

243326.
I.D. number
No. d'identification

Broissot
Surname
Nom de famille

DAUMINA
Given names
Prénoms

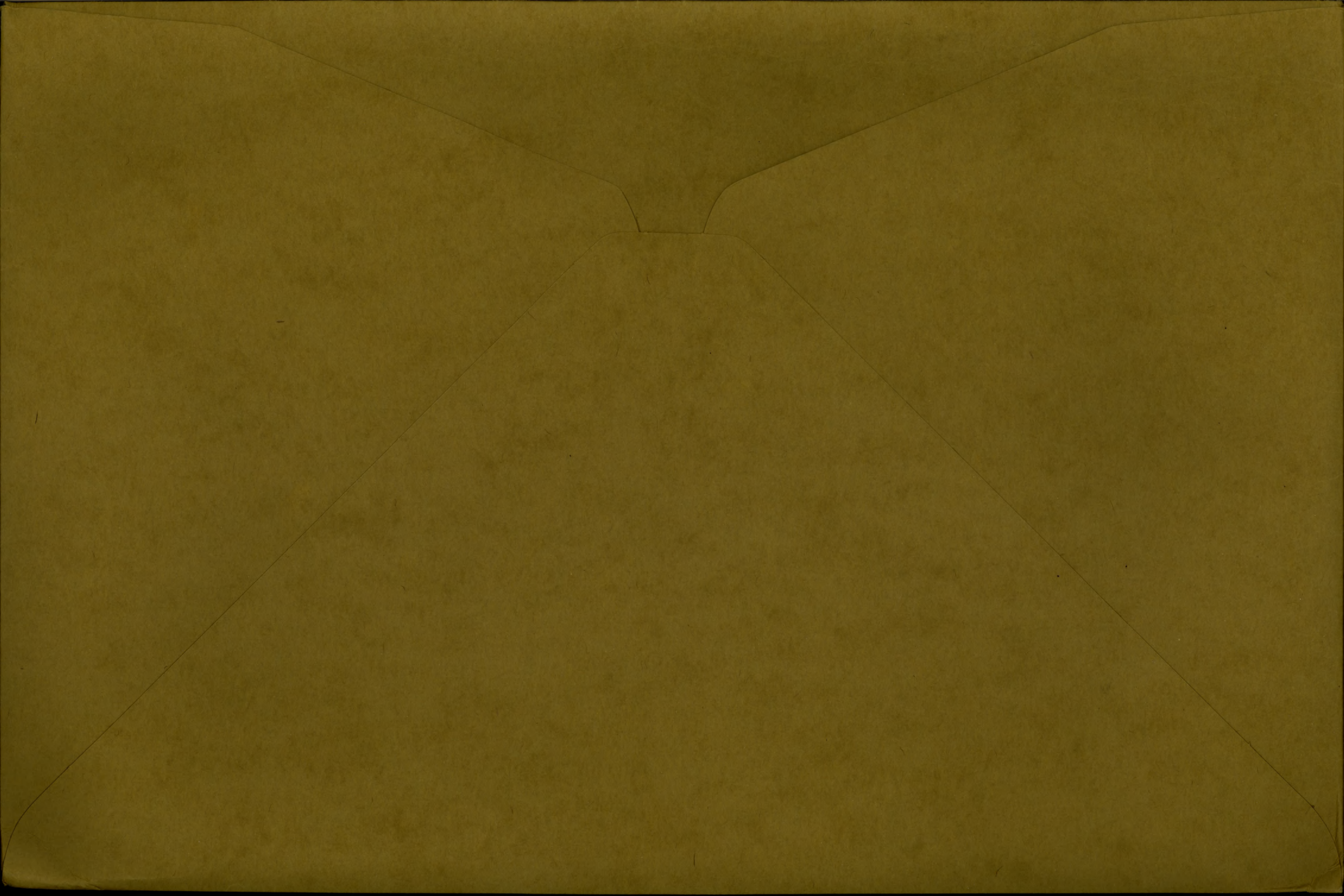
NATIONAL PERSONNEL RECORDS CENTRE
CENTRE NATIONAL DES DOCUMENTS
DU PERSONNEL

PERSONNEL RECORDS ENVELOPE
ENVELOPPE DES DOSSIERS DU PERSONNEL

Location
Lieu

1094

«CONTENTS CONFIDENTIAL»
«CONTENU CONFIDENTIEL»



REGIMENTAL DOCUMENTS

NAME

BROISSOIT.

