can	5.7.42
						Disemb. U.K.	18.7.42
DRO 71/41 T.O.S.	4th MD	St. HUBERT	24-7-41	199/42 (5/50)	(2 F 420)	3PRC	19.7.42
DRO 103/41	#5A.MD. clean Tr	#3.T.C. Montreal	28.8.41	243/42 (18/64)	3PRC.	7.A.G.S.	9.9.42.
DRO202	#3TCHQ	No1 W.S.	11-10-41	244 (27/71) 252/42 (13/69)	7A.G.S.	23 O.T.U.	6.10.42
DRO 55	#1 W/S Mtl	C.T.S. Trenton	19-3-42	6/43 (5/16) 3/43 (33/12)	23. O.T.U.	1659 C.U.	4.1.43
				15/43 (39/43) 20/43 (24/47)	1659 C.U.	408 Sqdn.	22-2-43
SOS-DRO 107	M.T.S. Trenton	5 B&G. Dafoe	25-4-42				
DRO 126	admitted	Stn. Hospital	4-5-42	Missing	408 Sqdn	C.R. 324	27-5-43
DRO 130	Discharged	Stn Hosp.	8-5-42	Missing B. Killed C.R. 375			
DRO 145	No 5 B&G	No.1 "Y" Depot	26-5-42	P. Deade C.R 383.			

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

(OVER)

				Attended (No 85 A.G. course) at Stoney Down from 16.9.42 to 5.10.42 & obtained 72% "B" T.A.G.S. 2444 (21/41)			
				3 P.R.C. 237/42 (19/65)	Absence	Time Forfeited 1415 hrs. 28.8.42	0830 hrs. 29.8.42	No of days. 1.

Finger Printed
Date 24-7-44
Initials EB

ALL RANKS.

REMEMBER—Never discuss military, naval or air matters in public or with any stranger, no matter to what nationality he or she may belong.

The enemy wants information about you, your unit, your destination. He will do his utmost to discover it.

Keep him in the dark. Gossip on military subjects is highly dangerous to the country, whereas secrecy leads to success.

BE ON YOUR GUARD and report any suspicious individual.

Form 64
(Formerly Book 64) (Part 1)

ROYAL AIR FORCE

AIRMAN'S SERVICE BOOK

Instructions to Airman.

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

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

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

4. You **must not alter or make any entry** in the book, and disobedience of this order will be treated as a **serious offence.**

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

6. If an airman wishes to make a short Will (for specimens see p. 9) he should do so on p. 10. It must be signed by him in the presence of two witnesses, **both** of whom must sign it in **his** and in **one another's** presence; but if the Will is made by an airman on active service, or under orders for active service, it does not require any witnesses' signatures. The full names and addresses of the persons whom he desires to benefit, and the sum of money or property which he desires to leave them, must be clearly stated.

It is also desirable that he should name a person to act as executor.

51-1773 Wt.35034/2226 609m 11/41 F.W.W. & Co. 37460

LADbroke 0323
Batch-
3 Liddell Gardens
London N.W.10

Sub. F667B Issued 12/11/42
FHLt.

4

ACCOUNTANT OFFICER
12 NOV 1942
R.A.F. PERSONNEL

Leave granted with Free Railway Warrant

From (date)	To (date)	Signature of Officer

PRESCRIPTION FOR SPECTACLES.

Vision without Glasses	SPH	CYL	Axis Standard Notation	Vision with Glasses	Ophth. Centre	Date of Exam.
					Frame No. (or measurements)	Date of Issue
						Optician's Initials

Signature of M.O. ....

PARTICULARS OF ARTIFICIAL DENTURES.

Particulars	Dental Centre	Date	Signature and Rank of D.O.

BLOOD GROUP.

Moss and International	Date	Signature and Rank of M.O.

IDENTITY CARD AND PERMITS ISSUED

Date of Issue	Form No.	Serial No.	Signature and Rank of Officer making Entry	Disposal
22. 7. 42.	1250	1493336	M.F. Arkell. F/O	In possession of airman.

RANK AND R.A.F. TRADE

Rank or Classification	Date of Effect	Authority.	Signature and Rank of the Officer making the Entry.
Sgt.	25.5.42.	Form. 1580	M.F. [illegible]

Trade.	Date of Effect.	Authority.	Signature & Rank of the Officer making the Entry
A.G.	25.5.42.	Form. 1580	M.F. [illegible]

Medal, Clasps, Decorations, Mentions.

Particulars	Date and Authority	Signature and Rank of Officer

WILL.

This is the last will and testament of

Dated this..................*day of*..............................19..........

Signed by the above named ....
....
as his last will and in the presence of us both being present at the same time, who in his presence and in the presence of each other have hereunto subscribed our names as witnesses.

....
(Airman making Will to sign here.)

Name ....
Address ....
....

Name ....
Address ....
....

Witnesses.

SICKNESS WHILST ON LEAVE.

1. If when on leave or pass you are a contact of an infectious disease, you will notify your C.O. forthwith, and send a medical certificate showing the date of last exposure to infection.
   An individual on leave or pass, who requires medical aid, must if practicable, report to the nearest Naval, Military or Air Force Hospital or Sick Quarters, or other establishment where a Service Medical Officer is employed, or a Civil Hospital included under the Ministry of Health Emergency Scheme. If you should reside more than 2 miles from a Service Medical Establishment, and are unable, owing to your condition, to visit an Emergency Medical Service Hospital, although this may be within 2 miles, application may be made to a Civilian Medical Practitioner, to whom you will show this form ; fees will then be allowed in accordance with the following scale.

VISIT, MEDICINE AND CERTIFICATES.

