

PEPPLER STANLEY 4299

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C.N.S. 2417 DEPARTMENT OF NATIONAL DEFENCE (Naval Service) N.S. 815-9-2417 APPLICATION FOR ENTRY IN THE ROYAL CANADIAN NAVY if to well The Naval Secretary, Department of National Defence, OTTAWA. une (Date) SIR: I hereby make formal application for entry in the Royal Canadian Navy, under a seven years' continuous service engagement as a Ordinary Alaman (Insert rating chosen) I certify that the following particulars are in my own handwriting and are true in every respect: N.S 1. Name (to be given in full in Block Letters) 5TANLEY PEPPLER 2. Date of Birth (Birth Certificate or sworn declaration by parent or guardian must be attached)..... 3. Place of Birth. Town. Province.... O mterio 4. Permanent Place of Residence. No...... Street..... and tate ......, Province. O. mtar Town. Alexander us. 5. Are you a British Subject?..... years 6. How long have you resided in Canada?..... 7. What is your Mother Tongue? English 25/6/40. 8. What other language do you speak?..... me 9. Are you of the White Race?... Alsa 10. Are you Single, Married or a Widower?. 11. How far advanced educationally are you?...... entrene (Certificates of School Authorities must be attached) 12. What practical experience you had? (Details and certificates from employers, trade credentials, etc., must be attached to substantiate employment reported.) caped in Grocery Store for 2 years 13. Do you belong to any Naval, Military, Air or Police Force?..... 14. If so, give details..... 15. Have you ever served in such forces?...... 16. If so, give dates and details. 17. Have you ever been discharged from His Majesty's Forces as medically unfit?...... 1.00 18. Have you ever offered to serve in His Majesty's Forces and been rejected?..... Why?..... 20. What is your weight?..... 21. Have you ever had fits?..... 22. Do you suffer from any deformity?...... 23. Have you suffered the loss of any fingers, toes, etc.?.. 105 24. Do you suffer from any disease?. 1.00 25. Do you wear glasses?...... 26. Are you subject to any disability which might cause your rejection? 27. Give details. 28. Are you willing to be vaccinated and inoculated as considered necessary by the appropriate authorities? lens. aus. Signature of Witness 10 10 Signature of Applicant CERTIFICATE TO BE SIGNED BY THE PARENT OR GUARDIAN OF CANDIDATES UNDER 21 YEARS OLD I agree to refund to the Department of National Defence the expenses incurred by that Department for transportation to a Naval Base of the above applicant, should he, on arrival at such Base, fail to enrol for seven years' continuous Naval Service for reasons which in the opinion of the Department are within his own control. Signed and Sealed at ..... ....., 19. March, in the presence of this ..... une Signature of Parent or Guardian ple Lama. MAR. Signature of Witness CERTIFICATE TO BE SIGNED BY CANDIDATES OVER 21 YEARS OF AGE I agree to refund to the Department of National Defence the expenses incurred by that Department for my transportation to a Naval Base, should I, on arrival at such Base, fail to enrol for seven years' continuous Naval Service for reasons which in the opinion of the Department are within my own control. June presence of. Signature of Witness Signature of Candidate

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Declaration and Certificate for Men newly entered and Men who have been out of the Service since the expiration of their previous C. S. Engagement I, -Stanley PEPPLER, do solemnly declare that to the best of my knowledge with belief the answers to the questions overleaf are true, and I do hereby agree to serve honestly and faithfully in the Naval and bear true allegiance to His Majesty. As witness my hand this \_\_\_\_\_35th \_\_\_\_\_day of \_\_\_\_\_\_19.41. Z......Man's Signature in full Witness to Signature P. Land Writer. R.C.N.V.R. { Signature of a Commissioned Officer of the Naval Service Lieutenant, This is to certify that we have examined the person named on the other side hereof as to his fitness for the Naval Service of Canada, and we find as follows: He is of perfectly sound and healthy constitution, free from all physical malformation, active and intelligent; and we consider him in all respects fit for His Majesty's Service. COMMANDER Commanding Officer SURG. COMMANDER. Medical Officer ertificate and Declaration for Boys This is to certify that we have examined the boy named on the other side hereof as to his fitness for the Naval Service of Canada, and we find as follows:—He is a well grown, stout, intelligent lad, of perfectly sound and healthy constitution, and free from all physical malformation, and we consider him in all respects fit for His Majesty's Service. The consent of his parents or guardian has been obtained in writing, and they are willing and desirous that the boy should be entered for ..... to whatever period may be necessary till he attains that age Lieutenant I declare that to the best of my knowledge or belief the answers to the questions on the other side of this form are ......Medical Officer true and that I am not indentured as an apprentice. be necessary till I attain that age. And I do sincerely promise and swear (or solemnly declare) that I will be faithful and bear true allegiance to His Majesty. ......Boy's Signature in full Witness to Signature..... Signature of a Commissioned Officer of the Naval Service III.-Re-engagement for Continuous Service To be executed by men who have not been out of the Service since the expiration of their first engagement The particulars indicated on the other side are also required when this Form is used.\_\_ I,...., now serving as a provided my services should be so long required. Witness..... .....Commanding Officer Insert "for the term of (number in words) years," or "to complete (number) years for pension" or "until I attain the age o, Insert the date from which the engagement actually commences. The document conveying the consent to be attached to this paper. (N.B.—Not required in the case of youths over 17 years of age.) To be written in words. years." To be written in words. \*\* Insert as follows:--"Of (number) years," or "to complete time for pension," or "until I attain the age of years," as the case may be. It Insert the date of commencement of the re-engagement, which must either be coincident with, or (when the re-engagement is ante-dated) earlier than the date of execution. 55

