For citation purposes: Records Copied at the National Archives at Kansas City Record Group 566, Records of the U.S. Citizenship and Immigration Services Department of Justice. Immigration and Naturalization Service. Alien Case Files, 1944-2003 Alien Case File A4536419 Rose Tortorice National Archives Identifier: 5302000

#### 4 5 3 6 4 1 9 INSTRUCTIONS (READ CAREFULLY)

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#### ADDRESS REPORT CARD

#### DO NOT TEAR, FOLD, MUTILATE OR SPINDLE THIS CARD.

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Nation

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All aliens ro lina in the United States on January 1 shall, within ten days following such date, report their address to the Commissioner, Immigration and Naturalization Service. Aliens temporarily admitted to the United States, whose period of admission has not yet expired and who have not violated the conditions of their admission, are not considered, for the purposes of this report, to be residing in the United States and need not make this report. If you have any doubt as to hethe you should not a report, be on the safe side and submit one. Use this form for reporting your address. All entries on this form except your signature must be PRINTED clearly in ink or with a dark or indelible pencil. WHEN YOU HAVE COMPLETED THIS FORM TAKE IT TO ANY POST OFFICE AND HAND IT TO THE POSTAL CLERK. DO NOT MAIL IT. The lowing instructions st be followed for Items 2, 3, and 6. ITEM 2: Be sure to indicate your registration number. This is very important. Your registration number appears on the official alien registration receipt card issued to you. ITEM 3: Print the name you used when registering under the Alien Registration Act in 1940; or, if you entered the United States after December 26, 1940, print the name used at time of entry. ITEM 6: Print the name of the country of which you are a citizen or to which you owe permanent allegiance. MY REGISTRATION POST OFFICE 1 (STATE I WAS BORN ON OWN OF CIT'Z'P CODE STATE CODE DISTRICT CODE MONTH (DAY (YEAR 7) DATE THIS CARD IS SIGNED KNOWLEDGE AND BELIEF (YEAR) MONTH (DAY



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# NOTICE! NOTICE! THIS FILE IS NOT CONSOLIDATED

- I. When this file becomes active and subsidiary files are needed from the Central Office to complete the file consolidation, Form G-180 shall be executed, giving data necessary to make complete search of indexes and to prepare decentralization records.
- II. The following information must be shown when appropriate:
  - A. Entry subsequent to July 1, 1924, where the documents are in the Central Office and a search of indexes is required:
    - 1. VISAS.—The name used at time of arrival, if different from present name.
    - 2. REENTRY PERMIT.—The name used at the time the last permit was issued and year of issuance.
    - 3. SUSPENSION OF DEPORTATION.—The name under which the record of entry was created and when possible, the *Central Office immigration file number*.
  - B. Entry prior to July 1, 1924, where the record of entry is at the port of arrival.
    - 1. The entry shall be verified and the G-180 stamped to show "Entry as immigrant verified," unless record was created through registry.
    - 2. REGISTRY.—The name under which the record of entry was created and when available, number shall be given.
- III. CREATION OF RECORDS.—Where record of entry is created under sections 244, 245, 249, or private law: the G-180 shall show "Record created under . . ."
- IV. Any Central Office file number, other than above, which may be known, shall be quoted.
- V. All requests for records and files for consolidation from Central Office shall be made on Form G-180.

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U. S. GOVERNMENT PRINTING OFFICE

### NO 53 ADDRESS

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BY U.S. ATTOMNEY

UNITED STATES DEPARTMENT OF JUSTICE Immigration and Naturalization Service 3915 Biscayne Boulevard Miami 37, Florida

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File No. A4 536 419

Dec. 2, 1953

Receipt Card Number

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ADR/SMANN Q

Joseph Savoretti District Director

Rose Tortorice Rt 1 Box 219D Tickfaw, Tangipahoa, Louisiana

in possession (

(but does not recall

New Orleans, Louisi

IOTLOILCE

TISTY

(Name of Country)

Dear Sir or Madam:

Our records indicate that you failed to report your address in January, 1952, or in January, 1953, in compliance with the Immigration and Nationality Laws. The attached form entitled "NOTICE TO ALIENS" furnishes information regarding alien registration requirements.

