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Personal - Post agency  
activity

SECRET

REQUEST FOR PERSONNEL ACTION					DATE PREPARED	
1 SERIAL NUMBER <b>027630</b>					2 NAME (Last-First-Middle) <b>HIDALGO, BARRIBS N. JR.</b>	
3 NATURE OF PERSONNEL ACTION <b>RETIREMENT (DISABILITY) UNDER CIA RETIREMENT DISABILITY SYSTEM</b>			4 EFFECTIVE DATE REQUESTED MO DAY YEAR <b>02 28 70</b>		5 CATEGORY OF EMPLOYMENT <b>REGULAR</b>	
6 FUNDS X V TO C O TO C			7 FINANCIAL ANALYSIS NO. CHARGEABLE <b>0235 0620</b>		8 LEGAL AUTHORITY (Completed by Office of Personnel) <b>PL 90-543 Sec. 2.3</b>	
9 ORGANIZATIONAL DESIGNATIONS <b>DDP/WH BRANCH 2 PANAMA SECTION</b>			10 LOCATION OF OFFICIAL STATION <b>WASHINGTON, D.C.</b>			
11 POSITION TITLE <b>OPS OFFICER</b>			12 POSITION NUMBER <b>1318</b>		13 CAREER SERVICE DESIGNATION <b>D.</b>	
14 CLASSIFICATION SCHEDULE (GS, FS, etc.) <b>GS</b>		15 OCCUPATIONAL SERIES <b>0136.01</b>		16 GRADE AND STEP <b>12 5</b>		17 SALARY OR RATE <b>\$15,173</b>
18 REMARKS  <b>SUBJECT HAS SIGNED WAIVER FOR SICK AND ANNUAL LEAVE ACCUMULATING AFTER 28 FEBRUARY 1970.</b>  <i>Excused</i>  <i>NOT Recommended in Agency Reserve Program due to Health of Applicant for 13. Dulevsky 4/1/70</i>  <b>1 - FINANCE</b>						
18A SIGNATURE OF REQUESTING OFFICIAL <i>[Signature]</i> <b>HENRY L. BERTHOLD, CWH/PERS</b>			DATE SIGNED <b>2/28/70</b>	18B SIGNATURE OF CAREER SERVICE APPROVING OFFICER <i>[Signature]</i>		DATE SIGNED <b>2/28/70</b>
SPACE BELOW FOR EXCLUSIVE USE OF THE OFFICE OF PERSONNEL						
19 ACTION CODE <b>45 10</b>	20 EMPLOY CODE	21 DATE CODING NUMERIC ALPHABETIC		22 STATION CODE	23 INTEGREE CODE	24 GRADES MO DA YR <b>05 27 19</b>
25 DATE OF BIRTH MO DA YR	26 DATE OF GRADE MO DA YR	27 DATE OF LEI MO DA YR	28 NTE EXPIRES MO DA YR	29 SPECIFIC RETIREMENT DATA 1 - CSC 2 - DRGM 3 - FICA 4 - NONE	30 RETIREMENT DATA CODE	31 SEPARATION DATA CODE
32 CORRECTION CANCELLATION DATA TYPE MO DA YR	33 SECURITY REG NO	34 SER	35 NET PREFERENCE CODE 0 - NONE 1 - 5 PT 2 - 10 PT	36 SERV COMP DATE MO DA YR	37 LONG COMP DATE MO DA YR	38 LEAVE CAT CODE
39 EARLIER CATEGORY TAB BENE PROV TEMP	40 SOCIAL SECURITY NO	41 PREVIOUS CIVILIAN GOVERNMENT SERVICE CODE 0 - NO PREVIOUS SERVICE 1 - NO BREAK IN SERVICE 2 - BREAK IN SERVICE (LESS THAN 3 YEARS) 3 - BREAK IN SERVICE (MORE THAN 3 YEARS)	42 LEAVE CAT CODE	43 FEDERAL TAX DATA FORM EXECUTED CODE NO TAX EXEMPTIONS	44 STATE TAX DATA FORM EXECUTED CODE NO TAX EXEMPTIONS	45 POSITION CONTROL CERTIFICATION
46 C.F. APPROVAL <i>[Signature]</i>					DATE APPROVED <b>3/1/70</b>	



SECRET

EMPLOYEE NOTICE OF RESIGNATION

RESIGN EFFECTIVE (Date) FOR THE FOLLOWING REASON MAR 2 10 20 AM '70

MY LAST WORKING DAY WILL BE DATE SIGNED SIGNATURE OF EMPLOYEE

FORWARD COMMUNICATIONS, INCLUDING SALARY CHECKS AND BONDS, TO THE FOLLOWING ADDRESS (Number, Street, City, State, Zip Code) 403 Silver Rock Rd. Rockville, Maryland 20851

INSTRUCTIONS

Items 1 thru 7, and Items 9 thru 18a - The initiating office should fill in each of the referenced items. Items 3 thru 7 and 9 thru 18 require information which pertains only to the action requested, and NOT to the current status of the employee unless specific items remain unchanged.

Item 5 - "Category of Employment" should show one of the following entries:

- Regular Part Time Temporary Temporary-Part Time Summer Detail-Out Detail-In WAE Consultant Military

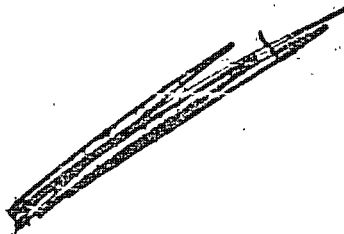
Item 9 - "Organizational Designations" should show all levels of organization pertinent to identifying the location of the position:

- FIRST LINE Major Component (Director, Deputy Director, etc.) Office, Major Staff, etc. Foreign Field or U.S. Field (if pertinent) Division or Staff (subordinate to first line) Branch Section Unit

Items 11 and 15 - "Position Title" and "Occupational Series" should be the standard abbreviated title and corresponding occupational series in Handbook of Official Occupational Titles and Codes for the duties actually to be performed by the employee. If different from the title and series of the position occupied as shown on the most current edition of the Position Control Register or Form 261, Staffing Complement Change Authorization, explain under Item 18-Remarks.

Item 18b - Signature should be that of the official authorized to approve for the Career Service to which the employee belongs. If more than one Career Service is involved, the gaining Career Service should approve and the other Career Service should concur in Item 18, Remarks.

ROUTING- The original only of this form will be forwarded to the Office of Personnel through the appropriate Career Service official(s). In the case of requests specified in HB 20-800-1, which require advance approval of or notification to the Office of Security or the Office of Finance, one copy only will be sent to the Office(s) concerned.



MEDICAL

25 JUL 1969

MEMORANDUM FOR: Mr. Balmes N. Hidalgo, Jr.

SUBJECT : Exceptional Service Emblem

1. Your request for consideration to receive the Exceptional Service Emblem has been reviewed by this office to determine your eligibility for the award. With considerable regret, I must concur in the assessment that the injuries you suffered in the line of duty do not fall under the special criteria governing award of the Exceptional Service Emblem. Hazardous duties, in the meaning of the governing regulation, relate to duties performed in areas in which internal strife, civil disturbances or hostile action by armed forces or persons unfriendly to the United States were present at the time the injury was incurred, or, relate to duties performed in an assignment defined as hazardous due to unusual geographic or other natural conditions.

2. You may be sure that this decision has been based upon thoughtful deliberation. Please accept my personal thanks for a job well done under difficult conditions.

Robert C. Wattles  
Director of Personnel

Distribution:

- 0 - Addressee
- 1 - C/WH/Pers
- 1 - OPF/Hidalgo
- 1 - D/Pers
- 2 - BSD/HMAB

SECRET

24 June 1969

MEMORANDUM FOR: Baltes N. Hidalgo

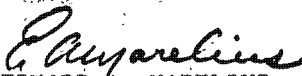
VIA : WH/RMO

SUBJECT : Records Officer Appointment

1. In accordance with a request received from your component, you are hereby appointed a Records Officer in the Clandestine Services. Your functions are described, in summary, in CSI 70-1, Para. 4.d. You have also participated in a training course in which these functions were reviewed in some detail.

2. The essence of your appointment is that you now occupy a position of trust in which you are expected to draw on your knowledge and experience to exercise responsible and sound judgment in building and maintaining a professionally useful records system in the Clandestine Services. You are, at the same time, expected to train and guide others within your component in these respects.

3. A copy of this memorandum will be placed in your official personnel folder.

  
EDWARD A. MARELIUS  
DDP Records Management Officer

cc: Personnel File of Addressee

SECRET

GROUP I  
Excluded from automatic  
downgrading and  
declassification

SENSITIVE OPERATIONAL

1968

SECRET

G 38

REQUEST FOR PERSONNEL ACTION										DATE PREPARED		
1. SERIAL NUMBER: 027630										2. NAME (Last - First - Middle): HIDALGO, EMILIO N., JR.		
3. NATURE OF PERSONNEL ACTION DESIGNATION AS A PARTICIPANT IN THE CIA RETIREMENT AND DISABILITY SYSTEM					4. EFFECTIVE DATE REQUESTED MONTH: 08   DAY: 14   YEAR: 66			5. CATEGORY OF EMPLOYMENT REGULAR				
6. FUNDS		X V TO V		V TO V		7. COST CENTER NO. CHARGEABLE 7235-0620		8. LEGAL AUTHORITY (Cite by Office of Personnel) PL 88-643 Sect. 203				
9. ORGANIZATIONAL DESIGNATIONS DDP/WH					10. LOCATION OF OFFICIAL STATION WASHINGTON, D.C.							
11. POSITION TITLE					12. POSITION NUMBER			13. CAREER SERVICE DESIGNATION D				
14. CLASSIFICATION-SCHEDULE (G.S. F.B. PA)			15. OCCUPATIONAL SERIES		16. GRADE AND STEP 12		17. SALARY OR RATE s					
18. REMARKS YOU ARE HEREBY NOTIFIED OF YOUR RIGHT TO APPEAL THIS ACTION TO THE DIRECTOR OF CENTRAL INTELLIGENCE IN ACCORDANCE WITH THE PROVISIONS OF HR 20-50. SUCH APPEAL MUST BE RECEIVED IN THE OFFICE OF THE DIRECTOR WITHIN 30 CALENDAR DAYS FROM THE EFFECTIVE DATE OF THIS ACTION.												
18A. SIGNATURE OF REQUESTING OFFICIAL				DATE SIGNED		18B. SIGNATURE OF CAREER SERVICE APPROVING OFFICER				DATE SIGNED		
SPACE BELOW FOR EXCLUSIVE USE OF THE OFFICE OF PERSONNEL												
19. ACTION CODE	20. EMPLOY CODE	21. OFFICE CODE/NO NUMERIC   ALPHABETIC		22. STATION CODE	23. INTEGRITY CODE	24. MOTIVES CODE	25. DATE OF BIRTH MO.   DA.   YR.		26. DATE OF GRADE MO.   DA.   YR.		27. DATE OF LEI MO.   DA.   YR.	
28. NTE EXPIRES MO.   DA.   YR.		29. SPECIAL REFERENCE	30. RETIREMENT DATA 1-ESC 2-FILB 3-NONE CODE: 2		31. SEPARATION DATA CODE	32. CORRECTION, CANCELLATION DATA TYPE   MO.   DA.   YR.			33. SECURITY REG NO		34. SER	
35. VET. PREFERENCE 0-NONE 1-5 PT 2-10 PT		36. SERV COMP DATE MO.   DA.   YR.		37. LONG COMP DATE MO.   DA.   YR.		38. CAREER CATEGORY CAB RESV PROV-TEMP		39. FEGLI HEALTH INSURANCE CODE   CODE   0-BAISER 1-YES		40. SOCIAL SECURITY NO		
41. PREVIOUS GOVERNMENT SERVICE DATA CODE 0-NO PREVIOUS SERVICE 1-NO BREAK IN SERVICE 2-BREAK IN SERVICE (LESS THAN 3 YEARS) 3-BREAK IN SERVICE (MORE THAN 3 YEARS)				42. LEAVE CAT CODE	43. FEDERAL TAX DATA FORM EXECUTED CODE 1-YES 2-NO		44. STATE TAX DATA FORM EXECUTED CODE 1-YES 2-NO		45. SOCIAL SECURITY NO			
46. POSITION CONTROL CERTIFICATION						48. OP APPROVAL See memo signed by D/Pers date: 26 JUL 1966				DATE APPROVED		

SECRET

<b>REQUEST FOR PERSONNEL ACTION</b>						DATE PREPARED: <b>10 DECEMBER 1965</b>			
1. SERIAL NUMBER <b>027630</b>		2. NAME (Last-First-Middle) <b>HIDALGO, BAZTES N.</b>							
3. NATURE OF PERSONNEL ACTION <b>REASSIGNMENT</b>			4. EFFECTIVE DATE (REQUEST) MONTH DAY YEAR <b>DEC 19 65</b>		5. CATEGORY OF EMPLOYMENT <b>REGULAR</b>				
6. FUNDS X V TO V O TO V		7. CENTER NO. CHARGE <b>6235 - 0620</b>		8. LEGAL AUTHORITY (As employed by Office of Personnel)					
9. ORGANIZATIONAL DESIGNATIONS <b>DOP/WH BRANCH 2 PANAMA SECTION</b>				10. LOCATION OF OFFICIAL STATION <b>WASHINGTON, D. C.</b>					
11. POSITION TITLE <b>OPS OFFICER</b>		12. POSITION NUMBER <b>(GS-12) 1318</b>		13. CAREER SERVICE DESIGNATION <b>D</b>					
14. CLASSIFICATION SCHEDULE (G.S. 18, et al.) <b>GS</b>		15. OCCUPATIONAL SERIES <b>0136.01</b>		16. GRADE AND STEP <b>12 -2</b>		17. SALARY OF RATE <b>\$ -10,987</b>			
18. REMARKS <b>FROM: WH/C/MIAMI OPS BR/FT SECTION/5235 - 1162/1145/WASHINGTON, D. C.</b>									
						Recorded by CSPD <i>Sjt</i>			
1 - FINANCE									
18A. SIGNATURE OF REQUESTING OFFICER <b>ROBERT D. CASHMAN C/WH/PERSONNEL</b>		DATE SIGNED <i>10 Dec 65</i>		18B. SIGNATURE OF CAREER SERVICE APPROVING OFFICER <i>[Signature]</i>		DATE SIGNED			
SPACE BELOW FOR EXCLUSIVE USE OF THE OFFICE OF PERSONNEL									
19. ACTION CODE	20. EMPLOY CODE	21. OFFICE CODING NUMERIC ALPHABETIC		22. STATION CODE	23. INTEGRAL CODE	24. HOURS CODE	25. DATE OF BIRTH	26. DATE OF GRADE	27. DATE OF LSI
<i>57</i>	<i>11</i>	<i>57370 WH</i>		<i>2513</i>					
28. WTE EXP. RES.	29. SPECIAL REFERENCE	30. RETIREMENT DATA		31. SEPARATION DATA	32. CORRECTION (CANCELLATION DATA)		33. SECURITY REG. NO.		34. SET
							EOD DATA →		
35. VET PREFERENCE	36. SERV COMP DATE	37. LONG COMP DATE	38. CAREER DESIGNATION	39. FEDERAL HEALTH INSURANCE	40. SOCIAL SECURITY NO.				
41. PREVIOUS GOVERNMENT SERVICE DATA			42. LEAVE ENT CODE	43. FEDERAL TAX DATA		44. STATE TAX DATA			
CODE 0 - NO PREVIOUS SERVICE 1 - NO PREVIOUS SERVICE 2 - 3 YEARS IN SERVICE (LESS THAN 3 YEARS) 3 - MORE THAN 3 YEARS IN SERVICE (MORE THAN 3 YEARS)				CODE 1 - YES 2 - NO		CODE 1 - YES 2 - NO			
45. POSITION CONTROL CERTIFICATION				46. OFFICE APPROVAL <i>[Signature]</i>		DATE APPROVED <b>12/15/65</b>			

SECRET

GROUP 1 EXCLUDED FROM AUTOMATIC DOWNGRADING AND DECLASSIFICATION

CONFIDENTIAL  
(When Filled In)

NOTICE OF LONGEVITY COMPUTATION DATE		<input checked="" type="checkbox"/> VOUCHERED
		<input type="checkbox"/> UNVOUCHERED
NAME (Last, First, Middle)		SERIAL NUMBER
HIDALGO B N Jr		027630
OFFICE (and division)		
DDP/WH		
<input type="checkbox"/> ORIGINAL	LONGEVITY COMPUTATION DATE	
<input checked="" type="checkbox"/> CORRECTION	02-15-52	
THIS DATE	SIGNATURE (Office of Personnel)	
12-13-65	<i>[Signature]</i>	

FORM 171a  
11-59

CONFIDENTIAL

(4)



SECRET

REQUEST FOR PERSONNEL ACTION						DATE PREPARED
1. SERIAL NUMBER 100730						23 October 1964
3. NATURE OF PERSONNEL ACTION LEASE				4. EFFECTIVE DATE REQUESTED MONTH DAY YEAR 11 1 64	5. CATEGORY OF EMPLOYMENT LEASE	
6. FUNDS		V TO V C TO V	V TO C C TO C	7. COST CENTER NO. CHARGE ARE 275-1162	8. LEGAL AUTHORITY (Completed by Office of Personnel)	
9. ORGANIZATIONAL DESIGNATIONS DDP Special Affairs Staff Counter-Intelligence Staff Operations Section				10. LOCATION OF OFFICIAL STATION Embassy, P.O.		
11. POSITION TITLE SPY DETECTOR			12. POSITION NUMBER 007	13. CAREER SERVICE DESIGNATION D		
14. CLASSIFICATION SCHEDULE (G.S. I.R. or I)		15. OCCUPATIONAL SERIES	16. GRADE AND STEP	17. SALARY OR RATE		
ES		015-01	12 (1)	\$10,200		
18. REMARKS From: WPE/313/23/23 Rev. 436 Security Program Director 1 of Security 10/28/64 11/2/64 Recorded by CSPD reflect the 11/2/64						
18A. SIGNATURE OF PROMISING OFFICIAL <i>[Signature]</i>			DATE SIGNED 10/29/64	18B. SIGNATURE OF CAREER SERVICE APPROVING OFFICER		DATE SIGNED 10-30-64
SPACE BELOW FOR EXCLUSIVE USE OF THE OFFICE OF PERSONNEL						
19. ACTION CODE 3710	20. EMPLOY CODE 10	21. OFFICE CODING NUMERIC ALPHABETIC 19150 5.A.5		22. STATION CODE 75013	23. INTERSEE CODE	24. HOURS CODE 1
25. DATE OF BIRTH MO DA YR 05 27 19		26. DATE OF GRADE MO DA YR		27. DATE OF LEI MO DA YR		28. DATE OF LEI MO DA YR
29. SPECIAL REFERENCE		30. RETIREMENT DATA 1-CM 2-FIA 3-NONE		31. SEPARATION DATA CODE	32. CORRECTION CANCELLATION DATA TYPE MO DA YR	
33. SECURITY REQ NO		34. SEX		EOD DATA		
35. VET PREFERENCE CODE 0-NONE 1-5 PT 2-10 PT		36. SERV COMP DATE MO DA YR		37. LONG COMP DATE MO DA YR		38. CAREER CATEGORY CODE
39. FEET HEALTH INSURANCE CODE A-NONE B-YES		40. SOCIAL SECURITY NO		41. PREVIOUS GOVERNMENT SERVICE DATA CODE 0-NO PREVIOUS SERVICE 1-NO BREAK IN SERVICE 2-BREAK IN SERVICE (LESS THAN 3 YEARS) 3-BREAK IN SERVICE (MORE THAN 3 YEARS)		
42. LEAVE CAT CODE		43. FEDERAL TAX DATA FORM EXEMPTED CODE		44. STATE TAX DATA FORM EXECUTED CODE		45. POSITION CONTROL CERTIFICATION <i>[Signature]</i>
46. N.J. TAX EXEMPTIONS		47. FORM EXECUTED 1-YES 2-NO		48. OP APPROVAL <i>[Signature]</i>		DATE APPROVED 10-30-64

SECRET

REQUEST FOR PERSONNEL ACTION										DATE PREPARED							
1 SERIAL NUMBER 02733		2 NAME (Last-First-Middle) L. DALLO, B. N. Jr.				3 EFFECTIVE DATE REQUESTED MONTH: 04, DAY: 12, YEAR: 64		4 CATEGORY OF EMPLOYMENT REGULAR									
5 NATURE OF PERSONNEL ACTION EXCLUDED APPOINTMENT (See Form 1)		6 FUNDS I V TO V C 10 V		7 COST CENTER NO. CHARGE ABB 4250-1000-100		8 LEGAL AUTHORITY (Completed by Office of Personnel)											
9 ORGANIZATIONAL DESIGNATIONS DDP Special Affairs Staff # 03/65 Development Complement					10 LOCATION OF OFFICIAL STATION Washington, D.C.												
11 POSITION TITLE OPS OFFICER					12 POSITION NUMBER XXXX 7297		13 CAREER SERVICE DESIGNATION D										
14 CLASSIFICATION SCHEDULE (GS, FS, etc.) GS			15 OCCUPATIONAL SERIES 0136.07		16 GRADE AND STEP 12 (1)		17 SALARY OR RATE \$9900		Recorded by CSPD RPH								
18 REMARKS * 0 yrs. <del>For medical reasons, not to exceed one year.</del> For duration of period that the individual is on sick leave; not to exceed one year per 5 CS 1 by Payroll; 1 by Security 13/59 J																	
18A SIGNATURE OF REQUESTING OFFICER Cecilia L. Dawson DC, III, C. LAWSON, III, DC, DATE				DATE SIGNED 9 April 64		18B SIGNATURE OF CAREER SERVICE APPROVING OFFICER George H. Bennett				DATE SIGNED 13 Apr 64							
SPACE BELOW FOR EXCLUSIVE USE OF THE OFFICE OF PERSONNEL																	
19 AGENCY CODE 13		20 EMPLOY CODE W		21 OFFICE CODING NUMERIC: 4447 ALPHABETIC: SAS		22 STATION CODE 78013		23 INTEGRITY CODE		24 MODERN CODE 1		25 DATE OF BIRTH MO: 12, DA: 22, YR: 63		26 DATE OF GRADE MO: 12, DA: 22, YR: 63		27 DATE OF LEI MO: 12, DA: 24, YR: 63	
28 RFE GRAPHICS MO: DA: YR:		29 SPECIAL REFERENCE		30 RETIREMENT DATA 1-YES 2-YES 3-NO		31 SEPARATION DATA CODE		32 CORRECTION CANCELLATION DATA TYPE: MO: DA: YR:		EOD DATA MO: DA: YR:		33 SECURITY REQ. NO 00000		34 SEC NO 41			
35 VET PREFERENCE CODE: 0-NO 1-5 YR 2-10 YR		36 SERV COMP DATE MO: DA: YR: 1/2/64		37 LONG COMP DATE MO: DA: YR: 1/1/68		38 CAREER CATEGORY CAR REL: P PROV TEMP: 1		39 FEED. HEALTH INSURANCE CODE: 1 HEALTH INS. CODE: 1-YES		40 SOCIAL SECURITY NO							
41. PREVIOUS GOVERNMENT SERVICE DATA CODE: 1 0-NO PREVIOUS SERVICE 1-NO BREAK IN SERVICE 2-BREAK IN SERVICE (LESS THAN 3 YEARS) 3-BREAK IN SERVICE (MORE THAN 3 YEARS)				42 LEAVE CAT CODE 1-YES 2-NO		43 FEDERAL TAX DATA FORM EXECUTED: 0 NO TAX EXEMPTIONS: 0		44 STATE TAX DATA FORM EXECUTED: 1-YES 2-NO				CODE: MO: YR: STATE CODE					
45 POSITION CONTROL CERTIFICATION W. Dawson 4/21/64						46 OP APPROVAL George H. Bennett 13 Apr 64				DATE APPROVED							

FORM 1152 USE PREVIOUS EDITION

SECRET

GROUP 1 EXCLUDED FROM AUTOMATIC DOWNGRADING AND DECLASSIFICATION

SECRET

18 Nov 1964

REQUEST FOR PERSONNEL ACTION						DATE PREPARED 9 April 1964	
1- SERIAL NUMBER 027630		2- NAME (Last, First, Middle) [Redacted]				3- CATEGORY OF EMPLOYMENT REGULAR	
4- NATURE OF PERSONNEL ACTION Reassignment		5- EFFECTIVE DATE REQUESTED MONTH: 04, DAY: 15, YEAR: 64		6- LEGAL AUTHORITY (Completed by Office of Personnel)			
7- FUNDS V TO V, G TO V, I, G TO G		8- COST CENTER NO. CHARGE ART 4132-2001-1700		9- ORGANIZATIONAL DESIGNATIONS 40 41 42 43 44 45 46 47 48 49 50 51 52 53 54 55 56 57 58 59 60 61 62 63 64 65 66 67 68 69 70 71 72 73 74 75 76 77 78 79 80 81 82 83 84 85 86 87 88 89 90 91 92 93 94 95 96 97 98 99 00 DDP/Operational Affairs Staff U. S. Field Forward Operations Station - JMWAVE CI Section			
10- LOCATION OF OFFICIAL STATION JMWAVE		11- POSITION TITLE OPS OFFICER		12- POSITION NUMBER 0033		13- CAREER SERVICE DESIGNATION D	
14- CLASSIFICATION SCHEDULE / GA, I.B., etc. GS		15- OCCUPATIONAL SERIES 0136.01		16- GRADE AND STEP 12 (1)		17- SALARY OR RATE \$ 6080	
18- REMARKS  1 of Security 1 of Payroll  1 of Security 1 of Payroll							
19- DATE SIGNED 9 April 64		20- SIGNATURE OF CAREER SERVICE APPROVING OFFICER [Signature]		21- DATE SIGNED 12 April 64		22- SIGNATURE OF PERSONNEL OFFICER [Signature]	
SPACE BELOW FOR EXCLUSIVE USE OF THE OFFICE OF PERSONNEL							
23- ACTION CODE 45	24- EMPLOY CODE 10	25- OFFICE CODING NUMERIC: [Blank], ALPHABETIC: [Blank]		26- STATION CODE	27- INTEGRER CODE	28- HQ/RTS CODE 2	29- DATE OF BIRTH MO: 05, DA: 17, YR: 19
30- DATE OF LEAVE	31- DATE OF LET	32- NTE EXPIRES MO: [Blank], DA: [Blank], YR: [Blank]	33- SPECIAL REFERENCE 1-CSE, 2-FLCA, 3-NONE	34- RETIREMENT DATA CODE	35- SEPARATION DATA CODE	36- CORRECTION CANCELLATION DATA TYPE: [Blank], MO: [Blank], DA: [Blank], YR: [Blank]	37- SECURITY REG NO
38- VET PREFERENCE CODE: 0-NONE, 1-5 PT, 2-10 PT	39- SERV COMP DATE MO: [Blank], DA: [Blank], YR: [Blank]	40- LONG COMP DATE MO: [Blank], DA: [Blank], YR: [Blank]	41- CAREER CATEGORY CAR RES, PROF TEMP	42- FEGLI HEALTH INSURANCE CODE: 0-NO RES, 1-RES	43- SOCIAL SECURITY NO	44- EOD DATA	
45- PREVIOUS GOVERNMENT SERVICE DATA CODE: 0-NO PREVIOUS SERVICE, 1-NO BREAK IN SERVICE, 2-BREAK IN SERVICE (5 TO 24 YEARS), 3-BREAK IN SERVICE (MORE THAN 24 YEARS)		46- LEAVE CAT CODE	47- FEDERAL TAX DATA FORM EXECUTED, CODE, NO TAX EXEMPTIONS		48- STATE TAX DATA FORM EXECUTED, CODE, INC TAX STATE CODE		
49- POSITION CONTROL CERTIFICATION [Signature]		50- APPROVAL [Signature]				51- DATE APPROVED [Signature]	

SECRET

EXCLUDED FROM AUTOMATIC DOWNGRADING AND DECLASSIFICATION

SECRET



NAME OF EMPLOYEE (Last-First-Initial) <b>HIDALGO, BALMES N.</b>	NAME AND RELATIONSHIP OF DEPENDENT <b>self</b>	CLAIM NUMBER <b>60-264</b>
--	---	-------------------------------

There is on file in the Benefits and Counseling Branch, Benefits and Services Division, Office of Personnel, an Official Disability Claim File on the above named employee (or his dependent\*) for an illness, injury, or death incurred on 30 May 1960. Broken left foot.

This notice should be filed in the employee's Official Personnel Folder as a permanent cross-reference to the Official Disability Claim File.

DATE OF NOTICE	SIGNATURE OF REPRESENTATIVE <i>B. De Felice</i>
----------------	--

**NOTICE OF OFFICIAL DISABILITY CLAIM FILE**

SECRET  
(When Filled In)

REQUEST FOR PERSONNEL ACTION				DATE PREPARED			
1. SERIAL NUMBER <i>6760</i>		2. NAME (Last, First, Middle) <i>[REDACTED]</i>		18 April 1963			
3. NATURE OF PERSONNEL ACTION EXCITED APPOINTMENT			4. EFFECTIVE DATE REQUESTED 04   28   63		5. CATEGORY OF EMPLOYMENT REGULAR		
6. FUNDS		7. COST CENTER NO. CHARGE 3132-2001-1000		8. LEGAL AUTHORITY (Completed by Office of Personnel)			
9. ORGANIZATIONAL DESIGNATIONS DDP/Special Affairs Staff U. S. Field Forward Operations Station - JMWAVE CI Section			10. LOCATION OF OFFICIAL STATION JMWAVE				
11. POSITION TITLE OPS OFFICER		12. POSITION NUMBER 0732		13. CAREER SERVICE DESIGNATION D			
14. CLASSIFICATION SCHEDULE (GS, LP, etc.) GS		15. OCCUPATIONAL SERIES 0136-01		17. SALARY OR RATE \$ 8840			
16. REMARKS  <i>P-359</i>  <div style="border: 1px solid black; padding: 5px; width: fit-content; margin-left: auto; margin-right: auto;">Recorded by CSPD <i>[Signature]</i></div>							
19. SIGNATURE OF REQUESTING OFFICER <i>[Signature]</i> LOUIS W. ARMSTRONG, 1/SAS/Prof.							
188. SIGNATURE OF CAREER SERVICE APPROVING OFFICER <i>[Signature]</i>							
DATE SIGNED 18 Apr 63							
DATE SIGNED 11 Apr 63							
SPACE BELOW FOR EXCLUSIVE USE OF THE OFFICE OF PERSONNEL							
20. AGENCY USE ONLY							
21. OFFICE USE ONLY							
22. STATE USE ONLY							
23. MILITARY USE ONLY							
24. FEDERAL USE ONLY							
25. DATE OF BIRTH							
26. DATE OF DEATH							
27. DATE OF LEI							
28. DATE EXPIRES							
29. SPECIAL REFERENCE							
30. REMOVAL DATA							
31. SILENCE ON DATA							
32. CORRECT INSTANCE AT ON DATA							
33. SOCIAL SEC. NO.							
34. SEX							
35. AET. PREFERENCE							
36. SERV. COMP. DATE							
37. COND. COMP. DATE							
38. LABEL CATEGORY							
39. SEC. / MIL. / INS. RANK							
40. SOCIAL SECURITY NO.							
41. PREVIOUS GOVERNMENT SERVICE TO A							
42. FEDERAL TAX DATA							
43. STATE TAX DATA							
44. SOCIAL SECURITY NO.							
45. POSITION CONTROL CERTIFICATION							
APPROVED <i>[Signature]</i>							

**SECRET**  
(When Filled In)

<b>REQUEST FOR PERSONNEL ACTION</b>				DATE PREPARED 18 April 1963			
1. SERIAL NUMBER 027630 ✓		2. NAME (Last-First-Middle) HIT ALON, <del>James</del> N., Jr.					
3. NATURE OF PERSONNEL ACTION RESIGNATION				4. EFFECTIVE DATE REQUESTED MONTH DAY YEAR 06 27 63		5. CATEGORY OF EMPLOYMENT REGULAR	
6. FUNDS ▶ X V TO V CF TO V		V TO CF CF TO CF		7. COST CENTER NO. CHARGEABLE 3232-1000-1000		8. LEGAL AUTHORITY (Completed by Office of Personnel)	
9. ORGANIZATIONAL DESIGNATIONS DDP Special Affairs Staff FI/CI Branch				10. LOCATION OF OFFICIAL STATION Washington, D.C.			
11. POSITION TITLE OPS OFFICER				12. POSITION NUMBER 0682		13. CAREER SERVICE DESIGNATION D	
14. CLASSIFICATION SCHEDULE (GS, LB, etc.) GS		15. OCCUPATIONAL SERIES 0136.01		16. GRADE AND STEP 11 (4)		17. SALARY OR RATE \$ 8840 ✓	
18. REMARKS  <div style="text-align: right; border: 1px solid black; padding: 5px; width: fit-content; margin: 0 auto;">Recorded by GSPD <i>[Signature]</i></div>							
19. SIGNATURE OF REQUESTING OFFICER Louis W. Armstrong, <i>[Signature]</i> LOUIS W. ARMSTRONG, <i>[Signature]</i>							
DATE SIGNED 18 Apr 63		19A. SIGNATURE OF CAREER SERVICE APPROVING OFFICER <i>[Signature]</i>					
DATE SIGNED 18 Apr 63		DATE SIGNED 18 Apr 63					
SPACE BELOW FOR EXCLUSIVE USE OF THE OFFICE OF PERSONNEL							
20. ACTION CODE 45 10	21. OFFICE CODE ALPHABETIC	22. STEP IN CODE	23. UNIT CODE	24. MONTH	25. DAY OF MONTH	26. YEAR OF YEAR	27. DATE OF
28. NTE EXP RES	29. SPECIAL REFERENCE	30. RET SEPAR DATE	31. SEPARATION DATE CODE	32. SEPARATION AND DATE	FOOD DATA →		33. SER REF. NO.
34. VET. PREFERENCE	35. SER. COMP. DATE	36. VET. COMP. DATE	37. CAREER CATEGORY	38. REG. / HEALTH ASSURANCE	39. OTHER DATA		
40. PREVIOUS GOVERNMENT SERVICE DATA		41. PREVIOUS FED DATA		42. STATE SER DATA			
43. POSITION CONTROL CERTIFICATION <i>[Signature]</i>		44. D.P. APPROVAL <i>[Signature]</i>				45. DATE APPROVED 19 Apr 63	

RZR: 25 APR 63

NOTIFICATION OF PERSONNEL ACTION							
<b>OEF</b>							
1. SERIAL NUMBER		2. NAME (LAST FIRST MIDDLE)					
027630		HIDALGO B N JR					
3. NATURE OF PERSONNEL ACTION				4. EFFECTIVE DATE		5. CATEGORY OF EMPLOYMENT	
RESIGNATION				04 27 63		REGULAR	
6. FUNDS		7. COST CENTER NO. CHARGEABLE		8. CSC OR OTHER LEGAL AUTHORITY			
X		3232 1000 1000					
9. ORGANIZATIONAL DESIGNATIONS				10. LOCATION OF OFFICIAL STATION			
11. POSITION TITLE				12. POSITION NUMBER		13. SERVICE DESIGNATION	
OPS OFFICER				0682		D	
14. CLASSIFICATION SCHEDULE (GS, LO, etc.)		15. OCCUPATIONAL SERIES		16. GRADE AND STEP		17. SALARY OR RATE	
GS		0136.01		11 4		8840	
18. REMARKS							
SIGNATURE OR OTHER AUTHENTICATION							

SECRET

FORM 1152-1 (Rev. 10-1-63)

REQUEST FOR PERSONNEL ACTION						DATE PREPARED 11 December 1963			
1. SERIAL NUMBER 027630		2. NAME (Last, First, Middle) <i>[REDACTED]</i>							
3. NATURE OF PERSONNEL ACTION PROMOTION				4. EFFECTIVE DATE REQUESTED MONTH: 12 DAY: 15 YEAR: 63		5. CATEGORY OF EMPLOYMENT REGULAR			
6. FUNDS		7. V. TO V. CF TO V.		8. W. TO CF I. CF TO CF		9. COST CENTER NO. CHARGEABLE 1132-2001-1000			
10. ORGANIZATIONAL DESIGNATIONS DEP Special Affairs Staff U. S. Field Forward Operations Station - JMWAVE CI Section				11. LOCATION OF OFFICIAL STATION JMWAVE					
12. POSITION TITLE OPS OFFICER				13. POSITION NUMBER 0731		14. CAREER SERVICE DESIGNATION D			
15. CLASSIFICATION SCHEDULE (GS, LP, etc.) GS		16. OCCUPATIONAL SERIES (87) 0136.01		17. GRADE AND STEP 12 (1)		18. SALARY OR RATE 9.9475			
19. REMARKS  <div style="text-align: right; border: 1px solid black; padding: 5px; width: fit-content; margin: auto;">RECEIVED BY CSPD <i>[Signature]</i></div>									
20A. SIGNATURE REQUESTING OFFICIAL CRVILLE G. DAWSON, S/SAS/Fers.			20B. DATE SIGNED 12/11/63		21. SIGNATURE OF CAREER SERVICE APPROVING OFFICER <i>[Signature]</i>			22. DATE SIGNED 12/11/63	
SPACE BELOW FOR EXCLUSIVE USE OF THE OFFICE OF PERSONNEL									
23. ACTION CODE 22 10		24. OFFICE CODE 4970		25. EMPLOYMENT CODE SAS		26. GRADE AND STEP 12 (1)		27. DATE OF ACTION 12/22/63	
28. VET. PREFERENCE		29. SER. COMP. DATA		30. LONG. COMP. DATA		31. CAREER CATEGORY		32. INCENTIVE	
33. PREVIOUS GOVERNMENT SERVICE DATA		34. MILITARY SER. DATA		35. DATE TAKEN		36. STATE		37. DATA	
38. POSITION CONTROL CERTIFICATION <i>[Signature]</i>				39. D.P. APPROVAL <i>[Signature]</i>				40. DATE APPROVED 12/11/63	



**SECRET**  
(When Filled In)

REQUEST FOR PERSONNEL ACTION						DATE PREPARED	
1. SERIAL NUMBER 027630		2. NAME (Last-First-Middle) DOMINGO, <i>Alto</i> , Jr.				DATE PREPARED 6/19/62	
3. NATURE OF PERSONNEL ACTION REASSIGNMENT				4. EFFECTIVE DATE REQUESTED MONTH DAY YEAR 11 20 62		5. CATEGORY OF EMPLOYMENT REGULAR	
6. FUNDS Y TO Y CP TO Y		7. COST CENTER, NO. CHARGE ABLE		8. LEGAL AUTHORITY (Completed By Office of Personnel)			
9. ORGANIZATIONAL DESIGNATIONS DDP Task Force W PC-CI Branch				10. LOCATION OF OFFICIAL STATION Washington, D.C.			
11. POSITION TITLE SBS OFFICER			12. POSITION NUMBER 002		13. CAREER SERVICE DESIGNATION J		
14. CLASSIFICATION SCHEDULE (GS, LB, etc.) GS		15. OCCUPATIONAL SERIES 0000		16. GRADE AND STEP 11 04		17. SALARY OR RATE \$720	
18. REMARKS From: DDP/IE/Platoon, St., 2nd Lt., P.O., 67662 Tray 1 CO, OF BRANCH: <i>Scy Baum</i> Philip G. Baum, Jr./Pers. Off. Recorded By CSPD 6/11/62							
18A. SIGNATURE OF REQUESTING OFFICIAL <i>Louis W. Armstrong</i>				DATE SIGNED 6/7/62		18B. SIGNATURE OF CAREER SERVICE APPROVING OFFICER <i>Paul R. ...</i>	
SPACE BELOW FOR EXCLUSIVE USE OF THE OFFICE OF PERSONNEL							
19. ACTION CODE 37		20. EMPLOY CODE 10		21. OFFICE CODING NUMERIC ALPHABETIC 61300 TFW		22. STATION CODE	
23. EMPLOYEE CODE		24. NO. OF DEPT. CODE		25. DATE OF BIRTH 1 5 12 7 1 9		26. DATE OF GRADE	
27. SPECIAL REFERENCE		28. RETIREMENT DATA		29. SEPARATION DATA CODE		30. CORRECTION/CANCELLATION DATA	
31. VET. PREFERENCE		32. SERVA. COMP. DATE		33. LONG. COMP. DATE		34. CAREER CATEGORY	
35. PREVIOUS GOVT. SERVICE DATA		36. LEAVE CAT. CODE		37. FEDER. TAX DATA		38. STATE TAX DATA	
39. POSITION CONTROL CERTIFICATION <i>3. Kearney 11/19/62</i>				40. O.P. APPROVAL <i>Paul R. Baum</i>		DATE APPROVED	

SECRET  
(When Filled In)

