

243326

I.D. number
No. d'identification

BROISSOIT

Surname
Nom de famille

DAUMINA

Given names
Prénoms

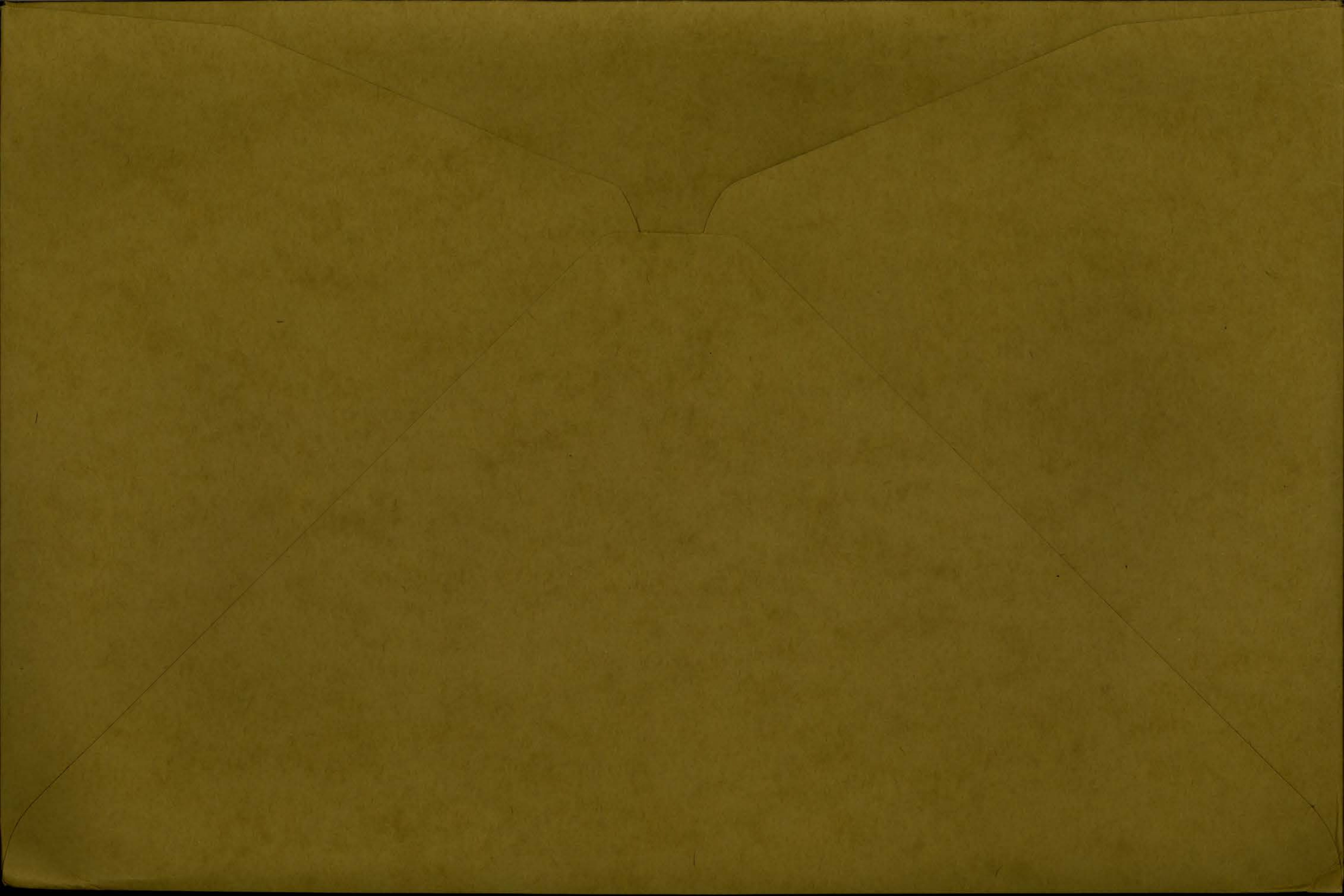
NATIONAL PERSONNEL RECORDS CENTRE
CENTRE NATIONAL DES DOCUMENTS
DU PERSONNEL

PERSONNEL RECORDS ENVELOPE
ENVELOPPE DES DOSSIERS DU PERSONNEL

Location
Lieu

1094

« CONTENTS CONFIDENTIAL »
« CONTENU CONFIDENTIEL »



cond. up.
19-4-16

PIÈCE D'ATTESTATION.

