B. C. Swinney,
Superintendent of Schools

Board of Education, Lawton, Okla.
L. S. Eckles, President
J. S. Kuntz, Secretary

J. L. Read

Name of Parent (or Guardian) _____ Post Office Lawton

1672

Name of Township or Street Indian Mission Section or St. No. _____

Name of Tribe _____ (If Indian or Freed man, give name of tribe)

Name of child	COLOR	SEX	DATE OF BIRTH: MONTH	DAY	YEAR	AGE	DEAF-DUMB-BLIND (See note below)
John L. Read Jr.	W	M	Aug	26	1921	6	

NOTE: Deaf, dumb, blind, feeble minded, or crippled children should be indicated in the last column.

I hereby declare under oath that the above is a true and correct statement of the facts given; that I am a legal resident of the above School District and the names and ages of all persons of school age are correct as written above.

J. L. Read
PARENT OR GUARDIAN

Subscribed and sworn to before me this the 1 day of Feby, 192 3.

J. S. Kuntz
ENUMERATOR