

1. NAME IN FULL Last First Middle BARR, William Pelham			SELECTIVE SERVICE NUMBER			
			50	15	50	189
2. PLACE OF RESIDENCE Street and Number or RFD Route 445 Riverside Dr. Apt. 101			3. DATE OF BIRTH May 23, 1950			
City, Town, or Village County State Zip Code New York, N.Y. 10027			4. PLACE OF BIRTH City State or Country New York, N.Y.			
5. MAILING ADDRESS (If different than Item 2) Street and Number or RFD Route Same as above			6. DATE OF REGISTRATION May 24, 1968			
City, Town, or Village County State Zip Code			7. Name and address of person other than a member of your household who will always know your address. Mrs. Estelle D. Barr (Grandmother) 345 E. 81st St. New York, N.Y.			
8. COLOR OF EYES Blue		9. COLOR OF HAIR Blonde		10. HEIGHT (APPROX.) 6 0 ft. in.		11. WEIGHT (APPROX.) 175
12. OTHER OBVIOUS PHYSICAL CHARACTERISTICS THAT WILL AID IN IDENTIFICATION: None						

Form Approved
Budget Bureau No. 33-R099.7

SELECTIVE SERVICE SYSTEM

REGISTRATION CARD