

UNITED STATES DEPARTMENT OF JUSTICE  
IMMIGRATION AND NATURALIZATION SERVICE  
WASHINGTON, D.C. 20536

PLEASE ADDRESS REPLY TO

89 AUG 1977

AND REFER TO THIS FILE NO.

CO 2.12-C

Mr. Harold Weisberg  
Route 12 - Old Receiver Road  
Frederick, Maryland 21701

Dear Mr. Weisberg:

Reference is made to your letter dated June 17, 1977, regarding our response to you of June 10, 1977, on the Warren Commission documents referred to this Service for review by the Central Intelligence Agency.

Lee Harvey Oswald's Marine Corps serial number was deleted at the recommendation of a Freedom of Information Act officer at the Marine Corps. It is the practice of this Service to concur with another agency's position on release of information which originated with them. However, in view of the Attorney General's directives, received subsequent to our response to you, we have reconsidered release of Lee Harvey Oswald's serial number to you. Copies of Forms G-135 in their entirety are enclosed. In addition we have reconsidered release of Marina Oswald's immigrant visa, fingerprints and Form I-90, Application by Lawful Permanent Resident Alien for Alien Registration Receipt Card, Form I-151; copies are enclosed.

The telegram dated February 8, 1962, and the memorandum dated January 26, 1962, with the recommendation of a Service officer which was not adopted, remain exempt from disclosure under the provisions of 5 U.S.C. 552(b)(5).

Your request for the Warren Commission documents was directed to the Central Intelligence Agency and not to this Service. We only considered those documents contained in the records of the Central Intelligence Agency for release to you under the Act. Our regulations do not require us to treat your request to that agency as though it had been directed to this Service. If you wish to submit a request to this Service for all records relating to Lee Harvey and Marina Oswald, it will be properly processed under the Freedom of Information Act.

Mr. Harold Weisberg

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With reference to your comment about the removal of information originating with the Department of State, this Service cannot make the initial determination on the availability of information originating with another government agency. As soon as a reply has been received from the Department of State, you will be promptly advised.

A copy of our letter to you dated June 10, 1977, was furnished to the Freedom of Information Act Unit, Department of Justice. However, we do not know if it has been reviewed.

Sincerely,

Stanley E. McKinley  
Associate Commissioner  
Management

Enclosures

UNITED STATES DEPARTMENT OF JUSTICE  
Immigration and Naturalization Service

Form I-102 (Rev. 5-1-50)  
Field Office - New Orleans

Case No. 157-502  
Date December 5, 1951

DIRECTOR, CENTRAL INTELLIGENCE AGENCY  
7430 E Street, N.W.,  
Washington, D.C.

Attention: DEPUTY DIRECTOR, PLANS

Please furnish any derogatory information that may be contained in your files concerning the following person.

