

4744

725162

I.D. number
No. d'identification

CAMPBELL

Surname
Nom de famille

PETER McFARLANE

Given names
Prénoms

DEC '0 23-11-58

PERSONNEL RECORDS CENTRE
CENTRE DES DOCUMENTS DU
PERSONNEL

PERSONNEL RECORDS ENVELOPE
ENVELOPPE DES DOSSIERS DU PERSONNEL

Location

Lieu

1451

« CONTENTS CONFIDENTIAL »
« CONTENU CONFIDENTIEL »



REGIMENTAL DOCUMENTS

AS 31-3-19

NAME CAMPBELL, PETER MCFARLANE REGT. NO. 725162 UNIT 109 Bn #298 H. Q. FILE NO.

CONTENTS	DATE RECEIVED	TO WHOM FORWARDED	DATE FORWARDED	M. F. W. 2505 REFERENCE	NON-EFFECTIVE BY
1 ATTESTATION PAPER (M.F.W. 23, 133, or 51)					DEATH
2 CASUALTY FORM (M.F.W. 54 or A.F.B. 103)				04744	Category
TRAINING HISTORY SHEET (M.F.W. 113)					
1 FIELD CONDUCT SHEET (M.F.W. 178 or A.F.B. 122)					
REGT. CONDUCT SHEET (M.F.B. 263 or A.F.B. 120)					
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
MEDICAL REPORT (M.F.B. 227 or A.F.B. 179)					<i>Demobilization</i>
1 MEDICAL EXAMINATION (M.F.W. 129)					
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
1 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)					
1 <i>A.F.W. 3997</i>					4
1 <i>D.M. 1375</i>					21-22
1 <i>P.S.C. Form 132</i>					16-22
1 <i>M.F.W. 192</i>					3-27
					H

(M)

(H)

Deceased 23-11-58

(H)

1451

4
21-22
16-22
3-27
H

ATTESTATION PAPER.

No. 725162

CANADIAN OVER-SEAS EXPEDITIONARY FORCE.

Folio.

ORIGINAL

QUESTIONS TO BE PUT BEFORE ATTESTATION.

(ANSWERS).

1. What is your surname? *Campbell*
- 1a. What are your Christian names? *Peter M. C. Farlane*
- 1b. What is your present address? *61 Hephourne Street Toronto*
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? *Tom Campbell*
4. What is the address of your next-of-kin? *31 Holton Ave Toronto Canada*
- 4a. What is the relationship of your next-of-kin? *Brother*
5. What is the date of your birth? *18th February 1890*
6. What is your Trade or Calling? *Farmer*
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? *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*

DECLARATION TO BE MADE BY MAN ON ATTESTATION.

I, *Peter M. C. Farlane 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.

Date *January 15* 191*6* *Peter Campbell* (Signature of Recruit)
W. Swaine, Capt. (Signature of Witness)

OATH TO BE TAKEN BY MAN ON ATTESTATION.

I, *Peter M. C. Farlane 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 *January 15* 191*6* *Peter Campbell* (Signature of Recruit)
W. Swaine, Capt. (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 *Lindsay* this *15* day of *January* 191*6*.
[Signature] (Signature of Justice)

Description of *Peter McFarlane Campbell* on Enlistment.

Apparent Age *25* years *11* months.
(To be determined according to the instructions given in the Regulations for Army Medical Services.)

Height..... *5* ft. *8 1/2* ins.

Chest measurement. { Girth when fully expanded..... *38* ins.
 Range of expansion..... *3* ins.

Complexion..... *Fair*

Eyes..... *Blue*

Hair..... *Dark Brown*

Religious denominations { Church of England.....
 Presbyterian..... *Presbyterian*
 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.)

Scar on left wrist
Scar on left side neck.

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 declares that he is not subject to fits of any description.

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

Date..... *January 15*..... 191*6*

Place..... *Liddsay*.....

J. McCulloch
H. Boyd..... Capt.
 Medical Officer.
 109th Overseas Battalion, C. E. F.

* 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.

Peter McFarlane 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.

J. H. Mc..... Lt. Col.
 (Signature of Officer)
 O. C. 109th Overseas Battalion, C. E. F.

Date..... **JAN 15 1916**.....

CANADIAN EXPEDITIONARY FORCE.

M.F.W. 44.
1133 (D.P. 250M-12-18.
1772-39-903.

LAST PAY CERTIFICATE

Regimental No. 425162 Rank Pte Name Campbell, P McF
 (Surname first)
 Unit No. 2 District Depot. who was* DISCHARGED
 On MAR 3 1919 191... to... 191...
 *Insert "discharged" or "transferred."

The following is a statement of the account of the above named from February to MAR 3 1919 the inclusive date of transfer or discharge.

	Dr.	Cr.
Bal. Dr. or Cr. from prev. month.....	90 98	
Regimental Pay..... 31 days at \$ 1 c.....		31 -
Field Allowance..... 31 days at \$ 10 c.....		3 10
Separation Allowance.....		2 90
Clothing Allowance.....		35 -
Post Discharge Pay.....		100 -
*Other Credits..... <u>Subs. 20#45</u>		12 -
Advances..... <u>25 14 2</u>	5 -	
Separation Allowance and Assigned Pay Cheque NO.....		
*Other Charges.....		
Balance on transfer or on discharge, cheque No. <u>102120</u>	88 02	
Total.....	<u>104 02</u>	<u>118 40</u>

*Give particulars.

A monthly stoppage of \$ 15 00 (†) has..... (‡) been paid on account of
 Assigned Pay for the month of February 191... }
 and Separation Allee. for month of March 191... } (to) Assignee wife of P. McF Campbell
 (Address) 514 Crawford Street, Toronto, Ont
 (†) Insert amount to be assigned, whether it has been paid or not. (‡) Insert "not" if amount has not been paid for period of account.

ON TRANSFER OF AN OFFICER.

Outfit Allowance of \$.....has been paid by Paymaster, Military District No.....

REMARKS:—

State (1) date of enlistment.....married or single.....
 (2) Separation Allowance, entitled or not..... Yes (3) Reason for discharge.....
 (4) Authority for discharge or transfer..... 20 #59

NOTE.—S.A. & A.P. Card and Index Card (M.F.W. 71) are to accompany Last Pay Certificate on transfer.

I have carefully examined this statement of account and find it to be a correct extract from the Pay Account of the officer or soldier.

Date MAR 1 1919
 Place TORONTO, ONT.
[Signature]
 Paymaster.

N.B.—(A) This form is to be used for all ranks (vide Article 122-130 and 141) Financial Instructions, C.E.F., 1916.
 (B) For purposes of transfer it is to be made out in triplicate. Copies will be disposed of in accordance with instructions as laid down in Routine Order No. 1307, dated 12th Nov., 1918. Payment of the balance will not be made and the words "or on discharge cheque No." will be deleted.
 (C) For purposes of discharge it is to be made out in duplicate. One copy to accompany discharge papers, and one copy for retention as a record. As payment of the balance will have been made, the words "on transfer or" will be deleted.
 (D) If a man on discharge is entitled to Post Discharge Pay, Last Pay Certificate will be made out as in "C" with an additional copy to be forwarded to the District Paymaster.

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

DENTAL CERTIFICATE FOR DEMOBILIZATION

Canadian Printing and Stationery Services, London

NAME OF SOLDIER (Block Letters) CAMPBELL P. M. REGIMENT 10. C. M. G. RANK PTE No. 725162

M.D.2

Date of Examination in England 20-1-19 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 2
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 Wm Sinclair
Capt



Name: CAMPBELL P M
 Address: 10-C.M.G. PLE
 City: M.D.R.
 State: INDIA

20-1-19

10

I have the pleasure to acknowledge the receipt of your letter of the 15th inst. regarding the above mentioned subject.

The same has been forwarded to the concerned authorities for their consideration.

Yours faithfully,
 [Signature]

[Signature]
 [Name]
 [Address]

DEPARTMENT OF MILITIA AND DEFENCE.

WAR SERVICE GRATUITY.

2

DISCHARGED

OTTAWA, CANADA.

Declaration required of Officers, Warrant Officers and Men who claim War Service Gratuity under Order-in-Council (P.C. 3165), dated 21st December, 1918.

If the applicant will enquire at the local Branch of the Canadian Patriotic Fund he will be informed if there is an official who will take this Declaration free of charge.

A complete reply must be given to every question in this Declaration. There must be no blanks and no dashes. If any questions are not applicable, the words "NOT APPLICABLE" must be written out.

On completion this Declaration is to be returned to THE DISTRICT PAYMASTER OF THE DISTRICT IN WHICH THE SOLDIER WAS DISCHARGED.

- 1. Christian names *Peter M* 2. Surname *Campbell*
- 3. Rank *Pvt* 4. Original Unit *109th Bn* 5. Reg. No. *425162*
- 6. Address, in full, to which future payments of gratuity are to be forwarded
*514 Crawford St
Toronto Ont.*
- 7. Date of enlistment in the C.E.F. *Jan 15 - 1916*
- 8. Names of dependent, if any, to whom Separation Allowance is being issued, or was being issued, immediately prior to your discharge *Mrs. Martha Campbell*
- 9. Relationship of such dependent *wife*
- 10. Address, in full, of such dependent *514 Crawford St.
Toronto Ont*
- 11. Is said dependent now, or was said dependent at any time in receipt of Separation Allowance on account of another soldier? *no*
- 12. Were you at any time on the strength for pay and allowances of a unit of the C.E.F. which was out of Canada or the United States when such pay and allowances were issuable? If so, give particulars of one such unit and dates of service overseas with such unit:—
*July 10 1916 ————— Feb 10 1919
109th Bn ————— 44th Bn*
- 13. Were you on the strength for pay and allowances of the Clearing Services Command, having been at any time on duty outside of Canada or the United States? *no*
- 14. Were you on active service only in Canada or the United States? If so, give particulars of unit and dates of such service *no*
- 15. Give total length of time which you served on active service, whether in Canada or Overseas, setting out particulars of units on whose strength you served *3 years, 1 month
109th Bn ————— 44th Bn
10th Machine gun Coy.*
- 16. Were you at the time of enlistment a civil employee of the Dominion Government? If so, state Department *no*
- 17. Were you a member of the Permanent Force at the time of enlistment in the C.E.F.? *no*

15-1-16
to
3-3-19
3 yrs 1 month

18. Have you had more than one enlistment? If so, give particulars of discharges and re-enlistments, and under what regimental numbers and units. *no*
19. Have you already received any payment of Post Discharge Pay or War Service Gratuity? If so, state amount you and your dependents have already received and by whom paid *no*
20. Have you been issued with a War Service Badge? If so, what class? *no*
21. Have you, during the present war, served in the Imperial Forces? *no*
22. Are you entitled to receive, or have you received any gratuity in the nature of Post Discharge Pay from the Imperial Forces? If so, state amount received, or to which you are entitled *no*
23. (a) Did you revert Overseas to a rank lower than the substantive rank held by you on your arrival in England? *no*
 (b) If so, was such reversion in consequence of misconduct or inefficiency?
24. Are you now serving in the C.E.F.? *no* If not, give:—(a) Date of discharge *13-3-19*
 (b) Reason for discharge *Demobilized*
25. Are you at present a member of and in receipt of pay and allowances from any Canadian naval or land forces? If so, give unit *no*
26. Did you at any time serve at the front in an actual theatre of war? If so, give particulars of one unit which you served at the front, and dates of such service with that unit
Aug 8. 1916 — April 22. 1918
10th Can Mack gun Coy
27. (a) Are you receiving treatment from the Department of Soldiers' Civil Re-establishment?
 (b) If so, are you in receipt of full pay and allowances from that Department?

And I make this solemn declaration, conscientiously believing it to be true, and knowing that it is of the same force and effect as if made under oath and in virtue of the Canadian Evidence Act.

Signature of Applicant: *Campbell, P. M.*
 Place of Residence: *514 Crawford St Toronto*

Declared before me at:
 This *25* day of *July* 19*19*

Signature of Barrister of the Supreme Court Stipendiary Magistrate, Notary Public, Justice of the Peace, or Commissioner for the Administration of Oaths.
J. W. Booth Esq.

POST DISCHARGE PAY.				
Date paid.	Paid Soldier	Paid Dependent	War Service Gratuity	Net amount due
.....
.....
.....

Certified Correct.
 District Paymaster.

725162

111

ORIGINAL MEDICAL HISTORY SHEET. ORIGINAL

Surname Campbell Christian Name Peter McFarlane

Examined { on 15th day of January 1916
at Lindsay

Approved by J. McCulloch Capt.
Medical Officer M.O.
Rank 109th Overseas Battalion, C.E.F.

Birthplace { City or Town Glasgow
County Scotland

Apparent age 25 years

Trade or occupation Farmer

Height 5 Feet 8 1/2 Inches.

Weight 141 Lbs.

Chest measurement { Minimum 35 inches.
Maximum expansion 38 inches.

Physical development Good

Small-Pox Marks none

Vaccination Marks { Arm Right One Left Two
Number Three

When Vaccinated last Jan 26th 1916

(a) Marks indicating congenital peculiarities or previous disease none

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

Date	Fit or Unfit	EXAMINED FOR RE-ENGAGEMENT,
		<u>24 APR 1918</u>
<u>6.8.18</u>	<u>Dr. J. Thuman</u>	<u>Capt M.O. came</u>
		M.O.
		M.O.
		M.O.
		M.O.

Date	Result	VACCINATIONS,
<u>26.1.16</u>	<u>nil</u>	<u>J. McCulloch M.O.</u>
<u>14.3.16</u>	<u>nil</u>	<u>J. McCulloch M.O.</u>
		M.O.

