| | OF CLASSIF | |
|--------------|---------------------------------|----------------|
| Davi | his is to certify to B. T | HOMSON |
| First name) | (Middle initial) | (Last name |
| S | elective Service | No. |
| | | |
| 21 | 50 47 | 81 |
| is class | ified in Class | I-Y |
| until | | |
| by Loc | eal Board unless of below: | otherwise |
| | Appeal Board | |
| vot | e of to | |
| □ by | President 13 March | 1968 |
| ٤. ١ | (Date of mailing | tetth |
| (Member, | Executive Secretar local board) | y, or clerk of |
| and the same | Registrant's signat | |

The law requires you to have this Notice in addition to your Registration-Certificate, in your personal possession 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 within 10 days after it occurs, (1) of every change in your address, physical condition and occupational (including student), marital, family, dependency and military status, and (2) of any other fact which might change your classification.

Any person who alters, forges, knowingly destroys, knowingly mutilates or in any manner changes this certificate or who, for the purpose of false identification or representation, has in his possession a certificate to another or who delivers his certificate to another or who delivers his certificate to another to be used for such purpose, may be fined not to exceed \$10,000 or imprisoned for not more than 5 years, or both.

LOCAL BOARD NO. 5 HENNEPIN COUNTY 308 WALKER ST. WAYZATA, MINN. 553

> (LOCAL BOARD STAMP) SEE OTHER SIDE



ORDER TO REPORT FOR ARMED FORCES PHYSICAL EXAMINATION

To Mr. David Bird THOMSON 856 President Street Apt. 6 Brooklyn, N.Y. 11215 Transfer Board of
Local Board No. 5
Selective Service System
205 East 42nd Street
New York, New York 1001

(LOCAL BOARD STAMP)

AUG 1 7 1967
(Date of mailing)

21 50 47 81

ARMED FORCES EXAMINING & ENTRANCE STATION 39 WHITEHALL STREET, NEW YORK, N.Y. 10004

AUG 30 1967

(Date)

at

7:00 A.M.

(Hour)

TELEPHONE = 573-6171 extension 42

(WEDNESDAY)

(Member or clerk of Local Board)

IMPORTANT NOTICE (Read Each Paragraph Carefully)

TO ALL REGISTRANTS:

When you report pursuant to this order you will be forwarded to an Armed Forces Examining Station where it will be determined whether you are qualified for military service under current standards. Upon completion of your examination, you will be returned to the place of reporting designated above. It is possible that you may be retained at the Examining Station for more than 1 day for the purpose of further testing or for medical consultation. You will be furnished transportation, and meals and lodging when necessary, from the place of reporting designated above to the Examining Station and return. Following your examination your local board will mail you a statement issued by the commanding officer of the station showing whether you are qualified for military service under current standards.

If you are employed, you should inform your employer of this order and that the examination is merely to determine whether you are qualified for military service. To protect your right to return to your job, you must report for work as soon as possible after the completion of your examination. You may jeopardize your reemployment rights if you do not report for work at the beginning of your next regularly scheduled working period after you have returned to your place

IF YOU HAVE HAD PREVIOUS MILITARY SERVICE, OR ARE NOW A MEMBER OF THE NATIONAL GUARD OR A RESERVE COMPONENT OF THE ARMED FORCES, BRING EVIDENCE WITH YOU. IF YOU WEAR GLASSES, BRING THEM. IF MARRIED, BRING PROOF OF YOUR MARRIAGE. IF YOU HAVE ANY PHYSICAL OR MENTAL CONDITION WHICH, IN YOUR OPINION, MAY DISQUALIFY YOU FOR SERVICE IN THE ARMED FORCES, BRING A PHYSICIAN'S CERTIFICATE DESCRIBING THAT CONDITION, IF NOT ALREADY FURNISHED TO YOUR LOCAL BOARD.

If you are so far from your own Local Board that reporting in compliance with this Order will be a hardship and you desire to report to the Local Board in the area in which you are now located, take this Order and go immediately to that Local Board and make written request for transfer for examination.

TO CLASS I-A AND I-A-O REGISTRANTS:

If you fail to report for examination as directed, you may be declared delinquent and ordered to report for induction into the Armed Forces. You will also be subject to fine and imprisonment under the provisions of the Universal Military Training and Service Act, as amended.

TO CLASS I-O REGISTRANTS:

This examination is given for the purpose of determining whether you are qualified for military service. If you are found qualified, you will be available, in lieu of induction, to be ordered to perform civilian work contributing to the maintenance of the national health, safety or interest. If you fail to report for or to submit to this examination, you will be subject to be ordered to perform civilian work in the same manner as if you had taken the examination and had been found

