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DOCUMENT REQUEST FORM

Case No. \_\_\_\_\_ Requester: TH Date Recd \_\_\_\_\_

True Name: [Gerrillo Amario Rodriguez] 63 / Relationship \_\_\_\_\_

Alias (including middle name): [Redacted] 67

Address to be searched: Harvard, D.C.

States or cities with which Subject is familiar: \_\_\_\_\_

Height: 5'00" Weight: 150 Hair: Black Eyes: Brown Blood Type: \_\_\_\_\_

Wears Glasses: Yes Married: Yes Occupation: \_\_\_\_\_

Born: 01 January 1920 (C) Place: San Juan, P.R.

DATA FOR BIRTH CERTIFICATE, AS OF TIME OF BIRTH

Father's name: Jose R. [Redacted] Mother's name: [Redacted]  
 (as of time of birth) (as of time of birth)  
 POB: Puerto Rico POB: Puerto Rico

Year of birth: 5 April 1900 Year of birth: 13 June 1910

Occupation: [Redacted] Occupation: [Redacted]  
 (as of time of birth) (as of time of birth)  
 Residence: [Redacted] Doctor's name: \_\_\_\_\_  
 (name of residence)

Number of children born to parents prior to this time: 0

Specify state or country where documentation will be used: U.S. and Latin America

Documentation required: Birth record or Driver's license 3.0/h getting this  
Social Security Card  
Birth Certificate

Security clearance: \_\_\_\_\_

Signature (print in blue): \_\_\_\_\_

