

ATTESTATION PAPER.

Folio.

CANADIAN OVER-SEAS EXPEDITIONARY FORCE.

QUESTIONS TO BE PUT BEFORE ATTESTATION.
(ANSWERS.)

- 1. What is your surname?..... Deano
- 1a. What are your Christian names?..... Evans Searle
- 1b. What is your present address?..... Vancouver B.C.
- 2. In what Town, Township or Parish, and in what Country were you born?..... San. Francisco. Cal. U.S.A.
- 3. What is the name of your next-of-kin?..... Maule B. Deane
- 4. What is the address of your next-of-kin?..... 1119 Chilco St. Vancouver B.C.
- 4a. What is the relationship of your next-of-kin?..... Wife
- 5. What is the date of your birth?..... 0 ct. 14th 1887
- 6. What is your Trade or Calling?..... Gas Engineer
- 7. Are you married?..... Yes
- 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?..... 6th D.C.O.R. 3years
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

DECLARATION TO BE MADE BY MAN ON ATTESTATION.

I, Evans Searle Deano, 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.

Evans Deano (Signature of Recruit)

Date March 28 1916 *A. G. Elder* (Signature of Witness)

OATH TO BE TAKEN BY MAN ON ATTESTATION.

I, Evans Searle Deano, 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.

Evans Deano (Signature of Recruit)

Date March 28 1916 *A. G. Elder* (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 Vancouver this Twenty eighth day of March 1916.

C. Schenck (Signature of Justice)

Description of Deane Evans Searle on Enlistment.

Apparent Age.....28 years5 months.
(To be determined according to the instructions given in the Regulations for Army Medical Services.)

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.)

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

Chest measurement { Girth when fully expanded.....38 ins.
 Range of expansion.....4 ins.

Complexion.....Fair

Eyes.....Brown

Hair.....Brown

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

1 Scar L.
Scar from operation
for appendicitis

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.....mar 28.....1916

Place.....Vancouver

F. Buller
 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.

Evans Searle Deane.....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.

W. M. Sage.....(Signature of Officer)
H. Col.

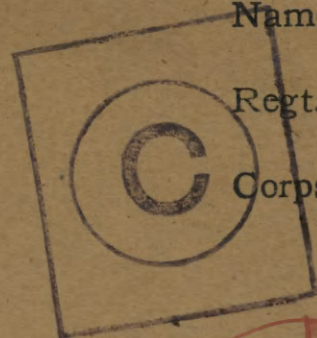
Date.....28 March.....1916



DISCHARGE DOCUMENTS

R. O. No. _____
H. Q. No. _____

- Proceedings of Court of Inquiry or on men reported Missing on Active Service.....
- Attestation Papers.....
- Declaration of change of name.....
- Authority for special enlistments.....
- Documents of re-enlisted men.....
- Regimental Conduct Sheet.....
- Compulsory Stoppages.....
- Casualty Forms.....
- Proceedings on discharge.....
- Corps History Sheet.....
- Date and No. of Deposit Receipt for Purchase Money and Amount.....
- Parchment Certificate.....
- Medical Report for Invalids.....
- Medical History Sheet.....
- Proceedings of Regt. Court Martial.....
- Copies of Convictions by Civil Power.....
- Company Conduct Sheet.....
- Clothing Transfer Certificate.....
- Inventory of Kit.....
- Last Pay Certificate.....



Name *Deane, Evans Searle*
 Regt. No. *258026* Rank _____
 Corps *211th W. Bn. of E.F. (American Legion)* *CS132*

Defective Vision

2 sent to 13 PC



MAH
12.5

No. 258026 RANK

Otc

NAME Deane E. S.

T. O. S.

UNIT 211th Battalion C E F.

M. D. 11

PAID FROM	PAID TO	SIG. OR REC'T	PROMOTIONS, TRANSFERS, DISCHARGES, ETC.	
			PARTICULARS	AUTHORITY
1916 April	1916 Apr 30	✓		
	May	✓		
	June	✓		
	July	✓		
	Aug	✓		
	Sept	✓		
	Oct	✓		
	Nov	✓		
Dec 1	Dec 4	✓	Dischd 4-12-16 (defective vision) acc closed by payment 1.60	DO 233/4-12-16



649-10-4777

CARD NO.

