REGIMENTAL DOCUMENTS

AS 16.6.19

NAME CAMPBELL JOHN Pte REGT. NO. 766348 UNIT 20 Bn H. Q. FILE NO.

	CONTENTS	DATE RECEIVED	TO WHOM FORWARDED	DATE FORWARDED	M. F. W. 2505 REFERENCE	NON-EFFECTIVE BY
2	ATTESTATION PAPER (M.F.W. 23, 133, or 51)					DEATH
1	CASUALTY FORM (M.F.W. 54 or A.F.B. 103)				04281	Category
	TRAINING HISTORY SHEET (M.F.W. 113)					
1	FIELD CONDUCT SHEET (M.F.W. 178 or A.F.B. 122)					
1	REGT. CONDUCT SHEET (M.F.B. 263 or A.F.B. 120)					
1	COMPANY CONDUCT SHEET (M.F.B. 263A or A.F.B. 121)					
2	MEDICAL HISTORY SHEET (M.F.B. 313 or A.F.B. 178)					DISCHARGE
1	DENTAL HISTORY SHEET (M.F.B. 465)					Category
1	MEDICAL REPORT (M.F.B. 227 or A.F.B. 179)					Demob.
	MEDICAL EXAMINATION (M.F.W. 129)					
1	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)					DESERTION
	LAST PAY CERTIFICATE (M.F.W. 44)					
1	PROCEEDINGS ON DISCHARGE (M.F.W. 218 or A.F.B. 268)					
	PARTICULARS OF CHARACTER (A.F.W. 3226)					
1	COPY OF PARCHMENT DISCHARGE CERTIFICATE (M.F.W. 39A)					
2	C. D3					
1	M. F. W67					
1	Misc					
1	R122					
1	Pay Card					

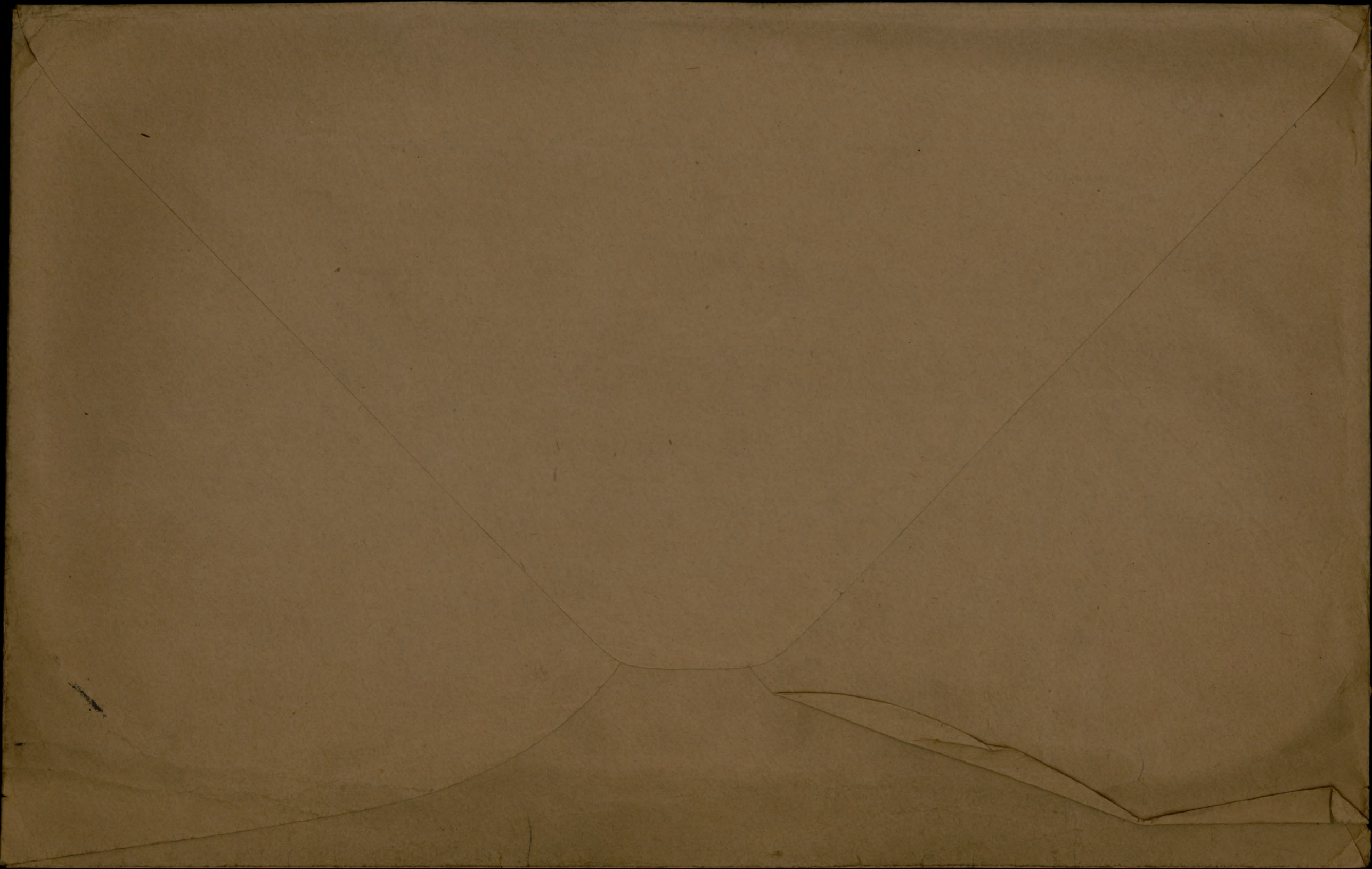
20

M

H

MT 14/10/21

W 2589
100M-11-18
1772-30-1377



ORIGINAL

ATTESTATION PAPER.

No. 766348

#3

123rd Bn. C.E.F., ROYAL GRENADIERS

Folio.

CANADIAN OVER-SEAS EXPEDITIONARY FORCE.

QUESTIONS TO BE PUT BEFORE ATTESTATION.

(ANSWERS.)

1. What is your surname?	Campbell
1a. What are your Christian names?	John
1b. What is your present address?	1234 Dufferin St. Toronto.
2. In what Town, Township or Parish, and in what Country were you born?	Coatbridge, Lanark, Scotland.
3. What is the name of your next-of kin?	Mary Campbell
4. What is the address of your next-of-kin?	1234 Dufferin St. Toronto.
4a. What is the relationship of your next-of-kin?	Mother
5. What is the date of your birth?	23rd April, 1886.
6. What is your Trade or Calling?	Bricklayer
7. Are you married?	No
8. Are you willing to be vaccinated or re-vaccinated and inoculated?	Yes
9. Do you now belong to the Active Militia?	No
10. Have you ever served in any Military Force? If so, state particulars of former Service.	No
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?	MYes

DECLARATION TO BE MADE BY MAN ON ATTESTATION.

I, John Campbell, do solemnly declare that the above are answers made by me to the above questions and that they 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.

John Campbell (Signature of Recruit)

Date 6th December 1915 A. Mulcahy (Signature of Witness)

OATH TO BE TAKEN BY MAN ON ATTESTATION.

I, John 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.

John Campbell (Signature of Recruit)

Date 6th December 1915 A. Mulcahy (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 Toronto this 6th day of December 1915191 .