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DECEASED 13 September 194 DEPARTMENT OF VETERANS AF		ARDS	AAVY	D.D. WAR SERVICE RECORDS
PEPPLER Stanley		N-4299	A.B.	FILE NO.
SURNAME (IN BLOCK LETTERS)	CHRISTIAN NAMES	REG. No.	RANK ON DISCHARGE	C,A.S.F. UNIT
WAR SERVICE BADGE (CLASS) No.	DATE D	ESPATCHED:		
ADDRESS:				
CAMPAIGN MEDALS	REG	STRATION NUM	BER AN DATE	DESPATCHED
1939-45 Star Atlantic Star				
C.V.S.M. & Clasp War Medal				
		8307	/4	5-1-50
DVA 806	(T	HE REVERSE TO E	E USED FOR ESTA	TE PURPOSES)

RC	IN TOTTAWA	" Apr/43. MEMORIALS DECEASED PERSONNEL RE	GISTRATION NO. DATE OF DESPATCH
(1)	MEDALS PERSON ENTITLED TO	Mrs. A.L. Peppler - Mother	(1)
	ADDRESS:	Alma St., Listowel, Ont.	
(2)	MEMORIAL CRC WIDOW	<u>955</u>	(2)
	ADDRESS:		
(3)		oss	
_	MOTHER	Mrs. Alberta Peppler	(3) 9 November 1942
_	ADDRESS:	Alma Street LISTOWEL, Ontario	MEMORIAL BAR
			DATE DESP
			REGN. NO. 2/14

## MORANDUM FOR

Mrs. Alberta Peppler,

Alma Street,

LISTOWEL, Ontario.

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:-

DEPARTMENT OF NATIONAL DEFENCE OTTAWA, ONT.

October 8,

.....

.....

H.Q. N.S. 62-P-326 FD. 139

For the purpose of record and in the event of there being any balance of pay, medals or memorials available for distribution (according to law) on account of the late

PEPPLER, Stanley, A.B.

0.N. 4299, R. C. N.

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.

Mulech ...

(H. R. Wade) Lt.-Cdr., RCNVR for(L. M. Firth) Lt.-Col., Administrator of Estates.



**M.F.W. 77** 5M—9-41 (1669) H.Q. 1772-39-972 P. 64

### 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.

of			INFORMANT'S ST	ATEMEN	T
Degrees of Relationship	RELAT required to be		NAME IN FULL of any Relative, if any, in each degree inquired for	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 De	, , eceased			
2	Children of the I dates of their I	Deceased and Births	OTTAWA. ONT.		
3	Father of the De	ceased	Wm Henry Peppler	34	Secenced. apr. 19. 1
4	Mother of the D	eceased	mrs. alberta h. Peppler	51	histowel, Out
5	Brothers of the Deceased	Full Blood	Stewart WM. g. Peppler. may L. Peppler	27 23	Kitchener Out Coursean army Overseas
		Half Blood			None and the
6	Sisters of the Deceased	Full Blood	slige Luella Reppler	19	histowel, Oct.
		Half Blood			- Million
7	Names of brothers of the full or the ha ceased, who are dead of each.	lf blood) of the De-	Names and ages of their children		Address of their children
	102 160 169 3 				

