R74067
TASSE
JOSEPH
HECTO

R0074067 | TASSE JOSEPH HG | FS3

1 NUMBER | 9 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	CDN. SERV. MEDAL	C.V.S.M.			
AWARD	✓		✓						✓	✓	✓			
AWARD AND CLASP											✓			
APPLICATION DISPATCHED														
RIBBON ISSUED														
MEDAL ISSUED														

2220663

3/3/49

NUMBER NAME RANK

PREFIX CODE

IBM 83961

LICENSED FOR USE UNDER CANADIAN PATENT NUMBER 315306

2144 8/4/50

Mrs. Lucienne Tasse (mother)
42 Cobourg St.,
Ottawa,
Ont.

May-46.

French

MEMORIAL BAR
DATE DESP
REGN. NO 2684

10M—3-40 (4425)
H.Q. 1772-45-8

H.Q. FILE NO. 1022-T-1032

NAME TASSE, Joseph Hector Georges

REGT'L NO. R74067

RANK [redacted]. Air Gunner UNIT ~~XXXXXXX~~ PRESUMED DEAD

CABLE NO.	CABLE DATE	NATURE OF CASUALTY	CAS. LIST NO.	CAS. LIST DATE
		DATE OF DEATH: 9 Nov. 42 MOTHER LIVING: YES WIFE: NA		
		MINISTERIAL CARD: 27-11-42 ROYAL MESSAGE: 30-9-43 MEMORIAL CROSS: 25-9-43		
		To mother & father To mother & father To mother 4 Oct 43		
		To mother & father 28 June 43 (french Card)		
		Mr. & Mrs. Joseph Emmanuel Tasse, 42 Cobourg St., Ottawa, Ont.	R.C.	

AIR FORCE No. R 74067 / R

SURNAME: Fasse

FULL CHRISTIAN NAMES: Joseph Hector Georges

ENLISTMENT — PLACE: Ottawa Ont. DATE: 14-9-40.

RE-ENLISTMENT

C.R. FILE NUMBER

RECORD OF SERVICE AIRMEN

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

7. BIRTH: DATE: 22-9-21. PLACE: Hull Que. CITIZENSHIP: British.

FATHER (FULL NAME): Emmanuel Fasse.

BIRTHPLACE: Ottawa, Ont.

MOTHER (FULL MAIDEN NAME): Lucienne Carisse

BIRTHPLACE: Hull, Que.

8. EDUCATIONAL STANDING

HIGH SCHOOL ENTRANCE	X Ont.
JUNIOR MATRICULATION	X Ont.
SENIOR MATRICULATION	
TECHNICAL SCHOOL	
UNIVERSITY	
CORRESPONDENCE COURSES	

62

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

N.A.

9510

10. PREVIOUS ARMY, NAVY OR AIR FORCE SERVICE

Nil.

0

11. HONOURS-AWARDS, MENTIONS

	AUTHORITY	DATE
N.A.		
Air Gunners Badge	1/B34243	24-11-41

12. FLYING EXPERIENCE ON ENLISTMENT (HOURS)

SOLO — DUAL — PASSENGER —

13. RELIGION – Roman Catholic.

14. LANGUAGES – French & English.

3

15. SPORTS – Swimming, softball, gymnastics.

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: Emmanuel Fasse. RELATIONSHIP: Father. (Contd. Next of Kin.)

ADDRESS: 42 Cobourg St. Ottawa Ont. D.R.O. 8222

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	14 9 40				

22. TEMPORARY DUTY AND MISCELLANEOUS ENTRIES

FROM	TO	DATE	D.R.O.
Ent. Sub. Allowance		5-1-41	1ED2.
Ceases to be ent. to subs. allow.		15-1-41	1ED22.
Entitled to Rations Allowance		16-1-41	1ED22.
Auth. to draw rations & occ. pub. qts		3-2-41	2WS28.
Jec. Rcvt. qts. & draw rtns.		25-2-41	E180
Issued Special T.W. No. 616887a		15-9-41	8222
Qts & Rtns.		27-10-41	4/Sy223
Occ. pub. qts & draw rtns		11-12-41	12/301
auth. to draw rtns & occ pub qts		3-2-41	2WS28
Entitled Ration Allwce		16-1-41	1ED22
Ceases to be Ent Sub allowance		15-1-41	1ED22
Ent. Sub. allowance		5-1-41	1ED2
APE - 425 Clarence St.	Ottawa		Ont.
			10502

23. DOCUMENT CONTROL (INDICATE RECEIPT BY DATE)

R60	R79	B465	X-RAY	AFM-13	IDN. CARD	KX
24-9-40		20-9-40				

AIR FORCE No. R74067

SURNAME: TASSE, FULL CHRISTIAN NAMES: JOSEPH HECTOR GEORGES

ENLISTMENT — PLACE Ottawa Ont. DATE 14-9-40.

RE-ENLISTMENT

C.R. FILE NUMBER

RECORD OF SERVICE AIRMEN

12.