Date	Result	ANTI-TYPHOID INOCULATIONS, ETC.
<u>18/4/16</u>	<u>Good</u>	<u>J. McCulloch M.O.</u>
<u>25/4/16</u>	<u>Good</u>	<u>J. McCulloch M.O.</u>
<u>1.7.16</u>	<u>Good</u>	<u>J. McCulloch M.O.</u>
<u>12.6.18</u>	<u>(2564) 743</u>	<u>J. McCulloch</u>

Enlisted on 5th day of January 1916 at Lindsay

	CORPS.	REG'T NUMBER.	HABITS.	DATE.
Joined on enlistment	<u>109th Batt.</u>	<u>725162.</u>		<u>14.1.16</u>
Transferred to.. ..	<u>C.E.F.</u>			<u>5</u>
	<u>144th Bn.</u>			

EXAMINED OR DISCHARGED BY A MEDICAL BOARD.

STATION.	DATE.	DISEASE.	RESULT.
<u>3rd B.B.D. Seaforth</u>	<u>2-10-18</u>	<u>Septicemia</u>	<u>Discharged</u>
<u>Seaforth</u>	<u>11-26-18</u>	<u>none</u>	<u>Discharged</u>

CANADIAN

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.

D.

Surname

Campbell

Christman Name

Peter M. Hamilton

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				
Reptd. Evacuated to Hosp.		17	12	16	25	12	16	N.Y.D.		Rejoined Unit Duplicate Medical History Sheet posted to here. <i>me</i>	A 67.A 7.0.EP.
No 11 C.F.A.		4	6	17	10	6	17	P.U.O.		R.F.B. to Duty.	A179-A183. GH.
Porton War Epsom		22	4	18				Bronchitis		No T.B. in sputum. Wasserman Neg. No Secondary Syphilis in spots. Trench in vaccines	<i>[Signature]</i> LIEUT. M.O.R.C. U.S.A.
MCH. EPSOM		7	6	18	14	AUG	1918	do infectious	69	COA - Feels well. General condition good. Has had M.D. Dressing, light duty B.G. + P.T. here with improvements. Now fit for DT.	<i>[Signature]</i> Capt. C.A.M.C.

Medical Examination upon leaving the Service

of an Officer fit for general service or a Soldier fit for duty.

Officers leaving the Service upon being found unfit for general service by a Medical Board, and Soldiers leaving the Service upon being found otherwise than fit for duty by a Medical Board, are not to be reported on this Form.

Rank PTE Name PETER M Surname CAMPBELL
 Unit or Corps 10th C.M.G. Co (If a soldier) Regtl. No. 775162
 Born at GLASGOW, SCOTLAND on, date 18 FEB 1890
 Signature (for identification) Pt P M Campbell

The examination is to be made jointly by two Medical Officers.

1. **PHYSIQUE**—Any deformity, maiming or lameness? If so, describe.

Weight 145 lbs.
 Height 5 ft. 9 3/4 in.

2. **NUTRITION AND DIATHESIS?**

Normal

After searching inquiry and thorough examination is any evidence found of disease or impairment of the parts indicated below? If so, describe.

3. **NERVOUS SYSTEM?**

Normal

4. **RESPIRATORY SYSTEM?**

Normal

5. **HEART?**

Normal

Abnormal Sounds? nil

Abnormal Size? no

Pulse Rate? 80

Intermittence or irregularity?

Regular

6. **ARTERIES.**—Any hardening?

No

7. **DIGESTIVE SYSTEM?**

Normal

8. **GENITO-URINARY SYSTEM?**

Normal

Urinalysis—s.g.? 1.018 Reaction? Acid Albumen? neg Sugar? neg

9. **SKIN, MIDDLE EAR, EYE**
or any other part?

Normal

10. Is there any evidence of impairment of health or physical condition not mentioned above? If so, describe.

No

11. Opinion as to the health and physical condition of the one examined?

Good

Examined at Seaford Signed W B Harrison Capt M.O.
 Date Nov 26-1918 Signed Dawson Capt M.O.

If any disease or impairment of health or physical condition is discovered, this report should be sent at once to the O.C. concerned for the Officer or Soldier to be sent before a Medical Board for regular boarding.

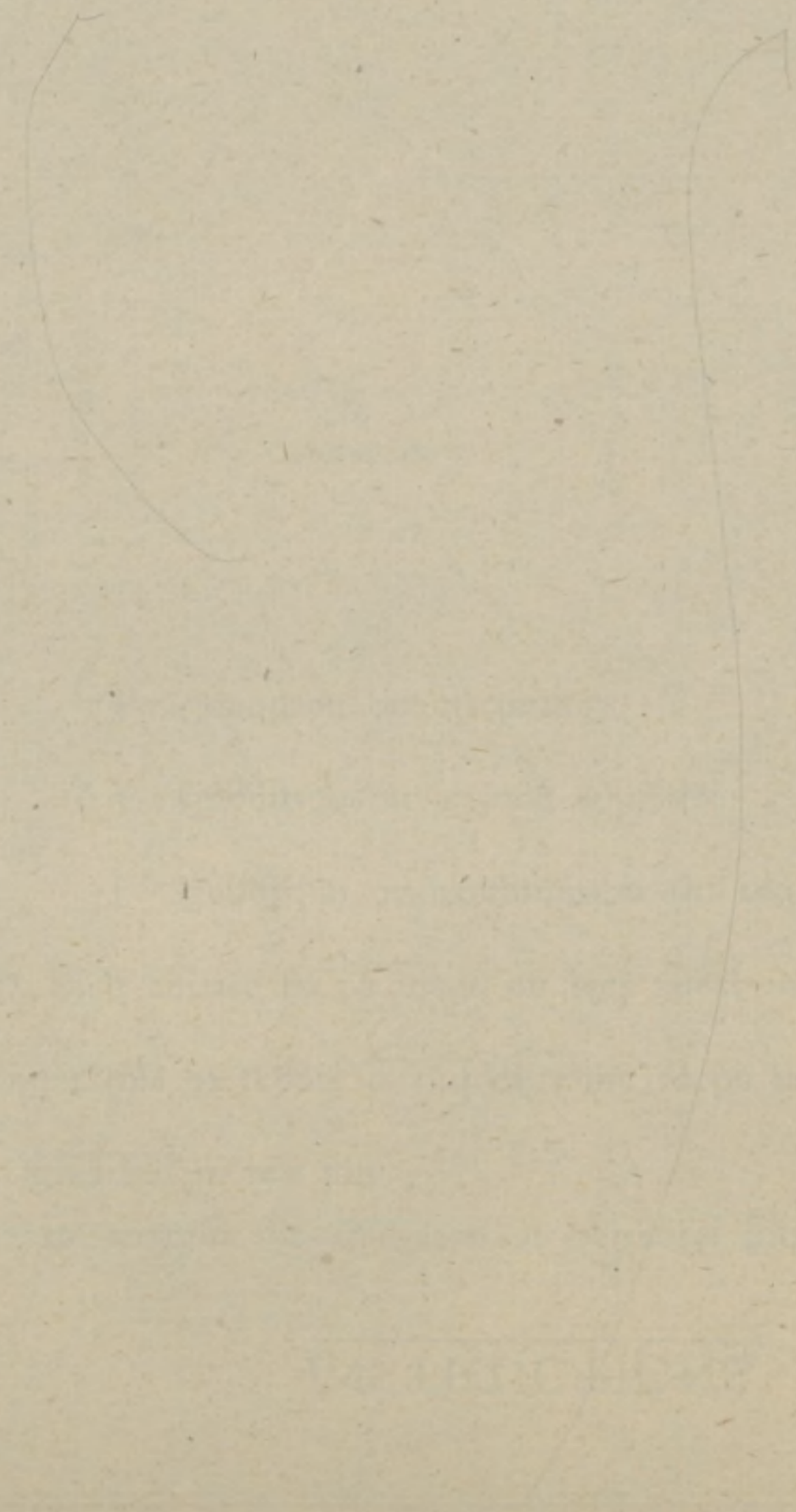
Medical Examination upon leaving the Service

of an Officer in General Service or a Soldier in Duty

This report is to be filled out by the examining physician and forwarded to the Medical Board and Soldier's Service File. It is to be filled out by the examining physician and forwarded to the Medical Board and Soldier's Service File.

Name of Soldier		Rank	
Company		Regiment	
Date of Examination		Place of Examination	
The following is a list of the organs and systems examined:			
1. PHYSICIAN - Any abnormal condition of the heart, lungs, or other organs of the body.	Weight		
2. NUTRITION AND METABOLISM	Height		
Also examine the eyes, ears, nose, throat, and skin for any abnormal condition of the parts indicated below.			
3. NERVOUS SYSTEM	Temperature		
4. RESPIRATORY SYSTEM	Pulse		
5. HEART	Blood Pressure		
6. ARTERIES - Any abnormal condition	Respiration		
7. DIGESTIVE SYSTEM	Stomach		
8. GENITO-URINARY SYSTEM	Urinary		
9. EYES, NOSE, EARS, THROAT	Throat		
10. IS THERE ANY ABNORMAL CONDITION OF THE SKIN?	Skin		
11. IS THERE ANY ABNORMAL CONDITION OF THE BONES?	Bones		
Remarks			
Signature of Examining Physician			
Signature of Officer or Soldier			

This report should be filled out by the examining physician and forwarded to the Medical Board and Soldier's Service File. It is to be filled out by the examining physician and forwarded to the Medical Board and Soldier's Service File.



(A) Report Date	(B) From whom received	(B) Authority of Part II. of Orders	(C) Record of promotions, appointments, reductions, casualties, transfers, postings, &c. All acting as well as substantive promotions to be shown, for method of entry of which see A.C.I. 1816 of 1917. Corps and unit to which transferred and posted to be invariably named.	(D) Place of casualty	(E) Date of promotion, reduction, reversion, casualty, &c.	(F) Remarks, and initials and rank of an officer
-----------------------	---------------------------	----------------------------------------	------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------	--------------------------	---------------------------------------------------------------	-----------------------------------------------------

Attached C.C.C. Kinmel Park for return to Canada. Part II Orders No. _____ Ceases to be attached C.C.C. Kinmel Park on embarking for Canada. Part II Order No. 31-32. 6-7/2/19. W. Powers Lt. Commanding 2 Wing, Kinmel Park Camp.

19 JAN 1919

Embarcked S.S. Carmania Liverpool 1st 1919

FEB 1 1919 O.S. T.O.S. No. 2 DISTRICT DEPOT, TORONTO 1919 PART II D.O.



W. Powers Lt.

For O. C. No. 2 District Depot

3/3/19 S.O.S. (Discharged) No. 2 District Depot Part II, D.O. No. _____

[Handwritten signature]

59

O. C. Discharge Sections No. 2 District Depot

Nothing to be written in this margin.

SERVICE AND CASUALTY FORM (Part I).

Army Form B, 103—L.
Part I.

(1)*Substantive rank *Acting rank [To be entered in pencil to facilitate alteration.] (4) Surname (5) Christian Names (6) Army Form, number of, Attestation Form or Record of Service paper) (7) Whether of British or of Alien origin [vide A.C.I. 578 of 1918] (8) Date of birth as stated on enlistment (9) (a)	(2) Regiment or Corps	(3) Regtl. No.
---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------	-----------------------	----------------

(10) Enlistment (b) (12) Service reckons from (date) (14) Any subsequent variations (if any) of conditions of service	(11) Engagement (c) (13) Special conditions (if any) of enlistment (d)
-----------------------------------------------------------------------------------------------------------------------------	---------------------------------------------------------------------------

(15) Category	Date	Medical Authority	Initials and Rank of an Officer	(16) (Record of Occupation in Civil life (vide Army Order 93 of 1917)
				Industrial Group No. Trade or Calling Married or Single Particulars of Trade Test Occupation Cards despatched on (date) Second Occupation Card despatched on (date)

(17) Next of Kin (18) Demobilizer (f) (19) Pivotal-man (f) (20) Qualifications (g)	(Place) (Date) or (21) Corps trade and rate
---------------------------------------------------------------------------------------------	---------------------------------------------------

(Signature of Posting Officer)

(22) Extended { (23) Re-engaged {

(24) Miscellaneous entries:—

NOTES.—[a] Here enter particulars of any subsequent claim as to actual age after verification by birth certificate [vide A.C.I. 470 of 1918. [b] Whether direct or voluntary enlistment or called up under the Military Service Acts. [c] Whether for specified term of years or for duration of the war. [d] Whether "for Home Service only," or "not to be transferred without the soldier's consent, &c. [e] If to be retained on Home Service, period, if specified, to be stated, also authority, and on what grounds. [f] Required for demobilization purposes. [g] Signaller, Shoering-smith, &c.

Army Form B. 103 (II.) to be gummed on here if required.

Nothing to be written in this margin.

W1889—PP 1150 IM 5/18 G.W.P.Co (3490)

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

A2

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

No. *725162* Rank *pte* Surname *CAMPBELL*
(Give name in full)

Peter M. Farlane

Unit or Corps *2nd DB* Birthplace *Glasgow*

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

1. GENERAL DESCRIPTION:

Physique *Good* Weight *142* lbs. Height *5-8 1/2* in. Colour of Eyes *Blue*

Nutrition *Good*

Pulse *74*

Condition of arteries *Normal*

Vision Rt. *20/20* Left *20/20*

Hearing (conversational voice) Rt. *20* ft.

Left *20* ft.

Identification marks, scars, or deformities.
(Give cause and date of origin.)
3 Vacc St. Arm - 1916
Scars St. Jovian - strapned
Sept 1916
Left Hernia - operative scars -
Childhood

Opinion as to general health and physical condition *Good*

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

Nervous System *No* Genito Urinary System *No* Cardio-Vascular System *No*

Special Senses *No* Integumentary System *No* Respiratory System *No*

Disturbance of mentality *No* Muscular System *No* Digestive System *No*

Osseous and Joint System *No* Any other general condition *No*

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

No Alluvium - No Syphilis
No Hernia - Haemorrhoid - Varicella - Varicella
venis not good

APPROVED
 FEB 26 1919
[Signature]
 CAPT.
 FOR A. D. M. S. M. D. 2

EXAMINATIONS.

