

R74061

WRIGHT, WILLIAM ALBERT

R	100	PREV. DIS. & AWARDS	BIRTH	MARR.	DEP'D'TS' BIRTH	INDEX CARDS	R 44	CHECKED
			CERTIFICATES			COMPLETED		

CASUALTY

MICROFILMED  
FILM RE. WSR 595-4

CANADIAN FORCES  
RECORDS CENTRE  
PERS JACKET  
ROOM

CANADIAN FORCES  
RECORDS CENTRE  
PERS JACKET  
ROOM

247813

M.



- RECORDAX -

Document *P.L.O. - P.L.O. - Agreement*

Reel No. *5-2*

Exposure No's. *164*

Date *12/4/41* Int. *m n*







2297. 5-4/5-0

Mrs. Margaret M. Wright (Widow)  
161 McRay St.,  
Pembroke,  
Ont.

Apr. 46  
FEB. 50

MEMORIAL BAR

DATE DESP

REGN. NO

A 1009



NAME WRIGHT, William Albert

FILE NO. FD361

RANK F/SGT. PILOT

PRES DEAD

CATEGORY

~~XXXXXXXXXXXXXXXXXXXX~~

REG. NO. R74061

~~XXXXXXXX~~

DATE OF DEATH: 24-Dec-44

MOTHER LIVING: YES

WIFE: YES

MINISTERIAL CARD: 5 Jan./45

ROYAL MESSAGE: NOV 27 1945

MEMORIAL CROSS  
TO CHAPLAIN:

To Wife-

To wif, e 19-9-45

DEL'D TO MOTHER: NOV 26 1945

DEL'D TO WIFE:

Mrs. William Albert Wright,  
161 ~~XXXX~~ McKay Street,  
Pembroke, Ontario.

Mother-  
Mrs. H. H. Wright,  
Pembroke,  
Ontario.

COMMAND:

RELIGION:

*mb*



# ROYAL CANADIAN AIR FORCE



Name **WRIGHT Albert William** ..... **ER 74061**

Rank **LAC Sgt** ..... **R.C.A.F.**

Age **19** ..... Height **5' 8"** ..... Weight **140**

Hair **Light Brown** Eyes **Brown** Hair on face **Light**  
**Trimmed moustache.**

Marks, scars, etc. **Scar on right cheek.**

*Albert Wright* ..... (Signature of holder)

L.C. Carr. **F/L** ..... (Signature of issuer)

Place **RCAF Station, Trenton** Date **February 3rd, 1942.**  
**Ont.**

Card serial number **33817**





L.C.B. ONT. 1943-4

IF YOU LOSE THIS CARD, notify your C. O. immediately, giving him full particulars.

IF YOU FIND THIS CARD, please mail in an envelope addressed to: "The Secretary; Dept. National Defence (Air); Ottawa, Canada; Attention P. I. B."

NO POSTAGE NECESSARY

RECEIVED  
MAY 1943



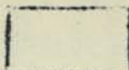
RECORD OF FLYING TRAINING CARRIED OUT

No. 1 O.T.U., RCAF, BAGOTVILLE, P.Q.

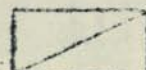
Name WRIGHT, V.A. No. R74061 Course No. 20 From 1-11-43 to 28-1-44

1.	DUAL, Master or Harvard and Sector Reconnaissance.	<input checked="" type="checkbox"/>	13.	INDIVIDUAL DEFLECTION Attacks on single Aircraft.	<input checked="" type="checkbox"/>	22.	CLIMB IN SECTION, to 25,000 feet.	<input checked="" type="checkbox"/>
2.	SOLO, On Master or Harvard.	<input checked="" type="checkbox"/>	14a	AIR COMBAT - Elementary a/c following each other.	<input checked="" type="checkbox"/>	23.	SQUADRON FORMATION, 4 or more sections of two aircraft, in pairs.	<input checked="" type="checkbox"/>
3.	FIRST SOLO, Service Type.	<input checked="" type="checkbox"/>	14b	AIR COMBAT - Advanced. Approaching head-on.		24.	INTERCEPTION AND ATTACK PRACTICE.	<input checked="" type="checkbox"/>
4.	EXPERIENCE, on Service Type & Sector Reconnaissance R/T Practice.	<input checked="" type="checkbox"/>	15a	SECTION ATTACKS, on a single aircraft straight ahead.	<input checked="" type="checkbox"/>	25a	LOW FLYING - Individual.	<input checked="" type="checkbox"/>
5.	D/F Homing Practice.		15b	SECTION ATTACKS, taking avoiding action.	<input checked="" type="checkbox"/>	25b	LOW FLYING - As a member of a Section.	<input checked="" type="checkbox"/>
6.	CLIMB to 18,000 feet.	<input checked="" type="checkbox"/>	16.	SPINNING AND AEROBATICS.	<input checked="" type="checkbox"/>	25c	LOW FLYING - As a member of a Section astern attacks against single a/c.	
7.	FORMATION FLYING.	<input checked="" type="checkbox"/>	17.	SEARCH FORMATIONS.	<input checked="" type="checkbox"/>	26.	FORCED LANDING PRACTICE.	<input checked="" type="checkbox"/>
8a	INSTRUMENT FLYING - Dual	<input checked="" type="checkbox"/>	18a	CLOUD FLYING - Individual		27a	NIGHT FLYING - Dusk Landings.	<input checked="" type="checkbox"/>
8b	INSTRUMENT FLYING - As safety pilot	<input checked="" type="checkbox"/>	18b	CLOUD FLYING - As a member of a section.		27b	NIGHT FLYING - Night Landings.	
9.	INDIVIDUAL Astern Attacks.	<input checked="" type="checkbox"/>	19.	AIR TO AIR FIRING.	<input checked="" type="checkbox"/>	28a	BOMBING - Low Level.	
10a	NAVIGATION I - Solo triangular Cross-Country and map reading.		20.	NAVIGATION II - Cross-Country.		28b	BOMBING - Dive Bombing.	
10b	NAVIGATION I - Map reading and pin pointing.	<input checked="" type="checkbox"/>	21a	R/P PRACTICES		29.	RHUBARB PRACTICE.	<input checked="" type="checkbox"/>
11.	DEFLECTION Attacks, Dual.	<input checked="" type="checkbox"/>	21b	SECTION ATTACKS, at maximum height.	<input checked="" type="checkbox"/>			
12.	AIR TO GROUND FIRING.	<input checked="" type="checkbox"/>						

Note: Instruction not given.....



Pass standard not attained.....



Pass standard attained.....









# NOTICE

1. File should be retained no longer than absolutely necessary. If a file is frequently needed at short intervals, it is better to B.F. it for two or three days than keep it out of Central Registry indefinitely. This ensures its being completed and kept in order, and also gives other offices an opportunity.

2. Central Registry should be notified whenever a file is passed direct to another branch.

3. All outgoing letters should bear the official file number.





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NAME WRIGHT? William, Albert

ENLISTED Ottawa

NUMBER R74061

DATE 13/9/40 GROUP Std. TRADE A.F.M. M.

U No. 1 Manning Depot R.C.A.F. Toronto, Ontario

CLASSIFICATION			PROMOTION			
A.C. 2	A.C. 1	L.A.C.	CPL. (PROV.)	CPL.	SGT. (PROV.)	SERGEANT
<u>13/9/40</u>	<u>15-3-41</u>					

TRADE TEST				QUALIFIED		
TRADE	GROUP	%	DATE	TRADE	GROUP	DATE REMUSTERED
<u>Airframe Mechanic</u>	<u>C</u>	<u>P</u>	<u>15/3/41</u>	<u>A.F.M.</u>	<u>C</u>	<u>15/3/41</u>
<u>Airframe Mechanic</u>	<u>B.</u>	<u>FAIL</u>	<u>58 20-4-41</u>			









## RECOMMENDATION FOR APPOINTMENT TO HIGHER RANK

1. No. R74061 2. TRADE A.F.M. "B"
3. NAME Wright, W.A.
4. UNIT No. 6 Repair Depot, RCAF, Trenton, Ontario.
5. PRESENT RANK AC1  
(If Acting state paid or unpaid)
6. RECOMMENDED FOR APPOINTMENT TO RANK OF LA C 1-10-41.
7. QUALIFIED IN DRILL FOR RANK OF Recruits.
8. RECOMMENDATION OF  
FLIGHT, SQUADRON  
COMMANDER, ETC. Qualified by service and conduct.

- [Signature] Flight Lieutenant O.C. A.R.S.  
(Signature) (Rank) (Appointment)
9. RECOMMENDATION OF  
C.O. STATION OR UNIT

[Signature] Wing Commander Commanding Officer.  
(Signature) (Rank) (Appointment)

Paras. 8 & 9 must be completed and signed by Commanding Officers.

(For Headquarters use only)

APPOINTED TO RANK OF ..... EFFECTIVE .....

PARTICULARS CHECKED BY .....

CERTIFIED THAT THE ABOVE AIRMAN IS IN THE  
PROMOTION ZONE AND NO ADVERSE REPORT HAS  
BEEN RECEIVED WITHIN THE PAST THREE  
MONTHS.

APPOINTMENT APPROVED

..... Signature .....

..... Rank .....

..... Appointment .....

..... Date .....



ROYAL CANADIAN AIR FORCE  
AUTOMATIC REMUSTERING

DATE..18-8-41.....

Certified that.....R74061.....AC1.....Wright, W. A.....  
(NUMBER) (RANK) (NAME)

has satisfactorily passed an examination by the Command Trade Test Board  
held at.....NO SIX REPAIR DEPOT.....TRENTON ONTARIO.....  
(UNIT) (PLACE)

on.....21-7-41.....for....."B".....in the trade of.....A.F.M.....  
(DATE) (GROUP) (TRADE)

The necessary entry showing the subject airman as qualified for the above group  
in his trade effective.....1-10-41.....has been promulgated in our D.R.O.

Serial No.....193.....dated.....15-8-41.....

This remustering is to be promulgated on or about the effective date, as indicated  
above, in a D.R.O. of the Unit at which the airman is then posted in accordance  
with instructions contained in D.A.P.S. Information Bulletin No. 20 dated April  
25th. 1941.

PERCENTAGE OBTAINED 65%

*for* .....*W. A. C. F. H. E. F. / O.*.....WG. COMDR.,  
(Commanding Officer)  
NO. SIX REPAIR DEPOT, R.C.A.F.,  
TRENTON, ONTARIO.



# ROYAL CANADIAN AIR FORCE

R.C.A.F. R. 14  
100M-7-40 (6059)  
H.Q. 1062-3-17

## RECOMMENDATION FOR APPOINTMENT OR PROMOTION

OF

NOR74061 RANK AC2 NAME Wright, W.A. TRADE A.F.M. (M)

STATION No. 6 Repair Depot, Trenton, Ont.

<p>1. Date of Enlistment: 13-9-40</p> <table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="width: 20%;"></th> <th style="width: 30%;">Trade</th> <th style="width: 30%;">Date</th> <th style="width: 20%;">%</th> </tr> </thead> <tbody> <tr> <td>2. Trade Tests</td> <td>1. A.F.M. "C"</td> <td>15-3-41</td> <td>P</td> </tr> <tr> <td></td> <td>2. ....</td> <td></td> <td></td> </tr> <tr> <td></td> <td>3. ....</td> <td></td> <td></td> </tr> <tr> <td>3. Remusterings</td> <td>A.F.M. "C"</td> <td>15-3-41</td> <td></td> </tr> <tr> <td></td> <td></td> <td></td> <td></td> </tr> <tr> <td></td> <td></td> <td></td> <td></td> </tr> <tr> <td></td> <td></td> <td></td> <td></td> </tr> <tr> <td>4. Reclassifications</td> <td></td> <td></td> <td></td> </tr> <tr> <td></td> <td></td> <td></td> <td></td> </tr> <tr> <td>5. Appointments</td> <td></td> <td></td> <td></td> </tr> <tr> <td></td> <td></td> <td></td> <td></td> </tr> <tr> <td></td> <td></td> <td></td> <td></td> </tr> <tr> <td>6. Promotions</td> <td></td> <td></td> <td></td> </tr> <tr> <td></td> <td></td> <td></td> <td></td> </tr> <tr> <td></td> <td></td> <td></td> <td></td> </tr> <tr> <td>7. Seniority on Trade Roster</td> <td></td> <td></td> <td></td> </tr> </tbody> </table>		Trade	Date	%	2. Trade Tests	1. A.F.M. "C"	15-3-41	P		2. ....				3. ....			3. Remusterings	A.F.M. "C"	15-3-41														4. Reclassifications								5. Appointments												6. Promotions												7. Seniority on Trade Roster				<p>8. Sgt. Prom. Exam. % ---</p> <p>9. Past 3 Character Assessments</p> <p>1. Good</p> <p>2. ....</p> <p>3. ....</p> <p>10. Past 3 Trade Assessments</p> <p>1. Sat.</p> <p>2. ....</p> <p>3. ....</p> <p>11. Number of Conduct Sheet Entries in past 6 months</p> <p style="text-align: center;">None</p> <p>12. Qualified in Drill up to and including</p> <p style="text-align: center;">Recruits</p> <p>13. Present Medical Category</p> <p style="text-align: center;">"A"</p> <p>14. Married or Single</p> <p style="text-align: center;">"S"</p>
	Trade	Date	%																																																																		
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15. Recommended for: Reclassification to AC1

16. Date of Effect: 15-3-41

17. Position No. to be filled: ---

18. Remarks: Qualified by Service and Conduct.

19. Recommended by: *William B. ...* Squadron Leader, Officer i/c R.S.,  
(Signature) (Rank) No. 6 Repair Depot, Trenton.

20. Remarks of C.O. ....

Signature: *F.L. Trethewey* Rank: Wing Commander  
(F.L. Trethewey) Wg. Cmdr.,  
Appointment: No. 6 Repair Depot, RCAF, Trenton, Ont. Date: 31-3-41

FOR HEADQUARTERS USE ONLY

21. Particulars checked by: .....  
Recommended effective: ..... to take rank and precedence on  
the: ..... Roster, immediately following: .....

Approved, Signature: .....  
Signature: ..... Rank: .....  
Rank: ..... Appointment: .....  
Appointment: ..... Date: .....  
Date: .....



ROYAL CANADIAN AIR FORCE

VERIFICATION OF DECORATIONS AND AWARDS

NO. R74061 RANK AC2 NAME Wright W.A.

The above stated Airman is shown on his Record of Service, form R.C.A.F. R44A, as entitled to the following:

1. nil
2. \_\_\_\_\_
3. \_\_\_\_\_
4. \_\_\_\_\_
5. \_\_\_\_\_
6. \_\_\_\_\_
7. \_\_\_\_\_
8. \_\_\_\_\_

The medals have been inspected by me personally and the following state is reported.

<u>In possession</u>	<u>Missing</u>
1. <u>nil</u>	1. <u>nil</u>
2. _____	1. _____
3. _____	3. _____
4. _____	4. _____
5. _____	5. _____
6. _____	6. _____
7. _____	7. _____
8. _____	8. _____

The explanations offered by the Airman regarding the medals shown above as missing are as follows:

No. 1 Manning Depot, R.C.A.F.,  
Toronto, Ontario.

17-9-40  
Date

*John Lamont*  
Inspecting Officer,  
for Commending Officer.



SPECIAL RESERVE

R.C.A.F.—R13  
40M—12-39 (3078)  
H.Q. 1062-3-19

## ROYAL CANADIAN AIR FORCE

## MOVEMENT ORDER

1. Name WRIGHT, WILLIAM ALBERT Date September 13th, 1940  
 No. R.74,061 Rank A.C.2 Trade Airframe Mechanic Metal Std.  
 Unit or Station of Origin R.C.A.F. Recruiting Centre, 90 O'Connor St., Ottawa, Ontario

2. INSTRUCTIONS No. 1 Manning  
 you are to proceed to Depot, Toronto on Sept. 13th 1940, 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 E. L. O'Leary  
 Rank for (E.L. O'Leary) Flying Officer,  
Commanding Officer,  
R.C.A.F. Recruiting Centre,  
90 O'Connor St., Ottawa, Ont.

Acknowledged

(Signature of Bearer) Berk Wright Appointment.....

## 3. TRANSPORTATION ARRANGEMENTS

(a)

Warrant Nos.	Date	From	To	Via	Berth Issued	R.R.
1. 32843	Sept. 13	Ottawa,	Toronto	Rail	-----	C.N.R.
2.						

Your train leaves Ottawa, Ontario at 23.45 hours Sept. 13th 1940  
 (Place) (Time) (Date)

Change trains at ..... arriving Toronto at 07.50 hours Sept. 14 1940  
 (Place) (Destination) (Time) (Date)

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 R.C.A.F. R. 13 4 A.F.M. 23  
 2 R.C.A.F. R. 44a 5 M.F.M. 5  
 3 M.F.B. 313b 6 .....

## 6. UNIT REMARKS

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

..... Adjutant

..... Rank

..... Unit

One copy only of this Form is to be prepared and forwarded to the new Unit in the possession of the individual concerned for his information and guidance. The C.O. of the new Unit will compare the R13 with other documents to ensure that there is no discrepancy in date of arrival and, after completing para. 6, place the Form on the individual's file.



AGREEMENT

SPECIAL RESERVE

From: WRIGHT, WILLIAM ALBERT  
To: Commanding Officer,  
R.C.A.F. Recruiting Centre,  
90 O'Connor St., Ottawa, Ontario

1. In the event of my being accepted for enlistment in the Royal Canadian Air Force, I agree to the following conditions of service:

- (a) That I will be liable to be called upon to perform duties not directly or indirectly connected with the trade in which I have applied, i.e. ....  
..Airframe.Mechanic.Metal.Std.,.....  
until such time as the R.C.A.F. is in a position to employ or train me in said trade.
- (b) That I will be required to pass the prescribed examinations and tests before an R.C.A.F. Trade Test Board before I will become eligible for re-mustering to a higher trade group.
- (c) That in the event of my being found unsuitable by R.C.A.F. authorities for employment or training in the above mentioned trade, I am liable to be re-mustered to another trade.

2. I have carefully read this agreement, and fully understand it to be in addition to the agreement in the attestation paper that it will be necessary for me to sign if I should be attested.

M. Salmon  
(Witness)

Bert Wright  
(Signature of Applicant)

September 13th, 1940  
(Date)

September 13th, 1940  
(Date)







CONFIDENTIAL

ROYAL CANADIAN AIR FORCE

R.C.A.F.M. 10  
10M-2-40 (3938)  
H.Q. 1062-10-10

THIS ENVELOPE CONTAINS THE MEDICAL RECORDS OF:—

Name WRIGHT Chrn. Names W.A.

Official No. R74061 Rank Sgt

TABLE 1—CONTENTS. All documents on insertion are to be entered below.

Date	Form No.	Encl. No.	Date	Form No.	Encl. No.	Date	Form No.	Encl. No.	Date	Form No.	Encl. No.
<del>4/40</del>	<del>313A</del>	<del>1</del>									
	<del>MFM 454</del>	<del>2</del>									
	<del>LF 59</del>	<del>3 (2)</del>									
<del>5-8-42</del>	<del>M 2</del>	<del>4 (2)</del>									
31.7.40	313B	1									
14.11.41	MFM 454	2									
18.6.42	LF 59	3									
31.7.42	M 2	4									
24.4.44	M 2	5									
18.8.44	M 54	6									

TABLE 2—MEDICAL CATEGORY. Each entry to be SIGNED by the Medical Officer.

Date of Exam.	Category	Signature of Medical Officer	Date of Exam.	Category	Signature of Medical Officer
4-3-43	A1B A3B T	<i>J. J. [Signature]</i>			
24.11.44	A1B A3B T	<i>Reg. [Signature]</i>			

A1B		N.V.C.
A3B	Turret	N.V.C. 27
A3B		N.V.C.
A3B	Vision	
A3B	Radio	
Sig:		
Date		

R74061

RIGHT, W.A.

C. WRIGHT, W.A. R74061

MAR 16 1943

20

51

P





MEDICAL HISTORY OF

SURNAME WRIGHT CHRISTIAN NAMES WILLIAM ABBERT

TABLE I.—General Table

Birthplace { Town PEMBROKE Province ONTARIO
Examined { on 31 TH day of JULY 19 40 at 38 Rideau Street Ottawa Ontario
Declared age 18 years 61 days
Apparent age 19 years
Trade or occupation Welder
Height 5 feet 6 1/2 inches Weight, stripped 119 lbs.
Colour of Hair 27 Brown Complexion med
Eyes Green
Chest Measurement { Girth when fully expanded 34 inches Range of expansion 2 inches
Physical development fair (Good, fair or poor)
Vaccination marks { Arm Right Left Number 0 0
When vaccinated never
Vision { R.E.—V 20/20 With Glasses { R L L.E.—V 20/20
Hearing, R. ear W.V. 20 L. ear W.V. 20
Identification marks, such as Tattoo, Moles, Scars, etc.— Brown discoloration on R. buttock near R. chest
Defects or ailments:— Dental Count 26 Points 14 Signs of early rickets in chest wall

TABLE III.—Boards, Courts of Enquiry, Vaccination, Inoculations, etc.; Examinations for Field or Foreign Service; Extension, Re-engagement, or Prolongation of Service; Issue of Surgical Appliances, Glasses, etc.

Table with columns DATE and BRIEF DETAILS AND SIGNATURES. Contains handwritten entries for vaccinations (TAB I, II, III, Comp, S.F. 1-5), tests (Dick, Schick), and medical exams (OCT 29 1942 Annual TABT 1/2cc, 4-3-43 Category AIB, 14-10-43 Annual TABT 1/5cc).

Examined and found—
FIT FOR CATEGORY A B C
(Strike out those which do not apply)

Signature J. Danby
(Rank) Maj R. O'Connell

Enlisted or appointed { at RCAF Rec. Centre, Ottawa, Ont. on 13th day of Sept. 19 40

Table with columns Joined on enlistment or appointment, CORPS (No. 1 Manning Depot, Toronto), REGTL. No., and Transferred to.

TABLE IV.—Service Table

Table with columns Station or Troopship, Date of Arrival or Embarkation, Date of Departure or Disembarkation, and Became non-effective by.









CANADIAN MEDICAL SERVICES  
REPORT OF RADIOLOGICAL EXAMINATION

Reg. No. R74061 Unit.....  
Rank AC-2 Corps..... Quar  
Name HA Wright Film No. 1188

Report of Radiological examination of:

*Post Flu Chest*  
*Descending bronchi to left lower lobe*  
*show thickening - check left base for early*  
*pneumonia*

Station St Thomas  
Unit.....  
Date Jan 14/41 M. Howell R/O.  
Radiologist



**CONFIDENTIAL**

R.C.A.F. M. 2  
300M-4-41 (87)  
H.Q. 1062-10-2

# ROYAL CANADIAN AIR FORCE

73-8

FILE NUMBER

Medical Board held at No. 6 R.D. Trenton, Ont. Date 31/7/42

R74061

Surname Wright Chr. Names William Albert  
 Nature of Commission ..... Date of Birth 11/6/22 Married or Single Single  
 Branch ..... Hours Flown 2 hrs dual  
 Address Box 196 Pembroke, Ont.

HAVE YOU ANY HISTORY OF:-

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

Education 2 years high school, 1 year commercial school  
 Present Occupation A.F.M. Hobbies Photography, model aeroplanes  
 Previous Service 2 years non-person active military  
 Athletics softball, running, hockey  
 Habits—Smoking Moderately Alcohol no  
 FAMILY HISTORY—Consumption no Diabetes no Haemophilia no  
 Nervous Ailments, Mental Trouble, or "Fits" no  
 Father Alive—Health good Dead—Cause .....  
 Mother Alive—Health good Dead—Cause .....  
 Brothers (.O) Alive—Health good (.1) Dead—Cause not known  
 Sisters (.1) Alive—Health good (.1) Dead—Cause stillborn

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 accepted for Service, or if accepted, of being discharged or retired and forfeit any claim to gratuity or other award.

Date 31/7/42 Signature Wright W.A. Witness A. L. Purdon F/O

(4) (1)



GENERAL MEDICAL AND SURGICAL EXAMINATION

Impression given by (a) Physique *Athletic* (b) Mentality *Average*  
 Body Marks, Scars, Deformities *Linear scar on rt cheek, mole on buttock*  
 Size of Thyroid Gland *not palpable*  
 Surgical Abnormalities *none*  
 Results of Wounds, Injuries, Operations *none*

	Date <i>3/7/42</i>	M.S.B. Date <i>4/3/43</i>	Date	REMARKS ON ANY ABNORMALITIES FOUND
Height (ins.)	<i>67</i>	<i>67</i>		Date.....
Weight (lbs.)	<i>135</i>	<i>126</i>		
Chest Circumference (ins.)	<i>33</i>	<i>-</i>		
Body Build (lbs.)	<i>-</i>	<i>-14</i>		
LEG LENGTH (ins.)	<i>41</i>	<i>-</i>		
Pulse Rate	(Sitting) <i>84</i>	<i>84</i>		Date <i>3/7/42</i>
	Standing 1st <i>84</i>	<i> </i>		
	Standing 2nd <i>84</i>	<i> </i>		
	After Exercise <i>108</i>	<i> </i>		
	Time to Normal <i>30 secs</i>	<i> </i>		
Arterial Walls	<i>soft</i>	<i>soft</i>		Date <i>3/7/42</i>
Blood Pressure	(Systolic) <i>125</i> (Diastolic) <i>75</i>	<i>118</i> <i>60</i>		
Room Temperature		<i>warm</i>		<i>soft mitral systolic murmur.</i> <i>Q.R.P.</i>
Heart	(Size in cms.) <i>Normal</i>	<i>N</i>		
	Sounds <i>Mitral Syst.</i>	<i>Mitral syst.</i>		
	Rhythm <i>Reg.</i>	<i>Reg.</i>		
Lungs	Inspection <i>Normal</i>	<i>Clear</i>		Date.....
	Palpation <i>N</i>	<i> </i>		
	Percussion <i>N</i>	<i> </i>		
	Auscultation <i>N</i>	<i> </i>		
	Expiratory Force <i>N</i>	<i> </i>		
Reflexes	Knee <i>Normal</i>	<i>N</i>		Date.....
	Ankle <i>N</i>	<i>N</i>		
	Triceps <i>N</i>	<i>N</i>		
	Abdominal <i>N</i>	<i>N</i>		
	Plantar <i>N</i>	<i>Flex</i>		
Cranial Nerves		<i>N</i>		Date.....
Balancing Rod	R. L. <i>-</i>	R. L. <i>-</i>	R. L.	
Self Balancing	R. L. <i>-</i>	R. L. <i>1/4 2/4</i>	R. L.	
Tremors	Fingers <i>no</i>	<i>we</i>		Date.....
	Eyelids <i>no</i>	<i>we</i>		
Abdomen	Liver <i>Normal</i>	<i>N.P.</i>		Date.....
	Spleen <i>N</i>	<i>N.P.</i>		
	Muscular Tone <i>N</i>	<i>good fair</i>		
Urine	Albumen <i>neg</i>	<i>neg</i>		Date.....
	Sugar <i>neg</i>	<i>neg</i>		

Initials of M.O. *Q.R.P.*

40 mm. Hg. Test *40 sec = 688/888/888* *Q.R.P.*

Date *4/11/43* : *7/7 9/10/998/867/87 = 174 sec - 1st try* (1) *Ref.*

Date.....

Date.....

Date.....



EYE EXAMINATION

History None Mr. J. J. Taylor

Visual Acuity { R.  $\frac{20}{15}$ ,  $\frac{-2.50}{C}$  = blur R  $\frac{20}{20}$   $\frac{+2.50}{C}$  =  $\frac{20}{20}$   
 L.  $\frac{20}{15}$ ,  $\frac{-2.50}{C}$  = blur L  $\frac{20}{20}$   $\frac{+2.50}{C}$  =  $\frac{20}{20}$

Colour Vision N. Ishihara N. (I.P. 24)

Red, Green isophoric Mild soft Exo. RT hyper. 15 mi Exo 13 RT hyper 12

Diaphragm Test (P.D. = 6.6) Bar. P.D. 6.8 Bar at 3

Convergence { C. = 6 cms. 6  
 S. C. = 8 cms. 13

Accommodation { R. 7 9  
 L. 7 9

Cover Test No latency RT soft H at 15 mi. W. D. D. D.

Fundi and Media Normal N MM

Fields Normal N

REMARKS: Fit Bordeline A, B Fit A, B

Initials of M.O. A.P.P. Initials of M.O. J.M. Initials of M.O. \_\_\_\_\_  
 Date 31/7/42. Date Mar 4/43 Date \_\_\_\_\_

EXAMINATION OF EAR, NOSE AND THROAT

History None Mr. J. J. Taylor

Hearing { R. Ear W.U. - 20 ft W.U. 20 ft  
 L. Ear W.U. - 20 ft. W.U. 20 ft

External Ear, Meatus Membranes { R. Ear Normal N  
 L. Ear Normal N

Middle Ear, Eustachian Tubes { R. Ear Patent Pat.  
 L. Ear Patent Pat.

Cochlear Apparatus { R. Ear \_\_\_\_\_  
 L. Ear \_\_\_\_\_

Vestibular Apparatus { R. Ear \_\_\_\_\_  
 L. Ear \_\_\_\_\_

Buccal Cavity Normal N

Teeth Caries Present good

Gums Normal N

Pharynx N N

Nasopharynx N N

Nose N Clear

Larynx N. N

REMARKS: Fit Initials of M.O. A.P.P. Initials of M.O. J.M. Initials of M.O. \_\_\_\_\_  
 Date 31/7/42. Date 4-3-43 Date \_\_\_\_\_



GENERAL REMARKS BY THE MEDICAL OFFICER ON HIS IMPRESSIONS OF THE CANDIDATE

Fit for aircrew A1B, A3B

G. H. Purdon P.D.

A1B		N.V.C.	27
A3B	Turret	N.V.C.	
A3B		N.V.C.	
A3B	Vision		
A3B	Radio		
Sig:	<i>[Signature]</i>		
Date	5/1/43		

OBSERVATIONS AND FINDINGS OF THE REVIEWING MEDICAL OFFICER

Date..... *Bordulini A1B* 4/Mar/43

IT: A1B  
A3B - TURRET  
~~A3B - VISION~~

ROYAL CANADIAN AIR FORCE  
MEDICAL SERVICE BOARD  
G.I.T.S. R.C.A.F. TORONTO  
MAR 4 1943  
J. J. [Signature] / PRESIDENT

Sedentary physique, rather flabby, underweight.  
Fairly alert lad; somewhat unemphatic, & haphazard in attitude. Stable and mature, notwithstanding is on the vague side. Not impressive.  
# 5 P.O. G. P. [Signature]

N. VISION	27/32 (above average)
E. E. G.	
E. C. G.	
D. CHAMBER	NORMAL



3

DEPARTMENT OF HEALTH  
ONTARIO

MICRO EXAMINATION FOR NEISSERIAN INFECTION

This report is based upon Morphological Examination only

Form L.F. 59 5M-11-41.

