

APELLIDO (PATERNO) APELLIDO (MATERNO) NOMBRE DE PILA OTROS NOMBRES S/N/X CODE

MILLANES-Noriega, Anselmo

SB - CHECKED

M-452

FECHA DE NACIMIENTO (MES-DIA-AÑO)

12/15/1889

SEXO

M  
 F

LUGAR DE NACIMIENTO

La Colorada, Son.,

FILE NO.

Mex.

DIRECCION

Calle 6 Ave. 18 #1878, Agua Prieta, Son., Mex.

Comply with  
DIA 212.6(a)(1)

OJOS (COLOR)	CABELLO (COLOR)	ESTATURA	PESO	PASAPORTE (CLASE Y NUM.)
Hazel	Gray	5 FT. 10 IN.	162 LBS.	Fm. 13 #1991420

HE LEÍDO LAS RESTRICCIONES Y LA INFORMACIÓN IMPRESA AL DORSO Y CERTIFICO QUE NO ESTOY INCLUIDO EN NINGUNAS DE LAS CATEGORÍAS DESCRIPTAS Y QUE CUMPLIRÉ CON LAS CONDICIONES DE MI ENTRADA A LOS ESTADOS UNIDOS DE AMÉRICA.

FIRMA DEL SOLICITANTE

Anselmo Millanes ✓

APPLICANT INTERVIEWED AND APPLICATION SIGNED BEFORE ME ON

5/3/72

AT DOU

SIGNATURE

Dab. I. Bahadur

APPLICATION

GRANTED

DENIED

FORM I-186 NO.

4930555

**UNITED STATES DEPARTMENT OF JUSTICE  
IMMIGRATION AND NATURALIZATION SERVICE  
REPORT OF INVESTIGATION  
ADMINISTRATIVE PAGE**

**TITLE**

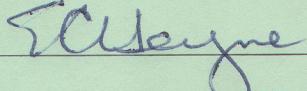
MILLANES-Noriega, Anselmo

**FILE NUMBER**

A14 209 804

REPORT NUMBER 2	DATE 2/30/64 (rek)	PLACE Phoenix	CENTRAL OFFICE AND REGIONAL REFERENCES
OFFICE IN CONTROL OF INVESTIGATION Phoenix, Arizona	G-23 LINE 514	TYPE OF INVESTIGATION Deportation - General (Nonimmigrant Overstay)	
DATE AND PLACE OF BIRTH 1889 - Estacion Torres, Sonora, Mexico	NATIONALITY Mexico	DATE, PLACE AND MANNER OF ENTRY June 3, 1963 - Douglas, Ariz. as B-2	

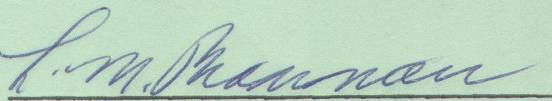
I - File

REVIEWED AND APPROVED (SEE COMMENT)	
DATE 12/30/64	PLACE Phoenix
SIGNATURE 	
NAME AND TITLE E.C. Heyne SUPERVISORY INVESTIGATOR	
REVIEWED AND APPROVED (SEE COMMENT)	
DATE	PLACE
SIGNATURE	
NAME AND TITLE	

APPROVED (REGIONAL OFFICE)  
DATE NAME AND TITLE SIGNATURE

STATUS OF INVESTIGATION PENDING PENDING INACTIVE X CLOSED REFERRED TO CONTROL OFFICE

C L O S E D

  
L.M. Brannan INVESTIGATOR

ROUTE SLIP

Date

1/21/64

To

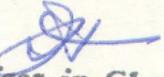
DD-PHO

Room

- |  |  |   |
|--|--|---|
| <input type="checkbox"/> Approval                    | <input type="checkbox"/> Note & Return | <input type="checkbox"/> See me               |
| <input type="checkbox"/> Comment                     | <input type="checkbox"/> Note & File   | <input type="checkbox"/> As requested         |
| <input checked="" type="checkbox"/> Necessary action | <input type="checkbox"/> Signature     | <input type="checkbox"/> For your information |
| <input type="checkbox"/> Per telephone conversation  | <input type="checkbox"/> Call me Ext.  |   |

Remarks

Please see closing report on  
reverse of 6-166.

