

Form 99-5
TREASURY DEPARTMENT
INTERNAL REVENUE SERVICE

U. S. SOCIAL SECURITY ACT
APPLICATION FOR ACCOUNT NUMBER

5768-10-4565

1. FIRST NAME Hal (EMPLOYEE'S FIRST NAME) Waddell (LAST NAME)

2. 4846 Rosewood Ave. (STREET AND NUMBER) 3. Hollywood, Calif. (POST OFFICE) (STATE)

4. Various Studios (BUSINESS NAME OF PRESENT EMPLOYER) 5. Hollywood, Calif. (BUSINESS ADDRESS OF PRESENT EMPLOYER)

6. 34 (AGE AT LAST BIRTHDAY) 7. Aug 11, 1902 (DATE OF BIRTH: (MONTH) (DAY) (YEAR) (SUBJECT TO LATER VERIFICATION)) 8. Texarkana, Bowie Co., Ark. (PLACE OF BIRTH)

9. Frank T. Waddell (FATHER'S FULL NAME) 10. Elizabeth - last name unknown (MOTHER'S FULL MAIDEN NAME)

11. SEX: MALE FEMALE (CHECK (✓) WHICH) 12. COLOR: WHITE NEGRO OTHER (CHECK (✓) WHICH) (SPECIFY)

13. IF REGISTERED WITH THE U. S. EMPLOYMENT SERVICE, GIVE NUMBER OF REGISTRATION CARD No

14. IF YOU HAVE PREVIOUSLY FILLED OUT A CARD LIKE THIS, STATE None (PLACE) (DATE)

15. 5-18-37 (DATE SIGNED) 16. Hal Waddell (EMPLOYEE'S SIGNATURE, AS USUALLY WRITTEN)