

PERSONNEL RECORD QUESTIONNAIRE  
PART I - BIOGRAPHICAL INFORMATION

FORM NO.  
DISPATCH NO.

INSTRUCTIONS: 1. Enter clearly.  
2. Answer all questions. If question is not applicable, write "N.A."  
3. Attach blank pages, if additional space is needed.

SECTION I GENERAL PERSONAL AND PHYSICAL DATA

1. NAME (First) (Middle) (Last) (None)

2. NAME IN NATIVE LANGUAGE OR SCRIPT 3. NAME AT BIRTH (If different than 2001)

SAME AS ABOVE N.A.

4. ALIASES, NICKNAMES, TELECODS, LEGAL CHANGE IN NAME (State time, reason for and place of use)

AL

5. DATE OF BIRTH 6. PLACE OF BIRTH

30 OCTOBER 1915 CHIHUAHUA, MEXICO

7. PERSONAL HABITS (Liquor, drugs, gambling, paraours)

NOT KNOWN TO HAVE ANY OBJECTIONABLE  
PERSONAL HABITS

8. COURT RECORD (Court, date, arrests, charges, punishments, sentences, acquittals)

NOT KNOWN

9. DESCRIPTION (Use American standards of measurements, if possible)

9A. SEX 9B. AGE 9C. APPARENT AGE 9D. HEIGHT 9E. WEIGHT 9F. COMPLEXION 9G. FACE (Shape)

9H. COLOR OF HAIR 9I. COLOR OF EYES 9J. TEETH 9K. BUILD 9L. POSTURE

9M. SCARS AND WOUNDS OR OTHER DISTINGUISHING FEATURES

None

9N. GENERAL APPEARANCE

DISTINGUISHED

9O. PROMINENT FEATURES

PROMINENT NOSE

9P. OTHER IDENTIFYING FEATURES

ATTACH SAMPLES OF SIGNATURE AND HANDWRITING; ALSO DATED PHOTOGRAPH AND FINGERPRINTS, IF OBTAINABLE

FORM 1050 USE 7-59

EMIL HANNA 1857 COPY

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| SECTION II  |                  | CITIZENSHIP  |       |                 |       |    |            |    |
|---|------------------|--|-------|-----------------|-------|----|------------|----|
| 1. PRESENT CITIZENSHIP<br><b>AMERICAN</b>   |                  | 2. NATIONALITY AT BIRTH AND ANY SUBSEQUENT CITIZENSHIPS (If different than item 1)<br><b>MEXICAN</b> |       |                 |       |    |            |    |
| 3. [REDACTED] (of sub-section)  |                  | <b>MEXICO D.F. MEXICO</b>  |       |                 |       |    |            |    |
| 4. PERMANENT ADDRESS (If different than item 1)<br><b>SAME AS ABOVE</b>   |                  |  |       |                 |       |    |            |    |
| 5. IF U.S. NATURALIZED CITIZEN, GIVE NAME, DATE, CITY AND NUMBER OF CERTIFICATE GRANTED   |                  |  |       |                 |       |    |            |    |
| 6. TRAVEL OUTSIDE COUNTRY OF PRESENT RESIDENCE (Countries, dates and purposes)<br><b>1916-1943 - WILCOX, ARIZONA      1947-1949 - PANAMA</b><br><b>1943-1945 - U.S. ARMY</b><br><b>1945-1947 - WASHINGTON, D.C.</b> |                  |  |       |                 |       |    |            |    |
| SECTION III   |                  | OCCUPATIONAL AND FINANCIAL DATA  |       |                 |       |    |            |    |
| 1. PRESENT OCCUPATION<br><b>EXECUTIVE</b>   |                  | 2. TITLE<br>[REDACTED]   |       |                 |       |    |            |    |
|   |                  | 3. SALARY (Per annum)<br><b>NOT KNOWN</b>  |       |                 |       |    |            |    |
| 4. FINANCIAL STATUS (Savings, bank deposits, securities and property)<br><b>NOT KNOWN</b>   |                  |  |       |                 |       |    |            |    |
| SECTION IV  |                  | ORGANIZATIONAL AFFILIATIONS  |       |                 |       |    |            |    |
| 1. MEMBERSHIP IN RELIGIOUS ORGANIZATIONS  |                  |  |       |                 |       |    |            |    |
| 2. PRESENT AND PAST MEMBERSHIP IN PROFESSIONAL AND SOCIAL ORGANIZATIONS; POLITICAL AFFILIATIONS   |                  |  |       |                 |       |    |            |    |
| SECTION V   |                  | EDUCATIONAL DATA   |       |                 |       |    |            |    |
| 1. SCHOOLS  |                  |  |       |                 |       |    |            |    |
| NAME AND LOCATION OF SCHOOL   | NAME OF COURSE   | DATES ATTENDED   |       | DEGREE RECEIVED |       |    |            |    |
|   |                  | FROM   | TO    |                 |       |    |            |    |
|   | <b>NOT KNOWN</b> |  |       |                 |       |    |            |    |
|   |                  |  |       |                 |       |    |            |    |
|   |                  |  |       |                 |       |    |            |    |
|   |                  |  |       |                 |       |    |            |    |
|   |                  |  |       |                 |       |    |            |    |
| 2. LANGUAGES AND DIALECTS   |                  |  |       |                 |       |    |            |    |
| LANGUAGE<br><br>(List below each language in which you possess any degree of competence.)   | COMPETENCE       |  |       |                 |       |    |            |    |
|   | READ             |  | WRITE |                 | SPEAK |    | UNDERSTAND |    |
|   | YES              | NO   | YES   | NO              | YES   | NO | YES        | NO |
| <b>SPANISH</b>  | ✓                |  | ✓     |                 | ✓     |    | ✓          |    |
| <b>ENGLISH</b>  | ✓                |  | ✓     |                 | ✓     |    | ✓          |    |

