R53901
MAVILLE
JOHN ALLAN

CONFIDENTIAL Lumberjack - Passenger Rating R5-3901. H AC2

3.

R.C.A.F. M.2
50M—12-39 (3211)
H.Q. 1062-10-2

ROYAL CANADIAN AIR FORCE

Medical Board held at Ottawa *Date* Apr. 23/40

FILE NUMBER 1022-M-152

Surname MAVILLE *Chr. Names* JOHN ALLAN
Nature of Commission ~~Commission~~ air *Date of Birth* 17/3/18 *Married or Single* Single
Branch R.C.A.F. *Hours Flown* Nil.
Address Dalhousie Station Que.

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 at age.
(iv) STOMACH or BOWEL TROUBLE ..... No
Chronic Indigestion or Pain after Food ..... No
(v) KIDNEY or BLADDER TROUBLE ..... No
Syphilis or Gonorrhœa ..... Gonorrhoea 1939. (Treated)
(vi) TROPICAL DISEASE ..... No
Malaria ..... No
Dysentery ..... No
(vii) EYE TROUBLE or Inflammation of Eyelids ..... No
Wearing of Glasses ..... Wore glasses for reading
Colour or Night Blindness ..... No } while at school.
(viii) EAR TROUBLE, Earache or Discharge from Ears ..... No
Deafness, Noises in the Ears, or Dizziness ..... No
Frequent Colds in Head, Catarrh or Obstruction ..... No
Prolonged Hoarseness or Loss of Voice ..... No
Sea, Car or Train Sickness ..... No
Discomfort on Swings, Roundabouts, Switchbacks ..... No
(ix) OPERATIONS ..... No
(x) Any Illness or Injury not mentioned above
Fractures of both forearms in childhood - no disability.

Education Normal school. & Senior Matriculation
Present Occupation Farming *Hobbies* Mechanics
Previous Service Nil
Athletics Soft Ball
Habits—Smoking No *Alcohol* Occasional Beer
FAMILY HISTORY—Consumption ..... No
Nervous Ailments, Mental Trouble, or "Fits" ..... No
Father Alive—Health Good *Dead—Cause*
Mother Alive—Health Good *Dead—Cause*
Brothers (3) Alive—Health Good (1) *Dead—Cause* Killed train accident
Sisters (2) Alive—Health Good (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 23/4/40 *Signature* John Maville *Witness* W. J. Howard Capt R.C.A.M.C.

GENERAL MEDICAL AND SURGICAL EXAMINATION

Impression given by *(a)* Physique Good *(b)* Mentality Favourable
Body Marks, Scars, Deformities Birth mark centre of back between shoulders
Size of Thyroid Gland normal
Surgical Abnormalities Nil
Results of Wounds, Injuries, Operations Satisfactory

	Date 23/4/40 Assessing Room	Date Assessing Room	Date Assessing Room	Remarks on any Abnormalities Found
Height (ins.)	74			
Weight (lbs.)	170			Date
Chest Circumference (ins.)	36-39½			
Body Build (lbs.)	+6			
Leg Length (ins.)	NA			
Pulse Rate — Sitting	72			
Pulse Rate — Standing 1st	96			
Pulse Rate — Standing 2nd	84			
Pulse Rate — After Exercise	102			
Pulse Rate — Time to Normal	30			
Arterial Walls	soft			
Blood Pressure — Systolic	128			
Blood Pressure — Diastolic	86			
Heart — Size	N			
Heart — Sounds	N			
Heart — Rhythm	Reg.			
Lungs	clear			
Breath held	N/A			
Expiratory Force				
Vital Capacity (Best of 5)				
				Date
Reflexes — Knee	N N			
Reflexes — Ankle	N N			
Reflexes — Triceps	N N			
Reflexes — Abdominal	N N			
Reflexes — Plantar	↓ ↓			
Cranial Nerves	N			
	R. L.	R. L.	R. L.	R. L.	R. L.	R. L.
Balancing Rod	NA			
	R. L.	R. L.	R. L.	R. L.	R. L.	R. L.
Self Balancing	NA.			
Tremors — Fingers	NIL			
Tremors — Eyelids	NIL			Date
Abdomen — Liver	N			
Abdomen — Spleen	N			
Abdomen — Muscular Tone	Good			
Urine — Albumen	Neg			
Urine — Sugar	Neg			
Initials of M.O.	W.J.H			

40 mm. Hg. Test

Date 23/4/40	32 secs.	6/666/766
Date	47 "	6/676/787/887
Date	54 "	6/777/688/788/8
Date		

Remarks by Consultant.

Well developed, good physique
Satisfactory.

cat A3 B. W. J. Howard
Capt RCAMC

EYE EXAMINATION

History: Wore glasses at school

Visual Acuity: R. 20/30+, c̄ +2.25 = 20/Bler; L. 20/20−, c̄ +2.25 = 20/Bler } c̄ desire 20/20

Colour Vision: normal

Red, Green

Diaphragm Test (P.D. = ...)

Convergence: C. N = ... cms.; S. C. = ... A., ... cms.

Accommodation: R. ..... L. .....

Cover Test

Fundi and Media: normal

Fields: wide

Remarks:

Initials of M.O. L.J.H.	Initials of M.O.	Initials of M.O.
Date 23/4/40	Date	Date

EXAMINATION OF EAR, NOSE AND THROAT

History: nil

Hearing	R. Ear	W.U. 20'	
	L. Ear	W.U. 20'	
External Ear, Meatus Membranes	R. Ear	clear intact	
	L. Ear	clear intact	
Middle Ear, Eustachian Tubes	R. Ear	Patent	
	L. Ear	Patent	
Cochlear Apparatus	R. Ear		
	L. Ear		
Vestibular Apparatus	R. Ear		
	L. Ear		
Buccal Cavity		Healthy	
Teeth		Satisfactory	
Gums		Healthy	
Pharynx		Healthy	
Nasopharynx		Satisfactory	
Nose		moderate deviation to right airway appears adequate	
Larynx		clear	
Remarks:		Initials of M.O. L.J.H.	Initials of M.O. / Initials of M.O.
		Date 23/4/40	Date / Date

HISTORY OF PRESENT CONDITION

Date 31. 5. 40

Re - examination
A 3 B. J R Monement
Capt RCAMC

C S Demers Lieut RCAMC

OBSERVATIONS AND FINDINGS BY PRESIDENT OF BOARD

Date

CATEGORY
APPROVED
A 3 B.
MAY 24 1940
F B Lucas
Capt for D. G. M. S.

