

SIN/NAS

OPEN-90
ATIA

CAMPBELL
Surname/Nom

EDITH
Given names/Prénoms

CANADIAN FORCES
FORCES CANADIENNES

PERSONNEL RECORDS ENVELOPE
ENVELOPPE DES DOSSIERS DU PERSONNEL

"CONTENTS CONFIDENTIAL"
"CONTENU CONFIDENTIEL"

CF 478 (10/74)
7530-21-870-6931

A0-57-1429

COMPONENT
ÉLÉMENT

1429
C.E.F.



TRIPPLICATE,
ATTESTATION PAPER.

No. 1. General

Folio. 22

CANADIAN OVER-SEAS EXPEDITIONARY FORCE.

QUESTIONS TO BE PUT BEFORE ATTESTATION.

(ANSWERS).

- 1. What is your name?..... *Edith Campbell*
- 2. In what Town, Township or Parish, and in what Country were you born?..... *Montreal*
- 3. What is the name of your next-of-kin?..... *Sister Mrs W. S. Clouston*
- 4. What is the address of your next-of-kin?..... *Pointe Claire Canada*
- 5. What is the date of your birth?..... *Nov. 1871*
- 6. What is your Trade or Calling?..... *Nurse*
- 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?.. *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*

Edith Campbell (Signature of Man).
C. Clouston (Signature of Witness).

DECLARATION TO BE MADE BY MAN ON ATTESTATION.

I, *Edith Campbell*, 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.

Edith Campbell (Signature of Recruit)

Date *Sept 25* 1914. *C. Clouston* (Signature of Witness)

OATH TO BE TAKEN BY MAN ON ATTESTATION.

I, *Edith Campbell*, 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.

Edith Campbell (Signature of Recruit)

Date *Sept 25* 1914. *C. Clouston* (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 *Quebec* this *25* day of *September* 1914.

Edith Campbell (Signature of Justice)

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

.....(Approving Officer)

Nursing Sister

Description of Campbell Edith on Enlistment

Apparent Age 42 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..... ins.
Range of expansion..... ins.

Complexion Fair

Eyes Hazel

Hair Dark brown

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

X

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 ^{her} him* fit for the Canadian Over-Seas Expeditionary Force.

Date Sept 24 1914.

Place Quebec

Campbell
Lt Col

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.

Edith Campbell 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.

Mungella (Signature of Officer)

Lieut.-Colonel

Date Sept 28 1914.

O. C., No. 1. GENERAL HOSPITAL,
CANADIAN EXPEDITIONARY FORCE

MEDICAL HISTORY SHEET.

Surname Campbell Christian Name Edith

Examined { on 24 day of September 1914
 at Leicester
 Birthplace { City or Town Montreal
 County Leicester

Approved by Kenneth Jamieson
 Rank Subaltern M.O.

Apparent age 42
 Trade or occupation Nurse
 Height 5 Feet 7 Inches.
 Weight 130 Lbs.
 Chest measurement { Minimum _____ inches.
 Maximum expansion _____ inches.
 Physical development _____
 Small-Pox Marks Nil

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 pu Left pu
 Number Two
 When Vaccinated last 1911

Date	Result	VACCINATIONS.
<u>24th</u>		M.O.
		M.O.
		M.O.

(a) Marks indicating congenital peculiarities or previous disease Nil

Date	Result	ANTI-TYPHOID INOCULATIONS, ETC.
<u>23</u>		M.O.
		M.O.
		M.O.

(b) Slight defects but not sufficient to cause rejection

Enlisted on _____ day of _____ 1914 at _____

	CORPS.	REG'TL NUMBER.	HABITS.	DATE.
Joined on enlistment				
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.

Casualty Form—Active Service.

Regiment or Corps _____ Regimental Number _____

Rank MATRON Surname CAMPBELL Christian Name EDITH.

Religion _____ Age on Enlistment _____ years _____ months.

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

Date of promotion to present rank _____ Date of appointment to lance rank _____

Extended { _____ } Re-engaged { _____ } Qualification (b) _____
 or Corps Trade and Rate _____

Signature of Officer i/c Records.

Date	Report		Place of Casualty	Date of Casualty	Remarks Taken from Army Form B. 213, Army Form A. 36, or other official documents
	Date	From whom received			
			Embarked ... Disembarked...		
13-3-19.	CAMC R & T DEPOT.	ATTACHED TO THIS UNIT FROM C.A.M.C. R.& T DEPOT	BUXTON	6-3-19.	D.O.Pt.ii. No.22.13-3-19.
26-3-19.	D.M.S.	CEASES TO BE ATTACHED TO THIS UNIT FROM CAMC R.& T DEPOT.	BUXTON	28-3-19.	D.O.Ptii.No.26. 27-3-19.

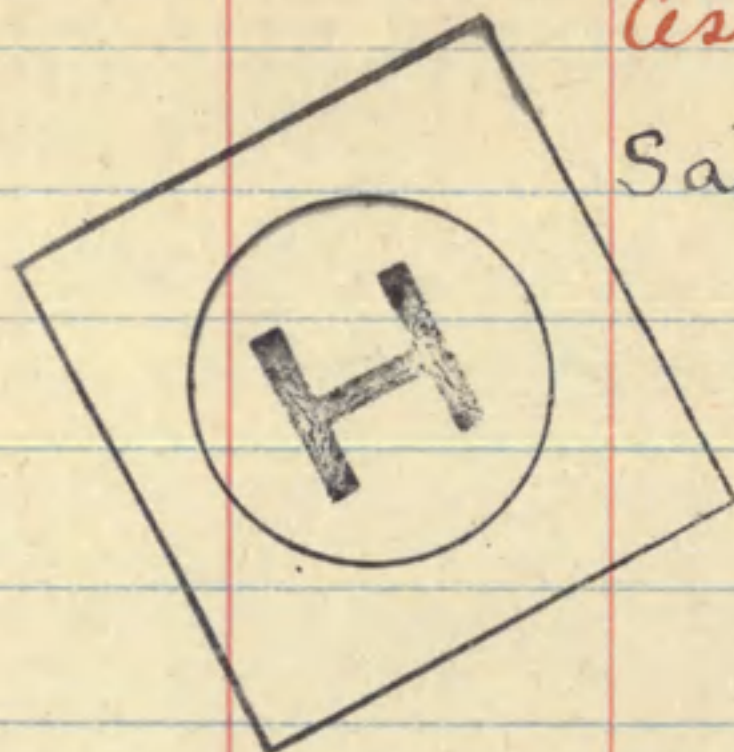
[Handwritten Signature]
 Commanding Officer
 General Hospital

(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) Signaller, Shoeing-smith, &c.
 (B99130) W 15012-5156 J. P. & Co., Ltd. Forms/B103/S. **[P.T.O.]**

Report		Record of promotions, reductions, transfers, casualties, &c., 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 of Casualty	Date of Casualty	Remarks Taken from Army Form B. 213, Army Form A. 36, or other official documents
Date	From whom received				
14/4/19.	S.O.S.	on embarkation to Canada			
					<i>Shaw</i> For MAJOR General, Adjutant General, Canadians.
26/4/19	M.H.Q. Ottawa	T.C.S. C.E.F. in Canada on General Demobilization	M.D. No. 4	15/4/19	C.E.F. R.O. No. 1921-19
26/4/19	M.H.Q. Ottawa	S.O.S. C.E.F. in Canada on General Demobilization	M.D. No. 4	23/4/19	C.E.F. R.O. No. 1921-19
					<i>Spencer</i> Lieut. for Director Personal Services

Rank and Name **CAMPBELL Edith. (RRC. M.M.) Matron**

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				
29-4-19	Comd. RPT Rep.	S.O.S. on Trans to CEF in Canada		14-4-19	Ptford. 119
24-4-19	SMS.	S.O.S. on Trans. to CEF in Canada Cessation of hostilities.		14-4-19	CO. 57.
		Sailed to Canada S.S. Olympic		14-4-19	Sailing No. 49



15068

SOS. 23 Apr 19

CERTIFIED CORRECT

4 - MAY. 1917
CANADIAN RECORD OFFICE

Casualty Form—Active Service.

