

37-4-35. A

REGISTRAR'S REPORT

1 Name in full *John Howard Buck 1852* (Given name) (Family name) Age in yrs. *22*

2 Home address *RD #4 Wellstons Pa* (No.) (Street) (City) (State)

3 Date of birth *Nov. 5 1895-* (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? *Elmira N.Y. U.S.A.* (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? *Farm Laborer*

8 By whom employed? *Ross Beeman* Where employed? *North Delmar*

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 *Co*; branch _____ years _____; Nation or State _____

12 Do you claim exemption from draft (specify grounds)? *No*

1 i tall, medium, or short (specify which)? *Short* Slender, medium, or stout (which)? *Medium*

2 Color of eyes? *Black* Color of hair? *Black* Bald? _____

3 Has person lost arm, leg, hand, foot, or both eyes, or is he otherwise disabled (specify)? *None*

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:

John H. Baughman
(Signature of Registrar)

North Delmar

City or County *Trigo*

State *Pa*

June 5-1917
(Date of registration)

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

John Howard Buck
(Signature or mark)