

PERSONALITY FILE ACTION REQUEST

NOTE: SEE INSTRUCTIONS ON REVERSE SIDE TYPE OR PRINT

TO: RID [] Section Room GA-20 Tube Address DW-6 DATE

FROM: Name Office Room Phone Tube Address

1. TYPE ACTION OPEN AMEND 2. FILE RESTRICTED YES NO 3. PERMANENT CHARGE YES NO

4. TRUE NAME (Last) (First) (Middle) 5. NO. D1 E2

6. NAME VARIANTS AND TELECODES (see Instructions, item 6)

Table with columns: TYPE, (Last), (First), (Middle). Rows include WALTER, WURDIG, Walter, H2, H2, H2.

7. SEX (F) (M) DATE OF BIRTH (M) (D) (Y) 9. COUNTRY OF BIRTH 10. CITY/TOWN OF BIRTH

11. CITIZENSHIP 12. OCCUPATION (clear text) OCC. CODE 13. SWL

14. ORGANIZATION OR INTELLIGENCE AFFILIATION OI CODE

15. DOCUMENT SYMBOL & NUMBER DATE 16. RESIDENCE

17. COMMENTS (text for Index cards)

DECLASSIFIED AND RELEASED BY CENTRAL INTELLIGENCE AGENCY SOURCES METHOD EXEMPTION 3B2D NAZI WAR CRIMES DISCLOSURE ACT DATE 2007

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18. COUNTRY OF LOCATION CODE 19. ACTION DESK CODE 20. SECONDARY DESK CODE

21. INFORMATION ADDRESSEES

22. CRYPTONYM HAND CARRY OR FORWARD BY TUBE IF TRUE NAME APPEARS ABOVE.

23. SIGNATURE OF REQUESTER