  
Officer in Charge

U. S. Immigration & Naturalization Service

GPO 975503

c/o American Consulate General

(Tijuana, B. C., Mexico)

From Q. Box 908

Room

San Ysidro, California 92073

UNITED STATES DEPARTMENT OF JUSTICE  
IMMIGRATION AND NATURALIZATION SERVICE  
REPORT OF INVESTIGATION  
ADMINISTRATIVE PAGE

TITLE	FILE NUMBER
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MILLANES-Noriega, Anselmo	A14 209 804
---------------------------	-------------

REPORT NUMBER	DATE	PLACE	CENTRAL OFFICE AND REGIONAL REFERENCES
1	11-17-64	Phoenix	
OFFICE IN CONTROL OF INVESTIGATION		G-23 LINE	TYPE OF INVESTIGATION
Phoenix, Arizona		514	Deportation - General (Nonimmigrant Overstay)
DATE AND PLACE OF BIRTH		NATIONALITY	DATE, PLACE AND MANNER OF ENTRY
1889 - Estacion Torres, Son., Mex.		Mexico	June 3, 1963 - Douglas, Arizona as B-2

I - File

I - OIC, Tijuana, B.C., Mexico

REVIEWED AND APPROVED (SEE COMMENT) *XXXXXXXXXX*

DATE	PLACE
------	-------

11-17-64

Phoenix

SIGNATURE *James L. Turner*

NAME AND TITLE

*James L. Turner, District Director*

REVIEWED AND APPROVED (SEE COMMENT)

DATE	PLACE
------	-------

SIGNATURE

NAME AND TITLE

APPROVED (REGIONAL OFFICE)

DATE NAME AND TITLE SIGNATURE

STATUS OF INVESTIGATION	X PENDING	PENDING INACTIVE	CLOSED	REFERRED TO CONTROL OFFICE
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UNDEVELOPED LEADS

District #35 - Mexico City

1. At Hermosillo, Sonora, Mexico

Will attempt to locate SUBJECT through local address, shown on photostat, or such other sources as may be available. Establish SUBJECT's whereabouts and status, or determine that SUBJECT has been known to be in Mexico subsequent to date of entry shown on photostat.

Relating photostat is attached for use in the investigation and should be returned with the report.

NOV 19 1964

THIS PAGE IS NOT TO BE DISTRIBUTED OUTSIDE THE IMMIGRATION AND NATURALIZATION SERVICE
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UNITED STATES DEPARTMENT OF JUSTICE  
IMMIGRATION AND NATURALIZATION SERVICE

REPORT OF INVESTIGATION

DATE & PLACE OF DEPARTURE FROM U.S.

TITLE

FILE NUMBER

MILLANES-Noriega, Anselmo

SEARCHED INDEXED

A14 209 804

REPORT MADE AT

Phoenix

DATE CATAJUL BY

11-17-64  
(rek)

SEARCHED INDEXED

Lyle M. Brannan, Investigator

XXNOPSIS

PHOTOSTAT RECEIVED FROM BIG MEETIN

D E T A I L S

SEARCHED INDEXED

(D)

Investigation is based on receipt of photostat of entry document indicating that SUBJECT's departure, whereabouts and status are unknown.  
Object: To determine whereabouts and status of SUBJECT.

Efforts to locate SUBJECT by means of Forms G-180, G-139 and G-135 have met with negative results.

Undeveloped leads set out.

STATEMENT

INVESTIGATION

STATION 101 - MIGRATION, POLICE, IMMIGRATION  
Tijuana, Mexico

REPORT MADE AT	DATE
TIJ	1/21/64
DATE & PLACE OF DEPARTURE FROM U. S.	
7/3/63 - Don	
DEPARTED BY: auto	
LOCAL ADDRESS: Calle Frontera #170 Hermosillo, Son.	
LOCATED <input checked="" type="checkbox"/>	NOT LOCATED <input type="checkbox"/>
LOCAL CHECKS:	
POLICE	U. S. CONSULATE
STREET DIRECTORY	TELEPHONE DIRECTORY
PERSONS INTERVIEWED	
(1)	
(2)	
ADDRESS IN U. S.	
OTHER INVESTIGATIVE EFFORTS:	
INVESTIGATOR <i>Mayes</i>	STATION <i>TIJ</i>

