



PERSONAL IDENTIFICATION

..... APO: IDENT NO.:
(First) (Int.)

AGE: HT.: WT.:

HAIR: EYES:

SEX: BUILD: SCARS AND MARKS:

PLACE OF BIRTH:
(City) (State or Province) (Country)

DATE OF BIRTH: NATIONALITY:

DEPENDENT OF:
(Name) (Rank) (ASN)

EMPLOYED BY
(Organization) (APO)

ORGANIZATION OR UNIT DATE TAKEN:
TAKING FINGERPRINTS:

REMARKS:

DECLASSIFIED AND RELEASED BY
CENTRAL INTELLIGENCE AGENCY
SOURCE METHOD EXEMPTION 3B2D
NAZI WAR CRIMES DISCLOSURE ACT
DATE 2008

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