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104-10514-10035

CIA HISTORICHE REVIEW PROGRAM

EMM SSY OF EL SALVADOR PLEASE PRINT OR TYPE Visilingtin. D. C. VISA OR TOURIST CARD APPLICATION TO TRAVEL TO FL SAU/ADOR FULL NAME CITIZENSHIP PLACE AND DATE OF BIRTH PROFESSION Writer _MARITALSTATUS__single_ RACE White RELIGION PURPOSE OF TRIP tourist LENGTH OF DESIRED STAY 30 days DATE OF EXPECTED ARRIVAL IN EL SALVADOR 4 September 1964 PRESENT ADDRESS NAME OF MINORS TRAVELING WITH APPLICANT none NAME, KINSHIP AND ADDRESS OF NEAREST RELATIVE IN THE U.S.A. none IF APPLICANT GOES ON BUSINESS GIVE NIME OF FIRM SPONSORING THE REQUIRED DOCUMENTS: PASSPORT No. ISSUED BY DATE 7 Feb 63 POLICE CERTIFICATE ISSUED BY_ DATE DATE 29 Nov 62 HEALTH CERTIFICATE ISSUED BY DATE 29 Nov. 62 VACCINATION CERTIFICATE ISSUED BY

I DECLARE UNDER OATH THAT THE ABOVE INFORMATION IS TRUE AND CORRECT, THAT MY ACTIVITIES WILL NOT TEND TO VIOLATE ANY SALVEDOREAN LAWS, THAT I VILL NOT SEEK TO CHANGE MY VISA STATUS, AND THAT I AM IN POSSESSION OF \$250.00 OR ROUND TRIP TICKET.
District of Columbia, 55:
Cn this 2nd day of Sentember 1364

TOURISTS MAY SHOW ANY OTHER DOCUMENT AS PROOF OF CITIZENSHIP:_

before me appeared

personally known to me, who accommedged

the above instrument and executed same in my presence.

Notary Public in and for

APPLICANT S SIGNATURE (II MINOR