

LT

BROSSEAU

JACQUES

**I.D. number**

**Surname**

**Given names**

**No. d'identification**

**Nom de famille**

**Prénoms**

DEC'D 18-6-16

**PERSONNEL RECORDS CENTRE  
CENTRE DES DOCUMENTS DU  
PERSONNEL**

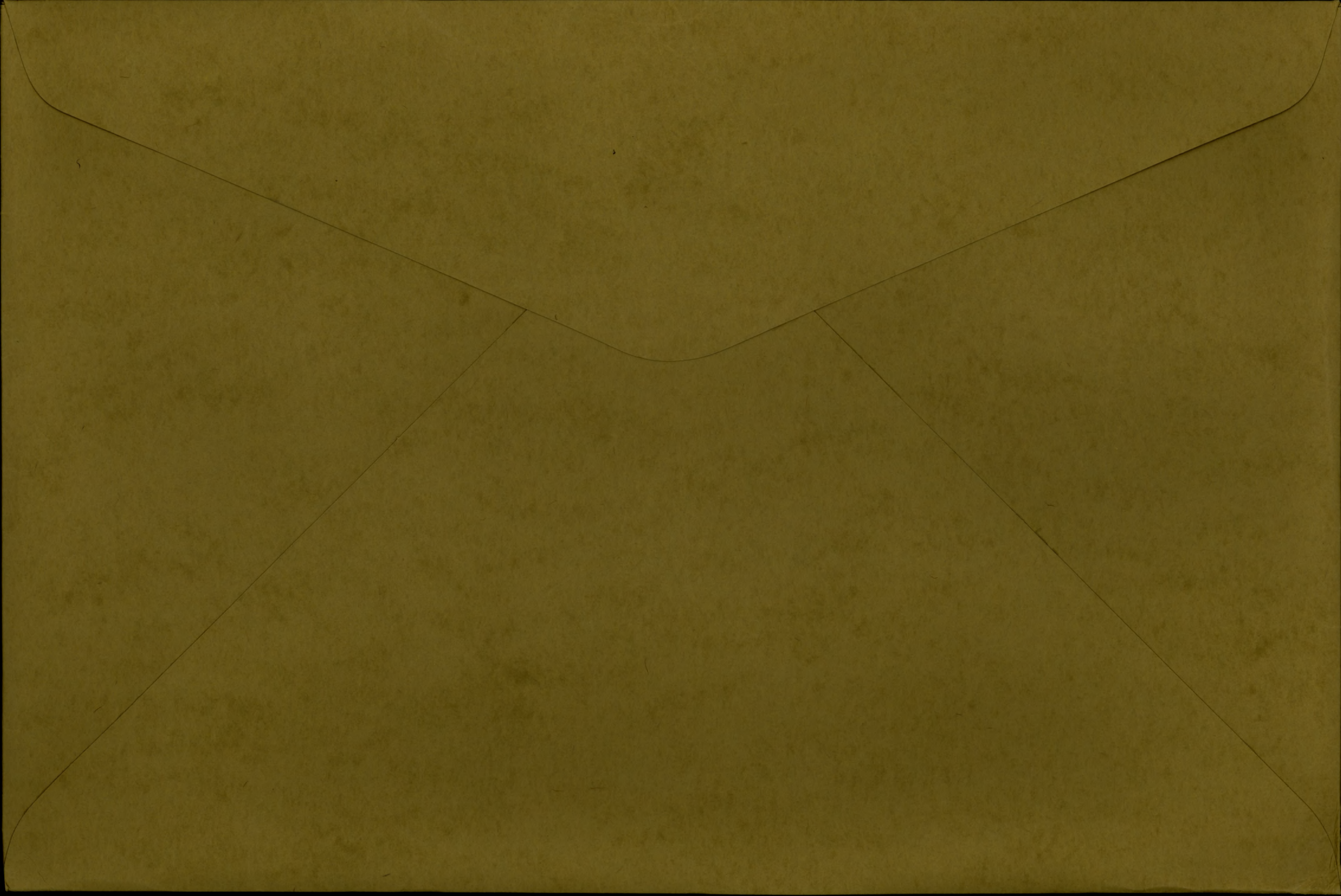
**PERSONNEL RECORDS ENVELOPE  
ENVELOPPE DES DOSSIERS DU PERSONNEL**

**Location**

**Lieu**

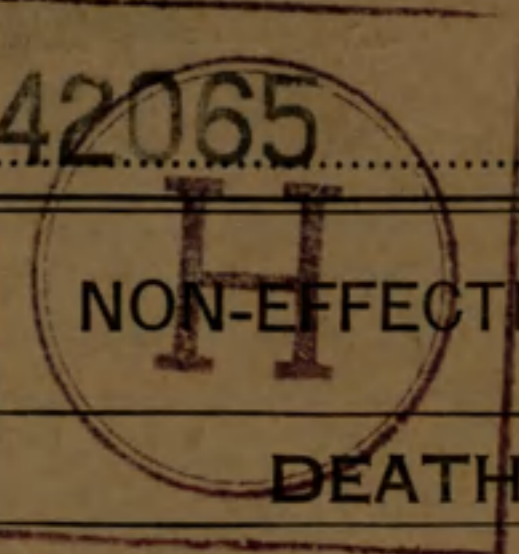
1113

**«CONTENTS CONFIDENTIAL»  
«CONTENU CONFIDENTIEL»**



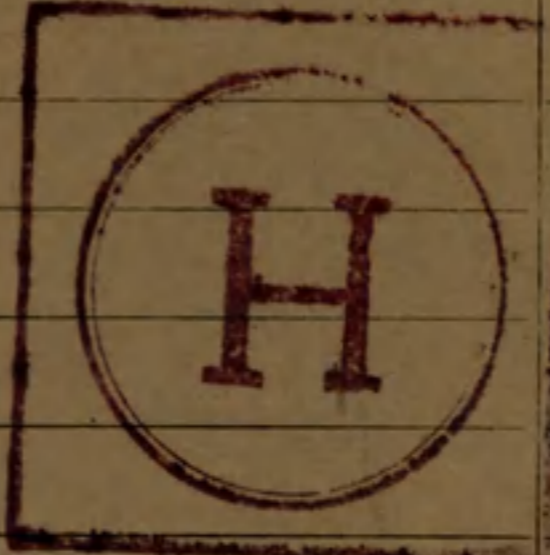
C.E.F. REGIMENTAL DOCUMENTS

NAME **BROSSEAU JACQUES** REGT. No. **LIEUT** UNIT **22 FC BN** H. Q. FILE No. **42065**



CONTENTS	DATE RECEIVED	TO WHOM FORWARDED	DATE FORWARDED	M. F. W. 2505 REFERENCE	NON-EFFECTIVE BY DEATH CATEGORY DIED 18-6-16
ATTESTATION PAPER (M.F.W. 23, 133 or 51)					
CASUALTY FORM (M.F.W. 54 or A.F.B. 103)					
TRAINING HISTORY SHEET (M.F.W. 113)					
