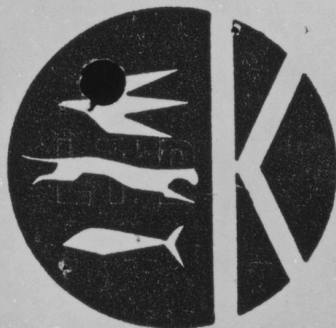


Copies of Passport Application,
Photograph of Subject and
Related Documents

ENTIRE FILE REVIEWED
FOR HISTORICAL
DECLASSIFICATION

ALL INFORMATION CONTAINED
HEREIN IS UNCLASSIFIED
DATE 10/22/01 BY SP1-ccc/jde



KENNEDY TRAVEL BUREAU LTD.

TRAVEL COUNSELLORS SINCE 1926 • AIRLINE • STEAMSHIP • INSURANCE AGENTS

424 BLOOR STREET WEST
TORONTO 4, ONT., CANADA
TELEPHONE: 921-3721

CABLE ADDRESS:
KENTRAVEL, TORONTO

AUTHORIZED AGENTS FOR:

AIR CANADA
AIR FRANCE
ALITALIA
AMERICAN AIRLINES
B. O. A. C.
CANADIAN PACIFIC AIRLINES
EL-AL
IRISH AIR LINES
K. L. M.
LUFTHANSA
P. A. A.
SABENA
S. A. S.
SWISSAIR
T. W. A.
ETC.

AMERICAN EXPORT LINES
BALTIC STEAMSHIP LINE
CANADIAN PACIFIC
STEAMSHIPS
CUNARD LINE
FRENCH LINE
FURNESS LINE
GDYNIA-AMERICA LINE
GREEK LINE
HAMBURG-ATLANTIC LINE
HOLLAND-AMERICA LINE
HOME LINES
ITALIAN LINE
NORTH GERMAN LLOYD
NORWEGIAN AMERICA LINE
SWEDISH AMERICAN LINE
UNITED STATES LINES
ZIM LINES
P & O ORIENT LINES
ETC.

GROUP TRAVEL

SPECIALISTS IN TRAVEL TO:

BULGARIA
CHINA
CZECHOSLOVAKIA
D.D.R.
HUNGARY
POLAND
RUMANIA
U.S.S.R.

IMMIGRATION, PASSPORT &
VISA SERVICE
HOTEL RESERVATIONS &
TOURS
BUS TICKETS
CN RAIL TICKETS

GIFT PARCEL SERVICE

NOTARIAL SERVICE

INTERPRETERS &
TRANSLATORS

INSURANCE OF ALL KINDS

APPROVED
SALES AGENTS



REPRESENTATIVES IN ALL COUNTRIES



April 17, 1968.

The Passport Officer,
Dept. of External Affairs,
Ottawa, Ontario.

Dear Sir:

I enclose application for Canadian Passport for
Mr. Ramon Sneyd, together with photographs,
Statutory Declaration in Lieu of Guarantor and
Money Order for \$5.00.

As our client is anxious to travel soon, we would
be most grateful for prompt issuance of his
passport and mailing of same to this office.

Thank you for your assistance and kind regards.

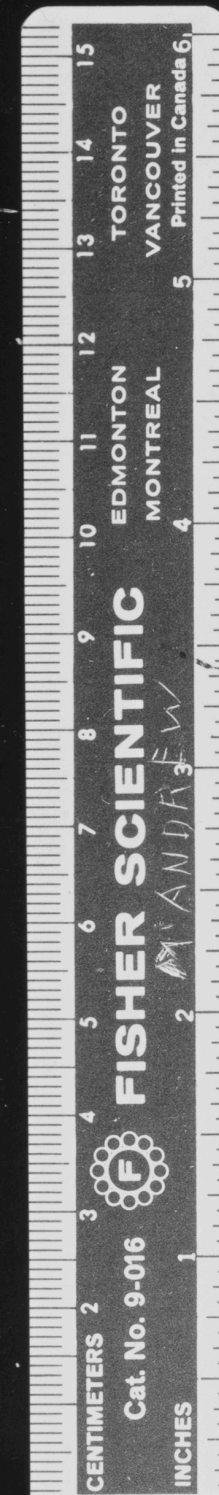
Sincerely yours,

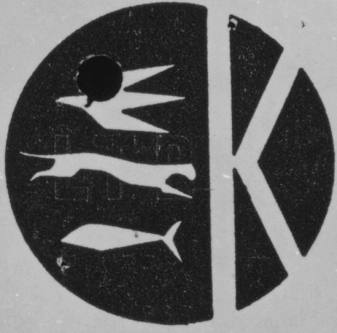
L. Spencer

(Miss) L. Spencer
Manager

Encs.

#3
1-6-68
HT





KENNEDY TRAVEL BUREAU LTD.

TRAVEL COUNSELLORS SINCE 1926 • AIRLINE • STEAMSHIP • INSURANCE AGENTS

424 BLOOR STREET WEST
TORONTO 4, ONT., CANADA
TELEPHONE: 921-3721

CABLE ADDRESS:
KENTRAVEL, TORONTO

AUTHORIZED AGENTS FOR:

AIR CANADA
AIR FRANCE
ALITALIA
AMERICAN AIRLINES
B. O. A. C.
CANADIAN PACIFIC AIRLINES
EL-AL
IRISH AIR LINES
K. L. M.
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IMMIGRATION, PASSPORT &
VISA SERVICE
HOTEL RESERVATIONS &
TOURS
BUS TICKETS
CN RAIL TICKETS

GIFT PARCEL SERVICE

NOTARIAL SERVICE

INTERPRETERS &
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INSURANCE OF ALL KINDS

APPROVED
SALES AGENTS



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Ottawa, Ontario.

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Statutory Declaration in Lieu of Guarantor and
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be most grateful for prompt issuance of his
passport and mailing of same to this office.

Thank you for your assistance and kind regards.

Sincerely yours,

L. Spencer

(Miss) L. Spencer
Manager

Encs.

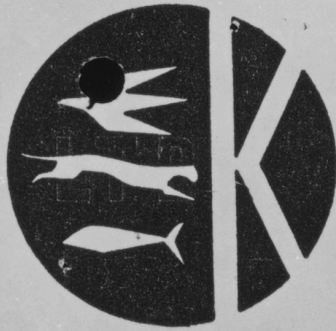
April 17, 1968.

#3
1-6-68
117



REPRESENTATIVES IN ALL COUNTRIES





KENNEDY TRAVEL BUREAU LTD.

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IMMIGRATION, PASSPORT &
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NOTARIAL SERVICE

INTERPRETERS &
TRANSLATORS

INSURANCE OF ALL KINDS

APPROVED
SALES AGENTS



The Passport Officer,
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Dear Sir:

I enclose application for Canadian Passport for
Mr. Ramon Sneyd, together with photographs,
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As our client is anxious to travel soon, we would
be most grateful for prompt issuance of his
passport and mailing of same to this office.

Thank you for your assistance and kind regards.

Sincerely yours,

L. Spencer

(Miss) L. Spencer
Manager

Encs.

April 17, 1968.

#3.
1-6-68
HT

REPRESENTATIVES IN ALL COUNTRIES





STATUTORY DECLARATION IN LIEU OF GUARANTOR

I, RAMON GEORGE SNEYD
of 962 DUNDAS ST. W - TORONTO - ONTARIO

do solemnly declare that:

1. The statements contained in the attached application for passport are true and correct;
2. There is no one in Canada, eligible under the Canadian passport regulations to vouch for passport applications, who knows me well enough to vouch for my application. The reason for this is that

I HAVE BEEN IN TORONTO ONLY 3 WEEKS.
.....
.....
.....

And I make this solemn declaration conscientiously believing it to be true, and knowing that it is of the same force and effect as if made under oath, and by virtue of the Canada Evidence Act.

Declared before me
at TORONTO in the
Province of ONTARIO
this 16th day of APRIL
AD 1968
[Signature]

Ramon George Sneyd

Commissioner for Oaths or a Notary Public
(Strike out inappropriate)

Notary Public Province of Ontario
FOR KENNEDY TRAVEL BUREAU LTD.
EXPIRY JUNE 29, 1969.

AR 1-6-68
KT



6381 Bulky
folder:
"Copies of Passport Application"

STATUTORY DECLARATION IN LIEU OF OATH

I, RAMON GEORGE SNYDER
of 962 DUNDAS ST. W - TOR

do solemnly declare that:

1. The statements contained in the attached application for passport are true and correct;
2. There is no one in Canada, eligible under the Canadian passport regulations to vouch for passport applications, who knows me well enough to vouch for my application. The reason for this is that

I HAVE BEEN IN TORONTO ONLY 3 WEEKS.
.....
.....
.....

And I make this solemn declaration conscientiously believing it to be true, and knowing that it is of the same force and effect as if made under oath, and by virtue of the Canada Evidence Act.

Declared before me)
 at TORONTO..... in the)
 Province of ONTARIO.....)
 this 16th day of APRIL.....)
 AD 1968.....)
)
 Commissioner for Oaths or a Notary)
 Public)
 (Strike out inappropriate)

Ramon George Snyder
.....

Notary Public Province of Ontario
FOR KENNEDY TRAVEL BUREAU LTD.
EXPIRY JUNE 29, 1969.

#12
Kend 1-6-68
RT

FORM A-O—APPLICATION FOR CANADIAN PASSPORT



For use by persons 16 years of age and over. Please detach and read the Instruction Sheet before completing application

IF DATE OF DEPARTURE KNOWN, ENTER HERE

FOR OFFICIAL USE ONLY



Grate

MR. *RAMON*

ANSWERS TO BE TYPEWRITTEN OR PRINTED IN INK.

1. FIRST NAME: **RAMON**
MIDDLE NAME: **GEORGE**
FAMILY OR LAST NAME: **SNEYD**
NAME BEFORE MARRIAGE:

2. MAIL PASSPORT TO: IN CARE OF (If Applicable)
962 DUNDAS ST. W.
STREET, BOX OR R.R. NO. APART. NO.

TORONTO
CITY, TOWN, ETC.

CANADA
COUNTRY

TELEPHONE: OFFICE—
HOME—

3. DATE OF BIRTH (DAY MONTH YEAR)
8 10 32

PLACE OF BIRTH. **TORONTO**
CITY, TOWN, ETC.

