

Form 1 1917 REGISTRATION CARD No. 411

1 Name in full *Irving Sinclair Becker* 26

2 Home address *Seamuck Rd., Seamuck N.Y.*

3 Date of birth *Nov. 30 1891*

4 Are you (1) a natural born citizen, (2) a naturalized citizen, (3) an alien, (4) or have you declared your intention to become a citizen? *Natural born*

5 Where were you born? *New York City N.Y. U.S.A.*

6 If not a citizen, at what court and on what date did you declare your intention?

7 What is your present trade, occupation, or office? *Electrician*

8 By whom employed? *Long Island Railroad*

Where employed? *Long Island City N.Y.*

9 Have you a father, mother, wife, child under 18, or a sister or brother under 18, who is dependent on you for support (specify which)? *no.*

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

11 What military service have you had? Rank *no.* branch

12 Do you claim exemption from draft on any ground? *Waiver Physical condition Gas poisoning*

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

Irving Sinclair Becker

29-17-A

REGISTRAR'S REPORT

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

2 Color of eyes? *Blue* Color of hair? *Brown* Build? *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:

Hjalmar Lagergren
(Signature of registrar)

Precinct *#1, Seamuck*

City or County *Bergen*

State *N.Y.*

June 5, 1917