In order that appropriate action may be taken in your case, please execute the affidavit on the reverse of this letter and return it to this office within ten (10) days. This affidavit may be signed and sworn to before a Notary Public or any other official authorized to administer oaths. An officer of the Immigration and Naturalization Service will administer the oath at no cost to you.

MUSSOMELLI(OT MOL

(OVER)

(Permanent Resident - Returning Resid Act traff Aont' Transit - Other)

#### PLEASE COMPLETE IN FULL

My name is <b>Rose lortorice</b>	. I am an alien born
March 25+h 1996 at Musser	11; (on Molice) Dressones of Delerne
	lli(or Molice), Provence of Palermo, City) (Country) Italy
I am a citizen of Italy	City) (Country) Italy . I last entered the
(Name of Countr	
United States at New Orleans, Louisi	
(Place)	Joseph Savoretti (Date)
on steemship (but does not recall (Name of Ship -XRXAAAXXXXXAAAAAXXXXXAAAAAAAAAAAAAAAAA	ame as were just infant when she rrived) (papers not avaiable)
Permanent r	esident
(Permanent Resident - Returning Resi	dent - Visitor - In Transit - Other)
During January, 1952, 1 was residing at <u>R</u>	(Full and Complete Address)
During January, 1953, I was residing at R	te.1, Bx 219D; <b>Tickfaw</b> ; Louislana. (Full and Complete Address)
I failed to report my address during the r	nonth of January, 1952, for the following
reasons: Did not know that this was	vecessary. This allidavit
and return it to this affine mithin a	(10) to million of a
case, please execute the affidavit	
In order that appropriate a	ection may be tak <mark>en in your</mark>
regarding alien registration requi	
form entitled "NOTICE TO ALIE	
with the Immigration and National	
I failed to report my address during the r reasons: Did not know that this was	necessary.
Rose Torto Cel8/118/2446	the constraints of the constrain
	ien Registration Receipt Card Number
(am or am not)	
<u>#4536419</u> . My present perma	anent address is Rte. 1, Bx. 219 D,
ROSECU (Eullyant Complete Address)	14Epc No. M. STO 419.
BY U.S. ATTORNEY	( net ortong
DEC 3DEC 3 1 1953	re Bomersig (Signature)
Sworffundunubscribed to before me at my	office at Independence, La.
on December 11th., 1953.	(Place) Dryn Jum
	(Signature and Title) NOTARY PUBLIC

6-706 Rev.12/1/53

#### OFFICE MEMORANDUM \* United States Government

File No: A4 536 419

Date: Jan. 6, 1954

1 teples

To: Joseph Savoretti, District Director, Miami, Florida

From: W. H. Peeples, Acting Chief, Investigations Branch, Miami, Florida

Subject: ROSE TORTORICE

I have reviewed the evidence in the case of the subject alien and am satisfied that the failure to comply with the provisions of Section 265 of Public Law 414 was reasonably excusable.

It is recommended that warrant of arrest in deportation proceedings not be issued.

SO ORDERED:

District Director

# 4536419

Form AR-2 OFFICE USE

> UNITED STATES DEPARTMENT OF JUSTICE IMMIGRATION AND NATURALIZATION SERVICE

## ALIEN REGISTRATION FORM

	and the start was been and the start of the start of the			
		A + ·	OFFICE USE	
1.☆(a)	My name is (FIRST NAME) (MIDDI	De Cast NAME	- 636	
☆(b)	I entered the United States under the name of	ose Murino	650	
	I have also been known by the following names	be Cormti	653	
A(o)	(include maiden name if a married woman,	- man - articico	1636	
1	professional names, nicknames, and aliases			-
2.☆(a)	I live at(STREET ADDRESS OR RURAL ROUTE) (CIT	(COUNTY) (STATE)	2 86	
☆(b)	My post-office address is	Lame (STATE)	- 22	
3.☆(a)	I was born on	MONTED (DAY) (VEARS)	-	96
☆(b)	I was born in (or near) Musalanula	(PROVINCE) (COUNTRY)	-	16
4.☆	I am a citizen or subject of Moule	t Haly	-	16
5.☆(a)		status is (check one):	22	0
∱(c)	Male $\square^1$ Female $\square^2$ Single $\square^1$ My race is (check one): White $\square^1$ Negro $\square^2$ Japan	Married	4	-
6.	I am 5 feet, 3 inches in height, weigh 4. Opounds, he	l. p. p. l.	. 192	
7.☆(a)	I last arrived in the United States at Men (CORT OR PLA	Auch . of the 20-189 . (MONTE, DAY, AND YEAR)	80720	98
☆(b)	I came in by A	OMPANY. OR OTHER MEANS OF TRANSPORTATION)	Ship	
	I came as a (check one): Passenger			_
☆(d)	I entered the United States as a ( <i>check one</i> ): Permane Treaty merchant <sup>4</sup> Seaman <sup>5</sup> Officia	ent resident	a	0
	foreign government official			-
☆(e)	I first arrived in the United States on	(MONTH) (DAY) (YEAR)	-	
8.☆(a)	I have lived in the United States a total of	H 2 years	s. 42	
	I expect to remain in the United States	manutles	5	0
		My present occupation is Museum		
		All	T.	
☆(c)	My employer (or registering parent or guardian) is	(NAME)	Xa	
	whose address is	OUTE) (CITY) (STATE)	- UN	_
	and whose business is		-	
			L	-

All items must be answered by persons 14 years of age, or older. For children under 14 years of age, only the items marked with a star (x) must be answered by the parent or guardian. All answers must be accurate and complete. 16—16415 U. S. GOVERNMENT PRINTING OFFICE

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\$ C 1	in and a state of the state of				
11 Max	naval service has been	VIA	me	•	
II. My mintary of	navai service has been		(COUNTRY)	to	- 9
12. AI LANEN (HAVE, HAVE NOT)	(BRANCH OF SERVICE) applied for first citizensh	ip papers in the U	(DATE) Jnited States. Date of ap	DAT	·····
First citizensl	ip papers received	(DATE)	(NUMBER) (CI	(STA	TE)
Filed petition	for naturalization	(DATE)	(CITY)	; (STAT	E)
13. $\Delta I$ have the follow	wing specified relatives livin	ng in the United S	tates:		
Parent(s)	Buttle Hus	band or wife	(YES OR NO) Chil	dren(NUMBE	R) 7
14. I (HAVE, HAVE Nature of	NOT)	dicted for, or conv of arrest	victed of any offense (or off Place of arrest	enses). These offen Disposition o	
				the state of the second second second	
			State of the second	and the second	0
15. Within the past	(HAVE, HAVE	NOT)	affiliated with or active	in (a member of, off	icial of, a
worker for) or	(HAVE, HAVE ganizations, devoted in who	ole or in part to	affiliated with or active	in (a member of, off	icial of, a
worker for) or influencing or	(HAVE, HAVE	ole or in part to stivities, public			icial of, a
worker for) or influencing or	(HAVE, HAVE ganizations, devoted in who furthering the political ac	ole or in part to stivities, public			icial of, a
worker for) or influencing or relations, or	(HAVE, HAVE ganizations, devoted in who furthering the political ac public policy of a foreign	NOT) ole or in part to tivities, public n government			0
worker for) or influencing or relations, or	(HAVE, HAVE ganizations, devoted in who furthering the political ac public policy of a foreign	NOT) ole or in part to tivities, public n government		OF AGE AND C	0
worker for) or influencing or relations, or	GRAVE. HAVE ganizations, devoted in who furthering the political ac public policy of a foreign AFFIDA	NOT) ble or in part to stivities, public n government VIT FOR PEH had read to me th uffirm) that these	RSONS 14 YEARS ( he above statements, and statements are true and	OF AGE AND C Subscribed affirmed) before on the date he	DLDER 3 and sworn to a me at the place a
worker for) or influencing or relations, or	AFFIDA I have read or have do hereby swear (or a complete to the best or AFALLA	NOT) ble or in part to stivities, public n government VIT FOR PEH had read to me th uffirm) that these	RSONS 14 YEARS ( he above statements, and statements are true and nd belief.	OF AGE AND C Subscribed affirmed) before on the date he official post-offi	DLDER 3 and sworn to the me at the place are the place are the place are the place are designated by the the system of the syste
worker for) or influencing or relations, or	AFFIDA I have read or have do hereby swear (or a complete to the best or AFALLA	NOT) Dele or in part to stivities, public n government VIT FOR PEH had read to me th offirm) that these f my knowledge an MONATURE OF REGISTRA	RSONS 14 YEARS ( he above statements, and statements are true and nd belief.	<b>OF AGE AND C</b> Subscribed affirmed) before on the date he official post-offi Muscist	DLDER 3 and sworn to dee me at the place as re designated by t ce stamp below.
worker for) or influencing or relations, or FIGHT HODEX FIGHT HODEX FIGHT HODEX FIGHT HODEX FIGHT HODEX FIGHT HODEX FIGHT HODEX FIGHT HODEX FIGHT HODEX FIGHT HODEX HODE	AFFIDAVIT	NOT) Dele or in part to tivities, public n government VIT FOR PEH had read to me th offirm) that these f my knowledge and SIGNATURE OF REGISTRA FOR PAREN FOR PAREN	RSONS 14 YEARS ( he above statements, and statements are true and nd belief.	DF AGE AND C Subscribed affirmed) before on the date he official post-offi Manual REGIST ONLY	DLDER 3 and sworn to e me at the place a re designated by the ce stamp below.
worker for) or influencing or relations, or FIGHT HODEX FIGHT HODEX FIGHT HODEX FIGHT HODEX FIGHT HODEX FIGHT HODEX FIGHT HODEX FIGHT HODEX FIGHT HODEX FIGHT HODEX HODE	AFFIDA AFFIDA I have read or have do hereby swear (or a complete to the best or AFFIDAVIT AFFIDAVIT AFFIDAVIT	NOT) Dele or in part to tivities, public n government. VIT FOR PEH had read to me th offirm) that these f my knowledge an SIGNATURE OF REGISTRA FOR PAREN SIGNATURE OF REGISTRA	RSONS 14 YEARS ( the above statements, and statements are true and nd belief. MI IT OR GUARDIAN PRINT NAME, ADDRESS, AND PERSON SIGNING THIS AFF	OF AGE AND C Subscribed affirmed) before on the date he official post-offi Marcon Conception ONLY D BUSINESS OF IDAVIT IN 9(c), orn to (or	DLDER 3 and sworn to be me at the place a re designated by the ce stamp below.

