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| 32   | 31 | 30     | 29 | 28               | 27 | 26                 | 25 | 24              | 23 | 22         | 21 | 20                    | 19 | 18              | 17 | 16             | 15 | 14            | 13 | 12   | 11 | 10 | 9  | 8  | 7  | 6  | 5  | 4  | 3  | 2  | 1  |       |  |        |  |                  |  |  |  |  |  |  |  |  |  |                |  |  |  |  |  |  |  |  |  |                     |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |                                  |  |  |  |                |  |                    |  |  |  |  |  |  |  |  |  |                |  |               |  |                             |  |  |  |            |  |                 |  |    |  |         |  |          |  |       |  |      |  |  |  |      |  |     |  |      |  |          |  |  |  |         |  |             |  |  |  |     |  |        |  |   |  |            |  |  |  |              |  |            |  |  |  |     |  |        |  |    |  |            |  |  |  |  |  |             |  |  |  |     |  |        |  |     |  |            |  |  |  |  |  |            |  |  |  |     |  |        |  |    |  |            |  |  |  |                 |  |                   |  |     |  |                  |  |             |  |            |  |      |  |                       |  |  |  |  |  |  |  |  |  |        |  |     |  |  |  |  |  |  |  |  |  |             |  |         |  |       |  |             |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |           |  |           |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |     |  |  |  |  |  |  |  |  |  |                   |  |  |  |                 |  |  |  |                 |  |  |  |        |  |  |  |      |  |  |  |      |  |  |  |             |  |  |  |             |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |                    |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| 1  | 2  | 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 |       |  |        |  |                  |  |  |  |  |  |  |  |  |  |                |  |  |  |  |  |  |  |  |  |                     |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |                                  |  |  |  |                |  |                    |  |  |  |  |  |  |  |  |  |                |  |               |  |                             |  |  |  |            |  |                 |  |    |  |         |  |          |  |       |  |      |  |  |  |      |  |     |  |      |  |          |  |  |  |         |  |             |  |  |  |     |  |        |  |   |  |            |  |  |  |              |  |            |  |  |  |     |  |        |  |    |  |            |  |  |  |  |  |             |  |  |  |     |  |        |  |     |  |            |  |  |  |  |  |            |  |  |  |     |  |        |  |    |  |            |  |  |  |                 |  |                   |  |     |  |                  |  |             |  |            |  |      |  |                       |  |  |  |  |  |  |  |  |  |        |  |     |  |  |  |  |  |  |  |  |  |             |  |         |  |       |  |             |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |           |  |           |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |     |  |  |  |  |  |  |  |  |  |                   |  |  |  |                 |  |  |  |                 |  |  |  |        |  |  |  |      |  |  |  |      |  |  |  |             |  |  |  |             |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |                    |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| <table border="1"> <tr> <td colspan="2">PILOT</td> <td colspan="2">OTHERS</td> <td colspan="10">AIRFRAME FAILURE</td> <td colspan="10">ENGINE FAILURE</td> </tr> <tr> <td colspan="32" style="text-align: center;">CAUSES OF ACCIDENTS</td> </tr> <tr> <td colspan="4">UNIT # 11 (BR)<br/>Dartmouth N.S.</td> <td colspan="2">COM.<br/>E.A.C.</td> <td colspan="10">PLACE<br/>Aerodrome</td> <td colspan="2">DATE<br/>4-9-41</td> <td colspan="2">TIME<br/>20:25</td> </tr> <tr> <td colspan="4">A/C TYPE<br/>Lockheed Hudson</td> <td colspan="2">No.<br/>781</td> <td colspan="2">CRASH CAT.<br/>B</td> <td colspan="2">SE</td> <td colspan="2">ME<br/>x</td> <td colspan="2">DAY<br/>x</td> <td colspan="2">NIGHT</td> </tr> <tr> <td colspan="4">NAME</td> <td colspan="2">RANK</td> <td colspan="2">No.</td> <td colspan="2">DUTY</td> <td colspan="4">INJURIES</td> <td colspan="2">SERIOUS</td> </tr> <tr> <td colspan="4">Oldham H.W.</td> <td colspan="2">F/O</td> <td colspan="2">C 2397</td> <td colspan="2">P</td> <td colspan="4">Uninjured.</td> <td colspan="2">FATAL INJURY</td> </tr> <tr> <td colspan="4">James A.M.</td> <td colspan="2">SGT</td> <td colspan="2">R15410</td> <td colspan="2">SP</td> <td colspan="4">Uninjured.</td> <td colspan="2"></td> </tr> <tr> <td colspan="4">Taylor H.F.</td> <td colspan="2">SGT</td> <td colspan="2">R71922</td> <td colspan="2">WAG</td> <td colspan="4">Uninjured.</td> <td colspan="2"></td> </tr> <tr> <td colspan="4">Bebee E.A.</td> <td colspan="2">SGT</td> <td colspan="2">R65810</td> <td colspan="2">MG</td> <td colspan="4">Uninjured.</td> <td colspan="2">CARD SERIAL No.</td> </tr> <tr> <td colspan="2">TYPE A/F &amp; ENGINE</td> <td colspan="2">No.