

VISA CLEARANCE STATEMENT

NAME _____
ALIAS NAME(S) _____
ADDRESS _____
CITY _____ STATE _____ ZIP _____
DATE OF BIRTH _____ PLACE OF BIRTH _____
SEX ____ RACE ____ HEIGHT _____ WEIGHT _____ EYES _____ HAIR _____
SOCIAL SECURITY NUMBER: _____
SCARS, MARKS TATTOOS: _____
FOR TRAVEL/IMMIGRATION TO: _____

SIGNATURE OF ABOVE PERSON

FOR SOUTHSOUND 911 USE ONLY