

Please print or type

Perm
APPLICATION FOR EMPLOYMENT

Date July 9, 1963

Company Wm. B. Reilly & Co. Inc. Location 640 Magazine St.

LEE HARVEY OSWALD 433-54-3937

Name in full: _____ Social Security Number _____

5115 757 FRENCH ST.

HU-84326

Present address: number, street, city and state. _____ Telephone number _____

How long have you lived there? 23 1/2 yrs.

HU 84326

Permanent or last address, Street _____ Age 23 Date of Birth Oct 18, 39 Sex: Male Female

City _____ State _____ Physical Qualities: _____

How long lived there? _____ Height 59 Weight 150 Health EXCEL.

Address at which you lived longest in last 5 years: _____ Marital Status: Single Married Divorced Widower

Street _____ Separated Engaged

City _____ State _____ Number of Children 1 Ages 15 months

How long lived there? _____ How long married? 26 mo. Separated? NO Other dependents NONE

Do you live with parents? Board Rent _____ Education: Completed High School

Ows home? _____ Weekly income from last job _____

List under Employment Record on next page all additional addresses at which you lived in the past 5 years with street addresses and how long at each.

Minimum living expenses _____ Previous Occupation, name exact duties ACTIVE DUTY

Have you taken recent physical examination? YES U.S.M.C.

For what purpose? _____ Does applicant have any other income, personally or from spouse? NO

Did you pass? YES If so, what amount _____

Time lost through accident or illness in past two years _____ Number of jobs held in last five years _____

_____ Length of time since last employed _____

What is present condition of your health? Good Physical deformity or impairment - Hernia NONE

_____ Speech No Right eye No Left eye No Hearing No

Are you willing to take physical examination? YES Feet & Legs No Back No Hands & Arms No

_____ Any other defect NONE

Grammar school - Name Beauregard J.H.S. Grade Finished _____ Age at end _____

High school - Name Warren Eastern S.H.S. Year graduated 1959

Name of college _____ Course _____ Year graduated _____ Degree _____

Name of night school _____ Course taken _____

Special Study Courses _____

Have you had any accidents in the last 2 years? NO If so, give details _____

Form 1013-11-6/60

Commission Exhibit 1398

COMMISSION EXHIBIT No. 1398

EMPLOYMENT RECORD

(Print or type clearly)

Show every job you have had in the past 5 years starting with the present or last job. Give exact dates as shown in the example. Where the employer has more than one branch or plants in more than one place, show where you worked and under whom. When the employer has gone out of business, give the name and present address of the former owner or manager and the names and addresses of three persons who can confirm your employment. Use more than one line for each job if necessary and complete on separate page if you haven't space enough below. No application will be considered without full information on the applicant's employment. Account for all of the last 5 years.

From EXAMPLE 4-30-56	To 1-15-61	NAME OF EMPLOYER (SHOW PRESENT POSITION FIRST)	STREET ADDRESS	CITY & STATE	NAME OF FOREMAN OR SUPERVISOR	NATURE OF WORK	WEEKLY EARNINGS	REASON FOR LEAVING OR WANTING TO LEAVE
1959	1963	U.S.M.C.						
-	1969	SCHOOL						
		(Present Job - If Any)						
		(Last Job)						
		(Next Preceding)						
		(Next Preceding)						
		(Next Preceding)						

Are you employed at present: NO May we write your present employer now: _____ Were you in the Armed Services YES What type of discharge have you had Show your discharge to your supervisor: _____ What is your draft status INACTIVE RESERVES

PERSONAL CHARACTER REFERENCE:	NAME	OCCUPATION	STREET NO. OR BOX AND TOWN AND TELEPHONE
1	John MURPHY	PHARMACIST	757 BROAD ST. MD 84306
2	W.S. GIBSON	ACTIVE DUTY	100 FRANK ST. MD 52869
3	LIGHT J. EVANS	ACTIVE DUTY	U.S. M.C.

Have you ever been employed by us before? NO In what capacity? _____
 Name relatives in our employ, if any None
 Name personal acquaintances in our employ NO

IN WHAT WAY WERE YOU FIRST INTERESTED IN WORK WITH US?
Through PH. IN MAPS

In making this application to the Company, I understand that I am at liberty to investigate it and its record in any manner I see fit. The information I have given above is for the purpose of enabling the Company to investigate me and my record in any manner it sees fit.

It is agreed that any proposition made me is predicated upon the truthfulness of the statements made above.

I authorize the investigation of my application and authorize each of my former employers and character references to render full report to the Company, its employees and its investigators, on my character, personal habits, ability, and any and all other information requested.

I hereby specifically relieve and release the Company, its employees, its investigators, my former employers, their employees, and my character references from any and all liability for damage of any nature whatsoever, happening or arising in any manner, on account of the furnishing of this information. Further, if the Company refuses to accept my application, I do hereby relieve all parties of any responsibility and specifically waive all my rights to any and all damages suffered. I extend this release to former employers I may have neglected to name in my application and to anyone who shall report to the Company with reference to this applica-

1/23/68
 [Signature]

It is further understood that either party, upon completing his investigation, is at liberty to withdraw and to cancel these negotiations without obligation to the other. Because the information customarily received in investigations is confidential, it is understood that neither party is obligated to give any reason for its withdrawal.

[Signature]
 (signature of Applicant)

Group Number VA
 Accepted By [Signature]
 Starting Date 5-10-63 Starting Salary \$ 1.50 per hr