



HỘI GIA ĐÌNH TÙ NHÂN CHÍNH TRỊ VIỆT NAM
FAMILIES OF VIETNAMESE POLITICAL PRISONERS ASSOCIATION

P.O. BOX 5435, ARLINGTON, VA 22205-0635
TELEPHONE: 703-560-0058

IV # _____

POLITICAL PRISONER REGISTRATION FORM
(Two Copies)

VEWL.# _____

I-171 : Yes, No

EXIT VISA: Yes No

The purpose of this form is to identify persons who are or were formerly interned in re-education camps in Vietnam, so that eligibility for U.S. admission via the Orderly Departure Program can be established.

1. APPLICANT IN VIETNAM LAM MINH duc
Last Middle First

Current Address 150/5 Hai Ba Trung Q1 Saigon

Date of Birth 1942 Place of Birth VN

Previous Occupation(before 1975) Major
(Rank & Position)

2. TIME SPENT IN RE-EDUCATION CAMP Dates : From 05/09/75 To 02/13/88

3. SPONSOR'S NAME: _____
Name _____

Address & Telephone _____

4. NAMES OF RELATIVES/ACQUAINTANCES IN THE U.S.

Name, Address & Telephone Relationship

LE NGAN THI Wife

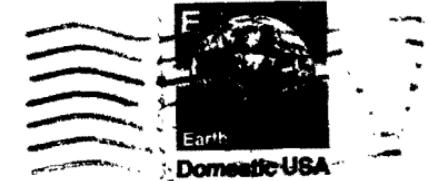
If you are eligible to file for the applicant under Category I of the ODP criteria and have not filed an Affidavit of Relationship (AOR), you are encouraged to do so. Also, persons in the U.S. who are eligible to petition for relatives in Vietnam on INS Form I-130 must do so.

NAME OF PRINCIPAL APPLICANT (PA) : _____
(Listed on page 1)

DEPENDENT'S ADDRESS : (if different from above)

ADDITIONAL INFORMATION :

Mr. Le Thi Ngan



Mrs. Khuc Minh Tho
Hoi Gia Dinh TNCTVN
P.O. Box 5435
Arlington, VA 22205-0635

JUL 12 1981

DO NOT WRITE IN THIS BLOCK

Case ID#	Action Stamp	Fee Stamp
AB		
G-28 or Volag#		
Section of Law: <input type="checkbox"/> 201 (b) spouse <input type="checkbox"/> 203 (a)(1) <input type="checkbox"/> 201 (b) child <input type="checkbox"/> 203 (a)(2) <input type="checkbox"/> 201 (b) parent <input type="checkbox"/> 203 (a)(4) <input type="checkbox"/> 201 (b) parent <input type="checkbox"/> 203 (a)(5) AM CON: _____		
Petition was filed on <u>10/10/1986</u> at <u>10:00 AM</u> <input type="checkbox"/> Personal Interview <input type="checkbox"/> Document Check <input type="checkbox"/> Field Investigations <input type="checkbox"/> Telephoned <input type="checkbox"/> Telephoned <input type="checkbox"/> Telephoned <input type="checkbox"/> Telephoned <input type="checkbox"/> Telephoned		
REMARKS		

A. Relationship

1. The alien relative is my:
 Husband/Wife Parent Brother/Sister Child

2. Are you related by adoption?
 Yes No

COPY

B. Information about you

1. Name (Family name in CAPS)	(First)	(Middle)
LE	NGAN	THI
2. Address (Number and Street)	(Apartment Number)	
(Town or City)	(State/Country)	(ZIP/Postal Code)
3. Place of Birth (Town or City)	(State/Country)	
Vietnam		
4. Date of Birth (Mo/Day/Yr)	5. Sex <input type="checkbox"/> Male <input checked="" type="checkbox"/> Female	6. Marital Status <input checked="" type="checkbox"/> Married <input type="checkbox"/> Single <input type="checkbox"/> Widowed <input type="checkbox"/> Divorced
01/10/44		
7. Other Names Used (including maiden name)	None	
8. Date and Place of Present Marriage (if married)	02/15/67 Vietnam	
9. Social Security Number	10. Alien Registration Number (if any)	
	A25 321 996	
11. Names of Prior Husbands/Wives	12. Date(s) Marriage(s) Ended	
None		

13. If you are a U.S. citizen, complete the following:

My citizenship was acquired through (check one)

Birth in the U.S.
 Naturalization

Give number of certificate, date and place it was issued

Parents

Have you obtained a certificate of citizenship in your own name?