(Signature of Justice)

M. F. W. 23.
200 M.—11-15.
H. Q. 1772-39-841.

Description of John Campbell on Enlistment.

Apparent Age 29 years 7 months.
(To be determined according to the instructions given in the Regulations for Army Medical Services.)

Height	5 ft 5½ ins.
Chest measurement. Girth when fully expanded	36½ ins.
Chest measurement. Range of expansion	3½ ins.
Complexion	Medium
Eyes	Hazel
Hair	Brown
Religious denominations. Church of England	
Presbyterian	Pres.
Methodist	
Baptist or Congregationalist	
Roman Catholic	
Jewish	
Other denominations (Denomination to be stated.)	

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).

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 6th December 1915 191 .

Place Toronto

Medical Officer.

TORONTO RECRUITING DEPOT.

*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.

John 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.

123rd Bn C.E.F.
ROYAL GRENADIERS

(Signature of Officer)
Lieut Col.
O.C. 123rd Bn. C.E.F.
Royal Grenadiers

DEC 10 1915
ORDERLY ROOM

Date 191 .

CANADIAN EXPEDITIONARY FORCE

DISCHARGE CERTIFICATE

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

THIS IS TO CERTIFY that No. 766348 (Rank) Pte

Name (in full) CAMPBELL John enlisted in

the 123rd Bn

CANADIAN EXPEDITIONARY FORCE at Toronto on the 6th

day of December 1915

HE served in 20th Bn France

and is now discharged from the service by reason of Demobilization.

~~Medical Unfitness~~.

THE DESCRIPTION OF THIS SOLDIER on the Date below is as follows:

Age 33 yrs

Height 5 ft 5 3/4 in

Complexion Medium

Eyes Hazel

Hair Brown

John Campbell

Signature of Soldier.

Marks or Scars Small scars above both wrists

Scar left knee

2 vac scars left arm

Issuing Officer.

For

O.C. No. 2 District Depot.

Rank

Date of Discharge

No. 2 District Depot
Toronto, Ont.
MAY 26 1919

Date MAY 26 1919 19.....

N B.- AS NO DUPLICATE OF THIS CERTIFICATE WILL BE ISSUED, ANY PERSON FINDING SAME IS REQUESTED TO FORWARD IT IN AN UNSTAMPED ENVELOPE TO THE SECRETARY, MILITIA COUNCIL OTTAWA, CANADA.

M.F.B. 39A.

Date of Enlistment

MILITIA AND DEFENCE

Separation and Assigned Pay Branch

OVERSEAS CONTINGENTS

C 127

Date of Assignment Aug 1/16

RATE OF SEPARATION ALLOWANCE

RATE OF ASSIGNMENT

20			

PARTICULARS OF SEPARATION ALLOWANCE

No. 766348

Rank Pte. Promoted Reverted Discharge

Soldier's Name Jno Campbell

Battalion "B" Co. 123rd Battn.

Beneficiary -

Relationship

Address

PARTICULARS OF ASSIGNMENT

Name Mary Campbell

Address 123¾ Duffern St -

Change of Address Toronto,

1

2

3

4

02716-J-243

Date 1917	Cheque No.	Amount S/A	Amount A/P	Total		REMARKS
Dec	31		340	340		
Jany	B 66140		20	20	L.A.S	
Feb	D 90273		20	20		
Mch	A 108431		20	20	✓	✓
Apl	A 5516		20	20		✓
May	J 17315		20	20		✓
June	E 19296		20	20		✓
July	I 28390		20	20		✓
Aug	E 31842		20	20		✓
Sep	H 46216		20	20		✓
Oct	I 48657		20	20		✓
Nov	B 61259		20	20		✓
Dec.	M 64795		20	20		✓
Jan'19	J 69317		20	20		✓
Feb	J 79572		20	20		✓
MAR	F 91162		20	20		✓
APR	9 515		20	20		✓
MAY -	7 6229		20	20		
			680			

AUDITED.

Caronia

22-5-19 28-5-19

M.D.2 m.o. 10445

M. F. W. 128
400M.—6-17—1772-39-1141
L. L. 22320—M. & D. 1593.

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

No.

Rank Promoted Reverted Discharge

Soldier's Name

Battalion

Beneficiary

Relationship

Address

PARTICULARS OF ASSIGNMENT

Name

Address

Change of Address

1

2

3

4

Date	Cheque No.	Amount S/A	Amount A/P	Total	REMARKS

M. F. W. 128
400M.—6-17—1772-39-1141
L. L. 22320—M. & D. 7993.

L. L. Job 310—M. & D. 6574.

73

MILITIA AND DEFENCE

ASSIGNED PAY

OVERSEAS CONTINGENTS

M. F. W. 12.
50m.—4-16.
H. Q. 1772-39-819.

To Whom Mary Campbell

Address 125½ Dufferin St
Toronto

Rate 20 00/xx

AUG 1 1916

By Whom Assigned Campbell Jno

Regtl. No. 766348

Rank Pte

Corps "B" Co 123 Bn

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				

ACCOUNTANT

MILITIA AND DEFENCE

ASSIGNED PAY

OVERSEAS CONTINGENTS

M. F. W. 12a.
50m.—4-16.
1772—39—819.

Sheet No. 2. Mary Campbell

PAYMENTS. 766348

Name of Soldier Campbell Jno

"B" Co 123 Bn

L. L. Job 310.—Req. 6574.

Month.	Year.	Cheque No.	Amt.	20 00/xx	Remarks. AUG 1 1916
April	1916				
May					
June					
July					
Aug.		J 15642	20		
Sept.		Y 16873	20		
Oct.		Z 16857	20		
Nov.		Q 26456	20		
Dec.		H 30676	20		
Jan.	1917	A 39288	20		
Feb.		A 44279	20		20
March		~~C 50184~~	~~20~~		20 LC 50184 Cancelled 2 ww
April		T 49583 P 809	20 20		20 W.
May		X 7133	20		
June		J 14027	20		20
July		B 22232	20	280	B.
Aug.		G 27722	20		W
Sept.		F 38998	20		B
Oct.		K 46609	20		
Nov.		N 54394	20		
Dec.		I 57473	20		340.00
Jan.	1918				
Feb.					
March					
April					
May					
June					
July					

MILITIA AND DEFENCE

ASSIGNED PAY

OVERSEAS CONTINGENTS

Sheet No. 2 (Contd.)

Name of Soldier_____

PAYMENTS.

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.				

R—122

A.G.R.

Rank Pte Name CAMPBELL, John Reg'l No. 766348

Unit 123rd Bn. If in perm. Corps, What Unit? Married or Single Single.

Place and Date of Enlistment Toronto, 6th Decr., 1915. Place of Birth Coatbridge, Lanark, Scotland.

M.X 14/10/21 mj

Name and Address, Next-of-Kin Mary Campbell, 1234 Dufferin St., Toronto. Relationship Mother.

