

# WORLD WAR I DRAFT REGISTRATION CARDS, 1917-1918

SOURCE INFORMATION: WWW.ANCESTRY.COM DATABASE: WORLD WAR I DRAFT REGISTRATION CARDS, 1917-1918 DETAIL: REGISTRATION  
 LOCATION: CLEVELAND COUNTY, NORTH CAROLINA; ROLL: 1765631; DRAFT BOARD: O.

COUNTY: CLEVELAND  
 STATE: NORTH CAROLINA  
 BIRTH DATE: 16 OCT 1899  
 RACE: WHITE  
 ROLL: 1765631  
 DRAFT BOARD: O

## SAMUEL COLEMAN DYE

**REGISTRATION CARD**

SERIAL NUMBER: 1310 ORDER NUMBER: 25-94

1 *Samuel Coleman Dye*

2 PERMANENT HOME ADDRESS: 2 *King Mountain Blvd and 2nd St.*

Age in Years: 18 Date of Birth: 16 1899

**RACE**

White  Negro  Oriental  Indian  Citizen  Non-Citizen

**U. S. CITIZEN**      **ALIEN**

Native Born  Naturalized  Citizen by Father's Naturalization  Declared  Non-declared

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

16 PRESENT OCCUPATION: *Student* EMPLOYER'S NAME: \_\_\_\_\_

18 PLACE OF EMPLOYMENT OR BUSINESS: \_\_\_\_\_

(No.) (Street or F. D. No.) (City or town) (County) (State)

NEAREST RELATIVE: Name: 19 *William Ware Dye*  
 Address: 20 *King Mountain Blvd and 2nd St.*

I AFFIRM THAT I HAVE VERIFIED ABOVE ANSWERS AND THAT THEY ARE TRUE  
 P. M. G. O. *Samuel Coleman Dye*  
 Form No. 1 (Rev.) 92-5111 (Registration or signature or mark) (OVER)

**REGISTRAR'S REPORT**

**DESCRIPTION OF REGISTRANT**

HEIGHT			BUILD			COLOR OF EYES	COLOR OF HAIR
Tall	Medium	Short	Slender	Medium	Stout		
21	22 <input checked="" type="checkbox"/>	23	24	25 <input checked="" type="checkbox"/>	26	27 <i>Blue</i>	28 <i>Light</i>

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. B. Heavensick*  
 Date of Registration: *September 12, 1918*

**32-1 -16**

Local Exemption Board for Cleveland County  
 Shelby, N. C.

(STAMP OF LOCAL 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.) 92-5111 (OVER)

PARENTS:  
 WILLIAM WARE DYE & MOLLIE OATES

