

**R194194**  
**HURTEAU**  
JOSEPH      FERNA

Ottawa, le 26 novembre, 1946.

R E C O M M A N D E E

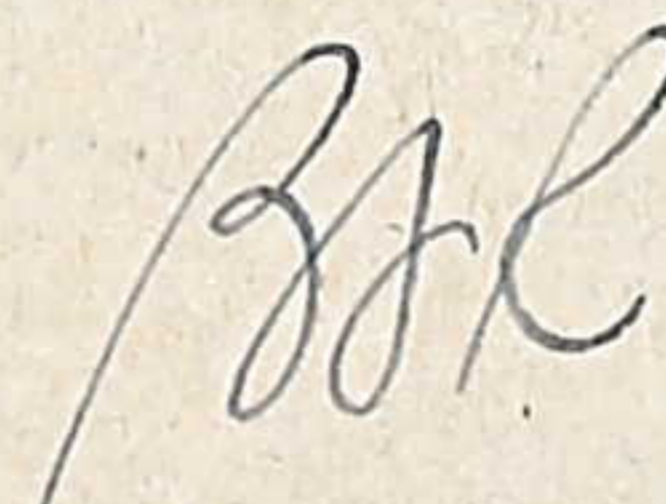
Mademoiselle Cécile P. Hurteau,  
318, rue Gounod,  
Appartement 15,  
Montréal, Québec.

Chère Mademoiselle Hurteau:

C'est pour moi un heureux privilège que de pouvoir vous faire parvenir les ailes emblématiques et le certificat reconnaissant les éclatants services rendus par votre frère, le sergent de section J.F.R. Hurteau.

Les plus belles paroles, je le comprends parfaitement, ne sauraient alléger votre chagrin; j'ai le ferme espoir, toutefois, que ces "Ailes", emblème d'opérations militaires contre l'ennemi, seront pour vous un précieux memento, rappelant le sacrifice, sur l'autel de la Liberté, d'une vie encore à son printemps, pour la défense du Foyer et de la Patrie.

Sincèrement,



W.A. Dicks,  
Commandant d'escadre,  
Officier préposé aux registres du C.A.R.C.

/AD

QUESTIONNAIRE FOR COMPLETION BY R.C.A.F. RETURNED EVADERS,  
ESCAPERS, OR PRISONERS OF WAR.

NOTE:

Please read the WHOLE questionnaire before starting to write your answers, and then make sure each question is answered.

Information given in this report will be passed on to the next-of-kin only at the discretion of the Casualty Branch. Nevertheless details of a very secret nature such as identity or exact location of aiders are not required, but only such general remarks which may enable the Casualty Branch to assess the probable fate of the other occupants.

In every case be careful, if the facts stated have been learnt, not by your own observation but through any other person, e.g., the enemy or inhabitants, to say so.

QUESTION 1.

Approximately where did your aircraft crash? Give if possible, the location in relation to the closest large town. Also the date you were shot down.

HORTOGENBASH in Holland on night of 22/23-4-44.

QUESTION 2.

Did you bale out? **YES.**

If so state:

(a) The number and, if possible, the identity of any other occupants of the aircraft whom you know to have baled before you. Have you any evidence, direct or hearsay, of what happened to them subsequently?

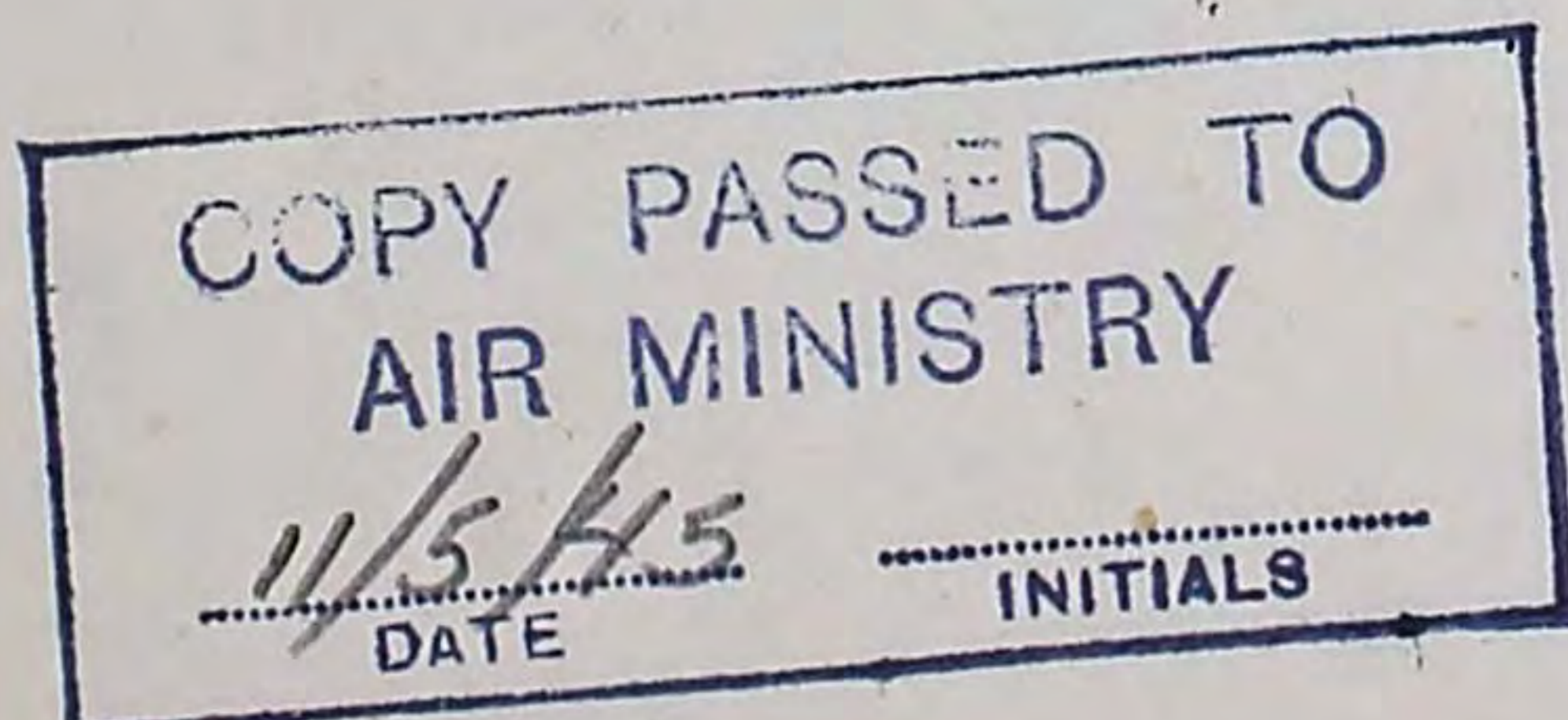
F/O.	Desrosiers.	RCAF.	P.O.W.
F/O.	Fortin.	RCAF.	Presumed to be dead by hearsay.

No information concerning Gunner, Engineer and Pilot.

(b) The number and if possible, identity of any other occupants whom you know to have still been in the aircraft when you left it. Give any details which may have a bearing on the probable fate of these men, for each of your remarks made in reply to this question state the source of your information, i.g., that you were an eye-witness or give all known particulars of the person who gave you the information.

W/O.	Brisson.	RCAF.	DEAD.
Sgt.	Welsh.	RAF.	DEAD.
F/S.	Hurteau.	RCAF.	DEAD.
F/S.	Legault.	RCAF.	DEAD.

Presume to have been found dead in the aircraft and F/O. Fortin outside the aircraft. This information were given to me by the peoples of Holland.



QUESTION 3.

Have you any other information touching on what happened or what probably happened to the other occupants?

0 - - - - -

QUESTION 4.

Have you information of any Royal Canadian Air Force or Royal Air Force personnel other than members of your own crew? The Casualty Branch is anxious to know details of any Prisoners of-war who have not come back. Please write down as many names as you can remember of those who have tried to escape or have died since the camps were evacuated, or whether shot accidentally killed. Any information of this nature which you can supply will help us to piece together details and eventually report to the next-of-kin of those who have not come back.

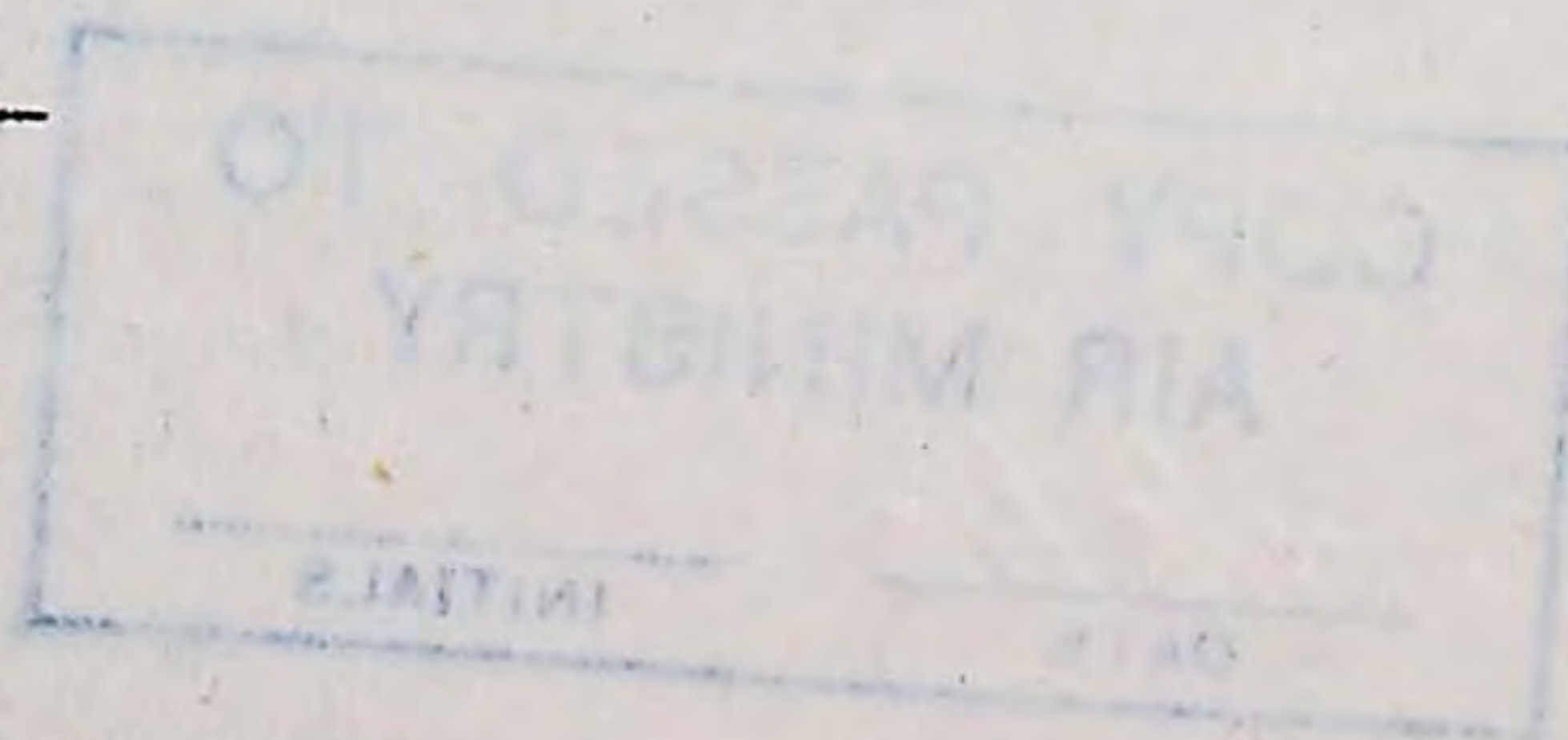
- - - - -

Name in BLOCK CAPITALS DAVIDSON E.L.  
 RANK F/O.  
 Service No. J.88391.  
 Unit at time of Capture 425 Sqn. R.C.A.F.  
 Date of Completion of this form. 29th May 1945.

THIS QUESTIONNAIRE WHEN COMPLETED IS TO BE TURNED UNTO THE RECEPTION WING  
 ADJUTANT FOR FORWARDING TO CANADIAN CASUALTY BRANCH,  
 c/o AIR MINISTRY,  
 78-77 OXFORD STREET,  
 LONDON W.1. ENGLAND.

ABOVE PASSED TO OTTAWA \_\_\_\_\_

FOLIO \_\_\_\_\_ FILE S.5.3. VCL.2.



QUESTIONNAIRE FOR COMPLETION BY R.C.A.F. RETURNED EVADERS,  
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NOTE:

Please read the WHOLE questionnaire before starting to write your answers, and then make sure each question is answered.

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In every case be careful, if the facts stated have been learnt, not by your own observation but through any other person, e.g., the enemy or inhabitants, to say so.

QUESTION 1.

Approximately where did your aircraft crash?  
Give if possible, the location in relation to the closest large town. Also the date you were shot down.

ST. ODENRODE, nr. EINDHOVEN, Holland. 22/23-4-44.

QUESTION 2.

Did you bale out?

YES.

If so state:

(a) The number and, if possible, the identity of any other occupants of the aircraft whom you know to have baled before you. Have you any evidence, direct or hearsay, of what happened to them subsequently?

B/A.	W/O.	Davidson.	RCAF.	P.O.W. Liberated.
Nav.	F/O.	Fortin.	RCAF.	Don't know
Eng.	F/S.	Welch.	RAF.	" "
Pilot.	W/O.	Brisson.	RCAF.	" "
R/G.	F/S.	Hurteau.	RCAF.	" "
MUG.	F/S.	Legault.	RCAF.	" "

(b) The number and if possible, identity of any other occupants whom you know to have still been in the aircraft when you left it. Give any details which may have a bearing on the probable fate of these men, for each of your remarks made in reply to this question state the source of your information, i.g., that you were an eye-witness or give all known particulars of the person who gave you the information.

Have not heard about rest of crew, except B/A.

QUESTION 3. Have you any other information touching on what happened or what probably happened to the other occupants?

NO.

