

4/3
229

- Proceedings of Court of Inquiry or on men reported Missing on Active Service.....
- Attestation Papers.....
- Declaration of change of name.....
- Authority for special enlistments.....
- Documents of re-enlisted men.....
- Regimental Conduct Sheet.....
- Compulsory Stoppages.....
- Casualty Forms.....
- 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.....
- Proceedings of Regt. Court Martial.....
- Copies of Convictions by Civil Power.....
- Company Conduct Sheet.....
- Clothing Transfer Certificate.....
- Inventory of Kit.....
- Last Pay Certificate.....

(S)

15/1
(M)

DISCHARGE DOCUMENTS

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

Name Campbell Robert

Regt. No. 445999 Rank pte

Corps 55th Bn. 'C' Coy.

Sl. in A. 9-10-16.

04785

(H)

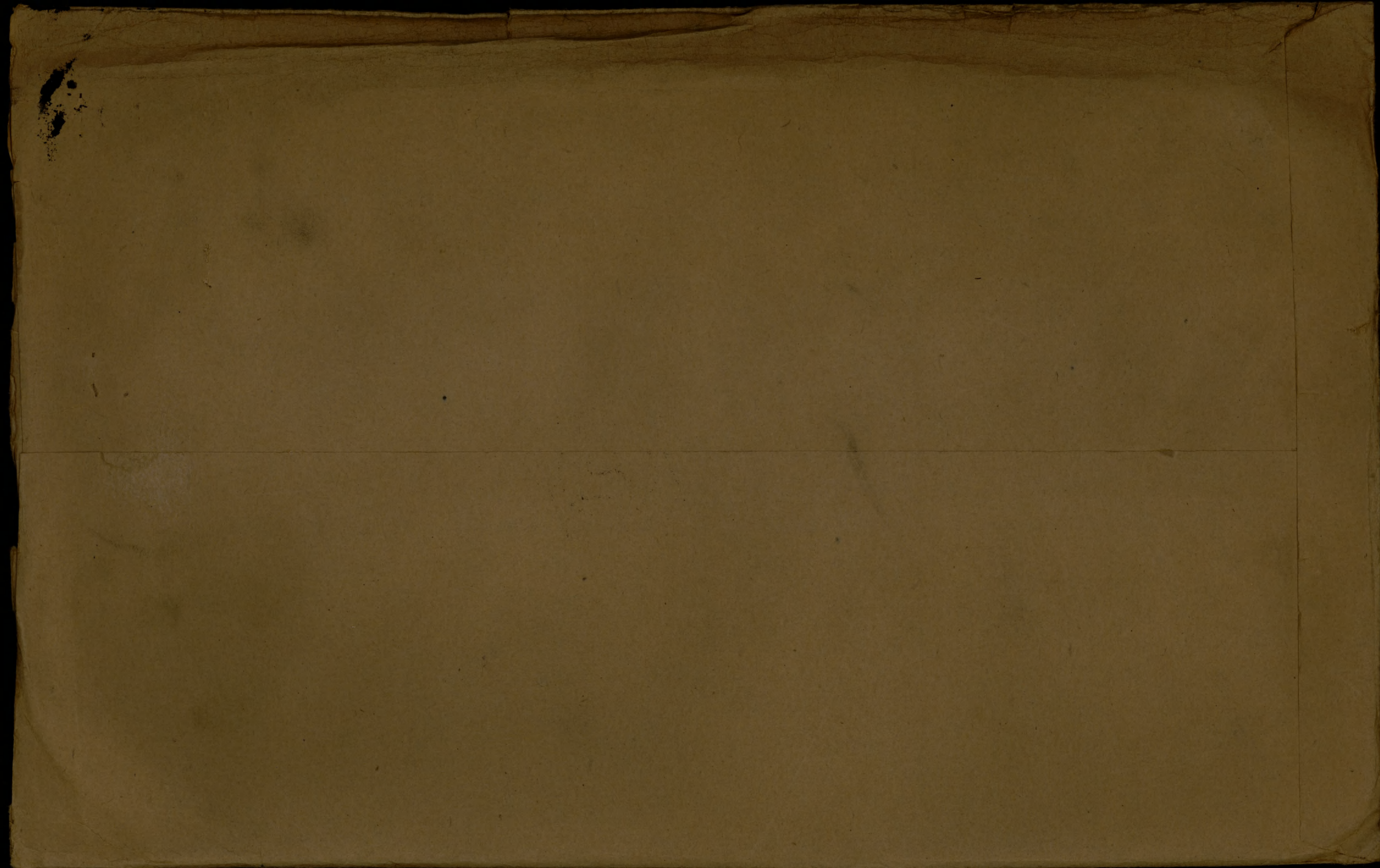
(H)

