

475786

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

BOYD

**Surname**  
**Nom de famille**

D.O.W. 5-6-16

THORNTON, BRIDGEMAN

**Given names**  
**Prénoms**

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

D.O.B. 14-11-1889

OPEN  
ATIA

**Location**  
**Lieu**

977





ORIGINAL  
ATTESTATION PAPER.

No. Mc G. 1113

CANADIAN OVER-SEAS EXPEDITIONARY FORCE.

Folio 475786

QUESTIONS TO BE PUT BEFORE ATTESTATION.  
(ANSWERS).

1. What is your name? *Boyd, Thornton Bridgman*
  2. In what Town, Township or Parish, and in what Country were you born? *Robcaygeon, Ont. Can.*
  3. What is the name of your next-of-kin? *(Father) W. J. C. Boyd*
  4. What is the address of your next-of-kin? *Robcaygeon, Ont. Canada*
  5. What is the date of your birth? *Nov. 14<sup>th</sup> 1889.*
  6. What is your Trade or Calling? *Accountant*
  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? *Yes.*
  10. Have you ever served in any Military Force?.. *Lgt. 45<sup>th</sup> Regiment (Victoria) Robcaygeon*  
If so, state particulars of former Service.
  11. Do you understand the nature and terms of your engagement? *Yes.*
  12. Are you willing to be attested to serve in the CANADIAN OVER-SEAS EXPEDITIONARY FORCE? *Yes.*
- Thornton B. Boyd* (Signature of Man).  
*Geo. Fisher* (Signature of Witness).

DECLARATION TO BE MADE BY MAN ON ATTESTATION.

I, *Thornton Bridgman Boyd*, 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.

*Thornton B. Boyd* (Signature of Recruit)  
Date *16<sup>th</sup> August* 1915 *Geo. Fisher* (Signature of Witness)

OATH TO BE TAKEN BY MAN ON ATTESTATION.

I, *Thornton Bridgman Boyd*, 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.

*Thornton B. Boyd* (Signature of Recruit)  
Date *16<sup>th</sup> August* 1915 *Geo. Fisher* (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.

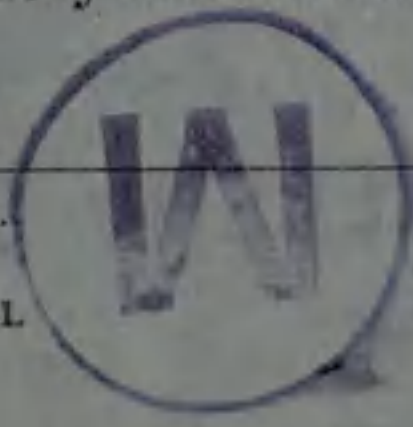
The above questions were then read to the Recruit in my presence.

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 *Montreal* this *16<sup>th</sup>* day of *August* 1915.

*Robert Clark Hogg* (Signature of Justice)

I certify that the above is a true copy of the Attestation of the above-named Recruit.

*W. Shea* (Approving Officer)



Description of J. B. Boyd on Enlistment.

Apparent Age 25 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. 9 3/4 ins.

Mole front of left ear

Chest measurement { Girth when fully expanded ..... 36 ins.  
 Range of expansion ..... 2 1/2 ins.

Complexion ..... fair

Eyes ..... blue

Hair ..... light brown

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

CERTIFICATE OF MEDICAL EXAMINATION.

I have examined the above-named 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 ..... Aug 16 1915

Place ..... Montreal

J. H. Harvey  
 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.

Thernton Bridgman Boyd 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.

