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Assassination Records Collection Act of
1992 (44 USC 2107 Note). Case#:NW
64954 Date: 03-18-2025

JFK ASSASSINATION SYSTEM
IDENTIFICATION FORM

AGENCY INFORMATION

AGENCY : INSCOM/CSF
RECORD NUMBER : 194-10001-10496
RECORDS SERIES : FOREIGN PERSONNEL AND ORGANIZATIONS
AGENCY FILE NUMBER : AB632604W - PAGES 76-79

DOCUMENT INFORMATION

ORIGINATOR :
FROM : EDIFANIO ROMERO-DELGADO
TO :
TITLE : DD FORM 398 - STATEMENT OF PERSONAL HISTORY
DATE : 01/18/63
PAGES : 4
SUBJECTS : ROMERODELGADO, EPIFANIO

DOCUMENT TYPE : PAPER, TEXTUAL DOCUMENT
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Released under the John F. Kennedy
Assassination Records Collection Act of
1992 (44 USC 2107 Note). Case#:NW
64954 Date: 09-22-2022

STATEMENT OF PERSONAL HISTORY

INSTRUCTIONS: Read the certification at the end of this questionnaire before entering the required data. Print or type all answers. All questions and statements must be completed. If the answer is "None," so state. Do not misstate or omit material fact since the statements made herein are subject to verification. If more space is needed, use the Remarks section, item 20, and attach additional sheets if necessary. The information entered hereon is for official use only and will be maintained in confidence.

