

QUESTIONNAIRE.

(Stamp of Local Board.)	Registration No.	Name of Registrant:		Telephone No.
	Serial No.	(First name.)	(Middle name.)	(Last name.)
	Order No.	Address:		
		(No.)	(Street or R. F. D. No.)	
		(City or town.)	(County.)	(State.)

NOTICE TO REGISTRANT.—You are required by law to return this Questionnaire filled out in accordance with instructions contained herein within seven days from date of this notice. Failure to do so is a misdemeanor punishable by fine or imprisonment for one year and may result in the loss of valuable rights and in immediate induction into military service.

(Date.)

Member of Local Board.

CLAIM FOR EXEMPTION OR DEFERRED CLASSIFICATION.

NOTE TO CLAIMANTS.—This form is to be used for claiming exemption or deferred classification by or in respect of any registrant and for stating the grounds of claim. Place a cross (x) in Column A opposite the division that states the ground of claim. Boards are required to consider only grounds thus indicated by the claimant in Column A.

Column A.	Division.	CLASS I.	Column A.	Division.	CLASS III—Continued.
.....	A	Single man without dependent relatives.	.....	F	Necessary customhouse clerk.
.....	B	Married man, with or without children, or father of motherless children, who has habitually failed to support his family.	.....	G	Necessary employee of United States in transmission of the mails.
.....	C	Married man dependent on wife for support.	.....	H	Necessary artificer or workman in United States armory or arsenal.
.....	D	Married man, with or without children, or father of motherless children; man not usefully engaged, family supported by income independent of his labor.	.....	I	Necessary employee in service of United States.
.....	E	Unskilled or not a necessary farm laborer.	.....	J	Necessary assistant, associate, or hired manager of necessary agricultural enterprise.
.....	F	Unskilled or not a necessary industrial laborer.	.....	K	Necessary highly specialized technical or mechanical expert of necessary industrial enterprise.
.....	G	Registrant by or in respect of whom no deferred classification is claimed.	.....	L	Necessary assistant or associate manager of necessary industrial enterprise.
.....	H	Registrant who fails to submit Questionnaire and in respect of whom no deferred classification is claimed.	CLASS IV.		
.....	I	Registrant not deferred and not included in any of above divisions.	.....	A	Man whose wife or children are mainly dependent on his labor for support.
.....	X		.....	B	Mariner actually employed in sea service of citizen or merchant in the United States.
DEFERRED CLASSES.			.....	C	Necessary sole managing, controlling, or directing head of necessary agricultural enterprise.
CLASS II.			.....	D	Necessary sole managing, controlling, or directing head of necessary industrial enterprise.
.....	A	Married man with children, or father of motherless children, where such wife or children or such motherless children are not mainly dependent upon his labor for support for reason that there are other reasonably certain sources of adequate support (excluding earnings or possible earnings from labor of wife) available, and that the removal of registrant will not deprive such dependents of support.	CLASS V.		
.....	B	Married man, without children, whose wife, although registrant is engaged in a useful occupation, is not mainly dependent upon his labor for support, for the reason that the wife is skilled in some special class of work which she is physically able to perform and in which she is employed, or in which there is an immediate opening for her under conditions that will enable her to support herself decently and without suffering or hardship.	.....	A	Officer—legislative, executive, or judicial of the United States or of State, Territory, or District of Columbia.
.....	C	Necessary skilled farm laborer in necessary agricultural enterprise.	.....	B	Regularly or duly ordained minister of religion.
.....	D	Necessary skilled industrial laborer in necessary industrial enterprise.	.....	C	Student who on May 18, 1917, or on May 20, 1918, or since May 20, 1918, was preparing for ministry in recognized theological or divinity school, or who on May 20, 1918, or since May 21, 1918, was preparing for practice of medicine and surgery in recognized medical school.
.....	X		.....	D	Person in military or naval service of United States.
CLASS III.			.....	E	Alien enemy.
.....	A	Man with dependent children (not his own), but toward whom he stands in relation of parent.	.....	F	Resident alien (not an enemy) who claims exemption.
.....	B	Man with dependent aged or infirm parents.	.....	G	Person totally and permanently physically or mentally unfit for military service.
.....	C	Man with dependent helpless brothers or sisters.	.....	H	Person morally unfit to be a soldier of the United States.
.....	D	County or municipal officer.	.....	I	Licensed pilot actually employed in the pursuit of his vocation.
.....	E	Highly trained fireman or policeman in service of municipality.	.....	J	Person discharged from the Army on the ground of alienage or upon diplomatic request.
.....			.....	K	Subject or citizen of cobelligerent country who has enlisted or enrolled in the forces of such country under the terms of a treaty between such country and the United States providing for reciprocal military service of their respective citizens and subjects.
.....			.....	L	Subject or citizen of neutral country who has declared his intention to become a citizen of the United States and has withdrawn such intention under the provisions of act of Congress approved July 9, 1918, and Selective Service Regulations.

..... Member of well-recognized religious sect or organization, organized and existing on May 18, 1917, whose then existing creed or principles forbid its members to participate in war in any form and whose religious convictions are against war or participation therein.

REGISTRANT OR OTHER INTERESTED PERSON MUST ANSWER THE FOLLOWING QUESTION.

Q. Do you claim exemption or deferred classification in respect of the registrant named above? If so, state the divisions of each class and each class in which you claim that he should be classified.

A.; in Division of Class, and Division of Class, and Division of Class (Date)

(Yes or no.)

(Address)

(Sign here)

WAIVER OF CLAIM FOR EXEMPTION OR DEFERRED CLASSIFICATION.

(To be signed by registrant or other interested person whenever a waiver is used.)

I hereby waive all claim of exemption or deferred classification of the registrant named above.

(Date of signing)

(Sign here)

IMPORTANT NOTICE TO REGISTRANTS AND OTHER INTERESTED PERSONS.

TO BE READ BEFORE PROCEEDING FURTHER.

Every registrant shall immediately upon receipt of a Questionnaire proceed as follows: He shall first carefully read, or have read to him, the instructions printed on this page, and the instructions printed with each series of questions. He shall then take up each series of questions, and answer all questions which he is required to answer and sign his name where required by the instructions. He shall make no mark nor answer upon page No. 1 until he has answered the 12 series of questions; but after having done so and before he executes his affidavit on page No. 15, he shall answer the question near the bottom of page No. 1 and sign his name thereto. If he wishes to waive all claim of exemption or deferred classification, he shall sign the waiver at the bottom of page No. 1. He shall then upon the first page place a cross mark (X) in the space opposite the division which describes his ground or basis for deferred classification. The registrant is not limited to making one cross mark (X), but may make a sufficient number of marks to indicate his status in relation to every ground for discharge or exemption which exists in his case. He shall then swear or affirm to the truth of his answers by executing the "Registrant's Affidavit" on page 15.

A registrant making any claim which must be supported by an affidavit must procure the execution of the supporting affidavit by the person or persons indicated in the instructions relating to the particular series which states the claim. Unless he procures such affidavit, the claim will not be considered either by the Local Board or by the District Board.

