

LEAVE THIS SPACE BLANK

TYPE OR PRINT

LAST NAME

FIRST NAME

MIDDLE NAME

SEX M

RACE W

SHAW,

CLAY

LIVERGNE

H 76 (Inches)

WT 225

CONTRIBUTOR AND ADDRESS

ALIASES

HAIR

EYES

SUPERINTENDENT
POLICE DEPARTMENT
NEW ORLEANS, LA. 70119

CLAY BERTRAND

GREY

BLUE

DATE OF BIRTH
MARCH 17, 1913

PLACE OF BIRTH
NEW ORLEANS, LA.

SIGNATURE OF PERSON FINGERPRINTED

SCARS AND MARKS

AMPUTATION

YOUR NUMBER

.125-388

LEAVE THIS SPACE BLANK

PLACE FBI NO. HERE

CLASS.

SIGNATURE OF OFFICIAL TAKING FINGERPRINTS



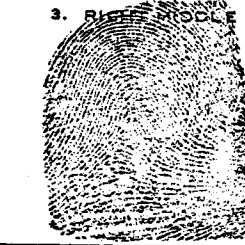
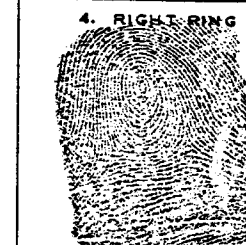
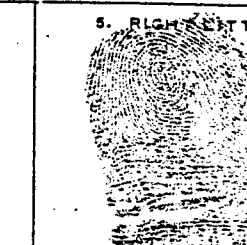



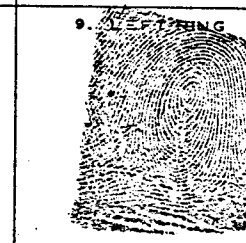
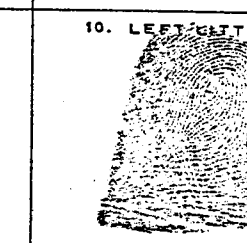
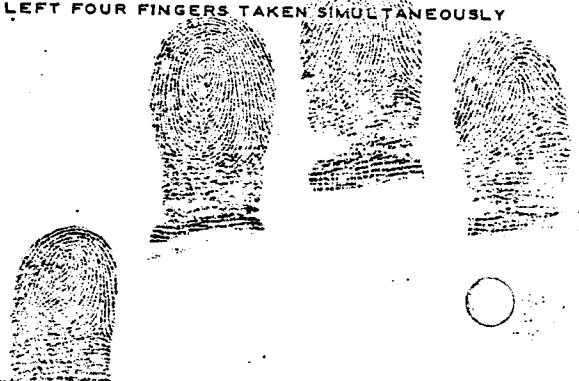


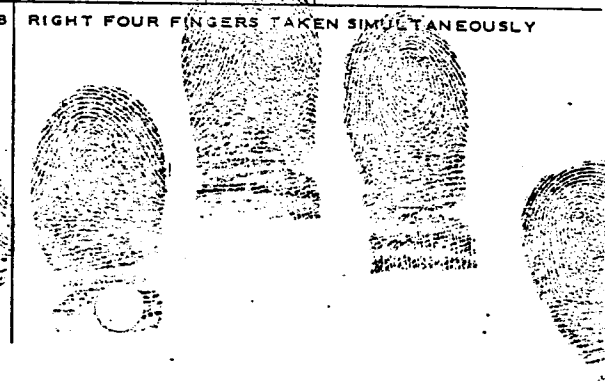
DATE

D. Meltz

3-1-67

CHECK IF NO REPLY IS DESIRED

REF.

1. RIGHT THUMB 	2. RIGHT INDEX 	3. RIGHT MIDDLE 	4. RIGHT RING 	5. RIGHT LITTLE 			
6. LEFT THUMB 	7. LEFT INDEX 	8. LEFT MIDDLE 	9. LEFT RING 	10. LEFT LITTLE 			
LEFT FOUR FINGERS TAKEN SIMULTANEOUSLY 			LEFT THUMB 	RIGHT THUMB 	RIGHT FOUR FINGERS TAKEN SIMULTANEOUSLY 		

FEDERAL BUREAU OF INVESTIGATION, UNITED STATES DEPARTMENT OF JUSTICE
WASHINGTON, D. C. 20537

OCCUPATION RETIRED	EMPLOYER (If U.S. Government, indicate military (give serial number) or civilian employing agency)
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RESIDENCE OF PERSON FINGERPRINTED
! 1313 DAUPHINE, ST. N.O. LA.

CURRENT ARREST OR RECEIPT

DATE ARRESTED OR RECEIVED	CHARGE OR OFFENSE (If code citation is used it should be accompanied by charge)	DISPOSITION OR SENTENCE (List FINAL disposition only. If not now available, submit later on FBI Form R-84 for completion of record.)
3-1-67	Conspiring and entering into an agreement or combination with one or more other persons for the purpose of committing the crime of murder of JOHN F. KENNEDY	
		FOR INSTITUTIONS USE ONLY Sentence expires

If arrest fingerprints sent FBI previously and FBI # unknown, furnish arrest # _____ Date _____

If COLLECT wire reply or COLLECT telephone reply is desired indicate here:

Wire reply Telephone reply Telephone Number including area code _____

INSTRUCTIONS

1. FORWARD ARREST CARDS TO FBI IMMEDIATELY AFTER FINGERPRINTING FOR MOST EFFECTIVE SERVICE.
2. TYPE or PRINT all information.
3. Note amputations in proper finger squares.
4. REPLY WILL QUOTE ONLY NUMBER APPEARING IN THE BLOCK MARKED "YOUR NUMBER."
5. Indicate any additional copies for other agencies in space below - give their complete mailing address including zip code.

SEND COPY TO:

Please Paste Photograph in This Space

Since photograph may become detached indicate name, date taken, FBI number, and arrest number on reverse side whether attached to fingerprint card or submitted later.