UNITED STATES DEPARTMENT OF JUSTICE  
IMMIGRATION AND NATURALIZATION SERVICE  
REPORT OF INVESTIGATION

ADMINISTRATIVE PAGE

TITLE

MILLANES-Noriega, Anselmo

FILE NUMBER

A14 209 804

REPORT NUMBER	DATE	PLACE	CENTRAL OFFICE AND REGIONAL REFERENCES
1	11-17-64	Phoenix	
OFFICE IN CONTROL OF INVESTIGATION	G-23 LINE		TYPE OF INVESTIGATION
Phoenix, Arizona	514		Deportation - General (Nonimmigrant Overstay)
DATE AND PLACE OF BIRTH	NATIONALITY		DATE, PLACE AND MANNER OF ENTRY
1889 - Estacion Torres, Son., Mex.	Mexico		June 3, 1963 - Douglas, Arizona as B-2

I - File  
I - OIC, Tijuana, B.C., Mexico

REVIEWED AND APPROVED (SEE COMMENT)	
DATE	PLACE
11-17-64	Phoenix
SIGNATURE	<i>James L. Turner</i>
NAME AND TITLE	
James L. Turner, District Director	
REVIEWED AND APPROVED (SEE COMMENT)	
DATE	PLACE
SIGNATURE	
NAME AND TITLE	

APPROVED (REGIONAL OFFICE)

DATE

NAME AND TITLE

SIGNATURE

STATUS OF INVESTIGATION

X PENDING

PENDING INACTIVE

CLOSED

REFERRED TO CONTROL OFFICE

UNDEVELOPED LEADS

District #35 - Mexico City

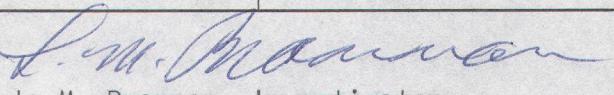
1. At Hermosillo, Sonora, Mexico

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UNITED STATES DEPARTMENT OF JUSTICE  
IMMIGRATION AND NATURALIZATION SERVICE

REPORT OF INVESTIGATION

TITLE		FILE NUMBER
MILLANES-Noriega, Anselmo		A14 209 804
REPORT MADE AT	DATE	BY
Phoenix	11-17-64 (rek)	 Lyle M. Brannan, Investigator

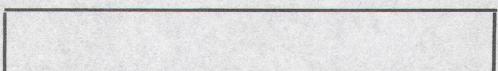
SYNOPSIS

DETAILS

Investigation is based on receipt of photostat of entry document indicating that SUBJECT's departure, whereabouts and status are unknown.  
Object: To determine whereabouts and status of SUBJECT.

Efforts to locate SUBJECT by means of Forms G-180, G-139 and G-135 have met with negative results.

Undeveloped leads set out.



Requesting Office Number <b>#18</b>	PHO
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UNITED STATES DEPARTMENT OF JUSTICE  
Immigration & Naturalization Service  
230 N. First Avenue  
Phoenix, Arizona  
(Address of requesting office)

### AGENCY ADDRESS CHECK REQUEST

File No. <b>A14 209 804</b>
AP No. (If different than File No.)
Date <b>Sept. 15, 1964</b>

TO:  SOCIAL SECURITY ADMINISTRATION  
THROUGH DISTRICT DIRECTOR  
IMMIGRATION AND NATURALIZATION SERVICE  
BALTIMORE, MARYLAND

CHIEF, RECORDS ADMINISTRATION BRANCH  
CENTRAL OFFICE

This Service is seeking the whereabouts of the alien identified below. It is requested that, in accordance with the provisions of section 290 of the Immigration and Nationality Act, all available information be furnished from your records which may be of assistance in establishing his location and identity. Indicate discrepancies, if any, and insert missing or more recent information, if available, on the face or reverse of this form.

