121541	BERTHIAUME	Joseph
I.D. number **No. d'identification**	**Surname** **Nom de famille**	**Given names** **Prénoms**

PERSONNEL RECORDS CENTRE
CENTRE DES DOCUMENTS DU PERSONNEL

Location
Lieu 692

ARC-1048 (rev. 91)

REGIMENTAL DOCUMENTS

Pte NAME BERTHIAUME Joseph. REGT. NO. 121541. UNIT 69th Bn H. Q. FILE NO. 16637

	CONTENTS	DATE RECEIVED	TO WHOM FORWARDED	DATE FORWARDED	M. F. W. 2505 REFERENCE	NON-EFFECTIVE BY
1	ATTESTATION PAPER (M.F.W. 23, 133, or 51)					DEATH
2	CASUALTY FORM (M.F.W. 54 or A.F.B. 103)					Category
	TRAINING HISTORY SHEET (M.F.W. 113)					
1	FIELD CONDUCT SHEET (M.F.W. 178 or A.F.B. 122)					
	REGT. CONDUCT SHEET (M.F.B. 263 or A.F.B. 120)					
	COMPANY CONDUCT SHEET (M.F.B. 263A or A.F.B. 121)					DISCHARGE
2	MEDICAL HISTORY SHEET (M.F.B. 313 or A.F.B. 178)					Category Demob
1	DENTAL HISTORY SHEET (M.F.B. 465)					
2	MEDICAL REPORT (M.F.B. 227 or A.F.B. 179)					
1	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)					DESERTION
	DECLARATION, COURT OF INQUIRY (M.F.B. 259 or A.F.B. 115)					
	LAST PAY CERTIFICATE (M.F.W. 44)					
1	PROCEEDINGS ON DISCHARGE (M.F.W. 218 or A.F.B. 268)					
	PARTICULARS OF CHARACTER (A.F.W. 3226)					
1	COPY OF PARCHMENT DISCHARGE CERTIFICATE (M.F.W. 39A)					6-14
1	a.7. W-3997					25-15
1	CAD C-5-009-a					27-15
1	DMS-1375					
1	MFW-2571					1
1	MFW-192					

Box # 692

W. 2589
100M-11-18

68 BATTALION C.E.F.

Card

Card A.P. 3-5-16

Duplicate

ATTESTATION PAPER.

No. 121541

Folio.

CANADIAN OVER-SEAS EXPEDITIONARY FORCE.

QUESTIONS TO BE PUT BEFORE ATTESTATION.

(ANSWERS).

1. What is your surname?	Berthiaume
1a. What are your Christian names?	Joseph
1b. What is your present address?	258 St. Catherine Est Mont. Canada
2. In what Town, Township or Parish, and in what Country were you born?	Baie St. Paul Comté Charlevoie
3. What is the name of your next-of-kin?	Alphonse Berthiaume
4. What is the address of your next-of-kin?	478 St. Thimothé St. Mont.
4a. What is the relationship of your next-of-kin?	Father
5. What is the date of your birth?	3 October 1884
6. What is your Trade or Calling?	Bar Tender
7. Are you married?	Yes
8. Are you willing to be vaccinated or re-vaccinated and inoculated?	Yes
9. Do you now belong to the Active Militia?	No
10. Have you ever served in any Military Force? If so, state particulars of former service.	1st. Field Batty. 3 Years
11. Do you understand the nature and terms of your engagement?	Yes
12. Are you willing to be attested to serve in the Canadian Over-Seas Expeditionary Force?	Yes

DECLARATION TO BE MADE BY MAN ON ATTESTATION.

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

Joseph Berthiaume (Signature of Recruit)

Date December 9 1915 A. Leclerc (Signature of Witness)

OATH TO BE TAKEN BY MAN ON ATTESTATION.

I, Joseph 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.

Joseph Berthiaume (Signature of Recruit)

Date December 9 1915 A. Leclerc (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 Montreal this 9 day of December 1915.

D. Ewan Cameron (Signature of Justice)

Lt-Col.

M. F. W. 23
200 M—9-15
H. Q. 1772-39-841

Description of Joseph Berthiaume on Enlistment.

Apparent Age 31 years 2 months.
(To be determined according to the instructions given in the Regulations for Army Medical Services.)

Height 5 ft. 4 ins.

Chest measurement: Girth when fully expanded 38 ins.
Range of expansion 3½ ins.

Complexion Fair

Eyes Brown

Hair Brown

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

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

Blue and red scars on the outside of forearms thighs and legs from injections of morphine and cocaine

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 declares that he is not subject to fits of any description.

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

Date December 9 191 5

Place Montreal

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.

Joseph 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.

D. W. Ausseway (Signature of Officer)
Lt. Col.

Date December 9 191 5

CANADIAN EXPEDITIONARY FORCE

Discharge Certificate

This is to Certify that No. 121541 (Rank) Private.

Name (in full) BERTHIAUME, Joseph. enlisted in

the 69th, Battalion

CANADIAN EXPEDITIONARY FORCE at Montreal, Quebec on the 9th

day of December 19 15.

HE served in - - - - - - - - - - - - FRANCE - - - - - - - - - - - - - - - -

and is now discharged from the service by reason of -

- - - - - - - - - - - - - - - - - - On Demobilization - - - - - - - - - - - - - -

THE DESCRIPTION OF THIS SOLDIER on the DATE below is as follows :—

Age 34 Years 9 Months

Height 5 Feet 4 Inches

Complexion Fair

Eyes Brown

Hair Brown

Marks or Scars

Scars on legs and arms due to hypodermic injection.

J. Berthiaume

Signature of Soldier

Issuing Officer

Officer i/c Discharge Section, District Depot No. 4.

Captain,

Rank

Appointment

Date of Discharge August 30th 1919.

Signed at Montreal, Quebec this 30th day of August 19 19.

in Military District No. 4.

File Reference No. DD4. 19-B-823

N.B.—As no duplicate of this Certificate will be issued, any person finding same is requested to forward it in an unstamped envelope to the Secretary, Militia Council, Ottawa, Canada.

GH

M. F. W. 39a
200m.—2-18.
H.Q. 1772-39-882

CANADIAN EXPEDITIONARY FORCE

Discharge Certificate

No. ..... (Rank) ..... Name .....

Unit .....

Address on Discharge .....

Character and Conduct .....

.....

Former Occupation .....

Special Qualifications of Value in Civil Life .....

.....

Medals and Decorations .....

.....

Remarks .....

.....

Signed at ..... this ..... day of 19

.....

Name of Officer

.....

Rank

.....

Appointment

On demobilization the particulars called for on the back of this certificate will not be completed.

—D—

—J—

—Q—

Hist I #3

A ORIGINAL.

6941

MEDICAL HISTORY SHEET.

Surname Berthiaume *Christian Name* Joseph ~~12 15 44~~

Examined { on 10 day of December 1915 / at Monteal

Approved by L. A. Chabot Capt.

Rank ..... M.O.

Birthplace { City or Town Baie St; Paul / County Compté Charlevoix

Apparent age 21

Trade or occupation Bar Tender

Height 5 Feet 4 Inches.

Weight 142 Lbs.

Chest measurement { Minimum 36 inches. / Maximum expansion 38 inches.

Physical development Good

Small-Pox Marks No

Vaccination Marks { Arm Right. Left. / Number Never Took

When Vaccinated last

(a) Marks indicating congenital peculiarities or previous disease Burnand Left foot

(b) Slight defects but not sufficient to cause rejection Was a morphinomane before

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

Date	Result	Vaccinations.
10/5/16	good	Moriny M.O.
		M.O.
		M.O.

Date	Result	Anti-Typhoid Inoculations, Etc.
2/2/16	good	FEC M.O.
12/2/16	good	FEC. M.O.
& paratyp 15/7/16		M.O. M.O.

Enlisted on 9 *day of* December 1915 *at* Montreal

	Corps.	Regt'l Number.	Habits.	Date.
Joined on enlistment				
Transferred to	22nd Bn.	~~615111~~ 121541		

EXAMINED OR DISCHARGED BY A MEDICAL BOARD.

Station.	Date.	Disease.	Result.
Summerdale	6/1/19	nil	A 1

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

M. F. B. 313.

150M.—8-15.
H. Q. 1772-39-439.

Surname Petthiaume Christian Name Joseph

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

DENTAL HISTORY SHEET

CANADIAN ARMY DENTAL CORPS

District 4

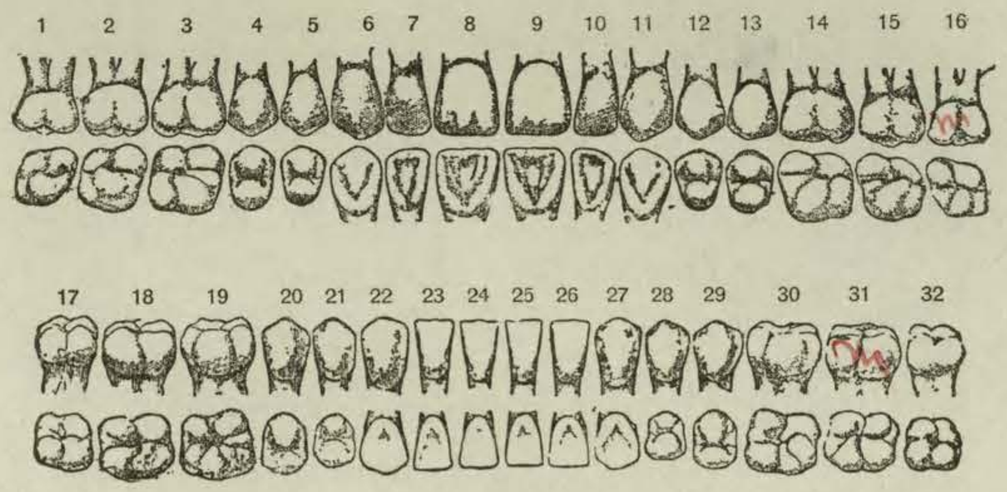
No. 121571

Name of Soldier Bertheuse H. J.