Regiment or Corps Can. Army Medical Nursing Service

Regimental No. _____

Rank Matron Name Edith Campbell

Enlisted (a) _____ Terms of Service (a) War Service reckons from (a) 23-11-14

Date of promotion to present rank } 23-10-14 Date of appointment to lance rank } _____ Numerical position on roll of N.C.Os. } _____

~~Extended~~ _____ Re-engaged _____ Qualification (b) July Qualified

Date	Report		Place	Date	Remarks taken from Army Form B. 213, Army Form A. 36, or other official documents.
	From whom received	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.			
23/10/15	D. M. S.	NR. D. of Con. Hp. Mentioned in Despatches To be Matron Awarded Royal Red X.	Taplow.	10/2/15	Reported 10/15. "Lon Gaz." 22/6/15. "Lon. Gaz." 22/10/15. "Lon Gaz." 23/6/15. <i>Jr. Bunnham</i>
19-10-16	<i>C. E. P. of 6 Block, J. Ashby</i>	To be awarded Red X <i>Stur. Hook Dunston</i>		19-10-16	FOR LT.-COL. I/C RECORDS; G.E.F. <i>[Signature]</i> REGISTRAR & ADJUTANT FOR OFFICER COMMANDING.
28/1/17	D. M. S.	To D. M. S. <i>Can. Gen. Hosp. 86</i>	London	28/1/17	D. M. S. or 1671 Jan 27th 1917
11-2-17	D. M. S.	To No 1 Can. Gen Hosp.	Etaples	11-2-17	C.O. - 215 <i>[Signature]</i>

(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				
18/2/17	1 Cls. H	Reinforcement No 121 Overseas/3060 (amp 4) d/23/1/17		11/2/17	B213 Pt II 14 d/26/2/17
29.10.17	"	Granted 14 days leave		22/10/17	" " 69 3/11/17
10/11/17	"	Rejoined unit		6/11/17	" " 73 20/11/17
28/12/17	London Gazette	Mentioned in Despatches by Commander in Chief. G. 30448			Pt II 3 21/1/18
	Officer of Records.	Awarded the 1914 star in accordance with Army Order 360 of 1917. Auth: R. 70-18 over. M 22418 d/22.4.18			KM 18/3818. p. 0 on 14/1918
29.6.18	16-G. HP	Granted 14 days leave.		24.6.18	B213. p. 0 on 5/4/1918
13.7.18	--	Returned from leave and was sd. to Son Home Hardhat.		8.7.18	KM 17/111
3.9.18	1 Prus. us. Gen.	Discharged from Hosp.		11.8.18	
14.9.18	3 C. G. H.	Attached for Temp duty. from No 9. Canadian. Gen. Hosp.		28.8.18	KM 17/597-1
24.9.18	London Gazette	DGMS. 05. 8/1 d. 14. 5. 18. Awarded Military Medal. (London Gazette no. 30917. p. 11339)		11.9.18	B213. KM 20421 p. No 74 d 1918.
5.10.18	I. C. G. H.	Leave to be attached to No 3. Can. Gen. Hospital for temp. duties		24.9.18	Pt II 79 d/1918.
25.1.19	"	7 days straight leave Boulogne		3.10.18	B213. Pt II 80 d/1918. <i>J. Skelton</i>
9.2.19	"	Rejoined from leave		14.1.19	B213. p. No 7. 1919
22-2-19	Aah	Posted to MC. Cas to discharge Auth: G. 10 th Ech. No 649 d/31-1-19.		2.2.19	B213
				16-2-19	R.E. 38892. Pt II No 10 d/1919. Canadian Sign.

Rank and Name Campbell Edith, ^{m.m.} R.R.C.
 Regimental No.
 Unit A.M.C.
 Date of enlistment Sept. 25th. 1914.
 Place of birth Montreal.

Name and Address of Next-of-kin
 Mrs. W.S. Clouston, (Sister)
 Pointe Claire, Canada.

Married (Yes or No) No.

Date and place of discharge

If in Permanent Force

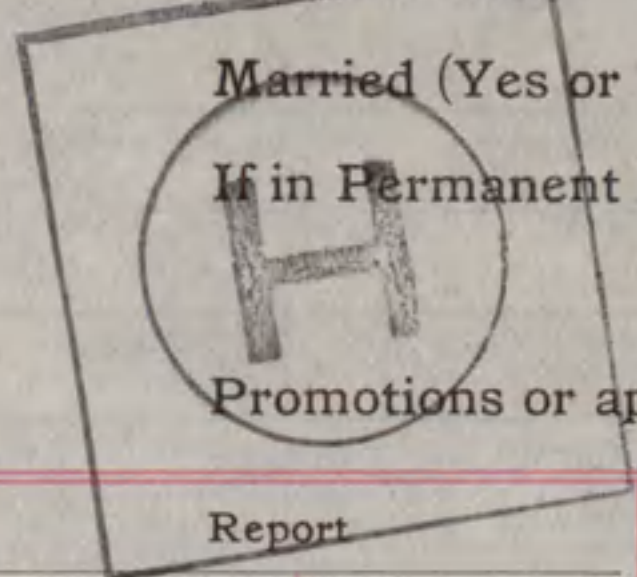
Reason for discharge

Promotions or appointments

Character on discharge

Left Canada 4.10.14 H.R.

Report
 D of Con. Buxton
 AUG 15 1916
 NOV 7 1917
 Dec. 13. 1916
 Jan. 7. 1917
 A.F.B. 103 1 8/16



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					
15.5.18	D.M.S.	Proc. of alas to no 7 Stat. Hp. Boulogne			7.11.14	letter on Rh. 11-M-142 ✓
		MR. D. G. B. R. X. Hp. Bloeden				Reported. 10 ⁴ / ₁₅ . MR.
		Mentioned in despatches				London Gazette 22.6.15
23-10-15	Dus	To be Matron			10-2-15	Lond Gaz 22 ²⁹³³⁶ / ₁₀ . 60882
		awarded Royal Red Cross				"Lon Gaz" 23/6/15. 60.659
21.3.16	D of Lou. Hp.	On command to Folkestone			21.3.16	P ^r ii 0.80.
25.3.16	- do -	Off Command from Folkestone from			23-3-16	P ^r ii 6.84.
6-10-16	Dus.	Leave from		4-10-16 to	18-10-16	C.O. 1850. P ^r ii ord. 276. D. of Con. H.
24-10-16	D. of Con. H.	S.O.S.		D. of Con. H.	19-10-16	P ^r ii ord 295.
20-10-16	Dus.	Transf. to the Buxton Red X Sp. H.			19-10-16	C.O. 1931. P ^r ii
24-10-16	Buxton Red X. H.	Taken on strength		Buxton	19-10-16	P ^r ii ord. 213.
2-2-17	do.	S.O.S.			29/11/17	P ^r ii ord 33
30.4.17	Dus.	Posted to Camer			29/11/17	C.O. 163 P ^r ii ord. 32
16.2.17	came. TS	S.O.S. T.O.S.			29.2.17	P ^r ii ord. 47
13.2.17	Dus.	Posted to No 10 Gen. H.			11/2/17	C.O. 215
28.2.17	ic. Gen. H.	T.O.S.			11/2/17	P ^r ii ord. 14

