## **STANDARD A-FILE**

Before submitting a request, we ask that you search for the individual in our Archival Research Catalog (ARC) at <a href="http://www.archives.gov/research/arc/">http://www.archives.gov/research/arc/</a>. ARC contains the names of every individual presently contained in our A-Files holdings. If the name of the individual you are researching does not appear within ARC, we ask that you refrain from submitting a record request as we will be unable to provide reference service.

The NATF Form AFILE1 may be photocopied as needed. Please submit a separate form for each individual whose records are being requested.

Additional forms are available upon request.

SECTION A:	REQUESTER INFOR	MATION	
Name (Last, First)	)		
E-Mail address (i)	f applicable)		
Address (number	and street)		
City, State, ZIP/Po	ostal Code, and Country (if	not USA)	
Daytime Telephor	ne Number (required)	Alternate Telephone Number (preferred)  ( ) -	
SECTION B:	INFORMATION ABO	UT THE SUBJECT OF FILE	
Full Name of Alio	en (required)		
Archival Research Catalog (ARC) ID (required)			
Alien Registration	n Number (required)		
Date of Birth		Date of Entry	
Additional Inforn	nation (e.g., Aliases/Other l	Names, Country of Birth)	
I wish to obta	ain a copy of the A-File	and would like to receive information	on on the cost of a photocopy.
	10	nd would like to schedule an appoin	1 10
Mail completed forms to: Fax completed forms to: 816-268-8038 E-mail: Afiles.KansasCity@nara.			E-mail: Afiles.KansasCity@nara.gov
National Archives Attn: A-Files Requ 400 W. Pershing R Kansas City, MO	uest .d.		
	Priv	acy Act and Paperwork Reduction Ac	ct Public Burden statements his page.

## PRIVACY ACT STATEMENT

Collection of this information is authorized by 44 U.S. C. 2108. Disclosure of the information is voluntary; however, we will be unable to respond to your request if you do not furnish your name and address and the minimum required information about the records. The information is used by NARA employees to search for the record; to respond to you; to maintain control over information requests received and answered; and to facilitate preparation of internal statistical reports. If you provide credit card information, that information is used to bill you for copies.

## PAPERWORK REDUCTION ACT PUBLIC BURDEN STATEMENT

A Federal agency may not conduct or sponsor, and a person is not required to respond to a collection of information unless it displays a current valid OMB control number. The OMB Control No. for this information collection is 3095-00XX. Public burden reporting for this collection of information is estimated to be 10 minutes per response. Send comments regarding the burden estimate or any other aspect of the information collection, including suggestions for reducing this burden, to National Archives and Records Administration (NHP), 8601 Adelphi Road, College Park MD 20740. DO NOT SEND COMPLETED FORMS TO THIS ADDRESS. SEND COMPLETED FORMS TO THE ADDRESS INDICATED ON THE FORM ITSELF.

OMB Control No. 3095-00XX Expires XX-XX-20XX