

REID  
ROBERT BENZIE  
N21639

21639

OFFICIAL NUMBER

FILE NUMBER

62-R.245

OFFICIAL NUMBER

21639

NAME REID (Surname) Robert Benzie (Given Names) DATE OF BIRTH 17th October, 1918PLACE OF BIRTH Cornwall, Ont. OCCUPATION MachinistRELIGION Presbyterian EDUCATION Third Year High schoolRESIDENCE AT TIME OF ENLISTMENT: Street and No. \_\_\_\_\_ Town Milltown Province, etc. N.B.

ENGAGEMENTS				DESCRIPTION					PREVIOUS SERVICE			
Date (in figures)			Period	Height	Hair	Eyes	Complexion	Marks or Scars	Served in	Rank or Rating	Dates	
Day	Month	Year									From	To
16	9	39	Seven years	5' 11"	L. Brwn.	Blue	Fresh					

NEXT OF KIN RELATIONSHIP (in pencil) Mother NAME (in pencil) HelenaADDRESS (in pencil): Street and No. \_\_\_\_\_ Town Milltown Province, etc. N.B.

MEDALS, CLASPS, HURT CERTIFICATES, PRIZE MONEY				EXAMINATIONS, CERTIFICATES, ETC.							
Date (in figures)			Particulars	Date (in figures)			Particulars	Date (in figures)			PARTICULARS
Day	Month	Year		Day	Month	Year		Day	Month	Year	

BADGES, G.C. OR G.S.					BRIEF PARTICULARS OF WARRANT OR C.M. PUNISHMENTS AND C.P. CHARGES						
Date (in figures)			1st, 2nd or 3rd G.C. or G.S.	Granted Deprived Restored	SHIP OR ESTABLISHMENT	Wt. No.	Date (in figures)			BRIEF PARTICULARS OF OFFENCE	PUNISHMENT
Day	Month	Year					Day	Month	Year		

Date (in figures)				DAYS FORFEITED				
Day	Month	Year	Prison	Det'n	Cells	C. Power	W. Trial	In diff. Char.

SECOND CLASS FOR CONDUCT

From \_\_\_\_\_ To \_\_\_\_\_



21639

OFFICIAL NUMBER

NAME REID  
(Surname)

Robert Benzie  
(Given Names)

OFFICIAL NUMBER

21639

Ship or Establishment	Rating	From			Remarks	Character	Efficiency	Date			Non-Sub. Rating	Qualified			Re-Qualified		
		Day	Month	Year				Day	Month	Year		Day	Month	Year	Day	Month	Year
Stadacona	A/O.A.4/c	16	9	39													
HMS Excellent	"	19	1	40													
Margaree	"		9	40													
<del>DISCHARGED</del>	<del>"</del>	<del>22</del>	<del>10</del>	<del>40</del>	<del>DEAD--Missing, presumed dead</del>												

GENERAL REMARKS

14-5-41 Memorial Cross issued to  
Mother: Mrs. Helen Reid  
Milltown, N.B.

DATE	17	0	18	11	270	0	50450301019	1	36	95
EN	16	09	39	16	09	39				
BY	16	09	39	09						
DATE	16	09	39	09						
BY	16	09	39	09						

DEPARTMENT OF NATIONAL DEFENCE  
(Naval Service)

DEFENCE  
15 1939  
C.N.S. 417  
3M-133  
N.S. 815-9-2417  
62-214

APPLICATION FOR ENTRY IN THE ROYAL CANADIAN NAVY

129 Brunswick Ave. Toronto Ont.  
(Place)

March 14 1939  
(Date) 06353

The Naval Secretary,  
Department of National Defence,  
OTTAWA.

SIR:— I hereby make formal application for entry in the Royal Canadian Navy, under a seven years' continuous service engagement as a Ordnance Artificer  
(Insert rating chosen)

I certify that the following particulars are in my own handwriting and are true in every respect:

1. Name (to be given in full in Block Letters)..... ROBERT BENZIE REID
2. Date of Birth (Birth Certificate or sworn declaration by parent or guardian *must* be attached)..... October 17 1918
3. Place of Birth. Town..... Cornwall, Province..... Ontario
4. Permanent Place of Residence. No..... Street.....  
Town..... Milltown, Province..... New Brunswick
5. Are you a British Subject?..... Yes
6. How long have you resided in Canada?..... Twenty-one years
7. What is your Mother Tongue?..... Canadian
8. What other language do you speak?..... No other language
9. Are you of the White Race?..... Yes
10. Are you Single, Married or a Widower?..... Single
11. How far advanced educationally are you?..... Three years and five months High School One Year Technical School  
(Certificates of School Authorities *must* be attached)
12. What practical experience have you had?  
(Details and certificates from employers, trade credentials, etc., *must* be attached to substantiate employment reported.)  
Five years practical experience in the machinist trade
13. Do you belong to any Naval, Military, Air or Police Force?..... No
14. If so, give details.....
15. Have you ever served in such forces?..... No
16. If so, give dates and details.....
17. Have you ever been discharged from His Majesty's Forces as medically unfit?..... No
18. Have you ever offered to serve in His Majesty's Forces and been rejected?..... No  
Why?.....
19. Have you ever been convicted of a criminal offence?..... No  
(Enclose two character references, one of which must confirm your answer to Question 19)
20. What is your weight?..... 155 Height..... 6'- $\frac{1}{2}$ " Chest Measurement (Not inflated).....
21. Have you ever had fits?..... No
22. Do you suffer from any deformity?..... No
23. Have you suffered the loss of any fingers, toes, etc.?..... No
24. Do you suffer from any disease?..... No
25. Do you wear glasses?..... No
26. Are you subject to *any* disability which might cause your rejection?  
..... No
27. Give details.....
28. Are you willing to be vaccinated and inoculated as considered necessary by the appropriate authorities?..... Yes  
Edith Jane Reid Signature of Witness      Robert Benzie Reid Signature of Applicant

