Date : 09/30/98

Page : 1

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## JFK ASSASSINATION SYSTEM IDENTIFICATION FORM

## AGENCY INFORMATION

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RECORD NUMBER : 194-10001-10496

RECORDS SERIES : FOREIGN PERSONNEL AND ORGANIZATIONS

AGENCY FILE NUMBER : AB632604W - PAGES 76-79

## DOCUMENT INFORMATION

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FROM : EDIFANIO ROMERO-DELGADO

TO

TITLE : DD FORM 398 - STATEMENT OF PERSONAL HISTORY

DATE : 01/18/63

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COMMENTS :

Released under the John F. Kennedy Assessination Records Collection Act of 1992 (44 USC 2107 Note). Cossill NW 84954 Date: 09-22-2022

| STATEMENT | Ołgreń | SON | AQ    | HISTOR   |
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| answers. fact since t<br>attach add | All que<br>the stat<br>litional | stions a<br>tements<br>sheets | and sta<br>made<br>if neces | tements<br>herein as<br>sary. T | must b<br>re subj<br>he info | ect to<br>crmatio | oleted.<br>verific<br>n ente | If the a<br>ation. If | nswer<br>more | is "None," so<br>space is need | ing the require state. Do not not not not not not not not not no | ot miss<br>marks     | tate o    | or omit m              | aterial      |
| MR.                                 |                                 |                               |                             |                                 |                              | —LAST N           | AME                          |                       |               |                                | 2.   | S                    | TATUS     |                        | <del></del>  |
| □ miss £d                           |                                 |                               |                             | Delga                           |                              |                   |                              |                       |               |                                | X CIVILIAN   |                      | HLITARY ( | DN ACTIVE DUT          | Y            |
| 3. ALIAS(ES), NIC                   | CKNAME(S                        | S). OR CHA                    | NGES IN N                   | AME (Othe                       | r than                       | by marr           | iage)                        |                       | 4.            | PERMANENT MAIL                 |  |                      |           |                        |              |
|                                     | Pic                             |                               |                             | -1                              |                              |                   |                              |                       |               | 1140 SW 9                      | Oth St. Mi   | ami,                 | Fla.      |                        |              |
| 5. DATE OF BIRT                     |                                 |                               | year)                       |                                 |                              |                   |                              | ty, State,            |               | • .                            | Candelari  |                      |           |                        | Cabo         |
| 21 Jan                              | HEIGHT                          |                               | WEIGHT                      |                                 | OR OF EY                     |                   | <del>-</del>                 | erdelR                |               |                                | FECTS, DISTINGUISI   | <u> </u>             |           | TETT-TO                | onna         |
| Cau                                 | 66                              | #1                            |                             |                                 | _                            |                   | _                            | or naik               | 3             | NONE                           | FECTS, DISTINGUISI   | TING MAI             | 11.3      |                        |              |
| 6. DO YOU HAVE<br>NARCOTICS C       | A HISTOR                        | Y OF MEN<br>TURATES?          | YES                         | RVOUS DISO                      | RE YOU N                     | YES               | X NO A                       | RE YOU NOW            | OR HAVE       | YOU EVER BEEN AL               | ODICTED TO THE USI   | E OF HAB<br>'ERAGES? | IT FORM   | ING DRUGS S            | SUCH AS      |
| ANSWER TO A                         | ANY OF TH                       |                               |                             | EXPLAIN IN<br>(LIZED, CER)      |                              | NO.               | IF DEF                       | RIVED, PAREN          | TS' CERI      | TIFICATE NO(S).                | DATE, PLACE, AND   | COURT                |           |                        |              |
| CITIZEN                             | YE                              |                               |                             |                                 |                              |                   |                              |                       |               |                                |  |                      |           |                        |              |
|                                     | NO                              |                               | •                           |                                 |                              |                   | } :                          |                       |               | •                              |  |                      |           |                        |              |
| ALIEN                               |                                 | RATION NO                     |                             | 1 -                             | IVE COUN                     | ITRY              |                              | DATE AND F            |               |                                | ·  |                      | O YOU I   | NTEND TO BE            | COME         |
| <b>1</b>                            | A13                             | 108                           | 636                         | Հա                              | ba.                          |                   |                              | 21 Se <sub>1</sub>    | pt 19         | 962 Te                         | exas .   |                      | YES       | X                      | NO           |
| θ.                                  |                                 |                               |                             |                                 |                              |                   | MIL                          | LITARY SE             | RVICE         |                                |  |                      |           |                        |              |
