Proceedings of Court of Inquiry or on men reported Missing on Active Service.....

Attestation Papers.....6 5 ✓.....

Declaration of change of name.....

Authority for special enlistments.....

Documents of re-enlisted men.....

Regimental Conduct Sheet .....1 ✓.....

Compulsory Stoppages.....

Casualty Forms.....1 ✓.....

Proceedings on discharge.....1 ✓.....

Corps History Sheet.....

Date and No. of Deposit Receipt for Purchase Money and Amount.....

Parchment Certificate.....

Medical Report for Invalids.....

Medical History Sheet.....2 ✓.....

Proceedings of Regt. Court Martial.....

Copies of Convictions by Civil Power.....

Company Conduct Sheet.....1 ✓.....

Clothing Transfer Certificate.....

Inventory of Kit.....

Last Pay Certificate.....1 ✓.....

M F W 67-2

M. F. W. 62.
50M.—9-16.
H. Q. 1772—39—935.

DISCHARGE DOCUMENTS

Name Baplette Dennis

Regt. No. 1018272 Rank Pte

Corps "A" Coy 232nd O/S Bn.

Mid unfit

06162

R. O. No.....

H. O. No.....

2a.

232nd BATTALION C.E.F.

Fifth

No. I, 018272.

Folio.

ATTESTATION PAPER.

CANADIAN OVER-SEAS EXPEDITIONARY FORCE.

QUESTIONS TO BE PUT BEFORE ATTESTATION.

(ANSWERS.)

1. What is your surname? ..... Capplette
1a. What are your Christian names? ..... Dennis
1b. What is your present address? ..... Delmas, Sask.
2. In what Town, Township or Parish, and in what Country were you born? ..... ~~Paul~~ Capplette. Delmas, Sask. Canada
3. What is the name of your next-of kin? ..... Paul Capplette.
4. What is the address of your next-of-kin? ..... Delmas Sask. Canada
4a. What is the relationship of your next-of-kin? ..... Father
5. What is the date of your birth? ..... April 30th. 1898.
6. What is your Trade or Calling? ..... Labourer.
7. Are you married? ..... No
8. Are you willing to be vaccinated or re-vaccinated and inoculated? ..... Yes
9. Do you now belong to the Active Militia? ..... No
10. Have you ever served in any Military Force? ..... No
If so, state particulars of former Service.
11. Do you understand the nature and terms of your engagement? ..... Yes
12. Are you willing to be attested to serve in the CANADIAN OVER-SEAS EXPEDITIONARY FORCE? ..... Yes

Letter A D.O.M.S. 12 mo 28 C. 89
discharged
med. unfit.
15/1/17

DECLARATION TO BE MADE BY MAN ON ATTESTATION.

I, Dennis Capplette, do solemnly declare that the above are answers made by me to the above questions and that they are true, and that I am willing to fulfil the engagements by me now made, and I hereby engage and agree to serve in the **Canadian Over-Seas Expeditionary Force,** and to be attached to any arm of the service therein, for the term of one year, or during the war now existing between Great Britain and Germany should that war last longer than one year, and for six months after the termination of that war provided His Majesty should so long require my services, or until legally discharged.

Dennis Capplette (Signature of Recruit)

Date May 15th. 1916. A. Herbert Steel (Signature of Witness)

OATH TO BE TAKEN BY MAN ON ATTESTATION.

I, Dennis Capplette, do make Oath, that I will be faithful and bear true Allegiance to His Majesty **King George the Fifth,** His Heirs and Successors, and that I will as in duty bound honestly and faithfully defend His Majesty, His Heirs and Successors, in Person, Crown and Dignity, against all enemies, and will observe and obey all orders of His Majesty, His Heirs and Successors, and of all the Generals and Officers set over me. So help me God.

Dennis Capplette (Signature of Recruit)

Date May 15th. 1916. A. Herbert Steel (Signature of Witness)

CERTIFICATE OF MAGISTRATE.

The Recruit above-named was cautioned by me that if he made any false answer to any of the above questions he would be liable to be punished as provided in the Army Act.

The above questions were then read to the Recruit in my presence.

I have taken care that he understands each question, and that his answer to each question has been duly entered as replied to, and the said Recruit has made and signed the declaration and taken the oath before me, at North Battleford this 15th day of May 1916.

