R77227
CUSHING
GORDON PINDER

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R0077227 CUSHING GORDON P — FS 3

1 NUMBER — NAME — 29 RANK

SERVICE AWARD CARD

FORM NO. R. 325 — R.C.A.F.

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

51648

Ds
Wgs

7 May 46

PREFIX — NUMBER — NAME — RANK — CODE

IBM 83961

LICENSED FOR USE UNDER CANADIAN PATENT NUMBER 315306

6201 15/3/50

Gordon C. Cushing (Father)
1310 Pine Ave., West,
Montreal,
Que.

Jan.-45

MEMORIAL BAR
DATE DESP
REGN. NO 3946

Fighter Command. RCAF.

CONFIDENTIAL.

R.A.F. Form 39.
Army Form I. 1220.
Naval Form M. 246.

No. of enclosure in Form 48.....

Serial No. in Form 38 or in A. & D. Book .....

Hospital or Sick List—Record Card.

Surname CUSHING. Christian Names G. P.

Rank F/Sgt. Unit No. 411 Sqn.

R.A.F. or Army No. R. 77227. Branch or Trade Pilot.

Age..... Total Service ..... Under instruction as .....

Hospital or Station rendering this form Medical Statistical Office.

Dates of :

Arrival as direct admission..... from.....

,, ,, transfer ..... from.....

Discharge to duty.....

,, as an invalid or to unit for invaliding.....

Transfer..... to.....

Death 6. 5. 42.

Number of days under treatment.....

CLINICAL NOTES.

Disease or injury Death Presumed.

New disease supervening, and date.....

Operation, nature and date.....

Anæsthetic, and method of administration.....

Date	Previous history of case and family, if relevant
	Condition on admission
6. 5. 42.	Death Presumed
	CCh. 1076 (97)

N.B.—In the event of an error in diagnosis, the disease or injury entered will be crossed out in such a way as to remain legible, and the new disease or injury will be entered above it. In the event of a new disease supervening it will be entered in the space allotted.

Wt.39213/2793 36,500 pads 2/41 W.H.H. Ltd. 51-8670 Forms I.1220/16 [P.T.O.

Date	Progress of case
6.5.42.	Death Presumed.

Condition on discharge

Signature of Medical Officer [signature] P/O

Date 9.3.43.

MSO. Lindip

R.C.A.F. Special Reserve
QUOTA 1

R.C.A.F. R. 13
20-M—2-40 (4042)
H.Q. 1062-3-19

ROYAL CANADIAN AIR FORCE

MOVEMENT ORDER

1. Name CUSHING, G.P. Date 23-10-40

No. R77227 Rank AC.2 Trade Aircrew (Pilot or Observer)

Unit or Station of Origin R.C.A.F. Recruiting Centre, Montreal, P.Q.

2. INSTRUCTIONS

you are to proceed to TORONTO, Ont. on October 23rd, 19 40, and immediately on arrival you are to report to the Orderly Room and present this form. If you are delayed en route you are to have Para. 4 of this form completed.

Signature James Selkirk F/O.
for (A.B. Matthews),
Rank Flight Lieutenant,

Acknowledged
(Signature of Bearer) Gordon Cushing Appointment C.O. RCAF. Recruiting Centre, Montreal.

3. TRANSPORTATION ARRANGEMENTS

(a)

Warrant Nos.	Date	From	To	Via	Berth Issued	R.R.
1	23-10-40	Montreal	Toronto	Rail	----------	C.N.R.
2						

Your train leaves Bonaventure Stn. Montreal (Place) at 0030 (Time) hours October 23rd, (Date) 1940

Change trains at ---------- (Place) arriving TORONTO (Destination) at 0820 (Time) hours Oct. 23rd (Date) 19 40

or,

(b) By Road (Insert Instructions) ---------

4. DELAYS OF OVER SIX HOURS

Place delayed ..... Time of delay from ..... to .....

Cause of delay .....

Signature of responsible person .....

Sickness to be certified by a doctor. Railroad delays by train conductor. Other delays by responsible persons

5. FOR INFORMATION OF UNIT AT DESTINATION

The bearer is in possession of the following documents.

1 RCAF. R. 44a 4 MFB. 313b

2 AFM. 27 5 M. 2

3 AFM. 5 6 MFM. 5

6. UNIT REMARKS

Actual date of arrival ..... shown in D.R.O. No. ..... Dated .....

..... Adjutant

..... Rank

..... Unit

NOTE:—This form is to be made out in duplicate. One copy forwarded to the new unit by mail and one copy with bearer. C.O. new unit after completing para. 6, is to forward one copy to Headquarters, Ottawa.

RCAF Special Reserve

ROYAL CANADIAN AIR FORCE

INTERVIEW REPORT

QUOTA 1.

SURNAME..CUSHING.....

CHRISTIAN NAMES.....Jordan Pender.....

MARRIED.....Single.....NO. OF CHILDREN...None.....

N.F.

FLYING

AGE.....25...
HEIGHT.....5', 11"
WEIGHT.....160.

ADMINISTRATION.....
TECHNICAL .....
EQUIP./ACCTS.....
GEN. LIST .....

PILOT.....X...
OBSERVER.....X
W.O. AIR GUNNER.....

EDUCATIONAL STANDING:- Number of years Senior Matriculation.

High School...5 yrs....Technical.....Commercial.....

University (Name and dates of Attendance).....

McGill University 3 years.....

Standing other Countries.....

FLYING EXPERIENCE:- Total hours

Commercial Hours Solo.....Dual.....

Private " Solo.....Dual.....Passenger....50 hrs.

No. Hours & Types during last 2 yrs.....

MILITARY AND OTHER TRAINING:-

C.O.T.C. (McGill) 7 months.....

.....

.....

SPORTS:- (What branches)

.....

HOBBIES: .....

INTERVIEWING OFFICER'S OPINION AS TO CHARACTER AND SUITABILITY FOR THE SERVICE:-

Above average type, good education, excellent appearance

good physique, very good pilot material, intelligent.

Recommendable.

.....

.....

.....

REFERENCES CHECKED--SATISFACTORY ✓
" " --UNSATISFACTORY
" NOT CHECKED.

.....

CONSIDERED SUITABLE FOR COMMISSIONED RANK?..Yes.....

BEST FITTED FOR..Pilot-Observer.....

.....

APPROACH
Confident.....X..
Nervous.....
Easy.....

CARRIAGE
Upright.....X.....
Medium.....
Athletic.....

DRESS
Neat.....X..
Conservative...X..
Clean.....X..
Careless.....

PHYSIQUE
Medium.....X...
Heavy set.....
Slender.....

SPEECH
Clear.....X.....
Slow.....
Hesitant.....

RESPONSE
Quick.....X.....
Deliberate.....
Slow.....

MANNER
Alert.....X...
Confident.....X..
Sincere.....X..
Reserved.....X...
Nervous.....
Overbearing.....
Irresponsible.....

EXCELLENT.....

ABOVE AVERAGE.....X

AVERAGE.....

BELOW AVERAGE.....

MARK WITH AN X THE DESCRIPTION WHICH APPLIES

DATE 9-10-40

RECRUITING CENTRE
Montreal, Quebec.

OFFICER COMMANDING,
R.C.A.F. RECRUITING CENTRE,
MONTREAL, QUEBEC.

