

Name (Last, in CAPS)

(First)

(Middle)

No.

BRADE,**Sarah**

Alias

Sndx Code

Entered: (Mo.) (Day) (Year)

(Port)

(Class)

Born: (Country)

(Mo.)

(Day)

(Year)

Montserrat 11 19 87

Type of Action:

Name of Sponsor:

VP-MIA 08 10 64 (I-130)

Action or I-144 (Decision) (Mo.) (Day) (Year)

BRADE, Mary

(Forwarded to Consul at:)

Naturalized: (Mo.) (Day) (Year)

(Court No.)

(Court Location)

(Certificate No.)

FCO

Date

FCO

Date

FCO

Date

FCO

Date

FCO

Date

FCO

Date

Name (Last, in CAPS)

BRADÉ,

(First)

Sarah

(Middle)

No.

Alias

Sndx Code

Entered: (Mo.) (Day) (Year)

(Port)

(Class)

Born: (Country)

(Mo.)

(Day)

(Year)

Montserrat 11 19 87

Type of Action:

Name of Sponsor:

VP-Mia 08 10 64 (I-130)

Action on VP: (Decision)

(Mo.)

(Day)

(Year)

(Section)

BRADÉ, Mary

(Forwarded to Consul at:)

Approved 203(a)(2), 9/24/64, Miami - Barbados, W.I.

Naturalized: (Mo.) (Day) (Year)

(Court No.)

(Court Location)

(Certificate No.)

FCO

Date

FCO

Date

FCO

Date

FCO

Date

FCO

Date

FCO

Date

Name (Last, in CAPS)	(First)	(Middle)	
BRADE,	Sarah		No.
Alias		Sndx Code	
Entered: (Mo.) (Day) (Year)	(Port)	(Class)	Born: (Country) (Mo.) (Day) (Year)
			Montserrat 11 19 87
Type of Action:	Name of Sponsor:		
VP-MIA 08 10 64 (I-130)	BRADE, Mary		
Action on I-130 (Decision) (Mo.) (Day) (Year)	(Court No.)	(Court Location)	(Certificate No.)
Approved 203(a)(2), 9/24/64, Miami - Barbados, W.I.			
FCO	Date	FCO	Date
Accession No.	Box No.		

UNITED STATES OF AMERICA
IMMIGRANT VISA AND ALIEN REGISTRATION

I- 2752779

OF: (Family name) BRADE (First name) Sarah (Middle name) Elvira

PORT OF

060 Miami

I certify that the immigrant named herein arrived in the United States at this port on

BWIA 400

(Name of vessel or flight No. of aircraft)

and was inspected by me and

ADMITTED UNTIL AUG 6 1965
IMMIGRATION
MAMI, FLA. 32

detained for further inquiry by special officer under

Symbol

Section

U-1

of the Immigration and

Nationality Act

Miami

Immigrant Inspector.

AMERICAN Consulate General,

AT Bridgetown, Barbados

Robert B. Morley
Consul of the United States of America.



UNITED STATES OF AMERICA

Service No.

Tariff Item No.

Fee Paid \$20

Local Cy equiv.

ACTION OF SPECIAL INQUIRY OFFICER

The immigrant herein was (admitted) (excluded)
and {no appeal taken} under
{appeal taken}

Symbol

Section of the Immigration and
Nationality Act.

Special Inquiry Officer.

ACTION ON APPEAL

ADMITTED

EXCLUDED

STATISTICS

DATE

This visa is issued under Section 221 of the Immigration and Nationality Act, and upon the basis of the facts stated in the application.