Assigned Pay Monthly $ Payable to Relationship

Separation Allowance $ Payable to Relationship

Discharge, Date and Place Reason Character

N/E. R.B. No. 29173
File R.L.
Category CAN. OR

H. W. & V., Ld.—7165-16.

Report. Date.	Report. From whom received.	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.
		Arrived in England S.S. "Cameronia" 18-8-16			
10 I 16-123rd Bn TRANS-To 20th Bn, O'seas, B'Shott Io. Io. I6DoPt2 232 WR.					
18-10-16	20th Bn	*Taken on strength.*	Field	11-10-16	Part II 58.
28.11.16	"	Attch. to 6th Fld. Co. R. Engrs. duty	"	6.11.16	" 71
3.12.16	2nd Div. Engrs	do.	"	6.11.16	" 64
5.12.16	do.	Ceases to be attch'd.	do.	"	19.11.16	" 64
31.12.16	20th Bn	do.	do.	"	19.11.16	" 19
22.1.18	"	Awarded Good Conct. Badge	PC	Field	6.12.17	" 7
8.4.19	"	Proc to England	"	"	5.4.19	" 32

24 6 19 owing SOS TO CAN 13 5 19 Pt 2

A.F.B. 103 CHECKED 19 JUL 1916

Report. Date.	Report. From whom received.	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.
10-4-19	"O" Wing	T.O.S. from 20 Bn.	Witley	6-4-19	- H
24 6 19	owing	S.O.S. to Canada	—	13 5 19	D° 61

60-1-25
15/5/19

To be made out in duplicate.

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 ..... 123rd Overseas Battalion C.E.F.

(2) Regimental Number 766248

(3) Full Name of Soldier ..... Campbell, John

(4) Place of Birth ..... Scotland

(5) Are you married, or not ? ... no

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

(b) Present Postal Address ..... nil

(7) Are you a widower ? ..... nil

(8) Have you any children ? .....

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

Also their names and ages .....

M. F. W. 67.

200M.—3-16.
I772-39-954.

(SEE OTHER SIDE.)

(9) Is your Father alive ? no

If so, state name and address no

(10) Is your Mother alive ? yes

If so, state name and address Mary Matris Campbell

1234 Dufferin Street, Toronto Canada.

(11) If your Mother is a widow yes

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.

no

(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.

no

(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.

no

(15) Are you insured ? nil

If so, in what Company ? nil

Have you made arrangements for payment of your Insurance premium nil

If not, and it is a monthly premium, you can assign the amount in addition to any other assignment you wish to make.

R. S. Northcote Capt. Adj.
for. *Officer Commanding.*
123rd Bn. C.E.F.

Date Aug. 1st 1916.

ORIGINAL

MEDICAL HISTORY SHEET.

ORIGINAL

#3

Surname Campbell Christian Name John 15

Examined { on 6th day of December 1915 / at Toronto

Birthplace { City or Town Coatbridge / County Lanark, Scotland

Apparent age 29 Yrs. 7 mos.

Trade or occupation Bricklayer

Height 5 Feet 5¾ Inches.

Weight 132 Lbs.

Chest measurement { Minimum 33 inches. / Maximum expansion 36½ inches.

Physical development Good

Small-Pox Marks Nil

Vaccination Marks { Arm Right. Left. 2 / Number 2

When Vaccinated last 1887

(a) Marks indicating congenital peculiarities or previous disease nil

(b) Slight defects but not sufficient to cause rejection nil

11.3.18 2nd R.L 23-1. 10.5.18 2d

Approved by [signature]

Rank Capt M.O.

TORONTO RECRUITING DEPOT.

Date	Fit or Unfit	Examined for Re-engagement,
		M.O.
		M.O.
		M.O.
		M.O.
		M.O.
		M.O.

Date	Result	Vaccinations.
18/1/16	✓	C Lewis Capt M.O.
		M.O.
		M.O.

Date	Result	Anti-Typhoid Inoculations, Etc.
11/1/16	✓	C Lewis Capt M.O.
18/1/16	✓	C Lewis Capt M.O.
19/1/16	✓	C Lewis Capt M.O.
5/10/16	T.A.B.	G E Bulkley Capt

Enlisted on 6th *day of* December 1915 *at* Toronto

	Corps.	Regt'l Number.	Habits.	Date.
Joined on enlistment	48th Highlanders.			
Transferred to..	12 3rd Bn 20th Bn	766348		

EXAMINED OR DISCHARGED BY A MEDICAL BOARD.

Station.	Date.	Disease.	Result.
Witley	14-4-19	Def. Vision	A A.M. Naylor Capt R.A.M.C.

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.

M. F. B. 313.

150M.—8-15.
H. Q. 1772-39-439.

Surname Campbell Christian Name John

STATION.	Date of Arrival at the Station.	Dates of Admission into Hospital. Day	Month	Year	Dates of Discharge from Hospital. Day	Month	Year	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.

Lieut Col.
O.C. 125th Bn. C.E.F.
Royal Grenadiers

DUPLICATE DUPLICATE

MEDICAL HISTORY SHEET.

Surname Campbell Christian Name John 18

Examined on 6 day of December 1915 at Toronto, Ont.

Birthplace City or Town Coatbridge County Lanark, Scot.

Apparent age 29 years, 7 mons

Trade or occupation Bricklayer

Height 5 Feet 5 3/4 Inches.

Weight 132 Lbs.

Chest measurement Minimum 33 inches. Maximum expansion 36 1/2 inches.

Physical development Good

Small-Pox Marks None

Vaccination Marks Arm Right. Left. 2 Number 2

When Vaccinated last 1887

(a) Marks indicating congenital peculiarities or previous disease None

(b) Slight defects but not sufficient to cause rejection None

Certified Correct

~~Approved by~~ W. B. Kerr Granville Lieut Col. O.C. 123rd Bn. C.E.F.

Approved (signed) W. Ogden Capt. Rank Royal Grenadiers M.O.

Toronto Recruiting Depot

Date	Fit or Unfit	Examined for Re-engagement,
		M.O.
		M.O.
		M.O.
		M.O.
		M.O.
		M.O.

Date	Result	Vaccinations.
18/1/16	x	E Ogden Capt M.O.
		M.O.
		M.O.

Date	Result	Anti-Typhoid Inoculations, Etc.
11/1/16	x	E Ogden Capt M.O.
15/1/16	x	E Ogden Capt M.O.
19/1/16	x	E Ogden Capt M.O.
5/10/16	TAB	G.E. Huntley Capt.

Enlisted on 6 day of December 1915 at Toronto, Ont

	Corps.	Regt'l Number.	Habits.	Date.
Joined on enlistment	48th Highlanders			
Transferred to..	123rd Bn			
	20th Bn.	766348		

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.

M. F. B. 313.

150M.—8-15.
H. Q. 1772-39-439.

Surname Campbell Christian Name John

STATION.	Date of Arrival at the Station.	Dates of Admission into Hospital. Day	Month	Year	Dates of Discharge from Hospital. Day	Month	Year	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.

EYE, EAR, NOSE, AND THROAT CLINIC

Witley Camp Surrey

Date.....12—4.....1919

Reg.No.....766348.....Rank.....Pte.....Name.....Campbell J.....

Unit.....Lg 15.....

WITHOUT GLASSES.

WITH GLASSES.
(as per prescription below)

SPH. CYL. AXIS.

Visual acuity.Rt 6/6 with

Visual acuity.Lt. 6/18 with

Category recommended is;)

Glasses not ordered. A

REMARKS.

Defective vision of eye due to - Amblyopia
+ astigmatism

CONDITION WAS.....PRESENT PREVIOUS TO ENLISTMENT AND HAS.....

BEEN CAUSED BY SERVICE.

HAS.....BEEN AGGRAVATED BY SERVICE.