Lab. No.	Patient	Typical Gonococci	Suspicious extracellular diplococci	Pus cells	Epithelial cells
6241	R.74061	-	-	+++	+
<p><i>Wright (test of pH)</i></p>					

New cases of gonorrhoea infection must be reported on Form VI to the Department of Health, Parliament Buildings, Toronto.

(See note on reverse side.)

3 Typed *ME*  
 Checked *L.M.*  
 Toronto *June 18 1942*

*A. L. MacNabb*  
 Director of Laboratories.



This report is based upon morphological examination only.

The number of pus cells and epithelial cells will be reported as follows:—

+ = Few present. (An average of one to three cells per microscopic field.)

++ = Moderate number present. (An average of four to six cells per microscopic field.)

+++ = Large number present. (An average of more than six cells per microscopic field.)

The failure to find typical intracellular gonococci in smears does not necessarily exclude gonorrhoea.

If suspicious symptoms continue, repeated confirmatory smears should be sent.

In the case of female patients, such repeated smears should be taken from the urethra, cervix and Bartholinian glands.







This report is based upon morphological examination only.

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If suspicious symptoms continue, repeated confirmatory smears should be sent.

In the case of female patients, such repeated smears should be taken from the urethra, cervix and Bartholinian glands.



67 OTJ 14/8

Confidential

ROYAL CANADIAN AIR FORCE

R. C. A. F. Form 5000

75M.4.43 (3187)

H. Q. 885-5000

SURNAME *Wright*

6156  
CHRISTIAN NAMES *William Albert*

NUMBER *R ~~74061~~* RANK *Lac*

This envelope is to be used for the transfer of  
TRAINING REPORT FORMS.

INSTRUCTIONS FOR USE

1. This envelope will be issued at the beginning of aircrew training.
2. It will go forward with the pupil to each successive School or stage of training.
3. At each School, one copy of the appropriate Report Form will be added to the enclosed documents and the necessary entry made on the reverse of the envelope (see over).







ROYAL CANADIAN AIR FORCE

REPORT OF MEDICAL RE-EXAMINATION

1. Surname WRIGHT Christian Names William Albert  
 2. Home Address 161 McKay St. Pembroke Ont Unit #9 B+C  
 3. Number R 74061 Rank Sgt  
 4. Age 21 yrs. Trade or Appointment Pilot  
 5. Reason for Examination B-2. Annual  
 6. Height 66 3/4 ins. Weight last exam. 126 (date) 4 Mar/43 Weight (present) 125  
 7. Flying History: Total Dual 140 Solo 200 Since last examination all  
 8. Crashes: Brief notes of any crashes, describing fully any injuries sustained by examinee. Nil  
 9. Air Sickness Record Nil  
 10. Medical History since previous examination Nil

11. Heart mitral systolic murmur - increased by exercise *Suggestion of a thrill at apex*  
 Blood pressure: Systolic 130 mms. Diastolic 70 mms. Pulse Pressure 60 mms.  
 Pulse rate, sitting 84 Exercise tolerance test (when indicated) NA

12. Lungs clear  
 13. Fatigue Test

14. Eyes: Vision—Without R 20/20 With R. NA With R 20/20  
 glasses L 20/20 glasses L NA + 2.50 L 20/200  
 Response of pupils to light N Cover Test S.L.D.-R.R.  
 Convergence C 6 cm. S.C. 14 cm. Accommodation R 9 cm. L 9 cm.  
 Maddox Rod Esso 2 Diaphragm 68 bar thru 5 at 1

15. Ears N  
 Hearing: Rt. 20 ft. Lt. 20 ft.  
 External canal and membrana tympani: Rt. N Lt. N

16. Nose clear  
 17. Mouth and Throat: Teeth satisfactory Tonsils satisfactory  
 18. Urinalysis (doubtful cases) NA

19. Former Category A, B, A & B 17 Present Category

20. REMARKS: This airman should have further cardiac investigation before final categorization  
*Ernest E. ...*  
 Medical Officer.

FIT AIRCREW	AIRCREW TRADE
A1B <u>✓</u>	<u>pilot</u>
A3B(T)	
A3B	
A3B(V)	
Unfit Aircrew	

Place #9 B+C  
 Date 24 April /44



1944 A.C.  
100-100-100  
100-100-100

ROYAL CANADIAN AIR FORCE



SERVICE

AND

PAY BOOK

THIS BOOK IS THE PROPERTY OF THE  
ROYAL CANADIAN AIR FORCE AND  
SHOULD BE KEPT IN A SAFE PLACE



# 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.

1 2/3 MB.K.  
24-12-44

Air Force No. R74061 Surname WRIGHT  
Christian Names (in full) WILLIAM ALBERT  
Date of Birth 11 JUNE 22 Religion U.C.  
Date of Enlistment/Appointment 13 SEPT 40  
Married (M), Widower (W) or Single (S) married  
Occupation in Civil Life welder

Signature of Holder Wright W.A.

Name and Address of Next-of-Kin

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

Mrs W.A. Wright (wife)  
161 2nd Ave. N.Y.  
Cambridge,  
Ontario

Certified Correct M. Steeves P/O  
Date 1/2/44 Place #1 Depot











**IMMUNIZATION PROCEDURES  
VACCINATION**

Date	Result	Initials of M.O.
16-7-40 11-10-44	Bunny Taka Positive	Y 7/10

Susceptibility Test	Date	Result	
Schick Test	4-7-41	R <sub>03</sub>	S
Dick Test	4-7-41	R <sub>02</sub>	

**PROTECTIVE INOCULATIONS\***

Nature of Inoculation	Date	Dose	Initials of M.O.
Scarlet fever inoculations	1-2-41		S
Diphtheria Inoc.	Completed		S
T.A.B.T.	Completed	2-4-41	S
Annual T.A.B.T.	Oct 12-43		Y
B/W -	Negative	27-7-43	Y

**IMMUNIZATION PROCEDURES—Con.**

Nature of Inoculation	Date	Dose	Initials of M.O.
T.A.B.C.	9-10-44	.25cc.	R.S. } 61.
A.T.T.	9-10-44	1.00 cc.	R.S. } 61.
TYPHUS	29-10-44	1cc.	R.Y.F. F/L
TYPHUS	8-11-44	1.0cc.	R.Y.F. F/L
TYPHUS	16-11-44	1cc.	R.Y.F. F/L

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











## WILLS

1. The particulars of the next-of-kin should always be carefully inserted in the Form on page 1 of this Book, but the Officer or Airman must understand that the entries made there have no legal effect with respect to the disposition of his estate in the event of his death and therefore do not relieve him from the necessity of making a Will. Unless an Officer or Airman duly makes a Will, his estate is dealt with in the same manner as that of any other person who dies without leaving a Will, and not only may the relative or person desired or intended to be benefited receive little or no share of the estate but the distribution thereof is delayed until such of the next-of-kin as may be legally entitled can be located. Therefore, though his estate may consist of no assets other than the amount of pay and allowances at credit and the belongings he has on his person or in camp, it is urgent that he make a Will which, when completed, is left with his Commanding Officer for transmission to the Records Office for safe custody and in the event of his death is forwarded firstly, to the Estates Branch, Department of National Defence, Ottawa, for administration and distribution of the Service estate, and secondly, if other assets (including real estate) make it necessary, to the Executor named in the Will.

2. The Officer's or Airman's Will should preferably be made out on the Will Form—R.C.A.F. R. 60 (English) or R.C.A.F. R. 60A. (French)—provided for that purpose and on which are also printed a number of helpful instructions. These Forms are obtained through the Commanding Officer of each Unit. A separate sheet of paper may be used but in such case the general form of the Will as shown in the Form R.C.A.F. R. 60 or R. 60A. should be carefully followed. The Officer or Airman will date the Will and at the bottom of it sign his name in the presence of two witnesses who at the same time in the presence of each other and of the Officer or Airman will also sign their respective names. If the Officer or Airman cannot write, he will make his mark in the place in the Will where his signature would ordinarily appear, and immediately above their signatures on the Will the witnesses will write a memorandum as follows:—"The above Will has been first duly and audibly read over to this Officer or Airman when he appeared

to understand it and made his mark hereto in our presence as aforesaid". In such cases, however, it is recommended that the guidance of the Officer's or Airman's immediate superior Officer be obtained.

3. The Short Form of Will (see pages 15 and 16 of this Book) may be used by an Officer or Airman on Active Service but it must be entirely in his own handwriting. It is pointed out, however, that under the laws of some of the Provinces of Canada, such a Will is ineffective as to real estate. Therefore an Officer or Airman having a Canadian domicile and owning real estate should use the Will Form R.C.A.F. R. 60 or R. 60A., and appoint therein a responsible executor. An Officer or Airman having a domicile out of Canada should not use the Short Form on page 16 because it may not comply with the law of such domicile.

4. No person who receives any benefit under a Will can be a witness. If a person to whom an Officer or Airman intends to give any part of his estate is a witness of the Will, he will not be allowed to receive the intended gift. He may, however, be appointed an executor.

5. When making a Will it is not desirable that alterations be made in it. If, however, alterations are made by the Officer or Airman in his Will, he and the two witnesses must write their initials in the margin opposite the alterations. Any changes in the provisions of a previously made Will can always be made by a new document called a Codicil which should refer to the previously made Will and then state the changes desired, and be dated and signed and witnessed in the same manner as the Will itself.

6. A completely new Will can at any time be made and in such case it revokes, or cancels, any Will of earlier date. The laws of all the Provinces of Canada except one, and of most English speaking countries provide that marriage after the date of a Will revokes that Will. Therefore, an Officer or Airman, immediately upon his marriage, should make a new Will in order that, in the event of his death, his estate may be distributed in accordance with his wishes as shown in his Will.

7. The Will of an Officer or Airman on Active Service is not invalid by reason that at the date it was made he was under the age of 21 years.



An Officer or Airman who has made a Will before his enlistment, is recommended to inform his Commanding Officer where such Will has been deposited and the Commanding Officer shall upon receipt of such information forthwith complete the following certificate and despatch the same to the R.C.A.F. Records Officer.

No..... Rank..... Name.....  
states that he has executed a Will and that the same has been deposited with.....  
at.....  
Signature of Officer.....  
Rank or Appointment.....  
Date.....

Before embarkation, each Officer or Airman is recommended, particularly those who have real estate, to consider the necessity for executing a document appointing some person or Trust Company his Attorney to manage or otherwise deal with real estate during his absence from Canada; also to review his affairs in the light of any changes that may have occurred since the date of his last Will and, if desirable, make a formal Will and inform his Commanding Officer thereof as indicated at the top of this page, or make a Will on R.C.A.F. R. 60 or R. 60A., and hand it duly completed to his Commanding Officer for transmission to the Records Officer concerned for safe custody.

The Officer receiving such Will shall complete the following certificate:—

Certificate R.C.A.F. R. 60 or 60A. received and forwarded to the R.C.A.F. Records Officer.  
Signature of Officer.....  
Rank or Appointment.....  
Date.....

Date Certificate extracted.....  
Signature of Officer.....

Unit.....  
To Whom sent.....

Solely for use on Active Service. The Will, on page 14, must NOT be used until you have been placed under orders for Active Service.

### SHORT FORM OF WILL

(Write Will on next page)

If an Officer or Airman on active service, or under orders, for active service, who has not previously made a Will, or who having previously made one, wishes to cancel it in its entirety or make some change in the disposal of his property, he may do so on the next page. **It must be entirely in his own handwriting and must be signed by him and dated.** The full names and addresses of the persons whom he desires to benefit, and the sum of money or the articles of property which he desires to leave to them, must be clearly stated. **The writing of the name of a person on the next page without stating what he or she is to receive is of no legal value.**

The following is a specimen of a Will leaving all to one person:—

In the event of my death I give all my estate to my mother, Mrs. Sheila Griffin, 711 Victory Street, Toronto, and appoint her my executrix.

(Signature)

GEORGE GRIFFIN,  
Sgt., R. 12345,  
R.C.A.F.

Date October 10th, 1942.

The following is a specimen of a Will leaving gifts to more than one person:—

In the event of my death, I give \$10.00 to my friend, Miss Rose Smith, of No. 1, High Street, London, and I give \$5.00 to my sister, Miss Margaret Griffin, 711 Victory Street, Toronto, and I give the remainder of my estate to my mother, Mrs. Sheila Griffin, 711 Victory Street, Toronto, and appoint my mother my executrix.

(Signature)

GEORGE GRIFFIN,  
Sgt., R. 12345,  
R.C.A.F.

Date October 10th, 1942.

To Whom sent.....  
Unit.....

Date Will extracted.....  
Signature of Officer.....



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.....





CASE SHEET (SPECIALIST REPORT)

Referred by:..... Date.....

No. R.74061 Rank Sgt Name WRIGHT, W.A.

Address.....

Unit or Ship No. 1 "Y" Depot (T) Trade Pilot {Class or Category Age 21

Referred to: S/L Townsend

History and Physical Findings (to be filled out by M.O. i/c case)

Opinion Requested Re:

Type of Case—Ambulatory, Wheelchair, Stretcher, Bed M.O. Signature.....

CONSULTANT'S REPORT

Hospital No. 3 C.M.B., Lachine, P.Q. Report No.....

X-Ray No.....

On routine B2 examination at No. 9 B & F, was found to have a mitral systolic murmur and suggestion of a thrill at the apex. He is referred for cardiac check-up before final categorization.

An effort has been made to contact this patient but he continues to be elusive.

This man was seen today, May 23rd, and there is a short systolic murmur which is probably dependent on a forcible apical thrust as much as anything. Not heard in left lateral position or sitting up. B.P. 130/80. There is no thrill.

Diagnosis No organic heart disease.

Is this man fit for his duty? Yes.

Recommendation None.

Date 18th May, 1944.

S.R. Townsend (S.R. Townsend) S/L Consultant in Medicine, No. 3 C.M.B., Lachine, P.Q. (Consultant's Signature)







REPORT ON PUPIL PILOT - FLYING AND GROUND TRAINING

Date of Birth:  
June 11th, 1923.

SURNAME..... WRIGHT ..... CHRISTIAN NAMES. William Albert ..... NUMBER. R.7,061 ..... RANK. LAG  
 I.T.S. No. 6 TORONTO ..... COURSE NO. 73 ..... FROM. Feb. 22nd, 1943 ..... TO. April 30th, 1943  
 E.F.T.S. #12 EFTS Goderich ..... COURSE NO. 80 ..... FROM. 3<sup>rd</sup> May/43 ..... TO. 25/June/43  
 S.F.T.S. No. 1 SFTS CAMP BORDEN ..... COURSE NO. .... FROM. .... TO. ....  
 TRAINEE FROM: CAN. XXX ..... U.K. .... AUS. .... N.Z. ....

(1) G. I. S. RESULTS

(2) FLYING RESULTS

SUBJECTS	Finals			Supps.			TESTS	EFTS	SFTS
	ITS	EFTS	SFTS	ITS	EFTS	SFTS			
1. Mathematics	66						20 Hours	66	
2. Law, Discipline	87						Instrument	69	
3. Navigation	91	112					Clear Hood	107	
4. General Studies							Navigation	39	
5. Airmanship	76	159					TOTAL OBTAINED	215	
6. Airframes							TOTAL POSSIBLE	300	
7. Aero-Engines							PERCENTAGE	71.7	
8. Theory of Flight							NUMBER IN CLASS	37	
9. Anti-Gas	24			31			POSITION IN CLASS	8	
10. Armament (Written)	44	44					(3) FLYING APTITUDE		
11. Armament (Practical)	43	42					1. Natural Skill	▲	
12. A/C Recognition	73	62					2. Skill in Landing	▲	
13. Drill	81						3. Airmanship	▲	
14. Signals (Written)	80	45			70		4. Cockpit Drill	▲	
15. Signals (Practical)	50						5. Instrument Flying	▲	
16. Meteorology	32						6. Night Flying	▲	
TOTAL OBTAINED	747	463		75			7. Aerobatics	▲	
TOTAL POSSIBLE	1000	700					8. Formation Flying		
PERCENTAGE	75	67.3					9. Map Reading	▲	
NUMBER IN CLASS	80	37					10. Wind Speed & Direction Finding (TE)		
POSITION IN CLASS	71	34					11. Straight Runs over as Pilot (TE)		

(4) FLYING TIME

School	Type AC	DAY		NIGHT		Formation	Instrument	Link	NAVIGATION		Dual to first Passenger Solo
		Dual	Solo	Dual	Solo				Dual	Solo	
#12 EFTS T. Moth		32.05	37.45	5.00			10.15	13.00	4.25	4.00	8.05

(5) ACCIDENTS (C.A.P. 100 Sec. 4)

School	Type of Aircraft Para. 27	Assessment of Blame Para. 25	Previous Communications	Signature of C.S.O. or C.F.I.



(6) ASSESSMENT OF SUITABILITY FOR FURTHER TRAINING

SCHOOL	SINGLE ENGINE	TWIN ENGINE	FLYING INSTRUCTOR	STAFF PILOT	RECONNAISSANCE PILOT	FIGHTER PILOT	BOMBER PILOT
E.F.T.S.	(P) A	A	A	A	A	A	A
S.F.T.S.							

(7) S.F.T.S. FINAL STANDING	(8) ASSESSMENT OF CHARACTER AND LEADERSHIP TOTAL	(9) CERTIFIED:
Marks Obtained		(a) That this pupil pilot has: (has not) passed all tests required for Pilot's Flying Badge.
Flying (Para. 3)	I.T.S. 94	(b) That this pupil is (is not) authorized to wear the Pilot's Flying Badge, w.e.f.
G.I.S. (Para. 1)	S.F.T.S.	.....
Character & Leadership (Para. 8)	TOTAL	.....
TOTAL		.....
PERCENTAGE		.....
STANDING IN CLASS		.....

Chief Instructor  
No. S.F.T.S.

*A. J. Hanchet-Taylor*  
(A.J. Hanchet-Taylor) Wing Commander,  
Commanding Officer,  
No. 6 I.T.S.



*H. King*  
Chief Sub-instructor,  
No. 12 E.F.T.S.

(10) SIGNATURES OF OFFICERS IN CHARGE - WITH REMARKS, IF NECESSARY

(a) I.T.S. Academically only fair, however he has applied himself well and is doing a good job of work. A personable trainee well liked by his associates and one who has a good deal of practical ability.  
Second Aircrew Recommendation: Air Bomber.

(b) E.F.T.S. 67  
Average student. Has average airmanship. Take-offs & landings average. Turns fair, slips & skids slightly at times. Judgement on forced landings average. Instruments fair, a little slow on recovery from unusual positions. Spins good. Rolls improving with practise. Tends to be overconfident & a little lax at times.

(c) S.F.T.S.

Chief Instructor  
No. S.F.T.S.

(d) S.F.T.S.

Commanding Officer,  
No. S.F.T.S.

NOTES ON USE AND DISTRIBUTION OF T. 58A

- Actual marks to be given for 1, 2, 7, and 8.
- Para. 2 - Total for E.F.T.S. is from 60 hour Clear Hood Test and Instrument Test only (omit 20 hour test in total).
- Paras. 3 and 6 to be assessed as: Ex., A.A. A., B.A., P. (A.F.A.C. A.51/2).
- Para. 5 - the letter "P", which is the pupil's preference for further training, is to precede the assessment, i.e. "P.(Ex.)".
- Para. 7 is for Service Flying Training Schools only.



R.C.A.F. - TRAINING REPORT

P I L O T

NO. 1 SERVICE FLYING TRAINING SCHOOL

1. SURNAME WRIGHT CHRISTIAN NAMES William Albert  
 2. NUMBER R74061 3. RANK LAC 4. COURSE NO. 84  
 5. POSTED FROM #12 E.F.T.S. 6. DATE COURSE COMMENCED June 28/43 7. DATE COURSE ENDED Oct. 15/43 8. POSTED TO #1 O.T.U.

9. GROUND EXAMINATIONS			10. FLYING TESTS		
SUBJECT			SUBJECT		
(A) AIRMANSHIP	200	106	(A) GENERAL FLYING	300	207
(B) ARMAMENT	200	142	(B) INSTRUMENT FLYING	200	140
(C) NAVIGATION	200	118	(C) NAVIGATION	150	94
(D) SIGNALS	200	147	(D) ARMAMENT	150	98
(E) AIRCRAFT RECOGNITION	100	89	(E) NIGHT FLYING	100	72
(F) METEOROLOGY	100	40	(F) FORMATION	50	35
			(G) LINK TRAINER	50	37
TOTAL	1000	642	TOTAL	1000	683
PERCENTAGE		64.2	PERCENTAGE		68.3

11. ASSESSMENTS OF QUALITIES OF CHARACTER AND LEADERSHIP	MARKS ALLOTTED	MARKS OBTAINED
	100	63.3

DEGREE OF SUITABILITY FOR FURTHER TRAINING	0 NOT AT ALL SUITABLE	1 MODERATELY SUITABLE	2 DEFINITELY SUITABLE	3 EXTREMELY SUITABLE
12. FOR BOMBER TYPE AIRCRAFT		X		
13. FOR FIGHTER TYPE AIRCRAFT			X	
14. FOR GENERAL RECONNAISSANCE AIRCRAFT	X			
15. FOR ARMY CO-OPERATION AIRCRAFT		X		
16. FOR FLYING BOATS		X		
17. AS A FLYING INSTRUCTOR	X			

(MARK " X " IN APPROPRIATE COLUMN FOR EACH)

18. IF A COPY OF THE O.T.U. REPORT FOR THIS PUPIL IS DESIRED, MARK HERE

19. REMARKS :- An average, keen pilot who is overconfident and unreliable.

DATE.....

SIGNED.....  
 COMMANDING OFFICER.











**PRESCRIPTION FOR SPECTACLES**

	Vision without Glasses	SPH	CYL	Axis Standard Notation	Vision with Glasses	Unit	Date of Exam.
R						Frame No. (or measurements)	Date of Issue
L							

Initials of M.O. ....

00

	Vision without Glasses	SPH	CYL	Axis Standard Notation	Vision with Glasses	Unit	Date of Exam.
R						Frame No. (or measurements)	Date of Issue
L							

Initials of M.O. ....

**DENTURES SUPPLIED**

Particulars	Date	Initials of Medical or Dental Officer

**SURGICAL APPLIANCES ISSUED**

Particulars	Date	Initials of M.O.

0







AIR FORCE No.

R74061

WRIGHT, WILLIAM ALBERT

SURNAME

FULL CHRISTIAN NAMES

ENLISTMENT

RE-ENLISTMENT

PLACE *Ottawa Ont*DATE *13-9-40*

C.R. FILE NUMBER

## RECORD OF SERVICE AIRMEN

R.C.A.F. FORM R44 (R)  
50M-10-40 (7885)  
H.Q. 1062-3-58

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

S.O.S. OR T.O.S.	UNIT AND PLACE	EFFECTIVE	D.R.O.
T.O.S.	1MD Toronto	14 9 40	1MD P221
S.O.S.	TTS St Thomas	31 10 40	1MD P260
S.O.S.	St Thomas	19 3 41	17567
S.O.S.	#6 bilcraft LD Trenton	20 3 41	6RD6Y
T.D.	Goderich, Pictou, Custer, Hastings, Paris, Bradford, Mt Hope	2/22 7 42	6RD15
T.D.	Toronto - 95F, St Catharines	2/30 7 42	6RD182
T.D.	Ottawa	1/2 8 42	6RD185
T.D.	11RC Toronto	4/7 8 42	6RD191
T.O.S.	6872 Kresba	22 11 42	6RD218
T.O.S.	23 VFC Toronto Ont	23 11 42	23PAE1
S.O.S.	23PAE8, Univ of Toronto	20 2 43	23PAE12
S.O.S.	6 JTS Toronto, Ont.	21 2 43	6JTSK2
S.O.S.	6 JTS Toronto	5 43	6JTS104
T.O.S.	128FFS Goderich Ont.	2 0 43	128FF60
T.O.S.	128FF Goderich	1 5 43	128FF64
T.O.S.	128FF Goderich	2 5 43	128FF66
S.O.S.	128FFS Goderich	26 6 43	128FF84
T.O.S.	15FFS Camp Borden	27 6 43	15FF52
S.O.S.	15715 Camp Borden	29 10 43	157248
T.O.S.	Y.T.V. Saguenay P.Q.	30 10 43	107U-263
S.O.S.	1054 Baginville	24 3 44	1054 60A
T.O.S.	9838 Mont Joli	24 3 44	9838 75
S.O.S.	9838 Mont Joli	8 5 44	9838 98
	14D Lachine		

## 2. RECLASS'NS-PROMOTIONS-ETC.

RANK	EFFECTIVE	D.R.O.
AC 2	13 9 40	7MD P221
AC 1	15 3 41	6RD84
2/Lt	1 10 41	6RD237
1/Sgt (P.O.)	15 10 43	157248

## 4. TRADE AND CHARACTER

TRADE	GROUP	EFFECTIVE	D.R.O.
A.F.M. (Comp)	13	9 40	7MD P221
A.F.M.	C	15 3 41	17567
A.F.M.	B	1 10 41	6RD233
A.F.M.	B	30 9 41	6RD238
A.F.M.	A	1 1 42	6RD10
A.F.M. (Voc)	A	22 11 42	6RD278
A.F.M. (Voc)	A	22 11 42	23PAE8
A.F.M. (Voc)	A.S.	30 4 43	6JTS104
H.R.P.I.	SC	15 10 43	157248

## 6. LEAVE

FROM	TO	DAYS	REMARKS	D.R.O.
14-4-41	21-4-41	7		6RD85
1-8-41	4-8-41	3		6RD181
1-4-41	5-9-41	4		6RD184
7-4-42	12-4-42	5		6RD92
10-7-42	14-7-42	9		6RD153
13-2-43	20-2-43	8	Special	23PAE12
15-10-43	29-10-43	14	Special	157248
30-1-44	12-2-44	14	Special	107U29
12-3-44	24-3-44	13	Special	105460A
25-4-44	9-6-44	16	Combar	983898

## 3. MEDICAL HISTORY

## EXAMINATIONS (IN RED INK)

DATE	FORM	CATEGORY	REMARKS

## HOSPITALIZATION (IN BLACK INK)

HOSPITAL	ADMITTED	DISCHARGE	D.R.O.

QUARTERS	CONFINED	RET'N DUTY

## 5. COURSES-TESTS-ETC.

SUBJECT	RESULT	DATE	AUTHORITY
A.F.M.	B	30 3 41	TTS-TT
A.F.M.	B	30 4 41	6RD (C)
A.F.M.	B	65 P 21 7 41	6RD (C)
Qual for rem to 6 JTS	B	1 1 42	6RD191
Qual for rem to 6 JTS	B	1 1 42	6RD265
A.F.M. (Voc)	A	22 11 42	6RD10 (C)

OVERSEAS

ENLISTMENT

MARRIAGE

RESERVE

MILITARY SERVICE

HIGH &amp; TECH

SCHOOL EDUCATION

RELIGION

PROVINCE OF ENLISTMENT

DISCHARGE

AC



AIR FORCE No.

R74061

Wright, William Albert

SURNAME

FULL CHRISTIAN NAMES

ENLISTMENT

PLACE Ottawa Ont

DATE 13-7-40

RE-ENLISTMENT

C.R. FILE NUMBER

## RECORD OF SERVICE AIRMEN

R.C.A.F. FORM R. 44 1F

7. BIRTH: DATE 11-6-22 PLACE Pembroke Ont CITIZENSHIP British  
 FATHER (FULL NAME) Harold Hutchinson Wright  
 BIRTHPLACE Pembroke Ont  
 MOTHER (FULL MAIDEN NAME) Eva Luella Gordon

BIRTHPLACE Renfrew Ont

8. EDUCATIONAL STANDING  
 HIGH SCHOOL ENTRANCE Ont  
 JUNIOR MATRICULATION 3 yrs Ont  
 SENIOR MATRICULATION  
 TECHNICAL SCHOOL Fall Aircrafts <sup>sheet metal</sup> <sup>welding</sup>  
 UNIVERSITY  
 CORRESPONDENCE COURSES

9. CIVIL OCCUPATIONS OR EXPERIENCE USEFUL TO R.C.A.F.  
 Welding Jan 5 1940

10. PREVIOUS ARMY, NAVY OR AIR FORCE SERVICE  
 Lennox & Renfrew Scottish Rgt Bde  
 15-4-39 - 18-7-40

11. HONOURS-AWARDS, MENTIONS  
 A.P.O.S. Flying Badge 157248 15-10-43  
 C.W. & M. ribbon 127113 15-1-44

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

13. RELIGION United Church

14. LANGUAGES

15. SPORTS woodworking, rugby, hockey, skiing, skating

16. SINGLE-MARRIED-WIDOWER-SEPARATED-DIVORCED: Single  
 WIFE (FULL MAIDEN NAME) Mary Margaret Fortin  
 PLACE OF MARRIAGE Pembroke, Ont DATE 23 Oct 1943  
 AUTHORITY (IF AFTER ENLISTMENT) 1074264

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: Harold Wright RELATIONSHIP Father  
 ADDRESS: Pembroke 111 Pembroke Ont Box 116 D.R.O.  
 FULL NAME: Mrs. W. A. Wright RELATIONSHIP Wife  
 ADDRESS: Pembroke 57 Pembroke Ont Box 116 D.R.O. 1074264

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

RATE CHANGES ETC.	EFFECTIVE	D.R.O.	RATE CHANGES ETC.	EFFECTIVE	D.R.O.
Profits pay (4. W. & Schupps)	21 7 41	6RD173			
Profits pay (2. W. & Schupps)	18 8 41	6RD198			
Profits pay (2 days)	27 12 41	ER08			
Profits pay (1 day)	22 1 42	6RD36			
Profits pay (3 days)	13 2 42	6RD55			
disallowed	166	6RD132			
P.O.	10 7 42	6RD215			

21. ENGAGEMENTS

TERM	EFFECTIVE	D.R.O.	TERM	EFFECTIVE	D.R.O.
duration	13 9 40				

22. TEMPORARY DUTY AND MISCELLANEOUS ENTRIES

FROM	TO	DATE	D.R.O.
Occupying Gov't. Dros-drawing room		19-3-41	6RD68
Issued S.L.T.W. # C.508107		20-12-41	6RD303
S.L.T.W. C.45458		17-12-42	23PA56

23. DOCUMENT CONTROL (INDICATE RECEIPT BY DATE)

R60	R79	B465	X-RAY	AFM-13	ICN CARD
8-10-40	MAY 10 1940	18-9-60			KX m 2/15



AIR FORCE No.

