

ATTESTATION PAPER.

No. 27360

Folio.

CANADIAN OVER-SEAS EXPEDITIONARY FORCE.

QUESTIONS TO BE PUT BEFORE ATTESTATION.

(ANSWERS).

- 1. What is your name? *Robert Crawford Jameson*
  - 2. In what Town, Township or Parish, and in what Country were you born? *Toronto York Ont Can*
  - 3. What is the name of your next-of-kin? *R. C. Jameson*
  - What is the address of your next-of-kin? *154 Rose Ave Toronto Can*
  - 5. What is the date of your birth? *May 4th 1892*
  - 6. What is your Trade or Calling? *Clerk*
  - 7. Are you married? *Single*
  - 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? *No*  
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*
- R. C. Jameson* (Signature of Man).  
*G. Maclean* (Signature of Witness).

DECLARATION TO BE MADE BY MAN ON ATTESTATION.

I, *R. C. Jameson*, 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 *Sept 18th* 1914. *R. C. Jameson* (Signature of Recruit)  
*G. Maclean* (Signature of Witness)

OATH TO BE TAKEN BY MAN ON ATTESTATION.

I, *R. C. Jameson*, 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 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 *Sept 18th* 1914. *R. C. Jameson* (Signature of Recruit)  
*G. Maclean* (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 *Valcartier* this *18th* day of *Sept* 1914.

*Jacume* (Signature of Justice)

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

*G. H. G. G. G.* (Approving Officer)

12<sup>th</sup> Batt. 4<sup>th</sup> Brig. (48<sup>th</sup>)

Description of Pte. Robt. C. Jamieson on Enlistment.

Apparent Age 22 years 5 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 3/4 ins.

*One vacc. mark on left arm. One tooth in front lower jaw gold capped*

Chest measurement { Girth when fully expanded 34 1/2 ins.  
Range of expansion 1 3/4 ins.

Complexion Fair

Eyes Blue

Hair Fair

- 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 Sept. 7<sup>th</sup> 1914.

Place Valcartier

*[Signature]*  
Capt. B. A. M. G.  
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.

R. C. Jamieson 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 Sept 19<sup>th</sup> 1914.

C.E.F. REGIMENTAL DOCUMENTS  
WAR SERVICE RECORDS D.V.A.

JAMIESON ROBERT CRAWFORD

27360

48 BN

02896

DIED 24-4-15





### Casualty Form—Active Service.

Regiment or Corps 15<sup>th</sup> Canadian Batt. 48<sup>th</sup> Highlanders of Canada

Regimental No. 27360 Rank Plt Name Jamieson Robert Crawford

Enlisted (a) 18/9/14 Terms of Service (a) \_\_\_\_\_ Service reckons from (a) \_\_\_\_\_

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				
11/3/15	O.C. no. 2 Can Field Amb.	<u>James</u> Notations A36.	24/5/15	11/3/15	To Det. 12/5/15, A36
24/5/15	O.C. 1st Batt.	Missing.	"	24/5/15	B 2/15.
3-6-16		of 15 <sup>th</sup> for official purposes. Presumed that he died on or since		24/5/15	Cas report A 359.

*[Signature]*  
**CAPT.**  
**OFFICER in CHARGE**  
**CANADIAN SECTION G. H. Q.**

*[Signature]*  
**Lt** for local records.

(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. **OMFC**  
(b) e.g., Signaller, Shoeing Smith, etc., etc., also special qualifications in technical Corps duties. **I.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				

27360

# MEDICAL HISTORY SHEET.

**ORIGINAL**

Surname Jamieson Christian Name Robt. Crawford

Examined { on 7 day of Sept 1914  
 at Valcartier

Approved by R.S. Buckleston

Birthplace { City or Town Toronto  
 County Can.

Rank Capt AMC M.O.

Apparent age 22

Trade or occupation clerk

Height 5 Feet 7 3/4 Inches.

Weight 137 Lbs.

