R53944
RHEAUME
JOSEPH ARTHU

R.C.A.F. T. 82
5M—8-40—(6626)
H.Q. 1062-13-65

ROYAL CANADIAN AIR FORCE

REPORT ON PUPIL WIRELESS OPERATOR (AIR GUNNER) OR AIR GUNNER

AIR AND GROUND TRAINING

Surname Rheaume. Christian Names J.A.D.

Number R53944 Rank AC2

INSTRUCTIONS

1. At the conclusion of each stage of training this report must be completed and forwarded as indicated below in sufficient time to arrive on or before the date on which the pupil reports for the commencement of the next stages of training:—

Original and Duplicate—From I.T.S. to Wireless School.

From Wireless School to Bombing and Gunnery School.

Duplicate —To be available on demand by the Training Command concerned.

2. On completion of training, the original is to be placed on the pupil's personal file and the duplicate forwarded to Air Force Headquarters through Command Headquarters.

3. In the event of the discontinuance of training at any stage, one copy is to be forwarded to R.C.A.F. Headquarters through Command Headquarters with full particulars as to the cause of discontinuance of training and instructor's report as to the reasons for the pupil's failure.

4. A pupil will be entitled to "Pass" if he obtains not less than 60 per cent of the total marks in the Written, Practical and Oral Tests, and not less than 50 per cent in each of the separate subjects included in this Test.

PART I

INITIAL TRAINING

1. No..... Initial Training School. Course No..... From..... To.....

2. Results of Examinations:—

Subject	Maximum Marks	Marks Obtained	Subject	Maximum Marks	Marks Obtained
Mathematics.....	100	.....	Drill	100	.....
Armament (P. & O.).....	100	.....	Law and Disc., etc.....	100	.....
			TOTALS.....	400	

3. Maximum Marks, 400. Marks Obtained..... Percentage..... Pass or Fail.....

Position in Class..... No. in Class.....

4. Remarks.....

.....

R.C.A.F. .....
Rec'd. JAN 4 1944
O.K. ..... O.B. .....
R.C. ..... N.I. .....
S.L. ..... P.A. .....

.....Wg. Comdr.
Commanding Officer

Date.....

To be passed to No..... Wireless School.

PART II

WIRELESS TRAINING

1. No. I ..... Wireless School. Course No. 3 ... To 24/11/40 ... From 22/7/40

2. Flying Times—

(a) In Flying Classroom as 1st Operator ..... 1 ..... hours.

(b) In Flying Classroom, listening watch ..... 3 ..... hours.

(d) In 2-seat aircraft as sole operator ..... 2 ..... hours.

3. Assessment as Air Operator (delete categories not applicable). Unless at least 5 hours has been shown against para. 2 (c) above, no assessment is to be made and therefore all categories are to be deleted.

~~Above average~~
~~Average~~
~~Below average~~

4. Ground Training:—

Subject	Maximum Marks	Marks Obtained	Subject	Maximum Marks	Marks Obtained
Theory	100	....50....	Signals Office Routine....	100	...50....
Practical Application.....	150	....105..	Signals Organization.....	150	...93....
Morse (buzzer and lamp)	200	....182..	Drill and P.T.....	100	...70....
Procedure.....	200	....143..	TOTALS.....	1000	...693...

Maximum Marks 1000. Marks Obtained ..693.. Percentage 69.3 ... Pass or Fail ....Pass..

Position in Class .....28..... No. in Class .....96.....

5. Date authorized to wear Wireless Operator's Badge .....24/11/40.....

6. Assessment as to suitability for N.C.O. rank:—
(Delete categories not applicable)

~~Specially suitable~~
~~Average~~
Not suitable

7. Comments as to suitability for Commissioned rank:— .....

.....

.....

.....

.....

8. Assessment as to suitability as an Instructor in Wireless Schools for similar tradesmen (delete categories not applicable).

~~Specially suitable~~
~~Average~~
Not suitable

.....J. Shewing Smith Wgc.....
Officer Commanding

No. ....I.... Wireless School

Date ....27/11/40.....

To be passed to No. .....B. G. S.

PART III

ARMAMENT TRAINING

1. No. 4 B. G. S. Course No. 3

2. Dates of Course:— From 25-11-40 To 23-12-40

AIR TRAINING

GUNNERY

3. *Flying Time:—*

Aircraft	Day	Night	Passenger	Total Hrs.	Total Mins.
Battle	7:05		1:15	8	20

4. *Air Gunnery Results—*

	Average percentage hits to rounds fired
(a) Beam Test	2 % Sights U/S
(b) Beam Relative Speed Test	11 %
(c) Under Tail Test	7 %

5. *Assessment—*

		Marks Obtained
(a) Written Examination	(100 Marks)	68
(b) Practical and Oral Examination	(100 Marks)	79
(c) Ability as Firer	(250 Marks)	194
(d) Qualities as an N.C.O.	(150 Marks)	85
Totals	(600 Marks)	426

6. Position in Class 17 No. in Class 31 Pass or Fail Pass

7. Date authorized to wear Air Gunner's Badge 23-12-40

8. Comments on suitability for Commissioned Rank Not suitable

9. Remarks Cheerful disposition and ambitious to make good.

Chief Instructor

No. 4 B. G. S.

Date 23-12-40

10. *Final Assessment* (to be completed at B. G. S.)

Course	Maximum Marks	Marks Obtained
Wireless School	1000	693
Bombing and Gunnery School	600	426
TOTALS	1600	1119

11. Percentage 69 Pass or Fail Pass Position in Class 10

No. in Class 31

12. Recommended for Commissioned Rank No *(yes or no)* Assessment Average *(ex., above average)*

13. Remarks Concur in above

Officer Commanding

No. 4 B. G. S.

