

SERIAL NUMBER

1010

1. NAME (Print)

Charles Richard Roberts
(First) (Middle) (Last)

ORDER NUMBER

01517

2. ADDRESS (Print)

~~53 Pierpont St~~ * New Haven Conn
(Number and street or R. F. D. number) (Town) (County) (State)

3. TELEPHONE

4. AGE IN YEARS

5. PLACE OF BIRTH

6. COUNTRY OF CITIZENSHIP

21
DATE OF BIRTH

New Haven
(Town or county)

U.S.

Jan 28 1919
(Mo.) (Day) (Yr.)

Conn
(State or country)

7. NAME OF PERSON WHO WILL ALWAYS KNOW YOUR ADDRESS

8. RELATIONSHIP OF THAT PERSON

Mrs. James Saccavino
(Mr., Mrs., Miss) (First) (Middle) (Last)

Friend

9. ADDRESS OF THAT PERSON

53 Pierpont St New Haven Conn
(Number and street or R. F. D. number) (Town) (County) (State)

10. EMPLOYER'S NAME

George Provoost

11. PLACE OF EMPLOYMENT OR BUSINESS

Hamden Conn
(Number and street or R. F. D. number) (Town) (County) (State)

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

REGISTRATION CARD
D. S. S. Form 1

(over)

16-17105

Charles R. Roberts
(Registrant's signature)