

Form 1

REGISTRATION

- 1 Name in full Louis George
(Given name) George
- 2 Name
address Robert
123 Main Street
- 3 Date of birth December
(Month) 19
- 4 Are you (1) a natural born citizen, (2) a naturalized citizen,
or (3) an alien? A Naturalized Citizen
- 5 Where were
you born? Ohio
(State) Ohio
- 6 If not a citizen, of what country are you a citizen or subject? _____
- 7 Who is your present
employer, corporation, or office? Service
- 8 By whom employed? Dixie Lumber
- 9 Where employed? Bethel
- 10 Have you a father, mother, wife, child under 12, or a brother or
sister? Wife
- 11 Married or single? Married
- 12 What military service have you had? Rank _____
Army _____ Nation or State _____
- 13 Do you claim exemption
from draft? (Specify grounds) Defend

I affirm that I have verified above

REGISTRAR'S REPORT 9-1

- 1 Tall medium, or
short (specify which)? Middle Gender, medium, or short (which)? Male
- 2 Color of eyes _____ Color of hair Dark Brown
- 3 Has person lost arm, leg, hand, foot, or both
eyes, or is he otherwise disabled (specify)? None

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

James T. Baile
(Signature of registrant)

President None
City or County Bethel
State Florida

James
(Date)

#123 Louis G