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Case No. _____ Requestor: Joseph Stephen Piccolo Date Due: _____
 True Name: Joseph Stephen Piccolo Extension: _____
 Alias (including middle name): [] 07
 Address to be used: D. C. area

Height: 5'11" Weight: 195 Hair: Brown Eyes: Brown
 Wears glasses? No Married? No Occupation: _____
 Birth date: 8 December 1935 Place: Yonkers, N. Y.
 Countries where documentation will be used: East and S. E. U. S.

DATA FOR BIRTH CERTIFICATE, AS OF TIME OF BIRTH

Father's name: Joseph Mother's maiden name: Irene Sutor
 POB: Naples, Italy POB: Yonkers, N. Y.
 Age: 58 Age: 53
 Occupation: Retired - Restauranter Occupation: Housewife
 Residence: Ft. Lauderdale, Fla. Doctor's name: Dr. Conshona
 Number of children born to parents prior to this birth: None

Documentation requested: [] 31
Auto Ins. Card
10 [] drivers license (non-backstopped)
Usual pocket litter

Security clearance: _____

Signature sample in alias: _____

SECRET

IDENTITY SHEET

IDEN

Joseph S. PICCOLO

SECRET

SECRET