D7110
CHAPATIS
JOSEPH

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No D.7110 Rank L/Sergeant Name CHAPATIS, Joseph

Unit 1st Army Tank Regt. Date of death 17th Dec., 1943.

Died at Italy.

Cause Died of wounds received in action

Death occurred on strength of Forces. HQ 405-C-18838 29d-12-43

N/K Mrs. Oliva A. Chapatis Relationship Widow

Address 21 Stevenson Drive, Edinburgh, Scotland.

Remains buried in British Cemetery

Fossacesia, Italy. MR 396054.

Grave location

C/K ✓

OVER—

DEATH CERT. TO N.K.

BURIAL REPORT TO N.K. ———

RETURN TO BUR. OF STAT. 25-2-44.

ROYAL MESSAGE DESP'D. FEB 2 1944

CAN. MESSAGE DESP'D. 6-1-44.

REBURIAL

Morro River Cemetery,
Ortona, Italy.

Grave 8, row F, plot 5.

HI & CR Form Despd. OCT 21 1946

Photographs
Despatched
MAY 28 1947

OHF Complete

Received 3-2-40 Checked C&K Card ✓ Observations O

1st A.T. Regt. R.C.A.

Doit être remplie en triplicata, désignant chaque exemplaire en biffant les deux termes inutiles.
To be completed in triplicate. Copy designation to be shown by striking out terms not applicable.

M.F.M. 2 Fr.
A.F.B. 271
120 M—8-39 (1696)
H.Q. 1772-45-18

Unité 27TH FIELD BATTERY R.C.A. Matricule D 7110
Unit Regimental Number

Original
Duplicata
Triplicata

ARMÉE ACTIVE DU CANADA
CANADIAN ACTIVE SERVICE FORCE
FORMULE D'ENRÔLEMENT
ATTESTATION PAPER

Original
Duplicate
Triplicate

1. Nom (Surname) Chapatis
2. Prénoms (Christian Names) Joseph
3. Adresse actuelle (Present Address) 1222 Forfar St. Montreal P.Q.
4. Date de naissance (Date of birth) 27th October 1919
5. Lieu de naissance (Place of birth) Canada (Pays)—(Country) Quebec (Comté ou province)—(County or Province) Montreal (Ville ou canton)—(Town or Twp.)
6. Religion (State denomination) Roman Catholic
7. Métier ou profession (Trade or Calling) Foundry Worker
8. Marié, veuf ou célibataire (Married, Widower or Single) ~~Single~~ married
9. Nom du plus proche parent (Name of next of kin) ~~John Chapatis~~ Wife
10. Parenté de celui-ci (Relationship) ~~1222 Forfar St.~~ MONTREAL P.Q. Sue Chapatis
11. Adresse du plus proche parent (Address of next of kin) ~~Father~~
12. Avez-vous servi dans les forces navales, militaires ou aériennes? (Have you served in any Naval, Military or Air Force?) No
13. Si vous avez accompli du service de guerre antérieur, spécifiez l'arme, la force et les détails régimentaires (If previous war service, state arm, force and regimental particulars) No
14. Faites-vous actuellement partie de la milice active du Canada ou avez-vous déjà servi dans cette force? (Do you now belong to or have you served in the Active Militia of Canada?) No
(Indiquez l'unité et la date de l'enrôlement)
(Give unit and date of attestation)

DÉCLARATION FAITE PAR L'HOMME LORS DE L'ENRÔLEMENT
DECLARATION TO BE MADE BY MAN ON ATTESTATION

Je, soussigné, John Chapatis, déclare solennellement que les renseignements ci-dessous mentionnés sont vrais et je m'engage, par les présentes, à servir dans l'armée active du Canada, tant qu'il existera ou que l'on aura à craindre une guerre, une invasion, une émeute ou une insurrection, aussi bien que pour la période de démobilisation après que la dite crise aura cessé, et, en tout cas, pour une période d'au moins un an, si Sa Majesté requiert mes services.

Date Sept. 20/39 Joe Chapatis
(Signature de la recrue)

J. Kilvert Lt witness

SERMENT PRÊTÉ PAR LA RECRUE LORS DE L'ENRÔLEMENT
OATH TO BE TAKEN BY MAN ON ATTESTATION

Je, John Chapatis, promets sincèrement et jure (ou déclare solennellement) que je serai fidèle et porterai sincère allégeance à Sa Majesté.

Joe Chapatis
(Signature de la recrue)

CERTIFICAT DU MAGISTRAT, DU JUGE DE PAIX OU DE L'OFFICIER QUI FAIT PRÊTER LE SERMENT
CERTIFICATE OF MAGISTRATE, JUSTICE OF THE PEACE OR ATTESTING OFFICER

J'ai averti l'homme susnommé que s'il répondait inexactement à l'une quelconque des questions précédentes, il serait passible de punition, tel que prévu par la loi.

Les questions et les réponses ci-dessus lui furent ensuite lues en ma présence.

Je me suis assuré qu'il comprenait chaque question et que sa réponse à chacune d'elles a été dûment inscrite telle qu'il l'a donnée, et il a fait et signé la déclaration ci-dessus et a prêté serment devant moi,

à Montreal ce 20th jour de September 39

M. 2 M. RECEIVED FEB 2 1940

(Signature du magistrat, du juge de paix ou de l'officier qui fait prêter le serment)

Capt. R.C.A.
(Titre, grade et unité ou emploi)

N.B. On désire attirer l'attention sur le fait que toute personne qui répond inexactement à l'une quelconque des questions ci-dessus est passible d'un emprisonnement de six mois.

Attention is drawn to the fact that any person making a false answer to any of the above questions is liable to a penalty of six months' imprisonment.

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État de service de **Chapatis** **Joseph** Matricule D 1110
Record of Service of (Nom—Surname) (Prénoms—Christian Names) Regimental Number

APTITUDES
Qualifications

Militaires
Military

Professionnelles ou commerciales
Business or Professional

Civiles ou de métier **Foundry Worker**
Trade or Civil

Techniques
Technical

Langues **English and Lithuanian**
Languages

QUALITÉS ÉDUCATIONNELLES
Educational qualifications

Académies High School or Collegiate **No** (années complétées—years completed)

Graduation ou (or) Immatriculation Matriculation (Spécifier—Specify)

*Collège

*Université
University

*(Mentionnez le nom de l'institution, les années ou cours complétés et les diplômes obtenus)
(Name of institution, courses or years completed, and degrees obtained to be shown)

Toutes les recrues enrôlées le seront comme simples soldats, la nomination ou la promotion à un grade supérieur devant être indiquée dans l'espace ci-dessous prévu à cette fin
All enlisted personnel will be taken on as Private soldiers, appointments and promotions to higher rank to be shown as provided in the space below.

Rapport — Report: Date	Rapport — Report: Reçu de — From whom received	État des promotions, rétrogradations, mutations et permutations, maladies ou blessures rapports, etc., à compter de la date de son enrôlement dans les troupes de campagne — Record of Promotions, Reductions, Transfers, Casualties, Reports, etc. from date taken on strength of Field Force	Grade indiqué — Rank shown	Prenant date le — Effective date	Unité — Unit	Endroit — Place	Autorisation — Authority: N°, Partie II, Ordres du jour. Liste des morts et blessés, etc. — Part II D.O. No. Cas. List, etc.	Autorisation — Authority: Daté le — Dated
		Affecté lors de son enrôlement / Joined on enlistment						
2301								
—		Gnr	Gnr	20-9-39	27 Ca Bty	Montreal	16	20 Sept 39
—		SOS CASF (CANADA) ON EMBARKATION AT HALIFAX ON 21 Dec 39	Gnr	21 Dec 39	1AT Kdgr	Field	app "A" (1)	3 Jan 41
—		TOS CDN. ARMY (OVERSEAS) ON TRANSFER ON 22 Dec 39 AND DISEMBARKED AT GOUROCK ON 30 Dec 39	Gnr	22 Dec 39	1AT Kdgr	Field	app "A" (1)	3 Jan 41
1		leave from 1200 hrs 12-1-40 to 17-1-40	Gnr	12-1-40	1st Arty Tank Reg R.C.A.	Little Bar Aldershot	Do 11	11-1-40
		Priv leave 1200 Hrs 26/8/40	"	1200 Hrs 19.8.40	"	Field	D/O 21	28.8.40
		A.W.L. 2200 hrs.	"	16.9.40	"	"	27	27.9.40
		Returned from A.W.L. 1630 hrs.		20.9.40	"	"	31	11.10.40
		A.W.L. 0200 hrs 23rd Sept to 1900 hrs 26 Sept		23 9 40	"	"	31	11.10.40

Pour les entrées supplémentaires, se servir de M.F.M. 1 et 2 (a) (Fr.)
For additional entries use M.F.M. 1 and 2 (a) (Fr.)

Recevez-vous ou avez-vous déjà reçu une pensio[illegible] compensation pour invalidité? Si oui, donnez détails.....

Are you receiving or have you in the past received [illegible]ability pension or compensation? If so give details ..NO.....

R.C.A. 3

CERTIFICAT DE L'EXAMEN MÉDICAL
CERTIFICATE OF MEDICAL EXAMINATION

Nom en entier (Name in full) Joe Chapatis Date Sept 20-39

PARTIE 1. Renseignements obtenus de la recrue.
Part 1. Information obtained from the applicant.