	Visit to Surgery	At Patient's Residence.	
		If not more than 2 miles away	Greater Distances.
	s. d.	s. d.	
Day	3 0	4 6	For each additional mile or part of a mile (in one direction only) night or day 6d. with a limit of £1 a visit.
Night 22,00 to 07.00 ..	..	6 0	

2. The " Distance Fee " is payable in one direction only and in respect only of the first case visited when more than one patient is attended in the neighbourhood on the same occasion. The fee shown in the third column will be allowable for each patient after the first, subject to the maximum limit of £1 17s. 6d. a day for all services.
3. You will report the employment of a Civilian Medical Practitioner at once to your C.O. enclosing the Practitioner's certificate. Claims for medical attendance will be submitted by the Medical Practitioner on form 1667 to your C.O.
4. In all cases where a Civilian Medical Practitioner does not certify that you are unfit to travel, you should return to your unit on the expiry of your leave, or report to the nearest Service Hospital.
5. The Civilian Medical Practitioner should in all certificates state whether or not the individual is fit to travel.
6. If you are unfit on account of sickness, to return to your unit, and are receiving treatment from a Service Medical Establishment, the C.O. of such Establishment will immediately communicate the fact to the C.O. of your unit.
7. You are warned that you are liable to make good the extra expense incurred by engaging the services of a Civilian Medical Practitioner at a distance from your residence, without reasonable cause.

Missing 27/5/43

Official No. R117670 Surname COMEAU.

Christian Names in full JOSEPH. NAPOLEON. Pascal Eugene

Date of Birth 12. 3. 19. Religion R. C.

Occupation in Civil Life WAITER. CLERK.

Industrial Group —

Occupational Sub-Classification —

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

Date of (a) Attestation 24. 7. 41

(b) Calling Up, Mobilisation, or Embodiment

Terms of Service D. of P. E.

Signature of Airman Comeau

Mr. E. Comeau.

Father

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

Godbout

Quebec

Can.

Signature and Rank of Officer at time of making entries M. F. Arkell 3/1/0

Date of making Entries 12: 11: 42

CONFIDENTIAL

R.C.A.F. Special Reserve

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

ROYAL CANADIAN AIR FORCE

FILE NUMBER

Medical Board held at Montreal, P.Q. *Date* 23-7-41

Surname COMEAU *Chr. Names* JOSEPH NAPOLEON PASCAL EUGENE
Nature of Commission M-2-3 *Date of Birth* 12-3-19 *Married or Single* S
Branch Gen. List. *Hours Flown* None
Address 148 Champlain, Baie, Comeau, P.Q.

HAVE YOU ANY HISTORY OF:—

(i) NERVOUS TROUBLE or Nervous Breakdown NO
Severe or "Sick" Headaches, Migraine NO
Fits or Convulsions of any kind NO
Sun or Heat Stroke NO
Head Injury or Concussion (including "knock-out") NO
Insomnia, Nightmares, Sleep-walking, or Bed-wetting NO
(ii) LUNG TROUBLE or Consumption NO
Bronchitis, Pneumonia or Pleurisy Pneumonia 10 yrs. ago
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 NO
Malaria NO
Dysentery NO
(vii) EYE TROUBLE or Inflammation of Eyelids NO
Wearing of Glasses Yes at 15 for a year. NO
Colour or Night Blindness NO
(viii) EAR TROUBLE, Earache or Discharge from Ears NO
Deafness, Noises in the Ears, or Dizziness NO
Frequent Colds in Head, Catarrh or Obstruction NO
Prolonged Hoarseness or Loss of Voice NO
Sea, Car or Train Sickness NO
Discomfort on Swings, Roundabouts, Switchbacks NO
(ix) OPERATIONS adenoidectomy NO
(x) Any Illness or Injury not mentioned above NO

Education 4 yrs. classical course.
Present Occupation None Hobbies reading.
Previous Service None
Athletics tennis, badminton, squash, extensively.
Habits—Smoking 20 c.a.d. Alcohol none
FAMILY HISTORY—Consumption NO
Nervous Ailments, Mental Trouble, or "Fits" NO
Father Alive—Health good Dead—Cause
Mother Alive—Health good Dead—Cause
Brothers (3) Alive—Health good (1) Dead—Cause
Sisters (8) Alive—Health good (1) Dead—Cause

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

Date 23-7-41 *Signature* [illegible] *Witness* R. Charbonneau M.D.

GENERAL MEDICAL AND SURGICAL EXAMINATION

Impression given by *(a)* Physique.....good.....*(b)* Mentality.....

Body Marks, Scars, Deformities.....linear scar on left forearm.....

Size of Thyroid Gland.....N.....

Surgical Abnormalities.....None.....

Results of Wounds, Injuries, Operations.....none.....

	Date 23-7-41	Assessing Room	Date	Assessing Room	Date	Assessing Room	Remarks on any Abnormalities Found
Height (ins.)	65						
Weight (lbs.)	133½						*Date*
Chest Circumference (ins.)	33-35½						
Body Build (lbs.) +5	128						
Leg Length (ins.) 39½	N.A.						
Pulse Rate — Sitting	104						
Pulse Rate — Standing 1st	120						
Pulse Rate — Standing 2nd	76						
Pulse Rate — After Exercise	132						
Pulse Rate — Time to Normal	75						
Arterial Walls	soft						
Blood Pressure — Systolic	115						
Blood Pressure — Diastolic	70						
Heart — Size	N						
Heart — Sounds	N						
Heart — Rhythm	N						
Lungs	N						
Breath held	65						
Expiratory Force	NA						
Vital Capacity (Best of 5)							
Reflexes — Knee	N						*Date*
Reflexes — Ankle	N						
Reflexes — Triceps	N						
Reflexes — Abdominal	N						
Reflexes — Plantar	N						
Cranial Nerves							
	R. L.	R. L.	R. L.	R. L.	R. L.	R. L.	
Balancing Rod	2S	1S					
	R. L.	R. L.	R. L.	R. L.	R. L.	R. L.	
Self Balancing	NA						
Tremors — Fingers	none						
Tremors — Eyelids	none						*Date*
Abdomen — Liver	N						
Abdomen — Spleen	N						
Abdomen — Muscular Tone	N						
Urine — Albumen	neg.						
Urine — Sugar	neg.						
Initials of M.O.	RC						

40 mm. Hg. Test.....8/8 10 10/12 12 12/11 9 9/987/6 65 RC

Date.....