Yes No

If "Yes", give number of certificate, date and place it was issued

14. If you are a lawful permanent resident alien, complete the following.
Date and place of admission for, or adjustment to, lawful permanent residence:

03/19/82 at LOS ANGELES.

C. Information about your alien relative

1. Name (Family name in CAPS)	(First)	(Middle)
LAM	MINH	DUK
2. Address (Number and Street)	(Apartment Number)	
250/5A Hai Ba Trung St. Tan Dinh		
(Town or City)	(State/Country)	(ZIP/Postal Code)
HochiMinh	Vietnam	
3. Place of Birth (Town or City)	(State/Country)	
Vietnam		
4. Date of Birth (Mo/Day/Yr)	5. Sex <input checked="" type="checkbox"/> Male	6. Marital Status <input checked="" type="checkbox"/> Married <input type="checkbox"/> Single <input type="checkbox"/> Widowed <input type="checkbox"/> Divorced
07/27/42		
7. Other Names Used (including maiden name)	None	
8. Date and Place of Present Marriage	02/15/67 Vietnam	
9. Social Security Number	10. Alien Registration Number (if any)	
	None	
11. Names of Prior Husbands/Wives	12. Date(s) Marriage(s) Ended	
None		

VIETNAMESE CENTER
DICH VU XA HOI
216 E. VALLEY BLVD.
SAN GABRIEL, CA 91776

13. Has your relative ever been in the U.S.?

Yes No

14. If your relative is currently in the U.S., complete the following:

He or she last arrived as a (visitor, student, exchange alien, crewman, stowaway, temporary worker, without inspection, etc.)

None

Arrival/Departure Record (I-94) Number	Date arrived (Month/Day/Year)
None	
Date authorized stay expired, or will expire as shown on Form I-94 or I-95	

15. Name and address of present employer

Date this employment began (month/day/year)

INITIAL RECEIPT	RESUBMITTED	RELOCATED		COMPLETED	
		Rec'd	Rec'd	Approved	Denied

C. (Continued) Information about your alien relative

16. List husband/wife and all children of your relative (if your relative is your husband/wife, list only his or her children)

Name	Relationship	Date of Birth	Country of Birth
1. LAM THI MINH CHAU	Daughter	1970	Vietnam (Living in USA)
2. LAM MINH DAO	Son	1972	Vietnam
3. LAM MINH CHANH	Son	1974	Vietnam

17. Address in the United States where your relative intends to reside

(Number and Street) (Town or City) (State)
 7322 Variel St. #4 Canoga Park Ca. 91303

18. Your relative's address abroad

(Number and Street) (Town or City) (Province) (Country)
 250/5A Hai Ba Trung, Tan Dinh Dist. HochiMinh Vietnam

19. If your relative's native alphabet is other than Roman letters, write his/her name and address abroad in the native alphabet:

(Name) (Number and Street) (Town or City) (Province) (Country)
 None

20. If filing for your husband/wife, give last address at which you lived together:

(Number and Street) (Apt. No.) (Town or City) (State or Province) (Country) From (Month) To (Year) (Month) (Year)
 None

21. Check the appropriate box below and give the information required for the box you checked:

Your relative will apply for a visa abroad at the American Consulate in BNAGKOK, THAILAND
 (City) (Country)

Your relative is in the United States and will apply for adjustment of status to that of a lawful permanent resident in the office of the Immigration and Naturalization Service at _____ If your relative is not eligible for adjustment of status, he or she (City) (State)

will apply for a visa abroad at the American Consulate in _____ (City) (Country)

D. Other Information

1. If separate petitions are also being submitted for other relatives, give names of each and relationship.

None

2. Have you ever filed a petition for this or any other alien before? Yes No
 If "Yes" give name, place and date of filing, and result.

Warning: The INS Investigates claimed relationships and checks whether documents are real. The INS seeks criminal prosecutions when family relationships are falsified to obtain visas.

Penalties: You may, by law, be fined up to \$10,000, imprisoned up to five years, or both, for knowingly and willfully falsifying or concealing a material fact or using any false document in submitting this petition.

Your Certification

I certify, under penalty of perjury under the laws of the United States of America, that the foregoing is true and correct. Furthermore, I authorize the release of any information from my records which the Immigration and Naturalization Service needs to determine eligibility for the benefit that I am seeking.

Signature Jagan S Date 10/20/87 Phone Number 818/884-0504

Signature of Person Preparing Form If Other than Above

I declare that I prepared this document at the request of the person above and that it is based on all information of which I have any knowledge.

(Print Name)

(Address)

(Signature)

(Date)

SSN # Number

APPLICANT: BE SURE TO PUT YOUR NAME AND ALIEN REGISTRATION NUMBER IN THE BOX OUTLINED BY HEAVY BORDER BELOW.

COMPLETE THIS BOX (Family name) (Given name) (Middle name) (Alien registration number)

LE NGAN THI A 25-321-716

**U.S. Department of Justice
Immigration and Naturalization Service**

FORM G-325A
BIOGRAPHIC INFORMATION

OMB No. 1115-0066
Approval expires 4-30-95

(Family name)	(First name)	(Middle name)	<input checked="" type="checkbox"/> MALE	BIRTHDATE (Mo.-Day-Yr.)	NATIONALITY	H.I.D. NUMBER
LAM	DUK	MINH	<input type="checkbox"/> FEMALE	07-27-42	VIETNAM	A <u>NONE</u>
ALL OTHER NAMES USED (including names by previous marriage)			CITY AND COUNTRY OF BIRTH		SOCIAL SECURITY NO. (If any)	
NONE					NONE	
FAMILY NAME		FIRST NAME	DATE, CITY AND COUNTRY OF BIRTH (If known)		CITY AND COUNTRY OF RESIDENCE	
FATHER	LAM KINH		UNK. VIETNAM		VIETNAM	
MOTHER (Maiden name)	LONG MULON		11	11	11	
MARRIED (If none, so state) OR WIFE	FAMILY NAME (For wife, give maiden name)	FIRST NAME	BIRTHDATE	CITY & COUNTRY OF BIRTH	DATE OF MARRIAGE	PLACE OF MARRIAGE
	LE	NGAN	01-10-44	VIETNAM	2-15-67	VIETNAM
FORMER HUSBANDS OR WIVES (If none, so state)		FAMILY NAME (For wife, give maiden name)	FIRST NAME	BIRTHDATE	DATE & PLACE OF MARRIAGE	DATE AND PLACE OF TERMINATION OF MARRIAGE
NONE						
APPLICANT'S RESIDENCE LAST FIVE YEARS. LIST PRESENT ADDRESS FIRST.						
STREET AND NUMBER	CITY	PROVINCE OR STATE	COUNTRY	MONTH	YEAR	MONTH YEAR
250/5A HAIBATRUNG, TAN DINH, HOCHIMINH, VIETNAM						PRESENT TIME
APPLICANT'S LAST ADDRESS OUTSIDE THE UNITED STATES OF MORE THAN ONE YEAR						
STREET AND NUMBER	CITY	PROVINCE OR STATE	COUNTRY	MONTH	YEAR	MONTH YEAR
APPLICANT'S EMPLOYMENT LAST FIVE YEARS. (If none, so state.) LIST PRESENT EMPLOYMENT FIRST						
FULL NAME AND ADDRESS OF EMPLOYER	OCCUPATION (SPECIFY)		MONTH	YEAR	MONTH	YEAR
NONE						
Show below last occupation abroad if not shown above. (Include all information requested above.)						
THIS FORM IS SUBMITTED IN CONNECTION WITH APPLICATION FOR:			SIGNATURE OF APPLICANT			DATE
<input type="checkbox"/> NATURALIZATION	<input type="checkbox"/> STATE AS PERMANENT RESIDENCE					
<input checked="" type="checkbox"/> OTHER (Specify):	1. 130					
If your native alphabet is 10 letters or more, write your name in your native alphabet in the space below.						
Are all copies legible? <input checked="" type="checkbox"/> Yes						
None						

APPLICANT: BE SURE TO PUT YOUR NAME AND ALIEN REGISTRATION NUMBER IN THE BOX OUTLINED BY HEAVY BORDER BELOW.

COMPLETE THIS BOX (Family name) (Given name) (Middle name) (Alien registration number)

LAM DUC MINH N/A

DOMESTIC AFFAIR DEPARTMENT

Camp: NAM HA

No. 59

REPUBLIC SOCIALIST OF VIETNAM

Independence Liberty Happiness.

PERMISSION OF RELEASE.

Based on the circular No. 966 BCA Issued date: May 31, 1961
by : Domestic Affairs Department, and based on the Release
Permission no. 50 date 02/04/88.

The following persons are released:

Name: LAM MINH DUC Born: 1942

Other name used: _____

Place of birth: Thang Tam, Vung Tau

Address before arrest: 150/5 Hai Ba, A1 Saigon

Reason of arrest: Major, Commander Security Office, Long Binh

Date of arrest: 05/05/75

Address will reside: 250/5 Hai Ba Trung, Dist. 1, Saigon

Note from the Camp: Thought: Everage

Work: Has been working Hard, regularly

Education: Attended regularly

Forced Residence: Regulation: Good, never violated

Travel expenses: _____ Grade: above Average

Date must be reported to local Authority: Before

Right index finger printed

of: _____

Receiver's signature. (Signed)

Date: Camp Commander.

Sealed & Signed.

I hereby state that the foregoing translation is true and
correct to the best of my knowledge.

STATE OF CALIFORNIA) SS
COUNTY OF LOS ANGELES)

TRANSLATOR. Bui Lam

SUBSCRIBED AND SWORN TO BEFORE ME THIS 12 DAY OF May
1988



NOTARY PUBLIC. Bui Lam

ĐƠN VỊ
TỈNH
NAM HÀ

CỘNG HÒA XÃ HỘI CHỦ NGHĨA VIỆT NAM

Độc lập - Tự do - Hạnh phúc

Số 59 GRT

00107706932

Đơn số 301-QLTG.
ban hành vào ngày
và số 3003 ngày 31
tháng 11 năm 1973

SSHLD

GIẤY RA TRẠI

Theo thông tư số 968-BG/ATTT ngày 31/10/1973 của Bộ Công an

Thi hành án vẫn, quyết định số 50, ngày 4 tháng 2 năm 1988
của Bộ nội vụ

Nay cấp giấy thả cho anh, chị có tên sau đây:

Họ tên khai sinh: Lê Minh Đức

Họ, tên thường gọi:

Họ, tên bi danh:

Sinh ngày: tháng: năm: 1942

Nơi sinh: Thành phố, Vũng Tàu

Trú quẩn: 150/5 Haji Đà Alai, Sài Gòn

Nơi đăng ký nhận khẩu thường trú trước khi bị bắt:

Căn hộ: Phòng số 304, Tòa nhà Long Bình

Bị bắt ngày: 19-2-1975 Ai phát: TTCT

Theo quyết định, án vẫn số ngày: tháng: năm: của:

Đã bị tăng án: 4 lần, cộng thành: 10 năm, tháng.

Đã được giảm án: 1 lần, cộng thành: 6 năm, tháng.