Additional affidavits may be filed with the Questionnaire when deemed necessary by the registrant or person making claim in his behalf. (Sec. 95 (f) S. S. R.)

The Questionnaire, answered and sworn to in strict accordance with these instructions, must be filed with the Local Board on or before the seventh day (excluding Sundays and legal holidays) after the date appearing upon the first page of the Questionnaire under the words "Notice to Registrant."

Note.—The initials S. S. R. refer to the regulations prescribed by the President and known as the Selective Service Regulations.

Reasons for and Effect of Classification.

The names of all men liable to selection for military service shall be arranged in five classes in the order in which they can best be spared from the civic, family, industrial, and agricultural institutions of the Nation. The term "deferred classification" includes the second, third, fourth, and fifth classes of the five classes in which registrants shall be placed. All registrants placed in Class V have been exempted or discharged, and all registrants placed in Classes II, III, and IV have been temporarily discharged. The effect of classification in Class I is to render every man so classified presently liable to military service in the order determined by the national drawings. The effect of classification in Class II is to grant a temporary discharge from draft, effective until Class I is exhausted; and similarly Classes III and IV become liable only when Classes II and III, respectively, are exhausted. All classifications are conditioned upon the continuing existence of the status of the registrant which is the basis of his classification. (See Secs. 1 (j) and (k) and 70 S. S. R.)

Every registrant shall, within five days after the happening thereof, report to his Local Board any fact which may change or affect his classification. Failure to report change of status as herein required or making a false report thereof is a misdemeanor, punishable by one year's imprisonment. (Sec. 116 S. S. R.)

Notice to Registrants and to all Interested Persons, and Effect of such Notice.

(a) The process of examination and selection shall begin by the posting of notice in the offices of the Local Boards and by mailing a Questionnaire to every registrant included in such posted notice (Sec. 92 S. S. R.), and notice of every subsequent action taken by either the Local or District Board in respect of each registrant shall be given by entering a minute or date of such action on the Classification List in the office of the Local Board and in addition to such entries by mailing to the registrant (and in some cases to other claimants) a notice of such action.

(b) Whenever a duty is to be performed or a period of time begins to run within which any duty is to be performed by any such registrant, or within which any right or privilege may be claimed or exercised by or in respect of any such registrant, a notice of the day upon which such duty is to be performed or such time begins to run shall be mailed to the registrant, and the date of such mailing of notice shall be entered opposite the name of such registrant on the Classification List, which is always open to inspection by the public at the office of the Local Board.

(c) In addition to the mailing of such notice to registrants, notice of the disposition of claims of other persons in respect of registrants shall be mailed to such other persons. Either the mailing of such notice or the entry of such date in the Classification List shall constitute the giving of notice to the registrant and to all concerned, and shall charge the registrant and all concerned with notice of the day upon which such duty is to be performed or the beginning of the time within which such duty must be performed or such right or privilege may be claimed, regardless of whether or not a mailed notice or Questionnaire is actually received by the registrant or other person.

(d) Failure by any registrant to perform any duty prescribed by the President under the authority of the act approved May 18, 1917, or subsequent act or acts of Congress at or within the time required, is a misdemeanor punishable by imprisonment for one year, and may result in loss of valuable rights and immediate induction of such registrant into military service.

(e) Failure of the registrant or any other person concerned to claim and exercise any right or privilege on the day or within the time allowed shall be considered a waiver of such right or privilege, subject only to the privilege to apply for an extension of time.

(f) All registrants and other persons are required to examine from time to time said notice so posted by the Local Board and the Classification List upon which said dates are to be entered; and it is the duty of every registrant concerning whom any notice is posted, but who has not received the Questionnaire or notice, as the case may be, to apply to his Local Board for a copy thereof. Failure to receive notice or Questionnaire will not excuse the registrant from performing any duty within the time limit, nor shall it be in itself ground for extension of time. (Sec. 7, S. S. R.)

(g) Any registrant, except an alien enemy, who fails to return the Questionnaire on the date required shall be deemed to have waived all claim for deferred classification, and shall stand classified in Class I subject, however, to the rights and privileges of other persons to apply to the Local Board for deferred classification of the registrant, and to the right of the registrant or any other person to apply for an extension of time, as provided in Section 99 S. S. R. (Sec. 129, S. S. R.)

By Whom Oaths May Be Administered.

Any oath required by these Rules and Regulations (except oaths to persons called before Local or District Boards to give oral testimony) may be administered—

- (1) By any Federal or State officer authorized by law to administer oaths generally;
- (2) By any member or chief clerk of any Local or District Board having jurisdiction of the registrant;
- (3) By any Government Appeal Agent in regard to any case pending before any Local or District Board with which he is connected;
- (4) By any person designated to act in the capacity of legal aid or advisor to registrants; and
- (5) By any postmaster within the same local jurisdiction as the registrant.

When the oath or oaths are administered by any of the persons named in Classes 2, 3, 4, and 5 hereof, there shall be no fee or charge for the same. (Sec. 10, S. S. R.)

Aid and Advice to Registrants by Legal Advisory Boards.

Legal Advisory Boards, composed of disinterested lawyers and laymen, will be present at all times during which Local Boards are open for the transaction of business, either at the headquarters of Local Boards or at some other convenient place, for the purpose of advising registrants of the true meaning and intent of the Selective Service Law and Regulations and of assisting registrants to make full and truthful answers to the Questionnaire.

Members of Legal Advisory Boards shall enter upon the left-hand margin of front page of Questionnaire the following: "Aid given by me," and sign the name of the member of such board, stating whether "permanent" or "associate" member. (Sec. 45, S. S. R.)

QUESTIONS:

SERIES I. GENERAL QUESTIONS:

INSTRUCTIONS. Every registrant must answer ALL the following questions, and sign his name at the bottom.

Q. 1. State (a) your full name, birthplace, and your present age and residence; and (b) the name, address, and relationship of your nearest relative (wife may be designated as nearest relative).

A. 1. (a)
(Name of registrant.) (Age.) (Place of birth.) (Post-office address.)
 (b)
(Name of relative.) (Address of relative.) (Relationship.)

Q. 2. What is your race? Are you white, Negro, or Oriental? A. 2.

Q. 3. State (a) whether you are single, married, widowed or divorced and (b) date of marriage.

A. 3. (a); (b)

Q. 4. If you have a child or children, state the name, age and present residence of each child. A. 4.

LOOK AT KEY LIST OF OCCUPATIONS WITH QUESTIONNAIRE BEFORE ANSWERING NEXT QUESTION.

Q. 5.	Occupation.	Special work or job.	Key number and letter on list.	Number of years pursued.	Monthly salary or wages.
(a) What is your present occupation?.....
(b) What other work are you qualified to do?.....

Q. 6. If you are employed, state (a) the name of your employer and (b) the place at which you are employed.

A. 6. (a)
(Name of employer.)
 (b)
(No. (Street or R. F. D. No.) (City or town.) (County.) (State.)

Q. 7. Mention any previous military experience you have had, giving organization, rank, and length of service.

A. 7.

Q. 8. Underline branch of Army in which you prefer to serve if selected: Artillery—Aviation—Engineer Corps—Infantry—Medical Department—Ordnance Department—Quartermaster Corps—Signal Corps.