CERTIFICATE TO BE SIGNED BY THE PARENT OR GUARDIAN OF CANDIDATES UNDER 21 YEARS OLD

I agree to refund to the Department of National Defence the expenses incurred by that Department for transportation to a Naval Base of the above applicant, should he, on arrival at such Base, fail to enrol for seven years' continuous Naval Service for reasons which in the opinion of the Department are within his own control. Signed and Sealed at....., this..... day of....., 19....., in the presence of

Signature of Witness

Signature of Parent or Guardian

CERTIFICATE TO BE SIGNED BY CANDIDATES OVER 21 YEARS OF AGE

I agree to refund to the Department of National Defence the expenses incurred by that Department for my transportation to a Naval Base, should I, on arrival at such Base, fail to enrol for seven years' continuous Naval Service for reasons which in the opinion of the Department are within my own control.

Signed and Sealed at..... Toronto Ont, this 14 day of..... March....., 1939, in the presence of.....  
Edith Jane Reid Signature of Witness      Robert Benzie Reid Signature of Candidate

ENTERED FROM T O R O N T O, O N T.

5 B 1 / 7 4 F.  
R

H. M. C. S. "STADACONA"

OFFICIAL NO. IF KNOWN }  
Space to be left vacant }  
if not known }

# CONTINUOUS SERVICE ENGAGEMENT, OR RE-ENGAGEMENT

To be forwarded to the Naval Secretary, Department of National Defence, with Form S. 59

Christian and Surname in Full <b>Robert Benzie R E I D</b>		Next of Kin Mother: <b>Helen</b> Name Address: <b>Milltown, New Brunswick.</b>	Present Rating <b>A/ O.A. 4clss.</b>
Date of Birth* <b>17th October, 1918</b>	Place of Birth† Town: <b>Cornwall</b> County: Province: <b>Ontario</b>		Name, Rank and Station of Recruiting Officer <b>W.J.R. BEECH COMMANDER, RCN. HMCS. "STADACONA" COMMANDING OFFICER</b>

### Personal Description at the Date of this Document

Height	Chest	Hair	Eyes	Complexion	Wounds, Scars or Marks	Religious Denomination	Trade or Occupation
<b>5ft 11.</b>	<b>34 31 32.</b>	<b>br Brown</b>	<b>Blue</b>	<b>Fresh</b>	<b>None</b>	<b>Protestant</b>	<b>Machinist</b>

Commencing date of Engagement or Re-engagement	<b>16th September, 1939</b>	Period of Engagement or Re-engagement	<b>SEVEN YEARS</b>
Date of actually volunteering to engage or re-engage	<b>20th Mch 1939</b>	Date of entering present ship	<b>16th September, 1939</b>

Particulars of former Continuous Service Engagements, if any; but, if none, and the person engaging has had previous Service, the date of his First Entry should be given. If the person has not previously served, write the words "First Entry" here.

If an Engagement is ante-dated for any period, the man's services for such period should be forwarded in to office, with the Engagement, on Form S.—1243.

"FIRST ENTRY"

### Declaration of Entry or Re-Entry from Shore for Continuous Service

The following questions are to be put by the Commanding Officer to the person about to engage for Continuous Service, whose answers are to be recorded hereon:—

- Are the particulars given above of your name and date and place of birth correct? **Yes**
- Are you a British subject?† **Yes**
- Nationality of parents—Father: **Scotch** Mother: **Scotch**
- Have you ever served in the Navy, Royal Fleet Reserve, Royal Naval Reserve, Army, Army Reserve, Marines, Militia, Volunteers (Naval or Military), Territorial Force or in His Majesty's Indian or Colonial Military Forces, or in the R. C. Mounted Police?‡ **No**
- Do you now belong to the Militia, Volunteers (Naval or Military), Territorial Force or any Regiment or Corps in His Majesty's Army, or to any established Naval or Army Reserve Force, or to the R. C. Mounted Police?L **No**
- Have you ever been rejected as unfit for His Majesty's service, or discharged from it on that account? If so, state reason of rejection or discharge, and date. **No**
- Have you ever been discharged from the Navy, Marines, Army or R. C. Mounted Police on account of misconduct? **No**
- Are you willing to be vaccinated or re-vaccinated and inoculated? **Yes**
- Can you swim? **Yes**

Personnel Records Division.

1. Noted in Record **Am**

2. Index Card **Am**

3. Non-Sub. Card **Am**

4. Statistical Card **Am**

5. Roneo Strip **Am**

6. Pension Card **Am**

7. **Am**

8. DATE

\*When evidence of age is obtained on First Entry, it should be attached to this Form.  
 †Foreigner care not to be entered. On the entry of a person born out of the British Empire, it should be ascertained that he is (and in the case of a boy, that his father is) a British Subject, and evidence of the fact should be attached to the "Entry Papers."  
 ‡Particulars of service in the Army, Army Reserve, Naval Reserve, Marines, Militia, or H. M. Indian or Colonial Military Forces, or in the Merchant Service should be forwarded in to office with this Engagement. If a member of the Royal Fleet Reserve, the man's Registrar is to be immediately informed of his entry (Royal Fleet Reserve Instructions). If an R.N.R. man, state number of R.V.2.

*Noted on Estimate Card  
26/10/39.*

I.—Declaration and Certificate for Men newly entered and Men who have been out of the Service since the expiration of their previous C. S. Engagement

I, Robert Benzie R E I D, do solemnly declare that to the best of my knowledge and belief the answers to the questions overleaf are true, and I do hereby agree to serve honestly and faithfully in the Naval

Service of Canada\* for the term of SEVEN YEARS from 16th September 1939, provided my service should be so long required. And I do sincerely promise and swear (or solemnly declare) that I will be faithful

and bear true allegiance to His Majesty. As witness my hand this 28th day of September 1939

Robert Benzie Reid Man's Signature in full  
Acting Ordnance Artificer 4th Class

Witness to Signature Russell A Brownell  
Chief Petty Officer

Attested before me this 28th day of September, 1939.