Nay về cư trú tại: 250/5 Đường Hai Bà Trưng, Q1, Sài Gòn

Nhận xét: quá trình cải tạo

Tự lượng: chưa có biến hiện rõ xấu

Lao động: đảm bảo, tuy công và mức khoán

Học tập: thêm giờ đều, cao huống do trại tổ chức

Hội qui: của trại chưa có sai phạm gì lớn

xếp loại cải tạo khá

Đơn tuy ngắn trả phái
của: Lê Minh Đức

Đơn bám số:

Lập:

Mô tên, chữ ký: Ngày 12 tháng 2 năm 1988

Người được cấp giấy

W.M

Chung

THƯƠNG TÀI TƯỞU VĂN HÂN

ORDERLY DEPARTURE PROGRAM
AFFIDAVIT OF RELATIONSHIP

I

YOUR NAME NGAN THI LE YOUR ALIEN STATUS IS: PERMANENT RESIDENT

DATE OF BIRTH 10/10/44 U.S. CITIZEN Number: _____

PLACE OF BIRTH SAIGON, VIETNAM PERMANENT RESIDENT AB 25 321 996

ADDRESS IN USA _____ REFUGEE _____ AF _____

FROM WHICH COUNTRY? _____

TELEPHONE NO. (HOME) _____ (WORK) _____ VOLUNTARY AGENCY WITH WHICH YOU ARE NOW
IN CONTACT _____ Unk _____

11

INFORMATION ON APPLICANTS IN VIETNAM

Important:

* The Principal Applicant(P.A.) is your closest relative to be considered for US entry.

NAME OF PRINCIPAL APPLICANT (P.A.) DUC MINH LAM

CONTACT ADDRESS IN VIETNAM 250/5A HAI BA TRUNG, QUAN 1, T.P. HO CHI MINH (VIETNAM)

HAVE YOU FILED IMMIGRANT VISA PETITIONS? YES NO CATEGORY 2

DATE AND PLACE OF BIRTH: 1930 WICHITA, KANSAS

DATE AND PLACE OF FIRING _____

DOES P.A. HAVE VIETNAMESE EXIT PERMIT? YES NO X NUMBERS

I AM THE: HUSBAND WIFE PARENT CHILD BROTHER SISTER

OTHER _____ OF THE PRINCIPAL APPLICANT.

(Specify)

List below the persons to be considered for admission to the United States. In the column to the right, indicate whether admitted (a), divorced (d), widowed (w), or

Column 15 (marital status) indicates single (S).

NAME In Vietnamese Order	DATE OF BIRTH	PLACE OF BIRTH	SEX	MS	RELATION TO P.A.	ADDRESS CONTACT
1. DUC MINH LAM	mo/da/yr 07/27/42	VIETNAM	M	M	Principal Applicant	250/5A HAI BA TRUNG, QUAN I, T.P. HO CHI MINH (VIETNAM)
2.						
3.						
4.						
5.						
6.						
7.						
8.						
9.						
10.						
11.						
12.						
13.						
14.						

THIS FORM IS FREE; IT MAY BE REPRODUCED BY ANYONE.

III

FAMILY TREE

The information below relates to you, the USA relative.

List all of your relatives requested below even if they are already listed on Page 1. Please include relatives who are already in the USA or other countries as well as those in Vietnam. We must establish your entire family. (If there is not enough room, continue on separate sheet.)

NAME	SEX (circle one)	DATE OF BIRTH mo/day/yr	COUNTRY OF BIRTH	MARRIED? (circle one)	LIVING/ DEAD?	ADDRESS
A. Your husband/wife						
DUC MINH LAM	M/F	07/27/42	VIETNAM	Yes/No	LIVING (VN)	HA NAM NINH KE-EDUCATION CAMP
B. Your other husbands/wives						
	M/F			Yes/No		
	M/F			Yes/No		
C. Your children						
CHAU MINH LAM	M/F	11/02/70	VIETNAM	Yes/No	LIVING	
DAO MINH LAM	M/F	07/03/72	VIETNAM	Yes/No	LIVING	
CHANH MINH LAM	M/F	03/20/74	VIETNAM	Yes/No	LIVING	
	M/F			Yes/No		
	M/F			Yes/No		
	M/F			Yes/No		
D. Your parents						
HON HUU LE	M/F	UNKNOWN	VIETNAM	Yes/No	DEAD	
KHIEM THI NGUYEN	M/F	UNKNOWN	VIETNAM	Yes/No	DEAD	
E. Your brothers/sisters-in-law						
TRONG QUANG LAM	M/F	1946	VIETNAM	Yes/No	LIVING (VN)	XUAN-LOC RE-EDUCATION CAMP
QUANG XUAN LAM	M/F	05/15/48	VIETNAM	Yes/No	LIVING (USA)	
TEDDY LAM	M/F	03/26/50	VIETNAM	Yes/No	LIVING (USA)	
ALEXIS KIM LAM	M/F	07/22/51	VIETNAM	Yes/No	LIVING (USA)	
HUNG NGOC LAM	M/F	08/11/52	VIETNAM	Yes/No	LIVING (USA)	
	M/F			Yes/No		

