## DEPARTMENT OF THE AIR FORCE

## WASHINGTON 25, D.C. CASUALTY REPORT

REPORT OF DEATH BATTLE INTERIM C	CORRECTED (Correc	ts report : y previous	ro. )	20 April 1960
REPORT NO. 906 X NON-BATTLE X COMPLETE (COL	mpletes Report N	0.	)	DATE PREPARED
NAME GRADE	GRADE SERVIC		UMBER	SOCIAL SECURITY NO.
LEWIS, William David	Major	37 632	A	449-18-6821
ORGANIZATION OF LAST ASSIGNMENT 2322nd Instructor Squadron,			FORMER SERVICE NUMBER(S)	
Hamilton AFB, California; ATTACHED: 120th Fighter Group,			AD 18 055 451	
Gore Hill. Great Falls International Airpo			AO 665 925	
PLACE OF DEATH Great Falls International DATE OF DEATH			DATE OF BIRTH	
Airport, Great Falls, Montana	-0.1		21 Mar 1921	
CAUSE OF DEATH			DATE OF CURRENT DD FORM 93	
			6 Mar 1958	
Military aircraft accident (pilot)			DATE OF LAST ENTRY ON ACTIVE DUTY 22 Feb 1951	
DOCUMENTATION FOR VA LINE-OF-DUTY DETERMINATION APPLICABLE YES X NO				
HOME ADDRESS PRIOR TO ENTRY INTO SERVICE (City, County, and State)			PRIOR SERVICE X YES NO	
Houston, Harris County, Texas			STATUS (Basis for issuing report)	
SPOUSE Mrs. June Elizabeth Lewis, 3825 - 5th Avenue South,			ACTIVE DUTY	
Great Falls, Montana			ACTIVE DUTY FOR TRAINING	
CHILDREN			INACTIVE DUTY TRAINING	
Kathleen Lewis, daughter, address same as wife			AF ROTC ANNUAL TRAINING PROVISIONALLY ACCEPTED OR SELECTED FOR ACTIVE SERVICE	
Joan Lewis, daughter, same				
			SELECTED FOR	ACTIVE SERVICE
FATHER			WHILE IN TRAVEL STATUS TO OR FROM PLACE OF DUTY OR TRAINING INDICATED ABOVE	
Deceased				
MOTHER			IRAINING	INDICATED ABOVE
Mrs. J. E. Nolan, 831 Nashua St., Houston 9, Texas			RETIRED	
BENEFICIARIES FOR GRATUITY PAY IN EVENT THERE IS NO SURVIVING SPOUSE OR CHILD			☐ AWOL	
(PL 881, 84th Congress: as designated on DD Form 93)			DESERTION (Dropped from rolls)	
Arthur B. Lewis, brother, 916 Joyce St., Houston, Texas			AY GRADE 0-4	- over 18 yrs
			BASIC PAY (Monthly Rate)	
BENEFICIARIES FOR UNPAID PAY AND ALLOWANCES (PL 147, 84th Congress: as designated on DD Form 93)			\$630.00	
			NCENTIVE PAY	YES NO
Nrs. June Elizabeth Lewis, wife, 100%			IF YES. AS CREW MEMBER TO YES NO	
			COMPONENT Regular	
REMARKS:				

NOTE: This form may be used to facilitate the cashing of bonds, the payment of commercial insurance, or in the settlement of any other claim in which proof of death is required.

BY ORDER OF THE SECRETARY OF THE AIR FORCE

Major, USAF

Asst Chief, Casualty Branch [64440]

AFHQ  $_{\text{APR}}^{\text{FORM}}$  0-529 PREVIOUS EDITIONS OF THIS FORM MAY BE USED.

\*Montana

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