

R150207
READ
EDWIN WILLIA

LACE

NUMBER

NAME _____

29	RANK
----	------

SERVICE AWARD CARD

39-45
STAR

ATL.
STAR

A/C	EUR
STAR	

AFRICA
STAR

PACIFIC
STARBURM
STARITALY
STARFR. AN
GER.
STAS

DEFENSE

GEN.
SER. 11

C. V. S.

1

1

1

1

1

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

—

NUMBER

H	O	Y	NAME
1	1	1	1
2	2	2	2
3	3	3	3
4	4	4	4
5	5	5	5
6	6	6	6
7	7	7	7
8	8	8	8
9	9	9	9
10	10	10	10
11	11	11	11
12	12	12	12
13	13	13	13
14	14	14	14
15	15	15	15
16	16	16	16
17	17	17	17
18	18	18	18
19	19	19	19
20	20	20	20
21	21	21	21
22	22	22	22
23	23	23	23
24	24	24	24
25	25	25	25
26	26	26	26
27	27	27	27
28	28	28	28
29	29	29	29
30	30	30	30
31	31	31	31
32	32	32	32
33	33	33	33
34	34	34	34
35	35	35	35
36	36	36	36
37	37	37	37
38	38	38	38
39	39	39	39
40	40	40	40
41	41	41	41
42	42	42	42
43	43	43	43
44	44	44	44
45	45	45	45
46	46	46	46
47	47	47	47
48	48	48	48
49	49	49	49
50	50	50	50
51	51	51	51
52	52	52	52
53	53	53	53
54	54	54	54
55	55	55	55
56	56	56	56
57	57	57	57
58	58	58	58
59	59	59	59
60	60	60	60
61	61	61	61
62	62	62	62
63	63	63	63
64	64	64	64
65	65	65	65
66	66	66	66
67	67	67	67
68	68	68	68
69	69	69	69
70	70	70	70
71	71	71	71
72	72	72	72
73	73	73	73
74	74	74	74
75	75	75	75
76	76	76	76
77	77	77	77
78	78	78	78
79	79	79	79
80	80	80	80
81	81	81	81
82	82	82	82
83	83	83	83
84	84	84	84
85	85	85	85
86	86	86	86
87	87	87	87
88	88	88	88
89	89	89	89
90	90	90	90
91	91	91	91
92	92	92	92
93	93	93	93
94	94	94	94
95	95	95	95
96	96	96	96
97	97	97	97
98	98	98	98
99	99	99	99
100	100	100	100

RANK

CODE

AWARD

AWARD AND CLASP

APPLICATION
DISPATCHED

RIBBON
ISSUED

MEDAL
ISSUED

188486

IBM 83961

LICENSED FOR USE UNDER CANADIAN PATENT NUMBER 315306

Clifford B. Read (Father)
217 Kingsboro Road,
Rochester,
N.Y.,
U.S.A.

Aug.-45:

2483

9-2-50

MEMORIAL BAR

DATE DESP

REGN. NO

2347

AMERICAN

NAME READ, Edwin William

FILE NO. 1040-R-604

RANK L.A.C. CATEGORY ~~XXXXXX~~ PRES DEAD REG. NO. R150207

DATE OF DEATH: 20-Oct-43 MOTHER LIVING: Yes WIFE: NA

MINISTERIAL CARD: 8-11-43 ROYAL MESSAGE:

MEMORIAL CROSS
TO CHAPLAIN:

To mother & father

To mother & father: 25-Aug-44

OCT 27 1944

DEL'D TO MOTHER:

DEL'D TO WIFE:

Mr. & Mrs. Clifford Benjamin Read,
217 Kingsboro Road,
Rochester, N.Y. , U.S.A.

COMMAND:

RELIGION: Anglican

Am

R E G I S T E R E D

A I R M A I L

1st August, 1944.

Mr. C.B. Read,
217 Kingsboro Road,
Rochester, New York, U.S.A.

Dear Mr. Read:

I have learned with deep regret that your son, Leading Aircraftman Edwin William Read, is now for official purposes presumed to have died on Active Service on October 20th, 1943. I wish to offer you and the members of your family my sincere and heartfelt sympathy.

It is most lamentable that a promising career should be thus terminated and I would like you to know that his loss is greatly deplored by all those with whom your son was serving.

Yours sincerely,

(SGD.) C. A. S.

(Robert Leckie)
Air Marshal,
Chief of the Air Staff.

/MA

CRS

BMM
31-7

OFFICIAL ROYAL CANADIAN AIR FORCE CASUALTY NOTIFICATION

NUMBER R150207

RANK LAC

UNIT 10 SQDN
(GANDER NFL)

TRADE ARM B "B"

NAME READ, EDWIN WILLIAM

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

MARITAL STATUS SINGLE

RELIGION ANGLICAN

CANADIAN

FRENCH CANADIAN

OTHER AMERICAN

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

ADDRESS

NAME
ADDRESS
D.A.B.

MR. CLIFFORD B BENJAMIN READ (FATHER)
217 KINGSBORO ROAD
ROCHESTER, N.Y. U.S.A.

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

ADDRESS

MR. CLIFFORD B READ (FATHER)
217 KINGSBORO ROAD
ROCHESTER, N.Y. U.S.A.

FATHER'S NAME

ADDRESS

MR. & MRS CLIFFORD BENJAMIN READ
217 KINGSBORO ROAD
ROCHESTER N.Y. U.S.A.

MOTHER'S NAME

ADDRESS

LIVING ON ENLISTMENT YES

LIVING ON ENLISTMENT YES

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

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

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

CASUALTY DETAILS:

AUTHORITY CAS. SIG. NO. K.R. (AIR) PARA 710 (3) -----d---18--JULY--44

PREVIOUSLY REPORTED "MISSING 20-OCT-43 AS A RESULT OF A FLYING
ACCIDENT (LAST REPORTED OVER MONT JOLI -----~~ENROUTE~~
ENROUTE GANDER TO DORVAL) (FAMILIARIZATION AND TRANSPORTATION)

NOW "PRESUMED DEAD" 20-OCT-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 9-AUG-44

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

Chambers

FOR CHIEF OF THE AIR STAFF

TS-RT

2

ADMINISTRATOR OF ESTATES, OTTAWA

26638

A I R M A I L

OTTAWA, Canada, 28th June, 1946.

Mr. C.B. Read,
217 Kingshoro Road,
Rochester, New York,
U.S.A.

Dear Mr. Read:

It is my painful duty to confirm the information that was conveyed in the three telegrams I recently despatched to you, advising of the locating of the wreckage of the Liberator aircraft on which your son, was proceeding from Gander to Dorval October 20th, 1943. I sincerely regret that at this time it is not possible to convey to you many more details than were contained in the telegrams, for the search party that had experienced great difficulty in reaching the site of the crash identified the wreckage as that of the Liberator and determined that it was not possible to make recovery or identify any of the occupants and then returned to the village of St. Donat, Quebec, with their initial report which was conveyed to you in my telegram of June 25th.

