

2025 RELEASE UNDER E.O. 14176

Description of subject from Birmingham:

White
Male
Age 36
5'8" - 5'10"
150 - 160 lbs.
Medium complexion
Dark hair (probably brown)

44-2649-1A4



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Medium complexion
Dark hair (probably brown)

File No: 44-2649- 1A.5	-
Date Received 4-17-68	
From Dunau	
(Name of Contributor)	
(Address of Cantributor)	
Ву	
To Be Returned Yes	
Descriptions Platas -	
James Earl Ray	



2025 RELEASE UNDER E.O. 14176

White Male
Date of Birth: 7/20/31 (not verified)
5'8" - 5'11"
160 - 175 pounds
Medium Build
Brown Hair - Brush Cut
Eyes - Blue, or Green, or Hazel
Clean Shaven



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Date of Birth: 7/20/31 (not verified)
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44-2649-1AJ-XV

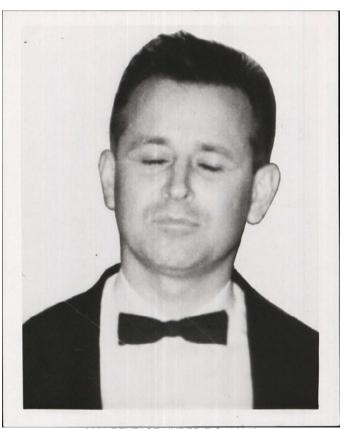


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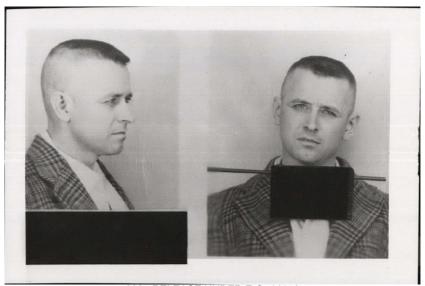


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XX-2649-17-5

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NTRIBUTOR)
TATE)
AGENT)
Receipt given 🗆 Yes
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2025 RELEASE UNDER E.O. 14176



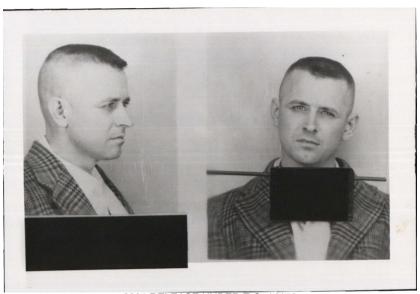
2025 RELEASE UNDER E.O. 14176



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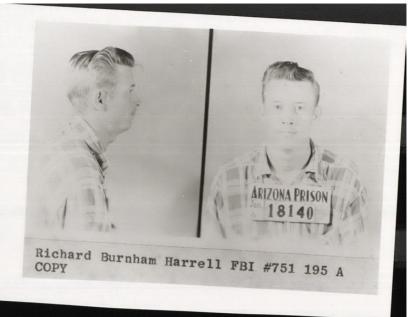


2025 RELEASE UNDER E.O. 14176

File No. 44-2649-1A7 Date Received 4-24-68 From Suseau (NAME OF CONTRIBUTOR)
(ADDRESS OF CONTRIBUTOR)
(GITY AND STATE)
De 12 227
(NAME OF SPECIAL AGENT)
To Be Returned ☐ Yes ☐ Receipt given ☐ Yes ☐ No
Description: Shatas -
Lichard Burnham



2025 RELEASE UNDER E.O. 14176



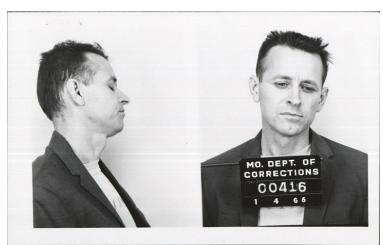
File No. 44-2649,-148
Date Received 4/24/68
Wasse Tas
From Warren Lipon
White Star Faundry
(ADDRESS OF CONTRIBUTOR)
4535 Cole Gallas
(CITY AND STATE)
By (NAME OF SPECIAL AGENT)
(NAME OF SPECIAL AGENT)
To Be Returned □ Yes Receipt given □ Yes
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No Receipt given 1 1es
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Description:
Description:
No No Description:
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Description:
Description: Sample Laundry Marks - Machine
Description: Lample Laundry Marks - Machine H - Thermoseal
Description: Lample Laundry Marks - Machine H - Thermoseal
Description: Sample Laundry Marks - Machine