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| ARE YOU PRES                        | SENTLY A                        | MEMBER C                      | F A U. S. F                 | ESERVE OR                       | NATIONA                      | L GUARD           |                              |                       |               |                                | PLETE THE FOLLOW   | /ING:                |           |                        |              |
| GRADE AND SER                       | RVICE NO.                       |                               | SE                          | RVICE AND                       | COMPONE                      | NT                | '                            | ORGANIZATIC           | N AND S       | TATION OR UNIT AN              | ID LOCATION  |                      |           |                        |              |
| HAVE YOU PRE                        |                                 |                               |                             | XTENDED AC                      | TIVE DUT                     | Y, DRAWI          | NG FULL                      | PAY, FROM V           | WHICH YO      | OU WERE DISCHARG               | ED OR SEPARATED T  | O CIVILIA            | AN STAT   | US? 🗌 YES              | <b>★</b> NO  |
| COUNTRY                             |                                 | SER                           |                             | СОМРО                           | NENT                         | FROM (            | (Date)                       | TO (Date              | e)            | TYPE DISCH                     | ARGES OR SEPARAT   | rions—g              | RADE AN   | ID SERVICE N           | 0.           |
|                                     |                                 |                               |                             | ļ                               |                              |                   |                              |                       |               |                                |  |                      |           |                        |              |
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| Sep 46                              |                                 | Jun 4                         |                             | Fecus                           | ela F                        | <br>ານໄດ້ໄດ້ເຕີ   | ca S                         | an Cris               | stoba         | <br>al                         | -  | 1                    |           |                        |              |
| ocp 40                              |                                 |                               |                             | 2500                            | -                            | <u> </u>          | <u> </u>                     | <u> </u>              | 3 3 3 8 8     |                                |  |                      |           | -                      |              |
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| and place                           | e), child<br>r exists.          | ren, bro<br>II the            | thers ar<br>person is       | nd sisters,                     | even t                       | hough d           | decease                      | d. Includ             | e any o       | others you resid               | law, former spo<br>ded with or wit<br>gistration numi            | h whor               | n a clo   | ose relatio.           | nship        |
| REL                                 | ATION AN                        | D NAME                        |                             |                                 | DATE AN                      | ID PLACE          | OF BIRTI                     | <del></del>           |               | PRESENT A                      | DDRESS, IF LIVING  |                      |           | U. S. C                |              |
| FATHER                              | -                               |                               |                             | date                            | _                            |                   |                              | <u> </u>              |               | <del></del>                    |  |                      |           | YES                    | NO           |
| Felipe R                            | omer                            | o .                           |                             | 1                               |                              |                   | 1 S                          | , Cuba                |               | DECEASE                        | ח  |                      |           |                        | Х            |
| MOTHER (Maio                        |                                 |                               |                             | date                            |                              |                   | <u> - u - u - </u>           | • outou               | Fine          | ca Sabana                      |  | -                    |           |                        |              |
| Sagunda                             | Del ø                           | ohe                           |                             | 11                              | <b>41211</b>                 | 11                |                              | 11                    | 1             |                                | PinardelRi   | o Cu                 | ba        | ٠ ,                    | . Х          |
| SPOUSE (Maid                        | len nam                         | e)                            |                             | 1 Fel                           | b 193                        | 36 Ca.            | ndel                         | aria                  |               |                                |  |                      |           |                        |              |
| Ilda Mar                            | tine                            | Z                             |                             | Pinar                           | del <sup>K</sup> i           | lo Gui            | ba                           |                       | 11            | 11                             | II .   | 11                   |           |                        | X            |
| OTHER (Specif                       | fy)                             |                               |                             | 9 Mag                           | y 196                        | 2 Sa              | n Cr                         | istoba                | 1             |                                | .,   | ••                   |           |                        | T.P          |
| Arturo R                            | Romero                          | <b>)</b>                      | Son                         | Finar<br>Finca                  |                              |                   |                              | rSan                  | 11            |                                |  | 11                   |           |                        | Х            |