ONTARIO
PROVINCE

COUNTRY

SEX

MALE FEMALE

CANADA

6. VISIBLE DISTINGUISHING MARKS. (See Instruction No. 9)

4. HEIGHT: **5 FT. 10 INS.**
COLOUR OF HAIR: **BLACK**
COLOUR OF EYES: **BLUE**
WEIGHT: **170 LBS.**
5. OCCUPATION: **AUTO SALESMAN**

7. PLEASE READ INSTRUCTIONS Nos. 2 AND 10 BEFORE ENTERING NAMES OF CHILDREN TO APPEAR IN PASSPORT

GIVEN NAMES	LAST NAME	COUNTRY OF BIRTH	DATE OF BIRTH			SEX
			DAY	MONTH	YEAR	

Please attach a separate sheet showing children's names if space above inadequate

8. PERMANENT ADDRESS OF CHILDREN (CHILD) NAMED ABOVE

FOR OFFICIAL USE
4-1-A
COUNTRY

9. IF APPLICANT'S PERMANENT ADDRESS NOT SAME AS GIVEN IN QUESTION NO. 2, PLEASE PROVIDE HERE.

STREET CITY, TOWN PROVINCE

10. PERSON TO NOTIFY IN CANADA IN CASE OF EMERGENCY

NAME: **PAUL BRIDGMAN** 102 OSSINGTON TORONTO ONTARIO FRIEND

11. APPLICANT'S MARITAL STATUS

SINGLE MARRIED WIDOW(ER) DIVORCED SEPARATED ANNULLED

12. HAS YOUR NAME BEEN CHANGED?

IF "YES", GIVE FORMER NAME YES NO

13. HAVE YOU APPLIED FOR A CANADIAN PASSPORT OR CERTIFICATE OF IDENTITY (TRAVEL DOCUMENT) WITHIN THE LAST TEN YEARS?

IF "YES", PLEASE ENCLOSE AND ENTER: DOCUMENT NO. **DJ 909 324** DATE OF ISSUE **24 APRIL 1968** YES NO

14. HAVE YOU LOST A CANADIAN PASSPORT IN LAST TEN YEARS?

IF "YES", PLEASE COMPLY WITH INSTRUCTION NO. 12 YES NO

15. HAVE YOU A VALID OR EXPIRED PASSPORT OF ANOTHER COMMONWEALTH COUNTRY?

IF "YES", PLEASE ENCLOSE AND ENTER: DOCUMENT NO. DATE OF ISSUE YES NO

16. HAVE YOU THE NATIONALITY OR CITIZENSHIP OF A FOREIGN COUNTRY IN ADDITION TO CANADIAN CITIZENSHIP? IF "YES", ENTER NAME OF COUNTRY.



PHOTOGRAPHS

DOCUMENTS	IN	SEEN	OUT
BIRTH CERT.	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
CERT. BIRTH ABR.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
CERT. OF NAT.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
CERT. OF CIT.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
MARRIAGE	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
SEPARATION	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
DIVORCE	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
ANNULMENT	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
CHANGE OF NAME	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
ADOPTION	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
OTHER, SEE REMARKS COLUMN	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

FOR OFFICIAL USE ONLY
FILE MADE BY _____
INDEXED BY _____
APPLICATION EXAMINED BY _____
CARD BY _____
PASSPORT WRITTEN BY *uttl*
PASSPORT NO. **VT 602294**
DATED **May 16, 68**
VALID TO **24 APRIL 73**
CHECKED BY **ALM**

REMARKS
Gratis
Passport issued to replace spoiled passport DJ 909324 issued at Ottawa on 24 April 1968.

44-38861 JK Q369

AFFIDAVIT
(in lieu of guarantor)

I, ... *Pomora George Snyder*
of
make oath and say:

1. The statements contained in the attached application for a passport are true and correct;

2. There is no one in ... *Lisbon Portugal*
eligible under the Canadian passport regulations to act as guarantor for passport applications, who knows me well enough to act as guarantor for my application. The reason for this is that


I am only visited here on vacation
.....
.....

3. Attached hereto and marked Exhibit "A" to this my Affidavit is a true photograph of myself.

Sworn before me at)
.....(city))
in(country))
this day of)

Pomora George Snyder.....
(Signature)

A.D. 19


.....
(Signature of qualified official)

AUBREY L. MORANTZ

NOTE: In addition to usual signature please PRINT below name and address of official before whom Affidavit is sworn.

.....
(Name) (Address)

Notarial Stamp or Seal MUST also be affixed.

Ext. 377/Eng.
(Passport Div.)

HAVE YOU ANSWERED ALL QUESTIONS ON THIS PAGE?
SEE REVERSE SIDE

ALL APPLICANTS NOT BORN IN CANADA
PLEASE READ INSTRUCTION NO. 13 AND ANSWER QUESTIONS 17 TO 20 INCLUSIVE

17. IF YOU OR YOUR FATHER WERE ADMITTED TO CANADA AS A LANDED IMMIGRANT
 GIVE PORT OF ENTRY _____ DATE _____ NAME OF SHIP OR AIRLINE _____

18. GIVE PERIODS OF PERMANENT RESIDENCE IN CANADA UP TO PRESENT TIME
 FROM: _____ TO: _____ FROM: _____ TO: _____ FROM: _____ TO: _____

19. HAVE YOU A CERTIFICATE OF NATURALIZATION OF CITIZENSHIP OR HAS YOUR NAME BEEN INCLUDED IN A CERTIFICATE OF NATURALIZATION
 CHECK APPROPRIATE BOX IF QUESTION APPLIES TO YOU AND SUBMIT CERTIFICATE FOR INSPECTION. ENTER CERTIFICATE NO. _____ DATE OF ISSUE _____ (See Instruction No. 13)

20. DO YOU CLAIM CANADIAN CITIZENSHIP THROUGH YOUR FATHER (THIS EXCLUDES ADOPTIVE FATHER) YES NO
 IF "YES", GIVE FATHER'S NAME _____ AND **FORWARD FOR INSPECTION** HIS BIRTH CERTIFICATE. (See Instruction No. 13)
 FATHER'S COUNTRY OF BIRTH _____ FATHER'S NATIONAL STATUS WHEN YOU WERE BORN _____

PRESENT MARRIAGE—This section must be completed by women who are married or who have been married. NOTE: If married more than once, please answer questions below regarding present or most recent marriage. In next section enter details of your earlier marriage or marriages. (Please note Instruction 13(c) and Questions 29 and 30, if applicable)

21. PLACE OF MARRIAGE _____ DATE OF MARRIAGE _____ YOUR NATIONALITY OR CITIZENSHIP BEFORE MARRIAGE _____

22. HUSBAND'S FULL NAME _____ HUSBAND'S BIRTH DATE _____ HUSBAND'S PLACE OF BIRTH _____

23. PRESENT NATIONALITY OR CITIZENSHIP OF HUSBAND _____ AT TIME OF MARRIAGE _____ IF WIDOW, GIVE DATE OF HUSBAND'S DEATH _____

24. IF MARRIED BEFORE JANUARY 1, 1947 AND YOU CLAIM CITIZENSHIP SOLELY THROUGH MARRIAGE, WAS YOUR HUSBAND AT THE TIME OF MARRIAGE
 A CANADIAN NATIONAL, OR BRITISH SUBJECT BY BIRTH BY NATURALIZATION OR BY INCLUSION IN HIS FATHER'S CERTIFICATE OF NATURALIZATION (See Instruction No. 13)
 YOUR RESIDENCE IN CANADA HAS BEEN (Give Dates) FROM: _____ TO: _____ YOU HAVE PREVIOUSLY RESIDED IN (Name Country or Countries) _____

PREVIOUS MARRIAGE(S)—This section must be completed by women who have had a marriage other than the one noted above. If there has been more than one previous marriage, please answer same questions for each previous marriage on a separate sheet and attach. (Please note Instruction 13(c) and Questions 29 and 30, if applicable)

25. PLACE OF MARRIAGE _____ DATE OF MARRIAGE _____ YOUR NATIONALITY OR CITIZENSHIP BEFORE MARRIAGE _____

26. HUSBAND'S FULL NAME _____ HUSBAND'S BIRTH DATE _____ HUSBAND'S PLACE OF BIRTH _____

27. PRESENT NATIONALITY OR CITIZENSHIP OF HUSBAND _____ AT TIME OF MARRIAGE _____ IF HUSBAND DECEASED, DATE OF DEATH _____

28. IF MARRIED BEFORE JANUARY 1, 1947 AND YOU CLAIM CITIZENSHIP SOLELY THROUGH MARRIAGE, WAS YOUR HUSBAND AT THE TIME OF MARRIAGE
 A CANADIAN NATIONAL, OR BRITISH SUBJECT BY BIRTH BY NATURALIZATION OR BY INCLUSION IN HIS FATHER'S CERTIFICATE OF NATURALIZATION (See Instruction No. 13)
 YOUR RESIDENCE IN CANADA HAS BEEN (Give Dates) FROM: _____ TO: _____ YOU HAVE PREVIOUSLY RESIDED IN (Name Country or Countries) _____

29. IF MARRIED MORE THAN ONCE, **FORWARD PRESENT MARRIAGE CERTIFICATE FOR INSPECTION.**

30. IF MOST RECENT MARRIAGE WAS DISSOLVED OR ANNULLED, **FORWARD DIVORCE DECREES OR OTHER SUPPORTING DOCUMENTS.**
 (All Certificates and Documents will be Returned)

DECLARATION OF APPLICANT

I solemnly declare that the statements made in this application are true, that the photographs enclosed are a true likeness of me, and that I am a Canadian Citizen. I enclose the fee of five dollars (\$5.00) Canadian funds or its equivalent in bank draft or postal money order

Do not Send Cash

LISBOA, PORTUGAL 16 5 1968
 LOCATION (CITY, TOWN, ETC.) DAY MONTH YEAR

SIGNATURE OF APPLICANT Ramon George Sneyd (See Instruction No. 14)

DECLARATION OF GUARANTOR

Please see Instruction No. 4. for list of eligible guarantors and procedure for certifying photographs.
 (Only Guarantors listed will be accepted)
 NOTE: No Fee is Chargeable For This Declaration

I, _____ FIRST NAME _____ MIDDLE NAME _____ FAMILY NAME _____

declare that to the best of my knowledge and belief all the statements made in this application are true. I make this declaration from my knowledge of the applicant

whose name is _____

whom I have known personally for _____ years
 (Not Less Than Two Years)

LOCATION (CITY, TOWN, ETC.) _____ DAY _____ MONTH _____ YEAR _____

BUSINESS ADDRESS OF GUARANTOR—IN FULL (Please Print) _____

TELEPHONE: OFFICE— _____ HOME— _____

44-38861 JK Q369

FORM A-O—APPLICATION FOR CANADIAN PASSPORT



For use by persons 16 years of age and over. Please detach and read the Instruction Sheet before completing application

IF DATE OF DEPARTURE KNOWN, ENTER HERE

FOR OFFICIAL USE ONLY



Grate

ANSWERS TO BE TYPEWRITTEN OR PRINTED IN INK.