File No. 44-2649	
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From Waven / Change of Cont	Mite Star Bund
4535 G-Ce Que	TRIBUTOR)
Hallas le	La .
By (NAME OF SPECIAL	Mesmon AGENT)
To Be Returned ☐ Yes No	Receipt given ☐ Yes ☐ No
Description:	
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machine #	=3 Thermo
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to Law 4-25-6.	e gcs



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File No. 44-2649	1410
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From Warren typor	
	uchs.
4535 Cole 40	ellas lex
By Couls (CITY AND STATE) (NAME OF SPECIAL AG	esman ent
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	eceipt given 🗆 Yes
No	□No
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^	dry warks
Sample Laure Thermo Scal 20 ## 2	dry marks
^	dry marks
^	dry marks
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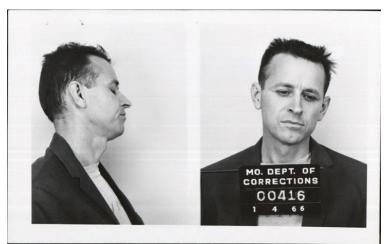
File No. 44-264	9-1411
1/-5/	10
Date Received	08,
From Kansas Co	ily
(NAME OF CON	TRIBUTOR)
(ADDRESS OF CO	NTRIBUTOR)
Ry Ser. 268	rate)
(NAME OF SPECIAL	AGENT)
(NAME OF SPECIAL	AGENT)
To Be Returned ☐ Yes	Receipt given Yes
To Be Returned Yes	Receipt given Yes
To Be Returned Yes	Receipt given Yes
To Be Returned Yes	Receipt given Yes



2025 RELEASE UNDER E.O. 14176

JAMES EARL RAY

44-2649-1A11



2025 RELEASE UNDER E.O. 14176

1141-609e-DX

JAMES EARL RAY

File No. 44-2649-1A12 Date Received 4-29-68 From Queen (Name of Contributor)	
(Address of Contributor) By SO (Name of Special Agent) To Be Returned Yes No,	
taken by woman companish while in	1
Mexico in 1967	



2025 RELEASE UNDER E.O. 14176





2025 RELEASE UNDER E.O. 14176



2025 RELEASE UNDER E.O. 14176



2025 RELEASE UNDER E.O. 14176



2025 RELEASE UNDER E.O. 14176

File No. 44 Date Received From	-26 f - 3 d R	49-1 1-63 2nt (TRIBUTOR)	<u> </u>
By E (N	(ADDRESS OF CO	ui_	<u>a</u>
Description:	Yes Who catio	Receipt given	☐ Yes☐ No
Check No. Amount Date Payable to Signed Bank			•
Endorsed			•

Reporting Date Jangth.

\$ 965-021 11 (REV.	7-0 Q)	U YELF		WITH	FINITLO I MIEIN		- 1		
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1) 1936,0EC	1256 VEC 121 PM 1 40 P.O. BOX 35001, DALLAS, TEXAS 75235								
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				Answer every question	concisely but completely.	Applicants who are emp	loyed must satis		
	-	te any applicable proba- agreed that any contract		y period. employment which subsequ	ently may be entered into	between this Company	and the applicant		
shall be predicated statements and this	and o	conditioned upon the coment shall be incorpora	omplet ted in	te truthfulness of and abse and form a part of such cor	nce of omissions from the	statements herein cont	tained, that such		
 sion shall be suffici 	ent c	ause for discharge at an	ny tim	e. Magi	ومع المال المالية	The rest was	10 -		
(Print lest	name)	WARNER	Print f	irst name)	(Print middle name)	Position desired			
Your Address 4359	1	RV 57		FT W	ERTH, TEV	Telephone Number	·,		
Numbe	P	Street	or Ave	-	State				
How long have you livat above address?	ved	8 MAP 66		Previous 4014 Complete	CENTAUR A	. Soci	al Security No.		
In case of accident	0	(Gree dates)	' Y		SUILLE PALA		-		
notify: Name		ATRICIAT (S	ow rei	JARD W.F.C.	4359 FR)	Number, Street, City, a	nd State		
Personal		Dependents		- Physical-	randor district	Personal Data	,		
Single		Wife	2	Height 5 Ft. 9.In.	Birth-City or County and State	ACKSON, TR	ENX.		
Married .	1	Husband		Weight 160	Country now a citizen of	Ago Now	28		
Widow		Children	1	Color BB	Date of Birth 12 AN	38			
Widower	_	Ages of Children 9 MM	<u> </u>	Color of BR	Selective Service Classi	fication 5A	,*		
Divorced .		Parents		Hearing GCOID	Local Board No. 10	3 Date of Classific	ation, FEBL		
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visible in short sleeved				No	Explain	,	-		
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Has any Surety Company	ever re	for other than minor traffic fused to issue of continue at	y bond	+a your behalf?	If so, explain fully on a separat		-		
Do you have relatives in our employ?	NO	1101111		in o	you have acquaintances No	Name	:		
Have you ever been employed by us before?		Have you made previous employment with Bran			n xo. wed?	App Date	roximate		
Do you receive desabili	t y pay	ment from any source?	N	O Reason					
Do you own your home, live with parents?	rent,	room and board, or Ri	ENT	Do you	own 1/25	1958 3	ONBURR		
Are you willing to be to	mele	red to another town?		RS in what	city do you prefer to live?	GT WEST'S DIE	make U15		
Is your spouse employe	ئــــ 15	VD Wiere?	-		How long?	Salary			
Are you willing to acce	pt a t	oreign assignment?	10		-4-				
Are you willing to stud	y and	perticipate in any training	COUPS	es given by the company?	VES		,		
In what sports or recre	stions	do you indulge? 162	15	AT PRESENT	The same of				
-									
Give at least	four	character references.	DO N	OT CIVE RELATIVES, I	PREVIOUS EMPLOYERS,	OR PREVIOUS SUPE	RVISORS.		