2
21-22
16-22
3-22

2

A. J. B. 122-1
A. J. B. 178-1
R. 149-1
Hessner

M. X. 8/3/20 sup



E 723
15th Bata
G.I. 18221

Original

445999
~~444211~~
No. ~~44211~~

ATTESTATION PAPER.

Folio. 6

CANADIAN OVER-SEAS EXPEDITIONARY FORCE.

QUESTIONS TO BE PUT BEFORE ATTESTATION.
(ANSWERS).

- 1. What is your name?..... Robert Campbell
- 2. In what Town, Township or Parish, and in what Country were you born?..... Bonventure, Bonv, Co, P.Q
- 3. What is the name of your next-of-kin?..... John Campbell,
- 4. What is the address of your next-of-kin?..... Bonventure, Bonv, Co, P. Q
- 5. What is the date of your birth?..... December 6th, 1897,
- 6. What is your Trade or Calling?..... Labourer
- 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

Robert Campbell (Signature of Man).
Gaballane (Signature of Witness).

DECLARATION TO BE MADE BY MAN ON ATTESTATION.

I, Robert 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.

Robert Campbell (Signature of Recruit)

Date April 20th 1914 Gaballane (Signature of Witness)

OATH TO BE TAKEN BY MAN ON ATTESTATION.

I, Robert 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.

Robert Campbell (Signature of Recruit)

Date April 20th 1914 Gaballane (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 Campbellton this 20th day of April 1914

Gaballane (Signature of Justice)

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

Gaballane (Approving Officer)

Lieut

Description of Robert Campbell on Enlistment.

Apparent Age 18 years 5 months.
 (To be determined according to the instructions given in the Regulations for Army Medical Services.)

Distinctive marks, and marks indicating congenital peculiarities or previous disease.

(Should the Medical Officer be of opinion that the recruit has served before, he will, unless the man acknowledges to any previous service, attach a slip to that effect, for the information of the Approving Officer.)

Height 5 ft. 6 ins.

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

Complexion Light

Eyes Blue

Hair Light

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

CERTIFICATE OF MEDICAL EXAMINATION.

I have examined the above-named Recruit and find that he does not present any of the causes of rejection specified in the Regulations for Army Medical Services.

He can see at the required distance with either eye; his heart and lungs are healthy; he has the free use of his joints and limbs, and he declares that he is not subject to fits of any description.

I consider him fit for the Canadian Over-Seas Expeditionary Force.

Date 20 4 15 191 .

Place Camp ton

W. G. Gaudinier Capt
55th Bn
 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.

Robert 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.

W. W. Kirkpatrick Lt. Col. (Signature of Officer)
O. C. 55th Bn C. E. F.

Date MAY 14 1915 191 .

Rec'd. 23/1/17 - See letter from P.M. II, same date.

86269

- 20 -

Perforated sheet for Will from Pay Book of Reg.

No. 445799.

Name Robert Campbell.

Unit 55th Battalion C.E.F.

Military Will.

In event of my death
I will all my Personal
Belongings and Back
Pay to my Father

Signature R. Campbell

Rank and Regt. Pte, 55th Batt


Date April 10, 1916

M.X. 8/3/70

Wm

Surname *Sampbell* Christian Name *Robert*

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				
<i>1 Can. Hd. Amb.</i>		<i>3</i>	<i>8</i>	<i>16</i>	<i>5</i>	<i>8</i>	<i>16</i>	<i>Pyrexia</i>	<i>3</i>	<i>Reja Unit</i>	<i>R421. R427</i>

 Duplicate Medical History Sheet posted to here.

ORIGINAL

MEDICAL HISTORY SHEET.