(Louis P. Gelinas) F/O
Signature of Officer

J. A. T. P. CANADA

ROYAL CANADIAN AIR FORCE

RECORD OF SERVICE AIRMEN

A.F. No.	Surname	Christian Names	Religion
R77227	Cushing	Gordon Pender	Anglican

Born 30-1-15 Place Montreal. Que. Country Canada Citizen of Racial Origin

ENLISTMENT	CIVIL EDUCATION			PREVIOUS SERVICE
Date 22-10-40	High School Entrance	Jr. Mat.	Sr. Mat.	Nil
At Montreal Que.	Technical School	Corres. Courses		
Term Duration	University			

Rank	Date			Med. Cat.	Date		
Ae 2	22	10	40				
L.A.C.	8	2	41				
T/Sgt (Pd)	15	7	41				
T/Pt/Sgt	1	4	42				

CIVIL OCCUPATIONS AND EXPERIENCE

Advertising Agency Executive

COURSES AND TRADE TESTS

Trade	Grp.	%	PorF	Date Rem.			Trade	Grp.	%	PorF	Date Rem.		
P. or O.	Std.			22	10	40							
AIRMEN, PILOT SPECIAL GROUP				15	7	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)

Mr. Gordon Cameron Cushing (Father) 1310 Pine Ave. West Montreal Que

LEAVE

From	To	Auth. and Description
12-4-41	20-4-41	DRO 87/41 (8 days)

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. R13	Montreal Que.	No. 1 M.D. Toronto	23-10-40	3 B.R.C. 93/41	3 B.R.C.	55 O.T.U.	13-9-41
DRO 268/40	No 1 M.D. Toronto	No 1 T.C. Toronto Ont.	9-11-40				
" 6-41	admitted	Chester St. Hosp.	6-1-41				
" 15-41	discharged	" "	14-1-41				
" 33-41	#1 I.T.S. Toronto	#3 E.F.T.S. London Ont.	8-2-41				
DRO 45/41	No 3 E.F.T.S. London Ont.	No 1 M.D. Toronto	10-4-41				
DRO 103/41	No 1 M.D. Toronto	No 9 S.F.T.S. Summerside	2-5-41				
O.R.O 161/41	#9 S.F.T.S. Summerside	#1 YM "DEPOT HALIFAX N.S.	16-7-41				
			DRO 159				
DRO 179	No 1 Y Dep.	RAF TP.	3-8-41				
		Ex Canada	4-8-41				
		3 P.R.C	31-8-41				

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

(OVER)

R.C.A.F. Special Reserve QUOTA 1

J. A. T. P. CANADA

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

ROYAL CANADIAN AIR FORCE

CERTIFICATE OF THE SERVICE AND DISCHARGE OF

NAME (in Surname first) CUSHING, GORDON PENDER OFFICIAL No. R 77227

(1) DATE OF BIRTH 20-1-15 AGE ON ENTRY INTO R.C.A.F. 25 years 270 days.

PLACE OF BIRTH (Parish) Montreal (Town or County) Quebec

OCCUPATION IN CIVIL LIFE Advertising Agency Executive

TRADE IN ROYAL CANADIAN AIR FORCE Pilot & Observer

RELIGIOUS DENOMINATION Anglican

SIGNATURE ON TRANSFER TO THE RESERVE OR DISCHARGE

(2) CURRENT ENGAGEMENT IN R.C.A.F.:—

(a) State whether in Perm. or A.A.A.F. R.C.A.F. Special Reserve

(b) Period

Date current engagement commenced	Age at that date	Terms of Enlistment
22-10-40	25	Duration of War

(c) Date of actual entry into { years Perm. R.C.A.F. Service / years A.A.A. Force Service

(d) Period re-engaged for

(3) PRIOR ENGAGEMENT IN H.M. FORCES

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

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

Mrs. Gordon Cameron Cushing (Father) 1310 Pine Ave West Montreal P.Q.

PARTICULARS AS TO MARRIAGE

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

(6) DESCRIPTION OF PERSON	Height Feet	Height Inches	Chest Inches	Colour of Hair	Colour of Eyes	Colour of Complexion	Marks, Wounds or Scars
On entry as a boy							
~~On mustering as a man at age of 18 years~~ Or on entry at 18 years or over	5	10 1/2	29 1/2	auburn	blue	blond	appendectomy scar. Scar over left eyebrow.
On extension of service							
On re-engagement							

Further description if necessary

DISCHARGE PARTICULARS:—

Date Address on Discharge

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

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

35M—8-40 (6473)
H.Q. 1062-3-58

(8) MOVEMENTS AND CASUALTIES

Departure Authority	Unit FROM which	Unit TO which	Date of effect	Arrival Authority confirming
M.O. R.13	Montreal P.D. #1 M.D.	Trenton ~~#31 R.N.S.~~	23-10-40	DRO 254/40
DRO 268/40	Toronto	~~Port Colborne~~ #1 T.E. Toronto	9-11-40	
" 6-1-41	admitted	Christie St Hosp	6-1-41	
" 15.1.41	Disch.	Christie St. Hosp.	14-1-41	
" 33	#1 I.T.S. TORONTO	#3 EFTS LONDON	8-2-41	DRO 10
DRO 87/41	#3 ITS London	to 1 M.D. Toronto	10.4.41	DRO87/41
	Granted leave 12-4-41 #1 MD	20-4-41 #9 SFTS	9 days	
DRO 103/41	Toronto 9SFTS	Summerside T.M. Depot.	2/5/41	
	Summerside	Halifax	16.7.41	
	No 1 T Dep.	R.A.F.T.P. Emb.	3.8.41.	
		Canada	4.8.41	
		3 P.R.C.	31.8.41	
	3 PRC	550 Tu	10.9.41	156/41
191/41 (53)		417 Sqdn	11.11.41	1/41 (53)
45/42.	417 Sqdn	411 Sqdn	24.3.42	22/42 (30/16)
	Missing B/K 411 Sq.		6.5.42	976
27/42 (10/27)	411 Sqn.	Dep. N.E.	6.5.42	

(9) PROMOTIONS, REDUCTIONS, REMUSTERINGS

Authority	Description	Date of effect
Reg. No. A.C. 898 D/8-10-40 ~~D/22-8-40~~ DRO 254/40	A C 2 Received (Pilot or Observer)	22-10-40 " " "
DRO 33/41	L A C	8-2-41
	T/Sgt. Pilot Sq.	15.7.41.
DCL 1042a	Prom. T/F/Sgt	1.4.42

(10)

(11)

(10)

Character and Trade Proficiency

Rank	Character	Trade Classification	Degree of Proficiency in Rank and Trade	Date	Signature and Rank of Commanding Officer

(11)

CERTIFICATE OF DISCHARGE

Certified discharged *day of* *19*

Signature and Rank of Officer authorizing the discharge.

4 NAME.....OFFICIAL NO.....
(in full, Surname first)

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

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

Authority	NATURE	Date of Effect

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

ROYAL AIR FORCE.

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

Official No. CAN/R 77227 Name CUSHING, GORDON PENDER. Rank T/Sgt.
(In full in block capitals, surname first). (Or acting appointment).

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

Date of Birth 20.1.15. Religion Anglican Occupation in Civil Life Advertising Agency Executive

Last Enlisted 22.10.40. Current Engagement D. of W.

