

398
R.A.F. FORM 2520C

OFFICER



ROYAL AIR FORCE
SERVICE AND RELEASE BOOK

Rank F/WT

Personal Number 129587

Surname BISCOE

Initials A. E.

Class of Release A.

Age and Service Group No. 40

CHANGE OF ADDRESS—Notification to Air Ministry

If you change your address before your commission is terminated you should notify Air Ministry (O.A.R.) Adairal House, Kingsway, London, W.C.2.

Your notification should be in the following form:—

Christian Names }
(in full) }

Surname
(BLOCK LETTERS)

Rank Personal Number

Branch in which commissioned

Type of Commission

I have to inform you that I have changed my address,
which is now:—

.....
(BLOCK LETTERS)

Date Signature

WARNING

You are reminded that the unauthorized communication by you to any person at any time of any information that you may have acquired in the course of your Service renders you liable to prosecution under the Official Secrets Acts 1911 and 1920.

This covers disclosure in any form whether orally or in writing or by publication in the press or in book form.

In case of death, next of kin or personal representatives are requested immediately to inform Air Ministry (O.A.R.) Adairal House, Kingsway, London, W.C.2.

Any person
knowingly making
a false statement
will be liable
to prosecution.

Signature
Address

Date

- (a) In which unit were you then serving?
(b) Where were you stationed?
(c) What was the precise nature of your duties at the time?
(a) (b) (c)

CHANGE OF ADDRESS

If you change your residence, you should notify the Home, Kingsway, London, W.C.2.

Your notification should be sent to the Home, Kingsway, London, W.C.2.

Christian Names (in full)

Surname

Rank

Branch in which commissioned

Type of Commission

I have to inform you which is now

Date

R.A.F. FORM 2520/123
M.P.B. 281

CLAIM FOR DISABILITY PENSION—R.A.F. OFFICER

THIS FORM is to be used only if you claim to be suffering from disability attributable to or aggravated by WAR SERVICE. You may complete it at any time WITHIN 6 MONTHS after the date you ceased to draw service pay.

When completed the form should be sent to the Air Ministry (O.A.R.), Adastral House, Kingsway W.C.2.

If there is insufficient space on the form further explanations or answers can be written on a plain sheet of paper which you must SIGN and attach firmly to the form.

Any pension granted on this application will commence on the day following cessation of service pay.

After six months from the cessation of service pay, any claim to pension must be made on a different form to be obtained from the nearest office of the MINISTRY OF PENSIONS, the address of which can be obtained at the Local Post Office.

1. Surname BISCOE (BLOCK LETTERS) 2. Personal No. 129557
 3. Christian Name/s Arthur George
 4. Rank P/Lt 5. Unit/Group No 6 Wing
 6. Date of Release

7. Have you served in the Armed Forces before the present War and been discharged? ("Yes" or "No")

If "Yes" give particulars below:—

Former Regt., Corps or Ship, etc.	Army or Official Number	Date of Discharge	Cause of Discharge	Particulars of Pension (if any) for disablement or service

8. Give particulars of your wife and children now under 18 years of age for whom you received family allowances at any time during service:—

- (a) Wife—full Christian Names and name before marriage
- (b) Wife's present address
- (c) Date of marriage
- (d) CHILDREN 1. Date of Birth
- Full Christian Names (and Surname where different from your own) and dates of birth. 2. Date of Birth
3. Date of Birth

9. Give particulars of any child born after release. Name/s Date/s of Birth

Date

Signature

• Delete where not applicable.

PARTICULARS OF CLAIM

The following questions should be answered with care. The answers will assist in the enquiries to be made of official records. Incomplete answers may delay the consideration of your claim.