Date.....

Date.....

Date.....

Remarks by Consultant.

EYE EXAMINATION

History			
Visual Acuity	R. 20/25 , $\bar{c}$ 2.25 = 20/500		
	L. 20/20 , $\bar{c}$ 2.25 = 20/500		
Colour Vision	N. Ish.		
Red, Green	N.A.		
Diaphragm Test (P.D. =	N.A.)		
Convergence	C. = N.A. cms.		
	S. C. = N.A. cms.		
Accommodation	R. 15		
	L. 15		
Cover Test	N		
Fundi and Media	fit		
Fields	N		
Remarks:			
	Initials of M.O. RC	*Initials of M.O.*	*Initials of M.O.*
	Date 23-7-41	*Date*	*Date*

EXAMINATION OF EAR, NOSE AND THROAT

History

Hearing	R. Ear	w v 20 ft.		
	L. Ear	w v 20 ft.		
External Ear, Meatus Membranes	R. Ear	N		
	L. Ear	N		
Middle Ear, Eustachian Tubes	R. Ear	Pat.		
	L. Ear	Pat.		
Cochlear Apparatus	R. Ear			
	L. Ear			
Vestibular Apparatus	R. Ear			
	L. Ear			
Buccal Cavity		H		
Teeth		fit		
Gums		N		
Pharynx		N		
Nasopharynx		not seen		
Nose		no obstruction		
Larynx		not seen		
Remarks:				
		Initials of M.O. RC	*Initials of M.O.*	*Initials of M.O.*
		Date 23-7-41	*Date*	*Date*

HISTORY OF PRESENT CONDITION

Date 23-7-41

Average intelligence
Good physique
Does test quite well.

A3B

R Charbonneau M.D

D Hutton 76

OBSERVATIONS AND FINDINGS BY PRESIDENT OF BOARD

Date

MEDICAL CLASSIFICATION

Date	Category	Medical Board or Medical Exam. (Form No.)	Unit	Initials of M.O.
22.7.41	A1B A3B			

BLOOD GROUP

Date	International	Initials of M.O.

NIGHT VISUAL CAPACITY

Date	Score	Group	Initials of M.O.

PRESDEAD CR 383

1

Air Force ~~No.~~ R117610 Surname COMEAU.

Christian Names (in full) JOSEPH NAPOLEON P.E.

Date of Birth 12.3.19 Religion R.C.

Date of Enlistment/~~Appointment~~ 24.7.41

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

Occupation in Civil Life WAITER.

Signature of Holder

Name and Address of Next-of-Kin FATHER

MR E COMEAU

GODBOUT. QUE

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

Certified Correct [signature] for A.B. Mackenzie F/L

Date 1.4.43 Place RCAF O/S HQ

RAF Rank as at 1.3/43 Sgt. (AIR

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

Branch or Trade and Group	Date of Effect	Authority	Signature and Rank of Officer making Entry
AG(SPEC)	25.5.42		

Rank	Date of Effect	Authority	Signature and Rank of Officer making Entry
AC2	24.7.41		
LAC	12.11.41		
SGT.	25.5.42		

Missing 27/5/43

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

ROYAL CANADIAN AIR FORCE SERVICE BOOK

INSTRUCTIONS TO OFFICERS AND AIRMEN

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

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

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

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

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

Audrey Sheir
57 High Edson
Long Nottingham

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

MINISTÈRE DE LA DÉFENSE NATIONALE

MARINE ═══ ARMÉE ═══ AVIATION

DÉCLARATION TOUCHANT LA GRATIFICATION DE SERVICE DE GUERRE

NOM DU MILITAIRE DÉFUNT: Joseph Napoleon Pascal A. COMEAU
(PRÉNOMS) (NOM)

No DU REGISTRE: 32194
No DU DOSSIER:
DATE: 16-6-50
No MATRICULE: R-117670
GRADE DÉFINITIF: WO.II
DATE DE LIBÉRATION: 28-5-43

BÉNÉFICIAIRE: Mrs Maria Comeau,
ADRESSE: GODBOUT,
Saguenay Co., Quebec.