(RETD) REUT BRANCH - 8 KOTTREUP ST

QUESTION 4. Have you information of any Royal Canadian Air Force or Royal Air Force personnel other than members of your own crew? The Casualty Branch is anxious to know details of any Prisoners of-war who have not come back. Please write down as many names as you can remember of those who have tried to escape or have died since the camps were evacuated, or whether shot accidentally killed. Any information of this nature which you can supply will help us to piece together details and eventually report to the next-of-kin of those who have not come back.

I don't know anybody. All friends came back.

(RETD) REUT BRANCH - 8 KOTTREUP ST

Name in  
BLOCK CAPITALS DESROSIERS John Ivan.  
RANK E/O.  
Service No. J.26858.  
Unit at time  
of Capture 425 Sqn. R.C.A.F.  
Date of Completion  
of this form. 16th May 1945.

THIS QUESTIONNAIRE WHEN COMPLETED IS TO BE TURNED UNTO THE RECEPTION WING  
ADJUTANT FOR FORWARDING TO CANADIAN CASUALTY BRANCH,  
c/o AIR MINISTRY,  
73-77 OXFORD STREET,  
LONDON W.1. ENGLAND.

ABOVE PASSED TO OTTAWA \_\_\_\_\_

FOLIO \_\_\_\_\_ FILE S.5.3. VOL.2.

(RETD) REUT BRANCH - 8 KOTTREUP ST

MINUTE 1.

17

n D.P.S.

1. No.425 R.C.A.F. Squadron reported that Halifax aircraft, LW.633, with a crew of 7, failed to return from an operational attack on Dusseldorf, Germany. It left base at approximately 22.40 hours, on the 22nd. April, 1944, after which no further news was received.

2. An extract from official German totenliste No.218, states that F/Sgt. Legault, Sgt. Brisson, and one identified, not R.C.A.F. member of this crew, together with two unknown, were killed on the 23rd. April, 1944, and buried on the 26th. April, 1944, in Section K.K. General Cemetery, Eindhoven-Woensell, which is located approximately 1 mile North of Eindhoven, Holland. Their grave numbers are as follows:-

F/Sgt. Legault - Grave No. 37                      Sgt. Brisson - Grave No.46  
1 identified, not R.C.A.F. member - Grave No. 45  
2 unknown - Grave No.38 and 39.

As two members of this crew, W.O.2. Davidson and F/O. Desrosiers are known to be Prisoners of War, and as this completes the crew of seven, it is possible to assume that the two unknown, buried in Grave Numbers 38 and 39 are F/O. Fortin and F/Sgt. Hurteau.

3. It is accordingly submitted that the death of CAN/J24180 F/O. B.C.E. FORTIN, and, CAN/R194194 F/SGT. J.F.R. HURTEAU, be presumed, for official purposes, to have occurred on the 23rd. April, 1944.

4. Presumption of Death action has already been taken on two R.C.A.F. members of this crew, W.O.2. J.P.G. Brisson and Sgt. J.H.C. Legault, and the two remaining R.C.A.F. members, W.O.2. J.E.L. Davidson and F/O. J.Y. Desrosiers, are now Prisoners of War. The one remaining member of this crew was not R.C.A.F. personnel.

*M.M. Goldberg LAC*

5/12/44.

7/12/44.  
**ORIGINAL ON P4/CAS/CAN.**  
**"RETURNS": 4-17. VOL: 7. FOLIO: 30.**  
B.C.D. list to Ottawa 524. 9/17/44.  
C.12. ~~N.C.O.~~ i/c *M.M. Goldberg LAC*  
**J.S. HARRIS.**

*M. Cameron 56*  
for R.C.A.F. Casualties Officer.

MINUTE 2.

Para. 3. of Minute 1. approved.

Wing Commander,  
for Director of Personal Services.

8/12/44.

*WCE*

4/1/44  
*Jmc*



Bucklehampton  
Pershore  
Worcestershire

8.5.44.

To

57185

The Canadian Air Ministry

R<sup>o</sup>2

Dear Sir

Would it be possible for you to give me information regarding my fiancée ~~Flight~~ Sgt Hurteau F. B. 194194 a/g. 425 Sqdn R. C. A. F. station Tollerthorpe Yorkshire, I last had news of Sgt Hurteau April 22<sup>nd</sup>

If it isn't possible for you to give me news of him, could you tell me where I could get information as the anxiety is very great missing from 425 Sqdn 22-4-44.  
C.R. 453.



I have wrote to the  
Commanding Offices at  
Tothorpe but I havnt  
as yet received an answer  
I do hope you will be  
able to give me news

Thanking you  
I

remain

Yours Faithfully  
Dorothy Eden.

19 MAY 1944

9

A I R M I N I S T R Y

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

CAN/R194194/P4/CAS


20th May, 1944.

Dear Miss Eden:

In reply to your letter of the 8th May, 1944, requesting information concerning Sergeant J.F.R. Hurteau, I regret to advise you that he was reported missing after air operations on the night of the 22nd/23rd April, 1944, after an attack on Dusseldorf. No information has since been received concerning him, however, I can assure you that enquiries are continuing, and it is hoped that better news may be forthcoming.

Please accept my sympathy with you in your anxiety.

Yours sincerely,

  
(A.B. Matthews) Wing Commander,  
for Air Officer Commanding-in-Chief,  
R.C.A.F. Overseas.

Miss D. Eden,  
Bucklehampton,  
Persnore,  
Worcestershire.

MAF/PA

Le 7 Mai, 1944.

Chere Madame Hurteau,

Avant de recevoir cette lettre, vous aurez sans doute ete notifie par le bureau des Records, que votre fils Sergent Joseph Fernand Rolland Hurteau, manque a l'appel par la suite d'operations au-dessus du territoire ennemi.

La presente est pour vous donner quelques details et pour vous exprimer les regrets et la sympathie ressentis par tous les membres de l'escadrille et par moi-meme.

L'avion dans lequel votre fils agissait comme Mitrailleur avait ete envoye avec d'autres avions, en territoire ennemi. Ils partirent vers dix heures et demi le soir du 22 Avril, 1944 mais malheureusement, nulle nouvelle n'a ete recue d'aucun membres de l'equipage depuis leur depart.

En perdant cet avion nous perdions une de nos meilleurs equipages qui etait a se tracer un brillant futur dans l'escadrille. Votre fils avait deja cinq operations a son credit au-dessus des territoires ennemis.

Rolland etait tres populaire avec tous et chacun de l'escadrille, et soyez convaincu que tous regrettons sa perte.

Il y a toujours la possibilite que votre fils soit prisonnier-de-guerre, et si tel est le cas, vous en serez avise soit par lui-meme ou par le Bureau des Records, qui en seront averti par la Croix Rouge Internationale.

Les effets personnels de votre fils ont ete envoyes a l'Officier Commandant, Royal Air Force Central Depository, ou ils seront deposes en attendant de meilleures nouvelles, ou au moins pour une periode de six mois, apres quoi ils vous seront envoyes par l'entremise des Bureaux Chefs a Ottawa.

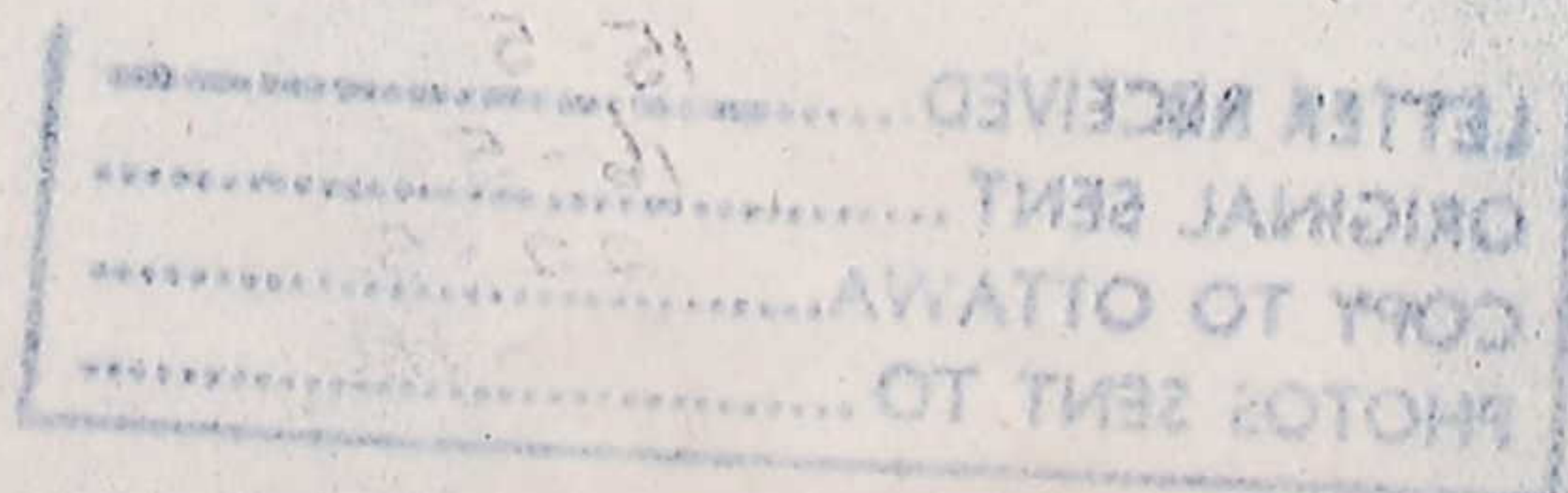
Laissez-moi vous exprimer toute la sympathie, que nous ressentons avec vous, et soyez assure que nous respectons le supreme sacrifice qu'il a fait, si loin de son pays et de sa famille pour la Cause de l'humanite et au service de la Cause Alliee.

Votre tout devoue,

*R. A. C. Lemaire*  
Officier Commandant,  
Escadrille, 425 (R.C.A.F.)  
Outre-mer.

*J. H. Hurteau*  
Mme. A. Hurteau,  
318 rue Gounod Apt. 15,  
Montreal, P. Que.,  
Canada.

15 MAY 1944.



LETTER RECEIVED.....15-5  
ORIGINAL SENT.....16-5  
COPY TO OTTAWA.....22-5  
PHOTOS SENT TO.....N/A

Sgt Huteau J.F.R.

copy to Ottawa 17/5/44

P.416228

425 (RCAP) Squadron

Ref: 425/51/9/Air.

8th May, 1944

6

Halifax III. LN. 633 "C" - Missing on the night of  
22/23rd April 1944.

The following report is submitted in amplification of my A.49 dated 23rd April 1944, with reference to the crew of the above mentioned aircraft which has been reported missing on the night of 22/23rd April/44.

2. At approximately 22.40 hours on the night of 22nd April 1944, the above mentioned aircraft piloted by Can. No. 144939 W/O.2 Brisson J.P.C., took off from this aerodrome to carry out bombing of Dusseldorf, Germany, but unfortunately nothing further has been heard from any member of the crew since time of take off.

3. The names of the members of the crew, together with particulars of their operational trips and hours are as follows:-

				OPERATIONAL	
				Trips.	Hours.
R. 144939	W/O.2	Brisson J.P.C.	Pilot.	5 $\frac{1}{2}$	54.45
J. 24180	T/P/O.	B.C.E. Fortin	Nav.	4 $\frac{1}{2}$	45.55
J. 26858	T/P/O.	J.Y. Desrosiers	W/Op.	4 $\frac{2}{3}$	47.55
R. 161701	W/O.2	Davidson E.L.	B/A.	4 $\frac{1}{2}$	45.55
R. 194194	Sgt.	Huteau J.F.R.	R/AG.	4 $\frac{1}{2}$	45.55
R. 94129	Sgt.	Legault J.H.C.	MO/AG.	3 $\frac{1}{2}$	38.15
2201513	Sgt.	Welch D.	F/Eng.	3 $\frac{1}{2}$	40.20

Sgd: J.E.R. St. Amour F/Lt.

For Wing Commander, Commanding,  
425 (R.C.A.F.) Squadron.

ESTATES BRANCH

OTTAWA, 17th September, 1945.

Miss Cecile P. Hurteau,  
318 Gounod St.,  
Apt. 15,  
Montreal, Que.

HURTEAU, Joseph P., F/S (deceased)  
R.194194 R.C.A.F.

Dear Miss Hurteau:

You will recently have received from Treasury a cheque payable to your order in the amount of \$401.91.

This is the total amount to the credit of your brother's estate and is made up as follows:

Cash found in effects.....	\$ 63.25
Sale of bicycle.....	15.65
Post Office Savings Bank account, Pershore....	14.75
Balance of pay account .....	37.14
War Service Gratuity per attached award form.....	<u>271.12</u>
Total.....	\$401.91

The whole amount is paid to you as sole beneficiary named under your brother's will on file in this Branch.

Will you kindly complete and return the form of acknowledgment.

Yours faithfully,

✓

DIRECTOR OF ESTATES

FEM/R

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

*J.L.* 2  
AIR

DECEASED  
MEMBER'S  
NAME

**J. Fernando, R.**  
(CHRISTIAN NAMES)

**Hurteau**  
(SURNAME)

REGISTER NO.

*A5858*  
19676

FILE NO.

8 Juin/45

PAYEE

Receiver General of Canada

DATE

ADDRESS

Director of Estates,  
Ottawa, Ont.

SERVICE NO.

R194194

FINAL RANK OR RATING

FS

DATE OF TERMINATION OF OVERSEAS SERVICE

23 Avril/44

DATE OF DISCHARGE

23 Avril/44

A. TOTAL QUALIFYING SERVICE

NO. OF DAYS 577 EQUAL TO 19 COMPLETE PERIODS AT \$7.50

\$ 142.50

B. QUALIFYING OVERSEAS SERVICE

NO. OF DAYS 302 LESS 7 INELIGIBLE DAYS, EQUAL TO 295 DAYS @ 25C. PER DAY

73.75

C. SUPPLEMENT FOR OVERSEAS SERVICE

DAILY RATES AT DISCHARGE

PAY \$ 3.50  
SUBSISTENCE OR LODGING  
AND PROVISION ALLOWANCE \$ 1.25  
ADDITIONAL PAY \$

*J.V.45*

DEPENDENTS' ALLOWANCE 1/30 OF \$

TOTAL \$ 4.75 X 7 = \$ 33.25  
NO. OF DAYS 302 X \$ 33.25  
183

54.87

D. WAR SERVICE GRATUITY

271.12

E. DEDUCTIONS

OVERPAYMENT OF

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

OTHER DEDUCTIONS \$

F. TOTAL AMOUNT PAYABLE

*E85*

271.12

G. YOUR PORTION OF GRATUITY IS—

DEPENDENTS' ALLOWANCE IN ISSUE TO YOU \$ \_\_\_\_\_ OF \$ \_\_\_\_\_ = \$ \_\_\_\_\_  
TOTAL DEPENDENTS' ALLOWANCE IN ISSUE \$ \_\_\_\_\_

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

PREPARED BY **NC** CHECKED BY **FW**

TREASURY  
CHECKED BY *[Signature]*

DATE

12.6.45

*[Signature]*  
SERVICE REPRESENTATIVE



FN49570 PERSONAL EFFECTS OF CAN/R194194 F/SGT. HURTEAU. J.F.R.

