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FILE TITLE/NUMBER/VOLUME:

Bustos - Videla, C. 3.

INCLUSIVE DATES: 14 Feb 1950 - 16 JAN 1978

CUSTODIAL UNIT/LOCATION: Office of Personnel

ROOM: 5E 13

DELETIONS, IF ANY:

NO DOCUMENTS MAY BE COPIED OR REMOVED FROM THIS FILE

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(If less than 10)

REQUEST FOR PERSONNEL ACTION								DATE PREPARED				
								31 July 1973				
1. SERIAL NUMBER	2. NAME (Last-First-Middle)											
007667	Bustos-Videla, Charlene Z.											
3. NATURE OF PERSONNEL ACTION				4. EFFECTIVE DATE REQUESTED			5. CATEGORY OF EMPLOYMENT					
Reassignment				MONTH	DAY	YEAR	Regular					
6. FUNDS		X	V TO V		V TO C		7. PAY AND NSCA					
			C TO V		C TO C		42354525 0000					
8. ORGANIZATIONAL DESIGNATIONS				10. LOCATION OF OFFICIAL STATION								
DDO/WH Division FI Staff				Washington, D.C.								
11. POSITION TITLE				12. POSITION NUMBER			13. CAREER SERVICE DESIGNATION					
OPS Officer				(13)			0640					
14. CLASSIFICATION SCHEDULE (G, I, R, etc.)			15. OCCUPATIONAL SERIES		16. GRADE AND STEP		17. SALARY OR RATE					
GS			0136.01		13 7		\$ 23642					
18. REMARKS												
Home Base: WH												
18A. SIGNATURE OF REGULATING OFFICIAL				DATE SIGNED		18B. SIGNATURE OF CAREER SERVICE APPROVING OFFICER				DATE SIGNED		
H. L. Bestbold GTRM/Pers				31 Jul 73						P-2 - P-3		
SPACE BELOW FOR EXCLUSIVE USE OF THE OFFICE OF PERSONNEL												
19. ACTION CODE	20. EMPLOY. CODE	21. OFFICER CODING NUMERIC	22. STATION ALPHABETIC CODE	23. INTICREE CODE	24. MOOTRS CODE	25. DATE OF BIRTH	26. DATE OF GRADE	27. DATE OF LEI				
39	10	5100	WH	75013	1	1/12/23	MO. DA. YR.	MO. DA. YR.	MO. DA. YR.			
28. ETC. EXPIRES	29. SPECIAL REFERENCE	30. RETIREMENT DATA		31. SEPARATION DATA	32. CORRECTION/CANCELLATION DATA		33. SECURITY INFO		34. GS			
MO DA YR.		CODE		DATA CODE	TYPE	MO DA YR.	EOD DATA	REG NO				
35. VET. PERSISTENCE	36. SERV. COMP. DATE	37. LONG. COMP. DATE	38. CABLEX CATEGORY	39. FEGI/HEALTH INSURANCE	40. SOCIAL SECURITY NO							
CODE	MO DA YR	MO DA YR	CAB/PSSY PROV/TEMP	CODE	CODE	CODE	PAID		HEALTH INS CODE			
0--NONE 1--3 PT 2--10 PT							1--YES 2--NO					
41. PREVIOUS CIVILIAN GOVERNMENT SERVICE	42. LEAVE CAT		43. FEDERAL TAX DATA	44. STATE TAX DATA								
CODE	CODE		YEAR EXECUTED/SCOR	MO TAX EXEMPTIONS		YEAR EXECUTED	CODE	80. STATE				
3--NO PREVIOUS SERVICE 1--AS ENCL IN SERVICE 2--BREAK IN SERVICE (LESS THAN 3 YEARS) 3--BREAK IN SERVICE (MORE THAN 3 YEARS)			1--YES 2--NO			1--YES 2--NO	CODE	STATE EXEMP CODE				
45. POSITION CONTROL CERTIFICATION	46. OP APPROVAL					DATE APPROVED						
11478-83 73 31 Aug 1973 11478-83 81 18												

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EYES ONLY

17 JAN 1973

MEMORANDUM FOR: Chairman, GS-13 Evaluation Board

SUBJECT : Recommendation for Promotion to GS-14
Charlotte Bustos-Videla

1. It is recommended that Charlotte Bustos-Videla be promoted from GS-13 to GS-14.
2. The performance of this officer has been characterized for many years by all of her supervisors as consistently strong to outstanding. She has been able to establish herself as indispensable in each Headquarters Branch or Field Station assignment, usually functioning as the backbone of the unit to which assigned. Since return to Headquarters in September 1972 from her field assignment in Mexico, her performance has been entirely congruent with the thrust of the Field Station's enthusiasm over her ability, performance, attitude and growth potential. She is currently chief of the Cuban and CA Section of her branch, and has established once again her mastery over her assigned duties. She is the kind of sound, dependable, yet imaginative officer greatly appreciated by her supervisors. In short, she is a true professional who performs beyond her grade level.
3. In regard to her potential, she has served in the Agency since 1951, starting as a secretary/stenographer, and advancing brilliantly with each new challenge offered. She achieved professional status in 1953 and has spent the bulk of her time since then specializing in Latin American affairs, demonstrating total flexibility in assignments, a voracious appetite for work and a penchant for exceptionally precise and thorough production. A review of her career to date can lead to the conclusion that she has always risen successfully to each new professional challenge, and is still far from reaching her maximum capacities. While she has had little supervisory experience in the field, her supervisor was of the opinion that she is a "natural leader". This has been borne out in her performance in her current capacity as a Branch Section Chief, in which she has demonstrated exemplary supervisory ability. Notwithstanding her drive, aggressiveness and professional aplomb, she is a popular co-worker, is receptive to guidance and sensitive and responsive to the needs of her subordinates.

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- 2 -

4. This employee has utilized her fluency in the Spanish language to maximum advantage in her work. Formal testing recently confirmed her high proficiency in that language. Coupled with a comprehensive training record and her invaluable experiences over a twenty year period, she has become particularly effective in Latin American operations and operational support, demonstrating excellence in each of several recognized specializations, including CI operations, functional support, reports and requirements, area support and varied covert action activities.

5. The officer's adaptability, high intelligence and mastery over her trade was of inestimable value to Mexico City Station, and over a five year period from 1967 to 1972, she functioned as the Station's internal troubleshooter. Her duties included the maintenance of

[redacted] target analysis, reports writing, operational support, handling of [redacted] agents, and special assignments as the Chief of Station's Executive Assistant.

6. The employee is occasionally called upon by the Office of Training to administer specialized training, and she was chosen recently to attend the Mid-Career Course ending in December 1972. Meanwhile, her absence from her new job is felt sorely by the Branch. It is expected that her current assignment will last about two years.

7. In summary, we have here an exceptional officer who has been performing at the level of a GS-14 for some years; it is now time to promote her to that grade commensurate with her performance and which she so justly deserves.

Theodore G. Shackley
Theodore G. Shackley
Chief
Western Hemisphere Division

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MEMORANDUM FOR: Chairman, QSI - Honor and Merit Awards Panel
SUBJECT : Request for Quality Step Increase (HR 20-37)
Mrs. Charlotte Bustos-Videla

1. On the basis of the information presented below, it is recommended that a Quality Step Increase be approved for Charlotte Bustos-Videla.
2. As noted in the attached fitness report, Subject's performance of her duties has been uniformly outstanding. In addition to her responsibilities in the Cuban section of the Mexico City Station, she has recently been made the executive assistant to the Chief of Station at Mexico City. In this job, she screens all incoming material for matters of interest to the Chief and Deputy Chief of Station. She also continues performing her past functions in the Cuban section for the Station.
3. Subject's present high quality of performance is typical of her performance since she entered the Agency in 1951. It is fully expected that this level of performance will be maintained.
4. Although the present Chief of Station was not the reviewing official on the attached fitness report, he has commented that he considered Subject an outstanding officer and has recommended that she be considered for a Quality Step Increase.

William V. Broe
William V. Broe
Chief
Western Hemisphere Division

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1968

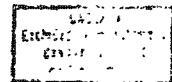
MEMORANDUM FOR: Secretary, CSCS Panel (Section A)

SUBJECT: Recommendation for Promotion to Grade GS-13
Charlotte Z. Bustos-Videla

1. The promotion of Charlotte Z. Bustos-Videla from GS-12 to GS-13 is hereby recommended.
2. This exceptional officer has now been performing at a senior level for several years and, while recognition through a Quality Step Increase was granted her last year, her sustained performance clearly exceeding the requirements of a GS-13 qualifies her for a promotion at this time. Subject is one of the outstanding women who have demonstrated their capacity for even further advancement within the Agency and will probably continue to advance in the future. The present recommendation is based on already demonstrated ability to operate at a senior level.
3. Subject is 36 years old and has been in grade as a GS-12 for the past five and one-half years.

[Redacted]
Desmond FitzGerald
Chief,
Western Hemisphere Division

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REF ID: A6542
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(When Filled In)

REQUEST FOR PERSONNEL ACTION						DATE PREPARED
1. SERIAL NUMBER 007667		2. NAME (Last-First-Middle) Bustosvidela, C/ Z.				30 August 1972
3. NATURE OF PERSONNEL ACTION Reassignment and Transfer to Voucherized Funds				4. EFFECTIVE DATE REQUESTED MONTH DAY YEAR 09 17 72	5. CATEGORY OF EMPLOYMENT Regular	
6. FUNDS X → X σ 10 V		V 10 V σ 10 σ	7. FINANCIAL ANALYSIS NO. CHARACTER 3235-0620 CCS w/b		8. LEGAL AUTHORITY (Completed by Office of Personnel) DDP/WH Division Branch 1 CA Section	
9. ORGANIZATIONAL DESIGNATIONS DDP/WH Division Branch 1 CA Section				10. LOCATION OF OFFICIAL STATION Wash., D. C.		
11. POSITION TITLE Ops Officer				12. POSITION NUMBER 1294	13. CAREER SERVICE DESIGNATION D	
14. CLASSIFICATION SCHEDULE (GS, LS, etc.) CS		15. OCCUPATIONAL SERIES 0136.01	16. GRADE AND STEP 13 7	17. SALARY OR RATE \$ 22,487		
18. REMARKS FROM: DDP/WH/BR 1/MEXICO CITY STATION/0418 X HOME BASE: WH 2 - Security 1 - Finance X Issue Army W-2 (Concur: CCS) 22 SEP 1972 Security Approval Granted by Pers. SD/OS/OS Sept. 12 6/21/72 25 SEP 1972						
E 2 IMPDET CL BY 00703-4						
19A. SIGNATURE OF REQUESTING OFFICIAL Henry L. Berthold, C/WIL/Rrs		DATE SIGNED 15 Sep 1972			DATE SIGNED 15 Sep 1972	
SPACE BELOW FOR EXCLUSIVE USE						
20. ACTION CODE 162	21. OFFICE CODING CODE 10	22. STATION CODE 5137C WH	23. INTERFEE CODE 45013	24. HQD-AD CODE 1	25. DATE OF BIRTH MO DA YE 01 12 57	26. GATE OF GRADE MO DA YE 13 01 72
27. RIF LINES MO DA YE 	28. SPECIAL CATEGORY 	29. RETIREMENT DATA CODE 	30. SEPARATION DATA CODE 	31. CORRECTION/CANCELLATION DATA DATA CODE 	32. SECURITY DATA 	33. SECURITY DATA
34. RIF PERIOD CODE 4-1968 1-1-72 2-1-72 3-1-72	35. USE FOR DATE MO DA YE 	36. LONG TERM DATA MO DA YE 	37. VARIABLE CATEGORIES CODE 	38. FEES & HEALTH INSURANCE CODE 	39. SOCIAL SECURITY NO. CODE 	40. MEDICARE NO. CODE
41. PREVIOUS EMPLOYEE GOVERNMENT SERVICE CODE CCG	42. LEAVE USE CODE 	43. TERRITORY DATA CODE 	44. LOCAL EXECUTIVE COSTS CODE 	45. HQD-AD VARIATIONS CODE 	46. GATE EXECUTIVE COSTS CODE 	47. GATE EXECUTIVE COSTS CODE
48. POSITION CONCUR & CLASSIFICATION CODE 						
49. APPROVAL CODE 						

REF ID: A6542
SECRET

25 SEP 1972

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18 DEC 1979

MEMORANDUM FOR: Charlotte Bustos-Videla
THROUGH : Chief, WH Division
SUBJECT : Quality Step Increase

1. I was pleased to learn that you have been granted a Quality Step Increase. Such recognition is proof of the high esteem in which you are held by your supervisors in the Clandestine Service.
2. Please accept my personal best wishes. I am confident that your future performance will be of a continuing high quality.

Thomas H. Karamossides
Deputy Director for Plans

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12 DEC 1969

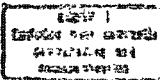
MEMORANDUM FOR: Head, Clandestine Service
Career Service

SUBJECT : Notification of Approval of
Quality Step Increase -
Charlotte Bustos-Videla

1. I am pleased to send to you the attached official notification of the approval of a second Quality Step Increase to be awarded to this employee. The previous Quality Step Increase was effective March 1964.
2. May I again ask that you arrange an appropriate ceremony for the presentation of this Quality Step Increase which is in recognition of her continuing excellent performance.


Robert S. Wattles
Director of Personnel

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-2-

SUBJECT: Request for Quality Step Increase (HR 20-37)
Mrs. Charlotte Bustos-Videla

APPROVAL RECOMMENDED:

Chairman, DDP/SSI Panel

9 Dec 69
Date

APPROVED:

for DIRECTOR OF PERSONNEL

12 Dec 1969

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REQUEST FOR PERSONNEL ACTION					DATE PREPARED 17 OCTOBER 1968
1. SERIAL NUMBER 007667	2. NAME (Last-First-Middle) BUSTOS-VIDELA, C. Z.				
3. NATURE OF PERSONNEL ACTION REASSIGNMENT					4. EFFECTIVE DATE REQUESTED MONTH DAY YEAR 11 03 68
5. FUNDS 	V TO V		V TO CF		6. FINANCIAL ANALYSIS NO CHARGEABLE 9135 0990
	<input checked="" type="checkbox"/>	X	<input type="checkbox"/>		7. LEGAL AUTHORITY (Completed by Office of Personnel) DDP/WH
8. ORGANIZATIONAL DESIGNATIONS FOREIGN FIELD BRANCH 1 MEXICO CITY, MEXICO STATION					10. LOCATION OF OFFICIAL STATION MEXICO CITY, MEXICO
11. POSITION TITLE OPS OFFICER					12. POSITION NUMBER (13) 0418
14. CLASSIFICATION SCHEDULE (GS / F, etc.) GS					13. OCCUPATIONAL SERIES 0136.01
15. GRADE AND STEP 13 4					17. SALARY OR RATE \$ 158.19

STAFF EMPLOYEE SPECIAL

FROM: POSITION # 1528

I - Finance

10A SIGNATURE OF SUGGESTING OFFICER *Henry L. Berthold* DATE SIGNED
Henry L. Berthold
C/WR Personnel

DATA * KARAO

SPACE BELOW FOR EXCLUSIVE USE OF THE OFFICE OF PERSONNEL											
17. POSITION CODE	18. EMPLOY CODE	19. OFFICE CODE	20. STATION NUMBER	21. ALPHABETIC CODE	22. STATION CODE	23. INTEGRITY CODE	24. HOURS COST	25. RATE OF PAY	26. DATE OF PAY	27. DATE OF RELEASE	28. DATE OF SEE
37	10	51120	WCA	HED 75			3	24	1974-05-26	MO. DA. 18.	MO. DA. 18.
29. PAY EXPENSES		30. SPECIAL EXPENSES		31. RETIREMENT DATA		32. SEPARATION DATA		33. CORRECTION CANCELLATION DATA		34. SECURITY REG. NO.	
- MO	- DA	- VS	-	-	- CODE	-	- TYPE	- MO	- DA	- VS	- SEC
35. PAY PREFERENCE		36. SERV. COMP. DATE		37. ID#& CSDP. DATE		38. CAREER CATEGORY		39. HIGH. HEALTH INSURANCE		40. SOCIAL SECURITY NO.	
- MO	- DA	- VS	- MO	- DA	- VS	- MO	- DA	- VS	- MO	- DA	
41. PAYING OR RECEIVING ENTITLEMENT SOURCE						42. PAY CAT. CODE		43. FEDERAL TAX DATA		44. STATE TAX DATA	
CODE						CODE		CODE		CODE	
1. PAYING ENTITLEMENT 1- MO. DA. VS. WORK 1- PAYING OR RECEIVING PAYROLL TAXES 1- PAYING OR RECEIVING PAYROLL TAXES						2. PAY CAT. CODE		3. FEDERAL TAX DATA		4. STATE TAX DATA	
45. POSITION CONTROL CERTIFICATION						46. O.P. APPROVAL		47. DATE APPROVED		48. DATE APPROVED	

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REQUEST FOR PERSONNEL ACTION								DATE PREPARED	
1 SERIAL NUMBER 107667	2 NAME (Last - First - Middle) BUSTOS VIDELA, CHARLES E. Z.							13 OCTOBER 1967	
3 NATURE OF PERSONNEL ACTION REASSIGNMENT								4 EFFECTIVE DATE REQUESTED MONTH DAY YEAR 07 07 67	5 CATEGORY OF EMPLOYMENT REGULAR*
6 RUMS →		V TO V	V TO CP	7 FINANCIAL ANALYSIS NO CHAROFABLE		8 LEGAL AUTHORITY (Completed by Office of Personnel) 8135 0990			
9 ORGANIZATIONAL DESIGNATIONS DDP/WH FOREIGN FIELD BRANCH 1 MEXICO CITY, MEXICO STATION								10 LOCATION OF OFFICIAL STATION MEXICO CITY, MEXICO	
11 POSITION TITLE OPS OFFICER				12 POSITION NUMBER 1528		13 CAREER SERVICE DESIGNATION D			
14 CLASSIFICATION SCHEDULE (GS, F.R., etc.) GS		15 OCCUPATIONAL SERIES 0136.01		16 GRADE AND STEP XX 13 3		17 SALARY OR RATE \$ 13,769			
18 REMARKS OPS OFFICER OCCUPYING INTEL ANALYST. * STAFF EMPLOYEE XXRE SPECIAL. EN CONCUR: CCS									
18A SIGNATURE OF REQUESTOR Henry L. Berthold C/WH/Personnel				DATE SIGNED 17 Oct 67					
SPACE BELOW FOR EXCLUSIVE USE OF THE OFFICE OF PERSONNEL									
19 ACTION CODE	20 EMPLOY CODE	21 OFFICE CODES NUMERIC ALPHABETIC 51121 1111 11-75	22 STATION CODE	23 INTEGRITY CODE	24 HOURS CODE	25 DAY OF BIRTH MO DA YE	26 DAY OF GRADE MO DA YE	27 DAY OF LEI MO DA YE	
28 INTL EXPES	29 SPECIAL REFERENCE REFERENCE	30 REASSIGNMENT DATA CODE 82	31 SEPARATION DATA (GE) CODE	32 CORRECTION/AMENDMENT DATA TYPE	33 MO 04 YE	34 SECURITY FIG RD	35 SEC FIG RD		
36 PAY PREFERENCE CODE	37 SERV COMB DATE MO DA YE	38 LONG TERM DATE MO DA YE	39 CARRIER CATEGORY CAR TYPE PROV TYPE	40 MEDICAL INSURABILITY CODE G-BARRIER 1-111	41 MEDICAL INSURABILITY CODE 1-111	42 STATE TAX DATA CODE	43 SOCIAL SECURITY NO		
44 PREVIOUS CIVILIAN GOVERNMENT SERVICE CODE	45 LEAVE CAT CODE	46 FEDERAL TAX DATA CODE	47 STATE TAX DATA CODE	48 MEDICAL INSURABILITY CODE 1-111	49 FORM APPROVED CODE 1-111	50 TWO TAX PERIOD CODE	51 STATE CODE		
52 POSITION COMPTAC CERTIFICATION	53 APPROVAL DATE 10/10/67	54 APPROVAL DATE 10/10/67	55 APPROVAL DATE 10/10/67	56 APPROVAL DATE 10/10/67	57 APPROVAL DATE 10/10/67	58 APPROVAL DATE 10/10/67	59 APPROVAL DATE 10/10/67		

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28 June 1967

MEMORANDUM FOR: Central Cover Group

SUBJECT : [redacted] Charlotte Z. Bustos-Videla

1. Mrs. Charlotte Z. Bustos-Videla is being transferred PCS to Mexico City in staff capacity. She will fill slot 1523.

2. Mrs. Bustos-Videla is traveling under Travel Order No. 39-68. (See copy attached)

[redacted]
Mexico City. Limited household effects will be sent, the remaining items (also limited) will be stored at Government expense.

Robert D. Cashman
Chief, NM Personnel

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(B) Not Filled In)

REQUEST FOR PERSONNEL ACTION						DATE PREPARED		
1. SERIAL NUMBER	2. NAME (Last-First-Middle)					10 JULY 1967		
007667	BUSTOS VIDELA, CHARLOTTE Z.							
3. NATURE OF PERSONNEL ACTION REASSIGNMENT AND TRANSFER TO CONFIDENTIAL FUNDS			4. EFFECTIVE DATE REQUESTED		5. CATEGORY OF EMPLOYMENT			
			MONTH 07	DAY 16	YEAR 67	REGULAR		
6. FUNDS		V TO V CP TO V	XXX	V TO CP CP TO CP	7. FINANCIAL ANALYSIS NO. CHARGEABLE 3135 0990			
8. ORGANIZATIONAL DESIGNATIONS DDP/WH FOREIGN FIELD BRANCH 1 MEXICO CITY, MEXICO STATION			9. LOCATION OF OFFICIAL STATION MEXICO CITY, MEXICO					
10. POSITION TITLE OPS OFFICER			11. POSITION NUMBER (11)		12. CAREER SERVICE DESIGNATION D			
13. CLASSIFICATION SCHEDULE (GS, E.R., etc.) GS		14. OCCUPATIONAL SERIES 0136.01		15. GRADE AND STEP 13 3		16. SALARY OR RATE \$ 13,769		
17. REMARKS A OPS OFFICER occupying ENTEL ANALYST position FROM: DDP/WH/1/Pos. No. 1201								
PRA IN ACCORDANCE WITH HR20-17d(b), NOT TO EXCEED TWO YEARS.								
R2 Finance								
18. APPROVING OFFICER Robert D. Cashman			DATE SIGNED 10 Jun		19. SIGNATURE OF CAREER SERVICE APPROVING OFFICER		DATE SIGNED 17 Jul 67	
SPACE BELOW FOR EXCLUSIVE USE OF THE OFFICE OF PERSONNEL								
20. ACTION CODE	21. EMPLOYEE CODE	22. OFFICE CODING NUMERIC ALPHABETIC	23. START DATE 066 16675	24. INTEGREG CODE	25. MOON CODE MO. DA. TB	26. DATE OF GRADE MO. DA. TB	27. DATE OF USE MO. DA. TB	
20. 10	61626	066 16675		-3	01 12 29			
28. REF. EXPIRES	29. SPECIAL REFERENCE	30. RETIREMENT DATA 1-ECS 2-FICA 3-NONE	31. SEPARATION DATA CODE	32. CORRECTION/CANCEL/END DATA TYPE	33. SECURITY INFO NO	34. SEA		
MO. DA. TB 07 15 69	.82	CODA		MO. DA. TB	EOD DATA			
35. PAY PREFERENCE CODE 1-50% 1-5% 1-10%	36. START COMP. DATE MO. DA. TB	37. END COMP. DATE MO. DA. TB	38. CAREER CATEGORY LAD. PROF. PROF. PROF.	39. FEES/HEALTH INSURANCE CODE 1-50% 1-10%	40. MEDICAL SECURITY NO CODE			
41. PERIODIC GOVERNMENT SERVICE CODE 1-BE PERIODIC SERVICE 2-BE PERIODIC SERVICE 3-BEAS IN SERVICE (LESS THAN 3 YEARS) 4-BEAS IN SERVICE (MORE THAN 3 YEARS)	42. LEAVE DAT 43. FEDERAL TAX DATA CODE	44. STATE TAX DATA CODE	45. O.P. APPROVAL Signature	46. DATE APPROVED 10 Jul 67				
45. POSITION CONTROL CERTIFICATION C7-1467L				46. DATE APPROVED 10 Jul 67				

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(Do Not Fill In)

REQUEST FOR PERSONNEL ACTION								DATE PREPARED																																																								
1. SERIAL NUMBER 007667 ✓	2. NAME (Last-First-Middle) BUSTOSVIDELA, C.Z. ✓							19 OCTOBER 1966																																																								
3. NATURE OF PERSONNEL ACTION PROMOTION				4. EFFECTIVE DATE REQUESTED MONTH DAY YEAR 10 23 66	5. CATEGORY OF EMPLOYMENT REGULAR																																																											
6. RANKS X TO V CPT TO V	V TO O OF TO O	7. FINANCIAL ANALYSIS NO. CHARGEABLE 7235 0620			8. LEGAL AUTHORITY (Completed by Office of Personnel)																																																											
9. ORGANIZATIONAL DESIGNATIONS DDP/WH BRANCH 1 FI SECTION				10. LOCATION OF OFFICIAL STATION WASHINGTON, D.C.																																																												
11. POSITION TITLE OPS OFFICER (13)				12. POSITION NUMBER 1201	13. CAREER SERVICE DESIGNATION D																																																											
14. CLASSIFICATION SCHEDULE (GS, LS, etc.) GS		15. OCCUPATIONAL SERIES 0136.01		16. GRADE AND STEP 13 3	17. SALARY OR RATE \$ 13,769 ✓																																																											
18. REMARKS FROM: GS-12/6 (\$12,822)																																																																
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1 SEP 1966

MEMORANDUM FOR: CSPS/A

SUBJECT : Recommendation for Promotion of
Charlotte Bustos-Videla

1. The promotion recommendation to GS-13 of Mrs. Charlotte Bustos-Videla is hereby submitted. Mrs. Bustos-Videla entered the Agency in August 1951 as a GS-5 and rapidly and deservedly rose to a GS-12 by 1959. She has now been almost seven years in grade and has been recommended for promotion to the CSPS/A by WH Division five times previously.

2. This outstanding officer has continued to perform at the exceptional level which has by now become her standard of performance. Her past four annual Fitness Reports have each given her an overall rating of outstanding. In this connection it is noteworthy that no two Fitness Reports were written by the same rating officer. She continues to occupy a GS-12 officer slot and her performance clearly continues to exceed the requirements for that position. She is considered to be one of the outstanding women who have demonstrated their capacity for further advancement within the Agency.

3. Mrs. Bustos-Videla not only continues to bring continuity to the Mexican Branch through her long experience on Mexican affairs, but consistently contributes to the smooth functioning of the Branch through her highly efficient organizational capabilities. She has been called upon to handle all manner of difficult desk problems. She invariably responds quickly, cheerfully, and effectively. She has been instrumental in on-the-job training of a number of officers, both for desk assignments and in preparation for field assignments. She has excellent rapport with innumerable persons in other areas and staffs, thus adding to the efficiency and speed with which she accomplishes her daily tasks. Her promotion at this time is urged.

William V. Broe
William V. Broe
Chief,
Western Hemisphere Division

Approved by CS Counsel
John F. C.
13 SEP 66

14-00000
S E C R E T
(When Filled In)

11 August 1966

MEMORANDUM FOR: Charlott Z. Bustos-Vilela

THROUGH : Head of G3 Career Service

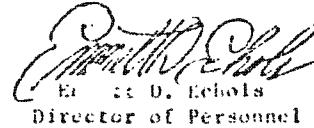
SUBJECT : Notification of Non-eligibility for Designation as a Participant in the CIA Retirement and Disability System

1. As you may know, we are in the process of reviewing the employment history and current career field of all employees in the Agency to identify those who are eligible for designation as a participant in the new CIA Retirement and Disability System. In this process, the initial review of each case is made by the individual's Career Service. If the Head of his Career Service nominates him for participation in the System, this nomination is reviewed by the CIA Retirement Board which recommends final action to me. However, if the Head of the Career Service advises that the employee does not meet the basic requirements of HR 20-50 for participation, I have accepted this finding without further review by the CIA Retirement Board. This practice has been adopted in the interest of expediting this screening process so that those employees who are eligible to participate in the System may be designated participants as soon as possible.

2. In your case, the Head of your Career Service has advised me that you do not meet the requirements of HR 20-50 for designation as a participant and I have accordingly made the formal determination required by the regulation that you are not eligible for designation. From a review of your record it appears that the decision of your Career Service was based upon the fact that you do not have sufficient time prior to completing 15 years of service with the Agency in which you could complete a minimum of 60 months of qualifying service as required by regulation. My determination that you are not eligible at this time for designation in no way affects your current status under the Civil Service Retirement System, nor does it preclude reconsideration of your eligibility to participate in the CIA System if you should meet the requirements for designation in the future.

3. Should you desire further information concerning the requirements for designation as a participant in the CIA Retirement System, I suggest that you read paragraph 6 of HR 20-50 and paragraph 5 of the Employee Bulletin dated 30 July 1965, entitled "Public Law 88-643, The Central Intelligence Agency Retirement Act of 1964 for Certain Employees."

4. It is always possible that the records upon which the determination made in your case may have been incomplete or inaccurate regarding your actual employment history with the Agency. If, after studying the materials cited above, you have questions regarding the determination that you are not eligible to participate in the CIA Retirement System, please feel free to contact officials of your Career Service. They are familiar with the details of your case and will gladly discuss them with you. In addition, you may wish to discuss your case with the CIA Retirement Staff located in Room 205, Magazine Building (extension 2847). If such discussions do not resolve any questions you have regarding your eligibility, you may request that your case be formally considered by the CIA Retirement Board. However, this request must be made within 30 days of the date of this memorandum.


Ernest D. Nichols
Director of Personnel

S E C R E T

EYES ONLY
SUSY

1 MAR 1966

MEMORANDUM FOR: - Secretary, CS/CS Panel (Section A)

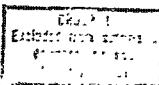
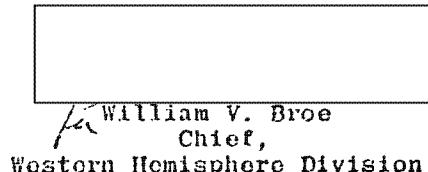
SUBJECT : Recommendation for Promotion to
Grade GS-13, Charlotte Z. Bustos-Videla

1. The promotion request from GS-12 to GS-13 on
Mrs. Bustos-Videla is hereby submitted.

2. This outstanding officer has continued to
perform at the exceptional level which has by now
become for her a standard of performance. She now
formally occupies a senior (GS-13) FI Officer slot in
the Mexican Branch and her performance clearly continues
to exceed the requirement for that position. She is
still considered to be one of the outstanding women who
have demonstrated their capacity for further advancement
within the Agency, independently, of the experience on
Mexican affairs acquired through continuity in her
present assignment.

3. The comments made in connection with the four
previous promotion recommendations continue to be
entirely applicable.

4. Subject is 37 years old and has been in grade
as a GS-12 for the past six years.



EYES ONLY
SUSY

LAW UNIT
SECRET

9 SEP 1965

MEMORANDUM FOR: Secretary, CS/CS Panel (Section A)
SUBJECT : Recommendation for Promotion to
Grade GS-13, Charlotte Z. Bustos-Videla

1. The promotion request from GS-12 to GS-13 on
Mrs. Bustos-Videla is hereby resubmitted.

2. This outstanding officer has continued to
perform at the exceptional level which has by now
become for her a standard of performance. She now
formally occupies a senior (GS-13) FI Officer slot in
the Mexican Branch and her performance clearly continues
to exceed the requirement for that position. She is
still considered to be one of the outstanding women who
have demonstrated their capacity for further advancement
within the Agency, independently of the expertise on
Mexican affairs acquired through continuity in her
present assignment.

3. The comments made in connection with the
three previous promotion recommendations continue to
be entirely applicable.

4. Subject is 36 years old and has been in grade
as a GS-12 for the past six years.

[Redacted]
William V. Broe
Chief,
Western Hemisphere Division

*WV
Specialist
SK*

SECRET

(B) Area Filled In)

REQUEST FOR PERSONNEL ACTION				DATE PREPARED 28 JULY 1965																																																																																	
1 SERIAL NUMBER 007667	2 NAME (Last-First-Middle) BUSTOS-VIDELA, CIRCE																																																																																				
3 NATURE OF PERSONNEL ACTION REASSIGNMENT			4 EFFECTIVE DATE REQUESTED MONTH DAY YEAR AUG 1 65	5 CATEGORY OF EMPLOYMENT REGULAR																																																																																	
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SECRET

14-00000
4 SEP 1964

MEMORANDUM FOR: Secretary, CSCS (Panel A)
SUBJECT : Recommendation for Promotion to GS-13
Mrs. Charlotte Bustos-Videla.

1. The promotion to GS-13 of Mrs. Charlotte Bustos-Videla is recommended. Mrs. Bustos-Videla entered the Agency in August 1951 as a GS-5 and rapidly and deservedly rose to a GS-12 grade by 1959.

2. This recommendation is based on Mrs. Bustos-Videla's performance during the past three years as the senior assistant to the various chiefs of the Mexican desk/branch, who unanimously have found her to be extremely competent and reliable both in her routine assignments and special tasks occasionally levied on her, such as country studies, compilation of programs, requirement reviews, etc.

3. Mrs. Bustos-Videla has consistently responded with intelligence and clarity and has materially contributed to orderly imaginative administration of Headquarters support to a most active station. In the process, she has been instrumental in training on-the-job innumerable officers both for desk assignments and in preparation for field assignments.

4. For her outstanding performance she received a quality step increase in April 1964. This deserved recognition should now be followed up at this time by a promotion to the next grade in accordance with the consistently good performance at the GS-13 level over a prolonged period of time.

[Redacted]
Desmond Fitzgerald
Chief
Western Hemisphere Division

CONFIDENTIAL

14 APR 1964

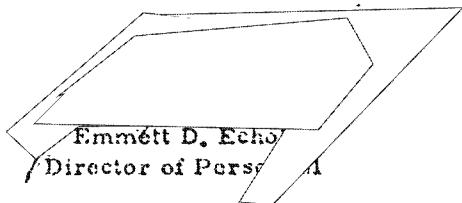
MEMORANDUM FOR: Head, Clandestine Services Career Service

SUBJECT : Notification of Approval of Quality Step Increase -
Mrs. Charlotte Bustos-Videla

1. I am pleased to send to you the attached official notification of the approval of the Quality Step Increase which you recommended for this employee.

2. The salary increase accomplished by the award of a Quality Step Increase is important and tangible evidence of the esteem in which the employee so recognized is held. However, I believe the commendatory and incentive benefits of this award will be partially lost unless it is presented in an appropriate ceremony which will afford the individual recognition among co-workers and supervisory officials. Also, I believe such recognition serves to inspire other employees to aspire to earning such recognition.

3. May I ask, therefore, that you arrange to have this Quality Step Increase presented at an appropriate ceremony.



Planned in
a ceremony
4/24/64

CONFIDENTIAL

14-00000
SECRET

20 March 1964

MEMORANDUM FOR: DDP/OP

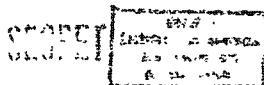
THROUGH : Chief, Clandestine Services Personnel Office
SUBJ: Charlotte Z. Bustos-Videla -- Request for
Quality Step Increase

1. It is recommended that a Quality Step Increase for Mrs. Charlotte Z. Bustos-Videla be endorsed by you for the reasons presented in the attached memorandum prepared by the Chief, Western Hemisphere Division.

2. A review of Mrs. Bustos-Videla's official Personnel File tends fully to support the statement of Colonel Kline. Without exception, the performance of this officer during her tenure as Agency employee has been identified by various and all supervisors as "Superior" and "Outstanding." Likewise, nothing in other records maintained by the Office of Personnel contradicts or modifies the impressive record made by Mrs. Bustos-Videla.

3. Testimony to the high regard which officials of WH Division view this officer's work is furnished by noting that Mrs. Bustos-Videla is the first female officer to be proposed for a QSI by WH and one of a total of but three officers nominated by that Division for the award since the QSI provision of the Federal Salary Reform Act of 1962 became effective in CIA approximately fifteen months ago.

[Redacted]
Colonel
Clandestine Services
Personnel Office



SECRET

8 March 1964

MEMORANDUM FOR: Deputy Director of Plans

ATTENTION : DDP/OP

SUBJECT : Request for Quality Step Increase for
Charlotte Bustos-Videla

1. On the basis of the information presented below, it is recommended that a quality step increase be approved for Charlotte Bustos-Videla.

2. As stated in the accompanying Fitness Report, Subject's performance of her duties has been uniformly outstanding. In addition to her responsibilities as the desk officer for Mexico PI and Operational Support Projects, she carries a heavy burden in the areas of administration, preparation of special reports and training of personnel. She frequently represents the Mexico Section in dealings with other elements of the Agency and acts for the Chief of Section in his absence. Subject's performance clearly exceeds the normal requirements of the assignment and of her present GS grade level.

3. Subject's present high quality of performance typifies her performance over a period of several years and it is fully expected that this level will be maintained.

4. Consideration was given to the granting of a Merit Award but the quality step increase seems more appropriate in this case. Subject has been passed over for promotion in the past, and due to limitations as to

-2-

area of assignment, it is unlikely that a promotion to grade GS-13 can be obtained. The salary increase is therefore thought to be the most fitting reward for her outstanding service.

J.C. King
C. KING
C/WHD

CONCUR.

LDP/OP

20 March 64

Date

APPROV.

Director of Personnel

24 MAR 64

Date

SECRET

When Hitler Stole Our Lives

REQUEST FOR PERSONNEL ACTION							DATE PREPARED 18 November 1963	
1. SERIAL NUMBER 007667	2. NAME (Last-First-Middle) BUSTOSYIDELA, C. Z.						3. NATURE OF PERSONNEL ACTION	
							4. EFFECTIVE DATE REQUESTED MONTH DAY YEAR 12 16 63	5. CATEGORY OF EMPLOYMENT REGULAR
REASSIGNMENT							6. COST CENTER NO. CHARGEABLE 4225 1000 1000	7. LEGAL AUTHORITY (Completed by Office of Personnel)
8. FUNDS 	X	V TO V		V TO CP			10. LOCATION OF OFFICIAL STATION WASHINGTON, D. C.	9. ORGANIZATIONAL DESIGNATIONS DDP WH BRANCH 3 MEXICO SECTION
11. POSITION TITLE OPS OFFICER							12. POSITION NUMBER 0321	13. CAREER SERVICE DESIGNATION D
14. CLASSIFICATION SCHEDULE (GS, LS, etc.) GS 14			15. OCCUPATIONAL SERIES 0136.01		16. GRADE AND STEP 12-4	17. SALARY OR RATE \$10,420		
18. REMARKS FROM: DDP/WII/3/607/Mexico Sec/Hqs								
							Recorded by CSPD <i>[Signature]</i>	
18A. SIGNATURE OF REQUESTING OFFICIAL Robert D. Casimiro				DATE SIGNED 11/16/63		18B. SIGNATURE OF CAREER SERVICE APPROVING OFFICIAL L. L. Johnson		
ROBERT D. CASIMIRO C/21/Pars								
19. SIGNATURE OF DIRECTOR OF PERSONNEL								
20. DATA FIELDS								
POSITION CODE 37	PERIOD 16	AMOUNT \$1400	PERIOD 16	AMOUNT 100	PERIOD 16	AMOUNT 100	PERIOD 16	AMOUNT 100
21. DATE APPROVED 11/16/63	22. APPROVAL Reference	23. APPROVAL Reference	24. APPROVAL Reference	25. APPROVAL Reference	26. APPROVAL Reference	27. APPROVAL Reference	28. APPROVAL Reference	29. APPROVAL Reference
30. APPROVAL Reference	31. APPROVAL Reference	32. APPROVAL Reference	33. APPROVAL Reference	34. APPROVAL Reference	35. APPROVAL Reference	36. APPROVAL Reference	37. APPROVAL Reference	38. APPROVAL Reference
40. POSITION CONTROL INFORMATION 11/21/63 ac								

442 2020-03-19 2020-03-19
2020-03-19 2020-03-19

REF ID:

1988-1989

~~SECRET~~

15 March 1963

MEMORANDUM FOR: Secretary, CS/GS Panel (Section A)

SUBJECT: Recommendation for Promotion to Grade GS-13
Mrs. Charlotte Bustos-Videla

1. Mrs. Charlotte Bustos-Videla entered on duty with WH Division in August of 1951. She has served on a variety of desks covering South American as well as Mexican and Central American affairs. In each of her assignments she has demonstrated exceptional competence and devotion to duty.

2. Since December 1957 Mrs. Bustos has been assigned to the Mexican Desk and at present is Acting Chief. She is the soul and motor of that desk, managing many of its operations and supervising its staff, many of whom she has trained. She is past mistress of administrative procedures and the ease with which she obtains clearances, maintains files and secures necessary approvals while handling the most complicated operational aspects of projects is phenomenal. Her work output is enormous and yet everything is done simply and modestly with a minimum of excess motion. She is an outstanding employee and should be deserving of recognition.

3. It is recommended that Mrs. Bustos be promoted to grade GS-13.

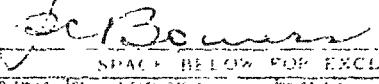
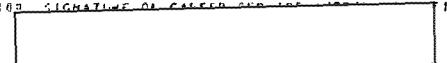
J. C. KEGG
Chief,
Western Hemisphere Division

*Not Approved
Jan 63*

~~SECRET~~

SECRET

(When Filled In)

REQUEST FOR PERSONNEL ACTION				DATE PREPARED	
1. SERIAL NUMBER 107667	2. NAME (Last-First-Middle) BUSTOS-VIDELA, C. Z.			3. DATE PREPARED 1 June 1961	
4. NATURE OF PERSONNEL ACTION NAME CHANGE FROM-CHARLOTTE L. ZEHMUNG	5. EFFECTIVE DATE REQUESTED 06 11 61			6. CATEGORY OF EMPLOYMENT REGULAR	
7. FUNDS 	X V TO V CP TO V	V TO CF CP TO CF	8. COST CENTER NO. CHARGEABLE 1235 1000 1000	9. LEGAL AUTHORITY (Completed by Office of Personnel) ABLE	
10. ORGANIZATIONAL DESIGNATIONS DIP WH BRANCH 3 MEXICO SECTION	11. LOCATION OF OFFICIAL STATION WASH., D. C.				
12. POSITION TITLE OPS OFFICER	13. POSITION NUMBER D	14. PCR CONTROL NO. BA-607	15. CAREER SERVICE DESIGNATION DI		
16. CLASSIFICATION SCHEDULE (GS, LD, etc.) 03 12	17. OCCUPATIONAL SERIES 0136.01	18. GRADE AND STEP 12 4-2	19. SALARY OR RATE \$ 8955- 92/J		
20. REMARKS By Marriage.					
21. SIGNATURE OF REQUESTING OFFICIAL 			22. SIGNATURE OF CAREER AND PERSONNEL OFFICER 		
SPACE BELOW FOR EXCLUSIVE USE OF THE OFFICE OF PERSONNEL					
23. ACTION CODE	24. OFFICE CODE	25. STATE/PROV	26. AIR FORCE CODE	27. MONTH OF BIRTH	28. DAY OF BIRTH
C	1	111	000	06	00
29. AGE EXPIRES	30. SPECIAL REFERENCE	31. DEPARTMENT DATA	32. SEPARATION DATA	33. CORRECTIVE/INVESTIGATION DATA	34. SECURITY REQ. NO.
40	1-10	1-10	1-10	1-10	1-10
35. AIR FORCE CODE	36. GEN. CLAS. CODE	37. AIR FORCE CODE	38. MIN. TERR. PAY RATE	39. SEC. / INVESTIGATE DATA	40. AIR FORCE CODE
000	00	00	00	00	00
41. AIR FORCE SERVICE DATA	42. AIR FORCE SERVICE DATA	43. AIR FORCE SERVICE DATA	44. AIR FORCE SERVICE DATA	45. AIR FORCE SERVICE DATA	46. AIR FORCE SERVICE DATA
47. 0 = NO PREVIOUS SERVICE 1 = NO SERVICE 2 = SERVICE IN AIR FORCE, OTHER THAN U.S. 3 = SERVICE IN AIR FORCE, THOSE NOT IN U.S.	48. 0 = NO PREVIOUS SERVICE 1 = NO SERVICE 2 = SERVICE IN AIR FORCE, OTHER THAN U.S. 3 = SERVICE IN AIR FORCE, THOSE NOT IN U.S.	49. 0 = NO PREVIOUS SERVICE 1 = NO SERVICE 2 = SERVICE IN AIR FORCE, OTHER THAN U.S. 3 = SERVICE IN AIR FORCE, THOSE NOT IN U.S.	50. 0 = NO PREVIOUS SERVICE 1 = NO SERVICE 2 = SERVICE IN AIR FORCE, OTHER THAN U.S. 3 = SERVICE IN AIR FORCE, THOSE NOT IN U.S.	51. 0 = NO PREVIOUS SERVICE 1 = NO SERVICE 2 = SERVICE IN AIR FORCE, OTHER THAN U.S. 3 = SERVICE IN AIR FORCE, THOSE NOT IN U.S.	52. 0 = NO PREVIOUS SERVICE 1 = NO SERVICE 2 = SERVICE IN AIR FORCE, OTHER THAN U.S. 3 = SERVICE IN AIR FORCE, THOSE NOT IN U.S.
49. POSITION CONTROL CERTIFICATION 6-A 6-3-G			50. O.P. APPROVAL		

14-00000
S E C R E T

21 May 1961

MEMORANDUM FOR: WH/Personnel

S U J E C T: Change of Name

It is requested that all records in the Agency,
including the section which issues payroll checks, be changed
to reflect my married name: Charlotte Z. Bustos-Videla.
This change is effective immediately.

Charlotte Z. Bustos-Videla
Charlotte Z. Bustos-Videla
SN/3/Mexico

S E C R E T

JLW.LT
REQUEST FOR PERSONNEL ACTION

1. Serial No.	2. Name (Last-First-Middle)			3. Date Of Birth	4. Vat Prof.	5. Sex	6. CS - EOD
107667	ZEHRUNG CHARLOTTE			Mo. 01 Da. 12 Yr. 29	Non-A-Code 5 PI-1 10 PI-2	O F 2	Mo. 00 Da. 27 Yr. 51
7. SCD	8. CSC Reimt.	9. CSC Or Other Legal Authority	10. Apmt. Affidav.	11. FEGLI	12. LCD	13. Bill Per Ent Ent	
Mo. 04 Da. 02 Yr. 51	Yes - 1 No - 2	Code 1	Mo. Da. Yr.	Yes-1 No-2	Code Mo. 00 Da. 27 Yr. 51	Yes - 1 No - 2	Code 2
50 USCA 403							

PREVIOUS ASSIGNMENT

14. Organizational Designations		Code	15. Location Of Official Station		Station Code
DDP WH BRANCH 111 MEXICO SECTION		4613	WASH., D. C.		75013
16. Dept. - Field	17. Position Title			18. Position No.	19. Serv. 20. Occup. Series
DoD	XXXXXX OPS OFCR			BA-321	GS 0136.51
USAd	Code	USAd	Code		
Frgn	12				
21. Grade & Step	22. Salary Or Rate	23. SD	24. Date Of Grade	25. PSI Due	26. Appropriation Number
11 8 4	7750	DI	Mo. 04 Da. 110 Yr. 155	Mo. 04 Da. 106 Yr. 158	0235-1000-1000
	6682 8529				0235-1000-20

ACTION

27. Nature Of Action	Code	28. Eff. Date	29. Type Of Employee	Code	30. Separation Date
PROMOTION	30	Mo. Da. Yr. 16 11 31 59	REGULAR	01	

PRESENT ASSIGNMENT

31. Current Organizational Designations	Code	32. Location Of Official Station	Station Code		
	4613		WH		
33. Direct Field	34. Position Title			35. Position No.	36. Serv. 37. Occup. Series
USAd	Code	USAd	Code	607	GS 0136.01
Frgn	12			BA-321	
38. Grade & Step	39. Salary Or Rate	40. SD	41. Date Of Grade	42. PSI Due	43. Appropriation Number
12 1	8330	DI	Mo. 12 Da. 13 Yr. 159	Mo. 12 Da. 11 Yr. 161	0235-1000-1000
	8242				0235-1000-20

SOURCE OF REQUEST

A. Requested By (Name And Title)	C. Request Approved By (Signature And Title)
P. C. Bowers WH Personnel Officer	
B. For Additional Information Call (Name & Telephone Ext.)	
John Washington 8242	

CLEARANCES

Classification	Signature	Date	Classification	Signature	Date
A. Career Board	M. J. 11/1/77	11/1/77	D. Placement		
B. Per Contract	R. J. H. 12/11/77	E.			
C. Classification		F. Approved By			
Remarks					

SECRET

16 July 1959

Executive Director C/J

MEMORANDUM FOR: Secretary, CS/CS Panel (Section B)

SUBJECT: Recommendation for Promotion -
Miss Charlotte L. Zehrung

1. Miss Charlotte L. Zehrung entered on duty with CIA on 27 August 1951. She was assigned to the Mexican Section of WH Division, Branch III, in June 1957. During the past two years she has been the responsible Case Officer for several FI and CE Projects.

2. Miss Zehrung is a loyal and dedicated employee. She has displayed considerable initiative and has been able to carry out her duties with a minimum amount of support. She readily accepts responsibility and is a highly efficient worker who thinks clearly and logically. Her knowledge of Headquarters and Field procedures in addition to her ability to organize her work greatly facilitates the smooth functioning of the Mexican Desk. She has demonstrated a superior comprehension of the numerous and varied projects of the [redacted] Station which has contributed to the overall Headquarters support of the stations performance. Because of her sound understanding of operations and her outstanding capacity for work, Miss Zehrung has an excellent potential for assuming greater responsibilities.

3. In recognition of her outstanding performance it is recommended that Miss Zehrung be promoted to grade GS-12.

J.C. King
J. C. KING
Chief

Western Hemisphere Division

S-E-C-R-E-T

17 March 1973

MEMORANDUM FOR: Charlotte Zehrung

VIA : Chief, WH/3/Mexico

1. You have been selected by your division, and authorized by the Clandestine Services Records Committee, to act as Records Officer for your component. Your appointment is based on your professional qualifications to carry out an assignment requiring experience, judgment, and a knowledge of the Clandestine Services objectives for your component.
2. You are to act on behalf of your Division or Staff element in authorizing the destruction of material of no value to the Clandestine Services in accordance with criteria established for this purpose. You are empowered to authorize the destruction of documents and Index cards recommended for destruction by other members of your branch, and to desensitize KAPOK and RYBAT material which is no longer sensitive or which has been restricted in error. Your signature will be recognized by RI as that of an officially appointed Records Officer.
3. A series of meetings will be held in Room 1402, F Building to brief you and your colleagues on the details of your duties as Records Officer. You have been scheduled to attend the meeting to be held on Wednesday, 2 April 1978, 1300 - 1645 hours; if it is not possible for you to attend on the date designated, please call Extension 8325 to arrange for an alternate date. Please review the attached materials prior to this meeting.


DDP Records Policy Officer

Attachment

As stated

cc: Personnel Jacket of Addressee

S-E-C-R-E-T

SECRETClassified According
To Content.**REQUEST FOR PERSONNEL ACTION**

1. Serial No.	2. Name (Last-First-Middle)			3. Date Of Birth	4. Vet. Pref.	5. Sex	6. CS - EOD	
ZEHMUNG, Charlotte L.			Mo Da Yr	None-0 5 Pt. 1 10 Pt. 2	Code O	P	Mo Da Yr	
7. SCD	8. CSC Refm			9. CSC Or Other Legal Authority	10. Apmt. Affidav.	11. FEGLI	12. LCD	13. <small>Ind. Ser. Sched. LCD</small>
Mo Da Yr	Yes - 1 No - 2	Code 1				Mo Da Yr	Yes - 1 No - 2	Code 1

PREVIOUS ASSIGNMENT

14. Organizational Designations DDP/WH Branch III Mexico Section			Code	15. Location Of Official Station Washington, D.C.			Station Code
16. Dept.- Field <small>Dept. X Usfld- Frn-</small>	17. Position Title Reports Officer			18. Position No.	19. Serv.	20. Occup. Series BA-0072.01 GS 0132.44	
21. Grade & Step <small>3 11-2</small>	22. Salary Or Rate <small>6720 \$ 6605</small>	23. SD <small>DI</small>	24. Date Of Grade <small>07/10/55</small>	25. PSI Due <small>07/16/55</small>	26. Appropriation Number 8-3500-20		

ACTION

27. Nature Of Action REASSIGNMENT	Code <small>56</small>	28. Eff. Date <small>13/58</small>	29. Type Of Employee REGULAR	Code <small>01</small>	30. Separation Date
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PRESENT ASSIGNMENT

31. Organizational Designations DDP/WH Branch III Mexico Section	Code <small>4613</small>	32. Location Of Official Station Washington, D.C.	Station Code <small>75013</small>
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33. Dept.- Field <small>Dept. X Usfld- Frn-</small>	34. Position Title T.O. (FI)			35. Position No.	36. Serv.	37. Occup. Series BA-521-02 GS 0136.51
38. Grade & Step <small>5 11-2</small>	39. Salary Or Rate <small>6720 \$ 6605</small>	40. SD <small>DI</small>	41. Date Of Grade <small>Y/10/55</small>	42. PSI Due <small>07/17/55</small>	43. Appropriation Number 8-3500-20	

SOURCE OF REQUEST

A. Requested By (Name And Title) P.C. BOFFERS WH/Personnel Officer	C. Request Approved By (Signature And Title)
B. For Additional Information Call (Name & Telephone Ext.) JOHN WACHINIO X 6242	

CLEARANCES

Clarence	Signature	Date	Clarence	Signature	Date
A. Career Board	<small>John Wachino</small>	<small>1/1/57</small>	D. Placement	<small>John Wachino</small>	<small>1/1/57</small>
B. Pos. Control	<small>John Wachino</small>	<small>1/1/57</small>	E.		
C. Classification			F. Approved By	<small>John Wachino</small>	<small>1/1/57</small>
Remarks	<small>PERIODIC ST. THURS. 12:45 P.M.</small>				

SECRET

Classify According
To Content.

REQUEST FOR PERSONNEL ACTION

8 Nov 1957

1. Serial No.	2. Name (Last-First-Middle)			3. Date Of Birth.	4. Vet. Prof.	5. Sex	6. CS - EOD
	ZEHUNG, Charlotte Z.			Mo 1 12 29	None-0 S. Pr. I 10 PI-2	O F	Mo Da Yr
7. SCD	8. CSC Rating	9. CSC Or Other Legal Authority	10. Appt. Affidav.	11. FEGLI	12. LCD	13. Mil Serv Credit LCP	
Mo Da Yr	Yes - 1 Code No - 2 1		Mo Da Yr	Yes - 1 Code No - 2	Mo Da Yr	Yes - 1 Code No - 2	

PREVIOUS ASSIGNMENT

VOUCHERED

14. Organizational Designations DDP/WH Branch II Argentina Section			Code	15. Location Of Official Station Washington, D. C.			Station Code
16. Dept.- Field Dept. X Code Usfld. Fran.	17. Position Title Reports Officer			18. Position No. BA-313	19. Serv.	20. Occup. Series GS 0132.44	
21. Grade & Step GS-11-2	22. Salary Or Rate \$ 6605.00	23. SD DI	24. Date Of Grade Mo Da Yr	25. PSI Due Mo Da Yr	26. Appropriation Number 8-3500-20		

ACTION

27. Nature Of Action Reassignment		Code 56	28. Eff. Date 12/01/57	29. Type Of Employee Regular	Code 01	30. Separation Date
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PRESENT ASSIGNMENT

VOUCHERED

31. Organizational Designations DDP/WH Branch III Mexico Section			Code 4613	32. Location Of Official Station Washington, D.C.			Station Code 11-IV 72-113
33. Dept.- Field Dept. X Code Usfld. Fran.	34. Position Title Reports Officer			35. Position No. BA-72-01	36. Serv.	37. Occup. Series GS 0132.44	
38. Grade & Step GS-11-2	39. Salary Or Rate \$ 6605.00	40. SD DI	41. Date Of Grade 04/10/55	44. PSI Due 04/06/57	43. Appropriation Number 8-3500-20		

SOURCE OF REQUEST

A. Requested By (Name And Title) P.C. BOHRS WH/Personnel Officer	C. Request Approved By (Signature And Title)
B. For Additional Information Call (Name & Telephone Ext.) H.G. MONTAGUE X 82142	

CLEARANCES

Clearance A. Career Board V	Signature KAL	Date 11-11-57	Clearance D. Placement	Signature Robert W. SMITH	Date 11-12-57
B. Pass Control			E.		
C. Classification			F. Approved By	Robert W. SMITH	

Remarks

1152a
5-17

SECRET

(4)

SECRET

REPRODUCTION MASTERS

SECRET

BIOGRAPHIC PROFILE

SECRET

H a n d l e w i t h C a r e

Charlotte BUSTONS-VIDELA

LEFT HAND SIDE

(numbered top to bottom)

1. Admin and finance documents - March 1974 - Jan 1978
2. Admin and finance documents - May 1951 - April 1956
3. Bio profile (sanitized form in file)

Charlotte BUSTOS-VIDELA

RIGHT HAND SIDE FILE

(numbered top to bottom)

1. Personnel/cover - after 1973
2. "Actions" - Personnel actions - after 1973
3. "Actions" - Personnel Actions - Before 1957
4. "Fitness Reports" - May 1973 - Nov 1977
5. "Fitness Reports" prior to 1957
6. "Other" - admin material - after 1973
7. "Other"-admin material-prior to 1957
8. "Medical" - all medical material related to clearances
9. "PHS-SEC" - document related to cover legend

SECRET

CLASSIFIED BY 0304

FILE NO.

