

NAME BRINDAMOUR NARCISSE

C.E.F. REGIMENTAL DOCUMENTS

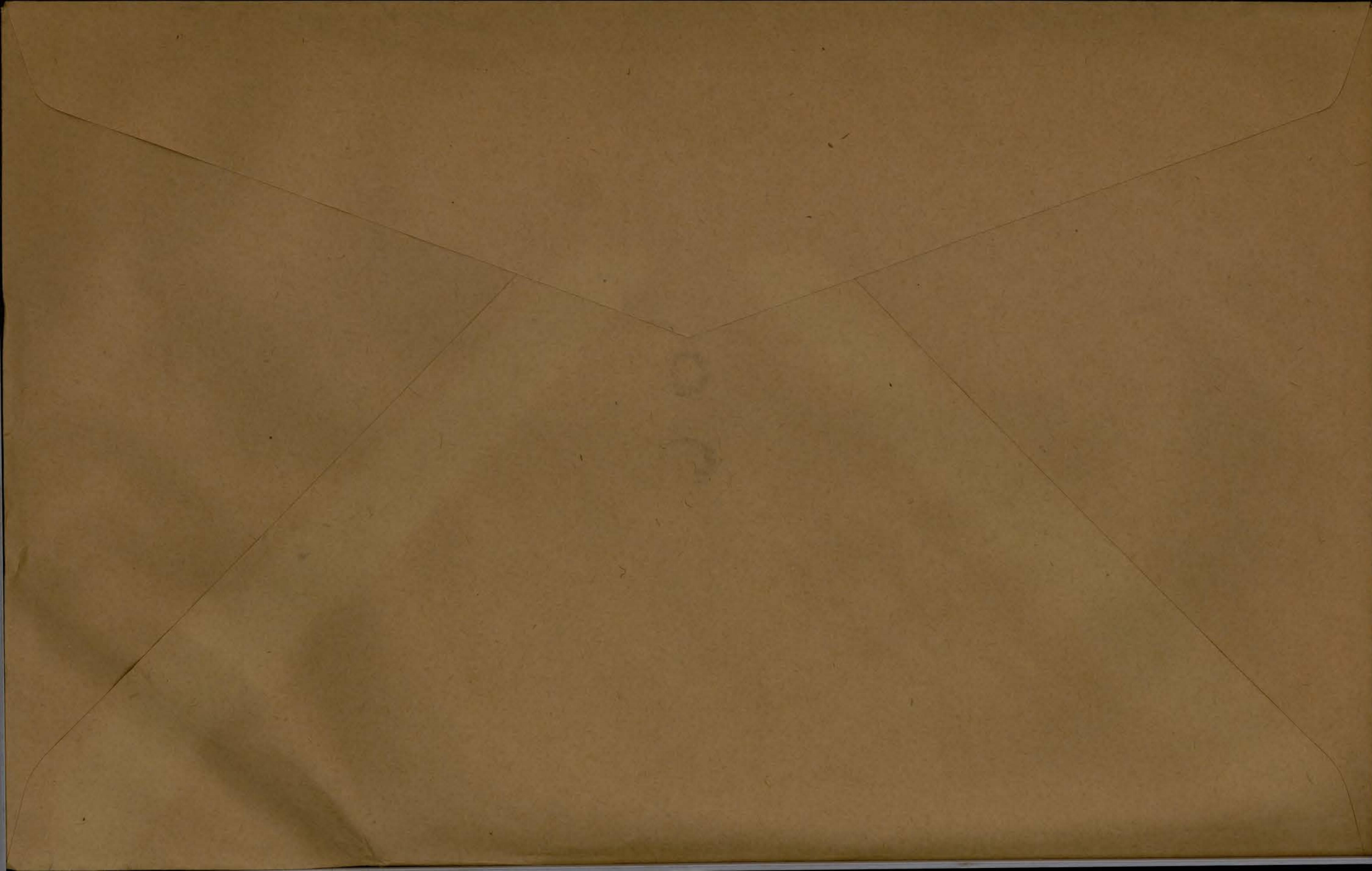
REGT. No. 2245433

UNIT FU

H. Q. FILE NO.

39681  
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PAY-SHEETS					



*"Foresters"*

ORIGINAL

# PIÈCE D'ATTESTATION.

CORPS EXPÉDITIONNAIRE CANADIEN D'OUTRE-MER

No. 2045433  
DEPT  
Folio MILITA & DEFENCE  
APR 27 1917  
H. Q. .... CANADA  
Done

