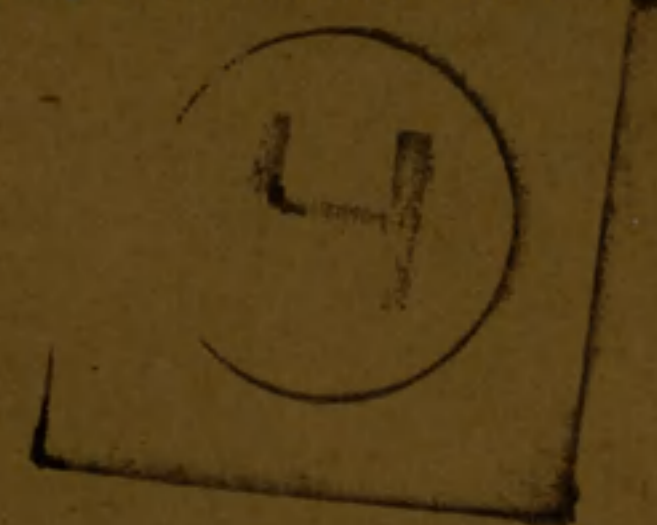


Proceedings of Court of Inquiry or on men reported Missing on Active Service.....  
 Attestation Papers..... #4  
 Declaration of change of name.....  
 Authority for special enlistments.....  
 Documents of re-enlisted men.....  
 Regimental Conduct Sheet.....  
 Compulsory Stoppages.....  
 Casualty 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..... 1  
 Clothing Transfer Certificate.....  
 Inventory of Kit.....  
 Last Pay Certificate.....

50  
13

Name CAMPBELL, DAVID *med.*  
 Regt. No. 24677 Rank Pte. *Duncan*  
 Corps 13<sup>th</sup> Battn.

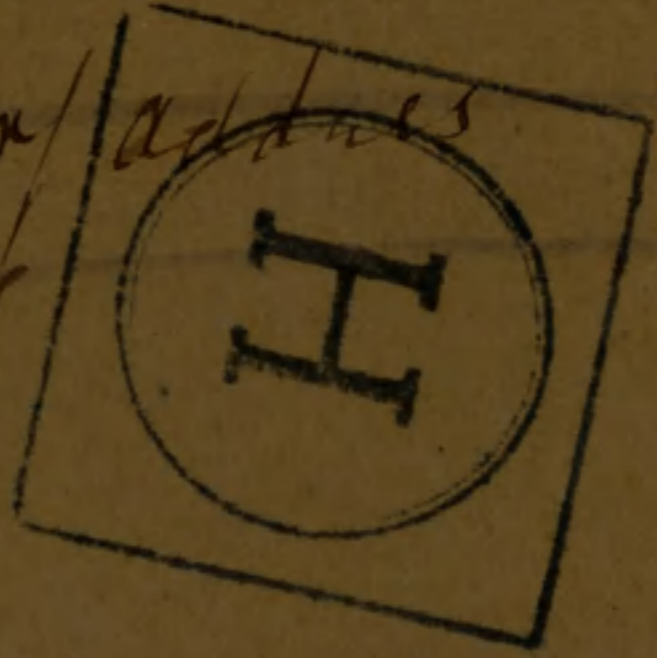
R. O. No.....  
 H. Q. No.....



