R223936 EVANS ANDREW WILLIA Do not remove documents from this folder. Prepared for digitization project. Ces documents seront numérisés. Ne pas les déplacer.

WAR SERVICE GRATUITY - PARTICULARS OF SERVICE

NUMBER FINAL PAID RANK	GROUP	CHRISTIAN NAMES	SURNAME	
- K-223936	8"	apolieur Will	and LUAN.	5
Reason for termination of se	rvice:	K.R(A1R)19	95 (12 //a/V	
TOTAL SERVICE:				
T.O.S. 3-5-43	s.o.s.	1-12-43	2/3 DAYS	
T.O.S.	s.o.s.		DAYS	- Andrew Control of the Control of t
			TOTAL =	2/3 DAYS
LESS NON-QUALIFYING SERVICE:			de la constant de la	
From: 21-6-43	To:	28-6-43	D.AYS	
From:	To:		DAYS	4
From:	To:		DAYS	8
		TOTAL QUAL	IFYING SERVICE	DAYS
OVERSEAS SERVICE:				
From:	To:		DAYS	
From:	To:		DAYS	
From:	To:		DAYS	
			TOTAL	DAYS
LESS NON-QUALIFYING SERVICE:				
From:	To:		DAYS	
From:	To:		DAYS	
From:	To:	·	DAYS	
		TOTAL QUALIFYING OV	ERSEAS SERVICE	DAYS.
		Certified that enti-		
		The Mar Service Gramestablished, based		
			1	
		Sim	1 Koa 15/	/
		RCAFF	ECORDS OF	FICE
			THAWA.	
COMPUTER'S INITIALS	4/2			
CHECKER'S INITIALS	18			
DATE 23-11-44			RCAF-R	310

R.C.A.F.-R.310

"13. "Coy

2nd. Bn. The Cameron Highlanders of Ottawa (M. G.) N. ALA. M.

ATTESTATION

NON-PERMANENT ACTIVE MILITIA OF CANADA
UNIT CAMERON High Lander 5 2 18/3N. REGTL. No. C. 42671
1. Surname? (Block letters) EVAN5
2. Christian names? ANdRew William 3. Present address? 55 Papine Au 57. Hull P.Q.
3 Present address 5 5 Pa DIN PAU ST. Hull Pa
Dhone No. Ma.
1 Date of Birth 2* Jan 389 1924 5 British subjects 1/05
4. Date of British Subjects of Residence of the State of British Subjects of Residence of the Residence of the State of the Policy Deliving of Residence of the State of the S
Phone No. No. 4. Date of Birth?* IAN. 3-1924 5. British subject? Ves 6. Occupation? C.N. R. Telegraph Poy 7. Religion? 8. Next of Kin W. EVANS 9. Relationship? FATIER.
Address AS ASOVE
10. Previous Naval, Military or Air Force Service. None. (Give particulars, qualifications, etc.)
!
•••••••••••••••••••••••••••••••••••••••
Height 5 8 Weight 135 10 Schest max 36 min 38
Descriptive marks / lange seem sught keel caps I have examined the above named man in accordance with instructions laid down in Instructions for
I have examined the above named man in accordance with instructions laid down in Instructions for
the R.C.A.M.C. and C.D.C. 1937 Appendix V and find him. Category. Date
Date
DECLARATION TO BE MADE ON ATTESTATION I, the undersigned and solemnly declare
I, the undersigned who will return same when required, and that I will report any change in address of myself, or my next of kin to my Commanding Officer.
OATH TO BE TAKEN
I, Cudul Evans do sincerely promise and swear (or solemnly declare) that I will be faithful and bear true allegiance to His Majesty.
Don't Attustone androus Cream Cran
Signature of Witness Signature of Man
Dated this 5 day of May 194 at Offers
CERTIFICATE OF ATTESTING OFFICER
The reconsit above named was continued by me that if he made any false answers to any of the above

The recruit above-named was cautioned by me that if he made any false answers to any of the above questions he would be liable to be punished by law. The above questions were then read to the recruit in my presence. I have taken care that he understands each question and that his answer to each question has been duly entered and replied to, and the said recruit has made and signed the declaration and taken the oath.

Signature of Magistrate, Justice of Peace, or Attesting Officer

M.F.B. 235d 150M--7-40 (5905) H.Q. 1772-39-1545

*To be shown day, month, year-Example: -25-8-39.

Statement of Services

Promotions, Reductions, Transfers, Casualties, Annual Training, Qualification Certificates, etc.	Effective Date	Authority for Entry	Signatures of Officers Certifying Correctness of entries
Accepted for Service with effect from			Officer Commanding Unit
Camp 2/ Completed Local Training	31/3/	BO.#29 1/7/42	Shirt who
Total Days 1942-47 Itended Training Completed Local Training Days	31/3/43	B.033 1/5/43	
Medals and Decorations			

NOTE.—These entries are to be made from time to time as they occur and certified by the Officer making the entry.

Attestations to be made out in duplicate, the original being forwarded to be filed in Regimental Orderly Room, the duplicate to be kept in the Battery, Squadron, Company, etc.

