



FIRST NEWFOUNDLAND REGIMENT

ATTESTATION OF

No. 4082 Name Benjamin Lee Corps S. A.

Questions to be put to the Recruit before Enlistment.

- | | |
|------------------------------------------------------------------------------------------------------------------------------------|------------------------------------------|
| 1. What is your name? | 1. <u>Benjamin Lee</u> |
| 2. What is your full Address? | 2. <u>Grand Bank</u> |
| 3. Are you a British Subject? | 3. <u>Yes</u> |
| 4. What is your age? | 4. <u>18</u> Years <u>2</u> Months |
| 5. What is your Trade or Calling? | 5. <u>Fisherman</u> |
| 6. Are you Married? | 6. <u>No</u> |
| 7. Have you ever served in any Branch of His Majesty's Forces, naval or military, if so,* which? | 7. <u>No</u> |
| 8. Are you willing to be vaccinated or re-vaccinated? | 8. <u>Yes</u> |
| 9. Are you willing to be enlisted for General Service? | 9. <u>Yes</u> |
| 10. Did you receive a Notice, and do you understand its meaning, and who gave it to you?.... | 10. <u>No</u> { Name |
| | { Corps |
| 11. Are you willing to serve upon the conditions as embodied in the roll of service to be signed by you if you are accepted? | II. <u>Yes</u> |

THE OPERATION OF THE WAR

I, Benjamin Lee 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 made.

429-10-17

..... Benjamin Lee

..... James St

SIGNATURE OF RECRUIT.

Signature of Witness.

OATH TO BE TAKEN BY RECRUIT ON ATTESTATION.

I, Benjamin Lee 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, according to the conditions of my service.

CERTIFICATE OF MAGISTRATE OR ATTESTING 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 Grand Bank on this 29th day of Oct 1917.

Signature of Attesting Officer James St

† CERTIFICATE OF APPROVING OFFICER.

I certify that this Attestation of the above-named Recruit is correct, and properly filled up, and that the required forms appear to have been complied with. I accordingly approve, and appoint him to the 1st Newfoundland Regt.

If enlisted by special authority, such will be attached to the original attestation.

Date Oct 29th 1917

Place Grand Bank

..... James St

} Approving Officer.

† The signature of the Approving Officer is to be affixed in the presence of the Recruit.
‡ Here insert the "Corps" for which the Recruit has been enlisted.

* If so, Recruit is to be asked the particulars of his former service, and to produce, if possible, his Certificate of Discharge and Certificate of Character, which should be returned to him conspicuously endorsed in red ink, as follows, viz:—(Name) re-enlisted in the (Regiment) on the (Date)

DESCRIPTIVE REPORT ON ENLISTMENT

Applicable to all ranks. To correspond with entries on the Medical History Sheet.

Name Benjamin Bee
 Apparent age 18 years 2 months. Height 5 feet 4 1/2 inches
 Chest Measurement { Girth when fully expanded 35 1/2 inches
 Range of expansion 2 inches
 Distinctive marks _____

INFORMATION SUPPLIED BY RECRUIT

Name and Address of next of kin Mrs. E. H. Bee
Grand Bank | Relationship Mother

Particulars as to Marriage

(a) Christian and Surname of Woman to whom married, and whether spinster or widow. (b) Place and date of marriage.
 (c) Present address. (d) Initials of Officer verifying entry.

(a)	(b)	(c)	(d)

Particulars as to Children

Christian Names	Date and Place of Birth

STATEMENT OF THE SERVICES

Corps in which served	Rgt. or Depot	Promotion, Reductions, Casualties, &c.	Army Rank	Dates	Service not allowed to reckon for fixing the rate of pension		Service in Reserve not allowed to reckon towards G. C. Pay		Signature of Officers certifying correctness of entries
					Years	Days	Years	Days	
Service towards limited engagement reckons from _____									
Joined at _____ on _____									
Total Service forfeited as above.....									

Total Service towards Engagement to _____ [date of discharge] _____ years _____ days
 " " Pensions " _____ [" "] _____ " _____ "

C.R.

4082

Jersey Hr
Fortune Bay
March 19th
1/21

The Department
of Militia
St. John's
nfld

Dear Sir,

I am sorry I
did not return this
Receipt before. I over
looked it hope it is
O.K now. I have
received the A.B. 64
book.

I am
yours Truly
Benjamin Lee
Jersey Hr
Fortune Bay

C.R. 4082

Extra set of Daily Orders Part II Royal Newfoundland Regiment.
Depot St. John's dated April 26th 1919.

The discharge of the undernoted on Demobilisation has been
CONFIRMED by Officer i/c Records ~~firm~~ on
25/4/1919

4082, Pte. Benjamin Lee.

C.R. 4082

Extract from Daily Orders Part 11 Unit The Royal
Nfld. Regt. St. John's, April 11th, 1919.

The discharge of the Undernoted on demobilization
has been APPROVED by Officer Commanding Discharge
Depot 11-4-19.

4082 Pte. Lee, Benj.

C.R. 4082

Extract from Weekly Orders Part II Unit The Royal Wfld.
Regt. St. John's, 11-2-19.

The undernoted Returned from Overseas and reported to
Regt 7-11-19.

Repariated on A.F. B179.

4082 Pte. Benj. Lee.

(4082)

C.R. 4082

Extract from Nominal Roll of the Royal Nfld. Regt.

Embarked S.S. Corsican, Jan. 30, 1919.

4082 Lee.

C.R. 4082

Extract from Daily Orders part I Dn, by Lt. Col.,
B. J. BARTON, Officer Commanding 2nd., Battalion
of the Royal New Zealand Regiment dated 2-12-18-18.

The u/n having reported back from the 1st., Batt.
is taken on the strength and is posted to "H" Co.,

#4082 Pte. B. Lee.

29-11-18.

C.R. 4082

Extract from Casualties received from Pay & Record Office
London, Nov. 26th, 1918.

The undermentioned was discharged from Endell St., Mil. Hosp.
on 18-11-18 and granted furlough from 19-11-18 to 28-11-18
He is marked 11 Command Depot, and report to 5th Bn. Winchester
on expiry of furlough.

4082 Pte. B. Lee.

C.R. 4082

Extract from War Office List No. G. 1733. dated 1. 11. 19

4082 Pte. B. Lee.

Wounded 10. 11. 18.

BC.

Counter No. 4082

NEWFOUNDLAND POSTAL TELEGRAPHS.



Cable Connection with all the World

All Messages Sent are Subject to the Following Conditions:

The Management may decline to forward the Message, though it has been received for transmission; but in case of so doing shall refund to the Sender the amount paid for its transmission.

In case the Message shall never reach its destination by reason of any neglect or default of the N. P. T. or its Servants whilst the Message remains under the control of the N. P. T., they will refund the amount paid by the Sender for such Message.