NAME (Surname in CAPS, First, Middle) <b>OSWALD, Lee Harvey</b>					DATE OF BIRTH <b>October 18, 1939</b>	SEX <b>M</b>	COLOR <b>BY</b>	MARITAL STATUS S <input type="checkbox"/> M <input checked="" type="checkbox"/> D <input type="checkbox"/> W <input type="checkbox"/>	
PLACE OF BIRTH (City, State or Country) <b>New Orleans, La.</b>					PRESENT NATIONALITY <b>U.S.</b>				
ALIASES (Formerly maiden names or nicknames)					PARENTS' NAMES (include present address, if known) <b>W: Edward Lee Oswald - deceased M: Marguerite Oswald</b>				
HEIGHT <b>5-10</b>	WEIGHT <b>155</b>	EYES <b>Grey</b>	HAIR <b>It. Brn</b>	COMPLEXION	IDENTIFYING MARKS OR SCARS				
RESIDENCE LAST FIVE YEARS (Street & No., Apt., etc.) <b>Apartment 24, No. 4 Kalinin Street</b>					(City, State and Country) <b>Minsk, Russia New Orleans, Louisiana</b>		FROM <b>1959 Sep 1959 10/24/59</b>	TO <b>Present 1959 9/12/59</b>	
PRIOR RESIDENCES, IF AVAILABLE <b>1014 Davenport, East North, Texas</b>					OCCUPATION OR PROFESSION <b>Electrical Technician</b>				
EMPLOYERS LAST FIVE YEARS (Employer's name and address) <b>Minak, Dubala Export-Import Firm, New Orleans, La. U.S. Marine Corps</b>					FROM <b>1959 Sep 1959 10/24/59</b>	TO <b>Present 1959 9/11/59</b>			
PRIOR OCCUPATIONS (Not included in above)					DATE OF BIRTH <b>7/27/51</b>				
SPOUSE (Full name & other names used, & present address, if not same as above) <b>Marina II Oswald</b>					PLACE OF BIRTH <b>Minsk, Russia</b>				
ORGANIZATIONS (Include any societies, clubs, etc., with which now or previously affiliated) <b>Unknown</b>					PRIOR ENTRIES AND DEPARTURES (Date and port of entry, and date of departure, if known, for each entry) <b>None</b>				
LAST ADMISSION TO U.S. (Date, port and status)					PREVIOUS REPORTS FURNISHED BY YOU <input type="checkbox"/> NO <input type="checkbox"/> YES If yes attach list of reports.				
REASON FOR REQUEST <b>ADMA TO U.S.</b>					DEPORTATION PROCEEDINGS <input type="checkbox"/> BENEF. PB # <input type="checkbox"/> SPONSOR PB #		OTHER (Specify) <b>Investigation</b>		
<input type="checkbox"/> NATZ <input type="checkbox"/>					<input type="checkbox"/> ADJ. OF STATUS		FOR REFUG. OF		

RETURN TO  
INVESTIGATIONS  
U.S. Immigration and Naturalization Service  
1170 S.W. 2  
Washington 25, D.C.

(3)  
CENTRAL INTELLIGENCE AGENCY

BY DEC 1951  
Assistant Commissioner  
Investigation

"TWX reply Via Washington  
Field Office INS requested"

UNITED STATES DEPARTMENT OF JUSTICE  
Immigration and Naturalization Service

District <b>San Antonio, Texas</b>
Sub-Office <b>Dallas, Texas</b>

File No. <b>A12 531 002</b>
Date <b>December 5, 1961</b>

X - outside the United States.

NAME (Surname in CAPS, First, Middle) <b>OSWALD, Lee Harvey</b>					DATE OF BIRTH <b>October 13, 1929</b>	SEX <b>M</b>	COLOR <b>W</b>	MARITAL STATUS S <input type="checkbox"/> M <input checked="" type="checkbox"/> D <input type="checkbox"/> W <input type="checkbox"/>
ALIASES (Identify maiden names or nicknames)					PLACE OF BIRTH (City, province or state & country) <b>New Orleans, La.</b>	PRESENT NATIONALITY <b>U. S.</b>		
PARENTS' NAMES (include present address, if known) <b>F: Edward Lee Oswald - deceased M: Marguerite Oswald</b>					IDENTIFYING MARKS OR SCARS			
HEIGHT <b>5-10</b>	WEIGHT <b>155</b>	EYES <b>Blue</b>	HAIR <b>Lt. Brn.</b>	COMPLEXION				
RESIDENCE LAST FIVE YEARS (Street & No., RFD, etc.) (City, state and country) <b>Apartment 24, No. 4 Kalinin Street U. S. Marine Corps</b>					FROM <b>1959 Sep 1959 10/24/56</b>	TO <b>Present 1959 9/11/59</b>		
PRIOR RESIDENCES, IF AVAILABLE <b>7313 Davenport, Fort Worth, Texas</b>								
EMPLOYMENT LAST FIVE YEARS (Employer's name and address) <b>Minsk, Russia Export-Import Firm, New Orleans, La. U. S. Marine Corps</b>					OCCUPATION OR PROFESSION <b>Electrical Technician</b>		FROM <b>1959 Sep 1959 10/24/56</b>	TO <b>Present 1959 9/11/59</b>
PRIOR OCCUPATIONS (Not included in above) <b>Student</b>								
SPOUSE (Full name & other names used, & present address, if not same as above) <b>Marina N. Oswald</b>					DATE OF BIRTH <b>7/17/13</b>			
					PLACE OF BIRTH (City, province or state & country) <b>New Orleans, Louisiana</b>			
ORGANIZATIONS (Include any societies, clubs, etc., with which now or previously affiliated) <b>Unknown</b>								
LAST ADMISSION TO U.S. (Date, port and status)					PRIOR ENTRIES AND DEPARTURES (Dates and ports or if numerous, list years when previously in U. S.)			
PREVIOUS NUMBERS ASSIGNED (Will. 5/74; passport, social security; FBI, etc., identify each) <b>Marine Corps: 1693230</b>					PREVIOUS REPORTS FURNISHED BY FBI <input type="checkbox"/> NO <input type="checkbox"/> YES. If yes attach list of reports.			
REASON FOR REQUEST APPLICANT FOR: <input type="checkbox"/> ADM. TO U.S. <input type="checkbox"/> ADJ. OF STATUS <input type="checkbox"/> NATZ <input type="checkbox"/>			DEPORTATION PROCEEDINGS		<input type="checkbox"/> BENEF. PB #: <input type="checkbox"/> SPONSOR PB #:		OTHER (Specify) <b>Investigation</b>	

