

R50797
HOWE
ERNEST JAMES

SPECIAL RESERVE

Carstairs, Alberta
January 29th, 1940

Officer i/c recruiting,
R.C.A.F.,
Calgary

Sir;

The bearer, E. J. Howe, is well known by me for two years. I would highly recommend him for enlistment in any branch of the Service in which he is qualified.

He is very industrious, honest and a gentleman.

H. J. MacCrimmon
Capt. M.C.

2nd Corps Troops, R.C.A.S.C.

SPECIAL RESERVE

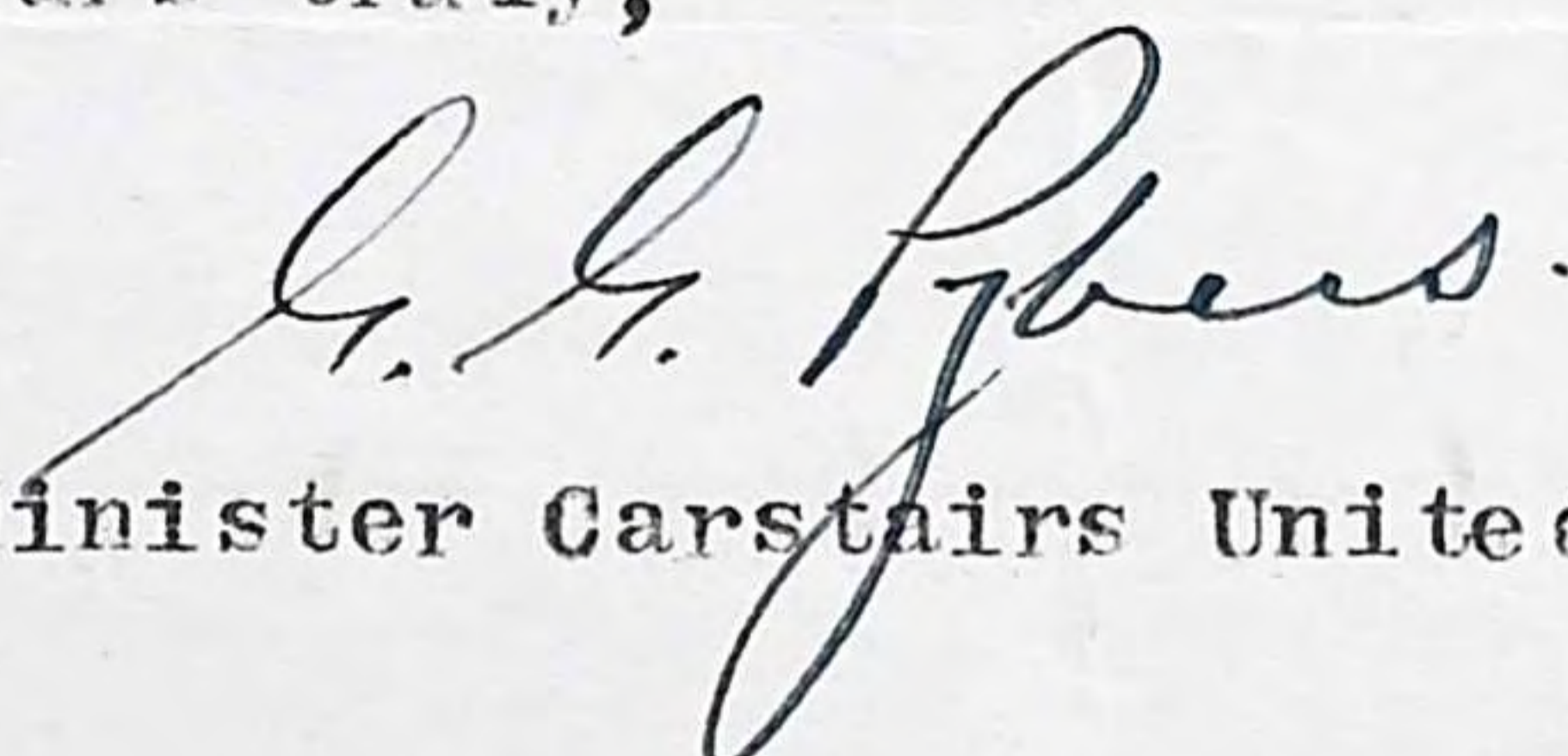
Carstairs, Alta. Jan. 29th, 1940.

R.C.A.F.
Calgary,
Alta.

Dear Sirs:-

This will certify that I have known Mr. Ernest Howe for more than a year and believe him to be of good and reliable character.

Yours truly,


Minister Carstairs United Church.

SPECIAL RECEIPT

Carstairs, Alberta.

January 29, 1940.

R. C. A. F.

CALGARY, Alberta.

Dear Sir:

The bearer of this letter, Mr. E. Howe has been known to me for three years. He always acts a gentleman and is highly respected in this district.

Yours truly,

PEARSON & PRIZEMAN

Per

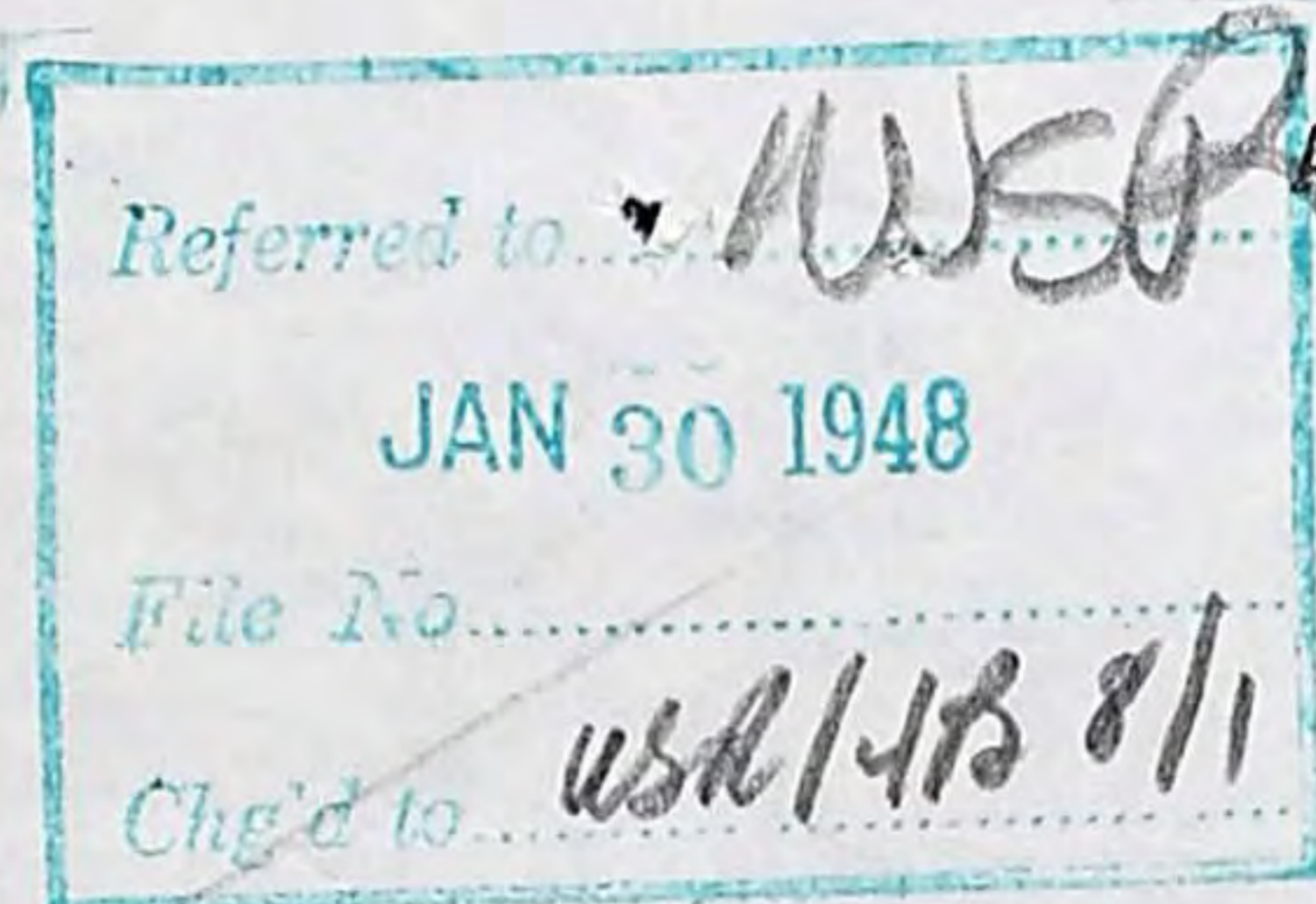
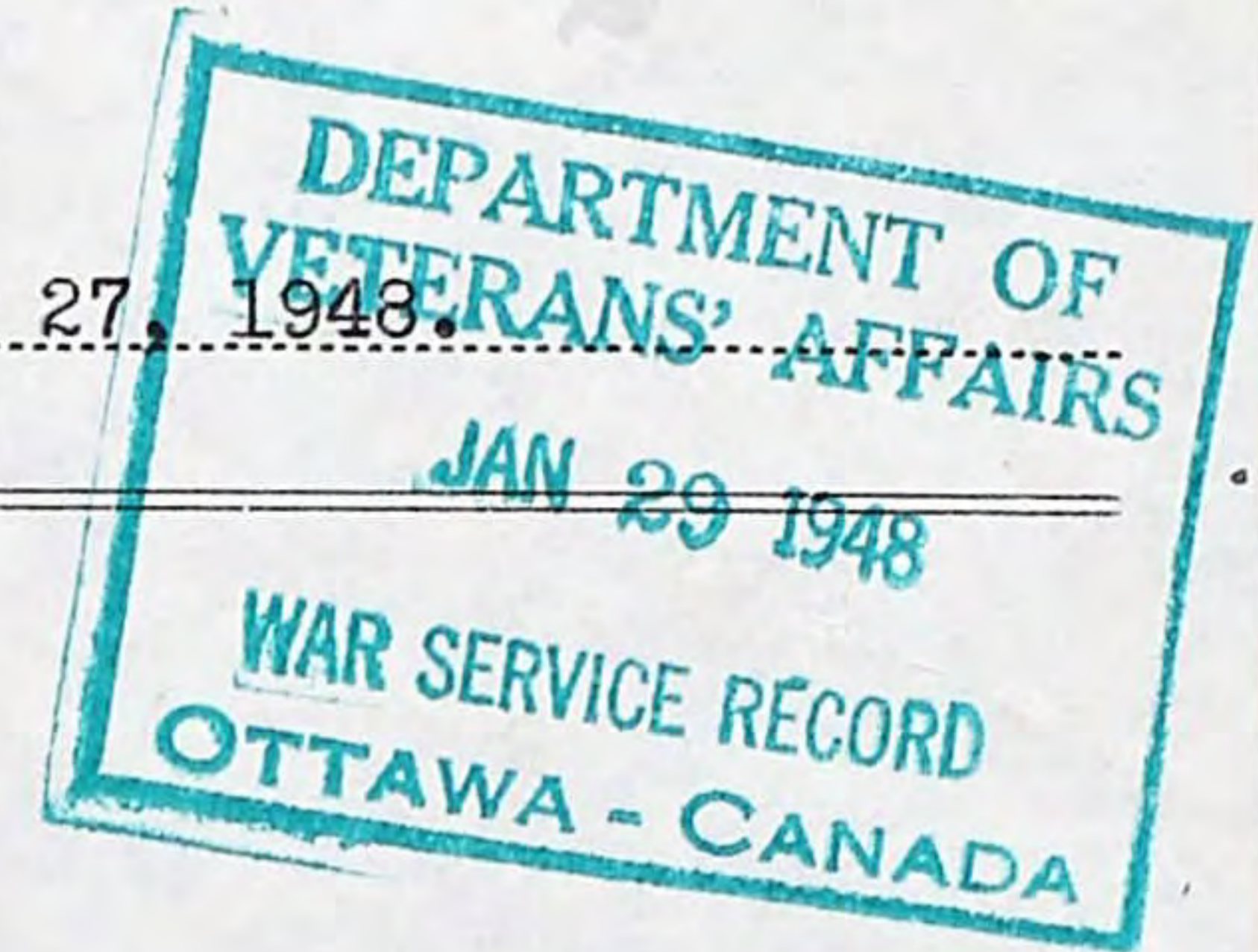
W. H. Prizeman.