1. FIRST NAME: **R A M O N**
 MIDDLE NAME: **G E O R G E**
 FAMILY OR LAST NAME: **S N E Y D**
 NAME BEFORE MARRIAGE:

2. MAIL PASSPORT TO: IN CARE OF (If Applicable)
962 DUNDAS ST. W. **TORONTO** **CANADA**
 STREET, BOX OR R.R. NO. APART. NO. CITY, TOWN, ETC. COUNTRY

3. DATE OF BIRTH (DAY MONTH YEAR): **8 10 32** PLACE OF BIRTH: **TORONTO** **ONTARIO** **CANADA**
 CITY, TOWN, ETC. PROVINCE COUNTRY SEX: MALE FEMALE

4. HEIGHT: **5 FT. 10 INS.** COLOUR OF HAIR: **BLACK** COLOUR OF EYES: **BLUE** WEIGHT: **170 LBS.** 5. OCCUPATION: **AUTO SALESMAN** 6. VISIBLE DISTINGUISHING MARKS. (See Instruction No. 9)

7. PLEASE READ INSTRUCTIONS Nos. 2 AND 10 BEFORE ENTERING NAMES OF CHILDREN TO APPEAR IN PASSPORT

GIVEN NAMES	LAST NAME	COUNTRY OF BIRTH	DATE OF BIRTH			SEX
			DAY	MONTH	YEAR	

Please attach a separate sheet showing children's names if space above inadequate

8. PERMANENT ADDRESS OF CHILDREN (CHILD) NAMED ABOVE: **4-1-A** FOR OFFICIAL USE

9. IF APPLICANT'S PERMANENT ADDRESS NOT SAME AS GIVEN IN QUESTION NO. 2, PLEASE PROVIDE HERE. STREET: CITY, TOWN: PROVINCE: COUNTRY:

10. PERSON TO NOTIFY IN CANADA IN CASE OF EMERGENCY: NAME: **PAUL BRIDGMAN** STREET: **102 OSSINGTON** CITY, TOWN: **TORONTO** PROVINCE: **ONTARIO** RELATIONSHIP: **FRIEND**

11. APPLICANT'S MARITAL STATUS: SINGLE MARRIED WIDOW(ER) DIVORCED SEPARATED ANNULLED

12. HAS YOUR NAME BEEN CHANGED? YES NO IF "YES", GIVE FORMER NAME AND COMPLY WITH INSTRUCTION NO. 11.

13. HAVE YOU APPLIED FOR A CANADIAN PASSPORT OR CERTIFICATE OF IDENTITY (TRAVEL DOCUMENT) WITHIN THE LAST TEN YEARS? YES NO IF "YES", PLEASE ENCLOSE AND ENTER: DOCUMENT NO. **DJ909324** DATE OF ISSUE: **24 APRIL 1968**

14. HAVE YOU LOST A CANADIAN PASSPORT IN LAST TEN YEARS? YES NO IF "YES", PLEASE COMPLY WITH INSTRUCTION NO. 12

15. HAVE YOU A VALID OR EXPIRED PASSPORT OF ANOTHER COMMONWEALTH COUNTRY? YES NO IF "YES", PLEASE ENCLOSE AND ENTER: DOCUMENT NO. DATE OF ISSUE

16. HAVE YOU THE NATIONALITY OR CITIZENSHIP OF A FOREIGN COUNTRY IN ADDITION TO CANADIAN CITIZENSHIP? YES NO IF "YES", ENTER NAME OF COUNTRY.

FOR OFFICIAL USE ONLY



DOCUMENTS	IN	SEEN	OUT	FILE MADE BY
BIRTH CERT.	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	INDEXED BY
CERT. BIRTH ABR.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	APPLICATION EXAMINED BY
CERT. OF NAT.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	CARD BY
CERT. OF CIT.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	PASSPORT WRITTEN BY: <i>untl</i>
MARRIAGE	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	PASSPORT NO. VT 602294
SEPARATION	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	DATED: May 16, 68
DIVORCE	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	VALID TO: 24 APRIL 73
ANNULMENT	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	CHECKED BY: ALM
CHANGE OF NAME	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
ADOPTION	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
OTHER, SEE REMARKS COLUMN	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

REMARKS: *Gratis*
 Passport issued to replace spoiled passport DJ909324 issued at Ottawa on 24 April 1968.

HAVE YOU ANSWERED ALL QUESTIONS ON THIS PAGE? SEE REVERSE SIDE

20. DO YOU CLAIM CANADIAN CITIZENSHIP THROUGH YOUR FATHER (THIS EXCLUDES ADOPTIVE FATHER) YES NO (See Instruction No. 13)
 IF "YES", GIVE FATHER'S NAME AND **FORWARD FOR INSPECTION HIS BIRTH CERTIFICATE.** (See Instruction No. 13)
 FATHER'S COUNTRY OF BIRTH FATHER'S NATIONAL STATUS WHEN YOU WERE BORN

PRESENT MARRIAGE—This section must be completed by women who are married or who have been married. NOTE: If married more than once, please answer questions below regarding present or most recent marriage. In next section enter details of your earlier marriage or marriages. (Please note Instruction 13(c) and Questions 29 and 30, if applicable)

21. PLACE OF MARRIAGE DATE OF MARRIAGE YOUR NATIONALITY OR CITIZENSHIP BEFORE MARRIAGE
 22. HUSBAND'S FULL NAME HUSBAND'S BIRTH DATE HUSBAND'S PLACE OF BIRTH
 23. PRESENT NATIONALITY OR CITIZENSHIP OF HUSBAND AT TIME OF MARRIAGE IF WIDOW, GIVE DATE OF HUSBAND'S DEATH
 24. IF MARRIED BEFORE JANUARY 1, 1947 AND YOU CLAIM CITIZENSHIP SOLELY THROUGH MARRIAGE, WAS YOUR HUSBAND AT THE TIME OF MARRIAGE
 A CANADIAN NATIONAL, OR BRITISH SUBJECT BY BIRTH BY NATURALIZATION OR BY INCLUSION IN HIS FATHER'S CERTIFICATE OF NATURALIZATION (See Instruction No. 13)
 YOUR RESIDENCE IN CANADA HAS BEEN (Give Dates) FROM: TO: YOU HAVE PREVIOUSLY RESIDED IN (Name Country or Countries)

PREVIOUS MARRIAGE(S)—This section must be completed by women who have had a marriage other than the one noted above. If there has been more than one previous marriage, please answer same questions for each previous marriage on a separate sheet and attach. (Please note Instruction 13(c) and Questions 29 and 30, if applicable)

25. PLACE OF MARRIAGE DATE OF MARRIAGE YOUR NATIONALITY OR CITIZENSHIP BEFORE MARRIAGE
 26. HUSBAND'S FULL NAME HUSBAND'S BIRTH DATE HUSBAND'S PLACE OF BIRTH
 27. PRESENT NATIONALITY OR CITIZENSHIP OF HUSBAND AT TIME OF MARRIAGE IF HUSBAND DECEASED, DATE OF DEATH
 28. IF MARRIED BEFORE JANUARY 1, 1947 AND YOU CLAIM CITIZENSHIP SOLELY THROUGH MARRIAGE, WAS YOUR HUSBAND AT THE TIME OF MARRIAGE
 A CANADIAN NATIONAL, OR BRITISH SUBJECT BY BIRTH BY NATURALIZATION OR BY INCLUSION IN HIS FATHER'S CERTIFICATE OF NATURALIZATION (See Instruction No. 13)
 YOUR RESIDENCE IN CANADA HAS BEEN (Give Dates) FROM: TO: YOU HAVE PREVIOUSLY RESIDED IN (Name Country or Countries)

29. IF MARRIED MORE THAN ONCE, **FORWARD PRESENT MARRIAGE CERTIFICATE FOR INSPECTION.**
 30. IF MOST RECENT MARRIAGE WAS DISSOLVED OR ANNULLED, **FORWARD DIVORCE DECREES OR OTHER SUPPORTING DOCUMENTS.**
 (All Certificates and Documents will be Returned)

DECLARATION OF APPLICANT

I solemnly declare that the statements made in this application are true, that the photographs enclosed are a true likeness of me, and that I am a Canadian Citizen. I enclose the fee of five dollars (\$5.00) Canadian funds or its equivalent in bank draft or postal money order

Do not Send Cash
 LISBOA, PORTUGAL 16 5 1968
 LOCATION (CITY, TOWN, ETC.) DAY MONTH YEAR SIGNATURE OF APPLICANT (See Instruction No. 14)

DECLARATION OF GUARANTOR

Please see Instruction No. 4. for list of eligible guarantors and procedure for certifying photographs.
 (Only Guarantors listed will be accepted)

NOTE: No Fee is Chargeable For This Declaration

FIRST NAME MIDDLE NAME FAMILY NAME
 I, [] [] []

declare that to the best of my knowledge and belief all the statements made in this application are true. I make this declaration from my knowledge of the applicant

whose name is

whom I have known personally for years
 (Not less than Two Years)

LOCATION (CITY, TOWN, ETC.) DAY MONTH YEAR

BUSINESS ADDRESS OF GUARANTOR—IN FULL (Please Print)

TELEPHONE: OFFICE—
 HOME—

OCCUPATION OF GUARANTOR (Please Print)

SIGNATURE OF GUARANTOR (See Instruction No. 4(c))

PLEASE READ WARNING IN PARAGRAPH 6 OF INSTRUCTIONS

44-38861 JK Q369



FORM A-O—APPLICATION FOR CANADIAN PASSPORT



For use by persons 16 years of age and over. Please detach and read the Instruction Sheet before completing application

IF DATE OF DEPARTURE KNOWN, ENTER HERE

FOR OFFICIAL USE ONLY



Gratis

MR. *Gratis*

ANSWERS TO BE TYPEWRITTEN OR PRINTED IN INK.

1. FIRST NAME: **R A M O N**
 MIDDLE NAME: **G E O R G E**
 FAMILY OR LAST NAME: **S N E Y D**
 NAME BEFORE MARRIAGE:

2. MAIL PASSPORT TO: IN CARE OF (If Applicable)
962 DUNDAS ST. W. STREET, BOX OR R.R. NO. **60** APART. NO.
TORONTO CITY, TOWN, ETC. **CANADA** COUNTRY
 TELEPHONE: OFFICE—
 HOME—

3. DATE OF BIRTH (DAY MONTH YEAR) **8 10 32** PLACE OF BIRTH. **TORONTO** CITY, TOWN, ETC. **ONTARIO** PROVINCE **CANADA** COUNTRY
 SEX: MALE FEMALE

4. HEIGHT **5 FT. 10 INS.** COLOUR OF HAIR **BLACK** COLOUR OF EYES **BLUE** WEIGHT **170** LBS. 5. OCCUPATION **AUTO SALESMAN** 6. VISIBLE DISTINGUISHING MARKS. (See Instruction No. 9)

7. PLEASE READ INSTRUCTIONS Nos. 2 AND 10 BEFORE ENTERING NAMES OF CHILDREN TO APPEAR IN PASSPORT

GIVEN NAMES	LAST NAME	COUNTRY OF BIRTH	DATE OF BIRTH			SEX
			DAY	MONTH	YEAR	

Please attach a separate sheet showing children's names if space above inadequate

8. PERMANENT ADDRESS OF CHILDREN (CHILD) NAMED ABOVE

FOR OFFICIAL USE
4-1-A

9. IF APPLICANT'S PERMANENT ADDRESS NOT SAME AS GIVEN IN QUESTION NO. 2, PLEASE PROVIDE HERE.

10. PERSON TO NOTIFY IN CANADA IN CASE OF EMERGENCY

NAME	STREET	CITY, TOWN	PROVINCE	RELATIONSHIP
PAUL BRIDGMAN	102 OSSINGTON	TORONTO	ONTARIO	FRIEND

11. APPLICANT'S MARITAL STATUS

SINGLE MARRIED WIDOW(ER) DIVORCED SEPARATED ANNULLED

12. HAS YOUR NAME BEEN CHANGED? YES NO

IF "YES", GIVE FORMER NAME _____ AND COMPLY WITH INSTRUCTION NO. 11.