James Rogers Signature of a Commissioned  
Pay Lieutenant-~~Commander~~, RCNR. Officer of the Naval Service

Date 28th September, 1939.

This is to certify that we have examined the person named on the other side hereof as to his fitness for the Naval Service of Canada, and we find as follows:—He is of perfectly sound and healthy constitution, free from all physical malformataion, active and intelligent; and we consider him in all respects fit for His Majesty's Service.

W. J. Keen Commanding Officer  
COMMANDEER, R.C.N.  
A. W. Collins Medical Officer  
M.O., R.C.N. Barracks,

*[Faint, mostly illegible text from the reverse side of the document, including a list of questions and answers.]*



24247

Can. B. 207

20M-8-38  
N.S. 815-2-207

OCT 22 1938  
N.S. 62-R-245  
CANADA

# CERTIFICATE OF MEDICAL EXAMINATION FOR THE ENTRY OF OFFICERS, MEN AND BOYS FOR THE NAVAL SERVICE OF CANADA

(R.C.N. OR RESERVE FORCES)

16

NOTE—This Certificate is to be completed by the Examining Medical Officer and forwarded to the Naval Secretary, Department of National Defence, Ottawa.

I, the undersigned, have examined REID, Robert Benzie  
candidate for entry as O.A. R.N.V. 7 years Enrolment  
and I believe him to be in all respects fit for His Majesty's Service. He has signed the Certificate given below in my presence.

Dated at Halifax ex'is the 27<sup>th</sup> of September 1939.  
X-ray at Christie St. Hosp Toronto  
of white race  
Stewart Hard  
Examining Medical Officer  
(Rank) Surgeon Lieut. R.C.N.V.R.

This examination has been made in accordance with the Instructions for Recruiting.

(a) Age { Years Months	(b) Weight without Clothes	(c) Height with Bare Feet	(d) General Development	(e) Chest Girth	Vision by— (i) Snellen's Types (ii) Colour Vision	(f) Vaccinated or re- vaccinated for Small Pox (Date)	(g) Lungs, Heart, etc.	(h) Abdomen, Hernia, etc.	(i) Limbs and Joints	(j) Skin	(k) Ears and Hearing	(l) Testes, Varicocele, etc.	(m) Mouth, Teeth (No. def- icient and No. defective, if any), Nose, Tonsils, etc.	(n) Anus, Hemorrhoids, etc.
21 <sup>11</sup> / <sub>12</sub>	138	5' 11"	Good	inches (a) maximum 34 (b) minimum 31 (c) mean 32 1/2	right eye 6/5 left eye 6/5 colour vision N(80)	Vacc 1920	Normal	Normal	Normal	Clear	Normal W.V. 20/40	Normal	One defective tooth Chile deficient for oral hygiene	Normal Nil

## CERTIFICATE TO BE SIGNED BY THE CANDIDATE

I hereby certify that to the best of my belief I have never suffered from Fits, \*Incontinence of Urine, Discharge from the Ears, or any other disease likely to render me unfit for His Majesty's Service. I am willing to undergo, after entry, such dental treatment as may be authorized.

Robert B. Reid  
Signature of Candidate

When a Candidate is passed, notwithstanding a slight defect or disability, the following Certificate is to be filled up

This Candidate is the subject of.....  
.....  
not considered of sufficient importance to cause his rejection, he being desirable in other respects.

.....  
Examining Medical Officer  
(Rank).....

\* The exact meaning of this is to be clearly explained to the Candidate by the Examining Medical Officer.



D OF D 22-10-40

R-300  
D.D.

DEPARTMENT OF VETERANS AFFAIRS

# AWARDS (NAVY)

WAR SERVICE RECORDS

REID	Robert Benzie	N-21639	O.A.	FILE No. 4/c 359278
SURNAME (IN BLOCK LETTERS)	CHRISTIAN NAMES	REG. No.	RANK ON DISCHARGE	C.A.S.F. UNIT

WAR SERVICE

BADGE

(CLASS)	No.	DATE DESPATCHED:
---------	-----	------------------

ADDRESS:

CAMPAIGN MEDALS	REGISTRATION NUMBER AN DATE DESPATCHED
1939-45 Star	<i>Medals Reid under R.D. Reid to stock.</i> 8993 12-7-50 <b>CANCELLED</b>
Defence Medal	
C.V.S.M. & Clasp	
War Medal	

(THE REVERSE TO BE USED FOR ESTATE PURPOSES)

RCN Aug.43 "MARGAREE"

MEDALS AND MEMORIALS—DECEASED PERSONNEL

REGISTRATION No. DATE OF DESPATCH

(1) MEDALS

PERSON

ENTITLED TO Mr. W. Reid - Father.

ADDRESS:

~~XXXXXXXXXXXX~~. 97 Clive Crescent,  
Hamilton, Ontario

(2) MEMORIAL CROSS

WIDOW

ADDRESS:

(3) MEMORIAL CROSS

MOTHER Mrs. Helen Reid

ADDRESS:

Milltown, N.B.

MEMORIAL BAR

(1)

DATE DESP.....

REGN. NO.....

2118

(2)

(3)

14-5-41

MEMORANDUM FOR

P. 64

Mrs. Helen Reid,

Milltown, N.B.