#### (1) IDENTIFYING INFORMATION

NAME (Last (CAPS), first, middle)  <b>MILLANES-Noriega, Anselmo</b>	DATE OF BIRTH (OR AGE)  <b>1889</b>	SOCIAL SECURITY ACCOUNT NUMBER
ALIASES (Include nicknames & maiden name)	CITY & COUNTRY OF BIRTH  <b>Estacion Torres Sonora, Mexico</b>	STATE & DATE S.S. NO. ASSIGNED
FATHER'S FULL NAME	SEX  <b>M</b>	COLOR  <b>W</b>
		NATIONALITY  <b>Mexico</b>
MOTHER'S FULL MAIDEN NAME		

#### (2) RESIDENCE (List last three - Latest first)

AS OF (Date)	NUMBER & STREET	CITY OR TOWN & STATE
(1)	<b>Calle Frontera #170, Hermosillo, Sonora, Mexico</b>	
(2)		
(3)		

LATEST ADDRESS IN SS-5 FILE (FOR SOCIAL SECURITY ADMINISTRATION USE ONLY)

#### (3) EMPLOYMENT (List last three - Latest first)

AS OF (Date)	EMPLOYER'S NAME	EMPLOYER'S ADDRESS
(1)		
(2)		
(3)		

Lyle M. Brannan

Name of requesting officer

Investigator

Title

/rpv

FOR SEARCHER'S USE ONLY

#### REPORT OF SEARCH

USE REVERSE FOR REMARKS NOT INSERTED  
IN ABOVE SPACES AND FOR SOCIAL SECURITY  
ADMINISTRATION EMPLOYMENT INFORMATION

RECORD HAS BEEN LOCATED WHICH APPEARS TO RELATE.  
DISCREPANCIES NOTED.

UNABLE TO IDENTIFY RECORD ON BASIS OF ABOVE INFORMATION.

*4-2150*

Number or signature of searcher

DATE OF FINAL SEARCH

*10-22-64*

(4) FOR SOCIAL SECURITY ADMINISTRATION USE ONLY

EMPLOYER'S NAME AND ADDRESS	EMPLOYER'S IDENTIFICATION NUMBER	PERIOD OF EMPLOY- MENT (Last month of last quar- terly reporting period)

**CLERK** \_\_\_\_\_ **DATE OF**  
**NUMBER** \_\_\_\_\_ **SEARCH** \_\_\_\_\_

**CLERK NUMBER** \_\_\_\_\_ **DATE OF SEARCH** \_\_\_\_\_

**CLERK** \_\_\_\_\_ **DATE OF SEARCH** \_\_\_\_\_

230 NORTH FIRST AVE.  
PHOENIX, ARIZONA  
RECEIVED IN PHOENIX ATTORNEY'S OFFICE  
U. S. IMMIGRATION SERVICE  
OCT 30 11 28 AM 1964

Name (Last in CAPS)

First

Middle

File No.

MILLANES-Noriega, Anselmo

A14 209 804

Alias

M455

Pho 8K1/64

Date of Birth

1889

Country of Birth

Mexico

Nationality

Mexico

Place of Entry

Douglas, Arizona

Date of Entry

6/3/63

Search C.O. Index for following:

I-94 .....  I-100 .....  I-157 .....  I-174 .....  I-190 .....

I-95 .....  I-103 .....  Other visa ..... *NOT THAN A  
NO RECORD (Visa, Registry, R. P., etc.)*

Furnish any relating file for consolidation with **A14 209 804**

Furnish a copy of.....

Furnish location of file.....

REMARKS: Nonimmigrant overstayed **HSA** **165 D 130** Requesting Office **PHO INV/LMB**

RECEIVED

Sep 26 1959 PH 164

ENTRANCE INDEX

RECEIVED  
U. S. IMMIGRATION AND  
NATURALIZATION SERVICE  
Oct 5 11 57 AM 1964  
230 NORTH FIRST AVE.  
PHOENIX, ARIZONA

District	#18	PHO
Sub-office		

UNITED STATES DEPARTMENT OF JUSTICE  
Immigration and Naturalization Service

SEP 21 1964  
NR 9-23 721  
File No.  
A14 209 804  
Date  
Sept. 15, 1964

DIRECTOR, FEDERAL BUREAU OF INVESTIGATION,  
DEPARTMENT OF JUSTICE,  
Washington 25, D. C.

