

INSTRUCTIONS: This form will be used when requesting a search of RI indices, and/or withdrawal of listed documents from RI files. Separate forms will be used for each name submitted. No additional routing sheet is required.

NAME CHECK AND/OR DOCUMENT REQUEST SERVICE	DATE
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FROM: 	DIVISION EE/P	ROOM NO. 1311-K	TELEPHONE 6364
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TO:	ROOM NO.	DATE		INITIALS	ACTION DESIRED (Check one)
		RECEIVED	FORWARDED		
RI INDEX SECTION	1107 L				<input type="checkbox"/> LIST REFERENCE AND RETURN THIS FORM TO REQUESTER. <input type="checkbox"/> LIST REFERENCES AND SEND DOCUMENTS TO REQUESTER. <input type="checkbox"/> SEND LISTED DOCUMENTS TO REQUESTER. <input type="checkbox"/> LIST STATION SYMBOL NUMBER OF REFERENCES AND RETURN THIS FORM. <input type="checkbox"/> SEND RI ARCHIVES DOCUMENTS TO REQUESTER. <input type="checkbox"/> TELEPHONE REPLY.
RI FILES SECTION	1400 L				

PERSONAL DATA			
NAME (Last) (Type or print) RZEITACZEK	(First)	(Middle) MARTA	TITLE
ALIASES AND SPELLING VARIATIONS			

DATE OF BIRTH	OTHER IDENTIFYING DATA	<input type="checkbox"/> NOT IDENTIFIABLE
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<p>RE. NCES</p> <p><i>NT</i></p>	<p align="center"> DECLASSIFIED AND RELEASED BY CENTRAL INTELLIGENCE AGENCY SOURCES METHOD EXEMPTION 3B2B NAZI WAR CRIMES DISCLOSURE ACT DATE 2008 </p>
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NAME CHECK AND/OR DOCUMENT REQUEST SERVICE					DATE
FROM: []		DIVISION <i>EE/P</i>		ROOM NO. <i>1311-K</i>	TELEPHONE <i>4364</i>
TO:	ROOM N	DATE		INITIALS	ACTION DESIRED (Check one)
		RECEIVED	FORWARDED		
RI INDEX SECTION	1107 L				<input type="checkbox"/> LIST REFERENCE AND RETURN THIS FORM TO REQUESTER.
RI FILES SECTION	1400 L		<i>LEICHTMANN</i>		<input type="checkbox"/> LIST REFERENCES AND SEND DOCUMENTS TO REQUESTER.
					<input type="checkbox"/> LIST STATION SYMBOL NUMBER OF REFERENCES AND RETURN THIS FORM.
					<input type="checkbox"/> SEND RI ARCHIVES DOCUMENTS TO REQUESTER.
					<input type="checkbox"/> TELEPHONE REPLY.

PERSONAL DATA (Type or print)

NAME (Last) *HINNRICHS* (First) *WALTER* (Middle) [] TITLE OR RANK [] NOT IDENTIFIABLE

ALIASES AND SPELLING VARIATIONS [] OTHER IDENTIFYING DATA *ARCHITECT'S OFFICE OF LUFTWAFFE AT BUNDESPLATZ*

DATE AND PLACE OF BIRTH [] INSTRUCTIONS TO REQUESTING OFFICER: Upon completion of your review of references attach this form to RI copy of outgoing reply or incoming request in case of no reply. Your notes will facilitate future research on this person.

COMPLETE COLUMNS 1 AND 2 AT INDEX SEARCH		COMPLETE COLUMNS 3 AND 4 UPON REVIEW OF DOCUMENTS	
1. RI FILE NUMBERS (Page, reel, etc.)	2. FIELD SYMBOL	3. SOURCE EVAL. & DATE OF INFO.	4. COMMENTS (Pertinency, etc.)
<i>a. []</i> <i>b. HINNRICHS, WALTER</i>	<i>EGBA-3808</i> <i>9 Jan 57</i>	<i>See BRN MISC. LEADS</i>	<i>From Sept 1919</i> <i>Adm</i>
<i>a. 32-4-87-180</i> <i>b. HINNRICHS, WALTER</i>	<i>OEL-9419</i>	<i>RPT.# CS-5205</i>	<i>20 Dec 54</i> <i>SOURCE: THROUGH AN OFFICIAL BRITISH CHANNEL FROM A SOURCE DESCRIBED AS ESTABLISHED FROM A FORMER EMPLOYEE IN AN F. GERMAN SHIPYARD</i>
<i>a. []</i> <i>b. []</i>		<i>DOI: July - Sept 1954</i>	
<i>a. []</i> <i>b. []</i>			<i>"One Walter HINNRICHS is listed as yard master of VEB Rosslauer SCHIFFSWERFT SHIPYARD & a convinced SED member."</i>
<i>a. []</i> <i>b. []</i>			
<i>a. []</i> <i>b. []</i>			
<i>a. []</i> <i>b. []</i>			
<i>a. []</i> <i>b. []</i>			
<i>a. []</i> <i>b. []</i>			

