WORLD WAR II ALIEN ENEMY INTERNMENT CASE FILE REQUEST

1) Name of Evacuee:______________________________________________________________

2) Department of Justice case file number:__________________________________________

Name of Requester:____________________________________________________________________

Address:____________________________________________________________________________

____________________________________________________________________________________

____________________________________________________________________________________

____________________________________________________________________________________

If requestor is not one (1) above, please have evacuee sign under the statement below, or provide an explanation of why such permission cannot be obtained.

I hereby give permission to______________________________________________________________
to request an electrostatic copy of my World War II Alien Enemy Internment case file.

Signature:____________________________________________________________________________

Permission cannot be obtained because:

____________________________________________________________________________________

____________________________________________________________________________________

____________________________________________________________________________________

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