DATE À LAQUELLE LE SERVICE OUTRE-MER A ÉTÉ TERMINÉ: 28-5-43

	$ ¢
A. DURÉE TOTALE DU SERVICE DONNANT DROIT À LA GRATIFICATION	
NOMBRE DE JOURS 673 / 30 ÉQUIVALANT À 22 PÉRIODES COMPLÈTES @ $7.50	165.00
B. DURÉE DU SERVICE OUTRE-MER DONNANT DROIT À LA GRATIFICATION	
NOMBRE DE JOURS 328 MOINS 13 JOURS QUI NE SONT PAS ADMISSIBLES ÉQUIVALANT À 315 JOURS @ 25 CENTS PAR JOUR	78.75
VOIR L'ALINÉA 2 AU VERSO POUR L'EXPLICATION	
C. SUPPLÉMENT POUR LE SERVICE OUTRE-MER	
TAUX QUOTIDIENS LORS DE LA LIBÉRATION	
SOLDE $ 3.85	
INDEMNITÉ DE SUBSISTANCE OU INDEMNITÉ DE VIVRES ET DE LOGEMENT $ 1.25	
SOLDE SUPPLÉMENTAIRE $	
$	
$	
ALLOCATION FAMILIALE MILITAIRE 1/30 DE $ $	
TOTAL $ 5.10 X7 = $ 35.70	
NOMBRE DE JOURS 328 / 183 X$ 35.70	
VOIR AU VERSO POUR L'EXPLICATION DES ARTICLES A, B, ET C	63.99
D. GRATIFICATION DE SERVICE DE GUERRE	307.74
E. DÉDUCTIONS PAIEMENT EN TROP DE SOLDE ET ALLOCATIONS $	
ALLOCATION FAMILIALE MILITAIRE ET DÉLÉGATION DE SOLDE $	
AUTRES DÉDUCTIONS $	
F. MONTANT TOTAL PAYABLE ENGLISH COPY MAILED TO PAYEE	307.74
G. VOTRE PART DE LA GRATIFICATION EST—	
ALLOCATION FAMILIALE MILITAIRE QUI VOUS EST VERSÉE $ DE $ NIL =$	307.74
MONTANT TOTAL DE L'ALLOCATION FAMILIALE MILITAIRE VERSÉE $	

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

PRÉPARÉ PAR	VÉRIFIÉ PAR
EC	

TRÉSOR	
VÉRIFIÉ PAR	DATE
	27-6-50

Capt.
REPRÉSENTANT MILITAIRE

ΔTU

L CANADIAN AIR FORCE CASUALTY NOTIFICATION

ER R117670

RANK F/SGT (PAID) WITH EFF. 20-NOV-42. W.O.II (PAID) WITH EFF. 28-MAY-43.

UNIT 408 RCAF SQN OVERSEAS

TRADE AIR GUNNER (SP GR)

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

NAME COMEAU, JOSEPH NAPOLEON PASCAL EUGENE

MARITAL STATUS

RELIGION

CANADIAN

FRENCH CANADIAN

OTHER

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

ADDRESS

NAME
ADDRESS
D.A.B.

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

ADDRESS

AMENDED EXTRACT RE: RANK

FATHER'S NAME

ADDRESS

LIVING ON ENLISTMENT

MOTHER'S NAME

ADDRESS

LIVING ON ENLISTMENT

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 KNY-----POX891-----4-18-OCT-43.

PREVIOUSLY REPORTED "MISSING" 28-MAY-43 FOR OFFICIAL PURPOSES.

NOW "PRESUMED DEAD" 28-MAY-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 NI 21-11-44

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

FOR CHIEF OF THE AIR STAFF

ΔTS-RT 7

COPY FOR DOCUMENT FILE

15324

FORM 6

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* [illegible] *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: COMEAU (Block letters) — Given names: JOSEPH NAPOLEON PASCAL EUGENE

4. RESIDENCE — Street: Champlain Baie — No.: 148 — Official name of civil municipality or township: Comeau — Municipal county: — Province: Quebec

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

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

10. BIRTHPLACE (Province or Country): Quebec

11. DATE OF BIRTH: March (Month) 12th (Day) 1919 (Year)

12. AGE OF DECEASED — Years: 24 — Months: — Days: — If less than one day old ..... hrs. or ..... min.

OCCUPATION

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

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

15. Date deceased last worked at this occupation: May 28/43 — **16.** Total years spent in this occupation: Two

	17. NAME	18. BIRTHPLACE (Province or Country)
FATHER	Comeau, Eugene	Quebec
MOTHER (Maiden Name)	Martel, Maria	Quebec

19. Place of burial, cremation or removal

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

21. PLACE OF REGISTRATION OF THIS BURIAL

(a) Name of parish or church

(b) Civil municipality of

(c) Municipal county

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

Do not write in this space

CONFIDENTIAL MEDICAL CERTIFICATE OF DEATH

22. Date of death: May (Month) 28th (Day) 43 (Year) 19.....

23. I HEREBY CERTIFY that I attended deceased from ..... 19..... to ..... 19.....

and last saw h..... alive on ..... 19.....

24. CAUSE OF DEATH

I

Immediate cause — Give disease, injury or complication which caused death, **not** the mode of dying, such as heart failure, asphyxia, asthenia, etc.

(a) Provisionally reported missing after air operations, now for official purposes, presumed dead.

due to

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

(b) .....

due to

(c) .....

II

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

.....

.....

III If a communicable disease is mentioned on this certificate, give

(a) Date of appearance ..... 19.....

(b) Duration of disease ..... days

25. If a woman, was there a puerperal condition?

26. Was there a surgical operation? ..... Date of ..... 19.....

State findings ..... Was there an autopsy?

27. If death was due to external causes (violence) fill in also the following:—

Accident, suicide or homicide: Accident — Date: May 28th 19 43

Manner of injury: Presumed killed during air operations (How sustained)

Nature of injury

Specify whether injury occurred in **industry, in home, or in public place:** public place

Signed ..... M.D.

Address ..... Date ..... 19.....

28. Signature of person who fills in the form (curate, coroner, hospital authority, etc.)

For (R.C.A.F. Records Officer)

This signature authorizes the collector to accept this form as authentic.

29. Name of clergyman in charge of Register of Civil Status in which registration of this burial was made.

(Voir l'autre côté pour le français)

AIRMAN'S STATEMENT AT EMBARKATION

1. Number R117670 Rank Sgt. Name Comeau Pascal Eugene
Surname Christian names

2. Name of person to be notified in case of casualty J. E. Comeau
Godbout Saguenay County Prov of Que

Address ..... Relationship, if any Father

3. Alternative name of person to be notified in case of casualty .....

4. Legal next of kin James Eugene Comeau
Full Christian Names

5. Single, Married, Widower, Divorced, Separated Single

Full Christian names of wife .....