IMMIGRANT CLASSIFICATION

NONQUOTA (Symbol)

QUOTA (Symbol)

U-1

VISA PETITION NO., IF ANY app Sept. 24, 1964
(attached)

IMMIGRANT VISA NO. 52

sub QUOTA Montserrat
(6302)

ISSUED ON (Day) (Month) (Year)
15 July 1965

THE VALIDITY OF THIS VISA EXPIRES MIDNIGHT AT THE END OF
(Day) (Month) (Year)

3 November 1965

NATIONALITY (If stateless, so state, and give previous nationality)

British

PASSPORT

NO. Passport not required under 22 CFR
42.6(a)

OR OTHER TRAVEL DOCUMENTS (Describe)

ISSUED
TO

BY

ON

EXPIRES

DEPARTMENT OF STATE
FOREIGN SERVICE OF THE UNITED STATES OF AMERICA

APPLICATION FOR IMMIGRANT VISA AND ALIEN REGISTRATION

INSTRUCTIONS: This form must be filled out in DUPLICATE by typewriter, or if by hand in legible block letters. ALL questions must be answered, if applicable. Questions which are not applicable should be so marked. If there is insufficient room on the form, answer on separate sheets, in duplicate using the same numbers as appear on the form. Attach the sheets to the forms. DO NOT SIGN this form until instructed to do so by the consular officer. The fee for filing this application for an immigrant visa is \$5.00. The fee should be paid in United States dollars or local currency equivalent or by bank draft, when you appear before the consular officer.

WARNING: Any false statement or concealment of a material fact may result in your permanent exclusion from the United States. Even though you should be admitted to the United States, a fraudulent entry could be ground for your prosecution and/or deportation.

I hereby apply for an immigrant visa and alien registration at the United States at BRIDGETOWN BARBADOS and state the following facts:		
1. My family name is BRADE	My first name is SARAH	My middle name is ELVIRA
2. My full name in native alphabet (If other than Roman letters are used) is Not Applicable		
3. Other names I have used or by which I have been known are (If married woman, give maiden name) (nee) SARAH RICHARD		
4. The date of my birth is (Day) 19 (Month) November (Year) 87	5. My place of birth is (City or town) PLYMOUTH	(Province) (Country) MONTSERRAT
6. My age is 77 yrs	7. My present calling or occupation is HOUSEWIFE	
8. My present address is COOKS. HILL ST JOHNS ANTIQUA		
9. My sex is <input type="checkbox"/> Male <input checked="" type="checkbox"/> Female	10. My marital status is <input checked="" type="checkbox"/> Single (never married) <input type="checkbox"/> Married <input checked="" type="checkbox"/> Widowed <input type="checkbox"/> Divorced <input type="checkbox"/> Separated	
Including my present marriage, I have been married _____ times.		
11. My nationality is BRITISH	12. My personal description is (a) Color of hair GREY (b) Color of eyes BLACK (c) Height 5 feet 6 inches (d) Complexion BLACK	
13. I have the following visible marks of identification BIRTH MARK ON CHEST		
14. My purpose in going to the United States is TO RESIDE PERMANENTLY	15. I intend to remain in the United States permanently or (Give length of time) PERMANENTLY	
16. I intend to enter the United States at the port of MIAMI FLA		
17. I (Do) (Do Not) have a ticket to my final destination		
18. (a) I am going to the United States to join the following person (Give name and address and relationship, if any) MARY BRADE, 844 N.W. 64th St., DAUGHTER Miami, Florida.		18. (b) I am sponsored by the following person and/or organization (Give address if different from (a)) MARY BRADE (DAUGHTER) same as 18(a)
19. My final address in the United States is LIBERTY CITY 844 NW 64 th ST MIAMI Fla.		
20. My personal financial resources are (a) Cash Nil (b) Bank deposits Nil (c) Real estate (value) Nil (d) Other Nil		

21. I am submitting the following personal documents in support of and as part of my application

- Birth certificate Military record
 Police certificate(s) Evidence of support or own resources
 Other (describe) _____

- Promise of employment
 Medical record(s)

22. Name and present residence of my wife/husband is (Give maiden name of wife)

NOT APPLICABLE

23. The names and addresses of my children under 21 years of age are

NOT APPLICABLE

24. The names of members of my family who are immigrating with me are

NOT APPLICABLE

25. The name and address of my father is (If deceased, so state, giving date)

Deceased

26. The maiden name and address of my mother is (If deceased, so state, giving date)

Deceased

27. The name and address of my next of kin in my home country is

NOT APPLICABLE

28. Since my sixteenth birthday my places of residence for 6 months or more have been

City or town

Province

Country

Dates (From—To)