1. Age 30 2. Avez-vous déjà souffert de l'une quelconque des maladies suivantes? (Have you ever suffered from any of the following diseases?)

a. Rhumatisme (Rheumatism) No
b. Tuberculose (Tuberculosis) No
c. Bronchite ou asthme (Bronchitis or asthma) No
d. Affection cardiaque (Heart disease) No
e. Maladie du rein ou de la vessie (Kidney or bladder disease) No
f. Gastrite intestinale (Gastro-intestinal) No
g. Hernie (Rupture) No
h. Varices (Varicose veins) No
i. Pieds plats ou déformés (Flat or deformed feet) No
j. Affection nasale (Nasal trouble) No
k. Maladies des oreilles (Ear disease) No
l. Maladie des yeux (Eye disease) No
m. Epilepsie (Epilepsy) No
n. Maladie nerveuse ou mentale (Nervous or mental disease) No
o. Syphilis No
p. Gonorrhée (Gonorrhœa) No
q. Avez-vous déjà porté des verres? (Have you ever worn glasses) No

Joe Chapatis
(Signature de la recrue)—(Signature of recruit)

Observations des examinateurs (Examiners remarks re above)

PARTIE 2. Renseignements obtenus par l'examen médical. La recrue doit être déshabillée.
Part 2. Information obtained by medical examination. The recruit must be stripped.

1. Marques ou cicatrices d'identification (si celles-ci sont opératoires, obtenir les détails) (Identification marks or scars (If operative obtain history).) Vaccination Left Arm - two Left buttock

2. Taille (Height) 5 pieds (feet) 6 1/2 pouces (inches). 3. Poids (Weight) 135 livres (pounds)

4. Teint (Complexion) Light Yeux (Eyes) Blue Cheveux (Hair) Fair

5. Développement (Development) Good — Bon (Good) / Passable (Fair) / Médiocre (Poor)

6. Tour de poitrine—Circonférence, pleine expansion (Chest measurement—Girth on full expansion) 37 1/2 pouces (inches) Degré d'expansion (Range of expansion) 2 pouces (inches) A

7. Vue, œil droit (Vision, right) 20/20 œil gauche (left) 20/20 8. Ouïe, oreille droite (Hearing, right) C.O.20' gauche (left) C.V.20'

9. Condition de la bouche et des dents (Condition of mouth and teeth) Good

10. Les anormalités (congénitales et pathologiques) constatées lors de l'examen sont les suivantes: (The abnormalities (congenital and pathological) found on examination are as follows:)

A

PARTIE 3.
Nous, les examinateurs, ne trouvons aucune trace des maladies énumérées dans la question 2 de la partie 1, sauf tel que mentionné dans les observations. Nous avons examiné la recrue conformément aux instructions de la brochure "Physical Standards and Instructions for the medical examination of Recruits",

et il peut être classé dans la catégorie A

Observations spéciales lorsque la catégorie est inférieure à A (Special remarks when category lower than A)

W. Tremblay major (Président)—(President) R. Stacey Capt (Membre)—(Membre) [illegible] (Membre)—(Member)

Pour les entrées supplémentaires, se servir de M.F.M. 1 et 2 (a) (Fr.)
For additional entries use M.F.M. 1 and 2 (a) (Fr.)

Recevez-vous ou avez-vous déjà reçu une pension ou compensation pour invalidité? Si oui, donnez détails ..... N.?

Are you receiving or have you in the past received disability pension or compensation? If so give details .....

VACCINATIONS, INOCULATIONS, COMMISSIONS, RECLASSIFICATION DE LA CATÉGORIE MÉDICALE
VACCINATIONS, INOCULATIONS, BOARDS, RECLASSIFICATION OF MEDICAL CATEGORY

Date	Détails succints et signature / Brief details and signature	Date	Détails succints et signature / Brief details and signature
1-11-39	~~TAB~~ 3 L	21-2-40	A.T.T. PRT 34 Units 313
8-11-39	TAB 3 L	16 aug 40	A.T.T. 3a
15-11-39	~~TAB~~ 3 L	28 aug 42	Vacc.
15-11-39	X-RAY of CHEST - NEGATIVE - 31915	2.3.43	TAB T & CC
27-11-39	VACCINATED L		
2-12-39	TETANUS TOXOID 1 CC L		
27-11-39	RE-EXAMINED, NORMAL URINE, EARS, REFLEXES CAT "A"		

R Rochead maj

Matricule Regtl. No. D 1110 Grade Rank Gunner Nom Surname Chapatis Prénoms Christian Name Joseph

Garnison — Station	Date d'arrivée à la garnison — Date of Arrival at the Station	Date de — Dates of: L'admission à l'hôpital — Admission into Hospital: Jour — Day	Mois — Month	Année — Year	La sortie de l'hôpital — Discharge from Hospital: Jour — Day	Mois — Month	Année — Year	Maladie — Disease	Nombre de jours à l'hôpital — Number of days in hospital	Détails sur la nature et l'origine de la maladie; dire si elle était bénigne ou grave, si elle est entièrement guérie, et si un traitement spécial a été adopté. Dans le cas des maladies vénériennes, mentionner la nature de la maladie première et dire si on a prescrit le mercure. Si la maladie est accidentelle, spécifier si elle fut contractée en service et si un conseil d'enquête a été tenu. Détails et dates au sujet des fausses dents et des appareils chirurgicaux fournis. — Remarks on nature of the disease; how induced; if mild or severe; if completely recovered; 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	Signature du médecin — Signature of Medical Officer

Pour les entrées supplémentaires, se servir de **M.F.M. 1 et 2 (b) (Fr.)**
For additional entries use M.F.M. 1 and 2 (b) (Fr.)

Statement of the Service of No. D7110 Rank ..... Sheet No. .....

Name Chapalis J.

REPORT Date	REPORT From whom received	Record of Promotions, Reductions, Transfers, Casualties, Reports, etc. (Continuation of Folio 2, M.F.M. 1 or M.F.M. 2)	Rank Shown	Effective Date	Unit	Place	Authority Part II D.O. No. Cas. List, etc.	Authority Dated
S00		✓ SOS CDN Army UK	Bdr	15 Jun 43	1A/TK	NA	30	26 July 43
	100	✓ TOS CDN Army M.	Bdr	16 June 43	1A/TK	NA	30	26 July 43
		✓ Dis Embarked	Bdr	10 July 43	1A/TK	NA	30	26 July 43
		✓ Confirmed Rank of Bdr	Bdr	1 Aug 43	1A/TK	NA	35	27 Aug 43
		✓ Died of Wounds (C M F)	Bdr	17 Dec 43	1A/TK	NA	CLA365	23 Dec 43
Temp comp		✓ Appt'd A/L/Sgt		9 Dec 43	1A/TK	NA	50	18 Dec 43
		✓ Wounded	A/L/Sgt	14 Dec 43	1A/TK	NA	51	24 Dec 43
M33		✓ Reverts to Bdr on adm to Hosp.	Bdr	14 Dec 43	1A/TK	NA	1	8 Jan 44
"	SOS	✓ SOS to X3 List (B)	Gnr	14 Dec 43	1A/TK	NA	1	8 Jan 44
		✓ Admitted 1 Field Dressing Stn	Bdr	15 Dec 43	XLB	NA	2A	12 Jan 44
		✓ Birth of Son Joseph George Alex at Edinburgh		17 Dec 43	1A/TK NEP	UK	15	19 May 44

Regimental No. D 7110 Rank Sheet No.

M.F.M. 1 & 2 (a)
50M—3-44 (4002)
H.Q. 1772-39-1646

Name Chapatis, J.

Record of Promotions, Reductions, Transfers, Casualties, Reports, etc.—	Rank Shown	Effective Date	Unit	Place	Authority	
					D.O. Number	Dated
To be L/Sgt.	L/Sgt.	15 Dec 43	XL, R C A	A A 1	137	18 Dec 44
S.O.S. amdt. D.O. # 3 A para 7 (b) d/ 14 Jan. 44 to read, D 7110 Bdr. (L/Sgt.) Chapatis, J. (deceased)	Bdr.		XL, R.C.A.	A. A 1	137	18 Dec 44.

Statement of the Service of No. D 7110 Rank ..... Sheet No. .....

M.F.M.1 & 2A
40/P & S/119

Name Chapatis Joseph

REPORT Date	REPORT From whom received	Record of Promotions, Reductions, Transfers, Casualties, Reports, etc. (Continuation of Folio 2, M.F.M. 1 or M.F.M. 2)	Rank Shown	Effective Date	Unit	Place	Authority Part II D.O. No. Cas. List, etc.	Authority Dated
amended D08	20/2/42	To be A/L/Bde (unpaid)	A/L/Bde	23 Jan 42	1 A TK Rgt	UK	7	13 Feb 42
		Priv: Leave F.S.H.	L/Bde	26 Feb / 5 Mar 42	1 A TK Rgt	UK	11	13 Mar 42
		A.W.L. forf: 4 days pay F.R.1 149(1)A	GNR	23 / 26 Sept 40	1 A TK Rgt	UK	13	23 Mar 42
		To be A/L/Bde.	A/L/Bde	15 Mar 42	1 A TK Rgt	UK	24	20 May 42
		Priv-Leave F.S.H.	L/Bde	12 / 19 JUNE 42	1 A TK Rgt	UK	31	25 JUNE 42
		Ceases appt. of A/L/Bde	GNR	15 JULY 42	1 A TK Rgt	UK	40	12 Aug 42
		To be A/L/Bde	A/L/Bde	16 July 42	1 A TK Rgt	UK	45	11 Sept 42
		Priv: Leave to 18 Sept 42.	L/Bde	11 Sept 42	1 A TK Rgt	UK	48	30 Sept 42
		Appl'd A/Bde	A/Bde	7 Dec 42	1 A TK Rgt	UK	61	25 Dec 42
		Priv: Leave M/A	A/Bdr	11 / 20 Dec 42	1 A TK Rgt	UK	3	20 Jan 43
		Priv Leave M/A	A/Bdr	18 / 27 Feb 43	1 A TK Rgt	UK	10	4 Mar 43
Observation for 20/8/43. Marriage								
Change of address N/K.		Mrs Oliva A. Chapatis (Wife) 21 Stevenson Drive Edinburgh				Scot	26	10 June 43
S.O.S.		SOS Cdn Army UK.	Bdr	15 JUNE 43	1 A TK Rgt	NA	30	26 July 43
	T.O.S.	TOS Cdn Army M.	Bdr	16 June 43	1 A TK Rgt	NA	35	27 Aug 43
		Disembarked	Bdr	10 July 43	1 A TK Rgt	NA	30	26 July 43
		Confirmed Bdr	Bdr	1 Aug 43	1 A TK Rgt	NA	35	27 Aug 43
		Died of Wounds.	Bdr	17 Dec 43	1 A TK Rgt	NA	C.L.A. 365	23 Dec 43

Statement [redacted] Service of No. D 7110 Rank Gnr [redacted] Sheet No. 1

Name Chapatis Joseph.