Attention: NAME CHECK SECTION

Please furnish any derogatory information contained in any file — other than fingerprint records — which your Bureau may have concerning the following person:

NAME (Surname in CAPS, First, Middle) <b>MILLANES-Noriega, Anselmo</b>					DATE OF BIRTH <b>1889</b>	SEX <b>M</b>	RACE <b>WW</b>	MARITAL STATUS <b>S <input type="checkbox"/> M <input type="checkbox"/> D <input type="checkbox"/> W <input type="checkbox"/></b>
					PLACE OF BIRTH (City, province or state, country) <b>Estacion Torres, Son., Mex.</b>	PRESENT NATIONALITY <b>Mexico</b>		
ALIASES (Identify maiden name or nicknames)					PARENTS' NAMES (Include present address, if known)			
HEIGHT	WEIGHT	EYES	HAIR	COMPLEXION	IDENTIFYING MARKS OR SCARS			
RESIDENCE LAST FIVE YEARS (Street & No., RFD, etc.) (City, State and Country) <b>Calle Frontera #170, Hermosillo, Sonora, Mexico</b>					FROM		TO	
PRIOR RESIDENCES, IF AVAILABLE								
EMPLOYMENT LAST FIVE YEARS (Employer's name and address)					OCCUPATION OR PROFESSION	FROM	TO	
PRIOR OCCUPATIONS (Not included in above)								
SPOUSE (Full name & any other names used, & present address, if not same as above)					DATE OF BIRTH			
					PLACE OF BIRTH (City, province or state, country)			
ORGANIZATIONS (Include any societies, clubs, etc., with which now or previously affiliated)					<i>Based upon data submitted, no identifiable information pertaining to your inquiry has been found in FBI files. This is the result of a request for an FBI file check. Previous numbers assigned and is not to be construed as a clearance.</i>			
LAST ADMISSION TO U. S. (Date, port and status) <b>6/3/63 Douglas, Arizona</b>			PRIOR ENTRIES AND DEPARTURES (Dates and ports or if numerous, list years when previously in U. S.)					
PREVIOUS REPORTS FURNISHED BY FBI: Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> If yes, attach list of reports			PREVIOUS NUMBERS ASSIGNED (Mili. S/N; passport; social security; FBI; etc. Identify each)					
REASON FOR REQUEST APPLICANT FOR: <input type="checkbox"/> ADM. TO U. S. <input type="checkbox"/> ADJ. OF STATUS <input type="checkbox"/> NATZ. <input type="checkbox"/>		DEPORTATION PROCEEDINGS	<input type="checkbox"/> BENEF. PB #: <input type="checkbox"/> SPONSOR PB #:			FOR RELIEF OF	OTHER (Specify) <b>Nonimmigrant overstay</b>	

RETURN TO:

DISTRICT DIRECTOR,

U. S. Immigration and Naturalization Service  
312 Old Post Office Bldg., 12th & Penna. Ave., N.W.  
Washington 25, D. C.

(2)

FBI—NAME CHECK SECTION

Assistant Commissioner  
Investigations

District	#18	PHO
Sub-office		

UNITED STATES DEPARTMENT OF JUSTICE  
Immigration and Naturalization Service

File No.	A14 209 804
Date	Sept. 15, 1964

DIRECTOR, FEDERAL BUREAU OF INVESTIGATION,  
DEPARTMENT OF JUSTICE,  
Washington 25, D. C.

INV/LMB:rpv

Please furnish a copy of any criminal record shown in the fingerprint records of your Bureau concerning the following person. Fingerprints  Attached  Unavailable.