If a member of the Auxiliary Air Force

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

Name, address and relationship of legal next of kin (to be entered in pencil) :

Mr. Gordon Cameron Cushing; 1310 Pine Ave West, Montreal, P.Q. (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.")

N of K

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

SECTION 1.—MOVEMENTS AND CASUALTIES.

Unit FROM which.	Unit TO which.	Date of Effect.
9 SFTS. Summerside	I.M.D. Halifax	16.7.41.
No 1 Y Dep.	R.A.F. T.P.	3.8.41.
	Emb. Canada	4.8.41.
	3 P.R.C.	31.8.41.
3 P.R.C.	55, O.T.U.	9-9-41
55 O.T.U.	417 Squadron	11.11.41
417 SQDN.	411 SQDN.	20.3.42
411 Squadron	Missing after Operations	6.5.42

SECTION 2.—PROMOTIONS, ACTING APPOINTMENTS (PAID OR UNPAID), REDUCTIONS, REMUSTERINGS.

*Authority.	Description.	Date of Effect.
DRO. 254/40	AC 2, Aircrew.	22.10.40.
DRO 33/41	Reclass LAC.	8.2.41.
	Prom T/Sgt, Pilot "Sp".	15.7.41.

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.

K. & H., Ltd. R5738/8/41

SECTION 4.—CHARACTER AND TRADE PROFICIENCY.

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

Rank.	Character.	Trade Classification.	Proficiency. A	Proficiency. B	Proficiency. C	Whether specially recommended, recommended, or not recommended for promotion or reclassification.	Date.	Signature and Rank of Commanding Officer.
Sgt.	V.G.	Pilot.	On strength for			training only	11.11.41.	W.D. David. S/L.
SGT	V.G	Pilot	SAT	–	SAT	Not recommend	31-12-41	[illegible] S/L.
SGT.	V.G.	PILOT	SAT.	–	SAT.	RECOMMENDED	20.3.42	[illegible] S/LDR.
Sgt.	V.G.	Pilot	Sat	–	Sat	Recommended	6.5.42	[illegible] S/Ldr

POR. 41/42 19.3.42 – 23.3.42 (5 DAYS PRIV.) R.W. # 662638 [illegible] F/O

POR. 30/42 20.2.42 – 26.2.42 (7 DAYS PRIV.) R.W. # 185059 [illegible] F/O

POR 1/41 11-11-41 – 17-11-41 (7 DAYS PRIV.) [illegible] F/O

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.

Air Force No. R77227 Posted to R.C.A.F. Special Reserve No. 1 Manning Depot, Toronto, Ont. Trade Air Crew (Pilot or Observer) Standard.

ROYAL CANADIAN AIR FORCE

(ATTESTATION PAPER)

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

1. Surname Cushing Full Christian Names Gordon Prender
2. Present Address 1310 Pine Ave. W. Montreal Que. Telephone La 5192
3. Permanent Address 1310 Pine Ave W. Montreal Que
4. Place of Birth Montreal, Que. Citizenship Canadian
5. Date of Birth January 20/15 Married, Single, Widower, Separated, Divorced Single
6. Particulars of Children

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

7. Occupation Advertising Agency executive 8. Religion Protestant - Anglican (State denomination)
9. Languages English fluently (State proficiency)
10. Next of Kin (Full Name) Gordon Cameron Cushing Relationship Father
    " Address 1310 Pine Ave. W. Montreal Que.
11. Father (Full Name) Gordon Cameron Cushing Birthplace Montreal, Que
    " Address 1310 Pine Ave. W. Montreal PQ Citizenship Canadian
    " Occupation Stockbroker
12. Mother (Full Maiden Name) (Stepmother - Agnes Bigelow) Gertrude Muriel Prender Birthplace England
    " Address Deceased Citizenship Canadian
13. Details of any Naval, Military or Air Force Service:

Unit	Place	Rank	Trade	Date From	Date To	Reason for discharge
C.O.T.C. - McGill Univ.	Montreal			1939	1940	To join R.C.A.F.

R.C.A.F. Records Office Rec'd OCT 24 1940 O.K. C.I.B. R.C. N.I. S.L. P.A.

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

R.C.A.F. Form R. 100
400M—6-40 (5739)
H.Q. 1062-3-83

61-140

21. Particulars of Education:

—	Name of school	Date From	Date To	Courses—Subjects, etc.
Primary Education—Public or Separate School	Selwyn House Montreal Que.	1922	1927	General
High School—Collegiate Institute, etc.	Bishop Pilkey College-Ont.	1928	1932	Junior & Senior Matric
~~Technical~~ School	Silling Institution - Switzerland	1932	1933	General
University or School other than above	McGill Univ. Montreal	1933	1936	Commercial
Correspondence Courses, etc.	None			

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

Employer and place	Duties, trades, positions	Date From	Date To	Reason for leaving
Charles T. Pearce President A. McKim Limited - Advertising Agency - Montreal Quebec	Junior Executive	1937	-	Still Employed

23. Flying Experience (in Hours) Solo N.A. Dual N.A. Passenger 50 hrs.

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

25. Sports engaged in. State: extensively, moderately, occasionally Tennis, Swimming hockey boxing football 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 N.A.
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
William T. Brace	710 Confederation Bldg. Montreal Que	Montreal Manager A. McKim Ltd. Montreal
Austin Ekers	233 Notre Dame St. Montreal Que	Stockbroker

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

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 August 7th 1940 Signature Gordon Cushing

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, Gordon Pender CUSHING 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 October 22nd, 1940. Gordon Cushing
Signature of Recruit

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

I, Gordon Pender CUSHING do sincerely promise and swear (or solemnly declare) that I will be faithful and bear true allegiance to His Majesty.

Date October 22nd, 1940. Gordon Cushing
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 Montreal, Que. this 22nd, day of October 1940.

Signature of Officer ..... Rank ..... ROYAL CANADIAN AIR FORCE
Unit

FOR OFFICIAL USE ONLY

CERTIFICATE OF MEDICAL EXAMINATION

Part 1. Information obtained from the applicant—

1. Age. 25 2. Have you ever suffered from any of the following defects in health?

(a) Rheumatism: No
(b) Tuberculosis: No
(c) Bronchitis or Asthma: Bronchitis at age of 10 - 5 days duration
(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: glasses from age 12 to 16 now
(m) Epilepsy: no
(n) Nervous or Mental Disease: no
(o) Syphilis: no
(p) Gonorrhoea: no
(q) Bone Fracture: no
(r) Other Disease or Defect: no

3. Have you ever worn glasses? yes

Gordon Cushing
Signature of Applicant

Examiner's Remarks *re* above: Bronchitis as a child of 10 - no unusual recovery glasses to read while at school between ages of 12 & 16 - 8 yrs. Have never bothered candidate otherwise

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

1. Identification marks or scars (if operative obtain history): Appendectomy scar - operation done 2 years ago. Scar ~~over~~ over left eyebrow - hit by hockey stick about 6 years ago.

