

Form 1 **REGISTRATION CARD** <sup>7654</sup> No. 82

1 Name in full Joseph Hopkins Stanley Age in yrs. 30  
(Print name) (Print name)

2 Home address 11<sup>th</sup> Louisiana St. Little Rock Ark  
(No.) (Street) (City) (State)

3 Date of birth August 15<sup>th</sup> 1896  
(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? Augusta Ark U.S.A  
(State) (State) (Nation)

6 If not a citizen, what country are you a citizen or subject?

7 What is your present trade, occupation, or office? Bank clerk

8 By whom employed? Southern Trust Co.  
 Where employed? Little Rock Ark

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)? None

10 Married or single (which)? Married Race (specify which) Caucasian

11 What military service have you had? Rank none; branch none  
 years none; Nation or State none

12 Do you claim exemption from draft (specify grounds)?

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

Joseph Hopkins Stanley  
(Signature of registrant)

If person is an alien, specify country.

**A3-1-31 REGISTRAR'S REPORT**

1 Tall, medium or short (specify which)? Medium Slender, medium, or stout (which)? Medium

2 Color of eyes? Grey Color of hair? Black Bald? \_\_\_\_\_

3 Has person lost arm, leg, hand, foot, or both eyes, or is he otherwise disabled (specify)? no

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 \_\_\_\_\_

Louis R. Michael  
(Signature of registrar)

Precinct A 2  
 City or County Little Rock Ark  
 State Arkansas 6-5-1917  
(Date of registration)

<sup>7654</sup>