FIELD CONDUCT SHEET (M.F.W. 178 or A.F.B. 122)					
REGT. CONDUCT SHEET (M.B.W. 263 or A.F.B. 120)					
COMPANY CONDUCT SHEET (M.F.B. 263A or A.F.B. 121)					
MEDICAL HISTORY SHEET (M.F.B. 313 or A.F.B. 173)					
DENTAL HISTORY SHEET (M.F.B. 465)					DISCHARGE CATEGORY
MEDICAL REPORT (M.F.B. 227 or A.F.B. 179)					
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)					
DECLARATION, COURT OF INQUIRY (M.F.B. 259 or A.F.B. 115)					
LAST PAY CERTIFICATE (M.F.W. 44)					DESERTION
PROCEEDINGS ON DISCHARGE (M.F.W. 218 or A.F.B. 268)					
PARTICULARS OF CHARACTER (A.F.W. 3226)					
COPY OF PARCHMENT DISCHARGE CERTIFICATE (M.F.W. 39A)					
CARDS					
PAY-SHEETS					

*Box 113*



*Box 4030 30*

CANADIAN FORCES  
RECORDS CENTRE  
PERS JACKET  
ROOM

223m  
**ATTESTATION PAPER.**

No. *L. 101*

Folio.

**CANADIAN OVER-SEAS EXPEDITIONARY FORCE.**

**QUESTIONS TO BE PUT BEFORE ATTESTATION.**

(ANSWERS).

