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SECTION VIII CONTINUED FROM PAGE 4 ARE YOU NOW OR HAVE YOU EVER BEEN A LICENSED OR CERTIFIED MEMBER OF ANY TRADE OR PROFESSION, SUCH AS PILOT, ELECTRICIAN, RADIO OPERATOR, TEACHER, LAWYER, CPA, MEDICAL TECHNICIAN, ETC.? **X**YES **NO** 5. IF YOU HAVE ANSWERED "YES" TO ABOVE, INDICATE KIND OF LICENSE AND STATE ISSUING LICENSE (Provide License Registry Number, if known). Student Pilot Certificate Nº 5-293957 6. FIRST LICENSE OR CERTIFICATE (Year of Issue) 7. LATEST LICENSE OR CERTIFICATE (Year of Issue) 2-18-54 N.A. 8. LIST ANY SIGNIFICANT PUBLISHED MATERIALS OF WHICH YOU ARE THE AUTHOR (Do NOT submit copies unless requested). INDICATE THE TITLE, PUBLICATION DATE, AND TYPE OF WRITING (Non-Fiction or Scientific articles, General Interest subjects, Novels, Short Stories, Etc.). N.A. 9. INDICATE ANY DEVICES WHICH YOU HAVE INVENTED AND STATE WHETHER OR NOT THEY ARE PATENTED. N.A. 10. LIST PUBLIC SPEAKING AND PUBLIC RELATIONS EXPERIENCE. IN COLLEGE AND AS A JUNIOR EXECUTIVE IN FOREIGN TRADE 11. LIST ANY PROFESSIONAL, ACADEMIC OR HONORARY ASSOCIATIONS OR SOCIETIES IN WHICH YOU ARE NOW OR WERE FORMERLY A MEMBER, LIST ACADEMIC HONORS YOU HAVE RECEIVED. Phi Signa Iota, National House Society of Romanne Languages. American Association of Teachers of Spanish and Portuguese. GRAduate Scholanships offered by the State of Louisiana and Tulans University. (UNDER WHICH I DID FIVE YEARS OF GRADUATE WORK) HONORARY MENTIONS AND MEDALS. SECTION IX EMPLOYMENT HISTORY NOTE: (LIST LAST POSITION FIRST.) Indicate chronological history of employment for past 15 years. Account for all periods including casual employment and all periods of unemployment. Give address and state what you did during periods of unemployment. List all civilian employment by a foreign Government, regardless of dates. In completing item 9, "Description of Duties" consider your experience carefully and provide meaningful, objective statements. 1. INCLUSIVE DATES (From and To - By Mo. and Yr.) 2. NAME OF EMPLOYING FIRM OR AGENCY (CENTURY ELECTRIC COMPANY **WPR:** 1954 - Oct. 1960 3. ADDRESS (No., Street, City, State, Country) 1806 PINE ST., ST. LOUIS, MO., USA. S. NAME OF SUPERVISOR ARNESTON. RODRIGUEZ, Dis G.M. 4. KIND OF BUSINESS MR. Charles C. White, Expet MARAGER. 4 7. SALARY OR EARNINGS 8. CLASS. GRADE (II Foderal Service) MANUFACTURER OF MOTORS, GENERATORS, STE. 6. TITLE OF JOB Assitent DISTRICT MANAGER \$ 1,000 PER MATH (MD) DESCRIPTION OF DUTIES TO PROMOTE AND SERVICE THE SALE OF CENTURY MOTORS, GENERATORS COLLECTIONS AND RELATED EQUIPMENT IN THE TERRITORY OF CUBA, AND TO COOPERATE IN COLLECTIONS WHEN NECESARY. TO MANAGE THE HAVANA INSTRICT SALES AFACE IN FULL RESAMSABILITY IN THE ABSENCE OF THE DATACT MAGE. TO LOOK AFTER THE ANTEREST OF CENTURY ELEC. CO. IN CUBA 10. REASONS FOR LEAVING PRESENT CONDITIONS IN CLEAR AND ACCEPTANCE ASSIGNMENTS AS PRINCIPAL AGENT IN CUBA FOR C. I.A. SECTION IX CONTINUED TO PAGE 6

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ST. CUBALES ST. NEW ORLEANS LA. H.S.B.         NOD OF NUMBER 1000000000000000000000000000000000000	- FRB. 1950 - MARCH 1954	TULANE UNIVERSITY
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10. REASONS FOR LEAVING       TD       ACCEPT       RBOVE       FOSITION       AND       PURSUE         AN ABVANCED DEGREE       1. INCLUSIVE DATES (From and To - By Mo. and Yr.)       2. NAME OF EMPLOYING FIRM OR AGENCY         JAN:       (14)       TULANE       UNIVERSITY       MEDICAL SCHOOL         ANDRESS (No., Street, City, State, Country)       2. NAME OF SUPERVISOR       3. NAME OF SUPERVISOR         MEDICAL       SCHOOL       3. NAME OF SUPERVISOR       4. CLASS. GRADE (II Foderal Service)         N. KINO OF DUSINESS       .       S. SALARY OR EARNINGS       4. CLASS. GRADE (II Foderal Service)         N. TILLE OF JOB       7. SALARY OR EARNINGS       4. CLASS. GRADE (II Foderal Service)         MEDICAL       SCHUCH       9. SOLOR       9. CLASS. GRADE (II Foderal Service)         N. TOLE OF JOB       7. SALARY OR EARNINGS       4. CLASS. GRADE (II Foderal Service)         MEDICAL       SCHUCH       9. SOLOR       9. CLASS. GRADE (II Foderal Service)         N. TOLES       N. CHARGE OF SPECTROPHO TOME TRIC ANALYSIS IN THE CALDIO-         MASCULAR       RESEARCH       LABOR RESCHARTORY         10. REASONS FOR LEAVING       CONCLUSION OF RESCEARCH       1. NAME OF EMPLOYING FIRM OR AGENCY         3. ADDRESS (No., Street, City, State, Country)       2. NAME OF SUPERVISOR       1. SALARY OR EARNINGS       1.	1'AOFESSOR	\$ 3.00 PER ha. (4))
JAN. 1949 - JUNE 1949       TULANE UNIVERSITY MEDICAL SCHOOL         S. ADDRESS (No., Street, City, State, Country)       (TULANE AVE., NEW ORLEANS, LA. U.S.A.         MEDICAL SCHOOL       S. NAME OF SUPERVISOR         MEDICAL SCHOOL       (D.R. WOO         8. TITLE OF JOB       S. ALARY OR EARNINGS         MCALCAR RESEARCH LABORATORY.       \$ 200.00         IV. CHARGE OF SPECTROPHO TOME TRIC ANALYSIS IN THE CARDIO -         VASCULAR RESEARCH LABORATORY.         IV. REASONS FOR LEAVING         IV. INCLUSIVE DATES (From and To - By Mo. and Yr.)         S. ADDRESS (No., Street, City, State, Country)         A. KIND OF BUSINESS         S. TITLE OF JOB         IV. REASONS FOR LEAVING         S. TITLE OF JOB		2. NAME OF EMPLOYING FIRM OR AGENCY
B. ADDRESS (No., Street, City, State, Country)         THL ANE AVE., NEW ORLEANS, LA. U.S.A.         MEDICAL SCHOOL         S. NAME OF SUPERVISOR         MEDICAL SCHOOL         O. TITLE OF JOB         Medical Research Technidian         S. DESCRIPTION OF DUTIES         M. CHARGE OF SPECTROPHO TOME TRIC AWALYSIS IN THE CALDIO -         VASCULAR RESEARCH LABORATORY.         10. REASONS FOR LEAVING         CONCLUSION OF RESEARCH         I. INCLUSIVE DATES (From and To - By Mo. and Yr.)         2. NAME OF SUPERVISOR         A. KIND OF BUSINESS         S. ADDRESS (No., Street, City, State, Country)         A. KIND OF BUSINESS         S. TITLE OF JOB         TITLE OF JOB         TITLE OF JOB         TITLE OF JOB         T. TITLE OF JOB         T. SALARY OR EARNINGS         S. NAME OF SUPERVISOR         S. NAME OF SUPERVISOR         S. NAME OF SUPERVISOR		
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8. ADDRESS (No., Street, City, State, Country) 4. KIND OF BUSINESS 5. NAME OF SUPERVISOR 5. NAME OF SUPERVISOR	VASCULAR RESEARCH LABORATORY.	