| Balerio                             | Romer                           | ro                            | В                           |                                 |                              |                   |                              | Rio Cuba              | а. п          | 11                             | n  | 11                   |           |                        | Х_           |
| Jose Man                            | mel ]                           | Romer                         | οВ                          | 11                              | 1                            | 1                 | 11                           | 76                    | 11            |                                | <u> </u>   | н                    |           |                        | <u>X</u>     |
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| 11.       | OTHE               | R RELATIVES AND<br>hers- and sist                           | ALIEN FR         | ENDS    | LIVING I        | N FOREIGN CO   | OUNTRIES<br>with wh | (List &  | randparent<br>lose relatio | s, first cousins, a<br>nahip existed or | eunts,<br>exists) | uncles,               |
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|           |                    | TIONSHIP AND NAME   |                  | AGE     | 00              | CUPATION       |                     |          | ADDRESS                    |   |                   | CITIZENSHIP           |
|           | uan Del            |   | U                | 36      | farm            | er .           | Conso               | lasio    | ndelSur,                   | Cuba                                    | Gub               | an                    |
| _P        | edro De            | lgado   | U                | 38      |                 |                | Cande               | laria    | Pinardel.                  | Rio Cuba                                | . 11              |                       |
|           |                    | Delgado   |                  | 40      | . "             |                |                     |          | Pi <b>a</b> ardel          |   |                   |                       |
|           | iebe De<br>aria De |   | A.               | 39      | hous            | ewife          | - "                 |          |                            |   | 11                |                       |
| - Fr      | aria be.           | rgado   | п                | 39      |                 |                |                     |          |                            |   | "                 |                       |
| 12.       |                    | FOR   | EIGN TRAV        | EL (O   | ther th         | an as a dire   | ect resul           | t of U   | nited States               | military duties)                        | _                 |                       |
| F         | FROM-              | TES TO-   |                  |         | TRY VISIT       |                |                     |          |                            | URPOSE OF TRAVEL                        |                   |                       |
| 29        | Aug62              | 21Sep62   | hexic            | 00      |                 |                | in tra              | nsit     | to USA                     |   |                   |                       |
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| Н         |                    |   |                  |         |                 |                | _                   |          |                            |   |                   |                       |
| 13.       |                    | EMPLOYME  | NT (Show         | vever   | y emp           | loyment yo     | u have l            | ad and   | all periods                | of unemployme                           | ent)              |                       |
|           | HONTH              | AND YEAR  |                  |         |                 |                |                     |          |                            | OF IMMEDIATE                            |                   |                       |
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| e         | 59                 | Jan 60  | Equipo<br>Pinaro | ie]R    | iesad<br>io, Gu | a<br>ba        |                     |          | Mestor                     | Prieto I                                | olit              | icalreasons           |
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|           |                    |   |                  |         |                 |                |                     |          |                            |   |                   |                       |
|           | MY FOREIGN         | E ABOVE EMPLOYS PROPERTY OR BUS FIRM, OR AGEN ANSWER TO ANY | SINESS CON       | INECTIO | ONS OR          | HAVE YOU EVE   | B REEN FM           | PLOYED 8 | Y A FOREIGN                | SOCIAL SECURITY                         |                   |                       |
| 14.       | CREDI              | TAND CHARACTE   | R REFEREN        | NCES (  | Do not          | include rei    | latives, fo         | ormer e  | mployers, o                | or persons living                       | outsid            | le the                |
|           | (Lin :             | NAME<br>credit and 5 char                                   | necter)          |         | YEARS<br>KNOWN  |                | STREET AN           |          |                            | CITY                                    |                   | STATE OR<br>TERRITORY |
| CREDIT    | NO                 | NE  |                  |         |                 |                |                     |          |                            |   |                   |                       |
| ő         |                    |   |                  |         | _               |                |                     |          |                            | 1                                       |                   |                       |
| -         | Juan N             | oriega  |                  |         | 10              | 1040 15        | thSt.A              | pt#15    |                            | MiamiBeach                              |                   | Fla.                  |
| CHARACTER | Gustado            |   |                  |         | 10m             | 1140SW         |                     | _        |                            | Ni ami                                  |                   | 11                    |
| HAB       |                    |   |                  |         |                 |                |                     | í        |                            | +                                       |                   |                       |
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|           |                    |   |                  |         |                 |                |                     |          |                            |   |                   |                       |