SECTION VI SPECIAL QUALIFICATIONS AND INTERESTS

1. INDICATE ANY WRITING. GIVE DETAILS INCLUDING TITLES OF BOOKS OR ARTICLES ALSO NAMES OF PUBLISHERS AND PUBLICATION DATES.  
  
NOT KNOWN

2. SPECIAL SKILLS, ABILITIES, HOBBIES SUCH AS RADIO, PHOTOGRAPHY, ETC.  
  
NOT KNOWN.

SECTION VII MILITARY SERVICE

| COUNTRY | DATES |      | UNIT | RANK    | DUTY |
|---------|-------|------|------|---------|------|
|         | FROM  | TO   |      |         |      |
| U.S.A.  | 1943  | 1945 | -    | Officer | -    |

\*IDENTIFYING COUNTRY. INDICATE WHERE SERVICE PERFORMED, DECORATIONS, WHEN AND WHY DISCHARGED. GIVE DETAILS IF WAR PRISONER.  
  
HONORABLE DISCHARGE

SECTION VIII EMPLOYMENT HISTORY

NOTE: INDICATE CHRONOLOGICAL HISTORY OF EMPLOYMENT LISTING LAST POSITION FIRST INCLUDE ANY GOVERNMENT EMPLOYMENT

| 1. INCLUSIVE DATES (From-To)                    | 2. EMPLOYER                         | 3. ADDRESS                                     |
|---|-------------------------------------|--|
| 1. 1947-1949                                    |                                     |  |
| 4. TYPE OF WORK<br>EXECUTIVE                    | 5. SALARY OR EARNINGS<br>\$ - PER - | 6. REASON FOR LEAVING<br>TRANSFERRED TO MEXICO |
| 1. INCLUSIVE DATES (From-To)<br>2. 1949-PRESENT | 2. EMPLOYER                         | 3. ADDRESS                                     |
| 4. TYPE OF WORK<br>EXECUTIVE                    | 5. SALARY OR EARNINGS<br>\$ - PER - | 6. REASON FOR LEAVING                          |
| 1. INCLUSIVE DATES (From-To)                    | 2. EMPLOYER                         | 3. ADDRESS                                     |
| 4. TYPE OF WORK                                 | 5. SALARY OR EARNINGS<br>\$ - PER - | 6. REASON FOR LEAVING                          |
| 1. INCLUSIVE DATES (From-To)                    | 2. EMPLOYER                         | 3. ADDRESS                                     |
| 4. TYPE OF WORK                                 | 5. SALARY OR EARNINGS<br>\$ - PER - | 6. REASON FOR LEAVING                          |