Chest measurement { Minimum 32 3/4 inches.  
 Maximum expansion 34 1/2 inches.

Physical development Medium

Small-Pox Marks None

Vaccination Marks { Arm Right Left  
 Number 1

When Vaccinated last

(a) Marks indicating congenital peculiarities or previous disease None

1 tooth in front of lower jaw capped  
 (b) Slight defects but not sufficient to cause rejection

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

Date	Result	VACCINATIONS.
<u>1914</u>	<u>OK</u>	<u>et J. McKenzie</u> M.O.
		M.O.
		M.O.

Date	Result	ANTI-TYPHOID INOCULATIONS, ETC.
<u>1914</u>	<u>OK</u>	<u>et J. McKenzie</u> M.O.
		M.O.
		M.O.

Enlisted on 18 day of Sept. 1914 at Valcartier

	CORPS.	REG'TL NUMBER.	HABITS.	DATE.
Joined on enlistment	<u>15 Ban</u>	<u>27360</u>		
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.





Number. 27360 ..... Rank. Pte. ....

Surname. JAMIESON .....

Christian Names. Robert Crawford .....

Unit. 15th Co. Can. Inf. Theatre of War. France .....

Dates of Service .....

Remarks .....

Latest Address. Mrs. P. C. Jamieson .....

134 - King St. E. ....

Brockville, Ont.

Page 43  
Roll No. B

~~A~~  
~~X~~

D

9040085-111

SEP 20 1921

Re

DESP. FEB. 21 1922
REGN. NO. <i>HC 70570</i>

SURNAME.

*Jamieson.*

CHRISTIAN NAMES

*Robert Crawford.*

REGL. NO.

*27360*

RANK

*Pte.*

UNIT

*15<sup>th</sup>*

FORMER CORPS

*nil*

CARD NO.

FOLL

*D*  
*24*  
*4*  
*11*

*Bn.*

NEXT OF KIN.

NAMES IN FULL

*Jamieson. R. C.*

RELATIONSHIP TO SOLDIER

ADDRESS

~~*154 Rose Ave. Toronto, Ont.*~~  
*134 King St East. Brockville.*

CHANGE OF ADDRESS

COUNTRY OF BIRTH

*Canada. Toronto, Ont.*

DATE

*May 4<sup>th</sup> 1892.*

PLACE OF ATTESTATION

*Valcartier*

DATE

*Sept. 22-1914.*

*% of 10-14, 15/8.*

Sailed from Quebec Per

S.S. Megantic 4/10/14

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

*H.A.F.*

Jamieson, Pte. Robt. C., #27360, 15th Bn. 649-J-40.

M. & D. (Mother) ~~Mr R. C. Jamieson,~~  
~~134 King St. E.~~ ~~154 Rose Ave., Toronto,~~  
Brockville, Ont. 15 3/21 - Supp. card

*M*

P. & S. (Father) Robt. C. Jamieson,  
(Address as above)

*(Serial no. 787385.)*

Mem. C. (Mother) Same as above.

MAR 7 1921

Scroll Desp. \_\_\_\_\_ Reqn. No 225798

NOV 24 1921

Plaque Desp. \_\_\_\_\_ Reqn. No P17775

*Elig. for 14-15 Star 15th Bn. Pte*

48707

*J.P.*

*E .. .. O M*

*E .. .. B W M*

*ac*

M 43-983

FEB 22 1921

774

NAME Jamieson Robert Crawford  
RANK AND CORPS Pte. 15th Batt.

H. Q. FILE No. 649-

REGT'L. No. 27360

CABLE

NO. DATE

NATURE OF CASUALTY

NO. 181

X FOLL.

6.1749 28/5/15

Missing.

Cas. report 6-7-16  
a. 7. 13. 2090

Prev. rep. missing, now for official

purposes presumed to have died or, or since 24-4-15-

M2422 3-12-15  
W.S.M.

Rep. missing.

LIST No.

HOSPITAL

DATE OF  
ADMISSION

REMARKS

67

Reported from Base.