CANADA

- 1. What is your name?..... *Lieut. Jacques Brosseau*
- 2. In what Town, Township or Parish, and in what Country were you born?..... *St Hubert*
- 3. What is the name of your next-of-kin?..... *Joseph Brosseau*
- 4. What is the address of your next-of-kin?..... *721 St Hubert, Montreal, P.Q.*
- 5. What is the date of your birth?..... *18 May 1886*
- 6. What is your Trade or Calling?..... *Lumber merchant*
- 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?..... *no*
- 10. Have you ever served in any Military Force?.. *yes in exel corps Mt St Louis*  
If so, state particulars of former Service.
- 11. Do you understand the nature and terms of your engagement?..... *yes as an Officer*
- 12. Are you willing to be attested to serve in the CANADIAN OVER-SEAS EXPEDITIONARY FORCE?..... *yes*

*Jacques Brosseau* (Signature of **Man**).  
*David Baker* (Signature of Witness).

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

I, *Jacques Brosseau*, 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: *NOV 10 1914* 1914. *Jacques Brosseau* (Signature of **Recruit**).  
*David Baker* (Signature of Witness).

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

I, *Jacques Brosseau*, 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: *NOV 10 1914* 1914. *Jacques Brosseau* (Signature of **Recruit**).  
*David Baker* (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 *St Johns* this *10th* day of *November* 1914.

*Lieut. Charles J. ...* (Signature of Justice)

I certify that the above is a true copy of the Attestation of the above-named **Recruit**.  
*J. M. ...* (Approving Officer)

*6*

Description of Laurie Rousseau on Enlistment.

Apparent Age 28 years.....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. 7 ins.

Chest measurement { Girth when fully expanded..... 39 ins.  
 Range of expansion..... 5' ins.

Complexion..... lyt

Eyes..... Blue

Hair..... Brown

- Religious denominations.
- Church of England.....
  - Presbyterian.....
  - Wesleyan.....
  - Baptist or Congregationalist.....
  - Other Protestants (Denomination to be stated.)..... R.C.
  - Roman Catholic.....
  - Jewish.....

CERTIFICATE OF MEDICAL EXAMINATION.

I have examined the above-named Officer 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..... Jan 10 1914.

Place..... St John

W. M. Dymally  
W. M.  
 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.

.....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. M. Fowler (Signature of Officer)

Date..... 1914.

CERTIFIED CORRECT

Casualty Form—Active Service.

9 = NOV. 1918

Regiment or Corps 22<sup>nd</sup> "I.L." Battalion

CANADIAN RECORD OFFICE

Regimental No. \_\_\_\_\_

Rank Lieut.

Name Brousseau Jacques

Enlisted (a) ~~10-11-14~~ Terms of Service (a) \_\_\_\_\_ Service reckons from (a) ~~10-11-14~~

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) \_\_\_\_\_

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				
20-9-15	O.C. 22 Batt.	Proceeding Overseas Disembarked	Boulogne	15 <sup>9</sup> / <sub>15</sub>	Non. Roll.
18-6-16	O.C. 10 Cas. Clrg Stn.	Died (12.5 a.m.) from Shrap. wound left hand and Leg amputated.	10 Casualty Clearing Station	18-6-16	Telegram 7362 d/18-6-16. D.Cas.S.138 d/19-6-16  Part 0.25 d/21-6-16.  <i>M. Loebsch</i>  Lieutenant for Lt.Col.A.A.G.

(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.]



Rank and Name **Lieut. BROSSEAU Jacques**

*A.F.B. 158*  
*Nov 1. 15*

**A.F.B. 158**

**1 AUG 1915**

Regimental No.

