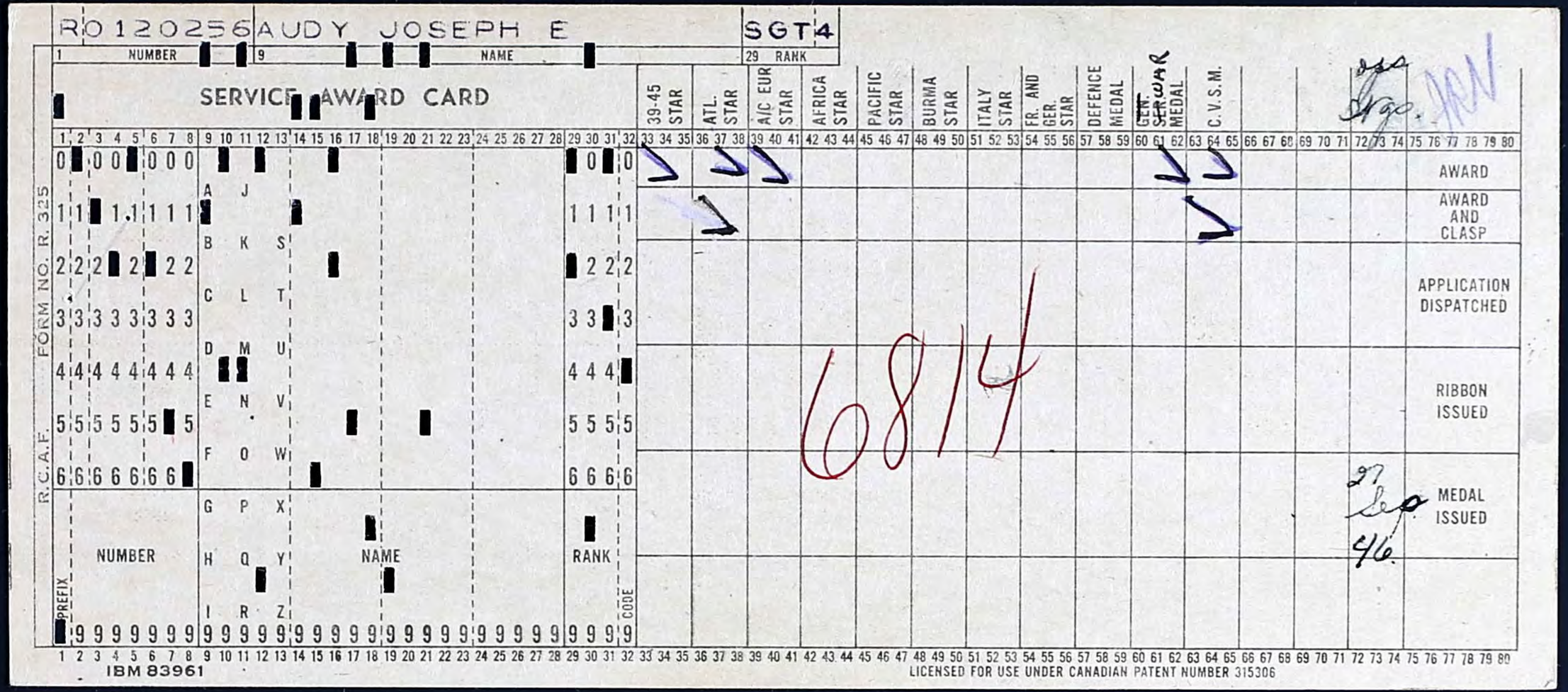
R120256
AUDY
JOSEPH ENGEL


R0120256 AUDY JOSEPH E
SGT 4
1 NUMBER
9 NAME
29 RANK
SERVICE AWARD CARD
R.C.A.F. FORM NO. R. 325
39-45 STAR
ATL. STAR
A/C EUR STAR
AFRICA STAR
PACIFIC STAR
BURMA STAR
ITALY STAR
FR. AND GER. STAR
DEFENCE MEDAL
GEN. SER. WAR MEDAL
C.V.S.M.
AWARD
AWARD AND CLASP
APPLICATION DISPATCHED
RIBBON ISSUED
MEDAL ISSUED
6814
27 Sep 46
PREFIX
NUMBER
NAME
RANK
CODE
IBM 83961
LICENSED FOR USE UNDER CANADIAN PATENT NUMBER 315306

4879. 2/5/50

Mrs. Mary E. M. ~~Audy~~ Gauthier (Re-married) (Widow)
7 ~~Bayard St.~~,
Quebec,
P.Q.

St. Mathias,
Rouville Co., Que.
7-9-49.

~~June 44~~

MEMORIAL BAR
DATE DESP
REGN. NO 1,010

10M—3-40 (4425)
H.Q. 1772-45-8

H.Q. FILE NO. 1022-A-955

NAME AUDY, Joseph Engelbert

REGT'L NO. R120256

RANK Sgt. Air Gunner UNIT ~~MISSING~~ PRESUMED DEAD

CABLE NO.	CABLE DATE	NATURE OF CASUALTY	CAS. LIST NO.	CAS. LIST DATE
		DATE OF DEATH: 3-March-43 MOTHER LIVING: YES WIFE: YES		
		MINISTERIAL CARD: Mar. 19-43 ROYAL MESSAGE: 14-2-44 MEMORIAL CROSS: 11-2-44		
		To wife To wife To wife		
		To wife 29-10-43 (french card) To mother		
		Mrs. J.E. Audy, 7 Bayard St., Quebec, Que. Mother- Mrs. Narcisse Audy, 54 Sulpicien, L'Epiphanie, Que.		R.C. NO 3TC

AIR FORCE No. R120256 R

SURNAME: AUDY, FULL CHRISTIAN NAMES: JOSEPH ENGELBERT

ENLISTMENT PLACE Montreal DATE 24-7-41 RE-ENLISTMENT

C.R. FILE NUMBER

RECORD OF SERVICE AIRMEN

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

7. BIRTH: DATE 2-11-13 PLACE Ste Thecle, P.Q. CITIZENSHIP British

FATHER (FULL NAME) Narcisse Audy deceased

BIRTHPLACE Ste. Thecle, P.Q.

MOTHER (FULL MAIDEN NAME) Melissa Trepanier

BIRTHPLACE Ste. Thecle, P.Q.

8. EDUCATIONAL STANDING

HIGH SCHOOL ENTRANCE X P.Q.

JUNIOR MATRICULATION

SENIOR MATRICULATION

TECHNICAL SCHOOL 3 yrs. Commercial-P.Q.

UNIVERSITY

CORRESPONDENCE COURSES

3

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

Clerk + Printer – 4 yrs.
Lumbering – 7 yrs.
Labourer – 1 yr.

8300

10. PREVIOUS ARMY, NAVY OR AIR FORCE SERVICE

nil

0

11. HONOURS-AWARDS, MENTIONS

	AUTHORITY	DATE
Air Gunner Badge	9-10-42	4BY240A/O

12. FLYING EXPERIENCE ON ENLISTMENT (HOURS)

SOLO — DUAL — PASSENGER —

13. RELIGION R. C. 1

14. LANGUAGES French fluently and a little English 2

15. SPORTS Baseball, Hockey,

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

WIFE (FULL MAIDEN NAME) Marie Elizabeth Marcelle Cote

PLACE OF MARRIAGE St. Thomas Ont. DATE 28-8-42

AUTHORITY (IF AFTER ENLISTMENT) 1Y 302

1

17. MARRIED ESTABLISHMENT

REMARKS	RANK	EFFECTIVE	D.R.O.

18. CHILDREN

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

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

FULL NAME: Mrs. Narcisse Audy RELATIONSHIP Mother

ADDRESS: L'Epiphanie, P.Q. D.R.O.

FULL NAME: RELATIONSHIP

ADDRESS: D.R.O.