Q354.

Missing ✓  
Prev. reported missing  
now presumed for official  
purposes to have died on or  
since 24-4-15.



R .

Name JAMIESON. A.C. Rank Pte.

Reg. No. 27360

Unit 15th Battn.

25-V-57.

Next of Kin Canada.

Date	Movement	Place	Casualty	List No.	Notified N/K O.	W.O. List
24.25.4.15	Rep. from	Base	Missing	67	28/5/15.	
		Died aft. 24th.	C 1649 a 357			

PREVIOUSLY REPORTED MISSING NOW FOR OFFICIAL PURPOSES PRESUMED THAT HE DIED ON OR SINCE THE 24-4-15.A357.



No. 27360

RANK *1st Lt.*NAME *Jamieson Jr.*

C-

T. O. S.

UNIT *48th Inf. (Highlanders)*

M. D. 2

PAID FROM	PAID TO	SIG. OR REC'T	PROMOTIONS, TRANSFERS, DISCHARGES, ETC.	
			PARTICULARS	AUTHORITY
<i>1914</i> <i>Aug. 12th</i>	<i>1914</i> <i>Aug. 30th</i>	<i>✓</i>	<i>From 15th Brn. pay list.</i>	<i>Oct. pay list.</i>
<i>" 31</i>	<i>Sept. 21</i>	<i>✓</i>		
<i>Sept. 22</i>	<i>Oct. 31</i>	<i>✓</i>		

**UNIT SAILED**  
**OCT 3 1914**



Surname  
*Jamesson*  
Rank  
*P-6*  
Hospital

Christian Name or Names  
*R. C.*  
Unit  
*15th Batt.*  
Co.

Reg. No.  
*27360*  
Troop  
Batty.

Date of Admission

Transferred

Hosp.

Hosp.

Hosp.

Hosp.

Diagnosis

(1)  
Later Diagnosis (if changed)

(2)

(3)

Additional Diagnosis: if more than one state present

*Previously reported Missing. Now for official  
purposes presumed that he died on or  
since. 24-4-18:*

DISPOSITION

Date

*C.A. 3-6-16. 2357.*

REMARKS

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

EPITOME OF HOSPITAL TREATMENT.

Hospital

Adm.

1.

2.

3.

4.

5.

6.

7.

Rank and Name JAMIESON, Robert Crawford.

44-324

Regimental No. 27360

Name and Address of Next-of-kin

Unit 15th Battalion

R.C. Jamieson,

Date of enlistment Sept 18th., 1914.

154, Rose Avenue,

Place of birth Toronto, Ontario.

Toronto, Ontario.

Married (Yes or No) No.

Date and place of discharge

If in Permanent Force

Reason for discharge

Character on discharge

Promotions or appointments

W & R B 12

mx  
15-2-21  
dc

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				
		Embarked 15th	France		Now Roll.
28-5-15	W.O.	Reported missing.	Base	21-5-15	ON. Gen. Rep. 67 Part II DO #16
3. 6. 16	15th	For Official purposes presumed that he died on or since 24 <sup>4</sup> / <sub>15</sub>			Gen Rept A 357.

