R90861
FLEMING
KEITH MAYNA

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OCCUPATIONAL HISTORY FORM

THIS FORM IS TO BE COMPLETED FOR EACH MEMBER OF THE ARMED FORCES. THE INFORMATION SOUGHT IS FOR THE USE OF GENERAL ADVISORY COMMITTEE 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 MUCH HELP TO THE COMMITTEE.

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

PLEASE LEAVE BLANK

Section A—GENERAL INFORMATION

1. (a) Print name in full FLEMING, KEITH MAYNARD GERALD (b) Reg'l. No. R90861
2. (a) Arm of service R.C.A.F. (b) Unit #7 B & G School, Paulson (c) Rank LAC
3. (a) Date of birth May 28, 1923 (b) Have you any dependents? No (c) Place of residence at time of enlistment Temiskiming, P.Q.
4. (a) Place of enlistment North Bay, Ontario (b) Date of enlistment June 21, 1941.

Section B—EDUCATION AND TRAINING

5. (a) State age on finally leaving school 17 (b) Were you attending school or college up to the time of enlistment? High School
6. State definitely highest standing reached at public, technical or high school (for instance—"4 years, Public School", "two years, High School", "Junior Matriculation", or "4 years technical course in printing", etc.) 4 yrs high school
7. If you attended a university, give name of university and standing or degree secured No
8. (a) Did you ever enter upon a trade apprenticeship? Yes (b) If so, for what occupation? Machinist (c) Did you finish it? No (d) If you did not finish it, how long did you serve at it? 13 months
9. (a) What languages do you speak fluently? (b) What languages do you read well?

Section C—EMPLOYMENT CONDITION AT TIME OF ENLISTMENT

10. (a) State whether you were WORKING or NOT WORKING at time of enlistment. (Enter here only "Working" or "Not Working", as case may be; particulars are asked for below) Working (b) At time of enlistment of what trade union or professional society were you a member? Local 233

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?

N.A. 12. (a) If answer to 11 be "Yes", state exact trade or occupation at which you actually worked (b) State how long you had worked at this trade or occupation

13. 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
16. Nature of employer's business (for instance, "farmer", or "building contractor", or "boot factory", or "iron foundry", or "retail store", etc.)
17. (a) If your last employment was in a business of your own, state nature and address of business (b) Date of discontinuing it

Section E—PARTICULARS CONCERNING THOSE WHO WERE EMPLOYED AT TIME OF ENLISTMENT

QUESTIONS 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

18. Name of employer Canadian International Paper Company Address Temiskaming, P.Q.
19. Nature of employer's business (for instance, "farmer", or "building contractor", or "boot factory", or "iron foundry", or "retail store", etc.) Pulp & paper mill
20. (a) Your specific occupation Machinist helper (b) Number of years' experience at this occupation with any employer 13 months
21. (a) Did your employer promise definitely to give you employment on discharge? Yes (b) Did your employer refuse to promise you employment on discharge? No (c) Do you wish to return to your former employment? Yes

IF 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

N.A.

22. (a) State nature of business, or professional practice (b) Where was it located?
23. (a) Number of years engaged in this business (b) Have you made, or will you make plans to return to the same or a similar business on discharge?

Section F—PARTICULARS OF FARMING EXPERIENCE

24. (a) Do you wish to engage in farming after the war? No (b) Do you feel competent to operate a farm? (c) If so, in what kind of farming?
25. (a) Were you born on a farm? (b) How many years' actual farming experience have you had? (c) In what provinces did you have experience?

Section G—MISCELLANEOUS

26. Have you made any arrangements other than indicated above, for re-establishment in civil life after discharge? No
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 None as yet

R.C.A.F. Records Office
Rec'd JUL 15 194
U.K. C.I.B.
R.C. N.T.
S.L. P.A. CR

DATE 12-3-42 194 SIGNATURE Keith Fleming

CONFIDENTIAL

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

ROYAL CANADIAN AIR FORCE

Medical Board held at Jarvis, Ontario *Date* 15-6-42

FILE NUMBER R.90561

Surname FLEMING *Chr. Names* Keith Maynard
Nature of Commission AG *Date of Birth* 28-5-23 *Married or Single* S
Branch Air Crew *Hours Flown* None
Address No. 1 B. & G. School

HAVE YOU ANY HISTORY OF:—

(i) NERVOUS TROUBLE or Nervous Breakdown — NO
Severe or "Sick" Headaches, Migraine — NO
Fits or Convulsions of any kind — NO
Sun or Heat Stroke — NO
Head Injury or Concussion (including "knock-out") — NO
Insomnia, Nightmares, Sleep-walking, or Bed-wetting — NO
(ii) LUNG TROUBLE or Consumption — NO
Bronchitis, Pneumonia or Pleurisy — YES
Asthma or Hay Fever — NO
(iii) HEART DISEASE, "Weak or Strained Heart" — NO
Fainting Attacks or Giddiness — NO
Rheumatism, Rheumatic Fever or "Growing Pains" — YES
Frequent Sore Throats or Tonsillitis — NO
Diphtheria, Scarlet Fever or Scarlatina — NO
(iv) STOMACH or BOWEL TROUBLE — NO
Chronic Indigestion or Pain after Food — NO
(v) KIDNEY or BLADDER TROUBLE — NO
Syphilis or Gonorrhœa — NO
(vi) TROPICAL DISEASE — NO
Malaria — NO
Dysentery — NO
(vii) EYE TROUBLE or Inflammation of Eyelids — YES
Wearing of Glasses — YES
Colour or Night Blindness — NO
(viii) EAR TROUBLE, Earache or Discharge from Ears — NO
Deafness, Noises in the Ears, or Dizziness — NO
Frequent Colds in Head, Catarrh or Obstruction — NO
Prolonged Hoarseness or Loss of Voice — NO
Sea, Car or Train Sickness — NO
Discomfort on Swings, Roundabouts, Switchbacks — NO
(ix) OPERATIONS — NO
(x) Any Illness or Injury not mentioned above — Measles

Education High School 1½ years
Present Occupation Machinist helper Hobbies none
Previous Service R.C.A.F. one year as C.D.
Athletics Hockey Baseball
Habits—Smoking 2 cigarettes daily Alcohol 1 qt. beer week
FAMILY HISTORY—Consumption NO
Nervous Ailments, Mental Trouble, or "Fits" NO
Father Alive—Health A & W Dead—Cause
Mother Alive—Health A&W Dead—Cause
Brothers (0) Alive—Health (0) Dead—Cause
Sisters (1) Alive—Health A&W (0) Dead—Cause

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

Date 15-6-42 *Signature* Keith Fleming *Witness* [illegible]

GENERAL MEDICAL AND SURGICAL EXAMINATION

Impression given by *(a)* Physique **Sedentary** *(b)* Mentality **Standard**
Body Marks, Scars, Deformities **Round right shoulder & back of neck**
Size of Thyroid Gland **normal**
Surgical Abnormalities **none**
Results of Wounds, Injuries, Operations **N/A**

	Date 15-6-42	Assessing Room	Date 10.7.42	Assessing Room	Date	Assessing Room	Remarks on any Abnormalities Found
Height (ins.)	70		70				
Weight (lbs.)	139		140				*Date*
Chest Circumference (ins.)	325						
Body Build (lbs.)							
Leg Length (ins.)							
Pulse Rate — Sitting	60						
Pulse Rate — Standing 1st	72						
Pulse Rate — Standing 2nd	72						
Pulse Rate — After Exercise	84						
Pulse Rate — Time to Normal	20						
Arterial Walls	N						
Blood Pressure — Systolic (40)	120						
Blood Pressure — Diastolic	80						
Heart — Size	N						
Heart — Sounds	N						
Heart — Rhythm	Reg.						
Lungs	N						
Breath held	70						
Expiratory Force	140						
Vital Capacity (Best of 5)	no equipment						
Reflexes — Knee	N						*Date*
Reflexes — Ankle	N						
Reflexes — Triceps	N						
Reflexes — Abdominal	N						
Reflexes — Plantar	↓ ↓						
Cranial Nerves	N						
Balancing Rod	R. L. 1/S 1/S		R. L.		R. L.		
Self Balancing	R. L. 1/S 1/S		R. L.		R. L.		
Tremors — Fingers	none						
Tremors — Eyelids	none						*Date*
Abdomen — Liver	N						
Abdomen — Spleen	N						
Abdomen — Muscular Tone	Good						
Urine — Albumen	N						
Urine — Sugar	N						
Initials of M.O.							

40 mm. Hg. Test
Date 70/6/665. 555. 556. 666. 66
Date
Date
Date
Date

Remarks by Consultant.

EYE EXAMINATION

History	Wore glasses irregularly for granular state of lids for does not bother him.	2 - 3 years has had five years - Mother has it too	
Visual Acuity	R. 20/20 , $\bar{c}$ 2.50 = 20/200	20/20 20/200	
	L. 20/20 , $\bar{c}$ 2.50 = 20/200	20/20 20/200	
Colour Vision	C.V.N.	N.	
Red, Green	Oriho - no hyper		
Diaphragm Test (P.D. = 57)	Bar at C		
Convergence	C. = 6 cms.		
	S. C. = 6 cms.		
Accommodation	R 6.5		
	L 6.5		
Cover Test	No deviation		
Fundi and Media	normal		
Fields	unrestricted		
Remarks:	Fit A1B A3B		
	Initials of M.O	*Initials of M.O*	*Initials of M.O*
	Date	*Date*	*Date*

EXAMINATION OF EAR, NOSE AND THROAT

History Nil

Hearing	R. Ear	WV 20'	
	L. Ear	WV 20'	
External Ear, Meatus Membranes	R. Ear	N	
	L. Ear	N	
Middle Ear, Eustachian Tubes	R. Ear	N	
	L. Ear	N	
Cochlear Apparatus	R. Ear	N	
	L. Ear	N	
Vestibular Apparatus	R. Ear	N	
	L. Ear	N	
Buccal Cavity		N	
Teeth		GOOD	
Gums		N	
Pharynx		N	
Nasopharynx		SEPTUM LEFT	
Nose		N AIRWAY ADEQUATE	
Larynx		N	
Remarks:	FIT		
		Initials of M.O	*Initials of M.O*	*Initials of M.O*
		Date	*Date*	*Date*

HISTORY OF PRESENT CONDITION

Date.....

1. Pneumonia at 17 years - 3 weeks ill Growing pains as child.
   Has granular form of conjunctivitis for five years.
   Has worn glasses irregularly for 3 years.

OBSERVATIONS AND FINDINGS BY PRESIDENT OF BOARD

Date 16-6-42

Fit category A1B A3B

CATEGORY A.1.B. A3.B. APPROVED
DATE 10.7. 1942
O.C. No. 1 WIRELESS, or B. and G. School

R.C.A.F. Recruiting Office
Rec'd OCT 31 1942
O.K.
R. C.
S. L.

Mrs. Merle Lilliam Fleming
TIMISKAMING Quebec.

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

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

and the following number quoted:—

H.Q. R90861

DEPARTMENT OF NATIONAL DEFENCE
ESTATES BRANCH
OTTAWA, ONT.

2 June 1945.

For the purpose of record and in the event of there being any Service estate available for distribution (according to law) on account of the late

FLEMING Keith Maynard Gerald WOI

R90861 R.C.A.F. Overseas.

ESTATES BRANCH
JUN 22 1945
H.Q.
OTTAWA
NATIONAL DEFENCE

it is necessary that certain information regarding the deceased and his relatives should be furnished the Estates Branch. You are asked therefore to read the enclosed memorandum before completing pages 2 and 3 of this form. The particulars required are to be carefully filled in and the Declaration on page 4 should then be signed in the presence of a Clergyman, Priest, Local Magistrate, Commissioner for Oaths, Notary Public or a Commissioned Officer of any of His Majesty's Forces who should be asked to complete and sign the Certificate. This form should then be returned to the above address.

If there is insufficient space for complete particulars to be given opposite any question on pages 2 and 3 of this form, the space under "additional remarks" on page 4 should be used.

H. Clark Smith Col.

Director of Estates.

