

|                     |     |        |        |                       |            |             |            |                 |                       |         |             |             |                 |                |             |            |              |                 |               |         |       |         |           |           |            |            |          |             |              |         |       |         |         |        |         |        |           |       |       |         |         |         |          |        |         |       |      |      |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |     |
|---------------------|-----|--------|--------|-----------------------|------------|-------------|------------|-----------------|-----------------------|---------|-------------|-------------|-----------------|----------------|-------------|------------|--------------|-----------------|---------------|---------|-------|---------|-----------|-----------|------------|------------|----------|-------------|--------------|---------|-------|---------|---------|--------|---------|--------|-----------|-------|-------|---------|---------|---------|----------|--------|---------|-------|------|------|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|-----|
| 32                  | JUL | TECH.  | DISOB. | NEG/ICE               | INEXP/ENCE | MISCEL.     | INSTRUCT.  | FLT. CONTR.     | OTHERS                | PRIMARY | FL. CONTRS. | MOV. SURES. | STAB SURES.     | W. STRUTS      | LAND GEAR   | FLOATS     | FUSE OR HULL | TAIL SAID OR W. | ENGINE MOUNT. | MISCEL. | UNDTD | PRIMARY | FUEL SYS. | COOL SYS. | IGNIT SYS. | LUB N SYS. | ENG STR. | AIRSCREW A. | ENG. CONTRS. | MISCEL. | UNDTD | PRIMARY | HAND Q. | INSTS. | WEATHER | DRKNS. | ALG SURF. | OTHER | UNDTD | PRIMARY | TAXIING | LANDING | TAKE-OFF | FLIGHT | STRATRY | FATAL | INJ. | 960. | 5  | 4  | 3  | 2  | 1  |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |     |
| 3                   | 4   | 5      | 6      | 7                     | 8          | 9           | 10         | 11              | 12                    | 13      | 14          | 15          | 16              | 17             | 18          | 19         | 20           | 21              | 22            | 23      | 24    | 25      | 26        | 27        | 28         | 29         | 30       | 31          | 32           | 33      | 34    | 35      | 36      | 37     | 38      | 39     | 40        | 41    | 42    | 43      | 44      | 45      | 46       | 47     | 48      | 49    | 50   | 51   | 52 | 53 | 54 | 55 | 56 | 57 | 58 | 59 | 60 | 61 | 62 | 63 | 64 | 65 | 66 | 67 | 68 | 69 | 70 | 71 | 72 | 73 | 74 | 75 | 76 | 77 | 78 | 79 | 80 | 81 | 82 | 83 | 84 | 85 | 86 | 87 | 88 | 89 | 90 | 91 | 92 | 93 | 94 | 95 | 96 | 97 | 98 | 99 | 100 |
| PILOT               |     | OTHERS |        | AIRFRAME FAILURE      |            |             |            |                 |                       |         |             |             |                 | ENGINE FAILURE |             |            |              |                 |               |         |       |         |           |           |            |            |          |             |              |         |       |         |         |        |         |        |           |       |       |         |         |         |          |        |         |       |      |      |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |     |
| CAUSES OF ACCIDENTS |     |        |        |                       |            |             |            |                 |                       |         |             |             |                 |                |             |            |              |                 |               |         |       |         |           |           |            |            |          |             |              |         |       |         |         |        |         |        |           |       |       |         |         |         |          |        |         |       |      |      |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |     |
| UNIT                |     | COM.   |        | PLACE                 |            |             |            |                 |                       |         |             |             |                 | DATE           |             | TIME       |              |                 |               |         |       |         |           |           |            |            |          |             |              |         |       |         |         |        |         |        |           |       |       |         |         |         |          |        |         |       |      |      |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |     |
| 12 S.F.T.S.         |     | No. 2  |        | 10 Mi. S.W of Brandon |            |             |            |                 |                       |         |             |             |                 | 1-8-41         |             | 1530       |              |                 |               |         |       |         |           |           |            |            |          |             |              |         |       |         |         |        |         |        |           |       |       |         |         |         |          |        |         |       |      |      |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |     |
| Brandon, Man        |     |        |        |                       |            |             |            |                 |                       |         |             |             |                 | H.O. FILE      |             | 1100-77-94 |              |                 |               |         |       |         |           |           |            |            |          |             |              |         |       |         |         |        |         |        |           |       |       |         |         |         |          |        |         |       |      |      |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |     |
| A/C TYPE            |     | No.    |        | CRASH CAT.            |            | SE          |            | ME              |                       | DAY     |             | NIGHT       |                 |                |             |            |              |                 |               |         |       |         |           |           |            |            |          |             |              |         |       |         |         |        |         |        |           |       |       |         |         |         |          |        |         |       |      |      |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |     |
| Crane               |     | 7794   |        | D 14                  |            | X           |            | X               |                       | X       |             | X           |                 |                |             |            |              |                 |               |         |       |         |           |           |            |            |          |             |              |         |       |         |         |        |         |        |           |       |       |         |         |         |          |        |         |       |      |      |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |     |
| NAME                |     |        | RANK   |                       | NO.        |             | DUTY       |                 | INJURIES              |         |             |             | SERIOUS         |                |             |            |              |                 |               |         |       |         |           |           |            |            |          |             |              |         |       |         |         |        |         |        |           |       |       |         |         |         |          |        |         |       |      |      |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |     |
