

WESTERN DEFENSE COMMAND AND FOURTH ARMY
Office of Assistant Chief of Staff, Civil Affairs Division
WARTIME CIVIL CONTROL ADMINISTRATION

INDIVIDUAL REQUEST FOR REPARATION
(Read attached instructions before filling in this form)

FOR OFFICE USE

1. NAME: (a) _____
(b) Other names _____

2. PERSONAL DESCRIPTION: (a) Sex: Male _____ Female _____
(b) Date of birth: _____ (c) Age _____
(d) Height: _____ feet, _____ inches. Weight _____ lbs.

(e) Marital status: Single _____ Married _____ Widowed _____ Divorced _____
(f) Place of birth: _____

Center _____
Location _____
Family No. _____
Evacuated from _____

3. CITIZEN OF: Japan _____ United States _____ Dual Citizen _____
Alien Registration No. _____

4. ENTRY INTO THE UNITED STATES: (a) Last arrival in the United States at _____ on _____
(Port or place of entry) (Month, day, and year)
(b) Came in by _____
(Name of vessel, Steamship Co., or other means of transportation)
(c) Came as a (Check one): Passenger _____ Crew member _____ Stowaway _____ Other _____
(d) Entered the United States as a (Check one): Permanent resident _____ Visitor _____
Student _____ Treaty merchant _____ Seaman _____ Official of a foreign gov. _____
Employee of a foreign government official _____ Other _____

5. RESIDENCE OUTSIDE THE UNITED STATES:

Departed	Returned	Country	Occupation or activity

6. EDUCATIONAL HISTORY (Include all schools attended, whether in the United States, Japan or any other country):

Type of school	Name of school	Location of school	From--	To--
Grammar school				
High school				
College and postgraduate				
Other school or formal training				

7. EMPLOYMENT HISTORY (Last five (5) years):

From--	To--	Occupation	Name of Employer (Or kind of own business)	City or Town

8. RESIDENCE ADDRESS (Last five (5) years):

From--	To--	Number and Street, or R. F. D.	City or Town	State

9. RELATIVES IN THE UNITED STATES OR ABROAD (Include parents, husband or wife, children, and brothers and sisters whether or not they are members of the immediate household):

Name	Relationship	Sex	Age	Present Address

CERTIFICATE

I have read, or I have had read to me, the above statements concerning myself and certify that they are true and complete. This request is filed voluntarily and I understand that it does not bind the Government of the United States or any agency thereof to seek or guarantee agreement as to my repatriation.

Date _____ Signed _____
 Center _____ Witness _____