M.F.M.1 & 2A
40/P & S/119

REPORT Date	REPORT From whom received	Record of Promotions, Reductions, Transfers, Casualties, Reports, etc. (Continuation of Folio 2, M.F.M. 1 or M.F.M. 2)	Rank Shown	Effective Date	Unit	Place	Authority Part II D.O. No. Cas. List, etc.	Authority Dated
		EMBKD. AT PLYMOUTH	Gnr	1800 hrs 13 June 40	1ATK Rgt	Field	8	2 Feb 41
		DISEMBKD. BREST FRANCE	Gnr	0800 hrs 14 June 40	1ATK Rgt	Field	8	2 Feb 41
		EMBKD BREST FRANCE	Gnr	2200 hrs 14 June 40	1ATK Rgt	Field	8	2 Feb 41
		DISEMBKD. FALMOUTH	Gnr	2400 hrs 15 June 40	1ATK Rgt	Field	8	2 Feb 41
		AWL Forf 1 days pay FR+1.149/1/A. AA Sec 15(1)	Gnr	6 Feb 41	1ATK Rgt	Field	12	28 Feb 41
		Leave (2nd Priv.) 7 days	Gnr	26 Feb 5 Mar 41	1ATK Rgt	Field	13	7 Mar 41
		Leave 3rd Priv with FTW	Gnr	14 21 May 41	1ATK Rgt	Field	31	6 June 41
		Adm 5 Gen Hosp	Gnr	5 June 41	1ATK Rgt	Field	34	27 June 41
S.O.S.		SOS to 2CAHW in Hosp	Gnr	5 June 41	1ATK Rgt	Field	34	27 June 41
7/7/41	T.O.S.	TOS from 1ATK Regt	Gnr	6 June 41	2CAHW	Bordon	127	19 June 41
		Disch 5 Gen Hosp	Gnr	16 June 41	2CAHW	Bordon	127	19 June 41
		Granted permission to marry	Gnr	11 July 41	2CAHW	Bordon	151	13 July 41
		Attach to #2 detach R.C.O.C. (M.T. Depot for (R/Q))	Gnr	15 July 41	2CAHW	Bordon	159	21 July 41
		Ceases to be attached to #2 detach R.C.O.C. M.T. depot (R/Q)	Gnr	21 July 41	2CAHW	Bordon	165	27 July 41
S.O.S.		S.O.S. to 1st a/TK Regt	Gnr	1 Aug 41	2CAHW	Bordon	170	1 Aug 41
	TOS.	TOS from 2 CAHW	GNR	2 Aug 41	1ATK Rgt	UK.	42	15 Aug 41
		P. Leave with F.S.H.	GNR	25 Sept 20 Oct 41	1A.TK. Rgt.	UK.	53	17 Oct 41
		Granted permission to marry	GNR	1 Sept 41	1A.TK Rgt	UK	56	7 Nov 41
		AWL AA Sec 40. Forf. 15 days pay	GNR	31 Dec 41	1A.TK Rgt	UK	4	23 Jan 42

(a) Report: Date	(a) Report: From whom received	(b) Unit	(c) Record of all casualties regarding promotions (acting, temporary, local or substantive), appointments, transfers, postings, attachments, &c., forfeiture of pay, wounds, accidents, admission to and discharge from Hospital, Casualty Clearing Stations, &c. Date of disembarkation and embarkation from a theatre of war (including furlough, &c.) in accordance with para. 2 of Note to Table I of Appendix III of Field Service Regulations, Volume I	(d) Place of Casualty	(e) Date of Casualty	(f) Army rank as at (e)	(g) Army Form or other authority for entry to be shown
20-9-39		2 Fd Bty	T.O.S.	Montreal	20-9-39	GNR	PT. TILBURY # 16
			SOS C.A.S.F. (OVERSEAS) ON EMBARKATION AT HALIFAX ON 15 Dec 39				
	O.C.		Promoted Lance Bdr 14-8-40 to 26-8-40	Ryland	14-8-40	"	D.O. 21, 23-8-40.
			Joined Unit on 19 Dec 39 AND DISEMBARKED AT GREENOCK ON 30 Dec 39				
			TOS C.A.S.F. (OVERSEAS) ON TRANSFER ON	Ryland	16-9-40	"	D.O. 27, 27-9-40
			16-9-40				
	"		Returned 1630 hrs 20-9-40	Ryland	20-9-40	"	D.O. 31, 11-10-40
			A.W.L. from 0200 hrs 23-9-40 to 1400 hrs 26 Sep 40	Ryland	23-9-40	"	D.O. 31, 11-10-40
18-10-40	O.C.	27	Awarded 14 days field punishment for A.W.L. 2200 hrs 16-9-40 to 1630 hrs 20-9-40	Ryland	11-10-40		D.O. 35, 18-10-40
28 Feb 41	C.O.	1 A.T.K.	5 days C.B. & forfeits 1 days pay for A.W.L.	Ryland	6 Feb 41	Gnr	D.O. 12
7 Mar 41	C.O.		Leave (P-2) 26 Feb 41 to 5 Mar 41	Ryland	26 Feb 41	Gnr.	D.O. 12
27 Jun 41	C.O.	1 A.T.K.	Leave (P-3) 14 May - 21 May +1	Ryland	14 May 41	Gnr.	D.O. 31.
			T.O.S. to No 2 CAHU on admission to No 5 Cdn. Gen. Hosp.		5 Jun 41	Gnr.	D.O. 34
19 June 41		2 CAHU	T.O.S.	Bordon	6 June 41	Gnr	D.O. #127.
19 June 41		2 CAHU	Disc. from 5 Gen. Hosp.	"	16 June 41	Gnr	D.O. #127
13 June 41		2 CAHU	Granted permission to marry	Bordon	11 June 41	Gnr	150
21 July 41		2 CAHU	attached to #2 detail R.C.O.C. (MT Depot) for (R.I.O.)	Bordon	15 July 41	Gnr	159
27 July 41		2 CAHU	Ceases to be attached to 2 detail R.C.O.C. (R.I.O.) MT Depot	Bordon	27 July 41	Gnr	165
1 Aug 41		2 Cdn Fd Regt	T.O.S. to No 1 A/Tk Bty Regt	Bordon	1 Aug 41	Gnr	170
15 Aug 41	C.O.	1 A.T.K.	T.O.S. from No 2 CAHU	Ryland	2 Aug 41	Gnr	D.O. 42
1 Nov 41	C.O.	1 A.T.K.	Granted permission to marry	"	1 Nov 41	"	D.O. 56
23Jan42	"	"	14 days C.B. and forf. 15 days pay for AWL and A.A. Sec. 40.	"	31Dec41	"	D.O. 4.
13Feb42	"	"	To be A/L/Bdr.		23Jan42	L/Bdr.	D.O. 7.
13Mar42	"	"	Leave p-5 FW 26Feb42-5Mar42	"	26Feb42	"	D.O. 11
23Mar42	"	"	Forf. 4 days pay AWL 0200 hrs 23Sep40 to 1900 hrs 26 Sep 40	"	23Sep40	(Gnr.)	D.O. 13.
12May42	"	"	To be A/L/Bdr.	"	15Mar42	L/Bdr.	D.O. 24, 20 May 42.
20Jun42	"	"	Leave ;p-4 12-19 Jun 42	"	12Jun42	"	D.O. 31, 25 Jun 42.
7Aug 42.	"	"	Cease to hold appt. of A/L/Bdr.	"	15Jul42	Gnr	D.O. 40, 12 Aug 42.
3Sep42	"	"	Appt. A/L/Bdr.	"	16Jul42	A/L/Bdr.	D.O. 45, 11 Sep 42.

Deceased

SERVICE AND CASUALTY FORM

M.F.M. 4 (Part I)
A.F.B. 103 (Part I)
500M—8-39 (1700)
H.Q. 1772-45-18

PART I (For all ranks)

27TH FIELD BATTERY (HOW) R.C.A. C.A.S.F.

Unit ..... Regimental Number D 7110

1. Surname CHAPATIS
2. Christian Names JOSEPH
3. *Substantive Rank and Appointment GNR BDR
   *Acting Temporary or Local Rank
   giving date

*To be entered in pencil to facilitate alteration.

4. Place of birth CAN.- QUE. - MONTREAL
5. Date of birth as declared on attestation 27 OCT 1919
   (A)
6. Date of enlistment 20 SEP 1939
7. Place of enlistment MONTREAL
8. Residence at time of enlistment MONTREAL
9. (B) Special conditions (if any) of enlistment or rate of pay
10. (C) Any subsequent variations of conditions of service
11. Religion R C
12. If married, state date
13. Trade on enlistment FOUNDRY WORKER
14. Corps, trade and grade
15. (D) Qualifications
16. (E) Miscellaneous entries

(17) Regiment or Corps — Unit (Battn., etc)

27TH FIELD BATTERY (HOW) R.C.A. C.A.S.F.

(18) Medical

Category	Date	Authority
A	20 SEP 39	

(19) Next of kin (entries to be made in pencil)

JOHN CHAPATIS (father)
1222 FORFAR ST
MONTREAL QUE

(20) E
(21) E
(22) E

NOTES—

(A) Here enter particulars of any subsequent claim as to actual age after verification of birth certificate.
(B) Whether for home service only, enlisted at special rates of pay, etc.
(C) If to be retained on home service, period if specified to be stated; also authority and on what grounds: see (A) above.
(D) Signaller, Farrier, etc.
(E) Instructions regarding allotment of these sub-heads will be made as may be necessary after mobilization.