Calling or occupation

29. Since my sixteenth birthday I am or have been a member or affiliate of the following political, professional, vocational or social organizations

Name and address	Dates (From—To)	Type of membership and office held, if any
TRANS. VILLAGE MONTSEREAT	19. 11	87 TO.
TO 16. 7. 56		
ANTIGUA.	16. 7. 56 T	APRIL 30. 65

30. I speak, read, write the following languages (Include your native language)

Language

Speak

Read

Write

ENGLISH

Yes

Yes

Yes

31. I have previously been in the United States during the following periods (Give year and type of visa or status) (If never, so state)

NOT APPLICABLE

United States immigration laws require that all prospective immigrants answer the following questions. This requirement does not imply that you are suspected of being within any of the classes described in these questions. Your answers will assist the consular officer to establish your eligibility to receive a visa. If you are unable to answer any of these questions please explain your inability fully on a separate sheet of paper which you should attach to this form. Please bear in mind that whatever the nature of your answers to these questions, you are not necessarily ineligible to receive a visa. For example, if you were arrested and/or convicted for a minor offense, and the consular officer is able to establish that such offense was in fact a misdemeanor, your arrest and/or conviction would not necessarily make you ineligible for a visa.

Give the correct answer to the following questions by circling "Yes" or "No"

(1) (a) Have you ever been arrested for, charged with, indicted for, or convicted of, a crime or other offense?	Yes	No
(b) Have you ever been confined in a civilian prison or jail?	Yes	No
(c) Have you ever been confined in a military prison or jail?	Yes	No
(d) Have you ever been engaged in illicit buying, selling or handling of narcotic drugs?	Yes	No
(e) Have you ever been the beneficiary of a pardon, amnesty, rehabilitation decree, other act of clemency or similar action? (If so, explain)	Yes	No
(2) (a) Have you ever been placed in an almshouse (<i>poorhouse or charitable institution</i>)?	Yes	No
(b) Are you a pauper, professional beggar or vagrant?	Yes	No
(c) Are you now afflicted with a physical defect, disease or disability which may affect your ability to earn a living?	Yes	No
(d) Will you be able to support yourself financially in the United States?	Yes	No
(3) (a) Have you ever had one or more attacks of insanity?	Yes	No
(b) Are you now or have you ever been afflicted with psychopathic personality, epilepsy, mental defect, fits, fainting spells, convulsions or a nervous breakdown?	Yes	No
(c) Are you now or have you ever been a narcotic or drug addict or chronic alcoholic?	Yes	No
(d) Have you ever been treated in a hospital, institution or elsewhere for insanity or other mental disorder or for drug or narcotic addiction or alcoholism?	Yes	No
(e) Have you ever had any of the following:		
(A) Tuberculosis in any form?	Yes	No
(B) Leprosy?	Yes	No
(C) Any other dangerous contagious disease?	Yes	No
(4) (a) Are you a polygamist, do you practice polygamy, or do you advocate the practice of polygamy?	Yes	No
(b) Are you or have you ever been a prostitute, procurer, or supported wholly or in part from the proceeds of prostitution?	Yes	No
(c) Are you going to the United States to engage in an immoral sexual act, in prostitution, or other unlawful commercialized vice?	Yes	No
(5) (a) Have you previously applied for a visa to enter the United States either as an immigrant or as a nonimmigrant? (If answer is Yes, state where and when, whether you applied for a nonimmigrant or an immigrant visa and whether the visa was issued)	Yes	No
(b) Have you been refused admission to the United States during the last twelve months? (If the answer is Yes submit evidence that the Attorney General has consented to your reapplying for admission into the United States)	Yes	No
(c) Have you ever been:		
(A) arrested and deported from the United States?	Yes	No
(B) voluntarily removed from the United States at United States Government expense as a person who fell into distress?	Yes	No
(C) removed from the United States as an alien enemy?	Yes	No
(D) removed from the United States at Government expense in lieu of deportation?	Yes	No
(If the answer to any of the above questions is Yes, submit evidence that the Attorney General has consented to your reapplying for admission into the United States.)		
(6) (a) Have you ever attempted to obtain by fraud or willful misrepresentation a visa or other documentation to enter the United States?	Yes	No
(b) Have you ever obtained by fraud or willful misrepresentation a visa or other documentation to enter the United States?	Yes	No
(7) (a) Have you ever registered with a draft board under the selective service laws of the United States? (If answer is Yes, give date, place and classification)	Yes	No
(b) Have you ever applied for relief from training and service in the Armed Forces of the United States? (If answer is Yes, furnish details)	Yes	No
(c) Have you ever departed from or remained outside of the United States to avoid or evade military service in time of war or national emergency?	Yes	No
(8) Can you, if you are over sixteen, read and understand some language or dialect?	Yes	No
(9) Have you for gain ever assisted another alien to enter the United States or try to enter the United States in violation of the laws of the United States?	Yes	No
(10) Are you a former exchange visitor who has not resided abroad for two years following your departure from the United States?	Yes	No
(11) Are you now or have you ever been:		
(a) an anarchist?	Yes	No
(b) an advocate of opposition to all organized government?	Yes	No
(c) an advocate of Communism?	Yes	No
(d) a member of, or affiliated with, the Communist Party or affiliated organization, an organization advocating Communism or a Communist-dominated or controlled organization or an organization advocating the overthrow by force of all organized government or any other similar organization?	Yes	No
(If the answer to any of the above questions is Yes, explain, giving dates and nature of activities or membership.)		

