



## 6. State particulars as to family, as follows—continued.

(k) Name of father Ridg Gaerber Living? No  
 ("Yes" or "No")  
 Place of father's birth Bremen Germany Citizenship of father American  
 Residence of father, if living \_\_\_\_\_  
 (l) Name and maiden name of mother Leonides Truella Living? Yes  
 ("Yes" or "No")  
 Place of mother's birth Panis Tiquae Citizenship of mother French  
 Residence of mother, if living 305 Calvary Hill Nogales Ariz.  
 (m) All brothers and sisters:

Name.	Brother or sister.	Date of birth.	Residence.
<u>Rosa Gaerber</u>	Sister	<u>Die 6th 1898</u>	<u>Santa Ana So Mex</u>
<u>Delfina Gaerber</u>	"	<u>July 6th 1890</u>	<u>Pierson So Mex</u>

(n) State whether you have now or have had any relative in arms for or against the United States and its allies during the present war: Yes  
 ("Yes" or "No")

If yes, give particulars:

Names.	Relationship.	For or against.
<u>Edward Munier</u>	<u>Cousin</u>	<u>for</u>
<u>Raymond Munier</u>	"	"
<u>Gabriel Munier</u>	"	"

## 7. Occupations:

(a) If employed since January 1, 1914, state—

Name of place.	Date.	Occupation.	Name of employer.

(b) If not employed, but in business or other occupation for self, state name of place, date, and occupation.

8. I arrived in the United States Oct 1915, at the port of Nogales Arizona  
 (Date.) (State port.)  
 on ship \_\_\_\_\_, and applied for entry under the name of \_\_\_\_\_  
 (Name of ship.) (State name under which entry was made.)

9. Have you ever been engaged in any governmental service? No If yes, state duties, duration, and character  
 of service, and nation for which you served \_\_\_\_\_  
 ("Yes" or "No")

10. Have you, since January 1, 1914, reported to or registered with a consul or representative of any country other than the United States for Government service of any kind (military, naval, or other service), or for any other purpose? No  
 ("Yes" or "No")  
 If yes, state when and where and to whom, and for what country and for what service and for what purpose \_\_\_\_\_

11. Have you ever applied for naturalization in or taken out first papers of naturalization in the United States? No  
 ("Yes" or "No")  
 If yes, when and where? \_\_\_\_\_  
 (Give State or Territory, city, town, or other municipality, and name of court.)

12. Have you ever been naturalized, partly or wholly, in any country other than the United States? No If yes,  
state when and where and in what country \_\_\_\_\_  
(*"Yes" or "No."*)
13. Has your present husband ever applied for naturalization in or taken out first papers of naturalization in the United States?  
\_\_\_\_\_ If yes, state when and where \_\_\_\_\_  
(*"Yes" or "No."*)
14. Has your present husband ever been naturalized, either wholly or partly, in any country other than the United States?  
\_\_\_\_\_ If yes, state when and where and in what country \_\_\_\_\_  
(*"Yes" or "No."*)
15. Have you ever taken an oath of allegiance to any country, State, or nation other than the United States? No  
(*"Yes" or "No."*)
- If yes, state when and where and to what country \_\_\_\_\_

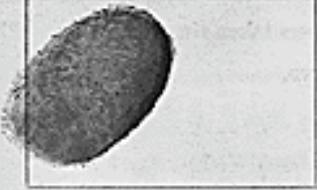
16. Have you ever been arrested or detained on any charge? No If yes, state when, where, and on  
what charge \_\_\_\_\_ Are you on parole? No (*"Yes" or "No."*)

17. Have you a permit to enter forbidden areas? No If yes, state number of permit \_\_\_\_\_

(18) Languages: %

Spoken English Spanish  
Written English Spanish  
Read English Spanish

I solemnly swear that all the above statements and answers by me made are true.

Left thumb print, if registrant can not write.  


*Mathilda Faehrer*  
(Signature.)

Sworn to before me this 20th day of June 1918, 19  
at Nogales, Arizona.

*Mathilde Faehrer*  
(Official title, if any, of registration officer.)

*W.C. DeWitt May*  
Postmaster  
(Official title, if any, of registration officer, or other title.)



DESCRIPTION OF REGISTRANT.

(To be filled in by registration officer.)

Age 20 years 3 months Mouth Regular  
Height 5 ft. 4 in. Chin Regular  
Weight 110 Hair Dark Brown,  
Forehead Regular Complexion Fair.  
Eyes Brown. Face Round,  
Nose Regular  
Distinctive marks None  
Name Mathilda Faehrer.  
Address Nogales, Arizona.

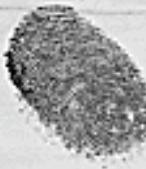
67-1123

**FINGER PRINTS.**

(To be taken by registration officer.)

Name of registrant..... Address.....

e7-1123

1—R. Thumb.	2—R. Forefinger.	3—R. Middle finger.	4—R. Ring finger.	5—R. Little finger.
				
6—L. Thumb.	7—L. Forefinger.	8—L. Middle finger.	9—L. Ring finger.	10—L. Little finger.
				

Plain impressions of the four fingers taken simultaneously.

LEFT HAND.



Plain impressions of the four fingers taken simultaneously.

RIGHT HAND.



*With seal*