NOTIFICATION OF ESTABLISHMENT OR CANCELLATION OF OFFICIAL COVER BACKSTOP			11 Sep 72	3190
TO: (Check)	<input checked="" type="checkbox"/> CHIEF, CONTROL DIVISION	SS NUMBER		
	<input type="checkbox"/> CHIEF, CONTRACT PERSONNEL DIVISION	EMPLOYEE NUMBER	007667	
	<input checked="" type="checkbox"/> CHIEF, OPERATING COMPONENT (For action)	ID CARD NUMBER	NH 2040	
ATTN:			X	ESTABLISHED
REF:			OFFICIAL COVER	DISCONTINUED
SUBJECT			UNIT	
BUSTOS-VIDELA, Charlotte Z				

KEEP ON TOP OF FILE WHILE COVER IN EFFECT

<input checked="" type="checkbox"/> ESTABLISHMENT OF OFFICIAL COVER BLOCK RECORDS	CANCELLATION OF OFFICIAL COVER UNBLOCK RECORDS		
<input checked="" type="checkbox"/> BASIC COVER PROVIDED EFFECTIVE DATE Aug 62	EFFECTIVE DATE:		
<input type="checkbox"/> OPERATIONAL COVER PROVIDED FOR TOY OTHER (Specify)	SUBMIT FORM 3254 W-2 TO BE ISSUED. (HNB 20-11)		
<input checked="" type="checkbox"/> SUBMIT FORM 642 TO CHANGE LIMITATION CATEGORY. (HNB 20-7)	SUBMIT FORM 642 TO CHANGE LIMITATION CATEGORY. (HNB 20-7)		
<input checked="" type="checkbox"/> SUBMIT FORM 125 W-2 TO BE ISSUED. (HNB 20-11)	EAA: CATEGORY I CATEGORY II		
<input checked="" type="checkbox"/> SUBMIT FORM 1322 FOR ANY CHANGE AFFECTING THIS COVER. (HNB 240-29)	RETURN ALL OFFICIAL DOCUMENTATION TO CCS		
<input checked="" type="checkbox"/> SUBMIT FORM 1323 FOR TRANSFERRING COVER RESPONSIBILITY. (HNB 240-24)	SUBMIT FORM 2689 FOR HOSPITALIZATION CARD		
<input checked="" type="checkbox"/> EAA: CATEGORY I CATEGORY II <input checked="" type="checkbox"/>	DO NOT WRITE IN THE 3 BLOCK		
<input checked="" type="checkbox"/> SUBMIT FORM 2689 FOR AGO HOSPITALIZATION CARD			
REMARKS AND/OR COVER HISTORY			
Aug 51 - Aug 62 Hqs/OVERT Aug 62 - Jul 67 Hqs/DAC Jul 67 - Aug 72 Mexico, <input type="text"/> Sep 72 - Present Hqs/DAC			
<p style="text-align: center;">CD/kas</p> <p style="text-align: center;">1551</p>			
DISTRIBUTION: COPY 1 - CO COPY 2 - OPERATING COMPONENT COPY 3 - OPA COPY 4 - PL/TELESC COPY 5 - OPA COPY 6 - OPA - FILE			

SECRET

NOTIFICATION OF ESTABLISHMENT OF MILITARY COVER BACKSTOP		DATE
<input checked="" type="checkbox"/>	TO: CHIEF, RECORDS AND SERVICES DIVISION	ESTABLISHED FOR
(Check)	CHIEF, OPERATING COMPONENT, WH	(NEE: ZEHNRUNG)
	ATTN: WH/SS [redacted]	BUSTOSVIDELA, Charlotte Z.
	REF: Verbal Request for Cover, Form 1322 Dated 31 Jul 62	FILE NO. 3190
	MILITARY COVER BACKSTOP ESTABLISHED	ID CARD NO.
 <input checked="" type="checkbox"/> BLOCK RECORDS: (OPMEMO 20-800-11)		
a. TEMPORARILY FOR ____ DAYS, EFFECTIVE _____.		
<input checked="" type="checkbox"/> CONTINUING, EFFECTIVE 7 August 1962.		
<input type="checkbox"/> SUBMIT FORM 642 TO CHANGE LIMITATION CATEGORY TO 3. (HB 20-800-3)		
<input type="checkbox"/> ASCERTAIN THAT ARMY H-2 BEING ISSUED. (HB 20-661-1)		
<input type="checkbox"/> SUBMIT FORM 1322 FOR CHANGING AUTHORITY ISSUING THIS COVER. (R 210-250)		
<input type="checkbox"/> SUBMIT FORM 1322 FOR TRANSFERRING COVER RESPONSIBILITY. (R 240-250)		
<input type="checkbox"/> REMARKS: <i>James J. Bustosvidela</i>		
<input type="checkbox"/> COPY TO CPO/DP <i>43688</i>		
DISTRIBUTION: 1 USD 1 PSC O.S. 1 AFBG COMPT		
CGISL MILITARY COVER CCC		

THIS EMPLOYEE HAS BEEN IDENTIFIED AS
A C.I.A. EMPLOYEE FOR PURPOSES OF
WITHHOLDING STATE AND FEDERAL TAXES

DATE DESIGNATED JANUARY 03 1961

07667 CHARLOTTE L ZEHRUNG 235100010

SECRET
(When Filled In)

NOTIFICATION OF PERSONNEL ACTION

1. SPIN NUMBER DJCS 07/21/73		2. NAME (LAST FIRST MIDDLE) BUSTOSVIDELA C Z	
3. NATURE OF PERSONNEL ACTION REASSIGNMENT		4. EFFECTIVE DATE 07 01 73	5. CATEGORY OF ENLISTMENT 7. FM AND NXA
6. FUNDS →	X V 10 V	V 10 O	8. OR OTHER LEGAL AUTHORITY 4235 6525 0000
9. ORGANIZATIONAL DESIGNATIONS ODD/WH DIVISION		10. LOCATION OF OFFICIAL STATION WASH., D.C.	
11. POSITION TITLE CPS OFFICER		12. POSITION NUMBER 1294	13. CLASSIFICATION/SERIAL NUMBER 0
14. CLASSIFICATION SCHEDULE (GS, LS, etc.) GS		15. OCCUPATIONAL SERIES 0136.01	16. GRADE AND STEP 13
17. REMARKS			
SIGNATURE OR OTHER AUTHENTICATION J. G. L. B.			

SECRET

22 APRIL 1973

14-00000
"PAY ADJUSTMENT IN ACCORDANCE WITH 5 U.S.C. 530C AND EXECUTIVE ORDER
11691 PURSUANT TO AUTHORITY OF DDCI AS PROVIDED IN THE CIA ACT OF 1949,
AS AMENDED, AND DDCI DIRECTIVE DATED 28 OCTOBER 1962."

EFFECTIVE DATE OF PAY ADJUSTMENT: 07 JANUARY 1973

EFFECTIVE DATE OF PAY ADJUSTMENT CORRECTED FROM
7 JAN 1973 TO 1 OCT 1972 UNDER EXECUTIVE ORDER
11777, DATED 12 APR 1972 WHICH ORGAN. FUNDS GR-STEP

NAME	NEW SALARY
BUSTOSVIDELA C Z	\$23,642

SECRET
(When Filled In)

MOP: 26 SEPT 72

NOTIFICATION OF PERSONNEL ACTION											
1. SERIAL NUMBER	2. NAME (LAST-FIRST-MIDDLE)										
007667	HUSTOSVIDELA C Z										
3. NATURE OF PERSONNEL ACTION				4. EFFECTIVE DATE	5. CATEGORY OF EMPLOYMENT						
REASSIGNMENT AND TRANSFER TO VOUCHERED FUNDS				09 17 72	REGULAR						
6. FUNDS	V TO V		V TO CF	7. FINANCIAL ANALYSIS NO CHARGEABLE			8. CSC OR OTHER LEGAL AUTHORITY				
X	CF TO V		CF TO CF	3235 0620 0000			50 USC 403 J				
9. ORGANIZATIONAL DESIGNATIONS				10. LOCATION OF OFFICIAL STATION							
DUP/WH DIVISION BRANCH 1 CA SECTION				WASH., D.C.							
11. POSITION TITLE				12. POSITION NUMBER			13. SERVICE DESIGNATION				
OPS OFFICER				1294			D				
14. GRADE AND STEP				15. SALARY OR RATE							
GS				\$23,642							
16. REVERSE				17. INFO:							
HOME BASE: WH											

SPACE BELOW FOR EXECUTIVE USE OF THE OFFICE OF PERSONNEL

18. POSITION NUMBER	19. POSITION TITLE	20. GRADE AND STEP	21. DATE OF PAY
16-110-101300-1 WH	70013	1 GS-12 7	10-12-72
22. PAY RATE			
23. PAY RATE			
24. PAY RATE			
25. PAY RATE			
26. PAY RATE			
27. PAY RATE			
28. PAY RATE			
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"PAY ADJUSTMENT IN ACCORDANCE WITH SALARY SCHEDULES OF PL 92-210 AND EXECUTIVE ORDER 11537 PURSUANT TO AUTHORITY OF DCI AS PROVIDED IN THE CJA ACT OF 1969, AS AMENDED, AND A DCI DIRECTIVE DATED 8 OCTOBER 1962"

EFFECTIVE DATE OF PAY ADJUSTMENT: 9 JANUARY 1972

NAME	SERIAL	OPGM, FUNDS GR-STEP	NEW SALARY
BUSTOSVIDELA C Z	007667	51 620 CF GS 13 7	\$22,487

1. SP3.17.05	2. NAME	3. ORGANIZATION	4. FUNDS	5. LWOP HOURS					
	007667 BUSTOSVIDELA C Z	51 620	CF						
6. OLD SALARY RATE		7. NEW SALARY RATE		8. TYPE ACTION					
Grade	Step	Salary	Pay Lh. Date	Grade	Step	Salary	EFFECTIVE DATE	SI	ADJ
GS 13	6	\$20,721	10/19/69	GS 13	7	\$21,313	10/17/71		

CERTIFICATION AND AUTHENTICATION

I CERTIFY THAT THE WORK OF THE ABOVE NAMED EMPLOYEE IS OF ACCEPTABLE LEVEL OF COMPETENCE.

SIGNATURE	DATE
	16/135-559
<input checked="" type="checkbox"/> NO EXCESS LWOP 0 9/11 <input checked="" type="checkbox"/> IN PAY STATUS AT END OF WAITING PERIOD <input type="checkbox"/> LWOP STATUS AT END OF WAITING PERIOD	
LWOP STATUS	
16/135-559	

PAY CHANGE NOTIFICATION

"PAY ADJUSTMENT IN ACCORDANCE WITH SALARY SCHEDULES OF PL 91-656 AND EXECUTIVE ORDER 11976 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: 10 JANUARY 1971

NAME	SERIAL ORGN, FUNDS GR-STEP	NEW SALARY
BUSTOSVIDELA C Z	007667 51 620 CF GS 13 6	\$20,721

*RECORDED
12/20/69
FBI - WASH D.C.*

"PAY ADJUSTMENT IN ACCORDANCE WITH SALARY SCHEDULES OF PL 91-261 AND EXECUTIVE ORDER 11526 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: 20 DECEMBER 1969

NAME	SERIAL ORGN, FUNDS GR-STEP	NEW SALARY
BUSTOSVIDELA C Z	007667 51 620 CF GS 13 6	\$19,555

"PAY ADJUSTMENT IN ACCORDANCE WITH THE PROVISIONS OF SECTION 5305 OF TITLE 5, U.S.C. AND EXECUTIVE ORDER 11739 PURSUANT TO AUTHORITY OF DCI AS PROVIDED IN THE CIA ACT OF 1949, AS AMENDED, AND DCI DIRECTIVE DATED 06 OCTOBER 1962."

EFFECTIVE DATE OF PAY ADJUSTMENTS: 14 OCTOBER 1973

NAME	SERIAL NRGN. FUNDS GR-STEP	NEW SALARY
BUSTOSVIDELA C Z	007667 51 100 V GS 13 7	\$24,811

1. Serial No.	2. Name	3. Grade	4. Step	5. Old Salary Rate	6. New Salary Rate	7. Type Action
007667	BUSTOSVIDELA C Z			GS 13 5 \$17,920	GS 13 6 \$18,447	
8. Remarks and Authentication	QUALITY STEP INCREASE					
/s/ R S WATKINS 12 DECEMBER 1969						
PAY CHANGE NOTIFICATION						

G51

1. SERIAL NO.	2. NAME	3. ORGANIZATION	4. FUNDS	5. LWOP HOURS
007667	BUSTOSVIDELA C Z	51 620	CF	
6. OLD SALARY RATE		7. NEW SALARY RATE		8. TYPE ACTION
Grade	Step	Salary	Last Eff Date	Grade Step Salary Effective Date SI ADJ.
GS 13	4	\$17,393	10/22/67	GS 13 5 \$17,920 10/19/69
CERTIFICATION AND AUTHENTICATION				
I CERTIFY THAT THE WORK OF THE ABOVE NAMED EMPLOYEE IS OF ACCEPTABLE LEVEL OF COMPETENCE.				
SIGNATURE			DATE	8/16/69/35
<input type="checkbox"/> NO EXCESS LWOP <input type="checkbox"/> IN PAY STATUS AT END OF WAITING PERIOD <input type="checkbox"/> LWOP STATUS AT END OF WAITING PERIOD				
CLERKS INITIALS				
FORM 7-60 560 E Use previous editions PAY CHANGE NOTIFICATION (4-51)				

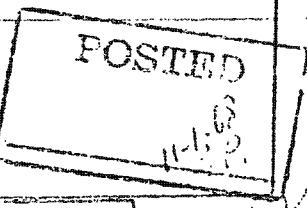
"PAY ADJUSTMENT IN ACCORDANCE WITH SECTION 212 OF PL 90-206 AND EXECUTIVE ORDER 11474 PURSUANT TO AUTHORITY OF DCI AS PROVIDED IN THE CIA ACT OF 1949, AS AMENDED, AND A DCI DIRECTIVE DATED 8 OCTOBER 1962"

EFFECTIVE DATE OF PAY ADJUSTMENT: 13 JULY 1969

NAME	SERIAL	ORGN.	FUNDS	CH-SPEC	SALARY
BUSTOSVIDELA C Z	007667	51 620	CF	GS 13 4	\$17,393

SECRET
(When Filled In)

DUO: 31 OCT 68

NOTIFICATION OF PERSONNEL ACTION									
1. SERIAL NUMBER		2. NAME (LAST FIRST MIDDLE)							
007667		BUSTOSVIDELA C Z							
3. NATURE OF PERSONNEL ACTION					4. EFFECTIVE DATE		5. CATEGORY OF EMPLOYMENT		
REASSIGNMENT					MO DA YE 11 03 68		REGULAR		
6. FUNDS		V TO V		V TO CF	7. Financial Analysis No Chargeable		8. CSC OR OTHER LEGAL AUTHORITY		
		CF TO V	X	CF TO CF	9135 0590 0000		50 USC 403 J.		
9. ORGANIZATIONAL DESIGNATIONS					10. LOCATION OF OFFICIAL STATION				
DDP/WH FOREIGN FIELD BRANCH MEXICO CITY, MEXICO STATION					MEXICO CITY, MEXICO				
11. POSITION TITLE					12. POSITION NUMBER		13. SERVICE DESIGNATION		
OPS OFFICER					0418		D		
14. CLASSIFICATION SCHEDULE (GS EB etc.)			15. OCCUPATIONAL SERIES		16. GRADE AND STEP		17. SALARY OR RATE		
GS			0136.01		13 4		15843		
18. REMARKS STAFF EMPLOYEE SPECIAL									
SPACE BELOW FOR EXCLUSIVE USE OF THE OFFICE OF PERSONNEL									
19. ACTION CODE	20. EMPLOY Grade	21. OFFICE CODING		22. STATION CODE	23. INGRESSES CODE	24. HEIGHT Code	25. DATE OF BIRTH	26. DATE OF GRADE	27. DATE OF RET
37	10	51620 Wh		45075	3	01 12 21	MO DA YE 00 00 00	MO DA YE 00 00 00	MO DA YE 00 00 00
28. TAX EXEMPS		29. SPECIAL REFERENCE	30. RETIREMENT DATA		31. SEPARATION DATA CODE	32. Correction / Correction in Data	33. SECURITY REG NO		34. SEX
MO DA YE			FSC CIA DIA AIA NAME		COCB	TYPE MO DA YE	REG NO		
35. VET PREFERENCE		36. SERV COMP DATE	37. LONG COMP DATE	38. CAREER CATEGORY	39. FED/ T/ HEALTH INSURANCE		40. SOCIAL SECURITY NO		
CODE		MO DA YE	MO DA YE	CODE	CODE	2. MAILED 3. TELE			
41. PREVIOUS CIVILIAN GOVERNMENT SERVICE		42. LEAVE CAT CODE		43. FEDERAL TAX DATA		44. STATE TAX DATA			
CODE		CODE		OPEN ENCLURE	CODE	NO TAX EXEMPTIONS		OPEN EXCLURE	CODE
0. NO PREVIOUS SERVICE				1. 253				1. 145	
1. NO PREV PAY SERVICE				2. 403				2. 160	
2. PREV IN SERVICE LESS THAN 1 YEAR									
3. PREV IN SERVICE ONE YEAR OR MORE									
SIGNATURE OR OTHER AUTHENTICATION									
 11-15-68									

"PAY ADJUSTMENT IN ACCORDANCE WITH SECTIONS 212 AND 216 OF PL 90-226 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 ADJUSTMENTS: 14 JULY 1968

NAME	SERIAL	ORGN.	FUNDS	GR-STEP	OLD SALARY	NEW SALARY
BUSTOSVIDELA C Z	007667	51 620	CF	GS 13 4	\$14,857	\$15,849

SECRET
(When Filled In)

NOTIFICATION OF PERSONNEL ACTION

OLF

1. SERIAL NUMBER	2. NAME (LAST-FIRST-MIDDLE)							
007667	BUSTOSVIDELA C Z							
3. NATURE OF PERSONNEL ACTION			4. EFFECTIVE DATE	5. CATEGORY OF EMPLOYMENT				
FUNDING			NO DA YD	REGULAR				
6. FUNDS	V TO V	V TO CF	7. Financial Analysis No. Chargeable	8. CSC OR OTHER LEGAL AUTHORITY				
	CF TO V	X	6130 (C-361-G000)	50 USC 403 J				
9. ORGANIZATIONAL DESIGNATIONS			10. LOCATION OF OFFICIAL STATION					
DDP/WI FOREIGN FIELD DISANCH. I MEXICO CITY, MEXICO STATION			MEXICO CITY, MEXICO					
11. POSITION TITLE		12. POSITION NUMBER	13. SERVICE CLASSIFICATION					
CIVILIAN		1112						
14. CLASSIFICATION SCHEDULE (GS, TS, etc.)		15. OCCUPATIONAL SERIES	16. GRADE AND STEP	17. SALARY OR RATE				
GS		61300.011	10 3	137.2				
18. REMARKS DIRECTLY EMPLOYED BY CIA.								
SPACE BELOW FOR EXCLUSIVE USE OF THE OFFICE OF PERSONNEL								
19. ACTION	20. EMPLOY	21. OFFICE CODING	22. STATION	23. INSSIGNE	24. RASH	25. DATE OF BIRTH	26. DATE OF ENTR	27. DATE OF ENL
CODE	CODE	NUMBER ALPHABETIC	CODE	CODE	Code	NO DR	NO DS	NO DA
27	15	51 620	500000	3	11	12	13	14
28. RIS EXPIRES	29. SPECIAL	30. RETIREMENT DATA	31. SEPARATION	32. CORRECTION/ANNUALIZATION DATA	33. SECURITY	34. SEE		
NO DR	EXPERIENCE	CODE	DATA FILE	TYPE	NO DR	602 NO		
	1. CIV							
	2. MIL							
	3. POL							
35. VET PREFERENCE	36. SERV. CTRG. DATE	37. LONG COMP. DATE	38. CAREER CATEGORY	39. FEELTY/HEALTH INSURANCE	40. SOCIAL SECURITY NO			
CODE	00	00	00	CODE	CODE			
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41. PREVIOUS CIVILIAN GOVERNMENT SERVICE	42. LEAVE CAT	43. FEDERAL TAX DATA	44. STATE TAX DATA					
CODE	CODE	CODE	CODE					
0. NO PREVIOUS SERVICE	1. 100%	1. NO	1. NO					
1. 100% IN SERVICE	2. 50%	2. YES	2. YES					
2. 50% IN SERVICE	3. 25%	3. NO	3. NO					
3. 25% IN SERVICE	4. 10%							
SIGNATURE OR OTHER AUTHENTICATION								
POSTED [Signature]								

G 51

1. SERIAL NO.	2. NAME	3. ORGANIZATION	4. FUNDS	5. LWOP HOURS					
007667	BUSTOSVIDELA C 2	SI 620	CF						
6. OLD SALARY RATE		7. NEW SALARY RATE		8. TYPE ACTION					
Grade	Step	Salary	Last Eff. Date	Grade	Step	Salary	EFFECTIVE DATE	SI	ADJ
GS 13	3	\$13,769	10/23/66	GS 13	4	\$14,217	10/22/67		
CERTIFICATION AND AUTHENTICATION									
I CERTIFY THAT		OF ACCEPTABLE LEVEL OF COMPETENCE.							
SIGNATURE									DATE
<input checked="" type="checkbox"/> NO EXCESS LWOP <input type="checkbox"/> IN PAY STATUS AT END OF WAITING PERIOD <input type="checkbox"/> LWOP STATUS AT END OF WAITING PERIOD									
CLERK'S INITIALS		AUDITED BY							
FORM 766 560 E Use previous editions		PAY CHANGE NOTIFICATION							
		(4-31)							

"PAY ADJUSTMENT IN ACCORDANCE WITH SALARY SCHEDULES OF PL 90-216
 PURSUANT TO AUTHORITY OF DCI AS PROVIDED IN THE CIA ACT OF 1962,
 AS AMENDED, AND A-DCI DIRECTIVE DATED 8 OCTOBER 1962."
 EFFECTIVE DATE OF PAY ADJUSTMENT: 8 OCTOBER 1967

NAME

BUSTOSVIDELA C 2

SERIAL	ORGN.	FUNDS	GR-STEP	OLD SALARY	NEW SALARY
007667	SI 620	CF	GS 13 3	\$13,769	\$14,217

SECRET
(When Filled In)

MAH: 18 JULY 67

NOTIFICATION OF PERSONNEL ACTION

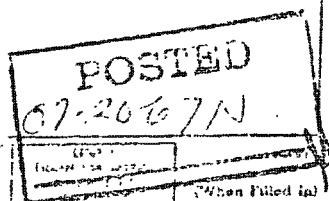
11CF

1. SERIAL NUMBER 007667	2. NAME (LAST-FIRST MIDDLE) BUSTOSVIDELA C Z		
3. NATURE OF PERSONNEL ACTION REASSIGNMENT AND TRANSFER TO CONFIDENTIAL FUNDS			
		4. EFFECTIVE DATE MO DA YE 07 16 67	5. CATEGORY OF EMPLOYMENT REGULAR
6. FUNDS 	V TO V	X	V TO CP
	CP TO V		CP TO CP
7. Financial Analysis No. Chargeable 8135 0390 0000			
8. CSC OR OTHER LEGAL AUTHORITY 50 USC 403 J			
9. ORGANIZATIONAL DESIGNATIONS DDP/WH FOREIGN FIELD BRANCH 1 MEXICO CITY, MEXICO STATION			
10. LOCATION OF OFFICIAL STATION MEXICO CITY, MEXICO			
11. POSITION TITLE OPS OFFICER		12. POSITION NUMBER 1528	13. SERVICE DESIGNATION D
14. CLASSIFICATION SCHEDULE (GS, LB, etc.) GS		15. OCCUPATIONAL SERIES 0136.01	16. GRADE AND STEP 13 3
17. SALARY OR RATE 13769			
18. REMARKS OPS OFFICER OCCURRING INTEL ANALYST POSITION			

SPACE BELOW FOR EXCLUSIVE USE ON THE OBJECT OF BURGOMASTER

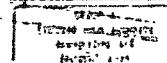
FEDERAL BENEFITS FOR EXCLUSIVE USE OF THE GOVERNMENT											
19 ACTION CODE	20. EMPLOY CODE	21 OFFICE CODING NUMBERIC ALPHABETIC	22. STATION CODE	23. INTRIGUE CODE	24. HOME CODE	25. GATE OF BIRTH NO DA SR	26. DATE OF GRADE MO DA YR	27. DATE OF LES MO DA YR			
20	10	51620 WH	45075		3	K01	12 29				
28. HIRE EXPIRES NO. DA YR		29. SPECIAL REFERENCE		30. RETIREMENT DATA 1. FIA 2. FIA 3. FIA 4. PIA		31. SEPARATION DATA DATE TYPE		32. CANCELLATION/CANCELLATION DATA TYPE		33. SECURITY INFO RD	
07/15/69		82								34. SEA	
35. VET PREFERENCE		36. SERV COMP. DATE MO DA YR		37. LONG COMP. DATE MO DA YR		38. CAREER CATEGORY		39. FEGL / HEALTH INSURANCE CODE		40. SOCIAL SECURITY NO.	
CODE 0. N/A 1. 37% 2. 10% 3. 5%		MO DA YR		MO DA YR		CAN PRTY MO/DS TRM		CODE 0. WORKER 1. YES		HEALTH INS CASE	
41. PREVIOUS CIVILIAN GOVERNMENT SERVICE CODE 0. NO PREVIOUS SERVICE 1. NO BREAK IN SERVICE 2. BREAK IN SERVICE LESS THAN 3 MONTHS 3. BREAK IN SERVICE MORE THAN 3 MONTHS											
42. LEAVE CAT CODE		43. FEDERAL TAX DATA CODE		44. STATE TAX DATA CODE							
1. YES		1. YES		1. YES							
2. NO		2. NO		2. NO							

REVIEWING OTHER ADMINISTRATION



SECRET
(When Filled In)

NOTIFICATION OF PERSONNEL ACTION													
1. SERIAL NUMBER		2. NAME (LAST-FIRST-MIDDLE)											
007637		LST SVSICLA C J											
3. NATURE OF PERSONNEL ACTION						4. EFFECTIVE DATE		5. CATEGORY OF EMPLOYMENT					
PROMOTION						00 DA 70		REGULAR					
6. FUNDS		V TO V		V TO CP		7. COST CENTER NO. CHARGEABLE		8. CSC OR OTHER LEGAL AUTHORITY					
		CP TO V		CP TO CP		7001 0000 0000		30 USC 403 J					
9. ORGANIZATIONAL DESIGNATIONS						10. LOCATION OF OFFICIAL STATION							
DDP, WPA BRANCH I FI SECTION						WASH., D.C.							
11. POSITION TITLE						12. POSITION NUMBER		13. SERVICE DESIGNATION					
COMPTC OFFICER						1201		D					
14. CLASSIFICATION SCHEDULE (SL, LR, etc.)			15. OCCUPATIONAL SERIES			16. GRADE AND STEP		17. SALARY OR RATE					
GS			0136.01			13 3		15760					
18. REMARKS													
SPACE BELOW FOR EXCLUSIVE USE OF THE OFFICE OF PERSONNEL													
19. ACTION CODE	20. PERIOD	21. OFFICE CODING		22. STATION CODE	23. INITIATE CODE	24. MO. DA. YR.	25. DATE OF BIRTH	26. DATE OF GRADE	27. DATE OF LEI				
20	12	1 - 000	2 - A	7001	1	0 0 70	10 0 70 60	10 0 70 60	10 0 70 60				
28. RETIREES		29. SPECIAL REFERENCE	30. RETIREMENT DATA	31. SEPARATION DATA CODE	32. CANCELLATION DATA TYPE	33. SECURITY REQ NO	34. SEC EOD DATA						
NO	DA	YC	1 - 000	1 - 000	20 00 70	EOD DATA							
35. VET. PREFERENCE		36. SERV. COMP. DATE		37. LONG COMP. DATE		38. CAREER CATERGTY		39. MEDICAL / HEALTH INSURANCE		40. SOCIAL SECURITY NO			
CODE		0 - NONE	1 - 000	2 - 000	3 - 000	4 - 000	5 - 000	6 - WAIVED	7 - TBS	HEALTH INS. CODE			
41. PREVIOUS GOVERNMENT SERVICE DATA						42. LEAVE CAT CODE	43. FEDERAL TAX DATA		44. STATE TAX DATA				
CODE						1 - NO PREVIOUS SERVICE	2 - 000	3 - 000	4 - TAX EXEMPTIONS	5 - 000	6 - EXECUTED	7 - 000	8 - NO TAX STATE CODE EXEMPT
SIGNATURE OR OTHER AUTHENTICATION													
15760													



"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 8 OCTOBER 1962."

EFFECTIVE DATE OF PAY ADJUSTMENT: 10 OCTOBER 1965

NAME	SERIAL	ORGN.	FUNDS	GR-STEP	OLD SALARY	NEW SALARY
BUSTOS-VICELA C Z	907667	91 300	V	GS 12 6	\$12,025	\$12,459

"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 8 OCTOBER 1962."

EFFECTIVE DATE OF PAY ADJUSTMENT: 3 JULY 1966

NAME	SERIAL	ORGN.	FUNDS	GR-STEP	OLD SALARY	NEW SALARY
BUSTOS-VICELA C Z	907667	91 300	V	GS 12 6	\$12,459	\$12,822

JOB 007667 : BUSTOSVIDELA C Z				NEW SALARY RATE				TYPE ACTION		
OLD SALARY RATE				NEW SALARY RATE						
Grade	Step	Salary	End Date	Grade	Step	Salary	Effective Date	PW	LU	ADP
GS 12	5	\$11,670	10/13/65	GS 12	6	\$12,075	10/10/69			

REMARKS AND APPROVALS

/ NO EXCESS LUMP
 / IN PAY STATUS AT END OF WAITING PERIOD
 / LUMP STATUS AT END OF WAITING PERIOD
 CLERK'S INITIALS **D.J.** AUDITED BY

I CERTIFY THAT THE WORK OF THE ABOVE NAMED EMPLOYEE IS
 OF AN ACCEPTABLE LEVEL OF COMPETENCE.

SIGNATURES  RATE 23 Aug 65

PAY CHANGE NOTIFICATION

Form 0-81 560 Obsolete Previous Edition

(4-61)

SECRET
(When Filled In)

NJM: 11 AUG 65

NOTIFICATION OF PERSONNEL ACTION											
OCF		NOTIFICATION OF PERSONNEL ACTION									
1. SERIAL NUMBER	2. NAME (LAST-FIRST-MIDDLE)										
007667	BUSTOSVIDELA C Z										
3. NATURE OF PERSONNEL ACTION											
REASSIGNMENT											
4. FUND	X	V TO V	V TO CF	5. EFFECTIVE DATE	6. CATEGORY OF EMPLOYMENT						
FUND		CF TO V	CF TO CF	08/01/65	REGULAR						
7. COST CENTER NO. CHARGEABLE											
8. CSC OR OTHER LEGAL AUTHORITY											
6235 0620 0000 50 USC 403 J											
9. ORGANIZATIONAL DESIGNATIONS											
DDP/WH BRANCH 1. FI SECTION											
10. LOCATION OF OFFICIAL STATION											
WASH., D. C.											
11. POSITION TITLE				12. POSITION NUMBER	13. SERVICE DESIGNATION						
OPS OFFICER				1201	D						
14. CLASSIFICATION SCHEDULE (15, 18, 20)				15. OCCUPATIONAL SERIES	16. GRADE AND STEP	17. SALARY OR RATE					
GS				0136.01	12.5	\$11670					
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. PAYGRADE CODE	24. Grade. Code	25. DATE OF BIRTH	26. DATE OF GRADE	27. DATE OF LES		
37	10	51300	WH	75013		1	01/12/29				
28. HIRE EXPIRES		29. SPECIAL REFERENCE		30. RETIREMENT DATA	31. SEPARATION DATA & CODE	32. CORRECTION-CANCELLATION DATA	33. SECURITY REG NO			34. SEX	
NO DA YR				CSC FICA NOVA	CODE	TYPE	NO DA YR	NO DA YR	NO DA YR	REG NO	SEX
35. VET PREFERENCE		36. SERV. COMP. DATE		37. LONG COMP. DATE	38. CAREER CATEGORY	39. FED/HEALTH INSURANCE	40. SECURITY SECURITY NO				
CODE		O-1 O-2 O-3 O-4 O-5 O-6 O-7 O-8 O-9 O-10 O-11 O-12 O-13 O-14 O-15 O-16 O-17 O-18 O-19 O-20 O-21 O-22 O-23 O-24 O-25 O-26 O-27 O-28 O-29 O-30 O-31 O-32 O-33 O-34 O-35 O-36 O-37 O-38 O-39 O-40 O-41 O-42 O-43 O-44 O-45 O-46 O-47 O-48 O-49 O-50 O-51 O-52 O-53 O-54 O-55 O-56 O-57 O-58 O-59 O-60 O-61 O-62 O-63 O-64 O-65 O-66 O-67 O-68 O-69 O-70 O-71 O-72 O-73 O-74 O-75 O-76 O-77 O-78 O-79 O-80 O-81 O-82 O-83 O-84 O-85 O-86 O-87 O-88 O-89 O-90 O-91 O-92 O-93 O-94 O-95 O-96 O-97 O-98 O-99 O-100 O-101 O-102 O-103 O-104 O-105 O-106 O-107 O-108 O-109 O-110 O-111 O-112 O-113 O-114 O-115 O-116 O-117 O-118 O-119 O-120 O-121 O-122 O-123 O-124 O-125 O-126 O-127 O-128 O-129 O-130 O-131 O-132 O-133 O-134 O-135 O-136 O-137 O-138 O-139 O-140 O-141 O-142 O-143 O-144 O-145 O-146 O-147 O-148 O-149 O-150 O-151 O-152 O-153 O-154 O-155 O-156 O-157 O-158 O-159 O-160 O-161 O-162 O-163 O-164 O-165 O-166 O-167 O-168 O-169 O-170 O-171 O-172 O-173 O-174 O-175 O-176 O-177 O-178 O-179 O-180 O-181 O-182 O-183 O-184 O-185 O-186 O-187 O-188 O-189 O-190 O-191 O-192 O-193 O-194 O-195 O-196 O-197 O-198 O-199 O-200 O-201 O-202 O-203 O-204 O-205 O-206 O-207 O-208 O-209 O-210 O-211 O-212 O-213 O-214 O-215 O-216 O-217 O-218 O-219 O-220 O-221 O-222 O-223 O-224 O-225 O-226 O-227 O-228 O-229 O-230 O-231 O-232 O-233 O-234 O-235 O-236 O-237 O-238 O-239 O-240 O-241 O-242 O-243 O-244 O-245 O-246 O-247 O-248 O-249 O-250 O-251 O-252 O-253 O-254 O-255 O-256 O-257 O-258 O-259 O-260 O-261 O-262 O-263 O-264 O-265 O-266 O-267 O-268 O-269 O-270 O-271 O-272 O-273 O-274 O-275 O-276 O-277 O-278 O-279 O-280 O-281 O-282 O-283 O-284 O-285 O-286 O-287 O-288 O-289 O-290 O-291 O-292 O-293 O-294 O-295 O-296 O-297 O-298 O-299 O-300 O-301 O-302 O-303 O-304 O-305 O-306 O-307 O-308 O-309 O-310 O-311 O-312 O-313 O-314 O-315 O-316 O-317 O-318 O-319 O-320 O-321 O-322 O-323 O-324 O-325 O-326 O-327 O-328 O-329 O-330 O-331 O-332 O-333 O-334 O-335 O-336 O-337 O-338 O-339 O-340 O-341 O-342 O-343 O-344 O-345 O-346 O-347 O-348 O-349 O-350 O-351 O-352 O-353 O-354 O-355 O-356 O-357 O-358 O-359 O-360 O-361 O-362 O-363 O-364 O-365 O-366 O-367 O-368 O-369 O-370 O-371 O-372 O-373 O-374 O-375 O-376 O-377 O-378 O-379 O-380 O-381 O-382 O-383 O-384 O-385 O-386 O-387 O-388 O-389 O-390 O-391 O-392 O-393 O-394 O-395 O-396 O-397 O-398 O-399 O-400 O-401 O-402 O-403 O-404 O-405 O-406 O-407 O-408 O-409 O-410 O-411 O-412 O-413 O-414 O-415 O-416 O-417 O-418 O-419 O-420 O-421 O-422 O-423 O-424 O-425 O-426 O-427 O-428 O-429 O-430 O-431 O-432 O-433 O-434 O-435 O-436 O-437 O-438 O-439 O-440 O-441 O-442 O-443 O-444 O-445 O-446 O-447 O-448 O-449 O-450 O-451 O-452 O-453 O-454 O-455 O-456 O-457 O-458 O-459 O-460 O-461 O-462 O-463 O-464 O-465 O-466 O-467 O-468 O-469 O-470 O-471 O-472 O-473 O-474 O-475 O-476 O-477 O-478 O-479 O-480 O-481 O-482 O-483 O-484 O-485 O-486 O-487 O-488 O-489 O-490 O-491 O-492 O-493 O-494 O-495 O-496 O-497 O-498 O-499 O-500 O-501 O-502 O-503 O-504 O-505 O-506 O-507 O-508 O-509 O-510 O-511 O-512 O-513 O-514 O-515 O-516 O-517 O-518 O-519 O-520 O-521 O-522 O-523 O-524 O-525 O-526 O-527 O-528 O-529 O-530 O-531 O-532 O-533 O-534 O-535 O-536 O-537 O-538 O-539 O-540 O-541 O-542 O-543 O-544 O-545 O-546 O-547 O-548 O-549 O-550 O-551 O-552 O-553 O-554 O-555 O-556 O-557 O-558 O-559 O-560 O-561 O-562 O-563 O-564 O-565 O-566 O-567 O-568 O-569 O-570 O-571 O-572 O-573 O-574 O-575 O-576 O-577 O-578 O-579 O-580 O-581 O-582 O-583 O-584 O-585 O-586 O-587 O-588 O-589 O-590 O-591 O-592 O-593 O-594 O-595 O-596 O-597 O-598 O-599 O-600 O-601 O-602 O-603 O-604 O-605 O-606 O-607 O-608 O-609 O-610 O-611 O-612 O-613 O-614 O-615 O-616 O-617 O-618 O-619 O-620 O-621 O-622 O-623 O-624 O-625 O-626 O-627 O-628 O-629 O-630 O-631 O-632 O-633 O-634 O-635 O-636 O-637 O-638 O-639 O-640 O-641 O-642 O-643 O-644 O-645 O-646 O-647 O-648 O-649 O-650 O-651 O-652 O-653 O-654 O-655 O-656 O-657 O-658 O-659 O-660 O-661 O-662 O-663 O-664 O-665 O-666 O-667 O-668 O-669 O-670 O-671 O-672 O-673 O-674 O-675 O-676 O-677 O-678 O-679 O-680 O-681 O-682 O-683 O-684 O-685 O-686 O-687 O-688 O-689 O-690 O-691 O-692 O-693 O-694 O-695 O-696 O-697 O-698 O-699 O-700 O-701 O-702 O-703 O-704 O-705 O-706 O-707 O-708 O-709 O-710 O-711 O-712 O-713 O-714 O-715 O-716 O-717 O-718 O-719 O-720 O-721 O-722 O-723 O-724 O-725 O-726 O-727 O-728 O-729 O-730 O-731 O-732 O-733 O-734 O-735 O-736 O-737 O-738 O-739 O-740 O-741 O-742 O-743 O-744 O-745 O-746 O-747 O-748 O-749 O-750 O-751 O-752 O-753 O-754 O-755 O-756 O-757 O-758 O-759 O-760 O-761 O-762 O-763 O-764 O-765 O-766 O-767 O-768 O-769 O-770 O-771 O-772 O-773 O-774 O-775 O-776 O-777 O-778 O-779 O-780 O-781 O-782 O-783 O-784 O-785 O-786 O-787 O-788 O-789 O-790 O-791 O-792 O-793 O-794 O-795 O-796 O-797 O-798 O-799 O-800 O-801 O-802 O-803 O-804 O-805 O-806 O-807 O-808 O-809 O-810 O-811 O-812 O-813 O-814 O-815 O-816 O-817 O-818 O-819 O-820 O-821 O-822 O-823 O-824 O-825 O-826 O-827 O-828 O-829 O-830 O-831 O-832 O-833 O-834 O-835 O-836 O-837 O-838 O-839 O-840 O-841 O-842 O-843 O-844 O-845 O-846 O-847 O-848 O-849 O-850 O-851 O-852 O-853 O-854 O-855 O-856 O-857 O-858 O-859 O-860 O-861 O-862 O-863 O-864 O-865 O-866 O-867 O-868 O-869 O-870 O-871 O-872 O-873 O-874 O-875 O-876 O-877 O-878 O-879 O-880 O-881 O-882 O-883 O-884 O-885 O-886 O-887 O-888 O-889 O-890 O-891 O-892 O-893 O-894 O-895 O-896 O-897 O-898 O-899 O-900 O-901 O-902 O-903 O-904 O-905 O-906 O-907 O-908 O-909 O-910 O-911 O-912 O-913 O-914 O-915 O-916 O-917 O-918 O-919 O-920 O-921 O-922 O-923 O-924 O-925 O-926 O-927 O-928 O-929 O-930 O-931 O-932 O-933 O-934 O-935 O-936 O-937 O-938 O-939 O-940 O-941 O-942 O-943 O-944 O-945 O-946 O-947 O-948 O-949 O-950 O-951 O-952 O-953 O-954 O-955 O-956 O-957 O-958 O-959 O-960 O-961 O-962 O-963 O-964 O-965 O-966 O-967 O-968 O-969 O-970 O-971 O-972 O-973 O-974 O-975 O-976 O-977 O-978 O-979 O-980 O-981 O-982 O-983 O-984 O-985 O-986 O-987 O-988 O-989 O-990 O-991 O-992 O-993 O-994 O-995 O-996 O-997 O-998 O-999 O-1000 O-1001 O-1002 O-1003 O-1004 O-1005 O-1006 O-1007 O-1008 O-1009 O-10010 O-10011 O-10012 O-10013 O-10014 O-10015 O-10016 O-10017 O-10018 O-10019 O-10020 O-10021 O-10022 O-10023 O-10024 O-10025 O-10026 O-10027 O-10028 O-10029 O-10030 O-10031 O-10032 O-10033 O-10034 O-10035 O-10036 O-10037 O-10038 O-10039 O-10040 O-10041 O-10042 O-10043 O-10044 O-10045 O-10046 O-10047 O-10048 O-10049 O-10050 O-10051 O-10052 O-10053 O-10054 O-10055 O-10056 O-10057 O-10058 O-10059 O-10060 O-10061 O-10062 O-10063 O-10064 O-10065 O-10066 O-10067 O-10068 O-10069 O-10070 O-10071 O-10072 O-10073 O-10074 O-10075 O-10076 O-10077 O-10078 O-10079 O-10080 O-10081 O-10082 O-10083 O-10084 O-10085 O-10086 O-10087 O-10088 O-10089 O-10090 O-10091 O-10092 O-10093 O-10094 O-10095 O-10096 O-10097 O-10098 O-10099 O-100100 O-100101 O-100102 O-100103 O-100104 O-100105 O-100106 O-100107 O-100108 O-100109 O-100110 O-100111 O-100112 O-100113 O-100114 O-100115 O-100116 O-100117 O-100118 O-100119 O-100120 O-100121 O-100122 O-100123 O-100124 O-100125 O-100126 O-100127 O-100128 O-100129 O-100130 O-100131 O-100132 O-100133 O-100134 O-100135 O-100136 O-100137 O-100138 O-100139 O-100140 O-100141 O-100142 O-100143 O-100144 O-100145 O-100146 O-100147 O-100148 O-100149 O-100150 O-100151 O-100152 O-100153 O-100154 O-100155 O-100156 O-100157 O-100158 O-100159 O-100160 O-100161 O-100162 O-100163 O-100164 O-100165 O-100166 O-100167 O-100168 O-100169 O-100170 O-100171 O-100172 O-100173 O-100174 O-100175 O-100176 O-100177 O-100178 O-100179 O-100180 O-100181 O-100182 O-100183 O-100184 O-100185 O-100186 O-100187 O-100188 O-100189 O-100190 O-100191 O-100192 O-100193 O-100194 O-100195 O-100196 O-100197 O-100198 O-100199 O-100200 O-100201 O-100202 O-100203 O-100204 O-100205 O-100206 O-100207 O-100208 O-100209 O-100210 O-100211 O-100212 O-100213 O-100214 O-100215 O-100216 O-100217 O-100218 O-100219 O-100220 O-100221 O-100222 O-100223 O-100224 O-100225 O-100226 O-100227 O-100228 O-100229 O-100230 O-100231 O-100232 O-100233 O-100234 O-100235 O-100236 O-100237 O-100238 O-100239 O-100240 O-100241 O-100242 O-100243 O-100244 O-100245 O-100									

SECRET

(When filled in)

NOTIFICATION OF PERSONNEL ACTION

OCS 05/27/65

1 SERIAL NUMBER 007667	2 NAME (LAST-FIRST-MIDDLE) RUSTOSVIDELA C Z		
3 NATURE OF PERSONNEL ACTION REASSIGNMENT		4 EFFECTIVE DATE MM DD YY 05 31 65	5 CATEGORY OF EMPLOYMENT
6 FUNDS X V TO V O TO V	V TO O O TO O	7 COST CENTER NO CHARGEABLE 5235 0620 0000	8 CSC OR ORDER LEGAL AUTHORITY
9 ORGANIZATIONAL DESIGNATIONS DDP/WH DIVISION		10 LOCATION OF OFFICIAL STATION WASH. D. C.	
11 POSITION TITLE OPS OFFICER		12 POSITION NUMBER 1202	13 CAREER SERVICE DESIGNATION U
14 CLASSIFICATION SCHEDULE (GS, LS, 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: 10px; display: inline-block;"> POSTED 6-9-65 HT </div>			
SIGNATURE OR OTHER AUTHENTICATION			

SECRET

ADJUSTMENT OF SALARY RATE IN ACCORDANCE WITH THE SCHEDULES OF THE GOVERNMENT EMPLOYEES SALARY REFORM ACT OF 1964 PURSUANT TO THE AUTHORITY OF THE DIRECTOR OF CENTRAL INTELLIGENCE AS PROVIDED IN THE CENTRAL INTELLIGENCE AGENCY ACT OF 1949, AS AMENDED, AND POLICY DIRECTIVE ISSUED BY THE ACTING DIRECTOR OF CENTRAL INTELLIGENCE DATED 8 OCTOBER 1962.

**SALARY CONVERTED TO RATE SHOWN FOR INDIVIDUAL'S GRADE
AND STEP AS INDICATED IN CHART BELOW.**

GENERAL SCHEDULE RATES
Federal Employees Salary Act of 1964

007667

BUSTOS-VIDELA, C. Z.

\$1,600

OCC SALARY RATE				NEW SALARY RATE				PROMOTION		
Grade	Step	Salary	Last Eff Date	Grade	Step	Salary	Effective Date	Prom	Adv	Area
GS 12	1	\$10,970	10/11/63	GS 12	5	\$11,300	01/29/64			

1. Remarks and Authorizations

QUALITY STEP INCREASE.

SIGNED: E. D. ECHOLS
DATE: MARCH 28, 1964
PAY CHANGE NOTIFICATION

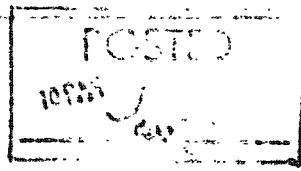
Form 9-61 560

Obsolete Previous Edition

(4-61)

SECRET
(When Filled In)

MHC:5 DEC 63

NOTIFICATION OF PERSONNEL ACTION															
1. SERIAL NUMBER		2. NAME (LAST-FIRST MIDDLE)													
007667		BUSTOSVIDELA C Z													
3. NATURE OF PERSONNEL ACTION															
REASSIGNMENT															
4. EFFECTIVE DATE		5. CATEGORY OF EMPLOYMENT													
MO. DA. YR 12 05 63		REGULAR													
6. FUNDS		V TO V	V TO CF	7. COST CENTER NO. CHARGEABLE		8. CSC OR OTHER LEGAL AUTHORITY									
<input checked="" type="checkbox"/>		CF TO V	CF TO CF	4235 1000 1000		50 USC 403 J									
9. ORGANIZATIONAL DESIGNATIONS															
DDP WH BRANCH 3 MEXICO SECTION															
10. LOCATION OF OFFICIAL STATION															
WASH., D.C.															
11. POSITION TITLE		12. POSITION NUMBER		13. SERVICE DESIGNATION											
OPS OFFICER		0321		D											
14. CLASSIFICATION SCHEDULE (GS, LS, NC)		15. OCCUPATIONAL SERIES		16. GRADE AND STEP		17. SALARY OR RATE									
GS		0136.01		12 4		10420									
18. REMARKS															
SPACE BELOW FOR EXCLUSIVE USE OF THE OFFICE OF PERSONNEL															
19. ACTION TO TAKE		20. OFFICE CODING		21. STATION		22. INTEGRAL CODE		24. Height		25. DATE OF BIRTH		26. DATE OF GRADE		27. DATE OF LST	
CODE 37		10 51400 WH		75013		CODE 1		INCHES 01 01 12 29		MO. DA. YR 00 00 00 00		MO. DA. YR 00 00 00 00		MO. DA. YR 00 00 00 00	
22. DATE OF EXPIRES		23. SPECIAL REFERENCE		24. SEPARATION DATA		25. CORRECTION/CANCELLATION DATA		26. SECURITY		27. SECURITY		28. SECURITY		29. SECURITY	
MO. DA. YR 00 00 00		CODE 1000		CODE 1000		CODE 1000		MO. DA. YR 00 00 00		MO. DA. YR 00 00 00		MO. DA. YR 00 00 00		MO. DA. YR 00 00 00	
30. VET PREFERENCE		31. STAFF COMP. DATE		32. LONG. COMP. DATE		33. CAREER CATEGORY		34. FEES / HEALTH INSURANCE		35. SOCIAL SECURITY NO.					
CODE 1		MO. DA. YR 00 00 00		MO. DA. YR 00 00 00		CODE 1		CODE 1		CODE 1					
36. PREVIOUS GOVERNMENT SERVICE DATA		37. LEAVE LIST		38. FEDERAL TAX DATA		39. STATE TAX DATA		40. PAYROLL DATA		41. BENEFITS		42. PAYROLL DATA		43. BENEFITS	
CODE 1		CODE 1000		CODE 1000		CODE 1000		CODE 1000		CODE 1000		CODE 1000		CODE 1000	
44. SIGNATURE OR OTHER AUTHENTICATION															
															

IN ACCORDANCE WITH THE PROVISIONS OF PUBLIC LAW 87-765 AND OCT
MEMORANDUM DATED 1 AUGUST 1946, SALARY IS ADJUSTED AS FOLLOWS,
EFFECTIVE 3 JANUARY 1947.

NAME	SERIAL	ORG FUNDS	GR-ST	OLD SALARY	NEW SALARY
BUSTOSVIDELA C Z	007667	51 400 V	05 12 4	\$10,420	\$10,970

IN ACCORDANCE WITH THE PROVISIONS OF PUBLIC LAW ^{47 - 793} AND
DCI MEMORANDUM DATED 1 AUGUST 1954, SALARY IS ADJUSTED AS FOLLOWS,
EFFECTIVE 16 OCTOBER 1962

NAME	SERIAL ORGN	FUND SOURCE	OLD	OLD	NEW	NEW	
			GR-ST	SALARY	GR-ST	SALARY	
BUSTOSVIDELA C Z	007667	A4400	V	12 2	\$ 9215	12 2	\$ 9790

1. Serial No.	2. Name	3. Cost Center Number	4. LWOP Hours
007667	BUSTOSVIDELA C Z	64400 V	
5. OLD SALARY RATE		6. NEW SALARY RATE	
Grade	Step	Salary	Effective Date
GS-12	2 6	\$ 9,790	06/11/61
Grade	Step	Salary	Effective Date
GS-12	3	\$ 10,105	10/14/62
7. TYPE ACTION			
PDU	LSD	ADJ	
8. Remarks and Authentication			
<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 CLERKS INITIALS: AUDITED BY			
I CERTIFY THAT THE WORK OF THE ABOVE NAMED EMPLOYEE IS OF AN ACCEPTABLE LEVEL OF COMPETENCE.			
SIGNATURE: <i>redf. Holmgren</i>		DATE: <i>26-X-62</i>	
PAY CHANGE NOTIFICATION			

SECRET
(When Filled In)

ACC 11 AUG 61

NOTIFICATION OF PERSONNEL ACTION

1. SERIAL NUMBER		2. NAME (LAST-FIRST MIDDLE) BUSTOS-VIDELA C Z BUSTOSVIDELA C Z					
3. NATURE OF PERSONNEL ACTION NAME CHANGE FROM* CHARLOTTE L. ZEBRUNG - CORRECTION**		4. EFFECTIVE DATE 06 12 61	5. CATEGORY OF EMPLOYMENT REGULAR				
6. FUNDS → X V TO V O TO O		7. COST CENTER NO. CHARGEABLE 2235 1000 1000	8. CSC OR OTHER LOCAL AUTHORITY 50 USC 403 J				
9. ORGANIZATIONAL DESIGNATIONS DOP WH BRANCH 3 MEXICO SECTION		10. LOCATION OF OFFICIAL STATION WASH., D.C.					
11. POSITION TITLE OPS OFFICER		12. POSITION NUMBER 0607	13. CAREER SERVICE DESIGNATION D				
14. CLASSIFICATION SCHEDULE (GS, WB, etc.) GS		15. OCCUPATIONAL SERIES 0136.01	16. GRADE AND STEP 12 2				
		17. SALARY OR RATE 9215					
18. REMARKS * BY MARRIAGE ON 18 MARCH 61. ** THIS ACTION CORRECTS SF 1150 EFF 12 JUNE 61 ITEM # 2, NAME, WHICH READ BUSTOSVIDELA C Z TO READ BUSTOS-VIDELA C Z, FOR PAYROLL PURPOSE ONLY.							
SPACE BELOW FOR EXCLUSIVE USE OF THE OFFICE OF PERSONNEL							
19. ACTION; 20. EMPLOY. CODE	21. OFFICE CODING NUMERIC ALPHABETIC	22. STATION CODE	23. INTEGRITY CODE	24. GRADE CODE	25. DATE OF BIRTH MM DD YY	26. DATE OF GRADE MM DD YY	27. DATE OF LEI MM DD YY
					01 12 29		
28. RIF EXPRIES MM DD YY	29. SPECIAL REFERENCE 1. CSC 2. PICA 3. NONE	30. RETIREMENT DATA CODE	31. SEPARATION DATA CODE TYPE	32. CONFIRM/CANCELLATION DATA TYPE	33. SECURITY REG NO REG NO	34. SEX M/F	
							→ EOD DATA
35. RET PREFERENCE CODE	36. SERV. COMP. DATE MM DD YY	37. LONG COMP. DATE MM DD YY	38. MIL. SERV. CREDIT/LIS CODE	39. FIGHT / HEALTH INSURANCE CODE	40. SOCIAL SECURITY NO		
0. NONE 1. RPT 2. GPT			1. YES 2. NO	1. YES 2. NO	0. MAILED 1. YES	HEALTH INS CODE	
41. PREVIOUS GOVERNMENT SERVICE DATA CODE	42. LEAVE CAT. CODE	43. FEDERAL TAX DATA CODE	44. STATE TAX DATA CODE				
1. NO PREVIOUS SERVICE 2. NO BREAK IN SERVICE 3. PREVIOUS SERVICE (LESS THAN 12 MOS) 4. BREAK IN SERVICE (MORE THAN 12 MOS)		1. YES 2. NO	1. YES 2. NO	1. YES 2. NO	1. YES 2. NO	NO TAX EXEMPT	STATE CODE
SIGNATURE OR OTHER AUTHENTICATION				POINDED 08/22/61 JK			

SECRET
(When Filled In)

AEC: 12 JUNE 61

NOTIFICATION OF PERSONNEL ACTION

OFF

1. SERIAL NUMBER		2. NAME (LAST-FIRST-MIDDLE)					
007667		BUSTOSVIDELA C Z					
3. NATURE OF PERSONNEL ACTION NAME CHANGE FROM* CHARLOTTE L. ZEHRUNG		4. EFFECTIVE DATE MO. DA. YE 06 12 61	5. CATEGORY OF EMPLOYMENT REGULAR				
6. FUNDS ➡ X V TO V V TO CP CP TO V CP TO CP		7. COST CENTER NO. CHARGEABLE 1235 1000 1000		8. CSC OR OTHER LEGAL AUTHORITY 50 USC 403 J			
9. ORGANIZATIONAL DESIGNATIONS DOP WH BRANCH 3 MEXICO SECTION		10. LOCATION OF OFFICIAL STATION WASH., D.C.					
11. POSITION TITLE OPS OFFICER		12. POSITION NUMBER 0607	13. CAREER-SERVICE DESIGNATION D.				
14. CLASSIFICATION SCHEDULE (GS, WB, GK.) GS		15. OCCUPATIONAL SERIES 0136.01	16. GRADE AND STEP 12 2	17. SALARY OR RATE 9215			
18. REMARKS *BY MARRIAGE. 18 MARCH 1961							
SPACE BELOW FOR EXCLUSIVE USE OF THE OFFICE OF PERSONNEL							
28. ACTION	29. EMPLOYEE CODE 53 10	30. OFFICE CODING NUMERIC ALPHABETIC	31. STATION CODE	32. INTEGEE CODE	33. MO-DA-YE OF BIRTH 01 12 29	34. DATE OF GRADE MO. DA. YE	35. DATE OF LES MO. DA. YE
36. SITE EXPIRES DA YE	37. SPECIAL REFERENCE	38. RETIREMENT DATA 1. CSC 2. PICA 3. NONE	39. SEPARATION DATA CODE	40. CORRECTION/CANCELLATION DATA TYPE MO. DA. YE	EOD DATA ➡		42. SECURITY REG RD.
43. RET. PREFERENCE 1. DON'T 2. DPT 3. DPT	44. SERV. COMB. DATE MO. DA. YE	45. LONG COMB. DATE MO. DA. YE	46. MIL. SERV. CREDITED 1. YES 2. NO	47. FECHI / HEALTH INSURANCE CODE	48. FECHI / HEALTH INSURANCE CODE	49. SOCIAL SECURITY NO	
50. PREVIOUS GOVERNMENT SERVICE DATA 1. NO PREVIOUS SERVICE 2. NO BREAK IN SERVICE 3. BREAK IN SERVICE LESS THAN 12 MOS. 4. BREAK IN SERVICE MORE THAN 12 MOS.	51. LEAVE CAP CODE	52. FEDERAL TAX DATA CONTRACTED CODE	53. STATE TAX DATA TAX EXEMPTIONS 1. YES 2. NO	54. STATE TAX DATA TAX EXEMPT 1. YES 2. NO			
SIGNATURE OR OTHER AUTHENTICATION					POSTED 06/14/61 ZJK		

SECRET
(When Filled In)

1. Serial No.	2. Name	3. Cost Center Number	4. LWOP Hours							
107667	MURK S VILLE 4 ZEHRUNG CHARLOTTE	DCP/WH 3	V=20							
5. OLD SALARY RATE		6. NEW SALARY RATE								
Grade	Step	Salary	Last Eff. Date	Grade	Step	Salary	Effective Date	FBI	ISI	ADJ.
GS 12	1	\$ 8,955	12/13/69	12	2	\$ 9,215	08/11/69			
8. Remarks and Authorization										
<p style="text-align: center;">✓ NO EXCESS LWOP</p> <p style="text-align: center;">✓ IN PAY STATUS AT END OF WAITING PERIOD</p> <p style="text-align: center;">✓ IN LWOP STATUS AT END OF WAITING PERIOD</p> <p style="text-align: center;">ECHOES WK</p>										
PAY CHANGE NOTIFICATION										

Form 560 Obsolete Previous Edition

SECRET

(4-51)

IN ACCORDANCE WITH THE PROVISIONS OF P.L. 86-560 AND DCI MEMO DATED 1 AUGUST 1956, SALARY IS ADJUSTED AS FOLLOWS EFFECTIVE 10 JULY 1960.