[Signature] (Signature of Officer)

Date ..... AUG 24 1915 1915

**3rd UNIVERSITY CO. C.E.F.**

**Casualty Form—Active Service.**

*CERTIFIED CORRECT.*  
*Canadian Record Office,*  
*Westminster House,*  
*7, B, Millbank, S.W.*

Regiment or Corps 475786 P. P. C. L. I.  
 Regimental No. MC 1113 Rank Pte. Name Boyd J.  
 Enlisted (a) 16/8/15 Terms of Service (a) 1 year or duration of war Service reckons from (a) 16/8/15  
 Date of promotion } Date of appointment } Numerical position on }  
 to 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				
15/3/16	11 Res. Bn.	Proceeded Overseas to <del>Pte. Boyd</del> P.P.C.L.I.	Lance	15/3/16	<i>L. L. L.</i> <i>Lt. &amp; Adj.</i>
		ARRIVED IN FRANCE	Harve	16/3/16	N. P. of C. Folio 714.
20-3-16.	Can Base D.	Left C.S.D. for Unit in the Field.		18-3-16.	101/AD/3/254.
25-3-16.	C.S. Batta	Joined Unit from Base in the Field.		19-3-16.	B. 213.
6-6-16.	10 C.C. Stn.	Died at 9-30 pm 5-6-16. from G.S.W. abdomen & Rt Arm	10 C.C. Stn.	5-6-16.	authy: (a.g. base) R. 34394 Part of Order No 24 d/- 14 16.

*[Signature]*  
 Lieutenant  
 for Lt Col. A. A. G.

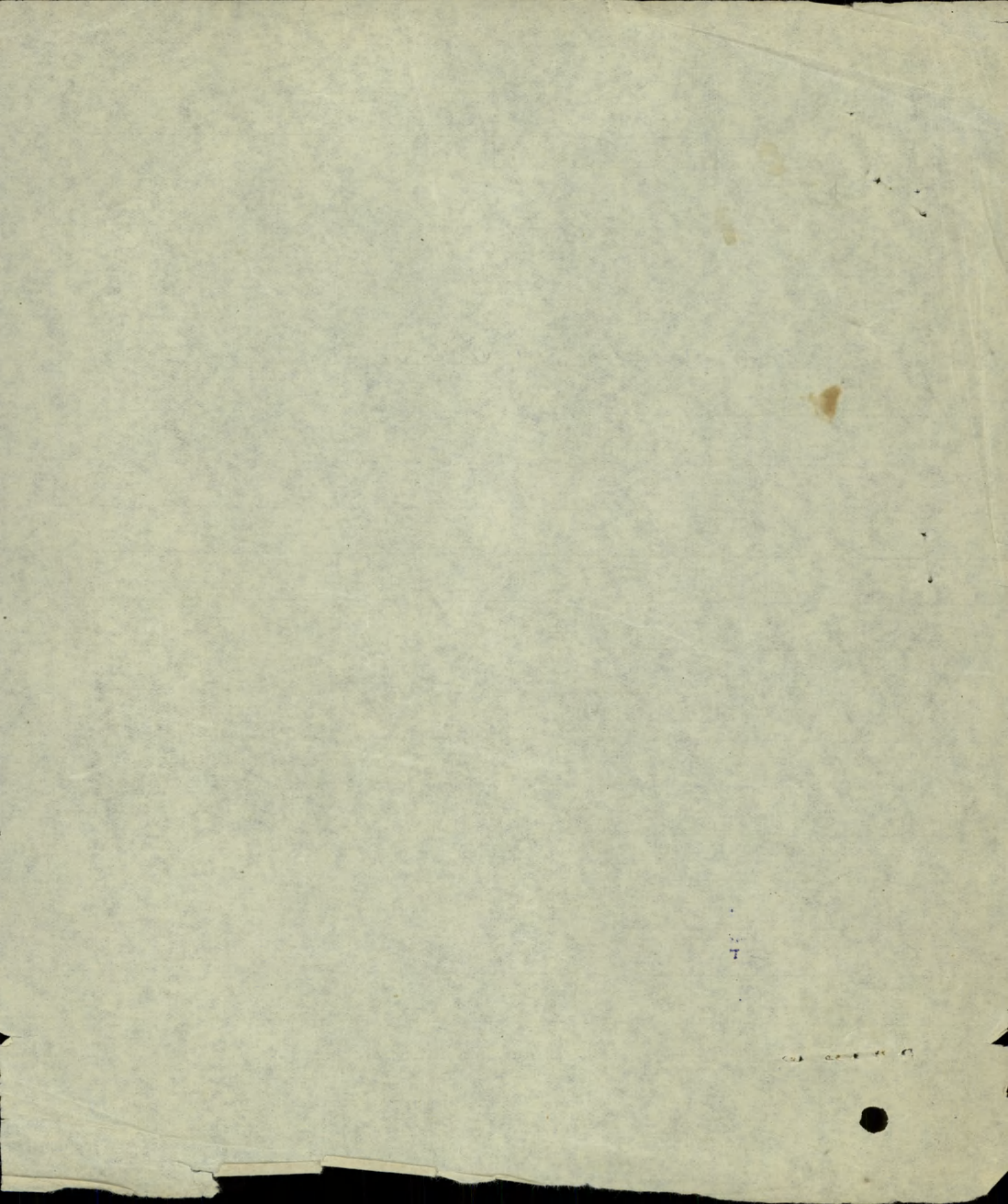
(a) In the case of a man who has re-engaged for, or enlisted into Section D, Army Reserve, particulars of such re-engagement or enlistment will be entered.  
 (b) e.g., Signaller, Shoing Smith, etc., etc., also special qualifications in technical Corps duties.

