

1 Name in full: *Valentine Antoniacomi Tinoley* Age, in yrs. *38*
(Given name) (Family name)

2 Home address: *39 no Alicia Pa*
(Street) (City) (State)

3 Date of birth: *Oct 9th 1889*
(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)? *Naturalized*

5 Where were you born? *Fiumi Disopra Po Udine Italy*
(Town) (State) (Nation)

6 If not a citizen, of what country are you a citizen or subject? *U. S. A.*

7 What is your present trade, occupation, or office? *Miner*

8 By whom employed? *H. Harry Brown*
 Where employed? *Alicia Pa*

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)? *A wife and four children*

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

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

12 Do you claim exemption from draft (specify grounds)? _____

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

Valentine Antoniacomi Tinoley
 (Signature of mark)

If person is of African descent, tear off this corner

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 REGISTRAR'S REPORT

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

2 Color of eyes? *Brown* Color of hair? *Black* Bald? *Not*

3 Has person lost arm, leg, hand, foot, or both eyes, or is he otherwise disabled (specify)? *One eye*

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:

James M. Brides
 (Signature of registrar)

Precinct *# 2 Luzerne Twp*
 City or County *Fayette*
 State *Pa*

June 5th 1917
 (Date of registration)