IV A.U.S. GOVERNMENT EMPLOYMENT

If the Principal Applicant or any accompanying relative in Vietnam was a U.S. Government employee, please complete this section.

NAME OF EMPLOYEE _____

AGENCY: EMBASSY USAID/USOM CORDS USIS USARV/MACV/DAO OTHER _____

SECTION/DIVISION/OFFICE _____

LAST POSITION: _____ LAST GRADE: _____

DURATION OF EMPLOYMENT: FROM _____ TO _____

PLACE _____ NAME OF LAST SUPERVISOR _____

REASON FOR SEPARATION _____

SECTION/DIVISION/OFFICE _____

PREVIOUS POSITION: _____ PREVIOUS GRADE: _____

DURATION OF EMPLOYMENT: FROM _____ TO _____

PLACE _____ NAME OF SUPERVISOR _____

REASON FOR SEPARATION _____

IV B.

U. S. GOVERNMENT TRAINING OR SCHOOLING IN VIETNAM

Was any training or schooling provided by the U.S. Government for the Principal Applicant or any accompanying relative? YES NO

FOR: (NAME) DUC MINH LAM

DATE	SCHOOL	PLACE
FROM 1970 TO 1970	MILITARY FOREIGN LANGUAGE SCHOOL	(SAIGON/VIETNAM)
FROM _____ TO _____	_____	_____
DESCRIBE: _____		

V

PRIVATE EMPLOYMENT

If the Principal Applicant or any accompanying relative worked for a U.S. company or organization, please complete this section.

NAME OF EMPLOYEE _____

JOB TITLE _____

NAME OF COMPANY OR ORGANIZATION _____

SUPERVISOR'S NAME _____

PLACE _____ FROM _____ TO _____

JOB DESCRIPTION _____

EMPLOYEE NUMBER _____ BADGE NUMBER _____ PAYROLL NUMBER _____

REASON FOR SEPARATION _____

NAME OF PREVIOUS COMPANY OR ORGANIZATION _____

PREVIOUS JOB TITLE _____ SUPERVISOR'S NAME _____

PLACE _____ FROM _____ TO _____

JOB DESCRIPTION _____

EMPLOYEE NUMBER _____ BADGE NUMBER _____ PAYROLL NUMBER _____

REASON FOR SEPARATION _____

VI

TRAINING OR SCHOOLING OUTSIDE VIETNAM

If the Principal Applicant or any accompanying relative in Vietnam was trained or educated outside Vietnam, please complete this section.

NAME OF STUDENT/TRAINEE DUC MINH LAM NAME OF SCHOOL _____

DESCRIPTION OF COURSES _____

PLACE OKINAWA, JAPAN DEGREE/CERTIFICATE _____

WHO PAID FOR THE TRAINING? U. S. GOVERNMENT

DURATION OF TRAINING FROM (TWICE) IN 1971 & IN 1973 TO _____

NAME OF STUDENT/TRAINEE DUC M. LAM NAME OF SCHOOL USARPAC INTEL SCHOOL

DESCRIPTION OF COURSES ALLIED SECURITY

PLACE APO SF 96311 DEGREE/CERTIFICATE INTELLIGENCE CERTIFICATE

WHO PAID FOR THE TRAINING? U. S. ARMY

DURATION OF TRAINING FROM 1966 TO 1966

VII

VIETNAMESE GOVERNMENT OR MILITARY SERVICE

If the Principal Applicant or any accompanying relative worked for the Vietnamese Government or served in the Vietnamese military for to 1975, please complete this section.