THE CANADIAN PENSION COMMISSION

MEMORANDUM

TO Director of War Service Records.
FROM The Canadian Pension Commission.

OTTAWA, January 27, 1948.



ATTENTION - W.S.R.D.

~~Canadian Agency~~
~~Imperial War Graves Commission~~

~~EXPC.~~

R-50797 Sgt. - Ernest J. Howe.
R.C.A.F.

The marginally named died

at Montreal, P.Q.

on October 10, 1947.

Cause of Death Hemopericardium cardiac tamponade due to ruptured dissecting aneurym of ascending aorta.

In the opinion of the Commission,

death was related to military service.

Next of Kin Mrs. Stennetta Howe (widow),
5317 Western Ave.,
Montreal, P.Q.

*Noted
H. K. A(B)*

mb
Not on strength.

E. Lackey

for
Secretary.

*Noted
L. J. Rochelle
PC 4-2-1
noted in C. J. B
13-2-48
J. E.*

*Cpl. Lapierre
1. Noted on address
amendment List
for your action re
Receipt
16 Feb 48. L. J. E.
for post.*



CANADA

DEPARTMENT OF VETERANS AFFAIRS

Daly Bldg.,
Ottawa, 16th December, 1947

IN YOUR REPLY REFER TO FILE No.

OFFICER I/C OF RECORDS,
DEPARTMENT OF NATIONAL DEFENCE.

~~XNAVYX~~

~~XARMYXX~~

AIR FORCE

Church of England

Name..... *✓* HOWE, Ernest J. *James* Number..... *✓* R-50797 Rank..... *FT.* Sgt.

Please be advised that the above named..... *Ex-airman*
is reported to have died on..... 10th October, 1947
at..... St. Mary's Hospital, Montreal, P.Q.

*Noted
St. R. (B)*

C.Y. Steele
C.Y. STEELE,

CHIEF OF CENTRAL REGISTRY
DEPARTMENT OF VETERANS AFFAIRS.

P R.19666

29th March, 1944.

Commanding Officer,
No. 7 S.F.T.S.
Macleod, Alta.

R50797 F/S Howe, E.J. - Wireless Mechanic "A" - Application for Posting

1. The above noted airman has been consistently attempting to remuster to aircrew during the past two years, but has been prevented allegedly due to shortages in his particular trade.
2. Due to the fact that the possibilities of obtaining a remuster appear very remote, this airman respectfully applies for an overseas posting, or a posting to an active theatre of war.
3. Due to the fact that all relatives are residing in the British Isles, it is felt that a posting along these lines could receive favourable consideration.
4. May this be treated as expeditiously as possible please.
5. The above for your consideration and necessary action.

signed -

R50797 F/S Howe, E.J.

C
O
P
Y

7257.

4/4/50

Deceased 10 Oct 47

Mrs. Stennetta Howe (widow),
1957 Haig Avenue,
Longue Pointe, Montreal Que.

6 Jun 49 ✓

MEMORIAL B R

DATE DESP.....

REGN. NO.....

3909

NAME HOWE, Ernest James

FILE NO. R50797 (DPC)

RANK SGT. CATEGORY _____

REG. NO. R50797

DATE OF DEATH: _____ MOTHER LIVING: _____

WIFE: _____

MINISTERIAL CARD:

ROYAL MESSAGE:

MEMORIAL CROSS
TO CHAPLAIN:

DEL'D TO MOTHER: 28-5-48 ✓

DEL'D TO WIFE:

Mrs. John Howe, (mother)
3 Ashover Street,
Manchester, England.

COMMAND:

RELIGION:

AIR FORCE No. *B 50797*

SURNAME *Howe* FULL CHRISTIAN NAMES *Ernest James*

ENLISTMENT PLACE *Calgary* DATE *5.6.40*

RE-ENLISTMENT

C.R. FILE NUMBER

RECORD OF SERVICE AIRMEN

R.C.A.F. FORM R. 44 (B)

7. BIRTH: DATE *19-2-12* PLACE *County of Chester* CITIZENSHIP *British*
 FATHER (FULL NAME) *John Ernest Howe*
 BIRTHPLACE
 MOTHER (FULL MAIDEN NAME) *Sarah Inge*
 BIRTHPLACE
 8. EDUCATIONAL STANDING
 HIGH SCHOOL ENTRANCE *X*
 JUNIOR MATRICULATION *Gr. XI England*
 SENIOR MATRICULATION
 TECHNICAL SCHOOL *2 yrs Comm. radio oper. - Ont.*
 UNIVERSITY
 CORRESPONDENCE COURSES *3*

16. SINGLE-MARRIED-WIDOWER-SEPARATED-DIVORCED: *Single*
 WIFE (FULL MAIDEN NAME)
 PLACE OF MARRIAGE DATE
 AUTHORITY (IF AFTER ENLISTMENT)

17. MARRIED ESTABLISHMENT
 REMARKS RANK EFFECTIVE D.R.O.

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

19. NEXT OF KIN (ADDRESS AND D.R.O. IN PENCIL)
 FULL NAME: *Mrs Sarah Howe* RELATIONSHIP *Mother*
 ADDRESS: *90. Derbyshire Ave, Stratford,* D.R.O. *1455223*
 FULL NAME: *Manchester, Eng* RELATIONSHIP
 ADDRESS: D.R.O.

9. CIVIL OCCUPATIONS OR EXPERIENCE USEFUL TO R.C.A.F.
Various jobs - 8 mos.
 9000

10. PREVIOUS ARMY, NAVY OR AIR FORCE SERVICE
Nil

20. PAY ENTRIES (OFFENCE FORFEITURES, STOPPAGES IN RED INK)
 RATE CHANGES ETC. EFFECTIVE D.R.O. RATE CHANGES ETC. EFFECTIVE D.R.O.
Flying pay 4 days 11 11 40 170251
Flying pay 1 day 18 11 40 170252
Flying pay 1 day 28 11 40 170264

11. HONOURS-AWARDS, MENTIONS AUTHORITY DATE
C.V. & M. 75213A 15-1-44

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

13. RELIGION *Church of England*

14. LANGUAGES *English*

15. SPORTS *Skating football Gen radio (Prac. & theory) Gen code 20 wpm.*

21. ENGAGEMENTS
 TERM EFFECTIVE D.R.O. TERM EFFECTIVE D.R.O.
Duration 5 2 40

22. TEMPORARY DUTY AND MISCELLANEOUS ENTRIES
 FROM TO DATE D.R.O.
Auth. to draw gtrs. allowance 31-3-41 145540
Expenses gtrs. allow. cancelled 1-8-41 1455181
Cessus gtrs. allow 31-7-41 1455182
Issued S.L. 704 #C 179702 29-12-42 987302

23. DOCUMENT CONTROL (INDICATE RECEIPT BY DATE)
 R60 R79 B465 X-RAY AFM-13 IDN. CARD
10-9-40 JAN 16 40 10-5-40
80607
O.H.F.
KY
CH
X

Flying Pay (1 day) 28 11 40 170264

AIR FORCE No. R50797 P

SURNAME: HOWE, ERNEST JAMES FULL CHRISTIAN NAMES

ENLISTMENT PLACE: Calgary DATE: 5-2-40

RE-ENLISTMENT

C.R. FILE NUMBER

RECORD OF SERVICE AIRMEN

R.C.A.F. FORM R44(B) 50M-10-40 (7685) H.Q. 1062-3-58

Table with columns for 1. POSTING (INDICATE S.O.S. AND T.O.S.), 2. RECLASS'NS-PROMOTIONS-ETC., 3. MEDICAL HISTORY, 4. TRADE AND CHARACTER, 5. COURSES-TESTS-ETC., and 6. LEAVE. Includes entries for various units like 98F Summerside and 2TSU Penhold, and ranks like A/C and Sgt.

Vertical text on the right edge: R.C.A.F. OVERSEAS, ENLISTMENT, MARRIAGE STATUS, HIGH & TECH. SCHOOL EDUCATION, RELIGION, PROVINCE OF ENLISTMENT, DISCHARGE, AC

ROYAL CANADIAN AIR FORCE



Name HOWE Ernest James..... 50797

Rank LAC..... RCAF

Age 29..... Height 5'7"..... Weight 150

Hair Brown..... Eyes Blue..... Hair on face Medium

Marks, scars, etc. Left index finger

E. J. Howe

(Signature of holder)

W. Kennedy

(Signature of issuer)

Place No. 1 W.S., Montreal, Que...... Date Sept. 22nd, 1941

Card serial number 62367

Right Index
Fingerprint



1944-45 L.C.B. ONT.

IF YOU LOSE THIS CARD; 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, Can-

ada; Attention P.I.B."

NO POSTAGE NECESSARY

BEER #3 L.C.B.O.