DISTRIBUTION: (check appropriate block)

<input checked="" type="checkbox"/> (1) FBI IDENT	<input checked="" type="checkbox"/> (2) FBI DID	<input checked="" type="checkbox"/> (3) CIA	<input type="checkbox"/> (4) MID G-2	<input type="checkbox"/> (5) OSI (USAF)	<input checked="" type="checkbox"/> (6) ONI (USN)	<input type="checkbox"/> (7) WFO	<input type="checkbox"/> (8) CHIEF INV SEC	<input checked="" type="checkbox"/> (9) <i>Marine Corps</i>
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(4)  
FILE COPY

UNITED STATES OF AMERICA  
IMMIGRANT VISA AND ALIEN REGISTRATION

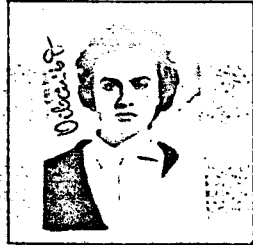
I- 1229544

OF: (Family name) (First name) (Middle name)  
OSWALD, Marina Nikolaeovna

PORT OF  
*NEW YORK*  
I certify that the immigrant named herein arrived and admitted to the United States at this port on the MAASDAM JUN 13 1962  
(Name of vessel or flight No. of aircraft)  
on \_\_\_\_\_ CLASS \_\_\_\_\_  
(Day) (Month) (Year)  
and was inspected by me and {admitted} {detained} for further inquiry by special inquiry officer under  
Symbol M-1  
Section \_\_\_\_\_ of the Immigration and Nationality Act  
Immigrant Inspector.

ACTION OF SPECIAL INQUIRY OFFICER  
I certify that the immigrant herein was (admitted) (excluded) and {no appeal taken} {appeal taken} under  
Symbol \_\_\_\_\_  
Section \_\_\_\_\_ of the Immigration and Nationality Act.  
Special Inquiry Officer.

AMERICAN Embassy  
AT Moscow, U.S.S.R.  
*Jack F. Matlock*  
Jack F. Matlock  
Consul of the United States of America.



FORM I-151 FILED  
G-153 FILED  
JUN 28 1962

Service No. 1152096  
Tariff Item No. 21  
Fee Paid \$20  
Local Cy equiv. 18.00 rubles

ACTION ON APPEAL  
ADMITTED  
EXCLUDED  
DATE

This visa is issued under Section 221 of the Immigration and Nationality Act, and upon the basis of the facts stated in the application.

IMMIGRANT CLASSIFICATION  
NONQUOTA (Symbol) QUOTA (Symbol)  
M-1

VISA PETITION NO., IF ANY Petition approved on February 28, 1962.

IMMIGRANT VISA NO. 52 QUOTA

ISSUED ON (Day) (Month) (Year)  
24 May 1962

THE VALIDITY OF THIS VISA EXPIRES MIDNIGHT AT THE END OF (Day) (Month) (Year)  
23 September 1962

NATIONALITY (If stateless, so state, and give previous nationality)  
Soviet

PASSPORT  
NO. KU-37790

OR OTHER TRAVEL DOCUMENTS (Describe)  
Soviet Vid na Zhitelstvo

ISSUED TO Marina Nikolaeovna OSWALD  
BY Ministry of Foreign Affairs of Moscow, U.S.S.R.

ON 11 January 1962  
EXPIRES 11 January 1964

Statistics

*DMC*

*#12-530-645 Classified*

LEAVE THIS SPACE BLANK

ALIEN

(Last name) OSWALD, (First name) Marina (Middle name) Nikolaevna

SIGNATURE OF PERSON FINGERPRINTED *M. Belouso*  
Marina N. OSWALD

ALIASES

HEIGHT 162cm WEIGHT 110lb  
DATE OF BIRTH July 17, 1941

*Return Reason*

UNITED STATES ADDRESS OF PERSON FINGERPRINTED

STREET 313 Davanport

CITY Fort Worth STATE Texas

DEPARTMENT OF JUSTICE ALIEN NATIONALITY Soviet PLACE OF BIRTH Arkhangelsk obl.











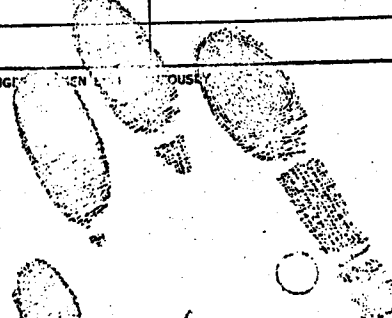


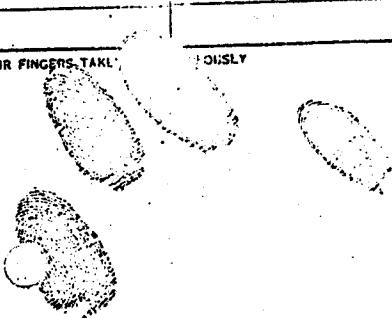
NUMBER *#12-530-645*

HAIR fair CLASS

EYES blue REF.

SCARS AND MARKS no

DATE MAY 24 1962

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 TOGETHER 		LEFT THUMB 	RIGHT THUMB 	RIGHT FOUR FINGERS TAKEN TOGETHER 	

*9-155-Scanned-7/18/62*

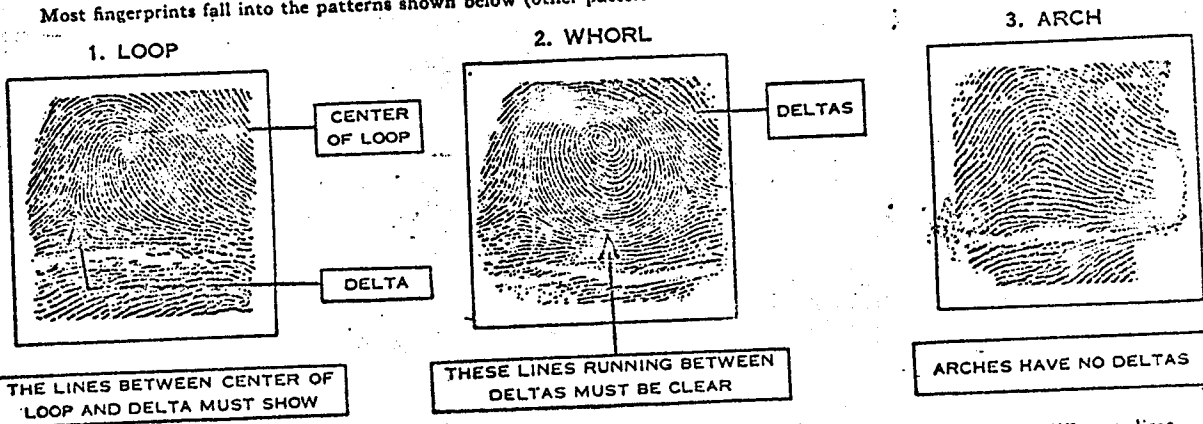
PERSON REGISTRATION FINGERPRINT CHART  
UNITED STATES DEPARTMENT OF JUSTICE  
IMMIGRATION AND NATURALIZATION SERVICE

