

**REGISTRATION CARD**

SERIAL NUMBER **5388** OFFICE NUMBER **9512**

1 **Robert James Deagate**

2 **697 Broadway Bedford Cuy**

Age in Years **20** Date of Birth **Apr 8 1898**

**RACE**

White  Negro  Oriental  Indian  Hawaiian

**U. S. CITIZEN**

Native Born  Naturalized  Alien

13 **Machinist** EMPLOYER'S NAME **W. C. Myers Intergate Co.**

14 **Bedford Cuy**

Mother's Name **Elmer Augusta Deagate**  
 Address **697 Broadway Bedford Cuy**

I AFFIRM THAT I HAVE VERIFIED ABOVE ANSWERS AND THAT THEY ARE TRUE  
 P. M. C. O. **Robert James Deagate**

FORM No. 1 (1918) **8 X**

**REGISTRAR'S REPORT**

**DESCRIPTION OF REGISTRANT**

HEIGHT			BUILD			COLOR OF EYES		COLOR OF HAIR	
21	22	23	24	25	26	27	28	29	30
Medium	Short	Slender	Medium	Slend		Blue		Light	
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>

31 Has person lost arm, leg, hand, eye, or ear? Or obviously physically disabled? (Specify)

**No**

32 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 those, and that all of his answers of which I have knowledge are true, except as follows:

**W. H. Sullivan**  
 Date of Registration **Sept. 12 1918**

**Local Board No. 2, for County of Cuyahoga, State of Ohio**

Office  
 Town Hall, Cleveland Heights, Ohio  
 Mayfield Rd. near Superior Rd.

(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.)

(OVER)