03579

*Killed in action 20-23/5/15.*

*Cards / Only removed 14-1-18  
 Change of address  
 Casualty*

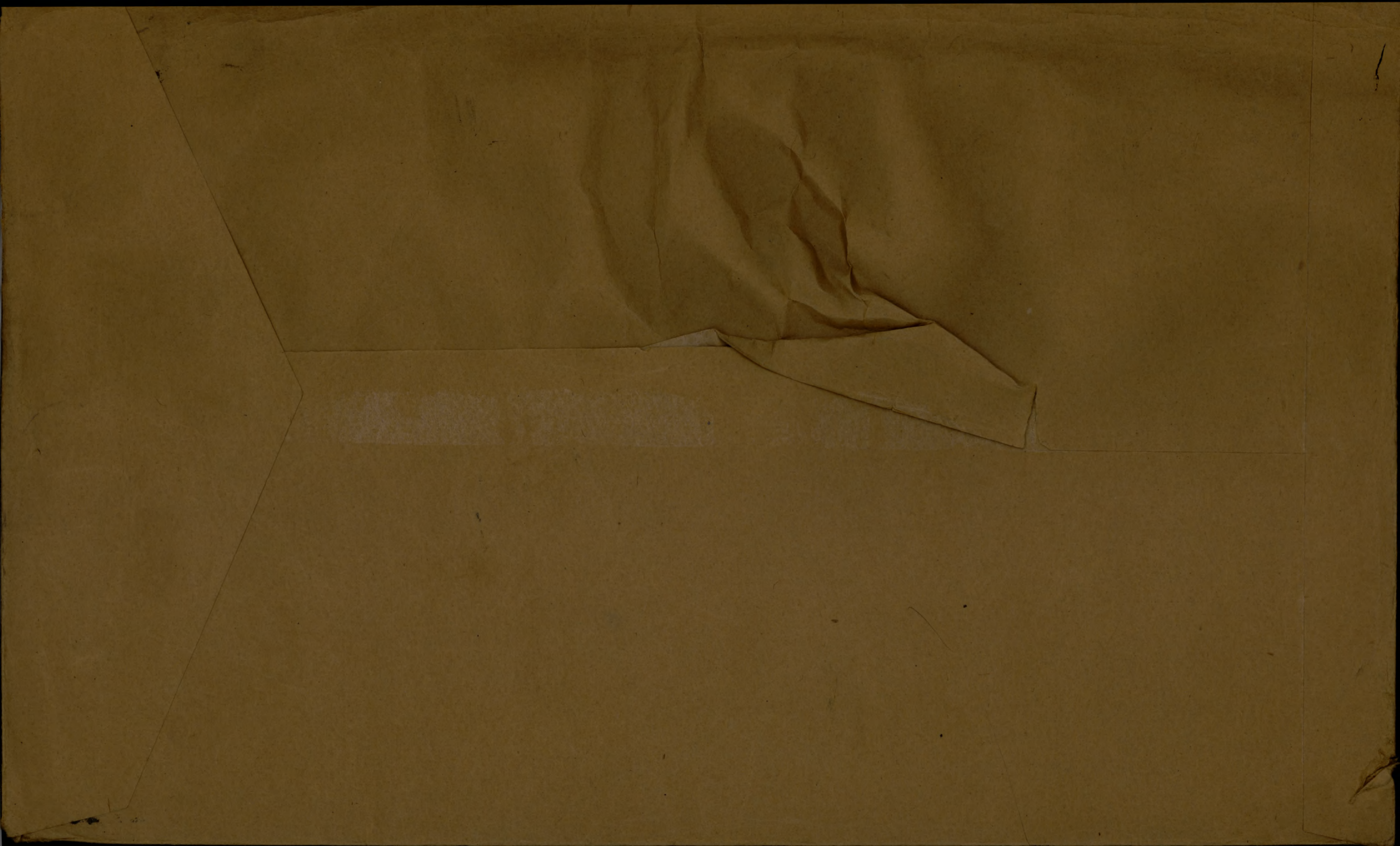


*A. F. B. 122 1.*

*PC  
 A. F. B. 122*

*25-22.  
 10-22  
 3-22*

*M.X.  
 12/2/20  
 mab.*



Regt No 24677

# ATTESTATION PAPER.

No.

Folio. 1600

## CANADIAN OVER-SEAS EXPEDITIONARY FORCE.

### QUESTIONS TO BE PUT BEFORE ATTESTATION.

(ANSWERS).

- 1. What is your name?..... J. McJ. Campbell.
- 2. In what Town, Township or Parish, and in what Country were you born?..... Glasgow Scotland
- 3. What is the name of your next-of-kin?..... Mrs. M. Campbell
- 4. What is the address of your next-of-kin?..... 1259 Jules Verne St. Montreal.
- 5. What is the date of your birth?..... Dec 1882
- 6. What is your Trade or Calling?..... Machinist
- 7. Are you married?..... No.
- 8. Are you willing to be vaccinated or re-vaccinated?..... Yes
- 9. Do you now belong to the Active Militia?..... Yes R.H.C.
- 10. Have you ever served in any Military Force?.. 3 Years Black Watch 1899/02  
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

D. McJ. Campbell (Signature of Man).

J. Murray Morrison (Signature of Witness).

### DECLARATION TO BE MADE BY MAN ON ATTESTATION.

I, D. McJ. 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.