The N. P. T. shall not be liable to make compensation beyond the amount refunded as above for any loss, injury, or damage arising or resulting from the non-transmission or non-delivery of the Message, or delay or error in the transmission or delivery thereof, howsoever such transmission, non-delivery, delay, or error shall have occurred.

The control of the N. P. T. over the Message shall be deemed to have entirely ceased for the purposes of these Conditions at any point where, in the course of the transit of the Message to its destination, it may be entrusted by the N. P. T. (and the N. P. T. shall have full power so to entrust the Message) for further transmission by or through any system, service, or line of Telegraph belonging to or worked by any administration or authority not controlled by the N. P. T. exclusively, although worked as part of or in connection with the Telegraphic system or service of the N. P. T.

I request that the following Telegram may be forwarded according to the foregoing Conditions, by which I agree to abide.

(NOT TRANSMITTED)

Signature of Sender _____ Address **Drpt of Militia.**

Line Number	Rcd	By	Sent	by	Check

Dated **Oct 25th, 1918**

To **Mrs. E.H. Lee, Grand Bank**

Regret to inform you that Record Office, London, officially reports **No. 4082, Private Benjamin Lee at Military Hospital Endell Street, London suffering from G.S.W. right arm, right thigh and left leg.**

Upon receipt of further information I shall immediately wire you and trust that next report will be of his convalescence.

J.R. Bennett

Chge Dept of Militia.

Minister of Militia.

FOR TYPEWRITER

NEWFOUNDLAND POSTAL TELEGRAPHS.
Cable Connection with all the World
C.R. 4082
4082
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I request that the following Telegram may be forwarded according to the foregoing Conditions, by which I agree to abide.

(NOT TRANSMITTED)

Signature of Sender _____

 Address Dept of Militia

Line Number	Rcd	By	Sent	by	Check

Dated

Oct 23rd, 1918

To

Mrs. E.H. Lee, Grand Bank

Regret to inform you that Record Office, London, officially reports No. 4082, Private Benjamin Lee at 26th General Hospital Etaples, Oct 15th suffering from G.S.W. multiple mild.

Upon receipt of further information I shall immediately wire you and trust that next report will be of his convalescence.

J.R. Bennett

Minister of Militia.

FOR TYPEWRITER

C.R. 4082

Extract from W. O. List No. H.A. 30378.

dm. 26 Gen. Hos. Staples 15 Oct. 1918.

4082

4082 Pte. B. Lee.

G.S.W. MULPITTE MILD.

C.R. 4082

Extract from Memorial Roll to B.N.F. embarked
Falkenstein 2-7-18

#4082 Pte. B. "ee.

C.R. 4082

Extract from Nominal Roll Draft "H" Company Embarked
S.S. Flinders Jan. 29th, 1918.

4082 Pte. Lee B.

C.R. 4082

Extract from Daily Orders Part 11 Unit The Royal
Mfld. Regt., St. John's, Nov. 8th, 1917.

4082 Pte. B. Lee.

Attested for General Service with the Mfld. Regt., posted
to G. Coy, with effect from Nov. 8th, 1917.

EXTRACT FROM STATEMENT OF A/C TO 31-1-19 FROM PAY & RECORD
OFFICE LONDON

4082 Pte. Lee, B.

Cr. Bal. 13/2

This transferred to Pay Office 11-4-19

B. Lee

C.R. 4082

P. & R. O.

NOTE.—This Form is only to be forwarded to the Ministry of Pensions in cases of discharge under para. 392 (xvi. or xvii.), King's Regulations, and in cases of discharge under para. 392 (vi.), King's Regulations, when the soldier has suffered impairment in health since his entry into military service, or in cases of transfer to Class P., or P. (T), of the Reserve.
In cases of soldiers not discharged or transferred to the Reserve as above, but who are qualified by length of service to consideration for a Service Pension this Form is to be sent to the Secretary, Royal Hospital, Chelsea, S.W. 3.

Medical Report on a Soldier Boarded Prior to Discharge or Transfer to Class W., W. (T), P., or P. (T), of the Reserve.

1. Unit and Corps... *Royal Mtd. Regt.* 7. Former Trade or Occupation }
2. Regtl. No. *4082* 3. Rank... *Pl.* 7a. If the soldier claims previous service in Army, he should state—
4. Name *Lee* (Surname) *Lee* (Christian Names) (a) Former Regts. or Corps; with Regtl. Nos.
5. Age last birthday.....
6. Posted for duty on..... at..... in category (or grade).....
8. If the disability is an injury was it caused
(a) in action (b) on field service
(c) on duty (d) off duty? (b) Date of Discharge;
(c) Cause of Discharge.
9. If a Court of Inquiry was held on an injury state:—
(a) When (d) Particulars of Pension or Gratuity (if any)
(b) Where
(c) Opinion of Court

NOTE.—The foregoing particulars are to be filled in and A.F.B. 179 B (statement by the soldier) completed before the soldier is seen by the Officer in charge of the case.

Statement of Case.

NOTE.—The answers to the following questions are to be filled in by the Medical Officer in charge of the case. In answering them he will take care to confine himself exclusively to the medical aspect of the case and to such information as may be recorded in the invalid's military and medical documents. He will also carefully distinguish and clearly state when cases are due to venereal disease.

10. If brought forward for invaliding, disability in respect of which invaliding is proposed to be stated here. (Other disabilities should be reported upon in answer to question No. 19). If no disability enter "nil."
11. Date of origin of disability. *Left wrist right arm & Right thigh*
12. Place of origin of disability. *Left wrist*
13. Give concisely the essential facts of the history of the disability in so far as it is recorded in the Medical History Sheet bearing on the case and in other relevant official documents. *Right Ankle No Disability
Left thigh Superficial
A Cutty*

14. State whether the disabilities are
- | | (a) attributable to | (b) aggravated by |
|--------------------------------------------------------------------|---------------------|-------------------|
| (i.) Service during the present war | Yes | |
| (ii.) Previous active service.. .. . | No | |
| (iii.) Climate in pre-war service | No | |
| (iv.) Ordinary military service before the war | No | |
| (v.) Serious negligence or misconduct on the man's part. } | No | |

14 (a). If not due to any of these causes, to what specific condition do you attribute it? } *Med*

In all cases such as facial injuries, eye, ear, nose and throat, disabilities, &c., a specialist's report is to be attached with radiographs where possible; and in cases of amputation the exact position should be stated.

15. What is his present condition?

(A note should be made as to Weight in all cases when it is likely to afford evidence of the progress of the disability.)

He complains of no disability from either wound

16. Was an operation performed? If so, when and what was its nature?

17. If not, was an operation advised and declined?

18. *In the case of loss or decay of teeth,—Is the loss of teeth the result of wounds, injury or disease directly attributable to active service or through service under such conditions that dental treatment was unobtainable?

19. Give particulars of any other disabilities existing, but not in themselves sufficient to cause invaliding. State whether or not they are attributable to or have been aggravated by service during the present war, and if so, to what or by what specific military conditions?