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.
T.O.S.	1MD Toronto	16	9	40	DMP 233.
S.O.S.	1MD to 118(CAC) St. John N.B.	8	10	40	DMP 245.
S.O.S.	S.J. Det.	3	4	41	1CAC3.
T.O.S.	1ED Toronto (amended)	4	1	41	1ED3-5
T.O.S.	1ED Toronto	3	1	41	1ED5.
S.O.S.	1ED Toronto	31	1	41	1ED26.
T.O.S.	2WS. Calgary	1	2	41	2WS.28.
S.O.S.	2W. S. Calgary	22	7	41	2WS171
T.O.S.	K.T.S. Trenton	23	7	41	C180.
S.O.S.	RCAF Sta. Trenton Ont.	25	10	41	6253.
T.O.S.	#4B&G.S. Fingal Ont.	26	10	41	4BG223
S.O.S.	4BGS Fingal	23	11	41	4BG(19)243.
T.O.S.	1W Depot Halifax	26	11	41	1W301
S.O.S.	1W Depot to RAF Transport Pool	17	12	41	1W302 ✓
T.O.S.	3PRC	26	12	41	RAF3
S.O.S.	3PRC to 1AAS	11	4	42	RAF40
S.O.S.	1AAS to 70G.S.	27	5	42	RAF34
	Missing 6.	9	11	42	RAF82
	Pend AR E369				
	W.S.G Comp	6	10	44	
	Missing	9	11	42	
	PX 5744	12	11		
	F.B. – from operations Wellington 425(RCAF) Squdn				
	PW 9 Nov 1/42 PCX 218 June 8				
T.O.S.	2WS Calgary	1	2	41	2WS 28
S.O.S.	1ED Toronto	31	1	41	1ED26
T.O.S.	1ED Toronto	3	1	41	1ED5.
T.O.S.	1ED. Toronto (amended)	4	1	41	1ED3-5
S.O.S.	S.J. Det. 115 CAC	3	1	41	1CAC3.

2. RECLASS'NS-PROMOTIONS-ETC.

RANK	EFFECTIVE			D.R.O.
AC2	14	9	40	DMP 233.
LAC	3	3	41	2WS55
T/Sgt pp T4	24	11	41	4BG293.
T/Flt/Sgt.	1	9	42	RAF 64.
D/T S	24	5	42	A7RO 113

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	
4-7-40	R-100	A1B-A3B.	

Casualty

4. TRADE AND CHARACTER

TRADE	GROUP	EFFECTIVE			D.R.O.
W/O & A/C	Stg.	14	9	40	DMP 233.
Air Gunner.	S	7	10	41	2243
Air Gunner 3055.	S/B	24	11	41	4BG a 293 1

TRADE PROFICIENCY	CHARACTER ASSESSMENT	DATE OF R41

5. COURSES-TESTS-ETC.

SUBJECT	RESULT	DATE	AUTHORITY
Chart 1aas Completed 6CAF Squadron	270 %	21 5 42	RAF 84

6. LEAVE

FROM	TO	DAYS	REMARKS	D.R.O.
16-9-41	30-9-41	14		2228
12 days Comb. leave up. 6-12-41				4BG a 293

1 R.C.A.F. OVERSEAS 2 ENLISTMENT 3 MARTIAL STATUS 4 5 PRESENT MARTIAL STATUS 6 7 8 HIGH & TECH. SCHOOL EDUCATION 9 10 11 12 13 14 15 16 C. OF E. 17 BAP. 18 U.C. 19 PRES. 20 R.C. 21 HEB. 22 MIS. 23 OTHER PROV. 24 SERV. RELIGION 25 26 27 28 29 30 31 32 33 PROVINCE OF ENLISTMENT 34 35 36 37 DISCHARGE 38 AC

AIR FORCE No.	SURNAME	FULL CHRISTIAN NAME	ENLISTMENT/APPOINTMENT PLACE	DATE	RELIGION
R 74067	TASSE	JOSEPH HECTOR		14.9.40	R.C.

ROYAL CANADIAN AIR FORCE

RECORD OF SERVICE

OFFICERS, AIRMEN AND AIRWOMEN

R.C.A.F. FORM R230
100M-5-43 (3287)
H.Q. 885-R-230
K. P. 75434

BIRTH DATE	PLACE	COUNTRY	CITIZENSHIP	RACIAL ORIGIN
22.9.21				

CIVIL EDUCATION

PUBLIC SCHOOL	JUNIOR MATRICULATION
HIGH SCHOOL ENTRANCE	SENIOR MATRICULATION
TECHNICAL SCHOOL	UNIVERSITY
CORR./BUSINESS COURSES	LANGUAGES SPOKEN

CIVIL OCCUPATIONS AND EXPERIENCE

Student.

PREVIOUS SERVICE

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

PARTICULARS OF FAMILY

SINGLE, MARRIED, WIDOWER, DIVORCED

WIFE (FULL MAIDEN NAME) OR HUSBAND

PRESENT ADDRESS (IN PENCIL)

PLACE OF MARRIAGE DATE

AUTHORITY (IF AFTER APPOINTMENT/ENLISTMENT)

CHILDREN

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

NAME(S), ADDRESS(ES), RELATIONSHIP OF PERSON(S) TO BE INFORMED OF CASUALTIES (IN PENCIL)

EMPLOYMENT AS INSTRUCTOR OFFICER AIRMAN/AIRWOMAN

TYPE	FROM	TO	TYPE	FROM	TO

OFFICERS

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

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

AIRMEN AND AIRWOMEN

RANK	DATE	AUTH.	TRADE	DATE	AUTH.
Sgt.	24 11 41		A.G.		
T.F.P. Sgt.	1 9 42				
T.Fl. Sgt.	24 5 42	AFRO 1113/44			

OFFICERS, AIRMEN/AIRWOMEN

COURSE OR TRADE	GRP.	%	PF	DATE

AIR FORCE No. R74067

SURNAME: TASSE

FULL CHRISTIAN NAME: JOSEPH HECTOR

ENLISTMENT/APPOINTMENT

PLACE

DATE 14.9.40

RELIGION: R.C.

