

14.5.18

Proceedings of Court of Inquiry or on men reported Missing on Active Service.....

Attestation Papers..... 1

Declaration of change of name.....

Authority for special enlistments.....

Documents of re-enlisted men.....

Regimental Conduct Sheet.....

Compulsory Stoppages.....

Casualty Forms..... 1

Proceedings on discharge.....

Corps History Sheet.....

Date and No. of Deposit Receipt for Purchase Money and Amount.....

Parchment Certificate.....

Medical Report for Invalids.....

Medical History Sheet..... 1

Proceedings of Regt. Court Martial.....

Copies of Convictions by Civil Power.....

Company Conduct Sheet.....

Clothing Transfer Certificate.....

Inventory of Kit.....

Last Pay Certificate.....

**DISCHARGE DOCUMENTS**

10

Name Campbell, Nicol,  
 Regt. No. 19843 Rank Pte.  
 Corps 10th Bn

04680

R. O. No.....  
 H. Q. No.....



Wound - 25-5-15



2  
 25-20  
 16-20  
 3-22  
 -----  
 2

97B122 — 1 R122  
 R144  
 leave card

mp 120  
 13 20

CAMPBELL, Nicol, Pte.,

649-C-399

19843

*Elig. for 1914-15 star*

10th Bn.

*4947*

Name & Address of Legatee

*Pte. 10th Bn. Medals & Decorations*

Margaret Campbell Booth (sister)

56 Fairfield Street

Govan, Glasgow, Scotland

Name & Address of Next of Kin

*Per A 802340*

*Ho*

*Plaque & Scroll*

*APR 22 1915*

*Reqn. No. 237741*

*Cross 679*

*Single*

*us 20 83.20*

Name & Address of Female Next of Kin

*Rem No. P43019 Memorial*

*Mother died Dec 15<sup>th</sup> 1900.*

*Jed Cross*

M X.

lis  
8.3.20.

Casualty Form—Active Service.

Regiment or Corps 10<sup>th</sup> Battalion

Regimental No. 19843 Rank Pte. Name Campbell, Nicol

Enlisted (a) 27/9/14 Terms of Service (a) one year Service reckons from (a) 27. 9. 14

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				
27.4.15	O.C. Rawal. Pindi Hosp.	G.S.W. Face & Leg.	Convalescent. Camp Boulogne	27/4/15	W3034 F x 43.
2.5.15	O.C. No 3. Gen. Base. Depot.	Taken on strength	Gen. Base. Depot.	2/5/15	S.M. 1960.
25.5.15	6 <sup>th</sup> London. Field Amb.	G.S.W. Bullock.	admitted	24/5/15	a 36.
do	do.	Died of wounds.	6 <sup>th</sup> London. Field Amb.	25/5/15	a 36.

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

(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.

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				

NAME

Campbell Nicol

RANK AND CORPS

Pte

10<sup>th</sup> Battalion

## CABLE

## NATURE OF CASUALTY

NO.

256

X FOLL.

NO.

DATE

NO.	DATE	NATURE OF CASUALTY
C 642	3-5-15	Wounded
R 100	8-5-15	Wounded
C 1800	31-5-15	Died of wounds May 25 <sup>th</sup> /15 also
R 175	2-6-15	Died of Wounds.
A.F.B. 2090a	Rouen, August. 6 <sup>th</sup> 1915.	Died of wounds May. 25 <sup>th</sup> 1915.

LIST No.

HOSPITAL

DATE OF  
ADMISSION

REMARKS

- | LIST No. | HOSPITAL                      | DATE OF<br>ADMISSION | REMARKS                        |
|----------|-------------------------------|----------------------|--------------------------------|
| ✓ 49     | Rep. from Base                |                      | Wounded.                       |
| ✓ 58     | Trans. to C. C. Boulogne Base | 26-4-15              | G. S. W. Face & Leg.           |
| ✓ 72     | Rep. from Base                | 25-5-15              | Died of Wds. G. S. W. Buttock. |