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

RATE CHANGES ETC.	EFFECTIVE	D.R.O.	RATE CHANGES ETC.	EFFECTIVE	D.R.O.
Stpp. Pay. 33 RA	1/1/42	116BR71			
	12/24/10/42	4BY240A/O			
DA	15/9/42	1Y302			

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.
Ceases to be attd from 116 BR & K	1-4-42		1033
S/L T/W	T/20973	30-6-42	116BR157

22.(A) ADDRESS PRIOR TO ENLISTMENT

L'Epiphanie, P.Q.

23403

23. DOCUMENT CONTROL (INDICATE RECEIPT BY DATE)

R60	R79	B465	X-RAY	AM-13	IDN. CARD
13-8-41	DEC 18	20.8.41			
17.9.42					

AIR FORCE No. R120256/

AUDY, JOSEPH ENGELBERT

SURNAME — FULL CHRISTIAN NAMES

ENLISTMENT — RE-ENLISTMENT

PLACE Montreal

DATE 24-7-41

C.R. FILE NUMBER

RECORD OF SERVICE AIRMEN

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.) Temp. Duty in red ink

S.O.S. OR T.O.S.	UNIT AND PLACE	EFFECTIVE			D.R.O.
T.O.S.	4AmD. St. Hubert.	24	7	41	4AmD73
S.O.S.	4AmD. St. Hubert.	6	8	41	4AmD82
TOS	4MD Quebec.	7	8	41	4MD189
SOS	4M Depot Quebec	20	8	41	4MD199
TOS	1161BR1 Sgn Dartmouth (Advanced)	20	8	41	116BR45 -104
TOS	116(BR) Sgn. Dartmouth	21	8	41	116BR104
Att. to	Hqts. Dartmouth all but pay 3865/116	14	4	42	116BR90
SOS	116 BR	17	7	42	116BR172
20S.	4BG. Fingal	18	7	42	4BG.174
SOS	4 BGS Fingal	10	10	42	4BG 240 A10
T.O.S.	#1 Y Depot Halifax	11	10	42	1Y301
SOS	1 Y Dep to RAF Trainees Pool	27	10	42	1Y 317.
W.S.G.	Comp	30	9	44	
	Missing	3/4	3	43	RAF 48.
SOS	to Overseas	27	10	42	E551
	Missing	3/4	3	43	
	PX 6673	5	3	43	
	Presumed Dead	3	3	43	
	PCX 569	30	8	43	
19328	COMPLETED	25	4	45	

2. RECLASS'NS-PROMOTIONS-ETC.

RANK	EFFECTIVE			D.R.O.
AC2	24	7	41	4AmD73
AC1	24	10	41	116BR131
LAC	24	1	42	116BR25
6				
T/Sgt (pd)	9	10	42	4BG 240 A10

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.
22-7-41	R 100	A 4 B.	
Stn Hosp.	4-9-41		K252,
9-10-41	MFB.227	A 4 B.	
16-9-41	MFB 227	AT BT.	

4. TRADE AND CHARACTER

TRADE	GROUP	EFFECTIVE			D.R.O.
G.D.	S.	24	7	41	4AmD73
9308					
Air Gunner	SG	9	10	42	4BG240A0

TRADE PROFICIENCY	CHARACTER ASSESSMENT	DATE OF R41

5. COURSES-TESTS-ETC.

SUBJECT	RESULT	DATE			AUTHORITY
G.D.	50	19	8	41	4MD-#7

6. LEAVE

FROM	TO	DAYS	REMARKS	D.R.O.
18-9-41	9-10-41	21	Special sick leave cancelled	116BR69
23-12-41	29-12-41		Xmas	349 K345
1-2-42	15-2-42	14		116BR10 K8
1-7-42	15-7-42	14		116BR149
10-10-42	24-10-42	14	pre. embarkation	4BG240A10

R.C.A.F. OVERSEAS — ENLISTMENT MARTIAL STATUS — PRESENT MARTIAL STATUS — HIGH & TECH. SCHOOL EDUCATION — RELIGION — PROVINCE OF ENLISTMENT — DISCHARGE — AC

General Duties Standard

ROYAL CANADIAN AIR FORCE

R.C.A.F. Special Reserve

RECORD OF SERVICE AIRMEN

A.F. No.	Surname	Christian Names	Religion
R-120256	Audy	Joseph. Engelbert	Roman Catholic

Born 2-11-13 Place ~~L'Epiphanie, Que.~~ St. Thérèse Que. Country Canada Citizen of Canada Racial Origin Canadian

ENLISTMENT

24-7-41

At Montreal, Que.

Term Duration of War

CIVIL EDUCATION

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

Technical School Corres. Courses

University

PREVIOUS SERVICE

N. A.

Rank	Date	Med. Cat.	Date
AC2	24 7 41	A+B	23 7 41
A.C.1.	24 10 41	D.R.O. 131.	
LAC	24 1 42	DRO 25	
T/Sgt (PO)	9 10 42	DRO 240	

CIVIL OCCUPATIONS AND EXPERIENCE

Office Work 1929 - 1933
Printer 1933 - 1940
Laborer 1940 - 1941

COURSES AND TRADE TESTS

Trade	Grp.	%	PorF	Date Rem.	Trade	Grp.	%	PorF	Date Rem.
General Duties	Std		P.	22 7 41					
Air Gun	Spec	DRO 242		9 10 42					

PARTICULARS OF FAMILY

M. ~~S~~ ~~D~~

Wife	Maiden Name	Present Address (in pencil)
Cote, Marie Elizabeth Marcelle	28.8.42.	

Children	Names	Date of Birth	Place of Birth

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

Mrs. Narcisse Audy (mother)
L'Epiphanie, Que.

LEAVE

From	To	Auth. and Description
18-9-41	9-10-41	W.R.O. 69 - Special Sick Leave
RCAF A24	#C18763	W.R.O. 69 d. 18-9-41.
1-2-42	15-2-42	DRO 10 d/12-1-42 Annual
Issued Spec T/W # C55221		d/31-1-42 DRO #35
1-7-42	15-7-42	DRO 149/42 Ann.
Issued Spec T/W # C 20973		d/30.6.42 DRO 157/42.
10-10-42	24-10-42	(4) DRO 240 Embark

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
M.O. R18	R/C. Mtl. Que.	#4 A.M.D. St. Hubert Que.	24-7-41	DRO 314	1 Y Depot	RAFTP	27.10.42
						Emb Can	28.10.42
						U.K.	5.11.42
DRO 93/41 T.O.S.	4 A M.O.	St. Hubert	24-7-41		Instr. 3	3 PRC	6.11.42
DRO 52/41	4 M.D. St Hubert	4 M.D. Quebec	6-8-41	35/42 (17/102) 245/42 (19/104)	3 P.R.C.	23 O.T.U.	8.12.42
R.O. 199	#4 M.D. Quebec Que	#46 (AR) Sqdn Dartmouth, N.S.	20.8.41	29/43 (11/44) 15/43 (9/44) 14/43 (25/52)	23 O.T.U.	425 Sqdn	24.2.43.
					425 Sqdn	Dept Unc.	3.3.43
DRO 71/42	Stoppage of pay 33 d for damage to barracks.						
				1248	Missing	425 Sqd.	3/4 3.43.
DRO 240	No 4 B+G Finch	No Y Depot Halifax	10-10-42	M.B.K.	425 Sqdn	131 AFU	3/4 3.43.
Authorized to wear Ad's badge			9-10-42				

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

(OVER)

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

Hon

Québec, 4-6-45

R120256

OK

APR 27 1945

Department of National Defence,
Ottawa.

19328/R120256 300

R02029

Gentlemen,

1945 APR 16 PM 3:57

I may be that I am a little late, but I wish to have information concerning the War Service Gratuity granted to veterans of this war who have died or have returned to Canada.

I am the widow of Sergeant Air Gunner Joseph-Engelbert Audy, R120256, killed on active service on March 3, 1943. He was on active service in Canada from June 1941 to October 9, 1943. He then left for overseas where he was killed on his first raid, on March 3, 1943. Please send me the required forms and full particulars.

new mark

Yours truly,

Mme Marie-E. Audy,
Sainte-Marguerite Station,
(Terrebonne), P.Q.

