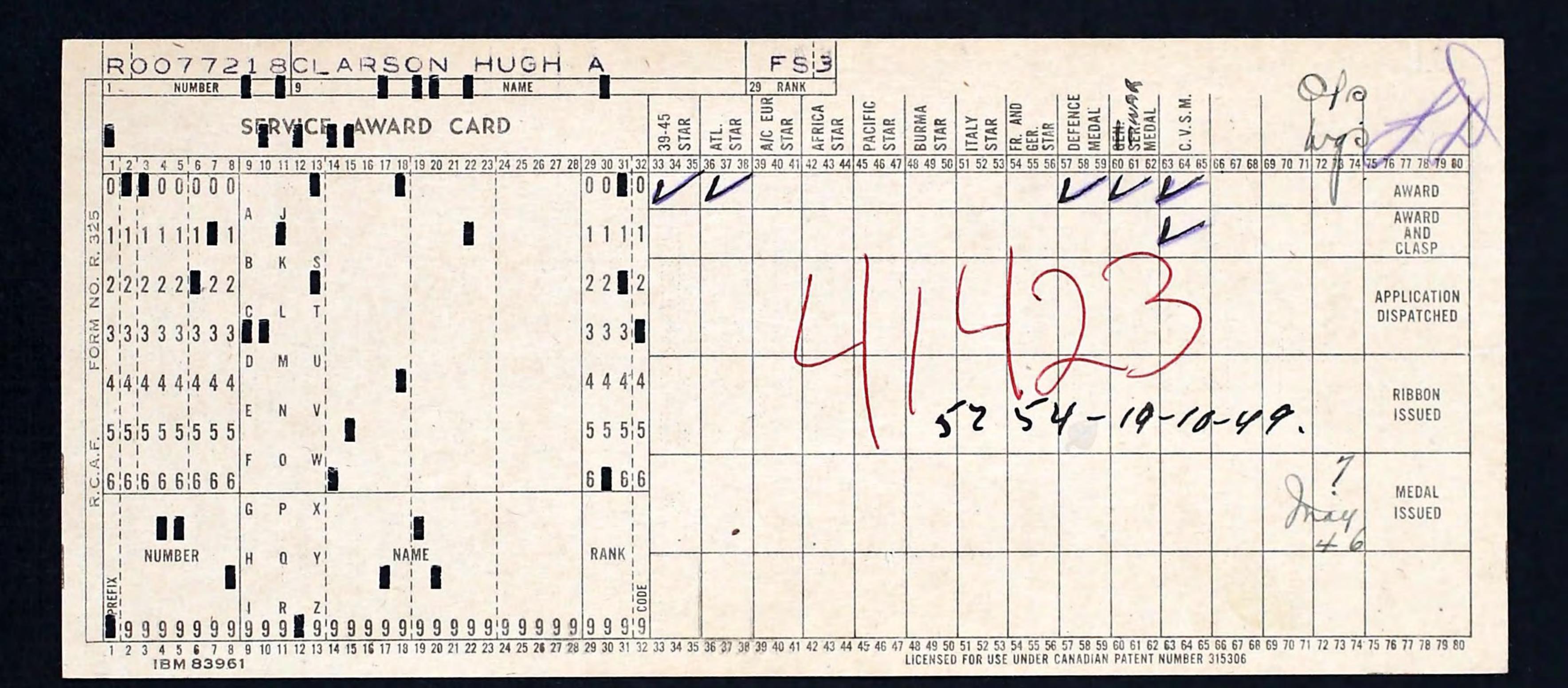
ALLAN

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



Mrs. Sophie Clarson (mother) 6022 Durscher ave., Montreal, Aue. July-45.

10M-3-40 (4425) H.Q. 1772-45-8

NAME CLARSON, Hugh Allan

H.Q. FILE No. 1022-C-4446

REGT'L No. R77218 RANK Sgt. W.O.A.G. OVERSEAS XXXXXXXXXX UNIT.

			UNII			
CA	BLE		NATURE OF CASUALTY		CAS. LIST	
No.	DATE	INATURE OF CASUALIT			No.	DATE
	F DEATH:	June 24-42	MOTHER LIVING: YES	WIFE: NA		
MINIST	ERIAL CARD	30-6-42	ROYAL MESSAGE: 17-4-43	MEMORIAL CROSS:	15-4-43	
T.o	mothe&	father	To mother & father	To mother	15-4-43	
To 1		ther Mar.17-4	3			
Mr	& Mrs. H	ugh Leonard C.	larson,			R.C.
Ou	tremont,					
	HUF-GET - WIL	3-De G.*	***************************************			
		••••••				
		••••••		•••••••••••••••••••••••••••••••••••••••		

ATTESTATION NON-PERMANENT ACTIVE MILITIA OF CANADAD-435-290
Ath DIVISIONAL SIGNALS R.C.C.S. 1. Surname? (Block letters) CLARSON. 2. Christian names? Hilan Hugh. 3. Present address? 6022 Durocher & AVE. Phone No. CA. 3909 4. Date of Birth?* 14 MAY-1921

5. British subject?

7. Religion? Roman Catholic

11. L. CLARSON

9. Relationship? FATHER Address ABOUE 10. Previous Naval, Military or Air Force Service. (Give particulars, qualifications, etc.) CERTIFICATE OF MEDICAL EXAMINATION Weight 150 Chest max 39 min. Descriptive marks. I have examined the above named man in accordance with instructions laid down in Instructions for DECLARATION TO BE MADE ON ATTESTATION that to the best of my knowledge and belief, the above answers (made by me) to the foregoing questions are true; that I am willing to be attested for the term of three years or until legally discharged, and do understand the nature and terms of this engagement, that I will safeguard all clothing, arms and equipment issued to me and will return same when required, and that I will report any change in address of myself, or my next of kin to my Commanding Officer. OATH TO BE TAKENdo sincerely promise and swear

(or solemnly declare) that I will be faithful and bear true allegiance to His Majesty.

Signature of Man

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 by law. The above questions were then read to the recruit in my presence. I have taken care that he understands each question and that his answer to each question has been duly entered and replied to, and the said recruit has made and signed the declaration and taken the oath.

Signature of Magistrate, Justice of Peace, or Attesting Officer.

M.F.B. 235d

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

Statement of Services

Promotions, Reductions, Transfers, Casualties, Annual Training, Qualification Certificates, etc.	Effective Date	Authority for Entry	Signatures of Officers Certifying Correctness of entries
Accepted for Service with effect from	14-8-	16-8-40	Officer Commanding Unit 4 Biv. Sign
Camp Training Farnham (25 Aug to 7 SeP 40		R. O, No. 4 AUG 2 9 194	
S. O. S. Enlestment in R.C.A.F.	18-9-40	R.O. PE2. 33 16-12-40	washich capt.
Medals and Decorations			
Twicdars and Decorations			

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

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

Statement of Services

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

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

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



Ontario. 11 June 1952.

Mrs. Sophie Clarson, 6022 Durocher Avenue, Outremont, Montreal, Quebec.

Dear Mrs. Clarson;

It is with reluctance that after so long an interval, I must refer to the loss of your son. Flight Sergeant Hugh Allan Clarson, but due to the lack of any information concerning him since he was reported missing, it must be regretfully accepted and officially recorded that he does not have a "known" grave.

Due to the extreme hazards attending air operations there are, unhappily many thousands of British aircrew boys who do not have "known" graves and all will be commemorated on General Memorials that will be erected at a number of locations by the Imperial War Graves Commission (of which Canada is a member), each Memorial representative of a theatre of operations. One of these Memorials will be erected at Runnymede, England, and the name of your son will a pear on that Memorial.

I realize that this is an extremely distressing letter and that there is no manner of conveying such information to you that would not add to your heartaches. I am fully aware that nothing I may say will lessen your great sorrow, but I would like to express to you and the members of your family my deepest sympathy.

Yours sincerely,

for (W.R. Gunn), Wing Commander,

R.C.A.F. Casualties Officer, for Chief of the Air Staff.

27th October 1942 Dear Sir, With reference to the letter from this department dated 22nd July 1942, I am directed to inform you, with deep regret, that all efforts to trace your son, No. GAN/R. 77218 Sergeant High Allan CLARSON, Royal Canadian Air Force, have proved unavailing. In whow of the lapse of time, it is felt that there can now be little hope of his being alive, but action to presume that he has lost his life will not be taken until at least six months from the date on which he was reported missing. Such action will then be for official purposes only, and you will be duly informed. Meanwhile I am to assure you, with the sincere sympathy of the department, that all possible enquiries will continue to be made. I am, Dear Sir, Your obedient Servant, for Royal Canadian Air Force Casualties Officer, for Air Officer Commanding-in-Chief R.C.A.F. Overseas. Hele Clarson Esq., 6022 Duracher Avenue, Montreal, Quebec, CAMADA.

