

Form 1

REGISTRATION CARD

No. 57

1 Name in full Moby Cleveland Tingle Age, in yrs. 30
(Given name) (Family name)

2 Home address R.R. #1 Bedford Ky
(No.) (Street) (City) (State)

3 Date of birth Oct 11 1886
(Month) (Day) (Year)

4 Are you (1) a natural-born citizen, (2) a naturalized citizen, (3) an alien, (4) or have you declared your intention (specify which)? Natural born

5 Where were you born? Turners Ky, U.S.A
(Town) (State) (Nation)

6 If not a citizen, of what country are you a citizen or subject? U.S.A

7 What is your present trade, occupation, or office? Farmer

8 By whom employed? Jesse Turner
 Where employed? Prestonville

9 Have you a father, mother, wife, child under 12, or a sister or brother under 12, solely dependent on you for support (specify which)? Wife & two children

10 Married or single (which)? Married Race (specify which)? Caucasian

11 What military service have you had? Rank None; branch _____
 years _____; Nation or State _____

12 Do you claim exemption from draft (specify grounds)? Support of wife & children

I affirm that I have verified above answers and that they are true.

Moby Cleveland Tingle
 (Signature or mark)

If person is of
 legal age, a descent,
 or citizen

16-3-11 Carroll "A"
REGISTRAR'S REPORT

1 Tall, medium, or short (specify which)? Medium Slender, medium, or stout (which)? Medium

2 Color of eyes? Brown Color of hair? Red Bald? almost

3 Has person lost arm, leg, hand, foot, or both eyes, or is he otherwise disabled (specify)? No

I certify that my answers are true, that the person registered has read his own answers, that I have witnessed his signature, and that all of his answers of which I have knowledge are true, except as follows:

Chas. C. Coghill
 (Signature of registrar)

Precinct

Prestonville

City or County

Carroll

State

Ky

June 5 1917
 (Date of registration)