(SIGNATURE OF PARENT OF, OR GUARDIAN OF, OR PERSON RESPONSIBLE FOR THE ALIEN)

(REGISTERING OFFICIAL)

16—16415 GPO

1.

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Form AR-AE-22 Alien Registration Indicate if registered	Receipt No. 4536419		UNITED STATES DEPARTMENT OF	JUSTICE
by Consular Offic	cial an		APPLICATION FOR CERTIFICATE OF IDENT (Aliens of Enemy Nationalities)	TIFICATION
I hereby apply tion:	for a Certificate of Identi	fication and make the	following statements and answers under oath o	r affirma-
1. Name	ROSE ST NAME)	none (MIDDLE NAME)	Tortorice (LAST NAME)	<u></u>
2. Registered I (See Instru	Name Same ctions) (FIRST NAME)	(MIDDLE	NAME) (LAST NAME)	
3. (a) Present resid	lence Route	#2, Box 127 (STREET ADDR	ESS OR RURAL ROUTE)	
	endence, Ta			
	mail at Same ac		(STATE)	S. S. B.
(c) All other res	idences since January 1, 2		(STATE)	anne !!
noi	<u>1e</u>			
4. Employment	t since January 1, 1941:			
	me of Firm	Address	Approximate Dates Emplo	yed as
hous	Sewife			
**************************************	nounered (en Sperson	(m);		
5. (a) Date of birth	March 25, 1896 (MONTE) (DAY) e Instructions) living in t	(b) Citizen	or subject of None-last of Italy.	
6. Relatives (se	Name	he United States: Relations	ship Address	28 PIER,
Tony 7	fortorice	hu sband	Independence, La.	
Josei	T.Ingrassia	daughter	New Orleans, La.	
Joe To	ortorice	son	Independence, <sup>L</sup> a.	
Frank	Tortorice	son	Franklinton,La.	Magnet 1
7. Do you have	any children serving in th	ne armed forces of the	United States? <u>NO</u> If yes, give na	mes and
branches of s	ervice			
	e Instructions) living outs e Instructions) serving in			
	Name	Relation	ship Address	11
(0) <del>1001 (0)</del>		Second Street	ing son	
8" (9) <u>19 199 (9)</u>	di esta	I her sees agept	and have the same of the second s	
			016-	-26140-1