Date 23-12-40

AIR FORCE No. R53944

SURNAME: RHEAUME, FULL CHRISTIAN NAMES: JOSEPH ARTHUR DORIS

ENLISTMENT / RE-ENLISTMENT — PLACE Ottawa Ont — DATE 6-6-40

C.R. FILE NUMBER 1022R-567

RECORD OF SERVICE AIRMEN

R.C.A.F. FORM R44(B) 50M-10-40 (7665) 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	1 MD Toronto	7	6	40	TMP135
SOS	1MD to 1 D.T.S. Toronto	24	6	40	TMP148
SOS	1 D.T.S. to 12 W.R. Montreal	19	7	40	4B4839 1B8104
S.O.S.	4B. G. S from 12 W.R.	23	11	40	12B249
SOS	RCAF Station Rockcliffe	23	12	40	4B8839
TOS	RCAF Stn Rockcliffe	24	12	40	H2 H3
SOS	H	5	2	41	H34
TOS	EAC Halifax, N.S.	6	2	41	EAC 37 ✓
T.O.S.	United Kingdom from Canada	2	3	41	RAF.15
S.O.S.	to 1 O.T.U.	18	3	41	RAF.15
SOS	to 1 Sig. Schl.	3	4	41	RAF.19.
SOS	to 27 O.T.U.	24	5	41	RAF 28.
SOS	To 104 Sqd.	14	7	41	RAF 36,34
SOS	to 1 Def. M.	28	8	41	RAF 44,47
SOS	Halifax to O'Seas	15	2	41	Emb 113.
	Missing	28	8	41	RAF 42

8 Death presumed as on 29 8 41 RAF 6 other L.A.; Operational; bombing; O'seas, cont Europe; Sig. C9/492 d/ 31-8-41 O'seas 104 Sq. presumed enemy action

C	CH	STRENGTH	DATE			CAUSE	STATUS	RESULT	DATE OR PLACE	P	CH
R	8	28	29	8	41	2	8	5	Rod 2 4		

W.S.G. computed 4 10 44

2. RECLASS'NS-PROMOTIONS-ETC.

RANK	EFFECTIVE			D.R.O.
AC 2	6	6	40	TMP135
LAC	19	7	40	4B4839 1B8206
S/Sgt (Paid)	23	12	40	4B4839
T4				

3. MEDICAL HISTORY

EXAMINATIONS (IN RED INK)

DATE	FORM	CATEGORY	REMARKS

HOSPITALIZATION (IN BLACK INK)

HOSPITAL QUARTERS	ADMITTED CONFINED	DISCHARGE RET'N DUTY	D.R.O.
10-3-40	P100	A	
18-6-40	M2	A1B A3B	
18-7-40	M2	A1B A3B	

4. TRADE AND CHARACTER

TRADE	GROUP	EFFECTIVE			D.R.O.
Aircrew	S.	6	6	40	TMP135
Dro/Ag.		19	7	40	4B4839
Dra/G.	Spec	23	12	40	4B4839
3045					X

TRADE PROFICIENCY	CHARACTER ASSESSMENT	DATE OF R41

5. COURSES-TESTS-ETC.

SUBJECT	RESULT	DATE	AUTHORITY
Dr. A. G. Course	69.3%	22 7 40 24 11 40	124R.
Dr. A. G Course	69%	23 12 40	T82

6. LEAVE

FROM	TO	DAYS	REMARKS	D.R.O.
22-12-40	31-12-40		annual	4B4839
6-1-41	15-1-41	9	annual	H6
23-1-41	30-1-41	7		H34
22-3-41	30-3-41	9	P.	RAF.17

ENLISTMENT / PRESENT MARITAL STATUS — HIGH & TECH. SCHOOL EDUCATION — R.C.A.F. OVERSEAS — U.C. PRE-ENLISTMENT — HED. MIS. OTHER PRO. — PREV. SERV. — PROVINCE OF ENLISTMENT

AIR FORCE No. R53944

SURNAME: Rheaume — FULL CHRISTIAN NAMES: Joseph Arthur Doris

ENLISTMENT — PLACE Ottawa Ont — DATE 6-6-40

RE-ENLISTMENT

R.C.A.F. FORM R.

RECORD OF SERVICE AIRMEN

7. BIRTH: DATE 7-7-21 — PLACE Hawkesbury, Ont. — CITIZENSHIP British

FATHER (FULL NAME) Joseph Omer Rheaume

BIRTHPLACE Alfred, Ont.

MOTHER (FULL MAIDEN NAME) Maria Simone Daigneault

BIRTHPLACE Papineauville, Que.