1 brown fibre suitcase contg:	1 Waterman's pen & pencil set in blue leather case
1 brown dressing gown	1 Ronson lighter
4 shirts	1 brevet A.G.
2 prs. pyjamas	1 crown cloth
1 pr. brown leather slippers	1 red fountain pen (Zenith)
1 pr. black leather Oxfords	1 Admiral wrist watch (unservice- able)
1 blue zipp windbreaker	2 Rosaries in black leather case
4 towels	1 metal crown
1 pr. white tennis shorts	1 Identification bracelet
4 face cloths	1 cross
15 prs. socks	1 miniature elephant
1 summer jersey	1 pr. scissors
1 summ khaki jersey	1 bottle opener
1 blue woollen pullover	1 key
6 handkerchiefs	1 lock
1 blue woollen scarf	1 tie
3 prs. shorts	1 deck playing cards
2 vests	3 torches
1 sewing kit	1 blue holdall (canvas)
1 brown leather wallet	1 brush
1 tin opener	1 trouser hanger
1 envelope contg: 1 photo	1 soap box
Greetings cards	1 shaving brush
1 map	1 Sgt's chevron
2 religious booklets	1 small blue kitbag
1 address book	1 parcel contg:
2 books	1 silver grey shirt
1 kitbag handle	3 handkerchiefs
1 pkg. correspondence	1 pr. socks. (black)
1 small cardboard box contg:	

NOTE. Post Office Savings Bank Book No. 260 Pershore R.A.F.

1 Sixth Victory Loan Receipt date 13.4.44.

1 Photograph to be returned to Owner

Extracted by Unit and forwarded to R.C.A.F. O/S H.Q. London.

/P.T.O.

Cash amounting to £14.3s 0d found among the personal effects has been credited to his service account.

Original station inventories signed by H.E. Briggs F/O on 24/4/44 and 4/5/44

Effects checked at Central Depository on 5/6/44 and 8/7/44

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

# WILL

R.C.A.F. R. 60  
50M-8-40 (6698)  
H.Q. 1062-3-45

(1) I, HURTEAU Joseph Fernand Rolland of the Montreal of the City Town Village Township  
of Montreal in the County District of .....

Last Permanent Civilian Address

Province of Quebec Butcher  
(Civil Occupation)

a member of the Royal Canadian Air Force, Number R 194194 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 SISTER Miss Cecelia Hurteau  
of 318 Gounod St., Apt. 15,  
Montreal, Quebec.  
MY WHOLE ESTATE

IN THE EVENT OF MY SISTER'S DEATH BEFORE MINE, I GIVE, DEVISE AND BEQUEATH UNTO:

MY SISTER Miss Maria Hurteau  
of 318 Gounod St., Apt. 15,  
Montreal, Quebec.  
MY WHOLE 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 Mr. Antonio Hurteau of 2124 Centre St., Montreal, Quebec  
(Name) (Address)

(Merchant)

....., to be the Executor ~~Executrix~~ of this my Last Will.

IN WITNESS WHEREOF I have hereunto set my hand this 26th 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.

R. Hurteau  
(Signature of Testator)

First Witness sign here.

(5) [Signature]  
(Signature)

26 Havelock St., Toronto, Ontario  
(Address)

Clerk, R.C.A.F. R 129457  
(Occupation)

W.R. Hayman  
(Signature)

170 Dovercourt Rd., Toronto, Ontario  
(Address)

Clerk, R.C.A.F. R 89832  
(Occupation)

Second Witness sign here.

R.C.A.F. Records Office  
Rec'd **OCT 13 1942**  
O. K. .... G.I.B. ....  
R. C. .... N. I. ....  
S. L. .... P. A. HS

(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.

V

2-2-45

FOR COMPLETION AND RETURN BY

1

Form P. 64

Miss Cecelia HURTEAU

318 Gounod St., Apt. 15

MONTREAL, QUE.

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. R194194 FD 2

DEPARTMENT OF NATIONAL DEFENCE  
ESTATES BRANCH  
OTTAWA, ONT.

31st January 1945

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

HURTEAU, Joseph Fernand Rolland F/S

R194194 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.

FEM/MJ

*J. C. Mullin*  
Director of Estates.

ANSWER IN FULL ALL APPLICABLE QUESTIONS

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

Degrees of Relationship	RELATIVES required to be accounted for	INFORMANT'S STATEMENT		
		NAME IN FULL of any Relative, if any, in each degree specified	Age	ADDRESS IN FULL of each surviving Relative, opposite his or her name, and date of death of each deceased relative
1	Widow of the Deceased.....	<hr/>		
2	Children of the Deceased and dates of their Births.....	<hr/>		
3	Father of the Deceased.....	(Deceased) AVILA HURTEAU		
4	Mother of the Deceased.....	ALPHONSINE HURTEAU CLOUTIER	71	131A ROSE DELIMA ST. MONTREAL QUE.
5	Brothers of the Deceased	Full Blood	44 <del>45</del>	ANTONIO HURTEAU 2435 GRAND TRUNK ST. MONTREAL QUE.
		Half Blood		<hr/>
6	Sisters of the Deceased	Full Blood		LAWRENCE VERVILLE 49 4534 ST. ANTOINE ST. CECILE PRISCILLA HURTEAU 45 318 GOUNOD ST. APT. 15. GABRIEL HURTEAU 42 324 " " " 1. ALBERTINE BELHUMEUR 40 2514 DUVERNEY ST. GERMAIN HURTEAU 38 318 GOUNOD ST. APT. 15. MARIE-BERTHE HURTEAU 37 " " " " " SIMONNE CADORETTE 34 1448 CHOMODY ST. APT. 9. JEANNE R. CATHRALL 32 318 GOUNOD ST. APT. 15. NOELLA HAMEL 26 324 " " " 1.
		Half Blood		<hr/>
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	
	<hr/>		<hr/>	

ANSWER FULLY EACH QUESTION ON THIS PAGE  
PARTICULARS AS TO IDENTITY

8	Full names of the deceased.	JOSEPH FERNAND ROLLAND HURTEAU
9	Date of his birth.	OCTOBER 5TH 1914
10	Place and date of his marriage.	_____
11	Place and date of his parents' marriage.	MONTREAL QUE. FEB. 14TH 1894.

## PARTICULARS OF DOMICILE

12	Place where deceased was born.	229 QUESNEL ST. MONTREAL QUE.
13	State, in order, the Province, State and/or County in which he resided before enlistment and the period of time in each.	(a) } (b) } QUEBEC. (c) } (d) }
14	Nature of employment before enlistment.	BUTCHER.
15	State whether he owned the premises in which he lived, and, if so, where situated.	No.
16	Name place where deceased stated he intended to make his permanent home.	MONTREAL QUE.

## PARTICULARS OF ESTATE

17	Did he leave a Will? If in your custody, please forward.	NO. WILL MADE OUT WITH R.C.A.F.
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?	No.
20	Amount of War Savings Certificates held by deceased. Indicate where located.	NONE.
21	Amount of Victory Loan Bonds held by deceased. Indicate whether registered or bearer and where located.	BELIEVE HE WAS PAYING FOR ONE AT TIME HE WAS REPORTED MISSING.
22	If deceased had life insurance, name companies and amount payable under each policy and the person named as beneficiary therein.	NONE.
23	Describe other assets, if any, and estimated value thereof. Use space on page 4 if necessary.	NONE.

## 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.	IF SO, NOT KNOWN.
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)

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

\*.....SISTER.....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.

Mlle Lucile Precilla H. H. H.

{ Signature of Informant

318 GOUNOD ST. APT 15,

Address

MONTREAL QUE.

## CERTIFICATE

I hereby certify that to the best of my knowledge and belief Mlle Lucilla

\*See above.

Precilla

{ Name of informant

is the\*

sister

of the Deceased

above described. The above Declaration was made by the Informant and signed in my presence.

Dated at

6 JUNE

this

day of

JUNE

1945

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

Montreal

Qualification

Cure

Address

Riv. St. E. H. H. H.

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

Insofar as his personal belongings are concerned, it will be in order to retain his uniforms, boots and/or shoes and overcoat and give them to the Officer's Kit Replacement Bureau. However, with regards to his other wearing apparel, such as shirts, socks, sweaters and ties we would like them returned to us along with the "wings" and "stripes" off his clothing for distribution between the family as keepsakes. Rolland always said they were not allowed to take such articles as watches, identification bracelets, pen and pencil sets, rings, pocket books, cigarettes lighters with them on raids and it is generally known these are left behind in safekeeping at the Air Station during his absence. There are some of these items Rolland possessed and we most certainly want them returned to us. He had, identification bracelet, wrist watch, Ronson cigarette lighter, a blue pen and pencil set, leather initialed pocket wallet. These things were gifts and have high sentimental value to us, his family. Please return.



# OFFICIAL ROYAL CANADIAN AIR FORCE CASUALTY NOTIFICATION

NUMBER **R194 194**

RANK **P/SGT**

UNIT **425 RCAF SQDN  
(OVERSEAS)**

TRADE **A/G (SP. GRP)**

R.C.A.F.	R.A.F.	R.A.A.F.	R.N.Z.A.F.	OTHER
<b>X</b>				

NAME **HURTEAU, JOSEPH FERNAND ROLLAND**

PRESENT MARITAL STATUS **SINGLE**

RELIGION **R.C.**

CANADIAN **YES**

FRENCH CANADIAN

OTHER

NEXT OF KIN **MRS. THELESFOR CLOUTIER**

RELATIONSHIP **MOTHER**

ADDRESS **318 GOUNOD APT., 15 MONTREAL.**

FATHER'S NAME **DECEASED**

ADDRESS

LIVING ON ENLISTMENT ~~YES~~  
**NO**

MOTHER'S NAME **MRS THELESFOR CLOUTIER**

ADDRESS **318 GOUNOD., APT 15,  
MONTREAL QUE.**

LIVING ON ENLISTMENT **YES**

ADDRESS AT TIME  
OF ENLISTMENT

MARITAL STATUS AT TIME  
OF ENLISTMENT

OCCUPATION

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

**NOT KNOWN, --BEING OBTAINED.**

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. **BOMBER MAIL LETTER - 9-DEC 44**

**PREVIOUSLY REPORTED "MISSING" 23-APR-44 AFTER AIR OPERATIONS  
(OVERSEAS) (OVER DUSSELDORF, GERMANY) AND SUBSEQUENTLY REPORTED  
"MISSING BELIEVED KILLED" (OFFICIAL GERMAN INFORMATION)**

**NOW "PRESUMED DEAD" 23-APR 44 FOR OFFICIAL PURPOSES.**

*8/6  
24/1*      *RH 4-4*

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 **22-JAN-45**

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

# Royal Canadian Air Force

## CERTIFICATE OF PRESUMPTION OF DEATH

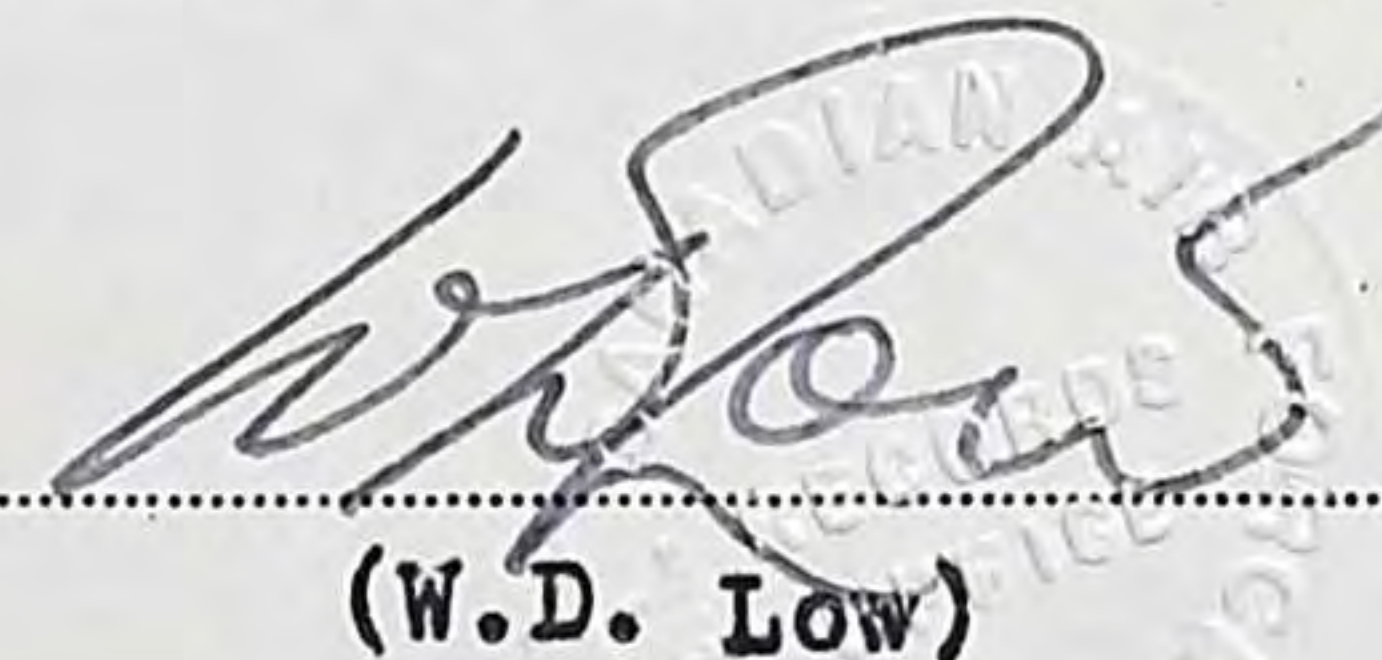
NO/10717

**This is to Certify** that..... R194194 FLIGHT SERGEANT  
(Number) (Rank)

..... HURTEAU, JOSEPH FERNAND ROLLAND ..... R.C.A.F.  
(Name in Full) (Unit)

has been officially reported as missing since the 23RD day  
of APRIL, 1944, and that, full inquiries having been made,  
there appears to be conclusive proof that he is dead. For official purposes,  
therefore, he is presumed to have died on or since the above mentioned date.

