

17M N. 15-5-18.

DISCHARGE DOCUMENTS

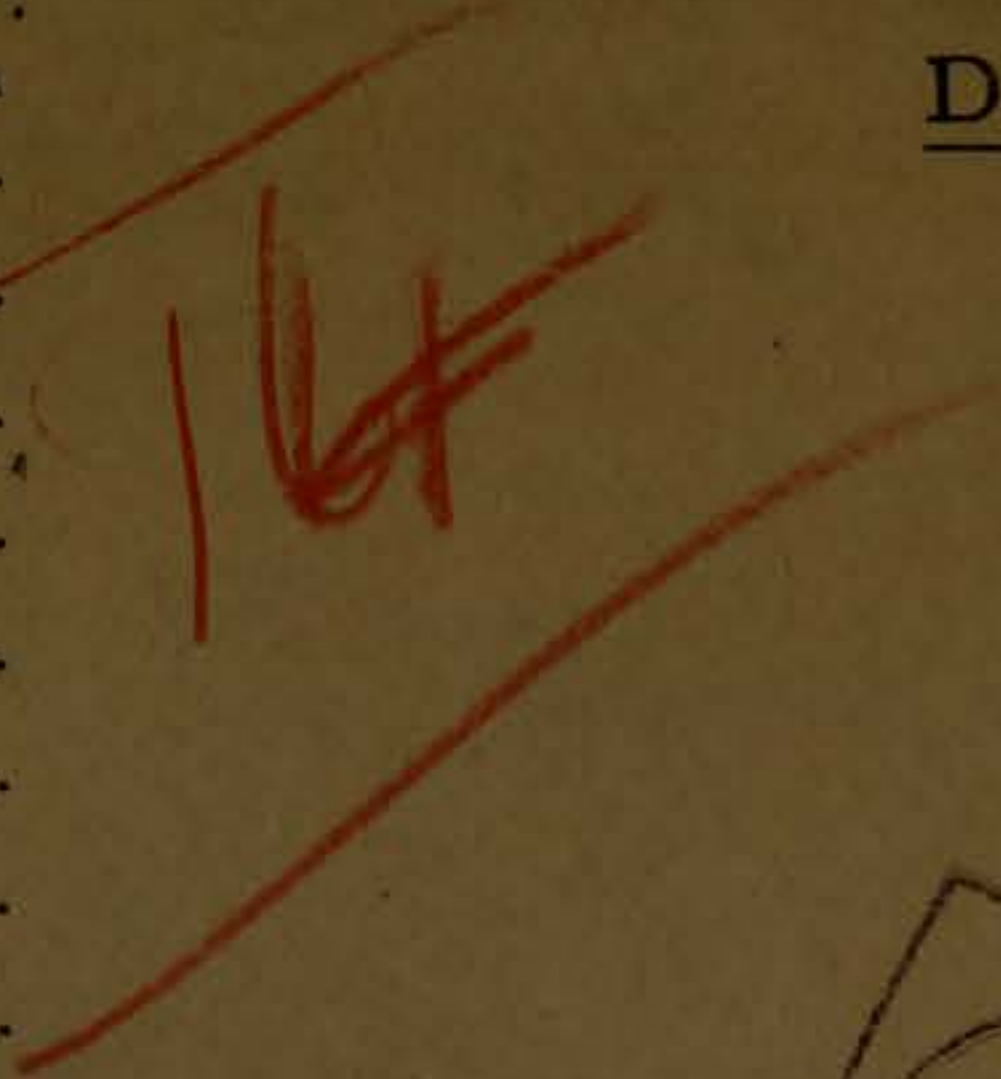
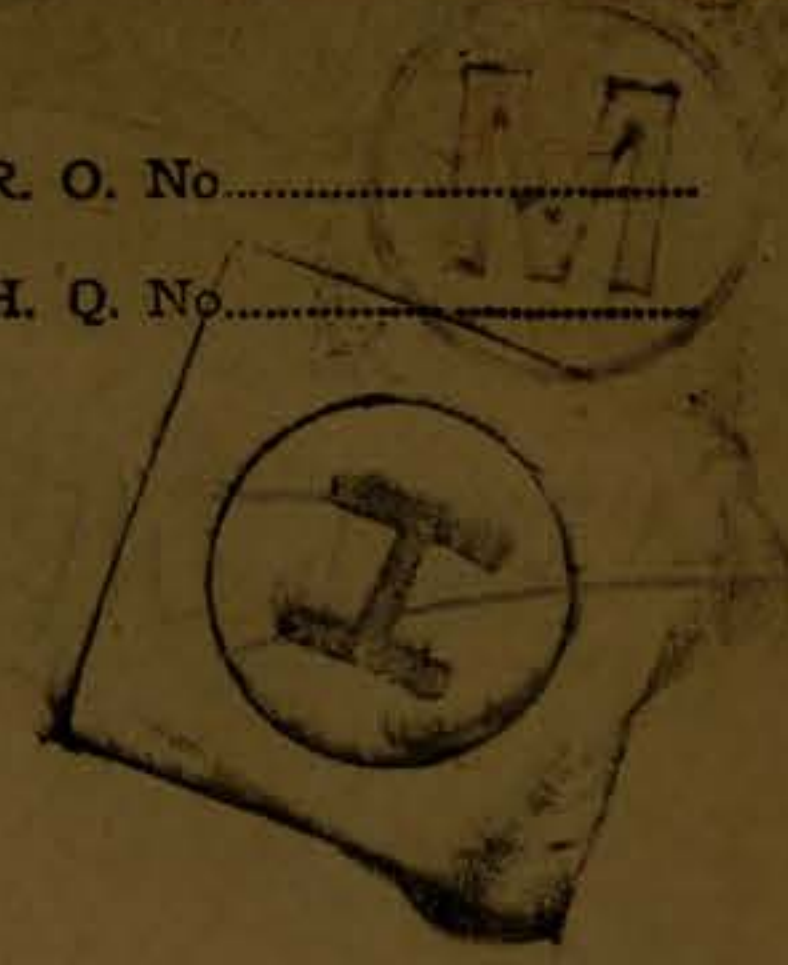
R. O. No. ....  
H. Q. No. ....



