

REGISTRATION CARD

SERIAL NUMBER *2983* ORDER NUMBER *290*
1 *WALTER CLYDE McCLURKIN*
(First name) (Middle name) (Last name)

2 PERMANENT HOME ADDRESS:
2328 Maple Ave. N.E. Pittsburgh Allegheny PA
(No.) (Street or R. F. D. No.) (City or town) (County) (State)

Age in Years *36* Date of Birth *February 14 1882*
(Month) (Day) (Year)

RACE

White	Negro	Oriental	Indian
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

U. S. CITIZEN

Native Born	Naturalized	Citizen by Father's Naturalization Before Registrant's Majority	Declarant	Non-declarant
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

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

16 PRESENT OCCUPATION *Minister of Religion Presbyterian Church*
 EMPLOYER'S NAME *Supply List - Board of Religion Presbyterian Church*

17 PLACE OF EMPLOYMENT OR BUSINESS:
Pittsburgh Presbytery Pittsburgh Allegheny PA
(No.) (Street or R. F. D. No.) (City or town) (County) (State)

NEAREST RELATIVE *Wife* Name *Mrs. Marna Gail McClurkin*
 Address *2328 Maple Ave. N.E. Pittsburgh Allegheny PA*
(No.) (Street or R. F. D. No.) (City or town) (County) (State)

I AFFIRM THAT I HAVE VERIFIED ABOVE ANSWERS AND THAT THEY ARE TRUE
 P. M. G. O. *Walter C. McClurkin*
 Form No. 1 (Rev. 1-17) (Registrant's signature or mark) (OVER)

REGISTRAR'S REPORT

DESCRIPTION OF REGISTRANT

HEIGHT			BUILD			COLOR OF EYES	COLOR OF HAIR
Tall	Medium	Short	Slender	Medium	Stout		
<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<i>Brown</i>	<i>Brown</i>

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

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:

Emily H. Goetz
 Date of Registration *Sept 12, 1917*

LOCAL BOARD for DIVISION #1
 SECOND FLOOR
 NORTH SIDE CITY HALL
 FEDERAL and OHIO STS.
 PITTSBURGH, PA.

(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.)

43-6171

(OVER)