SURNAME.

Deane

CHRISTIAN NAMES

Erans Searle

REGL. NO.

258026

RANK

plc

UNIT

211th

FORMER CORPS

6th D.C.O.R. 3 yrs

Bn

808 Dio
4/12/16
FOLL. 13

NEXT OF KIN.

CHANGE OF ADDRESS

NAMES IN FULL

Deane Mrs Maude B.

RELATIONSHIP TO SOLDIER

Wife

ADDRESS

1119 Chilco St. Vancouver. B.C.

COUNTRY OF BIRTH

U.S.A. San Francisco, Cal

DATE

Oct 14th 1887

PLACE OF ATTESTATION

Vancouver. B.C.

DATE

Mar 28th 1916

MARRIED

yes

SINGLE

WIDOWER

TRADE OR CALLING

Gas Engineer

RELIGION

Church of England

DESCRIPTION.

APPARENT AGE

28 YEARS

5 MONTHS

HEIGHT

5 FEET

9 INCHES

CHEST MEASUREMENT

38 INCHES

EXPANSION

4 INCHES

COMPLEXION

Fair

EYES

Brown

HAIR

Brown

DISTINGUISHING MARKS

*1 Vac L. Scar from operation for
appendicitis*

MEDICAL EXAMINATION.

PLACE

Vancouver, B.C.

DATE

Mar 28th 1916

Present Address: Vancouver, B.C.

