1st enl 2nd enl

Proceedings of Court of Inquiry or on men reported Missing on Active Service.....

Attestation Papers.....2.....3

Declaration of change of name.....

Authority for special enlistments.....

Documents of re-enlisted men.....

Regimental Conduct Sheet.....1.....

Compulsory Stoppages.....

Casualty Forms.....1.....1

Proceedings on discharge.....1.....2

Corps History Sheet.....

Date and No. of Deposit Receipt for Purchase Money and Amount.....

Parchment Certificate.....

Medical Report for Invalids.....

Medical History Sheet.....2.....

Proceedings of Regt. Court Martial.....

Copies of Convictions by Civil Power.....

Company Conduct Sheet.....1.....

Clothing Transfer Certificate.....

Inventory of Kit.....

Last Pay Certificate.....

M. F. W. 62.
25m.—12-15.
H. Q. 1772-39-935.

DISCHARGE DOCUMENTS

36831

R. O. No.....

H. Q. No.....

Name Brassard Louis Joseph

Regt. No. 449168 Rank Pte.

Corps (1) 57th O. Bn. C. E. F. (2) 1st/2nd Q. R.

(1) Med. Unfit.

(2) Demobilization

1/4-17
2-18

449168

PIÈCE D'ATTESTATION.

No.

Folio

ORIGINAL

CORPS EXPÉDITIONNAIRE CANADIEN D'OUTRE-MER

QUESTIONNAIRE REQUIS AVANT ATTESTATION

(RÉPONSES)

1. Quel est votre nom de famille ? ..... Brassard
1a. Quels sont vos noms de baptême ? ..... Louis Joseph
1b. Quelle est votre présente adresse ? ..... Roberval
2. En quelle ville, village ou paroisse, et en quel pays êtes-vous né ? ..... Roberval
3. Quel est le nom de votre plus proche parent ? ..... Dame Bruno Lesesque
4. Quelle est l'adresse de votre plus proche parent ? ..... Roberval
4a. Quel est votre dégré de parenté avec icelui ? ..... ma mère
5. Quelle est la date de votre naissance ? ..... Juin 19 - 1893 -
6. Quel est votre métier ou profession ? ..... Banquier
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 ? ..... non -
(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, Louis Joseph Brassard ..... 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.

L. J. Brassard ..... (Signature de la Recrue)

Date Mars 3 - ..... 1916. J. A. Richard L. ..... (Signature du Témoin)

SERMENT REQUIS DU SUJET

Je, Louis Joseph Brassard ..... 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.

L. J. Brassard ..... (Signature de la Recrue)

Date Mars 3 ..... 1916. J. A. Richard L. ..... (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 Beauville ce 3ème jour de mars 1916 -

Alfred Delorme ..... (Signature du Juge)
C. C. Sup. Quebec

M. F. W. 23a
40M.—12-15
1772-39-841.

Signalement de Louis Joseph Brossard à l'Enrolement

Age apparent 23 ans ..... mois.
(Déterminable d'après les instructions contenues dans les règlements du Service Médical de l'Armée.

Taille 5 pieds 7 pouces

Mesure de la poitrine { Tour de poitrine, à pleine expansion 33 pouces
Marge d'expansion 3 pouces

Teint Clair

Yeux Bruns

Chevelure Châtain

Confession religieuse { Anglican. .....
Presbytérien .....
Méthodiste .....
Baptiste ou Congregationaliste .....
Catholique Romain Catholique
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 reconnaisse le fait, ajouter une note à cet effet pour l'information de l'officier approbateur.

Aucune marque

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 3 mars 1916. J. E. P. Bernier

Lieu Beauceville

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

Louis Joseph Brossard 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.

E. Théo. Paul (Signature de l'officier.)
Capt.

Date 3rd March 1916.

5th M. D. First Depot Battalion Second Quebec Regiment

Regtl. No 449168

PARTICULARS OF RECRUIT

DRAFTED UNDER MILITARY SERVICE ACT, 1917

(Class ONE)

1. Surname: Brassard
2. Christian name: Louis Joseph Alphonse
3. Present address: Chandler Gaspé Co. P.Q. Canada
4. Military Service Act letter and number: 222686 EC
   (If man is defaulter, i.e., has not registered under Proclamation, this fact should be stated, together with date of apprehension, or surrender)
5. Date of birth: June 19th 1893
6. Place of birth (town, township or county and country): Roberval Lac St-Jean Co. P.Q. Canada
7. Married, widower or single: Single
8. Religion: Roman Catholic
9. Trade or calling: Accountant
10. Name of next-of-kin: Emma Gagné Brassard Levesque
11. Relationship of next-of-kin: Mother
12. Address of next-of-kin: St-Methode Lac St-Jean Co. P.Q. Canada
13. Whether at present a member of the Active Militia: No
14. Particulars of previous military or naval service, if any: 5 months with the 57th Regiment.
15. Medical Examination under Military Service Act :—

(a) Place Drill Hall Quebec (b) Date September 23 1918 (c) Category E.