REQUEST FOR PERSONNEL ACTION					DATE PREPARED		
1. SERIAL NUMBER <b>027630</b>			2. NAME (Last-First-Middle) <b>HIDALGO, RAFAEL M. JR.</b>			<b>4 January 1962</b>	
3. NATURE OF PERSONNEL ACTION <b>REASSIGNMENT</b>				4. EFFECTIVE DATE REQUESTED MONTH DAY YEAR <b>1 17 62</b>		5. CATEGORY OF EMPLOYMENT <b>REGULAR</b>	
6. FUNDS <input checked="" type="checkbox"/> X		V TO V		V TO CF		7. COST CENTER NO. CHANGEABLE <b>2235 1000 1000</b>	
CF TO V		CF TO CF		8. LEGAL AUTHORITY (Completed by Office of Personnel)			
9. ORGANIZATIONAL DESIGNATIONS <b>DDP WH SECTION A PLANS &amp; OPERATIONS STAFF</b>				10. LOCATION OF OFFICIAL STATION <b>WASHINGTON, D. C.</b>			
11. POSITION TITLE <b>OPS OFFICER</b>				12. POSITION NUMBER <b>SA-641</b>		13. CAREER SERVICE DESIGNATION <b>D</b>	
14. CLASSIFICATION SCHEDULE (GS, LP, etc.) <b>GS</b>		15. OCCUPATIONAL SERIES <b>0136.01</b>		16. GRADE AND STEP <b>11 3</b>		17. SALARY OR RATE <b>\$8,080</b>	
18. REMARKS <b>FROM: DDP/WH/1-/FI-SI/#683</b>							
18A. SIGNATURE OF REQUESTING OFFICIAL <b>scnnel</b>				DATE SIGNED		18B. SIGNATURE OF CAREER SERVICE APPROVING OFFICER <b>R. Heady</b>	
						DATE SIGNED	
SPACE BELOW FOR EXCLUSIVE USE OF THE OFFICE OF PERSONNEL							
19. ACTION CODE		20. EMPLOY CODE		21. OFFICE CODE NUMERIC ALPHABETIC		22. STATION CODE	
<b>200</b>		<b>C</b>		<b>100</b>		<b>1</b>	
23. DATE OF ACTION		24. DATE OF DEPT		25. DATE OF DIV		26. DATE OF LEA	
<b>1 17 62</b>		<b>1 17 62</b>		<b>1 17 62</b>		<b>1 17 62</b>	
27. DATE OF LEA		28. SPECIAL REFERENCE		29. RETIREMENT DATA		30. SEPARATION DATA (SPECIALTY PAY DATA)	
<b>1 17 62</b>		<b>100</b>		<b>1</b>		<b>100</b>	
31. VET. PREFERENCE		32. SERV. COMP. DATE		33. LONG. COM. DATE		34. MIL. SERV. DATA	
<b>1</b>		<b>1</b>		<b>1</b>		<b>1</b>	
35. PREVIOUS GOVERNMENT SERVICE DATA		36. LEAF CAT. CODE		37. FICA TAX DATA		38. STATE TAX DATA	
<b>1</b>		<b>1</b>		<b>1</b>		<b>1</b>	
43. POSITION CONTROL CERTIFICATION <b>1/16/62</b>				44. O.P. APPROVAL <b>R. Heady</b>		DATE APPROVED	

SECRET  
(When Filled In)

REQUEST FOR PERSONNEL ACTION						DATE PREPARED	
1. SERIAL NUMBER <b>027630</b>						2. NAME (Last-First-Middle) <b>HIDALGO, B. N., Jr.</b>	
3. NATURE OF PERSONNEL ACTION <b>REASSIGNMENT (And Transfer to Vouchered Funds)</b>				4. EFFECTIVE DATE REQUESTED MONTH: <b>08</b> , DAY: <b>20</b> , YEAR: <b>61</b>		5. CATEGORY OF EMPLOYMENT <b>REGULAR</b>	
6. FUNDS <b>X</b>		7. COST CENTER NO. CHARGEABLE <b>2635-5000-8021</b>		8. LEGAL AUTHORITY (Completed by Office of Personnel)			
9. ORGANIZATIONAL DESIGNATIONS <b>DDP/WH <del>1100</del> Branch 4 FI-CI Sec.</b>				10. LOCATION OF OFFICIAL STATION <b>Washington, D.C.</b>			
11. POSITION TITLE <b>OPS OFFICER (D)</b>			12. POSITION NUMBER <b>0681</b>		13. CAREER SERVICE DESIGNATION <b>D</b>		
14. CLASSIFICATION SCHEDULE (GS, LP, etc.) <b>GS (12)</b>		15. OCCUPATIONAL SERIES <b>0136.01</b>		16. GRADE AND STEP <b>11 (3)</b>		17. SALARY OR RATE <b>\$ 8,080</b>	
18. REMARKS <b>Froms DDP/WH, Br. 4, #0626</b>							
19. SIGNATURE OF REQUESTER <i>[Signature]</i>				20. SIGNATURE OF CAREER SERVICE APPROVING OFFICER <i>[Signature]</i>			
SIGN BELOW FOR EXCLUSIVE USE OF THE OFFICE OF PERSONNEL							
21. AGENCY CODE		22. EMPLOYER CODE		23. STATION CODE		24. POSITION CODE	
25. DATE OF BIRTH		26. DATE OF DEATH		27. DATE OF LEI		28. SECURITY REG. NO.	
29. SECURITY REG. NO.		30. SECURITY REG. NO.		31. SECURITY REG. NO.		32. SECURITY REG. NO.	
33. SECURITY REG. NO.		34. SECURITY REG. NO.		35. SECURITY REG. NO.		36. SECURITY REG. NO.	
37. SECURITY REG. NO.		38. SECURITY REG. NO.		39. SECURITY REG. NO.		40. SECURITY REG. NO.	
41. SECURITY REG. NO.		42. SECURITY REG. NO.		43. SECURITY REG. NO.		44. SECURITY REG. NO.	
45. POSITION CONTROL CERTIFICATION <i>[Signature]</i>		46. O.P. APPROVAL <i>[Signature]</i>					

3

RS

EGS DATA

SECRET

REQUEST FOR PERSONNEL ACTION

1. Serial No.	2. Name (Last-First-Middle) <b>HIDALGO, BALTES N., JR.</b>	3. Date Of Birth Mo. Da. Yr. <b>05 27 19</b>	4. Vol. Pref. Mo. Da. Yr. <b>5 PR-1</b>	5. Sex <b>M</b>	6. CS-FOU Mo. Da. Yr. <b>1</b>
7. SCD Mo. Da. Yr. <b>1</b>	8. CSC Rem. Yes-1 Code No-2 <b>1</b>	9. CSC Or Other Legal Authority	10. Appt. Affidav. Mo. Da. Yr. <b>1</b>	11. FEGLI Mo. Da. Yr. <b>1</b>	12. LDC Mo. Da. Yr. <b>1</b>
13. <sup>13</sup> <sub>13</sub> <sup>13</sup> <sub>13</sub> <sup>13</sup> <sub>13</sub>		14. <sup>14</sup> <sub>14</sub> <sup>14</sup> <sub>14</sub> <sup>14</sup> <sub>14</sub>		15. <sup>15</sup> <sub>15</sub> <sup>15</sup> <sub>15</sub> <sup>15</sup> <sub>15</sub>	

2

PREVIOUS ASSIGNMENT

14. Organizational Designations <b>DIS/OTR OPERATIONS SCHOOL COVERT TRAINING</b>	Code	15. Location Of Official Station <b>WASH., D. C.</b>	Station Code
16. Dept. - Field Dept. - USStd - Fragn. Code <b>1</b>	17. Position Title <b>INSTRUCTOR OPERATIONS</b>	18. Position No. <b>1014</b>	19. Serv. 20. Occup. Series <b>GS 1711.50</b>
21. Grade & Step <b>11 2</b>	22. Salary Or Rate <b>\$ 7270</b>	23. SD <b>D</b>	24. Date Of Grade Mo. Da. Yr. <b>03 17 58</b>
25. PSI Due Mo. Da. Yr. <b>03 17 61</b>		26. Appropriation Number <b>0175-2533</b>	

ACTION

27. Nature Of Action <b>REASSIGNMENT</b>	Code <b>17</b>	28. Eff. Date Mo. Da. Yr. <b>06 26 60</b>	29. Type Of Employee <b>REGULAR</b>	Code	30. Separation Data
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3A

PRESENT ASSIGNMENT

31. Organizational Designations <b>DIP WH BRANCH 4</b>	Code <b>487</b>	32. Location Of Official Station <b>WASH., D. C.</b>	Station Code
33. Dept. - Field Dept. - USStd - Fragn. Code <b>1</b>	34. Position Title <b>OPS OFFICER</b>	35. Position No. <b>BA-626</b>	36. Serv. 37. Occup. Series <b>GS 0136.01</b>
38. Grade & Step <b>11 2</b>	39. Salary Or Rate <b>\$ 7270</b>	40. SD <b>D</b>	41. Date Of Grade Mo. Da. Yr. <b>6 23 60</b>
42. PSI Due Mo. Da. Yr. <b>6 23 60</b>		43. Appropriation Number <b>0135 1000 1000</b>	

SOURCE OF REQUEST

A. Request Approved By (Signature And Title) <b>WH/PERSONNEL OFFICER</b>	C. Request Approved By (Signature And Title) <i>[Signature]</i> <b>PERSONNEL OFFICER</b>
B. For Additional Information Call (Name & Telephone Ex.) <b>8242</b>	

CLEARANCES

Clearance	Signature	Date	Clearance	Signature	Date
A. Career Board	<i>[Signature]</i>	<b>6-21-60</b>	D. Placement		
B. Pos. Control	<i>[Signature]</i>	<b>6-23-60</b>	E.		
C. Classification			F. Approved By	<i>[Signature]</i>	<b>6-23-60</b>

Remarks

2 copies to Security. 1 Loss Notice.  
*[Signature]* 6/24/60  
*[Signature]* 6/21/60

SECRET

**SECRET**  
(When Filled In)

DATE PREPARED			REQUEST FOR PERSONNEL ACTION						V. to V		XX		V. to UV	
Mo	Da	Yr							UV. to V		UV. to UV			
5	20	59												
1. Serial No.			2. Name (Last-First-Middle)				3. Date of Birth		4. Var. Pref.		5. Sex		6. CS - EOD	
			HIDALGO, Balmea N., Jr.				5 27 19		None-0 5 Pt-1 10 Pt-2		M			
7. SCD			8. CSC Reprt.		9. CSC Or Other Legal Authority		10. Appt. Affidav.		11. FEGLI		12. LCD		13. MIL SERV. CREDIT LCB	
Mo	Da	Yr	Yes-1	Code			Mo	Da	Yr	Yes-1	Code	Mo	Da	Yr
			No-2							No-2				

**PREVIOUS ASSIGNMENT**

14. Organizational Designations				Code		15. Location Of Official Station				Station Code	
DDP/WH Branch III Central America Section						Washington, D. C.					
16. Dept.-Field		17. Position Title				18. Position No.		19. Serv.		20. Occup. Series	
Dept. - Usfid. Frgn. -	Code	Area Ops Officer				0486		GS		0136.01	
21. Grade & Step		22. Salary Or Rate		23. SD		24. Date Of Grade		25. PSI Due		26. Appropriation Number	
11	1	\$ 7,030		D		03 17 58		09 20 59		8-3500-20	

**ACTION**

27. Nature Of Action		Code		28. Eff. Date		29. Type Of Employee		Code		30. Separation Date	
Reassignment + Transfer to Confidential Funds		07		06 14 59		Regular		01			

**PRESENT ASSIGNMENT**

31. Organizational Designations				Code		32. Location Of Official Station				Station Code	
DDS/OTR Operations School Covert Training				1172		Washington, D. C.				75003	
33. Dept.-Field		34. Position Title				35. Position No.		36. Serv.		37. Occup. Series	
Dept. - Usfid. Frgn. -	Code	Instructor Operations				1014		GS		1711.50	
38. Grade & Step		39. Salary Or Rate		40. SD		41. Date Of Grade		42. PSI Due		43. Appropriation Number	
11	1	\$ 7,030		D						9-7500-30-018	

**SOURCE OF REQUEST**

A. Requested By (Name And Title)		C. Request Approved By (Signature And Title)	
C/OS		 Director of Training	
B. For Additional Information Call (Name & Telephone Ext.)			
x-3078			

**CLEARANCES**

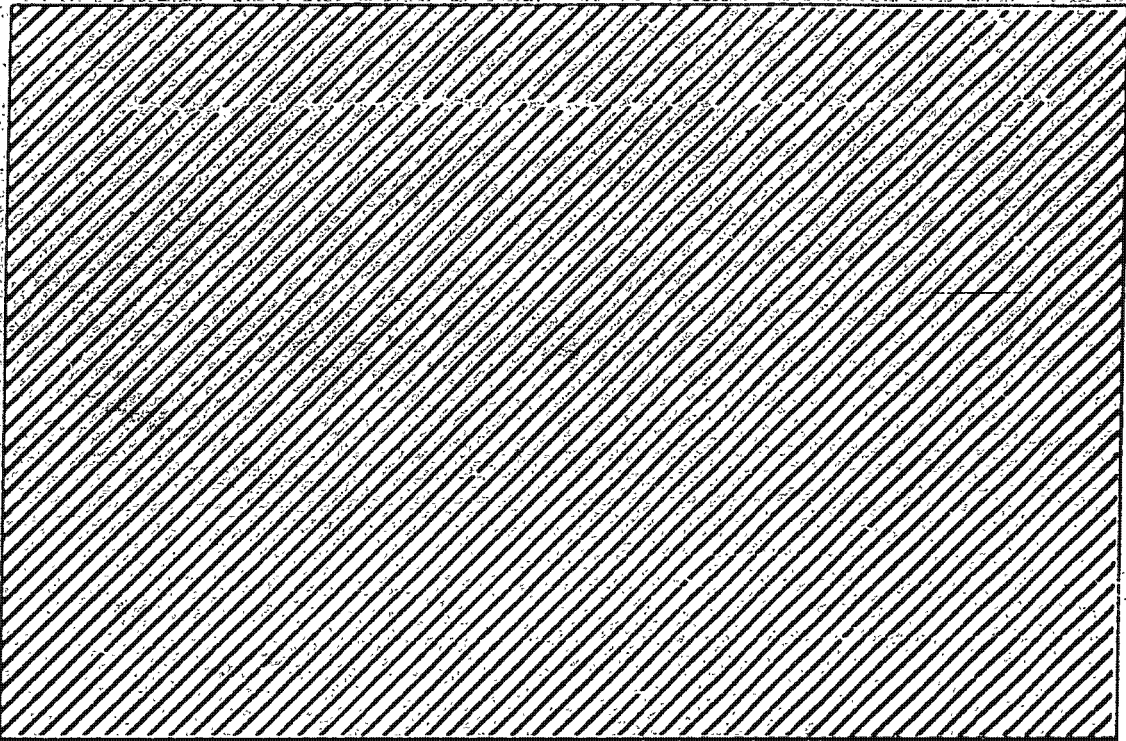
Clearance	Signature	Date	Clearance	Signature	Date
A. Career Board		11/15/58	D. Placement		
B. Pos. Control	CP		E.		
C. Classification			F. Approved By	C. Powell	11 JUN 1959

Remarks: One copy forwarded to UNVOUCHERED Payroll. Two copies forwarded to Security.

3 INCOA: W/17/59

Recorded by  
CSPD

SECRET  
(When Filled In)



NAME OF EMPLOYEE (LAST-FIRST-MIDDLE)	DATE OF BIRTH	CASE OR CLAIM NUMBER
HERALCO, Ealmes	Unk	58-112

There is on file in the Casualty Affairs Branch, Benefits and Casualty Division, Office of Personnel, an Official Disability Claim File on the above named employee for an illness, injury, or death incurred on 1 Oct 57.

This notice should be filed in the employee's Official Personnel Folder as a permanent cross-reference to the Official Disability Claim File.

DATE OF NOTICE	SIGNATURE OF BEO REPRESENTATIVE
21 Sept 58	<i>[Handwritten Signature]</i>

**NOTICE OF OFFICIAL DISABILITY CLAIM FILE**

SECRET

Classify According To Grant

*E-2266* **REQUEST FOR PERSONNEL ACTION** *27 Feb 58*

1. Serial No. <i>12707</i>	2. Name (Last-First-Middle) <i>MR. BALDES N. HIDALGO, Jr.</i>	3. Date Of Birth Mo Da Yr <i>5 27 19</i>	4. Ver. Pref. None-0 Code 5. Pr-1 10 Pr-2 <i>1</i>	5. Sex <i>M</i>	6. GS - EOD Mo Da Yr <i>2 17 58</i>
7. SCD Mo Da Yr <i>7 16 46</i>	8. CSC Retire Yes-1 Code No-2 <i>1</i>	9. CSC Or Other Legal Authority <i>50 USC A 4631</i>	10. Apmt. Affidav. Mo Da Yr <i>3 13 58</i>	11. FEGLI Yes-1 Code No-2 <i>1</i>	12. LCD Mo Da Yr <i>2 17 58</i>
13. LCP Yes-1 Code No-2 <i>2</i>					

PREVIOUS ASSIGNMENT *3-17-58*

14. Organizational Designations	Code	15. Location Of Official Station	Station Code
16. Dept. Field Dept. Code Usfld. Code Frag. Code	17. Position Title	18. Position No.	19. Serv. 20. Occup. Series
21. Grade & Step	22. Salary Or Rate	23. SD	24. Date Of Grade Mo Da Yr
	\$		25. PSI Due Mo Da Yr
26. Appropriation Number			

ACTION

27. Nature Of Action <i>Excepted Appointment</i>	Code <i>13</i>	28. Eff. Date Mo Da Yr <i>3 17 58</i>	29. Type Of Employee <i>Regular</i>	Code <i>C1</i>	30. Separation Data
---	-------------------	---	--	-------------------	---------------------

PRESENT ASSIGNMENT

31. Organizational Designations <i>DDP/WH Branch III Central America Section</i>	Code <i>4613</i>	32. Location Of Official Station <i>Washington, D.C.</i>	Station Code
33. Dept. Field Dept. Code Usfld. Code Frag. Code <i>X</i>	34. Position Title <i>Area Ops Officer</i>	35. Position No. <i># BA-486-11</i>	36. Serv. 37. Occup. Series <i>GS 0136.01</i>
38. Grade & Step <i>11-A</i>	39. Salary Or Rate <i>\$ 6390</i>	40. SD <i>D</i>	41. Date Of Grade Mo Da Yr <i>3 17 58</i>
		42. PSI Due Mo Da Yr <i>9 12 59</i>	43. Appropriation Number <i>8-3500-20</i>

SOURCE OF REQUEST

A. Requested By (Name And Title) <i>[Signature] / Personnel Officer</i>	C. Request Approved By (Signature And Title) <i>[Signature]</i>
B. For Additional Information Call (Name & Telephone Ext) <i>[Signature] X 8242</i>	

CLEARANCES

Clearance	Signature	Date	Clearance	Signature	Date
A. Career Board	<i>[Signature]</i>	<i>3/17/58</i>	D. Placement	<i>[Signature]</i>	<i>3/17/58</i>
B. Post. Control	<i>[Signature]</i>	<i>3/17/58</i>	E.		
C. Classification			F. Approved By	<i>Robert W. Steag</i>	<i>10 MAR 1958</i>

Remarks  
 Subject is presently engaged as a Contract Employee with the WH Division.  
 \* For slotting purposes Only.  
*Approved for [Signature] [Signature] SSA [Signature]*

SECRET

STANDARD FORM 52  
 FORM 52 IS THE PROPERTY OF THE  
 U.S. GOVERNMENT  
 PRINTING OFFICE: 1953 O-57320-4  
 GSA GEN. REG. NO. 27  
 5010-108-01

SECRET

UNVOUCHERED

REQUEST FOR PERSONNEL ACTION

REQUESTING OFFICE: Fill in items 1 through 12 and A through D except 6B and 7 unless otherwise instructed. If applicable, obtain resignation and fill in separation data on reverse.

1. NAME (Mr., Miss, Mrs., One given name, initials, and surname) <b>Mr. Balmes N. HIDALGO, Jr.</b>	2. DATE OF BIRTH <b>27 May 1919</b>	3. REQUEST NO.	4. DATE OF REQUEST <b>8 July 55</b>
5. NATURE OF ACTION REQUESTED: A. PERSONNEL (Specify whether appointment, promotion, separation, etc.) <b>Excepted Appointment</b>		6. EFFECTIVE DATE A. PROPOSED:	7. C.S. OR OTHER LEGAL AUTHORITY
8. POSITION (Specify whether establish, change grade or title, etc.)		B. APPROVED:	

FROM—	9. POSITION TITLE AND NUMBER	TO— <b>I. O. (FI) BAF-277</b>
	10. SERVICE, GRADE, AND SALARY	<b>GS-0130.51-11, \$6390.00 p.a. x</b>
	11. ORGANIZATIONAL DESIGNATIONS	<b>DDP/WH</b>
	11. HEADQUARTERS	
<input type="checkbox"/> FIELD <input type="checkbox"/> DEPARTMENTAL	12. FIELD OR DEPARTMENTAL	<input checked="" type="checkbox"/> FIELD <input type="checkbox"/> DEPARTMENTAL

14. REMARKS (Use reverse if necessary)

**Subject is presently a contract employee with Project HYPOTHESIS.**

15. REQUESTED BY (Name and title) <i>[Signature]</i> C/WH	16. REQUEST APPROVED BY Signature: _____ Title: _____
17. FOR ADDITIONAL INFORMATION (Name and telephone extension) <b>3692</b>	

13. VETERANARY PREFERENCE	14. POSITION CLASSIFICATION ACTION
NONE <input type="checkbox"/> WW <input type="checkbox"/> OTHER <input type="checkbox"/> 5 PT <input type="checkbox"/> 15 POINT <input type="checkbox"/> DISAB. OTHER	NEW <input type="checkbox"/> VICE <input type="checkbox"/> L.A. <input type="checkbox"/> REAL <input type="checkbox"/>

15. SEX <b>M</b>	16. RACE <b>W</b>	17. APPROPRIATION FROM: _____ TO: <b>6-3525-56-051</b>	18. SUBJECT TO C.S. RETIREMENT ACT (YES-NO) <b>Yes</b>	19. DATE OF APPOINTMENT AFFIDAVITS (ACCESSIONS ONLY)	20. LEGAL RESIDENCE <input type="checkbox"/> CLAIMED <input type="checkbox"/> PROVED STATE: _____
---------------------	----------------------	--	---	--	---

21. STANDARD FORM 50 REMARKS

*[Handwritten notes and signatures]*

22. CLEARANCES	INITIAL OR SIGNATURE	DATE	REMARKS
A.			
B. CEIL. OR POS. CONTROL	<i>[Signature]</i>	<b>5 Aug 55</b>	
C. CLASSIFICATION			
D. PLACEMENT OR EMPL.	<b>720</b>	<b>7-20</b>	
E.			


F. APPROVED BY *[Signature]* **7/28/55**



**SECRET**  
(When Filled In)

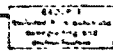
1. PERS. SERIAL NO. <b>027630</b>		BIOGRAPHIC PROFILE (PART I) <b>16 Jul 1976</b>			
2. NAME (Last-First-Middle) <b>HUTTENGO, B. N., Jr.</b>		3. SEX <b>M</b>	4. DATE OF BIRTH <b>27 May 1919</b>	5. LONGEVITY COMP. DATE <b>18 Feb 1976</b>	
6. MARITAL STATUS <b>Married</b>	7. DEPENDENTS (Include Spouse) <b>2</b>	8. YEARS OF BIRTH <b>1914-1892</b>		9. US NATURALIZATION DATES <b>NA Puerto Rico NA</b>	
10. CAREER STATUS <b>Staff</b>	11. MEMBERSHIP <b>Mar 1961</b>	12. OTHER STATUS	13. LAST MED. APT. DATE <b>Jul 1967</b>	14. QUAL. FOR <b>Dept Only</b>	15. QUAL. FOR <b>TOX O/S</b>
16. CURRENT RESERVE STATUS <b>X</b>	17. GRADE	18. ACTIVE DUTY WITH CIA CAT. 1	19. RELEASE TO MIL. SER. CAT. 1	20. DEFERRED CAT. 2	21. EXCLUDED CAT. 3
22. ASSESSMENT DATE <b>None</b>	23. PROFESSIONAL TEST DATE <b>Feb 1958</b>	24. LANGUAGE APITUDE TEST DATE <b>None</b>			
25. EMPLOYMENT HISTORY 1929-43 Military Service, US Army, Col - Infantry 1944-45 Jersey City Quartermaster Depot, Jersey City, NJ - Inspector 1945-47 Francis H. Loggitt Co (Food Wholesaler), NYC - Correspondence Clerk 1948-49 Dept of Justice, FBI, NYC - Contract Agent on a Penetration Project 1948-50 Colonial Trust Co (Bank), NYC - Collections Clerk 1950-51 American Trust Co (Bank), NYC - Collections Clerk 1951-52 Dept of Defense, New York QM Procurement Agency, NYC - Inspector					
26. NON-CIA EDUCATION High School Graduate 1945-46 New York University - Foreign Trade, Business Law					
27. FOREIGN LANGUAGE ABILITIES (Language, Proficiency, Date Tested) Portuguese - R-Interm; W, P, S, U None (Oct 1959); T None - May 1958 Spanish - R High; W Interm; P, S, U Native (Nov 1959); Translator, Interpreter - May 1958					
28. AGENCY SPONSORED TRAINING 1958 Com Party Org & Ops 1958 CI Famil 1958 Info Rptng, Rpts & Rqmts 1958 Operations 1958 Intel Orient 1959 Picks & Locks 1959 Audio Surveill Mgmt 1966 Undetermined Entry (Act)					
29. CIA EMPLOYMENT HISTORY SINCE 13 SEPT 1947 (Personal Actions, Military Orders, and Principal Details)					
EFFECTIVE DATE	POSITION TITLE & OCCUPATIONAL CODE	GRADE	ED	ORGANIZATION & CHRG. TITLE (If any)	LOCATION
Mar 1958	Feb 1952 - Mar 1958, Contract Employee for DDP/WH/Project NYOTHSSES Area Ops Off 0136.01	11	D	DDP/WH-III/Contral America	Hq
Jun 1959	Jan - Feb 1959, TDN Instructor (Ops) 1711.50	11	D	OTR/Ops School/Covers Trng	Hq
Jun 1960	Ops OLS 0136.01	11	D	DDP/WH-4	"
Aug 1961	" " 0136.01	11	D	DDP/WH-4/PI-CI Sec	"
Jan 1962	" " 0136.01	11	D	DDP/WH/Plans & Ops Sec/Sec A	"
Apr 1963	" " 0136.01	11	D	DDP/SAS/US Fld/Forward, Ops Sta	JMWAVE
Dec 1963	" " 0136.01	12	D	" " " " " " " "	"
Apr 1964	" " 0136.01	12	D	DDP/SAS/CS/CS Dev Corp	Hq
Nov 1964	" " 0136.01	12	D	DDP/SAS/CI Staff/Ops	"
May 1965	" " 0136.01	12	D	DDP/WH/CS/CS Staff Ops Br	"
Dec 1965	" " 0136.01	12	D	DDP/WH-2	"
30. DATE REVIEWED <b>22 Jun 1976</b>	31. PROFILE REVIEWED BY <b>hml/abc</b>	32. (THIS IS TO BE REVIEWED & VERIFIED BY EMPLOYEE) <b>16 Jul 1966</b>			

SECRET  
(When Filled In)

PERS. SERIAL NO. 027630		BIOGRAPHIC PROFILE (PART 2)	
NAME (Last-First-Middle) HENDON, R. N., JR.		DATE OF BIRTH 27 May 1919	
23. SUMMARY OF EVALUATIVE REPORTS FOR THE PAST 100 YEARS			
 <p>A black and white portrait of a man with glasses, wearing a suit and tie. Below the portrait is a nameplate that reads "Hendon, R. N., Jr.".</p>			
24. SUMMARY OF CAREER PREFERENCE OUTLINE AND/OR FIELD REASSIGNMENT QUESTIONNAIRE			
25. IDENTITY OF OTHER DOCUMENTS WHICH SHOULD BE REVIEWED IN DETAIL			
26. ADDITIONAL INFORMATION Appreciation 1968 from TSD/AP/CAS for the postal intercept exemplars which are invaluable to that office.			
27. DATE REVIEWED 23 Jun 1969		28. PROFILE REVIEWED BY ems/oda	

**SECRET**  
(When Filled In)

FITNESS REPORT							EMPLOYEE SERIAL NUMBER	
							027630	
<b>SECTION A GENERAL</b>								
1. NAME (Last) (First) (Middle)			2. DATE OF BIRTH	3. SEX	4. GRADE	5. SD		
Jidalgo Balmes N.			05/27/19	M	GS-12	D		
6. OFFICIAL POSITION TITLE				7. OFF/DIV/BR OF ASSIGNMENT		8. CURRENT STATION		
Ops Officer				DDP/WH/2		HQS		
9. CHECK (X) TYPE OF APPOINTMENT				10. CHECK (X) TYPE OF REPORT				
<input type="checkbox"/> CAREER	<input type="checkbox"/> RESERVE	<input type="checkbox"/> TEMPORARY		<input type="checkbox"/> INITIAL		<input type="checkbox"/> REASSIGNMENT SUPERVISOR		
<input checked="" type="checkbox"/> CAREER-PROVISIONAL (See Instructions - Section C)				<input checked="" type="checkbox"/> ANNUAL		<input type="checkbox"/> REASSIGNMENT EMPLOYEE		
<input type="checkbox"/> SPECIAL (Specify):				<input type="checkbox"/> SPECIAL (Specify):				
11. DATE REPORT DUE IN O.P.				12. REPORTING PERIOD (From - to)				
31 January 1969				1 January 1968 - 31 December 1968				
<b>SECTION B PERFORMANCE EVALUATION</b>								
<p><b>W - Weak</b> Performance ranges from wholly inadequate to slightly less than satisfactory. A rating in this category requires positive remedial action. The nature of the action could range from counseling, to further training, to placing on probation, to reassignment or to separation. Describe action taken or proposed in Section C.</p> <p><b>A - Adequate</b> Performance meets all requirements. It is entirely satisfactory and is characterized neither by deficiency nor excellence.</p> <p><b>P - Proficient</b> Performance is more than satisfactory. Desired results are being produced in a proficient manner.</p> <p><b>S - Strong</b> Performance is characterized by exceptional proficiency.</p> <p><b>O - Outstanding</b> Performance is so exceptional in relation to requirements of the work and in comparison to the performance of others doing similar work as to warrant special recognition.</p>								
<b>SPECIFIC DUTIES</b>								
List up to six of the most important specific duties performed during the rating period. Insert rating letter which best describes the manner in which employee performs EACH specific duty. Consider ONLY effectiveness in performance of that duty. All employees with supervisory responsibilities MUST be rated on their ability to supervise (indicate number of employees supervised).								
SPECIFIC DUTY NO. 1							RATING LETTER	
Payroll Desk Case Officer for [redacted] FI operations. Prepares cables and dispatches to [redacted] and other Stations and internal Headquarters correspondence.							P	
SPECIFIC DUTY NO. 2							RATING LETTER	
Conducts required coordination with other offices within the agency.							P	
SPECIFIC DUTY NO. 3							RATING LETTER	
Supervises and/or maintains files and regulates indexing relating to his cases.							P	
SPECIFIC DUTY NO. 4							RATING LETTER	
SPECIFIC DUTY NO. 5							RATING LETTER	
SPECIFIC DUTY NO. 6							RATING LETTER	
<b>OVERALL PERFORMANCE IN CURRENT POSITION</b>								
Take into account everything about the employee which influences his effectiveness in his current position such as performance of specific duties, productivity, conduct on job, cooperativeness, pertinent personal traits or habits, and particular limitations or talents. Based on your knowledge of employee's overall performance during the rating period, place the letter in the rating box corresponding to the statement which most accurately reflects his level of performance.							RATING LETTER	
							P	



SECRET  
(When Filled In)

SECTION C

NARRATIVE COMMENTS

Indicate significant strengths or weaknesses demonstrated in current position keeping in proper perspective their relationship to overall performance. State suggestions made for improvement of work performance. Give recommendations for training. Comment on foreign language competence, if required for current position. Amplify or explain ratings given in Section B to provide basis for determining future personnel action. Point out performance of managerial or supervisory duties and cost consciousness in the use of personnel, space, equipment and funds. Must be completed even if applicable. If extra space is needed to complete Section C, attach a separate sheet of paper.

Mr. Hidalgo is a man of unusual background even in our unusual organization. This background undoubtedly affords him qualifications for our work, but nevertheless, on the professional level he suffers from disadvantages as well--overcoming some but not others. He is not well-educated in a formal sense, and in our world of words is not adequately equipped to prepare finished written correspondence. He has difficulty in organizing his work systematically, thus at times, giving an impression that the preparation has not been thorough--which might not really have been true.

On the other hand, Mr. Hidalgo has the advantage of native fluency in Spanish and an obvious understanding of the Latin thinking process and culture. He is broadly experienced in operations, not only as a case officer but as an actual agent himself, having served four years as a Bureau penetration of the CPUSA. He is operationally imaginative and unquestionably possesses the ingenuity and courage to translate ideas into action. In this respect, however, his efforts must be channeled and selectivity exercised. On the [redacted] Desk this officer provides the valuable service of operational history and continuity; he served six years [redacted] and has been on the desk for three.

Continued

SECTION D

CERTIFICATION AND COMMENTS

1.

BY EMPLOYEE

I CERTIFY THAT I HAVE SEEN SECTIONS A, B, AND C OF THIS REPORT

DATE

9 Jan 1969

SIGNATURE OF EMPLOYEE

BY SUPERVISOR

2. MONTHS EMPLOYEE HAS GIVEN UNDER MY SUPERVISION

4

IF THIS REPORT HAS NOT BEEN SHOWN TO EMPLOYEE, GIVE EXPLANATION

DATE

9 January 1969

OFFICIAL TITLE OF SUPERVISOR

C/WII/2/P

SIGNATURE

3. COMMENTS OF REVIEWING OFFICIAL

Mr. Hidalgo is an experienced and well qualified operations officer, and it is indeed unfortunate that there are medical problems which do not allow him to be assigned overseas. Since Mr. Hidalgo cannot be assigned overseas, I too endorse his desire to be assigned to OTR or to another assignment of his choice.

DATE

9 JAN 1969

OFFICIAL TITLE OF REVIEWING OFFICIAL

C/WII/2

TYPED OR PRINTED NAME AND SIGNATURE

Edwin M. Terrell

SECRET

SECRET

SECTION C Continued

Hidalgo, Balmes N.

Mr. Hidalgo is a gregarious uncomplicated person, generally pleasant, and generous in his instincts--but not entirely without his quixotic side--and one whose natural Latin emotionality has been intensified by a life of experiences outside the norm, e.g. years as a CP penetration, air crashes, war wounds, etc.

This officer is aware that his intellectual background and medical debilities are obstructions to his advance. Understandably, he has developed outside interests, apparently as compensation. Expectedly, his attitudes at times so reflect.

In sum, Mr. Hidalgo serves a satisfactory function on the [redacted] Desk and no doubt could continue to perform so indefinitely, but in view of his limitations in a desk-bound situation and the medical restrictions, both of which will continue to inhibit his advance in his present component, this supervisor endorses Mr. Hidalgo's desire to be considered for transfer to another component, namely OTR (specifically covert training), where his attributes would likely come more directly into play. He has the operational experience, competency in a foreign language, an outgoing personality, and experience in lecturing and teaching.\* Finally, regardless of the shortcomings reflected in this evaluation, the grading officer finds much to admire in Mr. Hidalgo personally.

\*Should a suitable opening in that field be unavailable, it is felt there would be merit also in considering Mr. Hidalgo's other stated interests, i.e., the technical interrogation section of the Office of Security or OO Contacts Division.

SECRET

**SECRET**  
(When Filled In)

FITNESS REPORT				EMPLOYEE SERIAL NUMBER	
				027630	
<b>SECTION A GENERAL</b>					
1. NAME (Last) (First) (Middle) <b>HIDALGO, Balnes N., Jr.</b>			2. DATE OF BIRTH <b>27 May 1919</b>	3. SEX <b>M</b>	4. GRADE <b>GS-12</b>
5. OFFICIAL POSITION TITLE <b>Ops Officer</b>			7. OFF/DIV/BR OF ASSIGNMENT <b>DDP/WH/2</b>	6. CURRENT STATION <b>Headquarters</b>	
9. CHECK (X) TYPE OF APPOINTMENT			10. CHECK (X) TYPE OF REPORT		
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
CAREER	RESERVE	TEMPORARY	INITIAL	ANNUAL	REASSIGNMENT SUPERVISOR
CAREER-PROVISIONAL (See Instructions - Section C)			REASSIGNMENT EMPLOYEE		
SPECIAL (Specify):			SPECIAL (Specify):		
11. DATE REPORT DUE IN O.P.			12. REPORTING PERIOD (From - to) <b>13700 hrs by OP ac 12-66</b>		
<b>SECTION B PERFORMANCE EVALUATION:</b>					
<p><b>W - Weak</b> Performance ranges from wholly inadequate to slightly less than satisfactory. A rating in this category requires positive remedial action. The nature of the action could range from counseling, to further training, to placing on probation, to reassignment, or to separation. Describe action taken or proposed in Section C.</p> <p><b>A - Adequate</b> Performance meets all requirements. It is entirely satisfactory and is characterized neither by deficiency nor excellence.</p> <p><b>P - Proficient</b> Performance is more than satisfactory. Desired results are being produced in a proficient manner.</p> <p><b>S - Strong</b> Performance is characterized by exceptional proficiency.</p> <p><b>O - Outstanding</b> Performance is so exceptional in relation to requirements of the work and in comparison to the performance of others doing similar work as to warrant special recognition.</p>					
<b>SPECIFIC DUTIES</b>					
List up to six of the most important specific duties performed during the rating period. Insert rating letter which best describes the manner in which employee performs EACH specific duty. Consider ONLY effectiveness in performance of that duty. All employees with supervisory responsibilities MUST be rated on their ability to supervise (indicate number of employees supervised).					
SPECIFIC DUTY NO. 1 <b>Responsible for all FI/CI Projects for the Desk</b>					RATING LETTER <b>S</b>
SPECIFIC DUTY NO. 2 <b>Initiates, prepares and coordinates all operational communications to the field on FI/CI matters</b>					RATING LETTER <b>P</b>
SPECIFIC DUTY NO. 3 <b>Prepares project renewals, studies and papers on FI/CI matters</b>					RATING LETTER <b>P</b>
SPECIFIC DUTY NO. 4 <b>Translates Spanish language material for the Branch</b>					RATING LETTER <b>O</b>
SPECIFIC DUTY NO. 5 <b>Coordinates FI/CI matters for the Desk with other Hqs components</b>					RATING LETTER <b>S</b>
SPECIFIC DUTY NO. 6 <b>Occasionally handles visiting indigenous assets</b>					RATING LETTER <b>S</b>
<b>OVERALL PERFORMANCE IN CURRENT POSITION</b>					
<p><b>31 MAR 1967</b></p> <p>Take into account everything about the employee which influences his effectiveness in his current position such as performance of specific duties, productivity, conduct on job, cooperativeness, pertinent personal traits or habits, and particular limitations or talents. Based on your knowledge of employee's overall performance during the rating period, place the letter in the rating box corresponding to the statement which most accurately reflects his level of performance.</p>					RATING LETTER <b>S</b>

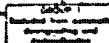
SECRET

SECTION C		NARRATIVE COMMENTS	
<p>Indicate significant strengths or weaknesses demonstrated in current position keeping in proper perspective their relationship to overall performance. State suggestions made for improvement of work performance. Give recommendations for training. Comment on foreign language competence, if required for current position. Amplify or explain ratings given in Section B, to provide basis for determining future personnel action. Manner of performance of managerial or supervisory duties must be described, if applicable.</p>			
<p>Comment by Mr. Tsikerdanos, previous supervisor: 15181 '67</p> <p>Mr. Hidalgo is a very capable case officer who is more suited to a field position. He is adept at handling indigenous personnel and has a keen operational mind. He is good at grasping operational leads but is not a capable writer. He has trouble expressing himself on paper. His Spanish language capability is a decided asset to the Branch. A longstanding illness has limited his effectiveness at the Desk. He is cost conscious and has no supervisory responsibilities.</p>			
<p>Comments by Present Supervisor:</p> <p>I concur in the above estimate of Mr. Hidalgo's operational capabilities. During the months (Oct 1966 - March 1967) I have worked with Mr. Hidalgo I have not found his health to be a factor in his performance of his duties.</p> <p style="text-align: right;">Ken Knaus</p>			
SECTION D		CERTIFICATION AND COMMENTS	
1. BY EMPLOYEE			
I CERTIFY THAT I HAVE SEEN SECTIONS A, B, AND C OF THIS REPORT			
DATE	SIGNATURE OF EMPLOYEE		
10 March 67	<i>Edwin M. Terrell</i>		
2. BY SUPERVISOR			
MONTHS EMPLOYEE HAS BEEN UNDER MY SUPERVISION	IF THIS REPORT HAS NOT BEEN SHOWN TO EMPLOYEE, GIVE EXPLANATION		
11			
DATE	OFFICIAL TITLE OF SUPERVISOR	TYPED OR PRINTED NAME AND SIGNATURE	
9 MAR 1967	Formerly C/NH/2/P Present C/NH/2/P	<i>Edward J. Tsikerdanos</i> Ken Knaus	
3. BY REVIEWING OFFICIAL			
COMMENTS OF REVIEWING OFFICIAL			
<p>Mr. Hidalgo's health caused him to be absent from his duties several times during the first part of 1966 but these absences were for a limited period. From my observation, his health has not presented a serious problem to the performance of his duties.</p> <p>Several times during the absence of Mr. Tsikerdanos in the year 1966 Mr. Hidalgo was the acting desk officer. His performance was most satisfactory, and his supervision of the other desk employees, albeit for a limited period, was fully satisfactory.</p>			
DATE	OFFICIAL TITLE OF REVIEWING OFFICIAL	TYPED OR PRINTED NAME AND SIGNATURE	
9 MAR 67	C/NH/2	<i>Edwin M. Terrell</i> Edwin M. Terrell	

SECRET

**SECRET**  
(When Filled In)

FITNESS REPORT						EMPLOYEE SERIAL NUMBER	
						027630	
<b>SECTION A GENERAL</b>							
1. NAME (Last) (First) (Middle) MUNIZO, Palmes A., Jr.			2. DATE OF BIRTH 27 May 1919	3. SEX M	4. GRADE GS-12	5. SD D	
6. OFFICIAL POSITION TITLE Desk Officer			7. OFF/DIV/BR OF ASSIGNMENT DD//T/C		8. CURRENT STATION Headquarters		
9. CHECK (X) TYPE OF APPOINTMENT				10. CHECK (X) TYPE OF REPORT			
<input checked="" type="checkbox"/> CAREER		<input type="checkbox"/> RESERVE		<input type="checkbox"/> TEMPORARY		<input type="checkbox"/> INITIAL	
<input type="checkbox"/> CAREER-PROVISIONAL (See Instructions - Section C)		<input type="checkbox"/> SPECIAL (Specify):		<input checked="" type="checkbox"/> ANNUAL		<input checked="" type="checkbox"/> REASSIGNMENT SUPERVISOR	
<input type="checkbox"/> SPECIAL (Specify):		<input type="checkbox"/> SPECIAL (Specify):		<input type="checkbox"/> REASSIGNMENT EMPLOYEE			
11. DATE REPORT DUE IN O.P.				12. REPORTING PERIOD (From - to) 16 Mar - 30 October 1955			
<b>SECTION B PERFORMANCE EVALUATION</b>							
<p><b>W - Weak</b> Performance ranges from wholly inadequate to slightly less than satisfactory. A rating in this category requires positive remedial action. The nature of the action could range from counseling, to further training, to placing on probation, to reassignment or to separation. Describe action taken or proposed in Section C.</p> <p><b>A - Adequate</b> Performance meets all requirements. It is entirely satisfactory and is characterized neither by deficiency nor excellence.</p> <p><b>P - Proficient</b> Performance is more than satisfactory. Desired results are being produced in a proficient manner.</p> <p><b>S - Strong</b> Performance is characterized by exceptional proficiency.</p> <p><b>O - Outstanding</b> Performance is so exceptional in relation to requirements of the work and in comparison to the performance of others doing similar work as to warrant special recognition.</p>							
<b>SPECIFIC DUTIES</b>							
List up to six of the most important specific duties performed during the rating period. Insert rating letter which best describes the manner in which employee performs EACH specific duty. Consider ONLY effectiveness in performance of that duty. All employees with supervisory responsibilities MUST be rated on their ability to supervise (indicate number of employees supervised).							
SPECIFIC DUTY NO. 1 Headquarters desk officer responsible for the support of Miami Station CI/CE activities and operations.						RATING LETTER P	
SPECIFIC DUTY NO. 2 Advisor to various components of the WH and WE Divisions on Cuban operations with specific reference to the Cuban Security Intelligence Service, organization, modus operandi and						RATING LETTER S	
SPECIFIC DUTY NO. 3 Briefing representatives of personnel foreign liaison services and selected agents visiting in Washington on the Cuban Security and Intelligence Services and his own unique experience in the Communist Party.						RATING LETTER S	
SPECIFIC DUTY NO. 4 Translator/interpreter: Served as consultant to WH Division on Cuban Spanish.						RATING LETTER S	
SPECIFIC DUTY NO. 5						RATING LETTER	
SPECIFIC DUTY NO. 6						RATING LETTER	
<b>OVERALL PERFORMANCE IN CURRENT POSITION</b>							
Take into account everything about the employee which influences his effectiveness in his current position such as performance of specific duties, productivity, conduct on job, cooperativeness, pertinent personal traits or habits, and particular limitations or talents. Based on your knowledge of employee's overall performance during the rating period, place the letter in the rating box corresponding to the statement which most accurately reflects his level of performance.						RATING LETTER S	
4 JAN 1956							





SECRET

(When Filled In)

SECTION C

NARRATIVE COMMENTS

Indicate significant strengths or weaknesses demonstrated in current position keeping in proper perspective their relationship to overall performance. State suggestions made for improvement of work performance. Give recommendations for training. Comment on foreign language competence, if required for current position. Amplify or explain ratings given in Section B by providing basis for determining future personnel action. Managerial performance of managerial or supervisory duties must be described, if applicable.