No. 243326
Folio
206 BATN. C. E. F.
DQRS. MONTRÉAL

CORPS EXPÉDITIONNAIRE CANADIEN D'OUTRE-MER

Duplicate

QUESTIONNAIRE REQUIS AVANT ATTESTATION

(RÉPONSES)

1. Quel est votre nom de famille?..... Brossoit
- 1a. Quels sont vos noms de baptême?..... Domina
- 1b. Quelle est votre présente adresse?..... Valleyfield, Que.
2. En quelle ville, village ou paroisse, et en quel pays êtes-vous né?..... Valleyfield, Que.
3. Quel est le nom de votre plus proche parent?.. Mrs. Philomene Brossoit,
Valleyfield, Que.
4. Quelle est l'adresse de votre plus proche parent?
- 4a. Quel est votre degré de parenté avec icelui?.... Ma mere,
5. Quelle est la date de votre naissance?..... Janvier le 4, 1916. 1897
6. Quel est votre métier ou profession?..... Tisserand,
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?..... Campet avec 641eme. en 1913.
(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.

DÉCLARATION REQUISE DU SUJET

Je, Brossoit Domina, 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.

Domina Brossoit (Signature de la Recrue)

Date Avril le 4 1916. A. G. Giesse (Signature du Témoin)

SERMENT REQUIS DU SUJET

Je, Brossoit Domina 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.

Domina Brossoit (Signature de la Recrue)

Date Avril le 4 1916. Lefebvre (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 comprît 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 Valleyfield ce 4 ieme jour de d'avril 1916.

A. G. Lefebvre (Signature du Juge).....

Signalement de Brossier Dominica à l'Enrolement

Age apparent.....19.....ans.....mois.
(Déterminable d'après les instructions contenues dans les règlements du Service Médical de l'Armée.)

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 reconnaisse le fait, ajouter une note à cet effet pour l'information de l'officier approbateur.

Taille5.....pieds.....3.....pouces

Mesure de la poitrine { Tour de poitrine, à pleine expansion.....35.....pouces
 { Marge d'expansion.....3.....pouces

Teint.....Roucé,.....

Yeux.....Brun,.....

Chevelure.....Brun/.....

Confession religieuse { Anglican.....
 { Presbytérien.....
 { Méthodiste.....
 { Baptiste ou Congregationaliste.....
 { Catholique Romain.....Oui.
 { Juif.....
 { Autres dénominations.....
(Indiquer laquelle)

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*.....Valide.....pour le **Corps Expéditionnaire Canadien d'outre-mer.**

Date.....April 10 1916,.....191.....*[Signature]*

Lieu.....Valleyfield, Que......
 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

.....Dominica Brossier.....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.

Date.....April 4th 1916.....*[Signature]*.....(Signature de l'officier.)

O. C. 206ieme. Batt. C. E. F.

Surname Brossolt Christian Name Domina

| STATION. | Date of Arrival at the Station. | DATES OF | | | | | | 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. |
|-----------------|---------------------------------------|-----------------------------|-----------|-----------|-----------------------------|----------|-----------|-------------------|---|--|----------------------------------|
| | | Admission into Hospital. | | | Discharge from Hospital. | | | | | | |
| | | Day | Month | Year | Day | Month | Year | | | | |
| <u>Bermuda</u> | <u>6/10/16.</u> | | | | | | | | <u>Examined for Active Service & found fit. Not taken</u> | <u>Major Row</u> | |
| <u>Comanget</u> | <u>Ashd</u> | <u>29</u> | <u>12</u> | <u>16</u> | <u>13</u> | <u>1</u> | <u>17</u> | <u>Gonorrhoea</u> | <u>16</u> | <u>Triquet & pot permangan</u> Duplicate Medical History Sheet posted to here. <u>X 5.</u> | <u>Mr Shute</u> <u>Capt</u> |

562389

(9) Is your Father alive? no

If so, state name and address _____

(10) Is your Mother alive? Yes

If so, state name and address Lte Barbe de d'Huntingdon
P. Q. Canada

(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.

(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.

Armand Brouisot
Valleyfield P. Q. Canada

(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.

(15) Are you insured? _____

If so, in what Company? _____

Have you made arrangements for payment of your Insurance premium? _____

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

[Signature]
a Officer Commanding.

Date 21/7/16

O. C. 206th BATT. C. E. F.

FORM OF WILL.

Name in full. I Dominat Brossoit

Regimental Number 243326 serving in 10th Can. Res. Batt'n

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

Name & Address of person or persons to whom it is to go. I DEVISE and BEQUEATH all my real estate unto

nil

absolutely, and my personal estate I bequeath to Mother

Name & Address of persons or person to receive personal estate (see Note 1.)

Mrs Philomene Brossoit

Valleyfield

Que. Canada

Fill in Date and Year.

IN WITNESS WHEREOF I have hereunto set my hand this 8th day of Oct. A.D. 1917.

D Brossoit

(Signature)

Signed by the said Testator as his last Will and Testament, the same having been read over and explained to him, in the presence of us both present at the same time who at his request and in his presence and in the presence of each other have subscribed our names as witnesses.

Name of Witness

R. V. Hatcher

Address of Witness

CAPT. PAYMASTER, 10TH. RES. BATT'N.

