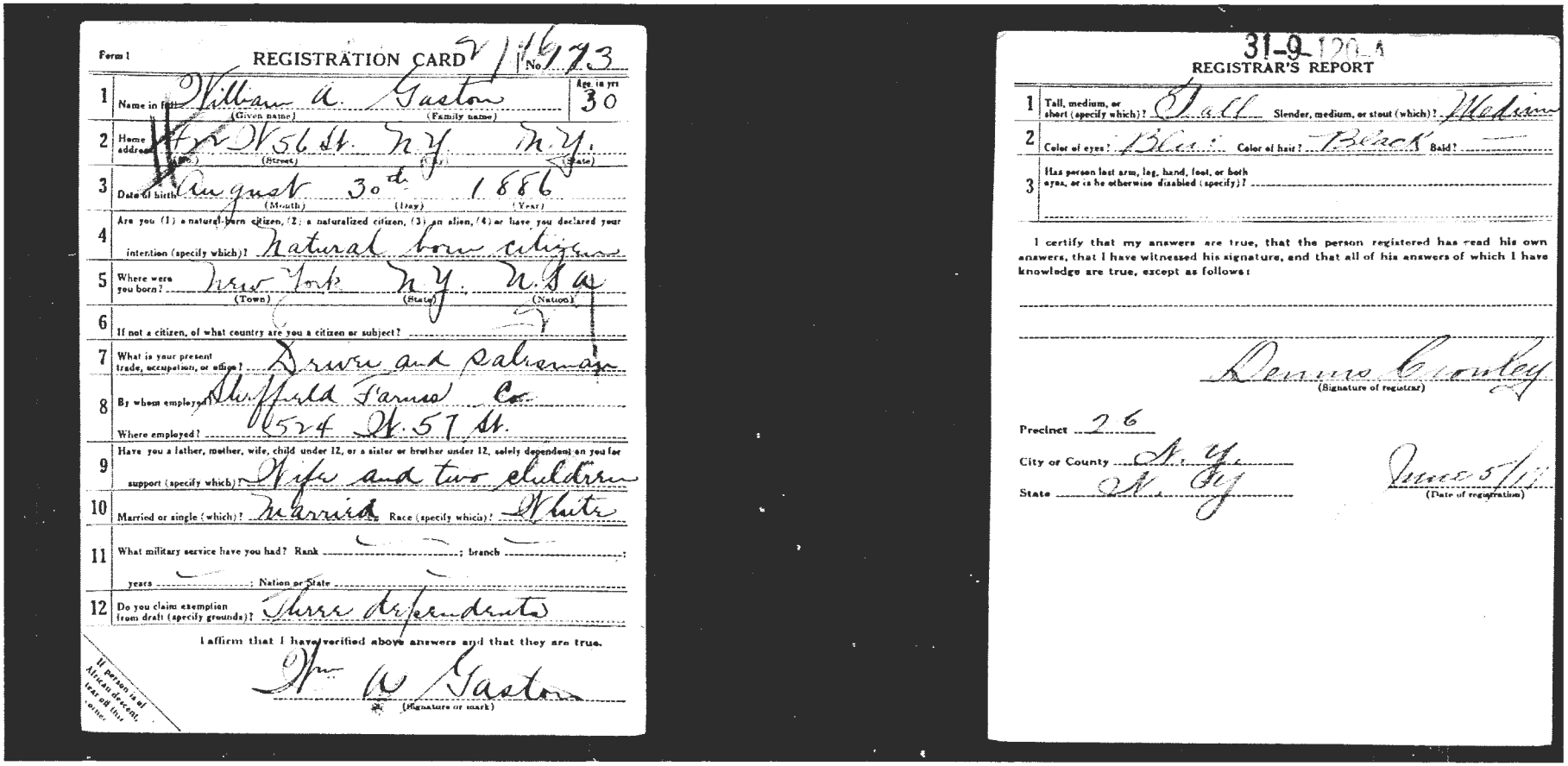

Form 1

REGISTRATION CARD

No. 1673

1. Name in full: William A. Gaston (Given name) (Family name) — Age in yrs: 30
2. Home address: 422 W. 56 St. (No.) (Street) N.Y. (City) N.Y. (State)
3. Date of birth: August 30th (Month) (Day) 1886 (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 citizen
5. Where were you born? New York (Town) N.Y. (State) U.S.A. (Nation)
6. If not a citizen, of what country are you a citizen or subject?
7. What is your present trade, occupation, or office? Driver and Salesman
8. By whom employed? Sheffield Farms Co. Where employed? 524 W. 57 St.
9. 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 and two children
10. Married or single (which)? Married Race (specify which)? White
11. What military service have you had? Rank ——; branch ——; years ——; Nation or State ——
12. Do you claim exemption from draft (specify grounds)? Three dependents

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

Wm A Gaston
(Signature or mark)

If person is of African descent, fill out this line — write "colored" or "black"

31-9 120-1

REGISTRAR'S REPORT

1. Tall, medium, or short (specify which)? Tall Slender, medium, or stout (which)? Medium
2. Color of eyes? Blue Color of hair? Black Bald? —
3. Has person lost arm, leg, hand, foot, or both eyes, or is he otherwise disabled (specify)?

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:

Dennis Crowley
(Signature of registrar)

Precinct 26

City or County N.Y.

State N.Y.

June 5 '17
(Date of registration)