#### ONLY IF NO RELATIVES IN THE DEGREES ABOVE ARE NOW LIVING, THE FOLLOWING PARTICULARS SHOULD BE GIVEN

,		NAMES OF THOSE LIVING	Age	ADDRESS IN FULL
8	Grand-Parents of the Deceased	-		
9	Uncles and Aunts by blood of the Deceased (not Uncles and Aunts by marriage)		Age	

FULL PARTICULARS AS TO IDENTITY

10 What is the full name of the deceased? Stanley John Teppler Lau. 27. 1922. 11 Give the month and year of his birth. 12 Where and when were his parents married? enover out. 13 If deceased was married, state place and date of marriage. 14 Did he leave a Will? If so, a copy should be attached hereto. Not to my knowledge. yes. Cauadian Ban of Commerce - hist 15 Did he leave a bank account? If so, give full particulars. Is there any other estate which will necessitate application being made for Probate of the Will or Letters of Administration of the estate? 16 Lestowel, Out. 17 State your own postal address in full.

#### PARTICULARS OF DOMICILE

18	Where was deceased born?	Elma Dup, Co. Perth Ontario.
19	State, in order, the Province (or State) and country in which the deceased resided and the period of time in each, and in which last.	Ontario Canada
20	What was the nature of his employment?	blenk - The atlantic & Tacific Dea Co.
21	Did he own the premises in which he lived? If so, where?	
22	Did he ever state verbally, or in writing, where he intended to make his permanent home?	

#### OTHER PARTICULARS

Did the deceased after enlistment incur any debts for:—(a) His own separate board and lodging while on service. my knowledge . 23 not to (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.  $\mathbf{24}$ Have you or any other relative paid the funeral expenses or any part thereof 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, 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 arguing the service extent of the degreesed. against the service estate of the deceased.)

DECLARATION \*Insert degree of relationship for example, "Widow," "Father," "Brother," etc I hereby declare that the foregoing particulars are correct, and a true and complete statement of all the relatives that the deceased ever had in the degrees inquired for ; and that I am the \* mathew of the deceased. N.B. To be signed in full in the presence of a Clergyman, Priest, Local Magistrate, Commissioner or Notary Public. Mrs. alberta L. Peppler Signature of Informant CERTIFICATE I hereby certify that, to the best of my knowledge and belief. mes acherta plen { Name of Informant } is the \* mather of the Deceased \*See above above described, and I believe the above Declaration and the Statement of Relatives made by the Informant and signed in my presence to be complete and correct. Dated at Listowel Out, this 14 day of October 1942 Signature of Clergyman, Priest, Magistrate, Commissioner or Notary Public 1 eechaar Qualification. Telese Address P.O. Bay 338. 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 enquired after is stated in its proper place in the Statement opposite. USE SPACE BELOW FOR ANY ADDITIONAL REMARKS YOU MAY WISH TO MAKE

