	Form		

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LIST OR MANIFEST OF ALIEN PASSENGERS FOR THE UNITED Ites from a foreign port or a port of the insular possessions of the United States, and all aliens arriving at a port of said insular possessions from a foreign port, a port of continental United

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No. on List	HEAD-TAX STATUS	NAME IN FULL		A	•	*	Calling		Able to-		Nationality.		Place of birth		Immigration Visa, Passport Visa, or Recetry Permit	Issued		Data concerning	*Last permanent residence		-
List	(This column for use of Government officials only)	Family name	Given name	Yes.	Mos. Se	Married or single	Calling or occupation	1	Read what sanguage (or if exemption claimed, on what ground)	Write	Nationality. (Country of which citizen or subject)	†Race or people	Country	City or town, State, Province or District	Reentry Permit number (Profix number with Olfv, NOUV, FV, or RP and give section of act involved)	Place	Date	Data concerning verifications of landings, etc. (This column for use of Government officials only)	Country	City or town, State, Province or District	
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