2. Height 5 feet 10½ inches. 3. Weight 168 pounds.

4. Complexion blond 5. Color of Eyes blue Hair auburn

6. Development {Good / ~~Fair~~ / ~~Poor~~} 7. Chest Measurement—Full expiration 33 inches

Range of expansion 3½ inches

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

9. Vision—Without glasses—Right 20/40 With glasses—Right 20/30
Left 20/20 Left 20/20

10. Condition of mouth and teeth good

11. Urine—Albumen neg. Sugar neg.

12. Abnormalities (Congenital and Pathological) found on Examination

nil

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.**

Any special remarks of the Medical Officers

18-9-40 Vision correctable R 6/9
Cat A
7-10-40 Vision improved c̄ glasses 20/20 - 20/20.
Cat. A1B
18-10-40 Recheck N Goodwin
18-10-40 X-ray 6448 Neg Cowhafer

Date Sept 16 1940

F. Armstrong, President, per G.C.
S. Spence, Member, per G.C.
Member

R.C.A.F. Special Reserve

HEADMASTER
H. C. GRIFFITH, M.A., LL.D.

RIDLEY COLLEGE
ST. CATHARINES, ONT.

August 9th, 1940.

To Whom It May Concern,
The Royal Canadian Air Force.

This is to certify that Gordon P. Cushing was a student at Ridley College from September 1928 to June 1932. He successfully passed the Ontario Junior Matriculation examination in June, 1931, and the Senior Matriculation in June, 1932. As a student, he was well above the average.

As far as his character is concerned, I can recommend him to you in every way, and I feel sure that he will do well in any post in the Royal Canadian Air Force to which you may assign him.

Yours very truly,

H. C. Griffith

Headmaster.

R.C.A.F. Records Office
Rec'd OCT 24 1940
O. K. ..... C.I.B. .....
R. C. ..... N. I. .....
S. L. ..... P. A. .....

MArquette 8853

R.C.A.F. Special Reserve

PINE AVENUE WEST • MONTREAL

McGILL UNIVERSITY CONTINGENT
CANADIAN OFFICERS' TRAINING CORPS
(148th Bn. C. E. F.)

21st October, 1940.

R.C.A.F.,
Bishop St.,
Montreal.

G.P. Cushing

The m/n was a cadet with this Contingent during the training season 1939-40 and was struck off strength on the 14th September, 1940, upon completing the year's training.

Robert M. Healey Jr.
Lieut
A.D.

(E. deL. GREENWOOD)
for Major and Adjutant.

R.C.A.F. Records Office
Rec'd OCT 24 1940
O. K. ..... C.I.B. .....
R. C. ..... N. I. .....
S. L. ..... P. A. .....

CHARLES T. PEARCE, PRES. & GEN'L. MGR.

J. B. STEPHENS, SEC.-TREAS.

R.C.A.F. Special Reserve

A. McKim Limited

ADVERTISING AGENCY

MONTREAL
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VANCOUVER
HALIFAX
LONDON, ENG.

August 7th, 1940.

OK
Le 5193

TO WHOM IT MAY CONCERN: - R.C.A.F.

The bearer of this letter, Mr. Gordon P. Cushing, has been with this Company in the capacity of an Account Executive for nearly four years. He joined us in 1937, after completing a three year course in Commerce at McGill University.

Mr. Cushing is a willing worker and his character is above reproach. He leaves with a clear record, and it is our hope that he will join us again at the termination of the war.

Yours very truly,

W. T. Brace

WTB/EF. MANAGER.

R.C.A.F Records Office
Rec'd OCT 24 1940
O. K. ..... C.I.B. .....
R. C. ..... N. I. .....
S. L. ..... P. A. .....

R77227

CONFIDENTIAL

R.C.A.F. M.2
150M—8-40 (6421)
H.Q. 1062-10-2

RECHECK.

R77227

ROYAL CANADIAN AIR FORCE

FILE NUMBER

Medical Board held at TORONTO, Ontario. #1 MSB. *Date* 21/1/41.

Surname CUSHING *Chr. Names* Gordon, Pindar,
Nature of Commission *Date of Birth* 20/1/15 *Married or Single* S.
Branch *Hours Flown* NONE.
Address 1310 Pine Ave., West Montreal, P.Q.

HAVE YOU ANY HISTORY OF:—

(i) NERVOUS TROUBLE or Nervous Breakdown ..... NO
Severe or "Sick" Headaches, Migraine ..... "
Fits or Convulsions of any kind ..... "
Sun or Heat Stroke ..... "
Head Injury or Concussion (including "knock-out") "KO" - in hockey and boxing.
Insomnia, Nightmares, Sleep-walking, or Bed-wetting ..... NO

(ii) LUNG TROUBLE or Consumption ..... "
Bronchitis, Pneumonia or Pleurisy Bronchitis in childhood.
Asthma or Hay Fever ..... NO

(iii) HEART DISEASE, "Weak or Strained Heart" ..... "
Fainting Attacks or Giddiness ..... "
Rheumatism, Rheumatic Fever or "Growing Pains" "Muscular rheumatism" (?) 2 mos. ago.
Frequent Sore Throats or Tonsillitis ..... "
Diphtheria, Scarlet Fever or Scarlatina ..... NO

(iv) STOMACH or BOWEL TROUBLE ..... "
Chronic Indigestion or Pain after Food ..... "

(v) KIDNEY or BLADDER TROUBLE ..... "
Syphilis or Gonorrhœa ..... "

(vi) TROPICAL DISEASE ..... "
Malaria ..... "
Dysentery ..... "

(vii) EYE TROUBLE or Inflammation of Eyelids ..... "
Wearing of Glasses Wore glasses at school.
Colour or Night Blindness ..... NO

(viii) EAR TROUBLE, Earache or Discharge from Ears ..... "
Deafness, Noises in the Ears, or Dizziness ..... "
Frequent Colds in Head, Catarrh or Obstruction ..... "
Prolonged Hoarseness or Loss of Voice ..... "
Sea, Car or Train Sickness ..... "
Discomfort on Swings, Roundabouts, Switchbacks ..... NO

(ix) OPERATIONS T&A in infancy. Appendectomy at 23.

(x) Any Illness or Injury not mentioned above Measles, mumps.

Education Senior Matric plus 3 yrs. University (McGill). 1936.
Present Occupation Advertising Hobbies Reading.
Previous Service C.O.T.C -- 1 yr.
Athletics Hockey, boxing, tennis, swimming, football.
Habits—Smoking None Alcohol Moderate beer.
FAMILY HISTORY—Consumption ..... NO
Nervous Ailments, Mental Trouble, or "Fits" ..... NO
Father Alive—Health Good Dead—Cause
Mother ~~Alive—Health~~ Dead—Cause "Stomach trouble"
Brothers (0) ~~Alive—Health~~ (....) Dead—Cause
Sisters (0) ~~Alive—Health~~ (....) 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 21-1-41 *Signature* Gordon Cushing *Witness* J. Whaley

GENERAL MEDICAL AND SURGICAL EXAMINATION

Impression given by *(a)* Physique Athletic *(b)* Mentality Standard plus.
Body Marks, Scars, Deformities Appendectomy- McBurney and linear above left eyebrow.
Size of Thyroid Gland NORMAL
Surgical Abnormalities NONE
Results of Wounds, Injuries, Operations NONE