	OCCUPATION	NAL HISTORY FORM 62-P.	32
S FORM IS TO BE COMPLETED FO	R FACH MEMBER OF THE ARMEI	D FORCES. THE INFORMATION SOUGHT IS FOR THE USE OF GENERAL ADVISO	RY COM-
MITTEE ON DEMOBILIZATION A INDUSTRIAL LIFE THE MEMBER HELP TO THE COMMITTEE.	ND REHABILITATION, A COMMIT	D FORCES. THE INFORMATION SOUGHT IS FOR THE USE OF GENERAL ADVISO TEE SET UP BY THE GOVERNMENT OF CANADA TO STUDY PLANS FOR ESTABLIS FER DISCHARGE. ACCURACY AND COMPLETENESS IN ANSWERING WILL BE O	F MUCH
	LY THE INSTRUCTIONS G	AIVEN ON THE INSIDE OF COVER BEFORE COMPLETING FORM	м
	Section A-GENI	ERAL INFORMATION	PLEASE LEAVE BLANK
(a) Print name in fullPEP	PLER, Stanley J	(b) Reg'l. No.	BLANK
(a) Arm of serviceNAV	AL (b) Unit	R.C.N. (c) Rank Ord. Sea. (c) Place of residence Listowel, Ont.	M
(a) Date of birth. 27 Jan	any dependents?	(b) Date of enlistment. 24 Mch. 1941	1
(a) Place of enlistment	Section B-EDUCA	ATION AND TRAINING	
(a) State age on finally leaving school15	VPS or colleg	e you attending school ge up to the time of enlistment?	
State definitely highest stand	ind reached at bubble, technic	al or high school School", "Junior tc.)	
Matriculation", or "4 years te If you attended a university,	chnical course in printing", et give name of		
apprenticeship?	occupation?	(c) Did you finish it, how long finish it?	
		(b) What languages do you read well? English	
(a) State whether you were	n C-EMPLOYMENT (	CONDITION AT TIME OF ENLISTMENT	-
WORKING or NOT WORK- ING at time of enlistment.		(b) At time of en- listment of what	
(Enter here only "Work- ing" or "Not Working",	*	trade union or professional society	1
as case may be; particu- lars are asked for below)	Working	were you a member? None	1) 19
Section D-PARTIC		THOSE WHO WERE UNEMPLOYED AT TIME	
		HO ANSWER "NOT WORKING" IN QUESTION 10 (a)	
		school?	1
(a) If answer to 11 be "Yes state exact trade or occupation	00	(b) State how long you had worked at this	F
		trade or occupation	
	the location askest state		8
		Address	
Nature of employer's busine	ss (for instance, "farmer", o	or "building	1
contractor, or boot ractory	or "iron toundry", or rela	ail store", etc.)	10 7
(a) If your last employment	t was	or "building ail store", etc.)	2
<ul> <li>(a) If your last employment in a business of your own, nature and address of bus</li> </ul>	t was state siness	(b) Date of dis- continuing it	2
(a) If your last employment in a business of your own, nature and address of bus Section E-PARTIC	state siness CULARS CONCERNING OF ENL	(b) Date of dis- continuing it G THOSE WHO WERE <u>EMPLOYED</u> AT TIME LISTMENT	2
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Copy To VWD ES jul 4 1941

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1						R RESER			<b>J</b>					
Note-7	This Certifi	icate is to b	e completed by the Exa	mining Medic	al Officer and	d forwarded	to the Naval	Secretary, I	Departmer	nt of Nat	ional De	efence, O	ttawa.	
			ersigned, have											•••••
one c	didate I belie Certific out if inapp	late gr	try asor to be *{in al unfit ven below in t • Delete one.	for His my pres	ts fit fo s Majes ence.	or His N sty's Sei	lajesty' vice for	s Servio r the re	ce. ason s	/		}E	le has s	igned
Stan	This dards.	s exam	ination has b	een ma	de in a	ccordan	ce with	the cu	irrent			/	1	edical
Age {Years Months	Weight without Clothes	Height with Bare Feet	Generai Development	Chest Girth	Vision by— (i) Snellen's Types (ii) Colour Vision	Vaccinated or revac- cinated for Small Pox (Date)	Lungs, Heart, etc.	Abdomen, Hernia, etc.	Limbs and Joints	Skin	Ears and Hearing	Testes, Varicocele, etc.	Mouth, Teeth (No. deficient and No. defective, if any), Nose, Tonsils, etc.	Anus, Hæmorrhoids, etc.
<u>(a)</u>	(b) 1bs.	(c) ft. ins.	(d)	(e) inches (a) maximum	(f) right eye	(g)	(ħ)	(i)	(k)	(1)	(m)	(n)	(0)	(p)
9-2	157	5 92	"Good.	37 (b) minimum 34/2 (c) mean	Icft eve	June	mal	amak	lovel	Innal	Jamel	nord	your	James
Mea	151	scon	5 glances	36	N .	<i>u</i> .	41	d	41	"	1			U,
fif cold degr	our vision i ree of colou	hot poma	l by Incihara test, to be indicated.										0 	
X-ra	y Appro	aken. oved. trul.	mar 1.	· ·	the appropr	iate notation,	and any rem	arks necessa	ry.		*			
Servi	e, Dis ce. 🏼 🎗	charge	ertify that to from the Ea willing to und	rs, or a	t of my ny othe	belief I er disea	have r se likel	never su y to re	ffered nder 1	from me u	nfit f	or H	is Maje	esty's
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			Candidate is sui idate is the su											
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				IF REJE insert 1 UNI in block	FIT				X					
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	Na	val - Military - Air Force	
Name		XXXXXXXXXX XXXXXXXXXXXXXXXXXXXXXXXXXXX	
	Surname	Christian Names Stanley 4299	
	: tank	H.M.C.B. Unitawa" Date of	Death
		AMOUNT L. P. C. \$	
Date		Other Credits 102.01	
	Narch 24, 1943.	Total	
SHARE	RELATIONSHIP	NAME AND ADDRESS 76.51	AMOUNT
part	mother	Nrs. Alberta L. Peppler,	51.0
balance	brother	Listowel, Ont. () as nest of kin entitled) () for benefit of 1 minor) Stewart W. J. Peppler, Kitchener, Ont.	25.5
		1943-44	
		AUTIONITY DIVERTINA OR ODITANCE	
		F. DIV F. F. V. I.E. PRI DA OB OBJ. AMOU 99999 831 80 50 50 700 26	NT Q
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AUDITED FOR PAYMENT