SEPARATION ALLOWANCE

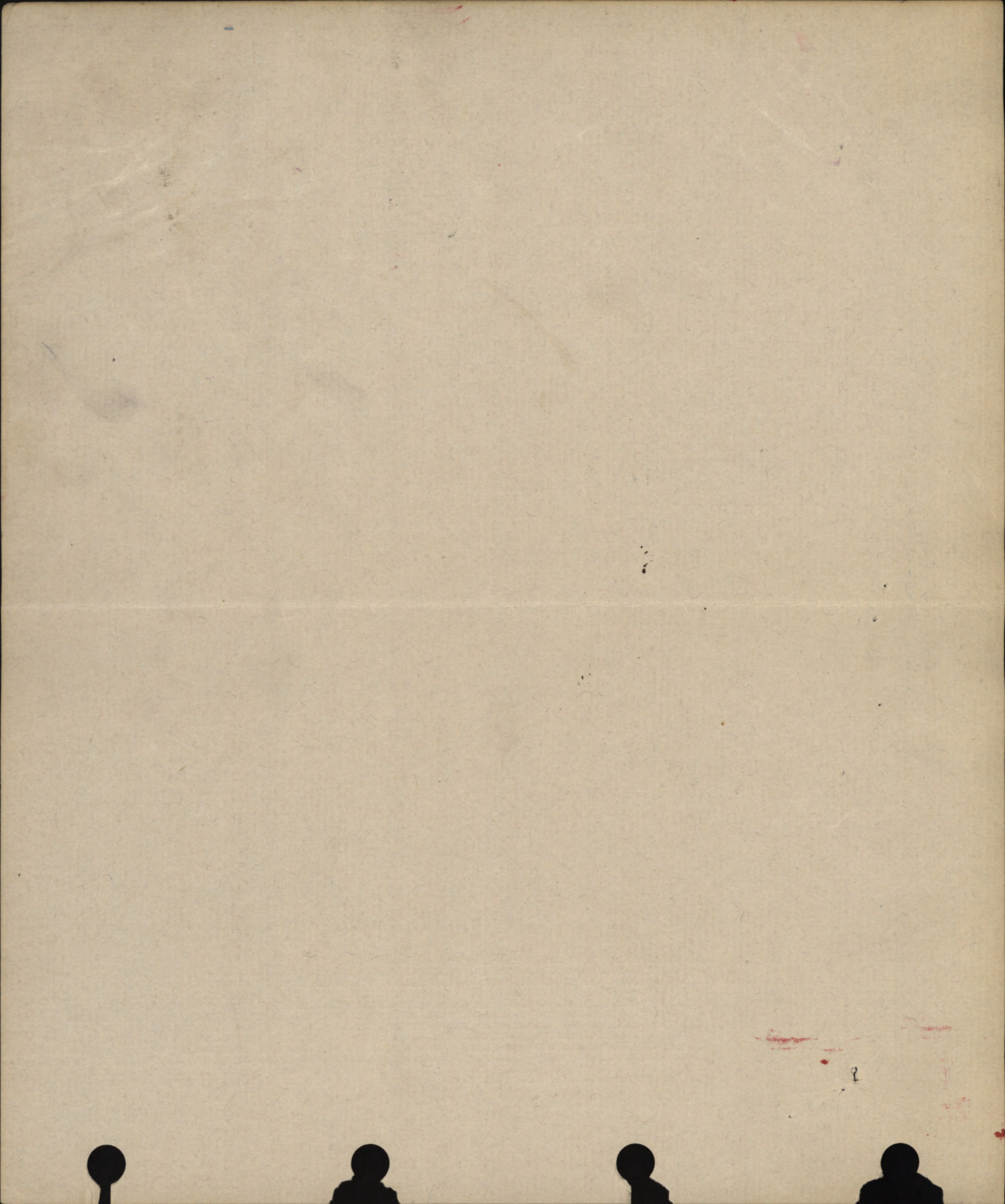
Make to Mrs. Deane

Name *Mrs. Maude Belle Deane* Name of Soldier *Deane Evans Searle*
 Address *1119 6th Ave. Vancouver B.C.* Regtl. No. *258026*
 Rank *Pte*
 Corps *211th O.S. Batta C. E. F.*
 Relation to Soldier }
 wife, child or mother } *Wife*
 To what Corps belonging }
 when called out }

PAYMENTS

Month	Year	Cheque No.	Amt.	REMARKS
Aug.	1914			
Sept.				
Oct.				
Nov.				
Dec.				
Jan.	1915			
Feb.				
March				
Apl.				
May				
June				
July				
Aug.				
Sept.				
Oct.				
Nov.				
Dec.				
Jan.	1916			
Feb.				
March				

ACCOUNT CLOSED
 DATE.....PER.....
W



SEPARATION ALLOWANCE

Sheet No. 2.

Mrs. Maudie Belle

OVERSEAS CONTINGENTS

Name of Soldier

Deane Evans Searle
Pte

L. Job 310.—Req. 6574.

Deane's Wife
PAYMENTS.

Month.	Year.	Cheque No.	Amt.	Remarks.
April	1916			
May		0,6148	42	42
June		£4620	20	20
July		10533	20	20
Aug.		N14059	20	20
Sept.		P15615	20	20
Oct.		P18992	20	20
Nov.		P22524	20	20
Dec.		P25548	20	20
Jan.	1917			20
Feb.				Dis 4/12/16 Pmt 14/12/16
March				Return 17 ⁰⁰ overpaid - returned
April				
May				
June				20 ¹² / ₁₀ James
July				
Aug.				classified 4-12-20
Sept.				officet. susp
Oct.				
Nov.				
Dec.				
Jan.	1918			
Feb.				
March				
April				
May				
June				
July				

ACCOUNT CLOSED

DATE..... PER..... W

MILITIA AND DEFENCE
SEPARATION ALLOWANCE
 OVERSEAS CONTINGENTS

Sheet No. 2 (Contd.)

PAYMENTS.

Name of Soldier.....

Month.	Year.	Cheque No.	Amt.	Remarks.
Aug.	1918			
Sept.				
Oct.				
Nov.				
Dec.				
Jan.	1919			
Feb.				
March				
April				
May				
June				
July				
Aug.				
Sept.				
Oct.				
Nov.				
Dec.				
Jan.	1920			
Feb.				
March				
April				
May				
June				
July				
Aug.				
Sept.				
Oct.				
Nov.				