13. HAVE YOU APPLIED FOR A CANADIAN PASSPORT OR CERTIFICATE OF IDENTITY (TRAVEL DOCUMENT) WITHIN THE LAST TEN YEARS? YES NO

14. HAVE YOU LOST A CANADIAN PASSPORT IN LAST TEN YEARS? YES NO

IF "YES", PLEASE ENCLOSE AND ENTER: DOCUMENT NO. **DS 909 324** DATE OF ISSUE **24 APRIL 1968**

15. HAVE YOU A VALID OR EXPIRED PASSPORT OF ANOTHER COMMONWEALTH COUNTRY? YES NO

IF "YES", PLEASE ENCLOSE AND ENTER: DOCUMENT NO. _____ DATE OF ISSUE _____

16. HAVE YOU THE NATIONALITY OR CITIZENSHIP OF A FOREIGN COUNTRY IN ADDITION TO CANADIAN CITIZENSHIP? YES NO

IF "YES", ENTER NAME OF COUNTRY _____

FOR OFFICIAL USE ONLY



DOCUMENTS	IN	SEEN	OUT
BIRTH CERT.	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
CERT. BIRTH ABR.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
CERT. OF NAT.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
CERT. OF CIT.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
MARRIAGE	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
SEPARATION	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
DIVORCE	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
ANNULMENT	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
CHANGE OF NAME	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
ADOPTION	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
OTHER, SEE REMARKS COLUMN	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

FILE MADE BY _____
 INDEXED BY _____
 APPLICATION EXAMINED BY _____
 CARDED BY _____
 PASSPORT WRITTEN BY *utl*
 PASSPORT NO. *VT 602294*
 DATED *May 16, 68*
 VALID TO *24 APRIL 73*
 CHECKED BY *ALM*

REMARKS
Gratis
 Passport issued to replace spoiled passport DS 909324 issued at Ottawa on 24 April 1968.

HAVE YOU ANSWERED ALL QUESTIONS ON THIS PAGE?
 SEE REVERSE SIDE

44-38861 JK Q369
FBI

20. DO YOU CLAIM CANADIAN CITIZENSHIP THROUGH YOUR FATHER (THIS EXCLUDES ADOPTIVE FATHER) YES NO (See Instruction No. 13)
 IF "YES", GIVE FATHER'S NAME AND **FORWARD FOR INSPECTION** HIS BIRTH CERTIFICATE. (See Instruction No. 13)
 FATHER'S COUNTRY OF BIRTH FATHER'S NATIONAL STATUS WHEN YOU WERE BORN

PRESENT MARRIAGE—This section must be completed by women who are married or who have been married. NOTE: If married more than once, please answer questions below regarding present or most recent marriage. In next section enter details of your earlier marriage or marriages. (Please note Instruction 13(c) and Questions 29 and 30, if applicable)

21. PLACE OF MARRIAGE DATE OF MARRIAGE YOUR NATIONALITY OR CITIZENSHIP BEFORE MARRIAGE
 22. HUSBAND'S FULL NAME HUSBAND'S BIRTH DATE HUSBAND'S PLACE OF BIRTH
 23. PRESENT NATIONALITY OR CITIZENSHIP OF HUSBAND AT TIME OF MARRIAGE IF WIDOW, GIVE DATE OF HUSBAND'S DEATH
 24. IF MARRIED BEFORE JANUARY 1, 1947 AND YOU CLAIM CITIZENSHIP SOLELY THROUGH MARRIAGE, WAS YOUR HUSBAND AT THE TIME OF MARRIAGE A CANADIAN NATIONAL, OR BRITISH SUBJECT BY BIRTH BY NATURALIZATION OR BY INCLUSION IN HIS FATHER'S CERTIFICATE OF NATURALIZATION (See Instruction No. 13)
 YOUR RESIDENCE IN CANADA HAS BEEN (Give Dates) FROM: TO: YOU HAVE PREVIOUSLY RESIDED IN (Name Country or Countries)

PREVIOUS MARRIAGE(S)—This section must be completed by women who have had a marriage other than the one noted above. If there has been more than one previous marriage, please answer same questions for each previous marriage on a separate sheet and attach. (Please note Instruction 13(c) and Questions 29 and 30, if applicable)

25. PLACE OF MARRIAGE DATE OF MARRIAGE YOUR NATIONALITY OR CITIZENSHIP BEFORE MARRIAGE
 26. HUSBAND'S FULL NAME HUSBAND'S BIRTH DATE HUSBAND'S PLACE OF BIRTH
 27. PRESENT NATIONALITY OR CITIZENSHIP OF HUSBAND AT TIME OF MARRIAGE IF HUSBAND DECEASED, DATE OF DEATH
 28. IF MARRIED BEFORE JANUARY 1, 1947 AND YOU CLAIM CITIZENSHIP SOLELY THROUGH MARRIAGE, WAS YOUR HUSBAND AT THE TIME OF MARRIAGE A CANADIAN NATIONAL, OR BRITISH SUBJECT BY BIRTH BY NATURALIZATION OR BY INCLUSION IN HIS FATHER'S CERTIFICATE OF NATURALIZATION (See Instruction No. 13)
 YOUR RESIDENCE IN CANADA HAS BEEN (Give Dates) FROM: TO: YOU HAVE PREVIOUSLY RESIDED IN (Name Country or Countries)

29. IF MARRIED MORE THAN ONCE, **FORWARD PRESENT MARRIAGE CERTIFICATE FOR INSPECTION.**
 30. IF MOST RECENT MARRIAGE WAS DISSOLVED OR ANNULLED, **FORWARD DIVORCE DECREES OR OTHER SUPPORTING DOCUMENTS.**
 (All Certificates and Documents will be Returned)

DECLARATION OF APPLICANT

I solemnly declare that the statements made in this application are true, that the photographs enclosed are a true likeness of me, and that I am a Canadian Citizen. I enclose the fee of five dollars (\$5.00) Canadian funds or its equivalent in bank draft or postal money order

Do not Send Cash

LISBOA, PORTUGAL 16 5 1968
 LOCATION (CITY, TOWN, ETC.) DAY MONTH YEAR SIGNATURE OF APPLICANT (See Instruction No. 14)

DECLARATION OF GUARANTOR

Please see Instruction No. 4. for list of eligible guarantors and procedure for certifying photographs
 (Only Guarantors listed will be accepted)

NOTE: No Fee is Chargeable For This Declaration

I, [FIRST NAME] [MIDDLE NAME] [FAMILY NAME]

declare that to the best of my knowledge and belief all the statements made in this application are true. I make this declaration from my knowledge of the applicant

whose name is [Signature]

whom I have known personally for [Signature] years (Not less than Two Years)

LOCATION (CITY, TOWN, ETC.) DAY MONTH YEAR

BUSINESS ADDRESS OF GUARANTOR—IN FULL (Please Print) TELEPHONE: OFFICE— HOME—

OCCUPATION OF GUARANTOR (Please Print) SIGNATURE OF GUARANTOR (See Instruction No. 4(c))

PLEASE READ WARNING IN PARAGRAPH 6 OF INSTRUCTIONS

44-38861 JK Q369
 FBI LABORATORY



File No. _____

Form A - APPLICATION FOR CANADIAN PASSPORT

For use by persons 16 years of age and over. Please detach and read the Instruction Sheet before completing application

IF DATE OF DEPARTURE KNOWN, ENTER HERE

FOR OFFICIAL USE ONLY

MR. MRS. OR MISS _____ ANSWERS TO BE TYPEWRITTEN OR PRINTED IN INK.

1. FIRST NAME	R	A	M	O	N															
MIDDLE NAME	G	E	O	R	G	E														
FAMILY OR LAST NAME	S	N	E	Y	A															
NAME BEFORE MARRIAGE																				

PASSPORT OFFICE
OTTAWA
APR 24 '68
PASSPORT ISSUED
190932
4

2. MAIL PASSPORT TO: IN CARE OF (If Applicable)
KENNEDY TRAVEL BUREAU LTD: 424 BLOOR ST W - TORONTO
STREET, BOX OR R.R. NO. _____ APART. NO. _____ CITY, TOWN, ETC. _____ PROVINCE _____ TELEPHONE: OFFICE- _____ HOME - 537-9845
902 DUNDAS ST. W - TORONTO ONT.

3. DATE OF BIRTH (DAY MONTH YEAR) _____ PLACE OF BIRTH. _____ CITY, TOWN, ETC. _____ PROVINCE OR COUNTRY _____ SEX _____
OCT 8 1932 TORONTO ONT CANADA MALE FEMALE

4. HEIGHT _____ COLOUR OF HAIR _____ COLOUR OF EYES _____ WEIGHT _____ 5. OCCUPATION _____ 6. VISIBLE DISTINGUISHING MARKS. (See Instruction No. 9)
5 FT. 10 INS. BLACK BLUE 168 LBS. SALESMAN CAR SCAR OVER NOSE.

