

1 Name in full *Albert Victor Underwood* Age, in yrs. *27*
(Given name) (Family name)

2 Home address *54 W Bridge St Oswego NY*
(No.) (Street) (City) (State)

3 Date of birth *Sept 12 1889*
(Month) (Day) (Year)

4 Are you (1) a natural-born citizen, (2) a naturalized citizen, (3) an alien, (4) or have you declared your intention (specify which)? *natural born*

5 Where were you born? *Buffalo NY U.S*
(Town) (State) (Nation)

6 If not a citizen, of what country are you a citizen or subject?

7 What is your present trade, occupation, or office? *County Agricultural Agent*

8 By whom employed? *U.S. Dept of Agriculture, State Dept of Agriculture*
 Where employed? *Oswego County*

9 Have you a father, mother, wife, child under 12, or a sister or brother under 12, solely dependent on you for support (specify which)? *wife*

10 Married or single (which)? *married* Race (specify which)? *white*

11 What military service have you had? Rank *none*; branch _____; years _____; Nation or State _____

12 Do you claim exemption from draft (specify grounds)? *Through Central Fram Bureau office Ithaca NY*

I affirm that I have verified above answers and that they are true.

Albert Victor Underwood

(Signature or mark)

31-3-17-A

REGISTRAR'S REPORT

1	Tall, medium, or short (specify which)? <u>medium</u>	Slender, medium, or stout (which)? <u>slender</u>	
2	Color of eyes? <u>blue</u>	Color of hair? <u>brown</u>	Bald? <u>no</u>
3	Has person lost arm, leg, hand, foot, or both eyes, or is he otherwise disabled (specify)? <u>none</u>		

I certify that my answers are true, that the person registered has read his own answers, that I have witnessed his signature, and that all of his answers of which I have knowledge are true, except as follows:

John M. Clancy
(Signature of registrar)

Precinct 1st.

City or County Orwego

State New York

June 5
(Date of registration)