The wreckage was sighted by a Pilot who was engaged on the search for a missing aircraft that had proceeded over that area the day before and had failed to arrive at its destination. He observed a glint of sunshine on a metal object and on further investigation was able to determine that it was that remained of an aircraft but could not identify it. He conveyed the location to Headquarters and a search party was despatched immediately, but owing to the mountainous region, dense undergrowth and heavy timber the search party was not able to locate the site. An aircraft was then despatched to guide the search party from the air and difficulties encountered were so great that the site could not be observed until within fifteen feet of it. In addition, air activities were hampered by weather conditions.

The exact location is described as forty-six degrees sixteen minutes North, seventy-four degrees eighteen minutes West, on west side of twenty-five hundred foot mountain. It is approximately six miles from the village of St. Donat, Quebec.

The search party has again proceeded and is at present at the scene of the crash where they will clear the area as well as possible and erect a cairn. Crosses are being made and will be taken to the scene of the crash for erection. These will be individual Crosses with the name, rank, and date of death inscribed thereon. The difficulty of transporting flowers has been carefully considered, but twenty-four roses will be taken to the site which will represent one for each of the occupants of the aircraft. The Memorial Burial Service will be held at the site of the crash on Wednesday, July 3rd, 1946, at 2:30 P.M. Eastern Daylight Time, weather permitting, the area being quite liable to be entirely covered by cloud if it is not a clear day. Wing Commander R.M. Frayne, Principal R.C.A.F. Protestant Chaplain and Wing Commander L.A. Costello, Principal R.C.A.F. Roman Catholic Chaplain, as well as a Jewish Rabbi whose name at present is not known will proceed to the site and will officiate at the service. A trumpeter will also be present. Official R.C.A.F. photographers will secure photographs which will be conveyed to you and complete reports of the service will also be sent to you by the respective Chaplains. During the service a Union Jack will be draped over the cairn. A flag-pole will be erected if it is possible, behind the cairn. A permanent brass plaque will be placed on the cairn at a later date; it is not possible to have such a plaque manufactured and ready for the service.

The officer in charge of the search party states that it is beyond all doubt death was instantaneous to all occupants of the aircraft. He also states that the site is quite inaccessible and should only be undertaken by an experienced woodsman. Considerable difficulty will be encountered in getting the officiating party for the memorial service to the site.

I realize that the anxiety and heartaches you have had to endure these many months will not be lessened by anything conveyed in this letter, but it is my sincere hope that you may derive some measure of comfort from the knowledge that these gallant boys did not suffer, for death is merciful to the men who fly in the air.

May I express to you and the members of your family my deepest sympathy.

Yours sincerely,

9
(W.R. Gunn)
Wing Commander,
R.C.A.F. Casualty Officer,
for Chief of the Air Staff.

Room 3110 Lisgar Building,
Ottawa, Ontario,
4th July, 1946.

Mr. C.B. Read,
217 Kingsboro Rd.,
Rochester, N.Y.,
U.S.A.

Dear Mr. Read: -

You will have been informed through official R.C.A.F. channels that the funeral service for your son, LAC Edwin William Read, was to take place at the scene of the crash yesterday, July 3rd, 1946, at 2:30 o'clock Eastern Daylight time. It was felt, however, that you would like to hear some of the more intimate details of yesterday's happenings on the slope of the mountain.

Yesterday morning the official party, consisting of a Hebrew Chaplain, Captain E.F. Mandelcorn of Montreal, W/C L.A. Costello, Principal Roman Catholic Chaplain and myself, together with S/L H. Cobb and F/O W. Tessier, DFC, Officers in charge, accompanied by a Trumpeter, R.C.A.F. Photographer, R.C.A.F. Public Relations Officer and representatives of the Press, was conducted to the scene of the burial by the Chief of St. Donat Police, Leo Bertrand, the Mayor of St. Donat, Richard Coutu, the members of St. Donat Council and a member of the Quebec Provincial Police.

A number of the next-of-kin who had driven in also attended. These included J.A. MacDonald and E.C. Hopkins, father and uncle of P/O Robert MacDonald, Gordon, William and Ira Beattie and James Arnold, three brothers and a brother-in-law of Corporal Harold David Beattie, Mr. C. Sanderson and Mr. W. Slack, relatives of F/O Stephen Andrew Sanderson, AFM, Mr. and Mrs. G.O. Marr, parents of Corporal Ronald Douglas Marr, Mrs. G.R. McNaughton, parents of Sgt. William G. McNaughton, Mr. J.A. Poirier, father of F/L Joseph Alfred Poirier, together with Joseph's brother, P/O Cecil Poirier. As nearly as I can recollect the above folk comprise the representatives of the next-of-kin but as I am trusting my memory in this connection there may possibly have been some other relatives present. As well as the above, there were some hundred and fifty local inhabitants in attendance. Mr. and Mrs. McNaughton, Mrs. Patterson and the other womenfolk remained below at the village.

The party left the hotel at St. Donat at 7:30 in the morning, drove back along the road for six miles, crossed a narrow arm of Lac Archambault and set out in a westerly direction along the trail that the advance party had broken in locating the crash and up the two hills that had to be climbed. Arriving at 11:00 o'clock at a tiny lake the party rested, had some sandwiches and then proceeded to the scene of the crash, arriving at 2:15 o'clock. Pictures of the setting for the funeral service will be forwarded to you within a few days. These should give you a fairly good idea of where your loved one is buried.

A single red rose was then placed upright at the foot of each cross and the Star of David by the next-of-kin present and by the Chief of Police and the Mayor who represented the next-of-kin who were not present.

The Chaplains took their places at the side of the Cairn which had been erected by the advance party and on which a memorial bronze plaque will be permanently placed, and then proceeded to conduct the funeral service.

Captain Mandelcorn led off with the funeral rites for WO. 1 Jacob Silverstein, singing and reading the last rites of the Jewish faith for his laddie.

He was followed by W/C Costello, who was assisted by four priests who were vacationing at St. Donat. The full Roman Catholic Libera was chanted and read by these representatives of the Roman Catholic Church for F/L Poirier, F/O Sanderson and LAC Joseph Veilleux. Upon the conclusion of the Roman Catholic Libera the last high offices of the Protestant Church were then conducted by the Principal Protestant Chaplain of the R.C.A.F. for the following:

F/L Robert Frank Fisher	Sgt. Stanley Albert Wood
F/O Jay Syver Johnston	Cpl. Harold David Beattie
F/O James Lamont	Cpl. Howard Kenneth Hambly
P/O Robert William MacDonald	Cpl. Alec Clare Johnston
WO.1 Wilfred Howlett	Cpl. Ronald Douglas Marr
WO.1 Franklin Elwood Jenkins	LAC Charles Laurie Dynes
WO.2 Joseph Alexander Barabonoff	LAC Guy Ridgewood Patterson
F/S Raymond Frank Ware	LAC Albert James Radcliffe
Sgt. Franklin Hicks Elliott	LAC Edwin William Read
Sgt. Eric Morgan Finn	
Sgt. William Gordon MacNaughton	

The Protestant Service began with the reading of St. John 11; 25-26; Job 19; 25-27; Romans 8; 38-39; St. Matthew 5;4; St. John 14;1 and 2; Issiah 40;11. These Scripture verses were followed by a reading of the names of the twenty Protestant boys who had paid the supreme sacrifice on this site.