D. AUMINA

REGT. NO.

243326

UNIT

163rd Bn.

H. Q. FILE NO.

CONTENTS

DATE RECEIVED

TO WHOM FORWARDED

DATE FORWARDED

M. F. W. 2505
REFERENCE

NON EFFECTIVE BY

DEATH

Category

DISCHARGE

Category

DESERTION

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.F.B. 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. 178)

DENTAL HISTORY SHEET (M.F.B. 465)

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)

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)

R. 149.

M.F.W. 67.

P. 85.

PIÈCE D'ATTESTATION.

No. 243326
Folio
206 BATN. C. E. F.
DORS. MONTREAL

CORPS EXPÉDITIONNAIRE CANADIEN D'OUTRE-MER

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?..... Campé avec 64ieme. 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. J. Lefebvre (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 4ieme jour de d'avril 1916.

A. J. Lefebvre (Signature du Juge)

Signalement de Brossart Dominica à l'Enrolement

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

Taille 5.....pieds.....3.....pouces

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

Teint.....Foncé,

Yeux.....Brun,

Chevelure.....Brun/

Confession religieuse { Anglican.....
Presbytérien.....
Méthodiste.....
Baptiste ou Congregationaliste.....
Catholique Romain.....Oui.
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.

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.....Avril 1916.....191.....

Lieu.....Valleyfield, Que.....
* Insérer ici "valide" ou "non-valide". Médecin-Officier.

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 Brossart.....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.

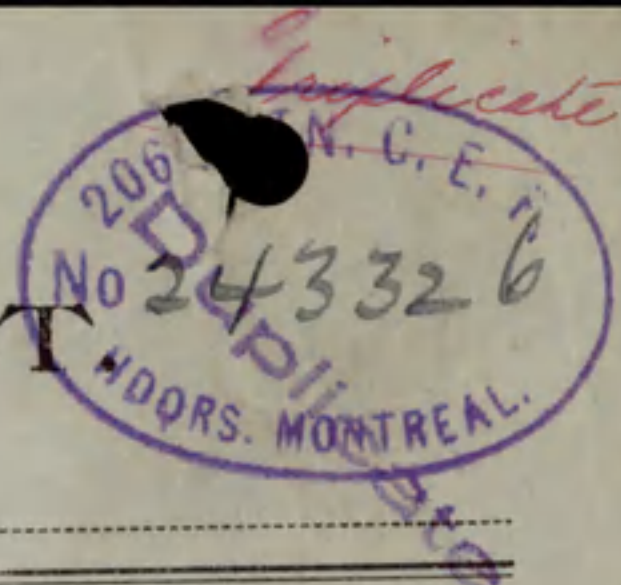
.....J. B. Baymelo.....(Signature de l'officier.)

Date.....Avril 4th 1916.....

O.C. 2061eme. Batt. C.E.F.

ORIGINAL
206th BATT. C.F., C.E.F.

MEDICAL HISTORY SHEET



Surname Brossoit

Christian Name Domina

Examined { on 6th day of April, 1916

Approved by [Signature]

{ at Valleyfield, Que.

Birthplace { City or Town Valleyfield,

{ County Beauharnois, Que.
19.

Rank _____ M.O.

Apparent age _____

Trade or occupation Tisserand,

Height 5 Feet 3 Inches.

Weight 140 Lbs.

Chest measurement { Minimum 32 inches.

{ Maximum expansion 35 inches.

Physical development Good,

Small-Pox Marks No.

Vaccination Marks { Arm Right. Left.
One on left arm.
Number _____

When Vaccinated last When young,

(a) Marks indicating congenital peculiarities or
previous disease _____

No.

(b) Slight defects but not sufficient to cause rejection

No.

EXAMINED FOR RE-ENGAGEMENT.

M.O.

M.O.

M.O.

M.O.

M.O.

M.O.

M.O.

VACCINATIONS.

M.O.

M.O.

M.O.

ANTI-TYPHOID INOCULATIONS, ETC.

M.O.

M.O.

M.O.

Enlisted on 4th day of April

6. 1916 at Valleyfield, Que.