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				
<del> </del>					

21-1-16.

Inst: Inspect: 31 J. D. S.





# Boyd MEDICAL HISTORY SHEET.

Surname Boyd Christian Name Thornton

Examined { on 16<sup>th</sup> day of August 1915  
 at Montreal  
 Birthplace { City or Town Bobcaygeon, Ont  
 County Canada

Approved by F. W. Harvey  
 Rank Lieut. Amb. M.O.

Apparent age 25  
 Trade or occupation Accountant  
 Height 5 Feet 9 3/4 Inches.  
 Weight 138 Lbs.  
 Chest measurement { Minimum 33 1/2 inches.  
 Maximum expansion 36 inches.  
 Physical development good  
 Small-Pox Marks

Date	Fit or Unfit	EXAMINED FOR RE-ENGAGEMENT,
		M.O.
		M.O.
		M.O.
		M.O.
		M.O.
		M.O.
		M.O.

Vaccination Marks { Arm Right 0 Left 1  
 Number —  
 When Vaccinated last 1901

Date	Result	VACCINATIONS.
<u>Sept 22/15</u>	<u>✓</u>	<u>R. Gibson</u> M.O.
		M.O.
		M.O.

(a) Marks indicating congenital peculiarities or previous disease  
 (b) Slight defects but not sufficient to cause rejection

Date	Result	ANTI-TYPHOID INOCULATIONS, ETC.
<u>AUG 17 1915</u>	<u>✓</u>	<u>F. W. Harvey</u> M.O.
<u>AUG 27 1915</u>	<u>✓</u>	<u>F. W. Harvey</u> M.O.
		M.O.

Enlisted on 16<sup>th</sup> day of August 1915 at Montreal

	CORPS.	REG'T. NUMBER.	RANKS.	DATE.
Joined on enlistment	<u>3<sup>rd</sup> University Coy</u> <u>C.E.F.</u>	<u>475986</u>		
Transferred to..				

The Medical History Sheets of all men proceeding overseas, must be returned by the Officer commanding their unit to the Record Office when they leave England.  
 Lieut. Col. M.O.  
 In Charge of Records  
 Canadian Forces in England