**SECTION IX** **MARITAL STATUS**

|                                    |                                 |   |                                 |                                    |                                   |                                   |
|------------------------------------|---------------------------------|---|---------------------------------|------------------------------------|-----------------------------------|-----------------------------------|
| <input type="checkbox"/> CHECK ONE | <input type="checkbox"/> SINGLE | <input checked="" type="checkbox"/> MARRIED | <input type="checkbox"/> WIDDED | <input type="checkbox"/> SEPARATED | <input type="checkbox"/> DIVORCED | <input type="checkbox"/> ANNULLED |
|------------------------------------|---------------------------------|---|---------------------------------|------------------------------------|-----------------------------------|-----------------------------------|

2. STATE DATE, PLACE AND REASON FOR ALL SEPARATIONS, DIVORCES OR ANNULMENTS

N.A.

WIFE OR HUSBAND: IF YOU HAVE BEEN MARRIED MORE THAN ONCE, INCLUDING ANNULMENTS, USE SHEET FOR FORMER WIFE TO HUSBAND HUSBAND. GIVING DATA REQUIRED BELOW FOR ALL PREVIOUS MARRIAGES.

3. NAME OF SPOUSE: \_\_\_\_\_

4. DATE OF MARRIAGE: 23 Dec \_\_\_\_\_

5. PLACE OF MARRIAGE: \_\_\_\_\_

6. DATE OF BIRTH: 13 Dec \_\_\_\_\_

7. PLACE OF BIRTH: AVOCA, TEXAS

8. NATIONALITY AT BIRTH: American

9. SUBSEQUENT CITIZENSHIPS: \_\_\_\_\_

10. PRESENT RESIDENCE (LAST 12 MONTHS, IF APPLICABLE): SAME AS HUSBAND

**SECTION X** **CHILDREN**

| FULL NAME | SEX | YEAR OF BIRTH | PLACE OF BIRTH    | NATIONALITY AT BIRTH |
|-----------|-----|---------------|-------------------|----------------------|
|           | ✓   | 1940          | TUCSON, ARIZONA   | American             |
|           | ✓   | 1943          | FT. RILEY, KANSAS | "                    |
|           | ✓   | 1948          | PANAMA            | "                    |
|           | ✓   | 1950          | MEXICO            | American             |
|           | ✓   | -             | MEXICO            | "                    |

\*SUBSEQUENT CITIZENSHIPS HELD BY ANY CHILD (Identify child and give his, or her, present address)

**SECTION XI** **FATHER**

|   |                        |                                       |                         |
|---|------------------------|---------------------------------------|-------------------------|
| 1. FULL NAME                                | 2. YEAR OF BIRTH: 1864 | 3. PLACE OF BIRTH                     | 4. NATIONALITY AT BIRTH |
| 5. SUBSEQUENT CITIZENSHIPS: American (1923) | 6. OCCUPATION: —       | 7. PRESENT RESIDENCE: (DECEASED 1951) |                         |

**SECTION XII** **MOTHER**

|   |                        |                                       |                                  |
|---|------------------------|---------------------------------------|----------------------------------|
| 1. FULL NAME                                | 2. YEAR OF BIRTH: 1874 | 3. PLACE OF BIRTH: CHIHUAHUA, MEXICO  | 4. NATIONALITY AT BIRTH: MEXICAN |
| 5. SUBSEQUENT CITIZENSHIPS: American (1923) | 6. OCCUPATION: —       | 7. PRESENT RESIDENCE: (DECEASED 1953) |                                  |