THIS SECTION FOR USE OVERSEAS—

Examined at.....(Overseas)

Date SignedM.O.

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

Signature

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

THIS SECTION FOR USE IN CANADA—

Examined at.....(Canada)

Date *Sept 26 - 1919* Signed *G. L. Campbell* M.O.

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

Signature *P. M. Campbell* M.O.

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

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

[OVER]

SERVICE AND CASUALTY FORM (Part I).

Army Form B. 103—L.
Part I.

(1)*Substantive rank <i>Private</i> *Acting rank *[To be entered in pencil to facilitate alteration.] (4) Surname <i>Campbell</i> (5) Christian Names <i>Peter McFarlane</i> (6) Army Form, number of, Attestation } Form or Record of Service paper } (7) Whether of British or of Alien origin [vide A.C.I. 578 of 1918] (8) Date of birth as stated on enlistment (9) (a)	(2) Regiment or Corps	(3) Regtl. No.
------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------	-----------------------	----------------

(10) Enlistment (b) (12) Service reckons from (date) (14) Any subsequent variations (if any) } of conditions of service }	(11) Engagement (c) (13) Special conditions (if any) of enlistment (d)
------------------------------------------------------------------------------------------------------------------------------------	---------------------------------------------------------------------------

Initials and Rank of
an Officer.

(Authority)

(date)

(15) Category	Date	Medical Authority	Initials and Rank of an Officer	(16) (Record of Occupation in Civil life (vide Army Order 93 of 1917)
				Industrial Group No. Trade or Calling Married or Single Particulars of Trade Test Occupation Cards despatched on (date) Second Occupation Card despatched on (date)

(17) Next of Kin (18) Demobilizer (f) (19) Pivotal-man (f) (20) Qualifications (g)	(Place) (Date) or (21) Corps trade and rate	(Signature of Posting Officer)
(22) Extended {	(23) Re-engaged {	
(24) Miscellaneous entries:—		

NOTES.—[a] Here enter particulars of any subsequent claim as to actual age after verification by birth certificate [vide A.C.I. 470 of 1918. [b] Whether direct or voluntary enlistment or called up under the Military Service Acts. [c] Whether for specified term of years or for duration of the war. [d] Whether "for Home Service only," or "not to be transferred without the soldier's consent, &c. [e] If to be retained on Home Service, period, if specified, to be stated, also authority, and on what grounds. [f] Required for demobilization purposes. [g] Signaller, Shoemaking, &c.

Army Form B. 103 (II.) to be gummed on here if required.

Nothing to be written in this margin.

W1889—PP1150 IM 5/18 G.W.P.Co (34/0)

725162

P/E. Campbell.

P. M.C.F.

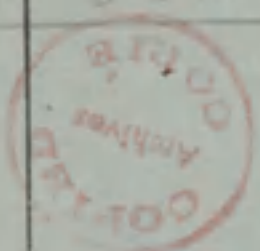
(Sheet 3)

(A) Report		(B) Authority of Part II. of Orders	(C) Record of promotions, appointments, reductions, casualties, transfers, postings, &c. All acting as well as substantive promotions to be shown, for method of entry of which see A.C.I. 1816 of 1917. Corps and unit to which transferred and posted to be invariably named.	(D) Place of casualty	(E) Date of promotion, reversion, casualty, &c.	(F) Remarks, and initials and rank of an officer
Date	From whom received					
30.12.18	buysd	338.	Tos. from Omsld. Seaford	SEAFORD	17-1-18	R. Edmunds Adjutant, Canadian Machine Gun Detach.
18-1-19	COM. CMGD.	No. 15	On com. to Rhyd	SEAFORD		

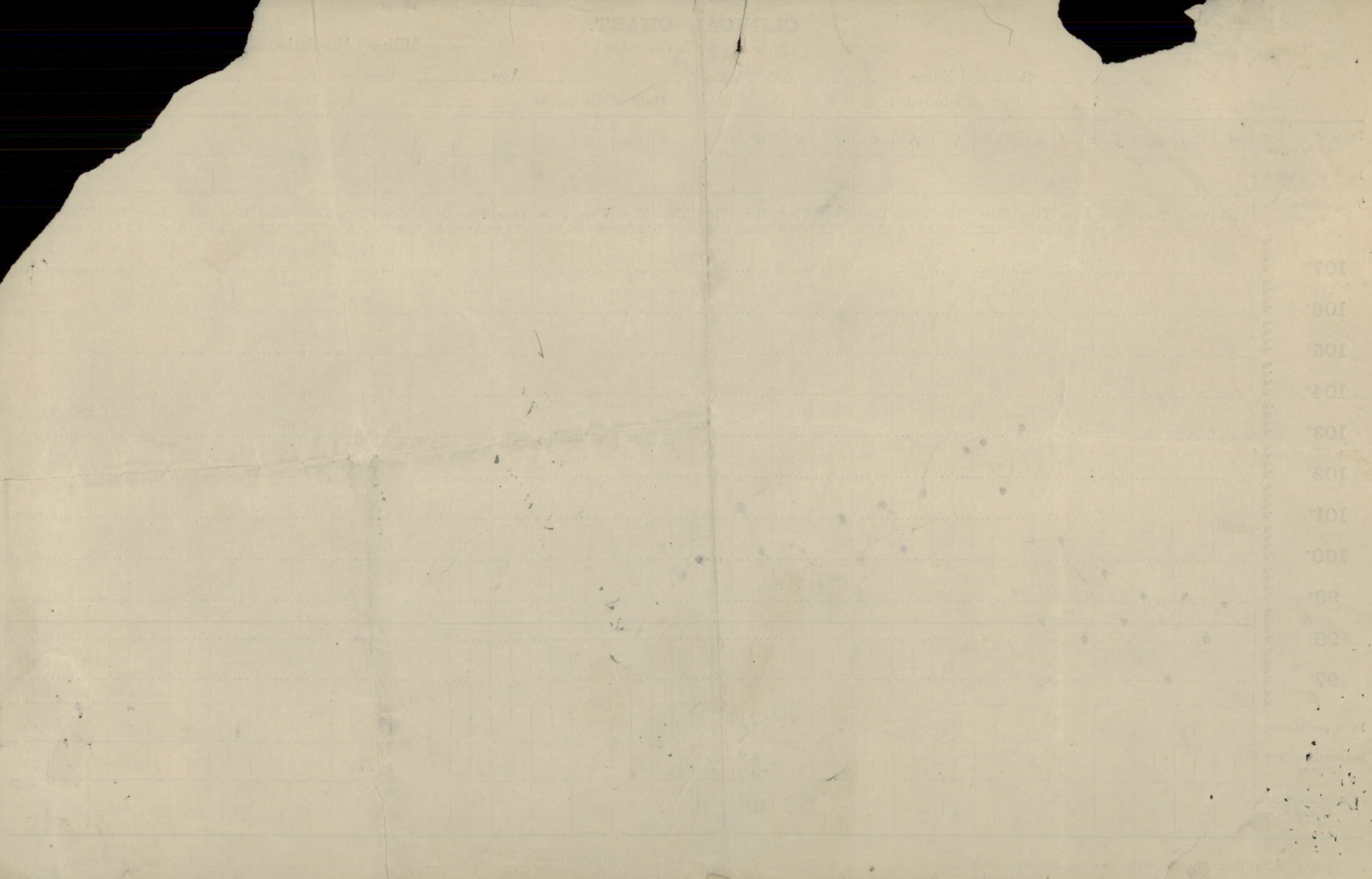


Nothing to be written in this margin.

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				
13-10-16	AG.GHQ O.B.181	Transferred to 10th Can. Machine Gun Company	Field	8-12-16	Can. Sec. K.I. 111/2468 Pt. II. O. 318, d/-21-12-16.
16-12-16	To 22 C.C.S.	T.O.S. 10th Can M.G. Co contusion side	"	9-12-16	To Pt II 50 d/ 19-12-16
23-12-16	OS	Sick To F. Amb	22 C.C.S	16-12-16	a 36 DES 42 d/ 31/1/17
30-12-16	"	Rejoined Unit	"	17-12-16	B213. DES 34 d/ 2-1-17
9/6/17	OC Unit	Sick To F Amb.	Not Stated	25-12-16	" " 36 d/ 7-1-17
9/6/17	12 b 7a	P.U.O.	adm	4/6/17	B213 - DES 96 d/ 19/6/17
		Trans To	12 b 7a.	4/6/17	a 36 - E + 516 - DES 96 d/ 9/6/17
		Rejoined Unit from Hosp	11 b 7a.	4/6/17	
16-6-17	OC 10th	P.U.O.	adm	10-6-17	B213 - DES 99 d/ 2/5/17
16-6-17	11 b 7a.	Dis To	11 b 7a.	4-6-17	a 36 - E 4697 - DES 99 d/
		Sentenced to 28 days F.P. No. 1 For W.O.A.S. (1) Drunkenness (2) Resisting an Escort.	Field.	8-11-17	157 d/ A.F.B. 2069 P. II. O. 23-11-17.
26-1-18	OO	Granted 14 days Leave		21-1-18	B213 - P/O 14 d/ 2/2/18
9-2-18	OO	Returned from Leave		5-2-18	B213



CHART



107
 108
 109
 104
 103
 102
 101
 100
 99
 98
 97

OVERSEAS MILITARY FORCES OF CANADA.

Date 19-9-18

To; Hospital Representative,
CANADIAN HOSPITAL
ETCHINGHILL, LYMINGE... Hospital.

1012144

Pte Wilson A.J.
C.F.C. Base

The marginally named soldier has this day
been medically examined and placed in Category
X.D/ and is now available to be discharged.

For your information and necessary
action please.

DT

REGISTRAR.

[Signature]
Capt. C.A.M.O.
Officer Commanding,
CANADIAN HOSPITAL,
ETCHINGHILL, LYMINGE. Hospital.

374 Gen. Quarters, Dept.
Medical Department.

Date... 27-9-18

Number	Rank	Name	Unit	
725162	opte	Campbell P/Ch	M G C	D. comp (1)

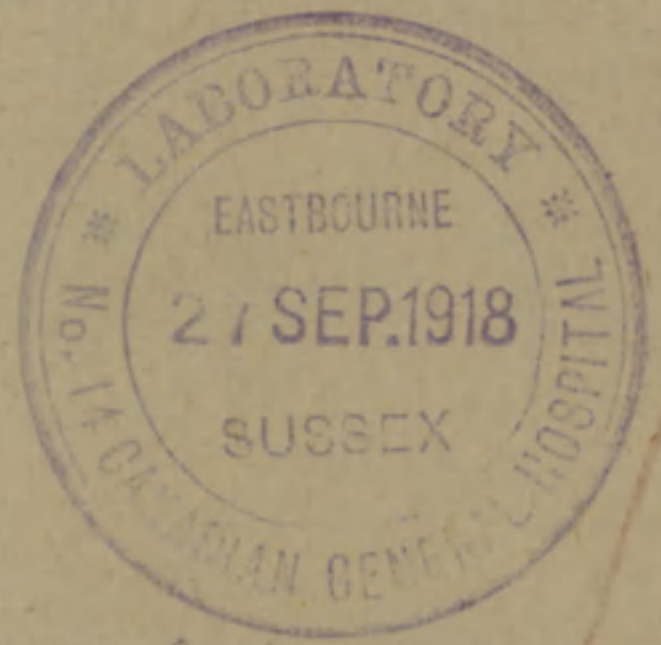
Messno

To:- Officer i/o Laboratory,

Please carry out Examination of the accompanying specimen of Sputum with special regard to T. B.

Preparation Capt
Officer i/o Unit Came
prop

no. T.B. found



T.B. Hetherington, Capt
Officer i/o Laboratory

27/9/18

Date

38.

MILITIA AND DEFENCE
ASSIGNED PAY
 OVERSEAS CONTINGENTS

M. F. W. 12a.
 50m.-4-16.
 1772-39-819.

Sheet No. 2. Martha Annie Campbell

Name of Soldier Campbell, Peter M
725162 pte "B" Coy 109th Battr.

L. L. Job 310.-Req. 6574.

PAYMENTS.

Month.	Year.	Cheque No.	Amt.	Remarks.
				AUG 1 1916
April	1916			
May				
June				
July				
Aug.		T 15648	15	
Sept.		A 45781	15	
Oct.		a 20228	15	
Nov.		A 75389	15	25389 cancelled. M.G.P.
Dec.		T 35837	75	
Jan.	1917	B 37317	15	
Feb.		B 42990	15	15 H
March		D 49302	15	15 B. 514 Crawford St Toronto ont
April		Q 545	15	15 L Cane'd. 27/3/17. R.R. 20/3/17 H J B
May		Y 7220	15	15 Cu
June		K 13547	15	15 T.
July		C 20055	15	15 Cu
Aug.		H 27570	15	15 OB
Sept.		Y 34193	15	15 Co
Oct.		K 46738	15	
Nov.		W 54517	15	
Dec.		T 51592	15	255 ⁰⁰ WAC
Jan.	1918			
Feb.				
March				
April				
May				
June				
July				

\$ 15.00

H.M.S.

Co

188

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.				

SEPARATION ALLOWANCE

Name *Martha A. Campbell*

Name of Soldier *Campbell, Peter McFarlane*

Address ~~*717 Harvey St.*~~

Regtl. No. *725/162*

~~*538 Delaware Peterboro,*~~

Rank *Pte.*

514 Crawford St. Toronto Ont.

Corps *109th Bn.*

Relation to Soldier

To what Corps belonging

wife, child or mother

Wife.

when called out

PAYMENTS

Month	Year	Cheque No.	Amt.	REMARKS
Aug.	1914			
Sept.				
Oct.				
Nov.				
Dec.				
Jan.	1915			
Feb.				
March				
Apl.				
May				
June				
July				
Aug.				
Sept.				
Oct.				
Nov.				
Dec.				
Jan.	1916			
Feb.				
March				



1-3-16

MILITIA AND DEFENCE

M. F. W. 11a.
50m.-4-16.
1772-39-818.

SEPARATION ALLOWANCE

OVERSEAS CONTINGENTS

Sheet No. 2.