Dear Sir,



I am directed to refor to a letter from this department dated 29th June 1942, and to inform you, with regret, that no news has been received of your son, No.CAN/R.77218 Sergeant high Allan CLARSON, Royal Canadian Air Force, since he was reported missing on 24th June 1942.

The aircraft of which your son was a Wireless Operator/Air Gummer took off from base at 10.25 p.m. on 24th June 1942, detailed to patrol in the North Sea area. Crews of other aircraft, engaged on the same operation, reported that no communications were made with your son's aircraft after the commencement of the flight. Nothing further has been heard of the aircraft.

I om to add an expression of the department's sincere sympathy with you in your great anxiety, and to assure you that any further news will be immediately passed to you.

I am, Dear Sir, Your obedient Servant,

Royal Canadian Air Force Casualties Officer, for Air Officer in Chief R.C.A.F. Overseas.

H.L. Glarson Esq., 6022 Duracher Avenue, Montreal, Quebec, CANADA. Copy of

Copy of this letter has been sent to:-Department of National Defence for Air, Ottawa.

BW

2031. 29th June, 1942. C7/CAN/R.77218. Sir, I am commanded by the Air Council to express to you their grave concern on learning from the Casualties Officer of the Royal Canadian Air Force that your son CAN/R. 77218 Sorgeant Hugh Allan CLARSON, has been reported missing as the result of air operations. The Hampden aircraft, of which your son was a wireless operator and air munner, failed to return to its base on the 24th June, 1942. This does not necessarily meanthat he is killed or wounded, and if he is a prisoner of war, he should be able to communicate with you in due course. Meanwhile enquiries will be made through the International Red Cross Society and, as soon as any definite news is received, you will be at once informed. If any information regarding your son is received by you from any source, you are requested to be kind enough to communicate it immediately to the Secretary, Department of National Defence for Air, Ottawa, who will forward it to the Air Ministry. The Air Council desire me to express their deep sympathy with you in your great anxiety, and earnestly hope that favourable news of your son may be fortheoming. I am, Sir, Your obedient Servant, H.L. Clarson, Esq., 6022, Duracher Avenue, ir Officer in Charge, Montreal, Air Ministry Records. uobec, CANADA.

Bane - Mother. Mrs. Sophie Clarson 6022 Derochet Aue Outromet, Montracel P.Q.

PARTMENT OF NATIONAL ARMY WAR SERVICE GRATUITY STATEMENT OF



Hugh A.

Clarson

(SURNAME)

REGISTER NO.

17830 FILE NO. 10 May/45 DATE

SERVICE NO.

R.77218

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

(CHRISTIAN NAMES)

24 June/42

FS FINAL RANK OR RATING DATE OF DISCHARGE

24 June/42 DATE OF TERMINATION OF OVERSEAS SERVICE A. TOTAL QUALIFYING SERVICE 150.00 NO. OF DAYS 612 EQUAL TO 20 COMPLETE PERIODS AT \$7.50 B. QUALIFYING OVERSEAS SERVICE 67.25 NO. OF DAYS 281 LESS 12 INELIGIBLE DAYS, EQUAL TO 269 DAYS @ 25C. PER DAY

C. SUPPLEMENT FOR OVERSEAS SERVICE

DAILY RATES AT DISCHARGE

\$ 3.75 SUBSISTENCE OR LODGING \$ 1.00 AND PROVISION ALLOWANCE ADDITIONAL PAY DEPENDENTS' ALLOWANCE 1/30 OF \$ \$ 4.75 ×7 = \$ 33.25 TOTAL 51.06 NO. OF DAYS 281 X\$ 33.25

D. WAR SERVICE GRATUITY 268.31 OVERPAYMENT OF PAY AND ALLOWANCES \$ E. DEDUCTIONS DEPENDENTS' ALLOWANCE AND ASSIGNED PAY \$ OTHER DEDUCTIONS

268.31

G. YOUR PORTION OF GRATUITY IS-

F. TOTAL AMOUNT PAYABLE

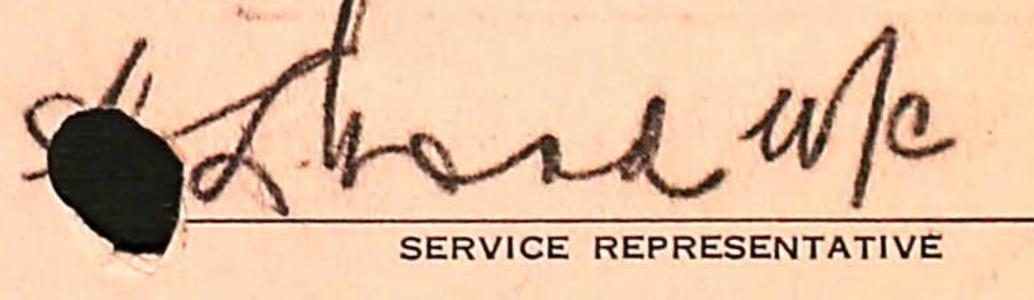
OF \$ DEPENDENTS' ALLOWANCE IN ISSUE TO YOU \$

TOTAL DEPENDENTS' ALLOWANCE IN ISSUE \$

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 SSUED THEREUNDER.

CHECKED BY PREPARED BY JFM

TREASURY CHECKED BY DATE



6022 Durocker Detterment. march 14/45 FILE # HQ 1022-C-446 due Hoff allan Clared R 77218 - RCAF: as there months have now clapsed sence we have had any further notification well you please look into this matter as soon as josewble skanheng you for a prompt Maner truly (ms) Lalarson.

OFFICIAL ROYAL CANADIAN AIR FORCE CASUALTY NOTIFICATION

NUMBER R77218

TRADE W.O.A.G. (SP GR)

RANK F/SGT. (WITHE EFF. 18-FEB-42)

UNIT 415 SQDN OVERSEAS

NAME CLARSON, HUGH ALLAN

R.C.A.F.

R.A.A.F.

R.N.Z.A.F.

OTHER

MARITAL STATUS

RELIGION

CANADIAN

FRENCH CANADIAN

OTHER

R.A.F.

NEXT OF KIN AS SHOWN ON REC. OF SERV. & RELATIONSHIP

ADDRESS

NAME

ADDRESS

MR. H.L. CLARSON (FATHER)
6022 DUROCHER AVENUE,
OUTREMONT, MONTREAL, QUEBEC.

RAD

R. L.

D.A.B.

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

ADDRESS

FATHER'S NAME ADDRESS

MOTHER'S NAME ADDRESS A M E M D E D

LIVING ON ENLISTMENT

LIVING ON ENLISTMENT

WAS MEMBER ATTACHED TO R.A.F. AT ANY TIME? YES/NO

IF CASUALTY OCCURRED IN CANADA DID MEMBER HAVE SERVICE OUTSIDE CANADA DURING WAR WITH THE GERMAN REICH?

YES/NO

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

AUTHORITY CAS. SIG. NO.

AIR MINISTRY KINGSWAY----PX6600--- d-1-MARCH-43.

CASUALTY DETAILS:

PREVIOUSLY REPORTED "MISSING" 24 JUNE-42 AFTER AIR OPERATIONS (OVERSEAS)

IS NOW "PRESUMED DEAD" 24 JUNE-42 FOR OFFICIAL PURPOSES.

LAST WILL ATTACHED TO NOTIFICATION TO A. OF E.? YES/NO

ATTACHED TO A. OF E. COPY YES/NO

M.F.M. 5 ATTACHED TO NOTIFICATION TO A. OF E.? YES/NO

FOR CHIEF OF THE AIR STAFF

14-0CT-44.

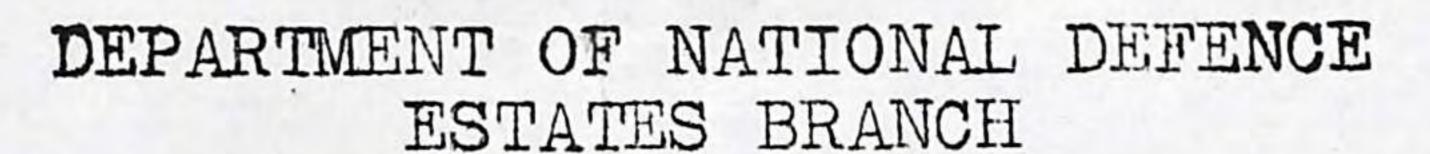
2

CERTIFICATE P. OF D.

ADMINISTRATOR OF ESTATES, OTTAWA

ATS-RT

dated actoher 16, 1944. Re your fele Mo. 1022-64446 (R.O.4). at that time I was notified that my son Hugh allan Classon had been promoted to the runk of I light Sugrant with effect from February 18, 1942. warrant an increase in pay? a prompt reply would be greatly appreceated. Thanking you en advance, I semand Districted The tribe



Ottawa

Canada



H.Q. 1022-C-4446 FD 183

CLARSON, Hugh Allan, Set. (Deceased)
No. R. 77218, R. C. A. F.

7 44.817. PERSONAL EFFECTS OF CAN/R77218. SGT. CLARSON: H.A.

