

9161

SERIAL NUMBER 3293	1. NAME (Print) William Rosa Cummins <small>(First) (Middle) (Last)</small>	ORDER NUMBER 3161
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2. ADDRESS (Print)
821-18th Ave. Kaimuki Honolulu T. H.
(Number and street or R. F. D. number) (Town) (County) (State)

3. TELEPHONE 77071 <small>(Exchange) (Number)</small>	4. AGE IN YEARS 21	5. PLACE OF BIRTH Honolulu <small>(Town or county)</small>	6. COUNTRY OF CITIZENSHIP U. S. A.
DATE OF BIRTH June 29 1919 <small>(Mo.) (Day) (Yr.)</small>		Oahu, T. H. <small>(State or country)</small>	

7. NAME OF PERSON WHO WILL ALWAYS KNOW YOUR ADDRESS
Mrs. Margaret A. Cummins
(Mr., Mrs., Miss) (First) (Middle) (Last)

8. RELATIONSHIP OF THAT PERSON
mother

9. ADDRESS OF THAT PERSON
821-18th Ave. Kaimuki Honolulu T. H.
(Number and street or R. F. D. number) (Town) (County) (State)

10. EMPLOYER'S NAME
Hawaiian Pineapple Co., Ltd.

11. PLACE OF EMPLOYMENT OR BUSINESS
Iwilei Road Honolulu T. H.
(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)

William Rosa Cummins
(Registrant's signature)