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|---|----|----|-----------------|----|----|--------------------------|----|----|-------------|----|----|------------|----|----|-----------|----|-------|-----------------------|---------|----|-----------|----|-------------|----|----|----|----|----|----|----|----|---|-------|--|--|--------|--|--|------------------|--|--|--|--|--|--|--|--|--|--|--|----------------|--|--|--|--|--|--|--|--|--|--|--|---------------------|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|-------------------|--|--|--------|--|--|--------------------------|--|--|--|--|--|--|--|--|--|--|--|--------------|--|--|-----------|--|--|------------------|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|----------------------|--|--|--|--|--|------------------|--|--|----------|--|--|--------------|--|--|------|--|--|----|--|--|-------|--|--|-------|--|--|------|--|--|--|--|--|------|--|--|-----|--|--|------|--|--|----------|--|--|--|--|--|---------|--|--|--------------|--|--|--|--|--|-----|--|--|-----|--|--|---|--|--|-----------|--|--|--|--|--|-------|--|--------|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|-----------------|--|--|--|--|--|--|--|--|--|--|--|--|--|--|-------------------|--|--|-----|--|--|------------------|--|--|-------------|--|--|------------|--|--|------|--|--|-----------------------|--|--|--|--|--|---------|--|--|------|--|--|---------|--|--|--|--|--|--|--|--|-------|--|-------|--|---------|--|-------|--|-------------|--|------|--|--|-----------|--|--|---------|--|--|--|--|--|--|--|--|----|--|---|--|----|--|----|--|----|--|-------------------|--|--|-----------------|--|--|-----------------|--|--|--------|--|--|------|--|--|------|--|--|--|--|--|------|--|--|---------|--|--|--|--|--|--|--|--|--|--|--|--------------------|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|
| 32 | JU | 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="3">PILOT</td> <td colspan="3">OTHERS</td> <td colspan="12">AIRFRAME FAILURE</td> <td colspan="12">ENGINE FAILURE</td> </tr> <tr> <td colspan="33" style="text-align: center;">CAUSES OF ACCIDENTS</td> </tr> <tr> <td colspan="3">UNIT # 2 S.F.T.S.</td> <td colspan="3">COM. 3</td> <td colspan="12">PLACE Uplands Aerodrome.</td> <td colspan="3">DATE 27-4-41</td> <td colspan="3">TIME 1615</td> </tr> <tr> <td colspan="3">Uplands, Ottawa.</td> <td colspan="3"></td> <td colspan="12"></td> <td colspan="3">H.Q. FILE 1100-28-88</td> <td colspan="3"></td> </tr> <tr> <td colspan="3">A/C TYPE Harvard</td> <td colspan="3">No. 2888</td> <td colspan="3">CRASH CAT. B</td> <td colspan="3">SE X</td> <td colspan="3">ME</td> <td colspan="3">DAY X</td> <td colspan="3">NIGHT</td> </tr> <tr> <td colspan="6">NAME</td> <td colspan="3">RANK</td> <td colspan="3">No.</td> <td colspan="3">DUTY</td> <td colspan="6">INJURIES</td> <td colspan="3">SERIOUS</td> </tr> <tr> <td colspan="6">McCallum, J.</td> <td colspan="3">LAG</td> <td colspan="3">265</td> <td colspan="3">P</td> <td colspan="6">Uninjured</td> <td colspan="2">FATAL</td> <td colspan="1">INJURY</td> </tr> <tr> <td colspan="18"></td> <td colspan="3">CARD SERIAL No.</td> <td colspan="12"></td> </tr> <tr> <td colspan="3">TYPE A/F & ENGINE</td> <td colspan="3">No.</td> <td colspan="3">EXTENT OF DAMAGE</td> <td colspan="3">REPORT FORM</td> <td colspan="3">SERIAL No.</td> <td colspan="3">DATE</td> <td colspan="6">HOURS FLOWN BY PILOTS</td> </tr> <tr> <td colspan="3">Harvard</td> <td colspan="3">2888</td> <td colspan="3">Serious</td> <td colspan="3"></td> <td colspan="3"></td> <td colspan="2">INST.</td> <td colspan="2">NIGHT</td> <td colspan="2">ON TYPE</td> <td colspan="2">TOTAL</td> <td colspan="2">LAST 6 MOS.</td> </tr> <tr> <td colspan="3">Wasp</td> <td colspan="3">8561/4420</td> <td colspan="3">Serious</td> <td colspan="3"></td> <td colspan="3"></td> <td colspan="2">13</td> <td colspan="2">-</td> <td colspan="2">25</td> <td colspan="2">81</td> <td colspan="2">81</td> </tr> <tr> <td colspan="3">SIGNAL No. & DATE</td> <td colspan="3">UNIT No. & DATE</td> <td colspan="3">COM. No. & DATE</td> <td colspan="3">REPORT</td> <td colspan="3">FILE</td> <td colspan="3">DATE</td> </tr> <tr> <td colspan="3"></td> <td colspan="3">A372</td> <td colspan="3">27-4-41</td> <td colspan="3"></td> <td colspan="3"></td> <td colspan="3"></td> </tr> <tr> <td colspan="33" style="text-align: center;">NATURE OF ACCIDENT</td> </tr> </table> | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | PILOT | | | OTHERS | | | AIRFRAME FAILURE | | | | | | | | | | | | ENGINE FAILURE | | | | | | | | | | | | CAUSES OF ACCIDENTS | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | UNIT # 2 S.F.T.S. | | | COM. 3 | | | PLACE Uplands Aerodrome. | | | | | | | | | | | | DATE 27-4-41 | | | TIME 1615 | | | Uplands, Ottawa. | | | | | | | | | | | | | | | | | | H.Q. FILE 1100-28-88 | | | | | | A/C TYPE Harvard | | | No. 2888 | | | CRASH CAT. B | | | SE X | | | ME | | | DAY X | | | NIGHT | | | NAME | | | | | | RANK | | | No. | | | DUTY | | | INJURIES | | | | | | SERIOUS | | | McCallum, J. | | | | | | LAG | | | 265 | | | P | | | Uninjured | | | | | | FATAL | | INJURY | | | | | | | | | | | | | | | | | | | CARD SERIAL No. | | | | | | | | | | | | | | | TYPE A/F & ENGINE | | | No. | | | EXTENT OF DAMAGE | | | REPORT FORM | | | SERIAL No. | | | DATE | | | HOURS FLOWN BY PILOTS | | | | | | Harvard | | | 2888 | | | Serious | | | | | | | | | INST. | | NIGHT | | ON TYPE | | TOTAL | | LAST 6 MOS. | | Wasp | | | 8561/4420 | | | Serious | | | | | | | | | 13 | | - | | 25 | | 81 | | 81 | | SIGNAL No. & DATE | | | UNIT No. & DATE | | | COM. No. & DATE | | | REPORT | | | FILE | | | DATE | | | | | | A372 | | | 27-4-41 | | | | | | | | | | | | NATURE OF ACCIDENT | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| PILOT | | | OTHERS | | | AIRFRAME FAILURE | | | | | | | | | | | | ENGINE FAILURE | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| CAUSES OF ACCIDENTS | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| UNIT # 2 S.F.T.S. | | | COM. 3 | | | PLACE Uplands Aerodrome. | | | | | | | | | | | | DATE 27-4-41 | | | TIME 1615 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Uplands, Ottawa. | | | | | | | | | | | | | | | | | | H.Q. FILE 1100-28-88 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| A/C TYPE Harvard | | | No. 2888 | | | CRASH CAT. B | | | SE X | | | ME | | | DAY X | | | NIGHT | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| NAME | | | | | | RANK | | | No. | | | DUTY | | | INJURIES | | | | | | SERIOUS | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| McCallum, J. | | | | | | LAG | | | 265 | | | P | | | Uninjured | | | | | | FATAL | | INJURY | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
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| TYPE A/F & ENGINE | | | No. | | | EXTENT OF DAMAGE | | | REPORT FORM | | | SERIAL No. | | | DATE | | | HOURS FLOWN BY PILOTS | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Harvard | | | 2888 | | | Serious | | | | | | | | | INST. | | NIGHT | | ON TYPE | | TOTAL | | LAST 6 MOS. | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Wasp | | | 8561/4420 | | | Serious | | | | | | | | | 13 | | - | | 25 | | 81 | | 81 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| SIGNAL No. & DATE | | | UNIT No. & DATE | | | COM. No. & DATE | | | REPORT | | | FILE | | | DATE | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | | | A372 | | | 27-4-41 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| NATURE OF ACCIDENT | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| CAUSES | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| STAGE OF FLIGHT | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |

- UNDPD
- PRIMARY
- HAND Q.
- INSTS.
- WEATHER
- DRINKS.
- AL'S SURF.
- OTHER
- UNDPD
- PRIMARY
- TAXING
- LANDING
- TAKE-OFF
- FLIGHT
- STRATRY
- FATAL
- INJ.
- SHD.

DUTY ON WHICH ENGAGED: **Take off, landing and turns.** COURT OF INQUIRY, INVESTIGATING OFFICER
OR COMMANDING OFFICER'S REPORT:

LH/PSHD/USD

MONTHLY ACCIDENT RETURN.

NATURE OF ACCIDENT AND STAGE OF FLIGHT:

DATE:

Ground loop after alighting.

COMPOSITION:

PILOT LANDED AFTER MAKING A CRAB APPROACH
ALLOWED THE WHEELS TO STRIKE THE RUNWAY AT
AN ANGLE CAUSING THE LEFT WING TO DROP AND
THE AIRCRAFT TO GROUND LOOP TO THE LEFT
SNAPPING OFF UNDERCARRIAGE.

RECOMMENDATIONS:

PRIMARY CAUSE:

**Insufficient correctoun of swing
after the pilot landied.**

ACTION TAKEN:

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

SECONDARY CAUSE OR CONTRIBUTING FACTORS:

AIRCRAFT GROUND LOOPED.

RECORDED BY _____

DATE _____

CHECKED BY _____

DATE _____