Address .....

6. If married, have you completed a Will since marriage? ..... If so state the Location .....

7. Have you completed the necessary documentation for Dependent's allowance? .....

8. Are Parents living? Father Yes Mother Yes

9. Parent's Names (If living give full Christian Names)

Father James Eugene Comeau

Address Godbout Saguenay County P. of Que.

Mother .....

Address .....

10. Your permanent home address Godbout Sag. Co. Prov. of Que

11. Religion R. C.

12. Have you Identification Discs and Card? Discs Yes Card No

Airman's Signature P. Comeau

Date 10/6/42

R.C.
Rec'd JUN 12 1942
O. K.

R.C.A.F. R. 78A
60M—8-41 (679)
H.Q. 1062-3-61

ROYAL CANADIAN AIR FORCE

OFFICER OR AIRMAN—REPORT ON ACCIDENTAL OR SELF-INFLICTED INJURIES OR IMMEDIATE DEATH THEREFROM

N.B.—To be rendered in accordance with the Instructions on Pages 3 and 4

1. Name COMEAU (Surname) Pascal Augene (Christian Names in Full)

Rank L A C Number R117670 Unit No. 5 B. & G. School Dafoe, Sask

Date and time of accident 3 - 5 - 42 18:30 Hrs. Place of accident (exact locality) Baseball Diamond Immediate vicinity of Airport.

2. Short statement by injured person of the circumstances of the injury (see Instruction 6). Signed statements of witnesses, or of persons to whom the injured person may have mentioned his injury, to be attached (see Instructions 7 and 9). While playing baseball on the night of May 3rd, I tripped and fell while running bases. I did not feel any pain, so walked to my hut. When I woke up in the morning my knee was swollen, so I came on sick parade.

N.B.—See Instruction 4 before completing the following Section.

3. (*a*) Type and R.C.A.F. No. of Aircraft N. A.

(*b*) Name of Pilot of Aircraft N. A.

(*c*) Number in Aircraft, including Pilot N. A.

(*d*) Crash occurred while: ~~*taking off*~~ ~~*landing*~~ *stationary* ~~*in air (collision)*~~ ~~*forced landing*~~
(strike out those not applicable)

(*e*) Weather N. A.

(*f*) In case of non-fatal crash does individual recall all events immediately preceding and following crash? N. A.

(*g*) Number of flying hours of person reported on: Dual N. A. Solo N. A.

(*h*) Duty: ~~*instructor*~~ ~~*pupil*~~ ~~*aircrew*~~ ~~*passenger other (specify)*~~
(Strike out those not applicable)

4. (*a*) Description of injuries:— Contusion left knee

(*b*) Are the injuries serious or of such a nature that they *might* be the exciting cause of disability later? No.

(*c*) Whether admitted to hospital or Sick in Quarters? Yes

Give name of hospital. Station Hospital No. 5 B. & G. School

(*d*) How long before initial treatment was given? 08:30 Hrs. 4 - 5 - 42.

Date 4 - 5 - 42. Signature of Medical Officer [illegible]

5. Commanding Officer's statement:—

(*a*) Was the injury sustained

(i) In the performance of air force duty? No.
(See Instruction 9)

(ii) In a game or other form of physical recreation definitely organized by or with the approval of the proper air force authority? No.

(iii) On leave? (State whether with or without pay) No

N.B.—See Instruction 8 before completing the following Section.

(*b*) If the answer to (*a*) (ii) is in the affirmative, state

(i) By whom was the game, etc., organized and under whose authority?

N.A.

(ii) The nature of the game, etc. (e.g., hockey, baseball, etc.) An unofficial baseball game on station area. Ball.

(iii) Was the Officer or airman detailed to take part in it (*a*) as a member of an air force team, or (*b*) to compete as an individual (a)

NOTE.—Questions (iv) to (vi) to be answered in addition only if the injury was sustained at practice.

(iv) For what service event was the practice held? N.A.

(v) Was the Officer or airman a selected representative of an air force unit practising under authority? No.

(vi) If so, under what authority and supervision? N.A.

(*c*) If sustained in a game, etc., but not in an organized game, state if there are any special circumstances which should be taken into account if and when the question of attributability comes to be decided by the Canadian Pension Commission:—

The injury was purely accidental and was sustained in an unofficial practice baseball game on the Station.

N.B.—See Instruction 12 before completing the following Section.

(*d*) Was the injury due to his own fault, i.e., did it arise from negligence, wilful disobedience of Orders, misconduct, or any blameworthy cause within his own control?

No. Purely accidental.

If so, state in what way N.A.

(*e*) Was anyone else to blame? If so, give name and particulars

No.

(*f*) Is the accident being investigated by

(i) Court of Inquiry? If so, state date and place No.

(ii) An investigating Officer? No.

Signature R.A. Delhaye
(R.A.Delhaye) Group Captain,
Commanding 5 B.G.S., RCAF., Dafoe, Sask.

Date: March 21st, 1942.

R.C.A.F. T. 82
5M—11-40 (8313)
H.Q. 1062-13-65

ROYAL CANADIAN AIR FORCE

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

AIR AND GROUND TRAINING

Surname Comeau Christian Names P.E.

Number R117670 Rank LAC

INSTRUCTIONS

1. At the conclusion of each stage of training this report must be completed and forwarded as indicated below in sufficient time to arrive on or before the date on which the pupil reports for the commencement of the next stages of training:—

Original and Duplicate—From Wireless School to Bombing and Gunnery School.

2. On completion of training, the original is to be placed on the pupil's personal file and the duplicate forwarded to Air Force Headquarters through Command Headquarters.