R 74061

Wright

William Albert

ENLISTMENT/APPOINTMENT

RELIGION

PLACE Toronto, Ont.

DATE 13 Sept. 40

M.C.

R.C.A.F. FORM 4850

TYPE OF LEAVE				TYPE OF AIRCRAFT ON WHICH MOST PROFICIENT		POSTINGS, ATTACHMENTS & TEMPORARY DUTY				ALL OTHER CASUALTIES		
FROM	TO	NO. DAYS	DESCRIPTION	AUTH.	IF UNDER INSTRUCTION STATE NUMBER OF HOURS ON EACH TYPE AND TESTS PASSED	SOS TOS	FROM	TO	DATE	AUTHORITY	CASUALTY AND DATE	AUTHORITY
14-4-41	21-4-41	7				S. OS	R.C. Ottawa #177	Toronto	19 9 40	MOR 13	Perfected by 240 days from	DRO 193
1-8-41	4-9-41	3		DRO 181		S. OS	#177 TTS de Thomas		21 10 40	DRO 206	200 hrs 19-7-41 to 200 hrs 21-8-41	
1-9-41	5-9-41	4		DRO 184		S. OS	T.T.S. de Thomas G.R.D. Toronto		19 9 41	DRO 67	Perfected by unit 1 day	DRO 198
Special	SLTW #250817	d/20/12/41		DRO 302		S. OS	#6 R.D. Univ. of Toronto		22 11 42	DRO 278	Entitled to flying pay (1 day)	DRO 291
7-4-42	12-4-42	5		DRO 182		S. OS	#6 T.T.S. #12 E.F.T.S.		20 2 43	DRO 12	Entitled to flying pay (2 days)	DRO 8
10-7-42	19-7-42	9		DRO 182		S. OS	#12 E.F.T.S. #1 S.F.T.S.		26 6 43	DRO 24	" " " " (1 day)	DRO 36
13-2-43	20-2-43	8	Spec.	DRO 12, 13		S. OS	#1 S.F.T.S. #1 OTU		29 10 43	DRO 248	" " " " (2 days)	DRO 53
15-10-43	29-10-43	14	Spec. del.	DRO 248			Attached #1 S.F.T.S.		11 2 44	DRO 29	" " " " (1 day)	DRO 90
Special	SATW #206709	(19-10-43)		DRO 248			Spec. to be attached #1 S.F.T.S.		27 2 44	DRO 60	1. Ration Allow	DRO 97
20-1-44	12-2-44	14	Special	DRO 29			from London		28 2 44	DRO 60	2. Ration Allow	DRO 97
12-3-44	24-3-44	13	Special	DRO 60			Attached #2 OTU				3. Ration Allow	DRO 97
25 Oct 44	9 May 45	14	Embarkation	DRO 98			from attached #2 OTU		24 3 44	DRO 60 P.	4. Ration Allow	DRO 97
6 Feb 44	5/9/45	7	Embarkation				supporting #19-132 B.		24 3 44	DRO 60 P.	5. Ration Allow	DRO 97
24-4-44	19-6-44	7	Embarkation				SOS #19-132 B. #11 Vaching		24 3 44	DRO 98	6. Ration Allow	DRO 97
							awaiting Embarkation				7. Ration Allow	DRO 97
							TOS #9-81 B. #14 Sept		9 5 44	" 11/2/44	8. Ration Allow	DRO 97
							Emb. Halifax		25 5 44	" 135"	9. Ration Allow	DRO 97
							Assembl. U.K.		2 6 44		10. Ration Allow	DRO 97
							Int C 236. 3 PRC		2 6 44		11. Ration Allow	DRO 97
							Sight (MOR) Ann 3 PRC		14 7 44		12. Ration Allow	DRO 97
							SOS 3 PRC to 61 OTU		15 5 44		13. Ration Allow	DRO 97
							TOS 3 TEU p. 61 OTU		20 10 44		14. Ration Allow	DRO 97
							SOS 3 TEU #83 3. 11		27 11 44	3 TEU 29 13/12/45	15. Ration Allow	DRO 97
							S.L.S. 8325W to 434 B.		2 12 44	13/12/45	16. Ration Allow	DRO 97
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ADDITIONAL ENTRIES  
 IN THIS BOOK RETURNED  
 TO CANADA

Emb. 25. 5. 44.



AIR FORCE No.

R 74061

Wright

SURNAME

William Albert

FULL CHRISTIAN NAME

ENLISTMENT/APPOINTMENT

PLACE Toronto, Ont.  
DATE 13 Sept. 40

RELIGION

U.C.

R.C.A.F. FORM 8250  
150M-7-42 (2446)  
H.Q. 885-9-230ROYAL CANADIAN AIR FORCE  
RECORD OF SERVICE  
OFFICERS, AIRMEN AND AIRWOMEN

BIRTH DATE				PLACE	COUNTRY	CITIZENSHIP	RACIAL ORIGIN	PARTICULARS OF FAMILY						
11 June 22				Pembroke, Ont.	Canada	Canadian		SINGLE; MARRIED; WIDOWER; DIVORCED <i>Married.</i>						
CIVIL EDUCATION				PUBLIC SCHOOL				WIFE (FULL MAIDEN NAME) OR HUSBAND <i>Mary Margaret Fortin</i>						
JUNIOR MATRICULATION				HIGH SCHOOL ENTRANCE				PRESENT ADDRESS (IN PENCIL)						
SENIOR MATRICULATION				TECHNICAL SCHOOL				PLACE OF MARRIAGE <i>Pembroke</i> DATE <i>23.10.43.</i>						
UNIVERSITY				CORR./BUSINESS COURSES				AUTHORITY (IF AFTER APPOINTMENT/ENLISTMENT)						
CIVIL OCCUPATIONS AND EXPERIENCE								CHILDREN						
<i>Welder</i>								NAMES	PLACE AND DATE OF BIRTH	NAMES	PLACE AND DATE OF BIRTH			
								<i>Louise Lane</i>	<i>1.11.44 (43rd St)</i>					
PREVIOUS SERVICE								NAME(S), ADDRESS(ES), RELATIONSHIP OF PERSON(S) TO BE INFORMED OF CASUALTIES (IN PENCIL)						
<i>M1</i>								<i>Mrs W.A. Wright (Wife) 161 Mac Kay St. Pembroke, Ont.</i>						
PLACE AND DATE OF MEDICAL								EMPLOYMENT AS INSTRUCTOR OFFICER AIRMAN/AIRWOMAN						
CATEGORY								TYPE	FROM	TO	TYPE	FROM	TO	
PLACE AND DATE OF MEDICAL														
CATEGORY														
OFFICERS				AIRMEN AND AIRWOMEN				OFFICERS, AIRMEN/AIRWOMEN						
RANK, BRANCH AND CATEGORY	DATE	AUTH.	DUTIES PERFORMED DURING SERVICE, E.G. ADJ.	RANK	DATE	AUTH.	TRADE	DATE	AUTH.	COURSE OR TRADE	GRP	%	PF	DATE
				<i>AC2</i>	<i>13.9.40</i>		<i>AFM (M) dtd</i>	<i>13.9.40</i>	<i>TMP. 218</i>	<i>AFM (M) dtd</i>	<i>A</i>	<i>7</i>	<i>139</i>	<i>40</i>
				<i>AC1</i>	<i>12.3.41</i>		<i>AFM (M) e</i>	<i>15.3.41</i>	<i>155.64</i>	<i>AFM</i>	<i>C</i>	<i>P</i>	<i>153</i>	<i>41</i>
				<i>AC</i>	<i>1.10.41</i>		<i>AFM (M) M</i>	<i>1.10.41</i>	<i>600.270</i>	<i>AFM</i>	<i>B</i>	<i>P</i>	<i>110</i>	<i>41</i>
				<i>2/dgt</i>	<i>13.10.43</i>	<i>DRO 248</i>	<i>AFM M</i>	<i>30.9.44</i>	<i>600.286</i>	<i>AFM</i>	<i>A</i>	<i>84</i>	<i>P</i>	<i>1142</i>
				<i>AFM A</i>	<i>1.1.42</i>	<i>600.10</i>	<i>AFM A</i>	<i>1.1.42</i>	<i>600.10</i>	<i>AFM A</i>				<i>5211</i>
				<i>AFM A</i>	<i>1.1.42</i>	<i>600.10</i>	<i>AFM A</i>	<i>1.1.42</i>	<i>600.10</i>	<i>AFM A</i>				<i>5211</i>
				<i>AFM (M) dtd</i>	<i>15.3.41</i>	<i>155.64</i>	<i>AFM (M) dtd</i>	<i>15.3.41</i>	<i>155.64</i>	<i>AFM (M) dtd</i>				<i>504</i>
				<i>AFM (M) dtd</i>	<i>15.3.41</i>	<i>155.64</i>	<i>AFM (M) dtd</i>	<i>15.3.41</i>	<i>155.64</i>	<i>AFM (M) dtd</i>				<i>504</i>
				<i>AFM (M) dtd</i>	<i>15.3.41</i>	<i>155.64</i>	<i>AFM (M) dtd</i>	<i>15.3.41</i>	<i>155.64</i>	<i>AFM (M) dtd</i>				<i>504</i>
				<i>AFM (M) dtd</i>	<i>15.3.41</i>	<i>155.64</i>	<i>AFM (M) dtd</i>	<i>15.3.41</i>	<i>155.64</i>	<i>AFM (M) dtd</i>				<i>504</i>
				<i>AFM (M) dtd</i>	<i>15.3.41</i>	<i>155.64</i>	<i>AFM (M) dtd</i>	<i>15.3.41</i>	<i>155.64</i>	<i>AFM (M) dtd</i>				<i>504</i>
				<i>AFM (M) dtd</i>	<i>15.3.41</i>	<i>155.64</i>	<i>AFM (M) dtd</i>	<i>15.3.41</i>	<i>155.64</i>	<i>AFM (M) dtd</i>				<i>504</i>
				<i>AFM (M) dtd</i>	<i>15.3.41</i>	<i>155.64</i>	<i>AFM (M) dtd</i>	<i>15.3.41</i>	<i>155.64</i>	<i>AFM (M) dtd</i>				<i>504</i>
				<i>AFM (M) dtd</i>	<i>15.3.41</i>	<i>155.64</i>	<i>AFM (M) dtd</i>	<i>15.3.41</i>	<i>155.64</i>	<i>AFM (M) dtd</i>				<i>504</i>
				<i>AFM (M) dtd</i>	<i>15.3.41</i>	<i>155.64</i>	<i>AFM (M) dtd</i>	<i>15.3.41</i>	<i>155.64</i>	<i>AFM (M) dtd</i>				<i>504</i>
				<i>AFM (M) dtd</i>	<i>15.3.41</i>	<i>155.64</i>	<i>AFM (M) dtd</i>	<i>15.3.41</i>	<i>155.64</i>	<i>AFM (M) dtd</i>				<i>504</i>
				<i>AFM (M) dtd</i>	<i>15.3.41</i>	<i>155.64</i>	<i>AFM (M) dtd</i>	<i>15.3.41</i>	<i>155.64</i>	<i>AFM (M) dtd</i>				<i>504</i>
				<i>AFM (M) dtd</i>	<i>15.3.41</i>	<i>155.64</i>	<i>AFM (M) dtd</i>	<i>15.3.41</i>	<i>155.64</i>	<i>AFM (M) dtd</i>				<i>504</i>
				<i>AFM (M) dtd</i>	<i>15.3.41</i>	<i>155.64</i>	<i>AFM (M) dtd</i>	<i>15.3.41</i>	<i>155.64</i>	<i>AFM (M) dtd</i>				<i>504</i>
				<i>AFM (M) dtd</i>	<i>15.3.41</i>	<i>155.64</i>	<i>AFM (M) dtd</i>	<i>15.3.41</i>	<i>155.64</i>	<i>AFM (M) dtd</i>				<i>504</i>
				<i>AFM (M) dtd</i>	<i>15.3.41</i>	<i>155.64</i>	<i>AFM (M) dtd</i>	<i>15.3.41</i>	<i>155.64</i>	<i>AFM (M) dtd</i>				<i>504</i>
				<i>AFM (M) dtd</i>	<i>15.3.41</i>	<i>155.64</i>	<i>AFM (M) dtd</i>	<i>15.3.41</i>	<i>155.64</i>	<i>AFM (M) dtd</i>				<i>504</i>
				<i>AFM (M) dtd</i>	<i>15.3.41</i>	<i>155.64</i>	<i>AFM (M) dtd</i>	<i>15.3.41</i>	<i>155.64</i>	<i>AFM (M) dtd</i>				<i>504</i>
				<i>AFM (M) dtd</i>	<i>15.3.41</i>	<i>155.64</i>	<i>AFM (M) dtd</i>	<i>15.3.41</i>	<i>155.64</i>	<i>AFM (M) dtd</i>				<i>504</i>
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				<i>AFM (M) dtd</i>	<i>15.3.41</i>	<i>155.64</i>	<i>AFM (M) dtd</i>	<i>15.3.41</i>	<i>155.64</i>	<i>AFM (M) dtd</i>				<i>504</i>
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				<i>AFM (M) dtd</i>	<i>15.3.41</i>	<i>155.64</i>	<i>AFM (M) dtd</i>	<i>15.3.41</i>	<i>155.64</i>	<i>AFM (M) dtd</i>				<i>504</i>
				<i>AFM (M) dtd</i>	<i>15.3.41</i>	<i>155.64</i>	<i>AFM (M) dtd</i>	<i>15.3.41</i>	<i>155.64</i>	<i>AFM (M) dtd</i>				<i>504</i>
				<i>AFM (M) dtd</i>	<i>15.3.41</i>	<i>155.64</i>	<i>AFM (M) dtd</i>	<i>15.3.41</i>	<i>155.64</i>	<i>AFM (M) dtd</i>				<i>504</i>
				<i>AFM (M) dtd</i>	<i>15.3.41</i>	<i>155.64</i>	<i>AFM (M) dtd</i>	<i>15.3.41</i>	<i>155.64</i>	<i>AFM (M) dtd</i>				<i>504</i>
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				<i>AFM (M) dtd</i>	<i>15.3.41</i>	<i>155.64</i>	<i>AFM (M) dtd</i>	<i>15.3.41</i>	<i>155.64</i>	<i>AFM (M) dtd</i>				<i>504</i>
				<i>AFM (M) dtd</i>	<i>15.3.41</i>	<i>155.64</i>	<i>AFM (M) dtd</i>	<i>15.3.41</i>	<i>155.64</i>	<i>AFM (M) dtd</i>				<i>504</i>
				<i>AFM (M) dtd</i>	<i>15.3.41</i>	<i>155.64</i>	<i>AFM (M) dtd</i>	<i>15.3.41</i>	<i>155.64</i>	<i>AFM (M) dtd</i>				<i>504</i>
				<i>AFM (M) dtd</i>	<i>15.3.41</i>	<i>155.64</i>	<i>AFM (M) dtd</i>	<i>15.3.41</i>	<i>155.64</i>	<i>AFM (M) dtd</i>				<i>504</i>
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				<i>AFM (M) dtd</i>	<i>15.3.41</i>	<i>155.64</i>	<i>AFM (M) dtd</i>	<i>15.3.41</i>	<i>155.64</i>	<i>AFM (M) dtd</i>				<i>504</i>
				<i>AFM (M) dtd</i>	<i>15.3.41</i>	<i>155.64</i>	<i>AFM (M) dtd</i>	<i>15.3.41</i>	<i>155.64</i>	<i>AFM (M) dtd</i>				<i>504</i>
				<i>AFM (M) dtd</i>	<i>15.3.41</i>	<i>155.64</i>	<i>AFM (M) dtd</i>	<i>15.3.41</i>	<i>155.64</i>	<i>AFM (M) dtd</i>				<i>504</i>
				<i>AFM (M) dtd</i>	<i>15.3.41</i>	<i>155.64</i>	<i>AFM (M) dtd</i>	<i>15.3.41</i>	<i>155.64</i>	<i>AFM (M) dtd</i>				<i>504</i>
				<i>AFM (M) dtd</i>	<i>15.3.41</i>	<i>155.64</i>	<i>AFM (M) dtd</i>	<i>15.3.41</i>	<i>155.64</i>	<i>AFM (M) dtd</i>				<i>504</i>
				<i>AFM (M) dtd</i>	<i>15.3.41</i>	<i>155.64</i>	<i>AFM (M) dtd</i>	<i>15.3.41</i>	<i>155.64</i>	<i>AFM (M) dtd</i>				<i>504</i>
				<i>AFM (M) dtd</i>	<i>15.3.41</i>	<i>155.64</i>	<i>AFM (M) dtd</i>	<i>15.3.41</i>	<i>155.64</i>	<i>AFM (M) dtd</i>				<i>504</i>
				<i>AFM (M) dtd</i>	<i>15.3.41</i>	<i>155.64</i>	<i>AFM (M) dtd</i>	<i>15.3.41</i>	<i>155.64</i>	<i>AFM (M) dtd</i>				<i>504</i>
				<i>AFM (M) dtd</i>	<i>15.3.41</i>	<i>155.64</i>	<i>AFM (M) dtd</i>	<i>15.3.41</i>	<i>155.64</i>	<i>AFM (M) dtd</i>				<i>504</i>
				<i>AFM (M) dtd</i>	<i>15.3.41</i>	<i>155.64</i>	<i>AFM (M) dtd</i>	<i>15.3.41</i>	<i>155.64</i>	<i>AFM (M) dtd</i>				<i>504</i>
				<i>AFM (M) dtd</i>	<i>15.3.41</i>	<i>155.64</i>	<i>AFM (M) dtd</i>	<i>15.3.41</i>	<i>155.64</i>	<i>AFM (M) dtd</i>				<i>504</i>
				<i>AFM (M) dtd</i>	<i>15.3.41</i>	<i>155.64</i>	<i>AFM (M) dtd</i>	<i>15.3.41</i>	<i>155.64</i>	<i>AFM (M) dtd</i>				<i>504</i>
				<i>AFM (M) dtd</i>	<i>15.3.41</i>	<i>155.64</i>	<i>AFM (M) dtd</i>	<i>15.3.41</i>	<i>155.64</i>	<i>AFM (M) dtd</i>				<i>504</i>
				<i>AFM (M) dtd</i>	<i>15.3.41</i>	<i>155.64</i>	<i>AFM (M) dtd</i>	<i>15.3.41</i>	<i>155.64</i>	<i>AFM (M) dtd</i>				<i>504</i>
				<i>AFM (M) dtd</i>	<i>15.3.41</i>	<i>155.64</i>	<i>AFM (M) dtd</i>	<i>15.3.41</i>	<i>155.64</i>	<i>AFM (M) dtd</i>				<i>504</i>
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				<i>AFM (M) dtd</i>	<i>15.3.41</i>	<i>155.64</i>	<i>AFM (M) dtd</i>	<i>15.3.41</i>	<i>155.64</i>	<i>AFM (M) dtd</i>				<i>504</i>
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				<i>AFM (M) dtd</i>	<i>15.3.41</i>	<i>155.64</i>	<i>AFM (M) dtd</i>	<i>15.3.41</i>	<i>155.64</i>	<i>AFM (M) dtd</i>				<i>504</i>
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				<i>AFM (M) dtd</i>	<i>15.3.41</i>	<i>155.64</i>	<i>AFM (M) dtd</i>	<i>15.3.41</i>	<i>155.64</i>	<i>AFM (M) dtd</i>				<i>504</i>
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				<i>AFM (M) dtd</i>	<i>15.3.41</i>	<i>155.64</i>	<i>AFM (M) dtd</i>	<i>15.3.41</i>	<i>155.64</i>	<i>AFM (M) dtd</i>				<i>504</i>
				<i>AFM (M) dtd</i>	<i>15</i>									



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 Wright, William Albert OFFICIAL No. P-74,061  
(in full, Surname first)

(1) DATE OF BIRTH June 11, 1922 AGE ON ENTRY INTO R.C.A.F. 18 years 94 days.  
 PLACE OF BIRTH (Parish) Pembroke (Town or County) Ontario  
 OCCUPATION IN CIVIL LIFE Welder  
 TRADE IN ROYAL CANADIAN AIR FORCE Superior Mechanic Metal Stud  
 RELIGIOUS DENOMINATION United Church  
 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
<u>13/9/40</u>	<u>18</u>	<u>Duration War</u>

(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., E.A.F., A.A.A.F. or R.C.A.F.)	Period		Rank on Discharge
	From	To	

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

Mr W Wright Box 196, Pembroke St, Pembroke Ont (father)

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		Chest Inches	Colour of			Marks, Wounds or Scars
	Feet	Inches		Hair	Eyes	Complexion	
On entry as a boy.....							
On mustering as a man at age of 18 years Or on entry at 18 years or over.....	<u>5</u>	<u>6 1/4</u>	<u>34</u>	<u>Brown</u>	<u>Green</u>	<u>Med</u>	<u>scar st. cheek</u> <u>Brown discoloration</u> <u>right Buttock</u>
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.CERTIFICATE OF EDUCATION

THIS IS TO CERTIFY THAT

R74061

(Number)

WRIGHT, W.A.

(Name)

has been a trainee at the Pre-Aircrew Education Course at

University of Toronto,  
Toronto, Ontario.

(Place)

under the auspices of the ~~War Emergency Training~~ University **Pre-Aircrew Education** Programme. He has taken the Royal Canadian Air Force final examination in the following subjects and (HAS) (~~HAS NOT~~) been recommended as educationally qualified for the category of AIRCREW (I.T.S.).

<u>Subject</u>	<u>Mark</u>
English <b>N.A.</b>	<u>      </u>
Science	<u>  76  </u>
Mathematics	<u>  50  </u>
<b>Signals</b>	<u>  88  </u>
Remarks:	

Date: 12/ Feb/ 43Signed: J Forman 7/c  
(Examination Officer)



This is to certify that No. R 74061 ..... Name. LAC WRIGHT W. A. .....  
has fired the required..... 125 ..... rounds, Browning Machine Gun and has com-  
pleted the Rifle practices as laid down in C.A.P. 12, while on course..... 80 .....  
at No. 12 E.F.T.S.

..... W. Snider Sgt. .....  
N.C.O. I/C Armament  
No. 12 EFTS.











#.1. O.T.U. Advance Tactical Training Detachment, ROAF.,  
Greenwood, N. S.

From March 1 TO March 12

No. R74061 RANK Sgt NAME Wright, W.A. COURSE No. 20B

Flying Schedule

1.	Squadron Rhubarb	X
2.	Squadron Height Climb	
3.	Wing Height Climb	
4.	Squadron Attacks at Height	
5.	Bomber Escort	
6.	Bomber Interceptions of Aircraft	

Ground Schedule

1.	Unarmed Combat	
2.	Daily Inspections of Aircraft	X
3.	Re-Arming and Re-Fuelling	X
4.	Small Arms Practice	X
5.	Escape Practice	
6.	Commando Obstacle Course	
7.	Operational Dispersal of Aircraft	X

Exercise not Completed	Passed-Standard Attained	Pass Standard not Attained
	No. of exercises to be completed	No. of exercises Completed
		X



MUSKETRY CERTIFICATE

This is to certify that No. R 74061

Rank Sgt. Name Wright, W. A. has  
completed ~~Rifle Tables B and C~~ and Pistol Tables ~~A~~ and B for Annual  
Musketry, as authorized by A.F.A.O. A.51/27.

Dated Jan. 27/44

M. S. Leese  
O.C., Armament Section,  
R.C.A.F. Station, Bagotville, Que.



R.C.A.F. FITNESS ASSESSMENT SHEET

APPENDIX "A"

NAME OF AIRMAN: Sgt. Wright W.A. NUMBER R 74061  
 TRADE: Fighter Pilot STATION 2nd C.T.O. Baginville DATE 14/1/44  
 Airman has been under my instruction on 27 occasions from 2/11/43 to 14/1/44  
 (date) (date)

**DIRECTIONS:** First check the sub-paragraph which best describes the individual and complete this procedure for all paragraphs before scoring. Then, under the heading "SCORE", in the right hand margin copy the number corresponding to the sub-paragraph which has been checked.

I. APPEARANCE:

SCORE

- 20....a) Excellent; clear, fresh complexion with good colour; alert expression; vigorous manner; striking muscular development; excellent build and carriage; would attract attention for healthy appearance and smartness under any circumstances.
- 16....b) Complexion clear; colour ordinary; manner lacks "sparkle"; good build and carriage; well muscled but not striking. 16
- 8....c) Poor build; poor carriage; pale; dull in manner; tired looking.
- 4....d) Very pale and "pasty" complexion; "hang dog" expression; indifferent; slovenly; exceptionally poor carriage and build; lacks all signs of vigour.

II. STAMINA:

- 20....a) Never seems to tire during strenuous activity such as covering obstacle course, long distance runs, or strenuous games hockey, soccer, football, etc.; remarkable speed of "come back" after strenuous activity.
- 16....b) Has fairly good "staying power". Is capable of prolonged and strenuous activity but obviously fatigued when finished; recovery good but not remarkable. 16
- 8....c) Tires quickly in races; gets winded easily in games. Is able to complete only moderate activity and this with marked exhaustion. Poor recovery.
- 4....d) Hasn't any endurance; wears out very soon after starting to exercise even with mild forms of activity, calisthenic drills, marches, etc. Once tired has no "come back".

III. APPLICATION:

- 15....a) "Puts all he's got" into his work-out; drives hard all through sports period; energetic approach to all sports; exceptional.
- 12....b) Plays fairly hard; "spares himself" too much; could put more drive into his activity; energetic but not exceptionally so. 12
- 6....c) Will not work during sports period unless pushed; plays one or two games with fair vigour; half-hearted; lazy.
- 33....d) Can't be made to try; seems to be exhausted before he starts; total lack of drive; laggardly.

IV. REGULARITY OF ATTENDANCE:

- 5....a) Attended sports parade with enthusiasm on all occasions.
- 4....b) Attended sports parade on most occasions; not absent more than three times each month. 4
- 2....c) Often requested to be excused from sports activity; not absent more than six times each month.
- 1....d) Has seldom attended sports parades; absent more than six times each month.

V. SCORE OF TEST:

40....a) Above 90	.....	TOTAL: <u>48</u>
30....b) 80 - 90	(Signature of M. O.)	
20....c) 70 - 79	.....	GROUP SCORE <u>30</u>
10....d) 60 - 69	(Signature P.T. & D. Officer)	
0....e) Below 60	.....	GRAND TOTAL <u>78</u>



A.F. No. E74061 Sgt. Name Wright, V.A.

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EVIDENCE OF MARRIAGE

Description of Document: **Certif. of Marriage** Number L 91042

ISSUING AUTHORITY **Rev. P.T. Jeffrey**

HUSBAND (Full Name) **William Albert Wright**

WIFE (Full Maiden Name) **Mary Margaret Fortin**

DATE OF MARRIAGE **23 Oct./43**

PLACE OF MARRIAGE **Pembroke, Ont.**

CERTIFIED TRUE EXTRACT

Date: Nov. 1/43

\_\_\_\_\_  
(signature & rank)

A.F.M. #13



ROYAL CANADIAN AIR FORCE  
INTERVIEW REPORT

APPENDIX "D"

1. SURNAME WRIGHT LAC R74061
2. CHRISTIAN NAMES W.A.
3. APPLYING FOR ENLISTMENT AS Remuster Aircrew

SELECTION BOARD

4. PERSONNEL OFFICER
- Education X Ont. W.E.T.P. Course Passed \_\_\_\_\_
- C.T. Score 37 Date 6-8-42 C.A.T. \_\_\_\_\_ Date \_\_\_\_\_

ASSESSMENT: (Educational Standing: Ability to Learn: Personal Background)

Not RECOMMENDED FOR Posting Signed R.W. Philp F/L

SUITABLE FOR COMMISSION \_\_\_\_\_

5. MEDICAL OFFICER
- Medical Category \_\_\_\_\_
- ASSESSMENT: (Physical: Temperamental)

RECOMMENDED FOR \_\_\_\_\_ Signed \_\_\_\_\_

SUITABLE FOR COMMISSION \_\_\_\_\_ Date \_\_\_\_\_

6. INTERVIEWING OFFICER

ASSESSMENT: (General Fitness): Good type - 20 yrs. old - apparently bright & intelligent, but not substantiated by tests - does not wish to go Air Gunner - prefers to study and try again.

Not RECOMMENDED FOR Posting Signed M. Powell F/L

SUITABLE FOR COMMISSION \_\_\_\_\_ Date 6-8-42

Not FOUND ACCEPTABLE FOR remustering to Aircrew (ITS)

Date: 6-8-42.

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

Sgd. (G.H. Parliament) F/Lt.,  
for: Commanding Officer,  
No.11 Recruiting Centre, RCAF,  
Toronto, Ontario.