- 1 Carton containing:-
- 1 Box personal letters & photos.
- 1 Hand brush.
- 1 Hair brush.
- 1 Pr braces.
- 1 Woollen skull cap.

2 Pr socks.

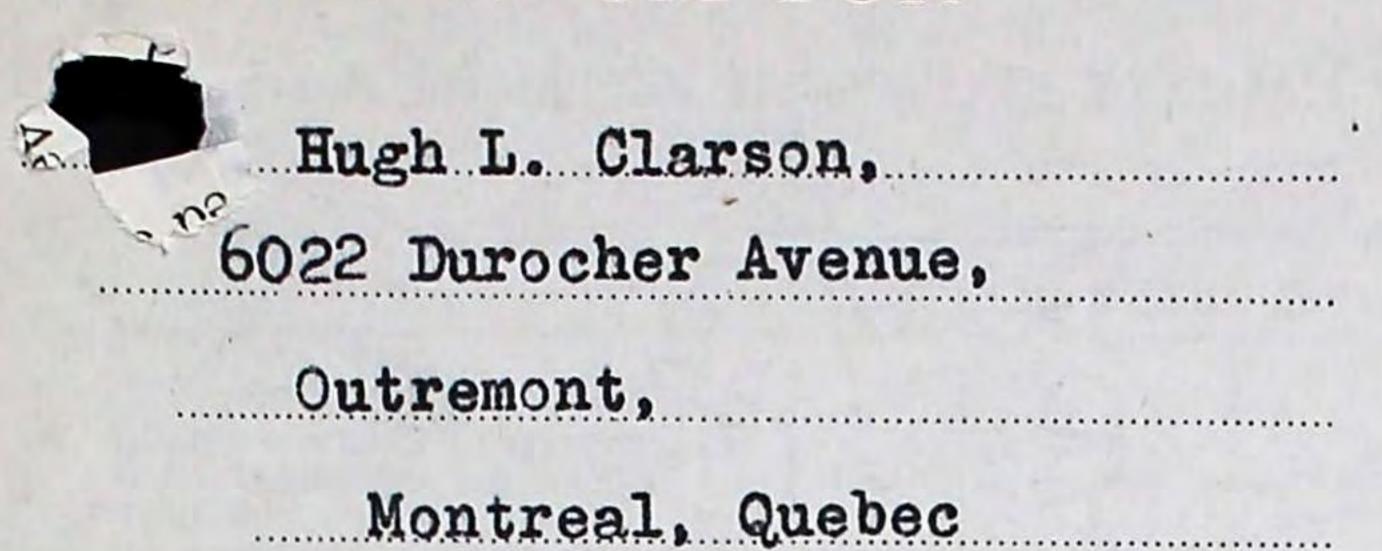
1 Polishing rage

1 Cuff link.

2 Thimbles.



Next of Kin: Mr. H.L. Clarson, 6022, Duracher Avenue, Montreal, Quebec,.



Any further communication on this subject should be addressed to:—

THE ADMINISTRATOR OF ESTATES,
DEPARTMENT OF NATIONAL DEFENCE,
OTTAWA, ONTARIO.

and the following number quoted:-

H.O. 1022-C- 4446 F.D.183

DEPARTMENT OF NATIONAL DEFENCE OTTAWA, ONT.

For the purpose medals or memorials	of record and in the evaluable for distribution	vent of there being on (according to la	g any balance of pay, w) on account of the
late			
CLARSON	, Hugh Allan, Sgt.		
	6		

No. R77218 R.C.A.F.

it is necessary that the requisite information regarding the deceased and his relatives should be furnished on the inside of this form in strict accordance with the printed instructions. The particulars required are to be carefully filled in and the Declaration on the back should then be signed in the presence of a Clergyman, Priest, Local Magistrate, Commissioner for Oaths or Notary Public, who should be asked to complete and sign the Certificate. This form should then be returned to the above address.

(N.O. Seagram) S/Ldr., for (L.M. Firth) Lt.-Col.,

Administrator of Estates.



ANSWER IN FULL ALL APPLICABLE QUESTIONS

STATEMENT of the Names, Ages and Addresses or Dates of Death, of all the relatives that the decease had in each of the degrees specified below.

e

Degrees			INFORMANT'S STA	ATEME	NT
Degrees of Rela- tion- ship		TIVES e accounted for	NAME IN FULL of any Relative, if any, in each degree inquired for	Age	ADDRESS IN FULL of each surviving Relative, opposite his or her name, and date of death of each deceased relative
1	Widow of the D	eceased			
2	Children of the dates of their	Deceased and Births			
3	Father of the D	eceased	Clarson. Hugh Leonard.	51	6022. Durocher Ave. Outremont. Pro. Que.
4	Mother of the I	eceased	Clarson. Sophie.	51	6022. Durocher Ave. Outremont. Pro. Que.
5	Brothers of the Deceased	Full Blood	None.		
		Half Blood	None.		
6	Sisters of the Deceased	Full Blood	Clarson. Patricia Louise. Clarson. Ilene Lenore.	2	6022. Durocher Ave. Outremont. Pro. Que. 6022. Durocher Ave. Outremont. Pro. Que.
		Half Blood	None		
7	Names of brothers of the full or the Deceased, who are death of each.	or sisters (whether half blood) of the dead; and date of	Names and ages of their children (if any)		Address of their children
			None.		

ONLY IF NO RELATIVES IN THE DEGREES ABOVE ARE NOW LIVING, THE FOLLOWING PARTICULARS SHOULD BE GIVEN

		NAMES OF THOSE LIVING	Age	ADDRESS IN FULL
3	Grand-Parents of the Deceased			
			Age	
9	Uncles and Aunts by blood of the Deceased (not Uncles and Aunts by marriage)			

DECLARATION

"Insert degree of relationship for example, "Widow", of all the relatives that the deceased ever had in the degrees inquired for; and "Brother", etc.	plete statent that I at the
* Father of the deceased.	
N.B. To be signed in full in the presence of a Clergyman, Priest, Local Magistrate, Commissioner or Notary Public.	$Signature \\ of \\ Informant$
CERTIFICATE	
I hereby certify that, to the best of my knowledge and belief	
See abo Hugh Leonard Clarson { Name of Informant } is the Father above described, and I believe the above Declaration and the Statement of Relative	of the Deceased es made by the
Informant and signed in my presence to be complete and correct.	
Dated at centremont this Several (day of april	19.
Signature of Clergyman, Priest, Magistrate, Commissioner or Notary Public Signature of Clergyman, Priest, Magistrate, Commissioner or Notary Public	of Superi Com
108, S. CLOSNER 4845 oft5- Lewifyllien - know	real due.
NOTE HEAD NOTE WONTHEAD. NOTE HEAD TO MONTHE ADDRESS AND A STATE OF THE AD	ing the death of any l after is stated in its
proper place in the Statement opposite.	

USE SPACE BELOW FOR ANY ADDITIONAL REMARKS YOU MAY WISH TO MAKE

FULL PARTICULARS AS TO IDENTITY

300		
10	What is the full name of the deceased?	Clarson. Hugh Allan.
11	Give the month and year of his birth.	14th. May. 1922.
12	Where and when were his parents married?	Montreal. 30th. September. 1916
13	If deceased was married, state place and date of marriage. Was there a marriage contract? (Quebec)	Not Married.
14	Did he leave a Will? If so, a copy should be attached hereto.	No Will left at his home.
15	Did he leave a bank account? If so, give full particulars.	None.
16	Is there any other estate which will necessitate application being made for Probate of the Will or Letters of Administration of the estate?	None.
17	State your own postal address in full.	6022. Durocher Avenue. Outremont. Pro. Quebec. Canada.

PARTICULARS OF DOMICILE

18	Where was deceased born?	Montreal. Pro. Que. Canada.
19	State, in order, the Province (or State) and country in which the deceased resided and the period of time in each, and in which last.	Pro. Quebec. Canada. (Lifetime.)
20	What was the nature of his employment?	Accounting Clerk.
21	Did he own the premises in which he lived? If so, where?	No.
22	Did he ever state verbally, or in writing, where he intended to make his permanent home?	Montreal. Canada.

OTHER PARTICULARS

3	Did the deceased after enlistment incur any debts for:— (a) His own separate board and lodging while on service. (b) Service clothing and equipment. An itemized account for each such debt should be attached hereto, and if same is correct you should mark the bill "approved" and sign same. If believed incorrect, give	(a) (b)	No. No.	
	Have you or any other relative paid the funeral expenses or any	•		

Have you or any other relative paid the funeral expenses or any part thereof? If so, attach itemized accounts showing amount paid, and by whom.

No. Your own Records show my Son as Missing- Presumed Dead.

(Note:—The Government pays funeral expenses within the amounts authorized in the Regulations, where death occurs and burial is made Overseas as well as where death occurs and burial is made in Canada, and if a relative has already paid those expenses the Government will reimburse such relative to the extent of the amount authorized in the Regulations. Any amount of such expenses in excess of those authorized in the Regulations is not payable by the Government nor is it chargeable against the service estate of the deceased.)