7. PLEASE READ INSTRUCTIONS Nos. 2 AND 10 BEFORE ENTERING NAMES OF CHILDREN TO APPEAR IN PASSPORT

GIVEN NAMES	LAST NAME	COUNTRY OF BIRTH	DATE OF BIRTH			SEX
			DAY	MONTH	YEAR	

Please attach a separate sheet showing children's names if space above inadequate

8. PERMANENT ADDRESS OF CHILDREN (CHILD) NAMED ABOVE _____ FOR OFFICIAL USE 4-1-A

9. IF APPLICANT'S PERMANENT ADDRESS NOT SAME AS GIVEN IN QUESTION NO. 2, PLEASE PROVIDE HERE. STREET _____ CITY, TOWN _____ PROVINCE _____ COUNTRY _____
96Y DUNDAS ST. W - TORONTO ONT CANADA

10. PERSON TO NOTIFY IN CANADA IN CASE OF EMERGENCY NAME _____ STREET _____ CITY, TOWN _____ PROVINCE _____ RELATIONSHIP _____
MR. PAUL BRIDGMAN - 10Y OSSINGTON AVE TORONTO ONT FRIEND

11. APPLICANT'S MARITAL STATUS
SINGLE MARRIED WIDOW(ER) DIVORCED SEPARATED ANNULLED

12. HAS YOUR NAME BEEN CHANGED? YES NO
IF "YES", GIVE FORMER NAME _____ AND COMPLY WITH INSTRUCTION NO. 11.

13. HAVE YOU APPLIED FOR A CANADIAN PASSPORT OR CERTIFICATE OF IDENTITY (TRAVEL DOCUMENT) WITHIN THE LAST TEN YEARS? YES NO
IF "YES", PLEASE ENCLOSE AND ENTER: DOCUMENT NO. _____ DATE OF ISSUE _____

14. HAVE YOU LOST A CANADIAN PASSPORT IN LAST TEN YEARS? YES NO
IF "YES", PLEASE COMPLY WITH INSTRUCTION NO. 12

15. HAVE YOU A VALID OR EXPIRED PASSPORT OF ANOTHER COMMONWEALTH COUNTRY? YES NO
IF "YES", PLEASE ENCLOSE AND ENTER: DOCUMENT NO. _____ DATE OF ISSUE _____

16. HAVE YOU THE NATIONALITY OR CITIZENSHIP OF A FOREIGN COUNTRY IN ADDITION TO CANADIAN CITIZENSHIP? YES NO
IF "YES", ENTER NAME OF COUNTRY. _____

PHOTOGRAPHS
a) Photos should measure 2 x 2 3/4 inches including 1/2 inch signature strip
b) Applicant MUST SIGN his name at bottom of each photo.
c) Guarantor MUST CERTIFY one photo on the back.
d) Enclose loosely or attach with paper clip but DO NOT glue, pin or staple.
(See Instruction No. 3)

FOR OFFICIAL USE ONLY

DOCUMENTS	IN	SEEN	OUT
BIRTH CERT.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
CERT. BIRTH ABR.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
CERT. OF NAT.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
CERT. OF CIT.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
MARRIAGE	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
SEPARATION	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
DIVORCE	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
ANNULMENT	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
CHANGE OF NAME	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
ADOPTION	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
OTHER, SEE REMARKS COLUMN	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

FOR OFFICIAL USE ONLY

FILE MADE BY _____
INDEXED BY _____
APPLICATION EXAMINED BY W.A. YOUNG
CARD BY _____
PASSPORT WRITTEN BY _____
PASSPORT NO. _____
DATED _____
VALID TO _____
CHECKED BY _____

REMARKS
P.M. 185
Stal Deal
FILE CRUNEE
STORAGE DATE MAILED
APR 25 1968
REG. No. _____

D. JACKSON

HAVE YOU ANSWERED ALL QUESTIONS ON THIS PAGE SEE REVERSE SIDE

ALL APPLICANTS NOT BORN IN CANADA
PLEASE READ INSTRUCTION NO. 13 AND ANSWER QUESTIONS 17 TO 20 INCLUSIVE

17. IF YOU <input type="checkbox"/> OR YOUR FATHER <input type="checkbox"/> WERE ADMITTED TO CANADA AS A LANDED IMMIGRANT GIVE PORT OF ENTRY _____ DATE _____	NAME OF SHIP OR AIRLINE _____
18. GIVE PERIODS OF PERMANENT RESIDENCE IN CANADA UP TO PRESENT TIME FROM: _____ TO: _____ FROM: _____ TO: _____	
19. HAVE YOU A CERTIFICATE OF NATURALIZATION <input type="checkbox"/> OF CITIZENSHIP <input type="checkbox"/> OR HAS YOUR NAME BEEN INCLUDED IN A CERTIFICATE OF NATURALIZATION <input type="checkbox"/> CHECK APPROPRIATE BOX IF QUESTION APPLIES TO YOU AND SUBMIT CERTIFICATE FOR INSPECTION. ENTER CERTIFICATE NO. _____ DATE OF ISSUE _____ (See instruction No. 13b)	
20. DO YOU CLAIM CANADIAN CITIZENSHIP THROUGH YOUR FATHER (THIS EXCLUDES ADOPTIVE FATHER) YES <input type="checkbox"/> NO <input type="checkbox"/> IF "YES", GIVE FATHER'S NAME _____ AND FORWARD FOR INSPECTION HIS BIRTH CERTIFICATE. (See Instruction No. 13) FATHER'S COUNTRY OF BIRTH _____ FATHER'S NATIONAL STATUS WHEN YOU WERE BORN _____	

PRESENT MARRIAGE—This section must be completed by women who are married or who have been married. NOTE: If married more than once, please answer questions below regarding present or most recent marriage. In next section enter details of your earlier marriage or marriages. (Please note Instruction 13(c) and Questions 29 and 30, if applicable)

21. PLACE OF MARRIAGE _____	DATE OF MARRIAGE _____	YOUR NATIONALITY OR CITIZENSHIP BEFORE MARRIAGE _____
22. HUSBAND'S FULL NAME _____	HUSBAND'S BIRTH DATE _____	HUSBAND'S PLACE OF BIRTH _____
23. PRESENT NATIONALITY OR CITIZENSHIP OF HUSBAND _____	AT TIME OF MARRIAGE _____	IF WIDOW, GIVE DATE OF HUSBAND'S DEATH _____
24. IF MARRIED BEFORE JANUARY 1, 1947 AND YOU CLAIM CITIZENSHIP SOLELY THROUGH MARRIAGE, WAS YOUR HUSBAND AT THE TIME OF MARRIAGE A CANADIAN NATIONAL, OR BRITISH SUBJECT BY BIRTH <input type="checkbox"/> BY NATURALIZATION <input type="checkbox"/> OR BY INCLUSION IN HIS FATHER'S CERTIFICATE OF NATURALIZATION <input type="checkbox"/> (See Instruction No. 13) YOUR RESIDENCE IN CANADA HAS BEEN (Give Dates) FROM: _____ TO: _____ YOU HAVE PREVIOUSLY RESIDED IN (Name Country or Countries) _____		

PREVIOUS MARRIAGE(S)—This section must be completed by women who have had a marriage other than the one noted above. If there has been more than one previous marriage, please answer same questions for each previous marriage on a separate sheet and attach. (Please note Instruction 13(c) and Questions 29 and 30, if applicable)

25. PLACE OF MARRIAGE _____	DATE OF MARRIAGE _____	YOUR NATIONALITY OR CITIZENSHIP BEFORE MARRIAGE _____
26. HUSBAND'S FULL NAME _____	HUSBAND'S BIRTH DATE _____	HUSBAND'S PLACE OF BIRTH _____
27. PRESENT NATIONALITY OR CITIZENSHIP OF HUSBAND _____	AT TIME OF MARRIAGE _____	IF HUSBAND DECEASED, DATE OF DEATH _____
28. IF MARRIED BEFORE JANUARY 1, 1947 AND YOU CLAIM CITIZENSHIP SOLELY THROUGH MARRIAGE, WAS YOUR HUSBAND AT THE TIME OF MARRIAGE A CANADIAN NATIONAL, OR BRITISH SUBJECT BY BIRTH <input type="checkbox"/> BY NATURALIZATION <input type="checkbox"/> OR BY INCLUSION IN HIS FATHER'S CERTIFICATE OF NATURALIZATION <input type="checkbox"/> (See Instruction No. 13) YOUR RESIDENCE IN CANADA HAS BEEN (Give Dates) FROM: _____ TO: _____ YOU HAVE PREVIOUSLY RESIDED IN (Name Country or Countries) _____		

29. IF MARRIED MORE THAN ONCE, **FORWARD PRESENT MARRIAGE CERTIFICATE FOR INSPECTION.**

30. IF MOST RECENT MARRIAGE WAS DISSOLVED OR ANNULLED, **FORWARD DIVORCE DECREES OR OTHER SUPPORTING DOCUMENTS.**
 (All Certificates and Documents will be Returned)

31. DECLARATION OF APPLICANT

I solemnly declare that the statements made in this application are true, that the photographs enclosed are a true likeness of me, and that I am a Canadian Citizen. I enclose the fee of five dollars (\$5.00) in bank, express or postal money order or certified cheque

Do not Send Cash

LOCATION (CITY, TOWN, ETC.)	DAY	MONTH	YEAR	SIGNATURE OF APPLICANT (See Instruction No. 14)
TORONTO	16	APR	1968	Ramon George Snyder

32. DECLARATION OF GUARANTOR

Please see Instruction No. 4. for list of eligible guarantors and procedure for certifying photographs.
 (Only Guarantors listed will be accepted)
 NOTE: No Fee is Chargeable For This Declaration

FIRST NAME	MIDDLE NAME	FAMILY NAME
I, _____	_____	_____

declare that to the best of my knowledge and belief all the statements made in this application are true. I make this declaration from my knowledge of the applicant

whose name is _____

whom I have known personally for _____ years
 (Not Less Than Two Years)

LOCATION (CITY, TOWN, ETC.)	DAY	MONTH	YEAR
_____	_____	_____	_____

BUSINESS ADDRESS OF GUARANTOR—IN FULL (Please Print) _____ TELEPHONE: OFFICE—
 HOME—

OCCUPATION OF GUARANTOR (Please Print) _____ SIGNATURE OF GUARANTOR (See Instruction No. 4(c)) _____

PLEASE READ WARNING IN PARAGRAPH 6 OF INSTRUCTIONS

EXTERNAL AFFAIRS



AFFAIRES EXTÉRIEURES

TO
À The Canadian Passport Division

SECURITY UNCLASSIFIED
Sécurité

FROM
De The Canadian Embassy, Lisbon

DATE May 17, 1968

REFERENCE
Référence

NUMBER
Numéro 172

SUBJECT
Sujet Replacement of Spoiled Passport

FILE	DOSSIER
OTTAWA	
MISSION	84-11

ENCLOSURES
Annexes

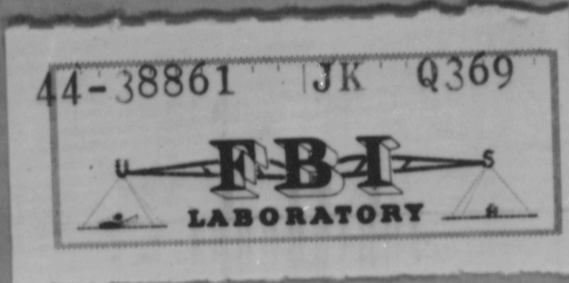
DISTRIBUTION

Mr. Ramon George Sneyd visited this Embassy to indicate that an error had been made in the spelling of his name in passport number DJ 909324 issued to him at Ottawa on April 29, 1968. His name had been spelled "Sneya" in this document.

2. We cancelled this inaccurate passport and after checking his Ontario birth certificate we issued gratis a replacement passport YT 602294 on May 16, 1968, valid until April 24, 1973.

3. This letter is being sent with the passport returns for May-June 1968.

The Embassy.