CERTIFIED TO BE A TRUE COPY OF THE ORIGINAL ON FILE

G.H. Parliament



RECOMMENDATION FOR REMUSTERING TO AIRCREW

1. No. R74061 2. P.O. (present rank) WRIGHT (name) W.E. (Initials)  
 3. Trade and Grouping A.F.M. "A" 4. Station or Unit No. 6 Repair Depot, Trenton  
 5. Date of Enlistment 13-9-40 6. Date of Birth 11-6-22

EDUCATION	FROM	TO	NAME OF SCHOOLS OR UNIVERSITY	DIPLOMAS OR STANDING (B.Sc. Sr.Matric. Jr. Matric.)
High School	2 years at		Pembroke Collegiate Institute, Pembroke, Ont.	
University				

EQUIVALENT EDUCATION

NIL

COURSES OR OTHER QUALIFICATIONS

NIL

8. FLYING EXPERIENCE

Details (Clubs Place Aircraft etc.)	SOLO	DUAL	PASSENGER	TOTAL
RCAF, No. 6 R.D.		2 hours	50 hours	52 hours
TOTAL HOURS		2 hours	50 hours	52 hours

9. OTHER INFORMATION

NIL

10. MEDICAL OFFICER

This airman was medically examined on form R.C.A.F. M.2 on 4/8/42 and found to be Fit for Aircrew duties, his category being A1B A3B  
 (fit or unfit)  
 Remarks of Medical Officer

SIGNATURE D. H. Purdon t/o

M.O. DATE 4/8/42

11. Recommendations and remarks of Commanding Officer

*Recommended for training as*

Specially Recommended Pilot  
 for ~~Observer~~  
 Recommended ~~Wireless Operator~~ (Air Gunner)  
 (Strike out those not applicable)

Signature of Commanding Officer A. J. [Signature]  
 (Para. 11 must be completed and signed by Commanding Officer)

12. FOR HEADQUARTERS USE ONLY

Selected	Initials	Date	Selected	Initials	Date
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ROYAL CANADIAN AIR FORCE  
Record of Service Airmen

R 74061 **WRIGHT** *William Albert.* *United Church*

A.F. No. *116-22* Surname *Rembroke Ont. Canada* Christian Names *Canada* Religion  
 Born *116-22* Place *Rembroke Ont. Canada* Country *Canada* Citizen of *Canada* Racial Origin

ENLISTMENT		CIVIL EDUCATION		PREVIOUS SERVICE
Date	<i>13-9-40</i>	High School Entrance	Jr. Mat.	Sr. Mat.
At	<i>Toronto, Ont.</i>	Technical School	Corres. Courses	<i>NIL</i>
Term	<i>Duration of War</i>	University		

Rank	Date	Med. Cat.	Date	CIVIL OCCUPATIONS & EXPERIENCE										
<i>AC2</i>	<i>13-9-40</i>			<i>Welder</i>										
<i>AC1</i>	<i>15-3-41</i>													
<i>LAC</i>	<i>1-10-41</i>													
<i>T/SGT</i>	<i>15-10-43</i>	<i>DR0 248</i>		COURSES AND TRADE TESTS										
				Trade	Grp.	%	PorF	Date Rem.	Trade	Grp.	%	PorF	Date	
				<i>AFM(M)</i>	<i>std.</i>		<i>P</i>	<i>13-9-40</i>	<i>AFM(M)A</i>					
					<i>C</i>		<i>P</i>	<i>15-3-41</i>	<i>AFM(M)A</i>	<i>100%</i>	<i>100%</i>	<i>100%</i>	<i>100%</i>	<i>22/10/41</i>
					<i>B</i>		<i>P</i>	<i>1-10-41</i>	<i>AFM(M)A</i>					<i>U/T</i>
					<i>A</i>		<i>P</i>	<i>1-1-42</i>	<i>AIRCREW-PILOT</i>	<i>DR0 104</i>				<i>30-9-43</i>

PARTICULARS OF FAMILY *M S D* Present Address (in pencil) *DR0 248 AIRMAN Plot Spec Grp 15-10-43*

Children	Names	Date of Birth	Place of Birth

NAME(S) ADDRESS AND RELATIONSHIP OF PERSONS TO BE INFORMED OF CASUALTIES (in pencil)  
*Mrs. W.A. Wright (wife) 164 Mc Kay St. Rembroke Ont.*  
*(father) Rembroke, Ont.*

LEAVE				CHARACTER AND TRADE ASSM. HONOURS, AWARDS AND MENTIONS			
From	To	Auth: & Description	Date	Character	Trade & Assm.	Honours & Awards	Signature
<i>14-4-41</i>	<i>21-4-41</i>	<i>7 DAL</i>	<i>19-3-41</i>	<i>V.S.</i>	<i>Sat.</i>		<i>Wright, W.A.</i>
<i>1-8-41</i>	<i>4-8-41</i>	<i>3 DAL (DR0 181)</i>				<i>Flying Badge</i>	<i>DR0 248</i>
<i>1-9-41</i>	<i>5-9-41</i>	<i>4 DAL (DR0 194)</i>					
<i>Issued with</i>	<i>SLTN#</i>	<i>C50817 d/20-12-41 DR0 303</i>	<i>15-1-44</i>	<i>C.U.S.M.</i>			
<i>7-4-42</i>	<i>12-4-42</i>	<i>5 DAL (DR0 82)</i>					
<i>10-7-42</i>	<i>19-7-42</i>	<i>9 DAL DR0 155</i>					
<i>15-2-43</i>	<i>20-2-43</i>	<i>Edge Area DR0 12/43</i>					
<i>15-10-43</i>	<i>27-10-43</i>	<i>(14) Special leave DR0 248</i>	<i>DR0 64</i>	<i>12-3-44</i>	<i>24-3-44</i>	<i>(13 day) Special</i>	
<i>Travet</i>	<i>SLTN#</i>	<i>206909 (15-10-43) DR0 248</i>					
<i>30-1-44</i>	<i>12-2-44</i>	<i>(14) Special " 29"</i>	<i>7</i>				

MOVEMENTS AND CASUALTIES			
Authority	Unit From	Unit To	Date
<i>M.I.R.13</i>	<i>% Ottawa</i>	<i>#1 ND Toronto</i>	<i>13-9-40</i>
<i>DR0 206/40</i>	<i>#1 M.D. Toronto</i>	<i>#5 St Thomas</i>	<i>31-10-40</i>
<i>" 67/41</i>	<i>175 St Thomas</i>	<i>#6 Rk Trenton</i>	<i>19-3-41</i>
<i>" 173</i>	<i>Profile Pay AWL</i>	<i>2 days from 19-2-41 to 21-2-41</i>	
<i>" 198</i>	<i>" " AWL</i>	<i>1 day</i>	
<i>" 291</i>	<i>Entitled to flying pay (Library)</i>		<i>28-11-41</i>
<i>" 8</i>	<i>" " " (2 " )</i>		<i>27-12-42</i>
<i>" 36</i>	<i>" " " (1 " )</i>		<i>22-1-42</i>
<i>" 55</i>	<i>" " " (3 days) 10,</i>		<i>13, 14-2-44</i>
<i>" 90/42</i>	<i>" " " (1 day)</i>		<i>30-3-42</i>
<i>DR0 278</i>	<i>6 RD TIRENTON</i>	<i>UNIV. OF TORONTO</i>	<i>22-11-42</i>
<i>R.C.A.F. R44c</i>			
<i>100M-12-40 (8755)</i>			

*DR0 97* *with 100M-12-40 (8755) 26/6/43*  
*DR0 6/42* *Issued with 100M-12-40 (8755) 26/6/43*  
*DR0 104* *#61.T.S. #12EFTS 1-3-43*  
*DR0 84* *#12EFTS #13EFTS 26/6/43*  
*DR0 248 505* *#15FTS #1 OTU 29-10-43*







CLEARANCE      CERTIFICATE

Certified that the deficiencies chargeable to R74061 Sgt. Wright, W.A.  
are recorded in the Accounting Section and that he has no other liability to the Unit.

28 Jan 19 44

Shewashin  
(Accountant Officer) *SKC.*  
No. 1 O.T.U. Bagotville.

IMPORTANT: Keep this stub, it must be presented at your new Unit.

~~POSTED~~ Attached to: Camp Borden, Ont.

Effective: 11th. Feb./44

Authority:

Dated:

Reporting: 12th. Feb./44

Leave (if applicable)

Type of Leave Special. No. of days 14.

From: 29th. Jan./44 To: 11th. Feb./44 (Inc.)



# FIFTH VICTORY LOAN

## FIGHTING SERVICES PURCHASE AGREEMENT BY PAY ASSIGNMENT

### Information for Applicant and Canvasser

The monthly amounts to be assigned are as follows: \$500 bond—\$84.00; \$100 bond—\$16.80; \$50 bond—\$8.40; Pay assignments will be effective for the months of November, 1943 to April, 1944, inclusive.

This form shall be carefully completed in triplicate, using a type-writer if possible. Otherwise use ink or indelible pencil and print in block letters. Each copy must be signed. The original and duplicate are to be delivered to the proper pay authority and the triplicate retained by the Unit or Establishment.

The Assignment of Pay Form M.F.M. 17 (or Declaration of Allotment Form) is NOT required.

The Department of Finance will hold bond(s) in safekeeping during term of service, or they may be delivered to another person, as the applicant shall direct.

In the event of the subscriber being discharged from the service before all instalments are paid, he can make the balance of his payments direct to the Department of Finance, Ottawa, Canada.

If the subscriber dies before all instalments are paid, the amount standing to his credit in the Purchase Account will be transferred to the credit of his Service pay account.

In the event of death, bonds held for the account of any member of the Services will be delivered to the Administrator of Estates.

I, WRIGHT WILLIAM ALBERT LAC Official No. R 74061  
(Surname) (Christian Names) (Rank)

Unit or Establishment #1 S.F.T.S. R.C.A.F. CAMP BORDEN **NAVY — ARMY — AIR**  
(Strike out words not applicable)

do hereby subscribe for \$ 100 FIFTH VICTORY LOAN 3% Bond(s) by means of assignments of my pay and

I hereby authorize a monthly assignment of 100 16 60 c.  
 payable to Receiver General of Canada, Fifth Victory Loan Account, against my pay for the months of NOVEMBER, 1943, to APRIL, 1944, inclusive, the form, denominations and delivery of bonds to be as follows:

FILL IN DENOMINATIONS OPPOSITE THE FORM DESIRED.

BEARER BONDS, with Coupons attached	x \$1,000;	x \$500;	<u>1</u> x \$100;	x \$50
REGISTERED only as to principal (Coupons attached)*	x \$1,000;	x \$500;	x \$100;	x \$50
FULLY REGISTERED as to principal and interest* <small>(Interest payable by cheque)</small>	x \$1,000;		x \$500	

★IMPORTANT—If registered bonds desired, complete the registration instructions below.

REGISTRATION INSTRUCTIONS

(Furnish at least one Christian name. If bond to be registered in name of a married woman be sure to state HER Christian name.)

PRINT FULL NAME N.A.

COMPLETE POSTAL ADDRESS N.A.

DELIVERY INSTRUCTIONS  
(Indicate by a cross in one block)

Hold bond(s) in safekeeping for me at the Department of Finance until I instruct otherwise.

Mail bond(s) by registered mail to the following address:

NAME MRS H.H. WRIGHT

COMPLETE AND CORRECT POSTAL ADDRESS BOX 196 PEMBROKE ONT.

Date Oct 18 1943

Wright, W.A.  
(Signature of subscriber)

For use of Paymaster and Treasury Officer:  
 NOTED: Deductions of the above assignments have been recorded and deductions will be made for the months of November, 1943 to April, 1944, inclusive.

By: A. Paymaster Officer (Rank)  
No. 1 S.F.T.S., R.C.A.F. (Place)

And by: \_\_\_\_\_ (Treasury Officer)

\_\_\_\_\_  
(Place) (Date)

For Department of Finance use:  
 Instalments credited:

..... \$ .....  
 ..... \$ .....  
 ..... \$ .....  
 ..... \$ .....  
 ..... \$ .....  
 ..... \$ ..... Total \$ .....

Serial Numbers issued .....

Mailed ..... 194 .....

For Naval use only:  
 ENTERED IN SHIP'S LEDGER:

### DOMINION OF CANADA FIFTH VICTORY LOAN

This is to certify that L.A.C. Wright W.A. has subscribed for \$ 100 FIFTH VICTORY LOAN 3% Bond(s) for payment by means of pay assignments and has directed that the bond(s) be delivered to Mrs H.H. Wright

Box 196 Pembroke Ontario  
(Enter either Department of Finance, OR name and address of person to whom bond(s) are to be delivered)

after the final instalment has been paid.  
 Date Oct 18 1943

J.H. Hunter F/C  
(Departmental Canvasser)

IMPORTANT.—Keep this acknowledgment. Communicate by letter with Chief Clerk, Employee Instalment Purchase Plan, Department of Finance, Ottawa, if it is necessary to alter the delivery instructions or to make inquiries regarding your bond(s).



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PERSONAL DETAILS REPORT. ALL RANKS - AIRCREW

Trade PILOT Intake No. C.236  
 Nationality CAN. Number R.74061 Rank S.P.  
 Surname WRIGHT Christian Names WILLIAM ALBERT  
 Date of Award of Flying Badge OCT 15/44  
 Date of Birth 11/6/22 Religion N/C Married or Single M  
 Date and Place of Marriage OCT 23/43 PEMBROKE  
 Wife's Maiden Name MARY MARGARET FORTIN  
 Relationship of Next-of-Kin WIFE Name MRS W.A. WRIGHT  
 Address 161 MCKAY ST. PEMBROKE. ONT. CAN.  
 Person to be notified in case of casualty-Relationship Wife  
 Name Mrs W.A. Wright Address 161 MCKAY ST. PEMBROKE. ONT.

TRAINING DETAILS

School & Location	Course No.	From	To	Aircraft on Which Trained
#12 EFTS	81	MAY	JULY	TIGER MOTH
#1 SFTS	84	JULY	OCT	HARV ARDS
#1 OTU	20	NOV	MARCH	HURRICANE

Date Embarked for U.K. 25/6/44 Place HALIFAX  
 Date Disembarked U.K. 2/7/44 Place GOUROCH











CONFIDENTIAL

O.T.U. Report on R74061 Sgt. Wright, W.A.

Who attended Operational Training Course No. 20

At No. 1 O.T.U., From 1-11-43 To 23-1-44

Total flying time on Operational Type 61:15 HRS.

Total dual instruction given 9:20 HRS.

(for full details of flying times see Log Book)

Assessment as Fighter Pilot Under Training: Average

Remarks: Formation steady and consistent. Keen to fly at all times. Seeks information on fighter tactics regularly. Strongly recommend him for commission.

E. M. Reyno

(E.M. Reyno) Wing Commander  
Chief Instructor

F. B. Foster

(F.B. Foster) Squadron Leader  
Chief Flying Instructor



FASTMAN - SAFETY





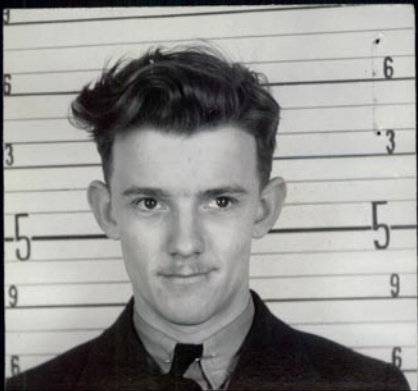
R 74061

Wright, W. Q.











**IMPORTANT—Keep this acknowledgment.**

DOMINION OF CANADA  
SIXTH VICTORY LOAN

This is to certify that R 74061 (Number) Sgt. (Rank) Wright, W.A. (Name) # 9 B + G Sch. (Unit)  
has purchased \$ 100.00 Sixth Victory Loan 3% Bonds to be paid by six monthly pay assignments of \$ 16.80 each for the months of May, 1944, to October, 1944, inclusive, and has directed that the bonds be delivered to

Mrs. Bert Wright - 161 - McKay St. Pembroke Ont  
(Enter either Department of Finance OR name and address of person or Bank to whom bonds are to be delivered)  
after payment has been completed.

Date 23/aps/44 1944. W. A. Wright  
(Departmental Canvasser)

Communicate by letter with Chief Clerk, Employee Instalment Purchase Plan, Department of Finance, Ottawa, if it is necessary to alter the delivery instructions or to make inquiries regarding your bonds. The Department of Finance will hold bonds in safekeeping during term of service, or they may be delivered to another person or Bank, as the applicant shall direct.

In the event of the purchaser being discharged from the Service before payment is completed, he can make the balance of his payments direct to the Department of Finance, Ottawa, Canada.

If the purchaser dies before payment is completed, the amount standing to his credit in the Purchase Account will be transferred to the credit of his Service pay account.

In the event of death, bonds held for the account of any member of the Services will be delivered to the Administrator of Estates.



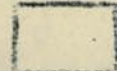
RECORD OF GROUND TRAINING CARRIED OUT  
No. 1 O.T.U., RCAF, BAGOTVILLE, P.Q.

Name WRIGHT, W.A. No. R74061 Course No. 20 From 1-11-43 To 28-1-44

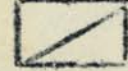
AIRMANSHIP		INTELLIGENCE		TECHNICAL		NAVIGATION		ARMAMENT		SIGNALS		OPERATIONS & TACTICS		LINK TRAINER	
1	X	1	X	1	X	1	X	1	X	1	X	1	X	1	X
2	X	2	X	2	X	2	X	2	X	2	X	2	X	2	X
3	X	3	X	3	X	3	X	3	X	3	X	3	X	3	X
4	X	4	X	4	X	4	X	4	X	4	X	4	X	4	X
5	X	5	X	5	X	5	X	5	X	5	X	5	X	5	X
6	X	6	X	6	X	6	X	6	X	6	X	6	X	6	X
7	X	7	X	7	X	7	X	7	X	7	X	7	X	7	X
8	X	8	X	8	X	8	X	8	X	8	X	8	X	8	X
9		9	X	9	X	9	X	9	X	9	X	9	X	9	X
10		10	X	10	X	10	X	10	X	10	X	10	X	10	X
11		11	X	11	X	11	X	11	X	11	X	11	X	11	X
12		12	X	12	X	12	X	12	X	12	X	12	X	12	X

12:00  
HRs

Note: Instruction not given



Pass standard not attained.....



Pass standard attained.....





13. Flying Times (At this Unit) :

Type of Aircraft	Time	Dual to 1st Solo	Total dual	Solo	Passenger	Formation	Instru-ment	Link Trainer
Spitfire	Day ...		00.15	51.55 1.15	-	13.30	2.30	13.30
Master	Night...	-	-	5.00				
Spitfire								

14. Flying Accidents.—All flying accidents in which this pupil was concerned while at this unit are to be noted below, whether serious or trivial, whether otherwise reported or not. If there were no such accidents, write in "None."

(1) Type of Aircraft	(2) Date of Accident	(3) Day or Night	(4) Previous Reports	(5) Nature of Accident	(6) Amount of Damage	(7) Degree of pupil's responsibility	
(Name)	Day Month Year	" D " or " N "	e.g. 765c Number or other reports (if any)	Use one or two words (e.g. "Taxying", "Heavy Landing", "Over-shooting" etc.)	" R.U." " R.X.U." or " W.O."*	" None " " Partial " " Full " or " Unknown "	Comment e.g. " Engine Failure " " Inexperience " " Carelessness," etc.
Spitfire V.C. A.R.501	9.9.44.	D	NIL	FORCED LANDED ON BEACH.	R.U.	NONE	ENGINE FAILURE

\* Column (6) above : " R.U." —Repairable at Unit.  
 " R.X.U." —Repairable away from Unit.  
 " W.O." —Write off.

	<u>Rounds fired.</u>	<u>Hits</u>
Air/Air	2100	2.1
Air/Ground	2900	11.3
High Dive bombing	16	90 yds. average error
Cine film exposed	151 ft.	
<u>Air Firing assessment.</u>		
Air/Air	Below average	
Air/Ground	Good average	
Proficient in use of G.R.U. Assessor.		



PILOTNo. 61 OPERATIONAL TRAINING UNIT

1. Surname WRIGHT Christian Names WILLIAM ALBERT  
 2. Number B. 7462 3. Rank F/SGT. 4. Course No. 47  
 5. Posted from 3 P.R.O. 6. Date course commenced 15.8.44 7. Date course ended 17.10.44 8. Posted to 3 T.N.U.

9. Ground Examinations			10. Flying Tests		
Subject	Marks Allotted	Marks Obtained	Subject	Marks Allotted	Marks Obtained
(a) <del>Airmanship</del> <u>Int.</u> ...	300	<u>267</u>	(a) General Flying ...	400	<u>300</u>
(b) Armament ...	300	<u>292</u>	(b) Applied Flying ...	200	<u>170</u>
(c) <u>Meteorology</u> <u>Tech.</u> ...	100	<u>66</u>	(c) Instrument Flying ...	<u>250</u>	<u>-</u>
(d) Navigation ...	200	<u>146</u>	(d) Night Flying ...	100	<u>65</u>
(e) Signals ...	100	<u>73</u>	(e) Link Trainer ...	50	<u>33</u>
Total ...	1,000	<u>744</u>	Total ...	<u>1,000</u>	<u>568</u>
PER CENT.		<u>74.4%</u>	PER CENT.		<u>56.8%</u>

II. Assessment of qualities of Character and Leadership ...	Marks Allotted	Marks Obtained
... ..	100	<u>70</u>

## 12. Remarks :

A good average pilot. Very keen and reliable, with a sense of responsibility. Should become very good with a little Squadron experience.

Date 31st October, 1944Signed GRAHAM E. B. AUSTIN, W/CDR.  
Officer Commanding.



22.	Courses of instruction: Subject	Unit	From	To	Result
	Service Flying case	IS.F.T.S.	28 Jun 43	15 Oct 43	P

23. Postings and attachments					Postings and attachments				
To	Duty	"P" or "A"	Date	Auth.	To	Duty	"P" or "A"	Date	Auth.
#1 yld pof 3 PRC	—	P	8 May 44	DR 098					
Encls.		P	25.6.44	"138"					
Disencls.			25/5/44						
3 PRC.		P	2/6/44						
		P	3/6/44						

51 GROUP POOL		A	14.1.44						
11 E.F.T.S.									
NO. 601 OTU		P	15.8.44						
3 TEU.	Flying	P	20.10.44	61074/196/44					
839 S4		P	27.11.44	3 TEU 394/44					
439 S4	"	P	2.12.44	930/1939/44					
RCAF UK N/E Unit	"	P	25.12.44	836/2063/44					
R.P.O.F. UK N.C. Unit	Missing		25.12.44	9/44 7/45					
" " " " " "	Pres. Rtd		5.05.44	12.44 9/44 160/45					



*Geoff Preston*

**ROYAL AIR FORCE**

R74061

1. Rank <i>FSGT</i> <i>15 Oct 43</i>		2. Christian Names <i>William Albert</i>		3. Surname* <i>Wright</i>		4. Decorations	
5. Type and date of commission or engagement, if Airman Aircrew  Date of expiry		7. Qualifications, including Flying Instructors' grading whether allotted symbols, whether passed, Promotion Exam. (with date) and whether passed Staff College Qualifying Exam.		8. Types of service aircraft flown			
6. Branch or Trade <i>Pilot P. Gp. 15 Oct 43</i>				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 <i>11 June 22</i>	12. If married, Date <i>M.</i>						
11. Religion <i>U.C.</i>	<i>S.</i> <i>23-10-43</i>						
13. Medical class'n.	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 and 13-19 to be kept in pencil

\*To be inserted in unit copy only

*74061 WRIGHT.*

*WRIGHT. W.A.*

17. Permanent address  <i>218</i>		18. Next of kin. Relationship and address  <i>Mrs W.A. Wright (wife)</i> <i>161 McKay St,</i> <i>Pembroke,</i> <i>Ontario</i>		19. Name and address of person to be notified in case of casualty * Instead of _____ the next of kin In addition to _____  *Delete as necessary	
---	--	--	--	---	--

20. Periods in hospital, or sick quarters, or sick at home		21. Christian names of wife, and Christian names and dates of birth of dependent children	
--	--	---	--



Surname **WRIGHT** Christian Names **W.A.** Decorations  
 Commission Branch **Pilot** Category Symbols  
 Personal No. **R74061**  
 Nationality **CAN.**

Sub. or Tempy. **RANK. F/SST** Date or Year of Birth  
 Aircraft (Service types) flown since 1939  
 Med. Category or Limitations  
 Acting

POSTINGS, etc.

P or A	Unit	To	Group	Duty	Rank of Post	Date of Effect	Acting Rank	Authority
P	3 TEU.							
P	83 G.S.U.			TYPHOON. CONV. PLAINS		27.11.44		3721/394/44
P	439 SUDN			FLYING		2.12.44		835/1929/44
P	REAR ENGINE UNIT			R/E. MULINS		25.12.44		835/2063/44







1402918 R.74061

1751

B51

GROUP  
UNIT Copy

## ROYAL AIR FORCE.

Form 373.

1. Rank. P/SGT		2. Christian Names. WALLACE		3. Surname. WRIGHT		4. Decorations. M.L.	
5. Type and date of commission or engagement, if Airman Pilot. VR Date of expiry. DURATION		7. Date of award of flying badge. 30/11/42 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. NIL		8. Types of service aircraft flown. MASTER I II III			
6. Branch or Trade. PILOT		10. Date of birth. 9/2/22		12. If married: Date. No		9. Type on which most proficient. (If under instruction state total number of hours flown on each type and tests passed).	
11. Religion. C of E		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.			

W. WRIGHT.

17. Permanent Address.		18. Next of kin. Relationship and address. B.P. WRIGHT 12 SKINNER ST CRESWELL NR WORKSOP NOTTS		19. Name and address of person to be notified in case of casualty. Instead of the Next of kin. *In addition to MRS D.F. POWRIE BOX 26 JUSTICE MAN. CANADA *Delete as necessary.	
20. Periods in hospital, or sick quarters, or sick at home.			21. Whether completed Annual Musketry Course and Annual Gunnery and Signalling Training; If not, what tests still require to be passed.		















ROYAL AIR FORCE.

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

Official No. CAN P74961 Name WRIGHT William Albert.  
 (In full block capitals, surname first).

Rank T/SGT R.A.F. Trade and Group Pilot Grp. 2. Medical Category.....

Last enlisted 13.9.40 Current engagement D of W. S.R  
 enrolled (To state whether in R.A.F., Class "E" or "F" Reserve, R.A.F., R.A.F.V.R. or W.A.A.F.)

(Section I to be referred to when reckoning service for progressive pay, time re-classification, etc.) Date of Birth 11.6.22 Whether married, single or widow(er) M

Occupation in civil life Welder Religion U.C.

Special qualifications.....  
 (See K.R. and A.C.I. 2132 (16) (b)).

Description on entry:—Height.....ft.....ins. Colour of eyes.....

Complexion..... Colour of hair..... Marks or scars.....

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

*Mrs W. A. Wright (wife)  
 161 McKay St Pembroke Ont*

Name, address and relationship of person (or persons) to be informed of casualties in addition to next of kin (to be entered in pencil):

*M of K*

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

SECTION I.—MOVEMENTS AND CASUALTIES.

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

Unit FROM which.	Unit TO which.	Date of Effect.	Whether specially Recommended (SR) Recommended (R) or not Rec'd (NR) for Promotion or Re-classification	* Authority.	Description.	Date of Effect.
No 9 B & G.	No 1 Y Depot	9.5.44			A.F.M. Std. AC2	13.9.40
No 1 Y Depot	U.K.	25.5.44			" "C" AC1	15.3.41
	Emb Halifax	25.5.44			" "B" LAC	1.10.41
	Disemb U.K.	2.6.44			" "A" LAC	1.1.42
Int C236	No 3 RCAF PRC	3.6.44			U.T. A/C AFM (M) "A" Pilot	LAC 30.4.43
No 3 RCAF PRC	No. 61 OTU	15.8.44			Pilot Sp.	T/SGT 15.10.43
	61 OTU.	3. T.F.U.	20/10/44		Pilot Grp 2.	T/SGT 15.10.43
	3 T.F.U.	83 G.S.U.	27.11.44	POR 65/44	PROMOTED T/F/SGT	15.7.44
	83 G.S.U.	439 Squadron	1.12.44			
	439 Sqn	RCAF U.K. N/F Unit	25.12.44			
	Pres. Dead CR. 825	24.12.44				
		21.10.45				

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.















No. 9 B. & G. SCHOOL, MONT JOLI, QUEBEC.

ALL AIRMEN reporting on this Station will obtain a copy of this form from the Guard House and fill in particulars below. He will then proceed to the various sections and report, obtaining the necessary signatures. The action outlined is to be completed as soon as possible after arrival and this form returned to the Station Orderly Room.

(PRINT IN BLOCK LETTERS)

NUMBER 74061 RANK Sgt SURNAME Wright  
 CHRISTIAN NAMES William Albert ENLISTMENT DATE 13/9/40  
 (in full)  
 TRADE Pilot GROUPING Special  
 MARRIED OR SINGLE Married RELIGION Protestant  
 NEXT OF KIN Mrs. Margaret Wright RELATIONSHIP Wife  
 ADDRESS 161 Mc Kay Street, Pembroke, Ont.  
 HAVE YOU MADE A WILL SINCE JOINING THE R.C.A.F. Yes  
 (yes or no)  
 REPORTING FROM # 107 U Bagotville  
 (unit) (place)  
 ARRIVED 1230 25/3/44 VIA Train  
 (hour) (date) (mode of transportation)

- REPORT TO:
- (i) Guard House Cpl. M. McCarthy N.C.O. i/c
  - (ii) Barrack Warden (Drill Hall) [Signature]  
 (a) Barrack Block No. 67  
 (b) Room No. 20 [Signature]  
 (Do not move bed without authorization of S.A.O.)
  - (iii) R.C. or Protestant Chaplain M. W. Williams R.C. Chaplain  
 Protestant Chaplain.
  - (iv) Station Hospital [Signature] Medical Officer.
  - (v) Educational Officer [Signature]
  - (vi) Flight or Section O.C. \_\_\_\_\_ O.C. or N.C.O.
  - (vii) Kit inspection by: \_\_\_\_\_  
 (Flight or Section O.C. or N.C.O. i/c)

RETURN SAME TO MOVEMENTS CLERK IN THE ADMINISTRATION BUILDING (Orderly Room).

(For H.Q.'s use ONLY)

- (i) Noted for D.R.O. \_\_\_\_\_ Movements Clerk
- (ii) Documents Received \_\_\_\_\_ N.C.O. i/c

ATTACH CLEARANCE STUB FROM PREVIOUS UNIT.



R.C.A.F. FITNESS ASSESSMENT SHEET

APPENDIX "A"

NAME OF AIRMAN L. A. C. Wright W. A. NUMBER R 74061  
 TRADE Air. Cmn. Pilot STATION #1 S.F.T.S. DATE 6/9/43  
 Airman has been under my instruction on.....occasions from.....to.....  
 (Date) (date)

DIRECTIONS: First check the sub-paragraph which best describes the individual and complete this procedure for all paragraphs before scoring. Then, under the heading "SCORE", in the right hand margin copy the number corresponding to the sub-paragraph which has been checked.