D.A. Maxwell
Captain C.A.M.C.
Eye and Ear Specialist, Witley Camp
Surrey

A

15

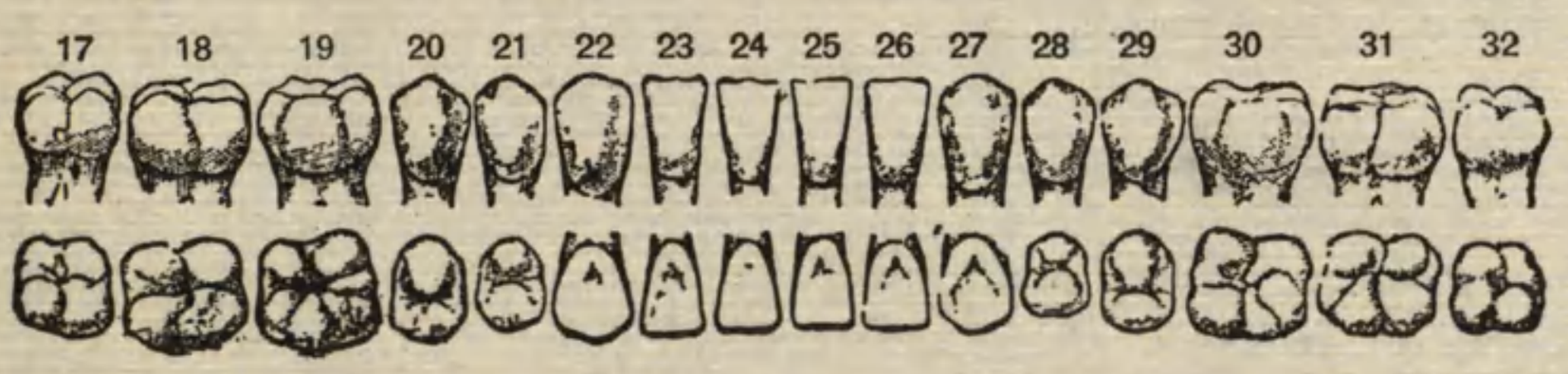
CANADIAN ARMY DENTAL CORPS, O.M.F.C.

DENTAL CERTIFICATE FOR DEMOBILIZATION

NAME OF SOLDIER (Block letters) CAMPBELL J.

REGIMENT 20th Battn RANK Pte No 766348

Date of Examination in England 3 APR 19 Date of Examination in France



DIRECTIONS TO DENTAL OFFICERS

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 5. 18. 21. 22. 28. 32.

2. EXTRACTIONS

3. CROWNS

4. DENTURES

(*a*) Full Upper

(*b*) Part Upper

(*c*) Full Lower

(*d*) Part Lower

HAS HE EVER REFUSED DENTAL TREATMENT ?

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 yes.

(*c*) In France

Signature of Dental Officer E Mellett Capt

25M.—12-18.

H.Q. 1772-39-950

W.S.B. CLASS "A"

Fill in Only.—Unit, Number, Rank and Name.

M[illegible] W. 54.
150M. 10-15.
H.Q. 1772-39-920.

Casualty Form—Active Service.

Unit, Regiment or Corps 123rd Bn. C.E.F., ROYAL GRENADIERS

Regimental No. 766348 Rank Pte Name Campbell, John

Enlisted (a) Dec 6/15 Terms of Service (a) Dof W C. E. F. Service reckons from (a) Dec 6/15

Date of promotion to present rank. } ..... Date of appointment to lance rank } ..... Numerical position on roll of N. C. Os. } .....

Extended ..... Re-engaged ..... Qualification (b) .....

CERTIFIED CORRECT. 20 OCT. 1916 CAN. RECORDS LONDON

Report Date	Report 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.	Place	Date	Remarks taken from Army Form B. 213, Army Form A. 36, or other official documents.
		Embarked Canada ~~8-8-16~~	Halifax	8-8-16	
		Arrived England ~~19-8-16~~	Liverpool	19-8-16	
		Proceeded for Service Overseas to 20th Bn CEF	Bramshott	10/10/16	Part II #232
11/10/16	C B Dep	Arrd & taken on strength	20th Bn	11/10/16	NR Pt 2 O/rs 58d 13/10/16
do	do	Left for	2nd C E Bn	30/10/16	NR
2/11/16	2nd C E Bn	Arrived	do	2/11/16	NR
18-3-17	do	Left for	20th Bn	18-3-17	NR
20-3-17	20th Bn	Arrived	do	— " —	B213
17/11/16	6th FCCE	Attached for duty	Field	6/11/16	B213 Pt.2.O.71 28/11/16
25/11/16	do	Ceases to be attached	do	19/11/16	B213 do 79.31/12/16
	— " —	GRANTED 14 DAYS LEAVE.		30-11-17	— " — Part II Ord. 91 dy
8 DEC 17 29 DEC 17	20 Bn.	Rejd 2 Div Dump from leave.		17.12.17	— " —
5-1-18	— " —	Awarded L.C. Badge		6.12.17	— " — Pt II 7-191 R.
23.11.18	— " —	Granted 14 days leave UK		22.11/18	— " — Pto 119/18
— " —	— " —	Ceases to be att 4 Bde on Rej Bn		16.11.18	— " —
21.12.18	— " —	Rejd from leave	20 Bn	12.12.18	— " —
28.12.18	— " —	Att 2 Div H.Q. Grand.		20.12.18	— " —
18.2.19	— " —	Rejd from 2 Div Div H.Qrs.		10.2.19	— " —

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

[P.T.O

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				
	C.E.C.	Proceeded To England		5 AVR 1919	N.T. A. Brandel Lieut. for Lt. Col., A.A.G., Canadian Section
6.4.19	O. Wing	T O S	Witley	10.4.19	D.O. #4
	"O" WING	S.O.S., O.M.F.C. ON PROCEEDING TO CANADA	WITLEY	8.5.19	D.O. PT. 2 No. 27
					[signature] Lieut. OFFICER I/c RECORDS. "O" Wing C.C.C.
MAY 14 1919	O.S.	T.O.S. No. 2 DISTRICT DEPOT, TORONTO	1919		154
MAY 26 1919	S.O.S.	(DISCHARGED FROM H.M.S.) No. 2 DIS. DEPOT, PART II D.O.			154
					[signature] Lieut. for O.C. No. 2 District Depot.

S.S. CARONIA * Sailing 60 *
Sailed L'pool 14-5-19.

No. 166348 RANK Pte NAME Campbell John

T.O.S 6-12-15 UNIT Toronto Recruiting Depot
AO 394 6-12-16

123rd Bn. 109th & 48th Regt M.D. 2

PAID FROM	PAID TO	SIG. OR REC'T	PROMOTIONS, TRANSFERS, DISCHARGES, ETC.	
			PARTICULARS	AUTHORITY
1915	1915			
Dec 6	Dec 10	—	Transfd to 123rd Bn	AO 39 10-12-15

No. 766348 RANK Pte. NAME Campbell J.

T.O.S. Transfd from Base Bd UNIT 123rd Battalion
Commenced Toronto 11-12-15
DO 8 of 11-12-15

M. D. 2

PAID FROM	PAID TO	SIG. OR REC'T
1915	1916	
Dec 11 1916	Dec 31 1916	✓
Jan		✓
Feb		✓
mar		✓
april		✓
may		✓
June		✓
July		✓
aug paylist not available		

PROMOTIONS, TRANSFERS, DISCHARGES, ETC.

PARTICULARS	AUTHORITY

UNIT SAILED
AUG 7 1916

S.O.S. Demob. 26-5-19. M.D 2.

