## U.S., World War II Draft Cards Tuscarora Indian Men, 1940-1947 Tuscarora Chief Hibert Chew, Tuscarora Reservation, Lewiston-Sanborn, New York

HIBERT CHEW  (First) (Middle) (Last)  2. Address (Print)  R. D. 2 SANBORN NIAGARA N. Y. (Number and street or R. F. D. number)  (Number and street or R. F. D. number)  (Exchange) (Number) (Mo.) (Day) (Yr.)  (Exchange) (Number) (Mo.) (Day) (Yr.)  (Exchange) (Number) (Mo.) (Day) (Yr.)  (State or Guntry)  7. Name of Person Who Will Always Know Your Address  (Min. Mrs. Miss) (First) (Middle)  (Min. Mrs. Miss) (First) (Middle)  (Number and street or R. F. D. number)  (Rounty)  (State)  (Rounty)  (State)  (Rounty)  (State)  (Rounty)  (State)	SERIAL NUMBER	1. Name (Print)		ORDER NUMBER
2. ADDRESS (Print)  R. D. 2 SANBORN NIAGARA N. Y.  (Number and street or R. F. D. number)  (Number and street or R. F. D. number)  (Exchange) (Number)  (Exchange) (Number)  (Mo.) (Day) (Yr.)  (Exchange) (Number)  (Mo.) (Day) (Yr.)  (State or Guntry)  7. Name of Person Who Will Always Know Your Address  (Mr. Mrs. Miss) (First)  (Number and street or R. F. D. number)  (Rounty)  (State)  (Rounty)  (State)	Shiring House	and some entered to	CHEW	ORDER NUMBER
2. ADDRESS (Print)  R. D. 2  SANBORN  NIAGARA  (Number and street or R. F. D. number)  (Town)  (Town)  (County)  (State)  3. TELEPHONE  4. AGE IN YEARS  DATE OF BIRTH  (Town or county)  (Exchange)  (Number)  (Mo.)  (Day)  (Yt.)  (State or country)  7. NAME OF PERSON WHO WILL ALWAYS KNOW YOUR ADDRESS  (Mr., Mrs., Miss)  (First)  (Middle)  (Moddle)  (Number and street or R. F. D. number)  (Rumber and street or R. F. D. number)	1252	TITOTILE	OTITIV	406
R. D. 2 SANBORN NIAGARA  (Number and street or R. F. D. number)  (Town)  (County)  (State)  3. TELEPHONE  4. AGE IN YEARS  5. PLACE OF BIRTH  (Town or county)  DATE OF BIRTH  (Exchange)  (Number)  (Mo.)  (Day)  (Mr.)  (State or Guntry)  7. NAME OF PERSON WHO WILL ALWAYS KNOW YOUR ADDRESS  (Mr., Mrs., Miss)  (First)  (Middle)  (Number and street or R. F. D. number)  (Town)  (County)  (State)  (County)  (State)  (State)  (Right)  (County)  (State)  (Right)  (Rount)  (State)  (Town)  (County)  (State)  (State)  (County)  (State)  (State)  (Rount)  (State)  (Rount)  (State)  (County)  (State)  (State)  (County)  (State)  (State)		(First)	(Middle) (Last)	
(Number and street of R. F. D. number)  (State)  3. TELEPHONE  4. AGE IN YEARS  5. PLACE OF BIRTH  (Town or county)  (Exchange)  (Number)  (Number)  (Number)  (Number)  (Mo.)  (Day)  (Yr.)  (State or Guntry)  7. NAME OF PERSON WHO WILL ALWAYS KNOW YOUR ADDRESS  (Mr., Mrs., Miss)  (First)  (Middle)  (Number and street of R. F. D. number)  (Number and street of R. F. D. number)	2. Address (Print)	A 1 444 A 1141	4+++ + N + + A	April April
3. TELEPHONE  4. AGE IN YEARS  5. PLEE OF BIRTH  (Exchange) (Number)  (Mo.) (Day) (Yr.)  7. NAME OF PERSON WHO WILL ALWAYS KNOW YOUR ADDRESS  (Mr., Mrs., Miss) (First)  (Mr., Mrs., Miss) (First)  (Number and street or R. F. D. number)  (Rumber and street or R. F. D. number)	R. D.			N. Y.