20. Do you recommend—

(a) Discharge as permanently unfit?

(b) Change to United Kingdom?

Note—(b) is only applicable to soldiers invalided at Foreign Stations.

Refutation

John W. M. O.

ROYAL NEWFOUNDLAND REG.

Station

Date

Mersey Down Camp
Jan 8 1919

Medical Officer in charge of case.

* Loss of teeth on or immediately after active service, should be attributed thereto, unless there is evidence that it is due to some other cause.

No. 2218 Date 18-11-1918

- * (1) To the Officer i/c Records } 58 Victoria St. S.W.D.
- * (2) The Officer Commanding } Hazelton Town Camp, W. Incheba
- * (3) The Paymaster } 58 Victoria St. S.W.D. Station.

* Strike out that which is inapplicable.

Regimental No. 4082

Rank and Name Pte. - Lee, B.

Regiment or Corps 29 R. Newfoundland - B. Coy

has been granted a furlough from sent to H.Q. to as directed

His address while on leave will be Queen's Hotel

- I consider he is fit for
 - * I. ~~DUTY~~
 - * II. COMMAND DEPOT.
 - * III. EMPLOYMENT.

MILITARY HOSPITAL
Officer in charge F. Murray
ENDELL STREET. W. Hospital.
Station.

Four copies to be made, and one copy sent to each Officer mentioned above and one copy filed in the office.

In the case of men of the Royal Flying Corps, Royal Engineers and Army Ordnance Corps, two copies of Army Form W. 3016 will be sent to the Officer in charge Records concerned and one to the Paymaster, instead of one copy to the Officer i/c Records, the Paymaster and O.C. shown in the Schedule.

TO, - The Chief Paymaster,
Royal Newfoundland Regiment,
53 Victoria Street,
London, S.W.

Sir:-

Please charge the amounts set opposite my name to my account and pay it to the N.W.C.A. "Prisoners of War Fund" in quarterly instalments for the period of one year.

Commencing on the 1st July 1918.

Regtl. No.	Rank	Name	Amount	Signature.
4689	Pte.	Lee, B.	92 ⁵⁰	

I have the honour to be, Sir,
~~the~~
Your obedient servant.

Date

28-6-18

B. Lee
28.6.18



1ST. NEWFOUNDLAND REGIMENT

ALLOTMENTS

I, Benjamin Lee, Regl. No. 4082

hereby agree, until further notification by me, and in similar official form to make an Allotment of Twenty Dollars and Sixty Cents, per diem, from my Pay, to, and for the benefit of the undermentioned Person ^{and}/_{or} Persons, such payment to be made on proof of identity of, and production of the relative Identity Certificates by the Person ^{and}/_{or} Persons concerned, viz.:

Allotment begins December 1st 1917

Identity Certificate No.	Whether Wife, Child, other Relative or Friend	NAME (in full)	ADDRESS	AMOUNT (each person)
3258	Mother	Mrs. Saph. (Clay) Lee	Grand Bank	60
			Total Allotment, £	60

NOTE.—This form must be completed by the Officer Commanding Company, signed by the Volunteer, countersigned by the Officer Commanding Company and handed to the Paymaster as authority to make the required payments on application.

Sig.) W. H. G. H. G.
Officer Commanding
9 Company
Johns
Mr Lee
1917

(Sig.) Benjamin Lee
(Rank) Private

No 3839



1ST. NEWFOUNDLAND REGIMENT

ALLOTMENTS

I, Benjamin Lee, Regl. No. 4082

hereby agree, until further notification by me, and in similar official form to make an Allotment of Dollars and Sixty Cents, per diem, from my Pay, to, and for the benefit of the undermentioned Person and Persons, such payment to be made on proof of identity of, and production of the relative Identity Certificates by the Person and Persons concerned, viz.:

Allotment begins December 1st 1917

Identity Certificate No.	Whether Wife, Child, other Relative or Friend	NAME (in full)	ADDRESS	AMOUNT (each person)
3758	Mother	Mrs. Suppl. (Edg.) Lee	Grand Bend.	60
Total Allotment, \$				60

NOTE.—This form must be completed by the Officer Commanding Company, signed by the Volunteer, countersigned by the Officer Commanding Company and handed to the Paymaster as authority to make the required payments on application.

Sig.) [Signature]
Officer Commanding
Company 9
[Signature]
1917

(S) [Signature]
(Rank) [Signature]

Lee, B

4082

Hay Sept.

April 25, 1919

#4032 Pte. Benjamin Lee,

Grand Bank.

Dear Sir:p

Please find enclosed "Discharge
Certificate No. 2001."

Yours truly

Paymaster & O.i/c records
Captain.

The Royal Newfoundland Regiment

PROCEEDINGS ON DISCHARGE

1. No. 4082 Rank Pte Name Lee, Benjamin
 Intended place of residence Grand Bank

2. Occupation Fisherman
 Classification of soldier E Medical Category A.I.

3. The above named man is discharged in consequence of DEMOBILIZATION

Eligible for War Service Gratuity

4. His accounts are correctly balanced and I have impartially inquired into all matters brought before me, in accordance with Regulations.

Place ST. JOHN'S
 Date APR 1 1919
H. Mrs H.
 Commanding Discharge Depot
 The Royal Newfoundland Regiment

CERTIFICATE TO BE SIGNED BY SOLDIER ON DISCHARGE

5. I hereby acknowledge that I have received all my pay and allowances (including clothing allowance) and all just demands up to the present date, and hereby release the Discharge Depot, Royal Newfoundland Regiment, of all financial responsibility in my connection.

Place and date ST. JOHN'S
1-4-19
B. Lee
 Signature of soldier
J.A. Crowfoot
 Signature of witness

CIVILIAN RE-ESTABLISHMENT CERTIFICATE TO BE SIGNED BY SOLDIER

6. I hereby certify that I am in a position to resume civilian occupation immediately on discharge.

Place and Date ST. JOHN'S
1-4-19
Benjamin X Lee
 Signature of soldier
E. Wilcox Sgt
 Signature of witness

STATEMENT OF SERVICE

7. Enlisted for service 29-10-17 No of days on Military
 Discharged from service 11-4-19 plus 14 days Service 544

APPROVAL OF DISCHARGE

8. The discharge of the above mentioned soldier is hereby approved to be confirmed by the Officer in Charge, The Royal Newfoundland Regiment, twenty-eight days from date.

Place ST. JOHN'S
 Date APR 11 1919
R.H. Lait Capt
 Officer Commanding Discharge Depot
 The Royal Newfoundland Regiment

CONFIRMATION OF DISCHARGE

9. The discharge of above mentioned soldier is hereby confirmed.

Place St Johns' Med
 Date April 25/1919
A. Howley Capt
 Officer in Charge
 The Royal Newfoundland Regiment

*22
30
31
51
55
198*
22B 2079/2001

The Royal Newfoundland Regiment

Class for Demobilization:—

8

Report of Demobilization
Travelling Board, held on soldier for
discharge.

