



STATE OF MAINE
OFFICE OF THE ADJUTANT GENERAL
AUGUSTA

ALIEN REGISTRATION

Skowhegan, Maine

Date *June 26, 1940*

Name *Bernice M. Castle*

Street Address *88 East Learett St*

City or Town *Skowhegan*

How long in United States *35 yrs* How long in Maine *32 yrs*

Born in *Fingish P. E. Island* Date of birth *Aug 11th 1885*

If married, how many children *yes 2 children* Occupation *Housewife*

Name of employer
(Present or last)

Address of employer

English *yes* Speak *yes* Read *yes* Write *yes*

Other languages *no*

Have you made application for citizenship? *no*

Have you ever had military service? *no*

If so, where? when?

Signature *Bernice M. Castle*

Witness *Ralph A. Valliere*