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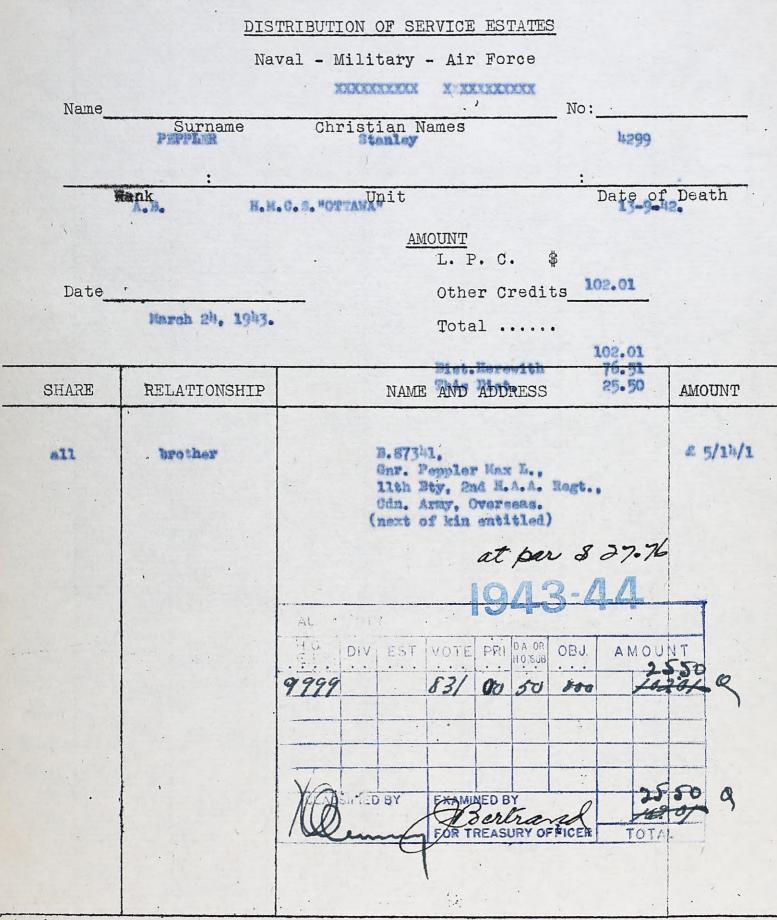
L.M. Firth) Lt.-Col., Administrator of Estates.

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E.C. per for Chief Treasury Officer

. 8.



Distribution approved and authorized

AUDITED FOR PAYMENT

Administrator of Estates.

E Colleger per for chief Treas easury Officer

3

# M 29653

JUN - G 1940 MLS. 62-21-57

Listowel, Ontario June 4, 1940

Dept. Nat. Defence Royal Canadian Navy % Naval Secretary Ottawa, Ontario

Dear Sir:

I am interested in joining the Royal Canadian Navy, and am writing this letter to secure information regarding it.

What qualifications as to education does one require, a Junior Matriculation or High School Entrance? Also what are the various positions which one may secure in the Navy?

If there are any other particulars regarding enlistment, could you kindly let me know at your earliest convenience.