- Proceedings of Court of Inquiry or on men reported Missing on Active Service.....
- Attestation Papers..... 15
- Declaration of change of name.....
- Authority for special enlistments.....
- Documents of re-enlisted men.....
- Regimental Conduct Sheet.....
- Compulsory Stoppages.....
- Casualty Forms..... 1
- Proceedings on discharge.....
- Corps History Sheet.....
- Date and No. of Deposit Receipt for Purchase Money and Amount.....
- Parchment Certificate.....
- Medical Report for Invalids.....
- Medical History Sheet.....
- Proceedings of Regt. Court Martial.....
- Copies of Convictions by Civil Power.....
- Company Conduct Sheet.....
- Clothing Transfer Certificate.....
- Inventory of Kit.....
- Last Pay Certificate.....

Name Briere Armand  
 Regt. No. 25513 Rank Pvt.  
 Corps 14th Bn. (3rd Cycle)

39171



~~1 Ind. & Removed 9/1/18~~  
~~1 Part. Order~~  
~~1 Casualty~~

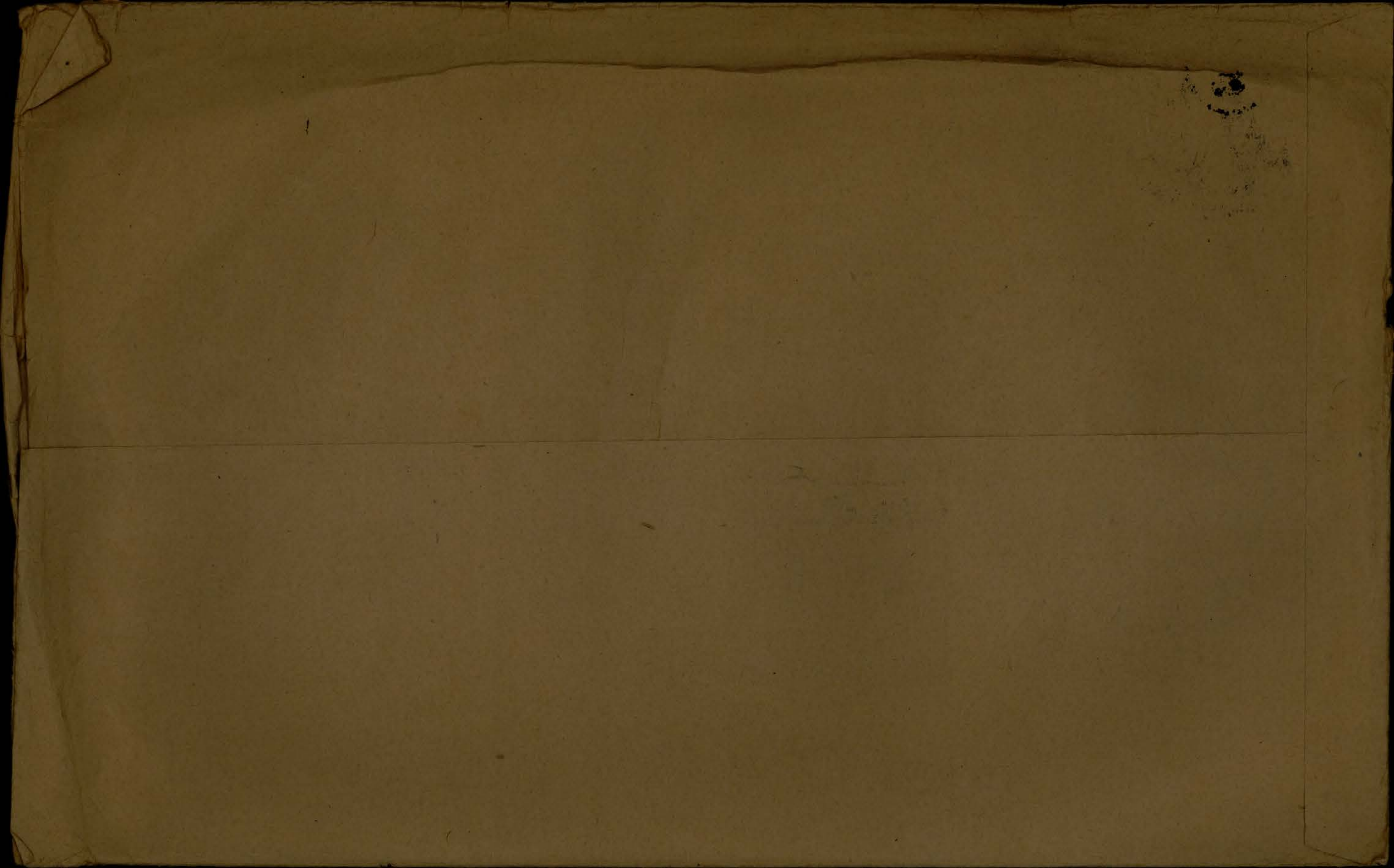


*Killed in Action 8-6-15.*

*A. S. B. 178 — 2.*  
*R. 149. — 1.*  
*Form of Will — 1.*

*91-21*  
*20-21*  
*17-22*

*179122*



25513

ORIGINAL

Base

# ATTESTATION PAPER.

No.

Folio. 135

## CANADIAN OVER-SEAS EXPEDITIONARY FORCE.

### QUESTIONS TO BE PUT BEFORE ATTESTATION.

(ANSWERS).

1. What is your name?..... *Armand Briere*
2. In what Town, Township or Parish, and in what Country were you born?..... *St Jean Baptiste Montreal*
3. What is the name of your next-of-kin?..... *George Briere*
4. What is the address of your next-of-kin?..... *109 St. Christopher Montreal*
5. What is the date of your birth?..... *Dec 26-1897*