Place	Date of offence	Rank	Cases of drunkenness	OFFENCE	Names of Witnesses	Punishment awarded	Date of award or of order dispensing with trial	By whom awarded	Remarks
In the fd ~~Conduct~~	10 Aug	L/Bdr		AA Sec 40 W.O.A.S. Conduct etc in that he when in command of a guard ordered a sentry to clean his rifle while the sentry was on duty	Capt. R.E. Turner	Reprimanded	11 Aug 42	[illegible] Major	

No. D7110 Name Chapatis, J. Sqn., Battery, or Company 27th Corps R.C.A. Date of enlistment 20-9-39 G.C. Badges Service or Proficiency Pay

M.F.M. 6 (A.F.B.122) 500M—8-39 (1703) H.Q. 1772-45-18

Date of last entry in Company Conduct Sheet No. and date of last drunk Period not reckoning towards freedom from extra fine Sheet No. 1 Signature O.C. Company, etc. J.A. Gillies Character

Place	Date of offence	Rank	Cases of drunkenness	OFFENCE	Names of Witnesses	Punishment awarded	Date of award or of order dispensing with trial	By whom awarded	Remarks
No Entries from Previous Sheet destroyed 21 March 40 on Completion of Six Months Service									J.A.
~~Shirley~~ In the fd	16 Sept 40	Gnr.		W.O.A.S. being A.W.O.L. from 2200 hrs 16 Sept 40 to 16.30 hrs 20 Sept 40 A.A. Sec 15(1)	T.M. Cookman Bdr. Robinson	14 days F.P. to forfeit 14 days pay FRI 149(b) Forfeits 4 days pay FRI 151 5 days C.B.	11 Oct 40	Acting O.C. 1st A/Tk Regt (G.T. White Adj)	J.A.
~~Shirley~~ do	1 Feb 41	Gnr.		W.O.A.S. being A.W.O.L. from 2230 hrs 1 Feb 41 to 06.30 hrs 2 Feb 41	Sgt. Rubbra	Forfeits 1 day Pay FRI 748	6 Feb 41	J.A. Gillies Maj.	
~~Hassocks~~ do	25 Dec 41	Gnr		A.A. Sec 40 WOAS Conduct to the etc, improperly used a WD vehicle A.A. Sec 15(1)(a) WOAS absent without leave for 8 hrs 30 mins		1 dys pay FRI 149(1)(a) 14 dys pay FRI 149(2) 14 dys C.B.	31 Dec 41	T.M. Medland Lt.-col. [signature] Adjutant. 1st. Anti-Tank Regiment, R.C.A., C.A.S.F.	

(P.T.O.)

SERVICE AND CASUALTY FORM

M.F.M. 4 (a) (Part II)
40/P & S/412 (8/42)

(PART 11)

Regiment or Corps... 1 A.Tk. RCA. Regimental Number... D7110

Substantive Rank... Surname... Chapatis, Christian Names... Joseph.

Acting Temporary or Local Rank...

(To be entered in pencil to facilitate alteration)

(a) Report: Date	(a) Report: From whom received	(b) Unit	(c) Record of all casualties regarding promotions (acting, temporary, local or substantive), appointments, transfers, postings, attachments, &c., forfeiture of pay, wounds, accidents, admission to and discharge from Hospital, Casualty Clearing Stations, &c. Date of disembarkation and embarkation from a theatre of war (including furlough, &c.) in accordance with para. 2 of Note to Table I of Appendix III of Field Service Regulations, Volume I	(d) Place of Casualty	(e) Date of Casualty	(f) Army rank as at (e)	(g) Army Form or other authority for entry shown
25Sep42	O.C.	1A.Tk.	Leave F.3. 11-18 Sep 42.	U.K.	11Sep42	L/Bdr.	48, 30 Sep42
15 Dec 42	"	"	Appointed A/Bdr.	"	7Dec42	A/Bdr.	61, 25Dec42.
26 JAN 43	"	"	LEAVE 11DEC42 - 20DEC-42	"	4JAN43	"	3, 20JAN43
24 Feb 43	"	"	Leave 18 to 27 Feb 43.	"	18Feb43	"	10, 4 Mar 43.
			TOS QA OK ON EMBARKATION ON 5 Jan 43 TOS QA OK ON 16 Jan 43 AND DISEMBARKED ON 10 Jul 43				30/26 Jul 43
5 Aug 43	"	"	Confirmed Bdr.	✓	4Aug43	Bdr.	35, 29 Aug 43
10 Dec 43	—	✓	Prov. A/L/Lt.	✓	9Dec43	A/L/Lt.	50/43
21 Dec 43	AFW 3014	—	Wounded.	✓	14Dec43	✓	51/43
—	—	✓	Adm 4 X-3 (B) Adm Dn (B C)	✓	14Dec43	✓	} 01/44
—	—	✓	Ceases to be Bdr on being Dos	✓	14Dec43	✓	
		X-3 (B)	TOS from 1 A Tk Regt Kla	M	15Dec43	Bdr	1st Jan 44
		✓	Adm 4 6 dn Fd Amb	✓	15Dec43	—	}
		✓	Trans Out —	✓	15Dec43	—	2nd Jan 44
		✓	Gdn 16 dn Fd Dog Sta	✓	15Dec43	—	}
		✓	SOS Deceased (Died of Wounds)	✓	17Dec43	—	3rd Jan 44

Statement of the Service of No. 7710 Rank Gm Sheet No. 2

Name CHAPATIS Joseph

M.F.M. 1 & 2 (a)
700 M—8-39 (1697)
H.Q. 1772-45-18

REPORT Date	REPORT From whom received	Record of Promotions, Reductions, Transfers, Casualties, Reports, etc. (Continuation of Folio 2, M.F.M. 1 or M.F.M. 2)	Rank Shown	Effective Date	Unit	Place	Authority Part II D.O. No. Cas. List, etc.	Authority Dated
	TOS.	TOS. from 2 CAPM.	Gm	2 Aug 41	1 A TK Rgt	UK	42.	15 Aug 41
		Priv Leave with FTW	Gm	25 Sep 20 Oct 41	1 A TK Rgt	UK	53	17 Oct 41
		Granted permission to Marry.	Gm	1 Sep 41	1 A/TK Rgt	UK	56 12	7 Nov 41
		AWL 25/26 Dec 41 & AA Sec 40 forfeits 15 days pay FRO 149/2	Gm	31 Dec 41	1 A/JK Rgt	UK	4	23 Jan 42
amend'd	DO 8 d/20 Feb 42	To be A/L/Bdr (unpaid)	A/L/Bdr	23 Jan 42	1 A/JK Rgt	UK	7	13 Feb 42
		Priv Leave FTW.	L/Bdr	26 Feb 5 March 42	1 A/JK Rgt	UK	11	13 March 42
		AWL 23/26 Sept 40 forf 4 days pay FRO 149/1/a	Gm	23/26 Sept 40	1 A/JK Rgt	UK	13	23 March 42
		To be A/L/Bdr	A/L/Bdr	15 March 42	1 A/JK Rgt	UK	24	20 May 42
		Priv Leave FTW.	L/Bdr	12/19 June 42	1 A/JK Rgt	UK	31	25 June 42
		Ceases to Hold appt of A/L/Bdr	Gm	15 July 42	1 A/JK Rgt	UK	40	12 Aug 42
		To be A/L/Bdr.	A/L/Bdr	16 July 42	1 A/JK Rgt	UK	45	11 Sept 42
		Priv Leave to 18 Sep 42	L/Bdr	11 Sep 42	1 A/J Rgt	UK	48	30 Sep 42
		appt'd A/Bdr	A/Bdr	7 Dec 42	1 A/TK	UK	61	25 Dec 42
		Priv Leave ma	A/Bdr	11/20 Dec 42	1 A/TK	UK	3	20 Jan 43
		Priv Leave ma	A/Bdr	18/27 Feb 43	1 A/TK	UK	10	4 Mar 43
		Married with permn to Miss Olive Alis Tambull Clark		26 Dec 41	1 A/TK NEP 1 A/T 16	UK	14	16 May 44
Change of Address		N of K Mrs Oliva A Chapatis (Wife) 21 Stevenson Drive Edinburgh Scot: Pt 11 26					26	10 June 43 10 June 43

Statement of the Service of No. D7110 Rank Gnr Sheet No. 1

Name Chapotis J.