Dated at Ottawa, Canada, this 22ND day of JANUARY, 1945.

  
.....  
(W.D. Low)

Wing Commander,  
Acting 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.....HURTEAU JOSEPH FERNAND ROLLAND.....  
(Surname first—Christian names in full—Block capitals)

(2) Regimental or Official Number and Rank.....R. 194194 AC2.....

(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.....NA.....

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

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

.....NA.....

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

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

Names and ages.....NA.....

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

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

Name.....NA.....

Postal Address.....NA.....

[SEE OTHER SIDE]

R.C.A.F. Records Office  
 Rec'd **OCT 13 1942**  
 O. K. .... C.I.B. ....  
 R. C. .... N. I. ....  
 S. L. .... H.A. *HS*

(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.....  
.....NA.....

(11) Is your <sup>STEP</sup> father alive? ~~YES~~ ~~NO~~ ~~STEP-FATHER~~ THELESFOR CLOUTIER

If so, state name and address, occupation..... CLOUTIER THELESFOR (LABORER).....  
.....179 ROSE DE LIMA ST. MONTREAL P.Q.....

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

(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.....

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

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

If so, state name and address..... CLOUTIER MRS. ALPHONSINE.....  
.....179 ROSE DE LIMA ST. MONTREAL P.Q.....

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

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

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?.....NA.....

(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 NA.....

Full Name NA.....

Postal Address NA.....

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

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

If so, in what Company?.....NA.....  
(Give number of policy)

Have you made arrangements for payment of your Insurance Premium?.....NA.....  
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.

.....  
(Signature of officer or man)

Date.....SEPTEMBER 26, 1942.....

Date.....SEPTEMBER 26, 1942.....  
Officer Commanding.....FCB(H.O. McDONALD).....W/C

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.

Mrs. T. Cloutier,  
318 Gounod St., Apt. 15, Montreal  
Quebec, March 11th, 1945.

Minister of National Defense,  
Aeronautic Service,  
Ottawa, Ontario.

Dear Sirs: Reference file R-194194 - R.O.4.

With reference to your correspondence regarding my son Flight Sergeant Joseph Fernand Rolland Hurteau who has been missing since raid of April 22nd, 1944, on Dusseldorf.

I first received telegram on April 26th, 1944 from R.C.A.F. Ottawa, reporting my son missing on air operation Overseas. Your letter of May 1st, was next received confirming your telegram and also advising the bomber in which he formed part of the crew, failed to return to base after the raid on Dusseldorf. In your letter you also pointed out you were uncertain as what may have happened to him and you were taking steps to find out if he were wounded, prisoner of war or if he had been killed. We heard nothing further from you until receipt of your telegram of September 18th, 1944 in which you stated the International Red Cross had been informed by an official German source that my son had lost his life however, you further mention pending completion of presumption of death action being instituted by Ministry, my son was to be considered missing believed killed. Your letter of September 27th, confirming telegram of the 18th, further states the information you received through the International Red Cross at Geneva who in turn obtained the details from a German source, that my son had lost his life and was buried on April 26th, 1944 in Central Cemetery - Section K.K. - Eindhoven, Woensel in Holland and on the strength of this information, coming as it did from official German sources, you were considering 'presuming' him dead. The Canadian Red Cross then wrote me from Ottawa that "presumed dead" were only words used when a man is missing and when no news is received over a long period, makes it appear unlikely that he is alive.

On Jan. 15th, 1945, along comes your letter informing me that the official period had lapsed for presuming my son missing and it was necessary for you to presume him dead on active service.

While I appreciate at the time of his disappearance Eindhoven, Holland, was in enemy hands and remained in enemy hands until a few months ago, it was impossible to determine definitely whether or not he was actually dead and buried as stated by the enemy and I have waited patiently and have hoped when that part of Holland has been cleared of the enemy, you would have obtained positive proof whether or not he was dead and actually buried in Eindhoven. Surely now that part of Holland is in Allied hands you have some way of having someone in Eindhoven make a thorough check of the Cemetery and the Cemetery 'Register' in an effort to establish whether his body rests there or not. Right from the very beginning of your correspondence there has been the element of doubt as to his being dead and both yourselves and the Red Cross have used the word 'Presumed' very freely. Moreover, at the present time you will officially 'Presume' him dead. While such a situation exists I believe there is hope he still may be alive somewhere over there.

I am his mother and he is my son, so you can readily appreciate my anxiety in wanting to know definitely what has actually happened to him. All the information I have received, I am greatly thankful for believe me, and I understand the difficulty you had previously to obtain it, but now our Armies have freed Eindhoven and are well past it, now you should be ~~xxxx~~ in a position to investigate further right on the spot by our own Agents. I am given to understand such action can be done and in fact, has been done on other occasions therefore will you kindly make further enquiries and let me know as soon as possible if his name appears in the Cemetery Register and if his grave is in the Cemetery. (over)

Thanking you in advance,

Yours sincerely,

Mrs. T. Cloutier.

19th March, 1945.

Mrs. F. Cloutier,  
318 Gounod Street,  
Apartment 15,  
Montreal, Quebec.

Dear Mrs. Cloutier:

I wish to acknowledge your letter of March 11th, concerning your son, Flight Sergeant Joseph Fernand Rolland Hurteau.

The Air Ministry will not classify personnel killed unless direct and unquestionable evidence of death is received from a British or Allied source, and therefore the established procedure where personnel are believed to have lost their lives and to have been buried in enemy or enemy occupied territory, is to presume their deaths for official purposes.

It is the duty of the Graves Registry Units which are under the control of the Military authorities to enquire for and locate the graves of all personnel known to have crashed in occupied areas. However, as this involves a great volume of work some considerable time will elapse before further information is received. Although Eindhoven in Holland has been liberated, I am sure you will realize that several thousand gallant airmen were shot down and buried in Continental Europe when practically all of it was occupied by the enemy and every possible effort on an organized basis is being put forth to secure what information is available.

- 2 -

A Royal Air Force and Dominion Air Force Missing Research and Enquiry Service has been organized for the purpose of research and enquiry in liberated territories into the circumstances of aircrews reported as casualties and this service will endeavour to obtain additional information to supplement that already received. This Service is now operating and will continue to conduct systematic research on a chronological basis. The size of the problem with which they are confronted makes it impossible to give priority in any particular case.

Please be assured that just as soon as any further news is received you will be so advised.

I know that no words of mine can heal the sorrow that the loss of your son must bring to you and the members of his family but I feel sure that you will find comfort in the knowledge that your son has given his life in the great cause for which so many of our finest young men have made the supreme sacrifice.

Yours truly,

C.G.

EGW/S/O



le 16 août

4

Mme Téléphore Cloutier,  
318, rue Gounod, appt No 15,  
Montréal, P.Q.

Madame,

On me prie de vous apprendre que votre fils,  
Joseph-Fernand-Rolland Hurteau, a été promu au gra-  
de de sergent de section, à compter du 11 mars 1944.

Je regrette de vous dire que je n'ai pas re-  
çu d'autres nouvelles de votre fils depuis qu'il a  
été porté disparu le 23 avril. Je tiens à vous ex-  
primer, de même qu'à tous les membres de votre fa-  
mille, mes profondes condoléances en ce moment d'é-  
preuve.

Votre tout dévoué,

Officier préposé au registre des morts,  
blessés et disparus du C.A.R.C.  
pour le Chef de l'état-major de l'Air.

Translation,  
~~EE~~ AP-YS,  
14-8-44



6226-20-10-49

Miss Cecile P. Hurteau (sister)

318 Gounod St.,

Apt. 15,

Montreal,

Que.

Sept.-45

MEMORIAL BAR

DATE DES

REGN. NO. 3839

FRENCH CARD

NAME HURTEAU, Joseph Fernand Rolland

FILE NO. FD116

RANK ~~SGT~~ F/S AIR GUNNER

CATEGORY ~~MISSING~~ PRES. DEAD

REG. NO. R194194

DATE OF DEATH: 23 Apr. /44

MOTHER LIVING: YES

WIFE: NA

MINISTERIAL CARD: 9-5-44

ROYAL MESSAGE:

MEMORIAL CROSS  
TO CHAPLAIN:

To Mother ~~and stepfather~~

MAY 16 1945

DEL'D TO MOTHER:

MAY 13 1945

To Mother

FEB 28 1945

DEL'D TO WIFE:

Mme. Telesphore Cloutier,  
318 rue Gounod, appt. No. 15,  
Montreal, P. Q.

COMMAND:

RELIGION:

*mob*  
*don*

ROYAL CANADIAN AIR FORCE



Name..... HURTEAU JOSEPH FERNAND ROLLEND ..... R 194194  
 Rank..... AC2 ..... R C A F  
 Age..... 27 ..... Height..... 5'3" ..... Weight..... 130  
 Hair..... MEDIUM BROWN ..... Eyes..... BROWN ..... Hair on face..... DARK  
 T. MOUSTACHE  
 Marks, scars, etc..... SCARS UNDER RIGHT EYE AND ON RIGHT CHEEK

*R. Hurteau* ..... (Signature of holder)

*J. S. [unclear]* ..... (Signature of issuer)

Place..... NO. 1 "M" DEPOT TORONTO ONT. Date..... SEPT. 30, 1942

Card serial number..... 174919

IF YOU LOSE THIS CARD, <sup>c</sup> notify your C. O. immediately, giving him full particulars.

IF YOU FIND THIS CARD, please mail in an envelope addressed to: "The Secretary; Dept. National Defence (Air); Ottawa, Canada; attention P. I. B."

NO POSTAGE NECESSARY.



R 194194

1492

Hurteau J. H.

Sgt.





A 59 19  
194194

HURTEAU, JF

THE UNIVERSITY OF THE STATE OF NEW YORK



STATE

PAY BOOK

THE UNIVERSITY OF THE STATE OF NEW YORK  
THE STATE EDUCATION DEPARTMENT  
125 SOUTH WASHINGTON STREET  
ALBANY, N. Y. 12242

# ROYAL CANADIAN AIR FORCE SERVICE BOOK

## INSTRUCTIONS TO OFFICERS AND AIRMEN

1. You will be held responsible for the safe custody of the book.
2. You will always carry the book on your person both at home and abroad.
3. You must produce the book whenever called upon to do so by a competent authority, civil, naval, military or air.
4. You must not alter or make any entry in this Book (except as regards short form of Will on page 16, see instructions on pages 12 to 15), and disobedience of this order will be treated as a serious offence.
5. Should you consider that any entry in the book is lacking or incorrect, or should you lose the book, you will report the matter to your immediate superior in the Royal Canadian Air Force. Any change in name or address of person to be informed of casualties must be reported immediately to your Commanding Officer.

1

Air Force No. *R 194194* Surname... *HURTEAU*  
Christian Names (in full) *JOSEPH FERNAND ROLLAND*  
Date of Birth... *5-10-14* Religion... *RC*  
Date of Enlistment/Appointment... *25-9-42*  
Married (M), Widower (W) or Single (S)... *S*  
Occupation in Civil Life... *Butcher*

Signature of Holder... *Sgt Hurteau J.F.R.*

Name and Address of Next-of-Kin.....

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

*Mrs. Alphonsine Hurteau (mother)*  
*318 Gourrad St. Apt 15*  
*Montreal, P.Q.*

Certified Correct..... *J. Hurteau*

Date... *17-6-43* Place... *414 St. Louis St.*





IMMUNIZATION PROCEDURES  
VACCINATION

Date	Result	Initials of M.O.
30.9.42.		J. F. HOPKIRK

Susceptibility Test	Date	Result
Schick Test.....	30.9.42	Sens
Dick Test.....	30.9.42	Neg.

PROTECTIVE INOCULATIONS\*

Nature of Inoculation	Date	Dose	Initials of M.O.
TABT. 1st	30.9.42	1cc	J. F. HOPKIRK
" 2nd	4.11.42	"	
" 3rd	25.11.42	"	
Kahw. neg.	2.10.42	—	

IMMUNIZATION PROCEDURES—Con.

Nature of Inoculation	Date	Dose	Initials of M.O.

\* To include diphtheria toxoid, scarlet fever toxin, cholera, plague and yellow fever vaccines, etc.

Solely for use on Active Service. This Will page must NOT be used until you have been placed under orders for Active Service.

WILL

(For use if the Officer or Airman has not already made a will or wishes to alter one already made. See instructions on page 15.)

In the event of my death I give

I appoint.....

Residing at.....

to be my executor.

Signature.....

Rank, Air Force No.....

Unit.....

Date.....

*Bill Baker*  
*H. Kephernock*  
*Frank Jackson*  
*S. M. [unclear]*  
*W. R. Horsey*  
*D. R. M.*



# PARTICULARS OF DENTAL TREATMENT

Date	Re-quired	Com-ple- ted	SPECIFICATION Use authorized abbreviations and symbols	SIGNATURE OF DENTAL OFFICER
26-642			P.U.P.	<i>G. B. Capt.</i>

R.C.A.F. A.47A  
 100M-4-43 (3174)  
 H.Q. 885-A-47A

*R194194*  
*Sgt Hurteau J. F. R.*

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

R194194 Sgt. Hurstau

Date 22. 11. 43.

B. Keefe

CONFIDENTIAL

C.M.H.

R.C.A.F. M. 2  
309M-4-41 (87)  
H.Q. 1062-10-2

ROYAL CANADIAN AIR FORCE

Medical Board held at Montreal, P.Q.

Date Sept 2nd, 1942

FILE NUMBER

R.194194

Surname HURTRAU Chr. Names JOSEPH FERNAND HOLLAND  
Nature of Commission M 2 Date of Birth 5/10/14 Married or Single Single  
Branch General List Hours Flown None  
Address 318 Gouard, Apt 15, Montreal, P.Q.