Rank

Regiment 69th

M.F.B. 465
150M—10-18
1772-39-950



INSTRUCTIONS

1. On examination the condition of patient's mouth to be marked on diagram in red ink.
2. On first line of report, record of same to be made in red ink.

Only such entries to be made on this sheet as will show:

1. Condition on examination (in red).
2. Condition on leaving Canada.
3. Condition on discharge from the Service. Good

	Date	Amalgam	Temporary Filling (a) G. P. (b) Cement	Cement	Treatment Putrescent Pulp	Root Filling	Pulp Cap	Devitalization	Pyrrhea	Synthetic Porcelain	Extracting	Dentures U	Dentures L	Dentures P	Gold Clasp	Gold Filling	Crowns Gold	Crowns Porcelain	Bridge Work	Prophylaxis	Operator	Military District	Remarks: Cavities	Remarks: Extractions
Condition on first Examination	1919																							
Good Aug							For Discharge.														B Illness from Capt.	4		O. K.

M.F.B. 465
150M—10-18
1772-39-950

C.A.D.C. 5009 A

CANADIAN ARMY DENTAL CORPS, O.M.F.C.

DENTAL CERTIFICATE FOR DEMOBILIZATION

Canadian Printing and Stationery Services, London

M. D. 4.

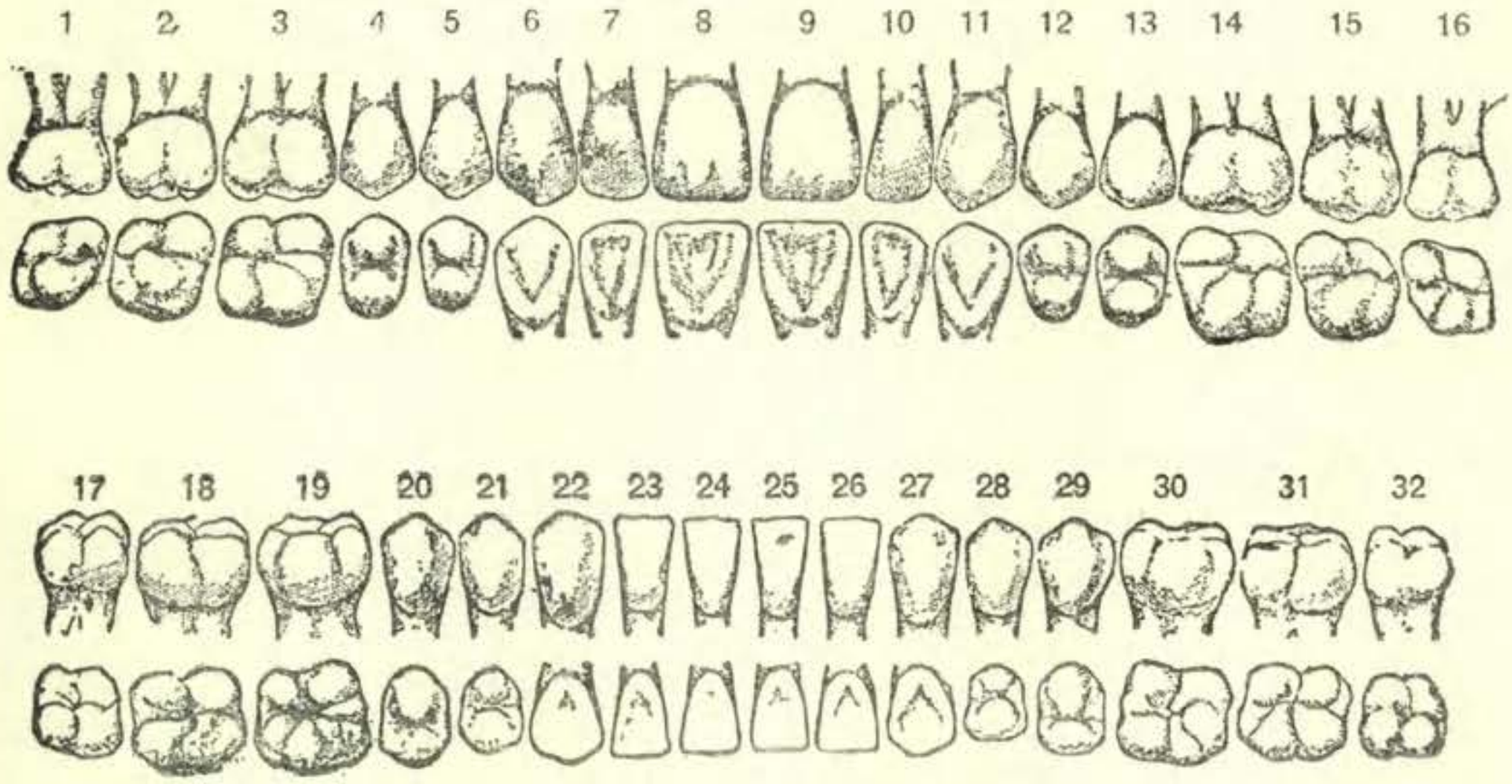
NAME OF SOLDIER (Block Letters) BERTHEAUME J.

REGIMENT 32nd C. F. C. RANK Pte No. 121541

Date of Examination in England 13/1/19 | Date of Examination in France

DIRECTIONS TO DENTAL OFFICERS

1. This form will be made out for each individual at the time of Demobilization in England or France.
2. Figures as per chart will be used to designate teeth concerned.
3. In reference to Partial Dentures the numbers of teeth thereon will be stated.



PRESENT DENTAL REQUIREMENTS

1. FILLINGS
2. EXTRACTIONS Vick
3. CROWNS
4. DENTURES
   - (*a*) Full Upper
   - (*b*) Part Upper
   - (*c*) Full Lower
   - (*d*) Part Lower

HAS HE EVER REFUSED DENTAL TREATMENT?

HAS HE EVER RECEIVED DENTAL TREATMENT? (Reply by "*Yes*" where applicable to any or all of *a*, *b* or *c*.)

- (*a*) In Canada
- (*b*) In England
- (*c*) In France

Signature of Dental Officer A. La Rocque Capt

MEDICAL EXAMINATION UPON LEAVING THE SERVICE OF OFFICERS AND OTHER RANKS WHO HAVE NO DISABILITY.

Officers and Other Ranks leaving the service for reasons other than medical unfitness are to be reported on this form. Where there is evidence of any undetermined or progressive disability, this form will not be used, but the case will be referred to a Medical Board for completion of M.F.B. 227.

No. 121541 Rank Pte Surname Berthiaume
(Given name in full) Joseph

Unit or Corps D.D.H.4 Birthplace Baie St Paul P.Q.

(Examination of Officer or Other Rank (stripped) to be made by one Medical Officer.)

1. **GENERAL DESCRIPTION:**

Physique Good Weight 163 lbs. Height 5 ft. 4 in. Colour of Eyes Grey

Nutrition Good

Pulse 76

Condition of arteries Good

Vision Rt. O.K. Left O.K.

Hearing (conversational voice) Rt. O.K. ft.

Left O.K. ft.

Identification marks, scars, or deformities.
(Give cause and date of origin.)
Scars on legs and arms due to hypodermic injections given by himself

Opinion as to general health and physical condition Good

2. Has Officer or Other Rank ever suffered from, or has he now, any affection of the following systems? (Answer "Yes" or "No"). (Subjective evidence may be sufficient in certain cases.)

Nervous System No Genito Urinary System No Cardio-Vascular System No

Special Senses No Integumentary System No Respiratory System No

Disturbance of mentality No Muscular System No Digestive System No

Osseous and Joint System No Any other general condition No

3. If the answer to any part of Section 2 above is "Yes," here give full particulars, with cause and date of origin; and also a description of the present condition.

(If space is insufficient, continue on back of form.)

[OVER]

EXAMINATIONS.

THIS SECTION FOR USE OVERSEAS—

Examined at ..... (Overseas)

Date ..... Signed ..... M.O.

I hereby certify that I have read, or have heard read, the above description of my present condition; that I find it correctly stated; and that I have not withheld any information concerning any other affections from which I suffered, either prior to or during service.

Signature .....

(If not satisfied, M.F.B. 227 will be completed by Medical Board.)

THIS SECTION FOR USE IN CANADA—

Examined at Montreal ~~(Canada)~~

Date 29/8/19 Signed E. D. Brown M.O. Lt

I hereby certify that I have read, or have heard read, the above description of my present condition; that I find it correctly stated; and that I have not withheld any information concerning any other affections from which I suffered, either prior to or during service.

Signature J. Bertrand

(If not satisfied, M.F.B. 227 will be completed by Medical Board.)

(This space to be used, if necessary, in connection with Section 3, overleaf, only.)

