2193349 ~~49~~ 196th Draft ORIGINAL

ATTESTATION PAPER.

No.

Folio.

196th draft

CANADIAN OVER-SEAS EXPEDITIONARY FORCE.

QUESTIONS TO BE PUT BEFORE ATTESTATION.

(ANSWERS.)

1. What is your surname? ... Lee
1a. What are your Christian names? ... John Edward
1b. What is your present address? ... 1523 Victoria Ave. Regina, Sask
2. In what Town, Township or Parish, and in what Country were you born? ... Spring Valley, Wis. U.S.A.
3. What is the name of your next-of kin? ... Mrs. Andrew Lee
4. What is the address of your next-of-kin? ... Glenwood City, Wis. U.S.A.
4a. What is the relationship of your next-of-kin? ... Mother
5. What is the date of your birth? ... Dec. 24th 1890
6. What is your Trade or Calling? ... Clerk
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
13. Have you ever been discharged from any Branch of His Majesty's Forces as medically unfit? ... No
14. If so, what was the nature of the disability? ... No
15. Have you ever offered to serve in any Branch of His Majesty's Forces and been rejected? ... No
16. If so, what was the reason? ... No

DECLARATION TO BE MADE BY MAN ON ATTESTATION.

I, John Lee, 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.

John Lee (Signature of Recruit)

Date May 1st 191 [illegible] (Signature of Witness)

OATH TO BE TAKEN BY MAN ON ATTESTATION.

I, John 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, 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.

John Lee (Signature of Recruit)

Date May 1st 191 [illegible] (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 Regina, Sask this 2nd day of May 191 7

[illegible] (Signature of Justice)

M. F. W. 23.
750 M.—1-17.
H. Q. 1772-39-841.

N.B.—ATTENTION IS DRAWN TO THE FACT THAT ANY PERSON MAKING A FALSE ANSWER TO ANY OF THE ABOVE QUESTIONS IS LIABLE TO A PENALTY OF SIX MONTHS' IMPRISONMENT.

196th Draft

Description of John Lee on Enlistment.

Apparent Age 20 years 4 months.
(To be determined according to the instructions given in the Regulations for Army Medical Services.)

Height 5 ft. 6 ins.

Chest measurement.
- Girth when fully expanded 34½ ins.
- Range of expansion 2½ ins.

Complexion Fair

Eyes Hazel

Hair Light Brown

Religious denominations.
- Church of England
- Presbyterian
- Methodist
- Baptist or Congregationalist
- Roman Catholic
- Jewish
- Other denominations Lutheran (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).

R/E. 20/20.
L/E. 20/20.
Hearing Normal.

CERTIFICATE OF MEDICAL EXAMINATION.

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

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

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

Date April 28th 191 7. R. J. MacDonald Lieut.

Place Regina Camp Medical Officer.

*Insert here "fit" or "unfit."

NOTE.—Should the Medical Officer consider the Recruit unfit, he will fill in the foregoing Certificate only in the case of those who have been attested, and will briefly state below the cause of unfitness:—

Mobilization Board

J. C. Black Lieut.-Col.
A. Fraser

CERTIFICATE OF OFFICER COMMANDING UNIT.

John Lee having been finally approved and inspected by me this day, and his Name, Age, Date of Attestation, and every prescribed particular having been recorded, I certify that I am satisfied with the correctness of this Attestation.

(Signature of Officer) Lt.
O. C. 196th West Univ. Batt. Draft

Date May 191 7.

REGIMENTAL DOCUMENTS

NAME LEE JOHN EDWARD REGT. NO. 2193349 UNIT EORD H. Q. FILE NO.

	CONTENTS	DATE RECEIVED	TO WHOM FORWARDED	DATE FORWARDED	M. F. W. 2505 REFERENCE	NON-EFFECTIVE BY
	ATTESTATION PAPER (M.F.W. 23, 133, or 51)					DEATH
2	CASUALTY FORM (M.F.W. 54 or A.F.B. 103)					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
	DENTAL HISTORY SHEET (M.F.B. 465)					Category
2	MEDICAL REPORT (M.F.B. 227 or A.F.B. 179)				1	Demob
	MEDICAL EXAMINATION (M.F.W. 129)					
	TRANSFER CLOTHING STATEMENT (M.F.W. 97 or D.O.S. 2)				18210	
	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
	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)					
V	Misc					
3	Rpts 1394					
1	Card 5009					
1	Misc					
1	Enquiry					
1	RPS					
1	RPS					
1	Medical -					

407449

W. 2589
100M-11-18

SURNAME. Lee.

CHRISTIAN NAMES John Edward.

REGL. No. 219349 RANK Pte

UNIT 196th (1st R.D.)

FORMER CORPS Nil.

"O"/12 CARD NO.

S.O.S. Dis. 6/4/19 Demob. DC. 99 of 19-4-19 #20D. FOLL.

Bn.

NEXT OF KIN.

NAMES IN FULL Lee, Mrs. Andrew.

RELATIONSHIP TO SOLDIER Mothers.

ADDRESS Glenwood City, Wis. U.S.A.

CHANGE OF ADDRESS

COUNTRY OF BIRTH U.S.A. Spring Valley Wis. DATE Dec. 24th. 1890.

PLACE OF ATTESTATION Regina, Sask. DATE May 1st. 1917.

O/S. 2-6-17 860a

R/C. 1-4-19 295/48 Pte

L. L. 10437. M. & D. 7253. /

M. F. W. 22. 100M.—11-16. H. Q. 17 2-39-339.

MARRIED SINGLE Yes. WIDOWER

TRADE OR CALLING Clerk. RELIGION Lutheran.

DESCRIPTION.

APPARENT AGE 26 YEARS 4 MONTHS

HEIGHT 5 FEET 6 INCHES

CHEST MEASUREMENT 34 1/2 INCHES EXPANSION 2 1/2 INCHES

COMPLEXION Fair. EYES Hazel. HAIR Lt. Brown.

DISTINGUISHING MARKS Nil.

MEDICAL EXAMINATION. PLACE Regina, Sask. DATE Apr 25th. 1917.

Present Address - 1523 Victoria Ave., Regina, Sask.

NAME Lee John Edward

REGT'L No. 2193349

H. Q. FILE No. 649.

RANK AND CORPS Pte P.P.C.L.I. (From m. 196th Bn (1st R.R.C.))

FOLLOWS No.

FOLLOWS

CABLE No.	CABLE Date	NATURE OF CASUALTY
M6394 84-2	24-11-17	a. admt. 149th Field Amb. Nov. 17th, 1917 (contusion leg)

L. L. 26438. M. & D. 8207.

M. F. W. 42—50M.—8-17.
H. Q. 1772-39-893.

LIST No.	HOSPITAL	DATE OF ADMISSION	REMARKS
Q.69[2]	#1497 Fd. Amb.	17/11/17	Shell Contusion. Leg.
Q.71'	#46 Cas. Clear. Stn..	17-11-17	" " E. Cont. Reg. 20-12-17
a-25	No 5 Gen. Boulogne	19-11-17	" " " "
a 79[2]	#12 Conv. Depot, Aubengue	24-11-17	Shell Cont. Leg
Q107[2]	Discharged:	1-1-18.	" " " E. Cont. Reg. 30-1-18.

FORM R. 149.
7106—250m—7/2/17.

Name Lee. John. Rank Pte. Reg. No. 2193349.
Edward.
Unit P.P.C.L.I. BH.
Next of Kin U.S.A.

Date 1917	Movement	Place	Casualty	List No.	Notified N/K O.	W.O. List
17-11	149. F.A.	Shell	Contus. Leg.	469	3/394	8359.
17-11	46. C.C.S		Do	471		8395
19-11	55. G.H. B'logne		Do	475		11634
24-11.	12. Cons Depot. Aubengue		"	479		16698.
1-1-18	Disch. To 3 R.C.	Marlboro. W.	Do	470		18070

Date		Movement	Place	Casualty	List No.	Notified N/K O.		W.O. List

Q.B.

Number 2193349 Rank Pte.

Surname LEE

Christian Name John Edward

Unit P.P.C.L.I. Theatre of War France

Date of Service 9-9-17

Remarks

Latest Address ~~Beaver Lodge Alta~~
~~Regina~~
Halcourt
Alta.

Roll No. B Page 4227

Cancel 3.10.64 (Dept.)

Sec. 22800 Desp. Jul 17, 1921

Replacement on Prepayment

BWM + VM →

P.O. Box 1048, Libby, Montana, U.S.A

DESP. NOV 5 1964
DEGN NO.

FORM D.M.S 1300.

SURNAME: Lee. | CHRISTIAN NAME OR NAMES: J. | REG. NO.

RANK: Pte. | UNIT: E.O. R.P.C.L.I. | Co. E. | TROOP | 219349. BATTY.

