## RECEIVED ON: MAIL ROOM

## OFFICE OF NAVAL INTELLIGENCE NAVY DEPARTMENT

1942 JUN 4 AM 9 27

## APPLICATION AND PERSONAL HISTORY STATEMENT

(Print or Type)

|       | out established to go them.  |  | may 8-1942                  |                         |  |
|-------|--|--|-----------------------------|-------------------------|--|
| 1.    | Name Timehenko   | Bori   | y Vlagii                    | ate) .                  |  |
|       | Address: (a) Home (Last) 2456 -  | 20 49. N. W.   | Warhingla                   | De.                     |  |
| Aul o | (h) Rusiness 1318 - Ex   | r and street)  | Waynington                  | (State)                 |  |
|       | (c) Residence telephone num  | r and street)  | 6/44<br>6/44                | (State)                 |  |
| 9     | Birth data October   | 1898   | Tambou                      | Russia                  |  |
| ð.    | Legal residence (Month) (Date)   | of (Year)  | · (City)                    | (State)                 |  |
| 4.    | Father's name Timehenko  | Vlac   | limir 2000                  | Peter                   |  |
|       | (Last)   | (F   | irst)                       | (Middle)                |  |
|       | Father's occupation  |  | - 2 M                       | Russia                  |  |
|       | Father's address(Number and street)  Mother's maiden name(Number and street)   | i Nazarews   | (City)                      | (State)                 |  |
|       |  |  |                             |                         |  |
| 9.    | (a) Father's birthplace Russia   |  |                             |                         |  |
|       | (b) Mother's birthplace Russia   | 3 1 1 3  | 1 1 \ P.11                  | ssian                   |  |
|       | (e) Father's nationality (If naturalize  |  | id Wilere.)                 | ssian                   |  |
|       | (d) Mother's nationality (If naturalize  | ed, state when an  | d where.)                   | ,0,0                    |  |
| 10.   | (a) Paternal:  |  |                             | the same than a site of |  |
|       | Grandfather's name Timche  | nko Where box  | n Russia                    | Nationality Russian     |  |
|       | Grandmother's name Timeh   | Where box  | n Russia                    | Nationality Russiai     |  |
|       | (b) Maternal:  |  |                             |                         |  |
|       | Grandfather's name Mazore  | WAY Where hor  | n Russia                    | Nationality Russian     |  |
|       | Grandmother's name Nazare  |  |                             | Nationality Pussian     |  |
| 11    | Marital status Single 12   |  |                             |                         |  |
|       | If divorced, state when and where gran   |  | or massama,                 |                         |  |
|       | (a) Maiden name of wife  | ment with the first shows broken take another a to Parella at the part of the first and the first state of t |                             |                         |  |
| A.Z.  | (b) Wife's birthplace and date of birt   |  |                             |                         |  |
|       | (c) Nationality of wife (If naturalize   | (Place   | where)                      | (Date)                  |  |
|       | (d) Name and address of wife's emplo   |  | 1110101)                    |                         |  |
|       |  |  |                             |                         |  |
| 15.   | (a) Husband's birthplace and date of   | (1   | Place)                      | (Date)                  |  |
|       | (b) Husband's occupation   |  | (spilling to be an a source |                         |  |
|       | (c) Nationality of husband (If natur   |  |                             |                         |  |
|       | (d) Name and address of husband's en   |  |                             |                         |  |
| 16.   | (a) Citizenship Naturalized  | citizen  |                             |                         |  |
|       | (b) If naturalized, give date and place  | e of naturalization  | Van. 8-190                  | 32 - D.C.               |  |
|       | (c) Naturalization certificate number  | 353/734  |                             |                         |  |
|       | (d) Date and port of entry New   | Jork - Jui   | 431-1926                    |                         |  |
|       | (e) Name of ship George World  | ington"  |                             |                         |  |
|       | The same of the sa |  |                             | 16-10530                |  |