Q. 9. Schooling: Grade reached in school Years in high school Years in college

Name of college and subjects of specialization

Years in technical school Name of school and course pursued

Underline the languages you speak well: English—French—German.

State any other languages you speak

Q. 10. Have you ever been convicted of a crime? A. 10.
(Yes or no.)

Q. 11. If your preceding answer is "yes," state (a) the name of the crime; (b) the approximate date of conviction; (c) the name and location of the court; (d) sentence imposed. A. 11. (a)

(b) (c) (d)

Q. 12. Are you now confined in prison, either (a) serving sentence or (b) awaiting trial, or (c) are you confined in a reformatory or correctional institution? A. 12.

(Yes or no, and state which.)

Q. 13. Are you at large on bail under any criminal process? If so, state full details. A. 13.

.....
(Signature of registrant.)

IMPORTANT NOTE.—If the registrant is an inmate of an institution mentioned in question 12 and is unable to answer the foregoing questions, the executive head of the institution is requested to communicate the information immediately to the Local Board.

SERIES II. PHYSICAL FITNESS.

INSTRUCTIONS.—Every registrant must answer the first two questions. If he answers the second question "yes," he need not answer the remaining questions. If he answers the second question "no," he must answer ALL the questions. He must sign his name at the end of this series of questions.

Q. 1. State your height and weight stripped. A. 1. Height, _____; Weight, _____
(Inches.) (Pounds.)

Q. 2. Are you in sound health mentally and physically? A. 2. _____
(Yes or no.)

Q. 3. Draw a line under any of the words below that describes any ailment or physical deficiency you may have.

A. 3. 1. Blind.	4. Loss of limb.	7. Insane.
2. Deaf.	5. Epileptic.	8. Withered or deformed limb.
3. Dumb.	6. Paralytic.	9. _____

Q. 4. State in detail the names and addresses of the physicians by whom and the institutions in which you are being treated or have been treated within the last twelve months, with the dates of the treatments.

A. 4. _____

Q. 5. Are you an inmate of an asylum, hospital, or other institution on account of any physical, mental, or nervous disease, disorder, or injury? A. 5. _____
(Yes or no.)

Q. 6. If you answer "yes," state (a) the nature of the ailment, and (b) name and location of institution.

A. 6. (a) _____ (b) _____

(Signature of registrant.)

IMPORTANT NOTE.—If the registrant is an inmate of an institution mentioned in question 6 and is unable to answer the foregoing questions, the executive head of the institution is requested to communicate the information immediately to the Local Board.

SERIES III. LEGISLATIVE, EXECUTIVE, AND JUDICIAL OFFICERS.

INSTRUCTIONS.—Every registrant must answer the first question. If he answers "no," he need not answer the remaining questions or sign his name. If he answers "yes," he must answer ALL the questions and sign his name.

Q. 1. Are you a legislative, executive, or judicial officer of the United States or of a State or Territory or of the District of Columbia? A. 1. _____
(Yes or no.)

If your answer is "no," do not answer any other questions and do not sign your name.

Q. 2. State exact designation of your office. A. 2. _____

Q. 3. State (a) when you entered upon the duties of said office and (b) when your term of office will expire.
A. 3. (a) _____; (b) _____

NOTE.—See Sec. 79, S. S. R. and Part XIII.

(Signature of registrant.)

SERIES IV. MINISTERS OF RELIGION.

INSTRUCTIONS.—Every registrant must answer the first question. If he answers "no," he need not answer the remaining questions nor sign his name. If he answers "yes," he must answer ALL the questions, and must sign his name.

Q. 1. Are you a regular or a duly ordained minister of religion; and if so, of what sect or organization?

A. 1. _____
(Yes or no, and if "yes" add name of sect.)

If your answer is "no," do not answer any other questions and do not sign your name.

Q. 2. State (a) the manner by which, (b) the date when, and (c) the place where you became such minister.

A. 2. (a) _____ (b) _____ (c) _____

Q. 3. State place and nature of your religious labors: (a) On January 1, 1918; (b) Now.

A. 3. (a) _____ (b) _____

Q. 4. Have you any additional occupation? If so, what? A. 4. _____

NOTE.—See sec. 79, S. S. R.

(Signature of registrant.)

SERIES V. DIVINITY AND MEDICAL STUDENTS.

INSTRUCTIONS.—Every registrant must answer the first three questions. If he answers "no" to all of these questions, he need not answer the remaining questions nor sign his name. If he answers "yes" to question No. 1, No. 2, or No. 3, he must answer all the remaining questions and sign his name, and must also secure the following supporting affidavit of the president, dean, or other executive head of the theological, divinity, or medical school. If such executive head be not available, the executive nearest in rank may make the affidavit, but must state therein why the superior officer is not available.

Q. 1. Were you on May 18, 1917, a student preparing for the ministry in a recognized theological or divinity school? A. 1. _____
(Yes or no.)

Q. 2. Were you on May 20, 1918, a student preparing for the ministry in a recognized theological or divinity school, or were you on May 20, 1918, a student preparing for the practice of medicine and surgery in a recognized medical school? A. 2. _____
(Yes or no, and state which.)

Q. 3. Have you been at any time since May 20, 1918, a student preparing for the ministry in a recognized theological or divinity school, or a student preparing for the practice of medicine and surgery in a recognized medical school? A. 3. _____
(Yes or no, and state which.)

If your answer to all the questions No. 1, No. 2, and No. 3 is "no," do not answer any other questions and do not sign your name.

- Q. 4. If your answer to question No. 3 is "yes," state the period (naming the dates) during which you were such a student? A. 4. _____
- Q. 5. State whether the school in which you were a student on the date or dates indicated by your answer to question No. 1, No. 2, or No. 3 was a recognized theological or divinity or medical school. A. 5. _____
(Specify which.)
- Q. 6. State the name and location of such school in which you were a student on the date or dates you have thus indicated. A. 6. _____
- Q. 7. Is the school you have described wholly or partially a correspondence school? A. 7. _____
- Q. 8. Have you ceased to be a student preparing for the ministry or a student preparing for the practice of medicine and surgery; and if so, what is your present occupation? A. 8. _____

NOTE.—See Sec. 79, S. S. R., and Public Resolution approved May 20, 1918.

SUPPORTING AFFIDAVIT.

(Signature of registrant.)

STATE OF _____, County of _____, ss:

I, _____, do solemnly swear—affirm—that I was on the date or
(Name of affiant.) (Strike out one.)
 dates mentioned in the foregoing answers _____ of the school mentioned
(Designation of affiant's office in school.)
 in the foregoing answer No. 6; that such school was on said date a recognized _____
(Divinity, theological, medical.)
 school; and that I know of my own personal knowledge that the answers to the foregoing questions Nos. 1 to
 7, inclusive, are true. I further state that _____ who was _____
(Unavailable superior officer.) (Designation of superior officer.)
 of said school on the date or dates mentioned in the foregoing answers is now _____
(State reason why superior officer is not available, if that be the fact.)