M.F.M. 1 & 2 (a)
700 M—8-39 (1697)
H.Q. 1772-45-1S

REPORT Date	REPORT From whom received	Record of Promotions, Reductions, Transfers, Casualties, Reports, etc. (Continuation of Folio 2, M.F.M. 1 or M.F.M. 2)	Rank Shown	Effective Date	Unit	Place	Authority Part II D.O. No. Cas. List, etc.	Authority Dated
		Forfeits 18 days pay. A.W.L. 3 days 6 hrs	Gnr					
		30 mins. FR 9/149(1) A+B.		11.10.40	1st A.TK	Field	33	18.10.40
		Embkd. at Plymouth	Gnr	1800 hrs 13 June 40	1 ATK Rgt	"	8	2 Feb +1
		Disembkd. Brest France	"	0800 hrs 14 June 40	1 ATK Rgt	"	8	2 Feb +1
		Embkd. Brest France	"	2200 hrs 14 June 40	1 ATK Rgt	"	8	2 Feb +1
		Disembkd. Falmouth	"	2400 hrs 15 June 40	1 ATK Rgt	"	8	2 Feb +1
		AWL. Forf 1 days pay. FR+1, 149/1/A. (AA Sec 15(1))	Gnr	6 Feb 41	1/A/TK Regt	Field	12	28 Feb +1
		Leave 2nd Prin 7 days	"	26 Feb 5 Mar 41	1/A/TK Regt	"	13	7 March +1
		3rd Prin Leave with F.T.W.	Gnr	14/21 May 41	1 ATK Rgt	Field	31	6 June +1
		Adm 5 Gen Hosp	Gnr	5 June +1	1 ATK Rgt	Field	34	27 June +1
S.O.S.		SOS to 2 CAHU in Hosp	Gnr	5 June +1	1 ATK Rgt	Field	34	27 June +1
7/7/41	T.O.S.	TOS from 1 ATK Rgt	Gnr	6 June +1	2 CAHU	Bordon	127	19 June +1
		~~Adm 5 Gen Hosp~~	~~Gnr~~	~~5 June 41~~	~~2 AHU~~	~~Bordon~~	~~125~~	~~17 June +1~~
Canc D.O. 127d/19 June 41		~~Disch. 5 Gen Hosp~~	~~Gnr~~	~~16 June +1~~	~~2 AHU~~	~~Bordon~~	~~125~~	~~17 June +1~~
		Disch 5 Gen Hosp	Gnr	16 June +1	2 AHU	Bordon	127	19 June +1
		Permission to marry	Gnr	11 July 41	2 AHU	Bordon	151 10	13 July 41
		Att'd to 2 Det R.C.O.C. for R.&Q.	Gnr	15 July 41	2 Det 2 AHU	U.K.	159 & 100	21 & 15 July 41
		Ceases to be att'd to 2 Det R.C.O.C. for R&Q	Gnr	21 July 41	2 Det 2 AHU	U.K.	165 & 109	27 & 29 July 41
S.O.S.		S.O.S. to 1 Anti-Tank Rgt	Gnr	1 Aug 41	2 AHU	U.K.	170	1 Aug 41

NAME CHAPATIS JOSEPH

REGIMENTAL NO. D7110 RANK BDR.

ENLISTED AT Montreal, Que. PROMOTIONS, ETC. AND DATE

DATE 20 September 1939

IF SERVED PREVIOUSLY, STATE UNIT, ETC. N/A.

MARRIED, WIDOWER, OR SINGLE Married 29 September 1941

NEXT OF KIN Mrs. Olive A Chapatis RELATIONSHIP Wife.

ADDRESS OF 21 Stevenson Drive, Edinburgh. Scotland.

ASSIGNMENT OF PAY, $ ~~20.00~~ C ~~eff. May 1940~~ ✓ 23.00 wef 1 Dec 1943

ADDRESS

DEPENDENT'S ALLOWANCE, ENTITLED OR NOT Yes.

DATE APPLICATION FORWARDED TO DISTRICT PAYMASTER

M. F. M. 14
40/P & S/67

IN WHOSE FAVOUR Wife.

CASUALTIES, ETC.

NATURE E. G. Absence, Promotion, Etc.	PART II, D.O. No	 Date	REMARKS If In Hospital, Note Name, Etc.
forfeits 18 days.	33	18 Oct 40	AWOL.
5 days C.B. forf. 1 days.	12	28 Feb 41	AWOL.
D.O.D # 2 CAHU	34	27 June 41	wef 5 June 41 No 5 Cdn Gen Hosp.
Granted permission to Marry.	56	7 Nov 41	wef 1 Sept 41
14 days C.B. forfeits 15 days Pay.	4	23 Jan 42	" 31 Dec 42
L/Bdr. W.O.P.	8	20 Feb 42	" 23 Jan 42
Priv Leave P5(W)	11	13 Mar 42	26 Feb 5 Mar 43
Forfeits 4 days Pay.	13	23 Mar 42	wef. 11 Oct. 40
L/Bdr.	24	20 May 42	" 15 Mar 42
Priv Leave P2(W)	31	25 June 42	12-19 June 42
Reverts to Gm.	40	12 Aug 42	wef. 15 July 42
L/Bdr	45	11 Sept 42	" 16 July 42
7 days leave (RA)	48	30 Sept 42	11-18 Sept 42
appointed A/Bdr	61	25 Dec 42	wef 9 Dec 42
9 days leave (RA)	3	20 Jan 43	11-20 Dec 42
9 " " (RA)	10	4 Mar 43	18-27 Feb 43
CONFIRMED IN RANK. of BDR.	CR.		wef 1 Aug 43.
TO BE A/L/SGT.	CR		wef 9 Dec 43
SOSIATK. TO X-3 ADDY HOSP	CR		wef 14 Dec 43

M.F.M. 5
150M—1-42 (3165)
H.Q. 1772-39-1651

PARTICULARS OF FAMILY OF AN OFFICER OR OTHER RANK OF THE CANADIAN ARMY (AF) OR R.C.A.F. (ON ACTIVE SERVICE)

INSTRUCTIONS.

(*a*) This form is to be completed immediately an officer or other rank is appointed to, or enlisted in, the Canadian Army (AF) or R.C.A.F. ON ACTIVE SERVICE.

(*b*) All questions, etc., must be completed.

(*c*) Upon completion, the form will, in the case of Army personnel, be forwarded to the District Records Officer for transmission to Officer i/c Records (Army) N.D.H.Q., Ottawa. In the case of R.C.A.F. personnel the form will be forwarded to R.C.A.F. Records Officer, Dept. of National Defence for Air, Ottawa.

---

(1) Name of Officer or Other Rank.....CHAPATIS.....Joseph.....
(Surname first—Christian names in full—Block capitals)

.....

(2) Regimental or Official Number and Rank.....D7110.....

(3) Unit.....27th Field Battery R.C.A.....

(4) Are you married?.....No.....

(5) If married, state,

(*a*) Full name of your wife.....

.....

(*b*) Present postal address of wife.....

(6) If married, have you been regularly supporting your wife? If not—state reasons.....

.....

(7) Are you a widower?.....No.....

(8) Have you any children?..... Number of boys..... Girls.....

Names and ages.....

.....NA.....

(9) If Dependents' Allowance is claimed in respect of children—state whether you have been regularly supporting them.....

.....Nil.....

Give particulars of Guardians to whom Dependents' Allowance should be paid—if authorized.

Name.....

Postal Address.....NA.....

.....

[SEE OTHER SIDE]

(10) Have you a common-law wife—whom you have been regularly supporting and publicly representing as your wife for at least 2 years immediately prior to appointment or enlistment? No

If so, state her full name and Postal Address .....

.....

.....

(11) Is your father alive? Yes

If so, state name and address, occupation John Chapatis

1222 Forfar Street, Montreal, Que.

(12) If your father is a widower and is totally incapacitated from earning a living—are you his sole or partial support? .....

(13) If sole or partial support of father who is a widower, totally incapacitated from earning a living —state what amount per month you have given him prior to appointment or enlistment.....

.....

Also state reason he has no other means of support if partially supported by you, what is your reason for not providing full support? .....

(14) Is your mother alive? Yes

If so, state name and address Madelaine Chapatis

1222 Forfar St. Montreal, Canada.

(15) If your mother is a widow, are you her sole or partial support? no, but wish to contribute.

(16) If sole or partial support of widowed mother—state what amount per month you have given her prior to appointment or enlistment $20.00

Also state reason why she has no other means of support, if partially supported by you what is your reason for not providing full support? .....

(17) Are you contributing to the support of any dependents, other than those shown above? .....
This may include any brothers 16 years of age or under, or any sisters 17 years of age or under, solely supported and maintained as bona fide members of your household before your appointment or enlistment.

If so, state the following particulars:—

Relationship .....

Full Name .....

Postal Address .....

Amount contributed monthly during the past six months .....

.....

(18) Are you insured? Yes

If so, in what Company? .....
(Give number of policy)

Have you made arrangements for payment of your Insurance Premium? Yes
If not, and it is a monthly premium, you may assign the amount in addition to any other assignment you wish to make, provided the total assignment is not in excess of the maximum monthly amount which may be assigned.

I hereby certify that the information given by me on this form is correct in each and every particular.

(Sgd) Joe Chapatis.
(Signature of officer or man)

Date 20th September 1939

(Sgd) R.M. Bliss? Major R.C.A.
O.C. 27th Field Battery (How) R.C.A.C.A.S.F
Officer Commanding

Date 20th September 1939

N.B. (If parent(s) of the officer or other rank concerned has (have) been replaced by foster parent(s), questions relating to fathers and/or mothers above should be altered and answered as applicable.)

OCCUPATIONAL HISTORY FORM

THIS FORM IS TO BE COMPLETED FOR EACH MEMBER OF THE ARMED FORCES. THE INFORMATION SOUGHT IS FOR THE USE OF GENERAL ADVISORY COMMITTEE ON DEMOBILIZATION AND REHABILITATION, A COMMITTEE SET UP BY THE GOVERNMENT OF CANADA TO STUDY PLANS FOR ESTABLISHING IN INDUSTRIAL LIFE THE MEMBERS OF THE ARMED FORCES, AFTER DISCHARGE. ACCURACY AND COMPLETENESS IN ANSWERING WILL BE OF MUCH HELP TO THE COMMITTEE.