| SECTION XIII   |     | BROTHERS AND SISTERS |               |                |                      |
|--|-----|----------------------|---------------|----------------|----------------------|
| FULL NAME  | SEX |                      | YEAR OF BIRTH | PLACE OF BIRTH | NATIONALITY AT BIRTH |
|  | M   | F                    |               |                |                      |
| 3 SISTERS (NAMES UNKNOWN)  |     |                      |               |                | American             |
| 1 BROTHER (NAME UNKNOWN)   |     |                      |               |                | American             |
|  |     |                      |               |                |                      |
|  |     |                      |               |                |                      |
| <small>4. SUBSEQUENT CITIZENSHIPS HELD BY ANY BROTHER OR SISTER (Identify brother, address) and give his or her present address)</small> |     |                      |               |                |                      |
|  |     |                      |               |                |                      |
| SECTION XIV RELATIVES, ACQUAINTANCES AND CONTACTS  |     |                      |               |                |                      |
| 1. NAMES OF RELATIVES IN ANY GOVERNMENT SERVICE. INDICATE NAME OF GOVERNMENTS AND POSITIONS HELD.  |     |                      |               |                |                      |
|  |     |                      |               |                |                      |
| 2. RELATIVES, FRIENDS, CORRESPONDENTS IN U.S. (Explain relationship)   |     |                      |               |                |                      |
|  |     |                      |               |                |                      |
| 3. NATURALIZATION OF CLOSE RELATIVES IN U.S. (Give name, date, city and number of certificate granted)                                   |     |                      |               |                |                      |
|  |     |                      |               |                |                      |
| 4. NAMES, ALIASES, TELECODES AND RELATIONSHIP OF ALL PERSONS KNOWN TO BE CONNECTED IN ANY WAY WITH ANY INTELLIGENCE SERVICE.             |     |                      |               |                |                      |
|  |     |                      |               |                |                      |
| SECTION XV PERSONAL ASSOCIATIONS   |     |                      |               |                |                      |
| 1. LIST CLOSE ASSOCIATES, INDIVIDUALS OR GROUPS  |     |                      |               |                |                      |
| WILLIAM C. FRANKLIN, 421 E. PRESTON ST, BALTIMORE, MD.   |     |                      |               |                |                      |
| [Redacted]   |     |                      |               |                |                      |
| [Redacted] (ALABAMA, ALA.)   |     |                      |               |                |                      |
| SECTION XVI MISCELLANEOUS  |     |                      |               |                |                      |
|  |     |                      |               |                |                      |
|  |     |                      |               |                |                      |
|  |     |                      |               |                |                      |
|  |     |                      |               |                |                      |
| DATE   |     |                      | SIGNATURE     |                |                      |
|  |     |                      |               |                |                      |

PERSONAL RECORD QUESTIONNAIRE  
PART II - OPERATIONAL INFORMATION

## INSTRUCTIONS TO THE OFFICER

1. This form must be filled in by the case officer or appropriate subordinate in the field, in the best possible information. It is not to be given to the subject.
2. Generally, headquarters will be unable to check on special unless requested to do so. There are no FR parts I and II. However, in an emergency, provisional approval may be given. In such cases, the applicable provisions of the FR parts I and II must be observed. There is no FR part III. There is no FR part IV.
3. This is a completed copy of FR part I only, including copies of subject's name, date of birth, and sex. A stated source of this information is sent to headquarters in FR part II. A copy of this information is also sent to the appropriate field office in FR part III.
4. Fill in all areas of information obtainable. It also may contain information on the subject's activities and special skills of use known to your office.

