

REGISTRATION CARD

SERIAL NUMBER	2356	ORDER NUMBER	A-1117
1	William	Leo	Kohlbrunner
	(First name)	(Middle name)	(Last name)
2 PERMANENT HOME ADDRESS:			
132	Mary St	Syracuse	Onondaga NY
(No.)	(Street or R. F. D. No.)	(City or town)	(County) (State)
Age in Years	Date of Birth		
3 19	4 Feb	21	1899
	(Month)	(Day)	(Year)

R A C E

White	Negro	Oriental	Indian	
			Citizen	Noncitizen
5 ☒	6	7	8	9

U. S. CITIZEN

ALIEN

Native Born	Naturalized	Citizen by Father's Naturalization Before Registrant's Majority	Declarant	Non-declarant
10 ☒	11	12	13	14

15 If not a citizen of the U. S., of what nation are you a citizen or subject?

PRESENT OCCUPATION

EMPLOYER'S NAME

16 Salesman	17 Neal + Hyde Inc
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18 PLACE OF EMPLOYMENT OR BUSINESS:

318	S. Clinton	Syracuse	Onondaga	NY
(No.)	(Street or R. F. D. No.)	(City or town)	(County)	(State)

NEAREST RELATIVE	Name	19 Leo Kohlbrunner		
	Address	20 132 Mary St Syracuse Onondaga NY		
		(No.)	(Street or R. F. D. No.)	(City or town) (County) (State)

I AFFIRM THAT I HAVE VERIFIED ABOVE ANSWERS AND THAT THEY ARE TRUE

P. M. G. O.
Form No. 1 (Red)

CS-6171

(Registrant's signature or mark)

(OVER)

William Leo Kohlbrunner

REGISTRAR'S REPORT

DESCRIPTION OF REGISTRANT

HEIGHT			BUILD			COLOR OF EYES	COLOR OF HAIR
Tall	Medium	Short	Slender	Medium	Stout		
21	22 ☒	23	24	25 ☒	26	27 Brown	28 Br

29 Has person lost arm, leg, hand, eye, or is he obviously physically disqualified? (Specify.)

☒

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:

Percy F. Lee

(Signature of Registrar)

Date of Registration

Sept 12 1918

Local Board for Division No. 1
City of Syracuse, State of New York
Gurney Bldg., 474 So. Salina St.

(Syracuse, N.Y. 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.)