Translation
A.P.- 13-4-45.

use as app.

APR 23 1945

D of E

C347 3/4

BUREAU FOR TRANSMISSIONS
Rec'd
APR 9 1945
Ret'd
APR 11 1945
NATIONAL DEFENCE

R.C.A.F.

Quebec 4/6/45

Bureau de la Defense Nationale
Ottawa

Monsieur,

Je suis peut-être
un peu en retard, mais
je désirerais des renseigne-
ments sur la gratuité'
offert aux vétérans
de cette guerre, morts
ou revenus au pays
Je suis la veuve du
Sergent air Gunner Joseph
Engelbert Audy numéro
R-120256 tué au combat de
3 Mars 1943 - il fut en

C34

service actif au pays de
juin 1941 au 9 octobre 1943
ensuite il traversa
outre-mer en octobre où
il fut tué à son premier
raid le 3 mars 1943-

Veuillez me donner des
form à remplir à ce sujet
si je puis en avoir droit-
De bons renseignements
me seraient nécessaire

Je demeure

Mde Marie E. Audy
Ste Marguerite station
Cte Terrebonne

DEPT. NATIONAL DEFENCE
REC. 12-4-45 P.M
RET.
TRANSLATION SERVICE

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

DEPARTMENT OF NATIONAL DEFENCE

NAVY ═══ ARMY ═══ AIR FORCE

STATEMENT OF WAR SERVICE GRATUITY

W.D. 4
AIR
3/777

DECEASED MEMBER'S NAME: J.Engelbert (CHRISTIAN NAMES) Audy (SURNAME)

PAYEE: Mde Marie E.M. Audy

ADDRESS: Ste Marguerite Station, Cte Terebonne, P.Que.

DATE OF TERMINATION OF OVERSEAS SERVICE: 3 Mar/43

REGISTER NO. 19328
FILE NO. 11 Ma1/45
DATE
SERVICE NO. R120256
FINAL RANK OR RATING Sgt
DATE OF DISCHARGE 3 Mar/43

		$ ¢
A. TOTAL QUALIFYING SERVICE	NO. OF DAYS 588/30 EQUAL TO 19 COMPLETE PERIODS AT $7.50	142.50
B. QUALIFYING OVERSEAS SERVICE	NO. OF DAYS 128 LESS 18 INELIGIBLE DAYS, EQUAL TO 110 DAYS @ 25C. PER DAY	27.50
C. SUPPLEMENT FOR OVERSEAS SERVICE		

DAILY RATES AT DISCHARGE

PAY	$ 2.95		
SUBSISTENCE OR LODGING AND PROVISION ALLOWANCE	$ 1.25		
ADDITIONAL PAY	$		
	$		
	$		
DEPENDENTS' ALLOWANCE 1/30 OF $ 47.00	$ 1.56		
TOTAL	$ 5.76	×7 = $	40.32
NO. OF DAYS 128/183		×$ 40.32	28.20
D. WAR SERVICE GRATUITY			198.20
E. DEDUCTIONS — OVERPAYMENT OF — PAY AND ALLOWANCES		$	
DEPENDENTS' ALLOWANCE AND ASSIGNED PAY		$	
OTHER DEDUCTIONS		$	
F. TOTAL AMOUNT PAYABLE			198.20

G. YOUR PORTION OF GRATUITY IS—

DEPENDENTS' ALLOWANCE IN ISSUE TO YOU $ 47.00 / TOTAL DEPENDENTS' ALLOWANCE IN ISSUE $ 47.00 OF $ 198.20 =$ 198.20

Ottawa MAY 28 1945

O.K. N.I. P.A. S.L.

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
HLG	MRG

TREASURY	
CHECKED BY	DATE
	1m-3-45

SERVICE REPRESENTATIVE

ΔT

Treasury Office.
Air Force Services
OTTAWA. - CANADA.
Rec'd. MAY 14 1945
P. & A. SECTION

M.F.M. 16D
200M—9-40 (6828-9)
H.Q. 1772-39-1763

To be recorded on Nominal Roll

UNIT PAYMASTER'S CERTIFICATE THAT HE HAS EXAMINED MARRIAGE CERTIFICATE AND/OR BIRTH CERTIFICATES AND/OR DEATH CERTIFICATE.

This form is to be attached to M.F.M. 16 or M.F.M. 16A in all cases and to accompany these forms to the Dependents' Allowance Board.

DETAILED INSTRUCTIONS ON REVERSE SIDE OF FORM

Name of Officer or Enlisted Man.....Audy, Joseph Engelbert.....Official No.....R120256.....

Rank.....Sgt. A.G.....Unit.....No. 1 "Y" Dept.....

Unit Stationed at.....Halifax, N.S.

To—The Dependents' Allowance Board:—

I hereby CERTIFY that the above named has produced for my inspection the authentic Certificates of Marriage, Birth and Death, particulars of which are as follows:—

Particulars of Marriage Certificates Produced

Names of Parties to Marriage	Date of Marriage	Place of Marriage	*Status S., B., W. or D.	Name and Designation of Official Performing Ceremony
Audy, Joseph Engelbert	28-8-42	St. Thomas, Ont.	B	Rev. J.M. O'Reilly, F/Lt.
Cote, Marie Elizabeth Marcelle	28-8-42	St. Thomas, Ont.	S	(RCAF Chaplain) (R.C.)

* STATUS: S.–Spinster. B.–Bachelor. W.–Widow or Widower. D.–Divorced.

Particulars of Birth Certificates Produced

Name of Child	Date and Year of Birth	Place of Birth	Full Name of	
			Father	Mother

Particulars of Death Certificates Produced

Name of Deceased	Date of Death	Place of Death	Name and Designation of Signer of Certificate

NOTE:—Where circumstances are exceptional, such as Separation or Divorce in cases of first marriage, attach the documents produced to you. The Board will make copies of all original documents and return the originals to the applicant. List any documents attached, hereunder—(If none, insert 'Nil').

Date 26-10-42 ..... H. Cyril Smith Flt ..... No. 1 "Y" Depot, Halifax, N.S.

PAYMASTER UNIT

ROYAL CANADIAN AIR FORCE
INTERVIEW REPORT

1. SURNAME .....A.U.D.Y....(.LAC..R.120256).....

2. CHRISTIAN NAME .....JOSEPH EUGELBERT.....

3. APPLYING FOR ENLISTMENT AS .....AIR GUNNER.....

---

4. PERSONNEL OFFICER
Education .....8..Quebec.....

Classification Test ...51.....

ASSESSMENT: Educational Standing; Ability to Learn: Personal Background. High Classification Test Score, but insufficient education for any AirCrew Trade except Air Gunner.

RECOMMENDED FOR .....Air.Gunner.(Remuster).....

SUITABLE FOR COMMISSION .....NO.....

JUNE 16, 1942 Signed ...J.H.Read... F/O

---

5. MEDICAL OFFICER
Medical Category ...A.1.B.2.A.3.B..-..Medical.at.Dartmouth.Station.

ASSESSMENT(Physical ; Temperament) Dull appearance but is alert mentally. Has difficulty with English. He is French. Does not give the impression of being very keen to fly. He has had no Air experience. Doubtful A/C material. Probably best as

RECOMMENDED FOR .....WOAG..WAG.....

SUITABLE FOR COMMISSION ..NO.....

Signed ...D.E.McGregor... F/Lt.

---

6. INTERVIEWING OFFICER
ASSESSMENT: (General Fitness) Applicant is quiet, unassuming fellow. Seems to have keen mind and considerable ability, considering he only has very limited education.

RECOMMENDED FOR .....Air.Gunner.(Standard).....

SUITABLE FOR COMMISSION .....NO.....

signed ...K.Thomas... F/O

FOUND ACCEPTABLE FOR ..A.I.R...G.U.N.N.E.R.....
DATE .....June.16,.1942.....

L.D.Chapman Flt.
Commanding Officer
No. 16 Recruiting Centre, R.C.A.F.
Halifax, N. S.

