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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="16">TYPE OF A/C</td> <td colspan="16">TYPE OF ENGINE</td> </tr> <tr> <td colspan="16">           PILOT<br/>           OTHERS<br/>           AIRFRAME FAILURE<br/>           ENGINE FAILURE<br/>           CAUSES OF ACCIDENTS         </td> <td colspan="16">           CAUSES<br/>           MISCELLANEOUS<br/>           HANDLING<br/>           INSTS.<br/>           WEATHER<br/>           DRINKS.<br/>           AL'G SURF<br/>           OTHER<br/>           UND/TD<br/>           PRIMARY<br/>           TAXIING<br/>           LANDING<br/>           TAKE-OFF<br/>           FLIGHT<br/>           STATIONARY<br/>           FATAL<br/>           INJ.<br/>           3RD.         </td> </tr> <tr> <td colspan="16">           UNIT <b>34 S.F.T.S.</b><br/> <b>Medicine Hat.</b><br/>           A/C TYPE <b>Oxford II</b> </td> <td colspan="16">           COM. # <b>4</b><br/>           PLACE <b>Aerodrome Medicine Hat.</b><br/>           No. <b>V3319</b><br/>           CRASH CAT. <b>B</b> </td> </tr> <tr> <td colspan="16">           DATE <b>20-7-42</b> TIME <b>0130</b><br/>           H.G. FILE <b>1300 V3319</b> </td> <td colspan="16">           SE ME DAY NIGHT<br/> <b>X X</b> </td> </tr> <tr> <td colspan="16">           NAME<br/> <b>Garnett, J.D.</b> </td> <td colspan="4">           RANK<br/> <b>LAC</b> </td> <td colspan="4">           No.<br/> <b>658743</b> </td> <td colspan="4">           DUTY<br/> <b>PP</b> </td> <td colspan="4">           INJURIES<br/> <b>Uninjured</b> </td> <td colspan="4">           SERIOUS<br/>           FATAL INJURY         </td> </tr> <tr> <td colspan="16">           TYPE A/F &amp; ENGINE<br/> <b>Oxford</b> </td> <td colspan="4">           No.<br/> <b>V3319</b> </td> <td colspan="4">           EXTENT OF DAMAGE<br/> <b>Serious</b> </td> <td colspan="4">           REPORT FORM         </td> <td colspan="4">           SERIAL No.         </td> <td colspan="4">           DATE         </td> <td colspan="8">           HOURS FLOWN BY PILOTS         </td> </tr> <tr> <td colspan="16"> <b>Chaetah 156/159277 Nil</b><br/> <b>Chaetah 40227/178146 7/8</b> </td> <td colspan="4">           INST.         </td> <td colspan="4">           NIGHT         </td> <td colspan="4">           ON TYPE<br/>           DUAL SOLO         </td> <td colspan="4">           TOTAL<br/>           DUAL SOLO         </td> <td colspan="4">           LAST 6 MOS.         </td> </tr> <tr> <td colspan="16">           SIGNAL No. &amp; DATE<br/> <b>T 168 22-7</b> </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="32">           NATURE OF ACCIDENT         </td> </tr> </table> |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |   |    |    |    |                                    |    |    |    |                      |    |    |    |                              |    |    |    | TYPE OF A/C             |  |  |  |                       |  |  |  |  |  |  |  |  |  |  |  | TYPE OF ENGINE |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  | PILOT<br>OTHERS<br>AIRFRAME FAILURE<br>ENGINE FAILURE<br>CAUSES OF ACCIDENTS |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  | CAUSES<br>MISCELLANEOUS<br>HANDLING<br>INSTS.<br>WEATHER<br>DRINKS.<br>AL'G SURF<br>OTHER<br>UND/TD<br>PRIMARY<br>TAXIING<br>LANDING<br>TAKE-OFF<br>FLIGHT<br>STATIONARY<br>FATAL<br>INJ.<br>3RD. |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  | UNIT <b>34 S.F.T.S.</b><br><b>Medicine Hat.</b><br>A/C TYPE <b>Oxford II</b> |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  | COM. # <b>4</b><br>PLACE <b>Aerodrome Medicine Hat.</b><br>No. <b>V3319</b><br>CRASH CAT. <b>B</b> |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  | DATE <b>20-7-42</b> TIME <b>0130</b><br>H.G. FILE <b>1300 V3319</b> |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  | SE ME DAY NIGHT<br><b>X X</b> |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  | NAME<br><b>Garnett, J.D.</b> |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  | RANK<br><b>LAC</b> |  |  |  | No.<br><b>658743</b> |  |  |  | DUTY<br><b>PP</b> |  |  |  | INJURIES<br><b>Uninjured</b> |  |  |  | SERIOUS<br>FATAL INJURY |  |  |  | TYPE A/F & ENGINE<br><b>Oxford</b> |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  | No.<br><b>V3319</b> |  |  |  | EXTENT OF DAMAGE<br><b>Serious</b> |  |  |  | REPORT FORM |  |  |  | SERIAL No. |  |  |  | DATE |  |  |  | HOURS FLOWN BY PILOTS |  |  |  |  |  |  |  | <b>Chaetah 156/159277 Nil</b><br><b>Chaetah 40227/178146 7/8</b> |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  | INST. |  |  |  | NIGHT |  |  |  | ON TYPE<br>DUAL SOLO |  |  |  | TOTAL<br>DUAL SOLO |  |  |  | LAST 6 MOS. |  |  |  | SIGNAL No. & DATE<br><b>T 168 22-7</b> |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  | UNIT No. & DATE |  |  |  | COM. No. & DATE |  |  |  | REPORT |  |  |  | FILE |  |  |  | DATE |  |  |  | NATURE OF ACCIDENT |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| TYPE OF A/C   |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    | TYPE OF ENGINE  |    |    |    |                                    |    |    |    |                      |    |    |    |                              |    |    |    |                         |  |  |  |                       |  |  |  |  |  |  |  |  |  |  |  |                |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |   |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |   |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |                               |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |                              |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |                    |  |  |  |                      |  |  |  |                   |  |  |  |                              |  |  |  |                         |  |  |  |                                    |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |                     |  |  |  |                                    |  |  |  |             |  |  |  |            |  |  |  |      |  |  |  |                       |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |       |  |  |  |       |  |  |  |                      |  |  |  |                    |  |  |  |             |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |                 |  |  |  |                 |  |  |  |        |  |  |  |      |  |  |  |      |  |  |  |                    |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| PILOT<br>OTHERS<br>AIRFRAME FAILURE<br>ENGINE FAILURE<br>CAUSES OF ACCIDENTS  |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    | CAUSES<br>MISCELLANEOUS<br>HANDLING<br>INSTS.<br>WEATHER<br>DRINKS.<br>AL'G SURF<br>OTHER<br>UND/TD<br>PRIMARY<br>TAXIING<br>LANDING<br>TAKE-OFF<br>FLIGHT<br>STATIONARY<br>FATAL<br>INJ.<br>3RD. |    |    |    |                                    |    |    |    |                      |    |    |    |                              |    |    |    |                         |  |  |  |                       |  |  |  |  |  |  |  |  |  |  |  |                |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |   |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |   |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |                               |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |                              |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |                    |  |  |  |                      |  |  |  |                   |  |  |  |                              |  |  |  |                         |  |  |  |                                    |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |                     |  |  |  |                                    |  |  |  |             |  |  |  |            |  |  |  |      |  |  |  |                       |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |       |  |  |  |       |  |  |  |                      |  |  |  |                    |  |  |  |             |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |                 |  |  |  |                 |  |  |  |        |  |  |  |      |  |  |  |      |  |  |  |                    |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| UNIT <b>34 S.F.T.S.</b><br><b>Medicine Hat.</b><br>A/C TYPE <b>Oxford II</b>  |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    | COM. # <b>4</b><br>PLACE <b>Aerodrome Medicine Hat.</b><br>No. <b>V3319</b><br>CRASH CAT. <b>B</b>  |    |    |    |                                    |    |    |    |                      |    |    |    |                              |    |    |    |                         |  |  |  |                       |  |  |  |  |  |  |  |  |  |  |  |                |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |   |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |   |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |                               |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |                              |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |                    |  |  |  |                      |  |  |  |                   |  |  |  |                              |  |  |  |                         |  |  |  |                                    |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |                     |  |  |  |                                    |  |  |  |             |  |  |  |            |  |  |  |      |  |  |  |                       |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |       |  |  |  |       |  |  |  |                      |  |  |  |                    |  |  |  |             |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |                 |  |  |  |                 |  |  |  |        |  |  |  |      |  |  |  |      |  |  |  |                    |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| DATE <b>20-7-42</b> TIME <b>0130</b><br>H.G. FILE <b>1300 V3319</b>   |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    | SE ME DAY NIGHT<br><b>X X</b>   |    |    |    |                                    |    |    |    |                      |    |    |    |                              |    |    |    |                         |  |  |  |                       |  |  |  |  |  |  |  |  |  |  |  |                |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |   |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |   |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |                               |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |                              |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |                    |  |  |  |                      |  |  |  |                   |  |  |  |                              |  |  |  |                         |  |  |  |                                    |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |                     |  |  |  |                                    |  |  |  |             |  |  |  |            |  |  |  |      |  |  |  |                       |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |       |  |  |  |       |  |  |  |                      |  |  |  |                    |  |  |  |             |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |                 |  |  |  |                 |  |  |  |        |  |  |  |      |  |  |  |      |  |  |  |                    |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| NAME<br><b>Garnett, J.D.</b>  |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    | RANK<br><b>LAC</b>  |    |    |    | No.<br><b>658743</b>               |    |    |    | DUTY<br><b>PP</b>    |    |    |    | INJURIES<br><b>Uninjured</b> |    |    |    | SERIOUS<br>FATAL INJURY |  |  |  |                       |  |  |  |  |  |  |  |  |  |  |  |                |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |   |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |   |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |                               |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |                              |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |                    |  |  |  |                      |  |  |  |                   |  |  |  |                              |  |  |  |                         |  |  |  |                                    |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |                     |  |  |  |                                    |  |  |  |             |  |  |  |            |  |  |  |      |  |  |  |                       |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |       |  |  |  |       |  |  |  |                      |  |  |  |                    |  |  |  |             |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |                 |  |  |  |                 |  |  |  |        |  |  |  |      |  |  |  |      |  |  |  |                    |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| TYPE A/F & ENGINE<br><b>Oxford</b>  |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    | No.<br><b>V3319</b>   |    |    |    | EXTENT OF DAMAGE<br><b>Serious</b> |    |    |    | REPORT FORM          |    |    |    | SERIAL No.                   |    |    |    | DATE                    |  |  |  | HOURS FLOWN BY PILOTS |  |  |  |  |  |  |  |  |  |  |  |                |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |   |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |   |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |                               |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |                              |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |                    |  |  |  |                      |  |  |  |                   |  |  |  |                              |  |  |  |                         |  |  |  |                                    |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |                     |  |  |  |                                    |  |  |  |             |  |  |  |            |  |  |  |      |  |  |  |                       |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |       |  |  |  |       |  |  |  |                      |  |  |  |                    |  |  |  |             |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |                 |  |  |  |                 |  |  |  |        |  |  |  |      |  |  |  |      |  |  |  |                    |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| <b>Chaetah 156/159277 Nil</b><br><b>Chaetah 40227/178146 7/8</b>  |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    | INST.   |    |    |    | NIGHT                              |    |    |    | ON TYPE<br>DUAL SOLO |    |    |    | TOTAL<br>DUAL SOLO           |    |    |    | LAST 6 MOS.             |  |  |  |                       |  |  |  |  |  |  |  |  |  |  |  |                |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |   |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |   |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |                               |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |                              |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |                    |  |  |  |                      |  |  |  |                   |  |  |  |                              |  |  |  |                         |  |  |  |                                    |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |                     |  |  |  |                                    |  |  |  |             |  |  |  |            |  |  |  |      |  |  |  |                       |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |       |  |  |  |       |  |  |  |                      |  |  |  |                    |  |  |  |             |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |                 |  |  |  |                 |  |  |  |        |  |  |  |      |  |  |  |      |  |  |  |                    |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| SIGNAL No. & DATE<br><b>T 168 22-7</b>  |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    | UNIT No. & DATE   |    |    |    | COM. No. & DATE                    |    |    |    | REPORT               |    |    |    | FILE                         |    |    |    | DATE                    |  |  |  |                       |  |  |  |  |  |  |  |  |  |  |  |                |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |   |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |   |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |                               |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |                              |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |                    |  |  |  |                      |  |  |  |                   |  |  |  |                              |  |  |  |                         |  |  |  |                                    |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |                     |  |  |  |                                    |  |  |  |             |  |  |  |            |  |  |  |      |  |  |  |                       |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |       |  |  |  |       |  |  |  |                      |  |  |  |                    |  |  |  |             |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |                 |  |  |  |                 |  |  |  |        |  |  |  |      |  |  |  |      |  |  |  |                    |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| NATURE OF ACCIDENT  |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |   |    |    |    |                                    |    |    |    |                      |    |    |    |                              |    |    |    |                         |  |  |  |                       |  |  |  |  |  |  |  |  |  |  |  |                |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |   |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |   |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |                               |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |                              |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |                    |  |  |  |                      |  |  |  |                   |  |  |  |                              |  |  |  |                         |  |  |  |                                    |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |                     |  |  |  |                                    |  |  |  |             |  |  |  |            |  |  |  |      |  |  |  |                       |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |       |  |  |  |       |  |  |  |                      |  |  |  |                    |  |  |  |             |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |                 |  |  |  |                 |  |  |  |        |  |  |  |      |  |  |  |      |  |  |  |                    |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| 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 |                         |  |  |  |                       |  |  |  |  |  |  |  |  |  |  |  |                |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |   |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |   |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |                               |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |                              |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |                    |  |  |  |                      |  |  |  |                   |  |  |  |                              |  |  |  |                         |  |  |  |                                    |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |                     |  |  |  |                                    |  |  |  |             |  |  |  |            |  |  |  |      |  |  |  |                       |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |       |  |  |  |       |  |  |  |                      |  |  |  |                    |  |  |  |             |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |                 |  |  |  |                 |  |  |  |        |  |  |  |      |  |  |  |      |  |  |  |                    |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |

DUTY ON WHICH ENGAGED:

COURT OF INQUIRY, INVESTIGATING OFFICER

R170

Solo night.

OR COMMANDING OFFICER'S REPORT:

NATURE OF ACCIDENT AND STAGE OF FLIGHT:

DATE:

05 / UTB / 055

COMPOSITION:

Starboard oleo leg collapsed during take off. Pupil had just attained a speed over the ground of 75 m.p.h. when the starboard tyre burst and the aircraft ground looped.

RECOMMENDATIONS:

Nil

PRIMARY CAUSE:

~~Oleo strained during previous landing. Starboard tyre burst on take-off.~~

ACTION TAKEN:

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

Nil

SECONDARY CAUSE OR CONTRIBUTING FACTORS:

~~Aircraft ground looped and starboard undercarriage collapsed.~~

35

30. M/s defect

RECORDED BY

DATE

CHECKED BY

DATE