32. (Continued)

(12) Do you intend to enter the United States from Canada, Mexico or an island adjacent to the United States within two years after arrival in such country or island? (If answer is Yes, give the name of transportation company by which you entered or intend to enter such country or island)

Yes

No

33. Were you assisted in completing this application? (If so, give name and address of person or persons assisting you indicating whether relative, friend, attorney, travel agent, or other)

Name

Address

Not applicable

DO NOT WRITE BELOW THE FOLLOWING LINE

The consular officer will assist you in answering the following parts 34 and 35

34. I claim to be exempt from ineligibility to receive a visa and exclusion under item _____ in part 32 for the following reason:

Not Applicable

35. I claim to be a

Second - - - preference quota immigrant under the _____ subquota, Montserrat

Nonquota immigrant.

My claim is based on the following facts:

Parent of U.S. citizen

I understand that I am required to surrender my visa to the United States Immigration Officer at the place where I apply to enter the United States, and that the possession of a visa does not entitle me to enter the United States if at that time I am found to be inadmissible under the immigration laws.

I understand that any willfully false or misleading statement or willful concealment of a material fact made by me herein may subject me to permanent exclusion from the United States and, if I am admitted to the United States, may subject me to criminal prosecution and/or deportation.

I, the undersigned applicant for a United States immigrant visa, do solemnly swear (or affirm) that all statements which appear in this application have been made by me, including the encircling of items in part 32, and are true and complete to the best of my knowledge and belief. I do further swear (or affirm) that, if admitted into the United States, I will not engage in activities which would be prejudicial to the public interest, or endanger the welfare, safety, or security of the United States; in activities which would be prohibited by the laws of the United States relating to espionage, sabotage, public disorder, or in other activities subversive to the national security; in any activity a purpose of which is the opposition to, or the control, or overthrow of, the Government of the United States, by force, violence, or other unconstitutional means; or join, affiliate with, or participate in the activities of any organization which is registered or required to be registered under Section 7 of the Subversive Activities Control Act of 1950. I understand all the foregoing statements, having asked for and obtained an explanation on every point which was not clear to me.

X Sarah Brade

28 (Signature of Applicant)

Subscribed and sworn to before me this 30th day of April, 1965.

SERVICE NO. I have examined these documents and

TARIFF ITEM NO. concur that this applicant

FEE PAID U.S. \$5.00 is eligible to receive a visa.

TOTAL CY EQUIV.