R.C.A.F. FORM R230

TYPE OF LEAVE

FROM	TO	No. DAYS	DESCRIPTION	AUTH.

HONOURS, AWARDS AND MENTIONS

DATE	AWARD	AUTHORITY

TYPE OF AIRCRAFT ON WHICH MOST PROFICIENT

(IF UNDER INSTRUCTION STATE NUMBER OF HOURS ON EACH TYPE AND TESTS PASSED)

SERVICE MACHINES FLOWN

CHARACTER AND TRADE ASSESSMENT

DATE	CHARACTER	TRADE ASSESSMENT

POSTINGS, ATTACHMENTS & TEMPORARY DUTY

SOS	TOS	FROM	TO	DATE	AUTHORITY
		1 A.A.S.		11 4 42	102/42
		7 A.G.S		27 5 42	136/42
		23 OTU		2 6 42	120/42
		425 Sqdn		19 8 42	16/42
		Missing		9 11 42	AFRO 1/43
		Presumed Dead		9 11 42	AFRO 1347

ALL OTHER CASUALTIES

CASUALTY AND DATE	AUTHORITY

Emb. 13.12.41

SPECIAL RESERVE
ROYAL CANADIAN AIR FORCE

RECORD OF SERVICE AIRMEN

A.F. No.	Surname	Christian Names	Religion
R 74067	Tasse	Joseph Hector Georges	R.C.

Born 22-9-21 Place Hull Country Quebec Citizen of Canada Racial Origin

ENLISTMENT		CIVIL EDUCATION		PREVIOUS SERVICE
Date 14-9-40		High School Entrance	Jr. Mat. Completed Lower School Sr. Mat.	None
At Ottawa		Technical School	Corres. Courses	
Term Duration		University		

Rank	Date			Med. Cat.	Date		
AC2	14	9	40	a	14	9	40
LAC	3	3	41				
T/Sgt (pd)	24	11	41				
29/42 (50/64) T/F/Sgt	1	9	42				

CIVIL OCCUPATIONS AND EXPERIENCE

Student

COURSES AND TRADE TESTS

Trade	Grp.	%	PorF	Date Rem.			Trade	Grp.	%	PorF	Date Rem.		
Aircmn	Std			14	9	40							
Air Gunner	Std	DRO 243		7	10	41							
Remust A/G	Spec	DRO 293		24	11	41							

PARTICULARS OF FAMILY ~~M~~ S ~~D~~

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)

(Father) 42 Cabana St., Ottawa, Ont.

Mrs Lucie Tasse (Mother) 42 Cabana St. Ottawa Ont.

LEAVE

From	To	Auth. and Description
16-9-41	30-9-41	(14 days) D.R.O. 225
25-11-41	6-12-41	DRO 293 Embarkation leave & Transit Time

CHARACTER AND TRADE ASSM. HONOURS, AWARDS AND MENTIONS

Date	Character	Trade and Assm.	Honours and Awards	Signature

MOVEMENTS AND CASUALTIES

Authority	Unit from	Unit to	Date	Authority	Unit from	Unit to	Date
M.O. R 13	RC	No 1 MD		D.R.O. 222 Issued Specially	Star	~~Sarnt~~ #6	16887 15-9-41
	Ottawa	Toronto	15-8-40	D.R.O. 253	C.F.S. Trenton	#4 B+G Pingal	25-10-41
DRO 243	No 1 MD	EAC		DRO 293	Auth to wear Summers' Badge		24-11-41
	Toronto	Halifax	8-10-40	DRO 293	HMBoC. S. Angel.	HY Depot Halifax	25-11-41
?	EAC	No 1 CAC		320	1 Depot	RASC	13/12/41
	Halifax	St John		182/41		Embarkation	13-12-41
3	No 1 CAC	No 1 CD	4-1-41	(3)		3 PRC	26-12-41
	St. John	Toronto		102/42 (40/26)	3 PRC	1 AAS	11-4-42
26	No 1 CD	No 2 NS	31-1-41	78/42 (9/34) 136/42 (36/53)	1 A.A.S.	7 A.G.S.	27-5-42
	Toronto	Calgary		139/42 (40/33) 120/42 (43/84)	7 A.G.S.	23 O.T.U.	2-6-42
171	HQWD	RCAF		189/42 (2/62) 16/42 (48/55)	23 O.T.U.	425 Sqdn	19-8-42
	Calgary	Trenton	22-7-41	48/42 (22/88)	425 Sqdn	1 Depot N.E.	10-11-42

Hiring H255 9/11 1163

R.C.A.F. R.44C
100M—12-40 (8755)
H.Q. 1062-3-58

(OVER)

				Completed No 6 EATS Refresher Course			21-5-42
				Obtained 77.00%	IAAS 78/42	(9/34)	

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

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

Can R 74067 Official No. R 74067 Name TASSE Joseph Hector Georges Rank T/Sgt.
(In full in block capitals, surname first). (Or acting appointment).

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

Date of Birth 22-9-21 Religion R.C. Occupation in Civil Life Student

Last Enlisted 14-9-40 Current Engagement D.O.W.

If a member of the Auxiliary Air Force —

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

Name, address and relationship of legal next of kin (to be entered in pencil):
TASSE. 42 Bolbourg St Ottawa Ont (Father)

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.")
next-of-Kin.

