

# REGISTRATION CARD

SERIAL NUMBER	1000	ORDER NUMBER	457
1 <i>Curtis Thornton</i>			
2 PERMANENT HOME ADDRESS 12 <i>Madison Jeff. Ind.</i>			
Age in Years	Date of Birth		
3 37	4 <i>Sep. 28 1880</i>		
RACE			
White	Negro	Oriental	Indian
5 <input checked="" type="checkbox"/>	6	7	8
U. S. CITIZEN		ALIEN	
Native Born	Naturalized	Citizen by Father's Naturalization Before Registrant's Majority	Declarant
10 <input checked="" type="checkbox"/>	11	12	13
15 If not a citizen of the U. S., of what nation are you a citizen or subject?		EMPLOYER'S NAME	
16 <i>Farming</i>		17 <i>Joseph Thornton</i>	
18 PLACE OF EMPLOYMENT OR BUSINESS 12 <i>Madison Jeff. Ind.</i>			
NEAREST RELATIVE	Name		
19	<i>Alta Thornton</i>		
Address	20 <i>12 Madison Jeff. Ind.</i>		
I AFFIRM THAT I HAVE VERIFIED ABOVE ANSWERS AND THAT THEY ARE TRUE			
P. M. G. O. <i>Curtis Thornton</i>			
Form No. 1 (Rev. 1911) (Registrant's signature or mark) (OVER)			

# 13-3-21 REGISTRAR'S REPORT

DESCRIPTION OF REGISTRANT							
HEIGHT			BUILD			COLOR OF EYES	COLOR OF HAIR
Tall	Medium	Short	Slender	Medium	Stout		
21	22	23 <input checked="" type="checkbox"/>	24 <input checked="" type="checkbox"/>	25	26	27 <i>Blue</i>	28 <i>Brown</i>
29 Has person lost arm, leg, hand, eye, or is he obviously physically unskilled? (Specify.)							
30 I certify that my answers are true; that the person registered has read or 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:							
<p><i>Lucius J. Lee</i></p> <p>Date of Registration <i>Sept. 12, 1912</i></p>							
<p>Local Board for the County of Jefferson, State of Indiana, (St. Madison Ind.)</p> <p>(The stamp of the Local Board having jurisdiction of the area in which the registrant has his permanent home shall be placed in this space.)</p>							
03-671 (OVER)							

# REGISTRATION CARD—(Men born on or after April 28, 1877 and on or before February 16, 1897)

SERIAL NUMBER	1. NAME (Print)	ORDER NUMBER
U 713	Curtis Thornton	
	(First) (Middle) (Last)	

2. PLACE OF RESIDENCE (Print)			
Madison R. 2. Milton T.	Jeff	Ind	
(Number and street)	(Town, township, village, or city)	(County)	(State)

[THE PLACE OF RESIDENCE GIVEN ON THE LINE ABOVE WILL DETERMINE LOCAL BOARD JURISDICTION; LINE 2 OF REGISTRATION CERTIFICATE WILL BE IDENTICAL]

3. MAILING ADDRESS

Same

[Mailing address if other than place indicated on line 2. If same insert word same]

4. TELEPHONE

None

5. AGE IN YEARS

61

6. PLACE OF BIRTH

Jeff.

DATE OF BIRTH

Sept. 28. 1880

(Town or county)

(State or country)

7. NAME AND ADDRESS OF PERSON WHO WILL ALWAYS KNOW YOUR ADDRESS

My wife Alta Thornton same address

8. EMPLOYER'S NAME AND ADDRESS

Farmer

9. PLACE OF EMPLOYMENT OR BUSINESS

Same as address

(Number and street or R. F. D. number)

(Town)

(County)

(State)

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

D. S. S. Form 1  
(Revised 4-1-42)

(over)

16-21630-2

Curtis Thornton

(Registrant's signature)