D. McJ. Campbell (Signature of Recruit)

Date Sept 23 1914. J. Murray Morrison (Signature of Witness)

### OATH TO BE TAKEN BY MAN ON ATTESTATION.

I, D. McJ. 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.

D. McJ. Campbell (Signature of Recruit)

Date Sept 23 1914. J. Murray Morrison (Signature of Witness)

### CERTIFICATE OF MAGISTRATE. or Officer

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..... this..... day of..... 1914.

J. Buchanan (Signature of Justice) or Officer

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

J. Buchanan (Approving Officer)

5 Batt R N.

13 MB

Description of D. McD. Campbell on Enlistment.

Apparent Age 31 years 4 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. 6 1/2 ins.

Chest measurement { Girth when fully expanded 37 1/2 ins.  
Range of expansion 4 1/2 ins.

Complexion Fair

Eyes Blue

Hair Light Brown

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

*2 Vaccination Marks left on  
1 large mole left haffack  
legament*

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 August 29<sup>th</sup> 1914.

Place Valcartier

[Signature]  
Lt. A. M. C.  
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. *or boy*

D. McD. 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.

[Signature] (Signature of Officer)

Date Sept 23<sup>rd</sup> 1914.

**FIELD SERVICE.**

**Report of Death of a Soldier to be forwarded to the War Office with the least possible delay.**

REGIMENT } 13th. Battalion. Squadron, Troop, Battery }  
or } CORPS } or Company }

Regtl. No. 24677. Rank Private.

Name Campbell D. McD.

Date and Place of Birth \_\_\_\_\_

Trade or Calling \_\_\_\_\_

Enlisted—When and Where \_\_\_\_\_

Died { Date During operations 20th May to 23rd. May.  
Place In the Field.  
Cause of Death\* Killed in Action.

\* Specially state if killed in action, or died from wounds received in action, or from illness due to field operations or to fatigue, privation, or exposure while on military duty, or from injury while on military duty.

Whether he leaves a will or not { (a) in Pay Book Yes.  
(b) in Small Book No.  
(c) as a separate document No.

(Any will left should be forwarded with this Report.)

Whether in receipt of an annuity }  
for meritorious service, or }  
distinguished conduct }

Medals, if entitled to any \_\_\_\_\_

Whether known or supposed }  
to have been married }

If married, whether on Married }  
Establishment }

Name and address of widow }  
and children, if any }

Latest information as }  
to Kin (if any known) }  
with address }

Small Book to be forwarded with this report, if forthcoming.

Signature of Officer in charge } G. K. Ashby  
of Base Record Office } Lieut. for  
Lt. Col.,

Station and Date Rouen. July 7th. 1915.

NOTE.—A duplicate of this Report is to be forwarded to the Accountant at the Base (see Field Service Regulations, Part II.), together with the deceased's Pay Book (after withdrawal of any will from the latter).

FIELD SERVICE

Report of Death of a Soldier to be forwarded to the War Office with the least possible delay.

REGIMENT or CORPS  
BATTALION or COMPANY  
PLATOON or SECTION

Name of Soldier

Rank

Service Number

Place of Birth

Trade or Calling

Place of Death

Place of Burial

Cause of Death

Whether he leaves a will or not (a) in full book (b) in small book (c) as a separate document

Any will left should be forwarded with this Report.

Whether in receipt of an annuity

Whether he is entitled to any gratuity

Whether he is entitled to any pension

Name and address of widow

Name and address of next of kin

Signature of Officer in Charge

Date

Printed Name and Rank of Officer

This form is to be filled in by the commanding officer of the unit in which the soldier died, and should be forwarded to the War Office with the least possible delay.