W & R B 12

Robert Crawford, JAMILSON, Robert Crawford

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				



MILITIA AND DEFENCE  
ASSIGNED PAY  
OVERSEAS CONTINGENTS

336  
M. F. W. 12.  
10m. 11-14.  
H. Q. 1772-39-819.  
32

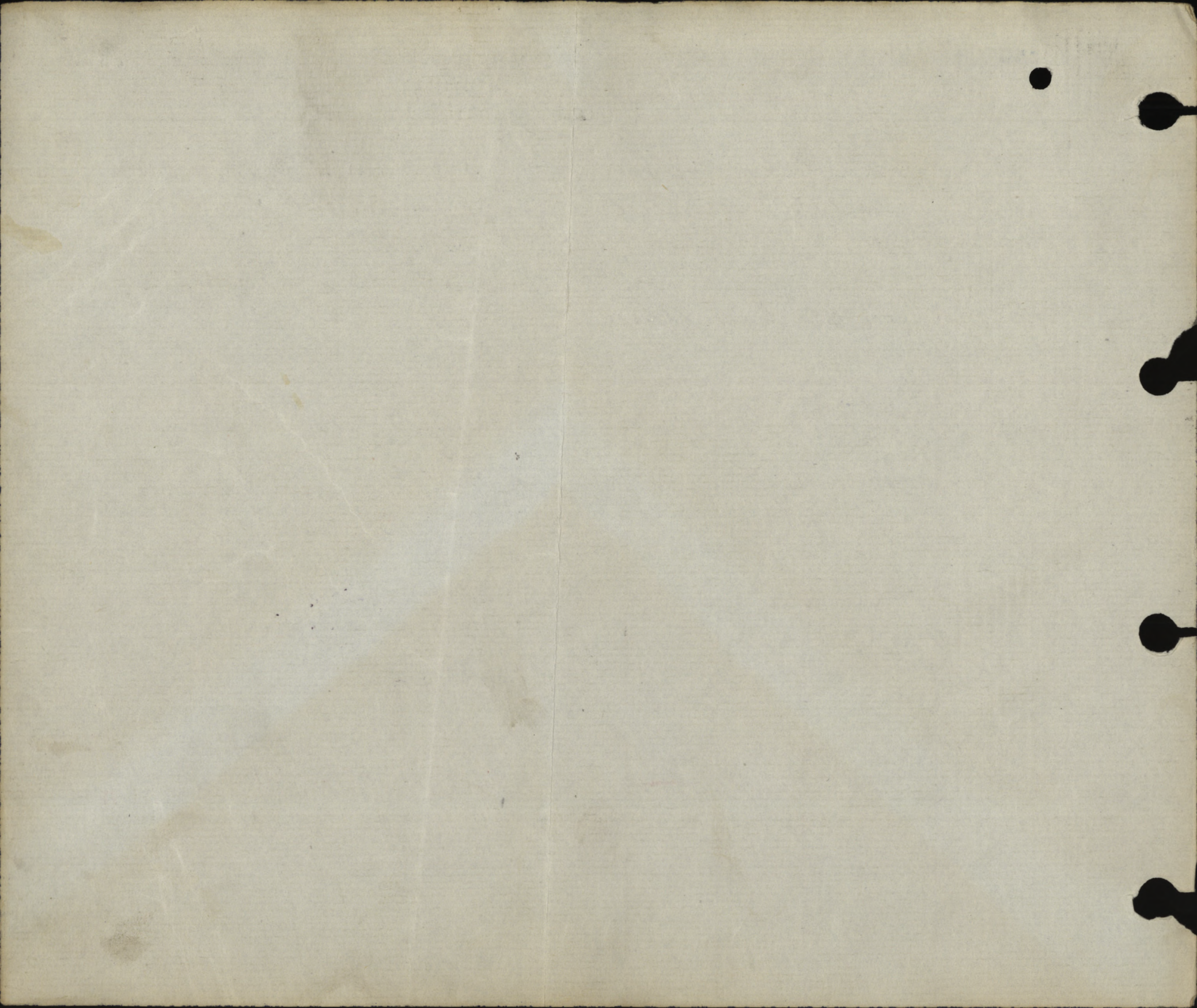
To Whom *R. C. Jamieson*  
Address *154 Rose Ave*  
*Powerto, Ont*

By Whom Assigned *R. C. Jamieson*  
Regtl. No. *27360*  
Rank *Pte*  
Corps *15<sup>th</sup> Batta*

