NOTE: The American Institute of Architects in compiling, keeping and servicing this Architects' Roster, does so purely as a service to the profession. The A.I.A has not checked this questionnaire for accuracy and assumes no responsibility as to the statements made
herein.

CITY Cincinnati	COUNTY.	Hamilto	n.
STATE Onio			
DATE November 1	1947	March	9,1953

## QUESTIONNAIRE FOR ARCHITECTS' ROSTER

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

Green copy to be retained by the author; original and other copy to be mailed to the Director of Public and Professional Relations, The American Institute of Architects, 1741 New York Avenue, N. W., Washington 6, D. C.

1. (a	) FIRM	(individual or partnership)	Reed F. Stockdale	
(lb	) FORM	IER FIRM, if an	у	
2. B	USINESS	ADDRESS	University of Cinci	nnati (Faculty)
3. Y	EAR EST	ABLISHED	Appointed 1924	
l. P	ERSONAI	L HISTORIES	Name of Principal	Name of Principal
	OF PRIN		Reed F. Stockdale	
		Furnish of firm	data complete, but keep to essential individually; if more than two	ls. Describe each member o, append extra sheets.
(a)	Date of	Birth Janua:	ry 14, 1893	
<b>(b)</b>	Education	m Bach.	of Arch.	
()				
(c)		ace Prior to Own		d, and approximate dates of employment.)
		Engr. Dept	. City of Columbus, Or	nio, Draftsman 1919-21
			. Board of Education, ral Draftsman	Columbus, Ohio, 1921-1923
		D. W. McGr Supervisio	ath, General Contracton and cost estimating	ors, Columbus, Ohio 1923-1924
( <b>d</b> )	Comme Practi	nced	`	
( <b>e</b> )		of Years	······································	· ·

		ural Licenses State, Number and Y	ear Issued.)			
		Ohio - 885	Yearly			·
(g)	Profession	nal Societies and Off	ices Held			
		Architects So American Inst	ociety of Ohi titute of Arc	o chitects		
<b>(h)</b>	Service i	n World Wars I and I	II. (Append data if	desired.)		
			- Civilian T	raining Adm	S. Army ministrator	, Headquarters
		Ferrying I	Division, Air	Transport	Command.	
(i)	Civic Act	vities				
	-			<u> </u>	<u>.</u>	
	-					
5. C		NTS USUALLY EMI				
5. C (a)	(If a mem)	NTS USUALLY EMP oer of your staff, so st URAL ENGINEERS of Firm or Individual.	ate)			
	STRUCT Name of	oer of your staff, so st	ate)			
(a)	STRUCT Name of Busines	oer of your staff, so st URAL ENGINEERS of Firm or Individual.	ate)			
(a)	STRUCT  Name of Busines  HEATING	per of your staff, so stage of Firm or Individual of Address  G & VENTILATING  Firm or Individual	ate) ENGINEERS			
(a)	STRUCT  Name of Busines  HEATING	per of your staff, so stage of Firm or Individual of Address  G & VENTILATING  Firm or Individual	ate)  ENGINEERS			
(a) (b)	STRUCT  Name of Busines  HEATING  Name of Busines  ELECTRI  Name of	per of your staff, so start ural engineers of Firm or Individual and Address G & VENTILATING of Firm or Individual and Address	engineers	•••••		······································
(a) (b)	STRUCT  Name of Busines  HEATING  Name of Busines  ELECTRI  Name of Busines	per of your staff, so stage of Firm or Individual section Address  G & VENTILATING  of Firm or Individual section Address  CAL ENGINEERS  of Firm or Individual section Address	engineers	•••••		······································
(a) (b) (c)	STRUCT  Name of Busines  HEATING  Name of Busines  ELECTRI  Name of Busines  PLUMBII	per of your staff, so start ural engineers of Firm or Individual and Address  G & VENTILATING of Firm or Individual Address  CAL ENGINEERS of Firm or Individual Address	engineers  Engineers			······································
(a) (b) (c)	STRUCT  Name of Busines  HEATING  Name of Busines  ELECTRI  Name of Busines  PLUMBII  Name of Busines	per of your staff, so start and the start an	engineers  Engineers			······································

	sary)			
PRESENTATIVE WORK SOCIATED WITH OTHER		VERE OR AF	RE ARCHITECTS;	
Name of Project	Location	Date	Cost	Architect or Associate Archite
				•••••

	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.)
C	OLLABORATION WITH OTHER ARCHITECTS:
<b>a</b> )	As an established individual or firm, are you willing to collaborate with other firms or individuals?
<b>b</b> )	Are you and/or your firm agreeable to accepting supervision of work where designs are produced by others—or vice versa?
c)	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.)
	/WE DO ☑ DO NOT ☐ DESIRE TO HAVE OUR (THIS) QUESTIONNAIRE MADE AVAILABLE TO GOVERNMENTAL AGENCIES.
1	GOVERNMENTAL AGENCIES.
	hereby certify that the above is a true statement of facts.
	hereby certify that the above is a true statement of facts.  Name of Firm or Individual Reed J. Mockeday
	Name of Firm or Individual Reed of Mockeday  Signed by all Principals:
	Name of Firm or Individual Reed J. Mockeda 4