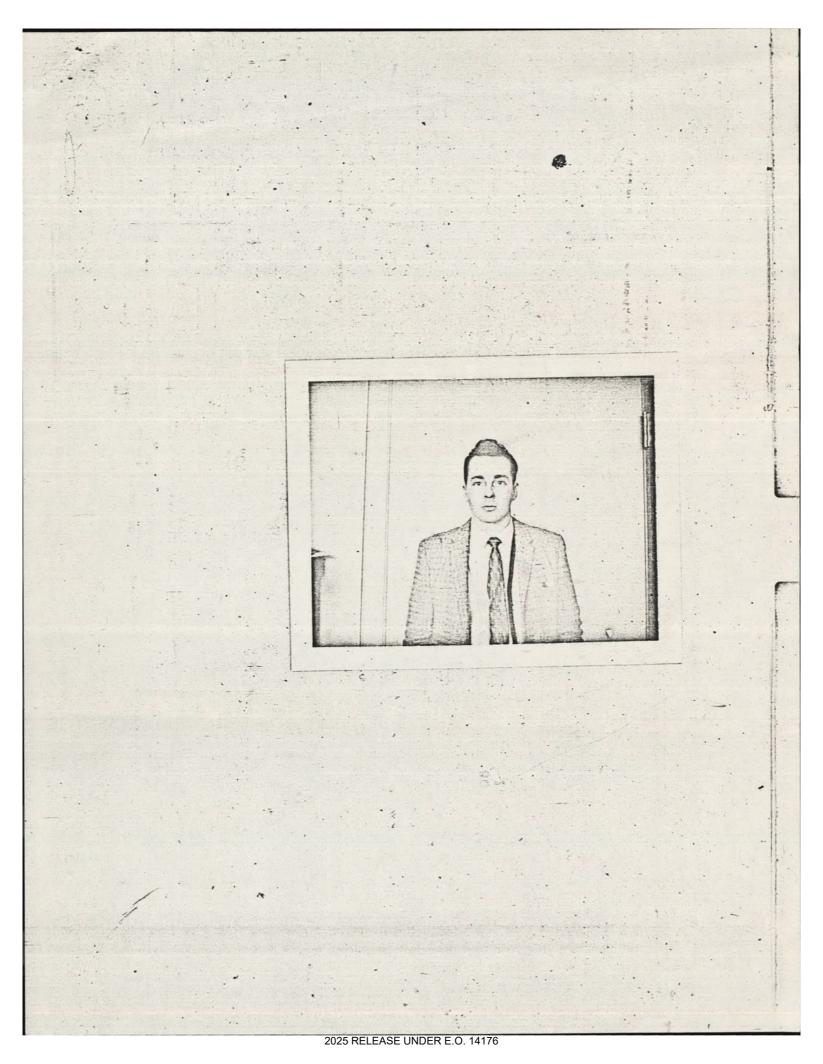
Full Name Occupation Complete Address

EDUCATIONAL RECORD	· · · ·	Are you a	ingii school g			- Conce	e graduate?		
· i		· Address ·	Majo	or Subjects	. Degi Rece		ears D	ate of Last A or gradua	
ast high school attended:	THEODORE HIGH	THEODINE, AL	A ACIDS	mili		_ /		GED 19	58 USA
College or University:	,		- 1		тя		-		
n n				-		, x	* *		*
f you have pursued any other state fully name and address	lines of study, such as Military of school, what subjects, when	Service Schools, Busand for what length of	siness School time they we	, Night Schoo ere studied.	ol, or Extens	sion Course:	5,		
MECHANICE WAS	SACOMEN (MU) ROLLINGER	TEXAS - TECH 105 GRANUL AR	Wical 11	VSTRUCTO	3 (41405)	SHEPPA	CD AFB	TEXAS.	3 · ·
With what degree of fluency?					Spe		<u> </u>		. 4.
Non-Veteran Affidavit:	This is to certify that I have of the U.S. or the U.S. Mar		3	e of the Arme	d Service	: 1			
MILITARY RECORD	Army, Navy, Mari Corps, Coast Gua	ine ard	Branch of service	Date of entry into service	Date of entry into active service	Rank or Rating	Date of honorable release from activite	Date of honorable	
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	ou receive? <u>/b NOMBLB</u> ve Program? <u>NO</u> Pro	esent Status			ranch		1	Rank	
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IMI EMPLOYMENT RECORD Reserved IMI the	PORTANT: State full particulars most recent. If employing come addresses of at least two cliest may be used and attached to	s of all employment company is out of busine nts who can testify a this form. Show in entry and state, name	ss, so state. s to your busi	isposition of If you have ness or profe cord the same	your time w been conduct essional exp as any oth	cting your or perience. If er employme	oyed or not wn busines: more space nt history,	List items be sor profession is required, any military s	n, give name an addition ervice.
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What territory do you prefer?			.** '

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Please enclose a recent inexpensive photograph of the MAINTENANCE Mechanic Certificates			
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MAINTENANCE Mechanic Certificates Do you own a complete set of tools? Describe Do you read blueprints? Show welding experience if any and describe kind Can you do sheet metal layout? Describe fully	Ratings Held	Date Issued OCH 13/0 MOINT) Date of Original license	Serial Number
MAINTENANCE Mechanic Certificates Do you own a complete set of tools? Describe Do you read blueprints? Show welding experience if any and describe kind Can you do sheet metal layout? Describe fully	Ratings Held C MECHINIC (CON 1551)	Date Issued	Serial Number 10 Was Ale Exp) No. words C. W. per m