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NAME CHECK AND/OR DOCUMENT REQUEST SERVICE	DATE
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FROM: []	DIVISION EE/P	ROOM NO. 1311-K	TELEPHONE 4364
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TO:	ROOM NO.	Div.		INITIALS	ACTION DESIRED (Check one)
		RECEIVED	FORWARDED		
RI INDEX SECTION	1107 L				<input type="checkbox"/> LIST REFERENCE AND RETURN THIS FORM TO REQUESTER.
RI FILES SECTION	1400 L				<input type="checkbox"/> LIST REFERENCES AND SEND DOCUMENTS TO REQUESTER.
					<input type="checkbox"/> LIST STATION SYMBOL NUMBER OF REFERENCES AND RETURN THIS FORM.
					<input type="checkbox"/> SEND RI ARCHIVES DOCUMENTS TO REQUESTER.
					<input type="checkbox"/> TELEPHONE REPLY.

PERSONAL DATA (Type or print)

NAME (Last) WEIGELT (First) ANTONIE (Middle)	TITLE OR RANK	<input checked="" type="checkbox"/> NOT IDENTIFIABLE
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ALIASES AND SPELLING VARIATIONS SLAZINSKI	OTHER IDENTIFYING DATA Homeopath
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DATE AND PLACE OF BIRTH 3 Mar 1901 Bresen, Silesia	INSTRUCTIONS TO REQUESTING OFFICER: Upon completion of your review of references attach this form to RI copy of outgoing reply or incoming request in case of no reply. Your notes will facilitate future research on this person.
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COMPLETE COLUMNS 1 AND 2 AT INDEX SEARCH		COMPLETE COLUMNS 3 AND 4 UPON REVIEW OF DOCUMENTS	
1. RI FILE NUMBERS (Page, reel, etc.)	2. FIELD SYMBOL	3. SOURCE EVAL. & DATE OF INFO.	4. COMMENTS (Pertinency, etc.)
a. VT			
b.			
a.			
b.			
a.			
b.			
a.			
b.			
a.			
b.			
a.			
b.			
a.			
b.			
a.			

SECRET
(When filled in)

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NAME CHECK AND/OR DOCUMENT REQUEST SERVICE	DATE
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FROM:	DIVISION	ROOM NO.	TELEPHONE
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TO:	ROOM NO.	DATE		INITIALS	ACTION DESIRED (Check one)
		RECEIVED	FORWARDED		
CORRESPONDENCE SECTION	1000 L				<input type="checkbox"/> LIST REFERENCE AND RETURN THIS FORM TO REQUESTER. <input type="checkbox"/> LIST REFERENCES AND SEND DOCUMENTS TO REQUESTER. <input type="checkbox"/> SEND LISTED DOCUMENTS TO REQUESTER. <input type="checkbox"/> LIST STATION SYMBOL NUMBER OF REFERENCES AND RETURN THIS FORM. <input type="checkbox"/> SEND RI ARCHIVES DOCUMENTS TO REQUESTER. <input type="checkbox"/> TELEPHONE REPLY.
RI INDEX SECTION	1107 L				
RI FILES SECTION	1400 L				

PERSONAL DATA		
NAME (Last) (Type or print)	(First) (Middle)	TITLE
KRAJEWSKI	RICHARD	

ALIASES AND SPELLING VARIATIONS

DATE OF BIRTH	OTHER IDENTIFYING DATA	<input type="checkbox"/> NOT IDENTIFIABLE
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REFERENCES REF BRN 8752 (IN 27155) & BRN 8753 (IN 27169)

60-7-0-457 MGB-3854, p.4 R. KRAJEWSKI	R. MGB-3854 5 July 1947 List of Leading Personalities in the Politics, Economy, & Administration of Poland	"R. KRAJEWSKI: Member of the Executive Committee of the Glavlit Committee, Gdanek Voynodships"
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