Subscribed and sworn to before me this _____
 day of _____, 191_____

(Signature of supporting affiant.)

(Address.)

(Signature of officer.)

(Designation of officer.)

SERIES VI. MILITARY OR NAVAL SERVICE.

INSTRUCTIONS.—Every registrant must answer the first question. If he answers "no," he need not answer the other questions nor sign his name. If he answers "yes," he must answer ALL the other questions FULLY and must sign his name.

- Q. 1. Are you in any branch of the military or naval service of the United States? A. 1. _____
(Yes or no.)
- If your answer is "no," do not answer any other questions and do not sign your name.
- Q. 2. Give your (c) rank, (b) organization or corps, (c) branch of the service, and (d) mail address.
A. 2. (a) _____ (b) _____ (c) _____ (d) _____
- Q. 3. State the (a) date, (b) place, and (c) manner in which you entered the service. A. 3. (a) _____
_____ (b) _____ (c) _____

NOTE.—See Sec. 79, S. S. R.

(Signature of registrant.)

SERIES VII. CITIZENSHIP.

INSTRUCTIONS.—Every registrant must answer all the following questions, except as stated in the interlined instructions, or unless his status makes an answer to any question impossible, and must sign his name at the end of this series of questions.

- Q. 1. Are you a citizen of the United States? A. 1. _____
(Yes or no.)
 - Q. 2. Where and on what date were you born? A. 2. _____
(Place and country.) (Date.)
 - Q. 3. If you were not born in the United States, state (a) at what place; and (b) on what date you arrived in this country, and (c) whether you came with your father or mother or either of them.
A. 3. (a) _____; (b) _____; (c) _____
 - Q. 4. If you are a citizen of the United States, naturalized upon application by you, state when and where you were so naturalized. A. 4. _____
 - Q. 5. If you are not a citizen of the United States, either native born or fully naturalized, answer the following:
(a) Of what country are you a citizen or subject? (b) In what place and country did you ordinarily reside before proceeding to the United States? (c) Have you ever taken out first papers (that is, declared your intention to become a citizen of the United States)? (d) If so, when and where did you take out your first papers?
A. 5. (a) _____; (b) _____
(c) _____; (d) _____
(Yes or no.)
 - Q. 6. If you are not a citizen of the United States and have not declared your intention to become a citizen, do you claim exemption from service in the Army of the United States on that ground? A. 6. _____
(Yes or no.)
- If you are an Indian, born in the United States, do not answer questions Nos. 7 to 13, but answer questions Nos. 14 to 16.

- Q. 7. If you are not a citizen of the United States and have not declared your intention to become a citizen, are you willing to return to your native country and enter its military service? A. 7. _____
(Yes or no.)
- Q. 8. Give the birthplace and present residence of both of your parents. A. 8. _____
- Q. 9. If your parents or either of them live in the United States, state how long each has resided in this country. A. 9. _____
- Q. 10. If either of your parents has been naturalized in the United States, state (a) which parent; (b) when and where naturalized. A. 10. (a) _____; (b) _____
- Q. 11. Have you ever voted or registered for voting anywhere in the United States; if so, when and where? A. 11. _____

Questions Nos. 12 and 13 are to be answered only by a citizen or subject of a country neutral in the present war who has declared his intention to become a citizen of the United States.

- Q. 12. If you are a citizen or subject of a country neutral in the present war and have declared your intention to become a citizen of the United States, name the neutral country of which you are a citizen or subject. A. 12. _____

NOTE.—Congress has enacted a law providing that a citizen or subject of a country neutral in the present war, who has declared his intention to become a citizen of the United States, shall be relieved from liability to military service upon his making a declaration, in accordance with such regulations as the President may prescribe, withdrawing his intention to become a citizen of the United States, which shall operate and be held to cancel his declaration of intention to become an American citizen and shall forever debar him from becoming a citizen of the United States.

- Q. 13. Do you wish to be relieved from liability to military service by withdrawing your intention to become a citizen of the United States upon the conditions named in the foregoing note to Question No. 12? A. 13. _____
(Yes or no.)

NOTE.—If you answer "yes," your Local Board will send you the necessary blank forms and directions for making such claim for relief from liability to military service and renouncing your right to become a citizen of the United States. Before your claim can be passed upon, you must fill in and return such forms to your Local Board. (See sec. 117, S. S. R.)

If you are an Indian born in the United States and claim you are not a citizen, answer the following questions:

- Q. 14. State (a) when you were allotted; (b) when your father was allotted; (c) when your mother was allotted. A. 14. (a) _____; (b) _____; (c) _____
- Q. 15. Have you received a patent in fee to your land? A. 15. _____
- Q. 16. State (a) whether you live separate and apart from any tribe; (b) if so, when you intend to return to tribal life; and (c) how long you have lived away from tribal life. A. 16. (a) _____
(b) _____; (c) _____

NOTE.—See sec. 79 S. S. R.

(Signature of registrant.)

SERIES VIII, PART A. COUNTY AND MUNICIPAL OFFICIALS AND FEDERAL EMPLOYEES.

INSTRUCTIONS.—Every registrant must answer the first question. If he answers "no," he need not answer the remaining questions nor sign his name. If he answers "yes," he must answer ALL the questions and sign his name. If he claims deferred classification on the ground that he is employed by the United States as a customhouse clerk, or in any of the capacities mentioned in question 1, he must also secure and file with the Local Board an affidavit of the official having direct supervision and control of the branch of the Government service in which the registrant is engaged, stating that he is necessary to the adequate and effective operation of such service, and can not be replaced by another person without substantial, material loss and detriment to the adequate and effective operation thereof. In the case of a registrant in departmental service stationed outside of the District of Columbia, the affidavit must be made by the official having direct supervision of the applicant. In all cases such affidavit must be indorsed "approved" by the Secretary of the Department or other certifying official specified in Part XIV, S. S. R. The affidavit to be filed by a necessary agricultural expert, employed by a State Agricultural College receiving Federal funds, is described in Section 77, Note 1, S. S. R.

- Q. 1. Are you a county or municipal official, or a customhouse clerk, or are you employed by the United States in the transmission of the mails, or are you an artificer or workman employed in an armory or arsenal of the United States, or are you an employee of the United States designated by the President as eligible for discharge? A. 1. _____
(Yes or no, and state which.)

If you are not in any of the above classes, do not answer any other questions and do not sign your name.

- Q. 2. State the designation of your office, position, or occupation. A. 2. _____
- Q. 3. If you are a county or municipal official, were you elected by popular vote or appointed? State which. A. 3. _____
- Q. 4. If you are a county or municipal official, state (a) whether a vacancy in the office which you hold can be filled by appointment and (b) when your term of office expires. A. 4. (a) _____ (b) _____
(Yes or no.)
- Q. 5. State the exact place of the performance of your duties. A. 5. _____
- Q. 6. State how long you have held such office or position, or how long you have been so employed. A. 6. _____
- Q. 7. State the character and duration of your education, training, and experience for your office, position, or employment. A. 7. _____
- Q. 8. Describe the nature of your work. A. 8. _____

NOTE.—See Sec. 77, and Part XIV, S. S. R.