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•	SECTION I	IX CONTINUED	FROM PAGE 6		
	S. DESCRIPTION OF DUTIES		•		
5					
5	10. REASONS FOR LEAVING			·	
	1. INCLUSIVE DATES (From and To - By Mo. and Yr.)	2. NAME O	F EMPLOYING FIRM OR	AGENCY	
	3. ADDRESS (No., Street, City, State, Country)			·	
	4. KIND OF BUSINESS	5. NAME O	SUPERVISOR		
	6. TITLE OF JOB	7. SA	LARY OR EARNINGS	8. CLASS. GRADE (If Federal	
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	9. DESCRIPTION OF DUTIES				
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7		\$	PER	Service)	
•	9. DESCRIPTION OF DUTIES				
		-			
	10. REASONS FOR LEAVING				
6	I F PRIOR SERVICE WITH THE FEDERAL GOVERNMEI NUMBER OF YEARS CREDITABLE TOWARD U.S. CIVI	NT IS NOTED ABO	VE, INDICATE THE		-1
¥	HAVE YOU EVER BEEN DISCHARGED OR ASKED TO I HAVE YOU LEFT A POSITION UNDER CIRCUMSTANC		L.		
	IF YOUR ANSWER TO EITHER OR BOTH QUESTIONS				1
		• 2			
	•			1	
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	4 - 14 - <sub>14</sub>				
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	4 4 4 <b>-</b>				

<u> </u>					- 8 -				
SECTION X				. MILI	TARY SER	VICE			
					ENT DRAFT	STATUS			
1. ARE YOU REGIS THE UNIVERSA SERVICE ACT	L MILITARY	TRAININ	AFT UNDER G AND	YES NO	2. SELEC		CE CLASSIF		- 45- 28- 53
4. IF DEFERRED,	GIVE REAS	DN		<b>ب</b>	5. LOCAL			DESIGNAT	ION AND ADDRESS
DIABETE	S MELL	LITUS			Nº 45	ORlean 1	PARISH NO	ew Oxleu	us, ha.
					ARY SERVI	CE RECORD	)		
	·	<b>1</b>	CURRENT	AND/OR P	AST ORGAN	· · · · · · · · · · · · · · · · · · ·	1		· · · · · · · · · · · · · · · · · · ·
CHECK (X) AS	ARMY	NAVY	MARINE CORPS	AIR FORCE	COAST GUARD	MERCHANT	NATIONAL GUARD	AIR NAT'L GUARD	FOREIGN ORGAN. OR MIL. SERVICE (Specify):
HAVE SERVED+			4	<u> </u>					
NOW SERVING		A	L						
2. BRANCH OR CO	RPS OF AB		KED ORGA	NIZATION(S)	ł	/			
3. DATE SEPARAT	ED FROM E	XTENDED	ACTIVE D	JTY/(Past se	ervice) 4. T	OTAL LENG	THOFEXT	ENDED AC	TIVE DUTY IN U.S. ARMED
5. DATE ENTERES ACTIVE DUTY		ERVICE	CURRE	ENT SERVIC		TAL LENG	TH OF ACT	IVE DUTY I	N FOREIGN MILITARY OR-
7. RANK, GRADE ( RATE	DR PAST S	ERVCE	CURRE	ENT SERVIC		RVICE, SEF	RIAL OR FIL	ENUMBER	(If now serving, provide cur-
9. PRIMARY MILIT	ARY OCCUP	ATIONAL	PAST	SERVICE	/	/		ENT SERVI	CE
10. SECONDARY M	IL. OCCUPA			SERVICE		/	CURR	ENT SERVI	CE
SPECIALTY (M TITLE 11. BRIEF DESCRI				ionte whethe		<u> </u>	•		
II. BRIEF DESCRI	FIION OF #			icate whethe	rappiicable	io pasi pr c	urent servic	(a)	
	/		11		1				
			ιį						
						•			• .
			2. CHECK (	X) TYPE OF	SEPARAT	ON FROM A	CTIVE DUT	Y	
HONORABLE				NT FOR SEF		<u> </u>	UND	JE HARDSH	IPS
RELEASE TO		UTY		NT FOR CO			нто	ER:	
RETIREMENT	FOR AGE			NT FOR/PH	¥				
REGULAR	LOFFERN	- (Includia		CK (X) COMF		· · · · · · · · · · · · · · · · · · ·	· · · · · · · · · · · · · · · · · · ·		
REGOLAR	RESERVE			ESERVE, N				ER (Includin	g AUS)
1. DO YOU NOW HA	VEL L								
RESERVE STAT		ES 2.	NAT'L. GR	IOW A MEMB	AT'L.	YES		E ROTCI	A MEMBER OF YES
			GRD.7	TENS 1 2	09 3 480		COMPONE	T MEMBER	SHIP BELOW
	ARINE CORP	T	TIONALGU		OAST GUAR		VY ROTC		
╺╾╸╉╶╍╴┈┽╍╍╴╴╁╴╴	IR FORCE	• <u>+</u>	NAT'L.GU		RMY ROTC	- <del> }</del>	FORCE RO	BER	TE ROTC CATEGORY NUM-
5. CURRENT RANK	_	R 6.	DATE OF A	<u> </u>		ENT 7./EX	PIRATION		URRENT RESERVE OBLIGA-
RATE B. CHECK (X) CUR	DENT DESE		RANK		RESERVE		Y(Active)	STANDO	(Inactive) RETIRED
9. PRIMARY MILIT	ARY OCCUP			- +/ -= + -	10. SE		WLITARY O		NAL SPECIALTY (Mos or Des-
1. BRIEF DESCRI	PTION OF M	ILITARY F	RESERVE DI		/		ļ		<u> </u>
				/ Y	/	/ /			
				' A	1	1	•		
				1	V	•			
12. ARE YOU CURE TO A RESERVE				I		HAVE ANS	WERED YE	S" TO ITEM	12, GIVE UNIT OR AGENCY
ING UNIT	ILITARY MO	BILIZATI	DN ASSIGN-	X NO YES	15. IF YOU AND A	HAVE ANS	WERED YE	S TO ITEM	14, GIVE UNIT OR AGENCY
16. INDICATE TOT FOR LONGEVI		Y SERVICE		MONTHS	<u> </u>		SERVICE F	LECORDS KI	EPT1
ING ACTIVE AI				NA.	<u></u>	- •	·	•	
•		(	1				(		
			• :-				·-• ·	:	

SECTION XI	AL STATUS
1. ARE YOU ENTIRELY DEPENDENT ON YOUR SALARY?	
2. IF YOUR ANSWER IS "NO" TO THE ABOVE, STATE SOURCES OF	OTHER INCOME
	N.A.
