



STATE OF MAINE
OFFICE OF THE ADJUTANT GENERAL
AUGUSTA

ALIEN REGISTRATION

Livemore Falls, Maine
Date *June 29, 1940*

Name *Leila Eichel Duke*

Street Address *17 Knapp St.*

City or Town *Livemore Falls*

How long in United States *12 yrs.* How long in Maine *12 yrs.*

Born in *Canada* Date of Birth *Apr. 13, 1909*

If married, how many children *2* Occupation *housewife*

Name of employer _____
(Present or last)

Address of employer _____

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

Other languages *no*

Have you made application for citizenship? *yes*

Have you ever had military service? _____

If so, where? _____ When? _____

Signature *Mrs Leila Eichel Duke*

Witness *[Signature]*