

Form 1

## REGISTRATION CARD

No. 13

1252 13

1 Name in full: Eugene William Jenkins (Given name) (Family name) Age, in yrs. 23

2 Home address: R # 1 (Street) Osceola (City) Minn (State)

3 Date of birth: November 24 1892 (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 citizen

5 Where were you born? Osceola (Town) Minn (State) America (Nation)

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

7 What is your present trade, occupation, or office? Farmer

8 By whom employed? Myself

Where employed? Brooklyn

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)? Help support family

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

11 What military service have you had? Rank: No. ; branch: ; years: ; Nation or State:

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

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

Eugene William Jenkins  
(Signature of registrant)

If person is of African descent, first of this century

## REGISTRAR'S REPORT

22-2-4-A

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

2 Color of eyes? brown Color of hair? brown 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 as follows:

Nobody dependent

J. W. Hamilton  
(Signature of registrar)

Brooklyn  
Precinct

Hampton,  
City or County

Minn  
State

June 5-1917  
(Date of registration)