PHOTOGRAPHS



BIRTH CERT.	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
CERT. BIRTH ABR.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
CERT. OF NAT.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
CERT. OF CIT.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
MARRIAGE	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
SEPARATION	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
DIVORCE	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
ANNULMENT	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
CHANGE OF NAME	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
ADOPTION	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
OTHER, SEE	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

INDEXED BY	
APPLICATION EXAMINED BY	
CARD BY	
PASSPORT WRITTEN BY	untl
PASSPORT NO.	YT 602294
DATED	May 16, 68
VALID TO	24 APRIL 73
CHECKED BY	ALM

to replace spoiled passport DJ 909324 issued at Ottawa on 24 April 1968.

EXTERNAL AFFAIRS



AFFAIRES EXTÉRIEURES

TO
À The Canadian Passport Division

SECURITY
Sécurité UNCLASSIFIED

FROM
De The Canadian Embassy, Lisbon

DATE May 17, 1968

REFERENCE
Référence

NUMBER
Numéro 172

SUBJECT
Sujet Replacement of Spoiled Passport

FILE	DOSSIER
OTTAWA	
MISSION	84-11

ENCLOSURES
Annexes

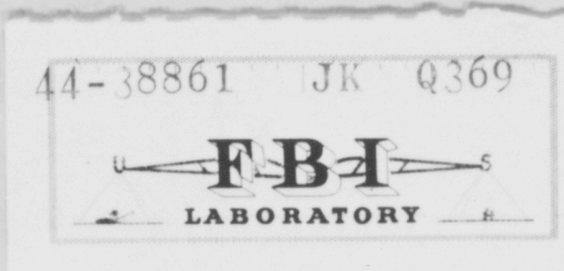
DISTRIBUTION

Mr. Ramon George Sneyd visited this Embassy to indicate that an error had been made in the spelling of his name in passport number DJ 909324 issued to him at Ottawa on April 24, 1968. His name had been spelled "Sneya" in this document.

2. We cancelled this inaccurate passport and after checking his Ontario birth certificate we issued gratis a replacement passport YT 602294 on May 16, 1968, valid until April 24, 1973.

3. This letter is being sent with the passport returns for May-June 1968.

The Embassy.



PHOTOGRAPHS



BIRTH CERT.	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
CERT. BIRTH ABR.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
CERT. OF NAT.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
CERT. OF CIT.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
MARRIAGE	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
SEPARATION	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
DIVORCE	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
ANNULMENT	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
CHANGE OF NAME	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
ADOPTION	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
OTHER, SEE	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

INDEXED BY
APPLICATION
EXAMINED BY

CARDED BY
PASSPORT
WRITTEN BY

PASSPORT NO.

DATED

VALID TO

CHECKED BY

to replace spoiled
passport DJ 909324
issued at
Ottawa on
24 April 1968.

until
YT 602294
May 16, 68
24 APRIL 73
ALM

EXTERNAL AFFAIRS



AFFAIRES EXTÉRIEURES

TO
A The Canadian Passport Division

SECURITY UNCLASSIFIED
Sécurité

FROM
De The Canadian Embassy, Lisbon

DATE May 17, 1968

REFERENCE
Référence

NUMBER 172
Numéro

SUBJECT
Sujet Replacement of Spoiled Passport

FILE	DOSSIER
OTTAWA	
MISSION	84-11

ENCLOSURES
Annexes

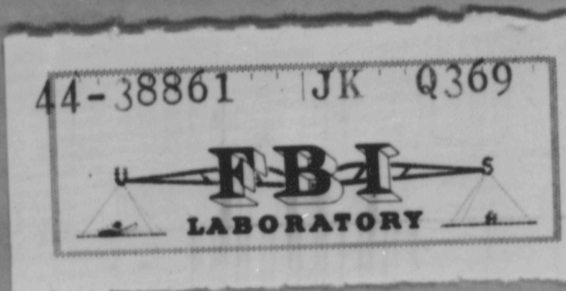
DISTRIBUTION

Mr. Ramon George Sneyd visited this Embassy to indicate that an error had been made in the spelling of his name in passport number DJ 909324 issued to him at Ottawa on April 29, 1968. His name had been spelled "Sneya" in this document.

2. We cancelled this inaccurate passport and after checking his Ontario birth certificate we issued gratis a replacement passport YT 602294 on May 16, 1968, valid until April 24, 1973.

3. This letter is being sent with the passport returns for May-June 1968.

The Embassy.



PHOTOGRAPHS



BIRTH CERT.	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
CERT. BIRTH ABR.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
CERT. OF NAT.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
CERT. OF CIT.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
MARRIAGE	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
SEPARATION	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
DIVORCE	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
ANNULMENT	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
CHANGE OF NAME	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
ADOPTION	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
OTHER, SEE	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

INDEXED BY	
APPLICATION EXAMINED BY	
CARD BY	
PASSPORT WRITTEN BY	utl
PASSPORT NO.	YT 602294
DATED	May 16, 68
VALID TO	24 APRIL 73
CHECKED BY	ALM

to replace spoiled passport DJ 909324 issued at Ottawa on 24 April 1968.

FORM A-O—APPLICATION FOR CANADIAN PASSPORT

For use by persons 16 years of age and over. Please detach and read the Instruction Sheet before completing application

IF DATE OF DEPARTURE KNOWN, ENTER HERE

FOR OFFICIAL USE ONLY

MR. RAMON ANSWERS TO BE TYPEWRITTEN OR PRINTED IN INK.

1. FIRST NAME	R	A	M	O	N	
MIDDLE NAME	G	E	O	R	G	E
FAMILY OR LAST NAME	S	N	E	Y	D	
NAME BEFORE MARRIAGE						



Gratis

2. MAIL PASSPORT TO: IN CARE OF (if Applicable)
962 DUNDAS ST. W. STREET, BOX OR R.R. NO. 67 APART. NO. TORONTO CITY, TOWN, ETC. CANADA COUNTRY
 3. DATE OF BIRTH (DAY MONTH YEAR) 8 10 32 PLACE OF BIRTH TORONTO CITY, TOWN, ETC. ONTARIO PROVINCE CANADA COUNTRY
 SEX MALE FEMALE

4. HEIGHT 5 FT. 10 INS. COLOUR OF HAIR BLACK COLOUR OF EYES BLUE WEIGHT 170 LBS. 5. OCCUPATION AUTO SALESMAN 6. VISIBLE DISTINGUISHING MARKS. (See Instruction No. 9)

7. PLEASE READ INSTRUCTIONS Nos. 2 AND 10 BEFORE ENTERING NAMES OF CHILDREN TO APPEAR IN PASSPORT

GIVEN NAMES	LAST NAME	COUNTRY OF BIRTH	DATE OF BIRTH			SEX
			DAY	MONTH	YEAR	

8. PERMANENT ADDRESS OF CHILDREN (CHILD) NAMED ABOVE

9. IF APPLICANT'S PERMANENT ADDRESS NOT SAME AS GIVEN IN QUESTION NO. 2, PLEASE PROVIDE HERE. STREET CITY, TOWN PROVINCE COUNTRY 4-1-A

10. PERSON TO NOTIFY IN CANADA IN CASE OF EMERGENCY NAME STREET CITY, TOWN PROVINCE RELATIONSHIP
PAUL BRIDGMAN 102 OSSINGTON TORONTO ONTARIO FRIEND

11. APPLICANT'S MARITAL STATUS SINGLE MARRIED WIDOW(ER) DIVORCED SEPARATED ANNULLED

12. HAS YOUR NAME BEEN CHANGED? IF "YES", GIVE FORMER NAME YES NO

13. HAVE YOU APPLIED FOR A CANADIAN PASSPORT OR CERTIFICATE OF IDENTITY (TRAVEL DOCUMENT) WITHIN THE LAST TEN YEARS? AND COMPLY WITH INSTRUCTION NO. 11. YES NO

14. HAVE YOU LOST A CANADIAN PASSPORT IN LAST TEN YEARS? IF "YES", PLEASE ENCLOSE AND ENTER: DOCUMENT NO. DJ909324 DATE OF ISSUE 24 APRIL 1968 YES NO

15. HAVE YOU A VALID OR EXPIRED PASSPORT OF ANOTHER COMMONWEALTH COUNTRY? IF "YES", PLEASE ENCLOSE AND ENTER: DOCUMENT NO. DATE OF ISSUE YES NO

16. HAVE YOU THE NATIONALITY OR CITIZENSHIP OF A FOREIGN COUNTRY IN ADDITION TO CANADIAN CITIZENSHIP? IF "YES", ENTER NAME OF COUNTRY. YES NO



Ramon George Sneyd

FOR OFFICIAL USE ONLY

DOCUMENTS	IN	SEEN	OUT
BIRTH CERT.	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
CERT. BIRTH ABR.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
CERT. OF NAT.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
CERT. OF CIT.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
MARRIAGE	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
SEPARATION	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
DIVORCE	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
ANNULMENT	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
CHANGE OF NAME	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
ADOPTION	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
OTHER, SEE REMARKS COLUMN	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

FILE MADE BY _____
 INDEXED BY _____
 APPLICATION EXAMINED BY _____
 CARDED BY _____
 PASSPORT - WRITTEN BY utl
 PASSPORT NO. YT 602294
 DATED May 16, 68
 VALID TO 24 APRIL 73
 CHECKED BY ALM

REMARKS
Gratis
 Passport issued to replace spoiled passport DJ909324 issued at Ottawa on 24 April 1968.

HAVE YOU ANSWERED ALL QUESTIONS ON THIS PAGE?

JK Q369
A-38861

FORM A-O - APPLICATION FOR CANADIAN PASSPORT

For use by persons 16 years of age and over. Please detach and read the Instruction Sheet before completing application

IF DATE OF DEPARTURE KNOWN, ENTER HERE

FOR OFFICIAL USE ONLY

MR. RAMON ANSWERS TO BE TYPEWRITTEN OR PRINTED IN INK.