# MEDICAL HISTORY SHEET.

Surname Campbell Christian Name Duncan McDuff

Examined { on <u>29</u> day of <u>Aug</u> 191 <u>4</u> at <u>Valcartier</u> Birthplace { City or Town <u>Glasgow</u> County <u>Scot.</u> Apparent age <u>31-4</u> Trade or occupation <u>machinist</u> Height <u>5</u> Feet <u>6 1/4</u> Inches. Weight <u>158</u> Lbs. Chest measurement { Minimum <u>33</u> inches. Maximum expansion <u>37</u> inches. Physical development <u>Good</u> Small-Pox Marks <u>None</u> Vaccination Marks { Arm <u>2</u> Right. <u>4</u> Left. Number <u>2</u> <u>Six</u> <u>4</u> When Vaccinated last <u>6 Oct</u> <u>1914</u> (a) Marks indicating congenital peculiarities or previous disease <u>None over left eye &amp; high</u> (b) Slight defects but not sufficient to cause rejection	Approved by <u>E. R. Brown</u> Rank <u>Major</u> M.O. <table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th>Date</th> <th>Fit or Unfit</th> <th>EXAMINED FOR RE-ENGAGEMENT,</th> </tr> </thead> <tbody> <tr><td> </td><td> </td><td>M.O.</td></tr> <tr><td> </td><td> </td><td>M.O.</td></tr> <tr><td> </td><td> </td><td>M.O.</td></tr> <tr><td> </td><td> </td><td>M.O.</td></tr> <tr><td> </td><td> </td><td>M.O.</td></tr> <tr><td> </td><td> </td><td>M.O.</td></tr> <tr><td> </td><td> </td><td>M.O.</td></tr> </tbody> </table> <table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th>Date</th> <th>Result</th> <th>VACCINATIONS.</th> </tr> </thead> <tbody> <tr> <td><u>1914 Oct.</u></td> <td> </td> <td><u>E. R. B.</u> M.O.</td> </tr> <tr><td> </td><td> </td><td>M.O.</td></tr> <tr><td> </td><td> </td><td>M.O.</td></tr> </tbody> </table> <table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th>Date</th> <th>Result</th> <th>ANTI-TYPHOID INOCULATIONS, ETC.</th> </tr> </thead> <tbody> <tr> <td><u>6 Oct</u></td> <td> </td> <td> </td> </tr> <tr><td> </td><td> </td><td>M.O.</td></tr> <tr><td> </td><td> </td><td>M.O.</td></tr> <tr><td> </td><td> </td><td>M.O.</td></tr> </tbody> </table>	Date	Fit or Unfit	EXAMINED FOR RE-ENGAGEMENT,			M.O.			M.O.			M.O.			M.O.			M.O.			M.O.			M.O.	Date	Result	VACCINATIONS.	<u>1914 Oct.</u>		<u>E. R. B.</u> M.O.			M.O.			M.O.	Date	Result	ANTI-TYPHOID INOCULATIONS, ETC.	<u>6 Oct</u>					M.O.			M.O.			M.O.
Date	Fit or Unfit	EXAMINED FOR RE-ENGAGEMENT,																																																		
		M.O.																																																		
		M.O.																																																		
		M.O.																																																		
		M.O.																																																		
		M.O.																																																		
		M.O.																																																		
		M.O.																																																		
Date	Result	VACCINATIONS.																																																		
<u>1914 Oct.</u>		<u>E. R. B.</u> M.O.																																																		
		M.O.																																																		
		M.O.																																																		
Date	Result	ANTI-TYPHOID INOCULATIONS, ETC.																																																		
<u>6 Oct</u>																																																				
		M.O.																																																		
		M.O.																																																		
		M.O.																																																		

Enlisted on 23 day of Sept 1914 at Valcartier

CORPS.	REG'TL NUMBER.	HABITS.	DATE.
Joined on enlistment <u>5th R. H. C.</u> <u>13th Bn 3rd Bde</u>	<u>24677</u>	<u>Good.</u>	
Transferred to.. ..			

## EXAMINED OR DISCHARGED BY A MEDICAL BOARD.

STATION.	DATE.	DISEASE.	RESULT.