Name and Address of Next-of-kin **Joseph Brosseau,**

Unit **22nd Bn.**

**721, St Hubert,**

Date of enlistment **10th Nov. 1914. St John's. P.Q.**

Place of birth **St Hubert.**

Married (Yes or No) **Sibgle.**

If in Permanent Force

Date and place of discharge

Reason for discharge

Character on discharge

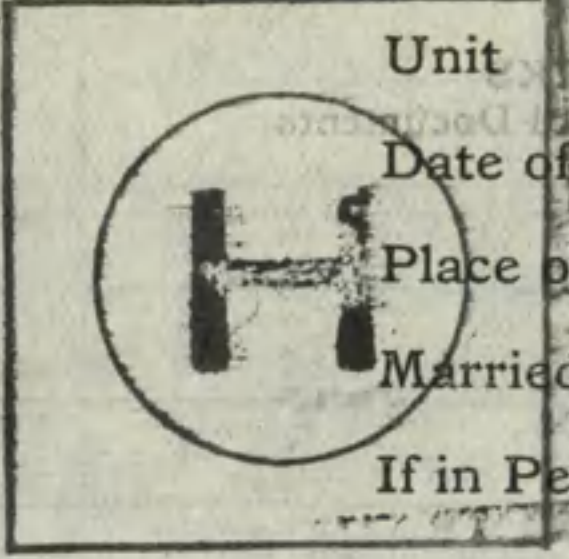
Promotions or appointments

*Left Canada 20/5/15*

**A.F.B. 108**

**A.F.B. 108**  
*22-9-14*

**DEC 1 1915**  
**JAN 1 1916**  
*do 1-2-16*  
*do 1-3-16*  
*do 1-4-16*  
*do 1-5-16*



Report

Record of promotions, reductions, transfers, casualties, etc., during active service. The authority to be quoted in each case.

Place

Date

Date

From whom received

REMARKS  
Taken from Official Documents

*20-9-15 22 Batt*

*Proceeding Overseas*

*15/9/15*

*N.R. Hand of Leg Amputated*

*19-6-16 Tel*

*Admit to No 10 Casualty Clearing Station*

*17-6-16*

*C.L. 394 Shell Rd High*

*20-6-16. Tel.*

*Repts from Base. Died of Wounds*

*18-6-16*

*PT 110-25-22 Bn d/21-6-16*  
*C.L. 395.*

**NOV. 1915**





Surname

Christian Name

Reg. No.

Rank

Unit

**MEDICAL BOARD** held at

Date

Serial No.

(1)

Other Medical Boards at

Date

Serial No.

(2)

(3)

(4)

(5)

Condition found by Board

Disposition Recommended

(1)

(2)

(3)

(4)

(5)

**PENSIONS & CLAIMS BOARD** held at

Date .....

Disposition

Remarks

Brosseau.

J.

Lieut.

22nd. Battn.

No. 10. Cas. Clg. Sta.

17-6-16.

Shell wd. lt. thigh & hand. lt. leg.  
amputated.

(Dang. wd.).

Reported from base:-.

**DIED OF WOUNDS:-. 18-6-16.**

C.L. 19-6-16. 394.

**20-6-16. 395.**

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

R

Register No. DB 1310

WAR SERVICE GRATUITY  
TO  
DEPENDENTS OF DECEASED SOLDIERS

A.P. File No. 2236-j-10

Regt'l No. .... Name Jacques Brosseau  
(Christian Name) (Surname)  
Unit 22nd Bn. Rank Lieut. Date of enlistment .....  
Date of casualty 18. 6. 16. B.P.C. File No. 5963  
Was service performed overseas? Yes

*66*

DEPENDENT

Name Mrs. Marie L. Brosseau Relationship Mother  
Address 238 Sherbrooke St. West,  
Montreal,  
P.Q.

Amount of Special Pension Bonus \$ Nil Abstracted by M. Knox

M.F.W. 2652  
25M-6-20.  
H.Q. 1772-89-1473

Eligible for Gratuity ..... \$ .....  
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 : Not eligible under P.C. 1486  
No S.A. paid

Clerk W. Mitchell

Audited by  
.....  
Date .....

*Noted  
20/8/20  
26*

# 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		

M. F. W. 127  
306M-1-19  
1772-39-1140

Remarks:

1

Number ..... Rank *LIEUT.*

*RV*

Surname ..... *BROSSEAU*

*RV*

*R*

Christian Names ..... *JACQUES*

Unit ..... Theatre of War ..... *FRANCE*

Dates of Service .....

Remarks ..... *D*  
*Mother*

Latest Address ..... *Mde Marie L. Brosseau*

*228 Sherbrooke St. W.*

*Montreal, P.Q.*

Roll No. *13*

*Page 1428*

11/59 - Rex APR 1 3 1921

B.W.M. Petd. 16/5/21

G.A. 37006 Dup SEP 8 1921

B. & U. W.M. Petd. 13/10/21

Re

DESP. APR 18 1922
REG. NO. 4/37017

Elig. for 1914-15 Star Lieut. 22nd Bu. ~~22nd~~

BROSSEAU, Jacques, Lieut. 22nd Batt'n.