Any further communication on this subject should be addressed to:—

THE ADMINISTRATOR OF ESTATES,  
DEPARTMENT OF NATIONAL DEFENCE,  
OTTAWA, ONTARIO.

and the following number quoted:—

H.Q. 62-B-245 FD.26

DEPARTMENT OF NATIONAL DEFENCE  
OTTAWA, ONT.

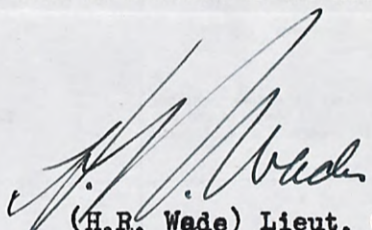
April 15, 1942

For the purpose of record and in the event of there being any balance of pay, medals or memorials available for distribution (according to law) on account of the late

REID, Robert Benzie, A/O.A. 4/cl.

H.M.C.S. "MARGAREE"

it is necessary that the requisite information regarding the deceased and his relatives should be furnished on the inside of this form in strict accordance with the printed instructions. The particulars required are to be carefully filled in and the Declaration on the back should then be signed in the presence of a Clergyman, Priest, Local Magistrate, Commissioner for Oaths or Notary Public, who should be asked to complete and sign the Certificate. This form should then be returned to the above address.

  
(H.R. Wade) Lieut. Cdr., RCNVR,  
for (L.M. Firth) Major,  
Administrator of Estates.



ANSWER IN FULL ALL APPLICABLE QUESTIONS

STATEMENT of the Names, Ages and Addresses or Dates of Death, of all the relatives that the deceased ever had in each of the degrees specified below.

Degrees of Relationship	RELATIVES required to be accounted for		INFORMANT'S STATEMENT		
			NAME IN FULL of any Relative, if any, in each degree inquired for	Age	ADDRESS IN FULL of each surviving Relative, opposite his or her name, and date of death of each deceased relative
1	Widow of the Deceased.....		—		
2	Children of the Deceased and dates of their Births.....		—		
3	Father of the Deceased.....		William Reid	56	97 Meline Crescent Hamilton Ont.
4	Mother of the Deceased.....		Helen Cormack Reid	54	do
5	Brothers of the Deceased	Full Blood	—		
		Half Blood			
6	Sisters of the Deceased	Full Blood	Mrs Norman Dain Miss Bertha Reid	29 27	126 Murray St Leitham, Ont. 3610 Overden Ave Montreal
		Half Blood			
7	Names of brothers or sisters (whether of the full or the half blood) of the Deceased, who are dead, and date of death of each.		Names and ages of their children (if any)		Address of their children

ONLY IF NO RELATIVES IN THE DEGREES ABOVE ARE NOW LIVING, THE FOLLOWING PARTICULARS SHOULD BE GIVEN

	RELATIVES	NAMES OF THOSE LIVING	Age	ADDRESS IN FULL
8	Grand-Parents of the Deceased....			
9	Uncles and Aunts by blood of the Deceased (not Uncles and Aunts by marriage).....		Age	

FULL PARTICULARS AS TO IDENTITY

10	What is the full name of the deceased?	Robert Benzie Reid
11	Give the month and year of his birth.	October 17 <sup>th</sup> 1917
12	Where and when were his parents married?	Montreal, Que June 29 1911
13	If deceased was married, state place and date of marriage.	—
14	Did he leave a Will? If so, a copy should be attached hereto.	No
15	Did he leave a bank account? If so, give full particulars.	Yes \$53984 in Bank of Montreal St. Stephen St. Stephen No
16	Is there any other estate which will necessitate application being made for Probate of the Will or Letters of Administration of the estate?	Yes.
17	State your own postal address in full.	97 E. line brescent Hamilton Ont

PARTICULARS OF DOMICILE

18	Where was deceased born?	Cornwall, Ontario
19	State, in order, the Province (or State) and country in which the deceased resided and the period of time in each, and in which last.	Ontario
20	What was the nature of his employment?	Machinist
21	Did he own the premises in which he lived? If so, where?	No
22	Did he ever state verbally, or in writing, where he intended to make his permanent home?	No

OTHER PARTICULARS

23	Did the deceased after enlistment incur any debts for:— (a) His own separate board and lodging while on service. (b) Service clothing and equipment. An itemized account for each such debt should be attached hereto, and if same is correct you should mark the bill "approved" and sign same. If believed incorrect, give particulars.	No
24	Have you or any other relative paid the funeral expenses or any part thereof? If so, attach itemized accounts showing amount paid, and by whom.  (NOTE:—The Government pays funeral expenses within the amounts authorized in the Regulations, where death occurs and burial is made Overseas as well as where death occurs and burial is made in Canada, and if a relative has already paid those expenses the Government will reimburse such relative to the extent of the amount authorized in the Regulations. Any amount of such expenses in excess of those authorized in the Regulations is not payable by the Government nor is it chargeable against the service estate of the deceased.)	

(PLEASE TURN OVER)

DECLARATION

\*Insert designation of relationship for example, "Widow," "Father," "Brother," etc

I hereby declare that the foregoing particulars are correct, and a true and complete statement of all the relatives that the deceased ever had in the degrees inquired for; and that I am the

\* Mother of the deceased.

N.B. To be signed in full in the presence of a Clergyman, Priest, Local Magistrate, Commissioner or Notary Public.

Helen G. Reid

{Signature of Informant

CERTIFICATE

I hereby certify that, to the best of my knowledge and belief.....

\*See above Helen C Reid { Name of Informant } is the \* Mother of the Deceased above described, and I believe the above Declaration and the Statement of Relatives made by the Informant and signed in my presence to be complete and correct.

Dated at Hamilton, Ont this 21<sup>st</sup> day of May 1942

Signature of Clergyman, Priest, Magistrate, Commissioner or Notary Public

Alan L Ambrose

Qualification Notary Public Commissioner &

Address Pijott Bldg, Hamilton, Ont.