Gratis

1. FIRST NAME: RAMON
 MIDDLE NAME: GEORGE
 FAMILY OR LAST NAME: SNEYD
 NAME BEFORE MARRIAGE: _____

2. MAIL PASSPORT TO: IN CARE OF (if Applicable)
962 DUNDAS ST. W. TORONTO CANADA
 STREET, BOX OR R.R. NO. APART. NO. CITY, TOWN, ETC. COUNTRY

TELEPHONE: OFFICE - _____ HOME - _____

3. DATE OF BIRTH (DAY MONTH YEAR): 8 10 32 PLACE OF BIRTH: TORONTO ONTARIO CANADA
 CITY, TOWN, ETC. PROVINCE COUNTRY SEX

4. HEIGHT: 5 FT. 10 INS. COLOUR OF HAIR: BLACK COLOUR OF EYES: BLUE WEIGHT: 170 LBS. 5. OCCUPATION: AUTO SALESMAN 6. VISIBLE DISTINGUISHING MARKS. (See Instruction No. 9)

7. PLEASE READ INSTRUCTIONS Nos. 2 AND 10 BEFORE ENTERING NAMES OF CHILDREN TO APPEAR IN PASSPORT

GIVEN NAMES	LAST NAME	COUNTRY OF BIRTH	DATE OF BIRTH			SEX
			DAY	MONTH	YEAR	

Please attach a separate sheet showing children's names if space above inadequate

8. PERMANENT ADDRESS OF CHILDREN (CHILD) NAMED ABOVE

9. IF APPLICANT'S PERMANENT ADDRESS NOT SAME AS GIVEN IN QUESTION NO. 2, PLEASE PROVIDE HERE. STREET: _____ CITY, TOWN: _____ PROVINCE: _____ COUNTRY: 4-1-A

10. PERSON TO NOTIFY IN CANADA IN CASE OF EMERGENCY NAME: PAUL BRIDGMAN STREET: 102 OSSINGTON CITY, TOWN: TORONTO PROVINCE: ONTARIO RELATIONSHIP: FRIEND

11. APPLICANT'S MARITAL STATUS SINGLE MARRIED WIDOW(ER) DIVORCED SEPARATED ANNULLED

12. HAS YOUR NAME BEEN CHANGED? YES NO IF "YES", GIVE FORMER NAME _____

13. HAVE YOU APPLIED FOR A CANADIAN PASSPORT OR CERTIFICATE OF IDENTITY (TRAVEL DOCUMENT) WITHIN THE LAST TEN YEARS? YES NO AND COMPLY WITH INSTRUCTION NO. 11.

14. HAVE YOU LOST A CANADIAN PASSPORT IN LAST TEN YEARS? YES NO IF "YES", PLEASE ENCLOSE AND ENTER: DOCUMENT NO. DJ 909 324 DATE OF ISSUE: 24 APRIL 1968

15. HAVE YOU A VALID OR EXPIRED PASSPORT OF ANOTHER COMMONWEALTH COUNTRY? YES NO IF "YES", PLEASE ENCLOSE AND ENTER: DOCUMENT NO. _____ DATE OF ISSUE _____

16. HAVE YOU THE NATIONALITY OR CITIZENSHIP OF A FOREIGN COUNTRY IN ADDITION TO CANADIAN CITIZENSHIP? YES NO IF "YES", ENTER NAME OF COUNTRY _____

FOR OFFICIAL USE ONLY



DOCUMENTS	IN	SEEN	OUT
BIRTH CERT.	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
CERT. BIRTH ABR.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
CERT. OF NAT.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
CERT. OF CIT.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
MARRIAGE	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
SEPARATION	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
DIVORCE	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
ANNULMENT	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
CHANGE OF NAME	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
ADOPTION	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
OTHER, SEE REMARKS COLUMN	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

FILE MADE BY _____
 INDEXED BY _____
 APPLICATION EXAMINED BY _____
 CARD BY _____
 PASSPORT WRITTEN BY: utl
 PASSPORT NO.: VT 602294
 DATED: May 16, 68
 VALID TO: 24 APRIL 73
 CHECKED BY: ALM

Gratis REMARKS
 Passport issued to replace spoiled passport DJ 909324 issued at Ottawa on 24 April 1968.

HAVE YOU ANSWERED ALL QUESTIONS ON THIS PAGE?

AI-38861 JK Q369

FORM A-O—APPLICATION FOR CANADIAN PASSPORT



For use by persons 16 years of age and over. Please detach and read the Instruction Sheet before completing application

IF DATE OF DEPARTURE KNOWN, ENTER HERE

FOR OFFICIAL USE ONLY



Gratis

MR. MRS. MISS

ANSWERS TO BE TYPEWRITTEN OR PRINTED IN INK.

1. FIRST NAME: R A M O N
 MIDDLE NAME: G E O R G E
 FAMILY OR LAST NAME: S N E Y D
 NAME BEFORE MARRIAGE: _____

2. MAIL PASSPORT TO: IN CARE OF (If Applicable)
962 DUNDAS ST. W. TORONTO CANADA
 STREET, BOX OR R.R. NO. APART. NO. CITY, TOWN, ETC. COUNTRY

3. DATE OF BIRTH (DAY MONTH YEAR): 8 10 32 PLACE OF BIRTH: TORONTO ONTARIO CANADA
 CITY, TOWN, ETC. PROVINCE COUNTRY SEX: MALE FEMALE

4. HEIGHT: 5 FT. 10 INS. COLOUR OF HAIR: BLACK COLOUR OF EYES: BLUE WEIGHT: 170 LBS. 5. OCCUPATION: AUTO SALESMAN 6. VISIBLE DISTINGUISHING MARKS. (See Instruction No. 9)

7. PLEASE READ INSTRUCTIONS Nos. 2 AND 10 BEFORE ENTERING NAMES OF CHILDREN TO APPEAR IN PASSPORT

GIVEN NAMES	LAST NAME	COUNTRY OF BIRTH	DATE OF BIRTH			SEX
			DAY	MONTH	YEAR	

Please attach a separate sheet showing children's names if space above inadequate

8. PERMANENT ADDRESS OF CHILDREN (CHILD) NAMED ABOVE _____

9. IF APPLICANT'S PERMANENT ADDRESS NOT SAME AS GIVEN IN QUESTION NO. 2, PLEASE PROVIDE HERE. STREET: _____ CITY, TOWN: _____ PROVINCE: _____ COUNTRY: 4-1-A

10. PERSON TO NOTIFY IN CANADA IN CASE OF EMERGENCY NAME: PAUL BRIDGMAN STREET: 102 OSSINGTON CITY, TOWN: TORONTO PROVINCE: ONTARIO RELATIONSHIP: FRIEND

11. APPLICANT'S MARITAL STATUS: SINGLE MARRIED WIDOW(ER) DIVORCED SEPARATED ANNULLED

12. HAS YOUR NAME BEEN CHANGED? IF "YES", GIVE FORMER NAME _____ AND COMPLY WITH INSTRUCTION NO. 11.

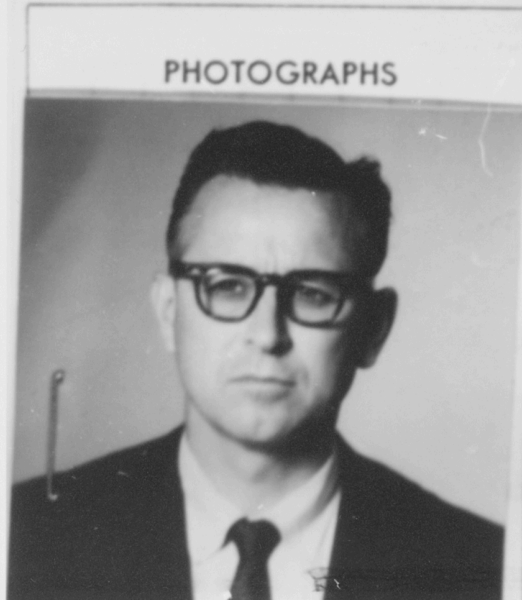
13. HAVE YOU APPLIED FOR A CANADIAN PASSPORT OR CERTIFICATE OF IDENTITY (TRAVEL DOCUMENT) WITHIN THE LAST TEN YEARS? YES NO
 IF "YES", PLEASE ENCLOSE AND ENTER: DOCUMENT NO. DJ909324 DATE OF ISSUE: 24 APRIL 1968

14. HAVE YOU LOST A CANADIAN PASSPORT IN LAST TEN YEARS? YES NO
 IF "YES", PLEASE COMPLY WITH INSTRUCTION NO. 12

15. HAVE YOU A VALID OR EXPIRED PASSPORT OF ANOTHER COMMONWEALTH COUNTRY? YES NO
 IF "YES", PLEASE ENCLOSE AND ENTER: DOCUMENT NO. _____ DATE OF ISSUE _____

16. HAVE YOU THE NATIONALITY OR CITIZENSHIP OF A FOREIGN COUNTRY IN ADDITION TO CANADIAN CITIZENSHIP? YES NO
 IF "YES", ENTER NAME OF COUNTRY _____

FOR OFFICIAL USE ONLY



DOCUMENTS	IN	SEEN	OUT
BIRTH CERT.	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
CERT. BIRTH ABR.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
CERT. OF NAT.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
CERT. OF CIT.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
MARRIAGE	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
SEPARATION	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
DIVORCE	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
ANNULMENT	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
CHANGE OF NAME	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

FILE MADE BY _____
 INDEXED BY _____
 APPLICATION EXAMINED BY _____
 CARDED BY _____
 PASSPORT WRITTEN BY: utl
 PASSPORT NO.: VT 602294
 DATED: May 16, 68
 VALID TO: 24 APRIL 73

Gratis REMARKS
 Passport issued to replace spoiled passport DJ909324 issued at Ottawa on 24 April 1968.

44-38861 JK Q369
 FBI LABORATORY

FORM A-O—APPLICATION FOR CANADIAN PASSPORT



For use by persons 16 years of age and over. Please detach and read the Instruction Sheet before completing application

IF DATE OF DEPARTURE KNOWN, ENTER HERE

FOR OFFICIAL USE ONLY



Gratis

MR. MRS. MISS ANSWERS TO BE TYPEWRITTEN OR PRINTED IN INK.

1. FIRST NAME: R A M O N
 MIDDLE NAME: G E O R G E
 FAMILY OR LAST NAME: S N E Y D
 NAME BEFORE MARRIAGE:

2. MAIL PASSPORT TO: IN CARE OF (If Applicable)
962 DUNDAS ST. W. TORONTO CANADA
 STREET, BOX OR R.R. NO. APART. NO. CITY, TOWN, ETC. COUNTRY

3. DATE OF BIRTH (DAY MONTH YEAR): 8 10 32 PLACE OF BIRTH: TORONTO ONTARIO CANADA
 CITY, TOWN, ETC. PROVINCE COUNTRY SEX

4. HEIGHT: 5 FT. 10 INS. COLOUR OF HAIR: BLACK COLOUR OF EYES: BLUE WEIGHT: 170 LBS. 5. OCCUPATION: AUTO SALESMAN 6. VISIBLE DISTINGUISHING MARKS. (See Instruction No. 9)

7. PLEASE READ INSTRUCTIONS Nos. 2 AND 10 BEFORE ENTERING NAMES OF CHILDREN TO APPEAR IN PASSPORT

GIVEN NAMES	LAST NAME	COUNTRY OF BIRTH	DATE OF BIRTH			SEX
			DAY	MONTH	YEAR	

Please attach a separate sheet showing children's names if space above inadequate

8. PERMANENT ADDRESS OF CHILDREN (CHILD) NAMED ABOVE

9. IF APPLICANT'S PERMANENT ADDRESS NOT SAME AS GIVEN IN QUESTION NO. 2, PLEASE PROVIDE HERE. STREET: _____ CITY, TOWN: _____ PROVINCE: _____ COUNTRY: _____