| 17.           | (a) Have y   | ou ever been in the ararticulars | rmed or ci                | vil service of a   | ny foreign gov   | ernment? <u>Yes</u><br>General Vrangel  |
|---------------|--|----------------------------------|---------------------------|--|--|---|
| 73            | S & MAVE   | 141918 - Nov.                    | 1920                      |  | onaero   | Jeneral Vrangel   |
|               |  | INSMITAR IN                      | ORIGI                     |  |  | OLIGIA  |
| 83            | - The State of the |                                  | * (                       | erit in takin  |  |   |
| 18.           | Are you ent  | irely dependent on you           | ır salary?                | 400  |  |   |
|               |  | ent are you financially          |                           |  | to whom?   | L. Names and Market   |
|               |  | Table                            |                           |  | (),110111.   | And a street of the street of |
|               |  |                                  |                           |  | En Constactof E  | specification (a)   |
| 20            | Dogariba an  |                                  | Dana                      | Town Vision Visi | -1200) / 1 ( 0   |   |
| 20.           | Describe an  | y physical defects               | mone -                    |  |  |   |
|               |  |                                  |                           |  |  |   |
| 21.           | Health recor   | d during past 3 years            | (Give nun                 | aber of days los   | t from work a  | nd nature of serious illness.   |
|               |  |                                  |                           |  | WOIK A   | nd nature of serious illness.   |
|               | h-010/2  |                                  | 1001                      | DE   |  | nelqtikud s'soesezii (e)  |
|               |  | tons                             | n and win                 | ata same new   | leveler til vi   |   |
| 22            | Give full ner  | and motionality                  | ,                         |  |  |   |
| Asset Asset 8 | marriage,  | who are not citizens             | of the II.                | sidence of any   | immediate rel  | atives, either natural or by  |
|               | governmer  | 17                               |                           |  |  | jurisdiction of any foreign   |
|               | Vladi  | nir P. Timche<br>Timchenko       | enko                      | - RUSSIG   | 7  |   |
|               |  | a Jour atchef                    |                           | - Russia   | 2  | r Brailing and  |
| 1             |  | 2000000                          | ud von kill               | 01414  |  |   |
| 23            | Have vou eve   | r haan armagted on hea           | :1                        | Doona Doona  | The wall when  | netta edala heoravili il ili  |
|               | civil or cri   | minal? <u>// O</u> Giv           | en mvorved<br>e particula | as a witness, (<br>ars   | lefendant, or p  | laintiff, in any court action   |
|               | (80.5  |                                  | (41.82)                   |  |  |   |
| + -           |  |                                  |                           | 29700  | May E SEEW 10 8  |   |
| old 7         |  |                                  | ÷ -                       | ericania.<br>Terroria  | a anala ban suni   |   |
| Z4. J         | Education:   | (Name and location               | nn.)                      | (From)   | Holds  | (Courses mirrored dimlorer  |
|               | High schoo   | Russian State                    |                           |  | (To)<br>1917.  | (Courses pursued, diplomas<br>or degrees received)<br>Certifo of Matorial   |
|               | College(s)   | Agriculture Coll                 | Vege                      | 1924   | 1936   |   |
|               | t +  | Orignon Fran                     | nce                       | iteration to obe   | lg bas each av   | Agriculture   |
|               |  | Horricoltore Co                  | Mege                      | 1922   | 1921   | Landseage   |
|               | Others   | Versailles, Frai                 | nce                       | TO STEAM A LAN   | oning a series   | Architect   |
|               |  |                                  |                           |  | THE RESERVE OF THE PARTY OF THE |   |