SPECIAL RESERVE J.A.T.P. - CANADA

AIR FORCE No. R53901 POSTED TO R.C.A.F. Station, Ottawa, Ont. TRADE AIRCREWMAN Standard

ROYAL CANADIAN AIR FORCE

N/O 22-M-1352 JUN -1 1940

(ATTESTATION PAPER)

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

1. Surname MAVILLE Full Christian Names John ALLAN
2. Present Address Dalhousie Sta. Quebec Telephone Lac. 3922
3. Permanent Address Same
4. Place of Birth 16-5 Lancaster Twp., Ontario Citizenship Canadian
5. Date of Birth March 17, 1918 Married, Single, Widower, Separated, Divorced Single
6. Particulars of Children N. A.

Name	Date of birth	Name	Date of birth
	None		

7. Occupation Farmer 8. Religion Roman Catholic (State denomination)
9. Languages English; Some French, not fluently. (State proficiency)
10. Next of Kin (Full Name) Isabella Maville Relationship Mother
    " Address Dalhousie Sta. Que.
11. Father (Full Name) Roderick Maville Birthplace Alexandria, Ont.
    " Address Dalhousie Sta., Que. Citizenship Canadian
    " Occupation Farmer
12. Mother (Full Maiden Name) Isabella McDonald Birthplace 16-5 Lancaster, Ontario
    " Address Dalhousie Sta., Que. Citizenship Canadian
13. Details of any Naval, Military or Air Force Service:

Unit	Place	Rank	Trade	Date From	Date To	Reason for discharge
	Not applicable					

14. Honours, Awards, Mentions N. A
15. Are you now on any Naval, Military or Air Force Reserve? No
16. Have you previously made application to join the R.C.A.F.? No If so, where? —
    When? — Result —
17. Were you ever discharged from any branch of His Majesty's Forces as Medically Unfit? No
    If so, state nature of disability —
18. Have you ever been or are you now in receipt of a Disability Pension? No
    If so, state nature of Disability —
19. Have you ever been convicted of an indictable offence? No If so, state nature —
20. Are you in debt? No If so, state particulars —

R.C.A.F. Records Office
Rec'd JUN 12 1940
D. K. C. I. B.
R. C. N. I.
S. L. P. A.

R.C.A.F. Form R. 100
100M—2-40 (3924)
H.Q. 1062-3-83

21. Particulars of Education:

—	Name of school	Date From	Date To	Courses—Subjects, etc.
Primary Education—Public or Separate School	S.S. No 7 Lancaster Ont.	1924	1929	
High School—Collegiate Institute, etc.	Maryvale Abbey, Glen Nevis	1931	1935	Senior Matriculation
Technical School				
University or School other than above	Ottawa Normal School	1936	37	
Correspondence Courses, etc. —				

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

Employer and place	Duties, trades, positions	Date From	Date To	Reason for leaving
R. Maville Lot 16 - 5th Concession Lancaster Ont.	Farming	1937	Still Employed.	

23. Flying Experience (in Hours) Solo N.A. Dual N.A. Passenger N.A.

24. Special Qualifications, Hobbies, etc., useful to the R.C.A.F. N.A.

25. Sports engaged in. State: extensively, moderately, occasionally Occassionally in softball, badminton.

26. Air Force Duty you wish to enlist for ~~Ground Duties.~~ Flying Duties. Flying Duties.

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

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

Name	Address	Occupation
Rev. D. R. McDonald	Dalhousie Sta Que. R.R. No 1.	Pastor.
Mrs. Elizabeth Corbett	230 Daly Ave. Ottawa	Civil Servant.
Mr. J. A. McDonell	Dalhousie Sta., Que.	Insurance Agent & Farmer
Dr. J. Y. Baker	" " " R.R. #2.	Medical Doctor.

28. Other information that may have any bearing on this application None.

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

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

Date April 18, 1940 Signature John Maville

FOR OFFICIAL USE ONLY

(A) *Report of Interviewing Officer—*

Type.....General appearance.....

Suitability for (state in what capacity).....

Date.....Signature.....Rank.....

(B) *Report of Trade Test—*

Trade in which tested.....

Result.....

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

.....

Date.....Signature.....Rank.....

(C) **DECLARATION MADE BY MAN ON ATTESTATION**

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

Date May 31, 19 40. John Maville
Signature of Recruit

(D) **OATH TAKEN BY MAN ON ATTESTATION**

I, John Allan Maville do sincerely promise and swear (or solemnly declare) that I will be faithful and bear true allegiance to His Majesty.

Date May 31 19 40. John Maville
Signature of Recruit

(E) **CERTIFICATE OF ATTESTING OFFICER**

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

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

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

at Ottawa, Ont. this 31 day of May 19 40.

R H Cowan (R.H. Cowan) — Signature of Officer
Flying Officer, — Rank
R.C.A.F. Recruiting Centre, Ottawa, Ont. — Unit

FOR OFFICIAL USE ONLY

CERTIFICATE OF MEDICAL EXAMINATION

Part 1. Information obtained from the applicant—

1. Age. 22 2. Have you ever suffered from any of the following defects in health?

(a) Rheumatism ..... no
(b) Tuberculosis ..... no
(c) Bronchitis or Asthma ..... no
(d) Heart Disease ..... no
(e) Kidney or Bladder Disease ..... no
(f) Gastro-intestinal ..... no
(g) Rupture ..... no
(h) Varicose Veins ..... no
(i) Flat or Deformed Feet ..... no
(j) Nasal Trouble ..... no
(k) Ear Disease ..... no
(l) Eye Disease ..... no
(m) Epilepsy ..... no
(n) Nervous or Mental Disease ..... no
(o) Syphilis ..... no
(p) Gonorrhoea ..... G. C. 1939 treated
(q) Bone Fracture ..... ~~Foot~~ Fracture leg, pneumonia in childhood
(r) Other Disease or Defect ..... no

3. Have you ever worn glasses? ..... no

John E Manville
Signature of Applicant

Examiner's Remarks *re* above ..... (p) G.C. - 1939 - Treated.
(Q)