Rank and Name **CAMPBELL Nicol**  
 Regimental No. **19843**  
 Unit **10th Batt.**  
 Date of enlistment **Sept. 27, 1914.**  
 Place of birth **Scotland**  
 Married (Yes or No) **No**  
 If in Permanent Force

Name and Address of Next-of-kin

**CANADIAN PATRIOTIC FUND**

**MRS. BOOTH.  
 56 Fairfield St  
 Govan Glasgow.**

Date and place of discharge

**25.5.15**

Reason for discharge

**Died of Wounds**

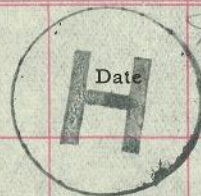
Character on discharge

**N/E R. B. 4**

Promotions or appointments

*R 25-C-264  
 Authority*

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				
3-5-15	W.O.	Reported from Base Wounded.			Ca. Nyls 49.
13.5.15	W.O.	Trans. to Con Camp	Boulogne	26.4.15	Cas Rept #58.
31.5.15	"	Died of Wounds.	Base.	25.5.15	Part II Order #107.
9-6-15	Bud Rep.	Bethune Town Comd.		25.5.15	" " 72.
7-2-15	O.C. 10 <sup>th</sup>	Forfeits 1 day's pay	Lark Hill	5-2-15	Pt II O #944



*B.W. B.K.*

11786



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

Report

Date

From whom received



REMARKS  
Taken from Official Documents

Table with 5 columns: Date, From whom received, Record of promotions/reductions/transfers/casualties, Place, Date, and REMARKS. The table contains several rows of very faint, illegible handwritten entries. The first row has a date of 1914. The table is bordered by red lines.

5m 8

Number. 19843 ..... Rank. Plt- ~~10~~

Surname. CAMPBELL. K

Christian Names. Neil

Unit. 10th Br. Cav. Inf. Theatre of War. France D

Dates of Service. ....

Remarks. ....

Latest Address. Margaret Campbell Booth (sister)  
56 Fairfield St.

Roll No. B Page 787 Govan Glasgow Scot

4 4029. Recd - MAR 3 - 1921

926481 Recd JUL 19 1921

291  
Will of the late 19843 Plé Campbell n  
10 Batt

Reg. no 19843

WILL

I leave all money  
coming to me  
to my sister

M<sup>rs</sup> M. Campbell

~~Booth~~

56 Fairfield

St

Govan

Glasgow

Scotland

Nicol Campbell

Reg. No. 19843

WILL.

I leave all money  
coming to me  
to my sister,

Mrs. M. Campbell,

Booth

56 Fairfield St.,

Govan,

Glasgow,

Scotland.

ATTESTATION PAPER.

1984<sup>3</sup>  
B  
142

No.

Folio.

CANADIAN OVER-SEAS EXPEDITIONARY FORCE.

QUESTIONS TO BE PUT BEFORE ATTESTATION.

(ANSWERS).

No 1984<sup>3</sup> Nicol

Campbell

1. What is your name?.....
2. In what Town, Township or Parish, and in what Country were you born?.....
3. What is the name of your next-of-kin?.....
4. What is the address of your next-of-kin?.....
5. What is the date of your birth?.....
6. What is your Trade or Calling?.....
7. Are you married?.....
8. Are you willing to be vaccinated or re-vaccinated?.....
9. Do you now belong to the Active Militia?.....
10. Have you ever served in any Military Force?..  
If so, state particulars of former Service.
11. Do you understand the nature and terms of your engagement?.....
12. Are you willing to be attested to serve in the CANADIAN OVER-SEAS EXPEDITIONARY FORCE?}

Campbell  
 Oban Argyllshire Scotland  
 (Father, Alexander Campbell)  
 100 St. Patrick's Street  
 19<sup>th</sup> Oct. 1884  
 Baker  
 No  
 Yes  
 No  
 Yes. Royal Engineers 1490  
 Yes  
 Yes  
 Nicol Campbell (Signature of Man).  
 C.W. Robinson (Signature of Witness).

DECLARATION TO BE MADE BY MAN ON ATTESTATION.

I, Nicol 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.