M.F.W. 129
1033 (D.P. 500M-11-18.)
1772-39-1142.

No 10

D.M.S. 1375.

Medical Examination upon leaving the Service of an Officer fit for general service or a Soldier fit for duty.

Officers leaving the Service upon being found unfit for general service by a Medical Board, and Soldiers leaving the Service upon being found otherwise than fit for duty by a Medical Board, are not to be reported on this Form.

Rank PTE Name JOSEPH Surname BERTHIAUME

Unit or Corps C.F.C. 32 Coy. (If a soldier) Regtl. No. 121541

Born at BAIE ST. PAUL, P.Q. CAN. on, date 3-10-1881

Signature (for identification) Joseph Berthiaume

The examination is to be made jointly by two Medical Officers.

1. **PHYSIQUE**—Any deformity, maiming or lameness? If so, describe.

Weight 137 lbs.

Height 5 ft. 4 ins.

2. **NUTRITION AND DIATHESIS?** good

After searching inquiry and thorough examination is any evidence found of disease or impairment of the parts indicated below? If so, describe.

3. **NERVOUS SYSTEM?** negative

4. **RESPIRATORY SYSTEM.** negative

5. **HEART?** negative

Abnormal Sounds? none

Abnormal Size? no

Pulse Rate? 70 Intermittence or irregularity? none

6. **ARTERIES.**—Any hardening? no

7. **DIGESTIVE SYSTEM?** negative

8. **GENITO-URINARY SYSTEM?** negative

Urinalysis—S.G.? 1019 Reaction? acid Albumen? negative Sugar? negative

9. **SKIN, MIDDLE EAR, EYE** or any other part? negative

10. Is there any evidence of impairment of health or physical condition not mentioned above? If so, describe. no

11. Opinion as to the health and physical condition of the one examined? A

Examined at Shawinigan Falls Signed Hemming Capt CAMC M.O.

Date 6/1/19 Signed J. A. McEwen Capt CAMC M.O.

If any disease or impairment of health or physical condition is discovered, this report should be sent at once to the O.C. concerned for the Officer or Soldier to be sent before a Medical Board for regular boarding.

32

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

M. F. W. 54. (A. F. B. 103.
350M.—5-16
H. Q. 1772-39-920.

Casualty Form—Active Service.

Unit, Regiment or Corps 69th Bn. C.E.F.

Regimental No. 121541 Rank Pte. Name Berthiaume Joseph

Enlisted (a) 9.12.15 Terms of Service (a) C.E.F. D. of W. Service reckons from (a) 9.12.15

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) Bartender

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				
		Embarked	Canada	17.4.16	
		Disembarked	England	28.4.16	
1-9-16	O.C. 69th Bn.	Appointed a/cpl.	Dibgate	1.9.16	D.O.P.2. 210
4.1.17	O.C. 69th Bn	Trans'd to 10th Res. Bn.	Dibgate	4.1.17	D.O.P.2. 4
			J. Belanger		Capt for Adj. 10th Res. Bn
4.1.17	O.C. 10th Res. Bn.	Taken on from 69th Bn.	Dibgate	4.1.17	D.O.P.2. 1
24.3.17	O.C. 10th Res. Bn.	Reverts to permanent grade being over and above establishment	Shoreham	24.3.17	D.O.P.2. 67
23.4.17	O.C. 10th Res. Bn.	Ceases to be attached to this Unit on being transf. to Can Forestry. Bn	Shoreham	23.4.17	D.O.P.2. 95
			J. Belanger		Capt for adj. 10th Res. Bn
30.4.17	~~D. of T.O.~~ C.F.C.	Taken on strength Can. Forestry Corps.	London	23.4.17	Pt. 11 Orders No. 101 Lt. & A/Adjt C.F.C.
			W. J. Wilson		

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

[P.T.O.

CERTIFIED CORRECT. 26 JUN 1917 O.M.C. OTTAWA

Report Date	Report From whom received	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
1-5-17.	C.F.C. ~~D. of T.O.~~	S.O.S. Base Depot on posting to 32 Company, France.	Sunningdale	27-4-17.	Pt.11. Orders No.1. Lt. & a/Adj. C.F.C. T E Hausman LIEUT. FOR LT: COL: I/C RECORDS. C.O.M.F.
		Disembarked Havre 29th 17			
13/5/17.	32 wby.	To Hospital	Field	30/4/17	B.213 of.
25/5/17	6 YBD.	Left for unit.	do.	25/5/17	2R.
14/5/17.	2 Gen.	To O.C. Reinfs	Havre.	14/5/17	2.3034
30/6/17.	32nd Coy	Reporting unit.	Field	30/5/17	B213 Des No 26 A.
16.2.18	do	Awarded one Good Conduct Badge		9.12.17	B 213 Pt. 2 No #8. 1918
5-4-1918	G.S.D. Canadians	Def Vision Classified "B1"	Field	5-4-1918	B+R 456 Med Board B+R 17 of 26-3-1918
8-8-18	do. 32 Coy.	Admonished 6-8-18 for W.O.A.S Absent from duty from 10.15 P.M. 4-8-18 until 11:30 A.M. 6-8-18. Forfeits 2 days pay by R.W.			AFB 2069 Pt II O #379/9-9-18
24-8-18	do	Granted 14 days leave (France)		22-8-18	B.213 Pt.II.O. #39 d/19-9-18
7.9.18.	32 Coy.	Rejoined from leave		4.9.18	B213 d/7.9.18
16.12.18.	6 YBD	~~France Eng. posted to C.F.C. Depot~~ Sunningdale		16.12.18	2R 7
21.12.18.		O.C. C.F.C. T.O.S. Base Depot, C.F.C. Sunningdale 19.12.18. Pt.11.D.O. 304 from 32 Coy. France			A Newell Lieut. for Lt.-Col., A. A. G. Canadian Section, G. H. Q. 3rd Echelon, B. E. F.

Lt. & For O.C. Base Depot, Canadian Forestry Corps.

Army Form B. 103. Regimental Number 121541

Casualty Form—Active Service.

Regiment or Corps C.F.C.

Rank Pte. Surname Bothiaume Christian Name Joseph

Religion ..... Age on Enlistment ..... years ..... months

Enlisted (a) 9.12.15 Terms of Service (a) Regr Service reckons from (a) 9.12.15

Date of promotion to present rank ..... Date of appointment to lance rank .....

Extended { ..... / ..... } Re-engaged { ..... / ..... } Qualification (b) Bar Lader or Corps Trade and Rate .....

Occupation .... Signature of Officer.

Report		Record of promotions, reductions, transfers, casualties, &c., 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 of Casualty	Date of Casualty	Remarks Taken from Army Form B.213, Army Form A.36, or other official documents.
Date	From whom received				
		Embarked ...			
		Disembarked...			
21.12.19	O.C. E.F.C.	T.O.S. BASE DEPOT C.F.C. SUNNINGDALE.... 19.12.18 PT. II. BO. NO 304 ..... Lt for O.C. F.C.			
		H. M. T. "AQUITANIA" EMBKD. LIVERPOOL. JAN. 18. 1919 DEBKD. HALIFAX. N.S. JAN. 24. 1919			

(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) Signallers, Shoeing-Smith, &c.

W. 11814—M1188 1000m 1/17 (17227) S P & Co, Ltd. Forms B./103/4 E./354.

[P.T.O.

Report		Record of promotions, reductions, transfers, casualties, &c., 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 of Casualty	Date of Casualty	Remarks Taken from Army Form B.213, Army Form A.36, or other official documents.
Date	From whom received				
3.2.19	Montreal.	TOS.DD.4 from O/S.	Montreal.	18.1.19	DO.Pt. 2 NO.34
2.9.19	"	SOS.Discharged.Demob.			
		RO.1420	"	30.8.19	DO.Pt. 2 NO.245

Captain,
Officer ~~in~~ Discharge Section, District Depot No. 4.

R—122

W.B.

Rank | Name BERTHIAUME, Joseph | Reg'l No. 121541

Unit 69th Bn. | If in perm. Corps, What Unit? | Married or Single Married

MX. 24/3/21 MJ.