(Signature of registrant.)

SERIES VIII, PART B. PILOTS AND MARINERS.

INSTRUCTIONS.—Every registrant must answer the first question. If he answers "no," he need not answer the remaining questions nor sign his name. If he answers "yes," he must answer ALL the questions and sign his name. If he claims deferred classification as a licensed pilot, he must secure and file with the Local Board an affidavit signed by the Collector or Deputy Collector of the port from which the registrant regularly sails, stating that he is a licensed pilot regularly employed in the pursuit of his vocation. If he claims deferred classification as a mariner, he must submit evidence in support of his claim sufficient to satisfy the Local Board that he is entitled to such classification.

- Q. 1. Are you a licensed pilot actually employed in the pursuit of your vocation, or are you a mariner actually employed in the sea service (including service on the Great Lakes) of a citizen or merchant within the United States? A. 1. _____

(Yes or no, and state which.)

If your answer to question 1 is "no," do not answer any other questions and do not sign your name.

- Q. 2. State your training and experience as a pilot or mariner (as the case may be) and how long you have been so engaged. A. 2. _____
- Q. 3. If you are engaged in any other occupation, describe it, and state what part of your working time you give to such other occupation. A. 3. _____
- Q. 4. If you are a pilot, state (a) how long you have been licensed and (b) from what port you regularly sail. A. 4. (a) _____ (b) _____
- Q. 5. If you are a mariner actually employed in the sea service (including service on the Great Lakes), state (a) the name and address of your employer, (b) how long you have worked as a mariner for such employer and (c) describe your particular work. A. 5. (a) _____ (b) _____ (c) _____

NOTE.—See Secs. 78 and 79 S. S. E.

(Signature of registrant.)

SERIES VIII, PART C. FIREMEN AND POLICEMEN.

INSTRUCTIONS.—Every registrant must answer the first question. If he answers "no," he need not answer the remaining questions nor sign his name. If he answers "yes," he must answer ALL the questions and sign his name. If he claims deferred classification as a highly trained fireman or policeman, he must secure and file with the Local Board an affidavit signed by the official head of the Department of the Municipality by which he is employed, stating that the registrant is highly trained, the length of time he has been continuously employed and compensated by the Municipality he is now serving, and that he can not be replaced without substantial and material detriment to the public safety in the Municipality in which he is serving.

- Q. 1. Are you a highly trained fireman or policeman? A. 1. _____

(Yes or no, and state which.)

If your answer to question 1 is "no," do not answer any other questions and do not sign your name.

- Q. 2. Give the name of the Municipality which you are now serving. A. 2. _____
- Q. 3. How long have you been continuously employed and compensated by the said Municipality as a fireman or policeman, as the case may be? A. 3. _____
- Q. 4. What position do you hold or what special duties do you perform in your department? A. 4. _____
- Q. 5. If you claim you can not be replaced without substantial and material detriment to the public safety in the Municipality in which you are serving, state the reason for your claim. A. 5. _____

NOTE.—See Sec. 77 (e) S. S. R.

(Signature of registrant.)

SERIES IX. RELIGIOUS CONVICTION AGAINST WAR.

INSTRUCTIONS.—Every registrant must answer the first question. If he answers "no," he need not answer the other questions nor sign his name. If he answers "yes," he must answer ALL the questions and sign his name.

- Q. 1. Are you a member of a well-recognized religious sect or organization organized and existing May 18, 1917, whose then existing creed or principles forbid its members to participate in war in any form? If so, state the name of the sect or organization and the location of its governing body or head. A. 1. _____

If your answer is "no," do not answer any other questions and do not sign your name.

- Q. 2. By reason of your membership in such sect or organization, do you claim exemption from military service, except in some capacity declared by the President to be noncombatant? A. 2. _____
- Q. 3. State number of adherents of such religious sect or organization in the United States. A. 3. _____
- Q. 4. When did said religious sect or organization adopt opposition to war as a part of its creed or principles? A. 4. _____
- Q. 5. When, where, and how did you become a member of such religious sect or organization? A. 5. _____
- Q. 6. Are your religious convictions against war or participation therein in accordance with the creed or principles of such religious sect or organization? A. 6. _____
- Q. 7. Give the name, location, and date of organization of the particular local church or congregation of which you are a member. A. 7. _____

NOTE.—See Secs. 79 and 280, S. S. E.

(Signature of registrant.)

SERIES X: DEPENDENCY

INSTRUCTIONS.—Every registrant must answer the first question. If he answers "no" and does not claim deferred classification on the ground of dependency or family, he need not answer the remaining questions or sign his name. If he answers "yes," or claims deferred classification on the ground of dependency or family, he must answer all the questions and sign his name. If he intends to claim deferred classification on the ground of dependency or family, or if he expects any person to claim deferred classification for him on such ground, he must secure the supporting affidavits annexed hereto of every person over 16 years of age named as dependents or members of his family. He or any other person may also (and if the Local Board requires it, he or they must) file with the Local Board additional affidavits, which must be legibly written or typewritten on one side of white paper of the approximate size and shape of this sheet.

Q. 1. Have you a wife, or child, or aged, infirm, or invalid parent or grandparent, or brother under 16 or sister under 18 years of age, or a helpless brother or sister of whatever age, mainly dependent on your physical or mental labor for support? A. 1. (Yes or no.)

If your answer is "no" and you do not claim deferred classification on account of dependency or family, do not answer any other question and do not sign your name.

Q. 2. State whether you are single, married, widowed, or divorced. A. 2. (Use one of the four terms in answering.)

Q. 3. If you are married, state (a) the place, (b) date, and (c) the person by whom the ceremony was performed. A. 3. (a) (b) (c)

Q. 4. Give the following information as to each person now mainly dependent upon your labor for support. A. 4.

Table with 6 columns: Name, Age, Relationship, Address, When your support began, Whether wholly dependent on your labor.

Q. 5. State (a) with which of your dependents you live and (b) how long you have lived with such dependent or dependents. A. 5. (a) (b)

Q. 6. If any persons named in your answers do not live with you, state which of them have lived with you at any time during the past 12 months and for how long a period. A. 6.

Q. 7. If any such dependent is a stepchild, an adopted child, or a foster child, state as to each when such relationship to you began. A. 7.

Q. 8. State both (a) the approximate total and (b) the average monthly amount of your support of your wife and children, exclusive of your own expenses, during the last 12 months. A. 8. (a) \$ (b) \$

Q. 9. How much have you contributed to the support of each other dependent during said 12 months? A. 9.

Q. 10. State amount per month you consider necessary for support of all your dependents. A. 10. \$

Q. 11. State (a) whether the amount you have contributed during the last 12 months to any dependent other than your wife and children includes any payment for board or lodging for yourself or others. (b) If you answer "yes," how much did you pay in this manner for board or lodging and for what persons? A. 11. (a) (b)

Q. 12. If any person on whose account you claim deferred classification (other than your wife or child) has a brother, sister, father, mother, husband, wife, or child, state as to each such relative of such person. A. 12.

