

Form 1  
ORDER  
NUMBER

13872

REGISTRATION CARD

No. 59

707

1 Name in full: John Joseph Barry (Given name) (Family name) Age, in yrs. 30

2 Home address: 1 View (No.) (Street) WORCESTER, MASS. (City) (State)

3 Date of birth: April 26 1887 (Month) (Day) (Year)

4 Are you (1) a natural-born citizen, (2) a naturalized citizen, (3) an alien, (4) or have you declared your intention (specify which)? Natural Born citizen

5 Where were you born? Meriden, Conn. (Town) (State) (Nation)

6 If not a citizen, of what country are you a citizen or subject?

7 What is your present trade, occupation, or office? Baseball Manager

8 By whom employed? Boston American Baseball Club

Where employed? Boston, Mass.

9 Have you a father, mother, wife, child under 12, or a sister or brother under 12, solely dependent on you for support (specify which)? Wife

10 Married or single (which)? Married Race (specify which)? Caucasian

11 What military service have you had? Rank: None ; branch: None ; years: None ; Nation or State: None

12 Do you claim exemption from draft (specify grounds)? Yes, Wife to support

I affirm that I have verified above answers and that they are true.

John J. Barry  
(Signature of registrant)

If person is of  
Alleged foreign  
birth, file  
copy of  
passport

20-2-16. A  
REGISTRAR'S REPORT

1 Tall, medium or short (specify which)? Medium Slender, medium, or stout (which)? Medium

2 Color of eyes: Gray Color of hair? Black Bald? No

3 Has person lost arm, leg, hand, foot, or both eyes, or is he otherwise disabled (specify)? No

I certify that my answers are true, that the person registered has read his own answers, that I have witnessed his signature, and that all of his answers of which I have knowledge are true, except as follows:

Gunnar M. Skogstrom  
(Signature of registrar)

Ward 6

Precinct 3

City or County Worcester

State Mass.

June 5, 1917  
(Date of registration)