SD	NAME	SERIAL	ORG	GR-ST	OLD SALARY	NEW SALARY
DI	ZEHRUNG CHARLOTTE	107667	46 13	GS-12 1	\$ 8,330.	\$ 8,955

/S/ EMMETT D. ECHOLS
DIRECTOR OF PERSONNEL

SECRET
(When Filled In)

NOTIFICATION OF PERSONNEL ACTION

PAS: 11 DEC 1959

1. Serial No.	2. Name (Last-First-Middle)			3. Date Of Birth	4. Vet. Prof.	5. Sex	6. CS - EOD	
107667	ZEHRUNG CHARLOTTE			Mo. Da. Yr.	Non-0 5 Pt-1 10 Pt-2	Code 0	Mo. Da. Yr.	
01 02 51	Yes - 1 No - 2	Code 1	50 USCA 403 J			F 2	08 27 51	
7. SCD	8. CSC Relat.			9. CSC Or Other Legal Authority	10. Appt. Alt/Adv.	11. TEGLI	12. LCD	13. Bill. Perfo. Pro.
Mo. Da. Yr.	Yes - 1 No - 2	Code 1	50 USCA 403 J	Mo. Da. Yr.	Yes - 1 No - 2	Code 08	Mo. Da. Yr.	Yes - 1 No - 2
04 02 51							08 27 51	2

PREVIOUS ASSIGNMENT

14. Organizational Designations			Code	15. Location Of Official Station			Station Code
DDP WH BRANCH 111 MEXICO SECTION			4613	WASH., D. C.			75013
16. Dept. - Field	17. Position Title			18. Position No.	19. Serv.	20. Occup. Series	
Dept - 2 USAd - 4 Frgn - 6	2. O. F1			0521	GS	0136.51	
21. Grade & Step	22. Salary Or Rate	23. SD	24. Date Of Grade	25. PSI Due	26. Appropriation Number		
11 4	\$ 7750	DI	Mo. Da. Yr. 04 10 55	Mo. Da. Yr. 04 06 58	8 3500 20		

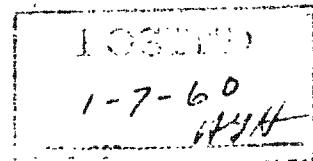
ACTION

27. Nature Of Action			Code	28. Eff. Date	29. Type Of Employee	Code	30. Separation Date
PROMOTION			30	Mo. Da. Yr. 12 13 59	REGULAR	01	

PRESENT ASSIGNMENT

31. Organizational Designations			Code	32. Location Of Official Station			Station Code
DDP WH BRANCH 111 MEXICO SECTION			4613	WASH., D.C.			75013
33. Dept. - Field	34. Position Title			35. Position No.	36. Serv.	37. Occup. Series	
Dept - 2 USAd - 4 Frgn - 6	OPS CFCR			0607	GS	0136.01	
38. Grade & Step	39. Salary Or Rate	40. SD	41. Date Of Grade	42. PSI Due	43. Appropriation Number		
12 1	\$ 8330	DI	12 13 59	06 11 61	0235 1000 1000		

44. Remarks



SECRET
(WHEN FILLED IN)

1. EMP. SERIAL NO.		2. NAME <i>(WHICH IS FILLED IN)</i>					3. ASSIGNED ORGAN.			4. FUNDS		5. ALLOTMENT		
107667		ZEMPIUNG CHARLOTTE					DDP/WH 3			V-20		31		
6. OLD SALARY RATE							7. NEW SALARY RATE							
GRADE	STEP	SALARY	LAST EFFECTIVE DATE				GRADE	STEP	SALARY	EFFECTIVE DATE				
			MO	DA	YR					MO	DA	YR		
GS 11	3	\$ 7,510	04	06	58		GS 11	4	\$ 7,750	10	04	59		
TO BE COMPLETED BY THE OFFICE OF COMPTROLLER														
8. CHECK ONE							9. NUMBER OF HOURS LWOP							
<input checked="" type="checkbox"/> NO EXCESS LWOP <input type="checkbox"/> EXCESS LWOP														
IF EXCESS LWOP, CHECK FOLLOWING:														
<input type="checkbox"/> IS PAY STATUS AT END OF WAITING PERIOD							10. INITIALS OF CLERK							
<input type="checkbox"/> IR-LWOP STATUS AT END OF WAITING PERIOD							11. AUDITED BY							
TO BE COMPLETED BY THE OFFICE OF PERSONNEL														
12. TYPE OF ACTION							13. REMARKS							
<input type="checkbox"/> P.S.I. <input type="checkbox"/> L.S.I. <input type="checkbox"/> PAY ADJUSTMENT														
14. AUTHENTICATION														
<i>65-11283-07-13</i>														
G. H. B. REPORT														
PAY CHANGE NOTIFICATION														

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560 OBSOLETE PREVIOUS EDITION
REPLACES PAGES 560a AND 560b

SECRET

OFFICIAL PERSONNEL FOLDER

IN LIEU OF FORM 1150 THIS NOTIFICATION EFFECTS RESЛОTTING RESULTING
FROM R-20-250

SER #	NAME	SD	OLD SLOT	NEW SLOT	DATE
107867	ZEHDRUHE CHARLOTTE	01	0521	321	04/28/80

S E C O N D

GENERAL SCHEDULE SALARY INCREASE RETROACTIVELY EFFECTIVE
162 AND REC

GENERAL SCHEDULES SALARY INCREASE
SUMMARY 1959 AUTHORIZED BY P. L. 85 - 462 AND PCS

12 JANUARY 1958 AUTHORIZED IN
DIRECTIVE. SALARY AS OF 15 JUNE 1958 ADJUSTED AS FOLLOWS

NAME	SERIAL	GRADE-STEP	OLD SALARY	NEW SALARY
ZEHRUNG CHARLOTTE	107667	GS-11-3	\$ 6,820	\$ 7,510

GORDON M. STEWART
DIRECTOR OF PERSONNEL

SECRET

SECRET
(When Filled In)

NOTIFICATION OF PERSONNEL ACTION

MCM 3 APRIL 58

1. Serial No.	2. Name (Last-First-Middle)			3. Date Of Birth	4. Vet. Prof.	5. Sex	6. CS - EOD
107667	ZEHRLING CHARLOTTE			Mo. Da. Yr. 01 12 29	None-0 5 Pt-1 10 Pt-2	O F 2	Mo. Da. Yr. 08 27 51
7. SCD	8. CSC Recd.			9. CSC Or Other Legal Authority	10. Apmt. Affidav.	11. FEGLI	12. LCD
Mo. Da. Yr. 04 02 51	Yes-1 No-2	Code 1	50 USCA 403			Mo. Da. Yr. 08 27 51	Yes-1 No-2

PREVIOUS ASSIGNMENT

14. Organizational Designations			Code	15. Location Of Official Station			Station Code
DDP WH BRANCH 111 MEXICO SECTION			4613	WASH D C			75013
16. Dept. - Field	17. Position Title			18. Position No.	19. Serv.	20. Occup. Series	
Dept - 2 USMrd - 4 Frqn - 6	Code 2	REPORTS OFF			0072.01	GS	0132.44
21. Grade & Step	22. Salary Or Rate	23. SD	24. Date Of Grade	25. PSI Due	26. Appropriation Number		
11 2	\$ 6605	D1	Mo. Da. Yr. 04 10 55	Mo. Da. Yr. 04 06 58	8 3500 20		

ACTION

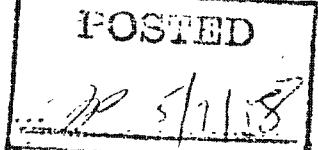
27. Nature Of Action	Code	28. Eff. Date	29. Type Of Employee	Code	30. Separation Data
REASSIGNMENT	56	Mo. Da. Yr. 04 03 58	REGULAR	01	

PRESENT ASSIGNMENT

31. Organizational Designations			Code	32. Location Of Official Station			Station Code
DDP WH BRANCH 111 MEXICO SECTION			4613	WASH D C			75013
33. Dept. - Field	34. Position Title			35. Position No.	36. Serv.	37. Occup. Series	
Dept - 2 USMrd - 4 Frqn - 6	Code 2	I.O. FI			0521	GS	0136.51
38. Grade & Step	39. Salary Or Rate	40. SD	41. Date Of Grade	42. PSI Due	43. Appropriation Number		
11 2	\$ 6605	D1	Mo. Da. Yr. 04 10 55	Mo. Da. Yr. 04 06 58	8 3500 20		

44. Remarks

POSTED



SECRET
(When Filled In)

NOTIFICATION OF PERSONNEL ACTION

MYL

1. Serial No.	2. Name (Last-First-Middle)			3. Date Of Birth	4. Vol. Prof.	5. Ser.	6. CS - COD
107667	ZEHRUNG CHARLOTTE			Mo. Da. Yr.	None-O 5 Pt-1 10 Pt-2	Code 0 0 27 0	Mo. Da. Yr.
7. SCD	8. CSC Retmt.	9. CSC Or Other Legal Authority	10. Apmt. Affidav.	11. FECU	12. LCD	13. <small>Min. Service Ldg.</small>	
Mo. Da. Yr. 04 02 51	Yes - 1 No - 2	Code 1 1	Mo. Da. Yr. Yes-1 No-2	Code 03 27 51	Mo. Da. Yr. 08 27 51	Yes - 1 No - 2	Code 2 2
50 USCA 403 J							

PREVIOUS ASSIGNMENT

14. Organizational Designations			Code	15. Location Of Official Station			Station Code
DDP WH BRANCH 11				WASH D C			
16. Dept. - Field	17. Position Title			18. Position No.	19. Serv.	20. Occup. Series	
Dept - 2 Usfld - 4 Frpn - 6	Code 2 2	REPORTS OFFICER			313	GS	0132.44
21. Grade & Step	22. Salary Or Rate	23. SD	24. Date Of Grade	25. PSI Due	26. Appropriation Number		
11 2	\$ 6605	DI	Mo. Da. Yr. 04 110 155	Mo. Da. Yr. 04 106 158	8 3500 20		

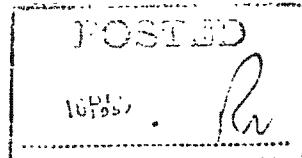
ACTION

27. Nature Of Action	Code	28. Eff. Date	29. Type Of Employee	Code	30. Separation Data
REASSIGNMENT	56	Mo. Da. Yr. 12 01 57	REGULAR	01	

PRESENT ASSIGNMENT

31. Organizational Designations			Code	32. Location Of Official Station			Station Code
DDP WH BRANCH 111 MEXICO SECTION			4613	WASH D C			75013
33. Dept. - Field	34. Position Title			35. Position No.	36. Serv.	37. Occup. Series	
Dept - 2 Usfld - 4 Frpn - 6	Code 2 2	REPORTS OFF			0072,01	GS	0132.44
38. Grade & Step	39. Salary Or Rate	40. SD	41. Date Of Grade	42. PSI Due	43. Appropriation Number		
11 2	\$ 6605	DI	Mo. Da. Yr. 04 110 155	Mo. Da. Yr. 04 106 158	8 3500 20		

44. Remarks



SECRET
CLASSIFICATION

FITNESS REPORT

SECTION A		GENERAL INFORMATION						
1. EMPLOYEE NUMBER 007667	2. NAME (Last, first, middle) Bustos-Videla, Charlotte Z.	3. DATE OF BIRTH 12 Jan 29	4. SEX F	5. GRADE GS-13	6. SD D	7. OFFICIAL POSITION TITLE Operations Officer	8. OFF. DIV./BR. OF ASSIGNMENT DDO/WH/1	9. CURRENT STATION 10. HQ CO
11. TYPE OF APPOINTMENT				12. TYPE OF REPORT				
CAREER	RESERVE	CONTRACT	OTHER (SPEC.)	TEMPORARY	ANNUAL	REASSIGN. MENT	SPECIAL	
13. REPORTING PERIOD (From-to) JMX 1 August 1972 - 30 April 1973				14. DATE REPORT DUE IN O.P. 1 May 1973				
SECTION B		QUALIFICATIONS UPDATE						
If QUALIFICATIONS UPDATE FORM IS BEING SUBMITTED WITH CHANGES, AND IS ATTACHED TO THIS REPORT, PLACE THE WORD "YES" IN THE BOX TO THE RIGHT. IF NO CHANGES ARE REQUIRED, PLACE THE WORD "NO" IN THE BOX AT RIGHT.								
SECTION C		PERFORMANCE EVALUATION						
<u>U</u> - <u>Unsatisfactory</u>	Performance is unacceptable. A rating in this category requires immediate and 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 D.							
<u>M</u> - <u>Marginal</u>	Performance is deficient in some aspects. The reasons for assigning this rating should be stated in Section D and remedial actions taken or recommended should be described.							
<u>P</u> - <u>Proficient</u>	Performance is satisfactory. Desired results are being produced in the manner expected.							
<u>S</u> - <u>Strong</u>	Performance is characterized by exceptional proficiency.							
<u>O</u> - <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.							
SPECIFIC DUTIES								
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	Functions as Chief of the WH/1/SA and Cuba Section, supervising one case officer, one IA and one secretary.							RATING LETTER S
SPECIFIC DUTY NO. 2	Analyzes all traffic pertaining to Branch and Station SA and Cuban Operations, performs all operational support, project actions, correspondence, coordination, memoranda and file maintenance.							RATING LETTER O
SPECIFIC DUTY NO. 3	Prepares studies, file analyses and special reports such as budget and program call and correspondence with the White House.							RATING LETTER O
SPECIFIC DUTY NO. 4								RATING LETTER
SPECIFIC DUTY NO. 5								RATING LETTER
SPECIFIC DUTY NO. 6								RATING LETTER
OVERALL PERFORMANCE IN CURRENT POSITION								
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	

CLASSIFICATION

SECTION D

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 C by providing best basis for determining future personnel action. Manner of performance of managerial or supervisory duties and cost consciousness in the use of personnel, space, equipment and funds must be commented on, if applicable. If extra space is needed to complete Section D, attach a separate sheet of paper.

In the 8 months during which she was under my supervision, Mrs. Bustos has performed in that same hard-working, highly-productive style which has become her trademark over the years. She understands the intelligence process from start to finish and is personally experienced with each step along the way, save the agent handling aspects. She excels in each phase of the work.

As chief of the Branch SA and Cuban activities section, she has once again demonstrated her mastery over her assigned duties. She is a sound, dependable, yet imaginative and energetic operations officer, whose performance leaves little to be desired. While she had had little previous supervisory experience, she has in this assignment demonstrated exemplary supervisory ability. Notwithstanding her drive, tenacity and attention to detail, she is a popular co-worker, is receptive to guidance and is sensitive to, and responsive to the needs of her subordinates.

In her performance of specific duty No. 2, she has brought to bear upon her daily duties her broad experience, high intelligence and good operational sense, functioning with practically no need of close supervision. It is comforting to know that an assignment given to this employee is always done promptly, professionally and cheerfully.

Her adaptability was demonstrated in her specific duty No. 3. Despite the press of normal daily activity, she was often called upon to produce "crash"

(continued)

SECTION E

CERTIFICATION AND COMMENTS

1. BY EMPLOYEE

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

DATE

21 May 1973

SIGNATURE OF EMPLOYEE

Clementine J. [Signature]

2. BY SUPERVISOR

MONTHS EMPLOYEE HAS BEEN
UNDER MY SUPERVISION

8

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

DATE

OFFICIAL TITLE OF SUPERVISOR

TYPE

21 May 1973

DC/WH/1

3. BY REVIEWING OFFICIAL

COMMENTS OF REVIEWING OFFICIAL The rater has written an accurate and thorough evaluation of Mrs. Bustos. I concur without reservation in the ratings provided subject. She is an exceptional officer. Her ability to perform a variety of assignments in Headquarters and the Field has measured up to an outstanding record. Her work with subordinates clearly indicate she is a good supervisor. Mrs. Bustos performs all facets of her work in an exemplary manner and in my judgement rates in the upper percentile in the A Category.

DATE

OFFICIAL TITLE OF REVIEWING OFFICIAL

21 May 1973

C/WH/1

CLASSIFICATION
SECRET

- 2 -

Narrative Comments (continued): (Charlotte Z. Bustos-Videla)

papers for the Branch because of her innate talents and established reliability. She never failed to impress her supervisor with her production, writing ability and energy. Her overall performance is clearly in excess of her grade level.

In terms of true cost and security-consciousness, she must also be considered very strong because she has a positive and aggressive attitude towards these subjects. It is with deep regret that the Branch parts with this employee who now moves up to the Division front office staff.

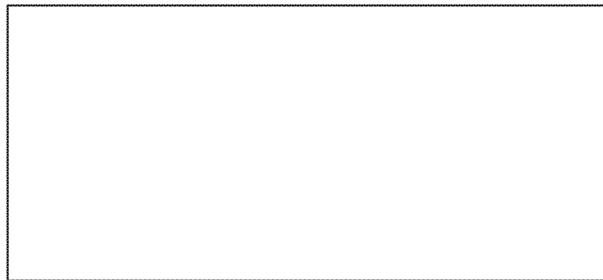
C-O-N-F-I-D-E-N-T-I-A-L

Covert Action Operations Seminar No. 2-73
35 hours, full time

Participant : Bustos-Videla, Charlotte Office : WH
Year of Birth: 1929 Service Designation: D
Grade : GS-13 No. of Students : 20
EOD Date : 08/51

COURSE OBJECTIVES, CONTENT AND METHODS

The objective of the Seminar is to give the participant a familiarization with the major fields of covert action. These are viewed as:



The Seminar includes a discussion of the "political animal" and an analytical look at the political personality.

The technique of instruction is one of talks by Operations Officers experienced in various specific kinds of operation, followed by questions and discussion. Participants are encouraged and expected to ask questions and engage in the discussions, drawing upon and relating their experience to that under discussion. One of the important values to be gained from the Seminar is this exchange of experience.

ACHIEVEMENT RECORD

This is a certificate of attendance. No further assessment of individual capacity or performance is made in this course.

FOR THE DIRECTOR OF TRAINING:



2/21/73
Date

Chief Instructor

C-O-N-F-I-D-E-N-T-I-A-L

CONFIDENTIAL

TRAINING REPORT

Midcareer Course No. 34

Student : Bustos-Videla, Charlotte Date : 11/5-12/22/72
Year of Birth: 1929 Office : WH/1
Grade : 13 Service Designation: D
No. of Students : 30

COURSE OBJECTIVES -- CONTENT AND METHODS

The Midcareer Course is designed to enable potential executive officers to develop and widen their understanding of management practices, of the Agency and the Intelligence Community, and of the Government's involvement in international affairs.

The Course consists of three major segments of varying lengths. The topics covered through lectures, seminars, group discussions and field trips are:

1. Effective managerial behavior as derived through study of the Managerial Grid.
2. The functions, relationships and problems of various Agency components and of members of the Intelligence Community.
3. Selected elements of national power and current developments in key international affairs.

ACHIEVEMENT RECORD

No evaluation of the student is made during the Course, and no final grade is given upon course completion.

FOR THE DIRECTOR OF TRAINING:

	22 DEC 1972
	Date
Midcareer Course Chairman	

Classified by: 17-1626
EX-2, APDCI,
WSISM

CONFIDENTIAL

SECRET
(When Filled In)

FITNESS REPORT				EMPLOYEE SERIAL NUMBER	
				007667	
SECTION A					
1. NAME BuSTON-Videla, Charlotte Z.			2. DATE OF BIRTH 12 Jan 29	3. SEX F	4. GRADE GS-13
5. OFFICIAL POSITION/TITLE Operations Officer			6. OFF/DIV/BR OF ASSIGNMENT DDP/WH/1	7. CURRENT STATION Mexico City	
8. CHECK (X) TYPE OF APPOINTMENT <input checked="" type="checkbox"/> CAREER <input type="checkbox"/> RESERVE <input type="checkbox"/> TEMPORARY CAREER=PROVISIONAL (See Instructions - Section C)			9. CHECK (X) TYPE OF REPORT <input checked="" type="checkbox"/> INITIAL <input type="checkbox"/> ANNUAL SPECIAL (Specify) 10. REPORTING PERIOD (From To) 1 January - 31 July 1972		
11. REASSIGNMENT SUPERVISOR REASSIGNMENT EMPLOYEE					
12. SPECIAL (Specify)					
13. DATE REPORT DUE IN O.P.					
SECTION B					
PERFORMANCE EVALUATION					
<p>D-U-Inadequate Performance is unacceptable. A rating in this category requires immediate and 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>D-Marginal Performance is deficient in some aspects. The reasons for assigning this rating should be stated in Section C and remedial actions taken or recommended should be described.</p> <p>P-Fair Performance is satisfactory. Desired results are being produced in the manner expected.</p> <p>S-Good Performance is characterized by exceptional proficiency.</p> <p>O-Outstanding 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>					
SPECIFIC DUTIES					
<p>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).</p>					
SPECIFIC DUTY NO. 1 Prepares operational target studies on PBRUMEN officials and assists in the planning of operations against these targets.				RATING LETTER O	
SPECIFIC DUTY NO. 2 Screens all agent and technical reports dealing with PBRUMEN targets for operational and positive information and puts in retrievable form.				RATING LETTER S	
SPECIFIC DUTY NO. 3 Assists Case Officers in preparation of operational reports by doing all basic research such as tracing and file reviews and presents the results in exploitable form.				RATING LETTER O	
SPECIFIC DUTY NO. 4 Prepares draft intelligence reports from raw agent reports, technical operations and defector debriefings.				RATING LETTER O	
SPECIFIC DUTY NO. 5 OOA/UT&O Project Officer				RATING LETTER S	
SPECIFIC DUTY NO. 6 Management of the PBRUMEN section files.		12 OCT 1972		RATING LETTER S	
OVERALL PERFORMANCE IN CURRENT POSITION					
<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 one letter in the rating box corresponding to the statement which most accurately reflects his level of performance.</p>					
RATING LETTER S					

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 and cost consciousness in the use of personnel, space, equipment and funds must be commented on, if applicable. If extra space is needed to complete Section C, attach a separate sheet of paper.

In reviewing my previous fitness report and those of my predecessors, on this fine officer, I find myself hard put not to repeat what has been said so often before. She has been the backbone of this section and of those where she has worked previously. Her work has always shown excellent judgement and ingenuity. A self-starter with tremendous drive and discipline, the amount of work she has produced has been prodigious. An excellent team worker, she has never shirked when as so often happens - she is asked to take on additional work or work on a matter outside of her regular field. While forceful, she is diplomatic and tactful and is able to present suggestions and criticisms in a pleasant manner. She is one of the most dedicated persons I have met in the Organization, and exceptionally dependable. While, as a woman and a Specialist, she has had little opportunity to handle agents she has done very well with those we have given her to handle. She has showed great ability in the training of two transcribers and in the debriefing of two female agents and their husbands. This is in large part due to her in-depth knowledge of the targets this section is working on. The past few months have been difficult, requiring the complete reorganization of this Section and the termination of the majority of our assets. Under this stress, she has performed in her usual outstanding manner. Perhaps, even a little better. Her handling of a great deal of file work has been excellent, probably in part because she was the one who set it up and has maintained it in its present very good state.

(continued)

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

7 Aug 1972

/s/ Charlotte Z. Bustos-Videla

2.

BY SUPERVISOR

MONTHS EMPLOYEE HAS BEEN
UNDER MY SUPERVISION

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

DATE

OFFICIAL TITLE OF SUPERVISOR

TYPED OR PRINTED NAME AND SIGNATURE

7 August 1972

Operations Officer

/s/

3.

BY REVIEWING OFFICIAL

COMMENTS OF REVIEWING OFFICIAL

Without any hesitation I concur with the outstanding ratings above. Subject is now up for rotation and we will miss her immensely. For years she has dedicated her entire time to her job which she has done so well. She has been creative, thorough and accurate. Although she has not had supervisory experience at this station, she has performed in a manner which clearly reflects that she would have no problem with supervising. A truly outstanding employee with growth potential.

DATE

OFFICIAL TITLE OF REVIEWING OFFICIAL

TYPED OR PRINTED NAME AND SIGNATURE

7 Aug 1972

DCOS

/s/ BRADLEY N. BUCKNER

SECRET

SECRET

(CONTINUED)

SECTION C NARRATIVE COMMENTS

The one criticism of this Officer's work that I and others have made in the past still stands. She tries to do everything and somethings in this business just don't deserve the attention she gives them.

I have no personal knowledge of her supervisor abilities, but believe she is a natural leader.

SECRET

SECRET

(When Filled In)

FITNESS REPORT				EMPLOYEE SERIAL NUMBER 007667		
SECTION A						
GENERAL						
1. NAME (Last) (First) (Middle)	2. DATE OF BIRTH	3. SEX	4. GRADE	5. SD		
Bustos-Videla, Charlotte Z.	12 Jan 29	F	GS-13	D		
6. OFFICIAL POSITION TITLE Operations Officer	7. OFF/DIV/BR OF ASSIGNMENT DDP/WH/1	8. CURRENT STATION Mexico City				
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	INITIAL	REASSIGNMENT SUPERVISOR		
CAREER-PROVISIONAL (See Instructions - Section C)			XX ANNUAL	REASSIGNMENT EMPLOYEE		
SPECIAL (Specify)			SPECIAL (Specify)			
11. DATE REPORT DUE IN O.P.			12. REPORTING PERIOD (From: To) January 1971 - December 1971			
SECTION B PERFORMANCE EVALUATION						
<p>U-Unsatisfactory Performance is unacceptable. A rating in this category requires immediate and 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>M-Marginal Performance is deficient in some aspect. The reasons for assigning this rating should be stated in Section C and remedial actions taken or recommended should be described.</p> <p>P-Proficient Performance is satisfactory. Desired results are being produced in the manner expected.</p> <p>S-Strong Performance is characterized by exceptional proficiency.</p> <p>O-Outstanding 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>						
SPECIFIC DUTIES						
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 Prepares operational target studies on PBRUMEN officials and assists in the planning of operations against these targets.						RATING LETTER O
SPECIFIC DUTY NO. 2 Screens all raw reports dealing with PBRUMEN targets for operational and positive intelligence.						RATING LETTER S
SPECIFIC DUTY NO. 3 Conducts name checks, file reviews, prepares finished memos, cables, and dispatches. Assists Case Officers in preparation of operational reports.						RATING LETTER O
SPECIFIC DUTY NO. 4 Prepares draft intelligence reports from raw agent reports, technical operations and defector debriefings.						RATING LETTER O
SPECIFIC DUTY NO. 5 Handles miscellaneous special projects for the Station; screening and routing to all sections daily audio take; operational reporting and project responsibility for COA/D&TO project.						RATING LETTER S
SPECIFIC DUTY NO. 6						RATING LETTER
OVERALL PERFORMANCE IN CURRENT POSITION						
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

SECRET

(Block 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 best basis for determining future personnel action. Mention of performance of managerial or supervisory duties and cost consciousness in the use of personnel, space, equipment and funds, must be considered, if applicable. If extra space is needed to complete Section C, attach a separate sheet of paper.

DE 27 8 55 mil
 This supervisor has worked with a variety of Intelligence Assistants. Many were good, but none compared with this Subject. She is the most thorough and fastest working IA I have met. Her capacity for hard work and long hours is prodigious. Her knowledge of operational matters is equal to that of most case officers. She has an operationally creative mind and has made many excellent suggestions for the improvement of the section's work. Additionally, her command of the Spanish language enhances all of the above abilities. This officer has found her very pleasant to work with. She has a unique ability to make constructive criticism in a tactful manner.

If this Subject has a weakness, it was pointed out by the reviewing officer in the last fitness report when he said, "in her voracious appetite for all kinds of facts (she) can at times put undue emphasis on them, including factual minutiae as against equally important but more elusive subjective factors.

Because of her outstanding performance and abilities the Subject will be given some activity handling agent personnel, during the forthcoming year.

The Subject's continued fine performance since her last promotion merits special consideration by the Promotion Board.

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 1971

/s/ Charlotte Z. Bustos-Videla

2.

BY SUPERVISOR

MONTHS EMPLOYEE HAS BEEN
UNDER MY SUPERVISION

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

DATE

OFFICIAL TITLE OF SUPERVISOR

TYPED OR PRINTED NAME AND SIGNATURE

9 December 1971

Ops Officer

/s/

3.

BY REVIEWING OFFICIAL

COMMENTS OF REVIEWING OFFICIAL

I concur with the above ratings and comments. Subject performs all the tasks outlined above in a very professional and methodical manner. One does not even sense that the work is going on until the finished product is produced. It is always excellent. We count heavily on her thoughts and ideas in all operational studies and considerations. She is ops oriented and has an excellent bank of information to call on when necessary. She is pleasant and has the respect of her co-workers as well as her supervisors. Her abilities are varied and she can be counted on to perform extremely well regardless of assignment or target. We will be losing this fine officer soon and we will be hard put to find someone who will be able to replace her.

DATE

OFFICIAL TITLE OF REVIEWING OFFICIAL

TYPED OR PRINTED NAME AND SIGNATURE

9 December 1971

Deputy Chief of Station

/s/

SECRET

SECRET
(Date Filled In)

FITNESS REPORT					EMPLOYEE SERIAL NUMBER 007667
SECTION A GENERAL					
1. NAME BUGTOS-VIDELA, CHARLOTTE Z.		(Middle)	2. DATE OF BIRTH 12 Jan. 29	3. SEX F	4. GRADE GS-13
5. OFFICIAL POSITION TITLE Operations Officer		6. OFFICER/NUMBER OF ASSIGNMENT DDP/WH/Br 1	7. CURRENT STATION Mexico City		
8. CHECK (X) TYPE OF APPOINTMENT <input checked="" type="checkbox"/> CAREER <input type="checkbox"/> RESERVE <input type="checkbox"/> TEMPORARY CAREER-PROVISIONAL (See Instructions - Section C) <input type="checkbox"/> SPECIAL (Specify):			9. CHECK (X) TYPE OF REPORT <input checked="" type="checkbox"/> INITIAL <input type="checkbox"/> ANNUAL <input type="checkbox"/> REASSIGNMENT SUPERVISOR REASSIGNMENT EMPLOYEE SPECIAL (Specify):		
10. DATE REPORT DUE IN O.P. 1 January - 31 December 1970			11. REPORTING PERIOD (From - To) 1 January - 31 December 1970		
SECTION B PERFORMANCE EVALUATION					
<p>U-Unsatisfactory Performance is unacceptable. A rating in this category requires immediate and 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>M-Marginal Performance is deficient in some aspects. The reasons for assigning this rating should be stated in Section C and remedial actions taken or recommended should be described.</p> <p>P-Proficient Performance is satisfactory. Desired results are being produced in the manner expected.</p> <p>S-Strong Performance is characterized by exceptional proficiency.</p> <p>O-Outstanding 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>					
SPECIFIC DUTIES					
<p>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).</p>					
SPECIFIC DUTY NO. 1 Prepares operational target studies on PBRUMEN officials of interest and helps in the preparation of operational planning re target personnel.					RATING LETTER O
SPECIFIC DUTY NO. 2 Screens the raw reports from technical operations and agents for operationally useful information.					RATING LETTER O
SPECIFIC DUTY NO. 3 Provides operational and administrative support for station PBRUMEN activities. This includes name checks, file reviews, preparation of memos, cables and dispatches, and helps in the preparation of project reports, outlines, and renewals.					RATING LETTER O
SPECIFIC DUTY NO. 4 Supervises the handling of the station PBRUMEN [] and in general [] of interest to and from PBRUMEN for our station, Headquarters and other stations.					RATING LETTER S
SPECIFIC DUTY NO. 5 Helps the station intelligence chief in the preparation of finished intelligence reports from a PBRUMEN [] (only part of the reporting period).					RATING LETTER S
SPECIFIC DUTY NO. 6 Handles miscellaneous special projects for the station in addition to her PBRUMEN duties (examples: organization of station [] screening certain raw reports for whole station, preparation of OOA/DIO project renewal).					RATING LETTER S
OVERALL PERFORMANCE IN CURRENT POSITION					
<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 O

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 best basis for determining future personnel action. Manner of performance of managerial or supervisory duties and cost consciousness in the use of personnel, space, equipment and funds must be commented on, if applicable. If extra space is needed to complete Section C, attach a separate sheet of paper.

Subject worked most of ~~April~~ ^{March} 1971 in the station PBRUMEN section. She was clearly outstanding in collating information from all sources during a recent intensified "PBRUMEN" month, determining as a result the [redacted] of the PBRUMEN mission here, spotting operational leads and updating target studies on all PBRUMEN officials as a result. Her final writeup regarding both new information obtained and the gaps that remain was thorough and useful.

Subject is extraordinarily rapid and efficient in researching for info, organizing files and other material and writing up any kind of resulting memo or dispatch. The same might be said perhaps of some other real pros in the IA field. However, in addition, Subject has a good, tough, operations-oriented mind and positively contributes ideas and suggestions re new operational techniques which the station has used profitably. Subject has natural managerial abilities as recently demonstrated in her organizing TDY help in a station-wide file and [redacted] in connection with [redacted]. Her Spanish is more than adequate for reading reports, and handling operational messages in that language. In sum, Subject is a tremendous station asset and would be extremely hard to replace without noting a serious loss in station efficiency.

-continued

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

5 March 1971

/s/ Charlotte P. Bustos-Videira

2.

BY SUPERVISOR

MONTHS EMPLOYEE HAS BEEN
UNDER MY SUPERVISION

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

DATE

OFFICIAL TITLE OF SUPERVISOR

TYPED OR PRINTED NAME AND SIGNATURE

5 March 1971

Operations Officer

/s/ [redacted]

3.

BY REVIEWING OFFICIAL

COMMENTS OF REVIEWING OFFICIAL

Although in my opinion there is an excessive use of "outstanding" by the rating officer, I am in accord with his narrative comments. Subject is definitely more than an IA and has performed as such when the station has required an individual with in-depth knowledge of station procedures, operational awareness combined with an ability to prepare studies in a short period of time. She's thorough, concise and rapid. One of our hardest workers and most dependable employees.

DATE

OFFICIAL TITLE OF REVIEWING OFFICIAL

TYPED OR PRINTED NAME AND SIGNATURE

25 March 1971

Deputy Chief of Station

/s/ [redacted]

SECRET

SECTION C**NARRATIVE COMMENTS****-continued**

Three rather personalized comments might add meaning to this fitness report. Anyone, particularly a female, fitting the above description of efficiency and achievement can be, and often is a little overbearing and difficult to work with as a person. Subject, withall, is a pleasant personality who knows how to make her contributions and comments in a forthright but tactful manner. Secondly, and this one is a little hard to say, Subject in her voracious appetite for all kinds of facts can at times put undue emphasis on them including factual minutiae as against equally important but more elusive subjective factors. Thirdly, this rating officer has personally observed Subject only working on station premises at an office job, and frankly has no idea how she might function in outside operational work [redacted]

~~SECRET//RIVBAT~~

MEMORANDUM FOR THE RECORD

CHARLOTTE BEATRICE VIOLETA

SUBJECT: Overall Outstanding Rating on [REDACTED]:
Method of Recognition

1. This memo is being written in accordance with paragraph three of Book Dispatch 5273 of 12 April 1966.
2. [REDACTED] was last granted a Quality Step Increase about a year ago in recognition of her very fine performance. It is a little early to repeat that kind of recognition even though it is a most logical and meaningful means to show recognition of her outstanding work.
3. Consideration should be given to an appropriate occasion in the fairly near future to grant another QSI to [REDACTED].

~~SECRET//RIVBAT~~

SECRET
(When Filled In)

FITNESS REPORT						EMPLOYEE SERIAL NUMBER 007667
SECTION A						
1. NAME BustoeVidela Charlotte Z			2. DATE OF BIRTH 12 Jan 29	3. SEX F	4. GRADE GS-13	5. SD D
6. OFFICIAL POSITION TITLE Ops Officer			7. OFF/DIV/BR OF ASSIGNMENT DDP/MH/Branch 1		8. CURRENT STATION Mexico City	
9. CHECK (X) TYPE OF APPOINTMENT			10. CHECK (X) TYPE OF REPORT			
CAREER	RESERVE	TEMPORARY	INITIAL	REASSIGNMENT SUPERVISOR		
CAREER-PROVISIONAL (See Instructions - Section C)			X	ANNUAL	REASSIGNMENT EMPLOYEE	
SPECIAL (Specify):			SPECIAL (Specify):			
11. DATE REPORT DUE IN O.P. 28 February 1970			12. REPORTING PERIOD (From - to) 1 August 1969 - 31 December 1969			
SECTION B PERFORMANCE EVALUATION						
W - Weak	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.					
A - Adequate	Performance meets all requirements. It is entirely satisfactory and is characterized neither by deficiency nor excellence.					
P - Proficient	Performance is more than satisfactory. Desired results are being produced in a proficient manner.					
S - Strong	Performance is characterized by exceptional proficiency.					
O - Outstanding	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.					
SPECIFIC DUTIES						
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 Completo reorganization o^f Station files, including development of new procedures, revision of file categories, consolidation, purging and destruction.						RATING LETTER O
SPECIFIC DUTY NO. 2 Provides overall guidance to Station and TDY personnel engaged in reorganization of Station files. Supervision of Secretary-Receptionist..						RATING LETTER S
SPECIFIC DUTY NO. 3 Special assistance to COS/DCOS in revamping the paper flow within the Station and between the Station and other Government agencies.						RATING LETTER S
SPECIFIC DUTY NO. 4 Preparation of special studies for the COS/DCOS concerning the effectiveness of Station paper handling procedures, personnel economies related thereto and the improvement of Station						RATING LETTER
SPECIFIC DUTY NO. 5 utilization of manpower, space and funds as a result of the reorganization of Station Registry functions and personnel.						RATING LETTER S
SPECIFIC DUTY NO. 6 <i>[Handwritten Note: 1/2]</i>						RATING LETTER
OVERALL PERFORMANCE IN CURRENT POSITION						
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

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 best basis for determining future personnel actions. Manner of performance of managerial or supervisory duties and cost consciousness in the use of personnel, space, equipment and funds, must be commented on, if applicable. If extra space is needed to complete Section C, attach a separate sheet of paper.

In July 1969 Subject was transferred from the Cuba Section to the Station front office to serve as an executive assistant to the COS with special responsibility for ensuring that the paper flow of the Station remained under effective control during the period of transition resulting from the assignment here of several senior officers. This transition period necessitated or gave rise to a number of changes in the management and administrative areas of the Station. Subject's performance in this assignment under these circumstances was clearly outstanding. Her sound judgement, imagination and responsiveness to guidance not only contributed to maintaining the stability and momentum of the Station but also made possible an early effort to come to grips with many of the problems which an inflated Registry and a highly distinctive records system created for the new Station management team.

During the ensuing six month period, Subject has recommended and implemented a number of changes which have produced a more effective and less costly records system. Paper holdings have been reduced substantially, input has been reduced and now conforms to basic CS procedures and requirements. Personnel savings have been effected and supervisory responsibilities more clearly delineated.

To sum up, Subject has made and continues to make a major contribution in a singularly unsensational area of Station activity. Her advice is sought and appreciated not only by the COS and myself, but by other

(CONTINUED)

SECTION D

CERTIFICATION AND COMMENTS

BY EMPLOYEE

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

DATE

SIGNATURE OF EMPLOYEE

15 January 1970

/s/ Charlotte Bustos-Videla

2.

BY SUPERVISOR

MONTHS EMPLOYEE HAS BEEN
UNDER MY SUPERVISION

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

6 months

DATE

OFFICIAL TITLE OF SUPERVISOR

TYPED OR PRINTED NAME AND SIGNATURE

15 January 1970

DOOS

/s/

3.

BY REVIEWING OFFICIAL

COMMENTS OF REVIEWING OFFICIAL It would be difficult to overstate the contribution made by Subject to this Station during the past six month period, and I concur fully in the ratings and comments of the Rating Officer. I might add that Subject is one of the more versatile, conscientious and productive employees with whom I have worked in this organization, and that in addition to the administrative/management role outlined above, continued to provide valuable operational/analytical assistance to the Cuban and other operational sections of the Station. The initiative and imagination shown by Subject in the very complicated administrative management assignment have been particularly commendable and her complete familiarity with the country, the language, and the background of the Station has been invaluable during this period of change.

DATE

COS

/s/

SECRET

SECRET/RYBAT

- 2 -

SECTION C

NARRATIVE COMMENTS

CONTINUED

personnel who appreciate her personal and professional qualities.

Subject is aware that her current assignment is an unusual one and that she soon may have worked herself out of her current job. Since she speaks fluent Spanish, has a unique ability to get along with people and to get things done, there will be no problem in assigning her back into a position more closely supporting operations. Our operations are certain to benefit thereby.

SECRET/RYBAT

(This is a filled-in form)					
FIT SS REPORT				EMPLOYEE SERIAL NUMBER 007667	
SECTION A					
GENERAL					
1. NAME (Last) (First) (Middle) BUSTOSVIDELA, Charlotte Z.			2. DATE OF BIRTH 12 Jan 29	3. SEX F	4. GRADE 13
5. OFFICIAL POSITION TITLE Ops Officer			6. OFF/ DIV/ BR OF ASSIGNMENT DDP/ WH/ FF/ 1	7. CURRENT STATION Mexico City	
8. CHECK (X) TYPE OF APPOINTMENT <input checked="" type="checkbox"/> CAREER <input type="checkbox"/> RESERVE <input type="checkbox"/> TEMPORARY <small>CAREER=PROVISIONAL (See instructions - Section C)</small>			9. CHECK (X) TYPE OF REPORT <input type="checkbox"/> INITIAL <input checked="" type="checkbox"/> ANNUAL <input type="checkbox"/> SPECIAL (Specify): <small>SPECIAL (Specify):</small>		
10. DATE REPORT DUE IN O.P. October 1969			11. REPORTING PERIOD (From- To) March to August 1969.		
SECTION B PERFORMANCE EVALUATION					
<p>W - Weak 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 - Adequate Performance meets all requirements. It is entirely satisfactory and is characterized neither by deficiency nor excellence.</p> <p>P - Proficient Performance is more than satisfactory. Desired results are being produced in a proficient manner.</p> <p>S - Strong Performance is characterized by exceptional proficiency.</p> <p>O - Outstanding 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>					
SPECIFIC DUTIES					
<p>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).</p>					
SPECIFIC DUTY NO. 1 Until she was called to other duties in the front office of the Station, did analysis on PBRUMEN targets of Station interest, collated information and prepared studies. VC40					RATING LETTER O
SPECIFIC DUTY NO. 2 Screened the raw product of several technical operations and processed intelligence and operational information in close cooperation with [] full time senior [] transcribers whom she handled completely.					RATING LETTER O
SPECIFIC DUTY NO. 3 Handled the Station PBRUMEN [] and [] program, and reported [] information to WCFIRM Stations and other customers.					RATING LETTER S
SPECIFIC DUTY NO. 4 Provided operational support (file checks, operational reviews, liaison memoranda, etc.) for various Station activities.					RATING LETTER S
SPECIFIC DUTY NO. 5 Contributed to the preparation of monthly summaries and project reporting (outlines, renewals, etc.)					RATING LETTER O
SPECIFIC DUTY NO. 6 Handled special projects for the Station in addition to her PBRUMEN duties.					RATING LETTER O
OVERALL PERFORMANCE IN CURRENT POSITION					
<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. This most accurately reflects his level of performance.</p>					RATING LETTER O

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 best basis for determining future personnel action. Manager of performance of managerial or supervisory duties and cost consciousness in the use of personnel, space, equipment and funds must be commented on, if applicable. If extra space is needed to complete Section C, attach a separate sheet of paper.

Subject's performance continued during the period under review to deserve high praise. Her enormous appetite for work, her attention to detail, her ability to absorb and digest enormous files and complicated cases, her professionalism and devotion to the duties entrusted to her really deserve the rating of outstanding. Subject speaks good Spanish, has considerable initiative, much experience in analytic work and a genuine talent for administrative work.

In view of her past performance, her record at the Station and her potential, Subject who was recommended for promotion to the GS-14 level should be promoted as soon as possible.

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

1 August 1969 Charlotte Z. Bustosvidela (signed)

2. **BY SUPERVISOR**

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

DATE	OFFICIAL TITLE OF SUPERVISOR	TYPED OR PRINTED NAME AND SIGNATURE
1 August 1969	Ops. Officer	(signed)

3. **BY REVIEWING OFFICIAL**

COMMENTS OF REVIEWING OFFICIAL

Subject is indeed an exceptional officer who is highly deserving of the foregoing ratings and related accolades. In her new role as executive assistant to the COS she has been invaluable during the difficult and complicated transition from the old regime to the new, and the related reorganization of the Station. Her organizational abilities are unsurpassed by anyone known to the undersigned, and she certainly merits consideration for early promotion.

DATE	OFFICIAL TITLE OF REVIEWING OFFICIAL	TYPED OR PRINTED NAME AND SIGNATURE
1 August 1969	Chief of Station	

SECRET

SECRET
(Blank Filled In)

Reviewed by OP/PD/EAB

FITNESS REPORT				EMPLOYEE SERIAL NUMBER	
				007667	
SECTION A					
1. NAME (Last) (First) (Middle)			2. DATE OF BIRTH	3. SEX	4. GRADE
Bustos-Videla, Charlotte			12 Jan 1929	F	GS-13 D
5. OFFICIAL POSITION TITLE			6. OFF/ DIV/ BR OF ASSIGNMENT	7. CURRENT STATION	
Ops Officer			DDP/WH/1	Mexico City	
8. CHECK (X) TYPE OF APPOINTMENT			9. CHECK (X) TYPE OF REPORT		
<input checked="" type="checkbox"/>	CAREER	RESERVE	TEMPORARY	INITIAL	REASSIGNMENT SUPERVISOR
CAREER-PROVISIONAL (See Instructions - Section C)			<input checked="" type="checkbox"/>	ANNUAL	REASSIGNMENT EMPLOYEE
SPECIAL (Specify)			SPECIAL (Specify)		
11. DATE REPORT DUE IN O.P.			12. REPORTING PERIOD (From - To)		
			January 1968 - March 1969		
SECTION B					
PERFORMANCE EVALUATION					
<p>W - Weak 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 counselling, to further training, to placing on probation, to reassignment or to separation. Describe action taken or proposed in Section C.</p> <p>A - Adequate Performance meets all requirements. It is entirely satisfactory and is characterized neither by deficiency nor excellence.</p> <p>P - Proficient Performance is more than satisfactory. Desired results are being produced in a proficient manner.</p> <p>S - Strong Performance is characterized by exceptional proficiency.</p> <p>O - Outstanding 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>					
SPECIFIC DUTIES					
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 Handles Station PBRUNEN [] and [] program and reports [] information to WOFIRM stations and other customers					RATING LETTER S
SPECIFIC DUTY NO. 2 Screens the raw product of several [] operations and processes intelligence and operational information in close cooperation with [] full time senior transcribers whom she handles completely					RATING LETTER O
SPECIFIC DUTY NO. 3 Does analysis on targets of Station interest, collates information and prepares studies					RATING LETTER O
SPECIFIC DUTY NO. 4 Contributes to the preparation of monthly summaries and project reporting (outlines, renewals, etc.)					RATING LETTER O
SPECIFIC DUTY NO. 5 Provides operational support (file, checks, operational reviews, liaison memoranda, etc. for various Station activities					RATING LETTER S
SPECIFIC DUTY NO. 6					RATING LETTER
OVERALL PERFORMANCE IN CURRENT POSITION					
Take into account everything about the employee which influences his effectiveness in his current position such as performance of specific duties, responsibility, 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 O

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 and supervisory duties and cost consciousness in the use of personnel, space, equipment and funds must be commented on, if applicable. If biography is needed to complete Section C attach a separate sheet of paper.

Subject's performance during the period of over one year under review continued to deserve the rating of Outstanding. Her major contributions during that period were in the fields of operational research and exploitation of information obtained through technical means. She was, during this period, given full responsibility for the handling of two full time senior transcribers including administrative matters. In view of the difficulty of [redacted] personnel the task of fully exploiting information obtained from technical sources is of great importance. Subject handled this task with her usual enormous capability for work, displaying initiative and great professionalism. She continued, in addition, to handle the other tasks listed in this report together with sensitive reporting sent by a separate channel, altogether a much heavier workload than is usually carried by one person. She was helped in this by her good knowledge of Spanish, a talent for administrative work, considerable analytic experience and great devotion to her work. Subject should be considered for promotion to the grade of GS-14 at the first opportune moment.

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

3 April 69

Charlotte Bustos-Yidela /s/

2.**BY SUPERVISOR**MONTHS EMPLOYEE HAS BEEN
UNDER MY SUPERVISION

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

19 months

DATE

OFFICIAL TITLE OF SUPERVISOR

TYPED OR PRINTED NAME AND SIGNATURE

3 April 69

Ops. Officer

/s/

3.**BY REVIEWING OFFICIAL**

COMMENTS OF REVIEWING OFFICIAL

The reviewing officer fully agrees with the ratings and comments of the rating officer. Subject consistently performs her duties in an outstanding manner, bringing to her job truly exceptional qualities of intelligence, reliability, and good humor. She is one of the most valuable employees in the Station, and the recommendation for her promotion from GS-13 to GS-14 is fully and enthusiastically endorsed.

DATE	OFFICIAL TITLE OF REVIEWING OFFICIAL	TYPED OR PRINTED NAME AND SIGNATURE
3 April 69	COS,	Winston Scott /s/

SECRET

SF 174-1000-1-1-1-1

S-E-C-R-E-T

TRAINING REPORT

Soviet Bloc Operations Course No. 3
80 hours, full time

5 - 16 June 1967

Student : BUSTOS-VIDELA, Charlotte Office : DDP/WH
Year of Birth: 1929 Service Designation: D
Grade : GS-13 No. of Students : 34
EOD Date : August, 1951

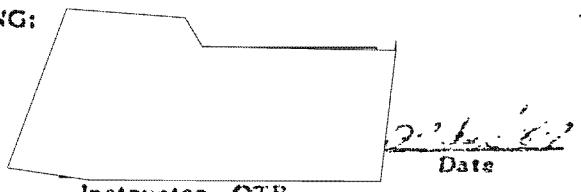
COURSE OBJECTIVES

To orient the student on the special nature of the Clandestine Services'
Soviet Bloc target and to train him in the application of clandestine methods
for collecting information on, assessing, and preparing recruitment opera-
tions against Soviet Bloc personalities.

ACHIEVEMENT RECORD

This is a certificate of attendance. No evaluation is made of individual
performance in the course.

FOR THE DIRECTOR OF TRAINING:



Instructor, OTR

S-E-C-R-E-T

SECRET

FITNESS REPORT				EMPLOYEE SERIAL NUMBER	
				007GG7	
SECTION A					
GENERAL					
1. NAME (Last) (First) (Middle)			2. DATE OF BIRTH	3. SEX	4. GRADE
Bustos-Videla, Charlotte			12 Jan 1929	F	GS-13 D
5. OFFICIAL POSITION TITLE			6. OFF/Div/Br of Assignment	7. CURRENT STATION	
Ops Officer			DDP/WH/1	Mexico City	
8. CHECK (X) TYPE OF APPOINTMENT			10. CHECK (X) TYPE OF REPORT		
<input checked="" type="checkbox"/> CAREER	<input type="checkbox"/> RESERVE	<input type="checkbox"/> TEMPORARY	INITIAL	REASSIGNMENT SUPERVISOR	
CAREER-PROVISIONAL (See Instructions - Section C)			XXX ANNUAL	REASSIGNMENT EMPLOYEE	
SPECIAL (Specify)			SPECIAL (Specify)		
11. DATE REPORT DUE IN O.P.			12. REPORTING PERIOD (From - To)		
29 February 1968			August 1967 through January 1968		
SECTION B					
PERFORMANCE EVALUATION					
<p>W - Weak 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 - Adequate Performance meets all requirements. It is entirely satisfactory and is characterized neither by deficiency nor excellence.</p> <p>P - Proficient Performance is more than satisfactory. Desired results are being produced in a proficient manner.</p> <p>S - Strong Performance is characterized by exceptional proficiency.</p> <p>O - Outstanding 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>					
SPECIFIC DUTIES					
<p>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).</p>					
SPECIFIC DUTY NO. 1 Handles Station PBRUMEN program (maintains a [] screens [] documents and reports [] information to WOFIRM stations and other interested customers).					RATING LETTER S
SPECIFIC DUTY NO. 2 Screens the raw product of technical operations and processes the intelligence and operational information.					RATING LETTER O
SPECIFIC DUTY NO. 3 Does analysis on targets of Station interest, pulling documents together, collating information and preparing studies.					RATING LETTER O
SPECIFIC DUTY NO. 4 Helps with the preparation of monthly summaries and project reporting (outlines, renewals etc.).					RATING LETTER O
SPECIFIC DUTY NO. 5 Provides operational support (file checks, operational reviews, liaison memoranda etc.) for various Station activities.					RATING LETTER S
SPECIFIC DUTY NO. 6 <i>[Handwritten notes]</i>					RATING LETTER [Redacted]
OVERALL PERFORMANCE IN CURRENT POSITION					
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 O
<i>Reviewed by [Signature]</i>					

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 suggestion 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 and cost consciousness in the use of personnel, space, equipment and funds must be commented on if applicable. If extra space is needed to complete Section C, attach a separate sheet of paper.