VALLEY
1944-45
L.C.B.O.

1944-45



VALLEY
1944-45



VALLEY - 115 - 1944-45

SPECIAL RESERVE

R.C.A.F.-R. 83A
30M-9-39 (2131)
H.Q. 1062-3-66

(One copy only to be completed)

Unit... RCAF Recruiting Centre, Air Force Number... R.50797.....
Calgary, Alberta. Wireless & Elec. Mech. "C"

ROYAL CANADIAN AIR FORCE

ATTESTATION PAPER

1. Surname..... Howe
 2. Christian Names..... Ernest James
 3. Present address..... Carstairs, Alberta.
 4. Date of birth..... Feb. 19-1912
 5. Place of birth..... Canada..... Alberta..... Carstairs
(Country) (County or Province) (Town or Township)
 6. Religion (state denomination)..... Anglican
 7. Trade or Calling..... Wireless & Elec. Mech. "C"
 8. Married, Widower or Single..... Single
 9. Name of next of kin..... Mrs. Sarah Howe
 10. Relationship..... Mother
 11. Address of next of kin..... 3 Ashover Street, Manchester, England
 12. Have you served in any Naval, Military or Air Force?..... No
 13. If previous war service, state arm, force and regimental particulars..... N.A.
 14. Do you now belong to or have you served in the Royal Canadian Air Force, Permanent or Auxiliary?..... No
- (Give unit and date of attestation)

DECLARATION TO BE MADE BY MAN ON ATTESTATION

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

Date..... February 5, 1940

E. J. Howe
(Signature of recruit)

OATH TO BE TAKEN BY MAN ON ATTESTATION

I,..... Ernest James Howe..... do sincerely promise and swear (or solemnly declare) that I will be faithful and bear true allegiance to His Majesty.

E. J. Howe
(Signature of recruit)

CERTIFICATE OF MAGISTRATE, JUSTICE OF THE PEACE OR ATTESTING OFFICER

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

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

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

at..... Calgary..... this..... 5th..... day of..... February..... 1940.

J. P. Alexander {Signature of Magistrate
Justice or Attesting Officer.

Flying Officer,
Officer Commanding RCAF Recruiting..... {Office or Rank and Unit
Calgary, Alberta. Centre, {or Appointment.

CERTIFICATE OF MEDICAL EXAMINATION

Name in full Howe, Ernest J. Date.....

Part 1. Information to be obtained from the recruit

1. Age.....27 2. Have you ever suffered from any of the following diseases?
- | | |
|---|---|
| a. Rheumatism..... <u>No</u> | j. Nasal trouble..... <u>No</u> |
| b. Tuberculosis..... <u>No</u> | k. Ear disease..... <u>No</u> |
| c. Bronchitis or asthma..... <u>No</u> | l. Eye disease..... <u>No</u> |
| d. Heart disease..... <u>No</u> | m. Epilepsy..... <u>No</u> |
| e. Kidney or bladder disease..... <u>No</u> | n. Nervous or mental disease..... <u>No</u> |
| f. Gastro-intestinal..... <u>No</u> | o. Syphilis..... <u>No</u> |
| g. Rupture..... <u>No</u> | p. Gonorrhoea..... <u>No</u> |
| h. Varicose veins..... <u>No</u> | q. Have you ever worn glasses?..... <u>No</u> |
| i. Flat or deformed feet..... <u>No</u> | |

(Signed) E. J. Howe
(Signature of recruit)

Examiner's remarks re above.....
.....
.....

Part 2. Information obtained by Medical Examination.

(The recruit must be stripped)

1. Identification marks or scars (If operative obtain history).....
Mole in right axilla
2. Height 5 feet 6 inches. 3. Weight 139 pounds.
4. Complexion Med. 5. Eyes Blue Hair LT. Br. 6. Development Good
~~Fair~~
~~Poor~~
7. Chest measurement—Full Aspiration 36 ins. 8. Hearing—Right WV 20'
Range of expansion 3 ins. Left WV 20'
- ~~PEB~~ 9. Vision without glasses—Right 6/9 With glasses—Right 6/6 3/2/40
Left 6/6 Left 6/6 PEB.
10. Normal Ishihara
Condition of mouth and teeth.....Good
11. Abnormalities (Congenital and pathological) found on examination are as follows:
Nil

Part 3. We the examiners, find no evidence of the diseases mentioned in Question 1, Part 1, except as reported in the remarks. We have examined the recruit in accordance with the pamphlet, "Physical Standards & Instructions for the Medical Examination of Recruits", and he is found fit for Category.....A3B

Any special remarks of the Medical Officers may be added below.....
First Class risk chemically

(Signed) H.W. Price L.G. Alexander M.D. R. E. Buswell M.B.
Lieut. RCAMC (President) (Member) (Member)

CERTIFICATE OF OFFICER COMMANDING UNIT

Ernest James Howe..... having been finally approved and inspected by me this day, and his Name, Age, Date of Attestation, and every prescribed particular having been recorded, I certify that I am satisfied with the correctness of this Attestation, and that his service reckons from the.....5th..... day

of.....February.....1940
Date.....February 5,.....1940
J. P. Alexander F.O.
(Signature of Officer)

NOTE: Service reckons from date recruit commences to draw pay.

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

AIR 6
FILE COPY

NAME **Ernest J.** **Howe**
(CHRISTIAN NAMES) (SURNAME)
ADDRESS **Central Y.M.C.A.,**
Drummond St.,
Montreal, P.Q.
DATE OF TERMINATION OF OVERSEAS SERVICE **N.A.**

REGISTER NO. **151293**
FILE NO. **1 Dec./45**
DATE **R50797**
SERVICE NO. **Sgt.**
FINAL RANK OR RATING **9 Oct./45**
DATE OF DISCHARGE

A. TOTAL QUALIFYING SERVICE \$ **510.00**
NO. OF DAYS **2064** EQUAL TO **68** COMPLETE PERIODS AT \$7.50
30

B. QUALIFYING OVERSEAS SERVICE
NO. OF DAYS LESS INELIGIBLE DAYS, EQUAL TO DAYS @ 25c. PER DAY

SUB TOTAL 510.00

C. SUPPLEMENT FOR OVERSEAS SERVICE
DAILY RATES AT DISCHARGE
PAY \$
SUBSISTENCE OR LODGING AND PROVISION ALLOWANCE \$
ADDITIONAL PAY \$
DEPENDENTS' ALLOWANCE 1/30 OF \$ \$
TOTAL \$ X7 = \$
NO. OF DAYS 183 X\$

D. WAR SERVICE GRATUITY 510.00

E. DEDUCTIONS
OVERPAYMENT OF PAY AND ALLOWANCES \$
DEPENDENTS' ALLOWANCE AND ASSIGNED PAY \$
OTHER DEDUCTIONS **9 V.L. & Acc. Int.** \$ **200.12** **200.12**

F. AMOUNT PAYABLE 309.88
(THIS AMOUNT IS PAYABLE IN **5** MONTHLY INSTALMENTS OF \$ **61.97** EACH)

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.

G. MONTHLY INSTALMENT NOT TO EXCEED 126.00
DAILY RATE OF PAY AND ALLOWANCES \$ **4.20** X30 \$

INSTALM. PAYABLE	1	2	3	4	5	6	7	8	9
AMOUNT	61.97	61.97	61.97	61.97	61.97				
CHEQUE No.									
DATE									
INSTALM. PAYABLE	10	11	12	13	14	15	16	17	18
AMOUNT									
CHEQUE No.									
DATE									

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 **B.B.** CHECKED BY **M.P.**
TREASURY
CHECKED BY **[Signature]** DATE **4.12.45**
SERVICE REPRESENTATIVE **[Signature]**



Royal Canadian Air Force

This is to certify that

Sergeant R50797
RANK NUMBER
Ernest James HOWE
NAME IN FULL

Served on Active Service with the

Royal Canadian Air Force

From February 15th, 1940 and was "Honourably Released"

*Transferred To Reserve
(R.O. Gray)*

on the 2nd day of October 19 45
Ninth

Particulars of Active Service

Service in theatre of war No Number of occasions wounded NIL

Orders, Decorations, Medals, Mentions and commendations awarded during above service
C.V.C.M.

October 2nd, 1945
DATE

[Signature]
FOR CHIEF OF AIR STAFF

Description of holder on reverse side. Should certificate become lost, no duplicate can be obtained. Any alterations render it null and void.

Issued War Service Badge (General Service Class) No. _____

DESCRIPTION OF PERSON

Sex Male Age 33 years Height 5 feet 7 ins.

Complexion Medium Eyes Blue Hair Brown

Visible marks or scars Left Index Finger

Additional Information _____

Signature of person E. J. Howe

N.B. Any person finding this certificate is requested to forward it in an unstamped envelope to the Secretary, Department of National Defence for Air, Ottawa, Canada.

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

AIR **6**
FILE COPY

NAME **Charles Schultz**
(CHRISTIAN NAMES) (SURNAME)
ADDRESS **1111 - 7A St. S.E.,
Calgary, Alta.**
REGISTER NO. **157-10
161563**
FILE NO. **18 Dec/45**
DATE **R50795**
SERVICE NO. **A02**
FINAL RANK OR RATING **15 May/40**
DATE OF TERMINATION OF OVERSEAS SERVICE **N.A.** DATE OF DISCHARGE

A. TOTAL QUALIFYING SERVICE		
NO. OF DAYS	104 EQUAL TO 3 COMPLETE PERIODS AT \$7.50	\$ 22.50
B. QUALIFYING OVERSEAS SERVICE		
NO. OF DAYS	LESS INELIGIBLE DAYS, EQUAL TO DAYS @ 25c. PER DAY	
SUB TOTAL		22.50
C. SUPPLEMENT FOR OVERSEAS SERVICE		
DAILY RATES AT DISCHARGE		
PAY	\$	
SUBSISTENCE OR LODGING AND PROVISION ALLOWANCE	\$	
ADDITIONAL PAY	\$	
	\$	
DEPENDENTS' ALLOWANCE 1/30 OF \$	\$	
TOTAL	\$	X7 = \$
NO. OF DAYS	183	X\$
		22.50
D. WAR SERVICE GRATUITY		
E. DEDUCTIONS		
OVERPAYMENT OF PAY AND ALLOWANCES	\$	
DEPENDENTS' ALLOWANCE AND ASSIGNED PAY	\$	
OTHER DEDUCTIONS	\$	
F. AMOUNT PAYABLE		
(THIS AMOUNT IS PAYABLE IN 1 MONTHLY INSTALMENTS OF \$ 22.50 EACH)		22.50

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.

