

REGISTRATION CARD

SERIAL NUMBER: *1320*

1 *Squire Alys Single*

2 PERMANENT HOME ADDRESS: *Franklin Ave Ky*

3 Age in Years: *45* Date of Birth: *August 7 - 1873*

4 RACE: *Indian*

5 U. S. CITIZEN: ALIEN:

10 Native Born: Naturalized: Citizen by Father's Naturalization Before Registrant's Majority: Declarant: Non-declarant:

15 If not a citizen of the U. S., of what nation are you a citizen or subject?

16 PRESENT OCCUPATION: *James* EMPLOYER'S NAME: *17*

18 PLACE OF EMPLOYMENT OR BUSINESS:

19 NEAREST RELATIVE: Name: *Lizzie Single* Address: *Franklin Ave Ky*

I AFFIRM THAT I HAVE VERIFIED ABOVE ANSWERS AND THAT THEY ARE TRUE

P. M. G. O. Form No. 1 (revised) *Squire & Alys Single*

REGISTRAR'S REPORT

DESCRIPTION OF REGISTRANT

HEIGHT			BUILD			COLOR OF EYES	COLOR OF HAIR
Tall	Medium	Short	Slender	Medium	Stout		
21	<input checked="" type="checkbox"/> 22	23	24	<input checked="" type="checkbox"/> 25	26	27 <i>Gray</i>	28 <i>Red</i>

29 Has person lost arm, leg, hand, eye, or is he obviously physically disqualified? (Specify.) *no*

30 I certify that my answers are true; that the person registered has read or has had read to him his own answers; that I have witnessed his signature or mark, and that all of his answers of which I have knowledge are true, except as follows:

Date of Registration: *Sept. 12 - 1918*

J. H. Underwood (Signature of Registrar)

(STAMP OF LOCAL BOARD)

(The stamp of the Local Board having jurisdiction of the area in which the registrant has his permanent home shall be placed in this box.)