No 258026

MEDICAL HISTORY SHEET. ORIGINAL

Surname Deane Christian Name Evens Searle

Examined { on 28 day of mar 1916
at Vancouver
Birthplace { City or Town Sau Francisco
Country USA

Approved by J. Bulley
Rank Captain M.O.

Apparent age 28³/₄
Trade or occupation Gasoline Engineer
Height 5 Feet 9 Inches. M.O.
Weight 150 Lbs. M.O.
Chest measurement { Minimum 34 inches. M.O.
Maximum expansion 4 inches. M.O.
Physical development Good M.O.
Small-Pox Marks M.O.

Date.	Fit or Unfit.	EXAMINED FOR RE-ENGAGEMENT.

Vaccination Marks { A r m Right Left
Number - 1

Date.	Result.	VACCINATIONS.

When Vaccinated last M.O.
(a) Marks indicating congenital peculiarities or previous disease M.O.
X
(b) Slight defects but not sufficient to cause rejection M.O.
X
M.O.

Date.	Result.	ANTI-TYPHOID INOCULATIONS, ETC.

Enlisted on 28th day of March 1916 at Vancouver BC

	CORPS.	REG'TL NUMBER.	HABITS.	DATE.
Joined on enlistment	<u>211th Batt</u> <u>B C F</u>	<u>258026</u>		
Transferred to				

EXAMINED OR DISCHARGED BY A MEDICAL BOARD.

STATION.	DATE.	DISEASE.	RESULT.

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.

MEDICAL HISTORY SHEET. DUPLICATE

Surname Deane Christian Name Evans Searle

Examined { on 28 day of Mar 1916
at Vancouver
Birthplace { City or Town San Francisco
County USA

Approved by H. Buller
Rank Captain M.O.

Apparent age 28 1/2
Trade or occupation Gasoline Engineer
Height 5 Feet 9 Inches.
Weight 150 Lbs.
Chest measurement { Minimum 34 inches.
Maximum expansion 4 inches.

Date.	Fit or Unfit.	EXAMINED FOR RE-ENGAGEMENT.
		M.O.
		M.O.
		M.O.
		M.O.
		M.O.
		M.O.
		M.O.

Physical development Good
Small-Pox Marks
Vaccination Marks { Arm Right Left
Number — 1

Date.	Result.	VACCINATIONS.
		M.O.
		M.O.
		M.O.

When Vaccinated last
(a) Marks indicating congenital peculiarities or previous disease X

Date.	Result.	ANTI-TYPHOID INOCULATIONS, ETC.
		M.O.
		M.O.
		M.O.

(b) Slight defects but not sufficient to cause rejection X

Enlisted on 28th day of March 1916 at Vancouver BC

	CORPS.	REG'TL NUMBER.	HABITS.	DATE.
Joined on enlistment	<u>211th Batt</u> <u>C. E. F.</u>	<u>258026</u>		
Transferred to				

EXAMINED OR DISCHARGED BY A MEDICAL BOARD.

STATION.	DATE.	DISEASE.	RESULT.

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.

CANADIAN CONTINGENT EXPEDITIONARY FORCE

LAST PAY CERTIFICATE

This form to be used for all Ranks (Vide Articles 122, 130 and 141, Financial Instructions, 25715c, C.E.F., 1916).

Regimental No. 258026 Rank Private Name Deane, E. B.

Corps 211th C/S Battalion, C.E.F. who was* Discharged

On December 4th 1916, to ----

*Insert "discharged" or "transferred."

The following is a statement of the account of the above named from December 1st 1916, to December 4th 1916, the inclusive date of transfer or discharge.