R.C.A.F. G.64 5M-10-42 (2840) H.Q. 885-G-64

Royal Canadian Air Force

CERTIFICATE OF PRESUMPTION OF DEATH

80.4059

This is to Certify that

(Number)	(Rank)	(Name in Full)		(Unit)
(I tulifoci)	(Italia)	(Ivalie in Full)		(Onto)
has been offi	cially reported as mis	ssing since the	74 E H	day
of			l that, full inquir	ies having been
made, no in	formation has been	received which would in	dicate that he ma	ay be still alive.
For official	purposes, therefore	he is presumed to he	ave died on or s	since the above
mentioned d	late.			
Dated at Ot	tawa, Canada, this	day of	HARCH	194.
			121	

(A.D. Thompson)
Squadron Leader,
Acting R.C.A.F. Records Officer.

(City

Control of the State of the Sta

(1)	I	of the	(WXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXX
	ofOutremontin the District of		
	Province of Que W.O. & A (Civil Occ	. G	
	a member of the Royal Canadian Air Force, Number R7. revoke all former Wills made by me and declare this to		
(2)	I give, Devise and bequeath unto:-		
	To my Mother:		
	Mrs. Sophie Clarson		
	6022 Durocher Ave.,		
	Montreal. P. Q.		
	TX All of my Estate		
(3)	I Give, Devise and Bequeath all the rest and residue of real and personal, of whatsoever kind and wheresoever		
(4)	I appoint Mrs. Sphie Clarson, 6022 Durocher Ave. (Name) (Address Executor	s)	
	, to be the XXXXXXXX		
	IN WITNESS WHEREOF I have hereunto set my hand this .	22nd	day of
	October1940		
			Testator)
(5)	Signature La Les Charles Les C		
	Address. No. 1 Manning Depot. R.C.A.F. Toronto		
	Occupation		
	Signature		
	No. 1 Manning Depot, R.C.A.F., Toronto	To o o T	Records Office
	Occupation		OV 25 1940
		O. K	
		R. C. B	
		Sil	onone

To be made out in duplicate

R.C.A.F. Special Reserve

M.F.M. 5 200M—7-40 (6098-9) H.Q. 1772-39-1651

PARTICULARS OF FAMILY OF AN OFFICER OR OTHER RANK OF THE C.A.S.F. 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 C.A.S.F. 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 individuals new unit.

(2) Regimental or Air Force Number and Rank	
(3) Unit	
(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.	
(5) If married, state, (a) Full name of your wife.	
(a) Full name of your wife	
(b) Present postal address of wife.	
	••••
	••••
	••••
(7) Are you a widower?	••••
(8) Have you any children?	• • • •
N.A. Names and ages	••••
(a) TC To1 . All is alsimed in respect of childrenstate whether you have been re	r11-
(9) If Dependents' Allowance is claimed in respect of children—state whether you have been remarks. A.	
larly supporting them	••••
	• • • •
Give particulars of Guardians to whom Dependents' Allowance should be paid—if authoriz	d.
Name	••••
Postal Address	••••
see other si	E]
R.C. F Records O	
Rec'd OCT 31 1940	Action Control
K	Action Control

	If so, state her full name and Postal Address
)	Is your father alive?
70	Is your father alive? Hugh Leonard CLARSON: If so, state name and address, occupation
	If so, state name and address, occupation 6022 Durocher Ave, Montreal, Que. Mechanic.
	If your father is a widower and is totally incapacitated from earning a living—are you his sole
	or partial support?
	—state what amount per month you have given him prior to appointment or enlistment
	Also state reason he has no other means of support if partially supported by you, what is your
	reason for not providing full support?
4)	Is your mother alive? Sophie Hongan (CLARSON)
	If so, state name and address
	100
	If your mother is a widow, are you her sole or partial support?
6)	If sole or partial support of widowed mother—state what amount per month you have given her
	prior to appointment or enlistment.
	Also state reason why she has no other means of support, if partially supported by you what is your reason for not providing full support?
	Are you contributing to the support of any dependents, other than those shown above?
de	Relationship
	Full Name
	Postal Address
	Amount contributed monthly during the past six months
Ties	
8)	Are you insured?
	If so, in what Company?
	Have you made arrangements for payment of your Insurance Premium? 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.
	H.a. Clarson
*	Date. (Signature of officer or man)
	for the The
	October 21st, 1940. Officer Commanding
	October 21st, 1940. Officer Commanding

COPY. 415 R.C.A.F. Squadron, R.C.A.F. Overseas. 28th June, 1942. Mr. H.L. Clarson, 6022 Duracher Avenue, Montreal, Quebec. Dear Mr. Clarson: It is with deep regret that I inform you that your son, R. 77218 Sgt. Clarson, H. A., is missing on operations since the evening of June 24th. On that particular evening a number of crews of our Squadron were detailed for operations in the North Sea area. Your son was with his regular crew, piloted by F/Sgt. J.A. Ridley. They took off at 22.25 hours and failed to return. It is known that they were not seen by the other crews during the operation. No word has been heard of them since and as a result they are still reported as missing. Your son has been a most valuable and heroic Air Gunner and is aadly missed by the Squadron. His friendly manner and great interest in everyone servied as a steadying influence amongst the lads. He was a very conscientious Gunner and I can not speak too highly of his devotion to duty. His outstanding qualities of character marked him as one of those individuals who can ill be spared at the present time. Your son's belongings and personal effects have been taken care of and will be forwarded to the Central Depository at Colnbrook, in accordance with Air Ministry instructions. May I now express the great sympathy which all of us feel with you in the distressing and uncertain word that you have received. If any further news is received, concerning your son, it will be communicated directly to you. Sympathetically yours, "E. L. Wurtele" (E.L. Wurtele) Wing Commander, Commanding Officer, No. 415 R.C.A.F. Squadron.

1022-C-4446 (R.O.4) OTTAWA, CANADA, 27th June, 1942. Mr. H.L. Glarson, 6022 Durocher Avenue, Outremont. Montreal, Quebec. Dear Mr. Clarson: It is my painful duty to confirm the telegram recently received by you which informed you that your son, Sergeant Hugh Allan Clarson, is reported missing on Active Service. Advice has been received from the Royal Canadian Air Force Casualties Officer, Overseas, that your son was a member of the crew of an aircraft which failed to return to its base after air operations on June 24th, 1942. There were three other members of the Royal Canadian Air Force in the crew and they have also been reported missing. You may wish to know their names and next-of-kin are: Flight Sergeant J.A. Ridley Next-of-kin, Mrs. J.A. Ridley (wife) c/o Mrs. W.J. McKeage, Blackie, Alberta. Flight Sergeant R.W. Veit Next-of-kin, Mr. A.M. Veit (father) Princeton, Ontario. Sergeant G.D. Klarner Next-of-kin, Mrs. G.D. Klarner (wife) Beverley, Alberta. I desire to point out that this does not necessarily mean your son has been killed or wounded. It might be that he is a prisoner of war and inquiries will be made through the International Red Cross Society and all other appropriate sources. Please be assured that any further information received at these Headquarters will be communicated to you immediately. You should shortly receive a letter from your son's Commanding Officer giving all available details. May I join with you and Mrs. Clarson in the hope that better news will be forthcoming in the near future. Yours sincerely, Flight Vieutenant, R.C.A.F. Casualties Officer, for Chief of the Air Staff. /HLG

J. ROYAL CANADIAN AIR FORCE

	Surname Course Chr. Names 14. Nature of Commission M-2-4. Date of Birth 14-	igh alem.	
	Nature of Commission	5. 2.2 Married or Single See	Le
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	Address 6021 Denocher Montreal.	Marie	
	HAVE YOU ANY HISTORY OF:-	(18)	
(i)	Nervous Trouble or Nervous Breakdown		
	Severe or "Sick" Headaches, Migraine		
	Fits or Convulsions of any kind		
	Sun or Heat Stroke		•••••
	Head Injury or Concussion (including "knock-out")		
	Insomnia, Nightmares, Sleep-walking, or Bed-wetting		
, ,	Lung Trouble or Consumption		
	Bronchitis, Pneumonia or Pleurisy	2 4	
	Asthma or Hay Fever		
	Fainting Attacks or Giddiness		
	Rheumatism, Rheumatic Fever or "Growing Pains"		
	Frequent Sore Throats or Tonsillitis		
	Diphtheria, Scarlet Fever or Scarlatina	~~0	POPE .
(ix)	STOMACH OF BOWEL TROUBLE	MO	
	Chronic Indigestion or Pain after Food		
	KIDNEY OF BLADDER TROUBLE		22
, ,	Syphilis or Gonorrhœa		
(vi)	Tropical Disease	ano .	
(• -)	Malaria		
	Dysentery		
	EYE TROUBLE or Inflammation of Eyelids		
(/	Wearing of Glasses		Aost.
	Colour or Night Blindness		
(viii)	Ear Trouble, Earache or Discharge from Ears	~~	
1	Deafness, Noises in the Ears, or Dizziness	No	
	Frequent Colds in Head, Catarrh or Obstruction	la Cecer.	
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DEPARTMENT OF NATIONAL DEFENCE NAVY ====== ARMY ====== AIR FORCE