Mr. Hidalgo is an able intelligence officer, <sup>Office of</sup> devoted to his profession and selfless in his desire to be of service to the Government. Although he has suffered ill health in recent years, he was insistent that he be among the first to be sent to the Dominican Republic when the crisis occurred.

An intense person, Mr. Hidalgo is industrious, works well under pressure and sets high standards for his performance. Because he is intent on getting things done, he is occasionally hasty in judgment and in written presentation of the results of his research and conclusions. He is perceptive, quickly accepts suggestions and offers counter-proposals with cogent argument. Mr. Hidalgo was not in a supervisory capacity. He was cost conscious; always endeavoring to be conservative where possible.

He is an effective and cooperative member of an office, ready to assume responsibility and to help his colleagues. Thanks to his unique experience on the Cuban target, he has wide knowledge of the Cuban problem and is, in fact, an expert on the Cuban Security and Intelligence Services.

SECTION D

CERTIFICATION AND COMMENTS

1. BY EMPLOYEE

I CERTIFY THAT I HAVE SEEN SECTIONS A, B, AND C OF THIS REPORT

DATE  
9 December 1965

SIGNATURE OF EMPLOYEE  
*[Handwritten Signature]*

2. BY SUPERVISOR

MONTHS EMPLOYEE HAS BEEN UNDER MY SUPERVISION  
8 months

IF THIS REPORT HAS NOT BEEN SHOWN TO EMPLOYEE, GIVE EXPLANATION

DATE  
9 December 1965

OFFICIAL TITLE OF SUPERVISOR  
C/WH/C/MO/FI-CI

TYPED OR PRINTED NAME AND SIGNATURE  
*[Handwritten Signature]*  
Susan L. Darling

1. BY REVIEWING OFFICIAL

COMMENTS OF REVIEWING OFFICIAL

I concur with the supervisor's assessment of Mr. Hidalgo with ~~an~~ exception to the statement that Subject works well under pressure. He is indeed an intense person and, under great pressure, his involvement affects his performance; and even more important, it has a very bad effect on his health. With this consideration noted, the undersigned thinks very highly of Mr. Hidalgo and would be pleased to be associated with him again.

DATE  
9 December 1965

OFFICIAL TITLE OF REVIEWING OFFICIAL  
C/WH/C/MO


TYPED OR PRINTED NAME AND SIGNATURE  
Walter T. Cini *[Handwritten Signature]*

SECRET

SECRET  
(When Filled In)

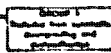
1. PERSONAL SERIAL NO. 27630		BIOGRAPHIC PROFILE (PART I) SCDF: 16 Jul 1946			
2. NAME (Last-First-Middle) W. H. C. Williams, Jr.		3. SEX M	4. DATE OF BIRTH May 1919	5. LONGEVITY COMP. DATE 17 Mar 1958	
6. MARITAL STATUS Married	7. DEPENDENT(S) (Specify: <input type="checkbox"/> None <input type="checkbox"/> Other)	8. NO. CHILDREN 3	9. YEARS OF BIRTH 1927-1945-1950		10. US NATURALIZATION DATE(S) NA Puerto Rico NA
11. CURRENT RESERVE STATUS None	12. MEMBERSHIP None	13. OTHER STATUS Pending	14. LAST REG. DUTY FOR Sep 1962	15. DUTY FOR Dept Only	16. TDY O/S
17. ASSESSMENT DATE None	18. PROFESSIONAL TEST DATE Feb 1958	19. LANGUAGE APTITUDE TEST DATE None			
20. EMPLOYMENT HISTORY 1940-43 Military Service, US Army, Cpl - Infantry 1944-45 Jersey City Quartermaster Dept, Jersey City, NJ - Inspector 1945-47 Francis H. Lippitt Co (Food Wholesaler), NYC - Correspondence Clerk 1946-49 Dept of Justice, FBI, NYC - Contract Agent on a Penetration Project 1948-50 Colonial Trust Co (Bank), NYC - Collections Clerk 1950-51 American Trust Co (Bank), NYC - Collections Clerk 1951 Dept of Defense, New York QM Procurement Agency, NYC - Inspector					
21. NON-CIA EDUCATION 1945-46 New York University - Foreign Trade, Business Law					
22. FOREIGN LANGUAGE ABILITIES (Language, Proficiency, Date Tested)		Portuguese - R Interim; W, P, S, U Zero (Oct 1959); T None - May 1958 Spanish - R High; W Interim; P, S, U Native (Nov 1959); Translate, Interpret - May 1958			
23. AGENCY SPONSORED TRAINING 1958 Comm Party Org & Ops      1958 Intel Orient 1958 CI Famil                      1959 Picks & Locks 1958 Info Rptng, Rpts & Rqmts      1959 Audio Surveil Mgmt 1958 Operations					
24. CIA EMPLOYMENT HISTORY SINCE 15 SEPT 1947 (Personnel Actions, Military Orders, and Principal Details)					
EFFECTIVE DATE	POSITION TITLE & OCCUPATIONAL CODE	GRADE	SD	ORGANIZATION & DEPT. TITLE (If any)	LOCATION
Mar 1958	Feb 1952 - Mar 1958, Contract Employee for DDP/WA/Project HYPOTHESIS Area Ops Off. 0136.01	11	D	DDP/WA-III/Central America	Hq
Jun 1959	Jan - Feb 1959, TDY Mexico and Guatemala				
Jun 1959	Instructor (Ops) 1711.50	11	D	OTR/Ops School/Covert Trng	Hq
Jun 1960	Ops Off 0136.01	11	D	DDP/WA-4	"
Aug 1961	" " 0136.01	11	D	DDP/WA-4/FI-CI Sec	"
Jan 1962	" " 0136.01	11	D	DDP/WA/Plans & Ops Stf/Sec A	"
Apr 1963	" " 0136.01	11	D	DDP/SAS/US Fid/forward Ops Sta	JMWAVE
25. DATE REVIEWED 24 Oct 1963	26. PROFILE REVIEWED BY OP/POD/OA/WHS/rwh	27. ITEMS 1-10 REVIEWED & VERIFIED BY EMPLOYEE 9 Feb 1960			

SECRET  
(When Filled In)

PERM. SERIAL NO. 27630	BIOGRAPHIC PROFILE (PART 2)	
NAME (Last-First-Middle) HIDALGO, Balnes Nieves, Jr.	DATE OF BIRTH May 1919	
 A black and white portrait of a man with glasses, wearing a suit and tie. Below the portrait is a nameplate that reads "HIDALGO B N JR".		
24. SUMMARY OF CAREER PREFERENCE OUTLINE AND/OR FIELD REASSIGNMENT QUESTIONNAIRE		
25. IDENTITY OF OTHER DOCUMENTS WHICH SHOULD BE REVIEWED IN DETAIL		
26. ADDITIONAL INFORMATION		
27. DATE REVIEWED	28. PROFILE REVIEWED BY OP/POD/SAB	

**SECRET**  
(When Filled In)

FITNESS REPORT				EMPLOYEE SERIAL NUMBER			
201 <i>med</i>				027630			
<b>SECTION A</b>				<b>GENERAL</b>			
1. NAME (Last) (First) (Middle)			2. DATE OF BIRTH	3. SEX	4. GRADE	5. SD	
HIDALGO, BALMES			27 May 1919	M	GS-11	D	
6. OFFICIAL POSITION TITLE			7. OFF/DIV/DR OF ASSIGNMENT		8. CURRENT STATION		
Ops Officer			DDP, WH P&O SEC. A.				
9. CHECK (X) TYPE OF APPOINTMENT				10. CHECK (X) TYPE OF REPORT			
<input type="checkbox"/> CAREER	<input type="checkbox"/> RESERVE	<input type="checkbox"/> TEMPORARY		<input type="checkbox"/> INITIAL	<input type="checkbox"/> REASSIGNMENT SUPERVISOR		
<input type="checkbox"/> CAREER-PROVISIONAL (See instructions - Section C)				<input checked="" type="checkbox"/> ANNUAL	<input type="checkbox"/> REASSIGNMENT EMPLOYEE		
SPECIAL (Specify):				SPECIAL (Specify):			
11. DATE REPORT DUE IN O.P.				12. REPORTING PERIOD (From to)			
30 October 1962				17 Jan 62 - 30 Sep 62			
<b>SECTION B</b>				<b>PERFORMANCE EVALUATION</b>			
<p><b>W - Weak</b> Performance ranges from wholly inadequate to slightly less than satisfactory. A rating in this category requires positive remedial action. The nature of the action could range from counseling, to further training, to placing on probation, to reassignment or to separation. Describe action taken or proposed in Section C.</p> <p><b>A - Adequate</b> Performance meets all requirements. It is entirely satisfactory and is characterized neither by deficiency nor excellence.</p> <p><b>P - Proficient</b> Performance is more than satisfactory. Desired results are being produced in a proficient manner.</p> <p><b>S - Strong</b> Performance is characterized by exceptional proficiency.</p> <p><b>O - Outstanding</b> Performance is so exceptional in relation to requirements of the work and in comparison to the performance of others doing similar work as to warrant special recognition.</p>							
<b>SPECIFIC DUTIES</b>							
List up to six of the most important specific duties performed during the rating period. Insert rating letter which best describes the manner in which employee performs EACH specific duty. Consider ONLY effectiveness in performance of that duty. All employees with supervisory responsibilities MUST be rated on their ability to supervise (indicate number of employees supervised).							
SPECIFIC DUTY NO. 1						RATING LETTER	
Responsible for initiation and development of WH Division durable assets program.						P	
SPECIFIC DUTY NO. 2						RATING LETTER	
Collate and maintain files on espionage laws of LA countries.						P	
SPECIFIC DUTY NO. 3						RATING LETTER	
Served as interpreter and translator for Division LA contacts.						P	
SPECIFIC DUTY NO. 4						RATING LETTER	
Coordinated with Branch 1 of WHD on FI and CI matters.						P	
SPECIFIC DUTY NO. 5						RATING LETTER	
Gives lectures as guest instructor to students attending School of International Communism.						S	
SPECIFIC DUTY NO. 6						RATING LETTER	
<b>OVERALL PERFORMANCE IN CURRENT POSITION</b>							
Take into account everything about the employee which influences his effectiveness in his current position such as performance of specific duties, productivity, conduct on job, cooperativeness, pertinent personal traits or habits, and particular limitations or talents. Based on your knowledge of employee's overall performance during the rating period, place the letter in the rating box corresponding to the statement which most accurately reflects his level of performance.							RATING LETTER
							P



**SECRET**

(When Filled In)

**SECTION C NARRATIVE COMMENTS**

Indicate significant strengths or weaknesses demonstrated in current position keeping in proper perspective their relationship to overall performance. State suggestions made for improvement of work performance. Give recommendations for training. Give merit on foreign language competence, if required for current position. Amplify or explain ratings given in Section B to provide basis for determining future personnel action. Manner of performance of managerial or supervisory duties must be described, if applicable.

Mr. Hidalgo joined WH/PO/A in November 1961 and took up those responsibilities listed above. However, Mr. Hidalgo's performance of duties was interrupted on two occasions by serious illness, 9-27 March and 15 April-31 May 1962. He was twice hospitalized. From 25 June-9 August 1962, Mr. Hidalgo was on TDY for WH/3 as escort officer for Latin American trainees. Although beset by health and other personal problems, Mr. Hidalgo seized upon each new assignment with his customary energy. He proved particularly adept in working as interpreter and escort officer for Latin American trainees, and demonstrated high interest and proven competence in counterintelligence work. His excellent memory and quick perception were distinct assets in these undertakings.

It is recommended, however, that Mr. Hidalgo's next assignment not carry responsibility for submission of finished papers or staff studies, but be one entailing duties commensurate with his ability to work effectively with indigenous personnel and to pursue CI leads through records investigation.

**SECTION D CERTIFICATION AND COMMENTS**

**1. BY EMPLOYEE**

I CERTIFY THAT I HAVE SEEN SECTIONS A, B, AND C OF THIS REPORT

DATE <i>18 Sept 62</i>	SIGNATURE OF EMPLOYEE <i>Salvador Hidalgo</i>
---------------------------	--

**2. BY SUPERVISOR**

MONTHS EMPLOYEE HAS BEEN UNDER MY SUPERVISION	IF THIS REPORT HAS NOT BEEN SHOWN TO EMPLOYEE, GIVE EXPLANATION

DATE 18 September 1962	OFFICIAL TITLE OF SUPERVISOR C/WH/PO/A	TYPED OR PRINTED NAME AND SIGNATURE
---------------------------	---	-------------------------------------

**3. BY REVIEWING OFFICIAL**

COMMENTS OF REVIEWING OFFICIAL

I have had insufficient personal contact with Subject to make any meaningful comments.

DATE 13 September 1962	OFFICIAL TITLE OF REVIEWING OFFICIAL C/WH/OPS	TYPE	RE
---------------------------	--	------	----

**SECRET**  
(When Filled In)

FITNESS REPORT				EMPLOYEE SERIAL NUMBER <b>027630</b>					
<b>SECTION A GENERAL</b>									
1. NAME (Last) <b>HIDALGO</b>		(First) <b>Baltes</b>		(Middle) <b>N., Jr.</b>					
2. DATE OF BIRTH <b>27 May 1919</b>		3. SEX <b>Male</b>		4. GRADE <b>GS-11</b>					
5. SERVICE DESIGNATION <b>D</b>		6. OFFICIAL POSITION TITLE <b>Operations Officer</b>		7. OFF. DIV./BR. OF ASSIGNMENT <b>DDP/WH, Rm. 4, D.C.</b>					
8. CAREER STAFF STATUS			9. TYPE OF REPORT						
MOV. ELIGIBLE	MEMBER	DEFERRED	INITIAL	REASSIGNMENT/SUPERVISOR					
PENDING	DECLINED	DENIED	<input checked="" type="checkbox"/> ANNUAL	REASSIGNMENT/EMPLOYEE					
10. DATE REPORT DUE IN O.P. <b>31 October 1961</b>		11. REPORTING PERIOD <b>Oct60 To 30Sep61</b>		SPECIAL (Specify)					
<b>SECTION B EVALUATION OF PERFORMANCE OF SPECIFIC DUTIES</b>									
List up to six of the most important specific duties performed during the rating period. Insert rating number which best describes the manner in which employee performs EACH specific duty. Consider ONLY effectiveness in performance of that duty. All employees with supervisory responsibilities MUST be rated on their ability to supervise (indicate number of employees supervised).									
1 - Unsatisfactory	2 - Barely adequate	3 - Acceptable	4 - Competent	5 - Excellent	6 - Superior	7 - Outstanding			
SPECIFIC DUTY NO. 1 <b>Hqs. C.O. for 3 major CI/PI Projects-at one time comprising 301 Agents. Originates operational traffic, Support traffic and maintains records and files.</b>		RATING NO. <b>5</b>	SPECIFIC DUTY NO. 4 <b>Responsible for spotting, interviewing and recruiting of Cuban students in the U. S. for return to Cuba for operational purposes.</b>		RATING NO. <b>5</b>				
SPECIFIC DUTY NO. 2 <b>Hqs. C.O. for 8 unilateral independent Agents, including originating operational and Support traffic, and maintaining proper records and files.</b>		RATING NO. <b>4</b>	SPECIFIC DUTY NO. 5		RATING NO.				
SPECIFIC DUTY NO. 3 <b>Interviewing, briefing and debriefing Spanish only speaking Agents and contacts for all operational Sections of the Branch.</b>		RATING NO. <b>6</b>	SPECIFIC DUTY NO. 6		RATING NO.				
<b>SECTION C EVALUATION OF OVERALL PERFORMANCE IN CURRENT POSITION</b>									
Take into account everything about the employee which influences his effectiveness in his current position - performance of specific duties, productivity, conduct on job, cooperativeness, pertinent personal traits or habits, particular limitations or talents. Based on your knowledge of employee's overall performance during the rating period, place the rating number in the box corresponding to the statement which most accurately reflects his level of performance:									
1 - Performance in many important respects fails to meet requirements. 2 - Performance meets most requirements but is deficient in one or more important respects. 3 - Performance clearly meets basic requirements. 4 - Performance clearly exceeds basic requirements. 5 - Performance in every important respect is superior. 6 - Performance in every respect is outstanding.					RATING NO. <b>5</b>				
<b>SECTION D DESCRIPTION OF THE EMPLOYEE</b>									
In the rating boxes below, check (X) the degree to which each characteristic applies to the employee:									
1 - Least possible degree	2 - Limited degree	3 - Normal degree	4 - Above average degree	5 - Outstanding degree					
CHARACTERISTICS			NOT APPLICABLE	NOT OBSERVED	RATING				
					1	2	3	4	5
GETS THINGS DONE								<input checked="" type="checkbox"/>	
RESOURCEFUL								<input checked="" type="checkbox"/>	
ACCEPTS RESPONSIBILITIES								<input checked="" type="checkbox"/>	
CAN MAKE DECISIONS ON HIS OWN WHEN NEED ARISES								<input checked="" type="checkbox"/>	
DOES HIS JOB WITHOUT STRONG SUPPORT								<input checked="" type="checkbox"/>	
FACILITATES SMOOTH OPERATION OF HIS OFFICE								<input checked="" type="checkbox"/>	
WRITES EFFECTIVELY							<input checked="" type="checkbox"/>		
SECURITY CONSCIOUS							<input checked="" type="checkbox"/>		
THINKS CLEARLY								<input checked="" type="checkbox"/>	
DISCIPLINE IN ORIGINATING, MAINTAINING AND DISPOSING OF RECORDS								<input checked="" type="checkbox"/>	
OTHER (Specify):									
SEE SECTION "E" ON REVERSE SIDE									

SECRET

(When Filled In)

**SECTION E NARRATIVE DESCRIPTION OF MANNER OF JOB PERFORMANCE**

State strengths and weaknesses demonstrated in current position. Indicate suggestions made to employee for improvement of his work. Give recommendations for his training. Describe, if appropriate, his potential for development and for assuming greater responsibilities. Amplify or explain, if appropriate, ratings given in SECTIONS B, C, and D to provide the best basis for determining future personnel actions.

Mr. Hidalgo has done a fine job during the reporting period, while assigned to the CI Section of the Branch when it was in its most active period of buildup and operations. The manner in which he accepted any assignment is unusual and he was often working under pressure. During the period, he was on several temporary duty trips in connection with operational activities, which he completed very well.

He has a talent for getting along with and understanding Latin Americans, and with his fluent Spanish language capability, he has performed in a commendable manner. While Mr. Hidalgo has never shunned responsibility, his assignment did entail the delegation of extensive responsibility. It is the feeling of the Rating Officer that he should be given the opportunity for greater responsibility, and training, which will qualify him for a supervisory role. After that, he should be qualified in all respects for promotion to GS-12.

**SECTION F CERTIFICATION AND COMMENTS**

1. BY EMPLOYEE

I certify that I have seen Sections A, B, C, D and E of this Report.

DATE SIGNATURE OF EMPLOYEE

2. BY SUPERVISOR

MONTHS EMPLOYEE HAS BEEN UNDER MY SUPERVISION 11 IF THIS REPORT HAS NOT BEEN SHOWN TO EMPLOYEE, GIVE EXPLANATION Subject hospitalized.

IF REPORT IS NOT BEING MADE AT THIS TIME, GIVE REASON.

EMPLOYEE UNDER MY SUPERVISION LESS THAN 90 DAYS REPORT MADE WITHIN LAST 90 DAYS OTHER (Specify):

DATE 20 March 62 OFFICIAL TITLE OF SUPERVISOR D/Chief, WH/4/CI TYPED OR PRINTED NAME AND SIGNATURE

3. BY REVIEWING OFFICIAL

- I WOULD HAVE GIVEN THIS EMPLOYEE ABOUT THE SAME EVALUATION.
I WOULD HAVE GIVEN THIS EMPLOYEE A HIGHER EVALUATION.
I WOULD HAVE GIVEN THIS EMPLOYEE A LOWER EVALUATION.
I CANNOT JUDGE THESE EVALUATIONS. I AM NOT SUFFICIENTLY FAMILIAR WITH THE EMPLOYEE'S PERFORMANCE.

COMMENTS OF REVIEWING OFFICIAL

DATE 21 March 1962 OFFICIAL TITLE OF REVIEWING OFFICIAL C/WH/4/CI TYPED OR PRINTED NAME AND SIGNATURE

SECRET

SECRET

NOTIFICATION OF CANCELLATION OF OFFICIAL COVER BACKSTOP

DA. 14 September 1966

TO: (Check)  CHIEF, PERSONNEL OPERATIONS DIVISION

CHIEF, OPERATING COMPONENT (For Action)

CHIEF, CONTRACT PERSONNEL DIVISION WH

SUBJECT: Hidalgo, Bmes N., Jr.

ATTN: [ ]

REF: Form 1322 dated 9 September 1966

FILE NO. 9927

OFFICIAL COVER DISCONTINUED [ ]

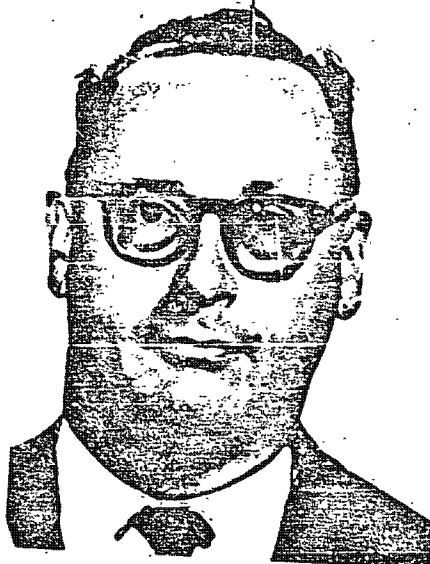
ID CARD NO. 1140 (Returned)  
EMPLOYEE NO. [ ]

Unblock Records: (OP Memo 20-800-17)

Effective EOD

Submit Form 642 To Change Limitation Category. (HB 20-800-2 to be redesignated HHB 20-7)

Return All Official Documentation To CCS.



*Jan*

1-PSD:OS

SECRET



SECRET

63-3457  
2-7-57

NOTIFICATION OF ESTABLISHMENT OF <input type="checkbox"/> COVER BACKSTOP		DATE 9 April 1964
TO: (Check)	<input checked="" type="checkbox"/> CHIEF, RECORDS AND SERVICES DIVISION	ESTABLISHED FOR
	<input type="checkbox"/> CHIEF, OPERATING COMPONENT, SAS	HIDALGO, Balmes N., Jr.
ATTN:	<input type="checkbox"/>	FILE NO. K-7412
REF:	Request for Cover, 9 April 1964	ID CARD NO.
MILITARY COVER BACKSTOP ESTABLISHED		NA

BLOCK RECORDS:  
(OPMEMO 20-800-11)

a. TEMPORARILY FOR \_\_\_\_\_ DAYS, EFFECTIVE \_\_\_\_\_.

CONTINUING, EFFECTIVE R0D.

SUBMIT FORM 642 TO CHANGE LIMITATION CATEGORY TO 3.  
(RB 20-800-2)

ASCERTAIN THAT ARMY W-2 BEING ISSUED.  
(RB 20-661-1)

SUBMIT FORM 1322 FOR ANY CHANGE AFFECTING THIS COVER.  
(R 240-250)

SUBMIT FORM 1323 FOR TRANSFERRING COVER RESPONSIBILITY.  
(R 240-250)

REMARKS:

THIS MEMO MUST REMAIN

TOP OF FILE

*James H. Franklin*  
AD/sll CHIEF, MILITARY COVER, CCG

COPY TO CPD/OP

DISTRIBUTION: 1-OSD/OS, 1-PSD/OS, 1-ADPD/COMPT

GROUP 1  
Excluded from automatic  
downgrading and  
declassification

BT

SECRET

NOTIFICATION OF ESTABLISHMENT OF [REDACTED] COVER BACKSTOP		DATE 23 April 1963
TO: <input checked="" type="checkbox"/> (CPD/PP)	CHIEF, RECORDS AND SERVICES DIVISION	ESTABLISHED FOR
	CHIEF, OPERATING COMPONENT SAS	HIDALGO, Balmea N., Jr.
ATTN: [REDACTED]		FILE NO. K-7412
REF: Verbal request for cover		ID CARD NO.
MILITARY COVER BACKSTOP ESTABLISHED [REDACTED]		

BLOCK RECORDS:  
(OPMEMO 20-800-11)

- a. TEMPORARILY FOR \_\_\_\_\_ DAYS, EFFECTIVE \_\_\_\_\_
- b. CONTINUING, EFFECTIVE \_\_\_\_\_ EOD \_\_\_\_\_

SUBMIT FORM 642 TO CHANGE LIMITATION CATEGORY TO 3.  
(HB 20-800-2)

ASCERTAIN THAT ARMY W-2 BEING ISSUED.  
(HB 20-661-1)

SUBMIT FORM 1322 FOR ANY CHANGE AFFECTING THIS COVER.  
(R 240-250)

SUBMIT FORM 1323 FOR TRANSFERRING COVER RESPONSIBILITY.  
(R 240-250)

REMARKS:

THIS MESSAGE MUST REMAIN  
ON TOP OF FILE

COPY TO CPD/PP

*James H. Franklin*  
CD/PP CHIEF, MILITARY COVER, CCS

DISTRIBUTION: 1-OSD/OS, 1-PSD/CS, 1-ACPD/COMPT

119-20488  
11

SECRET

NOTIFICATION OF CANCELLATION OF [REDACTED] COVER BACKSTOP		DATE 9 March 1962
TO: <input checked="" type="checkbox"/> CHIEF, RECORDS AND SERVICES DIVISION (Chief) <input type="checkbox"/> CHIEF, OPERATING COMPONENT - WH Div	SUBJECT HIDALGO, BALTES N. JR.	
ATTN: WH/SS [REDACTED]	FILE NO. K-7412	
REF: Your request of 1322 dated [REDACTED] updated MILITARY COVER DISCONTINUED	ID CARD NO. 832	
[REDACTED]		
<input checked="" type="checkbox"/> UNBLOCK RECORDS: (OP memo 20-800-11)		
EFFECTIVE <u>27 October 1960</u>		
<input type="checkbox"/> SUBMIT FORM 642 TO CHANGE LIMITATION CATEGORY. (HD 20-800-2)		
<input type="checkbox"/> RETURN ALL MILITARY DOCUMENTATION.		
<input type="checkbox"/> REMARKS:		
<p><b>THIS MATTER SHOULD REMAIN ON TOP OF FILE</b></p>		
<input type="checkbox"/> COPY TO CPD/OP		
39165 DISTRIBUTION 1-SS		

52

SECRET

7 March 1968

MEMORANDUM FOR: Chief, Records and Services Division  
Office of Personnel

THROUGH : Personnel Security Division  
Office of Security

SUBJECT : Balme N. HIDALGO, Jr., Contract Employee

1. Cover arrangements have been completed for the above named subject.

2. Effective immediately, it is requested that your records be properly (blocked) (~~XXXXXX~~) to (deny) (~~XXXXXXXXXX~~) subject's current Agency employment by an external inquirer. Subject is to be converted to Staff Employee status within the next few days.

3. This memorandum confirms an oral request of 7 March 1968.

cc:

THIS SECRET MUST REMAIN

1  
03

"PAY ADJUSTMENT IN ACCORDANCE WITH SALARY SCHEDULES OF PL 91-421 AND EXECUTIVE ORDER 11524 PURSUANT TO AUTHORITY OF DCI AS PROVIDED IN THE CIA ACT OF 1949, AS AMENDED, AND A DCI EXECUTIVE DATE 8 OCTOBER 1962"

EFFECTIVE DATE OF PAY ADJUSTMENT:

NAME: HIDALGO, B. N., JR. SERIAL: 00730 ORGN: 51 BRNS: V GR: 12 STEP: 5 NEW SALARY: \$16,034

1. LAST NAME: HIDALGO, B. N. JR.		FIRST NAME: B. N. JR.		INITIAL(S):		2. APPOINTMENT DATA Entered on duty: F, T, P, T		3. TOTAL SERVICE FOR LEAVE (as of / of separation)			
4. DATE AND NATURE OF SEPARATION: RETIREMENT-DISABILITY-UNDER CIA RET AND DIS SYSTEM EFF 2/28/70						Subject to Sec 203(d) 1931 Leave Act Yes <input type="checkbox"/> No <input type="checkbox"/>		Years: Months: Days:			
SUMMARY OF ANNUAL AND SICK LEAVE (HOURS)						SUMMARY OF HOME LEAVE (DAYS)					
5. Balance from prior leave year ended 1/10 1970		ANNUAL	SICK	14. Date arrival abroad for HL purposes		15. Current balance as of 19		REMARKS SCD 7/16/46			
6. Current leave year accrual through 2/21 1970		46	8	16. 12 month accrual rate		17. Dates leave used, prior 24 months					
7. Total		24	12	18. Monthly accrual date		19. Calendar days credit for next accrual date					
8. Reduction in credits, if any (current year)		70	20	20. Date basic service period completed		MILITARY LEAVE					
9. Total leave taken		4	20	21. Dates during current calendar yr to		22. Dates during preceding calendar yr to					
10. Balance		66	0	23. During leave year in which separated		24. During step increase waiting period which began on 12/15/68		ABSENCE WITHOUT PAY LWOP or: AWOB or Furlough/Suspension (Hours)			
11. Total hours paid in lump sum 66 hrs		12. Salary rate(s) \$15,173.00		13. Lump sum leave dates from 0830 3/02/70 to 3/11/70 1030 (Hours)		25. During 12-month HL accrual period (dates)					
26. Certified correct by <i>[Signature]</i> for Chief Payroll (Title)		5/13/70 (Date) 143-2585 (Telephone)									

70-71-70

70-1271  
70-1556

31 MAR 1970

Mr. Balmes N. Hidalgo, Jr.  
403 Silver Rock Road  
Rockville, Maryland 20851

Dear Mr. Hidalgo:

As you bring to a close more than twenty years of service to your country, I want to join your friends and co-workers in wishing you well and hoping that you find the years ahead filled with enjoyment and satisfaction.

It takes the conscientious efforts of many people to do the important work of this Agency. You leave with the knowledge that you have personally contributed to our success in carrying out our mission. Your faithful and loyal support has measured up to the high ideals and traditions of the Federal service.

May I express to you my appreciation and extend my best wishes for the years ahead.

Sincerely,

/s/ Richard Helms

Richard Helms  
Director

Distribution:

- 0 - Addressee
- 1 - DDCI
- 1 - ER
- 1 - C/EAB/OS
- 1 - D/Pers
- 1 - OPF
- 1 - ROB Soft File \* Concur:
- 1 - ROB Reader

Originator: \_\_\_\_\_  
Director of Personnel

\_\_\_\_\_  
C/EAB/OS

OP/RAD/ROB/[ ]jat/3257 (5 March 1970)

8 SEP 70

Mr. Raloes N. Hidalgo, Jr.  
403 Silver Rock Road  
Rockville, Maryland 20851

Dear Mr. Hidalgo:

It is the practice of the Organization to follow up with former employees six months after their retirement. We hope by such inquiry to obtain information on what our retirees are doing and where they are located, invite suggestions for improving the retirement program and to learn if the Organization might be of some assistance on any post-retirement matters.

We should like very much to hear from you on the above points and on any other topics you think would be useful to us.

For your convenience in replying, we have enclosed a sheet somewhat akin to a form on which we have listed those standard items of information we'd like to have on every retiree. The remainder of the sheet, including the reverse side, is for your comments and suggestions. We shall be most appreciative of your fullest response to this inquiry.

Thank you very much for your cooperation.

Sincerely yours,

Carroll A. Duchay  
Personnel Officer

Enclosures:  
Questionnaire  
Return Envelope

Distribution:  
Original - Addressee  
1 - OPF  
1 - RAD Subject's File

OP/RAD/EFAB/[ ]:dag (31 Aug 70)

SECRET  
(When Filled In)

BSJ: 4 MAR 70

NOTIFICATION OF PERSONNEL ACTION

OFF

1 SERIAL NUMBER 027630		2 NAME (LAST, FIRST, MIDDLE) MIDALCO, S R JR	
3 NATURE OF PERSONNEL ACTION RETIREMENT-DISABILITY-UNDER CIA RETIREMENT-DISABILITY SYSTEM			4 EFFECTIVE DATE MO DA YR 03 15 70
5 CATEGORY OF EMPLOYMENT		7 Financial Analysis No Chargeable	
6 FUNDS V TO V CF TO V		8 CSC OR OTHER LEGAL AUTHORITY P.L. 93-643 SECT. 231	
9 ORGANIZATIONAL DESIGNATIONS DDP/WA BRANCH 2 SECTION:		10 LOCATION OF OFFICIAL STATION WASH, D.C.	
11 POSITION TITLE CPS OFFICER		12 POSITION NUMBER 1312	13 SERVICE DESIGNATION D
14 CLASSIFICATION SCHEDULE (GS, LB, etc.) GS	15 OCCUPATIONAL SERIES 0135.01	16 GRADE AND STEP 12 5	17 SALARY OR RATE 15173

18 REMARKS

SPACE BELOW FOR EXCLUSIVE USE OF THE OFFICE OF PERSONNEL

19 ACTION CODE 45	20 EMPLOY CODE 10	21 OFFICE CODING NUMERIC ALPHABETIC	22 STATION CODE	23 INTEGRATE CODE	24 MILITARY CODE	25 DATE OF BIRTH MO DA YR 03 27 19	26 DATE OF GRADE MO DA YR	27 DATE OF LEI MO DA YR
28 NTE EXPIRES MO DA YR	29 SPECIAL REFERENCE	30 RETIREMENT DATA 1 CSC 2 CIA 3 FICA 4 NONE	31 SEPARATION DATA CODE -70000	32 Correction / Cancellation Data TYPE MO DA YR		33 SECURITY REG NO		34 SER
35 VET PREFERENCE CODE 0 NONE 1 5 PT 2 10 PT	36 SERV COMP DATE MO DA YR	37 LONG COMP DATE MO DA YR	38 CAREER CATEGORY CAR BESH PROV TEMP		39 FEGLI HEALTH INSURANCE CODE CODE 0 WAIVER 1 YES	40 SOCIAL SECURITY NO		
41 PREVIOUS CIVILIAN GOVERNMENT SERVICE CODE 0 NO PREVIOUS SERVICE 1 NO BREAK IN SERVICE 2 BREAK IN SERVICE (LESS THAN 3 YRS) 3 BREAK IN SERVICE (MORE THAN 3 YRS)		42 LEAVE CAT CODE	43 FEDERAL TAX DATA FORM EXECUTED CODE NO TAX EXEMPTIONS 1 YES 2 NO		44 STATE TAX DATA FORM EXECUTED CODE INC TAX STATE CODE 1 YES 2 NO			

SIGNATURE OR OTHER AUTHENTICATION

POSTED  
03-05-70/jsc

U.S. GOVERNMENT PRINTING OFFICE: 1965 O 281-101



BSJ: 4 MAR 70

NOTIFICATION OF PERSONNEL ACTION

OFF

1. SERIAL NUMBER <b>027630</b>		2. NAME (LAST FIRST-MIDDLE) <b>HIDALGO D N JR</b>	
3. NATURE OF PERSONNEL ACTION <b>RETIREMENT-DISABILITY-UNDER CIA RETIREMENT AND DISABILITY SYSTEM</b>		4. EFFECTIVE DATE MO DA YR <b>02 20 70</b>	5. CATEGORY OF EMPLOYMENT <b>REGULAR</b>
6. FUNDS V TO V CF TO V <input checked="" type="checkbox"/> V TO V <input type="checkbox"/> CF TO V	7. Financial Analysis No. Chargeable <b>0235 0620 0000</b>	8. CSC CS TYPE LEGAL AUTHORITY <b>P.L. 88-643 SECT. 231</b>	
9. ORGANIZATIONAL DESIGNATIONS		10. LOCATION OF OFFICIAL STATION	
11. POSITION TITLE <b>OPS OFFICER</b>		12. POSITION NUMBER <b>1310</b>	13. SERVICE DESIGNATION <b>D</b>
14. CLASSIFICATION SCHEDULE (GS, LB, etc.) <b>GS</b>	15. OCCUPATIONAL SERIES <b>0136.01</b>	16. GRADE AND STEP <b>12 5</b>	17. SALARY OR RATE <b>15173</b>
18. REMARKS			
SIGNATURE OR OTHER AUTHENTICATION			

U.S. GOVERNMENT PRINTING OFFICE: 1965 O 211-100

\*PAY ADJUSTMENT IN ACCORDANCE WITH SECTION 2.2 OF P. 90-206 AND EXECUTIVE ORDER 11474 PURSUANT TO AUTHORITY OF DCI AS PROVIDED IN THE CIA ACT OF 1949, AS AMENDED, AND A DCI EFFECTIVE DATE OF OCTOBER 1968

EFFECTIVE DATE OF PAY ADJUSTMENT: 13 JULY 1969

NAME	SERIAL	GRS	FUNDS	GR-STEP	NEW SALARY
HIDALGO B N JR	027630	51 350	V	GS 12 5	\$15,173

2

68-35-

1 SERIAL NO.	2 NAME	3 ORGANIZATION	4 FUNDS	5 LWOP HOURS					
027630	HIDALGO B N JR	51 350	V						
6 OLD SALARY RATE		7 NEW SALARY RATE		8 TYPE ACTION					
Grade	Step	Salary	Last Eff Date	Grade	Step	Salary	EFFECTIVE DATE	SI	ADI
GS 12	4	\$13,392	12/18/68	GS 12	5	\$13,798	12/19/68		
CERTIFICATION AND AUTHENTICATION									
I CERTIFY THAT THE WORK OF THE ABOVE NAMED EMPLOYEE IS OF ACCEPTABLE LEVEL OF COMPETENCE.									
SIGNATURE							DATE		
<i>Eustace</i>							10 October 68		
<input checked="" type="checkbox"/> NO EXCESS LWOP <input checked="" type="checkbox"/> IN PAY STATUS AT END OF WAITING PERIOD <input checked="" type="checkbox"/> LWOP STATUS AT END OF WAITING PERIOD									
CLERK'S INITIALS									
FORM 560 E Use previous editions <b>PAY CHANGE NOTIFICATION</b> (431)									

COMPLETION  
 10/10/68  
 10/10/68

JPC

"PAY ADJUSTMENT IN ACCORDANCE WITH SECTIONS 212 AND 215 OF PL 90-206 AND EXECUTIVE ORDER 11613 PURSUANT TO AUTHORITY OF DCI AS PROVIDED IN THE CIA ACT OF 1949, AS AMENDED, AND A-DCI DIRECTIVE DATED 8 OCTOBER 1962"

EFFECTIVE DATE OF PAY ADJUSTMENT: 14 JULY 1968

NAME	SERIAL	ORGN.	FUNDS	GR-STEP	OLD SALARY	NEW SALARY
HIDALGO B N JR	027630	51	350	V GS 12 4	\$12,607	\$13,392

"PAY ADJUSTMENT IN ACCORDANCE WITH SALARY SCHEDULES OF PL 90-206 PURSUANT TO AUTHORITY OF DCI AS PROVIDED IN THE CIA ACT OF 1949, AS AMENDED, AND A-DCI DIRECTIVE DATED 8 OCTOBER 1962."