6. What is your Trade or Calling?..... *Driver*
7. Are you married?..... *No*
8. Are you willing to be vaccinated or re-vaccinated?..... *Yes*
9. Do you now belong to the Active Militia?..... *Yes*
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 Briere* (Signature of Man).  
*Robert Roy* (signature of Witness).

### DECLARATION TO BE MADE BY MAN ON ATTESTATION.

I, *Armand Briere*, 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 21* 1914. *Armand Briere* (Signature of Recruit)  
*Robert Roy* (Signature of Witness)

### OATH TO BE TAKEN BY MAN ON ATTESTATION.

I, *Armand Briere*, 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 21* 1914. *Armand Briere* (Signature of Recruit)  
*Robert Roy* (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 *21* day of *Sept* 1914.

*[Signature]* (Signature of Justice)

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

*[Signature]* (Approving Officer)

#8

Briere

Description of Briere Armand on Enlistment.

Apparent Age 22 years 9 months.  
(To be determined according to the instructions given in the Regulations for Army Medical Services.)

Distinctive marks, and marks indicating congenital peculiarities or previous disease.

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

Height 5 ft. 8 ins.

Chest measurement. { Girth when fully expanded 34 1/2 ins.  
Range of expansion 2 1/2 ins.

Complexion Dark

Eyes Brown

Hair Black

2 Vac.

Religious denominations. { Church of England  
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 19 1914.