HOSPITAL | DATE OF ADMISSION

1. # 6. Cas. Clg Stn. HOSP. 17.11.17.
2. 149 Fld Amb. HOSP. 17.11.17.
   55 Gent. Boulogne 19.11.17
3. 12 Convl P. Aubengue HOSP 24.11.17
4. HOSP

DIAGNOSIS Shell Cont. Leg & w

1.

2-

3.

DISPOSITION | DATE

A 24.11.17 a 71
22.11.17 a 69 2
29.11.17 a 75.
4.12.17 a 79 2
8.1.18 D 107 (2)

REMARKS

Dis 1.1.18.

A.M.D. 2 DEPT.

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

EPITOME OF HOSPITAL TREATMENT

	HOSPITAL	ADM.
1.		
2.		
3.		
4.		
5.		
6.		
7.		

Army Form B, 103—II.
Part II.

(SERVICE AND CASUALTY FORM Part II).

Regiment or Corps _____ Regimental Number 2193349.

*Substantative Rank Pte. Surname Lee Christian Names John Edward.

*Acting Rank _____

(* To be entered in pencil to facilitate alteration.)

(A) Report: Date.	(A) Report: 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
18/12/18	6gBD		Trans to Engr posted to East Ont Reg depot.	Witley	18/12/18.	H.R.2.
			Ca Hewett			Lieut. for Lt.-Col., Canadian Section, G. H. Q. 3rd Echelon.
31-12-18	E.O.R.D.	D. 322	T.O.S. and attached 4th Res Bn.	Witley		
9-1-19	E O R D	Dº 7.	Ceases to be on Command 4th Res Bn	Seaford	11-1-19	Pt.2.D.G
			Detailed to Depot Coy.			
TAKEN ON STRENGTH Part 11 Ord No: 33			T. O. S. to Kinmel Park, Seaford			Pt.11.D.O.
EMBARKED FOR CANADA			Rhyl, M.D..... Wing			
15/3/19			V.F.T.S. Canada			
			A. b. Liverpool. 5P M			
			24-3-19			

Lieut.
i/c Records, M.D. 12.
Kinmel Park Camp.

Lieut.
for Officer Commanding,
Regtl, Depot.

To be folded on this line.

Nothing to be written in this margin.

W1889—PP1150 500,000 5/18 G.W.P.Co(3490)

(A) Report		(B)	(C)	(D)	(E)	(F)
Date.	From whom received	Authority of Part II. of Orders	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.	Place of casualty	Date of promotion, reduction, reversion, casualty, &c.	Remarks, and initials and rank of an officer
			REGINA. - T.O.S. DISPERSAL AREA "O"			
			R.O. 1420. (220 99-629) MAJOR			
			DISPERSAL AREA "O"			
			O/SEAS Discharged on Demobilization - REGINA			
			220 99 - 630 MAJOR			
			DISPERSAL AREA "O"			
			[signature]			

Nothing to be written in this margin.

2193349

Fill in only.—Unit, Number, Rank and Name.

M. F. W. 54. (A. F. B. 103.)
350M.—5-16
H. Q. 1772-39-9-20.

Casualty Form.—Active Service.

Unit, Regiment or Corps 196 Western Universities Batt. Draft

Regimental No. 2193349 Rank ~~2nd~~ Pte Name John Edward Lee

Enlisted (a) May 1/17 Terms of Service (a) S.E. For 4 Yrs Service reckons from (a) May 1st/17

Date of promotion to present rank ..... Date of appointment to lance rank ..... Numerical position on roll of N. C. Os. .....

Extended ..... Re-engaged ..... Qualification (b) Clerk

Report Date	Report From whom received	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
		Embarked	Halifax	2-6-17	
		Dis "	Liverpool	9-6-17	✓
14-6-17		DO. 7TH RESERVE BATTALION. TAKEN ON STRENGTH FROM Canada	Seaford	10-6-17	B.O. Pt 2. — 142.
10-9-17		7TH RESERVE BATTALION. PROCEEDED OVERSEAS TO S.P.B.L.1	Seaford	9-9-17	A.F.B. 10 217.
					H.M. Douglas LIEUT. & ADJT. 7TH RESERVE BATTALION
11-9-17.	3rd CBD.	Arrived and taken on the strength.		11-9-17.	NR.279. Pt 11 Ords. 77.
26-9-17.	do	Left for Cdn Corps Reinf Camp.	Field.	26-9-17.	N.R. 594.
27-9-17.	C.C.R.Camp.	Arrived at Cdn Corps Reinf Camp.		27-9-17.	N.R, 60.
2-11-17.	C.C.R.C.	Left to join Unit in the	Field.	2-11-17.	N.R.27.
10-11-17.	O.C. Bn.	Joined Unit in the	Field.	4-11-17.	B.213.
17.11.17	46 CCS.	Shell Cont L. Leg. adm	46 CCS	17.11.17	B 5444.
24-11-17	55 Gen.	Contus Thigh. To No 12 Con Depot.		24-11-17.	B.8310.
19-11-17.	55 Gen.	GSW. L.Leg. Adm to 55 Gen Hospital.		19-11-17.	B.8243.
24-11-17.	12 Conv Dep.	Contus Thigh. Adm to 12 Conv Depot.		24-11-17.	B.8889.
24.11.17	Unit	Rejoined	n/s.	17.11.17	B213.

(a) In the case of a man who has re-engaged for, or enlisted into Section D. Army Reserve, particulars of such re-engagement or enlistment will be entered.
(b) e.g. Signaller, Shoeing Smith, etc., etc, also special qualifications in technical Corps duties.

[P.T.O.

CERTIFIED CORRECT. 17 SEP 1917 CANADIAN RECORDS, LONDON

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				
19-11-17.	46. C.B.D.	Shell Concn L Leg Adm 17th Stat To 28 A.Tn		19-11-17.	C.1054.
4-1-18.	3rd C.B.D.	T.O.S. from No 12 Conv. Camp.		4-1-18.	N.R. 190.
1-1-18.	12 Con Dep.	Cont Wnd Thigh To 3 Rest Camp.		1-1-18.	C.6276.
11-1-18.	3rd C.B.D.	Injured Leg Classed A.		11-1-18.	W3339-310.
3-1-18.	3 Rest Camp.	Classed "A" and transf to 3rd C.B.D.		3-1-18.	N.R. 186.
14-1-18.	3rd C.B.D.	Left for C.B.R. Camp.	Field.	14-1-18.	N.R. 898
15-1-18.	C.B.R. Camp.	Arrived at C.B.R. Camp.		15-1-18.	N.R. 86.
18-1-18.	" "	Left for Unit	Field.	18-1-18.	N.R. 96.
2-2-18.	5 C.Bn.	JOINED UNIT	" "	28-1-18.	B 213.
2-3-18.	5 C.Bn.	Classed "B1" by A.D.M.S. Cdns and despatched to 3rd Div Area Commdt.		20/2/18.	B213.
8-2-18.	A.D.M.S. Cdns.	Atrophy Lt Leg. Classed "B1"		8-2-18.	W3339-K.H. 18-10720.
1-5-18.	O.C. Cdn Fob Pool.	Transferred to 3rd Cdn	Div Emp Coy.	1-5-18	K.R. 19480. Part II Ords. 45 d/
"	"	D.O.S. do		2-5-18	" " 34 d/ 24-5-18
21-9-18	Unit	Granted 14 days leave		15-9-18	B213 Pt. 2 59 5-10-18
19-10-18.	"	Reported from Leave of Absence.		11-10-18.	B213 of 3rd Div Emp Coy.
22-9-18	A.D.M.S.	Classified A		22-9-18	W.3339/731 Pt. 2 59 5-10-18
	A.A.G.	Transferred to O.P.C.L.D.			K.R. 15391/3
7-10-18	Cdn Sect.	S.O.S. 3rd C.D.E. Emp. Coy		7-10-18	Pt. 2 ord. 61 d/ 1918
8-10-18.	" "	T.O.S. of strength of P.O.C.L.D. on transfer from 3rd Cdn Div Emp Coy.		8-10-18.	K.R. 15391/3.
27-10-18.	3rd Div Wing C.C.R.C.	Arrived fr 3rd Div Wing C.C.R.C.		27-10-18.	Pt II Ords. 100 d/ 19-10-18. N.R.A. 1716.

CANADIAN EXPEDITIONARY FORCE

DISCHARGE CERTIFICATE

THIS IS TO CERTIFY that No. 2193349 (Rank) Pte.

Name (in full) Lee John Edward. enlisted in

the 196th Bn.

CANADIAN EXPEDITIONARY FORCE at Regina on the 1st 2nd

day of May 1917.

He served in P.P.C.L.I. & C.E.F. France.

and is now discharged from the service by reason of Demobilization. / Medical Unfitness.

THE DESCRIPTION OF THIS SOLDIER on the DATE below is as follows:

Age 28

Height 5 ft 6"

Complexion Fair

Eyes Hazel.