STATEMENT OF WAR SERVICE GRATILITY

AIR

STATEMENT OF WAR SERVICE GRATUITY	2111
DECEASED MEMBER'S NAME (CHRISTIAN NAMES) (CHRISTIAN NAMES)	17830
PAYEF DIRECTOR OF LEGISLES SERVICE DATE ADDRESS DIRECTOR OF LEGISLES SERVICE DATE OF DISCHARGE	R.77218
A. TOTAL QUALIFYING SERVICE NO. OF DAYS 618 EQUAL TO COMPLETE PERIODS AT \$7.50	150.00
B. QUALIFYING OVERSEAS SERVICE NO. OF DAYS LESS 12 INELIGIBLE DAYS, EQUAL TO 269 DAYS @ 25C. PER DAY	67.25
C. SUPPLEMENT FOR OVERSEAS SERVICE	
DAILY RATES AT DISCHARGE	
PAY \$ 3.75 SUBSISTENCE OR LODGING AND PROVISION ALLOWANCE \$ 1.00	
ADDITIONAL PAY \$ S	
\$	
DEPENDENTS' ALLOWANCE 1/30 OF \$	
NO. OF DAYS 281 X\$ 33.25	51.06
D. WAR SERVICE GRATUITY	268.31
E. DEDUCTIONS OVERPAYMENT OF PAY AND ALLOWANCES \$ DEPENDENTS' ALLOWANCE AND ASSIGNED PAY \$	
OTHER DEDUCTIONS \$	
F. TOTAL AMOUNT PAYABLE	268.31

G. YOUR PORTION OF GRATUITY IS-

DEPENDENTS' ALLOWANCE IN ISSUE TO YOU \$
TOTAL DEPENDENTS' ALLOWANCE IN ISSUE \$

P. & A. Bal. Trans. Trust Account

Journal Voucher # 69

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 THEREWIDER.

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42 moone Broom In tromental of the streak 13830/R77218 4 No as & Monde 1944 Department of national Defence 22-0-4446 Dear Sir J belevre Lamo Entitled! to my deceased sons gratually as I am named in my sons weil. E accutrex and sole beneficing Sgt Hugh allaw Clarson was my

PROYAL CANADIAN DIR FORCE

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

Individual Record of Flying J. A. T. P. CANADA

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ROYAL CANADIAN AIR FORCE

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

AIR AND GROUND TRAINING

SurnameClarson,	Christian Names
Number (CAN) R77218	Rank

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...12. To...236.11. From...32.2.41....
- 2. Flying Times-
- 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

4. Ground Training-

Subject	Maximum marks	Marks obtained	Subject	Maximum	Marks obtained
Theory	50	45	Signals Organization	150	28
Radio Equipment	250	1218:	Armament	100	71
Morse (buzzer and lamp).	200		Drill and P.T	50	40
Procedure		163.		1000	7.4.3

PART I-Concluded

WIRELESS TRAINING

6. Comments as to suitab	ility for Commis	sioned rank:—.			• • • • • • • • • • • • • • • • • • • •
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Γo be passed to No		. G. S.			
		PART II			
	ARMA	MENT TRAIN	ING		
. No	S.		Course No		
2. Dates of Courses:—		7 - 4-1	To!.8.	-8-41	
		AIR TRAINING			
		GUNNERY			
3. Flying Time:—					
				Total	
Aircraft	Day	Night	Passenger	Hrs. Mins.	
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12. Percentage.

13. Recommende

14. Remarks....

Part II-Concluded

AIR TRAINING

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

Course		Maximum Marks	Marks Obtained
Wireless School		. 1000	7.4.3
Bombing and Gunnery School	• • • • • • • • • • • • • • • • • • • •	. 600	
TOTALS		1600	10/3.
Percentage . 6.9.8. Pass or Fail	0	Position in Cla	ss4.6.
		No. in Class	6.5
Recommended for Commissioned Rank	(yes or no)	Assessment	(ex., above ave
. Remarks			
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Date...!9-8-4.1.......

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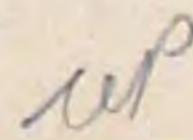
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or

ORM 6	DOMINION BU	REAU OF STAT	ISTICS	QUEBEC DEATH TRANSC	RIPT	o not
PLACE	Muni- cipal county OVERSIAS	Official name civil municip ty or towns	e of ali- hip		Place an X over the word which applies to this municipality or this territory City Town Village Parish Township	o not rite in a space
DEATH	Street	No.		Hospital or Institution		
LENGTH OF STAY	(a) In hospital Years Months Days tion	(b) In municipality where death occurred	Months	Days Years Months Days (c) In Province	(d) In Canada (if immigrant) Years Months Days	
NAME	Surname	ON	Do not	CONFIDENTIAL MEDICAL C	ERTIFICATE OF DEATH	
OF ECEASED	HU(H ALL	etters)	write in	22. Date of death	24th 42	
il l	Given names			(Month)	(Day) (Year)	
Street Official na	Durocher Ave. me of Outrement. Montreal	NoNo.		23. I HEREBY CERTIFY that I attended decease	d from	
Municipal	nship	Province		and last saw halive on		
5. SEX 6. NATIONALITY (Citizenship) 7. RACIAL ORIGIN Widowed or Divorced (Write the word)				Immediate cause Give disease, injury or complication which caused death, not the mode of dying, such as heart failure, due to	iously reported missing or air operations, now or official purposes, resumed dead.	
9. If married give name of wife or husband of deceased				Morbid conditions, if any, giving (b)		
10. BIRTHPLACE (Province or Country) 11. DATE OF 127 14th 1922				Other morbid conditions (if impor-		
AGE OF ECEASED	(Month) (Day Years Months Days	(Year) If less than one day old		tant) contributing to death but not causally related to immediate cause.		
ECHADED	20 1 10	hrs. ormin.		If a communicable disease is (a) Date of appoint mentioned on this certificate,	earance19	
kind of v	ade, profession or vork, as spinner, office clerk, etc.				diseasedays	
14. Kin	as cotton-mill,			25. If a woman, was there a puerperal condition? 26. Was there a surgical operation?		
15. Dat worked a	e deceased lastume 24/42 spen	t in this pation		State findings		
	17. NAME	18. BIRTHPLACE (Province or Country)		27. If death was due to external causes (violence) fill Accident, suicide or homicide	June 24th 42	
FATHER	Clarson, Hugh Loonard	England		Manner of injury. (State which)	during air operations	
Maiden Name)	Horgan, Sophie	Ireland		Nature of injury	ow sustained)	
19. Place of burial, cremation or removal				Specify whether injury occurred in industry, in home, or in public place		
Date of buria		19		Signed		
. 7	lame of parish r church			Address	Date19	
BUE	Civil muni- ipality of		28. Signature (cur	rate, coroner, bospital authority, etc.)	Name of clergyman in charge of Register of Civil Status in which registration of this curial was made.	
	Ounty Date		This sign	nature authorizes the collector to accept this form as authentic.	(Voir l'autre côté pour le français)	



PART II-Concluded

AIR TRAINING

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

Course

Wireless School	1000	7.4.3.
Bombing and Gunnery School	600	
Totals	1450 - 1600 -	1/.0.1.3
12. Percentage	Position in Cla	ass4.6
		6.3
13. Recommended for Commissioned Rank	Assessment	(ex., above average)
14. Remarks		
No	SM B	Officer Commanding G. S.

Tel In Flying Clause on the State State of the Control of the Cont

The third does not under think the property of the property of

Maximum

Marks

Marks

Obtained

Date..../9-8-4/....

ROYAL CANADIAN AIR FORCE

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

AIR AND GROUND TRAINING

SurnameClarson,	Christian Names	H.A.
Number(CAN) R77218		

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

Deside parage parage besides for each	WIRELESS TRAINING	-41
1. No2 Wireless School.	Course No 12. To 20-7	#= From 3-2-41
2. Flying Times—		R.C.A.F. Records Office
(a) In Flying Classroom as 1:	st Operator	Rec'd. OCT 2 1941
	ening watch	
(c) In 2-seat aircraft as sole of	perator	R. C. M. I. M. I.
3. Assessment as Air Operator (de applicable). Unless at least shown against para. 2 (a) about is to be made and therefore a be deleted.	elete categories not 5 hours has been ove, no assessment	Average Below average

4. Ground Training—

Subject	Maximum	Marks	Subject	Maximum	Marks
Theory	50		Signals Organization	150	1.218.:
Radio Equipment	250	8:	Armament	100	71
Morse (buzzer and lamp).	200	1.68	Drill and P.T	50	40
Procedure	200	1.6.3	Tolals	1000	7.4.3.