Alan A. Gise, American Vice Consul

(Consular Officer)

ROBERT B. MORLEY

ETITION TO
CLASSIFY STATUS OF
ALIEN RELATIVE FOR
ISSUANCE OF IMMIGRANT VISA

Date filed

Fee stamp

(Read this form and the attached instructions carefully before filling in petition)

TO THE SECRETARY OF STATE:

The petition was filed on Aug. 20, 1964, and is approved.

Status is granted under section 203(a)(2), Imm. & Nat. Act.

The petition is revalidated:

Remarks:

(District Director)

Robert L. Woytch

District Director

Miami, Florida

Sept. 24, 1964

(Date)

(District Director)

(District)

(Date)

(PETITIONER IS NOT TO WRITE ABOVE THIS LINE)

1. Petition is hereby made to classify the status of the alien beneficiary for issuance of an immigrant visa as: (Check one)

- The spouse, child (regardless of age), parent, brother, or sister of a United States citizen.
 The spouse or unmarried child (regardless of age) of an alien lawfully admitted to the United States for permanent residence.

To NATZ-N-600-4/26/64 ← AII-860-927

Block I.—Information Pertaining to Petitioner

2. Name MARY
(First name)

(Middle name)

(Last name)

BRAD
0.00

If you are a married woman, give your maiden name _____

3. Address in United States 844 N.W. 64
(Apt. No.) (Number and street)

MIAMI
(Town or city)

FLA
(State)

Address abroad (if any) _____
(Number and street) (City or town) (Province) (Country)

4. I was born 25/10/19 PLYMOUTH
(Date) (City or town) (State or Province) (Country)

MONTSERRAT
1

5. If you are a citizen of the United States, give the following:

Was your citizenship acquired through birth in the United States, through naturalization, through parentage, or through marriage? NATURALIZATION

If acquired through naturalization, give number of naturalization certificate and date and place of naturalization:
X 8349361 JULY 17, 1964 MIAMI FLA

If acquired through parentage or marriage, have you obtained a certificate of citizenship in your own name based on such acquisition?

If so, give number of certificate:

If not, submit evidence of citizenship in accordance with Instruction 3a(2).

Have you or any person through whom you claim citizenship ever lost United States citizenship?

If so, attach detailed explanation on separate sheet.

6. If you are a lawful permanent resident alien of the United States, give the following:

Alien Registration Number: A-

Date, place, and means of admission for lawful permanent residence

Have you ever lost status as a lawful permanent resident alien?

If so, explain:

Block II.—Information Pertaining to Alien Beneficiary

7. Name of alien SARAH
(First name)

(Middle initial)

BRADE
(Last name)

If this petition is for a married woman give her maiden name _____

8. Alien was born 11-19-1887 PLYMOUTH
(Date) (City or town) (State or Province)

(Country)

9. Relationship of alien to petitioner MOTHER Is the alien related to you by adoption? NO

10. If this petition is for your spouse or child, give the following:

Date and place of your present marriage _____

Number of your prior marriages _____

Number of prior marriages of spouse _____

11. If this petition is for a child, is the child married? _____ Is the child your adopted child? If so, give the names, dates, and places of birth of all other children adopted by you. If none, so state.

12. If this petition is for a brother or sister, are your parents the same as the alien's parents?

If not, submit a separate statement giving full details as to parentage, dates of marriage of parents, and the number of previous marriages of each parent.

13. If separate petitions are also being submitted for other relatives, give names of each and relationship to petitioner.

14. If this petition is for a married brother, sister, son, or daughter of a United States citizen, give the following:

Name of alien's spouse and country of birth _____

Names, birthdates, and countries of birth of alien's children _____

Full address of alien's spouse and children _____

15. Have you ever filed a petition for this alien before? NO

If so, give place and date of filing and result:

16. Has this alien ever been deported from the United States? NO If so, give alien registration number, reason for deportation, and place where deportation hearing was held:

17. Address in the United States where alien will reside 844 N.W. 64 ST18. Present address of alien COOKS HILL ST JOHN'S ANTIQUA

19. Check the appropriate box below and furnish the information required for the box checked:

 Alien will apply for a visa abroad at the American Consulate in AMERICAN CONSULATE BARBADOS
(City in foreign country) (Foreign country) Alien is in the United States and will apply for adjustment of status to that of a lawful permanent resident in
the Office of the Immigration and Naturalization Service at _____, _____

If the application for adjustment of status is denied the alien will apply for a visa abroad at the American

Consulate in _____
(City in foreign country) (Foreign country)

(Signature of petitioner) (See Instruction No. 5)

Block III.—Oath or Affirmation of Petitioner

I swear (affirm) that I know the contents of this petition signed by me and that the statements herein are true and correct.