Rate *15<sup>00</sup> from April 15<sup>15</sup>*  
*2-M*

## PAYMENTS

Month	Year	Cheque No.	Amt.	REMARKS
Aug.	1914			<i>Casualties</i>
Sept.				
Oct.				
Nov.				
Dec.				
Jan.	1915			
Feb.				
March				
April				
May		<i>78791</i>	<i>30</i>	
June		<i>810260</i>	<i>15</i>	
July		<i>79599</i>	<i>15</i>	
Aug.		<del><i>810910</i></del>	<del><i>15</i></del>	<i>Missing 4 M - 21/12</i>
Sept.				
Oct.				<i>\$60.00 - 1/16 A.K.</i>
Nov.				
Dec.				
Jan.	1916			
Feb.				
March				



NAME

JAMIESON, Robert Crawford

*Ph. O. X*

*[Handwritten signature]*

Regimental No. *27360 27360*

Name and address of next-of-kin

Unit 15th Battalion

R. C. Jamieson,

Date of enlistment Sept. 18th 1914.

154, Rose Avenue,

Place of " birth Toronto, Ontario.

Toronto, Ontario.

Married (yes or no) No

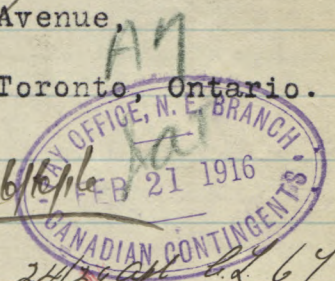
Date and place discharged *24/4/15*

Amount of pay assigned monthly \$ *7.11*

Reason for discharge *Q.R.A. 3.17. 6/6/16*

To whom payable

Character on discharge *Missing 24/4/15*



*considered Dead*

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					
1914													
Sept 22	Oct 31	40	1.00	40	40	1.00	40		44			44	
Nov 1	30	30	1.00	30	30	1.00	30		33			33	
Dec 1	31	31	1.00	31	31	1.00	31		34			34	
Jan 1	31	"	"	31	"	"	31		10			10	
Feb 1	28	28	"	28	28	"	28	24	10	54	90		
Mar 1	31	31	"	31	31	"	31	54	90	89		14	
Apr 1	Apr 30	30	"	30	30	"	30	75	108		15	18	
May 1	31	31	"	31	31	"	31	90	124	10	15	15	
June 1	30	30	"	30	30	"	30	109	10	142	10	15	
July 1	31	31	"	31	31	"	31	127	10	161	20	15	
						146 20							
						3 67							
						149 87							
						42 07							
						42 07							
Dec													
Jan													
Sept 14													

Statement of  
JUN 24 1916  
Account rendered

*H. E. Sch.*  
*N. B. Br.*

*all pay stopped Aug 1st*  
*Exchange*  
*Q.R.A. over credited*  
*\$42 sent to Canada*  
*for Sept. 14/16*

Cash found in effects *no rep.*

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					

*R. B. Jamieson*

WAR SERVICE GRATUITY

Register No. *109389*

A.P. File No. *945-67-57*  
*945-82A-32*

DEPENDENTS OF DECEASED SOLDIERS

Regt'l No. *27360* Name *Robert Jamieson*  
(Christian Name) (Surname)  
Unit *15th Bn.* Rank *Pte.* Date of enlistment *9-8-14*  
Date of casualty *24-4-15* B.P.C. File No. *187986*  
Was service performed overseas? *Yes*

DEPENDENT

Name *Mrs. Joan A. Jamieson* Relationship *W. mother*  
Address *134 King St. E.*  
*Brackville*  
*Ont.*

M.F.W. 2652  
25M-6-30.  
H.Q. 1772-89-1473

Amount of Special Pension Bonus \$ *Nil* Abstracted by *J. M. Davidson*

Eligible for Gratuity *Not Eligible* \$ *-*  
Less amount of Special Pension Bonus paid \$ .....  
Less Debit Balance of S. A. or A.P. \$ .....

Total deductions \$ *-*

Balance due \$ *-*

Cheque No. .... Date issued .....

Clerk *ANN Miel*

REMARKS : *No SA paid*

Audited by  
Date .....

*"Noted" 14/8/20*  
*By 17*

# 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**  
 800M-1-19  
 1772-39-1140

Remarks: