ALL INFORMATION CONTAINED HEREIN IS UNCLASSIFIED DATE 12-04-2012 BY 65179 DMH/MJS FD-340 (Rev. 8-7-97)	H
Universal Case File Number  Field Office Acquiring Evidence	 - :
From (Name of Contributor) .	-
(Address of Contributor)	_
By f Special Agent)	
To Be Returned 口 Yes 忆 No Receipt Given 口 Yes 区 No Grand Jury Material - Disseminate Only Pursuant to Rule 6 (e) Federal Rules of Criminal Procedure 口 Yes 凶 No	
Title: Anwar Aulagi  IT-Hamas	
Reference:(Communication Enclosing Material)	
Description: Original notes re interview of  mu physics of subject	: : : : : : : : : : : : : : : : : :
] /	H
 Awlaki-403	

ALL INFORMATION CONTAINED HEREIN IS UNCLASSIFIED DATE 12-04-2012 BY 65179 DMH/MJS

*** UNSOLICITED MESSAGE RECEIVED ***  Sat Jun 26 12:45:30 1999	1FBKOTMF300.DDL0.DDL ORIG: FBI ORIG: FBI PLEASE MAIL DRIVER LICENSE PHOTOGRAPH AND APPLICATION FOR SUBJECT: AULAQI, ANWAR NASSER	FBI SAN DIEGO ATTN: 9797 AERO DRIVE SAN DIEGO, CA 92123
	Av	wlaki-404

b6 b7C b7E

	ALL IMPORMATION CONTAINED			
	HEREIN IS UNCLASSIFIED			
	DATE 12-04-2012 BY 65179 DM			
İ				
غميد ستدهمت دستونسة	The state of the s			
H . w Phi	The ariginal to questions 3, 4, and 5 below are for the confidential use of the DMV			
IVER LICEUSE				
AND PERMET	A CONTROL OF THE PARTY OF THE P			
PPLICANTE				
ONLY	The same was the same of the s			
1 8	The state of the s			
	if yes, briefly expisin  5. Do you wear corrective contact lenses?			
CDL	[] Lexpect to operate in interstate or foreign commerce and I meet the qualifications contained in Part 391 of the Pederar			
ERTIFICATION	Motor Carrier Safety Regulations (FMCSR).  1 do not expect to operate in interstate or foreign commerce ar: 1 am not subject to Part 391 FMCSR			
	the aiconol of distance of determining the aiconol of drug			
HEMICAL TEST	content of my blood when testing is requested by a peace office acting in account			
DIOUZUUL	the following information: It is illegal for snyone			
AC STATEMENT	By signing this application, you acknowledge notification of the following the greater. It is also illegal to refuse under age 21 to drive with a blood alcohol concentration (BAC) of 9.01 percent or greater. It is also illegal to refuse under age 21 to drive with a blood alcohol concentration (BAC) of 9.01 percent or greater. It is also illegal to refuse under age 21 to drive with a blood alcohol concentration (BAC) of 9.01 percent or greater. It is also illegal to refuse			
FOR DRIVERS	to take, or fell to complete, a preliminary account screening test to determine the driving privilege.			
M				
EARS OF AGE	14 Ather application took pomilitari toy relabudile di 1107 VI 1147 WOMAN			
SOCIAL	Authority to collect the social security number is 42 U.S.C. 405 and Davifornia Vehicle Code §1653.5. §4150 §4150.2.  Authority to collect the social security number is 42 U.S.C. 405 and Davifornia Vehicle Code §1653.5. §4150 §4150.2.  Authority to collect the social security number is 42 U.S.C. 405 and Davifornia Vehicle Code §1653.5. §4150 §4150.2.  Authority to collect the social security number is 42 U.S.C. 405 and Davifornia Vehicle Code §1653.5. §4150 §4150.2.  Authority to collect the social security number is 42 U.S.C. 405 and Davifornia Vehicle Code §1653.5. §4150 §4150.2.			
SECURITY	to respond to requests for information from the Franchise Tax board of the angle of the connection with failure to pay			
NUMBER	I pursuant to 42 U.S.C. 601 et seq. it will be used to add a cidar the coli. This of mories owed by an applicant in connection			
COLLECTION	lwith Aid to Families with Depandent Children, Child Sopport and E			
DISCLOSURE	You are required by law to provide your SSN or your application will be defied.			
MAILING	I am the person whose name appears on the front of this form. The making address shown is valid existing, and accurate. I consent to receive service of process at this mailing address pursuant to §415.20 b), §415.30(a), and §416.90 of the Civil			
ADDRESS	Procedure Code			
	Procedure Code.			
ADDRESS	Procedure Code.  ACCEPTANCE OR ASSUMPTION OF LIABILITY FOR APPLICAN'S UNDER 18 YEARS OF AGE The person(s) signing this form certifies under penalty of perfury that:			
ADDRESS	Procedure Code.  ACCEPTANCE OR ASSUMPTION OF LIABILITY FOR APPLICAN'S UNDER 18 YEARS OF AGE The person(s) signing this form certifies under penalty of perjury that:  He or she is age 18 or over and is a resident of the State of California  He or she has full custody of and consents to the issuance of arc inquiral or duplicate driver license to the applicant			
ADDRESS	Procedure Code.  ACCEPTANCE OR ASSUMPTION OF LIABILITY FOR APPLICAN'S UNDER 18 YEARS OF AGE The person(s) signing this form certifies under penalty of perjury that:  He or she is age 18 or over and is a resident of the State of California  He or she has full custody of and consents to the issuance of air incinal or duplicate driver license to the applicant			
ADDRESS CERTIFICATION	Procedure Code.  ACCEPTANCE OR ASSUMPTION OF LIABILITY FOR APPLICAN'S UNDER 18 YEARS OF AGE The person(s) signing this form certifies under penalty of perjury tha:  - He or she is age 18 or over and is a resident of the State of California  - He or she has full custody of and consents to the issuance of an inquiral or duplicate driver license to the applicant named on this form.  - He or she assumes the liability specified in Vehicle Code §1770? Phrough §17710.			