| | | | |
|---|---------------|---|---|
| 1. (Print) FIRST NAME--MIDDLE NAME--MAIDEN NAME (If any)--LAST NAME <input checked="" type="checkbox"/> MR. <input type="checkbox"/> MRS. <input type="checkbox"/> MISS Edifanio ROMERO-Delgado | | 2. STATUS <input checked="" type="checkbox"/> CIVILIAN <input type="checkbox"/> MILITARY ON ACTIVE DUTY | |
| 3. ALIAS(ES), NICKNAME(S), OR CHANGES IN NAME (Other than by marriage) Piche | | 4. PERMANENT MAILING ADDRESS 1140 SW 9th St., Miami, Fla. | |
| 5. DATE OF BIRTH (Day, month, year) 21 Jan 1936 | | PLACE OF BIRTH (City, County, State, and Country) Candelario, Pinardel Rio, Cuba | |
| RACE Cau | | HEIGHT 66" | |
| WEIGHT 165 | | COLOR OF EYES Brown | |
| COLOR OF HAIR Brown | | SCARS, PHYSICAL DEFECTS, DISTINGUISHING MARKS NONE | |
| 6. DO YOU HAVE A HISTORY OF MENTAL OR NERVOUS DISORDERS? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO ARE YOU NOW OR HAVE YOU EVER BEEN ADDICTED TO THE USE OF HABIT FORMING DRUGS SUCH AS NARCOTICS OR BARBITURATES? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO ARE YOU NOW OR HAVE YOU EVER BEEN A CHRONIC USER TO EXCESS OF ALCOHOLIC BEVERAGES? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO IF THE ANSWER TO ANY OF THE ABOVE IS "YES," EXPLAIN IN ITEM 20. | | | |
| 7. U. S. CITIZEN <input type="checkbox"/> | | NATIVE <input type="checkbox"/> YES <input type="checkbox"/> NO | |
| IF NATURALIZED, CERTIFICATE NO. | | IF DERIVED, PARENTS' CERTIFICATE NO(S). | |
| DATE, PLACE, AND COURT | | | |
| ALIEN <input checked="" type="checkbox"/> | | REGISTRATION NO. A13 108 636 | |
| NATIVE COUNTRY Cuba | | DATE AND PORT OF ENTRY 21 Sept 1962 Texas | |
| DO YOU INTEND TO BECOME A U. S. CITIZEN? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO | | | |
| 8. MILITARY SERVICE | | | |
| ARE YOU PRESENTLY ON ACTIVE DUTY IN THE U. S. ARMED FORCES DRAWING FULL PAY? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO IF "YES," COMPLETE THE FOLLOWING: | | | |
| GRADE AND SERVICE NO. | | SERVICE AND COMPONENT | |
| ORGANIZATION AND STATION | | DATE CURRENT ACTIVE SERVICE STARTED | |
| ARE YOU PRESENTLY A MEMBER OF A U. S. RESERVE OR NATIONAL GUARD ORGANIZATION? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO IF "YES," COMPLETE THE FOLLOWING: | | | |
| GRADE AND SERVICE NO. | | SERVICE AND COMPONENT | |
| ORGANIZATION AND STATION OR UNIT AND LOCATION | | | |
| HAVE YOU PREVIOUSLY SERVED TOURS OF EXTENDED ACTIVE DUTY, DRAWING FULL PAY, FROM WHICH YOU WERE DISCHARGED OR SEPARATED TO CIVILIAN STATUS? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO IF "YES," COMPLETE THE FOLLOWING: | | | |
| COUNTRY | SERVICE | COMPONENT | FROM (Date) |
| | | | TO (Date) |
| | | | TYPE DISCHARGES OR SEPARATIONS--GRADE AND SERVICE NO. |
| | | | |
| | | | |
| | | | |
| 9. EDUCATION (Account for all civilian schools and military academies. Do not include service schools) | | | |
| MONTH AND YEAR | | NAME AND LOCATION OF SCHOOL | |
| FROM-- | TO-- | GRADUATE | DEGREE |
| | | YES | NO |
| Sep 46 | Jun 49 | | |
| | | | |
| | | | |
| | | | |
| | | | |
| 10. FAMILY (List in order given, parents, spouse, guardians, stepparents, foster parents, parents-in-law, former spouse(s) (if divorced give date and place), children, brothers and sisters, even though deceased. Include any others you resided with or with whom a close relationship existed or exists. If the person is not a U. S. citizen by birth, give date and port of entry, alien registration number, naturalization certificate number and place of issuance.) | | | |
| RELATION AND NAME | | DATE AND PLACE OF BIRTH | |
| PRESENT ADDRESS, IF LIVING | | U. S. CITIZEN | |
| | | YES | |
| | | NO | |
| FATHER Felipe Romero | | date unknown Conzolacion del Sur, Cuba | |
| | | DECEASED | |
| MOTHER (Maiden name) Sagunda Delgado | | date unknown " " " | |
| | | Finca Sabana La Mar San Cristobal Pinardel Rio, Cuba | |
| SPOUSE (Maiden name) Ilda Martinez | | 1 Feb 1936 Candelaria Pinardel Rio, Cuba | |
| | | " " " | |
| OTHER (Specify) Arturo Romero Son | | 9 May 1962 San Cristobal Pinardel Rio, Cuba | |
| | | " " " | |
| Balerio Romero B | | Finca Sabana La Mar San Cristobal Pinardel Rio Cuba | |
| | | " " " | |
| Jose Manuel Romero B | | " " " | |
| | | " " " | |
| Aniceto Romero B | | " " " | |
| | | " " " | |
| Santiago Romero B | | " " " | |
| | | " " " | |

| 11. OTHER RELATIVES AND ALIEN FRIENDS LIVING IN FOREIGN COUNTRIES (List grandparents, first cousins, aunts, uncles, brothers- and sisters-in-law, and other persons with whom a close relationship existed or exists) | | | | | |
|---|------|------------|------------------------------|-------------|--|
| RELATIONSHIP AND NAME | AGE | OCCUPATION | ADDRESS | CITIZENSHIP | |
| Juan Delgado | U 36 | farmer | ConsolaciondelSur, Cuba | Cuban | |
| Pedro Delgado | U 38 | " | Candelaria PinardelRio, Cuba | " | |
| Francisco Delgado | U 40 | " | Santa Cruz PinardelRio, Cuba | " | |
| Niebe Delgado | A 39 | housewife | " " " " | " | |
| Maria Delgado | A 39 | " | " " " " | " | |

| 12. FOREIGN TRAVEL (Other than as a direct result of United States military duties) | | | |
|---|-----------|-----------------|-------------------|
| DATES | | COUNTRY VISITED | PURPOSE OF TRAVEL |
| FROM— | TO— | | |
| 29 Aug 62 | 21 Sep 62 | Mexico | in transit to USA |
| | | | |
| | | | |
| | | | |