QUESTION	ANSWER
10. What is the disability for which you claim pension? If a wound or injury state when and where received and part of body injured.	
11. Give the names of the hospitals or other places at which you received treatment during service for the disability and the dates as nearly as you can.	
12. IF YOU CLAIM SOLELY IN RESPECT OF A WOUND OR INJURY, YOU NEED NOT ANSWER ANY OF THE FOLLOWING QUESTIONS—but the claim form must be signed and dated—see opposite page.	
QUESTION	ANSWER
13. (a) When did you first suffer from the disability? (b) If before your war service when did you first notice the effects of war service on it?	(a) (b)
14. State what particular incidents or conditions of service you consider caused or worsened the disability.	
15. (a) In which unit were you then serving? (b) Where were you stationed? (c) What was the precise nature of your duties at the time?	(a) (b) (c)
16. If you suffered from the disability before joining the Forces, give the name and address of any doctor, hospital, etc., from which you received treatment. Give approximate dates.	
17. Have you been treated for the above or any other complaint since Released? If so, state nature of complaint and name and address of doctor or hospital with first and last dates of attendance.	

Any person knowingly making a false statement will be liable to prosecution.

Signature Date

Address

Address (if different from above) to which you desire the result of your claim to be sent:

Witness to Signature Date

(Any householder)

Address of Witness

Second signature of applicant (for record purposes)

CONDITIONS OF RELEASE AND NOTES ON PAYMENT OF ALLOWANCES AND RELEASE BENEFITS

1. **Officers of the R.A.F.O. and R.A.F.V.R.**—You are hereby released from Air Force duty under the regulations affecting the Reserve in which you are commissioned.
2. **Officers of the A.A.F.**—You are hereby released from the obligations to which you are subject by reason of embodiment of that part of the Force of which you are a member, under the provisions of the Armed Forces (Conditions of Service) Act, 1939.
3. **All Officers released.**—Your release is subject to and on the following conditions:—
 - (i) Your commission is not terminated by this release from duty. You remain liable to recall to duty until your commission is relinquished or otherwise terminated. Ordinarily, a communication in regard to relinquishment will be issued at the end of the Emergency.
 - (ii) Your pay and allowances cease on your last day of service i.e. your effective date of release and no time after that date will count for promotion or non-effective award or other Service benefits so long as you are on release.
 - (iii) Until your commission is relinquished or terminated—
 - (a) You must notify Air Ministry (O.A.R.), Adastral House, Kingsway, London, W.C. 2, of any change in your address. This is required both for service reasons and to enable any communication in regard to future payments or medals or decorations to reach you. (see also para 7).
 - (b) If you become medically unfit through any injury, illness or disability which renders you unfit for further service you should also notify Air Ministry (O.A.R.)
 - (c) You may not enlist in or enter any other branch of H.M. Forces or the service of any other country or depart from the U.K. without permission from the Air Ministry. If you desire to do so, write to Air Ministry (O.A.R.), Adastral House, Kingsway, for consent.
 - (d) You should preserve your uniform in good condition in case of recall to duty.
 - (e) Uniform is not to be worn after the expiration of any leave granted you on release except on specially authorised occasions or on occasions of State Ceremony.
 - (iv) You are not entitled to service travel rate concessions for yourself or any members of your family after the expiration of any leave granted to you on release. If no leave be granted, the entitlement ceases on the day you departed from the Dispersal Centre.

Part V.—Hospital Treatment during Release Leave.

If you need hospital treatment before the end of your leave you should show this book to your doctor and if he is of opinion that such treatment is necessary he will advise you as to the steps to be taken to obtain that treatment. You should show this Release Book to the hospital authorities when admitted to or attending hospital for treatment.

For the information of the doctor.

In-patient treatment would normally be given at the nearest service or civil Emergency Medical Scheme hospital where the treatment required can be given. If you are in doubt as to the location of the nearest suitable hospital the Hospital Officer for the district in which the patient resides can give you the required information and he will also be in a position to advise as to the nearest military or E.M.S. hospital where any massage, X-ray examination or other out-patient treatment can be obtained.

Part VI to be completed by Doctor providing treatment who should also detach the form and send it to the Insurance Committee (in Northern Ireland to the Ministry of Labour, Stormont, Belfast), for the area in which the insured person is staying.

- * The person named overleaf who was not on my list immediately before serving in H.M. Forces is accepted as from today as a temporary*/permanent* resident.
- * The person named overleaf who states that he was on my list immediately before serving in H.M. Forces has to-day applied to me for treatment.