Surname Campbell Christian Name Robert

Examined { on 20 day of April 1915
at Campbellton Pa
Birthplace { City or Town Bonaventure
County Bon Co Pa

Approved by [Signature]
Rank Capt M.O.

Apparent age 18
Trade or occupation Laborer
Height 5 Feet 6 Inches M.O.
Weight 150 Lbs. M.O.
Chest measurement { Minimum 33 inches M.O.
Maximum expansion 37 inches M.O.
Physical development M.O.
Small-Pox Marks M.O.

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

Vaccination Marks { Arm Right — Left —
Number —
When Vaccinated last [Signature] M.O.
(a) Marks indicating congenital peculiarities or previous disease M.O.

Date	Result	VACCINATIONS,
<u>Apr 1915</u>	<u>[Signature]</u>	M.O.
		M.O.
		M.O.

(b) Slight defects but not sufficient to cause rejection M.O.

Date	Result	ANTI-TYPHOID INOCULATIONS, ETC.
<u>7/24/15</u>		<u>Gardiner / Bell</u> M.O.
<u>8/3/15</u>		<u>" / "</u> M.O.
		M.O.

Enlisted on 20 day of April 1915 at Campbellton Pa

	CORPS.	REG'TL NUMBER.	HABITS.	DATE.
Joined on enlistment	<u>55th</u> <u>Batt</u>	44211 <u>444211</u> <u>445999</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.

445999 ✓
R-122

Rank Pte. Name CAMPBELL, Robt. Reg'l No. 444211
 Unit 55th Bn. If in perm. Corps, What Unit? Married or Single Single.
 Place and Date of Enlistment Campbellton, 20th Apr. 1915. Place of Birth Bona. Co., P.Q.
 Name and Address, Next-of-Kin John Campbell, Relationship
 Bonaventure, Bona. Co., P.Q.
 Assigned Pay Monthly \$ Payable to Relationship
 Separation Allowance \$ Payable to Relationship
 Discharge, Date and Place Reason *File Rd 25. C-2142* Character *U.S. 12*

M

I

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>6.</i>		<i>Arrived in England.</i>		<i>9 NOV. 1915</i>	
		<i>Per S.S. Corsician</i>			
<i>18-3-16</i>	<i>Adj 55th</i>	<i>and 6 days P. 2. break. quar^{ne} for 86⁶⁰</i>	<i>Westenhanger</i>	<i>18-3-16</i>	<i>P II 67.</i>
<i>7.5.16</i>	<i>O.C. 55th</i>	<i>Trans to 15th Bn. Overseas.</i>	<i>Diligate</i>	<i>7.5.16</i>	<i>P II DO. III.</i>
<i>14.5.16</i>	<i>O/C 15th</i>	<i>Taken on strength</i>	<i>Trouen</i>	<i>8.5.16</i>	<i>P II O 20.</i>
<i>22.8.16</i>	<i>15th</i>	<i>No 1 ban 3d Amb</i>		<i>3.8.16</i>	<i>bas Rept A421 Gyaxia</i>
<i>29.8.16</i>	<i>do</i>	<i>Rejoined unit</i>		<i>5.8.16</i>	<i>" " A427 do</i>
<i>24.10.16</i>	<i>do</i>	<i>Killed in Action</i>	<i>Base</i>	<i>9.10.16</i>	<i>" " A448</i>
					<i>Part II O 68 d 24.10.16.</i>

Casualty Form—Active Service.

RECORDED
CORRECTED
Record
HOUSE
S.M.

Regiment or Corps "C" Coy. 5th Batt. Canadians
 Regimental No. 445999 Rank Pte. Name Campbell Robt.