Place Valcartier

J. C. Deryn Capt  
Medical Officer.

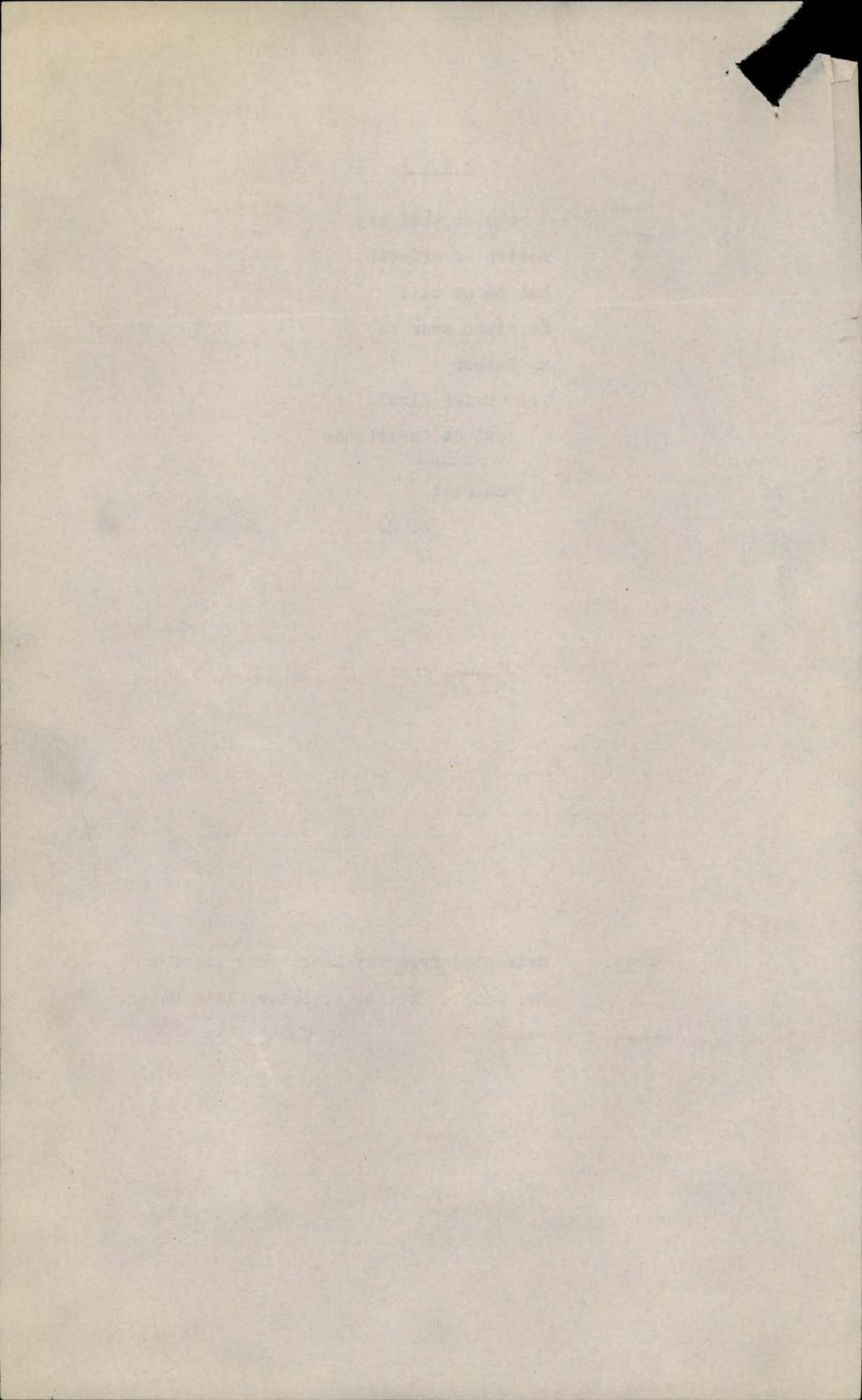
\*Insert here "fit" or "unfit."

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.

Briere Armand 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.

J. C. Deryn (Signature of Officer)  
Date 22 Sept 1914.



W I L L.

I request that any  
monies or effects  
Due to me will  
be given over to  
my Mother

Mrs. Brier Lizzie

1096 St Christophe

---

Montreal

P. Q.

Note.      Extracted from Pay Book, Page 14 of  
No. 2551<sup>3</sup>, Pte. A. P. Brier, 14th Battn.

Report		Name and Address of Next of Kin	Place	Date	REMARKS Taken from Official Documents
Date	From whom received				



Rank and Name BRIERE, Armand.

Regimental No. 25513

Unit 14th. Battalion

Date of enlistment Sept. 21st. 1914.

Place of birth St. Jean Baptiste, Montreal

Married (Yes or No) No.

If in Permanent Force

Name and Address of Next-of-kin

George Briere,  
1096 St. Cristophe Columb,  
Montreal

Date and place of discharge

Reason for discharge

Character on discharge

Promotions or appointments

*At 25-13-449.*

*Killed in action*

*mx  
10/18/01*

*2150  
2150*

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>Nov. 1914</i>	<i>O.C. 14<sup>th</sup> Bn.</i>	<i>Drunk on parade - 10<sup>th</sup> fine</i>	<i>Larkhill</i>	<i>Dec. 3/1914</i>	<i>Part II orders N°5.</i>
<i>3/5/15</i>	<i>O.C. 14<sup>th</sup> Bn.</i>	<i>Having arrived in France</i>	<i>Poues</i>	<i>3/5/15</i>	<i>Part II orders 21,</i> <i>added to strength</i>
<i>21/5/15</i>	<i>Done</i>	<i>Killed in action</i>	<i>In the Field</i>	<i>8/6/15</i>	<i>Car. list 77.</i> <i>Part II orders 22</i> <i>Army Form B 0090a.</i> <i>A.B. 104-93 attached to file</i> <i>Ottawa notified</i>

*Corrected date  
H. H. H.  
21/5/15*





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				

13

Casualty Form—Active Service.

Regiment or Corps 14<sup>th</sup> Can Bn. P.W. A.