	Date 21/1/41.	Assessing Room	Date	Assessing Room	Date	Assessing Room
Height (ins.)	70					
Weight (lbs.)	143½					
Chest Circumference (ins.)	34½					
Body Build (lbs.)	0					
Leg Length (ins.)	43					
Pulse Rate — Sitting	72					
Pulse Rate — Standing 1st	84					
Pulse Rate — Standing 2nd	82					
Pulse Rate — After Exercise	108					
Pulse Rate — Time to Normal	45					
Arterial Walls	N					
Blood Pressure — Systolic	122					
Blood Pressure — Diastolic	76					
Heart — Size	N					
Heart — Sounds	N					
Heart — Rhythm	N					
Lungs	N					
Breath held	72					
Expiratory Force	100					
Vital Capacity (Best of 5)	4100					
Reflexes — Knee	N					
Reflexes — Ankle	N					
Reflexes — Triceps	N					
Reflexes — Abdominal	N					
Reflexes — Plantar	N					
Cranial Nerves	N					
	R. L.	R. L.	R. L.	R. L.	R. L.	R. L.
Balancing Rod	2FS 1FS					
	R. L.	R. L.	R. L.	R. L.	R. L.	R. L.
Self Balancing	1S 1FS					
Tremors — Fingers	SF					
Tremors — Eyelids	O					
Abdomen — Liver	N					
Abdomen — Spleen	N					
Abdomen — Muscular Tone	N					
Urine — Albumen	Neg.					
Urine — Sugar	Neg.					
Initials of M.O.	CSB.					

Remarks on any Abnormalities Found

Date

History of illness "flu" about end ov Nov. which left him with stiffness and pains in the back and knees. The stiffness persisted and he apparently was admitted to Christie St. Feels that he is now back to normal.

21/1/41.
Post. Influenal myalga diagnosed at Christie St. hospital. I don't like red headed men with joint and muscle pain.
FALM

Date

Date

Liver felt just under R.C.M.

40 mm. Hg. Test
Date 53 secs. -- 6/677/877/778/7.
Date
Date
Date

Remarks by Consultant. Pulse satisfactory as might expected considering he has been having practically no exercise. The records should be seen in connection with the illness mentioned above.

C.S. Barker, Lt.

EYE EXAMINATION

History	Glasses for studying and at school.		
Visual Acuity	R. 20/20 , $\bar{c}$ 2.25 = 20/100		
	L. 20/20 , $\bar{c}$ 2.25 = 20/100		
Colour Vision	Normal Ishihara.		
Red, Green	Normal.		
Diaphragm Test (P.D. = 70)	Bar at 3 Exo.		
Convergence	C. = 9. cms.		
	S. C. = 14.5 cms.		
Accommodation	R. 8.5 "		
	L. 8.5 "		
Cover Test	Lat. div. R&L R.R.		
Fundi and Media	N.		
Fields	N.		
Remarks:	D. P. 0,0,0. mms. FIT.		
	Initials of M.O. HLS.	*Initials of M.O.*	*Initials of M.O.*
	Date 21/1/41.	*Date*	*Date*

EXAMINATION OF EAR, NOSE AND THROAT

History	T. & A. in infancy		
Hearing	R. Ear	W. V. 20'	
	L. Ear	W. V. 20'	
External Ear, Meatus Membranes	R. Ear	N	
	L. Ear	N	
Middle Ear, Eustachian Tubes	R. Ear	PAT.	
	L. Ear	PAT.	
Cochlear Apparatus	R. Ear	N	
	L. Ear	N	
Vestibular Apparatus	R. Ear	N	
	L. Ear	N	
Buccal Cavity		N	
Teeth		Good	
Gums		Healthy	
Pharynx		"	
Nasopharynx		"	
Nose		Septum to left	
Larynx		Normal.	
Remarks:	FIT.	*Initials of M.O.* JBW	*Initials of M.O.*
		Date 21/1/41.	*Date*

HISTORY OF PRESENT CONDITION

Date.....

Records Office
MAR 3 1941
S. L. ..... P. A. .....

HTMc.

OBSERVATIONS AND FINDINGS BY PRESIDENT OF BOARD

Date 21/1/41.

Developed joint pain after influenza- Is a red head. Now O.K.

CATEGORY APPROVED
A1B — A3B
FEB 4 1941
for D.G.M.S.

Category -- A1B, A3B.

(F.A.L. Mathewson

OFFICIAL ROYAL CANADIAN AIR FORCE CASUALTY NOTIFICATION

NUMBER	RANK	TRADE	UNIT
R77227	F/SGT.	PILOT (SP GR)	411 SQDN. (OVERSEAS).

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

NAME: CUSHING, GORDON FENTON

MARITAL STATUS: SINGLE

WAS AIRMAN ON INDEFINITE LEAVE WITHOUT PAY? NO

NEXT OF KIN AS SHOWN ON REC. OF SERV. & RELATIONSHIP: MR. G.C. CUSHING (FATHER)

ADDRESS: 1310 PINE AVENUE, WEST, MONTREAL, QUEBEC.

NAME ADDRESS D.A.B.

ADDITIONAL PERSON TO BE NOTIFIED — ADDRESS

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

ADDRESS

RELIGION: ANGLICAN CANADIAN: YES FRENCH CANADIAN: OTHER

PARENTS NAMES: MR. GORDON CAMERON CUSHING,

ADDRESS: 1310 PINE AVENUE, WEST, MONTREAL, QUEBEC.

FATHER LIVING ON ENLISTMENT: YES

MOTHER LIVING ON ENLISTMENT: NO

WAS MEMBER ATTACHED TO R.A.F. AT TIME OF CASUALTY? YES/NO: NO

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 KWY---PK6755---d-1-MARCH-43.

5672

CASUALTY DETAILS:

"PREVIOUSLY REPORTED "MISSING BELIEVED KILLED". 6-MAY-42 AFTER AIR OPERATIONS (OVERSEAS).

NOW "PRESUMED DEAD" 6-MAY-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 10-MARCH-43.

LOCATION OF WORK WILL.

P.of D.-----YES

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

7

COPY FOR DOCUMENT FILE

FOR CHIEF OF THE AIR STAFF

FORM 6

DOMINION BUREAU OF STATISTICS—QUEBEC DEATH TRANSCRIPT

Do not write in this space

1. PLACE OF DEATH

Municipal county: OVERSEAS

Official name of civil municipality or township:

Place an X over the word which applies to this municipality or this territory: City | Town | Village | Parish | Township

Street: No.: Hospital or Institution:

2. LENGTH OF STAY

(a) In hospital or institution	Years	Months	Days	(b) In municipality where death occurred	Years	Months	Days	(c) In Province	Years	Months	Days	(d) In Canada (if immigrant)	Years	Months	Days

3. NAME OF DECEASED

Surname: CUSHING (Block letters)

Given names: GORDON PENDER

4. RESIDENCE

Street: Pine Avenue West No. 1310

Official name of civil municipality or township: Montreal

Municipal county: Province: Quebec

5. SEX	6. NATIONALITY (Citizenship)	7. RACIAL ORIGIN	8. Single, Married, Widowed or Divorced (*Write the word*)
Male	Canadian		Single

9. If married give name of wife or husband of deceased:

10. BIRTHPLACE (Province or Country): Quebec

11. DATE OF BIRTH: January (Month) 20th (Day) 1915 (Year)

12. AGE OF DECEASED	Years	Months	Days	If less than one day old
	27	3	16	....hrs. or....min.

OCCUPATION

13. Trade, profession or kind of work, as **spinner, teamster, office clerk,** etc.: Pilot

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

15. Date deceased last worked at this occupation: May 6/42

16. Total years spent in this occupation: Two

	17. NAME	18. BIRTHPLACE (Province or Country)
FATHER	Cushing, Gordon Cameron	Quebec
MOTHER (Maiden Name)	Pender, Gertrude Muriel	England

19. Place of burial, cremation or removal:

20. Date of burial: ....19....

21. PLACE OF REGISTRATION OF THIS BURIAL

(a) Name of parish or church:

(b) Civil municipality of:

(c) Municipal county:

(d) L[redacted] (Month) (Day) 19.... (Year)

Do not write in this space

CONFIDENTIAL MEDICAL CERTIFICATE OF DEATH

22. Date of death: May (Month) 6th (Day) 19 42 (Year)

23. I HEREBY CERTIFY that I attended deceased from ....19.... to ....19....

and last saw h....alive on ....19....

