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JUN	3	1946	CITY OF KLRKWOOD	,
			STATE OF Missouri	
EDMUND	R.	PURVE:	S DATE May 24, 1946	

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

TYPING IS MANDATORY. PARTNERSHIPS SHOULD MAKE A JOINT RETURN ONLY. Pink copy is to be retained by the author; other copies to be mailed to The American Institute of Architects, 1741 New York Avenue, N. W., Washington 6, D. C.

1. (a) FIRM	(individual or partnership)	HARRIS	ARMSTRONG,	ARCHITECT (PA	ARTNERSHIP)
(b) FORM	IER FIRM, if any	HARRIS	ARMSTRONG,	ARCHITECT	
2. B	USINESS	ADDRESS	#3 SAP	PINGTON SPU	r, Kirkwood 22	2, Missouri
3. Y	EAR EST.	ABLISHED	PARTNE	RSHIP WITH	WIFE ESTABLISH	HED 1946.
4. Pl	ERSONAI	HISTORIES		Name of Principal		Name of Principal
	OF PRIN		HARRIS	ARMSTRONG	LOUIS	SE ARMSTRONG
					tials. Describe each m	
(a)	Date of 1	Birth APRIL	6, 1899		JANUARY 2	9, 1900
(b)	Education			ARCHITEETUR Ohio State Ton Univ.		HINGTON UNIV. 1921
(c)		ice Prior to Own				
	(Give are	chitect or architect	tural firm affi GGEMANN.	liations, positions	held, and approximate FIRST NATIO	e dates of employment.) ONAL BANK OF ST.LOUIS
		OHIO STATE	ARCH. S	TUDENT 24-2	5 1923-24	
		Louis LA B 1925-26			NATIONAL	PANY OF NEW YORK 24-2 Library Survey, 25-2
		MARITZ & Y	OUNG, ST	. Louis 2		n Love Ben Cotate
		RAYMOND M	HOOD N	s, 1928-29 Ew York '30	CLAVION MI	r Love Real Estate, o. sale s woman, 1932-4
		PARTNERSH!	P. A.B.B	OYER IN	OLAT TON, III.	O. ORLLOWOM AND INDE
		St. Louis,	1930-31			
(d)	Commer Practi	ice 1932				
(e)		of Years				·

(\mathbf{f})	Architectural Licenses (Give State, Number and Year	r Issued.)	
	A-268 1943	Missouri	
	<u></u>		·
(g)	Professional Societies and Office	s Held	
	A.I.A.		
(h)	Service in World Wars I and II.	(Append data if desired.)	
	PRIVATE, U. S.	ALB SPRVICE	
	1918-1919	ATTE OUTEVIOL,	
. (2)	Civic Activities		
(i)			LEAGUE OF WOMEN VOTERS
	BUILDING COMMIS	ssioner, and, Kirkwood, Mo.	
	VILLAGE OF VAKE	AND, KIRKWOOD, Mo.	
5. C	ONSULTANTS USUALLY EMPLO (If a member of your staff, so state		
(\mathbf{a})	STRUCTURAL ENGINEERS		
	37 ATN T 1' 1 1	NEAL J. CAMPBEL	L
	Name of Firm or Individual	911 LOCUST STRE	
	Business Address	ST. Louis, I, M	
(b)	HEATING & VENTILATING E	NGINEERS	
• ,		FERRIS & HAMIG	
	Name of Firm or Individual	122 N. 7TH ST	
	Business Address	ST. Louis I, Mo.	
(c)	ELECTRICAL ENGINEERS		
		FERRIS & HAMIG	
	Name of Firm or Individual	1つつ N7+u	
	Business Address	St. Louis, 1, Mo	•
(d)	PLUMBING OR SANITARY EN		
	Name of Firm on Individual	FERRIS & HAMIG	
	Name of Firm or Individual Business Address	122 N. 7TH	
		SAINT LOUIS, I,	M o .
(e)	LANDSCAPE ARCHITECTS		
	Name of Firm or Individual	JOHN NOYES	•
	Business Address		
	Dubinob Audicas	SAINT LOUIS, I,	Mo.