MG/TJM

M.F.W. 77
16M-10-44 (5854)
H.Q. 1772-39-972

ANSWER IN FULL ALL APPLICABLE QUESTIONS

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

Degrees of Relationship	RELATIVES required to be accounted for		INFORMANT'S STATEMENT		
			NAME IN FULL of any Relative, if any, in each degree specified	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 Deceased.....				
2	Children of the Deceased and dates of their Births.....				
3	Father of the Deceased.....		GEO. MAYNARD FLEMING	45	TEMISKAMING QUE
4	Mother of the Deceased.....		Merle Lillian FLEMING	42	" "
5	Brothers of the Deceased	Full Blood			
		Half Blood			
6	Sisters of the Deceased	Full Blood	Shirley Murray FLEMING	15	" "
		Half Blood			
7	Names of brothers or sisters (whether of the full or the half blood) of the Deceased, *who are dead*, and date of death of each.		Names and ages of their children (if any)		Address of their children

ANSWER FULLY EACH QUESTION ON THIS PAGE

PARTICULARS AS TO IDENTITY

8	Full names of the deceased.	KEITH MAYNARD GEROLD FLEMING
9	Date of his birth.	MAY 28TH 1923
10	Place and date of his marriage.	
11	Place and date of his parents' marriage.	STEWARTON UNITED CHURCH OTTAWA, ONT.

PARTICULARS OF DOMICILE

12	Place where deceased was born.	GRACE HOSPITAL, OTTAWA, ONT.
13	State, in order, the Province, State and/or County in which he resided before enlistment and the period of time in each.	(a) OTTAWA, ONT, 5 MONTHS (b) TEMISKAMING, QUE, (PONTIAC COUNTY) (c) (d) REMAINING TIME.
14	Nature of employment before enlistment.	MACHINE SHOP HELPER
15	State whether he owned the premises in which he lived, and, if so, where situated.	
16	Name place where deceased stated he intended to make his permanent home.	

PARTICULARS OF ESTATE

17	Did he leave a Will? If in your custody, please forward.	YES. WITH MILITARY AUTHORITIES
18	If married, and domiciled in the Province of Quebec or in a State in the U.S.A. or in a Country under the laws of which there is community of property between spouses,—was there a marriage contract dealing with property?	
19	Did he have a Bank, Post Office or other deposit account? If so, give name and address of bank, etc., and the amount on deposit. Do you wish it administered with the pay account?	POST OFFICE ACCT. O/SEAS ADDRESS UNKNOWN.
20	Amount of War Savings Certificates held by deceased. Indicate where located.	
21	Amount of Victory Loan Bonds held by deceased. Indicate whether registered or bearer and where located.	
22	If deceased had life insurance, name companies and amount payable under each policy and the person named as beneficiary therein.	MUTUAL LIFE— ONE THOUSAND—
23	Describe other assets, if any, and estimated value thereof. Use space on page 4 if necessary.	

OTHER PARTICULARS

24	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 particulars.	
25	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.	

(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 or elsewhere in the North American zone, 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.)

(PLEASE TURN OVER)

DECLARATION

*Insert degree of relationship for example, "Widow", "Father", "Brother", etc.

I hereby declare that all the particulars shown on this form are correct, and a true and complete statement of all the relatives that the deceased ever had in the degrees specified; and that I am the

*Mother of the deceased.

N.B.—To be signed in full in the presence of a Clergyman, Priest, Local Magistrate, Commissioner or Notary Public or Commissioned Officer of any of His Majesty's Forces.

Mrs. Merle Lillian Fleming — Signature of Informant

Timiskaming Que — Address

Witness J.P.

CERTIFICATE

I hereby certify that to the best of my knowledge and belief Mrs Merle Lillian Fleming

See above. ..... {Name of informant} is the Mother of the Deceased above described. The above Declaration was made by the Informant and signed in my presence.

Dated at Timiskaming this Seventh day of June 19 45

Signature of Clergyman, Priest, Magistrate, Commissioner or Notary Public or Commissioned Officer of any of His Majesty's Forces.

Justice of Peace County of ..... Qualification Temiscamingue

Address Timiskaming Que.

NOTE.—Before granting the above Certificate, care should be taken to see that the informant gives particulars concerning the death of any Relative stated by him or her to have died, and that the full name and address and age of each surviving Relative specified is stated in its proper place in the Statement opposite.

(If the deceased has no living relatives of the degrees shown on page 2, the names and addresses and relationship of other relatives should be set out below.)

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

OFFICIAL ROYAL CANADIAN AIR FORCE CASUALTY NOTIFICATION

NUMBER R90861 RANK WO 1 UNIT 422 RCAF SQDN OVERSEAS

TRADE A/G (SP.GR.)

NAME FLEMING, KEITH MAYNARD GERALD

R.C.A.F.	R.A.F.	R.A.A.F.	R.N.Z.A.F.	OTHER
X				

PRESENT MARITAL STATUS SINGLE RELIGION U.C. CANADIAN YES

FRENCH CANADIAN OTHER

NEXT OF KIN MR GEORGE MAYNARD FLEMING

RELATIONSHIP FATHER

ADDRESS TIMISKAMING. QUE.

FATHER'S NAME MR GEORGE MAYNARD FLEMING

ADDRESS TIMISKAMING. QUE. LIVING ON ENLISTMENT YES

MOTHER'S NAME MRS MERLE LILLIAN FLEMING

ADDRESS SAME AS FATHERS LIVING ON ENLISTMENT YES

ADDRESS AT TIME OF ENLISTMENT TIMISKAMING. QUE. MARITAL STATUS AT TIME OF ENLISTMENT SINGLE

OCCUPATION MACHINIST

WAS MEMBER ATTACHED TO R.A.F. AT ANY TIME? YES/NO N/K BEING OBTAINED

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?

CASUALTY DETAILS:

AUTHORITY CAS. SIG. NO.

BOMBER MAIL LETTER--------d-25-APRIL-45

PREVIOUSLY REPORTED "MISSING" 24-MAY-44 AFTER AIR OPERATIONS (OVERSEAS) (OFF SHETLAND ISLANDS 120 MILES OFF COAST OF NORWAY)

NOW "PRESUMED DEAD" 24-MAY-44 FOR OFFICIAL PURPOSES

ESTATES BRANCH MAY 28 1945 H.Q. OTTAWA NATIONAL DEFENCE

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

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

CERTIFICATE P. OF D. ATTACHED TO A. OF E. COPY YES/NO

DATE 22-MAY-45

FOR CHIEF OF THE AIR STAFF

R.C.A.F. R217
30M-6-44 (4664)
H.Q. 885-R217
△TS-RT

2

ADMINISTRATOR OF ESTATES, OTTAWA

72235

SPECIAL RESERVE

AIR FORCE No. R 90861 POSTED TO #2A Manning, Penhold, ~~Ont.~~ Alta. TRADE General Duties Std.

ROYAL CANADIAN AIR FORCE

(ATTESTATION PAPER)

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

1. Surname Fleming FULL Christian Names Keith Maynard Gerald
2. Present Address Temiskaming Quebec Telephone None
3. Permanent Address Temiskaming Quebec
4. Place of Birth Ottawa Ontario Citizenship Canadian
5. Date of Birth May 28 1923 Married, Single, Widower, Separated, Divorced Single
6. Particulars of Children None

Name	Date of birth	Name	Date of birth
Na			

7. Occupation Machinist Helper 8. Religion United Church (State denomination)
9. Languages English Proficiently (State proficiency)
10. Next of Kin (Full Name) George Maynard Fleming Relationship Father
" Address Temiskaming Quebec
11. Father (Full Name) George Maynard Fleming Birthplace Ottawa Ontario
" Address Temiskaming Quebec Citizenship Canadian
" Occupation Acid maker
12. Mother (Full Maiden Name) Merle Lillian Foley Birthplace Ottawa Ontario
" Address Temiskaming Quebec Citizenship Canadian
13. Details of any Naval, Military or Air Force Service: None

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

R.C.A.F. Records Office
Rec'd JUL 2 1941
O. K. C.I.B.
R. C. Rim N. I.
S. L. P. A.

14. Honours, Awards, Mentions None
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? No
When? No Result No
17. Were you ever discharged from any branch of His Majesty's Forces as Medically Unfit? No
If so, state nature of disability No
18. Have you ever been or are you now in receipt of a Disability Pension? No
If so, state nature of Disability
19. Have you ever been convicted of an indictable offence? No If so state nature No
20. Are you in debt? No If so, state particulars No

R.C.A.F. Form R. 100
400M—6-40 (5739)
H.Q. 1062-3-33

56 — 17

21. Particulars of Education:

—	Name of school	Date From	Date To	Courses—Subjects, etc.
Primary Education—Public or Separate School	Temiskaming Ont Public School	1929	1938	General Course
High School—Collegiate Institute, etc.	Temiskaming Ont. High School	1939	1940	Matric
Technical School				
University or School other than above				
Correspondence Courses, etc.				

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

Employer and place	Duties, trades, positions	Date From	Date To	Reason for leaving
Can. Int. P. & P. Co	Sample Carrier	26/6/39	31/9/39	Returned to School
Can. Int. P. & P. Co (Allan Gardens Temiskaming Ont.)	Machinist Helper	5/40	5/41	R. C. A. F

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

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

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

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

If for Ground Duties, state Air Force trade in which you wish to enlist ..... General Duties
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~~ FOUR persons who can give references as to character and ability.

Name	Address	Occupation
Mr. A. C. Thompson	Temiskaming, Ont	Master Mechanic
Mr. Wm. Irwin	Temiskaming Ont	Justice Peace
Mr. C. F. Northey	Temiskaming Ont	School Principal

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

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

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

Date May 22 1941 Signature Keith Maynard Gerald Fleming

Finger Printed
Date 21-6-41
Initials

NATIONAL REGISTRATION CERTIFICATE
PRODUCED 57-1-12

FOR OFFICIAL USE ONLY

(A) *Report of Interviewing Officer—*

Type Intelligence Good General appearance Good

Suitability for (state in what capacity) General Duties [redacted] Std

Date 21-6-41 Signature H E Smith Rank Sgt

(B) *Report of Trade Test—*

Trade in which tested General Duties [redacted] Std

Result Qualified as above Std.

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

Machine Shop work.

Date 21-6-41 Signature H E Smith Rank Sgt.

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

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

Date June 21st 1941. Keith M. G. F Fleming
Signature of Recruit

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

I, Keith Maynard Gerald Fleming. do sincerely promise and swear (or solemnly declare) that I will be faithful and bear true allegiance to His Majesty.

Date June 21st 1941. Keith M. G. F Fleming
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 North Bay, Ontario. this 21st day of June 1941

for (O.W. Froom) Flight Lieutenant
Signature of Officer — Rank

OFFICER COMMANDING,
R.C.A.F. RECRUITING CENTRE
NORTH BAY, - ONT.

Unit

R. C. A. F.
RECRUITING CENTRE
NORTH BAY, ONT.

FOR OFFICIAL USE ONLY

CERTIFICATE OF MEDICAL EXAMINATION

Part 1. Information obtained from the applicant—

1. Age. 18. 2. Have you ever suffered from any of the following defects in health?

(a) Rheumatism	No.	(j) Nasal Trouble	No
(b) Tuberculosis	No.	(k) Ear Disease	No
(c) Bronchitis or Asthma	No.	(l) Eye Disease	No
(d) Heart Disease	No.	(m) Epilepsy	No
(e) Kidney or Bladder Disease	No.	(n) Nervous or Mental Disease	No
(f) Gastro-intestinal	No	(o) Syphilis	No
(g) Rupture	No	(p) Gonorrhoea	No
(h) Varicose Veins	No	(q) Bone Fracture	No.
(i) Flat or Deformed Feet	No.	(r) Other Disease or Defect	Pneumonia Dec. 1940 - duration 3 weeks. Good recovery.

3. Have you ever worn glasses? Yes. 5-6 yrs. Discontinued wearing them 1 yr. ago.

4. Have you had any Illness for more than one week's duration. Yes see (r)

Examiner's Remarks re above .....

5. Signature of Applicant

I certify that I have revealed my full medical history and have not withheld any relevant information.

Keith Maynard Gerald Fleming

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

1. Identification marks or scars (if operative obtain history) Scar, Size 10¢ piece, back of rt side of neck 1½" above hair margin.