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





Casualty Form—Active Service.

Regiment or Corps 15th Canadian Battalion,  
The Royal Highlanders of Canada.

Regimental No. 24677 Rank Pte Name Campbell, David McE

Enlisted (a) Aug. 29/14 Terms of Service (a) \_\_\_\_\_ Service reckons from (a) \_\_\_\_\_

Date of promotion to present rank } \_\_\_\_\_ Date of appointment to lance rank } \_\_\_\_\_ Numerical position on } \_\_\_\_\_  
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				
<u>28/5/15</u>	<u>O.C. 13<sup>th</sup> Batta</u>	<u>Killed in Action</u>	<u>The Field</u>	<u>20-23/5/15</u>	<u>(File K4-7-13)</u>

*[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 D. Mc D. ✓

Regimental No. 24677

Name and address of next-of-kin

Unit 13th Battalion.

Mrs. M. Campbell,

Date of enlistment 23rd Sept. 1914.

1259, Jules Verne St., Montreal. P.Q.

Place of birth. Glasgow. Scotland.

Married (yes or no) No

Date and place discharged

*Killed in action*

Amount of pay assigned monthly \$ 20<sup>00</sup>

Reason for discharge

*23/5/15*

To whom payable

*next of kin*

Character on discharge

*Canadian Assjt*

*Agrees with A.P. List 18 - 28/3/16*

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						
22.9.14	31.10.14	40	1 <sup>00</sup>	40	40	1 <sup>04</sup>	4		44	✓		24	20		44	✓	
1.11.14	30.11.14	30	1	30	30	10	3		33	✓		13	20		33	✓	
1.12.14	31.12.14	31	1	31	31	10	3 10		34 10	✓		14	20		34	✓	
1.1.15	31.1.15	31	1	31	31	10	3 10	10	34 20	✓		10	20		30	✓	
1.2.15	28.2.15	28	1	28	28	10	2 80	4 50	35	✓			20		30	✓	
1.3.15	31.3.15	31	1	31	31	10	3 10	15	49 10	✓			20		20	✓	
1/4/15	30/4/15	30	1	30	30	10	3	29 10	62 10	✓		3	20		23	✓	
1/5/15	31/5/15	31	1	31	31	10	3 10	34 10	73 20	✓		6	20		26	✓	
								47 20	47 20	✓					8 80	8 80	✓
								0 38 40		✓							✓
N.E Dec				Exchange.				1 87 40	27								✓
				Cash in Eff.				2 78 43	05								✓

*S.P. paid: 1.6.15*  
*Killed 23.5.15 8 days*  
*or credit*  
*hair 73*  
*43 05 43 05 Transferred to Ottawa for Settlement*

PAY OFFICE, N. E. BRANCH  
AUG 31 1915  
CANADIAN CONTINGENTS  
*ay*  
*R*

CHECKED BY.....  
DATE.....

Cash found in effects *278*

Statement of  
MAR 29 1916  
Adjusted



MILITIA AND DEFENCE  
ASSIGNED PAY  
OVERSEAS CONTINGENTS

635

1-28-62  
June

To Whom Campbell, Mrs. Wm.

By Whom Assigned Campbell, D. Mack

Address 1253 Jules Verne  
Mile End, Montreal  
One.

Regtl. No. 24704, 24677

Rank Pte.

Corps F Coy - 13 Batta.