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

Section 1.—Movements and Casualties.			Section 2.—Promotions, Acting Appointments (Paid or Unpaid), Reductions, Remusterings.		
Unit FROM which.	Unit TO which.	Date of Effect.	* Authority.	Description.	Date of Effect.
S.S. Finigal	1Y. Depot Halifax	25-11-41	Enlist	A.C.2. Aircrew Std.	14-9-40
1Y. Depot Halifax	R.A.F. T.P.	13-12-41		Air Gunner Std.	7-10-41
	Emb. Can	13-12-41		Sgt Air Gunner Sp.	24-11-41
	3. P.R.C.	26-12-41	PoR 29/42	Promoted T/Sgt.	1:9:42
	No. 1 A.A.S.	11.4.42			
No. 1 AAS.	No. 7 A.G.S.	27.5.42			
No. 7 AGS.	23 OTU	2.6.42			
No. 23 O.T.U. Pershore.	No. 425 Squadron	19.8.42.			
425 Squadron	No. 1 RAF Depot	10 Nov 1942			
	(Missing)				

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.

Wt. 23173/1099 357M 8/41 McC. & Co. Ltd. 51-994.

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.
F/Sgt.	V.G.	Air Gunner	ON STRENGTH FOR TRAINING ONLY.				27.5.42	G/Capt.
F/Sgt	V.G.	Air Gunner	ON STRENGTH FOR TRAINING ONLY				2.6.42 ~~23.5.42~~	P/O
Sgt.	V.G.	Air Gunner	On Strength for Training Only				19-8-42	S/Ldr.
F/Sgt.	V.G.	Air Gunner.					10 Nov 42.	F/Lt.
POR 42/42.	20-10-42	25-10-42.	6 days Annual Leave RW. 88745.					F/Lt.
POR 183/42	Ann. Leave	8 days	11/8/42	–	18/8/42	RW. 587701		P/O
P.OR 75/42	23.5.42	26.5.42	3P	4D	P/O	SWO 504230		

Record of Leave and Issue of Free Travelling Warrants

First entry to be made at bottom of above section; subsequent entries to be made directly above in sequence.

Section 5.—Results of Courses of Instruction, Recommendations for Aircrew Duties, Recommendations for Commissioned Rank (K.R. 2132, (19) (A)). Decorations, Mentions, Special Commendations by A.Os.C., etc.

Authority.	Nature.	Date of Effect.
P.OR 48/42	Completed 6 EATS course at 1 AAS & obtained	70%

#3

CONFIDENTIAL (2)

R.C.A.F. M.3
25M—2-40 (3923)
H.Q. 1062-10-2

ROYAL CANADIAN AIR FORCE

Medical Board held at OTTAWA, Ontario. *Date* July 4, 1940

FILE NUMBER

Surname TASSE *Chr. Names* Georges Hector (18)
Nature of Commission *Date of Birth* 22-9-21 *Married or Single* Single
Branch R.C.A.F. *Hours Flown* Nil.
Address A25 - McLaren St. OTTAWA, Ontario.

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	Tonsillitis 4 yrs. ago - none since
	Diphtheria, Scarlet Fever or Scarlatina	NO
(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	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	Smallpox 7 years ago - uneventful recovery.

Education 3rd Form - Senior Matric.
Present Occupation School Lad. Hobbies
Previous Service Nil.
Athletics Football, Softball, (School Teams) Swimming.
Habits—Smoking 6 cigs. / day Alcohol Nil.
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 (....) Dead—Cause
Sisters (1) Alive—Health Good (....) Dead—Cause

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

Date July 4, 1940 *Signature* *Witness* John J. Parter.

GENERAL MEDICAL AND SURGICAL EXAMINATION

Impression given by *(a)* Physique ..... Standard ..... *(b)* Mentality ..... Alert

Body Marks, Scars, Deformities ..... Nil.

Size of Thyroid Gland ..... Normal

Surgical Abnormalities ..... Nil.

Results of Wounds, Injuries, Operations ..... Nil.

	Date 4-7-40	Assessing Room	Date	Assessing Room	Date	Assessing Room	Remarks on any Abnormalities Found
Height (ins.)	67						
Weight (lbs.)	127						*Date* July 4. 1940
Chest Circumference (ins.)	31½						
Body Build (lbs.)	-9						
Leg Length (ins.)	40½						Sinus Arrhythmia
Pulse Rate — Sitting	84						B.P. 128/76, 124/82
Pulse Rate — Standing 1st	108						
Pulse Rate — Standing 2nd	96						126/82
Pulse Rate — After Exercise	120						
Pulse Rate — Time to Normal	25						
Arterial Walls	Soft.						
Blood Pressure — Systolic	124						
Blood Pressure — Diastolic	82						
Heart — Size	Norm.						✓
Heart — Sounds	Norm.						
Heart — Rhythm	Norm.						
Lungs	Norm.						
Breath held	65 / 80						
Expiratory Force	120						
Vital Capacity (Best of 5)	3900						
Reflexes — Knee	Sl Ex						*Date*
Reflexes — Ankle	Sl Ex						
Reflexes — Triceps	Sl Ex						
Reflexes — Abdominal	Norm.						
Reflexes — Plantar	Norm.						
Cranial Nerves	Norm.						
Balancing Rod	R. L. 1S 1S	R. L.	R. L.	R. L.	R. L.	R. L.	
Self Balancing	R. L. 2V 2FS	R. L.	R. L.	R. L.	R. L.	R. L.	
Tremors — Fingers	Sl Fl						
Tremors — Eyelids	Sl. F						*Date*
Abdomen — Liver	Norm.						
Abdomen — Spleen	Norm.						
Abdomen — Muscular Tone	Good						
Urine — Albumen	Neg.						
Urine — Sugar	Neg.						
Initials of M.O.	JPm						

40 mm. Hg. Test ..... 7/889.978.778.88 ..... 55 Secs.