NAME (Surname in CAPS, First, Middle) <b>MILLANES-Noriega, Anselmo</b>		DATE OF BIRTH <b>1889</b>	SEX <b>M</b>	RACE <b>WW</b>	MARITAL STATUS <b>S <input type="checkbox"/> M <input type="checkbox"/> D <input type="checkbox"/> W <input type="checkbox"/></b>	
		PLACE OF BIRTH (City, province or state, country) <b>Estacion Torres, Son., Mex.</b>		PRESENT NATIONALITY <b>Mexico</b>		
ALIASES (Identify maiden name or nicknames)		PARENTS' NAMES (Include present address, if known)				
HEIGHT	WEIGHT	EYES	HAIR	COMPLEXION	IDENTIFYING MARKS OR SCARS	
RESIDENCE LAST FIVE YEARS (Street & No., RFD, etc.) (City, State and Country) <b>Calle Frontera #170, Hermosillo, Sonora, Mexico</b>					FROM	TO
PRIOR RESIDENCES, IF AVAILABLE						
EMPLOYMENT LAST FIVE YEARS (Employer's name and address)		OCCUPATION OR PROFESSION <b>ON BASIS OF DATA FURNISHED UNABLE TO LOCATE ARREST RECORD IN FBI IDENTIFICATION DIVISION. SUGGEST YOU FORWARD FINGERPRINTS OR OTHER IDENTIFYING DATA WHEN AVAILABLE.</b>			FROM	TO
PRIOR OCCUPATIONS (Not included in above)						
SPOUSE (Full name & any other names used, & present address, if not same as above)		DATE OF BIRTH				
		PLACE OF BIRTH (City, province or state, country)				
ORGANIZATIONS (Include any societies, clubs, etc., with which now or previously affiliated)						
LAST ADMISSION TO U. S. (Date, port and status) <b>6/8/63 Douglas, Arizona</b>		PRIOR ENTRIES AND DEPARTURES (Dates and ports or if numerous, list years when previously in U. S.)				
PREVIOUS REPORTS FURNISHED BY FBI: Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> If yes, attach list of reports		PREVIOUS NUMBERS ASSIGNED (Milit. S/N; passport; social security; FBI; etc. Identify each)				
REASON FOR REQUEST APPLICANT FOR: <input type="checkbox"/> ADM. TO U. S. <input type="checkbox"/> ADJ. OF STATUS <input type="checkbox"/> NATZ.		DEPORTATION PROCEEDINGS		<input type="checkbox"/> BENEF. PB #:	OTHER (Specify) <b>Nonimmigrant overstay</b>	
				<input type="checkbox"/> SPONSOR PB #:	FOR RELIEF OF	

RETURN TO:

DISTRICT DIRECTOR,

U. S. Immigration and Naturalization Service  
312 Old Post Office Bldg., 12th & Penna. Ave., N.W.  
Washington 25, D. C.

(1)

FBI—IDENTIFICATION DIVISION

Assistant Commissioner  
Investigations

		FILE NO. A14 209 804
MILLANES-Noriega, Anselmo		AREA B      G-23 Lines No. 514
NAME (Last, (IN CAPS), First, Middle)		
ASSIGNED TO  LMB		Date Assigned 9/4/64
Call-Up		
11/4/64		
Classification approved by ECD		
Received <input checked="" type="checkbox"/> 9/4/64		
Trans. In <input type="checkbox"/> (Date)		

*OK  
ACB*

District	#18	PHO
Sub-office		

UNITED STATES DEPARTMENT OF JUSTICE  
Immigration and Naturalization Service

File No.	A14 209 804
Date	Sept. 15, 1964

g 139  
180 sent

INV/LMB:rpv

X

NAME (Surname in CAPS, First, Middle) <b>MILLANES-Noriega, Anselmo</b>					DATE OF BIRTH <b>1889</b>	SEX <b>M</b>	RACE <b>HW</b>	MARITAL STATUS <b>S <input type="checkbox"/> M <input type="checkbox"/> D <input type="checkbox"/> W <input type="checkbox"/></b>	
					PLACE OF BIRTH (City, province or state, country) <b>Estacion Torres, Son., Mex.</b>	PRESENT NATIONALITY <b>Mexico</b>			
ALIASES (Identify maiden name or nicknames)					PARENTS' NAMES (Include present address, if known)				
HEIGHT	WEIGHT	EYES	HAIR	COMPLEXION	IDENTIFYING MARKS OR SCARS				
RESIDENCE LAST FIVE YEARS (Street & No., RFD, etc.) (City, State and Country) <b>Calle Frontera #170, Hermosillo, Sonora, Mexico</b>					FROM		TO		
PRIOR RESIDENCES, IF AVAILABLE									
EMPLOYMENT LAST FIVE YEARS (Employer's name and address)					OCCUPATION OR PROFESSION	FROM		TO	
PRIOR OCCUPATIONS (Not included in above)									
SPOUSE (Full name & any other names used, & present address, if not same as above)					DATE OF BIRTH				
					PLACE OF BIRTH (City, province or state, country)				
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REASON FOR REQUEST APPLICANT FOR: <input type="checkbox"/> ADM. TO U. S. <input type="checkbox"/> ADJ. OF STATUS <input type="checkbox"/> NATZ. <input type="checkbox"/>		DEPORTATION PROCEEDINGS		<input type="checkbox"/> BENEF. PB#: <input type="checkbox"/> SPONSOR PB#:		FOR RELIEF OF		OTHER (Specify) <b>Nonimmigrant overstay</b>	

