

SERIAL NUMBER 34	1. NAME (Print) Arthur Dennis Silveira (First) (Middle) (Last)	ORDER NUMBER 452
2. ADDRESS (Print) West Main Road Portsmouth Newport, Rhode Island (Number and street or R. F. D. number) (Town) (County) (State)		
3. TELEPHONE Portsmouth 380 (Exchange) (Number)	4. AGE IN YEARS 31	5. PLACE OF BIRTH Middletown (Town or county)
6. COUNTRY OF CITIZENSHIP United States		
7. NAME OF PERSON WHO WILL ALWAYS KNOW YOUR ADDRESS Mrs. Elizabeth M. Silveira (Mr., Mrs., Miss) (First) (Middle) (Last)		8. RELATIONSHIP OF THAT PERSON Wife
9. ADDRESS OF THAT PERSON West Main Road Portsmouth Newport R.I. (Number and street or R. F. D. number) (Town) (County) (State)		
10. EMPLOYER'S NAME Self		
11. PLACE OF EMPLOYMENT OR BUSINESS West Main Road Portsmouth Newport, R.I. (Number and street or R. F. D. number) (Town) (County) (State)		

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

REGISTRATION CARD
D. S. S. Form 1

(over)

Arthur D. Silveira

(Registrant's signature)