| Thompson, S.G.      |     |        | P/O    |                       | J4911      |             | FI         |                 | Uninjured             |         |             |             | FATAL INJURY    |                |             |            |              |                 |               |         |       |         |           |           |            |            |          |             |              |         |       |         |         |        |         |        |           |       |       |         |         |         |          |        |         |       |      |      |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |     |
| Fortin, E.          |     |        | LAC    |                       | R54940     |             | PP         |                 | Uninjured             |         |             |             |                 |                |             |            |              |                 |               |         |       |         |           |           |            |            |          |             |              |         |       |         |         |        |         |        |           |       |       |         |         |         |          |        |         |       |      |      |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |     |
| Grenier, A.E.       |     |        | AC1    |                       | R56022     |             | PASS       |                 | Uninjured             |         |             |             |                 |                |             |            |              |                 |               |         |       |         |           |           |            |            |          |             |              |         |       |         |         |        |         |        |           |       |       |         |         |         |          |        |         |       |      |      |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |     |
|                     |     |        |        |                       |            |             |            |                 |                       |         |             |             | CARD SERIAL No. |                |             |            |              |                 |               |         |       |         |           |           |            |            |          |             |              |         |       |         |         |        |         |        |           |       |       |         |         |         |          |        |         |       |      |      |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |     |
|                     |     |        |        |                       |            |             |            |                 |                       |         |             |             |                 |                |             |            |              |                 |               |         |       |         |           |           |            |            |          |             |              |         |       |         |         |        |         |        |           |       |       |         |         |         |          |        |         |       |      |      |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |     |
| TYPE A/F & ENGINE   |     | No.    |        | EXTENT OF DAMAGE      |            | REPORT FORM | SERIAL No. | DATE            | HOURS FLOWN BY PILOTS |         |             |             |                 |                |             |            |              |                 |               |         |       |         |           |           |            |            |          |             |              |         |       |         |         |        |         |        |           |       |       |         |         |         |          |        |         |       |      |      |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |     |
| Crane               |     | 7794   |        | SLIGHT                |            |             |            |                 | INST.                 | NIGHT   | ON TYPE     |             | TOTAL           |                | LAST 6 MOS. |            |              |                 |               |         |       |         |           |           |            |            |          |             |              |         |       |         |         |        |         |        |           |       |       |         |         |         |          |        |         |       |      |      |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |     |
| Jacobs              |     | P4135  |        | SLIGHT                |            |             |            | PP              | 27:5                  | 20:05   | 11:55       |             | 45:50           |                |             |            |              |                 |               |         |       |         |           |           |            |            |          |             |              |         |       |         |         |        |         |        |           |       |       |         |         |         |          |        |         |       |      |      |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |     |
| Jacobs              |     | S4134  |        | NIL                   |            |             |            |                 |                       |         |             |             |                 |                |             |            |              |                 |               |         |       |         |           |           |            |            |          |             |              |         |       |         |         |        |         |        |           |       |       |         |         |         |          |        |         |       |      |      |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |     |
| SIGNAL No. & DATE   |     |        |        | UNIT No. & DATE       |            |             |            | COM. No. & DATE |                       |         |             | REPORT      |                 | FILE           |             | DATE       |              |                 |               |         |       |         |           |           |            |            |          |             |              |         |       |         |         |        |         |        |           |       |       |         |         |         |          |        |         |       |      |      |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |     |
| CT 15               |     |        |        | 2-8-41                |            |             |            |                 |                       |         |             |             |                 |                |             |            |              |                 |               |         |       |         |           |           |            |            |          |             |              |         |       |         |         |        |         |        |           |       |       |         |         |         |          |        |         |       |      |      |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |     |
| NATURE OF ACCIDENT  |     |        |        |                       |            |             |            |                 |                       |         |             |             |                 |                |             |            |              |                 |               |         |       |         |           |           |            |            |          |             |              |         |       |         |         |        |         |        |           |       |       |         |         |         |          |        |         |       |      |      |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |     |

MISCELLANEOUS CAUSES  
 UNDTD  
 PRIMARY  
 HAND Q.  
 INSTS.  
 WEATHER  
 DRKNS.  
 ALG SURF.  
 OTHER  
 UNDTD  
 PRIMARY  
 TAXIING  
 LANDING  
 TAKE-OFF  
 FLIGHT  
 STRATRY  
 FATAL  
 INJ. 960.

DUTY ON WHICH ENGAGED:

COURT OF INQUIRY, INVESTIGATING OFFICER

OR COMMANDING OFFICER'S REPORT:

Low flying

R 170

NATURE OF ACCIDENT AND STAGE OF FLIGHT:

DATE:

COMPOSITION:

Wing tip hit tree in low flying  
exercise

1200 / 1000

RECOMMENDATIONS:

PRIMARY CAUSE:

Error in judgement of pilot

ACTION TAKEN:

(A) DISCIPLINARY (B) TECHNICAL (C) OTHER

**Pilot put on charge and given a severe reprimand**

SECONDARY CAUSE OR CONTRIBUTING FACTORS:

Wing tip struck tree

RECORDED BY \_\_\_\_\_ DATE \_\_\_\_\_

CHECKED BY \_\_\_\_\_ DATE \_\_\_\_\_