A F M 5.

R.120256 AC.2
AUDY Joseph Engelbert

R.C.A.F. Special Reserve

APPENDIX "A"
Bulletin No. 150

ROYAL CANADIAN AIR FORCE

ENLISTMENT AGREEMENT

TRADESMEN

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

(a) That I may be called upon to perform duties not directly or indirectly connected with the trade in which I have applied, i.e. General Duties Standard. until such time as the R.C.A.F. is in a position to employ or train me in said trade.

(b) That I will be required to pass the prescribed examinations and tests before an R.C.A.F. Trade Test Board before I will become eligible for remustering to a higher trade group.

(c) That in the event of my being found unsuitable by R.C.A.F. authorities for employment or training in the above mentioned trade, I am liable to be re-mustered to another trade or Standard General Duties.

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

A. L. L. Laporte 76 Engelbert Audy
(Witness) (Signature of Applicant)

Montreal P.Q. July 24th, 1941
(Place) (Date)

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

NO. 42

RECOMMENDATION FOR RECLASSIFICATION

1. No. R120256 2. Trade General Duties STD.

3. Name AUDY, J.E.

4. Unit NO. 116 (BR) SQUADRON, DARTMOUTH, N.S.

5. Present Rank AC1

6. Recommended for Reclassification to rank of L.A.C.
   Effective 24-1-42

7. Remarks of
   Flight Commander Steady worker, reliable,
   and of good character

   W.L. Ricketts (Signature) Sgt. (Rank) N.C.O. i/c Airmens Mess (Appointment) L.C.B.

8. Remarks of
   O.C., Unit I concur

   W.W. Marmeluk (Signature) F.O. (Rank) ADJUTANT. (Appointment)

   DATE 28/1/42

Entered in D.R.O. 25 of Jan 29

by

No. 4 Bombing & Gunnery School,
R.C.A.F. Station, Fingal, Ont.

Date 27/2/42

TO:

FROM: Engelbert Andy R 120256

SUBJECT: Permission to marry

1. I respectfully request permission to marry Marcelle Côté on or about end of August 1942, under the provisions of Para. 1360 (4) K.R.(Air) for the R.C.A.F. and to be placed on the Married Establishment as from the date of my marriage which will be notified by the production of my marriage certificate.

2. Statement of moral character and disposition of Marcelle Côté from 7, Bayard st of Quebec, P.Q. attached hereto.

3. I have no debts or other financial obligations except as hereunder:--

None

4. I am satisfied that I will be able to maintain my family in a manner befitting my station as an airman.

5. I am aware that, should I contract debts which I cannot liquidate, I am liable to be discharged from the Service.

Engelbert Andy.

(2) C.O. No. 4 B. & G. School,
Fingal, Ont.

I have interviewed L.A.C. Andy concerning the above application and recommend that he be granted permission to marry.

Date 17/8/42 O.C. A.P. Wheeler F/Lt G.I.S. UNIT

(3) O.C. #4 Br. G. School UNIT

Permission to marry granted provided this Airman fully understands that he will not be eligible to be carried supernumerary to the married establishment until he has completed his training course.

J. E. A

R W Alleway F/L
for Wing Commander
Commanding Officer,
No. 4 B.& G.School, Fingal, Ontario.

Provisional

ROYAL CANADIAN AIR FORCE

TRAINING REPORT

AIR GUNNER

No. 4 B. & G. School.

1. Surname AUDY Christian Names Joseph Engelbert

2. Number R120256 Rank LAC Course No. 36B

3. Posted from ~~No. 4 B & G School~~ Posted to "Y" Depot, Halifax Duration of Course From 20-7-42 To 9-10-42

4. Aircrew Category A1B A3B Height 5'6" Girth 34"

5.

Type Aircraft	EQUIPMENT USED			
	Type Guns		Type Turrets	
	In Air	Ground	In Air	Ground
Bolingbroke	Browning	V.G.O.	Bristol	Bristol Boulton & Paul
		Browning		Fraser Nash

6. STAGE I

	Mks. Possible	Mks. Obtd.
Armament Oral	100	59
Armament Written	300	150
Anti-Gas	100	61
A/C Recognition	100	50
Navigation	100	50
Maths. Hygiene, Admin., etc.	150	111
Signals	100	94
Drill	100	55
TOTALS	1050	630
Percentage		60%

7. STAGE II

AIR AND GROUND TRAINING	Day	Night
Flying Time	12.05	
Films Exposed	1	
Hrs. Turret Manip.	5:30	
Skeet (No. Rds.)	200	
25x Range "	300	
200x Range "	800	
Air to Ground "	400	
Air to Air "	3000	
% Hits Air to Air	4.1	

ASSESSMENT	Mks. Poss.	Mks. Obtd.
Arm. Written	150	100
Practical & Oral	200	130
Aircraft Rec.	100	60
Ability as Firer	100	87
TOTAL	550	377
Total Training Marks	1600	1007
Percentage		62.9
Personal Assessment	800	466
TOTAL MARKS	2400	1473

8. No. in class 17 Position in class 15 Pass or Fail ////

9. Recommended for commissioned rank NO
(Yes) or (No)

10.

Suitability for further training as a Gunnery Instructor	Not at all suitable	Moderately suitable	Definitely suitable	Extremely suitable
	X			

Mark "X" in the appropriate column.

11. Remarks: **Slow to learn, required extra instruction. Very keen about his job and handles himself well in the air.**

Date: 11.10.42

A. P. Whalen S/L
for Chief Instructor

Date: 12-10-42

D. W. Findlay W.C.
Commanding Officer, Rcaf
No. 4 B. & G. School, Fingal, Ont.

CONVERSION TABLE

for Determining Pupil's "Ability as a Firer"

Hits		1	2	3	4	5	6	7	8	9	10	11	12	13	14	15
	3	30	65	75	85	90	100	100								
	4	35	57	67	75	80	90	95	100	100						
	5	25	53	60	70	75	80	90	95	95	100	100				
	6	20	50	57	65	70	75	80	85	90	95	96	100	100		
	7	1	45	55	60	67	72	75	80	85	90	92	95	97	100	100
	8	10	40	52	58	63	68	72	75	80	85	88	90	93	97	97
	9	5	35	50	56	60	64	70	72	75	80	82	85	90	95	93
	10	0	30	47	54	59	60	67	70	75	75	78	82	86	90	90
	11		25	43	52	57	58	63	68	72	72	75	80	82	86	87
	12		20	40	50	55	57	60	65	68	70	73	75	77	82	84
	13		15	37	47	54	56	58	63	66	68	70	73	75	77	82
	14		10	33	43	52	55	57	60	64	67	68	70	73	75	78
	15		5	30	40	50	52	55	57	62	65	67	68	70	73	75

(1) Determine the pupil's percentage hits to rounds fired - air to aire.
(2) Determine the course average percentage hits to rounds fired - air to air.
(3) Checking (1) against (2) we obtain the pupil's mark for "ability as a firer".
(4)

Note: The chart has been arranged so that:

(a) Pupils scoring less than 50% of course average will obtain a mark less than 50 (Failure)
(b) Pupils scoring about the course average will obtain a mark of 75.
(c) Pupils scoring double the course average or more will obtain a mark of 100.

ALTITUDE TOLERANCE TEST

Date 25-10-42

No. of 2 Hr tests at 35,000 feet

(1.) 2. 3.

Symptoms

nil on ..... runs
mild on ..... "
moderate on 1 "
severe on ..... "

Recommended for:

~~A. flying to 35,000 ft. or more~~
~~B. limited flying to 35,000 ft.~~
C. flying only to 25,000 ft.

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 R120256 Name AUDY. Joseph Engelbert Rank T/Sgt
(In full in block capitals, surname first). (Or acting appointment).

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

Date of Birth 2.11.13 Religion R.C Occupation in Civil Life Labourer

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.) S.R Whether Married, Single or Widower Single

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

Mrs N. Audy (Mother) 2 l'Epinette Rue

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

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

Next of Kin

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

Section 1.—Movements and Casualties.