8. EDUCATIONAL STANDING

HIGH SCHOOL ENTRANCE

JUNIOR MATRICULATION 2½ Ontario

SENIOR MATRICULATION

TECHNICAL SCHOOL

UNIVERSITY

CORRESPONDENCE COURSES

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

Butcher 1 year.
Butcher 6 months

10. PREVIOUS ARMY, NAVY OR AIR FORCE SERVICE

Nil

11. HONOURS-AWARDS, MENTIONS

	AUTHORITY	DATE
Air Gunners Badge	434839	23-12-40
Air Gunners badge	434839	23-12-40

12. FLYING EXPERIENCE ON ENLISTMENT (HOURS)

SOLO — DUAL — PASSENGER —

13. RELIGION Roman Catholic R79

14. LANGUAGES English & French

15. SPORTS Play trumpet.
Most Sports.

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: Maria Rheaume — RELATIONSHIP Mother
ADDRESS: 183 Main St East, Hawkesbury, Ont. — 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.
Flying Pay 4 days	28 10 40	12 RS 11			
Crew Pay	25 11 40	434132			
Flying Pay (4 days)		RS 11			

21. ENGAGEMENTS

TERM	EFFECTIVE	D.R.O.	TERM	EFFECTIVE	D.R.
Duration	6 6 40				

22. TEMPORARY DUTY AND MISCELLANEOUS ENTRIES

FROM	TO	DATE	D.R.O.
Subs Allowance (Cancelled)		24-12-40	H2 H3
Subs Allowance		2-1-41	H3
Railway warrant issued		22/30-3-41	RAF 17
Attached EM. for rtns & qtrs		8-2-41	RAF 37
Severely reprimanded	Absent from Tech. Period 8, 6a, 7	14-4-41	RAF 17
Sub Allowance		2-1-41	17101 H3
A.P.E. 183 Main St, East, Hawkesbury, Ont.			
Subs allowance (Can)		24-12-40	H 2 3

23. DOCUMENT CONTROL (INDICATE RECEIPT BY DATE)

R60	R79	B465	X-RAY	AFM-13	IDN. CARD	
15-7-40	8-2-41					X

10M—3-40 (4425) MINISTERIAL CARD ROYAL MESSAGE MEMORIAL CROSS
H.Q. 1772-45-8

H.Q. FILE NO. 1022-R-567

NAME RHEAUME, Joseph Arthur Doris

REGT'L NO. R53944

RANK W.O. Sgt. Air Gunner UNIT Overseas (~~Missing~~)

CABLE NO.	CABLE DATE	NATURE OF CASUALTY		CAS. LIST NO.	CAS. LIST DATE
DATE OF ~~DEATH~~	~~28-8-41~~ 29-8-41	IS MOTHER LIVING? YES	IS WIFE LIVING? N.A.		
MINISTERIAL CARD SENT: 5-9-41		ROYAL MESSAGE SENT: 28-2-42	MEMORIAL CROSS SENT: 14-2-42		
To father same address.		To be sent from Overseas.	To the mother.		
(f) To ~~father~~ mother.	29-1-42				

PRESUMED DEAD - Cas.List. 26-1-42.

Joseph Omer
Mother: Mrs. M. Rheaume,
183 Main Street, East,
Hawkesbury, Ontario.

SPECIAL RESERVE

AIR FORCE R.53,944 POSTED TO No.1 Manning Depot Toronto TRADE Aircrewman (Std.)

Summer

U.A.T.P. CANADA

ROYAL CANADIAN AIR FORCE

1022 R-567

SPECIAL RESERVE

(ATTESTATION PAPER)

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

1. Surname RHEAUME FULL Christian Names JOSEPH ARTHUR DORIS
2. Present Address 183 MAIN STREET EAST HAWKESBURY Telephone None
3. Permanent Address " " " " HAWKESBURY, Ont.
4. Place of Birth HAWKESBURY, Ont. Citizenship Canadian ~~BRITISH~~
5. Date of Birth 7 July 1921 Married, Single, Widower, Separated, Divorced Single
6. Particulars of Children

Name	Date of birth	Name	Date of birth
		N.A.	

7. Occupation Unoccupied from to-day 8. Religion Roman Catholic (State denomination)
9. Languages French and English, (also knowledge of Latin). (State proficiency)
10. Next of Kin (Full Name) Maria Rheaume Relationship Mother
    " Address 183 Main St Hawkesbury Ontario
11. Father (Full Name) JOSEPH OMER RHEAUME Birthplace ALFRED, ONT.
    " Address 183 MAIN EAST HAWKESBURY Citizenship Canadian
    " Occupation EMPLOYEE of the INTERNATIONAL PAPER Co.
12. Mother (Full Maiden Name) MARIA DAIGNEAULT Birthplace PAPINEAUVILLE Que.
    " Address 183 MAIN EAST Hawkesbury Citizenship Canadian
13. Details of any Naval, Military or Air Force Service:

Unit	Place	Rank	Trade	Date From	Date To	Reason for discharge
		N.A.				

R.C.A.F. Records Office Rec'd JUN 29 1942 O.K. ✓ C.I.B. ✓ R.C. ✓ N.I. ✓ S.L. P.A.

14. Honours, Awards, Mentions N.A.
15. Are you now on any Naval, Military or Air Force Reserve?
16. Have you previously made application to join the R.C.A.F.? YES If so, where? at OTTAWA
    When? In November 1939 (application revised on 10/8/40) Result Was to be called
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? —
    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 14 1940 O.K. DJS C.I.B. R.C. MB N.I. P.A. P.C. S.L.

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

AB

21. Particulars of Education:

—	Name of school HAWKESBURY	Date From	Date To	Courses—Subjects, etc.
Primary Education—[redacted] ~~Separate~~ School	St JOSEPH ACADEMY	1927	1935	ENTRANCE CERTIFICATE
High School—~~Collegiate Institute~~, etc.	HAWKS. FRENCH H.S.	1935	1938	JUNIOR MATRICULATION
Technical School				Course. (Lack THREE
University or School other than above				Months for certificate)
Correspondence Courses, etc.				

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

Employer and place	Duties, trades, positions	Date From	Date To	Reason for leaving
Arthur Comtois	Butcher	Nov/38	Nov/39	Had better Pay with next
L.P. Theriault	Butcher	Nov/39	Apr/40	Thought I would be called soon gave line chance to get a man.