ADDRESS CERTIFICATION PERSONS ACCEPTING	Procedure Code.  ACCEPTANCE OR ASSUMPTION OF LIABILITY FOR APPLICAN'S UNDER 18 YEARS OF AGE The person(s) signing this form certifies under penalty of perfury that:  - He or she is age 18 or over and is a resident of the State of California  - He or she has full custody of and consents to the issuance of arcongular or duplicate driver license to the applicant named on this form.  - He or she assumes the liability specified in Vehicle Code §1770? Phrough §17710.  - All statements made on this form are true and correct.			
PERSONS ACCEPTING LIABILITY FOR	Procedure Code.  ACCEPTANCE OR ASSUMPTION OF LIABILITY FOR APPLICAN'S UNDER 18 YEARS OF AGE The person(s) signing this form certifies under penalty of perjury tha:  - He or she is age 18 or over and is a resident of the State of California  - He or she has full custody of and consents to the issuance of an inquiral or duplicate driver license to the applicant named on this form.  - He or she assumes the liability specified in Vehicle Code §1770? Phrough §17710.			
PERSONS ACCEPTING LIABILITY FOR APPLICANTS	Procedure Code.  ACCEPTANCE OR ASSUMPTION OF LIABILITY FOR APPLICAN'S UNDER 18 YEARS OF AGE The person(s) signing this form certifies under penalty of perjury that:  He or she is age 18 or over and is a resident of the State of California.  He or she has full custody of and consents to the issuance of air incinal or duplicate driver license to the applicant named on this form.  He or she assumes the liability specified in Vehicle Code §1770? Arough §17710.  All statements made on this form are true and correct.  NOTE: If both parents/guardians have joint custody, both must sign if only one person has custody, that person must write "I have sole custody" in the box below and sign this application.			
PERSONS ACCEPTING LIABILITY FOR	Procedure Code.  ACCEPTANCE OR ASSUMPTION OF LIABILITY FOR APPLICAN'S UNDER 18 YEARS OF AGE The person(s) signing this form certifies under penalty of perjury that:  He or she is age 18 or over and is a resident of the State of California  He or she has full custody of and consents to the issuance of an incinal or duplicate driver license to the applicant named on this form.  He or she assumes the liability specified in Vehicle Code §1770? "hrough §17710.  All statements made on this form are true and correct.  NOTE: If both parents/guardians have joint custody, both must sign if only one person has custody, that person must write "I have sole custody" in the box below and sign this application			
PERSONS ACCEPTING LIABILITY FOR APPLICANTS	Procedure Code.  ACCEPTANCE OR ASSUMPTION OF LIABILITY FOR APPLICAN'S UNDER 18 YEARS OF AGE The person(s) signing this form certifies under penalty of perjury that:  He or she is age 18 or over and is a resident of the State of California.  He or she has full custody of and consents to the issuance of arconginal or duplicate driver license to the applicant named on this form.  He or she assumes the liability specified in Vehicle Code §1770? Through §17710.  All statements made on this form are true and correct.  NOTE: If both parents/guardians have joint custody, both must sign if only one person has custody, that person must write "I have sole custody" in the box below and sign this application.			
PERSONS ACCEPTING LIABILITY FOR APPLICANTS	Procedure Code.  ACCEPTANCE OR ASSUMPTION OF LIABILITY FOR APPLICAN'S UNDER 18 YEARS OF AGE The person(s) signing this form certifies under penalty of perjury that:  - He or she is age 18 or over and is a resident of the State of Cable mia.  - He or she has full custody of and consents to the issuance of air inquiral or duplicate driver license to the applicant named on this form.  - He or she assumes the liability specified in Vehicle Code §1770? Through §17710.  - All statements made on this form are true and correct.  NOTE: If both parents/guardians have joint custody, both must sign if only one person has custody, that person must write "I have sole custody" in the box below and sign this application.  MOTHER SQUARDIANTS SIGNATURE  DATE  TIAYTINE TELEPHONE NUMBER  RESIDENCE ADDRESS  APTISPACE NUMBER  CITY STATE 28 CODE			