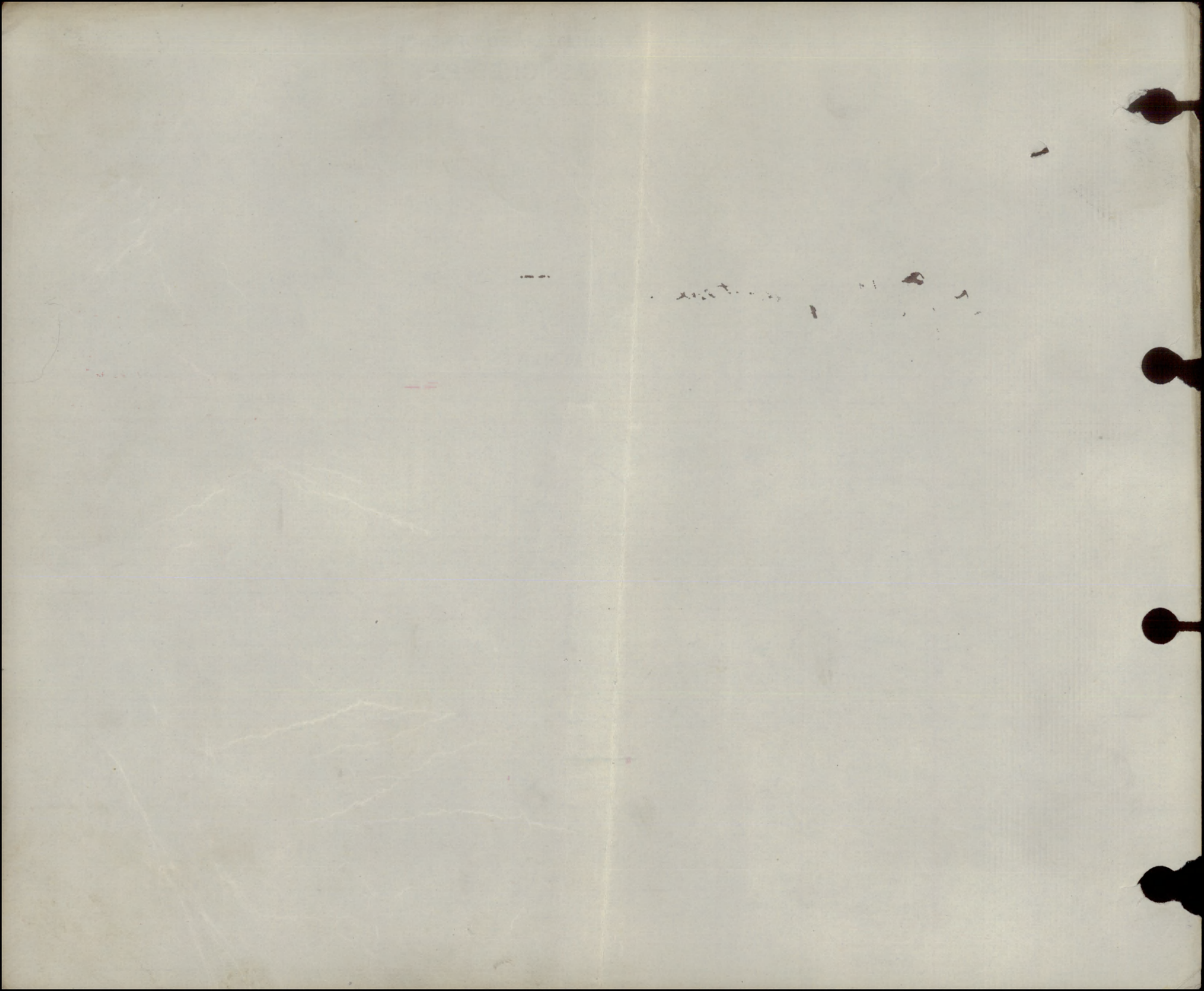
Rate \$20<sup>00</sup> per mo.

Casualties

PAYMENTS

This etc.  
previously  
obs upon  
J.B.

Month	Year	Cheque No.	Amt.	REMARKS
Aug.	1914			
Sept.				
Oct.		6740	20	
Nov.		82200	20	
Dec.		103270	20	
Jan.	1915	03887	20	
Feb.		135365	20	
March		9195	20	
Apl.		11244	20	
May		H204	20	
June		99696	20	Killed in action
July				
Aug.				
Sept.				
Oct.				
Nov.				
Dec.				
Jan.	1916			
Feb.				
March				



Surname

Christian Name or Names

Reg. No.

*Campbell*

*D. Mac.D.*

*2467*

Rank

Unit

Co.

Troop

Batty.

*Pte*  
Hospital

*13 Battn*

Date of Admission

Transferred

Hosp.

Hosp.

Hosp.

Hosp.

Diagnosis

*Killed in Action 20-23-5-15*

(1)  
Later Diagnosis (if changed)

(2)

(3)

Additional Diagnoses: If more than one state present

A.M.D. 2 DEPT.