Place and Date of Enlistment Montreal, December 9th 1915. | Place of Birth Baie St. Paul Compte, Charlevoie, Canada

Name and Address, Next-of-Kin Alphonsine Berthiaume, 447 St Urbain St, Montreal, Canada | Relationship Wife

Assigned Pay Monthly $ | Payable to | Relationship

Separation Allowance $ | Payable to | Relationship

Discharge, Date and Place | Reason | Character

Report. Date.	Report. From whom received.	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.
32 to 12 Bde					
29-4-16	H.Q.	Arrived in England.	Bramshott	28-4-16	DQ 1586.
1.9.16	69th Bn	To be a/Cpl without pay while in charge of Officers orderlies	Dibgale	1.9.16	PF II 210
4.1.17	do	S.O.S. Trans to 10th Res Bn	do.	4.1.17	" " 4.
4-1-1.	10th Res Bn	T. O. S of 10th. Res. Bn.	Shoreham	4-1-17	Pt. 2 D O-I
24-3-17	O.C 10th Res	Reverts to perm Grade (above est)	Shoreham	24-3-17	Pt II D.O 67
23-4-17	do	S.O.S to Can Forestry Bn	do	23-4-17	— 96
1-5-17	B. Dep. C.F.C	S.O.S. to 32nd Coy. France	Sunningdale	27-4-17	— 1.
13-6-17	C.L. "A"	Adm. #2 Gen Hosp.	Havre	30-4-17	C.L. "A" 86
-do.	-do.	Discharged to Base	-do-	14-5-17	C.L. "A" 86
23.2.18	32 Co. C.F.C	Awarded 1 G.C. Badge	Field	9.12.17	Pt II 8

C.F.C. Pt II O. 101 d/30-4-17
32nd Coy Pt II O. 1 d/4-7-17

Report. Date.	Report. From whom received.	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.
21.12.18	B.D.C.F.C.	T.O.S. from 32 Co. C.F.C.	At S'dale	19/12/18	Pt II 304
11-1-19	"	On Comm. Rhyl.	"	11-1-19	" 11.
	SOS to C F C/T. MDA				
	18.I.19 on Ceasing on Com				
	RHYL				
	BDOF D 31, d 31.I.19				
6-2-19	32 Coy C.F.C.	S.O.S. to B.D.C.F.C. S'dale	Field	16-2-18	7

L. L. Job 95618—M. & D. 65

316 Jeanne D'arc.
Maisonneuve.
Montreal P.Q.
6/9/17

MILITIA AND DEFENCE

ASSIGNED PAY

OVERSEAS CONTINGENTS

M. F. W. 12.
15m.—3-16.
H. Q. 1772-39-819.

To Whom	Mrs Jos Berthiaume	By Whom Assigned	Berthiaume Jos. (wife)
Address	~~447 St Urbain St.~~ ~~417 St Dominique~~ ~~3ième Etage~~ Montreal. ~~2 Rue Elizabeth~~ ~~447 St Laurent St~~	Regtl. No.	121541
		Rank	Pte
		Corps	A. Co. 69th Bn
Rate	$15.00		

May-1-1916

PAYMENTS

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

Mrs.

MILITIA AND DEFENCE

ASSIGNED PAY

OVERSEAS CONTINGENTS

PAYMENTS.

M. F. W. 12a.
50m.—4-16.
1772—39—819.

Sheet No. 2. Jos. Berthiaume (wife)

L. L. Job 310.—Req. 6914.

Name of Soldier Berthiaume Jos.

Pte 121541 69 Bn. a co.

Month.	Year.	Cheque No.	Amt.	15.00 Remarks.
April	1916			
May		Z 5389	15	
June		P8086	15	
July		D84414	15	
Aug.		O 10837	15	
Sept.		V16588	15	
Oct.		W 21207	15	
Nov.		F25346	15	
Dec.		Z 29812	15	
Jan.	1917	K37623	15	
Feb.		K42863	15	15
March		L48675	15	15
April		~~L 518~~	~~15~~	~~15~~ Cancelled 26/3/17.
May		K6578	15	
June		O 13236	15	
July		L 20565	15	Cut 80
Aug.		O 27558	15	03 255 WDC
Sept.		N 33843	15	316 Jeanne D'arc Maisonneuve Ave. Montreal P.Q. 6/9/17
Oct.		Y 47675	15	
Nov.				
Dec.				
Jan.	1918			
Feb.				
March				
April				
May				
June				
July				

a684

CANADIAN
ASSIGNED PAY AUDITED
J. H. Brown
AUDIT CLERK
DATE MAY 23 1919

MILITIA AND DEFENCE

ASSIGNED PAY

OVERSEAS CONTINGENTS

Sheet No. 2 (Contd.)

Name of Soldier.....

PAYMENTS.

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

L. L. Job 88773—M. & D. 5.

10-12-15

19

126

M. F. W. 11.
20m.—11-15.
H. Q. 1772-39-818.

MILITIA AND DEFENCE

SEPARATION ALLOWANCE

Name: Mdme. Jos. Berthiaume,

Address: ~~204 St. Elizabeth,~~ ~~204 St. Elizabeth St.,~~ ~~412 St Dominique~~ ~~447 St-Urbain.~~ ~~Bene Etage~~ Montreal, Que. ~~492 St Laurence St.,~~ ~~Montreal P.Q.~~

Relation to Soldier wife, child or mother: Wife.

316 Jeanne D'arc Maisonneuve Montreal

Name of Soldier: Berthiaume, Joseph

Regtl. No.: 121541

Rank: Pte.

Corps: 69th Battn.

To what Corps belonging when called out:

PAYMENTS

Month	Year	Cheque No.	Amt.	REMARKS
Aug.	1914			
Sept.				
Oct.				
Nov.				
Dec.				
Jan.	1915			
Feb.				
March				
Apl.				
May				
June				
July				
Aug.				
Sept.				
Oct.				
Nov.				
Dec.				
Jan.	1916	E 27214	34	34
Feb.		P22432	20	20
March		K 24644	20	20

MILITIA AND DEFENCE

SEPARATION ALLOWANCE

OVERSEAS CONTINGENTS

PAYMENTS.

M. F. W. 11a.
60m.—12-15.
1772—39—818.

Sheet No. 2. Mdme. J. Berthiaume, (Wife)

L. L. Job 89002.—Req. 6213.

Name of Soldier Berthiaume, J. Pte
#121841

Month.	Year.	Cheque No.	Amt.		Remarks.
April	1916	F 446	20		20
May		G. 4869	20		20
June		C 2261	20		20
July	27.	Y 2597	20	-	20
Aug.		T D11060	20		20
Sept.	5	T 5131	20		20
Oct.		T ~~18690~~	~~20~~		20
Nov.		U 21715	20		20
Dec.		U 24481	20		20
Jan.	1917	T 27764	20		20
Feb.		T 30929	20		20
March		T 34112	20		20
April	A307	~~T122~~	~~20~~		20 T122 can called RE-WRITE
May		T 32499	20	#354	20
June		U 6411	20		20 492 St. Laurence St. Montreal P.Q.
July		T 10065	20		20 B
Aug.		V 13213	20		T 434 00 WAP
Sept.	X16251	U ~~16143~~	20		B U 16143 Cancelled RE-WRITE
Oct.		P 22678	20		T
Nov.					
Dec.					
Jan.	1918				
Feb.					
March					
April					
May					
June					
July					

MILITIA AND DEFENCE

SEPARATION ALLOWANCE

OVERSEAS CONTINGENTS

Sheet No. 2 (Contd.)

Name of Soldier.....

PAYMENTS.

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

*Name BERTHIAUME, Jos. Rank Pte. Regtl. No. 121541

Fyle Depot 19-B823

Original unit 69th Bn Present unit D.D.No.4 M. or S. Age 34 Religion R.C. Ref. H.Q.

Port, ship and date of arrival Halifax, N.S. "Aquitania" 24-1-19.

Next of kin Alphonsine Berthiaume, ~~447 St. Urbain St. Montreal.~~ 199 St Elizabeth

Address on leave

Address on discharge

Transportation issued Yes No Date Character on discharge

Previous occupation Bartender Date and place of enlistment 9-12-15 Montreal.

Diagnosis Date of Medical Boards

Date.	Remarks.	Pt. 2 Order No.
3-2-19	T.O.S. from O/S 18-1-19. Posted to Cas.Coy 27-1-19.	
	Fur W/S to 10-2-19.	34.

*—Name will be given in full; surname first.

(over)

Date.	Remarks	Pt. 2 Order No.
12-2-19.	Subsistence granted from 11-2-19.	43 P 2
7-5-19.	To be Orderly Cas.Co Staff.effect1-5-19.	127.p.4.
2-9-19.	Discharge .30-8-19. Demob.R.O.1420.	245.

M. F. W. 192
150m.—5-18
1772-39-1243

FORM D.M.S. 1300.
8137—50m—28/2/17.

Surname	Christian Name or Names	Reg. No.
Berthiaume	J.	121541

Rank	Unit	Co.	Troop	Batty.
Pte	Forst.Cos.			

Hospital: 2 Gen.Havre 30-4-17 Date of Admission

Transferred Hosp.

Hosp.

Hosp.

Hosp.

Diagnosis Cont.Scalp Acc. Jl

(1)
Later Diagnosis (if changed)

(2)

(3)

Additional Diagnosis: if more than one state present

DISPOSITION Date

C.L.13-6-17 A86 Dis to Base 14-5-17

REMARKS

A.M.D. 2 DEPT.

Bch. of D.G.M.S. O.M.F.C. London.

EPITOME OF HOSPITAL TREATMENT.

	Hospital	Adm.
1.		
2.		
3.		
4.		
5.		
6.		
7.		

S.O.S. Demob. 20/8/19.
M.D. 4.

649-B-23722

BERTHIAUME, J. ex-Pte. 121541, 38 Coy. C.F.C.

Medals & Dec. (Widow) Mrs. Joseph Berthiaume,
199 St. Elizabeth St.,
Montreal, P.Q.

P.& S. (Nil)

Mem. Cross (Nil)

N.B. Death due to accident after discharge.

Not elig. for star.
Mf. 1 " V.M.
" " B.W.M.

49899

-B-

Form R. 149.
7106—250m—7/2/17.

Name BERTHIAUME Joseph *Rank* Pte. *Reg. No.* 121541.

Unit Canadian Forestry Companies.

Next of Kin Canada.