L. L. Job 310.—Req. 6574.

M. A. Campbell

Wife
PAYMENTS.

Name of Soldier *Campbell, Peter M.F.*
Pte

Month.	Year.	Cheque No.	Amt.	Remarks.
April	1916			
May				
June				
July		L11304	120	
Aug.		x x x x		120
Sept.		B15068	20	20
Oct. 26		Q17985	20	20
Nov.		S 22115	20	20
Dec.		J 25130	20	20
Jan. 1917		R 28146	20	20
Feb.		R 31342	20	20
March 16 B.		R 34554	20	20 5/4. Crawford. St. Toronto Ont.
April		S 383 S 382	20	20 S 382 Cancelled gen
May		R 3861	20	20
June		T 7077	20	20
July		J 10364	20	20
Aug.		U 17417	20	20
Sept.		U 16373	20	20
Oct.		C 23292	20	20
Nov.		P 25687	20	20
Dec.		C 26601	20	20
Jan. 1918				
Feb.				
March				
April				
May				
June				
July				

300

440

MILITIA AND DEFENCE
SEPARATION ALLOWANCE
 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.				

Regt. No.

Rank

Name

Initials

722162

Me

Campbell, P. M.

I hereby certify that I desire to be discharged at

[Town]

Toronto.

514 Crawford St

[Province]

Ont.

In Military District No.

2

I understand that my decision to be discharged, as above, cannot be altered.

Signed P. M. Campbell

Service Group

8

Occupation

1

Dispersal Area

I



bas. sheet
16-12-16. Contusion side To duty 25 $\frac{12}{16}$

4-6-17. P.M.O. To duty 9-6-17.

28-3-18 P.M.O. -

13-4-18 Typhoid fever — pneumonia
To Eng. 21 $\frac{4}{18}$

Name

Campbell

Emb January 15/16

Date of Embarkation for England

24-7-16

Proceeded to France.

10-8-16

Returned to England.

21-4-18
sick

Date returned to Canada.

1-2-19.

P.R. 2855.

(over)
left kid
26/1/24

P. M. M.

Present at 8 a.m.

Names of Hospitals
(Central and affiliated, title and address to be given in full)

Officers

Other Ranks

Sick

Wounded

Sick

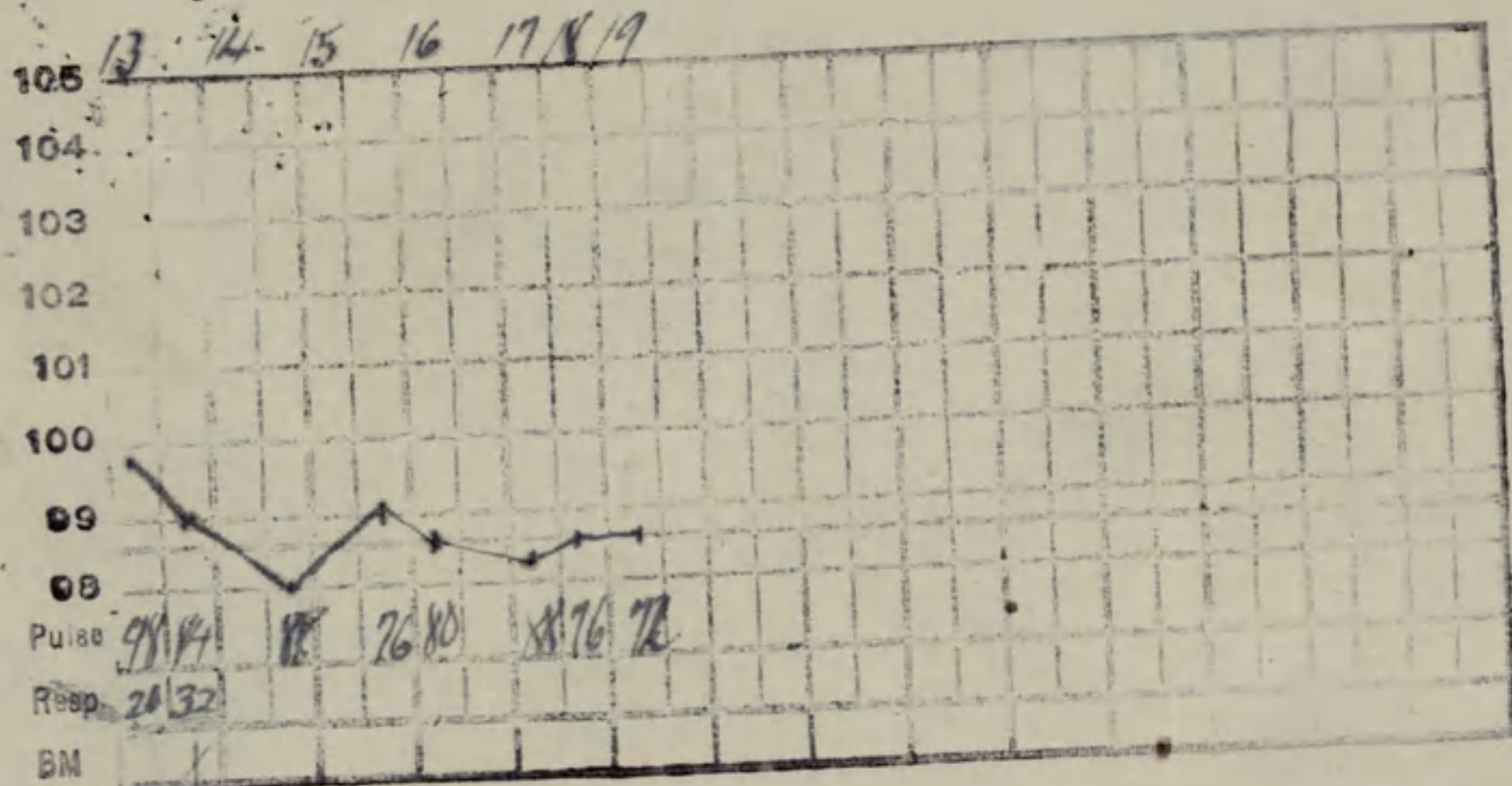
Wounded

*Physical medicine and private city
works a report in manuscript*

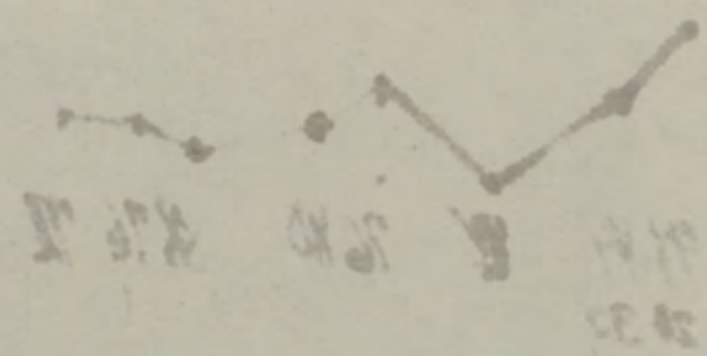
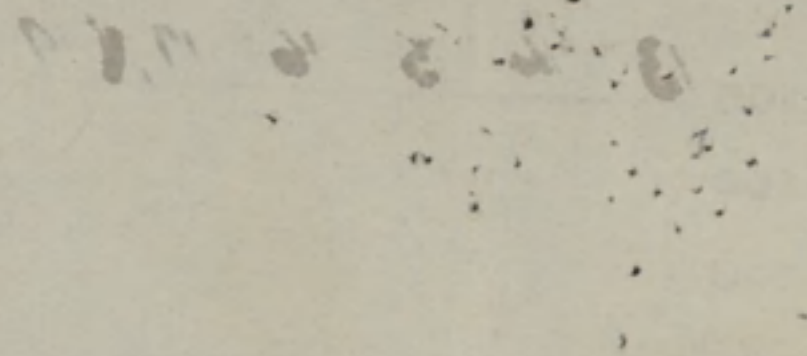
*85000
Sick
Wounded
Sick
Wounded
The
Dis
Cannon
Sick
Wounded
Sick
Wounded*

Names of Hospitals (Central and affiliated, title and address to be given in full)	Present at 8 a.m.			
	Officers		Other Ranks	
	Sick	Wounded	Sick	Wounded

7C-G.H.



14. 12. 97



From SM B
To Commandant.

12/7/18

Sir,

Reference is made to the report noted this soldier
is debilitated and is suffering from
the sequelae of trench fever. He would be
fit for D.T. after about two or three months
convalescence.



O.C. Div III
Paper returned gym please
please acknowledge receipt
of report.

Smith
Major I. C. C.

CONVALESCENT HOSPITAL,
WOODDOTE PARK,
EPSOM

53308
Plt Duffield G.E.
C.F.A.

[Faint, illegible handwriting, likely bleed-through from the reverse side of the page.]

O.C.

Capt Day

6 C.C.S

725162 Pte Campbell

10th C. M. S. Coy

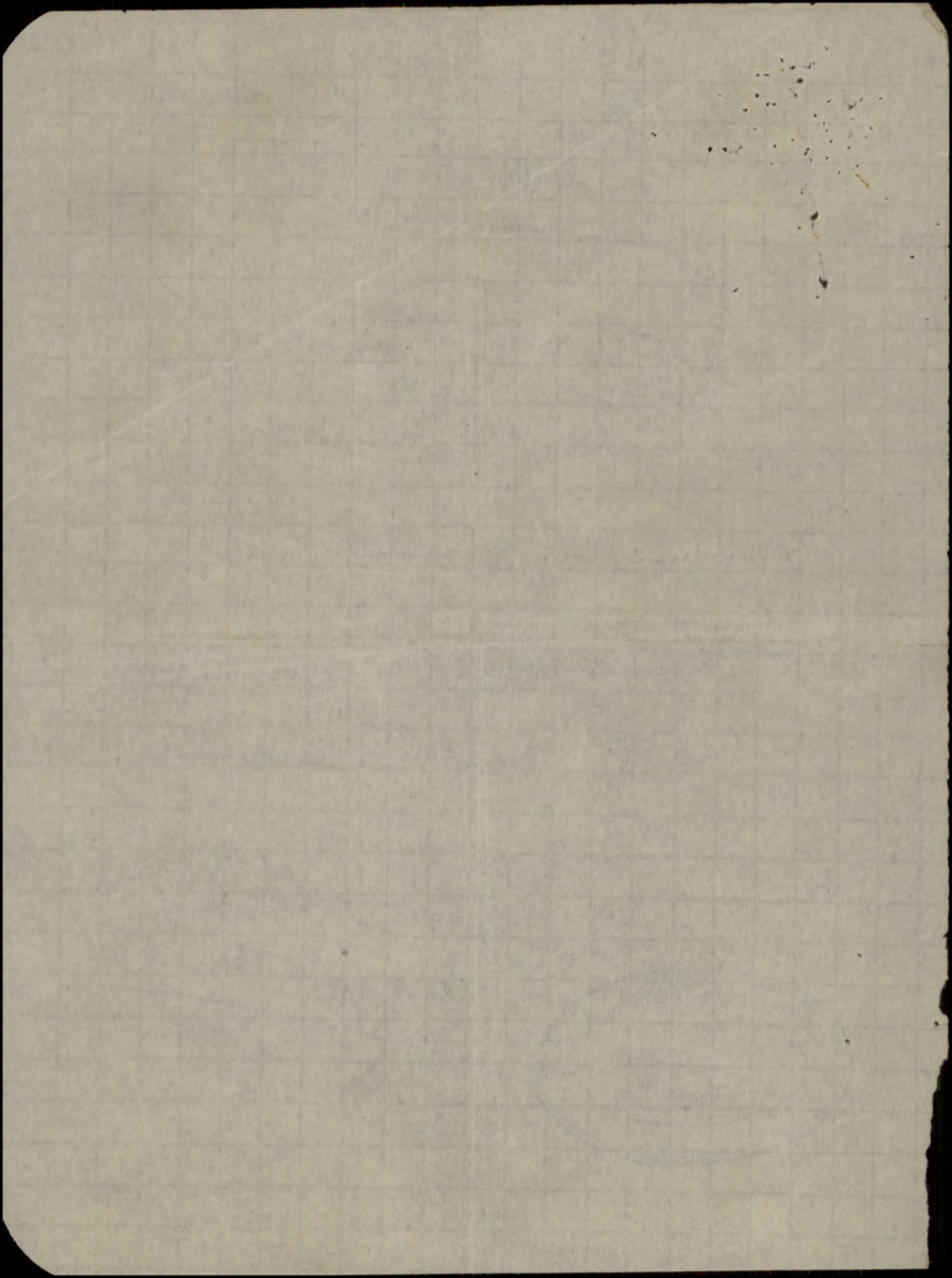
Sputum for examination.

Pneumococci predominate

No B. Diphtheriae found.

Truman
major paul





THE HORTON (COUNTY OF LONDON) WAR HOSPITAL, EPSOM.

PATHOLOGICAL EXAMINATION.

Rec'd

Signature of
Medical Officer.

W. Wood

Regt. No. *425162*

Rank and Name

Pte Campbell P.M.

Corps *10th Ban M.G.C.*

Ward

T.

Please state Nature of Specimen
and Investigation required.

Report.

*Stool ex. for
Dysentery
Amoeba.*



Examination for
NEGATIVE.

*amoebae.
Bipentacae re*

Record No.