24. CAUSE OF DEATH

I

Immediate cause Give disease, injury or complication which caused death, **not** the mode of dying, such as heart failure, asphyxia, asthenia, etc.

(a) Previously reported missing after air operations, now for official purposes, presumed dead.

due to

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

(b)....

due to

(c)....

II

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

....

....

III If a communicable disease is mentioned on this certificate, give

(a) Date of appearance....19....

(b) Duration of disease....days

25. If a woman, was there a puerperal condition?....

26. Was there a surgical operation?....Date of....19....

State findings....Was there an autopsy?....

27. If death was due to external causes (violence) fill in also the following:—

Accident, suicide or homicide: Accident (State which) Date: May 6th 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....**M.D.**

Address....**Date**....19....

28. Signature of person who fills in the form (curate, coroner, hospital authority, etc.)

[signature] S/L

For (R.C.A.F. Records Officer)

This signature authorizes the collector to accept this form as authentic.

29. Name of clergyman in charge of Registrar of Civil Status in which registration of this burial was made.

(Voir l'autre côté pour le français)

FORMULE 6

BUREAU FÉDÉRAL DE LA STATISTIQUE—COPIE DU BULLETIN DE DÉCÈS—QUÉBEC

N'écrivez pas dans cet espace

1. LIEU DU DÉCÈS

Comté municipal | Nom officiel de la municipalité civile ou du canton | *Apposer un X sur le mot qui s'applique à cette municipalité ou ce territoire* — *Cité* | *Ville* | *Village* | *Paroisse* | *Canton*

Rue | No. | Hôpital ou institution

2. SÉJOUR

(a) dans l'hôpital ou l'institution	*Années*	*Mois*	*Jours*	(b) dans la municipalité du décès	*Années*	*Mois*	*Jours*	(c) dans la province	*Années*	*Mois*	*Jours*	(d) au Canada (s'il s'agit d'un immigré)	*Années*	*Mois*	*Jours*

3. NOM DU DÉFUNT

Nom de famille..... (*Lettres moulées*)

Noms de baptême ou prénoms.....

N'écrivez pas dans cet espace

4. RÉSIDENCE

Rue..... No.....

Nom officiel de la municipalité civile ou du canton.....

Comté municipal..... Province.....

5. SEXE	6. NATIONALITÉ (Citoyenneté)	7. ORIGINE RACIALE	8. Célibataire, marié, veuf ou divorcé (*Ecrire l'un de ces mots*)

9. Si le défunt était marié, nom de son conjoint

10. LIEU DE NAISSANCE (Province ou pays)

11. DATE DE NAISSANCE..... (jour) (mois) (année)

12. ÂGE DU DÉFUNT	Années	Mois	Jours	Si âgé de moins d'un jour
				.....hrs. ou.....min.

OCCUPATION

13. Métier, profession ou occupation, ex. **tisserand, voiturier, employé de bureau,** etc.....

14. Genre d'industrie ou d'entreprise, tel que **filature de coton, industrie du bois, banque,** etc.....

15. Dernière date à laquelle le défunt vaquait à ce travail

16. Nombre d'années occupées dans cette profession

	17. NOM	18. LIEU DE NAISSANCE (Province ou pays)
PÈRE		
MÈRE (Nom de fille)		

19. Lieu de l'inhumation, de l'incinération ou destination du transport

20. Date de l'inhumation.....19.....

21. LIEU DE L'ENREGISTREMENT DE CETTE SÉPULTURE

(a) Nom de la paroisse ou église.....

(b) Municipalité civile de.....

(c) Comté municipal.....

(d) Date..... (jour) (mois) (année) .....19.....

CERTIFICAT MÉDICAL CONFIDENTIEL DE DÉCÈS

22. Date du décès..... (jour) (mois) .....19..... (année)

23. JE CERTIFIE PRÉSENTEMENT que j'ai donné mes soins au défunt depuis le

.....19.....jusqu'au.....19.....

que je l'ai vu vivant pour la dernière fois le.....19.....

24. CAUSE DU DÉCÈS

I

Cause immédiate

Mentionner la maladie, blessure ou complication, causant la mort, **non pas** son syndrome final, tel: syncope, asphyxie, asthénie, etc.

(a).....

dû à

États morbides, s'il y en a, ayant produit la cause immédiate (Les indiquer dans l'ordre chronologique inverse de leur apparition).

(b).....

dû à

(c).....

II

Autres conditions morbides (importantes seulement) ayant contribué au décès mais n'ayant aucune portée sur la cause immédiate.

.....

.....

III Si une maladie contagieuse est mentionnée à ce certificat, donner

(a) Date d'éclosion.....19.....

(b) Durée de la maladie.....jours

25. S'il s'agit d'une femme, y avait-il état puerpéral?.....

26. Y a-t-il eu intervention chirurgicale?.....Date de l'opération.....19.....

Constatations.....Y a-t-il eu autopsie?.....

27. Dans les cas où le décès est attribuable à des causes extérieures (violence):—

Accident, suicide ou homicide..... (Spécifier) Date.....19.....

Manière de la blessure..... (Dans quelle circonstance)

Nature de la blessure.....

Indiquer si la blessure a été infligée **au lieu du travail, dans l'habitation ou dans un endroit public**.....

Signature.....M.D.

Adresse.....**Date**.....**19**.....

28. Signature de la personne qui remplit la formule (vicaire, coroner, autorité d'un hôpital, etc.)

.....

Cette signature autorise le collecteur à accepter la formule comme authentique.

29. Nom du ministre du culte gardien du registre de l'État civil où est inscrit l'acte de cette sépulture.

.....

(For English see other side)

McGill University

Montreal, August 8th *19* 40

I hereby certify that GORDON PINDER CUSHING

was registered as a student in the School of Commerce of McGill University during the sessions 1933-34, 1934-35 and 1935-36. Mr. Cushing entered the University with the Ontario Middle School Examinations.

T. H. Matthews.

T. H. Matthews,
Registrar.

R77227

REPORT ON FLYING ACCIDENT OR
FORCED LANDING NOT ATTRIBUTABLE TO ENEMY ACTION

If this incident has been reported to the Air Ministry by signal, quote Reference No. and date A.363 6.5.42

Unit	Group No.	Command	Serial No. of Form.
411 Squadron.	12	H.O.F.C.	

Date of incident 6.5.42

Time 0636 hrs.

Site of Incident

Name of Aerodrome or landing ground In sea 10/12 m.ENE of Skegness.

Nature of and purpose for which Flight authorized.