Unit FROM which.	Unit TO which.	Date of Effect.
No 4 Bn G	Norcy Depot	10.10.42
Norcy Depot	RAFTP	27.10.42
	Emb Can	28.10.42
	UK	5.11.42
(Swt 3)	3 PRC	6.11.42
35/42 3 PRC	22 OTU	8.12.42
22 OTU	425 Sqdn	24.2.43.
425 Squadron	no 1 RAF Depot. N/E MISSING.	3-3-43.

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

* Authority.	Description.	Date of Effect.
	G.D Std AC2	24.7.41
	.. A.C.1	24.10.41
	Remust A/G Std LAC	24.1.42
	Air Gunner T/Sgt(p)	9.10.42

Section 3.—Good Conduct Badges.

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

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

*10349) Wt. 23821—1216 100M 8/42 T.S. 700

Section 4.—Character and Trade Proficiency.

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

Rank.	Character.	Trade Classification.	Proficiency. A	B	C	Whether specially recommended, recommended, or not recommended for promotion or reclassification.	Date.	Signature and Rank of Commanding Officer.
Sgt	V.G.	A.G.	ON STRENGTH FOR TRAINING ONLY				24.2.43	S/L Baker O/C S/L
SGT.	V.G.	A.G.	ON STRENGTH LESS THAN A MONTH.				3-3-43	[signature] S/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.

FORM 64.
(FORMERLY BOOK 64)

ROYAL AIR FORCE.

AIRMAN'S SERVICE

AND

PAY BOOK.

THIS BOOK IS THE PROPERTY OF THE AIR MINISTRY, AND MUST BE SURRENDERED ON DEMAND.

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

Official No. R120256 Surname AUDY.

Christian Names in full JOSEPH ENGLEBERT.

Date of Birth 2-11-13. Religion R.C.

Occupation in Civil Life Labourer.

Industrial Group .

Occupational Sub-Classification .

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

Date of (*a*) Attestation .

(*b*) Calling Up, Mobilisation, or Embodiment } 10.10.42

Terms of Service DofRE.

Signature of Airman .

MRS E AUDY
(WIFE)

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

1 ST SAUVEUR
QUEBEC CITY

Signature and Rank of Officer at time of making entries } [signature]

Date of making Entries Feb. 13th. 43.

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.

RANK AND R.A.F. TRADE

Rank or Classification	Date of Effect	Authority.	Signature and Rank of the Officer making the Entry.
T/Sgt.	9.10.42	F.1580.	

Trade.	Date of Effect.	Authority.	Signature & Rank of the Officer making the Entry
A/Gnr(2)	24.1.42	F1580.	

Medal, Clasps, Decorations, Mentions.

Particulars	Date and Authority	Signature and Rank of Officer

Held B issued. 10. 11. 42.

R.A.F. STATION
EQUIPMENT OFFICER
13 FEB 45
PERSHORE

Leave granted with Free Railway Warrant

From (date)	To (date)	Signature of Officer

+ Delete whichever is inapplicable.

Signature of Flt. or Section Cmdr.....

Certified that the deficiencies and other claims known are recorded in the Accountant Section as chargeable to:-

Date .....13 — 2 — 1943.

6.120256. Sgt AUDY, J.E.

FORM 64.
(Formerly Book 64.) (Part II.)

ROYAL AIR FORCE

AIRMAN'S PAY BOOK

Surname AUDY

Christian Names T.E

No. R 120256

Rank Sgt.

Group

Trade Classification A.G.

Date of Attestation

Date of Reporting for Duty 28-10-42

(5/77) Wt. 35034/2226. 600,000. 11/41. B. & S. Ltd. 51-1773.

The Account of the Airman will be kept by the {**Base Accounts Office***
Central Pay Office* **to which Part II of this Book, when full, and all communications relating to his Account should be forwarded.**

N.B.—In the event of the Airman's decease the whole Book (Parts I and II) is to be sent to the Base Personnel Staff Officer (Base Accounts Office) or the Air Officer in Charge of Records (Central Pay Office); Part II will be extracted by him and sent to the {**Base Accounts Office.***
Central Pay Office.*

Instructions to Airman

1. This Book is to be produced on the demand of a superior officer, or when the holder requires an advance of cash.

2. When an advance of cash is made, you will sign the acquittance roll of the paying officer on the line containing the amount you receive. The paying officer will sign the corresponding entry in this book on the page for Cash payments.

3. You will make no entries in this book, except to sign your name on pages 5, 7 and 9.

4. Should you lose this book you will at once report the loss to your Commanding Officer. A new book will be obtained from the Base Accountant Officer or Central Pay Office, but it must be understood that no pay can be issued in respect of the period before the date on which you report the loss, until the balance has been ascertained from the Base Accounts Office or Central Pay Office. If, after a new book has been issued to you, the former book is found, it should immediately be surrendered to your Commanding Officer.

* Delete as necessary.

TEMPORARY EMOLUMENTS

e.g., Duty Pay, Ration Allowance, etc., etc.

Period	Description and Authority	Rate

3 **DAILY RATES**

Promotions, Reductions, Reclassifications and

RATES OF				TOTAL	Deduct Voluntary Allotment Compulsory Allotment Compulsory Stoppage	Net Rate to be issued	
Substantive Pay including Progressive Pay	Good Conduct Pay	War Pay	Qualification Pay			Figures	Words
8/-				8/-	1/- D 1/6 DPA	5/6	Five Shillings Sixpence

Temporary emoluments, e.g., Duty Pay, Ration Allowance, etc., should be shown on page 2, not on pages 3 and 4.

OF PAY 4

Remusterings, and Alterations in Allotment.

Date from which NET RATE OF PAY is issuable	*Reason for changes in Net Rate (e.g., Promotions, Reductions, Alterations in Allotments, etc.)	Officer's Signature, Station and Date
		[signature] Pay. Seashore 13/2/43

* In addition to the above record, the Officer making the entry will write across the columns for cash payments the nature of the casualty and the amended net rate of pay. He will also record in the same places all sentences of imprisonment and special stoppages, attesting such entries by his signature.

Signature of Airman.....

Book opens on *.....19 . (For the Net Daily Rate of Pay *see* pages 3 and 4, and Note on page 4.)

If the Airman was in debt on the above date, the amount to be recovered from the next pay due to him should be stated.

Debt £.....s.....

.....*O.C. Unit, etc.*

CASH PAYMENTS.

Date	Place (If on active service enter "Field".)	Amount (State Currency.)		Signature and Unit of Officer

116 BJR

CONFIDENTIAL

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

ROYAL CANADIAN AIR FORCE

Medical Board held at Dartmouth N.S. *Date* June 14/42

FILE NUMBER

Surname Audy *Chr. Names* Joseph Engelbert.
Nature of Commission Pilot *Date of Birth* Nov 2/13 *Married or Single* Single
Branch Air Force *Hours Flown*
Address Lepinay Quebec.