2. Height 5 feet 9½ inches. 3. Weight 131 pounds.

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

6. Development {Good / ~~Fair~~ / ~~Poor~~} 7. Chest Measurement—Full expiration 32 inches

Range of expansion 2" inches

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

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

Left 20/20. Left

10. Condition of mouth and teeth 12 pts. Good condition

11. Urine—Albumen Negative Sugar negative

12. Abnormalities (Congenital and Pathological) found on Examination

Nil

Part 2 Cont'

13. Reflexes Normal

14. Heart Normal

15. Lungs Normal

16. Blood Pressure S. D. 130/80

17. Colour Vision Ishihara #9 & 6 Normal.

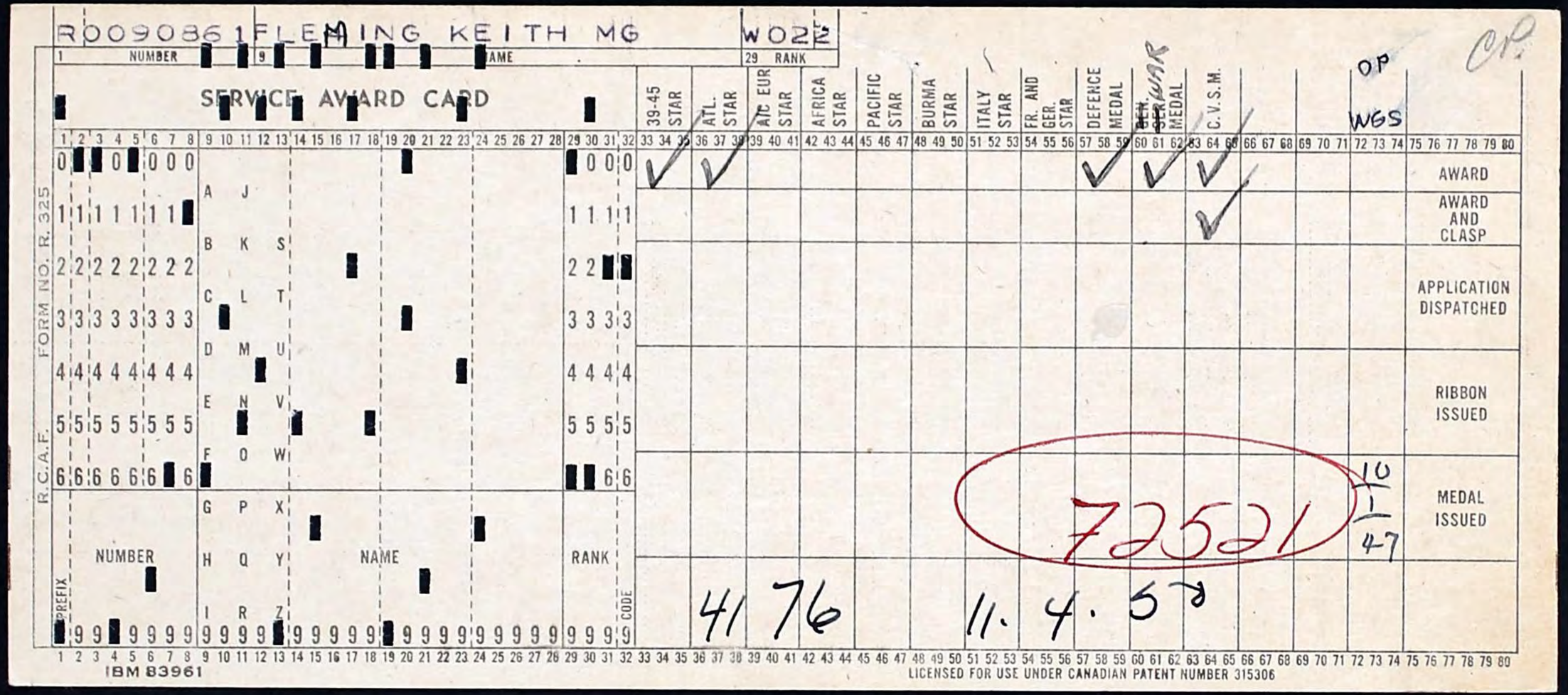
Part 3. The Candidate has been examined in accordance with the pamphlet, "Physical Standards and Instructions for the Medical Examination of Recruits" and he is considered fit for Category A & B.

Any special remarks of the Medical Officers

21/6/41 - X-ray chest - neg. G.D.I.

Date May 22 1941

[signature] President, [signature] Member [signature] Member



R0090861 FLEMING KEITH MG — WO2

SERVICE AWARD CARD

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

	39-45 STAR	ATL. STAR	AIR EUR STAR	AFRICA STAR	PACIFIC STAR	BURMA STAR	ITALY STAR	FR. AND GER. STAR	DEFENCE MEDAL	WAR MEDAL	C.V.S.M.			OP WGS	
AWARD	✓	✓							✓	✓	✓				
AWARD AND CLASP											✓				
APPLICATION DISPATCHED															
RIBBON ISSUED															
MEDAL ISSUED														10/1/47	
		41	76				11.4.5								

72521

PREFIX — NUMBER — NAME — RANK — CODE

IBM 83961

LICENSED FOR USE UNDER CANADIAN PATENT NUMBER 315306

Mrs. Merle L. Fleming (mother)

Timiskaming,

Que.

Mar.-46.

MEMORIAL BAR

DATE DESP.....

REGN. NO 967

NAME FLEMING, Keith Maynard Gerald, FILE NO. ~~XXXX~~ R90861

RANK W.O.~~2~~ 1 AIR GUNNER CATEGORY ~~XXXXXXX~~ PRES.DEAD REG. NO. R90861

DATE OF DEATH: 24 May. /44 MOTHER LIVING: YES WIFE: NA

MINISTERIAL CARD: 12-6-44 ROYAL MESSAGE: AUG 21 1945 MEMORIAL CROSS TO CHAPLAIN:

To Mother and Father-
To Mother and Father-31-5-45

DEL'D TO MOTHER:

DEL'D TO WIFE: AUG 20 1945

Mr. & Mrs. George Maynard Fleming,
Timiskaming,
Quebec.

COMMAND:

RELIGION:

R.C.A.F. A. 67

ROYAL CANADIAN AIR FORCE

SERVICE

AND

PAY BOOK

This Book is the property of the
Royal Canadian Air Force and must
not be surrendered on demand.

3-22 Pongo

R.C.A.F. A.47
Part 1.

ROYAL CANADIAN AIR FORCE SERVICE BOOK

INSTRUCTIONS TO OFFICERS AND AIRMEN

1. You will be held responsible for the safe custody of the book.

2. You will always carry the book on your person both at home and abroad.

3. You must produce the book whenever called upon to do so by a competent authority, civil, naval, military or air.

4. You must not alter or make any entry in this Book (except as regards short form of Will on page 16, see instructions on pages 12 to 15), and disobedience of this order will be treated as a serious offence.

5. Should you consider that any entry in the book is lacking or incorrect, or should you lose the book, you will report the matter to your immediate superior in the Royal Canadian Air Force. Any change in name or address of person to be informed of casualties must be reported immediately to your Commanding Officer.

Air Force No. R 90861 Surname FLEMING

Christian Names (in full) KEITH MAYNARD GERALD

Date of Birth MAY 28/23 Religion UNITED

Date of Enlistment/~~Appointment~~ 21-6-41

Married (M), Widower (W) or Single (S) S

Occupation in Civil Life MACHINIST HELPER

.....

Signature of Holder.....

Name and Address of Next-of-Kin.....
MR. GEORGE M. FLEMING (FATHER)
TEMISKAMING QUE.

Name, Address, and Relationship of Person to be informed of Casualties—

.....

.....

.....

.....

Certified Correct..... H.S. Brownlee FOR F/L A. B. MACKENZIE

Date 26-3-43 Place RCAF O/S H.Q.

RAF Rank as at 1/3/43 Sgt. Gp. AIR

RANK, GROUP AND R.C.A.F. TRADE OR BRANCH

Branch or Trade and Group	Date of Effect	Authority	Signature and Rank of Officer making Entry
AC Spec.	25-9-42		

Rank	Date of Effect	Authority	Signature and Rank of Officer making Entry
SGT	25-9-42		
F/S	25-3-43	POR 34/43	J. Ferguson F/Lt
W.O.2	25-9-43	POR 51/43	J. Ferguson F/Lt
W.O.1	25.3.44	0/976/44	R. Tuttall WO2

MEDALS, DECORATIONS, MENTIONS, ETC.

Particulars	Date and Authority	Signature and Rank of Officer

MISCELLANEOUS ENTRIES

(For entries for which space is not otherwise provided)

NOTE—No entry on this page has any legal effect as a Will

Particulars	Date and Authority	Signature and Rank of Officer

LEAVE RECORD
(With Free Railway Warrant)

From (date)	To (date)	Signature of Officer

LEAVE RECORD
(With Special Leave Warrant A.24)

From (date)	To (date)	Authority and Signature of Officer
		T.W.#
		T.W.#
		T.W.#
		T.W.#
		T.W.#

MEDICAL CLASSIFICATION

Date	Category	Medical Board or Medical Exam. (Form No.)	Unit	Initials of M.O.

BLOOD GROUP

Date	International	Initials of M.O.
	O	J.W.L. for F/Lt.

NIGHT VISUAL CAPACITY

Date	Score	Group	Initials of M.O.

IMMUNIZATION PROCEDURES
VACCINATION

Date	Result	Initials of M.O.

Susceptibility Test	Date	Result	
Schick Test			
Dick Test			

PROTECTIVE INOCULATIONS*

Nature of Inoculation	Date	Dose	Initials of M.O.
Feb-TaBP.	Feb. 44	.5 / 1.0/cc	[illegible]

IMMUNIZATION PROCEDURES—Con.

Nature of Inoculation	Date	Dose	Initials of M.O.

* To include diphtheria toxoid, scarlet fever toxin, cholera, plague and yellow fever vaccines, etc.

Solely for use on Active Service. This Will page must NOT be used until you have been placed under orders for Active Service.

WILL

(For use if the Officer or Airman has not already made a will or wishes to alter one already made. See instructions on page 15.)

In the event of my death I give

I appoint.....

Residing at.....

to be my executor.

Signature.....

Rank, Air Force No.....

Unit.....

Date.....

CARDOZA

E.F.

L.D.C.

C.P.A.

Jos. Neckel

104-18-42nd Ave.

Corona L.I.N.Y.