3. BANKING INSTITUTIONS WI	TH WHICH YOU HAVE ACCOUNTS
NAME OF INSTITUTION	ADDRESS (City, State, Country)
Whitney Nat. Bank of New Geleans	New Calennes, LA. U.S.A.
The Aupport BANK of MiAMi	MiAMI, FLA. U.S.A.
The ROYAL BANK OF CANADA	HAVANA, CUBA.
4. HAVE YOU EVER BEEN IN, OR PETITIONED FOR, BANKRUPTC	
5. IF YOUR ANSWER IS "YES" TO THE ABOVE, GIVE PARTICULAR	RS, INCLUDING COURT AND DATE(S)
N·A.	-
	RENCES IN THE UNITED STATES
NAME	ADDRESS (No., Street, City, State)
Whitney NAT. BANK of New ORleans	New ORleans, LA. U.S.A.
HOLMES Ltd. (Department Store)	New Calcans, LA. 4.S.A.
Marca Blanks Brock LEEL	No Pol uso
MAISON BLANCHE (Department Store)	NEW VR Lans, LA. U.J.H.
7. DO YOU RECEIVE AN ANNUITY FROM THE UNITED STATES OR ACT, PENSION, OR COMPENSATION FOR MILITARY OR NAVAL S	DISTRICT OF COLUMBIA GOVERNMENT UNDER ANY RETIREMENT
8. IF YOUR ANSWER IS "YES" TO THE ABOVE QUESTION, GIVE CO	DMPLETE DETAILS
	N.A.
9. DO YOU HAVE ANY FINANCIAL INTEREST IN, OR OFFICIAL CO OR WITH U.S. CORPORATIONS OR BUSINESSES HAVING SUBSTAN	NNECTIONS WITH NON-U.S. CORPORATIONS OR BUSINESSES; OR IN
YES NO (Il answer "YES", fumich detail	
SECTION XII MARITA	AL STATUS
1. PRESENT STATUS (Single, Married, Widowed, Separated, Diverced,	
2. STATE DATE, PLACE, AND REASON FOR ALL SEPARATIONS, D	
	N.A.
WIFE, HUSBANDIf you have been married more than onceOR FIANCE:husband giving data required below for ainformation for fiance.	- including annulments - use a separate sheet for former wife or 11 previous marriages. If marriage contemplated, fill in appropria
8. NAME (First) (Middlo)	(Maidon) (Laat)
PAULINE JUANITA	ROSS RODRIGUEZ
POLLA (NIGUNDANE SINAE CITI (1007) (Where and	E CIRCUMSTANCES (Including length of time) UNDER WHICH ANY E NAMES WERE USED. IF LEGAL CHANGE GIVE PARTICULARS I by whet authority). USE EXTRA SPACE PROVIDED ON PAGE 18 Form to record this information.
5. DATE OF MARRIAGE 6. PLACE OF MARRIAGE (City, St	
JUNE 10, 1948 New ORleans 7. HIS (OR HER) ADDRESS BEFORE MARRIAGE (No., Stroot, City, St.	LA. U.S.A.
300 OAKUM ST. EDENTON N B. LIVING 9: DATE OF DEATH	· C., 4. S. A.
8. LIVING 9. DATE OF DEATH VES NO N.A.	10. CAUSE OF DEATH N.A.
11. CURRENT ADDRESS (Give last address, if deceased)	
9361 S.W. 178 St. PERRINE ST. 12. DATE OF BIRTH 13. PLACE OF BIRTH (City, State)	7. FLA. U.S. R.
JAN. 2, 1923 JAN. 2, 1923 BOGALUSA, LA	

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	· SECTION	V XII CON	TINUED FR	OM PAGE 9		
4. IF BORN OUTSIDE U.S. DATE OF			E OF ENTRY			
N.A.				N. A		
6. FORMER CITIZENSHIPISH ZCountry N.A.	(ios)7	ACQU	NRED N.	A.	N. 1	• <u>•</u>
9. OCCUPATION		20. PRES unemp	ENT EMPLOY loyed give las	'ER (Also give int two employers	former employe a)	r, or if apouse deceased or
HOUSE WIFE				N.A.		
1. EMPLOYER'S OR BUSINESS ADDRESS	S (No., Street, (		, Country) A .			
22. DATES OF MILITARY SERVICE (From	n and to - By Mo	o. and Yr.)	<u></u>			
LE. DRIES OF MELTING		K.A.				
	·A .			RY WITH WHIC	N.A.	ERVICE AFFILIATED
25. DETAILS OF OTHER GOVERNMENT	SERVICE, U.S.	OR FORE	eign N. A	<del>7</del> .		
			OTHER DEP			
SECTION XIII	ATION FOR AL	LL CHILD	REN AND DEF	PENDENTS		
NAME	RELATIONS	HIP DA		CE OF BIRTH	CITIZENSH	IIP ADDRESS
EMILIO AMERICO RODRIGUEZ J.R.)	SON	SEP	T. 18, 1951), N	euORleans, LA	4. s. A	. 9361 SW. (78 ST PERINE ST, F
	SON		RCH [, 1953].N	Ian Oplacus L	o. U. S-A	+361 SW. 1785
JOSEPH ROSS RODRIGUEZ	1					9361 SW. 178 4
PATTI MICHELLE RODRIGUEZ	JAUG THE	<u>r</u> oci	<u>1.23,1754, 1</u>	HAVANA CubA	<u> </u>	PERRINE ST, 1 9361 SW. 178
PAUL MARSHALL RODRIGUEZ	SON	NOV	1,1957 H	AVANA Cuba	4. S. A	PERRINE ST,
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18. 1	DATES OF MILITARY	SERVICE (From-and-To	o)	19 BRANCH O	FSERVIC	CE		20. CO	UNTRY	
1		N. A. GOVERNMENT SERVIC		ł	. N	· A.			N.A	
21. 1	DETAILS OF OTHER	GOVERNMENT SERVIC	E, U.S.	OR FOREAGN	10	au) acusa		· NEI	3 Mar	0
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	Constant Office		MLD	WAR T.	•					
SEC	TION XVI BR	OTHERS AND SISTE	RS (Inc	cluding Half-, St	ep- and A	Adopted Brothers an	nd Sis	ters)		
10.	FULL NAME (Last-F	iret-Middle)			RELAT				SHIP (Co	
1,6	PODRICIES	Adverse -					10.		anir (Co	
	A-MOUCE,	HKNESTO JO	1320	· }			1.		•	
4.	CURRENT ADDRESS	ARNESTO Ja (No., Street, City, Zan	o, State,	Country)	BROT	HER		<u><u> </u></u>	<u>s</u> .	<b>-</b>
4.	CURRENT ADDRESS	(No., Street, City, Zon	o, State,	Country)	BROT	HER		Ц.,	<u>s</u> .	<b>-</b>
	CURRENT ADDRESS	Rd., META	o, State,	Country)	<u>ВЛОТ</u> . s. A .	HER	X	U., 8. LIV YES	5. ING NO	6
	CURRENT ADDRESS	Rd., META	o, State,	Country)	BROT	HER	X	U., 8. LIV YES	5. ING	6
2	CURRENT ADDRESS 2/2 MAPLE FULL NAME (Last-F	Rd., META	IRE	, Country) , , , , , , , , , , , , , , , , , , ,	<u>ВЛОТ</u> . s. A .	HER	X	U 8. LIV YES CITIZEN	S. ING NO SHIP (Cor	-6 Ints
2	CURRENT ADDRESS 2/2 MAPLE FULL NAME (Last-F	(No., Street, City, Zan Rd., META First-Middle)	IRE	, Country) , , , , , , , , , , , , , , , , , , ,	<u>ВЛОТ</u> . s. A .	HER	X	U 5. LIV YES CITIZEN: 5. LIVI	5. ING NO SHIP (Cor	-6 nts