Maximum Marks, 1000. Marks Obtained 7.4.3. Percentage 74:3 Pass or Fail..... Pass.....

5. Date authorized to wear Wireless Operator's Badge......

Part II-Concluded

AIR TRAINING

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

ficer Commanding less School

otal

Mins.

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verage percentage ts to rounds fired

arks Obtained

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	Course	Maximum Marks	Marks Obtained	
	Wireless School	1000	7.4.3.	
	Bombing and Gunnery School	600		
	Totals	1450 -1600	1.0.1.3	
12. Perce	ntage. 69.8. Pass or Fail	osition in Clas	ss4.6	
		To. in Class	6.3	
13. Recor	nmended for Commissioned Rank	ssessment	A:	rage)
14. Rema	rks			
		• • • • • • • • • • • • • • • • • • • •		
		1/2B.	Officer Commander G. S.	inding Corner
		Date/9-	-8-41	

OCCUPATIONAL HISTORY FORM

THIS FORM IS TO BE COMPLETED FOR FACH MEMBER OF THE ARMED FORCES. THE INFORMATION SOUGHT IS FOR THE USE OF GENERAL ADVISORY COM-MITTEE ON DEMOBILIZATION AND REHABILITATION, A COMMITTEE SET UP BY THE GOVERNMENT OF CANADA TO STUDY PLANS FOR ESTABLISHING IN INDUSTRIAL LIFE THE MEMBERS OF THE ARMED FORCES, AFTER DISCHARGE. ACCURACY AND COMPLETENESS IN ANSWERING WILL BE OF WHICH HELP TO THE COMMITTEE.

PLEASE READ CAREFULLY THE INSTRUCTIONS GIVEN ON THE INSIDE OF COVER BEFORE COMPLETING FORM

and the	the state of the s	services.
	Section A—GENERAL INFORMATION (a) Print name in full HUGH ALARY CARSON (b) Reg'l. No. R 772 18	PLE LEA
2.	(a) Arm of service AIR FORCE Unit No. 2 WIRE LESS 56 HOUSE Bank LA FIG.	
3.	(a) Date of birth	
4.	(a) Place of enlistment	10
5.	(a) State age on finally leaving school	
6.	State definitely highest standing reached at public, technical or high school (for instance—"4 years, Public School", "two years, High School", "Junior	
7.	Matriculation", or "4 years technical course in printing", etc.) If you attended a university, give name of university and standing or degree secured.	* 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1
8.	(a) Did you ever (b) If so, enter upon a trade for what (c) Did you finish it, how long	
9,	(a) What languages (b) What languages	
	do you speak fluently?	
1947	(a) State whether you were WORKING or NOT WORK- (b) At time of en-	
1	ING at time of enlistment. (Enter here only "Work- ing" or "Not Working". I istment of what trade union or	
7	as case may be; particu- lars are asked for below) were you a member?	in the
्राज्यात् । इ. १०००	Section D-PARTICULARS CONCERNING THOSE WHO WERE UNEMPLOYED AT TIME	
	OF ENLISTMENT QUESTIONS 11 TO 17 REFER ONLY TO THOSE WHO ANSWER "NOT WORKING" IN QUESTION 10 (a)	
11.	Had you ever been employed fairly regularly since leaving school?	
1 10	(a) If answer to 11 be "Yes", state exact trade or occupation the had worked at this	
Total !	at which you actually workedtrade or occupationtrade or occupation If answer to 11 be "No", state exact trade or occupation for which you feel qualified	
14.	If you had been employed after leaving school, state when you last worked fairly regularly before enlistment	
15.	Give details of last employer, if any: Name Address Address	
The state of	Nature of employer's business (for instance, "farmer", or "building contractor", or "boot factory", or "iron foundry", or "retail store", etc.) (a) If your last employment was	
11年	in a business of your own, state nature and address of business	
	Section E—PARTICULARS CONCERNING THOSE WHO WERE EMPLOYED AT TIME OF ENLISTMENT	
QI	JESTIONS 18 TO 23 REFER ONLY TO THOSE WHO ANSWER "WORKING" IN QUESTION 10 (a). PLEASE READ THESE QUESTIONS AND REPLY TO THOSE APPLYING TO YOU AT TIME OF ENLISTMENT	
	IF YOU WERE AN EMPLOYEE WORKING FOR AN EMPLOYER UP TO THE TIME OF ENLISTMENT, PLEASE ANSWER QUESTIONS 18 TO 21	
計解 7	Name of employer	
1,9.	Nature of employer's business (for instance, "farmer", or "building contractor", or "boot factory", or "iron foundry", or "retail store", etc.)	
	(a) Your (b) Number of years' experience at specific occupation with any employer (c) Do you wish	
15 13	definitely to give you refuse to promise you to return to your employment on discharge? former employment?	
	F YOU WERE WORKING ON YOUR OWN UP TO THE TIME OF ENLISTMENT, THAT IS TO SAY, OPERATING A FARM, A STORE, AN AGENCY, OR IN PROFESSIONAL PRACTICE, OR AS A PARTNER IN ANY SUCH LINE, PLEASE ANSWER QUESTIONS 22 AND 23	
22.	(a) State nature of business, or professional practice	
23.	(a) Number of years (b) Have you made, or will you make plans to engaged in this businessreturn to the same or a similar business on discharge?	
	Section F—PARTICULARS OF FARMING EXPERIENCE	N. S.
24.	(a) Do you wish to engage (b) Do you feel competent (c) If so, in what in farming after the war? to operate a farm? kind of farming? (d) Were you (e) How many years' actual (c) In what provinces	
777	born on a farm?farming experience have you had?did you have experience?	100
26.	Section G—MISCELLANEOUS Have you made any arrangements other than indicated above, for re-establishment in civil life after discharge?	19-1
27.	If so, state nature of your plans (for example, do you plan to return to school, or have you been assured of a job, etc.)	
28.	State any employment preference or ambition you may have, other than indicated elsewhere in this form	A L
1,		
1	The second of th	

ROYAL CANADIAN FIR FORCE		AGE			
R.C.MTERVIED BEHOHT Reserve		HEIGHT			
SURNAME CLARSON,		ADMINISTRATION TECHNICAL			
CHRISTIAN NAMES. Hugh Allan.		EQUIP,/ACCTS			
MARRIED	Y	PILOT			
EDUCATIONAL STANDING:- Number of years		APPROACH Confident			
High School		Nervous			
University (Name and dates of Attendance)		CARRIAGE Upright			
••••••••••••••••••••••••••••••••		Medium, X			
Standing other Countries		DRESS			
FLYING EXPERIENCE:- Total hours Commercial Hours Solo		Neat			
Private "SoloDualPassenger.	0.00	Clean			
No. Hours & Types during last 2 yrs		PHYSICUE			
MILITARY AND OTHER TRAINING:-		Medium			
Two weeks summer camp with Royal Canadian Corps of Si in August 1940. (N.P.A.M.) Training.					
With Dominion Stores Co. Montreal 1939 as errand box With Steel Co., of Canada Montreal, 1940 as Junior C	lerk.	SPEECH Clear			
		Hesitant			
SPORTS:- (What branches)		RESPONSE X			
Swimming. Hockey. Baseball. extensively.		Deliberate			
HOBBIES:		MANNER			
INTERVIEWING OFFICER'S OPINION AS TO CHARACTER AND SUITABILITY FOR THE SERVICE:-		AlertX ConfidentX SincereX			
A healthy looking boy, should mature with service c		Sincere			
Very well built. Has played lots of sports. Pleas		Nervous			
and looks very willing.		Irresponsible			
	3				
Rec'd OCT 22 1940		EXCELLENT			
DEPENDENCE CHECKED CAUTERACTION P. A.		ABOVE AVERAGE			
REFERENCES CHECKED-SATISFACTORY		AVERAGEX			
"UNSATISFACTORY S		BELOW AVERAGE			
		MARK.WITH AN X THE DESCRIPTION			
CONSIDERED SUITABLE FOR COMMISSIONED RANK?NO		WHICH APPLIES			
BEST FITTED FOR. Aircrew. (Wireless. Opertagr. Air. Gunner.)					
***************************************		FICER COMMANDING, F. RECRUITING CENTRE,			
DATE 10-10-40 RECRITTING CENTRE	· Mg	NTREAL, - QUEBEC.			
	The first term of the second s	Hon Flo			
	The last the same of the same	of Officer			