	CORPS.	REG'TL NUMBER.	HABITS.	DATE.
Joined on enlistment	<u>206th Batt</u>	<u>243326</u>		<u>4/5/16</u>
Transferred to	<u>163rd</u> <u>22nd</u>			

EXAMINED OR DISCHARGED BY A MEDICAL BOARD.

STATION.	DATE.	DISEASE.	RESULT.
			<u>Att. J. J. J.</u>

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.

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								
Bermuda	6/10/16.							Examined for Active Service & found fit. - M. A. B. M.			Major Rowe				
Commanche	Ashes	29	12	16	13	1	17	Gonorrhea	16	Trigone & hot perianth	Mr. Shute Capt				
										Duplicate Medical History Sheet posted to here. 4 S.					

Dec 29/16

H.Q. 54-21-23-53

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..... th 206th Battalion C.E.F.

(2) Regimental Number ~~243581~~ 243326

(3) Full Name of Soldier.....*Donna Breiser*.....

(4) Place of Birth.....Walbyfield

(5) Are you married, or not? Yes

(6) If married, state,
(a) Full name of your wife.....

(b) Present Postal Address..... *Haley Field*

(7) Are you a widower? No

(8) Have you any children?

If so, give number of boys and girls.....

Also their names and ages.....

(9) Is your Father alive? no

If so, state name and address _____

(10) Is your Mother alive? Yes

If so, state name and address Lt. 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 Broisot
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.

Date 21/7/16

H. J. Scott
a Officer Commanding.

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

FORM OF WILL.

Name in full.

I Dominat Brossait

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

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

absolutely, and my personal estate I bequeath to Mother

Mrs Philomene Brossait

Valleyfield

Ave. Canada

Fill in Date and Year.

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

D Brossait

(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. Ketcher

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 22 191.

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

JUL 22 1911

MILITIA DEPT.

This original will was
forwarded to Bureau
18

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 } Date of appointment } Numerical position on }
present rank } to lance rank } 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 06.163rd Bn Transf to 10th Res Bn Shoreham 7.1.17 D.O.P.2. 7 ✓

7.1.17 06.10th Res Bn Taken on from 163rd Bn Shoreham 7.1.17 Capt for ady 163rd Bn
D.O.P.2. 1 ✓

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

C. B. D. ARRIVED C. B. D.

FRANCE 15¹⁰/₁₇ 15-10-17.
123 31-10-17.

C. B. D. LEFT C. B. D. FOR

ccrc. 18¹⁰/₁₇ 18-10-17.
N. R. D 19-10-17.

ccrc ARRIVED ccrc
Despatched to 22nd Bn
JOINED UNIT

FIELD 19¹⁰/₁₇ 19-10-17.
11-11-17 2 Roll /36

11.11.17
24.11.17

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>Iwhogan</i> Lieut-Colonel, A. A. G., Canadian Section,	Major, for General Headquarters, 3rd Echelon.		