Discharge Depot: Headquarters The Royal Newfoundland Regiment

Date

31.3.19

Regimental No.

4682

Name

Pte Benjamin Lee

Address

Grand Bank, Fortune

Present Medical Category

A+

Recommended for:—

- (a) Immediate discharge
(b) ~~Standing Medical Board~~

Members of Board

R. H. Lait
O.C. Discharge Depot.

P. Peterson
Senior Medical Officer

See Burden
M. O. Depot

Civil Re-establishment Committee



I HEREBY CERTIFY that I have had an interview with the Vocational Officer of the Civil Re-establishment Committee or other recognized vocational agent of the Committee who has explained to me the provisions made by the Committee for the industrial re-training of disabled or partially disabled sailors and soldiers as well as the readiness of the Committee to assist any returned sailors and soldiers (whether disabled or not) to find employment. My decision is as follows:

To resume former occupation
Fishing

^{his}
Benjamin X Lee
man, [unclear]

Reg. No. 4082

J. H. Snow [unclear]
Signature of the Vocational Officer or his Representative.

Place ST. JOHN'S.

Date APR 1 - 1919 191

The Royal Newfoundland Regiment

DEMOBILIZATION OF

Reg. No. 4052 Rank PT4 Name Lee Benjamin
 Date of Enlistment 29.10.17 Address Grant Building District Fortune
 Occupation Labourer Classification for Discharge 3 Medical Category A1
 Recommendation S.M.B. Disability Rating

Passed to Demobilization Officer with following documents:—

N.F. P 36	B 268	B 121	N.F. Med.	D.F. 1	1
B 178	W 3494	B 122	Board 1st	" 2	
B 178a	D 400A	B 1915	do 2nd	" 3	3
B 179	D 400B	Form L	do 3rd	" 4	
B 179a	D 400C	Form K	do 4th	" 5	
B 179b	B 103	ME 2		" 6	
B 179c	B 120	M 93			

Date 31.2.19

H. M. H.
 O. C. Discharge Depot.

PARTICULARS FOR DEMOBILIZATION

1. Civil Re-Establishment.

I am in a position to resume civilian occupation.

Benjamin X Lee
marks

Particulars passed to Vocational Officer for information and action.

Date

2. Clothing.

Certified that Clothing Regulations have been complied with:—

- (a) Clothing Allowance payable #60.00
 (b) ~~Clothing Supplied~~ Abel Louster

Date 1-11-19

O i/c. Re-clothing.

3. Transportation and Release Certificate.

The above named has been provided with Travelling Warrant No. *R1122* to his home at *Greenbank* and Release Certificate No. *1916* issued.

Date *1-4-19*

J.A. Crawford
Demobilization Officer

4. Pay and Allowances.

The herein named soldier's accounts have been correctly balanced and all matters in connection therewith settled. He has received pay and allowances to *25-4-19*

Date *1-4-19*

H. News H
Depot Paymaster.

SUBJECT TO ADJUSTMENT OF OVERSEAS PAY ACCT

Discharge approved for *11-4-19*

Forwarded with following documents to O.C Discharge Depot.

N.F. P 36	B 268	B 121	N.F. Med	D.F. 1	<i>Form K</i>
F 178	W 3494	B 122	Board 1st	" 2	
B 178a	D 400A	B 1915	do 2nd	" 3	
B 179	D 400B	Form L	do 3rd	" 4	
B 179a	D 400C	Form K	do 4th	" 5	
B 179b	B 103	ME 2		" 6	
B 179c	B 120	M 93			

Date *1-4-19*

J.A. Crawford
Demobilization Officer.

APPROVED.

Documents as above forwarded to:—

Officer i/c Records.
Board of Pension Commissioners.

with following additional documents.

Eligible for War Service Gratuity

Date *APR 11 1919*

R.H. Sait Capt
O. C. Discharge Depot.

Received the above noted documents from O. C. Discharge Depot.

Date

To be used only for Special Reserve Recruits, and for Special Reservists enlisting into the Regular Army.

MEDICAL HISTORY

OF

Surname Lee

Christian Name Benjamin

Table I.—GENERAL TABLE.

Birthplace:—Parish Grand Bank County Nfld.

	SPECIAL RESERVE.		REGULAR ARMY.	
	on	day of	on	day of
Examined	29th	Oct. 1917		191
Declared Age	18 1/2	years	1	years
Trade or Occupation	Fisherman			
Height	5	feet 4 1/2 inches		
Weight		131 lbs.		
Chest Measurement	Girth when fully expanded... 33 inches			
	Range of Expansion... 5 inches			
Physical Development	Right	Left	Right	Left
Vaccination Marks	Arm			
	Number			
When Vaccinated				
Vision	R.E.—V=		R.E.—V=	
	L.E.—V=		L.E.—V=	
(a) Marks indicating congenital peculiarities or previous disease	(a)		(a)	
(b) Slight defects but not sufficient to cause rejection	(b)		(b)	
Approved by (Signature)	<u>Lamine Paterson</u>			
(Rank)	Major			
	Medical Officer.			Medical Officer.
Enlisted	at	<u>Grand Bank</u>	at	
	on	29th day of Oct. 1917	on	day of 191
Joined on Enlistment	Corps.		Corps.	
		Regtl. No. <u>4082</u>		
Transferred to	<u>1st Nfld Regt.</u>			
	ROYAL NEWFOUNDLAND REGIMENT			
Became non-effective by	on	day of 191	on	day of 191
[Signature]				
[Rank]				

Table II.—Only for admission to hospital or to the sick list in case of Warrant Officers treated in quarters.

Name of Hospital	Admitted to Hospital			Discharged from Hospital			Disease	Number Days in Hospital	Remarks bearing on the cause, nature or treatment of the case likely to be of interest or of future use. In case of syphilis, admission and re-admissions to hospital will be shown. The subsequent progress, including particulars of treatment out of hospital, transfers, etc., will be given in the special syphilis case sheet.	Signature of Medical Officer
	Day	Month	Year	Day	Month	Year				
MILITARY HOSPITAL ENDELL STREET, W.D.	22	10	18	18	11	18	Gew. R. arm - in L. thigh	27	Wounded 14.10.18 Slight. H. healed. Duty.	lt Buckley M.C.S.

NOTE.—This Form is only to be forwarded to the Ministry of Pensions in cases of discharge under para. 392 (xvi. or xvii.), King's Regulations, and in cases of discharge under para. 392 (vi.), King's Regulations, when the soldier has suffered impairment in health since his entry into military service, or in cases of transfer to Class P., or P. (T), of the Reserve.
 In cases of soldiers not discharged or transferred to the Reserve as above, but who are qualified by length of service to consideration for a Service Pension this Form is to be sent to the Secretary, Royal Hospital, Chelsea, S.W. 3.