- HAVE YOU ANY HISTORY OF:-
(i) NERVOUS TROUBLE or Nervous Breakdown NO
Severe or "Sick" Headaches, Migraine NO
Fits or Convulsions of any kind NO
Sun or Heat Stroke NO
Head Injury or Concussion (including "knock-out") NO
Insomnia, Nightmares, Sleep-walking, or Bed-wetting NO
(ii) LUNG TROUBLE or Consumption NO
Bronchitis, Pneumonia or Pleurisy 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 Diphtheria
(iv) STOMACH or BOWEL TROUBLE NO
Chronic Indigestion or Pain after Food NO
(v) KIDNEY or BLADDER TROUBLE NO
Syphilis or Gonorrhoea Gonorrhoea 5 years ago - cured & treated by Doctor.
(vi) TROPICAL DISEASE NO
Malaria NO
Dysentery NO
(vii) EYE TROUBLE or Inflammation of Eyelids NO
Wearing of Glasses NO
Colour or Night Blindness NO
(viii) EAR TROUBLE, Earache or Discharge from Ears NO
Deafness, Noises in the Ears, or Dizziness NO
Frequent Colds in Head, Catarrh or Obstruction 3 or 4 bad colds in winter
Prolonged Hoarseness or Loss of Voice NO
Sea, Car or Train Sickness NO
Discomfort on Swings, Roundabouts, Switchbacks NO
(ix) OPERATIONS NO
(x) Any illness or Injury not mentioned above.

Grade VII Quebec
Education
Present Occupation Butcher Hobbies None
Previous Service None
Athletics Swimming, Hockey, Baseball, Hunting
Habits—Smoking 20 cigs/day Alcohol Occasionally
FAMILY HISTORY—Consumption NO Diabetes NO Haemophilia NO
Nervous Ailments, Mental Trouble, or "Fits" NO
Father Alive—Health NA Dead—Cause 58 Cause Unknown
Mother Alive—Health GOOD Dead—Cause NA
Brothers (...) Alive—Health Good (...) Dead—Cause A few dead very young
Sisters (...) Alive—Health Good (...) Dead—Cause

I hereby declare that I have carefully considered the statements made above, that to the best of my belief they are complete and correct, and that I have not withheld any relevant information or made any misleading statement. I am fully aware that by wilfully suppressing any information I shall incur the risk of not being accepted for Service, or if accepted, of being discharged or retired and forfeit any claim to gratuity or other award.
Date Sept 2, 1942 Signature [Signature] Witness [Signature]

**GENERAL MEDICAL AND SURGICAL EXAMINATION**

Impression given by (a) Physique **Athletic** (b) Mentality **Average**  
 Body Marks, Scars, Deformities **Scar below rt eye - and above rt knee.**  
 Size of Thyroid Gland **Not palpable**  
 Surgical Abnormalities **None**  
 Results of Wounds, Injuries, Operations **None**

	Date <b>2-9-42</b>	Date <b>24-9-42</b>	Date	REMARKS ON ANY ABNORMALITIES FOUND
Height (ins.)	<b>64½</b>			Date.....
Weight (lbs.)	<b>130</b>			
Chest Circumference (ins.)	<b>32-34</b>			
Body Build (lbs.)	<b>N</b>			
LEG LENGTH (ins.)	<b>38 without shoes</b>			
Pulse Rate { Sitting..... Standing 1st..... Standing 2nd..... After Exercise..... Time to Normal.....	<b>108</b>	<b>84 96 84 108 30"</b>		
Arterial Walls	<b>Soft</b>			Date.....
Blood Pressure { Systolic..... Diastolic.....	<b>120 80 N</b>			
Room Temperature				
Heart { Size (in cms.)..... Sounds..... Rhythm.....	<b>N Clear Regular</b>			
Lungs { Inspection..... Palpation..... Percussion..... Auscultation..... Expiratory Force..... X-Ray.....	<b>N N N N NA Negative</b>			Date.....
Reflexes { Knee..... Ankle..... Triceps..... Abdominal..... Plantar.....	<b>N N N N Flex N</b>			
Cranial Nerves				
Balancing Rod	<b>R. L. N A</b>	<b>R. L.</b>	<b>R. L.</b>	
Self Balancing	<b>R. L. FS FS</b>	<b>R. L.</b>	<b>R. L.</b>	
Tremors { Fingers..... Eyelids.....	<b>F F F F</b>			Date.....
Abdomen { Liver..... Spleen..... Muscular Tone.....	<b>Not palpable Not percuss. Good</b>			
Urine { Albumen..... Sugar.....	<b>Neg Neg</b>			
Initials of M.O.	<b>GECP</b>			

40 mm. Hg. Test  
 Date **Sept 24, 1942** 1st Try **66= 6,888, 888, 666, 655, 5** **W.J.F.**  
 Date.....  
 Date.....  
 Date.....

EYE EXAMINATION

History..... **Neg**.....

Visual Acuity { R. ~~20~~ 25,  $\overset{-2.50}{c}$  = .....  
 L. 20/20,  $\overset{+2.50}{c}$  = ..... **20/70**.....

Colour Vision..... **N Ishihara**.....

Red-Green **M.R. Exo 1 A**.....

Diaphragm Test (P.D. = **62** ) **4 out at 2**.....

Convergence { C. = **6** ..... cms.  
 S. C. = **8** ..... cms.

Accommodation { R. ) .....  
 L. ) **11**.....

Cover Test..... **Orthophoric**.....

Fundi and Media..... **N**.....

Fields..... **N**.....

REMARKS:  
**ALB ASB**

Initials of M.O. **GECP**..... Initials of M.O..... Initials of M.O.....

Date..... **2-9-42**..... Date..... Date.....

EXAMINATION OF EAR, NOSE AND THROAT

History..... **He says he is not suffering of more frequent head colds than the average person - he has one now**.....

Hearing { R. Ear..... **W.V. 20**.....  
 L. Ear..... **W V 20**.....

External Ear, Meatus Membranes { R. Ear..... **N**.....  
 L. Ear..... **N**.....

Middle Ear, Eustachian Tubes..... { R. Ear..... **Pat**.....  
 L. Ear..... **Pat**.....

Cochlear Apparatus..... { R. Ear..... .....  
 L. Ear..... .....  
 Vestibular Apparatus..... { R. Ear..... .....  
 L. Ear..... .....

Buccal Cavity..... **Normal**.....

Teeth..... **Satisfactory**.....

Gums..... **Healthy**.....

Pharynx..... **Congested**.....

Nasopharynx..... **Not seen**.....

Nose..... **Left inferior turbinal hypertrophy**.....

Larynx..... **Not seen**.....

REMARKS..... **Throat and Nasal permeability not satisfactory to-day to be rechecked.**.....

Initials of M.O. **GECP**..... Initials of M.O..... Initials of M.O.....

Date..... **Sept 2, 1942**..... Date..... Date.....

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

2-9-42 Good physical condition - Athletic type, pleasant cooperative. Unfit A1B till B W report is known -- to be rechecked re pulse and throat and nasal permeability when head cold is cured.

ATBT G.E.C. Palouin F/L

24-9-42 Pulse, nose and throat rechecked. Fit for Aircrew duties. BW not brought in yet. Cat. ATBT W.J.F. F/L

25-9-42 To be enlisted to-day. A3B. Waass at "M" Depot. Guy E. Joron F/O

**FIT** Date 25/9/42  
**PILOT**  
**OBSERVER**  
**W/OPERATOR**  
**A/GUNNER**  
M.O. *[Signature]*

A3B(7)  
A3B  
CATEGORY... A3B(V) ..... APPROVED  
DATE... 12. 2. 43 ..... 19. 43  
..... M.O.  
No... 3 ..... WIRELESS, or B. and G. School

OBSERVATIONS AND FINDINGS OF THE REVIEWING MEDICAL OFFICER

Date.....

*Fit*

A1B		N.V.C.	} R9
A3B	Turret	N.V.C.	
A3B		N.V.C.	
A3B	Vision		
A3B	Radio		
Sig:	<i>[Signature]</i>		
Date	12 2 43		

*9 Rechecks  
32*

Night Vision Test B'Mth. 14/7/43

ROYAL AIR FORCE.

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

Official No. CAN.R.194194 Name HURTTEAU, Joseph Fernand <sup>Rolland</sup> Rank T/SGT  
 (In full in block capitals, surname first). (Or acting appointment).

R.A.F. Trade AIR GUNNER Sp. Special Qualifications.....  
 (e.g., Gas Instructor, Fire Fighter, Boxing Instructor).

Date of Birth 5.10.14 Religion R.C. Occupation in Civil Life Butcher 1929 to date

Last Enlisted 25.9.42 Current Engagement DOF W

If a member of the Auxiliary Air Force.....

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

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

Mr. A. Hurtteau (Mother) 318, Ground St. Apt. 15, Montreal P.Q.

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

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

N of K

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

SECTION I.—MOVEMENTS AND CASUALTIES.

SECTION 2.—  
 PROMOTIONS, ACTING APPOINTMENTS (PAID OR UNPAID),  
 REDUCTIONS, REMUSTERINGS.

Unit FROM which.	Unit TO which.	Date of Effect.	* Authority.	Description.	Date of Effect.
3 B. & G.	No.1 Y Depot	5.6.43		Air Gunner Std. AC.2	25.9.42
No.1 Y Depot	RAF.TP.	22.6.43		" " " LAC	16.4.43
	Emb. Halifax	30.6.43		" " Sp. T/SGT	11.6.43
	Dis. U.K.	7.7.43	<u>o/o 976/44</u>	<u>F/SGT</u> "	<u>11.3.44</u>
INT.C. 99	No.3 PRC	8.7.43			
No.3 PRC	<u>23 O.T.U.</u>	<u>20.7.43</u>			
<u>23 o.u.</u>	<u>Dalton</u>	<u>30.11.43</u>			
<u>61 Base</u>	<u>425 Sqn.</u>	<u>4.2.44</u>			
<u>425 Sqn.</u>	<u>RCPE/N/E UNIT</u>	<u>23/4/44</u>			
	<u>PRES/DEAD</u>	<u>23/4/44</u>			
		<u>CR661</u>			

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.





CONFIDENTIAL.

R.A.F. Form 5037.

R.A.F. — TRAINING REPORT

**AIR GUNNER**

No. 23 OPERATIONAL TRAINING UNIT

1. Surname HURTEAU Christian Names JOSEPH FERNAND ROLLAND  
 2. Number R. 194194 3. Rank SGT. 4. Course No. 66  
 5. Posted from ..... 6. Date commenced Course 31.8.43. 7. Date Course ended 21.11.43 8. Posted to Dallon Battle School

9. GROUND WORK			10. AIR WORK		
Subject	Marks Allotted	Marks Obtained	Subject	Day	Night
(a) Aircraft Recognition, Range Estimation... ..	200	148	Cine-Camera Gun, exercises completed ... ..	12	
(b) Guns ... ..	200	158	Cine-Camera Gun, assessment ... ..	15	
(c) Reporting, Fighting Control ... ..	200	134	Air Firing Exercises completed	Air-to-Ground	
(d) Sighting, including practices on G.T.S.T. ...	200	156		Air-to-Air ...	
(e) Turrets : drill and components ... ..	200	148	Per cent. hits, Air-to-Air ...	3.2%	
Total ... ..	1,000	736	Air Firing ... ..	Marks Allotted	Marks Obtained
Per cent. ... ..		73.6%		1,000	

II. EQUIPMENT USED

Type of Aircraft	Type of Guns		Type of Turrets	
	In Air	On Ground	In Air	On Ground
Wellington	Browning	Browning	F.N. 5 20	F.N. 5. 16. 20. B.P.E. A.

	Day	Night	Total
12. FLYING EXPERIENCE AT O.T.U. ...	65.00	43.20	108.20

	Exceptional	Good	Average	Poor
13. ABILITY AS FIGHTING CONTROLLER ...			✓	

14. REMARKS :

This man is a good practical gunner.

Date..... 22-11-43 .....

Signed..... G. V. LANE g/c .....

Officer Commanding

63

ROYAL CANADIAN AIR FORCE

TRAINING REPORT

AIR GUNNER

1. Surname HURTEAU Christian Names Joseph Fernand Roland
2. Number R194194 Rank LAC Course No. 53
3. Posted from No. 2 A.G.G.T.S. Trenton Posted to No. 1 Y Depot, Halifax
4. Duration of Course: From 8/MARCH/43 To 11/June/43
5. Aircrew Category A3B (T) Height 64 1/2 Girth 32"

6. EQUIPMENT USED

Type Aircraft	Type Gun		Type Turrets	
	In Air	Ground	In Air	Ground
Anson				
Battle	V.G.O.	V.G.O.	Bristol	Bristol Fraser Nash Boulton Paul
		Browning		

7. STAGE I

	Mks Poss	Mks Obtd.	8. STAGE II					
			Air and Ground Training		Assessment			
				Day	Night	Subject	Mks. Poss.	Mks. Obtd.
Armament Oral	100	70	Flying Time	23:55		Armament Written	150	111
Armament Written	300	188	Films Exposed	126'		Practical & Oral	100	83
Anti-Gas	100	81	Hrs. Turret Manip	15:00		Aircraft Recognition	100	14 (74)
Aircraft Recognition	100	68	Skeet (# Rds)	400		Drill	100	63
Mathematics	50	29	25 X Range	790		Signals	100	80
Navigation	100	64	200 X Range	800	400	Ability as Firer	100	60
Law, Admin., Hygiene, etc.	100	78	Air to Ground	400		TOTAL	650	411
Signals	100	61	Air to Air	3750		TOTAL TRNG. MARKS	1600	1050
TOTAL	950	639	% Hits Air to Air	4.0%		Percentage		65.6%
Percentage		67.2	Personal Assessment				800	496

9. No. in Class 109 Position in Class 91 Pass or Fail Pass
10. Recommended for commissioned rank No.  
(Yes) or (No)
11. Experience in arming, loading and harmonizing turrets, etc.  
No. of Hours 3:00

12.

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

13. REMARKS: Average student, neat appearance, hard worker, had trouble with Signals, but overcame this difficulty with extra instruction.

