

DEPARTMENT OF STATE
DIVISION OF SECURITY
REQUEST FOR SECURITY INFORMATION

[Handwritten initials]

To: DEPUTY DIRECTOR OF PLANS (CIA) From: WD Date: 9/13/61

DO NOT WRITE ABOVE THIS LINE

I NAME: OSTROWSKI, Radoslaw (If married women include maiden name) DATE OF BIRTH: 1887 10/23/1887 PLACE OF BIRTH: Kosvick, Poland

ALIASES AND NICKNAMES: _____ SEX: M MARITAL STATUS: _____ CITIZENSHIP: Poland

ADDRESS: Poland, Germany, England (immigrant from) OCCUPATION AND NAME AND ADDRESS OF EMPLOYER: Retired Journalist now stateless

ADDITIONAL IDENTIFYING DATA
Destination in U.S.: Dr. Halina Minkovich - daughter - 613 Alameda Court, Dayton, Ohio.

CONTROL: THIS REQUEST PLACED WITH THE DIVISION OF SECURITY BY:

DIVISION OR AGENCY: VISA OFFICE SECURITY BRANCH REASON FOR REQUEST, OR TYPE OF PROGRAM: VISA SECURITY CASE
DATE: 9/13/61
NAME OF REQUESTING OFFICER: [Handwritten]

II RESULTS OF THIS REQUEST FOR SECURITY INFORMATION:
 NO RECORD SECURITY INFORMATION ATTACHED
 NO DEROGATORY INFORMATION OTHER (Use reverse side for reporting)

CHECKED BY: _____ DATE: _____

III FOR USE OF DIVISION OF SECURITY:

MEMORANDUM COORDINATION			
Date	26 Sep 61	INITIALS	SRK
RI ANALYST			
DIV.	BRANCH		
EE	ER		MS
ON	G. B. S.		
EDITOR			
J. [Handwritten]			

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COORDINATION WITH State