



STATE OF MAINE
OFFICE OF THE ADJUTANT GENERAL
AUGUSTA

ALIEN REGISTRATION

Thurrock

Name *Minoturn*, Maine
Date *August 5 1940*
Name *Axel Julius Carlson*
Street Address
City or Town *Swans Island*
How long in United States *17 years* How long in Maine *17 years*
Born in *Sweden* Date of birth *Aug 6 1900*
If married, how many children *1* Occupation *fisherman*
Name of employer
(Present or last)
Address of employer
English *yes* Speak *yes* Read *yes* Write *yes*
Other languages *Swedish*
Have you made application for citizenship? *no*
Have you ever had military service? *yes*
If so, where? *Sweden* When? *1921 - 1922*
Signature *Axel J. Carlson*
Witness *R. W. Stinson*
W. A. Staples