

REGISTRATION CARD—(Men born on or after April 28, 1877 and on or before February 16, 1897)

SERIAL NUMBER 01813 **1. NAME (Print)** Richard Seligman Johnstone **ORDER NUMBER** _____

2. PLACE OF RESIDENCE (Print)
202 East Littlewood St. Etha Pa
(Number and street) (Town, township, village, or city) (County) (State)

[THE PLACE OF RESIDENCE GIVEN ON THE LINE ABOVE WILL DETERMINE LOCAL BOARD JURISDICTION; LINE 8 OF REGISTRATION CERTIFICATE WILL BE IDENTICAL]

3. MAILING ADDRESS
Same
(Mailing address if other than place indicated on line 2. If same insert word same)

4. TELEPHONE Glenview 467 **5. AGE IN YEARS** 48 **6. PLACE OF BIRTH** Pittsburgh Pa.
(Number and street or R. F. D. number) (No.) (Day) (Yr.) (Town or county) (State or country)

7. NAME AND ADDRESS OF PERSON WHO WILL ALWAYS KNOW YOUR ADDRESS
Charles E. Johnstone, 116 East Littlewood St. Etha Pa.

8. EMPLOYER'S NAME AND ADDRESS
American Bridge Co.

9. PLACE OF EMPLOYMENT OR BUSINESS
51st + Butler St. Pittsburgh Allegheny Pa.
(Number and street or R. F. D. number) (Town) (County) (State)

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

D. S. S. Form 1 (Revised 4-1-42) (over) 16-21630-2 RS Johnstone
(Registrar's signature)

REGISTRAR'S REPORT

DESCRIPTION OF REGISTRANT			
RACE	HEIGHT (Approx.)	WEIGHT (Approx.)	COMPLEXION
<input checked="" type="checkbox"/> White	<u>5-11 3/4</u>	<u>238</u>	<input checked="" type="checkbox"/> Sallow
<input type="checkbox"/> Negro	<input type="checkbox"/> Blue	<input type="checkbox"/> Blondes	<input type="checkbox"/> Light
<input type="checkbox"/> Oriental	<input type="checkbox"/> Gray	<input type="checkbox"/> Red	<input type="checkbox"/> Ruddy
<input type="checkbox"/> Indian	<input type="checkbox"/> Hazel	<input type="checkbox"/> Brown	<input type="checkbox"/> Dark
<input type="checkbox"/> Filipino	<input type="checkbox"/> Brown	<input type="checkbox"/> Black	<input type="checkbox"/> Freckled
	<input type="checkbox"/> Black	<input type="checkbox"/> Gray	<input type="checkbox"/> Light brown
		<input type="checkbox"/> Bald	<input type="checkbox"/> Dark brown
			<input type="checkbox"/> Black

Other obvious physical characteristics that will aid in identification:
3 Ingrown on Right Hand. Burned
(Scarred)

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:

Registrar for Local Board Arthur Meyer
(Signature of registrar)

Date of registration April 27 1942
(Date)

LOCAL BOARD NO. 3
WYOMING COUNTY
 Post Office Building
 WYOMING, PENNA.
 STAMP OF LOCAL BOARD

828
 079
 008

(The stamp of the Local Board having jurisdiction of the registrant shall be placed in the above space)