CHANGE OF ADDRESS

649-B-27119

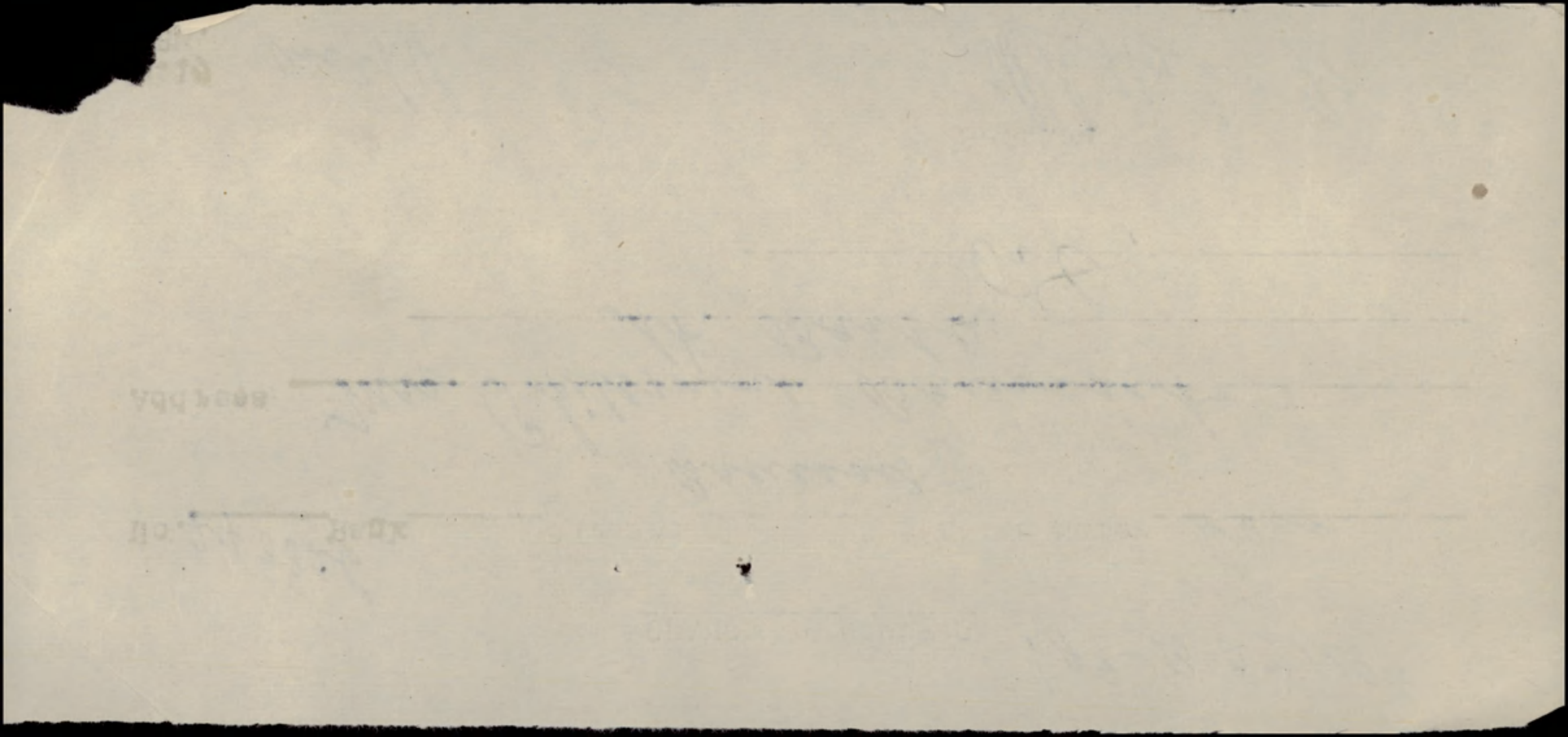
No. 243326 Rank _____ Surname _____ Christian Name Danmina

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

Section

auth(L) 6 8/21

Ha: " 8/21



A.C. Rank Name BROISSOIT, Daumina. Reg'l No. 243326 ✓
 Unit 163rd. Bn. If in perm. Corps, }
 What Unit? } Married or Single Single.
 Place and Date of Enlistment Valleyfield. April 4th. 1916. Place of Birth Valleyfield, Que.
 Name and Address, Next-of-Kin Mrs. Philomene Broissoit, ✓
Valleyfield Beauharnois Co. Que. Canada. Relationship Mother.
 Assigned Pay Monthly \$ Payable to Relationship
 Separation Allowance \$ Payable to Relationship

N/E. R.B. No. 12801
 File R.L. K in A.
 Category MISSING.

Discharge, Date and Place

Reason

Character

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.				
ARRIVED IN ENGLAND Per S.S. Metagama 6-12-16					
30-12-16	163 rd Bn	Admitted to Bramshott Mil. Hosp. Bramshott		28-12-16	Pt. II. R. O. 175 R. C. R. 7.
7-1-17	163RD. BN.	S.O-3 to 10th RES. BN. Brams't		7-1-17	T 1107
7-1-17	10th R. BN.	TOC. of 10th RES BN Shore'n		7-1-17	T. 2 D.O. 1
12-1-17	do	Admitted Connaught Hospital	do	30-12-16	CHIL. O. 6 (D. C. R. 7. 163 rd Bn)
29.1.17	do.	Cancelled.	do	29.1.17	CH. M. O. 20.
5-4-17	do	Disch. Connaught Hosp	Aldershot	13-1-17	CH. L. 20 V.D. 4
15.10.17	---	SOS to 22 Bn	Field	15.10.17	CH. L. 20 256 r 22 Bn Pt II Do 123
31.5.18	22 nd Bn	Wounded & Missing			4/31.10.17
		Believed Killed after Action		25.5.18	58. + b.L. 71232

CHECKED
 10001917

5/5/18

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 + 1st Lt 568/8/18

MILITIA AND DEFENCE
ASSIGNED PAY
 OVERSEAS CONTINGENTS

M. F. W. 12
 50m.—7-16
 H. Q. 1772-39-819

To Whom

Address

By Whom Assigned

Regtl. No.

