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	Federal Public Works", do not answer or fill ou	
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CITY OF	Billings
STATE OF	Montana
DATE	2 May 1946

Mark. Chap.

QUESTIONNAIRE FOR ARCHITECTS' ROSTER AND/OR REGISTER OF ARCHITECTS QUALIFIED FOR FEDERAL PUBLIC WORKS

TYPING IS MANDATORY. PARTNERSHIPS SHOULD MAKE A JOINT RETURN ONLY.

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	(b)	FORM	ER FIRM, if an	y Same,	Jackson,	Michigan		
2.	BUS	SINESS	ADDRESS	1140	North 30 S	treet, Bill	ings, Montan	.a
3.	YEA	R ESTA	ABLISHED	1932	- Ninet/gr	Thirty One		
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	(d) (Commen Practio		1931, Jack	son, Mich.	·		
	(e) N	Number a Prin	of Years cipal	Fifteen				

(f)	Architectural Licenses (Give State, Number and Year)	Issued.)	
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	Michigan Society Detroit Chapter,		Director- Vice Pres.
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(h)	Service in World Wars I and II.	(Append data if desired.)	
			, Chief Draftsman, Asst. Mechan
	ical I	Falls, Montana	Eng. Divis. Office Area Eng
(i)	Civic Activities		
	Past-Pres. Billin City Coucilman Bi Civilian Air Pata Billings Commerce	ngs Rotary Club illings, '32-'38 rol '44-'46 ial Club	
	Associated Indust	tries	
5. C	ONSULTANTS USUALLY EMPLO (If a member of your staff, so state)		
(a)	STRUCTURAL ENGINEERS		
	Name of Firm or Individual Business Address	Self	
(b)	HEATING & VENTILATING EN	IGINEERS	
	Name of Firm or Individual Business Address	Self	
(c)	ELECTRICAL ENGINEERS		
	Name of Firm or Individual	Leo, Suddit	n, General Electric,
	Business Address	Billings, I	Montana
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	Name of Firm or Individual Business Address	Self	
(e)	LANDSCAPE ARCHITECTS		
	Name of Firm or Individual	Self	
	Business Address		

9. PI	HOTOGRAPHS/PHOTOSTATS:
	The author submits herewith photographs or photostats (size 8" x 10") of several buildings for which he has been the Architect, as follows: (N.C.A.R.B. presentation acceptable.)
10.	COLLABORATION WITH JUNIOR ARCHITECTS:
(a)	If an established individual or firm, are you willing to collaborate with other firms or individuals which would permit junior architects to qualify and help further their professional careers?
	Ye s
(b)	If in private practice at this time, name associates (if additional architects are to be added to your organization) for the purpose of qualifying:
(c)	If not in private practice at this time, name established architect or firm with whom you have agreed to collaborate, for the purpose of qualifying:
11.(a)	
11.(a)	I/We wish to be do not wish to be included in the Architects' Roster
(b)	I/We would like to be (C) considered for the Register of Architects Qualified for Federal Public Works do not wish to be (C)
I/We	hereby certify that the above is a true statement of facts.
	Name of Firm or Individual William H. Reid, Jr., Architect
	Signed by all Principals:
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SUMMARY OF PROJECT	COSTS:		
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