

1	Name in full (Given name) <u>Alie Norris Lewis</u> (Family name)	Age, in yrs. <u>23</u>
2	Home address (No.) <u>Fairplay 20</u> (City) <u>My</u> (State)	
3	Date of birth (Month) <u>April</u> (Day) <u>7</u> (Year) <u>1894</u>	
4	Are you (1) a natural-born citizen, (2) a naturalized citizen, (3) an alien, (4) or have you declared your intention (specify which)? <u>Natural born</u>	
5	Where were you born? (Town) <u>Maui Co</u> (State) <u>My</u> (Nation) <u>U.S.A.</u>	
6	If not a citizen, of what country are you a citizen or subject?	
7	What is your present trade, occupation, or office? <u>Farming</u> <u>1</u>	
8	By whom employed?	
	Where employed?	
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)?	
10	Married or single (which)? <u>single</u> Race (specify which)? <u>Caucasian</u>	
11	What military service have you had? Rank _____; branch _____; years _____; Nation or State _____	
12	Do you claim exemption from draft (specify grounds)? <u>weak eyes</u>	

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

Alie Norris Lewis
(Signature or mark)

1	Tall, medium, or short (specify which)? <u>Small</u> Slender, medium, or stout (which)? <u>Stout</u>
2	Color of eyes? <u>Dark Blue</u> Color of hair? <u>Light Brown</u> Bald?
3	Has person lost arm, leg, hand, foot, or both eyes, or is he otherwise disabled (specify)? <u>weak eyes</u>

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:

Alie Norris Lewis
(Signature of Registrar)

Precinct 7City or County MauiState Hawaii

June 5 1917
(Date of registration)