Statement of Services

Promotions, Reductions, Transfers, Casualties, Annual Training, Qualification Certificates, etc.	Effective	Authority for Entry	Signatures of Officers Certifying Correctness of entries
Accepted for Service with effect from			Officer Commanding
	7 -		

NOTE.—These entries are to be made from time to time as they occur and certified by the Officer making the entry.

Attestations to be made out in duplicate, the original being forwarded to be filed in Regimental Orderly Room, the duplicate to be kept in the Battery, Squadron, Company, etc.

Statement of Services

Promotions, Reductions, Transfers, Casualties, Annual Training, Qualification Certificates, etc.	Effective Date	Authority for Entry	Signatures of Officers Certifying Correctness of entries
Accepted for Service with effect from	55	BO-1602	Sofficer Commanded
Bosteau to B.Co.	1941.	0/10/1/4/	Unit.
Réclassifice as	3	Bo. Ho 20	N. T.
PRIVATE or scaeking age 18	1942	4/3/42/	Municus!
5.0.5. overlistment	3/	B.0.36	
5.0.5. overlistment in R. C. A.F.	13/13	10/6/43.	Miles Capt.
als			

NOTE.—These entries are to be made from time to time as they occur and certified by the Officer making the entry

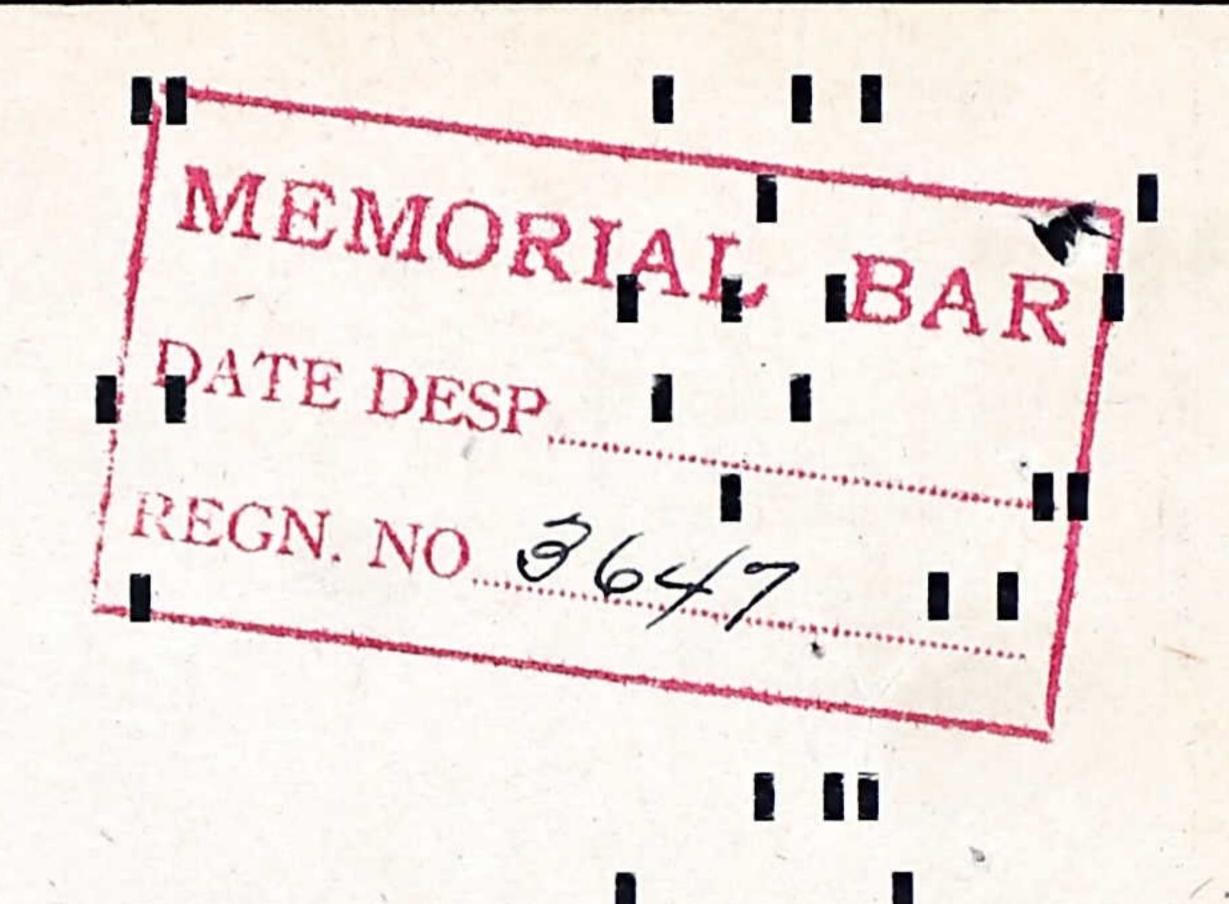
Attestations to be made out in duplicate, the original being forwarded to be filed in Regimental Orderly Room, the duplicate to be kept in the Battery, Squadron, Company, etc.

