

Form 1

325

REGISTRATION CARD

2474

No. 329

1 Name in full *Porter Atlas* Age, in yrs. *22*
 (Given name) (Family name)

2 Home address *Box 234 Rayburn Memphis Tenn*
 (No.) (Street) (City) (State)

3 Date of birth *Jan 20 1895*
 (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)? *1*

5 Where were you born? *Lake Providence La. U.S.*
 (City) (State) (Country)

6 If not a citizen, of what country are you a citizen or subject?

7 What is your present trade, occupation, or office? *Porter*
Mrs Reed *29*

8 By whom employed? *316 Beale*
 Where employed?

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)? *no*

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

11 What military service have you had? Rank *none* branch
 years; Nation or State

12 Do you claim exemption from draft (specify grounds)?

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

(Signature or mark)

41-2-20A

REGISTRAR'S REPORT

1 Tall, medium, or short (specify which)? *Short* Stature, medium, or stout (specify which)? *Slender*

2 Color of eyes? *Black* Color of hair? *Black* *no*

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:

J. W. Hartley

Precinct *1*
 City or County *Memphis*
 State *Tenn*

6/5/1916