Rank

Corps

Rate

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				



W. 12. 18

ASSIGNED PAY

OVERSEAS CONTINGENTS

Sheet No. 2.

(Assignee)

P. Brassart
PAYMENTS.

Name of Soldier

Brassart Domina
243326

163 Bn

L. L. Job 5470—Req. 6883.

Month.	Year.	Cheque No.	Am't.	Remarks.
			15 ⁰⁰	SEP 1-1916
April	1916			
May				
June				
July				
Aug.				
Sept.				
Oct.		0-21955	30. =	30 adj
Nov.		0-25291	15	15 future
Dec.		31399	15	
Jan.	1917	36615	15	
Feb.		I 42974	15	15 P
March		R 46158	15	15 E.
April		122	15	15 W.
May		H 6853	15	
June		Q 13294	15	15 E.
July		J 20127	15	Pa
Aug.		N 27654	15	B
Sept.		M 37069	15	Lu
Oct.		48481	15	210.00 ✓
Nov.				
Dec.				
Jan.	1918			
Feb.				
March				
April				
May				
June				
July				

MILITIA AND DEFENCE
ASSIGNED PAY
OVERSEAS CONTINGENTS

Sheet No. 2 (Contd.)

PAYMENTS.

Name of Soldier _____

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

OVERSEAS CONTINGENTS

Sept 1/16

RATE OF SEPARATION ALLOWANCE

--	--	--	--

RATE OF ASSIGNMENT

15-			
-----	--	--	--

PARTICULARS OF SEPARATION ALLOWANCE

No.

Rank

Promoted

Reverted

Discharge

Soldier's Name

Battalion

Beneficiary

Relationship

Address

No. 243326
 Rank Plt Promoted
 Soldier's Name Domirza Brossoit
 Battalion 163 Battrn.
 Beneficiary
 Relationship
 Address

PARTICULARS OF ASSIGNMENT

Name

Address

Change of Address

1

2

3

4

Name P. Brossoit
 Address St. Barbe Line

2113-D-2. REMARKS

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

674330 to 30.6.18
 acct closed 30.6.18

Bel.	Pensions Notified Date... 19.6.18
	Killed in Action
	Died of Wounds
Ref.	Missing
	C. L. 20.6.18
	Clerk... Ball
	Date Noted... 19.6.1918

1500 paid
 Killed in action May 25/18 C.L. 20/18
 June 13/18 SR.



MRO 2 B Ren 20/10/18 LH

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

PARTICULARS OF ASSIGNMENT

No.

