

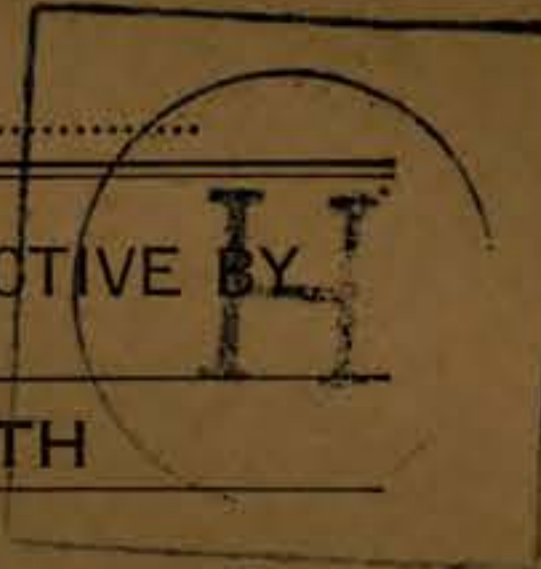
C.E.F. REGIMENTAL DOCUMENTS

NAME **BERTHIAUME ARMAND**

REGT. No. **441450**

UNIT **53 BM**

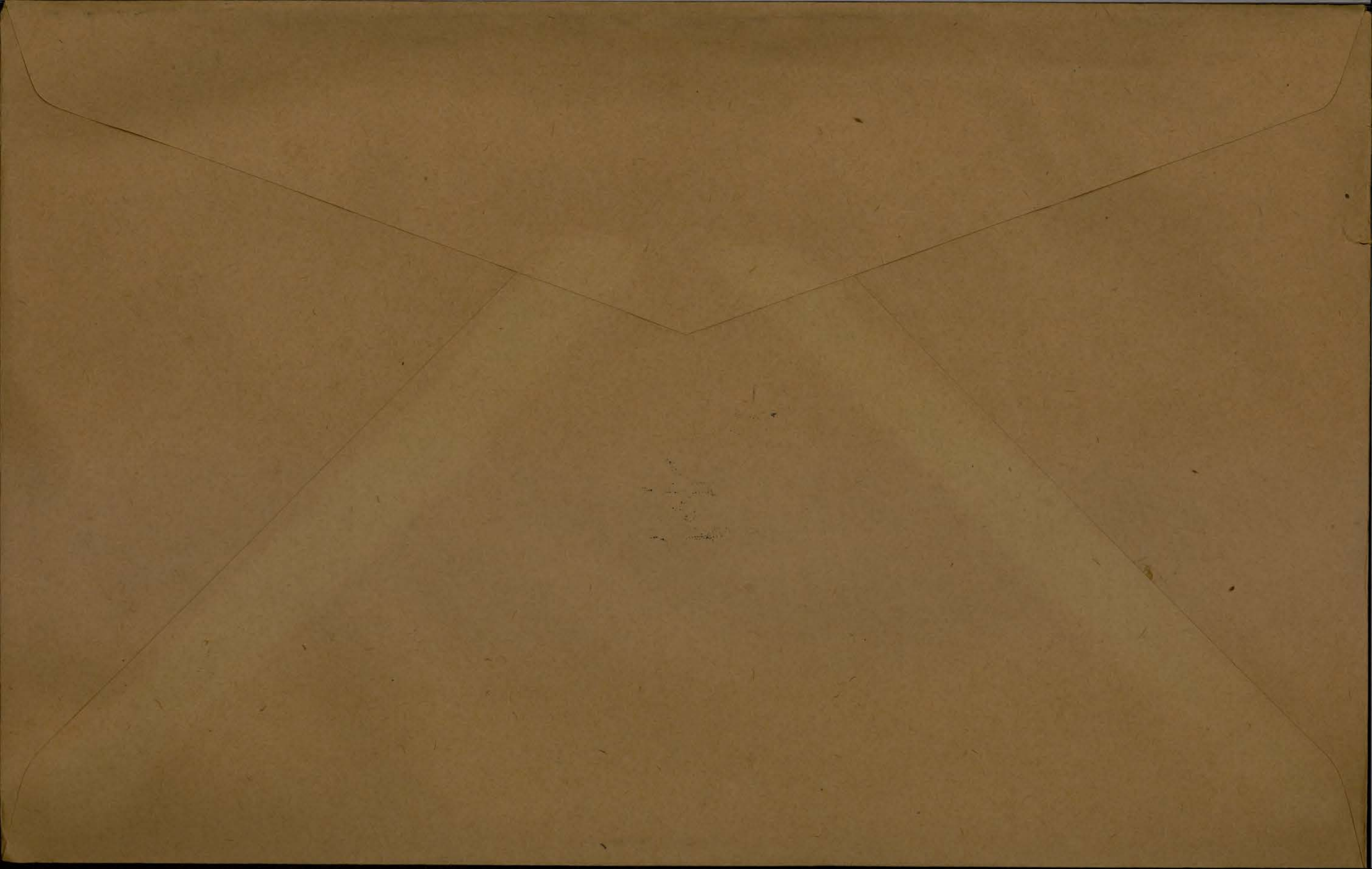
H. Q. FILE No. **16603**



CONTENTS	DATE RECEIVED	TO WHOM FORWARDED	DATE FORWARDED	M. F. W. 2505 REFERENCE	NON-EFFECTIVE BY
ATTESTATION PAPER (M.F.W. 23, 133 or 51)					DEATH
CASUALTY FORM (M.F.W. 54 or A.F.B. 103)					CATEGORY
TRAINING HISTORY SHEET (M.F.W. 113)		KILLED IN ACTION	26-49-16		
FIELD CONDUCT SHEET (M.F.W. 178 or A.F.B. 122)					
REGT. CONDUCT SHEET (M.B.W. 263 or A.F.B. 120)					
COMPANY CONDUCT SHEET (M.F.B. 263A or A.F.B. 121)					
MEDICAL HISTORY SHEET (M.F.B. 313 or A.F.B. 173)					DISCHARGE
DENTAL HISTORY SHEET (M.F.B. 465)					CATEGORY
MEDICAL REPORT (M.F.B. 227 or A.F.B. 179)					
MEDICAL EXAMINATION (M.F.W. 129)					
TRANSFER CLOTHING STATEMENT (M.F.W. 97 or D.O.S. 2)					
PROCEEDINGS, COURT OF INQUIRY (M.F.B. 303 or A.F.A. 2)					
DECLARATION, COURT OF INQUIRY (M.F.B. 259 or A.F.B. 115)					DESERTION
LAST PAY CERTIFICATE (M.F.W. 44)					
PROCEEDINGS ON DISCHARGE (M.F.W. 218 or A.F.B. 268)					