Copied at the National Archives at Kanas City

OFFICE USE 9. (a) Have you, since August 27, 1940, applied for or received first citizenship papers, or petitioned for naturalization in the United States? \_\_\_\_\_\_ If yes, state which, and place and date \_\_\_\_\_\_ (b) Have you ever been refused or denied naturalization? <u>no</u> If yes, explain fully\_\_\_\_\_\_ Have you ever been naturalized, partly or wholly, in any country other than the United States? 10. If yes, state whether partly or wholly, also when and where and in what country \_\_\_\_\_\_ Have you ever taken an oath of allegiance to any country, state or nation other than the United States? 11. If yes, state when and where and to what country \_\_\_\_\_\_ Have you read or had read to you a summary of the provisions of Presidential Proclamations and Regulations 12. Have you complied? <u>Yes</u> Have you been granted any exemption? <u>NO</u> Were you registered for Selective Service? <u>no</u> (YES OR NO) If yes, state where and local draft board order number \_\_\_\_\_ 13. Name the clubs, organizations, and societies of which you have been a member or with which you have been 14. affiliated at any time during the past 5 years: none 15. Additional information (see Instructions): none I solemnly swear (or affirm) that all the above statements Subscribed and sworn to (or affirmed) and answers have been read by or to me and are true and before me at the place and on the date (STAMP) here designated by the official post-office complete to the best of my knowledge and belief. stamp at the right. **(IDENTIFICATION OFFICIA** DESCRIPTION OF APPLICANT (To be filled in by Identification Official) Height 5 feet 3 inches. Weight 143 1bs. Eyes brown Hair brown Complexion dark none Distinctive marks \_\_\_\_\_ One copy of this Application sent to Alien Registration Division. Duplicate sent to Federal Bureau of Investigation office at ..... New Orleans, La. c16-26140-1 U. S. GOVERNMENT PRINTING OFFICE

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#### UNITED STATES DEPARTMENT OF JUSTICE

Alien Registration Receipt No	536419.	
Indicate if registered		
by Consular Official	*	
or as Alien Seaman		

## SUPPLEMENTAL SHEET **Application for Certificate of Identification**

Use this sheet only if there is not enough space to complete the answers to any of the questions on Form AR-AE-22. Indicate on Form AR-AE-22 that the answer is continued on Form AR-AE-22 a, then complete the answer on this sheet and attach it to Form AR-AE-22. Be sure that item numbers are correctly indicated for supplemental information. Avoid use of more than one supplemental sheet.

Signature of applicant and official stamp must be properly entered on the other side of this sheet.

Name R	los <b>é none</b>		Tortorice	
	(First name)	(Middle nar		(Last name)
Item No.		Additional I		
6	Rosa Tortoricer	odaugh ter	Independence, La.	
6	Mary Tortorice	daughter	Independence, La.	
6	Carmela Tortori	ce daughter	Independence, La.	
6	Frank Correnti	father	Independence, La.	
6	Mary Correnti	mother	Independence, La.	
6	Frank Correnti	brother	Independence, La.	
6	George Correnti	brother	Independence, La.	
6	Pete Correnti	brother	Independence, La.	
6	Joe Correnti	brother	New <sup>O</sup> rleans, La.	
6	Lena C.Dattalo	sister	LaPlace, La.	
.6	Mary C.Debenede	etto sister	ST.Clair,La.	
6				
	2 de la contra de la			
Tanta lar			A MUN DURING ON T	
		[OVER]		16-26098-1

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The information contained on this sheet, which I have read, or had read to me, is additional to the information contained on my Application for Certificate of Identification (Form AR-AE-22), is made a part thereof and is included under my oath, or affirmation, to such application.



U. S. GOVERNMENT PRINTING OFFICE

Item No.

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SIR.

Se mark Soll (SIGNATURE OF APPLICANT) Mike J. len. Indpundne La.

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Additional Information

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Lucobencence, La.

The source de la sua .

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16-26098-1 10