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. I play trumpet.

25. Sports engaged in. State: extensively, moderately, occasionally

Extensively (Hockey, Baseball) also Rugby, swimming and Boxing occasionally

26. AIR FORCE DUTY you wish to enlist for ~~Ground Duties~~. Flying Duties.

If for Ground Duties, state Air Force trade in which you wish to enlist Air Crew

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
ELIE. O. BERTRAND	LORIGNAL. ONT.	FEDERAL DEPUTY
J. B. WOODS	HAWKESBURY	NOTARY.

I had my medical examination passed by your doctor on 10/2/40

28. Other information that may have any bearing on this application

My recommandation Letters and certificates are up there with my other application

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 May 6 1940 Signature Doris Rheaume

FOR OFFICIAL USE ONLY

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, Joseph Arthur Doris RHEAUME 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 JUNE 6th, 19 40 Doris Rheaume
Signature of Recruit

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

I, Joseph Arthur Doris RHEAUME do sincerely promise and swear (or solemnly declare) that I will be faithful and bear true allegiance to His Majesty.

Date June 6th, 19 40 Doris Rheaume
Signature of Recruit

(E) **CERTIFICATE OF ATTESTING OFFICER**

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

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

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

at Ottawa, Ontario this sixth day of June 19 40

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

FOR OFFICIAL USE ONLY

CERTIFICATE OF MEDICAL EXAMINATION

Part 1. Information obtained from the applicant—

1. Age. 18 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 no
(q) Bone Fracture no
(r) Other Disease or Defect no

3. Have you ever worn glasses? no

Doris R Leaume
Signature of Applicant

Examiner's Remarks re above

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

1. Identification marks or scars (if operative obtain history)
Small sessile pigmented mole back of neck right side.

2. Height 5 feet 5 inches. 3. Weight 140 pounds.

4. Complexion Medium 5. Color of Eyes Hazel-Brown Hair Black

6. Development {Good / ~~Fair~~ / ~~Poor~~} 7. Chest Measurement—Full expiration 34 inches
Range of expansion 2 inches

8. Hearing—Right W.V. 20 Left W.V. 20 Tympana—Right Normal Left Normal

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

10. Condition of mouth and teeth Dental Count satisfactory

11. Urine—Albumen neg. Sugar neg.

12. Abnormalities (Congenital and Pathological) found on Examination
6 June 40 X-ray negative H.E. Hamm Capt RCAMC

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 10 1940

J R Monteith
Capt, R.C.A.M.C.
President

Chas Owens
Member

Kent Reaume
Member

SPECIAL RESERVE

AIR FORCE NO. R.53,944 NAME OF AIRMAN RHEAUME Joseph Arthur Doris

EVIDENCE OF BIRTH

DESCRIPTION OF DOCUMENT Certificate of Baptism.

NUMBER DATE Nov. 3rd. 1939.

ISSUING AUTHORITY F. Bricaulfptv. (Saint Alphonse Luguori De Hawkesbury) Parish, Hawkesbury Ont.

SUBJECT - ~~xSexx(fxxxxxxxxx)xx~~ Child(full name) Joseph Arthur Doris RHEAUME.

DATE OF BIRTH July 7th, 1921.

PLACE OF BIRTH Hawkesbury, Ontario.
city, town, village, province, country.

MOTHER (Full Maiden Name) Maria Simone Daigneault.

FATHER (Full Name) Omer Rheaume.

DATE May 10th, 1940.

~~CERTIFIED TRUE EXTRACT~~
(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.

A.F.M. No.10.

R.C.A.F. Records Office
Rec'd JUN 14 1940
O. K. ..... C.I.B. .....
R. C. ..... N. I. .....
S. L. ..... P. A. .....

SPECIAL RESERVE

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.

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(1) Name of Officer or Soldier RHEAUME, Joseph Arthur Doris
(Surname first—Christian names in full—Block capitals)

(2) Regimental Number R.53,944

(3) Unit R.C.A.F.

(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

~~NO~~ na

(7) Are you a widower? NO

(8) Have you any children? NO

If so, give number of boys and girls N.A.

Also their names and ages N.A.

(9) If Separation Allowance is claimed in respect of children—state whether you have been regularly supporting them NO

Give particulars of Guardian to whom Separation Allowance should be paid—if authorized—

Name N.A.

Postal Address N.A.

R.C.A.F. Records Office
Rec'd JUN 20 1940
O. K. C.I.B.
R. C. N. I.
S. L. P. A. PC

(SEE OTHER SIDE).

(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

N.A.

(11) Is your father alive? YES

If so, state name and address MR. O. RHEAUME

183 Main East., Hawkesbury, Ont.

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

No na

(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. N.A.

Also state reason he has no other means of support

N.A.

(14) Is your mother alive? Yes

If so, state name and address Mrs. O. RHEAUME

183 Main St., E., Hawkesbury, Ont.

(15) If your mother is a widow, are you her sole support? No na

(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 N.A.

(17) Are you insured? Yes

If so, in what Company? Metropolitan Life Ins. Co.

Have you made arrangements for payment of your Insurance Premium? Yes

If not, and it is a monthly premium, you may assign the amount in addition to any other assignment you wish to make, provided the total assignment is not in excess of the maximum monthly amount which may be assigned.

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

Louis Rheaume
(Signature of officer or man)

Date June 6th, 1940

Officer Commanding R.H. Cowan

Date June 6th, 1940

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

SPECIAL RESERVE

R53944 JMP NC2

CONFIDENTIAL

R.C.A.F. M.3
50M—12-39 (3211)
H.Q. 1062-10-2

ROYAL CANADIAN AIR FORCE

FILE NUMBER

Medical Board held at Ottawa May 9th, 1940. *Date* May 9th/40.

