

Registration No. **141**

Serial No. **506**

1 Name in full **Frank L. Henke** (Family name) Age, in yrs. **21**

2 Home address **1905 Hebert St. Louis Mo** (City or town) (State)

3 Date of birth **July 28 1896** (Month) (Day) (Year)

4 Where were you born? **St. Louis Mo. U.S.A.** (City or town) (State) (Nation)

5 I am 1. A native of the United States.
 2. A naturalized citizen.
 3. An alien.
 4. I have declared my intention.
 5. A member of a race prohibited.
 (Strike out lines or words not applicable)

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

7 Father's birthplace **Bremen Germany** (City or town) (State or province) (Nation)

8 Name of employer **Lister Sash Wright Co**
 Place of employment **2041 Burlington Dr. St. Louis Mo** (City or town) (State)

9 Name of nearest relative **Carrie Henke mother**
 Address of nearest relative **1424 Anselm St. St. Louis Mo** (City or town) (State or Nation)

10 Race—White, Negro, Indian, or Oriental
 (Strike out words not applicable)

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

Frank Henke
 (Signature or Mark of Registrant.)

P. M. G. O.
 Form 1 (blue)

REGISTRATION CARD. 3-2729

If person is of African descent, tear off this corner.

REGISTRAR'S REPORT **24-1-5 B**

1 Tall Medium Short
 (Strike out words not applicable)

2 Color of eyes **Blue** Color of hair **Brown**

3 Has person lost arm, leg, hand, eye, or is he palpably physically disqualified (specify)? **none**

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:

V. Schroeder
 (Signature of Registrar.)

June 5, 1918
 (Date of Registration.)

Local Board for Division No. 2
 St. Louis, Mo.
 (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.

9-1729