

# World War I Draft Registration Card C—(12 September 1918)

REGISTRATION CARD				
SERIAL NUMBER	<b>3471</b>	ORDER NUMBER	<i>A557</i>	
1	<i>John</i>	<i>Albert</i>	<i>Erickson</i>	
	<small>First name</small>	<small>Middle name</small>	<small>Family name</small>	
2	PERMANENT HOME ADDRESS			
	<i>4</i>	<i>Sioux Falls Minn. SD</i>		
	<small>(No.)</small>	<small>(Street or R.F.D. number)</small>	<small>(City or town)</small>	<small>(County)</small> <small>(State)</small>
Age by Years	Date of Birth			
3 <i>44</i>	4 <i>August</i>	<i>9</i>	<i>1874</i>	
	<small>(Month)</small>	<small>(Day)</small>	<small>(Year)</small>	
<b>RACE</b>				
White	Negro	Oriental	Indian	
			Citizen	Non-Citizen
5 <i>X</i>	6	7	8	9
<b>U.S. CITIZEN</b>			<b>ALIEN</b>	
Native Born	Naturalized	Citizen by Father's Naturalization before Registrant's Majority	Declarant	Non-declarant
10	11 <i>X</i>	12	13	14
15	If not a citizen of the U.S., of what nation are you a citizen or subject? _____			
<b>PRESENT OCCUPATION</b>		<b>EMPLOYER'S NAME</b>		
16 <i>Farmer</i>	17			
18	PLACE OF EMPLOYMENT OR BUSINESS			
	<i>4</i>	<i>Sioux Falls Minn. SD</i>		
	<small>(No.)</small>	<small>(Street or R.F.D. number)</small>	<small>(City or town)</small>	<small>(County)</small> <small>(State)</small>
NEAREST RELATIVE	Name	19 <i>Mrs. J.A. Erickson</i>		
	Address	20 <i>4 Sioux Falls Minn. SD</i>		
	<small>(No.)</small>	<small>(Street or R.F.D. number)</small>	<small>(City or town)</small>	<small>(County)</small> <small>(State)</small>
I AFFIRM THAT I HAVE VERIFIED ABOVE ANSWERS AND THAT THEY ARE TRUE.				
P.M.G.O. Form No. 1	<i>John Albert Erickson</i>			
	<small>(Registrant's signature or mark)</small>			

REGISTRAR'S REPORT							
DESCRIPTION OF REGISTRANT							
HEIGHT			BUILD			COLOR OF EYES	COLOR OF HAIR
Tall	Medium	Short	Slender	Medium	Stout		
21 <i>X</i>	22	23	24	25	26 <i>X</i>	27 <i>Grey</i>	28 <i>dark brown</i>
29	Has person lost arm, leg, hand, eye, or is he obviously physically disqualified? (SPECIFY.)						
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:						
Minnehaha, 40-1-50 C							
						<i>Charles Renner</i>	
						<small>Signature of Registrar</small>	
Date of Registration		<i>Sept. 12, 1918</i>					
(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)							
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