## QUESTIONNAIRE REQUIS AVANT ATTESTATION

(RÉPONSES)

1. Quel est votre nom de famille? *Brie daeour*
- 1a. Quels sont vos noms de baptême? *Marcisse*
- 1b. Quelle est votre présente adresse? *38 rue St Laurent, Quebec*
2. En quelle ville, village ou paroisse, et en quel pays êtes-vous né? *L'Acadie, Gaspésie P.Q.*
3. Quel est le nom de votre plus proche parent? *Marie Brie daeour*
4. Quelle est l'adresse de votre plus proche parent? *38 rue St Laurent, Quebec*
- 4a. Quel est votre degré de parenté avec celui? *Mere*
5. Quelle est la date de votre naissance? *25 mars 1881*
6. Quel est votre métier ou profession? *Charpentier*
7. Êtes-vous marié? *Non*
8. Consentez-vous à être vacciné ou revacciné et inoculé? *Oui*
9. Faites-vous déjà partie de la Milice active? *Non*
10. Avez-vous déjà fait du service militaire? *Oui (dans le Q.O.C.H. 8 ans)*  
(En ce cas, mentionner les états de service)
11. Comprenez-vous bien la nature et les termes de votre engagement? *Oui*
12. Consentez-vous à être attesté pour service dans le Corps Expéditionnaire Canadien d'outre-mer? *Oui*

13. Avez-vous été réformé du service militaire pour incapacité? *Non*
14. Si oui, quel était la nature de cette incapacité? *None*
15. Avez-vous déjà offert vos services dans une des branches du service militaire de Sa Majesté, et avez-vous été refusé? *None*
16. Si refusé, quelle en était la raison? *None*

## DÉCLARATION REQUISE DU SUJET

Je, *Marcisse Brie daeour*, déclare solennellement que ce qui précède contient les réponses que j'ai faites au questionnaire ci-dessus, et que ces réponses sont véridiques, et que je consens à remplir les engagements que je prends maintenant, et je m'engage et consens à servir dans le Corps Expéditionnaire Canadien d'outre-mer et à être affecté à une arme quelconque dans le service de ce Corps pour le terme d'une année, ou pour la durée de la guerre actuellement engagée entre la Grande Bretagne et l'Allemagne si elle dure plus d'une année, et pour six mois après la conclusion de cette guerre dans le cas où Sa Majesté requerrait mes services d'autant, ou jusqu'à ce que je sois légalement libéré.

*Marcisse Brie daeour*

(Signature de la Recrue)

Date. *4 avril 1917.*

*Paymon Faure*

(Signature du Témoin)

## SERMENT REQUIS DU SUJET

Je, *Marcisse Brie daeour*, prête le serment d'être fidèle et de donner mon entière allégeance à Sa Majesté le Roi George V, ses Héritiers et Successeurs, de me faire un devoir de défendre honnêtement et fidèlement la Personne, la Couronne et la Dignité de Sa Majesté, et de ses Héritiers et Successeurs contre tous ennemis, et d'obéir ponctuellement à tous les commandements de Sa Majesté, de ses Héritiers et Successeurs, ainsi que de tous Généraux et Officiers placés au-dessus de moi. Ainsi Dieu me soit en aide.

*Marcisse Brie daeour*

(Signature de la Recrue)

Date. *4 avril 1917.*

*Paymon Faure*

(Signature du Témoin)

## CERTIFICAT DU MAGISTRAT

La Recrue ci-dessus nommée a été prévenue par moi que, s'il répondait faussement à aucune des questions ci-dessus, il serait passible des pénalités pourvues par la loi de l'Armée.

Les questions ci-dessus ont alors été lues à la Recrue en ma présence.

J'ai vu avec soin, à ce qu'il comprit chaque question, et à ce que les réponses à chacune fussent dûment inscrites telles que reçues, et la dite Recrue a fait et signé la déclaration et prêté le serment en ma présence, à... *Québec* ce quatrième jour de *avril* 1917.

*Paymon Faure Capta*

(Signature du Juge)

*Juge de Paix*

M. F. W. 23a  
40M.-4-18.  
1772-33-841.

N.B.—Les personnes faisant des réponses prévues aux questions posées ci-dessus sont passibles d'un emprisonnement de six mois.