3. In the event of the discontinuance of training at any stage, the duplicate is to be forwarded to R.C.A.F. Headquarters through Command Headquarters with full particulars as to the cause of discontinuance of training and instructor's report as to the reasons for the pupil's failure and the original is to be placed on the pupil's personal file.

4. A pupil will be entitled to "Pass" if he obtains not less than 60 per cent of the total marks in the Written, Practical and Oral Tests, and not less than 50 per cent in each of the separate subjects included in this Test.

PART I

WIRELESS TRAINING

1. No. 1 Wireless School. Course No. 32 To 23.5.42 From 8.12.41

2. *Flying Times—*

(a) In Flying Classroom as 1st Operator - hours.

(b) In Flying Classroom, listening watch - hours.

(c) In 2-seat aircraft as sole operator - hours.

R.C.A.F Records Office
Rec'd. JUN 22 1942
O.K.
JB
R.C.
S.L.

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

Above average
Average
Below average

4. *Ground Training—*

Subject	Maximum marks	Marks obtained	Subject	Maximum marks	Marks obtained
Theory	50	-	Signals Organization	150	-
Radio Equipment	250	-	Armament	100	-
Morse (buzzer and lamp)	200	-	Drill and P.T	50	-
Procedure	200	-	TOTALS	1000	-

Maximum Marks, 1000. Marks Obtained - Percentage - Pass or Fail -

Position in Class - No. in Class -

5. Date authorized to wear Wireless Operator's Badge -

PART I—*Concluded*

WIRELESS TRAINING

6. Comments ~~as to suitability for Commissioned Rank~~— Ceased Training 4.3.42. This airman commenced training with the 28th entry and was put back to the 32nd entry for inability at morse. Ceased training for inability at morse - average on all other subjects. It is recommended that he be remustered to Straight Air Gunner after 3 months Standard General Duties. Posted to Composite Training School, Trenton, effective date 19.3.42, reporting same date.

Officer Commanding
No. 1 Wireless School

Date 4.3.42.

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

PART II

ARMAMENT TRAINING

1. No. 5 B. G. S. Course No. 30

2. Dates of Courses:— From 27.4.42. To 25.5.42.

AIR TRAINING

GUNNERY

3. *Flying Time:—*

Aircraft	Day	Night	Passenger	Total Hrs. Mins.
Battle	18:05			18:05

4. *Air Gunnery Results—*

	Average percentage hits to rounds fired
(*a*) Beam Test	18 %
(*b*) Beam Relative Speed Test	10 %
(*c*) Under Tail Test	10¼ %

5. *Total Rounds Fired—*

Ground	550 %
Air to Ground	300 %
Air to Air Tracer 300	1950 %

6. *Assessment—*

		Marks Obtained
(*a*) Written Examination	(100 Marks)	51
(*b*) Practical and Oral Examination	(100 Marks)	71
(*c*) Ability as Firer	(250 Marks)	175
(*d*) Qualities as an N.C.O	(150 Marks)	
Totals 450	(~~600~~ Marks)	297

7. Position in Class 28 No. in Class 32 Pass or Fail P.

8. Date authorized to wear Air Gunner's Badge 25.5.42.

9. Numerical assessment as to ~~Comments on~~ suitability for Commissioned Rank 165

10. Remarks. A ~~fairly~~ good gunner. Speaks French and English. Has a fair practical knowledge of guns.

P. H. Lowe Holmes W.C.
Chief Instructor
No. 5 B. G. S.

Date 25.5.42.

Part II—*Concluded*

AIR TRAINING

11. *Final Assessment* (to be completed at B. G. S.)

Course	Maximum Marks	Marks Obtained
Wireless School	1000	
Bombing and Gunnery School 450	~~600~~	297
Totals 450	~~1600~~	297

12. Percentage 66 Pass or Fail .... Position in Class ....

No. in Class ....

13. Recommended for Commissioned Rank .... *(yes or no)* Assessment .... *(ex., above average)*

14. Remarks Concur in para.10

P.M. Lowe Holmes W/Cdr. for G.C.
Officer Commanding

No. 5 B. G. S.

Date 25.5.42

BAIE COMEAU COMPANY

BAIE COMEAU, QUE.

MONTREAL OFFICE

Juillet le 21, 1941.

Mon cher Henri,

Le porteur est Pascal Comeau de qui je t'ai parlé au telephone la semaine derniere. C'est un type un peu timide mais tres willing.

Il est natif de Gobout ~~sur~~ la cote Nord et je crois sincerement qu'il fera un bon membre de la force aérienne. Il est adroit, assez bon athlete, tres sobre et plein de bonne volonté.

Ici il a travaillé trois ans pour moi a faire un peu de tout et je suis certain qu'avec un peu d'entrainement il sera O.K.

Si tu peux faire quelquechose pour lui je l'apprecierai beaucoup.

Bien a toi,

Fred

J. A. Duchesneau

R.C.A.F. Records Office
Rec'd. AUG 7 1941
O. K. ..... C. I. B. .....
R. C. ..... N. I. .....
S. L. ..... P. A. .....

CORPORATION DE LA VILLE DE BAIE COMEAU 1937

BAIE COMEAU, P.Q.

le 21 juillet, 1941.

A QUI DE DROIT:-

Monsieur Pascal Comeau porteur de cette lettre habite Baie Comeau depuis environ trois ans, au cours desquels j'ai eu l'occasion de le connaître et l'apprécier.

Je n'hésite pas `a le recommander comme un jeune homme honnête, sobre, actif et travailleur et capable de beaucoup d'initiative.

VILLE DE BAIE COMEAU.