Date: 17/April/43

*M. Culling*  
Chief Instructor

Date: 17/April/43

*[Signature]*  
Officer Commanding  
No. 2 A.G.G.T.S.,  
R.C.A.F. Station, TRENTON, Ont.

14. REMARKS: Average student. Has good command of the English language. Responsible and conscientious. Has common sense and is reliable. Found difficulty with signals, but overcame this with extra instruction. Bracketted training mark indicates supplementary exam.

Date: 11/June/43

*[Signature]*  
Chief Instructor S/L

Date: 11/June/43

*[Signature]*  
Commanding Officer, G/C  
No. 3 B & G School,  
MACDONALD, Manitoba.

FORM T82

# ROYAL CANADIAN AIR FORCE

R.C.A.F. R. 45  
90M-12-41 (1419)  
H.Q. 1062-2-126

## Individual Record of Flying

RANK Sgt. No. L194194 NAME Surteau, J. J. A.

UNIT	PERIOD ENDING	SERIAL NO.	SINGLE-ENGINE AIRCRAFT									MULTI-ENGINE AIRCRAFT									CREW DUTIES						PASSENGER		TOTAL	
			DAY			NIGHT			DAY			NIGHT			OBSERVER		AIR GUNNER		OTHER		PASSENGER		TOTAL							
			1ST PILOT		2ND PILOT		DUAL		1ST PILOT		2ND PILOT		DUAL		1ST PILOT		2ND PILOT		DUAL		OBSERVER		AIR GUNNER		OTHER		PASSENGER		TOTAL	
			(A)	(B)	(C)	(D)	(E)	(F)	(G)	(H)	(J)	(K)	(L)	(M)	(N)	(O)	(P)	(Q)	(R)	(S)	(T)	(U)	(V)	(W)	(X)	(Y)	(Z)	(AA)	(AB)	
Hrs	Mins	Hrs	Mins	Hrs	Mins	Hrs	Mins	Hrs	Mins	Hrs	Mins	Hrs	Mins	Hrs	Mins	Hrs	Mins	Hrs	Mins	Hrs	Mins	Hrs	Mins	Hrs	Mins	Hrs	Mins			
<p><i>No. 3 B &amp; G School, Macdonald, Man. 11 June 1943</i></p>			<p style="color: red;"><i>Surteau's Record</i></p>									<p style="color: red;"><i>23 55'</i></p>									<p style="color: red;"><i>23 55'</i></p>						<p style="color: red;"><i>23 55'</i></p>		<p style="color: red;"><i>23 55'</i></p>	
<p style="color: red;">Officer Commanding Armament Training Squadron No. 3 B. &amp; G. SCHOOL R. C. A. F. MACDONALD, MAN.</p>																														

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

RECORD OF SERVICE AIRMEN

A.F. No. *P. 194194* Surname *Husteau* Christian Names *Joseph Fernand Rolland* Religion *P.C.*  
 Born *5-10-14* Place *Montreal-Pq* Country *Canada* Citizen of *Canada* Racial Origin *French Canadian*

PARTICULARS OF FAMILY

Wife's Maiden Name \_\_\_\_\_ Present Address (in pencil) *M. S. D. W.*

CHILDREN	NAMES	PLACE OF BIRTH	DATE	CHILDREN	NAMES	PLACE OF BIRTH	DATE

NAME(S) ADDRESS AND RELATIONSHIP OF PERSONS TO BE INFORMED OF CASUALTIES (in pencil)  
*M<sup>rs</sup> Alphonsine Husteau (Mother)*  
*318 Gouin St. Apt. 15. Montreal-Pq*

CIVIL EDUCATION

High School Entrance  Jr. Mat. \_\_\_\_\_ Sr. Mat. \_\_\_\_\_  
 Technical School \_\_\_\_\_ Business Courses \_\_\_\_\_  
 University \_\_\_\_\_

CIVIL OCCUPATIONS AND EXPERIENCE

*Butehoz - 1929 to date.*

PREVIOUS SERVICE

*N.A.*

ENLISTMENT

Date *25-9-42*  
 At *Montreal-Pq*  
 Term *Duration*

Med. Cat. \_\_\_\_\_ DATE \_\_\_\_\_ Med. Cat. \_\_\_\_\_ DATE \_\_\_\_\_

*A3B 25 9 42*

RANK	AUTH.	DATE	TRADE	AUTH.	DATE	TRADE TESTS AND COURSES				
						TRADE	GP	%	P or F	DATE
<i>AC2</i>		<i>25 9 42</i>	<i>Aircraft Ag</i>		<i>25 9 42</i>	<i>Aircraft Ag</i>	<i>S</i>		<i>P</i>	<i>25 9 42</i>
<i>LAC</i>	<i>TRD 107/43/6</i>	<i>11 6 43</i>	<i>Rem Air Gunner (spec group)</i>		<i>11 6 43</i>					
<i>temp spf</i>	<i>Dho 139</i>									

LEAVE

FROM	TO	AUTH. AND DESCRIPTION
<i>24-12-42</i>	<i>28-12-42 incl</i>	<i>#1 MPD 303 (leave)</i>
<i>19 Feb 43</i>	<i>4 Mar 43 incl</i>	<i>#1 MPD 44 (Spec with pay)</i>
<i>12-6-43</i>	<i>25-6-43 (14 days)</i>	<i>Emb Dho 139</i>

CHARACTER AND TRADE ASSM. HONOURS, AWARDS AND MENTIONS

DATE	CHARACTER	TRADE AND ASSM.	HONOURS AND AWARDS	AUTH.
<i>11 6 43</i>		<i>A. G.</i>	<i>Rem Gunner Badge</i>	<i>Dho 139</i>

MOVEMENTS AND CASUALTIES

AUTHORITY	UNIT FROM	UNIT TO	DATE	AUTHORITY	UNIT FROM	UNIT TO	DATE
MOR 13	#13 Re. MH	#1. Toronto.	25-9-42				
DRO 232 #im.0	"	"	25-9-42				
#IMD 303	Ent atn alle	24-12-42 to 28-12-42 incl.					
#IMD 44	Ent atn alle	19 Feb 43 to 24 Mar 43 incl.					
#IMD 59	#IMD Toronto	RCAF Trenton	6-3-43				
T.O.S. DR 068/43	#2 ACC TS	Trenton	7-3-43				
S.O.S.	H2 ACC TS	#3 H & G.					
DR 0407/43	Trenton	Mac Donald	17-4-43				
DR 0134	#3 B & J	#1 Y Report	25-6-43				
	MacDonald	Malibu					

ROYAL CANADIAN AIR FORCE

Report on R.C.A.F. Personnel attending a Course of Instruction  
in Technical English

NAME... HURTEAU J.F.R. R-194194 ..... STATION School of English, Toronto.....

RANK... AC2 ..... COURSE COMMENCED... 26-9-42 ..... COURSE ENDED... 15-2-43 .....

Subjects Examined	Maximum Rating	Written	Oral	Instructor
Morse	100	0		
Morse	100	0		
Aircraft Recog.	100	70		
Technical	100	36		
Technical	100	32		
English	100		64	
English	100		86	
English	100		88	
English	100		80	
English	100	85		
English	100	91		
English	100	95		
English	100	88		

REMARKS OF CHIEF INSTRUCTOR. This airman has completed the course at this unit.  
His knowledge of English is good.

Comprehension Ability... very good  
Expression Ability... good  
Passed or Failed... passed

*J.W. Kennedy*  
..... Flt/Lt.  
Chief Instructor, School of English,  
for Commanding Officer,  
No. 1 "M" Depot, R.C.A.F.  
Toronto Ont.

DATE... February 16th, 1943.....



Applicant for AIRCREW (X) or for GROUND DUTY ( )

Date.. 25-9-42.....

PERSONAL RECORD

1. NAME: HURTEAU..... JOSEPH FERNAND ROLLAND..... 2. NUMBER B. 194194.....  
(Surname and Christian names in Block Letters)

3. EDUCATION: Highest standing attained, Province and course (e.g. XII, Ont. Tech.)  
..... 7th. gr. Que..... (Dates of last school attended) From 1920... To 1929.....

4. TESTS: (a) C.T. 40..... (Form.....) (b) E.A.T..... (Form.....) (c) C.A.T.....  
(d) M.A.T..... (e) Cl. A.T.....  
(f) Compensating Factors (if any).....  
(g) Suitable for AIRCREW (X) or GROUND DUTIES ( ) (State Trade) Aircrew. A.G.

DATE..... 25-8-42..... Signature..... J. L. Gibault. F.O.....

5. CIVIL EXPERIENCE: (In chronological order by years, without intervals)

Employer, Business & Place	Details of Duties	From	To
Different positions, Montreal.	Butcher	1929	1941
Thrift Stop & Shop, Montreal.	Butcher	1941	1942

6. Details of Service or Similar Training: (e.g. military, auxiliary, GOTC, cadets, etc.)  
..... N.A.....

7. HOBBIES & SPORTS: (a) In school years.....  
(b) In civil life... All sports moderately.....

8. OTHER QUALIFICATIONS: (e.g. Languages, First Aid, Knowledge of Typing, Mechanics, etc.)  
Bilingual.

DATE.....

9. AGE: 27..... Height: 5'4 1/2..... Weight: 130.....  
Visual Acuity: 20/25 20/20... Colour Vision: N. Ish... Medical Category: A3B.....  
(Mark X as applicable) M.O.'S ASSESSMENT:

- Fit all Aircrew ( )
- Fit Pilot ( )
- Fit Air Obs., Nav., WO (AG) (x) A = B
- Fit Air Bomber, Air Gunner ( )
- Fit Ground Duties only ( )
- M.2 Exam not given (state reason) ( )

DATE..... 25-9-42..... Signature... Guy E. Joron. F/O.....

10. INTERVIEWING OFFICER'S ASSESSMENT: Gr. VII - has been butcher - Like to be A.G. can drive a car - sports moderately - active & wide-awake - good gunner size - should make good gunner.

RECOMMENDED FOR.. Aircrew. A.G..... Signature... D. S. Rattray. F.O.... Date. 26-8-42

This space for use of Selection Board at "M" Depot  
SELECTED FOR.....  
Signature.....  
No. "M" Depot Selection Board.  
Signature.....  
Commanding Officer  
#13 Recruiting Centre  
R.C.A.F.

Note: Information called for on the reverse side of this form is also to be provided when submitting applications under Manning Order M.10/25 AFM.53 d/17-9-42.

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

4  
AIR

DECEASED  
MEMBER'S  
NAME

**J. Fernando, R.**

(CHRISTIAN NAMES)

**Burteau**

(SURNAME)

REGISTER NO.

**19676**

FILE NO.

**8 Juin/45**

DATE

**R194194**

SERVICE NO.

**F3**

FINAL RANK OR RATING

**23 Avril/44**

PAYEE  
ADDRESS

**Receiver, General of Canada  
Director of Estates,  
Ottawa, Ont.**

DATE OF TERMINATION OF OVERSEAS SERVICE

**23 Avril/44**

DATE OF DISCHARGE

**A. TOTAL QUALIFYING SERVICE**

NO. OF DAYS **577** EQUAL TO **19** COMPLETE PERIODS AT \$7.50

\$ **142.50**

**B. QUALIFYING OVERSEAS SERVICE**

NO. OF DAYS **302** LESS **7** INELIGIBLE DAYS, EQUAL TO **295** DAYS @ 25c. PER DAY

**73.75**

**C. SUPPLEMENT FOR OVERSEAS SERVICE**

DAILY RATES AT DISCHARGE

PAY \$ **3.50**  
SUBSISTENCE OR LODGING  
AND PROVISION ALLOWANCE \$ **1.25**  
ADDITIONAL PAY \$

DEPENDENTS' ALLOWANCE 1/30 OF \$

TOTAL \$ **4.75** X7 = \$ **33.25**  
NO. OF DAYS **302** X \$ **33.25**  
183

**54.87**

**D. WAR SERVICE GRATUITY**

**271.12**

**E. DEDUCTIONS**

OVERPAYMENT OF

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

OTHER DEDUCTIONS \$

JUN 14 1945

**F. TOTAL AMOUNT PAYABLE**

**271.12**

**G. YOUR PORTION OF GRATUITY IS—**

DEPENDENTS' ALLOWANCE IN ISSUE TO YOU \$

TOTAL DEPENDENTS' ALLOWANCE IN ISSUE \$

OF \$  
P.A.A. Bd. Trans. Trust Account  
Journal Voucher # **645**

**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 **NC** CHECKED BY **FW**

TREASURY

CHECKED BY

DATE

SERVICE REPRESENTATIVE

Treasury Office.  
Air Force Services  
OTTAWA, - CANADA.