DISPOSITION

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

Date

*C.L. 31. 5. 15 # 43*

REMARKS

*Reported from Base*

EPITOME OF HOSPITAL TREATMENT.

Hospital

Adm.

1.

2.

3.

4.

5.

6.

7.



92

Pte

~~B~~  
~~X~~

Number. 24677 Rank.....

Surname. CAMPBELL.....

~~V~~

Christian Names. David Mc L.....

Unit. 13th Bn Can Div Theatre of War. France.....

Dates of Service.....

D

Remarks.....

mother

Latest Address. Mrs Wm Campbell.....

1259 Jules Berne St.....

Mill End, Montreal  
Lubee

Roll No. B Page 530

Ms 29107 del

NAME Campbell, W. Mc W.

H. Q. FILE No. 649-

REG'T'L. No. 24677

RANK AND CORPS Pte. 13th Batt.

CABLE

NATURE OF CASUALTY

No.

DATE

C. 1780 31/5/15  
B2090A Bowen 7/7/15

Killed in action between  
May 20th & 23, 1915.  
Do.

NO. 199  
FOLL.

LIST No.

HOSPITAL

DATE OF  
ADMISSION

REMARKS

✓ 73. Reported from Base. 20-23-5-15. Killed in action.

No. 24677.

RANK

*H.*

NAME

*Campbell D.*

*med*

T. O. S.

UNIT

*5th Regt.*

*Royal Highlrs. of Law.*

M. D.

*4.*

PAID

PAID

SIG.  
OR  
REC'T

PROMOTIONS, TRANSFERS, DISCHARGES, ETC.