Hair L. Brown

Marks or Scars 3 Scars L. Knee (Operation)

J. E. Lee
Signature of Soldier

G. W. Bradbrooke
Issuing Officer

Date of Discharge

Dispersal Station No. 1
APR 6 1919
Military District No. 12

Rank MAJOR

Date March 24th 1919.

N.B.—As no duplicate of this Certificate will be issued, any person finding same is requested to forward it in an unstamped envelope to the Secretary, Militia Council, Ottawa, Canada.

M.F.B. 39A.
1049-D.P.-300M-11-18.
H.Q. 1772-39-882.

A. No. 240001

War Service Badge, Class

issued B. No.

DEPARTMENT OF VETERANS AFFAIRS
MINISTÈRE DES AFFAIRES DES ANCIENS COMBATTANTS

DEATH NOTIFICATION
AVIS DE DÉCÈS

TO:
À:

DATE Oct. 21,1970

NAME
NOM LEE John E.

Service No.
Matricule N° 2193349

CPC No.
CCP N° 118679

WVA No.
AAC N°

Information Received from:
Information reçue de: Medical Certificate of Death, d/Oct. 15,1970

Date of Death
Date du Décès October 14,1970

Place
Endroit Not stated

Distribution: WSR-DASG
VI - ASS
DXXXD
HO - BC

Pour le chef,
for Chief, Central Registry Division.
Dépôt central des dossiers.

DVA 24 (Rev. 2/70) BIL.

L. L. Job 23216—M. & D. 8049.

ASSIGNED PAY.

MILITIA AND DEFENCE

M. F. W. 11.
15m.—6-17.
H. Q. 1772-39-818.

ASSIGNED PAY. SEPARATION ALLOWANCE ASSIGNED PAY.

Name Mrs Andrew Lee

Address Glenwood City
Wis., U.S.A.

Relation to Soldier wife, child or mother } Kate 15.00 Aug 1/17

Name of Soldier Lee J. C.

Regtl. No. 2193349

Rank Pte

Corps 196th Battn.

To what Corps belonging when called out

PAYMENTS

Month	Year	Cheque No.	Amt.	REMARKS
Aug.	1914			2M 27/8/17 JK 29/8/17
Sept.				
Oct.				
Nov.				
Dec.				
Jan.	1915			
Feb.				
March				
Apl.				
May				
June				
July				
Aug.				
Sept.				
Oct.				
Nov.				
Dec.				
Jan.	1916			
Feb.				
March				

CONSOLIDATED ACCOUNT

MILITIA AND DEFENCE

ASSIGNED PAY

OVERSEAS CONTINGENTS

PAYMENTS.

M. F. W. 12a.
18m.—4-17.
1772—39—819.

Sheet No. 2 Mrs Andrew Lee
(Assignee)

Name of Soldier Lee J. E.
Pte 2193349. 196 Btn.

L. L. Job 19227—M. & D. 7814.

15 00

Remarks. aug 1/17

Month.	Year.	Cheque No.	Amt.	
April	1916			
May				
June				
July				
Aug.				
Sept.				
Oct.				
Nov.				
Dec.				
Jan.	1917			
Feb.				
March				
April				
May				
June				
July				
Aug.	15-L	a 19180	15	mailed 30/8/17
Sept.		X 43564	15	
Oct.		W45808	15	
Nov.		A42675	15	
Dec.		T 61173	15	
			75-	
Jan.	1918			
Feb.				
March				
April				
May				
June				
July				

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.				

P. 558

MARRIED OR SINGLE: Single

PLACE OF BIRTH: Spring Valley, Wis. U.S.A.

NAME AND ADDRESS OF NEXT OF KIN: Mrs Andrew Lee
Glenwood City, Wis. U.S.A.

RELATIONSHIP OF NEXT OF KIN: Mother

NAME AND ADDRESS OF NEXT OF KIN

RELATIONSHIP OF NEXT OF KIN

SEPARATION ALLOWANCE MONTHLY $ — EFFECTIVE (DATE)

PAYABLE TO

RELATIONSHIP OF DEPENDANT

CASUALTIES, PROMOTIONS, &c.

PARTICULARS	EFFECTIVE DATE	AUTHORIT

ADMISSIONS TO HOSPITAL, &c.

DATE ADMITTED	DATE DISCHARGED	V. OR A.	NAME OF HOSPITAL

DATE	PAY No OF DAYS	PAY RATE	PAY AMOUNT $	PAY AMOUNT c.	FIELD ALLOWANCE No. OF DAYS	FIELD ALLOWANCE RATE	FIELD ALLOWANCE AMOUNT $	FIELD ALLOWANCE AMOUNT c.	WORKING OR SPECIAL PAY No. OF DAYS	WORKING OR SPECIAL PAY RATE	WORKING OR SPECIAL PAY AMOUNT $	WORKING OR SPECIAL PAY AMOUNT c	ASSIGNED PAY CREDITS	OTHER CREDITS	TOTAL CREDITS	ACQUITTANCE ROLLS 1 No.	1 DATE	2 No.	2 DATE	3 No.	3 DATE	4 No.
														10	10							
June	30	1 00/10	33												33							
July	31.		34	10											34	10						
Aug.	31.		34	10											34	10	238	15.6				
Sept	30		33												33		245	20.6				
			134	20										10 -	144	20	485	13-8	571	10/9		
																	335	13-7	531	30/8		
																	449	28-7				

MONTH	PARTICULARS	CR. 1	CR. 2	PARTICULARS	DR. 1	DR. 2	DR3	DR4	BALANCE	DEPR. RED. PAY	GEN. ALLCE. ENG.
Sept	Bal.	~~38 76~~							38 76		
Oct.	P. Ray	34 10						15-	57 86		
Nov.	QQ	33 -		A.P. Canada.				15-			
✓				GR 207 18.10.17 3rd Y R & R.	4 46						
✓				✓ 150 6.10.17 ~	3 57						
✓				~ 977. 11/11/17 ~	13 38						
		33			21 41			15			

MOTIONS, &c.

EFFECTIVE DATE	AUTHORITY

HOSPITAL, &c.

NAME OF HOSPITAL

Reg'l No. 193349 Rank Pte Name LEE, JOHN EDWARD

If in Permt. Corps } What Unit } Unit Draft

Permanent Force Allowances

Place of Attestation Regina, Sask.

Date of Attestation May 1st 1917

Transferred to 7th Res. Date 1-6-17 Authority 30,421 11.6.17

Transferred to 2.P.B.L.I. Date 1.11.17 Authority Nom. Roll

Transferred to Date Authority

Transferred to Date Authority

Assigned Pay Monthly $ 15.00 Date Effective 1-8-17 a.s.m. rend. 10.8-17 Withdrawn

Payable to Mrs. Andrew Lee, Glenwood City, Wis. USA Relationship Mother.

Assigned Pay Monthly $ Date Effective

Payable to Relationship

Stop-Payment Form (Assigned Pay) Rendered (date) Effective Reason

Discharge Date and Place Reason and Authority

Account Transferred to Non-Effective Branch (date)

Account Transferred to Officers' Pay Branch (date)

C.I.

ACQUITTANCE ROLLS 2 No.	2 DATE	3 No.	3 DATE	4 No.	4 DATE	CASH PAYMENTS 1	2	3	4	ASSIGNED PAY	OTHER CHARGES	TOTAL DEBITS	BALANCE CREDIT	BALANCE DEBIT	PAY WITHHELD OR DEFERRED	PAY AVAILABLE FOR ISSUE	REMARKS
						Bal from Canada							10				
													43		15		
													77 10		30		
						4 87											
						1947				15		39 34	71 86				
571	10/9					974	973										
531	30/8					1460	973			15		66 10	38 76				
						730											
						5598	1946			30		105 44					

BALANCE	DEFER-RED. PAY	SEP. ALLCE. ENG.
38 76		
57 86		

3193349 Pte Lee, John Edward

DATE	PAY No. OF DAYS	PAY RATE	PAY AMOUNT $	PAY AMOUNT c.	FIELD ALLOWANCE No. OF DAYS	FIELD ALLOWANCE RATE	FIELD ALLOWANCE AMOUNT $	FIELD ALLOWANCE AMOUNT c.	WORKING OR SPECIAL PAY No. OF DAYS	WORKING OR SPECIAL PAY RATE	WORKING OR SPECIAL PAY AMOUNT $	WORKING OR SPECIAL PAY AMOUNT c.	ASSIGNED PAY CREDITS	OTHER CREDITS	TOTAL CREDITS	ACQUITTANCE ROLLS 1 No.	1 DATE	2 No.	2 DATE	3 No.	3 DATE	4 No.	4 DATE	CASH PAYMENTS 1	2	3
MONTH	PARTICULARS				CR. 1	CR. 2	PARTICULARS							DR. 1	DR. 2	DR.3	DR.4	BALANCE	DEFERRED PAY	SEE ALLGE ENG.	MONTH	PARTICULARS				
Nov	3rd				33									21 41		15		57 86								
Nov							AR 340	2/11/17	66RC					357						30 00							
Dec		OP			34 10		AR. can									15										
							AR 356	19/9/17	3 6 22 D					446				65 52		30 00						
1918					67 10									29 44		30										
Jan		OP			34 10		AP can									15										
							AR. 6424	25/11/17	6 B D					268												
							7312	31/12/17	"					268												
							6925	15/12/17	"					268				76 58		30 00						
					34 10									804		15										
Feb		OP			30 80		CAP									15										
							AR. 7555	8/1/18	"					446												
							996	17/1/18	66RC					357												
							934	31/1/18	1 6 D B D					446												
							1312	28/1/18	6 B D					446												
							1386	15/2/18	"					357				71 86		30 00						
					30 80									20 52		15										
Mar		OP			34 10		AR 6.									15										
							AR. 1428	19/2/18	"					446												
							1511	6/3	"					357				82 93								
					34 10									80 3		15										