10. PERSON TO NOTIFY IN CANADA IN CASE OF EMERGENCY NAME: PAUL BRIDGMAN STREET: 102 OSSINGTON CITY, TOWN: TORONTO PROVINCE: ONTARIO RELATIONSHIP: FRIEND

11. APPLICANT'S MARITAL STATUS SINGLE MARRIED WIDOW(ER) DIVORCED SEPARATED ANNULLED

12. HAS YOUR NAME BEEN CHANGED? IF "YES", GIVE FORMER NAME _____ AND COMPLY WITH INSTRUCTION NO. 11.

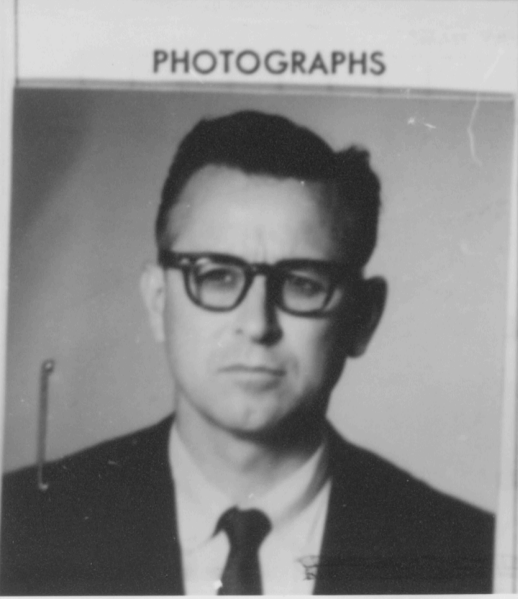
13. HAVE YOU APPLIED FOR A CANADIAN PASSPORT OR CERTIFICATE OF IDENTITY (TRAVEL DOCUMENT) WITHIN THE LAST TEN YEARS? YES NO

14. HAVE YOU LOST A CANADIAN PASSPORT IN LAST TEN YEARS? YES NO IF "YES", PLEASE ENCLOSE AND ENTER: DOCUMENT NO. DS909324 DATE OF ISSUE 24 APRIL 1968

15. HAVE YOU A VALID OR EXPIRED PASSPORT OF ANOTHER COMMONWEALTH COUNTRY? YES NO IF "YES", PLEASE ENCLOSE AND ENTER: DOCUMENT NO. _____ DATE OF ISSUE _____

16. HAVE YOU THE NATIONALITY OR CITIZENSHIP OF A FOREIGN COUNTRY IN ADDITION TO CANADIAN CITIZENSHIP? YES NO IF "YES", ENTER NAME OF COUNTRY _____

FOR OFFICIAL USE ONLY



DOCUMENTS	IN	SEEN	OUT
BIRTH CERT.	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
CERT. BIRTH ABR.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
CERT. OF NAT.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
CERT. OF CIT.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
MARRIAGE	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
SEPARATION	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
DIVORCE	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
ANNULMENT	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
CHANGE OF NAME	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

FILE MADE BY _____
 INDEXED BY _____
 APPLICATION EXAMINED BY _____
 CARD BY _____
 PASSPORT WRITTEN BY utl
 PASSPORT NO. VT 602294
 DATED May 16, 68
 VALID TO 24 APRIL 73

Gratis REMARKS
 Passport issued to replace spoiled passport DS909324 issued at Ottawa on 24 April 1968.

44-38861 JK Q369
 FBI LABORATORY

C-3
13

C.R.O. Number	4437268			
	1	6	7	8

POLICE

MALE

0

18

9	10	11	12	13	14	15	16	17
19	20	21	22	23	24	25	26	27

Surname in which charged

Lamon SNEYD

Christian names

James Earl Ray

Aliases

RIGHT HAND

1-R. Thumb		2-R. Fore Finger		3-R. Middle Finger		4-R. Ring Finger		5-R. Little Finger											
Fold																			
P	C	P	C	P	C	P	C	P	C										
28	29	30	31	32	33	34	35	36	37	38	39	40	41	42	43	44	45	46	47

Impressions to be so taken that the flexure of the last joint shall be immediately above the line marked "Fold". If the impression of any digit be defective a second print may be taken in the vacant space above it.

When a finger is missing or so injured that the impression cannot be obtained, or is deformed and yields a bad print, the fact should be noted in the appropriate space provided.

The "rolled" and "plain" impressions are to be obtained first, then prisoner should sign his name, and lastly a rolled impression of the right fore finger is to be taken on the back of the form. If that finger is missing or injured, the impression of another finger should be taken and the form amended accordingly.

LEFT HAND

6-L. Thumb		7-L. Fore Finger		8-L. Middle Finger		9-L. Ring Finger		10-L. Little Finger											
Fold																			
P	C	P	C	P	C	P	C	P	C										
48	49	50	51	52	53	54	55	56	57	58	59	60	61	62	63	64	65	66	67

Plain impressions of the four fingers of the LEFT HAND taken simultaneously. (Do not print over heading)

Plain impressions of THUMBS taken simultaneously

Plain impressions of the four fingers of the RIGHT HAND taken simultaneously. (Do not print over heading)

		LEFT		RIGHT	

Type of offence			
Breaking	08		
Violence	04	68	69
Sexual	02		
Fraud	01		
Any other	00		

Year of birth

70	71
----	----

White 0
Non-white 1

Place Code

73	74
----	----

Impressions taken by

James

Rank

CF

Force

Mar

Date

8-6-68

Coded at C.3 by

Date

Checked at C.3 by

PARTICULARS ARE NOT TO BE TYPED ON THIS FORM.

Charged at.....	Police Station
Appearing at*Court
Remanded at
Sentenced at
on.....	till*.....
Offence
Committed to.....	Prison
*Delete where necessary.	
Missing fingers—Nature and approximate date of loss or injury.	
This form is to be forwarded as early as possible to :— THE COMMISSIONER OF POLICE, C-3 BRANCH, NEW SCOTLAND YARD, S.W.1.	



Right impression of
To be taken
Immediately **AFTER**
signature is written.

*Prisoner's signature should agree with the name shown on this Form. If it differs the reason should be shown under "Remarks".

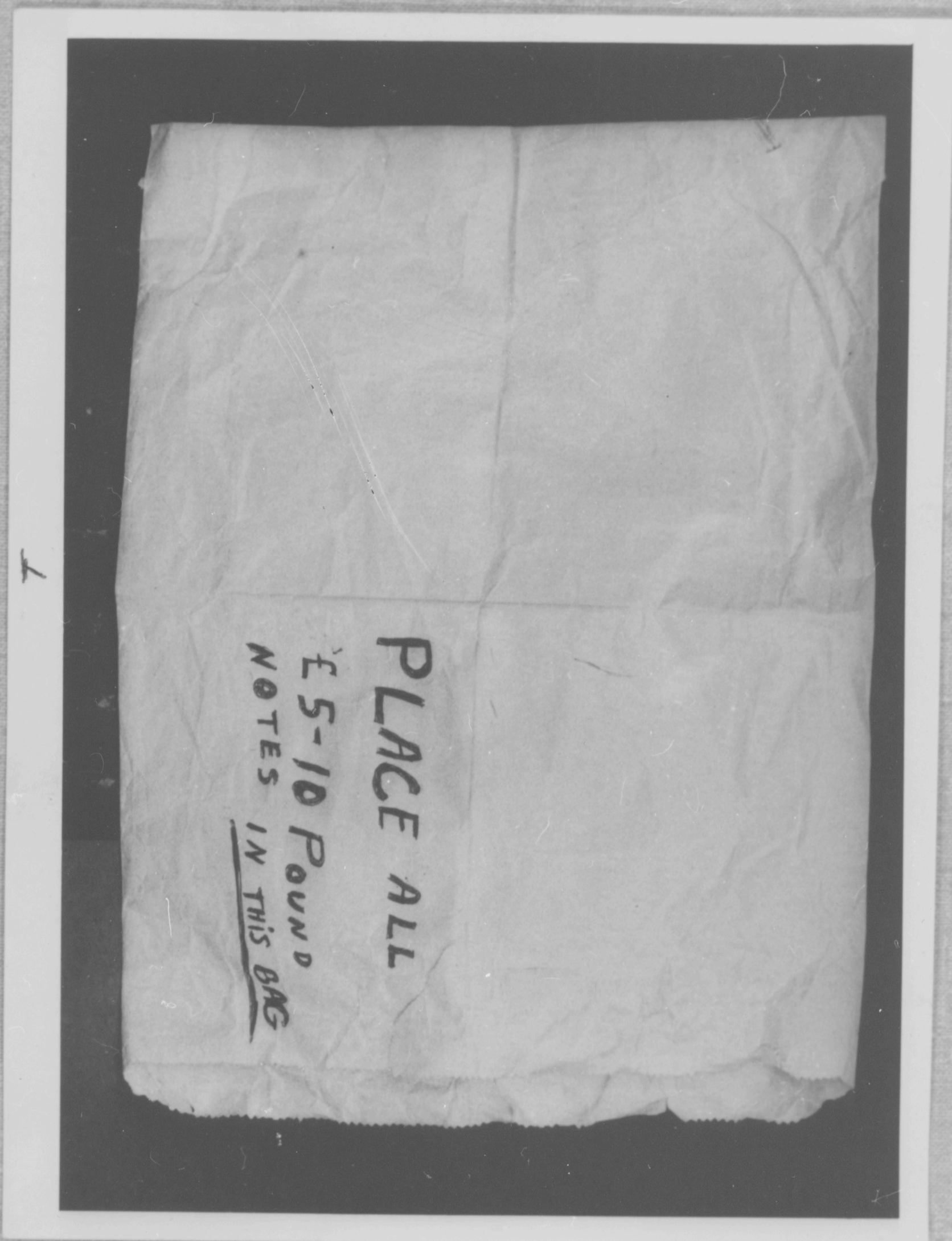
*Prisoner's Signature.....
This form must be completed in every detail before the Officer concerned begins to take the Finger Prints of any other person. On no account must two incomplete forms be dealt with at the same time.

REMARKS—

BOW STREET
MAGISTRATES COURT
R. V. *S. P. H. D.*
EXHIBIT NO. *5* P.M.

8 JUN 1968

Place of birth..... If born in any country other than England, Scotland or Wales, please state under "Remarks" date prisoner left birthplace, adding particulars of countries since resided in, and dates of such residence(s).	Police Gazette or Confidential Information reference	
	Searched in Scene of Crime Section by:	Date
Place of residence :	
Places frequented :	
USE BLACK LEAD PENCIL ONLY FOR THIS SECTION If prisoner is suspected of, or admits committing other offences, please state where, when and type of offence, also fingerprint reference if known.	
	EXPLOSIVES	SINGLES
	COMPOSITES	LOCALS



L

PLACE ALL
\$5-10 POUND
NOTES IN THIS BAG

44-38861 JK Qc389
FBI
LABORATORY

PUT
ALL

20

44-38861 JK Qc389
FBI
LABORATORY