Dr.	\$	c	Cr.	\$	c
Bal. Dr. from prev. month			Bal. Cr. from prev. month		
Advances } No.			Regt'l Pay <u>4</u> days at \$ <u>1</u> c	<u>4</u>	<u>00</u>
by } No.			Field Allow. <u>4</u> days at \$ <u>10</u> c		<u>40</u>
Assigned Pay No.			Other Allowances* <u>Pay Dept. 4 days</u>	<u>1</u>	<u>00</u>
Other Charges*			<u>Civilian Clothing</u>	<u>13</u>	<u>00</u>
Payment on transfer or discharge No. <u>7947</u>	<u>18</u>	<u>40</u>	Other Credits*		
Balance Cr. (to be paid by the new unit)			Bal. Dr. (to be deducted by new unit)		
Total	<u>18</u>	<u>40</u>	Total	<u>18</u>	<u>40</u>

*Give Particulars.

A monthly stoppage of \$ 20.00 (†) has not (‡) been paid on account of Assigned Pay for the month of December 1916 to (Assignee) Mrs. M. B. Deane
 (Address) 1119 Chilco St.,
Vancouver, B.C.

(†) Insert amount to be assigned, whether it has been paid or not.
 (‡) Insert "not" if amount has not been paid for period of account.

On Transfer of an Officer.

Outfit Allowance of \$ has been paid by Paymaster, Military District No.

REMARKS:—

State (1) date of enlistment March 28th, 1916

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

(3) cause of discharge and authority Defective Vision

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 December 4th, 1916

Place Calgary, Alta

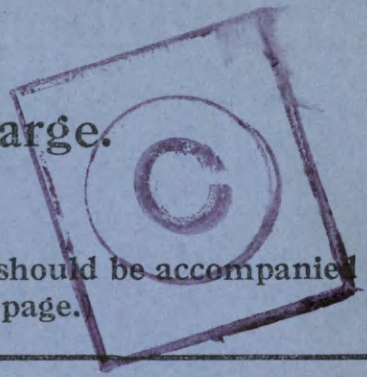
E. B. Deane
Paymaster

N.B.—For purposes of transfer this form is to be made out in quadruplicate. One copy to Paymaster of new unit; one to District Paymaster; one to accompany the pay-list at the end of the month, and; one for retention as a record.

For purposes of discharge it is to be made out in triplicate. One copy to accompany discharge papers; one copy to accompany pay-list at the end of the month, and; one for retention as a record.

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.)

No.	258026	
Rank	Pte.	
Name	Evans Seale DEANE	
<small>NOTE—The name must agree strictly with that on enlistment unless changed subsequently by authority.</small>		
Corps (Squadron, Battery or Company)	21 st Bn C.B.T. Coy	
Date of Discharge	16 th December, 1916	
Place of Discharge	Calgary Alta.	
1. DESCRIPTION AT THE TIME OF DISCHARGE.		
Age.....	29 years.....	1 months.
Height.....	5 feet.....	9 inches.
Complexion	Fair	
Eyes	Brown	
Hair	Brown	
Trade	Gas Engineer	
Intended place of residence	Chilcoth	
(To be given as fully as practicable.)	Vancouver	
Descriptive Marks		
1 Vac. left arm		
Scar from operation for appendicitis		
2. The above-named man is discharged in consequence of		
Defective Vision authority as per 1/12/16		
<small>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.</small>		
3. Conduct and character while in the service have been, according to the records, etc.		
Good ✓		
<small>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:</small>		
4. Special qualifications for employment in civil life. (Vide para. 332, K. R. & O., Canada.)		
✓		

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

M. F. B. 218.

50m.—3-16.

H. Q. 1772-39-113.

(OVER)

Carded
16-12-16
JMS
P

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



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

6. Medals and Decorations.....

Form with a checkmark in the center.

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) Calgary Alta.

W.M. Sage

(Date) 4th Decr 1916

Commanding 21st Bn. R.C.I.

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) Calgary Alta. Ernest Deane (Signature of Soldier.)

(Date) 4th Decr 1916 W.M. Sage (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.....days. 252

Total.....years.....days.

11. Confirmation of Discharge.

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

(Place) Calgary Alta.

(Signature) W.M. Sage Lt. Col.

(Date) 4th Decr 1916

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.)