Date Sept 27 1914. Nicol Campbell (Signature of Recruit)  
C.W. Robinson (Signature of Witness)

OATH TO BE TAKEN BY MAN ON ATTESTATION.

I, Nicol 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.

Date Sept 27 1914. Nicol Campbell (Signature of Recruit)  
C.W. Robinson (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 27 day of Sept 1914.

Capt. C.W. Robinson (Signature of Justice)

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

R. Boyle (Approving Officer)

Lt. Col. 10. Bats

# Description of Neil Campbell on Enlistment.

Apparent Age 30 years 10 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 1/2 ins.

Chest measurement { Girth when fully expanded ..... 38 ins.  
 Range of expansion ..... 2 1/2 ins.

Complexion ..... Dark

Eyes ..... Blue

Hair ..... Dark

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

*Scars on back of right hand  
 2 Vaccination marks on left arm*

## 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 27 ..... 1914.

*J. Blidson*

Place ..... Valcartier .....

*LT*

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.

..... Neil 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.

*Capt. C. Robinson* (Signature of Officer)

Date ..... Sept 27 ..... 1914.

MILITIA AND DEFENCE  
ASSIGNED PAY  
OVERSEAS CONTINGENTS

78

12862  
3/24

To Whom *Campbell, K.*  
Address *101 Dempster St  
Greenock,  
Scot.*

By Whom Assigned *Campbell, K.*  
Regtl. No. *19943 (19843)*  
Rank *Pte.*  
Corps *Abay - 10 Batta.*

Rate *\$1000 per m.*

PAYMENTS

Month	Year	Cheque No.	Amt.	REMARKS
Aug.	1914			
Sept.				
Oct.		<i>299</i>	<i>10</i>	<i>Dup: sent to Cplg for future payment.</i>
Nov.				
Dec.				
Jan.	1915			
Feb.				
March				
Apl.				
May				
June				
July				
Aug.				
Sept.				
Oct.				
Nov.				
Dec.				
Jan.	1916			
Feb.				
March				

ENGLISH



NAME CAMPBELL,

*Neol.*  
Neil

✓  
0

Regimental No. 19843.

Name and address of next-of-kin

Unit 10th Battalion

None but wishes his estate to go to

Date of enlistment Sept. 27th, 1914.

the Canadian Patriotic Fund.

Place of birth Scotland

Married (yes or no)

No

Date and place discharged May 25, 1915.

Amount of pay assigned monthly \$

Reason for discharge Died of Wounds

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						
<u>1914</u>																	
<u>Sep 22</u>	<u>Oct 31</u>	<u>40</u>	<u>1-</u>	<u>40</u>	<u>40</u>	<u>10</u>	<u>4-</u>		<u>44</u>	<u>✓</u>		<u>35</u>			<u>35</u>	<u>✓</u>	
<u>Nov 1</u>	<u>Nov 30</u>	<u>30</u>	<u>1-</u>	<u>30</u>	<u>30</u>	<u>10</u>	<u>3</u>	<u>9</u>	<u>42</u>	<u>✓</u>		<u>25</u>			<u>25</u>	<u>✓</u>	
<u>1/12</u>	<u>31/12</u>	<u>31</u>	<u>1.</u>	<u>31</u>	<u>31</u>	<u>10</u>	<u>3</u>	<u>10</u>	<u>51</u>	<u>✓</u>		<u>50</u>			<u>50</u>	<u>✓</u>	
<u>1/1</u>	<u>2/1</u>	<u>31</u>	<u>✓</u>	<u>31</u>	<u>✓</u>	<u>✓</u>	<u>3</u>	<u>10</u>	<u>35</u>	<u>20</u>	<u>✓</u>	<u>25</u>			<u>25</u>	<u>✓</u>	
<u>1.2.15.</u>	<u>28.2</u>	<u>28</u>	<u>✓</u>	<u>28</u>	<u>28</u>	<u>✓</u>	<u>2</u>	<u>80</u>	<u>10</u>	<u>20</u>	<u>✓</u>						
<u>1.3.15.</u>	<u>31.3</u>	<u>31</u>	<u>✓</u>	<u>31</u>	<u>31</u>	<u>✓</u>	<u>3</u>	<u>10</u>	<u>41</u>	<u>75</u>	<u>✓</u>	<u>9</u>			<u>9</u>	<u>✓</u>	
<u>1.4.15</u>	<u>30.4.</u>	<u>30</u>	<u>✓</u>	<u>30</u>	<u>30</u>	<u>✓</u>	<u>3</u>	<u>66</u>	<u>10</u>	<u>99</u>	<u>10.1</u>	<u>6</u>		<u>1</u>	<u>7</u>	<u>10.1</u>	<u>1 day pay Febr. 1914.</u>
<u>May 1</u>	<u>May 25</u>	<u>25</u>	<u>✓</u>	<u>25</u>	<u>25</u>	<u>✓</u>	<u>2</u>	<u>50</u>	<u>93</u>	<u>119</u>	<u>50</u>	<u>6</u>			<u>6</u>	<u>6</u>	<u>Died of Wounds 25.5</u>
								<u>113.50</u>	<u>✓</u>								<u>Suppl</u>
								<u>09</u>	<u>✓</u>								
								<u>417</u>	<u>117</u>	<u>76</u>							
								<u>117</u>	<u>76</u>			<u>117</u>	<u>76</u>		<u>117</u>	<u>76</u>	<u>pd by cheque 4340.</u>