E. D. Kerr (Signature of Justice)

Justice of the Peace in and for the Province of Saskatchewan.

M. F. W. 23.
600M.—2-16.
H. Q. 1772-39-841.

Description of Dennis Capplette. on Enlistment.

Apparent Age 18 years ..... months.
(To be determined according to the instructions given in the Regulations for Army Medical Services.)

Height ..... 5 ft. 9 ins.

Chest measurement. Girth when fully expanded ..... 35 ins.
Range of expansion ..... 2 ins.

Complexion Dark

Eyes Brown

Hair Black

Religious denominations.
- Church of England .....
- Presbyterian .....
- Methodist .....
- Baptist or Congregationalist .....
- Roman Catholic Yes
- Jewish .....
- Other denominations .....
  (Denomination to be stated.)

Distinctive marks, and marks indicating congenital peculiarities or previous disease.

(Should the Medical Officer be of opinion that the recruit has served before, he will, unless the man acknowledges to any previous service, attach a slip to that effect, for the information of the Approving Officer).

CERTIFICATE OF MEDICAL EXAMINATION.

I have examined the above-named Recruit and find that he does not present any of the causes of rejection specified in the Regulations for Army Medical Services.

He can see at the required distance with either eye; his heart and lungs are healthy; he has the free use of his joints and limbs, and he declares that he is not subject to fits of any description.

I consider him* Fit for the Canadian Over-Seas Expeditionary Force.

Date May 15th. 1916. J. Jackson MB

Place North Battleford. Captain A.M.C.
Medical Officer.

*Insert here "fit" or "unfit."

NOTE.—Should the Medical Officer consider the Recruit unfit, he will fill in the foregoing Certificate only in the case of those who have been attested, and will briefly state below the cause of unfitness:—

.....

.....

.....

.....

CERTIFICATE OF OFFICER COMMANDING UNIT.

Dennis Capplette. having been finally approved and inspected by me this day, and his Name, Age, Date of Attestation, and every prescribed particular having been recorded, I certify that I am satisfied with the correctness of this Attestation.

E B Stoffer Capt.
(Signature of Officer)
For O.C.

Date May 15th. 1916.

Fill in Only.—Unit, Number, Rank and Name.

M. F. W. 54. (A. F. B. 103.)
250M.—1-16.
H. Q. 1772-39-920.

Casualty Form—Active Service.

Unit, Regiment or Corps 232nd Overseas Bn

Regimental No. 1018272 Rank Pte. Name Dennis Caplette.

Enlisted (a) May 15th 1916 Terms of Service (a) C. E. F. Service reckons from (a) May 15th 1916

Date of promotion to present rank. } ..... Date of appointment to lance rank } ..... Numerical position on roll of N. C. Os. } .....

Extended ..... Re-engaged ..... Qualification (b) Laborer

Report		Record of promotions, reductions, transfers, casualties, etc., during active service, as reported on Army Form B. 213, Army Form A. 36, or in other official documents. The authority to be quoted in each case.	Place	Date	Remarks taken from Army Form B. 213, Army Form A. 36, or other official documents.
Date	From whom received				
			discharged med. unfit	15/1/17.	

(a) In the case of a man who has re-engaged for, or enlisted into Section D. Army Reserve, particulars of such re-engagement or enlistment will be entered.
(b) *e.g.* Signaller, Shoeing Smith, etc., etc., also special qualifications in technical Corps duties.

[P.T.O.

Report		Record of promotions, reductions, transfers, casualties, etc., during active service, as reported on Army Form B. 213, Army Form A. 36, or in other official documents. The authority to be quoted in each case.	Place	Date	Remarks taken from Army Form B. 213, Army Form A. 36, or other official documents.
Date	From whom received				

CANADIAN CONTINGENT EXPEDITIONARY FORCE

LAST PAY CERTIFICATE

This form to be used for all Ranks (Vide Article 71, Financial Instructions C.E.F., 1914).

Regimental No. 1018272 Rank Private Name D. Caplette

Corps 232nd O/S Battalion who was* Discharged

On Jany 15th 1917 1915, to

* Insert "discharged" or "transferred."