The 23rd Psalm and the 121st Psalm were read, followed by the re-reading of some of the New Testament Passages as above, together with Revelation 7;16 and 17.

Included in the funeral sermon were references to the fact that the love given to God's children will never die, and that nothing can kill it; neither principalities nor powers, nor things present, nor things to come, nor the sword, nor the crash of aircraft, nothing can kill it; it will last over - Forever.

The group present was reminded that those gathered on this mountain-side were joined in spirit by the loving next-of-kin from Halifax to the West Coast. The verses of "O Valiant Hearts" were then read:

O Valiant Hearts, who to your glory came
Through dust of conflict and through battle flame
Tranquil you lie, your knightly virtue proved,
Your memory hallowed in the Land you loved.

O risen Lord, O Shepherd of our Dead,
Whose cross has bought them and whose Staff has led,
In glorious hope their proud and sorrowing Land,
Commits her Children to Thy Gracious Hand.

Reference was made to a somewhat similar crash that had taken place in Britain during the war, while the Principal Chaplain was overseas. In this crash the Duke of Kent had been killed and Prime Minister Winston Churchill said:

"There is something about death on active service which is different from ordinary death in the normal course of nature. It is accepted without question by the fighting men. Those they leave behind them are also conscious of a light of sacrifice and honour which plays around the grave or tomb of the warrior. They are, for the time being, uplifted. This adds to their fortitude but does not in any way lessen their pain. Nothing can fill the awful gap; nothing can assuage or comfort the loneliness and deprivation. Only faith in a life after death, in a brighter world, where dear ones will meet again - only that and the measured tramp of time can give consolation."

There followed a mention of the hope of immortality which is ours, founded on the words of our common Lord and Master; reference being made to the New Testament passages above mentioned.

Passages were then quoted from the address given by Abraham Lincoln at Gettysburg:

"We have come to dedicate a portion of this mountain as a final resting-place for those who here gave their lives that that nation might live."

"The brave men died here have consecrated it far above our power to add or detract."

"It is rather for us to be here dedicated to the great task remaining before us, that from these honored dead we take increased devotion to that cause for which they gave the last full measure of devotion; that we here highly resolve that these dead shall not have died in vain; that this nation, under God, shall have a new Birth of freedom; and that government of the people, by the people, for the people, shall not perish from the earth."

The Committal took the form of the placing of twenty maple leaves, which had been picked from the trees of Canada's Capital City, on the grave, one by one, with these words:

For as much as it has pleased Almighty God to take unto Himself the souls of our comrades departed, we therefore now commit their earthly remains to this grave - a maple leaf from the Capital City of our beloved nation for each one, the symbol which marked them as Canadians wherever they sojourned in war - the emblem of the land they loved and for which they died. A gallant group of young Canadian gentlemen they were -

"They shall grow not old, as we that are left grow old;
Age shall not weary them, nor the years condemn,
At the going down of the sun and in the morning
We will remember them."

The Committal Service was followed by the Prayer of Thanksgiving for the hope which is in Christ Jesus, and for the willingness with which our young men offered themselves and laid down their lives for the country which gave them birth.

Then came the prayer for the loved ones at home, the Lord's Prayer and the Benediction. After a brief pause, the Last Post was sounded by the R.C.A.F. Trumpeter. The Service was brought to a close by

sounding of the Reveille and the saluting of each of the twenty-three Crosses, the one Star of David and the Cairn by the three Chaplains and the Officers present.

Two wreaths were then placed at the foot of the Cairn as a token of loving remembrance.

We realize most intimately that the belated discovery of the wrecked aircraft has broken open again the wounds of your sorrow and loneliness and all of us in the Royal Canadian Air Force join with you in your grief.

We must all of us recognize, however, that whether here or There, we are still in the Father's Hand and can look forward to that day when we shall know one another and love one another with a knowledge and love that are eternal in Christ Jesus our Lord.

In the meantime, it is our prayer that the Heavenly Father who gave His only and well beloved Son in sacrifice, even unto death, may grant you a peace that passeth all understanding and strength for the days ahead.

Yours very sincerely,

(R.M. Frayne)W/C
Principal Chaplain (P) RCAF.

C
O
P
Y

M E M O R A N D U M

1700-3701 (AIB)
8 July, 1946.

Estates Branch (Attention Lt.Col. Belcourt)

Accident to Liberator 3701

1. Further to our conversation of this morning I attach some personal effects of the occupants which have been recovered from the scene of the wreck. They are as follows:-

Identity Tag and Lighter	WO2 Jenkins, F.E.	R72936
Identity Tags	Sgt. McNaughton, W.G.	7526
Bracelet	LAC Read, E.V.	R15027
Identity Tag and Bracelet (Rosary found in immediate vicinity of bracelet)	LAC Veilleus, J.A.J.P.	R177329
Watch	Sgt. Finn, E.M.	R72026
One ring marked "A"		
One ring marked "S.A.S."	F/O S.A. Sanderson	J21297

2. Some further small items may be recovered which will be forwarded to you on receipt.

(F.S. Wilkins) G/C
C.I. Accidents,
CAS/AIB.

Please address reply to:-

The Secretary,
Dept. of Nat. Defence for Air,
Ottawa, Ontario.

R.150207 (C.C.)

CAP N

Ottawa, Canada, 19th August, 1944.

Mr. C.B. Read,
217 Kingsboro Road,
Rochester, N.Y.

Dear Sir,

With reference to our conversation of a previous date the following information is supplied:-

As your son is still listed as "Missing" the Air Force will not release his personal effects as this is only done when he has been "Presumed Dead".

It is expected, however, that your son will be "Presumed Dead" within a very short time at which date you will be given further advice as to the disbursement of his private effects.

In the meantime if you should wish any further information with regard to bonds which you seem to feel he had in his possession it is suggested that you write to the Commanding Officer, R.C.A.F. Station, Gander, Newfoundland as it was at this station that the Committee of Adjustment convened for the purpose of settling his estate would have been held.

Yours truly,



(R. McMahon)
Flying Officer,
for Camp Commandant,
A.F.H.Q. Administrative Unit.