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2 1 1	CURRENT ADDRESS 2/2 MAPLE FULL NAME (Last-F CURRENT ADDRESS	(No., Street, City, Zan R.A., META First-Middle) (No., Street, City, Zan	IRE	Country)	<u>ВЛОТ</u> . s. A .	UNSHIP	3. 0	U 5. LIV YES CITIZEN: 5. LIV YES	5. ING NO SHIP (Cor	-6 
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4. 1. 2 4.	CURRENT ADDRESS 2/2 MAPLE FULL NAME (Last-F CURRENT ADDRESS FULL NAME (Last-F	(No., Street, City, Zan R.A., META First-Middle) (No., Street, City, Zan	e, State,	, Country) , L.A. U , 2 Country) 2	BAO T . S. A . . RELAT	UNSHIP	3. 0	U., S. LIV YES CITIZEN: S. LIV VES CITIZEN: S. LIV	S. ING SHIP (Con SHIP (Con SHIP (Con SHIP (Con	6 ntr
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	CURRENT ADDRESS Q/2 MAPLE FULL NAME (Last-F CURRENT ADDRESS FULL NAME (Last-F CURRENT ADDRESS	(No., Street, City, Zan R. A. , META First-Middle) (No., Street, City, Zan irst-Middle) (No., Street, City, Zan	e, State,	, Country)	BAO T . S. A . . RELAT	- <i>HER</i>	3. (	U 8. LIV YES CITIZEN: 5. LIV YES 8. LIV YES	S. ING SHIP (Con SHIP (Con SHIP (Con SHIP (Con	6 ntr
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F	ECTION XVII		FATHER-IN-LAW			
10	FULL NAME (Last-First-Middle)		2. LIVING	8. DATE OF DEATH	4. CAUSE OF D	
1	STATE OTHER NAMES HE HAS USED	FORD	YES NO	JUNE 30, 1958	HEART AT	TACK
5	STATE OTHER NAMES HE HAS USED	)	INDICATE CIRCUMSTAN	CES (Including length of tim ES. IF LEGAL CHANGE, (	•) UNDER WHICH H	E HAS
	SAM (NIKNAME SINCE CH		and by what authority). U	SE EXTRA SPACE PROVID		
		( Q,000 P + 000 P )	FORM TO RECORD THIS	INFORMATION.		
6	CURRENT OR LAST ADDRESS (No., S	Street, City, Sta	te, Country)			
_	Route 2, Box 500	, EDE	NTON, N.C.)	4.S.A.		
7	DATE OF BIRTH 8. F	LACE OF BIR	TH (City, State, Country)		9. CITIZENSHI	
-	Route 2, Box 500 DATE OF BIRTH 8. F TULY 2, 1893 IF BORN OUTSIDE U.S DATE OF E	MOB	ILE, ALABAN	(A, U.S.A.	U.S.A	·
0	IF BORN OUTSIDE U.S DATE OF E					
_	FORMER CITIZENSHIP(S) [Country(	9	DATE U.S. CITIZENSHIP	N.A.		
2	FORMER CITIZENSHIP(S) [Country(	ioa) <sup>7</sup> 13.	DATE U.S. CITIZENSHIP	14. WHERE ACQUIRED	) (City, State, Count	ry)
	N.A.		" ' ' ' ' '	1 10.11.		
5	OCCUPATION		TEMPLOYER (Give last em			
	SAWYER	K. P. Z	BAER AND Co	, EDENTON,	<u>, N.C. , L</u>	1.S.R.
-	CTION XVIII		MOTHER-IN-LAW			
	FULL HAME (Last-First-Middle)		2. LIVING	3. DATE OF DEATH		
	BONTA, PATTI JU		YES NO	N.A.	N.A	•
5	STATE OTHER NAMES SHE HAS USE	D		ES (Including length of time		
	N.A.			ES. IF LEGAL CHANGE, G De extra space provid		
_			FORM TO RECORD THIS			
	CURRENT OR LAST ADDRESS (No.,					
	Route 2, Box 500 DATE OF BIRTH 8. 1	EDE	NTON, N.C.	4. SA.		
ĩ	DATE OF BIRTH 8. I	PLACE OF BIR	TH (City, State, Country)		9. CITIZENSHIP	
į	Dec. 21, 1899	LAURE	L. Miss. 4.	s. A.	U.S. A.	
	N.A.			N.A.		
ē.	NA .	es)7 13. D	ATE U.S. CITIZENSHIP	14. WHERE ACQUIRED (	City, State, Country)	)
	hI. A	^	COURED NA.		<i>і</i> .А.	
5	OCCUPATION	16. PRESENT	TEMPLOYER (Give last em	oloyer, if Mother-in-Law is a	eceased or unemploy	yed)
-	HOUSEWIFE	1	N. A.			
Ē	CTION XIX RELATIVE	S BY BLOOD,	MARRIAGE OR ADOPTIC IZENS OR (3) WORK FO	N WHO EITHER (1) LIV	E ABROAD,	
-	(2) AKE 1. FULL NAME (Lest-First-Middle)	RUI U.S. CII	ILENS OR (S) WORK FU	2. RELATIONSHIP		13 405
,	LOPEZ ELEN	Ň				3. AGE
	4. ADDRESS OR COUNTRY IN WHICH	T DELATIVE DES		SISTER IN LA	· w	<u> </u>
				BERLITZ SCA	INDI OF LAN	GUARES
	6. CITIZENSHIP (COUNTRY)		CH. U. J. H.	and the second	and the second	
	MEXICAN	1 .	E VEARLY	1	UNE 196	
		- UNCI	- <u>y c 17 k c y</u>		un 1/6	
	1. FULL NAME (Last-First-Middle)	-		2. RELATIONSHIP		3. AGE
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	4. ADDRESS OR COUNTRY IN WHICH	RELATIVE RES	1063	5. EMPLOYED BY	-	
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		7. FREQUENC	·	8. DATE C	DF LAST CONTACT	
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- 12 -

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6. SPECIAL REMARKS, IF ANY, CONCERNI		INUED FROM PAGE 12		<del></del>
Above relative has been a				
	Continuous yes	sident in the U.S.	A. Since	o 1845 in New
Celeuns, LA.				
RELATIVES		OR ADOPTION WHO ARE I		
SECTION XX	SERVICE	OF THE UNITED STATES		
1. NAME (Last-First-Middle)		2. RELATIONSHIP	3. AGE	4. CITIZENSHIP
1 ROSS, JOSEPH ALB 5. ADDRESS (No., Street, City, State, Course	ERT	6. TYPE AND LOCATIO	40	<u>U. s.</u> A.
		MAALUE DUAM	AND PHOT	GRAPHER INSTRUCT
Route 2, Box 5954 1. NAME (Last-First-Middle)	T, TEUSACOLA, FLA, U.	2. RELATIONSHIP	<u>N AVAL</u> 3. AGE	AIR STATION 4. CITIZENSHIP
2 5. ADDRESS (No., Street, City, State, Com	ntry)	6. TYPE AND LOCATIO	N OF SERVIC	CE (If known)
1. NAME (Lest-First-Middle)		2 051 47101161115	12 405	A. CITIZENSWO
I. NAME (Last-First-Middle)		2. RELATIONSHIP	3. AGE	4. CITIZENSHIP
S. ADDRESS (No., Street, City, State, Com	ntry)	6. TYPE AND LOCATIO	N OF SERVIC	E (If known)
SECTION XXI REF	ERENCES, ACQUAINT	ANCES, AND NEIGHBO	DRS	
1. LIST FIVE CHARACTER R	EFERENCES, NOT REL	ATIVES, IN THE U.S., WHO	D KNOW YOU	INTIMATELY
NAME (Last-First-Middle)	1	ESS ADDRESS t, City and State)		RESIDENCE ADDRESS
(200)-1 1/01-W/UUTC)		S. A.		