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7. SUMMARY OF PROJECT	COSTS:		
Industrial Aid For	Largest Single Job \$75,0	All Jobs Valuation	Annual Average
Work Completed 1930–1940	THREE \$50,000 JO	Bs \$448,400.00	\$74,155.33 (
Work Completed 1941–1946 Current Work under construc-	R.E.A. POWER PLA KODIAK, ALASKA, \$75,000.00	ANT \$726,144.00	\$145,229.00
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tion or working drawings authorized 8. REPRESENTATIVE WORL	\$600,000.00		
tion or working drawings authorized	x for which you w		
tion or working drawings authorized 8. REPRESENTATIVE WORL WITH OTHERS:	x for which you w		E ASSOCIATED Owner
tion or working drawings authorized 8. REPRESENTATIVE WORK WITH OTHERS: (a) Three Projects Not Exce Name of Project CE, ORTHODONSIST MEDICAL CLINIC	eding Cost of \$300,000: Cost \$25.000.00	ERE ARCHITECT OR WER Location 7800 MARYLAND, CL	Owner Dr. Leo Shani
tion or working drawings authorized 8. REPRESENTATIVE WORL WITH OTHERS: (a) Three Projects Not Exceed Name of Project CE, ORTHODONSIST	\$25,000.00 \$50,000.00	Location 7800 Maryland, CL 114 N. Taylor, St Old Jamestown Rd,	Owner DR. LEO SHANI AYTON, MO. L LOUIS. DR.SAM GI ST.LOUIS COUNTY,
tion or working drawings authorized 8. REPRESENTATIVE WORL WITH OTHERS: (a) Three Projects Not Exce Name of Project CE, ORTHODONSIST MEDICAL CLINIC DENCE	\$25,000.00 \$50,000.00	Location 7800 Maryland, CL 114 N. Taylor, St Old Jamestown Rd,	DR. LEO SHANIAYTON, MO. L LOUIS. DR.SAM G. ST.LOUIS COUNTY, A. DR. EVARTS GR
8. REPRESENTATIVE WORL WITH OTHERS: (a) Three Projects Not Exce Name of Project CE, ORTHODONSIST MEDICAL CLINIC DENCE A. POWER PLANT STRIAL ALD FOR BLIND Three Projects Costing I	\$600,000.00 FOR WHICH YOU W cost \$25,000.00 \$50,000.00 \$75,000.00 \$75,000.00 Cost Cost \$600,000.00	Location 7800 Maryland, CL 114 N. Taylor, St OLD JAMESTOWN RD, KODIAK, ALASKARE ST. LOUIS (NOT BU	Owner SHANIATION, MO. L LOUIS. DR.SAM G. ST.LOUIS COUNTY, A. DR. EVARTS GR. Owner AMERICAN STOVE
8. REPRESENTATIVE WORL WITH OTHERS: (a) Three Projects Not Exce Name of Project CE, ORTHODONSIST MEDICAL CLINIC DENCE A. POWER PLANT STRIAL ALD FOR BLIND STRIAL ALD FOR BLIND Name of Project Name of Project CAN STOVE ADM. BLDG.	\$600,000.00 FOR WHICH YOU W eding Cost of \$300,000: Cost \$25,000.00 \$50,000.00 \$75,000.00 Cost \$600,000.00 \$1,000,00	Location 7800 Maryland, CL 114 N. Taylor, ST OLD JAMESTOWN RD, KODIAK, ALASKARE ST. LOUIS (NOT BU Location S. KINGSHIGHWAY,	Owner DR. LEO SHAN AYTON, MO. L LOUIS. DR.SAM G ST.LOUIS COUNTY, A. DR. EVARTS GR OULT) Owner AMERICAN STOVE ST. LOUIS SCRUGGS, VAN
8. REPRESENTATIVE WORL WITH OTHERS: (a) Three Projects Not Exce Name of Project CE, ORTHODONSIST MEDICAL CLINIC DENCE A. POWER PLANT STRIAL TAID FOR BLIND Name of Project CAN STOVE ADM. BLDG. RBAN STORE, CLAYTON	\$600,000.00 FOR WHICH YOU W eding Cost of \$300,000: Cost \$25,000.00 \$50,000.00 \$75,000.00 Cost \$600,000.00 \$1,000,00	Location 7800 Maryland, CL 114 N. Taylor, ST OLD JAMESTOWN RD, KODIAK, ALASKARE ST. LOUIS (NOT BU Location S. KINGSHIGHWAY,	Owner DR. LEO SHANI AYTON, MO. L LOUIS. DR.SAM GI ST.LOUIS COUNTY, A. DR. EVARTS GR. OULT) Owner AMERICAN STOVE ST. LOUIS SCRUGGS, VANI

9. P	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.)
	THE AMERICAN STOVE ADMINISTRATION BUILDING, ST. LOUIS, MISSOURI
	·
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?
	YES
(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: NONE
(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)	I/We wish to be of included in the Architects' Roster
(b)	I/We would like to be C do not wish to be C considered for the Register of Architects Qualified for Federal Public Works
I/We	hereby certify that the above is a true statement of facts.
	Name of Firm or Individual HARRIS ARMSTRONG, ARCHITECT
	Signed by all Principals: Schize Delli Strag
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