

## 2. ISSUE DATE

20 Dec 62

8.WEIGHT

4. ISSUED TO (Typed name and relationship

Beverly Deepe

S.COLOR EYES 6.COLOR HAIR 7.HEIGHT

Brown 58511

9. DATE OF BIRTH OF BEARER

10.GRADE AND NAME OF SPONSOR

1 June 35

Civilian

11. SERVICE & STATUS 12. SERVICE NO. OF SPONSOR OF SPONSOR 13. AUTHORIZED PATRONAGE THEATER MACV-PIO

COMMISSARY EXCHANGE LINI IMITED

15. MEDICAL CARE FACILITIES AUTHORIZED b. CIVILIAN (If yes, give effective date) a. UNIFORMED SERVICES 20 December 1962 Yes 16 PLACE OF ISSUE HSAS. GOOD ONLY IN WIETNAM TYPED NAME AND S. H. OWENS, LT., USN IF FOUND -WARNING. LISE OF THIS AUTHORIZATION BY OTHER DROP IN ANY MAIL BOX THAN PERSON NAMED THEREON, OR ANY USE IN VIOLATION OF PROVISIONS OF DEPENDENTS' MEDI-POSTMASTER - RETURN TO PROSECUTION UNDER APPLICABLE FEDERAL LAWS DEPARTMENT OF DEFENSE PERTAINING TO FALSE STATEMENTS. (18 USC 1001) WASHINGTON 25, D. C. **DD FORM 1173** UNIFORMED SERVICES IDENTIFICATION AND PRIVILEGE CARD