649-C-37453

CAMPBELL, John (Pte) No. 766348 20th Bn.

Medals and Decorations (Widow) Mrs. John Campbell,
32 Dartnell Ave.,
Toronto, Ont.

Plaques and Scroll (NIL)

Memorial Cross (NIL Death not due to service.

not eligible for star.
Eligible " V. M.
Eligible " Burns.
M.J.

57321

MARRIED SINGLE Yes. WIDOWER

TRADE OR CALLING Bricklayer. RELIGION Presbyterian.

DESCRIPTION.

APPARENT AGE 29 5 YEARS 7 MONTHS

HEIGHT FEET 5 3/4 INCHES

CHEST MEASUREMENT 36 1/2 INCHES EXPANSION 3 1/2 INCHES

COMPLEXION Medium. EYES Hazel. HAIR Brown.

DISTINGUISHING MARKS Nil.

MEDICAL EXAMINATION. PLACE Toronto, Ont. DATE Dec. 6th, 1915.

SURNAME. Campbell,

CHRISTIAN NAMES John

REGL. No. 766348. RANK Pte.

UNIT 123rd Batt.

FORMER CORPS Nil.

2d CARD No.

B.O.S. Dis. 26/5/19
Demob. FOLL.
D.O. 154 3/5/19
#2 DD.

NEXT OF KIN.

NAMES IN FULL Campbell, Mrs Mary

RELATIONSHIP TO SOLDIER Mother.

ADDRESS 1234 Dufferin St., Toronto, Ont.

CHANGE OF ADDRESS

COUNTRY OF BIRTH Scotland, Coatbridge, Lanark. DATE April 23rd, 1886.

PLACE OF ATTESTATION Toronto. DATE Dec. 6th, 1915.

Sailed from Halifax 8/8/16 506/4 Per. S. S. Cameronia R/C 22/5/19 329/96 Pte.

L. L. 90589.—M. & D. 6312. M. F. W. 22. 100m.—1-16. H. Q. 1772-39-839.

P 820
12474—375M—13-2-18.

* Strike out whichever inapplicable.

ASSIGNED PAY.	* ~~ENGLAND~~ OR CANADA.	SEPARATION ALLOWANCE.	* ENGLAND OR CANADA.
EFFECTIVE DATE:-	1.8.16	EFFECTIVE DATE:-	
AMOUNT:-	20.00.	AMOUNT:-	

NAME:- CAMPBELL. John.

NUMBER:- 766348.

NAME, ADDRESS, RELATIONSHIP & AUTHORITY	WHEN PAYEE OF A.P. IS THE SAME AS PAYEE OF S.A. THE WORD "SAME" ONLY TO BE WRITTEN IN THIS SPACE.
Mary Campbell (Mother)	
1234 Dufferin St. Toronto. Ont.	
Stopped Effective 1-5-19	

PARTICULARS OF RANK OR APPOINTMENT

AUTHORITY	DATE EFFECTIVE	RANK OR APPOINTMENT
		Private

UNIT AND TRANSFERS

ORIGINAL UNIT:- 123 Batt'n

DATE ACCOUNT FIRST OPENED:- 1.8.16

AUTHORITY	DATE EFFECTIVE	DATE LEDGER SHEET T'SF'D	UNIT TRANSFERRED TO
			20 Batt'n

EXTRACTS FROM ACTIVE SERVICE PAY-BOOKS — UPON CLEARANCE OF VOUCHERS, ENTRIES WILL BE CANCELLED BY INSERTION OF DATE CHARGED IN RED INK

DATE OF PAYMENT	NUMBER OF A.R	UNIT PAID BY	AMOUNT	DATE OF PAYMENT	NUMBER OF A.R	UNIT PAID BY	AMOUNT
15/4/19	133	~~Wiley~~	58 40				

DAILY RATES OF PAY AND ALLOWANCES

AUTHORITY	PAY	F.A.	P.F.A.	SUBS'CE ALL'CE
	1 00	10		

S.O.S. Can 13/5. 160 A R 60

PARTICULARS OF RENDERING NON-EFFECTIVE 15/11/19 Canada 7043 Und 2 Wi - B'shon 14½ C'Bal 14.06 Disposal

MONTH 1918	PARTICULARS	CR. 1	CR. 2.	PARTICULARS	DR. 1	DR 2.	DR. 3.	DR. 4.	BALANCE	DEFERRED	SEPARATION
mch 31	Bal Fwd								68 13		
apl.	8 Pay	33.		Can Pay				20.			
				AR. 43. 9/4. 21 Bn	4 4 6				76 67		
may	do	33 34 10		Can Pay	4 4 6			20 20			
				AR. 115. 3/5. 21 Bn	8 03						
				" 187. 19/5. "	3 57				79 17		
June	do	34 10 33.		Can	11 6 0			20 20.			
				AR. 235. 8/6. 21 Bn	4 4 6						
				" 307. 23/6. "	3 57				84 14		
July	do.	33. 34 10		Can	8 0 3			20 20	98 24		
				AR 660. 24/7. 19 Bn	3 57				94 67		
				" 353. 4/7. 20 Bn	4 4 6				90 21		
Aug	do	34 10 34 10		Can	8 0 3			20 20	104 31		
				AR. 699. 1/8. 19 Bn	3 57				100 74		
				" 988. 24/8. do	3 57				97 17		
Sept	do	34 10 33.		Can	7 1 4			20 20	110 17		
				AR. 1120 - 5/9 - 19 Bn	3 57				106 60		
		33.			3 57			20	agreed 22/11/18		
Oct.	do.	34 10 34 10		Can				20 20.	120 70		
Nov/Dec	Dec P.P.	67 10		CP 68190 22/11/18	97 33						
Jany	—	34 10		Can				40 20.	64 57		
		101 20			97 33			60.			
Feby.	P. P.	30 80		Can				20			
Mar	P.P.	34 10		1404 4 Bde 18/12.	6 49						
				3816 2nd Dwsig 14/1.	5 05						
		64 90			11 54			20	64 57		

NUMBER RANK NAME

MONTH	PARTICULARS	CR. 1.	CR. 2.	PARTICULARS	DR. 1	DR. 2	DR. 3.	DR. 4.	BALANCE	DEFERRED	SEPARATION
	Fwd	64 90		Fwd.	11 57			20	64 57		
				2677. 2 Div Dram 15/2.	7 46						
				4164. 4 Bde 26/2.	9 38						
				5054. v. 9/3.	2 65						
				Cal.				20			
				5754. v 2813.	3 65				59 46		
		64 90			30 01			40			
apl.	PR	33		Cal.				20	72 46		
				633. Oliver Witley	58 46						
				2055 v 2514.	9 73				5 46		
				3473. v 9/5 End.	9 73				7 86		
		33			77 86			20			

78.46
5.8.40
14.06
Adams 18/4/19

MARRIED OR SINGLE S

PLACE OF BIRTH Coatbridge Scot.

NAME AND ADDRESS OF NEXT OF KIN Mary Campbell
123 Dufferin St TORONTO, ONT.

RELATIONSHIP OF NEXT OF KIN mother

NAME AND ADDRESS OF NEXT OF KIN

RELATIONSHIP OF NEXT OF KIN

SEPARATION ALLOWANCE MONTHLY $ EFFECTIVE (DATE)

PAYABLE TO

RELATIONSHIP OF DEPENDANT

CASUALTIES. PROMOTIONS. &c.

