

Police Registration Card

1. NAME IN FULL Last First Middle <b>SCHULTZ HOWARD DALE</b>				SELECTIVE SERVICE NUMBER 50 30 53 <b>989</b>			
2. PLACE OF RESIDENCE Street and Number or RFD Route <b>1137 East 105St.</b>				3. DATE OF BIRTH <b>July 19, 1953</b>			
City, Town, or Village <b>Brooklyn</b>		County <b>Kings</b>		State <b>N.Y.</b>		Zip Code <b>11236</b>	
3. MAILING ADDRESS (if different than item 2) Street and Number or RFD Route <b>Same as No. 2</b>				4. PLACE OF BIRTH City <b>Brooklyn</b>			
City, Town, or Village <b>Brooklyn</b>				State or Country <b>N.Y.</b>			
5. DATE OF REGISTRATION <b>July 21, 1971</b>				6. NAME and address of person other than a member of your household who will always know your address <b>Mrs. Lena Block 1560 102nd St. Brooklyn, N.Y.</b>			
7. COLOR OF EYES <b>Hazel</b>		8. COLOR OF HAIR <b>Brown</b>		9. HEIGHT (APPROX.) <b>6 - 2</b>		10. WEIGHT (APPROX.) <b>180</b>	
11. OTHER OBVIOUS PHYSICAL CHARACTERISTICS THAT WILL AID IN IDENTIFICATION: <b>None</b>							
Form Approved Budget Bureau No. 23-80000 SELECTIVE SERVICE SYSTEM - REGISTRATION CARD 989 Form 1 (Revised 10-1-69) (Complete reverse on original only)							

12. OCCUPATION <b>Student</b>		14. NATURE OF BUSINESS, SERVICE RENDERED, OR ONE'S PRODUCT					
13. FIRM OR INDIVIDUAL BY WHOM EMPLOYED <b>Northem Michigan Univ.</b>							
15. PLACE OF EMPLOYMENT OR BUSINESS <b>Marquette, Michigan 49855</b>							
17. Active duty in the Armed Forces of the United States or a volunteer under section 101, 102b							
A. ARMED FORCE OR COUNTRY <b>None</b>		B. SERVICE NO.		C. DATE OF ENTRY		D. DATE OF SEPARATION	
18. Postal membership in a reserve component of the Armed Forces							
A. ARMED FORCE <b>None</b>		B. SERVICE NO.		C. DATE OF ENTRY		D. GRADE	
E. ORGANIZATION		I affirm that I have verified the foregoing and that they are true. <i>Howard Dale Schultz</i> Signature of registrant					

I certify that the person registered has read or had told read to him his answers that I have witnessed his signature or mark, and that all of his answers of which I have knowledge are true, except as follows:

**None**

**Selective Service System**  
**BELYN. LOCAL BOARD GROUP 5**  
**1329 Surf Avenue**  
**Brooklyn, N. Y. 11234**

*Michael J. Dancer*  
 Signature of official

Register for Local Board

(Number)

(City or county)

(State)