PAYMENTS		ASSIGNED PAY	OTHER CHARGES	TOTAL DEBITS	BALANCE		PAY WITHHELD OR DEFERRED	PAY AVAILABLE FOR ISSUE	REMARKS
3	4				CREDIT	DEBIT			
TICULARS CR.1	CR. 2	PARTICULARS				DR.1	DR.2	DR3 DR4 BALANCE	DEFER- SER. -RED. ALLOT. PAY ENR.

P 820
12474—375M—13-2-18.

* Strike out whichever inapplicable.

ASSIGNED PAY * ~~ENGLAND or~~ CANADA.	SEPARATION ALLOWANCE. * ENGLAND OR CANADA.
EFFECTIVE DATE:- 1/8/17	EFFECTIVE DATE:-
AMOUNT:- 8/5 oc	AMOUNT:-

NAME:- LEE, John Edward

NUMBER:- 219349

PARTICULARS OF RANK OR APPOINTMENT

AUTHORITY	DATE EFFECTIVE	RANK OR APPOINTMENT
		Pte

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.

Mrs Andrew Lee
Glenwood City
Wis. U.S.A.
(Mother)

Stoppage effected 1.3.19.

New A.S.P.B. # 63506. Issued. 28-4-18

UNIT AND TRANSFERS

ORIGINAL UNIT:- 7th Res Battn

DATE ACCOUNT FIRST OPENED:- 1/6/17

AUTHORITY	DATE EFFECTIVE	DATE LEDGER SHEET T'SF'D	UNIT TRANSFERRED TO
			11 G.D.
34 2/5/18.	1/6/18	17/6/18.	3rd Div. Emp Coy.
100	8-10-18	26-11-18.	R.P.C.L.D.
			Can Sect

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
16.1.19	1696	Wiley £2.0.0	9 73				
25.1.19	6/-	London 4.0.0	19 47				
			29 20				

DAILY RATES OF PAY AND ALLOWANCES

AUTHORITY	PAY	F.A.	P.F.A.	SUBS'CE ALL'CE
	1/-	10		

PARTICULARS OF RENDERING NON-EFFECTIVE: Disposal 1.3.19. 2nd R. 248830.1.19. Wiley 3.2.19. Wiley 2nd 12 + 6 to Bd. # 16.17

MONTH 1918	PARTICULARS	CR 1	CR 2.	PARTICULARS	DR. 1	DR 2.	DR. 3.	DR. 4.	BALANCE	DEFERRED	SEPARATION
March	Brot Forward								82 93	30 -	
April	18.	33		A.P.6.				15	100 93	30	
		33		A.K 977 18/5/18 3rd C.W.S.C.	4 46			15			
May	P.P.	34 10		A.P.6.				15			
				Dn 1150 5/5/18 C.A.P.	4 46				111 41	30	
June.	pp.	34 10			8 92			15			
		33		A.P.6.				15			
				~~C.A.P.~~ 1490 18/6 30 Ds.	3 57					30	
				Dn. 1195 6/6. 3 Sig	4 46				121 08		
		33			8 03			15			
JUL 1918	pp.	34 10		C.A.P.				15			
				1651 2/7 3 Dsig Co.	3 57						
				Dn. 510. 30/7. 7th C.V.B.	4 46				132 15		
		34 10			8 03			15			
Aug.	P.P.	34 10		C.A.P.				15			
				A/R. 3950. 13.8.18. C.C.S.S. H.Q.	3 57				147 68	30	
		34 10			3 57			15			
Sept.	P.P.	33 -		C.A.P.				15			

DATE OF PAYMENT	NUMBER OF A.R	UNIT PAID BY	AMOUNT	DATE OF PAYMENT	NUMBER OF A.R	UNIT PAID BY	AMOUNT
16.1.19	16796	Wiley L.J.O.O	9 73				
25.1.19	C/F	London 4.0.0	19 47				
			29 20				

Dan Leech

DAILY RATES OF PAY AND ALLOWANCES

AUTHORITY	PAY	F.A.	P.F.A.	SUBS'CE ALL'CE
	1 -	10		

PARTICULARS OF RENDERING NON-EFFECTIVE: Dis posal 1.3.19. 2nd R. 248830.1.19. Wiley 3.2.19. Wiley 2nd 12.4.19 6th Bd. # 116.17

MONTH 1918	PARTICULARS	CR 1	CR 2	PARTICULARS	DR. 1	DR 2	DR. 3	DR. 4.	BALANCE	DEFERRED	SEPARATION
March	Brot Forward								82 93	30 -	
April	P.P.	33		A.P.C.				15	100 93	30	
		33		AK 977 18/5/18 3rd C.D.L.C.	4 46			15			
May	P.P.	34 10		A.P.C.				15			
				DR 9150 27/5/18 C.D.L.	4 46				111 41	30	
June	P.P.	34 10		A.P.C.	8 92			15			
		33						15			
				Cap 1490 18/6 3 Dns.	3 57					30	
				Dn. 1195 6/6. 3 Lig	4 46				121 08		
		33			8 03			15			
JUL 1918	P.P.	34 10		C.A.P.				15			
				1651 2/7 3 Dns Lig Co.	3 57						
				Dn. 510. 20/7. 7th C.V.B.	4 46				132 15		
		34 10			8 03			15			
Aug.	P.P.	34 10		C.A.P.				15			
				A.R. 3950. 13.8.18. C.C.S. H.Q.	3 57				147 68	30	
		34 10			3 57			15			
Sept.	P.P.	33 -		C.A.P.				15			
				A.R. 1372. 7th Inf Bde HQ. 14-9-18	7 14						
				C.R. 38176. London. 25-9-18.	48 67						
				A.R.D.N. 1107. L.D.C.L.2. 2-9-18.	3 57				106 30	30	
		33			59 38			15			
OCT 1918	P.P.	34 10							140 40	30	
				C.A.P.				15	125 40	30	
				C.R. 43115. London. 5/10/18. (7)	34 07				91 33	30	
				" 40746 - do. 1/10/18. (8)	24 33				67 00	30	
		34 10			58 40			15			

NUMBER 2193349 RANK Pte. NAME Lee, J.E.

MONTH	PARTICULARS	CR. 1.	CR. 2.	PARTICULARS	DR. 1	DR. 2	DR. 3.	DR. 4.	BALANCE	DEFERRED	SEPARATION
1918	Balance Forward								67 —	30.	
Nov	P.P.	33.		C.A.P.				15			
Dec	✓	34 10		A.R. 3024 16/11/18 3 days C.R.E.	13 06			15.			
1919 Jany	✓	34 10		7919. 20/12/18. C.C.D.	9 33			15.	100 81	30.	
		101 20			22 39			45.	18 36		
									119 17		
Febry		20 80		A.R. 3651. 24/12/18 4 Res	43 80				87 60		
	Income Def Pay	2 56		C.A.P.				15			
		-		10459. 20/1/19 London	19 47						
		33 36		16296 16/1/19. W.R.O.S.	9 73						
				H033. 7-3-19. Forld Endon 1Pc	14 60				31 57		
		33 36			87 60			15	31 57		

S.M.A. Loan. 24/3/19. S.h. 31. Forfeit.

Cheque Received 3.4.19.

S.M.A. Klaar. 24/3/19. S.h. 31. Eerste.

M

War Service Badge
Class "A" No. 240.001

15/5/3 X

SHORT FORM.

PROCEEDINGS ON DISCHARGE.

(Demobilization.)