A.C. White		TON , D.C.	10125	MARKHAM ST. R SPRING , Md.
		S. N.		ARDEN WAY
J.S. MENEELV	USS SARATOGI	A FPO N.Y. NY. (CUA	DACK	SONVILLE, FLA.
		ELLIGENCE		RAWER K
P.M. ARTHUR		NK		MADOR CANAL ZO
DOROTHY MANESS JONES	House		2104	), PRESIdent, Apt. 4
DURUTHY MANESS DUNES		NK. SERVICES N.Y.	1	IWOOD, Miss. Box 285
C. A. ZEHNJER		NIC.		BLUFF, ARKANSA
2. LIST FIVE PERSONS, IN THE U.				
NAME		SS ADDRESS		RESIDENCE ADDRESS
(Last-First-Middle)		t, City and State)		o., Street, City and State)
J.W. BARNES		AGR REPRESENTATIV	1.075	8 Colbeat.St.
	EBASCO SERI	NK. VICES, N.V.		Onfeans, LA. PARK Ave.
L.T. WOLF		INK.		ATHMORE, PA.
	CIVIL SE			CAST IG LIONE
J. BRUNO		INK.		· Geleans, ha.
DORDTHY BOETTCHER	Hous	SEWIFE		F PALERMO AVE
proving bruit-iters	6	LANK.		AL GAbles, MIAA
A. TAWATER		11 41//	· · · · · · · · · · · · · · · · · · ·	W. ARKANSAS LA
		RECENT NORMAL RESID		., <b>Box 16, <u>B</u>RLINGTO</b> E U.S.
NAME		SS ADDRESS	1	RESIDENCE ADDRESS
(Last-First-Middle)		City and State)	1	., Street, City and State)
	-	MEDICAL SCHOOL		7 BADAWAY AVE
Dr. C. Pecbles D. White	IVEw Oal		Newa	Paleaus 1P, 4.
	RETIAL		512	WALNAT St. Qaleans, LA.
	CIUTL SE		1.46-	

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unk.

CIUTL SERVICE THLANE UNIVERSITY

D. White C. Mace

SECTION XXII	CLUBS SOC	IETIES, AND OTHER ORGANIZATIONS		
NOTE: List names and addre	sses of all clubs, soci	ieties, professional societies, employee g organization having headquarters or branch	groups or organization	s of any k
belong or have belong				to which
NAME AND CHAF	TER	DATES OF MEMBERSH		
Phi Sigma Iota		TULANE UNIVERSITY	1951 Vink.	Prese Dec.
Phi Sigma Iota American Ass. of Tachers	C Strid & Patra	DE PAUW)UNIVERSITY R Unk.	1952 un K.	
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	RESIDE			
ADDRESS - LAST RESIDENCE FIRST				
FOCSA BLDG. FINCA Emilita	ADDRESS - LAST RESII (Number, Street, City, S	itate, Country)	INCLUSIVE FROM A Oct. 1956 Haven Caba. April	то
2D Newcomb Car	ADDRESS - LAST RESIL (Number, Street, City, S APT. 284, 1 , Klim 12 Cente npus, New C	DENCE FIRST State, Country) 7 V M St., Vedado, HAVANA Cub cal Highway, SAN FRANcisco de Paula, Dalcans, LA, 4.5. A.	FROM A Oct. 1956 Haven Ciba April Augh. 1951	To Jun 1954 - C April
2D Newcomb Cau 570 Walnut SI	ADDRESS - LAST RESIL (Number, Street, City, S APT. 284, 1 , Klm 12 Center apus; New Conter L., New Onle	DENCE FIRST State, Country) 7 V M St. Vedado, HAVANA Cub Kal Highway, SANFAANcisco de Parle,	FROM A Oct. 1956 Human Caka April	To Jun (554 - C Amil Ang
2D Newcomb Cau 510 WAlnut SI 23051/2 Almonasi	ADDRESS - LAST RESIL (Number, Street, City, S APT. 284, 1 , Klim 12 Cente npus; New Cale 	DENCE FIRST State, Country) 7 V M St., Vedado, HAVANA Cub Cal Highway, SANFAANCise o de Parle, Daleins, LA, 4.5.A. ans, LA., U.S.A.	FROM A Oct. 1956 Human Cuba. April Augh. 1951 Jan. 1950	To June (554 - C April Any Jan.
2D Newcomb Cau 510 WAlnut SI 23051/2 Almonasi	ADDRESS - LAST RESIL (Number, Street, City, S APT. 284, 1 , Klim 12 Cente npus; New Cale 	DENCE FIRST State, Country) 7 M St., Vedado, HAVANA Cub cal Highway, SANFAANCISCO de Paula, Daleans, LA, 4.5.A. ans, LA., U.S.A. w Galeans, LA., U.S.A.	FROM A Oct. 1956 Human Cuba April Augh. 1951 Jun. 1950 Cect. 1949	To June (554 - O Amil Any Jan.
2D Newcomb Cau 510 WAlnut SI 23051/2 Almonasi	ADDRESS - LAST RESIL (Number, Street, City, S APT. 284, 1 , Klim 12 Cente npus; New Cale 	DENCE FIRST State, Country) 7 M St., Vedado, HAVANA Cub cal Highway, SANFAANCISCO de Paula, Daleans, LA, 4.5.A. ans, LA., U.S.A. w Galeans, LA., U.S.A.	FROM A Oct. 1956 Human Cuba April Augh. 1951 Jun. 1950 Cect. 1949	To June (554 - O Amil Any Jan.
2D Newcomb Cau 510 WAlnut SI 23051/2 Almonasi	ADDRESS - LAST RESIL (Number, Street, City, S APT. 284, 1 , Klim 12 Cente npus; New Cale 	DENCE FIRST State, Country) 7 M St., Vedado, HAVANA Cub cal Highway, SANFAANCISCO de Paula, Daleans, LA, 4.5.A. ans, LA., U.S.A. w Galeans, LA., U.S.A.	FROM A Oct. 1956 Human Cuba April Augh. 1951 Jun. 1950 Cect. 1949	To June (554- O Amil Any Jan.
2D Newcomb Cau 510 WAlnut SI 23051/2 Almonasi	ADDRESS - LAST RESIL (Number, Street, City, S APT. 284, 1 , Klim 12 Cente npus; New Cale 	DENCE FIRST State, Country) 7 M St., Vedado, HAVANA Cub cal Highway, SANFAANCISCO de Paula, Daleans, LA, 4.5.A. ans, LA., U.S.A. w Galeans, LA., U.S.A.	FROM A Oct. 1956 Human Cuba April Augh. 1951 Jun. 1950 Cect. 1949	To June (554- O Amil Ang Jan.
2D Newcomb Cau 510 WAlnut SI 23051/2 Almonasi	ADDRESS - LAST RESIL (Number, Street, City, S APT. 284, 1 , Klim 12 Cente npus; New Cale 	DENCE FIRST State, Country) 7 M St., Vedado, HAVANA Cub cal Highway, SANFAANCISCO de Paula, Daleans, LA, 4.5.A. ans, LA., U.S.A. w Galeans, LA., U.S.A.	FROM A Oct. 1956 Human Cuba April Augh. 1951 Jun. 1950 Cect. 1949	To Jun (554 - C April Any Jan.