Since her arrival at this Station, Subject's performance has truly been outstanding. She has, on her own initiative, reorganized many of the operational files and procedures of the PBRUMEN Section. She has made particularly useful exhaustive analyses of the documents concerning a number of Station targets not only per request of this Station but also on her own initiative. She has revamped the Section's [] program, curtailing the [] to more manageable size and expediting the reporting of [] information to the many customers for such information. Her thorough review of the take of several technical operations has increased their usefulness as well as emphasized their weaknesses.

Subject's natural born leadership, her energy, management talent for administration, her initiative, sharp analytic mind and good knowledge of Spanish have greatly facilitated the operation of the PBRUMEN Section of this Station at a time of almost complete personnel change. She has not been directly involved with the actual running of operations both because she appears much better suited for the support type work intrusted to her and because she frankly would not have the time under present circumstances to do so. Subject is carrying the workload usually handled by more than one person.

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

16 Jan. 1968

/s/ Charlotte Bustos-Videla

2.

BY SUPERVISOR

MONTHS EMPLOYEE HAS BEEN
UNDER MY SUPERVISION

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

5 months

DATE

OFFICIAL TITLE OF SUPERVISOR

TYPED OR PRINTED NAME AND SIGNATURE

16 Jan. 1968

Ops Officer

3.

BY REVIEWING OFFICIAL

COMMENTS OF REVIEWING OFFICIAL

The Reviewing Officer fully concurs in the evaluation of Subject by the Rating Officer. Subject consistently turns in a superior performance, whatever her task, and for a Station Chief the only problem she presents is to determine where best to assign her. She is a source of strength to her Section, has the knack of making herself irreplaceable.

DATE	OFFICIAL TITLE OF REVIEWING OFFICIAL	TYPED OR PRINTED NAME AND SIGNATURE
17 January 1968	Chief of Station	[]

SECRET

SECRET
(When Filled In)

FITNESS REPORT					EMPLOYEE SERIAL NUMBER 007667
SECTION A					
GENERAL					
1. NAME Bustosvidula, C.Z.			2. DATE OF BIRTH Jan 1929	3. SEX F	4. GRADE GS-13
5. OFFICIAL POSITION TITLE Ops Officer			6. OFF/DIV/BR OF ASSIGNMENT DDP/WH/1	7. CURRENT STATION HQS	
8. CHECK (X) TYPE OF APPOINTMENT XX CAREER RESERVE TEMPORARY CAREER-PROVISIONAL (See Instructions - Section C)			9. CHECK (X) TYPE OF REPORT XX INITIAL ANNUAL SPECIAL (Specify):		
10. DATE REPORT DUE IN O.P. 31 Jan 67			11. REPORTING PERIOD (From - To) 1/66 - 12/66		
SECTION B					
PERFORMANCE EVALUATION					
W - Weak	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 actions taken or proposed in Section C.				
A - Adequate	Performance meets all requirements. It is entirely satisfactory and is characterized neither by deficiency nor excellence.				
P - Proficient	Performance is more than satisfactory. Desired results are being produced in a proficient manner.				
S - Strong	Performance is characterized by exceptional proficiency.				
O - Outstanding	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.				
SPECIFIC DUTIES					
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 Handles all aspects of FI/CE/Support projects including project actions, logistical and financial support, requirements, guidance and review.					RATING LETTER S
SPECIFIC DUTY NO. 2 Handles all matters concerning the agents belonging to these projects including field agents, Contract, Career, and Staff Agents. This includes OA/CSA's, contracts, training, travel, cover and funding.					RATING LETTER O
SPECIFIC DUTY NO. 3 Prepares, or helps prepare, miscellaneous memoranda and studies, such as monthly FI achievements, operational program, budget exercises, responses to requests on operations or background info regarding Mexico.					RATING LETTER O
SPECIFIC DUTY NO. 4 Routes correspondence, supervises tickler system, maintains project, agent, and subject 201 files.					RATING LETTER S
SPECIFIC DUTY NO. 5 Branch records officer.					RATING LETTER S
SPECIFIC DUTY NO. 6					RATING LETTER
OVERALL PERFORMANCE IN CURRENT POSITION					
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.					
<i>30 MAR 1967</i>					RATING LETTER S

OFFICE OF PERSONNEL

SECRET

(When Filled In)

SECTION C

NARRATIVE COMMENTS Feb 16 10-33 AM 1967

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 best basis for determining future personnel action. Manner of performance of managerial or supervisory duties must be described, if applicable.

Subject has continued to perform during the period under review in the same highly competent manner which all who know her have come to expect of her. She continues to put forth her best efforts at all times. She is particularly to be commended for the manner in which she cheerfully accepts onerous tasks, usually with very short deadlines, and invariably comes up with a thoroughly prepared answer within the time allotted. She is efficient, she is fully knowledgeable and capable in her job, she has a friendly, warm, and pleasant personality, and is always ready to respond to her fellow workers with a helping hand. She has no supervisory responsibility per se, but is frequently called upon for guidance to new secretaries and case officers alike and is of real help in such cases. Subject is one of the strongest Headquarters case officers known to rater, and her overall performance certainly borders very closely on being evaluated Outstanding.

SECTION D

CERTIFICATION AND COMMENTS

1. BY EMPLOYEE	
I CERTIFY THAT I HAVE READ SECTIONS A, B, AND C OF THIS REPORT	
DATE	SIGNATURE OF EMPLOYEE
5 January 1967	<i>John J. Devereux</i>
2. BY SUPERVISOR	
MONTHS EMPLOYEE HAS BEEN UNDER MY SUPERVISION	IF THIS REPORT HAS NOT BEEN SHOWN TO EMPLOYEE, GIVE EXPLANATION
18	
DATE	OFFICIAL TITLE OF SUPERVISOR
30 January 1967	DC/WH/1
3. BY REVIEWING OFFICIAL	
COMMENTS OF REVIEWING OFFICIAL	
Concur. An outstanding officer recognized as such and appreciated by all.	
DATE	OFFICIAL TITLE OF REVIEWING OFFICIAL
31 January 1967	C/WH/1

SECRET

SECRET

(When Filled In)

FITNESS REPORT				EMPLOYEE SERIAL NUMBER 007667	
SECTION A				GENERAL	
1. NAME (Last) (First) (Middle) BUSTOSVIDELA, C. Z.			2. DATE OF BIRTH 12 Jan 29	3. SEX F	4. GRADE GS-12
5. OFFICIAL POSITION TITLE Ops Officer			6. OFF/DIV/BR OF ASSIGNMENT DDP/WH/1	7. CURRENT STATION Headquarters	
8. CHECK (X) TYPE OF APPOINTMENT <input checked="" type="checkbox"/> CAREER <input type="checkbox"/> RESERVE <input type="checkbox"/> TEMPORARY CAREER-PROVISIONAL (See Instructions - Section C)			9. CHECK (X) TYPE OF REPORT <input checked="" type="checkbox"/> INITIAL <input type="checkbox"/> REASSIGNMENT SUPERVISOR ANNUAL		
10. DATE REPORT DUE IN O.P. 1 January - 31 December 1965			11. SPECIAL (Specify): SPECIAL (Specify):		
12. REPORTING PERIOD (From- to) 1 January - 31 December 1965					
SECTION B				PERFORMANCE EVALUATION	
<p>W - Weak 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 - Adequate Performance meets all requirements. It is entirely satisfactory and is characterized neither by deficiency nor excellence.</p> <p>P - Proficient Performance is more than satisfactory. Desired results are being produced in a proficient manner.</p> <p>S - Strong Performance is characterized by exceptional proficiency.</p> <p>O - Outstanding 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>					
SPECIFIC DUTIES					
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 Handles all aspects of <input type="checkbox"/> FI/CE/Support projects including project actions, logistical and financial support, requirements, guidance and review.					RATING LETTER O
SPECIFIC DUTY NO. 2 Handles all matters concerning the agents belonging to these projects including field agents, Contract, Career, and Staff Agents. This includes OA/CSA's, contracts, training, travel, cover and funding.					RATING LETTER O
SPECIFIC DUTY NO. 3 Prepares, or helps prepare, miscellaneous memoranda and studies, such as monthly FI achievements, operational program, budget exercises, responses to requests on operations or background info regarding Mexico.					RATING LETTER S
SPECIFIC DUTY NO. 4 Routes correspondence, supervises tickler system, maintains project, agent, and subject 201 files.					RATING LETTER S
SPECIFIC DUTY NO. 5 Branch records officer.					RATING LETTER S
SPECIFIC DUTY NO. 6					RATING LETTER
OVERALL PERFORMANCE IN CURRENT POSITION					
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 O
25 JAN 1965					

SECRET

(When Filled In)

SECTION C	NARRATIVE COMMENTS	OFFICE OF PERSONNEL
<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 best basis for determining future personnel action. <u>Manor of performance of managerial or supervisory duties may be prescribed if applicable.</u></p> <p style="text-align: right;">JAN 23 12 53 PM '66</p> <p>Subject continues to render a superior performance. She is efficient, thoroughly knowledgeable, rapid in her work, well organized, and greatly facilitates the smooth functioning of the office. The quality of Subject's work has been recognized fully in previous fitness reports and in previous recommendations for promotion from GS-12 to 13. This high quality of work has continued throughout the period of this fitness report and Subject continues to merit promotion.</p>		
SECTION D	CERTIFICATION AND COMMENTS	
1.	BY EMPLOYEE	
I CERTIFY THAT I HAVE SEEN SECTIONS A, B, AND C OF THIS REPORT		
DATE 20 Jan 1966	SIGNATURE OF EMPLOYEE C. J. [Signature]	
2.	BY SUPERVISOR	
MONTHS EMPLOYEE HAS BEEN UNDER MY SUPERVISION Four	IF THIS REPORT HAS NOT BEEN SHOWN TO EMPLOYEE, GIVE EXPLANATION	
DATE 20 Jan. 1966	OFFICIAL TITLE OF SUPERVISOR DC/WH/1	
3.	BY REVIEWING OFFICIAL	
COMMENTS OF REVIEWING OFFICIAL		
<p>Reviewing Officer agrees with above report and endorses Subject's fitness for promotion.</p>		
DATE 20 Jan 1966	OFFICIAL TITLE OF REVIEWING OFFICIAL C/WH/1	

SECRET

SECRET
(When Filled In)

FITNESS REPORT					EMPLOYEE SERIAL NUMBER	
SECTION A					GENERAL	
1. NAME (Last) <u>Buntos-Videla</u> , (First) <u>Charlotte</u> (Middle) <u>S.</u>			2. DATE OF BIRTH <u>12 Jan 1929</u>	3. SEX <u>F</u>	4. GRADE <u>GS-12</u>	5. SD <u>D</u>
6. OFFICIAL POSITION TITLE <u>Ops Officer</u>			7. OFF/DIV/BR OF ASSIGNMENT <u>DOP/AM/1</u>	8. CURRENT STATION <u>H.S.</u>		
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 <small>CAREER-PROVISIONAL (See Instructions - Section C)</small>			<input type="checkbox"/> INITIAL <input type="checkbox"/> REASSIGNMENT SUPERVISOR <input checked="" type="checkbox"/> ANNUAL <input type="checkbox"/> REASSIGNMENT EMPLOYEE		<small>SPECIAL (Specify):</small> <small>SPECIAL (Specify):</small>	
11. DATE REPORT DUE IN O.P. <u>31 January 1965</u>			12. REPORTING PERIOD (From To) <u>1 January 1964 - 31 December 1964</u>			
SECTION B					PERFORMANCE EVALUATION	
<p>W - Weak 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 - Adequate Performance meets all requirements. It is entirely satisfactory and is characterized neither by deficiency nor excellence.</p> <p>P - Proficient Performance is more than satisfactory. Desired results are being produced in a proficient manner.</p> <p>S - Strong Performance is characterized by exceptional proficiency.</p> <p>O - Outstanding 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>						
SPECIFIC DUTIES						
<p>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).</p>						
SPECIFIC DUTY NO. 1		Handles all aspects of <input type="checkbox"/> FI/CE/Support projects including project actions, logistical support, requirements, guidance, reviews.			RATING LETTER <u>O</u>	
SPECIFIC DUTY NO. 2		Handle all matters concerning the agents belonging to these projects, including field agents, Contract, Career and Staff Agents. This includes OA/CSA's, contracts, training, PCS arrangements, cover, funding.			RATING LETTER <u>O</u>	
SPECIFIC DUTY NO. 3		Prepare, or help prepare, miscellaneous memoranda and studies, such as monthly FI achievements, Operational Program, responses to requests from the Senior Staffs on operations and on Mexico itself.			RATING LETTER <u>O</u>	
SPECIFIC DUTY NO. 4		Supervise one Intelligence Assistant in the maintenance of a desk tickler system and the agent and subject 201 files at the desk.			RATING LETTER <u>O</u>	
SPECIFIC DUTY NO. 5		Records Officer			RATING LETTER <u>S</u>	
SPECIFIC DUTY NO. 6					RATING LETTER	
OVERALL PERFORMANCE IN CURRENT POSITION						
<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> <p><u>23 MAR 1965</u></p>						
RATING LETTER <u>O</u>						

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 best basis for determining future personnel action. Manner of performance of managerial & supervisory duties must be described, if applicable.

This exceptionally competent and productive officer continued to perform at a level well above that of the GS-13 slot she occupies. While a good deal of her tremendous effectiveness stems from experience, continuity on the job and her natural retentive memory, during the period under review she also demonstrated a flair for, and applied her talents to, the solution of relatively major and complex planning and managerial problems in the area of operational support to Mexico Station activities.

To the list of her previously abundantly acknowledged capacity for hard, effective work, talent for training on the job younger officers, diligence, and versatile ability, this rater would like to add a note of appreciation for her everpresent tactfulness and discretion. No weaknesses affecting her present assignment have been noted; she is very careful and realistic in planning for expenditure of funds.

This officer is separately being recommended for promotion to GS-13.

WH will review this fitness report with others during a special meeting scheduled periodically to consider suitable recommendation for outstanding performance.

SECTION D**CERTIFICATION AND COMMENTS**

1.

BY EMPLOYEE

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

DATE

17 JULY 1965

SIGNATURE OF EMPLOYEE

2.

BY SUPERVISOR

MONTHS EMPLOYEE HAS BEEN UNDER MY SUPERVISION

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

DATE

8-17-65

DC/WH/1

TYPED OR PRINTED NAME AND SIGNATURE

3.

BY REVIEWING OFFICIAL

COMMENTS OF REVIEWING OFFICIAL

Conan

DATE

OFFICIAL TITLE OF REVIEWING OFFICIAL

8-17-65

C/WH/1

RE

SECRET

SECRET
(When Filled In)

FITNESS REPORT				EMPLOYEE SERIAL NUMBER		
				007667		
SECTION A						
1. NAME (Last) (First) (Middle)			GENERAL			
BUSTOS-VIBELA, Charlotte Z.			2. DATE OF BIRTH	3. SEX	4. GRADE	5. SD
			12 Jan 1929	F	GS-12	D
6. OFFICIAL POSITION TITLE			7. OFF/DIV/BR OF ASSIGNMENT	8. CURRENT STATION		
Operations Officer			DDP WH 3	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"/> INITIAL	REASSIGNMENT SUPERVISOR		
CAREER-PROVISIONAL (See Instructions - Section C)			<input checked="" type="checkbox"/> ANNUAL	REASSIGNMENT EMPLOYEE		
SPECIAL (Specify)			SPECIAL (Specify)			
11. DATE REPORT DUE IN O.P.			12. REPORTING PERIOD (From- To)			
31 January 1964			1 January 1963 - 31 December 1963			
SECTION B PERFORMANCE EVALUATION						
<u>W - 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.					
<u>A - Adequate</u>	Performance meets all requirements. It is entirely satisfactory and is characterized neither by deficiency nor excellence.					
<u>P - Proficient</u>	Performance is more than satisfactory. Desired results are being produced in a proficient manner.					
<u>S - Strong</u>	Performance is characterized by exceptional proficiency.					
<u>O - 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.					
SPECIFIC DUTIES						
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 Handle Project action, operational correspondence, support for [] FI and OPs Support type projects, effecting proper coordination with senior staffs, other divisions, and offices.						RATING LETTER B
SPECIFIC DUTY NO. 2 Handle clearance actions, contracts, and administrative matters for agents falling under these projects, and for the entire desk in the absence of the Intell Analyst.						RATING LETTER O
SPECIFIC DUTY NO. 3 Prepare miscellaneous memoranda, budgets, and reports requested by Senior Staffs and Division officers from the Mexican desk on Mexican matters in general.						RATING LETTER S
SPECIFIC DUTY NO. 4 Supervise the clerical and administrative personnel on the desk (averaging 4) and in general see to the smooth functioning of the desk and the flow of paper.						RATING LETTER O
SPECIFIC DUTY NO. 5 Records Officer for WH/3/M						RATING LETTER O
SPECIFIC DUTY NO. 6 Assume the responsibilities of C/WH/3/M when the Chief of the desk is absent, signing dispatches and cables, coordinating, and supervising [] Reports Officers and [] Case Officers.						RATING LETTER P
OVERALL PERFORMANCE IN CURRENT POSITION						
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 O
14 FEB 1964						

SECRET

(When Filled In)

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>Subject's performance during the rating period has been marked by general excellence. As indicated in Section B her supervision and direction of the Section's work relating to intel support, administration, preparation of special reports, training personnel, etc. is uniformly outstanding. The fact that these functions are handled in addition to her duties as the desk officer for the FI and Ops Support projects, which she performs with unusual competence, serves to illustrate her value to this Section. She has an exceptional ability independently to determine proper courses of action and to initiate action to carry them out. She has a profound understanding of the area operational program and contributions to it are imaginative and constructive.</p> <p>In the opinion of the rater Subject's performance compares favorably with any GS-13 desk officer within his experience and she performs occasionally at the GS-14 level. Moreover, she carries out her duties cheerfully, loyally and in close and amicable cooperation with her fellow employees at all levels.</p> <p>In those aspects of her duties which involve cost e.g. the review of operational projects, she has given close attention to the budgetary matters and has frequently suggested ways in which economies in the operations might be effected.</p>			
SECTION D		CERTIFICATION AND COMMENTS	
<p>1. BY EMPLOYEE I CERTIFY THAT I HAVE READ SECTIONS A, B, AND C OF THIS REPORT</p> <p>DATE: 28 January 1964 SIGNATURE OF EMPLOYEE: <i>Marieville J. Vazquez-Pedraza</i></p> <p>2. BY SUPERVISOR MONTHS EMPLOYEE HAS BEEN UNDER MY SUPERVISION: IF THIS REPORT HAS NOT BEEN SHOWN TO EMPLOYEE, GIVE EXPLANATION:</p> <p>DATE: 1-2-64 OFFICIAL TITLE OF SUPERVISION: C/WH/3/Mexico</p> <p>3. BY REVIEWING OFFICIAL COMMENTS OF REVIEWING OFFICIAL:</p> <p>I concur in the high rating given this employee. She is undoubtedly the ablest employee in this branch in the performance of her particular job.</p> <p>DATE: 29 Jan 1964 OFFICIAL TITLE OF REVIEWING OFFICIAL: C/WH/3</p>			

SECRET

(When filled in)

REPORT ON FOREIGN LANGUAGE ATTITUDE AND EXPERIENCE

John Doe (Name) Office Sex 37 September 1948 (Date of testing)

The category checked below is an interpretation of the scores made by the person named above on a battery of foreign language aptitude tests. The relationships between test performance and subsequent training performance of trainees in Agency language training courses are indicated by the graphs next to the aptitude categories. The graphs to the left are for women and the graphs to the right are for men. From these graphs you can read for each aptitude category the probability that a person in that category will perform in an Agency foreign language training course at an average or better-than-average level. For example, 22 per cent of the women who obtain an aptitude rating of "B" can be expected to be average or better in course performance, while 5 per cent of the men with ratings of "B" can be expected to be average or better in course performance. A man needs an aptitude rating of "G" to have about the same expectation of success in language training as a woman with a rating of "B". At the other end of the scale, 10 per cent of either men or women who obtain aptitude ratings of "Z" can be expected to do average or better-than-average work in training. The differences in relationship are due to differences between men and women in both training performance and test scores. On the average women are somewhat higher on both.

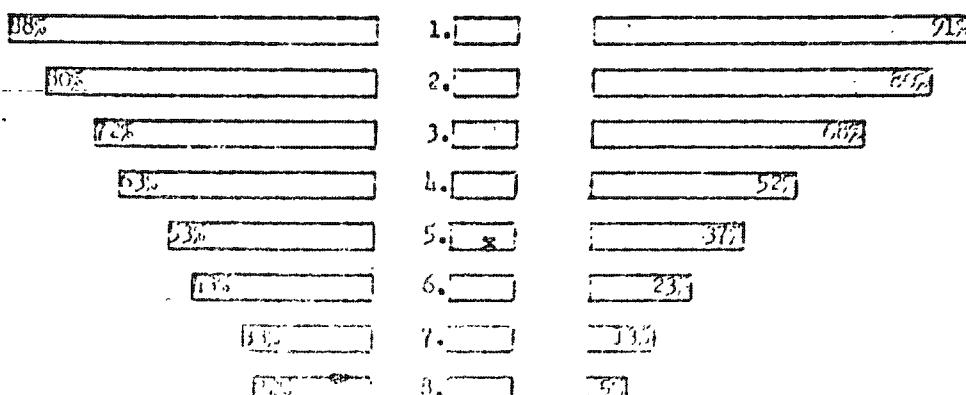
Percent of Women Whose Language Training Performance Is Expected to Be Average or Better than Average

100	80	60	40	20	0
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Aptitude Category

Percent of Men Whose Language Training Performance Is Expected to Be Average or Better than Average

0	20	40	60	80	100
---	----	----	----	----	-----



Since many things other than aptitudes enter into the determination of training course performance, in any class of students there will usually be some whose performance will be better than would be expected from their test scores, just as there will likely be some whose performance is poorer than expected. STRUCTURE OF INSTITUTION, TEACHING METHODS, TIME, PERSONAL INTERESTS, EXPERIENCES WITH A FOREIGN LANGUAGE, and other factors should be considered in selecting people for language training and in interpreting language training results. For example, the number of languages previously studied or learned and the amount of academic and non-academic language-learning experience are factors not measured by the tests but are indicative of probable success in learning a foreign language. Whether such experience was in the same language as the one to be studied or in a different one is, of course, an additional relevant factor.

3 foreign languages have been studied or learned by this individual.

Months of Academic Training
High School College Other

Non-academic Experience (1 year or more)
Reading or Writing Speaking

18	54	32
----	----	----

no	no
----	----

This report may be shown to the individual concerned.

4

14-00000
S E C R E T

TRAINING REPORT

RECORDS OFFICERS COURSE

30 April - 4 May 1962

Student : Charlotte Z. Bustos-Vidal Office : WH/3

Year of Birth: 1929 Service Designation: D

Grade: GS-12 Number of Students: 34

EOD Date: Aug 1951

COURSE OBJECTIVES - CONTENT AND METHODS

This course, designed for present and prospective Records Officers, has four principal objectives.

1. To give an appreciation for the Agency's CS mission.
2. To describe the role that records play in the discharge by the Agency of the responsibilities inherent in the mission.
3. To emphasize the importance of records and proper records management in the successful performance of the stated mission.
4. To increase awareness of the inter-relationships between the CS mission and records; to sharpen judgement in the handling and disposition of records; and to improve performance of Records Officers.

The student is instructed through the media of lectures, directed reading, practical exercises and discussions.

ACHIEVEMENT RECORD

This is a certificate of attendance only; no attempt was made to evaluate student achievement in the course.

FOR THE DIRECTOR OF TRAINING:

Chief Instructor

24 July 1962

Date

S E C R E T

SECRET
(When Filled In)

FITNESS REPORT					EMPLOYEE SERIAL NUMBER 607667
SECTION A					
GENERAL					
1. NAME <i>(Last) (First) (Middle)</i>	Bustos-Videla, Charlotte		2. DATE OF BIRTH	3. SEX	4. GRADE
			12 Jan 29	F	GS-12
5. OFFICIAL POSITION TITLE OPS OFFICER			6. OFF/DIV/BR OF ASSIGNMENT DDP WH 3	7. CURRENT STATION PK	
8. CHECK (X) TYPE OF APPOINTMENT CAREER			9. CHECK (X) TYPE OF REPORT INITIAL		
CAREER-PROVISIONAL (See Instructions - Section C)			X	ANNUAL	REASSIGNMENT SUPERVISOR
SPECIAL (Specify):			SPECIAL (Specify):		
11. DATE REPORT DUE IN O.P. 31 January 1963			12. REPORTING PERIOD (From - To) 1 Jan - 30 Dec 62		
SECTION B PERFORMANCE EVALUATION					
<p>W - Weak 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 - Adequate Performance meets all requirements. It is entirely satisfactory and is characterized neither by deficiency nor excellence.</p> <p>P - Proficient Performance is more than satisfactory. Desired results are being produced in a proficient manner.</p> <p>S - Strong Performance is characterized by exceptional proficiency.</p> <p>O - Outstanding 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>					
SPECIFIC DUTIES					
<p>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).</p>					
SPECIFIC DUTY NO. 1 Supervises office staff of Mexico Desk in preparing correspondence, keeping files, carding, and training new personnel.					RATING LETTER O
SPECIFIC DUTY NO. 2 Desk Intelligence officer for important [redacted] and FI operations in Mexico, processing projects, handling operational correspondence, conducting liaison with other divisions.					RATING LETTER S
SPECIFIC DUTY NO. 3 Routing cables, dispatches for the entire Desk, supervising distribution of work.					RATING LETTER O
SPECIFIC DUTY NO. 4 Personally handling large number of clearances, project approvals, cable coordinations, and official negotiations on matters touching all aspects of the Desk's work.					RATING LETTER O
SPECIFIC DUTY NO. 5 Preparation of budget, special papers, surveys, and briefings.					RATING LETTER O
SPECIFIC DUTY NO. 6					RATING LETTER
OVERALL PERFORMANCE IN CURRENT POSITION					
<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> <p>28 FEB 1963</p>					
RATING LETTER O					

SECRET

(When Filled In)

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 best basis for determining future personnel action. Manner of performance of managerial or supervisory duties must be described, if applicable.</p> <p>This officer is the person chiefly responsible for the Mexico Desk's deserved reputation for excellence and efficiency. The complicated and never-ending tasks of project processing, clearances, tracing, and coordination are handled by her with blinding speed and unerring perfection. Procedural problems are there to be solved, and the solutions come with amazing rapidity. Operational problems are worked out thoroughly and conscientiously. No corners are cut and no principles are compromised.</p> <p>Never at a loss for an answer, this officer never shrinks from any assignment and instinctively wants to take over any vexing problem which is holding up progress. She is complete mistress of file and record resources and answers all queries within minutes. The most complex budgetary and planning projects are handled by her with deceptive ease.</p> <p>These qualities of rare efficiency and speed are coupled with an even rarer degree of amiability and cooperativeness. The work which proceeds under her at such a break-neck pace nonetheless goes on in an air of placidity and good humor. The large office staff is run without a trace of tension, jealousy, or friction. All of this is traceable to this officer's fine example and catalytic effect on her colleagues.</p> <p>Finely-educated, handling the Spanish language with fluency, and keeping up with current events in her area, this officer is a unique asset to our organization.</p>			
SECTION D Organization: CERTIFICATION AND COMMENTS			
<p>1. BY EMPLOYEE</p> <p>I CERTIFY THAT I HAVE SEEN SECTIONS A, B, AND C OF THIS REPORT</p> <p>DATE: 26 February 1963 SIGNATURE OF EMPLOYEE: <i>John M. Whitten</i></p>			
<p>2. BY SUPERVISOR</p> <p>MONTHS EMPLOYEE HAS BEEN UNDER MY SUPERVISION: _____ IF THIS REPORT HAS NOT BEEN SHOWN TO EMPLOYEE, GIVE EXPLANATION: _____</p> <p>DATE: 26 February 1963 OFFICIAL TITLE OF SUPERVISOR: AC/WH/3/MEXICO TYPED OR PRINTED NAME AND SIGNATURE: <i>John M. Whitten</i> John. M. Whitten</p>			
<p>3. BY REVIEWING OFFICIAL</p> <p>COMMENTS OF REVIEWING OFFICIAL: _____</p> <p>DATE: 26 February 1963 OFFICIAL TITLE OF REVIEWING OFFICIAL: AC/WH/3 TURE: _____</p>			

SECRET

SECRET
(When Filled In)

FITNESS REPORT				EMPLOYEE SERIAL NUMBER ROCO 1000 CSFD 007617					
SECTION A				GENERAL					
1. NAME (Last) (First) (Middle)		2. DATE OF BIRTH	3. SEX	4. GRADE					
BUSTOS-VIDELA Charlotte Z		12 January 1929	Female	12					
5. SERVICE DESIGNATION		6. OFFICIAL POSITION TITLE		7. OFF/DIV/BR OF ASSIGNMENT					
D		Operations Officer		DDP/MI/3/D. C.					
8. CAREER STAFF STATUS			9. TYPE OF REPORT						
NOT ELIGIBLE PENDING	MEMBER DECLINED	DEFERRED DENIED	INITIAL <input checked="" type="checkbox"/> ANNUAL	<input checked="" type="checkbox"/> REASSIGNMENT/SUPERVISOR <input type="checkbox"/> REASSIGNMENT/EMPLOYEE					
10. DATE REPORT DUE IN O.P. From 31 January 1962		11. REPORTING PERIOD To 1 Jan 61 - 31 Dec 61		SPECIAL (Specify)					
SECTION B EVALUATION OF PERFORMANCE OF SPECIFIC DUTIES									
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					
SPECIFIC DUTY NO. 1 Responsible for Project renewals and other correspondence and action on [] support type projects for Mexico City and Monterrey		RATING NO. 7	SPECIFIC DUTY NO. 4 Assist the Chief of the desk in administration of office to assure the smooth functioning of the desk. Includes distribution of work, [] routing of pouches and cables, supervision of clerical staff of []						
SPECIFIC DUTY NO. 2 Handle miscellaneous administrative and support matters (requests for technical studies, training guides, etc) for Mexico and Monterrey		RATING NO. 7							
SPECIFIC DUTY NO. 3 Supervise maintenance of records at the desk and represent Desk as Records Officer in discussions with [] on its field records problems		RATING NO. 6	SPECIFIC DUTY NO. 5						
SECTION C EVALUATION OF OVERALL PERFORMANCE IN CURRENT POSITION									
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. 6					
SECTION D DESCRIPTION OF THE EMPLOYEE									
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 SERVED	RATING				
GETS THINGS DONE					X				
RESOURCEFUL					X				
ACCEPTS RESPONSIBILITIES					X				
CAN MAKE DECISIONS ON HIS OWN WHEN NEED ARISES					X				
DOES HIS JOB WITHOUT STRONG SUPPORT					X				
FACILITATES SMOOTH OPERATION OF HIS OFFICE					X				
WRITES EFFECTIVELY					X				
SECURITY CONSCIOUS					X				
THINKS CLEARLY					X				
DISCIPLINE IN ORIGINATING, MAINTAINING AND DISPOSING OF RECORDS					X				
OTHER (Specify)									

SEE SECTION "E" ON REVERSE SIDE

SECRET

(When Filled In)

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

Stress 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.

FEB 12 11 43 AM '62

This outstanding employee has maintained the high standard of performance set forth in the report of this supervisor [REDACTED]. Where possible, she has exceeded her earlier performance record. During the past year this office acquired considerable new personnel, which Subject trained in a highly capable manner to guarantee the smooth-functioning of the office. The undersigned hopes this employee will continue to serve this organization indefinitely notwithstanding her marriage during the past year.

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

23 January 1962

SIGNATURE OF EMPLOYEE

Charlotte J. Paxton-Videla

2.

BY SUPERVISOR

MONTHS EMPLOYEE HAS BEEN
UNDER MY SUPERVISION

24

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

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

23 JANUARY 1962

OFFICIAL TITLE OF SUPERVISOR

Chief of Desk

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

OFFICIAL TITLE OF REVIEWING OFFICIAL

TYPED OR PRINTED NAME AND SIGNATURE

6 Feb 1962

C. K. HILL

SECRET

SECRET
(When Filled In)

FITNESS REPORT						EMPLOYEE SERIAL NUMBER				
SECTION A GENERAL										
1. NAME (Last) (First) (Middle)			2. DATE OF BIRTH		3. SEX		4. GRADE			
Zehrung Charlotte			12 Jan. 1929		Female		GS-12			
5. SERVICE DESIGNATION		6. OFFICIAL POSITION TITLE				7. OFF/DIV/BR OF ASSIGNMENT				
DI		Ops Officer				DDPA/H/3/Mex/DC				
8. CAREER STAFF STATUS			9. TYPE OF REPORT							
<input checked="" type="checkbox"/> NOT ELIGIBLE	MEMBER	DEFERRED	INITIAL	REASSIGNMENT/SUPERVISOR						
PENDING	DECLINED	DENIED	X ANNUAL	REASSIGNMENT/EMPLOYEE						
10. DATE REPORT DUE IN O.P.		11. REPORTING PERIOD		SPECIAL (Specify)						
31 January 1961		From 30 Sep 59 - 31 Dec 60 To								
SECTION B EVALUATION OF PERFORMANCE OF SPECIFIC DUTIES										
<p>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).</p>										
1 - Unsatisfactory		2 - Barely adequate		3 - Acceptable		4 - Competent				
5 - Excellent		6 - Superior		7 - Outstanding						
SPECIFIC DUTY NO. 1 Responsible for Project renewals and other correspondence and action on [] support-type projects for Mexico City and Monterrey			RATING NO.	SPECIFIC DUTY NO. 4 Assist the Chief of the Desk in administration of office to assure the smooth functioning of the desk. Includes distribution of work, routing			RATING NO.			
SPECIFIC DUTY NO. 2 Handle miscellaneous admin and support matters (requests for tech equip, studies, training guides, etc) for Mexico and Monterrey			RATING NO.	SPECIFIC DUTY NO. 5 Supervision of pouches and cables, supervision of clerical staff of 4.			RATING NO.			
SPECIFIC DUTY NO. 3 Supervise maintenance of records at the desk and represent Desk as Records Officer in discussions with ETD on HQs and field records problems			RATING NO.	SPECIFIC DUTY NO. 6			RATING NO.			
SECTION C EVALUATION OF OVERALL PERFORMANCE IN CURRENT POSITION										
<p>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.</p>										
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. 6				
SECTION D DESCRIPTION OF THE EMPLOYEE										
<p>In the rating boxes below, check (X) the degree to which each characteristic applies to the employee</p>										
1 - Least possible degree		2 - Limited degree		3 - Normal degree		4 - Above average degree				
5 - Outstanding degree										
CHARACTERISTICS				NOT APPL-CABLE	NOT OBSERVED	RATING				
GETS THINGS DONE RESOURCEFUL ACCEPTS RESPONSIBILITIES CAN MAKE DECISIONS ON HIS OWN WHEN NEED ARISES DOES HIS JOB WITHOUT STRONG SUPPORT FACILITATES SMOOTH OPERATION OF HIS OFFICE WRITES EFFECTIVELY SECURITY CONSCIOUS THINKS CLEARLY DISCIPLINE IN ORGANIZING, MAINTAINING AND DISPOSING OF RECORDS OTHER (Specify):				X	X	1	2	3	4	5
				X	X	X	X	X	X	X
				X	X	X	X	X	X	X
				X	X	X	X	X	X	X
				X	X	X	X	X	X	X
				X	X	X	X	X	X	X
				X	X	X	X	X	X	X
				X	X	X	X	X	X	X
				X	X	X	X	X	X	X
				X	X	X	X	X	X	X
				X	X	X	X	X	X	X
				X	X	X	X	X	X	X
				X	X	X	X	X	X	X
				X	X	X	X	X	X	X
				X	X	X	X	X	X	X
				X	X	X	X	X	X	X
				X	X	X	X	X	X	X
				X	X	X	X	X	X	X
				X	X	X	X	X	X	X
				X	X	X	X	X	X	X
				X	X	X	X	X	X	X
				X	X	X	X	X	X	X
				X	X	X	X	X	X	X
				X	X	X	X	X	X	X
				X	X	X	X	X	X	X
				X	X	X	X	X	X	X
				X	X	X	X	X	X	X
				X	X	X	X	X	X	X
				X	X	X	X	X	X	X
				X	X	X	X	X	X	X
				X	X	X	X	X	X	X
				X	X	X	X	X	X	X
				X	X	X	X	X	X	X
				X	X	X	X	X	X	X
				X	X	X	X	X	X	X
				X	X	X	X	X	X	X
				X	X	X	X	X	X	X
				X	X	X	X	X	X	X
				X	X	X	X	X	X	X
				X	X	X	X	X	X	X
				X	X	X	X	X	X	X
				X	X	X	X	X	X	X
				X	X	X	X	X	X	X
				X	X	X	X	X	X	X
				X	X	X	X	X	X	X
				X	X	X	X	X	X	X
				X	X	X	X	X	X	X
				X	X	X	X	X	X	X
				X	X	X	X	X	X	X
				X	X	X	X	X	X	X
				X	X	X	X	X	X	X
				X	X	X	X	X	X	X
				X	X	X	X	X	X	X
				X	X	X	X	X	X	X
				X	X	X	X	X	X	X
				X	X	X	X	X	X	X
				X	X	X	X	X	X	X
				X	X	X	X	X	X	X
				X	X	X	X	X	X	X
				X	X	X	X	X	X	X
				X	X	X	X	X	X	X
				X	X	X	X	X	X	X
				X	X	X	X	X	X	X
				X	X	X	X	X	X	X
				X	X	X	X	X	X	X
				X	X	X	X	X	X	X
				X	X	X	X	X	X	X
				X	X	X	X	X	X	X
				X	X	X	X	X	X	X
				X	X	X	X	X	X	X
				X	X	X	X	X	X	X
				X	X	X	X	X	X	X
				X	X	X	X	X	X	X
				X	X	X	X	X	X	X
				X	X	X	X	X	X	X
				X	X	X	X	X	X	X
				X	X	X	X	X	X	X
				X	X	X	X	X	X	X
				X	X	X	X	X	X	X
				X	X	X	X	X	X	X
				X	X	X	X	X	X	X
				X	X	X	X	X	X	X
				X	X	X	X	X	X	X
				X	X	X	X	X	X	X
				X	X	X	X	X	X	X
				X	X	X	X	X	X	X
				X	X	X	X	X	X	X
				X	X	X	X	X	X	X
				X	X	X	X	X	X	X
				X	X	X	X	X	X	X
				X	X	X	X	X	X	X
				X	X	X	X	X	X	X
				X	X	X	X	X	X	X
				X	X	X	X	X	X	X
				X	X	X	X	X	X	X
				X	X	X	X	X	X	X
				X	X	X	X	X	X	X
				X	X	X	X	X	X	X
				X	X	X	X			

SECRET

OFFICE OF PERSONNEL

(When Filled In)

SECTION E

NARRATIVE DESCRIPTION OF MANNER OF JOB PERFORMANCE

Stress strengths and weaknesses demonstrated in current position. Indicate suggestions made for rapid advancement of his work. Give recommendations for his training. Describe, if appropriate, his potential for development of job according 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.

MAIL ROOM

This is a truly outstanding employee with capabilities far beyond those required for her present position. She has an unusually keen mind, makes decisions that are correct without hesitation and carries out all actions promptly and efficiently. She is the supervisor of the office staff, who respect and admire her ability. In addition to her skill, she is possessed of a most pleasing disposition which ingratiates her with the other members of the staff. The years of experience she has had at the various jobs to be done at a country desk make her invaluable as a trainer and supervisor for new personnel. Her knowledge of Spanish has also been especially helpful at the Mexican Desk. This supervisor would be most pleased to have her serve with him on any future assignment.

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

31 December 1960

SIGNATURE OF EMPLOYEE

Julia L. Johnson

2.

BY SUPERVISOR

MONTHS EMPLOYEE HAS BEEN
UNDER MY SUPERVISION

12

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

3.

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

31 December 1960

OFFICIAL TITLE OF SUPERVISOR

Desk Chief, WS/3/Mexico

4.

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

5 Jan 1961

OFFICIAL TITLE OF REVIEWING OFFICIAL

Chairman

SECRET

SECRET
(When Filled In)14-0000
next page

FITNESS REPORT					EMPLOYEE SERIAL NUMBER	
SECTION A GENERAL						
1. NAME (Last) (First) (Middle)			2. DATE OF BIRTH		3. SEX	4. GRADE
ZEHRUNG, Charlotte			12 Jan. 1929		Female	GS-11
5. SERVICE DESIGNATION		6. OFFICIAL POSITION TITLE			7. OFF/DIV/GR OF ASSIGNMENT	
DI		I.O. (PI)			DDP/MH/III/Mari/DC	
8. CAREER STAFF STATUS			9. TYPE OF REPORT			
NOT ELIGIBLE	<input checked="" type="checkbox"/>	MEMBER	DEFERRED	INITIAL	REASSIGNMENT/SUPERVISOR	
PENDING	<input type="checkbox"/>	DECLINED	DENIED	<input checked="" type="checkbox"/>	REASSIGNMENT/EMPLOYEE	
10. DATE REPORT DUE IN O.P.		11. REPORTING PERIOD		SPECIAL (Specify)		
31 October 1959		From 31 May 59 To 30 Sep 59				
SECTION B EVALUATION OF PERFORMANCE OF SPECIFIC DUTIES						
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		RATING NO.	SPECIFIC DUTY NO. 4		RATING NO.	
Responsible C/S to Officer for several RI and CE/CI Projects		5/6	Consults and coordinates with various less experienced, incl. Station's Projects and actions		6	
SPECIFIC DUTY NO. 2		RATING NO.	SPECIFIC DUTY NO. 5		RATING NO.	
Handles large volume of correspondence with Station in support of Operations		6/7	Prep res, reviews and coordinates memoranda		6	
SPECIFIC DUTY NO. 3		RATING NO.	SPECIFIC DUTY NO. 6		RATING NO.	
Supervised maintenance of cost records and project files		6/7				
SECTION C EVALUATION OF OVERALL PERFORMANCE IN CURRENT POSITION						
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.	HO
					6/7	
SECTION D DESCRIPTION OF THE EMPLOYEE						
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 APPLIES	DOES NOT
GETS THINGS DONE	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	1	2
RESOURCEFUL	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	3	4
ACCEPTS RESPONSIBILITY	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	5	6
CAN MAKE DECISIONS ON HIS OWN WHEN NEEDED ANGES	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	2	3
DOES HIS JOB WITHOUT READING SUPPORT	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	2	3
FACILITATES SMOOTH OPERATION OF HIS OFFICE	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	2	3
WRITES EFFECTIVELY	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	2	3
SECURITY CONCERN	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	2	3
WRITES CLEARLY	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	2	3
DISCIPLINE IN ORIGINATING, MAINTAINING AND DISPOSING OF RECORDS	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	2	3
OTHER ESPECIES	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	2	3
S. R. AFM 1740-10 REV. 10-64						

~~SECRET~~

OFFICE

SECTION E

NARRATIVE DESCRIPTION OF MEMBER OF JOB PERFORMANCE

Stress strengths and weaknesses demonstrated in current position. Encourage 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 SECTION S B, C, and D to provide the best basis for determining future personnel actions.

C 40 PH '59

MAIL ROOM

Please see previous fitness report. This employee was rated four months ago. There is no change in the rating; she has continued to give an outstanding performance.

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

12 Oct 59 Robert H. Dabiger
Mail Room Supervisor

2.

BY SUPERVISOR

MONTHS EMPLOYEE HAS BEEN

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

UNDER MY SUPERVISION

26 months

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

EMPLOYEE UNDER MY SUPERVISION LESS THAN 30 DAYS

REPORT MADE WITHIN LAST 30 DAYS

OTHER (SPECIFY)

DATE

OFFICIAL TITLE OF SUPERVISOR

TYPE

12 Oct 1959 C/H/IIT/Mexico

3. BY REVIEWING OFFICIAL

I COULD HAVE GIVEN THIS EMPLOYEE ABOUT THE SAME EVALUATION.

I COULD HAVE GIVEN THIS EMPLOYEE A HIGHER EVALUATION.

I COULD 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

OFFICIAL FILED OR REVIEWED

RECORDED AND SIGNATURE

12/2/59

Robert H. Dabiger
Robert H. Dabiger

~~SECRET~~

SECRET
(When Filled In)

12 JULY 1959

ab

FITNESS REPORT				EMPLOYEE SERIAL NUMBER		
SECTION A GENERAL						
1. NAME (Last) (First) (Middle)		2. DATE OF BIRTH		3. SEX	4. GRADE	
ZEHUNG, Charlotte L.		12 Jan 1929		F	11	
5. SERVICE DESIGNATION		6. OFFICIAL POSITION TITLE		7. OFF/DIV/BR OF ASSIGNMENT		
DI		I.O. (FI)		DDP/WH/III/Mexico/DC		
8. CAREER STAFF STATUS			9. TYPE OF REPORT			
<input checked="" type="checkbox"/> NOT ELIGIBLE	<input checked="" type="checkbox"/> MEMBER	<input type="checkbox"/> DEFERRED	<input type="checkbox"/> INITIAL	REASSIGNMENT/SUPERVISOR		
<input type="checkbox"/> PENDING	<input type="checkbox"/> DECLINED	<input type="checkbox"/> DENIED	<input checked="" type="checkbox"/> ANNUAL	REASSIGNMENT/EMPLOYEE		
10. DATE REPORT DUE IN O.P.		11. REPORTING PERIOD		SPECIAL (Specify)		
28 August 1958		From 28 August 1957 To 31 May 59				
SECTION B EVALUATION OF PERFORMANCE OF SPECIFIC DUTIES						
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		
SPECIFIC DUTY NO. 1 Responsible Case Officer for several SI and CE/CII Projects		RATING NO. 5/6		SPECIFIC DUTY NO. 4 Consults and coordinates with various HQs components regarding Station's Projects and Operations		
SPECIFIC DUTY NO. 2 Handles large volume of correspondence with Station in support of Operations		RATING NO. 6/7		SPECIFIC DUTY NO. 5 Prepares, reviews and coordinates memoranda		
SPECIFIC DUTY NO. 3 Supervises maintenance of desk records and project files		RATING NO. 6/7		SPECIFIC DUTY NO. 6		
SECTION C EVALUATION OF OVERALL PERFORMANCE IN CURRENT POSITION						
Take into account everything about the employee which influences his effectiveness in his current position - performance of specific duties, productivity, conduct on job, cooperativeness, positive 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. 5/6						
SECTION D DESCRIPTION OF THE EMPLOYEE						
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 APPL-CABLE	NOT OBS-SERVED	RATING
GETS THINGS DONE						X
RESOURCEFUL						X
ACCEPTS RESPONSIBILITIES						X
CAN MAKE DECISIONS ON HIS OWN WHEN NEED ARISES						X
DOES HIS JOB WITHOUT STRONG SUPPORT						X
FACILITATES SMOOTH OPERATION OF HIS OFFICE						X
#WRITES EFFECTIVELY						X
SECURITY CONSCIOUS						X
THINKS CLEARLY						X
DISCIPLINE IN ORIGINATING, MAINTAINING AND DISPOSING OF RECORDS						X
OTHER (Specify):						
SEE SECTION "E" ON REVERSE SIDE						

SECRET

(When Filled In)

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

Stress 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.

JUL 21 251 PH '59

This employee is intelligent, loyal and dedicated to duty. She has an outstanding ability in getting her job assignments accomplished effectively and with a minimum of time and support. She readily accepts responsibility, is a highly efficient worker who thinks clearly and logically. Her knowledge of Headquarters and Field procedures plus her ability to organize her work greatly facilitates the smooth functioning of the Mexican Desk. She has demonstrated a superior comprehension of the numerous and varied projects of the [redacted] Station which has contributed to the overall Headquarters support of the Station's operations. Because of her sound understanding of operations and her outstanding capacity for work, Miss Zehrung has an excellent potential for assuming greater responsibilities. Additional training is dependent upon her future assignments.

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

Jul 21 1959

[Signature]

2.

BY SUPERVISOR

MONTHS EMPLOYEE HAS BEEN

UNDER MY SUPERVISION

22 months

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

EMPLOYEE UNDER MY SUPERVISION LESS THAN 90 DAYS

REPORT MADE WITHIN LAST 90 DAYS

OTHER (SPECIFY):

DATE

OFFICIAL TITLE OF SUPERVISOR

11 June 1959

C/WH/III/Mexico

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

OFFICIAL TITLE OF REVIEWING OFFICIAL

TYPED OR PRINTED NAME AND SIGNATURE

Jul 21 1959

C/WH/III

[Signature]
Ruth Dugigan**SECRET**

SECRET

(When Filled In)

FITNESS REPORT (Part II) PERFORMANCE**INSTRUCTIONS**

FOR THE ADMINISTRATIVE OFFICER: Consult current instructions for completing this report.

FOR THE SUPERVISOR: This report is designed to help you express your evaluation of your subordinate and to transmit this evaluation to your supervisor and senior officials. Organization policy requires that you inform the subordinate where he stands with you. Completion of the report can help you prepare for a discussion with him of his strengths and weaknesses. It is also organization policy that you show Part I of this report to the employee except under conditions specified in Regulation 20-370. It is recommended that you read the entire form before completing any question. If this is the initial report on the employee, it must be completed and forwarded to the Office of Personnel no later than 30 days after the date indicated in Item 8, of Section A below.

SECTION A.**GENERAL**

1. NAME (Last) <u>ZEHRUNG, Charlotte L.</u>	(First) <u></u>	(Middle) <u></u>	2. DATE OF BIRTH <u>12 Jan 1929</u>	3. SEX <u>F</u>	4. SERVICE DESIGNATION <u>DI</u>
5. OFFICE/DIVISION/BRANCH OF EMPLOYMENT <u>DDP/WH/II/DC/</u>		6. OFFICIAL POSITION TITLE <u>MEXICO Reports Officer</u>			
7. GRADE <u>GS-11</u>	8. DATE REPORT DUE IN ORIGINATING UNIT <u>4 Nov 1957</u>	9. PERIOD COVERED BY THIS REPORT (Inclusive dates) <u>28 August 1956 - 27 August 1957</u>			
10. TYPE OF REPORT (Check one) <input checked="" type="checkbox"/> ANNUAL		INITIAL	REASSIGNMENT-SUPERVISOR	SPECIAL (Specify)	
REASSIGNMENT-EMPLOYEE					

SECTION B.**CERTIFICATION**1. FOR THE RATER: THIS REPORT HAS HAS NOT BEEN SHOWN TO THE INDIVIDUAL RATED. IF NOT SHOWN, EXPLAIN WHY NOT:**A. CHECK (X) APPROPRIATE STATEMENTS:**

THIS REPORT REFLECTS MY OWN OPINIONS OF THIS INDIVIDUAL.	IF INDIVIDUAL IS RATED "F" IN C1 OR D, A WARNING LETTER WAS SENT TO HIM & A COPY ATTACHED TO THIS REPORT.
X THIS REPORT REFLECTS THE COMBINED OPINIONS OF MYSELF AND PREVIOUS SUPERVISORS.	I CANNOT CERTIFY THAT THE RATED INDIVIDUAL KNOWS HOW TO EVALUATE HIS JOB PERFORMANCE BECAUSE (Specify):
I HAVE DISCUSSED WITH THIS EMPLOYEE HIS STRENGTHS AND WEAKNESSES SO THAT HE KNOWS WHERE HE STANDS.	

B. THIS DATE**20 January 1958****D. SUPERVISOR'S OFFICIAL TITLE****C/WH/III/Mexico**

2. FOR THE REVIEWING OFFICIAL: RECORD ANY SUBSTANTIAL DIFFERENCE OF OPINION WITH THE SUPERVISOR, OR ANY OTHER INFORMATION, WHICH WILL LEAD TO A BETTER UNDERSTANDING OF THIS REPORT.

REVIEWING OFFICIAL	BY	DATE
R. M. Dahlgren	162	21 JAN 1958
REVIEWING OFFICIAL	INITIALS	DATE
R. M. Dahlgren	CMS	21 JAN 1958

[] CONTINUED ON ATTACHED SHEET

I certify that any substantial difference of opinion with the supervisor is reflected in the above section.

A. THIS DATE	B. TYPE OF REPORT	C. OFFICIAL TITLE OF REVIEWING OFFICIAL
21 January 1958	ANNUAL	C/WH/III

SECTION C.**JOB PERFORMANCE EVALUATION****1. RATING ON GENERAL PERFORMANCE OF DUTIES**

DIRECTIONS: Consider ONLY the productivity and effectiveness with which the individual being rated has performed his duties during the testing period. Compare him ONLY with others doing similar work at a similar level of responsibility. Factors other than productivity will be taken into account later in Section D.

- | | |
|---|--|
| 6 | 1. DOES NOT PERFORM DUTIES ADQUATELY. HE IS INCOMPETENT. |
| 5 | 2. HARLY INADEQUATE IN PERFORMANCE. ALTHOUGH HE HAS HAD SPECIFIC GUIDANCE OR TRAINING, HE OFTEN FAILS TO CARRY OUT RESPONSIBILITIES. |
| 4 | 3. PERFORMS MOST OF HIS DUTIES ACCEPTABLY. OCCASIONALLY REVEALS SOME AREA OF WEAKNESS. |
| 3 | 4. PERFORMS DUTIES IN A COMPETENT, EFFECTIVE MANNER. |
| 2 | 5. A FINE PERFORMANCE. CARRIES OUT MANY OF HIS RESPONSIBILITIES EXCEPTIONALLY WELL. |
| 1 | 6. PERFORMS HIS DUTIES IN SUCH AN OUTSTANDING MANNER THAT HE IS EQUALLED BY FEW OTHER PERSONS KNOWN TO THE SUPERVISOR. |

COMMENTS:

SECRET

(When Filled In)

SECTION C																									
1. RATINGS ON PERFORMANCE OF SPECIFIC DUTIES																									
DIRECTIONS a. State in the spaces below up to six of the more important SPECIFIC duties performed during this rating period. Place the most important first. Do not include minor or unimportant duties. b. Rate performance on each specific duty considering ONLY effectiveness in performance of this specific duty. c. For supervisors, ability to supervise will always be rated as a specific duty (do not rate as supervisor those who supervise a secretary only). d. Compare in your mind, when possible, the individual being rated with others doing the same duty at a similar level of responsibility. e. Two individuals with the same job title may be performing different duties. If so, rate them on different duties. f. Be specific. Examples of the kind of duties that might be rated are: <table border="0"> <tr><td>ORAL BRIEFING</td><td>HAS AND USES AREA KNOWLEDGE</td><td>DUCTS INTERROGATIONS</td></tr> <tr><td>GIVING LECTURES</td><td>DEVELOPS NEW PROGRAMS</td><td>PREPARES SUMMARIES</td></tr> <tr><td>CONDUCTING SEMINARS</td><td>ANALYZES INDUSTRIAL REPORTS</td><td>TRANSLATES GERMAN</td></tr> <tr><td>WRITING TECHNICAL REPORTS</td><td>MANAGES FILES</td><td>DEBRIEFING SOURCES</td></tr> <tr><td>CONDUCTING EXTERNAL LIAISON</td><td>OPERATES RADIO</td><td>KEEPS BOOKS</td></tr> <tr><td>TYPING</td><td>COORDINATES WITH OTHER OFFICES</td><td>DRIVES TRUCK</td></tr> <tr><td>TAKING DICTATION</td><td>WRITES REGULATIONS</td><td>MAINTAINS AIR CONDITIONING</td></tr> <tr><td>SUPERVISING</td><td>PREPARES CORRESPONDENCE</td><td>EVALUATES SIGNIFICANCE OF DATA</td></tr> </table> g. For some jobs, duties may be broken down even further if supervisor considers it advisable, e.g., combined key and phone operation, in the case of a radio operator.		ORAL BRIEFING	HAS AND USES AREA KNOWLEDGE	DUCTS INTERROGATIONS	GIVING LECTURES	DEVELOPS NEW PROGRAMS	PREPARES SUMMARIES	CONDUCTING SEMINARS	ANALYZES INDUSTRIAL REPORTS	TRANSLATES GERMAN	WRITING TECHNICAL REPORTS	MANAGES FILES	DEBRIEFING SOURCES	CONDUCTING EXTERNAL LIAISON	OPERATES RADIO	KEEPS BOOKS	TYPING	COORDINATES WITH OTHER OFFICES	DRIVES TRUCK	TAKING DICTATION	WRITES REGULATIONS	MAINTAINS AIR CONDITIONING	SUPERVISING	PREPARES CORRESPONDENCE	EVALUATES SIGNIFICANCE OF DATA
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2. NARRATIVE DESCRIPTION OF MANNER OF JOB PERFORMANCE <small>OUTLINES Strengths and weaknesses, particularly those which affect development on present job.</small> <p>This employee is a highly efficient worker who in accomplishing her job assignments has performed in a very outstanding manner. She has the ability to think clearly and logically and at all times exercises extreme good judgment. Her knowledge of his and field procedures constitutes a great asset and she has the facility for picking up loose ends and keeping an office smoothly running. She is willing to undertake any assignment that facilitates getting the job done and is entirely capable of seeing that the job is properly done. Her contribution to the job reflects conscientiousness, loyalty and devotion to duty far above the average.</p>																									
SECTION D. SUITABILITY FOR CURRENT JOB IN ORGANIZATION																									
DIRECTIONS Take into account here everything you know about the individual...productivity, conduct in the job, pertinent personal characteristics or habits, special defects or talents,...and how he fits in with your team. Compare him with others doing similar work of about the same level.																									
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IS THIS INDIVIDUAL BETTER SUITED FOR WORK IN SOME OTHER POSITION IN THE ORGANIZATION? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO IF YES EXPLAIN FULLY																									

SECRET

SECRET

Form Filled In

FITNESS REPORT (Part II) POTENTIAL

INSTRUCTIONS

FOR THE ADMINISTRATIVE OFFICER: Consult current instructions for completing this report.