Date 13/9/40 ..... 8/10109, 988, 888, 777 ..... 62 secs.

Date .....

Date .....

Date .....

Remarks by Consultant.

Tests Satisfactory.

John J. Parter.
Lieut. R.C.A.M.C.

EYE EXAMINATION

History	Negative		
Visual Acuity	R. 20/20 , c̄ 2.25 = 20/200	+	
	L. 20/20 , c̄ 2.25 = 20/200	+	
Colour Vision	Normal		
Red, Green	Normal		
Diaphragm Test (P.D. = 55)	Norm.		
Convergence	C. = 8 cms.		
	S. C. = 6.5 cms.		
Accommodation	R. 8.5 cm.		
	L. 8.5 cm.		
Cover Test	Right Sl. Ex. R.R.		
Fundi and Media	Normal.		
Fields	Wide.		
Remarks: Satisfactory.			
	Initials of M.O. J.P.	*Initials of M.O.*	*Initials of M.O.*
	Date July 4, 1940	*Date*	*Date*

EXAMINATION OF EAR, NOSE AND THROAT

History: Negative except sore throat 4 years ago - none since.

Hearing	R. Ear	W.V. 20		
	L. Ear	W.V. 20		
External Ear, Meatus Membranes	R. Ear	Normal		
	L. Ear	Normal.		
Middle Ear, Eustachian Tubes	R. Ear	Tubes		
	L. Ear	Normal		
Cochlear Apparatus	R. Ear	Normal		
	L. Ear	Normal		
Vestibular Apparatus	R. Ear	Normal		
	L. Ear	Noraml		
Buccal Cavity		Good		
Teeth		Fair	Count 26, Points 15	
Gums		Good		
Pharynx		Healthy		
Nasopharynx		Healthy		
Nose		Clear Airway		
Larynx		Normal.		
Remarks: There are 2 carious teeth which require attention. Otherwise satisfactory.		*Initials of M.O.* J.P.	*Initials of M.O.* J.C.M.	*Initials of M.O.*
		Date July 4, 1940	*Date* 13/9/40	*Date*

HISTORY OF PRESENT CONDITION

Date July 4, 1940

Response to tests satisfactory. Alert and keen.

Cat. A1B A3B

John J. Parter,
Lieut. R.C.A.M.C.

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

13/9/40 - 40 mm. Test - Time improved from 55 to 62 secs.
Teeth - Count 26, points 15. Carious teeth not yet attended to. Cat. A.B, A3B.

H.E. Ellmines
Lt. R.C.A.M.C.

OBSERVATIONS AND FINDINGS BY PRESIDENT OF BOARD

Date.....

Air Gunner

AIR CREW
WIRELESS-OPERATOR
AIR-GUNNER

AIR FORCE No. R.74067 POSTED TO No. 1 Manning Depot, Toronto, Ontario. TRADE

16-9-40 07504

ROYAL CANADIAN AIR FORCE

(ATTESTATION PAPER)

22-6-40

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

1. Surname Tassé FULL Christian Names Joseph, ~~Louis~~, Hector, Georges
2. Present Address 425 Clarence st. Ottawa, Ontario Telephone —
3. Permanent Address 425 Clarence street, Ottawa, Ontario.
4. Place of Birth Hull, Quebec Citizenship French Canadian
5. Date of Birth 22 September 1921 Married, Single, Widower, Separated, Divorced Single
6. Particulars of Children

Name	Date of birth	Name	Date of birth
	NA		

7. Occupation Student 8. Religion Roman Catholic (State denomination)
9. Languages French (3rd form) English (3rd form) (State proficiency)
10. Next of Kin (Full Name) ~~Aime Tassé~~ Emanuel Tassé Relationship ~~Uncle~~ Father
    " Address (373 Lyon St. Ottawa Ont.)
11. Father (Full Name) Emmanuel Tassé Birthplace Ottawa Ont.
    " Address 425 Clarence Ottawa Ont. Citizenship French-Canadian
    " Occupation Painter
12. Mother (Full Maiden Name) Lucienne Carisse Birthplace Hull, Quebec
    " Address 425 Clarence Ottawa Ont. Citizenship French-Canadian
13. Details of any Naval, Military or Air Force Service:

Unit	Place	Rank	Trade	Date From	Date To	Reason for discharge
		NA				

R.C.A.F. Records Office Recd SEP 25 1940 O.K. C.I.B. MH R.6 N.I. Mcd S.L. P.A.

14. Honours, Awards, Mentions NA
15. Are you now on any Naval, Military or Air Force Reserve? N/A 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. Form R. 100
100M—2-40 (3924)
H.Q. 1062-3-83

52-170

ECR

21. Particulars of Education:

—	Name of school	Date From	Date To	Courses—Subjects, etc.
Primary Education—Public or Separate School	Bréboeuf School	1932	1936	primary Education - French - English.
High School—Collegiate Institute, etc.	De La Salle Academy	1936	1940	Middle School - Physics - Algebra French and English literature.
Technical School				
University or School other than above	Grignon School	1928	1932	primary education.
Correspondence Courses, etc.				