Selly

64

FOR TAXICABS AND SALOON CARS

Ring up 236

T. RICHARDS

1 TANYGROES STREET

PORT TALBOT

——DAY OR NIGHT SERVICE——

T. UP	TIME	A/C NO	TOTAL	CPT.	
18.45	02.20	T9076	.50 7.35	Rees	6.45 7

OVER-SEAS LEAGUE

Over-Seas House, Park Place, St. James's St.
S.W.1

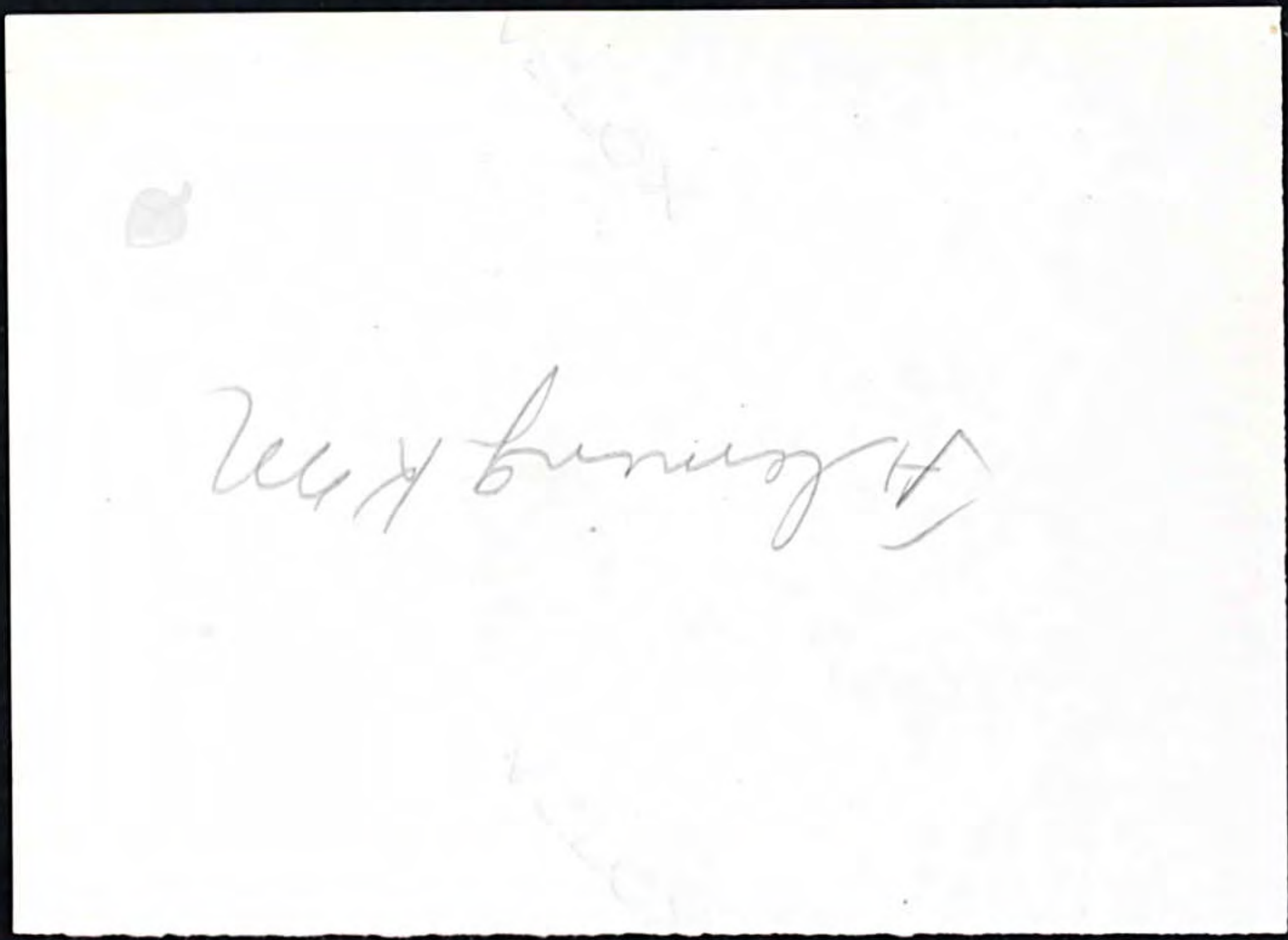
Admit to WELCOME PARTY

SATURDAY Feb 13th at 6 p.m.

NAME Fleming

ISSUED BY pp. C. Ledger-Hill
17 MD

109
R-90861



Lcpl R. 90861 Wor Fleming K.M.C.

VELOX

VELOX

VELOX

FB MISSING

R90861 FLEMING

W02. KMG.

VELOX

APR 17 1945
CASUALTY
SECTION

Temiskaming Que.
April 16th. 1945.

Royal Canadian Air Force
Ottawa, Ont.

1945 APR 17 AM 9:03

Dear Sirs:

Referring to yours of April 4th. we wish to advise you, we have had no direct word from our son, Warrant Officer I Keith Maynard Gerald Fleming - R 90861.

Friends of Keith returning from Overseas, have given us reason to hope he, and the

members of his crew.
may have reached Norway
In which case we can
only hope, perhaps
until sometime after the
war has ended, that
we may have the
good news we are
awaiting so patiently.

Leaving any further
decision in your hands
and thanking you, I
am

Yours truly,
Geo. M. Fleming.

CANADIAN

CAN.R.90861.

GROUP / UNIT

Copy T/W/O. (5/43)

ROYAL AIR FORCE.

Form 373.

1. Rank.	2. Christian Names.	3. Surname.	4. Decorations.
~~F/Sgt.~~	Keith, Maynard, Gerald.	FLEMING.	

5. Type and date of commission or engagement, if Airman Pilot.

Date of expiry.

6. Branch or Trade.

Air Gunner

7. Date of award of flying badge. 26-9-42

Date of qualification as service pilot, % marks, and whether failed, and re-examined.

7a. Qualifications, including any symbols; whether passed Promotion Exam. (with date) and whether passed Staff College Qualifying Exam.

8. Types of service aircraft flown.

9. Type on which most proficient. (If under instruction state total number of hours flown on each type and tests passed).

10. Date of birth.	12. If married: Date.
28-5-23	S.
11. Religion.	
U.C.	

13. Medical classfn.	14. Date and place of last medical Exam.	15. *Date of last vaccination.	16. *Date of last inoculation. 1. T.A.B. 2. Cholera. 3. Plague.

9, 13-19 and 21 to be kept in pencil.

*To be inserted in unit copy only.

17. Permanent Address.

18. Next of kin. Relationship and address.

Mrs G. Fleming (mother)
Jennieknowing
Quebec.
Canada.

19. Name and address of person to be notified in case of casualty.

Instead of / *In addition to the Next of kin.

*Delete as necessary.

20. Periods in hospital, or sick quarters, or sick at home.

Admitted SSQ. 20-2-44.

21. Whether completed Annual Musketry Course and Annual Gunnery and Signalling Training; If not, what tests still require to be passed.

Wt. 44507/3061 380M. 2/42 KJ 51-4307

22. Courses of instruction : Subject.	Unit.	From	To.	Result and percentage of marks.
Course No. 35 No. 1 B & G Jarvis, Ont.				

23. Postings and Attachments.

To	Duty	"P" or "A"	Date	Authy.
Embarked			27-10-42	
Disembarkd			5-11-42	
RCAF PRC		P	6-11-42	
4 A G S.		P	19.12.42	
7. A. G. S.	94 A A R C.		14-12-42	
94 A A R. S.	4(C) O T U.		7-2-43	
4 (C) O. T. U.	42259.		8-5-43	
Non Com. N/E Accts.	Missing	P.	26-5-44	ISC/252/44

Postings and Attachments.

To	Duty	"P" or "A"	Date	Authy.

24. Attendances at Courts Martial.

Date	Under Instrn.	As P. or M.	Date	Under Instrn.	As P. or M.

R 90861

JR

Name FLEMING, KEITH MAYNARD GERALD

Classification

No. 15405 Sex Male Reference

RIGHT HAND

1. Thumb	2. Index finger	3. Middle finger	4. Ring finger	5. Little finger

LEFT HAND

6. Thumb	7. Index finger	8. Middle finger	9. Ring finger	10. Little finger

Impressions taken by: Clarence Ellis

(Signature of person taking prints)

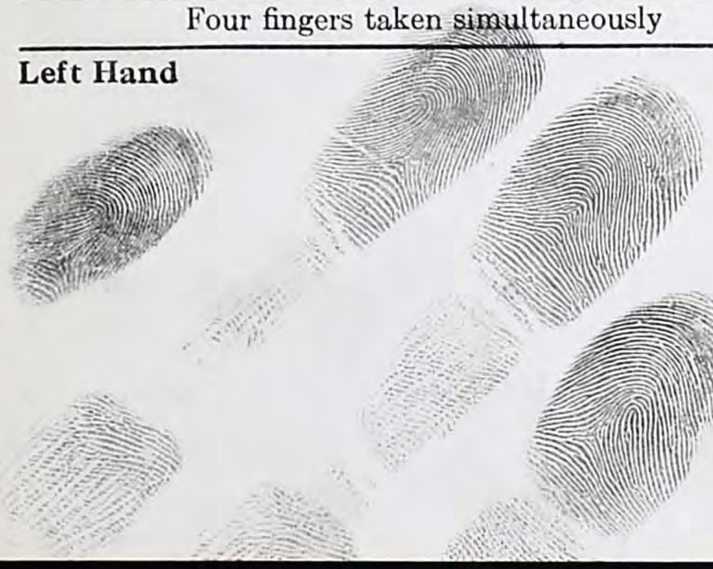
Date impressions taken June 21st, 1941.

Note amputations

Signature of printed person: Keith M. G. Fleming

Four fingers taken simultaneously

Left Hand



Left thumb	Right thumb

Four fingers taken simultaneously

Right Hand

ROYAL CANADIAN AIR FORCE

Name FLEMING, KEITH MAYNARD GERALD R 9 0 8 6 1

Rank AC 2

Age 18 Height 5'9½" Weight 130½

Hair Med. Brown Eyes Brown Hair on face Fair

Marks, scars, etc None

Keith M. G. Fleming (Signature of holder)

A. McKennedy F/O (Signature of issuer)

Place North Bay, Ont. Date June 21st, 1941.

Card serial number 15405

Right Index Fingerprint

Impressions forwarded to Headquarters P.I.B. by J. H. Rogers Rank F. O. Date June 23, 1941

FOR HEADQUARTERS USE ONLY

R.C.A.F. PHOTOGRAPHIC ESTABLISHMENT

Received for Photostat by ..... Rank ..... Date .....

Forwarded to H.Q. P.I.B. by ..... Rank ..... Date .....

HEADQUARTERS FINGERPRINT SECTION

Received at P.I.B. by ..... Rank ..... Date .....

Classified at P.I.B. by ..... Rank ..... Date .....

Checker ..... Searcher ..... Date .....

R.C.A.F. R. 159
90M—11-40 (8302)
H.Q. 1062-3-114

R90861 (R04)

OTTAWA, Canada, 2nd June, 1944.

Mr. G.M. Fleming,
Timiskaming,
Quebec.

Dear Mr. Fleming:

It is with deep regret that I must confirm our recent telegram informing you that your son, Warrant Officer Second Class Keith Maynard Gerald Fleming, is reported missing on Active Service.

Advice has been received from the Royal Canadian Air Force Casualties Officer, Overseas, that your son and the entire crew of his aircraft failed to return to their base after taking off to carry out an anti-submarine sweep. At about 2.30 P.M. on May 24 an S.O.S. was picked up from the aircraft which was then approximately one hundred and eighty miles northeast of the Shetland Islands and one hundred and twenty miles off Norway, but nothing more was heard.

The term "missing" is used only to indicate that his whereabouts is not immediately known and does not necessarily mean that he has been killed or wounded. He may have reached enemy territory and might be a Prisoner of War. Enquiries have been made through the International Red Cross Society and all other appropriate sources and you may be assured that any further information received will be communicated to you immediately.

Attached is a list of the members of the Royal Canadian Air Force who were in the crew of the aircraft together with the names and addresses of their next-of-kin. Your son's name will not appear on the official casualty list for five weeks. You may, however, release to the Press or Radio the fact that he is reported missing but not disclosing the date, place or his unit.

Permit me to extend my heartfelt sympathy during this period of uncertainty and I join with you and the members of your family in the hope that better news will be forthcoming in the near future.

Yours sincerely,

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

HEW

R90861 (DPC)

Ontario,
1st October, 1951.

Mr. G.M. Fleming,
Timiskaming,
Quebec.

Dear Mr. Fleming:

It is with reluctance that after so long an interval, I must again refer to the loss of your son, Warrant Officer Class I Keith Maynard Gerald Fleming. A report has, however, been received from our Missing Research and Enquiry Service concerning your son and the members of his crew.

A communication received from the International Red Cross Committee quoting German information, stated that the body of one of the members of your son's crew, Pilot Officer Senton had been recovered from the sea on September 30, 1944, near the Island of Hitteren, seventy miles west of Trondheim, Norway, and that he had been buried in Stavne Cemetery at Trondheim. Investigating Officers of this Service have since visited this cemetery and located his grave. Although search teams of this Service have swept this area, no trace has been found of any other member of the crew. In view of the above circumstances, it must be regretfully accepted and officially recorded that your son and the other unaccounted for members of the crew lost their lives at sea and do not have "known" graves.

Due to the extreme hazards attending air operations there are, unhappily, many thousands of British aircrew boys, who like your son, do not have a "known" grave 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 appear on that Memorial. A detailed announcement concerning these General Memorials will be made at a future date.

I realize that this is an extremely distressing letter and that there is no manner of conveying such news 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,

(W.R. Gunn) W/C
R.C.A.F. Casualties Officer,
for Chief of the Air Staff.

WFT/MG

AIR MINISTRY,
LONDON ROAD,
STANMORE,
MIDDLESEX

Air Ministry S.14.Cas.

P417612/44/S.14.Cas.A.4

17 September, 1951.

Chief of Air Staff,
Air Force Headquarters,
Ottawa,
Canada.