Occupation of Witness

Name of Witness

Dr. L. LeBlanc

Address of Witness

10th Can. Res. Batt'n

Occupation of Witness

Sgt.

ESTATES BRANCH

JUL 22 1917.

MILITIA DEPT.

N.B.—Personal Estate includes pay, effects, money in Bank, insurance policy, in fact everything except real Estate.

FORM OF WILL

ESTATES BRANCH

MILITIA DEPT

This document will be forwarded to you

Brossoit Daumina

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 *163rd Bn C.E.F.*

Regimental No. *243326* Rank *Plt* Name *Brossoit Daumina*
C. E. F.

Enlisted (a) *4.4.16* ✓ Terms of Service (a) *S. of 16* ✓ Service reckons from (a) *4.4.16*

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) *Weaver*

| 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. Bermuda 18.11.16

Disembarked England. 6.10.16

7.1.17 *Ob 163rd Bn* *Transf to 10th Res Bn* *Shoreham* *7.1.17* *D.O.P.2.* *7* ✓

7.1.17 *Ob 10th Res Bn* *Taken on from 163rd Bn* *Shoreham* *7.1.17* *D.O.P.2.* *1* ✓

15
1/10/17 *O. C. 10th. Res. Bn.* *Transf. to 22nd. Bn. C. E. F.* *Shoreham* *15/10/17* *D. P. 11. O.* *256* ✓
O. G. Scott Major for Adj. 10th. Can. Res. Battn.

C. B. D. *ARRIVED C. B. D.* *FRANCE* *15¹⁰/₁₇* *15-10-17.*

C. B. D. *LEFT C. B. D. FOR* *cclc.* *18¹⁰/₁₇* *123* *31-10-17.*

C. B. D. *ARRIVED* *cclc* *FIELD* *19¹⁰/₁₇* *N. R. D.* *18-10-17* *19-10-17.*

11-11-17 *24-11-17* *Do* *Despatched to 22nd Bn* *Do* *11-11-17* *2 Poll / 36*

(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.]

Casualty Report - Active Service

| 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 | | | | |
| 27-5-18 | 22nd Bn. | WOUNDED, AND MISSING BELIEVED KILLED AFTER ACTION. Fld. | | 25-5-18. | Part. II. Orders 53 of 1918. C 89.-K.I. 17-1182. |
| 3-6-18 | do | NOW REPORTED "KILLED IN ACTION" | | 25-5-18. | K.I. 17-1182. Pt. II. Orders 56 of 1918. |
| | | <i>Whogan</i> | | | |
| | | Lieut-Colonel, A.A.G., Canadian Section, | Major, for | | General Headquarters, 3rd Echelon. |

CHANGE OF ADDRESS

649-B-27119

No. 243326 Rank _____ Surname _____ Christian Name Domina

Address Mrs. Philomena Brissait
St. Barb
P.O.

auth (L) 6/8/21

Section
H. H. H. " 8/21

2-10
SM.

79

1884

1884

| 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. | | | | |
| 11. 6. 18 | Q.R. | Now reported Killed in Action | Field | 25.5.18 | Cpl A 237 or 157 560/8/18 |

MILITIA AND DEFENCE
ASSIGNED PAY
 OVERSEAS CONTINGENTS

To Whom *Philomin Brossait* By Whom Assigned *Brossait Domina*
 Address *St. Barbe* *Zuc* Regtl. No. *243376*
 Rank *Pfc*
 Corps *163 Bn*
 Rate *15⁰⁰* SEP 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 | | | | |



Ms. 12. 11

ASSIGNED PAY

OVERSEAS CONTINGENTS

Sheet No. 2.

P. Brassat
(Assignee)

PAYMENTS.

Name of Soldier

Brassat Domina
Plc 243376 163 Bn

L. L. Job 5470—Req. 6883.

| Month. | Year. | Cheque No. | Am't. | Remarks. |
|--------|-------------|----------------|--------------|------------------------|
| | | | | <i>15⁰⁰</i> |
| | | | | SEP 1 - 1916 |
| April | 1916 | | | |
| May | | | | |
| June | | | | |
| July | | | | |
| Aug. | | | | |
| Sept. | | | | |
| Oct. | | <i>0-21955</i> | <i>30. =</i> | <i>30 adj</i> |
| Nov. | | <i>0-25291</i> | <i>15</i> | <i>15 future</i> |
| Dec. | | <i>31399</i> | <i>15</i> | |
| Jan. | <i>1917</i> | <i>36615</i> | <i>15</i> | |
| Feb. | | <i>I 42974</i> | <i>15</i> | <i>15 P</i> |
| March | | <i>R 46158</i> | <i>15</i> | <i>15 E</i> |
| April | | <i>122</i> | <i>15</i> | <i>15 W</i> |
| May | | <i>H 6853</i> | <i>15</i> | |
| June | | <i>13204</i> | <i>15</i> | <i>15 E</i> |
| July | | <i>20177</i> | <i>15</i> | <i>15 P</i> |
| Aug. | | <i>N 27654</i> | <i>15</i> | <i>15 B</i> |
| Sept. | | <i>M 37069</i> | <i>15</i> | <i>15 W</i> |
| Oct. | | <i>48481</i> | <i>15</i> | <i>210.00 ✓</i> |
| Nov. | | | | |
| Dec. | | | | |
| Jan. | 1918 | | | |
| Feb. | | | | |
| March | | | | |
| April | | | | |
| May | | | | |
| June | | | | |
| July | | | | |