Rec'd. JUN 9 1945

P. & A. SECTION

## DOMINION BUREAU OF STATISTICS—QUEBEC DEATH TRANSCRIPT

Do not  
write in  
this space

1. PLACE OF DEATH	Municipal county	<b>OVERSEAS (GERMANY)</b>		Official name of civil municipality or township			Hospital or Institution									
	Street	No.														
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	<b>HURTEAU</b> (Block letters)														
	Given names	<b>JOSEPH FERNAND ROLLAND</b>														
4. RESIDENCE	Street	<b>Gounod Street, Apt. 15 No. 318</b>														
	Official name of civil municipality or township	<b>Montreal</b>														
	Municipal county	Province <b>Quebec</b>														
5. SEX	6. NATIONALITY (Citizenship)	7. RACIAL ORIGIN	8. Single, Married, Widowed or Divorced (Write the word)													
<b>Male</b>	<b>Canadian</b>		<b>Single</b>													
9. If married give name of wife or husband of deceased																
10. BIRTHPLACE (Province or Country) <b>Quebec</b>																
11. DATE OF BIRTH <b>October 5th 1914</b> (Month) (Day) (Year)																
12. AGE OF DECEASED <b>29</b> Years Months Days If less than one day old .....hrs. or.....min.																
OCCUPATION	13. Trade, profession or kind of work, as spinner, teamster, office clerk, etc. <b>Air Gunner</b>															
	14. Kind of industry or business, as cotton-mill, lumbering, bank, etc. <b>R.C.A.F.</b>															
	15. Date deceased last worked at this occupation <b>Apr. 23/44</b>															
16. Total years spent in this occupation <b>Two</b>																
17. NAME																
18. BIRTHPLACE (Province or Country)																
FATHER <b>Hurteau, Avila</b> <b>Quebec</b>																
MOTHER (Maiden Name) <b>Vaudry, Alphonsine</b> <b>Quebec</b>																
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)															
<b>CONFIDENTIAL MEDICAL CERTIFICATE OF DEATH</b>																
22. Date of death..... <b>April 23rd 44</b> (Month) (Day) (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) <b>Previously reported missing after air operations, now for official purposes, presumed dead.</b>																
(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:— <b>Accident</b> <b>April 23rd 44</b> Accident, suicide or homicide.....Date.....19..... (State which) <b>Presumed killed during air operations</b> Manner of injury..... (How sustained) Nature of injury..... Specify whether injury occurred in <b>public place</b> industry, in home, or in public place.....																
Signed.....M.D.																
Address.....Date.....19.....																
28. Signature of person who fills in the form (curate, coroner, hospital authority, etc.) <b>For (R.C.A.F. Records Officer)</b> 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)																

# OCCUPATIONAL HISTORY FORM

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

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

## Section A—GENERAL INFORMATION

1. (a) Print name in full HURTEAU-ROLLAND (b) Reg'l. No. R194194  
 2. (a) Arm of service SEA FORCE (b) Unit NO. 1 M.D. (c) Rank A 62  
 3. (a) Date of birth SEP. 25 1914 (b) Have you any dependents? YES (c) Place of residence at time of enlistment MONTREAL PD  
 4. (a) Place of enlistment MONTREAL PD (b) Date of enlistment 5-27-1942

PLEASE LEAVE BLANK

## Section B—EDUCATION AND TRAINING

5. (a) State age on finally leaving school 15 (b) Were you attending school or college up to the time of enlistment? NO  
 6. State definitely highest standing reached at public, technical or high school (for instance—"4 years, Public School", "two years, High School", "Junior Matriculation", or "4 years technical course in printing", etc.) 6 years  
 7. If you attended a university, give name of university and standing or degree secured.....  
 8. (a) Did you ever enter upon a trade apprenticeship? NO (b) If so, for what occupation?..... (c) Did you finish it?..... (d) If you did not finish it, how long did you serve at it?.....  
 9. (a) What languages do you speak fluently? FRENCH (b) What languages do you read well? FRENCH

## Section C—EMPLOYMENT CONDITION AT TIME OF ENLISTMENT

10. (a) State whether you were WORKING or NOT WORKING at time of enlistment. (Enter here only "Working" or "Not Working", as case may be; particulars are asked for below) YES (b) At time of enlistment of what trade union or professional society were you a member? NO

## Section D—PARTICULARS CONCERNING THOSE WHO WERE UNEMPLOYED AT TIME OF ENLISTMENT

QUESTIONS 11 TO 17 REFER ONLY TO THOSE WHO ANSWER "NOT WORKING" IN QUESTION 10 (a)

11. Had you ever been employed fairly regularly since leaving school? YES  
 12. (a) If answer to 11 be "Yes", state exact trade or occupation at which you actually worked FRUIT MAN (b) State how long you had worked at this trade or occupation 1 year  
 13. If answer to 11 be "No", state exact trade or occupation for which you feel qualified.....  
 14. If you had been employed after leaving school, state when you last worked fairly regularly before enlistment.....  
 15. Give details of last employer, if any: Name TRIP-STAR SHIP Address 713 ST-CATHERINE  
 16. Nature of employer's business (for instance, "farmer", or "building contractor", or "boot factory", or "iron foundry", or "retail store", etc.) RETAIL STORE  
 17. (a) If your last employment was in a business of your own, state nature and address of business..... (b) Date of discontinuing it.....

## Section E—PARTICULARS CONCERNING THOSE WHO WERE EMPLOYED AT TIME OF ENLISTMENT

QUESTIONS 18 TO 23 REFER ONLY TO THOSE WHO ANSWER "WORKING" IN QUESTION 10 (a). PLEASE READ THESE QUESTIONS AND REPLY TO THOSE APPLYING TO YOU AT TIME OF ENLISTMENT

IF YOU WERE AN EMPLOYEE WORKING FOR AN EMPLOYER UP TO THE TIME OF ENLISTMENT, PLEASE ANSWER QUESTIONS 18 TO 21

18. Name of employer TRIP-STAR SHIP Address 713 ST-CATHERINE  
 19. Nature of employer's business (for instance, "farmer", or "building contractor", or "boot factory", or "iron foundry", or "retail store", etc.) RETAIL STORE  
 20. (a) Your specific occupation FRUIT MAN (b) Number of years' experience at this occupation with any employer 1 year  
 21. (a) Did your employer promise definitely to give you employment on discharge? YES (b) Did your employer refuse to promise you employment on discharge?..... (c) Do you wish to return to your former employment? YES

IF YOU WERE WORKING ON YOUR OWN UP TO THE TIME OF ENLISTMENT, THAT IS TO SAY, OPERATING A FARM, A STORE, AN AGENCY, OR IN PROFESSIONAL PRACTICE, OR AS A PARTNER IN ANY SUCH LINE, PLEASE ANSWER QUESTIONS 22 AND 23

22. (a) State nature of business, or professional practice..... (b) Where was it located?.....  
 23. (a) Number of years engaged in this business..... (b) Have you made, or will you make plans to return to the same or a similar business on discharge?.....

## Section F—PARTICULARS OF FARMING EXPERIENCE

24. (a) Do you wish to engage in farming after the war? NO (b) Do you feel competent to operate a farm?..... (c) If so, in what kind of farming? O.K. C.I.B.  
 25. (a) Were you born on a farm?..... (b) How many years' actual farming experience have you had?..... (c) In what provinces did you have experience?.....

## Section G—MISCELLANEOUS

26. Have you made any arrangements other than indicated above, for re-establishment in civil life after discharge? NO  
 27. If so, state nature of your plans (for example, do you plan to return to school, or have you been assured of a job, etc.).....  
 28. State any employment preference or ambition you may have, other than indicated elsewhere in this form.....

DATE 1942 SIGNATURE R. Rolland

N° MATRICULE R.194194 VERSÉ à #1 M.D. Toronto MÉTIER Aircrew A.4.

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

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

1. Nom HURTEAU Prénoms en entier JOSEPH FERNAND ROLLAND.
2. Adresse actuelle 318 rue Gounod, apt. 15, Montreal, Que. Téléphone Ca. 0882
3. Adresse fixe 318 rue Gounod, apt. 15, Montreal, Que.
4. Lieu de naissance Montreal, Que. Nationalité Canadien
5. Date de naissance 5 octobre, 1914 Marié, célibataire, veuf, séparé, divorcé Celibataire.
6. Enfants

Nom	Date de naissance	Nom	Date de naissance
<u>N.A.</u>			

7. Profession Boucher. 8. Religion Catholique Romaine  
(Indiquez la confession religieuse)
9. Langues Français & Anglais couramment.  
Degré de connaissance
10. Plus proche parent (nom en entier) Mme Alphonsine Hurteau Degré de parenté Mere.  
Adresse du plus proche parent 318 rue Gounod, apt. 15, Montreal, Que.
11. Père (nom en entier) Avila Hurteau Lieu de naissance Montreal, Que.  
Adresse Decede Nationalité Canadien  
Profession Boucher.
12. Mère (nom de fille en entier) Alphonsine Vaudry Lieu de naissance Montreal, Que.  
Adresse 318 rue Gounod, apt. 15, Montreal, Que. Nationalité Canadienne
13. Détails du service dans les armées de terre, de mer ou de l'air:

Unité	Lieu	Rang	Profession	Date		Motif de la libération
				du	au	
<u>N.A.</u>						

R.C.A.F. Records Office

Rec'd. OCT 9 1942

O.K. C.I.B.

R.C. N.I.

S.L. P.A.

14. Honneurs, récompenses, citations N.A.
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.A.R.C.? Non Si oui, où? N.A.  
Quand? N.A. Résultat N.A.
17. Avez-vous déjà réformé de quelque service armé de Sa Majesté pour inaptitude physique? No  
Si oui, indiquez la nature de l'infirmité N.A.
18. Avez-vous jamais touché ou touchez-vous actuellement une pension de réforme? Non  
Si oui, indiquez la nature de l'infirmité N.A.
19. Avez-vous jamais été trouvé coupable de délit? Non Si oui, indiquez-en la nature N.A.
20. Avez-vous des dettes? Aucune Si oui, donnez des détails N.A.

525-164

21. Education:

	Nom de l'école	Date		Cours, sujets, etc.
		du	au	
Instruction primaire—Ecole publique ou séparée.....	Ecole Ste-Cunegonde, Montreal, Que	1920	1929	6ieme annee complet (7)
Cours supérieur—Collège, etc.....				
Cours technique.....				
Autres cours universitaires ou scolaires.....				
Cours par correspondance.....				

22. Emplois civils (détails au complet):

Employeur et lieu	Fonctions, métiers, positions	Date		Motif du départ
		du	au	
Differentes positions, Montreal, Que	Boucher	1929	1941	
Thrift Stop & Shop, Montreal, ue	Boucher	1941	-----	Still employed.

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

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

25. Sports pratiqués, et dans quelle mesure, soit intensément, ou modérément, ou occasionnellement... Tous les sports (Moderement)

26. Service aéronautique dans lequel vous voulez vous engager {Service à terre Service navigant. Si c'est dans le service à terre, indiquez le métier aéronautique que vous visez AIR GUNNER. 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 des personnes qui peuvent témoigner de votre réputation et de vos aptitudes:

Nom	Adresse	Profession
Mr. Jules Champagne	4045 rue Des Erables, Montreal, Que	Employe Civil
Mr. Charles Gariepy	7608 rue De Gaspé, Montreal, Que	Gerant des ventes.
Mr. L'Abbe Gingras,	Paroisse Ste-Cecile, Montreal, ue	Vicaire.
Mr. Rolland Archambault	4083 rue Des-Erables, Montreal, ue	Peintre. decorateur

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

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

JE, SOUSSIGNÉ, CERTIFIE que les renseignements que j'ai fournis ci-dessus sont exacts, autant que je sache et que j'aie raison de croire.

Date 26 aout, 19 42 Signature Rolland Archambault

G.D.

Rolland Archambault

POUR L'USAGE DU DÉPARTEMENT SEULEMENT

NATIONAL REGISTRATION CERTIFICATE PRODUCED

84/144 St. Denis Montreal Que.

Surrendered 25-9-42 [Signature]

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

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

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

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

(B) Rapport sur l'épreuve professionnelle— (L'épreuve professionnelle n'est pas requise dans le cas d'ouvriers non spécialisés)

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

Résultat.....

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

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

(C) DÉCLARATION D'ENGAGEMENT DE LA RECRUE

Je, soussigné, Joseph Fernand Rolland Hurteau 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 Sept. 25th. 19 42

[Signature] Signature de la recrue

(D) SERMENT PRÊTÉ PAR LA RECRUE

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

Date Sept. 25th. 19 42

[Signature] 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 25th. jour de Sept. 19 42

[Signature] Signature de l'Officier

Grade

No. 17 R.C. Montreal. Unité



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 NO
  - (m) Epilepsie NO
  - (n) Maladie nerveuse ou mentale NO
  - (o) Syphilis NO
  - (p) Gonorrhée Yes
  - (q) Fracture NO
  - (r) Autre maladie ou défectuosité Yes

3. Avez-vous jamais porté des lunettes? NO

4. Have you had any illness for more than one week's duration. Yes

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

Signature de la recrue

*[Handwritten Signature]*

Observations des examinateurs.....

Diphtheria. Gonorrhoea 5 years ago - cured and treated by doctor.

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).....  
Scar below rt. eye, and scar above right knee.

2. Taille 5 pieds 4 1/2 pouces. 3. Poids 130 livres.

4. Teint Fair 5. Couleur des yeux Hazel Cheveux Brown

6. Développement Don Passable Médiocre 7. Tour de poitrine—Expiration 32 pouces  
Degré d'expansion 2 pouces

8. Ouïe—Droite WV 20 ft Gauche WV 20 ft Tympan—Droit N gauche N

9. Vue—sans lunettes—droit 20/25 avec lunettes—droit NA  
gauche 20/20 gauche NA

10. État de la bouche et des dents Normal

11. Urine—Albumine Neg Sucre Neg

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

None

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

A 3B

Observations spéciales des médecins.....

Good Physical Condition

Part 2 Cont'

25-9-42 Recheck A 3B S.C. Jones Sp. 13. Reflexes N

x-ray # 146540 neg 14. Heart N

24-9-42 15. Lungs N

16. Blood Pressure S.D. 120 80

Date 25-9-42 19 42

17. Colour Vision N Ishahara

*[Handwritten Signature]*  
Président

*[Handwritten Signature]*  
Membre

Membre

AIR FORCE No.

R194194

HURTEAU

SURNAME

J.F.R.

FULL CHRISTIAN NAME

ENLISTMENT/APPOINTMENT

PLACE Montreal

DATE 25-9-42

RELIGION

B.C.

R.C.A.F. FORM R230

TYPE OF LEAVE				TYPE OF AIRCRAFT ON WHICH MOST PROFICIENT	POSTINGS, ATTACHMENTS & TEMPORARY DUTY				ALL OTHER CASUALTIES				
FROM	TO	No. DAYS	DESCRIPTION	AUTH.	(IF UNDER INSTRUCTION STATE NUMBER OF HOURS ON EACH TYPE AND TESTS PASSED)	SOS	TOS	FROM	TO	DATE	AUTHORITY	CASUALTY AND DATE	AUTHORITY
7-9-43	13-9-43	7	Priv leave	Pershore		2.05.		#3 B7A - #12 Dept		25 6 43			
20-8-43	22-8-43	3	P leave	Pershore		5.05		#12 Dept					
23-11-43	29-11-43	7	P/L	Pershore				R.A.F. J.P.		22 6 43			
14-12-43	22-12-43	9	Annual leave	61 Base				Emb. Can. N.YORK.		30 6 43			
19-3-44	25-3-44	7+48	P/L	425 Sq				Dis. Emb. U.K.		7 7 43			
								3 PRC Int C99		8 8 43			
								TOS 3 PRC - Pershore		20 7 43	Pershore		
								SOD 230 T.U. to 61 Base		30 11 43	61 Base Pershore		
								ATT 1659 CU from 61 RCAF Base		29/12/43	61 Base		
								SOS 61 Base to 425 Sq		4 2 44	425 Sq		
								SOS 425 Sq to RCAF UK					
								N/E Unit		23 4 44	425 Sq		
								F/B Missing from 425 Sq		22 23 44	AFRO 1186/44		
								MISSING BELIEVED KILLED			CRS 67/11/44		
								PRESUMED DEAD			AFRO 185		
											CH 661		
CHARACTER AND TRADE ASSESSMENT													
HONOURS, AWARDS AND MENTIONS													
11 6 43			Air Gunners Badge										

ADVISE ENTRIES  
UNIT RECORDS RETURNED  
TO CANADA

R-194194

HURTEAU  
SURNAME

JOSEPH FERNAND ROLLAND  
FULL CHRISTIAN NAME

ENLISTMENT/APPOINTMENT  
PLACE MONTREAL  
DATE 25-9-42

RELIGION  
R.C.

