

Case No.: _____ Requestor: _____ Date Due: _____

True Name: Joseph Stephen Piccolo Extension: _____

Alias (including middle name): (Joseph P. Paalota) 07

Address to be used: D. C. area

Height: 5'11" Weight: 195 Hair: Brown Eyes: Brown

Wears glasses? No Married? No Occupation: _____

Birth date: 8 December 1935 Place: Yonkers, N. Y.

Countries where documentation will be used: East and S. E. U. S.

DATA FOR BIRTH CERTIFICATE, AS OF TIME OF BIRTH

Father's name: Joseph Mother's maiden name: Irene Sutor

POB: Naples, Italy POB: Yonkers, N. Y.

Age: 58 Age: 53

Occupation: Retired - Restauranter Occupation: Housewife

Residence: Ft. Lauderdale, Fla. Doctor's name: Dr. Cosbone

Number of children born to parents prior to this birth: None

Documentation requested: (Social Security Card) 31

Auto Ins. Card

10 (D. C.) drivers license (non-backstopped)

Usual pocket litter

Security clearance: _____

Signature sample in alias: _____

~~SECRET~~

IDENTITY SHEET

IDEN

Joseph S. PICCOLO

~~SECRET~~

~~SECRET~~