PARTICULARS OF CHARACTER (A.F.W. 3226)					
COPY OF PARCHMENT DISCHARGE CERTIFICATE (M.F.W. 39A)					
CARDS					
PAY-SHEETS					









ATTESTATION PAPER.

No. *441, 450*

Folio. ORIGINAL

CANADIAN OVER-SEAS EXPEDITIONARY FORCE.

QUESTIONS TO BE PUT BEFORE ATTESTATION. (ANSWERS.)

1. What is your name? *Armand Berthiaume*
2. In what Town, Township or Parish, and in what Country were you born? *Hammerton (Quebec)*
3. What is the name of your next-of-kin? *Mrs. Absara Berthiaume (MOTHER)*
4. What is the address of your next-of-kin? *Hammerton ~~Quebec~~ Quebec*
5. What is the date of your birth? *26 April 1895*
6. What is your Trade or Calling? *Farmer*
7. Are you married? *no*
8. Are you willing to be vaccinated or re-vaccinated? *no*
9. Do you now belong to the Active Militia? *no*
10. Have you ever served in any Military Force? *no*  
If so, state particulars of former Service.
11. Do you understand the nature and terms of your engagement? *yes*
12. Are you willing to be attested to serve in the }  
CANADIAN OVER-SEAS EXPEDITIONARY FORCE? } *yes*

*Armand Berthiaume* (Signature of Man.)  
*J. Healey* (Signature of Witness.)