M. Carpentier.
Ass't Sec. Trésorier.

MC/TR

R.C.A.F. Records Office
Rec'd. AUG 7 1941
O.K. ..... C.I.B. .....
R.C. ..... N.I. .....
S.I. ..... P.A. .....

BAIE COMEAU COMMUNITY ASSOCIATION

BAIE COMEAU, P.Q.

July 21st. 1941.

R. C. A. F., Recruiting Centre,
Bishop Street, MONTREAL.

Dear Sirs,

This is to certify that the bearer Pascal Comeau, was in the employ of the Association for a period of three years until last fall when he left our employ of his own accord.

I am pleased to state that I have always found him very honest, sober and reliable. He is well educated and very desirous of learning. He has a very good character and is anxious to enter the Air Force.

If he is accepted I am positive he will prove himself worthy of the task he is to tackle.

Yours very truly,

J.A.Duchesneau
Manager-Baie Comeau Community Assc.

JAD/RC.

R.C.A.F. Records Office
Rec'd. AUG 7 1941
O. K. ..... C. L. B. .....
R. C. ..... N. F. .....
S. L. ..... P. A. .....

R.C.A.F. Special Rese

N° MATRICULE R.117670 VERSÉ À No.4-A Manning Depot St.Hubert MÉTIER Wireless Air Gunner Std.

CORPS D'AVIATION ROYAL CANADIEN
(FORMULE D'ENGAGEMENT)

(Le postulant devra répondre de sa propre main aux questions des pages 1 et 2)

1. Nom COMEAU Prénoms en entier JOSEPH NAPOLEON PASCAL EUGENE
2. Adresse actuelle 1211 Drummond Montreal P.Q. Téléphone
3. Adresse fixe 148 Champlain Baie Comeau P.Q.
4. Lieu de naissance Godbout P.Q. Nationalité Canadien
5. Date de naissance 12 mars 1919 Marié, célibataire, veuf, séparé, divorcé Celibataire
6. Enfants

Nom	Date de naissance	Nom	Date de naissance
P.A.			

7. Profession Journalier 8. Religion Catholique ~~Roamin~~ Roman (Indiquez la confession religieuse)
9. Langues Francais et Anglais courament (Degré de connaissance)
10. Plus proche parent (nom en entier) Eugene Comeau Degré de parenté Pere
    Adresse du plus proche parent Godbout P.Q.
11. Père (nom en entier) Eugene Comeau Lieu de naissance Godbout P.Q.
    Adresse Godbout P.Q. Nationalité Canadien
    Profession Inspecteur de Pecherie
12. Mère (nom de fille en entier) Maria Martel Lieu de naissance Quebec P.Q.
    Adresse Godbout P;Q. Nationalité Canadienne
13. Détails du service dans les armées de terre, de mer ou de l'air:

Unité	Lieu	Rang	Profession	Date du	Date au	Motif de la libération
N.A.						

R.C.A.F. Records Office
Rec'd. AUG 7 1941
O.K. [signature] C.I.B. RH
R.C. BD N.I.
S.L. P.A.

14. Honneurs, récompenses, citations AUCUNE
15. Faites-vous actuellement partie de la réserve de quelque armée de terre, de mer ou de l'air? NON
16. Avez-vous déjà demandé de faire partie du C. d'A.R.C.? NON Si oui, où? P.A.
    Quand? P.A. Résultat P.A.
17. Avez-vous déjà réformé de quelque service armé de Sa Majesté pour inaptitude physique? NON
    Si oui, indiquez la nature de l'infirmité N.A.
18. Avez-vous jamais touché ou touchez-vous actuellement une pension de réforme? NON
    Si oui, indiquez la nature de l'infirmité P.A.
19. Avez-vous jamais été trouvé coupable de délit? NO N Si oui, indiquez-en la nature P.A.
20. Avez-vous des dettes? OUI Si oui, donnez des détails Hudsons Bay Co. Bay Comeau ($50.00)

R.C.A.F.—R.100a
20M—4-41 (88)
Q.C. 1052-3-83

135-115

21. Éducation:

—	Nom de l'école	Date du	Date au	Cours, sujets, etc.
Instruction primaire—Ecole publique ou séparée	Godbout School Godbout P.Q.	1924	1932	Primaire
Cours supérieur—Collège, etc.				
Cours technique	University Sacre-Coeur Bathurst N.B.	1933	1936	Cours Classic.
Autres cours universitaires ou scolaires				
Cours par correspondance				

22. Emplois civils (détails au complet):

Employeur et lieu	Fonctions, métiers, positions	Date du	Date au	Motif du départ
Sans emploie de ~~Sans emploie de~~		1932 ~~19~~	1933	
Baie Comeau Community Ass'n	Waiter	1937	1940	Meilleure Place
V. Jobin Baie Comeau P.Q.	Commis	1940	1941	Meilleure Place
Traveau Public Baie Comeau P.Q.	Ass't Inspecteur	1941	1941	Joindre le C. d'A.R.C.

23. Heures de vol, seul AUCUEN accompagné AUCUNE avec passager AUCUNE

24. Qualités spéciales, passe-temps favoris, etc., utiles dans le C. d'A.R.C.

AUCUNE

25. Sports pratiqués, et dans quelle mesure, soit intensément, ou modérément, ou occasionnellement

Tennis, Badminton, Skuash Moderement

26. Service aéronautique dans lequel vous voulez vous engager { ~~Service à terre.~~ / Service navigant.

Si c'est dans le service à terre, indiquez le métier aéronautique que vous visez W.A.G.

Si c'est dans le service navigant, indiquez votre préférence soit comme (a) pilote; (b) observateur; (c) mitrailleur ou (d) radiotélégraphiste (membre d'équipage). (Biffez les mots qui ne s'appliquent pas).

