

Form 1

## 115 REGISTRATION CARD

No. 44

1 Name in full Frank Bebeau Age, in yrs. 22  
(Given name) (Family name)

2 Home address R.D. #1 Aurora Miss.  
(No.) (Street) (City) (State)

3 Date of birth Jan 9 1895  
(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? Dayton Miss.  
(Town) (State) (Nation)

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

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

8 By whom employed? Peter Bebeau, father  
 Where employed? Dayton

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)? No dependence

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

11 What military service have you had? Rank None; branch \_\_\_\_\_; years \_\_\_\_\_; Nation or State Mo.

12 Do you claim exemption from draft (specify grounds)? No.

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

Frank Bebeau  
 (Signature or mark)

If person is of African descent, tear off this corner

22-2-4.A

## REGISTRAR'S REPORT

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

2 Color of eyes? Blue Color of hair? Dark brown Bald? No

3 Has person lost arm, leg, hand, foot, or both eyes, or is he otherwise disabled (specify)? \_\_\_\_\_

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:

Precinct Dayton 3rd  
 City or County Hamilton  
 State Miss.

Alvin McNeil  
 (Signature of registrar)

June 5th 1917  
 (Date of registration)