DISTRIBUTION: (Check appropriate block)

<input type="checkbox"/> (1) FBI IDENT	<input type="checkbox"/> (2) FBI NCS	<input type="checkbox"/> (5) WDO	<input type="checkbox"/> (6) CHIEF INV SEC
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(4)

FILE COPY

UNITED STATES DEPARTMENT OF JUSTICE  
IMMIGRATION AND NATURALIZATION SERVICE

Inv - rek

230 N. First Avenue  
Phoenix 25, Arizona  
February 24, 1964

Número de Archivo.  
Fecha

Anselmo Millanes-Noriega  
Calle Frontera #170  
Hermosillo, Sonora, Mexico

Begún el archivo de esta oficina, Anselmo Millanes-Noriega (Nombre o nombres) fué admitido (fueron admitidos) (bajo caución) a los Estado Unidos para permanecer condicionalmente por un plazo determinado. No se ha comprobado en esta oficina que dicha persona (o personas) haya (o hayan) partido de los Estados Unidos.

A fin de mantener al corriente nuestro archivo, le rogamos se sirva llenar los espacios correspondientes al dorso de este formulario y

Devolver el formulario a esta oficina en el sobre que le incluimos. No es necesario ponerle estampillas siempre y cuando se deposite en el correo en cualquier lugar de los Estados Unidos.

Enviar el formulario por correo o entregarlo en persona al Consulado de los Estados Unidos más cercano, y solicitar que éste lo remita directamente a esta oficina.

Muy atentamente,

JAMES L. TURNER  
DISTRICT DIRECTOR

**SIRVASE MARCAR CON UNA CRUZ LA INFORMACION  
CORRESPONDIENTE E INSERTAR LOS DATOS SOLICITADOS**

La persona de quien se solicitan informes:

- Se marchó de los Estados Unidos, partiendo de \_\_\_\_\_, Lugar de Partida  
en \_\_\_\_\_, por \_\_\_\_\_, Medio de transporte
- Solicitud la profroga (o se le ha concedido) de estancia provisional ante la Oficina de Inmigración y Naturalización en \_\_\_\_\_, Lugar
- Solicitud una modificación de su condición legal en la Oficina de Inmigración y Naturalización en \_\_\_\_\_, Lugar
- Puede comunicarse con la persona en la siguiente dirección:

\_\_\_\_\_ Calle \_\_\_\_\_ Ciudad \_\_\_\_\_ Estado o Provincia País \_\_\_\_\_

- Tiene los siguientes familiares y amigos residentes en los Estados Unidos que podrán informar respecto a su paradero:

\_\_\_\_\_ Nombre \_\_\_\_\_ Dirección \_\_\_\_\_ Ciudad \_\_\_\_\_ Estado \_\_\_\_\_

\_\_\_\_\_ Nombre \_\_\_\_\_ Dirección \_\_\_\_\_ Ciudad \_\_\_\_\_ Estado \_\_\_\_\_

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- No tenemos información alguna. Ninguna de las circunstancias anteriores son aplicables (Encaso de poner cruz en esta casilla, sírvase suministrar en el espacio que sigue, bajo OBSERVACIONES cualquier información que permita descubrir el paradero de la persona de quien se solicitan informes).

**OBSERVACIONES**

ENCASO DE PONER CRUZ EN ESTA CASILLA, SÍRVASE SUMINISTRAR EN EL ESPACIO QUE SIGUE, BAJO OBSERVACIONES, CUALQUIER INFORMACIÓN QUE PERMITA DESCUBRIR EL PARADERO DE LA PERSONA DE QUIEN SE SOLICITAN INFORMES.

\_\_\_\_\_ Firma \_\_\_\_\_

\_\_\_\_\_ Dirección \_\_\_\_\_