G. MONTHLY INSTALMENT NOT TO EXCEED DAILY RATE OF PAY AND ALLOWANCES \$ **3.96** X30 \$ **118.80**

INSTALM. PAYABLE	1	2	3	4	5	6	7	8	9
AMOUNT	22.50								
CHEQUE No.									
DATE									
INSTALM. PAYABLE	10	11	12	13	14	15	16	17	18
AMOUNT									
CHEQUE No.									
DATE									

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 MR	CHECKED BY DR	TREASURY CHECKED BY <i>[Signature]</i>	DATE 12/15/45
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SERVICE REPRESENTATIVE

A

ROYAL CANADIAN AIR FORCE

R.C.A.F. R. 78A
25M-12-43
H.Q. 885-R-78A

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

N.B. - To be rendered in accordance with the instructions on pages 3 and 4.

1. NAME..... **HOWE** **Ernest James**
(surname) (christian names in full)
RANK... **FS** NUMBER. **R50797** UNIT. **#7 SPTS** AGE. **32** TRADE... **Wireless Mechanic**
DATE OF ACCIDENT AND TIME OF DAY. **1300 hrs. 3/June** ¹⁴⁴ PLACE OF ACCIDENT. **Wireless Section Office-#1 Hangar.**
(exact locality)

2. Short statement by injured person of the circumstances (or manner) of injury (see Instruction 6). Signed statements of witnesses, or of persons to whom the injured person may have mentioned his injury, to be attached (see Instructions 7 and 9).

Attacked by Cpl. DeMars and LAC MacLean at approximately 1300 hrs., Saturday, 3rd day of June. Duration of attack - 25 or 30 minutes before I could escape.

Signed "E.J. Howe"

N.B. - See Instruction 4 before completing the following section.

- 3. (a) Type and R.C.A.F. No. of aircraft.....
- (b) Name of pilot of aircraft (at time of crash).....
- (c) Number in aircraft, including pilot.....
- (d) Circumstances of accident: *taxiing.....taking off.....landing.....forced landing.....*
(designate one)
collision in air.....collision on ground.....other (specify).....
- (e) weather.....
- (f) In case of non-fatal crash does individual recall all events immediately preceding and following crash? If answer is "no", comment.....
- (g) Number of flying hours of person reported on: dual.....solo.....
- (h) Duty: *instructor/pilot/pupil pilot/aircrew (specify).....passenger/other (specify).....*
(strike out those not applicable)

- 4. (a) Description of injuries (in detail):...**1. Multiple contusions - face. 2. Fractured nose. 3. Possible fracture left maxilla. 4. Contusions - auricles.**
- (b) Are the injuries of such a nature that they *might* be the exciting cause of disability later?... **Yes**.....
- (c) How long before initial treatment was given?... **20 minutes.**
- (d) whether admitted to hospital or sick in quarters. **Yes #7 S.F.T.S. Macleod, Alta.**
(give name of hospital)

R.C.A.F. **ads Office**
Rec'd **JUN 15 1944**
O. K.....
S. L.....

DATE..... **3/June/44** Signature of Medical Officer.... **D.M. Bruser S/L**

A

5. Commanding Officer's statement:-

(a) was the injury sustained

(i) In the performance of air force duty?.. **Yes. - ES. Howa was on duty in the Signals Section.**
(See Instruction 9)

(ii) In a game or other form of physical recreation approved by proper Air Force authority?.....

..... **No.**

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

NOTE:- If the answers to (a) (i), (ii) and (iii) are all in the negative, the Commanding Officer is to attach a concise statement of the circumstances surrounding the accident or injury.

N.B. - See Instruction 8 before completing the following section.

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

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

..... **N.A.**

(ii) The nature of the game, etc. (e.g., hockey, baseball, etc.)..... **N.A.**

(iii) was the officer or airman detailed to take part in it (a) as a member of an air force team,

or (b) to compete as an individual?..... **N.A.**

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

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

(v) was the officer or airman a selected representative of an air force unit practising under

authority?..... **N.A.**

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

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

decided by the Canadian Pension Commission..... **N.A.**

N.B. - See Instruction 12 before completing the following section.

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

If so, state in what way... **Two Summaries of Evidence being taken into charges against an N.C.O. and Airman.**

(e) was anyone else to blame? If so, give name and particulars.....

..... **See Summaries of Evidence.**

(f) Is the accident being investigated by

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

(ii) An investigating officer?..... **Summaries of Evidence by F/O J.S.H. Beck**

Certified true copy

DATE **Stafford H. Beck F.O. JUN 7 1944**

SIGNATURE..... **P.R. Hampton G/C.**

COMMANDING..... **#7 S.F.T.S. Macleod, Alberta.**

INSTRUCTIONS

1. This form is to be rendered as soon as possible after the event in the following cases depending on the personnel involved:

(a) For all R.C.A.F. Personnel.

In all cases of accidental or self-inflicted injuries involving:

- (i) death;
- (ii) absence from duty of 48 hours, or more;
- (iii) absence from duty of less than 48 hours, when the medical officer (who should invariably be consulted) advises that the injury *may* be the exciting cause of disability later; and
- (iv) in all flying accidents which result in the flying category of an individual being changed, or in which any injury is suffered by personnel who are occupants of an aircraft, or who have jumped or fallen from a moving aircraft or who are struck by a moving aircraft or propeller.

(b) For R.A.F., R.A.A.F., R.N.Z.A.F., R.N., R.C.N., C.A., R.N.A.F. or other Service Personnel.

In all cases of accidental or self-inflicted injuries involving:

- (i) death;
- (ii) absence from duty of 48 hours, or more; or
- (iii) absence from duty of less than 48 hours when the medical officer (who should invariably be consulted) advises that the injury *may* be the exciting cause of disability later.

2. A separate form is to be used in respect of each individual affected.

3. The form is to be rendered notwithstanding the holding of a court of inquiry or investigation (see Instruction 10).

- (a) Three copies of this form are to be forwarded in all cases direct to Air Force Headquarters, one copy is to be retained by the unit rendering the form, and one copy placed in the medical envelope, R.C.A.F. M.10 of the person concerned.
- (b) One copy of the form is to be forwarded to Command Headquarters for their information (but see Instruction 10).
- (c) Of the copies received at Air Force Headquarters, one copy is to be sent to D.M.S. (Air), and the remaining two copies passed to Records Officer who will forward one copy to the Canadian Pension Commission and place one copy on the document file of the person concerned.

4. Section 3 is only to be answered in cases of flying accidents described in Instruction 1 (a) (iv) above.

5. This form is to be used in lieu of Naval Hurt Certificate for injuries sustained by naval personnel serving with the R.C.A.F., in all cases where issue is appropriate under Instruction 1 above, irrespective of whether the circumstances are such as would justify the issue of a Hurt certificate under K.R. (Admiralty) 1419. Whenever the injury is one for which a Hurt Certificate might have been issued, copies of form R.78A are to be made in Air Force Headquarters and forwarded as follows: For an officer, two copies are to be returned to the C.O. of the unit, who is to pass one copy to the officer and endorse the other copy to that effect and then return the copy to Air Force Headquarters for transmission to Naval Headquarters. For a rating, one copy of form R.78A is to be returned by Air Force Headquarters to the Unit for attachment to the Service Certificate (Naval) on which an appropriate note is to be made.

6. The statement made by the injured person in Section 2 of this form should not be used as evidence against him in any subsequent disciplinary proceedings. The rendering of this form should not be delayed in the event of his being unable to make a statement, but the latter should be forwarded at the earliest opportunity.

7. No statements of witnesses are required in support of form R.78A when an accident forms the subject of a court of inquiry or an investigation under K.R. (Air) 718 or 723. Where no such inquiry is held, form R.78A must be accompanied by full statements taken by an officer or warrant officer from witnesses of the accident and signed both by the witnesses and the officer or warrant officer. When there are no witnesses, statements from any persons to whom the injured person may have mentioned his injury immediately after the occurrence should, when obtainable, be attached to the form. In the case of injury in supervised games, or other form of physical recreation, etc., when the witnesses of the accident are in agreement, the evidence of one witness only need be attached to the form, his statement being endorsed by the other witnesses in corroboration. When separate forms are rendered in accordance with Instruction 2 above, a copy of the statements of witnesses is to be attached to each form.

8. In the case of an injury sustained in a supervised game, or other form of physical recreation, etc., it is most important in the interests of the injured officer or airman that the questions contained in Section 5 (b) of the form should be answered carefully and in full detail, since if and when the question of attributability of the injury to conditions of service comes to be decided under the provisions of the Pension Act, that decision may be based on the information given in answer to these questions.

9. When an affirmative answer is given to section 5 (a) (i) the statement required by Section 2 should specify the particular act of air force duty on which the officer or airman was engaged at the time the injury was received.

10. Courts of inquiry are to be held or investigations made when required under K.R. (Air) 718 and 723 regardless of the rendering of this form, but a copy of this form should be included in the proceedings of the court of inquiry or investigation for information. The proceedings will be disposed of as laid down in regulations in force at the time of reporting.

11. In addition to being reported on this form all casualties are to be reported in accordance with the procedure laid down in A.F.A.O. A.8/1.

12. Section 5(d) and (e) should be answered in all cases where no further investigation is being ordered, but in cases where further investigation is to be carried out, either by court of inquiry or investigating officer, in order to establish blame, a notation to that effect should be recorded as the answer to this question.

STATEMENT OF FLIGHT SERGEANT J.A. FRENETTE, R.50481

"I am Flight Sergeant Joseph Adrian Frenette, Wireless Mechanic, under training at No. 5 Radio School, Clinton, Ontario.

I was with Sergeant Howe in the Barlum Hotel in Detroit on the 21st of April 1945. At approximately 1330 hours, we were in our room which was a double room and I saw Sergeant Howe with a bottle of sodawater looking for a bottle opener with which to open it. I then saw him go over towards the window and I turned my head for a moment and then heard the sound as of breaking glass and turned quickly and was in time to see Sergeant Howe slipping on the floor with the bottle of soda. I went over to see the damage and noticed that the glass was broken and then I noticed that Sergeant Howe's hand was cut and I then took him into the bathroom and washed off the blood and examined the cut and after consulting the Hotel Doctor and American Army Doctor, brought Sergeant Howe to Grace Hospital, Windsor, Ontario.

At the time that the accident occurred, Sergeant Howe was entirely sober but there was approximately three feet between the wall and the carpet which was sort of linoleum which had been waxed and was quite slippery. It was on this linoleum that I believe Sergeant Howe slipped. I do not believe that Sergeant Howe was negligent in any way contributing to the accident.