PERSONS ACCEPTING LIABILITY FOR APPLICANTS	Procedure Code.  ACCEPTANCE OR ASSUMPTION OF LIABILITY FOR APPLICAN'S UNDER 18 YEARS OF AGE The person(s) signing this form certifies under penalty of perjury that:  He or she is age 18 or over and is a resident of the State of California.  He or she has full custody of and consents to the issuance of arconginal or duplicate driver license to the applicant named on this form.  He or she assumes the liability specified in Vehicle Code §1770? Through §17710.  All statements made on this form are true and correct.  NOTE: If both parents/guardians have joint custody, both must sign if only one person has custody, that person must write "I have sole custody" in the box below and sign this application.			
PERSONS ACCEPTING LIABILITY FOR APPLICANTS	Procedure Code.  ACCEPTANCE OR ASSUMPTION OF LIABILITY FOR APPLICAN'S UNDER 18 YEARS OF AGE  The person(s) signing this form certifies under penalty of perjury that:  He or she is age 18 or over and is a resident of the State of Cable mia.  He or she has full custody of and consents to the issuance of air inquiral or duplicate driver license to the applicant named on this form.  He or she assumes the liability specified in Vehicle Code §1770? Industry \$17710.  All statements made on this form are true and correct.  NOTE: If both parents/guardians have joint custody, both must sign if only one person has custody, that person must write "I have sole custody" in the box below and sign this application.  INOTHER SQUARDIAN'S SIGNATURE  DATE  DATE  DATE  DATE  DAYTIME TELEPHONE NUMBER  CITY  STATE ZIS CODE  PATHER SQUARDIAN'S SIGNATURE			
PERSONS ACCEPTING LIABILITY FOR APPLICANTS	Procedure Code.  ACCEPTANCE OR ASSUMPTION OF LIABILITY FOR APPLICAN'S UNDER 18 YEARS OF AGE  The person(s) signing this form certifies under penalty of perjury that:  He or she is age 18 or over and is a resident of the State of California.  He or she has full custody of and consents to the issuance of arconginal or duplicate driver license to the applicant named on this form.  He or she assumes the liability specified in Vehicle Code §1770? Through §17710.  All statements made on this form are true and correct.  NOTE: If both parents/guardians have joint custody, both must sign if only one person has custody, that person must write "I have sole custody" in the box below and sign this application.  MOTHER SQUARDIANS SIGNATURE  DATE  DATE  DATE  DAY: MERCONE NUMBER  CITY  STATE 28 CODE  FATHER SQUARDIANS SIGNATURE  DAY: ME TELEPHONE NUMBER  DAY: ME TELEPHONE NUMBER			
PERSONS ACCEPTING LIABILITY FOR APPLICANTS INDER 18 YEARS OF AGE	Procedure Code.  ACCEPTANCE OR ASSUMPTION OF LIABILITY FOR APPLICAN'S UNDER 18 YEARS OF AGE  The person(s) signing this form certifies under penalty of perjury that:  He or she is age 18 or over and is a resident of the State of California.  He or she has full custody of and consents to the issuance of air inquiral or duplicate driver license to the applicant named on this form.  He or she assumes the liability specified in Vehicle Code §1770? Inrough §17710.  All statements made on this form are true and correct.  NOTE: If both parents/guardians have joint custody, both must sign if only one person has custody, that person must write "I have sole custody" in the box below and sign this application.  MOTHER SQUARDIAN'S SIGNATURE  DATE  DATE  DATE  DAYENE TELEPHONE NUMBER  CITY  STATE 7P CODE  RESIDENCE ADDRESS  APT-SPACE NUMBER  CITY  STATE 7P CODE			
PERSONS ACCEPTING LIABILITY FOR APPLICANTS INDER 18 YEARS OF AGE	Procedure Code.  ACCEPTANCE OR ASSUMPTION OF LIABILITY FOR APPLICAN'S UNDER 18 YEARS OF AGE  The person(s) signing this form certifies under penalty of perjury that:  He or she is age 18 or over and is a resident of the State of California.  He or she has full custody of and consents to the issuance of air inquiral or duplicate driver license to the applicant named on this form.  He or she assumes the liability specified in Vehicle Code §1770? Inrough §17710.  All statements made on this form are true and correct.  NOTE: If both parents/guardians have joint custody, both must sign if only one person has custody, that person must write "I have sole custody" in the box below and sign this application.  MOTHER SQUARDIAN'S SIGNATURE  DATE  DATE  DATE  DAYENE TELEPHONE NUMBER  CITY  STATE 7P CODE  RESIDENCE ADDRESS  APT-SPACE NUMBER  CITY  STATE 7P CODE			