DATE OF BIRTH  (Exchange) (Number) (Mo.) (Day) (Yr.) (State or country)  7. NAME OF PERSON WHO WILL ALWAYS KNOW YOUR ADDRESS  (Mr., Mrs., Miss) (First) (Middle)  (Number and street or R. F. D. number) (Town) (County)  (Number and street or R. F. D. number)  (Number and street or R. F. D. number) (Town) (County)  (Number and street or R. F. D. number)  (Number and street or R. F. D. number) (Town) (County)  (State)  (Number and street or R. F. D. number) (Town) (County)  (State)  (Number and street or R. F. D. number) (Town) (County)  (State)  (Number and street or R. F. D. number) (Town) (County)  (State)  (Number and street or R. F. D. number) (Town) (County)  (State)				
DATE OF BIRTH  (Town or county)  (Exchange) (Number) (Mo.) (Day) (Yr.)  (State or Guntry)  7. NAME OF PERSON WHO WILL ALWAYS KNOW YOUR ADDRESS  (Mr., Mrs., Miss) (First) (Middle)  (Middle) (Last)  9. ADDRESS OF THAT PERSON  (Number and street or R. F. D. number) (Town) (County) (State)  10. EMPLOYER'S NAME  (Number and street or R. F. D. number) (Town) (County)  (Number and street or R. F. D. number) (Town) (County)  (Number and street or R. F. D. number) (Town) (County)  (Number and street or R. F. D. number) (Town) (County)  (Number and street or R. F. D. number) (Town) (County)  (Number and street or R. F. D. number) (Town) (County)  (Number and street or R. F. D. number) (Town) (County)  (Number and street or R. F. D. number) (Town) (County)  (Number and street or R. F. D. number) (Town) (County) (State)	3. TELEPHONE	4. AGE IN YEARS	5. PLACE OF BIRTH	
(Exchange) (Number) (Mo.) (Day) (Yr.) (State or country)  7. Name of Person Who Will Always Know Your Address  (Mr., Mrs., Miss) (First) (Middle)  (Number and street or R. F. D. number)  (Number and street of R. F. D. number)	none	25	Lewson	2.0
7. NAME OF PERSON WHO WILL ALWAYS KNOW YOUR ADDRESS  (Mr., Mrs., Miss)  (Mr., Mrs., Miss)  (Mr., Mrs., Miss)  (Number and street or R. F. D. number)		DATE OF BIRTH	(10wn or county)	9/1
7. NAME OF PERSON WHO WILL ALWAYS KNOW YOUR ADDRESS  (Mr., Mrs., Miss)  (Mr., Mrs., Miss)  (Middle)  (Middle)  (Middle)  (Last)  8. RELATIONSHIP OF THAT PERSON  (Number and street or R. F. D. number)	(Eychange) (Numbe	(Ma) (Day) (Vr)	(State of country)	MINI
(Mr., Mrs., Miss) (First) (Middle) (Last)  9 ADDRESS OF THAT PERSON  (Number and street or R. F. D. number) (Town) (County) (State)  10. EMPLOYER'S NAME  (Number and street or R. F. D. number) (Town) (County)  (Number and street or R. F. D. number) (Town) (County)  (Number and street or R. F. D. number) (Town) (County)  I AFFIRM THAT I HAVE VERIFIED ABOVE ANSWERS AND THAT THEY ARE TRUE.				8. RELATIONSHIP OF THAT
9 ADDRESS OF THAT PERSON  (Number and street or R. F. D. number)	gurs.	Shin low	Char	PERSON
9 ADDRESS OF THAT PERSON  (Number and street or R. F. D. number)  (Number and street or R. F. D. number)  (State)  10. EMPLOYER'S NAME  (Number or Business  (Number and street or R. F. D. number)  (State)  (Registration card	(Mr., Mrs., Miss)	(First)	(Middle) (Las	at)
10. EMPLOYER'S NAME  CITALITY TELES  11. PLACE OF EMPLOYMENT OR BUSINESS  (Number and street of R. F. D. number)  (Number and street of R. F. D. number)  (Number and street of R. F. D. number)  (Town)  (County)  (State)  REGISTRATION CARD	RE	2.2 Danko	m (Town)	Ha ny r
(Number and street or R. F. D. nymber)  I AFFIRM THAT I HAVE VERIFIED ABOVE ANSWERS AND THAT THEY ARE TRUE.  REGISTRATION CARD		Pertainteed,	Products Co.	