NAME OF PERSON DUC MINH LAMMINISTRY OR MILITARY UNIT MILITARY SECURITY DETACHMENT TITLE OR RANK MAJOR / CHIEF OF SECURITY OFFICEPLACE LONG BINH BASE (BIEN HOA, VN) FROM 1972 TO 1975JOB DESCRIPTION IN CHARGE OF SECURITY/INTELLIGENCE OFFICE

LIST ANY AWARDS, COMMENDATIONS, OR MEDALS RECEIVED FROM THE U.S. GOVERNMENT:

DID YOUR RELATIVES WORK CLOSELY WITH AMERICANS? YES NO IF YES,PLEASE DESCRIBE: ASSOCIATED WITH AMERICAN ADVISORS AT MILITARY SECURITY OFFICE,...NAMES/RANKS OF ANY AMERICAN ADVISORS 1) WILLIAM S. BOONE (1965, 1967, 68-69)2) JOHN B. DAMIANI (1969-72) 525 MI GROUP, SAIGONCHIEF OF CIVILIAN PERSONNEL OFFICE AT LONG BINH POST, SAIGON3) CAPTAIN BOONE: 702ND MI DETACHMENT USARV, SAIGONVIII RE-EDUCATION

DID THE PRINCIPAL APPLICANT OR ANY ACCOMPANYING RELATIVE SPEND TIME IN REEDUCATION?

YES NO NAME DUC MINH LAM DURATION from 06/14/75 to 02/13/87

NAME _____ DURATION from _____ to _____

IX REMARKS

Are there any special considerations or comments that would affect your relatives' eligibility?

MY HUSBAND WAS TRAINED BY U.S. ARMY AND HAS CLOSELY WORKED WITH AMERICAN ADVISORS AT THE MILITARY SECURITY DETACHMENT OFFICE / LONG BINH POST, SAIGON, SOUTH VIETNAM

IF MORE SPACE IS NECESSARY FOR YOU TO ADD MORE COMPLETE INFORMATION ABOUT ANY OF THE ITEMS REQUESTED ON THIS AFFIDAVIT, PLEASE WRITE THAT INFORMATION ON A SEPARATE SHEET TO BE ATTACHED TO THE AFFIDAVIT. THIS WILL BE NECESSARY IF MORE THAN ONE FAMILY MEMBER WORKED FOR THE U.S. GOVERNMENT, A U.S. COMPANY, OR THE VIETNAMESE GOVERNMENT.

X

NOTARIZATION

I swear that the above information is true. I understand that any false statement could jeopardize my immigration status in the United States.

Subscribed and sworn to me

Signature of Applicant

this 07th day of DEC., 1987

Signature of Notary

OFFICIAL SEAL

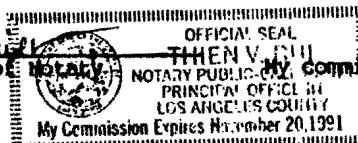
NOTARY PUBLIC - CIVIL

PRINCIPAL OFFICE IN

LOS ANGELES COUNTY

My Commission Expires November 20, 1991

SEAL OF NOTARY



NOTE: If you are a refugee or Permanent Resident Alien, please attach a copy of your I-94 (refugee) or I-151/I-551 (Permanent Resident Alien) green card to the completed affidavit. Do not photocopy your Naturalization Certificate.

THIS FORM IS FREE; IT MAY BE REPRODUCED BY ANYONE.

Pages Removed (S.S.)

2 page(s) was/were removed from the file of LAM MINH Duc'
(7-27-1942) due to containing Social Security numbers. The page(s) was/were copied
with the Social Security numbers covered up. The copy/copies was/were placed back into
the above mentioned file and the original(s) was/were placed into the Restricted/Reserved
files.

-Anna Mallett

Date: NOVEMBER 15th 2007

CO N T R O L

- Card
- Doc. Request; Form
- Release Order
- Computer
- Form "D"
- ODP/Date _____
- Membership; Letter 11/4/89