

JFK ASSASSINATION SYSTEM
IDENTIFICATION FORM

AGENCY INFORMATION

AGENCY : INSCOM/CSF
RECORD NUMBER : 194-10013-10141
RECORDS SERIES : DOD-AFFILIATED PERSONNEL AND INCIDENT INVESTIGATIONS
AGENCY FILE NUMBER : ZF000003W - PAGES 1183-1184

DOCUMENT INFORMATION

ORIGINATOR : USA
FROM :
TO :
TITLE : SWORN STATEMENT
DATE : 10/03/82
PAGES : 2
SUBJECTS : SLOVODA, VLADIMIR

WHITE, JOSEPH TIMOTHY

[RESTRICTED]

AFFIDAVIT

DOCUMENT TYPE : PAPER, TEXTUAL DOCUMENT
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DATE OF LAST REVIEW : 03/20/95
OPENING CRITERIA :
COMMENTS :

Released under the John F. Kennedy
Assassination Records Collection Act of
1992 (44 USC 2107 Note). Case#:NW
64954 Date: 09-22-2022

SWORN STATEMENT

For use of this form, see AR 190-45; the proponent agency is Office of The Deputy Chief of Staff for Personnel.

LOCATION COLUMBIA MISSOURI	DATE 3 OCT 82	TIME 1136	FILE NUMBER
LAST NAME, FIRST NAME, MIDDLE NAME GLAISTER HENRY DANIEL	SOCIAL SECURITY NUMBER. JFK Act 5 (g) (2) (D)		GRADE/STATUS CPT
ORGANIZATION OR ADDRESS 812 MAPLEWOOD DR COLUMBIA MO 65201			

I, HENRY DANIEL GLAISTER, WANT TO MAKE THE FOLLOWING STATEMENT UNDER OATH.

I HENRY D. GLAISTER, JFK Act 5 (g) (2) (D) CPT, FA, RESIDING AT 812 MAPLEWOOD DR, COLUMBIA, MISSOURI AUTHORIZE RELEASE OF AGENT REPORT, DA FORM 341, DATED 22 SEPTEMBER 1982, SUBMITTED BY MR RAUL J. LOZANO, 902nd MI GROUP CONCERNING JOSEPH TIMOTHY WHITE, TO MR NORVAL (NMIN) WHITE JR. (FATHER OF JOSEPH TIMOTHY WHITE) ~~11111111~~ END OF STATEMENT ~~111111111111~~

[Handwritten signature/initials]

1183

EXHIBIT	INITIALS OF PERSON MAKING STATEMENT <i>[Handwritten initials]</i>	PAGE 1 OF 2 PAGES
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ADDITIONAL PAGES MUST CONTAIN THE HEADING "STATEMENT OF TAKEN AT DATED CONTINUED." THE BOTTOM OF EACH ADDITIONAL PAGE MUST BEAR THE INITIALS OF THE PERSON MAKING THE STATEMENT AND BE INITIALED AS "PAGE OF PAGES." WHEN ADDITIONAL PAGES ARE UTILIZED, THE BACK OF PAGE 1 WILL BE LINED OUT, AND THE STATEMENT WILL BE CONCLUDED ON THE REVERSE SIDE OF ANOTHER COPY OF THIS FORM.

(Handwritten mark)
NOT USED

AFFIDAVIT

I, HENRY DANIEL GLAISTER *(Handwritten initials)* HAVE READ OR HAVE HAD READ TO ME THIS STATEMENT WHICH BEGINS ON PAGE 1 AND ENDS ON PAGE 2. I FULLY UNDERSTAND THE CONTENTS OF THE ENTIRE STATEMENT MADE BY ME. THE STATEMENT IS TRUE. I HAVE INITIALED ALL CORRECTIONS AND HAVE INITIALED THE BOTTOM OF EACH PAGE CONTAINING THE STATEMENT. I HAVE MADE THIS STATEMENT FREELY WITHOUT HOPE OF BENEFIT OR REWARD, WITHOUT THREAT OF PUNISHMENT, AND WITHOUT COERCION, UNLAWFUL INFLUENCE, OR UNLAWFUL INDUCEMENT.

WITNESSES:

ORGANIZATION OR ADDRESS

ORGANIZATION OR ADDRESS

INITIALS OF PERSON MAKING STATEMENT *(Handwritten initials)*

(Handwritten signature)
(Signature of Person Making Statement)

Subscribed and sworn to before me, a person authorized by law to administer oaths, this 3 day of OCTOBER, 1982 at COLUMBIA MISSOURI

(Handwritten signature)
(Signature of Person Administering Oath)

RAUL J. LOZANO, 902d MI Group

(Typed Name of Person Administering Oath)

Article 136(b), UCMJ

1184 (Authority To Administer Oaths)