Name

Rank

Promoted

Reverted

Discharge

Address

Soldier's Name

Change of Address

Battalion

1

Beneficiary

2

Relationship

3

Address

4

Date

Cheque
No.Amount
S/AAmount
A/P

Total

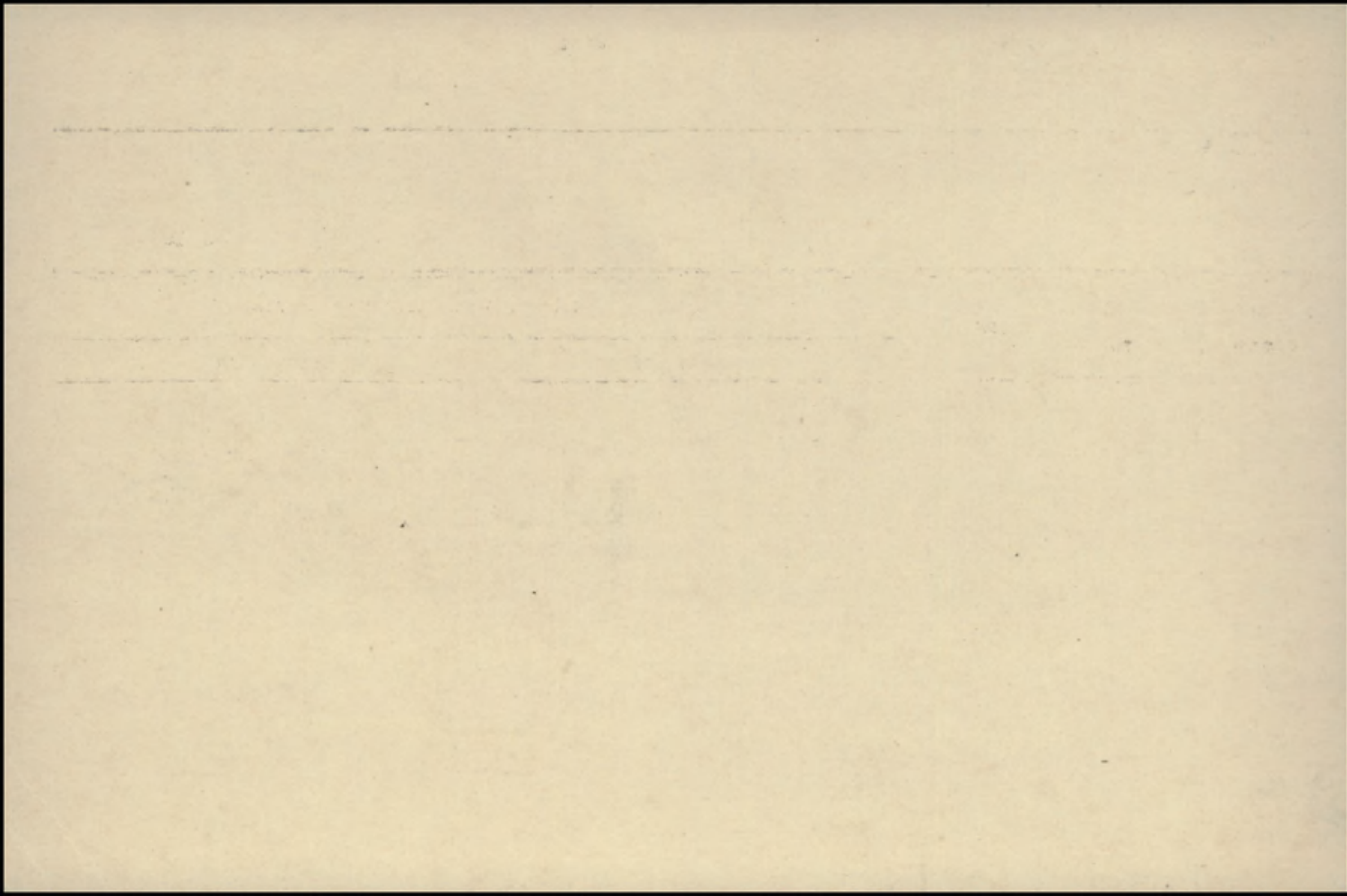
REMARKS

M. F. W. 128
400M-617-1772-38-1141
L. L. 22320-M. & D. 7553.

No. 243326 RANK *Pvt*NAME *Crosscut, D.*T. O. S. 4-4-16 ~~2034~~ UNIT 206th Battalion C.E.S.
of 5-4-16

M. D. 4

PAID FROM	PAID TO	SIG. OR REC'T	PROMOTIONS, TRANSFERS, DISCHARGES, ETC.	
			PARTICULARS	AUTHORITY
1916 Apr 4	1916 Apr 30	-		
May		-		
June		-		
July		-	A. M. L. 78 Am. 5 days C.E.S. do. 34. of 11-7-16 4 days pay forfeited	



No. 243326.
243526

RANK Pte.

NAME Brossart D.

T.O.S.