Date	Movement	Place	Casualty	List No.	Notified N/K O.	W.O. List
1917.						
Apr. 30	No. 2 Gen. Hosp. Havre	Cont.	Scalp acc.	A86		
May 14	Discharged to Base		do	A86		

Date		Movement	Place	Casualty	List No.	Notified N/K O.		W.O. List

SURNAME. Berthiaume

CHRISTIAN NAMES Joseph

REGL. No. 121941 RANK Pte

UNIT 69th

FORMER CORPS 1st Fld. Baty.

Died at St Annes Hospital Bn. 15.11.20. 3 years.

CARD NO. 4

Left Dis 30-8-19 Sailed -on 245 92/9/19 4LO

ROLL

NEXT OF KIN.

NAMES IN FULL Berthiaume Alphonse

RELATIONSHIP TO SOLDIER Father

ADDRESS 478 St Timothe St., Montreal P. Q.

Also notify Mrs Joseph Berthiaume 444 St. Denis St., Montreal, P. Q.

auth. b. av a. P. 6-5-18

CHANGE OF ADDRESS

DATE

PLACE OF ATTESTATION Montreal P. Q. DATE

Sailed from St John Per S. S. "Scandinavian" 17-11-16

R/6. 25-1-19 $\frac{256}{85}$ Pte

$\frac{353}{6}$

L L. 94504. M. & D. 6512. M. F. W. 22. 250M.—2-16. H. Q. 1772-39-339.

MARRIED yes SINGLE WIDOWER

TRADE OR CALLING Bartender RELIGION Roman Catholic

DESCRIPTION.

APPARENT AGE 31 YEARS 2 MONTHS

HEIGHT 5' FEET 4 INCHES

CHEST MEASUREMENT 36 INCHES EXPANSION 2 INCHES

COMPLEXION Fair EYES Brown HAIR Brown

DISTINGUISHING MARKS Blue and red scars, the out side of forearm, thigh & legs from ~~from~~ injection of morphine and Cocaine

MEDICAL EXAMINATION. PLACE Montreal P.Q. DATE Dec 9./15

Present address. 258 St Catherine St.
East montreal P. Q.

E-M-H 649-B-23722

Number 121541 Rank a/Cpl

Surname BERTHIAUME

Christian Name Joseph

Units C.F.C. Theatre of War France

Date of Service 29/4/17

Widow now:- Mrs Alphonsine Allen

Remarks 2523 North 16th St. Philadelphia Pa.,

OCT 28 1931

Latest Address ~~199 St Elizabeth St~~ Pa

Widow - Mrs Joseph Berthiaume Montreal

199 St Elizabeth St

Montreal Que

Roll No.

Page 19121

200m.-6-21.M.

GRATUITY (IMPERIAL)

Pay. Lec. 16/12/26

DEC 11 1926 DESP. REGN. No. 97748

OCT 28 1931 DESP. REGN. No. 6124

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 RECEIVED FROM REG. DEPOT. | DATE FORWARDED TO OTTAWA

868—D.P.—40M-1-12-19.

No. 1215 # 1 RANK Pte. NAME Berthiaume J

T.O.S. 9-12-15 UNIT 69th Battalion.
D.O. 83 (13-12-15)

M.D. Val.

PAID FROM	PAID TO	SIG. OR REC'T	PROMOTIONS, TRANSFERS, DISCHARGES, ETC.	
			PARTICULARS	AUTHORITY
1915	1915			
Dec 9	Dec 31	✓		
1916	1916			
Jan.		✓	3 days C.B.	D.O. # 131 - 22-1-16.
Feb.		✓		
Mar.		m.	S.O.S. Deserter 27-2-16	D.O. # 131 - 3-3-16.
apr.		✓	re-appears	apr. paylist.

UNIT SAILED
APR 17 1916

REGT'L NO. 121541

H. Q. FILE NO. 649.

NAME Berthiaume J.

RANK AND CORPS Pte Can Forestry Coy's

CABLE	
NO.	DATE

NATURE OF CASUALTY

FOLLOWS

NO.

FOLLOWS

L. L. 20497—M. & D. 79 8

M. F. W. 42—50M.—5-17.
H. Q. 1772-39-893.

LIST NO.	HOSPITAL	DATE OF ADMISSION	REMARKS
A86	No. 2 Gen. Havre	30-4-17	Cont Scalp Acc
A86	Wis. no Base	14-5-17	" " "

Date of Enlistment
10/12/15

MILITIA AND DEFENCE

Separation and Assigned Pay Branch B

OVERSEAS CONTINGENTS

6269

Date of Assignment
May 1. 1916.

RATE OF SEPARATION ALLOWANCE

~~20~~	~~25.00~~ ~~1-12-17~~ ~~P.6.32.57~~	30 1-9-18 P.6.2753 M.O 29463	

RATE OF ASSIGNMENT

15			

PARTICULARS OF SEPARATION ALLOWANCE

No. 121541

Rank Pte. Promoted Reverted Discharge

Soldier's Name Jas. Berthiaume

Battalion 69 Battn. (A. Co.)

Beneficiary Mrs Jos. Berthiaume

Relationship wife

M.F.W. 2554 - 29/7/18. O.R. 19/11/18

Address

PARTICULARS OF ASSIGNMENT

Name Mrs. Jos. Berthiaume (wife)

Address ~~[illegible]~~

~~246 St James Street~~ Change of Address ~~Montreal Que Can~~

1 ~~Jeanne d'Arc St~~

2 444 St. Dennis St., Montreal, Que.

3

4

REMARKS Jth 1426-J-10

R.O. 67544 - 1-2-19.

Date 1914.	Cheque No.	Amount S/A	Amount A/P	Total	
Sep		434	255	689	
Oct	sa P.22678 ap 747675	20	15	35	
Nov	C 54662	20	15	35	
Dec	D 59303	20	15	35	
Jan 1918	A 55174	30	15	45	
Feb.	B 100835	25	15	40	
Mar.	A 97155	25	15	40	
Apr.	C 1074	25	15	40	
May	E 7713	25	15	40	
June	D 15878	25	15	40	
July	X 30169	25	15	40	
AUG	6 27557	25	15	40	
SEP	B 40234	25	15	40	
OCT	B 45200	25	15	40	
NOV	A 61407	25	15	40	
DEC	A. 66001	45	15	60	
JAN	D 72614	30	15	45	
		829	495	1324	

A/c Closed

Ret'd per Aquilinia

Date 25/1/19 1-2-19

Clerk

CANADIAN
ASSIGNED PAY AUDITED
J. H. Brown
AUDIT CLERK
DATE MAY 23 1919

CONSOLIDATED ACCOUNT

M. F. W. 128
400M.—6-17—1772-39-141
L. L. 22520—M. & D. 1983.

Date of Enlistment

MILITIA AND DEFENCE

Date of Assignment

Separation and Assigned Pay Branch

OVERSEAS CONTINGENTS

RATE OF SEPARATION ALLOWANCE

RATE OF ASSIGNMENT

PARTICULARS OF SEPARATION ALLOWANCE

No.

Rank Promoted Reverted Discharge

Soldier's Name

Battalion

Beneficiary

Relationship

Address

PARTICULARS OF ASSIGNMENT

Name

Address

Change of Address

1

2

3

4

Date	Cheque No.	Amount S/A	Amount A/P	Total	REMARKS

M. F. W. 128
400M.—6-17—1772-39-1341
L. L. 22820—M. & D. 7693.

Married or Single: M.

Place of Birth: Baie St. Paul - Co. Charlevoix - P.Q. Can.

Name and Address of Next of Kin: J. Berthiaume (alphonsine) 447 St. Urbain St. Montreal P.Q.

Relationship of Next of Kin: ~~Wife~~ wife

Name and Address of Next of Kin:

Relationship of Next of Kin:

Separation Allowance Monthly $ Effective (Date)

Payable to

Relationship of Dependant

Casualties, Promotions, &c.

Particulars	Effective Date	Authority
app. a/cpl. without pay	1-9-16	D.O. 210

Admissions to Hospital, &c.

Date Admitted	Date Discharged	V. or A.	Name of Hospital

Reg'l. No. 121541 Rank Private Name Berthiaume Joseph

530

If in Permt. Corps What Unit: Unit 69th Battn.

