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Architects' Roster, does so purely as a service
to the profession. The A.I.A. has not checked
to the profession. The A.I.A. Has not chooses
this questionnaire for accuracy and assumes
no responsibility as to the statements made
herein.

CITYHamilton	COUNTY Butler
STATE Ohio.	
DATE October 11,	1947

QUESTIONNAIRE FOR ARCHITECTS' ROSTER

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

Green copy to be retained by the	author: origi	nal and other	copy to be	mailed to the	Directo	r of Public an	d Pro	fessional
Relations, The American	Institute of	Architects, 17	41 New Yo	ork Avenue,	N. W.,	Washington	6, D.	C.

•	- 7	Robert Earl Smath	1
(b) FORMER F	FIRM, if an	уNо	
. BUSINESS ADD	RESS	834 Main Street, Hamilton	0h i o
. YEAR ESTABLIS	SHED	1918	
. PERSONAL HIS	TODIES	Name of Principal	Name of Principal
OF PRINCIPA		Robert Earl Smath	
	Furnish of firm	data complete, but keep to essentials. Described individually; if more than two, appear	ribe each member nd extra sheets.
(a) Date of Rirth	Septer	iber 17, 1897.	
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(b) Education	High So	hool , Night School and tw	o years university.
(c) Experience Pi	rior to Own	Practice	approximate dates of employment.)
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	Ohio. Licence No. 512 issued in 1932 when State Law w passed- writer not required to take examination.
Pro	essional Societies and Offices Held Ohio Society of Architects.
Sei	vice in World Wars I and II. (Append data if desired.) Writer was not called for world war Nov. 1 until Nov 11th, 191
	and was never sent to camp for induction. Writer became above age limit for World War No. 1.
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Civ	Activities Writer engaged in Fireprevention Work in conjunction with
	Fire department-gratis service given to city.
	, ,
	LTANTS USUALLY EMPLOYED:
(If a	member of your staff, so state) UCTURAL ENGINEERS
(If a	member of your staff, so state)
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3.	OTHER REMARKS RE QUALIFICATIONS:
	(Append extra sheet if necessary)
	I prefer jobs costing not to exceed \$100,000 because we can handle them entirely in our own office without much consulting service.
	Beside general practice I am retained as consulting architect by all of the Six local Federal Building Associations for inspection and appraisal work on every structure on which a loan is granted throughout
	Butler County. I measure 1500 to 1700 buildings throughout each year. Fire insurance appraisals for structures are also made. Also maintain small house plan service for builders and developers
	erecting homes for sale.

7. REPRESENTATIVE WORK FOR WHICH YOU WERE OR ARE ARCHITECTS; OR WERE OR ARE ASSOCIATED WITH OTHERS:

Name of Project	Location	Date	Cost	Architect or Associate Architect
Mc Farland Mobobs Inc	. Hamilton	1946	\$75,000	self
Marr Motors	. tt	1947	37,000	self
Dilg Dairy	st	1947	42,000	self
Masonic Temple	11	1947	350,000	Barkman & Mueller
City Hall		1935	525,000	Barkman & Mueller
Fire Station No. 1		1930	35,000	self
Weik Bakery this was in	u n three units	over four	100,000	self
Funeral Home (Klaus)	#	1931	20,000	self
Buckeye Pattern Factory	y	1941	25,000	self.
Sportsmen's club house	<u> </u>	1947	22,000	self.
At this date the tota				
This does not include	any jobs on	which I a	sociated wit	h others.
		•••••		
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	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.)
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CO	LLABORATION WITH OTHER ARCHITECTS:
a)	As an established individual or firm, are you willing to collaborate with other firms or individuals?
	Yes
b)	Are you and/or your firm agreeable to accepting supervision of work where designs are produced by others—or vice versa?
	We do not accept supervision on work designed by others.
e)	List firms (or individuals) with which you are associated at present or have an associate or working agreement: (Please furnish a letter from the other party verifying the association.)
	Mr.Geo.Barkman with whom I associated for many years on various jobs has recently passed on.
	Mr. Henry Kessling, local architect and myself often exchange time on work when either one has an excess of work.
I/	WE DO DO NOT DESIRE TO HAVE OUR (THIS) QUESTIONNAIRE MADE AVAILABLE TO GOVERNMENTAL AGENCIES.
I	pmefecipsivatek werky Soutside som exedangrergrefitable to me. Would d
7. L	hereby certify that the above is a true statement of facts.
4 E I	dereby certify that the above is a state sourcement of factor.
	Name of Firm or Individual Com Can Som
	Signed by all Principals:

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SUPPLEMENTAL DATA SHEET

STATE	Ohio.	
CITY	H _a milton	COUNTY Butler
DATE	January 23,	1953

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