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

1. Identification marks or scars (if operative obtain history) ..... Birth mark on back between shoulders.

2. Height ..... 6 ..... feet ..... 2 ..... inches.
3. Weight ..... 170. ..... pounds.
4. Complexion ..... Fair
5. Color of Eyes ..... Brown ..... Hair ..... Red-Brown.
6. Development { Good / ~~Fair~~ / ~~Poor~~ }
7. Chest Measurement—Full expiration ..... 39 ½ ..... inches
Range of expansion ..... 3 ½ ..... inches
8. Hearing—Right ..... W.V. 20' ..... Left ..... W.V. 20' ..... Tympana—Right ..... Normal ..... Left ..... Normal
9. Vision—Without glasses—Right ..... 20/35. ..... With glasses—Right X
Left ..... 20/25. ..... Left X
10. Condition of mouth and teeth ..... Dental Counts ..... Satisfactory.
11. Urine—Albumen ..... Negative ..... Sugar ..... Negative
12. Abnormalities (Congenital and Pathological) found on Examination
None

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

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

Date ..... May 31st 19 40

J R Smallwood
Capt R C A M C
President

Chas Allen
Lieut R C A M C
Member

Member

R005390 1 MAVILLE JOHN A SGT 4

1 NUMBER NAME 29 RANK

SERVICE AWARD CARD

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

39-45 STAR	ATL. STAR	A/C EUR STAR	AFRICA STAR	PACIFIC STAR	BURMA STAR	ITALY STAR	FR. AND GER. STAR	DEFENCE MEDAL	~~GEN. SER.~~ WAR MEDAL	C.V.S.M.					AWARD
✓									✓	✓					AWARD AND CLASP
										✓					APPLICATION DISPATCHED
															RIBBON ISSUED
														16 # 7 46	MEDAL ISSUED

155366

PREFIX NUMBER NAME RANK CODE

IBM 83961

LICENSED FOR USE UNDER CANADIAN PATENT NUMBER 315306

Mrs. Isabella Maville (mother)
R.R. #1, Box 28,
Dalhousie Station,
P.Q.

Sept.-45.

596-8-2-50

MEMORIAL BAR
DATE DESP.
REGN. NO. 1232

10M—3-40 (4425)
H.Q. 1772-45-8

MINISTERIAL CARD | ROYAL MESSAGE | MEMORIAL CROSSES

M-S-W

E-F-A

H.Q. FILE NO. 2

NAME MAVILLE, John Allan

REGT'L NO. R53001

RANK Sgt. UNIT Overseas (Missing)

CABLE NO.	CABLE DATE	NATURE OF CASUALTY		CAS. LIST NO.	CAS. LIST DATE
		DATE OF DEATH ~~Missing since~~ 22-6-41	IS MOTHER LIVING? YES / IS WIFE LIVING? N.A.		
		MINISTERIAL CARD SENT: 4-7-41	ROYAL MESSAGE SENT: N.A.	MEMORIAL CROSSES SENT: 16-7-41	
		To mother.	To be sent from Overseas From Overseas 8-8-41.	To engraver 7-7-41. Mrs. R. Maville, (Mother) Dalhousie Station, Quebec.	
		MOTHER ~~Father~~: mrs. R. Maville, of Dalhousie Station, Quebec.			

The MUTUAL LIFE
Assurance Co. of Canada

To whom it may concern.

I have known the bearer, John Marille, during his lifetime, to be a competent reliable and sober young man.

J. A. Macdonell.

Dalhousie Station, N.B.
April 17th, 1940.

R.C.A.F. Special Reserve

Interview Report

~~Non-Flying List~~ ~~Administration~~
~~Technical~~
~~Equipment Accounts~~

Air Crew
~~Pilot~~
~~Observer~~
~~Wireless Op. Air.~~
Air Gunner

SURNAME: MAVILLE
CHRISTIAN NAMES IN FULL: JOHN ALLAN

Age 22
Height 6-2
Weight 180
~~Married or~~ Single
~~No. of Children~~

ACADEMIC STANDING:

Senior Matriculation - Glen Norris High School
(R. C. S. S. 10 Lancaster.)

FLYING HISTORY (PARTICULARLY DURING LAST YEAR)

Nil

EXPERIENCE AND TRAINING (INCLUDING MILITARY) USEFUL IN THE R.C.A.F.

Nil

SPORTS:
EXTENSIVELY:
MODERATELY: Soft ball, badminton
OCCASIONALLY:

HOBBIES:
Interest in Motors & Farm Machinery

APPEARANCE: HEALTHY-~~RUGGED~~-SLENDER
TALL-~~MEDIUM~~-~~SHORT~~
~~REFINED~~-ORDINARY-~~COARSE~~
CLEAN - ~~UNTIDY~~-~~DIRTY~~

DRESS: ~~FASHIONABLE~~-CONSERVATIVE
~~POORLY DRESSED~~ BUT CLEAN AND NEAT-~~SMART~~-~~UNTIDY~~-~~CARELESS~~

INTELLIGENCE: QUICK -~~DELIBERATE~~-~~SLOW~~
ORGANIZED-ACCURATE-~~RAMBLING~~

PERSONALITY: ~~DOMINEERING~~-CONFIDENT-
~~SUBMISSIVE~~-MATURE-
~~IMMATURE~~-PLEASANT-
~~MOROSE~~-BELIGERENT

SUITABLE IN ALL RESPECTS FOR SERVICE IN R.C.A.F..Yes.YES_____ NO_____

FULLY QUALIFIED IN PERSONAL RESPECTS FOR COMMISSIONED RANK...YES___ NO____

INFORMATION ELUCIDATED FROM INVESTIGATION IN ACCORDANCE WITH A.F.M. 6/1 Para.1(b)

SUMMARY OF ALL OF THE ABOVE:

Good education and out door life. Recommended for Air Gunner.

~~EXCELLENT~~
ABOVE AVERAGE
~~AVERAGE~~
~~BELOW AVERAGE~~
(Strike out words not applicable)

RECOMMENDED FOR:

Air Gunner

R.C.A.F Records Offi
Rec'd JUN 12 1940
O. K. ..... C.I.B. .....
R. C. ..... N. I. .....
S. L. ..... P. A. .....

DATE: April 10, 1940. RECRUITING CENTRE: Ottawa.

SIGNATURE OF OFFICER:
(R. H. Cowan, F. O.

A.F.M.5

SPECIAL RESERVE

AIR FORCE NO. R53901 NAME OF AIRMAN MAVILLE, John Allan

EVIDENCE OF BIRTH

DESCRIPTION OF DOCUMENT Certificate of Baptism

NUMBER N.A. DATE March 18, 1918.

ISSUING AUTHORITY Rev. D.R. Macdonald, Pastor.