Surname RHEAUME *Chr. Names* J Arthur Doris
Nature of Commission Air Crew. *Date of Birth* Feb. 7th/21 *Married or Single* Single.
Branch R.C.A.F. *Hours Flown* None.
Address 183 Principal East Hawkesbury Ont.

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 Diphtheria 1924 no bad effect.
(iv) STOMACH or BOWEL TROUBLE NO
Chronic Indigestion or Pain after Food NO
(v) KIDNEY or BLADDER TROUBLE NO
Syphilis or Gonorrhœa NO
(vi) TROPICAL DISEASE NO
Malaria NO
Dysentery NO
(vii) EYE TROUBLE or Inflammation of Eyelids NO
Wearing of Glasses NO
Colour or Night Blindness NO
(viii) EAR TROUBLE, Earache or Discharge from Ears NO
Deafness, Noises in the Ears, or Dizziness NO
Frequent Colds in Head, Catarrh or Obstruction Colds 2 times a year for one week.
Prolonged Hoarseness or Loss of Voice NO
Sea, Car or Train Sickness NO
Discomfort on Swings, Roundabouts, Switchbacks NO
(ix) OPERATIONS Tonsillectoruy 1934
(x) Any Illness or Injury not mentioned above NO

Education High School last year junior matric.
Present Occupation unaccupied Hobbies Music Trumpet player.
Previous Service none
Athletics Baseball Hockey Softball Rugby.
Habits—Smoking 6 cig. a week. Alcohol NO
FAMILY HISTORY—Consumption NO
Nervous Ailments, Mental Trouble, or "Fits" NO
Father Alive—Health Good Dead—Cause
Mother Alive—Health Good Dead—Cause
Brothers (2) Alive—Health Good (....) Dead—Cause
Sisters (6) Alive—Health Good (....) Dead—Cause Baby 1 day

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 May 9th/40. *Signature* Doris Rheaume *Witness* Chas Jenners
Earl Rosie

GENERAL MEDICAL AND SURGICAL EXAMINATION

Impression given by *(a)* Physique ..... Good ..... *(b)* Mentality ..... Good .....
Body Marks, Scars, Deformities ..... None ..... Pigmentary mole on right in puirul. .....
Size of Thyroid Gland ..... N. .....
Surgical Abnormalities ..... None .....
Results of Wounds, Injuries, Operations ..... None .....

	Date May 9/40.	Assessing Room	Date	Assessing Room	Date	Assessing Room	Remarks on any Abnormalities Found
Height (ins.)	66.5						
Weight (lbs.)	138						*Date*
Chest Circumference (ins.)	34						
Body Build (lbs.)	+6						
Leg Length (ins.)	40						
Pulse Rate — Sitting	868						
Pulse Rate — Standing 1st	868						
Pulse Rate — Standing 2nd	84						
Pulse Rate — After Exercise	96						
Pulse Rate — Time to Normal	20"						
Arterial Walls	Soft						
Blood Pressure — Systolic	130						
Blood Pressure — Diastolic	80						
Heart — Size	N						
Heart — Sounds	N						
Heart — Rhythm	Reg.						
Lungs	N						
Breath held	55						
Expiratory Force	140						
Vital Capacity (Best of 5)	4500						
Reflexes — Knee	N						*Date*
Reflexes — Ankle	N						
Reflexes — Triceps	N						
Reflexes — Abdominal	N						
Reflexes — Plantar	↓ ↓						
Cranial Nerves	N						
	R. L.	R. L.	R. L.	R. L.	R. L.	R. L.	
Balancing Rod	2FS. FS.						
	R. L.	R. L.	R. L.	R. L.	R. L.	R. L.	
Self Balancing							
Tremors — Fingers	S.S.						
Tremors — Eyelids	SL.F. SL.F.						*Date*
Abdomen — Liver	N						
Abdomen — Spleen	N						
Abdomen — Muscular Tone	Good						
Urine — Albumen	Neg.						
Urine — Sugar	Neg.						
Initials of M.O.							

40 mm. Hg. Test ..... 52 sec F/ 787,877,777,77. .....
Date .....
Date .....
Date .....
Date .....

Remarks by Consultant.

Average good responses to tests, good physique good mentally intelligent. C.D.

EYE EXAMINATION

History	Good		
Visual Acuity	R 20/20 , $\bar{c}$ 2.25 = 20/100		
	L 20/20 , $\bar{c}$ 2.25 = 20/100		
Colour Vision	Normal Tshihara		
Red, Green	N. EXO Tendency 1/2 in neglect.		
Diaphragm Test (P.D. = 58)	Bar at 1 EXO Bal at 4		
Convergence	C. = 8 cms.		
	S. C. = 8' cms.		
Accommodation	R. 8½		
	L. 8½		
Cover Test	No couv.		
Fundi and Media	Pigment		
Fields	N		
Remarks:	Fit average good vision good muscular balance fir for flying		
	Initials of M.O. C.D.	*Initials of M.O.*	*Initials of M.O.*
	Date May 9/40.	*Date*	*Date*

EXAMINATION OF EAR, NOSE AND THROAT

History	Good.			
Hearing	R. Ear	N		
	L. Ear	N		
External Ear, Meatus Membranes	R. Ear	N		
	L. Ear	N		
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		N. Healthy		
Teeth		N. 34 Points		
Gums		gingivitis on lower incisors.		
Pharynx		N. healthy		
Nasopharynx		N. healthy		
Nose		N		
Larynx		N Healthy		
Remarks:		*Initials of M.O.* C.D.	*Initials of M.O.*	*Initials of M.O.*
		Date May 9/40	*Date*	*Date*

HISTORY OF PRESENT CONDITION

Date.....