SELECTIVE SERVICE SYSTEM



TRANSFER FOR ARMED FORCES PHYSICAL EXAMINATION OR INDUCTION

| | Part 1.—APPLICATION | 30 1-3- 62 | | | | |
|---|--|--|--|--|--|--|
| To Local Board of Transfer | | Date | | | | |
| | | SELECTIVE SERVICE NUMBER | | | | |
| DAVID BIND | TAMESON | 21 50 17 81 | | | | |
| (First name) (Middle | and the second s | 215 | | | | |
| Of(Present address) | | | | | | |
| present herewith my (Check applicable box) | | A STATE OF THE STA | | | | |
| Order to Report for Armed Forces | | to Report for Induction Form 252) | | | | |
| Physical Examination (SSS Form 2 | (SSS F | orm 232) | | | | |
| | | | | | | |
| issued by Local Board Number | City or toy | vn, and State) | | | | |
| directing that I report on 21 July 106 | | fer to your local board to report | | | | |
| on a date to be set by you. The reason | | board area is: | | | | |
| is the in N.V.C. erec. Single | | | | | | |
| Prologed: Founday Book Store | | | | | | |
| (at See atteched SSS Fear 127 & | Press 80) | | | | | |
| HOTE: Please forward mecesses | y papers as seen as possible | | | | | |
| ce to reg | A ALLEY | Signature of registrant) | | | | |
| | 2.—APPROVAL OR DISAPPROVAL | organization registration | | | | |
| ron / | E.—AFFROVAL OR DISAFFROVAL | Date 12 July , 19 67 | | | | |
| | | , 13 <u> </u> | | | | |
| TRANSFER BOARD OF Request for transfer is approved. You will be notified by | | | | | | |
| Local Board No. 5 Selective Service System | this local board of the date | | | | | |
| 205 East 42nd Street | report as originally ordered | approved. You are directed to | | | | |
| New York 17, N. Y. | report as originally ordered | by your local source. | | | | |
| (Stamp of Local Board of Transfer) | (Membe | r or clerk, local board of transfer) | | | | |
| | Part 3.—TRANSFER ACTION | of cicia, local sound of danser, | | | | |
| | | Date | | | | |
| | Registrant is transferred. Form | ns attached. | | | | |
| | Registrant WAS WAS NO | OT previously examined. | | | | |
| | Status | "delinquent," "physician," "Class I-O reg.," etc.) | | | | |
| | (Indicate "non-volunteer," "volunteer," | "delinquent," "physician," "Class I-O reg.," etc.) | | | | |
| | | | | | | |
| (Stamp of Local Board of Origin) | (Member | or clerk, local board of origin) | | | | |
| | Part 4.—DISPOSITION | Date, 19 | | | | |
| | On | , the registrant was (Check one) | | | | |
| TRANSFER BOARD OF | Found qualified; For | | | | | |
| Toggl Roard No. 3 | Inducted into | | | | | |
| Selective Service System 205 East 42nd Street | | (Branch of Service) | | | | |
| New York 17. N. Y. | Other (Specify) | | | | | |
| | Applicable forms are attached. | | | | | |
| (Stamp of Local Board of Transfer) | (Member | or clerk, local board of transfer) | | | | |

SERVICE SERVIC

SELECTIVE SERVICE SYSTEM

TRANSFER FOR ARMED FORCES PHYSICAL EXAMINATION OR INDUCTION

| To Local Board of Transfer | Part 1.—API | PLICATION | Date_ | ovenier | 1 | _, 19 <mark>67</mark> |
|--|---------------------|--|--------------------------------|--------------------------|----------------|-----------------------|
| | | | | SELECTIVE SERVICE NUMBER | | |
| I David | В | Thomson | 21 | 50 | 47 | 81 |
| | iddle name) | (Last name) | | | | |
| of 11 South Willow Street | Kontola (Present | The second secon | N. J. | | | |
| present herewith my (Check applicable l | pox) | | | | | |
| Order to Report for Armed For Physical Examination (SSS For | | O (S | rder to Repo SS Form 252 | rt for Ind | luction | |
| issued by Local Board Number | , | Minneapolis, | Minnesota or town and State | 55lot | 45 | |
| directing that I report on love (Da | 20, 1967 and | hereby request t | ransfer to y | our local | board | to report |
| on a date to be set by you. The re | ason I am absent | from my own l | ocal board a | rea is: | | |
| living and a | orking in this | area. | | | · · · | |
| | | Dan | Signature of | O To | rom | soy |
| Pé | art 2.—APPROVAL | OR DISAPPROVA | /L | | | |
| | | | Date_M | venter. | 1 | _, 19. 67 |
| LOCAL BOARD NO. 12 FOR NEW JERSEY 427 BLOOMFIELD AVENUE MONTCLAIR, NEW JERSEY 0704 | this loca | t for transfer is all board of the of transfer is originally order | date and place disapprove | ce to rep d. You | ort. are di | |
| (Stamp of Local Board of Transfer) | | Mary | dember or clerk, lo | dal board of t | ransfer) | |
| | Part 3.—TRAN | SFER ACTION | - 1 | | | 10 |
| | Registrant Status | is transferred. WAS WA "non-volunteer," "volun | S NOT prev | viously ex | | |
| (Stamp of Local Board of Origin) | | <u>(N</u> | fember or clerk, loc | cal board of o | rigin) | |
| | Part 4.—DIS | SPOSITION | D | ate | | , 19 |
| | ☐ Foun | d qualified; cted into | Found not | | l; | Check one |
| | | forms are attac | hed. | | | |
| (Stamp of Local Board of Transfer) | | (M | ember or clerk, loca | al board of tra | ansfer) | 1.00 |

| 74 LAST NAME - FIRST NAME - MIDDLE NAME | STATEMENT OF ACCEPTABILITY OF ACCEPTABIL | |
|---|--|-------------------|
| THOMSON DAVID B. | 856 PRESI APT 6 | DENT S T BKLYN NY |
| 21 50 47 81 430 NEW | | ₽ P |
| LATIONS GOVERNING ACCEPTANCE C | FOR INDUCTION INTO THE ARMED FORCES. PTABLE FOR INDUCTION UNDER CURRENT S | |
| DATE PLACE AFEES 1 SEP 67 39 WHITEHALL ST., NY NY 10004 | TYPED OR STAMPED NAME AND GRADE OF JOINT EXAMINING AND INDUCTION STATIO JAMES NOT MCPOLAND LTC, Inf | SIGNATURE |
| DD 1 FORM 62 | PREVIOUS EDITIONS OF THIS FORM ARE OBSC | REGISTRANT CO. |