J.A. Frenette 7/5
R.50481/J.A. Frenette FS

JAF

APPLICATION FOR REMUSTERING TO AIRCREW

APPENDIX "A"
to A.44/7
d/31/Mar/43.

1. No. R50797 2. Sgt. Howe Ernest James
(Present Rank) Name Initials

3. Trade and Grouping W.M. "A" 4. Unit No. 9 S.F.T.S. Centralia, Ont.

5. Date of Enlistment 5th Feb 1940 6. Date of Birth 19th Feb 1912

7. -----
Education From To Name of School or University B.Sc. Diplomas or Standing
Educated in England equiv. to Grade 12 Sr. Matric. Jr. Etc.

High School

University

Service Courses and date Wireless (Montreal) S.B.A. (Deseronto)

Flying Experience in hours (by years) App. 300 Hrs in last 4 years.

DETAILS

(Clubs, Place, Aircraft) R.C.A. Bolo Dual Passenger Total

All flying done in service in capacity of Wireless Mechanic

8. I hereby make application for aircrew training and subsequent employment on aircrew duties. If recommended, I am willing to appear before an aircrew selection board and accept selection for educational training and/or any category of aircrew training for which I may be selected by reason of my age, medical category, educational qualifications or adaptability. I (have) (have not) had previous aircrew training in the R.C.A.F.

8th Sept 1943

(Date)

E. J. Howe
(Signature of Applicant)

9. Subordinate Commander

This airman has served 44 months as a tradesman ~~xxxx standard~~ ~~(General Duties)~~ and is (recommended) ~~(Not recommended)~~ for Aircrew Training.

Remarks ..this N.C.O. has been very efficient in the execution of his duties and I feel that he should be given the opportunity to train for aircrew.

Sept 9/43
(Date)

R. Gordon
(Signature of Subordinate Commander)

10. Education Officer

I have interviewed the above named airman and in my opinion he is: (below average) (average) (above average) Aircrew material. This airman is considered (suitable) (not suitable) for examination by an aircrew selection board and I (recommend) (do not recommend) remustering.

REMARKS

CT seen in indication of Air Crew ability CT 6334 needs refresher I.T.S. Course

Sept 10/43
(Date)

J. H. [Signature]
(Signature of Education Officer.)

11. Medical Officer

This airman was medically examined on form R.C.A.F. M.2 16 Sept 43
(Date) A.B.A. (T)

and found to be fit for aircrew duties, his category being
(fit or unfit)

REMARKS

16 Sept 43
(Date)

[Signature]
(Signature of Medical Officer.)

12. Commanding Officer

I have interviewed the subject airman and consider him suitable
~~do not consider~~
for and worthy of aircrew training

17/43
(Date)

[Signature]
Commanding Officer
No. 9 S.F.T.S., Centralia, Ontario.

(PARA 12 MUST be signed by Commanding Officer.)

FOR HEADQUARTERS USE ONLY

Checked and Selected Remustered Posted
Recorded and Posted to

Initials

Date

NOTE: This form is to be prepared in triplicate

[Faint handwritten notes and signatures]

SPECIAL RESERVE

ROYAL CANADIAN AIR FORCE
APPLICATION FOR ENLISTMENT

(This form is to be filled out in detail and forwarded to the nearest R.C.A.F. recruiting office.)

SIR:

I have the honour to apply for enlistment as an Airman in the Royal Canadian Air Force.

The particulars of my application are as stated in the following questionnaire:—

(TO BE COMPLETED BY APPLICANT IN HIS OWN HANDWRITING)

- 1. Surname HOWE Christian names ERNEST JAMES
- 2. Permanent Address CARSTAIRS ALTA
- 3. Present Address CARSTAIRS ALTA Phone —
- 4. Nationality ENGLISH Place of Birth BUCKLOW - ENA.
- 5. Age 27 years. Date of Birth 19 - FEB - 1912 Married or Single S.
- 6. Religion C. OF E. Height 5' - 7" Weight 140
- 7. Languages spoken ENA - FRENCH.
- 8. Defects in health, limbs, faculties, etc. —

9. Naval or Military Service:—

Unit	Place	Rank	Trade	Date from	Date to
<u>na</u>					

10. Air Force Service:—

Unit	Place	Rank	Trade	Date from	Date to
<u>na</u>					

11. Reason for discharge from last engagement:—
(Copy of discharge certificate to be attached)

12. Are you on any Military Reserve? No.

13. Are you in receipt of any pension? No. If so, state —

- (1) Nature of disability —
- (2) Amount of Pension —
- (3) Canadian or Imperial —

~~CIB~~ ~~R44~~ ~~DF~~

16. Have you any Special Qualifications, Hobbies, etc., useful to R.C.A.F.?

GEN. RADIO (PRAC. AND THEORY)
CONT. CODE (20. W.P.M.)

17. What sports do you engage in; state whether extensively, moderately, or occasionally. What teams have you played for?

SKATING

FOOTBALL

18. Have you ever submitted a previous application to join the R.C.A.F.? If so, give approximate date.

No.

19. Are you employed at present?

No

20. In what trade do you wish to enlist in the R.C.A.F.?

WIRELESS OPERATOR

21. State date on which you are prepared to join.

IMMEDIATELY

22. Give names of at least two persons who can give references as to your character and ability.

Name	Address	Occupation
M. J. Mc CRIMMON	CARSTAIRS	OIL DEALER
W. PRIZEMAN	- " -	MERCHANT
REV. G. PYBUS	- " -	MINISTER

23. Remarks. (Give any other information likely to have any bearing on your application)

24. Certificate.

I hereby certify that the foregoing information furnished by me is correct to the best of my knowledge.

Date: 5 - FEB . 1940 Signature: Ernest J. Howe

FOR OFFICIAL USE ONLY

A. Report of interviewing Officer:—

Type of Man..... *Good*

General Appearance..... *Good*

Suitability for R.C.A.F. (State in what capacity)..... *Wireless & Electrical
Mechanic Group 'C'*

DATE..... *6 / 2 / 40* SIGNATURE..... *J. A. Fortey*

B. Report of Trade Test.

(1) R.C.A.F. Trade in which tested..... *Wireless & Electrical Mechanic*

(2) By whom tested..... *S.M. Griswold P.C.C.S. Calgary*

(3) RESULTS. (Strike out where not applicable)

(a) Applicant is fully qualified in R.C.A.F. Trade of..... *Wireless & Electrical
Mechanic Group 'C'*

(b) ~~Applicant is qualified as a learner in the R.C.A.F. Trade of~~

(c) ~~Applicant is not qualified in the R.C.A.F. Trade of~~

(4) Does applicant possess any trade qualifications other than above likely to lead to his efficient employment in the R.C.A.F.?

DATE..... *6 / 2 / 40* SIGNATURE..... *J. A. Fortey*

C. Report of Medical Examination.

Date on which examined.....

Category.....

Remarks.....

D. Action taken by Headquarters or Unit.

Result of application.....

Remarks.....

DATE..... SIGNATURE OF OFFICER.....

To be made out in duplicate.

M.F.M. 5
400M-8-39 (1702)
H.Q. 1772-45-18

PARTICULARS OF FAMILY OF AN OFFICER OR SOLDIER OF THE CANADIAN FIELD FORCE

INSTRUCTIONS.

- (a) This form is to be completed immediately an officer or soldier is appointed to, or enlisted in, the C.F.F.
- (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 soldier, to the Paymaster, or Officer acting as such. The latter will transmit one copy, through the District or Camp Paymaster, to the Chief Paymaster, N.D.H.Q., Ottawa. The other copy will be retained by the Paymaster until the unit arrives Overseas, when it will be forwarded to the Chief Paymaster, Canadian Overseas Intermediate Base.

-
- (1) Name of Officer or Soldier..... HOWE ERNEST JAMES
(Surname first—Christian names in full—Block capitals)
-
- (2) Regimental Number..... R50797
- (3) Unit..... R.C.A.F. MANNING POOL TORONTO ONTARIO
- (4) Are you married?..... NO
- (5) If married, state,
- (a) Full name of your wife..... N.A.
-
- (b) Present postal address of wife..... N.A.
- (6) If married, have you been regularly supporting your wife? If not—state reasons.....
..... N.A.
- (7) Are you a widower?..... NO
- (8) Have you any children?..... NO
If so, give number of boys and girls.....
Also their names and ages.....
- (9) If Separation Allowance is claimed in respect of children—state whether you have been regularly supporting them..... N.A.
Give particulars of Guardian to whom Separation Allowance should be paid—if authorized—
Name
Postal Address.....
.....

(SEE OTHER SIDE).

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(10) Have you a common-law wife—whom you have been regularly supporting and publicly representing as your wife?..... NO

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

(11) Is your father alive?..... YES

If so, state name and address..... HOWE JOHN ERNEST
..... 3 ASHOVER MANCHESTER ENGLAND

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

(13) If sole support of father who is a widower—state what amount per month you have given him prior to joining C.F.F.....
Also state reason he has no other means of support.....
.....

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

If so, state name and address..... HOWE SARAH
..... 3 ASHOVER ST MANCHESTER ENGLAND

(15) If your mother is a widow, are you her sole support?..... N.A.

(16) If sole support of widowed mother—state what amount per month you have given her prior to joining C.F.F. N.A.
Also state reason why she has no other means of support.....
.....

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

If so, in what Company?..... N.A.