Signalement de *Bud d'Amour* à l'Enrôlement

Age apparent..... *38* ans *7* mois.  
 (Déterminable d'après les instructions contenues dans les règlements du Service Médical de l'Armée.)

Taille ..... *5* pieds *4 1/3* pouces

Mesure de la poitrine { Tour de poitrine, à pleine expansion ..... *35* pouces  
 Marge d'expansion ..... *36* pouces

Teint ..... *Fair*

Yeux ..... *Blue*

Chevelure ..... *Brown*

Confession religieuse | Anglican.  
 Presbytérien.....  
 Méthodiste.....  
 Baptiste ou Congregationaliste.....  
 Catholique Romain ..... *R.C.*  
 Juif.....  
 Autres dénominations.....  
 (Indiquer laquelle)

Signes distinctifs, et indices d'affections congénitales ou de maladies antérieures.

Si le Médecin-Officier est d'avis que la Recrue a fait du service antérieurement, il devra, à moins que l'engagé reconnaise le fait, ajouter une note à cet effet pour l'information de l'officier approbateur.

CERTIFICAT D'EXAMEN MÉDICAL

Ayant examiné le sujet ci-haut nommé, je constate qu'il ne présente aucune des causes de rejet spécifiées dans les règlements du Service Médical de l'Armée.

Il peut voir de chaque œil à la distance requise ; le cœur et les poumons sont sains ; il a le libre usage de ses articulations et de ses membres, et il déclare n'être sujet à aucune syncope quelconque.

Je le considère\* ..... *fit* pour le Corps Expéditionnaire Canadien d'outre-mer.

Date ..... *10 - 4 - 17* 191

Lieu ..... *Quebec*

*W. A. C. G. C. / Quebec City  
Leedale Grange  
J. B. B. H. L. / Quebec*

Médecin-Officier.

\* Insérer ici " valide " ou " non-valide ".

NOTE.—Si le médecin-officier trouve le sujet impropre au service, il remplira le certificat ci-dessus dans les seuls cas où il y a eu attention et notera brièvement ci-dessous les causes d'invalidité :

CERTIFICAT DE L'OFFICIER COMMANDANT

*Bud d'Amour* ayant été finalement approuvé et examiné par moi ce jour, et le nom, l'âge, la date d'attestation et tous les autres détails réglementaires ayant été notés, je certifie être satisfait de l'exactitude de cette attestation.

*R. Pollock Guay*

(Signature de l'officier.)

Date ..... *13 - 4 - 17* 191

S/C. QUEBEC RECRUITING DEPT.

Surname Gunderson Christian Name Maurice

## MEDICAL HISTORY SHEET. DUPLICATE

Surname Brindamour Christian Name NarcisseExamined { on 10 day of April 1917  
at TurlesBirthplace { City or Town Truth  
County TurlesApparent age 38Trade or occupation carterHeight 5' Feet 4 1/2 Inches.Weight 146 Lbs.Chest measurement { Minimum 33 inches.  
Maximum expansion 36 inches.Physical development goodSmall-Pox Marks noneVaccination Marks { Arm Right Left arm  
Number /When Vaccinated last childhood 10-4-17(a) Marks indicating congenital peculiarities or  
previous disease none(b) Slight defects but not sufficient to cause rejection  
none

Approved by

H. Acrony Captain  
Medical Corps  
Batt. 112 M.O.

Rank

EXAMINED FOR RE-ENGAGEMENT.

Date.	Fit or Unfit.	M.O.

Date.	Result.	VACCINATIONS.
		<u>H. Acrony</u> M.O.
<u>10-4-17</u>		
<u>16-4-17</u>		<u>Ces. St. Maurice Captain</u> M.O.

Enlisted on 4th day of April 1917 at Turles

STATION.	CORPS.	REG'L NUMBER.	HABITS.	DATE.
Joined on enlistment	R. R. S	2245433		4-4-17
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.

To be made out in duplicate.

QUEBEC RECRUITING DEPOT

DUPPLICATE

H.Q. 54-21-23-53  
MILITIA & DEFENCE  
APR 27 1917  
CANADA

PARTICULARS OF FAMILY OF AN OFFICER OR MAN ENLISTED IN C. E. F.

INSTRUCTIONS.