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

Employer and place	Duties, trades, positions	Date From	Date To	Reason for leaving
	N.A			

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. None

25. Sports engaged in. State: extensively, moderately, occasionally swimming - Softball gymnastics (moderately)

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. ——
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
Brother Denis	373 Sussex Ottawa	professor at La Salle Academy
Mr. Roméo St Denis	96 Charlotte st. Ottawa	Civil Service

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 June 22 1940. Signature Georges Tassé

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, JOSEPH HECTOR GEORGES TASSE 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 Sept. 14th, 1940. Georges Tassé
Signature of Recruit

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

I, JOSEPH HECTOR GEORGES TASSE do sincerely promise and swear (or solemnly declare) that I will be faithful and bear true allegiance to His Majesty.

Date Sept. 14th, 1940 Georges Tassé
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, Canada. this fourteenth day of September 1940

E.L. O'Leary

(E.L. O'Leary) Flying Officer, Commanding Officer, RCAF 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 ..... Smaw pox age 7

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

Georges Tassé
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) ..... NIL

2. Height 5 feet 7 inches. 3. Weight 127 pounds.

4. Complexion Medium 5. Color of Eyes Brown Hair Brown

6. Development { Good / ~~Fair~~ / ~~Poor~~ } 7. Chest Measurement—Full expiration 33 inches
Range of expansion 2½ 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 Teeth Fair

11. Urine—Albumen Negative Sugar Negative

12. Abnormalities (Congenital and Pathological) found on Examination .....
Examined to - day and found fit for catergery

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 A1B / A3B

Any special remarks of the Medical Officers X.Ray Negative.(Chest)
Capt. RCAMC

Date July 4th 19 40

J B Martin Capt RCAMC — President
J J Hanley Maj RCAMC — Member
Member

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

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

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 TASSE (Family name) JOSEPH GEORGES HECTOR (Given name or names in usual order)

RESIDENCE No. 42 Street Cobourg St. City, Town, Village or Township Ottawa 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 Quebec (Province or Country)

9. DATE OF BIRTH September (Month) 22nd (Day) 1921 (Year)

10. AGE in

Years	Months	Days	If less than one day old
21	1	18	....hrs. or ....min.

OCCUPATION

11. Trade, profession or kind of work as **spinner, teamster, office clerk,** etc. 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 Nov.9/42

14. Total years spent in this occupation Two

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

FATHER

16. NAME Tasse, Emmanuel

17. BIRTHPLACE Ontario (Province or Country)

MOTHER

18. MAIDEN NAME Carisse, Lucienne

19. BIRTHPLACE Que. (Province or Country)

20. Person giving information sign here ..... 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 November (Month) 9th (Day) 42 (Year) 19....

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

CAUSE OF DEATH

		PHYSICIAN
I. **Immediate cause** Give disease, injury or complication which caused death, **not** the mode of dying, such as heart failure, asphyxia, asthenia, etc.	(a) Reported missing after air operations, now for official purposes, presumed dead.	Underline the cause to which death should be charged statistically
Morbid conditions, if any, giving rise to immediate cause (stated in order proceeding backwards from immediate cause).	due to (b) ..... due to (c)	
II. **Other morbid conditions** (if important) contributing to death but **not causally related to immediate cause.**	....	

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? Accident (State which) Date of injury Nov.9th 19.... 42
Manner of injury Presumed killed during air operations (How sustained)
Nature of injury .....
Specify whether injury occurred in **industry,** in **home,** or in **public place** public place

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

30. Division Registrar's Record No. .....

31. Filed ..... 19.... ..... (Division Registrar)

WP

ROYAL CANADIAN AIR FORCE

R.C.A.F. R. 45
40M—8-40 (6622)
H.Q. 1062-2-126

Individual Record of Flying

RANK LAC NO. R74067 NAME TASSE G.

UNIT	Month ending	SINGLE-ENGINE AIRCRAFT												MULTI-ENGINE AIRCRAFT												CREW DUTIES						Passenger		TOTAL	
		DAY						NIGHT						DAY						NIGHT															
		Captain of Aircraft		2nd Pilot		Dual		Captain of Aircraft		2nd Pilot		Dual		Captain of Aircraft		2nd Pilot		Dual		Captain of Aircraft		2nd Pilot		Dual		Observer		Air Gunner		Other					
		(A)		(B)		(C)		(D)		(E)		(F)		(G)		(H)		(J)		(K)		(L)		(M)		(N)		(O)		(P)		(Q)		(R)	
		Hrs	Mins	Hrs	Mins	Hrs	Mins	Hrs	Mins	Hrs	Mins	Hrs	Mins	Hrs	Mins	Hrs	Mins	Hrs	Mins	Hrs	Mins	Hrs	Mins	Hrs	Mins	Hrs	Mins	Hrs	Mins	Hrs	Mins	Hrs	Mins	Hrs	Mins
NO. 4, B. & G. FINGAL, ONT.	NOV 2 4 1941																											9	50			9		9	50

CERTIFIED CORRECT

Signature J. Church F/L
for C.O. No. 4 B. and G. School, FINGAL, ONT.

R. C. A. F.

AIR CREW ENLISTMENT AGREEMENT

1. Joseph Hector Georges Tassé
I, the undersigned, do acknowledge that I have read, understand, and agree to the following conditions of Service in the event of my being accepted for enlistment in the Royal Canadian Air Force as Wireless Operator - Air Gunner (Aircrew)

That I will be called upon to perform other than Air Crew duties until the R.C.A.F. is in a position to commence my training as such.

2. If at any time I am found unsuitable for further training in the above category, I understand that:

(i) I may be re-mustered to another Air Crew category for which I am found suitable,

or

(ii) If found unsuitable for any flying duties, I may be re-mustered for service in ground duties.