The following is a statement of the account of the above-named to date of transfer or discharge inclusive :—

Dr.	$	c.	Cr.	$	c.
Bal. Dr. from previous month			Regimental pay 15 days at $ 1 c	15	
Total payments during period			Field allowance 15 " $ c 10	150	
from Jan 1-15	10		Other allowances		
Assigned Pay			Other Credits (give particulars)		
Other Charges (give particulars) Canteen deductions	2		Civilian clothing allce	13	
Bal. Cr. on discharge or transfer	17	50	Bal. Dr. on discharge or transfer		
Total	29	50	Total	29	50

The amount shewn as Balance Cr. due on discharge or transfer has † been paid.

Monthly stoppage on account of assignment of pay is Nil, and has been charged in Pay-list for month of

† Insert "been" or "not been" as case may be.

REMARKS:—

State (1) date of enlistment 15-5-16

(2) if married and if a Separation Allowance Card has been submitted

(3) cause of discharge and authority

If discharged from the Contingent, state if Stop Payment advice for Assigned Pay has been forwarded, and date

I have carefully examined this statement of account and find it to be a correct extract from the Pay-list of the unit.

Date Jany 18th 1917

Place North Battleford, Sask.

J. R. Foley

Paymaster.

M. F. W. 44.

200M—1-16.
H. Q. 1772-39-903.

(9) Is your Father alive? Yes.

If so, state name and address Paul Caplette. Delmas, Sask, Canada.

(10) Is your Mother alive? Yes

If so, state name and address Mrs. Paul Caplette
Delmas, Sask.

(11) If your Mother is a widow No

Are you her sole support, or not? —

(12) If sole support of widowed mother, state what amount you have given her per month prior to your enlistment, also reason she has no other support than yourself.

—

(13) If you have no wife, father, mother or children, state the name and relationship with full postal address of your next of kin, to whom you would desire any communication to be sent concerning you.

—

(14) If you have a wife, or children, or a widowed mother who depends on you as her sole support, have you applied to the Paymaster of your unit for Separation Allowance? If not, this must be done.

—

(15) Are you insured? No

If so, in what Company? —

Have you made arrangements for payment of your Insurance premium —

If not, and it is a monthly premium, you can assign the amount in addition to any other assignment you wish to make.

W P Laurie Lt.Col.
Officer Commanding.

Date May 15th 1916.

To be made out in duplicate. H.Q. 54-21-23-53

232nd BATTALION C.E.F.
ORDERLY ROOM
JAN 8 1917

PARTICULARS OF FAMILY OF AN OFFICER OR MAN ENLISTED IN C. E. F.

INSTRUCTIONS.

(a) This form is only required for men joining units for Overseas Service and must be completed immediately the man is warned for draft overseas.

(b) Care must be taken to see that a man is allotted his correct Regimental Number. No numbers must be duplicated and once it has been allotted to a man, even if he is subsequently discharged, the same number must never be allotted to another man.

(c) All questions, etc., must be answered.

(d) One copy of the form is to be forwarded by Officer Commanding unit for each Officer and man to Officer Commanding Division or District at least seven days before man leaves his station to proceed overseas, for transmission to Accountant and Paymaster General, Ottawa.

(e) Duplicate copy is to be forwarded direct to Officer in charge of Records, C.E.F. London, immediately after arrival in England.

---

(1) Name of Overseas Unit which Soldier joins 232nd Overseas Battalion.

(2) Regimental Number 1018278.

(3) Full Name of Soldier Dennis Cappletta.

(4) Place of Birth Delmas Sask, Canada.

(5) Are you married, or not? No.

(6) If married, state,
(a) Full name of your wife —

(b) Present Postal Address

(7) Are you a widower? No

(8) Have you any children? —

If so, give number of boys and girls

Also their names and ages

discharged med. unfit 15/1/17

M. F. W. 67.

200M.—3-16.
1772-39-954.

(SEE OTHER SIDE.)

232nd BATTALION C.E.F. ORDERLY ROOM

Original. 1,018,272.

MEDICAL HISTORY SHEET.

Surname Capplette *Christian Name* Dennis

Examined { on 15th day of May 1916 / at North Battleford Sask

Birthplace { City or Town Delmas / County Sask Canada

Apparent age 18 yrs

Trade or occupation Laborer

Height 5 Feet 9 Inches.

Weight 150. Lbs.

Chest measurement { Minimum 33 inches. / Maximum expansion 2 inches.

Physical development Well Developed.