- (a) This form is only required for men joining units for Overseas Service and must be completed immediately the man is warned for draft overseas.
- (b) Care must be taken to see that a man is allotted his correct Regimental Number. No numbers must be duplicated and once it has been allotted to a man, even if he is subsequently discharged, the same number must never be allotted to another man.
- (c) All questions, etc., must be answered.
- (d) One copy of the form is to be forwarded by Officer Commanding unit for each Officer and man to Officer Commanding Division or District at least seven days before man leaves his station to proceed overseas, for transmission to Accountant and Paymaster General, Ottawa.
- (e) Duplicate copy is to be forwarded direct to Officer in charge of Records, C.E.F. London, immediately after arrival in England.

(1) Name of Overseas Unit which Soldier joins.

Forsley Corp.

(2) Regimental Number

2240-433

(3) Full Name of Soldier

Narcisse Brundamour

(4) Place of Birth

Quebec

(5) Are you married, or not?

Non

(6) If married, state,

(a) Full name of your wife

not applicable

(b) Present Postal Address

not applicable

(7) Are you a widower?

No

(8) Have you any children?

No

If so, give number of boys and girls

not applicable

Also their names and ages

not applicable

(9) Is your Father alive?.....*No*

If so, state name and address.....*not applicable*

(10) Is your Mother alive?.....*Yes Maria Brundamour*

If so, state name and address.....*38 St Laurent Hill Montreal Quebec*

(11) If your Mother is a widow.....*No*

Are you her sole support, or not?.....*No*

(12) If sole support of widowed mother, state what amount you have given her per month prior to your enlistment, also reason she has no other support than yourself.

.....*\$ 15.00*

(13) If you have no wife, father, mother or children, state the name and relationship with full postal address of your next of kin, to whom you would desire any communication to be sent concerning you.

.....*not applicable*

(14) If you have a wife, or children, or a widowed mother who depends on you as her sole support, have you applied to the Paymaster of your unit for Separation Allowance? If not, this must be done.

.....*No*

(15) Are you insured?.....*No*

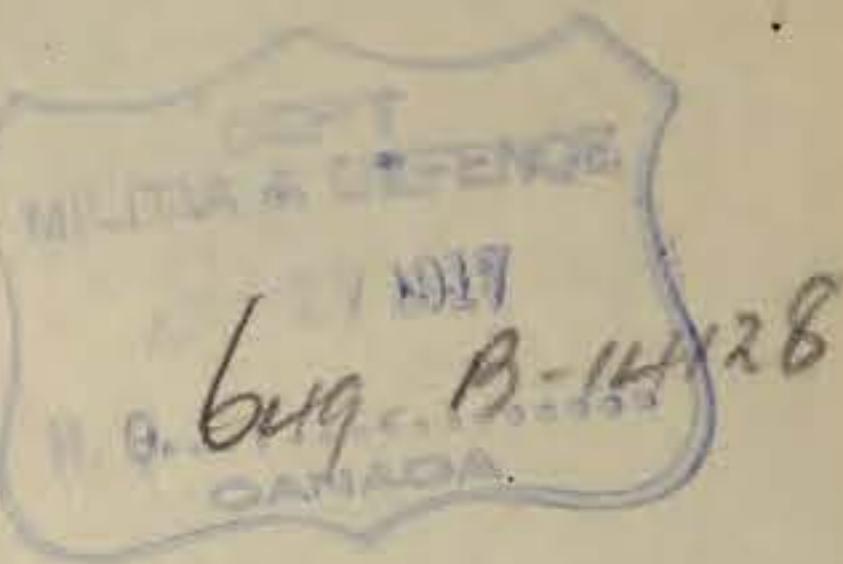
If so, in what Company?.....*Metropolitan Ins.*

Have you made arrangements for payment of your Insurance premium?.....*No*

If not, and it is a monthly premium, you can assign the amount in addition to any other assignment you wish to make.

Date.....*24-4-17*

*Ralph Guay A.L.C.*  
Officer Commanding.  
*D.C. Recruiting Dept.*



# FORM OF WILL.

J. Narcisse Brindamour (Name in full)

Regimental Number 2245433 serving in Forster's Coy.

of the Canadian Expeditionary Force, do hereby revoke all former Wills by me made and declare this to be my last Will.

I bequeath all my real estate unto

Mrs. Marie Brindamour  
38 St Laurent  
Ville Montcalm Quebec

Name and Address  
of person or  
persons to whom  
it is to go.

absolutely, and my personal estate I bequeath to

Mrs Marie Brindamour  
38 St Laurent  
Ville Montcalm Quebec

Name and Address  
of person or  
persons to receive  
personal estate\*  
(See note).