Medical Report on a Soldier Boarded Prior to Discharge or Transfer to Class W., W. (T), P., or P. (T), of the Reserve.

1. Unit and Corps *Royal Newfoundland* } Former Trade or Occupation }
2. Regtl. No. *4082* 3. Rank *Pte* 7a. If the soldier claims previous service in Army, he should state—
 (a) Former Regts. or Corps; with Regtl. Nos.
4. Name *L. F. F.* }
 (Surname) (Christian Names)
5. Age last birthday.....
6. Posted for duty on..... at.....
 in category (or grade).....
8. If the disability is an injury was it caused
 (a) in action (b) on field service
 (c) on duty (d) off duty? (b) Date of Discharge;
 (c) Cause of Discharge.
9. If a Court of Inquiry was held on an injury state :—
 (a) When (d) Particulars of Pension or Gratuity (if any)
 (b) Where
 (c) Opinion of Court

NOTE.—The foregoing particulars are to be filled in and A.F.B. 179 B (statement by the soldier) completed before the soldier is seen by the Officer in charge of the case.

Statement of Case.

NOTE.—The answers to the following questions are to be filled in by the Medical Officer in charge of the case. In answering them he will take care to confine himself exclusively to the medical aspect of the case and to such information as may be recorded in the invalid's military and medical documents. He will also carefully distinguish and clearly state when cases are due to venereal disease.

10. If brought forward for invaliding, disability in respect of which invaliding is proposed to be stated here. (Other disabilities should be reported upon in answer to question No. 19). If no disability enter "nil."

11. Date of origin of disability. *G. S. W. Right arm* *Right thigh*
12. Place of origin of disability. *left.*
13. Give concisely the essential facts of the history of the disability in so far as it is recorded in the Medical History Sheet bearing on the case and in other relevant official documents. *Right arm cured. no disability*
left thigh superficial no disability

14. State whether the disabilities are
- | | (a) attributable to | (b) aggravated by |
|-------------------------------------------------------------------|---------------------|-------------------|
| (i) Service during the present war | Yes | |
| (ii) Previous active service.. .. . | no | |
| (iii) Climate in pre-war service | no | |
| (iv) Ordinary military service before the war | no | |
| (v) Serious negligence or misconduct on the man's part. } | no | |

14 (a). If not due to any of these causes, to what specific condition do you attribute it? } *W.A.*

In all cases such as facial injuries, eye, ear, nose and throat, disabilities, &c., a specialist's report is to be attached with radiographs where possible; and in cases of amputation the exact position should be stated.

15. What is his present condition? *All complaints of no disability from either wound.*
(A note should be made as to Weight in all cases when it is likely to afford evidence of the progress of the disability.)

16. Was an operation performed? If so, when and what was its nature?
17. If not, was an operation advised and declined?
18. *In the case of loss or decay of teeth,—Is the loss of teeth the result of wounds, injury or disease directly attributable to active service or through service under such conditions that dental treatment was unobtainable?
19. Give particulars of any other disabilities existing, but not in themselves sufficient to cause invaliding. State whether or not they are attributable to or have been aggravated by service during the present war, and if so, to what or by what specific military conditions?

20. Do you recommend—
- (a) Discharge as permanently unfit?
- (b) Change to United Kingdom?
- Note—(b) is only applicable to soldiers invalided at Foreign Stations.

Refutation

W.A.

ROYAL NEWFOUNDLAND REG.

Station *Anglesea Barracks Camp*

Date *June 27 1919*

Medical Officer in charge of case.

* Loss of teeth on or immediately after active service, should be attributed thereto, unless there is evidence that it is due to some other cause



Descriptive Return of a Soldier Discharged on Account of Disability.

INSTRUCTIONS—This form is to be completed in the case of every discharged soldier whose claim to pension, on account of disability, is to be submitted for the consideration of the Pensions and Disabilities Board.

This section should be completed in the Hospital at which a man is attending at the time of his examination by a Medical Board, or, if the man is not in Hospital, by the Medical Officer of the Unit or Command Depot. The Soldier should be given a full opportunity of examining it, as, if awarded a pension, his subsequent identification depends on his confirming this declaration. The "Rank," "Station" and "Date" should be in his own handwriting.

The form will then be attached to the Proceedings of the man's Medical Board and will be forwarded to the O. i. c. Records together with the remainder of the man's documents.

Changes occurring in the description subsequent to the date of admission to pension should be noted in red ink.

Name in full *Benjamin Lee*

Regiment from which discharged *Royal Newfoundland*

Regimental number *4082*

Intended address *Grand Bank, Fortune,*

Height on discharge *5* Feet *6*

Color of hair on discharge *Light*

Complexion *Fair*

Color of eyes *Blue*

Descriptive Marks *Left Leg & Left Thigh. Right Arm*

Figure on discharge *medium*

Christian name of Father *A*

Christian name of Mother *Fanny*

Wife's maiden name in full *—*

Date and place of marriage *—*

Christian names of children *—*

Place and date of soldier's birth *Grand Bank, March 30th 1900*

Nature and locality of civil employment required

I declare that I am the soldier referred to above and that all the particulars contained in the above statement are, to the best of my knowledge, correct.

(Soldier's signature in full) *Benjamin Lee*

W. Underlay (Rank) *Pte*

Station *St Johns*

Date *31-3-19*

I certify that the above named soldier signed the foregoing declaration in my presence, and that the above description and details are, to the best of my knowledge correct.

Medical Officer i/c Hospital,
Unit, or Command Depot.

Station

Date



April 22, 1919

#4082 Pte. Benjamin Lee,
Grand Bank.

Dear Sir:-

Referring to your application I enclose cheque for
Seventy dollars (\$70.00), being amount of first payment due
you on account of the "War Service Gratuity."

Yours truly

Paymaster & C. i/o Records
Captain,

17332

DEPARTMENT OF MILITIA.

WAR SERVICE GRATUITY.

St. John's, Newfoundland.

Declaration required of Officers and men of the Royal Newfoundland Regiment, who claims War Service Gratuity under Order-in-Council dated January 28th. 1919.

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 OFFICER I/C

RECORDS, PAY & RECORD OFFICE, ST. JOHN'S.

Christian name *Benjamin Lee* 2. Surname *Lee*

3. Rank *Pte* 4. Regt. No. *4082*

5. Address in full to which future payments of gratuity are to be forwarded. *Grand Bank, Nfld*

6. Date of enlistment in the Regiment. *Feb. 1917*

7. Name of dependent, if any, to whom Separation Allowance is being issued, or was being issued, immediately prior to your discharge.

8. Relationship of such dependents. *Fannie Lee Mother*

9. Address in full of such dependents. *Grand Bank*

10. Is said dependent, now, or was said dependent at any time in receipt of Separation Allowance on account of another soldier? *No*

11. Were you on active service only in Nfld. If so, give dates and particulars of such service. *Overseas*

12. Give total length of time which you served on active service, whether in Nfld. or Overseas.

From Feb. 1917 to Apr. 1/19 date of temporary discharge

13. Have you had more than one enlistment? If so, give particulars of discharge and re-enlistments, and under what regimental numbers.

