

REGISTRATION CARD

SERIAL NUMBER **688** ORDER NUMBER **A1241**

1 **Richard Milton Flynt**
(First Name) (Middle Name) (Last Name)

2 PERMANENT HOME ADDRESS: **801 1/2 E 2nd Little Rock Pulaski Ark**
(No.) (Street or R. F. D. No.) (City or town) (County) (State)

Age in Years **37** Date of Birth **September 21st 1880**
(Month) (Day) (Year)

RACE

White	Negro	Oriental	Indian
3 ☒	6	7	8

U. S. CITIZEN ALIEN

Native Born	Naturalized	Citizen by Father's Naturalization Before Registrant's Majority	Declarant	Non-declarant
10 ☒	11	12	13	14

15 If not a citizen of the U. S., of what nation are you a citizen or subject?

PRESENT OCCUPATION EMPLOYER'S NAME
 16 **Farmer** 17

18 PLACE OF EMPLOYMENT OR BUSINESS:
 (No.) (Street or R. F. D. No.) (City or town) (County) (State)

NEAREST RELATIVE
 Name **Mrs Mildred Flynt (Mother)**
 Address **RFD no 1 Lonoke Lonoke Ark.**
 (No.) (Street or R. F. D. No.) (City or town) (County) (State)

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

P. M. G. O. ☒ (Registant's signature or mark) (OVER)

Richard Milton Flynt

C3-1-31 REGISTRAR'S REPORT

DESCRIPTION OF REGISTRANT

HEIGHT			BUILD			COLOR OF EYES	COLOR OF HAIR
Tall	Medium	Short	Slender	Medium	Stout		
21 ☒	22	23	24 ☒	25	26	27 Blue	28 Black

29 Has person lost arm, leg, hand, eye, or is he obviously physically disqualified? (Specify.)

No

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:

E. E. Sibley
 Signature of Registrar
 Date of Registration **Sept 12th 1918**

Local Board for Division No. 1,
 City of Little Rock, Arkansas
 Ground Floor, New County Court
 House. (STAMP OF BOARD)

(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.)