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. | | | | |

Date of Enlistment

MILITIA AND DEFENCE

Date of Assignment

Separation and Assigned Pay Branch

Sept 1/16

OVERSEAS CONTINGENTS

RATE OF SEPARATION ALLOWANCE

| | | | |
|--|--|--|--|
| | | | |
|--|--|--|--|

RATE OF ASSIGNMENT

| | | | |
|-----|--|--|--|
| 15- | | | |
|-----|--|--|--|

PARTICULARS OF SEPARATION ALLOWANCE

No. **243326**
 Rank **Pte** Promoted Reverted Discharge
 Soldier's Name **Domina Brossoit**
 Battalion **163 Battr.**
 Beneficiary
 Relationship
 Address

PARTICULARS OF ASSIGNMENT

Name **P. Brossoit**
 Address **St Barbe Lane**
 Change of Address
 1
 2
 3
 4

| Date | Cheque No. | Amount S/A | Amount A/P | Total | REMARKS |
|-----------|------------|------------|--------------------|--------------------|---------|
| Oct 31/17 | | | 210 | 210 | |
| Nov. | B 54612 | | 15 | 15 | |
| Dec | D 60348 | | 16 | 15 | By. |
| Jan/18 | E 54171 | | 15 | 15 | Hd |
| Feb. | C 96031 | | 15 | 15 | |
| Mar | A 103320 | | 15 | 15 | ✓ |
| Apr | A 537 | | 15 | 15 | ✓ |
| May | G 18114 | | 15 | 15 | ✓ |
| June | F 14244 | | 15 | 15 | ✓ |
| | | | 330 ¹¹² | 330 ¹¹² | |

2113 - D - 2. REMARKS

674330^{no} to 30.6.18 (19.6.18)
acct closed 30.6.18

| | | |
|------|---------------------------|-----------------|
| Bel. | Pensions Notified Date... | 19.6.18 |
| | Killed in Action | |
| | Died of Wounds | Date... 25.5.18 |
| Ref. | Missing | |
| | C. L. (2) 7.6.18 | Clerk... Ball |
| | Date Noted | 19.6.1918 |

15⁰⁰ paid.
Killed in action May 25/18 C.L. 20711
June 13/18 SR.



MRO 2 B Reno 20/18 Lt.

