

FOR COORDINATION WITH

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FORM G-325A (REV. 10-1-74) Y

UNITED STATES DEPARTMENT OF JUSTICE
Immigration and Naturalization ServiceForm Approved
OMB No. 43-R436BIOGRAPHIC
INFORMATIONFor sale by the Superintendent of Documents
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(Family name) Linnaas	(First name) Karl	(Middle name)	<input type="checkbox"/> MALE <input type="checkbox"/> FEMALE	BIRTHDATE (Mo.-Day-Yr.) 8-6-19	NATIONALITY Estonian	ALIEN REGISTRATION NO. (If any) A-8085626
ALL OTHER NAMES USED (Including names by previous marriages) None			CITY AND COUNTRY OF BIRTH Tartu, Estonia		SOCIAL SECURITY NO. (If any) 071-28-8985	
FATHER Linnaas		FIRST NAME August		DATE, CITY AND COUNTRY OF BIRTH (If known) 9-1-89 Tartu, Estonia		CITY AND COUNTRY OF RESIDENCE Deceased, 1971 - Greenlawn, NY
MOTHER (Maiden name) Park		FIRST NAME Ida		DATE, CITY AND COUNTRY OF BIRTH (If known) 12-3-91 Tartu, Estonia		CITY AND COUNTRY OF RESIDENCE Deceased, 1971 - Greenlawn, NY
HUSBAND (If none, so state) OR WIFE None		FAMILY NAME (For wife, give maiden name)		FIRST NAME	BIRTHDATE	CITY & COUNTRY OF BIRTH
FORMER HUSBANDS OR WIVES (if none, so state)		FAMILY NAME (For wife, give maiden name)		FIRST NAME	BIRTHDATE	DATE & PLACE OF MARRIAGE
Saks		Linda		4-18-22	7-7-44, Haapsalu, Estonia	Deceased, 1970 - Greenlawn, NY
						U.S.A.
APPLICANT'S RESIDENCE LAST FIVE YEARS. LIST PRESENT ADDRESS FIRST.						
STREET AND NUMBER				CITY	PROVINCE OR STATE	COUNTRY
21 Goldsmith Avenue				Greenlawn	New York	U.S.
FROM				TO		
MONTH				YEAR		
May				1958		
PRESENT TIME						
APPLICANT'S LAST ADDRESS OUTSIDE THE UNITED STATES OF MORE THAN ONE YEAR						
STREET AND NUMBER				CITY	PROVINCE OR STATE	COUNTRY
IRO Voc. Training Center				Neuburg/DO	W. Germany	
FROM				TO		
MONTH				YEAR		
				1948		
PRESENT TIME				1951		
APPLICANT'S EMPLOYMENT LAST FIVE YEARS. (IF NONE, SO STATE.) LIST PRESENT EMPLOYMENT FIRST						
FULL NAME AND ADDRESS OF EMPLOYER				OCCUPATION (SPECIFY)		DATE
Peter L. Van Weele & Co.				Land Surveyor		Feb. 1972
3 Lazare Lane, Islip, New York 11751						
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 OR PETITIONER		DATE
<input type="checkbox"/> NATURALIZATION <input type="checkbox"/> ADJUSTMENT OF STATUS				Karl Linnaas		January 19, 1983
<input checked="" type="checkbox"/> OTHER (SPECIFY): I-256A, I-485 PA-510						
Are all copies legible? <input type="checkbox"/> Yes						

PENALTIES: SEVERE PENALTIES ARE PROVIDED BY LAW FOR KNOWINGLY AND WILLFULLY FALSIFYING OR CONCEALING A MATERIAL FACT.

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)
Linnaas	Karl	-	A-8085626
(OTHER AGENCY USE)			INS USE (Office of Origin)
NAI TO CIR-316/01995-73 DATED 15 AUGUST 1973 PREVIOUSLY SENT TO YOU CONCERNING SAME SUBJECT.			OFFICE CODE: NYC 510
DECLASSIFIED AND RELEASED BY 22 Feb 83			TYPE OF CASE: PA
CENTRAL INTELLIGENCE AGENCY			DATE: Registries/Spence
SOURCES METHODS EXEMPTION 3B2E			requested
NAZI WAR CRIMES DISCLOSURE ACT			2-18
DATE 2004 2006			