Small-Pox Marks None

Vaccination Marks { Arm Right. no Left. no / Number none

When Vaccinated last never

(*a*) Marks indicating congenital peculiarities or previous disease none

See Dentol Corps.

(*b*) Slight defects but not sufficient to cause rejection none

Vision Right eye 20-30

Left eye 20-30

Approved by J. H. Jackson M.O.

Rank Captain A.M.C. M.O.

Date.	Fit or Unfit.	Examined for Re-engagement.
		M.O.
		M.O.
		M.O.
		M.O.
		M.O.
		M.O.
		M.O.

Date.	Result.	Vaccinations.
		M.O.
		M.O.
		M.O.

Date.	Result.	Anti-Typhoid Inoculations, Etc.
Aug 1	Good.	J. H. Jackson M.O.
" 7	"	J. H. Jackson M.O.
" 13	"	J. H. Jackson M.O.

Enlisted on 15th *day of* May 1916 *at* North Battleford. Sask.

	Corps.	Regt'l Number.	Habits.	Date.
Joined on enlistment	232nd O/S Bn	1018272.		May 15th 1916
Transferred to				

EXAMINED OR DISCHARGED BY A MEDICAL BOARD.

Station.	Date.	Disease.	Result.
North Battleford	16/1/17.		unfit.

N. B.—This sheet to be disposed of in accordance with instructions in the Regulations for Army Medical Service, on the man becoming non-effective; the date and cause being stated on next page.

M. F. B. 313.

400M.—1-16.
H. Q. 1772-39-439.

Surname Capplette. Christian Name Dennis.

STATION.	Date of Arrival at the Station.	Dates of Admission into Hospital.			Dates of Discharge from Hospital			DISEASE.	Number of days in Hospital	Remarks on nature of the disease: how induced; if mild or severe; if completely recovered from; whether any particular treatment was adopted. In venereal cases state nature of primary disease, and whether mercury has been given. If an accident, state whether it occurred on duty and whether a Court of inquiry was held. Date of issue and particulars of artificial teeth or surgical appliances supplied. Particulars of prophylactic inoculations.	Signature of Medical Officer.
		Day	Month	Year	Day	Month	Year				

649-6-8246

CARD NO. ✓

SURNAME. Caplette.

CHRISTIAN NAMES Hennis

S.O.S. 15/1/17 Dis 12

REGL. NO. 1, 018, 272 RANK Pte.

UNIT 232nd.

Bu.

FORMER CORPS nil.

NEXT OF KIN.

CHANGE OF ADDRESS

NAMES IN FULL Caplette, Paul

RELATIONSHIP TO SOLDIER Father

ADDRESS Helmas, Sask.

COUNTRY OF BIRTH Canada. Helmas, Sask DATE Apr. 30th, 1898.

PLACE OF ATTESTATION North Battleford, Sask DATE May 15th, 1916

L. L. 94504. M. & D. 6512.

M. F. W. 22. 250M.—2-16. H. Q. 1772-39-339.

MARRIED SINGLE yes WIDOWER

TRADE OR CALLING Labourer RELIGION Roman Catholic.

DESCRIPTION.

APPARENT AGE 18 YEARS — MONTHS

HEIGHT 5 FEET 9 INCHES

CHEST MEASUREMENT 35 INCHES EXPANSION 2 INCHES

COMPLEXION Dark EYES Brown HAIR Black

DISTINGUISHING MARKS nil.

MEDICAL EXAMINATION. PLACE North Battleford, Sask. DATE May 15th, 1916

Present address. Delmas, Sask.

No. 1018272 RANK Pte. NAME Coppletts. D.

T. O. S. 14-5-16 UNIT 232nd Battalion.
B. O. 480/15-5-16

M. D. 10

PAID FROM	PAID TO	SIG. OR REC'T	PROMOTIONS, TRANSFERS, DISCHARGES, ETC.	
			PARTICULARS	AUTHORITY
1916	1916			
May 14	May 31	✓		
June		✓		
July		✓		
Aug.		✓		
Sept.		✓		
Oct.		✓		
Nov.		✓		
Dec.		✓		
1917				
Jan.		✓	S. O. S. 15-1-17	D. O. 14 of 16-1-17
			a/c closed by payment's'	

(At Station or Hospital where finally disposed of.)