HAVE YOU ANY HISTORY OF:—

(i) NERVOUS TROUBLE or Nervous Breakdown No
Severe or "Sick" Headaches, Migraine No
Fits or Convulsions of any kind No
Sun or Heat Stroke No
Head Injury or Concussion (including "knock-out") No
Insomnia, Nightmares, Sleep-walking, or Bed-wetting No.
(ii) LUNG TROUBLE or Consumption No
Bronchitis, Pneumonia or Pleurisy No
Asthma or Hay Fever No
(iii) HEART DISEASE, "Weak or Strained Heart" No
Fainting Attacks or Giddiness No
Rheumatism, Rheumatic Fever or "Growing Pains" No
Frequent Sore Throats or Tonsilitis No
Diphtheria, Scarlet Fever or Scarlatina No.
(iv) STOMACH or BOWEL TROUBLE Appendicitis — Appendectomy
Chronic Indigestion or Pain after Food No
(v) KIDNEY or BLADDER TROUBLE No
Syphilis or Gonorrhœa no
(vi) TROPICAL DISEASE
Malaria } never in tropics.
Dysentery }
(vii) EYE TROUBLE or Inflammation of Eyelids No.
Wearing of Glasses No
Colour or Night Blindness No
(viii) EAR TROUBLE, Earache or Discharge from Ears No
Deafness, Noises in the Ears, or Dizziness No
Frequent Colds in Head, Catarrh or Obstruction No
Prolonged Hoarseness or Loss of Voice No.
Sea, Car or Train Sickness No.
Discomfort on Swings, Roundabouts, Switchbacks No
(ix) OPERATIONS Appendectomy.
(x) Any illness or Injury not mentioned above
Appendectomy Sept 1941

Education Grade XII
Present Occupation Student Hobbies Sports.
Previous Service No.
Athletics Baseball, Hockey.
Habits—Smoking yes. Alcohol occasionally
FAMILY HISTORY—Consumption No Diabetes No Haemophilia No
Nervous Ailments, Mental Trouble, or "Fits" No
Father Alive—Health N.A. Dead—Cause Cancer
Mother Alive—Health Good Dead—Cause —
Brothers (6) Alive—Health Good (—) Dead—Cause —
Sisters (1) Alive—Health Good (—) Dead—Cause Emphysema.

I hereby declare that I have carefully considered the statements made above, that to the best of my belief they are complete and correct, and that I have not withheld any relevant information or made any misleading statement. I am fully aware that by wilfully suppressing any information I shall incur the risk of not being accepted for Service, or if accepted, of being discharged or retired and forfeit any claim to gratuity or other award.

Date June 15 42 *Signature* J. E. Audy *Witness* [illegible]

GENERAL MEDICAL AND SURGICAL EXAMINATION

Impression given by *(a)* Physique Wiry *(b)* Mentality Standard.
Body Marks, Scars, Deformities Small linear scar at side nose, & one end at thumb.
Size of Thyroid Gland N
Surgical Abnormalities N.
Results of Wounds, Injuries, Operations N.E.

	Date 15-6-42	Date	Date	Remarks on any Abnormalities Found
Height (ins.)	66"			
Weight (lbs.)	145 lbs			Date
Chest Circumference (ins.)	34".			
Body Build (lbs.)	—			
Leg Length (ins.)	42			
Pulse Rate — Sitting	96/m.			
Pulse Rate — Standing 1st	108/m.			
Pulse Rate — Standing 2nd	96/m.			
Pulse Rate — After Exercise	120/m.			
Pulse Rate — Time to Normal	35 sec.			
Arterial Walls				Date
Blood Pressure — Systolic	124			
Blood Pressure — Diastolic	68			
Room Temperature				
Heart — Size (in cms.)	N			
Heart — Sounds	N			
Heart — Rhythm	N			
Lungs — Inspection	N			
Lungs — Palpation	N			
Lungs — Percussion	N			
Lungs — Auscultation	N			
Lungs — Expiratory Force	N			
Lungs — X-Ray	N			Date
Reflexes — Knee	N			
Reflexes — Ankle	N			
Reflexes — Triceps	N			
Reflexes — Abdominal	—			
Reflexes — Plantar	N			
Cranial Nerves	N			
	R. L.	R. L.	R. L.	
Balancing Rod				
	R. L.	R. L.	R. L.	
Self Balancing	—			
Tremors — Fingers	S.F.			Date
Tremors — Eyelids	S.F.			
Abdomen — Liver	N			
Abdomen — Spleen	N			
Abdomen — Muscular Tone	N			
Urine — Albumen	[illegible]			
Urine — Sugar	[illegible]			
Initials of M.O.	R.D.			

40 mm. Hg. Test
Date 15-6-42: 50 seconds: 10, 10, 9, 9, 8, 8.
Date
Date
Date

Night Vision Test B'Mth. 30/12 4/11/42

EYE EXAMINATION

History ..... Nil

Visual Acuity	R 20/20, c −2.5 D = 20/15.00		
	L 20/20, c −2.5 D = 20/15.00		
Colour Vision	N. Ishihara VIII		
Red, Green	Orthos.		
Diaphragm Test (P.D. = 65)	3 drops at 0		
Convergence	C. = 6 cms.		
	S. C. = 16 cms.		
Accommodation	R. 9 cms.		
	L.		
Cover Test	Nil abnormal found		
Fundi and Media	~		
Fields	~		
Remarks:	Fit		
	Initials of M.O [illegible]	*Initials of M.O*	*Initials of M.O*
	Date 15/6/42	*Date*	*Date*

EXAMINATION OF EAR, NOSE AND THROAT

History ..... Nil

Hearing	R. Ear	N		
	L. Ear	N		
External Ear, Meatus Membranes	R. Ear	N		
	L. Ear	N		
Middle Ear, Eustachian Tubes	R. Ear	~		
	L. Ear	~		
Cochlear Apparatus	R. Ear	~		
	L. Ear	~		
Vestibular Apparatus	R. Ear	~		
	L. Ear	~		
Buccal Cavity		Clean		
Teeth		Good.		
Gums		N		
Pharynx		N		
Nasopharynx		N		
Nose		N		
Larynx		N		
Remarks:			*Initials of M.O* [illegible]	*Initials of M.O*
			Date 15/6/42	*Date*

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

A1 B A3 B.

D. L. Langford.

OBSERVATIONS AND FINDINGS OF THE REVIEWING MEDICAL OFFICER

Date 8-10-42

Ht. 5'-6"

Wt. 146 lbs.

V. A. R. 20/20 L 20/20

C.N.

Category appeal - A1 B - A3 B

H. L.

R. Graham

ALTITUDE TOLERANCE TEST Date 25-10-42

No. of 2 hr tests at 35,000 feet

1. nil on runs
2. mild on "
3. moderate on 1 "
severe on "

Symptoms

Recommended for:

~~A. flying to 35,000 ft. or mor~~

~~B. limited flying to 35,000 ft.~~

C. flying only to 25,000 ft.

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

WILL

R.C.A.F. R. 60
40M—5-41 (225)
H.Q. 1062-3-45

(1) I, Audy - Joseph Engelbert of the {City / Town / Village / Township}

Last Permanent Civilian Address

of L. Epiphanie in the {County / District} of

Province of Quebec, Munition Plant
(Civil Occupation)

a member of the Royal Canadian Air Force, Number R120256 do hereby revoke all former Wills by me made and declare this to be my LAST WILL.

(a) Relationship
(b) Names and
(c) Address of beneficiaries and
(d) What each is to receive.

(2) I GIVE, DEVISE AND BEQUEATH unto My Mother
Mrs Melina Audy
54 Sulpicien
L'Epiphanie
P. Q
All my Estate

Relationship, Names and Address of Residuary Beneficiaries.

(3) I GIVE, DEVISE AND BEQUEATH all the rest and residue of my estate, both real and personal, of whatsoever kind and wheresoever situate unto

(4) I appoint Mrs Melina Audy (Name) 54 Sulpicien (Address)
L'Epiphanie P. Q, to be the ~~Executor~~ Executrix of this my Last Will.

IN WITNESS WHEREOF I have hereunto set my hand this 25 day of
July 19 41

Signed and acknowledged by the Testator, in the presence of us present at the same time who in his presence, at his request, and in the presence of each other have hereunto subscribed our names as witnesses.

J. E. Audy
(Signature of Testator)

First witness here.

(5) Romeo Turgeon
(Signature)
4A M.D St Hubert P. Que
(Address)
Clerk
(Occupation)
Rene Legaré
(Signature)
4A M.D St Hubert P. Que
(Address)
Clerk
(Occupation)

(Beneficiaries)

R.C.A.F. Records Office
AUG 13 1941
O.K. C.I.
N.I.
P.A.

See letter

4 Bds

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

WILL

R.C.A.F. R. 60
40M—5-41 (225)
H.Q. 1062-3-45

(1) I, Joseph Engelbert Audy of the City / Town / Village / Township of L'Epiphanie in the County / District of L'Assomption

Province of Quebec, Canadian Car Munition (Civil Occupation)

Last Permanent Civilian Address

a member of the Royal Canadian Air Force, Number R 120256 do hereby revoke all former Wills by me made and declare this to be my LAST WILL.