1777

21  
✓

MEDALS & DECORATIONS

Joseph Brosseau (Father)  
24 McTavish St., Montreal, P.Q.

Cancelled  
14/3/22  
S.C.

Scroll Desp.

FEB 17 1921

Requ. No. 2-20711

PLAQUE & SCROLL

Father, as above.

Plaque Desp.

Requ. No.

P3592 P.R. 10/10/21

Serial No 781868

AUG 24 1921

CROSS OF SACRIFICE

Mrs. M. L. Brosseau (Mother)  
~~24 McTavish St., Montreal, P.Q.~~

228 Sherbrooke St. W.

~~Desp APR 23 1920 65749~~ - montreal.

" 16-6-20 X 167

MR



M

X ret'd 12 5/20  
removed from add.

(Amended Card)

BROSSEAU,

Jacques

Lieut.

*22nd Bn*

*M.*

MEDALS &  
DECORATIONS

(Mother)

Mde. Marie L. Brosseau,  
228 Sherbrooke St. West,  
Montreal, P. Q.

PLAQUE &  
SCROLL

Mother, as above.

MEMORIAL  
CROSS.

*Eligible for 1914-15 Star  
Eligible for D.M.  
Eligible for B.W.M.*



332-83-41

CARD NO.

18  
6  
16

SURNAME. *Brosseau*

CHRISTIAN NAMES

*Jacques*

REGL. NO.

RANK

*Lieut*

UNIT *22<sup>nd</sup>*

*Batt.*

FORMER CORPS

*1st Lieut 85th Regt. 14-4-13. Auth.*

NEXT OF KIN.

CHANGE OF ADDRESS

NAMES IN FULL

*Brosseau. Joseph*

RELATIONSHIP TO SOLDIER

ADD

*24 Mc Jarvis St.,*

*Montreal, P.Q.*

*folio 36  
28-8-16.*

*auth. C.P.R. tel. 0417  
June 20-1916.*

COUNTRY OF BIRTH

*Canada, St Hubert.*

DATE

PLACE OF ATTESTATION

*St John*

DATE

*10/11/14*

*0/18 20-5-15 89  
3*

MARRIED

SINGLE

*Yes.*

WIDOWER

TRADE OR CALLING

RELIGION

DESCRIPTION.

APPARENT AGE

YEARS

MONTHS

HEIGHT

FEET

INCHES

CHEST MEASUREMENT

INCHES

EXPANSION

INCHES

COMPLEXION

EYES

HAIR

DISTINGUISHING MARKS

MEDICAL EXAMINATION. PLACE

DATE

*Date of Sailing 20-5-15; Date of App't. 27-10-14. Auth. S. G. L. H. 10/15/15*

NAME *Brosseau, Jacques*

H. Q. FILE No. 649-

REGT'L. No.

RANK AND CORPS *Lieut. 22nd Bn.*

CABLE

No.

DATE

NATURE OF CASUALTY

*M8418*

*19-6-16*

*Died of Wounds June 18th '16 ✓*

*AFB20909*

*Queen*

*216-16*

*Died of wounds rec'd in action 18-6-16*

LIST No.

HOSPITAL

DATE OF  
ADMISSION

REMARKS

394 # Casualty, Clearing  
Stat (Tel)

17-6-16

Dangerously wounded Shell Wd  
Lft thigh and hand Lft Leg ampute

395 Reported from Base

18-6-16

Bleed of Wound's Sharp  
Wd R Hand and leg  
amputated

Name Brosseau Jacques Rank Lieut.

27. B 104-23  
Reg. No.

Unit 22nd. Battalion.

Next of Kin Canada

Date	Movement	Place	Casualty	List No.	Notified N/K O.	W.O. List
17-6-16	<u>NO. 10. CASUALTY CLEARING STATION</u>	Shell	Wd, Lt, Thigh & Hand. Lf. Leg.	394	M8358	19/6.
18-6-16	<i> Died of Wounds</i>		Amputated	395	M8418	20/6





No.