SUBJECT - Self (full name) ~~Child (full name)~~ John Allan Maville

DATE OF BIRTH March 17, 1918.

PLACE OF BIRTH Glen Nevis, city, town, village, Ontario, province, country.

MOTHER (Full Maiden Name) Isabella McDonald,

FATHER (Full Name) Roderick Maville,

DATE April 26th, 1940.

CERTIFIED TRUE EXTRACT

R H Cowan

(R.H. Cowan) Flying Officer,
Commanding Officer,
R.C.A.F. Recruiting Centre,
38 Rideau St., Ottawa, Ont.

(Signature & rank)

Strike out words not applicable.

R.C.A.F. Records Office
Rec'd JUN 12 1940
D. K. ..... C.I.S. .....
R. C. ..... N. I. .....
S. L. ..... P. A. .....

A.F.M. No.10

SPECIAL RESERVE

AIR FORCE NO. R53901 NAME OF AIRMAN John Maville.

EVIDENCE OF EDUCATION

DESCRIPTION OF DOCUMENT Lower, Middle & Upper School Certificates.

NO. N.A. DATE 1930, 32, 33, 34, 35.

ISSUING AUTHORITY J. P. Cowles, Registrar.

COURSES TAKEN Lower, Middle & Upper school subjects.

DIPLOMAS, DEGREES OBTAINED 7 Lower, Middle & Upper School Certificates.

DATE April 26, 1940.

CERTIFIED TRUE EXTRACT

(R.H. Cowan) Flying Officer,
Commanding Officer,
R.C.A.F. Recruiting Centre,
38 Rideau St., Ottawa, Ont.
(Signature & Rank)

A.F.M. No.11

R.C.A.F Records Office
Rec'd JUN 12 1940
O. K. JMB C.I.B.
R. C. JMH N. I. GG
S. L. P. A.

St. Margaret's House

Glen Nevis, Ont.

R.M.R. Dalhousie Station, Que.

April 16, 1940.

To Whom it may concern:-

This is to certify that, as Pastor of this Parish, I have known John Maville from childhood to the present time, and that he has always been a very respectable young man and of excell character.

Signed,

D. R. Macdonald

Pastor

ST. MARGARET'S CHURCH
GLEN NEVIS, ONT.

The instructions regarding this form are contained in Chapter XIII, A.P. 1301 (War Manual Part II) **R.A.F. Form 1580.**

ROYAL/ CANADIAN AIR FORCE.

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

Official No. CAN/R.53901 Name MAVILLE, John Allan, Rank T/Sgt(Pd)
(In full in block capitals, surname first). (Or acting appointment).

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

Date of Birth 17.3.18 Religion R.C. Occupation in Civil Life Farmer

Last Enlisted 31 May 1940 Current Engagement D of War

If a member of the Auxiliary Air Force xxxx

Section 4.—Character and Trade Proficiency.

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

Rank.	Character.	Trade Classification.	Proficiency. A	Proficiency. B	Proficiency. C	Whether specially recommended, recommended, or not recommended for promotion or reclassification.	Date.	Signature and Rank of Commanding Officer.
Sgt	Good	Air Gunner "Std"	Sat				31.12.40	
Sgt	V.G	Air Gunner	Sat	—	—	Rec	22.6.41	[illegible] W/Cdr.

R.A.F. FORM 1394

ROYAL AIR FORCE

The corner of this Certificate to be cut off if the man is discharged with a "bad" character, or with disgrace, or if specially directed by the Air Council.

Brief Statement of Service and Certificate of Discharge of

Surname MAVILLE Official No. Can/R.53901

Christian names JOHN ALLAN

Date of current enlistment 31 May 1940 Terms of enlistment D.of P.R.

Rank on Discharge or ~~Transfer to Reserve~~ Sergeant

(*a*) Branch of Air Force in which enlisted ----

(*b*) Date of mobilisation or embodiment n/a

(*c*) Date of Discharge or ~~Transfer to Class~~ Reserve 22.6.41.

Cause of Discharge or Transfer to Reserve Killed as the result of a Flying Battle casualty.

(*d*) General character during service V.G.

R.A.F. Trade Air Gunner.

(*e*) Degree of trade proficiency :—A(i) ---- A(ii) Sat.

B ---- C ----

Special qualifications held Nil.

(*f*) Medals, Clasps, Decorations, Mentions in Despatches, Special commendations, etc. Nil.

DESCRIPTION OF ABOVE-NAMED AIRMAN/AIRWOMAN ON DISCHARGE OR TRANSFER.

Date of birth ~~XXXXXX~~ 17.3.18.

Height 6 ft. 2 ins.

Complexion Fair

Colour of Eyes Blue

Colour of Hair Red/Brown

Marks or Scars Birth mark - back - between shoulders.

Airman's or Airwoman's Signature ----

BRIEF STATEMENT OF TRADE QUALIFICATIONS, CHARACTER AND GENERAL CONDUCT.

Airman's work as air gunner has been satisfactory. Character very good.

ADJUTANT No. 207 SQUADRON 10 JUL 1941

Unit Date Stamp

(Signed) (Sgd) K. Purdon Lewis W/Cdr.

Commanding 207 Squadron. Royal Air Force.

Name of signatory K.P. LEWIS. (IN BLOCK CAPITALS)

Attention is directed to Notes (a) to (f) on reverse.

Special Reserve

J.A.T.P.-CANADA

ROYAL CANADIAN AIR FORCE

CERTIFICATE OF THE SERVICE AND DISCHARGE OF

The corner of this Certificate to be cut off if the man is discharged with a "Bad" Character or with disgrace, or if specially directed by N.D.H.Q.

NAME (in full, Surname first) Maville, John Allan OFFICIAL No. CAN. R 53901

(1) DATE OF BIRTH 17" 3" 18 AGE ON ENTRY INTO R.C.A.F. 22 years 76 days.

PLACE OF BIRTH (Parish) Glen Nevis (Town or County) Ontario

OCCUPATION IN CIVIL LIFE Farmer

TRADE IN ROYAL CANADIAN AIR FORCE Std. Aircrew

RELIGIOUS DENOMINATION Roman Catholic

SIGNATURE ON TRANSFER TO THE RESERVE OR DISCHARGE

(2) CURRENT ENGAGEMENT IN R.C.A.F.:—

(a) State whether in Perm. or A.A.A.F.

R.C.A.F. Special Reserve

(b) Period

Date current engagement commenced	Age at that date	Terms of Enlistment
31" 5" 40	22	Duration of war.