RM/MMcI

RECORD OF SERVICE AIRMEN

Church of Eng.
Religion

Racial
Origin

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

Present Address (in pencil)

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

CIVIL OCCUPATIONS AND EXPERIENCE

University

Bookkeeper - May/40 - date

DATE _____

Term

2-2-42
Ottawa, Ont.
Duration of
war.

A4B	29	1	42
-----	----	---	----

TRADE TESTS AND COURSES

42.
42

1/2

43

CHARACTER AND TRADE ASSM. HONOURS, AWARDS AND MENTIONS

AUTH.

Cancelled in DAO 280/43

MOVEMENTS AND CASUALTIES

AUTHORITY	UNIT FROM	UNIT TO	DATE	AUTHORITY	UNIT FROM	UNIT TO	DATE
M. O. R. 13	RIC Ottawa	# 1 M. D. Toronto	2-2-42				
# 1 M. D. - 30	"	"	2-2-42				
# 1 M. D. 99-42	# 1 M. D. Toronto	RCA 7 Stn., Trenton	25-4-42				
PRO 132/42	RCA 7 Stn., Ant. (Levi)	RCA 7 Stn. Dartmouth	2-6-42 PRO-157				
DRO 7	A.W.L. from	0800 hrs.	5-1-43.				
DRO 12	Forfeited pay A.W.L. from	0800 5-1-43 to 0800 7-1-43					
DRO 13	(2 days).						
DRO 118/43	SOS RCAF Stn. #10 Sqn. Dartmouth N.S.	#10 Sqn. Dartmouth N.S.	30-4-43				
PRO 124/43	10 Sqn Dartmouth	10 Sqn Gander	8-5-43				
D.R.D. 184 S.O.S.	No. 10 SODN, GANDER, Nfld.						
	PRESUMED TO HAVE DIED		20-10-43				

WILL

R.C.A.F. r.60

READ, Edwin William

(1) I,, of the

(City
(Town
(Village
(Township

County
of.....in the District of

New York, U.S.A.
Province of Bookkeeper
(Civil Occupation)

a member of the Royal Canadian Air Force, Number...R.150207.....Do hereby
revoke all former Wills made by me and declare this to be my Last Will.

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

My father: Mr. Clifford B. ~~RAM~~ Read,
217 Kingsboro Road,
Rochester, New York, U.S.A.

MY WHOLE ESTATE

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

My father, Mr. Clifford B. Read OF THE ABOVE ADDRESS
(4) I appoint.....
(Name) (Address)

.....to be the ~~Executor~~ ^{Executor} of this my Last Will

IN WITNESS WHEREOF I have hereunto set my hand this3rd
February42
.....19.....

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.)

Edwin W. Read
(Signature of Testator)

(5) Signature.....*Laverne L. Christie*.....

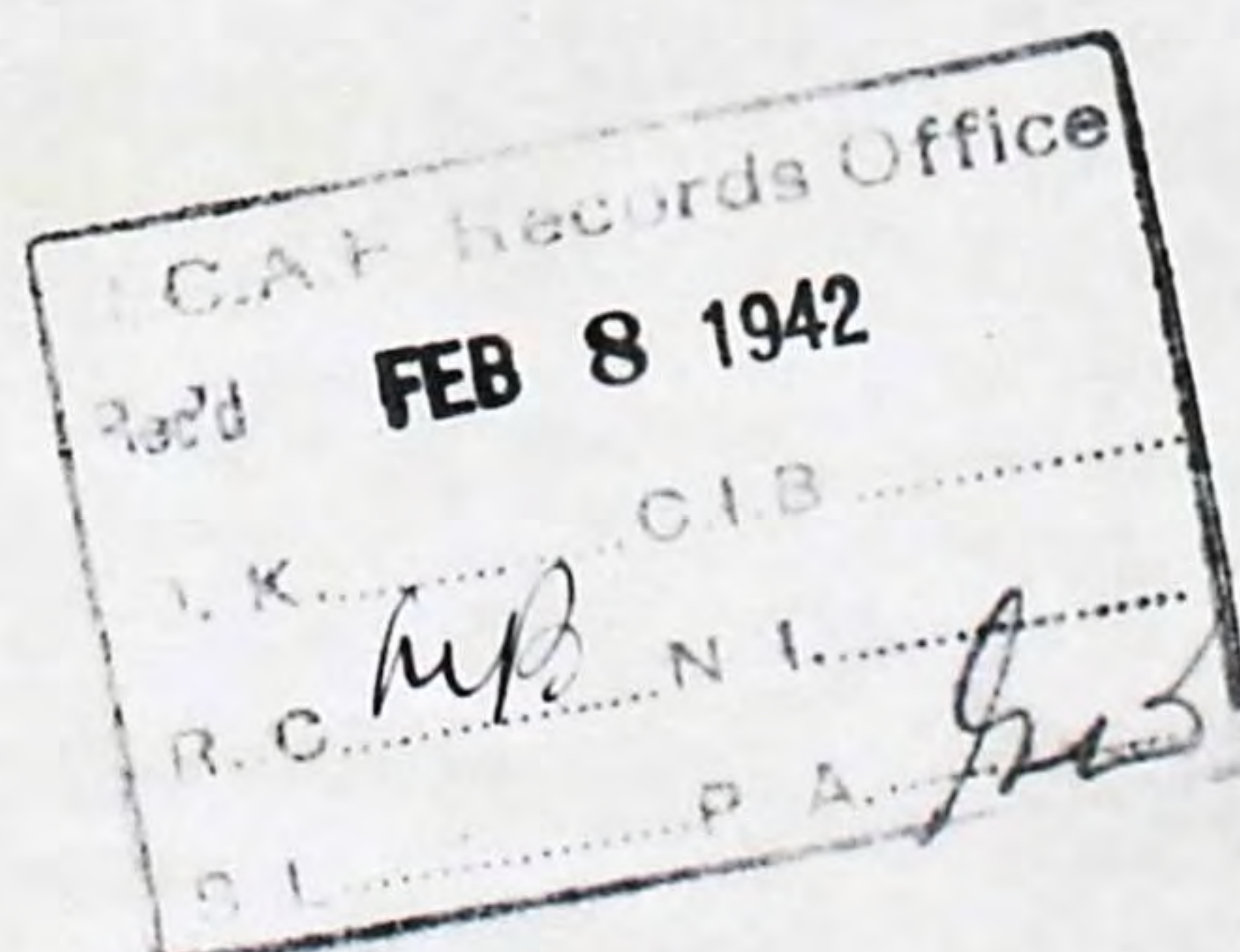
AddressNo. 1 Manning Depot. R.C.A.F. Toronto.....

Occupation.....Clerk.....

Signature.....*Shirley L. Salmon*.....

Address.....No. 1 Manning Depot. R.C.A.F. Toronto.....

Occupation.....Clerk.....