EFFECTIVE DATE OF PAY ADJUSTMENT: 8 OCTOBER 1967

NAME	SERIAL	ORGN.	FUNDS	GR-STEP	OLD SALARY	NEW SALARY
HIDALGO B N JR	227630	51	350	V GS 12 4	\$12,607	\$12,607

c/w #12

G 30

1. Service No.		2. Name		3. Cost Center Number		4. LHO/OP Hours				
027630		HICALGO B N JR		41-390 V						
5. OLD SALARY RATE				6. NEW SALARY RATE				7. TYPE ACTION		
Grade	Step	Salary	Expire Date	Grade	Step	Salary	Effective Date	PL	LS	AD
GS 12	3	11,685	17/19/65	GS 12	4	12,004	12/14/66			77.00
8. Remarks and Authorization										
NO EXCESS LWOP IN PAY STATUS AT END OF WAITING PERIOD LWOP STATUS AT END OF WAITING PERIOD CLERKS INITIALS                      AUDITED BY <i>[Signature]</i>										
I CERTIFY THAT THE WORK OF THE ABOVE NAMED EMPLOYEE IS OF AN ACCEPTABLE LEVEL OF COMPETENCE.										
SIGNATURE: <i>[Signature]</i> DATE: <i>Dec 12 1966</i>										
<b>PAY CHANGE NOTIFICATION</b>										

77.00  
2644707

P

SECRET  
(When Filled In)

NOTIFICATION OF PERSONNEL ACTION													
1. SERIAL NUMBER		2. NAME (LAST-FIRST MIDDLE)											
027630		FEEALGO B N CR											
3. NATURE OF PERSONNEL ACTION				4. EFFECTIVE DATE		5. CATEGORY OF EMPLOYMENT							
DESIGNATION AS PARTICIPANT IN CIA RETIREMENT AND DISABILITY SYSTEM				14 66		REGULAR							
6. FUNDS		7. COST CENTER NO. (CHARGEABLE)		8. CSC OR OTHER LEGAL AUTHORITY									
X		3370029 XA 00		F 2643 DECT. 203									
9. ORGANIZATIONAL DESIGNATIONS				10. LOCATION OF OFFICIAL STATION									
DOP/WH				WASH., D. C.									
11. POSITION TITLE			12. POSITION NUMBER			13. SERVICE DESIGNATION							
14. CLASSIFICATION SCHEDULE (GS, LB, etc.)			15. OCCUPATIONAL SERIES		16. GRADE AND STEP		17. SALARY GRADE						
18. REMARKS YOU ARE HEREBY NOTIFIED OF YOUR RIGHT TO APPEAL THIS ACTION TO THE DIRECTOR OF CENTRAL INTELLIGENCE IN ACCORDANCE WITH THE PROVISIONS OF 5 U.S.C. 2030. SUCH APPEAL MUST BE RECEIVED IN THE OFFICE OF THE DIRECTOR WITHIN 30 CALENDAR DAYS FROM THE EFFECTIVE DATE OF THIS ACTION.													
SPACE BELOW FOR EXCLUSIVE USE OF THE OFFICE OF PERSONNEL													
19. AGENCY CODE		20. OFFICE CODE		21. STATION CODE		22. LITERARY CODE		23. DATE OF BIRTH		24. DATE OF HIRE		25. DATE OF LEI	
26. NET EXPENSES		27. SPECIAL REFERENCE		28. RETIREMENT DATA		29. SEPARATION DATA CODE		30. CORRECTION/AMENDATION DATA		31. SECURITY INFO		32. SFC	
33. NET PREFERENCE		34. SERP (CSP) DATE		35. (CSP) DATE		36. CAREER CONTRACT		37. PHYSICAL HEALTH STATUS		38. SOCIAL SECURITY NO.			
39. PREVIOUS GOVERNMENT SERVICE DATA				40. LEAVE CAT		41. FEDERAL TAX DATA		42. STATE TAX DATA					
SIGNATURE OF OFFICIAL AUTHORIZED TO SIGN													

ROD DATA

FORM 1120

Use Previous Edition

SECRET

When Filled In

PAY ADJUSTMENT IN ACCORDANCE WITH SALARY SCHEDULES OF PL 89-504  
 PURSUANT TO AUTHORITY OF DCI AS PROVIDED IN THE CIA ACT OF 1949,  
 AS AMENDED, AND A DCI DIRECTIVE DATED 6 OCTOBER 1962.

EFFECTIVE DATE OF PAY ADJUSTMENT: 3 JULY 1966

NAME	SERIAL	ORGN.	FUNDS	GRANTED	OLD SALARY	NEW SALARY
WILALGO W N JR	027430	51	350	V	GS 12 3 10,907	11,355

6-33

Serial		Name		Organizational Symbol		LWOP Basis				
027430		WILALGO W N JR		51 350 V						
OLD SALARY RATE				NEW SALARY RATE				TYPE ACTION		
Grade	Step	Rate	Effective Date	Grade	Step	Rate	Effective Date	PL	LV	AD
GS 12	2	10,907	12/20/64	GS 12	3	11,355	12/1/65			
<p>NO EXCESS LWOP          IN PAY STATUS AT END OF WAITING PERIOD          LWOP STATUS AT END OF WAITING PERIOD          CLERKS INITIALS      AUDITED BY</p> <p>I CERTIFY THAT THE ROPA OF THE ABOVE NAMED EMPLOYEE IS          OF AN ACCEPTABLE LEVEL OF COMPETENCE</p> <p>SIGNATURE: <i>E. J. Hill</i></p> <p><b>PAY CHANGE NOTIFICATION</b></p>										

JH: 17 DEC 65

SECRET  
(When Filled In)

NOTIFICATION OF PERSONNEL ACTION										
1. SERIAL NUMBER	2. NAME (LAST FIRST MIDDLE)									
027630	HIDALGO B N JR									
3. NATURE OF PERSONNEL ACTION				4. EFFECTIVE DATE		5. CATEGORY OF EMPLOYMENT				
REASSIGNMENT				12 19 65		REGULAR				
6. FUNDS	7. TO 'V'	8. TO 'W'	9. TO 'X'	10. TO 'Y'	11. TO 'Z'	12. COST CENTER NO (CHARGEABLE)		13. CSC OR OTHER LEGAL AUTHORITY		
X						6235 0620 0000		50 USC 403 J		
9. ORGANIZATIONAL DESIGNATIONS					10. LOCATION OF OFFICIAL STATION					
DOP/WH BRANCH 2 SECTION					WASH., D.C.					
11. POSITION TITLE				12. POSITION NUMBER		13. SERVICE DESIGNATION				
OPS OFFICER				1318		D				
14. CLASSIFICATION SCHEDULE (SEE 1.6, 1.7)			15. OCCUPATIONAL SERIES		16. GRADE AND STEP		17. SALARY OR RATE			
GS			0136.01		12 3		11355			
18. REMARKS										
SPACE BELOW FOR EXCLUSIVE USE OF THE OFFICE OF PERSONNEL										
19. ACTION CODE	20. EMPLOY CODE	21. OFFICE CODING		22. STATION CODE	23. INTEGREE CODE	24. REGISTRY CODE	25. DATE OF BIRTH		26. DATE OF GRADE	27. DATE OF LEI
37	10	51350 WH		75013		1	05 27 19			
28. MTE EXPIRES		29. SPECIAL REFERENCE		30. DETACHMENT DATA		31. SEPARATION DATA CODE		32. CORRECTION/CANCELLATION DATA		33. SECURITY REG NO
								EOD DATA		
34. VET PREFERENCE	35. SERV COMP DATE		36. LONG COMP DATE		37. CAREER CATEGORY		38. SEGLI/HEALTH INSURANCE		39. SOCIAL SECURITY NO	
40. PREVIOUS GOVERNMENT SERVICE DATA			41. LEAVE CAT		42. FEDERAL TAX DATA			43. STATE TAX DATA		
54. (ATWR) OR OTHER AUTHORIZATION										

FORM 1150

Use Previous Edition

SECRET

FORWARD TO BUREAU  
WITHIN 30 DAYS  
OF FILING DATE

(When Filled In)

"PAY ADJUSTMENT IN ACCORDANCE WITH SALARY SCHEDULES OF PL 89-301  
PURSUANT TO AUTHORITY OF DCI AS PROVIDED IN THE CIA ACT OF 1949,  
AS AMENDED, AND A-DCI POLICY DIRECTIVE DATED 10 OCTOBER 1962."

EFFECTIVE DATE OF PAY ADJUSTMENT: 10 OCTOBER 1965

NAME	SERIAL	ORGN.	FUNDS	GR-STEP	OLD SALARY	NEW SALARY
WIDALGO R N JR	027630	51	500	V GS 12 2	\$10,605	\$10,987



SECRET  
(When Filled In)

NOTIFICATION OF PERSONNEL ACTION							
1. SERIAL NUMBER 027610		2. NAME (LAST FIRST MIDDLE) MIDALGO B N JR					
3. NATURE OF PERSONNEL ACTION REASSIGNMENT				4. EFFECTIVE DATE MO. DA. YR. 09 31 65		5. CATEGORY OF EMPLOYMENT	
6. FUNDS X		V TO V	V TO G	7. COST CENTER NO. CHARGEABLE 5235 1162 0000		8. CSC OR OTHER LEGAL AUTHORITY	
9. ORGANIZATIONAL DESIGNATIONS DDP/WH DIVISION WH C MIAMI OPS BR FI SEC				10. LOCATION OF OFFICIAL STATION WASH., D. C.			
11. POSITION TITLE RPS OFFICER				12. POSITION NUMBER 1145		13. CAREER SERVICE DESIGNATION U	
14. CLASSIFICATION SCHEDULE (GS, LB, etc.) GS		15. OCCUPATIONAL SERIES 0136.01		16. GRADE AND STEP 12		17. SALARY OR RATE	
18. REMARKS							
<div style="border: 1px solid black; padding: 5px; display: inline-block;">           POSTED            6-9-65 <i>HH</i> </div>							
SIGNATURE OR OTHER AUTHENTICATION							

3CF

1. Serial No.		2. Name		3. Cost Center Number		4. LWOP Hours				
027630		HIDALGO B N JR		49 997		43F				
5. OLD SALARY RATE				6. NEW SALARY RATE				7. TYPE ACTION		
Grade	Step	Salary	Last Eff. Date	Grade	Step	Salary	Effective Date	PSJ	LSJ	ADJ.
GS 12	1	\$10,250	12/22/63	GS 12	2	\$10,605	12/20/64			
8. Remarks and Authorization										
/ / NO EXCESS LWOP / / IN PAY STATUS AT END OF WAITING PERIOD. / / LWOP STATUS AT END OF WAITING PERIOD CLERKS INITIALS: <i>WJ</i> AUDITED BY:										
I CERTIFY THAT THE WORK OF THE ABOVE NAMED EMPLOYEE IS OF AN ACCEPTABLE LEVEL OF COMPETENCE.										
SIGNATURE <i>[Signature]</i>						DATE <i>[Date]</i>				
<b>PAY CHANGE NOTIFICATION</b>										

DEC 22 11 06 AM '64

OFFICE OF THE PAYROLL SUPERVISOR

MHC: 2 NOV 64

SECRET  
(When Filled In)

NOTIFICATION OF PERSONNEL ACTION															
1. SERIAL NUMBER		2. NAME (LAST FIRST-MIDDLE)													
027630		HIDALGO B N JR													
3. NATURE OF PERSONNEL ACTION						4. EFFECTIVE DATE		5. CATEGORY OF EMPLOYMENT							
REASSIGNMENT						NO. DA. YR. 11 02 64		REGULAR							
6. FUNDS		V TO V		V TO CF		7. COST CENTER NO. CHARGEABLE		8. CSC OR OTHER LEGAL AUTHORITY							
X						5235 1162 0000		50 USC 403 J							
9. ORGANIZATIONAL DESIGNATIONS						10. LOCATION OF OFFICIAL STATION									
DDP/SAS COUNTERINTELLIGENCE STAFF OPERATIONS SECTION						WASH., D. C.									
11. POSITION TITLE						12. POSITION NUMBER		13. SERVICE DESIGNATION							
OPS OFFICER						0887		D							
14. CLASSIFICATION SCHEDULE (GS, LD, etc)			15. OCCUPATIONAL SERIES			16. GRADE AND STEP		17. SALARY OR RATE							
GS			0136.01			12 1		10250							
18. REMARKS															
SPACE BELOW FOR EXCLUSIVE USE OF THE OFFICE OF PERSONNEL															
19. ACTION CODE	20. EMPLOY CODE	21. OFFICE CODING		22. STATION CODE	23. INTEGREE CODE	24. HOURS CODE	25. DATE OF BIRTH			26. DATE OF GRADE		27. DATE OF LEI			
37	10	NUMERIC	ALPHABETIC	75013		1	NO	DA	YR	NO	DA	YR	NO	DA	YR
		49150	SAS				05	27	19						
28. NTE EXPIRES			29. SPECIAL REFERENCE		30. RETIREMENT DATA		31. SEPARATION DATA CODE		32. CORRECTION/CANCELLATION DATA			33. SECURITY REQ NO	34. SER		
NO DA YR			1 - CSC 2 - FICA 3 - NONE		CODE		TYPE		NO DA YR			EOD DATA			
35. VET. PREFERENCE		36. SERV COMP DATE			37. LONG COMP DATE			38. CAREER CATEGORY		39. FEGLI / HEALTH INSURABLE			40. SOCIAL SECURITY NO		
CODE		NO	DA	YR	NO	DA	YR	CODE	CODE	O - WAIVER	HEALTH INS CODE	NO			
0 - NONE 1 - 5 PT 2 - 10 PT										1 - YES 2 - NO					
41. PREVIOUS GOVERNMENT SERVICE DATA				42. LEAVE CAT CODE		43. FEDERAL TAX DATA		44. STATE TAX DATA							
CODE				FORM EXECUTED		NO TAX EXEMPTIONS		FORM EXECUTED		CODE		NO TAX STATE CODE			
0 - NO PREVIOUS SERVICE 1 - NO BREAK IN SERVICE 2 - BREAK IN SERVICE (LESS THAN 3 YRS) 3 - BREAK IN SERVICE (MORE THAN 3 YRS)				1 - YES 2 - NO				1 - YES 2 - NO							
SIGNATURE OR OTHER AUTHENTICATION															
FROM: DEV COMP 2															
<div style="border: 1px solid black; padding: 5px; display: inline-block;"> <p style="text-align: center; margin: 0;">POSTED</p> <p style="text-align: center; margin: 0;">11/02/64</p> </div>															

FORM 11 62 1150

Use Previous Edition

SECRET

14-00000  
(When Filled In)

(When Filled In)



RZR: 22 APR 64

SECRET  
(When Filled In)

NOTIFICATION OF PERSONNEL ACTION													
1. SERIAL NUMBER		2. NAME (LAST-FIRST MIDDLE)											
027530		HIDALGO, S N JR											
3. NATURE OF PERSONNEL ACTION				4. EFFECTIVE DATE		5. CATEGORY OF EMPLOYMENT							
CAREER PROVISIONAL EXCEPTED APPT				MO DA YR 04 22 64		REGULAR							
6. FUNDS		V TO V		V TO CP		7. COST CENTER NO. CHARGEABLE		8. CSC OR OTHER LEGAL AUTHORITY					
X						4232 1000 1000		50 USC 403					
9. ORGANIZATIONAL DESIGNATIONS						10. LOCATION OF OFFICIAL STATION							
DDP/SAS CS/CS DEVELOPMENT COMPLEMENT						WASH., D.C.							
11. POSITION TITLE						12. POSITION NUMBER		13. SERVICE DESIGNATION					
OPS OFFICER						2227							
14. CLASSIFICATION SCHEDULE (GS, LB, etc.)			15. OCCUPATIONAL SERIES			16. GRADE AND STEP		17. SALARY OR RATE					
GS			0130.01			12.1		2280					
18. REMARKS OTHER													
SPACE BELOW FOR EXCLUSIVE USE OF THE OFFICE OF PERSONNEL													
19. ACTION CODE													
20. EMPLOY CODE													
21. OFFICE CODING		22. STATION CODE		23. INTEGER CODE		24. MONTHS CODE		25. DATE OF BIRTH		26. DATE OF GRADE		27. DATE OF LEI	
NUMERIC ALPHABETIC		CODE		CODE		CODE		MO DA YR		MO DA YR		MO DA YR	
13 18		42227 SAS		25013				05 27 33		12 22 63		12 22 63	
28. NTE EXPIRES		29. SPECIAL REFERENCE		30. RETIREMENT DATA		31. SEPARATION DATA CODE		32. CORRECTION/CANCELLATION DATA		33. SECURITY REG NO		34. SEX	
MO DA YR		1. CSC 2. FICA 3. NONE		CODE		TYPE		MO DA YR		00000		M	
35. VET PREFERENCE		36. SERV COMP DATE		37. LONG COMP DATE		38. CAREER CATEGORY		39. FEGLI/HEALTH INSURANCE		40. SOCIAL SECURITY NO			
CODE		MO DA YR		MO DA YR		CODE		CODE		CODE			
0		07 11 60		03 17 59		P		1 1 63					
41. PREVIOUS GOVERNMENT SERVICE DATA				42. LEAVE CAT		43. FEDERAL TAX DATA				44. STATE TAX DATA			
CODE				CODE		CODE				CODE			
1				0		0				0			
SIGNATURE OR OTHER AUTHENTICATION													

**POSTED**  
429.64 401

FORM 11 62 1150

Old Previous Edition

22 APR 64 1964

SECRET

GROUP 1  
Excluded from automatic  
downgrading and  
declassification

(When Filled In)

28 APR 64

SECRET  
(When Filled In)

NOTIFICATION OF PERSONNEL ACTION

1. SERIAL NUMBER 2. NAME (LAST-FIRST-MIDDLE)  
027830 [REDACTED] *Andalco, B A Jr*

3. NATURE OF PERSONNEL ACTION 4. EFFECTIVE DATE 5. CATEGORY OF EMPLOYMENT  
RESIGNATION 04 25 64 REGULAR

6. FUNDS 7. COST CENTER NO. CHARGEABLE 8. CSC OR OTHER LEGAL AUTHORITY  
V TO V V TO CF 4132 2001 1000  
CF TO V X CF TO CF

9. ORGANIZATIONAL DESIGNATIONS 10. LOCATION OF OFFICIAL STATION  
DOP/SAS  
US FIELD  
FORWARD OPERATIONS STATION-JMWAVE  
CI SECTION JMWAVE

11. POSITION TITLE 12. POSITION NUMBER 13. SERVICE DESIGNATION  
OPS OFFICER 0731 D

14. CLASSIFICATION SCHEDULE (GS, LS, etc.) 15. OCCUPATIONAL SERIES 16. GRADE AND STEP 17. SALARY OR RATE  
GS 0136:01 12 1 9180

18. REMARKS  

FILED ON  
29 APR 64

SPACE BELOW FOR EXCLUSIVE USE OF THE OFFICE OF PERSONNEL

19. ACT-ON CODE 45	20. EMPLOY CODE 10	21. OFFICE CODING NUMERIC ALPHABETIC	22. STATION CODE	23. INTEGREE CODE	24. Hdqtrs Code	25. DATE OF BIRTH MO DA YR 05 27 19	26. DATE OF GRADE MO DA YR	27. DATE OF LEI MO DA YR
28. NTE EXPIRES MO DA YR	29. SPECIAL REFERENCE 1. CSC 2. FIC 3. NONE	30. RETIREMENT DATA CODE	31. SEPARATION DATA CODE 180001	32. CORRECTION/CANCELLATION DATA TYPE MO DA YR	EOD DATA →		33. SECURITY REQ NO	34. SEX
35. NET. PREFERENCE CODE 0 NONE 1 5 PT 2 10 PT	36. SERV COMP DATE MO DA YR	37. LONG COMP DATE MO DA YR	38. CAREER, CATEGORY CAR RELN CODE CODE MNT. TEMP		39. FEGLI / HEALTH INSURANCE 0 WAIVER 1 YES HEALTH INS CODE		40. SOCIAL SECURITY NO	
41. PREVIOUS GOVERNMENT SERVICE DATA CODE 0 NO PREVIOUS SERVICE 1 NO BREAK IN SERVICE 2 BREAK IN SERVICE (LESS THAN 3 YRS) 3 BREAK IN SERVICE (MORE THAN 3 YRS)			42. LEAVE CAT CODE	43. FEDERAL TAX DATA FORM EXECUTED CODE NO TAX EXEMPTIONS 1 YES 2 NO		44. STATE TAX DATA FORM EXECUTED CODE NO TAX EXEMPT STATE CODE 1 YES 2 NO		

SIGNATURE OR OTHER AUTHENTICATION

*110...D*  
*429-64 41*

28 APR 1964

975

IN ACCORDANCE WITH THE PROVISIONS OF PUBLIC LAW 87-793 AND DCI MEMORANDUM DATED 1 AUGUST 1956, SALARY IS ADJUSTED AS FOLLOWS, EFFECTIVE 5 JANUARY 1964.

NAME	SERIAL	ORGN	FUNDS	GR-ST	OLD SALARY	NEW SALARY
[REDACTED]	027630	49	730	CF GS 12 1	\$ 9,475	\$ 9,980

*Hedulgo, B. H. Jr.*

POSTED ON  
 ✓ OF-40  
 8 JAN 1964

SECRET  
(When Filled In)

300: 20 DEC 63

NOTIFICATION OF PERSONNEL ACTION																	
1. SERIAL NUMBER 02753		2. NAME (LAST, FIRST MIDDLE) Hidalgo, Sergio															
3. NATURE OF PERSONNEL ACTION PROMOTION						4. EFFECTIVE DATE 12 22 63		5. CATEGORY OF EMPLOYMENT REGULAR									
6. FUNDS		V TO V		V TO CF		7. COST CENTER NO. CHARGEABLE 4132 2001 1000		8. ESC OR OTHER LEGAL AUTHORITY 50 USC 403 J									
9. ORGANIZATIONAL DESIGNATIONS DDP SPECIAL AFFAIRS STAFF U. S. FIELD FORWARD OPERATIONS STATION-JMWAVE CI SECTION						10. LOCATION OF OFFICIAL STATION JMWAVE											
11. POSITION TITLE OPS. OFFICER						12. POSITION NUMBER 0731		13. SERVICE DESIGNATION D									
14. CLASSIFICATION SCHEDULE (GS, LB, WH) GS			15. OCCUPATIONAL SERIES 0136.01			16. GRADE AND STEP 12 1		17. SALARY OR RATE 9475									
18. REMARKS  <div style="text-align: right; border: 1px solid black; padding: 5px; width: fit-content; margin: 0 auto;">30 DEC 63</div>																	
SPACE BELOW FOR EXCLUSIVE USE OF THE OFFICE OF PERSONNEL																	
19. ACTION CODE 22		20. EMPLOY CODE 10		21. OFFICE CODING NUMERICAL ALPHABETIC 40730 SAS		22. STATION CODE 00000		23. INTEGREE CODE		24. HDQM CODE 2		25. DATE OF BIRTH MO DA YR 05 27 19		26. DATE OF GRADE MO DA YR 12 22 63		27. DATE OF LEI MO DA YR 12 22 63	
28. NTE EXPIRES NO DA YR		29. SPECIAL REFERENCE		30. RETIREMENT DATA 1. CSC 2. FICA 3. NONE		31. SEPARATION DATA CODE		32. CORRECTION/CANCELLATION DATA TYPE NO DA YR <b>EOD DATA</b>				33. SECURITY REQ NO.		34. SEX			
35. VET PREFERENCE CODE 1 NONE 2 5 YR 3 10 YR		36. SERV COMP DATE NO DA YR		37. LONG COMP DATE NO DA YR		38. CAREER CATEGORY CBA DENY PROV TENR		39. FEGLI/HEALTH INSURANCE CODE CODE O WAIVER HEALTH INS CODE 1 YES 1 YES		40. SOCIAL SECURITY NO.							
41. PREVIOUS GOVERNMENT SERVICE DATA CODE 1 NO PREVIOUS SERVICE 2 BREAK IN SERVICE 3 BREAK IN SERVICE (LESS THAN 5 YRS) 4 BREAK IN SERVICE (MORE THAN 5 YRS)				42. LEAVE CAT CODE		43. FEDERAL TAX DATA FORM ELECTED CODE NO TAX EXEMPTIONS 1 YES 2 NO				44. STATE TAX DATA PLAN ELECTED CODE NO TAX STATE CODE EXEMP. 1 YES 2 NO							
SIGNATURE OR OTHER AUTHENTICATION																	
<div style="border: 1px solid black; padding: 5px; display: inline-block;">12/27/63 JK</div>																	

710



SECRET  
(When Filled In)

LLG: 25 APRIL 63

OAB										NOTIFICATION OF PERSONNEL ACTION												
1. SERIAL NUMBER 037630					2. NAME (LAST FIRST MIDDLE) Hange, W. J.																	
3. NATURE OF PERSONNEL ACTION EXCEPTED APPOINTMENT CAREER PROVISIONAL										4. EFFECTIVE DATE MO DA YR 04 29 63					5. CATEGORY OF EMPLOYMENT REGULAR							
6. FUNDS					7. V TO V					8. V TO CP					9. CP TO CP							
11. ORGANIZATIONAL DESIGNATIONS DDP SPECIAL AFFAIRS STAFF U. S. FIELD FORWARD OPERATIONS STATION-JMWAVE CI SECTION										10. LOCATION OF OFFICIAL STATION JMWAVE												
11. POSITION TITLE OPS OFFICER										12. POSITION NUMBER 0732					13. SERVICE DESIGNATION 0							
14. CLASSIFICATION SCHEDULE (GS, LB, etc.) GS					15. OCCUPATIONAL SERIES 0136.01					16. GRADE AND STEP 11 4					17. SALARY OR RATE 8840							
18. REMARKS																						
SPACE BELOW FOR EXCLUSIVE USE OF THE OFFICE OF PERSONNEL																						
19. ACTION CODE 13		20. EMPLOY CODE 10		21. OFFICE CODING NUMERIC ALPHABETIC 61730 SAS				22. STATION CODE 99999		23. INTEGREE CODE		24. HEDRY CODE 2		25. DATE OF BIRTH MO DA YR 05 27 19			26. DATE OF GRADE MO DA YR 03 17 58			27. DATE OF LEI MO DA YR 09 16 62		
28. NTE EXPIRES MO DA YR		29. SPECIAL REFERENCE		30. RETIREMENT DATA 1. LBC 2. FICA 3. NONE CODE 1				31. SEPARATION DATA CODE		32. CORRECTION/CANCELLATION DATA TYPE MO DA YR			33. SECURITY REQ NO 27630			34. SER MI						
35. VET. PREFERENCE CODE 0		36. SERV COMP DATE MO DA YR 07 16 46		37. LONG. COMP DATE MO DA YR 03 17 58		38. CAREER CATEGORY CODE P		39. CODE		40. WAIVER 1 YES 2 NO		41. HEALTH INSURANCE			42. SOCIAL SECURITY NO							
43. PREVIOUS GOVERNMENT SERVICE DATA CODE 1				44. LEAVE CAT CODE 8				45. FEDERAL TAX DATA FORM EXECUTED CODE NO TAX EXEMPTIONS				46. STATE TAX DATA FORM EXECUTED CODE NO TAX EXEMPTION STATE CODE										
SIGNATURE OR OTHER AUTHENTICATION																						
										<div style="border: 2px solid black; padding: 5px; display: inline-block;"> <p style="margin: 0;">POSTED</p> <p style="margin: 0; font-size: 1.5em;">5/10/63 WJK</p> </div>												

FORM 1150  
11-62

Use Previous Edition

SECRET 25 APR 1963

14-811  
14-811  
14-811  
(When Filled In)

SECRET  
(When Filled In)

RZR: 25 APR 63

NOTIFICATION OF PERSONNEL ACTION									
1. SERIAL NUMBER		2. NAME (LAST-FIRST MIDDLE)							
027630		HIDALCO B N JR							
3. NATURE OF PERSONNEL ACTION					4. EFFECTIVE DATE		5. CATEGORY OF EMPLOYMENT		
RESIGNATION					04 27 63		REGULAR		
6. FUNDS		7. COST CENTER NO. CHARGEABLE		8. CSC OR OTHER LEGAL AUTHORITY					
X		3232 1000 1000							
9. ORGANIZATIONAL DESIGNATIONS					10. LOCATION OF OFFICIAL STATION				
DDP/SPECIAL AFFAIRS STAFF FI/CI BRANCH					WASH., D.C.				
11. POSITION TITLE					12. POSITION NUMBER		13. SERVICE DESIGNATION		
OPS OFFICER					0592		D		
14. CLASSIFICATION SCHEDULE (GS, LB, etc)			15. OCCUPATIONAL SERIES		16. GRADE AND STEP		17. SALARY OR RATE		
GS			0136.01		11 4		8940		
18. REMARKS									
SPACE BELOW FOR EXCLUSIVE USE OF THE OFFICE OF PERSONNEL									
19. ACTION CODE									
45									
20. EMPLOY CODE									
10									
21. OFFICE CODING		22. STATUS CODE		23. INTEGRATE CODE		24. ADDRESS CODE		25. DATE OF BIRTH	
NUMERIC ALPHABETIC		CODE		CODE		CODE		MO DA YR	
								05 27 19	
26. DATE OF GRADE		27. DATE OF LEI		28. RETIREMENT DATA		29. SEPARATION DATA CODE		30. CORRECTION/CANCELLATION DATA	
MO DA YR		MO DA YR		1 - LSC 2 - FICA 3 - NONE		TYPE MO DA YR		EOD DATA	
31. VET PREFERENCE		32. SERV COMP DATE		33. LONG COMP DATE		34. CAREER CATEGORY		35. EGGH / HEALTH INSURANCE	
CODE		MO DA YR		MO DA YR		CODE		CODE	
0 - NONE 1 - 5 PT 2 - 10 PT						FAR - BENE TEMP		0 - WAIVER 1 - YES	
41. PREVIOUS GOVERNMENT SERVICE DATA			42. LEAVE CAT CODE		43. FEDERAL TAX DATA		44. STATE TAX DATA		
CODE			CODE		FORM EXEMPTED CODE		FORM EXEMPTED CODE		
0 - NO PREVIOUS SERVICE 1 - NO BREAK IN SERVICE 2 - BREAK IN SERVICE LESS THAN 2 YRS 3 - BREAK IN SERVICE MORE THAN 2 YRS			1 - YES 2 - NO		NO TAX EXEMPTIONS		1 - YES 2 - NO		
SIGNATURE OR OTHER AUTHENTICATION									
<div style="border: 1px solid black; padding: 5px; display: inline-block;"> <p style="text-align: center; margin: 0;">POSTED</p> <p style="text-align: center; margin: 0;">Hidalco B N Jr</p> </div>									

ARM: 20 NOV 62

SECRET  
(When Filled In)

NOTIFICATION OF PERSONNEL ACTION											
1. SERIAL NUMBER		2. NAME (LAST-FIRST-MIDDLE)									
027630		HICALGO B N JR									
3. NATURE OF PERSONNEL ACTION						4. EFFECTIVE DATE		5. CATEGORY OF EMPLOYMENT			
REASSIGNMENT						11 20 62		REGULAR			
6. FUNDS		7. COST CENTER NO. CHARGEABLE		8. CSC OR OTHER LEGAL AUTHORITY							
X		3232 1000 1000		50 USC 403 J							
9. ORGANIZATIONAL DESIGNATIONS						10. LOCATION OF OFFICIAL STATION					
DDP TASK FORCE "W" FI-CI BRANCH						WASH., D. C.					
11. POSITION TITLE				12. POSITION NUMBER		13. CAREER SERVICE DESIGNATION					
CPS OFFICER				0682		D					
14. CLASSIFICATION SCHEDULE (GS, LB, etc.)			15. OCCUPATIONAL SERIES		16. GRADE AND STEP		17. SALARY OR RATE				
GS			0136.01		11 4		8840				
18. REMARKS											
SPACE BELOW FOR EXCLUSIVE USE OF THE OFFICE OF PERSONNEL											
19. ACTION CODE	20. EMPLOY CODE	21. OFFICE CODING		22. STATION CODE	23. INTEGREE CODE	24. HOURS CODE	25. DATE OF BIRTH		26. DATE OF GRADE		27. DATE OF LEI
37	10	61300	TFW	75013	1	05 27 19					
28. NTE EXPIRES		29. SPECIAL REFERENCE	30. RETIREMENT DATA	31. SEPARATION DATA CODE	32. CORRECTION/CANCELLATION DATA		33. SECURITY REQ NO		34. SEN.		
							FOD DATA				
35. VET. PREFERENCE		36. SERV COMP DATE		37. LOANS COMP DATE		38. CAREER CATEGORY		39. FEGLI HEALTH INSURANCE		40. SOCIAL SECURITY NO	
41. PREVIOUS GOVERNMENT SERVICE DATA				42. LEAVE CAT		43. FEDERAL TAX DATA			44. STATE TAX DATA		
SIGNATURE OR OTHER AUTHENTICATION											
<div style="border: 1px solid black; padding: 5px; display: inline-block;"> <p style="text-align: center; margin: 0;">POSTED</p> <p style="text-align: center; margin: 0;"><i>[Signature]</i></p> </div>											

FORM 462 1150

Use Previous Edition

SECRET

1150  
EXCEPT THIS SYMBOL  
SHOULD BE  
REMOVED

16-811

(When Filled In)

IN ACCORDANCE WITH THE PROVISIONS OF PUBLIC LAW 87 - 793 AND  
 DCI MEMORANDUM DATED 1 AUGUST 1956, SALARY IS ADJUSTED AS FOLLOWS,  
 EFFECTIVE 16 OCTOBER 1962

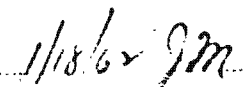
NAME	SERIAL	ORGN	FUNDS	OLD GRST SALARY	NEW GRST SALARY
HIDALGO B N JR	027630	64075	V	\$ 8,340	\$ 8,840

235-1000

1 Serial No		2 Name		3 Cost Center Number		4 LWOP Hours				
027630		HIDALGO B N JR		64 075 V /						
5 OLD SALARY RATE				6 NEW SALARY RATE				7 TYPE ACTION		
Grade	Step	Salary	Last EM Date	Grade	Step	Salary	Effective Date	PL	LSI	ADJ
S	11	3	\$ 8,080	03/19/61	S	11	4	\$ 8,340	09/16/62	
8 Remarks and Authorization										
<input checked="" type="checkbox"/> NO EXCESS LWOP    /    / EXCESS LWOP <input checked="" type="checkbox"/> IN PAY STATUS AT END OF WAITING PERIOD <input checked="" type="checkbox"/> IN LWOP STATUS AT END OF WAITING PERIOD CLERKS INITIALS <i>mg</i> AUDITED BY <i>[Signature]</i>										
PAY CHANGE NOTIFICATION										

AES: 17 JAN 62

SECRET  
(When Filled In)

NOTIFICATION OF PERSONNEL ACTION													
OCF													
1. SERIAL NUMBER		2. NAME (LAST-FIRST-MIDDLE)											
027630		HIDALGO B N JR											
3. NATURE OF PERSONNEL ACTION						4. EFFECTIVE DATE			5. CATEGORY OF EMPLOYMENT				
REASSIGNMENT						01 17 62			REGULAR				
6. FUNDS		X		V TO V		W TO CF		7. COST CENTER NO CHARGEABLE		8. CSC OR OTHER LEGAL AUTHORITY			
		CF TO V		CF TO CF		2235 1000 1000		50 USC 403 J					
9. ORGANIZATIONAL DESIGNATIONS						10. LOCATION OF OFFICIAL STATION							
DDP WH PLANS & OPERATIONS STAFF SECTION A						WASH., D.C.							
11. POSITION TITLE				12. POSITION NUMBER				13. CAREER SERVICE DESIGNATION					
OPS OFFICER				0641				D					
14. CLASSIFICATION SCHEDULE (GS, LB, MC)			15. OCCUPATIONAL SERIES			16. GRADE AND STEP			17. SALARY OR RATE				
GS			0136.01			11 3			8080				
18. REMARKS													
SPACE BELOW FOR EXCLUSIVE USE OF THE OFFICE OF PERSONNEL													
19. ACTION CODE	20. EMPLOY CODE	21. OFFICE CODING		22. STATION CODE		23. INTEGRAL CODE	24. HOURS CODE	25. DATE OF BIRTH		26. DATE OF GRADE		27. DATE OF LEI	
37	10	64075	WH	75013		1	1	05	27	19			
28. BTE EXPIRES		29. SPECIAL REFERENCE		30. RETIREMENT DATA		31. SEPARATION DATA CODE		32. CORRECTION/CANCELLATION DATA		33. SECURITY REG NO		34. SER	
										EOD DATA			
35. VET PREFERENCE		36. SERV COMP DATE		37. LONG COMP DATE		38. MIL SERV CREDIT/CD		39. FEGLI/HEALTH INSURANCE		40. SOCIAL SECURITY NO			
41. PREVIOUS GOVERNMENT SERVICE DATA				42. LEAVE CAT		43. FEDERAL TAX DATA			44. STATE TAX DATA				
SIGNATURE OR OTHER AUTHENTICATION													
<div style="text-align: right;">  </div>													

SECRET  
(When Filled In)

ARE: 18 AUG 1961

NOTIFICATION OF PERSONNEL ACTION									
1. SERIAL NUMBER		2. NAME (LAST FIRST MIDDLE)							
027630		HIDALGO B N JR							
3. NATURE OF PERSONNEL ACTION					4. EFFECTIVE DATE		5. CATEGORY OF EMPLOYMENT		
REASSIGNMENT AND TRANSFER TO VOUCHERED FUNDS					08 20 61		REGULAR		
6. FUNDS		7. COST CENTER NO CHARGEABLE		8. CODE OR OTHER LEGAL AUTHORITY					
X		2635 5000 6021		50 USC 403 J					
9. ORGANIZATIONAL DESIGNATIONS					10. LOCATION OF OFFICIAL STATION				
DDP WH BRANCH 4 FI CI SECTION					WASH., D. C.				
11. POSITION TITLE				12. POSITION NUMBER		13. CAPTER SERVICE DESIGNATION			
OPS OFFICER				0681		D			
14. CLASSIFICATION (GENERAL, SPECIAL, etc.)			15. GRADE AND STEP		16. SALARY OR RATE				
GS			0136.01		11 3 8060				
18. REMARKS									
SPACE BELOW FOR EXCLUSIVE USE OF THE OFFICE OF PERSONNEL									
19. ACTION CODE		21. OFFICE CODING		22. STATION CODE		23. INTEREGEE CODE		24. HOURS	
16 10		64450 WH		75013		1		05 27 19	
25. NTE EXPIRES		29. SPECIAL REFERENCE		30. RETIREMENT DATA		31. SEPARATION DATA CODE		32. CORRECTION/CANCELLATION DATA	
								EOD DATA	
35. NET PREFERENCE		36. SERV COMP DATE		37. LONG COMP DATE		38. MIL SERV CREDIT/LED		39. FEGLI/HEALTH INSURANCE	
41. PREVIOUS GOVERNMENT SERVICE DATA				42. LEAVE CAT		43. FEDERAL TAX DATA		44. STATE TAX DATA	
SIGNATURE OR OTHER AUTHENTICATION									

**SECRET**  
(When Filled In)

1. Serial No.		2. Name		3. Cost Center Number		4. LWOP Hours				
577690		HIDALGO R N JR		DDP/WH 3A UV						
5. OLD SALARY RATE				6. NEW SALARY RATE				7. TYPE ACTION		
Grade	Step	Salary	Last Eff. Date	Grade	Step	Salary	Effective Date	PSI	LSI	ADJ.
GS	11.2	7,820	09/20/59	11	3	8,040	04/19/61			
8. Remarks and Authentication										
<p><i>[Handwritten Signature]</i> NO EXCESS LWOP          IN PAY STATUS AT END OF WAITING PERIOD          / / IN LWOP STATUS AT END OF WAITING PERIOD</p> <p align="center"><b>ENGINEER</b> <i>WK</i></p>										
<b>PAY CHANGE NOTIFICATION</b>										

SECRET  
(When Filled In)

NOTIFICATION OF PERSONNEL ACTION

ADPD 09/21/64

1 NPA NUMBER 2 NAME (LAST/FIRST/INITIALS)

027630 MICALGO R N JR

3 NATURE OF PERSONNEL ACTION

4 EFFECTIVE DATE

5 CATEGORY OF EMPLOYMENT

CONV. TO CAREER EMPLOYEE STATUS

03 17 64

6 FUNDS  
X  
V TO V  
U TO U  
O TO O

7 COST CENTER NO (CHARGEABLE)

8 CM OR OTHER LEGAL AUTHORITY

4232 1990 1000

9 ORGANIZATIONAL DESIGNATION  
DDP/SAS

10 LOCATION OF OFFICIAL STATION

11 POSITION TITLE

12 POSITION NUMBER

13 LETTER OF TITLE DESIGNATION  
U

14 CLASSIFICATION SCHEDULE (GS, GS-15, etc.)

15 OCCUPATIONAL SERIES

16 GRADE AND STEP

17 SALARY OR RATE

18 REMARKS

SIGNATURE OR OTHER AUTHENTICATION

*[Handwritten Signature]*



14-00000

IN ACCORDANCE WITH THE PROVISIONS OF P. L. 86-568 AND DCI MEMO DATED  
1 AUGUST 1956, SALARY IS ADJUSTED AS FOLLOWS EFFECTIVE 10 JULY 1960.