A.F.B. 103
 4-MAY-1917

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				
3.11.17	No. 10 St. H.	Granted 14 days leave from Rejoined unit 6.11.17 MENTIONED IN DESPATCHES - Lon. Gaz. 30448 d. 28/12/17		14.10.17 6.11.17 28/12/17	Pt II 76 " 73
22.11.18	26. St. H.	<i>Refers to C.E. Cameron</i> T.O.S. on reporting from 36. St. H.		29.3.18	Pt II 49
8.6.18	16 St. H.	Awarded "1914 Star"			Pt II 44
9.7.18	10 St. H.	Granted 14 days leave		24.6.18	Pt II 54
21.8.18	AMS.	Adm. Sisters Con. Home, Etretat Discharged		15-8-18 28-8-18	Ch. 1065 Ch. 1078
20.9.18	10 St. H.	Attached for temp duty to 3 Can. Gen. Hqs.		10-9-18	Pt II ord. 74
24.9.18	WO.	Awarded Military Medal			Hon. Gaz. 30917
11.10.18	10 St. H.	Ceases to be att for temp duty to 3 Can. H.		3-10-18	Pt II ord. 80
9-2-19	DO	Granted 7 days leave		19-1-19	Pt II ord. 7
20-3-19	DO Camec.	S.O.S. posted to Camec Cas. Coy. Schiffe		16-2-19	Pt II ord. 10
28-3-19	Cas Coy.	T.O.S. on posting from Camec. France		17-2-19	Pt II ord. 74
22.4.19	DO Camec.	S.O.S. on posting to Camec. R.T. Dep.		6-3-19	Pt II ord. 93
13-3-19	R.T. Dep.	T.O.S. on posting from Camec. Cas. Coy. Shown on Command CRC St. H. Buxton		6-3-19	Pt II ord. 72
31-3-19	g.c.s.H	attached fm C.A.M.C. R.T. Depot		26-3-19	Pt II Ord 19
31-3-19	"	Ceases to be attached fm C.A.M.C. R.T.D. reporting to D.Q.M.S. London		28-3-19	Pt II Ord 19

n.a.D. Ch. 1193

not stated (n.a.D. ")

CANADIAN ARMY DENTAL CORPS, O.M.F.C.
DENTAL CERTIFICATE FOR DEMOBILIZATION

DIRECTIONS TO
 DENTAL OFFICERS

NAME OF SOLDIER (Block letters) CAMPBELL, E
 REGIMENT Camp RANK matron No. _____
 Date of Examination in England 8-4-19 Date of Examination in France _____

1. This form will be made out for each individual at the time of demobilization in England or France.
2. Figures as per chart will be used to designate teeth concerned.
3. In reference to Partial Dentures the numbers of teeth thereon will be stated.



PRESENT DENTAL REQUIREMENTS

1. FILLINGS
2. EXTRACTIONS
3. CROWNS
4. DENTURES
- (a) Full Upper
 - (b) Part Upper
 - (c) Full Lower
 - (d) Part Lower

HAS HE EVER REFUSED DENTAL TREATMENT? no

HAS HE EVER RECEIVED DENTAL TREATMENT? (Reply by "Yes" where applicable to any or all of a, b or c.)

- (a) In Canada
- (b) In England
- (c) In France yes

Signature of Dental Officer S. J. Kelly
Captc adt

CANADIAN ARMY DENTAL CORPS
DENTAL CERTIFICATE FOR DEMOBILIZATION

THIS CERTIFICATE IS TO BE COMPLETED BY THE DENTIST AND IS VALID FOR THE PURPOSES OF DEMOBILIZATION ONLY. IT IS NOT VALID FOR THE PURPOSES OF RECALL OR RECALL TO ACTIVE SERVICE.

NAME OF PATIENT: _____
SERIAL NUMBER: _____
REGIMENT: _____

DATE OF EXAMINATION: _____
DENTIST'S SIGNATURE: _____
DENTIST'S NAME: _____

THESE DATA ARE TO BE FORWARDED TO THE DENTAL CORPS HEADQUARTERS.

1. Name of Patient: _____
2. Serial Number: _____
3. Regiment: _____
4. Date of Examination: _____
5. Dentist's Signature: _____
6. Dentist's Name: _____
7. Remarks: _____
8. Name of Hospital: _____
9. Address: _____
10. City: _____
11. State: _____
12. Zip: _____
13. Telephone: _____
14. Name of Commanding Officer: _____
15. Rank: _____
16. Signature: _____
17. Date: _____

Call for Boards

Am. 5/4 - c - 198419

MEDICAL EXAMINATION UPON LEAVING THE SERVICE OF OFFICERS AND OTHER RANKS WHO HAVE NO DISABILITY.

Officers and Other Ranks leaving the service for reasons other than medical unfitness are to be reported on this form. Where there is evidence of any undetermined or progressive disability, this form will not be used, but the case will be referred to a Medical Board for completion of M.F.B. 227.

No. Rank Matron Surname Campbell
 (Given name in full)
Edith.
 Unit or Corps C.A.M.C. Birthplace Montreal

(Examination of Officer or Other Rank (stripped) to be made by one Medical Officer.)

I. GENERAL DESCRIPTION:

Physique Good Weight 130 lbs. Height 5 ft. 7 in. Colour of Eyes Brown
 Nutrition normal
 Pulse 80
 Condition of arteries normal
 Vision Rt. 6/6 Left 6/6
 Hearing (conversational voice) Rt. 20 ft.
 Left 20 ft.

Identification marks, scars, or deformities.
 (Give cause and date of origin).
none.

Opinion as to general health and physical condition fit

2. Has Officer or Other Rank ever suffered from, or has he now, any affection of the following systems? (Answer "Yes" or "No") (Subjective evidence may be sufficient in certain cases.)

Nervous System no Genito Urinary System no Cardio-Vascular System no
 Special Senses no Integumentary System no Respiratory System no
 Disturbance of Mentality no Muscular System no Digestive System no
 Osseous and Joint System no Any other general condition no

3. If the answer to any part of Section 2 above is "Yes," here give full particulars, with cause and date of origin; and also a description of the present condition.

EXAMINATIONS

THIS SECTION FOR USE OVERSEAS—

Examined at 131 Berners St (Overseas)

Date 2-4-19

Signed Ludwig J. M.O.

I hereby certify that I have read, or have heard read, the above description of my present condition; that I find it correctly stated; and that I have not withheld any information concerning any other affections from which I suffered, either prior to or during service.

Signature [Signature]

(If not satisfied, M.F.B. 227 will be completed by Medical Board.)

THIS SECTION FOR USE IN CANADA—

Examined at(Canada)

Date

Signed M.O.

I hereby certify that I have read, or have heard read, the above description of my present condition; that I find it correctly stated; and that I have not withheld any information concerning any other affections from which I suffered, either prior to or during service.

Signature

(If not satisfied, M.F.B. 227 will be completed by a Medical Board.)

(This space to be used, if necessary, in connection with Section 3, overleaf, only.)

[OVER]

NAME

Campbell. Earl

Regimental No.

Name and address of next-of-kin

Unit

Nursing Sister

Date of enlistment

Place of " "

Married (yes or no)

Date and place discharged

Amount of pay assigned monthly \$

Reason for discharge

To whom payable

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					
<i>12/9</i>	<i>31/10/10</i>	<i>39</i>	<i>2</i>	<i>78</i>	<i>39</i>	<i>60</i>	<i>7840</i>	<i>10140</i>			<i>6640</i>	<i>35</i>		<i>10140</i>		
<i>1/11/14</i>	<i>30/1/14</i>	<i>30</i>		<i>60</i>	<i>30</i>		<i>18</i>	<i>78</i>			<i>42</i>	<i>35</i>		<i>78</i>		
<i>1/12/14</i>	<i>31/1/14</i>	<i>31</i>		<i>62</i>	<i>31</i>		<i>1860</i>	<i>8060</i>			<i>4560</i>	<i>35</i>		<i>8060</i>		
<i>1/1/15</i>	<i>31/1/15</i>	<i>31</i>		<i>62</i>	<i>31</i>		<i>1860</i>	<i>8060</i>			<i>4560</i>	<i>35</i>		<i>8060</i>		
<i>1/2/15</i>	<i>28/2/15</i>	<i>28</i>		<i>56</i>	<i>28</i>		<i>1680</i>	<i>7280</i>			<i>3780</i>	<i>35</i>		<i>7280</i>		
<i>1/3/15</i>	<i>31/3/15</i>	<i>31</i>		<i>62</i>	<i>31</i>		<i>1860</i>	<i>8060</i>			<i>4560</i>	<i>35</i>		<i>8060</i>		