DECLARATION OF RECRUIT

I, Louis Joseph Alphonse Brassard, do solemnly declare that the above particulars refer to me, and are true.

Louis Joseph Alphonse Brassard (Signature of Recruit)

DESCRIPTION ON CALLING UP

Apparent age: 25 yrs. 3 mths.

Height: 5 ft. 5½ ins.

Chest measurement: fully expanded 34 ins.; range of expansion 3 ins.

Complexion: Medium

Eyes: Brown

Hair: Brown

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

Marked V.D.H. (Mitral stenosis) Callatation and pallos.

L. Bouchard Lt

O. C. Depot Btln.

1st Depot Bt. 2nd Quebec Reg. Regt.

Place Drill Hall Quebec P.Q. Date September 23rd 1918.

M. F. W. 133.
800M.—5-18.
1772—39—1158.

449168

MEDICAL HISTORY SHEET.

Surname Brossard *Christian Name* Louis Joseph

Examined { on 3rd day of March 1916 / at Beauceville

Birthplace { City or Town Beauce / County Beauce

Apparent age 23 years

Trade or occupation

Height 5 Feet 7 Inches.

Weight Lbs.

Chest measurement { Minimum 33 inches. / Maximum expansion 36 inches.

Physical development

Small-Pox Marks

Vaccination Marks { Arm Right. Left. / Number

When Vaccinated last

(*a*) Marks indicating congenital peculiarities or previous disease

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

Approved by

Rank M.O.

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

Date.	Result.	Vaccinations.
		M.O.
		M.O.
		M.O.

Date.	Result.	Anti-Typhoid Inoculations, Etc.
		M.O.
		M.O.
		M.O.

Enlisted on 3rd *day of* March 1916 *at* Beauceville

	Corps.	Regt'l Number.	Habits.	Date.
Joined on enlistment	57th Bn			3/3/16
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.

M. F. B. 313.

400M.—1-16.
H. Q. 1772-39-439.

Surname Bodard Christian Name Louis 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				

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

M. F. W. 54. (A. F. B. 103.)
250M.—1-16.
H. Q. 1772-39-920.

Casualty Form—Active Service.

Unit, Regiment or Corps 57th Battalion, C.O.E.F.

Regimental No. 449168 Rank Pte Name Bossard L. J.
C. E. F.

Enlisted (a) ..... Terms of Service (a) ..... Service reckons from (a) .....

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. 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				
	57th Bn.	S. o. S. Med. unfit	Que.	29/7/16	Auth. 649-B.3399 8. 16-1-29.

(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.

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				

MOBILIZATION CENTRE M. D. 5

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

M. F. W. 54. (A. F. B. 103.
500M.—9-16
H. Q. 1772-39-920.

Casualty Form—Active Service.

Unit, Regiment or Corps Ist Depot Battalion 2nd Quebec Regiment

Regimental No. 449168 Rank Private Name Brassard Louis Joseph Alphonse

C. E. F.

Enlisted (a) 23/9/18. Terms of Service (a) Can. Exp. Forces. Service reckons from (a) 23/9/18.

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) Accountant.

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				
		~~Demobilization~~ Cat. E.			
		S.O.S. on return to records of Registrar (23-9-18)			
		Part II Orders No. 267-1 Date, 24-9-18.			
		Discharged under authority of P.C. 3051, of 11-10-18.			

J. H. Bourtelle Major.
M.S.A. D.O. M.D.5

10

(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.

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				

No. 449168 Rank Pte. Name ~~Brassard~~ Louis Joseph Brassard

T. O. S. 3/3/16
D.O. 62 of 15/2/16

Unit 57th Battalion C.E.F.

M. D. 5 - Val

Paid From	Paid To	Sig. or Rec't	Promotions, Transfers, Discharges, etc.	
			Particulars	Authority
1916	1916			
Mar. 3	Mar. 31	✓		
Abs		✓		
May		✓		
June pay list not available				

UNIT SAILED
JUN 2 1916

No. 449168 RANK Pte. NAME ~~Brossard~~, Louis Joseph Brassard

T. O. S. UNIT Casualties, A. E. F.

M. D. 5.

PAID FROM	PAID TO	SIG. OR REC'T	PROMOTIONS, TRANSFERS, DISCHARGES, ETC.	
			PARTICULARS	AUTHORITY
1916 June 1	1916 July 29	M.		

REG. NO. 449168 NAME (SURNAME FIRST) Brassard, L. J.

RANK Pte CORPS 54th Batt

AGE 23. SERVICE 3/12.

NAME OF HOSPITAL Military PLACE Quebec

DATE OF ADMISSION 25. 5. 16.

DISEASE Rheumatic Fever.

DISCHARGE 3. 8. 16.

OPERATION

DISCHARGED TO DUTY

TRANSFERRED TO N. U.

DISCHARGED BY MEDICAL BOARD

100M—9-17—H.Q. 1211-8-30.

REMARKS .....