No

14. 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.

Clothing allowance \$60 -
Board allowance 51

15. Have you been issued with a War Service Badge? *No*

16. Have you, during the present war, served in the Imperial Forces? *No*

17. 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*

18. 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? *No*

19. Are you now serving in the Rest? *No* If not give - (a) Date of discharge *Apr. 1/19* (b) Reason for discharge *Temporary*

New obligation

20. Did you at any time serve at the front in an actual theatre of War? If so give particulars of places and dates of such service. *France & Belgium - From Aug. 1918.*

express

21. (a) Are you receiving treatment from the Civil Re-Establishment Com. (b) If so are you in receipt of full pay and allowances from that Committee. *No*

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.

Signature of Applicant:

Benjamin Lee
his or her
mark

Place of Residence:

Grand Bank, Nfld

Declared before me at:

St. John's, Nfld

This

1st,

day of

April 1919

John W. Carthy
J.P.

Signature of Barrister of the
Supreme Court, Stipendiary Magistrate,
Notary Public, Justice of the Peace,
or Commissioner of affidavits.

POST DISCHARGE PAY.

Date paid	Paid Soldier	Paid Dependent	War Service Gratuity	Net amount due
			<i>None</i>	<i>400.00</i>

Certified Correct.

Paymaster.

[Signature]

Casualty Form—Active Service.

Regiment or Corps Royal Newfoundland 29-10-1898

Rank Private Surname Lee Christian Name Benjamin

Religion S. A. Age on Enlistment 18 years 2 months

Enlisted (a) 29-10-17 Terms of Service (a) Duration Service reckons from (a) 29-10-17

Date of promotion to present rank Date of appointment to lance rank

Extended { } Re-engaged { } Qualification (b)
or Corps Trade and rate

Occupation Isleman W. Lee 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				
		<u>A I</u>	<u>Embarked</u>	<u>2 JUL 1918</u>	
		<u>28.6.18</u>	<u>Disembarked</u>	<u>5 JUL 1918</u>	
			<u>Joined Battalion</u>	<u>Field</u>	<u>9.7.18 Busd. 13.7.18</u>
			<u>Wounded in Action</u>	<u>N-10-18</u>	
	<u>25 Gussp</u>	<u>W. Leonard</u>	<u>Stapes</u>	<u>19/10/18</u>	<u>W.D. 30378</u>
	<u>26 Gussp</u>	<u>W. Leonard</u>	<u>Leuchter</u>	<u>22/10/18</u>	<u>W 3083</u>
		<u>W. Lee, thigh - leg</u>			
			<u>For Officer i/c No 1 Infantry Section</u>		
			<u>3rd Echelon, General Headquarters</u>		

(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, Showing Smith, & Co.

NEXT OF KIN: - Mrs E. H. Lee, Grand Falls, Nfld.

No 3839



1ST. NEWFOUNDLAND REGIMENT

ALLOTMENTS

I, Benjamin Lee, Regl. No. 4082

hereby agree, until further notification by me, and in similar official form to make an Allotment of Dollars and Sixty Cents, per diem, from my Pay, to, and for the benefit of the undermentioned Person ^{and}/_{or} Persons, such payment to be made on proof of identity of, and production of the relative Identity Certificates by the Person ^{and}/_{or} Persons concerned, viz :

Allotment begins December 1st 1917

Identity Certificate No.	Whether Wife, Child, other Relative or Friend	NAME (in full)	ADDRESS	AMOUNT (each person)	
3258	Mother	Miss Joseph (Edy.) Lee	Grand Bank		60
				Total Allotment, \$	
					60

NOTE.—This form must be completed by the Officer Commanding Company, signed by the Volunteer, countersigned by the Officer Commanding Company and handed to the Paymaster as authority to make the required payments on application.

Sig.) Whaley J.
Officer Commanding
Company

(Sig.) Ben. Lee
(Rank) Private

John Lee
1917

(Separation Allowance Branch.)

Notice.

THIS STATUTORY DECLARATION is to be filled in correctly in every detail, and a complete reply must be given to each question.

Each statement is considered as being made on Oath and the form is to be signed before a Barrister of the Supreme Court, Stipendiary Magistrate, Notary Public or Justice of the Peace, and returned to

THE PAYMASTER
Separation Allowance Branch,
St. John's Nfld.

1.

Name in full of Soldier.	Rank	Reg't. or Unit	Reg't. No.
Benjamin John Lee	Pte.	Rfld. (Royal)	4082

2. Age of Soldier

19 years

Married or Single.

Single

3. Name in full of Mother

Elizabeth Lee

Age

43

Occupation

Housewife

Permanent Address.

Grand Bank

4. Give name of your husband. Age Occupation Where employed.

cf. no. 7.

5. If your husband is not supporting you state the reason.

cf. no. 7.

6. If your husband is a chronic invalid and totally incapacitated state nature of malady. (A medical certificate must be enclosed with this document stating from what date husband has been totally incapacitated and for how long incapacity is likely to continue)

cf. no. 7.

7. If you are a widow, state date and place of death of your husband.

Nov. 2/1915 at Grand Bank

8. Have you married again since death of above mentioned husband?

No.

9. Names of your other Children Address in Full. Age. Occupation Married or Single.

Morgan Forte Lee	Grand Bank	13	Line at home	Single
Fanny Lee	Do.	15	Do.	Do.
Robert Lee	Do.	10	Do.	Do.
Margaret Lee	Do.	9	Do.	Do.
Bliss Henry Lee	Do.	6	Do.	Do.
Joseph Lee	Do.	4	Do.	Do.

(8)

10. State amount earned by ^(a) yourself ^(a) \$100⁰⁰.
~~(b) your husband~~

11. State amount and source of any other income. *no other income.*

12. State value of Real Property belonging to you and your husband. *\$100⁰⁰ to \$150⁰⁰ would represent full value.*

13. State value of personal property belonging to you and your husband. *Nothing, except a very little furniture.*

14. If husband is dead state value of Real and personal Property left by him. *cf. 12.*

15. Actual amount contributed by soldier during the year prior to enlistment. *Estimated \$200⁰⁰ to \$300⁰⁰.*

16. Was this amount contributed weekly or monthly. *As need required. no regular method of payment.*

17. Did this amount include payment of son's Board etc. *his earnings went into the common fund & all shared alike.*

18. State your son's trade or occupation prior to enlistment. *Fisherman*

19. State amount of his wages per week. *cf. no 15.*

20. State name and address of his last employer. *S. Hayes*

21. State amount of support monthly from son since enlistment. *cf. 22.*

22. State amount of allotment received by you from son monthly. *One amount of \$15⁰⁰ received, but by mistake came in name of his father, deceased & had to be returned.*

23. From what date did you receive Allotment? *For one month only, viz. Dec. 1917. cf. 22.*

24. Actual amount contributed by other children *Weekly Monthly. Morgan & Lee earned \$15⁰⁰ last summer.*

25. Are any of these children in the employ of you or husband? *no.*

26. If not receiving support from other children state cause, explain fully. *Too young to earn.*

27. With whom are you residing at present. *at my own home.*

28. Have you made a previous claim for Separation Allowance,? If not, Why? Give particulars. *no. just applied for & received papers, enclosed herewith.*

29. Are you already in receipt of Separation Allowance from any source? If so, how much? *no.*

30. Are you in receipt of any payment from any Patriotic Fund? If so, How much.

no

31. Was the Soldier at time of his enlistment an employee of the Newfoundland Government.

no.