DECLARATION TO BE MADE BY MAN ON ATTESTATION.

I, *Armand Berthiaume*, do solemnly declare that the above answers made by me to the above questions 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.

Date *Sept 30th* 191*5* *Armand Berthiaume* (Signature of Recruit)  
*J. Healey* (Signature of Witness)

OATH TO BE TAKEN BY MAN ON ATTESTATION.

I, *Armand Berthiaume*, 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.

Date *Sept 30th* 191*5* *Armand Berthiaume* (Signature of Recruit)  
*J. Healey* (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 *Winnipeg* this *30th* day of *October* 191*5*.

*W.P. Cottingham* (Signature of Justice) *a commissioner in B.R. etc*

I certify that the above is a true copy of the Attestation of the above-named Recruit.

(Approving Officer)



*Berthiaume*

Description of Armond Berthiaume on Enlistment.

Apparent Age 19 years ..... 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 ..... 56 ft. 6 ins.

Chest measurement { Girth when fully expanded ..... 33 ins.  
 Range of expansion ..... 3 ins.

Complexion ..... Dark

Eyes ..... Brown

Hair ..... Dark

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

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 ..... Sept 30 ..... 1915 ..... [Signature]

Place ..... [Signature] .....  
 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.

Armond Berthiaume ..... 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.

[Signature] ..... (Signature of Officer)

Date ..... Sept 30 ..... 1915.



D

# ORIGINAL MEDICAL HISTORY SHEET.

Surname Berthou Berthoume Christian Name Armand

Examined { on 30th day of Sept 1915  
 at Winnipeg  
 Birthplace { City or Town Hammondville  
 County Quebec

Approved by Alexis Theriault  
 Rank Capt Amb M.O.

Apparent age 19 years  
 Trade or occupation Farmer  
 Height 5 Feet 6 Inches  
 Weight 131 Lbs.  
 Chest measurement { Minimum 33 inches  
 Maximum expansion 3 inches  
 Physical development Normal  
 Small-Pox Marks none

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

Vaccination Marks { Arm Right Left  
 Number 1

Date	Result	VACCINATIONS,
<u>21/3/16</u>	<u>+</u>	<u>A.</u>
		M.O.
		M.O.
		M.O.

When Vaccinated last Infancy 1915  
 (a) Marks indicating congenital peculiarities or previous disease Nil

Date	Result	ANTI-TYPHOID INOCULATIONS, ETC.
<u>2nd Feb</u>	<u>+</u>	<u>A</u>
<u>Oct 14</u>	<u>+</u>	<u>A</u>
<u>25/11/15</u>	<u>+</u>	<u>A</u>
		M.O.
		M.O.
		M.O.

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

Enlisted on 30th day of September 1915 at Winnipeg

	CORPS.	REG'TL NUMBER.	HABITS.	DATE.
Joined on enlistment	<u>53rd Bata</u>	<u>441,450</u>	<u>Temperate</u>	<u>30th Sept 1915</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.