FROM

TO

PARTICULARS

AUTHORITY

*1914.*

*1914.*

*Aug. 24. Aug. 24.  
Aug. 25 Sept 21  
Sept 22. Oct. 31*

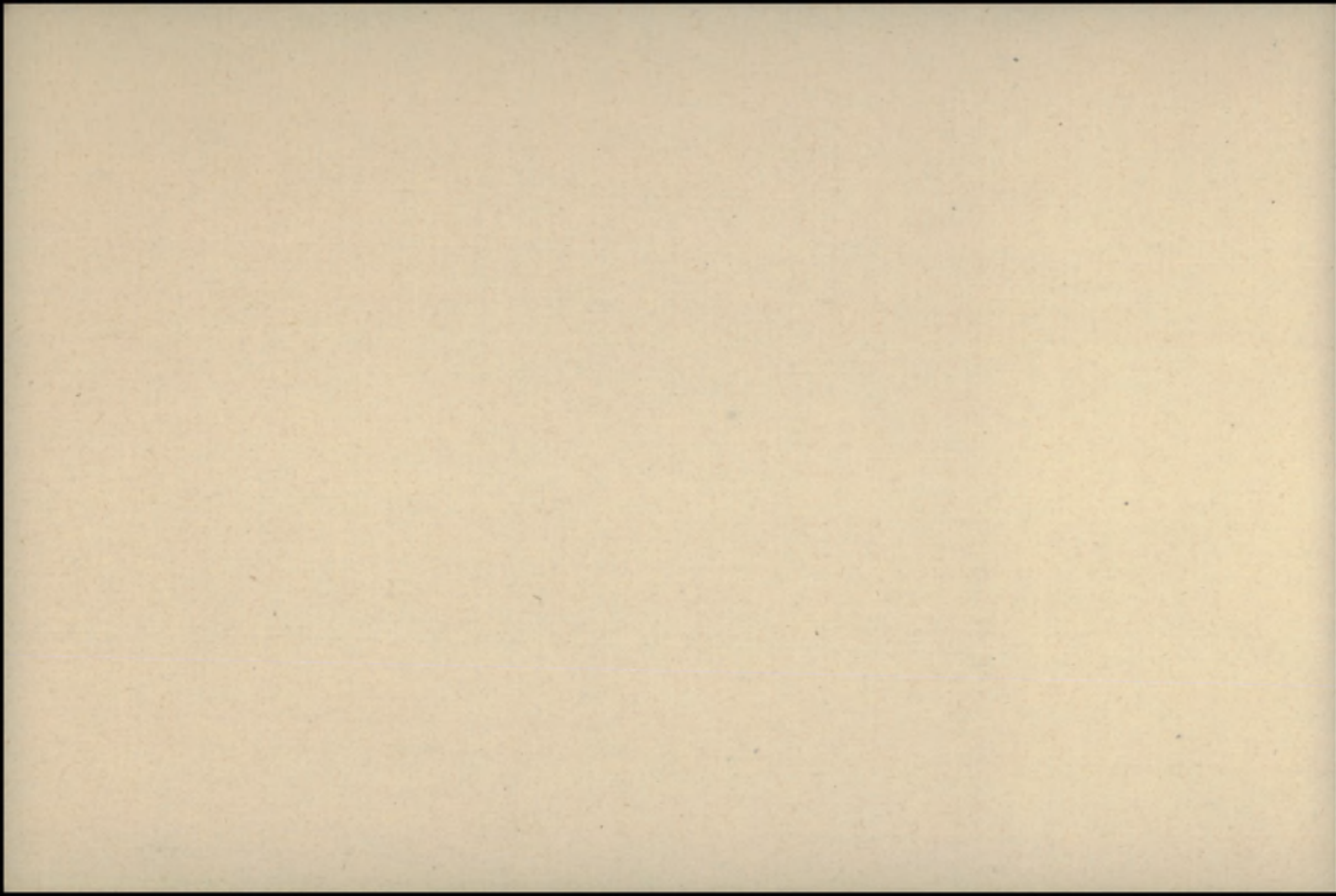
*no.*

*✓*

*✓*

*Now shown on 13th Regt pay lists.*

UNIT SAILED  
OCT 3 1914



CAMPBELL D., McD., Pte.,

649. C 517 *W. G.*

24677

*Reg for 14/5 star*

1st Bn.

*medal +  
Decorations*

Name & Address of Legatee

*13th Bn.*

*Mrs. William Campbell (m)  
1259 Jules Verne St.  
Mile End, Montreal.  
Que*

Name & Address of Next of Kin

*(Ser. # 765287) Scroll as above...*

*Pt S.  
Cross  
664*

Scroll Desp. *JUN 20 1921*

Reg. No. *2.47791*

Plaque Desp. *OCT 14 1922*

Reg. No. *P 11737*

Name & Address of Female Next of Kin

*Mrs. William Campbell (m)*

*memorial  
Cross*

*Pt S.  
30.1.20.  
664*

$$\begin{array}{r} 146 \\ + 76 \\ \hline 222 \end{array}$$

W



Name CAMPBELL, D. McD. Rank Pte.

Reg. No. 24677.

Unit 13th Battrn.

R.L. 25-C-411

Next of Kin

Canada.

Date	Movement	Place	Casualty	List No.	Notified N/K O.	W.O. List
1915. May 20/23	Reported from	Base	<u>Killed in Action.</u>	73		D.C.S. 4/9 5/24/5





Rank and Name CAMPBELL, D. McD.

Ensl. # 8133

Regimental No. 24677

Name and Address of Next-of-kin

Unit 13th Battalion

Mrs. M. Campbell,  
1259, Jules Verne St., Montreal, P.Q. ✓

Date of enlistment 23rd Sept. 1914.

Place of birth Glasgow. Scotland.

Married (Yes or No) No.

Date and place of discharge

If in Permanent Force

Reason for discharge

*File 25.C.411 104.93 attached*

Character on discharge

Promotions or appointments

*Killed in action.*

Date	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				
			<i>Embarked</i>			
<i>31.5.15</i>	<i>W.O.</i>	<i>Killed in action</i>		<i>Base</i>	<i>20.5.15</i>	<i>Cas. Rep. 73. D.V.</i>
<i>27.5.15</i>	<i>W.O.</i>	<i>Correct date of death</i>		<i>In the Field</i>	<i>20.23/5/15</i>	<i>Army Form B0090a</i>
				<i>do</i>	<i>20.23/5/15</i>	<i>Daily Cas. List 79. p 5</i>