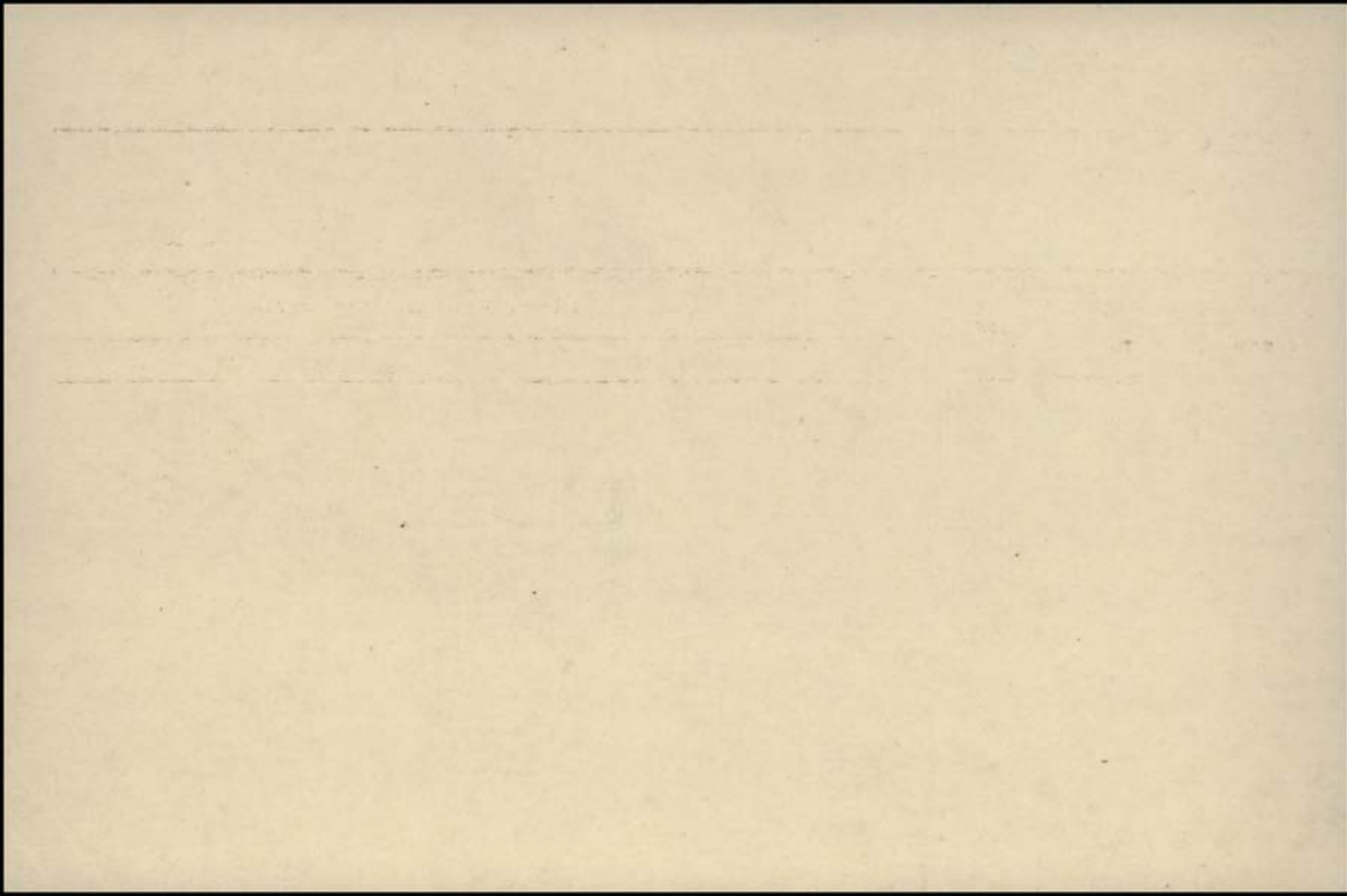
No. 243326 RANK *Pvt*

NAME *Crossit, D.*

T. O. S. 4-4-16 *2034* UNIT *206th Battalion C.E.F.*
of 5-4-16

M. D. *4*

| PAID FROM | PAID TO | SIG. OR REC'T | PROMOTIONS, TRANSFERS, DISCHARGES, ETC. | |
|-----------------------------|------------------------------|---------------|--|-----------|
| | | | PARTICULARS | AUTHORITY |
| <i>1916</i> <i>Apr 4</i> | <i>1916</i> <i>Apr 30</i> | <i>-</i> | | |
| <i>May</i> | | <i>-</i> | | |
| <i>June</i> | | <i>-</i> | <i>A.M.L. 78 hrs. 5 days C.E.F. so. 34. of 11-7-16</i> | |
| <i>July</i> | | | <i>4 days pay forfeited</i> | |



No. 243326
243526

RANK Pte.

NAME Brossoit D.

T.O.S.

Trans from 206th Bn
Aug. Paylist.

UNIT

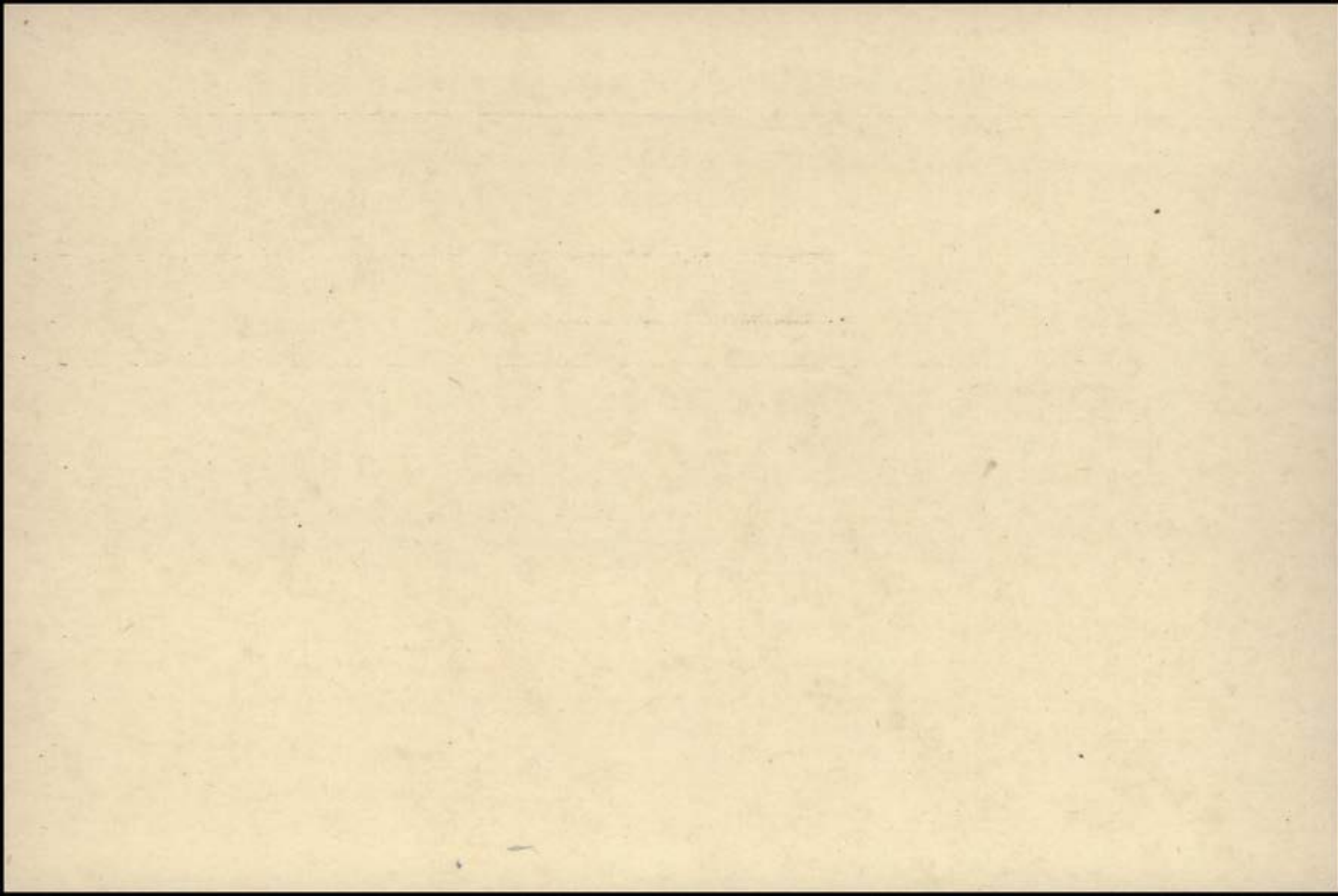
163rd Battalion, C. E. F.