VES

R-122

Rank \_\_\_\_\_ Name **BERTHIAUME Armand** Reg'l No. **441450**  
 Unit **50th Bn** If in perm. Corps, }  
 What Unit? }

Place and Date of Enlistment **Winnipeg, 30th Sept. 1915.** Married or Single **Single**  
 Place of Birth **Hammonford, Quebec.**

*M. Berthiaume*  
*50th Bn*

Name and Address, Next-of-Kin **M<sup>rs</sup> Alvina Berthiaume**  
**Hammonford, Quebec, Canada.**

Assigned Pay Monthly \$ \_\_\_\_\_ Payable to \_\_\_\_\_  
 Relationship **Mother.**

Separation Allowance \$ \_\_\_\_\_ Payable to \_\_\_\_\_  
 Relationship \_\_\_\_\_

Discharge, Date and Place \_\_\_\_\_ Reason \_\_\_\_\_ Character \_\_\_\_\_

*M-T*  
*18-12-20*  
*R.P.R.*

Report.		Record of promotions, reductions, transfers, casualties, etc., during active service. The authority to be quoted in each case.	Place.	Date.	REMARKS. Taken from Official Documents.
Date.	From whom received.				
		<i>Arrived in England</i>	<i>A.S. Empress of Britain</i>	<i>9 APR 1916</i>	
		<i>Embarked for France.</i>		<i>8 JUN 1916</i>	
<i>30.6.16</i>	<i>of 4th</i>	<i>Taken on strike</i>	<i>Xela</i>	<i>9-6-16</i>	<i>Part II 026</i>
<i>31.10.16</i>	<i>M<sup>rs</sup> Bess</i>	<i>Rept. from Base Wounded</i>	<i>Home</i>	<i>26.9.16</i>	<i>C.A. A496</i>
<i>30-11-16</i>	<i>"</i>	<i>Wounded &amp; missing</i>	<i>"</i>	<i>"</i>	<i>Part II 079 &amp; C.A. 533 d 12-12-16</i>
<i>3-11-17</i>	<i>"</i>	<i>Now Killed in Action</i>	<i>"</i>	<i>26.9.16</i>	<i>C.L. 624</i>
<i>29.3.17</i>	<i>"</i>	<i>Do Do</i>	<i>"</i>	<i>"</i>	<i>Pto D.O. 30</i>







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

CERTIFIED CORRECT.  
Canadian Record Office,  
Westminster House,  
7, Millbank, S.W.  
H. Q. 1772-39-920.

# Casualty Form—Active Service.

Unit, Regiment or Corps 53rd O.B. 68 F.

Regimental No. 441450 Rank Private Name Berthiaume Armand  
C. E. F.

Enlisted (a) 30/9/15 Terms of Service (a) Duration of War Service reckons from (a) Date of Enlistment 30/9/15

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

Extended \_\_\_\_\_ Re-engaged \_\_\_\_\_ Qualification (b) Senior Farmer

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

Embarked Canada Halifax 29.3.16  
 Disembarked England Liverpool 9.4.16  
 Proceeded Overseas for service with \_\_\_\_\_ Battalion  
 June 8th. 1916.  
 O.C. Canadian Infantry  
 Transferred to \_\_\_\_\_

9.6.16.	C.B.D.	On Strength 14th Can Bn	Havre	9.6.16.	N.R.	24.	14.6.16.
do	do	Left for Unit.	Field.	10.6.16.	do		
16.6.16.	Unit	Joined.	do	11.6.16.	B 213.		
21. 8. 16	do	1 camp I.P. no 2, 17/16, for "I properly dressed on parade" 15 <sup>th</sup> /16.	do	17. 8. 16	Subq.	37.	1. 9. 16
24. 10. 16	Unit	Wounded	Leid	26. 9. 16	Wire kabb. K.A. T-7867.		24. 10. 16
20. 11. 16	Unit	Wounded & Missing	do	do	K.A. 121/998.		79. 30 <sup>th</sup> /16.

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



Report		Record of promotions, reductions, transfers, casualties, etc., during active service, as reported on Army Form B 213, Army Form A. 36, or in other official documents. The authority to be quoted in each case.	Place	Date	Remarks taken from Army Form B. 213, Army Form A. 36, or other official documents.
Date	From whom received				
					Lieut. for Lt. Col A. a. G. Can. Section.
29.3.17	14 <sup>th</sup> Bn	Now repled. Killed in action	Field	26 <sup>9</sup> / <sub>16</sub>	Pt II 00.30 Lieut. for Colonel i/c Records, on file



Surname

Christian Name or Names

Reg. No.