32. In what capacity and in what place.

cf. 31.

33. Is he in receipt of a salary as such while serving in the 1st. Nfld. Regt. If so, how much?

no. cf. 31.

I herewith make this solemn declaration conscientiously believing the same to be true and knowing it to be of the same force and effect as if made under Oath and in witness of the Evidence Act.

Signature of Applicant..... Elizabeth ^{Shee} ~~Shee~~

Place of Residence Grand Bank

Declared and subscribed before me at..... Grand Bank

this 12 day of February, 1918.....1918

Signature of Barrister of the Supreme Court, Stipendiary Magistrate, Notary Public or Justice of the Peace.

Amos David J.P.

After questions and answers were read over & explained to applicant

This application must be signed by two responsible parties one of whom must be a Clergyman, the other a representative of your local Patriotic Fund Committee, certifying that to the best of their knowledge after careful investigation, the above statements are correct, and the above Soldier, first mentioned, is the sole support of the applicant.

Signature of Clergyman Wm. Grimes

Signature of Member of Patriotic Fund Committee. William Fossey

Approved 2/18/18

Handwritten initials and signatures at the bottom of the page, including 'W.F.R.' and other illegible marks.

Feb. 15th., 1918.

Rev. William Grimes,
Grand Bank.

Dear Sir,-

An Application has been made by Pte. Benjamin Lee, #4082 of the Royal Nfld. Regiment, to have Separation Allowance granted to his widowed mother, Mrs. Joseph Lee of Grand Bank.

The Application has been in my hands for about three weeks, and I am not sure whether I forwarded you a Statutory Declaration to be completed by Mrs. Lee.

In case I have not already done so, I now enclose one which, kindly have Mrs. Lee sign, in the presence of her Magistrate, and return to me at your earliest convenience, and oblige.

Yours faithfully,

Capt. & Paymaster.

1180

Jersey Ave
Fortune Bay
Feb 18th
1/21

Department of Militia
St Johns.

Rfd

Dear Sir

I am writing to ask how is it - I have not received any money this last year I received (\$70.00) dollars from the Dept. on April 28th 1919. I have the recit of the money first payment. I have been wounded three times (arm leg & thigh) I have been sick for a while a piece of sharpnel worked out my knee. Is this the way we are treated only (\$10.00) for what we went through. I have removed from Grand Bank to Jersey Ave my no 4082. I fought through three years war hoping to get help soon

I am

yours Truly

4082 Benjamin Lee
Jersey Ave
Fortune Bay

Payments

P.T. 0

Total Amount due. \$280⁰⁰

Apr 28	70 ⁰⁰	Notes	to Grant Bank
May 26	70 ⁰⁰	.	.
June 26	70 ⁰⁰	.	to Y Bank
July 26	70 ⁰⁰	.	to . . .

\$280⁰⁰

Account Square
Wrayson

April 15, 1921.

Benjamin Lee,
Jersey Hr.,
F.B.

Dear Sir:

With reference to your letter of Feb. 18, I beg to state that your account is square, and the following is a statement of same:

Total amount due you		\$280.00
Apr. 28	\$70.00	Mailed to Grand Bank
May 26	70.00	" "
June 26	70.00	" "
July 26	70.00	" "
	<u>\$280.00</u>	

Yours truly,

Capt.
For Paymaster.

June 6, 1921.

Benjamin Lee, Late 4082 Royal Wfld. Regt.,
Jersey Hr.,
F.B.

Dear Sir:

With reference to your letter of April 16th. I find that you were entitled to \$280.00 War Service Gratuity, and that in your application for same, you instructed us to send payments to Grand Bank. In accordance with these instructions, four cheques of \$70.00 each were mailed to Grand Bank, and all four cheques have been paid by the Bank. Three of them were cashed at the Bank of Nova Scotia, Grand Bank and one at the Canadian Bank of Commerce, Grand Bank.

Yours truly,

Major

Paymaster.

Grand Bank,
Jan. 4/18.

Corp. S. F. Chase,
Co. John's.

Dear Corp.,
Enclosed herewith is

4082 certificate you requested.

May I ask a favour of you.

Pte. Benj. Lee is the only son of his mother & she a widow. The next oldest boy is 13 years. She has a hard family & each year finds them in destitute circumstances. The matter was overlooked earlier. She should get a separation allowance & he should assign her part of his pay. She did not know this until I told her to-day & I do not suppose he ~~it~~ does either.

Will you see that enclosed application reaches the proper authorities? I do not know to whom it should really go. Will you also interview Pte Lee, explain to him about assigning pay to his mother & urge him to do so at once? I think she should get help. Unless he assigns her something she has no claim upon the Patriotic Fund, if she should need extra help.

Over

I am speaking of the matter to Mr. Rayle,
our Meth. chaplain in St. Johns.
With best wishes for a happy &
prosperous new year.

Yours sincerely,
Wm. Grimes.

Grand Bank,
Jan. 4/18.

Gentlemen, 11082

Re. Benj. Lee of Grand Bank
is the only support of his mother and
she is a widow. She has six children
whose ages range from 15 yrs. to 4 yrs.
As I understand it she is eligible for
separation allowance.

Will you please furnish me with
the necessary forms so that the matter
can be attended to at once?

Yours Faithfully,
(Res.) Wm. Crimes.

Jan. 25th. 1916

Rev Wm. Grimes,

Grand Bank.

Dear Sir:-

Referring to your letter of January, 4th., I enclose Form of Statutory Declaration, to be completed by Mrs. Jas. Lee, in the presence of her Magistrate, and return to me at your earliest convenience.

As soon as this received, I shall take up the matter of granting Separation Allowance to her, with the Minister of Militia.

Yours faithfully,

Capt. & Paymaster.

G. Bauer
July 19 18.

J. M. Rowley Esq
St Johns;
near St.

Am returning his cheque
Mrs Lee has been dead for some
time, can you make cheque
payable to Elizabeth Lee, (Pls
send Lee's notes) the identity
certificate is all right.

James County,
N. C.

Am writing for Mrs Lee as she
cannot herself
M. 2.

2. 9. 73
50
10. 23

4082

4082

Feb. 22nd. 18

Mr. M. Forsey,
Grand Bank.