Enlisted (a) 20-4-15 Terms of Service (a) Duration of War Service reckons from (a) 20-4-15

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) _____

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				
		<i>transferred to 15th Bn</i>		<i>7/5/16</i>	<i>John P. Dudley Esq</i>
8-5-16	O.C. C.B.D.	Taken on strength of 15th Canadian Battalion	Can. Base Dep.	8-5-16	N. Roll Reinforcements Part 2 Orders No. 20 dated 14-5-16.
28-5-16	Do	Proceeding to Join	15th Battalion	28-5-16	N. Roll D.C.S. 272
2-6-16	O.C. Unit	Joined Unit	Ditto	29-5-16	B 213 D.C. S. 276
5-8-16	<i>Ob. 3C.F.A.</i>	<i>Pyrexia m.o.</i>	<i>Adm. 3C.F.A.</i>	3-8-16	} A 36 <i>523139 18-8-16</i>
<i>5.</i>	<i>5.</i>	<i>5.</i>	<i>Trans. 1C.F.A.</i>	3-8-16	
11-8-16	<i>Ob. 15 Bn.</i>	<i>Returned from Hospital</i>	<i>Field</i>	15-8-16	B 213 <i>52317 16-8-16</i>
13-8-16	<i>Ob. 1C.F.A.</i>	<i>P.N.O.</i>	<i>Adm. 1C.F.A. Sds</i>	3-8-16	} A 36 <i>52318-29 8-16</i>
<i>5.</i>	<i>5.</i>	<i>5.</i>	<i>Stoch 10 Duty</i>	5-8-16	

(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.

445 999 Campbell R Ste

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				
6/8/16	ICFA	Pyrexia & O Ad. ICFA.		3/8/16	A 36
13/10/16	15 Amv	<u>Killed in Action</u>		9/10/16	B213 Dec 344. ^{23/10/16} Part II O 68 ^{24/10/16}
		<i>Monaghan</i> Capt. for Lt.-Col., A. A. G. Canadian Section, G. H. Q. 3rd Echelon, B. F. E.			
				13/10/16	

2nd. Contingent

MILITIA AND DEFENCE
ASSIGNED PAY
OVERSEAS CONTINGENTS

93

Camp

To Whom J. E. Campbell
Address Hullens Brook.
Bon Co. P. Q.

By Whom Assigned Campbell, R.

Regtl. No. 444711 445-999

Rank Pte.

Corps 55th Battr 6 Coy

Rate \$10⁰⁰. NOV 1 - 1915

Casualties

PAYMENTS

Month	Year	Cheque No.	Amt.	REMARKS
Aug.	1914			<p>Stop payment 1¹¹/₁₆</p> <p>Killed in action 9/10/16</p> <p>F.M. Oct. 31/16</p> <p>J. W. 25/11/16</p>
Sept.				
Oct.				
Nov.				
Dec.				
Jan.	1915			
Feb.				
March				
April				
May				
June				
July				
Aug.				
Sept.				
Oct.				
Nov.		X 4901	10	
Dec.		W 6970	10	
Jan.	1916	M 11644	10	
Feb.		N 14638	10	
March		S 15137	10	

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MILITIA AND DEFENCE
ASSIGNED PAY

M. F. W. 12a.
 60m.—12-15.
 1772—39—819.

OVERSEAS CONTINGENTS

Sheet No. 2.

J. E. Campbell

Name of Soldier

Campbell, R

94

L. L. Job 89002.—Req. 6213.

PAYMENTS.

444211

c coy. 55 Batt.

Month.	Year.	Cheque No.	Amt.	Remarks.
			10 ⁰⁰	
April	1916	407	10	<div style="border: 1px solid red; padding: 10px; display: inline-block;"> <p>Casualties</p> </div>
May		114479	10	
June		8395	10	
July		7462	10	
Aug.		9593	10	
Sept.		15789	10	
Oct.		20231	10	
Nov.		25393	10	<p>Life closed 1¹¹/₁₆ 25/11/16</p>
Dec.				
Jan.	1917			
Feb.				
March				
April				
May				
June				
July				
Aug.				
Sept.				
Oct.				
Nov.				
Dec.				
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.				

Rank **Pte.** Name **CAMPBELL, Robt.**

Reg'l No. **445999** ~~445999~~ **P-58**

Unit **55th Bn.** If in perm. Corps, What Unit?

Married or Single **Single.**

Place and Date of Enlistment **Campbellton, 20th Apr. 1915.** Place of Birth **Bona. Co., P.Q.**

Name and Address, Next-of-Kin **John Campbell,**

Bonaventure, Bona. Co., P.Q.