Mary Brade

(Signature of petitioner) (See Instruction No. 5)

Subscribed and sworn to (affirmed) before me this 20 day of Aug, A.D. 1934, at Montgomery, AL

[SEAL] My commission expires _____

(Signature of officer administering oath)

(Title)

If you need more space to answer fully any questions on this form, use a separate sheet, identify each answer with the number of the corresponding question, and date and sign each sheet.)

Nº 21567

FORM A.

1887 BIRTHS IN THE DISTRICT "C" IN THE ISLAND OF MONTSENNAT REGISTERED BY Wm. A. Bramble Registrar

No.	CHILD	PARENTS		INFORMANT
		Name (if given) Baptismal Name (if different) or Name given without Baptism after Reg- istered and date of insertion	Sex	
	Sarah Elvira			
	Female			
	Illegitimate			
	A.D. 1887	When born Year, day of the Month		
	November 19 th			
	Trants	Where born	Father	Mother
			Name, Rank or Oc- cupation, and Domicile	Name
	Unmarried			
	Phoebe Corbos			
	Phoebe Corbos her x mark			
	December 5 th 1887 at St. Georges		Signature of Father or Mother or other informant	When and Where Registered or Signed by Registrar
	Wm. A. Bramble District Registrar			

I certify the above to be a true and exact copy of entry No. 606 of 1887, in the Register of Births for District "C" Montserrat.



R. C. S. G.

REGISTRAR-GENERAL

No. 14 of 1965

DIVISIONAL POLICE HEADQUATERS,
(CRIMINAL RECORD OFFICE),

MONTSERRAT, W.I.,

15th May 1965

POLICE CERTIFICATE

THIS IS TO CERTIFY that there is no

Criminal Record in the Colony of Montserrat

against Sarah Brade

of Montserrat who is travelling to



and carries Passport/Permit No. Issued

19.....

B. Byers
Assistant Superintendent of Police.

No.

157/65

CRIMINAL RECORD OFFICE,
ANTIGUA, W.I.

Date. 4th May 1965

POLICE CERTIFICATE

THIS IS TO CERTIFY that there is no Criminal Record in the
Colony of Antigua against Sarah Brade
of Montserrat who is travelling to U.S.A.
and carries British passport/permit No. 24924
issued at Antigua on 17th August 1964



J. Sent Cpl #2
Superintendent of Police.

844 N.W. 64, Street

Miami Fla.

June 19, 1965

Mr Alan A. Gise

U.S. Vice Consul

Bridgetown Barbados.

Dear Mr Gise

I want to thank you for your kind letter
of June 16, in which you had requested a statement
from the writer, relative to the support of Mrs Sarah Brade
'my mother!

I here-by state emphatically that I will
become responsible for my mother's welfare as long as
she lives in The United States and that she will not
become a public charge

Obediently yours

Mary Brade

Mary Brade

State of FLORIDA)
County of DADE)

Before me personally appeared MARY BRADE known to me to be
the person described in and who executed the foregoing statement.

WITNESS my hand and official seal, this 21st day of JUNE,
A.D. 1965.

NOTARY PUBLIC STATE of FLORIDA at LARGE
MY COMMISSION EXPIRES OCT. 7, 1967
BONDED THROUGH FRED W. DIESTELHORST

Claire Pontara
NOTARY PUBLIC State of Florida



MOUNT SINAI HOSPITAL

OF GREATER MIAMI



4300 ALTON ROAD • MIAMI BEACH • FLORIDA • 33140

May 19, 1965

TO WHOM IT MAY CONCERN:

Mary Brade has been in the employ of Mount Sinai Hospital since April 27, 1964 as a Maid in the Housekeeping Department. Her present weekly salary is \$50.50.

