

REGISTRATION CARD

SERIAL NUMBER 842 ORDER NUMBER 139

1 Louis Balfour Atlas
(First name) (Middle name) (Last name)

2 PERMANENT HOME ADDRESS: Lake Providence East 6 La
(No.) (Street or R. F. D. No.) (City or town) (County) (State)

Age in Years 43 Date of Birth Oct 29 1874
(Month) (Day) (Year)

RACE

White	Negro	Oriental	Indian	
5	6 <input checked="" type="checkbox"/>	7	Citizen	Non-citizen
			8	9

U. S. CITIZEN **ALIEN**

Native Born	Naturalized	Citizen by Father's Naturalization Before Registrant's Majority	Declarant	Non-declarant
10 <input checked="" type="checkbox"/>	11	12	13	14

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

16 PRESENT OCCUPATION Farming 17 EMPLOYER'S NAME

18 PLACE OF EMPLOYMENT OR BUSINESS: Lake Providence East 6 La
(No.) (Street or R. F. D. No.) (City or town) (County) (State)

NEAREST RELATIVE Name (Wife) Jessie Lee Atlas
 Address Lake Providence East 6 La
(No.) (Street or R. F. D. No.) (City or town) (County) (State)

I AFFIRM THAT I HAVE VERIFIED ABOVE ANSWERS AND THAT THEY ARE TRUE
 P. M. G. O. Louis Balfour Atlas
 Form No. 1 (Red) (Registrant's signature or mark)

17-3-12. EAST CARROLL. C.

DESCRIPTION OF REGISTRANT

HEIGHT		BUILD			COLOR OF EYES	COLOR OF HAIR
21	22 <input checked="" type="checkbox"/>	23	24	25 <input checked="" type="checkbox"/>	26	27 <u>Black</u> 28 <u>Black</u>

29 Has person lost arm, leg, hand, eye, or is he otherwise 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:

D. J. [Signature]
 Date of Registration Sept 12 1918

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.