Station and Hospital } ..... Arrived from } .....

Date.....

If admitted.	If under treatment.		Disease.	How fully disposed of.	Date of Discharge, &c.
Index No.	From	From			
Date					
.....	.....	.....	.....	.....	.....
.....	.....	.....	.....	.....	.....
.....	.....	.....	.....	.....	.....

Summary of Causes of invaliding, or remarks as to remand to Regiment, Station or Depôt.

.....

.....

.....

.....

.....

.....

.....

.....

Date of final Medical Board or decision. } .....

Administrative Medical Officer.

Militia Form B. 227.

150 m—5-16.
H. Q. 1772—39—117.

DETAILED MEDICAL HISTORY OF INVALID.

Station

Corps

Regimental No. Rank

Name

Disability

Date

Hospital or Station transferred to for final disposal. }

Date of final disposal }

How finally disposed of }

The original Report is invariably to accompany the discharge documents of invalids.

MEDICAL HISTORY OF AN INVALID.

MILITIA & DEFENCE CANADA
JAN 20 1917

1. Station. North Battleford
2. Regiment or Corps. 232 Battalion
3. Regimental No. and Rank. 1018272 Private
4. Name. Caplette, Denis
5. Age last Birthday. 18
6. Enlisted on May 15th.1916 at North Battleford
7. Former Trade or Occupation. Farmer Date. 31-12-16

8. General remarks on his :—
   (a) Conduct.
   (b) Habits.
   (c) Temperance.

(For this purpose the Company defaulter sheets will be obtained from the man's Commanding Officer.)

9. Service. Years. Days.

PERIODS.	
From.	To.

10. (a) Disease or disability. Heart disease
    (b) Date of origin. Pre-existed enlistment
    (c) Place of origin. Unknown
    (d) Cause. Unknown

11. Present Condition. (Most Important)
    (To include full description of present disabling condition or conditions.)

Mitral regurgitation . Enlargement of heart.

12. (a) Is the disability the result of service or climate? No.
    (b) Has it been aggravated by intemperance, vice or misconduct? No.

M. F. B. 227.

150 M—5-16.
1772-39-117.

leaded 5.2.17. MX.

13. (a) For purpose of Identification. (Here a full description of wounds, scars, deformities, etc., is to be given.)

Scar on left index finger and right middle finger.

(b) In case of wounds, or other injuries, state whether sustained on or off duty. If not received in action, was a Court of Inquiry held? No wounds or other injuries.

(c) In the event of the disability being attributed to exposure on duty, state clearly the nature of such exposure, and whether it was exceptional or otherwise. Not attributed to exposure on duty

14. Treatment Nil

15. If the disabling condition had its origin before enlistment, has it been aggravated by service, and to what extent? No

16. What is the probable duration of the disability or of each disabling condition, if more than one contributes? Permanent.

17. To what extent will it prevent his earning a full livelihood in the general labour market? Please state in fractions. Nil.

18. State if for discharge on account of unfitness for Service.

For discharge on account of unfitness for service. 16

J H Jackson MS Captain AMC
MO 232 Bottleford

Medical Officer by whom the case is brought forward.

OPINION OF THE MEDICAL BOARD.

Does the Board concur with the preceding report? If not, give differing opinion.

10. The Board concurs that the disability, heart disease pre-existed enlistment, place of origin unknown and cause unknown.

11. Murmur mitral valve. Enlargement of heart.

12. The disability is not the result of service ~~exclimate~~ or climate and has not been aggravated by vice or intemperance.

15. The disability had its origin before enlistment and has not been aggravated by service.

16. The disability is permanent.

17. The disability will not prevent him earning a full livelihood in the general labor market.

18. Is he unfit for Military Service.

Unfit for Military service.

Recommendations:

We recommend that he be discharged.

Signatures:—

W J S Millar President.

J W Stewart M.D.

J J Fim Members.

Station. North Battleford, Sask.

Date. 31-12-16

Date. 13/1/17 A L Yonell Major
Asst. Director of Medical Services.

Approved.

Date. 3 2 17 D. J McKay Capt for Director-General of Medical Services.

List of Discharge Documents.