C. R. APR 15 1919 Mil. Dist. No. 12

1. No.	2193349
2 Rank.	Pte.
3. Name.	LEE. John Edward
4. Unit.	E.O.R.D. 196th Bttn.
5 Date of Discharge	Place REGINA, SASK. APR -6 1919

6 Reason for Discharge O/SEAS - Discharged on Demobilization - REGINA

MAJOR
DISPERSAL AREA "O"

7. Authority. A.O. 1/2/2500 99 - 6 B.

8. Proposed Residence after Discharge Mother.

H.M.T.S. Canada
T.I.O. Liverpool 24-3-19

Category B

Next of Kin

Intended Town of Residence Beaver Lodge Alta Regina

Occupation Farmer Group 1

Service in France 15/12

9. CERTIFICATE TO BE SIGNED BY SOLDIER.

I hereby acknowledge that at the undernoted place and date I received my discharge Certificate

M. F. W.?

J. E. Lee

Signature of Soldier.

10. CONFIRMATION.

The discharge of the above named man is hereby confirmed.

Dispersal Station "O" Military District No. 12 APR 6 1919

Medical Documents forwarded to S. C. R. or B. P. C. APR 22 1919

Place

Date

Signature C. W. Bradbrooke MAJOR

(O. C. Discharging Unit.)

M.F.B. 218a—300M.-11-18—1772-39-113.

G.D. 18-8-58

LIST OF DISCHARGE DOCUMENTS.

Attestation Paper, Triplicate	Militia Form W. 23
or Particulars of Recruit	Militia Form W. 133
Field Conduct Sheet	Militia Form W. 178 or A.F.B. 122
Casualty Form	Militia Form W. 54 or A.F.B. 103
Last Pay Certificate	Militia Form W. 44
Certificate that missing documents are unobtainable	
Medical History Sheet	Militia Form B. 313 or A.F.B. 178
Proceedings of Medical Board	M.F.B. 227, A.F.B. 179 or A.F.A. 45
Dental History Sheet	Militia Form B. 465
Medical Report	M. F. W. 129 or D. M. S. 1375
Regimental Conduct Sheet	Militia Form B. 263
Company Conduct Sheet	Militia Form B. 263a

C.D.3.
P.680.

1. Triplicate Attestation Paper (M.F.W. 23), or Particulars of Recruit (M.F.W. 133).
2. Casualty Form (A.F.B. 103).
3. Medical History Sheet (M.F.B. 313 or A.F.B. 178),
4. Proceedings of Med. Board (M.F.B. 227 or M.F.W. 129)
5. Dental Certificate (C.A.D.C. 5009a).
6. Field Conduct Sheet (A.F.B. 122)
7. Proceedings on Discharge (A.F.B. 218a)
8. Discharge Certificate (M.F.W. 39)
   (Enclosed in special envelope (260M)),
9. Copy of Discharge Certificate (M.F.W. 39a).
10. Dispersal Certificate (C.D.3)
11. Equipment and Clothing Statement Q.M.G. Form (D.O.S. 2),
12. Last Pay Certificate (P. 851).
13. Pay Book (S.B. 64).
14. War Service Gratuity (Form M.F.W. 2595),
15. Sundry Documents.

Group A.
Checked by 212.
Date 23 MAR 1919

Form R 122.
2353—100M—9-12-16.

Rank J.P. Name LEE, John Edward Reg'l No. 2193349.

Unit Dft. 196th Bn. ~~Sask. Regt~~ Eastern Ont. If in perm. Corps, What Unit? Married or Single Single.

Place and Date of Enlistment Regina. Sask. 1st. May. 1917. Place of Birth Spring Valley. Wis. U.S.A.

Name and Address, Next-of-Kin Mrs. Andrew Lee. Glenwood City Wis. U.S.A. Relationship Mother.

Assigned Pay Monthly $ Payable to Relationship

Separation Allowance $ Payable to Relationship

Discharge, Date and Place Reason Character

H. W. V., Ld.—9546-16.

Eom'

Lab

M/E. R.B. No. 15462
File R.L.
Category Can. OR.

Report. Date.	Report. From whom received.	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.
	C	ARRIVED IN ENGLAND 9 6 17 S/S OLYMPIC.			R.E.B. 103 FURLOUGH 13 SEP 1917
12-6-17.	4th Res.	Taken on strength.	Seaford.	10-6-17	Pte O.H.2 J.
10-9-17	" "	Admtd to R.P.C.L.I. (Overseas)	Pte " "	9-9-17.	Pte O. 217 + R.P.C.L.I. 77 d/15-9-17
21-11-17	E.O.R.	Admtd to Dc. H.Q. Field Amld.	Pte Field.	19-11-17.	Gd. A. 69. Shell Cont. Leg
23-11-17.	- " -	Transfd to Dc. H.6 Cas. Clearing Stn.	Pte "	17-11-17.	Gd. A. 71 " " "
28-11-17	- " -	Transfd to Dc. 55 Gen. Hosp.	Pte Field.	19-11-17.	Gd. A. 75 " " "
3-12-17	- " -	Transfd to Dc. 12 Con. Depot.	Pte Dublengue.	24-11-17.	Gd. A. 79 " " "
1/5/18.	P.P.C.L.I.	Class. B.1. & S.O.S. to 3rd Can. Div. Emp. Coy.	Pte Field.	1/5/18.	Pte Dc. H5.
—.—	3 DEC.	TO S ex. P.P.C.L.I.	" —.—	2-5-18	—.— 34. d/ PPCLI D/0100 10-5-18
23/10/18	3rd Can Emp Coy	SOS to P.P.C.L.I.	Pte Field	7-10-18	Pte O. 61. d/ 19-10-18 PPCLI D/0100

Report. Date.	Report. From whom received.	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.
27/12/18	R.P.C.L.I.	Class. B & Posted to E.O.R.D.	Guild	18/12/18	P.C. II D.O. 121 — E.O.R.D. 322 D. 3/1/19
9/1/19	E.O.R.D.	Cases to be att. 4th Res	Witley	4/1/19	— "
15-3-19	No 12 M.D. Con Wing.	T.O.S. pending return to Canada	Rhyl. Plt	14-3-19	" 63 E.O.R.D. P.C. II D.O. 61 14.3.19
		31—0—41		24.3.19.	
28-3-19.	M.D.12.	S.O.S. to Canada.	Rhyl	24-3-19	— 74.

THIS FORM WILL BE USED FOR ALL RANKS

MEDICAL HISTORY OF AN INVALID

INSTRUCTIONS WHICH MUST BE READ BY MEDICAL OFFICERS

1. In using this Form the "Instructions issued for the guidance of Medical Officers serving on Medical Boards" issued by the B.P.C. and instructions issued by Militia H.Q., Ottawa, will be carefully followed.
2. The Medical Officer in charge of the case is responsible for the proper completion of Sections 1 to 17 of this Form and will obtain the signature of the invalid to the "Statement," page 3. The President of the Board of Medical Officers is responsible for the proper completion of sections reserved for recording the "Opinion of the Medical Board."
3. In answering the questions, Medical Officers will carefully obtain and record the invalid's statements concerning his condition. They will distinguish observations made by themselves from hearsay. They will distinctly state the authority for statements not resulting from their personal observation; it must be made clear whether such statements are obtained from the invalid concerned, from witnesses, or from documents, Regimental or otherwise.
4. Special care is required in answering question 9. Read the questions carefully. All questions must be answered.
5. If space provided under any section is insufficient add another sheet. Such sheets must be initialled by the Medical Board.
6. A note will be made of attached papers by the Medical Board under the section "Opinion of Medical Board."
7. Under no circumstances may information other than that in sections 7, 8, 9 and 10 be communicated to the invalid, directly or indirectly.
8. The nomenclature of diseases must be followed, if possible, as described in "List of Diseases" printed in the order in which they appear in the Annual Report on the Health of the Army, published in London (1915), by Messrs. Harrison & Sons.

STATION SEAFORD DATE 10.3.19

1. 1 (a) Unit E.O.R.D. (b) Regimental No. 2193349 (c) Rank PTE

(d) Surname LEE (e) Christian name JOHN

(f) Home address Spring Valley, Wis, U.S.A.

(g) Next of Kin Mrs A. Lee. (h) Relationship Mother

(i) Address of Next of Kin Glenwood City, Wis U.S.A.

2. Age last birthday 28 Date of birth 24th Dec 1890

3. Enlistment, or Appointment (if an Officer) (a) Place Saskatoon (b) Date 1st May 1917.

4. Personal description:

(a) Height 5'6" (b) Weight 142 (stripped) (c) Complexion Medium

(d) Colour of hair Dark (e) Colour of eyes Brown (f) Identification marks, Scars, etc. 2 operation scars above left knee.

5. Former trade or occupation Clerk

6. Service (The information should be secured from personal documents, but if documents are not available the invalid's statement may be taken and note must be made to that effect. Periods of service in Canada, England, France or elsewhere should be noted).	Years	Days
	1	315

	Periods	
	From	To
Canada	1/5/17	2/6/17
England	9/6/17	10/9/17
	30/12/17	11/3/19
France or other theatres of War	11/9/17	29/12/18.