Regimental No. 25513 Rank Pte Name Priore Arnaud

Enlisted (Sept. 23/14) Terms of Service (a) Period of War Service reckons from (a) Sept. 23/14

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) \_\_\_\_\_

Report		Record of promotions, reductions, transfers, casualties, etc., during active service, as reported on Army Form B. 213, Army Form A. 35, 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				
<u>30/5/15</u>	<u>C. Co. Bn.</u>	<u>Killed in Action</u>	<u>Field</u>	<u>31/5/15</u>	<u>P. 213</u> <u>[Signature]</u>
				<u>21/5/15</u>	

CAPT. OFFICER in RECORDS CANADIAN SECTION G. H. Q.

(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.]

# POST DISCHARGE PAY OFFICE

Three months pay and allowances after discharge.

Name Surname Christian Name

---

Regimental Number Rank Address (in full)

Unit

Original Unit

District where paid

Date of Discharge

P. D. P. Filing Number

Rates:—Regimental pay \$ per diem; Field Allowance \$ per diem. Separation Allowance \$ per month.

L.L. 53961—M. & D. 9721

Total Credits 91 days	FIRST PAYMENT			SECOND PAYMENT			FINAL PAYMENT			Balance Overpayments to be Recovered	Total Amount Paid
	Cheque No. A	Date	Amount 30 days	Cheque No. P	Date	Amount 30 days	Cheque No. C	Date	Amount 31 days		

M. F. W. 127  
 300M-1-19  
 1772-39-1140

Remarks.

Register No. DB 124

WAR SERVICE GRATUITY  
TO  
DEPENDENTS OF DECEASED SOLDIERS

A.P. File No. 2131-a-58

*EWK*

Regt'l No. 25377 Name Armand Briere  
(Christian Name) (Surname)

Unit 14th O. Bn Rank Pte Date of enlistment.....

Date of casualty 21-5-15 B.P.C. File No. 3317

Was service performed overseas? yes

DEPENDENT

Name Mrs Eliza Briere Relationship Mother

Address 1090 St Christopher St,  
Montreal,  
P.Q.

Amount of Special Pension Bonus \$ Nil Abstracted by G M O'Reilly

Eligible for Gratuity Not eligible \$.....

Less amount of Special Pension Bonus paid..... \$.....

Less Debit Balance of S. A. or A.P..... \$.....

Total deductions \$.....

Balance due \$.....

Cheque No..... Date issued.....

REMARKS: No gratuity issuable as  
no SA paid to dependent.  
S.

*Noted 19/8/20*

Clerk G M O'Reilly  
13/20

Audited by  
[Signature]  
Date 13/7/20

M.F.W. 2652  
25M-6-20.  
H.Q. 1772-39-1473



NAME BRIERE, Armand. *Transport Driver*

Regimental No. 25513

Name and address of next-of-kin

Unit 14th Battalion

Georges Briere,  
*Colomb*  
1096, St. Christophe, Montreal.

Date of enlistment Sept. 21st, 1914.

Place of birth St. Jean <sup>Baptiste</sup> Mathes, Montreal.

Married (yes or no) No.

Date and place discharged 21/5/15\*

Amount of pay assigned monthly \$

Reason for discharge Transferred to 12<sup>th</sup> Battalion  
Killed in action\*

To whom payable

Character on discharge

*no assets as of 13. 21/3/16*

Date		PAY		Field Allowance		Other Credits	Total Credits	Voucher		Cash Payments	Assigned pay	Other Charges	Total Debits	Remarks, Casualties, etc.
From	To	No. of Days	Rate	Amount	No. of Days			Rate	Amount					
1914														
Sept 22	Oct 31	40	1.00	40.00	40	.10	4.00			35.00		35.00		
Nov 1	Nov 30	30	1.00	30.00	30	.10	3.00	9.00		25.00		25.00		
1/12/14	31/12/14	31	-	31.00	31	-	3.10	7.00		25.00	2.50	27.50		Fined 10p
1/1/15	31/1/15	31	-	31.00	31	-	3.10	13.60		5.00		5.00		
1/4/15	28/2	28		28.00	28		2.80	42.70		72.50		72.50		
1/3/15	31/3	31		31.00	31		3.10	1.00		12.50	15.40	27.90		Residence to office 10 days, detention absent 2 days 2 days 2-3 F.F.
1/4/15	30/4	30		30.00	30		3.00	7.20		185.00				Trans 14 <sup>th</sup> Batt
1/5/15	31/5/15	31		31.00	31		3.10	40.20						
July								74.30					11.00	11.00 = 10 days overcredited in May.
N.E.	Dec.							4.93					68.23	Transf to N.E. Branch
								68.23					68.23	Casualty Report Forwarded to Ottawa for Settlement 25/3/16

Statement of  
MAR 28 1916  
Account rec.

Cash found in  
office  
*nil*

CHECKED BY.....

DATE.....

PAY OFFICE, N. E. BRANCH  
AUG 31 1915  
CANADIAN CONTINGENTS

# EPITOME OF HOSPITAL TREATMENT.

Hospital

Adm.