Reg. Conduct Sheet, Militia form B. 263.	Attestation Paper, Militia Form B. 235.
Squadron / Battery / Company } Conduct Sheet, " B. 263a.	Proceedings on Discharge " B. 218.
Copies of Convictions, by C. P. in MS.	In the case of recruits who are rejected on final approval, the discharge documents will consist of (a) Proceedings on Discharge. (b) Attestation. (c) Medical History Sheet (in the event of such having been prepared.)
Med. Hist. Sheet, Militia Form B. 313	
Medical Report for Invalid* " B. 227.	
Statement of Man's Account on Transfer and Last Pay Certificate, " D. 877.	
*Only if discharged "Medically unfit."	

N. B.—In the case of a man discharged by purchase, the date and number of Deposit Receipt with amount of same is to be noted hereon.

This space to be for numbers.

Proceedings on Discharge.

(When forwarded for confirmation these proceedings should be accompanied by the documents specified on fourth page.)

H

No. 1018272

Rank Private

Name Dennis Capplette.

NOTE—The name must agree strictly with that on enlistment unless changed subsequently by authority.

Corps (Squadron, Battery or Company) "A" Coy., 232nd O/seas Battn., C.E.F.

Date of Discharge January 15th, 1917.

Place of Discharge North Battleford, Sask.

1. DESCRIPTION AT THE TIME OF DISCHARGE.

Age 18 years 8 months.
Height 5 feet 9 inches.
Complexion Dark.
Eyes Brown
Hair Black
Trade Labourer.
Intended place of residence (To be given as fully as practicable.) Delmas Sask

Descriptive Marks: none.

2. The above-named man is discharged in consequence of being medically unfit for further military service.

Letter D.D.M.S. 12 ED. 28-C-89

N.B.—The cause of discharge must be worded as prescribed in the King's Regulations and be identified with that on the character certificate. If discharged by superior authority, the number and date of the letter to be quoted.

To be in the handwriting of the Commanding Officer, who will himself make identical entries on the character certificate and initial them.

3. Conduct and character while in the service have been, according to the records, etc.

Fair

N. B.—This will be assessed when practicable, by the Commanding Officer, in the presence of the soldier and the Officer Commanding his Squadron, Battery or Company:

4. Special qualifications for employment in civil life. (Vide para. 332, K. R. & O., Canada.)

M. F. B. 218.
100m.—6-16.
H. Q. 1772-39-113

(OVER)

Cleared 1.3.17.

5. He is in possession of the following number of G. C. Badges:

none.

No reference to G. C. Badges is to be made on either the discharge or character certificate.

6. Medals and Decorations ..... none

To be copied by the Commanding Officer on to the parchment Discharge Certificate.

7. His account is correctly balanced, and signed by the Officer Commanding his Company. (*Squadron or Battery*), and I have impartially enquired into all matters brought before me in accordance with Regulations.

(Place) North Battleford, Sask. ..... N P Laurie Maj

(Date) January 16th, 1917. *Commanding* ..... LT. COL. O.C. 232ND OVERSEAS B'N, C.E.F.

8. **Certificate to be signed by the Soldier on Discharge**

I hereby acknowledge that I received all my Pay, Allowances and Clothing, and all just demands, up to the present date, subject to the reservations of the claims noted on the third page.

(Place) North Battleford D Caplette ..... (*Signature of Soldier.*)

(Date) Jan. 17th 1917 E H Shuttleworth Sgt. (*Signature of Witness.*)

When a soldier is absent through illness or any other cause and it is not desirable to forward these proceedings to him for signature, a manuscript copy should be sent for the man to sign, and when returned, should be attached here.

9. **Additional Certificate in the case of a Soldier who takes his discharge on his own request.**

I hereby declare that I do of my own free will request to be discharged from His Majesty's Service.

..... (*Signature of Soldier.*)

10. **Statement of Service.**

Service toward Engagement to.....(the date to which the Record of Service is completed).....years 2 4/7 days.

Total.....years 2 4/7 days.

11. **Confirmation of Discharge.**

The discharge of the above-named man is hereby confirmed.

(Place) North Battleford

(Date) January 16th, 1916. (*Signature*) N P Laurie ..... O.C. 232ND OVERSEAS B'N, C.E.F.

Reservations referred to at Para. 8.

(To be signed by the soldier. When there are none, it is to be so stated, and signed by the soldier.)

I hereby certify that I have no reservations whatever to make.

D Caplette

(OVER)