(c) Date of actual entry into 31" 5" 40 ~~years Perm.~~ Special Reserve R.C.A.F. Service ~~years A.A.A. Force Service~~

(d) Period re-engaged for

(3) PRIOR ENGAGEMENT IN H.M. FORCES

Service (Navy, Army, R.A.F., C.A.F., A.A.A.F. or R.C.A.F.)	Period From	Period To	Rank on Discharge

(4) NAME, ADDRESS and RELATIONSHIP of person to be informed of casualties (to be entered in pencil).

Mrs. Isabella Maville, Dalhousie Stn., Quebec (Mother)

PARTICULARS AS TO MARRIAGE

(5) Full Christian Names and Surname of Woman and whether Spinster or Widow	Place and Date of Marriage	Present Address of Wife	No. and Date of C.F. Promulgating	Initials of Officer verifying entry

(6) DESCRIPTION OF PERSON	Height Feet	Height Inches	Chest Inches	Colour of Hair	Colour of Eyes	Colour of Complexion	Marks, Wounds or Scars
On entry as a boy							
On mustering as a man at age of 18 years Or on entry at 18 years or over	6	2	39½	Red Brown	Blue	Fair	Birth mark back behind shoulders.
On extension of service							
On re-engagement							

Further description if necessary

DISCHARGE PARTICULARS:—

Date Address on Discharge

Total Service { towards engagement (years) (days) / towards pension (years) (days)

R.C.A.F. R. 44a

15M—4-40 (4783)
H.Q. 1062-3-58

(8) MOVEMENTS AND CASUALTIES

Departure Authority	Unit FROM which	Unit TO which	Date of effect	Arrival Authority confirming
H.132	Enlisted	S.R. at Ottawa, Ont.		and
	Posted to	O.A.S.	31" 5" 40	
H.134	O.A.S.	S.A.C. O.A.S.	3" 6" 40	
112(ac) 199	Halifax	112(ac) Sqn High Pool	DEP: 27-8-40 REP: 6-9-40	
O'seas Pool 3/40	112 Sqn	R.C.A.F. Pool	11 - 12 - 40	
O'seas Pool 18/41	Ad. Hr. Mary	Hosp. Halton	17 - 1 - 41	
O'seas Pool 31/41	Hosp. Hr. Mary	Hosp. Halton	30 - 1 - 41	
O'seas Pool 35/41	R.C.A.F. Pool	110 Sqn	14 - 2 - 41	110 Sqn 44/41
400 Sqn 6/41	S.O.S. #400 Sqn	R.C.A.F		
	on posting #225	Sqn R.A.F.	3 - 3 - 41	
	Canada	UK		
		225 Sqd 207 –	18-4-41	87/41
	KILLED	22-6-41	DCL 664A	

MOVEMENTS AND CASUALTIES

Departure Authority	Unit FROM which	Unit TO which	Date of effect	Arrival Authority confirming

(9) PROMOTIONS, REDUCTIONS, REMUSTERINGS

Authority	Description	Date of effect
H.132	Aircrew "Std"	31" 5" 40
H.132	AC.2.	31" 5" 40
112(ac) 273	Airgunner (Stn)	23 " 6 " 40
112(ac) 273	Sgt. (Temp)(Paid)	7 " 8 " 40

(10)

(11)

Arrival Authority confirming

INGS

effect

" 40
40
40
40

(10) CHARACTER AND TRADE PROFICIENCY

Rank	Character	Trade Classification	Degree of Proficiency in Rank and Trade	Date	Signature and Rank of Commanding Officer
Sergeant	Good	Air Gunner "Stn"	Sat.	31" 12" 40	H W Kerley, Sgn Ldr.

(11)

CERTIFICATE OF DISCHARGE

Certified discharged *day of* *19*

Signature and Rank of Officer authorizing the discharge.

4 NAME (in full, Surname first) Maville, John Allan OFFICIAL No. CAN. R 53901

(12) SPECIAL QUALIFICATIONS and Courses of Instruction, etc.				(13) TIME FORFEITED				
Authority	Description and Place	Degree of Proficiency and class of Certificate awarded	Date	Authority	CAUSE	DATES From	DATES To	Number of Days

(14) CASUALTIES, WOUNDS, CAMPAIGNS, MEDALS, CLASPS, DECORATIONS, SPECIAL RECOMMENDATIONS, MENTIONS, ETC.

Authority	NATURE	Date of Effect

R.C.A.F. T.20
5M-9-39(1892)
H.Q.1062-13-20

H.

ROYAL CANADIAN AIR FORCE 53901

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

in AIR GUNNERY

Name Maville, J.A. Station School of Army Co-operation, Ottawa,

Rank A.C.2 Course commenced June 3rd, 1940 Course ended June 23rd, 1940

Subjects Examined	Maximum Marks	Marks Obtained	Percentage
Gunnery -- Theoretical	100	86	86
Practical	1807	1006	56
Oral	50	43	86

FLYING ON COURSE

Aircraft Type	Pilot	Passenger	Total
Lysander		22hrs. 00 mins	22hrs.00mins

Remarks of Instructor--...This pupil is an exceptionally good type for an Air Gunner ...and has proved himself to be very competent and reliable.

J.S.Irwin F/O
Instructor or O.C. School.

Suitable as Instructor...No.....

Assessment...Above Average.....

Passed or Failed...Passed.....

To be assessed;/
Exceptional
Above the Average
Average
Below the Average
Poor

R.C.A.F Records Office
Rec'd AUG 12 1940
O. K. C.I.B.
R. C. N. I.
S. L. P. A.

(D.M.Smith) S/L
COMMANDING School of Army Co-operation, R.C.A.F. Station, Ottawa, Ontario

DATE.....June 27th, 1940.....

Dr file

R53901 (R.2-2-1)

R E G I S T E R E D

OTTAWA, Canada, February 16th, 1946.

Mrs. Isabella Maville,
Dalhousie Station,
Soulanges Co.,
Quebec.

Dear Mrs Maville:

It is a privilege to have the opportunity of sending you the Operational Wings and Certificate in recognition of the gallant services rendered by your son Sergeant J.A. Maville.

I realize there is little which may be said or done to lessen your sorrow, but it is my hope that these "Wings", indicative of operations against the enemy, will be a treasured memento of a young life offered on the altar of freedom in defence of his Home and Country.