AWARD AWARD AND CLASP
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AWARD
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APPLICATI
DISPATCHI
RIBBON
ISSUED
MEDAL

Quel 2 July 85. Post disch death

4/54 5-11-51

Mr. William Evans (Father)
Room 325,
Daly Annex,
Ottawa 2, Ontario. 2 Nov 51



RE-ENLISTMENT ENLISTMENT R.C.A.F. R-44B (REVISED) 25M-10-42 (2834) AIR FORCE F. Q. 885-R44B 3-5-43 FULL CHRISTIAN NAMES SURNAME RECORD OF SERVICE AIRMEN TYPE OF SERVICE AIRCRAFT LEAVE-TRANSPORTATION WARRANT POSTING (INDICATE S.O.S. OR T.O.S.) TEMPORARY DUTY (IN RED INK) POSTING (INDICATE S.O.S. OR T.O.S.) TEMPORARY DUTY (IN RED INK) QUALIFIED TO FLY D. R. O. S.O.S. OR T.O S TYPE T. W. D. R. O. D. R. O. EFFECTIVE D. R. O. FROM UNIT AND PLACE D. R. O. EFFECTIVE UNIT AND PLACE 50 3 5 43 5 m.D. 105 31 5 43 5m. D.131 6 7 8 PRESENT MARITAL STATU 6 43 9RD 132 28 9 43 988237 Jos 10.T. 4. Bagotville 29 9 43 1070242 505 10711 Bagotville 1 12 43 1074291 Desch under para 195 (12/a) (Rairi) QUARTERS-RATIONS-SUBSISTENCE ALLOWANCE D. R. O. FROM TO FLYING TIME PASS. TOTAL CREW DUTIES SINGLE ENGINE MULTI-ENGINED NIGHT OBSERVER GUNNER OTHER DAY

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FORCE	150	100	Real Property		Sec.	
NO.	110	-	-	U	V	-