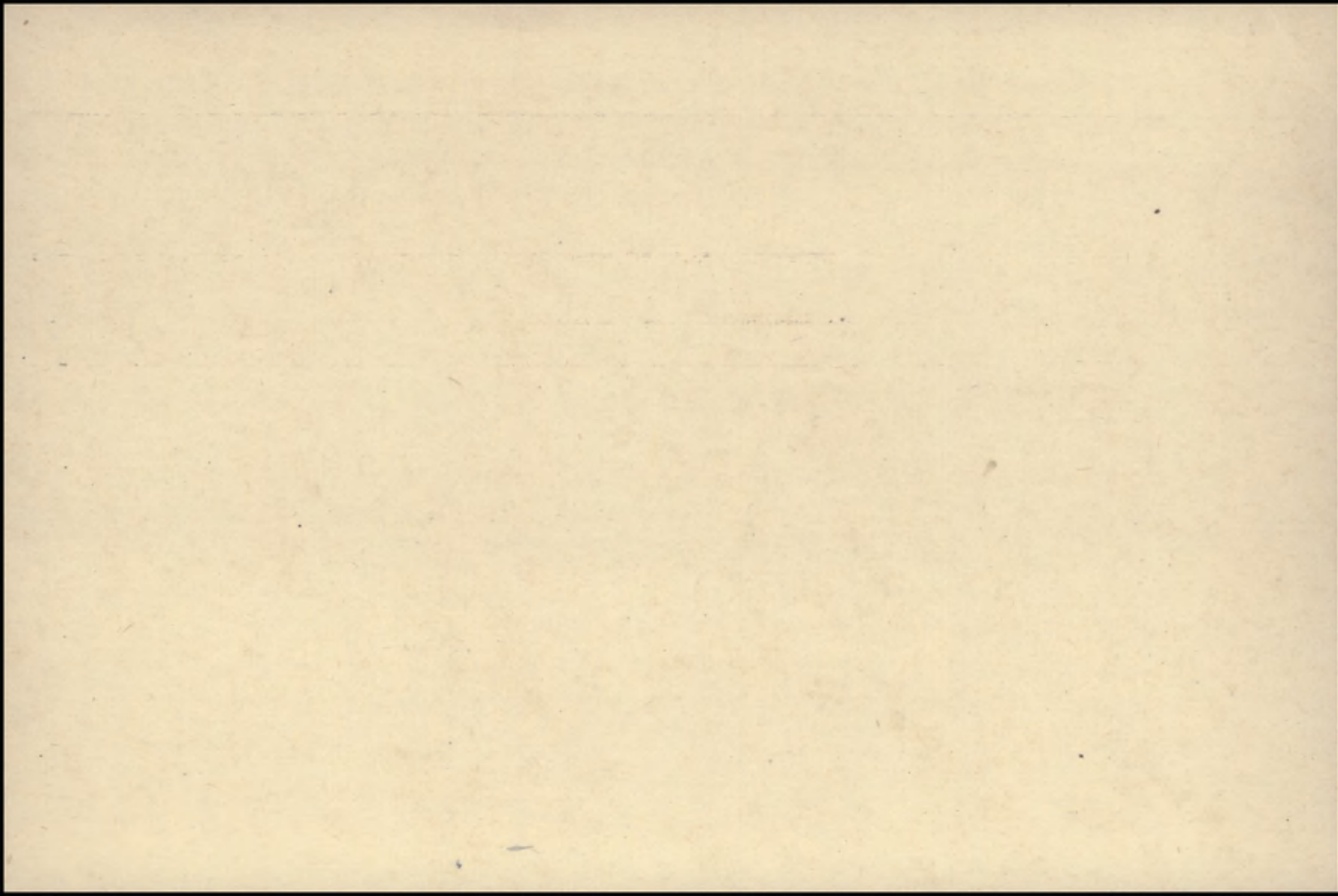
Trans from 206th Bn
Aug. Paylist.

UNIT

163rd Battalion, C. E. F.

M. D. 4

PAID FROM	PAID TO	SIG. OR REC'T	PROMOTIONS, TRANSFERS, DISCHARGES, ETC.	
			PARTICULARS	AUTHORITY
1916 Aug	1916. Aug 31	L.		
Sept.		L.		
Oct.		L.		
Nov.		L.		
Dec		m		
UNIT SAILED NOV 27 1916				



NAME

RANK AND CORPS

CABLE

NO.

DATE

NATURE OF CASUALTY

REGT'L. No.

H. Q. FILE No 649

FOLLOWS
NO.

FOLLOWS

Crossoit Domin
~~*Crossoit August*~~
22nd Br 10cm
1st Br

H 155 14-4 14-4-18	6-6-18	Rept wdd. & miss. Believed K in W. May 25th 1918 Mrs Philomena Crossoit (mother) Valleyfield B. C.
H 161 8-4	12-6-18	Rept wdd. & miss. now rept K in May 25th 1918 ✓

LIST No.

