45-1-360

REGISTRATION CARD

SERIAL NUMBER 1321 | ORDER NUMBER 652

1. Sylvester Hamilton Bonebrake
(First name) (Middle name) (Last name)

2. PERMANENT HOME ADDRESS: 63 Seaboard Ave So Norfolk Va
(Number) (Street or R. F. D. No.) (City) (County) (State)

3. Age in Years: 32 | 4. Date of Birth: Oct. 1st 1885
(Month) (Day) (Year)

RACE

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

U. S. CITIZEN

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

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

15. PRESENT OCCUPATION	17. EMPLOYER'S NAME
Sectionman	U. S. Govt.

16. PLACE OF EMPLOYMENT OR BUSINESS: Open Storage Yard. Suffolk
(Number) (Street or R. F. D. No.) (City) (County) (State)

18. NEAREST RELATIVE: Name Mr. A. W. Bonebrake (father)
Address Kingsman Ind
(Number) (Street or R. F. D. No.) (City) (County) (State)

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

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

Sylvester H. Bonebrake
(Registrant's signature)

(OVER)

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	Blue	Dark

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:

No exceptions

H. H. Hatton
(Signature of Registrar)

Date of Registration: Sept 16 1918

Norfolk County Local Board
Portsmouth, Va.
(STAMP 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.)

(OVER)