EVANS

ANDREW

WI	No.	IA	1	f.
FU	ILL CH	RISTI	AN	NAM

PLACE OHLAWA MT
DATE 3-5-43

RE-ENLISTMENT

RECORD OF SERVICE AIRMEN

BIRTH: DATE PLACE	CITIZENS	HIP 2	PERMANENT HOME ADDRESS PRIOR TO ENLISTMENT							RECLASS'NS-PROMOTIONS-ETC.				S-ETC.	TRADE AND CHARACTER					
3-1-24 Montreal P.	2 Br		69 190	nne D'	arc.	Viriahtri	lle 2	ul			RANI	K EFFECTIVE D. R. O.				TRADE GROUP EFFECTIVE D. R. O.				
FATHER (FULL NAME) William Er						0		1	22	400	ac2	8	3 5	43	5 m. D. 105	9.29.	S	. 3	54	3 5M.D.105
			SINGLE-MARRIED-	WIDOWER-SE	PARATE	D-DIVORCE	D	Di	ngle		ac/				9RD 200		?			
BIRTHPLACE London. Ing.			WIFE (FULL MAIDEN NAM	E)										/						
MOTHER (FULL MAIDEN NAME) aliee Dr	oun		PLACE OF MARRIAGE				DATE													
decensed			AUTHORITY (IF AFTER E	UTHORITY (IF AFTER ENLISTMENT)																
BIRTHPLACE USA																				
EDUCATIONAL STANDING			MARRIED ESTABL	ARRIED ESTABLISHMENT																
HIGH SCHOOL ENTRANCEX		Que	REMARKS	-			RANK	EFFEC	TIVE	D. R. O.										
JUNIOR MATRICULATION GUIX 2 4 MD	HS.																			
SENIOR MATRICULATION																				
TECHNICAL SCHOOL																				
UNIVERSITY		1																		
CORRESPONDENCE COURSES			CHILDREN													TRADE	CY AS	ARAC	ENT	DATE OF R41
OTHER		2	CHRISTIAN NAMES	BIRTH DATE	D. R. O.	CHRISTIA	N NAMES	BIR	TH DATE	D. R. O.						Characte	word	iel	God"	1074291
CIVIL OCCUPATIONS OR EXPERIENCE USEF	UL TO R.C.A.F	2220														Controlo				
Clk (City Meat & Sausage Co	1940-10															reh. ara				1014291
mech Inspector Robt. Miletel	Urcol Jan	V									MEDICA	L HIST	ORY							
Wireless u (R.CA Victor) Soute	apr.										EXAMINA	TIONS	(IN RED	INK)					
Engine u Ottawa Car saire											DATE	FORM	CATE	GORY	REMARKS					
Wireless a /UK Inspection Bo			NEXT OF KIN(ADDI	RESS AND D.R.	D. IN PENCII	L) ,			. 0		нс	SPITALIZ	ZATION	(IN BLA	CK INK)					
PREVIOUS ARMY, NAVY OR AIR FO			FULL NAME: William Evans RELATIONSHIP father						HOSPITAL	ADMITTE	DISCH	IARGED	D.R.O.							
set			ADDRESS 69 gas	nne D'A.	re. Wri	ghtrelled	.R.O.	1			QUARTERS	CONFINE	ED RET'N	DUTY						
2nd (R) Bn Come even Halland	leun Mai	V DI	FULL NAME:		•	12 use R	ELATIONS	HIP			26-4-43	1100	A	48						
2nd (R) Bn. Cameron Angland 5.5.416	3-5:43		ADDRESS D.R.O.								Ste annex	69-7-	43 60 -	8-43	9RA 164-192					
			PERSON TO BE N	OTIFIED IN	CASE OF	CASUALTY					Roberval		43 28-	9-43	9RD192-233	236.				
		0	FULL NAME:			R	ELATIONS	HIP								COURSE	S-TEST	S, ET	C.	
HONOURS-AWARDS, MENTIONS	AUTHORITY	DATE	ADDRESS			D	.R.O.									SUBJECT	RESUL	.T	DATE	AUTHORITY
			FULL NAME:			R	ELATIONS	HIP												
			ADDRESS			D	.R.O.													
			ENGAGEMENTS						1											
			TERM	EFFECTIVE	D.R.O.	TER	М	EFFE	CTIVE	D.R.O.										
			Dur.	3 5 43																
FLYING EXPERIENCE ON ENLISTM	ENT (Hours)		PAY ENTRIES (OFF	ENCE FORFEIT	JRES, STOP	PAGES IN REI	D INK)			*										
SOLO - BUAL -	PASSENGER		RATE CHANGES. ETC.	EFFECTIVE	D.R.O.	RATE CHAN	GES. ETC.	EEFE	CTIVE	D.R.O.										
			AWL	0406 43	9 RD152				1,1											
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				124																
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SPORTS Dowling Swimming Baseball Jugby											R60	R79	B4	65	X-RAY AFI	M-13 IDN. CA	RD O	H.F.	K	X
Wireless Inspector mode	1 plan	es																	40	
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AIR FORCE 722393	6	SURNAL	Juans.		Dateis L CHRISTIAN NA		ille	· esse	PLACE	A	000	Hawa In	1	IGION		that	
				ROYAL CAN RECORD OFFICERS, AIR	OF SE	ERVIC	E							150M	F. FORM 1 1-7-42 (24 . 885-R-2	146)	
BJRTH DATE PL	ACE		OUNTRY CITIZENSHIP	RACIAL ORIGIN				PARTI	CHLA	RS	OF FA	AMILY					
3 rd - Van · 1924 Moni	real 1:	2 Ca	nada Canadian	Melek	SINGLE, MARR	IED, WIDOWE	R, DIVORCE	D Q	ling	le							
			EDUCATION		WIFE (FULL MAI	DEN NAME) O	R HUSBAND		0								
PUBLIC SCHOOL			JUNIOR MATRICULATION		PRESENT ADD	RESS (IN PEN	CIL)										
HIGH SCHOOL ENTRANCE 9. SENIOR MATRICULATION						PLACE OF MARRIAGE DATE											
TECHNICAL SCHOOL							NTMENT/ENLIS	STMENT)				*					
CORR./BUSINESS COURSES			LANGUAGES SPOKEN Sence	ho English													
	CIVIL	CCUPATI	ONS AND EXPERIENCE						СН	ILD	REN.						
City mat & Sauca	ac Co.	Mon	Treal clist 1940 -	41	NA	MES	PL	ACE AND DATE	E OF BIRT	Н	N	AMES	PLACE	AND D	ATE OF	BIRTH	
Palest mitchello	Tobert Mitchell & Co. Montseal much inspector, 1941-41																
R.P.a. Victor	0	-	vireless inspectos	1941-42.													
Ottowa Car o airera	1. 1	,	inspector, 1942-														
16 16. Inspection &	oard	of Ca	nada, wieless inste														
			JS SERVICE			ESS(ES), REL	ATIONSHIP	OF PERSON(S)	TO BE INF	ORMED	OF CASUAI	LTIES (IN PENCIL)					
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Mil.						69	Jean	me,	d'a	he	. /	Mighto	ille	-	Lu	e -	
							1							9			
							EMPLO'	YMENT AS II	NSTRUC	TOR	FFICER A	AIRMAN/AIRWO	MAN				
						TYPE		FROI	м т			TYPE		F	ROM	ТО	
PLACE AND DATE OF MEDICA		CATEGORY	PLACE AND DATE OF MEDICAL	CATEGORY													
No.12 Dec-C. Ottowa	Chit.	14/6	3.														
							*										
		OF	FICERS			Al	RMEN AN	DAIRWOME	N			OFFICERS,	AIRMEN	I/AIRW	OMEN	I	
RANK, BRANCH AND CATEGORY	DAT	E AUTH	DUTIES PERFORMED DURING	SERVICE, E.G. ADJ.	RANK	DATE	AUTH.	TRADE		DATE	AUTH.	COURSE OR TR	RADE	GRP. 9	% PF	DATE	-
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					ACI	384	3 Alozo	a	Ha.								
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12																	
			COURTS-MARTIAL ATTEND	ED WITH DATES								•					
			STATE IF UNDER INSTRUCTIO		H												
			NOTATE III ONDER INCOMO	N OR AS MEMBER)													
				N OR AS MEMBER)													
				N OR AS MEMBER)													