Assigned Pay Monthly \$ **10.00**

Relationship **J E Campbell** Relationship **bullens Brook Bon Co. Pa**

Separation Allowance \$

Payable to

Relationship

Discharge, Date and Place

Kina 9-10-16

Reason

CHA 478 M/ST/10 by G. L. Dwyer

Character



Date		PAY			Field Allowance			Other Credits	Total Credits	Voucher		Cash Payments	Assigned pay	Other Charges	Total Debits	Balance	Remarks, Casualties, etc
From	To	No. of Days	Rate	Amount	No. of Days	Rate	Amount			No.	Date						
1915	Nov 1	Nov 30	30	1.00	30	30	10	3	33			2190	10		3190	110	
	Dec 1	Dec 31	31	1.00	31	31	10	3	110	3520		2433	10		3433	87	
1916	Jan 1	Jan 31	31	1.00	31	31	10	3	110	3497		1947	10		2947	550	
	Feb 1	Feb 29	29		29	29			290	550	3740	243			2703	1037	
	3/16	3/16	31		31	31			310	1037	4447	384	243	660	2877	1570	way 7 Pro 29067.
					152				1520	167	20	9490	50	660	15150	1570	Trans to 15th M 9/10 111 7/5/16

BALANCE TRANSFERRED TO NEW LEDGER



Subbed

Surname Campbell Christian Name or Names R. Reg. No. 445999
 Rank Pte. Unit 15th. Battalion. Co. Troop Batty.
 Hospital No; 1 Can. Field Ambulance Date of Admission 3-8-16.

Transferred Hosp.
 Hosp.
 Hosp.
 Hosp.

Diagnosis Pyrexia.

(1)
 Later Diagnosis (if changed)
 (2)
 (3)

Additional Diagnoses: If more than one state present

*Killed in Action 9.10.16
 Kept from Base*

DISPOSITION *Repair unit 5-8-16* Date
C.L. 22-8-16.. A.421.

*29.8.16 #427
 27.10.16 #478*

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

02

EPITOME OF HOSPITAL TREATMENT.

Hospital

Adm.

1.

2.

3.

4.

5.

6.

7.

REGT'L No 445999.

H. Q. FILE No. 649-

NAME Campbell, Robert

RANK AND CORPS Pte. 15th Bn. (for in 55th Bn)

FOLLOWS
No.
FOLLOWS

CABLE		NATURE OF CASUALTY
No.	DATE	
03746	26-10-16	Killed in Action Oct. 9th 1916 ✓
a7B	20900	Killed in Action Oct 9th 1916
Rouen	24-10-16	

LIST No

HOSPITAL

DATE OF
ADMISSION

REMARKS

a 421. No/loan. Fd. Amb.

3-8-16

Pyrexia

a 427 to Reported from Base

5-8-16

Rejoined Unit

a 478. " " "

9-10-16

Killed in action

No. 42241

RANK *Sgt.*

NAME *Campbell Roy* 0

T. O. S.

UNIT *8th Battery 3rd Bde. C. I. A.*

M. D. *Val*

PAID FROM	PAID TO	SIG. OR REC'T	PROMOTIONS, TRANSFERS, DISCHARGES, ETC.	
			PARTICULARS	AUTHORITY
<i>1914</i> <i>Aug. 30</i>	<i>1914</i> <i>Sept. 21</i>	<i>✓</i>	<i>Trans. to 12th B. atty.</i>	<i>Dec. Paylist.</i>
<i>Sept. 22</i>	<i>Oct. 31</i>	<i>✓</i>		
<i>Nov.</i>		<i>✓</i>		
<i>Dec.</i>		<i>✓</i>		

UNIT SAILED

OCT 3 1914



Name **Campbell. Robert** Rank **Pte.**Reg. No. **445999.**Unit **15th. Battalion.****25 - C - 2142.**Next of Kin **Canada.**

Date	Movement	Place	Casualty	List No.	Notified N/K O.	W.O. List
3-8-16	No. 1. Canadian Field Ambulance.		Pyrexia. A421.			
5-8	Rep. from base rej. unit		do	A427		
9-10-16	Killed in action			A476	3746	- 7/10/11

SURNAME. *Campbell*

649-C-6485

CARD NO.

D

CHRISTIAN NAMES

Robert

FOLL.

REGL. NO.