| 13. EMPLOYMENT (Show every employment you have had and all periods of unemployment) | | | | |
|---|--------|--------------------------------------|------------------------------|--------------------|
| MONTH AND YEAR | | NAME AND ADDRESS OF EMPLOYER | NAME OF IMMEDIATE SUPERVISOR | REASON FOR LEAVING |
| FROM— | TO— | | | |
| Feb 59 | Jan 60 | Equipos Piesada PinardelRio, Cuba | Nestor Prieto | Political reasons |
| | | | | |
| | | | | |
| | | | | |
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|--|--|--|
| DID ANY OF THE ABOVE EMPLOYMENTS REQUIRE A SECURITY CLEARANCE? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO DO YOU HAVE ANY FOREIGN PROPERTY OR BUSINESS CONNECTIONS, OR HAVE YOU EVER BEEN EMPLOYED BY A FOREIGN GOVERNMENT, FIRM, OR AGENCY? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO HAVE YOU EVER BEEN REFUSED BOND? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO IF THE ANSWER TO ANY OF THE ABOVE IS "YES," EXPLAIN IN ITEM 20. | | SOCIAL SECURITY NO. 463-74-2051(D) |
|--|--|--|

| 14. CREDIT AND CHARACTER REFERENCES (Do not include relatives, former employers, or persons living outside the United States or its Territories.) | | | | | |
|---|---|-------------|---|-------------|--------------------|
| CREDIT | NAME (List 3 credit and 5 character) | YEARS KNOWN | STREET AND NUMBER (Business address preferred) | CITY | STATE OR TERRITORY |
| | CHARACTER | NONE | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| CHARACTER | Juan Noriega | 10 | 1040 15th St, Apt #15 | Miami Beach | Fla. |
| | Gustado Acosta | 10mo | 1140 SW 9th St. | Miami | " |
| | | | | | |
| | | | | | |

REMARKS

19. ARE THERE ANY INCIDENTS IN YOUR LIFE NOT MENTIONED HEREIN WHICH MAY REFLECT UPON YOUR LOYALTY TO THE UNITED STATES OR UPON YOUR SUITABILITY TO PERFORM THE DUTIES WHICH YOU MAY BE CALLED UPON TO TAKE OR WHICH MIGHT REQUIRE FURTHER EXPLANATION? ☐ YES ☒ NO IF "YES," GIVE DETAILS

20. REMARKS

ITEM #10

Fernando Romero B San Cristobal Pinardel Rio San Cristobal Pinardel Rio, Cuba
Finca Santa Amalia Sabana La Mar

Sabina Romero S " " " " " " "

Augustina Romero S " " " " " " "

I CERTIFY THAT THE ENTRIES MADE BY ME ABOVE ARE TRUE, COMPLETE, AND CORRECT TO THE BEST OF MY KNOWLEDGE AND BELIEF AND ARE MADE IN GOOD FAITH. I UNDERSTAND THAT A KNOWING AND WILLFUL FALSE STATEMENT ON THIS FORM CAN BE PUNISHED BY FINE OR IMPRISONMENT OR BOTH (See U. S. Code, title 18, section 1001)

DATE

18 Jan 63

SIGNATURE OF PERSON COMPLETING FORM

Chelamis Romero Delgado

TYPED NAME AND ADDRESS OF WITNESS

LUIS A. ZAYAS, MSGT, AFES&IS, CORAL GABLES, FLA.

SIGNATURE OF WITNESS

Luis A. Zayas

21.

THIS SECTION TO BE COMPLETED BY AUTHORITY REQUESTING INVESTIGATION

BRIEF DESCRIPTION OF DUTY ASSIGNMENT AND DEGREE OF CLASSIFIED MATTER (top secret, secret, etc.) TO WHICH APPLICANT WILL REQUIRE ACCESS

79

RECORD OF PRIOR CLEARANCES

| DATE OF CLEARANCE | TYPE OF CLEARANCE | AGENCY THAT COMPLETED INVESTIGATION |
|-------------------|-------------------|-------------------------------------|
| | | |
| | | |
| | | |
| | | |

REMARKS