

REGISTRATION CARD

SERIAL NUMBER S 109	1. NAME (Print) JAMES VERNON WHITMER <small>(First) (Middle) (Last)</small>	ORDER NUMBER S 2856
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2. PLACE OF RESIDENCE (Print)
(Number and street) (Town, township, village, or city) (County) (State)
West Falls Church Fairfax VA.
 [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
[Mailing address if other than place indicated on line 2. If same insert word same]
West Falls Church VA.

4. TELEPHONE —	5. AGE IN YEARS 21 DATE OF BIRTH <small>(Mo.) (Day) (Yr.)</small> Dec. 2 1919	6. PLACE OF BIRTH BROADWAY <small>(Town or county)</small> VIRGINIA <small>(State or country)</small>	7. OCCUPATION CARPENTER
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8. NAME AND ADDRESS OF PERSON WHO WILL ALWAYS KNOW YOUR ADDRESS
Maggie Lee Whitmer, W. Falls Church, VA.

9. EMPLOYER'S NAME AND ADDRESS
Burd Case, W. Falls Church, Virginia

10. PLACE OF EMPLOYMENT OR BUSINESS
(Number and street or R. F. D. number) (Town) (County) (State)
Falls Church Fairfax VA.

I AFFIRM THAT I HAVE VERIFIED ABOVE ANSWERS AND THAT THEY ARE TRUE.

D. S. S. Form 1 (Revised 6-9-41) (over) 16-21630 **James Vernon Whitmer** (Registrant's signature)