

Form 1

REGISTRATION CARD

No. 160

1 Name in full William Carl Hanson Age in yrs. 23
(Given name) (Family name)

2 Home address Copperhill Tenn
(No.) (Street) (City) (State)

3 Date of birth March 26 1894
(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)? Nat Born

5 Where were you born? Sweet Gum Ga Mo
(Town) (State) (Nation)

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

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

8 By whom employed? Tenn Copper Co
Where employed? Copperhill Tenn

9 Have you a father, mother, wife, child under 12, or mother and brother under 12, solely dependent on you for support (specify which)? Wife + 3 children

10 Married or single (which)? Married 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)? Stomach trouble & weak lungs

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

William Carl Hanson
(Signature or mark)

If person is of
Alleged descent,
fill out this
card

41-1-31A

REGISTRAR'S REPORT

1 Tell, in full, or short (specify which)? Short State when and with whom Slender

2 Color of eyes? Blue color of hair? Black or 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:

M M Mattick
(Signature of Registrar)

Precinct Copperhill
City or County Dalb
State Tenn

June 5 1917
(Date of registration)

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