FOR THE SUPERVISOR: This report is a privileged communication to your supervisor, and to appropriate career management and personnel officials concerning the potential of the employee being rated. It is NOT to be shown to the rated employee. It is recommended that you read the entire report before completing any question. This report is to be completed only after the employee has been under your supervision FOR AT LEAST 90 DAYS. If less than 90 days, hold and complete after the 90 days has elapsed. If this is the INITIAL REPORT on the employee, however, it MUST be completed and forwarded to the CWP no later than 30 days after the due date indicated in Item E of Section "F" below.

SECTION E.

GENERAL

1. NAME (Last) (First) (Middle)	2. DATE OF BIRTH	3. SEX	4. SERVICE DESIGNATION
ZEHNRUNG, Charlotte	12 Jan 1929	F	DI
5. OFFICE/DIVISION/BUSINESS UNIT	6. OFFICIAL POSITION TITLE		
DDP/WH/II/DC	Reports Officer		
7. GRADE	8. PERIOD COVERED BY THIS REPORT (Inclusive dates)		
GS-11	9. DATE REPORT DUE IN OFFICE	28 August 1956 - 27 August 1957	
10. TYPE OF REPORT (Check one)	INITIAL	REASSIGNMENT-SUPERVISOR	SPECIAL (Specify)
	ANNUAL	REASSIGNMENT-EMPLOYEE	

SECTION F.

CERTIFICATION

1. FOR THE RATER: I CERTIFY THAT THIS REPORT REPRESENTS MY BEST JUDGEMENT OF THE INDIVIDUAL BEING RATED

A. THIS DATE	B. TYPED OR PRINTED SIGNATURE	C. SUPERVISOR'S OFFICIAL TITLE
20 January 1958	<i>R. N. Dahlgren</i>	C/WH/III/Mexico

2. FOR THE REVIEWING OFFICIAL: I HAVE REVIEWED THIS REPORT AND NOTED ANY DIFFERENCE OF OPINION IN ATTACHED MEMO.

A. THIS DATE	B. TYPED OR PRINTED SIGNATURE	C. OFFICIAL TITLE OF REVIEWING OFFICIAL
21 January 1958	<i>R. N. Dahlgren</i>	C/WH/III

SECTION G.

ESTIMATE OF POTENTIAL

1. POTENTIAL TO ASSUME GREATER RESPONSIBILITIES

DIRECTIONS: Considering others of his grade and type of assignment, rate the employee's potential to assume greater responsibilities. Think in terms of the kind of responsibility encountered at the various levels in his kind of work.

6

- 1 - ALREADY ABOVE THE LEVEL AT WHICH SATISFACTORY PERFORMANCE CAN BE EXPECTED
- 2 - HAS REACHED THE HIGHEST LEVEL AT WHICH SATISFACTORY PERFORMANCE CAN BE EXPECTED
- 3 - MAKING PROGRESS - BUT NEEDS MORE TIME BEFORE HE CAN BE TRAINED TO ASSUME GREATER RESPONSIBILITIES
- 4 - READY FOR TRAINING IN ASSUMING GREATER RESPONSIBILITIES
- 5 - WILL PROBABLY ADJUST QUICKLY TO NEW RESPONSIBLE DUTIES WITHOUT FURTHER TRAINING
- 6 - ALREADY ASSUMING MORE RESPONSIBILITIES THAN EXPECTED AT HIS PRESENT LEVEL
- 7 - AN EXCEPTIONAL PERSON WHO IS ONE OF THE FEW WHO SHOULD BE CONSIDERED FOR EARLY ASSUMPTION OF HIGHER LEVEL RESPONSIBILITIES

2. SUPERVISORY POTENTIAL

DIRECTIONS: Answer this question: Has this person the ability to be a supervisor? Yes No. If your answer is YES, indicate below your opinion or guess of the level of supervisory ability this person will reach AFTER SUITABLE TRAINING. Indicate your opinion by placing the number of the descriptive rating below which comes closest to expressing your opinion in the appropriate column. If your rating is based on observing him supervise, note your rating in the "actual" column. If based on opinion of his potential, note the rating in the "potential" column.

DESCRITIVE RATING ACTUAL POTENTIAL
0 - HAVE NO OPINION ON HIS SUPERVISORY POTENTIAL IN THIS SITUATION
1 - BELIEVE INDIVIDUAL WOULD BE A WEAK SUPERVISOR IN THIS KIND OF SITUATION
2 - BELIEVE INDIVIDUAL WOULD BE AN AVERAGE SUPERVISOR IN THIS KIND OF SITUATION
3 - BELIEVE INDIVIDUAL WOULD BE A STRONG SUPERVISOR IN THIS SITUATION

ACTUAL	POTENTIAL	DESCRIPTIVE SITUATION
3		A GROUP DOING THE BASIC JOB (Driver, messenger, technician or professional specialist of various kinds) WHERE CONTACT WITH IMMEDIATE SUBORDINATES IS FREQUENT (First line supervisor).
3		A GROUP OF SUPERVISORS WHO SUPERVISE THE BASIC JOB (Second line supervisor).
2		A GROUP WHO MAY OR MAY NOT BE SUPERVISORS, WHO IS RESPONSIBLE FOR MAJOR PLANS, ORGANIZATION AND POLICY (Executive level).
	3	WHEN CONTACT WITH IMMEDIATE SUBORDINATES IS NOT FREQUENT
	2	WHEN IMMEDIATE SUBORDINATES' ACTIVITIES ARE DIVERSE AND NEED CAREFUL COORDINATION
3		WHEN IMMEDIATE SUBORDINATES INCLUDE MEMBERS OF THE OPPONENT TEAM
		State (Specify)

SECRET
(When Filled In)

OFFICE OF PERSONNEL

3. INDICATE THE APPROXIMATE NUMBER OF MONTHS THE RATED EMPLOYEE HAS BEEN UNDER YOUR SUPERVISION

7 months

JAN 24

2 09 PM '58

4. COMMENTS CONCERNING POTENTIAL

Her potential has a wide range. She has the ability to organize and direct a sizeable office of reports writers and to supervise the administrative operations for a large office. She has a distinct aptitude for operations and her potential in the field of operational support work as well as in the direct handling of operations is a good one.

SECTION H.

FUTURE PLANS

1. TRAINING OR OTHER DEVELOPMENTAL EXPERIENCE PLANNED FOR THE INDIVIDUAL

None recommended at this time.

2. NOTE OTHER FACTORS, INCLUDING PERSONAL CIRCUMSTANCES, TO BE TAKEN INTO ACCOUNT IN INDIVIDUAL'S FUTURE ASSIGNMENTS

SECTION I.

DESCRIPTION OF INDIVIDUAL

DIRECTIONS: This section is provided as an aid to describing the individual as you see him on the job. Interpret the words literally. On the page below are a series of statements that apply in some degree to most people. To the left of each statement is a box under the heading "category." Read each statement and insert in the box the category number which best tells how much the statement applies to the person covered by this report.

X - HAVE NOT OBSERVED THIS; HENCE CAN GIVE NO OPINION AS TO HOW THE DESCRIPTION APPLIES TO THE INDIVIDUAL

1 - APPLIES TO THE INDIVIDUAL TO THE LEAST POSSIBLE DEGREE

CATEGORY NUMBER 2 - APPLIES TO INDIVIDUAL TO A LIMITED DEGREE
3 - APPLIES TO INDIVIDUAL TO AN AVERAGE DEGREE
4 - APPLIES TO INDIVIDUAL TO AN ABOVE AVERAGE DEGREE
5 - APPLIES TO INDIVIDUAL TO AN OUTSTANDING DEGREE

CATEGORY	STATEMENT	CATEGORY	STATEMENT	CATEGORY	STATEMENT
5	1. ABLE TO SEE AND HEAR AT POINT OF VIEW	1	11. HAS HIGH STANDARDS OF ACCOMPLISHMENT	4	21. IS EFFECTIVE IN DISCUSSIONS WITH ASSOCIATES
5	2. CAN MAKE DECISIONS ON HIS OWN WHEN NEED ARISES	3	12. SHOWS ORIGINALITY	4	22. IMPLEMENTS DECISIONS REGARDLESS OF OWN FEELINGS
5	3. HAS INITIATIVE	5	13. ACCEPTS RESPONSIBILITY EASILY	4	23. IS THOUGHTFUL OF OTHERS
5	4. IS ANALYTIC IN HIS THINKING	4	14. ADMITS HIS ERRORS	5	24. WORKS WELL UNDER PRESSURE
4	5. STRIVES CONSTANTLY FOR NEW KNOWLEDGE AND IDEAS	4	15. RESPONDS WELL TO SUPERVISION	5	25. DISPLAYS JUDGEMENT
4	6. KNOWS WHEN TO SEEK ASSISTANCE	5	16. DOES HIS JOB WITHOUT STRONG SUPPORT	5	26. IS SECURITY CONSCIOUS
4	7. CAN GET ALONG WITH PEOPLE	4	17. COMES UP WITH SOLUTIONS TO PROBLEMS	5	27. IS VERSATILE
4	8. HAS MEMORY FOR FACTS	4	18. IS PERSISTENT	4	28. HIS CRITICISM IS CONSTRUCTIVE
5	9. GETS THINGS DONE	5	19. THINKS CLEARLY	5	29. FACILITATES SMOOTH OPERATION OF HIS OFFICE
5	10. CAN COP WITH EMERGENCIES	5	20. COMPLETES ASSIGNMENTS WITHIN ALLOWABLE TIME	5	30. DOES NOT REQUIRE STRONG AND DANTINEOUS SUPERVISION

SECRET

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(When filled in)

NOTE TO PCS RETURNEES

Personnel processing in from a PCS foreign field assignment through Central Processing Branch are required to review the Employee Conduct Handbook and the information for PCS returnees. This information is contained in a notebook provided by the CPB receptionist.

MEMORANDUM OF UNDERSTANDING

I hereby acknowledge that I have read and understand the contents of Handbook 20-4, Employee Conduct, dated 9 July 1970 and the information for returnees dated 1 February 1972.

CHARACTER OR RESEMBLANCE
NAME
(Please Print)

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(When filled in)

~~Group 1 - Excluded from automatic downgrading and declassification.~~

SECRET
(When Pinned In)

EURE

REPORT OF SERVICE ABROAD

PUNCHED
BY

To: Office of Personnel, Control Division, Statistical Reporting Branch

SERIAL NO.			LAST			FIRST			NAME				
1-6 007667			(Print) Bustos videla			7-24 Chedlette			MIDDLE Z				
INSTRUCTIONS													
USE APPROPRIATE SPACE BELOW TO REPORT DATA FOR EITHER PCS OR TDY. INSERT APPROPRIATE CODE NUMBER IN "CODE" COLUMN TO DESIGNATE WHETHER SUBMISSION IS OF BASIC DATA, CORRECTION, OR CANCELLATION (One only). REPORT DATES BY USING THE NUMBER FOR THE MONTH, AND LAST TWO DIGITS ONLY FOR YEAR. REFER TO OFI. NO. 38, REVISED.													
PCS DATES OF SERVICE													
ARRIVAL O/S			DEPARTURE O/S			TYPE OF DATA			O/P USE ONLY	COUNTRY			
MONTH	DAY	YEAR	MONTH	DAY	YEAR	1 - PCS (Basic) 3 - CORRECTION 5 - CANCELLATION			CODE 27	30 30			
29-28	27-28	29-30	31-32	23-24	35-36						CODE 40-42		
TDY DATES OF SERVICE													
ARRIVAL O/S			DEPARTURE O/S			TYPE OF DATA			O/P USE ONLY	AREAS			
MONTH	DAY	YEAR	MONTH	DAY	YEAR	2 - TDY (Basic) 4 - CORRECTION 6 - CANCELLATION			CODE 27	30 30			
29-28	27-28	29-30	31-32	23-24	35-36						CODE 40-42		
OFFICE OF PERSONNEL USE ONLY - PUNCH AREA													
SOURCE DOCUMENT AND CERTIFICATION													
TRAVEL VOUCHER						DISPATCH							
<input checked="" type="checkbox"/> CABLE						DUTY STATUS OR TIME AND ATTENDANCE REPORT							
<input type="checkbox"/> OTHER (Specify)													
DOCUMENT IDENTIFICATION NO.						DOCUMENT DATE/PERIOD							
EN 680799						8/16/74							
REMARKS													
PREPARED BY			REPORT ANNOTATED ON CONTROL DOCUMENT			ANGLE DATA CERTIFIED CORRECT, BASED UPON SOURCE DOCUMENT CITED							
CCO													
C O L DIVISION, CFB			DATE			SIGNATURE							
E S T DIVISION			5/16/72			K							
THIS REPORT WILL BE FILED IN THE OFFICE OF PERSONNEL IN THE INDIVIDUAL'S OFFICIAL PERSONNEL FOLDER													

SECRET

OFF

FIELD REASSIGNMENT QUESTIONNAIRE				
DO NOT COMPLETE		FOR HEADQUARTERS USE ONLY		
NAME OF EMPLOYEE (use periods only if SAs)		DATE (from Item S-1a)	DATE (from Item S-2)	
Charlotte Z. Bustos-Videla		8 Sep 1971	8 Sep 1971	
DATE RECEIVED AT HEADQUARTERS:		DISPATCH NUMBER:	DATE RECEIVED BY CAREER SERVICE:	
15 September 1971		HMMT 11,086	8 Sep 1971	
TO BE COMPLETED BY EMPLOYEE				
1. DATE OF BIRTH	2. SERVICE DESIGN	3. YOUR CURRENT POSITION, TITLE AND GRADE	4. STATION OR BASE	5. CRYPT FOR CURRENT COVER
12 Jan 29		Cuba/CI; GS-13	Mexico City	
6a. DATE OF PCS ARRIVAL IN FIELD	6b. REQUESTED DATE OF DEPARTURE	6c. EXPECTED DATE OF FIRST CHECK-IN AT HQ	6d. DESIRED DATE TO REPORT TO DUTY AFTER LEAVE	
28 July 1967	9 Sept. 1972	-----	16 October (3 weeks H/L) (2 weeks A/L)	
7. NUMBER AND AGES OF DEPENDENTS WHO WILL TRAVEL WITH YOU				
None				
8. PERSONAL CIRCUMSTANCES THAT SHOULD BE CONSIDERED IN DETERMINING NEXT ASSIGNMENT: My husband is currently a professor in [redacted] so I may join him there.				
I would be agreeable to changing somewhat my departure date from Mexico if it would help in my accepting an [redacted] (My reason for requesting the two month extension is to insure my 5 years overseas duty so as to qualify for the organization's retirement plan.)				
9. LIST YOUR MAJOR DUTIES DURING CURRENT TOUR (see special note on transmittal form). (also attach personal cover questionnaire in accordance with CSI-F 240-B)				
<ol style="list-style-type: none"> Analysis of personality and target data from raw and finished reports, preparation of target studies, and finished intelligence dissems. Operational reporting: cables, dispatches, projects, progress reports, etc. Handling of outside transcribers. (off and on). Records control and purge of Station files. Preparation of memos for other components of LNCUFF. General Ops support IA typo work. 				
10. TRAINING DESIRED: INDICATE WHAT TRAINING YOU BELIEVE YOU SHOULD HAVE DURING THE NEXT SEVERAL YEARS				

SECRET

11. PREFERENCE FOR NEXT ASSIGNMENT.

11a. DESCRIBE BRIEFLY THE TYPE OF WORK YOU WOULD PREFER FOR NEXT ASSIGNMENT IF DIFFERENT FROM THAT INDICATED IN ITEM NO. 9 ABOVE. IF YOU HAVE MORE THAN ONE PREFERENCE, INDICATE YOUR CHOICE.

11b. INDICATE IF YOU DESIRE TO EXTEND YOUR CURRENT TOUR BY CHECKING IN APPROPRIATE BOX. ALSO INDICATE PREFERENCE FOR NEXT REGULAR ASSIGNMENT BY INSERTING 1, 2, OR 3 (FOR 1st, 2nd, AND 3rd choice) IN REMAINING BOXES. COMPLETE ALL ALTERNATE CHOICES AND OPTIONS IN ALL CASES EVEN THOUGH YOU ARE REQUESTING AN EXTENSION OF YOUR TOUR.

EXTEND TOUR 2 MONTHS AT CURRENT STATION TO 9 September
(date)

2 BE ASSIGNED TO DOD FOR A TOUR OF DUTY. INDICATE YOUR CHOICE OF DIVISION, WINDY OR OFFICE.
1ST CHOICE DOD 2ND CHOICE WINDY 3RD CHOICE OFFICE

1 BE ASSIGNED STATION. INDICATE CHOICE OF GEOGRAPHIC AREA OR SPECIALIZATION
1ST CHOICE 2ND CHOICE 3RD CHOICE

3 RETURN TO MY CURRENT STATION

TO BE COMPLETED BY FIELD STATION

12. IN CONSIDERATION OF THE EXPERIENCE AND PERFORMANCE OF THE EMPLOYEE AND HIS PREFERENCE FOR NEXT ASSIGNMENT, INDICATE YOUR RECOMMENDATION FOR HIS NEXT ASSIGNMENT AND TRAINING:

Those of you who know her realize that I would hardly give up even after five years on the job, without a fight, did not other reasons intervene. Her husband is working in now and so her remaining here any longer than needed for her to qualify for her retirement time, as she explains, is a needless hardship. (It would help us if you would confirm that time: is that the date needed for her to remain in order to qualify?) Please do your best to arrange

-continued

TO BE COMPLETED BY APPROPRIATE HEADQUARTERS OFFICE

13. IN CONSIDERATION OF THE EXPERIENCE AND PERFORMANCE OF THE EMPLOYEE, HIS PREFERENCE FOR NEXT ASSIGNMENT, AND THE STAFFING REQUIREMENTS OF YOUR COMPONENT, INDICATE YOUR COMPONENT'S RECOMMENDATION FOR HIS NEXT ASSIGNMENT AND TRAINING.

Subject will be assigned as chief of the CA Section, WH/Branch

One. She is being notified via HMMS 7580.

DATE <u>9 Jun 72</u>	TITLE <u>DC/WH/Pers</u>	SIGNATURE <u> </u>
----------------------	-------------------------	-------------------------------------

FOR USE BY CAREER SERVICE

14. APPROVED ASSIGNMENT:

15. EMPLOYEE NOTIFIED BY DISPATCH NO. DATED:
TABLE NO. DATED:

CAREER SERVICE REPRESENTATIVE: DATE:
(Signature)

SECRET

14-00000

12. CONTINUED

an assignment in [redacted] for her. She is such a valuable person that anyone who has worked with her would be glad to have her on the premises: so there is no need to try to "sell" her: it's just the question of whether the timing would be right, I should think.

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(When Filled In)

Complete in original. 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. This form will be filed in the employee's official personnel folder.

NAME OF EMPLOYEE (Last)	(First)	(Middle)	SOCIAL SECURITY NUMBER	
BUSTOS-VIDELA	Charlotte	Z		
I. RESIDENCE DATA				
PLACE OF RESIDENCE WHEN INITIALLY EMPLOYED BY AGENCY	LAST PLACE OF RESIDENCE IN CONTINENTAL U.S. (If appointed abroad)			
Washington, D.C.	Washington, D.C.			
PLACE IN CONTINENTAL U.S. DESIGNATED AS PERMANENT RESIDENCE	HOME LEAVE RESIDENCE			
Dayton, Ohio	Dayton, Ohio			
II. MARITAL STATUS (Check one)				
SINGLE	MARRIED	SEPARATED	DIVORCED	
If MARRIED, PLACE OF MARRIAGE			DATE OF MARRIAGE	
Dayton, Ohio			March 18, 1961	
If DIVORCED, PLACE OF DIVORCE DECREE			DATE OF DECREE	
NA			NA	
If WIDOWED, PLACE SPOUSE DIED			DATE SPOUSE DIED	
NA			NA	
III. PREVIOUSLY MARRIED, INDICATE NAME(S) OF SPOUSE, REASON(S) FOR TERMINATION, AND DATE(S)				
NA				
IV. MEMBERS OF FAMILY				
NAME OF SPOUSE	ADDRESS (No., Street, City, State, Zip Code)	TELEPHONE NO. MEXICO CIT.		
Cesar Bustos-Videla	Apartado Postal 6-940, Mexico 6, D.F. MEXICO	525-42-36		
NAME OF CHILDREN	ADDRESS	SEX	DATE OF BIRTH	
NA				
NAME OF YOUR FATHER (Or male guardian)	ADDRESS	TELEPHONE NO. PR.		
Samuel D. Zehrung	425 Dayton Towers Dr, Dayton, Ohio	51-222-2350		
NAME OF YOUR MOTHER (Or female guardian)	ADDRESS	TELEPHONE NO. S.		
Eazel Zehrung	Same	51-222-2350		
WHAT MEMBER(S) OF YOUR FAMILY, IF ANY, HAS BEEN TOLD OF YOUR AFFILIATION WITH THE ORGANIZATION IF CONTACT IS REQUIRED IN AN EMERGENCY.				
V. PERSON TO BE NOTIFIED IN CASE OF EMERGENCY				
NAME (Mr., Mrs., Miss) (Last-First-Middle)	RELATIONSHIP			
Cesar Bustos-Videla	husband			
HOME ADDRESS (No., Street, City, State, Zip Code)	HOME TELEPHONE NUMBER			
800 above	see above			
BUSINESS ADDRESS (No., Street, City, State, Zip Code) AND NAME OF EMPLOYER, IF APPLICABLE	BUSINESS TELEPHONE & EXTENSION			
Universidad de las Americas, Puebla, MEXICO				
IS THE INDIVIDUAL NAMED ABOVE SITTING OF YOUR AGENCY AFFILIATION? (If "No" give name and address of organization you believe you work for.)			YES	X
NO				
IS THIS INDIVIDUAL AUTHORIZED TO MAKE DECISIONS ON YOUR BEHALF IN THE EVENT YOU ARE INCAPABLE? (If "No" give name and address of person, if any, who can make such decisions in case of emergency.)			YES	X
NO				
DOES THIS INDIVIDUAL KNOW THAT HE HAS BEEN DESIGNATED AS YOUR EMERGENCY ADDRESSEE? (If answer is "No" explain why in Item 6.)			YES	X
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 6 ON THE REVERSE SIDE OF THIS FORM.				
CONTINUED ON REVERSE SIDE				
CURRENT RESIDENCE AND DEPENDENCY REPORT				

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5.

VOLUNTARY ENTRIES

Experience in the handling of employee emergencies has shown that the absence of certain personal data often delays and complicates the settlement of estate and financial matters. The information requested in this section may prove very useful to your family or attorney in the event of your disability or death and will be disclosed only when circumstances warrant.

INDICATE NAME AND ADDRESS OF ANY BANKING INSTITUTIONS WITH WHICH YOU HAVE ACCOUNTS AND THE NAMES IN WHICH THE ACCOUNTS ARE CARRIED.

All financial information is on file with our lawyer

Mr. John DAHLGREN
DAHLGREN DARNAGH & CLOSE
1000 Conn. Ave., N.W., Washington D.C.

ARE YOU A MEMBER OF THE NORTHWEST FEDERAL CREDIT UNION? YES NO

IF YES, DO YOU HAVE A JOINT ACCOUNT? YES NO

HAVE YOU COMPLETED A LAST WILL AND TESTAMENT? YES NO. (If "Yes" where is document located?)

On file with lawyer listed above

HAVE YOU PREPLANNED AN ARRANGED GUARDIANSHIP OF YOUR CHILDREN IN CASE OF COMMON DISASTER TO BOTH PARENTS?

YES NO. (If "Yes" give name(s) and address)

NA

HAVE YOU EXECUTED A POWER OF ATTORNEY? YES NO. (If "Yes", who possess the power of attorney?)

Believe the lawyer has this also

6.

ADDITIONAL DATA AND/OR CONTINUATION OF PRECEDING ITEMS

SIGNED AT	DATE	SIGNATURE
Eliz. J. Miller	22 June 1970	Elizabeth J. Miller

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MEMORANDUM OF UNDERSTANDING

I hereby acknowledge that I have read and understand the contents of Handbook 20-4, Employee Conduct, dated 7 October 1963, and the information brochure for PCS returnees, dated May 1964.

Marylee Duncanson
Signature

BUCKS Middle, Charlotte

22 Dec 1970
Date

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(When Filled In)

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FIELD REASSIGNMENT QUESTIONNAIRE

DO NOT COMPLETE FOR HEADQUARTERS USE ONLY

NAME OF EMPLOYEE (use pseudo only if SA)	DATE (from Item 5.1)	NAME OF SUPERVISOR (female)	DATE (from Item 5.2)
Charlotte Bustos-Videla	26 Jan. 70		26 Jan. 1970
DATE RECEIVED AT HEADQUARTERS:	DISPATCH NUMBER:	DATE RECEIVED BY CAREER SERVICE:	

2 Feb. 1970**HMMT-10102****10APR
1970**

TO BE COMPLETED BY EMPLOYEE

1. DATE OF BIRTH	2. SERVICE DESIGN	3. YOUR CURRENT POSITION, TITLE AND GRADE	4. STATION OR BASE	5. CRYPT FOR CURRENT COVER
12 Jan 29		Exec Assistant, GS-13	MEXICO CITY Station	
6a. DATE OF PCB ARRIVAL IN FIELD	6b. REQUESTED DATE OF DEPARTURE	6c. EXPECTED DATE OF FIRST CHECK-IN AT HQ	6d. DESIRED DATE TO REPORT TO DUTY AFTER LEAVE	
28 July 1967	16 Aug 1970	Will not go Hdqs unless requested	26 Oct 1970	

7. NUMBER AND AGES OF DEPENDENTS WHO WILL TRAVEL WITH YOU:

none

8. PERSONAL CIRCUMSTANCES THAT SHOULD BE CONSIDERED IN DETERMINING NEXT ASSIGNMENT:

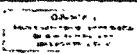
Subject wishes to remain overseas for a minimum of two more years to complete her 5 years overseas requirement.

9. LIST YOUR MAJOR DUTIES DURING CURRENT TOUR (see special note on transmittal form).
(also attach personal cover questionnaire in accordance with CSI-F 240-8)

1. During most of Subject's tour in Mexico she has been the Cuban IA. In this job she also handled some Cuban operational matters including [redacted] contract employees.
2. During this period she also handled some sensitive projects for the CCS.
3. During the last six months Subject has been Exec Asst to the COS/DCOS concentrating on file and administrative reorganization of the Station.
4. Subject has had supervisory responsibility over one to three clerical/TUY staff for short periods.

10. TRAINING DESIRED:
INDICATE WHAT TRAINING YOU BELIEVE YOU SHOULD HAVE DURING THE NEXT SEVERAL YEARS**None**

SECRET



SECRET

11. PREFERENCE FOR NEXT ASSIGNMENT:

11A. DESCRIBE BRIEFLY THE TYPE OF WORK YOU WOULD PREFER FOR NEXT ASSIGNMENT IF DIFFERENT FROM THAT INDICATED IN ITEM NO. 9 ABOVE. IF YOU HAVE MORE THAN ONE PREFERENCE, INDICATE YOUR CHOICE.

I enjoy both Administrative and Ops/IA work.

11B. INDICATE IF YOU DESIRE TO EXTEND YOUR CURRENT TOUR BY CHECKING IN APPROPRIATE BOX. ALSO INDICATE PREFERENCE FOR NEXT REGULAR ASSIGNMENT BY INSERTING 1, 2, & 3 (for 1st, 2nd, and 3rd choice) IN REMAINING BOXES. COMPLETE ALL ALTERNATE CHOICES AND OPTIONS IN ALL CASES EVEN THOUGH YOU ARE REQUESTING AN EXTENSION OF YOUR TOUR.

3 EXTEND TOUR: 12 MONTHS AT CURRENT STATION TO Aug 1971 (DATE)

BE ASSIGNED TO HQDTRS FOR A TOUR OF DUTY: INDICATE YOUR CHOICE OF DIVISION, STAFF OR OFFICE.
1ST CHOICE _____ 2ND CHOICE _____ 3RD CHOICE _____

1. BE ASSIGNED TO A [REDACTED] STATION: INDICATE CHOICE OF GEOGRAPHIC AREA OR SPECIALIZATION
1ST CHOICE _____ 2ND CHOICE _____ 3RD CHOICE _____

2 RETURN TO MY CURRENT STATION for 2nd tour.

TO BE COMPLETED BY FIELD STATION

12. IN CONSIDERATION OF THE EXPERIENCE AND PERFORMANCE OF THE EMPLOYEE AND HIS PREFERENCE FOR NEXT ASSIGNMENT, INDICATE YOUR RECOMMENDATION FOR HIS NEXT ASSIGNMENT AND TRAINING.

Would not stand in Subject's way, were she to be fortunate enough to get a [REDACTED] assignment. However with her long Mexico background (both Hdqs and field) and her multiple talents she has been invaluable in the reorganization of this highly complicated Station under changed circumstances, will continue to be so during the next several years and to lose her would be like losing one's right arm. Therefore we strongly endorse either a second tour or an extension.

TO BE COMPLETED BY APPROPRIATE HEADQUARTERS OFFICE

13. IN CONSIDERATION OF THE EXPERIENCE AND PERFORMANCE OF THE EMPLOYEE, HIS PREFERENCE FOR NEXT ASSIGNMENT, AND THE STAFFING REQUIREMENTS OF YOUR COMPONENT, INDICATE YOUR COMPONENT'S RECOMMENDATION FOR HIS NEXT ASSIGNMENT AND TRAINING.

WII Division recommends that subject return to Mexico City for a second tour.

DATE 11 Mar 70 TITLE C/Md/Pars SIGNATURE Henry L. Berthold

FOR USE BY CAREER SERVICE

14. APPROVED ASSIGNMENT:

New tour in Mexico City

15. EMPLOYEE NOTIFIED BY DISPATCH REC'D MMT 12721 DATED 12 Mar 70

CABLE REC'D. _____ DATED _____

CAREER SERVICE REPRESENTATIVE: _____ SIGNATURE: _____ DATE: _____

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(When Filled In)

Complete in original. 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. This form will be filed in the employee's official personnel folder.

NAME OF EMPLOYEE (Last) BUSTOS VIDELA	(First) PHILIP	(Middle) E.	SOCIAL SECURITY NUMBER
RESIDENCE DATA			
PLACE OF RESIDENCE WHEN INITIALLY EMPLOYED BY AGENCY WASHINGTON DC.	LAST PLACE OF RESIDENCE IN CONTINENTAL U.S. (If appointed abroad) N.A.		
PLACE IN CONTINENTAL U.S. DESIGNATED AS PERMANENT RESIDENCE WASHINGTON DC.	HOME LEAVE RESIDENCE DAYTON, OHIO , <i>appted</i> CENTRAL, DAYTON, OHIO , <i>appted</i> <i>Dayton, Ohio</i> <i>on 4 June 76</i>		
MARRITAL STATUS (Check one)			
SINGLE <input checked="" type="checkbox"/>	MARRIED <input type="checkbox"/>	SEPARATED <input type="checkbox"/>	DIVORCED <input type="checkbox"/>
IF MARRIED, PLACE OF MARRIAGE DAYTON, OHIO			DATE OF MARRIAGE MARCH 18, 1961
IF DIVORCED, PLACE OF DIVORCE DECREE NA			DATE OF DECREE
IF WIDOWED, PLACE SPOUSE DIED NA			DATE SPOUSE DIED
IF PREVIOUSLY MARRIED, INDICATE NAME(S) OF SPOUSE, REASON(S) FOR TERMINATION, AND DATE(S)			
NA.			
MEMBERS OF FAMILY			
NAME OF SPOUSE CESAR BUSTOS VIDELA	ADDRESS (No., Street, City, State, Zip Code) LAS AMERICAS UNIV., MEXICO CITY, MEXICO	TELEPHONE NO.	
NAME OF CHILDREN	ADDRESS	SEX	DATE OF BIRTH
NAME OF YOUR FATHER (Or male guardian) SAMUEL D. ZEHNUNG	ADDRESS (No., Street, City, State, Zip Code) 1415 DIVISION ROAD, DAYTON, OHIO	TELEPHONE NO.	
NAME OF YOUR MOTHER (Or female guardian) HAEL J. ZEHNUNG	ADDRESS ST. ANTO	TELEPHONE NO.	
WHAT MEMBER(S) OF YOUR FAMILY IF ANY, HAS BEEN TOLD OF YOUR AFFILIATION WITH THE ORGANIZATION IF CONTACT IS REQUIRED IN AN EMERGENCY. MR. ZEHNUNG, all my family - I am 44140, 15 July 67.			
PERSON TO BE NOTIFIED IN CASE OF EMERGENCY			
NAME (Mr., Mrs., Miss) (Last-First-Middle) MRS. PFLAUMER, Mary Elizabeth (MELDALE)	RELATIONSHIP 513-7612		
HOME ADDRESS (No., Street, City, State, Zip Code) 576 LAKE FOREST DRIVE, DAY VILLAGE, OHIO 44140	HOME TELEPHONE NUMBER 316-871-0689		
BUSINESS ADDRESS (No., Street, City, State, Zip Code) AND NAME OF EMPLOYER, IF APPLICABLE	BUSINESS TELEPHONE & EXTENSION		
IS THE INDIVIDUAL NAMED ABOVE HAVING OF YOUR AGENCY AFFILIATION? (If "No" give name and address of organization then by whom you work for.) My wife, Mrs. M. Elizabeth Pflamer, for govt.			
YES <input type="checkbox"/> NO <input checked="" type="checkbox"/>			
IS THIS INDIVIDUAL AUTHORIZED TO MAKE DECISIONS ON YOUR BEHALF IN THE EVENT YOU ARE INCAPABLE? (If "No" give name and address of person, if any, who can make such decisions in case of emergency.) Lawyer for my wife, Mrs. M. Elizabeth Pflamer may make			
YES <input type="checkbox"/> NO <input checked="" type="checkbox"/>			
DOES THIS INDIVIDUAL KNOW THAT HE HAS BEEN DESIGNATED AS YOUR EMERGENCY ADDRESSEE? (If answer is "No" explain why in Item 6.)			
YES <input checked="" type="checkbox"/> NO <input type="checkbox"/>			
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 6 ON THE REVERSE SIDE OF THIS FORM.			
CONTINUED ON REVERSE SIDE			
CURRENT RESIDENCE AND DEPENDENCY REPORT			

CONFIDENTIAL

(When Filled In)-

VOLUNTARY ENTRIES

6. Experience in the handling of employee emergencies has shown that the absence of certain personal data often delays and complicates the settlement of estate and financial matters. The information requested in this section may prove very useful to your family or attorney in the event of your disability or death and will be disclosed only when circumstances warrant.

INDICATE NAME AND ADDRESS OF ANY BANKING INSTITUTIONS WITH WHICH YOU HAVE ACCOUNTS AND THE NAMES IN WHICH THE ACCOUNTS ARE CARRIED.

The National Bank of Washington, Regent Circle Branch, Washington D.C.
joint account with husband
Columbia Federal Savings & Loan Assoc. 5301 Tice Ave. N.W. D.C.
joint account with husband.

ARE YOU A MEMBER OF THE NORTHWEST FEDERAL CREDIT UNION? YES NO

IF YES, DO YOU HAVE A JOINT ACCOUNT? YES NO

HAVE YOU COMPLETED A LAST WILL AND TESTAMENT? YES NO. (If "Yes" where is document located?)

Lawyer: Mr. John C. Babbitt
Babylon, Barron & Cloes
1000 Penn Ave., P.R.

HAVE YOU PREPLANNED AN ARRANGED GUARDIANSHIP OF YOUR CHILDREN IN CASE OF COMMON DISASTER TO BOTH PARENTS?

YES NO. (If "Yes" give name(s) and address)

HAVE YOU EXECUTED A POWER OF ATTORNEY? YES NO. (If "Yes", who receives the power of attorney?)
for everything else: The National Bank of Washington, D.C.

6. ADDITIONAL DATA AND/OR CONTINUATION OF PRECEDING ITEMS

SIGNED AT	DATE	SIGNATURE
	June 28 1967	Elisabeth J. Foster, Videotele

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**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
Bustos-Videla	Charlotte	Louise	January 12, 1929	
EMPLOYING DEPARTMENT OR AGENCY			LOCATION (City, State, ZIP Code)	
GPO				

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)

Charlotte J. Bustos-Videla

DATE

13 February 1968

FOR EMPLOYING OFFICE USE ONLY

(official receiving date stamp)

13 Feb 1968

63,113-1-1 LPH

See Table of Effective Dates on back of Original!

ORIGINAL COPY—Retain in Official Personnel Folder

SECRET

STANDARD FORM NO. 176-1
JANUARY 1968
(For use only until April 14, 1968)
GSA GEN. REG. NO. 276-121

SECRET
(When Filled In)

REPORT OF SERVICE ABROAD

TO: Office of Personnel, Transactions and Records Branch, Status Section

SERIAL NO.	LAST (Print)	FIRST	MIDDLE
1-6 007667	BUSTOS VIDELA	CHARLOTTE	Z

INSTRUCTIONS

USE APPROPRIATE SPACE BELOW TO REPORT DATA FOR EITHER PCS OR TDY. INSERT APPROPRIATE CODE NUMBER IN "CODE" COLUMN TO DESIGNATE WHETHER SUBMISSION IS OF BASIC DATA, CORRECTION, OR CANCELLATION (One only). REPORT DATES BY USING THE NUMBER FOR THE MONTH, AND LAST TWO DIGITS ONLY FOR YEAR. REFER TO OFI NO. 88, REVISED.

PCS DATES OF SERVICE

ARRIVAL O/S			DEPARTURE O/S			TYPE OF DATA			O/P USE ONLY	COUNTRY	
MONTH	DAY	YEAR	MONTH	DAY	YEAR	1 - PCS (Basic)	2 - CORRECTION	3 - CANCELLATION	CODE	CODE	CODE
25-26	27-28	29-30	31-32	33-34	35-36				37	38	39
0 7	2 8	6 7							1		

TDY DATES OF SERVICE

ARRIVAL O/S			DEPARTURE O/S			TYPE OF DATA			O/P USE ONLY	AREA(S)	
MONTH	DAY	YEAR	MONTH	DAY	YEAR	2 - TDY (Basic)	3 - CORRECTION	4 - CANCELLATION	CODE	CODE	CODE
25-26	27-28	29-30	31-32	33-34	35-36				37	38	39

OFFICE OF PERSONNEL USE ONLY - PUNCH AREA

SOURCE DOCUMENT AND CERTIFICATION

TRAVEL VOUCHER	DISPATCH
CABLE	X DUTY STATUS OR TIME AND ATTENDANCE REPORT
OTHER (Specify)	
DOCUMENT IDENTIFICATION NO. FORM 764	DOCUMENT DATE/PERIOD 2 - 29 JULY 1967

REMARKS

ARRIVAL DATE REPORTED UNDER "OTHER REMARKS" ON DUTY STATUS REPORT.

PREPARED BY OCO	REPORT ANNOTATED AND CONTROL DOCUMENT	ABOVE DATA CERTIFIED CORRECT, BASED UPON SOURCE DOCUMENT CITED
C & L DIVISION, CT&R.	DATE	SIGNATURE
X C & T DIVISION	16 APR 1968	

THIS REPORT WILL BE FILED IN THE OFFICE OF PERSONNEL
IN THE INDIVIDUAL'S OFFICIAL PERSONNEL FOLDER

SECRET

OFFICIAL USE ONLY (Ref. No. 18)

QUALIFICATIONS SUPPLEMENT TO PERSONAL HISTORY STATEMENT

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

BIOGRAPHIC AND POSITION DATA				
1 EMP SER NO PC7067	2 NAME (Last First Middle) BUSTOSVIDELA C J	3 SEX F	4 DATE OF BIRTH 01/12/29	5 SCHEDULE/GRADE/STEP GS - 13-06
6 TO D	7 POSITION TITLE DPS OFFICER	8 OFFICE OF ASSIGNMENT WH	9 LOCATION (Country, City) MEXICO CITY, MEXICO	
AGENCY OVERSEAS SERVICE				
AREA	TYPE TOUR	FROM	TO	
MEXICO CITY STATION NO OVERSEAS SERVICE	1st tour 2nd tour	27 JULY 1967 1970	10 JUNE 1970	
<div style="border: 1px solid black; padding: 10px; text-align: center;"> OVERSEAS DATA CODE: DATE: INITIALS: S 10 JUN 1970 </div>				
EDUCATION				
DEGREE	MAJOR FIELD	COLLEGE	YEAR	
BACH	ECONOMICS, GENERAL	SYRACUSE UNIV NY	50	

SECRET

Wheat Field in

~~SECRET~~

CERTIFICATION OF LANGUAGE PROFICIENCY

1. EMPLOYEE NO.	2. NAME (LAST-FIRST-MIDDLE)	3. TYPE CHANGE A=ADD C=CHANGE D=DELETE	4. LANGUAGE DATA PRIOR TO TEST LAN. CODE R W P S U T YR
BUSTOS-VIDELA, CHARLOTTE			
5. LANGUAGE DATA AFTER TEST LAN. CODE R W P S U T YR	6. DATE TESTED 10/17/72	7. DATE OF BIRTH 01/12/29	8. GRADE 13
9. OFFICE OR DIVISION NH			

NOTICE TO PERSON TESTED

10. ON THE DATE SHOWN IN ITEM 6 ABOVE, YOU WERE TESTED IN SPANISH (NEW WORLD) BL18
(NAME OF LANGUAGE)
AND YOUR TEST SCORES ARE AS FOLLOWS:

READING	WRITING	PRONUNCIATION	SPEAKING	UNDERSTANDING	TEST RATINGS	0 = ZERO I = INTERMEDIATE S = SLIGHT H = HIGH E = ELEMENTARY N = NATIVE
N	+	+	I+	H		

11. REMARKS "4" indicates no test. "I" indicates Speaking grade. CL BY 017470 EX-2 IMPDET WISMI	12. SIGNATURE RJF
	13. LD NUMBER 20723

FORM 1273 OBSOLETE PREVIOUS EDITIONS (10-68) **SECRET** GROUP 1 - OP/QAB
11-64 1273 UNCLASSIFIED FOR SECURITY INFORMATION AND RECLASSIFICATION
12-DIGITS MUST CONTAIN 20-DIGITS

4. DATE OF BIRTH MO DA YR	5. DATE CODED MO DA YR	THE DATA ABOVE (ITEMS 2 THRU 5) WILL BE FILLED IN WHEN CODING AN APPLICANT FOR THE FIRST TIME. THIS FORM IS THEN ATTACHED TO FORM 1962, MASTER QUALIFICATIONS CODING RECORD.
------------------------------	---------------------------	--

LANGUAGE CODING DATA - FORM 444C									
1. ID	2. EMPLOYEE NO.	3. NAME 3-LETTERS	4. LANGUAGE DATA CODE BASE CODE R W P S U T YR						
< 3	•	•	•						
5. DATE SUBMITTED MO DA YR	6. DATE OF BIRTH MO DA YR	WHEN FORM 444C DENOTES NO LANGUAGE COMPETENCE, ENTER THE FOLLOWING IN ITEM 4: "NO+LANGUAGE" (12-DIGITS)							

LANGUAGE PROFICIENCY TEST DATA										
1. ID	2. EMPLOYEE NO.	3. NAME 3-LETTERS	4. CODE C-A-D	5. LANGUAGE DATA CODE BASE CODE R W P S U T YR						
< 5	•	•	• C	• BL18	•	•	•	•	•	
6. LANGUAGE DATA AFTER TEST BASE CODE R W P S U T YR				7. DATE OF TEST MO DA YR				DATA FOR ITEM 2 THRU 7 IS EXTRACTED FROM FORM 1273, LANGUAGE PROFICIENCY AND AWARDS DATA.		
• BL18				• N I H I H 4 72				• 10 17 72		

QUALIFICATIONS RECORD CHANGE										
1. ID	2. EMP/APPL NO	3. NAME 3-LETTERS	ENTER UNDER "TYPE" - A = ADDITION TO RECORD C = CHANGE TO EXISTING RECORD D = DELETION OF DATA FROM EXISTING RECORD							
• 4	•	•								
TYPE			CODE # 1				CODE # 2			
•	•	•	•	•	•	•	•	•	•	
•	•	•	•	•	•	•	•	•	•	
•	•	•	•	•	•	•	•	•	•	
•	•	•	•	•	•	•	•	•	•	
•	•	•	•	•	•	•	•	•	•	
•	•	•	•	•	•	•	•	•	•	
•	•	•	•	•	•	•	•	•	•	
•	•	•	•	•	•	•	•	•	•	

SECRET

(WHEN FILLED IN)

CERTIFICATION OF LANGUAGE PROFICIENCY

1. EMPLOYEE NO.		2. NAME (LAST-FIRST-MIDDLE)		3. TYPE CHANGE		4. LANGUAGE DATA PRIOR TO TEST							
447667		BUSTOS-VIDELA, CHARLOTTE Z.		A=ADD C=CHANGE D=DELETE	CODE	LAN. CODE	R	W	P	S	U	I/T	YEAR
5. LANGUAGE DATA AFTER TEST		6. DATE TESTED		7. DATE OF BIRTH		8. GRADE	9. OFFICE OR DIVISION						
LAN. CODE	R	W	P	S	U	I/T	YEAR						
		06/22/67		01/12/39		13	WH						
NOTICE TO PERSON TESTED													
10. ON THE DATE SHOWN IN ITEM 6 ABOVE, YOU WERE TESTED IN <u>SPANISH (NEW WORLD) BL18</u> (NAME OF LANGUAGE) AND YOUR TEST SCORES ARE AS FOLLOWS:													
READING	WRITING	PRONUNCIATION	SPEAKING	UNDERSTANDING	TEST RATINGS	0 = ZERO 1 = INTERMEDIATE S = SLIGHT H = HIGH E = ELEMENTARY N = NATIVE							
I	CODED	S	H	I	E	N							
11. REMARKS FOR QUALIFICATIONS DATE 25 AUG 1967							12. SIGNATURE Kia						
							13. LD NUMBER 14168						
FORM 11-64 1273 OBSOLETE PREVIOUS EDITIONS		(10-48) SECRET		GROUP 1 EXCLUDED FROM AUTOMATIC DOWNGRADING AND DECLASSIFICATION		I - OP/QAB							
ITEM 11. MULTILANGUAGE LANGUAGE PROFICIENCY AWARDS DATA, 2 OCT 1967													

LANGUAGE PROFICIENCY TEST DATA													
1. ID	2. EMPLOYEE NO.	3. NAME	4. CODE	5. LANGUAGE DATA BEFORE TEST									
	447667	BLLS	C-A-D	BASE CODE	R	W	P	S	U	T	YR		
< 5	•	•	• C	BL18	H	I	H	H	N	4	6P		
6. LANGUAGE DATA AFTER TEST				7. DATE OF TEST									
BASE CODE	R	W	P	S	U	T	YR	MO	DA	YR	DATA FOR ITEM 2 THRU 7 IS EXTRACTED FROM FORM 1273 LANGUAGE PROFICIENCY AWARDS DATA, 2 OCT 1967		
BL18	1	1	H	1	1	4	67	06	22	67	< 6		

QUALIFICATIONS RECORD CHANGE												
1. ID	2. EMP/APPL NO.	3. NAME	ENTER UNDER "TYPE" -									
< 4	•	•	3-LETTERS									
A = ADDITION TO RECORD C = CHANGE TO EXISTING RECORD D = DELETION OF DATA FROM EXISTING RECORD												
TYPE	CODE # 1						CODE # 2					
	BASE	1	2	3	YR	BASE	1	2	3	YR		
D	•				•							
D	•				•							
D	•				•							
D	•				•							
D	•				•							
D	•				•							
D	•				•							
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D	•				•							

F-234 1962a

SECRETGROUP 1
EXCLUDED FROM AUTOMATIC DOWNGRADING
AND DECLASSIFICATION

14-311

SECRET

(When Filled In)

1. PERSONNEL SERIAL NO (1-6)		LANGUAGE PROFICIENCY AND AWARDS DATA					7. TO NO [Signature]	
3. NAME (7-24) LAST Tolunay, Charlotte		FIRST [Signature]	MIDDLE [Signature]	4. OFFICE OR DIVISION [Signature]	5. LANGUAGE [Signature]	6. LANG CODE (23-27) [Signature] 720		
7. DATE OF TEST (40-51) Oct. 11, 1964		8. ANNIVERSARY DATE Oct. 11, 1964		9. GRADE 12	10. DATE OF BIRTH Sept. 12, 1929			
11. REASON FOR TAKING TEST <input checked="" type="checkbox"/> APPLY FOR AWARD		12. TEST SCORES						
		READING (34)	WRITING (35)	PRONUNCIATION (36)	SPEAKING (37)	UNDERSTANDING (38)		
ESTABLISH SKILL LEVEL NA		A	B-I	C	D	E		
13. ELIGIBILITY (39)		14. TYPE OF AWARD						
<input checked="" type="checkbox"/> A M NA		ACHIEVEMENT (A)	ELEMENTARY (E) INTERMEDIATE (I) HIGH (H)	READING (R) SPEAKING (S) COMPREHENSIVE (C)	BASED ON TRAINING THAT WAS DIRECTED (D) OR VOLUNTARY (V)			
		A	B-I	C	V			
15. INELIGIBLE (REASONS)		16. I CERTIFY THIS EMPLOYEE FOR A PROFICIENCY AWARD OF \$ 100.00 (40-43)						
		SIGNATURE				DATE		
REMARKS		17. I CERTIFY THAT FUNDS ARE AVAILABLE						
		OBLIGATION REF. NO.				CHARGE ALLOTMENT NO.		
		SIGNATURE						

FORM 1273
5-60OBSCURE PREVIOUS
EDITIONS

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1343

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RHC

PERIODIC SUPPLEMENT PERSONAL HISTORY STATEMENT		THIS DATE 20 September 1957
INSTRUCTIONS		
<p>This form provides the means whereby your official personnel records will be kept current. Even though all information you have furnished previously, it will be necessary for you to complete Sections I through VI in these entries. You need complete Sections VII through XII only if there has been a change since you entered on duty with the organization or if you believe the item requires more complete treatment than you have previously reported.</p>		
SECTION I GENERAL		
1. FULL NAME (Last-First-Middle) ZEHUNG, Charlotte L. 2. CURRENT ADDRESS (No., Street, City, Zone, State) 3817 Davis Place, N. W., Washington 3. PERMANENT ADDRESS (No., Street, City, Zone, State) 5536 South Dixie Highway, Dayton 9, Ohio 4. HOME TELEPHONE NUMBER Em 2-1618 5. STATE, TERRITORY, POSSESSION OR COUNTRY IN WHICH YOU NOW CLAIM RESIDENCE Ohio		
SECTION II PERSON TO BE NOTIFIED IN CASE OF EMERGENCY		
1. NAME (Last-First-Middle) PREFERABLY RESIDING IN U.S. ZEHUNG, Samuel D. 2. RELATIONSHIP Father 3. HOME ADDRESS (No., Street, City, Zone, State, Country) 5536 South Dixie Highway, Dayton 9, Ohio 4. BUSINESS ADDRESS (No., Street, City, Zone, State, Country). INDICATE NAME OF FIRM OR EMPLOYER, IF APPLICABLE 5536 South Dixie Highway, Dayton 9, Ohio. San Rae Gardens 5. HOME TELEPHONE NUMBER No 2-3511 6. BUSINESS TELEPHONE NUMBER TO 3-3511 7. BUSINESS TELEPHONE EXTENSION None		
8. IN CASE OF EMERGENCY, OTHER CLOSE RELATIVES (Spouse, Mother, Father) MAY ALSO BE NOTIFIED. IF SUCH NOTIFICATION IS NOT DESIRABLE BECAUSE OF HEALTH OR OTHER REASONS, PLEASE SO STATE. 		
SECTION III MARITAL STATUS		
1. CHECK (X) ONE: <input checked="" type="checkbox"/> MARRIED <input type="checkbox"/> WIDOWED <input type="checkbox"/> SEPARATED <input type="checkbox"/> DIVORCED <input type="checkbox"/> ANNULLED 2. FURNISH DATE, PLACE AND REASON FOR ALL SEPARATIONS, DIVORCES OR ANNULMENTS		
<p>SPOUSE: If you have been married more than once, including annulments, use a separate sheet for former wife or husband giving date below for all previous marriages. If marriage is contemplated, provide same data for fiancé.</p>		
3. NAME (First) (F) (Middle) (M) (Last) (L) 4. DATE OF MARRIAGE PLACE OF MARRIAGE (City, State, Country) 5. ADDRESS OF SPOUSE BEFORE MARRIAGE 790 - Street, City, State, Country 6. LIVING Yes No 7. DATE OF DEATH 8. CAUSE OF DEATH 		
9. CURRENT ADDRESS (Give last address, if deceased)		
10. DATE OF BIRTH PLACE OF BIRTH (City, State, Country)		
11. IF BORN OUTSIDE U.S. DATE OF ENTRY PLACE OF ENTRY 		
12. CITIZENSHIP (Country) DATE ACQUIRED SOURCE OF ACQUISITION (Country) DATE ACQUIRED 		
13. OCCUPATION PRESENT EMPLOYER (Also give firm employed, or if spouse is deceased or unemployed, last two employers)		
14. EMPLOYER'S OR BUSINESS ADDRESS 5536 - Street, City, State, Country		

SECTION III CONTINUED ON PAGE 2

SECRET

QUALIFICATIONS

DATE 11 JUN 1958

SECRET

(When Filled In)

SECTION III CONTINUED FROM PAGE 3

71. DATES OF MILITARY SERVICE OF SPOUSE (From and To) BY MONTH AND YEAR

72. BRANCH OF SERVICE

73. COUNTRY WITH WHICH MILITARY SERVICE WAS RELATED

74. DETAILS OF OTHER GOVERNMENT SERVICE, U.S. OR FOREIGN

SECTION IV RELATIVES BY BLOOD, MARRIAGE OR ADOPTION LIVING ABROAD OR WHO ARE NOT U.S. CITIZENS

1. FULL NAME (Last-First-Middle)	2. RELATIONSHIP	3. AGE
4. ADDRESS OR COUNTRY IN WHICH RELATIVE RESIDES		
5. CITIZENSHIP (Country)	6. FREQUENCY OF CONTACT	7. DATE OF LAST CONTACT
1. FULL NAME (Last-First-Middle)	2. RELATIONSHIP	3. AGE
4. ADDRESS OR COUNTRY IN WHICH RELATIVE RESIDES		
5. CITIZENSHIP (Country)	6. FREQUENCY OF CONTACT	7. DATE OF LAST CONTACT
1. FULL NAME (Last-First-Middle)	2. RELATIONSHIP	3. AGE
4. ADDRESS OR COUNTRY IN WHICH RELATIVE RESIDES		
5. CITIZENSHIP (Country)	6. FREQUENCY OF CONTACT	7. DATE OF LAST CONTACT

8. SPECIAL REMARKS, IF ANY, CONCERNING THESE RELATIVES

SECTION V FINANCIAL STATUS

1. ARE YOU ENTIRELY DEPENDENT ON YOUR SALARY? YES NO

2. DO YOU HAVE ANY FINANCIAL INTEREST IN, OR OFFICIAL CONNECTION WITH, NON-U.S. CORPORATIONS OR BUSINESSES OR IN OR WITH U.S. CORPORATIONS OR BUSINESSES HAVING SUBSTANTIAL FOREIGN INTERESTS? YES NO IF YOU HAVE ANSWERED "YES," GIVE COMPLETE DETAILS ON A SEPARATE SHEET AND ATTACH IN A SEALED ENVELOPE.