M. F. W. 41
10 M.—5-16.
1772-39889.

Name Pte Brassard L. J.
A

B886

Regimental No. 449168

Unit 57th O. S. Batt.

Date of enlistment Nil.

Place of " Nil.

Married (yes or no) Not Mentioned

Amount of pay assigned monthly $ Nil.

To whom payable Nil.

Name and address of next-of-kin Nil

Nil.

Date and place discharged 29-7-16 Quebec

Reason for discharge Med. Unfit.

Character on discharge H. Q. 16-1-29 of 10-8-15.

Job 2376. M. & D. 6692.

	Date 1916 From	To	PAY No. of Days	Rate	Amount	Field Allowance No. of Days	Rate	Amount	Other Credits	Total Credits	Voucher No.	Date	Cash Payments	Assigned Pay	Other Charges	Total Debits	Remarks, Casualties, etc.
July	1-6-16	29-7-16	59	1.00	59.00	59	.10	5.90	41.30	106.20		761	106.20			106.20	
					59.00			5.90	41.30	106.20 →			106.20			106.20 →	

"Discharged"
(29.7.16)

106.20

Name.....

Regimental No.

Unit

Date of enlistment

Place of "

Married (yes or no)

Amount of pay assigned monthly $

To whom payable

Name and address of next-of-kin

Date and place discharged

Reason for discharge

Character on discharge

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			No.	Date					

LIST OF DISCHARGE DOCUMENTS.

Attestation Paper, Triplicate	Militia Form W. 23
or Particulars of Recruit ... 2	Militia Form W. 133
Field Conduct Sheet	Militia Form W. 178 or A.F.B. 122
Casualty Form ... 1	Militia Form W. 54 or A.F.B. 103
Last Pay Certificate	Militia Form W. 44
Certificate that missing documents are unobtainable ... 1	
Medical History Sheet	Militia Form B. 313 or A.F.B. 178
Proceedings of Medical Board	M.F.B. 227, A.F.B. 179 or A.F.A. 45
Dental History Sheet	Militia Form B. 465
Medical Report	M. F. W. 129 or D. M. S. 1375
Regimental Conduct Sheet	Militia Form B. 263
Company Conduct Sheet	Militia Form B. 263a

SHORT FORM.

PROCEEDINGS ON DISCHARGE.

(Demobilization.)

1. No. C.C. 222686 — Regtl. No. 449168

2 Rank. Private

3. Name. Brossard Louis Joseph Delphise

4. Unit. 1st Depot Battalion. 2nd Quebec Regt.

5 Date of Discharge 23.9.18. Place Quebec

6 Reason for Discharge Demobilization

S.O.S. on return to records of Registrar. (23-9-18)

Part II Orders No. 267-1 Date, 24-9-18.

Discharged under authority of P.C. 3051, of 11-12-18.

7. Authority.

8. Proposed Residence after Discharge

9. CERTIFICATE TO BE SIGNED BY SOLDIER.

I hereby acknowledge that at the undernoted place and date I received my discharge Certificate

M. F. W.?

Signature of Soldier.

10. CONFIRMATION.

The discharge of the above named man is hereby confirmed.

Place

Date

Signature

(O. C. Discharging Unit.)

M.F.B. 218a—300M.-11-18—1772-39-113.

LIST OF DISCHARGE DOCUMENTS.

Attestation Paper, Triplicate	Militia Form W. 23
or Particulars of Recruit ... 2	Militia Form W. 133
Field Conduct Sheet	Militia Form W. 178 or A.F.B. 122
Casualty Form ... 1	Militia Form W. 54 or A.F.B. 103
Last Pay Certificate	Militia Form W. 44
Certificate that missing documents are unobtainable ... 1	
Medical History Sheet	Militia Form B. 313 or A.F.B. 178
Proceedings of Medical Board	M.F.B. 227, A.F.B. 179 or A.F.A. 45
Dental History Sheet	Militia Form B. 465
Medical Report	M. F. W. 129 or D. M. S. 1375
Regimental Conduct Sheet	Militia Form B. 263
Company Conduct Sheet	Militia Form B. 263a

SHORT FORM.

PROCEEDINGS ON DISCHARGE.

(Demobilization.)

1. No. E.C. 222686 Regt. No. 449168

2. Rank. Private

3. Name. Brassard, Louis Joseph Alphonse.

4. Unit. 1st. Depot Battalion - 2nd. Quebec Regt.

5. Date of Discharge 23.9.18 Place Quebec

6. Reason for Discharge ~~Demobilization~~

S.O.S. on return to records of Registrar. (23-9-18)

Part II Orders No. 264-1 Date 24-9-18.

Discharged under authority of P.C. 3051 of 11.12.18

7. Authority.

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I hereby acknowledge that at the undernoted place and date I received my discharge Certificate

M. F. W.?

Signature of Soldier.

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Place

Date

Signature

(O. C. Discharging Unit.)

M.F.B. 218a—300M.-11-18—1772-39-113.