NOTE.—Before granting the above Certificate, care should be taken to see that the Informant gives particulars concerning the death of any Relative stated by him or her to have died, and that the full name and address and age of each surviving Relative enquired after is stated in its proper place in the Statement opposite.

USE SPACE BELOW FOR ANY ADDITIONAL REMARKS YOU MAY WISH TO MAKE

As mother of deceased Robert B. Reid I should be entitled to compensation allowance.

Helen G. Reid

**DISTRIBUTION OF SERVICE ESTATES**

Estates Form "P. 4"

Name REID Surname Robert B. Christian Names No. N.21639

Rank A/OA. 4/c Unit R.C.N. Date of Death 22-10-40

7      AMOUNT      W.S.G..... 212.77  
 L.P.C.....\$ 70.78

Date 7th February, 1949.

Other Credits.....  
 Total..... 283.55  
 Prev. Dist. 70.78  
 This Dist. 212.77

SHARE	RELATIONSHIP	NAME AND ADDRESS	AMOUNT
ALL	FATHER	William Reid, Administrator of the Estate of Robert B. Reid (Deceased) 97 Clive Crescent, Hamilton, Ont.	212.77

*P. 4 to treas 11-2-49  
 NB*

AUTHORITY					
H.Q. F.E. No.	VOTE	PRI	H.Q. SUB.	OBJ.	AMOUNT
9999	549	00	22	000	212.77
CLASSIFIED BY <i>NB</i>			EXAMINED BY  For Chief Treasury Officer		

DISTRIBUTION APPROVED AND AUTHORIZED

*[Signature]*  
 (R.J. Orde) Brigadier,  
 (Lt. M. F. ... ) Colonel  
 Director of Estates  
**Judge Advocate General.**  
 AUDITED FOR PAYMENT

**DISTRIBUTION OF SERVICE ESTATES**

Estates Form "P. 4"

NAVY

GMC

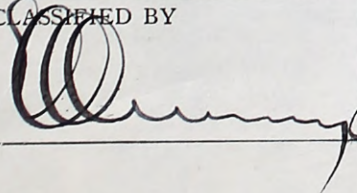
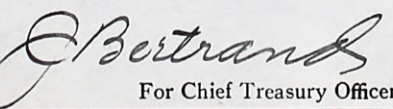
Name: REID Surname Robert B. Christian Names No.: 21639

O.A.IV Rank H.M.C.S. "Margaret" Unit 22-10-40 Date of Death

AMOUNT

Date: 15-7-43 L.P.C.....\$ 70.78  
 Other Credits.....  
 Total..... 70.78

SHARE	RELATIONSHIP	NAME AND ADDRESS	AMOUNT
All	Father	William Reid, "as administrator of the estate of the late Robert B. Reid," 97 Clive Crescent, Hamilton, Ontario	\$ 70.78

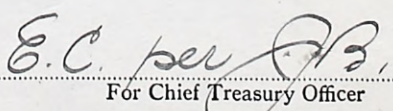
AUTHORITY					
H.Q. F.E. No.	VOTE	PRI	H.Q. SUB.	OBJ.	AMOUNT
9999	831	00	50	000	\$ 70.78
CLASSIFIED BY 			EXAMINED BY  For Chief Treasury Officer		

DISTRIBUTION APPROVED AND AUTHORIZED

Original signed by  
**N. O. SEAGRAM**

(L. M. FIRTH) Lt.-Colonel  
Administrator of Estates

AUDITED FOR PAYMENT

  
For Chief Treasury Officer



~~4600-12~~

4000-9

# HOWARD SMITH PAPER MILLS LIMITED

MILLS:  
BEAUHARNOIS  
CORNWALL  
CRABTREE MILLS

CORNWALL DIVISION  
CORNWALL, ONTARIO

SALES OFFICES:  
MONTREAL  
TORONTO  
WINNIPEG

IN REPLYING  
PLEASE REFER TO.....

May 7, 1947.

20435

N.21639

17512

Records Branch,  
Naval Headquarters,  
Ottawa, Ont.

Gentlemen:

We are planning to erect a bronze memorial tablet in memory of former employees of this Company who gave their lives in World War II. According to our records, Pilot Officer Robert Reid, R.C.N.V.R., was reported killed in October, 1940, and we believe that he was drowned when the H.M.C.S. "MARGAREE" was sunk.

We would like to receive the personal number, correct rank and decorations, if any, as shown on your records so that the information shown on the memorial tablet will be correct.

Your kind co-operation will be appreciated.

Yours very truly,

HOWARD SMITH PAPER MILLS LIMITED,

A. M. IRVINE,  
Office Manager.

AMI:MEG

INDEXED IN C. R.

By *hp*



HOWARD SMITH PARK MICHIGAN

HOWARD SMITH PARK MICHIGAN

HOWARD SMITH



CAM

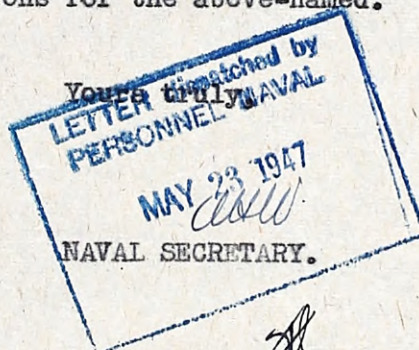
N.S. N-21639, PERS.(N) "N"/4.

23 May, 1947.

Sir:

With reference to your letter of the 7th of May, 1947, I am directed to inform you that Robert Benzie Reid, Ordnance Artificer Fourth Class, Official Number 21639, Royal Canadian Navy, is missing, presumed dead to date the 22nd of October, 1940, when H.M.C.S. "MARGAREE", the ship in which he was serving, was sunk at sea.

There is no record in the Department of any decorations for the above-named.



