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1. NAME IN FULL Last: TRUMP First: DONALD Middle: JOHN				SELECTIVE SERVICE NUMBER 50 63 46 580			
2. PLACE OF RESIDENCE Street and Number or RFD Route 85-14 Midland Parkway				3. DATE OF BIRTH June 14, 1946			
City, Town, or Village Jamaica		County Queens		State N. Y.		4. PLACE OF BIRTH City: Queens	
						State or Country: N. Y.	
5. MAILING ADDRESS (If different than Item 2) Street and Number or RFD Route same as above				6. DATE OF REGISTRATION June 24, 1964			
City, Town, or Village		County		State		Zip Code	
7. Name and address of person other than a member of your household who will always know your address Mrs. Maryann Desmond 172-70 Highland Ave., Jamaica, N. Y.							
8. Description of Registrant							
COLOR OF EYES blue		COLOR OF HAIR blond		HEIGHT (APPROX.) 6 2ft.in.		WEIGHT (APPROX.) 180	
OTHER OBVIOUS PHYSICAL CHARACTERISTICS THAT WILL AID IN IDENTIFICATION: birthmark on both heels							
Form Approved Budget Bureau No. 33-R099.7				SELECTIVE SERVICE SYSTEM REGISTRATION CARD			

SSS Form No. 1-A (Original) (Revised 5-28-63) (over)

9. OCCUPATION student		10. NATURE OF BUSINESS, SERVICE RENDERED, OR CHIEF PRODUCT	
11. FIRM OR INDIVIDUAL BY WHOM EMPLOYED Fordham University			
12. PLACE OF EMPLOYMENT OR BUSINESS Bronx, N. Y.			
13. Active duty in the Armed Forces of the United States or a cobelligerent nation since Sept. 16, 1940:			
ARMED FORCE OR COUNTRY none	SERVICE NO.	DATE OF ENTRY	DATE OF SEPARATION
14. Present membership in a reserve component of the Armed Forces:			
ARMED FORCE none	SERVICE NO.	DATE OF ENTRY	GRADE
ORGANIZATION	I affirm that I have verified the foregoing answers and that they are true:		
	 (Signature of registrant)		

I certify that the person registered has read or has had read to him his 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:


(Signature of registrar)

Registrar for Local Board: JAMAICA LOCAL BOARD GROUP QUEENS, NY
 (Number) (City or county) (State) ☆ GPO: 1963-689797