SO	NAME	SERIAL	ORGN	GR-ST	OLD SALARY	NEW SALARY
D	HIDALGO B N JR	527630	46 17	GS-11 2	\$ 7,270	\$ 7,820

/S/

EMMETT D. ECHOLS  
DIRECTOR OF PERSONNEL

SECRET

AES: 24 JUNE 1960 **NOTIFICATION OF PERSONNEL ACTION**

1. Serial No. 527630	2. Name (Last-First-Middle) HIOALGO B N JR	3. Date Of Birth Mo: 05, Da: 27, Yr: 19	4. Sex: Male 5. Race: M	6. CS-FOO Mo: 03, Da: 17, Yr: 58
7. ASD Mo: 07, Da: 16, Yr: 46	8. CSC Permit No-1: Code 1, No-2: 1	9. CSC Or Other Legal Authority 50 USCA 403 d	10. Appt. Authority Mo: , Da: , Yr:	11. FEGLI Mo: 03, Da: 17, Yr: 58
12. LPO		13. Grade No-1: Code 2, No-2: 2		

PREVIOUS ASSIGNMENT

14. Organizational Designations DDS OTR OPERATIONS SCHOOL COVERT TRAINING	Code 1172	15. Location Of Official Station WASH., D. C.	Station Code 75013
16. Dist. Field Dept-1: Code 3, Util-3: Code 3, Frm-5: Code 3	17. Position Title INSTRUCTOR OPERS	18. Position No. 1014	19. Serv. 20. Occup. Series 02 1711.50
21. Grade & Step 11 2	22. Salary Or Rate \$ 7270	23. SD D	24. Date Of Grade: 25. PSI Due Mo: 03, Da: 17, Yr: 58; Mo: 09, Da: 20, Yr: 59
26. Approp. Number 9 7500 30 018			

ACTION

27. Nature Of Action REASSIGNMENT	Code 57	28. Eff. Date Mo: 09, Da: 24, Yr: 60	29. Type Of Employee REGULAR	Code 01	30. Separation Data
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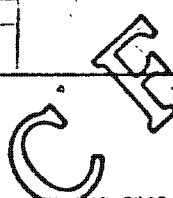
PRESENT ASSIGNMENT

31. Organizational Designations DDP WH BRANCH 4	Code 4617	32. Location Of Official Station WASH., D. C.	Station Code 75013
33. Dist. Field Dept-1: Code 1, Util-3: Code 1, Frm-5: Code 1	34. Position Title OPS OFFICER	35. Position No. 0626	36. Serv. 37. Occup. Series 05 0136.01
38. Grade & Step 11 2	39. Salary Or Rate \$ 7270	40. SD D	41. Date Of Grade: 42. PSI Due Mo: 03, Da: 17, Yr: 58; Mo: 03, Da: 19, Yr: 60
43. Approp. Number 0135 1000 1000			

44. Remarks

06-27-60 JJK

SECRET  
WHEN FILLED IN

1. EMP. SERIAL NO. 527630		2. NAME HIDALGO B H JK			3. ASSIGNED ORGAN. DJS/TRNG 21		4. FUND UV		5. ALLOCATION		
6. OLD SALARY RATE					7. NEW SALARY RATE						
GRADE	STEP	SALARY	LAST EFFECTIVE DATE			GRADE	STEP	SALARY	EFFECTIVE DATE		
GS 11	1	\$ 7,000	03	17	58	GS 11	2	\$ 7,270	09	20	59
TO BE COMPLETED BY THE OFFICE OF THE COMPTROLLER											
8. CHECK ONE <input checked="" type="checkbox"/> NO EXCESS LWOP <input type="checkbox"/> EXCESS LWOP						9. NUMBER OF HOURS LWOP					
IF EXCESS LWOP CHECK FOLLOWING:						10. INITIALS OF CLERK					
<input type="checkbox"/> IN PAY STATUS AT END OF WAITING PERIOD						ACCEPTED BY					
<input type="checkbox"/> IN LWOP STATUS AT END OF WAITING PERIOD											
TO BE COMPLETED BY THE OFFICE OF PERSONNEL											
12. PROJECTED SALARY RATE AND EFFECTIVE DATE						13. REMARKS					
GRADE	STEP	SALARY	09	20	59	756					
14. AUTHENTICATION											
 PERIODIC STEP INCREASE - AUTHENTICATION											

FORM NO. 560a  
1 MAR. 58

SECRET

PERSONNEL FOLDER

101

SECRET

JEC:12 JUNE 59 **NOTIFICATION OF PERSONNEL ACTION**

1. Serial No. 527630		2. Name (Last-First-Middle) HIDALGO B N JR			3. Date Of Birth Mo. Da Yr. 05 27 19			4. Vet. Pref. Non-0 5 Pt-1 10 Pt-2		5. Sex M 1		6. CSC Code Mo. Da Yr. 03 17 58	
7. SCD Mo. Da Yr. 07 16 46		8. CSC Exam Yes-1 No-2		9. CSC Or Other Legal Authority Code 1 50 USCA 403.8		10. Appr. Alt. Day Mo. Da Yr.		11. FEGLI Yes-1 No-2		12. LCB Mo. Da Yr. 03 17 58		13. Exam Code Yes-1 No-2	

**PREVIOUS ASSIGNMENT**

14. Organizational Designations DDP WH BRANCH 1P1 CENTRAL AMERICA SECTION				Code 4613		15. Location Of Official Station WASH., D.C.				Station Code 75013		
16. Dept. Field Dept - 1 USIid - 3 Fign - 5		17. Position Title Code 2 AREA OPS OF		18. Position No. 0486		19. Serv. GS		20. Occup. Series 0136.01				
21. Grade & Step 11 1		22. Salary Or Rate \$ 7030		23. SD 0		24. Date Of Grade Mo. Da Yr. 03 17 58		25. PSI Due Mo. Da Yr. 09 20 59		26. Appropriation Number 8 3500 20		

**ACTION**

27. Feature Of Action REASSIGNMENT CONFIDENTIAL FUNDS		28. Eff. Date Mo. Da Yr. 06 14 59		29. Type Of Employee REGULAR		Code 01		30. Separation Data	
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**PRESENT ASSIGNMENT**

31. Organizational Designations DOS OTR OPERATIONS SCHOOL COVERT TRAINING				Code 1172		32. Location Of Official Station WASH., D. C.				Station Code 75013	
33. Dept. Field Dept - 1 USIid - 3 Fign - 5		34. Position Title Code 3 INSTRUCTOR SPERS		35. Position No. 1914		36. Serv. GS		37. Occup. Series 1711.50			
38. Grade & Step 11 1		39. Salary Or Rate \$ 7030		40. SD 0		41. Date Of Grade Mo. Da Yr. 03 17 58		42. PSI Due Mo. Da Yr. 07 20 59		43. Appropriation Number 9 7500 20 018	

44. Remarks

POSTED

CP

S E C R E T

GENERAL SCHEDULE SALARY INCREASE RETROACTIVELY EFFECTIVE  
12 JANUARY 1958 AUTHORIZED BY P. L. 85 - 462 AND DCI  
DIRECTIVE. SALARY AS OF 15 JUNE 1958 ADJUSTED AS FOLLOWS

NAME	SERIAL	GRADE-STEP	OLD SALARY	NEW SALARY
HIDALGO R N JR	127630	GS-11-1	\$ 6,390	\$ 7,030

GORDON M. STEWART  
/S/ DIRECTOR OF PERSONNEL

S E C R E T

**SECRET**  
(When Filled In)

**NOTIFICATION OF PERSONNEL ACTION**

VL 16 MAY 58

1. Serial No. 127630		2. Name (Last-First-Middle) BALMES N. HIDALGO, JR. HIDALGO B N JR			3. Date Of Birth Mo. Da. Yr. 05 27 19			4. Vet. Pref. None-0 5 Pt-1 10 Pt-2 11		5. Sex M 1		6. GS - EOS Mo. Da. Yr. 03 17 58			
7. SCD		8. CSC Retmt.			9. CSC Or Other Legal Authority			10. Appt Affidav.		11. FEGLI		12. LCD		13. Over-Led	
Mo.	Da.	Yr.	Yes-1	Code	Mo.	Da.	Yr.	Yes-1	Code	Mo.	Da.	Yr.	Yes-1	Code	
07	16	46	No-2	1	50 USCA 403 d	03	13	58	No-2	1	03	17	58	No-2	2

**PREVIOUS ASSIGNMENT**

14. Organizational Designations		Code	15. Location Of Official Station		Station Code
16. Dept. - Field Dept - 2 USIid - 4 Frgn - 6		Code	18. Position No.		19. Serv. 20. Occup. Ser. or
21. Grade & Step		22. Salary Or Rate		23. SD	24. Date Of Grade 25. PSI Due
		\$			Mo. Da. Yr. Mo. Da. Yr.
26. Appropriation Number					

**ACTION**

27. Nature Of Action EXCEPTED APPOINTMENT CORRECTION*		Code	28. Eff Date Mo. Da. Yr.	29. Type Of Employee REGULAR	Code	30. Separation Data
		13	03 17 58			01

**PRESENT ASSIGNMENT**

31. Organizational Designations DDP WH BRANCH 111 CENTRAL AMERICA SECTION		Code	32. Location Of Official Station WASH., D.C.		Station Code
		4613			75013
33. Dept. - Field Dept - 2 USIid - 4 Frgn - 6		Code	35. Position No.		36. Serv. 37. Occup. Series
2			0486		GS 0136.01
38. Grade & Step 11 1		39. Salary Or Rate \$ 6300		40. SD	41. Date Of Grade 42. PSI Due
					Mo. Da. Yr. Mo. Da. Yr.
					11 17 58 03 12 59

44. Remarks

\*THIS ACTION CORRECTS SF 1150 EFF 17 MAR 58, ITEM #2, THE NAME, WHICH READ BALMES N. HIDALGO TO READ BALMES N. HIDALGO, JR.

CORRECTED  
175

**SECRET**  
(When Filled In)

NOTIFICATION OF PERSONNEL ACTION																	
LVL 17 MAR 58																	
1. Serial No.		2. Name (Last-First-Middle)				3. Date Of Birth			4. Vet. Pref.		5. Sex		6. CS - EOD				
127630		BALMES N. HIDALGO HIDALGO BALMES N				Mo.	Da.	Yr.	None-0	Code	M	1	Mo.	Da.	Yr.		
05		27		19	5 Pt-1		10 Pt-2	1				03		17	58		
7. SCD		8. CSC Point		9. CSC Or Other Legal Authority			10. Appt. Affidav.			11. FEGLI		12. LCD		13. <small>100% Serv. Credit</small> Code			
Mo.	Da.	Yr.	Yes-1	Code				Mo.	Da.	Yr.	Yes-1	Code	Mo.	Da.	Yr.		
07	16	36	No-2	1	50 USCA 403			03	13	53	No-2	1	03	17	53	No-2	2

**PREVIOUS ASSIGNMENT**

14. Organizational Designations				Code	15. Location Of Official Station				Station Code			
16. Dept - Field		17. Position Title				18. Position No.		19. Serv.	20. Occup. Series			
Dept - 2	Code											
USStd - 4												
Frqn - 5												
21. Grade & Step		22. Salary Or Rate		23. SD		24. Date Of Grade			25. PSI Due		26. Appropriation Number	
		\$				Mo.	Da.	Yr.	Mo.	Da.	Yr.	

**ACTION**

27. Nature Of Action		Code	28. Eff. Date		29. Type Of Employee		Code	30. Separation Data	
EXCEPTED APPOINTMENT		13	Mo.	Da.	Yr.	REGULAR		01	
			03	17	58				

**PRESENT ASSIGNMENT**

31. Organizational Designations				Code	32. Location Of Official Station				Station Code			
DDP WH BRANCH 111 CENTRAL AMERICA SECTION				4613	WASH., D.C.				75013			
33. Dept - Field		34. Position Title				35. Position No.		36. Serv.	37. Occup. Series			
Dept - 2	Code	AREA OPS OF				0486		US	0136.01			
USStd - 4												
Frqn - 6	2											
38. Grade & Step		39. Salary Or Rate		40. SD		41. Date Of Grade			42. PSI Due		43. Appropriation Number	
11 1		\$ 6300		D		Mo.	Da.	Yr.	Mo.	Da.	Yr.	
						02	117	58	09	120	53	8 3500 20

44. Remarks

**POSTED**  
7 MAR 58  
P. *[Signature]*

FITNESS RPTS

1966 - 1969



SECRET

(When Filled In)

FITNESS REPORT				EMPLOYEE SERIAL NUMBER			
				027630			
<b>SECTION A GENERAL</b>							
1. NAME (Last) (First) (Middle)			2. DATE OF BIRTH	3. SEX	4. GRADE	5. SD	
HIDALGO, RAFAEL J. JR.			27 Nov 1919	M	GS-12	D	
6. OFFICIAL POSITION TITLE			7. OFF. DIV/BR OF ASSIGNMENT		8. CURRENT STATION		
Ops Officer			DDP/770		Headquarters		
9. CHECK (X) TYPE OF APPOINTMENT				10. CHECK (X) TYPE OF REPORT			
<input checked="" type="checkbox"/> CAREER <input type="checkbox"/> RESERVE <input type="checkbox"/> TEMPORARY				<input checked="" type="checkbox"/> ANNUAL <input type="checkbox"/> REASSIGNMENT SUPERVISOR <input type="checkbox"/> REASSIGNMENT EMPLOYEE			
CAREER-PROVISIONAL (See instructions - Section C)				SPECIAL (Specify):			
11. DATE REPORT DUE IN O.P.				12. REPORTING PERIOD (From to)			
				15 March - 31 October 1965			
<b>SECTION B PERFORMANCE EVALUATION</b>							
<p><b>W - Weak</b> Performance ranges from wholly inadequate to slightly less than satisfactory. A rating in this category requires positive remedial action. The nature of the action could range from counseling, to further training, to placing on probation, to reassignment or to separation. Describe action taken or proposed in Section C.</p> <p><b>A - Adequate</b> Performance meets all requirements. It is entirely satisfactory and is characterized neither by deficiency nor excellence.</p> <p><b>P - Proficient</b> Performance is more than satisfactory. Desired results are being produced in a proficient manner.</p> <p><b>S - Strong</b> Performance is characterized by exceptional proficiency.</p> <p><b>O - Outstanding</b> Performance is so exceptional in relation to requirements of the work and in comparison to the performance of others doing similar work as to warrant special recognition.</p>							
<b>SPECIFIC DUTIES</b>							
List up to six of the most important specific duties performed during the rating period. Insert rating letter which best describes the manner in which employee performs EACH specific duty. Consider ONLY effectiveness in performance of that duty. All employees with supervisory responsibilities MUST be rated on their ability to supervise (indicate number of employees supervised).							
SPECIFIC DUTY NO. 1 Headquarters desk officer responsible for the support of Miami Station CI/CE activities and operations.						RATING LETTER	
						P	
SPECIFIC DUTY NO. 2 Advisor to various components of the WH and WE Divisions on Cuban operations with specific reference to the Cuban Security Intelligence Service, organization, modus operandi and						RATING LETTER	
						S	
SPECIFIC DUTY NO. 3 Briefing representatives of personnel. foreign liaison services and selected agents visiting in Washington on the Cuban Security and Intelligence Services and his own unique experience in the Communist Party.						RATING LETTER	
						S	
SPECIFIC DUTY NO. 4 Translator/interpreter: Served as consultant to WH Division on Cuban Spanish.						RATING LETTER	
						S	
SPECIFIC DUTY NO. 5						RATING LETTER	
SPECIFIC DUTY NO. 6						RATING LETTER	
<b>OVERALL PERFORMANCE IN CURRENT POSITION</b>							
Take into account everything about the employee which influences his effectiveness in his current position such as performance of specific duties, productivity, conduct on job, cooperativeness, pertinent personal traits or habits, and particular limitations or talents. Based on your knowledge of employee's overall performance during the rating period, place the letter in the rating box corresponding to the statement which most accurately reflects his level of performance.						RATING LETTER	
						S	
4 JAN 1965							

SECRET

SECTION C

NARRATIVE COMMENTS

OFFICE

Indicate significant strengths or weaknesses demonstrated in current position keeping in proper perspective their relationship to overall performance. State suggestions made for improvement of work performance. Give recommendations for training. Comment on foreign language competence, if required for current position. Amplify or explain ratings given in Section B. Provide basis for determining future personnel action. Manner of performance of managerial or supervisory duties must be described, if applicable.

Mr. Hidalgo is an able intelligence officer, devoted to his profession and selfless in his desire to be of service to the Government. Although he has suffered ill health in recent years, he was insistent that he be among the first to be sent to the Dominican Republic when the crisis occurred.

An intense person, Mr. Hidalgo is industrious, works well under pressure and sets high standards for his performance. Because he is intent on getting things done, he is occasionally hasty in judgment and in written presentation of the results of his research and conclusions. He is perceptive, quickly accepts suggestions and offers counter-proposals with cogent argument. Mr. Hidalgo was not in a supervisory capacity. He was cost conscious; always endeavoring to be conservative where possible.

He is an effective and cooperative member of an office, ready to assume responsibility and to help his colleagues. Thanks to his unique experience on the Cuban target, he has wide knowledge of the Cuban problem and is, in fact, an expert on the Cuban Security and Intelligence Services.

SECTION D

CERTIFICATION AND COMMENTS

1. BY EMPLOYEE		
I CERTIFY THAT I HAVE SEEN SECTIONS A, B, AND C OF THIS REPORT		
DATE	SIGNATURE OF EMPLOYEE	
9 December 1965	<i>[Signature]</i>	
2. BY SUPERVISOR		
MONTHS EMPLOYEE HAS BEEN UNDER MY SUPERVISION	IF THIS REPORT WAS NOT SHOWN TO EMPLOYEE, GIVE EXPLANATION	
8 months		
DATE	OFFICIAL TITLE OF SUPERVISOR	TYPED OR PRINTED NAME AND SIGNATURE
9 December 1965	C/WH/C/MO/FI-CI	<i>[Signature]</i> Susan L. Darling
3. BY REVIEWING OFFICIAL		
COMMENTS OF REVIEWING OFFICIAL		
I concur with the supervisor's assessment of Mr. Hidalgo with <del>one</del> exception to the statement that Subject works well under pressure. He is indeed an intense person and, under great pressure, his involvement affects his performance; and even more important, it has a very bad effect on his health. With this consideration noted, the undersigned thinks very highly of Mr. Hidalgo and would be pleased to be associated with him again.		
DATE	OFFICIAL TITLE OF REVIEWING OFFICIAL	TYPED OR PRINTED NAME AND SIGNATURE
9 December 1965	C/WH/C/MO	Walter T. Cini <i>[Signature]</i>

SECRET

**SECRET**  
(When Filled In)

FITNESS REPORT						EMPLOYEE SERIAL NUMBER	
						027630	
<b>SECTION A</b>				<b>GENERAL</b>			
1. NAME (Last) (First) (Middle)			2. DATE OF BIRTH	3. SEX	4. GRADE	5. SD	
HIDALGO, Balmes N.			27 May 1919	M	12	D	
6. OFFICIAL POSITION TITLE			7. OFF/DIV/BR OF ASSIGNMENT		8. CURRENT STATION		
Ops Officer			DDP/SAS		Washington		
9. CHECK (X) TYPE OF APPOINTMENT				10. CHECK (X) TYPE OF REPORT			
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
CAREER-PROVISIONAL (See instructions - Section C)				XX ANNUAL		REASSIGNMENT SUPERVISOR	
SPECIAL (Specify):				SPECIAL (Specify):			
11. DATE REPORT DUE IN O.P.				12. REPORTING PERIOD (From - to)			
31 January 1965				9 April 1964--15 March 1965			
<b>SECTION B</b>				<b>PERFORMANCE EVALUATION</b>			
<p><b>W - Weak</b> Performance ranges from wholly inadequate to slightly less than satisfactory. A rating in this category requires positive remedial action. The nature of the action could range from counseling, to further training, to placing on probation, to reassignment or to separation. Describe action taken or proposed in Section C.</p> <p><b>A - Adequate</b> Performance meets all requirements. It is entirely satisfactory and is characterized neither by deficiency nor excellence.</p> <p><b>P - Proficient</b> Performance is more than satisfactory. Desired results are being produced in a proficient manner.</p> <p><b>S - Strong</b> Performance is characterized by exceptional proficiency.</p> <p><b>O - Outstanding</b> Performance is so exceptional in relation to requirements of the work and in comparison to the performance of others doing similar work as to warrant special recognition.</p>							
<b>SPECIFIC DUTIES</b>							
List up to six of the most important specific duties performed during the rating period. Insert rating letter which best describes the manner in which employee performs EACH specific duty. Consider ONLY effectiveness in performance of that duty. All employees with supervisory responsibilities MUST be rated on their ability to supervise (indicate number of employees supervised).							
SPECIFIC DUTY NO. 1						RATING LETTER	
Participated (with other WH/SA/CI officers) in the handling and debriefing of a defected intelligence officer housed in the Headquarters area.						S	
SPECIFIC DUTY NO. 2						RATING LETTER	
Served as Headquarters desk case officer for several counterintelligence operations--prepared cables, dispatches, and memoranda pertaining to these operations.						P	
SPECIFIC DUTY NO. 3						RATING LETTER	
Assisted in translations and preparation of operational documents in Spanish (s/w messages, cover letters, owl messages, etc.).						S	
SPECIFIC DUTY NO. 4						RATING LETTER	
Served as case officer for a counterintelligence operation (the agent was located [redacted]) which included the debriefing, assessing, training, and dispatching of the agent to a denied area (Cuba).						P	
SPECIFIC DUTY NO. 5						RATING LETTER	
SPECIFIC DUTY NO. 6						RATING LETTER	
<b>OVERALL PERFORMANCE IN CURRENT POSITION</b>						RATING LETTER	
Take into account everything about the employee which influences his effectiveness in his current position such as performance of specific duties, productivity, conduct on job, cooperativeness, pertinent personal traits or habits, and particular limitations or talents. Based on your knowledge of employee's overall performance during the rating period, place the letter in the rating box corresponding to the statement which most accurately reflects his level of performance.						S	
29 MAR 1965							

SECRET

**SECTION C NARRATIVE COMMENTS**

Indicate significant strengths or weaknesses demonstrated in current position keeping in proper perspective their relationship to overall performance. State suggestions made for improvement of work performance. Give recommendations for training. Comment on foreign language competence, if required for current position. Amplify or explain ratings given in Section B to provide basis for determining future personnel action. Manner of performance of managerial or supervisory duties must be described if applicable.

Mr. Hidalgo's fluent knowledge of Cuban Spanish, his previous experience in DD/P Cuban operations, and his broad knowledge of Cuba (people, geography, customs, etc.) made him a particularly useful and versatile operations officer during his assignment in the WH/SA counterintelligence operations section. As indicated in Section B, (specific duties) he performed a wide variety of duties.

Mr. Hidalgo approached and performed his assignments with enthusiasm, keenness, dedication, and promptness. He displayed a particular talent for conducting debriefings, and it was in this type activity that he performed best. He also writes well which added to his debriefing capability as well as to his performance as a Headquarters desk operations officer in writing cables, dispatches, niempranda, etc. Mr. Hidalgo is cost conscious and effective in the use of space, equipment and funds. He does not hold a supervisory position.

Mr. Hidalgo performed most of his duties with a minimum of supervision. In a few instances, however, he had a tendency (in his eagerness and desire to get the job done well) to become impatient with the slow and deliberate pace of progress which is sometimes necessary in operational activities. In these few instances, Mr. Hidalgo's work required supervision by a senior operations officer.

**SECTION D CERTIFICATION AND COMMENTS**

**1. BY EMPLOYEE**

I CERTIFY THAT I HAVE SEEN SECTIONS A, B, AND C OF THIS REPORT

DATE: 23 March 65 SIGNATURE OF EMPLOYEE: *Mr. Hidalgo*

**2. BY SUPERVISOR**

MONTHS EMPLOYEE HAS BEEN UNDER MY SUPERVISION: 11 Months IF THIS REPORT HAS NOT BEEN SHOWN TO EMPLOYEE, GIVE EXPLANATION

DATE: 23 March 1965 OFFICIAL TITLE OF SUPERVISOR: WH/SA/CI/COPS TYPED OR PRINTED NAME AND SIGNATURE: Richard Tansing

**3. BY REVIEWING OFFICIAL**

**COMMENTS OF REVIEWING OFFICIAL**

Mr. Hidalgo is a sound operations officer with native fluency in Spanish. His impatience is with administrative delays rather than with operational problems which he understands fully and handles well. He has had problems with his health but these largely have been overcome and in the past 9 months have not impeded his operational usefulness. As of the date of this fitness report, he appears fully capable of handling any CI or FI operation assigned to him.

DATE: 23 Mar 65 OFFICIAL TITLE OF REVIEWING OFFICIAL: C WH/SA CI (WH/C/SP) TYPED OR PRINTED NAME AND SIGNATURE: Harold F. Swenson

SECRET

**SECRET**  
(When Filled In)

FITNESS REPORT				EMPLOYEE SERIAL NUMBER	
				027630	
<b>SECTION A</b>			<b>GENERAL</b>		
1. NAME <i>Richard L. H. Jr.</i> (Last) (First) (Middle)			2. DATE OF BIRTH 27 May 1919	3. SEX Male	4. GRADE GS-11
5. SD D			6. OFFICIAL POSITION TITLE OPS OFFICER		7. OFF/DIV/BR/OF ASSIGNMENT IDP/S.A.S.
8. CURRENT STATION JMWAVE			9. CHECK (X) TYPE OF APPOINTMENT		
<input type="checkbox"/> CAREER <input type="checkbox"/> RESERVE <input type="checkbox"/> TEMPORARY <input type="checkbox"/> CAREER-PROVISIONAL (See Instructions - Section C) <input type="checkbox"/> SPECIAL (Specify)			10. CHECK (X) TYPE OF REPORT		
			<input type="checkbox"/> INITIAL <input type="checkbox"/> REASSIGNMENT SUPERVISOR <input type="checkbox"/> ANNUAL <input type="checkbox"/> REASSIGNMENT EMPLOYEE <input checked="" type="checkbox"/> SPECIAL (Specify): Promotion		
11. DATE REPORT DUE IN O.P.			12. REPORTING PERIOD (From - to)		
			6 May 1963 to 5 September 1963		
<b>SECTION B</b>					
<b>PERFORMANCE EVALUATION</b>					
<p><b>W - Weak</b> Performance ranges from wholly inadequate to slightly less than satisfactory. A rating in this category requires positive remedial action. The nature of the action could range from counseling, to further training, to placing on probation, to reassignment or to separation. Describe action taken or proposed in Section C.</p> <p><b>A - Adequate</b> Performance meets all requirements. It is entirely satisfactory and is characterized neither by deficiency nor excellence.</p> <p><b>P - Proficient</b> Performance is more than satisfactory. Desired results are being produced in a proficient manner.</p> <p><b>S - Strong</b> Performance is characterized by exceptional proficiency.</p> <p><b>O - Outstanding</b> Performance is so exceptional in relation to requirements of the work and in comparison to the performance of others doing similar work as to warrant special recognition.</p>					
<b>SPECIFIC DUTIES</b>					
List up to six of the most important specific duties performed during the rating period. Insert rating letter which best describes the manner in which employee performs EACH specific duty. Consider ONLY effectiveness in performance of that duty. All employees with supervisory responsibilities MUST be rated on their ability to supervise (indicate number of employees supervised).					
SPECIFIC DUTY NO. 1					RATING LETTER
To effect security screenings of PBRUMEN refugees arriving in the JMWAVE area from PBRUMEN in joint collaboration with ODENVY representatives.					S
SPECIFIC DUTY NO. 2					RATING LETTER
To interrogate PBRUMEN security suspects, surfaced by the above screenings and other means, in conjunction with representatives of the KUJUMP interrogation center [redacted] DEB [redacted]					S
SPECIFIC DUTY NO. 3					RATING LETTER
To supervise the interrogation efforts of three KUJUMP interrogators connected with the JMWAVE/KUJUMP KUDESK debriefing program.					P
SPECIFIC DUTY NO. 4					RATING LETTER
To prepare and present to his immediate supervisor completed interrogation reports.					P
SPECIFIC DUTY NO. 5					RATING LETTER
<div style="border: 1px solid black; padding: 5px; display: inline-block;">           POSTED BY            [Signature]         </div>					
SPECIFIC DUTY NO. 6					RATING LETTER
<b>OVERALL PERFORMANCE IN CURRENT POSITION</b>					
Take into account everything about the employee which influences his effectiveness in his current position such as performance of specific duties, productivity, conduct on job, cooperativeness, pertinent personal traits or habits, and particular limitations or talents. Based on your knowledge of employee's overall performance during the rating period, place the letter in the rating box corresponding to the statement which most accurately reflects his level of performance.					RATING LETTER
27 SEP 1963					S

SECRET

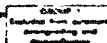
(When Filled In)

SECTION C		NARRATIVE COMMENTS	
<p>Indicate significant strengths or weaknesses demonstrated in current position keeping in mind their relationship to overall performance. State suggestions made for improvement of work performance. Give recommendations for promotion. Comment on foreign language competence, if required for current position. Amplify or explain ratings given in Section B to provide basis for determining future personnel action. Manner of performance of managerial or supervisory duties must be described, if applicable.</p>			
<p>The person being rated is a conscientious devoted <sup>SEP 26 2 00 PM '63</sup> <del>and</del> <sup>NAUR</sup> <del>individual</del> who has demonstrated an extraordinary ability to get along with his co-workers and other ODYOKE representatives with whom he is collaborating. He receives his assignments cheerfully and with enthusiasm and approaches all of his tasks with great zeal. He devotes an inordinate amount of his own personal time to his duties in an effort to achieve perfection and sets very high standards for his own performance. The person being rated speaks native Spanish and is able to accomplish all of his interrogations in Spanish. This ability is a great asset to him in his work and redounds in benefits to the KUDESK effort of the Station.</p> <p>The person being rated is an accomplished interrogator and thus receives very little guidance in his work. His ability to trap security suspects in contradictions is unique and is paying dividends in the WAVE KUDESK field of endeavor. He has shown mature judgment in the handling of complex security cases, balance in appraising the interrogation results and in recommending disposal action, and proficiency in the preparation of his interrogation reports. He is currently supervising the interrogation activities of three KUJUMP interrogators <del>and</del> and has shown an ability in establishing personal rapport with these interrogators and proficiency in directing their activities. It is recommended from the standpoint of his career development that after the completion of his current assignment, the person being rated be moved into an assignment involving the handling of agents in the KUDESK field of effort.</p>			
SECTION D		CERTIFICATION AND COMMENTS	
1. BY EMPLOYEE			
I CERTIFY THAT I HAVE SEEN SECTIONS A, B, AND C OF THIS REPORT			
DATE	SIGNATURE OF EMPLOYEE		
2. BY SUPERVISOR			
MONTHS EMPLOYEE HAS BEEN UNDER MY SUPERVISION	IF THIS REPORT HAS NOT BEEN SHOWN TO EMPLOYEE, GIVE EXPLANATION		
4 months	At time preparation this report employee was on TDY Hqs and leave. Will be shown him upon return.		
DATE	OFFICIAL TITLE OF SUPERVISOR	TYPED OR PRINTED NAME AND SIGNATURE	
4 September 1963	Chief, CI Branch, JMWAVE	/s/ Neil T. PICKWORTH (signed in pseudo on Fld. Trans.)	
3. BY REVIEWING OFFICIAL			
COMMENTS OF REVIEWING OFFICIAL			
<p>Subject is a hard working, dedicated, productive intelligence officer who has completely mastered those basic tools of the trade which are needed in CI activities. Subject has and uses native Spanish language fluency. Subject's performance during the period covered by this fitness report warrants an overall evaluation of "Strong." As a result, it is believed that Subject is a well-qualified journeyman who has earned a promotion to the grade of GS-12. Subject is strongly recommended for promotion to the grade of GS-12. Subject has additional growth potential as an intelligence officer. Subject's activities come to the attention of the Reviewing Officer on a bi-weekly basis.</p>			
DATE	OFFICIAL TITLE OF REVIEWING OFFICIAL	TYPED OR PRINTED NAME AND SIGNATURE	
18 September 1963	Chief of Station, JMWAVE	/s/ Andrew K. REUTEMAN (signed in pseudo on Fld. Trans.)	

SECRET

**SECRET**  
(When Filled In)

FITNESS REPORT				EMPLOYEE SERIAL NUMBER			
SEP 1962 <i>[Signature]</i>				027630			
<b>SECTION A</b>				<b>GENERAL</b>			
1. NAME (Last) (First) (Middle)			2. DATE OF BIRTH	3. SEX	4. GRADE	5. SD	
HIDALGO, BALMES			27 May 1919	M	GS-11	D	
6. OFFICIAL POSITION TITLE			7. OFF/DIV/BR OF ASSIGNMENT		8. CURRENT STATION		
Ops Officer			DDP WH P&O SEC A.				
9. CHECK (X) TYPE OF APPOINTMENT				10. CHECK (X) TYPE OF REPORT			
CAREER		RESERVE	TEMPORARY	INITIAL	REASSIGNMENT SUPERVISOR		
					REASSIGNMENT EMPLOYEE		
CAREER-PROVISIONAL (See Instructions - Section C)				SPECIAL (Specify):			
11. DATE REPORT DUE IN O.P.				12. REPORTING PERIOD (From - to)			
30 October 1962				17 Jan 62 - 30 Sep 62			
<b>SECTION B</b>				<b>PERFORMANCE EVALUATION</b>			
<p>W - <u>Weak</u> Performance ranges from wholly inadequate to slightly less than satisfactory. A rating in this category requires positive remedial action. The nature of the action could range from counseling, to further training, to placing on probation, to reassignment or to separation. Describe action taken or proposed in Section C.</p> <p>A - <u>Adequate</u> Performance meets all requirements. It is entirely satisfactory and is characterized neither by deficiency nor excellence.</p> <p>P - <u>Proficient</u> Performance is more than satisfactory. Desired results are being produced in a proficient manner.</p> <p>S - <u>Strong</u> Performance is characterized by exceptional proficiency.</p> <p>O - <u>Outstanding</u> Performance is so exceptional in relation to requirements of the work and in comparison to the performance of others doing similar work as to warrant special recognition.</p>							
<b>SPECIFIC DUTIES</b>							
List up to six of the most important specific duties performed during the rating period. Insert rating letter which best describes the manner in which employee performs EACH specific duty. Consider ONLY effectiveness in performance of that duty. All employees with supervisory responsibilities MUST be rated on their ability to supervise (indicate number of employees supervised).							
SPECIFIC DUTY NO. 1						RATING LETTER	
Responsible for initiation and development of WH Division durable assets program.						P	
SPECIFIC DUTY NO. 2						RATING LETTER	
Collate and maintain files on espionage laws of LA countries.						P	
SPECIFIC DUTY NO. 3						RATING LETTER	
Served as interpreter and translator for Division LA contacts.						P	
SPECIFIC DUTY NO. 4						RATING LETTER	
Coordinated with Branch 1 of WHD on FI and CI matters.						P	
SPECIFIC DUTY NO. 5						RATING LETTER	
Gives lectures as guest instructor to students attending School of International Communism.						S	
SPECIFIC DUTY NO. 6						RATING LETTER	
<b>OVERALL PERFORMANCE IN CURRENT POSITION</b>							
Take into account everything about the employee which influences his effectiveness in his current position such as performance of specific duties, productivity, conduct on job, cooperativeness, pertinent personal traits or habits, and particular limitations or talents. Based on your knowledge of employee's overall performance during the rating period, place the letter in the rating box corresponding to the statement which most accurately reflects his level of performance.						RATING LETTER	
						P	



SECRET

(When Filled In)

SECTION C

NARRATIVE COMMENTS

Indicate significant strengths or weaknesses demonstrated in current position keeping in proper perspective their relationship to overall performance. State suggestions made for improvement of work performance. Give recommendations for training. Comment on foreign language competence, if required for current position. Amplify or explain ratings given in Section B to provide basis for determining future personnel action. Manner of performance of managerial or supervisory duties must be described, if applicable.

Mr. Hidalgo joined WH/PO/A in November 1961 and took up those responsibilities listed above. However, Mr. Hidalgo's performance of duties was interrupted on two occasions by serious illness, 9-27 March and 15 April-31 May 1962. He was twice hospitalized. From 25 June-9 August 1962, Mr. Hidalgo was on TDY for WH/3 as escort officer for Latin American trainees. Although beset by health and other personal problems, Mr. Hidalgo seized upon each new assignment with his customary energy. He proved particularly adept in working as interpreter and escort officer for Latin American trainees, and demonstrated high interest and proven competence in counterintelligence work. His excellent memory and quick perception were distinct assets in these undertakings.

It is recommended, however, that Mr. Hidalgo's next assignment not carry responsibility for submission of finished papers or staff studies, but be one entailing duties commensurate with his ability to work effectively with indigenous personnel and to pursue CI leads through records investigation.