Certificates Do you own a complete set of tools? Describe Describe Describe type and Describe type an	Pate Date Date Date de and answers given by me to the for I agree that any evasion, untruthful submit to physical examination whenever or during the course of any employing the to the Company any information in the there or not it is on their records, and the course of any employing the course of any empl	Date of Original license Other Licenses held egoing questions are true and containment or answer or omission for requested by the Company by the containing my employment by the dilhereby release such compa	No. words C. W. per m Send Rec. orrect and that there n shall be sufficient y a doctor or doctors ompanies or persons m, together with any
MAINTENANCE Mechanic Certificates Do you own a complete set of tools? Describe Do you read bluepriats? Show welding experience if any and describe kind Can you do sheet metal layout? Describe fully RADIO Phone license C. W. license No. I hereby certify that the statements mader no omissions of any kind whatsoever. cause for discharge at any time. I agree to designated by the Company, either prior to shown under "Employment Record" to furn information they may have regarding me. we want to the statements of the company.	Pate Date Date Date de and answers given by me to the for I agree that any evasion, untruthful submit to physical examination whenever or during the course of any employing the to the Company any information in the there or not it is on their records, and the course of any employing the course of any empl	Date of Original license Other Licenses held egoing questions are true and containment or answer or omission for requested by the Company by the containing my employment by the dilhereby release such compa	No. words C. W. per m Send Rec. orrect and that there n shall be sufficient y a doctor or doctors ompanies or persons m, together with any



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THIS IS AN IMPORTANT RECORD SAFEGUARD IT!

1.	1. LAST NAME - FIRST NAME - MIDD	LF NAME	LEGEND: Insert	N/A to the i	tems below	which are not e	applicable						
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28.	SCHOOL OR COLLEGES. COL	LEGE TRAINING											
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File No. 44-2649-14 14
Date Received 5/24/68
From Glenn R. Sanderford
(NAME OF CONTRIBUTOR) Federal Records Center
(Address of Contributor) Fort Worth, Texas
By IC James Von White (NAME OF SPECIAL AGENT)
To Be Returned ☐ Yes Receipt given ☐ Yes No ☐ No Description:
Photos of Robert G. Boshers