Advanced Branch  
Report 009 ✓

*Advances Branch.  
Adjustment of Arch.*

*NE Arch Decr.  
Jan 18*

*Settled*

195  
195 195  
Statement of  
FEB 25 1915  
Account rendered

195  
Statement of  
OCT 8 1915  
Account rendered

*1 day pay Febr. 1914.  
Died of Wounds 25.5  
Suppl  
R.  
pd by cheque 4340.  
Tgr. 11-1915.  
1-11-1915  
Roll  
P. Arch Letter Dept  
On 76 mm 10250  
3/17/17.*



No. 19843 RANK Pte.

NAME Campbell Nicol

T. O. S.

UNIT

103 rd. Regt. Calgary Rifles.

M. D. 13.

PAID FROM	PAID TO	SIG. OR REC'T	PROMOTIONS, TRANSFERS, DISCHARGES, ETC.	
			PARTICULARS	AUTHORITY
1914. Aug. 25	1914. Aug. 31	✓	now shown on 10 <sup>th</sup> Bn. <sup>paylist</sup> 10 <sup>th</sup> Bn. Sept. paylist.	
Sept. 1	Sept. 21	✓		
Sept. 22	Oct. 31	O. S.		

UNIT SAILED  
OCT 3 1914

WILL

In the event of my death I leave the  
whole of my property + effects to my  
wife  
Miss J ~~Wick~~ Campbell

174 Bedford Rd  
Booth

Liverpool  
Eng Land

John D Campbell  
Pte No 25934

~~November 7<sup>th</sup> 1914~~

Sept 22<sup>nd</sup> 15.

Sub as to will from  
Francis wife apparently

Y.Y.

ESTATES BRANCH  
sept AUG 11 1919  
MILITIA DEPT.

19843. 142

# MEDICAL HISTORY SHEET.

Surname Campbell Christian Name Nicol

Examined	on <u>21<sup>st</sup></u> day of <u>Sept</u> 1914	Approved by <u>G. G. Gordon</u>		
	at <u>Valcartier</u>	Rank <u>Capt</u> M.O.		
Birthplace	City or Town <u>Ohan</u>	Date	Fit or Unfit	
	Country <u>Argyleshire</u>			EXAMINED FOR RE-ENGAGEMENT,
Apparent age <u>32</u>				
Trade or occupation <u>Boiler maker</u>			M.O.	
Height <u>5</u> Feet <u>9 1/2</u> Inches			M.O.	
Weight <u>156</u> Lbs.			M.O.	
Chest measurement	Minimum <u>36</u> inches		M.O.	
	Maximum expansion <u>2 1/2</u> inches		M.O.	
Physical development <u>Fair. Good</u>			M.O.	
Small-Pox Marks			M.O.	
Vaccination Marks	Arm Right Left	Date	Result	
	Number <u>2</u> ✓			VACCINATIONS.
When Vaccinated last <u>Oct. 1914</u>		<u>Oct. 1914</u>	<u>+</u>	
(a) Marks indicating congenital peculiarities or previous disease <u>Scar on back of Right Hand</u> ✓				M.O.
(b) Slight defects but not sufficient to cause rejection				M.O.
				M.O.
				M.O.
				M.O.