ENLISTMENT/APPOINTMENT RELIGION AIR SURNAME ALL OTHER CASUALTIES TYPE OF AIRCRAFT ON WHICH MOST PROFICIENT POSTINGS, ATTACHMENTS & TEMPORARY DUTY TYPE OF LEAVE (IF UNDER INSTRUCTION STATE NUMBER OF No. DAYS AUTHORITY TO SOS TOS DATE DESCRIPTION AUTH. AUTHORITY FROM CASUALTY AND DATE HOURS ON EACH TYPE AND TESTS PASSED) #5M.P #12 RC 17 TAWA LACKINE 3 5 43 MONIS A W h from 6630, 21-643 Deb. 152 45 M.D. Lackine 3 5 43 MONS/43 Ceases tobe AWL 0040hu, 296-43 Deb. 154 31 543 0A0 13/43. Forfeits 8 days pay AW L Des. 154 Para (195 (12) (A) K.R (Aix) and 5.05.

elf. 1 Dec. 43 to Robernel Sanatorium

Roberval, Duó. Character on discharge

"Good" Entitled to draw Clothing allowance

under Art. 187 F.R. 8 O. Entitled to

Rehabilitation Grant (AUTH: A.F.H. & Sig. SERVICE MACHINES FLOWN CHARACTER AND TRADE ASSESSMENT DATE CHARACTER TRADE ASSESSMENT HONOURS, AWARDS AND MENTIONS DATE AWARD AUTHORITY



WAR SERVICE GRATUITY STATEMENT

NAME

Evans

(SURNAME)

REGISTER NO.

FILE NO.

ADDRESS

(CHRISTIAN NAMES) 69 Joan d'Arc St., Wrightville,

SUB TOTAL

9 Dec/44 SERVICE NO. 2225936

FINAL RANK OR RATING

DATE OF TERMINATION OF OVERSEAS SERVICE

DATE OF DISCHARGE

B. QUALIFYING OVERSEAS SERVICE

A. TOTAL QUALIFYING SERVICE

NO. OF DAYS LESS SEE PAR. 2 OVERLEAF FOR EXPLANATION

DAYS @ 25C. PER DAY

PAY

COMPLETE PERIODS AT \$7.50

C. SUPPLEMENT FOR OVERSEAS SERVICE

DAILY RATES AT DISCHARGE

TOTAL

ADDITIONAL PAY

SUBSISTENCE OR LODGING

AND PROVISION ALLOWANCE

DEPENDENTS' ALLOWANCE 1/30 OF \$

X7 = \$NO. OF DAYS_

D. WAR SERVICE GRATUITY

45.00

E. DEDUCTIONS

OVERPAYMENT OF

OTHER DEDUCTIONS

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

F. AMOUNT PAYABLE

(THIS AMOUNT IS PAYABLE IN

MONTHLY INSTALMENTS OF \$

EACH)

45.00

THE WAR SERVICE GRANTS ACT, 1944, PROVIDES FOR YOUR RE-ESTABLISHMENT CREDIT IN THE AMOUNT SHOWN IN SUB TOTAL OF A. & B. THIS CREDIT IS AVAILABLE TO YOU IN CERTAIN CIRCUMSTANCES. INQUIRY IN THIS CONNECTION SHOULD BE DIRECTED TO THE DEPARTMENT OF VETERANS' AFFAIRS.

SEE REVERSE SIDE FOR EXPLANATION OF ITEMS A, B & C

G. MONTHLY INSTALMENT NOT TO EXCEED AND ALLOWANCES

DAILY RATE OF PAY

X30

79.50

INSTALM. PAYABLE AMOUNT 45.00 CHEQUE No. DATE

INSTALM. PAYABLE	10	11	12	13	14	15	16	17	18
AMOUNT									
CHEQUE No.									
DATE							Live Na		

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.

CHECKED BY PREPARED BY

TREASURY CHECKED BY

EXPLANATION OF ITEMS A, B & C

- 1. The War Service Grants Act, 1944 provides for the payment of the War Service Gratuity for every thirty days of service as follows:—
 - (i) \$7.50 in respect of service which is not classed as overseas service.
 - (ii) \$15.00 in respect of service classed as overseas service.

By regulation, each person qualifying is entitled to a gratuity of \$7.50 for each completed period of 30 days of service together with an additional sum of 25 cents for every day of overseas service which falls within such periods. No sum is payable for any day of service over and above the last completed 30 day period.

- 2. An "ineligible day" is any day of overseas service, rendered after completion of the last 30 day period of total service, for which no additional sum of 25 cents per day is payable.
- 3. In addition, a supplement is payable for service classed as overseas service equivalent to seven days' pay and allowances, including dependents' allowance and subsistence or lodging and provision allowance at standard Canadian rates for each six months of overseas service and proportionately for a period of less than six months. By regulations, "six months" is considered to mean "183 days".
- 4. For the purpose of computing benefits under the Act, no period of absence without leave or leave of absence without pay, or time served while undergoing sentence of penal servitude, imprisonment or detention, or period of service in respect of which pay is forfeited is included in determining qualifying service.