SECTION D

CERTIFICATION AND COMMENTS

1. BY EMPLOYEE		
I CERTIFY THAT I HAVE SEEN SECTIONS A, B, AND C OF THIS REPORT		
DATE 18 Sept 62	SIGNATURE OF EMPLOYEE <i>Alberto L. Hidalgo</i>	
2. BY SUPERVISOR		
MONTHS EMPLOYEE HAS BEEN UNDER MY SUPERVISION	IF THIS REPORT HAS NOT BEEN SHOWN TO EMPLOYEE, GIVE EXPLANATION	
DATE 18 September 1962	OFFICIAL TITLE OF SUPERVISOR C/WH/PO/A	TYPED OR PRINTED NAME AND SIGNATURE
3. BY REVIEWING OFFICIAL		
COMMENTS OF REVIEWING OFFICIAL		
I have had insufficient personal contact with Subject to make any meaningful comments.		
DATE 13 September 1962	OFFICIAL TITLE OF REVIEWING OFFICIAL C/WH/OPS	TYPED OR PRINTED NAME AND SIGNATURE

SECRET



S E C R E T  
(When Filled In)

CERTIFICATION OF SEPARATING EMPLOYEE

Name (Last-First-Middle)

Hidalgo, Balmeo

MEMORANDUM FOR THE RECORD - ATTACH TO OFFICIAL PERSONNEL FOLDER

I hereby acknowledge the receipt of the following forms and/or information concerning my separation from CIA as indicated by check mark:

- |   |   |
|---|---|
| ✓ | 1. Standard Form 8 (Notice to Federal Employee about Unemployment Compensation).  |
| ✓ | 2. Standard Form 55 (Notice of Conversion Privilege, Federal Employees' Group Life Insurance). <i>N.A.</i>  |
|   | 3. Standard Form 55 (Agency Certification of Insurance Status, Federal Employers' Group Life Insurance Act of 1954).  |
| ✓ | 4. Standard Form 2802 (Application for Refund of Retirement Deductions).<br><i>Medical Disability</i>   |
| ✓ | 5. Form 2595 (Authorization for Disposition of Paychecks).<br><i>NO CHANGE</i>  |
|   | 6. Applicable to returnee (resignee from overseas assignment).<br>I have been advised of my right to have a medical examination before my separation from this Agency and of the importance of such a medical check to my health and well-being.<br><input type="checkbox"/> Appointment arranged with Office of Medical Services.<br><input type="checkbox"/> Appointment for Office of Medical Services examination declined. |
|   | 7. I have been informed of "conflict of interests" policy of the Agency and foresee no problem in this regard concerning my new employment.   |
|   | 8. Form 71 (Application for Leave).   |
|   | 9. CSC Pamphlet 51 (Re-employment Rights of Federal Employees Performing Armed Forces Duty).  |
|   | 10. Instructions for returning to duty from Extended Leave or Active Military Service.  |

Signature of Employee

*[Handwritten Signature]*

Date Signed

*Feb 27, 1970*

Address (Street, City, State, Zip Code)

*403 SILVER ROCK RD ROCKVILLE MD 20851*

Correspondence

Overt

Covert

*OR 40 VERMONT HIGHLAND  
X6646*

S E C R E T

SECRET

**ELECTION, DECLINATION, OR WAIVER  
OF LIFE INSURANCE COVERAGE**  
FEDERAL EMPLOYEES GROUP LIFE INSURANCE PROGRAM

**IMPORTANT  
AGENCY INSTRUCTIONS  
ON BACK OF ORIGINAL**

**TO COMPLETE THIS FORM—**

**1**

**FOLLOW THESE GENERAL INSTRUCTIONS:**

- Read the back of the "Duplicate" carefully before you fill in the form.
- Fill in **BOTH COPIES** of the form. Type or use ink.
- Do not detach any part.

**2**

**FILL IN THE IDENTIFYING INFORMATION BELOW (please print or type):**

NAME (last) (first) (middle) DATE OF BIRTH (month, day, year) SOCIAL SECURITY NUMBER  
 HEDALGO Jr Balnes Hieves May 27 1919   
 Employee Serial Number 27630  
 EMPLOYING DEPARTMENT OR AGENCY LOCATION (City, State, ZIP Code)

**3**

**MARK AN "X" IN ONE OF THE BOXES BELOW (do NOT mark more than one):**

Mark here if you **WANT BOTH** optional and regular insurance  (A)

**ELECTION OF OPTIONAL (IN ADDITION TO REGULAR) INSURANCE**  
 I elect the \$10,000 additional optional insurance and authorize the required deductions from my salary, compensation, or annuity to pay the full cost of the optional insurance. This optional insurance is in addition to my regular insurance.

Mark here if you **DO NOT WANT** OPTIONAL but do want regular insurance  (B)

**DECLINATION OF OPTIONAL (BUT NOT REGULAR) INSURANCE**  
 I decline the \$10,000 additional optional insurance. I understand that I cannot elect optional insurance until at least 1 year after the effective date of this declination and unless at the time I apply for it I am under age 50 and present satisfactory medical evidence of insurability. I understand also that my regular insurance is not affected by this declination of additional optional insurance.

Mark here if you **WANT NEITHER** regular nor optional insurance  (C)

**WAIVER OF LIFE INSURANCE COVERAGE**  
 I desire not to be insured and I waive coverage under the Federal Employees Group Life Insurance Program. I understand that I cannot cancel this waiver and obtain regular insurance until at least 1 year after the effective date of this waiver and unless at the time I apply for insurance I am under age 50 and present satisfactory medical evidence of insurability. I understand also that I cannot now or later have the \$10,000 additional optional insurance unless I have the regular insurance.

**4**

**SIGN AND DATE IF YOU MARKED BOX "A" OR "C".  
COMPLETE THE "STATISTICAL STUB." THEN RETURN  
THE ENTIRE FORM TO YOUR EMPLOYING OFFICE.**

SIGNATURE (do not print)

DATE

13 February 1968

**FOR EMPLOYING OFFICE USE ONLY**

(official receiving date stamp)

RECEIVED  
OFFICE OF PERSONNEL  
FEB 20 3 30 PM '68

See Table of Effective Dates on back of Original

ORIGINAL COPY—Retain in Official Personnel Folder

SECRET

STANDARD FORM No. 176-F  
JANUARY 1958  
(For use only until April 14, 1968)  
176-101

### APPOINTMENT AFFIDAVITS

**IMPORTANT.**—Before swearing to these appointment affidavits, you should read and understand the attached information for appointee.

CENTRAL INTELLIGENCE AGENCY

WASHINGTON, D.C.

(Department or agency)

(Bureau or division)

(Place of employment)

I, BALMES HIDALGO JR., do solemnly swear (or affirm) that—

#### A. OATH OF OFFICE

I will support and defend the Constitution of the United States against all enemies, foreign and domestic; that I will bear true faith and allegiance to the same; that I take this obligation freely without any mental reservation or purpose of evasion; that I will well and faithfully discharge the duties of the office on which I am about to enter, SO HELP ME GOD.

#### B. AFFIDAVIT AS TO SUBVERSIVE ACTIVITY AND AFFILIATION

I am not a Communist or Fascist. I do not advocate nor am I knowingly a member of any organization that advocates the overthrow of the constitutional form of the Government of the United States, or which seeks by force or violence to deny other persons their rights under the Constitution of the United States. I do further swear (or affirm) that I will not so advocate, nor will I knowingly become a member of such organization during the period that I am an employee of the Federal Government or any agency thereof.

#### C. AFFIDAVIT AS TO STRIKING AGAINST THE FEDERAL GOVERNMENT

I am not participating in any strike against the Government of the United States or any agency thereof, and I will not so participate while an employee of the Government of the United States or any agency thereof. I do not and will not assert the right to strike against the Government of the United States or any agency thereof while an employee of the Government of the United States or any agency thereof. I do further swear (or affirm) that I am not knowingly a member of an organization of Government employees that asserts the right to strike against the Government of the United States or any agency thereof and I will not, while an employee of the Government of the United States or any agency thereof, knowingly become a member of such an organization.

#### D. AFFIDAVIT AS TO PURCHASE AND SALE OF OFFICE

I have not, nor has anyone acting in my behalf, given, transferred, promised or paid any consideration for or in expectation or hope of receiving assistance in securing such appointment.

#### E. AFFIDAVIT AS TO DECLARATION OF APPOINTEE

The answers given in the Declaration of Appointee on the reverse of this form are true and correct.

17 Mar 58

(Date of entrance on duty)

Balmes Hidalgo Jr.  
(Signature of appointee)

Subscribed and sworn before me this 13<sup>th</sup> day of March, A. D. 1958

at Washington,  
(City)

D.C.  
(State)

[SEAL]

Billy A. Bussard **5 MAR 18 1958**  
(Signature of officer)

Appointment Clerk  
(Title)

NOTE.—If the oath is taken before a Notary Public the date of expiration of his commission should be shown.

## DECLARATION OF APPOINTEE

This form is to be completed before entrance on duty. Answer all questions. Admitted unfavorable information, about such matters as arrests or discharges will be considered together with the favorable information in your record in determining your present fitness for Federal employment. However, a false statement or dishonest answer to any question may be grounds for dismissal after appointment and is punishable by law.

1. PRESENT ADDRESS (street and number, city and State)  
 No 4615 N. ... - WASH DC, D. C.

2. (A) DATE OF BIRTH: 27 May 1917 (B) PLACE OF BIRTH (city and State or city and foreign country): Havana, Cuba

3. (A) IN CASE OF EMERGENCY, PLEASE NOTIFY: Louise Hoodge (B) RELATIONSHIP: wife (C) STREET AND NUMBER, CITY AND STATE: (D) TELEPHONE NO.:

4. DOES THE UNITED STATES GOVERNMENT EMPLOY, IN A CIVILIAN CAPACITY, ANY RELATIVE OF YOURS (EITHER BY BLOOD OR MARRIAGE) WITH WHOM YOU LIVE OR HAVE LIVED WITHIN THE PAST 24 MONTHS?  YES  NO  
 If so, for each such relative fill in the blank below. If additional space is necessary, complete under Item 12.

NAME	POST OFFICE ADDRESS (Give street number, if any)	RELATIONSHIP		MAR. STAT. (C has 8 only)
		(1) POSITIVE (2) TEMPORARY OR NOT (3) DEPARTMENT OR AGENCY IN WHICH EMPLOYED	(1) POSITIVE (2) TEMPORARY OR NOT (3) DEPARTMENT OR AGENCY IN WHICH EMPLOYED	

INDICATE ANSWER BY PLACING "X" IN PROPER COLUMN		YES	NO	INDICATE ANSWER BY PLACING "X" IN PROPER COLUMN		YES	NO		
5. (A) ARE YOU A CITIZEN OF THE UNITED STATES OF AMERICA, OR (B) AS A NATIVE OF AMERICAN SAMOA DO YOU OWE ALLEGIANCE TO THE UNITED STATES OF AMERICA?				<input checked="" type="checkbox"/>		10. (A) HAVE YOU EVER FILED A WAIVER OF LIFE INSURANCE COVERAGE UNDER THE FEDERAL EMPLOYEES GROUP LIFE INSURANCE ACT?		<input checked="" type="checkbox"/>	
6. ARE YOU AN OFFICIAL OR EMPLOYEE OF ANY STATE, TERRITORY, COUNTY, OR MUNICIPALITY? If your answer is "Yes," give details in Item 12.				<input checked="" type="checkbox"/>		(B) IF YOU HAVE FILED SUCH A WAIVER, HAS IT BEEN CANCELED OR REVOKED?		<input checked="" type="checkbox"/>	
7. DO YOU RECEIVE OR HAVE YOU APPLIED FOR AN ANNUITY FROM THE UNITED STATES OR DISTRICT OF COLUMBIA GOVERNMENT UNDER ANY RETIREMENT ACT OR ANY PENSION OR OTHER COMPENSATION FOR MILITARY OR NAVAL SERVICE? If your answer is "Yes," give details in Item 12.				<input checked="" type="checkbox"/>		11. SINCE YOU FILED APPLICATION RESULTING IN THIS APPOINTMENT:		<input checked="" type="checkbox"/>	
8. SINCE YOU FILED APPLICATION RESULTING IN THIS APPOINTMENT, HAVE YOU BEEN ARRESTED, CHARGED, OR HELD BY FEDERAL, STATE, OR OTHER LAW ENFORCEMENT AUTHORITIES FOR ANY VIOLATION OF ANY FEDERAL LAW, STATE LAW, COUNTY OR MUNICIPAL LAW, REGULATION, OR ORDINANCE TO WHICH INCLUDE TRAFFIC VIOLATIONS FOR WHICH 30 DAYS OR LESS WAS IMPROVED. ALL OTHER CHARGES MUST BE INCLUDED EVEN IF THEY WERE DISMISSED. If your answer is "Yes," give in Item 12 for each case: (1) approximate date, (2) charge, (3) place, (4) action taken.				<input checked="" type="checkbox"/>		A. HAVE YOU BEEN DISCHARGED FROM EMPLOYMENT BECAUSE:		<input checked="" type="checkbox"/>	
9. SINCE YOU FILED APPLICATION RESULTING IN THIS APPOINTMENT, HAVE YOU BEEN BARRED BY THE U. S. CIVIL SERVICE COMMISSION FROM TAKING EXAMINATIONS OR ACCEPTING CIVIL SERVICE APPOINTMENTS? If your answer is "Yes," give dates of and reasons for such barment in Item 12.				<input checked="" type="checkbox"/>		(1) YOUR CONDUCT WAS NOT SATISFACTORY?		<input checked="" type="checkbox"/>	
						(2) YOUR WORK WAS NOT SATISFACTORY?		<input checked="" type="checkbox"/>	
						B. HAVE YOU BEEN DISCHARGED AFTER OFFICIAL NOTIFICATION THAT:		<input checked="" type="checkbox"/>	
						(1) YOUR CONDUCT WAS NOT SATISFACTORY?		<input checked="" type="checkbox"/>	
						(2) YOUR WORK WAS NOT SATISFACTORY?		<input checked="" type="checkbox"/>	
						C. HAVE YOU BEEN DISCHARGED FROM THE ARMED SERVICES UNDER OTHER THAN HONORABLE CONDITIONS?		<input checked="" type="checkbox"/>	
						If your answer to A, B, or C is "Yes," give details in Item 12 as fully as you can remember, including the name and address of employer, approximate date, and reasons in each case.			

12. SPACE FOR DETAILED ANSWERS TO OTHER QUESTIONS (Indicate item numbers to which answers apply.)

ITEM NO.	ANSWER	ITEM NO.	ANSWER

**INSTRUCTIONS TO APPOINTING OFFICER.**—You must determine that this appointment would be in accordance with the Civil Service Act, applicable Civil Service Rules and Regulations, and acts of Congress pertaining to appointment. This form should be checked for holding of office, pension, any record of recent discharge or arrest, age, citizenship, and members of family. Also, to establish the identity of the appointee, you should particularly check (1) his signature and handwriting against the application and/or other pertinent papers and (2) his physical appearance against the medical certificate.

**SECRET**  
(When Filled In)

16

**QUALIFICATIONS UPDATE**

**READ INSTRUCTIONS CAREFULLY BEFORE COMPLETING. TYPE OR PRINT. AVOID USING LIGHT COLORED INKS**

*Now that your qualifications are a matter of computer record, they must be periodically updated. This is done automatically for much information, however, some must be obtained directly from you. This form is for that purpose. Section I must be completed in all cases. You need provide other information only if there have been changes since you submitted your Form 444, "Qualifications Supplement to the Personal History Statement," or a previous update form. If you are in doubt whether information has been previously submitted, enter it in the appropriate section. The signed and dated form should be returned through administrative channels to the File Room, Office of Personnel, Room 5E-13, Headquarters, whether information is added or not. Additionally, a qualifications update may take place at any time there is information to be added or changed simply by completing and returning an update form on your initiative.*

SECTION I						
BIOGRAPHIC AND POSITION DATA						
EMP. SER. NO.	NAME (Last-First-Middle)			DATE OF BIRTH		
027630	Hidalgo, Balmes N. Jr.			05/27/19		
SECTION II						
EDUCATION						
HIGH SCHOOL						
LAST HIGH SCHOOL ATTENDED		ADDRESS (City State Country)		YEARS ATTENDED (From To)		GRADUATE
La Salle Academy		NYC NY		1938-1940		<input checked="" type="checkbox"/> YES <input type="checkbox"/> NO
COLLEGE OR UNIVERSITY STUDY						
NAME AND LOCATION OF COLLEGE OR UNIVERSITY		SUBJECT		YEARS ATTENDED	DEGREE RECEIVED	YEAR RECEIVED
		MAJOR MINOR		FROM TO		
1. NY University		Comm Law MP-NYP		1943-45	NO	
UNIV of MD		Fire engineering		1968	No Credit Course	
2. Mont Jr College		Real Estate Procedures		1968	No Credit Course	
IF A GRADUATE DEGREE HAS BEEN NOTED ABOVE WHICH REQUIRED SUBMISSION OF A WRITTEN THESIS, INDICATE THE TITLE OF THE THESIS AND BRIEFLY DESCRIBE ITS CONTENT.						
TRADE, COMMERCIAL AND SPECIALIZED SCHOOLS						
NAME AND ADDRESS OF SCHOOL		STUDY OR SPECIALIZATION		FROM	TO	NO. OF MONTHS
Suburban Hospital		Emergency Room procedures		EMERGENCY	1968	3(?)
OTHER NON-AGENCY EDUCATION OR TRAINING NOT INDICATED ABOVE						
NAME AND ADDRESS OF SCHOOL		STUDY OR SPECIALIZATION		FROM	TO	NO. OF MONTHS
1. Non-Com leadership school				194?		?
SECTION III						
MARITAL STATUS						
1. PRESENT STATUS (Single Married Widowed Separated Divorced Annulled Remarried) SPECIFY: <b>MARRIED</b>						
2. NAME OF SPOUSE (Last) (First) (Middle) ( maiden)						
HIDALGO Veronica Waylonia Wylonis						
3. DATE OF BIRTH		4. PLACE OF BIRTH (City State Country)				
23 May 14		DuBois, Pa, USA				
5. OCCUPATION		6. PRESENT EMPLOYER				
Train Asst		CIA				
7. CITIZENSHIP		8. FORMER CITIZENSHIP(S) COUNTRY(IES)		9. DATE U.S. CITIZENSHIP ACQUIRED		
US		N/A		Birth		
SECTION IV						
DEPENDENT CHILDREN AND DEPENDENTS OTHER THAN SPOUSE						
	NAME	RELATIONSHIP	DATE AND PLACE OF BIRTH	CITIZENSHIP	PERMANENT ADDRESS	
1	<input type="checkbox"/> ADD <input checked="" type="checkbox"/> DELETE	Daughter	1945 NY NY	US	Arlington, Va	
2	<input type="checkbox"/> ADD <input checked="" type="checkbox"/> DELETE	Daughter	1950 NYC NY	US	Alexandria Va	
	<input type="checkbox"/> ADD <input checked="" type="checkbox"/> DELETE	Mother	1892 SECRET SPAIN	US	Rockville MD	

FORM 444n 2-68

ADD

(16-511)

SECRET

(When Filled In)

SECTION V GEOGRAPHIC AREA KNOWLEDGE AND FOREIGN TRAVEL							
NAME OF REGION OR COUNTRY	TYPE OF SPECIALIZED KNOWLEDGE	DATES OF TRAVEL OR RESIDENCE	DATE & PLACE OF STUDY	KNOWLEDGE ACQUIRED BY (CHECK ONE)			
				SELF	TRAVEL	STUDY	TRAINING
Havana Cuba	Language, customs, people	1919-25		X			X
Rep of Panama	"	1952-58	Dec 20	X	X		X
El Salvador, Mexico	"	various		X	X		X
Guatemala, Puerto Rico	"	various		X	X		X
SECTION VI Hawaii	TYPING AND STENOGRAPHIC SKILLS						
1 TYPING (PPM)		2 SHORTHAND (RPM)		3. INDICATE SHORTHAND SYSTEM USED - CHECK (X) APPROPRIATE ITEM			
				<input type="checkbox"/> CRECC	<input type="checkbox"/> SPEEDWRITING	<input type="checkbox"/> STENOTYPE	<input type="checkbox"/> OTHER SPECIFY:
SECTION VII SPECIAL QUALIFICATIONS							
PROVIDE INFORMATION ON HOBBIES, SPORTS, LICENSES, PUBLISHED MATERIALS OR DEVICES WHICH YOU MAY HAVE INVENTED							
Extremely capable in First Aid (advanced) and teaching of same. Firefighting procedures. Elementary knowledge of Real Estate Procedures.							
SECTION VIII MILITARY SERVICE							
CURRENT DRAFT STATUS							
1 HAS YOUR SELECTIVE SERVICE CLASSIFICATION CHANGED?				2 NEW CLASSIFICATION			
<input type="checkbox"/> YES <input checked="" type="checkbox"/> NO				N/A			
3. LOCAL SELECTIVE SERVICE BOARD NUMBER AND ADDRESS				4 IF DEFERRED, GIVE REASON			
N/A				N/A			
MILITARY RESERVE, NATIONAL GUARD STATUS							
CHECK RESERVE OR GUARD ORGANIZATION TO WHICH YOU BELONG				OTHER SPECIFY:			
<input type="checkbox"/> ARMY <input type="checkbox"/> NAVY				<input type="checkbox"/> MARINE CORPS <input type="checkbox"/> COAST GUARD <input type="checkbox"/> NATIONAL GUARD <input type="checkbox"/> AIR NATIONAL GUARD			
NONE							
1 CURRENT RANK, GRADE OR RATE		2 DATE OF APPOINTMENT IN CURRENT RANK		3 EXPIRATION DATE OF CURRENT OBLIGATION			
N/A		N/A		N/A			
4 CHECK CURRENT RESERVE CATEGORY <input type="checkbox"/> READY RESERVE <input type="checkbox"/> STANDBY (active) <input type="checkbox"/> STANDBY (inactive) <input type="checkbox"/> RETIRED <input checked="" type="checkbox"/> DISCHARGED							
5. MILITARY MOBILIZATION ASSIGNMENT				6 RESERVE UNIT TO WHICH ASSIGNED OR ATTACHED			
N/A				N/A			
MILITARY SCHOOLS COMPLETED (Extended Active, Reserve Duty, or as Civilian)							
NAME AND ADDRESS OF SCHOOL			STUDY OR SPECIALIZATION		DATE COMPLETED		
Non-Com leadership school			same		????		
							PRESIDENT
							AGENCY-SPONSORED
SECTION IX PROFESSIONAL SOCIETIES AND OTHER ORGANIZATIONS							
NAME AND CHAPTER		ADDRESS (Number, Street, City, State, Country)				DATE OF MEMBERSHIP	
						FROM TO	
American Red Cross		Silver Spring Md				1962 present	
Rockville Fire Dept and OTHERS		(presently Rockville, Md)				1958 present	
International Rescue & 1st Aid Assoc		worldwide				1956(?) present	
Montgomery Board of Realtors (ASSOCIATE member)		(Permanent membership)				1958 present	
3.							
SECTION X REMARKS							
I am a bit hazy on the dates.							
DATE		SIGNATURE OF EMPLOYEE					
19 Dec 68							

SECRET

SECRET

FORM 10 (Rev. 1-65)

SECTION V GEOGRAPHIC AREA KNOWLEDGE AND FOREIGN TRAVEL							
NAME OF REGION OR COUNTRY	TYPE OF SPECIALIZED KNOWLEDGE	DATES OF TRAVEL OR RESIDENCE	DATE & PLACE OF STUDY	KNOWLEDGE ACQUIRED BY - CHECK IN:			
				RESIDENCE	TRAVEL	STUDY	WORK ASSIGNMENT
Cuba	Area and people/Lan.	1919-1924	Family	X		X	X
Panama	Area and people/Lan	1952-58	MIKE	X	X	X	X
Dom Rep	Area and People/Lan	1965			X		X
Salvador&Guat	" "	1961-2-3			X		X
SECTION VI & Mexi TYPING AND STENOGRAPHIC SKILLS							
1. TYPING (WPM)		2. SHORTHAND (WPM)		3. INDICATE SHORTHAND SYSTEM USED - CHECK IN APPROPRIATE ITEM			
				<input type="checkbox"/> GREGG <input type="checkbox"/> SPEEDWRITING <input type="checkbox"/> STENOTYPE <input type="checkbox"/> OTHER SPECIFY:			
SECTION VII SPECIAL QUALIFICATIONS							
PROVIDE INFORMATION ON HOBBIES, SPORTS, LICENSES, PUBLISHED MATERIALS OR DEVICES WHICH YOU MAY HAVE INVENTED Quite proficient in photography - Safety and Fire engineering - First Aid including the Instruction of First Aid & Hospital Copman duties. SOME Real Estate knowledge.							
SECTION VIII MILITARY SERVICE							
CURRENT DRAFT STATUS							
1. HAS YOUR SELECTIVE SERVICE CLASSIFICATION CHANGED?				2. NEW CLASSIFICATION			
<input type="checkbox"/> YES <input type="checkbox"/> NO				See age.			
3. LOCAL SELECTIVE SERVICE BOARD NUMBER AND ADDRESS				4. IF DEFERRED, GIVE REASON			
MILITARY RESERVE, NATIONAL GUARD STATUS							
CHECK RESERVE OR GUARD ORGANIZATION TO WHICH YOU BELONG		<input type="checkbox"/> ARMY		<input type="checkbox"/> MARINE CORPS		<input type="checkbox"/> COAST GUARD	
<input type="checkbox"/> NONE		<input type="checkbox"/> NAVY		<input type="checkbox"/> AIR FORCE		<input type="checkbox"/> NATIONAL GUARD	
<input type="checkbox"/> AIR NATIONAL GUARD							
1. CURRENT RANK, GRADE OR RATE		2. DATE OF APPOINTMENT IN CURRENT RANK		3. EXPIRATION DATE OF CURRENT OBLIGATION			
N/A		N/A		N/A			
4. CHECK CURRENT RESERVE CATEGORY: <input type="checkbox"/> READY RESERVE <input type="checkbox"/> STANDBY (ACTIVE) <input type="checkbox"/> STANDBY (INACTIVE) <input type="checkbox"/> RETIRED <input checked="" type="checkbox"/> DISCHARGED							
5. MILITARY MOBILIZATION ASSIGNMENT				6. RESERVE UNIT TO WHICH ASSIGNED OR ATTACHED			
N/A				N/A			
MILITARY SCHOOLS COMPLETED (Extended Active, Reserve Duty, or as Civilian)							
NAME AND ADDRESS OF SCHOOL			STUDY OR SPECIALIZATION		DATE COMPLETED	<input type="checkbox"/> N/A <input checked="" type="checkbox"/> SPONSORED	
Non-Com leadership school			Infantry		1943	N/A	
SECTION IX PROFESSIONAL SOCIETIES AND OTHER ORGANIZATIONS							
NAME AND CHAPTER		ADDRESS (Number, Street, City, State, Country)				DATE OF MEMBERSHIP	
						FROM TO	
1. Rockville Fire Dept & others		Rockville Md & others				1958 present	
2. Red Cross as Emergecy transport and First Aid Instructor as well as Mi Copman						1964 "	
3. Associate member Mont Realtors						1968 "	
4. Int Assoc Rescue & First Aid						1964 "	
SECTION X REMARKS							
Re Section IV: Both daughters now married. Re Section III: This is second marraige. Re Real Estate training: This still in active stage. Plans are to supplement my work and eventually change to it on full time basis.							
DATE		SIGNATURE OF EMPLOYEE					
25 Nov 68							

SECRET

SECRET  
(When Filled In)

*lis*

**QUALIFICATIONS UPDATE**

READ INSTRUCTIONS CAREFULLY BEFORE COMPLETING. TYPE OR PRINT, AVOID USING LIGHT COLORED INKS

Now that your qualifications are a matter of computer record, they must be periodically updated. This is done automatically for much information; however, some must be obtained directly from you. This form is for that purpose. Section I must be completed in all cases. You need provide other information only if there have been changes since you submitted your Form 441, "Qualifications Supplement to the Personal History Statement," or a previous update form. If you are in doubt whether information has been previously submitted, enter it in the appropriate section. The signed and dated form should be returned through administrative channels to the File Room, Office of Personnel, Room 5E-13 Headquarters, whether information is added or not. Additionally, a qualifications update may take place at any time there is information to be added or changed simply by completing and returning an update form on your initiative.

ALSO FIRST AID INSTRUCTIONS cover of form 7-4416mm

**SECTION I BIOGRAPHIC AND POSITION DATA**

EMP. SER. NO. <b>027630</b>	NAME (Last-First-Middle) <b>Hidalgo, Balmes N.</b>	DATE OF BIRTH <b>05/27/19</b>
--------------------------------	---	----------------------------------

**SECTION II EDUCATION**

**HIGH SCHOOL**

LAST HIGH SCHOOL ATTENDED <b>La Salle Academy</b>	ADDRESS (City, State, Country) <b>NY City NY</b>	YEARS ATTENDED (From-To) <b>1938-40</b>	GRADUATE <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO
--	---	--	---

**COLLEGE OR UNIVERSITY STUDY**

NAME AND LOCATION OF COLLEGE OR UNIVERSITY	SUBJECT		YEARS ATTENDED FROM-TO	DEGREE RECEIVED	YEAR RECEIVED	NO. SEM/ QTR HRS. (Specify)
	MAJOR	MINOR				
1. <b>New York University</b>	<b>Comm Law Import-Export</b>	<b>procedures</b>	<b>1943/45</b>	<b>NO</b>		
2.						

IF A GRADUATE DEGREE HAS BEEN NOTED ABOVE WHICH REQUIRED SUBMISSION OF A WRITTEN THESIS, INDICATE THE TITLE OF THE THESIS AND BRIEFLY DESCRIBE ITS CONTENT.

**TRADE, COMMERCIAL AND SPECIALIZED SCHOOLS**

NAME AND ADDRESS OF SCHOOL	STUDY OR SPECIALIZATION	FROM	TO	NO. OF MONTHS
<b>University of Md. College of Engineering</b>	<b>Fire Service extension</b>	<b>Jan 66</b>	<b>Aug 66</b>	<b>8</b>

**OTHER NON-AGENCY EDUCATION OR TRAINING NOT INDICATED ABOVE**

NAME AND ADDRESS OF SCHOOL	STUDY OR SPECIALIZATION	FROM	TO	NO. OF MONTHS
1. <b>Montgomery Junior College Rockville, Md Campus</b>	<b>Real Estate procedures</b>	<b>Oct 1968</b>		<b>1</b>
2. <b>Suburban Hospital Bethesda, Md</b>	<b>Emergency Medical Aid/ Maryland State Corpman</b>	<b>Jan-May 1968</b>		<b>5</b>

**SECTION III MARITAL STATUS**

1. PRESENT STATUS (Single Married Widowed Separated Divorced Annulled Remarried) SPECIFY: **Married**

2. NAME OF SPOUSE (Last) (First) (Middle) ( maiden)	<b>HIDALGO Veronica W. (WAYLONIS)</b>
---	---------------------------------------

3. DATE OF BIRTH <b>May 29 1914</b>	4. PLACE OF BIRTH (City, State, Country) <b>DuBois, Pa., USA</b>
--	---

5. OCCUPATION <b>Admin Asst</b>	6. PRESENT EMPLOYER <b>C.I.A.</b>
------------------------------------	--------------------------------------

7. CITIZENSHIP <b>US</b>	8. FORMER CITIZENSHIP(S) COUNTRY(IES) <b>N/A</b>	9. DATE U.S. CITIZENSHIP ACQUIRED <b>Birth</b>
-----------------------------	---	---

**SECTION IV DEPENDENT CHILDREN AND DEPENDENTS OTHER THAN SPOUSE**

	NAME	RELATIONSHIP	DATE AND PLACE OF BIRTH	CITIZENSHIP	PERMANENT ADDRESS
1. <input type="checkbox"/> ADD <input checked="" type="checkbox"/> DELETE		<b>Daughter</b>	<b>NYC NY - Feb 23/50</b>	<b>US</b>	<b>Alexandria Va</b>
2. <input type="checkbox"/> ADD <input checked="" type="checkbox"/> DELETE		<b>Daughter</b>	<b>NYC NY - Jan 6/45</b>	<b>US</b>	<b>Arlington Va</b>



SECRET

OFFICIAL USE ONLY (until Form 104)

LLC

QUALIFICATIONS SUPPLEMENT TO PERSONAL HISTORY STATEMENT

READ INSTRUCTIONS CAREFULLY BEFORE COMPLETING TYPE OR PRINT AVOID USING LIGHT COLORED INKS

SECTION I BIOGRAPHIC AND POSITION DATA

1 EMP SEC NO 027530	2 NAME (Last, First, Middle) MICALGO B N JR	3 SEX M	4 DATE OF BIRTH 09/27/19	5 SCHEDULE GRADE/STEP GS-12-04
6 SSN J	7 POSITION TITLE CPS OFFICER	8 OFFICE OF ASSIGNMENT AM	9 LOCATION (City, State) WASH., D.C.	

SECTION II AGENCY OVERSEAS SERVICE

AREA	TYPE TOUR	FROM	TO
WESTERN HEMISPHERE	PCS-VV	92/05/12	97/12/30
WESTERN HEMISPHERE	TDY-CC	99/01/29	99/02/08
WESTERN HEMISPHERE	TDY-CC	63/02/01	61/03/01
WESTERN HEMISPHERE	TDY-CC	61/04/19	61/06/19
EUROPEAN AREA	TDY-CC	63/12/01	63/12/18
WESTERN HEMISPHERE	PCS-CC	60/04/01	60/05/01
		65/04/01	64/04/01
WESTERN HEMISPHERE	TDY-CC	65/1/11	65/2/11
		7/1/11	7/1/11

**OVERSEAS DATA**  
 CODED 25 APR 1968  
 DATE: INITIALS: [Signature]

SECTION III EDUCATION

DEGREE	MAJOR FIELD	COLLEGE	YEAR
NONE	NO COLLEGE DEGREE ON RECORD <i>TWO YEARS - COMMERCIAL LAW INITIAL ENGLISH PROGRESS</i>	NYU	1943-44

SECRET

When Filled In

SECTION III EDUCATION (Cont'd)  
HIGH SCHOOL

LAST HIGH SCHOOL ATTENDED: **Lt. Salle Academy** ADDRESS: **NYC NY** YEARS ATTENDED: **1938-40** GRADUATE:  YES  NO

COLLEGE OR UNIVERSITY STUDY

NAME AND LOCATION OF COLLEGE OR UNIVERSITY	SUBJECT		YEARS ATTENDED FROM TO	DEGREE RECEIVED	YEAR RECEIVED	NO SEM / QTR HRS. Specify
	MAJOR	MINOR				
1 <b>NYU - NYC NY</b>	<b>Common. Law</b>	<b>Export laws</b>	<b>Sept 43 to ? 45</b>	<b>No</b>		<b>???</b>
2						
3						
4						

5 IF A GRADUATE THESIS HAS BEEN NOTED ABOVE, PLEASE SUBMIT A WRITTEN THESIS AND DATE THE TITLE OF THE THESIS AND BRIEFLY DESCRIBE ITS CONTENT

SECRET

TRADE, COMMERCIAL AND SPECIALIZED SCHOOLS

NAME AND ADDRESS OF SCHOOL	STUDY OR SPECIALIZATION	FROM	TO	NO OF MONTHS
1				
2				
3				

OTHER NON-AGENCY EDUCATION OR TRAINING NOT INDICATED ABOVE

NAME AND ADDRESS OF SCHOOL	STUDY OR SPECIALIZATION	FROM	TO	NO OF MONTHS
1				
2				
3				
4				
5				

AGENCY-SPONSORED EDUCATION

Specify which, if any, of the education shown in Section III was Agency sponsored

NAME AND ADDRESS OF SCHOOL	STUDY OR SPECIALIZATION	FROM	TO	NO OF MONTHS
1 <b>Full Ops course</b>		<b>During 1938</b>		<b>9</b>
2 <b>Management Course</b>		<b>1966</b>	<b>one week</b>	
3				
4				
5				

SECRET

SECRET

SECTION VII		MILITARY SERVICE	
CURRENT DRAFT STATUS			
1. ARE YOU REGISTERED FOR THE DRAFT		2. SELECTIVE SERVICE CLASSIFICATION	
<input type="checkbox"/> YES <input checked="" type="checkbox"/> NO		???	
3. LOCAL SELECTIVE SERVICE BOARD NUMBER AND ADDRESS		4. IF DEFERRED GIVE REASON	
N/A		N/A	
MILITARY SERVICE RECORD (Active Duty Only)			
1. MILITARY ORGANIZATION (Army, Navy, etc., specify)	2. BRANCH OR CORPS	3. DATES OF SERVICE (extended active duty)	
Army	Infantry	FROM Oct 1940 TO Sept 1943	
4. STATUS (Regular, Reserve, etc., specify)	5. RANK, GRADE OR RATE (at separation, if not reserve)	6. SERIAL SERVICE OR FILE NUMBER	
Federalized National Guard	Cpl.	20249766	
7. CHECK TYPE OF SEPARATION			
<input checked="" type="checkbox"/> HONORABLE DISCHARGE <input type="checkbox"/> RETIREMENT FOR SERVICE <input type="checkbox"/> UNIQUE HARDSHIPS <input type="checkbox"/> RELEASE TO INACTIVE DUTY <input type="checkbox"/> RETIREMENT FOR COMBAT DISABILITY <input type="checkbox"/> OTHER (specify) <input type="checkbox"/> RETIREMENT FOR AGE <input checked="" type="checkbox"/> RETIREMENT FOR PHYSICAL DISABILITY			
8. BRIEF DESCRIPTION OF MILITARY DUTIES (record the duties and skills which best describe your work or function in the military service)			
Infantryman; Cryptographic section; driver.			
MILITARY RESERVE, NATIONAL GUARD STATUS			
CHECK RESERVE OR GUARD ORGANIZATION TO WHICH YOU BELONG			
<input type="checkbox"/> ARMY <input type="checkbox"/> MARINE CORPS <input type="checkbox"/> COAST GUARD <input type="checkbox"/> NATIONAL GUARD <input type="checkbox"/> NAVY <input type="checkbox"/> AIR FORCE <input type="checkbox"/> AIR NATIONAL GUARD			
NONE			
1. CURRENT RANK, GRADE OR RATE	2. DATE OF APPOINTMENT IN CURRENT RANK	3. EXPIRATION DATE OF CURRENT RESERVE OBLIGATION	
4. CHECK CURRENT RESERVE CATEGORY			
<input type="checkbox"/> READY RESERVE <input type="checkbox"/> STANDBY (active) <input type="checkbox"/> STANDBY (inactive) <input type="checkbox"/> RETIRED <input type="checkbox"/> DISCHARGED			
5. BRIEF DESCRIPTION OF MILITARY RESERVE DUTIES (record the duties and skills which best describe your work or function in the military service)			
6. IF YOU ARE CURRENTLY ASSIGNED TO A RESERVE OR NATIONAL GUARD TRAINING UNIT (IDENTIFY THE UNIT AND ITS ADDRESS)			
MILITARY SCHOOLS COMPLETED (Active Duty, Reserve Status or as Civilian)			
NAME AND ADDRESS OF SCHOOL		STUDY OR SPECIALIZATION	DATE COMPLETED
1.			
2.			
3.			
4.			
5.			