3. DO YOU RECEIVE AN ANNUITY FROM THE UNITED STATES OR DISTRICT OF COLUMBIA GOVERNMENT UNDER ANY RETIREMENT ACT PENSION, OR COMPENSATION FOR MILITARY OR NAVAL SERVICE? YES NO

4. IF YOU HAVE ANSWERED "YES" TO QUESTION 3 ABOVE, GIVE COMPLETE DETAILS.

5. WITHOUT REFERENCE TO YOUR SALARY, STATE OTHER SOURCES OF RECURRENT INCOME NOT INDICATED BY PRECEDING ITEMS.

SECTION V CONTINUED TO PAGE 3

SECRET

SECRET

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SECTION V CONTINUED FROM PAGE 2

6. 你有沒有過性別認同問題？請選擇是或否。是或否：是或否

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SECRET

(When Filled In)

SECTION X CONTINUED FROM PAGE 8

7. LIST ANY SIGNIFICANT PUBLISHED MATERIALS OF WHICH YOU ARE THE AUTHOR (Do not submit copies unless requested). INDICATE TITLE, PUBLICATION DATE, AND TYPE OF WRITING (Non-fiction, scientific articles, general interest subjects, novels, short stories, etc.)

8. INDICATE ANY DEVICES WHICH YOU HAVE INVENTED AND STATE WHETHER OR NOT THEY ARE PATENTED

9. LIST ANY PUBLIC SPEAKING AND PUBLIC RELATIONS EXPERIENCE

10. LIST ANY PROFESSIONAL, ACADEMIC OR HONORARY ASSOCIATIONS OR SOCIETIES IN WHICH YOU ARE NOW OR WERE FORMERLY A MEMBER. LIST ACADEMIC HONORS YOU HAVE RECEIVED.

SECTION XI ORGANIZATION WORK EXPERIENCE - SINCE LAST COMPLETION OF A PERSONNEL QUALIFICATIONS QUESTIONNAIRE

1. INCLUSIVE DATES (From and To-)	2. GRADE	3. OFFICE/DIVISION/BRANCH OF ASSIGNMENT
27 Aug 51 - 27 Apr 52	5	DDP/WH/II (Hqs)
4. NO. OF EMPLOYEES UNDER YOUR DIRECT SUPERVISION	5. OFFICIAL POSITION TITLE	Secretary (Steno)
0		

6. DESCRIPTION OF DUTIES

1. INCLUSIVE DATES (From and To-)	2. GRADE	3. OFFICE/DIVISION/BRANCH OF ASSIGNMENT
27 Apr 52 - 27 Sept 53	7	DDP/WH/II (Hqs)
4. NO. OF EMPLOYEES UNDER YOUR DIRECT SUPERVISION	5. OFFICIAL POSITION TITLE	Intell Officer (Rpts)
1		

6. DESCRIPTION OF DUTIES

All duties of Reports Officer

1. INCLUSIVE DATES (From and To-)	2. GRADE	3. OFFICE/DIVISION/BRANCH OF ASSIGNMENT
27 Sept 53 - 10 Apr 55	9	DDP/WH/II (Hqs)
4. NO. OF EMPLOYEES UNDER YOUR DIRECT SUPERVISION	5. OFFICIAL POSITION TITLE	Reports Officer
one to two		

6. DESCRIPTION OF DUTIES

Duties of Chief reports officer af

1. INCLUSIVE DATES (From and To-)	2. GRADE	3. OFFICE/DIVISION/BRANCH OF ASSIGNMENT
10 Apr 55 - June 1957	11	DDP/WH/II (Hqs)
4. NO. OF EMPLOYEES UNDER YOUR DIRECT SUPERVISION	5. OFFICIAL POSITION TITLE	Chief Reports Officer
one - two		

6. DESCRIPTION OF DUTIES

1. INCLUSIVE DATES (From and To-)	2. GRADE	3. OFFICE/DIVISION/BRANCH OF ASSIGNMENT
June 1957 - present	11	DDP/WH/III (Hqs)
4. NO. OF EMPLOYEES UNDER YOUR DIRECT SUPERVISION	5. OFFICIAL POSITION TITLE	Reports Officer

6. DESCRIPTION OF DUTIES

(Use additional pages if required)

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SECRET
When Filled In)

~~SECRET~~
From Filled In

355

~~RECEIVED~~ ~~28 MARCH 1945~~
including spaces.) ~~PHOTOGRAPH~~

► SECTION XI

CHILDREN AND OTHER DEPENDENTS

1. NUMBER OF CHILDREN (including stepchildren and adopted children) WHO ARE UNMARRIED, UNDER 21 YEARS OF AGE, AND ARE NOT SELF-SUPPORTING.

- 2 NUMBER OF OTHER DEPENDENTS (including spouse, parents, stepparents, sibling, etc.)
WHO DEPEND ON YOU FOR AT LEAST 50% OF
THEIR SUPPORT, OR CHILDREN UNDER
DE AGE WHO ARE NOT FULLY SUPPORTED
BY ANOTHER PERSON

3. PROVIDE THE FOLLOWING INFORMATION FOR ALL CHILDREN AND DEPENDENTS

ADDITIONAL COMMENT AND/OR CONTINUATION OF PRECEDING ITEMS

DATE COMPLETED

DATE COMPLETED
10 Sept 57

5102-AP-22 2010-06-21

SECRET

SECRET

SECRET
(When Filled In)

1. PERSONNEL SERIAL NO. (1-6)		LANGUAGE PROFICIENCY AND AWARDS DATA					2. L.D.NO.	
3. NAME (7-24)		4. COMPONENT		5. GRADE		6. DATE OF BIRTH		
John Doe, Charlotte		11		11		Jan. 12, 1920		
7. LANGUAGE		8. CODE (25-27)		9. DATE OF TEST		10. ANNIVERSARY DATE (20-33)		
Spanish		123		Dec. 22, 1962		Aug. 2, 1967		
11. TEST PURPOSE		TEST SCORES				13. ELIGIBILITY (30)		
AWARD SKILL		READING (34)	WRITING (35)	PRONUNCIATION (36)	SPEAKING (37)	UNDERSTANDING (38)	AWARDABLE A M	NOT AWARDABLE N
14. I CERTIFY THIS EMPLOYEE FOR AWARD								
SIGNATURE		DATE		15. TYPE OF AWARD				
				A-M	B-I-H	C	R-W-B	D-V
				11	11		11	
16. AMOUNT OF AWARD		\$ 100.00		17. I CERTIFY THAT FUNDS ARE AVAILABLE				
				OBLIGATION REF. NO. SIGNATURE				
18. FEDERAL TAX DEDUCTION		\$		20. CHARGE ALLOTMENT NO. DATE				
19. STATE/DC TAX DEDUCTION		\$		22. EMPLOYEE PAYROLL NO.				
21. NET AMOUNT OF AWARD		\$		24. ALLOTMENT OF ASSIGNMENT				
23. FORWARD CHECK TO				25. CHECK NO. DATE				

FORM 4-58 1273 USE PREVIOUS EDITIONS

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(When Filled In)

1. PERSONNEL SERIAL NO. (1-6)		LANGUAGE PROFICIENCY AND AWARDS DATA					2. L.D.NO.	
3. NAME (7-24)		4. COMPONENT		5. GRADE		6. DATE OF BIRTH		
John Doe, Charlotte		11		11		Jan. 12, 1920		
7. LANGUAGE		8. CODE (25-27)		9. DATE OF TEST		10. ANNIVERSARY DATE (20-33)		
Spanish		123		Dec. 22, 1962		Aug. 2, 1967		
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AWARD SKILL		READING (34)	WRITING (35)	PRONUNCIATION (36)	SPEAKING (37)	UNDERSTANDING (38)	AWARDABLE A M	NOT AWARDABLE N
14. I CERTIFY THIS EMPLOYEE FOR AWARD		DATE		15. TYPE OF AWARD				
SIGNATURE				A-M	B-I-H	C	R-W-B	D-V
				11	11		11	
16. AMOUNT OF AWARD		\$ 100.00		17. I CERTIFY THAT FUNDS ARE AVAILABLE				
				OBLIGATION REF. NO. SIGNATURE				
18. FEDERAL TAX DEDUCTION		\$		20. CHARGE ALLOTMENT NO. DATE				
19. STATE/DC TAX DEDUCTION		\$		22. EMPLOYEE PAYROLL NO.				
21. NET AMOUNT OF AWARD		\$		24. ALLOTMENT OF ASSIGNMENT				
23. FORWARD CHECK TO		NO. 77 W.C. Bldg. 100 Main		25. CHECK NO. DATE				

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(1-6)	LANGUAGE DATA RECORD		
PART I-GENERAL			
1. NAME (Last-First-Middle) (7-24)		2. DATE OF BIRTH (12-30)	
ZEHKUNO, Charlotte Louise		Month	DAY
3. LANGUAGE (31-33)	4. TODAY'S DATE (34-36)	5.	
Spanish 720	Month April	DAY 2	YEAR 1957
<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) 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) 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) 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 III-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 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. 251115, PAR, IC(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	SIGNATURE
2 April 1957	<i>Caroline E. Zehnay</i>
1463	(D) 1657

HEADLINE: 19 Sept. 1952

SECRET
Security Information

ZEHRENG, Charlotte L.
Name: Last, First Middle

G-2000

FC

TO: All C. I. A. Personnel

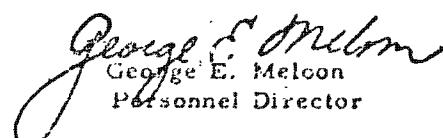
FROM: Personnel Director

SUBJECT: PERSONNEL QUALIFICATION QUESTIONNAIRE

1. The Agency is currently revising the system for machine coding employee qualifications, thereby permitting more complete and accurate data on all personnel. The new system will aid in implementing Agency policies on promotion from within by facilitating the selection of personnel with desired education and experience for vacancies which may occur. It is also expected that the new system will provide readily accessible statistics for planning and management purposes.

2. The attached questionnaire is designed to cover adequately those factors in which the Agency is interested. Although the information is, in a large measure, already reflected in previous forms submitted by you, it is felt that your time within the organization may enable you to emphasize those qualifications pertinent to its needs. The questionnaire also serves to bring your education and qualifications record up to date.

3. Your cooperation is requested in completing the questionnaire as thoroughly and accurately as possible and returning it to your Administrative Officer within the time allotted.



George E. Melcon
Personnel Director

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Security Information

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PERSONNEL QUALIFICATION QUESTIONNAIRE

1. Serial No. (no entry)	2. NAME: (last) (first) (middle)			3. Office
7667	ZEHRING	Charlotte	Luisa	FI
4. Date of Birth 12 Jan. 1929	5. Sex: <input checked="" type="checkbox"/> female (2)	Martial Status <input type="checkbox"/>	Nr. Dependents <input type="checkbox"/> 0	6. CIA Entry Date: August 1961
7. Citizenship: <input checked="" type="checkbox"/> U.S. <input type="checkbox"/> Other	8. Acquired By: (1) <input checked="" type="checkbox"/> Birth (2) Marriage (3) Naturalization (4) Other(specify) Year U.S. citizenship acquired, if not by birth _____			

SEC. I. EDUCATION

1. Extent: (circle one)

- | | | |
|--|-------------------------------|---|
| 1. Less than high school | 4. Two years college, or less | 8. Masters degree |
| 2. High school graduate | 5. Over two years, no degree | 9. Doctors degree |
| 3. Trade, Business or
Commercial school
graduate | ⑥ Bachelor degree | 7. Post-graduate study
(minimum 8 sem. hrs.) |

2. College or University Study:

Name and location of College or University	Major	Minor	Dates att'd		Yrs Compl		Degree Recd	Sem Hrs
			From	To	Day	Night		
Syracuse University	Econ.	Span.	9/46	1/61	4		B. A.	1/50 115
San Carlos University	Span.		7/48	9/60				5

3. Trade, Commercial, and Specialized Training:

School	Attendance Dates			Study or Specialization
	From	To	Tot. mo's	
Miami Jacobs Business College	5/50	12/50	7	typing and shorthand

4. Military or Intelligence Training (full time duty as a student in specialized schools such as intelligence, communications, ordnance disposal, command & staff, etc.)

School	Attendance Dates			Study or Specialization
	From	To	Tot. mo's	

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Security Information

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Security Information

SEC. II. WORK EXPERIENCE

1. CIA Experience: State the specific nature of duties performed with CIA and CIG, starting with your present position. Take position titles from your official personnel papers, if you have personal copies. Please do not request your Official Personnel Folder. Include geographic area and subject matter dealt with, if applicable. Position Title is your classification title such as Geographer, Intelligence Officer, etc. Duty Title indicates your organization position such as - Section Chief, Branch Chief, Administrative Assistant, etc., and is to be filled in only if different to the Position Title. Approximate dates (month and year) are sufficient. Use a continuation sheet, if necessary, to adequately describe your duties.

From <u>4/52</u>	To <u></u>	Tot. mos. <u>1</u>	Description of Duties: I have the responsibility of disseminating and routing all reports received from our station, take appropriate action on reports received from other agencies by forwarding this information to the field or supplying requested data. I inform the field of additional info at Headquarters on individuals and organizations as requested or as deemed necessary. I also maintain Duty Station, if overseas: two CB notebooks.
Grade <u>7</u>	Salary <u>\$1200.00</u>		
Office <u>PI/DH/Brazil</u>			
Position			
Title: <u>Intelligence Officer</u>			
Duty			
Title: <u>Reports Officer</u>			
From <u>12/51</u>	To <u>4/52</u>	Tot. mos. <u>3</u>	Description of Duties: Same as above with a Dut. station. I had less individual responsibility.
Grade <u>5</u>	Salary <u>\$3410.00</u>		
Office <u>PI/DH/Brazil</u>			
Position			
Title: <u>Intelligence Officer</u>			
Duty			
Title: <u>Reports Officer</u>			Duty Station, if overseas:
From <u>11/51</u>	To <u></u>	Tot. mos. <u>1</u>	Description of Duties: As a casuall I typed dispatches, memoranda, and disseminations for Branch II. I took a limited amount of shorthand.
Grade <u>5</u>	Salary <u>\$3410.00</u>		
Office <u>PI/SH/II</u>			
Position			
Title: <u>Secretary (Stenography)</u>			
Duty			
Title: <u></u>			Duty Station, if overseas:
From <u>9/51</u>	To <u></u>	Tot. mos. <u>1</u>	Description of Duties: I assembled disseminated reports.
Grade <u>5</u>	Salary <u>\$3410.00</u>		
Office <u>PC</u>			
Position			
Title: <u>Secretary (Stenography)</u>			
Duty			
Title: <u></u>			Duty Station, if overseas:

Two months in the pool attending classes w/ setting up filing system for Russian
SECRET Index cards.

Security Information

SECRET**Security Information****SEC. II. WORK EXPERIENCE (CONT'D.)**

2. Other than CIA: (Describe work experience for the last 15 years in sufficient detail to permit specific coding of your qualifications. Include military work experience. List last position first.)

From <u>4/51</u> To <u>2/51</u> Tot. mo's <u>1</u> Classification Grade(if in Federal Service) <u>3</u> Salary <u>\$2650.00</u> Number and Class of Employees Supervised: <u>none</u> Employer <u>Department of Interior</u> Kind of Business or organization (i.e., paper products mfr, public utility)	Exact Title of your position _____ <u>Statistical draftsman</u> Description of Duties: _____ <u>I did statistical drafting, cartography, marking of maps for the surveyor, technical and other scientific publications.</u> Duty Station if overseas: _____
From <u>5/50</u> To <u>3/51</u> Tot. mo's <u>11</u> Classification Grade(if in Federal Service) <u>Salary 1.10/hr.</u> Number and Class of Employees Supervised: <u>2 - 5 clerks</u> Employer <u>Gift Shoppe, Inc., Greenville</u> Kind of Business or organization (i.e., paper products mfr, public utility)	Exact Title of your position _____ Description of Duties: <u>An as assistant to the executives I was responsible for purchasing stock for the gift shoppe and I assisted 4 clerks and greenhouse employees. I had full responsibility of the books and cash. I made reports on the business and acted as sales clerk for the shoppe.</u> Duty Station if overseas: <u>and a landscaping busi</u>
From <u>2/50</u> To <u>5/50</u> Tot. mo's <u>4</u> Classification Grade(if in Federal Service) <u>Salary \$200 / mo.</u> Number and Class of Employees Supervised: Employer <u>National Peanut Council</u> Kind of Business or organization (i.e., paper products mfr, public utility)	Exact Title of your position _____ <u>Assistant Bookkeeper</u> Description of Duties: _____ <u>I made monthly financial reports, had the responsibility of the books, did typing and other general office work.</u> Duty Station if overseas: _____
From <u>6/47</u> To <u>2/47</u> Tot. mo's <u>3</u> Classification Grade(if in Federal Service) <u>Salary</u> Number and Class of Employees Supervised: Employer <u>Frigidaire Co., Inc., To</u> Kind of Business or organization (i.e., paper products mfr, public utility)	Exact Title of your position _____ Description of Duties: <u>I worked one month in the office of the Chemical laboratory and two months in the factory.</u> Duty Station if overseas: _____
From _____ To _____ Tot. mo's _____ Classification Grade(if in Federal Service) _____ Salary _____ Number and Class of Employees Supervised: Employer _____ Kind of Business or organization (i.e., paper products mfr, public utility)	Exact Title of your position _____ Description of Duties: _____ Duty Station if overseas: _____

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SEC. II. WORK EXPERIENCE (CONT'D)

3. Special Work Experience: Check any of the following organizations by which you may have been employed.

- | | | | |
|----|------------------------------|----|------------------------------|
| 01 | U. S. Secret Service | 24 | Air Force A-2 |
| 02 | Civil Police | 25 | Foreign Economic Admin. |
| 03 | Military Police | 26 | Counter Intelligence Corps |
| 04 | U. S. Border Patrol | 27 | Immigration & Naturalization |
| 05 | U. S. Narcotics Squad | 28 | Strategic Services Unit |
| 06 | FBI | 29 | Foreign Service, State Dept. |
| 07 | Criminal Investigation Div. | 30 | Central Intelligence Group |
| 21 | Office of Naval Intelligence | 31 | Armed Forces Security Agency |
| 22 | Office of War Information | 32 | Coordinator of Information |
| 23 | Army G-2 | 33 | Office of Facts & Figures |
| 20 | Office of Strategic Services | 34 | Board of Economic Warfare |
| | | 35 | Federal Communications Comm. |

SEC. III. FOREIGN LANGUAGES

List below the foreign languages in which you have some competence. Be sure to include uncommon modern languages. Check (X) your competence and how acquired.

LANGUAGE

* If you have checked 'Fluent' for a language that has significant difference in spoken and written form (e.g., Arabic), explain your competence herein.

****Specialized Language Competence:** Describe ability to do specialized language work involving vocabularies and terminology in the scientific, engineering, telecommunications, and military fields. List the language with the type of speciality.

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SEC. IV. AREA KNOWLEDGE.

1. List below any foreign countries or regions of which you have knowledge gained as a result of residence, travel or study. Study can mean either academic study, or study of a foreign country resulting from an intelligence, military, commercial or professional work assignment.

Country or Region	Dates of Residence, Study Etc.	Manner in Which Knowledge Was Acquired (check (X) one)		
		Residence	Travel	Study
South America	1 sem econ and mro.			X
Guatemala	7/43 to 8/48	X		
Mexico	7/46		X	

2. Specialized Knowledge of Area

List specialized knowledge of foreign country such as knowledge of terrain, coasts and harbors, utilities, railroads, industries, political parties, etc., gained as a result of study or work assignment. Include name of employer or organization.

Country	Type of Knowledge	How and When Gained

SEC. V. TYPING AND STENOGRAPHIC SKILLS (PRESENT UTILIZATION)

Skill	Per Cent of Time Used	Not Used	WPM (Approximate Proficiency)	Prefer Assignment Using Skill Often
Typing	1. Drafts	2.	60	1. Yes 2. X No
Shorthand	1. none	2.	70	1. Yes 2. X No
Shorthand System:	1. X Manual	2. Machine	3. Speedwriting.	

SEC. VI. LICENSES, HOBBIES, SPECIAL QUALIFICATIONS

1. Licenses: List any licenses or certification such as teachers, pilot, marine, etc.	2. Hobbies: List any hobbies such as sailing, skiing, writing, or other special qualifications. painting, skiing

SEC. VII. PROFESSIONAL AND ACADEMIC HONORS

List any professional or academic associations or honorary societies in which you hold membership.

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SEC. VIII. PUBLICATIONS

List below the type of writing (non-fiction: professional or scientific articles, general interest subjects, current events, etc; fiction: novels, short stories, etc.) of any published materials of which you were author or co-author.

SEC. IX. INVENTIONS

Describe any devices you have invented as to type of work for which intended and whether patented.

Device	Patented	
	(1) Yes	(2) No
	(1) Yes	(2) No
	(1) Yes	(2) No

SEC. X. CIA TESTS

Describe below the type of tests which you have taken in CIA:

Type of Test	Date Taken
typing, shorthand, general intelligence exam	8/1951
exam for reports officer	2/19-2

SEC. XI. PHYSICAL HANDICAPS

List any physical handicaps you may have.

SEC. XII. OVERSEAS ASSIGNMENT

Are you willing to accept periodic tour of duty overseas?

(1) 2 year Tour (2) 4 year Tour (3) Not interested _____

SEC. XIII. WORK ASSIGNMENT

In view of your total experience and education, for what assignment in CIA do you think you are best qualified?

I feel I am best qualified for a reports or research position.

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SEC. XIV. MILITARY STATUS

1. Present Draft Status
Have you registered under the Selective Service Act of 1948? Yes No.
If yes, indicate your present draft classification

2. Present Reserve or National Guard Status
Do you now have Reserve or National Guard Status Yes No.
If yes, complete the following.
1. National Guard
2. Air National Guard
3. Active Reserve Status (member of organized unit)
4. Inactive Reserve Status

Service **Grade** **Location**

Reserve unit with which currently affiliated _____

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SEC. XV. CIA TRAINING

XV. CIA TRAINING
List the training courses or subjects you have taken while in the CIA

List the training courses or subjects you have taken while in the CIA.			
Course or Subject	(from)	Dates (to)	Hours
Orientation course	2-11 Jun 1972	9-12 am	

SEC. XVI. REMARKS

Use this space to indicate any other qualifications you may have which you do not describe above.

1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20	21	22	23	24	25	26	27	28	29	30	31	32	33	34	35	36	37	38	39	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	100
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DATE 18 September 1912

SIGNATURE *Vance S. Johnson*

 SECRET Security Information

STANDARD FORM 57-NOV. 1947 U. S. CIVIL SERVICE COMMISSION		APPLICATION FOR FEDERAL EMPLOYMENT		
<p>INSTRUCTIONS. In order to prevent delay in consideration of your application, answer every question on this form clearly and completely. Type, write or print in INK. In applying for a specific United States Civil Service examination, read the examination announcement carefully and follow all directions. If you are applying for a WRITTEN examination, follow the instructions on the announcement regarding disposition of this application. If you are applying for an UNWRITTEN examination, mail this application to the office listed in the announcement. Be sure to mail to the same office any other forms required by the announcement. Notify the office with which you file this application of any change in your address.</p>				
ANNOUNCEMENT NUMBER 9	1. NAME OF EXAMINATION OR KIND OF POSITION APPLIED FOR		DO NOT WRITE IN THIS BLOCK For Use of Civil Service Commissions Only	
	2. OFFICES (as mentioned in examination announcement)			
	3. PLACE OF EMPLOYMENT APPLIED FOR (City and State) Washington, D. C.		4. DATE OF THIS APPLICATION	
	5. MR. MRS. MISS Charlotte L. Zehrung		6. (First name) (Middle) (Maiden, if any) (Last)	
	7. ADDRESS AND NUMBER OF R. D. NUMBER 1401 - 16th St., N. W.		8. CITY OR POST OFFICE (including postal zone) AND STATE Washington, D. C.	
	9. LEGAL VOTING RESIDENCE (State) Ohio		10. OFFICE PHONE (10) HOME PHONE RE 1820 X 732	
	11. DATE OF BIRTH (month, day, year) 1-12-29		12. MARRIED <input checked="" type="checkbox"/> SINGLE	
	13. PLACE OF BIRTH (city and state; if born outside U. S., name city and country) Dayton, Ohio		14. HEIGHT WITHOUT SHOES 5 FEET 8 INCHES	
	15. (a) HAVE YOU EVER BEEN EMPLOYED BY THE FEDERAL GOVERNMENT? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO		16. (b) IF SO, GIVE LAST GRADE AND DATE OF LAST CHANGE IN GRADE	
	17. (a) WHAT IS THE LOWEST ENTRANCE SALARY YOU WILL ACCEPT? \$ You will not be considered for any position with a lower entrance salary.		(d) CHECK IF YOU WILL ACCEPT APPOINTMENT IF OFFERED: <input type="checkbox"/> IN WASHINGTON, D. C. <input type="checkbox"/> ANYWHERE IN THE UNITED STATES <input type="checkbox"/> OUTSIDE THE UNITED STATES	
18. (b) CHECK IF YOU WILL ACCEPT SHORT-TERM APPOINTMENT IF OFFERED, FOR: <input type="checkbox"/> 1 TO 3 MONTHS <input type="checkbox"/> 3 TO 6 MONTHS <input type="checkbox"/> 6 TO 12 MONTHS		(e) IF YOU WILL ACCEPT APPOINTMENT IN CERTAIN LOCATIONS ONLY, GIVE ACCEPTABLE LOCATIONS		
NOTE: Acceptance or refusal of a temporary short-term appointment will not affect your opportunity to obtain a permanent appointment				
19. (c) IF YOU ARE WILLING TO TRAVEL, SPECIFY: <input type="checkbox"/> OCCASIONALLY <input type="checkbox"/> FREQUENTLY <input type="checkbox"/> CONSTANTLY				
<p>18. (d) It is important for you to furnish all information requested below in sufficient detail to enable the Civil Service Commission and the appointing offices of agencies to give you full credit in determining your qualifications. Use a separate block for each position. Start with your present position and work back, explaining clearly the principal tasks which you performed in each position, specifying for all periods of employment experience gained more than 15 years ago which is not pertinent to the work for which you are applying, may be summarized in one or more of the blocks. If your duties changed materially while working for the same employer, use a separate block to describe each position. You may include any pertinent relationships, etc., within or organizational activity which you have performed, either with or without compensation, showing the number of hours per week and weeks per year in which you were engaged in such activities. Military experience should be described in the spaces below in the proper sequence.</p> <p>(e) If you were ever employed in any position under a name different from that shown in Item 5 of this application, give under "Description of your work" for each position the name used.</p> <p>(f) If you have never been employed or are now unemployed, indicate this fact in the space provided below in the "Present Position" block.</p>				
PRESENT POSITION				
DATE OF EMPLOYMENT (month, year) 4-51	EXACT TITLE OF YOUR PRESENT POSITION Statistical Draftsman	CLASSIFICATION GROUP 3	SALARY OR PAY RATE \$250 PER YR.	
FROM: Washington, D. C.	TO: PRESENT TIME	IN Federal Service	STARTING: \$250 PRESENT: \$250	
PLACE OF EMPLOYMENT (City and State)	NAME AND TITLE OF IMMEDIATE SUPERVISOR Mrs. Mildred Moorman			
NAME AND ADDRESS OF EACH AND OTHER GOVERNMENT OR PERSONAL, IF FEDERAL, NAME, DEPARTMENT, BUREAU OR ESTABLISHMENT, AND DIVISION Board of Geographical Names Department of Interior		NAME OF BUSINESS OR ORGANIZATION (if, a wholesale and distribution agency, manufacturer of books, etc.)		
NUMBER AND KIND OF EMPLOYMENT INDICATED BY YOU NONE		REASON FOR DESIRING TO CHANGE EMPLOYMENT		
DESCRIPTION OF TO BE ADDED statistical drafting typing marking diacritics				

(CONTINUED ON NEXT PAGE)

PS-1400-2

16 CONTINUED					
(2) DATES OF EMPLOYMENT (month, year) FROM 5/50 TO 3/51		EXACT TITLE OF YOUR POSITION Bookkeeper-Clerk	CLASSIFICATION GRADE (if in Federal service)	SALARY OR COMPENSATION STARTING \$ 1.00 PER HR FINAL \$ 1.10 PER HR	
PLACE OF EMPLOYMENT (City and State) Dayton, Ohio		NAME AND TITLE OF IMMEDIATE SUPERVISOR Mr. Ray F. McKechnie			
NAME AND ADDRESS OF EMPLOYER (firm, organization, or person; if Federal, name department, bureau or establishment, and division) San Ree Gardens, R. R. 11 Dayton 9, Ohio		KIND OF BUSINESS OR ORGANIZATION (e.g., wholesale mill, insurance agency, manufacturer of tools, etc.) Nursery and Gift Shoppe			
NUMBER AND KIND OF EMPLOYEES SUPERVISED BY YOU 2 - 6 clerks		REASON FOR LEAVING New Job			
DESCRIPTION OF YOUR WORK Bookkeeper Clerk Made reports on stock and ordered wholesale Made reports for the executives on the business, finances, etc.					
(3) DATES OF EMPLOYMENT (month, year) FROM 2/50 TO 5/50		EXACT TITLE OF YOUR POSITION Asst. Bookkeeper	CLASSIFICATION GRADE (if in Federal service)	SALARY OR COMPENSATION STARTING \$ 200 PER MO FINAL \$ 200 PER MO	
PLACE OF EMPLOYMENT (City and State) Washington, D. C.		NAME AND TITLE OF IMMEDIATE SUPERVISOR Mr. William F. Seals, Proc.			
NAME AND ADDRESS OF EMPLOYER (firm, organization, or person; if Federal, name department, bureau or establishment, and division) National Peanut Council 1111 Dupont Circle Bliz. Washington, D. C.		KIND OF BUSINESS OR ORGANIZATION (e.g., wholesale mill, insurance agency, manufacturer of tools, etc.) Trade Association			
NUMBER AND KIND OF EMPLOYEES SUPERVISED BY YOU none		REASON FOR LEAVING New Job			
DESCRIPTION OF YOUR WORK Bookkeeping Filing General office work Financial reports					
(4) DATES OF EMPLOYMENT (month, year) FROM 6/47 TO 8/47		EXACT TITLE OF YOUR POSITION	CLASSIFICATION GRADE (if in Federal service)	SALARY OR COMPENSATION STARTING \$ 1 PER HR FINAL \$ 1 PER HR	
PLACE OF EMPLOYMENT (City and State) Dayton, Ohio		NAME AND TITLE OF IMMEDIATE SUPERVISOR Mr. Herbert Haudorff Personnel			
NAME AND ADDRESS OF EMPLOYER (firm, organization, or person; if Federal, name department, bureau or establishment, and division) Frigidaire, Plant 2 Dayton 9, O.		KIND OF BUSINESS OR ORGANIZATION (e.g., wholesale mill, insurance agency, manufacturer of tools, etc.) Manuf. of Frigidaires			
NUMBER AND KIND OF EMPLOYEES SUPERVISED BY YOU none		REASON FOR LEAVING return to college			
DESCRIPTION OF YOUR WORK Secretary in Chemical Lab. Worked in factory					

(5) DATES OF EMPLOYMENT (Month, year) FROM TO		EXACT TITLE OF YOUR POSITION		CLASSIFICATION GRADE (U.S. GOVERNMENT SERVICE)		SALARY OR EARNINGS STARTING & FINAL	PER PER
PLACE OF EMPLOYMENT (City and State)				NAME AND TITLE OF IMMEDIATE SUPERVISOR			
NAME AND ADDRESS OF EMPLOYER (Name, organization, or person, if Federal, name department, Bureau or establishment, and division)				KIND OF BUSINESS OR ORGANIZATION (e.g., wholesale and, insurance agency, manufacturer of tools, etc.)			
NUMBER AND KIND OF EMPLOYEES SUPERVISED BY YOU				REASON FOR LEAVING			
DESCRIPTION OF YOUR WORK							
<p>If more space required, use a continuation sheet (Standard Form No. 58) or a sheet of paper the same size as this page. Write on each sheet your name, address, date of birth, and examination title. Attach to back of this application.</p> <p>17. MILITARY TRAINING: In the space below, describe any training received in the Armed Services (not already listed under Item 16) that would assist appointing officers in placing you most effectively. Indicate actual amount of training received, plus hours per week. Detailed information regarding any special service schools you attended is especially important. (Extra pages may be used to give full descriptions.)</p>							
DATES FROM TO		LOCATION		DESCRIPTION OF TRAINING			
<p>18 EDUCATION (Circle highest grade completed):</p> <p>1 2 3 4 5 6 7 8 9 10 11 12</p> <p>(a) GIVE NAME AND LOCATION OF LAST HIGH SCHOOL ATTENDED</p> <p>MARK (X) THE APPROPRIATE BOX TO INDICATE SATISFACTORY COMPLETION OF</p> <p><input checked="" type="checkbox"/> GRADUATE DEGREE <input type="checkbox"/> ANGRADUATE DEGREE <input checked="" type="checkbox"/> HIGH SCHOOL</p> <p>(b) NAME AND LOCATION OF COLLEGE OR UNIVERSITY</p> <p>MAJOR AND SPECIALTY</p> <p>Syracuse Univ., Syracuse, N.Y. Econ. 9-40 1-50 BA 1-50 115</p> <p>San Carlos Univ., Guatemala City Span. 7-48 8-48</p> <p>Miami Jacobs Business College, Steno. 5-50 12-50 3 mo. 4mo</p> <p>(c) LIST OF COLLEGE UNDERGRADUATE DAYTON, OHIO SUBJECTS</p> <p>Economics 20</p> <p>Spanish 23</p> <p>(d) LIST OF COLLEGE GRADUATE COLLEGE SUBJECTS</p> <p>(e) OTHER TRAINING SUCH AS INDUSTRIAL BUSINESS STUDY COURSES GIVEN THROUGH THE ARMY POSTS INSTITUTE (NAME NAME AND PLACE OF SCHOLARSHIP OR PAYMENT) OR PUBLIC OR PRIVATE EMPLOYMENT</p> <p>SUBJECTS STUDIED</p> <p>DATES ATTENDED</p> <p>FROM TO</p> <p>YEARS COMPLETED</p> <p>DAY NIGHT</p> <p>GRADE HOURS CREDIT</p> <p>(f) LIST OF TRADES, PROFESSIONS, OR CERTIFIED OCCUPATIONS FOR WHICH YOU HAVE EVER BEEN A LICENSED OR CERTIFIED MEMBER OF ANY TRADE OR PROFESSION (such as pilot, telegrapher, radio operator, teacher, lawyer, CPA, etc.)</p> <p><input type="checkbox"/> YES <input checked="" type="checkbox"/> NO GIVE KIND OF LICENSE AND STATE</p> <p>EXPIRED LICENSE OR CERTIFICATE (YEAR)</p> <p>(g) IF YOU HAVE TRAVELED OR RESIDED IN ANY FOREIGN COUNTRY INDICATE NUMBER OF COUNTRIES (COUNTRIES AND LENGTH OF TIME SPENT THERE) AND REASONS FOR TRAVEL IN 6. MILITARY SERVICE, BUSINESS, EDUCATION, RECREATION</p> <p>Guatemala 7/18-8/48 Education Travel</p> <p>(h) LIST OF SPECIAL SKILLS YOU POSSESS AND INDICATE IF YOU CAN USE SUCH SKILL IN YOUR DESIRED POSITION AS SECRETARY, CLERK, BOOKKEEPER, CLERICAL, SCIENTIFIC OR PROFESSIONAL PERSONNEL</p> <p>Calculator</p> <p>APPROVED BY: (Signature) DATE: (Initials) (Date)</p>							

24 REFERENCES. List three persons living in the United States or Territories of the United States who are NOT related to you and who have definite knowledge of your qualifications and fitness for the position for which you are applying. Insert serial names of supervisors listed under Item 16 (EXPERIENCE).				
FULL NAME		(Give complete current address, including street and number)	BUSINESS OR OCCUPATION	
1.	Mr. John Lewis	Oakwood High School, Dayton 9, O.	Principal	
2.	Miss Theodosia Moran	Cazenovia R. D. 2, N. Y.	Teacher	
3.	Mr. Harry Schwartz	Univ. of Syracuse, Syracuse, N. Y.	Professor	
INDICATE "YES" OR "NO" ANSWER BY PLACING "X" IN PROPER COLUMN		YES	NO	
25. MAY INQUIRIES MADE OF YOUR PRESENT EMPLOYER REGARDING YOUR CHARACTER, QUALIFICATIONS, ETC.?		X	26. ARE YOU A CITIZEN OF OR DO YOU OWE ALLEGIANCE TO THE UNITED STATES?	X
27. ARE YOU NOW, OR HAVE YOU EVER BEEN, A MEMBER OF THE COMMUNIST PARTY U.S.A. OR ANY COMMUNIST ORGANIZATION?		X	28. ARE YOU NOW, OR HAVE YOU EVER BEEN A MEMBER OF A FASCIST ORGANIZATION?	X
29. ARE YOU NOW, OR HAVE YOU EVER BEEN A MEMBER OF ANY ORGANIZATION, ASSOCIATION, MOVEMENT, GROUP, OR COMBINATION OF PERSONS WHICH ADVOCATES THE OVERTHROW OR CONSTITUTIONAL FORM OF GOVERNMENT, OR OF AN ORGANIZATION, ASSOCIATION, MOVEMENT, GROUP, OR COMBINATION OF PERSONS WHICH HAS ADOPTED A POLICY OF ADVOCATING OR APPROVING THE COMMISSION OF ACTS OF FORCE OR VIOLENCE TO DENY OTHER PERSONS THEIR RIGHTS UNDER THE CONSTITUTION OF THE UNITED STATES OR OF SEEKING TO ALTER THE FORM OF GOVERNMENT OF THE UNITED STATES BY UNCONSTITUTIONAL MEANS?		X	30. SINCE YOUR LAST BIRTHDAY, HAVE YOU BEEN ARRESTED, INDICTED, OR SUMMONED INTO COURT AS A DEFENDANT IN A CRIMINAL PROCEEDING OR COMMITTED, FINED, OR IMPRISONED OR PLACED ON PROBATION OR HAD YOU EVER BEEN OBLIGED TO POST BAIL OR COLLATERAL FOR THE VIOLATION OF ANY LAW, POLICE REGULATION, OR ORDINANCE (EXCLUDING MINOR TRAFFIC VIOLATIONS FOR WHICH A FINE OR FORFEITURE OF \$25 OR LESS WAS IMPOSED)?	X
<p>If your answer to question 27, 28, or 29 above is "yes," state in Item 19 the names of all such organizations, associations, movements, groups, or combination of persons and dates of membership. Give complete details of your activities therein and make any explanation you desire regarding your membership or activities therein.</p>				
<p>If your answer to "Yes," list all such cases under Item 30 below. Give in each case (1) the date, (2) the nature of the offense or violation, (3) the name and location of the court, (4) the sentence imposed, and any other disposition of the case. If applicable, give details.</p>				
31. HAVE YOU EVER BEEN DISCHARGED FROM THE UNITED STATES MILITARY OR NAVAL SERVICE FOR DUTY OR UNSATISFACTORY SERVICE FROM ANY POSITION?		X	32. HAVE YOU EVER BEEN HIRED BY THE U.S. CIVIL SERVICE COMMISSION FOR PARTIAL OR FULL PAYMENT OF A CERTAIN CIVIL SERVICE APPOINTMENT?	X
<p>If your answer is "Yes," give in Item 39 the name and address of employer, date, and reason in each case.</p>				
33. HAVE YOU ANY PHYSICAL HANDICAP, DISEASE, OR OTHER DISABILITY WHICH SHOULD BE CONSIDERED IN ASSIGNING YOU TO WORK?		X	34. DO YOU RECEIVE AN INCOME FROM THE UNITED STATES OR OTHER GOVERNMENT UNDER ANY RETIREMENT ACT OR ANY PENSION OR OTHER COMPENSATION FOR MILITARY OR NAVAL SERVICE?	X
<p>If your answer is "Yes," give complete details in Item 39 so that consideration can be given to your physical fitness for the job.</p>				
35. DO YOU RECEIVE AN INCOME FROM THE UNITED STATES OR OTHER GOVERNMENT UNDER ANY RETIREMENT ACT OR ANY PENSION OR OTHER COMPENSATION FOR MILITARY OR NAVAL SERVICE?		X	36. SPACE FOR TAKING ANSWERS TO OTHER QUESTIONS (Indicate Item numbers to which answers apply)	
<p>If more space is required, use paper the same size as this page. Write on each sheet your name, address, date of birth, and examination title. Attach to end of this application.</p>				
<p>Before signing this application check back over it to make sure that you have answered ALL questions correctly.</p> <p>I CERTIFY that the statements made by me in this application are true, complete, and correct to the best of my knowledge and belief, and are made in good faith.</p> <p>False statement on this application is punishable by Law (U. S. Code, Title 18, Section 64).</p>				SIGNATURE OF APPLICANT <i>Charles T. L. Zehring</i>
<p>Please print clearly. SIGN your name, give first and middle initials, and suffix. If female, give full name and married name as "Mrs. Mary L. (Mrs.)".</p>				

As of 5 July, 1951, Subject's
Washington address is

3817 Davis place, N.W.
Phone - Ordway 1618

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
(Yes or No)

SEC. 1. PERSONAL BACKGROUND

A. FULL NAME Miss Charlotte Louise Zehrung
(First) (Middle) (Last)
AKR Telephone: Office RE 1820.
Ext. 4691. Home NO 5450.

PRESENT ADDRESS 1401-16th St., N.W., Washington, D.C., USA
(St. and Number) (City) (State) (Country)

PERMANENT ADDRESS San Rae Gardena, Dayton, Ohio, RR 11, USA
(St. and Number) (City) (State) (Country)

B. NICKNAME Sherri WHAT OTHER NAMES HAVE YOU USED? none

UNDER WHAT CIRCUMSTANCES HAVE YOU EVER USED THESE NAMES? started to use it at school

HOW LONG? 5 yrs IF A LEGAL CHANGE, GIVE PARTICULARS

C. DATE OF BIRTH 1/12/29 PLACE OF BIRTH Dayton, Ohio, USA
(City) (State) (Country)

D. PRESENT CITIZENSHIP USA BY BIRTH? yes BY MARRIAGE? no

BY NATURALIZATION CERTIFICATE NO. no ISSUED BY
(Date) (Court)

AT City (State) (Country)

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

HELD BETWEEN WHAT DATES? to ANY OTHER NATIONALITY? (Country)

GIVE PARTICULARS

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

(2)

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

PORT OF ENTRY? ON PASSPORT OF WHAT COUNTRY? _____

LAST U. S. VISA (Number) (Type) (Place of Issue) (Date of Issue)

SEC. 2. PHYSICAL DESCRIPTION

AGE	22	SEX	F	HEIGHT	5' 8"	WEIGHT	125
EYES	blue	HAIR	brown	COMPLEXION	med.	SCARS	none
BUILD	slender	OTHER DISTINGUISHING FEATURES					

SEC. 3. MARITAL STATUSA. SINGLE MARRIED 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 (First) (Middle) (Maiden) (Last)

PLACE AND DATE OF MARRIAGE

HIS (OR HER) ADDRESS BEFORE MARRIAGE (St. and Number) (City) (State) (Country)

LIVING OR DECEASED DATE OF DECEASE CAUSE

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

DATE OF BIRTH PLACE OF BIRTH (City) (State) (Country)

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

CITIZENSHIP WHEN ACQUIRED? WHERE? (City) (State) (Country)

OCCUPATION LAST EMPLOYER

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

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

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

SEC. 4. CHILDREN OR DEPENDENTS (Include partial dependents): none

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

FULL NAME Samuel Danford Zehrung
 (First) (Middle) (Last)

LIVING OR DECEASED living DATE OF DECEASE CAUSE

PRESENT, OR LAST, ADDRESS San Rae Gardens, Dayton 9, Ohio USA
 (St. and Number) (City) (State) (Country)

DATE OF BIRTH 1/23/1892 PLACE OF BIRTH Roseville, Ohio USA
 (City) (State) (Country)

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

CITIZENSHIP USA WHEN ACQUIRED? birth WHERE? (City) (State) (Country)

OCCUPATION Landscape Architect LAST EMPLOYER own employer - over 20 yrs.

EMPLOYER'S OR OWN BUSINESS ADDRESS San Rae Gardens, Dayton 9, Ohio USA
 (St. and Number) (City) (State) (Country)

MILITARY SERVICE FROM TO BRANCH OF SERVICE

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

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

FULL NAME Hazel Charlotte Jackson Zehrung
 (First) (Middle) (Last)

LIVING OR DECEASED living DATE OF DECEASE CAUSE

PRESENT, OR LAST, ADDRESS San Rae Gardens, Dayton 9, Ohio USA
 (St. and Number) (City) (State) (Country)

DATE OF BIRTH 10/17/1896 PLACE OF BIRTH Montague, Michigan USA

CITIZENSHIP USA WHEN ACQUIRED? birth WHERE? (City) (State) (Country)

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

(4)

OCCUPATION housewife LAST EMPLOYER Detroit Board of Education 1927
EMPLOYER'S OR OWN BUSINESS ADDRESS _____
(Street and Number) (City) (State) (Country)
MILITARY SERVICE FROM TO BRANCH OF SERVICE _____
COUNTRY _____ DETAILS OF OTHER GOVT. SERVICE, U. S. OR FOREIGN

SEC. 7. BROTHERS AND SISTERS (Including half-, step-, and adopted brothers and sisters):

1. FULL NAME Nancy Zehrung AGE 21
 (First) (Middle) (Last)
 PRESENT ADDRESS Verity Hall, Middletown Hospital, Middletown, Ohio, USA
 (St. and Number) (City) (State) (Country) (Citizenship) = USA
 Dorothy Jon Zehrung
 2. FULL NAME ACE 17
 (First) (Middle) (Last)
 PRESENT ADDRESS San Rae Gardens, Dayton 9, Ohio USA
 (St. and Number) (City) (State) (Country) (Citizenship)
 Mary Elizabeth Zehrung
 3. FULL NAME ACE 16
 (First) (Middle) (Last)
 PRESENT ADDRESS San Rae Gardens, Dayton 9, Ohio USA
 (St. and Number) (City) (State) (Country) (Citizenship)
 4. FULL NAME ACE
 (First) (Middle) (Last)
 PRESENT ADDRESS
 (St. and Number) (City) (State) (Country) (Citizenship)
 5. FULL NAME ACE
 (First) (Middle) (Last)
 PRESENT ADDRESS
 (St. and Number) (City) (State) (Country) (Citizenship)

SEC. 8. FATHER-IN-LAW

FULL NAME (First) (Middle) (Last)
LIVING OR DECEASED DATE OF DECEASE CAUSE
PRESENT, OR LAST, ADDRESS (St. and Number) (City) (State) (Country)
DATE OF BIRTH PLACE OF BIRTH
IF BORN OUTSIDE U. S. INDICATE DATE AND PLACE OF ENTRY
CITIZENSHIP WHEN ACQUIRED? WHERE? (City) (State) (Country)
OCCUPATION LAST EMPLOYER

SEC. 9. MOTHER-IN-LAW

FULL NAME (First) (Middle) (Last)
LIVING OR DECEASED DATE OF DECEASE CAUSE
PRESENT, OR LAST, ADDRESS (St. and Number) (City) (State) (Country)
DATE OF BIRTH PLACE OF BIRTH
IF BORN OUTSIDE U. S. INDICATE DATE AND PLACE OF ENTRY
CITIZENSHIP WHEN ACQUIRED? WHERE? (City) (State) (Country)
OCCUPATION LAST EMPLOYER

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

1. NAME Col.Paul Zehrung RELATIONSHIP cousin AGE 38
 CITIZENSHIP USA ADDRESS KI USA FE, APO 633 Post Master
 (St. and Number) (City) (State) (Country)
 2. NAME distant relatives in Sweden RELATIONSHIP AGE
 Grandparents on Mother's side came from Sweden
 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:

1. NAME Col. Paul Zehrung RELATIONSHIP cousin AGE 38
CITIZENSHIP USA ADDRESS ET USA FE, APO 633 Post Master
(St. and Number) (City) (State) (Country) N.Y.
TYPE AND LOCATION OF SERVICE (IF KNOWN) Director of Maintenance, HI, USA FE

2. NAME Major Jack Lacklin RELATIONSHIP cousin AGE 31
CITIZENSHIP USA ADDRESS Washington, D. C. USA
(St. and Number) (City) (State) (Country)
TYPE AND LOCATION OF SERVICE (IF KNOWN) Pentagon, Washington, D. C.

3. NAME Mrs. Elsie Dickett RELATIONSHIP Aunt AGE 55
CITIZENSHIP USA ADDRESS 814 N. 29th St., Billings, Mont. USA
(St. and Number) (City) (State) (Country)
TYPE AND LOCATION OF SERVICE (IF KNOWN) Social work - Dent. of Interior

(6)

SEC. 12. POSITION DATA

- A. KIND OF POSITION APPLIED FOR: Administrative position with Latin America, Economist, Statistician, or temporarily as a Stenographer.....
- B. WHAT IS THE LOWEST ANNUAL ENTRANCE SALARY YOU WILL ACCEPT? \$ 3,100
(You Will Not Be Considered For Any Position With A Lower Entrance Salary.)
- C. IF YOU ARE WILLING TO TRAVEL, SPECIFY: OCCASIONALLY
FREQUENTLY , CONSTANTLY
- D. CHECK IF YOU WILL ACCEPT APPOINTMENT, IF OFFERED: IN WASHINGTON, D. C.
ANYWHERE IN THE UNITED STATES , OUTSIDE THE UNITED STATES
- E. IF YOU WILL ACCEPT APPOINTMENT IN CERTAIN LOCATIONS ONLY, SPECIFY LOCATIONS:
-

SEC. 13. EDUCATION

ELEMENTARY SCHOOL West Carrollton ADDRESS West Carrollton, O. USA
(City) (State) (Country)

DATES ATTENDED 1933 - 1944 GRADUATE? Yes

HIGH SCHOOL Oakwood High School ADDRESS Dayton 9, Ohio USA
(City) (State) (Country)

DATES ATTENDED 1944 - 1946 GRADUATE? Yes

COLLEGE Syracuse University ADDRESS Syracuse, New York USA
(City) (State) (Country)

MAJOR AND SPECIALTY Economics & Spanish YEARS COMPLETED 4

DATES ATTENDED 1946 - 1950 DEGREE BA

COLLEGE Universidad de San Carlos ADDRESS Guatemala City, Guatemala C.A.
(City) (State) (Country)

MAJOR AND SPECIALTY Spanish YEARS COMPLETED 5 credits

DATES ATTENDED summer 1948 DEGREE none given

CHIEF UNDERGRADUATE COLLEGE SUBJECTS economics - statistics

Spanish grammar - literature

CHIEF GRADUATE COLLEGE SUBJECTS

SEC. 14. ACTIVE U. S. OR FOREIGN MILITARY SERVICE none

(Country)	(Service)	(Rank)	(Dates of Service)
(Last Station)	(Serial Number)		(Type of Discharge)

REMARKS:

SELECTIVE SERVICE BOARD NUMBER ADDRESS

IF DEFERRED GIVE REASON

INDICATE MEMBERSHIP IN MILITARY RESERVE ORGANIZATIONS

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 4/51 TO CLASSIFICATION GRADE 3
(IF IN FEDERAL SERVICE)EMPLOYING FIRM OR AGENCY Board of Geographic Names
Interior Bldg.ADDRESS 2 & 18th Sts., N. W., Washington, D. C. USA
(St. and Number) (City) (State) (Country)

KIND OF BUSINESS NAME OF SUPERVISOR Mrs. Mildred Noorman

TITLE OF JOB Statistical Draftsman SALARY \$ 2,000.00 PER YR.

YOUR DUTIES drawing, drafting, typing

REASONS FOR LEAVING better position more in my interests

FROM 5/50 TO 4/51 CLASSIFICATION GRADE
(IF IN FEDERAL SERVICE)

EMPLOYING FIRM OR AGENCY San Kee Gardens, Inc.

ADDRESS Box 240 Dayton 9, R. R. 11 Ohio USA
(St. and Number) (City) (State) (Country)

KIND OF BUSINESS NURSERY NAME OF SUPERVISOR Ray McKechnie

TITLE OF JOB clerk 1.10 hr.
SALARY \$ 1.10 PER hr.YOUR DUTIES bookkeeping, typing, clerking, making financial
reports, ordering wholesale, making floral arrangements

REASONS FOR LEAVING to take a job more in line with my training

(8)

FROM 2/50 TO 5/10 CLASSIFICATION GRADE
(IF IN FEDERAL SERVICE)

EMPLOYING FIRM OR AGENCY National Peanut Council

ADDRESS 1111 Dupont Circle Building, Washington, D. C. USA
(Street and Number) (City) (State) (Country)

KIND OF BUSINESS Trade Assoc. NAME OF SUPERVISOR Mr. William E. Seals

TITLE OF JOB Asst. Bookkeeper SALARY \$ 200 PER mo.

YOUR DUTIES bookkeeping, filing, general office work, financial reports

REASONS FOR LEAVING return home to help my father in his business

FROM 6/47 TO 8/47 CLASSIFICATION GRADE
(IF IN FEDERAL SERVICE)

EMPLOYING FIRM OR AGENCY Frigidaire, General Motors

ADDRESS Plant # 2 Dayton 9, Ohio USA
(Street and Number) (City) (State) (Country)

KIND OF BUSINESS manuf. NAME OF SUPERVISOR Mr. Herbert Haldeman

TITLE OF JOB SALARY \$ PER

YOUR DUTIES office work in the chemical laboratories
work in the factory proper

REASONS FOR LEAVING return to college

FROM 4-48 TO 5-48 CLASSIFICATION GRADE
(IF IN FEDERAL SERVICE)

EMPLOYING FIRM OR AGENCY Grants 5/10 Store

ADDRESS 516 Columbus, New York USA
(Street and Number) (City) (State) (Country)

KIND OF BUSINESS 35279 NAME OF SUPERVISOR

TITLE OF JOB clerk SALARY \$ PER

YOUR DUTIES waited on customers in the flower department

REASONS FOR LEAVING just a part-time temporary position for Easter

10-2020-1

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 French SPEAK slight READ fair WRITE fair

LANGUAGE SPEAK READ WRITE

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

Art-drawing, painting, crafts, studied at school - good

Swimming, good; Reading; Knitting, good; Basketball, fair;
tennis, fair

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

I have spent a summer in Guatemala, living with a Guatemalan family, learning the life and ways of a Spanish family and city.

I have quite a complete knowledge of the florist business from helping my father over a period of about 8 years.

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:

calculator

APPROXIMATE NUMBER OF WORDS PER MINUTE IN TYPING ... 60. SHORTHAND . 70 .

(10)

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.

NO

IF YES, INDICATE KIND OF LICENSE AND STATE

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

3-I did a lot of extemp and declamation work in public speaking contests in high school. I am a member of the National Forensic League.

4-I received a partial scholarship from Chapel at Syracuse University

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

No

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. Mr. John Lewis	BUS. ADD. Oakwood High School	Dayton	Ohio
	RES. ADD. NA		
2. Mr. Herbert Holderman	BUS. ADD. Frigidaire, Plant 2	Dayton 9	Ohio
	RES. ADD. 11 Winding Way	Dayton 9	Ohio
3. Mr. Albert F. Kuhl, M.D.	BUS. ADD. Harries Bldg.	Dayton	Ohio
	RES. ADD. NA		
4. Mr. George Pohlmeyer	BUS. ADD. NA		
	RES. ADD. 96 Winding Way	Dayton	Ohio
5. Miss Katherine Smith	BUS. ADD. NA		
	RES. ADD. 59 Wiltshire	Dayton 9	Ohio

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. Miss Theodoreia Moran	BUS. ADD. NA		
	RES. ADD. R. R. 2	Gazanovia	N. Y.
2. Mrs. Ed Eastin	BUS. ADD. San Rae Gardens	Dayton 9	Ohio
	RES. ADD. Pease Ave., West Carrollton		Ohio
3. Miss Betty Hollis	BUS. ADD. Arlington Annex	Arlington	Va.
	RES. ADD. 1401-16th St., N. W.	Washington DC	
4. Mr. Harry Schwartz	BUS. ADD. N.Y. of Syracuse	Syracuse	N. Y.
	RES. ADD. NA		
5. Mr. Walter Bohm	BUS. ADD. Winter's National bank	Dayton	O.
	RES. ADD. 259 Greenmont blvd.	Dayton 9	O.

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. Mr. Ray E. McKeachie	BUS. ADD. San Rae Gardens	Dayton 9	Ohio
	RES. ADD. same	R. R. 11	
2. Miss Sheila Dewey	BUS. ADD. NA		
	RES. ADD. Box 303	Spencer	N. Y.
3. Miss Marilyn Morris	BUS. ADD. NA		
	RES. ADD. 811 Abbott St.	HIGHLAND PARK	I.

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
West Carrollton Bank-West Carrollton, Ohio

Washington Loan and Trust Co., Washington, D. C.

