

USE FOR ENLISTMENTS AS FOLLOWS:-

<b>FOR 3 YRS. IN</b>	1939 1943	<b>FOR 1 YR. IN</b>	1937 1941
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Latson, James

Guide No.

(1) NAME (Print full name, LAST NAME FIRST)

(2) ADDRESS (House Number &amp; Street)

36 West 139 St

(City)

(State)

(3) Re-Enlisted Oct. 19,

19 39

for (3) (1) Yrs. In Company ~~3369th~~ 369th Inf. By Capt. Brown

(Name of Officer)

(4) OCCUPATION	AGE	WHERE BORN		HEIGHT		COLOR OF		
		City or County	State	Feet	Inches	Eyes	Hair	Complexion
Shipping Clerk	20	Savannah	Ga.	6	9	Brown	Black	Brown

(5) Prior Service

(See instructions for form)

none

(6) Prior N.C.O. Grades

, R.S.O.

dated

19

.

, R.S.O.

dated

19

. W.C.F.?

Prior N.C.O. Grades

, R.S.O.

dated

19

.

, R.S.O.

dated

19

. W.C.F.?

(7) Appointed	} To	Date	P.P.	R.S.O.
Transferred	} To	Date	P.P.	R.S.O.
Appointed	} To	Date	P.P.	R.S.O.
Transferred	} To	Date	P.P.	R.S.O.
Appointed	} To	Date	P.P.	R.S.O.
Transferred	} To	Date	P.P.	R.S.O.
Appointed	} To	Date	P.P.	R.S.O.
Transferred	} To	Date	P.P.	R.S.O.

(8) Commissioned

Rank

Date

P.P.

S.O.

A.G.O., N.Y.

(9) Discharge

Date

Authority