J89686 Plt.Off. C. Senton

With reference to your signal PC.417 dated 5th September, 1951, it is confirmed that the above named casualty's burial particulars are, British Plot A4, Row K, Grave No. 10, Trondheim(Stavne) Civil Cemetery and that the names of the remainder of the crew will be commemorated on the Memorial at Runnymede.

R.W. Haddock

Signal on Senton's file

L 90861

(RO)

R.90861

Ottawa, Ont.,

24 Nov 1947

R E G I S T E R E D

Mrs M.L. Fleming,
Timiskaming, Que.

Re: K. Fleming (R.90861)

The enclosed log book which is part of the service estate of the above named is passed herewith for your retention.

Yours truly

(W.A. Dicks)
Wing Commander,
for Chief of the Air Staff.

Encls.
1

R90861 (R.O.)

OTTAWA, Canada, 10th January, 1947.

R E G I S T E R E D

Mrs. Merle L. Fleming,
Temiskaming, Quebec.

Dear Mrs. Fleming:

It is a privilege to have the opportunity of sending you the Operational Wings and Certificate in recognition of the gallant services rendered by your son, Warrant Officer Class 1, K.M.G. Fleming.

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

Yours very sincerely,

(W.A. Dicks)
Wing Commander
for Chief of the Air Staff.

/RU

W/O Fleming J.N.G. copy to Ottawa 12/6/44

P.A17612.

7

From: No.422 R.C.A.F. Squadron.

To: Air Ministry (Accidents Branch) London.

Date: 26th May, 1944.

Ref: 422/751/2/W.1.

Circumstantial Report on Loss of Sunderland D.V.990, H/422. by probably Enemy Action.

1. Reference our signal A.272 dated 25th May, 1944.

2. On 24th May 1944, at 0800 hours, Sunderland H/422 (D.V.990) on detachment to [redacted] VGS from parent unit at R.A.F. Station, Castle Archdale, took off on a parallel track A.S.Sweep in an area north of the Shetland Islands and approximately one hundred miles west of the Norwegian Coast.

3. At approximately 1419 hours, S.O.S. signals were received from H/422 by [redacted] and by No.18 Group, the signals being rather weak and the identification indistinct. At the same time S.O.S. signals were received clearly and, with the exception of one indistinct letter, indicated the identification call sign of H/422, by aircraft H/423 who was on adjacent patrol on the same A.S.Sweep. At 1420 hours aircraft H/423 sighted what appeared to be a large puff of smoke or splash about ten or fifteen miles away and altered course to investigate. Shortly after altering course the aircraft sighted a "U" boat in this position, area 63°[illegible]N - 03°02E. As aircraft closed to attack some wreckage was noticed about four or five hundred yards from the "U" boat. After the attack the submarine submerged and H/423 proceeded to investigate the wreckage. The wreckage was whitened grey in colour and appeared to be that of aircraft. One piece of wreckage appeared to be a bit of wing. No bodies were seen. Wreckage was in oil or fuel slick.

4. Details of the casualties involved are as follows:-

Captain	J.15963	F/O.	G.L.Holly	Missing
2nd Pilot	131616	F/O.	G.D.Gingell	"
3rd Pilot	136329	F/Sgt.	Guglinzi L.M.	"
Navigator	J.13703	F/O.	T.H.Friar	"
WOP/AG.	J.7990	F/L.	R.F.Beattie	"
WOP/AG.	R.129054	W/O.2	Burke J.C.	"
WOP/AG.	1210563	Sgt.	Harvey D.J.	"
WOP/AG.	R.59766	Sgt.	Seely J.C.	"
F/Engr.	R.51582	F/Sgt.	Hamilton J.H.	"
FEN/AG.	1398685	Sgt.	Andrew R.D.	"
A/G.	R.90861	W/O.2	Fleming J.N.G.	"
A/G.	R.107679	W/O.2	Seaton C.	"

Sgd: J.R.Friando, Wing Commander,
Commanding, No.422 RCAF Squadron
R.A.F.Station, Castle Archdale,
Northern Ireland.

Sgd: N.Costello,
Group Captain, Commanding,
R.A.F.Station, Castle Archdale.

R90861 (R.O.4)

OTTAWA, Canada, 2nd August, 1944.

Mr. G.M. Fleming,
Timiskaming,
Quebec.

Dear Mr. Fleming:

I have been directed to inform you that your son, Keith Gerald Maynard Gerald Fleming, has been promoted to the rank of Warrant officer First Class with effect from March 25th, 1944.

It is regretted that no further information has been received regarding your son since he was reported missing on May 24th and I wish to extend to you and the members of your family my sincere sympathy in this trying time.

8/6
23/5

Yours sincerely,

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

/OBR
Auth: O.O. 976/44

Paulson Manitoba
February 28, 1942

Commanding Officer
No 7. Bombing & Gunnery School
Paulson Manitoba

Subject- Remuster
R. 90861 L.A.C. Fleming K.W. General Duties

1. I respectfully make application for remuster from General Duties to Air Gunner.

2. For the past eight months I have been attached to the Station Hospital as a kitchen helper and am rather disheartened at the inactivity in my position. I have attempted to remuster to Wireless Air Gunner but evidently have not the required education however this should not stand in the way of remustering to straight Air Gunner, and feeling on such a way about it, I have no doubt that I would be a success.

3. While on this station I have studied the Air Gunners course from notes I have obtained from different air gunners.

4. Submitted for your favourable consideration please

I remain
Your obedient Servant,
Keith Fleming

Only remustering to
Pilot or observer permitted
at present time.
Junior Matric or better.

a/s

DEPARTMENT OF NATIONAL DEFENCE

INVENTORY

ESTATES BRANCH
JAN 31 1946
H.Q.
OTTAWA
NATIONAL DEFENCE

Date .....

The Estates Branch has received the following personal effects of:

NAME K.M.FLEMING, R-90861 .....

7 Shirts	2 Handkerchiefs
1 Pr.pyjamas	1 Shaving set in case
11 Pr.socks	1 Toothbrush
19 Handkerchiefs	1 Shaving brush
1 Pr.shorts	1 Razor
1 Sweater	1 Towel
2 Ties	1 Handkerchief
1 Pr.braces	1 Pr.pants
1 Towel	2 Newspaper cuttings
1 Dressing gown	1 Photo
2 Steel mirrors	1 Postcard H.M.S. Queen Elizabeth
1 Mirror case	
1 Torch	
1 Address book	1 Suitcase
1 Comb	
2 Sweat shirts	
1 A/G brevet	
2 Prs.shoes	
1 Pr.laces in shoes	
1 Padlock	
36 Letters	
8 Photos	
25 Negatives	
2 Portraits	
1 Leather case	
1 1943 ribbon	
1 C.V.M.ribbon	

Received the effects as listed

SIGNATURE Mrs. Merle L. Fleming

DATE REC'D January 8-1946

DG

HQ R90861 FD 140

ESTATES BRANCH

OTTAWA, Canada,
March 5th, 1946.

Mrs. Merle L. Fleming,
Temiskaming, Que.

FLEMING, Keith Maynard Gerald, WO1 (deceased)
R90861 R.C.A.F.

Dear Mrs. Fleming:

Prior to this time you will have received from the Treasury Office a cheque payable to your order in the amount of $723.89. This was the total held at credit to your son's Service Estate, being made up as shown hereunder:

Last Pay Certificate	$145.97
War Service Gratuity	543.86
Refund on Sixth Victory Loan Bond	33.60
Cash in Effects	.22
Withdrawn from Post Office Savings Bank, Overseas	.24.
TOTAL	$723.89

You are entitled to this money as the sole beneficiary named in your son's Will. We would appreciate having you complete the enclosed receipt form and return it to this Branch at an early date.

Attached hereto is a statement showing how the amount of your son's War Service Gratuity was arrived at.

Yours faithfully,

HIF/MSN
Enc.

Director of Estates.

POST PRESUMPTION MEMORANDUM NO. 5239

Date: 18.2.47

Relating to Sunderland DV.990, Missing on 24.5.44, Believed Crashed in Sea (approximately 107 Miles N.E. of Shetlands) S.7.(Cas.C.5.)

FILE NO.	RANK	NUMBER	NAME	INFORMATION
				LOST AT SEA
P.417612/44	Sgt.	1399685	ANDREW, P.D.	Nothing has been heard of these personnel since they were reported missing on 24.5.44. It is assumed they lost their lives at sea.
	F/O	J.15963	HOLLY, G.E.	
	F/O	131616	GINGELL, G.B.	
	F/Sgt.	1383239	GUGGIARI, L.W.	
	F/O	J.13783	FRAIR, T.E.	
	W.O.2.	R.129056	BUNKE, J.O.	
	Sgt.	1210568	HARVEY, D.J.	
	F/Lt.	J.7990	BEATTIE, E.W.	
	Sgt.	R.59766	SEELY, J.C.	
	F/Sgt.	R.51582	HAMILTON, J.H.	
	W.O.2.	R.90861	FLEMING, R.M.	
For Information Only				NORWAY
	W.O.2.	R.107879	SENTON, C.	German Documents show that Senton's body was washed ashore and buried in Hitra Cemetery.

Circulation to:

Amendments (B.1.)
Chron.Cards (B.1.)
S.7.(Cas.C.5.)
Presumptions (B.3.)
Cas.Can.
R.A.A.F. O.H.Q.
P.File
B.1. (MEM)
C.1. Barton

G.97019.

WILL

R.C.A.F. 1-66
50M-3-40(6696)
H.Q. 1062-5-40

Last Permanent Civilian Address

(1) I, Keith Maynard Gerald Fleming ..... of the Town ~~Village~~ ~~City~~ Township of Kenokaming ..... in the ~~District~~ County of Pontiac ..... Province of Quebec ....., Machinist ..... (Civil Occupation) a member of the Royal Canadian Air Force, Number R.90861 ....do hereby revoke all former wills by me made and declare this to be my Last Will.

(a) Relationship
(b) Names and
(c) Address of beneficiaries and
(d) What each is to receive.

(2) I Give, Devise and Bequeath Unto my Mother, Merle Lillian Fleming, Kenokaming, Quebec. My entire estate

Relationship Names and Address of Residuary Beneficiaries.

(3) I Give, Devise and Bequeath all the rest and residue of my estate, both real and personal, of whatsoever kind and wheresoever situate unto

(4) I appoint Merle Lillian Fleming ..... (Name) (Address) as above, to be the ~~Executor~~ Executrix of this my Last Will.

IN WITNESS WHEREOF I have hereunto set my hand this 25th day of June 1941.

Signed and acknowledged by the Testator, in the presence of us present at the same time who in his presence, at his request, and in the presence of each other have hereunto subscribed our names as witnesses.

Keith M. J. Fleming
(Signature of Testator)

First Witness Sign here.

(5) P.L. O'Brien
(Signature)
R. C. A. F. Penhold Alta
(Address)
W/O/A.G.
(Occupation)

Second Witness Sign here

Harf. Rasmussen
(Signature)
R.C.A.F. Penhold Alta.
(Address)
Trained Cutter
(Occupation)

(Witnesses are not to be beneficiaries)

R.C.A.F Records Office
Rec'd JUL 18 1941
O. K. ..... C.I.B. .....
R. C. 92 N. I. .....
S. L. ..... P. A. Mcb

R.C.A.F. G.64
H.Q. 885-3-24

Royal Canadian Air Force

CERTIFICATE OF PRESUMPTION OF DEATH

NO. 12300

This is to Certify that

R90861 W.O.1 FLEMING, KEITH MAYNARD GERALD R.C.A.F.
(Number) (Rank) (Name in Full) (Unit)

has been officially reported as missing since the 24TH day

of MAY, 1944, and that, full inquiries having been made, no information has been received which would indicate that he may be still alive. For official purposes, therefore, he is presumed to have died on or since the above mentioned date.

Dated at Ottawa, Canada, this 22ND day of MAY, 1945

(T.K. McDougall)
Group Captain
R.C.A.F. Records Officer.

SPECIAL RESERVE

To be made out in duplicate

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.

---

(1) Name of Officer of Other Rank FLEMING, KEITH MAYNARD GERALD
(Surname first—Christian names in full—Block capitals)

(2) Regimental or Air Force Number and Rank R 90861 AC 2

(3) Unit R C A F Special Reserve

(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

R.C.A.F. Records Office
Rec'd JUL 8 1941
O. K. C.I.B.
R. C. N. I.
S. I. & A.