1.

2.

3.

4.

5.

6.

7.

Surname

Christian Name or Names

Reg. No.

*Briere*

*A.*

*25513*

Rank

Unit

Co.

Troop

Batty.

*Pte*

*14<sup>th</sup> Bn.*

Hospital

Date of Admission

*Kept from Base*

Transferred

Hosp.

Hosp.

Hosp.

Hosp.

Diagnosis

(1) Later Diagnosis (if changed)

*Killed in action*

*20.5.15*

(2)

(3)

Additional Diagnosis: if more than one state present

DISPOSITION

Date

*Ch. 8.6.15 #77*


REMARKS

*Killed in action*

A.M.D. 2 DEPT.

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



From Quebec per  SS "Andania" 4/10/14

MARRIED SINGLE *yes* WIDOWER

TRADE OR CALLING *Driver* RELIGION *Roman Catholic*

DESCRIPTION.

APPARENT AGE *22* YEARS *9* MONTHS

HEIGHT *5-* FEET *8* INCHES

CHEST MEASUREMENT *34 1/2* INCHES EXPANSION *2 1/2* INCHES

COMPLEXION *dark* EYES *brown* HAIR *black*

DISTINGUISHING MARKS *2 vacc.*

MEDICAL EXAMINATION. PLACE *Valcartier, P.Q.* DATE *Sept. 19th. 1914*

*Present address: Not stated.*

SURNAME.

*Briere*

CARD NO.

**D** 6

CHRISTIAN NAMES

*Armand.*

FOLL.

REGL. NO.

*25-5-13*

RANK

*Pte.*

UNIT

*14th. 3rd. Bgde.*

*Bn.*

FORMER CORPS

*nil.*

NEXT OF KIN.

CHANGE OF ADDRESS

NAMES IN FULL

*Briere, George.*

RELATIONSHIP TO SOLDIER

*Not stated*

ADDRESS

*1096 Christophe Colomb St.,  
Montreal, P.Q.*

COUNTRY OF BIRTH

*Canada, Montreal, P.Q.*

DATE

*Dec. 26th 1897.*

PLACE OF ATTESTATION

*Valcartier, P.Q.*

DATE

*Sept. 22nd 1914.*

*0/84-10-14*

LIST No.

HOSPITAL

DATE OF  
ADMISSION

REMARKS

✓ 77.

Rept from base.

21. 5. 15.

Killed in action

H. Q. FILE No. 649-B-682

REGT'L. No. 25513. ✓

NAME Briere, Armand.

RANK AND CORPS Pte.

14<sup>th</sup> Battalion

NO.
2502
FOLL.

NATURE OF CASUALTY

CABLE	
No.	DATE

e. 2040	June 8/15	Killed in action
B2090a	10/7/15	Do
	Rouen	

21<sup>st</sup> May 1915.

DEEP. DEC 15 1841

HEER. M. M. M. M.

*MS. A. 1. 1. 1.*

Number: *25513* Rank: *Pte.*

Surname: *BRIERLE*

Christian Names: *Armand*

Unit: *14th Bn. Can. Exp.* Theatre of War: *France*

Dates of Service: *17-10-14* *15-2-15* *21-5-15*

Remarks: *Mother*

Latest Address: *Mrs. Geo. Briere*  
*1096 - St. Christopher St.*  
*Montreal*

Roll No. *B*

*X*  
*X*

M

C51445 - 19-8-21

906

*Star*

Briere. Armand., Pte. 2551<sup>7</sup> 14th Bn. 649-B-682

Med. & Dec. ( Mother ) Mrs. Geo. Briere.  
1096 St. Christopher St.,  
Montreal. P. Q.

~~Scroll Desp. Regt. No.~~

FEB 13 1922

~~Plaque Desp. Regt. No. P 29520~~

P. & S. ( Father ) Geo. Briere. Esq.,

*Rev #765052.*

Address as above.

Mem. Cross. ( Mother ) " " "