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

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.

x E. A. Howe
v (Signature of officer or man)

Date 8.2.40

McBurnett
For Officer Commanding.....
R.C.A.F. MANNING POOL
TORONTO ONTARIO

Date 8.2.40

ROYAL CANADIAN AIR FORCE

12550

FILE NUMBER

Medical Board held at CALGARY ALBERTA

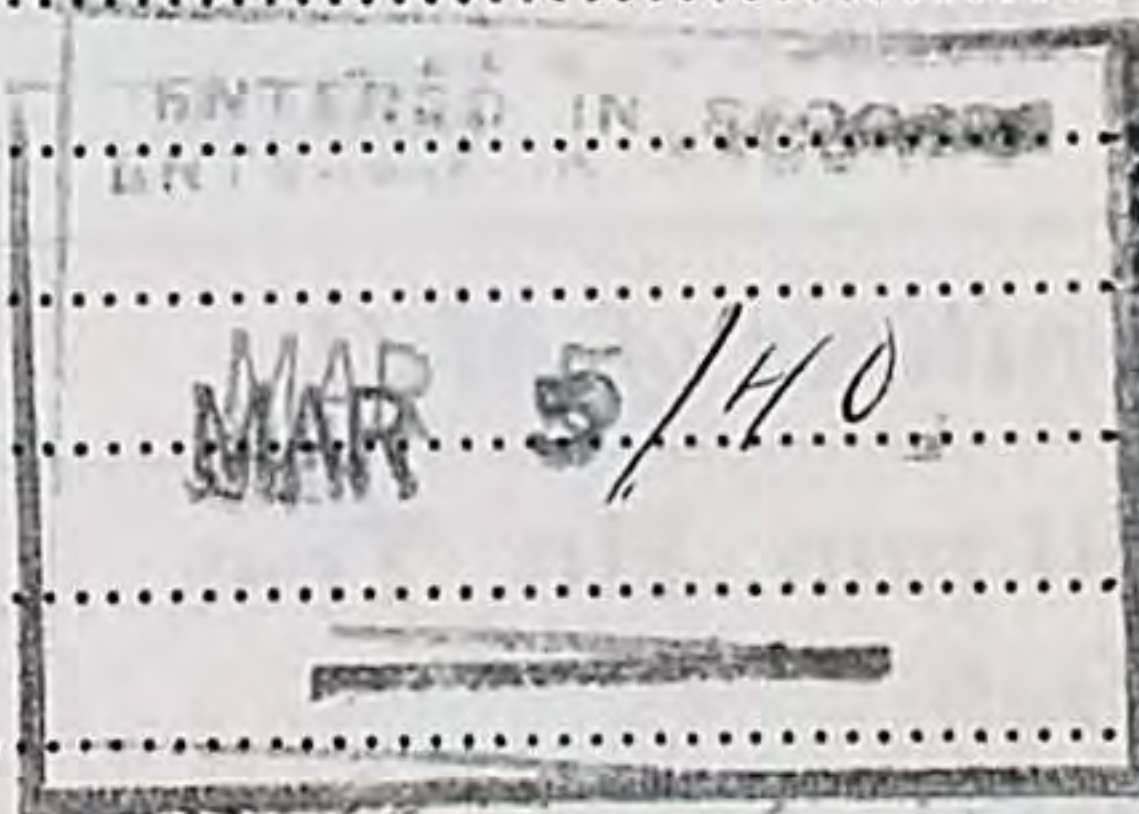
Date 30-1-40

Surname HOWE Chr. Names ERNEST JAMES
Nature of Commission Wireless Oper. Date of Birth 19-2-12 Married or Single Single
Branch Special Reserve Hours Flown Nil
Address Carstairs, Alberta

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 Tonsillitis NO
Diphtheria, Scarlet Fever or Scarlatina Scarlet fever in childhood.
- (iv) STOMACH or BOWEL TROUBLE NO
Chronic Indigestion or Pain after Food NO
- (v) KIDNEY or BLADDER TROUBLE NO
Syphilis or Gonorrhoea NO
- (vi) TROPICAL DISEASE Never lived in tropics 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 NO
Prolonged Hoarseness or Loss of Voice NO
Sea, Car or Train Sickness Seasick on voyage from England 1927
Discomfort on Swings, Roundabouts, Switchbacks NO
- (ix) OPERATIONS NIL
- (x) Any Illness or Injury not mentioned above Measles, mumps and chickenpox, whooping-cough in childhood.

Education Grade XI (England)
Present Occupation Student Hobbies Sports
Previous Service Nil
Athletics Skating, hockey, football
Habits—Smoking 15 cigarettes per day Alcohol Nil
FAMILY HISTORY—Consumption Nil
Nervous Ailments, Mental Trouble, or "Fits" Nil



Father Alive⁶⁵ Health Good Dead—Cause
Mother Alive⁶⁰ Health Good Dead—Cause
Brothers (.0) Alive—Health (.0) Dead—Cause
Sisters (.0) Alive—Health (.0) Dead—Cause

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

Date 30-1-40 Signature E. J. Howe Witness J. Macaulay

Lieut. RCAMC

SB ES

GENERAL MEDICAL AND SURGICAL EXAMINATION

Impression given by (a) Physique Athletic (b) Mentality Average
 Body Marks, Scars, Deformities Mole rt. axilla
 Size of Thyroid Gland Normal
 Surgical Abnormalities Nil
 Results of Wounds, Injuries, Operations Nil

	Date <u>30-1-40</u>		Date		Date		REMARKS ON ANY ABNORMALITIES FOUND
	Assessing Room	Assessing Room	Assessing Room	Assessing Room	Assessing Room		
Height (ins.)	66						Date.....
Weight (lbs.)	139						
Chest Circumference (ins.)	36						
Body Build (lbs.)	138						
LEG LENGTH (ins.)							
Pulse Rate	{ Sitting	84					
	{ Standing 1st	96					
	{ Standing 2nd	84					
	{ After Exercise	120					
	{ Time to Normal	45					
Arterial Walls	Soft						
Blood Pressure	{ Systolic 124 Diastolic 78						
Heart	{ Size	N					
	{ Sounds	N					
	{ Rhythm	Reg					
Lungs	N						Date.....
Breath held	70 Sec.						
Expiratory Force							
Vital Capacity (Best of 5)	4200 mm.						
Reflexes	{ Knee	N N					Date.....
	{ Ankle	N N					
	{ Triceps	N N					
	{ Abdominal	N N					
	{ Plantar	Abs Abs					
Cranial Nerves	N N						Date.....
Balancing Rod	R. L. R. L. R. L. R. L. R. L. R. L.						
Self Balancing	R. L. R. L. R. L. R. L. R. L. R. L.						
Tremors	{ Fingers	SF SF					Date.....
	{ Eyelids	SF SF					
Abdomen	{ Liver	N					
	{ Spleen	N					
	{ Muscular Tone	Reg					
Urine	{ Albumen	Neg					
	{ Sugar	Neg					
Initials of M.O.	<i>LSA</i>						
40 mm. Hg. Test	777//789,009,999,88--55 Sec.						
Date							
Date							
Date							
Date							

Remarks by Consultant.

First Class Physical Condition Clinically.

(L.G. Alexander)

EYE EXAMINATION

History.....	NIL		
Visual Acuity	{ R. 6/9 , $\frac{1}{6} \times 2.25 = 6/60$ L. 6/6 , $\frac{1}{6} \times 2.25 = 6/60$		
Colour Vision.....	Normal Ishihara		
Red, Green.....			
Diaphragm Test (P.D. =			
Convergence	{ C. = cms. S. C. = cms.		
Accommodation	{ R. 9 Cms. L. 8.5 Cms.		
Cover Test.....			
Fundi and Media.....	Normal		
Fields.....	Normal		
Remarks:			
	F I T		
	Initials of M.O. <i>R.P.S.</i>	Initials of M.O.....	Initials of M.O.....
	Date..... 30-1-40	Date.....	Date.....

EXAMINATION OF EAR, NOSE AND THROAT

History.....	N. I. L.		
Hearing	{ R. Ear..... wv. 20' L. Ear..... wv. 20'		
External Ear, Meatus Membranes	{ R. Ear..... Clear and Intact L. Ear..... Clear and Intact		
Middle Ear, Eustachian Tubes	{ R. Ear..... Patent L. Ear..... Patent		
Cochlear Apparatus	{ R. Ear..... N L. Ear..... N		
Vestibular Apparatus	{ R. Ear..... N L. Ear..... N		
Buccal Cavity.....	Healthy		
Teeth.....	Well cared for		
Gums.....	Healthy		
Pharynx.....	Healthy		
Nasopharynx.....	Healthy		
Nose.....	No obstruction		
Larynx.....	Healthy		
Remarks:	F I T		
	Initials of M.O. <i>R.P.S.</i>	Initials of M.O.....	Initials of M.O.....
	Date..... 30-1-40	Date.....	Date.....

HISTORY OF PRESENT CONDITION

Date.....3-2-40.....

This candidate for wireless operator, a 28 year old student is of average intelligence.

History:

Normal

Special Examination:

Visual acuity right eye 6/9, corrected with glasses to 6/6.

X-Ray of Chest:

Negative

This candidate is considered fit for flying duties as combatant passenger and is assessed A.3.B.

President: *[Signature]*
for (H.W. Price) Lieut. RCAMC

Member: *[Signature]*
(L.C. Alexander) M.D.

Member: *[Signature]*
(R.E. Buswell) M.B.

EXAMINATION OF EAR, NOSE AND THROAT

OBSERVATIONS AND FINDINGS BY PRESIDENT OF BOARD

Date.....3-2-40.....

Assessed A.3.B.

[Signature]
for (H.W. Price) Lieut. RCAMC

CATEGORY
APPROVED
A3B.
FEB 21 1940
[Signature]
for D. G. M. S.

1. NAME: Sgt. HOWE E. J. NUMBER R. 50797
 (Surname and Christian names in Block Letters)
 3. EDUCATION: Highest standing attained, Province and course (e.g. XII, Ont. Tech)
 Dates of last
 Equiv. to XII, Eng. School attended From 1923 To 1927
 4. TESTS: (a) C.F. 53 (Form. CF3) (b) E.A.T. (c) G.A.T.
 (d) M.A.E. (e) G.L. A.T.
 (f) Compensating Factors (if any)
 (g) Suitable for AIRCREW (X) or GROUND DUTIES () (State Trade)

Rec. remuster Aircrew (I.T.S.) Signature: *J. Webb*

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

Employer, Business and Place	Details of Duties	From	To

6. Details of Service or Similar Training: (e.g. military, auxiliary, C.O.T.C., cadets, etc.)
 33 mos. R.C.A.F. Instructor W.A.G.

7. HOBBIES & SPORTS: (a) In school years: Football, skating, Rowing, Boxing, Swimming
 (b) In civil life: Chess, Reading

8. OTHER QUALIFICATIONS: (e.g. Languages, First Aid, Knowledge of Typing, Mechanics, etc.)
 Considerable leadership experience. Selling. 300 hrs. passenger. WEM "A"
 Service weapon training

9. AGE: 30 Height: Weight: Visual Acuity: Colour Vision: Medical Category: A3B(T)
 (Mark X as applicable) M.O.'s ASSESSMENT

Fit - A1B ()
 A3B (Turret) (X) Good aircrew Material
 A3B ()
 A3B (Vision) ()
 Ground Duties ()
 M.2 Exam not given (State Reason) ()
 Signature: (E. Webb) F.L.

10. INTERVIEWING OFFICER'S ASSESSMENT:
 Maths well above average. Keen about aircrew. Quiet, spoken, but evidently sincere and able. Prefers opportunity for Pilot training. Originally (5.2.40) expected to be aircrew. Excellent material.

RECOMMENDED FOR: Aircrew (I.T.S.) Signature: *J.M. Stirling*
 (J.M. Stirling) P.O.