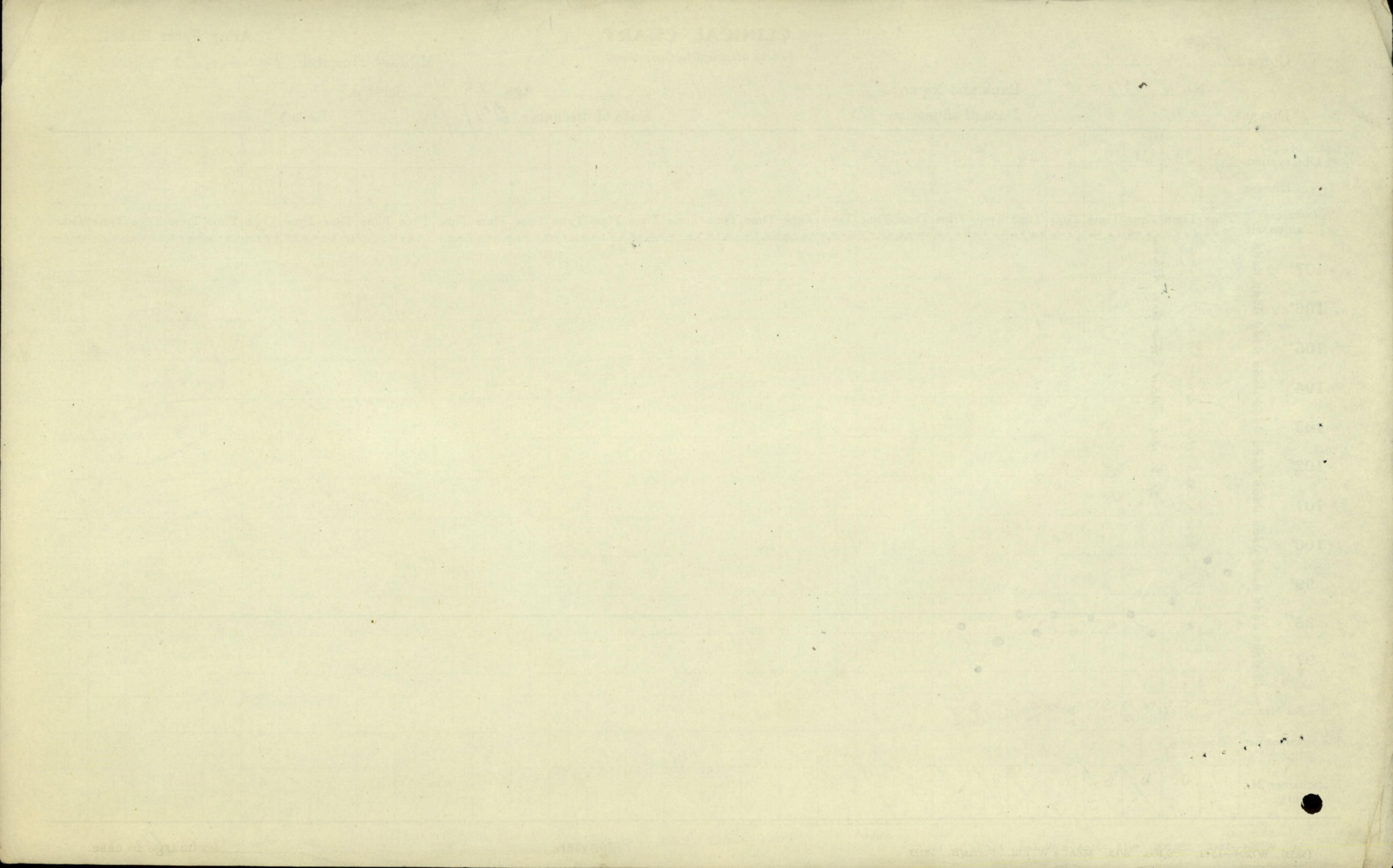
### EXAMINED OR DISCHARGED BY A MEDICAL BOARD.

STATION.	DATE.	DISEASE.	RESULT.

N. B.—This sheet to be disposed of in accordance with instructions in the Regulations for Army Medical Services, on the man becoming non-effective; the date and cause being stated on next page.