U.S. GOVERNMENT PRINTING OFFICE : 1960 O-573450

| 15.              |   |  |   | LIST ALL RESIDENCES FROM 1 JANUARY   | 1937   |   |                                       |
|------------------|---|--|---|--|--|---|---------------------------------------|
|                  | MONTH                                     | AND YEAR   | 1   | STREET AND NUMBER  | CITY   | STATE OR  | COUNTRY                               |
|                  | OM-                                       | то   | <u> </u>  |  | Pinardel Rio   |   |                                       |
| Jar              |   | Aug62  | FincaSaban  | nalamar  |  | Cuba  | •                                     |
| Aug              | 62  | Dec62  | 1140 SW 9±  | in St.   | M <u>i</u> ami   | Fla.  |                                       |
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|                  |   | <u> </u>   | 1   |  | MITATIONS  | <u> </u>  |                                       |
| 16.              | <del>-</del> -                            |  |   | PAST AND/OR PRESENT MEMBERSHIP IN ORGA   | MIZATIONS  |   |                                       |
| NAME AND ADDRESS |   |  | RESS  | TYPE (Social, fraternal, professional, etc.)   | OFFICE HELD  | MEMBE   |                                       |
| 1000             | 1 01                                      |  |   | <del></del>  |  | FROM—   | το                                    |
|                  | CUE                                       |  | <del></del>   | Subject claims he assisted against Castro. These were  | any and all organ  | nzations  |                                       |
|                  | CUI                                       |  | TABEL OF .  | against castro, inese were   | ail in Aina  |   |                                       |
| MTI              | MOS                                       | CUR A  | NARIA, CUBA   |  |  |   |                                       |
| <u>/ue</u>       | 1 TO 1                                    | OOD R  |   |  |  |   |                                       |
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| 17.              | _   | · · · · · · · · · · · · · · · · ·  |   |  |  |   |                                       |
| YES              | NO  |  |   |  |  |   |                                       |
|                  | х   | ARE YOU NOW OR   | HAVE YOU EVER BEEN  | A MEMBER OF THE COMMUNIST PARTY U. S. A., OR ANY COM   | MUNIST ORGANIZATIONS ANYWHER   | E?  |                                       |
|                  | х   | ARE YOU NOW OF   | HAVE YOU EVER BEEN  | A MEMBER OF A FASCIST ORGANIZATION?  |  |   |                                       |
|                  | x   | OVERTHROW OF O   | OUR CONSTITUTIONAL FO   | A MEMBER OF ANY ORGANIZATION, ASSOCIATION, MOVEME<br>ORM OF GOVERNMENT, OR WHICH HAS ADOPTED THE POLICY<br>HEIR RIGHTS UNDER THE CONSTITUTION OF THE UNITED ST<br>NAL MEANS?                                   | OF ADVOCATING OR APPROVING THE   | COMMISSION OF A   | CTS OF FORCE                          |
|                  | х   | ARE YOU NOW OF   | R HAVE YOU EVER BEEN A  | AFFILIATED OR ASSOCIATED WITH ANY ORGANIZATION OF TI   | HE TYPE DESCRIBED ABOVE AS AN AC   | GENT, OFFICIAL, OR                                      | EMPLOYEE?                             |
|                  | x   |  |   | AVE YOU ASSOCIATED WITH ANY INDIVIDUALS, INCLUDING RGANIZATIONS IDENTIFIED ABOVE?  | RELATIVES, WHO YOU KNOW OR HA  | VE REASON TO BE   | LIEVE, ARE OR                         |
|                  | x   | PARTICIPATION I  | N ANY ORGANIZATIONAL  | E FOLLOWING ACTIVITIES OF ANY ORGANIZATION OF THE T<br>SOCIAL. OR OTHER ACTIVITIES OF SAID ORGANIZATIONS O<br>IR OTHER MATTER, PREPARED, REPRODUCED, OR PUBLISHEI  | R OF ANY PROJECTS SPONSORED BY   | THEM: THE SALE,   | GIFT, OR DIS-                         |
| AND              | FXTEN                                     | T OF ASSOCIATION Y   | WITH EACH, INCLUDING (  | DITIONAL SHEETS FOR A FULL DETAILED STATEMENT. IF AS<br>DEFICE OR POSITION HELD. ALSO INCLUDE DATES, PLACES, A<br>BOVE ORGANIZATIONS, THEN LIST THE INDIVIDUALS AND THI  | AND CREDENTIALS NOW OR FORMER  | LY HELD. IF ASSO  | CIATIONS HAVE                         |
