

SELECTIVE SERVICE SYSTEM
NOTICE OF CLASSIFICATION

Robert - Holt

(First name) (Middle initial) (Last name)

Selective Service No.

28	23	47	79
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1-SH

is classified in Class _____

until June 1965

☒ by Local Board,

☐ by Appeal Board

vote of _____ to _____

☐ by President 3/18/65

(Date of mailing)

Patricia Sawyer
(Member or clerk of local board)

Robert Holt
(Registrant's signature)

SSS Form No. 110 (Revised 5-7-63)

(Approval not required)

LOCAL BOARD No. 23
FOR NEW JERSEY
2nd FLOOR
880 BERGEN AVENUE

(Local Board Stamp)

JERSEY CITY NEW JERSEY 07306
You are required to have this notice, in addition to your Registration Certificate, on your person at all times and to surrender it upon entering active duty in the Armed Forces.

The law requires you to notify your local board in writing (1) of every change in your address, physical condition, and occupational, marital, family, dependency, and military status, and (2) of any other fact which might change your classification within 10 days after it occurs.

Your Selective Service Number, shown on the reverse side, should appear on all communications with your local board. Sign this form immediately upon receipt.

FOR INFORMATION AND ADVICE, GO TO ANY LOCAL BOARD