M. D. 4

| PAID | | SIG. OR REC'T | PROMOTIONS, TRANSFERS, DISCHARGES, ETC. | |
|-------|--------|---------------------|---|-----------|
| FROM | TO | | PARTICULARS | AUTHORITY |
| 1916 | 1916. | | | |
| Aug | Aug 31 | L. | | |
| Sept. | | L. | | |
| Oct. | | L. | | |
| Nov. | | L. | | |
| Dec | | m | | |

UNIT SAILED

NOV 27 1916



Crossoit Domin

REGT'L. No. *2433216*
H. Q. FILE No 649

NAME

~~*Crossoit August*~~

RANK AND CORPS

2nd Br 1st Reg

FOLLOWS
NO. *1st Reg*
FOLLOWS

CABLE

NATURE OF CASUALTY

NO.

DATE

H 155 6-6-18
14-4 14-5-18

*Rept wdd. & missy, believed to in
W. May 25th 1918
Mrs Philomena Crossoit (mother)
Valleyfield B. C.*

H 161 12-6-18
8-4

*Rept wdd & miss now rept
on May 25th 1918 ✓*

LIST No.

HOSPITAL

DATE OF
ADMISSION

REMARKS

1227

Private Capt. Wm. H. Bell. Killed in action, now
Capt. Killed in action 25-5-18 (22)

Am

4/11

Plé. 

Number 243326 Rank

Surname BROISSOIT

Christian Name Daunina

Units 22nd Inf. Cen. Inf. Theatre of War France

Date of Service 15-10-17

Remarks (M) Mrs. P. Broissoit, D

Latest Address St. Barbe, Que.

Roll No. "B" Page 21365

DESP. JAN 6 1923
REGN. NO. 31110

Daumina.

B-5177.

Name BROISSOIT Rank Plt

Reg. No. 243326.

Unit 22nd TmNext of Kin Mrs. P. Philomene Broissoit. Valleyfield.
Beaufarrais Co. Quebec.

| Date 1918 | Movement | Place | Casualty | List No. | Notified N/K O. | W.O. List |
|--------------|--|-------|----------|-------------|--------------------|-----------|
| 25-5 | WOUNDED MISSING. | | | | | |
| | Believed KILLED IN ACTION | | | A 232 | H1551812. | |
| 25-5 | Now KILLED-IN-ACTION. PT. 2. A O. 568/8-6-18. | | | A 237 | H1611884. | |

M

✓ Broissoit, D., Pte. 243326 ✓ 22nd Bn, 649-B-27119 ✓

Med. & Dec. (Mother) Mrs. P. Brossoit, ~~Valleyfield,~~ St. Barbe,

JAN 13 1921
Med. Desp. Reqn. No. 39667

" redesp. 3-9-21- 39740

Plague Desp. Reqn. No. 3567 X redesp. 20 5/21, X223

P. & S. (Mother) Address as above.

(Serial no. 765078.)