**IMPORTANT**

**NOTE**

This must be Signed  
and Dated by  
THE SOLDIER  
HIMSELF.

this 13<sup>th</sup> day of April A. D. 1917

N. Brindamour

Signature of Soldier.

\*N.B.—Personal estate includes pay, effects, money in bank, insurance policy, in fact everything except real estate.

Signed and acknowledged by the Testator as and for his last Will in the presence of us both present at the same time, who in his presence, at his request, and in the presence of each other have hereunto subscribed our names as Witnesses.

Signature of First Witness

Auguste Paradis  
33 Laperrière St. Quebec  
Lieutenant

Address of Witness

E. B. Landon  
Lewis Barracks  
Soldier

THE TWO  
WITNESSES Occupation of Witness

MUST

SIGN HERE Signature of Second Witness

Address of Witness

Occupation of Witness

1911 BORN OF MARY

1911  
BORN OF MARY

## QUEBEC RECRUITING DEPOT

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

M. F. W. 54. (A. F. B. 103.)

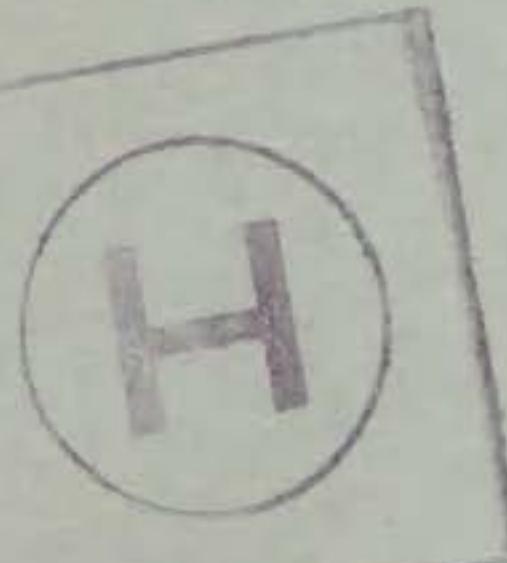
350M.-5-16  
H. Q. 1772-39-920.

## Casualty Form—Active Service.

Unit, Regiment or Corps *Forestry*Regimental No *2245433* Rank *Pte* Name *Bundamow Norasse*Enlisted (a) *4-4-17* Terms of Service (a) *Can. Exp. Force* Service reckons from (a) *4-4-17*Date of promotion to } Date of appointment } Numerical position on }  
present rank } to lance rank } roll of N. C. Os. }Extended. Re-engaged. Qualification (b) *Cabman*

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				

24. 4. 17 *Forestry Co. SOS*  
*Quebec* *Depot.* *Having Died.* *Lewis* *One* *17.4.17* *100.94.*



*W. MacLellan*  
*For R. B. R.*

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				

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

### Promote

Reverte

### Discharge

Soldier's Name

### Battalions

### Beneficiary

### **Relationship**

**Address:**

## PARTICULARS OF ASSIGNMENT

Name \_\_\_\_\_

### **Address**

### **Change of Address**

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

M. F. W. 128  
400M.-6-17-1772-39-141  
1-32230 M. F. D. 7-02

Date of Enlistment

MILITIA AND DEFENCE

Date of Assignment

4/4/17

## Separation and Assigned Pay Branch

OVERSEAS CONTINGENTS

RATE OF SEPARATION ALLOWANCE

20

RATE OF ASSIGNMENT

## PARTICULARS OF SEPARATION ALLOWANCE

No. 2245433

Rank Pte

Promoted

Reverted

Discharge

Soldier's Name

Narcisse Brindamour

Battalion

Forestry Battn

Beneficiary

Mr. Marie Brindamour

Relationship

Widowed Mother

Address 38 St. Laurent St., Quebec, P.Q.

## PARTICULARS OF ASSIGNMENT

Name

Address

Change of Address

1

2

3

4

Date	Cheque No.	Amount S/A	Amount A/P	Total	2168-N-1	REMARKS
1917						
Aug 31		98 -		98		SA Pension granted } A.P. Soldier who/s 1917.