Permanent Force Allowances

Place of Attestation: Montreal

Date of Attestation: 9-12-15

Transferred to 10th Res. Bn. Date 1-2-17 Authority R.O. 69. 22/1/17

Transferred to Can. Div. Corps Date 31/5/17 Authority D.O. 101.30/7

Transferred to 6 Fd. France Date 1-11-19 Authority

Transferred to Date Authority

Assigned Pay Monthly $15.00 Date Effective May 1st 1916

Payable to Mrs. Jos. Berthiaume ~~447 St Urbain St Montreal P.Q.~~ 204 St. St. Elizabeth - Montreal - P.Q. Relationship Wife Obs. B. 967

Assigned Pay Monthly $ Date Effective

Payable to Relationship

Stop-Payment Form (Assigned Pay) Rendered (Date) Effective Reason

Discharge-Date and Place Reason and Authority

Account Transferred to Non-Effective Branch (Date)

Account Transferred to Officers' Pay Branch (Date)

Date 1916	Pay No. of Days	Pay Rate	Pay Amount $	Pay Amount c.	Field Allowance No. of Days	Field Allowance Rate	Field Allowance Amount $	Field Allowance Amount c.	Working or Special Pay No. of Days	Working or Special Pay Rate	Working or Special Pay Amount $	Working or Special Pay Amount c.	Assigned Pay Credits	Other Credits	Total Credits	Acquittance Rolls 1 No.	1 Date	2 No.	2 Date	3 No.	3 Date	4 No.	4 Date	Cash Payments 1	2	3	4	Assigned Pay	Other Charges	Total Debits	Balance Credit	Balance Debit	Pay Withheld or Deferred	Pay Available for Issue	Remarks
April 30														14 15	14 15																14 15				Balance from Canada.
May 1	31	1.00	31	00	31	10	3	10						~~14 15~~	~~48 25~~ 34 10			7	9-54					5 00	4 87			15 00		24 87	23 38				5.00 paid in Can. bur. on board
June 1 to 30	30	"	30	00	30	"	3	00							33 00	52	2-6-16			102	16-6-16			14 60		4 87		15 00		34 47	21 91				
July 1 to 31	31	.	31	00	31	.	3	10							34 10			168	11/7/16						4 87			15 00		19 87	36 14				
Aug. - 1 to 31	31	"	31	"	31	"	3	10							34 10	285 226	29-7 21-7	352	16-8					2 44 4 87 4 87	7 30			15 —		29 61	40 63				
Sept 1-30	30	.	30	-	30	-	3	00							33 00	424 410	30/8 30/8	472	15/9					14 60	4 87			15 -		39 34	34 29				
Oct 1-31	31		31		31		3	10							34 10	518	25/9	576	14/10					4 87	4 87			15 -		24 74	43 65				
Nov. 1-30	30	"	30	-	30	"	3	00							33 00	622 611 770	30/10 25/10 5 12/16	688 664	17 4/16 6 5/16					2 43 14 60 9 73	4 87 4 87			15 -		41 77	34 88			✓	
Dec. 1-31 1917	31	"	31 - 24 50		31	"	3	10							34 10 283 65	753	29 11/16							4 86				15 -		39 59 244 76	39 39				
Jan. 1 to 31	31	1.00 10	34 10												34 10	787	16 5/16							9 73				15 -		24 73	48 76			✓	
Feb 1 to 28	28	1.00	30 80												30 80	81 75 22	31-1-17 26-1-17 19-1-17							2 43 2 43 2 44				15 -		22 30	57 26				
March 1-31	31	"	34 10												34 10	246 205	24-2-17 18-2-17	415 353	29-3-17 16-3-17					4 87 4 86	4 87 4 86			15 -		31 46	56 90				
April 1-30	30	.	33 00												33 00													15		15 -	74 90				
			401 50											14 15	415 65									109 63	46 25	4 87		150 -		310 75	74 90			✓	Forward :-

530

121541 Pte. Berthiaume, Jos.

A Pay 15.00 Canada

Date 1917	Pay No. of Days	Pay Rate	Pay Amount $	Pay Amount c.	Field Allowance No. of Days	Field Allowance Rate	Field Allowance Amount $	Field Allowance Amount c.	Working or Special Pay No. of Days	Working or Special Pay Rate	Working or Special Pay Amount $	Working or Special Pay Amount c.	Assigned Pay Credits	Other Credits	Total Credits	Acquittance Rolls 1 No.	1 Date	2 No.	2 Date	3 No.	3 Date	4 No.	4 Date	Cash Payments 1	2	3	4	Assigned Pay	Other Charges	Total Debits	Balance Credit	Balance Debit	Pay Withheld or Deferred	Pay Available for Issue	Remarks
Jud:			401	50										14 15	415 65									109 63	46 25	4 87		180		340 75	74 90				Stoos: 115 E. 10-4-17. Trans. Can Det. Corps. 31-5-17 Do. 101. 36. 4-17.
May 1-20	20	1.10	22	00											22 00													15	38	15 38	81 52				
21-31	11		12	10											12 10	2129	27/4							9 73					06	9 79	83 83				
June	30		33	00											33					80	15/4					24 33		15		39 33	77 50				
July	31		34	10											34 10													15		15	96 60				
Aug	31		34	10											34 10													15		15	115 70				
Sept	30		33												33													15		15	133 70				

Month	Particulars	Cr. 1	Cr. 2	Particulars	Dr. 1	Dr. 2	Dr. 3	Dr. 4	Balance	Defer-red Pay	Ser. Allce. Eng.
Sept 30	Bal	~~133 40~~							133 40		
Oct	P.P.	34 10					15				
				a. Pbau Hanre a.R. 1068 21/5/17 Base Details	4 46						
				a.R. 1151 25-8-17 32 Co. 2 Pte	3 57				144 44		
		34 10			8 03		15				
Nov	P Pay	33 00		Loan a Pay			15				
				~~AR 449 32 Co CPCR 17-10-17~~	~~7 14~~						
				" 1420 32 Co " " 24-9-17	3 57						
				" 7 " " " 11-10-17	3 57						
				DN AR 346 " " " 24-7-17	3 57						
				DN AR 1283 " " " 8-9-17	3 57						
				DN AR 731 " " " 10-7-17	3 57						
				DN AR 1003 " " " 9-8-17	3 56						
				DN AR 447 " " " 9-6-17	3 56						
Dec.	P Pay	34 10		Loan a Pay			15				
				DN AR 372 " C.P.R. 30-5-17	3 57						
				" 558 " " 22-6-17	3 57						
				AR 97 32 Co C.P.R. 25-10-17	3 57						
				" 191 " " 9-11-17	3 57				147 64		
		67 10			39 25		30				

Month	Particulars	Cr. 1	Cr. 2	Particulars	Dr. 1	Dr. 2	Dr. 3	Dr. 4	Balance	Defer-red Pay	Ser. Allce. Eng.
1918 Jan	P. Pay	34 10		Balance					142 62		
				Loan a Pay			15				
				a.R. 264 28/11/17 32 Co.	12 49						
				" 344 14-12-17 "	3 57						
		34 10		" 412 28-12-17 "	3 57		15		142 09		
					19 63						
Feby				Loan a Pay			15				
	"	30 80		a.R. 486 14-1-18 "	3 57						
				a.R. 630 28-1-18 "	3 57		15		150 75		
					7 14						
March	P.P.	34 10		Loan a P			15				
				AR 883 32 Co 11-2-18	3 57						
				JOR 161 Hosp. July 18	18						
				a.R. 1169 32 Co. 25-2-18	3 57						
				" 1441 " " 11-3-18	3 57						
				" 1610 " " 23-3-18	3 57				155 39		
		34 10			14 46		15				

P 820
12474—375M—13-2-18.

* Strike out whichever inapplicable.

ASSIGNED PAY.	* ~~ENGLAND OR~~ CANADA.	SEPARATION ALLOWANCE.	* ENGLAND OR CANADA.
EFFECTIVE DATE:- 1-5-16		EFFECTIVE DATE:-	
AMOUNT:- 15.00		AMOUNT:-	

708

NAME:- BERTHIAUME Joseph

NUMBER:- 121541

NAME, ADDRESS, RELATIONSHIP & AUTHORITY | WHEN PAYEE OF A.P. IS THE SAME AS PAYEE OF S.A. THE WORD "SAME" ONLY TO BE WRITTEN IN THIS SPACE.

Mrs Joe Berthiaume wife
204 Sh St Elyabeth Montreal

stopped effective 1-2-19 MD

PARTICULARS OF RANK OR APPOINTMENT

AUTHORITY	DATE EFFECTIVE	RANK OR APPOINTMENT
a/cpl without pay -20-210	1-9-16	Plé

UNIT AND TRANSFERS

ORIGINAL UNIT:- 69th Bn

DATE ACCOUNT FIRST OPENED:- 1-5-16

AUTHORITY	DATE EFFECTIVE	DATE LEDGER SHEET T'SF'D	UNIT TRANSFERRED TO
			C 7 C 7a

EXTRACTS FROM ACTIVE SERVICE PAY-BOOKS | UPON CLEARANCE OF VOUCHERS, ENTRIES WILL BE CANCELLED BY INSERTION OF DATE CHARGED IN RED INK

DATE OF PAYMENT	NUMBER OF A.R	UNIT PAID BY	AMOUNT	DATE OF PAYMENT	NUMBER OF A.R	UNIT PAID BY	AMOUNT
9-1-19	6076	C.F.C. B.D.	~~9 00~~				

a/c Agmd. 30/9/18 $850

DAILY RATES OF PAY AND ALLOWANCES

AUTHORITY	PAY	F.A.	P.F.A.	SUBS'CE ALL'CE
	1 –	– 10		

PARTICULARS OF RENDERING NON-EFFECTIVE:- Discharged to Canada 31-1-19 authy. TMR 643. 7/6/19 MD

MONTH 1918	PARTICULARS	CR. 1	CR. 2.	PARTICULARS	DR. 1	DR 2.	DR. 3.	DR. 4.	BALANCE	DEFERRED	SEPARATION
Mch	Balford								155 39	nil.	
apr	P P	33		Com ap				15			
				AR.154 32 Co 6767 14-4-18	2 68						
				" 429 " " 27-4-18	2 68				168 03		
		33			5 36			15			
May	RP	34 10		ap				15			
				AR.697. 32 Co " 11-5-18	2 68						
				" 924 " " 25-5-18	2 68				181 77		
		34 10			5 36			15			
June	RP	33		ap				15			
				AR 1221 " 8-6-18	53 53						
				" 1540 " 22-6-18	3 57				162 67		
		33			57 10			15			
July	RP	34 10		Com ap				15			
				AR 2076 " 13-7-18	3 57						
				" 2409 " 27-7-18	3 57				154 63		
		34 10			7 14			15			
Aug	PP	34 10		Com ap				15			
				" 2604 " 10-8-18	3 57						
				" 5253 " CD. 22-8-18	44 61						
				" 2883 Nordis 21-8-18	8 92						
				" 5459 " CD. 24-8-18	35 69						
				" 5616 37 Co. P 26-8-18	26 77						
				" 5788 " P 28-8-18	35 69				184 48		
		34 10			155 25			15			
Sept		33		C. a. P.				15			
				6/8/18 issued monthly for cash flow duty 10-18 pm 4/6/18 to 11.30 pm 6/9/18 20 37. 9/9/18 Stack 3. 37 Co. C 7 e.		3 30					
				" 3234 37 Co 10-9-18	3 57						
				" 3608 " 23-9-18	3 57				26 04		
		33			7 14	3 30		15			

CANADIAN
ASSIGNED PAY AUDITED
J. H. Brown
AUDIT CLERK
DATE MAY 23 1919

NUMBER 121541. RANK NAME BERTHIAUME J.