4TH DIVISIONAL SIGNALS

ROYAL CANADIAN CORPS OF SIGNALS

REF. NO. 4-21-1

1179 BLEURY STREET, MONTREAL, QUE.

27 Sep 40.

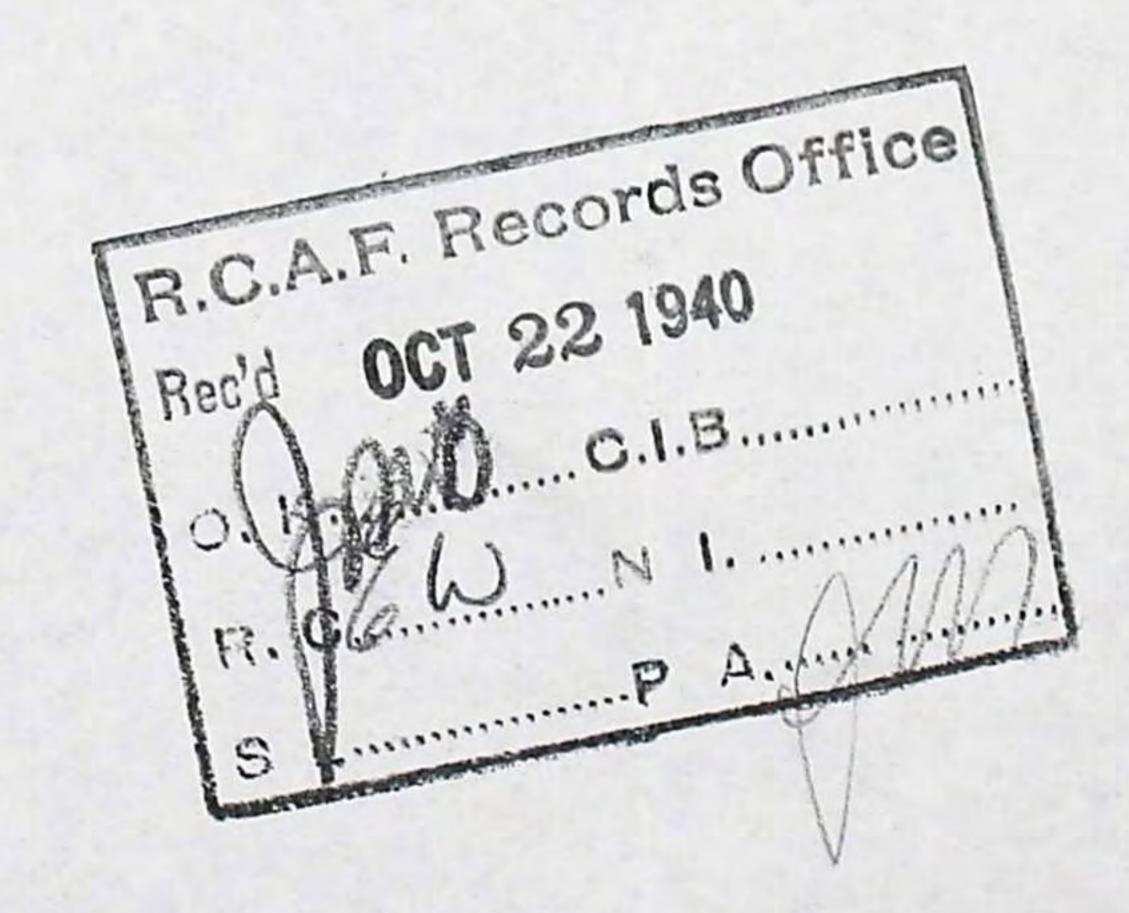
Recruiting Centre, R.C.A.F., 1254 Bishop Street, Montreal.

D-435290 Sigmn. CLARSON, Allan Hugh

- 1. The m/n Signalman has been a member of this Unit since 14 Aug 40 and attended a two weeks N.P.A.M. Camp Training period at Farnham, Que.
- In the event that he is offered the opportunity to enlist for Active Service with the R.C.A.F., this Unit will arrange for his discharge from the N.P.A.M.

cesterick

(C.G.E. Feick), Lieutenant, Adjutant, 4th Divisional Signals, R.C.C.S.



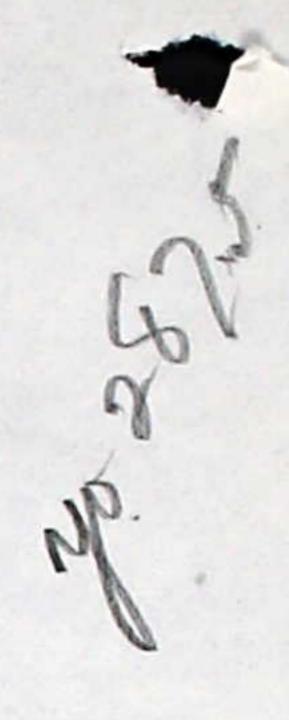


EMPLOYMENT SERVICE SPECIAL RESERVE

PROVINCIAL FREE EMPLOYMENT BUREAU

DEPARTMENT OF LABOUR - PROVING

PROVINCE OF QUEBEC



Verdun, September 18, 1940.

The Officier Commanding, Royal Canadian Air Force, Bishop Street, MONTREAL, P. Q.

Dear Sir:

I have the honor of recommending to your very kind consideration Mr. Allen Clarson, a young man of eighteen years old, living at 6022 Durocher Street, Montreal, who would like to join the Royal Air Force.

if it were possible, to assist Mr. Clarson to obtain a position in your service.

Very truly yours,

Laure Buck

DIRECTRICE

R.C.A.F. Special Reserve

R. C. A. F.

AIR CREW ENLISTMENT AGREEMENT.

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

(Witness)

(Signature of Applicant)

October 21st, 1940.

(Date)

October 21st, 1940.

(Date)

A.F.M. 27 29-7-40 R.C.A.F. Records Office

R.C.A.F. Records Office

R.C.A.F. Records Office

R.C. OCT 22 1940

C.I.B.

C.I.B.

R. C.I.B.

R

AIR FORCE No. R77218

R.C.A.F. Special Reserve (Wireless Operator, No. 1 Manning Depot, Foronto, Ont. Air Gunner)
Posted To Trade Standard.

ROYAL CANADIAN AIR FORCE

(ATTESTATION PAPER)

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

1. Surname						
Present Address4.0.2.2	Dyroche	Me Out	remont, Montre	Le Luce.	Telepho	ne. La. 3.9.09
3. Permanent Address6.0.	22 Durocher	ave. Quetrem	mt. Montreal.	Zue.	land	da
4. Place of Birth. Montre	Ly. Zinelier	Canada.	Citiz	enship	Casu	adian
5. Date of Birth					1	
6. Particulars of Children						
Name	D	ate of birth	Name			Date of birth
W/A						•••••
•••••••••••••••••••••••••••••••••••••••						
······································						
7. Occupation Lunion	r bleck		8. Religion	Boma	n 6	atholic
9. Languages Englis	L Sheen	the.		(St	tate denomin	nation
10. Next of Kin (Full Name)	Husky Leave	ate proficiency large	Relationsh	in \mathcal{J}	ather	
" Address 6	322 Duroch	() are O	Itrument.	Monto		2 / /
11. Father (Full Name).	Le Lone	16/200	Birthnlace		+6	Hall Ist. Est
" Address60.22.	Duracher 1	and the	t. Que itizanchi	Br	tich	and the second of the second o
" Occupation &	0	///			2.08	
12. Mother (Full Maiden Na	ama) Sale	The same	Pinthalogo	J. B	1	12 F Inelan
" Address6.0.2.2.	La L	6 DIM	Citizonali	13	- til	()
			. Chizensin	J	, and	1
13. Details of any Naval, Mi	All Fold	Service.				
Unit	Place	Rank	nk Trade		To	Reason for discharge
	m -1	1.		From	To DRIE	0,11
h C.C. D. h	Mantreal	Lignalman	none	20H Cing.		Still Phere
- At-					•••••	
14. Honours, Awards, Mentic	ns NA	*			*	
15. Are you now on any Nav		r Force Reserve	2 Royal land	la la	us di	and moon
16. Have you previously mad			// /	/	//	
When?						
17. Were you ever discharged					*	
If so, state nature of disa						
18. Have you ever been or ar	e you now in rece	eipt of a Disabili	ty rension	· · · · · · · · · · · · · · · · · · ·	-ds (office
If so, state nature of Disa	ability/V/t		(B.C.F	F. Re	COLUMN.	2
19. Have you ever been conv	icted of an indict	able offence?/.	Redd Redd	atechaty	IC. LANTA	ItC.
20. Are you in debt?/N.Q	If so, st	ate particulars	1. /d		G.L.P.:	Aman.
			R.	16.1	A Com	
R.C.A.F. Form R. 100			8.		Charles and the same of the sa	
#UOM 8-40 (5739) ELQ. 1062-3-88	1-132		To the same of the			6