PLEASE READ CAREFULLY THE INSTRUCTIONS GIVEN ON THE INSIDE OF COVER BEFORE COMPLETING FORM

PLEASE LEAVE BLANK

Section A—GENERAL INFORMATION

1. (a) Print name in full CHAPATIS, Joseph (b) Reg'l. No. D 7110
2. (a) Arm of service Army (b) Unit 1st A/T Regt. R.C.A. (c) Rank A/Bdr.
3. (a) Date of birth 27 Oct 1919 (b) Have you any dependents? Yes (c) Place of residence at time of enlistment Montreal. Que.
4. (a) Place of enlistment Montreal, Que. (b) Date of enlistment 20 Sep 1939

Section B—EDUCATION AND TRAINING

5. (a) State age on finally leaving school 16 Yrs (b) Were you attending school or college up to the time of enlistment? No
6. State definitely highest standing reached at public, technical or high school (for instance—"4 years, Public School", "two years, High School", "Junior Matriculation", or "4 years technical course in printing", etc.) Grade 6 Public School
7. If you attended a university, give name of university and standing or degree secured
8. (a) Did you ever enter upon a trade apprenticeship? No (b) If so, for what occupation? (c) Did you finish it? (d) If you did not finish it, how long did you serve at it?
9. (a) What languages do you speak fluently? English (b) What languages do you read well? English

Section C—EMPLOYMENT CONDITION AT TIME OF ENLISTMENT

10. (a) State whether you were WORKING or NOT WORKING at time of enlistment. (Enter here only "Working" or "Not Working", as case may be; particulars are asked for below) Working (b) At time of enlistment of what trade union or professional society were you a member? None

Section D—PARTICULARS CONCERNING THOSE WHO WERE UNEMPLOYED AT TIME OF ENLISTMENT

QUESTIONS 11 TO 17 REFER ONLY TO THOSE WHO ANSWER "NOT WORKING" IN QUESTION 10 (a)

11. Had you ever been employed fairly regularly since leaving school?
12. (a) If answer to 11 be "Yes", state exact trade or occupation at which you actually worked (b) State how long you had worked at this trade or occupation
13. If answer to 11 be "No", state exact trade or occupation for which you feel qualified
14. If you had been employed after leaving school, state when you last worked fairly regularly before enlistment
15. Give details of last employer, if any: Name Address
16. Nature of employer's business (for instance, "farmer", or "building contractor", or "boot factory", or "iron foundry", or "retail store", etc.)
17. (a) If your last employment was in a business of your own, state nature and address of business (b) Date of discontinuing it

Section E—PARTICULARS CONCERNING THOSE WHO WERE EMPLOYED AT TIME OF ENLISTMENT

QUESTIONS 18 TO 23 REFER ONLY TO THOSE WHO ANSWER "WORKING" IN QUESTION 10 (a). PLEASE READ THESE QUESTIONS AND REPLY TO THOSE APPLYING TO YOU AT TIME OF ENLISTMENT

IF YOU WERE AN EMPLOYEE WORKING FOR AN EMPLOYER UP TO THE TIME OF ENLISTMENT, PLEASE ANSWER QUESTIONS 18 TO 21

18. Name of employer Montreal Drydock Co. Address Montreal, Que.
19. Nature of employer's business (for instance, "farmer", or "building contractor", or "boot factory", or "iron foundry", or "retail store", etc.) Drydock
20. (a) Your specific occupation Foundry Worker (b) Number of years' experience at this occupation with any employer 2
21. (a) Did your employer promise definitely to give you employment on discharge? No (b) Did your employer refuse to promise you employment on discharge? No (c) Do you wish to return to your former employment? Not stated

IF YOU WERE WORKING ON YOUR OWN UP TO THE TIME OF ENLISTMENT, THAT IS TO SAY, OPERATING A FARM, A STORE, AN AGENCY, OR IN PROFESSIONAL PRACTICE, OR AS A PARTNER IN ANY SUCH LINE, PLEASE ANSWER QUESTIONS 22 AND 23

22. (a) State nature of business, or professional practice (b) Where was it located?
23. (a) Number of years engaged in this business (b) Have you made, or will you make plans to return to the same or a similar business on discharge?

Section F—PARTICULARS OF FARMING EXPERIENCE

24. (a) Do you wish to engage in farming after the war? No (b) Do you feel competent to operate a farm? (c) If so, in what kind of farming?
25. (a) Were you born on a farm? No (b) How many years' actual farming experience have you had? None (c) In what provinces did you have experience?

Section G—MISCELLANEOUS

26. Have you made any arrangements other than indicated above, for re-establishment in civil life after discharge? No
27. If so, state nature of your plans (for example, do you plan to return to school, or have you been assured of a job, etc.)
28. State any employment preference or ambition you may have, other than indicated elsewhere in this form Not stated

DATE 10 Mar 43 SIGNATURE L.B. Tiernan Lieut.
FOR OFFICER I/C RECORDS C.M.H.Q.

Sheet No.....

POSTINGS FROM O/S CASUALTY LISTS

To be attached to M.F.M. 1 or M.F.M. 2

Regt'l No. D- 7110 Rank ~~Bdr~~ Lt Surname Chapatis Christian Name Joseph

Unit	Hospt.	Admitted Day	Admitted Mo.	Admitted Year	Discharged Day	Discharged Mo.	Discharged Year	Hospt. Days	Disease or Injury	Remarks	Cas. List No.
1 A/T Regt Rle									Wounded - 14-12-43		A-363
"									Died of Wounds.	E/A- 17-12-43.	A-365
"									H.E lower lt. spine pen. region lt. shoulder		B-162

Records B3-49
H.Q. 1772-45-8
100M—5-43 (9999)

(O.C.L.-412)

AWARDS—CANADIAN ARMY (ACTIVE)

(1533) M

M.J.A.
100M—10-41 (2195)
H.Q. 1772-45-8

FILE NO. 405-C-18838

SURNAME (IN BLOCK LETTERS) CHRISTIAN NAMES	REG. NO.	RANK ON DISCHARGE	C.A.S.F. UNIT
CHAPATIS, Joseph	D.7110	L/Sgt.	R.C.A.

WAR SERVICE BADGE (CLASS) NO. DATE DESPATCHED:

ADDRESS:

CAMPAIGN MEDALS	REGISTRATION NUMBER AND DATE DESPATCHED
1939-45 Star Italy Star ~~Defence Medal~~ War Medal CVSM & Clasp	934. 18.1.49

(THE REVERSE TO BE USED FOR ESTATE PURPOSES)

MEDALS AND MEMORIALS—DECEASED PERSONNEL

REGISTRATION NO. DATE OF DESPATCH

MEMORIAL B R

DATE DESP.....

(1) REGN. NO. 1024

(1) MEDALS

PERSON ENTITLED TO Mrs. Olive CHAPATIS (Widow) 17-11-49

17 BROOMHOUSE PLACE SOUTH

ADDRESS: ~~21 Stevenson Drive~~, Edinburgh 11, Scotland

(2) MEMORIAL CROSS

WIDOW Mrs. Oliva A. Chapatis,

ADDRESS: 21 Stevenson Dr., Edinburg, Scotland.

(2) DESP. FEB 11 1944
REGN No. 4322

(3) MEMORIAL CROSS

MOTHER Mrs. Mrs. Madelaine Chapatis,

ADDRESS: 1222 Forfar St., Montreal, P.Q.

(3) DESP. FEB 11 1944
REGN No. 4323

MFM 510
40/P[illegible]S/254 (3444)

CANADIAN ACTIVE SERVICE FORCE

OVERSEAS

District.....

Dispersal Area.....

LAST PAY CERTIFICATE

(All Ranks)

1st Amended.

Regtl No. D.7110 Rank and Name CHAPATIS. J. L/SGT.

of (Unit).....on.....

~~X(X~~ Discharge).....tX.....on 17th Dec: 1943

Reason Death Authority: C.C.L."A"365 d/23rd Dec:43

The following is a statement of the account of the above-named from 1st Dec: to 31st Dec: 1943 the inclusive date of transfer or discharge.

Particulars	Dr Amount		Particulars	Cr Amount	
Balance Dr from last account			Balance Cr from last account	38	34
First Monthly Payment			Regimental Pay 6 days @ 1.90 / 25 days @ $ 1.70	11 / 42	40 / 50
Casual Payments			Technical Pay .....days at .....$		
Payments on Transfer or Discharge			Additional Pay (Give particulars) .....days at .....$		
Assigned Pay	23	00			
Regimental Charges			Allowances (Give particulars) .....days at .....$		
Public Stoppages (Give particulars):					
			Pr. L/Sgt. 15 Dec/43	3	40
			DO.137 (5d) d/18 Dec/44		
To Balance Cr Free	72	64			
To Balance Cr Deferred			By Balance Dr		
Total	95	64	Total	95	64

BALANCE GIVEN IS SUBJECT TO ANY CHARGES AND/OR CREDITS ENDORSED ON THE REVERSE HEREOF

Remarks:

1) Assigned Pay of $23.00 (W) stopped eff: Jan/44.

2) Assigned Pay of $8.40 (6th V.Loan) cancelled eff: Nov/43.

3) The above statement hasbbeen compiled from Treasury Records the latest paybook not being available.

FEB 19 EX. Q OTTAWA NATIONAL DEFENCE

Compiled by M.Durham.

Checked by E.N.Clark

Date 8th February, 1945

DS.

Certified correct [signature]
for Chief Treasury Officer, Overseas

M.F.M. 510
40/P & S/254 (1-43)

CANADIAN ACTIVE SERVICE FORCE
OVERSEAS
LAST PAY CERTIFICATE
(All Ranks)

District.....

Dispersal Area.....

Regtl. No. D7110 Rank and Name CHAPAIS, J. Bdr.

of (Unit).....on.....

(Transfer or Discharge).....to.....on 17th Dec. 1943.

Reason Death Authority: C.C.L. "A" 365. d/23 Dec. 43.

The following is a statement of the account of the above-named from 1st Dec. to 31st Dec. 1943 the inclusive date of transfer or discharge.

Dr. Particulars	Amount		Cr. Particulars	Amount	
Balance Dr. from last account			Balance Cr. from last account	38	34
First Monthly Payment			Regimental Pay 6 days at $1.90 / 25 days at $1.70	11 / 42	40 / 50
Casual Payments			Tradesmen's Pay ..days at ..$		
Payments on Transfer or Discharge			Additional Pay (Give particulars) ..days at ..$		
Assigned Pay	23	00			
Regimental Charges			Allowances (Give particulars) ..days at ..$		
Public Stoppages (Give particulars):					
To Balance Cr. Free	69	24			
To Balance Cr. Deferred			By Balance Dr.		
Total	92	24	Total	92	24

BALANCE GIVEN IS SUBJECT TO ANY CHARGES AND/OR CREDITS ENDORSED ON THE REVERSE HEREOF

Remarks:

(1) Asand Pay $23.00 (W) Stopped eff. Jan.44.

(2) Asand Pay $ 8.40 (5.V.L.) cancelled eff. Nov.43.