This space for use of Selection Board at "M" Depot
 SELECTED FOR:
 Signature: No. "M" Depot Selection Board

FOUND SUITABLE FOR Aircrew (I.T.S.)
 Signature: *E. Webb*
 Commanding Officer, No. 9 Recruiting Centre
 LONDON, ONTARIO.

Note: Information called for on the reverse side of this form is also to be provided when submitting application under Manning Order M.10/25.

R.C.A.F.
TRADESMEN

RECOMMENDATION FOR RANK AND GROUPING, EFFECTIVE DATE OF ENLISTMENT
TO BE COMPLETED ONLY WHEN APPLICATION SUBMITTED UNDER MANNING ORDER M.10/25

1. AVERAGE MONTHLY INCOME FOR PAST TWO YEARS.....

2. OUTSTANDING QUALIFICATIONS: (For trade as recommended in Para. 4)

3. QUALIFICATIONS AND SPECIFIC REASONS FOR RANK: (As recommended in Para. 4)

4. I RECOMMEND THIS APPLICANT FOR THE TRADE, RANK AND GROUPING NOTED HEREUNDER AND CERTIFY THAT HE QUALIFIES UNDER MANNING ORDERS M.10/20, AND M.10/25 IN EVERY RESPECT: (ANY EXCEPTIONS OR COMPENSATING FACTORS ARE TO BE STATED IN PARAS. 2 & #).

TRADE

RANK

GROUP

(Certified that Rank and Grouping recommended are consistent with A.F.A.O. A.44/2)

DATE.....

.....
(Commanding Officer)
No. 9 Recruiting Centre, R.C.A.F.
London, Ontario.

Form A.F.M. 53
29.9.42

ROYAL CANADIAN AIR FORCE

RECORD OF SERVICE AIRMEN

R50797 Howe Ernest James Anglican
 A.F. No. Surname Christian Names Religion

Born 19-2-12 Place Barstons Country Alta Citizen of Can. Racial Origin

ENLISTMENT	CIVIL EDUCATION	PREVIOUS SERVICE
Date <u>19-5-2-40</u>	High School Entrance Jr. Mat. Sr. Mat.	Nil
At <u>Calgary</u>	Technical School Corres. Courses	
Term <u>Regular</u>	University	

RANK	DATE	Med. Cat.	Date	CIVIL OCCUPATIONS AND EXPERIENCE
<u>A/C 2</u>	<u>22-2-40</u>			
<u>A/C 1</u>	<u>2-5-40</u>			
<u>Fac</u>	<u>1-10-41</u>			
<u>A/Cpl (unf.)</u>	<u>1-10-41</u>			
<u>A/Cpl (P)</u>	<u>1-1-42</u>			
<u>Cpl (T/P)</u>	<u>1-1-42</u>			
<u>A/Sgt (P)</u>	<u>1-4-42</u>			
<u>T/Sgt (Pd)</u>	<u>1-4-42</u>			

COURSES AND TRADE TESTS									
Trade	Grp.	%	PorF	Date Rem.	Trade	Grp.	%	PorF	Date Rem.
<u>WEM</u>	<u>B</u>	<u>33</u>	<u>Failed</u>	<u>5-2-40</u>					
<u>WEM</u>	<u>B</u>			<u>1-10-41</u>					
<u>WEM</u>	<u>A</u>			<u>1-1-42</u>					
<u>Wireless</u>				<u>1-8-42</u>					
<u>Mechanic</u>	<u>A</u>								

PARTICULARS OF FAMILY S X

Wife Maiden Name Present Address (in pencil)

Children	Names	Date of Birth	Place of Birth

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

Mrs. Sarah Howe (Mother)
90 Derbyshire Ave, Stretford, Manchester (EN9)

LEAVE			CHARACTER AND TRADE ASSM. HONOURS, AWARDS AND MENTIONS				
FROM	TO	AUTH. AND DESCRIPTION	DATE	CHARACTER	TRADE AND ASSM.	HONOURS AND AWARDS	SIGNATURE
<u>020 20/42</u>	<u>Issued</u>	<u>J.W.C 179709 d/29 Dec/42</u>	<u>31/12/41</u>	<u>Good</u>	<u>Superior</u>		<u>Star 7/C</u>
<u>1 Mar/43</u>	<u>14 Mar/43</u>	<u>52/43 Annual</u>	<u>22-5-42</u>	<u>Good</u>	<u>Supr.</u>		<u>Star 7/C</u>
<u>28 Apr/43</u>	<u>27 May/43</u>	<u>(4 days) Sick leave 95E100/43</u>					
			<u>5-2-46</u>	<u>OT</u>	<u>53</u>		

MOVEMENTS AND CASUALTIES							
AUTHORITY	UNIT FROM	UNIT TO	DATE	AUTHORITY	UNIT FROM	UNIT TO	DATE
<u>DRO 34 CASLEITE</u>	<u>Wireless-Elect</u>	<u>W. "6"</u>	<u>5-2-40</u>	<u>DRO 23</u>	<u>DRO 238</u>	<u>Cancelled</u>	<u>2+755</u>
	<u>Calgary</u>	<u>100 Ave</u>	<u>5-2-40</u>	<u>DRO 90</u>	<u>182</u>	<u>Cancelled</u>	<u>31-3-41</u>
	<u>Calgary</u>	<u>100 Ave</u>	<u>22-2-40</u>	<u>125</u>	<u>11015</u>	<u>49 SFTS</u>	<u>23-5-42</u>
<u>DRO 45</u>	<u>Calgary</u>	<u>100 Ave</u>	<u>10-10-40</u>				<u>will summarize P.E.</u>
<u>DRO 207</u>	<u>Calgary</u>	<u>100 Ave</u>	<u>12-10-40</u>	<u>DRO 172/42</u>	<u>On I.P. to #16RS</u>	<u>side</u>	<u>6-7-42</u>
<u>DRO 236</u>	<u>ENT TO FLYING PAY</u>	<u>9 DAYS</u>	<u>9-12-13-18</u>	<u>on I.O. returning to #95FTS</u>	<u>headquarters</u>		<u>10-7-42</u>
<u>" 239</u>	<u>ENT TO FLYING PAY</u>	<u>9 DAYS</u>	<u>10/140</u>	<u>DRO 207/42</u>	<u>Entitled to draw crew pay</u>		<u>1-9-42</u>
<u>" 247</u>	<u>ENT TO FLYING PAY</u>	<u>6 DAYS</u>		<u>DRO 232/42</u>	<u>ceased to draw crew pay</u>		<u>30-9-42</u>
<u>" 251</u>	<u>"</u>	<u>"</u>	<u>4 DAYS</u>	<u>DRO 290/42</u>	<u>Admitted to Station</u>	<u>Work</u>	<u>2 Dec/42</u>
<u>" 252</u>	<u>"</u>	<u>"</u>	<u>1 DAY</u>	<u>DRO 291/42</u>	<u>discharged Station</u>	<u>Work</u>	<u>6 Dec/42</u>
<u>" 264</u>	<u>"</u>	<u>"</u>	<u>1 DAY</u>				

DD029/43 On T.D. to Stratford. Out at 1230 hrs			
2 Feb/43 Returned at 1400 hrs 2 Feb/43			
DD052/43 Entitled to draw ration allowance			
from 1 Mar/43 to 14 Mar/43 (14 days)			
95F88/43 Entitled to draw flying pay for 2 Apr/43			
95F96/43 Admitted to hospital 20 Apr/43			
95F101/43 Disch from hospital 27 Apr/43			
95F111/43 F.D. to T.M. 7 May/43			
95F142/43 Returned from R.A. 7 May/43			
Reservate Cont. on 9 June/43			
95F172/43 ENT. TO DRAW FLYING PAY. FOR 21 JUNE/43			
95F192/43 Entitled to draw flying pay for 4 June 43			
75F227 951 (1 day)			
93F227/43 95F75 75F75 22 SEPT/43			

52/11/43
 R2230

Finger Printed
 Date 23-9-41
 Initials S.H.

IMPORTANT—Keep this acknowledgement.

DOMINION OF CANADA
SEVENTH VICTORY LOAN

This is to certify that..... R 50797 SGT. HOWE. E. J. #10 S.F.T.S.
(Number) (Rank) (Name) (Unit)

has purchased \$..... 50⁰⁰ Seventh Victory Loan 3% Bonds to be paid by six monthly pay assignments of \$..... 8.40 each for the months of November, 1944, to April, 1945, inclusive, and has directed that the bonds be delivered to

SGT. E. J. HOWE C/O CANADIAN BANK OF COMMERCE, DAUPHIN, MAN.
.....
(Enter either Department of Finance OR name and address of person or Bank to whom bonds are to be delivered)

after payment has been completed.

Date..... Oct 28 1944.

..... [Signature]
(Departmental Cashier)

Communicate by letter with Chief Clerk, Employee Instalment Purchase Plan, Department of Finance, Ottawa, if it is necessary to alter the delivery instructions or to make inquiries regarding your bonds. The Department of Finance will hold bonds in safekeeping during term of service, or they may be delivered to another person or Bank, as the applicant shall direct.

In the event of the purchaser being discharged from the Service before payment is completed, he can make the balance of his payments direct to the Department of Finance, Ottawa, Canada.

If the purchaser dies before payment is completed, the amount standing to his credit in the Purchase Account will be transferred to the credit of his Service Pay account.

In the event of death, bonds held for the account of any member of the Services will be delivered to the Administrator of Estates.



**ROYAL CANADIAN AIR FORCE
PERSONNEL COUNSELLING REPORT**

R.C.A.F. R.307 (Revised)
100 M 6-45
H.Q. 885-R-307.