~~*44211445999*~~ *FRANK Pte*

UNIT

55th

Batt.

FORMER CORPS

NEXT OF KIN.

CHANGE OF ADDRESS

NAMES IN FULL

Campbell, John.

RELATIONSHIP TO SOLDIER

ADDRESS

*Bonaventure Bonar. Co.
P.Q. Can.*

COUNTRY OF BIRTH

Canada Bonaventure P.Q.

DATE

PLACE OF ATTESTATION

Campbellton

DATE

April 20-1915

(auth for N° Part II orders)

*P. 30-10-15-253
3*

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

Sailed from Honkaiqua. S. S Corsican. 30/10/15.

~~404~~

Number 445999

Rank

Plt

Surname

CAMPBELL

Christian name

Robert.

Units

15th Bn Con. Inf Theatre of War

F 2nd

Date of Service

7-5-16

Remarks

(S) J. E. Campbell,

Latest Address

Cullens Brook,
Que

Roll No.

200m. - 6-21

19947

... of ship, and date of arrival.....

Next of kin.....

Address on leave.....

Address on discharge.....

Transportation issued Yes No Date.....

Character on discharge.....

Previous occupation.....

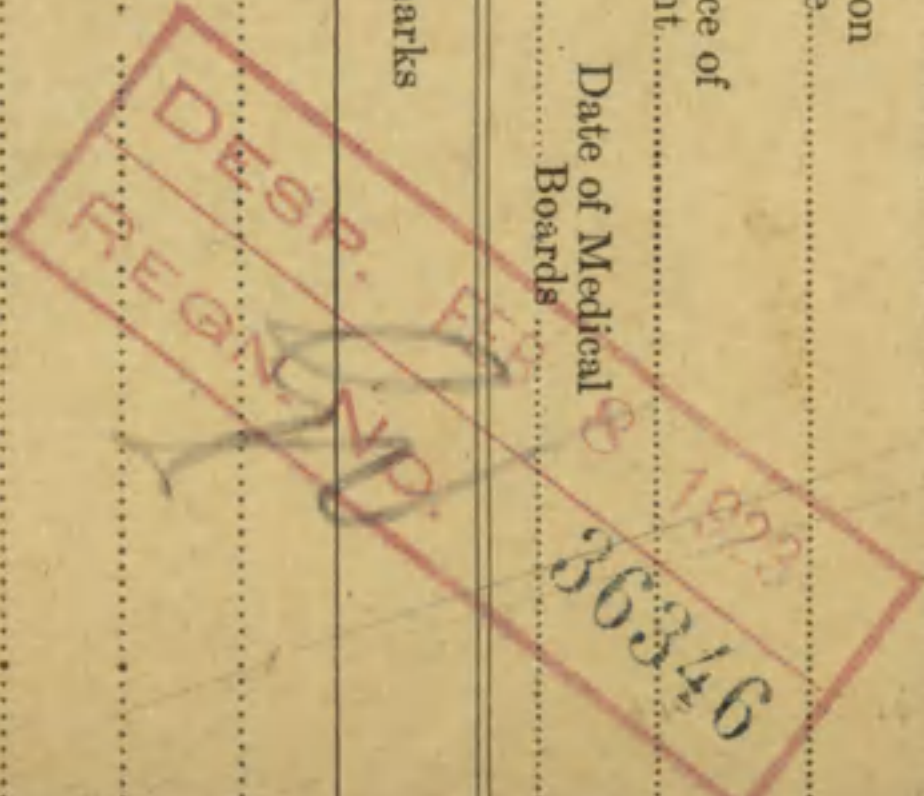
Date and place of enlistment.....

Diagnosis.....

Date of Medical Boards.....

Date.

Remarks



*—Name will be given in full; surname first.

CAMPBELL, R., Pte.,

Robert

649-C 6485

M

4252

445999

15th Bn.

not elig. for 1914-15 star

Name & Address of Legatee

medals
&
decorations

J. E. Campbell (F)
Bullens Brook

Que

Name & Address of next of kin

P. & A.

As above

Cross
680

(Serial no. 785312)

FEB 26 1921 Regn. No. 2.23855

Name & Address of next of kin

P1494.3

memorial
Cross

Name

url