HOSPITAL

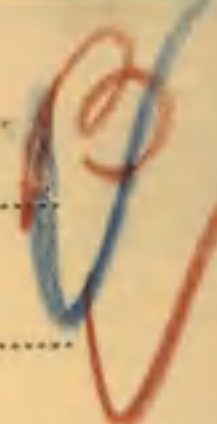
DATE OF
ADMISSION

REMARKS

1227	Presumptive miss. bel. Killed in action now upt Killed in action	25-5-18	(22)
------	---	---------	------

Am

4/11

Plé. 

Number 243326 Rank Plé.

Surname BROISSOIT

Christian Name Daurina

Units 224th Cn. Inf. Theatre of War France

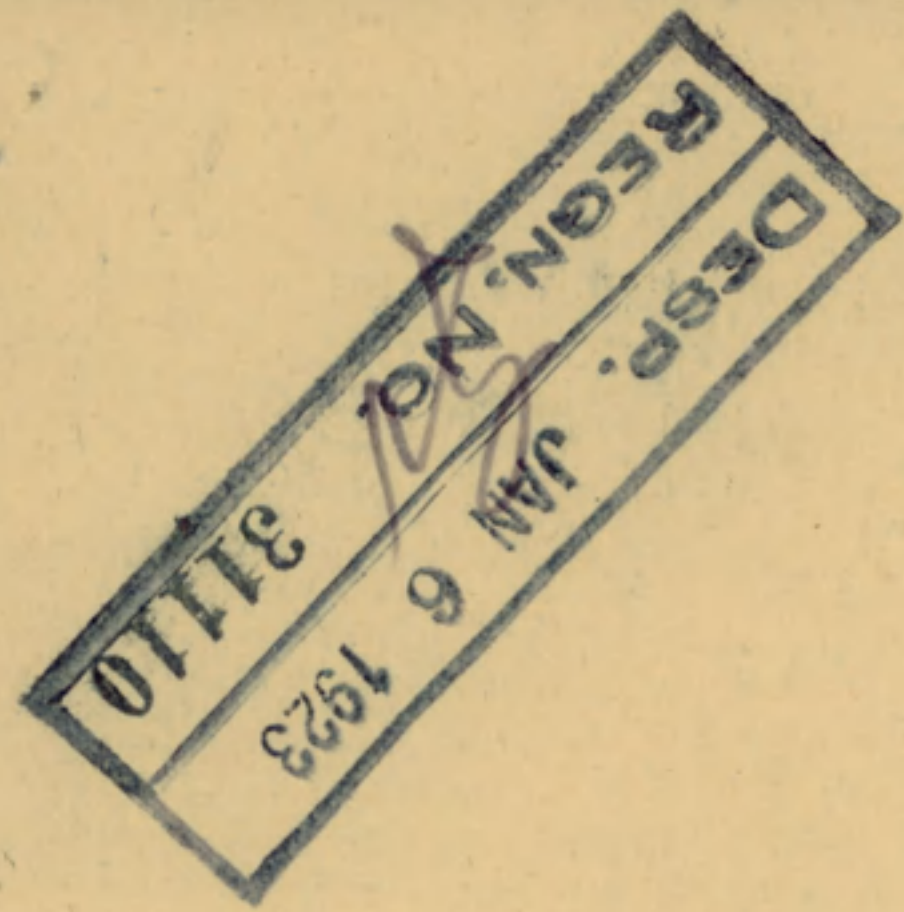
Date of Service 15-10-17

Remarks (M) Mrs. P. Broessoit,

Latest Address St. Barbe, Que.

Roll No. "B" Page 21365

200m.-6-21....



[illegible]

m

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

Med. & Dec. (Mother) Mrs. P. Brossoit,
JAN 13 1921 Valleyfield, St. Barbe,
" re desp. 3-9-21- B 940 Que.
Plague Desp. JAN 13 1922 Reqn. No. 113567 X re desp. 20 5/2, X 223

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

(Serial no. 765078.)

Mem. Cross. (Mother)

" " "

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

39740

ac

6 4 3

M C.3835-8- DEC 24 1920

Scull ret 2A-2-21.
M x Ret'd 3/3/21 Left Town.

SURNAME

CHRISTIAN NAME OR NAMES

REG. No.

Broissoit

D.

243376.

RANK

UNIT

Co.

TROOP

BATTY.

Plé
HOSPITAL

Que 22.

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

C. 5.6.18 A232.
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.

2.

3.

4.

5.

6.

7.

[illegible]