May 8th 1940.

(1) Good history of diseases occasional cold in winter or spring time for a week no bad effedts.
(2) Tousillectoury 6 years ago throat ingood condition Healthy.
(3) Since one or two years tendency to gingivitis in lower gums around incisives teeth no b[illegible] e fect.

June 5th 1940. Re - examined Satisfactory

A1B
A3B

J R Monteith Capt R Cam c

(J. R. Monteith)
Captain R.C.A.M.C.

Chs Demers Lt

(Chs. Demers.)
Lieut. R .C.A.M.C.
R.C.A.F. Recruiting Centre,
Ottawa Ontario.

OBSERVATIONS AND FINDINGS BY PRESIDENT OF BOARD

Date.....May - 9 - 40.....

A, B

J R Monteith Capt R Cam c

J.R. MONTEITH
CAPTAIN (R.C.A.M.C.)

C. DEMERS Demers
LIEUT. (R.C.A.M.C.)

CATEGORY APPROVED
A1B - A3B
JUN 18 1940
D H Hubbs
Lieut for D. G. M. S.

R.C.A.F. Records Office
Rec'd JUN 20 1940
O. K. R.L. C I.B.....
R. C. MB N I.....
S. L.....P. A. MR

R005394 4 RHEAUME JOSEPH AD SGT 4

1 NUMBER | NAME | 29 RANK

SERVICE AWARD CARD

FORM NO. R. 325

R.C.A.F.

	39-45 STAR	ATL. STAR	A/C EUR STAR	AFRICA STAR	PACIFIC STAR	BURMA STAR	ITALY STAR	FR. AND GER. STAR	DEFENCE MEDAL	GEN. SERVICE MEDAL	C.V.S.M.				
AWARD	✓		✓							✓	✓				
AWARD AND CLASP											✓				
APPLICATION DISPATCHED															
RIBBON ISSUED															
MEDAL ISSUED															

Ofs
Wps

Cl.

190676

9/3/46

PREFIX | NUMBER | NAME | RANK | CODE

IBM 83961

LICENSED FOR USE UNDER CANADIAN PATENT NUMBER 315306

Mrs. Marie D. Rheaume (mother)
Lachute Mines,
Argenteuil Co.,
Que.

Jan.-46.

8497

24-1-50

MEMORIAL BAR
DATE DIS
REGN. NO. 3783

No.	Rank	Name	Class	Entered School
1539444	AC2	Rheaume, J.A.D.	WAG.3F.	22/7/40
Age	Nationality	Civil Occupation		Due to Leave
18	Canadian	Butcher		24/11/40

Intermediate Examination (8th week)

WPM. Morse R8.	Procedure 100	Theory 100	Application 100	Details of interviews resulting from Intermediate Examination
100-100	83	29 F.	41 F.	70.6% (22/9/40)

Fortnightly Progress Reports		Details of class transfers	
Date		Date	
4/11/40	Compulsory Morse Periodical reports show improvement.		Dro. 249 23-11-40 No. 4. B. + G. School Fingal, Ont.

REMARKS:

24/11/40 Average ability.
Discipline - V.G.

J. A. T. P. CANADA SPECIAL RESERVE

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) Rheaume, Joseph Arthur Louis OFFICIAL No. CAN R.53,944

(1) DATE OF BIRTH 7-7-21 AGE ON ENTRY INTO R.C.A.F. 18 years 334 days.

PLACE OF BIRTH (Parish) Hawkesbury (Town or County) Ontario

OCCUPATION IN CIVIL LIFE Butcher

TRADE IN ROYAL CANADIAN AIR FORCE Aircrewman (Standard)

RELIGIOUS DENOMINATION R.C.

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
6-6-40	18	duration of War

(c) Date of actual entry into { years Perm. 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. M. Rheaume, 183 Main St. Hawkesbury Ont. (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	5	5	34	Black	Hazel Brn	Med.	Small scar pigmented mole back of neck right side.
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

2

(8) MOVEMENTS AND CASUALTIES

Departure Authority	Unit FROM which	Unit TO which	Date of effect	Arrival Authority confirming
MO. R. 13.	R/C Ottawa	Manning Depot Toronto	6-6-40	DRO 135
DRO 149	H.L. Man. Dep. Toronto	H.L. M.D. Toronto	24-6-40	D.R.O. 83/40
DRO 104/40	#1 I.T.S. Toronto	#1 W.S. Montreal	19-7-40	DRO 143
DRO 249	no. W/Sm 4 B.B.	no 4 B.B. Fingal Out	23-11-40	dro 17/40
dro 39/40	Fingal	RCAF Rockcliffe	23-12-40	2/3-1 RM
	Canada	UK/3 PRC	2.3.41	1/41
9/41		(e) OTU	18.3.41	
87/41		1 Sig Sch	3.4.41	
94/41	1 Sig Sch	29 O.T.U. Lethbridge	24.5.41	
52/41	27 OTU.	104 Sqdn	14 7.41	20/41
	missing	104 sq	28.8.41	736.
	Death presumed		29.8.41	877a

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
DRO 135	AC.2 Std. Aircrewman	6-6-40
~~DRO 143~~	~~LAC~~	~~21-7-40~~
dro 29/40	LAC	19-7-40
dro 39/40	Sgt. (T)(P)	23-12-40
dro 39/40	remus. (special)	23-12-40

(10)

(11)

4 NAME (in full, Surname first) Rheaume, Joseph Arthur Doris OFFICIAL No. P. 53,944.

(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

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.