ROYAL CANADIAN AIR FORCE
(ATTESTATION PAPER)

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

1. Surname READ FULL Christian Names Edwin William
2. Present Address 3 Ossington Ave., Ottawa, Ont. Telephone -
3. Permanent Address 217 Kingsboro, Rd., Rochester, N.Y., U.S.A.
4. Place of Birth Rochester, N.Y. Citizenship AMERICAN
5. Date of Birth Jan. 5th, 1921 Married, Single, Widower, Separated, Divorced Single.

6. Particulars of Children

Name	Date of birth	Name	Date of birth
None			

7. Occupation Bank Bookkeeper 8. Religion Anglican
State denomination
9. Languages English
10. Next of Kin (Full Name) Clifford B. Read, Relationship Father
State proficiency
" Address 217 Kingsboro Rd., Rochester, N.Y., U.S.A.
11. Father (Full Name) Clifford B. Read, Birthplace March, Ont.,
N.Y., USA.
" Address 217 Kingsboro Rd., Rochester, Citizenship American
" Occupation Cashier
12. Mother (Full Maiden Name) Ethel Mary Kingston, Birthplace Ottawa, Ont.,
" Address 217 Kingsboro Rd., Rochester, Citizenship American
N.Y., U.S.A.
13. Details of any Naval, Military or Air Force Service:

Unit	Place	Rank	Trade	Date		Reason for discharge
				From	To	
None.						



14. Honours, Awards, Mentions None
15. Are you now on any Naval, Military or Air Force Reserve? NO
16. Have you previously made application to join the R.C.A.F.? NO If so, where? N/A
When? N/A Result N/A
17. Were you ever discharged from any branch of His Majesty's Forces as Medically Unfit? NO
If so, state nature of disability N/A
18. Have you ever been or are you now in receipt of a Disability Pension? NO
If so, state nature of Disability N/A
19. Have you ever been convicted of an indictable offence? NO If so state nature N/A
20. Are you in debt? NO If so, state particulars N/A

21. Particulars of Education:

	Name of school	Date		Courses—Subjects, etc.
		From	To	
Primary Education—Public or Separate School.....	#37 Rochester	1926	1935	Entrance
High School—Collegiate Institute, etc.....	West High School	1935	1939 June	Sr. High School (complete)
Technical School				
University or School other than above.....				
Correspondence Courses, etc.....				

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

Employer and place	Duties, trades, positions	Date		Reason for leaving
		From	To	
Hickok Mfg. Co., Rochester	Assemblyman	July 1939	Apr. 1940	Laid off
Lincoln Alliance Bank, "	Bookkeeper	May 1940	date	to join R.C.A.F.

23. Flying Experience (in Hours) Solo.....None.....Dual.....None.....Passenger.....1 hr.

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

25. Sports engaged in. State: extensively, moderately, occasionally.....Bowling - skating - skiing.

26. AIR FORCE DUTY you wish to enlist for ~~Ground Duties~~ Flying Duties.
 If for Ground Duties, state Air Force trade in which you wish to enlist.....
 If for Flying Duties, state preference as (a) Pilot; (b) Observer; (c) Air Gunner (d) Wireless Operator (Air Crew).
 (Cross out words not applicable.)

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

Name	Address	Occupation
Edmund J. Tuety	Lincoln-Alliance Bank, Rochester, N.Y. - Secy.	
Henry Russel Talbot	323 Jefferson Ave., "	- Minister.
W. Herbert Wall	1114 Lincoln-All. Bldg., "	- Ins. Agt.
Harry M. Giles	3 Ossington Ave., Ottawa, Ont.	- Civil Servant

28. Other information that may have any bearing on this application.....AC.2 Massey G. Read, Belleville, Ont. - is my uncle. W.O.2 Garnet Giles, at St. Thomas, Ont. - is a cousin.

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

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

Date.....Jan. 29th, 1942. 19.....Signature.....Edmund W. Read

NATIONAL REGISTRATION CERTIFICATE
PRODUCED.

American - (01)

F/O

FOR OFFICIAL USE ONLY

(A) Report of Interviewing Officer—

Type

General appearance

Suitability for (state in what capacity)

Date

Signature

Rank

(B) Report of Trade Test—

Trade in which tested

Result

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

Date

Signature

Rank

(C)

DECLARATION MADE BY MAN ON ATTESTATION

I, Edwin William Read do solemnly declare that the foregoing particulars are true, and I hereby engage to serve on active service anywhere in Canada, and also beyond Canada and overseas, in the Royal Canadian Air Force for the duration of the present war, and for the period of demobilization thereafter, and in any event for a period of not less than one year, provided His Majesty should so long require my services.

Date

2-2-42

19

Signature of Recruit

(D)

OATH TAKEN BY MAN ON ATTESTATION

I, ~~XXXXXXXXXXXX~~ NOT APPLICABLE - AMERICAN do sincerely promise and swear (or solemnly declare) that I will be faithful and bear true allegiance to His Majesty.

Date

19

Signature of Recruit

(E)

CERTIFICATE OF ATTESTING OFFICER

The Recruit above named was cautioned by me that if he made any false answers to any of the above questions he would be liable to be punished as provided by law.

The above questions and answers were then read to the Recruit in my presence.

I have taken care that he understands each question, and that his answer to each question has been duly entered as replied to and the said Recruit has made and signed the declaration and taken the Oath before me.

at

Ottawa, Ontario

this

2nd

day of

February

1942.

No. 12 Redruiting Centre, RCAF,
Ottawa, Ontario.

Signature of Officer

Rank

Unit

FOR OFFICIAL USE ONLY
CERTIFICATE OF MEDICAL EXAMINATION

Part 1. Information obtained from the applicant—

1. Age. 21 2. Have you ever suffered from any of the following defects in health?

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

3. Have you ever worn glasses? No

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

Examiner's Remarks re above.....

Signature of Applicant

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

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

1. Identification marks or scars (if operative obtain history).....

Half inch in diameter indentation
below R. knee.

2. Height..... 5 feet 9 inches.

3. Weight..... 137 pounds.

4. Complexion..... Medium

5. Color of Eyes..... BROWN Hair..... BROWN

6. Development Good
Fair
Poor

7. Chest Measurement—Full expiration..... 34 inches

Range of expansion..... 1 1/2 inches

8. Hearing—Right..... W.O. 20' Left..... W.O. 20'

Tympana—Right..... N Left..... N

9. Vision—Without glasses—Right..... 20/20

With glasses—Right.....

Left..... 20/20

Left.....

10. Condition of mouth and teeth..... N. D. C. 31 T 20

11. Urine—Albumen..... 0 Sugar..... 0

12. Abnormalities (Congenital and Pathological) found on Examination.....

Nil

Part 3. The Candidate has been examined in accordance with the pamphlet, "Physical Standards and Instructions for the Medical Examination of Recruits" and he is considered fit for Category

A4B

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

Part 2 Cont.