(a) Relationship (b) Names and (c) Address of beneficiaries and (d) What each is to receive.

(2) I GIVE, DEVISE AND BEQUEATH unto

my wife
Mme Engelbert Audy (Marcelle Côté)
L'Epiphanie Co. L'Assomption
all my personnal property

Relationship, Names and Address of Residuary Beneficiaries.

(3) ~~I GIVE, DEVISE AND BEQUEATH all the rest and residue of my estate, both real and personal, of whatsoever kind and wheresoever situate unto~~

(4) I appoint Denis Lamarche, L'Epiphanie (Name) (Address)

Co. L'Assomption, to be the Executor ~~Executrix~~ of this my Last Will.

IN WITNESS WHEREOF I have hereunto set my hand this 15 day of

September 1942

Signed and acknowledged by the Testator, in the presence of us present at the same time who in his presence, at his request, and in the presence of each other have hereunto subscribed our names as witnesses.

J. E. Audy (Signature of Testator)

First Witness sign here.

(5) L.A.C. Olsen D.A. (Signature)

No 4 B & G school. (Address)

Air gunner. (Occupation)

L.A.C. Mitchell (Signature)

No 4 B & G. school (Address)

Air gunner. (Occupation)

Second Witness sign here.

R.C.A.F. Records Office
Rec'd SEP 17 1942
O. K. C.O.B.
R. C. N. I.
S. I. P. A.

(Witnesses are not to be beneficiaries.)

[OVER]

NOTE

(1) Example: I, John Charles Brown, of the City of Ottawa, County of Carleton, Province of Ontario, Mechanic.

(2) If only one beneficiary, complete as follows: I give, devise and bequeath unto "my wife, Mary Brown, 26 Cherry Avenue, Ottawa, Ontario, all my estate", in which event, strike out clause (3). If more than one beneficiary, set out in clause (2) what each is to receive, such as—

"my wife, Mary Brown, 26 Cherry Avenue, Ottawa, Ont.....$.....00 and my household goods and effects",
"my mother, Ethel Brown, 480 Yonge St., Toronto, Ont. . .....$.....00",
"my sister, Margaret Brown, 480 Yonge St., Toronto, Ont.....$.....00",
"my friend, John Smith, 60 LaSalle St., Winnipeg, Man.....$.....00",
and any personal gift, if desired.

(3) If any specific gifts have been made in clause (2), the testator should name the person or persons to whom he desires to give the balance of his estate in clause (3), such as "my wife, Mary Brown, 26 Cherry Avenue, Ottawa, Ontario" or "my mother, Ethel Brown, and my father, George Brown, of 480 Yonge Street, Toronto, Ontario, equally" or as desired.

(4) Failure to appoint an executor or an executrix can only result in additional expense in the settlement of the estate in question. Testators are, therefore, strongly urged to make such an appointment. A beneficiary or legatee under the will may be appointed executor or executrix. It is recommended, however, that testators avoid appointing as executor any person on or likely to be on Active Service.

(5) Do not omit to date the will. The testator should sign the will with his usual signature in the presence of two witnesses, each of whom should immediately thereafter, and in the presence of the testator, sign his or her name, and insert his or her address and occupation in the place provided. No person who receives any benefits under the will should act as witness. It is preferable, though not essential, that the witnesses be persons not on Active Service.

GENERAL

Generally speaking, under the Laws of most of the provinces, a will revoked or cancelled by marriage of the testator after the date of the will is invalid; it is advisable, therefore, immediately upon marriage to make a new will.

When completed, leave with Commanding Officer for transmission to the Records Office for safe custody.

STATEMENT OF LOCATION OF WILL

I hereby certify that I have previously made a will, which is now located at.....

R.C.A.F. Headquarters, Ottawa, Ont.
(Name and address in full)

.....

.....

J.E. Andy
(Signature)

FORM 6

DOMINION BUREAU OF STATISTICS—QUEBEC DEATH TRANSCRIPT

17

Do not write in this space

1. PLACE OF DEATH

Municipal county: OVERSEAS | Official name of civil municipality or township: | *Place an X over the word which applies to this municipality or this territory:* City | Town | Village | Parish | Township

Street: | No. | Hospital or Institution:

2. LENGTH OF STAY

(a) In hospital or institution	Years	Months	Days	(b) In municipality where death occurred	Years	Months	Days	(c) In Province	Years	Months	Days	(d) In Canada (if immigrant)	Years	Months	Days

3. NAME OF DECEASED

Surname: AUDY (*Block letters*)

Given names: JOSEPH ENGELBERT

Do not write in this space

4. RESIDENCE

Street: No.

Official name of civil municipality or township: L'Epiphanie

Municipal county: Province: Quebec

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

9. If married give name of wife or husband of deceased: Cote, Marie Elizabeth Marcelle

10. BIRTHPLACE (Province or Country): Quebec

11. DATE OF BIRTH: November (Month) 2nd (Day) 1913 (Year)

12. AGE OF DECEASED	Years	Months	Days	If less than one day old
	29	4	1	....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: Mar. 3/43

16. Total years spent in this occupation: Two

	17. NAME	18. BIRTHPLACE (Province or Country)
FATHER	Audy, Narcisse	Quebec
MOTHER (Maiden Name)	Trepanier, Melina	Quebec

19. Place of burial, cremation or removal

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

21. PLACE OF REGISTRATION OF THIS BURIAL

(a) Name of parish or church

(b) Civil municipality of

(c) Municipal county

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

CONFIDENTIAL MEDICAL CERTIFICATE OF DEATH

22. Date of death: March (Month) 3rd (Day) 43 (Year)

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

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

24. CAUSE OF DEATH

I

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

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

due to

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

(b)

due to

(c)

II

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

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

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

(b) Duration of disease....days

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

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

State findings: Was there an autopsy?

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

Accident, suicide or homicide: Accident (State which) Date: March 3rd 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)

I, Joseph Ange Abert AUDY, do solemnly declare as follows:

1. That I was born on the 2nd day of November, 1913.

2. The name under which I was registered at my birth is as set out above: Joseph Ange Abert AUDY.

3. I am desirous of changing my name and I wish to be known henceforth as: Joseph Engelbert AUDY.

AND I make this solemn declaration conscientiouly believing it to be true and knowing that it is of the same force and effect as if made under oath and by virtue of the Canada Evidence Act.

And I have signed

Engelbert Audy.

DECLARED BEFORE ME AT THE
CITY OF Montreal IN THE
PROVINCE OF Quebec THIS
24TH DAY of July A.D. 1941.

A. L. Li Lapointe F/O

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

Les Clercs de Saint-Viateur
JUVENAT DES SS. ANGES

VIVE JÉSUS !

Berthierville, le 27 mars 1941

Monsieur Engelbert Audy est un ancien élève de notre Maison. - Il nous a quitté après avoir terminé sa huitième année (9e année actuelle). Il s'est classé 3e et a obtenu 74. % notes sur cent. -

Je le recommande donc à votre attention.

Armand Cousineau, c.s.v.,
Préfet des études. ——

Juvénat des SS.-Anges
Bureau du P. Directeur
BERTHIERVILLE, P.Q.

J. Elsevier, c.s.v.
Directeur.

Canadian Association of Railway Trainmen

T and D Unit, Eastern Region.

GEO. BLAIS, Vice President,
L'Epiphanie, Que.

St.Lawrence Lodge No. 81

Cap't. J. A. LANDRY
Advocate
10732 Laverdure. St.
MONTREAL

THEO. BELANGER
Chairman
BELOEIL, Que.

M. J. KIELY
Secy.-Treas.
578 Notre Dame Ave.
St. LAMBERT, Que.

L'Epiphanie Que. 25 Mars 1941

Corps D'Aviation Royal Canadien,

Je suis très heurux de venir appuyer l'application , dans votre Corps d'aviation Royal Canadien Monsieur Engelbert Audy, Ce jeune homme est en tous points recommandable, étant , sobre honnête et travailleur, jouissant de l'estime de tous.