# 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. B	Date	Amount 30 days	Cheque No. C	Date	Amount 31 days		

Remarks:

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

Register No. D B 484

## WAR SERVICE GRATUITY

TO

## DEPENDENTS OF DECEASED SOLDIERS

A.P. File No. 2168-n-1

Reg'tl No. 2245433 Name. Narcisse Brindamour  
 (Christian Name) (Surname)  
 Unit Army Ben. Rank Otu Date of enlistment  
 Date of casualty 17-4-17 B.P.C. File No. 13576  
 Was service performed overseas? No

## DEPENDENT

Name Mrs. Marie J. Brindamour Relationship W. mother

Address 38 St Laurent St.

Quebec

P.Q.

Amount of Special Pension Bonus \$ nil Abstracted by A. M. Maher

Eligible for Gratuity \$ 90.00

Less amount of Special Pension Bonus paid \$ ✓

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

Total deductions \$ ✓

Balance due \$ 90.00

Cheque No. G 1891623 Date issued 16-7-21

Clerk W. Mitchell

REMARKS :

Audited by
<u>Scot Howard</u>
Date <u>10-7-21</u>

8/8 4-4-17

MILITIA AND DEFENCE

## SEPARATION ALLOWANCE

M. F. W. 11.

50m.—6-16.

H. Q. 177-39-318.

103

Name *Marie Brindamour*Name of Soldier *Brindamour, Narcisse*Address *38 St Laurent St.*Regt. No. *2245433**Quebec*Rank *Pte**P. Q*Corps *Forestry Batt*

