

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

SERIAL NUMBER U 1820	1. NAME (Print) RAYMOND JOSEPH MAXWELL (First) (Middle) (Last)		ORDER NUMBER
2. PLACE OF RESIDENCE (Print) 395 QUEEN AVE Rd Teaneck - Bergen - N.J. (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 2 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 Teaneck 6-3974W	5. AGE IN YEARS 46	6. PLACE OF BIRTH Brooklyn (Town or county) (State or country)	
DATE OF BIRTH Nov 30 1896 (Mo.) (Day) (Yr.)			
7. NAME AND ADDRESS OF PERSON WHO WILL ALWAYS KNOW YOUR ADDRESS (Exchange) (Number) MRS. MARION H. MAXWELL			
8. EMPLOYER'S NAME AND ADDRESS ECLIPSE AVIATION CO. BENDIX, N.J.			
9. PLACE OF EMPLOYMENT OR BUSINESS 11 02 02 04 01 (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. R. R. FORM 1 (Revised 4-1-42)		(over) Raymond J. Maxwell (Registrant's signature)	