Air Force Services
OTTAWA, - CANADA.

Rec'd. DEC 11 1944

P. & A. SECTION

ROYAL CANADIAN AIR FORCE

(ATTESTATION PAPER)

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

1.	Surname EVANS	Full Christ	ian NamesANI	PEW WILLIAM								
2.	Present Address 69 Jeanne d'	rc, Wrightvill	e, Que.	Telephon	e. 4-2760							
3.	Permanent Address69. Jeanne. D.	Arc. Wrightvil	le, Que,									
4.	Place of Birth Montreal, P.Q. Citizenship Canadian											
5.	Date of Birth Jan 3rd, 1924 Married, Single, Widower, Separated, Divorced Single											
6.	Particulars of Children											
	Name	Date of birth	Name	е	Date of birth							
			·······									
7.	7. Occupation Wireless Inspector 8. Religion Roman Catholic State denomination											
9.	Languages. French, English (F)	uently) State proficiency	• • • • • • • • • • • • • • • • • • • •									
10.	O. Next of Kin (Full Name) William EVANS Relationship Father											
- 10	"Address69 Jeanne d	Arc, Wrightvi	lle. Que.	• • • • • • • • • • • • • • • • • • • •								
11.	Father (Full Name) William EVANS											
	"Address 69 Jeanne D'Arc,	Wrightville,	OntCitizenshi	p. Canadian								
21	" Occupation Head Valet			••••••••••••								
12.	Mother (Full Maiden Name)Alice.	DROUIN	Birthplace	u.S.A.								
	" Address (Deceased)	• • • • • • • • • • • • • • • • • • • •	Citizenshi	pCanadian								
13.	Details of any Naval, Military or Air	Force Service:										
	Unit	Rank	Trade	Date	Reason for discharge							
				From To								
			R.C.A.F.	Rec a Office								
			Rec'd.	1943	<u></u>							
			0.1/20	1 Liv	7							
14	Honours Awards Montions	None	R. C/N									
	Honours, Awards, Mentions		Contract and a second and a second									
	Have you previously made application	6.4										
10.	When?											
17.	Were you ever discharged from any br											
	If so, state nature of disability											
18.	Have you ever been or are you now in											
	If so, state nature of Disability											
19.	Have you ever been convicted of an in		*									
	Are you in debt?If s											
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	Name of school	Da	ate	Courses—Subjects, etc.
	Convent of St. Andrew	From	15037	Gr. 6
	Breboeuf Sc.,		-	
imary Education—Public or Separate School	Wrightville, Ont. St. Johns de Baptiste S	1930	1932	Gr. 2
gh School—Collegiate Institute, etc			A STATE OF THE STA	Gr. 9
econical School				
		4	1	***************************************
niversity or School other than above				
orrespondence Courses, etc				
2. Particulars of all Civil Occupa	tions (in full):			
		D	ate	
Employer and place	Duties, trades, positions	From	То	Reason for leaving
ty Meat and Sausage Co.	~~	7.040	2042	
ty Meat and Sausage Co. Montreal, P.Q.	Clerk	1940 Jan.	June	Better position
Dert Mitchell and Co.,	Mech. Inspector	1941		Better position
Montreal, P.Q. C.A. Victor,		June	April	
Montreal, P.Q.	Wireless Inspector	1941	1942	
tawa Car and Aircraft,		April		
Ottawa, Ont.	Engine Inspector	1942	1943	Better position
K. Inspection Board of Ca	n.	Feb.		
Montreal, P.Q.	Wireless Inspector	1943	still	
base ball, rugby.		ally ^B ow	ling	swimming, roller skati
(Cross out words not applicab	enlist for Ground Duties. FRYING XDIXTIES. r Force trade in which you wis erence as (a) Pilot; (b) Observele.)	h to enlister; (c) Air	tt	· // / / /
base ball, rugby. 3. Air Force Duty you wish to If for Ground Duties, state Ai If for Flying Duties, state pref (Cross out words not applicab	enlist for Ground Duties. FRYING XDIXTIES. r Force trade in which you wis erence as (a) Pilot; (b) Observele.)	h to enlister; (c) Air	tt	· // / / /
base ball, rugby. 6. Air Force Duty you wish to If for Ground Duties, state Ai If for Flying Duties, state pref	enlist for Ground Duties. FRYING XDIXTIES. r Force trade in which you wis erence as (a) Pilot; (b) Observele.)	h to enlister; (c) Air	tt	· // / / /
3. Air Force Duty you wish to If for Ground Duties, state Ai If for Flying Duties, state pref (Cross out words not applicab 7. Names of persons who can gi	enlist for Ground Duties. Flying XXXIIES. r Force trade in which you wis erence as (a) Pilot; (b) Observele.) ve references as to character at Address	h to enlister; (c) Air	Gunner	r (d) Wireless Operator (Air C
AIR FORCE DUTY you wish to If for Ground Duties, state Ai If for Flying Duties, state pref (Cross out words not applicab 7. Names of persons who can gi Name	enlist for Ground Duties. Thying Dixties: r Force trade in which you wis erence as (a) Pilot; (b) Observele.) ve references as to character at Address. Address.	h to enlister; (c) Air	t	Occupation Gen. Manager
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No. 12 Recruiting Centre, RCAF,