Bank Account
make cheque payable to

MILITIA AND DEFENCE
ASSIGNED PAY
OVERSEAS CONTINGENTS

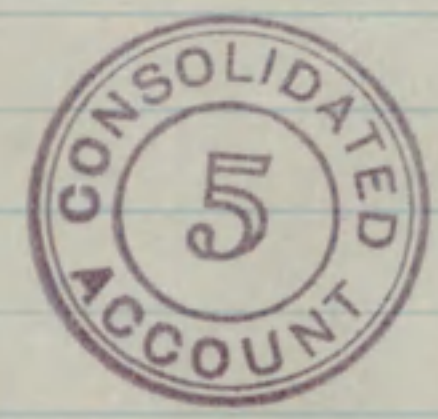
To Whom Clouston, H.S.
Address ⁷⁰ Bank of Montreal
Ottawa ~~Montreal~~
(cr. in Montreal P.2)
Rate 35⁰⁰ per month

By Whom Assigned Campbell, Edith
Regtl. No.
Rank Nurse
Corps Vol. Expt. Gun Hoop.

no 76-6-17

oct 1914.
PAYMENTS

Month	Year	Cheque No.	Amt.	REMARKS
Aug.	1914			
Sept.				
Oct.		E 769	35	✓
Nov.		B 1497	35	
Dec.		Z 2533	35	
Jan.	1915	E 3731	35	
Feb.		D 5645	35	-
March		66174	35	
Apl.		B 7443	35	
May		A 8262	35	
June		J 3558	35	
July		J 4524	35	
Aug.		H 12391	35	
Sept.		H 1522	35	
Oct.		G 12923	35	
Nov.		H 13339	35	<i>Cancelled</i>
Dec.		D 14995	35	
Jan.	1916	C 15302	35	
Feb.		B 16083	35	
March		A 18285	35	
		J 14170	35	



11/30
11/31

11/31

11/31

11/31

11/31

MILITIA AND DEFENCE
ASSIGNED PAY
 OVERSEAS CONTINGENTS

M. F. W. 12a.
 60m.-12-15.
 1772-39-319.

Sheet No. 2.

L. L. Job 89002.-Req. 6213.

W. S. Clouston-

Name of Soldier Campbell. Edith.
 Nurse.

PAYMENTS.

Lall
Lall

ol

Month.	Year.	Cheque No.	Amt.	Remarks.
		B 1201	35	
April	1916	B 556	35	<i>3500</i> <i>B 56 Canc.</i>
May		C 1239	35	
June		Q 8515	35	
July		E 8427	35	
Aug.		G 9411	35	
Sept.		Y 16774	35	
Oct.		Z 16715	35	
Nov.		Q 26320	35	
Dec.		H 30544	35	
Jan.	1917	A 39106	35	<i>H 30544 ret'd & cancelled 18/1/17 per ^{new} order in assign</i>
Feb.		Q 44081	35	<i>70⁰⁰ Jan'y to adj sec</i> <i>35.00 future <i>W</i></i>
March		C 49990	35	<i>35-L</i>
April		P 6234	35	<i>35 W. P. 623 Canc.</i>
May		X 6935	35	<i>x 6935 remailed 6-6-17 <i>W</i></i>
June		P 13842	35	<i>35 <i>W</i></i>
July		B 22017	35	<i>B. B. 22017 Canc'd. 11/9/17. <i>W</i></i>
Aug.		B 29911	35	
Sept.		X 35254	35	
Oct.		J 46952	35	
Nov.		J 54622	35	
Dec.		H 51428	35	<i>1365</i>
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.				

NAME

Campbell

REGT'L. No.

RANK AND CORPS

Infantry

H. Q. FILE NO 649

Campbell

FOLLOWS

No.

CABLE

NO.

DATE

NATURE OF CASUALTY

FOLLOWS

LIST No.

HOSPITAL

DATE OF
ADMISSION

REMARKS

1065

Sister Conk, Home Etretat

15-8-18

Admitted

1078

Discharged

28-8-18

" "

W.A. Roper 1193

Name [✓] CAMPBELL Rank Matron. [✓] Reg. No.
 Unit E ~~det~~
 Next of Kin CAMC att. 1 C.G.H. [✓]
 Canada

Date 1918	Movement	Place	Casualty	List No.	Notified N/K O.	W.O. List
15-8	Sisters Conv. Home	Etretat (WO)			✓	
		Not Stated		1065		
28-8	Discharged (wo)			Q. 1098		
	Casualty Book)		NAD	1193		

SURNAME.

Campbell

M.M. #30917-

R. Red. Cross 2529202

47 CARD NO.

CHRISTIAN NAMES

Edith

D.O.S. 23/4/19
Returns to A.C. 9. 1919
R.P. 19 2. 126/19/19

REGL. NO.

RANK Nursing Sister

UNIT C.A.M.C. (Nursing Sisters)

FORMER CORPS Nil.

NEXT OF KIN.

CHANGE OF ADDRESS

NAMES IN FULL

Clouston, Mrs. W. S.

RELATIONSHIP TO SOLDIER

ADDRESS

Pointe Claire, P. Q.

COUNTRY OF BIRTH

Canada

DATE

PLACE OF ATTESTATION

Quebec, P. Q.

DATE

Sept. 25th 1914

Date of Sailing 22/9/14

Sailed from Liverpool for Canada
per SS Gramscia 9-1-14
R/C 21/4/19 309/12 Matron

MARRIED

SINGLE

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

Present address

Number

Rank

MAZRON

Surname

CAMPBELL

R.R.C., M.M.

Christian Name

EDITH

Units

Theatre of War

FRANCE

Date of Service

7-11-14

98
76

40 Victorian Order of Nurses

Remarks

Latest Address

281 Sherburne St

Toronto

~~40 Miss Chouston~~

~~17 Weisdale Park~~

Roll No.

~~Westmount~~

200m.-6-21...

B. Page 22267

~~Montreal~~

GRATUITY (IMPERIAL)

CHRISTIAN NAME

SURNAME

REG. No.

SCHEDULE No.

LINE No.

UNIT RETIRED OR DISCHARGED FROM

PLACE OF RETIREMENT OR DISCHARGE

DATE RECEIVED FROM OTTAWA

IMPERIAL DEPOT No.

DATE RECEIVED FROM REG. DEPOT.

DATE FORWARDED TO OTTAWA

DESP. AUG 11 1926
 REGN. No. 24879

No.

RANK

1st Lt.

NAME

Campbell E. J.

J.