PARTICULARS	EFFECTIVE DATE	AUTHORITY

ADMISSIONS TO HOSPITAL. &c

DATE ADMITTED	DATE DISCHARGED	V. OR A.	NAME OF HOSPITAL

REG'L. No. 766348 RANK Pte NAME Campbell Jno

IF IN PERMT. CORPS WHAT UNIT | UNIT 123 Bn TRANSFERRED TO 26th Bn DATE OCT 10 1916 AUTHORITY P.O. 232

PERMANENT FORCE ALLOWANCES TRANSFERRED TO DATE AUTHORITY

PLACE OF ATTESTATION TORONTO, ONT. TRANSFERRED TO DATE AUTHORITY

DATE OF ATTESTATION Dec 6. 1915 TRANSFERRED TO DATE AUTHORITY

ASSIGNED PAY MONTHLY $ 20.00 DATE EFFECTIVE AUG - 1 1916

PAYABLE TO Mary Campbell, 123 Dufferin St TORONTO, ONT. RELATIONSHIP mother

ASSIGNED PAY MONTHLY $ DATE EFFECTIVE

PAYABLE TO RELATIONSHIP

STOP-PAYMENT FORM (ASSIGNED PAY) RENDERED (DATE) EFFECTIVE REASON

DISCHARGE DATE AND PLACE REASON AND AUTHORITY

ACCOUNT TRANSFERRED TO NON-EFFECTIVE BRANCH (DATE)

ACCOUNT TRANSFERRED TO OFFICERS' PAY BRANCH (DATE)

BJ

DATE	PAY No. OF DAYS	PAY RATE	PAY AMOUNT $	PAY AMOUNT c.	FIELD ALLOWANCE No. OF DAYS	FIELD ALLOWANCE RATE	FIELD ALLOWANCE AMOUNT $	FIELD ALLOWANCE AMOUNT c.	WORKING OR SPECIAL PAY No. OF DAYS	WORKING OR SPECIAL PAY RATE	WORKING OR SPECIAL PAY AMOUNT $	WORKING OR SPECIAL PAY AMOUNT c.	ASSIGNED PAY CREDITS	OTHER CREDITS	TOTAL CREDITS	ACQUITTANCE ROLLS 1 No.	1 Date	2 No.	2 Date	3 No.	3 Date	4 No.	4 Date	CASH PAYMENTS 1	2	3	4	ASSIGNED PAY	OTHER CHARGES	TOTAL DEBITS	BALANCE CREDIT	BALANCE DEBIT	PAY WITHHELD OR DEFERRED	PAY AVAILABLE FOR ISSUE	REMARKS
																													5.00	5		5.00			Balce from Canada
Aug 1-31	31	1.00	31	00	31	.10	3	10					34	10	11									730				20	00		27	30	1	80		
Sept 1-30	30	100	30	00	30	.10	3	00					33	00	1/3	15/16	108.	29/16						486	243			20	00		27	29	7	51		
Checked J.A.Bdym Oct 1-9	9	100	9	00	9	.10		90					9	90	149	8 10/16								486				20	00		24	86			7	45		2/c 20 Bn PO 232
10/31	22	1.	22		22	.10	2	20					24	20																		16	75		
Nov 30	30	1.	30		30	.10	3						33	00																					$24.39 should be 25.39 adjusted 1.00 in April 1917 Paylist
Dec 31	1.	31		31	.10	3	10						34	10																					
1917			1530				1530																												
Jan 31	1.00	34	10										34	10																					
Feb 28	1.10	30	80										30	80																					
Mch 31		34	10										34	10																					
		267	30										267	30																					
Apl 30	1.00	33											33																						
May 31		34	10										34	10	72	30/4								523											
															8	17/4								261											
		33440											33440											2486	243	3226		200	5	26455	6985				

Balce from Canada

2/c 20 Bn PO 232

$24.39 should be 25.39 adjusted 1.00 in April 1917 Payliist

49.59 changed to 50.59 to adjust 1.00 error in Nov 1916. $24.39 Ld Lave, then $25.39

766348 Pte Campbell J.

DATE	PAY No. of Days	PAY Rate	PAY Amount $	PAY Amount c.	FIELD ALLOWANCE No. of Days	FIELD ALLOWANCE Rate	FIELD ALLOWANCE Amount $	FIELD ALLOWANCE Amount c.	WORKING OR SPECIAL PAY No. of Days	WORKING OR SPECIAL PAY Rate	WORKING OR SPECIAL PAY Amount $	WORKING OR SPECIAL PAY Amount c.	ASSIGNED PAY CREDITS	OTHER CREDITS	TOTAL CREDITS
			33	40											33 40
June	30	1 10	33	.											33 .
July	31	.	34	10											34 10
Aug	31		34	10											34 10
Sept	30		33												33 .
			468	60											468 60

ACQUITTANCE ROLLS 1 No.	1 Date	2 No.	2 Date	3 No.	3 Date	4 No.	4 Date
131	21/5						
274	21/6						
192	8/6						
332	9/7						
		525	30/8				

CASH PAYMENTS 1	2	3	4	ASSIGNED PAY	OTHER CHARGES	TOTAL DEBITS	BALANCE Credit	BALANCE Debit	PAY WITHHELD OR DEFERRED	PAY AVAILABLE FOR ISSUE	REMARKS
24 86	2 43	32 26		200 .	5 .	264 55	69 85		1		
2 68				20 .		22 68	80 17		1		
2 68				20		22 68	91 59				
5 35				20		25 35	100 34				
2 68		5 35		20		28 03	105 31				
38 25	7 78	32 26		280	5 .	363 29					

MONTH 1917	PARTICULARS	CR. 1	CR. 2	PARTICULARS	DR. 1	DR. 2	DR. 3	DR. 4	BALANCE	DEFERRED PAY	SER. ALLCE. ENG.
Sept 30	Balance.	~~105 31~~							105 31		
Oct	P pay	34 10						20			
				578. 12/9. 21 Bn.	268						
				aR. 472 - 7/8/17 21st Bn.	268						
				aR. 528. 27/8. do	268			20	111 37		
		34 10			804						
Nov	P Pay	33 -						20			
				. 632. 25/9. 21 Bn	268						
				. 693. 14/10 .	446						
				aR. 1938. 1/12/17	486						
				aR 749 28/10 21 Bn.	357						
Dec. 1918	P Pay	34 10						20	79 09		
		67 10			59 38			40			
Jan.	do	34 10						20			
				aR. 801. 30/11. 21 Bn	446						
				. 921. 23/12 21 Bn	803				80 70		
		34 10			1249			20			
Feb	do	30 80		Can. A.P.				20			
				aR. 991. 14/1 21 Bn	446						
				. 1040. 30/1 21 Bn	357			20	83 47		
		30 80			803						
Mar	do	34 10		Can A.P.				20	119 57		
				aR 1110. 27/2 20 Bn	803				49 44		
				" 1175 9/3 21 Bn	446						
				DNaR. 1006. 16/11/17 20 Bn	1338						
				aR 1731 20/3 21 Bn	357						
		34 10			2944			20	68 13		

"CARONIA" 21.5.19

6442 DISPERSAL "I"

AUDITOR | PAYMASTER

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

REGT. No. 766348 RANK Ite NAME (IN FULL) CAMPBELL, J.