</td> <td colspan="2">EXTENT OF DAMAGE</td> <td colspan="2">REPORT FORM</td> <td colspan="2">SERIAL No.</td> <td colspan="2">DATE</td> <td colspan="10">HOURS FLOWN BY PILOTS</td> </tr> <tr> <td colspan="2">Hudson</td> <td colspan="2">781</td> <td colspan="2"></td> <td colspan="2"></td> <td colspan="2"></td> <td colspan="2"></td> <td colspan="2">INST. NIGHT</td> <td colspan="2">ON TYPE</td> <td colspan="2">TOTAL</td> <td colspan="2">LAST 6 MOS.</td> <td colspan="6"></td> </tr> <tr> <td colspan="2"></td> <td colspan="2"></td> <td colspan="2"></td> <td colspan="2"></td> <td colspan="2"></td> <td colspan="2"></td> <td colspan="2"></td> <td colspan="2">DUAL SOLO</td> <td colspan="2">DUAL SOLO</td> <td colspan="2"></td> <td colspan="6"></td> </tr> <tr> <td colspan="2"></td> <td colspan="2"></td> <td colspan="2"></td> <td colspan="2"></td> <td colspan="2"></td> <td colspan="2"></td> <td colspan="2"></td> <td colspan="2"></td> <td colspan="2">124</td> <td colspan="2"></td> <td colspan="6"></td> </tr> <tr> <td colspan="4">SIGNAL No. &amp; DATE</td> <td colspan="4">UNIT No. &amp; DATE</td> <td colspan="4">COM. No. &amp; DATE</td> <td colspan="4">REPORT</td> <td colspan="4">FILE</td> <td colspan="4">DATE</td> </tr> <tr> <td colspan="4">X140 4-9-41</td> <td colspan="4">D598 4-9-41</td> <td colspan="4"></td> <td colspan="4"></td> <td colspan="4"></td> <td colspan="4"></td> </tr> <tr> <td colspan="32" style="text-align: center;">NATURE OF ACCIDENT</td> </tr> </table> |    |        |    |                  |    |                    |    |                 |    |            |    |                       |    |                 |    |                |    |               |    |      |    |    |    |    |    |    |    |    |    |    |    | PILOT |  | OTHERS |  | AIRFRAME FAILURE |  |  |  |  |  |  |  |  |  | ENGINE FAILURE |  |  |  |  |  |  |  |  |  | CAUSES OF ACCIDENTS |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  | UNIT # 11 (BR)<br>Dartmouth N.S. |  |  |  | COM.<br>E.A.C. |  | PLACE<br>Aerodrome |  |  |  |  |  |  |  |  |  | DATE<br>4-9-41 |  | TIME<br>20:25 |  | A/C TYPE<br>Lockheed Hudson |  |  |  | No.<br>781 |  | CRASH CAT.<br>B |  | SE |  | ME<br>x |  | DAY<br>x |  | NIGHT |  | NAME |  |  |  | RANK |  | No. |  | DUTY |  | INJURIES |  |  |  | SERIOUS |  | Oldham H.W. |  |  |  | F/O |  | C 2397 |  | P |  | Uninjured. |  |  |  | FATAL INJURY |  | James A.M. |  |  |  | SGT |  | R15410 |  | SP |  | Uninjured. |  |  |  |  |  | Taylor H.F. |  |  |  | SGT |  | R71922 |  | WAG |  | Uninjured. |  |  |  |  |  | Bebee E.A. |  |  |  | SGT |  | R65810 |  | MG |  | Uninjured. |  |  |  | CARD SERIAL No. |  | TYPE A/F & ENGINE |  | No. |  | EXTENT OF DAMAGE |  | REPORT FORM |  | SERIAL No. |  | DATE |  | HOURS FLOWN BY PILOTS |  |  |  |  |  |  |  |  |  | Hudson |  | 781 |  |  |  |  |  |  |  |  |  | INST. NIGHT |  | ON TYPE |  | TOTAL |  | LAST 6 MOS. |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  | DUAL SOLO |  | DUAL SOLO |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  | 124 |  |  |  |  |  |  |  |  |  | SIGNAL No. & DATE |  |  |  | UNIT No. & DATE |  |  |  | COM. No. & DATE |  |  |  | REPORT |  |  |  | FILE |  |  |  | DATE |  |  |  | X140 4-9-41 |  |  |  | D598 4-9-41 |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  | NATURE OF ACCIDENT |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| PILOT  |    | OTHERS |    | AIRFRAME FAILURE |    |                    |    |                 |    |            |    |                       |    | ENGINE FAILURE  |    |                |    |               |    |      |    |    |    |    |    |    |    |    |    |    |    |       |  |        |  |                  |  |  |  |  |  |  |  |  |  |                |  |  |  |  |  |  |  |  |  |                     |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |                                  |  |  |  |                |  |                    |  |  |  |  |  |  |  |  |  |                |  |               |  |                             |  |  |  |            |  |                 |  |    |  |         |  |          |  |       |  |      |  |  |  |      |  |     |  |      |  |          |  |  |  |         |  |             |  |  |  |     |  |        |  |   |  |            |  |  |  |              |  |            |  |  |  |     |  |        |  |    |  |            |  |  |  |  |  |             |  |  |  |     |  |        |  |     |  |            |  |  |  |  |  |            |  |  |  |     |  |        |  |    |  |            |  |  |  |                 |  |                   |  |     |  |                  |  |             |  |            |  |      |  |                       |  |  |  |  |  |  |  |  |  |        |  |     |  |  |  |  |  |  |  |  |  |             |  |         |  |       |  |             |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |           |  |           |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |     |  |  |  |  |  |  |  |  |  |                   |  |  |  |                 |  |  |  |                 |  |  |  |        |  |  |  |      |  |  |  |      |  |  |  |             |  |  |  |             |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |                    |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| CAUSES OF ACCIDENTS  |    |        |    |                  |    |                    |    |                 |    |            |    |                       |    |                 |    |                |    |               |    |      |    |    |    |    |    |    |    |    |    |    |    |       |  |        |  |                  |  |  |  |  |  |  |  |  |  |                |  |  |  |  |  |  |  |  |  |                     |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |                                  |  |  |  |                |  |                    |  |  |  |  |  |  |  |  |  |                |  |               |  |                             |  |  |  |            |  |                 |  |    |  |         |  |          |  |       |  |      |  |  |  |      |  |     |  |      |  |          |  |  |  |         |  |             |  |  |  |     |  |        |  |   |  |            |  |  |  |              |  |            |  |  |  |     |  |        |  |    |  |            |  |  |  |  |  |             |  |  |  |     |  |        |  |     |  |            |  |  |  |  |  |            |  |  |  |     |  |        |  |    |  |            |  |  |  |                 |  |                   |  |     |  |                  |  |             |  |            |  |      |  |                       |  |  |  |  |  |  |  |  |  |        |  |     |  |  |  |  |  |  |  |  |  |             |  |         |  |       |  |             |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |           |  |           |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |     |  |  |  |  |  |  |  |  |  |                   |  |  |  |                 |  |  |  |                 |  |  |  |        |  |  |  |      |  |  |  |      |  |  |  |             |  |  |  |             |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |                    |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| UNIT # 11 (BR)<br>Dartmouth N.S.   |    |        |    | COM.<br>E.A.C.   |    | PLACE<br>Aerodrome |    |                 |    |            |    |                       |    |                 |    | DATE<br>4-9-41 |    | TIME<br>20:25 |    |      |    |    |    |    |    |    |    |    |    |    |    |       |  |        |  |                  |  |  |  |  |  |  |  |  |  |                |  |  |  |  |  |  |  |  |  |                     |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |                                  |  |  |  |                |  |                    |  |  |  |  |  |  |  |  |  |                |  |               |  |                             |  |  |  |            |  |                 |  |    |  |         |  |          |  |       |  |      |  |  |  |      |  |     |  |      |  |          |  |  |  |         |  |             |  |  |  |     |  |        |  |   |  |            |  |  |  |              |  |            |  |  |  |     |  |        |  |    |  |            |  |  |  |  |  |             |  |  |  |     |  |        |  |     |  |            |  |  |  |  |  |            |  |  |  |     |  |        |  |    |  |            |  |  |  |                 |  |                   |  |     |  |                  |  |             |  |            |  |      |  |                       |  |  |  |  |  |  |  |  |  |        |  |     |  |  |  |  |  |  |  |  |  |             |  |         |  |       |  |             |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |           |  |           |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |     |  |  |  |  |  |  |  |  |  |                   |  |  |  |                 |  |  |  |                 |  |  |  |        |  |  |  |      |  |  |  |      |  |  |  |             |  |  |  |             |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |                    |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| A/C TYPE<br>Lockheed Hudson  |    |        |    | No.<br>781       |    | CRASH CAT.<br>B    |    | SE              |    | ME<br>x    |    | DAY<br>x              |    | NIGHT           |    |                |    |               |    |      |    |    |    |    |    |    |    |    |    |    |    |       |  |        |  |                  |  |  |  |  |  |  |  |  |  |                |  |  |  |  |  |  |  |  |  |                     |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |                                  |  |  |  |                |  |                    |  |  |  |  |  |  |  |  |  |                |  |               |  |                             |  |  |  |            |  |                 |  |    |  |         |  |          |  |       |  |      |  |  |  |      |  |     |  |      |  |          |  |  |  |         |  |             |  |  |  |     |  |        |  |   |  |            |  |  |  |              |  |            |  |  |  |     |  |        |  |    |  |            |  |  |  |  |  |             |  |  |  |     |  |        |  |     |  |            |  |  |  |  |  |            |  |  |  |     |  |        |  |    |  |            |  |  |  |                 |  |                   |  |     |  |                  |  |             |  |            |  |      |  |                       |  |  |  |  |  |  |  |  |  |        |  |     |  |  |  |  |  |  |  |  |  |             |  |         |  |       |  |             |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |           |  |           |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |     |  |  |  |  |  |  |  |  |  |                   |  |  |  |                 |  |  |  |                 |  |  |  |        |  |  |  |      |  |  |  |      |  |  |  |             |  |  |  |             |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |                    |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| NAME   |    |        |    | RANK             |    | No.                |    | DUTY            |    | INJURIES   |    |                       |    | SERIOUS         |    |                |    |               |    |      |    |    |    |    |    |    |    |    |    |    |    |       |  |        |  |                  |  |  |  |  |  |  |  |  |  |                |  |  |  |  |  |  |  |  |  |                     |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |                                  |  |  |  |                |  |                    |  |  |  |  |  |  |  |  |  |                |  |               |  |                             |  |  |  |            |  |                 |  |    |  |         |  |          |  |       |  |      |  |  |  |      |  |     |  |      |  |          |  |  |  |         |  |             |  |  |  |     |  |        |  |   |  |            |  |  |  |              |  |            |  |  |  |     |  |        |  |    |  |            |  |  |  |  |  |             |  |  |  |     |  |        |  |     |  |            |  |  |  |  |  |            |  |  |  |     |  |        |  |    |  |            |  |  |  |                 |  |                   |  |     |  |                  |  |             |  |            |  |      |  |                       |  |  |  |  |  |  |  |  |  |        |  |     |  |  |  |  |  |  |  |  |  |             |  |         |  |       |  |             |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |           |  |           |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |     |  |  |  |  |  |  |  |  |  |                   |  |  |  |                 |  |  |  |                 |  |  |  |        |  |  |  |      |  |  |  |      |  |  |  |             |  |  |  |             |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |                    |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| Oldham H.W.  |    |        |    | F/O              |    | C 2397             |    | P               |    | Uninjured. |    |                       |    | FATAL INJURY    |    |                |    |               |    |      |    |    |    |    |    |    |    |    |    |    |    |       |  |        |  |                  |  |  |  |  |  |  |  |  |  |                |  |  |  |  |  |  |  |  |  |                     |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |                                  |  |  |  |                |  |                    |  |  |  |  |  |  |  |  |  |                |  |               |  |                             |  |  |  |            |  |                 |  |    |  |         |  |          |  |       |  |      |  |  |  |      |  |     |  |      |  |          |  |  |  |         |  |             |  |  |  |     |  |        |  |   |  |            |  |  |  |              |  |            |  |  |  |     |  |        |  |    |  |            |  |  |  |  |  |             |  |  |  |     |  |        |  |     |  |            |  |  |  |  |  |            |  |  |  |     |  |        |  |    |  |            |  |  |  |                 |  |                   |  |     |  |                  |  |             |  |            |  |      |  |                       |  |  |  |  |  |  |  |  |  |        |  |     |  |  |  |  |  |  |  |  |  |             |  |         |  |       |  |             |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |           |  |           |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |     |  |  |  |  |  |  |  |  |  |                   |  |  |  |                 |  |  |  |                 |  |  |  |        |  |  |  |      |  |  |  |      |  |  |  |             |  |  |  |             |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |                    |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| James A.M.   |    |        |    | SGT              |    | R15410             |    | SP              |    | Uninjured. |    |                       |    |                 |    |                |    |               |    |      |    |    |    |    |    |    |    |    |    |    |    |       |  |        |  |                  |  |  |  |  |  |  |  |  |  |                |  |  |  |  |  |  |  |  |  |                     |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |                                  |  |  |  |                |  |                    |  |  |  |  |  |  |  |  |  |                |  |               |  |                             |  |  |  |            |  |                 |  |    |  |         |  |          |  |       |  |      |  |  |  |      |  |     |  |      |  |          |  |  |  |         |  |             |  |  |  |     |  |        |  |   |  |            |  |  |  |              |  |            |  |  |  |     |  |        |  |    |  |            |  |  |  |  |  |             |  |  |  |     |  |        |  |     |  |            |  |  |  |  |  |            |  |  |  |     |  |        |  |    |  |            |  |  |  |                 |  |                   |  |     |  |                  |  |             |  |            |  |      |  |                       |  |  |  |  |  |  |  |  |  |        |  |     |  |  |  |  |  |  |  |  |  |             |  |         |  |       |  |             |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |           |  |           |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |     |  |  |  |  |  |  |  |  |  |                   |  |  |  |                 |  |  |  |                 |  |  |  |        |  |  |  |      |  |  |  |      |  |  |  |             |  |  |  |             |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |                    |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| Taylor H.F.  |    |        |    | SGT              |    | R71922             |    | WAG             |    | Uninjured. |    |                       |    |                 |    |                |    |               |    |      |    |    |    |    |    |    |    |    |    |    |    |       |  |        |  |                  |  |  |  |  |  |  |  |  |  |                |  |  |  |  |  |  |  |  |  |                     |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |                                  |  |  |  |                |  |                    |  |  |  |  |  |  |  |  |  |                |  |               |  |                             |  |  |  |            |  |                 |  |    |  |         |  |          |  |       |  |      |  |  |  |      |  |     |  |      |  |          |  |  |  |         |  |             |  |  |  |     |  |        |  |   |  |            |  |  |  |              |  |            |  |  |  |     |  |        |  |    |  |            |  |  |  |  |  |             |  |  |  |     |  |        |  |     |  |            |  |  |  |  |  |            |  |  |  |     |  |        |  |    |  |            |  |  |  |                 |  |                   |  |     |  |                  |  |             |  |            |  |      |  |                       |  |  |  |  |  |  |  |  |  |        |  |     |  |  |  |  |  |  |  |  |  |             |  |         |  |       |  |             |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |           |  |           |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |     |  |  |  |  |  |  |  |  |  |                   |  |  |  |                 |  |  |  |                 |  |  |  |        |  |  |  |      |  |  |  |      |  |  |  |             |  |  |  |             |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |                    |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| Bebee E.A.   |    |        |    | SGT              |    | R65810             |    | MG              |    | Uninjured. |    |                       |    | CARD SERIAL No. |    |                |    |               |    |      |    |    |    |    |    |    |    |    |    |    |    |       |  |        |  |                  |  |  |  |  |  |  |  |  |  |                |  |  |  |  |  |  |  |  |  |                     |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |                                  |  |  |  |                |  |                    |  |  |  |  |  |  |  |  |  |                |  |               |  |                             |  |  |  |            |  |                 |  |    |  |         |  |          |  |       |  |      |  |  |  |      |  |     |  |      |  |          |  |  |  |         |  |             |  |  |  |     |  |        |  |   |  |            |  |  |  |              |  |            |  |  |  |     |  |        |  |    |  |            |  |  |  |  |  |             |  |  |  |     |  |        |  |     |  |            |  |  |  |  |  |            |  |  |  |     |  |        |  |    |  |            |  |  |  |                 |  |                   |  |     |  |                  |  |             |  |            |  |      |  |                       |  |  |  |  |  |  |  |  |  |        |  |     |  |  |  |  |  |  |  |  |  |             |  |         |  |       |  |             |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |           |  |           |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |     |  |  |  |  |  |  |  |  |  |                   |  |  |  |                 |  |  |  |                 |  |  |  |        |  |  |  |      |  |  |  |      |  |  |  |             |  |  |  |             |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |                    |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| TYPE A/F & ENGINE  |    | No.    |    | EXTENT OF DAMAGE |    | REPORT FORM        |    | SERIAL No.      |    | DATE       |    | HOURS FLOWN BY PILOTS |    |                 |    |                |    |               |    |      |    |    |    |    |    |    |    |    |    |    |    |       |  |        |  |                  |  |  |  |  |  |  |  |  |  |                |  |  |  |  |  |  |  |  |  |                     |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |                                  |  |  |  |                |  |                    |  |  |  |  |  |  |  |  |  |                |  |               |  |                             |  |  |  |            |  |                 |  |    |  |         |  |          |  |       |  |      |  |  |  |      |  |     |  |      |  |          |  |  |  |         |  |             |  |  |  |     |  |        |  |   |  |            |  |  |  |              |  |            |  |  |  |     |  |        |  |    |  |            |  |  |  |  |  |             |  |  |  |     |  |        |  |     |  |            |  |  |  |  |  |            |  |  |  |     |  |        |  |    |  |            |  |  |  |                 |  |                   |  |     |  |                  |  |             |  |            |  |      |  |                       |  |  |  |  |  |  |  |  |  |        |  |     |  |  |  |  |  |  |  |  |  |             |  |         |  |       |  |             |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |           |  |           |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |     |  |  |  |  |  |  |  |  |  |                   |  |  |  |                 |  |  |  |                 |  |  |  |        |  |  |  |      |  |  |  |      |  |  |  |             |  |  |  |             |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |                    |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| Hudson   |    | 781    |    |                  |    |                    |    |                 |    |            |    | INST. NIGHT           |    | ON TYPE         |    | TOTAL          |    | LAST 6 MOS.   |    |      |    |    |    |    |    |    |    |    |    |    |    |       |  |        |  |                  |  |  |  |  |  |  |  |  |  |                |  |  |  |  |  |  |  |  |  |                     |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |                                  |  |  |  |                |  |                    |  |  |  |  |  |  |  |  |  |                |  |               |  |                             |  |  |  |            |  |                 |  |    |  |         |  |          |  |       |  |      |  |  |  |      |  |     |  |      |  |          |  |  |  |         |  |             |  |  |  |     |  |        |  |   |  |            |  |  |  |              |  |            |  |  |  |     |  |        |  |    |  |            |  |  |  |  |  |             |  |  |  |     |  |        |  |     |  |            |  |  |  |  |  |            |  |  |  |     |  |        |  |    |  |            |  |  |  |                 |  |                   |  |     |  |                  |  |             |  |            |  |      |  |                       |  |  |  |  |  |  |  |  |  |        |  |     |  |  |  |  |  |  |  |  |  |             |  |         |  |       |  |             |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |           |  |           |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |     |  |  |  |  |  |  |  |  |  |                   |  |  |  |                 |  |  |  |                 |  |  |  |        |  |  |  |      |  |  |  |      |  |  |  |             |  |  |  |             |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |                    |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
|  |    |        |    |                  |    |                    |    |                 |    |            |    |                       |    | DUAL SOLO       |    | DUAL SOLO      |    |               |    |      |    |    |    |    |    |    |    |    |    |    |    |       |  |        |  |                  |  |  |  |  |  |  |  |  |  |                |  |  |  |  |  |  |  |  |  |                     |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |                                  |  |  |  |                |  |                    |  |  |  |  |  |  |  |  |  |                |  |               |  |                             |  |  |  |            |  |                 |  |    |  |         |  |          |  |       |  |      |  |  |  |      |  |     |  |      |  |          |  |  |  |         |  |             |  |  |  |     |  |        |  |   |  |            |  |  |  |              |  |            |  |  |  |     |  |        |  |    |  |            |  |  |  |  |  |             |  |  |  |     |  |        |  |     |  |            |  |  |  |  |  |            |  |  |  |     |  |        |  |    |  |            |  |  |  |                 |  |                   |  |     |  |                  |  |             |  |            |  |      |  |                       |  |  |  |  |  |  |  |  |  |        |  |     |  |  |  |  |  |  |  |  |  |             |  |         |  |       |  |             |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |           |  |           |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |     |  |  |  |  |  |  |  |  |  |                   |  |  |  |                 |  |  |  |                 |  |  |  |        |  |  |  |      |  |  |  |      |  |  |  |             |  |  |  |             |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |                    |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