7. Original disease, or injury (LOOSE BODIES LEFT KNEE JOINT)

(a) Date of origin (Nov 17th 1917) (b) Place of origin France

(c) Cause (Buried by shell explosion)

M. F. B. 227.

400m.—11-18.
1772-39-117.

8. Present disability— (Here state the exact nature of the disability resulting from the disabling conditions: e.g. (a) Weakness—slight, moderate, marked, etc; (b) Loss, complete or partial, of an organ or member, or of its functions; (c) Necessity for rest of the body, or of some of its parts, for therapeutic reasons; (d) Any other restrictions in choice of occupation.)

Pain and weakness in left Knee joint -

9. Present condition—(a) (Before completing this section the invalid should be stripped, and subjected to a thorough physical examination. Important, to be a full description of the present disabling condition, or conditions only. "History" must be recorded in Section 10. Describe all abnormalities, anatomical and functional, contributing to present disability; objective findings to be stated first, then subjective findings.)

X-ray report 14/1/19 - 2 small loose bodies in Knee joint one above and one below patella Lgd. R. Reid Capt. The left Knee shows apparent lipping of internal condyle in front and a large mass size of pigeons egg on post. external surface apparently fibrous and attached to condyle. Poterior surface thigh shows 3 scars of "running sores"

Complains of pain and weakness in left Knee after walking one mile

(b) Has the invalid now any affection of the following systems, not described in Section 9 (a) above?
(Answer Yes or No.—if the answer to any part is Yes, give a brief description of the present condition.)

Nervous System No Cardio-Vascular System No (If pulse rate is abnormal, B. P. will be taken.) Genito-Urinary System No (Albumen and Sugar will be excluded.)

Special Senses No Respiratory System No Integumentary System No

Disturbances of Mentality No Digestive System No Muscular System No

Osseous and Joint Systems No Any other general condition No

10. (a) History (of the condition referred to in Section 9 (a).)

was buried by shell explosion Nov 17th 1917. and ~~wound~~ left thigh was continued. Returned to battalion after coming out of hospital but could not carry on, on account of Knee so was boarded B.i. Condition has got slightly worse since that time

10.—(b) (Here give a complete history, as obtained from invalid, with dates of origin, of any affection from which the invalid, has suffered either prior to or since enlistment, and not included in Section 10 (a).)

Has 3 "running sores" on posterior surface of left thigh. Operated on in 1911 and has had no trouble with them since.

(c) (Here give a description of wounds, scars and deformities.

3 scars post surface left thigh

11.—(a) Did the disabling condition have its origin before enlistment? No

(b) If so, has it been aggravated by Service? (If aggravated, give a description, as far as it is possible to do so, of the disabling condition at time of enlistment.)

N. A.

12. Was the disability caused, or aggravated; (a) by intemperance, or improper conduct; or (b) by unreasonable refusal to accept treatment? No

The regimental documents will be referred to.
(If the answer is in the affirmative, state in percentages, to what extent the patient is incapacitated by that causation or aggravation. In answering this question, conduct sheets should be considered. If treatment has been refused, the circumstances surrounding the refusal should be described on page 4.)

13. What is the probable duration, in months, of the disability or of each of the disabling conditions, if there is more than one? 6 months

14. Treatment (Case reports, general or special, should be secured and attached where possible.)

Hosp treatment for contused thigh.

15. Is further treatment in hospital, convalescent home, etc., likely to be of material benefit? N. A.
(If the answer is "yes" state nature of treatment required and probable duration)

16. Can the former trade or occupation be resumed? Yes
(If not, briefly state why)

17. Recommendations

E. R. MacTavish Capt
Medical Officer by whom the case is brought forward.

STATEMENT OF THE INVALID

(Sections 7, 8, 9 and 10 are to be read to the invalid and either "satisfied" or "not satisfied" struck out).

I, the undersigned John Lee have heard the description of my disability and present condition read, and am satisfied (~~or not satisfied~~) with it. (If dissatisfied, statement should follow.)

I complain in addition of

Pte. J. Lee Rank.
Signature of invalid examined.

OPINION OF THE MEDICAL BOARD

18. Does the Board concur with the preceding report? If not, give differing opinions, with reasons, quoting the number of the answer criticised.

Yes

19. Is the invalid fit for

(*a*) General service,	(Category A)	~~(Yes~~ or No.)
(*b*) Service abroad, not general service,	(" B)	(Yes ~~or No.~~)
(*c*) Home service (Canada only),	(" C)	~~(Yes or No.~~)
(*d*) Temporarily unfit.	(" D)	~~(Yes or No.~~)
(*e*) Unfit for service in Categories A, B and C	(" E)	~~(Yes or No.~~)

Yes B II

20. It is certified that the invalid

(*a*) ~~Does require treatment~~. (Give the nature of the condition and of the treatment required and its probable duration.)

(*b*) Does not require treatment.
(*c*) ~~Should pass under his own control~~.
(*d*) ~~Should not pass under his own control~~.
(Strike out condition not applicable.)

21. It is recommended that the invalid be discharged. (When not for discharge add special recommendation.)

Returned to Canada

Cpl. R.A.F. Telegraphist 90883 - 11-11-18

Before signing the President of the Medical Board will read the statement signed by the invalid and differing opinions regarding Sections 7, 8, 9 and 10, as recorded in Section 18, to the invalid and if no change is indicated, will initial the statement. If, as a result of differing opinions regarding Sections 7, 8, 9 and 10 only, recorded in Section 18, the invalid is dissatisfied with the statement previously made, remarks of the Medical Board will be added here.

J. W. Hubbert Lt. *President.*

PLACE Seaford

J. A. Cheeseman Lieut. } Members

DATE 11-3-19

TO BE COMPLETED WHEN TREATMENT IS REFUSED

I, the undersigned.....understand the nature of the treatment which it is recommended that I should undergo and refuse to accept it.

Witness..... Signed.....

Should the refusal of the invalid to accept treatment appear to be unreasonable, or should he decline to sign this statement the Board of medical officers should so state.

.....*President*

PLACE..... } Members

DATE.....

APPROVED BY

for *Assistant Director of Medical Services.*

DATE.....

OFFICE STANDING MEDICAL BOARD
12 MAR 1919
SEAFORD, SUSSEX.

APPROVED BY

Director-General of Medical Services.

DATE.....

Form D.M.S. 1394.
6533.—29M.—22/1/17.

168799

PROCEEDINGS OF A MEDICAL BOARD.

Dated at Seaford June 18 1917.

No. 219349 Rank Private Name Lee J. E.

Local Unit 17th Reserve Overseas Unit 196th Draft Age 26

Examination held at

DISABILITY. Overseas—Local (scratch one out). No Disability.

PRESENT CONDITION.

No Complaints, no disability

BOARD RECOMMENDS:— A.1

1. Fit for Duty
2. Fit for duty after weeks' physical training.
3. Fit for Temporary Base Duty weeks.
4. Fit for Permanent Base Duty
5. Discharge

Signatures:—

Members { J.E. Prevost Capt. President
E. Wood Capt
M. A. Cullen Capt

APPROVED

Dated 19 JUN 1917 1917.

C.A.D.M.S. CANADIANS SEAFORD

MAJOR, C.A.M.C. SEAFORD. A/D.A.D.M.S.

For A.D.M.S.

PROCEEDINGS OF A MEDICAL BOARD.

Dated at 1917

No. ..... Rank ..... Name .....

Local Unit ..... Overseas Unit ..... Age .....

Examination held at .....

DISABILITY.
Overseas—(Local).
(Strike one out).

PRESENT CONDITION.

BOARD RECOMMENDS:—

1. Fit for Duty .....

2. Fit for duty after ..... weeks' physical training.

3. Fit for Temporary Base Duty ..... weeks.

4. Fit for Permanent Base Duty .....

5. Discharge .....

Signatures:—

..... President

Members .....

.....

APPROVED

Dated 1917

For A.D.M.S.

X 14. 1. 19 XR 9 FT

PART I. A.F.B. 179 Canada (Revised 1918). 4182 100m. 16/11/18 D.495

Reserved for M.H.C.

Regt. No. 2193349 Rank Pte Surname LEE Christian Name JOHN

Unit or Corps—(a) Overseas from United Kingdom PPCLI (b) in United Kingdom gen. dep.

Born at—Town Springhally County or Province Wis Country U.S.A.

Date of Birth—Day 24 Month Dec Year 1892 Age 25 yrs. months.

Joined at Regina Sask Cans Date 1-5-1917

Former trade or occupation Clerk

Permanent Marks or any peculiarity that will serve for future identification :—

Height—feet 5 inches 6 Colour of eyes Brown

Signature of Soldier (*for identification purposes*) John Lee

Medical Report

☞ *Read carefully the instructions on last page of this form.*

1. DISABILITY.

Group the disabilities, placing those resulting from separate causes in separate groups.