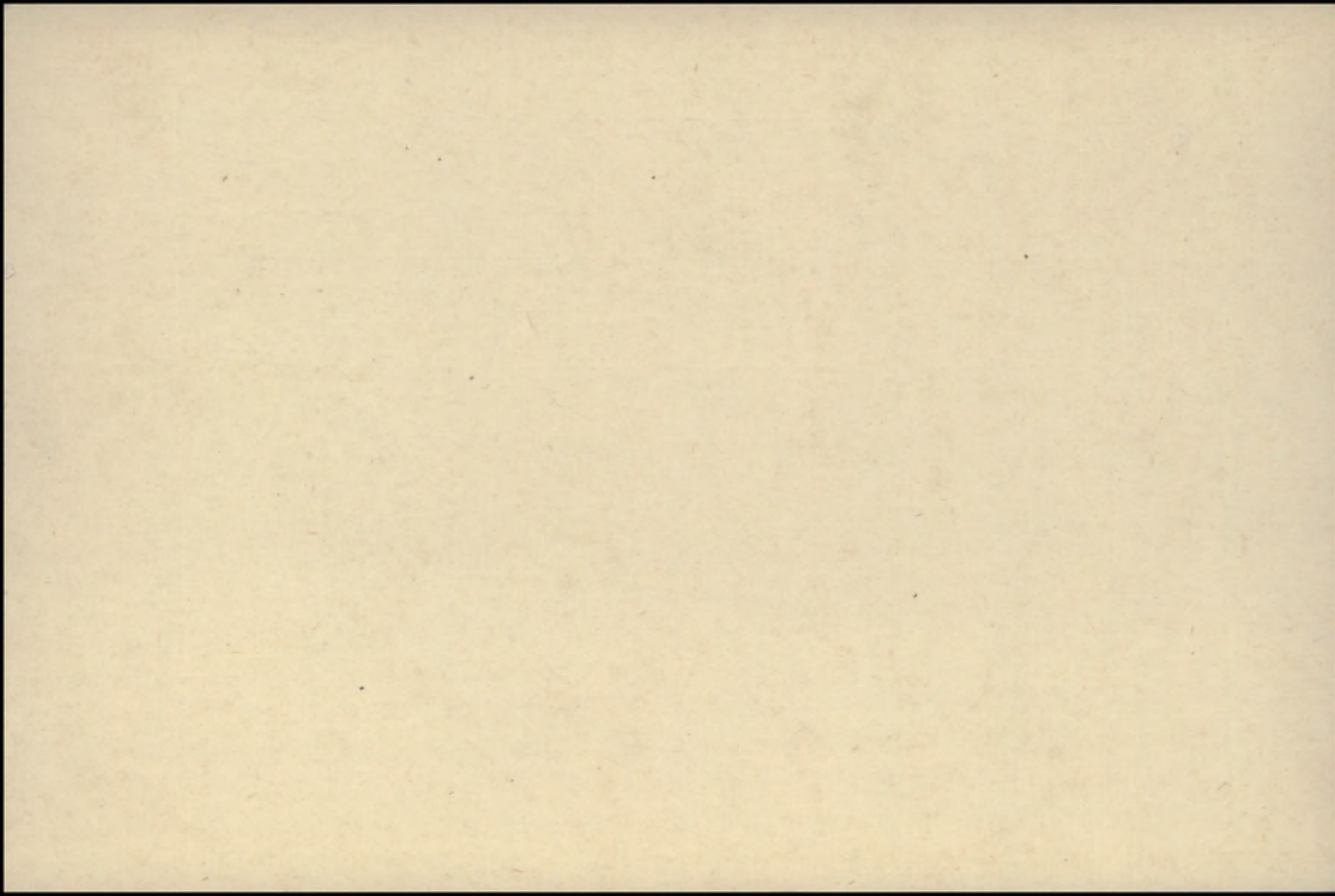
T. O. S.

UNIT

Army medical corps (Reinforcements)

M. D. *4*

PAID		SIG. OR REC'T	PROMOTIONS, TRANSFERS, DISCHARGES, ETC.	
FROM	TO		PARTICULARS	AUTHORITY
<i>1916</i> <i>April 7</i>	<i>1916</i> <i>April 30</i> <i>May</i>	<i>L</i> <i>L</i>		



No

RANK

Nursing Sister.

NAME

Campbell, Edith

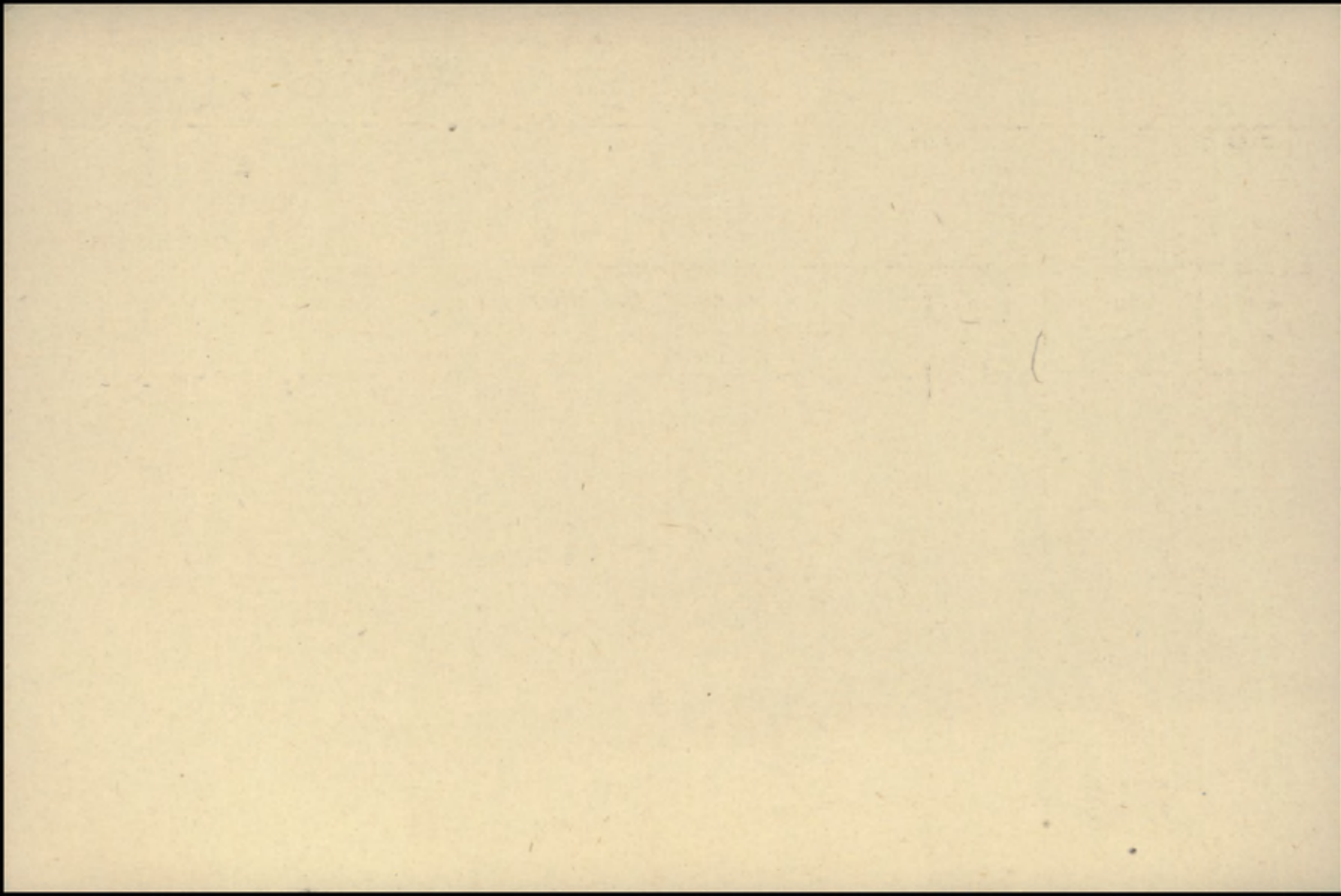
T. O. S.

UNIT

Army Medical Corps, Nursing Service

M. D. *Oct. 31*

PAID FROM	PAID TO	SIG. OR REC'T	PROMOTIONS, TRANSFERS, DISCHARGES, ETC.	
			PARTICULARS	AUTHORITY
<i>1914 Sept. 23</i>	<i>1914 Oct. 31</i>	<i>✓</i>		



Surname. Christian Name.
CAMPBELL E.
Rank. Unit.

Matron C.A.M.C. 1 C.G.H.

Date of admission.
Sisters Convalescent Home, Etretat 15-8-18.
Hospital.

Transferred Hosp.

..... Hosp.

..... Hosp.

..... Hosp.

~~Not-stated. (Q)~~ N.A.D.

Diagnosis .

Later diagnosis.

.....

.....

.....

Discharged:-28-8-18.

Disposition. Date.

21-8-18 1065-3.

5-9-18 1078-4.

21-1-19 1193-2.note.

C.L. Remarks,

C.L.

C.L.

C.L.

C.L.

C.L.

C.L.

C.L.

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

Surname

Christain 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

Date of Enlistment

MILITIA AND DEFENCE

Date of Assignment

Separation and Assigned Pay Branch

C 1104

Oct. 1/14.

