

REGISTRATION CARD a

SERIAL NUMBER	738	ORDER NUMBER	1361
1	Peter Pescosolido		
	<small>(First name)</small>	<small>(Middle name)</small>	<small>(Last name)</small>
2	PERMANENT HOME ADDRESS: Church St. Meriden Conn		
	<small>(No.)</small>	<small>(Street or R. F. D. No.)</small>	<small>(City or town)</small> <small>(County)</small> <small>(State)</small>
3	Age in Years	4	Date of Birth
	20	March	30 1898
	<small>(Month)</small>	<small>(Day)</small>	<small>(Year)</small>
RACE			
White		Negro	Oriental
Indian		Citizen Non-citizen	
5	6	7	8 9
<input checked="" type="checkbox"/>			
U. S. CITIZEN		ALIEN	
Native Born		Naturalized	Citizen by Father's Naturalization Before Registrant's Majority
Declarant		Non-declarant	
10	11	12	13 14
		<input checked="" type="checkbox"/>	
15 If not a citizen of the U. S., of what nation are you a citizen or subject?			
PRESENT OCCUPATION		EMPLOYER'S NAME	
16	Stenographer		17 Pratt & Whitney
18 PLACE OF EMPLOYMENT OR BUSINESS: Hospital Ave Hartford Conn			
	<small>(No.)</small>	<small>(Street or R. F. D. No.)</small>	<small>(City or town)</small> <small>(County)</small> <small>(State)</small>
NEAREST RELATIVE		19 Name	
		20 Address	
		John A. Pescosolido	
		Church St. Meriden Conn	
		<small>(No.)</small>	<small>(Street or R. F. D. No.)</small> <small>(City or town)</small> <small>(County)</small> <small>(State)</small>
I AFFIRM THAT I HAVE VERIFIED ABOVE ANSWERS AND THAT THEY ARE TRUE			
P. M. G. O.		Peter Pescosolido	
Form No. 1 (Red)		<small>(Registrant's signature or mark)</small>	<small>(OVER)</small>

6-1-4 C

REGISTRAR'S REPORT

DESCRIPTION OF REGISTRANT

HEIGHT			BUILD			COLOR OF EYES	COLOR OF HAIR
Tall	Medium	Short	Slender	Medium	Stout		
21	22 <input checked="" type="checkbox"/>	23	24	25 <input checked="" type="checkbox"/>	26	27 brown	28 brown

29 Has person lost arm, leg, hand, eye, or is he obviously physically disqualified? (Specify.)
No

30 I certify that my answers are true; that the person registered has read or has had read to him his own answers; that I have witnessed his signature or mark, and that all of his answers of which I have knowledge are true, except as follows:

Joseph H. Maurice

(Signature of Registrar)

Date of Registration Sept 12 1918

Local Board for Division No. 1
For the County of Hartford,
State of Connecticut,
Wells Hall, East Hartford, Conn.
(SEAL OF LOCAL BOARD)

(The stamp of the Local Board having jurisdiction of the area in which the registrant has his permanent home shall be placed in this box.)

63-6171 (OVER)