Dear Sir:

Your letter to hand enclosing cheque payable to Joseph Lee.

For your information I may say that I have had it altered and made payable to Mrs. Joseph Lee.

In future all cheques will be made payable to her.

Yours truly,

Jersey Hr
Fortune Bay
April 16th
1121

11914

To Department of Militia
St. John's

[Handwritten signature]
Dear Sir

I have written to you before for
to know how it is I have not received any
money from the war. I received (\$70.00) April
28th 1919 & have not received any money
since all the other have received theirs. I have
been wounded three times Left leg Left
thigh Right arm & on November there
was a piece of shrapnel worked out my knee
& I was laid up for a time. I lived at Grand
Bank but I am removed to Jersey Hr Fortune
Bay hoping to have an answer soon is this
all I get for what I went thro ugh my No. 4082
entitled to four payments I am

and all four have
been paid

[Handwritten initials]

yours Truly
Benjamin Lee
Jersey Hr Fortune Bay

Cheque no.

Apr 26. — 17332. OK.

May 26. 20259. O.K. Commerce

June 26 24290. OK

July 26 1869 O.K.

ST. JOHN'S, April 1st /19

Royal Newfoundland Regiment.

Billeting Account,

To Mr. B. Lee

Billeting Soldiers as undermentioned

from Feb 8th /19 to Mar 29th /19

4082. Mr. B. Lee

51 50

NO. OF	3.00
AMOUNT	14973
DATE	Feb
BY	EW
FOR	
REMARKS	

Certified correct for \$ 51. 50

Am. Lebrunton

For Billeting Officer.

R.J.

mark with EW

Receipt for ~~ARMY~~ Book 64

No. 4082 Name B. Lee

To Certify that I have received the AB 64 of the above
named soldier.

Name Benjamin Lee

Date March 19th 1921

Place Jersey Hr. Fortune Bay

N.B. For completion and return to the Department of Militia
Insert in corner of envelope "AB 64"

Fold Here

ON HIS MAJESTY'S SERVICE

To the Officer in Charge of Records,

Royal Nfld. Regt.

Dept. of Militia,

ST. JOHN'S, Nfld.

Fold Here

OCT 5 1921 1921.

The accompanying **Victory Medal** and/or **British War Medal**
is/are forwarded herewith to

Benjamin Lee

in respect of his service as No. 4082 Rank Pte.

Name B. Lee Royal Nfld. Regt.

Receipt of the same should be acknowledged hereon.

Received Oct 24th 1921

Signature B. Lee

Date Oct-25th 1921

Address Benjamin Lee Jersey Hr

Hr Breton
[P.T.O.]

Squadron, Troop, Battery and Company Conduct Sheet.

Temporary

Army Form B. 121.

W. P. Griffith & Sons Ltd., Printers, Old Bailey, E.C. 4.
 (1082) W1938/M499 800m 6/16m6 03 56

Forms
B. 121.
40.

Royal Newfoundland Regt.

Number of Sheet

Signature of O. C. Company

Regimental Number and Name No. <i>4082 Lee B.</i>		Enlistment Age on _____ years _____ months		Trade	Good Conduct Badges, Service Pay or Proficiency Pay
Joined _____ Date _____		Place and Date of Enlistment <i>St. John's 29-10-17</i>		Religion	
Joined _____ Date _____		Period of { with Colours <i>179</i> years. with Reserve <i>365</i> years.		Place of Birth	
Joined _____ Date _____					

Place	Date of Offence	Rank	Cases of Drunkenness	OFFENCE	Names of Witnesses	Punishment awarded	Date of award or of order dispensing with trial	By whom awarded	REMARKS
<i>Hazley Down 29th / 18.</i>		<i>Pte.</i>		<i>Absent without leave from Tattoo 29/11/18 till 1415 o'clock 30/11/18.</i>	<i>Capt. White</i>	<i>Deprived 1 day pay 3/12/18.</i>		<i>Lt. Col. Barton DSO</i>	<i>Forfeit 2 day pay</i>
Demobilized St. John's, 25 th / 19									
To be carried over									

Army Form B. 121.

The Royal Newfoundland Regiment

DEMOBILIZATION OF

Reg. No. 4087 Rank PLC Name Lee Benjamin
 Date of Enlistment 29.10.17 Address Grand Banks District Fortune
 Occupation Fisherman Classification for Discharge 6 Medical Category AI
 Recommendation S.M.B. Disability Rating

Passed to Demobilization Officer with following documents:—

N.F. P36	B 268	B 121	N.F. Med.	D.F. 1
B 178	W 3494	B 122	Board 1st	" 2
B 178a	D 400A	B 1915	do 2nd	" 3
B 179	D 400B	Form L	do 3rd	" 4
B 179a	D 400C	Form K	do 4th	" 5
B 179b	B 103	ME 2		" 6
B 179c	B 120	M 93		

Date 31.3.19

H. M. H.
O. C. Discharge Depot.

PARTICULARS FOR DEMOBILIZATION

1. Civil Re-Establishment.

I am in a position to resume civilian occupation.

Benjamin X Lee
marks.

Particulars passed to Vocational Officer for information and action.

Date

2. Clothing.

Certified that Clothing Regulations have been complied with:—

- (a) Clothing Allowance payable \$60.00
 (b) Clothing Supplied Amblouster, Lee

Date 1-4-19

O i/c. Re-clothing.

3. Transportation and Release Certificate.

The above named has been provided with Travelling Warrant No. *R1122* to his home at *...* and Release Certificate No. *1916* issued.

Date *1-4-19*

J.A. Snowford
Demobilization Officer

4. Pay and Allowances.

The herein named soldier's accounts have been correctly balanced and all matters in connection therewith settled. He has received pay and allowances to *25-4-19*

Date *1-4-19*

SUBJECT TO ADJUSTMENT OF OVERSEAS PAY ACCT.

H. News H
for Depot Paymaster.

Discharge approved for *11-4-19*

Forwarded with following documents to O.C Discharge Depot.

N.F. P 36	B 268	B 121	N.F. Med.	D.F. 1	<i>Form K</i>
F 178	W 3494	B 122	Board 1st	" 2	
B 178a	D 400A	B 1915	do 2nd	" 3	
B 179	D 400B	Form L	do 3rd	" 4	
B 179a	D 400C	Form K	do 4th	" 5	
B 179b	B 103	ME 2		" 6	
B 179c	B 120	M 93			

Date *1-4-19*

J.A. Snowford
Demobilization Officer.

APPROVED.

Documents as above forwarded to:—

Officer i/c Records.
Board of Pension Commissioners.

with following additional documents.

Eligible for War Service Gratuity

Date **APR 11 1919**

R.H. Sait Capt.
O. C. Discharge Depot.

Received the above noted documents from O. C. Discharge Depot.

Date *12/4/19*

J.P. Gowers
for Officer i/c Records