	Name of school	From	ate To	Courses—Subjects, etc.	
Primary Education—Public or Separate School	Lajoie School, Montreal	1928	1936	General	
High School—Collegiate Institute, etc Technical School	Stagaie School, Montreat	1936	1938	Commercial	
University or School other than above					
Correspondence Courses, etc					
22. Particulars of all Civil Occupa	tions (in full):				
		Da	ate		
Employer and place	Duties, trades, positions	From	To	Reason for leaving	
Steel bo of bonada Montreal.	Junior blerk.	1940	1940	Still Employed	
Dominion Stores Wontres	Crand Boy	1939	1939	To improve position	
23. Flying Experience (in Hours)	Solo. none	.Dual	non	Passenger 6.hrs	
24. Special Qualifications, Hobbies	s, etc., useful to the R.C.A.F/	N. R.		•••••••••••••	
25 Sports engaged in State ext	tensively moderately occasionall	V		ning Hackey Basehall	
	Pala, Bajana, Brug.			thall, Lacrosse Moderally	
26. AIR FORCE DUTY you wish to	enlist for Ground Duties.	-			
If for Ground Duties, state Ai	r Force trade in which you wish erence as (a) Pilot; (b) O bserver	to enlist; (c) Air	Gunner	r (d) W ireless Operator (Air Crew).	
27. Names of at least two persons	who can give references as to ch	aracter	and abil	lity.	
Name	Address	Address		Occupation	
Mr. Chalmus H.	Steel bood n	Steel bo of Canada Office Montreel lance of			
Mr. L. Someon !	MP. 3861 Lasalle	Blue	La Duck	M. G. Terduse	
28. Other information that may ha	ave any bearing on this application	on			
20 Do material that we said	nation re-waggination and income	ation or	e compi	ılsory? Yes	
				t to the best of my knowledge and	
		0			
Date Sept 23 rd	19.4.6 Signature	.6.1.	anson		

(D)

I,....declare) that I will

Date.....Octob

(E)

The Recruit he would be liable

The above que

I have taken cas replied to and the

at.....Mont

FOR OFFICIAL USE ONLY

Subjects, etc.

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Type	General a	ppearance
Suitability for (state in	what capacity)	
Date	Signature	Rank
(B) Report of Trade Test—		
Trade in which tested		
Result		
Trade qualifications other	er than above likely to lead to efficie	ent employment in the R.C.A.F
Date	Signature	Rank
(C)	DECLARATION MADE BY MAN	N ON ATTESTATION
Hugh Allan C		
particulars are true, and I hand overseas, in the Royal Cathereafter, and in any event	anadian Air Force for the duration of	vice anywhere in Canada, and also beyond Car the present war, and for the period of demobiliza
particulars are true, and I hand overseas, in the Royal Ca	anadian Air Force for the duration of for a period of not less than one ye	vice anywhere in Canada, and also beyond Car the present war, and for the period of demobiliza
particulars are true, and I hand overseas, in the Royal Cathereafter, and in any event services.	anadian Air Force for the duration of for a period of not less than one ye	rvice anywhere in Canada, and also beyond Can the present war, and for the period of demobilizator, provided His Majesty should so long require A. A. Llasson Signature of Recruit
particulars are true, and I hand overseas, in the Royal Cathereafter, and in any event services.	anadian Air Force for the duration of for a period of not less than one yes. 19 40. OATH TAKEN BY MAN ON	the present war, and for the period of demobilizator, provided His Majesty should so long required at the following should so long required the state of Recruit Signature of Recruit
particulars are true, and I hand overseas, in the Royal Cathereafter, and in any event services. Date October 21st (D) Hugh Allan Cathereafter, and I han Cathereafter, and I had I have a services.	anadian Air Force for the duration of for a period of not less than one yes. 19 40. OATH TAKEN BY MAN ON	the present war, and for the period of demobilizator, provided His Majesty should so long required at the present war, and for the period of demobilizator, provided His Majesty should so long required at the provided His Majesty should so long required at the period of demobilizator. **Recruit** NATTESTATION do sincerely promise and swear (or soler)
particulars are true, and I hand overseas, in the Royal Cathereafter, and in any event services. Date October 21st (D) Hugh Allan Cathereafter, and I han Cathereafter, and I had I have a services.	anadian Air Force for the duration of for a period of not less than one ye 19 40. OATH TAKEN BY MAN OF LARSON Il and bear true allegiance to His Management of the duration	the present war, and for the period of demobilizator, provided His Majesty should so long required at the present war, and for the period of demobilizator, provided His Majesty should so long required the signature of Recruit Signature of Recruit do sincerely promise and swear (or soler
particulars are true, and I hand overseas, in the Royal Cathereafter, and in any event services. Date October 21st declare) that I will be faithful october 21st.	anadian Air Force for the duration of for a period of not less than one ye 19 40. OATH TAKEN BY MAN OF LARSON Il and bear true allegiance to His Management of the duration	the present war, and for the period of demobilizator, provided His Majesty should so long required and Llasson Signature of Recruit ATTESTATION do sincerely promise and swear (or soler ajesty. Signature of Recruit
particulars are true, and I hand overseas, in the Royal Cathereafter, and in any event services. Date October 21st (D) Hugh Allan Cathereafter) that I will be faithful Date October 21st (E)	anadian Air Force for the duration of for a period of not less than one ye t. 19 40. OATH TAKEN BY MAN OF LARSON al and bear true allegiance to His Manadian Air Force for the duration of the period of not less than one ye CERTIFICATE OF ATTES' med was cautioned by me that if he re	the present war, and for the period of demobilizator, provided His Majesty should so long required all allamants. NATTESTATION do sincerely promise and swear (or soler ajesty. Signature of Recruit TING OFFICER
particulars are true, and I hand overseas, in the Royal Cathereafter, and in any event services. Date October 21st (D) Hugh Allan Cathereafter) that I will be faithful declare) that I will be faithful Date October 21st (E) The Recruit above nare true, and I hand and I have the result of the punition of the would be liable to be punition.	anadian Air Force for the duration of for a period of not less than one ye t. 19 40. OATH TAKEN BY MAN OF LARSON al and bear true allegiance to His Manadian Air Force for the duration of the period of not less than one ye CERTIFICATE OF ATTES' med was cautioned by me that if he re	the present war, and for the period of demobilizator, provided His Majesty should so long required and successful and successf
particulars are true, and I have taken care that I have taken care t	certificate of Attest	the present war, and for the period of demobilization, provided His Majesty should so long required and Lland Signature of Recruit NATTESTATION do sincerely promise and swear (or soler ajesty. Signature of Recruit TING OFFICER made any false answers to any of the above questruit in my presence.
particulars are true, and I have taken care that he as replied to and the said Recognition in the Recognition of the Recognition of the said Recognition in the said Recognition i	certificate of ATTES med was cautioned by law. I answers were then read to the Receive understands each question, and the cruit has made and signed the declar	N ATTESTATION do sincerely promise and swear (or soler ajesty. Colors Signature of Recruit Signature of Recruit TING OFFICER made any false answers to any of the above quest ruit in my presence. at his answer to each question has been duly ent

FOR OFFICIAL USE ONLY CERTIFICATE OF MEDICAL EXAMINATION

Part 1. Information obtained from the applicant—		
1. Age. 2. Have you ever suffered from any of the foll		
(a) Rheumatism 100	(j) Nasal Trouble	
(b) Tuberculosis	(k) Ear Disease	
(c) Bronchitis or Asthma.	(1) Eye Disease	
(d) Heart Disease	(m) Epilepsy	
(e) Kidney or Bladder Disease		ise
(f) Gastro-intestinal	(o) Syphilis	
(g) Rupture		100
(h) Varicose Veins		MO
(i) Flat or Deformed Feet.	(r) Other Disease or Defect.	MO
3. Have you ever worn glasses?	2/11/11/11	
Examiner's Remarks re above 3.9. 20	Signa O is N	ture of Applicant
•••••••••••••••••••••••••••••••••••••••	••••••••••••	
•••••••••••••••••••••••••••••••••••••••	••••••••••••	
Part 2. Information obtained by Medical Examination (Applican	nt must be stripped)—	
1. Identification marks or scars (if operative obtain history	y)	
•••••••••••••••••••••••••••••••••••••••		* * * * * * * * * * * * * * * * * * * *
2. Height 5 feet 9/4 inches. 3. W	eight	156 pounds.
	olor of Eyes.	
Good (Good		A Market Contract of the Contr
$\begin{array}{lll} \textbf{6. Development} & \begin{cases} \textbf{Good} \\ \textbf{Fair} & \textbf{7. Chest Measurement} \textbf{Full} \\ \textbf{Poor} & \end{cases} \\ \end{array}$	expiration	inches
Rang	ge of expansion	inches
8. Hearing—Right. WULO Left. WOTO Tym	pana—Right	Left.
9. Vision—Without glasses—Right		
Left	Left	•••••••••••
10. Condition of mouth and teeth		
11. Urine—Albumen Sugar	r	7
12. Abnormalities (Congenital and Pathological) found on I	Examination	all Varicoul
telt.		
Part 3. The Candidate has been examined in accordance wit	h the pamphlet, "Physic	cal Standards 4213
and Instructions for the Medical Examination of Recruits	" and he is considered fit	for Category
Any special remarks of the Medical Officers		
	<i>J.</i>	
Ascheek N. 1840/40 Ag.		
19.10.110. V Ray # 16 ke 478. mg	50/	
J		
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Date		
District 1.	hx.	
President	Member	Member