Relation to Soldier

wife, child or mother

*W. Mother*

To what Corps belonging

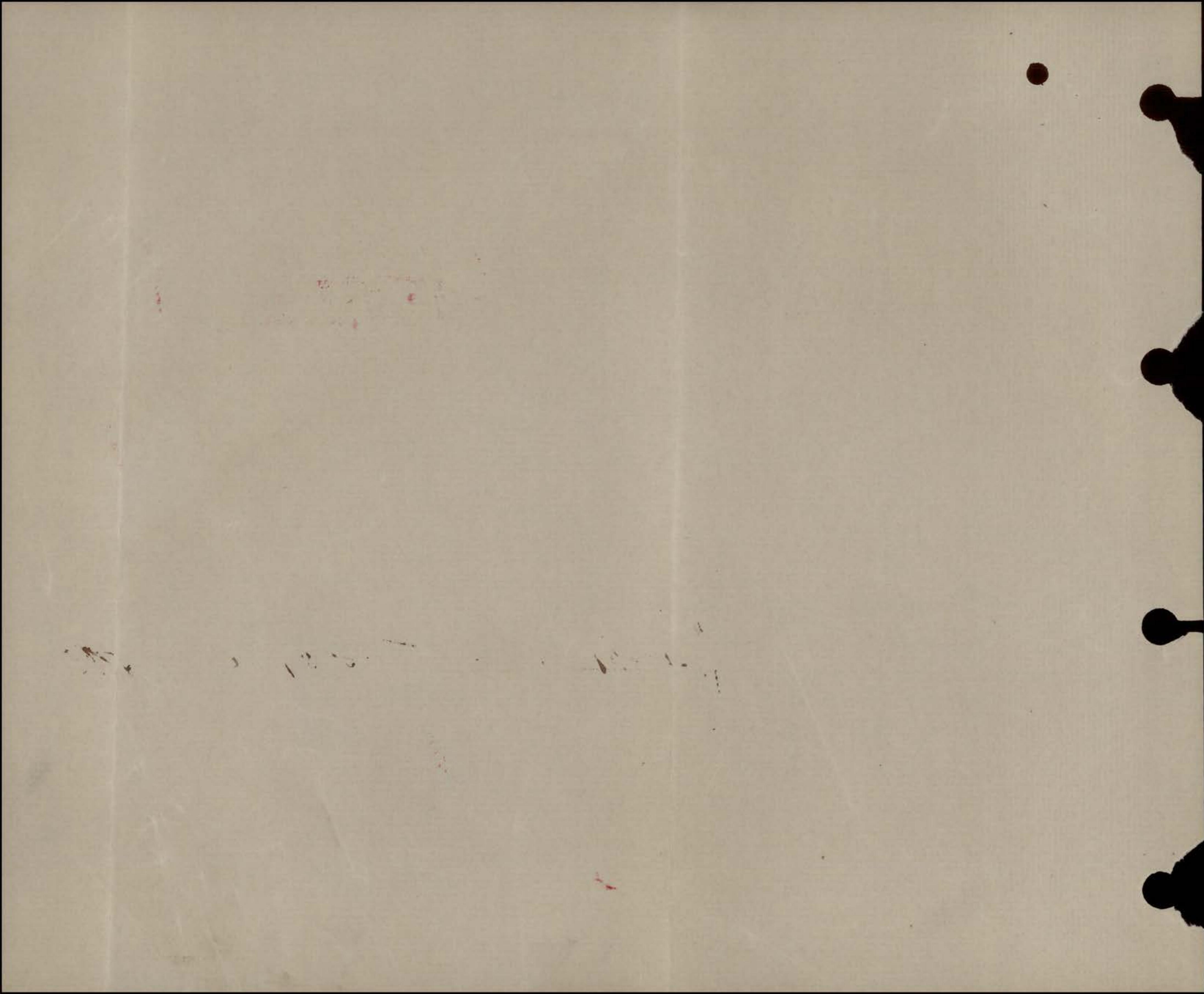
when called out

## PAYMENTS

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



ACCOUNT CLOSED  
DATE  
RE. W.



D/E 44-17  
MILITIA AND DEFENCE  
**SEPARATION ALLOWANCE**

Sheet No. 2.

L. L. Job 4503. - Req. 6832.

OVERSEAS CONTINGENTS

*Marie Brindamour W. Mother PAYMENTS. Pt*

M. F. W. 11a.  
50m.- 6-16.  
1772-39-818.

Name of Soldier

*Brindamour, Narcisse*

	Month.	Year.	Cheque No.	Amt.	Remarks.
	April	1916			
	May				
	June				
	July				
	Aug.				
	Sept.				
	Oct.				
	Nov.				
	Dec.				
	Jan.	1917			
	Feb.				
	March				
	April				
	May		B6517 38	38	
	June		H 6740 20	20	26
	July		F10909 20	20	20
	Aug.		J. 13237 20	20	20
	Sept.				
	Oct.				
	Nov.				
	Dec.				
	Jan.	1918			
	Feb.				
	March				
	April				
	May				
	June				
	July				



ACCOUNT CLOSED

DATE PER *W*

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

REG. NO.

FILE NO.

DATE IN

DATE OUT

P.A. OR B.F.

DATE  
REQUIRED

REMARKS

W

BRINDAMOUR, Pte. Narcisse, #2245433, CEF. 649-B-14128

*Not elig. for 1914-1915 star.*

C J C

MD5

MEDALS.....Mother, Mrs. Euphrasile Favron,  
38 St. Laurent,  
Belvedere, Que.

PLAQUE.....Mother, as above  
Que.

3099

Rec # 8060431 + 806594.

C. OF S......Mother, as above

Desp MAY 22 1920 C8529.

APR 29 1921

Scroll Desp.