OFFICIAL STAMP

INSTRUCTIONS

To obtain classifiable fingerprints:

1. Use printer's ink.
2. Distribute ink evenly on inking slab.
3. Wash and dry fingers thoroughly.
4. Roll fingers from nail to nail, and avoid allowing fingers to slip.
5. Be sure impressions are recorded in correct order.
6. If an amputation or deformity makes it impossible to print a finger, make a notation to that effect in the individual finger block.
7. If some physical condition makes it impossible to obtain perfect impressions, submit the best that can be obtained with a memo stapled to the card explaining the circumstances.
8. Examine the completed prints to see if they can be classified, bearing in mind the following:  
Most fingerprints fall into the patterns shown below (other patterns occur infrequently and are not shown here):



- (a) A delta ( $\Delta$ ) is the point at which the lines forming the loop or whorl pattern spread and begin going in different directions. All loop prints have one delta. Whorl prints have two.
  - (b) Loop prints cannot be classified unless the center of the loop and the delta, and the lines between them, are clear.
  - (c) Whorl prints cannot be classified unless the two deltas and the lines connecting the deltas are clear.
  - (d) Arch fingerprints can be classified if a sufficiently clear impression is obtained to permit identification of the pattern as being an arch.
9. If, upon examination, it appears that any of the impressions cannot be classified, new prints should be made. If not more than three impressions are unclassifiable, new prints of these fingers may be taken and pasted over the defective ones. If more than three are unclassifiable, make a new chart.

THIS SPACE FOR FBI USE

RECEIVED UNITED STATES DEPARTMENT OF JUSTICE  
 IMMIGRATION AND NATURALIZATION SERVICE  
 NEW ORLEANS, LA.  
 JUN 25 10 09 AM '63

Form approved  
 Budget Bureau No. 43-0040.8  
 20 JUN 1963

File No. A 12 530 645

To the District Director  
 IMMIGRATION AND NATURALIZATION SERVICE

\$ 5.00	FEE PAID	No. 63-246-1
IMMIGRATION & NATURALIZATION SERVICE		
NEW ORLEANS, LOUISIANA (INFO)		
Date: 35/63	Verified by: [Signature]	

The undersigned, whose alien registration receipt number is A 12 530 645, hereby applies for a new alien registration receipt card.

1.  (a) I am attaching the Form I-151 in my possession and desire a new card because  my name has been changed  the card is mutilated.
- (b) My alien registration receipt document was <sup>lost</sup> destroyed on or about April 1st (Date) under the following circumstances IN PURSE ON STREET IN DALLAS TEXAS, WHILE SHOPPING.
- In case such receipt which was lost is recovered, or I ascertain its whereabouts, I will report the facts and will surrender such receipt or immigrant identification card to the Immigration and Naturalization office nearest my place of residence.