PERSONS ACCEPTING LIABILITY FOR APPLICANTS INDER 18 YEARS OF AGE	Procedure Code.  ACCEPTANCE OR ASSUMPTION OF LIABILITY FOR APPLICAN'S UNDER 18 YEARS OF AGE  The person(s) signing this form certifies under penalty of perjury that:  He or she is age 18 or over and is a resident of the State of California  He or she has full custody of and consents to the issuance of air inquiral or duplicate driver license to the applicant named on this form.  He or she assumes the liability specified in Vehicle Code §1770? "hrough §17710.  He or she assumes the liability specified in Vehicle Code §1770? "hrough §17710.  All statements made on this form are true and correct.  NOTE: If both parents/guardians have joint custody, both must sign if only one person has custody, that person must write "I have sole custody" in the box below and sign this application  MOTHER SQUARDIAN'S SIGNATURE  DATE  DATE  DATE  DAY: BY ARE THE CODE  FATHER SIGNARDIAN'S SIGNATURE  DATE  DAY: BY ARE THE CODE  FATHER SIGNARDIAN'S SIGNATURE  DAY: BY ARE THE PHONE RUMBER  C TY  STATE  TO CODE  1 Certify under penalty of perjury under the laws of the State of California that the foregoing is true and correct.			
PERSONS ACCEPTING LIABILITY FOR APPLICANTS INDER 18 YEARS OF AGE	Procedure Code.  ACCEPTANCE OR ASSUMPTION OF LIABILITY FOR APPLICAN'S UNDER 18 YEARS OF AGE  The person(s) signing this form certifies under penalty of perjury that:  He or she is age 18 or over and is a resident of the State of California.  He or she has full custody of and consents to the issuance of an incincil or duplicate driver license to the applicant named on this form.  He or she assumes the liability specified in Vehicle Code §17707 through §17710.  He or she assumes the liability specified in Vehicle Code §17707 through §17710.  All statements made on this form are true and correct.  NOTE: If both parents/guardians have joint custody, both must sign it only one person has custody, that person must write "I have sole custody" in the box below and sign this application.  **NOTE: If both parents/guardians have joint custody, both must sign it only one person has custody, that person must write "I have sole custody" in the box below and sign this application.  **NOTE: If both parents/guardians have joint custody, both must sign it only one person has custody, that person must write "I have sole custody" in the box below and sign this application.  **NOTE: If both parents/guardians have joint custody, both must sign it only one person has custody, that person must write "I have sole custody" in the box below and sign this application.  **DATE: TrayTrive Telephone number  **DATE: DAYTIVE TELEPHONE NUMBER  **CITY STATE 7P COOE  **I Certify under penalty of perjury under the laws of the State of California that the foregoing is true and correct control of the sign until instructed to do so by a DMV employee.			
PERSONS ACCEPTING LIABILITY FOR APPLICANTS INDER 18 YEARS OF AGE	Procedure Code.  ACCEPTANCE OR ASSUMPTION OF LIABILITY FOR APPLICAN'S UNDER 18 YEARS OF AGE  The person(s) signing this form certifies under penalty of perjury that:  He or she is age 18 or over and is a resident of the State of California  He or she has full custody of and consents to the issuance of air inquiral or duplicate driver license to the applicant named on this form.  He or she assumes the liability specified in Vehicle Code §1770? "hrough §17710.  He or she assumes the liability specified in Vehicle Code §1770? "hrough §17710.  All statements made on this form are true and correct.  NOTE: If both parents/guardians have joint custody, both must sign if only one person has custody, that person must write "I have sole custody" in the box below and sign this application  MOTHER SQUARDIAN'S SIGNATURE  DATE  DATE  DATE  DAY: BY ARE THE CODE  FATHER SIGNARDIAN'S SIGNATURE  DATE  DAY: BY ARE THE CODE  FATHER SIGNARDIAN'S SIGNATURE  DAY: BY ARE THE PHONE RUMBER  C TY  STATE  TO CODE  1 Certify under penalty of perjury under the laws of the State of California that the foregoing is true and correct.			