(12)

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 Meridian Hill Hotel ADDRESS 2601-16th St., NW Washington DC
 (St. and Number) (City) (State)
2. NAME Mrs. Blick ADDRESS 1401-16th St., NW Washington DC
 (St. and Number) (City) (State)
3. NAME Delta Gamma Sorority ADDRESS 901 Walnut Ave., Syracuse NY.
 (St. and Number) (City) (State)

SEC. 22. RESIDENCES FOR THE PAST 15 YEARS

FROM <u>4-1-51</u>	TO <u>Present</u>	1401-16th St., N.W., Washington, D.C., USA
(St. and number)	(City)	(State) (Country)
FROM <u>5-50</u>	TO <u>4-51</u>	San Rae Gardens, Dayton 9, Ohio, USA
(St. and number)	(City)	(State) (Country)
FROM <u>2-50</u>	TO <u>5-50</u>	2601-16th St., NW Washington, D.C., USA
(St. and number)	(City)	(State) (Country)
FROM <u>9-48</u>	TO <u>2-50</u>	901 Walnut Ave., Syracuse, N. Y., USA
(St. and number)	(City)	(State) (Country)
FROM <u>9-46</u>	TO <u>9-48</u>	two cottages of Syracuse Univ., Syracuse
(St. and number)	(City)	(State) (Country) USA
FROM <u>7-48</u>	TO <u>8-48</u>	9 C.P. # 30 Guatemala City, Guatemala
(St. and number)	(City)	(State) (Country)
FROM time before this	TO San Rae Gardens, Dayton 9, Ohio	USA
(St. and number)	(City)	(State) (Country)
FROM	TO	(St. and Number) (City) (State) (Country)

SEC. 23. RESIDENCE OR TRAVEL OUTSIDE OF THE UNITED STATES

- A. FROM 7-46 TO --- Mexico City, Mexico tourist
 (City or location) (Country) (Purpose)
- FROM 7-48 TO 8-48 Guatemala City, Guatemala student
 (City or location) (Country) (Purpose)
- FROM
- FROM
- FROM

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. Delta Gamma - Rho 901 Walnut Ave., Syracuse, N. Y., USA
 (Name and Chapter) (St. and Number) (City) (State) (Country)
- DATES OF MEMBERSHIP: 1947-50 active - 1950 to present inactive
2. Spanish Club Syracuse Univ., Syracuse, N. Y., USA
 (Name and Chapter) (St. and Number) (City) (State) (Country)
- DATES OF MEMBERSHIP: 1947 - 8 - 9
3. Economics Club Syracuse Univ., Syracuse, N. Y., USA
 (Name and Chapter) (St. and Number) (City) (State) (Country)
- DATES OF MEMBERSHIP: 1948 - 9 - 50
4. Westminster Presbyterian Church - Dayton 9, Ohio USA
5. Brownies - Grade School - West Carrollton, Ohio USA

10. Girl Scouts - High School - West Carrollton, Ohio USA
 11. Hesedodon G.C. - Westminster Presbyterian Church - Dayton 9, O. U. USA
 12. Alumni Association of Syracuse Univ., Syracuse, N. Y. USA
 13. International Relations Club - Syracuse Univ., Syracuse, N.Y. USA.
 (Name and Chapter) (St. and Number) (City) (State) (Country)

DATES OF MEMBERSHIP: 1946-7-8-9

14. 2nd & 1st Cabinet - Chapel - Syracuse Univ., Syracuse, N.Y. USA
 (Name and Chapter) (St. and Number) (City) (State) (Country)

DATES OF MEMBERSHIP: 1948-9

15. National Forensic League - Oakwood High School, Dayton 9, O. USA
 (Name and Chapter) (St. and Number) (City) (State) (Country)

DATES OF MEMBERSHIP: 1945-6 active

16. Sigma Theta Phi - Dayton 9, Ohio USA high school sorority
 (Name and Chapter) (St. and Number) (City) (State) (Country)

DATES OF MEMBERSHIP: 1945-6

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?

NO

IF "YES," EXPLAIN:

B. DO YOU USE, OR HAVE YOU USED, INTOXICANTS? YES..... IF SO, TO WHAT
 an occasional drink at dinners and parties
 EXTENT?

C. HAVE YOU EVER BEEN ARRESTED, IMPLICATED 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:

NSA & DIA; Atomic Energy Commission; Council of
 Economic Advisors; Board of Geographic Names

(14)

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:

Board of Geographic Names 4-1-51

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

NAME Samuel D. Zehrung RELATIONSHIP father

ADDRESS San Rae Gardens, R. R. 11 Dayton 9, Ohio USA
(Street and Number) (City) (State) (Country)

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 Washington, D.C. DATE May 25, 1951
(City and State)

Betty L. Bellis (Witness) Charlotte L. Johnson (Signature of Relative)

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.

Sec. 11 - Mr. Jim Zehring, Sr. Uncle 61

USA 1210 Wilson Dr., Dayton, Ohio USA

Mechanical Engineer - Wright Air Field,

Dayton, Ohio

CONFIDENTIAL
SECURITY APPROVAL

Date: 16 Oct. 1951

TO: Chief, Covert Personnel Division

Your Reference: L2419

FROM: Chief, Security Division

Case Number: 56840

SUBJECT: ZEHRUNG, Charlotte Louise

1. This is to advise you of security action in the subject case as indicated below:
 - Security approval is granted the subject person for access to classified information.
 - Provisional clearance for full duty with CIA is granted under the provisions of Paragraph D of Regulation 10-9 which provides for a temporary appointment pending completion of full security investigation.
 - The Director of Central Intelligence has granted a provisional clearance for full duty with CIA under the provisions of Paragraph H of Regulation 10-9.

2. Unless the subject person enters on duty within 60 days from the above date, this approval becomes invalid.

3. Subject is to be polygraphed as part of the ZOD procedures.

Pool
10/18

10/18
25 Oct.
10/18
Rec'd
10/18



CONFIDENTIAL

1DT-73
1DT-74

CONFIDENTIAL

INTEROFFICE MEMORANDUM

Date: 4 August 1951

TO: Chief, Covert Personnel Division
FROM: Chief, Security Division
SUBJECT: ZEHRUNG, Charlotte Louise 56840

1. Reference is made to your request for security clearance of the subject person who is being considered for employment in the following position:

2. This is to advise you of the following security action:

a. Provisional security clearance is granted to permit subject's employment on a temporary basis in the following area or in the following capacity: D Street Pool

This clearance is granted upon the condition that subject: 1. not have access to classified material; 2. not have access to secure areas; 3. not be issued a badge or credential; 4. not represent himself as a CIA employee; and 5. not be assigned to any unclassified duties other than indicated above.

b. Name-checks have been completed on this person. Arrangements should now be made by your office for an interview in this Division. Upon completion of this interview further consideration will be given to the requested Limited clearance for access to information classified no higher than Secret. If subject has not entered on duty under a previously granted provisional clearance the interview should be arranged after entrance on duty.

c. Subject is security approved for temporary appointment to a position requiring access to information classified no higher than Secret.

Officials of the employing office should be advised of this security limitation and should be instructed to supply future supervisors with advice as to the limitation so as to insure continued compliance.

Security action to effect full approval is continuing and your office will receive advice of full clearance upon completion of this action. Upon receipt of full security clearance, the present limitation will be rescinded and supervisors should be advised accordingly.

3.

*Mr. Miller
8/6/51*



CPM

CONFIDENTIAL

DEPARTMENT
OF
INTERIOR

1-208

UNITED STATES DEPARTMENT OF THE INTERIOR
DIVISION OF PERSONNEL, INSPECTION AND MANAGEMENT
WASHINGTON, D.C.

Re: Miss Charlotte L. Rehberg
Sun Ray Gardens, Room 11
Dayton 9, Ohio

Date of Action

Journal

0000 0000 0000
0000 0000 0000
0000 0000 0000
0000 0000 0000

Permanent

OFFICE OF
OTHER LEGAL AUTHORITY
CS Certificate No.
B-2580 dated 1/16/51
C.S. Reg. R.115

Appointment

Regular

Date of Birth	Local Residence
1/12/29	Ohio

Sex	
M	W

VETERAN'S PREFERENCE

Yr.	No.
LAST STATUS CHANGE OR APPOINTMENT	X

From	To
------	----

Effective

NATURE OF POSITION

Yr.	Add. Identical
-----	----------------

Name	Martha E. Reid
CS-1535-3-804	Personnel Officer

SPECIAL REQUIREMENT

Line of Action Entitled	X
2/14/51	

ADMINISTRATIVE AUTHORITY FOR ACTION	
Recommending Officers	

Approved	
Concurrent	
On Approval	
On Request	
On Receipt	
On Demand	
On Application	
On Inspection	
On Report	
On Recommendation	
On Certification	
On Verification	
On Submission	
On Acceptance	
On Approval	
On Request	
On Inspection	
On Report	
On Recommendation	
On Certification	
On Verification	
On Submission	
On Acceptance	

APPROVAL APPROVAL

Effective Date: April 12, 1951

(100-74000-29585)

Position	From	To
Grade and Salary		Statistical Draftsman GS-3, \$2650.00 per annum (GS-1535-3-804)
Bureau		Office of the Secretary
Branch		Division of Geography
Headquarters		Washington, D. C.
Departmental or Field		Departmental

O. I. - Martha E. Reid

This appointment is subject to a trial period of one year.

Subject to investigation.

Under this appointment you will be covered by the National
Social Security System.

(SAC) THOMAS H. TELLIER

TH
Mathilda E. Reid
Mathilda E. Reid
Chief, Administrative Branch
Personal Officer
Signed, Classified Position
Office of the Secretary

Appropriation Title: 14-33965-01 Working Fund, Interior, Board on
Resettlement, Treasury, 1951.

JUSTIFICATION: (Indicate relation to external reason for the action recommended.)

Miss Rehberg has been selected for appointment from Civil
Service Certificate No. 2580.Her Civil Service papers, medical certificate, and Form 75
for pre-employment loyalty check are attached.

Attachment(s).

Social Security No. 069-24-3138

BUREAU NOTIFICATION COPY

STANDARD FORM 80 (1 FATT)
UNITED STATES
CIVIL SERVICE COMMISSION
OCTOBER 1948

UNITED STATES
DEPARTMENT OF THE INTERIOR
OFFICE OF THE SECRETARY

NOTIFICATION OF PERSONNEL ACTION

1. NAME (MR.—MRS.—MRS.—FIRST—MIDDLE INITIAL—LAST)				2. DATE OF BIRTH	3. JOURNAL OR ACTION NO.	4. DATE
Mary Charlotte L. Fahrung				1/11/39		
This is to notify you of the following action affecting your employment:						
5. NATURE OF ACTION (USE STANDARD TERMINOLOGY) (To except Recoyed Agcy. Registration with Central Intelligence Agency)				6. EFFECTIVE DATE	7. CIVIL SERVICE OR OTHER LEGAL AUTHORITY	
FROM Statistical Draftsman (GS-1653-3-603)				8/20/61	TO	
GS-3, \$2650.00 per annum				8. POSITION TITLE		
Office of the Secretary Division of Geography Research Branch				9. SERVICE, GRADE, SALARY		
Washington, D. C.				10. ORGANIZATIONAL DESIGNATIONS		
				11. HEADQUARTERS		
<input type="checkbox"/> FIELD		<input checked="" type="checkbox"/> DEPARTMENTAL		12. FIELD OR DEPT'L	<input type="checkbox"/> FIELD	
13. REMARKS						
Any leave remaining to your credit will be transferred. Separated without reemployment rights.						
Please initial here if signature is required SIGNATURE OR OTHER AUTHENTICATION						
15. VETERAN'S PREFERENCE				16. POSITION CLARIFICATION ACTION		
16. SPT		17. POINT		18. PAY	19. GRADE	20. POSITION
16A	16B	17A	17B	18A	18B	19A
				21. DATE OF OATH (ACCESIONS ONLY)	22. LEGAL RESIDENCE	
18. APPROPRIATION FROM TO FBI, Interior, Office of the Secretary, Dept.				20. SUBJECT TO C. S. RETIREMENT ACT (YES - NO)	21. DATE OF OATH (ACCESIONS ONLY)	
				22. LEGAL RESIDENCE		
				23. SIGNATURE (claimant)		

4. PERSONNEL FOLDER COPY

Give this card to the
APPOINTMENT CLERK
Name:
PMS OUTPATIENT CLINIC
4th and C Streets SW,
DC 20003 Tel. 8228
(or 8228 110)

229718

1. FIRST	Charlotte	MIDDLE	L.	SURNAME	Zehrung
2. POSITION TITLE Statistical Draftsman					

3. DATE OF BIRTH 1/29/29 HAS AN APPOINTMENT ON 1/29/42 AT A.M.
AT THE SERVICE CHECKED BELOW. AT P.M.

4. <input type="checkbox"/> PHOTFLUOROGRAM	5. <input type="checkbox"/> OB-GYN	12. <input type="checkbox"/> RADIOLOGY	16. <input type="checkbox"/> NUTRITION
6. <input type="checkbox"/> MEDICAL EXAMINATION	7. <input type="checkbox"/> PHYS. MED.	13. <input type="checkbox"/> HOSP-VAC.	17. <input type="checkbox"/> MENTAL HEALTH
8. <input type="checkbox"/> LABORATORY	10. <input type="checkbox"/> SURGICAL	14. <input type="checkbox"/> DENTAL	18. <input type="checkbox"/> DERMATOLOGY
9. <input type="checkbox"/> MEDICAL	11. <input type="checkbox"/> PEDIATRIC	15. <input type="checkbox"/> ERPT.	
19. <input type="checkbox"/> OTHER <u>(Specify)</u>			

20. CLINIC REGISTER NO. 21. NAME OF DOCTOR

STANDBY MEDICAL CLINIC
4TH AND C STREETS SW
F.P.M. CLINIC #1

MEDICAL APPOINTMENT AND REPORT

2 10-6000-1

STANDARD FORM 61 (REVISED APRIL 1, 1960)
PROMULGATED BY CIVIL SERVICE COMMISSION
CHAPTER 18 FEDERAL PERSONNEL MANUAL

APPOINTMENT AFFIDAVITS

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

.....intended..... Office of Secretary..... Washington, D.C.....
 (Department or agency) Bureau or division) (Place of employment)

I, Charles L. Zehnay 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 a member of any organization that advocates the overthrow of the Government of the United States by force or violence or other unconstitutional means or seeking by force or violence to deny other persons their rights under the Constitution of the United States. I do further swear (or affirm) I will not so advocate, nor will I become a member of such organization during the period that I am an employee of the Federal Government.

C. AFFIDAVIT AS TO STRIKING AGAINST THE FEDERAL GOVERNMENT

I am not engaged in any strike against the Government of the United States and that I will not so engage while an employee of the Government of the United States; that I am not a member of an organization of Government employees that asserts the right to strike against the Government of the United States, and that I will not, while a Government employee, become a member of such an organization.

D. AFFIDAVIT AS TO PURCHASE AND SALE OF OFFICE

I have not paid, or offered or promised to pay, any money or other thing of value to any person, firm or corporation for the use of influence to procure my appointment.

E. AFFIDAVIT AS TO DECLARATION OF APPOINTEE

The answers contained in my Application for Federal Employment, Form No. 52, dated February 1950, filed with the above-named department or agency, which I have reviewed, are true and correct as of this date with the exceptions noted in the Declaration of Appointee on the reverse of this form. (If no exceptions, write "None" on the Declaration of Appointee.)

..... Charles L. Zehnay
 (Signature of Appointee)

Subscribed and sworn before me this 21 day of April A. D. 1951

at Washington D.C.
 (City) (State)

[SEAL] E. L. S. Covell
 act of June 26, 1943 Clerk, Division of Geography
 sec. 206 (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. Question 3 is to be answered in all cases, otherwise answer only those questions which require an answer different from that given to the corresponding questions on your application form. If no answers are different, write "NONE" in Item 10, below. Any false statement in this declaration will be grounds for cancellation of application or dismissal after appointment. Impersonation is a criminal offense and will be prosecuted accordingly.

1. PRESENT ADDRESS (street and number, city and State)

1401 16th St., N.W. - Washington, D.C.

2. (A) DATE OF BIRTH

1/12/28

(B) PLACE OF BIRTH (city or town and State or country)

Dayton, O. U.S.A.

3. (A) IN CASE OF EMERGENCY PLEASE NOTIFY

Samuel D. Zehring

(B) RELATIONSHIP

Father

(C) STREET AND NUMBER, CITY AND STATE

100 Lee Gardens, RR 11

(D) TELEPHONE NO.

HA 5831

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 blanks below. If additional space is necessary, complete under Item 10.

NAME	POST OFFICE ADDRESS (Give street number, if any)	(1) POSITION (2) TEMPORARY OR NOT (3) DEPARTMENT OR AGENCY IN WHICH EMPLOYED	RELATION- SHIP	MAR- RIED (Check one)	SINGLE (Check one)
		1.....			
		2.....			
		3.....			
		4.....			
		5.....			
		6.....			
		7.....			
		8.....			

INDICATE "YES" OR "NO" ANSWER BY PLACING "X"
IN PROPER COLUMN

YES

NO

10. SPACE FOR DETAILED ANSWERS TO OTHER QUESTIONS

ITEM NO. WRITE IN LEFT COLUMN NUMBERS OF ITEMS TO WHICH DETAILED ANSWERS APPLY

5. ARE YOU A CITIZEN OF OR DO YOU OWE ALLEGIANCE TO THE UNITED STATES?

X

6. ARE YOU AN OFFICIAL, OR EMPLOYEE OF ANY STATE, TERRITORY, COUNTY, OR MUNICIPALITY?

X

If your answer is "Yes", give details in Item 10.

7. DO YOU RECEIVE ANY ANNUITY FROM THE UNITED STATES OR DISTRICT OF COLUMBIA GOVERNMENT UNDER ANY RETIREMENT ACT OR ANY BENEFIT OF OTHER COMPENSATION, INCLUDING PAY AND ALLOWANCES?

X

If your answer is "Yes", give in Item 10 reason for retirement, that is, age, optional disability, or by reason of voluntary separation; separation after 3 years service; amount of retirement pay, and under what retirement act, and rating if retired from military or naval service.

8. HAVE YOU BEEN DISCHARGED, DISMISSED, OR DISCONTINUED FROM SERVICE FROM ANY POSITION?

X

If your answer is "Yes", give in Item 10 the name and address of employer, date, and reason in each case.

9. SINCE YOUR 18TH BIRTHDAY, HAVE YOU EVER BEEN ARRESTED, INDICTED, OR SENTENCED INTO JAIL AS A DEFENDANT IN CRIMINAL PROSECUTION OR FOR THE PRACTICING OF CRIMINAL OR DISORDINARY PRACTICES? IF SO, EVER BEEN ORDERED TO LEAVE JAIL OR GUILTY PLEA FOR THE COMMISSION OF ANY LAW POLYK CRIMINAL CRIME (EXCLUDING MIRANDA STATUTE VIOLATIONS FOR WHICH AT THE DISCRETION OF JUDGELESS WAS IMPOSED).

X

If your answer is "Yes", list all such cases under Item 10, giving in each case, (1) the date, (2) the nature of charge or violation; (3) the name and location of the court, (4) the penalty imposed, if any, or other disposition of the case.

If appointed your fingerprints will be taken

INSTRUCTIONS TO APPOINTING OFFICER

The appointing officer before whom the foregoing certificate is made shall determine to his own satisfaction that the appointment to be made, in conformance 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, stability in connection with any record of recent discharge or arrest, and particularly for the following:

(1) Identity of appointee -- The appointee's signature and handwriting are to be compared with the signature and other pertinent papers. The place of residence may be checked against the medical certificate. The appointee should also be questioned on his personal history for agreement with his previous statements.

(2) Age -- If definite age limits have been established for the position, it should be determined that applicant is not outside the age range for appointment. Until such determination is made, the appointment may not be recommended.

(3) Citizenship -- The appointing officer is responsible for observing the citizenship provisions of (1) the Civil Service Rules and (2) appropriation acts. Form 61 constitutes an affidavit for both purposes and is acceptable proof of citizenship status in the absence of conflicting evidence. In doubtful cases the appointing officer should not be compensated until clearance has been secured from the certifying office of the Civil Service Commission.

(4) Members of Family -- Section 9 of the Civil Service Act provides that whenever there are already two or more members of a family serving under probation or permanent appointment in the competitive service, no other member of such family is eligible for probation or permanent appointment in the competitive service. If the appointment is permanent, veterans preference is not subject to this requirement. The above-mentioned provision does not apply to trials by court-martial. In doubtful cases may be referred to the appropriate office of the Civil Service Commission for decision.

500

J. S. GOVERNMENT PRINTING OFFICE 16-25100-1

500

STANDARD FORM 63 Prohibited August 14, 1947 Civil Service Commission (Chapter 12, E.P.A.M.)			
REQUEST FOR LOYALTY DATA ON APPLICANTS AND APPOINTEES			
<small>THIS FORM TO BE USED ONLY FOR APPLICANTS AND APPOINTEES WHERE RECORD CHECKS AND INVESTIGATIONS ARE CONDUCTED BY CIVIL SERVICE COMMISSION (PART I—EXECUTIVE ORDER 9373)</small>		<small>CASE SERIAL NO. (W.R.C. 100000)</small>	
TO: The following information is furnished for identification purposes on the person named below. Kindly furnish a report on any loyalty information contained in your files. (The fingerprints of this person are attached.)			
1. FULL NAME (initials and abbreviations of full name are not acceptable).	(Surname) Zehring	(Given name) Charlotte	(Middle or other name) Louise
2. ALIASES AND NICKNAMES Sherri		3. DATE OF THIS REQUEST 2/14/51	
4. SPECIAL NUMBERS KNOWN TO REQUESTING AGENCY (FBI number or FBI file number, project number, Army or Navy serial number, woman's certificate of identification, alien registration number, Social Security number, etc. Specify which)			
Social Security No. 069-24-3138			
5. PLACE OF BIRTH Dayton, Ohio	6. DATE OF BIRTH Jan. 12, 1929	7. TITLE OF POSITION Statistical Draftsman SENS (Division of Geography)	
8. SEX <input type="checkbox"/> MALE <input checked="" type="checkbox"/> FEMALE	9. MARITAL STATUS <input type="checkbox"/> SINGLE <input type="checkbox"/> MARRIED	10. IF MARRIED, GIVE SPOUSE'S FULL NAME, AND DATE AND PLACE OF BIRTH None	
11. DATE OF APPOINTMENT APPL	12. TYPE OF APPOINTMENT X Executive	<input type="checkbox"/> EXCEPTED	<input checked="" type="checkbox"/> TEMPORARY
13. ORGANIZATIONS WITH WHICH AFFILIATED, OTHER THAN RELIGIOUS OR POLITICAL ORGANIZATIONS OR THOSE WHICH SHOW RELIGIOUS OR POLITICAL AFFILIATIONS Delta Gamma Sorority			
14. DATES AND PLACES OF RESIDENCE FOR THE LAST 10 YEARS			
From 9/11 - 9/16	To San Ras Gardens R. R. 11	City Dayton	State Ohio
9/16 - 6/17	501 Walnut Ave.	Syracuse	N. Y.
7/17 - 9/17	San Ras Gardens	Dayton	Ohio
7/17 - 6/18	501 Walnut Ave.	Syracuse	N. Y.
7/18 - 6/19	301 Yerena Calle Poniente	Guatemala City	Guatemala C.A.
7/19 - 6/20	501 Walnut Ave.	Syracuse	N. Y.
7/19 - 1/20	San Ras Gardens	Dayton	Ohio
2/20 - 5/20	501 - 14th St., N. W.	Washington	D. C.
7/20 - pres. - Pan American Airlines, Dayton, Ohio			
15. DATES, NAMES AND ADDRESSES OF EMPLOYERS FOR THE LAST 10 YEARS			
From Unemployed prior to 6/11	To Employee	Address Dayton, Ohio	
6/11 - 9/17	Frito-Lay Plant #2	Dayton, Ohio	
9/17 - 1/20	Unemployed		
1/20 - 5/20	Grants Dime Store (part-time)	Syracuse, N. Y.	
5/20 - 6/20	Unemployed		
6/20 - 9/20	San Ras Gardens, R. R. 11	Dayton, Ohio	
9/20 - 2/20	Unemployed		
2/20 - 5/20	National Peanut Council	1111 Pennsylvania Street Bldg., Washington, D. C.	
5/20 - pres.	San Ras Gardens	Dayton, Ohio	
16. THIS AGENCY HAS LOYALTY INFORMATION REQUESTED FURNISHED BY THE AGENCIES INDICATED BELOW			
AGENCY WHICH MADE THE LOYALTY REQUEST None	DATE OF REPORT 10-9-2015	REMARKS Q.P.	
17. THIS SPACE RESERVED FOR RETURN REPORT TO AGENCY WHERE NO DISCRIMINATORY INFORMATION IS DEVELOPED		18. NAME AND ADDRESS OF APPOINTING AGENCY Personnel Officer Office of the Secretary Department of the Interior Washington 25, D. C.	

UNITED STATES CIVIL SERVICE COMMISSION DIRECTOR FOURTH U. S. CIVIL SERVICE REGION TEMPORARY BUILDING "B" 3RD & JEFFERSON DRIVE, S. W. WASHINGTON, D. C. PREAPPOINTMENT LOYALTY CHECK MAR 15 1951 PRELIMINARY REPORT OF CLEARANCE ON INITIAL CHECKS		OFFICE OF PERSONNEL .. CASE SPECIAL CLASSIFICATION 4-51-F-1458 S-145 2. DATE OF THIS REPORT 3/14/51 3. PROPOSED ACTION APRIL 4. COMPETITIVE 5. EXCEPTED 4/7/51 6. NAME (Last, first, middle) ZUMWALT, Charlotte Louise (aka: Sherrill) 7. DATE OF BIRTH 1/12/20 8. PROPOSED POSITION, ORGANIZATIONAL DESIGNATION, AND PLACE OF EMPLOYMENT Statistical Draftsmen, Port. of Int. Off. of Sec'y, DC
<p>Preappointment loyalty check has been made on the above applicant for a 'sensitive' position, pursuant to Chapter 32 of the Federal Personnel Manual. This check revealed no derogatory information regarding this person's loyalty.</p> <p>No further papers are required if the proposed action is the appointment of a person employed by another agency and you have determined from the losing agency that the appointee or incumbent check has been completed.</p> <p>For any other type of appointment action, please submit to this office within three working days after the appointee enters on duty (1) application, (2) file covering any investigation or inquiry conducted by your agency on a preappointment basis, and (3) Standard Form 87 (fingerprint chart) unless fingerprint search has already been made as shown by item 9A below.</p>		
<p>9A. FINGERPRINT SEARCH HAS BEEN COMPLETED AS PART OF THE PREAPPOINTMENT LOYALTY CHECK.</p> <p><input checked="" type="checkbox"/> B. FINGERPRINTS WERE NOT SUBMITTED AS PART OF THE PREAPPOINTMENT LOYALTY CHECK.</p> <p>C. FINGERPRINTS WERE UNCLASSIFIABLE. YOU MAY EITHER (1) MAKE THE APPOINTMENT AT ONCE AND SEND REPRINTS WITH THE OTHER REQUIRED PAPERS, OR (2) WITHHOLD APPOINTMENT AND SUBMIT REPRINTS SEPARATELY FOR COMPLETION OF FINGERPRINT SEARCH BEFORE YOU DECIDE WHETHER TO APPOINT.</p> <p>UNCLASSIFIABLE FINGERPRINTS <input type="checkbox"/> ARE ATTACHED. <input type="checkbox"/> WILL BE FORWARDED ON RECEIPT FROM OUR CENTRAL OFFICE.</p> <p>Please use the copy of this notice for your transmittal or reply. Space has been provided on the back for your convenience. A reply is required, even though it may not be necessary to transmit forms in this case.</p> <p style="text-align: right;"><i>M. McElroy</i> REGIONAL DIRECTOR</p>		

TO: DIRECTOR, U. S. CIVIL SERVICE REGION		
1. Forms attached as requested. Proposed personnel action effected <u>April 9, 1951</u>		
2. Forms not submitted because proposed personnel action dropped from consideration.		
3. Forms not submitted because this is an appointment without break in service of a person who was employed by another agency and it has been determined from the Official Personnel Folder of the losing agency that the appointee or incumbent check has been completed.		
4. Reprints on Standard Form 87 attached. Decision regarding appointment will not be made until the results of the FBI fingerprint search have been received.		
REMARKS: <i>Forms 57 and 87 attached.</i>		
DATE: <u>April 9, 1951</u> SIGNATURE OF APPOINTING OFFICER: <u>(S.G.S.) R. L. SMITH</u> OFFICIAL TITLE: <u>Personnel Officer, Office of the Secretary, Dept. of Interior.</u>		

OPTIONAL FORM NO. 5 DECEMBER 1957 CIVIL SERVICE COMMISSION (SUPERSEDES CSC FORM 1060) INQUIRY AS TO AVAILABILITY		Return this form to → Miss Mathilda C. Heusner Chief, Administrative Branch Division of Geography Dept. of the Interior Washington 25, D.C.
Miss Charlotte L. Zehrung San Rae Gardens, RR11 Dayton 9, Ohio (Please correct address if different from above)		DATE Jan. 30, 1951 POSITION Statistical Draftsman, G-3 LOCATION Washington, D. C. TYPE OF APPOINTMENT: <input checked="" type="checkbox"/> Indefinite <input type="checkbox"/> PROBATIONAL <input type="checkbox"/> TEMPORARY FOR
<p>This office is considering you among others for the employment described. Please fill out the "Availability Statement" below, indicating whether you would accept this position if offered, and return the entire sheet to this office. Appointment would be subject to the Civil Service requirements described on the back of this letter. Whether you are available or not, please reply within 3 days in order that one of those who are available may be selected as promptly as possible to fill the vacancy.</p> <p>Failure to reply to this inquiry will result in the removal of your name from the register of eligibles until such time as you request restoration and furnish the information asked for in the statement below.</p> <p>THIS IS A LETTER OF INQUIRY AND NOT AN OFFER OF EMPLOYMENT. If selected, you will be notified and given further instructions.</p> <p>Other information:</p> <p style="text-align: right;">Sincerely yours, <i>Mathilda C. Heusner</i> Chief, Admin. Branch</p>		
<p>AVAILABILITY STATEMENT</p> <p>(Check one) <input checked="" type="checkbox"/> I am available and wish to be considered for the position described above. I can report for duty within 10 days after notification. I am now employed by <u>San Rae Gardens</u> at <u>Dayton 9, Ohio</u>.</p> <p><input type="checkbox"/> I do not wish to be considered for the position described above. I am giving my reasons on the other side of this form.</p> <p><input type="checkbox"/> I request that my name be removed from the active list of eligibles until I report that I am available for appointment.</p> <p><input checked="" type="checkbox"/> Consider me available for other appointments, subject to the following conditions: The position must pay at least \$...2,650... per (year, month, day, or hour). I am willing to work: <input checked="" type="checkbox"/> In Washington, D. C.; <input type="checkbox"/> Anywhere in the U. S.; <input type="checkbox"/> Outside the U. S. I will accept appointment in the following locations only:</p> <p>I will accept short-term appointment for: <input type="checkbox"/> 1 to 3 months; <input type="checkbox"/> 3 to 6 months; <input checked="" type="checkbox"/> 6 to 12 months.</p> <p><i>Feb - 2-1951</i> <i>Charlotte L. Zehrung</i> (Date) (Signature)</p>		

STANDARD FORM 78
JULY 1948
FEDERAL PERSONNEL
MANUAL CHAPTER VI

UNITED STATES CIVIL SERVICE COMMISSION
CERTIFICATE OF MEDICAL EXAMINATION

(Applicant must supply information below to heavy line)
(Type write, or Print in Ink)

1. MR. MRS. MISS	(FIRST NAME) Charlotte	(MIDDLE INITIAL) L.	(LAST) Zehrung	2. DATE OF BIRTH July 18, 1889	3. <input type="checkbox"/> MALE <input checked="" type="checkbox"/> FEMALE
4. ADDRESS 511 W. Main St., Dayton 3, Ohio				5. TITLE OF POSITION Statistical Draftsman	
6. DEPARTMENT OR BUREAU IN WHICH YOU ARE TO BE EMPLOYED Office of the Secretary Interior - Division of Geography				7. LOCATION Washington, D. C.	
8. ARE YOU NOW EMPLOYED IN THE POSITION SHOWN IN ITEM 5? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO. IF YOUR ANSWER IS "YES," GIVE THE DATE OF YOUR ORIGINAL APPOINTMENT TO THIS POSITION:					
9. DO YOU HAVE ANY PHYSICAL DEFECT OR DISABILITY WHATSOEVER? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO. IF YOUR ANSWER IS "YES," GIVE DETAILS:					

(a) DOES THE VETERANS ADMINISTRATION RECOGNIZE SERVICE-CONNECTED DISABILITY IN YOUR CASE? YES NO
(c) HAVE YOU EVER RECEIVED DISABILITY RETIREMENT FROM THE U. S. CIVIL SERVICE COMMISSION? YES NO

Sign your name in INK as it appears on your application in the presence of the physician for purpose of identification.

SIGNATURE OF APPLICANT

Charlotte L. Zehrung

DOCTOR: All questions on both sides of this certificate and on the lower half of the attached Health Qualification Placement Record must be answered. Before beginning the examination refer to items 9 and 10 on the Health Qualification Placement Record so that you will have knowledge of the physical requirements of the position to which the applicant is to be appointed. Sign both this certificate and the Health Qualification Placement Record.

1. HEIGHT: 6 FEET 8 INCHES WEIGHT 120 POUNDS

2. EYES: 20 20

(a) DISTANT VISION (SNELLEN): WITHOUT GLASSES: RIGHT 20 LEFT 20 WITH GLASSES, IF WORN: RIGHT 20 LEFT 20

(b) WHAT IS THE LONGEST AND SHORTEST DISTANCE AT WHICH THE FOLLOWING SPECIMEN OF JAEGER NO. 2 TYPE CAN BE READ BY THE APPLICANT? TEST EACH EYE SEPARATELY.

employees in the Federal classified service as may be requested by the Civil Service Commission or its authorized representative. This order will supplement the Executive Orders of May 20 and June 18, 1924 (Executive Order, September 4, 1924).

WITHOUT GLASSES:

R. 21 IN. TO 25 IN.

WITH GLASSES, IF USED:

R. 21 IN. TO 28 IN.

L. 21 IN. TO 25 IN.

L. 21 IN. TO 28 IN.

(c) EVIDENCE OF DISEASE OR INJURY: RIGHT

LEFT

(d) COLOR VISION: IN COLOR VISION NORMAL WHEN ISHIHARA OR OTHER COLOR PLATE TEST IS USED? YES NO

IF NOT, CAN APPLICANT PASS LANTERN, YARN OR OTHER COMPARABLE TEST? YES NO

2. EARS. (CONSIDER DENOMINATORS INDICATED HERE AS NORMAL. RECORD AS NUMERATORS THE GREATEST DISTANCE HEARD.) ORDINARY CONVERSATION: RIGHT EAR 20 FT. LEFT EAR 20 FT. EVIDENCE OF DISEASE OR INJURY: RIGHT EAR 20 FT. LEFT EAR 20 FT.

4. NOSE	5. PARA NASAL SINUS	6. MOUTH AND THROAT
<i>Natural</i>	<i>Natural</i>	<i>Natural</i>
7. GASTRO-INTESTINAL	(a) HISTORY OF PEPTIC ULCER: <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO. IF "YES," IS ULCER: <input type="checkbox"/> ACTIVE <input type="checkbox"/> QUIESCENT <input type="checkbox"/> HEALED HOW LONG? _____ DATE OF LAST X-RAY _____ SYMPTOMS PRESENT, IF ANY (Severity, frequency, etc.): TREATMENT (List space under "Remarks" if needed):	

8. METACRIC DISORDERS (INDICATE ANY ABNORMALITY OF THE FOLLOWING GLANDS BY A CHECK IN THE APPROPRIATE BOX, AND EXPLAIN UNDER "REMARKS".)

THYROID

PANCREAS

PITUITARY

OVARIAN

9. HEART AND BLOOD VESSELS		(A) BLOOD PRESSURE: MM. HG SYSTOLIC <u>110</u> DIASTOLIC <u>78</u>
(B) IS ORGANIC HEART DISEASE PRESENT? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO		(C) IF ORGANIC HEART DISEASE IS PRESENT, IS IT FULLY COMPENSATED? <input type="checkbox"/> YES <input type="checkbox"/> NO
(D) PULSE RATE: SITTING <u>68</u> IMMEDIATELY AFTER EXERCISE (UNLESS CONTRAINDICATED) <u>74</u> TWO MINUTES AFTER EXERCISE <u>65</u> CARDIAC RESERVE <u>Good</u>		(GOOD, FAIR, OR POOR)
10. LUNGS: RIGHT <u>Normal</u> LEFT <u>Normal</u>		
HISTORY OF TUBERCULOSIS? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO. IF "YES," HOW LONG HAS THE DISEASE BEEN ARRESTED?		
IF THERE IS HISTORY OF TUBERCULOSIS, IS ANY TYPE OF COLLAPSE THERAPY BEING RECEIVED AT PRESENT? <input type="checkbox"/> YES <input type="checkbox"/> NO. IF "YES," GIVE FULL DETAILS UNDER "REMARKS." IS MEDICAL SUPERVISION NECESSARY? <input type="checkbox"/> YES <input type="checkbox"/> NO (IF X-RAY IS MADE, GIVE REPORT UNDER "REMARKS.")		
11. HERNIA: <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO. IF "YES," NAME VARIETY: INGUINAL, VENTRAL, FEMORAL, POST-OPERATIVE, ETC. IF PRESENT, IS IT SUPPORTED BY A WELL-FITTING TRUSS? <input type="checkbox"/> YES <input type="checkbox"/> NO		
12. VARICOSE VEINS: <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO. IF "YES," STATE LOCATION AND DEGREE		
13. FEET: IS FLAT FOOT PRESENT? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO. IF "YES," STATE DEGREE OF IMPAIRMENT OF FUNCTION (NONE, SLIGHT, MODERATE, SEVERE)		
14. DEFORMITIES, ATROPHIES, AND OTHER ABNORMALITIES, DISEASE NOT INCLUDED ABOVE <u>None</u>		
15. SCARS OF SERIOUS INJURY OR DISEASE <u>None</u>		
16. NERVOUS SYSTEM: (A) INCLUDE SYMPTOMS AND FULL HISTORY OF ANY MENTAL, NERVOUS, OR EMOTIONAL ABNORMALITY (USE ADDITIONAL SHEETS IF NECESSARY) <u>None</u> (B) HAS APPLICANT EVER BEEN HOSPITALIZED OR TREATED FOR A MENTAL ILLNESS? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO (C) WHERE (NAME AND LOCATION OF HOSPITAL): (D) DATE OR DATES OF HOSPITALIZATION: (E) DESCRIBE ANY RESIDUALS OF PREVIOUS MENTAL OR NERVOUS ILLNESS: (F) ANY HISTORY OF EPILEPSY OR FAINTING SPELLS? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO. IF SO, GIVE DETAILS UNDER "REMARKS" BELOW 17. EVIDENCE OR HISTORY OF VENEREAL DISEASE. IF BLOOD SEROLOGY OR OTHER LABORATORY EXAMINATIONS ARE MADE, GIVE DETAILS UNDER "REMARKS." <u>None</u>		
18. URINALYSIS (IF INDICATED): SP. GR. <u>1.020</u> ALBUMEN <u>None</u> SUGAR <u>None</u> CASTS <u>None</u> BLOOD <u>None</u> PUS <u>None</u>		
I HAVE FOUND THE APPLICANT ABNORMAL UNDER THE FOLLOWING HEADINGS:		
REMARKS: <i>Good physical condition. Normal state of health.</i>		
19. SIGNATURE OF PHYSICIAN OR EXAMINER. <i>Albert F. Kuhl</i>	NAME TYPED OR PRINTED Albert F. Kuhl, M.D.	DATE 2/8/51
20. ADDRESS OF EXAMINING PHYSICIAN (Type or printed) 916 Harries Bldg. Dayton 2, Ohio		21. DO YOU HAVE FEDERAL DESIGNATION? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO IF YES, SPECIFY
		<input type="checkbox"/> FULL TIME <input type="checkbox"/> PART TIME <input type="checkbox"/> FEE BASIS

HEALTH QUALIFICATION PLACEMENT RECORD

(This section is comparable to Standard Form 90 promulgated March 1948 by Bureau of the Budget Circular A-24)

1. MR. MRS. MISS	(FIRST NAME) GUY	(MIDDLE INITIAL) R	(LAST) GUTHRIE	2. DATE OF BIRTH JULY 18, 1939	3. <input type="checkbox"/> MALE <input checked="" type="checkbox"/> FEMALE
4. ADDRESS San R.R. C.R. Room, Dayton 9, Ohio				5. TITLE OF POSITION Statistical Draftsman	
6. DEPARTMENT OR BUREAU IN WHICH YOU ARE TO BE EMPLOYED Office of the Secretary Interior - Division of Geography				7. LOCATION Washington, D. C.	
8. ARE YOU NOW EMPLOYED IN THE POSITION SHOWN IN ITEM 5? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO. IF YOUR ANSWER IS "YES," GIVE THE DATE OF YOUR ORIGINAL APPOINTMENT TO THIS POSITION:					

TO BE COMPLETED BY APPOINTING OFFICER: Sections 9 and 10

(A) BRIEF OUTLINE OF WHAT WORKER DOES

For the physician's use, set down in brief and simple terms what the employee does on the job, including environmental details such as stairs to climb, distance to rest-room facilities, cafeteria, work-shift, etc. (Use Section 9 below.)

(B) PHYSICAL DEMANDS OF THE POSITION

In Section 10 below encircle the number of those factors which are essential to the duties of the position for which this applicant is being considered. The blank spaces may be used for special factors not listed.

B. TITLE OF POSITION AND OUTLINE OF WHAT WORKER DOES IN THIS POSITION (Adapt one of dictionary of occupational titles as guide, as applicable)

Statistical Draftsman - To assist in the performance of drafting, lettering and incidental statistical clerical work in the preparation and revision of index maps, showing the location of approved and disapproved names and the extent of features to which names apply; charts, graphs and other illustrative materials in connection with the functions of the Research Branch and for administrative purposes.

TO BE COMPLETED BY EXAMINING PHYSICIAN: Sections 10, 11, 12, 13, 14, and 15

INSTRUCTIONS: The items circled below indicate the physical requirements of the position for which this individual is being considered. Indicate the individual's physical capacities for this position by placing an X in the appropriate column opposite the numbers encircled. If the individual has any other physical limitations

relating to physical requirements not encircled or not covered by this form, indicate these under "Remarks" on the reverse side. Whenever PARTIAL capacity has been indicated, explain under "Remarks," giving specific quantities.

12.

PHYSICAL REQUIREMENTS

ENVIRONMENTAL FACTORS

	CAPACITY				CAPACITY		
	FULL	PARTIAL	None		FULL	PARTIAL	None
1. OUTSIDE				18. WORKING AROUND MACHINERY WITH MOVING PARTS			
2. OUTSIDE AND INSIDE				19. MINIMAL OBJECTS OR VEHICLES			
3. EXCESSIVE HEAT				20. WORKING ON LADDERS OR SCAFFOLDING			
4. EXCESSIVE COLD				21. WORKING BELOW SNOW			
5. EXCESSIVE HUMIDITY				22. UNUSUAL FATIGUE FACTORS (Specify)			
6. EXCESSIVE DAMPNESS OR CHILLING							
7. DRY ATMOSPHERIC CONDITIONS				23. WORKING WITH HANDS IN WATER			
8. EXCESSIVE NOISE, INTERMITTENT				24. EXPLOSIVES			
9. CONSTANT NOISE				25. VIBRATION			
10. DUST				26. WORKING CLOSELY WITH OTHERS			
11. SPILLS, ASPIRETS, ETC.				27. WORK ALONE			
12. FUMES, SMOKES, OR GASES				28. PROTRACTED OR IRREGULAR HOURS OF WORK			
13. SOLVENTS (Inhalation or skin)				29. SPECIAL FACTORS (Specify)			
14. GREASES AND OILS							
15. RADIANT ENERGY							
16. ELECTRICAL ENERGY							
17. SUPPORT OR LIVING WORKING SURFACES							

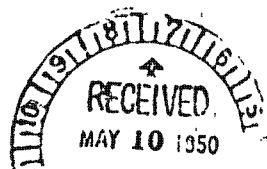
STANDARD FORM 57-NOV 1967 U. S. CIVIL SERVICE COMMISSION		APPLICATION FOR FEDERAL EMPLOYMENT				
<p>INSTRUCTIONS: In order to prevent delay in consideration of your application, answer every question on this form clearly and completely. Type, write or print in INK. In applying for a specific United States Civil Service examination, read the examination announcement carefully and follow all directions. If you are applying for a WRITTEN examination, follow the instructions on the admission card regarding disposition of this application. If you are applying for an UNWRITTEN examination, mail this application to the office named in the announcement. Be sure to mail to the same office any other forms required by the announcement. Notify the office with which you file this application of any change in your address.</p>						
APPLICATION NO. 306603 U180 ANNOUNCEMENT	1. NAME OF EXAMINER OR KIND OF POSITION APPLIED FOR <i>Statistical Drafter</i> <small>OPTIONAL (as mentioned in examination announcement)</small>			DO NOT WRITE IN THIS BLOCK <small>For Use of Civil Service Commission Only</small>		
	2. PLACE OF EMPLOYMENT APPLIED FOR (City and State) <i>Washington, D.C.</i>		4. DATE OF THIS APPLICATION <i>Feb 16 1968</i>		5. APPROVAL STATUS <input type="checkbox"/> APPROVED <input type="checkbox"/> MATERIAL SUBMITTED <input type="checkbox"/> NOT APPROVED <input type="checkbox"/> RETURNED	
3. HOME ADDRESS (Street Name) (Middle) (Maiden, if any) (Last) <i>Miss Charlotte Louise Tschung</i> 6. STREET AND NUMBER OR R.D. NUMBER <i>San Tee Gardens R.D. #1</i>			NOTATIONS: <small>APP. REVIEW</small>			
7. CITY OR POST OFFICE (including postal zone) AND STATE <i>Dayton, Ohio</i>			APPROVED: <i>G. E. T.</i>			
8. LEGAL OR VOTING RESIDENCE (State) 9. (a) OFFICE PHONE (b) HOME PHONE <i>Ohio</i>						
10. DATE OF BIRTH (month, day, year) <i>January 12, 1929</i>			11. MARRIED, SINGLED <input type="checkbox"/> MARRIED <input checked="" type="checkbox"/> SINGLE			
12. PLACE OF BIRTH (City and State; if born outside U.S., name city and country) <i>Dayton, Ohio</i>						
13. (a) HEIGHT WITHOUT SHOES: (b) WEIGHT: <input type="checkbox"/> MALE 5 FEET ... 8 INCHES 132 POUNDS <input checked="" type="checkbox"/> FEMALE						
14. (a) HAVE YOU EVER BEEN EMPLOYED BY THE FEDERAL GOVERNMENT? (b) YES <input checked="" type="checkbox"/> NO <small>(b) IF SO, GIVE LAST GRADE AND DATE OF LAST CHANGE IN GRADE</small>			<small>INITIALS AND DATE</small> <i>5-18-50</i>			
15. (a) WHAT IS THE LOWEST ENTRANCE SALARY YOU WILL ACCEPT? \$ 23.00 PER YEAR. <small>You will not be considered for any position with a lower entrance salary.</small>			(d) CHECK IF YOU WILL ACCEPT APPOINTMENT, IF OFFERED: <input checked="" type="checkbox"/> IN WASHINGTON, D. C. <input type="checkbox"/> ANYWHERE IN THE UNITED STATES <input type="checkbox"/> OUTSIDE THE UNITED STATES			
(b) CHECK IF YOU WILL ACCEPT SHORT TERM APPOINTMENT, IF OFFERED, FOR <input type="checkbox"/> 1 TO 3 MONTHS <input type="checkbox"/> 3 TO 6 MONTHS <input type="checkbox"/> 6 TO 12 MONTHS			(e) IF YOU WILL ACCEPT APPOINTMENT IN CERTAIN LOCATIONS ONLY, GIVE ACCEPTABLE LOCATIONS <i>222-211</i>			
(c) IF YOU ARE WILLING TO TRAVEL, SPECIFY <input type="checkbox"/> OCCASIONALLY <input type="checkbox"/> FREQUENTLY <input type="checkbox"/> CONSTANTLY						
16. EXPERIENCE. It is important for you to furnish all information requested below in sufficient detail to enable the Civil Service Commission and the appointing officers of agencies to give you full credit in determining your qualifications. Use a separate sheet for each position. State first your present position and then back, explaining clearly the principal tasks which were performed in each position, accounting for all periods of unemployment. Experience gained more than 15 years ago which is not pertinent to the work for which you are applying may be summarized in one or more of the blocks. If your duties changed materially while working for the same employer, use a separate block to describe each position. You may include any pertinent religious, civic, welfare, or organizational activity which you have performed, either with or without compensation, showing the number of hours per week and where and in what kind of organization you were engaged in such activity. Military experience should be described in the space below in its proper sequence:						
<small>(a) If you were ever employed in any position under a tenure different from that shown in Item 5 of this application, give under "Description of your work" for each position, the name used.</small>						
<small>(b) If you have never been employed or are now unemployed, indicate that fact in the space provided below for "Present Position."</small>						
1. PRESENT POSITION						
DATES OF EMPLOYMENT (month, year) <small>FROM TO PRESENT TIME</small>		EXACT TITLE OF YOUR PRESENT POSITION		CLASSIFICATION GRADE (if in Federal Service) <small>GRADE</small>	SALARY OR EARNINGS <small>STARTING, \$ PRESENT, \$ PER</small>	
PLACE OF EMPLOYMENT (City and State)		NAME AND TITLE OF IMMEDIATE SUPERVISOR				
NAME AND ADDRESS OF EMPLOYER (Name, organization, or person, if Federal, name department, bureau or establishment, and division)		KIND OF BUSINESS OR ORGANIZATION (e.g., wholesale firm, insurance agency, manufacture of tanks, etc.)				
NUMBER AND KIND OF EMPLOYER'S PROPERTY HELD BY YOU		REASON FOR DESIRING TO CHANGE EMPLOYMENT				
DESCRIPTION OF YOUR WORK						

(CONTINUED ON NEXT PAGE)

SF-6020-2

* CONTINUED					
(2) DATES OF EMPLOYMENT (month, year) From <u>June '48</u> To <u>Sept '49</u>		EXACT TITLE OF YOUR POSITION <u>Clerk</u>		CLASSIFICATION GRADE (if in Federal service)	
PLACE OF EMPLOYMENT (city and State)				SALARY OR EARNINGS: STARTING \$ <u>1</u> FINAL \$ <u>1</u>	PER PER
NAME AND TITLE OF IMMEDIATE SUPERVISOR <u>Dayton, Ohio - Son Rae Gerdens Co-owner: Ray F McKechnie</u>					
NAME AND ADDRESS OF EMPLOYER (firm, organization, or person, if Federal, name department, bureau or establishment, and division) <u>Ray F McKechnie</u>					
NAME OF BUSINESS OR ORGANIZATION (e.g., wholesale silk, insurance agency, manufacturer of trucks, etc.) <u>Son Rae Gerdens - Dayton, O</u>					
REASON FOR LEAVING <u>Gift shop</u>					
DESCRIPTION OF YOUR WORK <u>clerked in store in charge of books</u>					
(3) DATES OF EMPLOYMENT (month, year) From <u>June '47</u> To <u>Sept '47</u>		EXACT TITLE OF YOUR POSITION		CLASSIFICATION GRADE (if in Federal service)	
PLACE OF EMPLOYMENT (city and State)				SALARY OR EARNINGS: STARTING \$ <u>1</u> FINAL \$ <u>1</u>	PER PER
NAME AND TITLE OF IMMEDIATE SUPERVISOR <u>Dayton, Ohio Frigidaire</u>					
NAME AND ADDRESS OF EMPLOYER (firm, organization, or person, if Federal, name department, bureau or establishment, and division) <u>Frigidaire - Dayton, O</u>					
NAME OF BUSINESS OR ORGANIZATION (e.g., wholesale silk, insurance agency, manufacturer of trucks, etc.) <u>manufacture of Frigidaires</u>					
REASON FOR LEAVING <u>return to school</u>					
DESCRIPTION OF YOUR WORK <u>worked on assembly line worked in office of chemical laboratory</u>					
(4) DATES OF EMPLOYMENT (month, year) From <u>1948</u> To <u>1949</u>		EXACT TITLE OF YOUR POSITION		CLASSIFICATION GRADE (if in Federal service)	
PLACE OF EMPLOYMENT (city and State)				SALARY OR EARNINGS: STARTING \$ <u>1</u> FINAL \$ <u>1</u>	PER PER
NAME AND ADDRESS OF EMPLOYER (firm, organization, or person, if Federal, name department, bureau or establishment, and division)					
NAME OF BUSINESS OR ORGANIZATION (e.g., wholesale silk, insurance agency, manufacturer of trucks, etc.)					
NUMBER AND KIND OF EMPLOYEES SUPERVISED BY YOU					
REASON FOR LEAVING					
DESCRIPTION OF YOUR WORK					

000123, MAY 11 1950



2601-16th St., N.W.
Washington, D.C.
May 9, 1950.

U.S. Civil Service Commission
Washington, D.C.

Dear Sir:

I send in material for the
unpublished year for a Statistical
Department, the announcement
number of which is 130.

I have moved since the
date I sent in my paper. Would
you please make the necessary
changes so I will receive
notices of my mail in my
new address.

My old address was:

2601 - 16th St., N.W.
Washington, D.C.

My new address is:

17" Sea Rae Garden
Dayton 5, Ohio R.R. #11

Thank you very much.

Sincerely,

Charlotte L. Zehring

UNITED STATES CIVIL SERVICE COMMISSION
RATING SHEET—RATING PROCEDURE NO. III.
(Handbook X-105)

NAME OF APPLICANT <i>Charlotte L. Zehring</i>		PREFERENCE <input type="checkbox"/> 5-PT. <input type="checkbox"/> 10-PT. <input type="checkbox"/> NONE	APPLICATION NO.
POSITION TITLE <i>Statistical Drafterman</i>	GS-1533	POSITION TITLE <i>do</i>	
ANNOUNCEMENT NO. <i>U-130</i>	QUALIFYING EXPERIENCE <i>GRADE GS-3</i>	ANNOUNCEMENT NO.	QUALIFYING EXPERIENCE <i>GRADE GS-2</i>
BASIC RATING <i>85</i>		BASIC RATING <i>90</i>	
ADDITIONAL POINTS <i>2</i>		ADDITIONAL POINTS <i>4</i>	
EARNED RATING <i>87</i>		EARNED RATING <i>94</i>	
VETERANS' PREFERENCE		VETERANS' PREFERENCE	
FINAL RATING		FINAL RATING	
EXAMINER <i>R.H.C.</i>	DATE <i>5-18-50</i>	EXAMINER <i>R.H.C.</i>	DATE <i>5-18-50</i>
REVIEWER	DATE	REVIEWER	DATE
COMMENTS:			
POSITION TITLE	POSITION TITLE		
ANNOUNCEMENT NO.	QUALIFYING EXPERIENCE <i>GRADE</i>	ANNOUNCEMENT NO.	QUALIFYING EXPERIENCE <i>GRADE</i>
BASIC RATING		BASIC RATING	
ADDITIONAL POINTS		ADDITIONAL POINTS	
EARNED RATING		EARNED RATING	
VETERANS' PREFERENCE		VETERANS' PREFERENCE	
FINAL RATING		FINAL RATING	
EXAMINER	DATE	EXAMINER	DATE
REVIEWER	DATE	REVIEWER	DATE
COMMENTS:			

Education to be Substituted
for Experience

High School

2 years	Mechanical Drawing
2 years	Art
1½ years	Algebra
1 year	Geometry
½ year	Trigonometry

College

1 year	4 credits hrs. from Expression (Art)
1 year	6 credits hrs. Statistics 3 hrs/week lectures 1½ hrs/week Laboratory

Form 18
February 1948Form approved
Bureau Number 60-RUOUNITED STATES CIVIL SERVICE COMMISSION
PROOF OF RESIDENCE

Application for appointment in the appointed departmental service must be accompanied by a certificate showing legal or voting residence in the State or Territory claimed for at least one year next preceding the date of making application. Therefore, if you have no permanent in the appointed departmental service, the following questions must be answered, and the first and Officer's Certificate of Past Service issued and executed. Failure to submit this form, properly executed, with your application may result in loss of consideration for appointment in the appointed service. Applicants who now hold permanent positions in the appointed departmental service are not required to have the Officer's Certificate of Residence executed and should write on it "Am in the appointed service."