Yours very sincerely,

FEB 19 1946

(T.K. McDougall) G/C
R.C.A.F. Records Officer.

/BMD

1022-M-1352 (R.2D)

June 28th, 1

The Canadian Pension Commission,
Department of Pensions & National Health,
Daly Building, Ottawa, Ontario.

Gentlemen:

R.53901 Sgt. Maville, J.A.
Deceased - R.C.A.F.

The above noted airman is reported killed Overseas as the result of a flying battle near Rushden, Northamptonshire, England, on the 22nd of June, 1941.

The next of kin is Mrs. I. Maville, Dalhousie Station, Quebec, the airman's mother.

Yours truly,

(E.F.R. Hewitt)
Flying Officer
for Director of Airmen Personnel Services.

JW

CANADA
W.S.G. 24

PLEASE ADDRESS REPLY TO
CHAIRMAN AND QUOTE

Dependents' Allowance Board

No. XR-53901
Serial No. 1381
Your File No.: 12520/R.53901

Department of National Defence

1945 JUL 12 AM 8:30

Ottawa, Canada
July 9, 1945

R.C.A.F. Gratuities,
D.A.F. F-2-5,
No. 8 Temporary Building,
OTTAWA.

Re: XR-53901 - Sgt. MAVILLE, J.A.

1. Reference your memorandum of March 28, 1945.

2. As the applicant for War Service Gratuity has not replied to inquiries sent by this Board over six weeks ago, it is suggested that action might now be taken to make War Service Gratuity payable to the service estate of the marginally-named, vide P.C. 2239 if there are no other applicants.

3. Papers submitted with your above referenced memorandum are returned herewith.

DEPENDENTS' ALLOWANCE BOARD

D Coburn
For R.O.G. Bennett - Chairman

B44/BO'H
Encl.

16/7/45
16

D. A. B. 60
200M—3-45 (6875)
H.Q. 1772-45-20

DAP / Acct 18
#9 temp. Dly

12520
R-53901

Dalhousie Sta
Mar. 12th/45

R. Royal Canadian Air Force
J. Mack Murray
Air Commodore

Dear Sir
in regard to applacation by Isabella Maville for gratuity for service in respect of the late Sgt J. A. Maville she been his mother and she received answer stating I should send for order form as he had assigned his part of his wages to me his father I do now apply for form to fill out. yours truly

Roderick Maville
Dalhousie Sta.

R R No 1. box 28. Que

1022-M-1352 (R.2D)

To the Administrator of Estates:

No. R.53901 Rank. Sergeant

MAVILLE John Allan
Surname Christian Names

Unit. Overseas

Date of Death. 22-6-41 Place of Death. Overseas

Next-of-kin Mrs. I. Maville Relationship. Mother
as per statement on attestation

Address. Dalhousie Station, Quebec.

M.F.M. 5 ENCLOSED

Will ENCLOSED

Authority Overseas Signal C.7/57 d/27-6-41

Date. 28-6-41

(E.F.R. Hewitt)
Flying Officer
for Director of Airmen Personnel Services

To be made out in duplicate

M.F.M. 5
200M—2-41 (9495-6)
H.Q. 1772-39-1651

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

INSTRUCTIONS.

(*a*) This form is to be completed immediately an officer or other rank is appointed to, or enlisted in, the Canadian Army (AF) or R.C.A.F. ON ACTIVE SERVICE.

(*b*) All questions, etc., must be completed.

(*c*) Both copies of the form are to be forwarded by the Officer Commanding the unit for each officer and other rank, to the Paymaster, or Officer acting as such. The latter will transmit one copy, through the District, Command, or Camp Paymaster, to the Officer i/c Records, N.D.H.Q., Ottawa. The other copy will be retained by the Paymaster of the unit, when transferred to another unit the copy retained by the Paymaster will be sent to the Paymaster of the individual's new unit.

---

(1) Name of Officer or Other Rank MAVILLE, John Allan
(Surname first—Christian names in full—Block capitals)

(2) Regimental or Official Number and Rank R.53901

(3) Unit R.C.A.F. Recruiting Centre, Ottawa

(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 Number of boys N.A. Girls N.A.

Names and ages N.A.

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

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

Name N.A.

Postal Address N.A.

[SEE OTHER SIDE]

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

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

(11) Is your father alive? YES

If so, state name and address, occupation Roderick Maville,
Dalhousie Station, Quebec.

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

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

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

(14) Is your mother alive? Yes

If so, state name and address Mrs. Isabella Maville
Dalhousie Station, Quebec.

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

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

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? N.A.

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

If so, state the following particulars:—

Relationship N.A.

Full Name N.A.

Postal Address N.A.

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

(18) Are you insured? No

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

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.

(Sgd.) John Maville
(Signature of officer or man)

Date May 31, 1940

(Sgd) R. H. Cowan
(R.H.Cowan) Flying Officer
Officer Commanding R.C.A.F. Recruiting Centre, Ottawa, Ont.

Date May 31, 1940

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.

Certified True Copy
1-7-41

(E.F.R. Hewitt)
Flying Officer
for Director of Airmen Personnel Services.

R.C.A.F. G. 66
3M--6-41 (325)
H.Q. 1062-9-74

Royal Canadian Air Force

No. 17.

EVIDENCE OF DEATH

This is to Certify that R 53801 (Number) Sergeant (Rank)

Maville, John Allan, (Name in Full) R.C.A.F. (Unit)

lost his life as a result of air operations, Overseas,

on the 22nd. day of June, 1941.

Dated at Ottawa, Canada, this ninth day of October, 1941.

C.C. Mitchell Gp Capt.

Group Captain,
Director of Postings and Records.

D.C.M.