Wm. Gent
(WITNESS)

Georges Tassé
(SIGNATURE OF APPLICANT)

Sept. 14th, 1940
(Date)

Sept. 14th, 1940.
(Date)

A.F.M. 27
3-9-40

R.C.A.F. Records Office
Rec'd SEP 25 1940
O. K. ..... C.I.B. .....
R. C. ..... N. I. .....
S. L. ..... P. A. .....

OFFICIAL ROYAL CANADIAN AIR FORCE CASUALTY NOTIFICATION

NUMBER R74067 RANK F/SGT. TRADE AIR/GUNNER (SP GR) UNIT 425 SQDN (OVERSEAS)

NAME TASSE, JOSEPH HECTOR GEORGE

S	E	R	V	I	C	E
R.C.A.F.	R.A.F.	R.A.A.F.	R.N.Z.A.F.	OTHER		
X						

MARITAL STATUS NEVER SINGLE WAS AIRMAN ON INDEFINITE LEAVE WITHOUT PAY? NO

NEXT OF KIN AS SHOWN ON REC. OF SERV. & RELATIONSHIP MR. EMMANUEL TASSE, (FATHER) NAME MRS. LOUISE C. TASSE,

ADDRESS 42 GORDON STREET, OTTAWA, ONTARIO. ADDRESS SAME ADDRESS D.A.B.

ADDITIONAL PERSON TO BE NOTIFIED ADDRESS

NEXT OF KIN AS SHOWN ON CAS. SIG. & RELATIONSHIP

ADDRESS

RELIGION R.C. CANADIAN FRENCH CANADIAN YES OTHER

PARENTS NAMES MR. & MRS. JOSEPH EMMANUEL TASSE, FATHER LIVING ON ENLISTMENT YES

ADDRESS 42 GORDON STREET, OTTAWA, ONTARIO. MOTHER LIVING ON ENLISTMENT YES

WAS MEMBER ATTACHED TO R.A.F. AT TIME OF CASUALTY? YES/NO YES IF SO, WAS HE A B.C.A.P.P. TRAINEE? YES/NO NO

IF NOT, UNDER WHAT CIRCUMSTANCES WAS HE SO ATTACHED?

IF MEMBER WAS ATTACHED TO R.A.F. AT ANY TIME, GIVE DETAILS: . . . . . .

IF CASUALTY OCCURRED IN CANADA DID MEMBER HAVE SERVICE OUTSIDE CANADA DURING WAR WITH THE GERMAN REICH? YES/NO

IF SO, GIVE PERIOD OR PERIODS: . . . . . .

IF ON LEAVE, STATE DATE LEAVE COMMENCED AND WHETHER ON LEAVE WITH OR WITHOUT PAY? . . . . . .

AUTHORITY CAS. SIG. NO. AIR MIN KWL—P0618—18-JUNE-43. 10712

CASUALTY DETAILS:

PREVIOUSLY REPORTED "MISSING 9-NOV-42 AFTER AIR OPERATIONS (OVERSEAS)
AND SUBSEQUENTLY REPORTED "MISSING BELIEVED KILLED"
NOW "PRESUMED DEAD" 9-NOV-42 FOR OFFICIAL PURPOSES.

LAST WILL ATTACHED TO NOTIFICATION TO A. OF E? YES/NO NO M.F.M. 5 ATTACHED TO NOTIFICATION TO A. OF E.? YES/NO NO DATE 18 JUNE '43.

P. OF D. YES

J. Frampton

FOR CHIEF OF THE AIR STAFF

R.C.A.F. R217
15M-4-42 (2067)
H.Q. 885 R217

7

COPY FOR DOCUMENT FILE

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

No. 4
AIR

DEPARTMENT OF NATIONAL DEFENCE

NAVY ═══ ARMY ═══ AIR FORCE

STATEMENT OF WAR SERVICE GRATUITY

DECEASED MEMBER'S NAME: Joseph H.G. Tasse
(CHRISTIAN NAMES) (SURNAME)

REGISTER NO. 23-65-23
FILE NO. 29349
DATE 11 Mar/46

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

SERVICE NO. R74067
FINAL RANK OR RATING F/S

DATE OF TERMINATION OF OVERSEAS SERVICE 9 Nov/42
DATE OF DISCHARGE 9 Nov/42

	$ ¢
A. TOTAL QUALIFYING SERVICE — NO. OF DAYS 787 / 30 EQUAL TO 26 COMPLETE PERIODS AT $7.50	195.00
B. QUALIFYING OVERSEAS SERVICE — NO. OF DAYS 333 LESS 7 INELIGIBLE DAYS, EQUAL TO 326 DAYS @ 25c. PER DAY	81.50
C. SUPPLEMENT FOR OVERSEAS SERVICE	
DAILY RATES AT DISCHARGE: PAY $ 3.25; SUBSISTENCE OR LODGING AND PROVISION ALLOWANCE $ 1.25; ADDITIONAL PAY $; $; $; DEPENDENTS' ALLOWANCE 1/30 OF $ ___ $ ___	
TOTAL $ 4.50 ×7 = $ 31.50	
NO. OF DAYS 333 / 183 ×$ 31.50	57.32
D. WAR SERVICE GRATUITY	333.82
E. DEDUCTIONS — OVERPAYMENT OF PAY AND ALLOWANCES $; DEPENDENTS' ALLOWANCE AND ASSIGNED PAY $; OTHER DEDUCTIONS $	
F. TOTAL AMOUNT PAYABLE	333.82