2D Newcomb Cau 510 WAlnut SI 23051/2 Almonasi	ADDRESS - LAST RESIL (Number, Street, City, S APT. 284, 1 , Klim 12 Cente npus; New Cale 	DENCE FIRST State, Country) 7 M St., Vedado, HAVANA Cub cal Highway, SANFAANCISCO de Paula, Daleans, LA, 4.5.A. ans, LA., U.S.A. w Galeans, LA., U.S.A.	FROM A Oct. 1956 Human Cuba April Augh. 1951 Jun. 1950 Cect. 1949	To June (554 - C April Any Jan.

SECTION XXIV       ADDITIONAL INFORMATION         1. DO YOU ADVOCATE OR HAVE YOU EVER ADVOCATED; OR ARE YOU NOW OR HAVE YOU EVER BEEN A MEMBER OF: OR HAVE YOU EVER SUPPORTED OR BEEN ASSOCIATED WITH ANY POLITICAL PARTY. INDIVIDUAL OR ORGAN- IZATION WHICH ADVOCATES OR TEACHES THE OVERTHROW OF THE GOVERNMENT OF THE UNITED STATES BY PORCE. VIOLENCE OR OTHER UNCONSTITUTIONAL MEANS, OR SEEKS BY FORCE OR VIOLENCE TO DENY PERSONS THEIR HIGHTS UNDER THE CONSTITUTION OF THE UNITED STATES?         2. IF YOU HAVE ANSWERED "YES" TO THE ABOVE QUESTION. EXPLAIN         N.A.         3. DO YOU USE OR HAVE YOU EVER USED INTOXICANTS?         YES       4. IF SO, TO WHAT EXTENT?         NO       6. IF SO, TO WHAT EXTENT?         YES       6. IF SO, TO WHAT EXTENT?         YES       NO         Y
<ol> <li>DO YOU ADVOCATE OR HAVE YOU EVER ADVOCATED: OR ARE YOU NOW OR HAVE YOU EVER BEEN A MEMBER OF: IZATION WHICH ADVOCATES OR TEACHES THE OVERTHROW OF THE GOVERNMENT OF THE UNITED STATES BY FORCE, VIOLENCE OR OTHER UNCONSTITUTION OF THE UNITED STATES?</li> <li>IF YOU HAVE ANSWERED "YES" TO THE ABOVE QUESTION. EXPLAIN</li></ol>
N.A. 3. DO YOU USE OR HAVE YOU EVER USED INTOXICANTS' 5. DO YOU USE OR HAVE YOU EVER USED NARCOTICS' 7. HAVE YOU EVER BEEN A MEMBER OF, OR SUPPORTED, OR HAD ANY CONNECTIONS WITH A FOREIGN INTELLIGENC 1ZATION OR ITS ACTIVITIES' () YES () NO IF ANSWER IS "YES". GIVE COMPLETE DETAILS. <i>U-A.</i> 8. LIST BELOW THE NAMES OF GOVERNMENT DEPARTMENTS, AGENCIES OR OFFICES TO WHICH YOU HAVE APPLIED I PLOYMENT SINCE 1940 C.I.A., STATE DEPARTMENT, PAN AMERICAN UNION, CIVIL SERVIC USIA. 9. IF TO YOUR KNOWLEDGE. ANY OF THE ABOVE HAVE CONDUCTED AN INVESTIGATION OF YOU. INDICATE THE NAME
3. DO YOU USE OR HAVE YOU EVER USED INTOXICANTS? 5. DO YOU USE OR HAVE YOU EVER USED NARCOTICS? 7. HAVE YOU EVER BEEN A MEMBER OF, OR SUPPORTED, OR HAD ANY CONNECTIONS WITH A FOREIGN INTELLIGENCY 12ATION OR ITS ACTIVITIES? 1 YES X NO IF ANSWER IS "YES". GIVE COMPLETE DETAILS. W.A. 8. LIST BELOW THE NAMES OF GOVERNMENT DEPARTMENTS, AGENCIES OR OFFICES TO WHICH YOU HAVE APPLIED IN PLOYMENT SINCE 1940 C.I.A., STATE DEPARTMENT, PAN AMERICAN UNION, CIVIL SERVIC USITA. 9. IF TO YOUR KNOWLEDGE. ANY OF THE ABOVE HAVE CONDUCTED AN INVESTIGATION OF YOU, INDICATE THE NAME
3. DO YOU USE OR HAVE YOU EVER USED INTOXICANTS?  5. DO YOU USE OR HAVE YOU EVER USED NARCOTICS?  7. HAVE YOU EVER BEEN A MEMBER OF, OR SUPPORTED, OR HAD ANY CONNECTIONS WITH A FOREIGN INTELLIGENCY 12ATION OR ITS ACTIVITIES?  9. IS THE NAMES OF GOVERNMENT DEPARTMENTS, AGENCIES OR OFFICES TO WHICH YOU HAVE APPLIED IN 1. A.
3. DO YOU USE OR HAVE YOU EVER USED INTOXICANTS? 5. DO YOU USE OR HAVE YOU EVER USED NARCOTICS? 7. HAVE YOU EVER BEEN A MEMBER OF, OR SUPPORTED, OR HAD ANY CONNECTIONS WITH A FOREIGN INTELLIGENCE IZATION OR ITS ACTIVITIES? 1. HAVE YOU EVER BEEN A MEMBER OF, OR SUPPORTED, OR HAD ANY CONNECTIONS WITH A FOREIGN INTELLIGENCE IZATION OR ITS ACTIVITIES? 1. YES XNO IF ANSWER IS "YES", GIVE COMPLETE DETAILS. N.A. 8. LIST BELOW THE NAMES OF GOVERNMENT DEPARTMENTS, AGENCIES OR OFFICES TO WHICH YOU HAVE APPLIED PLOYMENT SINCE 1940 C.I.A., STATE DEPARTMENT, PAN AMERICAN UNION, CIVIL SERVIC USITA. 9. IF TO YOUR KNOWLEDGE, ANY OF THE ABOVE HAVE CONDUCTED AN INVESTIGATION OF YOU, INDICATE THE NAME
5. DO YOU USE OR HAVE YOU EVER USED NARCOTICS? 7. HAVE YOU EVER BEEN A MEMBER OF, OR SUPPORTED, OR HAD ANY CONNECTIONS WITH A FOREIGN INTELLIGENC IZATION OR ITS ACTIVITIES? PYES NO IF ANSWER IS "YES", GIVE COMPLETE DETAILS. N.A. 8. LIST BELOW THE NAMES OF GOVERNMENT DEPARTMENTS, AGENCIES OR OFFICES TO WHICH YOU HAVE APPLIED PLOYMENT SINCE 1940 C.T.A., STATE DEPARTMENT, PAN AMERICAN UNION, CIVIL SERVE USTA. 9. IF TO YOUR KNOWLEDGE, ANY OF THE ABOVE HAVE CONDUCTED AN INVESTIGATION OF YOU, INDICATE THE NAME
<ul> <li>8. LIST BELOW THE NAMES OF GOVERNMENT DEPARTMENTS, AGENCIES OR OFFICES TO WHICH YOU HAVE APPLIED PLOYMENT SINCE 1940 C.T.A., STATE DEPARTMENT, PAN AMERICAN UNION, CIVIL SERVIUS USTA.</li> <li>9. IF TO YOUR KNOWLEDGE, ANY OF THE ABOVE HAVE CONDUCTED AN INVESTIGATION OF YOU, INDICATE THE NAME</li> </ul>
IZATION OR ITS ACTIVITIES?       Image: Types       Types       Image: Types
N.A. 8. LIST BELOW THE NAMES OF GOVERNMENT DEPARTMENTS, AGENCIES OR OFFICES TO WHICH YOU HAVE APPLIED PLOYMENT SINCE 1940 C.T.A., STATE DEPARTMENT, PAN AMERICAN UNION, CIVIL SERVE USTA. 9. IF TO YOUR KNOWLEDGE, ANY OF THE ABOVE HAVE CONDUCTED AN INVESTIGATION OF YOU, INDICATE THE NAME
B. LIST BELOW THE NAMES OF GOVERNMENT DEPARTMENTS, AGENCIES OR OFFICES TO WHICH YOU HAVE APPLIED PLOYMENT SINCE 1940 C.T.A., STATE DEPARTMENT, PAN AMERICAN UNION, CIVIL SERVI USTA. 9. IF TO YOUR KNOWLEDGE, ANY OF THE ABOVE HAVE CONDUCTED AN INVESTIGATION OF YOU, INDICATE THE NAME
PLOYMENT SINCE 1940 C.I.A., STATE DEPARTMENT, PAN AMERICAN UNION, CIVIL SERVE USIA.