M. OR S.

NEXT OF KIN — RELATIONSHIP

ADDRESS

IS SEPARATION ALLOWANCE PAID? Nil. DATE EFFECTIVE

TO WHOM PAID — RELATIONSHIP

ADDRESS

PARTICULARS	EFFECTIVE DATE	AUTHORITY

ORIGINAL UNIT C.E.F. 123 Bn. — IF IN P.F. WHAT UNIT? Same — (BLOCK LETTERS SURNAME FIRST)

PLACE OF ATTESTATION — TRANSFERRED TO — DATE — AUTHORITY

DATE OF ATTESTATION 16-12-15 — TRANSFERRED TO — DATE — AUTHORITY

ASSIGNED PAY $ 20.00 — DATE EFFECTIVE 21/5/19 Closed G Ottawa

PAYABLE TO Mary Campbell — RELATIONSHIP — ANY CHANGE IN ASSIGNEE OR ADDRESS

ADDRESS 1234 Dufferin St Toronto Ont

STOP PAYMENT FORM ASSIGNED PAY RENDERED, DATE — EFFECTIVE

DISCHARGED — PLACE Toronto — DATE 26.5.19 — REASON Demob. — AUTHORITY D.O.154 — IF ENTITLED TO POST DISCHARGE PAY yes

MONTH	PAY AND F.A. NO. OF DAYS	RATE	AMOUNT $	C.	OTHER CREDITS $	C.		$	C.	TOTAL CREDITS $	C.	ACQUITTANCE ROLLS COL. NO. 1 NO.	DATE	COL. NO. 2 NO.	DATE	COL. NO. 3 NO.	DATE	CASH PAYMENTS COL. NO. 1 $	C.	COL. NO. 2 $	C.	COL. NO. 3 $	C.	ASSIGNED PAY $	C.	REGIMENTAL CHARGES $	C.	OTHER CHARGES $	C.		$	C.	TOTAL DEBITS $	C.	BALANCE DEBIT $	C.	CREDIT $	C.	PARTICULARS OR REMARKS
BALANCE FROM PREVIOUS ACCOUNT																																						T.O.S. 14/5/19 D.O. 154 SUBS. TO D.O.
30/4/19								14	06	14	06																								14	06	Cr Bal Exp LPC,
29/5/19	29	1/10	3	19	0													19	46																		Endorsed on LPC.
					35/70																				20	-										1/2/19 to 29/5/19 RA Clothing Allowance 1st payment W.S.S.C.
																																					Pray.
																				4	87	5																Boat & Train
								13	6	90		Cheque		101		63																	1	50	96				
		W.S.G.																						W.S.G.														Due Soldiers W.S.G. Paid as above 3 days R Above as 1103
183			4	20				4	20																3	30							73	30	346	70		
							a.R 70	June	23											664085		70	-										143	30	276	70		1st W.S.S.C. Paid by #2 D.D.
							aR 89	July	16											97643		66	70										210		210			
							aR 115	Aug	18											134121		70	-										280	-	140	-		
							aR 141	Sep	18											135	2405	70	-										350	-	70	-		
							aR 169	Oct	22											136	1221	70	-										420	-				
										420	-																420							420	-				

100M-1-19.—L. L. 53962-M. & D. 9723.
M. F. W. 2596.
1772-39-1890.

OPINION OF THE MEDICAL BOARD

18. Does the Board concur with the preceding report? If not, give differing opinions, with reasons, quoting the number of the answer criticised.

YES

19. Is the invalid fit for

(a) General service,	(Category A)	(~~Yes or No.~~) YES YES A
(b) Service abroad, not general service,	(" B)	(~~Yes or No.~~)
(c) Home service (Canada only),	(" C)	(~~Yes or No.~~)
(d) Temporarily unfit.	(" D)	(~~Yes or No.~~)
(e) Unfit for service in Categories A, B and C	(" E)	(~~Yes or No.~~)

20. It is certified that the invalid

(a) ~~Does require treatment.~~ (Give the nature of the condition and of the treatment required and its probable duration.)

(b) Does not require treatment.
(c) ~~Should pass under his own control.~~
(d) ~~Should not pass under his own control.~~
(Strike out condition not applicable.)

21. It is recommended that the invalid be ~~discharged~~. (When not for discharge add special recommendation.)

boarded for R.T.C. Auth A.S. Tel 9083 of 11-11-18

Before signing the President of the Medical Board will read the statement signed by the invalid and differing opinions regarding Sections 7, 8, 9 and 10, as recorded in Section 18, to the invalid and if no change is indicated, will initial the statement. If, as a result of differing opinions regarding Sections 7, 8, 9 and 10 only, recorded in Section 18, the invalid is dissatisfied with the statement previously made, remarks of the Medical Board will be added here.

E D Coutts Capt CAMC President.

PLACE Witley

DATE 14-4-19

W H Naylor Capt CAMC } Members

TO BE COMPLETED WHEN TREATMENT IS REFUSED

I, the undersigned ..... understand the nature of the treatment which it is recommended that I should undergo and refuse to accept it.

Witness ..... Signed .....

Should the refusal of the invalid to accept treatment appear to be unreasonable, or should he decline to sign this statement the Board of medical officers should so state.

..... President.

PLACE .....

DATE ..... } Members

APPROVED BY F B Wilson Capt
Assistant Director of Medical Services.

APPROVED BY .....
Director-General of Medical Services.

DATE .....

HEADQUARTERS A.D.M.S. 15 APR 1919 ... WITLEY

A

THIS FORM WILL BE USED FOR ALL RANKS

MEDICAL HISTORY OF AN INVALID

INSTRUCTIONS WHICH MUST BE READ BY MEDICAL OFFICERS

RECORD OFFICE 13 APR 1919 WING C.C. WITLEY

15

1. In using this Form the "Instructions issued for the guidance of Medical Officers serving on Medical Boards" issued by the B.P.C. and instructions issued by Militia H.Q., Ottawa, will be carefully followed.
2. The Medical Officer in charge of the case is responsible for the proper completion of Sections 1 to 17 of this Form and will obtain the signature of the invalid to the "Statement," page 3. The President of the Board of Medical Officers is responsible for the proper completion of sections reserved for recording the "Opinion of the Medical Board."
3. In answering the questions, Medical Officers will carefully obtain and record the invalid's statements concerning his condition. They will distinguish observations made by themselves from hearsay. They will distinctly state the authority for statements not resulting from their personal observation; it must be made clear whether such statements are obtained from the invalid concerned, from witnesses, or from documents, Regimental or otherwise.
4. Special care is required in answering question 9. Read the questions carefully. All questions must be answered.
5. If space provided under any section is insufficient add another sheet. Such sheets must be initialled by the Medical Board.
6. A note will be made of attached papers by the Medical Board under the section "Opinion of Medical Board."
7. Under no circumstances may information other than that in sections 7, 8, 9 and 10 be communicated to the invalid, directly or indirectly.
8. The nomenclature of diseases must be followed, if possible, as described in "List of Diseases" printed in the order in which they appear in the Annual Report on the Health of the Army, published in London (1915), by Messrs. Harrison & Sons.

STATION Witley Surrey DATE 11-4-19

1. 1 (a) Unit 20th Bn (b) Regimental No. 766348 (c) Rank PTE

(d) Surname CAMPBELL (e) Christian name JOHN

(f) Home address 1434 Dufferin St Toronto

(g) Next of Kin Mrs. M. H. Campbell (h) Relationship mother

(i) Address of Next of Kin as above

2. Age last birthday 32 Date of birth Apr. 13 1886

3. Enlistment, or Appointment (if an Officer) (a) Place Toronto (b) Date Dec 6-15

4. Personal description:

(a) Height 5 ft. 5¾ in (b) Weight 132 (est) (stripped) (c) Complexion Medium

(d) Colour of hair lt. brown (e) Colour of eyes gray (f) Identification marks, Scars, etc.