19116

R. H. Brooks

Pathologist.

Lieut. R. A. M. C.

THE HORTON & LEXY OF LONDON, WEST HOSPITAL, LONDON

PSYCHOLOGICAL EXAMINATION

7

Examiner's Name

Date

Age

Case No.

Referral

Presenting Complaint and History

THE HORTON (COUNTY OF LONDON) WAR HOSPITAL, EPSOM.

PATHOLOGICAL EXAMINATION.

Rec'd

23 APR 1918

Signature of
Medical Officer.

Evans B. Wood
Yes

Regtl. No. 725162.

Rank and Name *Pte Campbell P.M.*

Corps *10th Ban. M.G.C*

Ward *T*

Please state Nature of Specimen
and Investigation required.

Report.

*Sputum for
T.B. please.*

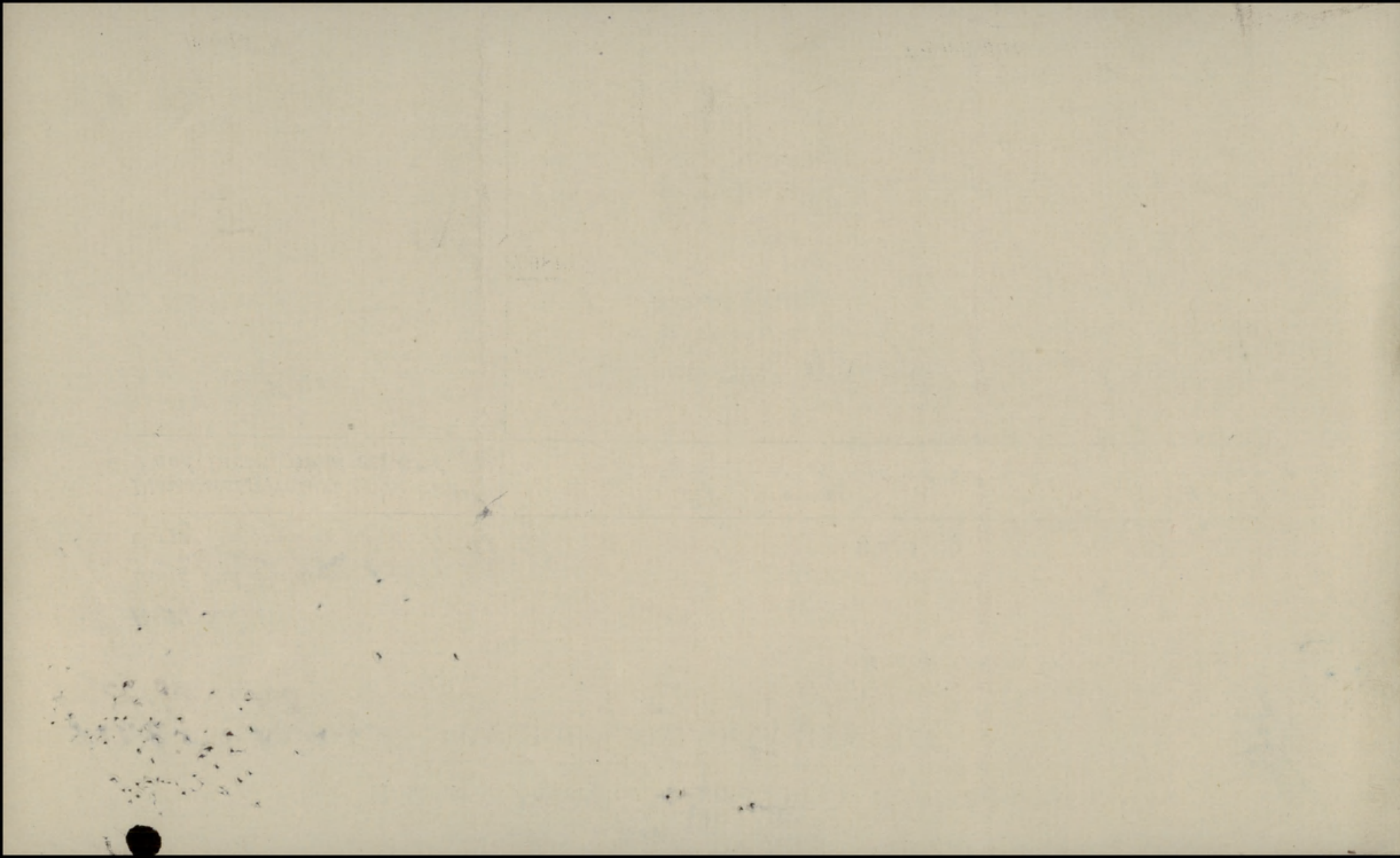
Examination for T.B
NEGATIVE.



Record No 18315

R. A. M. C.

Pathologist, Lieut. R. A. M. C.



THE HORTON (COUNTY OF LONDON) WAR HOSPITAL, EPSOM.

1 MAY 1918

URINE EXAMINATION.

Regtl. No. 725162.

Signature of
Medical Officer.

E. B. Wood

Rank and Name *Pte Campbell*

Corps *10th Ban. M.G.C.*

Ward *T*

NATURE OF INVESTIGATION REQUIRED.

If Microscopical Examination is necessary, Medical
Officer should initial here.

E. B. W

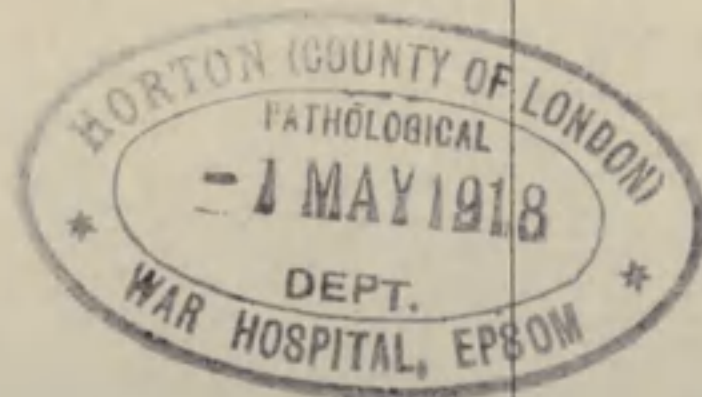
Colour *Pale*
 Consistence *Turbid Phosphates*
 Sp. gr. 1.0 *18.*
 Reaction *Alkaline*
 Albumen *tr* Grams per litre.
 Sugar

Microscopical Examination:—

~~Granular casts..... Red blood corpuscles.....
 Hyaline casts..... Pus cells.....
 Cellular casts..... Epithelium, Renal,.....
 Blood casts..... do. Bladder, etc.....
 Fatty casts..... Crystals.....~~

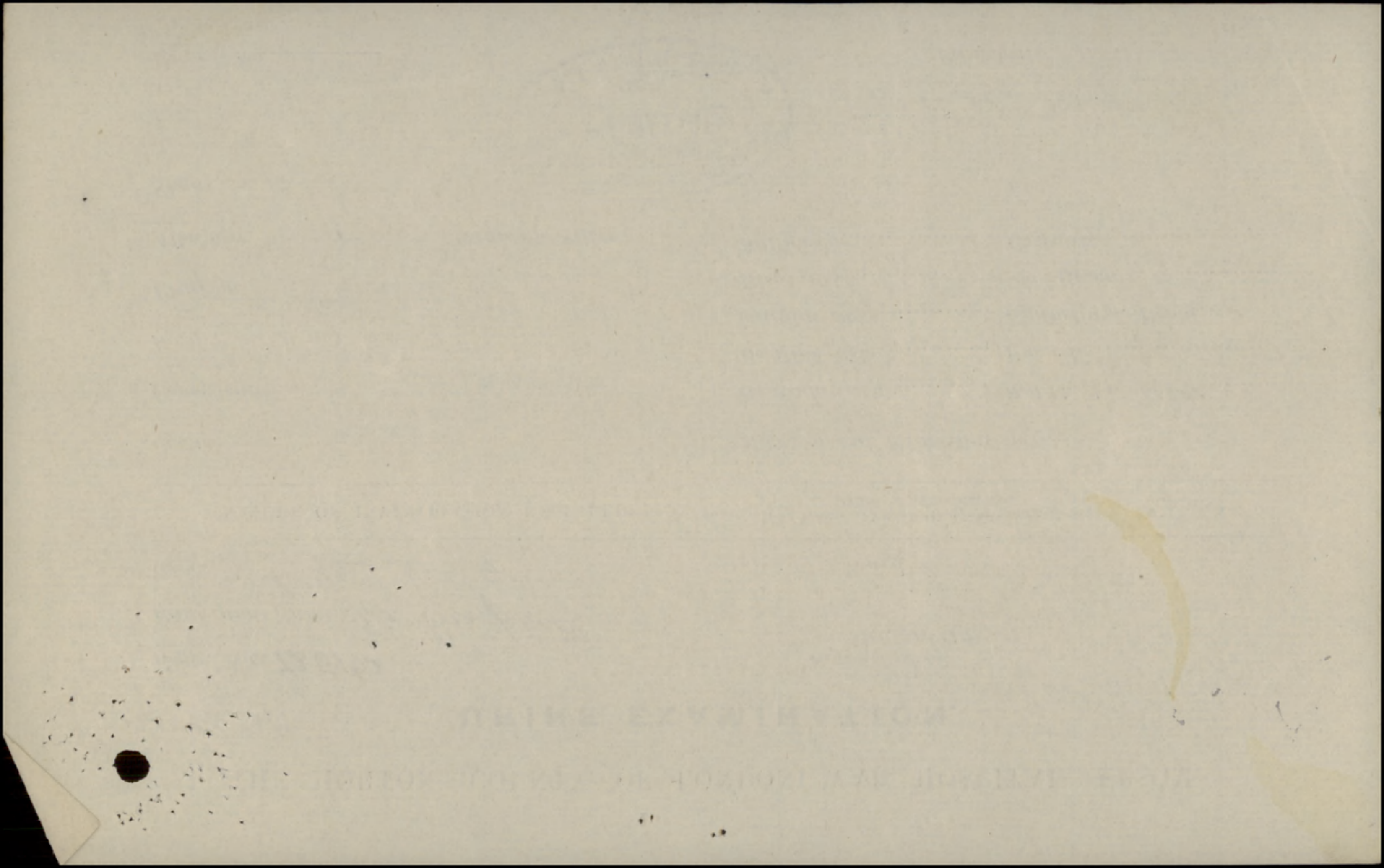
NOTHING PATHOLOGICAL

Record No. *1658*



R. A. M. C.

Pathologist. *Lieut. R. A. M. C.*



THE HORTON (COUNTY OF LONDON) WAR HOSPITAL, EPSOM.

PATHOLOGICAL EXAMINATION.

Rec'd

6 MAY 1918

925/62

Signature of Medical Officer.

E. B. Wood
etc

Regtl. No.

Rank and Name

Corps

Campbell R. P. M.
10th Cav. Div. S. C.

Ward

T.

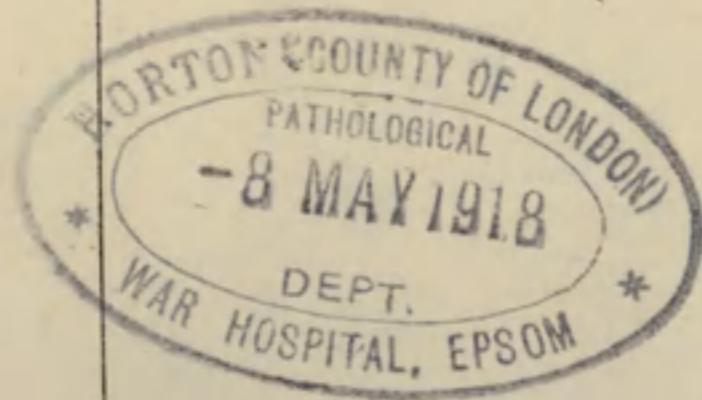
Please state Nature of Specimen and Investigation required.

✓

Report.

Wassermann on blood plasma

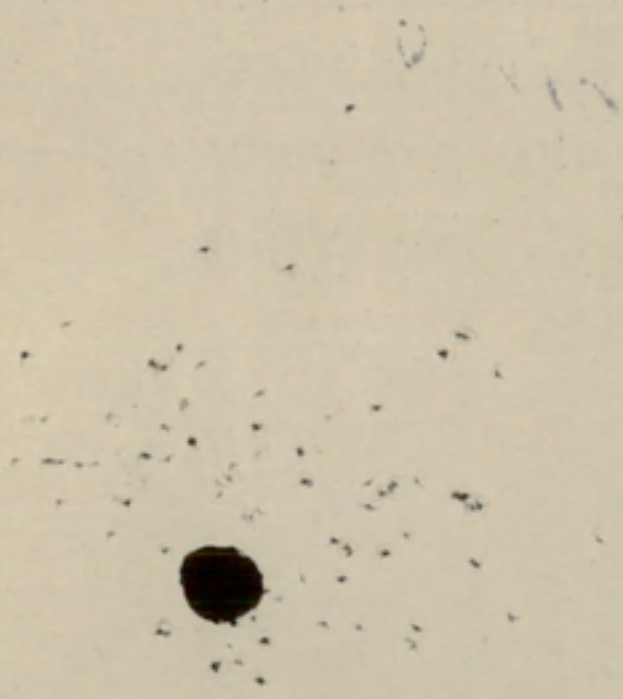
Examination for Wassermann reaction
NEGATIVE.



R. St. John Banks
Pathologist.

Record No 18767

Y



THE HORTON (COUNTY OF LONDON) WAR HOSPITAL, EPSOM.

6 MAY 1918

PATHOLOGICAL EXAMINATION.

Rec'd

Signature of
Medical Officer.

E. B. Wood
of

Regtl. No.

425/62

Rank and Name

Campbell R. P. M.