Enlisted on 21<sup>st</sup> day of Sept August 1914 at Calcutta Calgary

	CORPS.	REG'T'L NUMBER.	HABITS.	DATE.
Joined on enlistment	<u>103 rd. Regt</u>	<u>19843</u>	<u>Drunk</u>	<u>21 Aug</u>
Transferred to.....	<u>10th Batt.</u>		<u>Smoke,</u>	
			<u>Moderate.</u>	

## 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.

Entries in Red Ink made from Attestation Sheets  
B. M. Shaw  
 JUN / 7 1915  
 for D. D. M. S.

Surname.....

Christian Name.....

STATION.	Date of Arrival at the Station.	DATES OF						DISEASE.	Number of days in Hospital.	Remarks on nature of the disease : how induced : if mild or severe : if completely recovered from ; whether any particular treatment was adopted. In venereal cases state nature of primary disease, and whether mercury has been given. If an accident, state whether it occurred on duty and whether a Court of inquiry was held. Date of issue and particulars of artificial teeth or surgical appliances supplied. Particulars of prophylactic inoculations.	Signature of Medical Officer.
		Admission into Hospital.			Discharge from Hospital.						
		Day	Month	Year	Day	Month	Year				

*Faint handwritten text, possibly '100' and '100'.*

Surname

Christian Name or Names

Reg. No.

Campbell

N.

19843

Rank

Unit

Co.

Troop

Batty.

Pte  
Hospital

10 Battrn

Date of Admission

Transferred

To C. C. Boulogne Base

Hosp. 26.4.15

Hosp.

Hosp.

Hosp.

Diagnosis

G. S. W. Face &amp; Leg.

(1)  
Later Diagnosis (if changed)

Died of Wounds } 25.5.15

(2)

(3)

G. S. W. Buttock }

Additional Diagnoses: If more than one state present

DISPOSITION

Date

C.L. 3.5.15 # 49

" 13.5.15 58

" 31.5.15 72

REMARKS

Reported from Base  
Wounded

A.M.D. 2 DEPT.

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

# EPITOME OF HOSPITAL TREATMENT.

Hospital

Adm.

1.

2.

3.

4.

5.

6.

7.



Name CAMPBELL N. Rank Pte.

Reg. No. 19843

10<sup>th</sup>,  
Unit ~~8th~~. BATTALION

File No. R.L. 25.C. 264.

Next of Kin Mrs. Booth, 56 Fairfield St, Govan, Glasgow

Date	Movement	Place	Casualty	List No.	Notified N/K O	W.O. List
25-5-15	DIED OF WOUNDS	No. 6 London	Fld. Amb.	72	11/6/15	11/6/15
			<i>J.H. 2</i>			



C. S. 7.	NAME. <i>Campbell, Michel.</i>	RANK.	REC. FILE. <span style="color: red;">X</span>
		No.	
		CORPS.	H. Q. FILE.

ENLISTMENT, PLACE.

DATE.

*struck off strength.*  
DISCHARGE, PLACE.

*Valcartier, DATE 5-9-14.*

REASON.

*Med. unfit. (Defective eye-sight.)*

ADDRESS ON DISCHARGE.

DOCUMENTS.

*a. P. on file.*

*1st. Contingent.*

*more info please  
S.H.*

## CHARGED OUT

## RETURNED

## CHARGED OUT

## RETURNED

TO

DATE

BY

RECEIVED  
BY

DATE

TO

DATE

BY

RECEIVED  
BY

DATE