Table with 6 columns: Name, Age, Address, Occupation, To which dependent related, Relationship to such dependent.

Q. 13. What was your total income from all sources during the last 12 months, whether (a) in cash or (b) in other thing of value? A. 13. (a) Cash \$ (b) Other thing of value \$

Q. 14. How much of this was the fruit of your labor, mental or physical? A. 14. \$

Q. 15. Give a full statement of all property owned by or held in trust for you, whether income-producing or not; and your net income from same during last 12 months. A. 15. Character of property: Real estate—Principal, \$; income, \$ Personal property—Principal, \$ income, \$

Q. 16. Do you own the house you live in? A. 16. (Yes or no.)

Q. 17. (a) Does any of your family or dependents own it? (b) If so, state owner's name. A. 17. (a) (b) (Yes or no.)

Q. 18. If any of the dependents owns the house he or she lives in, state name of owner. A. 18.

- Q. 19. Do you rent your house? If so, state the monthly rent and name and address of landlord.
 A. 19. _____
- Q. 20. Have you paid any taxes during the last year? If so, state separately the amount paid on real estate; on personal property; and income tax; and name the officer to whom paid.
 A. 20. Real estate, \$ _____; paid to _____ (Official designation.)
 Personal property, \$ _____; paid to _____ (Official designation.)
 Income tax, \$ _____; paid to _____ (Official designation.)
- Q. 21. If there is any encumbrance on any property you own, state its nature and amount. A. 21. _____
- Q. 22. State the value of all property owned by or held in trust for any person named as dependent, and his or her income therefrom.
 A. 22. _____ Principal, \$ _____ Income, \$ _____
 (Name of dependent.)
 _____ Principal, \$ _____ Income, \$ _____
 (Name of dependent.)
 _____ Principal, \$ _____ Income, \$ _____
 (Name of dependent.)
- Q. 23. If there is any encumbrance on any property owned by or held in trust for any person named as dependent, state its nature and amount. A. 23. _____
- Q. 24. State earnings of each named dependent during preceding 12 months.
 Name of dependent. Period employed. Earnings.
 A. 24. _____

- Q. 25. State amount of contributions to each dependent during said 12 months by person other than you, naming such dependents, contributors, and amounts. A. 25. _____
- Q. 26. Has your wife been employed during any portion of the past 12 months? If so, state period of employment, with dates, nature of her work, and amount of her earnings. A. 26. _____
- Q. 27. Has your wife ever been employed? If so, in what calling and when? A. 27. _____
- Q. 28. Is your wife trained or skilled in any calling? If so, in what? A. 28. _____
- Q. 29. State the condition of health of your wife. A. 29. _____
- Q. 30. Do you or your wife live with her parents? A. 30. _____
- Q. 31. Do you or your wife live with your parents? A. 31. _____
- Q. 32. State any other facts which you consider necessary to present fairly your claim for deferred classification on the ground of having dependents. A. 32. _____

NOTE.—See Sections 71 to 76, inclusive, S. S. R.

(Signature of registrant.)

SUPPORTING AFFIDAVITS.

STATE OF _____, County of _____, ss:

We, the undersigned, do solemnly swear—affirm, each for himself and herself individually, that we have read or had read to us the foregoing questions and answers under the heading “Dependency,” by _____, registrant; that we understand the same; that we are the persons named in said answers; and that the statements contained therein as to the name, age, residence, relationship, and dependency of each of us toward said registrant, and the statement of his contributions to the support of each of us, and the statements of the financial and material condition of each of us, and of the income of each of us from all sources, are true.

(Signature of affiant.)

(Signature of affiant.)

(Signature of affiant.)

(Signature of affiant.)

Subscribed and sworn to before me this _____ day of _____, 191____.

(Signature of officer.)

(Designation of officer.)

SERIES XI. INDUSTRIAL OCCUPATION.

INSTRUCTIONS.—Every registrant must answer the first question. If he answers "yes," he must answer all the remaining questions, except as stated in the underlined instructions, and must sign his name at the end. If the registrant claims deferred classification on account of engagement in industry, he must secure the two supporting affidavits annexed at the end of Series XII, in conformity with the following rules:

1. If the registrant is an employee, affidavit No. 1 must be made by his immediate superior and affidavit No. 2 by the executive head of the enterprise. If the business extends into more than one State, affidavit No. 2 may be made by the head of the division or plant in which the registrant is actually employed. If the registrant's superior is also executive head of the enterprise, affidavit No. 1 shall be made by such executive, and affidavit No. 2 need not be executed.

2. (a) If the registrant is part owner of the enterprise as a stockholder or partner, affidavit No. 1 must be made by a stockholder or copartner, and affidavit No. 2 by a near neighbor. (b) If he is the sole owner, both affidavits must be made by near neighbors.

ALL AFFIDAVITS AND OTHER PROOF in support of claims for deferred classification on industrial grounds **MUST BE FILED WITH THE LOCAL BOARD**, except such proof as the District Board may directly require, and all additional affidavits and other written proof must be legibly written or typewritten on one side only of white paper of the approximate size of this sheet.

Q. 1. Are you engaged in an industrial enterprise necessary (a) to the maintenance of the Military Establishment, or (b) to the effective operation of the military forces, or (c) to the maintenance of national interest during the emergency? A. 1. _____
(Yes or no.)

If your answer is "no," do not answer any other questions and do not sign your name.

Q. 2. Do you claim deferred classification on the ground that you are so engaged? A. 2. _____
(Yes or no.)

GROUP A.—DESCRIPTION OF THE ENTERPRISE.

Q. 3. State the name under which the enterprise is conducted, and its exact location (post-office address).
A. 3. _____

Q. 4. When was the enterprise established? A. 4. _____

Q. 5. What is produced or what service is performed by the enterprise? A. 5. _____

Q. 6. In what respect do you claim the enterprise is necessary (a) to the maintenance of the Military Establishment, or (b) to the effective operation of the military forces, or (c) to the maintenance of national interest during the emergency? A. 6. _____

Q. 7. State (a) whether the enterprise is now engaged as contractor or subcontractor on work for the United States or a cobelligerent. (b) If so engaged, state which Government and the nature and extent of such work. A. 7. (a) _____; (b) _____
(Yes or no.)

Q. 8. If so engaged as subcontractor, state name and address of principal contractor. A. 8. _____

GROUP B.—RELATION OF REGISTRANT TO THE ENTERPRISE.

Q. 9. Are you (a) an employee, (b) sole owner, (c) part owner, as a stockholder or as a partner? A. 9. _____

Q. 10. What part of your working time do you give to this enterprise? A. 10. _____

Q. 11. If engaged in other work or business, describe it. A. 11. _____

Q. 12. State your education, training, and experience for the work you are now doing. A. 12. _____

Q. 13. When did your connection with the enterprise you have described begin? A. 13. _____

Q. 14. Describe the specific work you perform. A. 14. _____

Q. 15. How long have you been engaged in this particular line of work? A. 15. _____

Q. 16. What pay do you receive by the day, week, or month? A. 16. _____

Q. 17. State (a) whether you have charge or supervision of other workers; (b) If so, how many?
A. 17. (a) _____ (b) _____
(Yes or no.)