| 25. Chronological history of past employment:  | Wanter aver  |  |  |  |
|--|--|--|--|--|
| Name A. Gode Jon's C. Inc.   | Title of job:  |  |  |  |
| Address 1318-EYE ST. H. W.   | Manager Landscape Department   |  |  |  |
| City and State: Washington D.C.  | Your duties and specialty: and Landscape Architect   |  |  |  |
| Kind of establishment or shop:   |  |  |  |  |
| Viends cape Constractors  Dates  | Name of supervisor: A. E. Gude.  |  |  |  |
| From: /929 To: Present Salary \$ 4120 = per  | Reasons for leaving:   |  |  |  |
| Name   | Title of job:  |  |  |  |
| Address  | Title of Job:  |  |  |  |
| City and State:  | Your duties and specialty:   |  |  |  |
| Kind of establishment or shop:   | \(\frac{1}{2}\)  |  |  |  |
|  | Name of supervisor:  |  |  |  |
| Dates  | - totale of Supervisor.  |  |  |  |
| From: To: Salary \$ per  | Reasons for leaving:   |  |  |  |
| Name   | Title of job:  |  |  |  |
| Address  | Title of Job.  |  |  |  |
| City and State:  | Your duties and specialty:   |  |  |  |
| Kind of establishment or shop:   | Coppose the new crasses occurred to work at heavy the  |  |  |  |
|  | Name of supervisor:  |  |  |  |
| Dates  | Supervisor.  |  |  |  |
| From: To: Salary \$per   | Reasons for leaving:   |  |  |  |
| Name   | Title of job:  |  |  |  |
| Address  | Title of Job.  |  |  |  |
| City and State:  | Your duties and specialty:   |  |  |  |
| Kind of establishment or shop:   |  |  |  |  |
| The state of the s | Name of supervisor:  |  |  |  |
| Dates  | Traine of Supervisor.  |  |  |  |
| From: To: Salary \$ per  | Reasons for leaving:   |  |  |  |
| 26. (a) Do you hold a Civil Service status? 70   | (b) If so, give rating   |  |  |  |
| 27. (a) Give name and address of present employer  | A. Gudo Sonico Gre 1318-EYE VT. M. Washington D.C.   |  |  |  |
| (b) Precise nature of business   |  |  |  |  |
| 28. Do you have any foreign language proficiency?  |  |  |  |  |
| Bolgarian German.  | and document of the control of the c |  |  |  |

| 29. | Religious affiliations Greek   | -Catholic                      | a osostilaaaroig            | inns denn ko veromid l           | eargological Al  |
|-----|--|--------------------------------|-----------------------------|----------------------------------|--|
| 30. | Give names of all organizations  |                                |                             |                                  | 16.  |
| 31. | Dependents. Give name, relat   | ionship, and ag                | e of each                   |                                  | State has viid   |
|     | Wadimir Timchen  |                                |                             |                                  | Mind of establish  |
|     | Ning Timchenko   |                                |                             |                                  |  |
| 32. | Service in Army, Navy, Marine  | e Corps, Coast o               | r National Guard            | d, etc.                          | "cidada"   |
| 33. | References. At least five, not   | relatives or form              | ner employers:              | 799                              |  |
|     | Major. R. La garde   |                                | dress                       | Occupation                       | Time known   |
|     | Dr. D.B. Moffett   | 3900-701                       |                             | Doctor                           | 15 years   |
|     | Paul 4. Delaney  |                                |                             | Lawyer                           | 8 years  |
|     | R.C. Brennan   |                                |                             |                                  | 13 years   |
|     | A.R.C/455  | Shoreha                        | m, Bld.                     | Architect                        | The second secon |
|     | relationship, and position held  | 1: a dol apparent              |                             |                                  | From: To   |
|     |  | rder in skirt.                 |                             |                                  |  |
| 36. | Where this form is used to common and 37 need not be answere What is lowest entrance salary For what position are you apply Will you accept assignment any | d.<br>you will accept'<br>ing? | 4200 00                     | en, are tedeloro<br>eons 10 4000 | questions 35, 36,  |
| -   |  |                                | ncomplete forms wi          | ll not receive considerat        | ion, If insufficient   |
| 1.  |  | Philosopania Vinire of         |                             |                                  |  |
| {   |  |                                |                             |                                  |  |
| 1   |  |                                |                             |                                  |  |
|     | ()   | Bosson                         | I solemnly answers are true | swear or affirm tha              | at the foregoing   |
|     |  |                                | to golgnio suoson           | (Usual signature)                |  |
|     | Subscribed to and sworn to bef   | ore me this                    | day of                      | entend to existen                | , 19   |
| u.  | s. Government printing office 18—19539   |                                | (Notary public o            | or other person authorized to a  | Iminister oaths)   |