13. Reflexes..... N

14. Heart..... N

15. Lungs..... N

16. Blood Pressure..... S. D. 145/75

17. Colour Vision.....

N (dichromat)

Date..... 29-1-42 19.....

J. H. H. H. H. H. H.
President

W. E. Hall
Member

Member



THE PENN MUTUAL LIFE INSURANCE COMPANY

ESTABLISHED 1847

THE PHILIP O. WORKS AGENCY
1114 LINCOLN-ALLIANCE BANK BUILDING, ROCHESTER, NEW YORK

W. HERBERT WALL

PHONE STONE 782

January 15, 1942.

TO WHOM IT MAY CONCERN:

I understand that Mr. Edwin W. Read, is contemplating entering into the Air Corps and I wish to state that I have known Mr. Read as a boy and young man for quite a few years. He is of very good habits, fine character and has a very fine family background. I believe that anything that he would undertake would be carried through to the very best of his ability, and I heartily recommend him.

Yours very truly,

W. Herbert Wall

WHW**OMH

WEST HIGH SCHOOL

501 GENESEE STREET
ROCHESTER, NEW YORK

CHARLES H. HOLZWARTH
PRINCIPAL

MELVIN E. COON
VICE PRINCIPAL

December 11, 1941

TO WHOM IT MAY CONCERN:

This is to certify that Edwin W. Read of 217 Kingsboro Road was graduated from West High School in the class of June '39. He ranked #25 among 138 boys or #85 in a combined list of 312 boys and girls.

Very truly yours,

Charles Holzwarth

Charles Holzwarth

CHH:T

Every item of information
should be carefully supplied.
(See reverse side for instructions)

THIS FORM MUST BE FILED FORTHWITH WITH THE
DIVISION REGISTRAR OF THE DIVISION IN WHICH
THE DEATH OCCURRED BEFORE A BURIAL PERMIT CAN BE ISSUED

WRITE PLAINLY WITH
UNFADING INK
THIS IS A PERMANENT
RECORD

FORM 6

This form if placed in an envelope, marked "Dominion Statistics—Free, penalty for improper use \$300," and properly addressed will pass through the mail "FREE"

PROVINCE OF ONTARIO—CERTIFICATE OF REGISTRATION OF DEATH

1. PLACE OF DEATH { County or District of OVERSEAS (NEWFOUNDLAND) Township of _____
If in City, Town or Village _____ Street Enlisted Ottawa, Ontario House No. _____
(Name) (If death occurred in a hospital or institution, give the name instead of street and number)

2. LENGTH OF STAY (in years, months and days)
(a) In City, Town or Township where death occurred _____ (b) In Province _____ (c) In Canada (if immigrant) _____

3. PRINT FULL NAME OF DECEASED READ EDWIN WILLIAM
(Family name) (Given name or names in usual order)

RESIDENCE No. 217 Street Kingsboro Road City, Town, Village or Township Rochester Province New York, U.S.A.
(Residence means usual place of abode. Post Office Address for residents in rural parts not sufficient)

4. Sex <u>Male</u>	5. Nationality (Citizenship) <u>American</u>	6. Racial Origin	7. Single, Married, Widowed or Divorced (Write the word) <u>Single</u>
-----------------------	--	------------------	---

8. BIRTHPLACE United States
(Province or Country)

9. DATE OF BIRTH January 5th 1924
(Month) (Day) (Year)

10. AGE in { Years 19 Months _____ Days _____ If less than one day old _____
hrs. or _____ min.

11. Trade, profession or kind of work as Armourer
spinner, teamster, office clerk, etc.

12. Kind of industry or business, as R.C.A.F.
mill, lumbering, bank, etc.

13. Date deceased last worked Oct. 20/43 at this occupation

14. Total years spent in this occupation Two

15. If married give name of wife or husband of deceased _____

16. NAME Read, Clifford B.

17. BIRTHPLACE Ontario
(Province or Country)

18. MAIDEN NAME Kingston, Ethel Mary

19. BIRTHPLACE Ontario
(Province or Country)

20. Person giving information sign here Per R.C.A.F. Records Officer

Address _____

Relationship to deceased _____

21. Place of Burial, Cremation or Removal _____

Date of burial or removal _____

22. Burial Permit was issued by _____

Address _____

23. UNDERTAKER _____
(Name and address)

MEDICAL CERTIFICATE OF DEATH

24. DATE OF DEATH October 20th 1943
(Month) (Day) (Year)

25. I HEREBY CERTIFY that I attended deceased from: _____
_____ 19 _____ to _____ 19 _____
and last saw h. _____ alive on _____ 19 _____

CAUSE OF DEATH		PHYSICIAN
I. Immediate cause Give disease, injury or complication which caused death, not the mode of dying, such as heart failure, asphyxia, asthenia, etc.	(a) <u>Previously reported missing in flying accident, now for official purposes, presumed dead.</u>	Underline the cause to which death should be charged statistically
Morbid conditions, if any, giving rise to immediate cause (stated in order proceeding backwards from immediate cause).	(b) _____ (c) _____	
II. Other morbid conditions (if important) contributing to death but not causally related to immediate cause.	_____	

26. If a communicable disease is mentioned on this certificate, give { (a) Date of appearance _____ 19 _____
(b) Duration of disease _____ days

27. If a woman, was the death associated with pregnancy? _____

28. Was there a surgical operation? _____ Date of operation _____ 19 _____
State findings _____ Was there an autopsy? _____

29. If death was due to external causes (violence) fill in also the following:—
Accident, suicide or homicide? Accident Date of injury Oct. 20th 43
(State which)
Manner of injury Presumed killed in flying accident
(How sustained) (transportation flight)
Nature of injury _____
Specify whether injury occurred in industry, in home, or in public place public place

Signed by _____ M.D.
Address _____ Date _____ 19 _____

30. Division Registrar's Record No. _____

31. Filed _____ 19 _____
(Division Registrar)

B7m

Declaration on file changing name from Edwin W. Read to Edwin William Read, also
changing Mother's name from Ethel M. Kingston to Ethel Mary Kingston

am address 217 Kingbro. Rd Rochester ny usa

ROYAL CANADIAN AIR FORCE CASUALTY
WAR SERVICE GRATUITY - PARTICULARS OF SERVICE
1
W.S.G

NUMBER 150207 FINAL PAID RANK Lt GROUP 1 CHRISTIAN NAMES Edwin Wm. SURNAME Read

Reason for termination of service: 1-10-43 20-10-43
ref 184

TOTAL SERVICE:

T.O.S. 2-2-42 S.O.S. 20-10-43 626 DAYS
T.O.S. S.O.S. DAYS
TOTAL 626 DAYS

LESS NON-QUALIFYING SERVICE:

From: 5-1-43 To: 6-1-43 2 DAYS
From: To: DAYS
From: To: DAYS
TOTAL QUALIFYING SERVICE 624 DAYS

OVERSEAS SERVICE:

From: To: DAYS
From: To: DAYS
From: To: DAYS
TOTAL DAYS

LESS NON-QUALIFYING SERVICE:

From: To: DAYS
From: To: DAYS
From: To: DAYS
TOTAL QUALIFYING OVERSEAS SERVICE DAYS

Certified that entitlement to benefits under
The War Service Grants Act, 1944 has been
established, based on service shown herein.