Disabilities Group (*a*) LOOSE BODIES L. KNEE WR

Disabilities Group (*b*)

Disabilities Group (*c*)

2. CAUSE OF DISABILITY

		Place of origin.	Date of origin.
(*i.*) As to Group (*a*) above.	UNKNOWN	?	??
(*ii.*) As to Group (*b*) above.			
(*iii.*) As to Group (*c*) above.			

3. Is the disability due to disease contracted or injuries received prior to Active Service ?

(*i.*) As to Group (*a*) above ? ? If yes, has Active Service aggravated it ?

(*ii.*) As to Group (*b*) above ? N.A. If yes, has Active Service aggravated it ? N.A.

(*iii.*) As to Group (*c*) above ? If yes, has Active Service aggravated it ?

4. Is the disability due to disease contracted or injuries received while on Active Service ?

(*i.*) As to Group (*a*) above ? ?

(*ii.*) As to Group (*b*) above ? N.A.

(*iii.*) As to Group (*c*) above ?

PART I. (continued).

5. MEDICAL HISTORY. Enlisted 28/April 1917 Regina
Sask. A2 States he was 15 mos. in
France — Claims he was buried &
hurt this knee — was in No 5 Gen. Hosp.
2 wks. then to No 12 Convales. 6 wks.
from there back to line. Claim was boarded
Ste Justine — Bx — big casualty sheet & rec-
ords with S. are not available.
Claim's right knee is stiff at all times, & in cold or
wet weather he has a dull pain — thinks it
about the same. No symptoms previous to enlist.

6. PRESENT CONDITION. Complains 1. Stiff left knee
2. Pain left knee.
Well developed, moderately well
nourished Young male
X-Ray report 14-1-19. Radiograph shows two small
loose bodies in knee joint — one below one above
patella. Bx. Died Capt.
The left knee show apparently clipping of Int. Condyle
in front & a large irregular pigeons egg post. exit
surface — apparently partially fibrous & attached to Int. Condyle
post. surface. This shows 3 scars for "Burning Tubes" 2 gro. of
duration (TDC) No symptoms pickt.
Heart Lungs apparently normal.

7. OPERATION. (i.) Was one performed? (ii.) If so, state what. N. R.
(iii.) Was one advised and declined? No

NOTE.—Loss of teeth on or immediately after Active Service should be attributed thereto, unless there is evidence to the contrary.

8. (i.) Is there loss or decay of teeth attributable to Active Service?
(ii.) If so, describe. No

9. DO YOU RECOMMEND:—
(a) Fit for duty? (*state category*) B II
(b) Invalid to Canada? No
(c) Discharge from the Service as permanently unfit? N. R.

Date of Report Jan 15 1919
Station Military Hospital Cuxhaven
Signed A. E. Malone
Officer in medical charge of case.
Capt. C.A.M.C.

I have satisfied myself of the general accuracy of the above Report, and concur therein *except Nil

{Officer i/c Hospital / S.M.O. / Brigade} Strike out one of these

Dated at .....Station, on.....191.....

*Delete if inapplicable.

PART II.

Proceedings of a Medical Board on the Soldier mentioned in Part I.

10. Is the disability fully described in Part I. (1)? If not, describe it. Yes

11. Is the cause of the disability fully described in Part I. (2)? If not, describe it. Yes

12. From the medical information now adduced, was the disability caused or aggravated by :— (a) Negligence of the Soldier { Caused? / Aggravated? } W (b) Misconduct of the Soldier { Caused? / Aggravated? } W

13. THE ENTIRE DISABILITY.—Without regard to his regular occupation, to what extent is his capacity lessened at present for earning a full livelihood in the general market for untrained labour? (*Estimate at none, 5%, 10%, 15%, 20%, etc.*) N. d.

14. THE DISABILITY DUE TO SERVICE.—(*See Part I. (3). Aggravation on Active Service of a disability existing previous to joining is to be included in this estimate.*) What part of the entire disability estimated next above (13) is due to causes arising during Active Service? (*Estimate at none, 1/10, 2/10, 3/10, etc., or all.*) N. d.

15. Permanency of the Disability due to Service estimated next above in (14). (*i.*) Is it permanent? N. A.

(*ii.*) If not permanent, what is its probable minimum duration (*in months*)?

16. If an operation was advised and declined, do you consider the refusal to have been unreasonable? N. d.

17. Can the former trade or occupation be resumed? Yes.

18. REMARKS :— Authority G.O.C. 4 (908) dd 11-11-18

Should have further observation on return to Canada.

19. RECOMMENDATION :—

(a) Fit for duty? (*state category*) B 11

(b) Invalid to Canada? / (c) Discharge from Service as permanently unfit? } W

Date of Board 18-1-19.

Station Witley

Signatures of the Board { Lieutenant-Colonel, President. / Captain, C.A.M.C. }

Approved ..... CAPTAIN, For A.D.M.S. CANADIAN TROOPS, WITLEY.

A.D.M.S.

Dated at Station

HEADQUARTERS A.D.M.S. 20 JAN.1919 191 File..... CANADIAN TROOPS, WITLEY.

Statement of the Soldier

(This is to be completed only in the case of the Soldier taking his Discharge in England.)
(Sections 1, 2, 5, and 6 are to be read to the Soldier.)

I, the undersigned.....have heard the description of my disability read, and am satisfied (or not satisfied) with it. (If dissatisfied, statement should follow.) I complain in addition of :—

.....
Signature of Soldier examined.

Instructions to Medical Officers

Question 1.—State the disability in terms of a diagnosis, that is, a diagnosis of the existing condition as distinguished from the disease or injury which caused it. It should be noted that in medical cases the disability may be the actual disease; for example, Tubercle of Lung, Chronic Bronchitis, Myalgia, Gastric conditions and so forth. (Follow the nomenclature as laid down in the "List of Diseases" of 1915, and amended by A. C. I. No. 1587 of 1917.)

Question 2.—The cause of the disability when known should be stated and care should be taken to establish as correctly as possible the place and date of origin. This is important in view of the relationship of Questions 3 and 4 to Question 5.

Questions 3 and 4.—*NOTE*—By Active Service is meant Service with the Colours in Canada, the United Kingdom or elsewhere during the present war, (since the 4th August, 1914.)

Question 5.—MEDICAL HISTORY.—State concisely the essential points of the history of the case as supported by documentary evidence. If further evidence is considered necessary to complete the Medical History, the same not being supported by documents, this should be obtained by questioning the soldier, but should be distinctly shown as "Patient's Statement." It is considered advisable that these latter statements be grouped apart from the evidence supported by documents available to the Medical Officer.

Extracts should be made from all entries on the Medical History Sheet.

If answers to Nos. 2, 3 or 4 show that the Soldier is suffering from some condition which pre-existed enlistment, it is advisable that these answers be substantiated as far as possible by statements obtained from the Soldier showing history of previous illness or injury.

Question 6.—PRESENT CONDITION.—As this question is primarily intended for the Medical Officer's report, in answering show clearly the condition of the Soldier at the time of examination.

It is directed that the objective and subjective matter be arranged in separate groups. The objective matter is considered to be the more important, in that it consists of a statement of the Medical Officer's actual finding.

Specialists' reports bearing on the PRESENT CONDITION should be attached.

In addition to description of the disability, a report on "all systems" is required in order that the whole when completed may be a true pen portrait of the Soldier's condition.

The Medical Officer in charge of the case will fill out pages 1 and 2 of this Form. The original must be wholly in the handwriting of the Medical Officer. The copies may be typewritten but must be signed by the Medical Officer who must be responsible that these are true copies of the original.

Finally the O. C. Hospital or S. M. O. or an Officer delegated for such duty by the A. D. M. S., is required to sign a certificate at the bottom of page 2, which reads as follows :—

"I have satisfied myself of the general accuracy of this report and concur therewith, except....."

This is a most important part of the paper and one to which the attention of the Officers concerned should be frequently drawn as it is by such strict supervision that the accuracy and good results of Medical Board work can be assured.

ENTRIES OF RECATEGORIZATION

Date	Station	Category	Signature of M. O.	Date	Station	Category	Signature of M. O.

196th Draft ORIGINAL 2193349

MEDICAL HISTORY SHEET

Surname Lee Christian Name John

Examined on 28th day of April 1917
at Regina, Sask

Birthplace City or Town Spring Valley
County Wis. U.S.A.

Apparent age 26Yrs 4Months

Trade or occupation Clerk

Height 5 feet 6 Inches

Weight 148 lbs.

Chest measurement Minimum 34½ inches
Maximum expansion 2½ inches

Physical development Good.

Small-pox Marks No.

Vaccination Marks Arm Right 0 Left 0
Number —

When Vaccinated last Never.

(a) Marks indicating congential peculiarities or previous disease None

(b) Slight defects but not sufficient to cause rejection None.

Approved by R J Macdonald
Rank Lieut M.O.