27. Nommez au moins deux personnes qui peuvent témoigner de votre réputation et de vos aptitudes:

Nom	Adresse	Profession
Alfred Ducheneau	Baie Comeau P.Q.	Gerant
Maurice Carpentier	Baie Comeau P.Q.	Ass,t Secretaire Tr esor
CG. Lane	Baie Comeau P.Q.	Surintendant.
H.A. Sawell	Baie Comeau P.Q.	Maire

28. Autres renseignements se rapportant à votre demande d'engagement

Aucune

29. Comprenez-vous bien que la vaccination, la revaccination et l'inoculation sont obligatoires? oui

Je, soussigné, certifie que les renseignements que j'ai fournis ci-dessus sont exacts, autant que je sache et que j'aie raison de croire.

Date 23 ~~juin~~ juillet 1941 Signature Pascal Comeau

NATIONAL REGISTRATION CERTIFICATE
REPRODUCED
JUL 2 4 1941

POUR L'USAGE DU DÉPARTEMENT SEULEMENT

(A) *Rapport de l'officier qui a eu une entrevue avec le candidat—*

Type d'homme.....Apparence générale.....

Aptitudes pour (indiquez à quel titre).....

Date.....Signature.....Grade.....

(B) *Rapport sur l'épreuve professionnelle—*

Métier sur lequel a porté l'épreuve.....

Résultat.....

Autres qualités professionnelles susceptibles d'être mises à profit dans le C. d'A.R.C.....

.....

Date.....Signature.....Grade.....

(C) **DÉCLARATION D'ENGAGEMENT DE LA RECRUE**

Je, soussigné, Joseph Napoleon Pascal Eugene COMEAU déclare solennellement que les renseignements ci-dessus mentionnés sont vrais et je m'engage, par les présentes, à faire du service actif dans le Corps d'aviation royal canadien, où que ce soit au Canada, de même qu'en dehors du Canada et outre-mer, pendant la durée de la présente guerre, ainsi que pour la période de démobilisation subséquente et, en tout cas, pour une période de pas moins d'un an, si Sa Majesté requiert mes services.

Date July 24th, 1941 19..... Pascal E Comeau
Signature de la recrue

(D) **SERMENT PRÊTÉ PAR LA RECRUE**

Je, soussigné, Joseph Napoleon Pascal Eugene COMEAU promets sincèrement et jure (ou déclare solennellement) que je serai fidèle et porterai loyale allégeance à Sa Majesté.

Date July 24th, 1941 19..... Pascal E Comeau
Signature de la recrue

(E) **DÉCLARATION DE L'OFFICIER CERTIFICATEUR**

J'ai averti la recrue susnommée que, si elle répondait inexactement à l'une quelconque des questions précitées, elle serait passible des peines prévues par la loi.

Les questions et réponses ci-dessus indiquées lui ont été ensuite lues en ma présence.

Je me suis assuré que la recrue comprenait chaque question et que sa réponse à chacune d'elles a été dûment inscrite telle que donnée et la recrue a fait et signé la déclaration, de même qu'elle a prêté serment devant moi,

à Montreal P.Q. ce 24ième jour de juillet 19 41

A. L. L. Lapointe — F/O — R.C.A.F. Recruiting Centre Mtl.
Signature de l'Officier — Grade — Unité

Finger Printed
Date 24-7-41
Initials E.B

POUR L'USAGE DU DÉPARTEMENT SEULEMENT

CERTIFICAT DE L'EXAMEN MÉDICAL

Partie 1. Renseignements obtenus de la recrue—

1. Age 22 2. Avez-vous souffert d'une des maladies suivantes·

(a) Rhumatisme No
(b) Tuberculose No
(c) Bronchite ou asthme No
(d) Affection cardiaque No
(e) Maladie du rein ou de la vessie No
(f) Gastrite intestinale No
(g) Hernie No
(h) Varices No
(i) Pieds plats ou déformés No
(j) Affection nasale No
(k) Maladies des oreilles No
(l) Maladies des yeux No
(m) Epilepsie No
(n) Maladie nerveuse ou mentale No
(o) Syphilis No
(p) Gonorrhée No
(q) Fracture No
(r) Autre maladie ou défectuosité Pneumonia 16 years ago

3. Avez-vous jamais porté des lunettes? Yes at 15

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

5. Pascal E. Comeau
Signature de la recrue

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

Observations des examinateurs none

Partie 2. Renseignements obtenus par l'examen médical. (La recrue doit être déshabillée)—

1. Marques distinctives ou cicatrices (si celles-ci sont opératoires, obtenir les détails)

2. Taille 5 pieds 5 pouces. 3. Poids 133½ livres.

4. Teint dark 5. Couleur des yeux brown Cheveux black

6. Développement {~~Bon~~ / Passable / ~~Médiocre~~} 7. Tour de poitrine—Expiration 33 pouces
Degré d'expansion 2 pouces

8. Ouie—Droite WV 20/f Gauche WV 20/f Tympan—Droit Fid gauche Fid

9. Vue—sans lunettes—droit 20/25 avec lunettes—droit No
gauche 20/20 gauche No

10. État de la bouche et des dents Healthy

11. Urine—Albumine neg Sucre neg

12. Anomalies révélées à l'examen (congénitales et pathologiques) none

Partie 3. Le candidat a été examiné conformément aux instructions de la brochure "Physical Standards and Instructions for the Medical Examination of Recruits" et jugé apte pour la catégorie.

H 3B

Part 2 Cont.

Observations spéciales des médecins none
V. Ray results not received

13. Reflexes N
14. Heart N
15. Lungs N
16. Blood Pressure S. D. 115-70
17. Colour Vision N Ish

Date 22-7-1941

R. Chorbonneau M.D.
Président

Membre

Membre