Small scars over both eyes - Scar left thenar eminence - 2 Vacc scars lt. arm

5. Former trade or occupation brick layer

6. Service (The information should be secured from personal documents, but if documents are not available the invalid's statement may be taken and note must be made to that effect. Periods of service in Canada, England, France or elsewhere should be noted).	Years	Days
	3 years	~~4 mos.~~ 129

	Periods From	Periods To
Canada	6-12-15	8-8-16
England	8-8-16	11-10-16
France or other theatres of War	11-10-16	6-4-19

7. Original disease, or injury AMBLYOPIA AND ASTIGMATISM L. EYE

(a) Date of origin Congenital (b) Place of origin Scotland

(c) Cause Unknown

M. F. B. 227.
-11-18.

8. Present disability— (Here state the exact nature of the disability resulting from the disabling conditions: e.g. (a) Weakness—slight, moderate, marked, etc; (b) Loss, complete or partial, of an organ or member, or of its functions; (c) Necessity for rest of the body, or of some of its parts, for therapeutic reasons; (d) Any other restrictions in choice of occupation.)

Slight defect in vision left eye.

9. Present condition—(a) (Before completing this section the invalid should be stripped, and subjected to a thorough physical examination. Important, to be a full description of the present disabling condition, or conditions only. "History" must be recorded in Section 10. Describe all abnormalities, anatomical and functional, contributing to present disability; objective findings to be stated first, then subjective findings.)

Specialists' Report - Witley Camp. 12-4-19

Without glasses

Visual acuity Rt. 6/6

do Lt. 6/18.

Category recommended A.

Defective vision in left eye due to amblyopia and astigmatism.

Condition was present before enlistment and has not been aggravated by service. (Signed) H. A. MacNeil Capt Cons

Subjective:- Moderate defect of vision left eye.

(b) Has the invalid now any affection of the following systems, not described in Section 9 (a) above?
(Answer Yes or No.—if the answer to any part is Yes, give a brief description of the present condition.)

Nervous System no Cardio-Vascular System no (If pulse rate is abnormal, B. P. will be taken.) Genito-Urinary System no (Albumen and Sugar will be excluded.)

Special Senses no Respiratory System no Integumentary System no

Disturbances of Mentality no Digestive System no Muscular System no

Osseous and Joint Systems no Any other general condition no

Urine normal

Hearing - normal.

10. (a) History (of the condition referred to in Section 9 (a).)

Patient states that condition has been present since childhood and has not become worse since service.

10.—(b) (Here give a complete history, as obtained from invalid, with dates of origin, of any affection from which the invalid, has suffered either prior to or since enlistment, and not included in Section 10 (a).)

Nil.

(c) (Here give a description of wounds, scars and deformities.

Small scars over both eyes. Scar left thenar eminence - 2 vacc scars lt arm.

11.—(a) Did the disabling condition have its origin before enlistment? Yes

(b) If so, has it been aggravated by Service? (If aggravated, give a description, as far as it is possible to do so, of the disabling condition at time of enlistment.)

No

12. Was the disability caused, or aggravated; (a) by intemperance, or improper conduct; or (b) by unreasonable refusal to accept treatment? (a) no (b) no.

The regimental documents will be referred to.

(If the answer is in the affirmative, state in percentages, to what extent the patient is incapacitated by that causation or aggravation. In answering this question, conduct sheets should be considered. If treatment has been refused, the circumstances surrounding the refusal should be described on page 4.)

13. What is the probable duration, in months, of the disability or of each of the disabling conditions, if there is more than one? permanent.

14. Treatment (Case reports, general or special, should be secured and attached where possible.)

no

15. Is further treatment in hospital, convalescent home, etc., likely to be of material benefit? no
(If the answer is "yes" state nature of treatment required and probable duration)

16. Can the former trade or occupation be resumed? Yes
(If not, briefly state why)

17. Recommendations nil

C. E. Brain Capt Cons.
Medical Officer by whom the case is brought forward.

STATEMENT OF THE INVALID

(Sections 7, 8, 9 and 10 are to be read to the invalid and either "satisfied" or "not satisfied" struck out).

I, the undersigned 766348 Pte. John Campbell have heard the description of my disability and present condition read, and am satisfied ~~(or not satisfied)~~ with it. (If dissatisfied, statement should follow.)

I complain in addition of

John Campbell Pte Rank.
Signature of invalid examined.

LIST OF DISCHARGE DOCUMENTS.

Attestation Paper, Triplicate	Militia Form W. 23
or Particulars of Recruit	Militia Form W. 133
Field Conduct Sheet	Militia Form W. 178 or A.F.B. 122
Casualty Form	Militia Form W. 54 or A.F.B. 103
Last Pay Certificate	Militia Form W. 44
Certificate that missing documents are unobtainable	
Medical History Sheet	Militia Form B. 313 or A.F.B. 178
Proceedings of Medical Board	M.F.B. 227, A.F.B. 179 or A.F.A. 45
Dental History Sheet	Militia Form B. 465
Medical Report	M. F. W. 129 or D. M. S. 1375
Regimental Conduct Sheet	Militia Form B. 263
Company Conduct Sheet	Militia Form B. 263a

1. Triplicate Attestation Paper (M.F.W. 23), or Particulars of Recruit (M.F.W. 133).
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. 5069a).
6. Field Conduct Sheet (A.F.B. 122)
7. Proceedings on Discharge (J.F.B. 218a)
8. Discharge Certificate (M.F.W. 39)
9. Enclosed in special envelope (260M).
9. Copy of Discharge Certificate (M.F.W. 39a).
10. Dispersal Certificate (C.D. 3).
11. Equipment and Clothing Statement Q.M.G. Form (D.O.S. 2).
12. Last Pay Certificate (P. 851). + Dup
13. Pay Book (A.B. 64).
14. War Service Gratuity (Form M.F.W. 2595).
15. Sundry Documents.

Group B
Checked by No. 15
Date 5/5/19

S.S. CARONIA L'POOL
14.5.19.

Da I
P.9.23
27/11/37

War Service Badge
Class "A" No. 200492

SHORT FORM.

PROCEEDINGS ON DISCHARGE.

(Demobilization.)

M

H

1. No. 766348
2. Rank. Pte
3. Name. Campbell John
4. Unit. 20th Bn.
5. Date of Discharge MAY 26 1919 Place Toronto
6. Reason for Discharge Demobilisation
7. Authority. No. 2, D.D., Part II, D.O. No. 154
8. Proposed Residence after Discharge 1234 Dufferin St. Toronto.

9. CERTIFICATE TO BE SIGNED BY SOLDIER.

I hereby acknowledge that at the undernoted place and date I received my discharge Certificate

M. F. W.?

John Campbell
Signature of Soldier.

10. CONFIRMATION.

The discharge of the above named man is hereby confirmed.

Place TORONTO, ONT.

Date MAY 26 1919

[signature]
For
Signature O.C. No. 2 District Depot.
(O. C. Discharging Unit.)

M.F.B. 218a—300M.-11-18—1772-39-113.