1. APPEARANCE:

- |           |  |       |
|-----------|--|-------|
| 20.....a) | Excellent, clear, fresh complexion with good colour; alert expression; vigorous manner; striking muscular development; excellent build and carriage; would attract attention for healthy appearance and smartness under any circumstances. | SCORE |
| 16.....b) | Complexion clear; colour ordinary; manner lacks "sparkle"; good build and carriage; well muscled but not striking.   |       |
| 8.....c)  | Poor build; poor carriage; pale; dull in manner; tired looking.  |       |
| 4.....d)  | Very pale and "pasty" complexion; "hang dog" expression; indifferent; slovenly; exceptionally poor carriage and build; lacks all signs of vigour.  |       |

II. STAMINA:

- |           |   |  |
|-----------|---|--|
| 20.....a) | Never seems to tire during strenuous activity such as covering obstacle course, long distance runs, or strenuous games, hockey, soccer, football, etc.; remarkable speed of "come back" after strenuous activity. |  |
| 16.....b) | Has fairly good "staying power". Is capable of prolonged and strenuous activity but obviously fatigued when finished; recovery good but not remarkable.   |  |
| 8.....c)  | Tires quickly in races; gets winded easily in games. Is able to complete only moderated activity and this with marked exhaustion. Poor recovery.  |  |
| 4.....d)  | Hasn't any endurance; wears out very soon after starting to exercise even with mild forms of activity; calisthenic drills, marches etc. Once tired has no "come back".  |  |

III. APPLICATION:

- |           |  |  |
|-----------|--|--|
| 15.....a) | Puts all he's got into his work-out; drives hard all through sports period; energetic approach to all sports; exceptional. |  |
| 12.....b) | Plays fairly hard; "spares himself" too much; could put more drive into his activity; energetic but not exceptionally so.  |  |
| 6.....c)  | Will not work during sports period unless pushed; plays one or two games with fair vigour; half-hearted; lazy.             |  |
| 3.....c)  | Can't be made to try; seems to be exhausted before he starts; total lack of drive; laggardly.                              |  |

IV. REGULARITY OF ATTENDANCE

- |          |  |  |
|----------|--|--|
| 5.....a) | Attended sports parade with enthusiasm on all occasions  |  |
| 4.....b) | Attended sports parade on most occasions; not absent more than three times each month.         |  |
| 2.....c) | Often requested to be excused from sports activity; not absent more than six times each month. |  |
| 1.....d) | Has seldom attended sports parades; absent more than six times each month.                     |  |

V. SCORES OF TEST:

- |           |          |
|-----------|----------|
| 40.....a) | Above 90 |
| 30.....b) | 80 - 90  |
| 20.....c) | 70 - 79  |
| 10.....d) | 60 - 69  |
| 0.....e)  | Below 60 |

M. L. Mousif Lt TOTAL \_\_\_\_\_  
 Signature of M.O.  
J. M. Reed P/O GROUP SCORE 30  
 Signature of P.T. and D. Officer  
 GRAND TOTAL \_\_\_\_\_



Reporting from #9 Band Lt.  
 SCALE OF ISSUE FOR KIT INSPECTION AT NO. 1 "Y" DEPOT, LACHINE, P.Q. Date.....

No. R74061 Rank Sgt Name WRIGHT WA. Trade Pilot  
 CLOTHING AND NECESSARIES WO CLASS 11 AND BELOW

Sec. & Ref. No.	Nomenclature	Den	Scale of Issue				RAF	DEF.	Free Iss.	Re-Exch. Pay	E/A Ini
			RCAP	RAAF	RNZAF						
Counter Section 1											
22B											
5004	Combinations S.U. OR	ea	2	2							
5017	Shirts U.S.K. and	ea	2	2		2					
5020	Shorts U.S.C.	prs	2	2		2					
5005	Drawers Cotton or Winter	prs	2	2	2	2					
5016	Shirts Under Cotton or W	ea	2	2	2	2					
5021	Socks Lightweight	prs	6a	6a	3						
5022	Socks Woollen	prs	4	4		3					
46	Ties Black	ea	2	2	1	1					
47	Towels Hand	ea	2	3		3					
Counter Section 2											
5023	Shirts C.S.G. collar Att. or	ea	4	4	3	3					
5012	Shirts C.S.G. and	ea	4	4	3	3					
5002	Collars C.S.G. Or	ea	8	8	6	6					
5013	Shirts Flannel S.G. and	ea	4	4	3	3					
5003	Collars Flannel S.G.	ea	8	8	6	6					
5008	Gloves Leather Black	prs	1	1	1	1					
47	Bags Kit Large	ea	1	2	2	1					
5009	Jackets Sweater	ea	1	1		1					
Counter Section 3											
22G											
5009	Coats Waterproof RCAF	ea	1								
5040	Shorts Gymnasia	prs	1	2							
5041	Singlets Gymnasia	ea	1	4	1						
Counter Section 4.											
22D											
5012	Shoes Rubber Soled P.T.	prs	1	1	1	1					
5002	Boots Ankle Leather	prs	2	1		1					
5015	Shoes Black O.R.	prs		1	2	1					
5	Laces Black Boot	prs	2			1					
Counter Section 5.											
22F											
	Caps Field Service	ea	2	2	2	2					
	Coats Great Warm	ea	1	1	1	1					
	Jackets Serge Blue	ea	2	2	2	2					
	Trousers Serge Blue	prs	2	2	2	2					
	Suits Aircrew Blouses	ea	1(b)		1(b)	1(b)					
	Suits Aircrew Trousers	prs	1(b)		1(b)	1(b)					
Counter Section 6.											
2155											
300	Outlery A.P. Forks Desert	ea	1	1	1	1					
302	Outlery A.P. Knives Des.	ea	1	1	1	1					
	Outlery A.P. Spoons Des.	ea	1	1	1	1					
	Dressings First Field	ea	1	1	1	1					
5	Braces	prs	1	1		1					
	Brushes Boot Polishing	ea	1	1	1						
9	Brushes Button	ea	1		1	1					
12	Brushes Shaving	ea	1	1		1					
13	Brushes Tooth	ea	1	1		1					
Counter Section 7.											
20	Combs Hair	ea	1	1		1					
28	Foldalls	ea	1	1		1					
29	Housewives	ea	1	1		1					
199-197	Sticks Button Fibre or Gal.		1		1	1					
22H											
	Badges Cap	ea	1	2	2	2					
	Badges Trade	ea	3	3	3	3					
	Badges Rank	ea	7	9	7	7					
	Badges Arm Canada, etc.	sets	4	6(c)	4	4					



Sec. & Ref. No.	Nomenclature	Den	RCAF	RCAF	RNZAF	RAF	Def.	FREE RE	Exch.	E/I
Scales	B.5 & D39 Counter Section 8									
23	Accoutrements	Sets	1	1	1					
	Helmets Steel Complete	ea	1	1	1					
234	Respirators Complete	ea	1	1	1	1				
	Caps Anti-gas	ea	1	1	1					
	Curtains Helmet	ea	1	1	1					

- (a) If in possession of Shoes Black O.R.  
 (b) For Aircrew Only.  
 (c) 2 Sets Australia Blue with Eagle, 2 sets Australia Blue, 2 sets Australia I

THE FOLLOWING ARTICLES ARE TO BE RETURNED TO STORES

Sec. & Ref. No.	Nomenclature	Den	Qty. to be Returned	Qty. Returned	Eq. Asst.'s Initials
21F/9	Blankets Colored Single	ea			
22/B/5010	Shirts Khaki Cotton	ea			
	Shirts Service	ea			
	Shoes Canvas Leather Solid	prs			
	Jackets Khaki Drill	ea			
5002	Trousers Khaki Drill	ea			
5004	Trousers Service	prs			
	Caps Winter	ea			
	Overshoes Black	prs			
5029	Mitts Winter	prs			
5034	Rubbers Black	prs			
22C	Suits Aviation	ea			
	Goggles Aviation (Unless with special Lenses)	prs			
	Helmets Aviation	prs			
	Boots Aviation	prs			
24F	Suits Aircrew Trousers (d)	ea			
	Suits Aircrew Blouses (d)	ea			
	Coats Waterproof (R.A.F., R.A.F. & R.N.Z.A.F.)	ea			

(d) To be returned by Ground Crew and R.A.F.

EVERYTHING MUST BE COMPLETED IN ONE STORES PARADE

I CERTIFY THE ABOVE TO BE A TRUE STATEMENT

Airman Inspected.....

25QOR

I CERTIFY THE ABOVE TO BE A TRUE STATEMENT

Inspecting Officer *P/S Cronin*  
 or N.C.O.....

Date.....



Pilots

AIRMAN'S DEFICIENCY LIST

Form R.C.A.F. E.236

9-5

13

No. R-74061

CLOTHING & ACCESSORIES

Adj.

Name Wright. (Surname)

W. A. (Given)

Rank L.A.C. 5971

Trade

I have received equipment in accordance with scales, stated below, and agree that the deficiencies and/or remarks shown on my deficiency list, Form E.236, are correct.

Table with columns: Date, Signature, CAP 16 Vol. III Scales, Date, Signature, CAP 16 Vol. III Scales. Includes handwritten entries for dates like 12-2-43, 29/4/43, 16/5/43, 14/5/44 and scales like B.1 PT I, B-2, B1 PT II, AS, D-39.

B-2 Returned R.V.#CX-29 A.S.

CERTIFICATE FORM 1383 (DEFICIENCY LIST) HAS BEEN RAISED IN ACCORDANCE WITH R.A.F. SCALES OF CLOTHING. 14/44. (SIGNATURE)

CERTIFICATE TO BE SIGNED ON POSTING

Table with columns: CERTIFIED CORRECT ON POSTING (To undermentioned unit, Signature of Issuing Equipment Officer, Date) and VERIFIED CORRECT ON ARRIVAL (From undermentioned unit, Signature of Receiving Equipment Officer, Date). Includes units like No. 6 I. T. S. Toronto, No. 12 E. F. T. S. Godrich, etc.

EQUIPPED TO SCALES LESS STATED DEFICIENCIES

C.A.P. 16 Vol. III SCALE B1 - CLOTHING AND NECESSARIES †

H.W.E. G.T.E. When Leaving Canada OVERSEAS

Table with columns: Ref.No., Description, Qty. Deficient, Scale B1 A.L. No., E.O. Initials, Qty. Issued, I.V. No. & Year, Airmen's Initials. Includes items like Soap, Soap Sums, Shirts S.G. Cotton, Collars, KNIFE, FORK, SPOON, Soap Kit Large.



C.A.P. 16 Vol. III SCALE B2 - FLYING CLOTHING - COMBINED TRAINING ORGANIZATION

Ref. No.	Description	Qty. Deficient	Scale B2 A.L. No.	E.O. Initials	Qty. Issued	I.V. No. & Year	Airmen's Initials
	Overall Combinations	1	14				
	Waist Coat Lifesaving	1	14				

C.A.P. 16 Vol. III SCALE B3 - FLYING CLOTHING - HOME WAR ESTABLISHMENT

Ref. No.	Description	Qty. Deficient	Scale B3 A.L. No.	E.O. Initials	Qty. Issued	I.V. No. & Year	Airmen's Initials

C.A.P. 16 Vol. III SCALE B5 - ACCOUTREMENTS AND STEEL HELMETS - † (HOME WAR ESTABLISHMENT OVERSEAS SCALE)

Ref. No.	Description	Qty. Deficient	Scale B5 A.L. No.	E.O. Initials	Qty. Issued	I.V. No. & Year	Airmen's Initials

C.A.P. 16 Vol. III SCALE D34 OR 39 - ANTI-GAS EQUIPMENT - † (HOME WAR ESTABLISHMENT OVERSEAS SCALE)

Ref. No.	Description	Qty. Deficient	Scale A.L. No.	E.O. Initials	Qty. Issued	I.V. No. & Year	Airmen's Initials

MISCELLANEOUS ISSUES AND RETURNS

Date	Ref. No.	Description	Den.	Qty. Issued	I.V. No.	Initials	Qty. Returned	R.V. No. & Year	E.O. Initials
13/43	22D	Shoes O.R.	ps	1	C-1566	WAKL			
29/4/43	22H	Leather cap white	ea	1	384-43	WAKL	1	0786	KH
	"	Propeller Blue	ea	6	384-43	WAKL			
15/2/43	21E/9	B Blankets 4.5	ea	/	/	/	2	5994	OLPE
		Bags Kit Small	ea	/	/	/	2	43-44	WAKL
								43-44	WAKL

† STRIKE OUT SCALE NOT APPLICABLE.



X 20



2

NAME WRIGHT W.A. RANK Sgt. ACE AGE 18 REG. No. R.74061

UNIT RCAF # 1 MD DATE 18-9-40

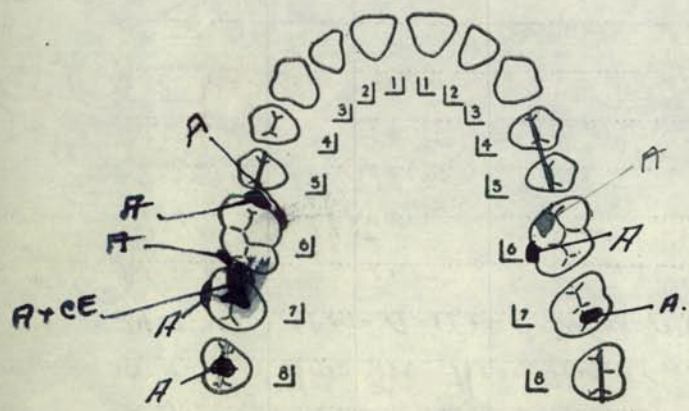
Strike out inapplicable number and words.

ORAL HYGIENE { Good  
Fair  
Neglected

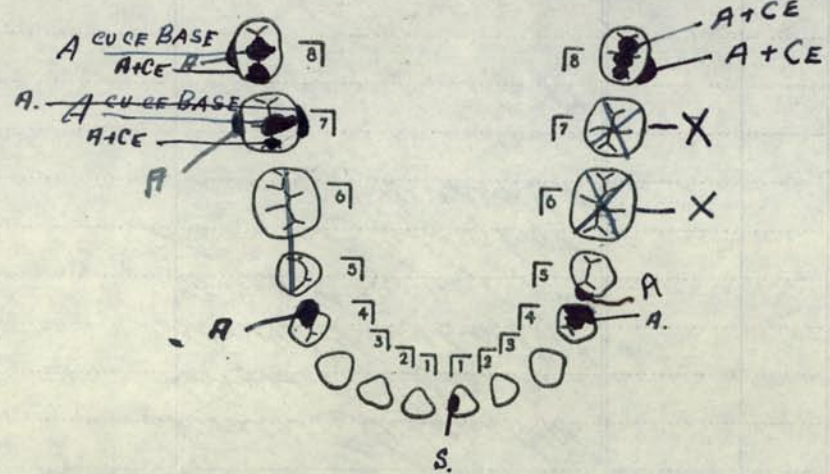
PROPHYLAXIS required { Yes  
No

MUCOSA  
(Describe any pathological condition briefly)

Patient's right



Patient's left



Abbreviations:—

- X Irreparable teeth—extraction
- A Amalgam
- Ce Cement
- S Synthetic Porcelain
- F Foil

- GI Gold } Inlay
- PI Porcelain }
- GC Gold } Crown
- PC Porcelain }
- RC Richmond }
- JC Jacket }

- RC Treatment Root Canal
- V's Vincent's
- Pu Pulpitis
- PO Post Operative
- Pe Periodontia
- Ra X-ray

Describe with sketch  
Br Bridge

- PD Partial } Denture
- CU Complete upper }
- CL Complete lower }
- DA Adjustment }

Irreparable tooth—Mark with an X drawn through diagram of tooth.  
 Caries—Outline defective tissue. Do not fill in space.  
 Edentulous Space—Indicate by a line drawn mesio-distally through diagram of missing teeth.  
 Restoration—Sketch outline and block in shape of all serviceable restorations and write description in space adjoining diagram of teeth.  
 All existing dental conditions must be charted. Use ink, write plainly and abbreviate as indicated above.

① For first examination after enlistment. ② Subsequent examination and treatment.

*A. W. Swinney*  
Signature and unit of examining officer  
1604



Indicate surfaces of teeth as follows:

Mesial — M      Labial — La  
 Distal — D      Buccal — B  
 Incisal — I      Lingual — Li  
 Occlusal — O

Indicate tooth by the notation below.

8 7 6 5 4 3 2 1	1 2 3 4 5 6 7 8
8 7 6 5 4 3 2 1	1 2 3 4 5 6 7 8
Patient's right	Patient's left

Date	Op. No.	Notation Symbol	Description of Treatment	Signature of Operator	Date	Op. No.	Notation Symbol	Description of Treatment	Signature of Operator
16-7-41	1-2	8,7	AG's - O-cure Base	N. S. Lawton Capt.					
18-9-41	3	4/7	AG - DO - PG-B	F. D. M. Howe Lieut.					
30-9-41	4-5-6	6/7	2dp - M. S. Ag - nice.	F. D. M. Howe Lieut.					
17-9-42	8/10	7/10	CE	Donald T. Giddens Capt.					
17-9-42	8/10	7/10	AMALGAMS.	Donald T. Giddens Capt.					
24-9-42	6/10	12/0	17 DO - A 15 M - A	Donald T. Giddens Capt.					
24-9-42		11 M	S	Donald T. Giddens Capt.					
29-9-42		17/16	X -	Donald T. Giddens Capt.					
29-9-42		18(0) 18(8)	A/cc -	Donald T. Giddens Capt.					
30-9-42		17, 16	EMERGENCY - FERRIC PERCHLORIDE	Donald T. Giddens Capt.					
30-11-42	8(0) 7(1) 7(1) 7(1) 7(1)	7(1) 7(1) 7(1) 7(1)	6(1) 7(1) 8(1) 7(1) 7(1)	A. G. Sample Capt.					
25-8-43			16(M)A	P. Z. Michener Capt.					
22-10-44			RE-EXAM COMPLETE	D. S. Sargent Capt.					



NUMBER

RANK

NAME

INITIALS

FORMS M. 10 AND MFB. 465A HELD IN R. 1 IN  
ACCORDANCE WITH THE PROVISIONS OF  
A. M. O. A. 165/44.



NUMBER

RANK

NAME

INITIALS

FORMS M. 10 AND MFB. 465A HELD IN R. 1 IN  
ACCORDANCE WITH THE PROVISIONS OF  
A. M. O. A. 165/44.



# 1 y DEPOT LARVINE.



AIR FORCE No.

R 74061

*Wright*  
SURNAME

*William Albert*  
FULL CHRISTIAN NAME

ENLISTMENT/APPOINTMENT

RELIGION

PLACE *Toronto, Ont.*

DATE *13 Sept. 40*

*U.C.*

R.C.A.F. FORM R230  
150M-7-42 (2446)  
H.Q. 885-R-230

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

BIRTH DATE <i>11 June 22</i>	PLACE <i>Pembroke, Ont.</i>	COUNTRY <i>Canada</i>	CITIZENSHIP <i>Canadian</i>	RACIAL ORIGIN	PARTICULARS OF FAMILY	
CIVIL EDUCATION					SINGLE, MARRIED, WIDOWER, DIVORCED <i>Married.</i>	
PUBLIC SCHOOL					WIFE (FULL MAIDEN NAME) OR HUSBAND <i>Mary Margaret Fortin</i>	
HIGH SCHOOL ENTRANCE					PRESENT ADDRESS (IN PENCIL)	
TECHNICAL SCHOOL					PLACE OF MARRIAGE <i>Pembroke</i>	
CORR./BUSINESS COURSES					DATE <i>23.10.43.</i>	
CIVIL OCCUPATIONS AND EXPERIENCE					AUTHORITY (IF AFTER APPOINTMENT/ENLISTMENT)	

CIVIL OCCUPATIONS AND EXPERIENCE		CHILDREN	
<i>Welder.</i>		NAMES <i>Louise Ann</i>	PLACE AND DATE OF BIRTH <i>1.11.44 (43rd Reg 20)</i>

PREVIOUS SERVICE		NAME(S), ADDRESS(ES), RELATIONSHIP OF PERSON(S) TO BE INFORMED OF CASUALTIES (IN PENCIL)	
<i>M.I.</i>		<i>Mrs. W. A. Wright (Wife) 161 Mac Kay St. Pembroke, Ont.</i>	
		EMPLOYMENT AS INSTRUCTOR OFFICER AIRMAN/AIRWOMAN	
PLACE AND DATE OF MEDICAL	CATEGORY	PLACE AND DATE OF MEDICAL	CATEGORY

TYPE	FROM	TO	TYPE	FROM	TO

OFFICERS				AIRMEN AND AIRWOMEN					OFFICERS, AIRMEN/AIRWOMEN					
RANK, BRANCH AND CATEGORY	DATE	AUTH.	DUTIES PERFORMED DURING SERVICE, E.G. ADJ.	RANK	DATE	AUTH.	TRADE	DATE	AUTH.	COURSE OR TRADE	GRP.	%	PF	DATE
				<i>AG 2</i>	<i>13 9 40</i>		<i>AFM (M) dtd.</i>	<i>13 9 40</i>	<i>TMP. 228</i>	<i>AFM (M) dtd.</i>	<i>7</i>			<i>13 9 40</i>
				<i>AG 1</i>	<i>15 3 41</i>		<i>Q 2 M. M 'e</i>	<i>15 3 41</i>	<i>115.64</i>	<i>AFM.</i>	<i>C.</i>			<i>15 3 41</i>
				<i>2 AG</i>	<i>1 10 41</i>		<i>Q 2 M (M) '91</i>	<i>1 10 41</i>	<i>6 PD 230</i>	<i>AFM.</i>	<i>B.</i>			<i>1 10 41</i>
				<i>2/1 Sgt.</i>	<i>15 10 43</i>	<i>DRO 248</i>	<i>Q 2 M. M</i>	<i>20 9 41</i>	<i>6 PD 286</i>	<i>AFM.</i>	<i>A. 84</i>			<i>1 1 42</i>
				<i>Categorised PA</i>			<i>AFM A.</i>	<i>1 1 42</i>	<i>6 PD 10</i>	<i>Aviation I.T.S. DRO 8</i>				<i>22 11 42</i>
				<i>Categorised CF</i>		<i>GDA</i>	<i>AFM. Avionics</i>	<i>22 11 42</i>	<i>6 PD 275</i>	<i>AFM (M) 'A' w/t.</i>				<i>30 4 43</i>
				<i>Avionics</i>			<i>AFM (M) Avionics</i>	<i>15 8 43</i>	<i>115.64 28 PAES</i>	<i>Avionics Pilot DRO 104</i>				<i>15 10 43</i>
				<i>Avionics</i>			<i>AFM (M) Avionics</i>	<i>30 4 43</i>	<i>115.64</i>	<i>Airman Tel. of Reg</i>				
				<i>TL Sec. Sgt.</i>	<i>15 7 44</i>	<i>115.64</i>	<i>Avionics</i>	<i>15 10 43</i>	<i>115.64</i>					

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

ADVISE ENTRIES  
UNIT RECORDS RETURNED  
TO CANADA  
R71 Raised







CAN. R. 74061 T/Sgt.

WRIGHT, W.A.  
Name and  
Initials

R.A.F. Form 678B

PILOT GRP. 2.

No.

Rank

Trade

From	To	No. days or hours	Leave (Type) *	P.O.R. No.	No. of Free Travel Warrant (if issued) or "Nil"
12.6.44	19.6.44	7 DAYS	PRIV.	138/44	5243652

\*i.e. Priv., emb., sick, dis., 48 hours, compass., spec. (details to be stated).



CONTINUATION :

From	To	No. days or hours	Leave (Type) *	P.O.R. No.	No. of Free Travel Warrant (if issued) or " Nil "

CLOTHING COUPON ISSUES (W.A.A.F.)

DATE	NO. ISSUED	SIGNATURE AS RECEIVING



# CASUALTY

TO: R.C.A.F. Records Officer

15th March

194 6

Request is made for final search in your office for a Will of:-

WRIGHT, William Albert R.74061 F/S

Director of Estates

*Plisk*

TO: Director of Estates

I certify that there is no Will in Records Office for the above.

*E. G. W.*

Dated

MAR 20 1946

194

*R. A. W.*  
R.C.A.F. Records Officer



# CASUALTY

RECORDED  
MAR 19 1946

O. K. . . . . C. I. B. . . . .

R. C. . . . . N. I. . . . .

B. L. . . . . P. A. . . . .



OFFICIALLY PRESUMED DEAD.

B.F. DATE.....

NO. R74061... RANK... FS... NAME... WRIGHT, W.A.....

UNIT OVERSEAS... EFF. DATE Dec. 24/44... D.C.L.#1112 d Aug. 30/45

MFW2643 rec'd... N.A..... MIO (INCLUDING M13) ✓..... *m.j.*

STN. FILE rec'd... 3-1-46... MFB465a DENTAL ENV ✓..... *m.j.*

MIO to DMS(AIR) N.A..... DEATH CERTIFICATE ✓..... *m.j.*

13

30-1-46



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Ottawa, Canada, January 31st, 1946.

R E G I S T E R E D

Mrs. William Albert Wright,  
161 McKay St.,  
Pembroke, Ont.

Dear Mrs. Wright,

Re: F/Sgt. W.A. Wright, (R74061).

Enclosed herewith are the following  
original documents which were submitted by the  
above noted on enlistment in the Royal Canadian  
Air Force:

- 1 Record re Education
- 1 Certificate of Birth
- 1 Certificate of Discharge (Lanark &  
Renfrew Scottish).

Yours truly,

(T.K. McDougall)  
Group Captain,  
for Chief of the Air Staff.

Encls.

GKS



OTTAWA, Canada, December 29th, 1945.

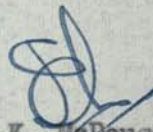
Mrs. William A. Wright,  
161 McKay St.,  
Pembroke, Ont.

Dear Mrs. Wright:

I have the honour to forward herewith the Operational Wing and one accompanying Certificate awarded to your husband Flight Sergeant William Albert Wright, for gallant services in action against the enemy.

May I extend my profound sympathy in your great loss.

Yours very sincerely,



(T.K. McDougall) G/C  
for Chief of the Air Staff

COM/TT

C.A.F. Records Office	
Date JAN 23 1946	
G. K. ....	C. I. E. ....
R. C. ....	N. I. ....
B. L. ....	F. A. ....





DEPARTMENT OF NATIONAL DEFENCE  
NAVY                      ARMY                      AIR FORCE  
STATEMENT OF WAR SERVICE GRATUITY

4  
AIR

D-216-15

DECEASED MEMBER'S NAME

William A.  
(CHRISTIAN NAMES)

Wright  
(SURNAME)

REGISTER NO.

28935

PAYEE

Mrs. W.A. Wright,  
161 McKay St.,  
Pembroke, Ont.

FILE NO.

4 Jan/46

ADDRESS

DATE

R.74061

SERVICE NO.

FS

FINAL RANK OR RATING

24 Dec/44

DATE OF TERMINATION OF OVERSEAS SERVICE

24 Dec./44

DATE OF DISCHARGE

A. TOTAL QUALIFYING SERVICE

NO. OF DAYS 1561 EQUAL TO 52 COMPLETE PERIODS AT \$7.50

\$ 390.00

B. QUALIFYING OVERSEAS SERVICE

NO. OF DAYS 214 LESS 1 INELIGIBLE DAYS, EQUAL TO 213 DAYS @ 25C. PER DAY

53.25

C. SUPPLEMENT FOR OVERSEAS SERVICE

DAILY RATES AT DISCHARGE

PAY	\$ 4.00		
SUBSISTENCE OR LODGING AND PROVISION ALLOWANCE	\$ 1.25		
ADDITIONAL PAY	\$		
	\$		
	\$		
DEPENDENTS' ALLOWANCE 1/30 OF \$ <u>51.12</u>	\$ 1.70		
TOTAL	\$ 6.95	X7 = \$	48.65
NO. OF DAYS <u>214</u>		X\$	48.65
			183

56.89

D. WAR SERVICE GRATUITY

500.14

E. DEDUCTIONS

OVERPAYMENT OF

PAY AND ALLOWANCES \$  
DEPENDENTS' ALLOWANCE AND ASSIGNED PAY \$

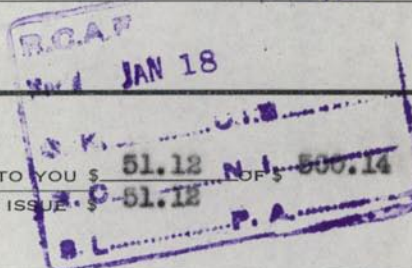
OTHER DEDUCTIONS \$

F. TOTAL AMOUNT PAYABLE

500.14

G. YOUR PORTION OF GRATUITY IS—

DEPENDENTS' ALLOWANCE IN ISSUE TO YOU \$ 51.12 OF \$ 500.14 = \$ 500.14  
TOTAL DEPENDENTS' ALLOWANCE IN ISSUE \$ 51.12



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 JLC  
CHECKED BY PAC

TREASURY  
CHECKED BY [Signature]  
DATE 1/1/46

[Signature]  
SERVICE REPRESENTATIVE



**ROYAL CANADIAN AIR FORCE**

**STATEMENT OF WAR SERVICE GRATUITY**

**S NAME:** WILLIAM A. WRIGHT  
 (Christian Names) (Surname)  
**PAYEE:** MRS W.A. WRIGHT  
 (Christian Names) (Surname)  
**ADDRESS:** 161 MCKAY ST,  
PEMBROKE, ONT.  
**Date of Termination of O/S service** 24 DEC-44

Register No. ....  
 File No. 289351  
 Date 4 JAN-46  
 Service No. R74061  
 Final Rank or Rating F/S  
 Date of Discharge 24 DEC-44

<b>A. TOTAL QUALIFYING SERVICE</b>		\$	\$
No. of days <u>156</u> equal to <u>52</u> complete periods @ \$7.50 <u>30</u>		\$	390.00
<b>B. QUALIFYING OVERSEAS SERVICE</b>			
No. of days <u>214</u> less <u>1</u> ineligible days, equal to <u>213</u> days @ 25¢ per day			53.25
<b>C. SUPPLEMENT FOR OVERSEAS SERVICE</b>			
Daily Rates at Discharge Pay .....\$ <u>4.00</u> Subsistence or Lodging and Provision Allowance .....\$ <u>1.25</u> Additional Pay ..... .....\$ ..... Dependents' Allowance 1/30 of \$ <u>5112</u> .....\$ <u>1.70</u>			
TOTAL \$ <u>6.95</u> x 7 = \$ <u>48.65</u> No. of days <u>214</u> <u>183</u> x \$ <u>48.65</u>			56.89
<b>DD. WAR SERVICE GRATUITY</b>			500.14
<b>E. DEDUCTIONS</b>			
Overpayment of	Pay and Allowances \$		
	Dependents' Allowance \$		
	and Assigned Pay		
Other deductions	\$		
<b>F. TOTAL AMOUNT PAYABLE</b>			500.14
<b>G. YOUR PROPORTION:</b>			
(D.A. in issue to you	= <u>5112</u> of \$ <u>500.14</u> )		
(Total D.A. in issue	<u>5112</u> )		500.14

PREPARED BY <u>J.L.C.</u>	CHECKED BY <u>[Signature]</u>
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ROYAL CANADIAN AIR FORCE

WAR SERVICE GRATUITY - PARTICULARS OF SERVICE

4.00

NUMBER ✓ R74061 FINAL PAID RANK ✓ SST GROUP SS CHRISTIAN NAMES William Albert SURNAME Stright

Reason for termination of service: PDAOL 1112 d/30-8-45

TOTAL SERVICE:

T.O.S. 13-9-40 S.O.S. 24-12-44 1564 DAYS  
 T.O.S. \_\_\_\_\_ S.O.S. \_\_\_\_\_ \_\_\_\_\_ DAYS  
 TOTAL 1564 DAYS

LESS NON-QUALIFYING SERVICE:

Avd From: 21-7-41 To: 22-7-41 2 DAYS  
Avd From: 18-8-41 To: 18-8-41 1 DAYS  
 From: \_\_\_\_\_ To: \_\_\_\_\_ \_\_\_\_\_ DAYS  
 TOTAL QUALIFYING SERVICE 1561 DAYS

OVERSEAS SERVICE:

From: 25-5-44 To: 24-12-44 214 DAYS  
 From: \_\_\_\_\_ To: \_\_\_\_\_ \_\_\_\_\_ DAYS  
 From: \_\_\_\_\_ To: \_\_\_\_\_ \_\_\_\_\_ DAYS  
 TOTAL 214 DAYS

LESS NON-QUALIFYING SERVICE:

From: \_\_\_\_\_ To: \_\_\_\_\_ \_\_\_\_\_ DAYS  
 From: \_\_\_\_\_ To: \_\_\_\_\_ \_\_\_\_\_ DAYS  
 From: \_\_\_\_\_ To: \_\_\_\_\_ \_\_\_\_\_ DAYS  
 TOTAL QUALIFYING OVERSEAS SERVICE 214 DAYS

133  
369  
1564  
1729  
214

3/1

Certified that entitlement to benefits under The War Service Grants Act, 1944 has been established, based on service shown herein.

