

REGISTRATION CARD

SERIAL NUMBER **2275** ORDER NUMBER **A 987**

1 **Roscoe Christopher Dengate**

2 FARMER (PROF. OCC.)
Rt. 2, Box 41, Lyndon, Grant County, Kans.

Age in Years **36** Date of Birth **April - 28 - 1877**

RACE

White	Negro	Oriental	Indian	Caucasian
5 <input checked="" type="checkbox"/>	6	7	8	9

U. S. CITIZEN

Native Born	Naturalized	Citizen by Father's Naturalization Before Registrar's Registry	Declarant	Non-declarant
10 <input checked="" type="checkbox"/>	11	12	13	14

15 If not a citizen of the U. S., of what nation or was a citizen or subject?

16 PRESENT OCCUPATION **Farming** EMPLOYER'S NAME **Self**

18 PLACE OF EMPLOYMENT OF BUSINESS: **Lyndon, Kans.**

19 NEAREST RELATIVE: Name **Gertrude Dengate**
 Address **Rt. 2, Box 41, Lyndon, Grant County, Kans.**

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

P. M. G. O. **Roscoe Dengate**

Form No. 1 (11-17-17)

REGISTRAR'S REPORT

15-2-32-C

DESCRIPTION OF REGISTRANT

HEIGHT			BUILD			COLOR OF EYES		COLOR OF HAIR	
Tall	Medium	Short	Slender	Medium	Stout	21	22	23	24
	21 <input checked="" type="checkbox"/>	22		23 <input checked="" type="checkbox"/>	24	25 <input checked="" type="checkbox"/>	26	27 <input checked="" type="checkbox"/>	28 <input checked="" type="checkbox"/>

27 Has person lost arms, leg, hand, eye, or is he absolutely physically disqualified? (Specify.)

28 I certify that my answers are true; that the person registered has read or has 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:

J. R. Stewart
(Signature of Registrar)

Date of Registration, **Sept. 12 - 1910**

LOCAL BOARD,
LINCOLN COUNTY, KANSAS.

(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.)