Office Manager,  
Cornwall Division,  
Howard Smith Paper Mills Ltd.,  
CORNWALL, Ontario.

NH  
DEPARTMENT OF NATIONAL DEFENCE  
NAVY        ARMY        AIR FORCE  
STATEMENT OF WAR SERVICE GRATUITY

20184

2  
NAVY

DECEASED MEMBER'S NAME

**Robert B. REID**

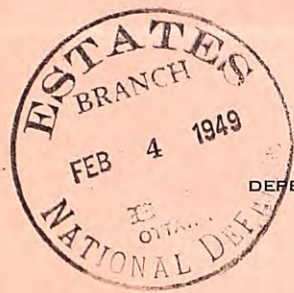
PAYEE ADDRESS

(CHRISTIAN NAMES)  
Director of Estates,  
National Defence Bldg.,  
Slater Street,  
OTTAWA, Ont.

(SURNAME) **REID** (for service estate of Robert B. Reid, N-21639)  
REGISTER NO. 204245  
FILE NO. NS.N-21639  
DATE 25-1-49  
SERVICE NO. N-21639  
FINAL RANK OR RATING A/OA.4/c  
DATE OF DISCHARGE 22 Oct/40

DATE OF TERMINATION OF OVERSEAS SERVICE 22 Oct/40

A. TOTAL QUALIFYING SERVICE		\$ 97.50
NO. OF DAYS 403 EQUAL TO 13 COMPLETE PERIODS AT \$7.50 <small>30</small>		
B. QUALIFYING OVERSEAS SERVICE		66.00
NO. OF DAYS 277 LESS 13 INELIGIBLE DAYS, EQUAL TO 264 DAYS @ 25C. PER DAY		
C. SUPPLEMENT FOR OVERSEAS SERVICE		
DAILY RATES AT DISCHARGE		
PAY	\$ 3.05	
SUBSISTENCE OR LODGING AND PROVISION ALLOWANCE	\$ 1.45	
ADDITIONAL PAY	HLM \$ .15	
DEPENDENTS' ALLOWANCE 1/30 OF \$	\$	
TOTAL	\$ 4.65 X 7 = \$ 32.55	49.27
NO. OF DAYS 277	X \$ 32.55	
D. WAR SERVICE GRATUITY		212.77
E. DEDUCTIONS	OVERPAYMENT OF PAY AND ALLOWANCES \$ DEPENDENTS' ALLOWANCE AND ASSIGNED PAY \$	nil
OTHER DEDUCTIONS \$		
F. TOTAL AMOUNT PAYABLE		212.77
G. YOUR PORTION OF GRATUITY IS—		
DEPENDENTS' ALLOWANCE IN ISSUE TO YOU \$		=\$
TOTAL DEPENDENTS' ALLOWANCE IN ISSUE \$		212.77



CERTIFICATE I CERTIFY THAT THE AMOUNT HAS BEEN CORRECTLY COMPUTED AND IS PAYABLE IN ACCORDANCE WITH THE TERMS OF THE WAR SERVICE GRANTS ACT, 1944 AND THE REGULATIONS ISSUED THEREUNDER.

PREPARED BY MEE CHECKED BY HBN

TREASURY  
CHECKED BY [Signature] DATE 27/1/49 [Signature]  
for DIRECTOR OF NAVAL PAY ACCOUNTING SERVICE REPRESENTATIVE

If a copy of this Form is required, Form C.N.S. 1243 is to be used

119

The corner of this Certificate is to be cut off if the man is discharged with a "Bad" character or with disgrace, or if specially directed by the Department of National Defence (Naval Service). If the corner is cut off, the fact is to be noted in the Ledger.

**CERTIFICATE of the Service of**

*Robert Benzie* **REID**

**IN THE ROYAL CANADIAN NAVY**

Port Division *Halifax, N.S.*

Official Number *21639*

Date of birth *17<sup>th</sup> October, 1918*  
 Where born { Province *Ontario*  
 Town or county *Cornwall*  
 Trade brought up to *Spackinist*  
 Religious denomination *Protestant*  
 Date passed swimming test  
 Man's signature on discharge to pension }

Nearest known Relative or Friend (To be noted in pencil)  
 Name: *Helen*  
 Relationship: *Mother*  
 Address: *Milltown, N.B.*

**All Engagements, including N.C.S., to be noted in these Columns**

Date of actually volunteering	Commencement of time	Period volunteered for	Date of actually volunteering	Commencement of time	Period volunteered for
1. <i>16<sup>th</sup> September, 1939</i>		<i>Seven Years</i>	5.		
2.			6.		
3.			7.		
4.			8.		

**Medals, Clasps, Etc.**

Date received or forfeited	Nature of decoration	Date received or forfeited	Nature of decoration

Description of Person	Stature		Chest, In.	Colour of			Marks, Wounds and Scars
	Feet	In.		Hair	Eyes	Complexion	
On entry as a boy.....			<i>34</i>				
On advancement to man's rating or on entry under 28 years.....	<i>5</i>	<i>11</i>	<i>31 3/2</i>	<i>Lt. Brown</i>	<i>Blue</i>	<i>Fresh</i>	<i>- N14 -</i>
On re-entry for C.S. or for Non-C.S. after attaining 28 years.....							
Further description if necessary .....							







VERIFICATION FORM  
 CAMPAIGN STARS, DEFENCE MEDAL, WAR MEDAL, C.V.  
 NAVAL GENERAL SERVICE MEDAL (1915)

NAME IN FULL REID Robert Benzie RANK/RATING A/OA 4/c

SHIP	SERVICE			AREA	QUALIFYING		
	FROM	TO	DAYS		FROM	TO	1939-45
	16/9/39						
Excellent	20/1/40	14/10/40	300	UK			
Margaret	15/10/40	22/10/40	8	act.			
				<u>22/10/40</u>	<u>His Head</u>	<u>NA</u>	

VERIFIED BY W. MacGin

VERIFIED BY .....