A

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

Official No. CAN/R 53944 Name RHEAUME Joseph Arthur Doris Rank T/Sgt (Pd)
(In full in block capitals, surname first). (Or acting appointment).

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

Date of Birth 7-7-21 Religion R.C. Occupation in Civil Life Butcher

Last Enlisted 6th June, 1940 Current Engagement D. of War

~~If a member of the Auxiliary Air Force~~ Attached to RAF from RCAF.

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

Name, address and relationship of legal next of kin (to be entered in pencil):
Mrs M Rheaume 183 Main Street East Hawkesbury, Ontario (Mother)

Name, address and relationship of person (or persons) to be informed of casualties (to be entered in pencil).
(If this person is the legal next of kin, it is only necessary to insert here "Next of Kin.")
Nof Kin

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

Section 1.—Movements and Casualties.

Unit FROM which.	Unit TO which.	Date of Effect.
	RC Ottawa	6- 6-40
RC Ottawa	No1 Mng Depot	6- 6-40
No1 Mng Depot	No1 ITS	24- 6-40
No1 ITS	No1 WS	19- 7-40
No1 WS	No4 B&GS	23-11-40
No4 B&GS	RCAF Stn Rockcliffe	23-12-40
CANADA	UK	28·2·41
UK	3 PRC UXBRIDGE	2·3·41
3 PRC UXBRIDGE	1 OTU SILLOTH	18·3·41
No. 1(C) O.T.U. Silloth	No. 1 S.S. Cranwell	3.4.41.
No 1. WING No 1. S.S.	27 O.T.U LICHFIELD.	24.5.41.
27 O.T.U Lichfield 104 Sqn.	104 Sqn Driffield No. 1 NE DEP.	14/7/41
	UXBRIDGE	29.8.41

Section 2.—Promotions, Acting Appointments (Paid or Unpaid), Reductions, Remusterings.

* Authority.	Description.	Date of Effect.
	AC2 Aircrew "STD"	6-6-40
	LAC	19- 7-40
	Aircrew "Special" T/Sgt (Pd)	23-12-40

Section 3.—Good Conduct Badges.

* Authority.	1st, 2nd, 3rd.	Awarded, Deprived, Restored.	Date of Effect.

* The authority to be quoted will be the serial number of the relevant P.O.R.

(5750—1016) Wt. 27694—1871 120M 11/40 T.S. 700
(6711—1016) Wt. 45658—3318 242M 3/41 T.S. 700

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.
~~T/Sgt~~	~~V.G.~~	~~W/Op. A.G.~~	~~On strength for posting only~~				~~18.3.41~~	~~W/Cdr~~
T/Sgt.	V.G.	Aircrew "Sp.E"	On Strength	for	or less than one month		3.4.41	S/L
T/SGT	VG	WOP/AG.	ON STRENGTH FOR TRAINING ONLY				24/5/41	S/L
T/SGT	VG.	WOP/AG	On strength for training only				14/7/41	S/L
T/Sgt.	VG	W.Op/AG	Sat.	—	—	Rec'd	29.8.41	S/L

1022-R-5

R53944

NOTIFICATION OF DEATH.

CERTIFIED that according to the records of this department Can/R.53944 Sergeant Joseph Arthur Doris Rheaume, Royal Canadian Air Force, was reported missing and is presumed, for official purposes, to have lost his life on the twenty-ninth day of August, 1941, as the result of air operations.

Information received through the International Red Cross Society states that this airman is buried in the Prisoners of War Cemetery, Neuss, Germany.

Gordon Scrutton
Flight Lieutenant,
for Director of Personal Services.

Dated at
the Air Ministry,
London,
this 24th day of April 1942.

R.C.A.F. A81-A
5M-12-44 (4876)
H.Q. 885-A81-A

DEPARTMENT OF NATIONAL DEFENCE

NAVY ═══ ARMY ═══ AIR FORCE

4
AIR

STATEMENT OF WAR SERVICE GRATUITY

DECEASED MEMBER'S NAME: Joseph A.D. (CHRISTIAN NAMES) Rheaume (SURNAME)

REGISTER NO. 49757
FILE NO. 24137
DATE 7 Sept/45
SERVICE NO. R53944
FINAL RANK OR RATING Sgt.

PAYEE: Receiver General of Canada,
ADDRESS: Director of Estates,
Ottawa, Ont.

DATE OF TERMINATION OF OVERSEAS SERVICE 29 Aout/41 DATE OF DISCHARGE 29 Aout/41

		$ ¢
A. TOTAL QUALIFYING SERVICE		
NO. OF DAYS 450 / 30 EQUAL TO 15 COMPLETE PERIODS AT $7.50		112.50
B. QUALIFYING OVERSEAS SERVICE		
NO. OF DAYS 196 LESS INELIGIBLE DAYS, EQUAL TO 196 DAYS @ 25c. PER DAY		49.00
C. SUPPLEMENT FOR OVERSEAS SERVICE		
DAILY RATES AT DISCHARGE		
PAY	$3.20	
SUBSISTENCE OR LODGING AND PROVISION ALLOWANCE	$ .85	
ADDITIONAL PAY	$	
	$	
	$	
DEPENDENTS' ALLOWANCE 1/30 OF $	$	
TOTAL	$4.05 ×7 = $ 28.35	
NO. OF DAYS 196 / 183	×$ 28.35	30.36
D. WAR SERVICE GRATUITY		191.86
E. DEDUCTIONS — OVERPAYMENT OF PAY AND ALLOWANCES	$	
DEPENDENTS' ALLOWANCE AND ASSIGNED PAY	$	
OTHER DEDUCTIONS	$	
F. TOTAL AMOUNT PAYABLE		191.86

G. YOUR PORTION OF GRATUITY IS—

DEPENDENTS' ALLOWANCE IN ISSUE TO YOU $ ____ OF $ ____
TOTAL DEPENDENTS' ALLOWANCE IN ISSUE $

SEP 22 1945
J.K. ..... C.I.E.
R.G. ..... N.I.
B.L. ..... P.A.

