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SSS Form No. 1  
(Form approved.  
Budget Bur. No. 33-R099)

# SELECTIVE SERVICE SYSTEM REGISTRATION CARD

SELECTIVE SERVICE NUMBER			
33	32	33	508
[Registrar will not enter Selective Service number]			

1. Name

TAMMEN Jr., Ronald Henry  
(Last) (First) (Middle)

2. Place of residence

Maple Heights - Cuyahoga, Ohio  
(City, town, village, or county) (State)

[The place of residence given on the line above will determine Local Board jurisdiction]

5. Date of birth

July 23 1933  
(Month) (Day) (Year)

3. Mailing address

21001 Hillgrove Ave., Maple Heights, Ohio

6. Place of birth

Lakewood, Ohio  
(City, town, village, or county) (State or country)

4. Name and address of person who will always know your address

Ronald H Tammen Sr., 21001 Hillgrove Ave. Maple Heights, Ohio  
(Name) (Address)

7. Occupation

Maintenance

8. Firm or individual by whom employed

City of Maple Heights, Ohio

9. Nature of business, service rendered, or chief product

10. Place of employment or business

(Number and street or R. F. D. number)

(Town)

(County)

(State)

11. Local board with which registered under Selective Training and Service Act of 1940, as amended

None

12. Were you ever rejected for service in the armed forces? Yes  No  When?

13. Marital status: Single  Married  [ Living with wife  Separated  Divorced  Widower  ] Father  (Over)

14. Active duty in the armed forces of the United States or a cobelligerent nation since Sept. 16, 1940:

none

(Branch of Armed Forces) (Service or serial number) (Date of entry)

(Name of last organization) (Date of separation)

15. Present membership in a reserve component of the armed forces:

(Branch of Armed Forces) (Service or serial number) (Date of entry)

(Grade and organization)

I affirm that I have verified the foregoing answers and that they are true:

*Ronald Henry Jammer Jr.*  
(Signature of registrant)

DESCRIPTION OF REGISTRANT

16. Color of eyes brown Color of hair brown Complexion ruddy

Height (approx.) 5 ft. 10 in. Weight (approx.) 155 Race \_\_\_\_\_

Other obvious physical characteristics that will aid in identification:

none

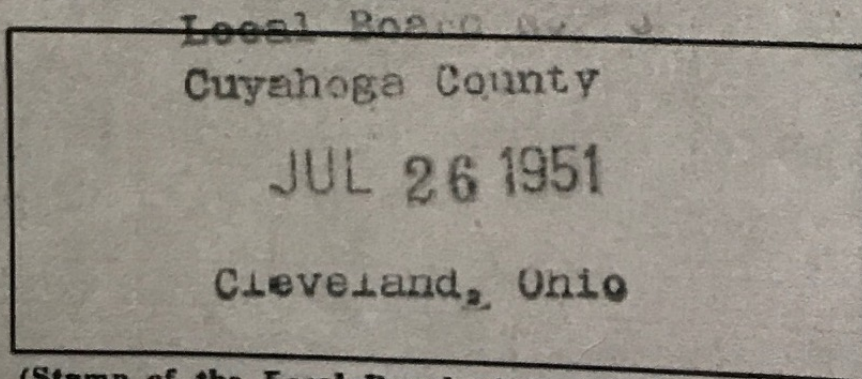
I certify that my answers are true; that the person registered has read or has had read to him his own answers; that I have witnessed his signature or mark and that all of his answers of which I have knowledge are true, except as follows:

not to my knowledge

July 26 1951  
(Date of registration)

*Marita Caldwell*  
(Signature of registrar)

Registrar for local board 32 Cuyahoga, Ohio  
(Number) (City or county) (State)



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(Stamp of the Local Board of jurisdiction as determined by item 2, front of card)