

7582356

UNITED STATES DEPARTMENT OF JUSTICE
IMMIGRATION AND NATURALIZATION SERVICE

ALIEN REGISTRATION FORM



OFFICE
USE

1. ☆(a) My name is Karoline Mathilde Baer
(FIRST NAME) (MIDDLE NAME) (LAST NAME)

☆(b) I entered the United States under the name of Karoline Mathilde Baer

☆(c) I have also been known by the following names Karoline Mathilde Weichsel
(include maiden name if a married woman,
professional names, nicknames, and aliases):

2. ☆(a) I live at Apt #203-77 No Milton St St Paul Minnesota
(STREET ADDRESS OR RURAL ROUTE) (CITY) (COUNTY) (STATE)

☆(b) My post-office address is St Paul Minnesota
(POST OFFICE) (STATE)

3. ☆(a) I was born on Nov 18 1877
(MONTH) (DAY) (YEAR)

☆(b) I was born in (or near) Rimbach Hessen Germany
(CITY) (PROVINCE) (COUNTRY)

4. ☆ I am a citizen or subject of Germany
(COUNTRY)

5. ☆(a) I am a (check one): Male... Female...
☆(b) My marital status is (check one): Single... Married... Widowed... Divorced...
☆(c) My race is (check one): White... Negro... Japanese... Chinese... Other...

6. I am 5 feet 1/2 inches in height, weigh 123 pounds, have Brown hair and Blue eyes.
(COLOR) (COLOR)

7. ☆(a) I last arrived in the United States at New York on April 21, 1941
(PORT OR PLACE OF ENTRY) (MONTH, DAY, AND YEAR)

☆(b) I came in by S.S. Siboney
(NAME OF VESSEL, STEAMSHIP COMPANY, OR OTHER MEANS OF TRANSPORTATION)

☆(c) I came as a (check one): Passenger... Crew member... Stowaway... Other...

☆(d) I entered the United States as a (check one): Permanent resident... Visitor... Student...
Treaty merchant... Seaman... Official of a foreign government... Employee of a
foreign government official... Other...

☆(e) I first arrived in the United States on April 21 1941
(MONTH) (DAY) (YEAR)

8. ☆(a) I have lived in the United States a total of 10 months years.

☆(b) I expect to remain in the United States Permanently
(PERMANENTLY, OR DURATION OF EXPECTED STAY)

9. (a) My usual occupation is None (b) My present occupation is None

☆(c) My employer (or registering parent or guardian) is None
(NAME)

whose address is _____
(STREET ADDRESS OR RURAL ROUTE) (CITY) (STATE)

and whose business is _____

All items must be answered by persons 14 years of age, or older. For children under 14 years of age, only the items marked with a star (☆) must be answered by the parent or guardian. All answers must be accurate and complete. 16-16415

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Siboney
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XX

10. I am, or have been within the past 5 years, or intend to be engaged in the following activities:

In addition to other information, list memberships or activities in clubs, organizations, or societies

Temple of Aaron Church - (Hebrew)

OFFICE USE

11. My military or naval service has been None

(COUNTRY)

From _____ to _____
(BRANCH OF SERVICE) (DATE) (DATE)

12. ☆ I have applied for first citizenship papers in the United States. Date of application Oct. 23, 1941

First citizenship papers received Oct. 23, 1941, 5621, St. Paul, minn.
(DATE) (NUMBER) (CITY) (STATE)

Filed petition for naturalization _____
(DATE) (CITY) (STATE)

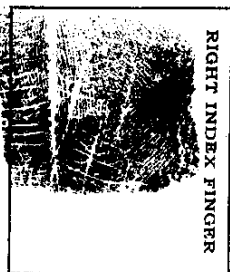
13. ☆ I have the following specified relatives living in the United States:

Parent(s) None Husband or wife No Children 2
(NONE, OR ONE, OR BOTH) (YES OR NO) (NUMBER)

14. I have not been arrested or indicted for, or convicted of any offense (or offenses). These offenses are:

Nature of offense Date of arrest Place of arrest Disposition of case

15. Within the past 5 years I have not been affiliated with or active in (a member of, official of, a worker for) organizations, devoted in whole or in part to influencing or furthering the political activities, public relations, or public policy of a foreign government.



AFFIDAVIT FOR PERSONS 14 YEARS OF AGE AND OLDER

I have read or have had read to me the above statements, and do hereby swear (or affirm) that these statements are true and complete to the best of my knowledge and belief.

Subscribed and sworn to (or affirmed) before me at the place and on the date here designated by the official post-office stamp below.

Caroline Mathilde Paer awfow
(SIGNATURE OF REGISTRANT) (REGISTERING OFFICIAL)

AFFIDAVIT FOR PARENT OR GUARDIAN ONLY

I am the _____
(PARENT OF, OR GUARDIAN OF, OR PERSON RESPONSIBLE FOR)

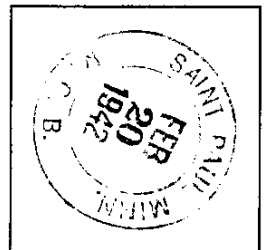
the above-named alien, who is _____
(UNDER 14 YEARS OF AGE, OR INSANE)
and have made the above allegations for him (or her). I have read or have had the same read to me, and do hereby swear (or affirm) that they are true and complete to the best of my knowledge, information, and belief.

PRINT NAME, ADDRESS, AND BUSINESS OF PERSON SIGNING THIS AFFIDAVIT IN 9 (c), ABOVE.

Subscribed and sworn to (or affirmed) before me at the place and on the date here designated by the official post-office stamp at the right.

(SIGNATURE OF PARENT OF, OR GUARDIAN OF, OR PERSON RESPONSIBLE FOR THE ALIEN)

(REGISTERING OFFICIAL)



16-16415