MONTH	PARTICULARS	Cr. 1.	Cr. 2.	PARTICULARS	Dr. 1	Dr. 2	Dr. 3.	Dr. 4.	BALANCE	DEFERRED	SEPARATION
Oct				Brought Forward.					26 04		
	P.P.	34 10		ap				15 -			
				4084 No. 2 Dist 14-10-18	3 73						
				4282 ✓ 24-10-18	3 73				37 68		
		34 10			7 46			15 -			
Nov	✓	33 -		ap				15 -			
				4566 ✓ 13-11-18	3 73						
				4890 ✓ 26-11-18	13 06						
Dec	✓	34 10		ap				15 -			
				6707 ~~6 GBB~~ 10-12-18	4 66						
				5587 BA 24-12-18	9 73						
Jan	✓	34 10		ap				15 -	62 70		
		101 20			31 18			45 -			
				6076 ✓ 9-1-19	9 73						
				2676 Rbyl. 16-1-19	9 73				43 24		
					~~19 46~~						

S.O.S. to Canada ~~AC~~ 18-1-19 SL 7

A 3 M. FORM REN'D ...rffed EFFEC 1-2-19
DISCHARGED TO Canada DATE 31-1-19
PAY BOOK VERIFIED 11-1-19
Cr. BAL. 52 97 L.P.O. REN'D 11-1-19
AUTHY. C.F.C. N.R 643 9-1-19 M.Dt
DRAFTED BY A.S. Houston
CHECKED BY

Corrected Bal Cr 43 24 C.S.
2R 2676 16/19 $9 73 Endorsed C.S.

62 70
9 73
52 97

AUDITOR | PAYMASTER

M. OR S.

PROMOTIONS, REDUCTIONS AND REVERSIONS AFFECTING DAILY RATE OF PAY AND ALLOWANCES

REGT. No. 121541 RANK Pte NAME (IN FULL) BERTHIAUME. Jos.

(BLOCK LETTERS, SURNAME FIRST)

NEXT OF KIN — RELATIONSHIP

ADDRESS

IS SEPARATION ALLOWANCE PAID? 30.00 DATE EFFECTIVE 1-2-19

TO WHOM PAID — RELATIONSHIP

Marie Alphonsine Berthiaume (wife)

ADDRESS

199 St. Elizabeth St.
Montreal
Que.

PARTICULARS	EFFECTIVE DATE	AUTHORITY
F.O.A.	18/1/19	
Cusually Co	27/1/19	
L.W.S.To	10/2/19	D.O. 34/2
Subs from Orderly Cas. Co.	11/2/19	D.O. 43/2
	1-5-19	D.O. 127/4

ORIGINAL UNIT C.E.F. 69th Bde — IF IN P.F. WHAT UNIT?

PLACE OF ATTESTATION Montreal — TRANSFERRED TO Overseas — DATE — AUTHORITY

DATE OF ATTESTATION 9.12.15 — TRANSFERRED TO — DATE — AUTHORITY

ASSIGNED PAY. $ 15.00 — DATE EFFECTIVE 1-2-19

PAYABLE TO Mrs. Jos. Berthiaume — RELATIONSHIP

ADDRESS ~~[illegible] St Denis St Montreal~~

ANY CHANGE IN ASSIGNEE OR ADDRESS
W.S.G.
199 St. Elizabeth St
Montreal

STOP PAYMENT FORM ASSIGNED PAY RENDERED. DATE — EFFECTIVE

DISCHARGED — PLACE Montreal — DATE 30.8.19 — REASON DD 4 19.B — AUTHORITY J.B. DO 245-I — IF ENTITLED TO POST DISCHARGE PAY

MONTH 1919	PAY AND F.A. NO. OF DAYS	RATE	AMOUNT $	C.	OTHER CREDITS $	C.	L.D.6 $	C.	TOTAL CREDITS $	C.
Balance from previous account										
1-2-19							3	37		
Filey	28	1.10	30	80	12	00				
					14	40			60	57
					S.A. 30	00			30	00
Mar.	31	1.10	34	80	24	80			89	60
April	30	1.10	33	00	24	00			87	00
May	31	1.10	34	80	24	80			89	60
June	30	1.10	33	00	24	00			87	00
July	31	1.10	34	80	24	80			89	60
Aug.	30	1.10	33	00	24	00			162	00
					70	00			60	00
					35	00			664	80
					S.A. 30	00				
Other Credits					W.S.G.		S.A.		Total	
					420	00	180	00	600	00
30/9/19										
30.10.19										
30.11.19										
30.12.19										
30.1.20										

ACQUITTANCE ROLLS COL. NO. 1 NO.	DATE	COL. NO. 2 NO.	DATE	COL. NO. 3 NO.	DATE	CASH PAYMENTS COL. NO. 1 $	C.	COL. NO. 2 $	C.	COL. NO. 3 $	C.	ASSIGNED PAY $	C.	REGIMENTAL CHARGES $	C.	OTHER CHARGES $	C.	$	C.	TOTAL DEBITS $	C.	BALANCE DEBIT $	C.	CREDIT $	C.
23887	13	27087	25			15	00	30	57			15 00		-21- 27178						60	57				
												30 00								30	00				
28860	14	28714	26			21	00	23	60			15 00		-24- 28678	28723					89	60	—		—	
												30 00													
28822	12	28662	29	28662	23	20	00	22	00			15 00								87	00	—		—	
												30 00													
29052	13	29143	29			20	00	24	60			15 00								89	60	—		—	
												30 00													
29093		29288	25			20	00	22	00			15 00								87	00	—		—	
												30 00													
29808	24	29402	21			20	00	24	60			15 00								89	60	—		—	
												30 00													
29758	12	29693	28			20	00	24	60	12261 21		15 00								162	00				
												30 00								60	00				
29887	30					102	40					30 00								664	80				
War Service Gratuity																Other Charges	W.S.G.	S.A.	Total	Balance Soldier Dependant					
																	70 00	30 00	~~70 00~~ 100 00	350 00	150 00				
																	70	30	100	280	120				
																2 10			2 10	277 90	120				
																	67 90	30	97 90	210	90				
																	70	30	100	140	60				
																	70	30	100	70	30				
																	70	30	100						
																			600						

PARTICULARS OR REMARKS

600 Subs

45.00 S.A.+A.P. May. Chq. #4030 - 26-5-19
45.00 S.A.+A.P. June " 6353 21-6-19
45.00 S.A.+A.P. July Chq. #9406 21-7-19
35.00 66 70.00 W.S.G. 24.00 Subs. D.O. 30/10
30.00 W.S.G. Bk. 12486

1629400 1629401

2.10 W.C. no Nov. 70 no Dec. 70 no Jan. 70
TOR 2.10

1646505 506
1793331 1793332
1799 892 893
1802557 558

60m.-11-18. L.L. 51777. M. & D. 9585.

Statement of the Soldier

(This is to be completed only in the case of the Soldier taking his Discharge in England.)
(Sections 1, 2, 5, and 6 are to be read to the Soldier.)

I, the undersigned..... have heard the description of my disability read, and am satisfied (or not satisfied) with it. (If dissatisfied, statement should follow.) I complain in addition of :—

.....
Signature of Soldier examined.

Instructions to Medical Officers

Question 1.—State the disability in terms of a diagnosis, that is, a diagnosis of the existing condition as distinguished from the disease or injury which caused it. It should be noted that in medical cases the disability may be the actual disease; for example, Tubercle of Lung, Chronic Bronchitis, Myalgia, Gastric conditions and so forth. (Follow the nomenclature as laid down in the "List of Diseases" of 1915, and amended by A. C. I. No. 1587 of 1917.)

Question 2.—The cause of the disability when known should be stated and care should be taken to establish as correctly as possible the place and date of origin. This is important in view of the relationship of Questions 3 and 4 to Question 5.

Questions 3 and 4.—*NOTE*—By Active Service is meant Service with the Colours in Canada, the United Kingdom or elsewhere during the present war, (since the 4th August, 1914.)

Question 5.—MEDICAL HISTORY.—State concisely the essential points of the history of the case as supported by documentary evidence. If further evidence is considered necessary to complete the Medical History, the same not being supported by documents, this should be obtained by questioning the soldier, but should be distinctly shown as "Patient's Statement." It is considered advisable that these latter statements be grouped apart from the evidence supported by documents available to the Medical Officer.