SECRET

**SECRET**

(When filled in)

SECTION IV GEOGRAPHIC AREA KNOWLEDGE AND FOREIGN TRAVEL							
NAME OF REGION OR COUNTRY	TYPE OF SPECIALIZED KNOWLEDGE	DATES OF TRAVEL OR RESIDENCE	DATE & PLACE OF STUDY	KNOWLEDGE ACQUIRED BY			CHECK IN:
				RESIDENCE	TRAINING	SUPPLY	WORK ASSIGNMENT
Cuba	Language-Area knowledge	1919-1924	---	X			
Panama	" " "	1952-58		X			X
Puerto Rico	" " "	various			X		X
Guatemala	" " "	various			X		X
El Salvador	" " "	various			X		X
Mexico	" " "	various			X		X
Dom Rep	" Limited area knowledge	1965					X
Germany	" " "	1963					X
Scotland	" " "	1963					X

SECTION V TYPING AND STENOGRAPHIC SKILLS			
1. TYPING (WPM) <b>40</b>	2. SHORTHAND (WPM)	3. INDICATE SHORTHAND SYSTEM USED - CHECK ALL APPROPRIATE ITEM <input type="checkbox"/> GREGG <input type="checkbox"/> SPEEDWRITING <input type="checkbox"/> STENOTYPE <input type="checkbox"/> OTHER SPECIFY	
4. INDICATE OTHER BUSINESS MACHINES WITH WHICH YOU HAVE HAD OPERATING EXPERIENCE OR TRAINING (comptometer, mimeograph card punch, etc.)  <b>Various</b>			

SECTION VI SPECIAL QUALIFICATIONS	
1. LIST ALL HOBBIES AND SPORTS IN WHICH YOU ARE ACTIVE OR HAVE ACTIVELY PARTICIPATED INDICATE YOUR PROFICIENCY IN EACH <b>First Aid Instructor. Very active currently.</b> <b>Fire Fighting and safety practices. University of Maryland. Active currently.</b> <i>Shy diving - 10 jumps during 1962. Home since.</i>	
2. LIST ALL BUSINESS EQUIPMENT OR MACHINES WHICH YOU MAY HAVE LISTED IN ITEM 4. SPECIFY. LIST ANY SPECIAL SKILLS YOU POSSESS RELATING TO OTHER EQUIPMENT AND MACHINES SUCH AS OPERATION OF RADIO TRANSMITTERS (include CW, speed, coding & receiving), OFFSET PRESS, TURBINE LATHE, ECP AND OTHER SCIENTIFIC & PROFESSIONAL DEVICES	
3. ARE YOU NOW OR HAVE YOU EVER BEEN A LICENSED OR CERTIFIED MEMBER OF ANY TRADE OR PROFESSION SUCH AS PILOT, ELECTRICIAN, RADIO OPERATOR, TEACHER, LAWYER, CPA, MEDICAL TECHNICIAN, PSYCHOLOGIST, PHYSICIAN, ETC? <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO	
4. IF YOU HAVE ANSWERED "YES" TO ITEM 3 ABOVE, INDICATE KIND OF LICENSE OR CERTIFICATION AND THE ISSUING STATE, MUNICIPALITY, ETC. (Provide license registration number if known) <b>First Aid Instructor - National Red Cross - 1963</b>	5. FIRST LICENSE/CERTIFICATE (year of issue) <b>1963</b> 6. LATEST LICENSE/CERTIFICATE (year of issue)
7. LIST ANY SIGNIFICANT PUBLISHED MATERIALS OF WHICH YOU ARE THE AUTHOR. Do NOT submit names unless requested. INDICATE THE TITLE, PUBLICATION DATE, AND TYPE OF WRITING (non-fiction or scientific articles, general interest subjects, novels, short stories, etc.)	
8. INDICATE ANY DEVICES WHICH YOU HAVE INVENTED AND STATE WHETHER OR NO! THEY ARE PATENTED	
9. PUBLIC SPEAKING AND PUBLIC RELATIONS EXPERIENCE	

SECRET

(When filled in)

SECTION IX		MARITAL STATUS		
1. PRESENT STATUS (Single, Married, Separated, Divorced, Annulled, Common Law, Widowed)		SPECIFY: <b>MARRIED</b>		
2. NAME OF SPOUSE		Name: <b>Veronica WAYLON ES</b>		
3. DATE OF BIRTH	4. PLACE OF BIRTH (City, State, Country)			
<b>May 23 1914</b>	<b>DuBots, Pa., USA.</b>			
5. OCCUPATION	6. PRESENT EMPLOYER			
<b>Administrative Asst</b>	<b>CIA</b>			
7. CITIZENSHIP	8. FORMER CITIZENSHIP COUNTRY(IES)		9. DATE U.S. CITIZENSHIP ACQUIRED	
<b>US</b>	<b>None</b>		<b>N/A</b>	
SECTION X DEPENDENT CHILDREN AND DEPENDENTS OTHER THAN SPOUSE				
NAME	RELATIONSHIP	DATE AND PLACE OF BIRTH	CITIZENSHIP	PERMANENT ADDRESS
<b>Frances R. Hidalgo</b>	<b>daughter</b>	<b>Feb 23 1950 NYC NY</b>	<b>US</b>	<b>Alexandria, Va</b>
<b>Eulmes N. Hidalgo Sr.</b>	<b>father</b>	<b>Dec 15 1890 Puerto Rico</b>	<b>IC</b>	<b>NYC NY</b>
<b>Rose Hidalgo</b>	<b>mother</b>	<b>Jan 12 1892 Spain</b>	<b>US</b>	<b>NYC NY</b>
SECTION XI PROFESSIONAL SOCIETIES AND OTHER ORGANIZATIONS				
NAME AND CHAPTER	ADDRESS (Number, Street, City, State, Country)	DATE OF MEMBERSHIP		
		FROM	TO	
<b>American Red Cross Civil Defense team</b>	<b>Montgomery Ctr., Md.</b>	<b>1964</b>	<b>present</b>	
<b>Franconia Volunteer Fire Department</b>	<b>Franconia, Va</b>	<b>1958</b>	<b>1963</b>	
<b>Rockville Volunteer Fire Department</b>	<b>Rockville, Md.</b>	<b>1964</b>	<b>present</b>	
<b>International Rescue and First Aid Association</b>		<b>1967</b>	<b>present</b>	
DATE	SIGNATURE OF EMPLOYEE			
<b>9 Feb 1968</b>	<i>[Handwritten Signature]</i>			

SECRET

(When Filled In)

1. PERSONNEL SERIAL NO. (1-6)		<b>LANGUAGE PROFICIENCY AND AWARDS DATA</b>				2 L.D. NO.
3. NAME (7-24)		4. COMPONENT	5. GRADE	6. DATE OF BIRTH		
7. LANGUAGE		8. CODE (25-27)	9. DATE OF TEST		10. ANNIVERSARY DATE (28-33)	
11. TEST PURPOSE	12. TEST SCORES				13. ELIGIBILITY (39)	
AWARD	READING (34)	WRITING (35)	PRONUNCIATION (36)	SPEAKING (37)	UNDERSTANDING (38)	AWARDABLE
SKILL						NOT AWARDABLE
14. I CERTIFY THIS EMPLOYEE FOR AWARD			15. TYPE OF AWARD			
SIGNATURE		DATE	A-M	E-I-N	C	R-W-B
						D-V
16. AMOUNT OF AWARD		\$	17. I CERTIFY THAT FUNDS ARE AVAILABLE			
18. FEDERAL TAX DEDUCTION		\$	OBLIGATION REF. NO.		SIGNATURE	
19. STATE/DC TAX DEDUCTION		\$	20. CHARGE ALLOTMENT NO.		DATE	
21. NET AMOUNT OF AWARD		\$	22. EMPLOYEE PAYROLL NO.			
23. FORWARD CHECK TO			24. ALLOTMENT OF ASSIGNMENT			
			25. CHECK NO.		DATE	

FORM 4-58 1273 USE PREVIOUS EDITIONS

SECRET

(10-49) MRD COPY

SECRET

(When Filled In)

1. PERSONNEL SERIAL NO. (1-6)		<b>LANGUAGE PROFICIENCY AND AWARDS DATA</b>				2 L.D. NO.
3. NAME (7-24)		4. COMPONENT	5. GRADE	6. DATE OF BIRTH		
7. LANGUAGE		8. CODE (25-27)	9. DATE OF TEST		10. ANNIVERSARY DATE (28-33)	
11. TEST PURPOSE	12. TEST SCORES				13. ELIGIBILITY (39)	
AWARD	READING (34)	WRITING (35)	PRONUNCIATION (36)	SPEAKING (37)	UNDERSTANDING (38)	AWARDABLE
SKILL						NOT AWARDABLE
14. I CERTIFY THIS EMPLOYEE FOR AWARD			15. TYPE OF AWARD			
SIGNATURE		DATE	A-M	E-I-N	C	R-W-B
						D-V
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21. NET AMOUNT OF AWARD		\$	22. EMPLOYEE PAYROLL NO.			
23. FORWARD CHECK TO			24. ALLOTMENT OF ASSIGNMENT			
			25. CHECK NO.		DATE	

FORM 4-58 1273 USE PREVIOUS EDITIONS

SECRET

(10-49) MRD COPY

SECRET  
(When Filled In)

(11-8)		LANGUAGE DATA RECORD		
PART I-GENERAL				
1. NAME (Last-First-Middle) (17-24)		2. DATE OF BIRTH (25-30)		
Hidalgo, Balmea Nieves JR		MONTH May	DAY 27	YEAR 1912
3. LANGUAGE (31-33)		4. TODAY'S DATE (34-39)		5. <input type="checkbox"/> I HAVE NO PROFICIENCY IN ANY FOREIGN LANGUAGE
Spanish 720		MONTH May	DAY 9	
PART II-LANGUAGE ELEMENTS				
SECTION A. Reading (40)				
1. I CAN READ TEXTS OF ANY DIFFICULTY, OF A GENERAL NATURE OR IN FIELDS I AM FAMILIAR WITH, USING THE DICTIONARY ONLY RARELY.				
2. I CAN READ TEXTS OF MOST GRADES OF DIFFICULTY, OF A GENERAL NATURE OR IN FIELDS I AM FAMILIAR WITH, USING THE DICTIONARY OCCASIONALLY.				
3. I CAN READ TEXTS OF AVERAGE DIFFICULTY (newspapers, reference materials, etc.), USING THE DICTIONARY FREQUENTLY.				
4. I CAN READ SIMPLE TEXTS, SUCH AS STREET SIGNS, NEWSPAPER HEADLINES, ETC., USING THE DICTIONARY FREQUENTLY.				
5. I HAVE NO READING ABILITY IN THE LANGUAGE.				
SECTION B. Writing (41)				
1. I CAN WRITE PERSONAL LETTERS AND SIMILAR MATERIAL WITH COMPLETE SUCCESS WITHOUT USING THE DICTIONARY. I CAN WRITE FACTUAL NARRATIVE AND EXPOSITORY MATERIAL WITH REASONABLE CLARITY, WITH VERY FEW GRAMMATICAL ERRORS, IN NATIVE STYLE, USING THE DICTIONARY ONLY RARELY.				
2. I CAN WRITE PERSONAL LETTERS AND SIMILAR SIMPLE MATERIAL WITH COMPLETE SUCCESS, USING THE DICTIONARY ONLY RARELY. I CAN WRITE FACTUAL NARRATIVE AND EXPOSITORY MATERIAL WITH REASONABLE CLARITY, WITH FEW GRAMMATICAL ERRORS, BUT IN A STYLE WHICH MAY NOT BE NATIVE, USING THE DICTIONARY OCCASIONALLY.				
3. I CAN WRITE PERSONAL LETTERS AND SIMILAR SIMPLE MATERIAL, WITH REASONABLE SUCCESS IN CONVEYING MY MEANING, BUT WITH OCCASIONAL MINOR GRAMMATICAL ERRORS AND IN OBVIOUSLY FOREIGN, AWKWARD STYLE, USING THE DICTIONARY OCCASIONALLY.				
4. I CAN WRITE PERSONAL LETTERS AND SIMILAR SIMPLE MATERIAL, WITH REASONABLE SUCCESS IN CONVEYING MY MEANING, BUT WITH MANY GRAMMATICAL ERRORS AND IN A VERY FOREIGN, AWKWARD STYLE, USING THE DICTIONARY FREQUENTLY.				
5. I CANNOT WRITE IN THE LANGUAGE.				
SECTION C. Pronunciation (42)				
1. MY PRONUNCIATION IS NATIVE.				
2. WHILE NATIVES CAN DETECT AN ACCENT IN MY PRONUNCIATION THEY HAVE NO DIFFICULTY UNDERSTANDING ME.				
3. MY PRONUNCIATION IS OBVIOUSLY FOREIGN, BUT ONLY RARELY CAUSES DIFFICULTY FOR NATIVES TO UNDERSTAND.				
4. MY PRONUNCIATION IS OCCASIONALLY DIFFICULT FOR NATIVES TO UNDERSTAND.				
5. I HAVE NO SKILL IN PRONUNCIATION.				
CONTINUE ON REVERSE SIDE				

CONTINUATION OF PART II—LANGUAGE ELEMENTS

SECTION D.

Speaking (43)

1. I SPEAK FLUENTLY AND ACCURATELY IN ALL PRACTICAL AND SOCIAL SITUATIONS; I CONVERSE FREELY AND IDIOMATICALLY IN ALL FIELDS WITH WHICH I AM FAMILIAR.
2. I SPEAK FLUENTLY AND ACCURATELY IN NEARLY ALL PRACTICAL AND SOCIAL SITUATIONS; I CAN CONVERSE IN MOST FIELDS WITH WHICH I AM FAMILIAR AND I EMPLOY SOME POPULAR SAYINGS, LITERARY QUOTATIONS, AND COMMON PROVERBS.
3. I GET ALONG QUITE WELL IN SITUATIONS OF DAILY LIFE AND TRAVEL AND CAN CONDUCT ROUTINE BUSINESS IN PARTICULAR FIELDS.
4. I MANAGE TO GET ALONG IN THE MOST COMMON SITUATIONS OF DAILY LIFE AND TRAVEL.
5. I HAVE NO ABILITY TO USE THE LANGUAGE IN ANY OF THE ABOVE RESPECTS.

SECTION E.

Understanding (14)

1. I UNDERSTAND NON-TECHNICAL CONVERSATION ON ALL SUBJECTS, BOTH FACE-TO-FACE AND ON THE TELEPHONE; I UNDERSTAND NEARLY EVERYTHING I HEAR ON THE RADIO AND AT THE MOVIES, PLAYS, AND LECTURES.
2. I UNDERSTAND NON-TECHNICAL CONVERSATION ON NEARLY ALL SUBJECTS, BOTH FACE-TO-FACE AND ON THE TELEPHONE; I UNDERSTAND MOST OF WHAT I HEAR ON THE RADIO AND AT THE MOVIES, PLAYS, AND LECTURES, INCLUDING MOST JOKES AND PUNS.
3. I UNDERSTAND NEARLY ALL CONVERSATION ON TOPICS OF DAILY LIFE AND TRAVEL, BOTH FACE-TO-FACE AND ON THE TELEPHONE; I UNDERSTAND MUCH OF WHAT I HEAR ON THE RADIO, AND AT THE MOVIES, PLAYS, AND LECTURES.
4. I UNDERSTAND THE SIMPLEST CONVERSATION, BOTH FACE-TO-FACE AND ON THE TELEPHONE; I UNDERSTAND SOME OF WHAT I HEAR ON THE RADIO AND AT THE MOVIES, PLAYS, AND LECTURES.
5. I AM NOT ABLE TO UNDERSTAND THE SPOKEN LANGUAGE.

BEFORE CONTINUING - CHECK PART II TO ENSURE THAT YOU HAVE CIRCLED ONE NUMBER PER SECTION.

PART III—EXPERIENCE AS TRANSLATOR OR INTERPRETER (45)

1. I HAVE HAD EXPERIENCE AS A TRANSLATOR.
2. I HAVE HAD EXPERIENCE AS AN INTERPRETER.
3. BOTH OF THE ABOVE STATEMENTS APPLY.
4. NONE OF THE ABOVE STATEMENTS APPLY.

PART IV—CERTIFICATION

I CERTIFY THAT THE INFORMATION GIVEN ABOVE IS TRUE AND ACCURATE TO THE BEST OF MY KNOWLEDGE AND BELIEF. THIS CERTIFICATION CONSTITUTES MY APPLICATION FOR A MAINTENANCE AWARD PROVIDED I AM ELIGIBLE UNDER THE TERMS OF REGULATION NO. 25-115, PAR. 1C(4). I UNDERSTAND THAT I MUST PASS AN OBJECTIVE LANGUAGE PROFICIENCY TEST BEFORE I BECOME ELIGIBLE FOR AN AWARD, AND THAT IRRESPECTIVE OF THE DATE OF TESTING, ANNUAL MAINTENANCE AWARDS WILL BE CUMULATIVE AS OF THE ANNIVERSARY DATE OF COMPLETING THIS FORM.

DATE SIGNED

9 May 1958

SIGNATURE

*Halmy L. Helms*

(46)

*C*

(47)

*A*



SECRET

(When Filled In)

(11-81)		LANGUAGE DATA RECORD		
127630				
PART I-GENERAL				
1. NAME (Last-First-Middle) (17-24)			2. DATE OF BIRTH (75-30)	
Hidalgo, Balnes Nieves JR			MONTH May	DAY 27
3. LANGUAGE (31-33)			4. TODAY'S DATE (34-38)	
Portuguese 630			MONTH May	DAY 9
			YEAR 1958	5. <input type="checkbox"/> I HAVE NO PROFICIENCY IN ANY FOREIGN LANGUAGE
PART II-LANGUAGE ELEMENTS				
SECTION A. Reading (40)				
1. I CAN READ TEXTS OF ANY DIFFICULTY, OF A GENERAL NATURE OR IN FIELDS I AM FAMILIAR WITH, USING THE DICTIONARY ONLY RARELY.				
2. I CAN READ TEXTS OF MOST GRADES OF DIFFICULTY, OF A GENERAL NATURE OR IN FIELDS I AM FAMILIAR WITH, USING THE DICTIONARY OCCASIONALLY.				
3. I CAN READ TEXTS OF AVERAGE DIFFICULTY (newspapers, reference materials, etc.), USING THE DICTIONARY FREQUENTLY.				
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SECTION B. Writing (41)				
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2. I CAN WRITE PERSONAL LETTERS AND SIMILAR SIMPLE MATERIAL WITH COMPLETE SUCCESS, USING THE DICTIONARY ONLY RARELY. I CAN WRITE FACTUAL NARRATIVE AND EXPOSITORY MATERIAL WITH REASONABLE CLARITY, WITH FEW GRAMMATICAL ERRORS, BUT IN A STYLE WHICH MAY NOT BE NATIVE, USING THE DICTIONARY OCCASIONALLY.				
3. I CAN WRITE PERSONAL LETTERS AND SIMILAR SIMPLE MATERIAL, WITH REASONABLE SUCCESS IN CONVEYING MY MEANING, BUT WITH OCCASIONAL MINOR GRAMMATICAL ERRORS AND IN OBVIOUSLY FOREIGN, AWKWARD STYLE, USING THE DICTIONARY OCCASIONALLY.				
4. I CAN WRITE PERSONAL LETTERS AND SIMILAR SIMPLE MATERIAL, WITH REASONABLE SUCCESS IN CONVEYING MY MEANING, BUT WITH MANY GRAMMATICAL ERRORS AND IN A VERY FOREIGN, AWKWARD STYLE, USING THE DICTIONARY FREQUENTLY.				
5. I CANNOT WRITE IN THE LANGUAGE.				
SECTION C. Pronunciation (42)				
1. MY PRONUNCIATION IS NATIVE.				
2. WHILE NATIVES CAN DETECT AN ACCENT IN MY PRONUNCIATION THEY HAVE NO DIFFICULTY UNDERSTANDING ME.				
3. MY PRONUNCIATION IS OBVIOUSLY FOREIGN, BUT ONLY RARELY CAUSES DIFFICULTY FOR NATIVES TO UNDERSTAND.				
4. MY PRONUNCIATION IS OCCASIONALLY DIFFICULT FOR NATIVES TO UNDERSTAND.				
5. I HAVE NO SKILL IN PRONUNCIATION.				
CONTINUE ON REVERSE SIDE				

CONTINUATION OF PART II—LANGUAGE ELEMENTS

SECTION D.

Speaking (43)

1. I SPEAK FLUENTLY AND ACCURATELY IN ALL PRACTICAL AND SOCIAL SITUATIONS; I CONVERSE FREELY AND IDIOMATICALLY IN ALL FIELDS WITH WHICH I AM FAMILIAR.
2. I SPEAK FLUENTLY AND ACCURATELY IN NEARLY ALL PRACTICAL AND SOCIAL SITUATIONS; I CAN CONVERSE IN MOST FIELDS WITH WHICH I AM FAMILIAR AND I EMPLOY SOME POPULAR SAYINGS, LITERARY QUOTATIONS, AND COMMON PROVERBS.
3. I GET ALONG QUITE WELL IN SITUATIONS OF DAILY LIFE AND TRAVEL AND CAN CONDUCT ROUTINE BUSINESS IN PARTICULAR FIELDS.
4. I MANAGE TO GET ALONG IN THE MOST COMMON SITUATIONS OF DAILY LIFE AND TRAVEL.
5. I HAVE NO ABILITY TO USE THE LANGUAGE IN ANY OF THE ABOVE RESPECTS.

SECTION E.

Understanding (44)

1. I UNDERSTAND NON-TECHNICAL CONVERSATION ON ALL SUBJECTS, BOTH FACE-TO-FACE AND ON THE TELEPHONE; I UNDERSTAND NEARLY EVERYTHING I HEAR ON THE RADIO AND AT THE MOVIES, PLAYS, AND LECTURES.
2. I UNDERSTAND NON-TECHNICAL CONVERSATION ON NEARLY ALL SUBJECTS, BOTH FACE-TO-FACE AND ON THE TELEPHONE; I UNDERSTAND MOST OF WHAT I HEAR ON THE RADIO AND AT THE MOVIES, PLAYS, AND LECTURES, INCLUDING MOST JOSES AND PUNS.
3. I UNDERSTAND NEARLY ALL CONVERSATION ON TOPICS OF DAILY LIFE AND TRAVEL, BOTH FACE-TO-FACE AND ON THE TELEPHONE; I UNDERSTAND MUCH OF WHAT I HEAR ON THE RADIO, AND AT THE MOVIES, PLAYS, AND LECTURES.
4. I UNDERSTAND THE SIMPLEST CONVERSATION, BOTH FACE-TO-FACE AND ON THE TELEPHONE; I UNDERSTAND SOME OF WHAT I HEAR ON THE RADIO AND AT THE MOVIES, PLAYS, AND LECTURES.
5. I AM NOT ABLE TO UNDERSTAND THE SPOKEN LANGUAGE.

BEFORE CONTINUING - CHECK PART II TO ENSURE THAT YOU HAVE CIRCLED ONE NUMBER PER SECTION.

PART III—EXPERIENCE AS TRANSLATOR OR INTERPRETER (45)

1. I HAVE HAD EXPERIENCE AS A TRANSLATOR.
2. I HAVE HAD EXPERIENCE AS AN INTERPRETER.
3. BOTH OF THE ABOVE STATEMENTS APPLY.
4. NONE OF THE ABOVE STATEMENTS APPLY.

PART IV—CERTIFICATION

I CERTIFY THAT THE INFORMATION GIVEN ABOVE IS TRUE AND ACCURATE TO THE BEST OF MY KNOWLEDGE AND BELIEF. THIS CERTIFICATION CONSTITUTES MY APPLICATION FOR A MAINTENANCE AWARD PROVIDED I AM ELIGIBLE UNDER THE TERMS OF REGULATION NO. 25-115, PAR. 1(C)(4). I UNDERSTAND THAT I MUST PASS AN OBJECTIVE LANGUAGE PROFICIENCY TEST BEFORE BECOMING ELIGIBLE FOR AN AWARD, AND THAT IRRESPECTIVE OF THE DATE OF TESTING, ANNUAL MAINTENANCE AWARDS WILL BE CUMULATIVE AS OF THE ANNIVERSARY DATE OF COMPLETING THIS FORM.

DATE SIGNED

9 May 1958

SIGNATURE

*Salman J. Talib*

1401

1471

CONFIDENTIAL

SECURITY APPROVAL

DATE : 17 April 1964

YOUR  
REFERENCE: 18658 DDP/SAS

CASE NO. : 65077

TO : Director of Personnel

ATTN :

SUBJECT : HIDALGO, Balnes Nieves, Jr.

1. This is to inform you that Subject has been approved for the appointment specified in your request under the provisions of Headquarters Regulations 10-3 and 20-5 including access to classified information through TOP SECRET as required in the performance of duties.
2. Unless arrangements are made within 60 days for entrance on duty within 120 days, this approval becomes invalid.
3. As part of the entrance on duty processing:

A personal interview in the Office of Security must be arranged.

A personal interview is not necessary.

Please advise Chief, Clearance Branch, extension 5620 when Subject enters on duty.

4. This is a conversion case.

FOR THE DIRECTOR OF SECURITY:

*W. A. Osborne*

W. A. Osborne

Chief, Personnel Security Division

CONFIDENTIAL  
(When Filled In)

STAFF AGENT CLEARANCE

DATE : 22 April 1963

YOUR REFERENCE: Memorandum of 19 April 1963

CASE NO. : #65077

TO : Chief, Contract Personnel Division

ATTN. : Staff Agents Branch

SUBJECT : ~~REDACTED~~ Hedwige R. N. J.

1. This is to advise that a security clearance is granted for the employment of the Subject as a Staff Agent, OS-11, by DDP/SAS in the capacity of Oper-

ations Officer under Project JMWAVE.

2. If your office should desire at a later date to change the status or use of the Subject, a request to cover any proposed change should be submitted to this office.

3. Unless arrangements are made within 60 days for entrance on duty within 120 days, this Approval becomes invalid.

4. As a part of entrance on duty processing:

A personal interview in the Office of Security must be arranged by your office.

A personal interview is not necessary.

*W. A. Osborne*

W. A. Osborne

CHIEF, PERSONNEL SECURITY DIVISION OS

*WAO*

CONFIDENTIAL  
(WHEN FILLED IN)

SECURITY APPROVAL

DATE : 10 March 1958

YOUR  
REFERENCE:

CASE NO. : 65077

TO : Director of Personnel

FROM : Director of Security

SUBJECT : HIDALGO, Balnes Nieves

1. This is to inform you of security approval of the subject person as follows:

Subject has been approved for the appointment specified in your request under the provisions of Regulations 10-210 and 20-730 including access to classified information through Top Secret as required in the performance of his duties.

Subject has been approved for appointment under the authority of Paragraph 4(d) of Regulation 10-210, and under Regulation 20-730 including access to classified information through Top Secret as required in the performance of his duties.

2. Unless arrangements are made within 60 days for entrance on duty within 120 days, this approval becomes invalid.

3. As part of the entrance on duty processing:

A personal interview in the Office of Security must be arranged.

A personal interview is not necessary.

This clearance is issued in advance of receipt of a SF-377. Subject will be assigned to the WH Division.

FOR THE DIRECTOR OF SECURITY:

*W. M. Knott*

W. M. Knott  
Chief, Personnel Security Division

SECRET

BIOGRAPHIC INFORMATION

Name: Raimon E. HIDALGO, Jr.  
Grade: GS-11  
Service Designation: CI

Date and Place of Birth: 27 May 1919  
Havana, Cuba

Marital Status: Married

Education and Career Outside the Agency: 1945-46 New York University - No degree (2 yrs)  
Nov 45-Dec 49 FBI, Eastern part of United States -  
Undercover Agent

Languages: Spanish - Fluent  
Portuguese & French - Fair

Military Duty: 27 Mar 39-27 Sep 1943 New York National Guard  
(Federalized Oct 40) U.S. Army

CIA Experience: 18 Feb 52 Ex Appt., Contract Employee, GS-9, DDP/WH/  
HYPOTHESIS, [redacted]  
1 Feb 56 Promotion, Contract Employee, GS-11, DDP/WH,  
HYPOTHESIS, [redacted]

CIA Training: Covert training

**CONFIDENTIAL**

*(When Filled In)*

INSTRUCTIONS: COMPLETE IN DUPLICATE. THE DATA RECORDED ON THIS FORM IS ESSENTIAL IN DETERMINING TRAVEL EXPENSES ALLOWABLE IN CONNECTION WITH LEAVE AT GOVERNMENT EXPENSE, OVERSEAS DUTY, RETURN TO RESIDENCE UPON SEPARATION, AND FOR PROVIDING CURRENT RESIDENCE AND DEPENDENCY INFORMATION REQUIRED IN THE EVENT OF AN EMPLOYEE EMERGENCY. THE ORIGINAL OF THIS FORM WILL BE FILED IN THE EMPLOYEE'S OFFICIAL PERSONNEL FOLDER.

NAME OF EMPLOYEE <i>(Last) HIDALGO JA (First) BALMES (Middle) NIEVES</i>		
1. RESIDENCE DATA		
PLACE OF RESIDENCE WHEN APPOINTED <i>D.C.</i>	LAST PLACE OF RESIDENCE IN CONTINENTAL U.S. (If appointed abroad)	
PLACE IN CONTINENTAL U.S. DESIGNATED AS PERMANENT RESIDENCE <i>D.C.</i>		
2. MARITAL STATUS		
<input type="checkbox"/> CHFC (X) ONE <input type="checkbox"/> SINGLE <input checked="" type="checkbox"/> MARRIED <input type="checkbox"/> SEPARATED <input type="checkbox"/> DIVORCED <input type="checkbox"/> WIDOWED <input type="checkbox"/> ANNULLED		
IF MARRIED, INDICATE PLACE OF MARRIAGE <i>BELZONI MISS. USA</i>	DATE OF MARRIAGE <i>9 APR 1943</i>	
IF DIVORCED, PLACE OF DIVORCE DECREE	DATE OF DECREE	
IF WIDOWED, INDICATE PLACE SPOUSE DIED	DATE SPOUSE DIED	
IF PREVIOUSLY MARRIED, INDICATE NAME(S) OF SPOUSE REASON(S) FOR TERMINATION, AND DATE(S)		
3. MEMBERS OF FAMILY		
NAME OF SPOUSE <i>LOUISE HIDALGO</i>	ADDRESS (No., Street, City, Zone, State)	TELEPHONE NUMBER
NAMES OF CHILDREN <i>LUZ MARIA</i> <i>FRANCES REBECCA</i>	ADDRESS	SEX <i>F</i> AGE <i>13</i> <i>F</i> <i>8</i>
NAME OF FATHER (Or male guardian) <i>BALMES N HIDALGO</i>	ADDRESS	TELEPHONE NUMBER
NAME OF MOTHER (Or female guardian) <i>ROSE HIDALGO</i>	ADDRESS	TELEPHONE NUMBER
WHAT MEMBER(S) OF YOUR FAMILY HAS BEEN TOLD OF YOUR AFFILIATION WITH THE AGENCY FOR EMERGENCY PURPOSES? <i>WIFE</i>		
4. PERSON TO BE NOTIFIED IN CASE OF EMERGENCY		
NAME (Mr, Mrs, Miss) (Last-First-Middle) <i>HIDALGO, LOUISE</i>	RELATIONSHIP <i>WIFE</i>	
HOME ADDRESS (No., Street, City, Zone, State)	HOME TELEPHONE NUMBER	
BUSINESS ADDRESS (No., Street, City, Zone, State) AND NAME OF EMPLOYER, IF APPLICABLE		BUSINESS TELEPHONE & EXTENSION
IS THE INDIVIDUAL NAMED ABOVE SITTING OF YOUR AGENCY AFFILIATION? <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO		
IS THIS INDIVIDUAL AUTHORIZED TO MAKE DECISIONS ON YOUR BEHALF? <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO		
DOES THIS INDIVIDUAL KNOW THAT HE HAS BEEN DESIGNATED AS YOUR EMERGENCY ADDRESSEE? <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO		
THE PERSONS NAMED IN ITEM 3 ABOVE MAY ALSO BE NOTIFIED IN CASE OF EMERGENCY. IF SUCH NOTIFICATION IS NOT DESIRABLE BECAUSE OF HEALTH OR OTHER REASONS, PLEASE SO STATE IN ITEM 7 ON THE REVERSE SIDE OF THIS FORM.		
E. VOLUNTARY ENTRIES		
INDICATE ANY BANKING INSTITUTIONS WITH WHICH YOU HAVE ACCOUNTS <i>GREENWICH SAVINGS BANK</i>		
CONTINUED ON REVERSE SIDE		
<b>CURRENT RESIDENCE AND DEPENDENCY REPORT</b>		

CONFIDENTIAL  
(When Filled In)

5. (CONTINUED)  
IN WHOSE NAME(S) ARE THE ACCOUNTS LISTED?  
SAMUEL N. HINDLON FOR LOUISE HINDLON

HAVE YOU COMPLETED A LAST WILL AND TESTAMENT?  YES  NO. IF "YES", WHERE IS DOCUMENT LOCATED?

HAVE YOU EXECUTED A POWER OF ATTORNEY?  YES  NO. IF "YES", WHO POSSESSES THE POWER OF ATTORNEY?

6. ADDITIONAL DATA AND/OR CONTINUATION OF PRECEDING ITEMS  
  
Do NOT NOTIFY OTHER PERSONS IN ITEM 3 OF  
EMERGENCY. UNLESS WIFE IS NOT AVAILABLE.

SIGNED BY	DATE	SIGNATURE
		<i>Samuel N. Hindlon</i>



STATEMENT OF PRIOR FEDERAL AND MILITARY SERVICE

**IMPORTANT:** The information on this form will be used in determining creditable service for *leave purposes* and retention credits for *reduction in force*. The employee should complete Part I and the Personnel Office should complete Parts II through IV.

PART I.—EMPLOYEE'S STATEMENT							PART II.—THIS COLUMN IS FOR PERSONNEL OFFICE USE			
1. NAME (Last, first, middle initial) <i>HIDALGO JR, BALMES NIEVES</i>					2. DATE OF BIRTH <i>27 MAY 1919</i>		9. RETENTION GROUP			
3. LIST THE FOLLOWING INFORMATION CONCERNING ALL FEDERAL AND DISTRICT OF COLUMBIA SERVICE YOU HAVE HAD PRIOR TO YOUR PRESENT APPOINTMENTS (Do not include military service).							10. CSC STATUS (For permanent employees only) <input type="checkbox"/> YES <input type="checkbox"/> NO			
NAME AND LOCATION OF AGENCY	FROM—			TO—			TYPE OF APPOINTMENT IF KNOWN	11. SERVICE		
	YEAR	MONTH	DAY	YEAR	MONTH	DAY		YEAR	MONTH	DAY
<i>US ARMY DEPT OF DEFENSE QUARTERMASTER CORP</i>	<i>51</i>	<i>1</i>	<i>12</i>	<i>Present</i>				<i>7</i>	<i>2</i>	<i>6</i>
4. LIST PERIODS OF SERVICE IN ANY BRANCH OF THE ARMED FORCES OF THE UNITED STATES. IF YOU HAD NO MILITARY SERVICE, WRITE "NONE."										
BRANCH	FROM—			TO—			DISCHARGE (Hon. or dishon.?)	12. TOTAL SERVICE		
	YEAR	MONTH	DAY	YEAR	MONTH	DAY		YEAR	MONTH	DAY
<i>US ARMY INF</i>	<i>1933</i>	<i>MAR</i>	<i>27</i>	<i>43</i>	<i>SEPT</i>	<i>21</i>	<i>HONORABLE</i>	<i>4</i>	<i>5</i>	<i>25</i>
5. DURING PERIODS OF EMPLOYMENT SHOWN IN ITEM 3, DID YOU HAVE A TOTAL OF MORE THAN 6 MONTHS ABSENCE WITHOUT PAY, INCLUDING PERIODS OF MERCHANT MARINE SERVICE, DURING ANY ONE CALENDAR YEAR? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO IF ANSWER IS "YES," LIST FOLLOWING INFORMATION.							13. NONCREDITABLE SERVICE (Leave purposes only):			
TYPE IF KNOWN (LWOP, Fuel, Susp, AWOL, Mer Mer)	FROM—			TO—			TOTAL			
	YEAR	MONTH	DAY	YEAR	MONTH	DAY	YEARS	MONTHS	DAYS	
6. DURING THE FEDERAL SERVICE LISTED IN ITEM 3, DID YOU ACQUIRE A PERMANENT COMPETITIVE CIVIL SERVICE STATUS? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO (If answer is "Yes," in what agency were you employed at the time status was acquired?)							14. NONCREDITABLE SERVICE (RIF purposes only):			
7. ARE YOU: A. THE WIFE OF A DISABLED VETERAN? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO B. THE MOTHER OF A DECEASED OR DISABLED VETERAN? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO C. THE UNMARRIED WIDOW OF A VETERAN? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO							15. REEMPLOYMENT RIGHTS <input type="checkbox"/> YES <input type="checkbox"/> NO			
8. TO BE EXECUTED BEFORE A NOTARY PUBLIC OR OTHER PERSONS AUTHORIZED TO ADMINISTER OATHS. I swear (or affirm) that the above statements are true to the best of my knowledge and belief.							16. RETENTION RIGHTS <input type="checkbox"/> YES <input type="checkbox"/> NO			
							17. EXPIRATION DATE OF RETENTION RIGHTS			

(DATE)

*Jelmas R. Hidalgo*  
 (SIGNATURE)

Subscribed and sworn to before me on this 13th day of Mar 1958 at Washington, D.C.  
 (MONTH) (CITY) (STATE)

SEAL

*Betty A. Bussard*

NOTE: If oath is taken before a Notary Public, the date of expiration of his Commission should be shown.

**PART III.—DETERMINING CREDITABLE SERVICE  
AND SERVICE COMPUTATION DATE FOR  
LEAVE PURPOSES**

	YEARS	MONTHS	DAYS
TOTAL SERVICE (Item 12) .....			
NONCREDITABLE SERVICE (Item 13) .....			
CREDITABLE SERVICE (Leave purposes) .....			
ENTRANCE ON DUTY DATE (Present agency) .....	58	3	17
LESS CREDITABLE SERVICE (Leave purposes) .....	11	8	1
SERVICE COMPUTATION DATE (Leave purposes) .....	46	7	16

**PART IV.—DETERMINING CREDITABLE SERVICE  
AND SERVICE COMPUTATION DATE FOR  
REDUCTION IN FORCE PURPOSES**

(To be completed only in those cases when the amount of creditable service for reduction  
in force purposes differs from the amount creditable for leave purposes)

	YEARS	MONTHS	DAYS
TOTAL SERVICE (Item 12) .....			
NONCREDITABLE SERVICE (Item 14) .....			
CREDITABLE SERVICE (RIF purposes) .....			
ENTRANCE ON DUTY DATE (Present agency) .....			
LESS CREDITABLE SERVICE (RIF purposes) .....			
SERVICE COMPUTATION DATE (RIF purpose) .....			

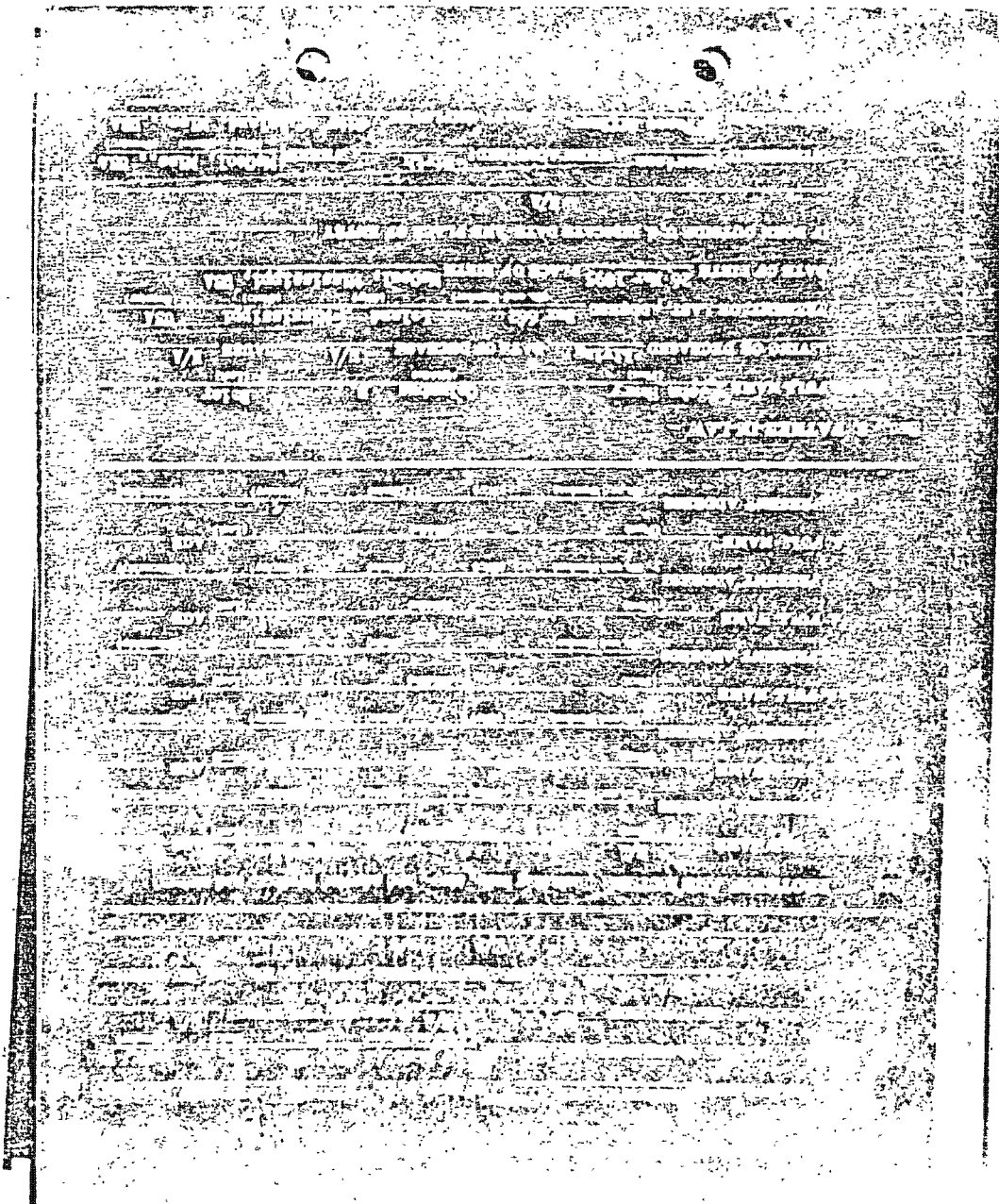
(Enter as the "service computation date" on the employee's "Service Record Card," SF-7)

REMARKS:



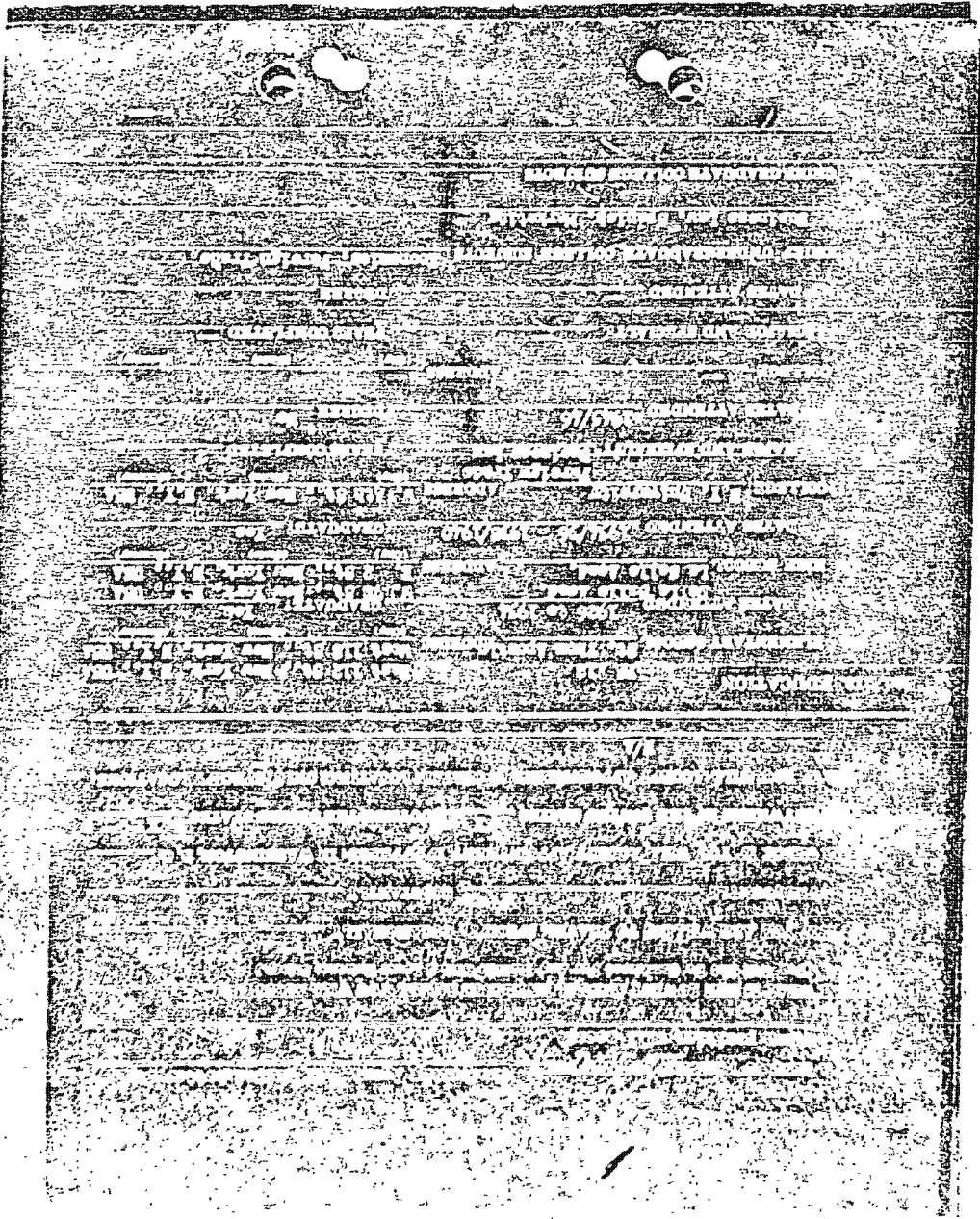
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[The following text is extremely faint and largely illegible due to heavy noise and low contrast. It appears to be a list or index of names and dates, possibly from a historical document or a ledger. Some recognizable words include "American", "1870", "1871", "1872", "1873", "1874", "1875", "1876", "1877", "1878", "1879", "1880", "1881", "1882", "1883", "1884", "1885", "1886", "1887", "1888", "1889", "1890".]











