

# REGISTRATION CARD

SERIAL NUMBER	602	ORDER NUMBER	a966
1	Lloyd Ephraim Aylor <small>(First name) (Middle name) (Last name)</small>		
2	PERMANENT HOME ADDRESS: Florence Boone Ky <small>(No.) (Street or R. F. D. No.) (City or town) (County) (State)</small>		
3	Age in Years 34	Date of Birth September 18 1884 <small>(Month) (Day) (Year)</small>	
RACE			
White		Negro	Oriental
Indian		Citizen	
Non-citizen			
5	6	7	8
U. S. CITIZEN			ALIEN
Native Born		Naturalized	Citizen by Treaty's Naturalization Before Registrant's Majority
Declarant		Non-declarant	
10	11	12	13
14			
15 If not a citizen of the U. S., of what nation are you a citizen or subject?			
PRESENT OCCUPATION		EMPLOYER'S NAME	
16 Farmer		17 myself	
18 PLACE OF EMPLOYMENT OR BUSINESS:			
<small>(No.) (Street or R. F. D. No.) (City or town) (County) (State)</small>			
NEAREST RELATIVE	Name	19 Emma Frances Aylor	
	Address	20 Florence Boone Ky <small>(No.) (Street or R. F. D. No.) (City or town) (County) (State)</small>	
I AFFIRM THAT I HAVE VERIFIED ABOVE ANSWERS AND THAT THEY ARE TRUE			
P. M. G. O. FORM NO. 1 (Rev)		Lloyd Ephraim Aylor <small>(Registrant's signature or mark)</small>	
		(OVER)	

## REGISTRAR'S REPORT

### DESCRIPTION OF REGISTRANT

HEIGHT			BUILD			COLOR OF EYES	COLOR OF HAIR
Tall	Medium	Short	Slender	Medium	stout		
21	22 ✓	23	24	25 ✓	26	27 Blue	28 Brown

29 Has person lost arm, leg, hand, eye, or is he obviously physically disqualified? (Specify.)  
No

16-3-4 Boone "C"

30 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:

A. M. Yenke  
(Signature of Registrar)

Date of Registration: Sept 12 - 1911.

Local Board for the County of Boone,  
State of Ky., Burlington, Ky.

(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)