FORM 6

DOMINION BUREAU OF STATISTICS—QUEBEC DEATH TRANSCRIPT

R53901

Do not write in this space

1. PLACE OF DEATH County of (municipal) Northamptonshire, England Civil Municipality Rushden
(Write name and state whether city, town, village or rural municipality)
Name of street (If any) ..... House No. .....
(If death occurred in a hospital or institution, give the name instead of street and number)

2. LENGTH OF STAY

	Years	Months	Days
(a) In Municipality where death occurred			
(b) In Province			
(c) In Canada (if immigrant)			

3. NAME OF DECEASED MAVILLE JOHN ALLAN
(Surname) (Given name or names)

RESIDENCE No. ..... Street ..... City, Town, Village or Township Dalhousie Station, Province Quebec
(Residence means usual place of abode. Post Office Address for residents in rural parts not sufficient)

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

Do not write in this space

8. If married give name of wife or husband of deceased N.A.

9. BIRTHPLACE (Province or Country) Lancaster Twp., Ontario.

10. DATE OF BIRTH March (Month) 17th (Day) 1918 (Year)

11. AGE OF DECEASED	Years	Months	Days	If less than one day old
	23	2	22	....hrs. or....min.

OCCUPATION

12. Trade, profession or kind of work, as **spinner, teamster, office clerk,** etc. AIR GUNNER

13. Kind of industry or business, as **cotton-mill, lumbering, bank,** etc. R.C.A.F.

14. Date deceased last worked at this occupation 22-6-41

15. Total years spent in this occupation

16. NAME		17. BIRTHPLACE (Province or Country)
FATHER	Rod Maville	
MOTHER (Maiden name)	Isabella	

18. Place of Burial, Cremation or Removal

Date of burial 19

19. PLACE OF REGISTRATION OF THIS BURIAL—

(a) Name of parish, church or institution .....

(b) Civil Municipality of .....

(c) County (Municipal) .....

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

MEDICAL CERTIFICATE OF DEATH

21. DATE OF DEATH June (Month) 22nd (Day) 19 41 (Year)

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

CAUSE OF DEATH

I

Immediate cause Give disease, injury or complication which caused death, **not** the mode of dying, such as heart failure, asphyxia, asthenia, etc.
(a) K F B
due to I L A
due to L I Y T
due to L N I T

Morbid conditions, if any, giving rise to immediate cause (stated in order proceeding backwards from immediate cause).
(b) E N L
due to D G E
(c) .....

II

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

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

23. If a woman, was there a puerperal condition? N.A.

24. Was there a surgical operation? N.A. Date of ..... 19.....
State findings ..... Was there an autopsy? .....

25. If death was due to external causes (violence) fill in also the following:—
Accident, suicide or homicide Accident (State which) Date 22-6-41 19.....
Manner of injury Flying battle - shot down (How sustained)
Nature of injury Fatal
Specify whether injury occurred in **industry,** in **home,** or in **public place** Public Place

Signed ..... **M.D.**
Address ..... **Date** ..... **19**.....

20a. Signature of person who fills in the form (curate, coroner, hospital authority, etc.) S Mitchell F.O.
This signature authorizes the collector to accept this form as authentic.
for Director of Postings & Records
R.C.A.F. Headquarters.
8-11-41.

20b. Name of Clergyman in charge of Register of Civil Status in which registration of this burial was made .....

(Voir l'autre côté pour le français)

R.C.A.F. A-81
25M-12-44 (4876)
H.Q. 885-A81

DEPARTMENT OF NATIONAL DEFENCE

NAVY ═══ ARMY ═══ AIR FORCE

STATEMENT OF WAR SERVICE GRATUITY

G.S.-4 AIR

43441

DECEASED MEMBER'S NAME	John A. (CHRISTIAN NAMES) Maville (SURNAME)	REGISTER NO.	12520
		FILE NO.	19 July/45
PAYEE	Receiver General of Canada,	DATE	R53901
ADDRESS	Director of Estates, Ottawa, Ont.	SERVICE NO.	Sgt.
		FINAL RANK OR RATING	22 June/41
DATE OF TERMINATION OF OVERSEAS SERVICE	22 June/41	DATE OF DISCHARGE	

		$ ¢
A. TOTAL QUALIFYING SERVICE	NO. OF DAYS 388/30 EQUAL TO 12 COMPLETE PERIODS AT $7.50	90.00
B. QUALIFYING OVERSEAS SERVICE	NO. OF DAYS 306 LESS 28 INELIGIBLE DAYS, EQUAL TO 278 DAYS @ 25C. PER DAY	69.50
C. SUPPLEMENT FOR OVERSEAS SERVICE	DAILY RATES AT DISCHARGE	
	PAY $ 2.95	
	SUBSISTENCE OR LODGING AND PROVISION ALLOWANCE $ .85	
	ADDITIONAL PAY $	
	$	
	$	
	DEPENDENTS' ALLOWANCE 1/30 OF $ $	
	TOTAL $ 3.80 ×7 = $ 26.60	
	NO. OF DAYS 306/183 ×$ 26.60	44.48
D. WAR SERVICE GRATUITY		203.98
E. DEDUCTIONS	OVERPAYMENT OF PAY AND ALLOWANCES $	
	DEPENDENTS' ALLOWANCE AND ASSIGNED PAY $	
	OTHER DEDUCTIONS $	
F. TOTAL AMOUNT PAYABLE		203.98

G. YOUR PORTION OF GRATUITY IS—

DEPENDENTS' ALLOWANCE IN ISSUE TO YOU $ ~~P. & A. Bal.~~ Trans. Trust Account OF $ = $

TOTAL DEPENDENTS' ALLOWANCE IN ISSUE $ Journal Voucher # G92

R. R. J. K. R.C. N.L. P.A. JUL 28 1945

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

PREPARED BY	CHECKED BY
DRM	JFM

TREASURY	
CHECKED BY	DATE
	20 7 45

SERVICE REPRESENTATIVE

ROYAL CANADIAN AIR FORCE

STATEMENT OF WAR SERVICE GRATUITY

MEMBER'S NAME: JOHN A, (Christian Names) MAVILLE (Surname)

PAYEE: R. Ly D (Christian Names) L (Surname)

ADDRESS:

Register No. .....

File No. 125 20

Date 19 July 45

Service No. R 53901

Final Rank or Rating SGT

Date of Discharge 22 June 41

Date of Termination of O/S service 22 June 41

	$ ¢
A. TOTAL QUALIFYING SERVICE No. of days 388/30 equal to 12 complete periods @ $7.50	90.00
B. QUALIFYING OVERSEAS SERVICE No. of days 306 less 28 ineligible days, equal to 278 days @ 25¢ per day	69.50
C. SUPPLEMENT FOR OVERSEAS SERVICE Daily Rates at Discharge Pay .....$ 2.95 Subsistence or Lodging and Provision Allowance .....$ 85 Additional Pay ....$..... Dependents' Allowance 1/30 of $ .....$..... TOTAL $ 380 × 7 = $ 26.60 No. of days 306/183 × $ 26.60 43.61 87 4448	44.48
DD. WAR SERVICE GRATUITY	203.98
E. Deductions Overpayment of Pay and Allowances $ Dependents' Allowance $ and Assigned Pay Other deductions $	
F. TOTAL AMOUNT PAYABLE	203.98
G. YOUR PROPORTION: (D.A. in issue to you / (Total D.A. in issue) = ———— of $	