OVERSEAS CONTINGENTS

RATE OF SEPARATION ALLOWANCE

--	--	--	--

RATE OF ASSIGNMENT

35			
----	--	--	--

PARTICULARS OF SEPARATION ALLOWANCE

No. _____
 Rank *W/S.* Promoted _____ Reverted _____ Discharge _____
 Soldier's Name *Edith Campbell*
 Battalion *no 1. Exped. Gen. Hosp.*
 Beneficiary _____
 Relationship _____
 Address _____

PARTICULARS OF ASSIGNMENT ✓

Name *W.S. Clouston*
 Address *% Bank of Montreal*
 Change of Address *(in Montreal P.Q.)*
 1 _____
 2 _____
 3 _____
 4 _____

Date	Cheque No.	Amount S/A	Amount A/P	Total	REMARKS
<i>Dec. 31/17</i>			<i>1365</i>	<i>1365</i>	
<i>1918</i>					
<i>Jan</i>	<i>P 66857</i>		<i>35</i>	<i>35</i>	<i>10</i>
<i>Feb.</i>	<i>A 90109</i>		<i>35</i>	<i>35</i>	
<i>Mar</i>	<i>A 108268</i>		<i>35</i>	<i>35</i>	✓
<i>Apr.</i>	<i>A 5351</i>		<i>35</i>	<i>35</i>	✓
<i>May</i>	<i>J 17142</i>		<i>35</i>	<i>35</i>	✓
<i>June</i>	<i>E 19130</i>		<i>35</i>	<i>35</i>	✓
<i>July</i>	<i>T 28221</i>		<i>35</i>	<i>35</i>	✓
<i>Aug</i>	<i>E 31672</i>		<i>35</i>	<i>35</i>	✓
<i>Sep</i>	<i>H 46039</i>		<i>35</i>	<i>35</i>	✓
<i>Oct</i>	<i>F 49588</i>		<i>35</i>	<i>35</i>	✓
<i>NOV.</i>	<i>B 61080</i>		<i>35</i>	<i>35</i>	✓
<i>Dec.</i>	<i>M 64665</i>		<i>35</i>	<i>35</i>	✓
<i>IAN 19</i>	<i>J 69155</i>		<i>35</i>	<i>35</i>	✓
<i>Feb</i>	<i>J 79429</i>		<i>35</i>	<i>35</i>	✓
<i>MAR</i>	<i>F 91027</i>		<i>35</i>	<i>35</i>	✓
<i>APR</i>	<i>J 408</i>		<i>35</i>	<i>35</i>	✓
			<i>1925</i>		

02713-E-27

M. F. W. 128.
40m. 6-7-17233-1141
L. L. 2320-NL & D. 1993.

..... A/c Closed *30-4-18*
 Ret'd per *Olympic*
 Date *21-4-19* F.X. *30-4-18*
 Clerk *M. N. H. M. O. 99007*

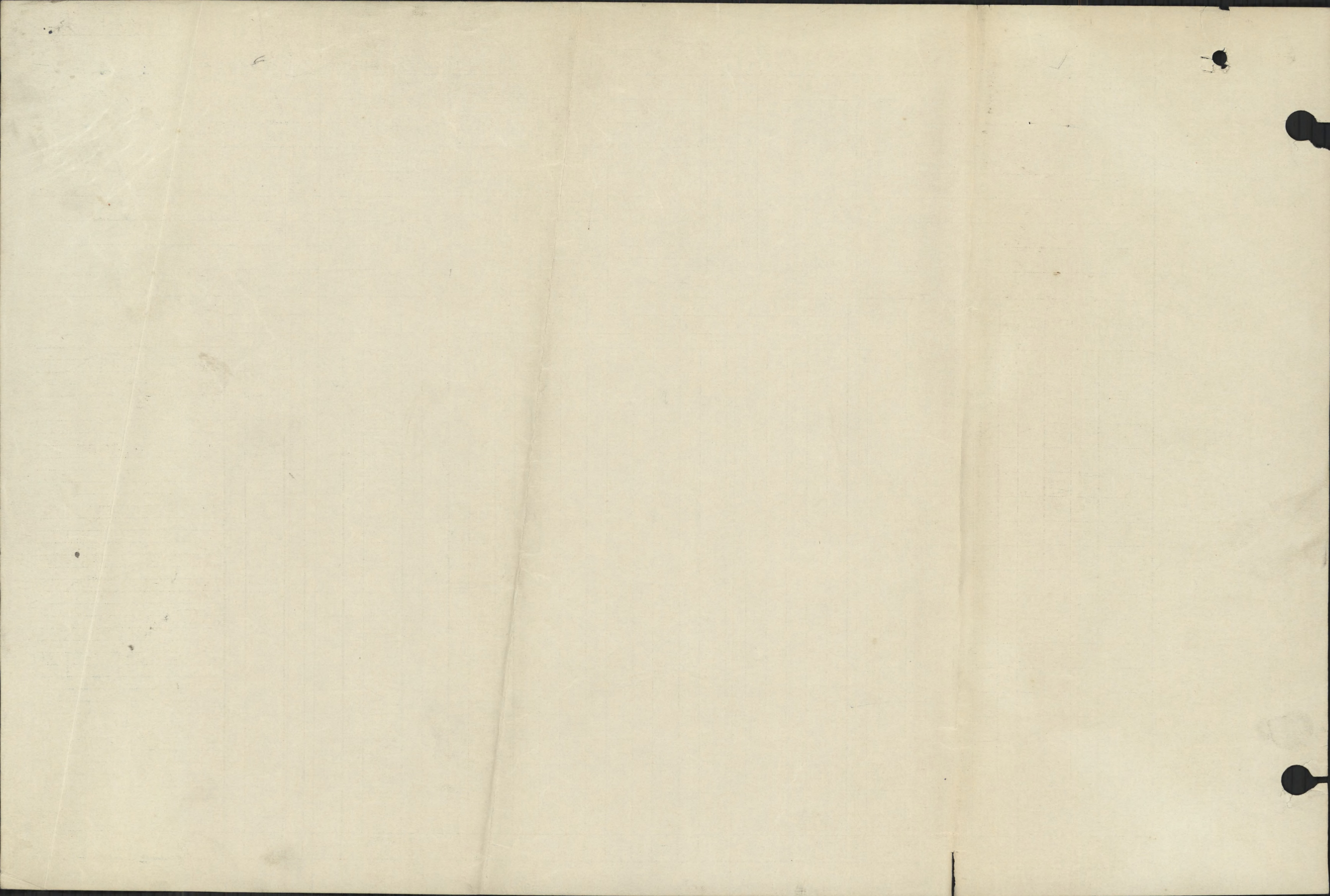


AUDITED

PROMOTIONS, REDUCTIONS AND REVERSIONS AFFECTING DAILY RATE OF PAY AND ALLOWANCES

M. OR S. *[Blank]* REGT. No. *[Blank]* RANK *NATION* NAME (IN FULL) *CAMPBELL EDITH*
 NEXT OF KIN *[Blank]* ORIGINAL UNIT C.E.F. *CAME* IF IN P.F. WHAT UNIT? *[Blank]* (BLOCK LETTERS SURNAME FIRST)
 ADDRESS *[Blank]* PLACE OF ATTESTATION *[Blank]* TRANSFERRED TO *[Blank]* DATE *[Blank]* AUTHORITY *[Blank]*
 DATE OF ATTESTATION *Aug 1914* TRANSFERRED TO *[Blank]* DATE *[Blank]* AUTHORITY *[Blank]*
 IS SEPARATION ALLOWANCE PAID? *No* DATE EFFECTIVE *15-4-19* ASSIGNED PAY \$ *35.00* DATE EFFECTIVE *15-19*
 TO WHOM PAID *[Blank]* RELATIONSHIP *[Blank]* PAYABLE TO *W.S. Clouston* RELATIONSHIP *[Blank]* ANY CHANGE IN ASSIGNEE OR ADDRESS *[Blank]*
 ADDRESS *[Blank]* ADDRESS *W.S. Clouston*
 ADDRESS *[Blank]* ADDRESS *70 Bank of Montreal*
 ADDRESS *[Blank]* ADDRESS *Quebec*
 STOP PAYMENT FORM ASSIGNED PAY RENDERED, DATE *[Blank]* EFFECTIVE *[Blank]*
 DISCHARGED *SOB Montreal To Gen AN Unit 23-4-19* PLACE *[Blank]* DATE *[Blank]* REASON *Gen Promot Po 1921 Do 119/12* AUTHORITY *[Blank]* IF ENTITLED TO POST DISCHARGE PAY *[Blank]*