COMPUTER'S INITIALS	<i>[Signature]</i>
CHECKER'S INITIALS	<i>[Signature]</i>
DATE	8/Dec/45

*[Signature]*  
R.C.A.F. RECORDS OFFICER



ROYAL CANADIAN AIR FORCE

Register No. 28935

File No. \_\_\_\_\_

CASUALTIES ONLY

For purposes of W.S.G.  
Casualties include death  
subsequent to discharge.

THE WAR SERVICE GRANTS ACT, 1944

Ottawa, 13 Dec 1945

TO: Chief Treasury Officer,  
Dependents' Allowance and Assigned Pay Branch

Service No. R14061

Name: William Albert WRIGHT  
(Christian Names) (Surname)

Please supply the following information in respect of the marginally-named at the time of his discharge or death and return this form in duplicate to the undersigned.

24 Dec/44  
(Discharge Date:)

Gordon Wilson S/H  
for (J. MacL. Murray) Air Commodore  
Director of Accounts and Finance.

Names of persons in receipt of D.A. and amounts of monthly awards.	<u>Name</u>	<u>Amount</u>
	<u>Mrs. Mary M. Wright</u>	<u>51.12</u>
	<u>(W.)</u>	

If no D.A. in issue, list names of persons in receipt of A.P. who may be classed as dependents under the War Service Grants Act, 1944, and amounts of monthly assignments.

\_\_\_\_\_ nil

\_\_\_\_\_

\_\_\_\_\_

Names of persons to whom assigned pay was continued by supplementary award after death.

\_\_\_\_\_ nil

\_\_\_\_\_

Amount of overpayment of dependents allowance and/or assigned pay deductible from the War Service Gratuity and name of person to whom paid.

\_\_\_\_\_ nil

\_\_\_\_\_

20.12.1945

W. Bishop  
for Chief Treasury Officer,  
D.A. & A.P. Branch.

C.T.O., D.A.&A.P.

Overpayment of D.A. and/or A.P. recovered from W.S.G. \$ \_\_\_\_\_

\_\_\_\_\_ 1945

\_\_\_\_\_ for C.T.O.











Date

Progress of case

Condition on discharge

Signature of Medical Officer

Date



28935

R 74061

November 29 1945

R-74061-(R-2-1-1)

The Secretary  
Dept. of National Defence (Air)  
Ottawa, Canada.

Attention: R. C. A. F. Records Officer.  
Dear Sir:

I received today, your Registered letter dated November 23, 1945.

As instructed therein, I hereby make application for the gratuity of my late husband  
Lt. / Sgt. Wright - W. A. - R-74061.

I trust that this information will be found



C8512



2  
Satisfactory.

Very truly yours.

Mrs. W. A. Wright

161 McKay Street

Pembroke, Ontario.



# OFFICIAL ROYAL CANADIAN AIR FORCE CASUALTY NOTIFICATION

NUMBER **E74051** RANK **F/Sgt.** UNIT **439 SQDN OVERSEAS**

TRADE **PILOT (SP. CR.)**

R.C.A.F.	R.A.F.	R.A.A.F.	R.N.Z.A.F.	OTHER
<b>X</b>				

NAME **WRIGHT, WILLIAM ALBERT**

PRESENT MARITAL STATUS **MARRIED** RELIGION **U.C.** CANADIAN **YES**

FRENCH CANADIAN \_\_\_\_\_ OTHER \_\_\_\_\_

NEXT OF KIN **MRS WILLIAM ALBERT WRIGHT**

RELATIONSHIP **WIFE**

ADDRESS **161 MCKAY ST. PEMBROKE, ONT.**

FATHER'S NAME \_\_\_\_\_

ADDRESS **MR & MRS HAROLD HUTCHINSON 1224 WRIGHT** LIVING ON ENLISTMENT **YES**

MOTHER'S NAME **PEMBROKE, ONT.**

ADDRESS \_\_\_\_\_ LIVING ON ENLISTMENT **YES**

ADDRESS AT TIME OF ENLISTMENT **PEMBROKE ST. PEMBROKE, ONT.**

MARITAL STATUS AT TIME OF ENLISTMENT **SINGLE**

OCCUPATION **WILDER**

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-4-AUG-45**

**PREVIOUSLY REPORTED "MISSING BELIEVED KILLED" 24-DEC-44  
AFTER AIR OPERATIONS (OVERSEAS) (ARMED RECONNAISSANCE  
FLIGHT OVER AREA OF AACHEN GERMANY)**

**NOW "PRESUMED DEAD" 24-DEC-44 FOR OFFICIAL PURPOSES**

ALL WILLS (2)

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

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

DATE **4-SEPT-45**

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

FOR CHIEF OF THE AIR STAFF



**PROVINCE OF ONTARIO  
VITAL STATISTICS ACT  
REGISTRATION OF DEATH**

Registration Number  
For use of Registrar General only.

MARGIN RESERVED FOR BINDING. WRITE PLAINLY, WITH UNFADING INK. THIS IS A PERMANENT RECORD.

CITIZENSHIP (NATIONALITY) is defined in terms of the country to which the person owes allegiance. The term "Canadian" should be used as descriptive of a person who was born in Canada or who has rights of Citizenship in Canada, unless he or she has subsequently become the citizen of another country.  
RACIAL ORIGIN is defined in terms of the people or race to which the person—traced through the father—belongs, whether English, Irish, Scottish, French, German, Russian, Ukrainian, etc. The terms "Canadian" or "American" should not be used for RACIAL ORIGIN, as they express CITIZENSHIP (NATIONALITY).

**1. PLACE OF DEATH**  
City, Town or Village of OVERSEAS (GERMANY) Street.....  
(If death occurred in a hospital or institution, give the name instead of street and number)  
Township of..... County or District of.....

**2. LENGTH OF STAY**  
In Municipality where death occurred..... In Province..... In Canada (if immigrant).....  
(in years, months and days)

**3. PRINT FULL NAME OF DECEASED** WRIGHT WILLIAM ALBERT  
(Surname or last name) (Given or Christian names)

**4. PERMANENT RESIDENCE OF DECEASED:**  
City, Town or Village of Pembroke Street Pembroke Street  
Township of..... County or District of..... Province of Ontario

<b>5. SEX</b> <u>Male</u>	<b>6. CITIZENSHIP</b> <small>(See marginal note)</small> <u>Canadian</u>	<b>7. RACIAL ORIGIN</b> <small>(See marginal note)</small>	<b>8. Single, Married, Widowed or Divorced</b> <small>(Write the word)</small> <u>Married</u>	<b>9. BIRTHPLACE</b> (Province or Country) <u>Ontario</u>
------------------------------	--	---	---	--

**10. Date of Birth** June 11th 1922 **11. AGE** } Years Months Days If less than one day  
(Month by name) (Day) (Year) } 22 hrs. or min.

**OCCUPATION**  
**12. (a) Trade, profession or kind of work as spinner, grader, clerk, etc.** Pilot  
**(b) Kind of industry or business, as paper mill, lumber, bank, etc.** R.C.A.F.  
(If "Labourer" specify kind of work above)

**13. Date deceased last worked at this occupation** Dec. 24th 1944 **14. Total years spent in this occupation** Four

**15. If married, widowed or divorced give name of husband or maiden name of wife of deceased** Fortin, Mary Margaret

**16. Name of father** Wright Harold Hutchinson  
(Surname or last name) (Given or Christian names)

**17. Maiden name of mother** Gordon Eva Luella  
(Surname or last name) (Given or Christian names)

**18. Birthplace:** Father Ontario Mother Ontario  
(Province or Country) (Province or Country)

**19. I certify the foregoing to be true and correct to the best of my knowledge and belief.**  
Given under my hand at Ottawa this 28th day of September 19 45  
Signature of informant [Signature] Relationship to deceased.....  
Address For (R.C.A.F. Records Officer)

**20. Burial, Cremation or Removal**..... Date..... 19.....  
(Month by name) (Day) (Year)  
Place of Burial..... Cemetery.....  
(Municipality)  
Burial Permit was issued by..... Address.....

**21. Funeral Director:** Name..... Address.....

**22. Marginal notations (Office use only)**

**MEDICAL CERTIFICATE OF DEATH**

**23. DATE OF DEATH** December 24th 19 44  
(Month by name) (Day) (Year)

**24. I HEREBY CERTIFY** that I attended deceased from..... 19.....  
to..... 19....., and last saw h..... alive on..... 19.....

I Immediate cause <small>Give disease, injury or complication which caused death, nor the mode of dying, such as heart failure, asphyxia, asthenia, etc.</small>	CAUSE OF DEATH		DURATION		
	(a)	(b)	Yrs.	Mos.	Dys.
Morbid conditions, if any, giving rise to immediate cause (stated in order proceeding backwards from immediate cause).	<u>Previously reported missing after air operations, now for official purposes, presumed dead.</u>				
	(b) due to				
	(c) due to				
II Other morbid conditions (if important) contributing to death but not causally related to immediate cause.					

**25. If a woman, was the death associated with pregnancy?**..... Duration..... weeks. Was there a delivery?.....

**26. Was there a surgical operation?**..... Date of operation..... 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 Date of injury December 24th 19 44  
(State which)  
Manner of injury Presumed killed during air operations (armed reconnaissance flight)  
Nature of injury.....  
Specify whether injury occurred in INDUSTRY, in HOME, or in PUBLIC PLACE public place

**Signed by**..... **Designation**..... M.D., Coroner, etc.  
**Address**..... **Date**..... 19.....

In case of Stillbirth consult reverse side before making out certificate.



## INSTRUCTIONS

**Physician's Statement of Cause of Death.**—The morbid conditions relating to death are divided on the certificate into two groups. In Group I are those related to the "Immediate Cause" of death, and in Group II, those not causally related thereto. In most cases a statement of cause under Group I will suffice. Detailed certification is not desired, the entry of a single cause being preferable in all cases where this can be regarded as adequate (see Example I), but where the physician finds it necessary to record more than one cause it is important that these be stated in the position provided on the form as indicative of their mutual relationship. This information is sought so that the selection of the cause for tabulation may be made in the light of the certifier's viewpoint:—

- (a) Name first the "Immediate Cause" of death, i.e. the disease, injury or complication which caused death (not mode of dying or terminal condition).
- (b) Then give other morbid conditions (if any) of which it was the consequence, in order of causal relationship (due to) stating the most recent one first and then others in order.
- (c) Entries under Group II should be reserved for "other important contributory morbid conditions" in those instances particularly in which death was due to a combination of maladies, none of which would have been fatal alone. In such cases the physician's judgment alone can afford guidance to the tabulator.
- (d) Use always accepted terms for morbid conditions and never record mere symptoms.
- (e) **Maternal Deaths.**—Qualify all diseases resulting from childbirth, miscarriage or abortion by the word "Puerperal", e.g., puerperal septicaemia. Distinguish between septicaemia originating in abortion and in childbirth.
- (f) **Cancer.**—In all cases the organ or part first affected should be specified.
- (g) **Violent Deaths.**—Coroners, medical examiners and physicians who certify to deaths from violent causes should always clearly indicate the fundamental distinction of whether the death was due to **accident, suicide, or homicide**, and then state the manner and nature of injury. The circumstances of each accident should be stated as fully as possible, e.g., an **automobile accident** should always be designated as such.

The following examples illustrate the essential principles in the use of the form.

I.	Example 1	Example 2	Example 3	Example 4	Example 5
Immediate Cause.....	(a) Lobar pneumonia	(a) Pulmonary tuberculosis	(a) Acute peritonitis	(a) Bronchopneumonia	(a) Uraemia
Morbid Conditions, if any, giving rise to immediate cause (stated in order proceeding backwards from immediate cause).	due to (b) _____  due to (c) _____	due to (b) _____  due to (c) _____	due to (b) Acute appendicitis  due to (c) _____	due to (b) Operation  due to (c) Strangulated inguinal hernia	due to (b) Chronic nephritis  due to (c) _____
II.	II.	II.	II.	II.	II.
Other morbid conditions (if important) contributing to death but not causally related to immediate cause.	_____	_____	_____	Chronic interstitial nephritis	Chronic bronchitis

### STILLBIRTH

"A dead-birth (stillbirth) is the birth of a (viable) foetus, after at least twenty-eight weeks pregnancy, in which pulmonary respiration does not occur; such a foetus may die either: (a) before, (b) during or (c) after birth, but before it has breathed."

**The special stillbirth registration form (buff coloured) must be used in registering a stillbirth.**



APPENDIX "B"

*memo 24.12.44*

R.C.A.F. OPERATIONAL BADGE. STATEMENT OF OPERATIONAL DUTY

*% 1787/45  
d. 16.11.45*

NO. R. 061 RANK F/S NAME Wright, W.A.

NO. OF SORTIES	OPERATIONAL FLYING HOURS	PERIOD FROM	TO	SQUADRON
4	4:10	8.12.44	- 24.12.44	439

DATE 30.12.44 SIGNATURE OF ADJUTANT *C. Johnson* F/c

CERTIFIED THAT THESE PARTICULARS HAVE BEEN CONFIRMED WITH AND AGREE WITH THE RELEVANT ENTRIES IN THE LOG BOOK OF THE ABOVE NAMED.

DATE 4/1/45 SIGNATURE OF C.O. *C. Nesbitt* 9/c

UNIT NO. 143 WING HEADQUARTERS.

**R.C.A.F. CANADA**  
**JAN 9 1945**  
**619**

M.B.K. - K.O.S. N/EU-25.12.44 - AFRO 89/3705  
Presumed dead - 24.12.44.

*checked 23.6.45*



APPENDIX 'A'

COPY

APPLICATION FOR

OPERATIONAL BADGE

R.C.A.F. OPERATIONAL BADGE - DECLARATION BY C.O.

0/1787/45  
d. 16.11.45

No: **R.74061** Rank: **F/S** Name: **Wright, W.A.**

Squadron: **439** Type: .....

No. of sorties: **4** No. of Operational Hours: **4:10**

Period - from: **8.12.44** To: **24.12.44**

(State accumulated hours completed in another command or Squadron, if applicable)

CERTIFICATE

I hereby declare that the above named has completed an operational tour and is therefore eligible for the R.C.A.F. Operational Badge.

Date: **4.1.45** Signature of C.O.: **(A.D. Nesbitt)G/C**

Date: ..... Confirmed: .....

R.C.A.F. Record Office

1945  
Royal Canadian Air Force Overseas.

A.M.O. A1169/43.

C. K.	C.I.B.
R. C.	P. I.
B. L.	P. A.



CORNER LAKE AND ALBERT STS.

# WRIGHT GLOVE WORKS

MANUFACTURERS OF

"WRIGHT'S" DEPENDABLE BRAND  
GLOVES, MITTS AND MOCCASINS

CASH PAID FOR HIDES, WOOL AND RAW FURS

PEMBROKE, ONT.,

August 2nd.

19 40

TO WHOM IT MAY CONCERN:

This is to CERTIFY that BERT. WRIGHT was formerly in our employ, during which time he proved to be a careful and conscientious worker, with the interest of his employers always in mind.

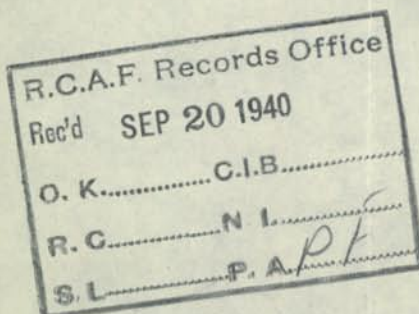
AS to his honesty and character, we unhesitatingly vouch for same, as the writer has known him since childhood, and had the pleasure of having him as member of the 1st. Pembroke Troop of Boy Scouts.

We honestly believe he will prove to be as careful in any position entrusted to him, as he proved to be when in our employ.

Very truly yours,

WRIGHT GLOVE WORKS,

Per *W. Wright*



"DEPENDABLE" SINCE 1886



- THE -  
**STEEL EQUIPMENT COMPANY**  
- LIMITED -

D.P. CRUIKSHANK  
PRESIDENT

FILING  
CABINETS

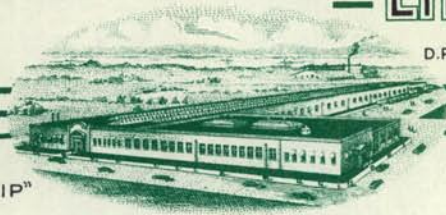
STEEL  
FURNITURE

STEEL  
LOCKERS

STEEL  
SHELVING

BENTLEY'S CODE  
CABLE ADDRESS  
"STEEL EQUIP"

SALES OFFICE  
OTTAWA



**PEMBROKE, ONT.**  
CANADA

July 25, 1940

TO WHOM IT MAY CONCERN:

Albert Wright

The above named employee has been with this Company since January 5/40. He has proven himself industrious and reliable in the discharge of his duties and we are pleased to recommend him to anyone requiring his services.

Yours very truly,

THE STEEL EQUIPMENT COMPANY LTD.,

By,

*Ida L Hamilton*

ILH/ER

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





A.F. No. R74061 Sgt. Name Wright, W.A.

EVIDENCE OF MARRIAGE

Description of Document: **Certif. of Marriage** Number L 91042

ISSUING AUTHORITY **Rev. P.T. Jeffrey**

HUSBAND (Full Name) **William Albert Wright**

WIFE (Full Maiden Name) **Mary Margaret Fortin**

DATE OF MARRIAGE **23 Oct./43**

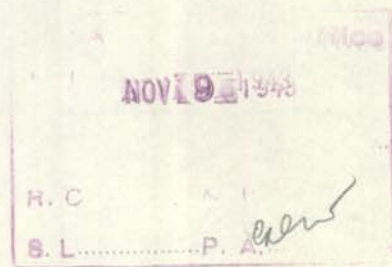
PLACE OF MARRIAGE **Pembroke, Ont.**

CERTIFIED TRUE EXTRACT

Date: Nov. 1/43

\_\_\_\_\_  
(signature & rank)

A.F.M. #13





(6) ASSESSMENT OF SUITABILITY FOR FURTHER TRAINING

SCHOOL	SINGLE ENGINE	TWIN ENGINE	FLYING INSTRUCTOR	STAFF PILOT	RECONNAISSANCE PILOT	FIGHTER PILOT	BOMBER PILOT
E.F.T.S.	(P) ▲	▲	▲	▲	▲	▲	▲
S.F.T.S.							

(7) S.F.T.S. FINAL STANDING	(8) ASSESSMENT OF CHARACTER AND LEADERSHIP TOTAL	(9) CERTIFIED:
Marks Obtained		(a) That this pupil pilot has (has not) passed all tests required for Pilot's Flying Badge.
Flying (Para. 3)	I.T.S. 94	(b) That this pupil is (is not) authorized to wear the Pilot's Flying Badge, w.e.f.
G.F.S. (Para. 1)	S.F.T.S.	
Character & Leadership (Para. 8)	TOTAL	
TOTAL		Chief Instructor
PERCENTAGE		No. S.F.T.S.
STANDING IN CLASS		

(10) SIGNATURES OF OFFICERS IN CHARGE - WITH REMARKS, IF NECESSARY

(a) I.T.S. Academically only fair, however he has applied himself well and is doing a good job of work. A personable trainee well liked by his associates and one who has a good deal of practical ability.  
Second Aircrew Recommendation: Air Bomber.

(A.J. Hanchet Taylor) Wing Commander,  
Commanding Officer,  
No. 6 I.T.S.

(b) E.F.T.S. 67 Average student. Has average airmanship. Take-offs & landings average. Turns fair, slips & slides slightly at times. Judgement on forced landings average. Instruments fair, a little slow on recovery from unusual positions. Spins good. Rolls improving with practise. Tends to be overconfident & a little lax at times.

W. King  
Chief Flying Instructor,  
No. 12 E.F.T.S.

(c) S.F.T.S.

Chief Instructor  
No. S.F.T.S.

(d) S.F.T.S.

Commanding Officer,  
No. S.F.T.S.

NOTES ON USE AND DISTRIBUTION OF F. 56A

- Actual marks to be given for 1, 2, 7, and 8.
- Para. 2 - Total for E.F.T.S. is from 60 hour Clear Hood Test and Instrument Test only (omit 20 hour test in total).
- Paras. 3 and 6 to be assessed as Ex., A.A. A., B.A., P. (A.F.A.O. A.51/2).
- Para. 5 - the letter "P", which is the pupil's preference for further training, is to precede the assessment, i.e. "P.(Ex.)".
- Para. 7 is for Service Flying Training Schools only.



ROYAL CANADIAN AIR FORCE

R.C.A.F. T.58A

Revised: 1-42

REPORT ON PUPIL PILOT - FLYING AND GROUND TRAINING

Date of Birth:

June 11th, 1923.

SURNAME: WRIGHT CHRISTIAN NAMES: William Albert NUMBER: R.74061 RANK: LAC  
 I.T.S. No. 6 TORONTO COURSE NO. 73 FROM: Feb. 22nd, 1943 TO: April 30th, 1943  
 E.F.T.S. #12 EFTS Goderich COURSE NO. 80 FROM: 3/14/43 TO: 25/June/43  
 S.F.T.S. COURSE NO. FROM TO  
 TRAINEE FROM: CAN. XXXX U.K. AUS. N.Z.

(1) G. I. S. RESULTS

(2) FLYING RESULTS

SUBJECTS	Finals			Supps.			TESTS	EFTS	SPTS
	ITS	EFTS	SPTS	ITS	EFTS	SPTS			
1. Mathematics	66						20 Hours	66	
2. Law, Discipline	87						Instrument	69	
3. Navigation	91	112					Clear Hood	107	
4. General Studies							Navigation	39	
5. Airmanship	76	159					TOTAL OBTAINED	215	
6. Airframes							TOTAL POSSIBLE	300	
7. Aero-Engines							PERCENTAGE	71.7	
8. Theory of Flight							NUMBER IN CLASS	37	
9. Anti-Gas	24			31			POSITION IN CLASS	8	
10. Armament (Written)	44	44					(3) FLYING APTITUDE		
11. Armament (Practical)	43	42					1. Natural Skill	A	
12. A/C Recognition	73	62					2. Skill in Landing	A	
13. Drill	81						3. Airmanship	A	
14. Signals (Written)	80	45			70		4. Cockpit Drill	A	
15. Signals (Practical)	50						5. Instrument Flying	A	
16. Meteorology	32						6. Night Flying	A	
TOTAL OBTAINED	747	469			754		7. Aerobatics	A	
TOTAL POSSIBLE	1000	700					8. Formation Flying		
PERCENTAGE	75	67.3					9. Map Reading	A	
NUMBER IN CLASS	80	37					10. Wind Speed & Direction Finding (TE)		
POSITION IN CLASS	71	34					11. Straight Runs over as Pilot (TE)		

(4) FLYING TIME

School	Type AC	DAY		N I	G.H.T.A.	F. Records Office	Link	NAVIGATION		Dual to first Solo	Passenger
		Dual	Solo					Dual	Solo		
#12 EFTS	T. Moth	32.05	37.45	5.00	O.K.	2 NOV 1943	10.15	13.00	4.25	4.00	8.05
					J.B.						
					R.C.						
					J.B.						

(5) ACCIDENTS (C.A.P. 160 Sec. 4)

School	Type of Aircraft Para. 27	Assessment of Blame Para. 25	Previous Communications	Signature of C.S.O. or C.F.I.



R.C.A.F. - TRAINING REPORT

PILOT

NO. 1 SERVICE FLYING TRAINING SCHOOL

1. SURNAME BRIGGS CHRISTIAN NAMES William Albert  
 2. NUMBER 87403 3. RANK LAC 4. COURSE NO. 84  
 5. POSTED FROM 112 R.C.A.F. 6. DATE COURSE COMMENCED June 26/43 7. DATE COURSE ENDED Oct. 15/43 8. POSTED TO 11 D.F.U.

9. GROUND EXAMINATIONS			10. FLYING TESTS		
SUBJECT			SUBJECT		
(A) AIRMANSHIP	200	106	(A) GENERAL FLYING	300	207
(B) ARMAMENT	200	142	(B) INSTRUMENT FLYING	200	140
(C) NAVIGATION	200	118	(C) NAVIGATION	150	94
(D) SIGNALS	200	137	(D) ARMAMENT	150	98
(E) AIRCRAFT RECOGNITION	100	89	(E) NIGHT FLYING	100	72
(F) METEOROLOGY	100	40	(F) FORMATION	50	35
			(G) LINK TRAINER	50	37
TOTAL	1000	642	TOTAL	1000	683
PERCENTAGE		64.2	PERCENTAGE		68.3

11. ASSESSMENTS OF QUALITIES OF CHARACTER AND LEADERSHIP	MARKS ALLOTTED	MARKS OBTAINED
	100	63.3

DEGREE OF SUITABILITY FOR FURTHER TRAINING	0	1	2	3
	NOT AT ALL SUITABLE	MODERATELY SUITABLE	DEFINITELY SUITABLE	EXTREMELY SUITABLE
12. FOR BOMBER TYPE AIRCRAFT		X		
13. FOR FIGHTER TYPE AIRCRAFT			X	
14. FOR GENERAL RECONNAISSANCE AIRCRAFT	X			
15. FOR ARMY CO-OPERATION AIRCRAFT		X		
16. FOR FLYING BOATS		X		
17. AS A FLYING INSTRUCTOR	X			

(MARK "X" IN APPROPRIATE COLUMN FOR EACH)

18. IF A COPY OF THE O.T.U. REPORT FOR THIS PUPIL IS DESIRED, MARK HERE

19. REMARKS :- An average, keen pilot who is overconfident and unreliable.

DATE.....

SIGNED..... *[Signature]*.....  
 COMMANDING OFFICER.



20. FLYING TIMES (AT THIS UNIT):

TYPE OF AIRCRAFT	TIME	DUAL TO 1ST SOLO	TOTAL DUAL	SOLO	PASSENGER	FORMATION	INSTRUMENT	LINK TRAINER
HARV.	DAY	8.05	77.45	53.00				
	NIGHT	9.30	9.15	11.00	19.00	15.50	26.35	23.15

21. FLYING ACCIDENTS:- ALL FLYING ACCIDENTS IN WHICH THIS PUPIL WAS CONCERNED WHILE AT THIS UNIT ARE TO BE NOTED BELOW, WHETHER SERIOUS OR TRIVIAL, WHETHER OTHERWISE REPORTED OR NOT. IF THERE WERE NO SUCH ACCIDENTS, WRITE IN "NONE".

(1) TYPE OF AIRCRAFT	(2) DATE OF ACCIDENT	(3) DAY OR NIGHT	(4) PREVIOUS REPORTS	(5) NATURE OF ACCIDENT	(6) AMOUNT OF DAMAGE	(7) DEGREE OF PUPIL'S RESPONSIBILITY
None						



RECAPITULATION OF TRAINING AND PERSONAL ASSESSMENTS FOR COMMISSIONING PURPOSES

1. SURNAME Wright ..... CHRISTIAN NAMES William Albert .....  
 2. NUMBER R74061 ..... RANK LAC .....

	(1) % of Training Marks Attained Ground Air		(2) Training Index	(3) Multiply by Weight Factor	(4) Final Training Index	(5) % of C&L Marks Attained	(6) Multiply by Weight Factor	(7) Final C&L Index	(8) Total Index
<u>PILOTS</u>									
ITS	74.7	-	74.7	2	149.4	62.7	-	62.7	212.1
EFTS	64.2	68.3	132.5	2	265.0	63.3	2	126.6	391.6
SFTS									
Suppl.	(66.4)		(134.7)		(269.4)				(396.0)
					(418.8)				(608.1)
	TOTAL				414.4	TOTALS		189.3	603.7
<u>NAVIGATORS</u>									
ITS				2			2		
AOS or AND				2					
	TOTAL					TOTALS			
<u>NAVIGATORS "B"</u>									
ITS				2					
B&G							2		
ACS or ANS				2					
	TOTAL					TOTALS			
<u>NAVIGATORS "W"</u>									
ITS									
W/S									
AOS or ANS									
	TOTAL					TOTALS			
<u>AIR BOMBERS</u>									
ITS				2					
B&G				2			2		
ACS or ANS									
	TOTAL					TOTALS			



	(1) % of Training Marks Attained Ground Air	(2) Training Index	(3) Multiply by Weight Factor	(4) Final Training Index	(5) % of C&L Marks Attained	(6) Multiply by Weight Factor	(7) Final C&L Index	(8) Total Index
W.A.G.s			5			5		
W/S	.....	.....	.....	.....	.....	.....	.....	.....
B&G	.....	.....	.....	.....	.....	.....	.....	.....
	TOTAL				TOTALS			
AIR GUNNERS								
B&G	.....	.....	.....	.....	.....	.....	.....	.....
	TOTAL				TOTALS			

INSTRUCTIONS FOR USE OF FORM 5000A (RE/CAP SHEET)

Following instructions are issued for your guidance in completing this Form:

Column 1

- (a) Enter % of ground marks attained.
- (b) Enter % of air marks attained.

Column 2

Percentage of ground marks plus percentage of air marks.

Column 3

The weighting factor by which Column 2 is to be multiplied.

Column 4

Result of Column 2 multiplied by the weighting factor in Column 3. This figure to be entered under Column (g) of Class Report.

Column 5

Percentage of character and leadership marks attained.

Column 6

Weighting factor by which Column 5 is to be multiplied.

Column 7

Result of Column 5 multiplied by the weighting factor in Column 6. This figure to be entered under Column (i) of Class Report.

Column 8

Result of Column 4 added to Column 7. This figure to be entered under Column (j) of Class Report.



**CONFIDENTIAL**

R.C.A.F. M. 2  
300M-4-41 (87)  
H.Q. 1062-10-2

**ROYAL CANADIAN AIR FORCE**

Medical Board held at No. 6 Repair Depot Date 31-7-42  
Trenton, Ontario

FILE NUMBER  
874061

Surname WRIGHT Chr. Names WILLIAM ALBERT  
Nature of Commission..... Date of Birth 11-6-42 Married or Single Single  
Branch..... Hours Flown 2 hours Dual  
Address Box 196 Pembroke, Ontario

HAVE YOU ANY HISTORY OF:—

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

Education 2 years High School, 1 year Commercial School  
Present Occupation A.F.M. Hobbies Photography, model aeroplanes  
Previous Service 2 years Non-Perm. Active Militia  
Athletics Softball, running, hockey  
Habits—Smoking Moderately Alcohol No  
FAMILY HISTORY—Consumption No Diabetes No Haemophilia No  
Nervous Ailments, Mental Trouble, or "Fits" No  
Father Alive—Health Good Dead—Cause.....  
Mother Alive—Health Good Dead—Cause.....  
Brothers (O.) Alive—Health.....(1.) Dead—Cause..... Not known  
Sisters (1.) Alive—Health Good.....(1.) Dead—Cause..... Stillborn

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 accepted for Service, or if accepted, of being discharged or retired and forfeit any claim to gratuity or other award.

Date 31/7/42 Signature Wright W.A. Witness D. L. Purdon P.S.

R.C.A.F. Records Office  
MAY 13 1948  
C.I.B.

(4) (12)



**GENERAL MEDICAL AND SURGICAL EXAMINATION**

Impression given by (a) Physique Athletic (b) Mentality Average  
 Body Marks, Scars, Deformities Linear scar on rt. cheek, mole rt. buttock  
 Size of Thyroid Gland Not palpable  
 Surgical Abnormalities None  
 Results of Wounds, Injuries, Operations None

	Date <u>31-7-42</u>	M.S.B. Date <u>4-3-43</u>	Date.....	REMARKS ON ANY ABNORMALITIES FOUND	
Height (ins.).....	67	67		Date.....	
Weight (lbs.).....	135	126			
Chest Circumference (ins.).....	33	-			
Body Build (lbs.).....		-14			
LEG LENGTH (ins.).....	41	-			
Pulse Rate {	Sitting.....	84	84		
	Standing 1st.....	84			
	Standing 2nd.....	84			
	After Exercise.....	108			
	Time to Normal.....	30 sec.			
Arterial Walls.....	Soft	Soft		Date <u>31-7-42</u> Soft mitral systolic murmur.	
Blood Pressure {	Systolic.....	125	118		
	Diastolic.....	75	60		
Room Temperature.....		Warm			
Heart {	Size (in cms.).....	Normal	N.		
	Sounds.....	Mitral Syst.	Mitr. syst.		
	Rhythm.....		Reg.		
Lungs {	Inspection.....	Normal	Clear		
	Palpation.....	N			
	Percussion.....	N			
	Auscultation.....	N			
	Expiratory Force.....	N			
X-Ray.....				Date.....	
Reflexes {	Knee.....	Normal	N.		
	Ankle.....	N	N.		
	Triceps.....	N	N.		
	Abdominal.....	N	N.		
	Plantar.....	N	Flex.		
Cranial Nerves.....		N			
Balancing Rod.....	R. L.	R. L.	R. L.		
		-			
Self Balancing.....	R. L.	R. L.	R. L.		
		lu 2u			
Tremors {	Fingers.....	No	nil	Date.....	
	Eyelids.....	No	nil		
Abdomen {	Liver.....	Normal	N.P.		
	Spleen.....	N	N.P.		
	Muscular Tone.....	N	Fair		
Urine {	Albumen.....	Neg.	Neg.		
	Sugar.....	Neg.	Neg.		
Initials of M.O.	<u>Q.P.P</u>	P.E.R.			

40 mm. Hg. Test..... 40 sec. 688/888/88 Q.P.P  
 Date..... 4/Mar/43: 7/7910/998/867/87 = 54 secs. 1st try (1) P.E.R.  
 Date.....  
 Date.....  
 Date.....



EYE EXAMINATION

History..... None ..... No symptoms.....

Visual Acuity { R.  $\frac{20}{15}$ ,  $+2.50$  = Blur ..... 20/20 + 2.50 = 20/200  
 L.  $\frac{20}{15}$ ,  $+2.50$  = Blur ..... 20/20 + 2.50 = 20/200

Colour Vision..... Normal Ishihara ..... N. (9th Ishi)

Red, Green..... Esophoric ..... M.R. @ 20' Exo 1; Rt. hyper.  $\frac{1}{2}$   
 @ 15" Exo 13 Rt. hyper  $\frac{1}{2}$

Diaphragm Test (P.D. = 66) Bar 1 ..... P.D. 68 Bar at 3

Convergence { C. = 6 cms ..... 6  
 S. C. = 8 cms ..... 13

Accommodation { R. 7 ..... 9  
 L. 7 ..... 9

Cover Test..... No latency ..... @ 20' N; @ 15" Mod. Div. Dev. R.R.

Fundi and Media..... Normal ..... N

Fields..... Normal ..... N

REMARKS:  
 Fit

Borderline ALB  
 Fit A3B

Initials of M.O. *A.P.* ..... Initials of M.O. *JVVN* ..... Initials of M.O. ....  
 Date 31-7-42 ..... Date Mar. 4/43 ..... Date .....

EXAMINATION OF EAR, NOSE AND THROAT

History..... None ..... Nil

Hearing	R. Ear	W.V. - 20 ft	W.V. 20'
	L. Ear	W V - 20 ft	W.V. 20'
External Ear, Meatus Membranes	R. Ear	Normal	N.
	L. Ear	Normal	N.
Middle Ear, Eustachian Tubes	R. Ear	Patent	Pat.
	L. Ear	Patent	Pat.
Cochlear Apparatus	R. Ear		
	L. Ear		
Vestibular Apparatus	R. Ear		
	L. Ear		
Buccal Cavity		Normal	N
Teeth		Cavies Present	Good
Gums		Normal	N
Pharynx		N	N
Nasopharynx		N	N
Nose		N	Clear
Larynx		N	N

REMARKS:  
 Fit

Initials of M.O. *A.P.* ..... Initials of M.O. *J.L.T.* ..... Initials of M.O. ....  
 Date 31-7-42 ..... Date 4-3-43 ..... Date .....





GENERAL REMARKS BY THE MEDICAL OFFICER ON HIS IMPRESSIONS  
OF THE CANDIDATE

31-7-42 Fit for Aircrew A1B A3B

*A. L. Purdon F/10*

OBSERVATIONS AND FINDINGS OF THE REVIEWING MEDICAL OFFICER

Date..... *4/Mar/43.*

Sedentary physique; rather flabby, underweight.

FIT: A1B *Borderline A1B*

Fairly laert lad; somewhat uncouth, and hap-  
hazard in attitude. Stable and mature, moti-  
vation is on the vague side. Not impressive.

A3B - TURRET

NO. 6 MED. SEL. BOARD  
C.I.T.S. R.C.A.F. TORONTO  
MAR 4 1943  
*A. J. McGeorge* PRESIDENT

#5 P 04 G

P.E.R.

~~A3B - VISION~~

N. VISION	<i>27/32 (above average)</i>
C. E. G.	
E. C. G.	
D. CHAMBER	<b>NORMAL</b>



R.C.A.F.CERTIFICATE OF EDUCATION

THIS IS TO CERTIFY THAT

R74061

(Number)

WRIGHT, W.A.

(Name)

has been a trainee at the Pre-Aircrew Education Course at

University of Toronto,  
Toronto, Ontario.

(Place)

under the auspices of the University **Pre-Aircrew Education** Programme. He has  
~~War Emergency Training~~  
 taken the Royal Canadian Air Force final examination in the following subjects  
 and (HAS) (~~HAS NOT~~) been recommended as educationally qualified for the  
 category of AIRCREW (I.T.S.).

<u>Subject</u>	<u>Mark</u>
English <b>N.A.</b>	_____
Science	<u>76</u>
Mathematics	<u>50</u>
<b>Signals</b>	<u>88</u>
Remarks:	

Date: 12/ Feb / 43Signed: J Forman 7/4  
(Examination Officer)

R.C.A.F.	Office
Rec'd	FEB 12 1943
O. K.	.....
G.	.....

*Jub*



65E

P.A.  
WRP

RECOMMENDATION FOR AIRCREW TRAINING

CIRCULATION SLIP

NO. *R74061* RANK *LAC.* NAME *Wright, W.A.* TRADE *A.F.M. "A"*

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	<i>Educational Course</i>	
Checked by A.P.2b	<i>WMP</i>	
Pass to A.P.3A	<i>13-11-42</i>	
Present Posting	<i>6RD</i>	
Card <del>Removed</del> <i>Annotated</i>	<i>WMP</i>	
Checked by A.P.3A	<i>WMP</i>	<i>13-11-42</i>
Pass to A.P.3B1		
Posted to <i>Junior</i> Effective	<i>16-11-42</i>	<i>WMP</i>
Letter written		<i>Rh</i>
Checked by A.P.3B1		
Returned to A.P.2B		
Entries completed		
Noted on Seniority Roster		
Pass to R.O.		
For Document File		

R.C.A.F. Records Office  
NOV 19 1942  
*[Signature]*



ROYAL CANADIAN AIR FORCE  
INTERVIEW REPORT

APPENDIX "D"

1. SURNAME WRIGHT LAC R74061

2. CHRISTIAN NAMES W.A.

3. APPLYING FOR ENLISTMENT AS Remuster Aircrew

SELECTION BOARD

4. PERSONNEL OFFICER

Education X Ont. W.E.T.P.  
Course Passed

C.T. Score 37 Date 6-8-42 C.A.T. \_\_\_\_\_ Date \_\_\_\_\_

ASSESSMENT: (Educational Standing: Ability to Learn: Personal Background)

Not RECOMMENDED FOR Posting Signed R.W. Philp F/L

SUITABLE FOR COMMISSION \_\_\_\_\_

5. MEDICAL OFFICER

Medical Category \_\_\_\_\_

ASSESSMENT: (Physical: Temperamental)

RECOMMENDED FOR \_\_\_\_\_ Signed \_\_\_\_\_

SUITABLE FOR COMMISSION \_\_\_\_\_ Date \_\_\_\_\_

6. INTERVIEWING OFFICER

ASSESSMENT: (General Fitness): Good type - 20 yrs. old - apparently bright & intelligent, but not substantiated by tests - does not wish to go Air Gunner - prefers to study and try again.

Not RECOMMENDED FOR Posting Signed M. Powell F/L

SUITABLE FOR COMMISSION \_\_\_\_\_ Date 6-8-42

Not FOUND ACCEPTABLE FOR remustering to Aircrew (ITS)

Date: 6-8-42.

Sgd. (G.H. Parliament)<sup>F</sup>lt.Lt.,  
for: Commanding Officer,  
No.11 Recruiting Centre, RCAF,  
Toronto, Ontario.

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

CERTIFIED TO BE A TRUE COPY OF THE ORIGINAL ON FILE

*G.H. Parliament*



RECOMMENDATION FOR REMUSTERING TO AIRCREW

1. No. R74061 2. L.A.C. WRIGHT, W.A.  
(present rank) (name) (Initials)
3. Trade and Grouping A.F.M. "A" 4. Station or Unit No.6 Repair Depot, Trenton
5. Date of Enlistment 13-9-40 6. Date of Birth 11-6-22

7.

EDUCATION	FROM	TO	NAME OF SCHOOLS OR UNIVERSITY	DIPLOMAS OR STANDING (B.Sc. Sr.Matric. Jr. Matric.)
High School	2 years at		Pembroke Collegiate Institute, Pembroke, Ont.	
University				

EQUIVALENT EDUCATION

NIL

COURSES OR OTHER QUALIFICATIONS

NIL

8. FLYING EXPERIENCE

Details (Clubs Place Aircraft etc.)	SOLO	DUAL	PASSENGER	TOTAL
RCAF, No.6 R.D.		2 hours	50 hours	52 hours
TOTAL HOURS		2 hours	50 hours	52 hours

9. OTHER INFORMATION

NIL

10. MEDICAL OFFICER

This airman was medically examined on form R.C.A.F. M.2 on 4/8/42 and found to be Fit for Aircrew duties, his category being A1B A3B  
(Date)  
(fit or unfit)

Remarks of Medical Officer

SIGNATURE A.L. Purdon T/O M.O. DATE 4/8/42

11. Recommendations and remarks of Commanding Officer

*Recommended for training as*

- Specially Recommended Pilot  
for Observer
- Recommended Wireless Operator (Air Gunner)  
(Strike out those not applicable)

Signature of Commanding Officer A.H. Summers G/C  
(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

ORA

Name WRIGHT Albert William ..... R 74061 .....

Rank LAC ..... R.C.A.F. .....

Age 19 ..... Height 5' 8" ..... Weight 140 .....

Hair Light Brown Eyes Brown Hair on face Light  
Trimmed moustache.

Marks, scars, etc. Scar on right cheek. .....

Albert Wright ..... (Signature of holder)

L.C. Carr, F/L ..... (Signature of issuer)

Place RCAF Station Trenton Date February 3rd, 1942.  
Ont.

Card serial number 33817 .....



Impressions forwarded to Headquarters P.I.B. by J. Carr Rank ..... Date .....

FOR HEADQUARTERS USE ONLY

R.C.A.F. PHOTOGRAPHIC ESTABLISHMENT

Received for Photostat by A. P. Kelly Rank Cpl Date 6-2-42

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 7 4 0 6 1

**COMPLETED**






Name..... **WRIGHT Albert William**.....

Classification.....





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 *J. J. Shultz Co.*  
(Signature of person taking prints)

Note amputations

Signature of printed person:  
*Albert Wright*

Date impressions taken..... **3-2-42**.....

Four fingers taken simultaneously

Four fingers taken simultaneously

**Left Hand**

**Left thumb**

**Right thumb**

**Right Hand**





NAME WRIGHT, W.A. RANK A.C.2. AGE 18 REG. No. R.74061

UNIT RCAF # 1MD DATE 18-9 1940

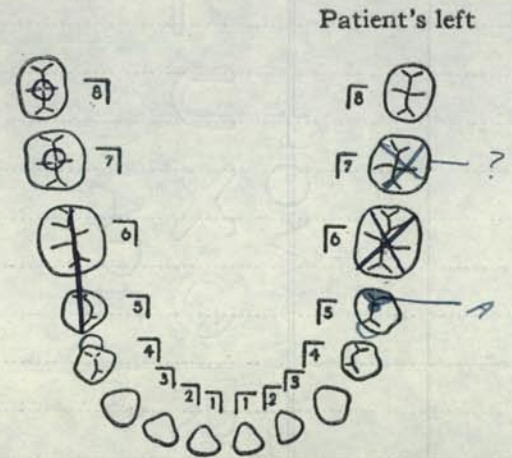
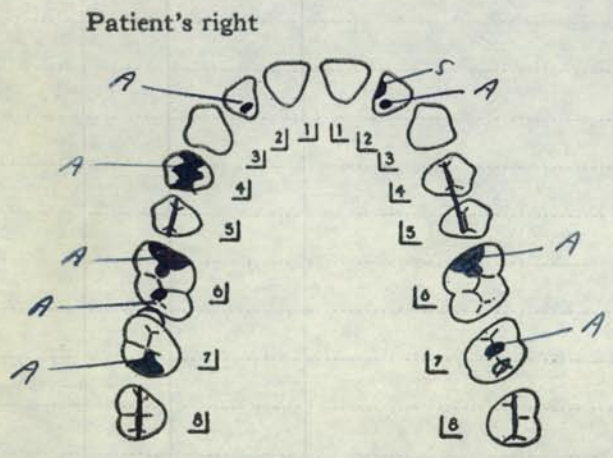
Strike out inapplicable number and words.

ORAL HYGIENE { Good  
Fair  
~~Neglected~~

PROPHYLAXIS required { Yes  
~~No~~

MUCOSA  
(Describe any pathological condition briefly)

RCAF Records Office  
Rec'd OCT 4 1940  
O.K. \_\_\_\_\_ CIB. \_\_\_\_\_  
R.C. \_\_\_\_\_ N.I. \_\_\_\_\_  
S.L. \_\_\_\_\_ P. ADJ. \_\_\_\_\_



Abbreviations:—

- X Irreparable teeth—extraction
- A Amalgam
- Ce Cement
- S Synthetic Porcelain
- F Foil

- GI Gold } Inlay
- PI Porcelain } Inlay
- GC Gold } Crown
- PC Porcelain } Crown
- RC Richmond } Crown
- JC Jacket } Crown

- Treatment
- RC Root Canal
- V's Vincent's
- Pu Pulpitis
- PO Post Operative
- Pe Periodontia
- Ra X-ray

- Describe with sketch
- Br Bridge
- PD Partial
- CU Complete upper
- CL Complete lower
- DA Adjustment

} Denture

Irreparable tooth—Mark with an X drawn through diagram of tooth.  
 Caries—Outline defective tissue. Do not fill in space.  
 Edentulous Space—Indicate by a line drawn mesio-distally through diagram of missing teeth.  
 Restoration—Sketch outline and block in shape of all serviceable restorations and write description in space adjoining diagram of teeth.  
 All existing dental conditions must be charted. Use ink, write plainly and abbreviate as indicated above.

- ① For first examination after enlistment.
- ② Subsequent examination and treatment.

M.F.B. 465  
6M pads of 100-7-40 (5811-2)  
H.Q. 1772-39-950

*R. W. Swinburn*  
Signature and unit of examining officer  
16004















Call  
and  
Preface

OUT  
IN

Serial No.

Date

(Above this line is for Signals use only)

# R.C.A.F. MESSAGE

R.C.A.F. S. 5  
60M PADS OF  
100-9-43(3450)  
H.Q. 805-5-5  
K.P. 89412

NO. OF GROUPS

57

50

FILE

OFFICE DATE STAMP & SERIAL NUMBER

TO\*

MRS W A WRIGHT 161 MCKAY STREET PEMBROKE ONTARIO

(REPORT DELIVERY)

FROM\*

RCAP CASUALTIES OFFICER

ORIGINATOR'S NUMBER

DATE

MY

REFERENCE AND DATE

YOUR

26DEC

(Use Double Space Typing)

REGRET TO ADVISE THAT YOUR HUSBAND R SEVEN FOUR NOUGHT SIX ONE  
FLIGHT SERGEANT WILLIAM ALBERT WRIGHT IS REPORTED MISSING BELIEVED  
~~KILLED~~ KILLED RESULT AIR OPERATIONS OVERSEAS DECEMBER TWENTY FOURTH  
STOP PLEASE ACCEPT MY SINCERE SYMPATHY STOP LETTER FOLLOWS

UNITED CHURCH NR5/26

R74061

This message must be sent **AS WRITTEN**  
and may be sent by **W/T**.  
Signature

R04

This message must be sent **IN CYPHER**  
and may be sent by **W/T**.  
Signature

Originator's Instructions\* Degree of Priority\*

**IMMEDIATE**

TIME OF ORIGIN G.M.T.

†Originator to insert "NOT" if message is not to go by W/T over any part of the route. (Below this line is for Signals use only)

SYSTEM IN	TIME IN	READER	SENDER	SYSTEM OUT	TIME OUT	READER	SENDER	SYSTEM OUT	TIME OUT	READER	SENDER

T.O.R.

T.H.I.

\*The Signal Department is responsible that these details are transposed to the appropriate portion of the message form and that all possibility of compromising distinguishing signals, etc., by omitting to remove their signification from the address, etc., is avoided. Before delivery of the message these details are to be re-inserted in P/L.



DOMINION OF CANADA — MEDICAL SERVICES  
**CASE SHEET (SPECIALIST REPORT)**

Referred by: ..... Date: .....

No. **R.74061** Rank **Sgt** Name **WRIGHT, W.A.**

Address: .....

Unit or Ship **No. 1 "Y" Depot (T)** Trade **Pilot** {Class or Category ..... Age **21**

Referred to: **S/L Townsend**

History and Physical Findings (to be filled out by M.O. i/c case)

Opinion Requested Re:

Type of Case—Ambulatory, Wheelchair, Stretcher, Bed M.O. Signature: .....

CONSULTANT'S REPORT

Hospital **No. 3 C.M.B., Lachine, P.Q.** Report No. **253**

X-Ray No. ....

On routine B2 examination at No. 9 B & G, was found to have a mitral systolic murmur and suggestion of a thrill at the apex. He is referred for cardiac check-up before final categorization.

An effort has been made to contact this patient but he continues to be elusive.

This man was seen today, May 23rd, and there is a short systolic murmur which is probably dependent on a forcible apical thrust as much as anything. Not heard in left lateral position or sitting up. B.P. 130/80. There is no thrill.

Diagnosis **No organic heart disease.**

Is this man fit for his duty? **Yes.**

Recommendation **None.**

Date **18th May, 1944.** **RS.**  
**(S.R. Townsend) S/L**  
**Consultant in Medicine,**  
**No. 3 C.M.B., Lachine, P.Q.**  
(Consultant's Signature)



CONFIDENTIAL

No. R74061

Name WRIGHT, V. A.

Rank

T/SGT

Trade PILOT (SG)

**CONFIDENTIAL PERSONAL ASSESSMENT**

**INSTRUCTIONS**

For A.F.H.Q. use only

Read the statements under each heading carefully. Consider the person being assessed in relation to each "statement" enumerated below. When possible compare him with others you can call to mind who represent outstanding examples of the traits described. Under each heading place a cross in the brackets after the one statement which best describes the person being assessed. This form will prove only as dependable as the assessment is thorough.

Include PART I in all reports.

Include PART II for Officers and N.C.O.'s other than Aircrew under training.

When assessment is on a member of the Women's Division the term "he" will be read as "she", etc.

RCAF R. 211  
100M-4-42  
H.Q. 885-R-211

**PART I**

(Include in all reports)

**1. APPEARANCE & BEARING**

Note - this applies not only on Parade. Observe in mess, at games, off duty.

- Careless - creates an unfavourable impression..... ( )
- Some room for improvement..... ( )
- Neat - meets all ordinary requirements..... (X)
- Excellent appearance - stands out among fellows..... (X)

**6. ENERGY & PERSISTENCE**

Some put very little effort into their work. Others may work in tremendous spurts and then wilt - ideal has well controlled energy and perseverance.

- Indifferent - half hearted; loses interest..... ( )
- Does only what is required of him..... ( )
- Active. Applies himself diligently..... (X)
- Vigorous, enthusiastic in all he undertakes..... (X)

**2. MENTAL ALERTNESS**

Consider how readily he grasps a situation and is able to understand what is required.

- Slow and confused in understanding..... ( )
- Requires more than ordinary explanation..... ( )
- No particular difficulty in understanding..... (X)
- Exceptionally quick to understand what is required.. (X)

**7. ACCURACY & RELIABILITY**

Consider how dependable he is. Watch for the "buck passer", the one with the ready excuse.

- Too irresponsible to be entrusted with important duties..... ( )
- Makes some mistakes - needs to be checked up occasionally..... ( )
- Can depend upon him for the performance of all ordinary duties..... (X)
- Can rely upon him to successfully complete the most difficult jobs..... ( )

**3. POWER OF EXPRESSION**

Some men are able to speak in such a way as to hold attention and communicate ideas clearly and readily. They say what they mean simply and directly. At the other extreme is the man whose speech is slow, hesitating and ineffectual.

- Difficult to follow - does not make himself clear... ( )
- Rather hesitant and inarticulate..... ( )
- States what he means clearly..... (X)
- Forceful - gets ideas over..... (X)

**8. CO-OPERATION**

Consider how well he works with a group. Does he give whole-hearted support to a common cause.

- Inclined to create trouble..... ( )
- Rarely puts himself out to help others..... ( )
- Co-operative - willing to help others..... ( )
- Definitely promotes harmony and good will among his associates..... (X)

**4. SELF-CONFIDENCE**

Consider the extent to which he displays confidence in his ability to carry things through.

- Timid, self-conscious, easily subdued..... ( )
- Uncertain of himself - lacks force, tries to bluff.. ( )
- Sufficient self assurance - does not back down too easily..... (X)
- Appears so competent that others have confidence in him..... ( )

**9. INTEREST IN STATION ACTIVITIES**

Participation or interest in sports, social, recreational and other Station activities.

- Indifferent - keeps to himself..... ( )
- Has very little interest..... ( )
- Usually participates in Station activities..... (X)
- Active in promoting station activities..... (X)

**5. INITIATIVE**

Consider the extent to which he does the right thing without being told.

- Has to be told what to do - does not think for himself..... ( )
- Routine worker - not much initiative..... ( )
- Displays initiative when the course is clear..... (X)
- Has excellent ideas and does not hesitate to present them..... ( )

**10. LEADERSHIP**

Consider the extent to which others have confidence in him and follow his direction.

- Does not carry much weight with his fellows..... ( )
- Occasionally takes the lead..... ( )
- Able to provide good leadership..... (X)
- Skilful in directing others - inspires confidence and commands respect..... ( )

If assessment is on Aircrew under training, this side only will be completed and Assessing Officer will sign below.

This assessment is made from my personal knowledge of the individual concerned.

..... Station

..... Date

..... Signature and Rank of Assessing Officer

If other than Aircrew under training, balance of assessment is to be completed on the reverse side of this form and Assessing Officer will sign at the end of PART II only.



PART II

(To be completed in addition to PART I for officers and N.C.O.'s other than Aircrew under training)

1. SERVICE KNOWLEDGE

Does he show steady improvement and try to fit himself for greater responsibilities?

- Satisfied with present knowledge..... ( )
Improves his knowledge if not too much effort..... ( )
Searches for ways to improve his service knowledge... (X)
Surpasses others in keeping up to date with his Service knowledge..... ( )

3. ADMINISTRATIVE ABILITY

Consider the extent to which he displays organizing and supervising ability.

- Confused in carrying out his work - busy without accomplishment..... ( )
Does not organize things very well..... ( )
Organizes effectively and gets things done..... (X)
Outstanding organizer - produces excellent results promptly..... ( )

2. TRADE PROFICIENCY

Consider how proficient he is in the discharge of his duties.

- Inferior - poorly qualified - below standard..... ( )
Moderate - needs more training and experience..... ( )
Satisfactory - does his work as well as the average... ( )
Superior - knows his work and does it well..... (X)
Exceptional - stands out unmistakably in capacity and efficiency in performance of his duties..... ( )

4. LOYALTY

Consider the extent to which he can be depended upon for his loyal support on all occasions.

- Cannot bank upon him for whole-hearted support..... ( )
Usually can count upon his loyalty..... ( )
Can definitely depend upon his loyalty..... (X)
Always strengthens the hand of those under whom he serves..... ( )

State any special qualifications for employment other than that on which engaged:

Any special remarks or observations not covered by this assessment:

This M.C.O. is steady, capable, and very conscientious and in every way has been an excellent M.C.O. He is highly recommended for appointment to commission.

This assessment is made from my personal knowledge of the individual concerned.

#9 B.G.S.

Station

28 Sep 44

Date (K. Sloat) F.O. Signature and Rank of Assessing Officer

COMMANDING OFFICER'S STATEMENT

When assessing those other than Aircrew under training, in addition to the above assessment the following is to be completed by the Commanding Officer:

If not entirely in accord with the above assessment, which may have been made by another officer, the Commanding Officer is to submit an additional complete assessment.

Where more than one assessment on a man is being submitted from a station or unit, this section is to be completed on one only.

1. I have recently drawn to this man's attention the weaknesses which have been indicated on this assessment and I have made the following suggestions to him for his improvement:

3. Having thoroughly examined the Station Confidential File, Record Card and Conduct Sheets, the following "logging" and Conduct Sheet entries are noted as having been recorded within the last twelve months. (If there is no entry - write, - "none".)

N.A.
I Concur

NONE.

2. My recommendation for his promotion is as follows:

Accelerated - Ordinary - Delayed - Not Recommended
(Encircle your recommendation)

4. If an airman, N.C.O. or warrant officer, do you consider that his personal qualities and the value of his services fully justify appointment to commissioned rank?
5. He is qualified in drill up to and including...

#9 B.G.S.

Station

Date (J.M.W. St. Pierre) Signature of Commanding Officer

Remarks or Recommendations by Air Officer Commanding (If Required):

Command

Date

Signature of Air Officer Commanding



BIOMETRIC STATEMENT AT PREPARATION

1. NUMBER *R. 74061*..... RANK *Sgt*..... NAME *WRIGHT* *WILLIAM ALBERT*  
SURNAME CHRISTIAN NAMES

NAME AND ADDRESS OF PERSON TO BE NOTIFIED IN CASE OF CASUALTY.....  
*MRS. W.A. WRIGHT..... 161 MCKAY ST..... PEMBROKE ONT*  
 .....  
 ..... RELATIONSHIP IF ANY *WIFE*.....