OFFICIAL COPY

S. 1320D  
10 MIL-5-40 (5005)  
N.S. 815-9-1320D

NAVAL MESSAGE

To: N.S.H.Q. OTTAWA

From: HIGH COMMISSIONER  
LONDON

*62-R-245*

*27*

COMBRAX PORTSMOUTH REPORTS THAT ROBERT B. REID  
A/O.A. 4 R.C.N. 21639 HAS COMPLETED COURSE AND  
REQUESTS INFORMATION AS TO WHETHER HE SHOULD BE DISCHARGED  
TO R.C.N. DESTROYERS OR REPORT FOR PASSAGE TO HALIFAX.

1821/25

T/T

N.CODE

REC'D SDO  
0120/26

26.9.40

CL

5362

OFFICIAL COPY

NAVAL MESSAGE

62 R 248

S. 1320d.  
5000 Pads of 200  
9-39-(1854)  
N.S. 815-9-1320d

To:  
"C. STADACONA", 717.

From:

N.S.H.Q., OTTAWA.

20

PASSAGE IS TO BE ARRANGED FOR ROBERT B. REID  
ACTING O.A. 4TH CLASS O.N. 21639 TO UNDERGO QUALIFYING COURSE IN  
H.M.S. "EXCELLENT". REID IS TO REPORT TO H.M.S. "EXCELLENT" ON ARRIVAL  
IN ENGLAND. DATE OF SAILING IS TO BE REPORTED TO N.S.H.Q.

1131/11

T/T

P/L

REC'D SDO  
1140/11

C.B.

11.1.40

0635

PA

M06352

129 Brunswick Ave.

Toronto Ont.

March 14/39.

NATIONAL DEFENCE

MAR 15 1939

62-24  
CANADA

Dear Sir:-

Enclosed please find application  
for entry in the "Royal Canadian Navy."

At present I am taking a one year special course  
at the Central Technical School Toronto. I am registered  
in the regular day classes and the five evening classes,  
which include the following subjects. Machine Shop  
Theory and practice, Machine Design, Diesel, Steam Power  
Plant, Applied Mechanics, Forge and Welding.

References required are enclosed and I would  
appreciate it very much, if they could be returned.

Until June 15<sup>th</sup> the above address will  
reach me.

Thanking you I remain

Yours respectfully.

Robert B. Reid.

- Naval Service -

September 6, 1939.

Sir,-

I am directed to advise you that you are now under consideration for entry into the Royal Canadian Navy as an Acting Ordnance Artificer, 4th Class, under a Seven Years' Continuous and General Service Engagement.

Before your entry can be approved it will be necessary for you to undergo final medical examination, X-Ray, Educational and Trade Tests. You should report to the District Medical Officer of Military District No. 3, 169 Bay Street, TORONTO, Ontario, at Nine A.M., as soon as possible, and request him to examine you, showing him this letter as your authority. You should hand him the enclosed Forms 2207 in triplicate (Medical Examination Form) and 2207A (Physical Qualifications Required).

Provided you are found physically fit, the Military Authorities will supply you with the following transportation from Toronto, Ontario to Halifax, N.S.:-

1 Second Class Railway Ticket - Toronto, Ont. to Halifax, N.S.

You are to report to the Commander, R.C.N. Barracks, Halifax, N.S., immediately.

If you are not physically fit, the Military Authorities will so advise you, in which case your entry cannot be approved.

As requested in Naval Service letter of 20th March, 1939, you are to forward to Naval Service Headquarters, Ottawa, a Certificate of Birth or declaration sworn to before a Notary Public as to date of birth, before reporting for medical examination.

You should acknowledge receipt of this letter: enclosed addressed envelope is for this purpose.

Yours truly,

Mr. Robert B. Reid,  
189 Brunswick Ave.,  
TORONTO, Ontario.

(D) The Commander/  
R.C.N. Barracks,  
HALIFAX, N.S.

-2-

(J. G. Cossetto)  
Naval Secretary.

- Forwarded for information. Provided Reid reports he is to be given a Trade Test and if suitable in all other respects, he is to be entered in the R.C.N. as an Acting Ordnance Artificer, 4th Class, forthwith. X-Ray examination is to be carried out at Toronto. Date of Birth - 17th October, 1918, not certified. Copy of Continuous Service Engagement Form is to be forwarded to Headquarters in due course.  
BY ORDER.

COPY DOC.

Naval Secretary.

OFFICIAL COPY  
NAVAL MESSAGE

S. 1820D  
10 MIL-5-40 (5005)  
N.S. 815-9-1820D

To: MR. WILLIAM REID,  
HILLTOWN, N.B.

From:

62-R-245

29

THE MINISTER OF NATIONAL DEFENCE DEEPLY REGRET TO INFORM  
YOU THAT YOUR SON ROBERT BENZIE REID ORDNANCE ARTIFICER 4/C  
R.C.N. O.N. 21639 IS MISSING BELIEVED KILLED.

-/26

L/T

P/L

REC'D SDO  
1700/26

OG

27.10.40

5534

1st November, 1940.

Dear Sir:


It is with deep regret that I must confirm the telegram sent out by the Minister of National Defence, reporting that your son, Robert Benzie Reid, O.A., 4th Class, O.N. 21639, R.C.N., was missing, believed killed.

Few details are available, but it is known that H.M.C.S. "MARGAREE" was sunk in collision in the North Atlantic whilst steaming without lights, on convoy duty, and in the submarine zone. 142 Officers and ratings are missing and must be presumed lost at sea.

I am requested to express to you the sincere sympathy of the Minister of National Defence for Naval Services and the Chief of the Naval Staff in your bereavement.