(6) If married, have you been regularly supporting your wife? If not—state reasons N/A

(7) Are you a widower? N/A

(8) Have you any children? NO Number of boys N/A Girls N/A

Names and ages N/A

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

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

Name N/A

Postal Address N/A

[SEE OTHER SIDE]

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

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

(11) Is your father alive? Yes.

If so, state name and address, occupation Mr. George M. Fleming Temiskaming, Ontario. Acid Maker.

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

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

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

(14) Is your mother alive? Yes.

If so, state name and address Mrs. Merle Lillian Foley, FLEMING.

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

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

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

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

If so, state the following particulars:—

Relationship N/A

Full Name N/A

Postal Address N/A

Amount contributed monthly during the past six months N/A

(18) Are you insured? Yes.

If so, in what Company? Mutual Life, Ins. Co.
(Give number of policy)

Have you made arrangements for payment of your Insurance Premium? Yes.
If not, and it is a monthly premium, you may assign the amount in addition to any other assignment you wish to make, provided the total assignment is not in excess of the maximum monthly amount which may be assigned.

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

Keith M. G. Fleming
(Signature of officer or man)

Date June 21st, 1941.

---

for (O.W. Froom) Flight Lieutenant
Officer Commanding OFFICER COMMANDING, R.C.A.F. RECRUITING CENTRE NORTH BAY, ONT.

Date June 21st, 1941.

N.B. If parent(s) of the officer or other rank concerned has (have) been replaced by foster parent(s), questions relating to fathers and/or mothers above should be altered and answered as applicable.

CANADIAN INTERNATIONAL PAPER COMPANY

SUN LIFE BUILDING ~ DOMINION SQUARE

MONTREAL, QUE.

PLEASE ADDRESS REPLY TO
TEMISKAMING, QUE.

May 20th, 1941.

C/O.,
R. C. A. F.,
North Bay, Ontario.

Dear Sir:- Keith Flemming

The above employee has been employed in our Company for the last twelve months as a Machine Shop Helper.

He is leaving us to join His Majesty's Forces, and we trust he will give them the same satisfaction he has give this Company.

Yours very truly,

CANADIAN INTERNATIONAL PAPER COMPANY

P. J. Murer, Manager/

ASC/D

CANADIAN INTERNATIONAL PAPER COMPANY

SUN LIFE BUILDING ~ DOMINION SQUARE

MONTREAL, QUE.

PLEASE ADDRESS REPLY TO

TEMISKAMING, QUE.

May 20th, 1941.

To Whom it May Concern:-

I understand that Mr Keith Fleming wishes to enlist in Air Force.

Have known this young man since birth, it is a real pleasure to go on record as to his personal setup.

Have'nt the slightest doubt he will prove to be a very capable man nomatter what branch of service he enters.

Yours truly

H. J. Cook.

Employment Office.
Canadian International Paper Company.

R.C.A.F
Rec'd JUL 8 1941
O. K.....C.I.B.....
R. G.....N. I.....
S. L.....P. A.....

Town of Temiscaming

OFFICE OF TOWN CLERK &
SECRETARY-TREASURER

COUNTY OF TEMISCAMINGUE QUE.
CANADA

REFER TO FILE

WRITE ABOUT ONE SUBJECT ONLY IN ONE LETTER

Timiskaming Que, May 20th, 1940.

To His Majesties,

R.C.A.F.

North Bay Ont.

The Bearer Keith Fleming, a resident of this Town since infancy, consequntly the writer has been in a position to have observed him develop from early childhood to a youth of eighteen years.

Keith is the only Son of one of the most respected families of this Town, and from personal observation, he reflects the advantages of a superior home life and training.

While only eighteen years of age, Keith presently gainfully employed, having left highschool last Summer of his own volition, he is not only honest with those he is privelaged to come in contact with but what is just as important he is, honest with himself. I know the youth most well, and it is both a privelage and a pleasure to inform you the he is most deserving of every consideration you may care to extend to him, and I assure you he will not be found wanting, he embodies and possesses many virtues and gives every evidence of developing into a man of stirling worth, he is both honest, truthful, industrious, of pleasing personality, and his action in applying for enlistment at this time is typical of his high sense of duty.

Respectfully submitted.

J. R. Lemon Rutan

J.P. in and for the County of
Pontiac.

Records Office
Rec'd JUL 23 1941
C.I.B.
R.C.A.F.
P.A.

R.C.A.F.

Commanding Officer,

North Bay, Ontario.

Dear Sir,-

This is to certify that Mr. Keith Fleming attended The Temiskaming High School for one and a half years, - Course taken The Lower School according to the requirements of the Ontario Department of Education.

In addition to his academic work, Keith had two years classes in Manual Training - wood work.

I shall be pleased to furnish any further information required if in my power to do so.

Signed C. F. Northey

Principal Temiskaming High School.

Temiskaming, Quebec,

May 20, 1941.

R.C.A.F Records Office
Rec'd JUL 8 1941
O. K. ..... C.I.B. .....
Kim
Rec'd ..... N. I. .....
S. L. ..... P. A. .....

I Hereby certify this document to be the Produc... of.....
C.Fred Northey,Principal, Timiskaming High School.

Town of Temiscaming

OFFICE OF TOWN CLERK &
SECRETARY-TREASURER

COUNTY OF TEMISCAMINGUE, QUE.
CANADA

REFER TO FILE

WRITE ABOUT ONE SUBJECT ONLY IN ONE LETTER

Affadavit, of George Maynard Fleming.

To whom it may concern?

I George Maynard Fleming, of the Town of Timiskaming

having been duly sworn doth despose and say.

That I am the Father of one Keith Maynard Gerald Fleming,

That the said Keith Maynard Gerald Fleming was born at,

Ottawa Ont, May 28th, 1923, and that he will be eighteen

years of age May 28th, 1941.

And I have signed.

Signed George M. Fleming

Sworn before me at the Town of Timiskaming

County of Pontiac, Prov of Quebec, this

Twenty first day of May 1941.

J.P. in and for the County of Pontiac.

R.C.A.F Records Office
Rec'd JUL 8 1941
Coy.....C.I.B.....
R.C.....N I.....
S. L.....P. A.....

FORM 6

DOMINION BUREAU OF STATISTICS—QUEBEC DEATH TRANSCRIPT

Do not write in this space

1. PLACE OF DEATH

Municipal county: OVERSEAS (BETWEEN SHETLAND ISLES & NORWAY)

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: FLEMING (*Block letters*)

Given names: KEITH MAYNARD GERALD

4. RESIDENCE

Street: No.:

Official name of civil municipality or township: Temiskaming

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): Ontario

11. DATE OF BIRTH: May (Month) 28th (Day) 1923 (Year)

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

OCCUPATION

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

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 24/44

16. Total years spent in this occupation: Three

	17. NAME	18. BIRTHPLACE (Province or Country)
FATHER	Fleming, George Maynard	Ontario
MOTHER (Maiden Name)	Foley, Merle Lillian	Ontario

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

Do not write in this space

CONFIDENTIAL MEDICAL CERTIFICATE OF DEATH

22. Date of death: May (Month) 24th (Day) 19 44 (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

due to for official purposes, presumed dead.

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 24th 44 ....19....

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.)

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 Register of Civil Status in which registration of this burial was made.

(Voir l'autre côté pour le français)

CE NO. R90861

FLEMING, KEITH MAYNARD GERALD
SURNAME — FULL CHRISTIAN NAMES

ENLISTMENT — PLACE North Bay — DATE 21-6-41
RE-ENLISTMENT
C.R. FILE NUMBER

RECORD OF SERVICE AIRMEN

R.C.A.F. FORM R44(B) 30M-3-41 (9782) H.Q. 1062-3-58

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

S.O.S. OR T.O.S.	UNIT AND PLACE	EFFECTIVE			D.R.O.
TOS	2 AMD Penhold Alta	21	6	41	2AMD52
SOS	2 AMD Penhold Alta	5	7	41	2amd61
	7 B&G Paulson Man				
SOS	2 amd	5	7	41	2amd61
TOS	7 B&G Paulson	6	7	41	7BG839
SOS	7BGS Paulson	25	4	42	7BG105
TOS	1BGS Jarvis	26	4	42	1BG 118
	=				
P/D to	HAMILTON.	17/7	6	42	1BG170
SOS	1BGS Jarvis	26	9	42	1BG257
T.O.S.	1 "Y" D Halifax	27	9	42	1Y286
SOS	Y/D to RAF Halifax Pool	27	10	42	1Y314
TOS	RCAF-PRC	6	11	42	RAF 88
Missing 24 May 44 - PCX 359 d/25 May 44					
Presumed Dead 24 May 44: DCX 1030 d/24 May 45					
SOS to Overseas		9/10	42		255
U.S.G.		11/10	44		
COMPLETED					
Disch		3/9	6	45	

2. RECLASS'NS-PROMOTIONS-ETC.

RANK	EFFECTIVE			D.R.O.
AC2	21	6	41	2AMD52
AC1	21	9	41	7BG117
LAC	21	12	41	7BG1
T/Sgt (pd)	25	9	42	1BG257
T/F/Sgt. (Pa:d)	25	3	43	GB641
T/WO2 (pd)	25	9	43	GB744
T/WO1 (pd)	25	3	44	GB976 AFRO 205/52

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.
22-6-41	R100	A4B.	
10-7-42	M2	1VB 2VB	

4. TRADE AND CHARACTER

TRADE	GROUP	EFFECTIVE			D.R.O.
G.D.	S.	21	6	41	2AMD52.
Messman	S	23	7	41	7BG55
Steward (Ward) 9458	S	5	7	42	1BG187
A.D.	SS	25	9	42	1BG257

TRADE PROFICIENCY	CHARACTER ASSESSMENT	DATE OF R41

5. COURSES-TESTS-ETC.

SUBJECT	RESULT	DATE	AUTHORITY

6. LEAVE

FROM	TO	DAYS	REMARKS	D.R.O.
26-9-42	10-10-42	14	sick emb	1BG257

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

AIR FORCE No. R90861 R

FLEMING, KEITH MAYNARD GERALD
SURNAME — FULL CHRISTIAN NAMES

ENLISTMENT — PLACE North Bay — DATE 21-6-41
RE-ENLISTMENT

C.R. FILE NUMBER

R.C.A.F. FORM R44(B)

RECORD OF SERVICE AIRMEN

7. BIRTH: DATE — PLACE — CITIZENSHIP 2
28-5-23 Ottawa Ont. British
FATHER (FULL NAME) George Maynard Fleming
BIRTHPLACE Ottawa, Ont.
MOTHER (FULL MAIDEN NAME) Merle Lillian Foley
BIRTHPLACE Ottawa, Ont.

8. EDUCATIONAL STANDING
HIGH SCHOOL ENTRANCE x Ont.
JUNIOR MATRICULATION 1½ yrs Ont.
SENIOR MATRICULATION
TECHNICAL SCHOOL
UNIVERSITY
CORRESPONDENCE COURSES
1.

9. CIVIL OCCUPATIONS OR EXPERIENCE USEFUL TO R.C.A.F.
Sample Carrier - 3 mos.
Machinist's Helper - 1 yr.
270—

10. PREVIOUS ARMY, NAVY OR AIR FORCE SERVICE
nil
0.

11. HONOURS-AWARDS, MENTIONS	AUTHORITY	DATE
Air Gunners Badge	1BG257	25-9-42
Ribbon 1939-43 Star	D-B13-34	
C.V.S.M. Ribbon & M.L. Emblem	D-B42-95	15-1-44

12. FLYING EXPERIENCE ON ENLISTMENT (HOURS)
SOLO — DUAL — PASSENGER —

13. RELIGION United
2

14. LANGUAGES English
1

15. SPORTS Baseball, Hockey, Tennis, Swimming, Paddling.

16. SINGLE-MARRIED-WIDOWER-SEPARATED-DIVORCED: Single
WIFE (FULL MAIDEN NAME)
PLACE OF MARRIAGE — DATE
AUTHORITY (IF AFTER ENLISTMENT)
1

17. MARRIED ESTABLISHMENT

REMARKS	RANK	EFFECTIVE	D.R.O.