RANK

*Lieut*

NAME

*Brosseau. Jacques*T. O. S. *27/10/14**Nov payroll.*

UNIT

*22<sup>nd</sup> Battalion. (French. Canadian)*M. D. *4*

PAID FROM	PAID TO	SIG. OR REC'T	PROMOTIONS, TRANSFERS, DISCHARGES, ETC.	
			PARTICULARS	AUTHORITY
<i>1914</i>	<i>1914</i>			
<i>Oct 27</i>	<i>Oct 31</i>	<i>✓</i>		
	<i>Nov</i>	<i>✓</i>		
	<i>Dec</i>	<i>✓</i>		
<i>1914</i>	<i>1915</i>			
	<i>Jan</i>	<i>✓</i>		
	<i>Feb</i>	<i>✓</i>		
	<i>Mar</i>	<i>✓</i>		
	<i>Apr</i>	<i>✓</i>		
	<i>May</i>	<i>✓</i>		

**UNIT SAILED**  
**MAY 20 1915**







**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
28. 2. 15.	Inoculated Anti-Typhoid

**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

To be used (a) for recruits enlisting direct into the Regular Army, and (b) for men of the Territorial Force when they are admitted to Hospital.  
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 BROSSEAU Christian Name JACQUES

TABLE I.—GENERAL TABLE.

Birthplace ... Parish St. Hubert, P.Q. County \_\_\_\_\_

Examined ... on 10th day of November 1914,  
at St. John's P.Q.

Declared Age ... 28 years ... days.

Trade or Occupation ... Merchant

Height ... 5 feet 7 inches.

Weight ... lbs.

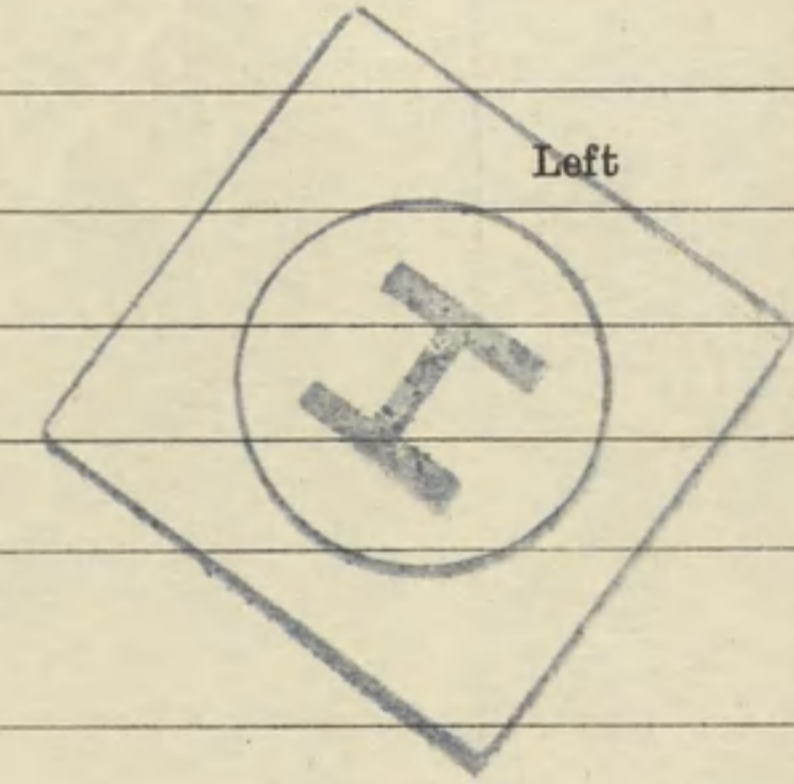
Chest Measurement { Girth when fully Expanded 39 inches.  
Range of Expansion 5 inches.

Physical Development ... Good

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

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

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



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

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

Approved by (Signature) Arthur Mignault  
(Rank) Lt. Col. A.M.C.  
Medical Officer.

Enlisted ... at St. John's P.Q.  
on 10th day of November 1914.

Corps.	Regtl. No.
<u>22nd (F.C.) Battalion</u>	<u>Lieut</u>

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

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



ASSIGNED PAY.

UNIT.

RANK.

NAME.