Extracts should be made from all entries on the Medical History Sheet.

If answers to Nos. 2, 3 or 4 show that the Soldier is suffering from some condition which pre-existed enlistment, it is advisable that these answers be substantiated as far as possible by statements obtained from the Soldier showing history of previous illness or injury.

Question 6.—PRESENT CONDITION.—As this question is primarily intended for the Medical Officer's report, in answering show clearly the condition of the Soldier at the time of examination.

It is directed that the objective and subjective matter be arranged in separate groups. The objective matter is considered to be the more important, in that it consists of a statement of the Medical Officer's actual finding.

Specialists' reports bearing on the PRESENT CONDITION should be attached.

In addition to description of the disability, a report on "all systems" is required in order that the whole when completed may be a true pen portrait of the Soldier's condition.

The Medical Officer in charge of the case will fill out pages 1 and 2 of this Form. The original must be wholly in the handwriting of the Medical Officer. The copies may be typewritten but must be signed by the Medical Officer who must be responsible that these are true copies of the original.

Finally the O. C. Hospital or S. M. O. or an Officer delegated for such duty by the A. D. M. S., is required to sign a certificate at the bottom of page 2, which reads as follows :—

"I have satisfied myself of the general accuracy of this report and concur therewith, except....."

This is a most important part of the paper and one to which the attention of the Officers concerned should be frequently drawn as it is by such strict supervision that the accuracy and good results of Medical Board work can be assured.

ENTRIES OF RECATEGORIZATION

Date	Station	Category	Signature of M. O.	Date	Station	Category	Signature of M. O.

No documents available

Reserved for M.H.C.

Regt. No. 121541 Rank Pte. Surname Berthiaume Christian Name Joseph

Unit or Corps (a) Overseas from United Kingdom 32nd C.E.F.C. (b) in United Kingdom C.F.C. Sunnydale

Born at—Town Montreal County or Province Quebec Country Canada

Date of Birth—Day 3 Month October Year 1881 Age 37 yrs. 2 months

Joined at Montreal Canada Date Dec 10, 1915

Former trade or occupation Bar Tender.

Permanent Marks or any peculiarity that will serve for future identification :—

None.

Height—feet 5' inches 4½ Colour of eyes Grey.

Signature of Soldier (for identification purposes) Joseph Berthiaume

Medical Report

Read carefully the instructions on last page of this form.

1. DISABILITY.

Group the disabilities, placing those resulting from separate causes in separate groups.

Disabilities Group (a) Nil.

Disabilities Group (b) —

Disabilities Group (c) —

2. CAUSE OF DISABILITY

		Place of origin.	Date of origin.
(i.) As to Group (a) above.	Nil		
(ii.) As to Group (b) above.	—		
(iii.) As to Group (c) above.	—		

3. Is the disability due to disease contracted or injuries received prior to Active Service?

(i.) As to Group (a) above? — If yes, has Active Service aggravated it? —

(ii.) As to Group (b) above? If yes, has Active Service aggravated it?

(iii.) As to Group (c) above? If yes, has Active Service aggravated it?

4. Is the disability due to disease contracted or injuries received while on Active Service?

(i.) As to Group (a) above? —

(ii.) As to Group (b) above?

(iii.) As to Group (c) above?

no documents available

PART I. (continued).

5. MEDICAL HISTORY. Man states he is perfectly healthy has not been in hospital since he joined up 3 years ago - except for two weeks in hosp. in Le Havre. as result of slight injury to head, result of fall on the parade. This healed without complication. He before enlisting was addicted to morphia habit for 5 years. 1907 - 1912. Declares he has not used the drug since. There is no Documents in this case.

6. PRESENT CONDITION. General appearance of health fairly good. Looks slightly younger than his stated age. Physical Exam. findings nil. On the external surface of both thighs there is the evidence of frequent use of hypodermic needle.
urine — normal.
weight — 137 lbs.
No doubt Category was reduced on account of results of morphia habit.
Category reduced in England.

7. OPERATION. (i.) Was one performed? no (ii.) If so, state what.

(iii.) Was one advised and declined?

NOTE.—Loss of teeth on or immediately after Active Service should be attributed thereto, unless there is evidence to the contrary.

8. (i.) Is there loss or decay of teeth attributable to Active Service? no.

(ii.) If so, describe.

9. DO YOU RECOMMEND:— (b) Invalid to Canada? no

(a) Fit for duty? (state category) yes A. (c) Discharge from the Service as permanently unfit? no.

Date of Report 14-12- 1918. Signed Lt Reg Cavanaugh
Officer in medical charge of case.

Station Can Base Etaples.

I have satisfied myself of the general accuracy of the above Report, and concur therein *except Not in Hospital - {Officer i/c Hospital / S.M.O. Brigade} Strike out one of these

Dated at ..... Station, on ..... 191.....

*Delete if inapplicable.

PART II

Proceedings of a Medical Board on the Soldier mentioned in Part I.

10. Is the disability fully described in Part I. (1)? No
If not, describe it.
Flat feet.

11. Is the cause of the disability fully described in Part I. (2)? No
If not, describe it.
Natural Causes.

12. From the medical information now adduced, was the disability caused or aggravated by:— (a) Negligence of the Soldier {Caused? No / Aggravated? No} (b) Misconduct of the Soldier {Caused? No / Aggravated? No}

13. THE ENTIRE DISABILITY.—Without regard to his regular occupation, to what extent is his capacity lessened at present for earning a full livelihood in the general market for untrained labour?
(Estimate at none, 5%, 10%, 15%, 20%, etc.) 100%

14. THE DISABILITY DUE TO SERVICE.—*(See Part I. (3). Aggravation on Active Service of a disability existing previous to joining is to be included in this estimate.)*
What part of the entire disability estimated next above (13) is due to causes arising during Active Service?
(Estimate at none, 1/10, 2/10, 3/10, etc., or all.) none.

15. Permanency of the Disability due to Service estimated next above in (14).
(i.) Is it permanent? nil
(ii.) If not permanent, what is its probable minimum duration *(in months)*?

16. If an operation was advised and declined, do you consider the refusal to have been unreasonable? n.a.

17. Can the former trade or occupation be resumed? yes

18. REMARKS:—
This soldier states that he can't march more than two miles. Has bunion of left foot — and slight degree of flat feet. Seems mentally dull -

O.9.1-9083- 11-11-18

19. RECOMMENDATION:— (b) Invalid to Canada? No

(a) Fit for duty? (state category) ~~yes~~ B1 (c) Discharge from Service as permanently unfit? No

Date of Board 14-XII-18 Signatures of the Board: J L Gow Major & President. P Rossnbaum. Capt.

Station Can. Base Etaples

Approved S R Boon A.D.M.S.
Dated at Etaples Station Etaples 191

List of Discharge Documents.

Reg. Conduct Sheet,	Militia form B. 263	Attestation Paper or Particulars of Recruit	Militia Form W. 23 " W. 133
Squadron / Battery / Company Conduct Sheet, or Field Conduct Sheet	" B. 263a " W. 178	Proceedings on Discharge	" B. 218
Copies of Convictions, by C. P.	in MS.		
Med. Hist. Sheet,	Militia form B. 313		
Casualty Form	" W. 54		
Medical Report for Invalid§	" B. 227		
Dental History Sheet	" B. 465		
Last Pay Certificate	" W. 44		
Duplicate Discharge Certificate	" W. 39A		
‡Form of Will	" W. 82		

§Only if discharged "Medically unfit."

‡Only if man has not been overseas.

In the case of recruits who are rejected on final approval, the discharge documents will consist of

(a) Proceedings on Discharge.

(b) Attestation.

(c) Medical History Sheet.

Documents not accompanying this form should be crossed out.

I hereby certify that the following documents are unobtainable.

Officer Commanding.

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

7167

WAR SERV.
Class "A" No. 25

This space to be for numbers.

No 245

Proceedings on Discharge.

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

BBR 24684

M

No. 121541

Rank Pte.

Surname BERTHIAUME, ~~XX~~

Christian name Joseph

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

Corps (Squadron, Battery or Company) 69th, BN

Date of discharge 30.8.19

Place of discharge MONTREAL, QUE.

H

1. DESCRIPTION AT THE TIME OF DISCHARGE.

Age 34 years 9 months.

Height 5 feet 4 inches.

Complexion Fair

Eyes Brown

Hair Brown

Trade Bar Tender

Intended place of residence (To be given as fully as practicable.) 199 St Elizabeth Montreal

Descriptive marks

Scars ~~XX~~1 on legs and arms due to hypodermic injection.

2. The above-named man is discharged in consequence of

Authority for discharge R.O. 1420 & 1894. On Demob.

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

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

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

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

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

M. F. B. 218.

200M.—5-18.
H. Q. 1772-39-113.

(OVER)

s in possession of the following number of G. C. Badges

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

6. Medals and Decorations.....

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

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

(Place).....

(Date).....

.....

Commanding.....

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

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

(Place) MONTREAL, QUE. J. Bertheaume *(Signature of Soldier.)*

(Date) AUG 30 1919 G. A. Tinker Sgt *(Signature of Witness.)*

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

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

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

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

10. **Statement of Service.**

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

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

11. **Confirmation of Discharge.**

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

(Place) MONTREAL, QUE.

(Signature).....

(Date) AUG 30 1919

Reservations referred to at Para. 8.

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

NO RESERVATIONS

J. Bertheaume