G. YOUR PORTION OF GRATUITY IS—

DEPENDENTS' ALLOWANCE IN ISSUE TO YOU $ ___ OF $ ___ = $ ___
TOTAL DEPENDENTS' ALLOWANCE IN ISSUE $ ___

P. & A. Bal. Trans. Trust Account
Journal Voucher # 6375

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
JLC	DR

TREASURY	
CHECKED BY	DATE
[signature]	14.3.46

[signature]
SERVICE REPRESENTATIVE

ΔT

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	
TASSE	JOSEPH LOUIS HECTOR GEORGES	Age $18\frac{3}{4}$
		Height 5'8
		Weight 128
ACADEMIC STANDING:		~~Married or~~ Single
		~~No. of Children~~

Completed Lower School - La Salle Academy - Ottawa

FLYING HISTORY (PARTICULARLY DURING LAST YEAR)

NIL

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

N.P.A.M. La Salle Academy Cadets - 3 years - Private
Nil
Bilingual - French and English

SPORTS:
~~EXTENSIVELY:~~
MODERATELY: Gymnastics, Swimming, Softball
~~OCCASIONALLY:~~

HOBBIES:
NIL

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~~-~~SELDGEEWX~~

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

FULLY QUALIFIED IN PERSONAL RESPECTS FOR COMMISSIONED RANK...YES YES with training NO

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

Well redommended should make a good airman.

SUMMARY OF ALL OF THE ABOVE:

Small, lightly built youth of pleasing manner, good appearance and very keen. Slightly below educational requirements and not otherwise particularly qualified, but considered promising material for aircrew and alert & keen.

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

RECOMMENDED FOR:

AIRCREW
GUNNER

R.C.A.F. Records Office
Rec'd SEP 25 1940
O. K. ..... C.I.B. .....
R. C. ..... N. I. .....
S. L. ..... P. A. .....

DATE: 28-6-40 RECRUITING CENTRE: Ottawa SIGNATURE OF OFFICER:

for J.P. Alexander F.O.

A.F.M.5

23 OTU
Remustered A.G. "S"
7-10-41 ⊕ RO 243/41

425 Sqdn

R.C.A.F. T. 82
5M—11-40 (8313)
H.Q. 1062-13-65

ROYAL CANADIAN AIR FORCE

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

AIR AND GROUND TRAINING

Surname ..... Tasse, ... Christian Names ..... G. .....

Number ..... R74067 ..... Rank ..... LAC .....

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 Wireless School to Bombing and Gunnery School.

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, the duplicate 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 and the original is to be placed on the pupil's personal file.

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

WIRELESS TRAINING

1. No. ..2..... Wireless School. Course No. ....10... To ..23-6-41... From ...3-2-41....

2. *Flying Times*—

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

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

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

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

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

4. *Ground Training*—

Subject	Maximum marks	Marks obtained	Subject	Maximum marks	Marks obtained
Theory	50	...32...	Signals Organization	150	Fail.
Radio Equipment	250	Fail.	Armament	100	...76...
Morse (buzzer and lamp).	200	Fail.	Drill and P.T.	50	...40...
Procedure	200	...163...	TOTALS	1000	..321...

Maximum Marks, 1000. Marks Obtained 321. Percentage 32.1 Pass or Fail ....Fail.....

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

5. Date authorized to wear Wireless Operator's Badge ..... ~~23-6-41~~ ..... F.B.C.

PART I—*Concluded*

WIRELESS TRAINING

6. ~~Comments as to suitability for Commissioned rank:—~~

Failed course of instruction plus one month's extra instruction

E R Cuney Sqn Ldr

Officer Commanding

No. 2 Wireless School

Date 18-7-41

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

PART II

ARMAMENT TRAINING

1. No. 4 B. G. S. Course No. 19

2. Dates of Courses:— From 27-10-41 To 24-11-41

AIR TRAINING

GUNNERY

3. *Flying Time:—*

Aircraft	Day	Night	Passenger	Total Hrs. Mins.
Battle	9.50			9.50

4. *Air Gunnery Results—*

	Average percentage hits to rounds fired
(a) Beam Test	5.4 %
(b) Beam Relative Speed Test	2.57 %
(c) Under Tail Test	5.66 %

5. *Total Rounds Fired—*

Ground	400 %
Air to Ground	200 %
Air to Air	1780 %

6. *Assessment—*

		Marks Obtained
(a) Written Examination	(100 Marks)	58
(b) Practical and Oral Examination	(100 Marks)	74
(c) Ability as Firer	(250 Marks)	166
~~(d) Qualities as an N.C.O~~	~~(150 Marks)~~	
Totals	450 (~~600~~ Marks)	298

7. Position in Class 19 No. in Class 25 Pass or Fail pass

8. Date authorized to wear Air Gunner's Badge 24-11-41

9. ~~Comments~~ Numerical Assessment on suitability for Commissioned Rank 158/250

10. Remarks Should prove efficient as an Air Gunner.

S/L

Chief Instructor

No. 4 B. G. S.

Date 24-11-41

PART II—*Concluded*

AIR TRAINING

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

Course	Maximum Marks	Marks Obtained
Wireless School	1000	
Bombing and Gunnery School	450 ~~600~~	
TOTALS	450 ~~1600~~	298

12. Percentage 66.2 Pass or Fail pass Position in Class 4

No. in Class 7

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

14. Remarks Concur

W/C
Officer Commanding
No. 4 B. G. S.

Date 24-11-41