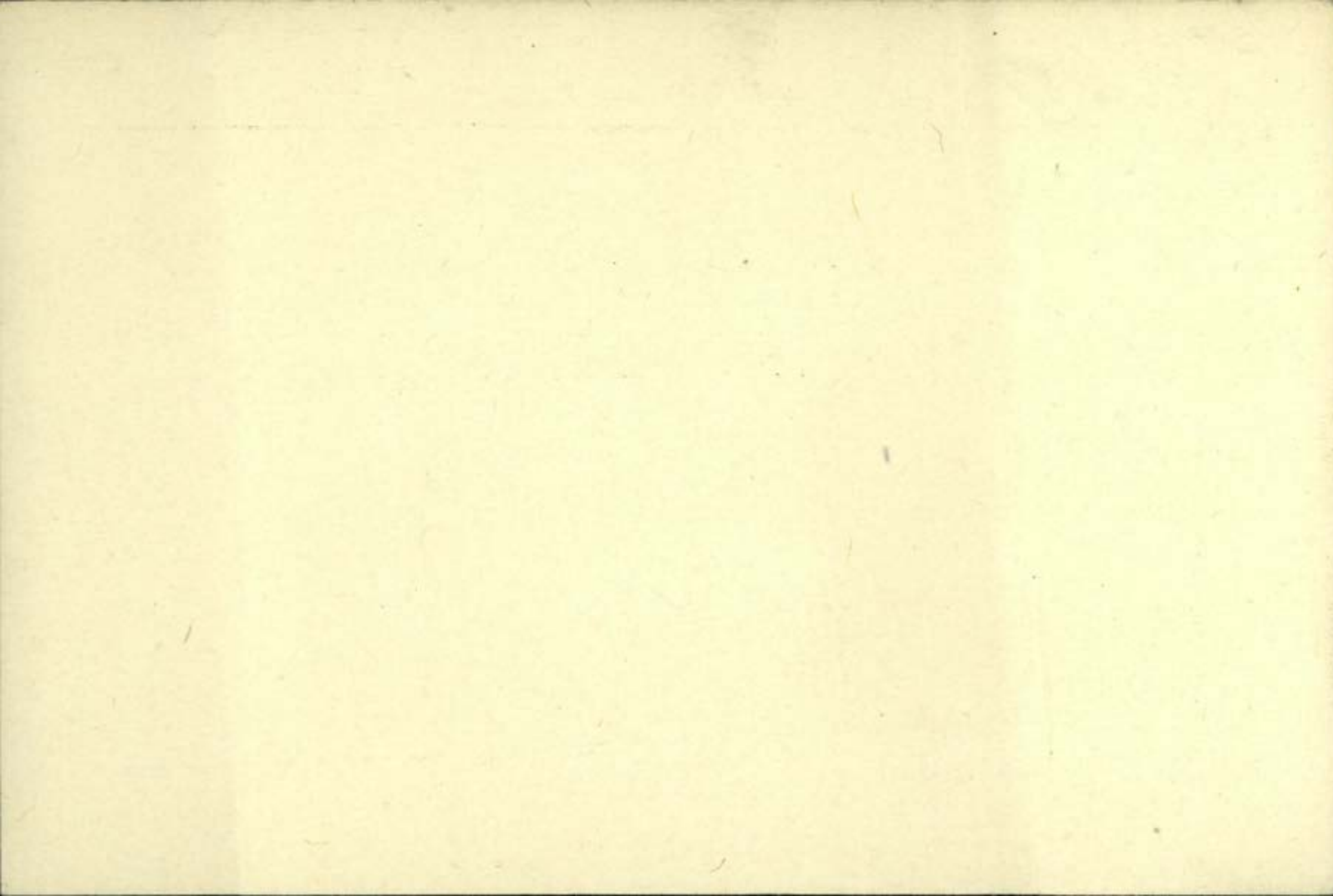
*Eligible for star Pte 14th Bn.  
C. L. G. " V. M.  
C. L. G. " B. W. M.  
M. J. G.*

55681

*111*

*2*





No 25517

RANK *pte*NAME *Briere Armand*

T. O. S.

UNIT *65<sup>th</sup> Regt C.M.R. (Carabiniers Mount Royal)*

M. D.#

PAID FROM	PAID TO	SIG. OR REC'T	PROMOTIONS, TRANSFERS, DISCHARGES, ETC.	
			PARTICULARS	AUTHORITY
<i>1914 aug. 13</i>	<i>1914 aug. 24</i>	<i>✓</i>	<i>In 14<sup>th</sup> Br. payroll. shown. trans-driven.</i>	<i>act payroll.</i>
<i>" 25</i>	<i>sept. 21</i>	<i>✓</i>		
<i>sept 22</i>	<i>oct 31</i>	<i>✓</i>		

UNIT SAILED

OCT 3 1914

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

Name **Briere, A.**

Rank **Private**

Reg. No. **22513**

Unit **14th Battalion**

*[RL 25-B-449]*

Next of Kin **Canada.**

Date	Movement	Place	Casualty	List No.	Notified N/K O.	W.O. List
<i>1915 21.5</i>	<i>Rept for Base. Killed in action</i>			<b>77</b>	<i>8/6</i>	

**Table III.—Boards ; Courts of Inquiry, Vaccination, Inoculations, etc. ; Examinations for Field or Foreign Service, Extension, Re-engagement, or Prolongation of Service ; Issue of Surgical Appliances ; Particulars of Dental Treatment, etc.**

Date	Brief details, and signature.
	Inoculation - Twice - Valcartier.

**Table IV.—Service Table.**

Station or Troopship	Date of arrival or embarkation	Date of departure or disembarkation	Station or Troopship	Date of arrival or embarkation	Date of departure or disembarkation

Army Form B. 178.