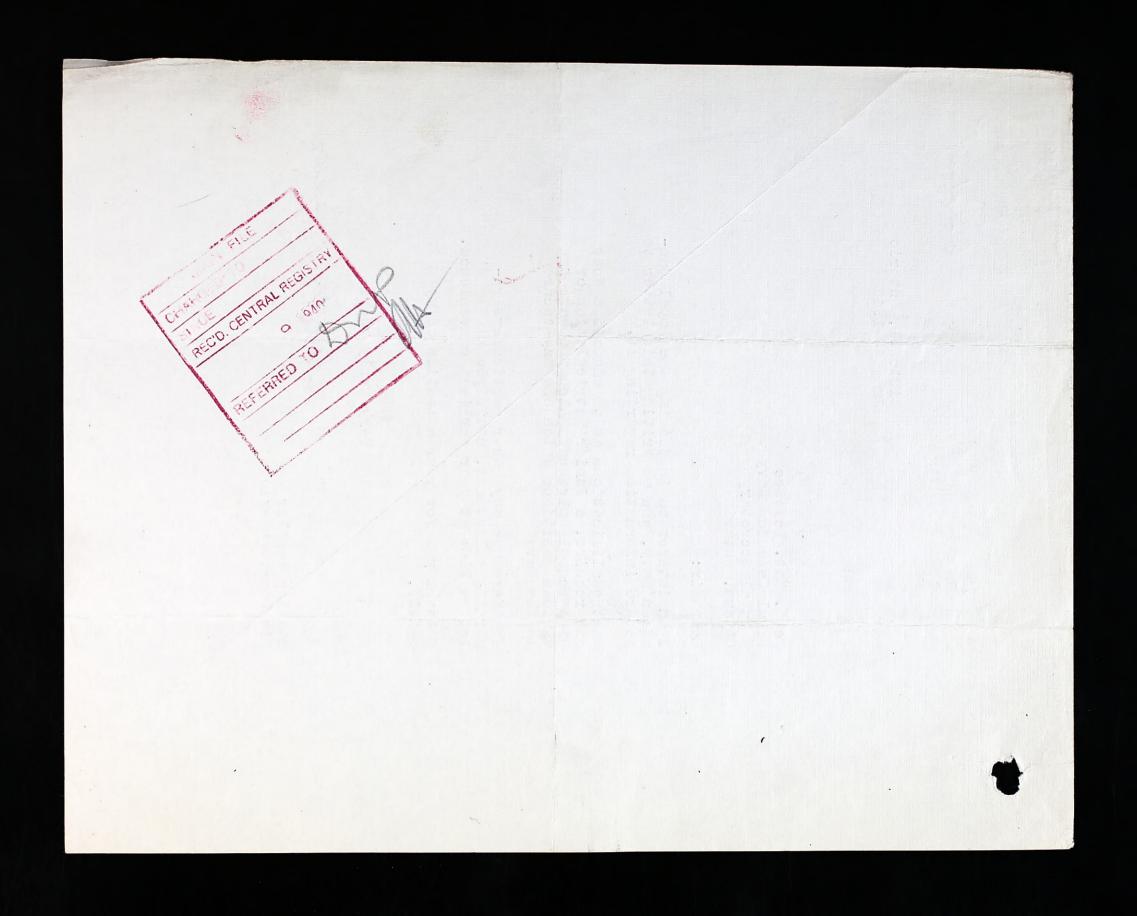
I thank you for your attention on my behalf,

Very truly yours,

Stanley Repper.

Stanley Peppler Listowel, Ontario

any and



88031 -Listowel Ont Rec 27/40 no. n. S. 62-21-4 "P" DEC 29 1940 CANADA FD.211 Sir. On June 10 that applied for inlitment in The Royal Conadian navy al an Cardinary Seaman and on June 26 that recieved a letter from you stating that my application had been accepted and that I would be called when my turn came, and a vacancy occurs. Since then, a hipelong friend of mine, Menneth Weath of histourd has also applied and has been

accepted as a stoker second and has been told that he will be Sent to naval Fraining Station Esquimalt British Columbia. I would certainly appreciate it greatly and al'm sure my chum will if you would change my application to that of a Stoker second classand that you would do all in your power to at to enable us togo to-gether. Thanking you in advance remain PNP 22,6,40 Stanley Peppler,



N.S.62-P-326



#### 19th September, 1942.

Dear Madam:

It is with deep regret that I must confirm the telegram of the 18th September from the Minister of National Defence for Naval Services informing you that your son, Stanley Peppler, Able Seaman, O.N. 4299, R.C.N., is missing believed killed in action.

It is in the public interest that the name of his ship and the fact that she has been in action should not find its way to the enemy until such time as it is decided to publish the fact in a Naval Casualty List. It is therefore requested that this news, other than the fact that your son is missing, may be treated as confidential.

Please allow me to express sincere sympathy with you in your bereavement on behalf of the Minister of National Defence for Naval Services, Chief of the Naval Staff, and the Officers and men of the Royal Canadian Navy, the high traditions of which your son has helped to maintain.

Yours sincerely,

Sim

Deputy Secretary, Naval Board.

Mrs. Alberta Peppler, Alma Street, LISTOWEL, Ont.