

Form 1 1339 REGISTRATION CARD 590 No. 46

1 Name in full Albert Billy Age, in yrs. 29
(Given name) (Family name)

2 Home address Silmar Okla
(No.) (Street) (City) (State)

3 Date of birth Oct 8 1887
(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)? Natural born

5 Where were you born? Howe Okla
(Town) (State) (Nation)

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

7 What is your present trade, occupation, or office? Farmer

8 By whom employed?

9 Where employed?

10 Have you a father, mother, wife, child under 12, or a sister or brother under 12, solely dependent on you for support (specify which)? wife two children

11 Married or single (which)? married Race (specify which)? Indian

12 What military service have you had? Rank none branch _____
years _____ Nation or State _____

13 Do you claim exemption from draft (specify grounds)? _____

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

CA Albert Billy
(Signature of man)

35-1-10-A

REGISTRAR'S REPORT

1 Tell, medium, or short (specify which)? Tall Slender, medium, or stout (which)? medium

2 Color of eyes? Black Color of hair? Black Bald? 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. C. Bowles
(Signature of registrar)

Precinct Silmar

City or County Le Flore

State Okla

June 5 1917
(Date of registration)