



UNITED STATES DEPARTMENT OF JUSTICE

WASHINGTON, D.C. 20530

Address Reply to the
Division Indicated
and Refer to Initials and Number

MAR 2 1977

Mr. Harold Weisberg
Rt. 12
Frederick, Maryland 21701

Dear Mr. Weisberg:

Your Privacy Act request dated February 16, 1977 has been received by the Freedom of Information and Privacy Unit.

To initiate the processing of your request it is necessary for you to submit your notarized signature. For your convenience, enclosed is an identity verification form. Please execute same and return it to the Freedom of Information and Privacy Unit, Room 1134, Office of Management and Finance, Department of Justice, Washington, D.C. 20530.

Your cooperation in this matter is appreciated.

Sincerely,

Diana F. Todd

Diana F. Todd
Executive Officer
Office of Management
and Finance

Enclosure



U.S. DEPARTMENT OF JUSTICE

Identity Verification

In accordance with 28 CFR 16.41, the information on this form is required for all individuals submitting requests by mail under the Privacy Act, P.L. 93-579. This information will be used to verify the applicant's identity and to identify records available to him/her. Failure to furnish this information will result in a denial of the request. False information on this form subjects the requester to criminal penalties.

FULL NAME OF REQUESTER Harold Weisberg
CURRENT ADDRESS Rt 12 Frederick, Md. 21701
DATE OF BIRTH 4/8/13
PLACE OF BIRTH Phila., Pa
EMPLOYEE IDENTIFICATION NO. (if applicable) S.S. 577-36-7290
SIGNATURE [Signature]

Please attach a photocopy of an identifying document (such as a passport, identification badge, drivers license, etc.) OR complete the form below.

I certify that I am the person named above and I understand that any falsification of this statement is punishable under the provisions of 18 USC 1001 by a fine or imprisonment or both.

MOTOR DRIVER LICENSE				
STATE MOTOR VEHICLE ADMINISTRATION, 6501 Ridge Highway, N.E., Glen Burnie, MD 21051				
TYPE OF LICENSE	ISSUE DATE		EXPIRATION DATE	
CLASS D	04/14/76	DUP	1	
DRIVER LICENSE NUMBER		EXPIRATION DATE		
H-216-298-018-275D		04/08/77 T		
SEX	HAIR	SEX	BIRTH DATE	RESTRICTIONS
5-09	180	2	M 04/08/13	

Signature [Signature]
before me this _____ day of _____

[Signature]
WRITTEN SIGNATURE OF DRIVER ON THIS LINE
HAROLD WEISBERG
RT 12 OLD RECEIVER RD
FREDERICK MD 21701

Signature of Notary _____
Commission Expires _____