L. HUFF / 1

## SECTION I

## CONTACT AND DEVELOPMENT

1. INDICATE HOW, WHEN, WHERE, HOW, AND BY WHOM CONTACT WAS MADE.

SEE TMMW-476 + 975, HMMW-1952

2. INDICATE WHETHER A SOURCE OF INFORMATION HAS BEEN IDENTIFIED AND, IF SO, INDICATE THEREIN.

YES - ANY PERSON WHOSE BONA FIDEMESS  
~~IS~~ AUTHENTICATED BY WILLARD C. CURTIS

3. LIST OTHER CASE OFFICERS WHO HAVE HANDLED THIS CASE OR WHO ARE AS OF THIS DATE OR DATE THEY HAVE BEEN KNOWN.

ALLEN W. WARE, TRUE NAME  
HARVEY P. DENENHOLZ, TRUE NAME  
PAUL J. HANSON, TRUE NAME

|   |  |
|---|--|
| <p>SECTION II</p> <p>1. ESTIMATE SUBJECT'S MOTIVATION. Be informed of evidence for residence. Do not use words "subject" or "suppressor".</p> <p><b>SUBJECT IS A MICROTIC AMERICAN CITIZEN, MOTIVATED TO ACTIVELY COMBAT COMMUNISM IN MEXICO FOR PERSONAL &amp; BUSINESS REASONS.</b></p>   | <p>MOTIVATION AND CONTROL</p> <p>2. INDICATE WHAT CONTROL, IF ANY, EXISTS OVER THE SUBJECT. (If no control, or if there is a lack of real control explain.)</p> <p><b>ONS CITIZENSHIP.</b></p> |
| <p>SECTION III</p> <p>1. COVER USED BY SUBJECT AND LAST OFFICER IN THEIR MEETINGS.</p> <p><b>SOCIAL</b></p> <p>2. COVER USED BY SUBJECT IN OBTAINING HIS INFORMATION AND IN CONTACT WITH INFORMANTS.</p> <p><b>BUSINESS CONTACTS</b></p> <p>3. INDICATE SOURCE FOR WHICH SUBJECT THINKS HE WILL WORK IF WORKING.</p> <p><b>KUBARK</b></p>   | <p>COVER</p>   |
| <p>SECTION IV</p> <p>1. EXPLAIN SUBJECT'S AND HIS PART OF PRESENT CONNECTIONS WITH ANY OTHER INDIVIDUALS, LEADERS, OR PART OF SUCH CONNECTIONS TO AVOID SECURITY.</p> <p><b>ODIBEX - SEE HMMW-9884</b></p> <p>2. OTHER INDIVIDUALS (AGENTS, INFORMERS, FRIENDS, AND OTHERS) FOR WHOM SUBJECT IS OR MAY BE ACTIVE.</p> <p><b>RAYMOND G. LEDDY, PERSONAL FRIEND OF SUBJECT, who was told by subject.</b></p> <p>3. EXPLAIN ANY TRAINING SUBJECT HAS HAD IN CLANDESTINE OPERATIONS.</p> <p><b>NONE</b></p> | <p>INTELLIGENCE CONNECTIONS AND TRAINING</p>   |
| <p>SECTION V</p> <p>1. INDICATE OTHER FOREIGN POWER SUBJECT WOULD BE MOST LIKELY TO COLLABORATE WITH BECAUSE OF HIS KNOWLEDGE OF PAST ASSOCIATIONS. EXPLAIN.</p> <p><b>NONE</b></p>   | <p>COLLABORATION POTENTIAL</p>   |