- Q. 18. How many persons are employed in the entire plant or other division of the enterprise in which you work?
A. 18. _____
- Q. 19. How many other persons in such plant or division are engaged in the same kind of work you do?
A. 19. _____
- Q. 20. Are any of your relatives engaged in the enterprise as executives or owners (for example, as manager, superintendent, treasurer, director, partner, sole owner, or controlling stockholder)? A. 20. _____ (Yes or no.)
- Q. 21. If so, state the name, age, relationship to you, and relation to the enterprise of each of such persons.
A. 21. _____, _____, _____, _____
_____, _____, _____, _____
_____, _____, _____, _____
- Q. 22. State the reasons why you can not be easily replaced by another person. A. 22. _____

GROUP C.—TO BE ANSWERED ONLY BY A REGISTRANT WHO IS THE SOLE OWNER, A STOCKHOLDER, OR A PARTNER IN THE ABOVE-DESCRIBED ENTERPRISE.

- Q. 23. State whether the business is conducted as a corporation, joint-stock company, or partnership.
A. 23. _____
- Q. 24. When did you acquire your interest in the enterprise? A. 24. _____
- Q. 25. Did you originate or assist in originating the enterprise? A. 25. _____
- Q. 26. How many persons are employed in the business? A. 26. _____
- Q. 27. What is the total capital invested in it? A. 27. _____
- Q. 28. What is the amount of your present investment therein? A. 28. _____
- Q. 29. What were the net earnings of the business for the last 12 months? A. 29. _____
- Q. 30. Did you acquire your interest from a relative or relatives? A. 30. _____ (Yes or no.)
- Q. 31. If so, state the name, age, relationship to you, residence, and present occupation of each of such persons.
A. 31. _____, _____, _____, _____, _____
_____, _____, _____, _____, _____
_____, _____, _____, _____, _____
- Q. 32. State the name, age, residence, relationship to you, and occupation of each of your partners; or if not in partnership, give such information as to each of your relatives who is a stockholder.
A. 32. _____, _____, _____, _____, _____
_____, _____, _____, _____, _____
_____, _____, _____, _____, _____
- Q. 33. If you have any relatives not already mentioned, who have heretofore been engaged in this enterprise in any capacity, state the name, age, residence, relationship to you, and present occupation of each of such persons and the nature of the interest that they had in the business.
A. 33. _____, _____, _____, _____, _____
_____, _____, _____, _____, _____
_____, _____, _____, _____, _____
- Q. 34. If you claim that none of the relatives or other persons mentioned in your replies to the foregoing questions can take your place during your absence, state the reasons.
A. 34. _____
- Q. 35. State any other facts which you consider necessary to present fairly the industrial enterprise you have described, or your connection with it, as a ground for deferred classification.
A. 35. _____

(Signature of registrant.)

SERIES XII. AGRICULTURAL OCCUPATION:

INSTRUCTIONS.—Every registrant must answer the first question. If he answers "yes," he must answer ALL the remaining questions, except as stated in the interlined instructions, and must sign his name. If the registrant claims deferred classification on the ground of engagement in agriculture, he must secure the two affidavits at the end of this series of questions, of two persons, in conformity with the following rules:

1. If the registrant is an employee, affidavit No. 1 must be made by his employer and affidavit No. 2 by a near neighbor.
2. If the registrant is the sole owner of the land, both supporting affidavits shall be made by near neighbors.
3. If the registrant is the owner of the land with another, affidavit No. 1 shall be made by the co-owner and affidavit No. 2 shall be made by a near neighbor.
4. If the registrant is a tenant of the land or a tenant with another, affidavit No. 1 must be made by the owner of the land or the latter's agent, and affidavit No. 2 by a near neighbor.

ALL AFFIDAVITS AND OTHER PROOF in support of claims for deferred classification on agricultural grounds **MUST BE FILED WITH THE LOCAL BOARD**, except such proof as the District Board may directly require; and all additional affidavits and other written proof must be legibly written or typewritten on one side only of white paper of the approximate size of this sheet.

Q. 1. Are you engaged in an agricultural enterprise? A. 1. _____
(Yes or no.)

If your answer is "no," do not answer any other questions and do not sign your name.

Q. 2. Do you claim deferred classification on the ground that you are so engaged? A. 2. _____
(Yes or no.)

GROUP A—GENERAL INFORMATION AS TO REGISTRANT.

Q. 3. How long have you worked at farming and what special training have you had?
 A. 3. _____

Q. 4. State the nature of your present enterprise (such as general farming, fruit raising, cattle ranch).
 A. 4. _____

Q. 5. Are you the directing and managing head of this enterprise? A. 5. _____
(Yes or no.)

Q. 6. State whether you are a laborer, overseer, hired manager, share cropper, lessee, or owner of the farm, and if none of these terms indicate your connection with the farm, state what it is. A. 6. _____

Q. 7. (a) Do you live on the farm where you work? (b) If not, how far away? A. 7. (a) _____ (b) _____
(Yes or no.)

Q. 8. What part of your working time do you give to the farm? A. 8. _____

Q. 9. If engaged in other work or business, describe it. A. 9. _____

GROUP B—DESCRIPTION OF ENTERPRISE. (If you are a tenant, describe only the land you rent.)

Q. 10. State (a) the total area of farm; (b) acres under cultivation. A. 10. (a) _____; (b) _____

Q. 11. What is the character of the land not cultivated (such as pasture, timber, swamp)? A. 11. _____

Q. 12. What kind of crops are grown and what is the acreage of each?
 A. 12. _____

Q. 13. State (a) number and kind of live stock usually kept on the farm. (b) Who owns it?
 A. 13. (a) _____ (b) _____

Q. 14. State the amount of each crop and the total value of dairy products produced on the farm during the last 12 months. A. 14. _____

Q. 15. State gross receipts from all live stock actually sold off the farm during the last 12 months. A. 15. _____

Q. 16. State value of the buildings on the land. A. 16. _____

Q. 17. State the value of the farm, including all improvements. A. 17. _____

Q. 18. State (a) the value of all farming equipment (including live stock kept for work) used on the farm;
 (b) Who owns it? A. 18. (a) _____ (b) _____

Q. 19. (a) How many male persons work on the farm? (b) In what capacity do they work (such as laborer, manager, share cropper), and how many of each? A. 19. (a) _____; (b) _____

Q. 20. (a) Are any of these workers sons or sons-in-law of the head of the enterprise? (b) If so, how many and age of each. A. 20. (a) _____; (b) _____
(Yes or no.)

GROUP C—CONCERNING REGISTRANT'S FAMILY.