Nature (i Operational or Non-operational Operational.
(ii Day or Night Flying? Day.
(iii Purpose

Details of Airframe and Engine	Airframe	ENGINE Single or Port	Starboard	Centre Port	Centre Starboard
Type	SPITFIRE	MERLIN			
Mark or series	V.B.	45			
RAF No. (and makers' No. for engines)	BL 980	36721/A216774			

Extent of Damage Missing, unrepairable, reduction to scrap or instructional.

All Occupants of Aircraft and Flying Experience of Pilots.

Duty	Name and Initials	Rank	No.	Degree of inj.	PART A Total Solo (Day & Night)	PART B Solo (Night)
PILOT	CUSHING, G.P.	SGT.	R.77227	M.	Type quoted 59.35	All types. 295.40

SUMMARY OF PILOT'S REPORT:

Duration of flight since last take off: Hours. . . .Minutes. . .If engine failure occurred during take off quote height. . . . .

Red section was airborne at 0550 hrs on Convoy patrol. Section flew around convoy on East side, when Red 2 broke away and cut across convoy towards home. At an altitude of 1500 feet Red 1 called Red 2 but failed to get an answer. Red 1 followed Red 2, which lost height gradually, and at approximately 500 feet white smoke was seen coming from the engine. Sgt. Cushing baled out but parachute was only half open when he hit the water. Parachute and aircraft sank in about 30 secs. Red 1 reported to Digby and circled the spot, but no trace was seen.

REPORT BY APPROPRIATE SPECIALIST OFFICERS (A.E. Nav., &c)

From the report made by Red 1 it is quite evident that the engine developed a serious internal glycol leak on the port block. Cat. E.

REMARKS BY UNIT COMMANDER (to be given under three separate headings):-

Part A. Remarks as to circumstances of the incident. (If it occurred at night on or near an aerodrome the nature of the lighting system in use at the time is to be noted in Part A.)

Part B. Diagnosis of all contributory factors. The manner in which any particular factor contributed to the incident is to be clearly indicated.

Part C. General remarks (including any recommendation with regard to personnel, training, airframes, engines, accessories, etc., and notes of any action taken as result of this incident).

The remarks and reports given in paras. 10 & 11 above completely cover the incident.

Signature . . . . . .Commanding RAF Stn. Digby. . . .Date. 7.5.42. . .

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

RC 4
AIR

DEPARTMENT OF NATIONAL DEFENCE

NAVY ═══ ARMY ═══ AIR FORCE

STATEMENT OF WAR SERVICE GRATUITY

DECEASED MEMBER'S NAME: Gordon Pender (CHRISTIAN NAMES) CUSHING (SURNAME)

REGISTER NO. 31950

FILE NO.

PAYEE: Director of Estates,

DATE 16-3-50

ADDRESS

SERVICE NO. R-77227

FINAL RANK OR RATING F/SGT.

DATE OF TERMINATION OF OVERSEAS SERVICE 6-5-42

DATE OF DISCHARGE 6-5-42

	$ ¢
A. TOTAL QUALIFYING SERVICE — NO. OF DAYS 562 / 30 EQUAL TO 18 COMPLETE PERIODS AT $7.50	135.00
B. QUALIFYING OVERSEAS SERVICE — NO. OF DAYS 277 LESS 22 INELIGIBLE DAYS, EQUAL TO 255 DAYS @ 25c. PER DAY	63.75
C. SUPPLEMENT FOR OVERSEAS SERVICE	
DAILY RATES AT DISCHARGE: PAY $ 4.00; SUBSISTENCE OR LODGING AND PROVISION ALLOWANCE $ 1.00; ADDITIONAL PAY $; $; $; $; DEPENDENTS' ALLOWANCE 1/30 OF $; TOTAL $ 5.00 ×7 = $ 35.00; NO. OF DAYS 277 / 183 ×$ 35.00	52.98
D. WAR SERVICE GRATUITY	251.73
E. DEDUCTIONS — OVERPAYMENT OF PAY AND ALLOWANCES $; DEPENDENTS' ALLOWANCE AND ASSIGNED PAY $; OTHER DEDUCTIONS $	
F. TOTAL AMOUNT PAYABLE	251.73

P. & A. Bal. Trans. Trust Account
1/4/50 Journal Voucher # P.A. 301

G. YOUR PORTION OF GRATUITY IS—

DEPENDENTS' ALLOWANCE IN ISSUE TO YOU $ _____ OF $ NIL =$ 251.73

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 ISSUED THEREUNDER.

PREPARED BY	CHECKED BY
EC	

TREASURY	
CHECKED BY	DATE
	29/3/50

Capt.
SERVICE REPRESENTATIVE

10M—3-40 (4425)
H.Q. 1772-45-8

H.Q. FILE NO. 1022-C-4127

NAME CUSHING, Gordon Pender

REGT'L NO. R77227

RANK F/Sgt. Pilot UNIT PRESUMED DEAD OVERSEAS ~~[illegible]~~

CABLE NO.	CABLE DATE	NATURE OF CASUALTY			CAS. LIST NO.	CAS. LIST DATE
DATE OF DEATH:		May 6-42	MOTHER LIVING: NO	WIFE: NA		
MINISTERIAL CARD:		14-5-42	ROYAL MESSAGE: 31-3-43	MEMORIAL CROSS:		
	To the father.		To father	N.A.		
	To father	17-3-43				

Father- Mr. Gordon Cameron Cushing,
1310 Pine Avenue West,
Montreal, Quebec.

CABLE		NATURE OF CASUALTY	CAS. LIST	
NO.	DATE		NO.	DATE

AIR FORCE No. R77227

SURNAME: CUSHING

FULL CHRISTIAN NAME: GORDON PENDER

ENLISTMENT/APPOINTMENT

PLACE

DATE

RELIGION

R.C.A.F. FORM R230

TYPE OF LEAVE

FROM	TO	No. DAYS	DESCRIPTION	AUTH.

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

HONOURS, AWARDS AND MENTIONS

DATE	AWARD	AUTHORITY

POSTINGS, ATTACHMENTS & TEMPORARY DUTY

SOS	TOS	FROM	TO	DATE	AUTHORITY
	TOS	at 411 Sqd.		24 3 42	22/42
		Missing Affr	Air Ops	6 5 42	AFRO 273/42
		Missing Bel.	Killed	6 5 42	476 29/5/43
		Presumed	Dead	6 5 42	AFRO 453/43
	TOS	at RCAF N/E W(M)		15 5 43	N/E W.
	SOS	RCAF N/E W(PD)		15 5 43	1/43

ALL OTHER CASUALTIES

CASUALTY AND DATE	AUTHORITY

4/8/41

AIR FORCE No. R77227

SURNAME: Cushing

FULL CHRISTIAN NAME: Gordon Pender

ENLISTMENT/APPOINTMENT

PLACE

DATE

RELIGION

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

CIVIL EDUCATION

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

CIVIL OCCUPATIONS AND EXPERIENCE

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 3021

RANK	DATE	AUTH.	TRADE	DATE	AUTH.
Sgt	15 7 41		Pilot		
F/Sgt	1 2 42				
T/F Sgt	15 1 42	AFRO 113/44			