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| SIGNAL No. & DATE  |    |        |    | UNIT No. & DATE  |    |                    |    | COM. No. & DATE |    |            |    | REPORT                |    |                 |    | FILE           |    |               |    | DATE |    |    |    |    |    |    |    |    |    |    |    |       |  |        |  |                  |  |  |  |  |  |  |  |  |  |                |  |  |  |  |  |  |  |  |  |                     |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |                                  |  |  |  |                |  |                    |  |  |  |  |  |  |  |  |  |                |  |               |  |                             |  |  |  |            |  |                 |  |    |  |         |  |          |  |       |  |      |  |  |  |      |  |     |  |      |  |          |  |  |  |         |  |             |  |  |  |     |  |        |  |   |  |            |  |  |  |              |  |            |  |  |  |     |  |        |  |    |  |            |  |  |  |  |  |             |  |  |  |     |  |        |  |     |  |            |  |  |  |  |  |            |  |  |  |     |  |        |  |    |  |            |  |  |  |                 |  |                   |  |     |  |                  |  |             |  |            |  |      |  |                       |  |  |  |  |  |  |  |  |  |        |  |     |  |  |  |  |  |  |  |  |  |             |  |         |  |       |  |             |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |           |  |           |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |     |  |  |  |  |  |  |  |  |  |                   |  |  |  |                 |  |  |  |                 |  |  |  |        |  |  |  |      |  |  |  |      |  |  |  |             |  |  |  |             |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |                    |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| X140 4-9-41  |    |        |    | D598 4-9-41      |    |                    |    |                 |    |            |    |                       |    |                 |    |                |    |               |    |      |    |    |    |    |    |    |    |    |    |    |    |       |  |        |  |                  |  |  |  |  |  |  |  |  |  |                |  |  |  |  |  |  |  |  |  |                     |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |                                  |  |  |  |                |  |                    |  |  |  |  |  |  |  |  |  |                |  |               |  |                             |  |  |  |            |  |                 |  |    |  |         |  |          |  |       |  |      |  |  |  |      |  |     |  |      |  |          |  |  |  |         |  |             |  |  |  |     |  |        |  |   |  |            |  |  |  |              |  |            |  |  |  |     |  |        |  |    |  |            |  |  |  |  |  |             |  |  |  |     |  |        |  |     |  |            |  |  |  |  |  |            |  |  |  |     |  |        |  |    |  |            |  |  |  |                 |  |                   |  |     |  |                  |  |             |  |            |  |      |  |                       |  |  |  |  |  |  |  |  |  |        |  |     |  |  |  |  |  |  |  |  |  |             |  |         |  |       |  |             |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |           |  |           |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |     |  |  |  |  |  |  |  |  |  |                   |  |  |  |                 |  |  |  |                 |  |  |  |        |  |  |  |      |  |  |  |      |  |  |  |             |  |  |  |             |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |                    |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| NATURE OF ACCIDENT   |    |        |    |                  |    |                    |    |                 |    |            |    |                       |    |                 |    |                |    |               |    |      |    |    |    |    |    |    |    |    |    |    |    |       |  |        |  |                  |  |  |  |  |  |  |  |  |  |                |  |  |  |  |  |  |  |  |  |                     |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |                                  |  |  |  |                |  |                    |  |  |  |  |  |  |  |  |  |                |  |               |  |                             |  |  |  |            |  |                 |  |    |  |         |  |          |  |       |  |      |  |  |  |      |  |     |  |      |  |          |  |  |  |         |  |             |  |  |  |     |  |        |  |   |  |            |  |  |  |              |  |            |  |  |  |     |  |        |  |    |  |            |  |  |  |  |  |             |  |  |  |     |  |        |  |     |  |            |  |  |  |  |  |            |  |  |  |     |  |        |  |    |  |            |  |  |  |                 |  |                   |  |     |  |                  |  |             |  |            |  |      |  |                       |  |  |  |  |  |  |  |  |  |        |  |     |  |  |  |  |  |  |  |  |  |             |  |         |  |       |  |             |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |           |  |           |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |     |  |  |  |  |  |  |  |  |  |                   |  |  |  |                 |  |  |  |                 |  |  |  |        |  |  |  |      |  |  |  |      |  |  |  |             |  |  |  |             |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |                    |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |

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TYPE OF A/C  
 TYPE OF ENGINE  
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CAUSES  
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 STAGE OF FLIGHT

UND'TD  
 PRIMARY  
 HAND.Q  
 INSTS.  
 WEATHER  
 DRKNS.  
 ALG SURF.  
 OTHER  
 UND'TD  
 PRIMARY  
 TAXING  
 LANDING  
 TAKE-OFF  
 FLIGHT  
 STATRY  
 FATAL  
 INJURY  
 5RD.

DUTY ON WHICH ENGAGED:

COURT OF INQUIRY, INVESTIGATING OFFICER

**Outer Anti-Submarine Patrol.**

OR COMMANDING OFFICER'S REPORT:

NATURE OF ACCIDENT AND STAGE OF FLIGHT:

DATE:

At 20:25 hours permission was granted by the Control Tower to land on # 4 Runway. A/C landed and after proceeding one third of the way down the runway it hit a bump that pitched it back into the air. When it hit ground again landing gear PRIMARY CAUSE: buckled.

COMPOSITION:

*1st Lt. J. H. ...*

RECOMMENDATIONS:

ACTION TAKEN:

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

SECONDARY CAUSE OR CONTRIBUTING FACTORS:

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

DATE \_\_\_\_\_

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

DATE \_\_\_\_\_