NAME OF DATE AUTHORITY

DATE AUTHORITY

Beneficiary

Address

Amount. \$

Separation Allowance issued. Yes or No.

22<sup>nd</sup> Battln

Lieut

Name Brosseau  
Initials J  
Bank Bank of Montreal.

*Died of Wounds 18<sup>th</sup> 6<sup>th</sup> 29<sup>th</sup> 20<sup>th</sup> 16*

DATE	PARTICULARS	CK. NO.	CR.	DR.	ASSIGNED PAY PAID IN CANADA	BALANCE	SPECIAL AUTHORITIES To be initialed by P.M. in every case	INITIALS
1916								
April 24	Pay April (R)		108			108		
. 26	Bank			108		0		
May 25	Pay May (R)		111 60					
. 26	Bank			111 60		0		
June 20	Pay June (R)		108					
21	Advance (100 frs 8 <sup>th</sup> 16)			17 03		90 97	<i>June 19 100 frs</i>	
Aug 1	Tfr to N.B. Branch			90 97		0	<i>carried forward</i> <i>Tfr to N.B. Branch</i> <i>N.B. opened 27/16</i>	



NAME

RANK

UNIT

ASSIGNED TO

DATE

DATE

NAME OF

INITIALS

INITIALS

INITIALS

INITIALS

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ASSIGNED TO

OR

OR

OR

INITIALS

INITIALS

SPECIAL AUTHORITIES

INITIALS

*Handwritten signature*

UNIT *22<sup>nd</sup> Battalion*

ASSIGNED PAY:—

MONTHLY AMOUNT

TO WHOM PAYABLE

*Lieut J. Brosseau*

NAME

DATE OF APPOINT

MARRIED (YES OR

NEXT OF KIN:—

DATE NON-EFFECT

AND CA

BANK IN WHICH PAY & ALLOWANCES DEPOSITED

*Died of wounds 18<sup>th</sup> 6/16 b.L. 395. 20<sup>th</sup> 6/16*

PERIOD		No. OF DAYS	REGTL. RATE	PAY				As pay RATE OF FIELD ALLOWANCE	Charges AMOUNT OF FIELD ALLOWANCE	Debit Balance P.F. ALLOWANCE	ALLOWANCES		TOTAL	TO ALL
FROM	To			AMOUNT OF REGIMENTAL	J.A. COMMAND	Missing ADJUTANT	CR. FROM PREV. ACCOUNT				TOTAL PAY	Credit Balance MESSING		
1. 6. 15	30. 6. 15	30	<i>2 Bay.</i> 60	18	30		108				108			
1. 7. 15	31. 7. 15	31	<i>60 J.A.</i> 67	18 60	31		111 60				111 60			
1. 8. 15	31. 8. 15	31	<i>71 Mes.</i> 67	18 60	31		111 60				111 60			
1. 9. 15	30. 9. 15	30	60	18	30		108				108			
1. 10. 15	31. 10. 15	31	67	18 60	31		111 60				111 60			
1. 11. 15	30. 11. 15	30	60	18	30		108				108			
1. 12. 15	31. 12. 15	31	67	18 60	31		111 60				111 60			
1. 1. 16	31. 1. 16	31	67	18 60	31		111 60				111 60			
1. 2. 16	29. 2. 16	29	58	17 40	29		104 40				104 40			
1. 3. 16	31. 3. 16	31	67	18 60	31		111 60				111 60			
1. 4. 16	30. 4. 16	30	60	18	30		108				108			
1. 5. 16	31. 5. 16	31	67	18 60	31		111 60				111 60			
1. 6. 16	30. 6. 16	30	60	18	30		108				108			
								17 02	Credit Balance		90 97		Adv. PrA	

*W.E. Aug 16*  
*" " 116*

*Balance*

*90 97*

*90.97*

*Bal. trans to Canada for sett. 5/8/16*

**SUNDRY PAYMENTS**

DATE

CHEQUE NO.

PARTICULARS

Statement of  
By  
*Pm. Branch*  
Account rendered

ASSIGNED PAY.

UNIT.

RANK.

NAME.

NAME OF

DATE

AUTHORITY

DATE

AUTHORITY

Beneficiary

Address

Amount. \$

Separation Allowance issued. Yes or No.