Corps

10th Co. D. F. C.

Ward

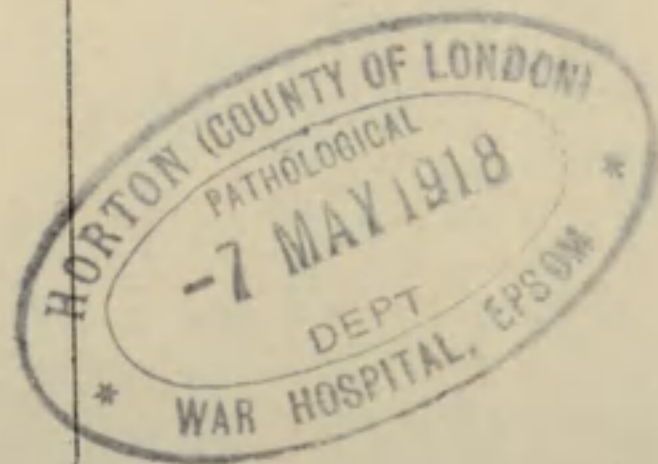
T

Please state Nature of Specimen
and Investigation required.

Report.

Test. Urine. please.

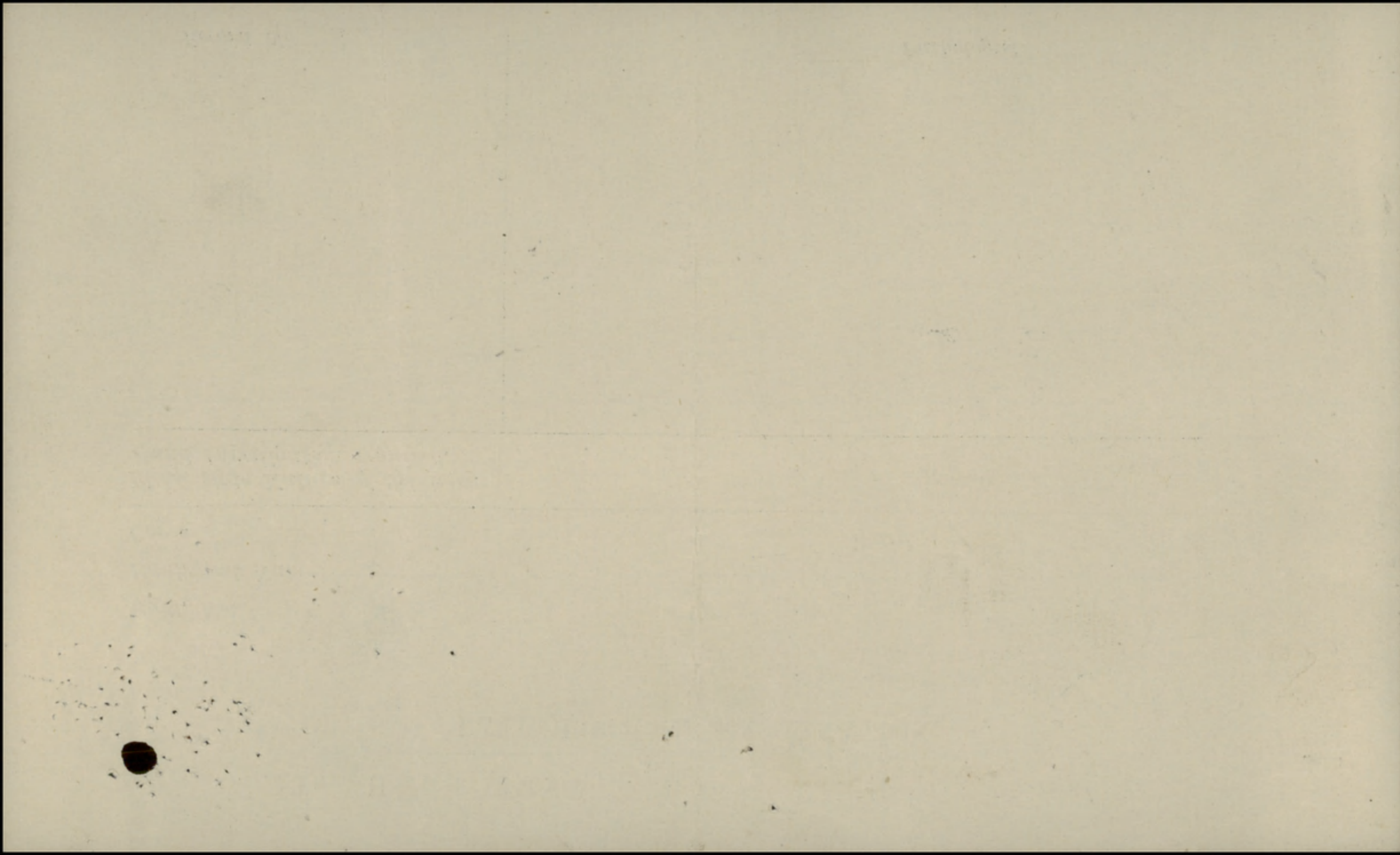
*Free HCl present.
Examⁿ for lactic acetic &
butyric acid - negative.*



Record No

18758

R. S. Jones Brooks
Lieut. R. A. M. C.
Pathologist.



CANADIAN ARMY DENTAL CORPS.

DENTAL CERTIFICATE.

NOTE:- This form will be attached to the Medical History sheet of each Other Rank being returned to Canada for disposal.

REGTL. No.	* NAME	RANK	UNIT
725162	CAMPBELL T.M.	PTE	CMGD

Date of Examination	26/11/18
Present Dental Condition	GOOD
In case of loss, or decay of teeth, is the loss due to wounds, injury, or disease, directly attributable to Active Service?	NO
Has he ever declined Dental Treatment?	NO
Recommendation	NIL

Date, 26/11/18

Station, Seaford

Signature of Examining Officer *R. B. Beaton* Capt.

C.A.D.C.

* Name should be entered in block letters.

DENTAL CERTIFICATE

This certificate is attached to the dental history sheet and should be returned to the dental office.

Patient's Name	Service Number
[Faint Name]	[Faint Number]
[Faint Name]	[Faint Number]
[Faint Name]	[Faint Number]
[Faint Name]	[Faint Number]
[Faint Name]	[Faint Number]
[Faint Name]	[Faint Number]
[Faint Name]	[Faint Number]
[Faint Name]	[Faint Number]
[Faint Name]	[Faint Number]

[Signature]
 D.D.D.

NAME

RANK AND CORPS

CABLE

No.

DATE

NATURE OF CASUALTY

REGT'L NO

H. Q. FILE NO. 649-

FOLLOWS

NO.

FOLLOWS

725/62

Campbell, Peter M. Farlane

Pvt. 4th Can Div. M. G. Co. (former 109th Bn)

Co.

09432

27-2-17

Reported wounded Dec. 17th, 1916.
 Returned to duty Dec. 25th 1916.
 Contusion side. ✓

LIST No

HOSPITAL

DATE OF
ADMISSION

REMARKS

67.	Evac. to 1st Amb.	17-12-16.	Rep from Base. K. Y. J.
A 70	Rep from the Base Reg. Unit	25-12-16	N. Y. D. (has not been ascertained to be. Contusion side)
A 90			
A 179.	# 11. Can. Fl. Amb.	4-6-17.	P. U. O.
A 183.	Rep from Base. to duty	10-6-17.	" " "
A 186	# 6 Castle Stal	28 3-18	" " "
A 193	# 7 Can. Fl. Charles	13-4-18	Trench Fever
B 194	Horton & Son War Expon	22-4-18	D U P
B 233	Mil comb. in C. O. Expon	7-6-18	(10) Bronchitis
B 288	Dutch	14-8-18	(10) "

card

Number

720762

Rank

Plt
~~Plt~~

Surname

CAMPBELL

Christian name

Peter MacFarlane

Units

44th Coy

Theatre of War

France

Date of Service

10-8-16

Remarks

Latest Address

514 Crawford St.
Toronto
Ont.

Roll No.

200m.-6-21

Page 19911

Port, 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

DESP DEC 6 1922
 REAN. 5844

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

Surname **Campbell** Christian Name or Names **P. Mc J.** Reg. No. **725162**
 Rank **Pte.** Unit **4th Can. Div. Mac. Gun. Co. (10.)** Troop Batty
 Hospital Date of Admission

Transferred **11 Can Fed Amb** Hosp. **4. 6. 17**
6 C. S. Hosp. **28. 3. 18.**
7 C. G. Staples. Hosp. **13- 4- 18**
Horton C. of L. Epsom Hosp. **22. 4. 18**

Diagnosis **M.Y.B.**
 (1) **Contusion Side**
 Later Diagnosis (if changed)
 (2) **P. U. O. aw.**
 (3) **P. U. O.**

Additional Diagnosis: if more than one state present
Trench Fever aw.
P. U. O.
Bronchitis aw.

DISPOSITION **Reg. Unit** **25-12-16** Date

C.S. 6-1-17 #67 **REMARKS**
4.70 **Rep'd. from Base Evacuated to**
e.t. 10-1-17 **Field Amb. 17-12-16**
28-2-17 a 195 **R.F.B. To Duty. 10. 6. 17.**
23. 6. 17 a 179 **Dis. 14. 8. 18.**
30 6 17 a 183.
5. 4. 18 a 180.
22- 4- 18 a 193.
24. 4. 18 B 194 (1)
10. 6. 18 B. 233
15. 8. 18 B 288 (2)

R.

EPITOME OF HOSPITAL TREATMENT.

Hospital

Adm

1.

Woodcote Park, Epsom.

7.6.18.

2.

3.

4.

5.

6.

7.

Name L CAMPBELL, Peter McFarlane Rank Pte Regtl. No. 725162

Fyle Depot 24-601-431

Original unit Present unit 109th Bn M. or S. Age 28 Religion Pres Ref. H.Q.

Port, ship and date of arrival Halifax Carmania 8-2-19

Next of kin Brother T. Campbell 31 Holton Ave . Toronto Ont.

Address on leave Same.

Address on discharge 514 Crawford St., Toronto, Ontario.

Transportation issued Yes No Date Character on discharge

Previous occupation Farmer Date and place of enlistment Lindsay 15-16

Diagnosis Demobilization. Date of Medical Boards 26-2-19.

Date.	Remarks.	Pt. 2 Order No.
<u>TOS 12-2-19</u>	<u>posted to GasCo Ex Camp 8-2-19</u>	
	<u>leave with subs from 12-2-19 to 26-2-19</u>	<u>45.</u>
<u>3-3-19</u>	<u>SOS DISCHARGED "DEMOB 'N" ENTITLED TO W.S.G.</u>	<u>59</u>

Date.

Remarks

Pt. 2 (●) er No.

M. F. W. 192

150m.—5-18

1772-39-1243

No. 725-162. RANK Pte

NAME Campbell, P. M.

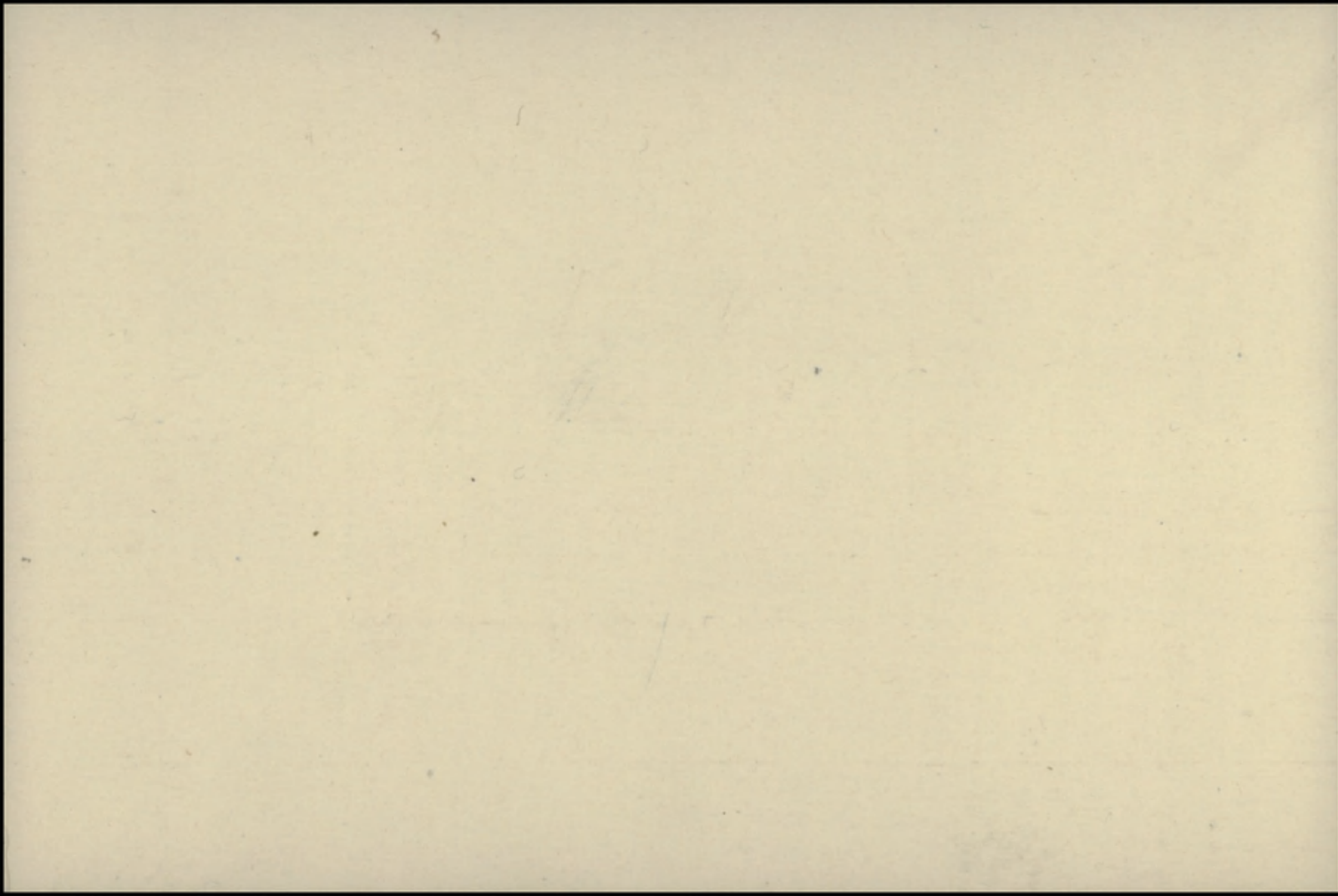
T. O. S. 14-1-16.
D. O. 49. 17-1-16

UNIT 109th Battalion

M. D. 3

PAID FROM	PAID TO	SIG. OR REC'T	PROMOTIONS, TRANSFERS, DISCHARGES, ETC.	
			PARTICULARS	AUTHORITY
1916 Jan 14	1916. Jan 31	✓		
	Feb.	✓		
	Mar.	✓		
	April.	✓		
	May.	✓		
	June.	✓		
	July.	✓		

UNIT SAILED
JUL 23 1916



Peter Mrs Farlane

Name Campbell Rank Pte Reg. No. 725162
 Unit 10th m G C
 Next of Kin Canada

Date	Movement	Place	Casualty	List No.	Notified N/K O.	W.O. List
1918						
28-3	No 6 Car Clg. Str		P U O	A 180		16109
13-4	No 7 C G Hsp Staffer	To Fever		A 195		823/13
22-4	Horton Co L Hsp Epsom		P U O.	B 194		16761
7-6	M. C. H. Epsom	Bronchitis		B 233		19349
14-8	Discharged		"	B 288		7242
EPS C	2671 On Furlough	14-8-18-26-8-18				
	No 3 Command	Seaford				

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

Reg. No.