SECTION VI OPERATIONAL USE - CONTACT

SEE TMMW-975, 976; HMMW-1507; HMAA-1952;  
HMMW-9884

MEXICAN BUSINESS CONTACTS, ESPECIALLY LIHUFF/2

TRANSMITTED TO KUBARK, WASHINGTON

NA

~~CUTOUT IN LIHUFF OPERATION~~  
~~SEE MEXI-9872~~

CUT OUT IN LIHUFF OPERATION  
SEE MEXI-9872

SECTION VII PROPOSED LIAISON OR OPERATIONAL ACTIVITY

NA

NA

SECTION VIII AGENCY RELATIONSHIP WITH SUBJECT

NO REMUNERATION



SECRET

|             |   |
|-------------|---|
| SECTION I   | QUALIFICATIONS FOR OTHER OPERATIONS<br>NOTE: THIS SPECIAL ABILITY IS LIMITED TO THE OPERATIONS OF THE SUBJECT AND IS NOT A GENERAL ABILITY.<br><b>ORGANIZING ABILITY.</b>   |
| SECTION II  | COMMITMENTS<br>IF IT IS PROPOSED TO PAY SUBJECT A FUTURE SALARY, INDICATE THE METHOD AND DATE OF PAYMENT, BY WHAT ORGANIZATION, EMPLOYER, SUSPENSION, OR OTHER METHOD, IF ANY, THAT IS ANTICIPATED.<br><b>NO COMMITMENTS</b>  |
|             | EXPLAIN ANY PROMISES, OFFERS, OR AGREEMENTS, WHETHER MADE ORAL OR WRITTEN, CONCERNING EMPLOYMENT OF SUBJECT AND FAMILY.<br><b>NO COMMITMENTS</b>  |
| SECTION III | CIVILIAN AND SECURITY<br>NOTE: FOR CIVILIAN AND OTHER EMPLOYERS, INDICATE ALL EMPLOYERS SINCE THE SUBJECT WAS BORN, AND THE RESULTS OF ALL INVESTIGATIONS.<br><b>ODACID</b>   |
|             | INDICATE ALL CIVILIAN INVESTIGATIONS OF THE SUBJECT BY CIVILIAN ORGANIZATIONS, SUCH AS THE FBI, STATE DEPARTMENT, AND OTHERS.<br><b>ODACID CITIZENSHIP FILES</b>  |
|             | NOTE: THIS SECTION IS FOR THE USE OF THE OPERATIONAL SECURITY OFFICER, AND IS NOT TO BE APPROVED BY THE SECURITY OFFICER. INDICATE ALL CIVILIAN INVESTIGATIONS OF THE SUBJECT BY CIVILIAN ORGANIZATIONS, SUCH AS THE FBI, STATE DEPARTMENT, AND OTHERS.<br><b>SUBJECT IS A VERY DEVOUT AND CONSERVATIVE CATHOLIC.</b> |
|             | EXPLAIN ANY RELATIONS OR CONNECTIONS IN WHICH SUBJECT MAY HAVE BEEN INVOLVED AND WHICH MUST BE REPORTED UNDER THE OPERATIONAL SECURITY ACT.<br><b>NONE KNOWN.</b>   |
| SECTION XII | SUBJECT'S PERSONAL HABITS<br>USE OF LIQUOR, DRUGS, GAMBLING, PARASOLS, ETC.<br><b>NOT KNOWN TO HAVE ANY EXCESSIVE HABITS</b>  |

SECRET

SECRET

|   |                       |
|---|-----------------------|
| SECTION XIII  | AVOCATIONAL INTERESTS |
| <p>1. INDICATE WHETHER SUBJECT'S AVOCATIONAL INTERESTS ARE SUCH AS HE COULD PASS AS A NATIVE OF A COUNTRY OR REGION OTHER THAN HIS OWN. EXPLAIN.</p> <p style="text-align: center;">NOT KNOWN</p> |                       |

|   |         |
|---|---------|
| SECTION XIV   | GENERAL |
| <p>1. INDICATE WHETHER SUBJECT'S LANGUAGE ABILITIES AND OTHER CHARACTERISTICS ARE SUCH AS HE COULD PASS AS A NATIVE OF A COUNTRY OR REGION OTHER THAN HIS OWN. EXPLAIN.</p> <p style="text-align: center;">BI-LINGUAL - COULD PASS FOR MEXICAN BORN OF EUROPEAN PARENTS</p> |         |
| <p>2. INDICATE WHETHER THE POINT IS IN PROGRESS AND IF OBTAINED BY RESEARCH OR ASSISTANT ASSIGNMENT, FILED, CORRESPONDENCE OR OTHER MEANS.</p> <p style="text-align: center;">RESEARCH, FILED</p>   |         |

|   |                  |
|---|------------------|
| SECTION XV  | OPERATIONAL DATA |
| <p>1. IF OTHER THAN ROUTINE ACTION IS REQUIRED TO OBTAIN INFORMATION ON SUBJECT OR SUBJECT IS REQUESTED, PLEASE EXPLAIN. SEE DATA FORM 43B, 43B-1.</p> <p style="text-align: center;">ROUTINE</p> |                  |

|  |   |
|--|---|
| SECTION XVI  | EMERGENCY CONDITIONS RECONTACT ARRANGEMENTS |
| <p>GIVE ALL DETAILS (IE. RELOCATION STATIONS, S. O. WHERE CONTACT BE MADE, WHAT BONA FIDES SHOULD INDIVIDUAL MAKING CONTACT USE)</p> |   |

|              |  |
|--------------|--|
| SECTION XVII | MISCELLANEOUS OPERATIONAL DATA AND REMARKS |
| <p> </p>     |  |

|      |   |
|------|---|
| DATE | SIGNATURE OF SUPERVISOR OR SENIOR OFFICER |
|      | <i>Sheppard-Curtis</i>                    |

SECRET