MEDICAL CASE SHEET.\*

No. in Admission and Discharge Book.	Regimental No.	Rank.	Surname.	Christian Name.
	475 786	Cpl	Boyd.	Thornton
Year		Unit. 11 <sup>th</sup> Reserve Bn	CE 7	Age. 26
				Service. 5 mths

Station and Date.	Disease
-------------------	---------

Jan. 20 P.O.A.:-  
 On furlough from Thorncliffe. Reported here suffering from Bronchitis. Was 3 weeks in hospital last month suffering from Bronchitis.  
 C.O.A.:-  
 99.5° P.M.  
 Loud Rhonchi over both lungs.  
 Urine a trace of albumin.

Jan 25<sup>th</sup> To return to depot. Discharged fit  
 J.L.L.



Rank *P.P.C.F.I.* Name **BOYD Thornton Bridgman**

Reg'l No. **475786**

P-56

Unit ~~No 3 Un Coy. to 11th BN.~~ What Unit? **If in perm. Corps,**

Married or Single **Single.**

Place and Date of Enlistment **Montreal. P.Q. 16th August. 1915** Place of Birth **Bobcaygeon, Ont.**

Name and Address, Next-of-Kin **W.T.C. Boyd, Bobcaygeon, Ontario, Canada.**

Relationship **Father**

Assigned Pay Monthly \$

Payable to

Relationship

Separation Allowance \$

Payable to

Relationship

Discharge, Date and Place

*5/6/16*

Reason *Killed in Action* Character *C 2 d 374 (or 379)*



Date		PAY			Field Allowance			Other Credits	Total Credits	Voucher		Cash Payments	Assigned pay	Other Charges	Total Debits	Balance	Remarks, Casualties, etc.
From	To	No. of Days	Rate	Amount	No. of Days	Rate	Amount			No.	Date						
Sept	30	30	1 <sup>00</sup>	30	30	10	3	10	43	446 - 479 -	14 60 17 03				31 63 11 37	clothing	
Oct	31	31	1 <sup>00</sup>	31	31	10	3 10		34 10	589 -	14 60				14 60 30 87		
Nov	30	30	1 <sup>40</sup>	33	30	10	3		36	661 - 696 -	14 60 19 47				34 07 32 80	Prom Cpl Nov 1 5/15 D.O. 2358	
Dec	31	31	1 <sup>40</sup>	34 10	31	10	3 10		37 20	743 - 881 -	4 87 24 33				29 20 40 80		
1916																	
Jan	31	31	1 <sup>40</sup>	34 10	31	10	3 10		37 20	1155 -	24 33				24 33 53 67		
Feb	29	29	1 <sup>40</sup>	31 90	29	10	2 90		34 80	1311 -	4 87				4 87 83 60		
Arch	31	14	1 <sup>40</sup>	15 40	31	10	3 10		35 50	1526 -	4 87				4 87 114 23	* reduced to 06 D.O. 15-3/16 D.O. 64	
				226 50				21 30 10 -	257 80			143 57			143 57 114 23		

STATEMENT OF SEP 26 1916 Account rendered

Chk No 316 Cash found in effects \$5.21

Checked *W.R.W.*  
*Lucas*  
BALANCE TRANSFERRED TO NEW LEDGER.





Surname

Christian Name or Names

Reg. No.

Boyd

T. B.

475,786

Rank

Unit

Co.

Troop

Batty.

Spl.

~~11th Batt~~  
R.P.C.L.I.

Date of Admission

Hospital

V.A.D. Hosp. Ramsgate

29.11.15

Transferred

Hosp.

1st Gen Birmmgham

Hosp.

Hosp.

Hosp.

Diagnosis

Influenza

(1) Later Diagnosis (if changed)

(2)

(3)

Recovery on 24.6.16

Additional Diagnoses: if more than one state present

Now Died of Wounds.

5.6.16

DISPOSITION

Date

Dis to Unit 27-1-16

S.L. 7.12.15 #51  
' 31-1-16 #72  
Ch. 20.6.16 #379

REMARKS

U.C. Bw reports:-

" 29.8.16. A434 (note)

A.M.D. 2 DEPT.