Reqn. No 2-40136

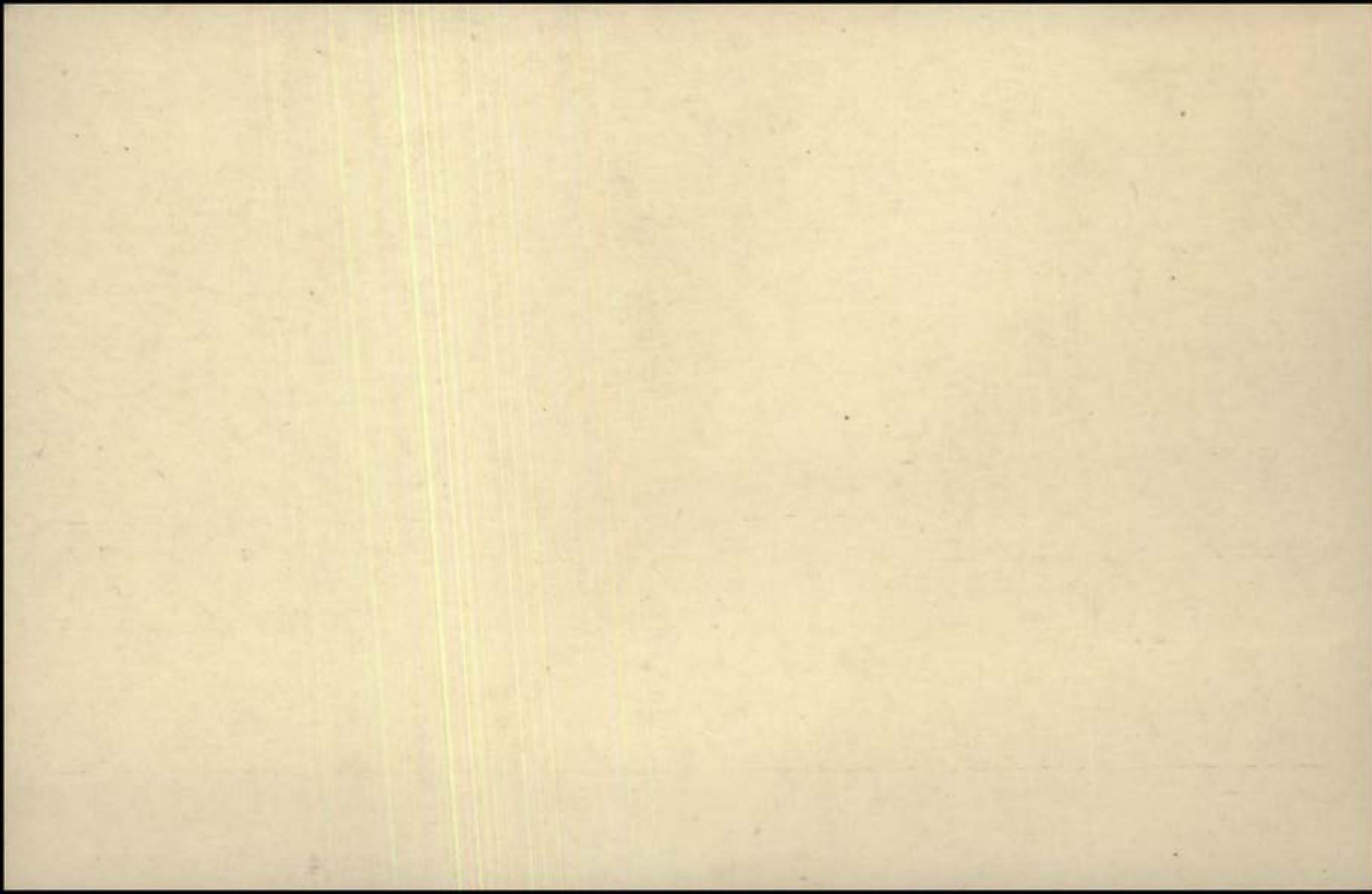
JAN 18 1922

Plaque Desp.

Plaque

Plaque

OK  
Mother



No 324 5433 RANK Lie-

NAME Brindamour, Narcisse

T. O. S.

4.4.17.

UNIT

D.O. 83 of 11. 4. 17.

Quebec Recruiting Depot.

M. D. 8

PAID FROM	PAID TO	SIG. OR REC'T	PROMOTIONS, TRANSFERS, DISCHARGES, ETC.	
			PARTICULARS	AUTHORITY
1917 Apr. 4	1917 Apr. 4	m.	Dismissed 17. 4. 17.	D.O 94 of 24. 4. 17
			% to be Closed m.	

MARRIED

SINGLE yes.

WIDOWER

TRADE OR CALLING

Driver.

RELIGION

Roman Catholic

DESCRIPTION.

APPARENT AGE

38 YEARS

7 MONTHS

HEIGHT

5 FEET

4½ INCHES

CHEST MEASUREMENT

33 INCHES

EXPANSION

3 INCHES

COMPLEXION

Fair.

EYES

Blue.

HAIR

Brown.

DISTINGUISHING MARKS

Not stated.

MEDICAL EXAMINATION.

PLACE

Quebec, P.Q.

DATE

Apr. 10th. 1917

Present Address - 38 St Laurent St.,  
Quebec, P.Q.

SURNAME.

Brindamour.

CHRISTIAN NAMES

Narcisse J.

FOLL.

B

REGL. NO. 2245433 RANK Pte.

UNIT Quebec Recruiting Depot.  
FORMER CORPS Q. C. C. 91. 8 yrs.

## NEXT OF KIN.

## CHANGE OF ADDRESS

NAMES IN FULL

Brindamour, Mrs. Marie

RELATIONSHIP TO SOLDIER

Mother.

ADDRESS

38 St Laurent St., Quebec,  
P.Q.

COUNTRY OF BIRTH

Canada Ancienne <sup>Lorette, P.Q.</sup> DATE May 25th 1881.

PLACE OF ATTESTATION

Quebec, P.Q.

DATE Apr. 4th 1917.