(3) The above Statement has been compiled from Treasury Records, the latest paybook not being available.

Compiled by L.G.Waldron,

Checked by E.McLeod

Date 10th July. 1944.

Certified correct E. E. Muenbrook
for Chief Treasury Officer, Overseas.

CFA 187
40/P & S/2180 (4066)

CANADIAN MILITARY HEADQUARTERS

ESTATES BRANCH
INVENTORY

of personal effects received by
Casualty Section, No. 1 CKSD

No., RANK and NAME D-7110 A/L/Sgt Chapatis J. 1 A/T Regt RCA (Dec'd)

RECEIVED FROM Cdn Sec G.H.Q. 2nd Ech
B-143555 Pte. Davenport W.C.
L-17349 Pte. Bailey N.S.

CHECKED BY ..... DATE 8 Feb 44

1	Pr. Glasses in Case		
	Snapshots		
1	Gold Signet Ring		
1	Key		

ORIGINAL } To Officer i/c Estates with
DUPLICATE } original inventory, if any.

TRIPLICATE — with effects.

W. E. Fulmer, Capt.
for OC 1 Cdn KSD

CANADIAN RED CROSS SOCIETY.

OVERSEAS OFFICE.

Telephones:
MAYFAIR 6451 and 9601
(10 Lines)

3, BURLINGTON GARDENS,
LONDON, W.1.
ENGLAND.

HOSPITAL SERVICES
(Information Section)

3rd.April,1944

Major G.M.Lampard,
Officer i/c Estates,
Canadian Military Headquarters,
2 Cockspur Street,
London,S.W.1.

Dear Major Lampard: Re:D-7110 Bdr.J.CHAPATIS,Deceased

We have been asked by the widow of the above man to try to obtain some news for her about her husband's personal effects, about which she has not yet received any information.Bdr. Chapatis died of wounds in Italy on the 17th.December,1943.

We should be grateful if you would advise us as to how to answer Mrs.Chapatis' letter.

Yours sincerely,

pp Jean Stickney

MRS.WILLIAM STICKNEY
Director.

g.

CANADIAN MILITARY
ESTATES
4 APR 1944
BRANCH
HEADQUARTERS

D7110
L/SGT J CHAPATIS
R C A
17 - 12 - 43

2/K 06K

Graves Registration & Enquiries
(Records) C.W.F.

G8 RF RES

MORRO RIVER
CEMETERY

wife Mrs Olive A. Chapalie
Stevenson Drive
Edinburgh

"This is a temporary wooden cross
War Graves Commission will replace
Headstone"

25M-12-44 (6215)
H.Q. 1064-81-3

DEPARTMENT OF NATIONAL DEFENCE

NAVY ═══ ARMY ═══ AIR FORCE

4
ARMY

STATEMENT OF WAR SERVICE GRATUITY

DECEASED MEMBER'S NAME: Joseph (CHRISTIAN NAMES) CHAPATIS (SURNAME)

REGISTER NO. D-1196
FILE NO. 405-C-18838
DATE 3-2-45
SERVICE NO. D-7110
FINAL RANK OR RATING A/L/Sgt.
DATE OF DISCHARGE 17-12-43

PAYEE: Mrs. Olive A. Shapatis,
ADDRESS: c/o Clark - 21 Stevenson Drive, Edinburgh 11, Scotland.

DATE OF TERMINATION OF OVERSEAS SERVICE 17-12-43

A. TOTAL QUALIFYING SERVICE	NO. OF DAYS 1501/30 EQUAL TO 50	COMPLETE PERIODS AT $7.50	$ 375.00
B. QUALIFYING OVERSEAS SERVICE	No. of Days 1408 LESS 1	INELIGIBLE DAYS, EQUAL TO 1407 DAYS @ 25c. PER DAY	351.75
	SEE PAR. 2 OVERLEAF FOR EXPLANATION		726.75

C. SUPPLEMENT FOR OVERSEAS SERVICE

DAILY RATES AT DISCHARGE

PAY	$ 1.90		
SUBSISTENCE OR LODGING AND PROVISION ALLOWANCE	$ 1.25		
ADDITIONAL PAY	$		
	$		
DEPENDENTS' ALLOWANCE 1/30 OF $ 51.12	$ 1.70		
	$ 4.85		
TOTAL	$ 4.85	X7 = $ 33.95	
NO. OF DAYS 1408/183	X$ 33.95		261.21

RECEIVED
APR 16 1945
WAR SERVICE GRATUITY DIVISION, ARMY TREASURY

D. WAR SERVICE GRATUITY		987.96
E. DEDUCTIONS — OVERPAYMENT OF PAY AND ALLOWANCES	$	
OVERPAYMENT OF DEPENDENTS' ALLOWANCE AND ASSIGNED PAY	$	
OTHER DEDUCTIONS	$	
F. TOTAL AMOUNT PAYABLE		987.96

G. YOUR PORTION OF GRATUITY IS— 100%

DEPENDENTS' ALLOWANCE IN ISSUE TO YOU $_____ OF $ = $

TOTAL DEPENDENTS' ALLOWANCE IN ISSUE $

ΔT

CERTIFICATE I CERTIFY THAT THE AMOUNT HAS BEEN CORRECTLY COMPUTED AND IS PAYABLE IN ACCORDANCE WITH THE TERMS OF THE WAR SERVICE GRANTS ACT, 1944 AND THE REGULATIONS ISSUED THEREUNDER.

PREPARED BY	CHECKED BY
JB	

TREASURY

CHECKED BY	DATE
F.W. Maclaren.	11.4.45

SERVICE REPRESENTATIVE

for use on Active Service. This Will page NOT be used until you have been placed orders for Active Service.

WILL

r use if the soldier has not already made a Will or wishes to alter one already made. See instructions on page 23).

In the event of my death, I give the whole of my belongings and effects to my wife, Mrs. Chapatis Dias, 21 Stevenson Drive, Stenhouse, Edinburgh 11. Scotland.

Signature ..... Chapatis .....

Rank, Regt'l Number ..... Bdr. D 7110 .....

Date ..... 7th May 1943 .....

MEMORANDUM FOR **P. 64**

Mr. John Chapatis

1222 Forfar Street,

Montreal, Quebec.

Any further communication on this subject should be addressed to:—

THE ADMINISTRATOR OF ESTATES,
DEPARTMENT OF NATIONAL DEFENCE,
OTTAWA, ONTARIO.

and the following number quoted:—

H.Q. 405-C-18838 ED 151

ESTATES BRANCH JAN 26 1944 NATIONAL DEFENCE OTTAWA

DEPARTMENT OF NATIONAL DEFENCE
ESTATES BRANCH
OTTAWA, ONT.

January 13, 1944

For the purpose of record and in the event of there being any Service estate available for distribution (according to law) on account of the late

A/L/Sgt. Joseph CHAPATIS, No. D.7110

Canadian Army

it is necessary that the requisite information regarding the deceased and his relatives should be furnished on the inside of this form in strict accordance with the printed instructions. The particulars required are to be carefully filled in and the Declaration on the back should then be signed in the presence of a Clergyman, Priest, Local Magistrate, Commissioner for Oaths or Notary Public, who should be asked to complete and sign the Certificate. This form should then be returned to the above address.

A deceased's Service estate, the administration of which is the responsibility of the Estates Branch, consists of any balance of pay and allowances at credit, cash on hand and the personal effects which are under the control of the Service authorities. To obtain such assets, it is not necessary for the person(s) legally entitled thereto to obtain through the Courts Probate of the Will, or if none, Letters of Administration of his estate.

In addition to the administration of those Service assets, the Administrator of Estates is authorized to withdraw into Government account any funds (within a defined amount) on deposit to the deceased's credit in Banks, Post Offices or other financial institutions in Canada and Overseas, without expense or trouble to the person(s) legally entitled to the estate, and to distribute such funds at the same time as any balance of pay is distributed. Also, War Savings Certificates and Victory Loan Bonds owned by the deceased may be redeemed and similarly distributed, or transmitted into the name(s) of the person(s) legally entitled. Such Certificates and Bonds should not be forwarded to the Administrator of Estates until they are requested.

If there are other assets which necessitate an application for Probate or Letters of Administration, the Administrator of Estates may transfer and hand over the Service assets to the executor or administrator appointed by the Court so that all the estate, Service and otherwise, may be dealt with as a whole.

The information given by you on Pages 2 and 3 of this form is therefore of importance in determining whether or not the deceased's assets are such that they may all be administered by the Administrator of Estates to the person(s) legally entitled, that is, without the need for Probate or Administration.

If there is insufficient space for complete particulars to be given opposite any question on Pages 2 and 3 of this form, the space under "additional remarks" on page 4 should be used.

R. G. Phelan Capt.

(R.G. Phelan) Capt.,
for (L.M. Firth) Lt.-Col.,
Administrator of Estates.

RGP/JMcF

M.F.W. 77
2M-11-43 (2842)
H.Q. 1772-39-972
K.P. 95075

ANSWER IN FULL ALL APPLICABLE QUESTIONS

STATEMENT of the Names, Ages and Addresses or Dates of Death, of all the relatives that the deceased ever had in each of the degrees specified below.

Degrees of Relationship	RELATIVES required to be accounted for		INFORMANT'S STATEMENT: NAME IN FULL of any Relative, if any, in each degree specified	Age	ADDRESS IN FULL of each surviving Relative, opposite his or her name, and date of death of each deceased relative
1	Widow of the Deceased.....		Olive Clark		Scotland
2	Children of the Deceased and dates of their Births.....		1 Joseph Chapatis Jr.		
3	Father of the Deceased.....		John Chapatis		1222 Forfar St
4	Mother of the Deceased.....		Madeline Chapatis		" "
5	Brothers of the Deceased	Full Blood yes	Bronnie Chapatis Anthony Chapatis Peter Chapatis.		Pt. St Charles Mackayville.
		Half Blood			
6	Sisters of the Deceased	Full Blood yes	Antonia Chapatis Helen Chapatis Magdeline Chapatis		Chateauguay St. 1222 Forfar.
		Half Blood			
7	Names of brothers or sisters (whether of the full or the half blood) of the Deceased, *who are dead*, and date of death of each.		Names and ages of their children (if any)		Address of their children

ANSWER FULLY EACH QUESTION ON THIS PAGE

PARTICULARS AS TO IDENTITY

8	Full names of the deceased	Joseph Chapalis
9	Date of his birth	October 27th
10	Place and date of his marriage.	Sept. 26th Edinburgh Scotland
11	Place and date of his parents' marriage.	