I AFFIRM THAT I HAVE VERIFIED ABOVE ANSWERS AND THAT THEY ARE TRUE.  REGISTRATION CARD		Miagara	Fally Nic	My 4
				(County)
D. S. S. Form 1 16-17105 (Registrant's signature)	REGISTRATION CAR D. S. S. Form 1	16—17105	Hibert	Churchant's signature)

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		DESCI	RIPTION	OF REC	GISTRA	NT	
RAC	Œ	HEIO (Appr		WEIG (Appr	HT rox.)	COMPLEXIO	N
White		5ft	in	14	0_	Sallow	
		EY		HA	IR	Light	
Negro		Blue		Blonde		Ruddy	5
		Gray		Red	~	Dark	X
Oriental		Hazel		Brown	X	Freckled	
	V	Brown	X	Black		Light brown	
Indian	4	Black		Gray		Dark brown	
Filipino				Bald		Black	
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SERIAL NUMBER   1. NAME (Print)	Tan and the second		ORDER NUMBER
- SUZ HANDI	d	Chew	10.859
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2. PLACE OF RESIDENCE (Print)	The hand	L William	
Ubber Mt. Rd Ti	uscaroraReser	watton wewis	ston N.U
(Number and street) [THE PLACE OF RESIDENCE	(Town, township, village, or city)	(County)	(State)
JURISDICTION; LINE	2 OF REGISTRATION CERT	IFICATE WILL BE IDENTIC	CALI
8. MAILING ADDRESS	h h h -		
Samborn	KEDT	New y	WR_
[Mailing address	if other than place indicated on line 2.	If same insert word same]	4 14
4. TELEPHONE	5. AGE IN YEARS	6. PLACE OF BIR	ru .
·Ho	20	BUFFa	lo
	DATE OF BIRTH	(Town	or county)
ELENTRAL STANDARD	10 5 10	721 N.G	
(Exchange) (Number)	1 (2.20.)	(114)	or country)
7. NAME AND ADDRESS OF PERSON WHO		A STATE OF THE PARTY OF THE PAR	
Mrs, Amelia	Will lams 8	andorn Ri	- D 1
8. EMPLOYER'S NAME AND ADDRESS	h i		
Wahter Joh	inson Build	ina Co.	
9. PLACE OF EMPLOYMENT OR BUSINESS		0 -16	
Hude Park Blue	1. Nia	anatalis Mia	4. NU
(Number and street or R. F. D. nun			(State)
I APPIDIT THAT I HAVE VERIFIED AR	OVE ANSWERS AND THAT THEY	ARE TRUE.	

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No.		DESC	RIPTIO	N OF RE	GISTRA	NT
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AT VOT	3-4	6 Pt		15	0	COMPLEXION
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		EY	ES	HA	IR	Light
Negro		Blue		Blonde		Ruddy
		Gray		Red	17.	Dark
Oriental		Hazel		Brown		Freckled
		Brown	1	Black	-	Light brown
Indian	L	Black		Gray		Dark brown
		20.0	E MA	Bald		Black
Filipino	PLE V					
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I certify read to hin all of his a	that my n his ownswers o	y answers a	re true; t	that the perave witness	rson regis	tered has read or has he gnature or mark and the ept as follows:
I certify read to hin all of his a XXXX	me or Local	y answers a yn answers; of which I h	re true; that I have kno	that the perave witness wiedge are	rson regis sed his si true, exce	etered has read or has legnature or mark and the