FOR OFFICIAL USE ONLY Report of Interviewing Officer— Type......General appearance....... Suitability for (state in what capacity)..... (B) Report of Trade Test (Not required for Standard (Tradesmen)— Trade in which tested...... Trade qualifications other than above likely to lead to efficient employment in the R.C.A.F...... Date.....Signature...... DECLARATION MADE BY MAN ON ATTESTATION particulars are true, and I hereby engage to serve on active service anywhere in Canada, and also beyond Canada and overseas, in the Royal Canadian Air Force for the duration of the present war, and for the period of demobilization thereafter, and in any event for a period of not less than one year, provided His Majesty should so long require my services. 3rd May, Signature of Recruit OATH TAKEN BY MAN ON ATTESTATION Andrew William EVANS ..do sincerely promise and swear (or solemnly declare) that I will be faithful and bear true allegiance to His Majesty. Signature of Recruit CERTIFICATE OF ATTESTING OFFICER (\mathbf{E}) The Recruit above named was cautioned by me that if he made any false answers to any of the above questions he would be liable to be punished as provided by law. The above questions and answers were then read to the Recruit in my presence. I have taken care that he understands each question, and that his answer to each question has been duly entered as replied to and the said Recruit has made and signed the declaration and taken the Oath before me,

FOR OFFICIAL USE ONLY CERTIFICATE OF MEDICAL EXAMINATION

Part 1. Information obtained from the applicant—	
1. Age. 19 2. Have you ever suffered from any of	the following defects in health?
(a) Rheumatism	(j) Nasal Trouble
(b) Tuberculosis	
(c) Bronchitis or Asthma	
(d) Heart Disease	
(e) Kidney or Bladder Disease	(n) Nervous or Mental Disease
(f) Gastro-intestinal	(o) Syphilis
(g) Rupture	
(h) Varicose Veins	
(i) Flat or Deformed Feet	(r) Other Disease or Defect
3. Have you ever worn glasses? Income for more than one week s	a Evans. Signature of Applicant
duration. No	
Examiner's Remarks re above	I certify that I have revealed my full medical history and have not withhe d
	medical history and have not will any relevant information. a. E.
Part 2. Information obtained by Medical Examination (A	Applicant must be stripped)—
1. Identification marks or scars (if operative obtain	
rond ocar 1" bel	ou paleira.
	3. Weight pounds.
4. Complexion	5. Color of Eyes drown Hair brown
6. Development Fair 7. Chest Measuremen	t—Full expirationinches
Poor	Range of expansioninches
	Tympana—Right Left
9. Vision—Without glasses—Right?	With glasses—Right. Part 2 Cont'
Left	Left13Reflexes
10. Condition of mouth and teeth	Lactory 14. Heart
11. Urine—Albumen	Sugar 15. Lungs
12. Abnormalities (Congenital and Pathological) fou	and on Examination 16. Blood Pressure S. D. /30/
	17. Colour Vision N-
X-Ray#	eg. (Chest)
Part 3. The Candidate has been examined in accordate and Instructions for the Medical Examination of	nce with the pamphlet, "Physical Standards 4 4 3
Any special remarks of the Medical Officers	

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***************************************	······································
Date 2 6 gpr 43 19 (5)	
0 , 0 , 0	. ID A
President	Member