PREPARED BY	CHECKED BY
DRM.	JFM

AIR FORCE No. R53901

SURNAME: MAVILLE, FULL CHRISTIAN NAMES: JOHN ALLAN

ENLISTMENT PLACE Ottawa, Ont. DATE 31-5-40

RE-ENLISTMENT

C.R FILE NUMBER 1022-M-1352

(8) 12

RECORD OF SERVICE AIRMEN

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

1. POSTING (INDICATE S.O.S. AND T.O.S.)

S.O.S. OR T.O.S.	UNIT AND PLACE	EFFECTIVE			D.R.O.
TOS	R.C.A.F. Stn. Ottawa, Ont.	31	5	40	H132 ~~H4~~
SOS	Posted to SPC Rcaf Stn Ottawa to RCAF Overseas	21	8	40	H202 ✓
TOS	112 Can (AC) Squadron High Post.	6	9	40	H202
	Transfer from 112(AC) Sqdn to	11	12	40	RP3.
SOS	R.C.A.F. Pool. Halton	14	2	41	RP35
TOS	110 Can. Sqn	14	2	41	110AC44
SOS	400 AC Sqn.	3	3	41	400AC6
	#225 Sqn. R.C.A.F.				
SOS	to 207 Sqdn.	18	4	41	RAF.22.
	Killed in flying battle	22	6	41	RAF.30 AFRO.790
	Flying Battle; Operational; Rushden Northamptonshire; shot down by friendly fighter; O'Sea, Great Britain; Sig. "E" 7/975 d/23-6-41				
	207 Sqdn. RAF Overseas				

C	CH	STRENGTH	DATE			CAUSE	STATUS	RESULT	DATE OR PLACE	P	CH
C.D		28	22	6	41	1	9	7	00200		✓

2. RECLASS'NS-PROMOTIONS-ETC.

RANK	EFFECTIVE			D.R.O.
AC2	31	5	40	H132
Sgt (T)(2)	7	8	40	112AC273
T4				

3. MEDICAL HISTORY

EXAMINATIONS (IN RED INK)

DATE	FORM	CATEGORY	REMARKS

HOSPITALIZATION (IN BLACK INK)

HOSPITAL	ADMITTED	DISCHARGE	D.R.O.
QUARTERS	CONFINED	RET'N DUTY	
31-5-40	R-100	a	
Stn Hosp P.M.	17-1-41	30-1-41	RP 18-31
P. Marg. H.			

4. TRADE AND CHARACTER

TRADE	GROUP	EFFECTIVE			D.R.O.
Aircrewman	S	31	5	40	H132
Air Gunner	S	23	6	40	112AC273
305S.					R

TRADE PROFICIENCY	CHARACTER ASSESSMENT	DATE OF R41
Sat.	Good	31-12-40

5. COURSES-TESTS-ETC.

SUBJECT	RESULT	DATE	AUTHORITY

6. LEAVE

FROM	TO	DAYS	REMARKS	D.R.O.
26-7-40	2-8-40	7		H179
27-9-40	1-10-40	4		112AC237
23-12-40	30-12-40	7	In station	RP1

OVERSEAS | ENLISTMENT MARTIAL STATUS | PRESENT MARTIAL STATUS | HIGH & TECH. SCHOOL EDUCATION | OCC. PRES. BAP. U.C. PRES. R.C. HEB. MIS. OTHER RELIGION | PREV. SERV. | PROVINCE OF ENLISTMENT | DISCHARGE | AC

12520 Completed WSS JAN 23 1945 3 1044

AIR FORCE No. R 52901 R.

SURNAME: Maville FULL CHRISTIAN NAMES: John Allan.

ENLISTMENT PLACE Ottawa, Ont DATE 31-5-40

RE-ENLISTMENT

C.R. FILE NUMBER 1022-M-1352

RECORD OF SERVICE AIRMEN

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

7. BIRTH: DATE 17-3-18 PLACE Glen Norris Ont. CITIZENSHIP British

FATHER (FULL NAME) Roderick Maville

BIRTHPLACE Alexandria Ont.

MOTHER (FULL MAIDEN NAME) Isabella McDonald

BIRTHPLACE Lancaster, Ont.

8. EDUCATIONAL STANDING

HIGH SCHOOL ENTRANCE

JUNIOR MATRICULATION

SENIOR MATRICULATION Ontario

TECHNICAL SCHOOL

UNIVERSITY Ottawa Normal sch. 1 yr.

CORRESPONDENCE COURSES

7

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

Farmer

9510

10. PREVIOUS ARMY, NAVY OR AIR FORCE SERVICE

Nil

0

11. HONOURS-AWARDS, MENTIONS	AUTHORITY	DATE

12. FLYING EXPERIENCE ON ENLISTMENT (HOURS)

SOLO — DUAL — PASSENGER —

13. RELIGION Roman Catholic

1

14. LANGUAGES English & French (Some)

1

15. SPORTS Softball, Badminton

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

WIFE (FULL MAIDEN NAME)

PLACE OF MARRIAGE DATE

AUTHORITY (IF AFTER ENLISTMENT)

1

17. MARRIED ESTABLISHMENT

REMARKS	RANK	EFFECTIVE	D.R.O.

18. CHILDREN

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

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

FULL NAME: Isabella Maville RELATIONSHIP Mother

ADDRESS: Dalhousie Stn. Que. D.R.O.

FULL NAME: RELATIONSHIP

ADDRESS: D.R.O.

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

RATE CHANGES ETC.	EFFECTIVE	D.R.O.	RATE CHANGES ETC.	EFFECTIVE	D.R.O.

21. ENGAGEMENTS

TERM	EFFECTIVE	D.R.O.	TERM	EFFECTIVE	D.R.O.
Duration	31 5 40				

22. TEMPORARY DUTY AND MISCELLANEOUS ENTRIES

FROM	TO	DATE	D.R.O.
Ottawa Stn RCAF	Trenton, Ont.	23-6-40	H151
Departed Halifax 27-8-40 Arr. Greenock 5-9-40			112ac 199
A.P.E. Dalhousie Stn. Que.			26400

23. DOCUMENT CONTROL (INDICATE RECEIPT BY DATE)

R60	R79	B465	X-RAY	AFM-13	IDN. CARD	KX
16-9-40		9-8-40				20 X