Peter McFarlane.

725162

Unit **4th.Div.MeG Co's.(10)**

Next of Kin **Canada.**

Date	Movement	Place	Casualty	List No.	Notified N/K O.	W.O. List
17-12	reptd. Evacuated to Hosp.	NYD.	A67			
25-12	Rejoined Unit.	NYD.	A70			
Nature of Cas. now ascertained to be Contusion of Side						
A95 09432 28-2-17						
<i>4.6.17. Ho 11. C.F.A. P.U.O. A179</i>						
10-6-	Rept. from base to Duty.	do.	A183.			

Casualty Form—Active Service.

Regiment or Corps *10th Can. M. Gun Coy.*
 Rank *Pte.* Surname *Campbell.* Christian Name *P.M.*
 Religion..... Age on Enlistment..... years..... months
 Enlisted (a)..... Terms of Service (a)..... Service reckons from (a).....
 Date of promotion to present rank..... Date of appointment to lance rank.....
 Extended {.....} Re-engaged {.....} Qualification (b).....
 or Corps Trade and rate.....
 Occupation..... Signature of Officer

Report		Record of promotions, reductions, transfers, casualties, &c., during active service, as reported on Army Form B.213, Army Form A. 36, or in other official documents. The authority to be quoted in each case.	Place of Casualty	Date of Casualty	Remarks Taken from Army Form B.213, Army Form A.36, or other official documents.
Date	From whom received				
		Embarked ...			
		Disembarked ...			
		Forfeit 2 days Pay for when on active service guilty of an act to the prejudice of Good Order and military discipline in that he absented himself from the 8-00 a.m. Parade after being duly warned for same. <i>3/3/18</i>			<i>A.F.B. 2069</i> <i>P.O. 34</i> <i>2/28/3/18</i>
<i>7-3-18.</i>	<i>O.C. Unit.</i>		<i>Fbeld.</i>	<i>6-3-18.</i>	
<i>28-3-18</i>	<i>126.7a</i>	<i>P.N.O</i>	<i>adm 126.7a</i>	<i>28-3-18</i>	<i>A36-1253</i>
			<i>To 1/2 7a</i>	<i>28-3-18</i>	
<i>28-3-18</i>	<i>6661</i>	<i>P.N.O</i>	<i>adm 6661</i>	<i>28-3-18</i>	<i>A36-1253</i>
<i>30-3-18</i>	<i>OC</i>	<i>Evac To F.A.</i>		<i>28-3-18</i>	<i>B213</i>
<i>29-3-18</i>	<i>1/2 nm 7a</i>	<i>P.N.O</i>	<i>To 6661</i>	<i>28-3-18</i>	<i>A36-1253</i>

(a) In the case of a man who has re-engaged for, or enlisted into Section D, Army Reserve, particulars of such re-engagement or enlistment will be entered.
 (b) Signaller, Shoeing-Smith, &c.
 W. 8635—M2733 2000m 9/17 (35611) C. P. & S., Ltd., Form B./103 E/1807. P.T.O.

Date of Enlistment

MILITIA AND DEFENCE

Date of Assignment

Separation and Assigned Pay Branch

OVERSEAS CONTINGENTS

C

1466 *Aug 1/16*

RATE OF SEPARATION ALLOWANCE

<i>20</i>	<i>25th</i>	<i>30-1-9-18</i>
<i>4270</i>	<i>PC 2153</i>	

P.O. 3257 31687

RATE OF ASSIGNMENT

<i>15.</i>			
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PARTICULARS OF SEPARATION ALLOWANCE

No. *725162*

Rank *pte* Promoted Reverted Discharge

Soldier's Name *Peter M. Campbell*

Battalion *109th Batta "B" Co*

Beneficiary *Mrs Martha A. Campbell*

Relationship *wife* *MFW 2554-29-8-18*

Address *Red Invet 74-11-18 Perth*

PARTICULARS OF ASSIGNMENT

Name *Martha Annie Campbell*

Address *514 Crawford St, Toronto*

Change of Address *Ont*

1

2

3

4

Date	Cheque No.	Amount S/A	Amount A/P	Total	REMARKS
<i>Dec</i>		<i>440</i>	<i>255</i>	<i>695</i>	
<i>Jan</i>	<i>B 66334</i>	<i>30</i>	<i>15</i>	<i>45</i>	
<i>Feb</i>	<i>D 90469</i>	<i>25</i>	<i>15</i>	<i>40</i>	
<i>Mar</i>	<i>A 108623</i>	<i>25</i>	<i>15</i>	<i>40</i>	
<i>Apr</i>	<i>F 5694</i>	<i>25</i>	<i>15</i>	<i>40</i>	
<i>May</i>	<i>J 17509</i>	<i>25</i>	<i>15</i>	<i>40</i>	
<i>June</i>	<i>E 19484</i>	<i>25</i>	<i>15</i>	<i>40</i>	
<i>July</i>	<i>G 28576</i>	<i>25</i>	<i>15</i>	<i>40</i>	
<i>Aug</i>	<i>E 32024</i>	<i>25</i>	<i>15</i>	<i>40</i>	
<i>3 Sep</i>	<i>H 46419</i>	<i>25</i>	<i>15</i>	<i>40</i>	
<i>Oct</i>	<i>I 48860</i>	<i>25</i>	<i>15</i>	<i>40</i>	
<i>Nov</i>	<i>B 61465</i>	<i>25</i>	<i>15</i>	<i>40</i>	
<i>Dec</i>	<i>J 62998</i>	<i>45</i>	<i>15</i>	<i>60</i>	
<i>Jan 19</i>	<i>K 69513</i>	<i>30</i>	<i>15</i>	<i>45</i>	
<i>Feb</i>	<i>L 79745</i>	<i>20</i>	<i>15</i>	<i>35</i>	
		<i>815</i>	<i>465</i>	<i>1280</i>	

02718-3211010
02718-78

M.C. produced showing dated M. 3-7-16
sq overpaid 1-3-16 to 3-7-16 = \$81.
deduct \$10 per month to recover 072 PAKB
ruling - file 02718-P.8 M.R.O. 59872, all Feb 15/19
Ref Rs # 2475-\$81 Rendered 15-1-19 Perth
Cr. Slip # 2638-\$10 Rec. on Feb 4 cheque Perth 14/19
G. Slip # 2758 '71 Rec by MD 2 Perth 4-3-19

M. F. W. 128
 400M-647-1772-38-1141
 L. L. 22201-M. & D. 1958.

A/c Closed *Barmanea*
 Ret'd per.....
 Date..... *M.F.W. 187* *14/2/19*
 Clerk..... *REARMS 2*
Mirota 70349 7/3



2
CARD No.
1010 is 3-3-19
Demob FOLL.
1059 of 282-19
240

SURNAME. *Campbell.*

CHRISTIAN NAMES *Peter McFarlane*

REGL. No. *725162.* RANK *Pte.*

UNIT *109th.*

FORMER CORPS *Nil*

Batt.

NEXT OF KIN.

NAMES IN FULL *Campbell, Tom.*

RELATIONSHIP TO SOLDIER *Brother.*

ADDR *31 Holton Ave.
Toronto, Ont.*

(also notify.)
~~CHANGE OF ADDRESS~~
(wife) -
Mrs M.A. Campbell
514 Crawford St.
Toronto, Ont.

alt address.

COUNTRY OF BIRTH *Scotland Glasgow.* DATE *Feb. 18th 1890.*

PLACE OF ATTESTATION *Lindsay Ont.* DATE *Jan. 15th 1916*

Sealed from [unclear]



23/7/16
1092-19263
M.F.W. 32. 100m. - 1.1A H.Q. 1723-5A
23

MARRIED

SINGLE

Yes.

WIDOWER

TRADE OR CALLING

Farmer

RELIGION

Presbyterian

DESCRIPTION.

APPARENT AGE

25

YEARS

11

MONTHS

HEIGHT

5

FEET

8 1/2

INCHES

CHEST MEASUREMENT

38

INCHES

EXPANSION

3

INCHES

COMPLEXION

Fair

EYES

Blue

HAIR

Dark Brown

DISTINGUISHING MARKS

*Scar on left wrist & on left side
Neck.*

MEDICAL EXAMINATION.

PLACE

Lindsay Out

DATE

Jan. 15th 1916

Date of Enlistment

MILITIA AND DEFENCE

Date of Assignment

Separation and Assigned Pay Branch

OVERSEAS CONTINGENTS

C

1466 *Aug 1/16*

RATE OF SEPARATION ALLOWANCE

<i>20</i>	<i>25</i>	<i>30</i>	<i>1-9-18</i>
	<i>4/10</i>	<i>PC 2153</i>	

D. b. 3257 31687

RATE OF ASSIGNMENT

<i>15</i>			
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PARTICULARS OF SEPARATION ALLOWANCE

No. *725162*
 Rank *pte* Promoted Reverted Discharge
 Soldier's Name *Peter M. Campbell*
 Battalion *109th Battrn "B" Co.*
 Beneficiary *Mrs Martha A. Campbell*
 Relationship *wife* MFW 2554-29-8-18
 Address *Red Street 74-11-18 Perth*

PARTICULARS OF ASSIGNMENT

Name *Martha Annie Campbell*
 Address *514 Crawford St, Toronto*
 Change of Address *Ont*

Date	Cheque No.	Amount S/A	Amount A/P	Total	REMARKS
<i>Dec</i>		<i>440</i>	<i>255</i>	<i>695</i>	
<i>Jan</i>	<i>B 66334</i>	<i>30</i>	<i>15</i>	<i>45</i>	
<i>Feb</i>	<i>D 90469</i>	<i>25</i>	<i>15</i>	<i>40</i>	
<i>Mar</i>	<i>A 108623</i>	<i>25</i>	<i>15</i>	<i>40</i>	
<i>Apr</i>	<i>F 5694</i>	<i>25</i>	<i>15</i>	<i>40</i>	
<i>May</i>	<i>J 17509</i>	<i>25</i>	<i>15</i>	<i>40</i>	
<i>June</i>	<i>E 19484</i>	<i>25</i>	<i>15</i>	<i>40</i>	
<i>July</i>	<i>G 28576</i>	<i>25</i>	<i>15</i>	<i>40</i>	
<i>Aug</i>	<i>E 32024</i>	<i>25</i>	<i>15</i>	<i>40</i>	
<i>Sep</i>	<i>H 46419</i>	<i>25</i>	<i>15</i>	<i>40</i>	
<i>Oct</i>	<i>Q 48860</i>	<i>25</i>	<i>15</i>	<i>40</i>	
<i>Nov</i>	<i>B 61465</i>	<i>25</i>	<i>15</i>	<i>40</i>	
<i>Dec</i>	<i>J 62998</i>	<i>45</i>	<i>15</i>	<i>60</i>	
<i>Jan 19</i>	<i>J 69513</i>	<i>30</i>	<i>15</i>	<i>45</i>	
<i>Feb</i>	<i>J 79745</i>	<i>20</i>	<i>15</i>	<i>35</i>	
		<i>815</i>	<i>465</i>	<i>1280</i>	

02718. P 8

*M.C. produced showing dated M. 3-7-16
 sq overpaid 1-3-16 to 3-7-16 = \$81.
 deduct \$10 per month to recover OPA PMS
 ruling - file 02718 P. 8 M.R.O. 59872, all Feb 15/19
 Ref Rs # 2475-\$81 Rendered 15-1-19 Perth
 Cr. Slip # 2638-\$10 Rec. on Feb 9 cheque Perth 14/19
 Cr. Slip # 2758 '71 Rec. by MD 2 Perth 4-3-19*

M. F. W. 128
 400M-6-17-1772-89-141
 L. L. 2320-M. & D. 1988.

A/c Closed *Barmanea*
 Ret'd per
 Date M.F.W. 187
 Clerk *J. Edwards 2*

Mirota 70349 7B



514 Crawford St
Toronto
ont
20/3/17

MILITIA AND DEFENCE
ASSIGNED PAY
OVERSEAS CONTINGENTS

To Whom Martha Annie Campbell By Whom Assigned Campbell, Peter, M.