*Boothiaume*

*A.*

*441.450*

Rank

Unit

Co.

Troop

Batty

*86*

*14 Batt.*

Hospital

Date of Admission

Transferred

Hosp.

Hosp.

Hosp.

Hosp.

Diagnosis

(1) Later Diagnosis (if changed)

(2)

(3)

Additional Diagnosis: if more than one state present

*Killed in action.  
26-9-16*

DISPOSITION

Date

*C.L. 31-10-16 - Q498*

*12.12.16 app 33*

*C.L. 3-4-17 Q624*

REMARKS

*"Wounded" rep'd late 26-9-16  
Pres rep'd. but now not  
missing 26.9.16  
now killed in action.*

**A.M.D. 2 DEPT.**

**Beh. of D.G.M.S. O.M.F.C. London.**



# EPITOME OF HOSPITAL TREATMENT.

Hospital

Adm

1.

2.

3.

4.

5.

6.

7.



E.M. ~~W~~ <sup>in</sup> ~~1916~~

Number 441450 Rank Plon

(19) ✓

Surname BERTHIAUME

Christian Name Armand

Units 14<sup>th</sup> ~~th~~ ~~band~~ Theatre of War France

Date of Service 9/6/16

Remarks (M) Mrs A. Berthiaume,

Latest Address Hammingford,

Que.

Roll No. B. Page 19233.



## GRATUITY (IMPERIAL)

CHRISTIAN NAME

SURNAME

REG. No.

SCHEDULE No.

LINE No.

UNIT RETIRED OR DISCHARGED FROM

PLACE OF RETIREMENT OR DISCHARGE

DATE RECEIVED FROM OTTAWA

IMPERIAL DEPOT No.

DATE REMOVED FROM REG. DEPOT.