Mem. Cross. (Mother) " " "

39740

not Elig. for 14-15 Star
E... V on
E... B W on

ak

643

M C-3835-8- DEC 24 1920

Scroll ret 2A-2-21.
In x Ret'd 3/3/21 Left Town.

SURNAME

CHRISTIAN NAME OR NAMES

REG. No.

Broissoit

D.

243376.

RANK

UNIT

Co.

TROOP

BATTY.

Plé

Que

22.

HOSPITAL

DATE OF ADMISSION

1.

HOSP.

2.

HOSP.

3.

HOSP.

4.

HOSP.

DIAGNOSIS

1.

2.

3.

Plé Base W & miss. Believed

Killed in Action 25.5.18 R

DISPOSITION

Now rep't Killed in Action - 25.5.18 R

DATE

Cf. 5.6.18 A232.
E 11.6.18 @2370

REMARKS

A.M.D. 2 DEPT.
Boh. of D.G.M.S. O.M.F.C. London.

EPITOME OF HOSPITAL TREATMENT

HOSPITAL

ADM.

1.

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3.

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6.

7.

| | | | | | | | |
|---|--------------------|---|-------------------------|------------------------------------|----------------|--------------|--------|
| ASSIGNED PAY. <i>11</i> | ENGLAND or CANADA. | SEPARATION ALLOWANCE. | ENGLAND or CANADA. | NAME:- <i>BROSSOIT Dominat</i> | | | |
| EFFECTIVE DATE:- <i>1. 11. 16</i> | | EFFECTIVE DATE:- | | NUMBER:- <i>243326</i> | | | |
| AMOUNT:- <i>1500</i> | | AMOUNT:- | | PARTICULARS OF RANK OR APPOINTMENT | | | |
| 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. | | AUTHORITY | | | |
| <i>Philomene Brossoit (mother) St Barbe P.Q.</i> | | | | DATE EFFECTIVE | | | |
| | | | | RANK OR APPOINTMENT | | | |
| | | | | <i>Pte</i> | | | |
| UNIT AND TRANSFERS | | | | | | | |
| ORIGINAL UNIT:- <i>163rd Bn</i> | | | | | | | |
| DATE ACCOUNT FIRST OPENED:- <i>16.12.16.</i> | | | | | | | |
| AUTHORITY | | DATE EFFECTIVE | DATE LEDGER SHEET T'5'0 | UNIT TRANSFERRED TO | | | |
| | | | | <i>22nd Bn</i> | | | |
| <i>Am a.</i> | | <i>1.6.18</i> | <i>11/18</i> | <i>N.E.L.</i> | | | |
| EXTRACTS FROM ACTIVE SERVICE PAY-BOOKS | | | | | | | |
| DATE OF PAYMENT | NUMBER OF A.R. | UNIT PAID BY | AMOUNT | DATE OF PAYMENT | NUMBER OF A.R. | UNIT PAID BY | AMOUNT |
| | | | | | | | |
| UPON CLEARANCE OF VOUCHERS, ENTRIES WILL BE CANCELLED BY INSERTION OF DATE CHARGED IN RED INK | | | | | | | |
| DAILY RATES OF PAY AND ALLOWANCES | | | | | | | |
| AUTHORITY | | PAY | F.A. | P.F.A. | SUBS'CE ALL'CE | | |
| | | <i>1</i> | <i>10</i> | | | | |

PARTICULARS OF RENDERING NON-EFFECTIVE:-

| MONTH 1918 | PARTICULARS | CR. 1 | CR. 2 | PARTICULARS | DR. 1 | DR. 2 | DR. 3 | DR. 4 | BALANCE | DEFERRED | SEPARATION |
|-----------------|-----------------------------------|--------------|--------------|-------------------------------------|--------------|-------|-------|-----------|--------------|----------|------------|
| <i>1918</i> | | | | | | | | | | | |
| <i>March 31</i> | <i>Bal B.F.</i> | | | | | | | | <i>75 97</i> | | |
| <i>April</i> | | | | <i>Cap Bn</i> | | | | <i>15</i> | <i>60 27</i> | | |
| | | | | <i>11/35 22 Bn 5/4</i> | <i>1 78</i> | | | | <i>58 49</i> | | |
| | | | | <i>" 58 " 15/4</i> | <i>4 46</i> | | | | <i>54 03</i> | | |
| | | | | <i>" 84 " 26/4</i> | <i>3 57</i> | | | | <i>50 46</i> | | |
| | | | | <i>Bnab 7/4 " 27/12/17</i> | <i>8 03</i> | | | | <i>42 63</i> | | |
| | <i>P. Pay -</i> | <i>33</i> | <i>33</i> | | <i>17 84</i> | | | <i>15</i> | <i>75 43</i> | | |
| <i>MAY</i> | | | | <i>Cap Bn</i> | | | | <i>15</i> | <i>60 43</i> | | |
| | | | | <i>11/85 22 Bn 12/5</i> | <i>4 46</i> | | | | <i>55 97</i> | | |
| | <i>P.P.</i> | <i>34 10</i> | <i>34 10</i> | | <i>14 46</i> | | | <i>15</i> | <i>90 07</i> | | |
| <i>July</i> | | | | <i>Cap Bn for June P. by Ottawa</i> | | | | <i>15</i> | <i>75 07</i> | | |
| <i>Oct</i> | <i>Cap June of chgd. C. 65637</i> | | <i>15</i> | | | | | <i>15</i> | <i>90 07</i> | | |
| <i>Nov</i> | | | | <i>DR. 31516 Bal to Ottawa</i> | <i>75 07</i> | | | | <i>15</i> | | |
| | | | | | <i>75 07</i> | | | | | | |