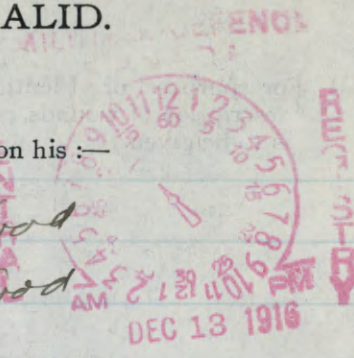
Evans. Deane

List of Discharge Documents.

<p>Reg. Conduct Sheet, Militia form B. 263.</p> <p>Squadron } Battery } Conduct Sheet, " B. 263a. Company }</p> <p>Copies of Convictions, by C. P. in MS.</p> <p>Med. Hist. Sheet, Militia Form B. 313</p> <p>Medical Report for Invalid* " B. 227.</p> <p>Statement of Man's Account on Transfer and Last Pay Cer- tificate, " D. 877.</p> <p>*Only if discharged "Medically unfit."</p>	<p>Attestation Paper, Militia Form B. 235.</p> <p>Proceedings on Discharge " B. 218.</p> <hr/> <p style="text-align: center;">In the case of recruits who are rejected on final approval, the discharge documents will consist of</p> <p style="padding-left: 40px;">(a) Proceedings on Discharge.</p> <p style="padding-left: 40px;">(b) Attestation.</p> <p style="padding-left: 40px;">(c) Medical History Sheet (in the event of such having been prepared.)</p>
---	--

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.

MEDICAL HISTORY OF AN INVALID.



1. Station. *Victoria Barracks, Calgary*
 2. Regiment or Corps. *211 O.Ru*
 3. Regimental No. and Rank. *78076*

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

Private
 4. Name. *Deane, Brons Seale*
 5. Age last Birthday. *28*

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

6. Enlisted on *May 28-1916*
 at *Vancouver*

7. Former Trade or Occupation. *Foodline's Engineers.* Date. *Nov 20-1916*

9. Service.	Years. Days.	
	PERIODS.	
	FROM.	To.
<i>Infantry 211 O.Ru</i>	<i>May 28-1916</i>	<i>date</i>

10. (a) Disease or disability. *Defective Eyesight*
 (b) Date of origin. *Before enlistment*
 (c) Place of origin. *Unknown*
 (d) Cause. *Unknown.*

11. Present Condition. (Most Important)
(To include full description of present disabling condition or conditions.)
Defective Vision very short in eyesight - and headache

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

*Carded
 21-12-16
 W.M.*

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

None

10.
11.

(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?

na.

12.
15.

(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.

na.

16.
17.

14. Treatment

None of any kind

19.
20.

15. If the disabling condition had its origin before enlistment, has it been aggravated by service, and to what extent?

Not aggravated

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

Sig

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

In discharge on account of defective vision

Sta
Da
=

G. P. Shop *C. M. Aue.*
Medical Officer by whom the case is brought forward.

Da
Ap
D

OPINION OF THE MEDICAL BOARD.

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

10. The Board concurs with preceding Report

11. " " " " " "

12. " " " " " "

15. " " " " " "

16. " " " " " "

17. " " " " " "

19. Is he unfit for Military Service. *yes*

20. Recommendations :
*That he be discharged on account of defective vision
no disability as result of service*

Signatures :—

[Signature]
President.

[Signature]
Members.

Station. *Calgary*
Date. *Nov 29th 16*

Date. *DEC 1 - 1916*

[Signature]
Assst. Director of Medical Services. *V.V.P. 13*

Approved.
Date *20/12/16*

[Signature]
Director-General of Medical Services.

(At Station or Hospital where finally disposed of.)

Station and Hospital } Arrived from }

Date

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

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

.....

.....

.....

.....

.....

.....

.....

.....

Date of final Medical Board or decision. }

Administrative Medical Officer.

Hospital or Station transferred to for final disposal. }
 Date of final disposal }
 How finally disposed of }

Station
 Corps
 Regimental No. Rank
 Name
 Disability
 Date

DETAILED MEDICAL HISTORY OF INVALID.

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