## Beecher Finley Seegraves Draft Registration Card

Form Approved Budget Bureau No. 33-R012-42							
REGISTRATION CARD (Men born on or after July 1, 1924, and on or before December 31, 1924)							
(Also for the registration of men as they reach the 18th anniversary of the date of their birth on or after January 1, 1943.)							
SERIAL NUMBER 1. NAME (Print) O d ORDER NUMBER							
w 1/0 Beecher Timber Seegraves 1/263							
2. PLACE OF RESIDENCE (Print)							
1- Stavense Coot Chumberland Jenn (Number and street) (Town, toynship, village, or city) (County) (State)							
[THE PLACE OF RESIDENCE GIVEN/ON LINE 2 ABOVE WILL DETERMINE LOCAL BOARD JURISDICTION; LINE 2 OF REGISTRATION CERTIFICATE WILL BE IDENTICAL]							
3. Mailing/Address							
Same							
(Mailing address if other than place indicated on line 2. If same, insert word same)							
4. TELEPHONE 5. AGE IN YEARS 6. PLACE OF BIRTH PLEASANT THE							
DATE OF BIRTH (Town or county).  (Exchange) (Number) (Mo.) (Day) (Yr.) (State or country)							
7. NAME AND ADDRESS OF PERSON WHO WILL ALWAYS KNOW YOUR ADDRESS							
Ims annie Sugraves (Mother) Pol Pavenscrof							
8. EMPLOYER'S NAME AND ADDRESS LON Lather							
9. Place of Employment of Business  Sawen seral Tenn							
(Number and street or R. F. D. number) (Town) (County) (State)							
I Affirm That I Have Verified Above Answers and That They Are True.							
DSS Form 1 (Rev. 11-16-42) c16-21630-4 (OVER) (Registrant's signature)							

### REGISTRAR'S REPORT

# DESCRIPTION OF REGISTRANT

RACE		HEIGHT (Approx.)		WEIGHT (Approx.)		COMPLEXION		
White	X	5-18 11		128		Sallow	X	
Negro		EYES		HAIR		Light		
Trogra		Blue	7	Blonde		Ruddy		
Indian		Gray	GERRIN	Red		Dark		
	The state of	Hazel		Brown	X	Freckled		
Filipino	-	Brown	X	Black		Light brown		
Japanese		Black		Gray		Dark brown		
Other				Bald		Black		
Oriental								
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:								
Registrar for Local Board (Signature of registrar)  (Number) (City or county) (State)  Date of registration 3 43  Cumberland County 035								
,						001		
New Mitchell Bldg.								

(The stamp of the Local Board having jurisdiction of the registrant shall be placed in the above space)

#### From the collection of:

#### The 45th Infantry Division in World War II: An Unofficial Guide to Resources

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Constructed by Leonard H. Cizewski February 2, 2023