| F<br>. I         | PLACED (<br>minor<br>F "YES,"<br>DISPOSIT | ON PROBATION, OR<br>traffic violation<br>"LIST THE DATE, TI<br>TION OF EACH CASE | HAVE YOU EVER BEEN O<br>IS for which a fine or<br>HE NATURE OF THE OFFE | NDICTED OR SUMMONED INTO COURT AS A DEFENDANT IN A ROERED TO DEPOSIT BAIL OR COLLATERAL FOR THE VIOLA for forfeiture of \$25, or less was imposed)? INCLUDE NSE OR VIOLATION. THE NAME AND LOCATION OF THE COU | TION OF ANY LAW, POLICE REGULAT<br>ALL COURT MARTIALS WHILE IN MII<br>RT OR PLACE OF HEARING, AND TH | ION OR ORDINANCE<br>LITARY SERVICE.<br>IE PENALTY IMPOS | E (excluding<br>YES NO<br>ED OR OTHER |
|                  | Has                                       | been in J  | Mail without  | trial in the G-2 of Pinar d  | el <sup>R</sup> io, <sup>C</sup> uba about   | 18 days   | from                                  |
|                  | 22 A                                      | pril 1961  | for politic   | cal reasons.   |  |   |                                       |
|                  |   |  |   | 75,  |  |   |                                       |
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|   | <u> </u>  | ·                                     | <u>.</u>  |                                  |                             |  |                                     |                              |               |
| REMARKS   | ITEM #10  |                                       |   |                                  | •                           |  |                                     |                              |               |
| Fernando Ro   |   |                                       | rtobal <sup>p</sup> ina<br>Santa <sup>A</sup> mali                        | ardel <sup>R</sup> ic<br>iaSaban | o<br>alaMar                 | San Cris                               | tobal <sup>P</sup> inar             | del <sup>r</sup> io,         | uba           |
| Sabina Rome   | ero S   | 11                                    | n   | . 11                             |                             | Ħ,                                     | 11                                  | 11                           |               |
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| SECTION THAT T  | TO ENTRIES MADE   | W ME AROVE                            | - ADE TRUE COM  | יייו כדב מאח                     | CORRECT TO Th               | IT DEST OF MY KNO                      | NW EDGE AND REI                     | THE AND ARE                  | ***           |
| OOD FAITH. I UND  |   | (NOWING AND                           | E ARE TRUE, COM   | IPLETE, AND<br>I STATEMENT       | CORRECT TO THE              | SE BEST OF MY KNO<br>I CAN BE PUNISHED | OWLEDGE AND BEILD BY FINE OR IMP    | LIEF AND ARE<br>PRISONMENT C | MADE)R BO     |
| OOD FAITH. I UND<br>See U. S. Code, titl  | ERSTAND THAT A K  | (NOWING AND                           | D WILLFUL FALSE   | IPLETE, AND<br>STATEMENT         | CORRECT TO THE ON THIS FORM | SE BEST OF MY KNO<br>I CAN BE PUNISHE  | OWLEDGE AND BEI<br>O BY FINE OR IMI | LIEF AND ARE<br>PRISONMENT C | MADE<br>)R BC |
| OOD FAITH. I UND<br>See U. S. Code, titl  | ERSTAND THAT A K<br>le 18, section 1001)  | (NOWING AND                           | D WILLFUL FALSE   | IPLETE, AND<br>STATEMENT         | CORRECT TO THE ON THIS FORM | GE BEST OF MY KNO<br>I CAN BE PUNISHED | OWLEDGE AND BEI<br>O BY FINE OR IMP | LIEF AND ARE<br>PRISONMENT C | MADE<br>)R BO |
| OOD FAITH. I UND<br>See U. S. Code, titl  | SIGNATURE OF PER  | RSON COMPLET                          | ING FORM  | D.o.                             | g awlo                      | SIGNATURE OF W                         | ITNESS                              | LIEF AND ARE<br>PRISONMENT C | MADE<br>)R BO |
| OOD FAITH. I UND<br>See U. S. Code, titl  | SIGNATURE OF PER TYPED NAME AND LUIS A. ZA                                      | RSON COMPLETION ADDRESS OF WAYAS, MSC | ING FORM  TITNESS  GT, AFES&IS  | S, CORALO                        | GABLES, FL                  | SIGNATURE OF W                         | ITNESS                              | LIEF AND ARE PRISONMENT C    | MADD<br>OR BO |