Confidential information deleted per scotlan 1093.0 G.V.G. and the Fair Credit Reporting Act.

## State of California DEPARTMENT OF MOTOR VEHICLES



I hereby certify that the document to which this is affixed is a true copy of the records of the Department of Motor Vehicles.

Motor Vehicle File No. B8474965

Date 1/1/4 Signed THENP. La

In accordance with Section 1813 CVC, the above employee of the Department of Motor Vehicles has been authorized to prepare under seal and certify copies of records of this Department.

Awlaki-406

IA)

ALL INFORMATION CONTAINED HEREIN IS UNCLASSIFIED DATE 12-04-2012 BY 65179 DMH/MJS

NOT DU	PLICA.	66 9AUG 0 (1997 0 8		
Application for Driver License, identification Card, or Name Change  NOTE: Present this form in person. Please print carefully. Use black or blue ink only. Information egarding current licensing requirements and fees are in the latest edition of the California Driver Flandbook, Commercial Driver Handbook, and supplements. ONCE THIS APPLICATION FORM AND FEE HAVE BEEN SUBMITTED, NO REFUNDS WILL BE MADE.				
DO YOU WE REGISTE VOTE OR U	SH TO R TO PDATE	(SSN is required before any original identification card application is started.) (SSN is verified before any original commercial driver license application is started.)  CHECK ONE BOX ONLY. Complete the attached form when checking box "Y" or "C" only.  Y		
APPLICA FOR DRIVER LI	1	Enter California driver license number, if any		
APPLICATI IDENTIFIC CAR	ATION	N CHECK APPROPRIATE BOX:		
NAME ADDRI INFORM FOR APPLIC	ess Ation ALL	TRUE FULL NAME:  ADDRESS (Include St., Ave., Rd., Ct., Blvd., Wsy, etc.):  ANUAR  ANUAR  TRIST  TRIST  ANUAR  TRIST  TRIST  TRIST  ANUAR  TRIST  TRIS		
PERSO INFORM REQUI	ATION	BEX HARR COLOR EYE COLOR HEIGHT WEIGHT WEIGHT AND AN ALL OF BIRTH YEAR 71.  1. Have you ever applied for or been issued any of the following documents from California, another state, or another country?  Diriver License Instruction Permit Identification Card		
. FOR	If yes, please enter the state or country and the expiration date here: Colorado 4-21-97  If yes, please enter the state or country and the expiration date here: Colorado 4-21-97  Have you ever applied under a different name?  If yes, print the other name(s):			

Confidential information deleted per section 1898.5 C.V.C. and the Fair Credit Reporting Act.

## State of California DEPARTMENT OF MOTOR VEHICLES

I hereby certify that the document to which this is affixed is a true copy of the records of the Department of Motor Vehicles.

Motor Vehicle File No. <u>B847496</u>

In accordance with Section 1813 CVC, the above employee of the Department of Motor Vehicles has been authorized to prepare under seal and certify copies of records of this Department.

------ Awlaki-408

ALL INFORMATION CONTAINED HEREIN IS UNCLASSIFIED DATE 12-04-2012 BY 65179 DMH/MJS

## FINE CALIFORNIA DEPARTMENT OF MOTOR VEHICLES

FOR USE ONLY AS AUTHORIZED BY DMV

CLASS: C **DRIVERS LICENSE** B8474965

**EXP DATE: 04/21/2001** 

ANWAR NASSER AULAQI 7181 SARANAC ST

**SAN DIEGO, CA 92115** 

DOB: 04/21/71

SEX: M

HEIGHT: 601 WEIGHT: 135 **EYES: BRN** HAIR: BLK

SSUE DATE: 08/05/1997 PHOTO DATE: N/A APP DATE: N/A

PHOTO OFFICE: N/A ISSUE OFFICE: 669

TYPE APP: D

APP OFFICE: N/A

PHOTO SEQ #: 0000 **TECHNICIAN ID: 08** 

ENDORS:

Awlaki-409

DEPARTMENT OF MOTOR VEHICLES State of California

is a true copy of the records of the Department of Motor Vehicles. I hereby certify that the document to which this is affixed

Signed Ellen Motor Vehicle File No.

Date

In accordance with Section 1813 CVC, the above employee of the Department of Motor Vehicles has been authorized to prepare under seal and certify copies of records of this Department.

Machine: RETSTA\_4 07/08/99 09:38:01