UNITED STATES GOVERNMENT

STANDARD FORM NO. 100

(REVISED 1-25-60)

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1. NAME (Last, first, middle initial)  
 2. ADDRESS (Street, city, state, zip)  
 3. SOCIAL SECURITY NUMBER  
 4. DATE OF BIRTH (Month, day, year)  
 5. SEX (M or F)  
 6. RACE (Specify)  
 7. HIGHEST GRADE OF SCHOOL ATTENDED  
 8. PRESENT GRADE OF SCHOOL ATTENDED  
 9. MARITAL STATUS (M, S, W, D, S, O, O, O)  
 10. NUMBER OF DEPENDENTS (Specify)  
 11. OCCUPATION (Specify)  
 12. EMPLOYER (Specify)  
 13. DATE OF EMPLOYMENT (Specify)  
 14. TYPE OF EMPLOYMENT (Specify)  
 15. DATE OF TERMINATION (Specify)

---

**CHRONOLOGICAL HISTORY OF EMPLOYMENT FOR PAST 36 MONTHS**  
 FOR ALL PERIODS INCLUDE CASUAL EMPLOYMENT. INCLUDE ALSO PERIODS  
 OF UNEMPLOYMENT. GIVE ADDRESS AND STATE WHAT YOU DID DURING  
 PERIOD OF UNEMPLOYMENT. LIST EACH POSITION FIRST, LAST, AND  
 DATE OF TERMINATION. (See attached also)  
 (If you have been in military or naval service, list dates and  
 grade of service.)

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1. NAME (Last, first, middle initial)  
 2. ADDRESS (Street, city, state, zip)  
 3. SOCIAL SECURITY NUMBER  
 4. DATE OF BIRTH (Month, day, year)  
 5. SEX (M or F)  
 6. RACE (Specify)  
 7. HIGHEST GRADE OF SCHOOL ATTENDED  
 8. PRESENT GRADE OF SCHOOL ATTENDED  
 9. MARITAL STATUS (M, S, W, D, S, O, O, O)  
 10. NUMBER OF DEPENDENTS (Specify)  
 11. OCCUPATION (Specify)  
 12. EMPLOYER (Specify)  
 13. DATE OF EMPLOYMENT (Specify)  
 14. TYPE OF EMPLOYMENT (Specify)  
 15. DATE OF TERMINATION (Specify)

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1. NAME (Last, first, middle initial)  
 2. ADDRESS (Street, city, state, zip)  
 3. SOCIAL SECURITY NUMBER  
 4. DATE OF BIRTH (Month, day, year)  
 5. SEX (M or F)  
 6. RACE (Specify)  
 7. HIGHEST GRADE OF SCHOOL ATTENDED  
 8. PRESENT GRADE OF SCHOOL ATTENDED  
 9. MARITAL STATUS (M, S, W, D, S, O, O, O)  
 10. NUMBER OF DEPENDENTS (Specify)  
 11. OCCUPATION (Specify)  
 12. EMPLOYER (Specify)  
 13. DATE OF EMPLOYMENT (Specify)  
 14. TYPE OF EMPLOYMENT (Specify)  
 15. DATE OF TERMINATION (Specify)

[The text in this block is extremely faint and illegible due to heavy noise and low contrast. It appears to be a list or a set of records with multiple columns and rows. Some faint markings, possibly dates or numbers, are visible but cannot be transcribed accurately.]

HAVE YOU BEEN ADVISED BY THE BUREAU OF THE  
 DEPARTMENT OF JUSTICE THAT YOU ARE BEING  
 CONSIDERED FOR EMPLOYMENT IN THE  
 FEDERAL GOVERNMENT?

YES \_\_\_\_\_ NO \_\_\_\_\_

IF YES, PLEASE STATE THE NAME OF THE  
 AGENCY AND THE POSITION FOR WHICH YOU  
 ARE BEING CONSIDERED.

NAME OF AGENCY \_\_\_\_\_  
 POSITION \_\_\_\_\_

DATE OF INTERVIEW \_\_\_\_\_

NAME OF INTERVIEWER \_\_\_\_\_

SIGNATURE OF INTERVIEWER \_\_\_\_\_

TITLE OF INTERVIEWER \_\_\_\_\_

OFFICE OF THE DIRECTOR OF INVESTIGATION  
 FEDERAL BUREAU OF INVESTIGATION  
 DEPARTMENT OF JUSTICE

[The following text is extremely faint and largely illegible due to heavy noise and low contrast. It appears to be a multi-paragraph document with several distinct sections.]

[Section 1: Several lines of text, possibly a header or introductory paragraph.]

[Section 2: A paragraph of text, possibly describing a process or procedure.]

[Section 3: A paragraph of text, possibly a continuation of the previous section.]

[Section 4: A paragraph of text, possibly a concluding statement or a specific instruction.]

[Section 5: A paragraph of text, possibly a final note or signature block.]

UNITED STATES DEPARTMENT OF JUSTICE  
FEDERAL BUREAU OF INVESTIGATION

MEMORANDUM FOR THE DIRECTOR, FBI

SUBJECT: [Illegible]

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1. [Illegible]

2. [Illegible]

3. [Illegible]

4. [Illegible]

5. [Illegible]

6. [Illegible]

7. [Illegible]

8. [Illegible]

9. [Illegible]

10. [Illegible]

11. [Illegible]

12. [Illegible]

13. [Illegible]

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98. [Illegible]

99. [Illegible]

100. [Illegible]



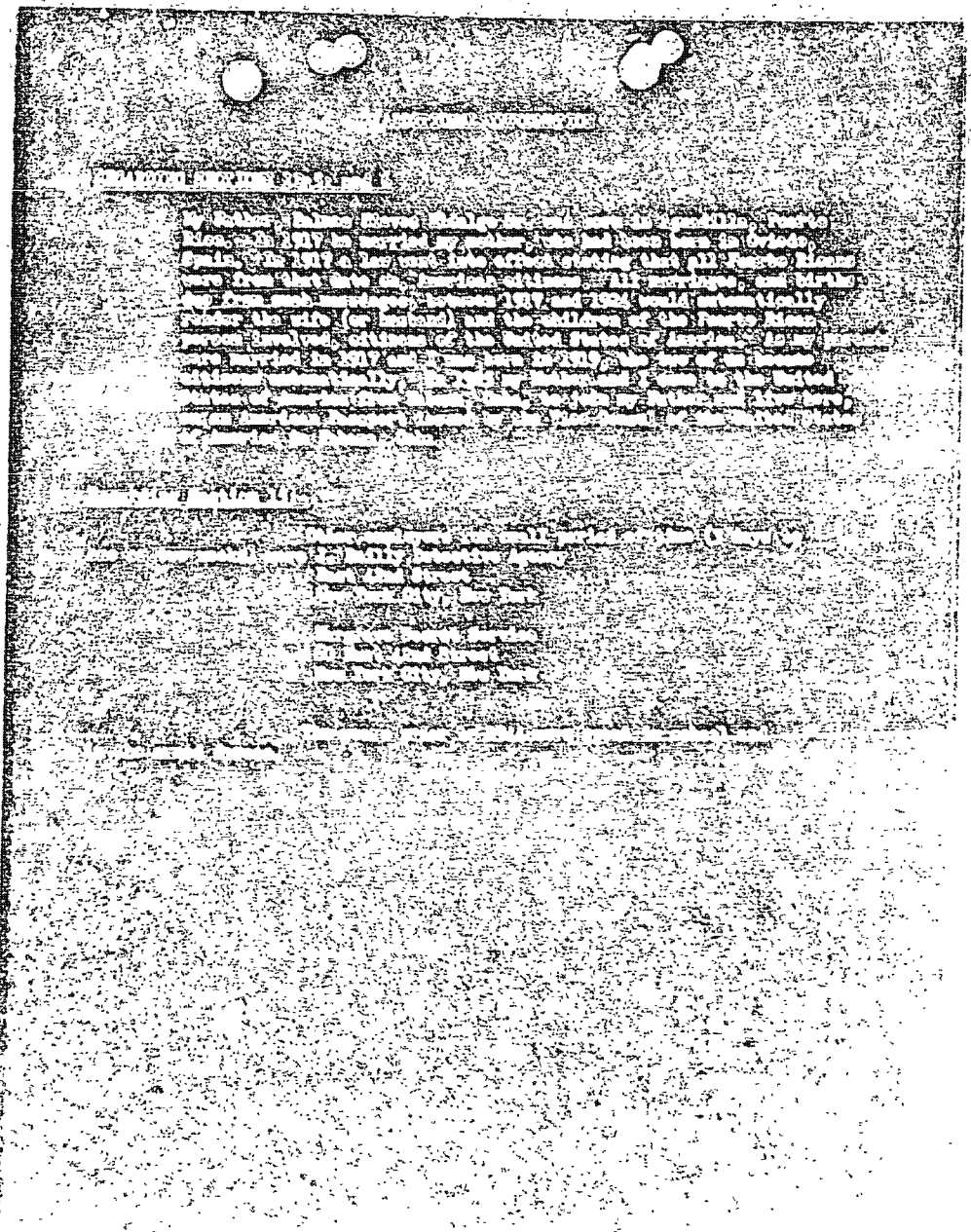
[The following text is extremely faint and largely illegible due to heavy noise and low contrast. It appears to be a multi-paragraph document, possibly a report or a set of instructions. The text is organized into several distinct sections, separated by horizontal lines. Some words are difficult to discern but may include terms like 'REPORT', 'SECTION', 'ITEM', and 'REFERENCE'. The overall structure suggests a formal document with multiple entries or points to be reviewed.]













## PERSONAL HISTORY STATEMENT

**Instructions:** 1. Answer all questions completely. If question is not applicable write "NA." Write "unknown" only if you do not know the answer and cannot obtain the answer from personal records. Use the blank pages at the end of this form for extra details on any question or questions for which you do not have sufficient room.

2. Type, print, or write carefully; illegible or incomplete forms will not receive consideration.

HAVE YOU READ AND DO YOU UNDERSTAND THE INSTRUCTIONS? \_\_\_\_\_  
(Yes or No)

**Sec. 1. PERSONAL BACKGROUND**

	<b>IKL</b>		Telephone:
A. FULL NAME Mr. _____	Ealnes	Nieves	Office NA
(U.S. Initial)	(First)	(Middle)	(Last)
		Hidalgo, Jr.	Ext. NA
			Home NA

PRESENT ADDRESS House number 67, 94th St., East, \_\_\_\_\_  
(St. and Number) (City) (State) (Country)

PERMANENT ADDRESS NA  
(St. and Number) (City) (State) (Country)

B. NICKNAME "Barney" "Bal" WHAT OTHER NAMES HAVE YOU USED? See remarks

UNDER WHAT CIRCUMSTANCES HAVE YOU EVER USED THESE NAMES? See remarks

HOW LONG? See remarks IF A LEGAL CHANGE, GIVE PARTICULARS  
 No  
(Where) (By what authority)

C. DATE OF BIRTH 27 May 1919 PLACE OF BIRTH Havana, Cuba  
(City) (State) (Country)

D. PRESENT CITIZENSHIP U. S. BY BIRTH? NA BY MARRIAGE? NA  
(Country)

BY NATURALIZATION CERTIFICATE NO. NA ISSUED NA BY NA  
(Date) (Court)  
 AT See remarks  
(City) (State) (Country)

HAVE YOU HAD A PREVIOUS NATIONALITY? No  
(Yes or No) (Country)

HELD BETWEEN WHAT DATES? NA TO NA ANY OTHER NATIONALITY? NA  
(Country)

GIVE PARTICULARS NA

HAVE YOU TAKEN STEPS TO CHANGE PRESENT CITIZENSHIP? No GIVE PARTICULARS:  
 NA

E. IF BORN OUTSIDE U. S. WHEN DID YOU FIRST ARRIVE IN THIS COUNTRY? March 1924

PORT OF ENTRY: NYC, NY ON PASSPORT OF WHAT COUNTRY? U. S.

LAST U. S. VISA None  
(Number) (Type) (Place of Issue) (Date of Issue)

SEC. 2. PHYSICAL DESCRIPTION

AGE 38 SEX Male HEIGHT 5' 9 1/2" WEIGHT 145  
EYES Brown HAIR Dark Brown COMPLEXION Dark SCARS under chin  
BUILD slight OTHER DISTINGUISHING FEATURES Mole, Upper left lip.

SEC. 3. MARITAL STATUS

A. SINGLE \_\_\_\_\_ MARRIED X DIVORCED \_\_\_\_\_ WIDOWED \_\_\_\_\_

STATE DATE, PLACE, AND REASON FOR ALL SEPARATIONS, DIVORCES OR ANNULMENTS \_\_\_\_\_

B. WIFE OR HUSBAND (IF YOU HAVE BEEN MARRIED MORE THAN ONCE—INCLUDING ANNULMENTS—USE A SEPARATE SHEET FOR FORMER WIFE OR HUSBAND GIVING DATA REQUIRED BELOW FOR ALL PREVIOUS MARRIAGES.)

NAME OF SPOUSE Annie Louise Eeier Hidalgo  
(First) (Middle) (Maiden) (Last)

PLACE AND DATE OF MARRIAGE Belzoni, Mississippi - 9 April 1943

~~HIS~~ (OR HER) ADDRESS BEFORE MARRIAGE Rt. 2, Box 76, Belzoni, Mississippi, USA  
(St. and Number) (City) (State) (Country)

LIVING OR DECEASED Living DATE OF DECEASE NA CAUSE NA

PRESENT, OR LAST, ADDRESS Same as applicant  
(St. and Number) (City) (State) (Country)

DATE OF BIRTH 15 May 1927 PLACE OF BIRTH Morgan City, Mississippi, USA  
(City) (State) (Country)

IF BORN OUTSIDE U. S. INDICATE DATE AND PLACE OF ENTRY NA

CITIZENSHIP us WHEN ACQUIRED? Birth WHERE? USA  
(City) (State) (Country)

OCCUPATION File Clerk LAST EMPLOYER Classified

EMPLOYER'S OR BUSINESS ADDRESS Classified  
(St. and Number) (City) (State) (Country)

MILITARY SERVICE FROM NA TO NA BRANCH OF SERVICE NA  
(Date) (Date)

COUNTRY NA DETAILS OF OTHER GOVT. SERVICE, U. S. OR FOREIGN

NA

SEC. 4. CHILDREN OR DEPENDENTS (Include partial dependents):

1 NAME Luz Maria Hidalgo RELATIONSHIP Daughter AGE 12  
 CITIZENSHIP U. S. ADDRESS Same as applicant.  
(St. and Number) (City) (State) (Country)

2 NAME Frances Rebecca Hidalgo RELATIONSHIP Daughter AGE 7  
 CITIZENSHIP U. S. ADDRESS Same as applicant.  
(St. and Number) (City) (State) (Country)

3 NAME \_\_\_\_\_ RELATIONSHIP \_\_\_\_\_ AGE \_\_\_\_\_  
 CITIZENSHIP \_\_\_\_\_ ADDRESS \_\_\_\_\_  
(St. and Number) (City) (State) (Country)

(also dependent)

SEC. 5. FATHER (Give the same information for stepfather and/or guardian on a separate sheet)

FULL NAME Baldes Reyes Hidalgo  
(First) (Middle) (Last)

LIVING OR DECEASED Living DATE OF DECEASE \_\_\_\_\_ CAUSE NA

PRESENT OR LAST ADDRESS Same as applicant.  
(St. and Number) (City) (State) (Country)

DATE OF BIRTH December 1920 PLACE OF BIRTH Aguadilla, Puerto Rico  
(City) (State) (Country)

IF BORN OUTSIDE U. S. INDICATE DATE AND PLACE OF ENTRY 1923 (March) NYC, NY

CITIZENSHIP U. S. WHEN ACQUIRED? Birth WHERE? Puerto Rico  
(City) (State) (Country)

OCCUPATION Retired LAST EMPLOYER Do not remember

EMPLOYER'S OR OWN BUSINESS ADDRESS None  
(St. and Number) (City) (State) (Country)

MILITARY SERVICE FROM NA TO NA BRANCH OF SERVICE NA  
(Date) (Date)

COUNTRY NA DETAILS OF OTHER GOVT. SERVICE, U. S. OR FOREIGN  
NA

SEC. 6. MOTHER (Give the same information for stepmother on a separate sheet)

FULL NAME Frances Resario Hidalgo  
(First) (Middle) (Last)

LIVING OR DECEASED Living DATE OF DECEASE NA CAUSE NA

PRESENT OR LAST ADDRESS Same as applicant.  
(St. and Number) (City) (State) (Country)

DATE OF BIRTH 12 Jan. 1892 PLACE OF BIRTH Oviedo, Spain

CITIZENSHIP U. S. WHEN ACQUIRED? Marriage 1917 WHERE? Havana, Cuba  
(City) (State) (Country)

IF BORN OUTSIDE U. S. INDICATE DATE AND PLACE OF ENTRY March 1924, NYC, NY, USA



SEC. 9. MOTHER-IN-LAW

FULL NAME Erma Rebecca Feior  
(First) (Middle) (Last)

LIVING OR DECEASED Living DATE OF DECEASE NA CAUSE NA

PRESENT, OR LAST, ADDRESS 210 California Avenue, Leland, Mississippi, USA  
(St. and Number) (City) (State) (Country)

DATE OF BIRTH 1893 PLACE OF BIRTH USA

IF BORN OUTSIDE U. S. INDICATE DATE AND PLACE OF ENTRY NA

CITIZENSHIP U. S. WHEN ACQUIRED? Birth WHERE? U.S.A.  
(City) (State) (Country)

OCCUPATION Housewife LAST EMPLOYER NA

SEC. 10. RELATIVES BY BLOOD, MARRIAGE OR ADOPTION, WHO EITHER LIVE ABROAD OR WHO ARE NOT CITIZENS OF THE UNITED STATES:

See remarks

1. NAME \_\_\_\_\_ RELATIONSHIP \_\_\_\_\_ AGE \_\_\_\_\_  
 CITIZENSHIP \_\_\_\_\_ ADDRESS \_\_\_\_\_  
(St. and Number) (City) (State) (Country)

2. NAME \_\_\_\_\_ RELATIONSHIP \_\_\_\_\_ AGE \_\_\_\_\_  
 CITIZENSHIP \_\_\_\_\_ ADDRESS \_\_\_\_\_  
(St. and Number) (City) (State) (Country)

3. NAME \_\_\_\_\_ RELATIONSHIP \_\_\_\_\_ AGE \_\_\_\_\_  
 CITIZENSHIP \_\_\_\_\_ ADDRESS \_\_\_\_\_  
(St. and Number) (City) (State) (Country)

SEC. 11. RELATIVES BY BLOOD OR MARRIAGE IN THE MILITARY OR CIVIL SERVICE OF THE U. S. OR OF A FOREIGN GOVERNMENT:

NONE

1. NAME \_\_\_\_\_ RELATIONSHIP \_\_\_\_\_ AGE \_\_\_\_\_  
 CITIZENSHIP \_\_\_\_\_ ADDRESS \_\_\_\_\_  
(St. and Number) (City) (State) (Country)  
 TYPE AND LOCATION OF SERVICE (IF KNOWN) \_\_\_\_\_

2. NAME \_\_\_\_\_ RELATIONSHIP \_\_\_\_\_ AGE \_\_\_\_\_  
 CITIZENSHIP \_\_\_\_\_ ADDRESS \_\_\_\_\_  
(St. and Number) (City) (State) (Country)  
 TYPE AND LOCATION OF SERVICE (IF KNOWN) \_\_\_\_\_

3. NAME \_\_\_\_\_ RELATIONSHIP \_\_\_\_\_ AGE \_\_\_\_\_  
 CITIZENSHIP \_\_\_\_\_ ADDRESS \_\_\_\_\_  
(St. and Number) (City) (State) (Country)  
 TYPE AND LOCATION OF SERVICE (IF KNOWN) \_\_\_\_\_



SEC. 12. POSITION DATA

A. KIND OF POSITION APPLIED FOR ..... See covering dispatch reference .....

B. WHAT IS THE LOWEST ANNUAL ENTRANCE SALARY YOU WILL ACCEPT? \$ 5390.00 P/A  
(You Will Not Be Considered For Any Position With A Lower Entrance Salary.)

C. IF YOU ARE WILLING TO TRAVEL SPECIFY: OCCASIONALLY ..... Yes .....  
FREQUENTLY ..... CONSTANTLY ..... X .....

D. CHECK IF YOU WILL ACCEPT APPOINTMENT, IF OFFERED: IN WASHINGTON, D. C. X .....  
ANYWHERE IN THE UNITED STATES X ..... OUTSIDE THE UNITED STATES X .....

E. IF YOU WILL ACCEPT APPOINTMENT IN CERTAIN LOCATIONS ONLY, SPECIFY LOCATIONS:  
.....

SEC. 13. EDUCATION

ELEMENTARY SCHOOL St. Thomas Apostolic ADDRESS NYC NY USA  
(City) (State) (Country)  
DATES ATTENDED 1926-1934 GRADUATE? Yes

HIGH SCHOOL La Salle Academy ADDRESS 2nd St. and 2nd Avenue NYC, NY USA  
(City) (State) (Country)  
DATES ATTENDED 1936-1940 GRADUATE? Yes

COLLEGE University ADDRESS Washington Square, NYC, NY, USA  
Foreign Trade and (City) (State) (Country)  
MAJOR AND SPECIALTY Business Law YEARS COMPLETED Two (Night School)

DATES ATTENDED 1944-1945 DEGREE No

COLLEGE ADDRESS (City) (State) (Country)  
MAJOR AND SPECIALTY YEARS COMPLETED  
DATES ATTENDED DEGREE

CHIEF UNDERGRADUATE COLLEGE SUBJECTS .....

CHIEF GRADUATE COLLEGE SUBJECTS .....

Sec. 14. ACTIVE U. S. OR FOREIGN MILITARY SERVICE

U. S. Army Cpl. 1940-1943  
 (Country) (Service) (Rank) (Dates of Service)  
 Camp Hale, Colorado 202 19766 Honorable  
 (Last Station) (Serial Number) (Type of Discharge)  
 REMARKS: None  
 Do not remember  
 SELECTIVE SERVICE BOARD NUMBER ADDRESS  
 IF DEFERRED GIVE REASON NA  
 INDICATE MEMBERSHIP IN MILITARY RESERVE ORGANIZATIONS NA

Sec. 15. CHRONOLOGICAL HISTORY OF EMPLOYMENT FOR PAST 15 YEARS. ACCOUNT FOR ALL PERIODS. INCLUDE CASUAL EMPLOYMENT. INCLUDE ALSO PERIODS OF UNEMPLOYMENT. GIVE ADDRESSES AND STATE WHAT YOU DID DURING PERIODS OF UNEMPLOYMENT. LIST LAST POSITION FIRST. (List all civilian employment by a foreign government, regardless of dates.)

FROM Feb. 1952 TO Present CLASSIFICATION GRADE (IF IN FEDERAL SERVICE) GS-11

EMPLOYING FIRM OR AGENCY See covering dispatch reference  
 ADDRESS See covering dispatch reference  
 (St. and Number) (City) (State) (Country)  
 KIND OF BUSINESS U. S. Govt. NAME OF SUPERVISOR See covering dispatch  
 TITLE OF JOB See covering dispatch SALARY \$ 6390.00 PER annum  
 YOUR DUTIES See covering dispatch reference

REASONS FOR LEAVING

FROM January 1951 TO February 1952 CLASSIFICATION GRADE (IF IN FEDERAL SERVICE) GS-7

EMPLOYING FIRM OR AGENCY NY Procurement Agency  
 ADDRESS 111 East 16th Street NYC, NY, USA  
 (St. and Number) (City) (State) (Country)  
 KIND OF BUSINESS U. S. Govt. NAME OF SUPERVISOR Do not remember  
 TITLE OF JOB Inspector SALARY \$ 3525.00 PER annum  
 YOUR DUTIES Inspecting material being purchased by U. S. Govt. specifically the U. S. Army.

REASONS FOR LEAVING To obtain present position.

(8)

FROM July 1950 TO January 1951 CLASSIFICATION GRADE (IF IN FEDERAL SERVICE) NA

EMPLOYING FIRM OR AGENCY American Trust Company

ADDRESS Wall Street, New York City, NY, USA  
(St. and Number) (City) (State) (Country)

KIND OF BUSINESS Banking NAME OF SUPERVISOR Do not remember

TITLE OF JOB Collections clerk SALARY \$50.00 PER week

YOUR DUTIES Export banking clerical work

REASONS FOR LEAVING Left for higher paying work

FROM January 1948 TO May 1950 CLASSIFICATION GRADE (IF IN FEDERAL SERVICE) NA

EMPLOYING FIRM OR AGENCY Colonial Trust Company

ADDRESS 6th Avenue and 45th Street, NYC, NY, USA  
(St. and Number) (City) (State) (Country)

KIND OF BUSINESS Banking NAME OF SUPERVISOR Do not remember

TITLE OF JOB Collections clerk SALARY \$50.00 PER week

YOUR DUTIES Export banking clerical work.

REASONS FOR LEAVING Promised promotion failed to materialize.

FROM August 1945 TO September 1947 CLASSIFICATION GRADE (IF IN FEDERAL SERVICE) NA

EMPLOYING FIRM OR AGENCY Francis H. Leggett Inc.

ADDRESS 28th Street and 12th Avenue, NYC, NY, USA  
(St. and Number) (City) (State) (Country)

KIND OF BUSINESS Wholesale Grocery house. NAME OF SUPERVISOR Do not remember

TITLE OF JOB Correspondence clerk SALARY \$ 57.00 PER week

YOUR DUTIES Export correspondence clerical duties.

REASONS FOR LEAVING Dissatisfied with type of work.

14-00000

Sec. 16. HAVE YOU EVER BEEN DISCHARGED OR ASKED TO RESIGN FROM ANY POSITION? HAVE YOU LEFT A POSITION UNDER CIRCUMSTANCES WHICH YOU DESIRE TO EXPLAIN? GIVE DETAILS:

No

Sec. 17. GENERAL QUALIFICATIONS

A. FOREIGN LANGUAGES (STATE DEGREE OR PROFICIENCY AS "SLIGHT," "FAIR," OR "FLUENT")

LANGUAGE Spanish..... SPEAK Fluent..... READ... Fluent... WRITE... Fluent..

LANGUAGE Portuguese... SPEAK Slight..... READ... Fair..... WRITE... Slight..

LANGUAGE..... SPEAK..... READ..... WRITE.....

B. LIST ALL SPORTS AND HOBBIES WHICH INTEREST YOU: INDICATE DEGREE OF PROFICIENCY IN EACH:

Judo - Have attained "yellow belt" rank.....  
Photography - Very good degree of proficiency.....  
Bowling - Fair degree of proficiency.....  
Philately - Fair degree of proficiency.....  
Fishing (no comment).....

C. HAVE YOU ANY QUALIFICATIONS, AS A RESULT OF TRAINING OR EXPERIENCE, WHICH MIGHT FIT YOU FOR A PARTICULAR POSITION?

Yes. See covering dispatch reference.....

D. LIST ANY SPECIAL SKILLS YOU POSSESS AND MACHINES AND EQUIPMENT YOU CAN USE, SUCH AS OPERATION OF SHORT-WAVE RADIO, MULTILITH, COMPTOMETER, KEY PUNCH, TURRET LATHE, SCIENTIFIC OR PROFESSIONAL DEVICES:

All photographic devices.....

APPROXIMATE NUMBER OF WORDS PER MINUTE IN TYPING 30..... SHORTHAND 0.....

E. ARE YOU NOW OR HAVE YOU EVER BEEN A LICENSED OR CERTIFIED MEMBER OF ANY TRADE OR PROFESSION, SUCH AS PILOT, ELECTRICIAN, RADIO OPERATOR, TEACHER, LAWYER, CPA, ETC.

IF YES, INDICATE KIND OF LICENSE AND STATE No

FIRST LIC. OR CERTIFICATE (YR) \_\_\_\_\_ LATEST LIC. OR CERTIFICATE (YR) \_\_\_\_\_

F. GIVE ANY SPECIAL QUALIFICATIONS NOT COVERED ELSEWHERE IN YOUR APPLICATION SUCH AS:

- (1) YOUR MORE IMPORTANT PUBLICATIONS (DO NOT SUBMIT COPIES UNLESS REQUESTED)
- (2) YOUR PATENTS OR INVENTIONS
- (3) PUBLIC SPEAKING AND PUBLIC RELATIONS EXPERIENCE
- (4) HONORS AND FELLOWSHIPS RECEIVED

NA

G. HAVE YOU A PHYSICAL HANDICAP, DISEASE, OR OTHER DISABILITY WHICH SHOULD BE CONSIDERED IN ASSIGNING YOU TO WORK? IF ANSWER IS "YES," EXPLAIN:

Yes. I must wear glasses continually.

H. DO YOU RECEIVE AN ANNUITY FROM THE UNITED STATES OR DISTRICT OF COLUMBIA GOVERNMENT UNDER ANY RETIREMENT ACT OR ANY PENSION OR OTHER COMPENSATION FOR MILITARY OR NAVAL SERVICE? IF ANSWER IS "YES," GIVE COMPLETE DETAILS:

No

SEC. 18. GIVE FIVE CHARACTER REFERENCES—IN THE U. S.—WHO KNOW YOU INTIMATELY—(Give residence and business addresses where possible.)

		Street and Number	City	State
1	Edward Lee Anderson	BUS. ADD. See Dispatch reference.		
		RES. ADD.		
2	Willard Galbraith	BUS. ADD. " " "		
		RES. ADD.		
3	Homer Neal	BUS. ADD. " " "		
		RES. ADD.		
4	Andres Rivera	BUS. ADD. " " "		
		RES. ADD.		
5	Joseph Sancho	BUS. ADD. " " "		
		RES. ADD.		

SEC. 19. NAMES OF FIVE PERSONS WHO KNOW YOU SOCIALLY IN THE UNITED STATES—NOT REFERENCES, RELATIVES, SUPERVISORS, OR EMPLOYERS—(Give residence and business addresses where possible.)

		Street and Number	City	State
1		BUS. ADD.		
		RES. ADD.		
2		BUS. ADD.		
		RES. ADD.		
3		BUS. ADD.		
		RES. ADD.		
4		BUS. ADD.		
		RES. ADD.		
5		BUS. ADD.		
		RES. ADD.		

See remarks

SEC. 20. GIVE THREE NEIGHBORS AT YOUR LAST NORMAL RESIDENCE IN THE U. S.—(Give residence and business addresses where possible.)

		Street and Number	City	State
1		BUS. ADD.		
		RES. ADD.		
2		BUS. ADD.		
		RES. ADD.		
3		BUS. ADD.		
		RES. ADD.		

See remarks

SEC. 21. FINANCIAL BACKGROUND

- A. ARE YOU ENTIRELY DEPENDENT ON YOUR SALARY? Yes IF NOT, STATE SOURCES OF OTHER INCOME
- B. NAMES AND ADDRESSES OF BANKS WITH WHICH YOU HAVE ACCOUNTS Greenwich Savings Bank, 36th St. and Broadway and 6th Avenue, NYC, NY.

C. HAVE YOU EVER BEEN IN, OR PETITIONED FOR, BANKRUPTCY? No  
GIVE PARTICULARS, INCLUDING COURT: \_\_\_\_\_

D. GIVE THREE CREDIT REFERENCES—IN THE U. S.

1. NAME \_\_\_\_\_ ADDRESS \_\_\_\_\_  
(St. and Number) (City) (State)

2. NAME None ADDRESS \_\_\_\_\_  
(St. and Number) (City) (State)

3. NAME \_\_\_\_\_ ADDRESS \_\_\_\_\_  
(St. and Number) (City) (State)

SEC. 22. RESIDENCES FOR THE PAST 15 YEARS.

FROM April 1952 TO Present \_\_\_\_\_  
(St. and number) (City) (State) (Country)

FROM 1949 TO 1952 20 Ave. D, NYC, NY, USA  
(St. and number) (City) (State) (Country)

FROM 1944 TO 1948 200 West 82nd St., NYC, NY, USA  
(St. and number) (City) (State) (Country)

FROM \_\_\_\_\_ TO \_\_\_\_\_  
(St. and number) (City) (State) (Country)

FROM \_\_\_\_\_ TO \_\_\_\_\_  
(St. and number) (City) (State) (Country)

FROM \_\_\_\_\_ TO \_\_\_\_\_  
(St. and number) (City) (State) (Country)

FROM \_\_\_\_\_ TO \_\_\_\_\_  
(St. and number) (City) (State) (Country)

FROM \_\_\_\_\_ TO \_\_\_\_\_  
(St. and Number) (City) (State) (Country)

SEC. 22 RESIDENCE OR TRAVEL OUTSIDE OF THE UNITED STATES

A. FROM 1919 TO 1924 Havana, Cuba Country of birth  
(City or section) (Country) (Purpose)

FROM 1942 TO 1943 Pacific area US Army  
(City or section) (Country) (Purpose)

FROM 1952 TO Present Republic of Panama Work  
(City or section) (Country) (Purpose)

FROM \_\_\_\_\_ TO \_\_\_\_\_  
(City or section) (Country) (Purpose)

FROM \_\_\_\_\_ TO \_\_\_\_\_  
(City or section) (Country) (Purpose)

SEC. 24. CLUBS, SOCIETIES, AND OTHER ORGANIZATIONS

LIST NAMES AND ADDRESSES OF ALL CLUBS, SOCIETIES, PROFESSIONAL SOCIETIES, EMPLOYEE GROUPS, ORGANIZATIONS OF ANY KIND (INCLUDE MEMBERSHIP IN, OR SUPPORT OF, ANY ORGANIZATION HAVING HEADQUARTERS OR BRANCH IN A FOREIGN COUNTRY) TO WHICH YOU BELONG OR HAVE BELONGED:

1. None  
(Name and Chapter) (St. and Number) (City) (State) (Country)

DATES OF MEMBERSHIP: \_\_\_\_\_

2. \_\_\_\_\_  
(Name and Chapter) (St. and Number) (City) (State) (Country)

DATES OF MEMBERSHIP: \_\_\_\_\_

3. \_\_\_\_\_  
(Name and Chapter) (St. and Number) (City) (State) (Country)

DATES OF MEMBERSHIP: \_\_\_\_\_

4. \_\_\_\_\_  
(Name and Chapter) (St. and Number) (City) (State) (Country)

DATES OF MEMBERSHIP: \_\_\_\_\_

5. \_\_\_\_\_  
(Name and Chapter) (St. and Number) (City) (State) (Country)

DATES OF MEMBERSHIP: \_\_\_\_\_

6. \_\_\_\_\_  
(Name and Chapter) (St. and Number) (City) (State) (Country)

DATES OF MEMBERSHIP: \_\_\_\_\_

7. \_\_\_\_\_  
(Name and Chapter) (St. and Number) (City) (State) (Country)

DATES OF MEMBERSHIP: \_\_\_\_\_

**SEC. 25. MISCELLANEOUS**

A. DO YOU ADVOCATE OR HAVE YOU EVER ADVOCATED; OR ARE YOU NOW OR HAVE YOU EVER BEEN A MEMBER OF, OR HAVE YOU SUPPORTED, ANY POLITICAL PARTY OR ORGANIZATION WHICH ADVOCATES THE OVERTHROW OF OUR CONSTITUTIONAL FORM OF GOVERNMENT IN THE UNITED STATES?

IF "YES," EXPLAIN: No (See remarks)

B. DO YOU USE, OR HAVE YOU USED, INTOXICANTS? Yes IF SO, TO WHAT EXTENT? Beer with meals

C. HAVE YOU EVER BEEN ARRESTED, INDICTED OR CONVICTED FOR ANY VIOLATION OF LAW OTHER THAN A MINOR TRAFFIC VIOLATION? IF SO, STATE NAME OF COURT, CITY, STATE, COUNTRY, NATURE OF OFFENSE AND DISPOSITION OF CASE:

No

D. HAVE YOU EVER BEEN COURT-MARTIALED WHILE A MEMBER OF THE ARMED FORCES? IF ANSWER IS "YES," GIVE DETAILS BELOW:

No

E. LIST BELOW THE NAMES OF GOVERNMENT DEPARTMENTS, AGENCIES OR OFFICES TO WHICH YOU HAVE APPLIED FOR EMPLOYMENT SINCE 1940:

Department of Defense

Present Organization



F. IF, TO YOUR KNOWLEDGE, ANY OF THE ABOVE HAS CONDUCTED AN INVESTIGATION OF YOU, INDICATE BELOW THE NAME OF THAT AGENCY AND THE APPROXIMATE DATE OF THE INVESTIGATION:

Federal Bureau of Investigation - 1946  
This Organisation - 1952

Sec. 26. PERSON TO BE NOTIFIED IN CASE OF EMERGENCY:

NAME Annis Louise Hidalgo RELATIONSHIP wife  
ADDRESS Same as applicant

Sec. 27. YOU ARE INFORMED THAT THE CORRECTNESS OF ALL STATEMENTS MADE HEREIN WILL BE INVESTIGATED.

ARE THERE ANY UNFAVORABLE INCIDENTS IN YOUR LIFE NOT MENTIONED ABOVE WHICH MAY BE DISCOVERED IN SUBSEQUENT INVESTIGATION, WHETHER YOU WERE DIRECTLY INVOLVED OR NOT, WHICH MIGHT REQUIRE EXPLANATION? IF SO, DESCRIBE. IF NOT, ANSWER "NO."

No

Sec. 28. I CERTIFY THAT THE FOREGOING ANSWERS ARE TRUE AND CORRECT TO THE BEST OF MY KNOWLEDGE AND BELIEF, AND I AGREE THAT ANY MISSTATEMENT OR OMISSION AS TO A MATERIAL FACT WILL CONSTITUTE GROUNDS FOR IMMEDIATE DISMISSAL OR REJECTION OF MY APPLICATION.

SIGNED AT Ft. Amador, Canal Zone DATE 19 July 1957

(Witness) (Signature of Applicant)

USE THE FOLLOWING PAGES FOR EXTRA DETAILS. NUMBER ACCORDING TO THE NUMBER OF THE QUESTION TO WHICH THEY RELATE. SIGN YOUR NAME AT THE END OF THE ADDED MATERIAL. IF ADDITIONAL SPACE IS REQUIRED USE EXTRA PAGES THE SAME SIZE AS THESE AND SIGN EACH SUCH PAGE.

Section 1A - While an undercover agent for the Federal Bureau of Investigations from 1946 to 1949 I used the name of Bernard Harris to members of the Communist Party of the United States. This information is already on file in this organization.

Section 1D - I became an American citizen at birth through the citizenship of my father. This information is already on file in this organization.

Section 3B - My wife is employed by this organization.

Section 10 - I have many relatives in Spain and Cuba but do not correspond with them and so do not know names, addresses or present status.

Section 18 - All persons mentioned in this section are employees of this organization.

Sections 19

and 20 - Not having lived in the USA for over five years I have lost all contact with old friends, neighbors, etc. I do not know their addresses, status, etc., at this time.

Section 25 - My past connections with any subversive groups and the reasons for such connections is already on file in the files of this organization.

RECORD OF  
PREVIOUS GOVERNMENT  
SERVICE RETURNED TO  
FEDERAL RECORDS CENTER IN  
ST. LOUIS, MO.

DATE July 19 71