Present Name <u>MARINA N. OSWALD</u>		Present Nationality <u>RUSSIAN</u>
Present address <u>mailing ad. - P.O. BOX 30061 new Orleans, La. 4907 L/C MAGAZINE ST. NEW ORLEANS, LA</u>		
Name at time of registration and fingerprinting <u>SAME</u>		
Name at time of lawful admission for permanent residence <u>SAME</u>		
Admitted at <u>Port of NEW YORK</u> (city or town)	(state) <u>N.Y.</u>	Date of admission
Name of vessel or other means of conveyance <u>"MASS DAM" HOLLAND-AMERICAN</u>	Destination in U.S. at time of admission <u>FT. WORTH TEXAS</u>	
Birthdate <u>JULY 17 1944</u>	Birthplace <u>SEVERO-DVENSKE</u> (city)	(country) (state) <u>USSR</u>
Dates of any absence from the U.S. for 1 year or longer, since lawful admission for permanent residence <u>NONE</u>		

I CERTIFY that the information above is true and correct to the best of my knowledge and belief.

Form G-28.24, G-28.25, G-28.26  
 Date: 6/26/63 Filed: 6/27/63  
 Signature of applicant: [Signature]



1. THIS application shall be used to apply for an alien registration card in lieu of one lost, mutilated or destroyed, or in a changed name. (Note: Upon request, evidence of registration surrendered by a lawful permanent resident alien on other than Form I-151, such as AR-3 or 2-103, will be replaced with Form I-151 without fee or application.)
2. Submit this application in single copy only.
3. **DOCUMENTARY EVIDENCE** - An applicant for a new alien registration receipt card in a changed name, whose name has been changed after registration by order of court or by marriage, shall attach appropriate documentary evidence of such change to this application.
4. **PHOTOGRAPHS** - You are required to send with this application 2 identical photographs of yourself taken within 30 days of the date of this application. These photographs must be 1 1/2 X 1 1/2 inches in size, and the distance from top of head to point of chin should be approximately 1 1/4 inches. They must NOT be pasted on the cards or mounted in any other way, must be on thin paper, have a light background, and clearly show a front view of your face without hat. Snapshots, group or full-length portraits will not be accepted. DO NOT SIGN YOUR PHOTOGRAPHS. Using crayon or soft pencil to avoid possible mutilation of the photographs, write your alien registration number lightly on the reverse of the photographs.
5. **DATE OF YOUR ARRIVAL** - If you do not know the exact date of your arrival in the United States, or the name of the vessel or port, and you cannot obtain this information by consulting your family or friends who came over with you, give the facts of your arrival as you remember them in the appropriate blank spaces on the first page of this form. Your Immigrant Identification Card or your passport, ship's card, or baggage labels, if you have them, may help you to answer these questions.
6. **FEE** - A fee of five dollars (\$5) must accompany this application. Remittances should be made payable to the "Immigration and Naturalization Service, Department of Justice." If residing in the Virgin Islands, remittances should be drawn in favor of the "Commissioner of Finance of the Virgin Islands." If residing in Guam, remittances should be drawn in favor of the "Treasurer, Guam." If you mail this application, attach money order or check. DO NOT SEND CASH. The fee is required for filing application and is not returnable regardless of action taken thereon.

TO APPLICANT.—Do not write below this line.

<p>For use in searching Records of Arrival</p> <p style="text-align: center;"><b>RECORDS EXAMINED</b></p> <p>Card index _____</p> <p>Index books _____</p> <p>Manifests _____</p>	<p style="text-align: center;"><b>RECORDS FOUND</b></p> <p>Place <u>NYC</u></p> <p>Name <u>MARIA N. OSWALD</u></p> <p>Date <u>6-13-62</u></p> <p>Manner <u>M-1</u></p> <p>Marital status <u>M-</u></p> <p style="text-align: center;"><i>E. J. [Signature]</i> (Signature of person making search)</p>
<p><b>REMARKS OF CONSULAR OFFICER</b></p> <p style="text-align: right;">(Date) _____ (Signature) _____ (Title) _____</p>	
<p>I recommend that the application be:</p> <p><input checked="" type="checkbox"/> Granted      <input type="checkbox"/> Denied</p> <p style="text-align: center;"><i>E. J. [Signature]</i> Immigration Officer</p>	
<p>Recommendation:</p> <p><input checked="" type="checkbox"/> Approved      <input type="checkbox"/> Disapproved</p> <p style="text-align: center;"><i>[Signature]</i> District Director</p>	