Any further information, which is received, will be at once communicated to you.

Yours very truly,



(J. O. Cossette),  
Naval Secretary.

Mr. William Reid,  
MILLTOWN, N.B.

OFFICIAL COPY

NAVAL MESSAGE

S. 1320H  
5 MIL-5-40 (4975)  
N.S. 815-9-1320H

To:

N.S.H.Q. OTTAWA 495

From:

HIGH COMMISSIONER  
FOR CANADA

62 R-24<sup>o</sup> 32

COMBRAX PORTSMOUTH STATES FOLLOWING TELEGRAM RECEIVED  
BY EXCELLENT FROM EDITH REID CHATHAM ONTARIO BEGINS WAS  
ROBERT B REID ABOARD "MARGAREE" ENDS SIGNAL (CORRUPT GR\$)  
NO ADMIRALTY INCLUDES NAME OF R.B. REID A/OA AS BEING  
EMBARKED. WILL YOU PLEASE REPLY TO EDITH REID'S ENQUIRY.

1706/4

(CORRUPT GROUPS HAVE BEEN ASKED FOR)

PREL. COPY TO D.N.P. AT 1515/6

T/T CODE X REC'D SDO 6.11.40 CL 1537  
1450/6

OFFICIAL COPY  
NAVAL MESSAGE

S. 1320D  
10 Mil.-5-40 (5005)  
N.S. 815-9-1320D

To: MISS EDITH REID  
CHATHAM ONT.

From: N.S.H.Q.

62-Q-245

31

REFERENCE YOUR CABLE TO R.N. BARRACKS PORTSMOUTH  
DEEPLY REGRET TO CONFIRM THAT ROBERT B. REID ORDNANCE ARTIFICER  
4TH CLASS R.C.N. OFFICIAL NUMBER 21639 WAS A CASUALTY IN  
HMCS "MARGAREE" AND IS MISSING BELIEVED LOST AT SEA.

- 16 .

L/T

P/L

REC'D SDC  
1640/5

AB

6-11-40

2016

NAVAL MESSAGE

DRAFTED BY DNP  
CJD

S. 1320D  
10 Mil. 5-40 (5005)  
N.S. 815-9-1320D

To:

WILLIAM READ, ESQ.,  
MILLTOWN, N.B.

From:

N.S.H.Q. OTTAWA

17 R - 245  
33

EDITH REID OF CHATHAM ONTARIO HAS CABLED TO  
R.N. BARRACKS PORTSMOUTH ENGLAND ASKING CONFIRMATION  
OF LOSS OF YOUR SON R.B. REID ORDNANCE ARTIFICER FOURTH  
CLASS R.C.N. IN "MARGAREE". OUR MESSAGE TO MISS REID  
RETURNED UNDELIVERED. REQUEST YOU MAY WIRE HER ADDRESS  
OR INFORM HER DIRECT.

1231/7

L/T

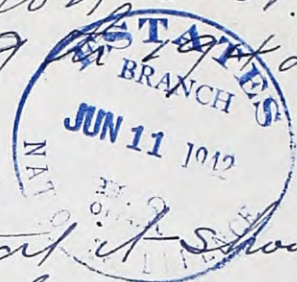
P/L

REC'D SDG  
1455/7

7.11.40

CL 2201

99 Oline Crescent  
Hamilton, Ont.  
June 9<sup>th</sup> 1912



Sir It is rather strange that it should take the Government one and a half years to attend to the Estate of the members of the crew of HMCS. Margome who lost their lives, in a disaster that could have been avoided.

In order to have a Government Bond and Bank account in trust in my name for my son transferred it was necessary for me to go to a lawyer in St. Stephen, N.B. and with all the political appointees down there having to get a rake off the bill to the lawyer was \$69<sup>80</sup> made up of \$5<sup>00</sup> to the lawyer and \$64<sup>80</sup> to satisfy the Politicians friends.

The Judge of Probate got his fee although he was a Lt Col in command of Home Guard in St. John N.B. drawing \$10<sup>00</sup> or \$12<sup>00</sup> a day plus allowance. As he could not do the actual work in connection with the letter of administration

a deputy "Leroy W. Hill, brother or a  
relative of the local member Burton Hill  
had to be paid for what little was  
necessary.

I fail to see any justice in  
this and am sure such graft would  
not be tolerated anywhere else and if  
such happened in Germany the Gestapo  
would soon have those political  
friends of Burton Hill in a concentration  
camp. It is the duty of the Government  
to reimburse me to the extent of my  
outlay as above.

Yours truly  
William Reid

P 29922

Milltown, N.B. March 14th 1941

DEPT. NATIONAL DEFENCE

MAR 16 1941  
N.S. 62-R-245  
CANADA

42

Sir,

It has taken me a little longer to answer your letter of January 22nd Ref. 62 - R - 245 than it did for the Department to confirm the death of my son. However to answer your question the mother of the late Robert Benzie Reid is living. The gesture on the Government's part in supplying Memorial Crosses may be all right in some cases but in the case of the loss of the destroyer "Margaree" I should say they should be ashamed when they know full well that 142 young lives went to their death through carelessness.

There is another matter which I dont think is at all right and that is ~~that~~ that the Canadian Press had all the details of the sinking, the names of those lost and the names of the survivors on Saturday, October 22nd. and all that the next of kin got was "Reported lost - believed killed" Who was entitled to the information first? Of course we cannot expect anything different from the present Government.

Yours truly,

*[Handwritten signature]*

Memorial Cross recorded for Mrs. H. Reid *[initials]*

*[initials]*  
Referred please.

*[initials]*

MAR 18 1941

All ~~essentially~~ telegrams were sent out before Press Release. *[initials]*

*[Handwritten note]*  
Noted  
*[initials]*

*[initials]* 20-3-41.