Beh. of D.G.M.S. O.M.F.C. London

202

# EPITOME OF HOSPITAL TREATMENT.

Hospital

Adm.

1.

2.

3.

4.

5.

6.

7.

Rank Name BOYD Thornton Bridgman

Reg'l No. 475786

Unit No 3 Un Coy. to 11th BN. What Unit? If in perm. Corps,

Married or Single Single.

Place and Date of Enlistment Montreal, P.Q. 16th August, 1915 Place of Birth Bobcaygeon, Ont.

Name and Address, Next-of-Kin W.T.C. Boyd, Bobcaygeon, Ontario, Canada.



Relationship Father

N/E. R.B. No.
File R.L.
Category <i>Below</i>

Assigned Pay Monthly \$ Payable to

Relationship

Separation Allowance \$ Payable to

Relationship

NERB Serial No 4.

Discharge, Date and Place

Reason

Character

*R 1395218*

Report		Record of promotions, reductions, transfers, casualties, etc., during active service. The authority to be quoted in each case.	Place	Date	Character	REMARKS Taken from Official Documents
Date	From whom received					
		<i>Arrived in England.</i>		<i>14 SEP 1915</i>		
<i>15.10.15</i>		<i>Granted bombing cert.</i>				
<i>7.12.15</i>	<i>W.O.</i>	<i>adm. <sup>Imple.</sup> <del>Field</del> <sup>W. A. D. Insp.</sup></i>	<i>Ramsgate</i>	<i>29.11.15</i>	<i>C.L. 51</i>	
<i>31.1.16</i>	<i>-</i>	<i>his to Unit.</i>	<i>S.cliffe.</i>	<i>27.1.16</i>	<i>" 72.</i>	
<i>15.3.16</i>	<i>O.C. 11</i>	<i>Reverts to Rank as percedg Overseas.</i>		<i>15.3.16</i>	<i>P.I. 64.</i>	<i>A.F.S. 103 Chd 22/3/16 R.4.</i>
<i>15.3.16</i>	<i>"</i>	<i>P.P. 6. 2. 1.</i>		<i>15.3.16</i>	<i>P.I. 64.</i>	
<i>21.3.16</i>	<i>O.C. 11</i>	<i>Taken on strength</i>	<i>In the Field</i>	<i>16.3.16</i>		<i>13 War</i>
<i>7.6.16</i>	<i>O.C. 11</i>	<i>Killed in Action</i>		<i>2-4/6</i>		<i>P.N. 6377 O.N.</i>
<i>14.6.16</i>	<i>"</i>	<i>Died of Wounds.</i>		<i>5.6.16</i>		<i>P.I. 24</i>
<i>29.8.16</i>	<i>"</i>	<i>"</i>		<i>5.6.16</i>		<i>C.L.A. 34.</i>

*MX  
24/12/2011 J.*



SURNAME

*Boyd*

CARD NO.

*XM#* 11280

CHRISTIAN NAMES

*Thornton Bridgeman,*

*X* **D** TOLL

REGL. NO.

*475786*

RANK

*Pte.*

UNIT

*P.P.C. & I. (R.H.) 3rd. Univ. Co.*

FORMER CORPS

*Sgt. 45th. Reg. (Victoria) Bobcaygeon.*

NEXT OF KIN.

CHANGE OF ADDRESS

NAMES IN FULL

*Boyd. W. C. J.*

RELATIONSHIP TO SOLDIER

*Father.*

ADDRESS

*Bobcaygeon. Ont.*

COUNTRY OF BIRTH

*Canada Bobcaygeon. Ont.*

DATE

PLACE OF ATTESTATION

*Montreal Que.*

DATE

*16/8/15*

*0/24/9/15 183*

MARRIED

SINGLE

*Yes*

WIDOWER

TRADE OR CALLING

*Accountant*

RELIGION

*Ch. of England*

DESCRIPTION.