18. CHILDREN

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

19. NEXT OF KIN (ADDRESS AND D.R.O IN PENCIL)
FULL NAME: George Maynard Fleming — RELATIONSHIP Father
ADDRESS: Timiskaming, 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.
R.A. 14 days	26/10 9/10 42	1BG257			
Admonished	4. 2. 43	Raf 61.			
AWL	2/3. 2 43	Raf 61			
Forfeits 2 Days Pay		Raf 61			

21. ENGAGEMENTS

TERM	EFFECTIVE	D.R.O.	TERM	EFFECTIVE	D.R.O.
Duration	21 6 41				

22. TEMPORARY DUTY AND MISCELLANEOUS ENTRIES

FROM	TO	DATE	D.R.O.
Occ. pble. qtrs. + rtns.		24-6-41	2AMD52
Ceases to draw rtns + occ pub. qtrs		5-7-41	2amd 61
Occ. Pub. Qtrs. + draw. rtns		7-7-41	7BG539
Cease draw. rtns.		3-7-41	
Att. Stn. Hosp. rtns.		4-7-41	7BG63
Special T.W. #C34700		28-12-41	7BG9.
Special T.W. #C34678		27-12-41	7BG8
Cease draw. Hosp rtns 31-12-41 + attach. Stn. rtns.		1-1-42	7BG215
Iss SLTW	C73043	26-9-42	1BG259

22.(A) ADDRESS PRIOR TO ENLISTMENT
Timiskaming, Que.
26906

23. DOCUMENT CONTROL (INDICATE RECEIPT BY DATE)

R60	R79	B465	X-RAY	AFM-13	IDN. CARD	XX
18-7-41	FEB 26 '42	30-6-41				

AIR FORCE No. R.90961

SURNAME: Fleming

FULL CHRISTIAN NAME: Keith Maynard Gerald

ENLISTMENT/APPOINTMENT
PLACE North Bay.
DATE 21-6-40

RELIGION: United

ROYAL CANADIAN AIR FORCE
RECORD OF SERVICE
OFFICERS, AIRMEN AND AIRWOMEN

R.C.A.F. FORM R220
ISOM-7-42 (2446)
H.Q. 885-R-220

BIRTH DATE	PLACE	COUNTRY	CITIZENSHIP	RACIAL ORIGIN
28-5-23	Ottawa Ont	Canada	British	

CIVIL EDUCATION

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

CIVIL OCCUPATIONS AND EXPERIENCE

Machinists' Helper

220

PREVIOUS SERVICE

PLACE AND DATE OF MEDICAL	CATEGORY	PLACE AND DATE OF MEDICAL	CATEGORY
22-6-41	A4 B		
10-7-42	A1 A2 B		

PARTICULARS OF FAMILY

SINGLE, MARRIED, WIDOWER, DIVORCED: Single

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)

George Maynard Fleming Father
Timiskaming Que.

EMPLOYMENT AS INSTRUCTOR OFFICER AIRMAN/AIRWOMAN

TYPE	FROM	TO	TYPE	FROM	TO

OFFICERS

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

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

AIRMEN AND AIRWOMEN

RANK	DATE	AUTH.	TRADE	DATE	AUTH.
AC2	21 6 41	2AMO 5	G.D.(S)	21 6 41	2AMO 5
AC1	21 9 41	7BG/17	Mus.(Bd)	23 7 41	7Bks 53
LAC	21 12 41	7BG	(WAG)		
T/Sgt	28 9 42	1BKS 25 406 Sqn	Remus.A.D.(B)	5 7 42	1BKS 97
T/Sgt	25 3 43		A.G.(B)	28 9 41	1BKS 25
T/WO II	25 9 43	6th WO N3			
T/W.O II (Paid)	25 9 43	122 Log 51			
T/WO I	25 3 44	976/44 AFRO 405 2/44			

OFFICERS, AIRMEN/AIRWOMEN

COURSE OR TRADE	GRP.	%	PF	DATE
Cse 35B				6/5 7/9 42/43

ADVISE ENTRIES
UNIT RECORDS RETURNED
TO CANADA

AIR FORCE No. R.90861

SURNAME: FLEMING. FULL CHRISTIAN NAME: KEITH MAYNARD GERALD

ENLISTMENT/APPOINTMENT — PLACE North Bay. DATE 21-6-41

RELIGION: C. — R.C.A.F. FORM 1230

TYPE OF LEAVE

FROM	TO	No. DAYS	DESCRIPTION	AUTH.
30-4-43	6-5-43	7	P Leave	4CIOTU 5-43
13-7-43	26-7-43	10	Plt+48+2 days T.T.	422 Sqn 32/43
11.10.43	26.10.43	16	Plt+48+2 TT.	422 Sqn.
25.2.44	11.3.44.	14	Plt+48+2 TT.	422 Sqn.

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
25 9 42	Air Gunners Badge	1B&D 257
Awarded the Belgian Croix de Guerre with Palm of the 1939-43 Star.		
15 1 44	C.V.S.M. & Bar	422 Sqdn 5/44

POSTINGS, ATTACHMENTS & TEMPORARY DUTY

SOS TOS	FROM	TO	DATE	AUTHORITY
SOS	1339 Jarvis		26 9 42	1B&D 257
SOS	1y Depot RCAF Trg Pool		27 10 42	1y 314
	Disembarked U.K.		5 11 42	ES51
TOS	7 A.F.U.		19 12 42	1/12
SOS	7 A.B.S.E.	94 A.B.R.B.	19 12 42	5/1
SOS	94 A.B.R.B.	4CIOTU	29 2 43	32/43
SOS	4(C) OTU	To 422 Sqn	8 5 43	4CIOTU 11/43
Att	#19 Grp.		4 7 43	32/43 422 Sqn.
	Pembroke Dock		9 7 43	32/43
C.T.B.A.	from 422 Sqn		9 7 43	4/7/43.
Att	422 Sqn - Castle Archdale		31/10 7/8 43	422 Sqn 22/43 25/43
Att	RAF Castle -		24 9 43	42-250- 32-43
Att	422 Sqn - Castle Archdale		18 9 43	422 Sqn.
Att	RAF Hawkinge		25 10 43	1
	Embk. R.M.S. Duchess for U.K		31/10 43	S.14/25-26 9334
	Disembk. U.K.		6/10 43	
ATT	1 APC. from 422 Sqn		15/11 22/11 43	1 APC 9/11/43 1 APC 11/43
ATT	Wing Bay		" " 43	15/43 Wing Bay
Att.	Sullom Voe from 422 Sqn		29/4 4 44	422 Sqn. 19/44.
F/B	Missing from 422 Sqdn.		24/5 44	CR473 OPERO 1444/44
TOS	RCAF N/E.U. Missing		25/5 44	N/E.U. 61/44.
SOS	422 Sqn - U.K. N/E.U. PRESUMED DEAD		26/5 44	422 Sqn. 11 Ft. 24/5/44 CR770

ALL OTHER CASUALTIES

CASUALTY AND DATE	AUTHORITY
Awarded DFC 20.2.44.	12/44

ADVISE ENTRIES
UNIT RECORDS RETURNED
TO CANADA

Ends: 28-10-42

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 90861 Name FLEMING Hill Maynard Gerald. Rank T/Sgt.
(In full in block capitals, surname first). (Or acting appointment).

R.A.F. Trade A/G (2) Special Qualifications
(e.g., Gas Instructor, Fire Fighter, Boxing Instructor).

Date of Birth 28.5.23 Religion U.C Occupation in Civil Life machinist helper

Last Enlisted 21.6.41 Current Engagement Def War

If a member of the Auxiliary Air Force —

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

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

Mrs. G. M. Fleming, Tamaskaming, Que (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.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.
1. Bz. C.	1Y Depot	26.9.42
1Y Depot	R.A.F.T.P.	27.10.42
	Emb. Can	28.10.42
	U.K.	5.11.42
INT. 3	3 PRC Padgate	6.11.42.
44/42 3 PRC	7 P/Sqd.	19.12.42.
7 A.G.S	H(c) O.T.U.	2.2.43
N° H(c) O.T.U.	422 Squadron	8.6.43.
	20	
No. 422 Sqdn.	W.C. N/E Assts. Depot	26-5-44
pres. Head	C.R. 770	24.5.44
	Item 112/45	

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

* Authority.	Description.	Date of Effect.
	L.D Std AC2.	21.6.41
	MESSMAN. Std	23.7.41.
	" AC1	21.9.41
	" LAC	21.12.41
	REM L.D (U/T A.G) Std	5.7.42
	A-G. Spec. (2) T/Sgt	25.9.42
FOR 34/43	Promoted T/F/SGT. (PAID)	25.3.43
P.O.R. 51/43	Promoted T/W.O. II (PAID)	25-9-43
P.O.R. 33/43	Attended Gunnery Course at Manby from 19.12.42 to 29.1.43 and obtained 99% Clear Hit	

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.

*10349) Wt. 23821—1216 100M 8/42 T.S. 700

M.D

Section 4.—Character and Trade Proficiency.

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

Rank.	Character.	Trade Classification.	Proficiency. A	Proficiency. B	Proficiency. C	Whether specially recommended, recommended, or not recommended for promotion or reclassification.	Date.	Signature and Rank of Commanding Officer.
T/Sgt.	VG	A/G	On Strength			for training only	8.5.43	[illegible] S/Ldr
W02.	V.G	A/G	Sat	Sat			31-12-43	W.C. Cant S/L
W.O.II	V.G.	A.G.	Sat.	Sat.	—	—	2-6-44	W.C. Cant S/L

POR 49/43 5-11-43 to 11-11-43 Granted 7 days extension

POR. 42/43 11/10/43 - 24/10/43 14 Days Prin. plus 24 hrs. hors. R.W.I. D. 33866 14 Days S.L.S.A

POR 26/43 13/7/43 - 22/7/43 10 Days S.L.S.A.

P.O.R. 22/43 13.7.43 - 22.7.43 (10 Priv.) F.R.W.

9 days "Priv" leave from 30th April to 8th May. 1943 R.W.G. 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.
POR 1/44	Awarded 1939/43 with bar	
POR 5/44	Awarded C.U.S.M. + Maple Leaf Emblem	15-1-44
Castle Archdale	Forms 1020A forwarded. Recommended 6 months deferment.	16.2.44.

Photo 7 B & G
11-11-41

SPECIAL RESERVE

ROYAL CANADIAN AIR FORCE

RECORD OF SERVICE AIRMEN

Finger Printed
Date 21/8/41
Initials JW

A.F. No.	Surname	Christian Names	Religion
R 90861	Fleming	Keith Maynard Gerald	United

Born May 28, 1923 Place Ottawa Country Ontario Citizen of Canada Racial Origin Canadian

ENLISTMENT

Date June 21, 1941
At North Bay Rec/C.
Term Duration

CIVIL EDUCATION

High School Entrance Yes Jr. Mat. 1 year Matric Sr. Mat.
Technical School Corres. Courses
University

PREVIOUS SERVICE

RANK	DATE			Med. Cat.	Date		
A/C 2	21	6	41	A 4 B.	21	6	41
AC1	21	9	41				
LAC	21	12	41				
T/Sgt.	25	9	42				

CIVIL OCCUPATIONS AND EXPERIENCE

Sample Carrier 2 mths - 1939
Machinist Helper 1940-41

COURSES AND TRADE TESTS

Trade	Grp.	%	PorF	Date Rem.	Trade	Grp.	%	PorF	Date Rem.
Gen Duties	Std.			25 6 41					
Mess MRN	STD			23 7 41					
remustered to Std G.D. (u.t.a.s.)				5 7 42					
A.G. (Spec.)				25 9 42					

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. George M. Fleming (Father)
Iamiskaming, Que.