2

1. Surname (block letters) HOWE		First Name Ernest		Initials J.	Rank SGT	Number R50797	
2. Date of Commencement of Active Service 5.2.40		3. Date of Birth 19.2.12		4. Single X	Married	Widow(er)	Divorced
5. Children's Ages		6. Other Dependents and their relationship					
7. EDUCATION (a) Last public or high school grade completed		(b) Province England - Equiv.	(c) Type of school course	Matric.	Commer.	Vocational	Technical
(d) Last university year completed (if applic.) T Grade 11.		(e) University course			(f) University attended General.		
(g) Degree or diploma received (with date)				(h) Last year of formal education, e.g., 1939.			
8. Other courses of study prior to enlistment Commercial Radio Operating (Radio Coll. Can. Toronto)							
9. (a) Last Employer prior to enlistment Not working prior to enlistment				(b) Nature of Business			
(c) Address				Nature of Duties			
				Length of Employment			
				10. Will you return to this employer?			
				Yes		No	
				Undecided		N.A.	
11. Other Civilian Employment Varied (in Canada) Some selling experience - stocks, bonds, cars - 5 years. Some Radio Pervicing Experience - 2 years. Shipping Clerk - 2 year (England.)							
12. Special Qualifications, Hobbies, Languages, etc. XXXXX Extensive Radio Knowledge - Moderate French.							
13. R.C.A.F. TRAINING AND EMPLOYMENT HISTORY (a) R.C.A.F. Trade(s) Wireless Mechanic		(b) Trade Group(s) A	(c) Time spent in trade(s) since training began 5 yrs. 8 mos.	14. Physical Limitations (if any) NONE.			
15. Special Courses, Responsibilities, or Experience in R.C.A.F. trade 3 years Instructor. Several Courses completed, including 18 weeks advanced/(Summer 45 - Clinton, Ontario) Electronics.							
16. Test Scores		C.T. 53	M.K.T.	Cl.A.T.	17. Type		
18. Interpretation of Type (Sect.17)							
19. CAREER CHOSEN BY INDIVIDUAL		Sales					
21. TRAINING FOR CAREER							
(a) Courses to be taken in service							
(b) Courses to be taken after discharge							
(c) Already trained				(d) Undecided or other			
22. (a) Prospective Employer (c) Address N.A.				(b) Nature of Business			
				23. Intended place of residence after discharge Central - Y.M.C.A. Drummond St., Montreal, P.Q.			
24. INTENDED USE OF REHABILITATION BENEFITS		(c) Purchase of farm →					
(a) Vocational Training (give type and place)		(d) Loan on farm already owned →					
(b) University Training (give course and univ.)		(e) Small holding with other employment →					
		(f) Small holding and fishing →					
		(g) Re-establishment Credit →					
25. (a) Present Unit 2 R.C., Lachine, P.Q.		(b) Date counselled 2.10.45		26. (a) Posted to		(b) Reporting date	

E. A. Barker
7/5

Counsellor's signature

IF DISCHARGE IS REPATRIATED PRISONER OF WAR MARK "POW"	IN HOSPITAL
---	-------------

CONFIDENTIAL

ATTENTION EMPLOYMENT

1. SURNAME HOWE	FIRST NAME Ernest	INITIALS J.	RANK T/Sgt.	NUMBER R50797	SEX Male	
2. DATE OF COMMENCEMENT OF ACTIVE SERVICE:- 15th Feb., 1940			PLACE Calgary Alta.	YR. OF BIRTH 1912		
3. SERVICE OUTSIDE CANADA:-		YES	NO	IN WHAT SERVICE ?		
			X	N.A.		
4. CAUSE OF DISCHARGE:- K.R.(Air) 195(17) On completion of a term of voluntary service during an emergency.						

5. PRE-ENLISTMENT EDUCATION:-

**1928 - Grade XI (equivalent) in England - general academic education, age 15.
1939 - Commercial Radio Operating - Radio College of Canada, Toronto, Ont.
Extensive Radio Knowledge.**

6. LANGUAGES:-

Moderate French.

7. OCCUPATIONAL HISTORY:-

In England - Shipping Clerk - 2 years.**In Canada - Sales - Stocks, Bonds, Cars, - 5 years.
Radio servicing - limited as a hobby - 2 years.**8. IMMEDIATE
PRE-ENLISTMENT EMPLOYMENT:-
(WITH NAME AND ADDRESS OF EMPLOYER)**N.A.**

9. SHORT ACCOUNT OF SERVICE, TRAINING AND DUTIES:-

Enlisted Feb., 1940. Served throughout as a Wireless Mechanic, attaining max. grouping by Jan., 1942. Received normal promotions to rank of Sergeant by April by April, 1942. Served 3 years as an Instructor, 2 years in servicing and maintenance. Extensively experienced in Airborne and Ground wireless equipment. Service in Canada.

Transferred to Reserve Class "E".

10. EDUCATIONAL COURSES WHILE IN SERVICE:-

Nil.

11. MEDICAL OFFICER'S STATEMENT OF PHYSICAL LIMITATIONS (IF ANY):-

Fit.

12. MARITAL STATUS:-

Single

NUMBER OF DEPENDENTS, OTHER THAN WIFE

Nil.

13. DISCHARGEES OWN STATEMENT OF FUTURE PLANS (IF ANY):-

Undecided. Is interested to obtain suitable employment in Montreal Area.

14. POST-DISCHARGE MAILING ADDRESS:-

Central Y.M.C.A., Drummond St., Montreal, P.Q.

15. BASIS FOR COUNSELLOR'S RECOMMENDATIONS:-

Age 32, single, no dependents. Education in England, completing equivalent grade XI at age 15. Is considered to have above average learning ability. Has considerable knowledge of Radio. Speaks moderate French.

Has had varied occupations in clerking and sales work and in radio; the latter mainly as a hobby.

Served in the R.C.A.F. as a Radio Mechanic. Fully qualified. Extensive period as an Instructor in this followed by considerable experience in servicing and maintenance of both ground and airborne equipment. No overseas service.

Desires to seek suitable employment. Seems confident, responsible and sincere and feels he has no particular problem at present.

16. ACTION RECOMMENDED:-

Employment in clerical and sales work relating to Radio, etc.

17. OTHER POSSIBILITIES SUGGESTED BY COUNSELLOR:-

18. REFERRED TO:-

D.V.A. and N.E.S. - Montreal, P.Q.

19.

PLACE

DATE

No. 2 R.C., Lachine, P.Q. 2-10-45

SIGNATURE OF COUNSELLOR

E.A. Barker

RANK OR APPOINTMENT

(.E.A. Barker) F/O

FIB

NOTE:- COUNSELLOR WILL CHECK TO SEE THAT THIS FORM HAS BEEN COMPLETED AS REQUIRED.

Brought forward

No. 7 S.F.T.S.
MacLeod, Alta.

2-6-44

A/FS

W.O.A.S. used improper language to
R174566 IAC McLean D.A. at approx.
1300 hrs 2-6-44.
(Sec: 40 A.F.A.)

R174566 IAC Reduced to the rank
McLean D.A. of sergeant.
R57952 Sgt
Keith G.M.
R74820 Sgt
Hooseman H.P.

19-6-44

C.F. Newcombe W/C

21/June/44
.....F/L

ROYAL CANADIAN AIR FORCE

GENERAL CONDUCT SHEET

OFFICIAL No. 50797 NAME AND INITIALS HOWE E.J. DATE OF ENLISTMENT 5-24-40.
(IN BLOCK LETTERS)

SHEET No. One SIGNATURE AND RANK OF C.O. [Signature] DATE 8-2-40.
(IN WORDS) for (M.M. Sisley.) Sqn. Ldr.

UNIT AND PLACE	Date of Offence	Rank	Cases of Drunkenness (in red)	OFFENCE	Names of Witnesses	Punishment awarded	Date of award or of order dispensing with trial	By whom awarded	Initials and Rank of Officer making entry and Remarks, with Date
Montreal, Quebec	9-3-41	LAC	1	W.O.P.S. is charged with "Drunkenness" in that he at Montreal, at approximately 2.30 hrs 9-3-41 was found drunk. Section 19 A.F.A.	Sgt. Birchall Sgt. O'Neill	Admonished	11-3-41	S/L. S.A. Ferris	[Signature] 11-3-41
#1 W/S Montreal, P.Q.	29-4-42	A/Sgt.		CONDUCT TO THE PREJUDICE OF GOOD ORDER AND AIR FORCE DISCIPLINE, in that he conducted himself in a manner unbecoming to a Senior N.C.O. See 40 AFA	Cpl. Buist Cpl. Fraser	SEVERE REPRIMAND	29-4-1942	(R.M. SMITH) WING COMMANDER Commanding #1 W/S, Montreal.	[Signature]
No. 9 SFTS., Centralia, Ont.	30/Jul/43	Sgt.		CONDUCT TO THE PREJUDICE OF GOOD ORDER AND AIR FORCE DISCIPLINE: in that he did use improper language over the telephone.	S/O Macleod	Reprimanded	30/Jul/43	(E.T. Webster) W.C.	[Signature] A 2/aug/42
				To be carried over					

AIR FORCE No.

R 507970

Haave

SURNAME

Ernest James

FULL CHRISTIAN NAME

ENLISTMENT/APPOINTMENT

PLACE Calgary Alta

DATE 15 February 40

RELIGION

Anglican

R.C.A.F. FORM R230

163

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		
T.W.#	C 179709	2	1/29/42			#1 W.S.		#1 W.S.				Kam Hospital	2/12/42	DRO 280	
1-3-43	14-3-43	14	Annual	DRO 50		Toronto		Montreal		22 2 40	DRO 45	Ais. Hospital	6/12/42	DRO 291	
28-4-43	2/5/43	4	Sick Leave									Kam Hospital	20/4/43	DRO 96	
20-12-43	5-1-44	5	New Year's	DRO 298		SOS #1 W.S.		#9 S.F.T.S.		23 5 42	DRO 125	Ais. Hospital	27/4/43	DRO 101	
13-3-44	26-3-44	14	Annual	DRO 59		J.D. to #1 O.R.		Summer				Kam Hospital		DRO 136	
11-9-44	24-9-44	14	Annual	DRO 219						6 7 42	DRO 172	3/6/44. Discharged			
25-9-44	27-9-44	3	Trav. Time	DRO 219								Ent. to Rehab. Dept.			
Apr 24	Warrant # 6547861		1/14-12-44	DRO 308								Clothing Allowance		DRO 227	
14-9-45	16-9-45	7	Annual	204A											
17-9-45	16 Oct	30	Special	204A											
10-10-45	29-10-45	20	Commuted	DRO 237											
					SERVICE MACHINES FLOWN										
					CHARACTER AND TRADE ASSESSMENT										
					DATE	CHARACTER	TRADE ASSESSMENT								
						C.T.	53								
					DATE	CHARACTER	TRADE ASSESSMENT	SOS	TOS	FROM	TO	DATE	AUTHORITY	CASUALTY AND DATE	AUTHORITY
								10 S.F.T.S.	2 T.S.U.	Dauphin	Penhold	12 4 45	DRO 86/45		
								10 S.F.T.S.	2 T.S.U.	Dauphin	Penhold	13 4 45	DRO 99		
								2 T.S.U.	2 R.C.			31 8 45	204A		
								T.O.S.				1 9 45	DRO 238		
								S.O.S.	on discharge under (R.P. (ai) 195 (17))	and transferred to	Reserve Class 'E' list	9 10 45	DRO 237		
HONOURS, AWARDS AND MENTIONS															
DATE	AWARD	AUTHORITY													
15 1 44	C.V.S. Medal	DRO 13A													