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

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

BIRTH DATE	PLACE	COUNTRY	CITIZENSHIP	RACIAL ORIGIN	PARTICULARS OF FAMILY
5/10/14	MONTREAL QUE	QUE			SINGLE, MARRIED, WIDOWER, DIVORCED <u>SINGLE</u> WIFE (FULL MAIDEN NAME) OR HUSBAND <u>Jane [unclear]</u>

CIVIL EDUCATION	
PUBLIC SCHOOL	JUNIOR MATRICULATION
HIGH SCHOOL ENTRANCE <input checked="" type="checkbox"/>	SENIOR MATRICULATION
TECHNICAL SCHOOL	UNIVERSITY
CORR./BUSINESS COURSES	LANGUAGES SPOKEN

PRESENT ADDRESS (IN PENCIL)	PLACE OF MARRIAGE	DATE
AUTHORITY (IF AFTER APPOINTMENT/ENLISTMENT)		

CIVIL OCCUPATIONS AND EXPERIENCE
<u>BUTCHER -</u>

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

PREVIOUS SERVICE

NAME(S), ADDRESS(ES), RELATIONSHIP OF PERSON(S) TO BE INFORMED OF CASUALTIES (IN PENCIL)
<u>Miss Marie Hurteau</u> <u>317 Goussard St, apt 15, Montreal Que.</u> <u>mother</u> <u>miss M. Cloutier, -318 GOUNOD ST. MONTREAL PQ CR5462 21/8/44</u> <u>Sister</u>

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

EMPLOYMENT AS INSTRUCTOR OFFICER AIRMAN/AIRWOMAN					
TYPE	FROM	TO	TYPE	FROM	TO

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

AIRMEN AND AIRWOMEN						OFFICERS, AIRMEN/AIRWOMEN				
RANK	DATE	AUTH.	TRADE	DATE	AUTH.	COURSE OR TRADE	GRP.	%	PF	DATE
<u>AC-</u>	<u>25 9 42</u>		<u>Aircraft A.G.</u>	<u>25 9 42</u>		<u>Aircraft A.G.</u>	<u>S</u>		<u>P</u>	<u>25 9 42</u>
<u>PAc</u>	<u>16 4 43</u>	<u>0/6/07</u>	<u>Can. A.G.</u>							
<u>T/Sgt</u>	<u>11 6 43</u>	<u>"139</u>	<u>(Sp. Sp) 0/6/39</u>	<u>11 6 42</u>						
<u>T/F/Sgt</u>	<u>11 3 44</u>	<u>92644</u>								

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

ADVISE ENTRIES  
UNIT RECORDS RETURNED  
TO CANADA

R.194194

HURTEAU, JOSEPH FERNAND ROLLAND

SURNAME

FULL CHRISTIAN NAMES

ENLISTMENT

RE-ENLISTMENT

C.R. FILE NUMBER

PLACE *Montreal Que.*  
DATE *25-9-42*

R.C.A.F. FORM R44 (B)  
30M-12-41 (1346)  
H. Q. 1082-3-58

### RECORD OF SERVICE AIRMEN

7. BIRTH: DATE <i>5-19-14</i> PLACE <i>Montreal Que.</i> CITIZENSHIP <i>bs.</i>			16. SINGLE-MARRIED-WIDOWER-SEPARATED-DIVORCED <i>Single</i>			21. ENGAGEMENTS					
FATHER (FULL NAME) <i>Anila Hurteau deceased</i>			WIFE (FULL MAIDEN NAME)			TERM	EFFECTIVE	D.R.O.	TERM	EFFECTIVE	D.R.O.
BIRTHPLACE <i>mtl. Que.</i>			PLACE OF MARRIAGE			<i>Que.</i>	<i>25 9 42</i>				
MOTHER (FULL MAIDEN NAME) <i>Alphonsine Vaudey</i>			AUTHORITY (IF AFTER ENLISTMENT) <i>1</i>								
BIRTHPLACE <i>mtl. Que.</i>			17. MARRIED ESTABLISHMENT			22. TEMPORARY DUTY AND MISCELLANEOUS ENTRIES					
8. EDUCATIONAL STANDING			REMARKS			FROM	TO	DATE	D.R.O.		
HIGH SCHOOL ENTRANCE <i>X</i> <i>1920</i> <i>Que.</i>			RANK								
JUNIOR MATRICULATION			EFFECTIVE								
SENIOR MATRICULATION			D.R.O.								
TECHNICAL SCHOOL			18. CHILDREN								
UNIVERSITY			CHRISTIAN NAMES			BIRTH DATE	D.R.O.	CHRISTIAN NAMES	BIRTH DATE	D.R.O.	
CORRESPONDENCE COURSES <i>0</i>											
9. CIVIL OCCUPATIONS OR EXPERIENCE USEFUL TO R.C.A.F.			19. NEXT OF KIN (ADDRESS AND D.R.O. IN PENCIL)								
<i>Butcher various 1929-1941</i>			FULL NAME: <i>Mme Alphonsine Hurteau</i> RELATIONSHIP <i>mother</i>								
<i>" Theft stop + Shop 1941</i>			ADDRESS: <i>318 rue Younod. apt 15.</i> D.R.O. <i>D/B 112-12</i>								
<i>2470</i>			FULL NAME: <i>Montreal Que.</i> RELATIONSHIP								
			ADDRESS: D.R.O.								
10. PREVIOUS ARMY, NAVY OR AIR FORCE SERVICE			20. PAY ENTRIES (OFFENCE FORFEITURES, STOPPAGES IN RED INK)								
<i>nil</i>			RATE CHANGES ETC.			EFFECTIVE	D.R.O.	RATE CHANGES ETC.	EFFECTIVE	D.R.O.	
11. HONOURS-AWARDS, MENTIONS											
AUTHORITY	DATE										
<i>Air Gunners' Badge</i>	<i>313913920</i>	<i>11-6-43</i>									
12. FLYING EXPERIENCE ON ENLISTMENT (HOURS)						22.(A) ADDRESS PRIOR TO ENLISTMENT					
SOLO	DUAL	PASSENGER				<i>318 rue Younod. apt 15. Montreal Que.</i>					
13. RELIGION <i>R.C.</i>											
14. LANGUAGES <i>Fr. Eng.</i>						23. DOCUMENT CONTROL (INDICATE RECEIPT BY DATE)					
REPORTS <i>all.</i>						R60	R79	B465	X-RAY	AFM-13	IDN.CARD
							<i>9-10-42</i>				<i>3x</i>
											<i>22302</i>



OUTFIT ALLOWANCE PAID

WARRANT OFFICERS \$ ON  
OFFICERS \$ ON

MARRIED or SINGLE  
APPOINTED OR ENLISTED  
AT ON

### RECORD OF PAY

NET RATE OF DEFERRED PAY \$ 75.00 EFF 11/15/44  
No. R194194 NAME IN FULL HUYTEAU

J. L. R.

RATE OF PAY										ASSIGNMENTS			DEPENDENTS ALLOWANCE			REMARKS				
D.R.O. No.	EFF. DATE	RANK	GROUP	P.F. OR A.S. RATE	DAILY RATE	ADD PAY	COMBINED RATE	PEN. DED.	NET FORTNIGHTLY RATE OF PAY	CASUALTIES AFFECTING RATE OF PAY	ASSIGNEE	EFF. DATE	AMOUNT	TOTAL	DATE APP. FORWARDED	RELATIONSHIP	AMOUNT AWARDED	EFF. DATE		
	1-9-43	SGT	SG	AS	3.20		3.20		33.50	26.50 AS 11/15/44	Rec. Gen. 6th V.L. F4993	1-5-44	16.80	16.80						Reconciled with AH7 27/2/45
0097-77	11-2-44	F/SGT	SG	AS	3.50		3.50		37.50	9-3/15976	62 L. ...	1-5-44	16.80							MISSING 23-0-44 CR 453-55 Bus Head 23-4-44 CR 641

PAY AND ALLOWANCES										DEFERRED PAY				
DATE	PARTICULARS OF ENTRY	DEBIT	CREDIT	BALANCE	DATE	PARTICULARS OF ENTRY	DEBIT	CREDIT	BALANCE	DATE	PARTICULARS	DEBIT	CREDIT	BALANCE
	BROUGHT FORWARD		114.91	114.91	MAY	BROUGHT FORWARD		112.71	112.71	4/	BROUGHT FORWARD			
	46.749 ✓ 4470		70.21	70.21	✓	13/120/67 TO REV MAY PAY A.P.	99.20	15.80	30.31	MAY	D.P.		15.00	15.00
	Topcliffe 7/1/44 Co H 48649 ✓ 4470		25.51	25.51	✓	155-GH 3673 APR 752 LINTON	44.70		14.39	NOV	14-13/122464 TO REV			
	Feb. Pay		92.80	118.31	JUNE	5-11/2383 C.I.E		63.25	48.86		may a.p.		15.00	
	Topcliffe 2/1/44 50019 ✓ 4470		118.31	118.31		5-11/2383 BAL OF ALLCES		21.23	70.09		C.I.E			
	4/2/44 50661 ✓ 4470		73.61	73.61		9-3/15976 F/SGT 11-3-44-30-4-44		15.30	85.39		Cycle			
	March Pay		99.20	128.11	✓	NOV 14-13/122464 TO REV MAY D.P.		15.00	100.39		Pos B			
	Linton 15/2/44 53137 ✓ 4470		28.91	28.91	✓	20-11/29795 C.I.E (CYCLE)		15.65	116.04					
	5542-AR 1/1/44 ✓ 4470		96.00	134.71	✓	FEB 28-11/220183 BANK BAL (P.O.S.A)		14.75	130.79					
	April Pay		96.00	134.71	✓	MAR. BALANCE	130.79	274.69	274.69					
	Linton 14/3/44 425 SQ Linton 28/3 2234 ✓ 4470		38.71	38.71	✓	h.p.c		150.79	130.79					
	To Balance		45.31	45.31										
	To N.E.	402.91	402.91											
	Balance fwd.		45.31	45.31										
	May Pay		99.20	144.51										
	A.P.		16.80	127.71										
	D.P.		15.00	112.71										
	To Bal		112.71											
	Bal fwd		144.51	144.51										
	CARRIED FORWARD		112.71	112.71										

\$130.79

011193

ROYAL CANADIAN MOUNTED POLICE  
MAR 22 1948  
ESTABLISHED 1843

OUTFIT ALLOWANCE PAID

MARRIED or Single **S**

**RECORD OF PAY**

BANKING ARRANGEMENTS

**JOSEPH LEONARD ROLLAND**

WARRANT OFFICERS \$ ON  
 OFFICERS \$ ON  
 \$ ON

APPOINTED OR ENLISTED  
 AT **Montreal** ON **25-9-42**

NET RATE OF DEFERRED PAY \$ **nil**

No. **3124194** NAME IN FULL **HURTEAU**

RATE OF PAY										ASSIGNMENTS			DEPENDENTS ALLOWANCE			REMARKS				
D.R.O. No.	EFF. DATE	RANK	GROUP	P.F. OR A.S. RATE	DAILY RATE	ADD PAY	COMBINED RATE	PEN. DED.	NET FORTNIGHT RATE OF PAY	CASUALTIES AFFECTING RATE OF PAY	ASSIGNEE	EFF. DATE	AMOUNT	TOTAL	DATE APP. FORWARDED	RELATIONSHIP	AMOUNT AWARDED	EFF. DATE	N.D.T. CLASS.	
1382	11-43	Sgt	S.S.	75	295		295		295.00	(33.38)	Assn - 1st Div. 11-43	11-43	20.50	16.50	Class 11-43					
	11-43	Sgt	SG	85	320		320		320.00	Pay Increased L 22922	" " " " " " " "									

PAY AND ALLOWANCES					DEFERRED PAY									
DATE	PARTICULARS OF ENTRY	DEBIT	CREDIT	BALANCE	DATE	PARTICULARS OF ENTRY	DEBIT	CREDIT	BALANCE	DATE	PARTICULARS	DEBIT	CREDIT	BALANCE
	BROUGHT FORWARD					BROUGHT FORWARD			41 57		BROUGHT FORWARD			41 57
1-10/6	f.A.		22 50			Aug. Pay			91 45					
11-25/6	h. Pay	14 50				R.P.	16 80							
	Gas Pay	5 50				h. h. h.	33 08							
26-30/6	h. Pay	2 80				h. h. h.	33 08		50 06					
	End Pay	1 25				Sept pay			88 50					
1-21/7	h. Pay		9 45			Sept 2	10 80		121 76					
	h. Pay	16 50				AR	33 08		29 69					
AR 39883	AR 39883	33 08		41 57		AR 41451	66 16		22 52					
	Total	178 45	178 45			Oct Pay			91 45					
						Oct R.P.	16 80		97 17					
						AR 42172	33 08		64 09					
						4761	33 08		31 01					
						(DR 207)	43357	33 08	2 07					
						Nov Pay			22 50					
						Pay Increased L 22922			22 75					
						44254	33 08		76 10					
						Dec. Pay			99 20					
						45522	39 34		135 96					
						45602	66 16		69 80					
						RA 255	38 44		31 36					
						Jan Pay			99 20					
						H.V.			130 56					
						RA 454	15 65		130 56					
						Balance			114 91					
									622 12					622 12
									114 91					114 91



