

SERIAL NUMBER 2791	1. NAME (Print) Charles Louis Kohlbreunner (First) (Middle) (Last)			ORDER NUMBER 707
2. ADDRESS (Print) 1125 Schuyler St Utica Oneida N.Y. (Number and street or R. F. D. number) (Town) (County) (State)				
3. TELEPHONE none	4. AGE IN YEARS 33 DATE OF BIRTH 8 5 1907 (Mo.) (Day) (Yr.)		5. PLACE OF BIRTH Syracuse N.Y. (Town or county) (State or country)	
6. COUNTRY OF CITIZENSHIP U.S.			7. NAME OF PERSON WHO WILL ALWAYS KNOW YOUR ADDRESS FATHER Gabriel Kohlbreunner (Mr., Mrs., Miss) (First) (Middle) (Last)	
8. RELATIONSHIP OF THAT PERSON BROTHER			9. ADDRESS OF THAT PERSON St. Joseph's Church - 702 Columbia St. Utica Oneida N.Y. (Number and street or R. F. D. number) (Town) (County) (State)	
10. EMPLOYER'S NAME Unemployed.				
11. PLACE OF EMPLOYMENT OR BUSINESS (Number and street or R. F. D. number) (Town) (County) (State)				

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

REGISTRATION CARD
D. S. S. Form 1

(over)

16-17105

C. Louis Kohlbreunner
(Registrant's signature)

REGISTRAR'S REPORT

DESCRIPTION OF REGISTRANT

RACE		HEIGHT (Approx.)		WEIGHT (Approx.)		COMPLEXION	
White	✓	5' 11 1/2"		134		Sallow	
		EYES		HAIR		Light	
Negro		Blue	✓	Blonde		Ruddy	
		Gray		Red		Dark	✓
Oriental		Hazel		Brown	✓	Freckled	
		Brown		Black		Light brown	
Indian		Black		Gray		Dark brown	
				Bald		Black	
Filipino							

Other obvious physical characteristics that will aid in identification.....

Wears glasses

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:

Registrar for

(Precinct)

(Ward)

(City or county)

(State)

Date of registration

LOCAL DRAFT BOARD

No. 429

UTICA, NEW YORK

(STAMP OF LOCAL BOARD)

(The stamp of the Local Board having jurisdiction of the registrant shall be placed in the above space.)