| See U. S. Code, titl  ATE  8 Jan 63   | SIGNATURE OF PER TYPED NAME AND I  LUIS A. ZA  THIS SECTION 1001)               | AND AYAS, MSC                         | TING FORM  TITNESS  TO A FES&IS  THE COMPLETED                            | S, CORALO                        | GABLES, FL                  | SIGNATURE OF W                         | ITNESS                              | PRISONMENT O                 | MADDR BC      |
| See U. S. Code, titl  ATE  8 Jan 63   | SIGNATURE OF PER TYPED NAME AND I  LUIS A. ZA  THIS SECTION 1001)               | AND AYAS, MSC                         | TING FORM  TITNESS  TO A FES&IS  THE COMPLETED                            | S, CORALO                        | GABLES, FL                  | SIGNATURE OF W                         | ITNESS                              | PRISONMENT O                 | MADIO R BC    |
| See U. S. Code, titl  ATE  B Jan 63   | SIGNATURE OF PER TYPED NAME AND I  LUIS A. ZA  THIS SECTION 1001)               | AND AYAS, MSC                         | TING FORM  TITNESS  TO A FES&IS  THE COMPLETED                            | S, CORALO                        | GABLES, FL                  | SIGNATURE OF W                         | ITNESS                              | PRISONMENT O                 | MADI BC       |
| Good FAITH. I UND (See U. S. Code, titt   | SIGNATURE OF PER TYPED NAME AND I  LUIS A. ZA  THIS SECTION 1001)               | AND AYAS, MSC                         | TING FORM  TITNESS  TO A FES&IS  THE COMPLETED                            | S, CORALO                        | GABLES, FL                  | SIGNATURE OF W                         | ITNESS                              | PRISONMENT O                 | MADE BC       |
| Good FAITH. I UND (See U. S. Code, titt   | SIGNATURE OF PER TYPED NAME AND I  LUIS A. ZA  THIS SECTION 1001)               | AND AYAS, MSC                         | TING FORM  TITNESS  TO A FES&IS  THE COMPLETED                            | S, CORALO                        | GABLES, FL                  | SIGNATURE OF W                         | ITNESS                              | PRISONMENT O                 | MADE BO       |
| Good FAITH. I UND (See U. S. Code, titt   | SIGNATURE OF PER TYPED NAME AND I  LUIS A. ZA  THIS SECTION 1001)               | AND AYAS, MSC                         | TING FORM  TITNESS  TO A FES&IS  THE COMPLETED                            | S, CORALO                        | GABLES, FL                  | SIGNATURE OF W                         | ITNESS                              | PRISONMENT O                 | MADE BC       |
| See U. S. Code, titl  ATE  B Jan 63   | SIGNATURE OF PER TYPED NAME AND I  LUIS A. ZA  THIS SECTION 1001)               | AND AYAS, MSC                         | TING FORM  SILL RAD  ITHESS  GT, AFES&IS  RE COMPLETED  CLASSIFIED MATTER | S, CORAL( D BY AUTH (top secret; | GABLES, FL.                 | SIGNATURE OF W                         | ITNESS                              | PRISONMENT O                 | MADDR BO      |
| GOOD FAITH. I UND (See U. S. Code, titl  DATE  L8 Jan 63  BRIEF DESCRIPTION OF      | SIGNATURE OF PER TYPED NAME AND I LUIS A. ZA  THIS SECTION  DUTY ASSIGNMENT AND | ADDRESS OF WAYAS, MSC                 | TING FORM  TITNESS  GT, AFES&IS  CLASSIFIED MATTER  RECORD                | S, CORALO                        | GABLES, FL.                 | SIGNATURE OF W                         | ITNESS TIGATION WILL REQUIRE ACCES  | PRISONMENT O                 | MADI DR BC    |
| GOOD FAITH. I UND (See U. S. Code, titt) DATE  18 Jan 63                            | SIGNATURE OF PER TYPED NAME AND I LUIS A. ZA  THIS SECTION  DUTY ASSIGNMENT AND | AND AYAS, MSC                         | TING FORM  TITNESS  GT, AFES&IS  CLASSIFIED MATTER  RECORD                | S, CORAL( D BY AUTH (top secret; | GABLES, FL.                 | SIGNATURE OF WAR                       | ITNESS TIGATION WILL REQUIRE ACCES  | PRISONMENT O                 | MADIOR BC     |
| GOOD FAITH. I UND (See U. S. Code, titl)  DATE  18 Jan 63  BRIEF DESCRIPTION OF     | SIGNATURE OF PER TYPED NAME AND I LUIS A. ZA  THIS SECTION  DUTY ASSIGNMENT AND | ADDRESS OF WAYAS, MSC                 | TING FORM  TITNESS  GT, AFES&IS  CLASSIFIED MATTER  RECORD                | S, CORAL( D BY AUTH (top secret; | GABLES, FL.                 | SIGNATURE OF WAR                       | ITNESS TIGATION WILL REQUIRE ACCES  | PRISONMENT O                 | MADIR BC      |
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