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Type of Data: WWII Draft Registration

Photo No.: 2007-

Source of Data: Ancestry.com

REGISTRATION CARD—(Men born on or after April 28, 1877 and on or before February 16, 1897)

SERIAL NUMBER U. 1-33	1. NAME (Print) LEONARD MCKELVEY (First) (Middle) (Last)	ORDER NUMBER
2. PLACE OF RESIDENCE (Print) 42 Clark Ave Ark (Number and street) (Town, township, village or city) (County) (State)		
[THE PLACE OF RESIDENCE GIVEN ON THE LINE ABOVE WILL DETERMINE LOCAL BOARD JURISDICTION; LINE 2 OF REGISTRATION CERTIFICATE WILL BE IDENTICAL]		
3. MAILING ADDRESS Paragould Ark 72450 (Mailing address if other than place indicated on line 2. If none insert word none)		
4. TELEPHONE	5. AGE IN YEARS 47	6. PLACE OF BIRTH Ark
DATE OF BIRTH Mar 1 1895 (Month) (Day) (Year) (State or country)		
7. NAME AND ADDRESS OF PERSON WHO WILL ALWAYS KNOW YOUR ADDRESS Mr. M. B. McKelvey		
8. EMPLOYER'S NAME AND ADDRESS Paragould		
9. PLACE OF EMPLOYMENT OR BUSINESS Paragould Ark (Number and street or R. F. D. number) (Town) (County) (State)		
I AFFIRM THAT I HAVE VERIFIED ABOVE ANSWERS AND THAT THEY ARE TRUE.		
D. S. S. Form 1 (Revised 4-1-42) (over) 16-21630-2 M. B. McKelvey (Registrar's signature)		

REGISTRAR'S REPORT

DESCRIPTION OF REGISTRANT

RACE	HEIGHT (Approx.)	WEIGHT (Approx.)	COMPLEXION
White <input checked="" type="checkbox"/>	5-6	130	Sallow <input type="checkbox"/> Light <input type="checkbox"/> Ruddy <input type="checkbox"/> Dark <input type="checkbox"/> Freckled <input type="checkbox"/> Light brown <input type="checkbox"/> Dark brown <input type="checkbox"/> Black <input type="checkbox"/>
EYES	HAIR		
Blue <input checked="" type="checkbox"/> Gray <input type="checkbox"/> Hazel <input type="checkbox"/> Brown <input type="checkbox"/> Black <input type="checkbox"/>	Blonde <input type="checkbox"/> Red <input type="checkbox"/> Brown <input checked="" type="checkbox"/> Black <input type="checkbox"/> Gray <input type="checkbox"/> Bald <input type="checkbox"/>		
Negro <input type="checkbox"/>			
Oriental <input type="checkbox"/>			
Indian <input type="checkbox"/>			
Filipino <input type="checkbox"/>			

Other obvious physical characteristics that will aid in identification.....

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:

Signature of registrar: [Signature]

Registrar for Local Board: [Signature] (Number) (City or county) (State)

Date of registration: Apr 27 - 44

**GREENE COUNTY LOCAL BOARD
PARAGOULD, ARKANSAS**
(STAMP OF LOCAL BOARD)

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

16-21630-4