To be used for recruits enlisting direct into the Regular Army only. Army Form B. 178<sup>A</sup> to be used for Special Reserve recruits and Special Reservists enlisting into the Regular Army.

**MEDICAL HISTORY of**

Surname BRIERE Christian Name Armand

TABLE I.—GENERAL TABLE.

Birthplace ... Parish \_\_\_\_\_ County \_\_\_\_\_

Examined ... { on \_\_\_\_\_ day of \_\_\_\_\_ 191 .  
at \_\_\_\_\_

Declared Age ... years \_\_\_\_\_ days.

Trade or Occupation ... \_\_\_\_\_

Height ... feet, \_\_\_\_\_ inches.

Weight ... lbs. \_\_\_\_\_

Chest Measurement { Girth when fully Expanded. \_\_\_\_\_ inches  
Range of Expansion \_\_\_\_\_ inches

Physical Development ... \_\_\_\_\_

Vaccination Marks { Arm ... Right \_\_\_\_\_ Left \_\_\_\_\_  
Number \_\_\_\_\_

When Vaccinated ... \_\_\_\_\_

Vision ... { R.E.—V= \_\_\_\_\_  
L.E.—V= \_\_\_\_\_

(a) Marks indicating congenital peculiarities or previous disease ... { (a) \_\_\_\_\_

(b) Slight defects but not sufficient to cause rejection ... { (b) \_\_\_\_\_

Approved by (Signature) \_\_\_\_\_  
(Rank) \_\_\_\_\_

Medical Officer.

Enlisted ... { at \_\_\_\_\_  
on \_\_\_\_\_ day of \_\_\_\_\_ 191 .

Corps.	Regtl. No.
12th Battrn.	25513

Became non-effective by \_\_\_\_\_

on \_\_\_\_\_ day of \_\_\_\_\_ 191 .

(Signature) \_\_\_\_\_

(Rank) \_\_\_\_\_

This Medical History Sheet has been compared with the Corresponding Attestation Paper, and entries made in red have been taken from the Attestation Paper.

Partly the foregoing is a true copy of an original entry on a Military Chest of this man. C.A.M.C. for the Officer in Charge of Records Canadian Contingents.

ORIGINAL.

Army Form B. 178.

**Table III.—Boards; Courts of Inquiry, Vaccination, Inoculations, etc.; Examinations for Field or Foreign Service, Extension, Re engagement, or Prolongation of Service; Issue of Surgical Appliances; Particulars of Dental Treatment, etc.**

Date	Brief details, and signature

To be used for recruits enlisting direct into the Regular Army only. Army Form B. 178<sup>A</sup> to be used for Special Reserve recruits and Special Reservists enlisting into the Regular Army.

**MEDICAL HISTORY of**

Surname Briere Christian Name Armand.

TABLE I.—GENERAL TABLE.

Birthplace .. Parish \_\_\_\_\_ County \_\_\_\_\_

Examined .. .. . on \_\_\_\_\_ day of \_\_\_\_\_ 191 .  
 at \_\_\_\_\_

Declared Age .. .. . years \_\_\_\_\_ days.

Trade or Occupation .. \_\_\_\_\_

Height .. .. . feet, \_\_\_\_\_ inches.

Weight .. .. . lbs. \_\_\_\_\_

Chest Measurement { Girth when fully Expanded \_\_\_\_\_ inches.  
 Range of Expansion \_\_\_\_\_ inches.

Physical Development .. \_\_\_\_\_

Vaccination Marks { Arm .. \_\_\_\_\_ Right \_\_\_\_\_ Left \_\_\_\_\_  
 Number \_\_\_\_\_

When Vaccinated .. .. .

Vision .. .. . { R.E.—V = \_\_\_\_\_  
 L.E.—V = \_\_\_\_\_

(a) Marks indicating congenital peculiarities or previous disease .. .. . (a) Inoculated twice Vaccinated.

(b) Slight defects but not sufficient to cause rejection .. .. . (b) \_\_\_\_\_

Approved by .. (Signature) \_\_\_\_\_  
 (Rank) \_\_\_\_\_ Medical Officer.

The Medical History Sheets of all men proceeding overseas, must be returned by the Official Agent mandating their unit to the Record Office when they leave England.

W. E. WARD,  
Colonel in Charge of Records,  
Canadian Contingents, London.

**Table IV.—Service Table.**

Station or Troopship	Date of arrival or embarkation	Date of departure or disembarkation	Station or Troopship	Date of arrival or embarkation	Date of departure or disembarkation

Enlisted .. .. . on \_\_\_\_\_ day of \_\_\_\_\_ 191 .

Joined on Enlistment .. .. . { Corps. \_\_\_\_\_ Regtl. No. \_\_\_\_\_  
12<sup>th</sup> Battalion 25513

Transferred to .. .. .

Became non-effective by .. .. . on \_\_\_\_\_ day of \_\_\_\_\_ 191 .

(Signature) \_\_\_\_\_  
 (Rank) \_\_\_\_\_