Votre tout dévoué

Geo. Blais

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

BOITE POSTALE : 5 **103 RUE NOTRE-DAME** TELEPHONE BELL : 1

L'EPIPHANIE, Qué., 25 Mars 1941

M Corps d'Aviation Royal Canadien.

En compte avec **J. ED. MAJEAU**

MARCHAND GENERAL

Spécialités : Accessoires de Plomberie et Electriques, Ferronneries, Vitres, Peintures, Huiles, Gazoline, Ciment, Broches, Tuyaux, Etc.

Messieurs.

Il m'est de ses plus agréables de vous appuyer et recommander l'application dans le Corps d'Aviation Royal Canadien, d'un de mes paroissiens dans la personne de MM. Engelbert Audy. Ce jeune homme est âgé d'environ 27 ans, il est garçon, il jouit de l'estime de toute la population, il est travaillant, sobre et honnête; je crois que c'est un sujet précieux pour votre Corps d'Aviation et vous serez de ses plus heureux de l'avoir dans vos rangs, dont je suis très heureux de vous le présenter. Je me souscris.

Votre tout dévoué

J. Ed. Majeau

Maire de L'Epiphanie.

Préfet du Comté de l'Assomption.

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

R.C.A.F. Special Reserve

N° MATRICULE R.120256 VERSÉ À No.4-A Manning Deipt St.Hubert MÉTIER GenerAl Duties Std.

Pending

CORPS D'AVIATION ROYAL CANADIEN

Carded

(FORMULE D'ENGAGEMENT)

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

1. Nom ~~Engelbert~~ Audy Prénoms en entier Joseph ~~Ernest~~ Engelbert
2. Adresse actuelle L'Epiphanie P.Q. Téléphone Aucune
3. Adresse fixe L'Epiphanie P.Q.
4. Lieu de naissance Ste Thècle P.Q. Nationalité Canadien
5. Date de naissance 2 novembre 1913 Marié, célibataire, veuf, séparé, divorcé célibataire
6. Enfants non

Nom	Date de naissance	Nom	Date de naissance
NA			

7. Profession Journalier 8. Religion catholique romain (Indiquez la confession religieuse)
9. Langues ~~Anglais~~ (un peu) Française (Courramment) (Degré de connaissance)
10. Plus proche parent (nom en entier) ~~Mme~~ Narcisse Audy Degré de parenté mère
    Adresse du plus proche parent L'Epiphanie G. 2
11. Père (nom en entier) ~~mort~~ Narcisse Audy Lieu de naissance Ste Thècle P.Q.
    Adresse décédé Nationalité Canadien
    Profession Cultivateur
12. Mère (nom de fille en entier) Mélina Trépanier Lieu de naissance Ste Thècle G.2.
    Adresse L'Epiphanie G. 2 Nationalité Canadienne
13. Détails du service dans les armées de terre, de mer ou de l'air: Non

Unité	Lieu	Rang	Profession	Date du	Date au	Motif de la libération
NA						

R.C.A.F. Records Office
Rec'd: AUG 7 1941
O.R. C.A.B. R.C.A.F.
R.C. Nfld.
S.I. R.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? NA
    Quand? NA Résultat NA
17. Avez-vous déjà été réformé de quelque service armé de Sa Majesté pour inaptitude physique? Non
    Si oui, indiquez la nature de l'infirmité NA
18. Avez-vous jamais touché ou touchez-vous actuellement une pension de réforme? Non
    Si oui, indiquez la nature de l'infirmité NA
19. Avez-vous jamais été trouvé coupable de délit? Non Si oui, indiquez-en la nature NA
20. Avez-vous des dettes? Non Si oui, donnez des détails NA

R.C.A.F.—R.100a
20M—2-40 (3925)
Q.G. 1062-3-83

130-151

21. Éducation:

—	Nom de l'école	Date du	Date au	Cours, sujets, etc.
	Académie St Guillaume			
Instruction primaire—École publique ou séparée	de l'Epiphanie P.Q.	1919	1926	Cours primaire
Cours supérieur—Collège, etc	Juvénat des St. Anges Bertierville P.Q.	1926	1929	Cours commercial
Cours technique	—			
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
L'Epiphanie P.Q.				
Quebec box co.	bureau	1929	1933	meilleurs gages
L'Epiphanie P.Q.	imprimeur-			
Canada Mfg co. Ltd	scieur	1933	1940	meilleurs gages
Foundation Co.				
St Paul l'Ermite P.Q.	Journalier	1940	1941	travaux terminés

23. Heures de vol, seul ..non.. accompagné ..non.. avec passager ..non..

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

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

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 ..ouvrage général..

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
Joseph Edouard Majeau	L'Epiphanie P.Q.	magasin général et maire
George Blais	L'Epiphanie P.Q.	agent C.N.R.
J.M. Bissonnette	L'Epiphanie	président Can. Mfg.
Oswald Desjardins	L'Epiphanie	magasin général

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

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

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 ..25 mars.. 19..41.. Signature ..Engelbert Audy..

NATIONAL REGISTRATION CERTIFICATE
PRODUCED

POUR L'USAGE DU DÉPARTEMENT SEULEMENT

JUL 24 1941

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

Type d'homme Good Apparence générale Good

Aptitudes pour (indiquez à quel titre) Standard General Duties

Date 22-7-41 Signature G.E.Beaux Grade Sgt.

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

Métier sur lequel a porté l'épreuve Nil

Résultat Nil

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

Nil.

Date 22-7-41 Signature G.E.Beaux Grade Sgt.

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

Je, soussigné, Joseph Engelbert AUDY 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 24 juillet 1941 19 Engelbert Audy
Signature de la recrue

(D) **SERMENT PRÊTÉ PAR LA RECRUE**

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

Date 24 juillet 1941 19 Engelbert Audy.
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 24 jour de juillet 19 41

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

Finger Printed
Date 24-7-41
Initials EB

POUR L'USAGE DU DÉPARTEMENT SEULEMENT

CERTIFICAT DE L'EXAMEN MÉDICAL

Partie 1. Renseignements obtenus de la recrue—

1. Age.....27..... 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.....Inflammation of eyelids.....
(*m*) Epilepsie.....no.....
(*n*) Maladie nerveuse ou mentale.....no.....
(*o*) Syphilis.....no.....
(*p*) Gonorrhée.....no.....
(*q*) Fracture.....no.....
(*r*) Autre maladie ou défectuosité.....no.....

3. Avez-vous jamais porté des lunettes?.....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 de la recrue Engelbert Andy

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).....Vaccination scar right side of nose, right thumb.....

2. Taille.....5.....pieds.....5 1/4.....pouces. 3. Poids.....131.....livres.

4. Teint.....Med..... 5 Couleur des yeux.....Blue-Grey..... Cheveux.....Brown.....

6. Développement {Bon / ~~Passable~~ / ~~Médiocre~~} 7. Tour de poitrine—Expiration.....32 1/2.....pouces

Degré d'expansion.....2 1/4.....pouces

8. Ouïe—Droite.....n. v. 20..... Gauche.....n. v. 20..... Tympan—Droit.....n.....gauche.....n.....

9. Vue—sans lunettes—droit.....20/20..... avec lunettes—droit.....n. i. A.....

gauche.....20/20..... gauche.....n. i. A.....

10. État de la bouche et des dents.....14 present.....

11. Urine—Albumine.....Neg.....Sucre.....neg.....

12. Anomalies révélées à l'examen (congénitales et pathologiques).....Left varicocele.....

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.

A 4 B

Observations spéciales des médecins.....none.....

23-7-41 X-Ray #86383 Neg

Part 2 Cont'd.

13. Reflexes n.
14. Heart n.
15. Lungs n.
16. Blood Pressure S. D. 126/82
17. Colour Vision n doh

Date.....22nd July.....19.41.

Bruce Pengelly — Président — I/A

D R Martin — Membre

..... — Membre