Date	Fit or Unfit	Examined for Re-Engagement	
			M.O.
			M.O.
		R E 20/20	M.O.
		L E 20/20	M.O.
		Hearing normal	M.O.
			M.O.
			M.O.
			M.O.

Date	Result	Vaccinations	
9/5/17	+	R J M	M.O.
			M.O.
			M.O.

Date	Result	Anti-Typhoid Inoculations, Etc.	
9/5/17	+	R J M	M.O.
5/9/18		I.A.D. C B Cotton	M.O.
			M.O.

Enlisted on 1 day of May 1917 at Saskatoon Sask

	Corps	Regt'l Number	Habits	Date
Joined on enlistment	196th Western Universities Batt. Draft	2193349		1st May 1917
Transferred to	PPCLI			

EXAMINED OR DISCHARGED BY A MEDICAL BOARD

Station	Date	Disease	Result
Seaford	18/6/19	None.	B II Invalided to Canada
Witley	18-1-19	Loose body in Knee	B II Admitted Canadian Con. Hospital
Seaford	11-3-19	duty	B II Rejoined unit

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

J.MC

M. F. B. 313.
500M.—3-16.
H. Q. 1772-39-439.

Surname Lee Christian Name John

196th Draft

STATION	Date of Arrival at the Station	DATES OF Admission into Hospital Day	Month	Year	DATES OF Discharge from Hospital Day	Month	Year	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

C.A.D.C. 5009A

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

DENTAL CERTIFICATE FOR DEMOBILIZATION

Canadian Printing and Stationery Services, London

NAME OF SOLDIER (Block Letters) LEE J.E.

REGIMENT E.O.R.D. RANK PTE No. 2193348

Date of Examination in England 22 FEB 1919 | 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. EXTRACTIONS
3. CROWNS
4. DENTURES
   - (*a*) Full Upper
   - (*b*) Part Upper
   - (*c*) Full Lower
   - (*d*) Part Lower

HAS HE EVER REFUSED DENTAL TREATMENT ? NO

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
- (*c*) In France

Signature of Dental Officer J. McDonald Capt.

Date of Enlistment

MILITIA AND DEFENCE

Separation and Assigned Pay Branch

OVERSEAS CONTINGENTS

L 4230

Date of Assignment

Aug 1, 1917

RATE OF SEPARATION ALLOWANCE

RATE OF ASSIGNMENT

15			

PARTICULARS OF SEPARATION ALLOWANCE

No. 2193349

Rank Pte Promoted Reverted Discharge

Soldier's Name J. E. Lee

Battalion 196th Battn

Beneficiary

Relationship

Address

PARTICULARS OF ASSIGNMENT

Name Mrs Andrew Lee

Address Glenwood City Wis. Change of Address W. S. A.

1

2

3

4

1917 Date	Cheque No.	Amount S/A	Amount A/P	Total		REMARKS
						10836-J-93
Dec 31			75	75		2 m 27-8-17
Jan	T 69097		15	15	9	
Feb	F 71580		15	15		
Mar	J 92396		15	15		
Apr	K 15960		15	15	✓	
May	L 16222		15	15	✓	
June	Z 12342		15	15	✓	
July	Z 23577		15	15	✓	
Aug	Z 35964		15	15	✓	
Sept	Z 49672		15	15	✓	
Oct	Z 64436		15	15	✓	
Nov	Z 79005		15	15	✓	
Dec	Z 97341		15	15	✓	
Jan.	Z 109700		15	15	✓	
Feby	Z 123063		15	15	✓	
Mar	Z 135149		15	15	✓	
April	Z 4604		15	15	✓	

A/c Closed 30-4-19 31 5

Ret'd per Canada

Date 1-4-19 F.X. 8-4-19

M.D. 12 Clerk

MRO dis 82236. 8-4-1911

APR 0 - 19. C

A STENCIL HAS BEEN MADE FOR THIS ACCOUNT

M. F. W. 128.
400m.—5-17—1772 39-1141
L. L. 23929—M. & D. 1933.

Date of Enlistment

MILITIA AND DEFENCE

Separation and Assigned Pay Branch

OVERSEAS CONTINGENTS

Date of Assignment

RATE OF SEPARATION ALLOWANCE

RATE OF ASSIGNMENT

PARTICULARS OF SEPARATION ALLOWANCE

No.

Rank Promoted Reverted Discharge

Soldier's Name

Battalion

Beneficiary

Relationship

Address

PARTICULARS OF ASSIGNMENT

Name

Address

Change of Address

1

2

3

4

Date	Cheque No.	Amount S/A	Amount A/P	Total	REMARKS

M. F. W. 128.
400m.—4-17—1772 39-1141
L. L. 22320—M. & D. 7933.

File L-464

S. S Canada 4-4-19

AUDITOR	PAYMASTER

PROMOTIONS, REDUCTIONS AND REVERSIONS AFFECTING
DAILY RATE OF PAY AND ALLOWANCES

M. OR S. | REGT. No. 2193349 | RANK Pte | NAME (IN FULL) LEE J. E. (BLOCK LETTERS SURNAME FIRST)

NEXT OF KIN — RELATIONSHIP

ADDRESS G.P.O. Glenwood City. Wisc. U.S.A.

IS SEPARATION ALLOWANCE PAID? — DATE EFFECTIVE

TO WHOM PAID — RELATIONSHIP

ADDRESS Nil

PARTICULARS	EFFECTIVE DATE	AUTHORITY

ORIGINAL UNIT C.E.F. ECRD — IF IN P.F. WHAT UNIT?

PLACE OF ATTESTATION — TRANSFERRED TO — DATE — AUTHORITY

DATE OF ATTESTATION 2-5-17. — TRANSFERRED TO — DATE — AUTHORITY No. 12 DISTRICT DEPOT

ASSIGNED PAY $ 15.00 — DATE EFFECTIVE 1-5-19

PAYABLE TO Mrs. A. Lee — RELATIONSHIP Mother

ADDRESS Glenwood City — Wis. U.S.A.

STOP PAYMENT FORM ASSIGNED PAY RENDERED, DATE — EFFECTIVE

ANY CHANGE IN ASSIGNEE OR ADDRESS

DISCHARGED — PLACE Regina — DATE 6-4-19 — REASON Demob — AUTHORITY O.C. 099 — IF ENTITLED TO POST DISCHARGE PAY Yes

MONTH	PAY AND F.A. NO. OF DAYS	RATE	AMOUNT $	AMOUNT C.	OTHER CREDITS $	OTHER CREDITS C.	C. Bal Rev'd $	C. Bal Rev'd C.	TOTAL CREDITS $	TOTAL CREDITS C.	ACQUITTANCE ROLLS COL. NO. 1 NO.	COL. NO. 1 DATE	COL. NO. 2 NO.	COL. NO. 2 DATE	COL. NO. 3 NO.	COL. NO. 3 DATE	CASH PAYMENTS COL. NO. 1 $	COL. NO. 1 C.	COL. NO. 2 $	COL. NO. 2 C.	COL. NO. 3 $	COL. NO. 3 C.	ASSIGNED PAY $	ASSIGNED PAY C.	REGIMENTAL CHARGES $	REGIMENTAL CHARGES C.	OTHER CHARGES $	OTHER CHARGES C.	Dr. Bal Rev'd $	Dr. Bal Rev'd C.	TOTAL DEBITS $	TOTAL DEBITS C.	BALANCE DEBIT $	BALANCE DEBIT C.	BALANCE CREDIT $	BALANCE CREDIT C.	PARTICULARS OR REMARKS
BALANCE FROM PREVIOUS ACCOUNT																																					
28-2-19					46	17	46	17	46	17																										46	17	
											Pa. L.R.						14	60																				Cr. 35.00 Allot.
											Boot						4	87																				Cr. 7.00 Pa. 7-4-19 to 4-19
											Drain						5	00					Mar. Qtr.															
1/3	13/4	44	1.10	48	40	35	00	46	17	83	40	Cheque					160	10					30	00			7	70			222	27	92	70			
				48	40	81	17			129	57						184	57					30	00			7	70			222	27	92	70			
												WAR SERVICE GRATUITY.																									
						W.S.G.						WAR SERVICE GRATUITY M.D. 12																		W.S.G.			Soldier.				
	122					280				280																				92	70	92	70	18	7 30		
																														70		162	70	11	7 30		
												I certify that all payments due on this account have been completed.																			70		232	70	47	30		
												Paymaster War Service Gratuity Military District No. 12																			47	30	280					
						280				280																				280		280					

Capt. J. Campbell CAPTAIN
for ASST. DIRECTOR OF PAY SERVICES
MILITARY DISTRICT No. 12

12 DD.

1971364 MAY 6 1919

615466 6/6/19

623403 JUL 6 1919

100M-1-19.—L. L. 53962-M. & D. 9723.
M. F. W. 2596.
1772-39-1390.