1. First name (Middle) Maiden, if any) (Last)		2. Name of examination	
Mr. Mrs. Miss Zehring, Charlotte, b.		Statistical Draftsman	
3. Street and number, or Post Office, N. D. number 2601 16th St., N.W. - 725		4. Option (if any)	
Post office (including postal zone) and State Washington, D.C.		5. Place and date of written examination (if any)	
6. (a) In what State or Territory do you have have Legal residence ... Ohio or Voting residence From Jan 19, 49 to Feb 1, 1950 (Month) (Yr.) (Month) (Yr.)		(a) In what county do you have have Legal residence ... Montgomery or Voting residence From July 19, 49 to Feb 1, 1950 (Month) (Yr.) (Month) (Yr.)	
7. If during the past year you have not resided continuously in the State or Territory in which you claim legal or voting residence, or are not now actually living in such State or Territory, indicate in the following blanks the dates of absences, and locations and occupations during such absences:			
(a) Date left (Month, Year)	(b) Date returned (Month, Year)	(c) Location during absence (City and State)	(d) Occupation
Sept. 14, 49	Dec. 1949	Hyde Park, N.Y.	Student
Jan. 5, 50		Washington, D.C.	Holiday, teacher at C...
8. If you are under 21 years of age, fill in the following blanks:			
(a) Legal residence of parent or guardian	(b) Length of such residence	(c) Present post office address of parent or guardian	
State Is he a voter in that State? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	From 10 (Month) 19 (Yr.) to 10 (Month) 19 (Yr.)	City or town County State	
County From 10 (Month) 19 (Yr.) to 10 (Month) 19 (Yr.)		County State	
9. If you are a married woman, fill in the following blanks:			
(a) Date of marriage	(b) Legal residence of husband	(c) Length of such residence	
	State Is he a voter in that State? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	From 10 (Month) 19 (Yr.) to 10 (Month) 19 (Yr.)	
	County From 10 (Month) 19 (Yr.) to 10 (Month) 19 (Yr.)		
JURAT (OR OATH)			
<p>This Jurat (or oath) must be executed before a Notary Public, the Secretary of a United States Civil Service Commission in India, or other officer authorized to administer oaths for general purposes, before whom the applicant must appear in person.</p> <p>I, the undersigned, DO SOLEMNLY SWEAR (OR AFFIRM) that the statements made by me in answer to the foregoing questions are full and true to the best of my knowledge and belief.</p>			
<p>If female, prefix "Miss" or "Mrs." and if married, use your own given name, as "Mrs. Mary L. Doe"</p>		<p>Signature of applicant <i>Charlotte L. Zehring</i> <small>(Sign your name in ink—use plain name, without initials and surname)</small></p>	
<p>Notary Public, State of Ohio, county of Montgomery, and State for Seal of Commissioner of Civil Service, dated 13th day of February, 1950.</p> <p>NOTARY PUBLIC MONTGOMERY, OHIO <small>(Signature of Notary Public)</small></p>			
<p>My commission expires March 31, 1954</p>			
<p>(Official title)</p>			
OFFICER'S CERTIFICATE OF RESIDENCE			
<p>Instructions.—If the applicant's claim is based on legal residence, the certificate must be executed by a Notary Public, county, municipal, or police court clerk, mayor, judge of the peace, or other officer in the county or city in which the applicant claims residence. If the claim is based on voting residence alone, a certificate must be executed by the registrar of voters or other officer of the Board of Elections. In either case the officer must be an actual resident and officer in the city or county claimed by the applicant, and the certificate must bear his official seal, or, in lieu thereof, certification of his official character by the proper officer under official seal.</p> <p>The applicant is not required to appear in person before the officer who executes this certificate, but the officer should satisfy himself from credible and competent evidence as to facts to which he certifies.</p>			
<p>I, <u>Charlotte L. Zehring</u>, do hereby certify that <u>Charlotte L. Zehring</u>, the applicant who makes the above in connection with a civil service examination, is now a <u>Legal</u> resident of the county of <u>Montgomery</u>, and State (Territory) of <u>Ohio</u>, and has been such resident for <u>21</u> years <u>1</u> months next preceding the date hereof. Dated at <u>West Carrollton</u>, county of <u>Montgomery</u>, and State (Territory) of <u>Ohio</u>.</p>			
<p>[OFFICIAL SEAL] <i>Clarence H. Blows</i> <p>My commission expires July 19, 1952</p> </p>			
<p>The Official seal must not be omitted. If erasure or correction is made in the "Officer's Certificate," certification must be made on margin by the officer who executes the certificate, showing such correction.</p>			

Index Number \Rightarrow Retail Cost of all Food and of Four
Selected Commodities 1925 = 100 FORM 1

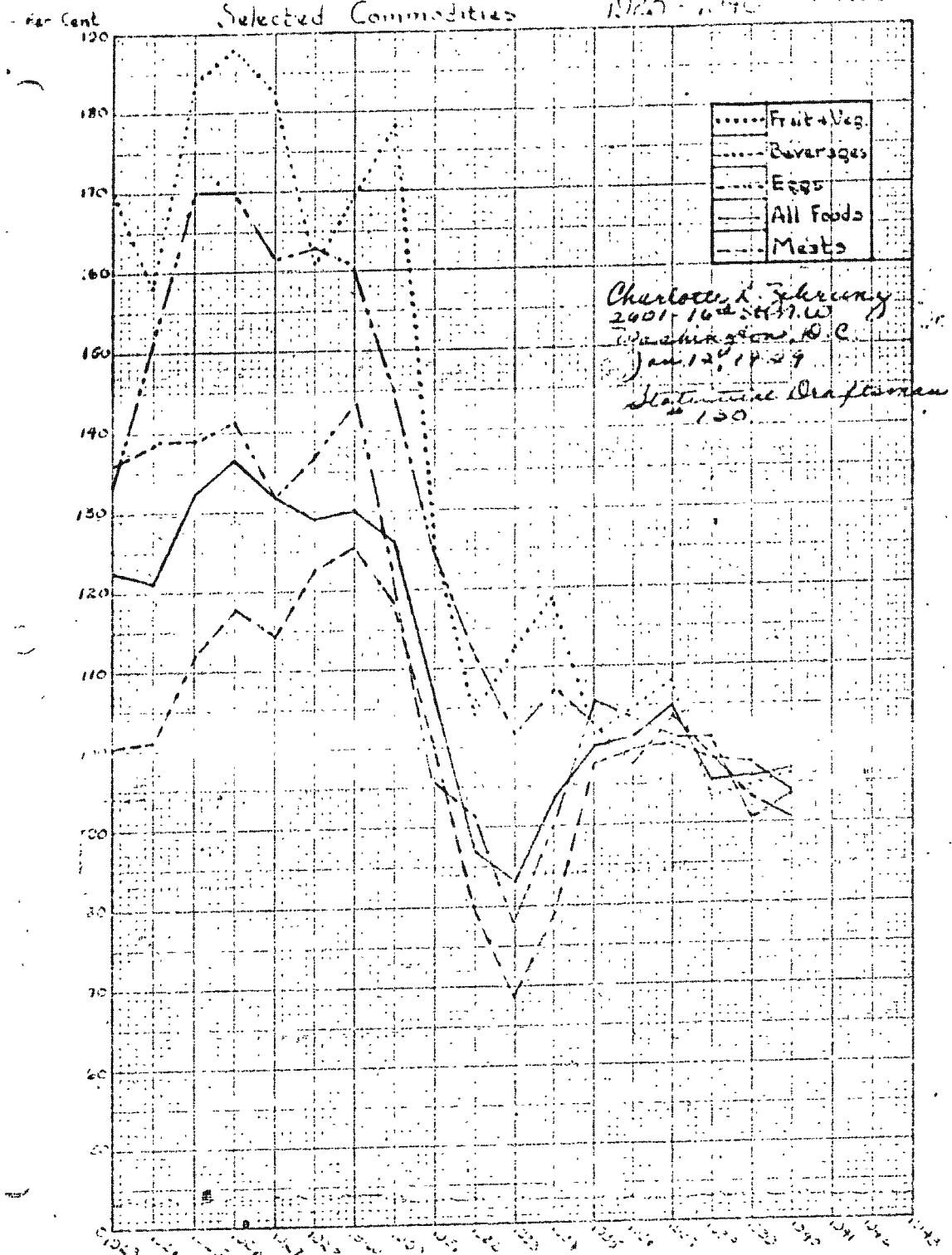
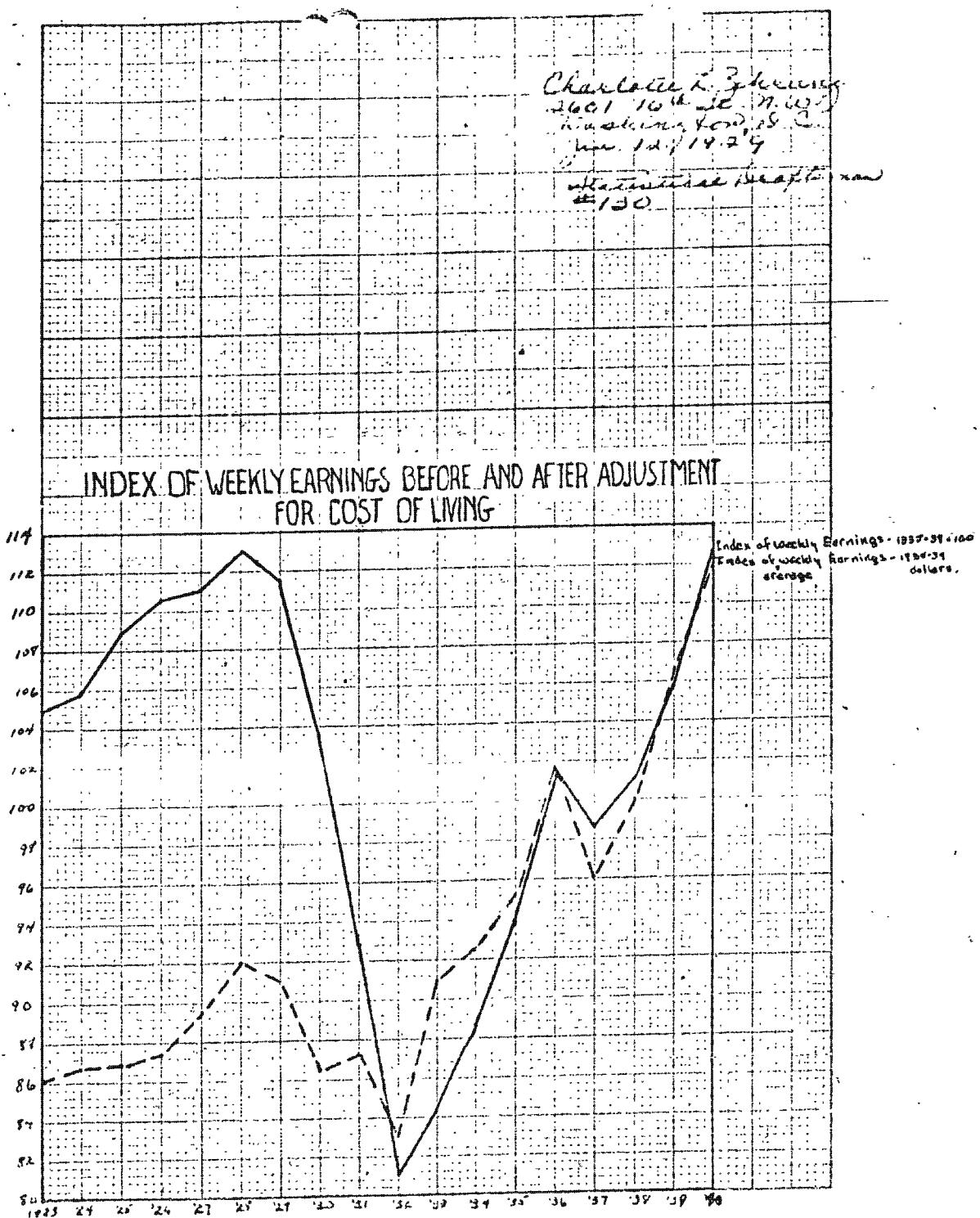


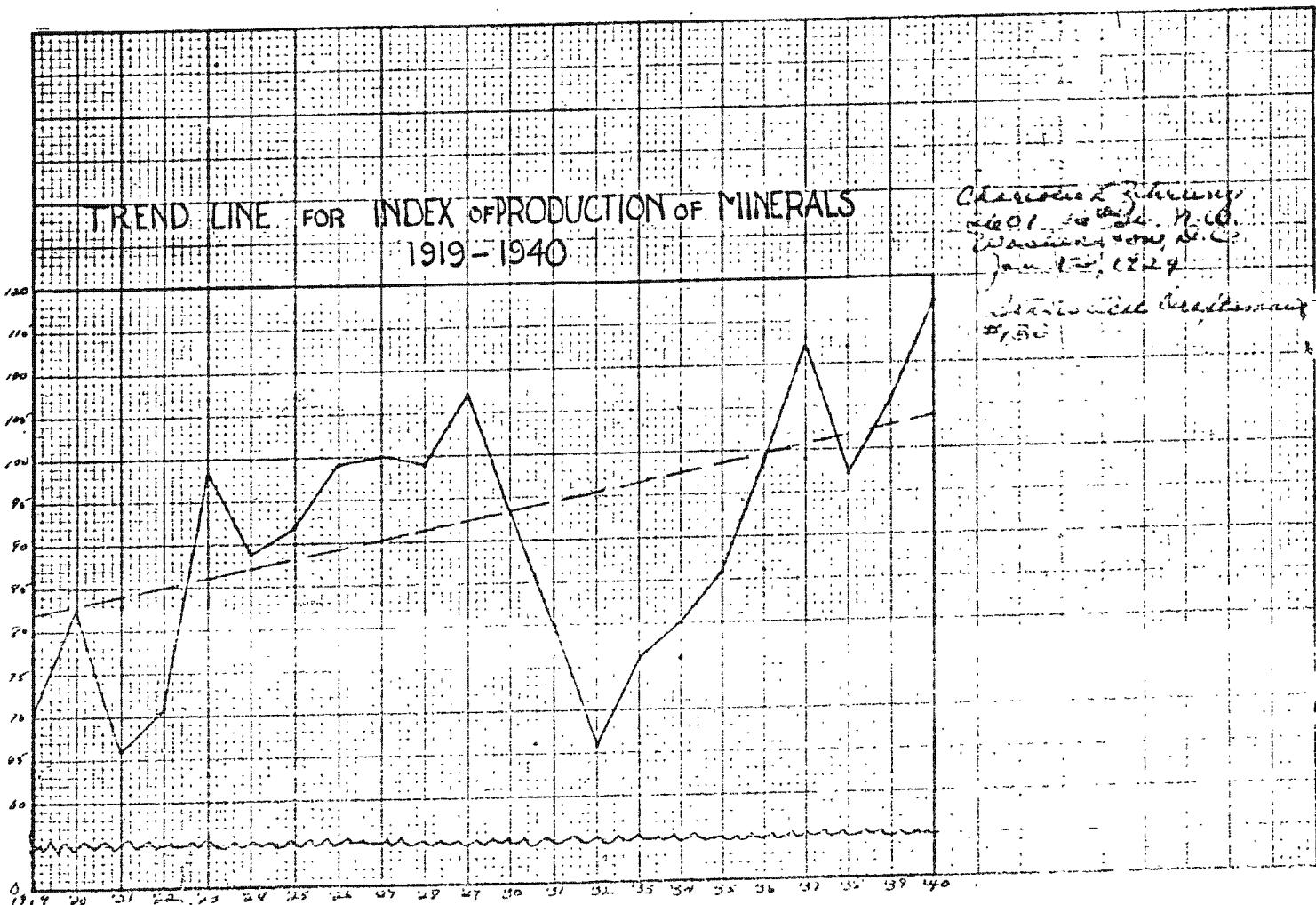
FIGURE 1



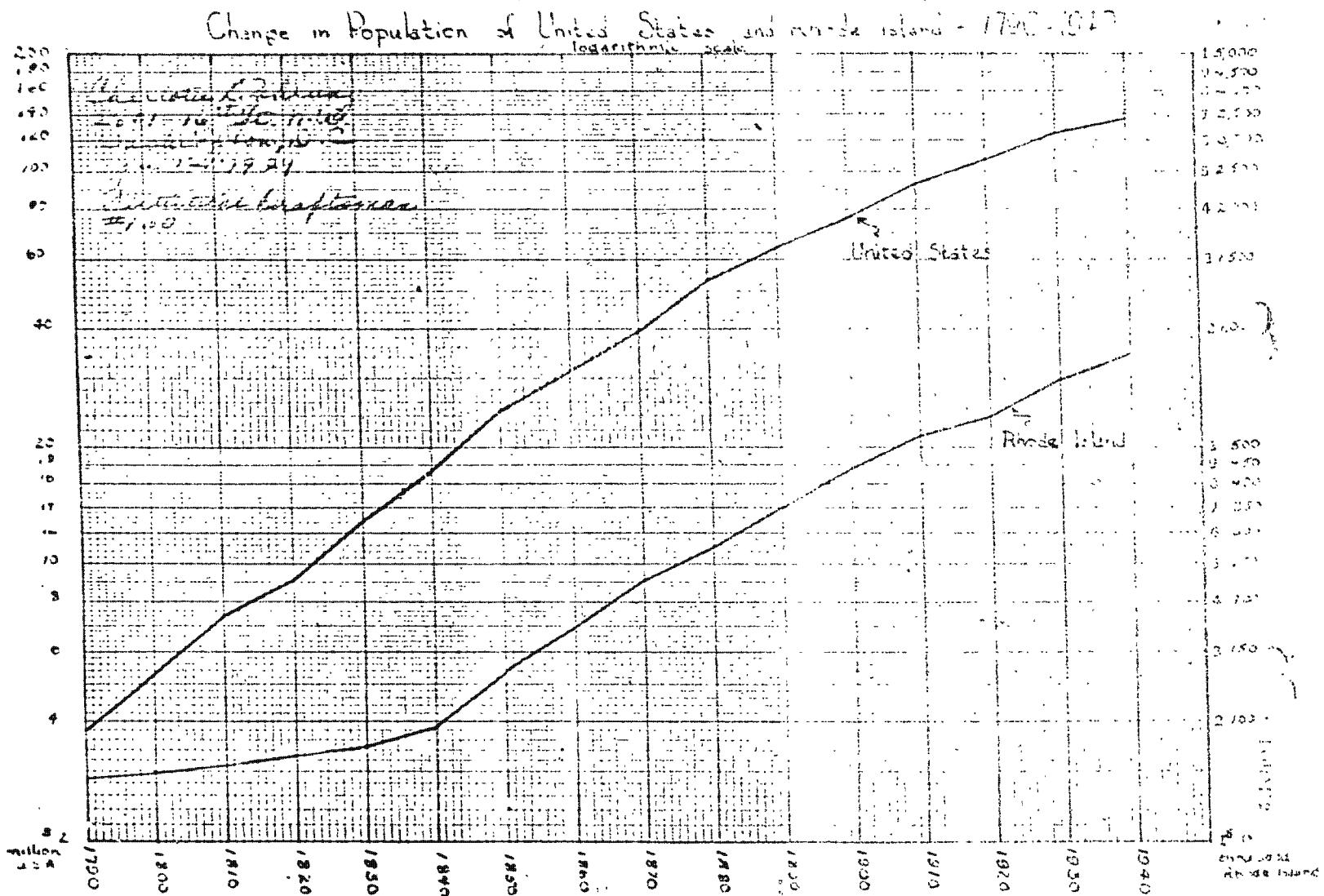
TREND LINE FOR INDEX OF PRODUCTION OF MINERALS
1919-1940

Chloro-alkali
6601 1924 N.C.
Waukesha, Wis.
Jan 1924

Standard Alkalies
St. Louis

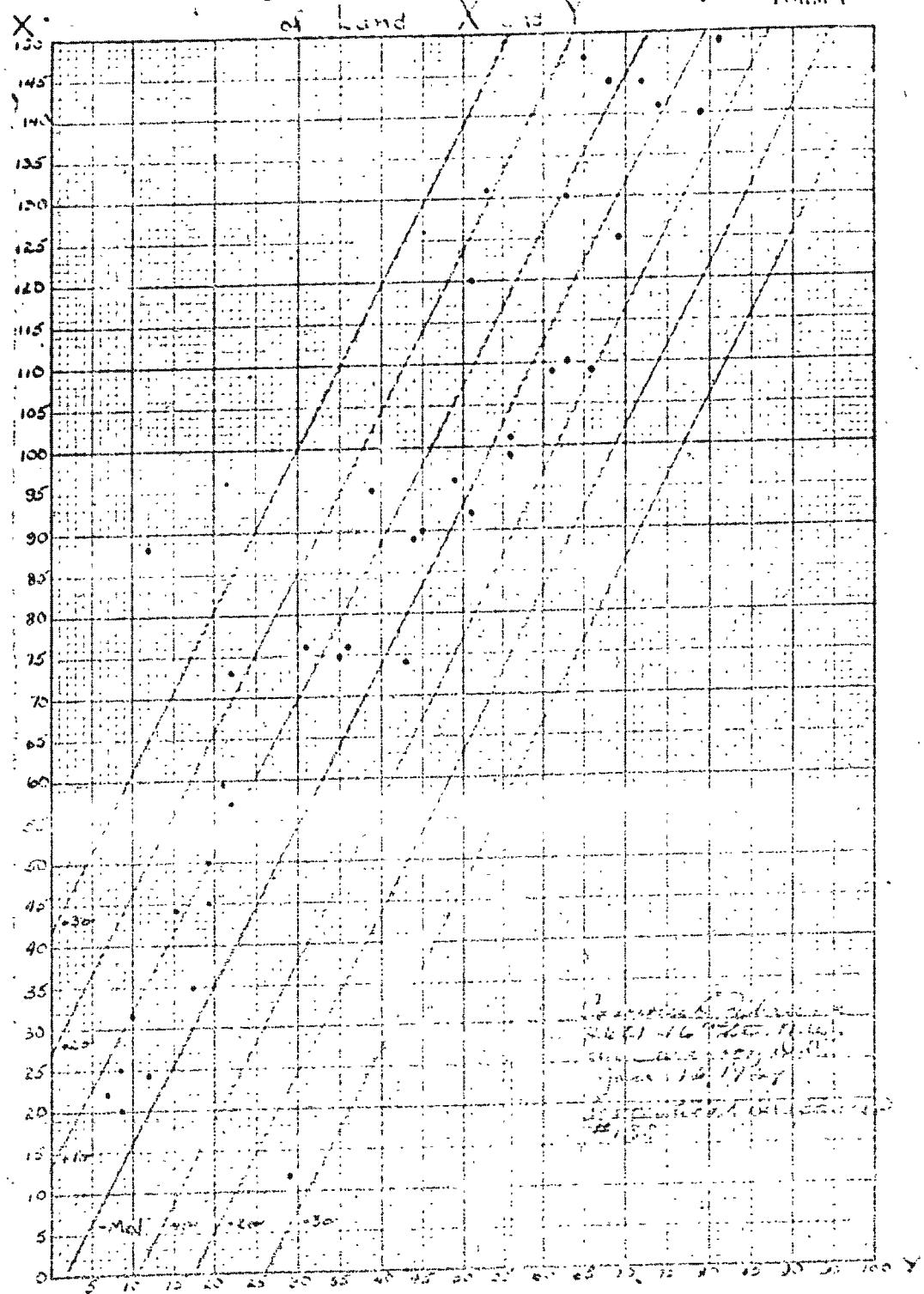


x = 6 mo.
origin 1929-1930.

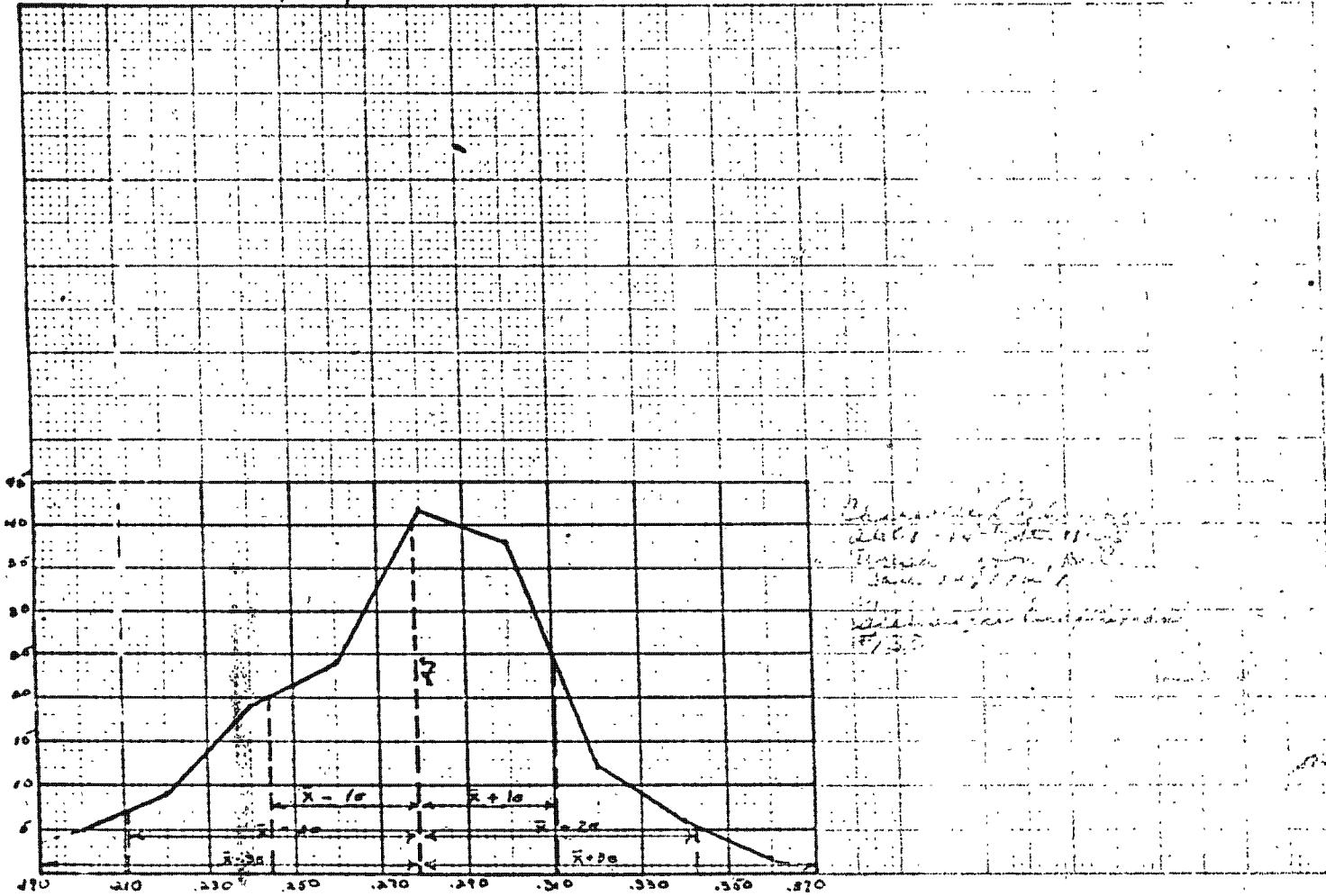


Scatter Diagram Relationship Between value
of Land X is Y

FORM I

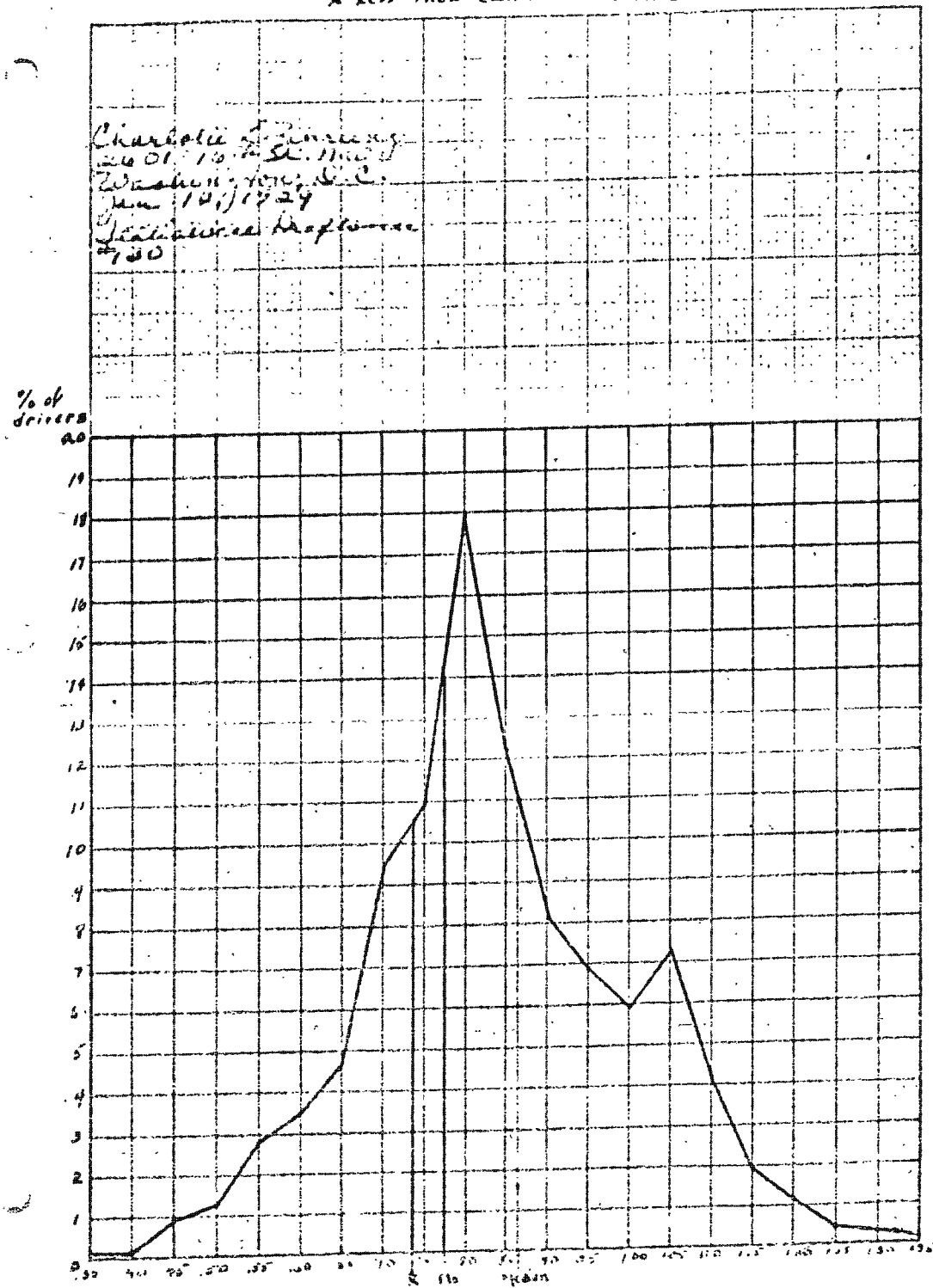


Frequency Distribution of Batting Records of 157 Regular American and National Leagues, 1946

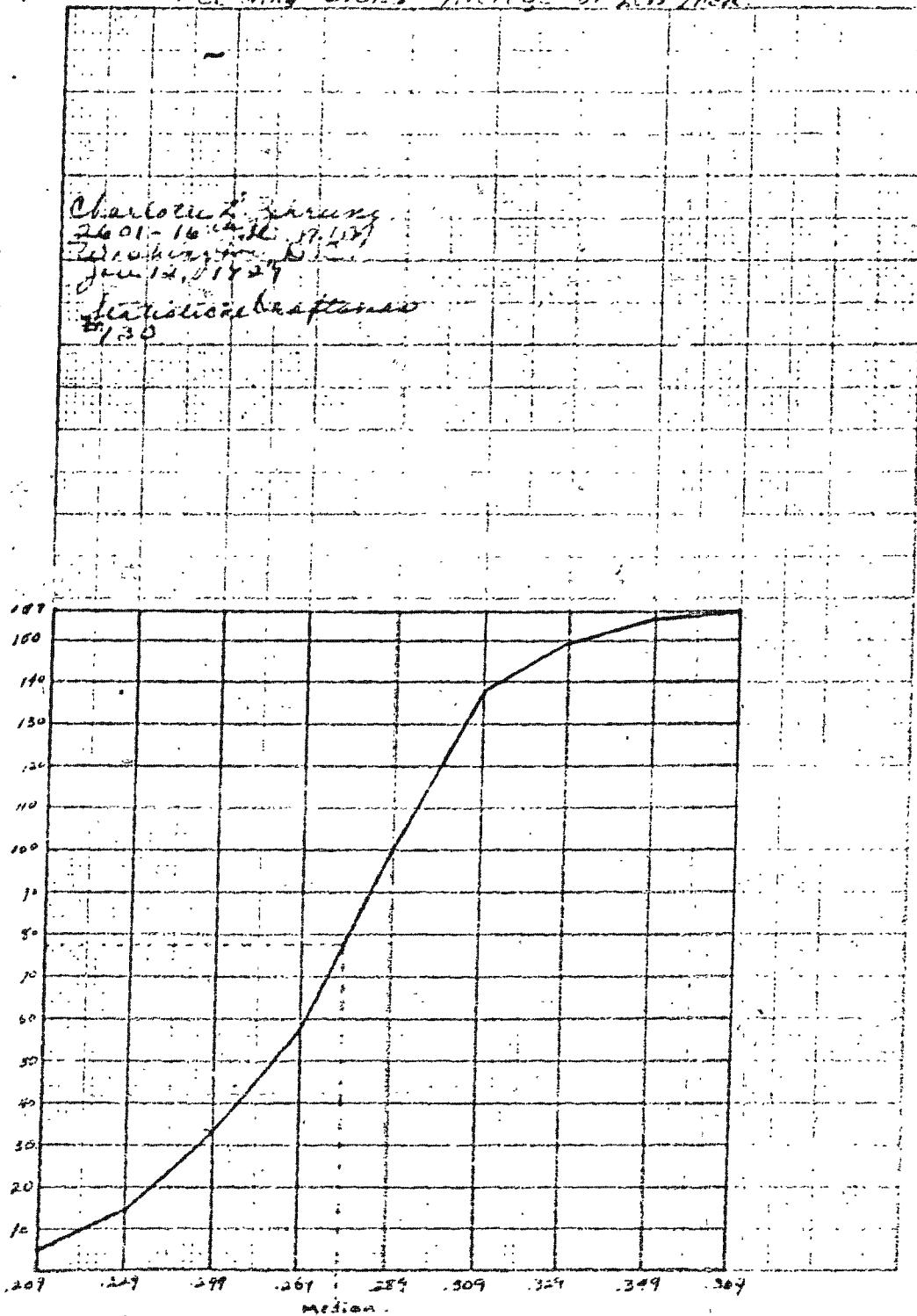


Cumulative Distribution of Hourly Rate & Wages of
 %'s of Union Motor Truck Drivers - June 1, 1940
 & Less than Cumulative Distribution

FORM 1



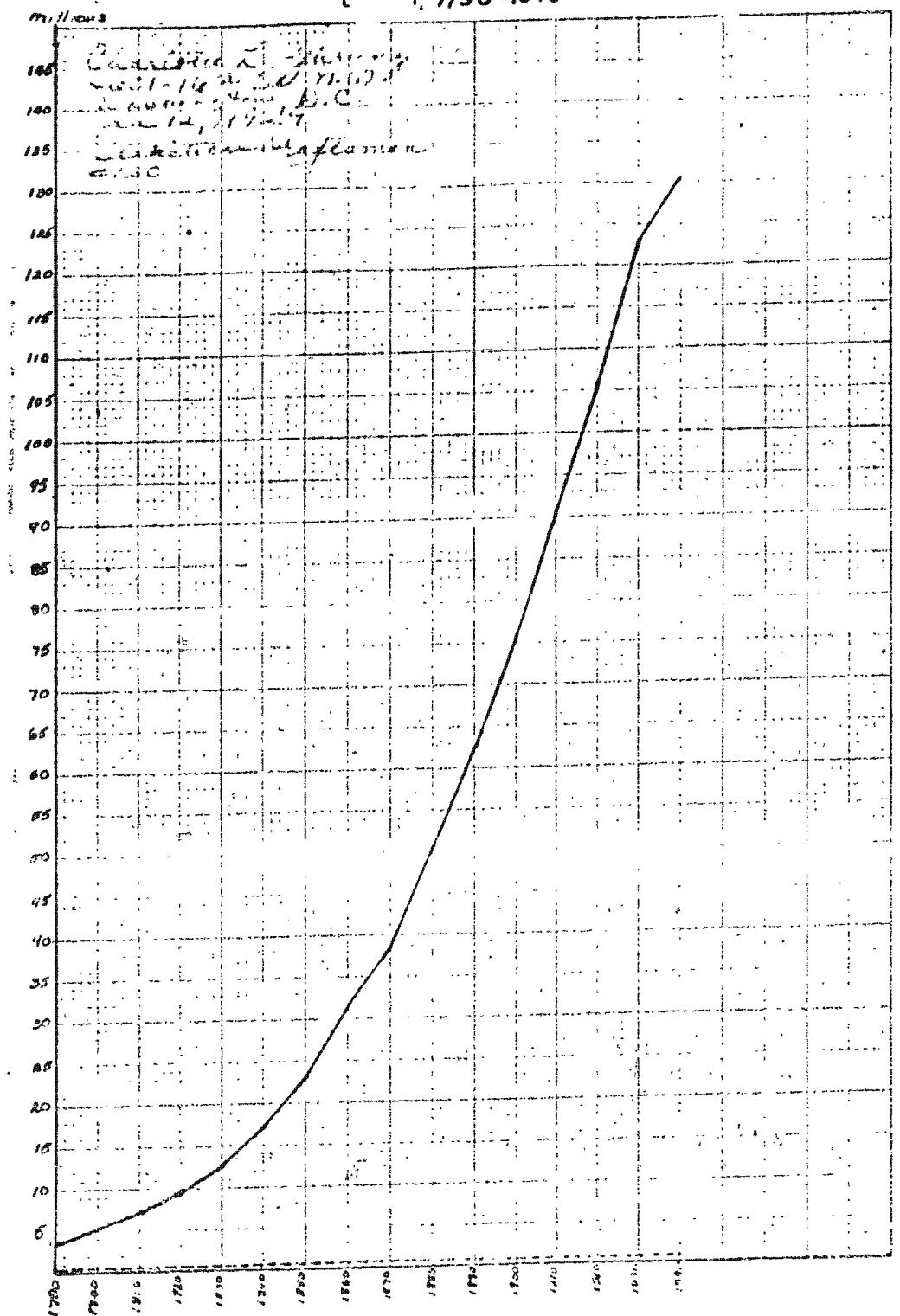
Cumulative Distribution of Batting Averages 1940
of American and National Leagues - 151 Negro Players
Showing Sides Average or Less than



Population of Continental United States and Rhode Island
1790-1940

FORM 1

millions



1790-1940
United States
Rhode Island

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<p>If more space is required, use a continuation sheet (Standard Form No. 38) or a sheet of paper the same size as this page. Write on each sheet your name, address, date of birth, and examination title. Attach to inside of this application.</p> <p>17. MILITARY TRAINING In the space below, describe any training received in the Armed Services (not already listed under Item 16) that would assist appointing officers in placing you most effectively. Indicate actual amount of training received, such as hours per week. Detailed information regarding any special service schools you attended is especially important. (Extra pages may be used to give full descriptions.)</p>																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																												
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ATTENDED		YEARS COMPLETED		DEGREES CONFERRED	SEVEN PER CREDIT	FROM	TO	DAY	NIGHT	TITLE	DATE	FALL		SPRING		JAN. Sem. 1945		Spring		Summer		JULY 1945		Summer		Fall		Sept. 1945		Fall		Spring		JAN. 1946		Spring		Summer		JULY 1946		Summer		Fall		Sept. 1946		Fall		Spring		JAN. 1947		Spring		Summer		JULY 1947		Summer		Fall		Sept. 1947		Fall		Spring		JAN. 1948		Spring		Summer		JULY 1948		Summer		Fall		Sept. 1948		Fall		Spring		JAN. 1949		Spring		Summer		JULY 1949		Summer		Fall		Sept. 1949		Fall		Spring		JAN. 1950		Spring		Summer		JULY 1950		Summer		Fall		Sept. 1950		Fall		Spring		JAN. 1951		Spring		Summer		JULY 1951		Summer		Fall		Sept. 1951		Fall		Spring		JAN. 1952		Spring		Summer		JULY 1952		Summer		Fall		Sept. 1952		Fall		Spring		JAN. 1953		Spring		Summer		JULY 1953		Summer		Fall		Sept. 1953		Fall		Spring		JAN. 1954		Spring		Summer		JULY 1954		Summer		Fall		Sept. 1954		Fall		Spring		JAN. 1955		Spring		Summer		JULY 1955		Summer		Fall		Sept. 1955		Fall		Spring		JAN. 1956		Spring		Summer		JULY 1956		Summer		Fall		Sept. 1956		Fall		Spring		JAN. 1957		Spring		Summer		JULY 1957		Summer		Fall		Sept. 1957		Fall		Spring		JAN. 1958		Spring		Summer		JULY 1958		Summer		Fall		Sept. 1958		Fall		Spring		JAN. 1959		Spring		Summer		JULY 1959		Summer		Fall		Sept. 1959		Fall		Spring		JAN. 1960		Spring		Summer		JULY 1960		Summer		Fall		Sept. 1960		Fall		Spring		JAN. 1961		Spring		Summer		JULY 1961		Summer		Fall		Sept. 1961		Fall		Spring		JAN. 1962		Spring		Summer		JULY 1962		Summer		Fall		Sept. 1962		Fall		Spring		JAN. 1963		Spring		Summer		JULY 1963		Summer		Fall		Sept. 1963		Fall		Spring		JAN. 1964		Spring		Summer		JULY 1964		Summer		Fall		Sept. 1964		Fall		Spring		JAN. 1965		Spring		Summer		JULY 1965		Summer		Fall		Sept. 1965		Fall		Spring		JAN. 1966		Spring		Summer		JULY 1966		Summer		Fall		Sept. 1966		Fall		Spring		JAN. 1967		Spring		Summer		JULY 1967		Summer		Fall		Sept. 1967		Fall		Spring		JAN. 1968		Spring		Summer		JULY 1968		Summer		Fall		Sept. 1968		Fall		Spring		JAN. 1969		Spring		Summer		JULY 1969		Summer		Fall		Sept. 1969		Fall		Spring		JAN. 1970		Spring		Summer		JULY 1970		Summer		Fall		Sept. 1970		Fall		Spring		JAN. 1971		Spring		Summer		JULY 1971		Summer		Fall		Sept. 1971		Fall		Spring		JAN. 1972		Spring		Summer		JULY 1972		Summer		Fall		Sept. 1972		Fall		Spring		JAN. 1973		Spring		Summer		JULY 1973		Summer		Fall		Sept. 1973		Fall		Spring		JAN. 1974		Spring		Summer		JULY 1974		Summer		Fall		Sept. 1974		Fall		Spring		JAN. 1975		Spring		Summer		JULY 1975		Summer		Fall		Sept. 1975		Fall		Spring		JAN. 1976		Spring		Summer		JULY 1976		Summer		Fall		Sept. 1976		Fall		Spring		JAN. 1977		Spring		Summer		JULY 1977		Summer		Fall		Sept. 1977		Fall		Spring		JAN. 1978		Spring		Summer		JULY 1978		Summer		Fall		Sept. 1978		Fall		Spring		JAN. 1979		Spring		Summer		JULY 1979		Summer		Fall		Sept. 1979		Fall		Spring		JAN. 1980		Spring		Summer		JULY 1980		Summer		Fall		Sept. 1980		Fall		Spring		JAN. 1981		Spring		Summer		JULY 1981		Summer		Fall		Sept. 1981		Fall		Spring		JAN. 1982		Spring		Summer		JULY 1982		Summer		Fall		Sept. 1982		Fall		Spring		JAN. 1983		Spring		Summer		JULY 1983		Summer		Fall		Sept. 1983		Fall		Spring		JAN. 1984		Spring		Summer		JULY 1984		Summer		Fall		Sept. 1984		Fall		Spring		JAN. 1985		Spring		Summer		JULY 1985		Summer		Fall		Sept. 1985		Fall		Spring		JAN. 1986		Spring		Summer		JULY 1986		Summer		Fall		Sept. 1986		Fall		Spring		JAN. 1987		Spring		Summer		JULY 1987		Summer		Fall		Sept. 1987		Fall		Spring		JAN. 1988		Spring		Summer		JULY 1988		Summer		Fall		Sept. 1988		Fall		Spring		JAN. 1989		Spring		Summer		JULY 1989		Summer		Fall		Sept. 1989		Fall		Spring		JAN. 1990		Spring		Summer		JULY 1990		Summer		Fall		Sept. 1990		Fall		Spring		JAN. 1991		Spring		Summer		JULY 1991		Summer		Fall		Sept. 1991		Fall		Spring		JAN. 1992		Spring		Summer		JULY 1992		Summer		Fall		Sept. 1992		Fall		Spring		JAN. 1993		Spring		Summer		JULY 1993		Summer		Fall		Sept. 1993		Fall		Spring		JAN. 1994		Spring		Summer		JULY 1994		Summer		Fall		Sept. 1994		Fall		Spring		JAN. 1995		Spring		Summer		JULY 1995		Summer		Fall		Sept. 1995		Fall		Spring		JAN. 1996		Spring		Summer		JULY 1996		Summer		Fall		Sept. 1996		Fall		Spring		JAN. 1997		Spring		Summer		JULY 1997		Summer		Fall		Sept. 1997		Fall		Spring		JAN. 1998		Spring		Summer		JULY 1998		Summer		Fall		Sept. 1998		Fall		Spring		JAN. 1999		Spring		Summer		JULY 1999		Summer		Fall		Sept. 1999		Fall		Spring		JAN. 2000		Spring		Summer		JULY 2000		Summer		Fall		Sept. 2000		Fall		Spring		JAN. 2001		Spring		Summer		JULY 2001		Summer		Fall		Sept. 2001		Fall		Spring		JAN. 2002		Spring		Summer		JULY 2002		Summer		Fall		Sept. 2002		Fall		Spring		JAN. 2003		Spring		Summer		JULY 2003		Summer		Fall		Sept. 2003		Fall		Spring		JAN. 2004		Spring		Summer		JULY 2004		Summer		Fall		Sept. 2004		Fall		Spring		JAN. 2005		Spring		Summer		JULY 2005		Summer		Fall		Sept. 2005		Fall		Spring		JAN. 2006		Spring		Summer		JULY 2006		Summer		Fall		Sept. 2006		Fall		Spring		JAN. 2007		Spring		Summer		JULY 2007		Summer		Fall		Sept. 2007		Fall		Spring		JAN. 2008		Spring		Summer		JULY 2008		Summer		Fall		Sept. 2008		Fall		Spring		JAN. 2009		Spring		Summer		JULY 2009		Summer		Fall		Sept. 2009		Fall		Spring		JAN. 2010		Spring		Summer		JULY 2010		Summer		Fall		Sept. 2010		Fall		Spring		JAN. 2011		Spring		Summer		JULY 2011		Summer		Fall		Sept. 2011		Fall		Spring		JAN. 2012		Spring		Summer		JULY 2012		Summer		Fall		Sept. 2012		Fall		Spring		JAN. 2013		Spring		Summer		JULY 2013		Summer		Fall		Sept. 2013		Fall		Spring		JAN. 2014		Spring		Summer		JULY 2014		Summer		Fall		Sept. 2014		Fall		Spring		JAN. 2015		Spring		Summer		JULY 2015		Summer		Fall		Sept. 2015		Fall		Spring		JAN. 2016		Spring		Summer		JULY 2016		Summer		Fall		Sept. 2016		Fall		Spring		JAN. 2017		Spring		Summer		JULY 2017		Summer		Fall		Sept. 2017		Fall		Spring		JAN. 2018		Spring		Summer		JULY 2018		Summer		Fall		Sept. 2018		Fall		Spring		JAN. 2019		Spring		Summer		JULY 2019		Summer		Fall		Sept. 2019		Fall		Spring		JAN. 2020		Spring		Summer		JULY 2020		Summer		Fall		Sept. 2020		Fall		Spring		JAN. 2021		Spring		Summer		JULY 2021		Summer		Fall		Sept. 2021		Fall		Spring		JAN. 2022		Spring		Summer		JULY 2022		Summer		Fall		Sept. 2022		Fall		Spring		JAN. 2023		Spring		Summer		JULY 2023		Summer		Fall		Sept. 2023		Fall		Spring		JAN. 2024		Spring		Summer		JULY 2024		Summer		Fall		Sept. 2024		Fall		Spring		JAN. 2025		Spring		Summer		JULY 2025		Summer		Fall		Sept. 2025		Fall		Spring		JAN. 2026		Spring		Summer		JULY 2026		Summer		Fall		Sept. 2026		Fall		Spring		JAN. 2027		Spring		Summer		JULY 2027		Summer		Fall		Sept. 2027		Fall		Spring		JAN. 2028		Spring		Summer		JULY 2028		Summer		Fall		Sept. 2028		Fall		Spring		JAN. 2029		Spring		Summer		JULY 2029		Summer		Fall		Sept. 2029		Fall		Spring		JAN. 2030		Spring		Summer		JULY 2030		Summer		Fall		Sept. 2030		Fall		Spring		JAN. 2031		Spring		Summer		JULY 2031		Summer		Fall		Sept. 2031		Fall		Spring		JAN. 2032		Spring		Summer		JULY 2032		Summer		Fall		Sept. 2032		Fall		Spring		JAN. 2033		Spring		Summer		JULY 2033		Summer		Fall		Sept. 2033		Fall		Spring		JAN. 2034		Spring		Summer		JULY 2034		Summer		Fall		Sept. 2034		Fall		Spring		JAN. 2035		Spring		Summer		JULY 2035		Summer		Fall		Sept. 2035		Fall		Spring		JAN. 2036		Spring		Summer		JULY 2036		Summer		Fall		Sept. 2036		Fall		Spring		JAN. 2037		Spring		Summer		JULY 2037		Summer		Fall		Sept. 2037		Fall		Spring		JAN. 2038		Spring		Summer		JULY 2038		Summer		Fall		Sept. 2038		Fall		Spring		JAN. 2039		Spring		Summer		JULY 2039		Summer		Fall		Sept. 2039		Fall		Spring		JAN. 2040		Spring		Summer		JULY 2040		Summer		Fall		Sept. 2040		Fall		Spring		JAN. 2041		Spring		Summer		JULY 2041		Summer		Fall		Sept. 2041		Fall		Spring		JAN. 2042		Spring		Summer		JULY 2042		Summer		Fall		Sept. 2042		Fall		Spring		JAN. 2043		Spring		Summer		JULY 2043		Summer		Fall		Sept. 2043		Fall		Spring		JAN	
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24. RELATIVES. List three persons living in the United States or Territories of the United States who are NOT related to you and who have definite knowledge of your character, habits and fitness for the position for which you are applying. Do not repeat names of supervisors listed under Item 18 (EXPERIENCE).		25. BUSINESS OR OCCUPATION	
FIRL NAME		(Give complete current address, including street and number)	
Mr Harry Schwartz		113 Remacy Ave Syracuse teacher	
Miss Theodosia Moran		Cazenovia N.Y. RD #2 teacher	
Mr. Herbert Hauldermen		11 Windline Way Dayton, O. Frisbee Inc.	
INDICATE "YES" OR "NO" ANSWER BY PLACING "X" IN PROPER COLUMN			
25. ARE YOU OR HAVE YOU EVER BEEN AN OFFICIAL OR EMPLOYEE OF ANY STATE, TERRITORY, COUNTY, OR MUNICIPALITY?		YES NO	
26. ARE YOU A CITIZEN OF OR DO YOU OWE ALLEGIANCE TO THE UNITED STATES?		<input checked="" type="checkbox"/> YES <input type="checkbox"/> NO	
27. ARE YOU NOW OR HAVE YOU EVER BEEN A MEMBER OF THE COMMUNIST PARTY U.S.A. OR ANY COMMUNIST ORGANIZATION?		<input checked="" type="checkbox"/> YES <input type="checkbox"/> NO	
28. ARE YOU NOW OR HAVE YOU EVER BEEN A MEMBER OF A FASCIST ORGANIZATION?		<input checked="" type="checkbox"/> YES <input type="checkbox"/> NO	
29. ARE YOU, NOW OR HAVE YOU EVER BEEN A MEMBER OF ANY ORGANIZATION, ASSOCIATION, MOVEMENT GROUP, OR COMBINATION OF PERSONS WHICH ADVOCATES THE OVERTHROW OF OUR CONSTITUTIONAL FORM OF GOVERNMENT, OR OF AN ORGANIZATION, ASSOCIATION, MOVEMENT GROUP, OR COMBINATION OF PERSONS WHICH HAS ADOPTED A POLICY OF ADVOCATING OR APPROVING THE COMMISIION OF ACTS OF FORCE OR VIOLENCE TO DENY OTHER PERSONS THEIR RIGHTS UNDER THE CONSTITUTION OF THE UNITED STATES OR OF SEEKING TO ALTER THE FORM OF GOVERNMENT OF THE UNITED STATES BY UNCONSTITUTIONAL MEANS?		<input checked="" type="checkbox"/> YES <input type="checkbox"/> NO	
If your answer to question 27, 28, or 29 above is "Yes," state in Item 54 the names of all such organizations, associations, movements, groups, or combination of persons and dates of membership. Give complete details of your activities therein and make any explanation you desire regarding your membership or activities therein.			
30. SINCE YOUR 18TH BIRTHDAY, HAVE YOU EVER BEEN ARRESTED, INDICTED OR SENTENCED TO COURT AS A DEFENDANT IN A CRIMINAL PROSECUTION OR CONVICTION, FINED OR IMPRISONED OR PLACED ON PROBATION OR HAVE YOU EVER BEEN ORDERED TO DEPOSIT BAIL OR COLLATERAL FOR THE VIOLATION OF AN LAW, POLICE REGULATION OR ORDINANCE (EXCLUDING MINOR TRAFFIC VIOLATIONS FOR WHICH A FINE OR FORFEITURE OF \$15 OR LESS WAS IMPOSED)?		<input checked="" type="checkbox"/> YES <input type="checkbox"/> NO	
If your answer is "Yes," list all such cases under Item 39 below. Give in each case (1) the date; (2) the nature of the offense or violation; (3) the name and location of the court; (4) the penalty imposed, if any, or other disposition of the case. If applicable, your fingerprints will be taken.			
31. HAVE YOU EVER BEEN DISCHARGED OR FORCED TO RESIGN, FOR MISCONDUCT OR UNSATISFACTORY SERVICE FROM ANY POSITION?		<input checked="" type="checkbox"/> YES <input type="checkbox"/> NO	
If your answer is "Yes," give in Item 39 the name and address of employer, date, and reason in each case.			
32. HAVE YOU EVER BEEN BARRED BY THE U. S. CIVIL SERVICE COMMISSION FROM TAKING EXAMINATIONS OR ACCEPTING CIVIL SERVICE APPOINTMENTS?		<input checked="" type="checkbox"/> YES <input type="checkbox"/> NO	
If your answer is "Yes," give dates of and reasons for such disbarment in Item 39.			
33. HAVE YOU EVER BEEN CONSIDERED UNFIT FOR THE WORK WHICH YOU ARE CONSIDERED ABLE TO WORK?		<input checked="" type="checkbox"/> YES <input type="checkbox"/> NO	
If your answer is "Yes," give complete details in Item 39 so that compensation can be given to your physical fitness for the job.			
34. DO YOU RECEIVE AN ANNUITY FROM THE UNITED STATES OR DISTRICT OF COLUMBIA GOVERNMENT UNDER ANY VETERAN ACT OR ANY PENSION OR OTHER COMPENSATION FOR MILITARY OR NAVAL SERVICE?		<input checked="" type="checkbox"/> YES <input type="checkbox"/> NO	
If your answer is "Yes," give complete details in Item 39.			
35. SPACE FOR DETAILED ANSWERS TO OTHER QUESTIONS. (Indicate item numbers to which answers apply.)			
ITEM NO.		ITEM NO.	
<p>If more space is required, use paper the same size as this page. Write on each sheet your name, address, date of birth, and examination date. Attach to inside of this application.</p> <p>Before signing this application check back over it to make sure that you have answered ALL questions correctly.</p> <p>I CERTIFY that the statements made by me in this application are true, complete, and correct to the best of my knowledge and belief, and are made in good faith.</p> <p>False statement on this application is punishable by Law (U. S. Code, Title 18, Section 80).</p>			
* SIGNATURE OF APPLICANT		Charles L. Schwartz	
<p>(Sign your name in INK (one given), first name, middle initial, and surname). At female, prefix Miss or Mrs. and if married use your own given name as "Mrs. Edna L. Doe".</p>			

If new space is required, use paper the same size as this page. Write on each sheet your name, address, date of birth, and examination route. Attach to inside of this application.

Before signing this application check back over it to make sure that you have answered ALL questions correctly.
I CERTIFY that the statements made by me in this application are true, complete, and correct to the best of my knowledge
and belief, and are made in good faith.

* SIGNATURE OF APPLICANT *Charles F. Schreiner*
(Sign your name in ink (not given
in type) in the space provided,
and print your name below it.)