MONTH	PAY AND F.A.		OTHER CREDITS		TOTAL CREDITS		ACQUITTANCE ROLLS			CASH PAYMENTS			ASSIGNED PAY	REGI-MENTAL CHARGES		OTHER CHARGES		TOTAL DEBITS		BALANCE		PARTICULARS OR REMARKS
	NO. OF DAYS	RATE	AMOUNT		CREDITS		COL. NO. 1	COL. NO. 2	COL. NO. 3	COL. NO. 1	COL. NO. 2	COL. NO. 3		CHARGES	CHARGES	DEBITS	DEBIT	CREDIT				
			\$	C.	\$	C.	\$	C.	\$	C.	\$	C.							\$	C.	\$	
<i>1919</i>																						
<i>May</i>	<i>4</i>	<i>4.00</i>			<i>124.00</i>														<i>121.70</i>	<i>121.70</i>	<i>121.70</i>	<i>Dr 100 121.70 30.4.19</i>
			<i>Other Credits</i>		<i>124.00</i>														<i>39.90</i>	<i>39.90</i>	<i>37.60</i>	<i>124.00 W.S.G. 7 days merer. Bal. & Subs. in Apr. 39.90 37.60 Dr. to be rec. by W.S.G.</i>
					<i>732.00</i>														<i>37.60</i>	<i>124.00</i>	<i>161.60</i>	<i>Balance Soldier Dependat</i>
					<i>732.00</i>														<i>161.60</i>	<i>120.00</i>	<i>450.40</i>	<i>903449</i>
<i>5/6/19</i>																			<i>120.00</i>	<i>120.00</i>	<i>450.40</i>	<i>918007</i>
<i>23.6.19</i>																			<i>124</i>	<i>124</i>	<i>326.40</i>	<i>1077917</i>
<i>23.7.19</i>																			<i>120</i>	<i>120</i>	<i>206.40</i>	<i>1226401</i>
<i>23.9.19</i>																			<i>124</i>	<i>124</i>	<i>82.40</i>	<i>1527202</i>
<i>23.9.19</i>																			<i>82.40</i>	<i>82.40</i>	<i>732-</i>	<i>1527202</i>



ASSIGNED PAY.

UNIT.

RANK.

NAME.

Beneficiary

Address

Amount. \$35^{xx}

Separation Allowance issued. Yes or No.....

NAME OF

DATE

AUTHORITY

Dof 66 Pt Hos.

Pay

3^{xx} pd

7^{xx}

75

Ass

1^{xx}

MATYON.

DATE

AUTHORITY

10⁷/₁₅

Lg. 10393.22¹⁰/₁₅

Name Campbell.
Initials Edith
Bank of Montreal
Trafalgar Sq

add. outfit allee 8/18 \$100

DATE	PARTICULARS	CK. NO.	CR.	DR.	ASSIGNED PAY PAID IN CANADA	BALANCE	SPECIAL AUTHORITIES To be initialed by P.M. in every case.	INITIALS
1918								
Apr 17	A. P. ban				35			
	Apr Pay (R)		142 50.					
24	Bank	1187		107 50				
May 19	May Pay (R)		147 25.					
"	A. P. ban.				35			
23	Bank	2683		112 25				
June 14	June Pay (R)		142 50.					
	A. P. ban.				35			
21	Bank	4166		107 50				
July 16	July Pay (R)		147 25					
	A. P. ban				35			
23	Bank	5626		112 25				
Aug 13	Aug Pay R.		147 25.					
	A. P. ban				35			
21	Bank	7258		112 25				
Sep 12	Sept Pay R		142 50					
	A. P. ban				35			
21	Bank	9187		107 50				
Oct 15	Oct Pay R.		147 25					
	A. P. ban				35			
	Bank.	10404		112 25				
	Outfit allee 1/8.		100.					
31	Bank	10854		100				
Nov 26	Pay (R.) A. P. can.		162 50					
	Bank.	12521		127 50				
	B. Forward				35			

ASSIGNED PAY.

UNIT.

RANK.

NAME.

Beneficiary

Address

Amount. \$ 35.⁰⁰ Can.

Separation Allowance issued. Yes or No.....

NAME OF DATE AUTHORITY

DATE AUTHORITY

D of G. R. + Hop
Pay 2nd
1st
1st
1st
5th

Matron

10th 1915 L. 9. 10393-22¹⁰

Name Campbell
Initials Edith,
Bank -

DATE 1918	PARTICULARS	CK. NO.	CR.	DR.	ASSIGNED PAY PAID IN CANADA	BALANCE	SPECIAL AUTHORITIES To be initialed by P.M. in every case.	INITIALS
-----------	-------------	---------	-----	-----	-----------------------------	---------	------------------------------------------------------------	----------

Dec	Brought. Forward Dec Pay R. a. P can		155		35			
1918 Jan	Bank. a. P can	13792		120	35			
28 Feb 10	Pay (R) Bank a. Pay can Pay (R)	15564	155 124	120	35			
25	Bank March 3-4 th 1918 France	17078	140	105			Feb 1955	
14	Pay (R) a. Pay can	3221	155		35			
25 April	Bank April Pay (R) a. Pay can	18657	150	120	35		Retd. to Can. P.P.C. 30 th 19	
"	adv April Pay Bank	398		115			Refer to N. C. Ledger	
23	Draw allc. 10-14 th 19. P. in Can	938					3-1-6 14 78	
22	" " 6-16 th 19 " "	2342					6-19-9 3382	
							From Ledger 5	
							To d/c 6/19	

ASSIGNED PAY.

UNIT.

RANK.

NAME.

Beneficiary
Address

Canada

Amount. \$ 35⁰⁰

Separation Allowance issued. Yes or No.....

NAME OF DATE AUTHORITY

Dof B.C. Rx #

Pay 3⁰⁰ pd
7.0 75
Messi-00

Matron
Matron

DATE AUTHORITY

10/75 L.G. 10393-2215

Name Campbell
Initials Edith
Bank of Montreal
Trafalgar Sq

DATE

PARTICULARS

1917-18

CK. NO.

CR.

DR.

ASSIGNED
PAY PAID IN
CANADA

BALANCE

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

INITIALS

1911

April 21 April Pay R.

142 50

22 A.P. Can.

35

26

Bank

3003

107 50

May 9 A.P. Can

35

22 May Pay R.

147 25

112 25

23

Bank

5986

112 25

June 8th A.P. Canada.

35

14 June Pay (R)

142 50

107 50

21

Bank

9004

107 50

July 19 July Pay (R)

147 25

17 A.P. Canada.

35

24

Bank

13092

112 25

Aug 18 August Pay (R)

147 25

~~117 60~~

A.P. Can

35

112 25

21

Bank

17361

112 25

Sept 15 Sept Pay (R)

142 50

12 A.P. Can.

35

107 50

21

Bank

21863

107 50

Oct 9 October Pay (R)

147 25

10 A. Pay Canada

35

19

Bank

26291

112 25

Nov 3 In Advance 29/17 - 10²/17

8053

Nov 16 November Pay (R)

142 50

15 A. Pay Canada

35

20

Bank

30763

107 50

Carried Forward.

f 4-8-0 27 41

ASSIGNED PAY.

UNIT.

RANK.

NAME.

Beneficiary
Address
Amount. \$ 35⁰⁰ *ban*
Separation Allowance issued. Yes or No.....

NAME OF	DATE	AUTHORITY	DATE	AUTHORITY
		Pay 3 ⁰⁰ pd 7 ¹⁰ 75 mess 1.00		

MATROU

Name *Campbell.*
Initials *C.*
Bank *of Montreal*
Trafalgar Sq.