COMPUTER'S INITIALS	
CHECKER'S INITIALS	
DATE	27-7-45

R.C.A.F. RECORDS OFFICE
OTTAWA

Royal Canadian Air Force

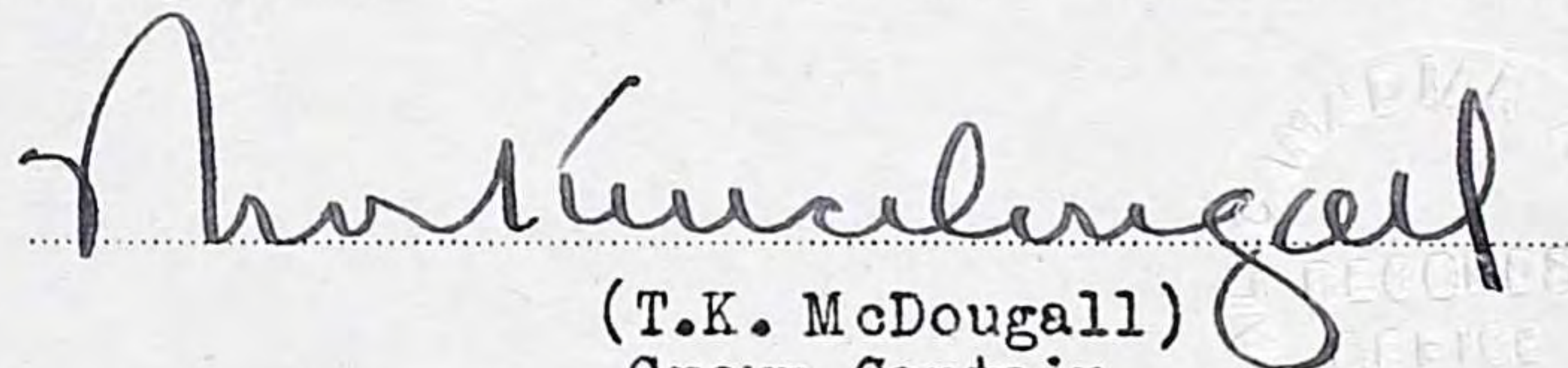
CERTIFICATE OF PRESUMPTION OF DEATH NO. 8306

This is to Certify that

R150207 L.A.C. READ, EDGAR WILLIAM R.C.A.F.
(Number) (Rank) (Name in Full) (Unit)

has been officially reported as missing since the 20TH day
of OCTOBER, 194 3, and that, full inquiries having been
made, no information has been received which would indicate that he may be still alive.
For official purposes, therefore, he is presumed to have died on or since the above
mentioned date

Dated at Ottawa, Canada, this 9TH day of AUGUST 194 4



(T.K. McDougall)
Group Captain
R.C.A.F. Records Officer.

To be made out in duplicate

M.F.M. 5
50M-8-41 (1292)
H.Q. 1772-39-1651

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

INSTRUCTIONS.

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

(1) Name of Officer or Other Rank..... READ, EDWIN WILLIAM
(Surname first—Christian names in full—Block capitals)

(2) Regimental or Official Number and Rank..... R. 150207 AC

(3) Unit..... No. 1 M DEPOT R.C.A.F. TORONTO

(4) Are you married?..... No

(5) If married, state,

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

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

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

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

(8) Have you any children?..... Number of boys..... Girls.....

Names and ages.....

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

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

Name.....

Postal Address.....

[SEE OTHER SIDE]

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

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

- (11) Is your father alive? Yes
If so, state name and address, occupation Clifford Benjamin Read,
217 Kensington Rd, Rochester, N.Y. U.S.A.
Teacher

- (12) If your father is a widower and is totally incapacitated from earning a living—are you his sole or partial support?.....

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

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

- (14) Is your mother alive? Yes
If so, state name and address Ethel Mary Read,
217 Kensington Rd, Rochester, N.Y. U.S.A.

- (15) If your mother is a widow, are you her sole or partial support?.....

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

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

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

If so, state the following particulars:—

Relationship

Full Name

Postal Address

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

- (18) Are you insured? Yes

If so, in what Company? Penn. Mutual Life Ins. Co.
(Give number of policy)

Have you made arrangements for payment of your Insurance Premium? Yes
If not, and it is a monthly premium, you may assign the amount in addition to any other assignment you wish to make, provided the total assignment is not in excess of the maximum monthly amount which may be assigned.

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

Edwin W. Read

(Signature of officer or man)

Date 3/2/42

Officer Commanding.....

Date 3/2/42

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

No. 1 M

DEPOT R.C.A.F. TORONTO

Mr. Clifford Benjamin Read,

217 Kingsboro Road,

Rochester, N.Y.

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

and the following number quoted:—

H.Q. 1040 R 604 FD 216

DEPARTMENT OF NATIONAL DEFENCE
ESTATES BRANCH
OTTAWA, ONT.

30 August 1944

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

Read, Edwin William LAC

No. R.150207 R.C.A.F.

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

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

*W. de Roche*
for Director of Estates.

SH

ANSWER IN FULL ALL APPLICABLE QUESTIONS

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

Degrees of Relationship	RELATIVES required to be accounted for	INFORMANT'S STATEMENT		
		NAME IN FULL of any Relative, if any, in each degree specified	Age	ADDRESS IN FULL of each surviving Relative, opposite his or her name, and date of death of each deceased relative
1	Widow of the Deceased.....			
2	Children of the Deceased and dates of their Births.....			
3	Father of the Deceased.....	Clifford Benjamin Read	49	217 Kingsboro Rd, Rochester, N.Y.
4	Mother of the Deceased.....	Ethel Mary Read	46	217 Kingsboro Rd Rochester, N.Y.
5	Brothers of the Deceased	Full Blood Ernest Earl Read	15	217 Kingsboro Rd Rochester, N.Y.
		Half Blood		
6	Sisters of the Deceased	Full Blood Marjorie Ethel Read	20	217 Kingsboro Rd Rochester N Y
		Half Blood		
7	Names of brothers or sisters (whether of the full or the half blood) of the Deceased, who are dead, and date of death of each.	Names and ages of their children (if any)	Address of their children	

ANSWER FULLY EACH QUESTION ON THIS PAGE
PARTICULARS AS TO IDENTITY

8	Full names of the deceased.	Edwin William Read
9	Date of his birth.	January 5.1921
10	Place and date of his marriage.	Single
11	Place and date of his parents' marriage.	Rochester, N.Y. U.S.A. December 4.1919

PARTICULARS OF DOMICILE

12	Place where deceased was born.	Rochester, N.Y. USA.
13	State, in order, the Province, State and/or County in which he resided before enlistment and the period of time in each.	(a) Monroe County (b) Rochester N.Y. (c) (d) From Birth to Enlistment in Army
14	Nature of employment before enlistment.	Bookkeeper Lincoln Alliance Bank.
15	State whether he owned the premises in which he lived, and, if so, where situated.	Lived at home
16	Name place where deceased stated he intended to make his permanent home.	Rochester, N.Y. USA.