LEAVE

FROM	TO	AUTH. AND DESCRIPTION
Issued sp. T.W. #C 34678		d/27-12-41 DRO 8.
" hrs. " "	#34700	d/28-12-41 DRO 9
0615 hrs. 26-9-42	2200 hrs. 10-10-42	DRO 256/42 (Embarkation)(4)

CHARACTER AND TRADE ASSM. HONOURS, AWARDS AND MENTIONS

DATE	CHARACTER	TRADE AND ASSM.	HONOURS AND AWARDS	SIGNATURE
25-9-42	Awarded	Air Gunners'	Badge	DRO 256/42

MOVEMENTS AND CASUALTIES

AUTHORITY	UNIT FROM	UNIT TO	DATE	AUTHORITY	UNIT FROM	UNIT TO	DATE
M.O.R. 13	Rec/C. North Bay	#2 A.M.D. Penhold Alta	21-6-41	(LE) DTU 25/43 (20/51) 33/43 (114/88)	M.A.C.S. 4	M(C) ORV.	2-2-43.
LR061	#2 A.M.D. Penhold	#1 B&G Pulford	5-7-41				
DRO #105	#1 B&G Pulford	#1 B&G Jarvis.	25-4-42				
DRO 256/42	#1 B&G Jarvis	No. 1 "Y" Depot	26-9-42				
DRO 259/42	Issued SLTW #C 73043						
	Proceeds to North Bay & ret.		26-9-42				
DRO 314	#1 Y Depot	R.A.F.U.S.	27-10-42				
		Ferry Command	28.10.42.				
		U.K.	5.11.42				
	INTE. S.P.R.C.	Padgate	6.11.42.				
307/42 (E/8) 44/42. (12/1)	S.P.R.C.	C/No. 7 A.G.S.	19-12-42				

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

(OVER)

				Attended No 94 Air Gunner Refresher Course at Stormy Down from 19-12-42 to 29-1-43. obtained 79%			4 ACS 33/43 (14/38)
				4(C) O.T.U (1/61) 21/43 Time Forfeited Absence	1800 hrs 2.2.43	2210 hrs. 3.2.43	No. of days. 2

Provisional

ROYAL CANADIAN AIR FORCE

TRAINING REPORT

AIR GUNNER

No. 1 B. & G. School

1. Surname **Fleming** Christian Names **Keith Maynard Gerald**

2. Number **R90861** Rank **LAC** Course No. **35-B**

3. Posted from _____ Posted to **No. 1 "Y" Depot** Duration of Course From **6-7-42** To **25-9-42**

4. Aircrew Category **Straight Air Gunner** Height _____ Girth _____

5.

EQUIPMENT USED				
Type Aircraft	Type Guns		Type Turrets	
	In Air	Ground	In Air	Ground
Battle	**V.G.O.**	**V.G.O.**	**Bristol IV**	**Boulton Paul Fraser Nash**
Bolingbroke	**Browning**	**Browning**		**Bristol**
		Rifle		
		Revolver		

6. STAGE I

	Mks. Possible	Mks. Obtd.
Armament Oral	100	**72**
Armament Written	300	**207**
Anti-Gas	100	**52**
A/C Recognition	100	**95**
Navigation	100	**54**
Maths, Hygiene, Admin, etc.	150	**113**
Signals	100	**100**
Drill	100	**65**
TOTALS	1050	**758**
Percentage		**72.2**

7. STAGE II

AIR AND GROUND TRAINING	DAY	NIGHT
Flying Time	**15:**	**20**
Films Exposed		**1**
Hrs. Turret Manip.	**6:**	**50**
Skeet (No. Rds.)		**280**
25[x] Range "		**325**
200[x] Range "		**675**
Air to Ground "		**710**
Air to Air "		**3080**
% Hits Air to Air		**7.3**
Rifle		**35**
Revolver		**42**

ASSESSMENTS	Mks. Poss.	Mks. Obtd.
Arm. Written	150	**90**
Practical and Oral	200	**162**
Aircraft Rec.	100	**93**
Ability as Firer	100	**92**
TOTAL	550	**437**
Total raining Marks	1600	**1195**
Percentage		**74.7**
Personal Assessment	800	**477**
TOTAL MARKS	2400	**1672**

R.C.A.F. Overseas Records Office
Rec'd. DEC 10 1942
O.K. R.C. JB
R.C. N.I.
S.E. P.A.

8. No. in class **25** Position in class **9** Pass or ~~Fail~~

9. Recommended for Commissioned Rank **No**
(yes) or (no)

10.

Suitability for further training as a Gunnery Instructor	Not at all Suitable	Moderately suitable	Definitely suitable	Extremely suitable
		X		

Mark "X" in the appropriate column.

11. Remarks : **A straight forward, clear cut youngster; should soon be useful in a position of responsibility; cheerful, and most willing and intelligent.**

Date: 25-9-42

(G.O. Godson) Squadron Leader
Chief Instructor

Date: 25-9-42

(A.D. Bell-Irving) Group Captain
Officer Commanding
No. 1 B. & G.S.

CONVERSION TABLE

for Determining Pupil's "Ability as a Firer"

% Hits		Pupil's Score														
		1	2	3	4	5	6	7	8	9	10	11	12	13	14	15
COURSE AVERAGE	3	50	65	75	85	90	100	100								
	4	35	57	67	75	80	90	95	100	100						
	5	25	53	60	70	75	80	90	95	95	100	100				
	6	20	50	57	65	70	75	80	85	90	95	96	100	100		
	7	15	45	55	60	67	72	75	80	85	90	92	95	97	100	100
	8	10	40	52	58	63	68	72	75	80	85	88	90	93	97	97
	9	5	35	50	56	60	64	70	72	75	80	82	85	90	93	93
	10	0	30	47	54	59	60	67	70	73	75	78	82	86	90	90
	11		25	43	52	57	58	63	68	72	72	75	80	82	86	87
	12		20	40	50	55	57	60	65	68	70	73	75	77	82	84
	13		15	37	47	54	56	58	63	66	68	70	73	75	77	82
	14		10	33	43	52	55	57	60	64	67	68	70	73	75	78
	15		5	30	40	50	52	55	57	62	65	67	68	70	73	75

(1) Determine the pupil's percentage hits to round fired - air to air.
(2) Determine the course average percentage hit to rounds fired - air to air.
(3) Checking (1) against (2) we obtain the pupil's mark for "ability as a firer"

Note: The chart has been arranged so that:

(a) Pupils scoring less than 30% of course average will obtain a mark less than 50 (Failure)
(b) Pupils scoring about the course average will obtain a mark of 75.
(c) Pupils scoring double the course average or more will obtain a mark of 100.

RECOMMENDATION FOR AIRCREW TRAINING

CIRCULATION SLIP

NO. R90861 RANK LAC. NAME Fleming, K.M.G. TRADE G.D. STD.

ACTION	DATE	INITIAL
Entered in Aircrew		
Checked against Strength		
Entered in monthly record		
Six (6) months in Trade or S.G.D.		
Educational Documents		
Medical Category		
Approved for Training as		
Checked by A.P.2B	24-6-42	[illegible]
Pass to A.P.3A		
Present Posting		
Card Removed	1 B/S	
Checked by A.P.3A		
Pass to A.P.3B1		
Posted to 1 B/S Effective	4/7	
Letter Written	29/6	
Checked by A.P.2B1	[illegible]	
Returned to A.P. 2B		
Entries completed	2-7-42	DB
Noted on Seniority Roster	2.7.42	[illegible]
Pass to R.O.		
For Document File		

R.C.A.F. Records Office
Rec'd JUL 4 1942
O.K. C.I.B.
R.C. N.I.
S.L. P.A.

APPENDIX "A"
to A.44/7

ROYAL CANADIAN AIR FORCE

RECOMMENDATION FOR REMUSTERING TO AIRCREW

1. No. R90861 2. LAC (present rank) Fleming, K.M.G. (name) (initials)

3. Trade and Group G.D. "Std" 4. Station or Unit No.1 B.&G. School Jarvis

5. Date of Enlistment 21-6-~~42~~41 6. Date of birth 28-5-23

7.

EDUCATION	FROM	TO	NAME OF SCHOOLS OR UNIVERSITY	DIPLOMAS OR STANDING (B.Sc. Sr. Matric. Jr Matric
High School	15-9-38	1-3-40	Temiskaming High School	
University				

EQUIVALENT EDUCATION

COURSES OR OTHER QUALIFICATIONS

8. FLYING EXPERIENCE

Details Clubs Place Aircraft etc.	SOLO	DUAL	PASSENGER	TOTAL
			30 hours	30 hours
TOTAL HOURS				

9. OTHER INFORMATION

10. MEDICAL OFFICER
This airman was medically examined on form R.C.A.F. M.2 on 15-6-42 and found to be fit (fit or ~~unfit~~) for Aircrew duties, his category being. A.1.B.A.B

Remarks of Medical Officer J.C. Hansen
Air for aircrew

SIGNATURE J.C. Hansen M.O. Date 16-6-42

11. Recommendation and remarks of Commanding Officer
This Airman has been taking educational course and appears fairly intelligent. Has done good work in Plotting Office.

~~Specially Recommended~~

Recommended ~~Pilot~~ ~~for Observer~~ ~~Wireless Operator (Air Gunner)~~ Air Gunner.

(Strike out those not applicable)

Signature of Commanding Officer [illegible]

Para. 11 must be completed and signed by Commanding Officer

12. FOR HEADQUARTERS USE ONLY

..... Selected	..... Initials	..... Date	Selected	..... Initials	..... Date

ROYAL CANADIAN AIR FORCE

INTERVIEW REPORT

1. SURNAME.....FLEMING.....

2. CHRISTIAN NAMES.....K.M.G.....

3. APPLYING FOR ENLISTMENT.....Air Gunner.....

SELECTION BOARD

4. PERSONNEL OFFICER

EDUCATION.....IX Quebec.....

CLASSIFICATION SCORE....2408.....

Alertness good. Education good. Very good A.G.

RECOMMENDED FOR.....Air Gunner.....

SUITABLE FOR COMMISSION.....yes.....

SIGNED
(J.S. Mencel) Flying Officer

---

5. MEDICAL OFFICER

MEDICAL CATEGORY.....

ASSESSMENT: (Physical ; Tempermental)

RECOMMENDED FOR.....

SUITABLE FOR COMMISSION.....

SIGNED

---

6. INTERVIEWING OFFICER

ASSESSMENT: (General Fitness)

Fit in all respects for training

RECOMMENDED FOR.....Air Gunner.....

SUITABLE FOR COMMISSION.....Yes.....

SIGNED
(M.F. Lawrence) Flying Officer

FOUND ACCEPTABEE FOR.....

DATE: June 17, 1942.

M.F. Lawrence 70
for (J.G. Byrie) Squadron Leader,
Commanding Officer,
No. 10 Recruiting Centre, RCAF,
Hamilton, Ontario.

A.F.M.5
24-12-41.

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

DEPARTMENT OF NATIONAL DEFENCE

NAVY ═══ ARMY ═══ AIR FORCE 2 AIR

STATEMENT OF WAR SERVICE GRATUITY

3241 A-23076

DECEASED MEMBER'S NAME: Keith M.G. (CHRISTIAN NAMES) Fleming (SURNAME)

REGISTER NO.

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

FILE NO. 21374
DATE 20/Sept/45
SERVICE NO. R90861
FINAL RANK OR RATING W01
DATE OF TERMINATION OF OVERSEAS SERVICE 24/May/44
DATE OF DISCHARGE 24/May/44

		$	¢
A. TOTAL QUALIFYING SERVICE			
NO. OF DAYS 1069/30 EQUAL TO 35	COMPLETE PERIODS AT $7.50	262.50	
B. QUALIFYING OVERSEAS SERVICE			
NO. OF DAYS 576 LESS 19 INELIGIBLE DAYS, EQUAL TO 557	DAYS @ 25c. PER DAY	139.25	
C. SUPPLEMENT FOR OVERSEAS SERVICE			
DAILY RATES AT DISCHARGE			
PAY	$ 5.20		
SUBSISTENCE OR LODGING AND PROVISION ALLOWANCE	$ 1.25		
ADDITIONAL PAY.	$		
	$		
	$		
DEPENDENTS' ALLOWANCE 1/30 OF $ ____	$		
TOTAL	$ 6.45 ×7 = $ 45.15		
NO. OF DAYS 576/183	×$ 45.15	142.11	
D. WAR SERVICE GRATUITY		543.86	
E. DEDUCTIONS — OVERPAYMENT OF PAY AND ALLOWANCES	$		
DEPENDENTS' ALLOWANCE AND ASSIGNED PAY	$		
OTHER DEDUCTIONS	$		
F. TOTAL AMOUNT PAYABLE		543.86	

JW 211

OCT 10 1945

G. YOUR PORTION OF GRATUITY IS—

DEPENDENTS' ALLOWANCE IN ISSUE TO YOU $ ____ OF $ ____ =$
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
JWS	AMS

TREASURY

CHECKED BY	DATE
	22.9.45

SERVICE REPRESENTATIVE

△T