Very truly yours,

(Miss) Norma Ederer
Director of Personnel

DeL

THE FIRST NATIONAL BANK
OF MIAMI

MIAMI, FLORIDA
33101

May 18, 1965

United States Consul
Bridgetown,
Barbados

Dear Sir:

At the request of Mrs. Mary Brade, we are pleased to inform you that she has maintained an account in our Savings Department in trust for another individual since May, 1961. Mrs. Brade has also maintained a satisfactory account in our Special Checking Department since January, 1965. Our records indicate that there was a consolidated balance of \$6,491.47 on deposit in these accounts as of the close of business May 15, 1965.

Very truly yours,

Merrell L. Stout Jr.
Merrell L. Stout, Jr.
Assistant Cashier

WHA:edw

STATE OF FLORIDA)
)
) SS
COUNTY OF DADE)

Before me this 18th day of May, 1965 personally appeared Merrell L. Stout, Jr. who swears that the above information is true and correct to the best of his knowledge and belief.

Alice A. Baldwin

NOTARY PUBLIC, STATE OF FLORIDA # 1543
MY COMMISSION EXPIRES FEB. 18, 1969
BONDED THROUGH FRED W. DIESTELHORST

The information contained in this letter is confidential and written as a matter of business courtesy, with the understanding that its source and contents will not be divulged and that no responsibility therefore is to attach to this bank or those connected with it. The subject matter and any expression of opinion are subject to change without notice and, while obtained from sources considered reliable, the accuracy of any statement made is not vouched for in any way.

**FOREIGN SERVICE
UNITED STATES OF AMERICA
MEDICAL EXAMINATION OF VISA APPLICANTS**

PLACE

DATE OF EXAMINATION

Anagua 1968
4th May 1965

At the request of the American Consul at

CITY

COUNTRY

Bridgeview

Barbados

I certify that on the above date I examined

NAME

Mrs Sarah Elvina Brade

AGE

SEX

77 Female

I examined specifically for evidence of any of the following conditions:

CLASS A:

TUBERCULOSIS (in any form)

LEPROSY (Hansen's Disease)

DANGEROUS CONTAGIOUS DISEASES:

Actinomycosis

Granuloma Inguinale

Ringworm of scalp

Amebiasis

Keratoconjunctivitis infections

Schistosomiasis

Blastomycosis

Leishmaniasis

Syphilis, infectious stage

Chancroid

Lymphogranuloma Venereum

Trachoma

Favus

Mycetoma

Trypanosomiasis

Filariasis

Paragonimiasis

Yaws

MENTAL CONDITIONS:Feeble-mindedness
(mental deficiency)Previous occurrence of one or more
attacks of insanityMental defect
Narcotic drug addiction

Insanity

Psychopathic personality

Chronic alcoholism

Epilepsy (Idiopathic)

(See proviso, sec. 34.7, USPHS Regs.)

CLASS B:

Physical Defect, Disease, or Disability Serious in Degree or Permanent in Nature Amounting to a Substantial Departure from Normal Physical Well-Being.

CLASS C:

Minor Conditions.

(Check number (1) below or complete number (2))

My examination, including the X-ray and other reports below, revealed:

(1) No defect, disease, or disability

(2) Defect, disease, or disability, or previous occurrence of one or more attacks of insanity, as follows (give class—A, B, or C—diagnosis, and pertinent details*):

*Please see enclosed laboratory report of DR L.

Chest X-ray report #1035 dated 3-5-65 Halberston Hospital

There is no evidence of any active pulmonary pathology

Sputum - No sputum seen

sgd from Dr. Locker

Blood serological report DR weakly positive * from Dr. R. H. Lockwood

Urinalysis report neither albumen nor sugar

from Dr. L. Reddy

SIGNATURE OF MEDICAL TECHNICAL ADVISOR

Dr. R. Mynhardt

TITLE

Medical Doctor

DATE OF FINAL NOTIFICATION

31-VI-65