PARTICULARS OF DOMICILE

12	Place where deceased was born.	Montreal.
13	State, in order, the Province, State and/or Country in which he resided before enlistment and the period of time in each.	(a) (b) (c) (d) Montreal Province Que.
14	Nature of employment before enlistment.	
15	State whether he owned the premises in which he lived and, if so, where situated.	no
16	Name place where deceased stated he intended to make his permanent home.	Montreal

PARTICULARS OF ESTATE

17	Did he leave a Will?	No
18	If married, and domiciled in the Province of Quebec or in a State in the U.S.A. or in a Country under the laws of which there is community of property between spouses, — was there a marriage contract dealing with property?	No
19	Did he have a Bank, Post Office or other deposit account? If so, give name and address of bank, etc. and the amount on deposit.	None.
20	Amount of War Savings Certificates held by deceased.	None
21	Amount of Victory Loan Bonds held by deceased.	None.
22	If deceased had life insurance, name companies and amount payable under each policy and the person named as beneficiary there. Describe other assets, if any, and estimated value thereof.	None
23	Is application for Probate or Letters of Administration necessary (see page 1)?	

OTHER PARTICULARS

24	Did the deceased after enlistment incur any debts for:— (a) His own separate board and lodging while on service. (b) Service clothing and equipment. An itemized account for each such debt should be attached hereto, and if same is correct you should mark the bill "approved" and sign same. If believed incorrect, give particulars.	
25	Have you or any other relative paid the funeral expenses or any part thereof? If so, attach itemized accounts showing amount paid, and by whom.	

(NOTE:—The Government pays funeral expenses within the amounts authorized in the Regulations, where death occurs and burial is made Overseas as well as where death occurs and burial is made in Canada or elswhere in the North American zone, and if a relative has already paid those expenses the Government will reimburse such relative to the extent of the amount authorized in the Regulations. Any amount of such expenses in excess of those authorized in the Regulations is not payable by the Government nor is it chargeable against the service estate of the deceased.)

(PLEASE TURN OVER)

DECLARATION

*Insert degree of relationship for example, "Widow", "Father", "Brother", etc.

I hereby declare that all the particulars shown on this form are correct, and a true and complete statement of all the relatives that the deceased ever had in the degrees specified; and that I am the

*.....Parents.....of the deceased.

N. B. To be signed in full in the presence of a Clergyman, Priest, Local Magistrate, Commissioner or Notary Public.

.....t mark of John Chapaitis..... {Signature of Informant

.....1222 Forfar St Montreal.....Address

CERTIFICATE

I hereby certify that, to the best of my knowledge and belief.....John Chapaitis.....

See above. .....{Name of Informant} is the.....father.....of the Deceased above described, and I believe the above Declaration and the Statement of Relatives and of particulars made by the Informant and signed in my presence to be complete and correct.

Dated at.....Montreal.....this.....24th.....day of.....January.....19.44

Signature of Clergyman, Priest, Magistrate, Commissioner or Notary Public } .....Rev. J. Bobeau..... Qualification.....Parish Priest.....

Address.....3426 Parthenais St. Montreal.....

NOTE.—Before granting the above Certificate, care should be taken to see that the Informant gives particulars concerning the death of any Relative stated by him or her to have died, and that the full name and address and age of each surviving Relative specified is stated in its proper place in the Statement opposite.

(If the deceased has no living relatives of the degrees shown on page 2, the names and addresses and relationship of other relatives should be set out below.)

USE SPACE BELOW FOR ANY ADDITIONAL REMARKS YOU MAY WISH TO MAKE

405-C-18838 ✓

FIELD SERVICE

Army Form B. 2090A.

REPORT of Death of an Officer or a Soldier to be forwarded to the War Office with the least possible delay after receipt of notification of death. See Table II, Appendix III, Field Service Regulations, Vol. I.

REGIMENT OR CORPS: R.C.A.

Squadron, Troop, Battery or Company: 1 A/Tk Regt.

Officer's Personal No. (if known) / Soldier's Army No.: D.7110

Rank: A/L/Sgt.

Surname: CHAPATIS

Christian Names: J.

Died — Date: 17 Dec 43 — Place: Italy

Cause of Death*: DIED OF WOUNDS

Nature and Date of Report: ITALY CAS LIST 101 (Undated)

By whom made: HQ 1 Cdn Div

Noted G

* Specially state if killed in action, or died from wounds received in action, or from illness due to field operations or to fatigue, privation or exposure while on military duty, or from injury while on military duty.

Burial — Place: Fossa cesia, Italy, Brit. Cemetery — Date: 17 Dec 43

MR396054

By whom reported: O i/c Burials 1 C.B.R.D.

State whether he leaves a Will or not

(a) in Army Book 64: NIL - Paybook not received

(b) as a separate document: Not Known - Effects not received

All private documents and effects received from the front or hospital, as well as A. B. 64, should be examined, and if any will is found it should be at once forwarded to the War Office.

Any report received as to verbal expressions by a deceased officer or soldier of his wishes as to the disposal of his estate should be forwarded to the War Office at once, supported by a certified statement of the person who actually received the information.

In the case of a soldier a duplicate of this report is to be sent to the Paymaster at the Base, together with the deceased's A. B. 64 (after withdrawal of any will from the latter), for transmission to the Paymaster who compiles the soldier's account.

Station and Date: Italy, 18 Jan 44

Signature of Officer in charge of Section Adjutant-General's Office at the Base: [signature] Lieut for/Officer i/c Cdn. Sec GHQ 2nd Ech C.M.F.

Wt. 46939/917 500M. 3/40 M. & S., Ltd. 51-6239

FORM 6

DOMINION BUREAU OF STATISTICS—QUEBEC DEATH TRANSCRIPT

Do not write in this space

1. PLACE OF DEATH — Municipal county: IN THE FIELD (ITALY) — Official name of civil municipality or township: — *Place an X over the word which applies to this municipality or this territory*: City | Town | Village | Parish | Township

Street: — No. — Hospital or Institution:

2. LENGTH OF STAY

(a) In hospital or institution	Years	Months	Days	(b) In municipality where death occurred	Years	Months	Days	(c) In Province	Years	Months	Days	(d) In Canada (if immigrant)	Years	Months	Days

3. NAME OF DECEASED

Surname: CHAPATIS, (*Block letters*)

Given names: Joseph.

4. RESIDENCE

Street: Forfar Street, No. 1222

Official name of civil municipality or township: Montreal,

Municipal county: Province: Quebec.

5. SEX	6. NATIONALITY (Citizenship)	7. RACIAL ORIGIN	8. Single, Married, Widowed or Divorced (*Write the word*)
M.			Married.

9. If married give name of wife or husband of deceased: CHAPATIS, Oliva A.

10. BIRTHPLACE (Province or Country): Quebec.

11. DATE OF BIRTH: October (Month) 27th, (Day) 1919. (Year)

12. AGE OF DECEASED	Years	Months	Days	If less than one day old
	24			....hrs. or....min.

OCCUPATION

13. Trade, profession or kind of work, as **spinner, teamster, office clerk,** etc.: Foundry worker.

14. Kind of industry or business, as **cotton-mill, lumbering, bank,** etc.:

15. Date deceased last worked at this occupation:

16. Total years spent in this occupation:

	17. NAME	18. BIRTHPLACE (Province or Country)
FATHER	CHAPATIS, John.	
MOTHER (Maiden Name)		

19. Place of burial, cremation or removal: Italy.

20. Date of burial: ....19....

21. PLACE OF REGISTRATION OF THIS BURIAL

(a) Name of parish or church:

(b) Civil municipality of:

(c) Municipal county:

(d) Date: (Month) (Day) 19.... (Year)

CONFIDENTIAL MEDICAL CERTIFICATE OF DEATH

22. Date of death: December (Month) 17th, (Day) 19 43. (Year)

23. I HEREBY CERTIFY that I attended deceased from ....19.... to ....19....

and last saw h.... alive on ....19....

24. CAUSE OF DEATH

I **Immediate cause** — Give disease, injury or complication which caused death, **not** the mode of dying, such as heart failure, asphyxia, asthenia, etc.

(a) Died of wounds received in action.

due to

Morbid conditions, if any, giving rise to immediate cause (stated in order proceeding backwards from immediate cause).

(b)

due to

(c)

II **Other morbid conditions** (if important) contributing to death but **not causally related to immediate cause.**

III If a communicable disease is mentioned on this certificate, give

(a) Date of appearance ....19....

(b) Duration of disease ....days

25. If a woman, was there a puerperal condition?

26. Was there a surgical operation? Date of ....19....

State findings: Was there an autopsy?

27. If death was due to external causes (violence) fill in also the following:—

Accident, suicide or homicide: Date ....19....
(State which)

Manner of injury:
(How sustained)

Nature of injury:

Specify whether injury occurred in **industry, in home, or in public place**

Signed ....**M.D.**

Address ....**Date** ....19....

28. Signature of person who fills in the form (curate, coroner, hospital authority, etc.)

J. B. Radine

This signature authorizes the collector to accept this form as authentic.

29. Name of clergyman in charge of Register of Civil Status in which registration of this burial was made.

(Voir l'autre côté pour le français)

for Director of Records, Dept. of National Defence.

OVERSEAS CASUALTY CANADIAN ARMY

FEB 25 1944