BROISSOIT
 212226 Lt Broissoit 2

| DATE | PAY | | | | FIELD ALLOWANCE | | | | WORKING OR SPECIAL PAY | | | | ASSIGNED PAY CREDITS | OTHER CREDITS | TOTAL CREDITS | ACQUITTANCE ROLLS | | | | CASH PAYMENTS | | | | ASSIGNED PAY | OTHER CHARGES | TOTAL DEBITS | BALANCE | | PAY WITHHELD OR DEFERRED | PAY AVAILABLE FOR ISSUE | REMARKS |
|------|-------------|------|--------|----|-----------------|------|--------|----|------------------------|------|--------|----|----------------------|---------------|---------------|-------------------|---|---|---|---------------|---|---|---|--------------|---------------|--------------|---------|-------|--------------------------|-------------------------|---------|
| | NO. OF DAYS | RATE | AMOUNT | | NO. OF DAYS | RATE | AMOUNT | | NO. OF DAYS | RATE | AMOUNT | | | | | 1 | 2 | 3 | 4 | 1 | 2 | 3 | 4 | | | | CREDIT | DEBIT | | | |
| | | | \$ | c. | | | \$ | c. | | | \$ | c. | | | | | | | | | | | | | | | | | | | |

| MONTH | PARTICULARS | CR.1 | CR.2 | PARTICULARS | DR.1 | DR.2 | DR.3 | DR.4 | BALANCE | DEFER. PAY | SUP. ALLG. PAY | ERR. |
|---------|-------------|-------|-------|--------------------------------|-------|------|------|------|---------|------------|----------------|------|
| Sept 30 | | | 36 81 | | | | | | 36 81 | | | |
| Oct | field pay | 34 10 | | | | | | | 15 | | | |
| | | | | AR 10 Res 634 15-9-17 | 9 72 | | | | | | | |
| | | | | AR " " 670 30-9-17 | 7 20 | | | | 15 | 38 98 | | |
| | | 34 10 | | | 17 03 | | | | | | | |
| Nov. | P. pay | 33 | | | | | | | | | | |
| Dec | | 34 10 | | | | | | | 15 | | | |
| | | | | AR 832 Inf Base Depot 19-10-17 | 4 46 | | | | | | | |
| | | | | Q4005 516 10 Res 4-9-17 | 3 12 | | | | | | | |
| | | | | | | | | | 15 | 68 39 | | |
| | | 69 10 | | | | | | | 30 | | | |
| Jan | Mo P. | 34 10 | | | 7 59 | | | | 15 | | | |
| | | | | AR 245 2 DRC 24/10/17 | 3 57 | | | | | | | |
| | | | | AR 740 22 B 13/12/17 | 4 46 | | | | | | | |
| | | | | AR 683 do 2/12/17 | 8 03 | | | | | | | |
| | | | | AR 654 do 18/1/17 | 4 46 | | | | 15 | 66 97 | | |
| | | 34 10 | | | 20 52 | | | | | | | |
| Feb | Mo P. | 30 80 | | | | | | | 15 | | | |
| | | | | AR 818 22 B 6-1-18 | 3 57 | | | | | | | |
| | | | | AR 919 22 B 19/1/18 | 4 46 | | | | 15 | 74 74 | | |
| | | 30 80 | | | 8 03 | | | | | | | |
| | | | | AR ban | | | | | 15 | 59 74 | | |
| | | | | AR 893 22 B 10-2-18 | 4 46 | | | | | 55 2 8 | | |
| | | | | AR 532 50 R 4-12-17 | 73 | | | | | 54 55 | | |
| | | 34 10 | | | | | | | | 88 65 | | |
| | | | | AR 1217 2nd Div 32-3-17 | 3 57 | | | | | 85 08 | | |
| | | | | " 1174 22 B 26/3 | 1 78 | | | | | 83 30 | | |
| | | | | DN- 1386 2nd Div 8/3 | 4 46 | | | | | 78 8 4 | | |
| | | | | " 46A " 5-11-17 | 3 59 | | | | 15 | 75 2 7 | | |
| | | 34 10 | | | 18 57 | | | | | | | |