Name

Initials

Bank

DATE

PARTICULARS

CK. NO.

CR.

DR.

ASSIGNED  
PAY PAID IN  
CANADA

BALANCE

SPECIAL AUTHORITIES  
To be initialled by P.M. in every case

INITIALS

NAME  
 DATE OF APPOINTMENT  
 MARRIED (YES OR NO)  
 NEXT OF KIN:— NAME  
 ADDRESS  
 DATE NON-EFFECTIVE  
 AND CAUSE

*Drosseau J Lieut*

UNIT *22 Battalion*

1915-16

ASSIGNED PAY:—  
 MONTHLY AMOUNT  
 TO WHOM PAYABLE

BANK IN WHICH PAY & ALLOWANCES DEPOSITED *Bank of Montreal*

PERIOD FROM 1915 TO	No. of Days	REGTL. RATE	PAY			RATE OF FIELD ALLOWANCE	ALLOWANCES			TOTAL PAY AND ALLOWANCES	ASSIGNED PAY	SUNDRY DEDUCTIONS	NET P. A.	PAID IN CASH	DEPOSITED IN BANK	CARRIED FORWARD	REMARKS
			AMOUNT OF REGIMENTAL	COMMAND	ADJUTANT		CR. FROM PREV. ACCOUNT	TOTAL PAY	AMOUNT OF FIELD ALLOWANCE								
<i>1/6 30/6</i>	<i>30</i>	<i>x</i>	<i>60</i>			<i>60</i>	<i>18</i>	<i>30</i>		<i>48</i>	<i>108</i>	<i>108</i>	<i>Balance</i>	<i>108</i>			
<i>1/7 31/7</i>	<i>31</i>		<i>62</i>			<i>62</i>	<i>18.60</i>	<i>31</i>		<i>49.60</i>	<i>111.60</i>	<i>111.60</i>		<i>111.60</i>			
<i>1/8 31/8</i>	<i>31</i>		<i>62</i>			<i>62</i>	<i>18.60</i>	<i>31</i>		<i>49.60</i>	<i>111.60</i>	<i>111.60</i>		<i>111.60</i>			
<i>1/9 30/9</i>	<i>30</i>		<i>60</i>			<i>60</i>	<i>18</i>	<i>30</i>		<i>48</i>	<i>108</i>	<i>108</i>	<i>Total Outlets</i>	<i>108</i>			
<i>1/10 31/10</i>	<i>31</i>		<i>62</i>			<i>62</i>	<i>18.60</i>	<i>31</i>		<i>49.60</i>	<i>111.60</i>	<i>111.60</i>		<i>111.60</i>			
<i>1/11 30/11</i>	<i>30</i>		<i>60</i>			<i>60</i>	<i>18</i>	<i>30</i>		<i>48</i>	<i>108</i>	<i>108</i>		<i>108</i>			
<i>1/12 31/12</i>	<i>31</i>	<i>✓</i>	<i>62</i>			<i>62</i>	<i>18.60</i>	<i>31</i>		<i>49.60</i>	<i>111.60</i>	<i>111.60</i>		<i>111.60</i>			
<i>1/1/16 31/1/16</i>	<i>31</i>	<i>✓</i>	<i>62</i>			<i>62</i>	<i>18.60</i>	<i>31</i>		<i>49.60</i>	<i>111.60</i>	<i>111.60</i>		<i>111.60</i>			
<i>1/2/16 29/2/16</i>	<i>29</i>	<i>✓</i>	<i>58</i>			<i>58</i>	<i>17.40</i>	<i>29</i>		<i>46.40</i>	<i>104.40</i>	<i>104.40</i>		<i>104.40</i>			
<i>1/3/16 31/3/16</i>	<i>31</i>	<i>✓</i>	<i>62</i>			<i>62</i>	<i>18.60</i>	<i>31</i>		<i>49.60</i>	<i>111.60</i>	<i>111.60</i>		<i>111.60</i>			

*25 SEP 1915*

SUNDRY PAYMENTS

DATE	CHEQUE No.	PARTICULARS	AMOUNT					REMARKS
			\$	c.	£	s.	d.	
<i>1915</i>	<i>6 10 2188</i>	<i>Outfit all.</i>	<i>100</i>		<i>20</i>	<i>10</i>	<i>11.</i>	