PLOYMENT SINCE 1940 C.I.A., STATE DEPARTMENT, PAN AMERICAN UNION, CIVIL SERVI USIA.
USTA
9. IF TO YOUR KNOWLEDGE, ANY OF THE ABOVE HAVE CONDUCTED AN INVESTIGATION OF YOU, INDICATE THE NAME
9. IF TO YOUR KNOWLEDGE, ANY OF THE ABOVE HAVE CONDUCTED AN INVESTIGATION OF YOU, INDICATE THE NAME
AGENCY AND THE ABBROYINATE DATE OF THE INVESTIGATION
AGENCY AND THE ATTROAMMATE DATE OF THE INVESTIGATION.
UNK.
UNK.
NOTE SPECIAL It your answer is -TES to the following Questions 10, 11 or 12, provide the information requeste
INSTRUCTIONS question on a separate, signed sheet and attach the sheet to this form in a sealed envelope.
<ul> <li>NOTE SPECIAL It your answer is "TES" to the following Questions 10, 11 or 12, provide the information requeste INSTRUCTIONS question on a separate, signed sheet and attach the sheet to this form in a sealed envelope.</li> <li>10. HAVE YOU, OR TO YOUR KNOWLEDGE HAS YOUR SPOUSE, EVER BEEN DETAINED, ARRESTED, INDICTED OR CON- VICTED FOR ANY VIOLATION OF THE LAW OTHER THAN A MINOR TRAFFIC VIOLATION IN THE UNITED STATES OR ABROADT</li> </ul>
INSTRUCTIONS question on a separate, signed sheet and attach the sheet to this form in a sealed envelope. 10. HAVE YOU, OR TO YOUR KNOWLEDGE HAS YOUR SPOUSE, EVER BEEN DETAINED, ARRESTED, INDICTED OR CON- VICTED FOR ANY VIOLATION OF THE LAW OTHER THAN A MUNOR TRAFFIC VIOLATION IN THE UNITED STATES OR ABROADT
INSTRUCTIONS question on a separate, signed sheet and attach the sheet to this form in a sealed envelope. 10. HAVE YOU, OR TO YOUR KNOWLEDGE HAS YOUR SPOUSE, EVER BEEN DETAINED, ARRESTED, INDICTED OR CON- VICTED FOR ANY VIOLATION OF THE LAW OTHER THAN A MUNOR TRAFFIC VIOLATION IN THE UNITED STATES OR ABROADT
<ul> <li>INSTRUCTIONS question on a separate, signed sheet and attach the sheet to this form in a sealed envelope.</li> <li>10. HAVE YOU, OR TO YOUR KNOWLEDGE HAS YOUR SPOUSE, EVER BEEN DETAINED, ARRESTED, INDICTED OR CONVICTED FOR ANY VIOLATION OF THE LAW OTHER THAN A MUNOR TRAFFIC VIOLATION IN THE UNITED STATES OR ABROADT</li> <li>IF SO, STATE NAME OF COURT, CITY, STATE, COUNTRY, DATE, NATURE OF OFFENSE AND DISPOSITION OF CASE IN ACCORDANCE WITH THE SPECIAL INSTRUCTION ABOVE.</li> </ul>
INSTRUCTIONS       question on a separate, signed sheet and attach the sheet to this form in a sealed envelope.         10.       HAVE YOU, OR TO YOUR KNOWLEDGE HAS YOUR SPOUSE, EVER BEEN DETAINED, ARRESTED, INDICTED OR CONVICTED FOR ANY VIOLATION OF THE LAW OTHER THAN A MUNOR TRAFFIC VIOLATION IN THE UNITED STATES OR ABROADT         11.       IF SO, STATE NAME OF COURT, CITY, STATE, COUNTRY, DATE, NATURE OF OFFENSE AND DISPOSITION OF CASE IN ACCORDANCE WITH THE SPECIAL INSTRUCTION ABOVE.         11.       HAVE YOU EVER BEEN ARRESTED, COURT-MARTIALED OR OTHERWISE PUNISHED UNDER MILITARY LAW OR REGULATIONT IF SO, DESCRIBE INCIDENT(S) AND PROVIDE DATE(S) OF OCCURRENCE ON SEPARATE SHEET IN ACCURATION ACCURATION OF COURT IN ACCURATION OF CASE IN ACCURATION OF COURT OF COURTS.