PARTICULARS OF ESTATE

17	Did he leave a Will? If in your custody, please forward.	
18	If married, and domiciled in the Province of Quebec or in a State in the U.S.A. or in a Country under the laws of which there is community of property between spouses,—was there a marriage contract dealing with property?	
19	Did he have a Bank, Post Office or other deposit account? If so, give name and address of bank, etc., and the amount on deposit. Do you wish it administered with the pay account?	He had a Bank Account at Dartmouth, N.S. when stationed there and also had one at Gander Bay, Nfld. also see over.
20	Amount of War Savings Certificates held by deceased. Indicate where located.	See over
21	Amount of Victory Loan Bonds held by deceased. Indicate whether registered or bearer and where located.	See over
22	If deceased had life insurance, name companies and amount payable under each policy and the person named as beneficiary therein.	
23	Describe other assets, if any, and estimated value thereof. Use space on page 4 if necessary.	

OTHER PARTICULARS

24	Did the deceased after enlistment incur any debts for:— (a) His own separate board and lodging while on service. (b) Service clothing and equipment. An itemized account for each such debt should be attached hereto, and if same is correct you should mark the bill "approved" and sign same. If believed incorrect, give particulars.	No
25	Have you or any other relative paid the funeral expenses or any part thereof? If so, attach itemized accounts showing amount paid, and by whom.	No
(NOTE:—The government pays funeral expenses within the amounts authorized in the Regulations, where death occurs and burial is made Overseas as well as where death occurs and burial is made in Canada or elsewhere in the North American zone, and if a relative has already paid those expenses the Government will reimburse such relative to the extent of the amount authorized in the Regulations. Any amount of such expenses in excess of those authorized in the Regulations is not payable by the Government nor is it chargeable against the service estate of the deceased.)		

(PLEASE TURN OVER)

DECLARATION

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

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

* Father of the deceased.

N.B.—To be signed in full in the presence of a Clergyman, Priest, Local Magistrate, Commissioner or Notary Public or Commissioned Officer of any of His Majesty's Forces.

Clifford B. Read

{ Signature of Informant

217 Kingsboro Rd, Rochester, N.Y.

Address

CERTIFICATE

I hereby certify that to the best of my knowledge and belief Clifford B. Read

See above. { Name of informant } is the Father of the Deceased above described. The above Declaration was made by the Informant and signed in my presence.

Dated at Rochester, N.Y. this 6th day of September 19 44

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

James P. Martin

Qualification

NOTARY PUBLIC, Monroe Co. N. Y.
Commission expires March 30, 1945

Address

NOTE.—Before granting the above Certificate, care should be taken to see that the informant gives particulars concerning the death of any Relative stated by him or her to have died, and that the full name and address and age of each surviving Relative specified is stated in its proper place in the Statement opposite.

(If the deceased has no living relatives of the degrees shown on page 2, the names and addresses and relationship of other relatives should be set out below.)

USE SPACE BELOW FOR ANY ADDITIONAL REMARKS YOU MAY WISH TO MAKE

My Boy had a Bank or Post Office Savings account at Dartmouth, N.S. when he was stationed there. He also had one at Gander Bay, Newfoundland. Frequently he mentioned in his letters about depositing some money. I understand he also had either War Saving Certificates or Victory Load Bonds purchased at these Stations. I do not have his Bank Books or Certificates and do not know where to get any information on them. Will you please check into both these matters for me.

He had a small account at the Bank of Nova Scotia, Carp, Ontario.

Account No 3947 \$17.04. Please administer.

Clifford B. Read

Estates Form "P. 4"

AIR

I.A.C.	R.C.A.F. Gender, Nfld.	20-10-43
Rank	Unit	Date of Death

Total.....	438.52
Prev. Dist.	303.17
This Dist.	135.35

SHARE	RELATIONSHIP	NAME AND ADDRESS	AMOUNT
All	Father	Clifford, B. Read 217 Kingsboro Road Rochester, N.Y. U.S.A.	135.35
		(Sole beneficiary under will)	
		P4. TO TREAS.	
		FEB 4 1946	
			WGC

AUTHORITY					
H.Q. F.E. No.	VOTE	PRI	H.Q. SUB.	OBJ.	AMOUNT
0000 9999	833	01	70	000	135.35
CLASSIFIED BY			EXAMINED BY		
			For Chief Treasury Officer		

DISTRIBUTION APPROVED AND AUTHORIZED

CH

(L. M. FIRTH) Colonel
Director of Estates

AUDITED FOR PAYMENT

.....
For Chief Treasury Officer

AIR
FORCE
No.

R150207

READ, EDWIN WILLIAM

SURNAME

FULL CHRISTIAN NAMES

ENLISTMENT

RE-ENLISTMENT

C.R. FILE
NUMBER

PLACE

DATE

Ottawa, Ont.

2-2-42

RECORD OF SERVICE AIRMEN

R.C.A.F. FORM R44(B)
30M-B-41 (637)
H.Q. 1062-3-58

7. BIRTH: DATE 5.1.21 PLACE Rochester, N.Y. CITIZENSHIP 3 American

FATHER (FULL NAME) Clifford B. Read

BIRTHPLACE March, Ont.

MOTHER (FULL MAIDEN NAME) Ethel Mary Kingston

BIRTHPLACE Ottawa, Ont.

8. EDUCATIONAL STANDING

HIGH SCHOOL ENTRANCE x U.S.A.

JUNIOR MATRICULATION x N. Sc. grad. U.S.A.

SENIOR MATRICULATION

TECHNICAL SCHOOL

UNIVERSITY

CORRESPONDENCE COURSES

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

assemblyman 10 mos.

bookkeeper 1 yr 8 "

8100

10. PREVIOUS ARMY, NAVY OR AIR FORCE SERVICE

0

11. HONOURS-AWARDS, MENTIONS

AUTHORITY DATE

12. FLYING EXPERIENCE ON ENLISTMENT (HOURS)

SOLO - DUAL - PASSENGER 1

13. RELIGION Anglican 3

14. LANGUAGES English 1

15. SPORTS bowling, skating, skiing

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.

21. ENGAGEMENTS

TERM EFFECTIVE D.R.O. TERM EFFECTIVE D.R.O.

Annulation 2 2 42