P. & A. Bal. Trans = $ Trust Account
Journal Voucher # G 193

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
LGS	RK

TREASURY	
CHECKED BY	DATE

SERVICE REPRESENTATIVE

Treasury Office.
Air Force Services
OTTAWA, - CANADA.

Rec'd. SEP 11 1945

P. & A. SECTION

SPECIAL RESERVE

R.C.A.F. Special Reserve

Interview Report

~~Non-Flying List~~ ~~Administration~~
~~Technical~~
~~Equip. & Accounts~~

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

SURNAME	CHRISTIAN NAMES IN FULL	Age 18
RHEAUME	Joseph Arthur Doris	Height 5'6½"
		Weight 142
ACADEMIC STANDING:		~~Married or~~ Single
		~~No. of Children~~

Attended Hawkesbury High School almost four years. Would have attained Junior Matriculation in four months but was obliged to quit school on account of financial reasons. Almost Junior Matriculation standard

FLYING HISTORY (PARTICULARLY DURING LAST YEAR)

No

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

Youth

SPORTS:
EXTENSIVELY: hockey, baseball
MODERATELY: swimming, rugby, softball
OCCASIONALLY: boxing

HOBBIES:
trumpet player

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

DRESS: ~~FLASHY-TASTEFUL~~-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-BELLIGERENT~~

SUITABLE IN ALL RESPECTS FOR SERVICE IN R.C.A.F.....YES Yes NO

FULLY QUALIFIED IN PERSONAL RESPECTS FOR COMMISSIONED RANK...YES NO No

INFORMATION ELUCIDATED FROM INVESTIGATION IN ACCORDANCE WITH A.F.M. 6/1 Para.1(b)
Mr. E. Bertrand, M.P. takes pleasure in recommending him - family held in high esteem
J.B. Woods states he is bright, ambitious and should be a credit to R.C.A.F.

SUMMARY OF ALL OF THE ABOVE:

Distinctly not officer calibre. Recommended as Air Gunner or Wireless. Prefers Wireless

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

RECOMMENDED FOR:

Air Crew

DATE: 9/5/40 RECRUITING CENTRE: Ottawa SIGNATURE OF OFFICER:

A.F.M.5

(C.S. Stonehouse) F.O.

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

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

WRITE PLAINLY WITH UNFADING INK THIS IS A PERMANENT RECORD

FORM 6

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

PROVINCE OF ONTARIO—CERTIFICATE OF REGISTRATION OF DEATH

K53944

1. PLACE OF DEATH County or District of: Overseas Township of:
If in City, Town or Village: (Name) Street: (If death occurred in a hospital or institution, give the name instead of street and number) House No.:

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

3. PRINT FULL NAME OF DECEASED Rheaume (Family name) Joseph Arthur Doria (Given name or names in usual order)

RESIDENCE No. 183 Street: Main Street E. City, Town, Village or Township: Hawkesbury Province: Ontario
(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

8. BIRTHPLACE: Hawkesbury, Ontario. (Province or Country)

9. DATE OF BIRTH: July 7th, 1921. (Month) (Day) (Year)

10. AGE in

Years	Months	Days	If less than one day old
20	1	22	hrs. or min.

OCCUPATION

11. Trade, profession or kind of work as spinner, teamster, office clerk, etc.: Wireless Operator Air Gunner

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

13. Date deceased last worked at this occupation: 29-8-41.

14. Total years spent in this occupation: 14 mos.

15. If married give name of wife or husband of deceased: Single

FATHER

16. NAME: Joseph Omer Rheaume

17. BIRTHPLACE: Alfred, Ontario. (Province or Country)

MOTHER

18. MAIDEN NAME: Maria Daigneault

19. BIRTHPLACE: Papineauville, P.Q. (Province or Country)

20. Person giving information sign here: M. J. O'Neill F.O. for R.C.A.F. Records Officer.
Address:
Relationship to deceased:

21. Place of Burial, Cremation or Removal:
Date of burial or removal:

22. Burial Permit was issued by:
Address:

23. UNDERTAKER: (Name and address)

MEDICAL CERTIFICATE OF DEATH

24. DATE OF DEATH: August 29th (Month) (Day) 19 41 (Year)

25. 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) Previously reported missing
due to during air operations Over-
(b)
due to seas - now for official purposes
(c)
presumed to have died.

Morbid conditions, if any, giving rise to immediate cause (stated in order proceeding backwards from immediate cause).

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

PHYSICIAN — Underline the cause to which death should be charged statistically

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

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

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

29. If death was due to external causes (violence) fill in also the following:—
Accident, suicide or homicide? (State which) Date of injury: 19
Manner of injury: (How sustained)
Nature of injury:
Specify whether injury occurred in **industry**, in **home**, or in **public place**

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

30. Division Registrar's Record No.

31. Filed 19 (Division Registrar)