1917-18

DATE	PARTICULARS	CK. NO.	CR.	DR.	ASSIGNED PAY PAID IN CANADA	BALANCE	SPECIAL AUTHORITIES To be Initialled by P.M. in every case.	INITIALS
1917 Dec 7	December pay (R) A P. ban.		147 25					
					35			
1918 Jan 13	Jan Pay (R) A P. ban.	Bank. 35096	147 25	112 25				
					35			
21		Bank. 39501		112 25				
Feb 13	Feb Pay (R) A P. ban.		133 00					
9					35			
19 Mar 19	March Pay (R) A P. ban.	Bank. 46996	147 25	98				
					35			
22		Bank.		112 25				

ASSIGNED PAY.

UNIT.

RANK.

NAME.

NAME OF DATE AUTHORITY

DATE AUTHORITY

Beneficiary

Address

Amount. \$

Separation Allowance issued. Yes or No.....

D. C. R. H.

Matron

Name *Campbell*
Initials *Edith*
Bank *of Montreal*

DATE

1917

PARTICULARS

1916-17

CK. NO.

CR.

DR.

ASSIGNED
PAY PAID IN
CANADA

BALANCE

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

INITIALS

Bro. Ford.
Jan 19 *a.p. Can*
22 *Pay Jan*
25 *Bank.*
Feb 13 *Pay Feb.*
19 *a.p. Can*
22 *Bank.*
March 20 *March Pay R.*
21 *a.p. Can*
23 *Bank.*

21943

147 25

112 25

133 00

35

98

147 25

35

24818

112 25

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

ASSIGNED PAY.

UNIT.

RANK.

NAME.

Beneficiary *W. S. Blouston*
 Address *Bank of Montreal Montreal*
 Amount. \$ *35⁰⁰*
 Separation Allowance issued. Yes or No.

NAME OF UNIT. *Dfbbh+H.*
 DATE AUTHORITY
 RANK. *Matron*
 DATE AUTHORITY *10¹⁵ L.Y. 10393 22¹⁰/₁₅*

Name *Campbell*
 Initials *Edith*
 Bank *Bank of Montreal*

1916-17

DATE 1916	PARTICULARS	CK. NO.	CR.	DR.	ASSIGNED PAY PAID IN CANADA	BALANCE	SPECIAL AUTHORITIES To be initialled by P.M. in every case	INITIALS
<i>Apr 21</i>	<i>appt a.p. Can</i>			<i>85</i>	<i>35</i>			
	<i>Pay apr (R)</i>		<i>142 50</i>			<i>107 50</i>		
	<i>Bank</i>			<i>107 50</i>				
<i>May 27</i>	<i>Pay may</i>		<i>144 25</i>			<i>112 25</i>		
	<i>a.p. Can</i>			<i>112 25</i>	<i>35</i>			
<i>June 17</i>	<i>Pay June (R)</i>		<i>142 50</i>					
<i>20</i>	<i>a.p. Can</i>			<i>107 50</i>	<i>35</i>			
	<i>Bank 3874</i>							
<i>July 17</i>	<i>a.p. Can</i>				<i>35</i>			
<i>20</i>	<i>Pay July (R)</i>		<i>147 25</i>					
<i>25</i>	<i>Bank 4997</i>			<i>112 25</i>				
<i>Aug 16</i>	<i>a.p. Can</i>				<i>35</i>			
<i>17</i>	<i>Pay Aug. (R)</i>		<i>147 25</i>					
<i>23</i>	<i>Bank 7299</i>			<i>112 25</i>				
<i>Sep 18</i>	<i>a.p. Can</i>				<i>35</i>			
<i>20</i>	<i>Pay Sep. (R)</i>		<i>142 50</i>					
<i>28</i>	<i>Bank 9510</i>			<i>107 50</i>				
<i>Oct 13</i>	<i>a.p. Can</i>				<i>25</i>			
<i>23</i>	<i>Pay Oct (R)</i>		<i>147 25</i>					
<i>27</i>	<i>Bank 11000</i>			<i>112 25</i>				
<i>Nov 16</i>	<i>a.p. Can</i>				<i>35</i>			
<i>17</i>	<i>Pay Nov (R)</i>		<i>142 50</i>					
<i>24</i>	<i>Bank</i>			<i>107 50</i>				
<i>Dec 12</i>	<i>a.p. Can</i>				<i>35</i>			
<i>18</i>	<i>Pay Dec</i>		<i>147 25</i>					
	<i>Bank</i>			<i>112 25</i>				

Ad Ford

NAME	AUTHORITY	DATE	BANK	AUTHORITY	DATE	NAME OF	UNIT	ASSIGNED PAY	Beneficiary	Address	Amount	Separation Allowance Issued	DATE	PARTICULARS	OK NO	OR	DR	PAY PAID IN BALANCE	ASSIGNED	SPECIAL AUTHORITIES	INITIAL

ASSIGNED

PAY PAID IN BALANCE

SPECIAL AUTHORITIES

INITIAL

CANADA

To be filled in by the assignee

UNIT

UNIT
UNIT
UNIT

UNIT

UNIT

Occupational Group 19
Dispensal Area P

War Service Badge
Class "A" No. C.98

PROCEEDINGS OF AN OFFICER OR NURSING SISTER
STRUCK OFF STRENGTH
OF THE
CANADIAN EXPEDITIONARY FORCE

D-14

1. RANK	Major 	
2. NAME	Campbell Smith	
3. UNIT	C.A.M.C.	
4. DATE STRUCK OFF STRENGTH		PLACE
5. REASON	<p style="color: red;">Sub 687 Canada 687 120 23/4/19 1921-19</p> <p>Demobilization</p>	
6. AUTHORITY		
7. PROPOSED RESIDENCE	<p>40 Mrs Clouston 17, Weirdale Park Westmount, Montreal</p>	

31/1/19

This folder should contain the following documents:

1. Declaration Paper, M. F. W. 51, or Attestation Paper, M. F. W. 23.
2. Casualty Form, A. F. B. 103 or M. F. W. 54.
3. Medical History Sheet, M. F. B. 313 or A. F. B. 178.
4. Proceedings of Medical Boards, A. F. A. 179 or M. F. B. 227.
5. Medical Report M. F. W. 129.
6. Dental History Sheet, M. F. B. 465.
7. Last Pay Certificate, M. F. W. 44.
8. Certificate as to Missing Documents.

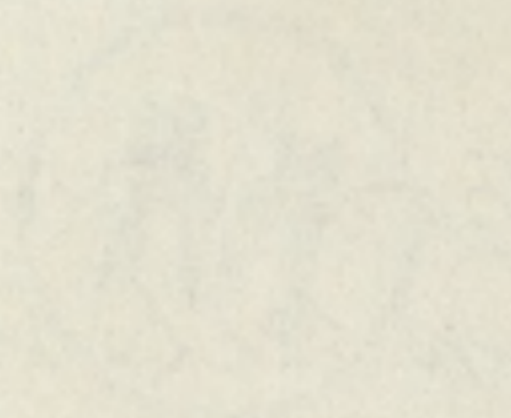
- ✓ 1. Triplicate Declaration Paper (M.F.W. 51), or Triplicate Attestation Paper (M.F.W. 23).
- ✓ 2. Casualty Form (A.F.B. 103).
- ✓ 3. Medical History Sheet (M.F.B.313 or A.F.B.178)
- ✓ 4. Proceedings of Med Board (M.F.B.227 or M.F.W.129)
- ✓ 5. Dental Certificate (C.A.D.C. 5009a).
- ✓ 6. Proceedings of Striking off Strength (M.F.W. 2591).
- ✓ 7. Last Pay Certificate (P. 41)
- ✓ 8. War Service Gratuity Form (M.F.W. 2595).
9. Sundry Documents.

M. F. W. 2591.
20M-11-18.
1772-38-1380.

Dispensal Certificate

Group N.Q.
Checked by No. S.H.
Date 12 APR 1919

PROCEEDINGS OF AN OFFICER OR FIELDING SHERIFF
STOCK OFF SETTING
OF THE
CANADIAN MOUNTED POLICE



DATE SETTING OFF SETTING
2. NAME

IN AUTHORITY
APPROVED SIGNATURE

IN AUTHORITY
APPROVED SIGNATURE

IN AUTHORITY
APPROVED SIGNATURE

4