DATE FORWARDED TO OTTAWA

DEC 14 1922  
2726155



No. 441,450 RANK *Pte*

NAME *Berthiaume Armand*

T. C. S. 30-9-15  
20.0.963 of 10-15

UNIT *53<sup>rd</sup> Battalion C. E. F.*

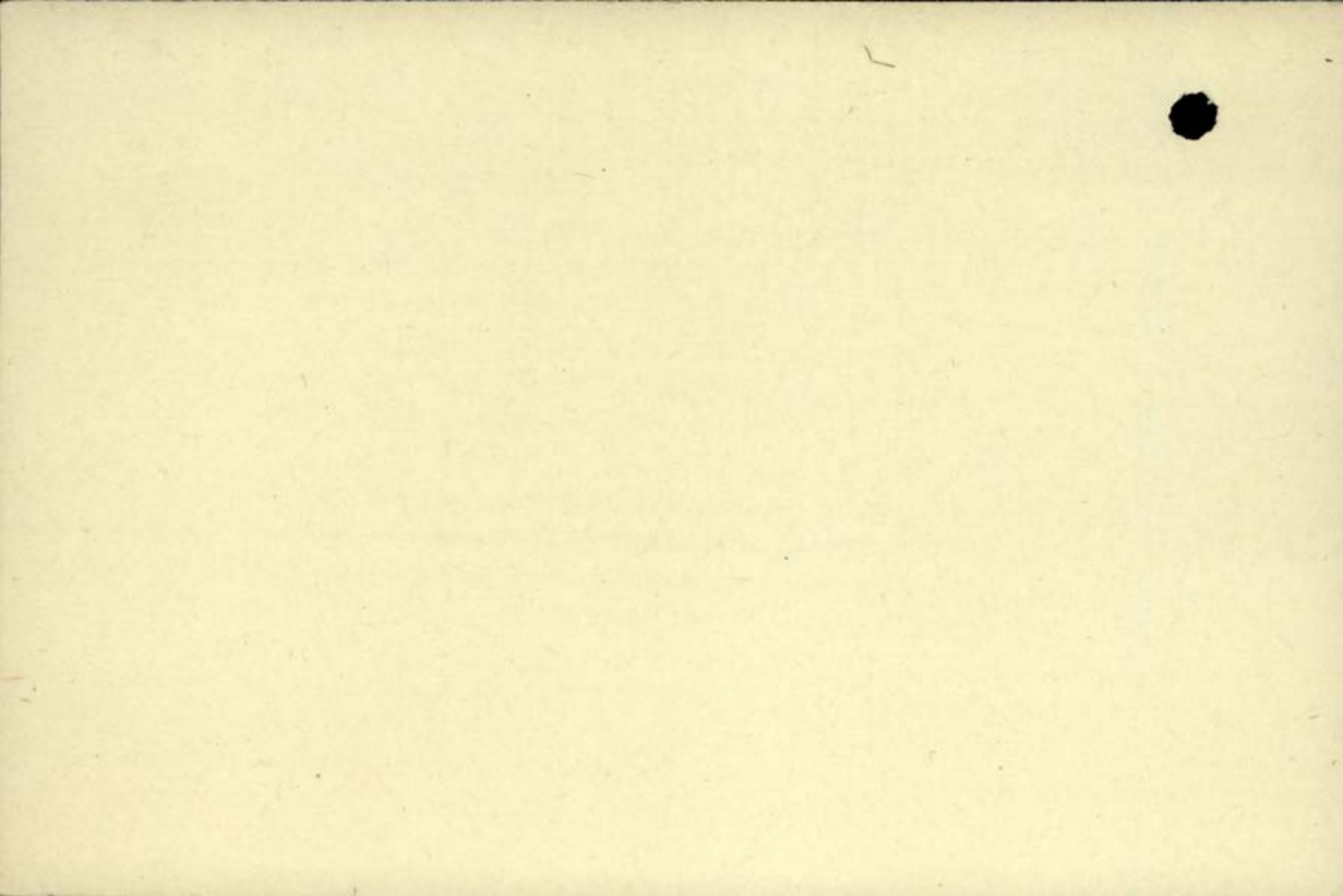
M. D. 10

PAID FROM	PAID TO	SIG. OR REC'T	PROMOTIONS, TRANSFERS, DISCHARGES, ETC.	
			PARTICULARS	AUTHORITY
<i>1915</i>	<i>1915</i>			
<i>Oct 1</i>	<i>Oct 31</i>	<i>V</i>		
	<i>Nov</i>	<i>V</i>		
	<i>Dec</i>	<i>V</i>		
<i>1916</i>	<i>1916</i>			
	<i>Jan</i>	<i>V</i>		
	<i>Feb</i>	<i>V</i>		
	<i>Mar.</i>	<i>V</i>		
	<i>April.</i>	<i>A.</i>		

UNIT SAILED

MAR 29 1916







LIST No

HOSPITAL

DATE OF  
ADMISSION

REMARKS

A 498

Rept from the Base

26-9-16

w.d. not Staked

Q

A 533

Pres rept wounded now

wounded and

missing 26-9-16

A 624

Pres rept wounded and

missing now

killed in action

26-9-16



REGT'L NO 441450

NAM Berthault Armand

H. Q. FILE No. 649-

RANK AND CORPS The 1st Ch Bn 20cm

FOLLOWS  
NO. 53rd Bn

CABLE

NATURE OF CASUALTY

FOLLOWS

No.	DATE	NATURE OF CASUALTY
03905	31-10-16	Reported wounded Sept 26th 1916 ✓
06192	11-12-16	Prev rept wounded now rept wounded and missing Sept 26th ✓
M11.07	2-4-17	Prev. rep wounded and missing, now rep killed in action Sept 26th 1916 ✓
WFB. 2090a	Rouen-6-7-17	Killed in action, 26-9-16. (rec'd 30-8-17)