INSTRUCTIONS       question on a separate, signed sheet and attach the sheet to this form in a sealed envelope.         10. HAVE YOU, OR TO YOUR KNOWLEDGE HAS YOUR SPOUSE, EVER BEEN DETAINED, ARRESTED, INDICTED OR CONVICED FOR ANY VIOLATION OF THE LAW OTHER THAN A MUNOR TRAFFIC VIOLATION IN THE UNITED STATES OR ABROADT         11. HAVE YOU EVER BEEN ARRESTED, COURT-MARTIALED OR OTHERWISE PUNISHED UNDER MILITARY LAW OR REG-
<ul> <li>INSTRUCTIONS question on a separate, signed sheet and attach the sheet to this form in a sealed envelope.</li> <li>HAVE YOU, OR TO YOUR KNOWLEDGE HAS YOUR SPOUSE, EVER BEEN DETAINED, ARRESTED, INDICTED OR CONVICTED FOR ANY VIOLATION OF THE LAW OTHER THAN A MUNOR TRAFFIC VIOLATION IN THE UNITED STATES OR ABROADT</li> <li>IF SO, STATE NAME OF COURT, CITY, STATE, COUNTRY, DATE, NATURE OF OFFENSE AND DISPOSITION OF CASE IN ACCORDANCE WITH THE SPECIAL INSTRUCTION ABOVE.</li> <li>HAVE YOU EVER BEEN ARRESTED, COURT-MARTIALED OR OTHERWISE PUNISHED UNDER MILITARY LAW OR REGULATION? IF SO, DESCRIBE INCIDENT(S) AND PROVIDE DATE(S) OF OCCURRENCE ON SEPARATE SHEET IN ACCORDANCE WITH SPECIAL INSTRUCTIONS ABOVE.</li> </ul>
<ul> <li>INSTRUCTIONS question on a separate, signed sheet and attach the sheet to this form in a sealed envelope.</li> <li>10. HAVE YOU, OR TO YOUR KNOWLEDGE HAS YOUR SPOUSE, EVER BEEN DETAINED, ARRESTED, INDICTED OR CONVICTED FOR ANY VIOLATION OF THE LAW OTHER THAN A MUNOR TRAFFIC VIOLATION IN THE UNITED STATES OR ABROADT</li> <li>IF SO, STATE NAME OF COURT, CITY, STATE, COUNTRY, DATE, NATURE OF OFFENSE AND DISPOSITION OF CASE IN ACCORDANCE WITH THE SPECIAL INSTRUCTION ABOVE.</li> <li>11. HAVE YOU EVER BEEN ARRESTED, COURT-MARTIALED OR OTHERWISE PUNISHED UNDER MILITARY LAW OR REGULATIONT IF SO, DESCRIBE INCIDENT(S) AND PROVIDE DATE(S) OF OCCURRENCE ON SEPARATE SHEET IN ACCORDANCE WITH SPECIAL INSTRUCTIONS ABOVE.</li> <li>12. ARE THERE ANY UNFAVORABLE INCIDENTS IN YOUR LIFE, NOT MENTIONED ABOVE, WHICH MAY BE DISCOVERED IN SUBSEQUENT INVESTIGATION, WHETHER YOU WERE DIRECTLY INVOLVED OR NOT, WHICH MAY BE DISCOVERED IN SUBSEQUENT INVESTIGATION, WHETHER YOU WERE DIRECTLY INVOLVED OR NOT, WHICH MERE SHEET IN ACCORDANCE ON SEPARATE SHEET IN ACCORDANCE ON SEPARATE SHEET IN ACCORDANCE WITH SPECIAL INSTRUCTIONS ABOVE.</li> </ul>
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INSTRUCTIONS       question on a separate, signed sheet and attach the sheet to this form in a sealed envelope.         10. HAVE YOU, OR TO YOUR KNOWLEDGE HAS YOUR SPOUSE, EVER BEEN DETAINED, ARRESTED, INDICTED OR CONVICTED FOR ANY VIOLATION OF THE LAW OTHER THAN A MINOR TRAFFIC VIOLATION IN THE UNITED STATES OR ABROADT         11. HAVE YOU EYER BEEN ARRESTED, COURT, CITY, STATE, COUNTRY, DATE, NATURE OF OFFENSE AND DISPOSITION OF CASE IN ACCORDANCE WITH THE SPECIAL INSTRUCTION ABOVE.         11. HAVE YOU EYER BEEN ARRESTED, COURT-MARTIALED OR OTHERWISE PUNISHED UNDER MILITARY LAW OR REGULATION IF SO, DESCRIBE INCIDENTISI AND PROVIDE DATE(S) OF OCCURRENCE ON SEPARATE SHEET IN ACCORDANCE WITH SPECIAL INSTRUCTIONS ABOVE.         12. ARE THERE ANY UNFAVORABLE INCIDENTS IN YOUR LIFE, NOT MENTIONED ABOVE, WHICH MAY BE DISCOVERED IN SUBSEQUENT INVESTIGATION, WHETHER YOU WERE DIRECTLY INVOLVED OR NOT, WHICH MIGHT REQUIRE EXPLANTION IF SO, DESCRIBE INCIDENTS IN YOUR LIFE, NOT MENTIONED ABOVE, WHICH MAY BE DISCOVERED IN SUBSEQUENT INVESTIGATION, WHETHER YOU WERE DIRECTLY INVOLVED OR NOT, WHICH MIGHT REQUIRE EXPLANTION IF SO, DESCRIBE INCIDENTS IN YOUR LIFE, NOT MENTIONED ABOVE, WHICH MAY BE DISCOVERED IN SUBSEQUENT INVESTIGATION, WHETHER YOU WERE DIRECTLY INVOLVED OR NOT, WHICH MIGHT REQUIRE EXPLANTION IF SO, DESCRIBE INCIDENTISI AND PROVIDE DATE(S) OF OCCURRENCE ON SEPARATE SHEET IN ACCORDANCE WITH SPECIAL INSTRUCTIONS ABOVE.         12. ARE THERE ANY UNFAVORABLE INCIDENTS IN YOUR LIFE, NOT MENTIONED ABOVE, WHICH MAY BE DISCOVERED IN SUBSEQUENT INVESTIGATION, WHETHER YOU WERE DIRECTLY INVOLVED OR NOT, WHICH MIGHT REQUIRE EXPLANTION THE SOULD THAT TO BE NOTIFIED IN CASE OF EMERGENCY         12. NAME (Firet-MIDDIGE TARGE)       2. RELATIONSHIP
INSTRUCTIONS       question on a separate, signed sheet and attach the sheet to this form in a sealed envelope.         10. HAVE YOU, OR TO YOUR KNOWLEDGE HAS YOUR SPOUSE, EVER BEEN DETAINED, ARRESTED, INDICTED OR CONVICTED FOR ANY VIOLATION OF THE LAW OTHER THAN A MUNOR TRAFFIC VIOLATION IN THE UNITED STATES OR ABROADT         11. HAVE YOU EVER BEEN ARRESTED, COURT, CITY, STATE, COUNTRY, DATE, NATURE OF OFFENSE AND DISPOSITION OF CASE         11. HAVE YOU EVER BEEN ARRESTED, COURT-MARTIALED OR OTHERWISE PUNISHED UNDER MILITARY LAW OR REGULATIONT IF SO, DESCRIBE INCIDENT(S) AND PROVIDE DATE(S) OF OCCURRENCE ON SEPARATE SHEET IN ACCORDANCE WITH SPECIAL INSTRUCTIONS ABOVE.         12. ARE THERE ANY UNFAVORABLE INCIDENTS IN YOUR LIFE, NOT MENTIONED ABOVE, WHICH MAY BE DISCOVERED IN SUBSEQUENT INVESTIGATION, WHETHER YOU WERE DIRECTLY INVOLVED OR NOT, WHICH MIGHT REQUIRE EXPLANATIONT IF SO, DESCRIBE INCIDENT(S) AND PROVIDE DATE(S) OF OCCURRENCE ON SEPARATE SHEET IN ACCORDANCE WITH SPECIAL INSTRUCTIONS ABOVE.         12. ARE THERE ANY UNFAVORABLE INCIDENTS IN YOUR LIFE, NOT MENTIONED ABOVE, WHICH MAY BE DISCOVERED IN SUBSEQUENT INVESTIGATION, WHETHER YOU WERE DIRECTLY INVOLVED OR NOT, WHICH MIGHT REQUIRE EXPLANATIONT IF SO, DESCRIBE INCIDENT(S) AND PROVIDE DATE(S) OF OCCURRENCE ON SEPARATE SHEET IN ACCORDANCE WITH SPECIAL INSTRUCTIONS ABOVE.         SECTION XXV         PERSON TO BE NOTIFIED IN CASE OF EMERGENCY         1. NAME (First-Middle-Last)       2. RELATIONSHIP         PAULINE       PANITA       PODRIGUEZ_         2. FERON TO BE NOTIFIED IN CASE OF EMERGENCY         1. NAME (First-MIDDIC-Last) <td< td=""></td<>
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SECTION XXVI		CERTIF	ICATION			
YOU ARE IN	FORMED THAT THE	CORRECTNESS ( WILL BE I	OF ANY STATE NVESTIGATED.	MENT MADE IN	THIS APPLICA	TION
I have read and un knowledge and bel dismissal or reject	derstand the instructio lief. I agree that any m tion of my application. 'itle 18, Section 1001).	nisstatement or or	nission as to ma	iterial fact will c	onstitute ground	s for immed
1. DATE OF SIGNATURES Sept. 5, 1861			2. SIGNATURE OF APPLICANT			
3. SIGNED AT (City and	State)		4. SIGNATUR	E OF WITNESS	60	
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