Address 717 Harney St. Regtl. No. 725162

~~338 Delaware Ave Peterboro,~~ Rank Pte

~~Toronto~~ 29/10/16 Ont Corps "B" Co 109th Battr.

Rate \$15.00 AUG 1 1916

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				



150
501

1000
K
12
X

1000
1000

A.G.R. Rank Name CAMPBELL, Peter McFarlane ✓ Reg'l No. 725162 ✓

Unit 109th Bn. If in perm. Corps, } Married or Single Single. ✓
 What Unit? }

Place and Date of Enlistment Lindsay, 15th Jan., 1916. Place of Birth Glasgow, Scotland. ✓

Name and Address, Next-of-Kin Tom Campbell, ✓

31 Holton Ave., Toronto, Canada. ✓ Relationship Brother. ✓

Assigned Pay Monthly \$ Payable to Relationship

Separation Allowance \$ Payable to Relationship

Discharge, Date and Place Reason Character

N/E. R.B. No. 5125 MD2
 File R.L.
 Category O.R. CAN
 P/S

H. W. & V., Ltd.—7165-16.

Report.		Record of promotions, reductions, transfers, casualties, etc., during active service. The authority to be quoted in each case.	Place.	Date.	REMARKS. Taken from Official Documents.
Date.	From whom received.				
		Arrived in England per H. M. T. 2810		31-7-16	
9.8.16	OC 109th	S.O.S. & transfer to 44th Bn.	Osney	8.8.16	T.O.S. Pt-II 221 d 8.8.16 Pt-II 20,222 (A.A. & Q.M.G.)
31-8-16	44th	Embarked For France		10-8-16	Pt-11-224 228 in 27-8-16 10.3 Checked
14.10.16	"	Att'd 10th Bde M.G. Co	In the field	6.10.16	- - 261
"	4 Can Div M.G. Co	Att'd 10th Bde M.G. Co	"	"	- - 15
19.12.16.	"	T.O.S. from 44th Bn	"	9.12.16.	" " 50.
21.12.16.	44th Bn 4 Div	S.O.S. to 10 Bde m.g. Coy	"	8.12.16,	" " 318.
6.1.17	m.g. Coy	Reported to Base to Hospital	"	17.12.16.	Doc. A 67. I.V.P. CONTUSION CLAS 95.
10-1-17	"	Rejoined unit	"	25.12.16.	Doc. A 70 I.V.P.
23.6.17	"	adm No 11 Can. Field Amb.	"	4.6.17	Doc A 179 P.U.O.

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.				
30.6.17	4 th Div. MB Co's	Reported from Base to duty	Field	10.6.17	ORA 183 P.U.O.
15.3.18	do	Transferred to M.G. Corps ON Strength 4th BN C.M.G. Corps 19 8 10	do	1.3.18	PERDO 27
29.4.18	4 th Div 6 th M.G. Corps	Sick posted to CMG Corps Depot	do	21.4.18	CMG.C.D. PERDO #49 & #98 d/29/18 3 rd B.B.D.
20.8.18	M.G. Corps Depot	Duch. Insp; on command 3 rd B.B.D.	Pte. Seaford.	14.8.18	Pt. II DO #187 & #195/20.8.18. CMG.D.
15.10.18.	CMG.D.	ceases att. 3 rd B.B.D., sol. to CMG.D.	Pte. Seaford.	10.10.18	Pt. II DO #233 & #276/17.10.18. & 5 th B.B.D. #239/10.10.18 CMG.D.
28.11.18	CMG.D.	sol. to CMG.D.	Pte. Seaford	27.11.18	Pt. II DO #312 & 274/2.12.18. CMG.D.
27.12.18	CMG.D.	sol. to CMG.D.	Pte. Seaford.	23.12.18	Pt. II DO #294 & 338/30.12.18.
3.3.19	CMG.D.	ceases ofc. in 500 to 667	Pte. Seaford	25.2.19	— 52
Canada. M.D. 2, (R.L. 23.6 Vol. 24 (13)/R.I.F. 3. 27219/27.2.19.)					
6/2/19	INSEW 2	SO to Canada	Pte. Ryl	1.2.19	DO 31

MEDICAL CASE SHEET.*

No. in Admission and Discharge Book.	Regimental No.	Rank.	Surname.	Christian Name.
	725162.	Pte.	Campbell	F.M.
	Unit. 10th Can M. G. Batty			Age. 31. Service.
Year	1918.			
Station and Date.	Disease <u>Bronchitis,</u>			
7.6.18.	Feels well, no disability			
	Light Duty Fat 6.			
	Sub. 12.6.18. (as 64)			
6.8.18	D.I.			
	J. J. Quinn Capt. c a m e			

Convalescent Hospital,
 Woodcote Park, Epsom.

* The first and last entries will be signed, and transfers from one Medical Officer to another, attested by their signatures.
 Wt. W 6604/M 2870—1,500,000—8/17—H. & Sp. (10933). Forms/I. 1237/12. (E239) [P.T.O.]

List of Discharge Documents.

Reg. Conduct Sheet,	Militia form B. 263	Attestation Paper	Militia Form W. 23
Squadron Battery } Company }	Conduct Sheet, " B. 263a	or Particulars of Recruit	" W. 133
Field Conduct Sheet	" W. 178	Proceedings on Discharge	" B. 218
Copies of Convictions, by C. P.	in MS.	In the case of recruits who are rejected on final approval, the discharge documents will consist of	
Med. Hist. Sheet,	Militia form B. 313		
Casualty Form	" W. 54		
Medical Report for Invalid§	" B. 227		
Dental History Sheet	" B. 465		
Last Pay Certificate	" W. 44	(a) Proceedings on Discharge.	
Duplicate Discharge Certificate	" W. 39A	(b) Attestation.	
‡Form of Will	" W. 82	(c) Medical History Sheet.	

§Only if discharged "Medically unfit."

‡Only if man has not been overseas.

Documents not accompanying this form should be crossed out.

I hereby certify that the following documents are unobtainable.

Officer Commanding.

N.B.—In the case of a man discharged by purchase, the date and number of Deposit Receipt with amount of same is to be noted hereon.

This space to be for numbers.

Proceedings on Discharge.

(When forwarded for confirmation these proceedings should be accompanied by the documents specified on fourth page.)

No.	725162
Rank	Pte
Surname.....	CAMPBELL PETER MCFARLANE
Christian name	
NOTE—The name must agree strictly with that on enlistment unless changed subsequently by authority.	
Corps (Squadron, Battery or Company)	109th Batt. (D.D.#.2)
Date of discharge	Mar 3, 1919
Place of discharge	TORONTO, ONT.
1. DESCRIPTION AT THE TIME OF DISCHARGE.	
Age..... 27 years..... months.	Descriptive marks Vacc. Scar Left Arm.
Height..... 5 feet 8½ inches.	
Complexion Fair	<p><i>Deceased 23-11-58</i></p>
Eyes Blue	
Hair Dk. Brown	
Trade Farmer	
Intended place of residence 514 Crawford St., Toronto Ont	
(To be given as fully as practicable.)	
2. The above-named man is discharged in consequence of	
<p>ON GENERAL DEMOBILIZATION</p> <p>Authority for discharge..... D.O.D.#.2 Pt 11 No 59</p>	
N.B.—The cause of discharge must be worded as prescribed in the King's Regulations and be identified with that on the character certificate. If discharged by superior authority, the number and date of the letter to be quoted.	
3. Conduct and character while in the service have been, according to the records, etc.	
N.B.—This will be assessed when practicable, by the Commanding Officer, in the presence of the soldiers and the Officer Commanding his Squadron, Battery or Company.	
4. Special qualifications for employment in civil life. (Vide para. 332, K. R. & O., Canada.)	
E. S.	

M. F. B. 218.

200M.—5-18.
H. Q. 1772-39-113.

(OVER)

5. He is in possession of the following number of G. C. Badges

No reference to G. C. Badges is to be made on either the discharge or character certificate.

6. Medals and Decorations.....

Three horizontal dashed lines for listing medals and decorations.

To be copied by the Commanding Officer on to the parchment Discharge Certificate.

7. His account is correctly balanced, and signed by the Officer Commanding his Company, (Squadron or Battery), and I have impartially enquired into all matters brought before me in accordance with Regulations.

(Place).....

(Date)..... Commanding.....

8. Certificate to be signed by the Soldier on Discharge

I hereby acknowledge that I received all my Pay, Allowances and Clothing, and all just demands, up to the present date, subject to the reservations of the claims noted on the third page, and that I have received my permanent discharge certificate.

(Place)..... TORONTO, ONT. Peter McFarlane Campbell (Signature of Soldier.)

(Date)..... (Signature of Witness.)

When a soldier is absent through illness or any other cause and it is not desirable to forward these proceedings to him for signature, a manuscript copy should be sent for the man to sign, and when returned, should be attached here.

9. Additional Certificate in the case of a Soldier who takes his discharge on his own request.

I hereby declare that I do of my own free will request to be discharged from His Majesty's Service.

..... (Signature of Soldier.)

10. Statement of Service.

Service toward Engagement to.... (the date to which the Record of Service is completed)..... years..... days.

Total..... years..... days.

11. Confirmation of Discharge.

The discharge of the above-named man is hereby confirmed.

(Place)..... TORONTO, ONT.

(Signature).....

(Date).....

For

Reservations referred to at Para. 8.

(To be signed by the soldier. When there are none, it is to be so stated, and signed by the soldier.)

ASSIGNED PAY. ENGLAND OR CANADA. SEPARATION ALLOWANCE. ENGLAND OR CANADA.

NAME: **CAMPBELL Peter McFarlane**

EFFECTIVE DATE: **1-8-16**

EFFECTIVE DATE: -

NUMBER: **725162**

AMOUNT: **15⁰⁰**

AMOUNT: -

PARTICULARS OF RANK OR APPOINTMENT

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.

AUTHORITY DATE EFFECTIVE RANK OR APPOINTMENT

*Mrs. Martha A Campbell (wife)
338 Delaware Ave, Toronto*

Private

UNIT AND TRANSFERS

ORIGINAL UNIT: **109th Bn**

DATE ACCOUNT FIRST OPENED: **8-8-16**

AUTHORITY DATE EFFECTIVE DATE LEDGER SHEET T'S F D UNIT TRANSFERRED TO

*98 22/4/18 1/5/18 4 Div 9 Bn
6 Bn 9 D*

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
12/18	5760	M.S.D.	9.73				
25/18	5958	"	4.87				
2/19	6627	"	4.87				
14/19	6907	"	14.60				

DAILY RATES OF PAY AND ALLOWANCES

AUTHORITY PAY F.A. P.F.A. SUBS'CE ALL'CE

1.00 10

Cancelled Auth 6 P.S 115/18 v 14/18

PARTICULARS OF RENDERING NON-EFFECTIVE:

*Transferred to Canada 30/7/18 Ref NA 1975
Transferred to Canada 30/7/18 Ref NA 1975
18/18 Seaforth M.O.2. CR 34
CR 34*

MONTH 1918	PARTICULARS	CR. 1	CR. 2	PARTICULARS	DR. 1	DR. 2	DR. 3	DR. 4	BALANCE	DEFERRED	SEPARATION
Mar 31	Bal. Fwd.								29.86		
Apr	P.P.	33		C.A.P.				15	47.36		
May	B.P.	34	10	b.c.p.				15			
				AR 2144 23.4.18. Esprom	9.73						
				" 1356. 21.5.18.	9.73				47		
June	P.P.	33		b.c.p.				15			
				a.R. 3345 7.6.18.	9.73				55.27		
July	P.P.	33			9.73			15			
				" 362. 4.7.18.	9.73						
				" 441 19.7.18.	4.87				59.77		
Aug		34	10	AR	14.60			15			
				AR 1120 14/8	48.67						
				" 2110 2/8	4.87						
				Awarded 105 hrs detention. Fined 2 ⁰⁰ Total forfeiture 9 ⁰⁰ Sentence dated 25-8-18							
				" Breachmen (2 offences) (2) Creating a disturbance in camp Do 203 3 C.E.D 24-8-18				9.70	24.39		
Sept	P.P.	33		C.A.P.				15			
				AR 5445 13/8 366D	4.87						
				" 5929 23/8	4.87				32.65		
Oct		33		AR	9.74			15			
				AR 6560 10/8	4.87						
				A 1377 20/8 badge on waist 1-10-18	1.46						
				AR 5387 26/8 M.S.D.	14.60				30.82		
					20.93						
Nov		33		AR				15	48.82		
Dec		34	10	AR 5760 13/8	9.73						

COMPILED BY *AT*
CHECKED BY

* Strike out whichever inapplicable.

NUMBER 725162

RANK

NAME

MONTH	PARTICULARS	CR. 1.	CR. 2.	PARTICULARS	DR. 1	DR. 2	DR. 3.	DR. 4.	BALANCE	DEFERRED	SEPARATION
Jan	NP	67 10		Forward	9 73			15	30 82		
		34 10		AK 5958 27 ⁷⁸ m 2D	4 87 ✓				48 82		
				at				15			
				Atk from 1700 10 ⁷⁸ until 2100 14 ⁷⁸							
				Forfeit 5 days pay by R.V. awarded							
				168 hrs retention (12 days by) R.V. awarded		13 20					
				at 17 ⁷⁸							
		101 20			14 60	13 20			59 22		
				6907 15 ⁷⁹ m 2D	14 60						
				6697 4 ⁷⁹ "	9 73 ✓				34 89		
					24 33						
Struck off strength of O.M. of C on transfer to 6 6 of bandada 1 ⁷⁹ m 2											
Sh 13											