APPARENT AGE

*25*

YEARS

MONTHS

HEIGHT

*5'*

FEET

*9 3/4*

INCHES

CHEST MEASUREMENT

*36*

INCHES

EXPANSION

*2 1/2*

INCHES

COMPLEXION

*Fair*

EYES

*Blue*

HAIR

*St. Brown*

DISTINGUISHING MARKS

*Mole front of left ear.*

MEDICAL EXAMINATION.

PLACE

*Montreal*

DATE

*Aug 16<sup>th</sup> 1915*

*Present Address Not stated*

NAME

Boyd Thornton Bridgeman

REG'T'L No. 475-786

RANK AND CORPS

Epl. (11<sup>th</sup> Res. Batt) P.O. No. 214

CABLE

NATURE OF CASUALTY

NO. DATE

FOLL.

W 8445	19-6-16	Killed in action between June 2 and June 4
A7 B	2090a	Died of wounds #10 Cas Cl. Slip 1916.
Rouen	14-6-16	June 5th 1916



LIST No.

HOSPITAL

DATE OF  
ADMISSION

REMARKS

57. U.A.D. Raucegate 29-11-15 - Influenza

72 1<sup>st</sup> South. Gen., Birmingham 27-1-16 " " " "

Disch. to unit.

279

A. Co. Depot

7-6-16.

Died of wounds as per H.L. 24344  
~~Killed in action~~

Number

475786

Rank

Pte

Surname

BOYD

Christian Name

Thornton Bridgman

Units

P. R. C. W. I.

Theatre of War

France

Date of Service

15-3-16

Remarks

(S) W. T. C. Boyd, Esq.

Latest Address

Bobcaygon  
Ont.

Col

Roll No.

B Page 19685

200m. -6-21.

57

DEPT. OF AGRICULTURE  
REG. NO. 12390  
JAN 5 1923

Name Boyd, Thornton Rank Private.

Reg. No. 475786

Bridgman.

Un P.P.C.I.I.

Next of Kin CANADA.

Date	Movement	Place	Casualty	List No.	Notified N/K O.	W.O. List
1916.						
2/4-6-16	O.C. Battalion reports:- <u>KILLED IN ACTION.</u>			A. 379	M. 8445	30/6/16
5-6-16	Died of Wounds (See Amendment			A434	066	

R.L. 25-B-1498.



Name Boyd T.B. Rank Corpl,

Reg. No. 475786.

Unit 11th, Battalion.

Next of Kin Canada.

Date	Movement	Place	Casualty	List No.	Notified N/K O.	W.O. List
29-11-15.	V.A.D. Hospt,	Ramsgate.	Influenza.	51.		
27-1-16.	1st. Sou Gen Hospt.					
	Discharged to Res unit.		Influenza.	72.		



649-B-4144

✓ ✓ ✓ ✓  
Boyd T.B. Pte. #475786-C.E.F.

P.P.C. L.I.

M

Medals

& Dec. (father)

W.T.C. Boyd, Esq.,  
Bobcaygon, Ont.

DOWN 1  
Scroll Desp.

Keqn. No. 345614

P.&.S. (father)

ditto

Plague Desp.

AUG 12 1922

Rem. No. 44373

(Ser. # 760573)

Mem. Cross. (mother)

Mrs. W.T.C. Boyd,

(Address as above).

not elig. for star.  
" " V.M.  
" " BWM  
m.f.

*[Handwritten signature]*



*M*

6-39395 - JAN 3 1921

950

*950*  
*6-39395*

WILL

In possession of  
 W. I. C. Boyd Esq.  
 at office of:-  
 Messrs Boyd Co.,  
 Bobcaygeon  
 Ontario  
 Canada (W.I.C. Boyd.)

Working Pay in addition to pay of rank varying from \$1.00 to 50c. per diem, awarded to qualifications, is granted to Artillery, Motor Car Drivers, Cooks, etc.

STATEMENT OF

...

Working for a while in the office of the...

...