OFFICERS, AIRMEN/AIRWOMEN

COURSE OR TRADE	GRP.	%	PF	DATE

AIR FORCE No. R77227

SURNAME: CUSHING, FULL CHRISTIAN NAMES: GORDON PENDER

ENLISTMENT — PLACE Montreal Que — DATE 22-10-40

RE-ENLISTMENT

C.R. FILE NUMBER

RECORD OF SERVICE AIRMEN

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

1. POSTING (INDICATE S.O.S. AND T.O.S.) Temp. duty in red.

S.O.S. OR T.O.S.	UNIT AND PLACE	EFFECTIVE			D.R.O.
TOS	1 MD Toronto Ont	23	10	40	Emp 254
SOS	1 MD to 1 TC Toronto Ont	9	11	40	Emp 268
	Attached to 1 TC for pay only				
	& POS 31 ANS Portalbert	9	11	40	1 TC 21
SOS	31 ANS	4	1	41	31 ANS 4
TOS	1 AD Toronto	5	1	41	1 D 204
SOS	122 Toronto	8	2	41	122133
SOS	3 E.F. London	9	2	41	3 E 710
SOS	3 E.F.T.S London Ont.	10	4	41	3 EF 45
TOS	1 M.D. Toronto	11	4	41	1 MD 87.
SOS	1 M.D. Toront	2	5	41	1 MD 103
TOS	#9 S.F.T.S, Summerside P.E.I.	3	5	41	9 SF 100
SOS	9 SFTS Summerside	16	7	41	9 SF 161
TOS	1 M. Depot Halifax	17	7	41	Em 159
SOS	1 "Y" Depot Halifax	3	8	41	Em. 179
	R.A.F. Trained Pool				
TOS	3 PAC	31	8	41	RAF 44
SOS	to 55 O.T.U.	10	9	41	RAF 42,44
S.O.S	to 417 Sqd. fm. 55 OTU.	11	11	41	RAF 53
att.	to 2 Dil. 3 Ref Colerne from 417 Sqd	16/13	12/1	41/42	RAF 2 RAF 5
8					
Att.	Charing Down from 417 Sqd	26	1	42	RAF 8
Att.	Colerne from 417 Sqd	26/25	1/2	42	RAF 8, 12
SOS	to 411 Sqd fm 412 Sqd.	24	3	42	RAF 16
	Missing Killed Killed	6	5	42	RAF 29
SOS	411 Sqn to 1 Dep. NE Missing	6	5	42	RA 737
Att	Sta. Digby fm 417 Sqd ✓	4/8	2/2	42	RAF 10
	PX 6644	8	5	42	
Flying Battle - Operational - Spitfire" near Lille, England - Overseas Primary. Pilot bailed out - height insufficient for parachute. Last in sea.					
	411 Squadron.				
	Pres. Dead	6	5	42	
	PX 6733	1	3	43	
Presumed dead		6	5	42	RAF 53
WH Computed		2	10	44	

2. RECLASS'NS-PROMOTIONS-ETC.

RANK	EFFECTIVE			D.R.O.
AC2	22	10	40	Emp 254
LAC	8	2	41	122133
T/Sgt paid	15	9	41	9 SF 161
T4				
T/Flt/Sgt (paid)	1	2	42	RA 743.
2/Lt	15	1	42	A7R 0113

3. MEDICAL HISTORY

EXAMINATIONS (IN RED INK)

DATE	FORM	CATEGORY	REMARKS

HOSPITALIZATION (IN BLACK INK)

HOSPITAL QUARTERS	ADMITTED CONFINED	DISCHARGE RET'N DUTY	D.R.O.
18-10-40	P 100	QB	
SSQ	9-12-40	13-12-40	3 W 93 d 41, 42
SSQ	29-12-40	3-1-40	3 W 93 d 35
Chester St	6-1-41	14-1-41	D 216-15°

4. TRADE AND CHARACTER

TRADE	GROUP	EFFECTIVE			D.R.O.
Recruit (Pay O)	S	23	10	40	Emp 254
Airman Pilot	S.4	15	9	41	9 SF 161
3025					X

TRADE PROFICIENCY	CHARACTER ASSESSMENT	DATE OF R41

5. COURSES-TESTS-ETC.

SUBJECT	RESULT	DATE			AUTHORITY
Pupil Pilots Course	69.5%	10	4	41	T 93
Pupil pilots Course	61.4	15	9	41	9 SF T 58, T 87 A

6. LEAVE

FROM	TO	DAYS	REMARKS	D.R.O.
12-4-41	20-4-41	9		1 M D 87

R.C.A.F. OVERSEAS — ENLISTMENT MARITAL STATUS — PRESENT MARITAL STATUS — HIGH & TECH. SCHOOL EDUCATION — C. OF E. — DAP. — U.C. — PRES. — R.C. — IHEB. — MIS. — OTHER PREV. SERV. — RELIGION — PROVINCE OF ENLISTMENT — DISCHARGE — AC

AIR FORCE No. R 77227 R

SURNAME: Cushing

FULL CHRISTIAN NAMES: Gordon Pender

ENLISTMENT — PLACE: Montreal Que — DATE: 22-10-40

RE-ENLISTMENT

C.R. FILE NUMBER

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

RECORD OF SERVICE AIRMEN

7. BIRTH: DATE: 20-1-15 — PLACE: Montreal Que — CITIZENSHIP: British 2

FATHER (FULL NAME): Gordon Cameron Cushing

BIRTHPLACE: Montreal Que

MOTHER (FULL MAIDEN NAME): Gertrude Muriel Pender

Deceased

BIRTHPLACE: England

8. EDUCATIONAL STANDING

HIGH SCHOOL ENTRANCE: x Montreal P.Q.

JUNIOR MATRICULATION: x " "

SENIOR MATRICULATION: x Montreal Que

TECHNICAL SCHOOL:

UNIVERSITY: x McGill 3 yrs commercial

CORRESPONDENCE COURSES:

Sthg Inst. - Switzerland - 1 yr 8

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

Junior Executive - 3 yrs

10. PREVIOUS ARMY, NAVY OR AIR FORCE SERVICE

COTC McGill University - 1939-40

6

11. HONOURS-AWARDS, MENTIONS

	AUTHORITY	DATE
Pilots flying badge	987-161	15-7-41

12. FLYING EXPERIENCE ON ENLISTMENT (HOURS)

SOLO — DUAL — PASSENGER 50 hrs

13. RELIGION

Anglican 3

14. LANGUAGES

0

15. SPORTS

Tennis, swimming, hockey boxing football

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: G. C. Cushing — RELATIONSHIP: Father

ADDRESS: 1310 Pine Ave W Montreal Que — D.R.O.

FULL NAME: — RELATIONSHIP:

ADDRESS: — D.R.O.

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

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

21. ENGAGEMENTS

TERM	EFFECTIVE	D.R.O.	TERM	EFFECTIVE	D.R.O.
Duration	22 10 40				

22. TEMPORARY DUTY AND MISCELLANEOUS ENTRIES

FROM	TO	DATE	D.R.O.
Occ Pub Qtrs & dr. rations		5-1-41	13215
Occ. pub. qtrs.		10-4-41	1MD87
Occ. qtrs & drawing rations		4-5-41	987100
pub qtrs & rtns		27-7-41	Em159
1310 Pine Ave W	Montreal Que		22302

23. DOCUMENT CONTROL (INDICATE RECEIPT BY DATE)

R60	R79	B465	RAY	AFM-13	IDN. CARD	
1-11-40	4-8-41	24-10-40				