

957

SERIAL NUMBER 3253	1. NAME (Print) John Campbell McCarriston <small>(First) (Middle) (Last)</small>	ORDER NUMBER 957
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2. ADDRESS (Print)
919 B-9th Avenue Honolulu Honolulu T. Hawaii
(Number and street or R. F. D. number) (Town) (County) (State)

3. TELEPHONE 76808 <small>(Exchange) (Number)</small>	4. AGE IN YEARS 24 <small>DATE OF BIRTH (Mo.) (Day) (Yr.)</small>	5. PLACE OF BIRTH Molokai, Maui <small>(Town or county)</small>	6. COUNTRY OF CITIZENSHIP U. S. A.
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7. NAME OF PERSON WHO WILL ALWAYS KNOW YOUR ADDRESS Mrs. Grace Sosnowski McCarriston <small>(Mr., Mrs., Miss) (First) (Middle) (Last)</small>	8. RELATIONSHIP OF THAT PERSON Wife
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9. ADDRESS OF THAT PERSON
919-B-9th Avenue Honolulu Honolulu T. Hawaii
(Number and street or R. F. D. number) (Town) (County) (State)

10. EMPLOYER'S NAME
American Can Company

11. PLACE OF EMPLOYMENT OR BUSINESS
American Can Company Honolulu Honolulu T. Hawaii
(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)

John Campbell McCarriston
(Registrant's signature)