Date..... Signature.....

* Delete where not applicable.

(If doctor is to supply drugs he should enter DR. here).....

(If doctor claims mileage he should enter mileage distance here).....

4. **Class A Release—(Age and Service).** (i) Any reinstatement rights that you may have under the Reinstatement in Civil Employment Act, 1944, arise immediately on your departure from the Dispersal Centre.

(ii) Payment of allowances due to you up to the day of your leaving your unit for release will be paid by your existing accounting unit. Payment of allowances from that date up to the effective date of your release will be paid monthly by the Dispersal Centre into your Banking Account.

(iii) Any payments to which you may be entitled in respect of your service for War Gratuity and Post War Credits will be made in the form of a deposit in the Post Office Savings Bank on the 57th day after you left the Dispersal Centre. A Post Office Savings Bank Book will then be forwarded to you by the Head Office of the Post Office Savings Bank.

5. **Class B Releases—(National Reconstruction).**

(i) You have been released in advance of ordinary turn at the request of the Ministry of Labour and National Service, in order to perform work of national reconstruction. You are to report to the Employment Exchange or employer as shown below within seven days from the date of your departure from the Dispersal Centre. You will ordinarily be required to commence work on the expiration of your leave, but may commence earlier if you desire. You will be directed into the employment for which you have been released.

(ii) Payment of allowances due to you up to the day of your leaving your unit for release will be paid by your existing accounting unit. Payment of allowances from that date up to the effective date of your release will be paid by the Dispersal Centre into your Banking Account.

(iii) Any payments to which you may be entitled in respect of your service overseas or for War Gratuity and Post War Credits will be made in the form of a deposit in the Post Office Savings Bank at the end of the Emergency. A Post Office Savings Bank Book will then be forwarded to you by the Head Office of the Post Office Savings Bank.

(iv) If at any time prior to the date on which the Emergency is declared ended by Order in Council you cease to perform the work for which you have been released, save for reasons of ill health, your release will be revoked and you will be recalled to duty.

REMOBILISATION INSTRUCTIONS (RECALL TO DUTY).

1. As stated in the Conditions of Release you remain liable to recall to duty until your commission is relinquished or otherwise terminated.

2. Such recall may be issued in the form of individual instructions in which case you will be given full instructions as to where and when you are to report.

3. If a public general notice or proclamation is issued revoking releases and recalling officers to duty you should immediately prepare yourself to return to duty and watch the press or public notice boards for further instructions as to when you are to report.

4. If remobilisation or return to duty is ordered by general notice, or by proclamation revoking releases, a list of R.A.F. Remobilisation Stations will be published in the press and by public notice, showing the particular stations under code letters.

Your code letter is **H**, and on the publication or proclamation of instructions which apply to you, you should report to the station to which this code letter applies.

5. You should report at your Remobilisation Station as shown above, in uniform.

6. You should also bring with you:—

- (i) this book.
- (ii) your National Health and Pensions Insurance Contribution Card.
- (iii) your Unemployment Insurance Book.
- (iv) your Civilian Identity Card.
- (v) your Service Identity Disc.

If you cannot get these at once do not delay but arrange for them to be sent on after you. If you are sick when due to report you must immediately inform the Officer Commanding the station at which you are to report, enclosing a medical certificate. You should report immediately you are fit for duty.

To be completed for all officers.

CLEARANCE CERTIFICATE

To be completed at Unit except where marked**

Rank F/lt Number 129557
 Initials A.E. Surname Bischoff
(BLOCK LETTERS)

I hereby certify that the above-named officer has been cleared of all known charges in respect of deficiencies of public clothing and equipment, articles on equipment loan, or charge except for £.....s.....d.,** which has been reported to Air Ministry, Accounts 2(a).



A. E. Bischoff F/lt

Specimen Signature of Officer.

Anyone finding this book is
requested to hand it in to the
nearest Police Station or for-
ward in an UNSTAMPED
envelope to:—

UNDER SECRETARY OF STATE FOR AIR,
Air Ministry O.A.R.,
Adastral House,
Kingsway, LONDON, W.C.2.