Name *Buthaume* Rank *Cte.*  
 Unit *11<sup>th</sup> Bn.* *Armed*  
 Next of Kin *Canada*

Reg. No. *441450*

*25-B-2768*

Date	Movement	Place	Casualty	List No.	Notified N/K O.	W.O. List
<i>1916</i>	<i>Added</i>			<i>2</i>	<i>0</i>	<i>31</i>
<i>209</i>	<i>do</i>	<i>and Missing</i>		<i>498</i>	<i>3905</i>	<i>10</i>
<i>209</i>	<i>do</i>	<i>and Missing</i>		<i>533</i>	<i>6192</i>	<i>12/12</i>
<b>26 9</b>	<b><u>KILLED IN ACTION</u></b>			<b>A624</b>	<b>M1107</b>	<b>3-4</b>







649-B-9549

✓ ✓ ✓ ✓  
BERTHIAUME, A. (Pte) No. 441450

✓  
14th Bn.

*m*

Medals and Decorations (Mother) Mrs. A. Berthiaume  
Hemmingford,  
Que. ✓

Plaques and Scroll (Mother) Mrs. A. Berthiaume  
address as above. ✓

*(Ser # 964976)*

Memorial Cross. (Mother) Mrs. A. Berthiaume.  
address as above.

39691

*not Eligible for 14-15 Star*

*E. "yrien" V.M.* Scroll Desp. JUN 1 0 1914 Reqn. No. *2.46498*

*E. " " B.W.M.* Plaque Desp. JAN 5 1914 Reqn. No. *2578* R.P.



M

638479

DEC 27 1920

647



MARRIED

SINGLE

WIDOWER

TRADE OR CALLING

*yes*  
*Farmer*

RELIGION

*Anglican*

DESCRIPTION.

APPARENT AGE

*19* YEARS

— MONTHS

HEIGHT

*5* FEET

*6* INCHES

CHEST MEASUREMENT

*33* INCHES

EXPANSION

*3* INCHES

COMPLEXION

*Dark*

EYES

*Brown*

HAIR

*Dark*

DISTINGUISHING MARKS

*Nil*

MEDICAL EXAMINATION.

PLACE

*Winnipeg, Man.*

DATE

*Sept 30/15*





CARD NO. 6491

SURNAME. *Berthiaume*

*649-B-95-49*

CHRISTIAN NAMES *Armand*

**D**

FOLL.

REGL. No. *441450*

RANK *Olie*

UNIT *53rd*

*Batt.*

FORMER CCPPS

*Nil*

NEXT OF KIN.

*H.Q. 649-B-95-49. 2-3/4/16*

CHANGE OF ADDRESS

NAMES IN FULL *Berthiaume, Alvina*

RELATIONSHIP TO SOLDIER

*also notify  
Mrs Jules Robard (Mother)  
Hemmingford  
Huntingdon Co.  
P. Q.*

ADDRESS *Hemmingford, P. Q.*

*Auth letter 31/10/16*

COUNTRY OF BIRTH *Canada, Hammonford* <sup>P. Q.</sup> DATE

PLACE OF ATTESTATION *Stinnipsey Man.* DATE *Sept 30, 1915*

*Sailed from Halifax Per S.S.*



53<sup>d</sup> Battalion Canadian Infantry

441450 Pte. A. Berthoume

- 20 -

Perforated sheet for Will from Pay Book of Reg.

No. 441450

Name Pte. Berthoume A.

Unit 53<sup>rd</sup> C.I.B.

Military Will.

In the event of my death I give  
the whole of my Property and  
effects to my Mother Mrs Alono  
Robert Hammanford  
Canada P. 2.

Signature A. Berthoume Pte  
Rank and Regt. Pte, 53<sup>rd</sup> Canadian Inf.  
Date 7/6/16



Will Form extracted by Lieut. L. A. Naylor

ESTATES BRANCH

NOV 15 1919

MILITIA DEPT.

19797



1854

1854

1854

1854