	Section A—GENERAL INFORMATION	PLEASE
1	(a) Print name in full ANC ANC AND AND AND AND AND AND SER'I. No. 22 3936	
	(a) Arm of service? (c) Rank (b) Unit	
	(a) Date of birth any dependents? at time of enlistment with the fully (a)	
	(a) Place of enlistment de Tanana (b) Date of enlistment (b) Date of enlistment (c) (a)	12
	Section B—EDUCATION AND TRAINING	NGP .
5.	(a) State age on (b) Were you attending school	
6.	finally leaving school	
	(for instance—"4 years, Public School", "two years, High School", "Junior	
7.	Matriculation", or "4 years technical course in printing", etc.)	
8.	university and standing or degree secured	
	enter upon a trade for what (c) Did you finish it, how long	
9.	apprenticeship?occupation?	
_	do you speak fluently?	
10	Section C—EMPLOYMENT CONDITION AT TIME OF ENLISTMENT	
10.	(a) State whether you were WORKING or NOT WORK- (b) At time of en-	
	ING at time of enlistment. (Enter here only "Work-"	
	ing" or "Not Working",	
	as case may be; particu- lars are asked for below)	
-		
	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?	
	(a) If answer to 11 be "Yes". (b) State how long you	
	state exact trade or occupation had worked at this	
13.	If answer to 11 be "No", state exact trade or occupation for which you feel qualified	
	If you had been employed after leaving school, state	
	when you last worked fairly regularly before enlistment	
	Give details of last employer, if any: Name	
16.	Nature of employer's business (for instance, "farmer", or "building contractor", or "boot factory", or "iron foundry", or "retail store", etc.)	
17.	(a) If your last employment was	
	in a business of your own, state nature and address of business	
	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	
	Name of employer. A state of the state of th	
19.	Nature of employer's business (for instance, "farmer", or "building contractor", or "boot factory", or "iron foundry", or "retail store", etc.)	Andio-
20.	(a) Your (b) Number of years' experience at	and construction of
21.	specific occupation	
	definitely to give you refuse to promise you to return to your employment on discharge?	
	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	
	(a) State nature of business, (b) Where was	
23	or professional practice	44
_	engaged in this businessreturn to the same or a similar business on discharge?	
	Section F—PARTICULARS OF FARMING EXPERIENCE	
24.	(a) Do you wish to engage (b) Do you feel competent (c) If so, in what in farming after the war?to operate a farm?kind of farming?kind of farming?kind	
25	(a) Were you (b) How many years' actual (c) In what provinces born on a farm?	The section
-		% (90/H)QQ
26	Section G—MISCELLANEOUS Have you made any arrangements other than indicated above, for re-establishment in civil life after discharges	II share
	Have you made any arrangements other than indicated above, for re-establishment in civil life after discharge	: Williams
	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	M Ibranian
*****		P. B. L.
DA	TE MARKET 194/2 SIGNATURE MICHO DELLA	
-	OICHAIL OICH CONTRACTOR OF CON	

ROYAL CANADIAN AIR FORCE

SERVICE CONDUCT SHEET

	(IN	BLOCK CAP	PITALS)			(IN WORDS) an	nd Rank of C.O	JA Verner /	W/C	- 72	
UNIT AND PLACE	Date of Offence	Rank	Cases of Drunken- ness (In Red Ink)	OFFENCE	Names of Witnesses	PUNISHMENT AWARDED	Date of award, or of order dispensing with trial	BY WHOM AWARDED	Date of Commence- ment	Date of Expira- tion	Initials and Rank of Officer making entry and remarks, with date
	June/	AC2		W.O.A.S. charged with A.W.L. from 0630 hrs 21-6-	Documentary	14 das C.B.	29-6-43	J.A. Verner W	29-6-4	12-7-13	29 June/43.
				until 0040 hrs 29 -6-43, Time absent 7 days 19 hrs 30 Min A.F.A. Sec 15(1)							
				JO MILIT ME - SEC LY(L)							
			- 3312								
				To be carried over							

R.C.A.F. R-72 35M-8-40 (6623) H.Q. 1062-3-54

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 EVANS WILLIAM ANDREW (Surname first—Christian names in full—Block capitals)
(2)	Regimental or Official Number and Rank R-223936 ACZ.
(3)	Unit R.C.A.F #5. Mb Wepat
(4)	Are you married? No.
(5)	If married, state,
	(a) Full name of your wife
	•••••••••••••••••••••••••••••••••••••••
	(b) Present postal address of wife. N.A.
(6)	If married, have you been regularly supporting your wife? If not—state reasons
(7)	Are you a widower?
(8)	Have you any children? N.M. Number of boys N.M. Girls N.A.
	Names and ages
(9)	If Dependents' Allowance is claimed in respect of children-state whether you have been
	regularly supporting them M.H.
	•••••••••••••••••••••••••••••••••••••••
	Give particulars of Guardians to whom Dependents' Allowance should be paid—if authorized.
	Name N.H.
	Postal Address
	[SEE OTHER SIDE]

·(10)	Have you a common-law wife—whom you have been regularly supporting and publicly repre-
	senting as your wife for at least 2 years immediately prior to appointment or enlistment?
	If so, state her full name and Postal Address
	•••••••••••••••••••••••••••••••••••••••
(11)	Is your father alive?
	If so, state name and address, occupation Hilliam & and
	If your father is a widower and is totally incapacitated from earning a living—are you his sole
	or partial support? MA
	If sole or partial support of father who is a widower, totally incapacitated from earning a living
	—state what amount per month you have given him prior to appointment or enlistment
	Also state reason he has no other means of support if partially supported by you, what is your
	reason for not providing full support?
	Is your mother alive?
	11 SO, State name and address
(15)	If your mother is a widow, are you her sole or partial support?
	If sole or partial support of widowed mother—state what amount per month you have given her
	prior to appointment or enlistment
	Also state reason why she has no other means of support, if partially supported by you what
,	is your reason for not providing full support?
(17)	Are you contributing to the support of any dependents, other than those shown above?
	Relationship N.A.
	Full Name
	Postal Address N.A
	Amount contributed monthly during the past six months.
(18)	Are you insured?
(,	If so, in what Company?
	(Give number of policy)
	Have you made arrangements for payment of your Insurance Premium? M. 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.
	MeGvans
	Date May 45 1943. (Signature of officer or man)
-	4 w Shil 818
	to amonding No. 5 M D JR C A E
	Date MAY 5'1943

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.