Q. 21. Give the following information as to each of your relatives residing on the farm where you work.

	Name.	Age.	Relationship.	Occupation.	Classification under S. S. R.
A. 21.	_____	_____	_____	_____	_____
	_____	_____	_____	_____	_____
	_____	_____	_____	_____	_____

Q. 22. If you have a father, brothers, sisters, half brothers, half sisters, or brothers-in-law not living with you on the farm where you work, state as to each:

	Name.	Age.	Married or single.	Relationship.	Occupation.	Whether owning or leasing a farm.	Living—miles from me.	Classification under S. S. R.
A. 22.	_____	_____	_____	_____	_____	_____	_____	_____
	_____	_____	_____	_____	_____	_____	_____	_____
	_____	_____	_____	_____	_____	_____	_____	_____

Q. 23. Why can not your father or one or more other relatives mentioned in your replies to questions Nos. 21 and 22 continue the enterprise successfully without you? A. 23. _____

Q. 24. If your father is in poor health, describe his condition and give name and address of his regular physician. A. 24. _____

NOTE.—If you claim that your father or other relative interested with you in the enterprise is incapacitated to manage the farm, attach to your questionnaire an affidavit of a reputable physician stating that he personally knows such relative's physical condition and what that condition is.

GROUP D—TO BE ANSWERED ONLY BY A REGISTRANT WHO IS A LABORER, OVERSEER, OR HIRED MANAGER.

Q. 25. State name, age, relationship to you, and occupation of your employer.

A. 25. _____

Q. 26. Is your employer the owner or tenant of the land? A. 26. _____

Q. 27. How long has he owned or leased it? A. 27. _____

Q. 28. (a) Does your employer live on the land? (b) If not, how far away? A. 28. (a) _____; (b) _____
(Yes or no.)

Q. 29. How long have you worked on the farm for your present employer? A. 29. _____

Q. 30. What pay do you receive in cash or in produce and do you receive board and lodging?

A. 30. _____

GROUP E—TO BE ANSWERED ONLY BY REGISTRANT WHO IS A LESSEE OR SHARE CROPPER.

- Q. 31. State the name, age, relationship to you and occupation of the owner.
A. 31. _____
- Q. 32. State (a) when you first rented this land and (b) when your lease or agreement will end?
A. 32. (a) _____ (b) _____
- Q. 33. What rent do you pay? A. 33. _____
- Q. 34. (a) Does the owner live on the land you rent? (b) If not, how far away? A. 34. (a) _____; (b) _____
(Yes or no.)
- Q. 35. If any other person or persons are interested in the renting of the land with you, state the name, age, relationship to you, residence, occupation, and extent of the interest of such person or persons.
A. 35. _____

- Q. 36. (a) Do you sublet any part of the land you rent. (b) If so, how much and to whom?
A. 36. (a) _____; (b) _____
(Yes or no.)

GROUP F—TO BE ANSWERED ONLY BY REGISTRANT WHO IS OWNER OR OWNER WITH ANOTHER.

- Q. 37. State when and from whom you acquired the land or interest therein. A. 37. _____
- Q. 38. Did you acquire it by deed, will, or inheritance? A. 38. _____
- Q. 39. If acquired from a living relative, state his name, age, relationship, residence, and occupation.
A. 39. _____
- Q. 40. (a) What was the purchase price? (b) How much have you paid on the purchase price?
A. 40. (a) _____ (b) _____
- Q. 41. If any part of the purchase price was furnished by a relative, state his name, relationship to you, and amount so furnished. A. 41. _____
- Q. 42. If you are not the sole owner, state your interest and the name, age, relationship to you, residence, occupation, and nature of the interest of each co-owner.
A. 42. _____

- Q. 43. State fully how you operate your farm (for example, personally, with your father or brother, by tenants, or by a hired manager). A. 43. _____
- Q. 44. State any other facts which you consider necessary to present fairly the agricultural enterprise you have described, or your connection with it, as a ground for deferred classification.
A. 44. _____

See Secs. 80-85, inclusive, S. S. R.

(Signature of registrant.)

AFFIDAVITS TO BE USED IN SUPPORT OF EITHER INDUSTRIAL OR AGRICULTURAL CLAIMS.

SUPPORTING AFFIDAVIT No. 1.

STATE OF _____, *County of* _____, ss:
 I, _____, do solemnly swear—affirm—that I reside _____
(Name of affiant.) (Strike out one.) (State distance.)
 from _____, the registrant herein named; that my occupation is _____;
(Name of registrant.)
 that I have read the foregoing questions Nos. _____ to _____, inclusive; that I occupy the following
 position in the enterprise mentioned in said answers, namely, _____
(Insert here either affiant's position in said enterprise or the word "none," as the case may be.)
 that I occupy the following relationship toward said registrant in said enterprise, namely, _____
(Here state in what respect affiant is registrant's superior, or the word "none," as the case may be.)
 that I know of my own knowledge that the answers to questions Nos. _____
(Insert here question numbers in figures.)
 are true; that I am reliably and fully informed and believe that the answers to questions Nos. _____
(Insert here question numbers in figures.)
 are true; and that my relationship by blood or marriage to said registrant is _____
(Insert here either relationship or "none," as the case may be.)

(Signature of affiant.)
 Subscribed and sworn to before me this _____ day of _____, 191 .

(Signature of officer.) (Designation of officer.)

SUPPORTING AFFIDAVIT No. 2.

STATE OF _____, *County of* _____, ss:
 I, _____, do solemnly swear—affirm—that I reside _____
(Name of affiant.) (Strike out one.) (State distance.)
 from _____, the registrant herein named; that my occupation is _____
(Name of registrant.)
 that I have read the foregoing questions Nos. _____ to _____, inclusive; that I occupy the following position
 in the enterprise mentioned in said answers, namely, _____
(Insert here either affiant's position in said enterprise, or the word "none," as the case may be.)
 that I occupy the following relationship toward said registrant in said enterprise, namely, _____
(Here state in what respect affiant is registrant's superior, or the word "none," as the case may be.)
 _____; that I know of my own knowledge that the
 answers to questions Nos. _____ are true; that I am reliably and fully
(Insert here question numbers in figures.)
 informed and believe that the answers to questions Nos. _____ are true;
(Insert here question numbers in figures.)
 and that my relationship by blood or marriage to said registrant is _____
(Insert here either relationship, or "none," as the case may be.)

(Signature of affiant.)
 Subscribed and sworn to before me this _____ day of _____, 191 .

(Signature of officer.) (Designation of officer.)

NOTE.—See Sections 10 and 95, S. S. R.

REGISTRANT'S AFFIDAVIT.

IMPORTANT INSTRUCTIONS.—1. If the registrant can not read, the questions and his answers must be read to him by the officer who administers the oath, and if the registrant can not write, his cross-mark signatures must all be witnessed by the same officer.

2. None of the printed matter of the affidavit may be added to, erased, or stricken out, except the word "swear" or "affirm" as the case may be.

OATH.

STATE OF _____, *County of* _____, ss:
 I, _____, do solemnly swear—affirm—that I am the
(Strike out one.)
 registrant named and described in the foregoing questions and answers; that I have signed my name to my
 answers, and that I know the contents of my said answers, and that all and singular the statements of fact
 in my said answers to said questions, respectively, are true, and that my beliefs and opinions therein stated
 are my true beliefs and opinions.

(Signature of registrant.)
 Subscribed and sworn to before me this _____ day of _____, 191 .

(Signature of officer.) (Designation of officer.)

NOTE.—See Sections 10 and 95 S. S. R.

