

DOCUMENT REQUEST FORM

Case No. _____ Requester: TR Date Recd _____
 True Name: Bello Americo Rodriguez 63 / 1 Extension _____
 Alias (including middle name): [Redacted] 57
 Address to be used: Washington, D.C.
 States or cities with which Subject is familiar: _____
 Height: 5'10" Weight: 150 Hair: Black Eyes: Dark Blood Type: _____
 Wars fought: _____ Married: _____ Occupations: _____
 Birth date: 27 January 1928 67 Place: San Juan, P.R.

DATA FOR BIRTH CERTIFICATE, AS OF TIME OF BIRTH

Parents' names: Jose L. [Redacted] Mother's maiden name: Elisa Diaz
 FCB: People's Name FOD: People's Name
 Year of Birth: 5 April 1909 Year of Birth: 19 June 1910
 Occupation: Business Occupation: Business
 Residence: San Juan City District name: _____

Number of children born to parents prior to this time: 2
 Specify state or country where documentation will be used: U.S. and Latin America
 Documentation required: 2 Birth Certificates or Driver's License 30h getting this

Security clearance: _____
 Signature sample in color: _____