3. ALTERNATIVE OR SECOND NAME OF PERSON AND ADDRESS TO BE NOTIFIED IN CASE OF CASUALTY.....  
 .....

4. LEGAL NEXT OF KIN, (WIFE IF MARRIED, FATHER IF UNMARRIED, MOTHER IF FATHER IS DECEASED). *W. MRS. WRIGHT*..... *MARY MARGARET*.....  
SURNAME CHRISTIAN NAMES

5. ARE YOU SINGLE, MARRIED, WIDOWED, DIVORCED OR SEPARATED?..... *MARRIED*.....  
 FULL CHRISTIAN NAMES & SURNAME OF WIFE *MARY MARGARET WRIGHT*.....  
 ADDRESS *161 MCKAY ST PEMBROKE ONT*.....

6. IF MARRIED HAVE YOU COMPLETED A WILL SINCE MARRIAGE?..... *YES*.....

7. HAVE YOU COMPLETED NECESSARY DOCUMENTATION FOR DEPENDENT'S ALLOWANCE... *YES*...

8. ARE YOUR PARENTS LIVING? FATHER... *YES*..... MOTHER... *YES*.....

9. FULL CHRISTIAN & SURNAMES OF PARENTS (IF LIVING)  
 FATHER *HAROLD H. HUNTER WRIGHT*.....  
 ADDRESS *Box 196 PEMBROKE ONT*.....  
 MOTHER *EVA LOUELLA WRIGHT*.....

10. YOUR OWN PERMANENT HOME ADDRESS *161 MCKAY ST PEMBROKE ONT*

11. RELIGIOUS DEMONINATION... *u/c*.....

12. HAVE YOU IDENTIFICATION DISCS?..... *YES*.....

13. HAVE YOU AN IDENTIFICATION CARD?..... *YES*.....

AIRMAN'S USUAL SIGNATURE *Wright W.A.*.....  
 DATE.....

R.C.M.P. Records Office  
 Rec'd MAY 15 1944  
 O. K. \_\_\_\_\_  
 R. C. \_\_\_\_\_  
 S. L. *man*



#.1. O.T.U. Advance Tactical Training Detachment, RCAP.,  
Greenwood N. S.

From March 1 TO March 12

No. R74061 RANK Sgt NAME Wright, W.A. COURSE No. 20B

Flying Schedule

1. Squadron Rhubarb
2. Squadron Height Climb
3. Wing Height Climb
4. Squadron Attacks at Height
5. Bomber Escort
6. Bomber Interceptions of Aircraft

X

Ground Schedule

1. Unarmed Combat
2. Daily Inspections of Aircraft
3. Re-Arming and Re-Fuelling
4. Small Arms Practice
5. Escape Practice
6. Command Obstacle Course
7. Operational Dispersal of Aircraft

X
X
X
X
X

Exercise not Completed	Passed-Standard Attained No. of exercises to be completed	X	Pass Standard not Attained No. of exercises Completed	X
------------------------	--	---	--	---

R



RECORD OF GROUND TRAINING CARRIED OUT  
No. 1 O.T.U., RCAF, BAGOTVILLE, P.Q.

Name **WRIGHT, W.A.**

No. **R74061**

Course No. **20**

From **1-11-43**

To **28-1-44**

AIRMANSHIP		INTELLIGENCE		TECHNICAL		NAVIGATION		ARMAMENT		SIGNALS		OPERATIONS & TACTICS		LINK TRAINER			
1	X	1	X	1	X	1	X	1	X	1	X	1	X	1	X	1	1
2	X	2	X	2	X	2	X	2	X	2	X	2	X	2	X	2	2
3	X	3	X	3	X	3	X	3	X	3	X	3	X	3	X	3	3
4	X	4	X	4	X	4	X	4	X	4	X	4	X	4	X	4	4
5	X	5	X	5	X	5	X	5	X	5	X	5	X	5	X	5	5
6	X	6	X	6	X	6	X	6	X	6	X	6	X	6	X	6	6
7	X	7	X	7	X	7	X	7	X	7	X	7	X	7	X	7	7
8	X	8	X	8	X	8	X	8	X	8	X	8	X	8	X	8	8
9	X	9	X	9	X	9	X	9	X	9	X	9	X	9	X	9	9
10	X	10	X	10	X	10	X	10	X	10	X	10	X	10	X	10	10
11	X	11	X	11	X	11	X	11	X	11	X	11	X	11	X	11	11
12	X	12	X	12	X	12	X	12	X	12	X	12	X	12	X	12	12

12:00  
HRS

R.I.P.  
R. K.  
R. 20  
B.L.  
9 FEB 15 1944  
P. A.

Note: Instruction not given  Pass standard not attained.....  Pass standard attained.....



RECORD OF FLYING TRAINING CARRIED OUT  
No. 1 O.T.U., RCAF, BAGOTVILLE, P.Q.

Name WRIGHT, W.A.

No. R74061

Course No. 20

From 1-11-43 to 28-1-44

1.	DUAL, Master or Harvard and Sector Reconnaissance.	<input checked="" type="checkbox"/>	13.	INDIVIDUAL DEFLECTION Attacks on single Aircraft.	<input checked="" type="checkbox"/>	22.	CLIMB IN SECTION, to 25,000 feet.	<input checked="" type="checkbox"/>
2.	SOLO, On Master or Harvard.	<input checked="" type="checkbox"/>	14a	AIR COMBAT - Elementary a/c following each other.	<input checked="" type="checkbox"/>	23.	SQUADRON FORMATION, 4 or more sections of two aircraft, in pairs.	<input checked="" type="checkbox"/>
3.	FIRST SOLO, Service Type.	<input checked="" type="checkbox"/>	14b	AIR COMBAT - Advanced. Approaching head-on.		24.	INTERCEPTION AND ATTACK PRACTICE.	<input checked="" type="checkbox"/>
4.	EXPERIENCE, on Service Type & Sector Reconnaissance R/T Practice.	<input checked="" type="checkbox"/>	15a	SECTION ATTACKS, on a single aircraft straight ahead.	<input checked="" type="checkbox"/>	25a	LOW FLYING - Individual.	<input checked="" type="checkbox"/>
5.	D/F Homing Practice.		15b	SECTION ATTACKS, taking avoiding action.	<input checked="" type="checkbox"/>	25b	LOW FLYING - As a member of a Section.	<input checked="" type="checkbox"/>
6.	CLIMB to 18,000 feet.	<input checked="" type="checkbox"/>	16.	SPINNING AND AEROBATICS.	<input checked="" type="checkbox"/>	25c	LOW FLYING - As a member of a Section astern attacks against single a/c.	
7.	FORMATION FLYING.	<input checked="" type="checkbox"/>	17.	SEARCH FORMATIONS.	<input checked="" type="checkbox"/>	26.	FORCED LANDING PRACTICE.	<input checked="" type="checkbox"/>
8a	INSTRUMENT FLYING - Dual	<input checked="" type="checkbox"/>	18a	CLOUD FLYING - Individual		27a	NIGHT FLYING - Dusk Landings.	<input checked="" type="checkbox"/>
8b	INSTRUMENT FLYING - As safety pilot	<input checked="" type="checkbox"/>	18b	CLOUD FLYING - As a member of a section.		27b	NIGHT FLYING - Night Landings.	
9.	INDIVIDUAL Astern Attacks.	<input checked="" type="checkbox"/>	19.	AIR TO AIR FIRING.	<input checked="" type="checkbox"/>	28a	BOMBING - Low Level.	
10a	NAVIGATION I - Solo triangular Cross-Country and map reading.		20.	NAVIGATION II - Cross-Country.		28b	BOMBING - Dive Bombing.	
10b	NAVIGATION I - Map reading and pin pointing.	<input checked="" type="checkbox"/>	21a	R/P PRACTICES		29.	RHYTHM PRACTICE.	<input checked="" type="checkbox"/>
11.	DEFLECTION Attacks, Dual.	<input checked="" type="checkbox"/>	21b	SECTION ATTACKS, at maximum height.	<input checked="" type="checkbox"/>			
12.	AIR TO GROUND FIRING.	<input checked="" type="checkbox"/>						

FEB 15 1944

Note: Instruction not given.....

Pass standard not attained.....

Pass standard attained.....



37.20                      50

EIGHTY SEVEN 20/100

\*87.20

% WILLIAM A. WRIGHT,

X-R-74061

MRS. MARY M. WRIGHT,

X-R-74061

161 McKAY ST.,  
PEMBROKE, ONT.

JAN 125 1944

R. C.

B. L.

*Hub*



AGREEMENT

From: WRIGHT, WILLIAM ALBERT  
To: Commanding Officer,  
R.C.A.F. Recruiting Centre,  
90 O'Connor St., Ottawa, Ontario

SPECIAL RESERVE

1. In the event of my being accepted for enlistment in the Royal Canadian Air Force, I agree to the following conditions of service:

- (a) That I will be liable to be called upon to perform duties not directly or indirectly connected with the trade in which I have applied, i.e. ....  
..Airframe. Mechanic. Metal. Std.....  
until such time as the R.C.A.F. is in a position to employ or train me in said trade.
- (b) That I will be required to pass the prescribed examinations and tests before an R.C.A.F. Trade Test Board before I will become eligible for re-mustering to a higher trade group.
- (c) That in the event of my being found unsuitable by R.C.A.F. authorities for employment or training in the above mentioned trade, I am liable to be re-mustered to another trade.

2. I have carefully read this agreement, and fully understand it to be in addition to the agreement in the attestation paper that it will be necessary for me to sign if I should be attested.

W. Salmon  
(Witness)
Bill Wright  
(Signature of Applicant)

R.C.A.F. Records Office

Rec'd SEP 20 1940

September 13th, 1940 C.I.B. September 13th, 1940

(Date) (Date)

R. C. .... N. I. ....

S. L. .... P. A. ....



"Air Force"

Toronto, Ontario, October 9th, 1940.

To: RCAF Records Officer,  
Elgin Bldg., Elgin St.,  
Ottawa, Ontario.

From: Commanding Officer,  
No. 1 Manning Depot, RCAF.,  
Toronto, Ontario.

Subject: No. R74061 AC.2 Wright, W.A.

Reference: Your letter dated 24-9-40.

1. The above noted airman was paraded and states that his father's correct name is Harold Hutchinson Wright.
2. As no R100X was attached to your letter we were not able to comply with your request.

for (G.N. Irwin) Sqn. Ldr.,  
Commanding Officer,  
No. 1 Manning Depot, RCAF.,  
Toronto, Ontario.









# ROYAL CANADIAN AIR FORCE

(ATTESTATION PAPER)

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

1. Surname Wright FULL Christian Names William Albert  
 2. Present Address Pembroke St Pembroke, Ont 196 Telephone 67  
 3. Permanent Address " " " "  
 4. Place of Birth Pembroke Citizenship Canadian  
 5. Date of Birth June 11/1922 Married, Single, Widower, Separated, Divorced  
 6. Particulars of Children

Name	Date of birth	Name	Date of birth
		<u>W. J. L.</u>	

7. Occupation Welder 8. Religion Protestant United  
 9. Languages English State denomination  
 10. Next of Kin (Full Name) Harold Wright Relationship Father  
 " Address Pembroke St Pembroke Ont 196  
 11. Father (Full Name) Harold Hutchinson Birthplace Pembroke  
 " Address Pembroke St Pembroke Citizenship Canadian  
 " Occupation Mechanic  
 12. Mother (Full Maiden Name) Eva Luella Gordon Birthplace Renfrew  
 " Address Pembroke St Pembroke Citizenship Canadian

13. Details of any Naval, Military or Air Force Service:

Unit	Place	Rank	Trade	Date		Reason for discharge
				From	To	
<u>Lanark &amp; Scottish</u> <u>Renfrew Scottish</u> <u>Regiment</u>	<u>Pembroke</u>	<u>Private</u>		<u>1939</u>	<u>1940</u>	<u>under age</u>

14. Honours, Awards, Mentions  
 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?  
 When? Result  
 17. Were you ever discharged from any branch of His Majesty's Forces as Medically Unfit? No.  
 If so, state nature of disability  
 18. Have you ever been or are you now in receipt of a Disability Pension? No.  
 If so, state nature of Disability  
 19. Have you ever been convicted of an indictable offence? No. If so, state nature  
 20. Are you in debt? No. If so, state particulars

R.C.A.F. Records Office  
 SEP 20 1940  
 O.K. C.I.B. M.H.  
 S.L. P.A. P.K.

31-7-40

A F M  
 "C"

SPECIAL RESERVE

SPECIAL RESERVE



21. Particulars of Education:

	Name of school	Date		Courses—Subjects, etc.
		From	To	
Primary Education—Public or Separate School.....	Pembroke Public Sch.	1929	1935	Primary Course
High School—Collegiate Institute, etc.....	Pembroke Collegiate	1935	1938	2 yrs. Gen. 1 C. Gen.
Technical School.....	Hall Quercraft Sch.	1939	1939	Welding Sheet Metal
University or School other than above.....				
Correspondence Courses, etc.....				

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

Employer and place	Duties, trades, positions	Date		Reason for leaving
		From	To	
Pembroke Steel Co. Ltd.	Welding	Jan 5		

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

24. Special Qualifications, Hobbies, etc., useful to the R.C.A.F. *Woodworking as a hobby and I also have a good knowledge about Engines and I am ~~not~~ a mechanical inclined.*

25. Sports engaged in. State: extensively, moderately, occasionally..... *Rugby Hockey skiing and skating*

26. AIR FORCE DUTY you wish to enlist for  Ground Duties.  Flying Duties.  
 If for Ground Duties, state Air Force trade in which you wish to enlist.....  
 If for Flying Duties, state preference as (a) Pilot; (b) Observer; (c) Air Gunner (d) Wireless Operator (Air Crew).  
 (Cross out words not applicable.)

27. Names of at least two persons who can give references as to character and ability.

Name	Address	Occupation
Mr. J. A. Lamberton	Isipella St Pembroke	H. S. Teacher
Major H. A. G. Skilley	William St. Pembroke	H. S. 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 *July 31/40* 19 *40* Signature *Best Knight*



FOR OFFICIAL USE ONLY

(A) Report of Interviewing Officer—

Type Good General appearance Neat

Suitability for (state in what capacity) air frame mech "METAL"

Date 31-7-40 Signature A. Gentry Rank VR02

(B) Report of Trade Test—

Trade in which tested air frame mech "METAL"

Result Grade C

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

Master mechanic

Date 31-7-40 Signature A. Gentry Rank VR02

(C) DECLARATION MADE BY MAN ON ATTESTATION

I, William Albert WRIGHT 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 September 13th, 1940 19 Bert Wright  
Signature of Recruit

(D) OATH TAKEN BY MAN ON ATTESTATION

I, William Albert WRIGHT do sincerely promise and swear (or solemnly declare) that I will be faithful and bear true allegiance to His Majesty.

Date Sept. 13th 19 40 Bert Wright  
Signature of Recruit

(E) CERTIFICATE OF ATTESTING OFFICER

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

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

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

at Ottawa, Ontario this thirteenth day of September 19 40

for J. Vaillant F.O.  
(E.L. O'Leary) Flying Officer, Commanding Officer, R.C.A.F. Recruiting Centre,  
Signature of Officer Rank 90 O'Connor St., Ottawa, 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.....                | <u>no</u> | (j) Nasal Trouble.....             | <u>no</u>    |
| (b) Tuberculosis.....              | <u>no</u> | (k) Ear Disease.....               | <u>no</u>    |
| (c) Bronchitis or Asthma.....      | <u>no</u> | (l) Eye Disease.....               | <u>no</u>    |
| (d) Heart Disease.....             | <u>no</u> | (m) Epilepsy.....                  | <u>no</u>    |
| (e) Kidney or Bladder Disease..... | <u>no</u> | (n) Nervous or Mental Disease..... | <u>no</u>    |
| (f) Gastro-intestinal.....         | <u>no</u> | (o) Syphilis.....                  | <u>no</u>    |
| (g) Rupture.....                   | <u>no</u> | (p) Gonorrhoea.....                | <u>no</u>    |
| (h) Varicose Veins.....            | <u>no</u> | (q) Bone Fracture.....             | <u>no</u>    |
| (i) Flat or Deformed Feet.....     | <u>no</u> | (r) Other Disease or Defect.....   | <u>hands</u> |

3. Have you ever worn glasses? no

*Bert Knight*  
Signature of Applicant

Examiner's Remarks *re above*.....  
.....  
.....

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

1. Identification marks or scars (if operative obtain history).....

Brown discolouration right buttock      Scar right cheek

2. Height 5 feet 6 1/4 inches.      3. Weight..... 119 pounds.

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

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

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

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

10. Condition of mouth and teeth..... Dental Count 26 Points. 17

11. Urine—Albumen..... neg      Sugar..... neg

12. Abnormalities (Congenital and Pathological) found on Examination.....

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

Any special remarks of the Medical Officers.....

September 13th, 1940 X-Ray Negative *R. E. Hanna*  
.....  
..... Capt. R.C.A.M.C.

Date..... Aug 1 1940

*M. D. Williams*  
President

*J. J. Dancy*  
Member

Member



# ROYAL CANADIAN AIR FORCE RECORD OF SERVICE

T.M.

1	PARTICULARS OF BIRTH				11
DATE	PLACE	NATIONALITY	BIRTH OR NATURALIZATION		<i>Jan 28</i> <i>1922</i>
11-6-22	Pembroke Ontario	British	Birth		
2	NEXT OF KIN				
NAME	ADDRESS		RELATIONSHIP		
Harold Wright	Pembroke St. Box 196 Pembroke Ontario		Father		
3	ADDRESS PRIOR TO ENLISTMENT				
Pembroke St. Pembroke Ontario					
4	RELIGION				
Protestant, United Church					
5	MARRIED OR SINGLE				
Single					
6	PARTICULARS OF MARRIAGE				
DATE	TO WHOM	PLACE	CLERGYMAN		
7	PARTICULARS OF CHILDREN				
CHRISTIAN NAMES	DATE	PLACE OF BIRTH	BAPTISED		12
					REASON
					<i>under</i>
					13
8	CIVIL EDUCATION				
SCHOOLS OR COURSES	YEARS	COURSES OR SUBJECTS			
Pembroke Public S.	1929-35	Primary Course			
Pembroke Collegiate	1935-38	2 yrs. Gen. 1 Commercial			
Galt Aircraft School	1939-39	Welding, Sheet Metal			14
9	CIVIL EMPLOYMENT				
EMPLOYER	YEARS	DUTIES			
Pembroke Steel Equip	1940 Jan 5 - Pres.	Welding			
10	USEFUL CIVIL EXPERIENCE				
EMPLOYER	YEARS	DUTIES	ASSESSED		
					15
					16



# ROYAL CANADIAN AIR FORCE RECORD OF SERVICE

TMT

NAMI

PARTICULARS OF BIRTH		
PLACE	NATIONALITY	BIRTH OR NATURALIZATION
Pembroke Ontario	British	Birth

NEXT OF KIN		
NAME	ADDRESS	RELATIONSHIP
Bright	Pembroke St. Box 196 Pembroke Ontario	Father

ADDRESS PRIOR TO ENLISTMENT  
Pembroke St. Pembroke, Ontario

RELIGION  
Protestant, United Church

MARITAL STATUS  
Single

PARTICULARS OF MARRIAGE		
TO WHOM	PLACE	CLERGYMAN

PARTICULARS OF CHILDREN			
CHILDREN NAMES	DATE	PLACE OF BIRTH	BAPTISED

CIVIL EDUCATION		
SCHOOL OR COURSES	YEARS	COURSES OR SUBJECTS
Public S.	1929-35	Primary Course
Collegiate	1935-38	2 yrs. Gen. 1 Commercial
Aircraft School	1939-39	Welding, Sheet Metal

CIVIL EMPLOYMENT		
EMPLOYER	YEARS	DUTIES
Steel Equip	1940 Jan 5 - Pres.	Welding

USEFUL CIVIL EXPERIENCE			
EMPLOYER	YEARS	DUTIES	ASSESSED

11 PREVIOUS SERVICE				
UNITS	RANK	FROM	TO	
Manark & Lennox Scottish Regt	Private	1939	1940	

12 PARTICULARS OF DISCHARGE FROM LAST ENGAGEMENT		
REASON FOR DISCHARGE	CHARACTER	TRADE AND ASSESSMENT
under age		

13 HONOURS, AWARDS AND MENTIONS	
AWARD	

14 USEFUL SERVICE EXPERIENCE		
SERVICE	YEARS	DUTIES

15 CAPABILITIES OTHER THAN TRADE CLASSIFIED

16 SPECIALLY ADAPTED TO UNITS



NAME WRIGHT, WILLIAM ALBERT  
SURNAME CHRISTIAN NAMES

AIR FORCE NO. R74061

16 SERVICE			17 RANK AND APPOINTMENTS			24 INCREASED RATES OF PAY		
FROM	TO	DUTIES	RANK	DATE		INCREASE ON RANK		DATE OF EFFECT
1939	1940		<i>Ac<sub>2</sub></i>	13-9-40				
18 TRADE AND CLASSIFICATION			25 ENGAGEMENTS					
TRADE			ENGAGEMENT		FROM	TO		
<i>A.F.M. Metal</i>			<i>Duration of War.</i>		<i>13-9-40</i>			
DATE			13-9-40					
19 MEDICAL CATEGORIES			26 OFFENCES WHILE SERVING					
CATEGORY			OFFENCE		DATE	PUNISHMENT		
<i>F</i>								
DATE			1-8-40					
20 CHARACTER ASSESSMENT			27 MARRIED ESTABLISHMENT					
ASSESSMENT			PLACED ON OR REMOVED FROM		RANK	DATE		
DATE								
21 TRADE PROFICIENCY			28 FLYING TIME					
TRADE AND ASSESSMENT			UNIT		DATE	HOURS		
DATE						PILOT	PASS	
22 COURSES OF INSTRUCTION			23 EXAMINATIONS AND TESTS					
COURSE			SUBJECT		RESULTS	DATE		
FROM								
TO								
23 EXAMINATIONS AND TESTS			<i>K. M. R</i>			<i>R60 m.</i>		
SUBJECT								
RESULTS								
DATE								



R74001

WRIGHT, WILLIAM ALBERT

AUTHORITY

CASUALTY

DATE OF EFFECT

no 2M221  
no 1M0260

Enlisted RCAF S. Pat Ottawa. 13-9-40 Al. Graded A.D.M (M) "S"  
Post to and F.O.S. #1, M.D. Toronto. 14-9-40  
SOS eff. 31-10-40 on being posted to The TTS, St. Thomas, Ont.

13-9-40  
14-9-40











AIR FORCE No.

R74061

Wright, William Albert  
SURNAME FULL CHRISTIAN NAMES

ENLISTMENT

RE-ENLISTMENT

C.R. FILE NUMBER

PLACE Ottawa Ont  
DATE 13-9-40

RECORD OF SERVICE AIRMEN

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

7. BIRTH: DATE 11-6-22 PLACE Pembroke Ont CITIZENSHIP 2 British  
FATHER (FULL NAME) Harold Nutchinson Wright  
BIRTHPLACE Pembroke Ont  
MOTHER (FULL MAIDEN NAME) Eva Luella Gordon  
BIRTHPLACE Renfrew Ont

8. EDUCATIONAL STANDING  
HIGH SCHOOL ENTRANCE, Ont  
JUNIOR MATRICULATION 3 yrs Ont.  
SENIOR MATRICULATION  
TECHNICAL SCHOOL Coll Aircrafts sheet metal, wldng  
UNIVERSITY  
CORRESPONDENCE COURSES 3

9. CIVIL OCCUPATIONS OR EXPERIENCE USEFUL TO R.C.A.F.  
Welding Jan 2 1940  
3360

10. PREVIOUS ARMY, NAVY OR AIR FORCE SERVICE  
Lennox & Renfrew Scottish Rgt Ste  
18-4-39 - 18-7-40

11. HONOURS-AWARDS, MENTIONS  
Pipit's Flying Badge 157248 15-10-43  
C.V.D. Mtr ribbon 107413 15-1-44  
Op. Wings 1181787

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

13. RELIGION United Church 2

14. LANGUAGES 1

15. SPORTS woodworking, rugby, hockey, skiing, skating

16. SINGLE-MARRIED-WIDOWER-SEPARATED-DIVORCED: Single  
WIFE (FULL MAIDEN NAME) Mary Margaret Fortin  
PLACE OF MARRIAGE Pembroke, Ont. DATE 28 Oct. 1943  
AUTHORITY (IF AFTER ENLISTMENT) 10TU 264.

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: Harold Wright RELATIONSHIP Father  
ADDRESS: Pembroke St Pembroke Ont Boy 196 D.R.O.  
FULL NAME: Mrs. W. A. Wright RELATIONSHIP Wife  
ADDRESS: 161 Mc Kay St., Pembroke, Ont D.R.O. 10TU 264.

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

RATE CHANGES ETC.	EFFECTIVE	D.R.O.	RATE CHANGES ETC.	EFFECTIVE	D.R.O.
Forfeit pay (4. W. L. 2 days) 21	7 41	6RD173			
Forfeit pay (2 W. L. 1 day) 18	8 4	6RD198			
Missing pay (2 days)	7 12 41	6RD8			
1 day pay (1 day)	22 1 42	6RD36			
3 day pay (3 days)	13 2 42	6RD55			
Accession .66		6RD132			
R.A.	10 7 42	6RD215			

21. ENGAGEMENTS

TERM	EFFECTIVE	D.R.O.	TERM	EFFECTIVE	D.R.O.
duration	13 9 40				

22. TEMPORARY DUTY AND MISCELLANEOUS ENTRIES

FROM	TO	DATE	D.R.O.
Occup'g Gov't. Dros-drawing rmo		19-3-41	6RD68
Issued S.L.T.W. # C508107		20-12-41	6RD303
S.L.T.W. C45458		17-12-42	23PA56

a/c Pembroke St Pembroke Ont Boy 196  
14407

23. DOCUMENT CONTROL (INDICATE RECEIPT BY DATE)

R60	R79	B465	X-RAY	AFM-13	IDN.CARD
8-10-40	MAY 16 1940	18-9-40			KX



AIR FORCE No.

R74061

WRIGHT, WILLIAM ALBERT

SURNAME

FULL CHRISTIAN NAMES

ENLISTMENT

RE-ENLISTMENT

C. R. FILE NUMBER

PLACE *Ottawa Ont*DATE *13-9-40**12*

## RECORD OF SERVICE AIRMEN

R.C.A.F. FORM R44(B)  
50M-10-40 (7685)  
H.Q. 1962-3-58

## 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	1MD Toronto	14 9 40	TMP221
SOS	TTS St Thomas	30 10 40	1MD260
SOS	St Thomas	19 3 41	TTS67
SOS	#6 Bluffcraft D. Trenton	20 3 41	GRD68
T.D.	Goderich, Port Colborne, Ontario	21 7 42	GRD175
T.D.	Toronto - 95F. St Catharines	27 7 42	GRD182
T.D.	Ottawa	12 8 42	GRD185
T.D.	11 R.C. Toronto	4 9 42	GRD191
SOS	"6 RD Trenton	22 11 42	GRD278
TOS	23 UTO Toronto Ont.	23 11 42	23PAE1
SOS	23PAE8, Union of Toronto	20 2 43	23PAE12
TOS	6 JTS, Toronto, Ont.	21 2 43	6JTSK5
SOS	6 JTS Toronto	1 5 43	6JTS104
TOS	12 EFTS Goderich Ont.	2 5 43	12EF60
TOS	12EF Goderich	1 5 43	12EF64
TOS	12EF Goderich	2 5 43	12EF66
SOS	12 EFTS Goderich	26 6 43	12EF84
TOS	15FTS Camp Borden	27 6 43	15F158
SOS	15FTS Camp Borden	29 10 43	157248
TOS	YOTV. Saguenay P.Q.	30 10 43	10TU263
SOS	104U. Bagatville	24 3 44	104U60A
TOS	9B44. Mont Joli	24 3 44	9B4475
SOS	9B44 Mont Joli	8 5 44	9B4498
TOS	140 Lachine	9 5 44	14111
SOS	By Depot Lachine	25 5 44	14138
	3 P.R.C.		

Missing B. Killed. 24 Dec 44. DCL 907 a/25 Dec 44.

Presumed Dead. 24 Dec 44. DCL 1112 a/30 Aug 45.

## 2. RECLASS'NS-PROMOTIONS-ETC.

RANK	EFFECTIVE	D.R.O.
AC2	13 9 40	TMP221
AC1	13 3 41	GRD84
2AC	1 10 41	GRD237
T/Sgt (P.O.) T4	15 10 43	157248

## B. MEDICAL HISTORY

## EXAMINATIONS (IN RED INK)

DATE FORM CATEGORY REMARKS

## HOSPITALIZATION (IN BLACK INK)

HOSPITAL ADMITTED DISCHARGE D.R.O.  
QUARTERS CONFINED RET'N DUTY

1-8-40 R-100 A

## 4. TRADE AND CHARACTER

TRADE	GROUP	EFFECTIVE	D.R.O.
A.F.M. (C)	13	9 40	TMP221
A.F.M. (C)	15	3 41	TTS64
A.F.M. (B)	1	10 41	GRD233
A.F.M. (B)	30	9 41	GRD288
A.F.M. (A)	1	1 42	GRD10
509 A			
A.F.M. (A)	22	11 42	GRD278
A.F.M. (M) (A)	22	11 42	23PAE8
A.F.M. (M) (A)	30	4 43	6JTS104
H.R.P.I.T.	15	10 43	157248
3025			

TRADE PROFICIENCY CHARACTER ASSESSMENT DATE OF R41

Cat. C.F. 1016 60A

## 5. COURSES-TESTS-ETC.

SUBJECT	RESULT	DATE	AUTHORITY
A.F.M. (C)	80.6	22 3 41	TTS-TT
A.F.M. (B)	58%	21 4 41	GRD (TT)
A.F.M. (B)	65P	21 7 41	GRD (TT)
Qual. for rem. to A.F.M. (B) 18" index			GRD193
Qual. for rem. to A.F.M. (A)	1	1 42	GRD265
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